Nurses Continue to Play a Significant Role in Our Success

As I reflect on 2018, I am extremely proud of our accomplishments and the significant role nursing has played in so many key initiatives and successful outcomes. Despite the many challenges we face in healthcare, the compassion, commitment and resiliency of nurses strengthen our resolve to meet these challenges and move forward.

One such challenge is workplace violence (WPV). We have a systemwide committee in place to address the WPV issue, and this year we implemented several initiatives, including: increased reporting of WPV in RL6 and at the daily safety huddle, a WPV video on the portal, and an organizational statement of Zero Tolerance for WPV to share with patients, families and visitors, highlighting our commitment to a safe work environment. (See more in story on page 4.)

This year, we continued our journey to transform the patient experience to be more safe, seamless and personal. While there are many teams and initiatives working on Transformation PX™, nursing played a significant role in three key initiatives: the Driven Idea Lab™, the Amazing Race, and MyChart Bedside.

In October 2018, we launched a new Driven Idea Lab, and asked staff, physicians and volunteers to share their innovative ideas. There were 314 ideas submitted, and I am proud to say that Deb Ruxton, MSN, RN, won second place and $7500 for her idea, “Personal Transition Home,” in which discharge instructions can be recorded on a device and listened to at home. (See story on page 5.)

In January 2019, we started the Amazing Race — a fun, competitive race for inpatient clinical units and the emergency rooms at both hospitals to help us meet or exceed our HCAHPS goals. To date, we have completed three of five challenges, with the CV unit winning the first poster board challenge, the PCCU and FBC units winning the “transition of care” challenge, and the FBC also winning the third challenge for cleanliness and quietness.

In February 2019, we went live with a trial of MyChart Bedside on the cardiovascular units at both hospitals. MyChart Bedside provides easy access to information, education and communication tools to help patients become more engaged in their care during and after hospitalization.

Among our many Transformation PX™ accomplishments, two stand out this year. In October 2018, Elmhurst Hospital was one of 88 healthcare organizations worldwide, and 26th in the nation, to be awarded Planetree’s highest honor: Gold Certification. In February 2019, our nurse residency program was accredited with distinction as a Practice Transition Program by the American Nurses Credentialing Center.

On June 3, 2019, we will submit our application for Magnet re-designation. I am amazed at the stories already written that highlight nursing’s contribution to quality, safety, innovation, the patient experience, and advancements in the professional practice.

In the upcoming year, we will also implement the recommendations of two consulting groups from 2018, which focus on streamlining nursing documentation and enhancing efficiencies, staffing and workflows to improve the work environment.

It is an honor and a privilege to serve as your CNO for another year. Thank you for all that you are doing for patients, families and the communities we serve — you are truly making a difference and transforming the healthcare experience.

Jean Lydon, MS, MBA, RN
System Vice President, Operations and Chief Nursing Officer
Journey to Magnet

Magnet Recognition
Linda R., MSN, RN

We are counting the days until the submission of our 2019 Magnet application document due on June 3, 2019.

Our application represents:
- 1,472 Days since achieving Magnet recognition on May 19, 2015
- 571 Days of preparation
- 91 People who contributed content and data
- 71 Exemplars
- 18 Writers
- 10 Domain leads
- 4 Magnet domains
- 1 Incredible reflection of the professional practice of nursing at Elmhurst Hospital

Magnet Recognition® from the American Nurses Credentialing Center (ANCC) is the highest and most prestigious distinction a healthcare organization can receive for nursing excellence and high-quality patient care. With only 8 percent of U.S. hospitals earning the Magnet designation, it’s clearly the gold standard. (From: https://www.americannursetoday.com/going-for-the-gold-the-value-of-attaining-magnet-recognition/)

The Magnet Model is a graphic representation of the four domains: Transformational Leadership; Structural Empowerment; Exemplary Professional Practice; and New Knowledge, Innovations, and Improvements.

The contribution that professional nursing makes is demonstrated through example and empirical outcomes.

Transformational Leadership: Nurses at all levels of the organization demonstrate advocacy, influence change, and participate in decision-making to advance practice and achieve extraordinary outcomes in an environment of mutual respect.

Structural Empowerment: Nurses engage in shared decision-making to establish standards of practice and improve patient outcomes through professional development, collaboration and contributions internally and within the community.

Exemplary Professional Practice: Nurses interact with patients, families, communications and the interdisciplinary team to impact positive patient outcomes. Nurses create and work in an environment where autonomy and accountability help define quality patient care and best practices.

