Organizational Nursing Excellence

Unit-based Professional Practices and Accomplishments
UNMH Education and Research Highlights
Nurse and Staff Interdisciplinary Collaboration

A work of love by nurses at OSIS.
See page 2 for details.

2014 Annual Nursing Report
Published June 2015
Theresa Rael, RN Supervisor at the UNMH Outpatient Surgery and Imaging Services (OSIS) and her team sewed pillowcases for patients and received recognition from the KOB-TV Eyewitness News “Pay it 4ward” Award. Patients have expressed their appreciation for the caring that is encompassed in this act of compassion.

A recipient of one of these custom pillowcases sent a thank you note to the OR nurses and expressed her appreciation for the care and kindness shown her. She wrote how lovely the pillowcase and heart pillow were and that both were “wonderful” and helpful in protecting her incision.
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Welcome to the UNMH 2014 Nursing Annual Report. Included is a review of the highlights of the year, from the perspective of Nursing Practice and Interdisciplinary Collaboration.

Please enjoy the reflection of the hard work exemplified in these pages. This is just an overview of what the nurses, leaders, and support staff at this hospital have accomplished. Thank you for your support and interest!

The Editor

Designated since 2010.

Participants sign-in for the 5th Annual TCAB Conference (Transforming Care at the Bedside) held October 24th, 2014.

The Clinical Informatics Council Team
University of New Mexico Hospitals

Presented in deep appreciation of all you do, who you are, and the incredibly meaningful difference your teamwork makes in the lives of so many people.

UNM Hospitals Institutes the DAISY Team Award. Nominations were accepted throughout the year and in December the Clinical Informatics Council Team was the chosen recipient for the award. Many great teams are doing awesome work on behalf of patients and staff. Thanks!
In October 2014, UNM Hospital became the first hospital in the Albuquerque area to earn the prestigious national designation as a Baby-Friendly Birth Facility.

Baby-Friendly USA, Inc. recognizes birth facilities that offer breastfeeding mothers the information, confidence, and skills needed to successfully initiate and continue breastfeeding. This award came after significant work on the part of a multi-disciplinary group who, officially entered the Baby-Friendly 4-D Pathway in the summer and worked through the processes to meet the program requirements. Thanks to all the staff who made this possible!

UNMH Cath Lab improves average ‘Door to Perfusion’ Times.

After joining the regional American Heart Association (AHA) Mission Lifeline Initiative, a program developed to improve outcomes of ST Segment Elevation Myocardial Infarction (STEMI) patients, door to reperfusion time was an area identified for improvement. The national benchmark is currently 90 minutes, and in the previous three quarters the UNMH Cath Lab had an average time of door to reperfusion time of 72 minutes. Congratulations to the staff and physicians who made this possible!

In 2014, six UNMH nurses were honored with a 2014 New Mexico Nurse Excellence Award:

- Elizabeth Sego, RN: Family Practice Clinic
- Cipriano Botello, BSN RN: 5 West
- Louise Kaiser, RN: OSIS
- Elizabeth Muller, RN: Neurosurgery Clinic
- Theresa Bacon, MSN RN: Peds Special Care Unit
- Mary Blessing, MSN RN: Nursing Education & Research

Nurses receive 2014 Employee of the Year Recognition:

- Susan Sanchez, RN: Pediatric Clinic
- Sheri Gilmore, BSN RN: Neuroscience ICU
- Dawn Mata, RN: Peds Special Care Unit
As we welcome 2015, I wanted to share a few thoughts about the year that was! And a bit about what we have accomplished in 2014.

One thing that I think we can all agree on is, and if we didn’t know it already, our planet is that much smaller. We are linked more than ever before by our human interactions, and not just thru the internet. It will always be something new in the world of infectious diseases, Ebola certainly brought that point home....literally. And yet our country, our hospitals, and our staff rose to the occasion. Several times in 2014, the call came and our staff responded....hats off to the ED, 6S, and MICU for their excellent preparation, and seamless, superb care...none of you knew these patients would rule-out when you responded!

We had other terrific examples of how the Division of Nursing reached to that next level to provide unique care for our patients, our community and our state. The tremendous difficulty in sharing some examples of stellar nursing is that one inadvertently leaves out something equally as awesome, albeit unintentionally. But here goes:

The Adult Hospital has implemented Discharge White Boards and while it takes a bit to get it started, our patients love it! This is something they repeatedly share with me on rounds, it helps them to be part of their care team. Additionally, the Adult Hospital is preparing for tele-tracking in February, this is another patient-centric gift for our patients and their care.

The Children’s Hospital has continued to develop their Pediatric Cardiac Surgery program, services are now available in our state for care that previously required all patients to travel!

The Women’s Hospital received The Baby-friendly Hospital Designation! And although getting babies a healthy start in life has been our plan of care for years, we were the first in ABQ J

Our Children and Adult Ambulatory Clinics had the Pediatric Clinic, YCHC and Carrie Tingley Clinics designated as Level III Patient Centered Medical Homes, as well as the following adult clinics: NEH, SEH, 1209, Family Medicine, Senior Health, ASAP, and West Side! SWM is applying for Level III next.

Both of our Behavioral Health Hospitals, CPC and UPC, implemented new programs that are changing the standard for patient care. The Children’s Psychiatric Center, in addition to implementing direct admission to the hospital as part of their patient-centric plan, also implemented Dialectical Behavior Therapy (DBT)*. UPC expanded as a center of excellence their ECT program for patients refractory to medications, it has changed lives and families.

As your CNO, I want to thank each of you. We have doubled the number of patient compliments and continue to slash patient concerns. Our Daisy Award recipients are being recognized in the national postings, how wonderful for our patient care mission! The stories that are shared by your patients, co-workers and other team members are a testament to your care and your professionalism. That so many of you have continued to share your thoughts and ideas, your good wishes and support, and your expectations, has continued to help me know what direction we need to follow.
Sheena’s Letter continued

Many of you have started or completed your next level of nursing degree. The Governor has recognized the College of Nursing for their leadership with a major funding initiative for Nursing. UNMH is at the 77% nationally for the number of advanced degrees our educators, practitioners and leaders that we have ever had at our institution. We are still one of the only organizations in our community to accept nursing students when others are limiting access or have declining access. Our contribution to nursing is enhanced even more when the students have the benefit of your expertise and role modeling.

Congratulations on your professional and unit achievements!

Peace to All,

Sheena Ferguson, MSN, CNS, RT
Administrator &
Chief Nursing Officer
University of New Mexico Hospitals
smferguson@salud.unm.edu

Again, a record number of nurses are seeking the highest level of CAP III. Your certification rates exceed the national benchmarks! Your unit Shared Governance groups are establishing Peer Review to support quality standards that your practice demands and your patients deserve. This is essential for autonomy at the point of care, wherever patient care is delivered - at the bedside, in the clinic, or in the home. The Post-Baccalaureate Nurse Residency Program is a continued success and is a leader nationally, as demonstrated by turnover reduction and career satisfaction. Congratulations on their re-accreditation! Patient satisfaction scores are improving as well. And Pathways and Magnet teams are planning next steps.

Our clinical experts continue to demonstrate state-of-the-science care, based on the incorporation of our professional science and interdisciplinary teamwork. The division of nursing research and the council has successfully facilitated unit-based programs that benefit our patients. We are members of the "Transforming Care at the Bedside" project and we had another successful TCAB conference! Congrats to those of you whose posters have been accepted by UHC, WIN, and the Pathways to Excellence conference nationally!
2014

UNMH By the Numbers

6,194  Employees
1963  Nurses
42%  Nurses with Certifications
26,581  Inpatient Admissions
80,702  Emergency Department Visits
176,614  Inpatient Days
541,088  Outpatient Visits
22,431  Urgent Care Visits
18,654  Surgical Cases
3,161  Births
45%  Rate of Associate Degree RNs
28%  Rate of Associate Degree RNs in nursing school
55%  Rate of Bachelor Degree or higher RN Rate
13%  Rate of RNs are Master’s prepared
52  RN’s completed MSN Programs 2013-14
18  RN’s in Doctoral Programs
6  RN’s Completed Doctoral Programs
1 million  Dollars spent on Nursing Education in 2014
**Transformational Leadership (TL)**

**Exemplary Leaders:**

- Use TL to address how the senior leadership team creates the vision for the future and the systems and environment to achieve that vision . . .

