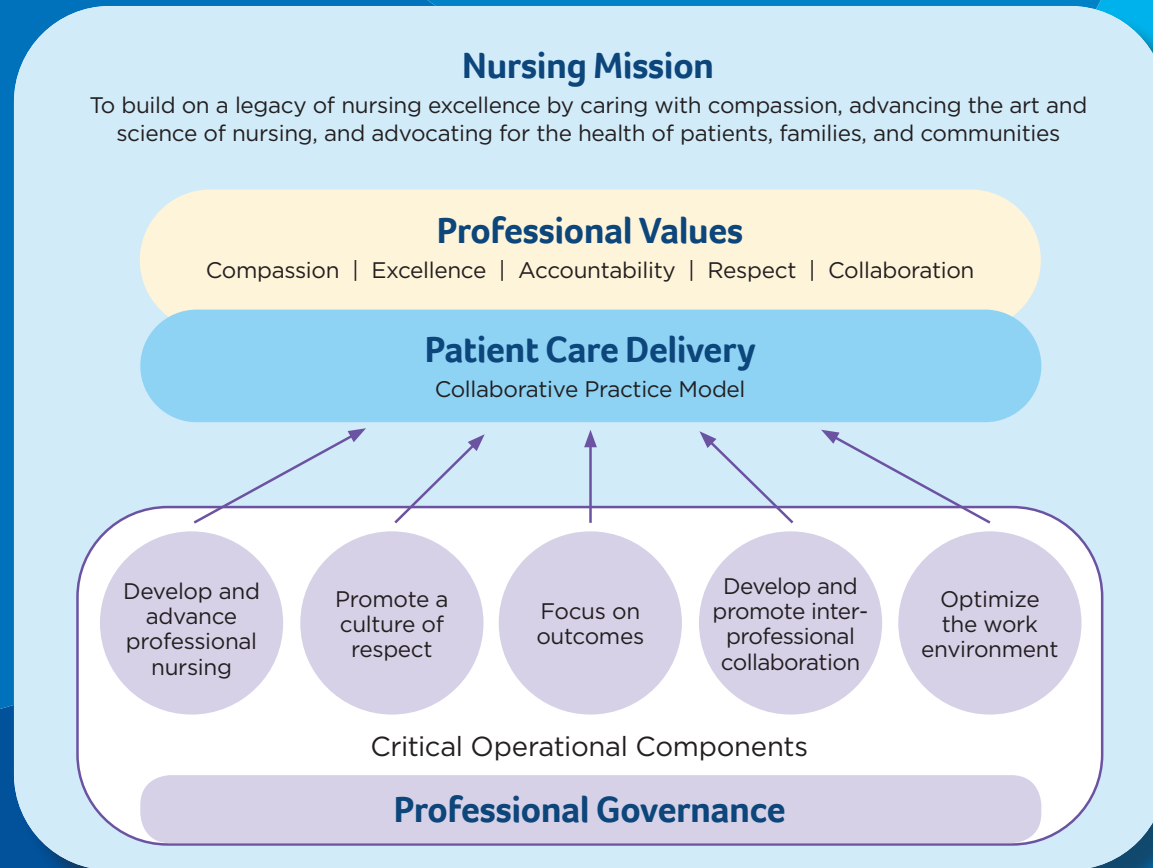




The Lois E. Silverman Department of Nursing
2022 Annual Report



Model for Professional Nursing Practice at BIDMC



Professional nursing at BIDMC is driven by its nursing mission and is grounded in the values of compassion, excellence, accountability, respect, and collaboration. It does not exist in isolation, but is developed and nurtured in tandem with professional values and professional relationships. A Collaborative Practice Model supports a vibrant patient care delivery system, through which critical operational components are advanced, supported by Nursing Professional Governance. Look for tagged examples of the **Critical Operational Components** of our practice model throughout this report.

Excellence and Resilience



We have much to reflect on and to be proud of as we look back on the work of our nursing service in 2022. Against continuing, unprecedented challenges, our nurses showed extraordinary resilience and resolve as they held true to our mission to **build on a legacy of excellence**. Our nurses provided care in an environment that was changing under their feet, and continues to do so, driven by the effects of the long COVID-19 pandemic on workflow, supply chains, and the composition of our workforce.

Yet what we saw was a commitment to excellence in patient care and to progress as a nursing service that did not falter. Our governance councils increased their influence; we recognized new fellows in our [RESA program](#); we welcomed [15 new DNP graduates](#) from the Simmons partnership and [11 BSN graduates](#) from the Emmanuel program; we saw dozens of nurses obtain [specialty certification](#) and pursue [advanced academic degrees](#); and nurses throughout our medical center led countless quality and continuous improvement initiatives.

As you know, late last year, all of this work helped earn the medical center **the prestigious distinction as a Magnet organization**—the gold standard for nursing excellence. This designation, in the midst of continuing strains and challenges in the workplace, demonstrates the strength, resilience, integrity, and commitment of our truly outstanding nursing staff.

Steering the ship through all of this work was our former Senior Vice President for Patient Care Services and Chief Nursing Officer, **Marsha Maurer**. I believe the influence of this truly visionary leader will remain with our organization for years to come. Among her many talents, Marsha had the ability and the wisdom to bring out the best in every member of the team. She understood the centrality of the nursing role, both in leadership and at the bedside. **Under her leadership, we thrived**—as individuals and as an organization. I believe I can speak for all in expressing deep gratitude for everything she taught us and wishing her the best in her well-deserved retirement.

It's been very gratifying for me to serve as interim CNO, getting to know more of you as we continue to refine our shared work of excellence in patient care, advancing the art and science of nursing, and advocating for the health of patients, families, and communities. Thank you for all that you do.

Jane Foley, DNP, MHA, RN
Interim Senior Vice President, Patient Care Services
Interim Chief Nursing Officer
Beth Israel Deaconess Medical Center

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Remarkable Achievements



I've often remarked that the nurses at BIDMC are **the backbone of our clinical care**. Their dedication, teamwork, and commitment play a critical role every day in delivering the best care to our patients and their families. In 2022, after a three-year journey, their efforts led to the extraordinary achievement of [Magnet](#) designation. Attaining this Magnet credential puts BIDMC in an elite group—**only 10% of US hospitals have earned Magnet recognition**—and affirms what we already know...that our nurses are among **the best in the nation**. The designation also enhances the reputation of our hospital and strengthens our ability to carry out our mission.

You will read more about the Magnet journey in this year's report, as well as updates on professional governance, nursing quality metrics, academic advancement programs, and new nursing recognition programs including [the DAISY Award](#), which offers patients and families the opportunity to directly recognize our nurses in a meaningful way.

Looking back on year three of the COVID-19 pandemic, we owe our nursing staff our gratitude for their strength and professionalism as they consistently went **above and beyond to provide expert, compassionate patient care**, even in the midst of unprecedented high acuity and staffing challenges.

I'd like to add my thanks to outgoing CNO, **Marsha Maurer**, whose **outstanding leadership** in 2022 and the many years previous cannot be overstated. You will read in this report of Marsha's designation as a [Fellow in the American Academy of Nursing](#)—a distinction richly deserved.

You all have my enduring thanks and utmost respect. Congratulations on all you have accomplished this past year.

Peter Healy
President
Beth Israel Deaconess Medical Center

BIDMC receives Magnet designation!



On Nov. 17, Beth Israel Deaconess Medical Center received word from the ANCC Magnet Recognition Program® that it had met the criteria for designation as a Magnet organization, widely recognized as the top honor an organization can receive for nursing excellence and one earned by only 10% of US hospitals to date. It was the culmination of a journey, launched in 2019, that proceeded on its original timeline, despite the unprecedented challenges posed by the COVID-19 pandemic. The work saw new systems

and programs come online, designed to support and strengthen nursing practice. Late in 2021, a document of more than 3,000 pages had been submitted to the ANCC, outlining the ways in which nursing at BIDMC embodied the Magnet themes. In 2022, dozens of staff worked to prepare for a site visit, where ANCC appraisers would speak directly to staff to hear about the Magnet themes in action and make a determination about designation.

Local champions: Partners in Nursing Excellence

Early in the year, almost 90 frontline clinical staff who had volunteered to serve as local Magnet champions gathered for a kickoff event. Dubbed **Partners in Nursing Excellence** (PNEs), their charge was to ensure that their colleagues on the units could speak to how their practice was connected to the Magnet themes. **Shelley Calder**, DNP, RN, Associate Chief Nurse for Professional Development, Research, and Magnet, and **Scott Rollins**, DNP, RN, former Magnet Program Director, said the task of the PNEs was to “Communicate, Educate, and Engage” as they worked with colleagues to prepare for the site visit. Calder believes that having such an enthusiastic group of frontline staff leading this work proved critical. **“Having these staff in the PNE role helped to both drive and operationalize a readiness game plan for the site visit,”** she says.

The PNE group met monthly, focusing on one or more of the Magnet domains and sharing ideas about how to ensure their colleagues on the units were familiar with them. They created **“Nursing Excellence Boards”** to help staff visually associate existing work with the Magnet themes. Using newsletters and other methods, the PNEs found creative, effective ways to talk to their colleagues about all things Magnet.



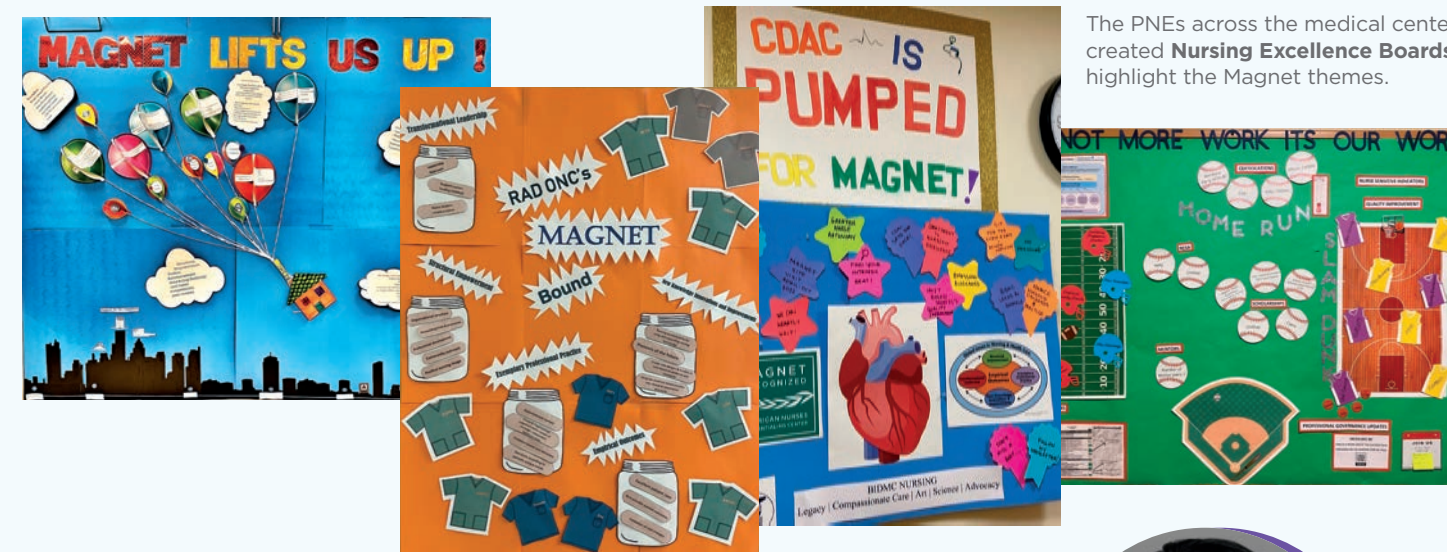
Becki White, MSN, RN, CEN, TCRN

In her role as a **Partner in Nursing Excellence**, White, a Clinical Nurse in the Emergency Department (ED) and a **RESA Nurse Fellow**, said her passion for professional development helped her talk to her colleagues about transformational leadership in the ED. She said, **“I am very involved in helping to lead various transformational projects in the ED, including increasing specialty certification, implementing a new graduate program, co-facilitating competency day, and co-facilitating the mentorship program in the ED.”**



Caitlin Malcolm, MSN, RN

As a Clinical Nurse and unit educator for the float pool and a member of her team’s governance council, Malcolm explained why she volunteered to be a **Partner in Nursing Excellence**: **“I believe the Magnet designation will recognize the work our nurses have done and are doing, and I want to support nursing practice.”**



The PNEs across the medical center created **Nursing Excellence Boards** to highlight the Magnet themes.