New Knowledge, Innovations, and Improvements: As exemplary professionals, nurses are accountable for using and expanding nursing knowledge through evidence-based practice and research. Innovations in nursing care, care delivery, and the practice environment are the hallmarks of Magnet organizations.

Professional Practice Model
A Professional Practice Model (PPM) is a schematic that symbolizes our beliefs, values, theories and systems for nursing practice. The PPM defines the components of nursing practice in a way that brings significance to how nurses practice, collaborate, communicate and develop professionally to provide the highest quality care for those served by the organization. The nursing professional practice model has provided the necessary vehicle for providing structure, engaging nurses, implementing evidence-based practice, and improving patient clinical outcomes and the patient experience. (From: https://www.americannursetoday.com/adapting-professional-practice-model/)
Transformational Leadership

Council Work

Nurse Executive Council
Chair: Jean Lydon, MS, MBA, RN
Purpose: Provide leadership and direction to all nursing councils. Establish annual goals for the nursing division in accordance with organizational goals and objectives.

Practice/Quality Council
Chair: Kathy W., BSN, RN
Purpose: Implement and maintain standards and quality of clinical nursing practice and patient care consistent with evidence-based practice and regulatory requirements.

Research and EBP Council
Chair: Amy W., MSN, APN-CCNS

Work Life Council
Chair: Colleen D., BSN, RN, CHPN
Purpose: Enhance nursing satisfaction at Elmhurst Hospital and promote a positive work environment.

Nursing Professional

Development Council
Chair: Brittany K., MSN, RN
Purpose: Define, implement, evaluate and maintain educational standards that promote professional growth, development and ongoing clinical competency. Identify strategies to promote retention of the professional nurse.

APN Professional Practice Council
Chair: Svetla I., DNP, APN, FNP-C, PCCN
Purpose: Evaluate patient care within the scope of the APN privileges and scope of practice through ongoing and focused professional practice evaluation.

Chair Council
Chair: Paul F., MSN, RN
Purpose: Share information, projects, best practice, and key learnings across unit practice councils. Align UPCs with nursing and organization strategic plan.

Physician Practice Division (PPD)
Ambulatory Nursing Clinic Council
Co-Chairs: Sharon M., ADN, RN & Susan S., BSN, RN
Purpose: Define, implement, and maintain the highest standards of clinical practice, consistent with the professional standards and requirements of regulatory agencies directed toward improved health outcomes for all patients.

Nursing Strategic Plan

The FY18-FY21 Nursing Strategic plan was developed in collaboration with the Nurse Executive Council, with input from nurses who attended the nursing annual meeting in May 2018. The plan defines goals and initiatives that will move nursing forward and support a successful implementation of the system strategic plan.

<table>
<thead>
<tr>
<th>KEY GOALS</th>
<th>PROGRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improve patient safety through reduction of Clostridium difficile infections</td>
<td>Achieved</td>
</tr>
<tr>
<td>Improve performance on nurse sensitive indicators: • Patient falls with injury • CLABSI • CAUTI</td>
<td>Achieved</td>
</tr>
<tr>
<td>Implement strategies for nurse safety: • RN/Public Safety Rounding • Behavioral Emergency Response Team • Crisis Prevention training</td>
<td>Achieved</td>
</tr>
<tr>
<td>Achieve accreditation of our Nurse Residency Program</td>
<td>Achieved</td>
</tr>
<tr>
<td>Revise nursing awards and recognition programs</td>
<td>Achieved</td>
</tr>
<tr>
<td>Increase Unit Practice Council participation in community events</td>
<td>Achieved</td>
</tr>
<tr>
<td>Prepare for successful re-designation of Magnet recognition</td>
<td>In Progress</td>
</tr>
</tbody>
</table>
Workplace Violence and BERT

Eric S., BSN, RN, CCRN

Workplace violence (WPV) is widespread and underreported in healthcare. Healthcare workers, especially direct care providers, face a far greater risk of being injured on the job than workers in other industries. Violent crimes taking place in healthcare institutions have risen from two events per 100 beds in 2012, to almost three in 2015, according to the Joint Commission. About 50 percent of all workplace assaults occur in the healthcare setting, according to the Bureau of Labor Statistics.

To address these facts and staff concerns related to safety, a system Workplace Violence Committee was formed in August 2016. This committee is co-led by Jean Lydon, MS, MBA, RN, System Vice President, Operations and Chief Nursing Officer. In her role as co-chair, Jean is responsible for implementing strategies aimed at reducing the overall number and severity of WPV incidences. A few of the initiatives implemented by the committee were the development of system policies around WPV, drills for active threat, Crisis Prevention Training (CPI), RN/Public Safety rounding, and behavioral response teams.

