



NURSING

January 2020 - December 2021 Report



HOSPITALS • RESEARCH • FOUNDATION

Mission: We champion children by making them better today and healthier tomorrow.

Vision: Our Promise: Unprecedented child health. Defined and delivered.

Values:

- Safety
- Teamwork
- Compassion
- Excellence



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Arkansas Children's Inc.

Private, non-profit healthcare system

The only pediatric healthcare system in Arkansas

Dedicated to caring for the state's more than 700,000 children

Comprised of two hospitals (ACH and ACNW), clinics across the state,

statewide nursery alliance, Arkansas Children's Research Institute,

USDA nutrition center, and Arkansas Children's Foundation

372,508 patient visits system-wide July 2020-June 2021

4,500-plus employees

1,500-plus nurses

Arkansas Children's Hospital (ACH) Little Rock, Arkansas

ANCC Magnet® Recognition

State's only Pediatric Level I Trauma Center

Regional Burn Center for children and adults

Child and Adult Congenital Heart Disease Program

State's only Level 4 Neonatal Intensive Care Unit

State's only nationally-recognized pediatric transplant program

Level 4 Accreditation by the National Association of Epilepsy Centers

American College of Surgeons Quality Improvement Program, Level 1

Verified Children's Surgical Center

Magnetoencephalography (MEG) system for neurological care and research

Licensed Inpatient beds: 336



Arkansas Children's Northwest (ACNW) Springdale, Arkansas

Only pediatric medical center in northwest Arkansas

New tower for primary and specialty care clinics

Licensed Inpatient beds: 24



2020-2021 Recognitions

Four specialties ranked among the nation's best by **U.S. News & World Report** on their 2021 Best Children's Hospitals list.

- Cardiology and Heart Surgery
- Nephrology
- Urology
- Pulmonology and Lung Surgery



Center of Excellence in Pediatric Sedation by the Society of Pediatric Sedation

AACN Silver Beacon Award for Excellence to the Pediatric Intensive Care Unit

ELSO Platinum Award for Excellence in Extracorporeal Life Support

Primary Care clinics awarded **NCQA Patient Centered Medical Home Recognition**

Best practice designation by the **Spina Bifida Association**

NNCC Nephrology Nursing Certification Advocacy Award

Center of Excellence for Hereditary Neuropathy



Dear Colleagues,

Every day, nurses at Arkansas Children's Hospital exemplify the true spirit of caring through their compassion and dedication to excellence in patient service. I recognize and value nursing teamwork and commitment to safety in care delivery, most notably in the past years' challenging pandemic environment. Their ability to nimbly pivot with change and persevere has been nothing short of remarkable.

Nurses achieve this impact through evidence-based practice, shared decision-making and professional empowerment in nursing practice. They are resilient and creative in a fast-paced environment, growing and advancing the profession.

I am proud of Arkansas Children's nurses and thank them for their dedication to the children and families we serve. I celebrate their work in this report, which highlights their notable impact in patient care delivery and outcomes.

Sincerely,

A handwritten signature in black ink that reads "Lee Anne Eddy".

Lee Anne Eddy, DNP, RN, NEA-BC
Chief Nursing Officer and Senior Vice President, Patient Care Services
Arkansas Children's Hospital



Center for Nursing Excellence



Amy Huett, PhD, RN, NPD-BC
Director of Nursing Excellence



Julie Bane, DNP, RN, NPD-BC
Transition to Practice Coordinator



JoAnna Carpenter, MSN, RN, NPD-BC
Professional Development Specialist



Lametria Wafford, MNsc, RN, NPD-BC
Clinical Education Specialist Coordinator



Austin Lovenstein, MBA, MA, BS, CRS
Research Coordinator



Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN
Nurse Scientist Manager



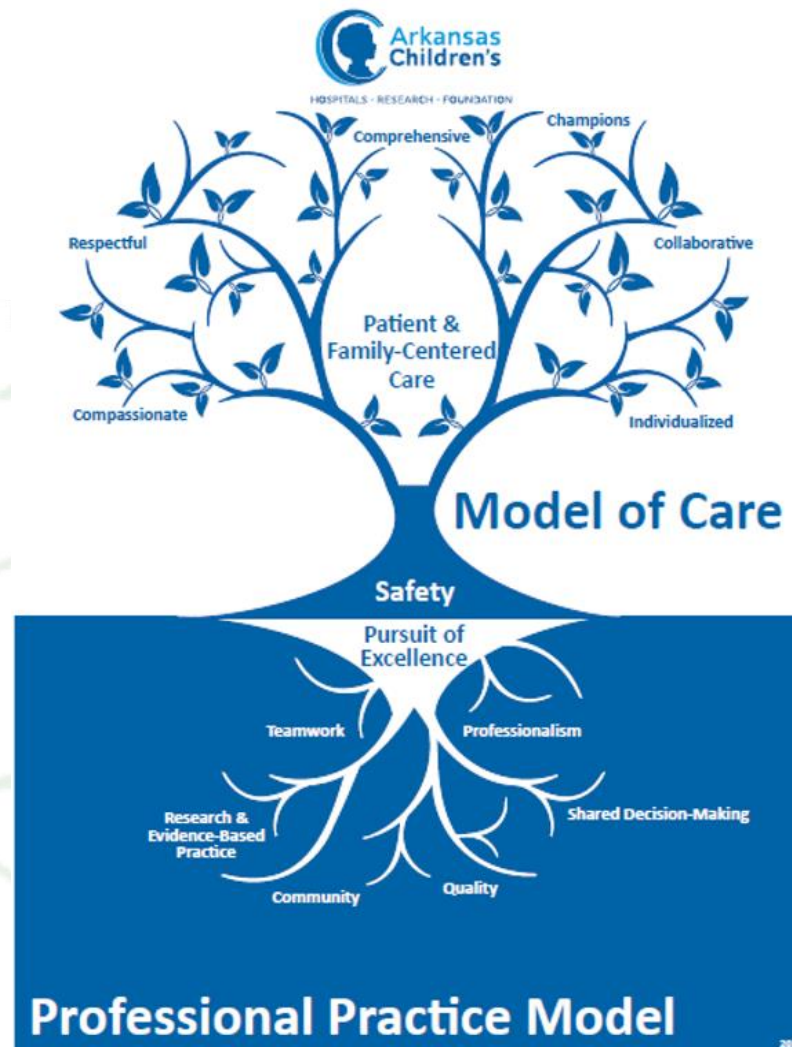
Amy Ramick, DNP, RN, ACNS-BC, NPD-BC
Nursing Research Specialist



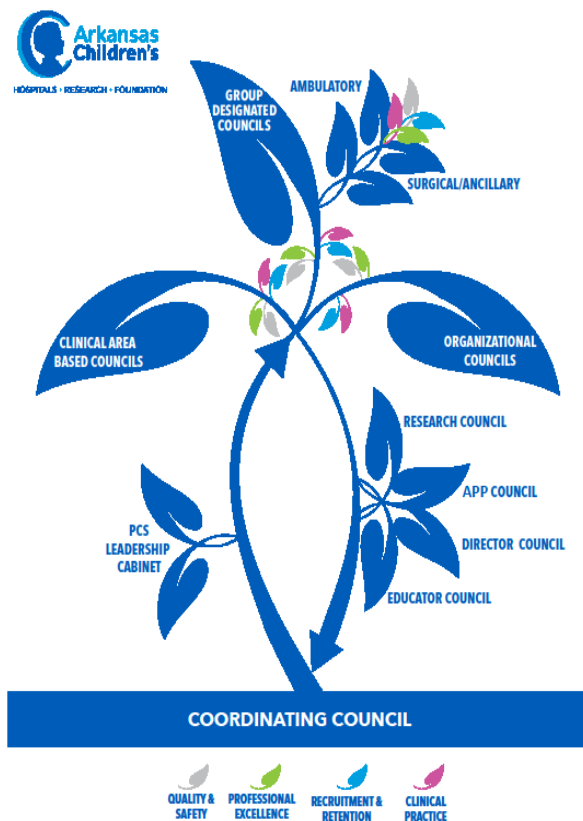
Debra Jeffs, PhD, RN, NPD-BC, FAAN
Academic Nursing Education Manager

Model of Care/Professional Practice Model

The Professional Practice Model serves as the foundation for nursing practice within the organization. The PPM includes essential values that nurses identified as the basis for delivering patient and family-centered care. Safety and the Pursuit of Excellence are core values of the Model of Care/Professional Practice Model.



Shared Decision Making Councils



2/2020

Shared Decision Making is foundational to the Professional Practice Model and an essential root of nursing practice. The work and outcomes of the councils contribute toward the pursuit of excellence in professional nursing practice; the delivery of safe, high quality patient care; a supportive, healthy work environment; patient, family and nursing satisfaction; nurse retention; and fiscal stability.

The Councilor structure serves to achieve the mission, vision, and strategic plan of Nursing and promotes staff involvement, teamwork and consistency across departments.