- Set the context for strategic and quality planning . . .

- Create a culture that engages staff in change that results in improved clinical and organizational outcomes.


Almost every month in the Monitor (our hospital newsletter) there is news about the initiatives of many leaders. These leaders may be in a formal leadership position or a staff member who takes on a leadership role among their peers, related to their job responsibilities. There are also notices about the recognition received for a job well done, or an honor that was received. Please review the Monitor for details on the individuals and their stories.

**Transformational leaders are associated with:**

- Improving job satisfaction
- Nurse empowerment
- Strengthening organizational commitment, increasing productivity
- Reducing turnover/Increase retention
- Enhancing work group collaboration
- Improving patient outcomes

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**What Transformational Leadership Means to Me**

“In my view TL is a style of leadership that has two components that are initiated by the leader. The first component relates to the development of a clear vision and definition of the mission. The second component is the leaders ability to empower, motivate and support staff in the development of processes that move toward achieving the vision”.

* A UNMH Executive Leader

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**Transformational Nurse Leadership**

- **Individualized Consideration** -
  - attends to each follower's needs, acts as a mentor or coach to the follower

- **Intellectual Stimulation** -
  - challenges assumptions, takes risks and solicits followers' ideas.

- **Inspirational Motivation** -
  - articulates a vision that is appealing, inspiring to followers.

- **Idealized Influence** -
  - the nurse leader is a role model for high ethical behavior, instills pride, gains respect and trust

(Magnet Recognition Program Model 2008)
A professional practice model provides an “overarching conceptual framework” for nurses, the care they provide and the interprofessional collaboration that takes place. It aligns with the mission, vision, values, and philosophy within an organization and guides nursing practice.

The Compass of Care Delivery Model has been adopted by UNMH and will continue to be reviewed as nursing practice evolves.

The professional triad of Education, Practice, and Research is present in the practice and planning of care by UNMH nurses and staff. Internal and External benchmarks are utilized to guide practice and provide metrics for continuous updates and improvement. From the Professional Practice Model units and clinics may develop a Care Delivery Model that recognizes their unique services and population.

The Magnet Model and practice framework, **Exemplary Professional Practice**, emphasizes how nurses communicate and collaborate in providing patient care. Attention is given to care that is interdisciplinary, with a focus toward safe, quality patient care with ongoing outcome assessment and quality improvement. Nurses practice autonomously and are guided by professional practice and care delivery models.
<table>
<thead>
<tr>
<th>Unit</th>
<th>Distinguished Nurse</th>
</tr>
</thead>
<tbody>
<tr>
<td>1209 Clinic</td>
<td>Deborah Lincoln</td>
</tr>
<tr>
<td>Admitting</td>
<td>Lori Sherman</td>
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<tr>
<td>Adult Oncology (3-E)</td>
<td>Marie Jansky</td>
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<td>ASAP Primary Care</td>
<td>Lisa McGuire</td>
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<tr>
<td>Atrisco Heritage Clinic</td>
<td>Erica Baca</td>
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<td>BBRP Operating Room</td>
<td>Anna Cruz</td>
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<td>BBRP PACU</td>
<td>Annie Jacquez</td>
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<td>Burn &amp; Wound Services</td>
<td>Karen Brown</td>
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<td>Carrie Tingley Outpatient Clinics</td>
<td>Lindsay Lannholm</td>
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<td>Clinical Education</td>
<td>Denise DeRosa</td>
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<td>Clinical Neurosciences Center</td>
<td>Tranette Apodaca</td>
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<td>Community Training Center</td>
<td>Lisa Trujillo</td>
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<tr>
<td>Coronary Care Subacute (7-S)</td>
<td>Adrienne Actis</td>
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<tr>
<td>CRC/CTC (5-E)</td>
<td>Karen Naylor</td>
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<td>Dialysis</td>
<td>Kori Salcido</td>
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<td>MLK Digestive Diseases</td>
<td>Graciela Ortiz</td>
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<td>Emergency Department</td>
<td>Liza Gibson</td>
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<td>Endoscopy (2-S)</td>
<td>Deborah Bialek</td>
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<td>Family Practice (3-N)</td>
<td>Fe Cortez</td>
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<td>Family Medicine Clinic</td>
<td>Danette Tafoya</td>
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<td>FT/OBS/UCC</td>
<td>Jennifer Searcy</td>
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<td>General Medicine (5-W)</td>
<td>Jamie Tahe</td>
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<td>General Orthopaedic Clinic</td>
<td>Avelena-Rose Ortega</td>
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<td>General Pediatrics Unit</td>
<td>Rebecca Selman</td>
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<td>General Surgery (6-S)</td>
<td>Lorenzo Lovato</td>
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<tr>
<td>General Medicine SAC (4-W)</td>
<td>Louis Tafoya</td>
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<td>Hospice Care - Pediatric</td>
<td>Cynthia Baber</td>
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<td>Labor &amp; Delivery</td>
<td>Megan Dunlap</td>
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<td>LoboCare/Senior Health Clinics</td>
<td>Mariano Liano</td>
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<tr>
<td>Med/Surg Subacute (4-E)</td>
<td>Jocelyn Gilsdorf</td>
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<td>Medical Faculty Clinic C</td>
<td>Dorothy Romero</td>
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<td>Medical ICU</td>
<td>Sarah Grant</td>
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<td>Medicine Specialty Clinic</td>
<td>Monica Lucero de Canales</td>
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<td>Mother Baby Unit</td>
<td>Lanette Randle</td>
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<td>NBICU</td>
<td>Leilani Lopez</td>
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<td>NE Heights Clinic</td>
<td>Judy Mursau</td>
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<td>Neuroscience (5-S)</td>
<td>Andrea Casuas</td>
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<td>Ginger Brayman</td>
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<td>Occupational Health Svcs</td>
<td>Terry Norvell</td>
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<td>Operating Room</td>
<td>Dawn Boozer</td>
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<td>Ortho Faculty Clinic</td>
<td>Ann Brooks</td>
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<td>Orthopedics (3-S)</td>
<td>Victoria Wolfel</td>
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<td>OSIS Operating Room</td>
<td>Elizabeth Hawthorn</td>
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<tr>
<td>OSIS Pre-op &amp; PACU</td>
<td>Taylor Tynes</td>
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<td>OSIS Sports Medicine Clinic</td>
<td>Lezlie Garcia</td>
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<tr>
<td>PACU</td>
<td>Rachel Campbell</td>
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<td>Pediatric Emergency Department</td>
<td>Michael Campbell</td>
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<td>Peds Clinic/Peds Infusion</td>
<td>Sarah Landavazo</td>
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<td>PICC/Sedation Services</td>
<td>Mary Avalos</td>
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<tr>
<td>PICU</td>
<td>Amber Rutherford</td>
</tr>
<tr>
<td>Pre-Anesthesia Clinic</td>
<td>Juanita Carpenter</td>
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<tr>
<td>PSCU</td>
<td>Melissa Mason</td>
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<tr>
<td>Quality Outcomes</td>
<td>Catherine Beckman</td>
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<tr>
<td>Radiology</td>
<td>Angela Sanchez</td>
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<td>Reproductive Endocrinology &amp; Infertility Clinic</td>
<td>Maribeth Price</td>
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<tr>
<td>RN Residency Program</td>
<td>Donna Winn</td>
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<tr>
<td>South East Heights Clinic</td>
<td>Christina O'Connell</td>
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<td>Southwest Mesa Clinic</td>
<td>Sunny Corchado</td>
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<td>Staffing Office</td>
<td>Linda Lopez</td>
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<tr>
<td>Surgical Specialties</td>
<td>Melissa Willey</td>
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<tr>
<td>Surgical Specialty Unit (4-S)</td>
<td>Paul Jespersenchavez</td>
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<tr>
<td>Transplant Services</td>
<td>Elissa Spiller</td>
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<td>TUV Clinic</td>
<td>Joseph Hoffman</td>
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<tr>
<td>UPC Continuing Care Clinic</td>
<td>Robert Whittaker</td>
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<tr>
<td>UPC East Adult Unit</td>
<td>John Boyer</td>
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<td>UPC General Specialties Clinics</td>
<td>John Fosler</td>
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<td>UPC Geriatric Unit</td>
<td>Matthew Austin</td>
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<tr>
<td>UPC West Unit</td>
<td>Cheryl Gatner</td>
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<tr>
<td>Utilization Management/Case Management Services</td>
<td>Peggy Schultz</td>
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<tr>
<td>Women's Faculty &amp; Midwife Clinic</td>
<td>Carey Farmer</td>
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<tr>
<td>Women's Health Clinic</td>
<td>Norma Lujan</td>
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<tr>
<td>Women's Special Care</td>
<td>Becky Hodges</td>
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<tr>
<td>Young Children's Health Center</td>
<td>Angela Welch</td>
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2014 DAISY HONOREES