The Behavioral Emergency Response Team (BERT) at Elmhurst Hospital went live January 2019 in all inpatient areas. One goal of the BERT is to identify patients, visitors and staff who are beginning to verbally escalate or are becoming physically restless and intervene, thereby decreasing the need for Code Support. A second goal of the BERT is to decrease the number of patient and staff injuries due to patients and visitors escalating from increased agitation to physical violence.

BERT members include the patient’s RN, unit team leader, Public Safety representative, nursing supervisor, hospitalist or nocturnist as medical oversight, spiritual care leader, and psychiatric liaison. BERT members received special responder training in an online educational format and also through a live course taught by Ghassan Aldurra, MD, Chief of Psychiatric Services at Elmhurst Hospital. BERT members also completed or renewed CPI training. All staff working in inpatient areas received online educational training on behavioral emergency response, including when to call a BERT member versus Code Support, their role in the BERT, and information on typical medications used to manage escalating anxiety, delirium and psychosis during and after a BERT event.

The team meets regularly to review the record and debrief tools. This fosters a cycle of continuous process improvement to refine the BERT response and minimize workplace violence at Elmhurst Hospital.

Nurse Residency Program

Linda R., MSN, RN

In fall 2018, we applied for accreditation of the Nurse Residency Program (NRP) through the American Nurses Credentialing Center’s Practice Transition Accreditation Program (PTAP)™. In February 2019, we were notified of the decision that Elmhurst Hospital is accredited with distinction as a Practice Transition Program by the ANCC’s Commission on Accreditation.

Founded in 2011, the Nurse Residency Program supports the transition into practice for new graduate nurses. The NRP uses a modified QSEN (Quality and Safety Education for Nurses) curriculum and spans one year. During the first 16 weeks of the program, the residents rotate through the four medical-surgical inpatient units. Their clinical learning is supported by preceptors and an assigned resident facilitator who ensures progress, identifies and mitigates gaps in learning, and smooths unit-to-unit transitions.

The residents participate in classroom time during the first year of residency that focuses on clinical knowledge and skill, and the professional practice of nursing. From week 20 to the completion of the residency, the residents complete an Evidence-Based Practice (EBP) project that includes a test of change. The residents formally present their EBP posters at the EBP symposium in the fall. This presentation is a culmination of their learning and signifies their official graduation from the program. Since 2011, 192 new graduate nurses have participated in the NRP.
Thermoregulation in the Newborn

Cassie C., BSN, RN

As a member of the 2017/2018 new graduate Nurse Residency Program at Elmhurst Hospital, I was given the opportunity to spearhead research on the Family Birthing Center (FBC) Unit. The topic I chose focused on bathing techniques and their potential effects on thermoregulation in the newborn. Current evidence outlines the importance of delayed bathing, which is practiced at Elmhurst Hospital. However, the technique (sponge vs. immersive) by which the first bath is performed is not universal. Following an intensive literature review, an application was sent to the Institutional Research Oversight Committee (IROC) as well as the Institutional Review Board (IRB) for approval. Once approved by both the IROC and IRB, data collection through chart audits began. The data collected included: age of newborn, gender, type and time of bath, temperature prior to bath, and temperature within 30 minutes of bath completion. Data collection was completed once 60 baths were audited. Significant findings include:

- Newborns receiving sponge baths had significantly lower post-bath temperatures (98.2 vs. 98.4)
- Female newborns that received a sponge bath had lower post-bath temperatures than those who had a submerged bath.
- 5 of the 60 post-bath temperatures were <97.7
- Most baths occurred on night shift (26/60)
- Of the 14 baths given during day shift, 11 were sponge technique

These findings have been presented to the FBC leadership with hopes of creating a bathing protocol/standard of care. Following the completion of this research, I had the distinct honor of presenting my work at the Edward Evidence-Based Practice (EBP) Symposium as well as the Elmhurst Nurse Residency EBP Conference for Elmhurst Hospital’s administration and leadership.

Elmhurst Nurse Wins Second Place in Driven Idea Lab™

Last fall, we challenged Edward-Elmhurst Health staff, physicians and volunteers to come up with innovative ideas that make healthcare more safe, seamless and personal. Our nurses rose to the challenge — and some took home prizes!

Deborah R., MSN, RN, was one of the big winners of the Driven Idea Lab™. Deborah won second place and $7500 for her idea “Personal Transition Home.” The premise of Ruxton’s idea is to record a patient’s personal discharge session at the hospital so that, once in the comforts of home, the patient can listen to it from any device as many times as needed using a secure personal login code.