2020-2021 HIGHLIGHTS

QUALITY AND SAFETY



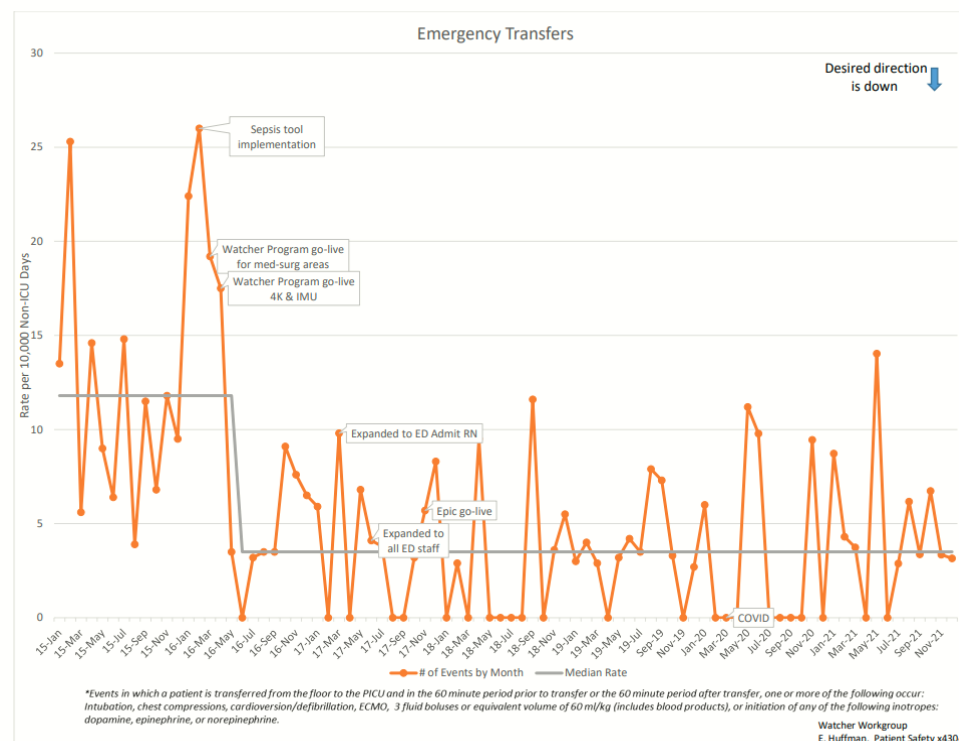
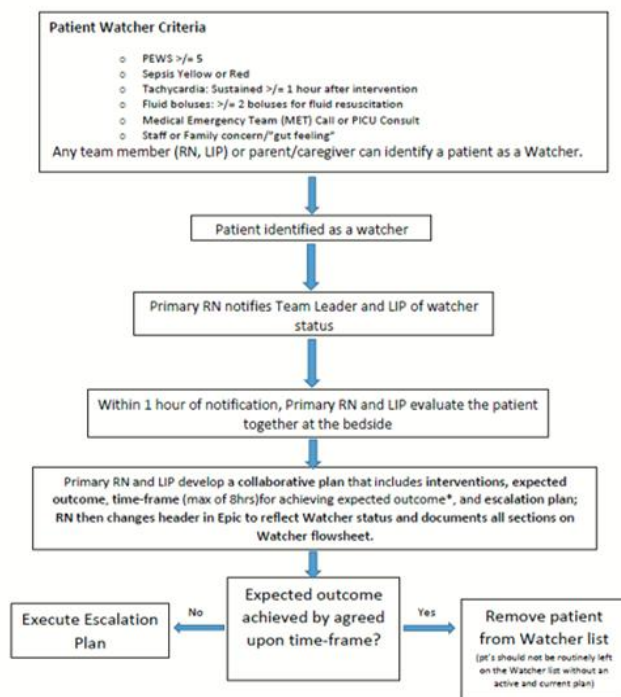
NICU celebrated 165 days without a CLABSI in 2021, the longest period between CLABSIs since 2014. The NICU CLABSI Team received the 2020 Champion for Children One Team Award!



Watcher Program Sustains Safety and Quality Outcome

The **low rate of emergency transfers to the PICU**, represented as the dark median line in the graph below, has been stable and sustained throughout 2020 and 2021 and since the Watcher Program was implemented in all medical-surgical, intermediate care, and emergency department clinical areas. This remarkable achievement through the pandemic and its staffing challenges exemplifies the team's commitment to quality and safety outcomes through situational awareness and early recognition and response to clinical deterioration. Nurses report increased satisfaction and empowerment to proactively escalate their concerns and respond to changes in patients' conditions.

ACH Watcher Algorithm



2020-2021 HIGHLIGHTS

EXCELLENT PATIENT EXPERIENCE



Improving Patient Experience through Telehealth during the Pandemic

By the end of April 2020, over 65% of the **Neuroscience Center** clinic patients signed up to gain access to the patient portal. The clinical nurses' involvement in the adoption of technology through telehealth visits led to an improvement in patient satisfaction scores in the clinic. The percent of respondents that selected "yes, definitely" to the NRC patient satisfaction question, "Knew what to do if I had questions" in the Neuroscience Center clinic **increased from 83% in February 2020 to 87% in June 2020 and 90% in July 2020.**

Providing Care and Comfort in the Emergency Department

"We Provide Care AND Comfort" was the theme for the **Emergency Department (ED) Patient Experience Work Group** focused on improving communication with patients and families in our busy Level I Trauma Center. This special task force was an interprofessional team of clinical nurses, child life, pastoral care, patient service representative, patient family services, respiratory therapist, and two mothers representing the Family Advisory Board. The goal of the project was to clearly communicate to patients and families how we can meet their needs for both care and comfort. The 11 x 17 posters (English and Spanish versions) are located on the back of the door in each patient room in the ED and serve as an adjunct to the ED Staff, providing on-the-spot answers to commonly asked questions. The posters welcome patients and caregivers to the ED, explain the care team and the workings of a teaching hospital, and highlight some functions and services we offer, from tablets and televisions to social workers and child life specialists.

2020-2021 HIGHLIGHTS

TEAMWORK



PICU Earns Silver Beacon Designation – *Again!*

PICU earned the Silver Beacon designation by the American Association of Critical Care Nurses (AACN)! Three years ago, PICU was the first unit ever in the state of Arkansas to receive a Beacon designation. Now **PICU is the first unit in the state of Arkansas to ever receive two Beacon designations**, during a pandemic, amid an extreme nursing shortage! The **Beacon Award for Excellence** lauds hospital units that employ evidence-based practices to improve patient and family outcomes. Established in 2003, AACN's award recognizes top hospital units that meet standards of excellence in recruitment and retention; education, training, and mentoring; research and evidence-based practice; patient outcomes; leadership and organizational ethics; and creation of a healthy work environment. Award criteria, which measure systems, outcomes and environments against evidence-based national criteria for excellence, provide a mechanism to initiate patient safety efforts. The compassion, dedication, critical thinking, patient focus and resiliency the PICU team displays cannot be overstated. This award provides further validation of the PICU team's dedication to optimal outcomes through exceptional care of patients and families.

TeamSTEPPS Training in the PICU Positively Affects Outcomes

Teamwork and clear communication are fundamental to a highly functioning ICU team. PICU's post-hospitalization patient experience surveys showed teamwork and communication as areas for improvement. The evidence-based TeamSTEPPS quality improvement project was implemented in the PICU to improve the communication among PICU team members, and in turn, positively affect patient satisfaction and perceptions of teamwork. The TeamSTEPPS® teamwork attitudes questionnaire (T-TAQ), given pre- and post-intervention implementation to PICU team members, showed a statistically significant improvement in perception of teamwork. Remarkably, PICU patient experience scores showed improvement after the TeamSTEPPS® training was implemented.

2020-2021 HIGHLIGHTS

WORKFORCE FOR THE FUTURE: PROFESSIONAL EXCELLENCE



Educating Student Nurses in 2020 and 2021

ACH maintains affiliation agreements with 50+ schools of nursing from all educational levels.

ACH Nursing Students of Every Level (Prelicensure RN, RN to BSN, Master's, Doctoral)

January – December 2020	1,120
January – December 2021	1,285

ACH nurses provide clinical education for nursing students of Arkansas pre-licensure RN programs. Many of these new RN graduates become our Versant New Graduate Nurse Residents. ***Student nurses ALWAYS praise ACH nurses for their learning opportunities. We received some of our highest student satisfaction scores during the pandemic! Thank you to all nurses who share their expertise, knowledge and dedication to caring for ACH patients with student nurses!***

ACH nurses who return to school for an advanced nursing degree in clinical and non-clinical programs have mentored practicum placements with ACH nurses in various roles and complete academic projects.

40 ACH nurses served as clinical instructors for pre-licensure nursing schools in 2020 and 2021.

ACH-nurse clinical instructors provide schools with fully-oriented instructors, students with experienced pediatric nurses who like to teach, and nurses who want to continue in their AC role while pursuing another professional development opportunity, especially after earning an advanced nursing degree.

While shadowing opportunities were available pre-pandemic for high school and pre-nursing college students interested in a nursing career, the program has been on hold through 2020 and 2021.

Advancing Academic Nursing Education in 2020 and 2021

Achieving a higher academically educated nursing workforce is evidence-based and has a positive effect on patient care. Multiple studies find lower patient morbidity and mortality rates in hospitals where a higher percentage of the nursing workforce is BSN or higher degree educated.

ACH has steadily increased the percentage of nurses with a BSN or higher nursing degree. Currently **76% of all ACH nurses hold a BSN or higher nursing degree**, over a 5-percentage point increase in the past 2 years alone despite the pandemic.

Throughout the past two years, academic advisement and mentored academic practicum and project experiences have continued, albeit in a remote format at times. Remarkably, in 2020 and 2021, over **150 ACH nurses graduated with RN to BSN, master's and doctoral nursing degrees.**
CONGRATULATIONS on achieving academic nursing education goals!

Certification is one evidence of lifelong learning, which is our professional nursing responsibility. In 2021, we launched a free, e-learning certification preparation program for many ACH-relevant certifications to assist nurses with successfully passing their chosen certification exams. Our organization-wide **professional certification rate** continues to increase. **Over half of all ACH RNs hold national professional nursing certification.**
CONGRATULATIONS on earning professional certification!