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<tr>
<th>Month</th>
<th>Nurse Name</th>
<th>Department/DU</th>
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<tbody>
<tr>
<td>January</td>
<td>Susan Sanchez, RN</td>
<td>Pediatric Clinic</td>
</tr>
<tr>
<td>February</td>
<td>Marcy Aguilar, RN</td>
<td>7 South</td>
</tr>
<tr>
<td>March</td>
<td>Joan Jamison, RN</td>
<td>Behavioral Health</td>
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<tr>
<td>April</td>
<td>Karla Cruz, RN</td>
<td>Clinical Neuroscience Clinic</td>
</tr>
<tr>
<td>May</td>
<td>Aiko Slade, RN</td>
<td>5 West</td>
</tr>
<tr>
<td>June</td>
<td>Shannon Gutierrez, RN</td>
<td>Endoscopy-Main</td>
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<tr>
<td>July</td>
<td>Andrew McKernan, BSN RN</td>
<td>TSICU</td>
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<tr>
<td>August</td>
<td>Isabella Briggs, BSN RN</td>
<td>NSICU</td>
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<tr>
<td>September</td>
<td>Louis Tagoya, BSN RN</td>
<td>4 West</td>
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<tr>
<td>October</td>
<td>Dawn Mata, RN</td>
<td>Peds Spec. Care</td>
</tr>
<tr>
<td>November</td>
<td>Genevieve Wall, BSN RN</td>
<td>7 South</td>
</tr>
<tr>
<td>December</td>
<td>PJ Graham, BSN RN</td>
<td>Cardiology Clinic</td>
</tr>
</tbody>
</table>

DAISY Awardees receive special ANCC Certification Rates!

As of 2015, recipients of the DAISY Award are now eligible to apply for or renew ANCC Certification at a special rate of $100.

Each month the DAISY nominations are reviewed by the DAISY committee and an awardee is chosen. A DAISY Parade commences and the DAISY nurse is celebrated. Awardees receive a special UNMH DAISY pot, along with the other DAISY Foundation specialty items.

Once a year all DAISY Team nominees are reviewed by a DAISY committee and one team is chosen based on a DAISY scoring rubric. The due date is November 15 each year. A team contains a nurse and has at least 2 individuals.

The 2014 UNMH DAISY TEAM

The Clinical Informatics Council (CIC) supports the mission/vision and values of UNMH by improving patient safety, nursing efficiency and multi-disciplinary teamwork. They do this by optimizing the electronic medical record used for our patient’s care. In order to effect change, the CIC determines the need for change, organizes themselves into content expert groups, develops and tests the content and teaches the changes.

Team Members:
- Lauren Dyer, BSN, RN, BSN (Trauma ICU)
- Aiko Slade, RN, (General Medicine)
- Deborah Minke, BSN, RN (Neurology)
- Brian Carter, RN (General Pediatrics/Pulse Team)
- Tristan Fin, BSN, RN (Medical ICU/Pulse Team)
- Roberta Garcia, BSN, RN (General Surgery)
- Isabel Tierney, RN (Trauma ICU)
- Danielle Mora, BSN, RN (Women's Special Care)
- Robert Penny, BSN, RN (Emergency Department)
- Meghan Blalock, BSN, RN (Pediatric Specialty Care)
- Meaghan Carey, MSN, RN (Interv. Radiology)
- Karen Brown, RN (Wound Care)
- Loryn Udel, BSN, RN, RN (Coronary Care Sub-acute)
- Andrea Petitto, MSN, RN (Mother/Baby Unit, WSC)
- Kellie Moudy, RN (IT)
- Sarah Bailey, RN (IT)
- Steve Bass, MSN, RN (Medical ICU)
- Heather Alten, RN (Wound Care)
- Kathy Jackson, MSN, RN (Post Transplant Clinic)
- Christine Valdez, RN (Newborn ICU)
- Amber Lowy, BSN, RN (Pediatric Psychiatry)
- Riaz Poudy, MSN, RN (Adult Psychiatry)
- Alice Whit, BSN, RN (Geriatric Psychiatry)
- Kim McKinnley, DNP, RN (Sponsor, CIC)

Team Accomplishments:
- Details on the Intranet
- Psychiatric Treatment plan
- Nursing Plan of Care
- Chart Usability
- Wound Care Lexicon in process
- Pediatric Food Allergies

The team members were recognized and given certificates and a team plaque on January 15, 2015 at Management coffee. Congratulations!

Team nominations are collected throughout the year. Deadline: November 15th.

Visit the intranet: https://intranet.unm.edu/intranet/depart/daisy_award.html
The Magnet Model and practice framework, **Structural Empowerment**, represents a decentralized leadership environment in which nurses are actively involved in self-governance and decision-making. Nurses serve on organization-wide committees that address excellence in patient care with emphasis on effectiveness, efficiency and safety. Included is an ongoing commitment to the community and professional growth and development.

The N.M. Immunization Coalition has recognized eight UNMH clinics for having immunization rates of 90 percent or higher. The national average is 68 percent. The state average is 72 percent. Kudos to these clinics, their directors, nurses and medical doctors: Pediatric Clinic, Carie Tingley Hospital, Young Children’s Health Center, Family Medicine Clinics at Tucker and the West Side, 1209 Clinic, Southwest Mesa Clinic and the Southeast Heights Clinic. For more information about the Coalition, visit: http://hsc.unm.edu/programs/nmimmunization/index.html

**2014 Gage Awards**

**Winners, Honorable Mentions, and Remarkable Projects**

UNMH’s Milagro Clinic was the recipient of the 2014 Gage Awards Remarkable Project Status Recognition. The Clinic has offered prenatal care to women with substance abuse issues since 1989. The clinic’s comprehensive approach to prenatal care emphasizes combining medical and behavioral health treatments, case management, and patient integration into community support systems.

Submitted for recognition by Eve Wohler, MSN RN, Unit Director Milagro Clinic, Women’s Special Care at the time of this recognition.