Congratulations to the other Driven Idea Lab™ winners from Elmhurst Hospital:

- **Third place winner ($5,000 prize)**
  - Janet B., PT, DPT, CLT-LANA, Elmhurst Hospital – Personalized Care for Optimal Recovery During Cancer Survivorship

- **$1,000 prize winners**
  - Mary Beth N., MSN, RN, CEN, Elmhurst Hospital – Healthy Driven Access Card
  - Theresa H., RN, Elmhurst Hospital – Healthy Driven App

Nitrous Oxide Now an Option in Labor and Delivery

Heather R., MSN, RN

Nursing leadership and providers in the Family Birthing Center (FBC) at Elmhurst Hospital were looking for a new, innovative way to support patients during labor who desired little to no intervention during the birthing process. Non-pharmacologic labor management options were reviewed and recommendations for the use of nitrous oxide during the birthing process were brought to the FBC’s Collaborative Practice Committee (CPC). The CPC is a multidisciplinary committee comprised of obstetricians, anesthesia, neonatology, nursing and leadership who review current practices and assist with the implementation of new practices. The CPC assisted with bringing this new innovative option into practice. The FBC now provides nitrous oxide as an option during the birthing process, and is one of few hospitals in the Chicago area to offer this service.
Research Improves Diabetic Foot Care
Azam T., DNP, RN, ANP-BC

Project Title: Improving Timely Referrals by Implementing Lower Extremity Amputation Prevention Tool in a Suburban Wound Care Clinic (EWCC)

This Quality Improvement (QI) project sought to standardize diabetic ulcer assessments and timely referral to vascular/podiatry services. This project was part of a doctorate in nursing practice degree, and met federal guidelines for QI. It didn’t involve human subject research and therefore didn’t require review from the Institutional Review Board.

We noticed few discrepancies between diabetic foot ulcer (DFU) treatment guidelines and actual practice at EWCC.

This QI project involved four cycles of the Plan-Do-Study-Act (PDSA) from the Institute for Healthcare Improvement, and studied interventions related to patient engagement, teamwork improvement, and the DFU assessment and referral process.

At the end of data collection, patient and team engagement improved to 75 percent and 92 percent respectively. Also, all patients with DFUs were assessed by the Lower Extremity Amputation Prevention tool (100 percent) and appropriate referrals (100 percent) were made.

This project highlighted teamwork, improved patient care, and enhanced clinician confidence in providing safe, seamless and personal care.

AACN Bundle of Care
Eric S., BSN, RN, CCRN

Implementation of the ABCDEF bundle of care has been proven to increase positive patient outcomes, including: fewer ventilator days, fewer days of sedation, fewer days of delirium, increased out-of-bed mobility, shorter ICU length of stay, shorter hospital length of stay, fewer discharges to a subacute rehab/skilled nursing facility, and increased family engagement in care. The ABCDEF bundle of care is endorsed by both the American Association of Critical-Care Nurses and the Society of Critical Care Medicine.

In our commitment to stay current with professional best practices, the ABCDEF bundle of care and the associated documentation was added to the shift navigator in March 2018. The documentation requirements of placing this bundle of care in the EPIC shift navigator will drive best practice by each staff RN in the PCCU.

Innovative Practices Thriving at Elmhurst
Nurses continuously improve patient care by learning new skills, implementing new processes, providing new services and incorporating evidence-based care into practice. Below are projects from across all areas that our nurses are especially proud of.