Nursing Professional Development in 2020 and 2021

Nursing Grand Rounds Series

- The New Epidemic: Nicotine Delivery Systems
- Behavioral Health
- Antimicrobial Stewardship
- Tracheostomy Education: Practices and Resources
- COVID-19 Pandemic Pandemonium
- Time for a New Look at Self-Care
- Resiliency in Caring for Behavioral Patients
- Moral Distress in the Pandemic and Beyond
- Clostridioides Difficile Infection in Pediatrics
- And We are Live in 3, 2, 1: Preparing for a Virtual Magnet Site Visit



Nursing Research Grand Rounds Series

- Perceptions of the Moral Obligation of Pediatric Nurses in an Active Shooter Event
- Searching the Literature for Research and Clinical Applications
- Self-Care for Healthcare: A COVID-19 Self- Assessment for Nurses and Nurse Leaders at Arkansas Children's
- Closing the Gap: Identifying Depressive Symptoms in Adolescents in the Inpatient Setting
- Critical Conversations: Strategies to Address Parental Vaccine Hesitancy
- How Patient Behavioral Events Effect Frontline Staff: Results from a Research Study at ACH

Nursing Professional Development in 2020 and 2021

Education Initiatives

- BD Syringe Education
- COVID PPE Donning & Doffing Educational Video
- Bedside Hand-off Using IPASS
- Standardized Intraosseous Needle Education
- Standardized Restraints Competency Requirements
- Diverse Hair Care Education
- ANPD Continuing Education Webinars
- Belmont Rapid Infuser Education and Training
- Safety Care Specialist Training

Preceptor Development

- Preceptor Development Workshop
- Preceptor Development Quarterly Education
- Preceptor of the Quarter Awards Recognition
- *Preceptor Pulse* Newsletter- quarterly newsletter/communication for nurse preceptors

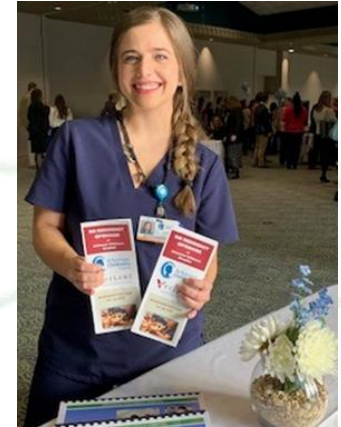
Professional Development for Nursing Professional Development Practitioners

- Resiliency & Professional Joy
- Light on the Dark Side: Living in a Stress and Trauma World
- Team Communication
- Quality and Safety at the Center
- Preparing for a Magnet Site Visit- NPD Teams

Arkansas Children's Approved Provider Unit

2020: Awarded **1,663.25 contact hours** through the following Nursing Continuing Professional Development (NCPD) educational activities:

- o CPHON Preparation Course
- o ACH Nurse Alliance Grand Rounds
- o Emergency Burn Management
- o Falls in Pediatric Ambulatory Care
- o NICU Morsel of Knowledge Series
- o Nursing Grand Rounds
- o Nursing Research Grand Rounds & Special Topics
- o Preceptor Development Workshop
- o Professional Development for NPD Practitioners



2021: Awarded **1,030.3 contact hours** through the following NCPD educational activities:

- o Hematology/Oncology course
- o ACH Nursery Alliance Grand Rounds
- o Emergency Burn Management
- o NICU Morsel of Knowledge Series
- o Nursing Grand Rounds
- o Nursing Research Grand Rounds & Special Topics
- o Preceptor Development Workshop
- o Professional Development for NPD Practitioners
- o Safety Care Specialist Training

Professional Nursing Orientation

- Total of **470 attendees** (non-Versant RN Residents) participated in PNO in 2020 and 2021
- RNs, LPNs, Patient Care Technicians, Clinical Support Staff, Unit Secretaries, Care Attendants, Behavioral Health Techs, Paramedics, OR Techs, and other tech roles applicable

RN New Graduate Residency Program

The **Versant New RN Graduate Nurse Residency** program meets goals of increased retention, confidence, competence, engagement and satisfaction of new graduate nurses. The program is approximately 18 weeks depending on individual progression; includes didactic, clinical practice and mentoring components; and is offered three times each year in the winter, summer and fall.

February 2020 Cohort

40 RN Graduates (55% BSN graduates) from Arkansas schools of nursing
Out of State schools: Excelsior College (NY), Xavier University (OH),
Texas Women's University

August 2020 Cohort

34 RN Graduates (71% BSN graduates) from Arkansas schools of nursing

October 2020 Cohort

19 RN Graduates (58% BSN graduates) from Arkansas schools of nursing

February 2021 Cohort

19 RN Graduates (37% BSN graduates) from Arkansas schools of nursing
Out of State school: University of Louisiana at Monroe

July 2021 Cohort

42 RN Graduates (83% BSN graduates) from Arkansas schools of nursing
Out of State school: Collin College (Texas)

September 2021 Cohort

39 RN Graduates (67% BSN graduates) from Arkansas schools of nursing
Out of State schools: Oklahoma Wesleyan, Kennesaw State University (Georgia),
Grand View University (Iowa), University of Louisiana, University of Alabama

One-Year Retention Rates

February 2020 Cohort	83%
August 2020 Cohort	94%
October 2020 Cohort	89%



Arkansas Children's Hospital is the first and only new graduate residency program in Arkansas to achieve accreditation with distinction from the Practice Transition Accreditation Program® (PTAP), awarded by the American Nurses Credentialing Center (ANCC). This distinction is the highest recognition an organization can earn for excellence in transitioning new graduate nurses into practice settings, while meeting rigorous, evidence-based standards for quality and excellence. Our redesignation application was submitted to ANCC in 2021.



2020-2021 HIGHLIGHTS

COMMUNITY OUTREACH AND PARTNERSHIPS

100 ACH team members addressed 16,500 callers to the COVID-19 Hotline operated from March 12, 2020 to November 1, 2020.

14 Arkansas Children's nurses joined the staff relief effort in New York City in April 2020 providing much-needed staff relief to hospitals impacted by COVID-19 early in the pandemic.

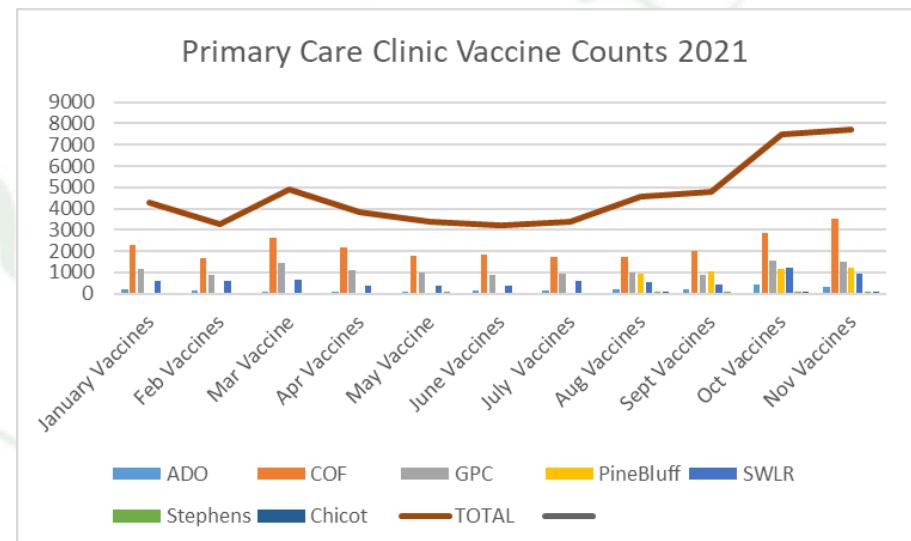
By the end of January 2021, 25,000 COVID swabs had been done in the ACH COVID drive-through testing!



Drive-Through Pediatric Vaccine Clinic during the Pandemic

Routine childhood vaccination and well-child visits are essential for pediatric patients' preventative and public healthcare services. The COVID-19 pandemic caused an immediate and significant decline in well-child visits and vaccine administration. An **innovative drive-through vaccine clinic** was established to improve the vaccination rate and ease parental anxiety about being exposed to COVID-19. The initial focus was on children between 18 months to 4 years of age at the start of the pandemic, and then slowly extended to the back-to-school and influenza vaccines. The drive-through immunization station provided **745 vaccines to 415 patients between April and September 2020**. The median wait time from patient arrival to completion of vaccine administration was five minutes at the drive-through location. Patient and parent feedback was positive. The addition of a drive-through clinic helped significantly increase the total number of vaccines administered compared to the previous year. In a global pandemic, innovative ideas to increase access to preventive healthcare should be a priority. In the future, this method of nontraditional vaccine administration will allow for improved outreach efforts to underserved populations in our communities and better disaster preparedness.

Highest Primary Care Vaccine Number EVER!