**The Medical Cardiology clinic celebrated re-certification of the Advanced Heart Failure Clinic in July, 2014.**

**Cardiology Clinic Press Ganey Scores exceed 90% in the past 12 months.**

**Getting to Zero**

Zero CLABSI Rates in 2014: 4-East and 5-South

Zero Pressure Ulcers in 2014: 6-South

**The Vascular and Echo lab received re-accreditation from the Intersocietal Accrediting Commission.**
Nurse Practice Council January 2013-2015 Focus

Hospital Acquired Infections

- **CAUTI**
  - Evaluated new indwelling catheter insertion procedure and implementation
  - Evaluated new Foley Catheter kits and supported implementation
  - Recommendation for Stat-lock and Hollister Attachment Device training
  - Reviewed and supported the “Approved UNMH Foley Catheter Indications”
  - Reviewed CAUTI algorithm draft for diagnosing CAUTI’s, removal/Foley insertion and UA interpretation guidance as presented by Infection Control and made recommendations
  - Recommendations made to include Foley Insertion & Care with Annual Tech Comps

- **CLABSIs**
  - RN PICC team implemented daily rounding on PICC’s placed in-house
  - Reviewed new Blood Culture Procedure to promote peripheral blood culture draws over draws from central lines as a means of avoiding false positives
  - Reviewed Blood Culture Kit as developed by CLABSIs work group and made recommendations
  - Reviewed revised PP&G for central line access reduction
  - Supported PICC team efforts to provide de-clotting (Cath-flo) education to all nursing units
  - Curos Caps (although introduced in 2012, NPC continually reviewed the effectiveness of introduction of these caps by trend CLABSIs rates)

- CAUTI and CLABSIs rates tracked by Infection Control. Adherence to implemented procedures tracked by specified CAUTI and CLABSIs workgroups.
- Competencies are updated annually and spot training is completed on an ongoing basis to reflect areas of needed improvement.
- Council Charter reviewed/revised July 2014

This year the Nurse Management Council updated (standardized) the Guidelines for Performance Evaluation for RN’s and other staff among other items.

**RN Inpatient Guidelines for Performance Evaluation Standards**

*For ratings of 4 or 5, standards for rating 3 must be met, plus additional criteria listed. For rating of 5, standards of 4 must be met, plus additional criteria listed.*

<table>
<thead>
<tr>
<th>ESSENTIAL FUNCTIONS</th>
<th>1 = UNSATISFACTORY, 2 = NEEDS IMPROVEMENT, 3 = SATISFACTORY, 4 = EXCEEDS STANDARDS, 5 = EXCEPTIONAL</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Patient Care</strong></td>
<td>1. Commit 2 or more serious infractions against Policy and Procedures.</td>
</tr>
<tr>
<td>1. DELIVER SAFE, DIRECT CARE TO AN ASSIGNED GROUP OF PATIENTS</td>
<td>2. Commits 1 serious infraction against Policy and Procedures</td>
</tr>
<tr>
<td>SERIOUS INFRACTION = ANY ACT WHICH IS AVOIDABLE THAT COULD POTENTIALLY CAUSE HARM TO THE PATIENT OR DID CAUSE HARM.</td>
<td>3. Delivers direct patient care to an assigned group of patients.</td>
</tr>
<tr>
<td><strong>POLICY</strong></td>
<td>4. Consistently assisting other staff in delivering safe patient care.</td>
</tr>
<tr>
<td>2. WORK WITHIN HOSPITALS, NURSING DEPARTMENT/UNIT/DEPARTMENTAL POLICIES</td>
<td>5. Develops/Assists in developing new patient care guidelines (i.e. PDSAs).</td>
</tr>
<tr>
<td></td>
<td>1. Despite coaching, continues to be noncompliant in following Policy and Procedures.</td>
</tr>
<tr>
<td></td>
<td>3. Good general overview/solid knowledge base of Policy and Procedures; taking responsibility for and documenting incidents by way of variance reports. Independently maintains all mandatory licenses and certifications.</td>
</tr>
</tbody>
</table>
Shared Governance Councils

The purpose of the **Nursing Education Council** is to promote, facilitate, and plan professional development by setting and maintaining education practice standards.

The purpose of the **Nurse Executive Council** is to provide a forum for senior nursing leadership to have a work group on hospital business action items and improve communication and throughput on operations.

**Staff Forum:** This group meets once a month and provides an opportunity for staff to meet with Chief Nursing Officer, Sheena Ferguson, MSN CNS RN CNS. Sheena also provides updates on activities taking place within the organization that impact nursing practice. Other internal experts provide information on relevant topics and updates are provided by the Magnet Program Manager, Infection Prevention and Control Department leadership, and from a Pharmacy Representative, Van Ward, PhD, MS.

**Clinical Informatics Council:** Meets monthly in a shared governance format to gather input from end-users—nurses and techs— for the changes that are necessary to the EMR.

**Magnet Champion Meeting:** Representatives from all units and clinics are encouraged to attend and learn information about the structure and processes needed to implement and document evidence-informed practice and promote staff engagement in nursing excellence.

**Inpatient Advanced Practice Nurse Council:** Meets monthly and stays up-to-date on best practices, organizational priorities, and also celebrates the successes of the nurses in the departments and the activities they engage in.

**Shared Governance, at the organization—and unit/clinic-level is the structure for shared-decision making that is used at UNMH. This practice is vital to sustaining a culture of practice excellence.**

**The Nurse Research Council** continues to make progress on guiding knowledge development and dissemination regarding nursing research and quality improvement projects within our institution. The Johns Hopkins model for evidence-based practice has been chosen as our research development model and more information and resources will be distributed in the coming year.
Emergency Services continues to deliver quality care to epic levels of patients seeking treatment. In 2014 emergency services treated 99,606 emergent and urgent patients. In particular, the Pediatric Emergency Department (ED) and Urgent Care Center exceeded their previous record for volume of patients. During this particularly busy year, Emergency Services has made a number of remarkable improvements to patient care. These improvements include:

- Addition of security officers in an effort to reduce violence in the ED.
- Expansion of the Urgent Care Center hours of operation.
- Implementation of a board communication system to enhance patient/care team communication.
- Expansion in scope of care for the Fast Track area.
- Improvement of acute stroke and sepsis response times.
- Lifeguard services added a new aircraft to the fleet that is larger and able to fly at greater speeds.
- Improvement of patient satisfaction to consistently above 80.
- Decrease in left without being seen while increasing volume (see graph below).
- Multiple employee of the month recipients among the ED staff.
- Expanded observation protocols.
**Unit-based Practice**

**Progressive Care Units**

**Our Oncology units 3E/5E:**
Developed a radiation improvement project for inpatient stays. Instructions on "safe transfer" of our radiation patients was developed and standardized to ensure the safest mode of transfer within the hospital (ie transfer from floor to ICU). This safety measure helps protect our staff and visitors throughout the organization by decreasing radiation exposure.

*Submitted by B. Dahlke, MSN RN NEA-C, Executive Director Clinical Services*

**Burn, Wound & Ostomy Team:**
Patient-focused team that is instrumental in healing through excellence in a highly specialized practice, and provided over 60 teachings (Save our Skin, SOS) to staff in skin care, pressure ulcer prevention and burn, wound & ostomy care

**5 west** had a 28% reduction in falls for the year of 2014 in comparison to the year 2013.

**Care Management**

**Care Management** adapted to the changes to healthcare due to the Affordable Care Act.

Care Management also restarted their Shared Governance Council with both nursing and social work leadership. Shared Governance worked on staff peer review choosing to review the new Discharge Risk Assessment and Initial Discharge Plan. They devised a tool that could be used by staff to evaluate their peer's use of the new tool.