<table>
<thead>
<tr>
<th>Area</th>
<th>Project</th>
</tr>
</thead>
<tbody>
<tr>
<td>ED</td>
<td>Pediatric patient distraction cart with iPad</td>
</tr>
<tr>
<td>4th Floor (Surg/Onc)</td>
<td>Code blue simulation training for nurses</td>
</tr>
<tr>
<td>5 Medical</td>
<td>“No Call” reporting between the ED and 5 Medical</td>
</tr>
<tr>
<td>Cancer Center</td>
<td>IV pole placards providing Information at a glance for infusion patients</td>
</tr>
<tr>
<td>Care Coordination</td>
<td>Standardized documentation on AVS for patients receiving post-acute referrals</td>
</tr>
<tr>
<td>Cath/EP/IR</td>
<td>Seamless same day discharge process post PCI</td>
</tr>
<tr>
<td>CV</td>
<td>Increased number of RNs with PCCN certification</td>
</tr>
<tr>
<td>Endoscopy</td>
<td>Anesthesia order set specific to endoscopy patients</td>
</tr>
<tr>
<td>FBC</td>
<td>Drapes included in cesarean section packs allow for witnessing childbirth</td>
</tr>
<tr>
<td>Immediate Care</td>
<td>Point of Care flu testing at Walk-in Clinics and Immediate Care Centers</td>
</tr>
<tr>
<td>Infection Control</td>
<td>Interprofessional team dramatically decreased hospital-acquired Clostridium difficile rates</td>
</tr>
<tr>
<td>OR</td>
<td>Utilization of the AORN Peri-op 101 program for staff members</td>
</tr>
<tr>
<td>PACU</td>
<td>Evidence-based PACU order set for hypoglycemia/hyperglycemia</td>
</tr>
<tr>
<td>PCCU</td>
<td>TCAR procedure for ultra-high risk carotid stenosis patients</td>
</tr>
<tr>
<td>PICC RNs</td>
<td>Rounding on all patients with PICC lines to reduce incidence of dislodgement</td>
</tr>
<tr>
<td>PPD</td>
<td>Medication refill process for chronic care patients</td>
</tr>
<tr>
<td>Prep/Recovery</td>
<td>Enhanced Recovery After Surgery (ERAS) protocol applied to bariatric patients</td>
</tr>
<tr>
<td>Specialty Care Clinics</td>
<td>CardioMEMS monitoring by APNs for heart failure patients. This implanted device directly measures pulmonary artery pressure.</td>
</tr>
<tr>
<td>Wound/Ostomy</td>
<td>Standardized OP wound care to a provider (APRN) model of practice</td>
</tr>
</tbody>
</table>
# Significant Improvement in C. diff Rates

**Brian D., MSN, RN**

Reducing the hospital-onset *C. difficile* (C. diff) infection rate in 2018 was imperative for multiple reasons: C. diff infections have a devastating impact on the physical and emotional well-being of patients, Elmhurst Hospital had received low ratings in the hospital Value-Based Purchasing metrics for C. diff hospital-acquired infection, which affects our reimbursement, and nursing knowledge/care can impact the transmission of hospital-acquired infections. Therefore, improving this metric was a priority from both a financial and a patient safety perspective.

Infection Control Nurses, Annemarie S., BSN, RN, CIC and Sara C., BSN, RN, led the improvement effort. The first intervention involved their work with case managing the C. diff GI panel list in Epic on a 24/7 basis. Their diligence identified inappropriate orders for the GI panel. They also reeducated the nursing staff on the C. diff Best Practice Alert (BPA) in Epic. This proved to be valuable because the team received feedback on how to improve the BPA. In April 2018, the BPA was revised based on staff input. These two measures reduced unnecessary testing. Lastly, in summer 2018, Annemarie and Sara spent four weeks rounding and educating the nursing staff about the steps to prevent hospital onset C. diff, including: Hand hygiene, personal protective equipment, environmental cleanliness, C. diff testing (2 steps), and early identification of C. diff infections.

As of January 2019, Elmhurst has shown a significant improvement in the hospital onset C. diff rate (decreased number of cases by 67%). We will reinforce this success moving forward with continued diligence and focus. Special recognition goes to Annemarie and Sara for their leadership of this initiative.

## RN Resident Evidence-Based Practice Projects

<table>
<thead>
<tr>
<th>Title/Topic</th>
<th>RN Resident Participant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improving Awareness of High Fall Risk Patients Using Exterior Indicators</td>
<td>Rachel W., BSN, RN; Andrea N., BSN, RN; Megan M., BSN, RN; Anna S., BSN, RN; Carly G., BSN, RN; Josh S., BSN, RN; Deborah M., MSN, RN, CNL</td>
</tr>
<tr>
<td>Staff Education to Improve Labeling of IV Tubing</td>
<td>Jenelle E., BSN, RN; Michelle K., MSN, RN, CNL; Yomari L., MSN, RN, CNL; Kyranna M., BSN, RN; Kelli M., BSN, RN</td>
</tr>
<tr>
<td>Man vs. Machine: Measuring Stress Levels in ED Staff During Manual vs. Mechanical CPR</td>
<td>Julia S., BSN, RN and Karrilyn L., BSN, RN</td>
</tr>
<tr>
<td>Immersive Bathing vs. Sponge Bathing: Effect on Thermoregulation in the Newborn</td>
<td>Cassie C., BSN, RN</td>
</tr>
<tr>
<td>Skin Buddies in the Progressive Critical Care Unit</td>
<td>Julian A., MSN, RN; Meagan C., BSN, RN; Jackie C., BSN, RN; Alison N., BSN, RN; Sarah O., BSN, RN; Susan R., BSN RN</td>
</tr>
<tr>
<td>Reinforcing Medication Side Effect Teaching with Inpatient Nurses</td>
<td>Elizabeth A., BSN, RN; Kailey K., BSN, RN; Krista L., BSN, RN; Megan M., BSN, RN; Sarah S., BSN, RN; Elizabeth S., BSN, RN</td>
</tr>
</tbody>
</table>
Nursing Peer Review

Nursing Peer Review (NPR) is a process by which practicing clinical nurses systematically access information, monitor and make judgments about the quality of nursing care provided by peers, and measure quality of care against professional standards of practice (ANA, as cited in Anderson, 2011). NPR strengthens the nursing profession through individual accountability and upholding standards of nursing practice by monitoring for quality patient care and improved patient outcomes.