Stephens Elementary and Chicot Elementary School-Based Clinics: Delivering Care Where Children Learn

The Stephens Elementary and Chicot Elementary School-Based Health Clinics provide primary care that students need without always needing a trip to their primary care physician's office, which pulls students away from school and parents/guardians away from work. **By October 2020, for the first time ever, Chico Elementary's 800 students had 100% immunization compliance.**

Beginning in the fall 2020 school year, **Arkansas Children's Care Network and the schools** provided school nurses with access to the Epic Healthy Planet Link for the more than **50 medically complex students who are patients at ACH.**



Shared Decision Making 2020 Council Posters

(pages 26 – 43)

ACH COUNCILS

2B BURN COUNCIL
 3C IMU COUNCIL
 3D/3E CP/QS PE/RR COUNCIL
 3K ITU/4C/5E/5D CP/QS COUNCIL
 3K ITU/4C/5E/5D PE/RR COUNCIL
 4D EMU COUNCIL
 4K HEM/ONC/APHERESIS/DAY MED COUNCIL
 AMBULATORY COUNCIL
 APP COUNCIL
 CVICU/ECMO CP/QS COUNCIL
 CVICU/ECMO PE/RR COUNCIL
 DIRECTOR COUNCIL
 ED CP/QS COUNCIL
 ED PE/RR COUNCIL
 EDUCATOR COUNCIL
 NICU CP/QS COUNCIL
 NICU PE/RR COUNCIL
 ORGANIZATIONAL CP COUNCIL
 ORGANIZATIONAL QS COUNCIL
 ORGANIZATIONAL PE/RR COUNCIL
 PICU CP/QS COUNCIL
 PICU PE/RR COUNCIL
 RESEARCH COUNCIL
 RESOURCE TEAM/ RN SUPERVISORS
 CP/QS PE/RR COUNCIL
 SURGICAL SERVICES COUNCIL

**If you would like to learn more or would like to join a council, please contact the Council Chair, PCM or Director.*

JOIN US



IMPORTANT DATES

JANUARY
 START OF NEW COUNCIL YEAR
 COUNCIL LEADER ORIENTATION

SEPTEMBER
 *SUBMIT COUNCIL POSTER

OCTOBER
 *SUBMIT YOUR INTEREST FORM TO JOIN

NOVEMBER
 *COUNCIL ELECTIONS

DECEMBER
 *COUNCIL MEMBER ORIENTATION

BROCHURE CONTRIBUTORS

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HOSPITALS • RESEARCH • FOUNDATION

SHARED DECISION MAKING COUNCILS



LITTLE ROCK CAMPUS

1 CHILDREN'S WAY
 LITTLE ROCK, ARKANSAS 72202
 501-222-1561



Nursing Annual Report & Council Celebration Special Edition 2020

Professional Excellence Recruitment and Retention Organizational Council

Tiffany Smallwood, BSN, RN, CPN, Chair



Membership

- Elissa Annesley-DeWinter, RN, CCRN, Burn
- Laura Buse, MSN, RN, NE-BC, Outpatient Clinical Operations Manager
- Allison Cockrill, BSN, RN, Infant-Toddler Unit
- Katie Cruz, BSN, RNC-NIC, NICU
- Chad Dugger, BSN, RN, CPN, Palliative Care
- Amy Huett, PhD, RN, NP-BC, Director of Nursing Excellence
- Debra Jeffs, PhD, RN, NP-BC, FAAN, Academic Nursing Education Manager
- Ginger King, BSN, RN, 3D/3E Surgical
- Heather Kreulen, MSN, RN, NE-BC, Nursing Director Infant-Toddler Unit, 5D, 5E
- Megan McCullough, BSN, RN, 4K Hematology
- Sarah McCullough, BSN, RN, CCRN, CVICU
- Leslie Moore, BSN, RN, CPN, CPXP, Patient Experience
- Brittany Moyers-Logue, BSN, RN, CPN, SST
- Emily Nalley, BSN, RN, Infant-Toddler Unit
- Kristen Newton, RN, Case Manager
- Crystal Paparic, MNsc, APRN, PNP-PC, Critical Care
- Jessica Powell, BSN, RN, Peri-Op Services
- Shanna Prater, LPN, Neuroscience Clinic
- Emma Rhoads, BSN, RN, CCRN, PICU
- Janise Sanders, BSN, RN, R/R, Human Resources
- Karina Salmeron-Zuniga, BSN, RN, Intermediate Care
- Tyler Simpson, BSN, RN, 5D, Progressive Care
- Hilary Spurgeon, BSN, RN, NE-BC, Clinical Project Manager
- Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Nurse Scientist Manager

Purpose

Implement evidence-based strategies to attract and retain talented nurses, who demonstrate ideals of the ACH Model of Care and Professional Practice Model. Promote a healthy work environment in which nurses can thrive and develop professionally. Promote professional nursing practice and nursing excellence. Support advancement of nursing within ACH and the wider community.

Goals

- PERR Council aligns with organizational values of Safety, Compassion, Teamwork, Excellence through the following goals:
 - Advancing professional nursing excellence by increasing BSN or higher nursing degrees, professional certification rates, and involvement in scholarly activities
 - Supporting nurse recruitment and retention
 - Promoting recognition of ACH nurses



Task Forces/Subcommittees

Recognition/Certification Task Force:

- Ensure recognition and retention of ACH nurses on an organizational, state, and national level

DAISY Subcommittee:

- Recognize outstanding, compassionate nurses through the DAISY recognition program

Mentoring Task Force:

- Provide standardized resources, tool kits, and structure while encouraging each clinical area/department the opportunity for creativity in nurse mentoring

Professional Development Taskforce:

- Develop the ACHieve Career Ladder and electronic portfolio for nursing professional advancement

Scholarly Activity Taskforce:

- Promote professional excellence through scholarly activities including an organizational-wide journal club

#morethanever

- **COVID Challenges:** In-person meetings!
 - PERR ORG Council, held its last in-person meeting in February 2020. We celebrated a council member's birthday with cake, balloons, and fun!
 - Virtual meetings using technology and communication via email followed.
 - DAISY Award ceremonies required adaptation.
- **PERR ORG Council Successes:**
 - DAISY nominations, selection and awards continued! 12 DAISY awards in 2019 and 3 so far in 2020.
 - ACH received a large DAISY "Healer's Touch" statue
 - June 2019 awarded our first LPN the DAISY award
 - 72% of nurses hold BSN and higher nursing degrees
 - 50% of nurses hold national professional certifications
 - 95% student nurses satisfied with ACH learning



- Participated in Nursing Recruitment Open Houses in September 2019 and February 2020

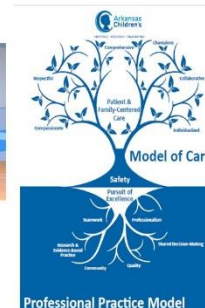


Connections

- PERR ORG Council collaborates with the Coordinating Council, all organizational, clinical area based, and support councils to ensure good communication between all councils.
- PERR ORG Council embodies the Professional Practice Model by utilizing shared decision making to engage ACH nurses in the pursuit of excellence while ensuring patient and family-centered care.



DAISY statue is ready for the healers' garden!



Future Direction

PERR will continue to support the Nursing Strategic Plan by maintaining the current PERR Council task-forces and subcommittees and implementing the following actions:

- Strengthen the Center for Nursing Excellence
- Evaluate the ACHieve Career Ladder for nursing professional development
- Build resiliency of nursing workforce
- Increase retention of nurses
- Support success of nursing students
- Continue to increase nurses' certification, promote academic progression, and support nursing scholarship

Nursing Annual Report & Council Celebration



3K/5E/5D Clinical Practice/Quality and Safety

Brittany Lequieu RN III, CPN, Chair

Brandei Moragne RN IV, BSN, CPN Co-Chair



Membership

- Angela Scott MNSc, RN, APRN, PCNS-BC
- Diane Micco RN IV, PCM, BSN, CPN
- Crissy Benson RN IV, BSN, CPN
- Courtney Johnson RN II, BSN
- Caitlin Jackson RN III, BSN
- Nikki Mallaby RN III-NIC
- Kelsey Lyle RN II, BSN
- Glenn Gross RN II, BSN
- Kelsey Kidd RN II, BSN
- Hayley Baker RN II, BSN

Purpose

The purpose of the Clinical Practice/Quality and Safety Council is to assure excellence in patient and family centered care by promoting consistency of care across the continuum; evaluating practice utilizing internal and external benchmarks; identifying safety issues in the care environment; revising current practice based on the best available evidence using quality, safety, and process improvement tools; and proactively implementing innovative practice changes.

Fiscal Year 2020 Goals

- 1) Review & re-educate staff on charting education especially for our trach/vent population.
 - We found that incorrect charting of education was causing a delay in parents & caregivers completing education and being discharged home.
- 2) Identify gaps in knowledge for our units, and set-up an annual skills fair.

Celebrations

- This year 3K had 2 nurses pass their CPN exam



Challenges Our Council Experienced

- One of our biggest challenges our council has experienced since the pandemic has been being able to have productive meetings. It seems like we were either having technical difficulties or not having many agenda items to discuss

Story of Resilience

- We have had to be resilient in many ways this year. Because of the decrease in patient census hospital wide 5E & 3K had to combine. To keep from being over-staffed frequently and using up our ETA we had/have the option of offering to work in the NICU if they have a need. Many times the staff have taken pulls out of turn just so another co-worker had the opportunity to work & not use up their time.



Council Pivots/Policy Changes Works in Progress

- Our council has been having email meetings and also using the TEAMS app more than we have in the past. We are trying to work out the logistics of having a walk-through "skills fair" with education boards



Nursing Annual Report & Council Celebration Special Edition 2020

Ambulatory Council

Chair Devan Shaw, RN, CPN/Co-Chair Kimberly Wehrle, BSN, RN, CPN



Membership

- Laura Buse, MSN, RN, NE-BC
- Diane Brussard, BSN, RN, CPN
- Shelbi Dearing, RN
- Karen Kelley, BSN, RN, CPN
- Stephen King, Physical Therapy
- Jill Lasley, RN
- Kelley Means, BSN, RN, CPN
- Tammy Mobley, RN
- Tiffany Moore, RN
- Brenae Perkins, PAR
- Racheal Poroshine, RN
- Darrah Preator, Ophthalmic Assistant
- Brook Scalzo, BSN, RN, CPN
- Devan Shaw, RN, CPN
- Terri Songer, MSNc, RN, CNML
- Jonna Turner, BSN, RN
- Kimberly Wehrle, BSN, RN, CPN
- Cailen Whitney, RN
- Del Williams, PCT
- Hailey Wood, BSN, RN
- Sam Yates, RN

Goals

- To support the ACH and Patient Care Services mission, vision and strategic guidelines achieving quality and safe family centered care.
- Magnet readiness, staff engagement, patient safety and excellent patient experiences.
- To further develop our mentor program.