Bo Kim-Kopec, MPH, BSN, RN, CCRN
Kim-Kopec is a Clinical Nurse and unit educator in interventional cardiology and a **RESA Nurse Fellow**. She served as a Magnet Appraiser Escort, commenting, **“I have had the honor of working alongside brilliant nurses. It has been incredibly humbling to be part of this team. The opportunity to represent my department is a privilege. I look forward to highlighting the ways we continue to refine our practice.”**



Caitlyn Winchell, BSN, RN

Winchell is a Clinical Nurse and unit educator in critical care. On becoming a **Magnet Appraiser Escort**, she commented, **“I believe Magnet is an opportunity to not only recognize the excellent work that nurses here do, but also to show the nursing staff that they are valued.”**

Appraiser escorts and mock site visit

When the medical center learned that the virtual site visit was set for September, planners got to work preparing a mock site visit for early August. Eight nurses from the PNE group were named **Magnet Appraiser Escorts**, receiving special training and preparation for the visit. They helped ready technology for the virtual visit format, including the use of rolling iPads that would bring appraisers to units, conference rooms, and offices to meet teams of staff and/or leaders. Calder says, **“As much as possible, we structured the mock visit to resemble the ‘real thing.’ It was a great chance to identify and address any challenges that emerged.”**

Site visit

When the actual four-day survey began on Sept 12, BIDMC was ready. The Magnet Appraiser Escorts “brought” appraisers to 86 units/departments, 15 group sessions, and 10 breakfast/lunch roundtables where staff talked about their practice and answered questions. Staff shared their Nursing Excellence Boards and talked about the work that was represented. They also shared stories about teamwork and collaboration, how they teach and mentor new staff, and the exemplary care they are proud to provide. **Claire Cruz**, DNP, RN, Nursing Director on Stoneman 5, said her staff described caring for one particularly complex patient. **“They were so proud of the care they gave to this patient and family,”** said Cruz. **“The session ended in tears. It was heartfelt by all.”**

In a leadership debrief meeting at the end of the visit, **Marsha Maurer**, DNP, RN, former Senior Vice President for Patient Care Services and Chief Nursing Officer, said the appraisers were effusive in their praise of nursing at BIDMC. **“They shared a long list of the amazing things they heard from all of you,”** she said. **“They said staff were gracious, engaged, and committed to improvement. That staff described a culture that ‘felt like family.’”**

(cont’d on pg 4)

ADDITIONAL MAGNET APPRAISER ESCORTS



Kathleen Bueschen, BSN, RN



Lindsay Duphiney, MSN, RN, MEDSURG-BC



Clara Heiden, BSN, RN, MEDSURG-BC



Diana Roth, MSN, RN



Bridget Smiddy, BSN, RN



Megan Swede, BSN, RN, CMSRN, CCRN



Magnet designation call

While the waiting was difficult, Maurer, Calder, and Rollins finally got word that the decision of the ANCC would be announced over a Zoom call at 8:30 a.m. on Nov. 17. Anticipating good news, the team invited clinical nurses, nurse leaders, and invited guest (including *Wally the Green Monster*, the mascot of the Boston Red Sox), to gather in the conference room of the new Klarman Building in front of a large view screen. Soon, **Jeanette Ives Erickson**, DNP, RN, Chair of the ANCC's Commission on Magnet Recognition, and **Karen Wentzel**, RN, Senior Magnet Program Analyst, were in front of the crowd. **"The Magnet Commission has reviewed all of your submitted documentation and the findings from your site visit,"** Erickson said. **"As a result of the final review, it's my honor to officially notify you that the Commission on Magnet has unanimously voted to credential Beth Israel Deaconess Medical Center as a Magnet organization. Congratulations everyone!"**

Following the cheers, Maurer addressed the group, expressing her thanks to all the nurses at BIDMC. **"To all of you who built the enduring infrastructure—professional governance, transition to practice, mentoring, RESA, certification, evidence-based practice, and so many other important programs and initiatives—you are what has led us to achieving Magnet,"** she said. **"You have built a professional nursing enterprise that will serve our patients, our organization, and our profession now and into the future. It's extraordinary what you have done. Thank you."**



In October, an energized delegation of BIDMC nurses attended the 2022 Magnet Conference in Philadelphia, joining more than 11,000 nurses from across the nation to "Educate, Innovate, and Celebrate!" At the 2023 conference, BIDMC will be acknowledged on stage as a newly designated Magnet organization.



Professional governance continues to thrive

The Nursing Professional Governance Councils at BIDMC had an active year in 2022. With **52 unit-based councils, five clinical nurse central councils, leadership councils, and more than 200 participants**, the governance structure is a critical operational component of nursing at BIDMC. In an early 2022 message to staff, **Shelley Calder**, DNP, RN, Associate Chief Nurse for Professional Development, Research, and Magnet, emphasized the importance of the council work. **"Your voice, your practice, your profession' is a phrase created by clinical nurses during the redesign of the governance structure in 2019, when the stresses of COVID-19 and its lingering effects on supply chains and labor markets were still to come,"** she said. **"As we've weathered these challenges together, that phrase has never been more important. A robust professional governance structure provides a process that supports collaboration and innovation, helping us meet the unprecedented challenges now affecting nursing practice."**



Professional Development & Nursing Education Council



Sharing co-chair responsibilities for the Professional Development and Nursing Education (PDNE) Council in 2022 were **Clara Heiden**, RN, then a Clinical Nurse on Stoneman 8 and Feldberg 8A and now a Clinical Nurse in critical care, and **Becki White**, RN, Clinical Nurse and **RESA Nurse Fellow** in the Emergency Department.

They continued the previous year's focus on **increasing the rates of specialty certifications** for frontline clinical staff. The council moved forward to operationalize voucher programs it had researched in 2021, augmenting the financial supports related to certification that are available to staff. In 2022, three voucher programs were launched, providing up-front funding for test preparation and certification exams in the key specialties of medical-surgical, emergency, and cardiovascular nursing. Tuition reimbursement funds to help cover certification costs remained available for other certifications.

Other council work surrounded an assessment of nurses' preparedness for diabetes education and support for the [RESA program](#) (see p. 12).



Brianna Morton, RN, and **Saran Sherif**, RN, of the cardiovascular ICU celebrate their Critical Care Registered Nurse (CCRN) certification!

Professional Nursing Practice Council



Kathleen Casey, RN, co-chaired the Professional Nursing Practice Council in 2022.

The work of the Professional Nursing Practice Council (PNPC) in 2022 was led by **Kathleen Casey**, RN, then a Clinical Nurse on Stoneman 7 and currently Assistant Nursing Director for Stoneman 8 and Feldberg 8A, and **Carlie Speranzella**, RN, Clinical Nurse in the West Procedure Center. The council worked to ensure that more than 200 policies in the Nursing Policy Manual were up to date and based on the most recent evidence. In 2022, **90 policies were reviewed**. This meant reaching out to policy owners to ensure that they reviewed each policy and the supporting evidence. **“The PNPC is responsible for ensuring that all policies are reviewed at least every three years,”** says Casey. **“With The Joint Commission survey expected in 2022, it was crucial that our manual was up to date.”** Casey says that if changes in a policy were significant, the policy owner would present those changes to the council for discussion and approval.

In response to feedback from staff that policies could sometimes be difficult to find, council members also worked with policy owners to refresh keywords. **“We have received positive feedback that searching for policies has been more efficient,”** Casey says.

Nursing Quality & Outcomes Council

As chair of the Nursing Quality and Outcomes Council in 2022, **Maria Gavin**, RN, Clinical Nurse and [RESA Nurse Fellow](#) on Stoneman 7, helped oversee a comprehensive, multiphase project to improve patient safety during pre-procedure handoffs. The council **created and implemented a survey** that revealed a lack of standardized practice during these handoffs.

They **reviewed best practices and standards** from The Joint Commission and collaborated with stakeholders to confirm which data elements were essential for a safe and effective handoff. And they successfully trialed a **handoff template**, which was piloted as a paper form but which will eventually become part of the electronic medical record.

The group continued to track **nurse-sensitive indicators**—elements of patient care directly tied to nursing practice. Says Gavin, **“I enjoy following the nurse-sensitive indicator results and seeing the strides BIDMC has made over the years through quality improvement initiatives.”** (See pp. 14-15.)



Maria Gavin, RN (center), helped oversee work to improve patient handoffs. She is shown with **Bernadette Costa**, RN, from the East Campus Post-Anesthesia Care Unit (left), and **Amanda Brennan**, RN, from Reisman 11.

Nursing Research & Innovation Council

In 2022, Finard 4 ICU Clinical Nurses and [RESA Nurse Fellows](#) **Elena Olson**, RN, and **Megan Swede**n, RN, co-chaired the Nursing Research and Innovation Council. The group continued their work to increase awareness of the Johns Hopkins Evidence-Based Practice Model and to promote its broad implementation. They presented Nursing Grand Rounds on the topic in May 2022.

The group also completed a survey of staff to **assess their familiarity with literature review resources** available through BIDMC's Knowledge Services, and they worked to ensure that staff who come across a clinical question know how to find relevant research.

In doing the survey, council members realized they had missed a chance to ask nurses about some demographic information that would have helped them interpret results. In the spirit of continuous improvement, they developed a **survey template** for other nurses to use when surveying staff.

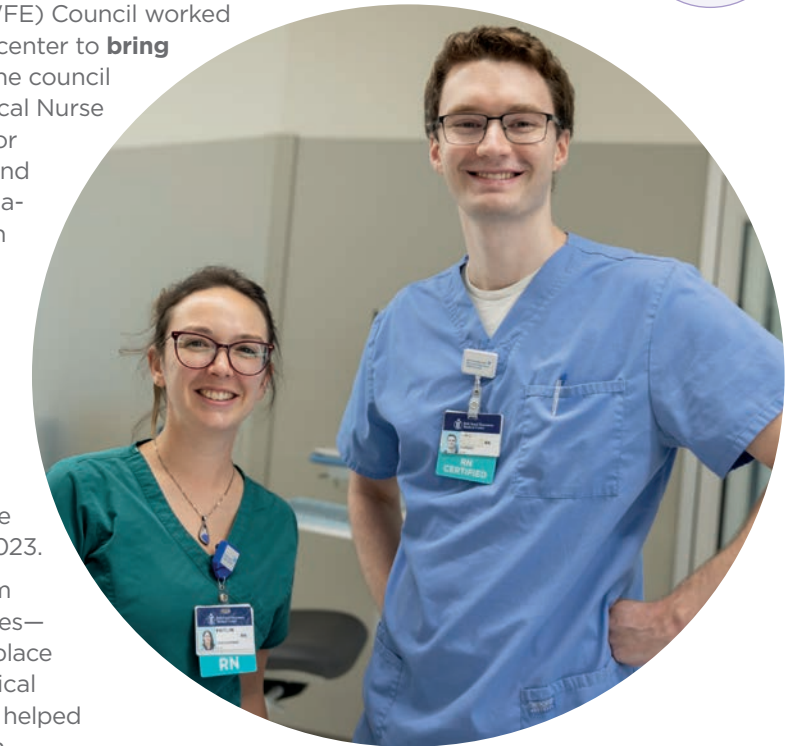


Members of the Nursing Research and Innovation Council worked on ways to promote the use of the Johns Hopkins Evidence-Based Practice Model. Shown are **Garry Dunster**, RN, leader advisor; **Megan Swede**n, RN, and **Elena Olson**, RN, co-chairs; and **Jackie FitzGerald**, DNP, RN, leader advisor.