*Submitted by C. Frantz, MSN RN, CCM, Executive Director, Case Management, Utilization Review, Pastoral Care, and Admitting*
**Unit-based Practice**

**Adult Critical and Progressive Care**

**4 East:** Staff on-boarded new staff members, and shared expertise through TCAB posters.

**4 West:** Developed the nursing workload tool based off the Synergy Model used by the American Association of Critical Care Nurses. The basis of the tool is to match the correct nurse to the right patient based on skills and patient needs. Staff worked with sister units 4 South and 7 South to trial the tool. Also staff were involved with the CIWA protocol/project.

**5 South:** Staff worked to improve compliance with evaluation of the stroke patient. They developed a tool called the “Stroke Hand Off Card” (see below). Multidisciplinary rounding was initiated with the neurology service to improve patient care.

**6 South:** Began preparations to care for patients receiving pancreas and pancreas-kidney (PK) Transplants. This included working in conjunction with TPL/Urology services for education. 6-S had the lowest nurse turnover rate of all PCU/ICU at 6.66% annualized and one of the highest HH % rates of all PCU/ICU’s at 95.6% for Nurses/PCT’s.

**7 South:** Initiated peer review, bedside report and the workload tool for the staff nurses.

*EBOLA made front page news with cases reaching as far as the United States, in 2014.*

**MICU:** Staff were instrumental in preparation for caring for these patients. Collaboration with Infection Control, Facilities, Pediatrics and MICU nurses and physicians enabled a plan to safely care for patients in our facility. The staff involved all volunteered for this effort. Thank you to the nurses and physicians who came forward to help with this project.

**NSI:** The hospital had a record number of organ donation patients for 2014. Patient Satisfaction scores increased after the implementation to the Discharge Checklist.

**TSI:** Nurses (Crystal Sanchez and Andrew McKernan) made a presentation at the UHC conference on the ECG electrode cleaning process. These nurses continue to conduct research on this project and to work with other units to implement this cleaning process.

*Submitted by M.Chapman, MSN RN Executive Director*

<table>
<thead>
<tr>
<th>Unit</th>
<th>No.</th>
<th>TCAB Posters Topics for 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 East</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>6 South</td>
<td>1</td>
<td>Bedside Report</td>
</tr>
<tr>
<td>7 South</td>
<td>1</td>
<td>Cardiothoracic Surgery Patient Education</td>
</tr>
<tr>
<td>MICU</td>
<td>1</td>
<td>Early Mobility Initiative (podium).</td>
</tr>
<tr>
<td>NSICU</td>
<td>2</td>
<td>Discharge Checklist (podium); CLABSI</td>
</tr>
</tbody>
</table>

**Stroke Hand Off Card:**
- Nurse Assessment;
- Stoke Core Measures;
- Get with the Guidelines; & TJC Requirements;
- Facilitates handoff report and pre-discharge check list;
The Magnet Model and practice framework, **Structural Empowerment**, represents a decentralized leadership environment in which nurses are actively involved in self-governance and decision-making. Nurses serve on organization-wide committees that address excellence in patient care with emphasis on effectiveness, efficiency and safety. Included is an ongoing commitment to the community and professional growth and development.

**Adult Inpatient Behavioral Health**

Nursing staff in the **Adult Inpatient Behavioral Health Units** implemented two successful nursing interventions last year that significantly impacted our patient satisfaction scores.

**The first program** was the Foot Care Program that Susan Champion, RN, implemented on the Geriatric Unit initially and expanded to the Adult Inpatient Units. After becoming certified as a Foot Care Specialist nurse, Susan, added a half-day a week to her schedule to see patients to provide foot care. The patients love the service. Future plans include creating a comfort room space where patients will receive their foot care in a quiet and healing environment.

**Comfort Rounds**, an hourly Rounding practice was implemented this year on day and evening shifts, on all the inpatient units. Nurses and mental health technicians alternate rounding and focus on the three areas of pain, feeling safe, medications, or questions about their treatment plan. The success of these two programs is reflected in our overall patient satisfaction scores demonstrating an average increase of 2.4 points, and a 1.0 point increase in our nursing satisfaction scores. The nurses are very excited with the results because it is often difficult to earn positive patient satisfaction scores with behavioral health units where a large percentage of the patients do not necessarily want to be in the hospital.

Submitted by A. Taylor-Trujillo, EdD, MSN RN, CENP, Executive Director UNM Psychiatric Center
Many great programs and activities are taking place at the Children’s Psychiatric Center. Here are just a few highlights from 2014:

**Ropes Course and Dialectical Behavioral Therapy (DBT):** CPC inpatient nurses are Ropes Course facilitators. Through working directly with patients on scaling high ropes, the nurses help the patients develop their DBT coping skills as they complete the challenging course.

Esther P., DNP RN, and Dawnelle R., MS RN presented their research at the 2nd annual American Psychiatric Nursing Conference in NM: “Development and Implementation of Nurse Dialectical Behavioral Therapy (DBT) Groups to Address Patient Vulnerabilities”.

**An “outstanding multidisciplinary orientation day” includes** a scavenger hunt that promotes exploration of the campus and essential learning for new hires. Dawnelle, MS RN, a CPC Unit-based educator was instrumental in developing this program that newly-hired and current staff “love”.

**CPC’s Multisystem Therapy Team (MST) outperforms** similar programs nationally. This means that 93% of our patients were able to remain in their homes, 93% were able to remain or go back to school and 90% had no new arrests. Intensive intervention is provided to help youth associated with the NM juvenile justice system.

**The CPC Multidisciplinary SG council** worked on an employee recognition program using safety approved bulletin boards.

**CPCs Multidisciplinary Band**– the Staff Infections play for the annual Dolphin Ceremony and other celebratory events. love.

Submitted by Lori Ponge, MSN, RN, NEA-BC Executive Director

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On April 9th, at 5:45 p.m. a PHI medical helicopter crashed upon take off from the UNMH Helipad. There were no injuries to UNMH patients or employees.

**Congratulations** to the UNMH Leadership and Pediatric Unit leadership for responding so well to this unplanned event that was so successfully dealt with!
Comfort Holds- Child Life and Nursing Residents working to develop a robust program to assist parents and caregivers with comfort holds for their children who are having uncomfortable/painful procedures. The nurse residents created a booklet for families that is in the process of being approved and printed. Then they will partner with Child Life to educate the units and provide support.

In the Children's area, we have rolled out Shaken Baby Education for parents and families on all of the Children's units under the leadership of Jayme Robertson. Jayme is also working with Kathy Lopez-Bushnell to publish results and assist with roll-out statewide to protect newborns and infants from being shaken. Education was presented at KOB Health Fair and also at the March for Babies during the past year.

March For Babies- Staff from UNMH participated in the May March of Dimes March for Babies. The UNMH team was captained by Becky Thomson and Cat Crawley. We are again sponsoring and participating in the March for Babies on Saturday May 9th.

Beads of Courage- The Beads of Courage Program is a resilience-based intervention designed to support and strengthen children and families coping with serious illness. Through the program, children tell their story using colorful beads as meaningful symbols of courage that commemorate milestones they have achieved along their unique treatment path. Upon enrollment each child is given the Beads of Courage bead color guide with a detachable membership card. Their Beads of Courage journey begins when each child is first given a length of string and beads that spell out their first name. Then, colorful beads, each representing a different treatment milestone are given to the child by their professional health care provider to add to their Beads of Courage collection throughout their treatment as determined by the Beads of Courage Bead Guide. We have the program up for the following pediatric populations: NBICU and both ICN's, chronic patients and patients with blood disorders and cancer. There is currently a YouTube video about the program on the HSC website.

Throughout the Children's Area, we are working on increasing BSN and certification rates among our nurses. In the past year, we have increased our BSN rate significantly and for the Children's area are at approximately 65%.