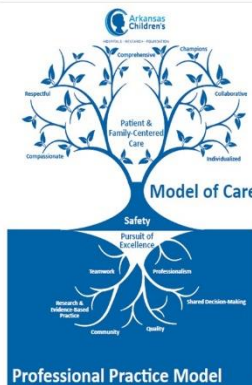


#morethanever

- Our council has faced obvious challenge of transitioning to virtual meetings due to COVID-19.
- Our council changed our bylaws to include LPNs in 2019.
- In June of 2019 LPNs became eligible for DAISY nomination. We had an LPN win for the 2nd quarter.
- We have had 39 DAISY nominees in ambulatory for 2019-2020.
- Drive-Thru Success:
 - GPC has had great success with their Immunization Station Drive-Thru. Since starting on April 21, 2020 they have seen 299 patients and given 533 vaccines as of June 24, 2020.
- We continue to work on our mentor program and have submitted as a Magnet story.
- Developed an ambulatory staffing page to help nurses get their hours when overstaffed.
- In the works:
 - Survey Monkey for staff surveys on how to improve employee engagement for ambulatory staff.

Connections

- Our council is interdisciplinary in order to achieve improved quality and safety in patient care and performance excellence.
- We promote staff involvement, teamwork and consistency across departments.
- Complementing the formal organizational reporting structure, our members represent and report back to their work areas. Progress from our council is shared in Coordinating Council.
- Information from Coordinating Council is in turn shared with members of our council by the Chair and Co-Chair. This is self governance in action.



Purpose

As a designated group council, members engage in discussion and decision making on clinical matters within like services areas to gain consistency, integration and standardization within Ambulatory Care.

Future Direction

- Continue to work on employee engagement by adjusting strategies based on survey feedback.
- To grow our mentor program which can help have a positive impact on staff retention.
- We will continue to work to develop strategies to help with patient satisfaction.



Nursing Annual Report & Council Celebration Special Edition 2020

Periop Council

Sondra McNatt BSN, RN, CNOR, RN IV Chair/Anita Norfleet RN, RN III Co-Chair



Membership

Sondra McNatt, BSN, RN, CNOR, RN IV Chair
Anita Norfleet RN, CPN, RN III Co-chair
Jennifer Bates, ADN, RN, CPN
Mashauna Conley, CRST, ST II
Sydney Davenport, BSN, RN, CPN
Brandy Gentry, BSN, RN, CPN
Allison Gilbert, CRST, ST II
Keri Hamm, BSN, RN, CNOR
Melinda Harris, BSN, RN, CNOR
Ashley Landers BSN, RN II
Allie Martin BSN, RN II
Danielle Nicpan CRST, ST II
Jessica Powell BSN, RN II
Hannah Roark BSN, RN II
Jill Whitehead, BSN, RN, CPN

Purpose

The Perioperative Services PERR/CPQS CAB Designated Group strives to provide shared governance through all of our departmental initiatives. We are a group of diverse health care professionals with the ultimate goal of making the patient experience excellent. The council strives to increase nursing and employee satisfaction by implementing resiliency debriefing sessions, mentoring and other employee education programs.

Task Forces/Subcommittees

- Periop Governance Council
- Org PERR Career Ladder
- CAB Mentor taskforce
- CAB Employee Engagement
- SSI HAC, VTE HAC

Goals

Quality & Safety:

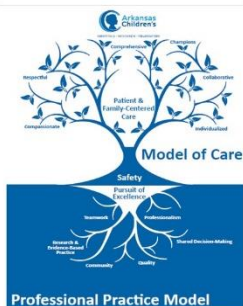
- Hand Hygiene
- Needle Stick Protocol Audits
- Shunt Protocol
- Decrease Instrument Issues SPD
- K-Card Audits
- SSI/VTE
- First Case Starts, turnover time, room utilization, and PACU LOS above CHA average
- Improve Inventory: standardize, accuracy
- EPIC Updates: Procedures, Medications, D/C Instructions
- Deep cleaning log

Engagement:

- Resiliency Debriefing Sessions
- Incivility training
- Support council sponsored events
- Wellness training
- Accountability focus for resource utilization

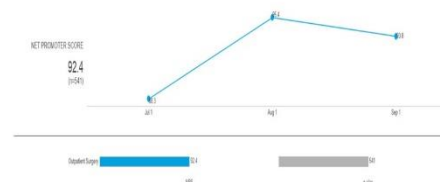
Optimization:

- Mentor Program
- Autism Protocol
- Case preparation & instrument process
- Second backup call
- Orientation skills lab
- DaVinci emergency response training



#morethanever

- Covid: Council Chair Infection prevention Ambassador
- Education staff for Covid process changes
- Covid: facilitator to ensure testing completed for scheduled cases
- On hold: Resiliency debriefings, team building activities outside hospital
- Universal Time Out floor process and documentation
- Laser program restructuring
- SSI 303 days no infections



Connections

The Professional Practice Model at Arkansas Children's Hospital drives our focus for patient and family centered care. Our council's shared decision making promotes quality and interdisciplinary teamwork. We use evidence based practice to promote change while maintaining our core values of safety, teamwork, compassion, and excellence. We strongly encourage our nurses to be their best in their professional practice in order to provide exceptional care to our patients and families. The council uses team connection events to celebrate our diverse roles, certifications, and achievements. Through service projects we represent Arkansas Children's Hospital while giving back to the community.

Future Direction

Quality and Safety:

- Improve Autism (ASD-ID) Admission process
- Coordinate patient teaching with clinics improve understanding pre-op, post-op care/DC instructions
- Update PPI care giver teaching video

Engagement:

- Nurse Retention – onboarding, and orientation process improvements, preceptor training, update mentor program
- Nurse Engagement debriefing sessions, mentor training, team building, unit national celebrations
- Patient Experience, Physician Partnership, Key Drivers PX Scoreboards

Optimization

- Resiliency Debriefing Sessions–Continue Department, Expand House wide

Innovation

- Improve patient activity transition ASC



Nursing Annual Report & Council Celebration

Special Edition 2020

2B Burn Center Council

Christine Grauer, RN IV, BSN, CCRN: Chair & Mandy Yelvington, MS, OTR/L, BCPR, BT-C: Co-Chair



Membership

- Lizzie Alvarez, RN II, BSN
- Elissa Annesley-DeWinter, RN IV, CCRN
- Sarah Barnhart, RN II, BSN
- Kendyl Doan, CE, BSN, CPN
- Lauren Baxley, Specialty Nurse, BSN, CCRN-K
- Courtney Gentry, RN II, BSN
- Georgia Franklin, RN II, BSN (Alternate)
- Jenny Janisko, MSN, RN, NE-BC
- Helen McLennon, RN II (Recorder)
- Pat Scott, Burn Tech (Ad Hoc)
- Aisha Rivera, RN II, BSN
- Nikki Spriggs, PCM, BSN, CCRN (Facilitator)
- Lauren Whitby, RN II, BSN
- Ryland Walt Steele, MPAS, PA-C

Purpose

- The purpose of our council is to engage in decision making on clinical practice, quality and safety, professional education/excellence, and recruitment and retention specifically related to the Burn Center.



Unit staff pause while wrapping gifts at the Little Rock Dream Center Christmas Mall. This is the fifth year that Burn staff have volunteered to wrap gifts.

A nurse finds the COVID emoji during 2020 Nurses Week to win a gift card.



Fiscal Year 2020 Goals



March 23, 2020: Socially-distanced rounds before mask mandate

Quality & Safety:

- Make Zero Happen for patients/employees**
 - Created Burn 'What the HAC' fliers to highlight HAC numbers, celebrations, and areas for improvement

Engagement:

- Nursing Retention and Workforce Planning**
 - Sponsored Versant Welcome Dinners
 - Collaborated with nursing leadership to change scheduling policy to promote equitable weekend rotation and skills mix
- Nurse Engagement: Healthy Work Environment/Celebrate Accomplishments**
 - Planned unit Holiday Party
- Diversity & Inclusion**
 - Welcomed Physician Assistant as Council member to improve communication between nurses and medical team

Optimization

- Team Resilience**
 - Created appreciation baskets for Administrative Professionals, PAs, and APRNs
 - Engaged staff members in community volunteer opportunity at Little Rock Dream Center and collected donations for The Van

Innovation

- Ongoing Magnet Readiness**
 - Created 'Certification Library' to promote access to study resources for Adult CCRN certification exam

Outcomes #MoreThanEver

Quality & Safety:

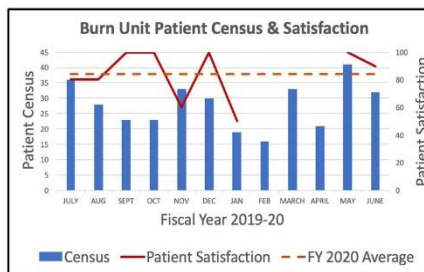
- Make Zero Happen for patients/employees**
 - Advocated for rapid COVID-19 swabs for patients placed in semi-private rooms during periods of high census
 - Implemented change of practice for all staff to wear N95 masks during aerosolized-producing procedures, such as deep sedation for wound care

Optimization

- Team Resilience**
 - Utilized conference calls for unit council meetings and Zoom calls for Survivors Offering Assistance in Recovery (SOAR) program for patients
 - Modified traditional interdisciplinary team rounds to allow for continued face-to-face communication about patient care

Innovation

- Patient Experience**
 - Received 'Patient Experience Award' January 2020 for outstanding NRC scores
 - Patient satisfaction scores at 84.4% average for FY 2020 amidst COVID-19 changes and consistent patient census; five months with scores 90% or better



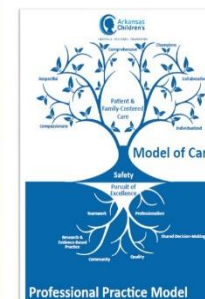
No NRC data available for February - April 2020

Connections

- The Burn Center Council supports collaborative and comprehensive evidence-based practice with a focus on high quality patient and family centered care through multidisciplinary teamwork and promotion of shared decision making.