Foundational Principles

- A peer is someone of the same rank
- Peer review is practice-focused
- Feedback is timely, routine, and a continuous expectation
- Process is educational not disciplinary
- Feedback is not anonymous
- Incorporates the developmental stage of the nurse

How NPR Strengthens the Professional Practice of Nursing

- Evaluates quality and quantity of nursing care
- Determines strengths and weaknesses of nursing care
- Provides evidence for change in policies and practice protocols to improve care
- Identifies practice patterns that indicate need for more knowledge

NPR at Elmhurst Hospital

- Formalized process
- Shared governance is used as structure
- Considers our values — Relationship-Based Care and Planetree philosophy
- Standards and criteria based on evidence
- Approach is non-punitive and impartial, focusing on lessons learned to elevate nursing practice

Nurses may submit a case for peer review by sending an email to Jennifer.Dickens@eehealth.org. The content of the email should include the patient name or CSN number, date and time of the event to be reviewed, and a brief summary of the event. Potential nursing issues that may be referred include: clinical judgement/decision-making, a technical skill, communication with members of the team, responsiveness, knowledge of nursing care/skills, follow-up or follow through, policy compliance, and documentation.

Nurse Sensitive Indicators – Eight Quarters of Data

Nursing-sensitive outcome indicators are patient outcomes that depend on the quantity or quality of nursing care. These include things like pressure ulcers and falls. Below are the four indicators that we will use in our Magnet application. Elmhurst Hospital is below the NDNQI mean in 8 out of 8 quarters for Falls with Injury, Hospital-Acquired Pressure Injuries, and Catheter-Associated Urinary Tract Infections (CAUTI) and 6 out of 8 quarters for Central Line-Associated Blood Stream Infections (CLABSI). What a great reflection of the quality of our nursing care!
Structural Empowerment

Barb T. – 2018 Spirit of Nursing Award

The annual Spirit of Nursing Award recognizes the role nurses play in quality patient outcomes, prevention of negative patient events, positive patient experience, and creation of a healing environment.

The 2018 Spirit of Nursing Award was presented to Barb T., RN. Barb is a compassionate, dependable and dedicated nurse, Barb has worked at Elmhurst Hospital for more than 18 years and is the front line RN for Interventional Radiology, EP and Cath Lab patients.

Barb is admired for her positive attitude and energetic nature. She always puts patients and their families first, and her caring, gentle spirit shines through in all she does. “Barb comes straight from heaven,” is a sentiment heard more than once from patients. Others call her a “modern-day Florence Nightingale.”

Barb is the first person to ease patients’ minds after learning they need surgery. She is proactive and knowledgeable, and facilitates a smooth and efficient pre-admission testing process to help prevent delays and long wait times for the patient. The compassion that Barb exhibits every day, in each interaction, leaves a lasting impression on all who meet her.

Karen V. – 2018 Research, Evidence-Based Practice & Innovation Award

The Research, Evidence-Based Practice (EBP) & Innovation Award honors nurses who are actively involved in the planning, implementation and interpretation of evidence-based research that led to quality improvement in the organization.

The 2018 Research, EBP & Innovation Award was presented to Karen V., RN. Karen has been with Elmhurst Hospital for 29 years, initially as a clinical nurse and Team Leader in Oncology, and, more recently, in Outpatient Oncology.

In September 2015, Karen embarked on a research study after participating in hospital skin prevalence and incidence studies. She identified a difference between her unit and other inpatient units related to patient skin redness-related incontinence and skin care products.

Karen assembled a small team, developed a research question, identified a large amount of literature, wrote a proposal, attained Institutional Review Board approval and completed a study on all chronically incontinent adult inpatients.

Karen’s data is currently being analyzed for future publication. Her work will have a significant benefit for patients, and the organization as a whole, in reducing hospital-acquired skin issues.

Colleen D. – 2018 Rising Star Award

The Rising Star Award honors newer nurses who show initiative to further their education, engage and motivate others around them, and embrace change to impact their department.