Submitted by Maribeth Thorton, MSN RN, MBA, NE-BC, CCM, Executive Director Children’s Services
Many of the providers for Ambulatory Advanced practice received recognition as Employees of the Month: Edna Lopez and Emily Griffin (CNPs) and Ambulatory Clinical Excellence Awards: Nora Sanchez, Debbie Dennis, and Radha Denmark (CNPs)

Many projects are under way and classes are being taught by these providers:

- COPD Education
- Successful implementation of a bronchiolitis protocol with a multidisciplinary team
- Assessment of the effectiveness and safety of vasopressin drip use in management of DI
- NM Child Abuse Prevention Partnership
- Growth of the Chronic Kidney Disease clinic and Palliative Care services
- QI projects to improve discharge times, processes, throughput, and phone calls
- Toni Davis, MBA RT (Director of Pulmonary Services) was inducted into the RT Hall of Fame at CNM.

Submitted by Gloria Doherty, Executive Director Inpatient Providers

Expected Publications by Advanced Practice Providers:


Elaine Sherson, PA-C – Paper accepted for publication in Family Practice (Oxford Journals) – A review of the use of the 5 A’s model for weight loss counseling: Differences between physician practice and patient demand.

Mary Pafford has submitted two abstracts to a Cystic Fibrosis Journal.

Nick Arnold’s Case Report was accepted to AJEM for publication.

Many of the providers for Ambulatory Advanced practice received recognition as Employees of the Month:

Edna Lopez and Emily Griffin (CNPs) and Ambulatory Clinical Excellence Awards:

Nora Sanchez, Debbie Dennis, and Radha Denmark (CNPs)

Congratulations!

Ambulatory Providers

Many providers collaborated with 1209 Family/Internal Medicine Clinic RNs to work on a QI project with Envision to look at diabetes care.

Ruth DeRegro, CNP is pursuing her DNP. Audrey Riffenburgh said: I’d like to thank Ruth for her contributions to health literacy at UNMH. Her DNP project will have a positive impact on our patients with PICC lines. Her work during her intern hours in our office has been so helpful for us and for many of our patients. Ruth is a great health literacy editor and has done efficient and meaningful work on several documents. She brings a key clinical perspective as she has revised documents to meet health literacy guidelines. We are grateful to have her help and expertise!

Thank you. Ruth!
In 2014, **UNM Hospital’s Adult and Family Primary Care** division cared for patients in over **144,000 visits** across **10 locations** throughout the greater Albuquerque Metro area.

We have continued our journey to transform our care delivery model. The NCQA Patient Centered Medical Home (PCMH) honor recognizes primary care practices that demonstrate responsibility for total patient care across the health continuum. The clinician-led care team is responsible for providing all the patient’s health care needs and coordinating and tracking their care across the health care system. The comprehensive care provided by the medical home leads to better health, longer lives, higher patient satisfaction and less expensive care.

**Improving foot care:**

Patients with diabetes are monitored closely in our primary care clinics using patient registries. Unfortunately, New Mexico has the highest rate of lower limb amputations in the nation related to diabetes. This is a statistic we are working to change.

We believe that foot and nail care provided by a certified nurse can make a difference in the rate of amputations. To that end, nine primary care nurses earned their national foot care certification this year and are running foot care clinics in every primary care site. The nurses educate patients on proper care of their feet, provide foot and nail hygiene, promote comfort, help prevent injuries and wounds, accommodate deformities, recommend proper foot supports and shoes and refer appropriately and promptly to podiatry if needed.

We are in the process of getting IRB approval to study the impact of our nurse run foot care clinics.

*Submitted by K. Ellingboe, MSN RN, Executive Director Primary Care*

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**The Lobo Paw Wash**

Hand hygiene is an important tool to maintain everyone’s health. Washing your hands or using alcohol-based hand sanitizer protects not only you but anyone you touch. The story doesn’t end there. Studies show that only 8% of health care workers actually perform hand hygiene effectively. This means that they are not scrubbing all five parts of the hands in order to remove the most germs. Here at UNMH, the Healthy Hands Resource Squad and the Infection Prevention & Control Department have created the Lobo Paw Wash to combat that problem. Staff participated in a two day filming to create a fun and educational video that will be the basis for a hand hygiene campaign. Here are some behind the scenes photos to tease you.
We are very proud of the improved re-perfusion times that have been accomplished in the Cath lab. The work and dedication of the staff and physicians is much appreciated. The Cath Lab also underwent an upgrade to the hemodynamic system which allows an expansion of Electrophysiology procedures and the addition of pediatric procedures to the service line.

Vascular & Echo Lab
- Trans Cranial Dopplers is a procedure that has been added to the services offered.
- Vascular procedures are now offered in the Transplant/Vascular clinic, which increases patient access and allows for quicker test interpretations.
- The Echo Lab performed a record-breaking 8,500+ echo procedures in 12 months.
- The Echo staff received IV Certification and assisted in the Health Literacy Campaign.

Pulmonary Hypertension/Cardiac Rehab
- The Pulmonary Hypertension Clinic debuted in February. This is the only clinic of its kind in New Mexico. Previously patients traveled to Denver and Phoenix for specialized care.
- Pulmonary Hypertension (PH) patients began working with the exercise physiologists in Cardiac Rehab and have seen amazing results.
- PH patients have seen a decrease in medication, improvement in exercise tolerance and a decrease in their use of oxygen.
- Cardiac Rehab was integral to the Joint Commission Heart Failure Certification in July.
- The PH and Cardiac Rehab staff are collaborating with the school of medicine on a research study looking at the effects of exercise on this very special patient population.

Cardiology Clinics
- The Medical Arts Cardiology Clinic celebrated re-certification of the Advanced Heart Failure Clinic in July.
- Nurse-run clinics began seeing symptomatic patients in an effort to decrease admissions/readmissions. Data is being collected.

Sleep Center Benefits from LEAN Methodology & holds the record-8 Events total!
- These events have streamlined practice, cut costs, increased revenue, improved ADA access and improved patient satisfaction. This service experienced an exceptional year.

Submitted by Cynde Tagg, MSN RN Interim Executive Director for Cardiology
UNM Hospitals’ Ambulatory Medicine Specialties includes:

5 ACC Medicine Specialties Clinics (Endocrinology, Rheumatology, Cystic Fibrosis, Pulmonology, Allergy, Palliative Care), Diabetes, Patient Education and Wellness, Renal Transplant, Urology, Vascular Surgery, Nephrology, Pediatric Sleep Laboratory and the Adult Sleep Center & Laboratory. There was continued improvement, change, growth, and sustainability in 2014 for these clinical areas.

Combined, these services provided care for approximately **50,000 outpatient** clinic visits and outpatient procedures in 2014. With more health care taking place outside of the hospital setting, ambulatory nurses must be utilized to the highest extent of their education, licensure and certification.

Submitted by Cynde Tagg, MSN RN Executive Director

**Department Accomplishments include:**

- Introduction of a Palliative Care Clinic within the Medicine Specialties clinics located on 5ACC
- Patient Education staff participation in a statewide Diabetes Prevention Program
- Three posters accepted for the 2014 Transforming Care at the Bedside conference and one poster accepted to the 2015 WIN Conference
- LEAN/LQIP Process Improvement interdisciplinary sessions which included Sleep Studies, 5 ACC, and Transplant services
- Initiation of Retinal scanning for patients with diabetes
- Tysabri infusions are now available at the Outpatient Treatment Center, a result of collaboration with Neurology Services
- The Patient Education and Sleep Center departments had a presence at the 1st Annual 24 Hour Why Care Fair.
- Two Sleep Center employees became faculty for CNM’s Respiratory Therapy program to teach sleep-related classes.