Nursing Workforce & Engagement Council

Members of the Nursing Workforce and Engagement (WFE) Council worked throughout the year with colleagues across the medical center to **bring the DAISY Award for Extraordinary Nurses to BIDMC**. The council was chaired in 2022 by **Sydney Orlando**, RN, then a Clinical Nurse in critical care and currently Assistant Nursing Director for Farr 9, and **Hannah Alberts**, RN, Clinical Nurse in Labor and Delivery. According to **The DAISY Foundation**, the international award is given to nurses at more than 5,000 health care facilities and schools of nursing across the world **“to honor the super-human work nurses do for patients and families every day.”** Through a partnership with the Foundation, BIDMC has access to award materials and BIDMC awardees are recognized on the Foundation website. Nominations from patients, families, and colleagues are reviewed by a local review board, comprised of clinical nurses and nurse leaders, which facilitates the award process and frequency. Nominations opened in late 2022 with the first set of awards set to roll out early in 2023.

The council also worked with the nursing leadership team to provide feedback on two frontline nursing support roles—the **Clinical Support Nurse** and the **STAT ICU RN**—put in place to support patient flow and help staff manage acute clinical events and emergencies. The WFE Council members also helped with Nurses Week celebrations and they were involved in organization-wide efforts to reduce workplace violence.



Clinical Nurses **Kaitlyn L'Heureux**, RN, and **John Harrison**, RN, of the cardiovascular ICU are among a team of nurses who take shifts in one of two roles designed to support frontline staff. Both have served as STAT ICU RNs, responding to clinical emergencies or other acute clinical issues on the general units. Harrison has also filled the Clinical Support Nurse role, helping support units that are experiencing capacity challenges, high acuity, or other issues.

Advanced Practice Provider Council

Nicole Catatao, RN/CNP, Director of Advanced Practice, reported exciting activities occurring in 2022 within the Advanced Practice Provider (APP) Council. Under the leadership of co-chairs **Ijeoma Eche-Ugwu**, PhD, RN/CNP, Nurse Practitioner on Feldberg 7, and **Marcelline Previlon**, RN/CNP, Nurse Practitioner in Interventional Radiology, the council worked to plan a new professional development and clinical networking forum for APPs. An APP Grand Rounds Planning Subcommittee, led by **Barbara Rosato**, DNP, RN/CNP, Nurse Practitioner in Healthcare Associates, worked to operationalize a monthly forum where topics of interest to advanced practice providers would be shared. The new **APP Grand Rounds** series was set to launch in March of 2023.



The group also did the groundwork for a 2023 launch of an **APP Newsletter**. Its purpose will be to keep APPs informed of new guidelines and policies, issues related to licensure, educational opportunities, and more. Sections are also being devoted to recognize the achievements of advanced practice providers, focusing on awards and spotlighting the careers and interests of members of the APP community at BIDMC.



Ijeoma Eche-Ugwu, PhD, RN/CNP, and **Marcelline Previlon**, RN/CNP, helped launch a new educational forum and a newsletter for advanced practice providers (APPs) in their role as 2022 co-chairs of the APP Council.



Coordinating Council

The Coordinating Council is responsible for overseeing the **integration and coordination of all Nursing Professional Governance councils** at BIDMC. Comprised of representatives who lead each of the five clinical nurse councils, membership also includes representatives from the Nursing Leadership Council, Ambulatory Nursing Leadership Council, Nurse Specialist Council, and Advanced Practice Provider Council. In 2022, the Coordinating Council tri-chairs were **Alison Chan**, RN, then a Clinical Nurse on Stoneman 8 and Feldberg 8A and now Assistant Nursing Director for Stoneman 7; **Mary Grzybinski**, DNP, RN, Nursing Director in Perianesthesia Nursing; and **Candace Reynolds**, RN, Nursing Director for Ambulatory Services.

Meetings throughout the year focused on issues escalated from unit councils and elsewhere. Each was either triaged out to one of the central councils, or an action plan was crafted to deal with the issue within the Coordinating Council itself. The council had an important role in working with the Professional Governance Steering Committee to plan council elections and to consider feedback from multiple corners about changes in elections and council composition that might be considered and updated in the bylaws.



The Coordinating Council was chaired in 2022 by **Alison Chan**, RN; **Mary Grzybinski**, DNP, RN; and **Candace Reynolds**, RN. The council played an integral role in organizing and facilitating all the governance council activities across the medical center.

Nursing Leadership Council

The Nursing Leadership Council (NLC) held vibrant meetings twice monthly. In 2022 the council was chaired by **Alice Bradbury**, DNP, RN, Nursing Director on Farr 9; **Mary Grzybinski**, DNP, RN, Nursing Director for Perianesthesia Nursing; and **Suzanne Joyner**, DNP, RN, previously the Nursing Director for Surgical and Neurology Critical Care and currently Interim Associate Chief Nurse for Critical Care and West Campus Inpatient Services. Leaders shared operational updates, clinical challenges and successes, information on new programs, and more. Examples included updates on bed assignment procedures, peer review, supply chain issues, and preparations for Magnet and Joint Commission site visits.

At each meeting, **Marsha Maurer**, DNP, RN, former Senior Vice President for Patient Care Services and Chief Nursing Officer, provided a CNO message, sharing critical information on topics ranging from **COVID-19 surge projections** early in the year to **workforce issues** and **progress on patient throughput and financial goals**. A recurring theme concerned strategies to mitigate workplace violence and dialogue about the capacity challenges units were facing, including behaviorally complex patients being cared for on general units. In a follow-up to the March 2022 NLC discussion on this issue, Maurer messaged all nurses as part of her monthly newsletter editorial, helping to ensure all staff were aware of important resources available to them, many emanating from nurse leaders' involvement in hospital-wide efforts focused on prevention of workplace violence. **"We will continue to strive to provide compassionate care to everyone who comes to us for help, but this must always be done in ways that keep both patients and staff safe,"** she noted. **"We are working to shore up our systems and protocols to address workplace violence. I invite you to check out currently available resources and information on the Portal."** Maurer also used the NLC meeting to reinforce her support for nurse leaders facing complex challenges. **"I want to encourage all of you to work with each other to decompress,"** she said at the February meeting. **"I want people to take some space and some time off for themselves. Please plan to take a break."**

"We will continue to strive to provide compassionate care to everyone who comes to us for help, but this must always be done in ways that keep both patients and staff safe."

- **Marsha Maurer, DNP, RN**
Former Senior Vice President for Patient Care Services and Chief Nursing Officer

Nurse Specialist Council



Nurse Specialists like **Kim Maloof**, RN (right), work to ensure staff receive important clinical training. When intermediate care beds opened on Rosenberg 6 in 2022, Maloof and unit educator **Marytheresa Lee**, RN, made sure staff had the information they needed to safely administer specialized medications.

clinical supply shortages and developing strategies to mitigate potential disruptions in care, helping with onboarding and training new staff, and providing clinical education to respond to changes in practice or in patient populations cared for in particular areas. An example of the latter was providing specialized training to nurses on Rosenberg 6 to prepare for opening intermediate care beds on the unit.

The Nurse Specialist Council was led in 2022 by Nurse Specialists **Jean Gillis**, RN, and **Kim Maloof**, RN. With their broad focus on clinical education, the group maintained a practice of inviting clinical nurses serving in the unit educator role to meetings on a regular basis.

Much of the work early in the year focused on ensuring that the staff and the organization were **prepared for BIDMC's expected triennial survey from The Joint Commission (TJC)**. As embedded clinical experts throughout the medical center, nurse specialists were in the ideal position to ensure that quality and safety standards and policies were being followed. The TJC survey took place over five days in July. At the conclusion of the survey, **Tricia Bourie**, RN, Associate Chief Nurse for Patient Care Services Safety, Quality, and Nursing Informatics, emailed staff to commend their preparedness, noting, **"We witnessed and heard from our surveyors daily how engaged, collaborative, professional, and dedicated our employees are."**

Other projects included a needs assessment of staff with regard to diabetes education, addressing



Nurse Specialist **Jean Gillis**, RN, co-chaired the Nurse Specialist Council along with **Kim Maloof**, RN, in 2022.



Ambulatory Nursing Leadership Council



Members of the Ambulatory Nursing Leadership Council helped facilitate a Nurse Grand Rounds presentation on ambulatory practice. Shown are **Kathleen O'Rourke**, RN, from cardiology; **Kelly Farren**, RN, from gastroenterology; **Sherry Griffin**, RN, from the West Campus Specialty Clinic; **Laura Curtin**, RN, a Case Manager in cardiology; **Mary T. O'Sullivan**, RN, from Bowdoin Street Health Center; and **Jodi Purches**, RN, from the Allergy Clinic.

The Ambulatory Nursing Leadership Council (ANLC) is comprised of nursing directors, clinical advisors, clinical leads, and accountable nurse leaders across the ambulatory clinics, procedure units, and licensed off-site locations. In 2022, the group was chaired by **Katie Deary**, DNP, RN/CNP, Director of Clinical Operations for Otolaryngology, Head and Neck Surgery, and Audiology; **Aisling Lydeard**, RN/CNP, Nursing Director for Ambulatory Obstetrics & Gynecology; and **Candace Reynolds**, RN, Nursing Director for Ambulatory Services.

Members of the council engaged in a wide variety of activities, including: running mock codes; ensuring that staff were prepared for both Joint Commission and Magnet surveys; unit professional governance activities; welcoming students to ambulatory settings; enhancing educational opportunities for staff; peer feedback; mentoring; and more. They surveyed staff to find out if nurses knew how to access nursing quality metrics, and leaders from oncology areas discussed new criteria from the Commission on Cancer regarding nursing credentials. In December, ANLC members helped facilitate a highly successful Nursing Grand Rounds presentation, given by members of one of the ambulatory unit-based councils. **Shelley Calder**, DNP, RN, Associate Chief Nurse for Professional Development, Research, and Magnet, said the session was a great example of teamwork and accountability. **"This was a wonderful presentation, exemplifying the collaborative spirit of nurses in ambulatory settings,"** she said. **"These nurses continuously strive to enhance professional growth, improve patient care, and create educational opportunities around topics in ambulatory practice."**



2022 Nursing Awards

Gitta and Saul Kurlat Award for Nursing Excellence



Debra Codispoti
BSN, RN

Edward and Marilyn Schwarz Award for Excellence in Nursing Practice

Patient Advocate



Teri Forbush
BSN, RN



Daniel Lonergan
BSN, RN, COCN

Patient Education Peer Education



Meghan Maguire
BSN, RN, CVRN



Elizabeth Kelley
BSN, RN, RNC-OB, C-EFM

Overall Excellence



Ainsley Lamberto-Wilson
BSN, RN



Karie Lundin
BSN, RN



Debra A. Melia
BSN, RN



Dauda Sesay
BSN, RN

Spirit



Melissa Shrestha
BSN, RN



Kayla Valente
BSN, RN

Departmental Excellence Awards

Clinton and Joseph Koufman Foundation Award for Excellence—Ambulatory Services
Alichia Paton, MSN, RN/CNP, ACNP-BC

Clinton and Joseph Koufman Foundation Award for Excellence—Inpatient Services
Alyssa Kuba, MSN, RN/CNP, NP-BC

Clinton and Joseph Koufman Foundation Award for Excellence—Perioperative Services
Heidee Albano, BSN, RN, CNOR

Colette Cantin Obstetric Excellence Award
Hannah Alberts, BSN, RN
Erin Maxwell, BSN, RN

CVI Excellence in Cardiovascular Nursing Award
Malorie Butera, BSN, RN
Imelda Lagumbay, BSN, RN
Andrea Milano, MSN, RN, CCRN-CMC

Department of Anesthesia Faculty Hour Award
Mary Grzybinski, DNP, RN, CPAN

Eileen Stuart-Shor Nursing Recognition Award
Peguy Philemon, MS, RN

Excellence in Emergency Nursing Award—Experienced
Elizabeth Elcock, BSN, RN, CEN

Excellence in Emergency Nursing Award—Novice
Nicolette Pellicane, BSN, RN

Excellence in Hematology/Oncology Nursing Award—Inpatient
Kristy Carey, ADN, RN

Excellence in Hematology/Oncology Nursing Award—Outpatient
Nancy Giallombardo, MSN, RN/CNP, ANP-BC