The 2018 Rising Star Award was presented to Colleen D., BSN, RN, CHPN. Colleen has been with Elmhurst Hospital for three years, and was previously in the Nurse Resident Program. She is a Certified Hospice and Palliative Nurse, cross-trained in orthopedic care, and a 4th floor Skin Champion.

Colleen goes above and beyond in her role caring for oncology, end-of-life and surgical patients. She has a kind and caring spirit and motivates patients to achieve their goals, which consistently results in early discharges.

Colleen is also a staff favorite as a team leader. She holds her peers accountable to give their best effort, and she holds herself to the same high standards. Colleen strives to make the department more efficient, capable, and adaptable for our patients. She is, without question, an extremely valuable nurse and a wonderful leader.
Tiffani M., ANP-BC, ACHPN inpatient palliative care APN, is the content presenter at Elmhurst Hospital. We completed three educational sessions in September 2018, November 2018 and March 2019. The programs included a total of 42 multidisciplinary hospital staff. The majority of participants were staff nurses and APNs.

Overall, the program has had excellent feedback from staff, who now feel more comfortable having challenging conversations with patients and families as a result of this education. This program will continue to be offered to interested staff on a biannual basis.

The Excellence in Leadership Award honors individuals who empower staff by promoting a positive work environment, growth opportunities and mentorship, and who promote change to improve patient care quality outcomes.

The 2018 Excellence in Leadership Award was presented to Pat S., RN, System Supervisor for the Specialty Care Clinics. Pat is known for being patient, kind and approachable, a hands-on supervisor whose door is always open. She is eager to help her staff learn, excel and improve. She values each staff member’s unique role and continually recognizes hard work.

Pat also holds her staff accountable for ensuring that each patient is empowered to participate in decision-making about their care. She reviews schedules daily and addresses staffing needs to ensure patients are seen in a timely manner. She herself responds to every patient call so that patients know they are being heard.

Pat encourages self-motivation, thinking outside the box, continued education and job advancement. She truly has the best interest of her staff, patients and families at the center of everything she does.

Nursing certification is highly valued by Elmhurst Hospital because it promotes the professional growth of nurses among the many different nurse specialties within the organization. Elmhurst encourages its nurses to obtain certifications and provides financial support for certification. Certification benefits nurses, patients and their families, and hospitals. When nurses obtain a certification, they expand their knowledge base, grow within their field and evolve as professionals.

In 2018, the Professional Development Council members increased efforts toward both promotion and recognition of certifications. On March 19 (National Certified Nurses Day), they held booth sessions which included 11 different ANCC-recognized certifications run by nurses who held those certifications. RNs who were interested in obtaining a certification could attend and receive information about areas of interest. A lunch was provided to all Elmhurst RNs holding a certification, and 266 nurses were given a certificate signed by Jean Lydon recognizing their specific certification.
Learn, Grow and Stay

We support a lifelong learning culture through continuous professional development and effective transition of RNs into the work environment. Congratulations to all of our nurses who have achieved a degree, a certification, or have been recognized for their contributions!

Attended Magnet Conference 2018
Denver Colorado
Jean Lydon, MBA, MS, RN
Laura L., MSN, RN
Colleen D., BSN, RN, CHPN
Sharon M., BS, ADN, RN
Laura L., MSN, RN, APN/CNS

Attended Planetree Conference 2018
Baltimore, Maryland
Jean Lydon, MBA, MS, RN
Karin B., BSN, RN
Megan S., MSN, RN, CPXP

Nursing Degrees – 26 Nurses achieved a BSN or higher in 2018
Stephanie A. – BSN
Jamie A. – BSN
Emanu A. – MSN
Laura B. – DNP
Jennifer B. – MSN
Cherly B. – BSN
Irina D.-R. – BSN
Heather G. – MSN
Christine G. – BSN
Donna H. – MSN
Kinga K. – BSN
Jessica K. – BSN
Lisa K. – BSN
Victoria L. – BSN
Julia A. P. – BSN
Odolina P. – MSN
Emily R. – MSN
Grace S. – BSN
Paulina S. – BSN
Lashon S. – MSN
Kathleen S. – MSN
Erica S. – BSN
Carole S. – MSN
Azam T. – DNP
Emily T. – MSN
Petronela Z. – BSN