Decorated DAISY Nomination Box



Task Forces/Subcommittees

- HAC Group Task Force
- Nurse Scheduling Task Force

Future Direction

- 2020 Pediatric Nurses Week with socially-distanced celebrations and activities
- Recognition activities for staff achievements and special events
- Engagement with physician assistant to create educational pamphlet for patients and families to view on admission



Nursing Annual Report & Council Celebration Special Edition 2020

3C Intermediate Care Unit Council

Bethany Byrne BSN, RN – Chair Hannah Cummings BSN, RN – Co-chair



Membership

- Bethany Byrne BSN, RN – Chair
- Hannah Cummings BSN, RN – Co-chair
- Carla Mace BSN, RN – Reporter
- Jessi Brown RN, CPN
- Amanda Cardwell BSN, RN
- Alli Hammer BSN, RN
- Lisa McDougal BSN, RN
- Karina Salmeron-Zuniga BSN, RN
- Rachel Stewart BA, CCLS
- Crystal Tucek BS, RRT
- Kendyl Doan BSN, RN, CPN – Facilitator
- Valerie Hamric BSN, RN, CCRN – Facilitator



Purpose

- Improve patient safety at unit level, empower nurses to integrate quality initiatives, improve nurse retention and to deliver education and safe practice for our nurses, patients, and families.

Goals

- Quality and Safety
 - o Continue to improve the patient experience as evidence by increase in patient satisfaction scores.
 - o Decrease in number of emergent escalations.
 - o Decrease employee injuries
 - o Decrease in device related pressure injuries
 - o Increase compliance of CAUTI and CLABSI audits and reduced number of infection.
- Engagement
 - o 100% participation in Marcy's Forums, ask questions, and provide feedback.
 - o Improve nurse retention
- Optimization
 - o Improve compassion and retention

Task Forces/Subcommittees

- Hand Hygiene
- Sunshine Fund
- Employee of the Month

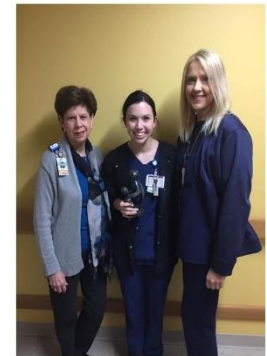


#morethanever

- **COVID Challenges**
 - Covid posed unique challenges in the patient care world. In many ways our goals for improvement were on hold while we adapted to changes necessary to promote safety. Our unit responded with a positive attitude and commitment to our patients and each other. We kept up to date on adjusted guidelines and practices and supported each other emotionally through this trying time.
- **OUTCOMES**
 - Quality and safety
 - Patient satisfaction increased by 13.5% on the net promotor score
 - Over 200 days since last emergent escalation with one in last year.
 - HACS: zero reported in FY20, 524 days since last HAC.
 - Hand hygiene excellence with 11 consecutive months above target
 - Engagement
 - Increased nursing participation in forum, pull pass raffle offered to those in attendance
 - Optimization
 - Improved nursing student experience after initiating nursing student rotation list
 - Daisy Award Winners: Madison Ellis, Kristin Courtney, and Stu Scott
 - Community Engagement via holiday break food drive with AR Dream Center
 - Encouragement board initiated

Connections

- **Shared Decision Making**
 - Bedside nurses and council members represent unit on all organizational HAC committees
 - PERR council
 - CAUTI, CLABSI, PIVIE
 - Daisy award committee
 - Quality/Safety & Clinical/Practice councils
 - PUP/SKIN CHAMP
 - Unit represented on OneTeam Admission Workgroup



Future Direction

- **The following goals align with the FY 21 Nursing Strategic Plan**
 - Patient experience: adaption and promotion of bedside report and hourly rounding
 - Financial stability: appropriate resource utilization to reduce waste and lost resources
 - Quality & Safety: continue excellent HAC trends, and meet preventable harm index regarding pressure injuries, PIVIEs, and escalation of care.



Nursing Annual Report & Council Celebration Special Edition 2020

3D/3E/4C Unit Council

Nicole Whiteaker, BSN, RN II / Linsey Ryan, BSN, RN IV



Membership

Nicole Whiteaker BSN, RN II, CPN
Linsey Ryan BSN, RN IV, CPN
Kelly O'Cain, BSN, RN IV, CPN
Melissa Gearhart, BSN, RN IV, CPN
Beth Conley BSN, RNIV, CPN
Sydney Milby BSN, RNIII, CPN
Missie Martinous BSN, RNIV, CPN
Connie Bell BSN, RNIII, CPN
Jera Shepard BSN, RNII, CPN
Ginger King, BSN, RN II
Sandra Lopez, ASN, RN II
Jenny Chilton, BSN, RN II
Ashley Gober, BSN, RN II
Abby Cambron, BSN, RN II
Kaci Mills BSN, RN II
Katie Weyer BSN, RN II
Josie White MSN, RNIII, CPN
Jennifer Melero BSN, RN, CPN – Facilitator
Cacey Sellers BSN, RN, CPN – Facilitator
Tammy Diamond-Wells MSN, RN, NE-BC - Director



Purpose

The purpose of our council is to engage in decision making on clinical matters, quality and safety, professional education, patient experience and recruitment and retention specifically related to 3D/3E Surgical and 4C Gen Med.



Goals

- **Quality and Safety**
 - Perform TL/PCM MET rounds to ensure communication of the POC, the MET and that expectations are being met
 - Representatives on organization HAC groups to provide real time updates to staff and audits to maintain policy compliance and patient safety
 - Real Time ADL audits
 - Monthly Quality Reports
 - Unit safety huddle each shift that captures organizational and unit specific safety focuses and HAC information
- **Engagement**
 - Soles for Souls Sock Drive
 - Arkansas Food Bank Canned Good drive
 - Monthly Birthday Celebratory Email
 - Facebook page updates with life events
 - Facilitation of bulks order of protective eye wear
 - Implemented use of the compassion cart on the units, which includes snacks and small items families may need on the units.
 - INPUT Rounds
 - PCM and Director Rounds
 - All leadership attended racial injustice listening sessions
- **Optimization**
 - Flexed staffing up and down based on census
 - Staff volunteered to fill screener role
- **Innovation**
 - My Chart Activation above org goal
 - Boot camp for new nurse hires

#morethanever

- **Describe the challenges that COVID presented to your council.**
 - Face to face meetings were paused leading to utilization of email and Teams App meetings
- **Describe any celebrations or success stories.**
 - Facebook live updates multiple times a week to keep staff informed during early stages of COVID pandemic
 - We have been able to keep information updated between unit members via email and assistance from our facilitators/PCMs
 - Individual just in time education provided on proper PPE donning and doffing for care of COVID+ patients leading to 0 staff being quarantined or subsequently testing positive for COVID
 - Provide care for all non ICU COVID+ patients
 - Partnered with 4K to ensure patients needing chemo who were COVID+ had proper negative pressure room placement and staff to provide care
- **Describe efforts to overcome challenges, including any process changes.**
 - Equitable rotation of COVID+ patient assignments to staff
 - 3E added four new negative pressure rooms
 - Staff volunteered to work in screener roles
 - Leader in surge capacity planning for UAMS patient overflow accommodations
- **List any works in progress.**
 - Pilot to utilize pagers for ED admissions mirroring process used with PACU admissions



Task Forces/Subcommittees

- Frontline participation on the following HACS: CAUTI, CLABSI, PIVIE, PI, VTE, SSI, Readmissions, Slips/Falls, Overexertion, Exposures and Behavioral
- Representation on the watcher taskforce, surge capacity taskforce, high census task force
- Patient Experience Representative(s)



Future Direction

- **Describe how your council plans to meet/influence the Nursing Strategic Plan in FY21**
 - To enhance patient experience staff will complete bedside report, participate in INPUT rounds, utilize white boards and escalate parent/patient concerns
 - Staff will continue to flex staffing up and down as census fluctuates and ensure all patient charges are captured to assist with sustaining financial stability





Nursing Annual Report & Council Celebration Special Edition 2020

Infant/Toddler Unit PERR Council

Chair: Katie Russell BSN, RN, CPN Co Chair: Susan Easterling BSN, RN, CPN



Membership

- Pam Atkinson BSN, RN, CPN
- Lana Ball BSN, RN
- Nicole Bernard BSN, RN, CPN
- Allison Cockrill BSN, RN
- Susan Easterling BSN, RN, CPN
- Megan Hayes BSN, RN
- Rachel Jackson BSN, RN, CPN
- Roxi Jones RN
- Danelle Lewis BSN, RN
- Emily MacIver BSN, RN
- Emily Nalley BSN, RN
- Katie Russell BSN, RN, CPN
- Ashley Thacker BSN, RN
- Megan Yonker BSN, RN
- Crissy Benson BSN, RN, CPN
- Kim Prater BSN, RN, CPN



Purpose

Recruit and retain professionals that are new to the medical field as well as those that are new to the facility and/or our respective units. Provide education and encouragement to nurses to promote excellence in nursing and advancements in their professional careers, not only within the organization but within the community as well.