Excellence in Medical Critical Care Nursing Award
Kenyatta David, BSN, RN
Meghan Grant, BSN, RN

Excellence in Neuroscience Nursing Award
Emer O'Shea, RN

Excellence in Psychiatric Nursing Award
Antoinette Chabilal, RN

Excellence in Surgical Critical Care Nursing Award
Rachel Corwin, BSN, RN

Gastroenterology Nursing Excellence Award
Maribeth Torpey, BSN, RN

Harris Yett, MD, Award for Excellence in Orthopaedic Nursing Care

Caliegh Pacy, BSN, RN
Melissa Tabor, BSN, RN

Hospital Medicine Nursing Award for Teamwork and Excellence
Tenzin Tsering, BSN, RN

Internal Medicine Residency Nursing Excellence Award
Lauren Tulloch, BSN, RN

William D. Cochran Award for Excellence in Neonatal Nursing
Ellen Cooper, BSN, RN, IBCLC

Named Scholarships

Alexander and Brenda Tanger Nursing Scholarship, in honor of Mary M. Fermental, RN
Ceara Conley, BSN, RN, SCRN
Senem Hicks, PhD, RN, MHM

Aron and Celia Steinberg Endowed Scholarship
Elizabeth Alie, BSN, RN
Rashod Blades, BSN, RN, C-EFM
Rachel Copertino, MSN, RN/CNP, NNP-BC, IBCLC
Laura Hart, BSN, RN
Muriel Ryan, BSN, RN
Sara Tong, MSN, RN/CNP, FNP-BC, DOT-CME

C. Rose Finkelstein Nurse Scholarship
Suzanne Wright, BSN, RN

Scholarship in Critical Care Nursing, in memory of Daniel Raymond Wong
Alexandra Alioto, BSN, RN
Caitlynn Marcotte, BSN, RN

Rene Mandell Memorial Scholarship
Missia Andrade

Excellence in Quality Improvement & Research Award



Sydney Orlando
MSN, RN

Department of Case Management Nursing Excellence Award



Nancy Lobo
ASN, RN

More than
\$150,000

in scholarship support awarded to nurses and other staff

45

AWARDEES
pursuing a master's degree

10

AWARDEES
pursuing a doctorate

2

AWARDEES
pursuing an MBA

2

AWARDEES
pursuing an MPH

5

AWARDEES
pursuing a bachelor's or associate's degree

More than
\$48,000

in support given to staff to attend or give presentations at professional conferences

59

NURSES BENEFITTED
from this professional development opportunity

Develop and advance professional nursing

RESA Fellows named

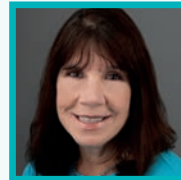
The clinical nurse recognition program, RESA (Recognizing Excellence, Scholarship, and Accountability), **named 14 new fellows in 2022**, bringing the total number of nurses recognized through RESA to 21. The program recognizes frontline clinical nurses for work to advance the art and science of nursing. Through a professional portfolio evaluated by peers, candidates for the designation of Nurse Fellow or Senior Nurse Fellow demonstrate contributions in the domains of **nursing practice, excellence, knowledge, competence, commitment to quality, and leadership.**

In December, **Sharon O'Donoghue**, DNP, RN, Nurse Specialist for Professional Development, announced the program was expanding to include additional nurses in patient-facing roles, rather than limiting participation to those with a "clinical nurse" job title. Examples of nurses due to become eligible for the recognition beginning in 2023 are those in case management, wound/ostomy/continence nursing, and lactation support. **"We are happy to be expanding and strengthening RESA, based on staff feedback,"** says O'Donoghue. **"We've been so pleased by the level of participation, despite the challenges of the past two years. It's really a testament to the caliber of our professional nursing staff."**

2022 SENIOR NURSE FELLOWS



Katelyn Armano,
MSN, RN, RNC-MNN, CLC, CCE



Barbara Regan,
MSN, RN, CCRN-CSC

2022 NURSE FELLOWS



Alicia Beneteau,
BScN, RN, CPAN, PCCN



Maria Gavin,
BSN, RN, MEDSURG-BC



Michelle Guerriero,
BSN, RN, SCRN



Bo Kim-Kopec,
MPH, BSN, RN, CCRN



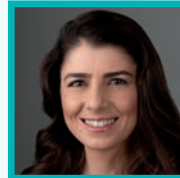
Meghan Maguire,
BSN, RN, CVRN-BC



Lindsay Malster,
BSN, RN, CMSRN



Elena Olson,
BSN, RN, CCRN



Zarina Paltiel Gabay,
MSN, RN, RNC-OB, IBCLC



Nicolette Pellicane,
BSN, RN, CEN



Adrienne Porrazzo,
BSN, RN, CCRN



Kelly Sullivan,
BSN, RN, CMSRN



Megan Swedeen,
BSN, RN, CMSRN, CCRN



Former BIDMC Senior Vice President for Patient Care Services and Chief Nursing Officer **Marsha Maurer**, DNP, RN (*left*), and NERBNA President **Sasha Dubois**, RN (*right*), presented 2022 NERBNA Excellence Awards to **Michelle Ruffin**, RN, **Jonie Saintil**, RN, and **Ijeoma Eche-Ugwu**, PhD, RN/CNP.

Three nurses honored by the New England Regional Black Nurses Association

Nurses recognized for research and practice excellence

On Feb. 25, three BIDMC nurses received excellence awards at a virtual awards event held by the [New England Regional Black Nurses Association](#). They had been nominated for the awards by their colleagues at BIDMC.

In the category of **Excellence in Research**, **Ijeoma Julie Eche-Ugwu**, PhD, RN/CNP, was honored for her extensive body of research on health-related quality of life in oncology patients, self-care needs of oncology nurses, vaccine hesitancy in the oncology population, and more. Eche-Ugwu has been a nurse practitioner on the inpatient Hematology-Malignancy/Bone Marrow Transplant Unit at BIDMC since 2015. She earned her bachelor's degree at Regis College and master's and doctoral degrees at the University of Massachusetts Boston.

Michelle Ruffin, RN, a 37-year veteran at BIDMC, received the **Excellence in Nursing Practice Award**. Ruffin is a Clinical Nurse in Labor & Delivery, known for her strong observational and problem-solving skills and her ability to establish trusting, empathetic relationships with patients and families. In the community, she is an active member of the Boosters of Blue Hills, an organization dedicated to supporting and improving school programs. Ruffin earned her bachelor's degree in nursing from Simmons University.

Jonie Saintil, RN, is a Case Manager on the inpatient solid organ transplant unit. She was honored for **Excellence in Nursing Practice**. In nominating her, Saintil's colleagues noted that Saintil's clinical experience in direct patient care helps her excel in the case management role. She is known as an outstanding advocate for patients and a skilled mentor and preceptor for new nurses joining the case management team. Saintil earned her associate's degree from Labouré College of Healthcare, her bachelor's degree from Southern Adventist University, and a master's degree in nurse-midwifery from New York University.

Promote a culture of respect



Progress on healthcare-associated infections

Late in 2022, data were presented at the monthly Quality and Safety (Q & S) Operations forum demonstrating significant progress on **preventing two significant healthcare-associated infections (HAIs): catheter-associated urinary tract infection (CAUTI) and central-line associated bloodstream infection (CLABSI)**. Both metrics, which are among those directly affected by nursing care (*nurse-sensitive indicators*), showed steady improvement on all units over the course of fiscal year 2022. In the 4th quarter, infection rates on units that externally report these data were at or below the top decile of comparable hospitals according to a clinical database maintained by Vizient. The improvements come as BIDMC nurses have implemented a variety of measures to address these and other HAIs.

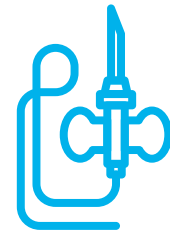
A dashboard that helps track these metrics (see [p. 18](#)) launched in February and provided an at-a-glance view of patients at risk for CAUTI or CLABSI, helping to ensure prevention strategies would be put in place. Prevention of CAUTIs was boosted by ongoing work, led by a multidisciplinary committee that included clinical nurses, focused largely on limiting the use of the indwelling urinary catheter (IUC) to those for whom there is a clear clinical indication that one is needed. According to **Patrick Gordon**, DNP, RN, Director of Infection Control and Hospital Epidemiology, leaving a urinary catheter in place has been shown to increase the risk of urinary tract infections (UTIs). This has led to guidelines that recommend limited use. An initiative launched in August targeted this issue. A nurse-driven catheter removal protocol was implemented, empowering nurses to remove an indwelling catheter if the patient meets certain criteria. In announcing the new protocol, **Dana Pepe**, MD, Medical Director and Associate Hospital Epidemiologist, said, **“The nurse-driven protocol continues our commitment to providing the best, most patient-centered, safest care possible.”** The new protocol adds to a previously launched nurse-driven protocol to enable staff to do an intermittent catheterization if a patient has urinary retention, helping reduce the need for an IUC.

Speaking to the Q & S group in November, Gordon said the hard work of frontline clinical staff on this issue was paying off. **“This is the best year we’ve ever had for CAUTI,”** he said. **“We know it’s because clinicians are following the guidelines and making sure those catheters are getting out. This has been a huge win.”**

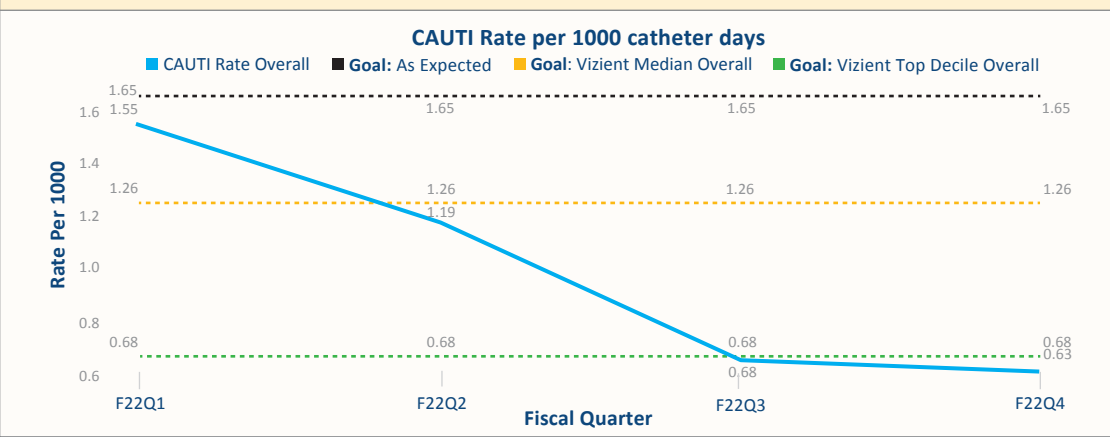
Gordon also praised the work of frontline staff that led to reductions in CLABSIs. He noted that, similar to the work on indwelling urinary catheters, an important piece of CLABSI prevention is making sure that central IV lines that are no longer needed for therapy or monitoring are promptly removed. Other measures included performing dressing changes according to posted guidelines, systematic assessment to watch for signs of infection, and more. The rates for CLABSI and CAUTI are sometimes reported as a “standardized infection ratio” (SIR), which is a summary measure used to track HAIs that adjusts for facility and patient-level factors that may contribute to risk. Commenting on BIDMC’s progress, Gordon noted, **“Rates for the fiscal year that ended in September 2022 reflect the lowest CLABSI SIR we’ve had in the last seven years.”**

Kerry Carnevale, DNP, RN, Nurse Specialist for Safety and Quality, believes that a multi-pronged approach helped lead to successful prevention strategies for these infections. **“The interdisciplinary committees led by Infection Control have included nurses and all the other frontline clinicians who can impact this issue,”** she says. She notes that the substantive work that emerged from these committees has helped nurse leaders such as herself to create and use helpful tools on the units. **“On each unit, we’ve posted best practices on preventing CAUTI and CLABSI,”** she says. **“Staff can refer to them in daily huddles, and it provides an easy way for new staff or preceptors to look at what our best practices and bundles are for preventing these infections.”** Carnevale adds that multidisciplinary groups also do a deep dive into any infection that does occur, with an eye toward identifying whether that infection may have been prevented. **“These analyses might help us design more targeted education, or bring even more tools online to support staff,”** she says.