Certifications – 35 Nurses obtained a new certification in 2018
Ann B. – PCCN®
Progressive Critical Care Nurse
Michele B. – C-EMF
Electronic Fetal Monitoring
Crystal B. – RN-BC
Medical-Surgical Registered Nurse
Latoya C. – PCCN®
Progressive Critical Care Nurse
Heather D. – RN-BC
Ambulatory Care Nursing
Sunita D. – PCCN®
Progressive Critical Care Nurse
Nina D. – CEN®
Certified Emergency Nurse
Lisandra F. – PCCN®
Progressive Critical Care Nurse
Kevin F. – CEN®
Certified Emergency Nurse
Jeanette G. – PCCN®
Progressive Critical Care Nurse
Kristina H. – Onc®
Oncology Certified Nurse
Katarina J. – PCCN®
Progressive Critical Care Nurse
Taylor L. – PCCN®
Progressive Critical Care Nurse
Deirda L. – CEN®
Certified Emergency Nurse
Angela M. – PCCN®
Progressive Critical Care Nurse
Erin M. – PCCN®
Progressive Critical Care Nurse
Audrey M. – PCCN®
Progressive Critical Care Nurse
Kasandra M. – CCRN®
Acute/Critical Care Nursing (Adult)
Amada M. – CEN®
Certified Emergency Nurse
Christine N. – CEN®
Certified Emergency Nurse
Nicole N. – CCRN®
Acute/Critical Care Nursing (Adult)
Susan O. – FNP-C
Family Nurse Practitioner
Stephanie P. – PCCN®
Progressive Critical Care Nurse
Christopher Q. – CEN®
Certified Emergency Nurse
Griselle R. – OCN®
Oncology Certified Nurse
Abla S. – CNOR®
Certified Nurse Operating Room
Theresa S. – CEN®
Certified Emergency Nurse
Danielle S. – PCCN®
Progressive Critical Care Nurse
Corey T. – CEN®
Certified Emergency Nurse
Emily T. – PCCN®
Progressive Critical Care Nurse
Teri V. – OCN®
Oncology Certified Nurse
Amanda W. – RN-BC
Ambulatory Care Nursing
Margaret W. – CDE
Certified Diabetes Educator Certification
Wanda W. – CMSRN®
Certified Medical-Surgical Registered Nurse
Amy W. – PCCN®
Progressive Critical Care Nurse

Every attempt was made to acknowledge the accomplishments of our nurses – please excuse us if you were overlooked in error.

2018 RN Conferences, Education, Recognition, and Celebrations

<table>
<thead>
<tr>
<th>Event</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Magnet Conference</td>
<td>$13,979</td>
</tr>
<tr>
<td>Planetree Conference</td>
<td>$20,914</td>
</tr>
<tr>
<td>Elmhurst College - BSN completion</td>
<td>$33,170</td>
</tr>
<tr>
<td>scholarships</td>
<td>$86,000</td>
</tr>
<tr>
<td>Nurses Week Activities</td>
<td>$25,486</td>
</tr>
<tr>
<td>Breakfast with Jean</td>
<td>$3,252</td>
</tr>
<tr>
<td>Transformation PX™</td>
<td>$67,254</td>
</tr>
<tr>
<td>Professional Development Conference</td>
<td>$10,069</td>
</tr>
<tr>
<td>Supporting Certification</td>
<td>$14,575</td>
</tr>
<tr>
<td>Reigning the Spirit of Caring</td>
<td>$27,470</td>
</tr>
<tr>
<td>Nursing Annual Meeting</td>
<td>$91,502</td>
</tr>
<tr>
<td>RN Residency Program</td>
<td>$331,730</td>
</tr>
<tr>
<td>RN Tuition Reimbursement</td>
<td>$619,077</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$1,311,308</strong></td>
</tr>
</tbody>
</table>

RN Healthy Driven Heroes
Ivetta B., RN
Prudy D., RN
Megan E., RN
Samantha G., RN
Margaret H., RN
Jennifer J.-R., RN
Katie S., RN
Michele B., RN
Colleen D., RN
Precila H., RN
Grace K., RN
Christi M., RN
Mary Beth N., RN
Bill A., RN
Karen B., RN
Linda G., RN
Michelle K., RN
John “Eric” O., RN
Kelly S., RN
Amy W., RN

RN Good Catch Awards
February – Kelly B., RN
Erin M., Endoscopy, RN
March – Erin M., RN
June – Erin W., RN
August – Stephanie M., RN
Kaley K., RN
November – Theresa H., RN

Breakfast with Jean
In 2018, 114 nurses were recognized by their leaders and the CNO. In just over six years’ time, 815 nurses have attended breakfast with the CNO.

Elmhurst Provides Clinical Experience for 686 Nursing Students
Elmhurst Hospital is proud to support and provide extensive clinical placements for both graduate and undergraduate nursing students. In 2018, we were able to provide opportunities for 647 undergraduates, seven RN re-entries into practice, eight BSN completions, and 24 graduate students.