Goals

- Further develop and implement mentoring program for new nurses aiding in their transition to professional practice.
- Increase unit morale by recognizing fellow coworker for their hard work, advocacy and dedication to the unit.
- Increase employee involvement in volunteer opportunities and community outreach projects.
- Continue to push for increase in patient satisfaction by utilizing communication tools to ensure accurate plan of care between care team and family.



Task Forces/Subcommittees

- Open House committee
- Community Service committee
- Mentor Program
- Christmas party
- Nurses week

#morethanever

- Due to COVID our council transitioned to email meetings and checking up on each other individually on our shift instead of meeting in person this year.
- The biggest obstacle for our unit and patients during this COVID season has been the restriction of one caregiver at the bedside. There are multiple stories of ITU staff going above and beyond for families and patients to help with this transition, such taking on some of the responsibilities of the second caregiver. Overall, ITU staff exceeded the expectations by being the extra support system and giving encouragement to parents in this uncertain time.



Connections

- ITU promotes shared governance by team work, problem solving and accountability. With the goals of improved staff satisfaction, productivity, and patient outcomes.
- The projects completed by the council throughout the year aid in insuring that we are practicing to the best of our ability, thus enhancing the strong patient and family centered care that we strive to provide.



Future Direction

- Maintaining employee satisfaction and unit moral as one of council's forefront focuses with projects aimed specifically at employee development and recognition.
- Optimize mentorship program by developing a unique plan for each new employee to meet their individual needs. In hopes, to create an encouraging atmosphere that transitions the new employee to a supportive environment.
- Continuing to engage the community in service outreach projects.





Nursing Annual Report & Council Celebration

Neuroscience Council

Chair: Berenice Alfaro, BSN, RN, CPN

Co-Chair: Lea Woodrow, BSN, RN, CNOR



Membership

- Madison Ables, ASN, RN
- Stephanie Benning, MSN, APRN, PCNS-BC, CPN
- Kim Cannon, BSN, RN
- Carrie Gruver
- Stacey Hawkins, BSN, RN, CPN
- Mallory Hill BSN, RN, CPN
- Lauren Heird, BSN, RN
- Ginger McEarl, MSN, RN, CPN
- Anna Grace Mills, BSN, RN
- Laura Gill BSN, RN
- Shanna Prater, LPN
- Ambre Pownal, MSN, APRN, PPNCB-BC
- Allison Pruitt, BSN, RN, CPN
- Angela Riggs, BSN, RN, CPN
- Beth Ritter BSN, RN, CPN
- Angela Smith, BSN, RN, CNRN, CPN
- Justin Smith, BSN, RN, CPN
- Tracy Tackett, CNIM, REEGT

Fiscal Year 2020 Goals

- Incorporate functional pattern of communication by participation in Organizational councils.
- Increase familiarity with quality and safety data trends

Magnetoencephalography



Outcomes

- Continue improving our council that incorporates Neuroscience as a service line
- Used shared governance processes to elect Chair, Co-Chair, Recorder, and RNs to attend Org CP Council, QS Council, and PERR Council
- Incorporated standardized unit-based and hospital wide quality and safety data into meetings
- Integrated RNs receiving report from PACU RN in CT/X-Ray after VPSR.
- Originated new admit sheet for clinic admission to 4D to facilitate transfer communication.
- Developed new method on assigning Direct Admits prior to dayshift gearing towards benefiting unit during winter census.
- First RN at ACH to become a Certified Neuroscience Registered Nurse (CNRN)

Connections

- Council members attend Org CP Council, QS Council, and PERR Council to facilitate functional pattern of communication and collaboration by expressing any ideas/concerns from and to our council.
- Council chair attends quarterly Coordinating Council
- Neuroscience Leaders help to facilitate information and council processes

Future Direction

- Encourage more staff to join our Council to ensure membership is representative of Neuroscience service line
- Encourage and provide resources/support for more staff to become certified
- Improve patient satisfaction scores
- Participate in improving our EMU program to be top-level
- Develop plan to improve safety when MEG study is taking place after seizure medications have been discontinued
- Provide teaching to facilities such as Easter Seals and Arkansas Pediatric Facility concerning Seizure safety
- Revise VEEG guidelines

Neuroscience Clinic Certification Wall



Neuroscience Unit Floor Certification Wall



Purpose

- Our purpose is to utilize shared decision making by promoting staff involvement and teamwork to achieve improvement in quality and safety in patient care and performance excellence.



Nursing Annual Report & Council Celebration Special Edition 2020

CVICU Clinical Practice, Quality, and Safety Council

Matthew Burgess, BSN, RN III, CCRN, chair and Brittany Bradley, BSN, RN IV, CCRN, co-chair



Membership

- Jordann Bolton, BSN, RN
- Brittany Bradley, BSN, RN, CCRN
- Matthew Burgess, BSN, RN, CCRN
- Caroline Clark, BSN, RN
- Ashley Dick, BSN, RN, CCRN
- John Diggs, ADN, RN
- Amy Jenkins, BSN, RN
- Janie Kane, MS, APRN, PCNS-BC
- Hannah Pillert, BSN, RN
- Courtney Potts, BSN, RN
- Diana Ragan, MSN, RN, CCRN
- Rachel Trull, BSN, RN, CCRN
- Scarlett Yates, ADN, RN, CCRN



Goals

Quality and Safety

- Patient & Employee Safety: Decrease SSI, CLABSI, and CAUTI incidence through real time practice audits and just-in-time teaching
- Engagement
 - Nurse Engagement: Nurse input into nursing practice in CVICU
 - Patient Experience: Patient and Family education, Parent involvement in care
- Innovation
 - Innovation at the Bedside: Nurse input into nursing problems.

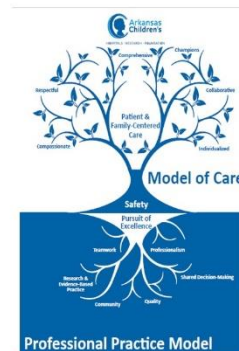


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- Due to the rapid changes needed in response to COVID, our council did not consider practice changes for several months. We were also unable to meet for several months.
- Our council kept working through email and virtual meetings. Because of virtual options, our council has actually seen increased participation.
- IV tubing labelling: addressed lack of standardization throughout the house by working with supply chain to better adopt ASTM's standards and mirror anesthesia's color coding system.
- The ACH Heart Center Department Page serves as a clinical resource to the Heart Center team and nurses throughout the hospital who may care for cardiac patients. Our council is currently reviewing and updating the department page.
- We reviewed and updated the CVICU Family Welcome and Orientation brochure, and added an electronic copy to My Chart.
- "Don't Judge Me" Box: an anonymous question box that provides evidence-based, accurate, and reliable answers to clinical questions posed by newer staff.
- Council Members serve as auditors for hand hygiene, foley maintenance, and CLABSI prevention.
- Improving handoff standardization and refining the IPASS report tool.

Connections

- Bedside nurses provide input on practice changes that impact them.
- We empower bedside nurses to have input in educational and informational materials given to families.
- Council activities connect to the Professional Practice Model's aspects of research and evidence based practice, teamwork, shared decision making, and professionalism.



Purpose

- Evaluate and update nursing practice according to evidence based practice.
- Clarify practice issues and questions.
- Review and update hospital policies pertaining to the CVICU.
- Work on improving patient safety and reducing HACs.

Task Forces/Subcommittees

- PICC Dressing Change Team
- Partnership with CVICU Family Advisory Board
- Nurse Peer Review

Future Direction

- Continue to work to improve patient safety and reduce CLABSI, CAUTI, SSI, and PI.
- Work to encourage family participation in rounds, to increase family and patient satisfaction.
- Benchmarking performance against other like units via the PC4 collaborative.



CVICU Professional Excellence/Recruitment & Retention Council

Sarah McCullough, BSN, RNIII, CCRN – Chair

Ashlyn Ferguson, BSN, RNII – Co-chair



Membership

- Sarah McCullough, BSN, RNIII, CCRN
- Ashlyn Ferguson, BSN, RNII
- Ashley Crow, BSN, RNII
- Jessica Weaver, BSN, RN, CCRN, PCM
- Sidney Moore, BSN, RNIII, CCRN
- Stephen Feero, BSN, RNIII, CCRN
- Sarah Burns, BSN, RNII
- Laci Tarrant, MSN, RNII
- Kris Jennings, RNII
- Courtney Provence, BSN, RNII
- Raquel Kendall, MSN, RN V, CCRN
- Kristi Eustice, RNII
- Hannah Johns, BSN, RNII
- Amber Simon, BSN, RN, Outreach Coordinator
- Abby Smith, BSN, RNII
- Madison Stewart, BSN, RNII
- Lauren Oglesby, APRN
- Rachel Watkins, BSN, RNIII, CCRN (Ad Hoc)

Goals

- Encourage CCRN certification among CVICU nurses
- Positively impact the community through volunteer opportunities and community outreach projects; Encourage employee involvement
- Encourage professional development by training individuals in quality improvement processes, research projects, poster presentations and podium presentations
- Improve, re-evaluate and resubmit the Beacon document in Fall 2021
- Retain nurses by providing adequate support and encouragement through preceptorship and the Mentor/Mentee program



#morethanever

- This year has been difficult to engage in normal volunteer opportunities due to COVID-19, but CVICU has found numerous other ways to give back.
- We made care packages for various ACH Delivery drivers that included snacks, waters and masks.
- For the start of school, the council ran a backpack drive to provide a local school with school supplies and backpacks for students. This year we were able to donate to the Beebe Elementary School District.
- We were able to donate 614 cans to the Arkansas Food Bank through a friendly unit competition in November.
- During the Christmas season we picked angels from a local angel tree, and staff helped provide Christmas presents for those children. This year we will be donating to a local women's shelter.
- Every year, we participate in THV 11's Summer Cereal Drive. This year the unit was able to donate \$440 to help the Arkansas Food Bank provide cereal for the children of Arkansas.