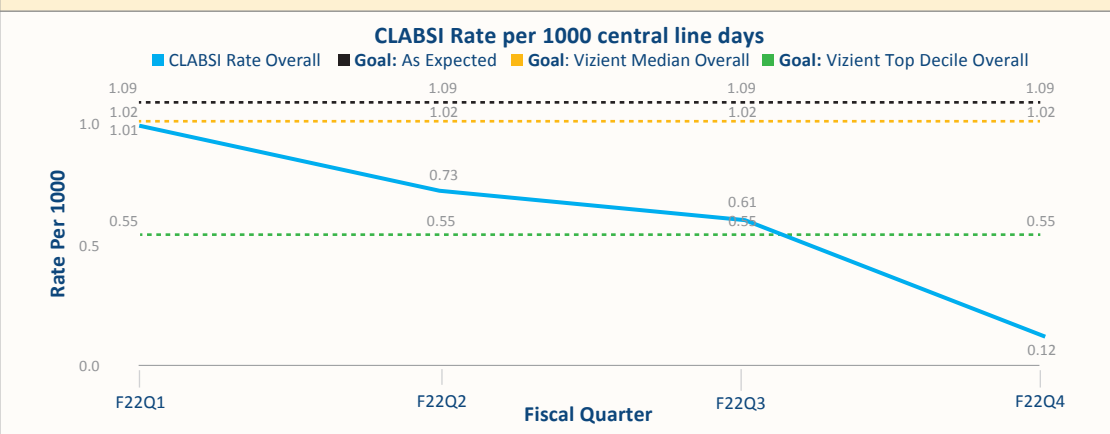
Tricia Bourie, RN, Associate Chief Nurse for Patient Care Services Safety, Quality, and Nursing Informatics, said all nurses at BIDMC have been involved in moving these metrics in the right direction. She spoke to unit leaders in November, congratulating them on this success and pointing out how so much of it has been due to the empowerment of bedside clinical staff. **“This is not one or two units,”** she said. **“This is everybody. There has been a lot of work going on, and it’s been very successful. We see a lot of success when we engage the frontline staff.”**



Overall CAUTI rates on reportable units, Med/Surg and ICU, FY 2022



Overall CLABSI rates on reportable units, Med/Surg and ICU, FY 2022



Fiscal year 2022 saw dramatic improvements in the rates of both CAUTI and CLABSI on all units. Shown are the rates on units whose data are externally reported by the medical center. By the fourth quarter, both metrics fell below the Vizient top decile when compared to similar institutions.

PREVENTING CAUTI

- 1 Documentation** Have we documented the daily presence of an IUC in eFlowsheets I & O Tab? ✓
- 2 Foley** Do we have a plan for patients with a foley? ✓
- 3 Pericare** Has pericare been completed on our patients with indwelling foley? ✓
- 4 Nurse Driven Protocol** Are there patients who could have a foley removed and followed the NDP for ISC? *coming soon* NDP for IUC ✓
- 5 Our Patients** Are there any patients we need to discuss with the medical team? ✓
- 6 Recent CAUTI** What can we learn from our most recent CAUTI? ✓

PREVENTING CLABSI

- 1 Central Lines** Do any of our patients have central lines (pics, ports, & other)? -Are their lines temporary or long term? Are there any lines we are concerned about? ✓
- 2 Dressings up to date** Are there any patients whose dressings and/or IV tubing need to be changed? ✓
- 3 Securement Adhesive** Have you assessed your lines today? ✓
- 4 CHG Baths** Are there any expired CHG baths to discard? ✓
- 5 Blood Cultures** Have blood cultures been drawn peripherally? ✓
- 6 Discussing with the team** Are there any patients that we have identified that need to be discussed with the medical team? ✓

Talking points about preventing CAUTI and CLABSI were developed to help guide unit conversations on infection prevention and remind staff of best practices.

Nurses in primary care move key programs forward

In the medical center’s primary care practice, Healthcare Associates (HCA), nurses play a critical role. Nursing leadership has been instrumental in moving several key initiatives forward, including programs targeting the management of diabetes and hypertension, and work to ensure continuity of care for patients experiencing hospitalization.

Management of hyperglycemia

Barbara Rosato, DNP, RN/CNP, is a Nurse Practitioner in HCA with advanced certification in diabetes care and education. Along with her colleagues, she cares for patients with acute symptomatic hyperglycemia (*elevated blood sugar*). These patients may be started on insulin injections as outpatients, which can present a host of challenges with regard to patient education, procurement of equipment, and clinical management. Rosato, along with **Kate Willetts**, DNP, RN, Assistant Nursing Director in HCA, helped lead a multidisciplinary team in developing a clinical management protocol for these patients to ensure the safest possible care. **“There are myriad risks involved in starting insulin therapy,”** says Rosato. **“We sought to mitigate these risks by implementing standardized care that incorporates evidence-based practice and interdisciplinary care considerations.”**

The protocol first guides the clinical assessment of the patient to determine if an emergency department (ED) visit is needed. If it’s determined that therapy can start without an ED visit, a clinical nurse follows the protocol to provide insulin administration, teaching around insulin and glucometer use, and telephone follow-up. Like Rosato, Clinical Nurse and **RESA Senior Nurse Fellow Barbara Luker**, RN, and Nurse Practitioner **Maura Brain**, RN/CNP, are certified in diabetes care and education. As clinical experts, they help ensure that the protocol is achieving its goal of enhancing safe, effective care.



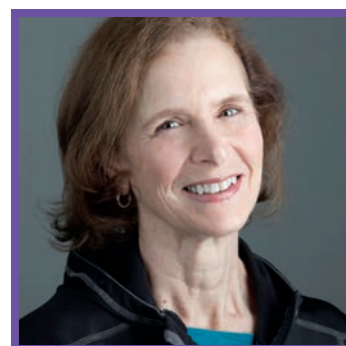
The team is tracking critical metrics, including the number of patients who qualify for outpatient management; whether patients can access insulin and glucometers on the same day; whether a nurse was able to reach the patient for telephone follow-up; and the level of comfort and satisfaction of both staff and patients.

Transitional care management

The transition from hospitalization to home is a high-risk time for patients. Clinicians in HCA wanted to ensure that patients in the practice who were being discharged from an acute hospitalization were managing well at home. Nurses helped develop an interdisciplinary transitional care management (TCM) plan to improve care coordination. As part of TCM, a nurse contacts patients within two business days of hospital discharge to do a symptom check, screen for psychosocial factors impacting recovery, conduct a medication review, and ensure appropriate follow-up appointments.

Tarsha Soares, RN, is a Clinical Nurse in HCA and was on the working group that launched TCM. **“Care transitions for complex, vulnerable patients require a thoughtful, team-based approach,”** she says. **“The nurse is the catalyst to the success of adopting a standardized program in primary care that works to improve patient, provider, and financial outcomes.”**

Maura Brain, DNP, RN/CNP, a Nurse Practitioner in HCA, is excited that TCM visits are being integrated into practice. She now regularly sees patients in clinic for a TCM follow-up visit.

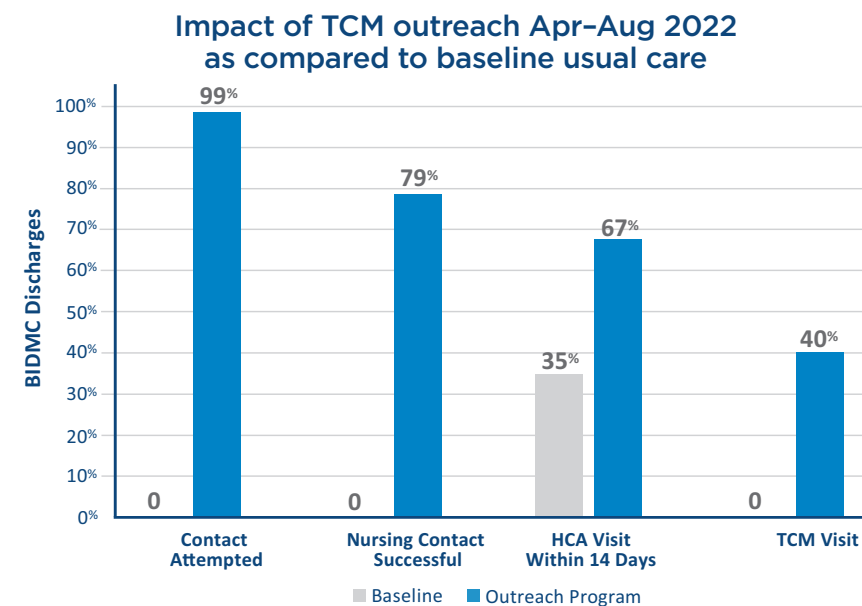


A team effort is ensuring that patients in HCA get exemplary diabetes care. (From the top) Nurse Practitioners **Barbara Rosato**, DNP, RN/CNP and **Maura Brain**, DNP, RN/CNP, and Clinical Nurse and RESA Senior Nurse Fellow **Barbara Luker**, RN, hold advanced certification in diabetes care and education. Assistant Nursing Director **Kate Willetts**, DNP, RN, helped lead the work to bring a hyperglycemia management protocol to HCA.

(cont'd on pg 17)

(cont'd from pg 16)

“The TCM services have been shown to be associated with decreased hospitalizations, lower mortality, and reduced health care expenditures,” she says. Initial impact data at BIDMC, collected between April and August of 2022, examined outcomes for **674** discharged patients. A patient TCM call was attempted in **99%** of discharges. The patient was reached in **79%** of cases; **67%** of patients were seen in clinic within **14** days, compared to **35%** at baseline; and **40%** had what was characterized as a TCM visit.



HCA clinicians tracked the impact of a Transitional Care Management Program that sought to contact patients soon after discharge from the hospital in order to mitigate risks of complications and ensure a smooth recovery.

Controlling blood pressure

HCA Nurse Practitioner **Maria Hedberg**, RN/CNP, is a certified hypertension (HTN) clinician. She has worked with the HCA team to implement standards of hypertension management as recommended by **The American Heart Association (AHA)** and the **American Medical Association (AMA)**. She has partnered with colleague and nurse researcher **Ruth-Alma Turkson-Ocran**, PhD, RN/CNP, to track outcomes of the work.

Hedberg’s expertise was leveraged to help maximize the effectiveness of a hypertension management clinic that includes two attending physicians, one medical resident, two nurse practitioners (NPs), and one pharmacist. The NPs are critical members of the team. **“We provide person-centered care, care coordination, and continuity to a diverse patient population,”** says Hedberg. **“The clinical and research expertise of the NPs on the team provide highly valued contributions to clinic goals. They have used their team-building skills to help educate colleagues on critical points of HTN management.”**

The work has led to HCA being designated by the AHA as a **Comprehensive Hypertension Center**, and as a **Sliver Status Practice** as defined by the AHA/AMA **Target: BP initiative**, signaling its commitment to data collection and evidence-based practice. **“We ended the year on track to receive Gold Status in the near future,”** says Hedberg. **“This is for practices that demonstrate that HTN is controlled in 70% of patients.”**



Maria Hedberg, RN/CNP (left) is a specialist in hypertension management. She works with **Ruth-Alma Turkson-Ocran**, PhD, RN/CNP, to track key metrics related to blood pressure control in primary care.

“The nurse is the catalyst to the success of adopting a standardized program in primary care that works to improve patient, provider, and financial outcomes.”



Clinical Nurse **Tarsha Soares**, RN, was instrumental in bringing TCM to the Healthcare Associates primary care practice.