<table>
<thead>
<tr>
<th></th>
<th>ADN</th>
<th>BSN</th>
<th>MSN</th>
<th>National Certification</th>
</tr>
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<tbody>
<tr>
<td>2013</td>
<td>44%</td>
<td>48%</td>
<td>8%</td>
<td>45%</td>
</tr>
<tr>
<td>2014</td>
<td>20%</td>
<td>58%</td>
<td>21%</td>
<td>56%</td>
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</table>

Sleep Center staff Kathleen B. (left) and Mallory D. (right) present information at the 1st Annual Why Care Fair in November.
The nurse educators in Clinical Education (CE) continued to meet our primary goal of providing high quality and relevant education to healthcare staff with the objective of improving patient outcomes. Benner’s model of staff development is used to design educational programs. Progressive education was offered for a wide variety of courses developed to address the learning needs of novice and experienced staff.

In addition to the contributions made by the Clinical Educators, many Unit-Based Educators, Clinical Nurse Specialists, Specialty Nurses and others support our educational programs and add value.

Submitted by Jolly Joseph, MSN, RN, Director, Clinical Education

**Significant Accomplishments:**
All educators involved in offering continuing education were trained in completing the updated planning form and maintaining records.

Education was provided to realize organizational goals and leadership mission:
- Heart Failure,
- Stroke, and Trauma designations,
- Cardiovascular Surgery program,
- Patient Centered Medical Home,
- Baby-Friendly,
- Journey to Magnet designation,
- Transforming Care at the Bedside,
- Nursing Publication,
- Certification Preparatory classes:
- The services of the web designer were utilized continuously to develop innovative educational programs.
- The clinical education department successfully took over Behavioral Health education and a number of classes were offered to the BH staff.

"I really appreciate the way the instructor included all disciplines in class; recognition of others experiences and expertise was valued."

"I felt comfortable asking questions. The instructor is very detail-oriented and breaks everything down to a fundamental level."

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<table>
<thead>
<tr>
<th>Data Types</th>
<th>Nos. 2014</th>
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<tbody>
<tr>
<td><strong>Types of classes offered</strong></td>
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<tr>
<td>Classes offered</td>
<td>243</td>
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<td>Attendees for these classes</td>
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<tr>
<td>Classes offering Continuing Nursing Education (CNE) units</td>
<td>148</td>
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<td>CNE contact hours available</td>
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<tr>
<td>Contact hours awarded (all professionals, CEU's)</td>
<td>18015.53</td>
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<tr>
<td>New CNE’s applications approved</td>
<td>77</td>
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<tr>
<td>Student placement (Nursing, Medical Assistant, EMT, Paramedic and Radiology), 3 terms (Nursing = 1464)</td>
<td>~2000</td>
</tr>
</tbody>
</table>
The B.A.T.C.A.V.E. opened in January 2001. Initial support was provided from the University of New Mexico School of Medicine, the University of New Mexico Hospitals, and the University of New Mexico College of Pharmacy. The name has evolved into The BATCAVE Healthcare Simulation Program and Community Training Center. We remain a solid collaboration between the University of New Mexico Health Sciences Center and the University of New Mexico Hospitals, with both entities contributing staff, facilities, and equipment. Stakeholders in the BATCAVE include physicians, residents, medical students, pharmacy students, nursing students, and a wide range of UNM Hospital personnel, including nurses, techs, EMTs, respiratory therapists, and other staff members. Virtually everyone on the Health Sciences campus comes through the BATCAVE for skills training or re-certification every year.

Respectfully submitted Mary Blessing, MSN, RN Area Director

In 2014:

- 716 Classes
- 8023 Learners
- 2890 RNs
- 128 APRNs

The Clinical Education department continues to sustain the steady increase in total learners/contact hours that has been the pattern of the past several years.
The UNM College of Nursing is proud to partner with the nurses at UNMH to further the education of their nurses, our students and faculty, and the profession of nursing as a whole.

The College of Nursing recently received an endowment to form the Professor Peter A. Winograd Annual Visiting Professorship in Nursing from Professor Winograd himself. The endowment establishes an annual visiting professorship to educate College of Nursing faculty and students as well as UNMH nurses. It focuses on personalized consultation with units on clinical issues and general lectures. The very first lectureship will be held in September as part of the College’s 60th Anniversary.

UNM Hospitals provided startup funding, as part of an MOU, to begin the Nurse Executive Organizational Leadership (NEOL) Doctor of Nursing Practice (DNP) in return for greater than 50% of applicants guaranteed to their hospital staff. Negotiations are under way to continue this funding in the future.

The majority of our undergraduate and many of our graduate students are precepted by nurses and providers at University Hospitals. Many of the unit based educators provide clinical instructional support to our students as well. While it might seem like a natural pairing the partnership between our faculty and UNMH provides a thriving teaching environment at the hospital and we are grateful for the strong collaboration.

UNM CON 1st DNP Cohort that graduated May 2015. Congratulations to Sherry, Michael, Meaghan, and Terri for successful completion of this degree!
Program goals:

- To make the transition from beginner to competent professional nurse in the clinical environment;
- To develop effective decision making skills related to clinical judgment and performance;
- To provide clinical nursing leadership at the point of care;
- To strengthen commitments to nursing as a professional career choice;
- To incorporate research-based evidence linked to practice outcomes.
UNMH nurses presented 12 research posters at the 2014 Western Institute of Nursing (WIN) Conference in Seattle, WA, in April.

WIN is a regional nursing research organization with the mission to embrace nursing education, practice and research leading to improved patient care. Dr. Marie Lobo is the President.

**The Effects of Heart Failure Self-Care on Patient Outcomes.** Kathy Lopez-Bushnell APRN, EdD, MPH; Kristin Taratino, MSN RN; Bart Cox, MD.

**Tackling Childhood Obesity: The Live Fit Family Challenge.** Terri Gibson, MSN RN-BC; Patricia McCarty, BSN RN, CDE; Jennie McCary, MS RD LD.

**YEP: Youth Empowerment Project.** Nicole Morris, MSN RN PCCN, Kathy Lopez-Bushnell APRN, EdD, MPH.

**Sternal Precautions in Pediatric Post-Op Heart Patients with Sternotomy.** William Babb, BSN, RN-BC.

**Nurse Residency Program: Evidence Based Practice.** Mary Blessing, MSN RN; Nicole Weimer, MSN RN, Donna Winn, MSN RN.

**Correlation of Perceived Noise Levels and Measured Noise Levels in the NICU.** Ashley Burson, MSN RN; Cassie Brieno, BSN RN; Renae Grubilnik, BSN RN; Erin Allison, BSN, RN; Kaitlyn Sanchez, BSN RN.

**Bedside Handoff for Postpartum Patients.** Rachel Theobold-Madrid, MSN RN

**Effect of Phone Calls on Patient Satisfaction.** Adelia Perea, BSN RN.

**Obstructive Sleep Apnea in Patients with Ambulatory Surgery and Other Procedures.** Connie Hardy Tabet, BSN RN.

**RSI and Code Situations.** Jessamy Koury, BSN RN; Samantha Curtis BSN RN.

**Mobility Protocols.** Deborah Minke, BSN CNRN; Heide Gober, PT.

**The Effect of Nursing Education Calls on Patient Appointment Attendance.** Tanya GGBarney, BSN RN.
YEP Program Update:
63 students applied for Level 1, 61 were accepted, 69% completed.
11 Students signed on for Level 2, 71% completed.

9 UNMH Staff members served as guest faculty and were involved in student education for both Levels of the program.

Summer 2014:
102 students applied, 75 were accepted, 61 completed their program, 37 UNMH Staff members and guest speakers participated in educating students.

The first annual Why Care 24 Hour Magnet Fair featured Unit Project Posters, Free Hand massages by Magnet Champions, and Neck/Back Massages by Arts in Medicine artists. Many staff attended and enjoyed food, prizes, education, and fun. Schools and organizations were represented as well. See you next year!