Interactive tool tracks quality metrics

In February, **Tricia Bourie**, RN, then Program Director for Nursing Informatics and currently Associate Chief Nurse for Patient Care Services Safety, Quality, and Nursing Informatics, announced the rollout of an exciting new interactive tool, embedded in unit dashboards, that adds to the clinical data available to staff on the units and enhances their ability to track key quality indicators. Rooted in the research on patient safety, **the new tool aims to make sure that three hospital interventions—indwelling urinary catheters (Foleys), central venous lines, and cardiac telemetry monitoring—are used only as long as they are clinically necessary**, since extended use can be associated with patient harm. That harm can come in the form of infections in the case of catheters and central lines, which are known as catheter-associated urinary tract infections (CAUTI) and central line-associated bloodstream infections (CLABSI) (see pp. 14-15). The harm from overuse of telemetry is in the form of “alarm fatigue,” meaning that the more alarms that are sounding on a unit, the less likely it is that staff can properly attend to them.



Discussing which patients have any of these devices and when they can be stopped has long been part of each unit’s daily patient rounds. The new tool provided a way to see this information “at a glance,” streamlining the care planning process. **“During rounds, staff have had to go into each patient’s record to capture information on whether they had a Foley or a central line, or were ordered for telemetry,”** Bourie said in announcing the new tool. **“The new dashboard view pulls existing data from the electronic medical record to provide a view of every patient on the unit with regard to these and a number of other quality metrics.”**

The work was a multidisciplinary effort involving Health Care Quality, Infection Control, Nursing, and Information Systems, as well as physician and nursing leadership teams. The interactive tool not only gives information on the current state; it also uses color codes to flag items that need attention and to track changes over time. Clinicians can click on each item and review a set of drop-down options to guide a conversation about removal. Once an option is chosen, the color and status of the indicator updates.

Bourie said the advantage for nursing is a more streamlined approach to things that are already part of the nurse’s work. **“These things are in the domain of nursing practice,”** she said. **“We know these metrics impact outcomes, length of stay, and discharge plans. We are excited about having this information so readily available during rounds.”**



In February, **Tricia Bourie**, RN, then Program Director for Nursing Informatics, introduced a new interactive tool that helps staff track key quality metrics during daily patient rounds.

New knowledge in oncology practice

Ijeoma Eche-Ugwu, PhD, RN/CNP, cares for patients on the inpatient bone marrow transplant unit. And as an experienced researcher, she is always on the lookout for clinical questions that need investigation. During the COVID-19 pandemic, she and colleague **Nadia Alcindor**, RN, wanted to know if their patients may be at increased risk for COVID-19 illness due to vaccine hesitancy on the part of family caregivers. This was particularly important for their patients, who are at a greater risk for severe disease should they contract the virus. **Eche-Ugwu and Alcindor designed a study to examine the issue, which is in final stages of data analysis.** Preliminary results suggested a low level of vaccine hesitancy in the population studied but flagged broad issues for further investigation.



Clinical Nurse **Nadia Alcindor**, RN (left), and Nurse Practitioner **Ijeoma Eche-Ugwu**, PhD, RN/CNP, are studying vaccine hesitancy in caregivers of patients with cancer.



Improving the patient experience in radiology

Members of the unit-based governance council in interventional radiology are always working to improve the patient experience. Anxiety is a common patient concern in their setting, and the team wanted to explore whether interventions that were in place to address anxiety were effective. They surveyed patients and staff to find out more. **They wanted to know:** *Was the timing of sedating medications the most effective? Were patients experiencing levels of anxiety that might be mitigated by a different approach? Could changes in pre-procedure medication practices decrease the amount of sedation a patient may need?*

Danielle Francisco, RN, was a member of the unit council that led this work and currently serves as the council co-chair. She says that based in part on the survey results, a subset of patients who have higher levels of anxiety are benefiting from a new practice standard that has them receiving medication an hour before the procedure to help them relax. The unit council members agree that this work helped them to evaluate current practice, establish a best practice standard, and promote positive patient outcomes while directly involving patients in their care.

Danielle Francisco, RN (right), currently co-chair of the unit council in interventional radiology, worked with colleagues on a project to improve the patient experience in their unit. She is shown here with (left to right) **Leslie Guglielmo**, RN, **Cori DiMartino**, RN, and **Lindsay Downes**, RN.



Mentorship success stories!

Nurses throughout the medical center are experiencing the power and benefits of establishing a formal mentoring relationship. Designed to provide nurses at any level with structured opportunities for growth, **the Nurse Mentorship Program** at BIDMC enrolled numerous mentor/mentee pairs throughout 2022. **Here are some of their stories!**



On Stoneman 7, Clinical Nurse Sarah Metevier, RN (left), partnered with a more experienced colleague, Kathleen (Skipper) Casey, RN, to further enhance her clinical and leadership skills. Casey was eager to help Metevier hone her talents as a nursing professional. **“I had the opportunity to watch Sarah grow from a novice nurse into a leader on Stoneman 7,”** she said. **“I have enjoyed being a mentor to Sarah as she works toward achieving her med-surg certification and as she becomes involved in professional governance.”** Metevier said Casey had been an early role model; establishing a formal mentorship seemed like a logical next step. **“Skipper has always been a support and role model to all the nurses on the unit,”** Metevier shared. **“Through the mentoring program, she was so supportive as I began to pursue my med-surg certification.”**



Mentoring can benefit clinical nurses taking on specialized roles. When Reisman 11 Clinical Nurse Marisa Garro, RN (right), took on the role of unit-based educator (UBE), she joined longtime UBE Jill Dooley, RN, in working to meet the clinical education needs of staff. But being new in the role, she knew she had much to learn from Dooley. **“Jill is so knowledgeable about the UBE role,”** said Garro. **“She is such a great teacher and resource to me.”** Dooley says the tools and resources that are part of the mentorship program were helpful as she and Garro worked on meeting unit educational needs. **“The program gave us the opportunity to talk through various challenges,”** recalled Dooley. **“It gave us the tools to brainstorm ideas for improvement.”**

“The program gave us the opportunity to talk through various challenges. It gave us the tools to brainstorm ideas for improvement.”

– Jill Dooley, RN

“The mentorship program gives us the opportunity to talk about how to take the best care of our patients.”

– Hope McDonald, RN

Kaila Williams, RN (left), a Clinical Nurse in inpatient cardiology, found she shared interests with her more seasoned colleague, Hope McDonald, RN, making McDonald an ideal mentor. **“As a newer cardiac nurse, it’s nice for me to have a friend/mentor who went through what I am going through,”** Williams shared. **“It’s great to have someone I can talk to about the things I’m learning and about finding new ways to navigate nursing here at BIDMC.”** Speaking of her work with Williams, McDonald said, **“The mentorship program gives us the opportunity to talk about how to take the best care of our patients.”**



Amelia Coyle, RN (left), former Clinical Nurse in ambulatory OGYN and now that practice’s Assistant Nursing Director, was one of the inaugural Nurse Fellows named in the RESA nurse recognition program (see p. 12). Coyle was the perfect choice to mentor three nurses in the practice interested in the RESA program and their own professional development. Clinical Nurses **Jenny Canales, RN (center), Martha Florance, RN (right), and Jennifer Longval, RN (inset),** had each developed qualities of clinical excellence and professional leadership. Coyle set out to help them look at the RESA program criteria and chart a path forward. **“These were all exceptionally talented nurses,”** said Coyle. **“They were natural leaders.”** Coyle met with her three mentees as individuals and as a group, helping them look at RESA qualifications they already had and others they could pursue. In the Spring of 2023, the efforts paid off. Florance and Canales were named Nurse Fellows, and Longval was recognized as a Senior Nurse Fellow in the RESA program.



“These were all exceptionally talented nurses. They were natural leaders.”

– Amelia Coyle, RN



Jennifer Sarge, RN (left), and Nicole Casey, RN, were among the first in the medical ICU to establish a formal mentorship pair. Casey said Sarge has been an “ideal mentor.” **“Jen has taught me so much about ICU nursing,”** she said. **“She is the first person I go to with any questions and she has helped me navigate many difficult situations. I cannot wait to continue to learn from her.”** The mentorship program planners note that the relationship benefits the mentor as well as the mentee. It seems Sarge would agree. **“Nicole inspires me,”** she said. **“Sometimes I feel like she should be the mentor and I the mentee!”**



Innovative programs support nursing strategic goals

The nursing leadership team at BIDMC continues to envision and nurture innovative programs that support key strategic initiatives, including leadership development, diversity and inclusion, and safe and effective clinical practice. Forging partnerships with academic organizations has provided a rich array of opportunity for BIDMC staff.

Clinical Nurse Leader program

Three BIDMC nurses were members of the first cohort of a new program that leads to a master's degree in a Clinical Nurse Leader (CNL) track. Shelley Calder, DNP, RN, Associate Chief Nurse for Professional Development, Research, and Magnet, says

BIDMC partnered with Hebrew Senior Life, a top Boston-area provider of senior care, and Regis College to create the opportunity. The program combines academic study with clinical experiences and a capstone/immersion project. It prepares participants for the CNL role, which includes clinical expertise, leadership, evaluation and design of systems, and more. **"We wanted to expand our academic progression programs to provide opportunities for clinically-focused nurse leaders who support practice,"** says Calder.

"This program helps us meet this goal."

Three BIDMC nurses are part of the initial cohort: **Joanna Anderson**, RN, Clinical Advisor in the neuroscience ICU, surgical ICU, and neuroscience intermediate care; **Kimberley Campbell**, RN, Clinical Nurse and unit-based educator in labor and delivery; and **Chrystal Maki**, RN, Clinical Advisor in the post-anesthesia care unit and pre-admission testing.



Clinical Nurse Leader program participants **Kimberley Campbell**, RN, (left) and **Joanna Anderson**, RN. Not pictured, Chrystal Maki, RN.

Emmanuel partnership continues to thrive

A cohort of 17 nurses entered the BIDMC/Emmanuel partnership program in 2022, the third group to begin the program and the largest to date. Participants are graduates of associate degree nursing programs who work as RNs at the medical center and earn a bachelor's degree in nursing at Emmanuel. Launched in 2019, the program was part of a diversity and inclusion strategy that sought to welcome a diverse pool of new graduate nurses to BIDMC. Those accepted into the program participate in the new graduate **Transition to Practice curriculum** and attend classes at Emmanuel with all expenses paid.

In December, **11 nurses** from the second cohort finished their degree, representing a **91% completion rate** for the group.

Commenting on the graduates' accomplishments, outgoing CNO **Marsha Maurer**, DNP, RN, called the group "inspiring" and the program "one of the things I'm most proud of." Speaking to the graduates, she said, **"You are all amazing. We were lucky to have you in this program. I am so proud of you all."**



"We wanted to expand our academic progression programs to provide opportunities for clinically-focused nurse leaders who support practice. This program helps us meet this goal."

– Shelley Calder, DNP, RN



Third Emmanuel cohort

The third cohort in the Emmanuel partnership entered the program in 2022. Shown are: (Front row) **Mike Lee**, RN; **Linh Nguyen**, RN; **Anne Pierre**, RN; **Samira Adan**, RN; **Yvette Ngawe**, RN; (Middle row) **Ashley Oliveira**, RN; **Vanary Preas**, RN; **Marie Francois**, RN; **Katie Cummings**, RN; **Alexander Rose**, RN; (Back row) **Susan Finocchio**, RN; **Alexis McCleskey**, RN; **Estela Oramas**, RN; **Maudeline Dalexis**, RN; **Lidia Figuereo**, RN; **Tatyana Anatolieva**, RN. Not pictured, **Kristen Petronis**, RN

Perioperative LPN Program

Elena Canacari, RN, Associate Chief Nurse for Perioperative Services, and **Phyllis West**, DNP, RN, Associate Chief Nurse for Perinatal, Inpatient Oncology, and East Campus Medical-Surgical Services, partnered with Workforce Development to create an innovative program designed to provide career opportunities for LPNs while responding to staffing shortages in perioperative and OB practice areas. Run as a pilot in 2022, the program welcomed nine participants whose training was coordinated by **Charlotte Guglielmi**, RN, Clinical Manager for Perioperative Education, and **Debra Savage**, DNP, RN, Clinical Nurse and unit educator in perioperative services.