UNMH Nurse Community Involvement

Who is YEP?

UNMH Nurse Empowerment Project

Our Health Careers After School Program

Level 1
In this first year students learn basic health-related content such as medical terminology and human anatomy. They will also learn basic skills that will teach them how to perform a physical assessment on a patient, how to check vital signs and they will receive CPR/First Aid certification from trained instructors! This first year of the program will work to build a foundation for the second year which will explore more in depth. In addition to classroom time students are required to complete homework assignments and 36 hours of community volunteer work at a location of the student’s choosing.

Level 2
In this second we will build upon the foundation from Level 1. We will take students assessment skills and apply them to specialized body systems. They will learn about these different body systems, exemplars of common diseases involving these systems be found in their community and they will build a community education project based on these exemplars. Students are required to complete homework assignments and 36 hours of community volunteer work during this year.

Level 3
This year is a culmination of the three years students spend in the YEP program. During this year students will have the unique opportunity to experience one 4 hour shadowing experience per month as Senior YEP Students, these experiences will be coordinated by the YEP program and will allow students to see first hand the careers that they are interested in. Students will create a career trajectory plan to demonstrate their plans and goals to achieve their desired career.

 supporting image link
Staff Nurse Peer Review Continues at UNMH

PR Fast Facts

Why Peer Review?
- We have an ethical obligation as noted in our ANA Code of Ethics Provision 1.
- The American Nurses Credentialing Center (ANCC) in SOE EP 15 promotes formal peer feedback.
- At UNMH it is an organizational priority to implement best practices at the bedside.

“It is impossible to deliver quality you do not own, nor sustain an outcome you do not drive. Yet in hospitals it is common to divorce the ownership of quality from those who deliver it.”
Hass-Heitman & George, 2011

“Effective teamwork begins with effective Peer Review.”
Pfeiffer et al., 2012

- This form of PR is separate from the management-owned process of Incident-based peer review.
- This practice is implemented through the unit-based Shared Governance framework and owned by the staff.

Main PACU Oct ’14 – Dec ’14 Trends for Curos Caps

<table>
<thead>
<tr>
<th>Oct ’14</th>
<th>Nov ’14</th>
<th>Dec ’14</th>
</tr>
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<tbody>
<tr>
<td>Caps in place from OR?</td>
<td>4%</td>
<td>5%</td>
</tr>
<tr>
<td>Caps placed within 15 mins. PACU arrival?</td>
<td>75%</td>
<td>71%</td>
</tr>
<tr>
<td>Caps placed when pt became border?</td>
<td>94%</td>
<td>67%</td>
</tr>
<tr>
<td>Caps placed prior to PACU D/C?</td>
<td>100%</td>
<td>90%</td>
</tr>
<tr>
<td>Education / Clarification during review?</td>
<td>29%</td>
<td>48%</td>
</tr>
</tbody>
</table>

* 29% increase in CC’s placed on IV lines when the pt arrived in PACU from the OR.
* 8% decrease in CC’s placed within 15 minutes of pt arrival to PACU.
* 52% decrease in CC’s placed once the pt became a border.
* 25% decrease in CC’s placed prior to pt discharged from PACU.

Members of the Peer Review Committee at the Main PACU hold “Virtual Meetings” to conduct the important work of guiding their unit in the practice of peer review. Their first project focused on Curos caps and encouraging results came from initiating this practice in the fall of 2014.

Resources are available on the Magnet intranet page.

MAIN PACU nurses, Vonda, Alisha, and Stephanie lead this project.
Looking Ahead

The Magnet Model and practice framework, **New Knowledge, Innovation and Improvements** emphasizes Quality of Care and Quality Improvement. Emphasis is on nursing research and implementing evidence-based practices (EBP). Infrastructure and support for innovation and achievement of high-quality, effective, efficient and EBP care is the result of implementing all the other Magnet Model Components, as evidenced by Empirical Outcomes.

<table>
<thead>
<tr>
<th>The Year at a Glance</th>
<th>Looking Forward</th>
<th>Your Part</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNMH TCAB Conference</td>
<td>October 23, 2015</td>
<td>Abstracts Requested</td>
</tr>
<tr>
<td>Why Care Fair</td>
<td>November 3-4, 2015</td>
<td>Please join us!</td>
</tr>
<tr>
<td>Magnet Champion Holiday Party</td>
<td>December 3, 2015</td>
<td>Please join us!</td>
</tr>
<tr>
<td>Certified Nurse Day Celebration</td>
<td>TBA</td>
<td>Celebrate or Learn more!</td>
</tr>
<tr>
<td>ANCC National Magnet Conference</td>
<td>Oct. 7-9, 2015 Atlanta, GA</td>
<td>Applications available for Sponsorship</td>
</tr>
<tr>
<td>ANCC Nat’l Pathway to Excellence Conference</td>
<td>TBA</td>
<td>Applications available for Sponsorship</td>
</tr>
</tbody>
</table>

Looking Forward

**UNMH Staff enjoy the 1st Annual Why Care Fair November 4-5, 2014**

There was plenty to see and do at the Fair and 250 staff attended this event. There is a Timeline to add name and date of hire to, food, great posters, School representatives, prizes, hand and neck massages, and a fun coloring activity. Unit-participation prizes are still being determined. TBA!
MAGNET MOMENTS IN 2014

Magnet Intranet Page Gets a Face Lift - Debut November 3, 2014

Special thanks is given to Donna Martin in the IT Department. She has worked very closely with the Magnet Program Manager and made the Program Intranet Page a much friendlier place to visit. Hours of work have gone into the site, which continues to evolve as pages that need work are identified and corrections made.

If you have not done so already, please visit our page and check out the many resources that are readily available and easily found.

Why Magnet: Excellence in Nursing Practice?

Current research upholds the findings from the 1980's, when the original Magnet Model was developed. The Magnet Recognition Program provides a framework that supports excellence in nursing practice. The five components of the model emphasize:

1. Leadership processes that are flat, flexible, and include involvement of all staff.
2. Empowerment and accountability of staff for patient care decisions.
3. Nursing practice is autonomous, work-driven, and patient-centered.
4. Quality of care and patient outcomes are priorities.
5. The organization is able to collect and interpret data.

As we continue to put these initiatives in place, we will see a positive shift in organizational culture. As a result, patient and nurse satisfaction should result.

Pathway to Excellence

Through Pathway to Excellence (PTE) design, UNMH is able to show through documentation and metrics its desire to meet program requirements. Good job UNMH staff!


Check this out!
As we continue to prepare for Pathway to Excellence re-designation and contemplate Magnet Recognition requirements, it is important to acknowledge the work we do on a daily basis. Standardizing our documentation is part of this process. With the assistance of David Wright in the IT department, additional areas for project documentation were added to our Nurse Recognition Database. Now nurses have a place to provide details on the PDSA and Research projects they are working on. Please continue to update this database. We rely on this database to track our education and certification rates, and the other information it contains.

The Nurse Portfolio Website has been updated.

Please enter any IRB-approved Research projects and any PDSA or Quality Improvement Projects you are involved in.

Projects should be included if in place in 2012 and forward.

See Tip Sheet and Portfolio information for additional instructions. Thanks for keeping us current.

Effective June, 2014. Other changes include ability to enter Professional Organizational Leadership (Holding an Official Position) and details about Publications submitted and accepted in Professional Journals.
The Clinical Education Department staff enjoy their new location and classrooms.

Exceptional Care by Exceptional People.
Every time.

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Supporting Nursing Excellence

2014 Annual Nursing Report

“When there is a high variability in work, high levels of worker expertise and participation in decision-making are needed to achieve effective care.”

(Institute for Health Improvement, 2014)