15 earn DNP through Simmons partnership

BIDMC's partnership with Simmons University includes masters and doctoral programs in nursing leadership. In 2022, 15 staff completed the DNP program. Shown are:

(Front row)
Suzanne Joyner, DNP, RN
Claire Cruz, DNP, RN
Bridget Sammon, DNP, RN
Debra Savage, DNP, RN
Jenifer Kaufman, DNP, RN
 (Back row)
Scott Rollins, DNP, RN
Danielle Souza, DNP, RN
Julie Dasey, DNP, RN
Roxane White, DNP, RN
Brid Walsh, DNP, RN
Kathy Tolland, DNP, RN

(Insets, left to right)
Lauren Clark, DNP, RN
Charlotte Clements, DNP, RN
Jacqueline FitzGerald, DNP, RN
Kari Phillips, DNP, RN



Marsha Maurer inducted into the American Academy of Nursing



Marsha L. Maurer, DNP, RN, FAONL, FAAN

On Oct. 29, **Marsha Maurer**, DNP, RN, BIDMC's 2022 Senior Vice President for Patient Care Services and Chief Nursing Officer, was inducted as a Fellow of the [American Academy of Nursing](#). Widely considered one of the highest honors in the nursing profession, the designation acknowledges the Fellow's contributions to the profession and their impact on public health. Maurer was nominated for her transformative work to address inequalities of opportunity in nursing, her development of innovative academic and service partnerships, and her leadership in emergency management. On learning of the honor, BIDMC President Pete Healy noted, **"As one of the preeminent nursing leaders in the country, Marsha is very worthy of this recognition as she continues to blaze trails to enhance the lives of our patients and staff, and as her transformative leadership is influencing the broader profession."** The induction took place at the Academy's Health Policy Conference in Washington D.C. Maurer was previously named a Fellow of the [American Organization for Nursing Leadership](#).

On being inducted as a Fellow, **Marsha Maurer**, DNP, RN, FAONL, FAAN (*center*), was congratulated by the two colleagues who sponsored her candidacy, **Judy Beal**, DNSc, RN, FAAN (*left*), Dean Emerita, Simmons University; and **Anne Gross**, PhD, RN, NEA-BC, FAAN, Senior Vice President, Patient Care Services, and Chief Nursing Officer, Dana-Farber Cancer Institute.



Members of the second cohort in the BIDMC-Emmanuel partnership (see p. 22) were among the first graduates of the BIDMC Transition to Practice (TTP) Program. They completed TTP while earning a bachelor's degree at Emmanuel College. Shown are: (*Front row*) **Shelley Calder**, DNP, RN, Associate Chief Nurse for Professional Development, Research, and Magnet; graduates **Jessica Correia**, RN, **Natasha Maurose**, RN, **Luarytza Quiñones**, RN, **Ashleigh Coppin-John**, RN, and **Jamila Hobbs**, RN; **Marsha Maurer**, DNP, RN, former Senior Vice President, Patient Care Services and Chief Nursing Officer; and **Jenny Thomas**, DNP, RN, Nursing Director for Shared Services. (*Back row*) **Pete Healy**, President of BIDMC; graduates **Joanne Smith**, RN, **Dolores Belabe**, RN, **Claire Tongkaew**, RN, **Wilfred Cadet**, RN, **Vincent Fong**, RN, and **Yassine El Hamiz**, RN; and **Bridget Gardner**, Director of Pipeline Programs.

@Nursing_BIDMC debuts on Instagram!

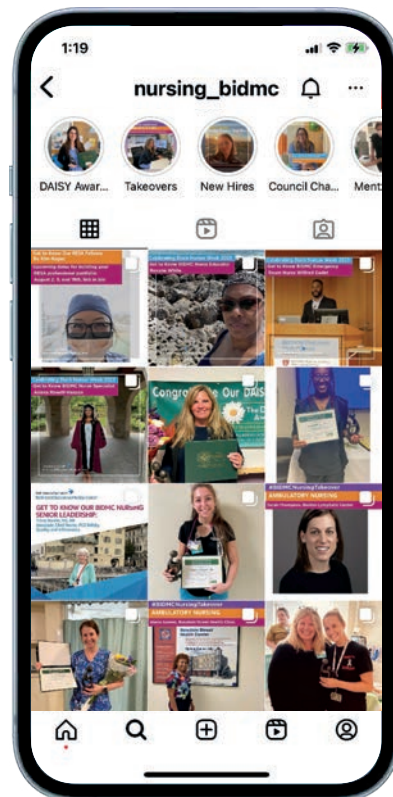
In August, a [BIDMC Nursing account](#) was launched on Instagram. The account quickly met and exceeded expectations, checking off all the major goals envisioned by the leadership team and the professional governance councils, which included:

- ✓ Showcasing BIDMC's unique nursing culture and values
- ✓ Adding a powerful recruitment and retention tool
- ✓ Building community
- ✓ Sharing pride in the work of nursing at BIDMC



In just under five months, the account had 1,000 followers, with new followers coming online every week. The "likes" and comments have come from a variety of sources including local colleges and universities, professional nursing organizations, and members of the community.

The daily account management is led by Communications Specialist **Katie Benoit**. **"We've really built a positive platform to showcase various nursing programs and initiatives,"** she says. **"We've had unit takeovers, conference spotlights, specialty recognitions, mentor/mentee profiles, and so much more. It's been really energizing."** **Jane Wandel**, RN, Program Director for Communications in Nursing, works with Benoit on the account and is thrilled with its success. **"We've had some great follow backs and comments,"** she says. **"It's really been a wonderful way to showcase what makes BIDMC nursing so special."**



Transition to Practice Nurse Residency graduates first cohort

Sharon O'Donoghue, DNP, RN, Nurse Specialist for Professional Development, announced in February 2022 that 24 nurses were the first to complete the BIDMC Transition to Practice (TTP) Nurse Residency program for new graduate nurses that had launched in 2021. TTP provides a year-long structured program to support the novice nurse in transitioning to the role of nursing professional. It includes monthly didactic seminars, opportunities for networking, and time for clinical reflection where participants can share both challenges and successes they are experiencing on their home units. **"We are following the research in implementing the TTP program,"** shared O'Donoghue. **"We know this approach can help new nurses navigate that challenging first year, benefiting both staff and patients. Our first cohort was terrific, helping the leadership team fine tune the program to best meet staff needs."**

O'Donoghue says TTP expanded throughout 2022, welcoming 60 participants in May and 118 in September. The program covers topics in clinical care, professional role development, leadership, and evidence-based practice.



Graduates of the first TTP cohort included the above Emmanuel grads, plus these additional nurses. Congratulations to all!

- Nicolla Bulato**, RN
- Fatiana Cardoso**, RN
- Ashley Colantoni**, RN
- Hannah Duffy**, RN
- Rachelle Edmond**, RN
- Lucy Gogarty**, RN
- Winta Haile**, RN
- Mikyong Kim**, RN
- Korey Little**, RN
- Madison O'Gryzek**, RN
- Tess Strandberg**, RN
- Carolyn Tracey**, RN
- Lihua Yu**, RN

Spotlights Professional Activities of Nursing Staff*

Academic Degrees

Dolores Belabe Bachelor of Science in Nursing, Emmanuel College	Julie Dasey Doctor of Nursing Practice, Simmons University	Danielle Harn Master of Science in Nursing, Simmons University	Natasha Maurose Bachelor of Science in Nursing, Emmanuel College	Bridget Sammon Doctor of Nursing Practice, Simmons University
Wilfred Cadet Bachelor of Science in Nursing, Emmanuel College	Yassine El Hamiz Bachelor of Science in Nursing, Emmanuel College	Jamila Hobbs Bachelor of Science in Nursing, Emmanuel College	Kristina McAndrew Master of Science in Nursing, University of Massachusetts, Boston	Debra Savage Doctor of Nursing Practice, Simmons University
Lauren Clark Doctor of Nursing Practice, Simmons University	Jacqueline FitzGerald Doctor of Nursing Practice, Simmons University	Devon Hoyt Master of Science in Nursing, Georgetown University	Amanda Morse Master of Science in Nursing, Regis College	Joanne Smith Bachelor of Science in Nursing, Emmanuel College
Charlotte Clements Doctor of Nursing Practice, Simmons University	Vincent Fong Bachelor of Science in Nursing, Emmanuel College	Suzanne Joyner Doctor of Nursing Practice, Simmons University	Monica Pecora Master of Science in Nursing, Curry College	Danielle Souza Doctor of Nursing Practice, Simmons University
Molly Connolly Bachelor of Science in Nursing, Fisher College	Lydia Gallup Master of Science in Health Informatics, Northeastern University	Jenifer Kaufman Doctor of Nursing Practice, Simmons University	Carolyn Phelan Master of Science in Nursing, Simmons University	Kathleen Tolland Doctor of Nursing Practice, Simmons University
Ashleigh Coppin-John Bachelor of Science in Nursing, Emmanuel College	Brooke Goodman Master of Science in Nursing, University of North Carolina, Wilmington	Jessica Kreiser Master of Science in Nursing, Curry College	Kari Phillips Doctor of Nursing Practice, Simmons University	Claire Tongkaew Bachelor of Science in Nursing, Emmanuel College
Brittany Corliss Masters of Science in Nursing, Regis College	Danielle Gott Master of Science in Nursing, Framingham State University	Shelley Lynch Doctor of Nursing Practice, University of North Carolina, Chapel Hill	Julie Preissler Master of Science in Nursing, Simmons University	Brid Walsh Doctor of Nursing Practice, Simmons University
Jessica Correia Bachelor of Science in Nursing, Emmanuel College	Gladys Gualberto Bachelor of Science in Nursing, Southern New Hampshire University	Caitlynn Marcotte Master of Science in Nursing, Northeastern University	Luarytza Quiñones Bachelor of Science in Nursing, Emmanuel College	Roxane White Doctor of Nursing Practice, Simmons University
Claire Cruz Doctor of Nursing Practice, Simmons University			Scott Rollins Doctor of Nursing Practice, Simmons University	Shane Yeomans Master of Science in Nursing, MGH Institute of Health Professions

New or Renewed Certifications

Hannah Alberts , certified in Obstetric Nursing	Brandan Call , recertified in Critical Care Nursing	Christine Culleton , recertified as a Wound Ostomy Nurse	Stephanie Dutton , certified in Critical Care Nursing	Maria Gavin , certified in Medical-Surgical Nursing
Christopher Allen , recertified in Critical Care Nursing	Kimberley Campbell , recertified in Obstetric Nursing and Electronic Fetal Monitoring	Nicole Daly , certified in Neonatal Intensive Care Nursing	Kathleen Edwards , certified as a Case Management Nurse	Mary Grzybinski , recertified as a Post-Anesthesia Nurse
Lauren Amazeen , certified in Critical Care Nursing	Jenny Canales , certified as a Breastfeeding Counselor	Kathleen Dauphinais , certified in Inpatient Antepartum Nursing	Karen Ewen , certified in Medical-Surgical Nursing	May Ellen Gunning , recertified as a Wound Ostomy Nurse
Kathy Baker , certified in Oncology Nursing	Nancy Carpenter , certified in Emergency Nursing	Britt Days , certified as a Clinical Documentation Specialist	Alexandra Fishbone , certified as a Clinical Transplant Nurse	Eric Harrington , certified in Cardiovascular Nursing
Tracy Barton , certified as a Clinical Transplant Nurse	Kathleen Casey , certified in Medical-Surgical Nursing	Yuechao Deng , certified as a Clinical Documentation Specialist	Martha Florance , certified in Maternal Newborn Nursing	John Harrison , certified in Critical Care Nursing
Rashod Blades , certified in Electronic Fetal Monitoring	Kaitlyn Cavaleri , certified in Cardiovascular Nursing	Sophia Doerr , certified in Cardiovascular Nursing	Danielle Fronduto , certified in Critical Care Nursing	Bridget Hayes , certified as a Breastfeeding Counselor
Jennifer Borges , certified in Obstetric Nursing	Marilyn Cipolla , certified as a Clinical Documentation Specialist	Lindsay Duphiney , certified in Medical-Surgical Nursing	Steven Fry , certified in Critical Care Nursing	Maria Hedberg , certified as a Hypertension Clinician
Mary Ellen Bowers , certified as a Nurse Coach	Michelle Crowley , certified in Critical Care Nursing	Michelle Dustin , recertified in Critical Care Nursing	Suzanne Garland , certified in Cardiovascular Nursing	Clara Heiden , certified in Medical-Surgical Nursing
Ann Brady , recertified in Oncology Nursing				Kayla Hodas , certified in Medical-Surgical Nursing

Certifications (cont'd)

Leanne Homan , certified as a Healthcare Ethics Consultant	Caitlynn Marcotte , certified in Emergency Nursing and as a Trauma Certified Registered Nurse	Susannah Quinlan , certified in Cardiovascular Nursing
Susan Jepsen , certified in Emergency Nursing	Erin Maxwell , recertified in Obstetric Nursing	Brenda Reed , recertified as a Clinical Transplant Coordinator
Mary Hunt Johnson , recertified in Oncology Nursing	Andrea Milano , recertified in Cardiac Medicine	Samantha Reustle , certified in Medical-Surgical Nursing
Nicole Keenan , certified in Inpatient Obstetric Nursing	Susan Moore , certified in Emergency Nursing	JoEllen Ross , recertified in Oncology Nursing
Jake Kenney , recertified in Oncology Nursing	Kathleen Mulligan , certified as an Ambulatory Peri-Anesthesia Nurse and a Post-Anesthesia Nurse	Maureen Schnur , certified as an International Board Certified Lactation Consultant
Julie Knute , certified in Cardiovascular Nursing	Peter Murphy , certified in Neonatal Intensive Care Nursing	Jade Shing , certified in Critical Care Nursing
Tracy Lee , certified as a Nurse Executive, Advanced	Jeanne Nielsen , certified as a Bone Marrow Transplant Nurse	Briana Smith , certified in Oncology Nursing
Jessica Lennartz , certified as a Clinical Documentation Specialist	Elena Olson , certified in Critical Care Nursing	Jennifer Starbird , certified in Cardiac Medicine
Megan Letendre , certified in Neonatal Intensive Care Nursing	Sydney Orlando , certified in Critical Care Nursing	Gina Story , certified in Neonatal Intensive Care Nursing
Hannah Lichtman , certified in Cardiovascular Nursing	Kathleen O'Rourke , certified in Cardiovascular Nursing	Kelly Sullivan , certified in Medical-Surgical Nursing
Maureen Lira , recertified as a Wound Ostomy Nurse	Zarina Paltiel Gabay , certified in Inpatient Obstetric Nursing	Ruth-Alma Turkson-Ocran , certified as a Nurse Educator
Jennifer Longval , certified as a Breastfeeding Counselor	Emily Parsons , certified as a Clinical Transplant Nurse	Antonia Wheeler , certified in Critical Care Nursing
Stacey Lunetta , certified as a Clinical Documentation Specialist	Nicole Pellegrine , certified in Critical Care Nursing	Wai Wong , certified in Cardiovascular Nursing
Brianna Maloney , certified as a Stroke Registered Nurse	Michele Phelps , recertified as a Case Manager	Nora Wood , certified in Critical Care Nursing
Sarah Marcinkiewicz , certified as a Bone Marrow Transplant Nurse	Emily Pietrowski , recertified in Pediatric Nursing	

External Awards and Honors

Shelley Lynch received **The Diane Kjervik, JD, RD, Graduate Nursing Scholarship** from The University of North Carolina, Chapel Hill.

Megan Sweden received a scholarship from the **American Hospital Association** to attend the American Hospital Association Conference.

Professional Leadership Activities

Connie Clauson was appointed by the American Association of Critical Care Nurses to the item writing team for the Neonatal Critical Care Registered Nurse certification exam.

Leanne Homan was appointed Associate Director of Clinical Ethics for the Harvard Medical School Center for Bioethics.

Audrey Nathanson was appointed Leader of the Education Committee by the Boston-New England Chapter of the International Association of Clinical Research Nurses.

Ruth-Alma Turkson-Ocran served as an Early Career Editorial Board Member for the *Journal of the American Heart Association*.

Health-Related Community Activities

Catherine Saniuk and **Alexandra Fitzgerald** organized a fundraising effort for Doctors Without Borders, raising over \$6,000.



At BIDMC, nurses are teachers!

In 2022, we

WELCOMED

552 & 129
UNDERGRADS FOR CLINICAL PLACEMENTS GRADUATE STUDENTS FOR CLINICAL PLACEMENTS



FROM 34 SCHOOLS



INCLUDING MA



252 & 58

MEMBERS OF OUR STAFF WERE PRECEPTORS FOR CLINICAL PRACTICUM STUDENTS

MEMBERS OF OUR STAFF WERE CLINICAL INSTRUCTORS FOR NURSING STUDENTS DOING CLINICAL PLACEMENTS WITH US

Publications

Shelley Calder, Tomczyk B, Cussen ME, Hansen GJ, Hansen TJ, Jensen J, Mossin P, Andersen B, Rasmussen CO, Schliemann P. (2022). A framework for standardizing emergency nursing education and training across a regional health care system: Programming, planning, and development via international collaboration. *Journal of Emergency Nursing*, 48(1):104-116.

Connor J, Kyalwazi A, **Ruth-Alma Turkson-Ocran**, Ölviczky D. (2022). Promoting inclusive recruitment: A qualitative study of Black adults' decision to participate in genetic research. *Journal of Urban Health*, 99(5):803-812.

Bridgid Joseph, Kimberlyann Sulmonte, Susan DeSanto-Madeya, Koeninger-Donohue R, Cocchi M. (2022). Improving accuracy in documenting cardiopulmonary arrest events. *American Journal of Nursing*, 122(4):40-45.

Veronica Kelly, K. Michelle Baar-Daley. (2022). Improving clinical documentation compliance pre-gastrointestinal endoscopy procedures through the use of an endoscopy checklist. *Gastroenterology Nursing*, 45(5):328-334.

Yael Koren, Leveille S, You T. (2022). Brief Pain Inventory Pain Interference Subscale: Assessing interference with daily living activities in older adults with multisite musculoskeletal pain. *Frontiers in Pain Research*, 3, May 9. <https://doi.org/10.3389/fpain.2022.897725>.

Kovell LC, Maxner B, Shankara S, Lemon SC, Person SD, Moore Simas TA, **Ruth-Alma Turkson-Ocran**, McManus DD, Juraschek SP. (2022). Home blood pressure monitoring in women of child-bearing age from 2009 to 2014. *American Journal of Hypertension*, 35(8):694-698.

Marcantonio ER, Fick DM, Jung Y, Inouye SK, Boltz M, Leslie DL, Husser E, Shrestha P, Moore A, **Kimberlyann Sulmonte**, Siuta J, Boustani M, Ngo LH. (2022). Comparative implementation of a brief app-directed delirium identification protocol by hospitalists, nurses, and nursing assistants. *Annals of Internal Medicine*, 75(1):65-73.

Cassandra Plamondon, Kym Peterson, Kathy Baker, Jenny Barsamian, Ann Marie Grillo Darcy, Lynn Mackinson, Andrea Milano, Lauren Mills. (2022). The implementation of the graduate nurse role to support nursing staff during the COVID-19 pandemic. *Clinical Nurse Specialist*, 36(2):109-115.

Siewert B, Brook O, **Suzanne Swede**n, Ahmed M, Kruskal J. (2022). Outcomes of postprocedural closeout checklist implementation to prevent adverse events during interventional radiology procedures: An initiative to improve outcomes. *Journal of Vascular and Interventional Radiology*, 33(10):1240-1246.

Kimberlyann Sulmonte, Patricia Bourie, Kerry Carnevale, Lauren Clark, Bridgid Joseph, Midura M, Jane Wandel, Marsha Maurer. (2022). Flexibility in a crisis: How strong relational coordination and Lean literacy helped us weather the COVID storm. *Nursing Administration Quarterly*, 46(4):316-323.

John Whitlock. (2022). Cardiac surgery unit advanced life support training: A 10-year retrospective study examining patient mortality outcomes after implementation. *Dimensions of Critical Care Nursing*, 42(1):22-32.



Presentations

Podium/Virtual

Jennifer Oztan. Portable cardiac ultrasound: Using the CLUE protocol to guide care at the bedside. American Association of Critical Care Nurses, National Teaching Institute, Houston, Texas.

Barbara Regan. Pulmonary artery catheter basic care: What you need to know to safely care for your patient. American Association of Critical Care Nurses, National Teaching Institute, Houston, Texas.

Sanders J, **Gina Pallanta**, Valocin K. Reducing weight bias in nursing: A review of effective educational interventions. Elsevier, 8th International Nurse Education Conference, Barcelona, Spain.

Ruth-Alma Turkson-Ocran. Co-intervention support for self-monitored blood pressure monitoring. American Heart Association, Hypertension Scientific Sessions 2022, San Diego, Calif.

Ruth-Alma Turkson-Ocran. Advancing equity in cardiometabolic health in persons of African descent through community engaged research. Virginia Commonwealth University, Richmond, Va.

Podcast/Webinar

Ruth-Alma Turkson-Ocran. Diabetes mellitus in adults. Mahidol University, Nakhon Sawan, Thailand. 8th Webinar on Current Trends in Diabetes Care.

Ruth-Alma Turkson-Ocran co-hosted the podcast series, Under Pressure, and presented Episode #5: Shared decision-making and health equity.

Poster

Danielle Leone-Sheehan. Teaching resilience through reflective practice. Massachusetts/Rhode Island League for Nursing, MARILN Fall Conference, Worcester, Mass.

McDonough MR, **Danielle Leone-Sheehan**. Improving the care of the dyad after fetal loss: A qualitative exploration of patient experiences. American Nurses Association Massachusetts, ANAMASS Spring Conference, Sutton, Mass.

Elena Olson, Kendra Strachan. Mentorship Program: Strengthening relationships while navigating a pandemic. American Organization for Nursing Leadership, Professional Governance Leadership Conference, Baltimore, Md.

Zarina Paltiel Gabay, Gondwe KW, Topaz M. The new predicting tool that could raise breastfeeding rates. Association of Women's Health, Obstetric, and Neonatal Nurses, 2022 AWHONN Convention, Aurora, Colo., and at the Synova Perinatal Leadership Forum, Naples, Fla.

Aya Sato-DiLorenzo, Sendrowski B, Vasquez L, Lithotomos R, Olezkiewicz K, Shea M. EpiPen STAT: A quality improvement project for anaphylaxis management. American Society of Clinical Oncology, ASCO Quality Care Symposium, Chicago, Ill.

Media Appearance

Connie Clauson was profiled in the *Institute of Perinatal Quality Improvement News* on May 23, 2022, regarding her work on health equity initiatives in the NICU.

Research

Victoria Shaw, Susan DeSanto-Madeya. Nurses perceptions regarding the use of volatile anesthetics in the ICU.

BIDMC Nursing in 2022: An eventful year!

JAN Close to **90** nurses are **Partners in Nursing Excellence!**

FEB Coping with the Omicron wave of COVID-19

MAR Three nurses honored by **NERBNA**! New tool to track quality metrics is launched

MAY Celebrating nursing awards! **Debra Codispoti, RN**, throws out the first pitch at Fenway Park during Nurses week.

AUG @Nursing_BIDMC launches on Instagram

SEP Magnet site visit escorts shine!

OCT **Marsha Maurer** inducted as a Fellow in the American Academy of Nursing. Magnet Conference in Philadelphia

NOV We are Magnet!

DEC 15 graduate from Simons in the DNP cohort! 11 graduate from Emmanuel in the BSN cohort! COVID-19 waning! Testing clinics close!

ACKNOWLEDGEMENTS

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WRITER/EDITOR Jane C. Wandel, RN • **EXECUTIVE EDITORS** Jane Foley, DNP, MHA, RN, and Shelley Calder, DNP, RN

SHOWN ON COVER (*Front row*) Kathleen Bueschen, RN; Luarytza Quiñones, RN; Ashleigh Coppin-John, RN; and Nadia Alcindor, RN
(*Back row*) Miguel Gonzalez, RN; Megan Swedeen, RN; Wilfred Cadet, RN; and Vincent Fong, RN

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