Connections

- Display professional excellence by informing CVICU nurses of the benefits of certification, celebrating CCRN certified nurses, and helping with future professional projects and presentations
- Impact the community through service projects, volunteer opportunities and donations
- Collaborate with Org Level PE/R&R by sending a member to the monthly meetings to participate and relay information
- Engage patients and families through annual reunions and heart center events
- Recognize others through the Employee of the Month Program and various unit awards
- Promote teamwork by encouraging healthy work relationships among peers



Purpose

- Recruit and retain professionals in the medical field that are new to CVICU. Promote nursing excellence and advance professional careers by providing education, encouragement and support to peers.

Task Forces/Subcommittees

- Mentor/Mentee Program - Encourages and strengthens newer nurses by establishing and maintaining positive relationships among peers. Allows opportunities for growth for both the new and experienced nurses.



Future Direction

- Increase nurse resiliency, staff satisfaction and professional excellence with events, projects and education aimed at employee development and recognition.



Nursing Annual Report & Council Celebration Special Edition 2020

ED Quality, Safety & Clinical Practice

Erin Covington, BSN, RN III, CPEN Chair



Membership

- Erin Covington, BSN, RN III, CPEN
- Eimear Melton, BSN, RN IV, CPEN
- Dyllen Wolfe, BSHCA, BSN, RN IV, CPEN
- Steven Giompoletti, BSN, RN II, CPEN
- Aimee Jorgenson-Stough, DNP, RN III, CPEN
- Lacey Walker, PCT
- Kurt Norman, MSN, RN, TCRN (facilitator)

Ad Hoc

- Becca Wilson, BSN, RN (Quality)
- Leslie Moore, BSN, RN IV, CPN, CPXP (spec RN)
- Lesa Slaughter, BSN, RN, CPEN (educator)
- Kris Saunders, P.D., M.A. (pharmacy)
- Jill Felix, BSN, RN III, CPEN (EPIC)
- Elizabeth Storm, MD

Fiscal Year 2020 Goals

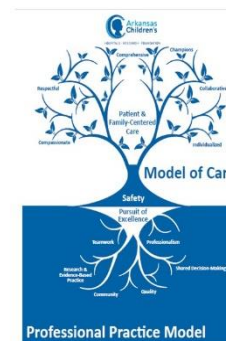
- Quality and Safety
 - Utilize updated and available pathways and educate the unit
 - Seek approval and implement updated Medication Administration policy
- Engagement
 - CHAMPS training
 - ED Patient Experience
 - Workplace Violence
- Optimization
 - Triage Audits
 - Chart Audits
 - "What to Expect" booklets for ED
 - Thank You Cards
- Innovation
 - Continue bedside reporting and "talking up" fellow staff
 - Assist in the reimagination of the ED wait areas

#morethanever

- Due to decreased staffing patterns in attempt to increase productivity in the ED during this pandemic, we have been unable to meet as a whole for several months. However, we are a small, dedicated group focused on improving the safe, quality care we provide our patients in the ED. We have managed to overcome the challenges Covid-19 has given us and stayed productive and innovative in our council.
- ED Peer Review Group updated
- Triage Alert Guidelines rewritten and implemented
- Sepsis huddles in the ED has helped to greatly increase the success in administering antibiotics to possible sepsis patients in under an hour from the time they entered the unit.
- Behavioral Health huddles have helped to start planning and readiness for the patient's time in the ED.
- Triage Audits were suspended due to changes in staffing patterns as well as decreased patient census. We have still been able to gather data for Comfort of Care group to assist treating pain better and faster in the ED..
- We developed education for patients and families on ESI guidelines and wait times in the ED and made readily available in wait areas

Connections

- Our council works closely with the ED leadership and physician's group to involve all staff in meeting the goal of the patient having the safety experience while in the ED. This is from the time they walk through the doors at security until the time they leave. We recognize the continual need for process improvement



Purpose

- ED QS & CP council is focused on the core values of Arkansas Children's Hospital: Compassion, Safety, Teamwork, and Excellence. We do this by closely watching metrics, working with leadership, and listening to staff members for innovative ideas.

Task Forces/Subcommittees

- ED Patient Experience Workgroup and Taskforce
- CHAMPS training – developed and piloted
- ED Champions (safety, quality, and Patient experience)
- Access to Care
- Comfort of Care
- Workplace Violence
- Nursing Peer Review
- Triage Audits

Future Direction

- Continue to improve the care of behavioral health patients but educating the unit and holding Behavioral Health huddles.
- Begin audits on triage alerts to assess improvement after implementing updated Triage Alert guidelines.
- Resume Triage Audits to continue gathering useful data to assess safety and accuracy in triage.
- Continue to seek approval and implementation of rewritten Medication Administration policy.
- Continue to innovate by developing and implementing new pathways to assist in providing the best care to our patients.



Nursing Annual Report & Council Celebration Special Edition 2020

Emergency Department

Profession Excellence/Recruitment Retention Council

Chair- Kristin MacLean, BSN, RN, CPEN; Co-Chair- Erin Williamson, BSN, RN, CPEN



Membership

- Lisa Boyd, BSN, RN, CPEN - Facilitator
- Kristin MacLean, BSN, RN, CPEN - Chair
- Erin Williamson, BSN, RN, CPEN - Co-Chair
- Danelle Heaggans, MSN, RN, FNP
- Alex Vail, BSN, RN, CPEN
- Taylor Ruple, BSN, RN, CPEN
- Eddie Porter, BSN, RN
- Lukas Dinstbier, BSN, RN, CPEN
- Ad-hoc: Leah Edwards, EMT-P
- Ad-hoc: Leslie Moore, BSN, RN, CPEN



Purpose

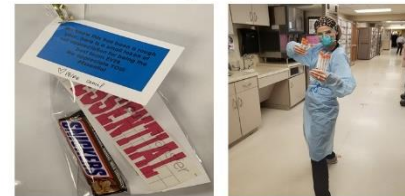
The purpose of the ED Professional Excellence Recruitment Retention council is to allow for council members to engage in a structured setting for open discussion regarding developing strategies to engage ED RN's in professional growth and improve ED staff morale to increase recruitment and retention.

Goals

- Quality and Safety
 - Increase compliance by recognizing team members for adherence to behavioral health protocols/policies and antibiotic administration within 1 hour of arrival for sepsis red patients
- Engagement
 - Encourage ED team to participate in volunteer opportunities of the council and the organization
- Optimization
 - Team resilience
 - Encourage team member wellness
 - Decrease burnout with focus on providing support for secondary trauma
 - On-boarding
 - Implementation of onboarding booklets and welcome packets
 - Continue to grow ED mentor program
 - Improving the ED preceptor program
 - Strengthening the departmental orientation
 - Retention
 - Providing professional excellence growth opportunities and recognition for exceptional quality care

#morethanever

- COVID provided challenges for our council as we were unable to meet monthly to allow the ED to remain within set productivity measures. Several projects were put on hold, but in September we were able to meet and get a plan to finish out the end of the year strongly.
- We have seen the ED rise up during the COVID pandemic and continue to work together for the betterment of the children of Arkansas
- We were able to celebrate several employees for high quality care; implemented "Terrific Team Player"
- Provided goodie bags to all ED staff as a way to spread joy during the COVID pandemic! #essential
- Began sending personalized cards to each new hire to welcome them to the team
- Works in progress
 - Stocking the EMS room to support our EMS crews
 - Providing vouchers to support the team-members seeking CPEN



Connections

- Council meetings are structured to allow for discussion on each topic by entire council team and come to a conclusion together
- Organization of drives to collect supplies for Ronald McDonald House and Social Work
- Participation in the Nursing Open House



Future Direction

We are focusing on the following:

- Increasing the retention rate of ED team members
- Enhancing employee compliance for behavioral health protocol/policies
- Increasing morale and staff support during COVID pandemic
- Continuing to participate in volunteer opportunities to bond the team and support the hospital
- Continuing to improve onboarding of new team members
- Supporting team members in their endeavor to become nationally certified

Task Forces/Subcommittees

- ED Preceptor task force
 - Focusing on restructuring ED specific preceptor orientation and education
- Onboarding task force
 - Mentor/Mentee program
 - Development of ED Quick Guide as a resource to the ED team
- Hand Hygiene
 - Recognition of top observer





Nursing Annual Report & Council Celebration Special Edition 2020 Hematology/Oncology Services Council

Chair: Victoria Filipek, BSN, RN, CPHON, CPN

Co-Chair: Emily Willems, BSN, RN, CPHON



Membership

- Amy Allen, MSN, RN, NE-BC-Nursing Director
- Sara Neal, BSN, RN, CPHON, CPN-Facilitator
- Sandy Smith, BSN, RN, - Member
- Paige Ibbotson, BSN, RN-Member
- Ramon Garcia, BSN, RN-Member
- Ash-leigh Herlacher, BSN, RN, CPN-Member
- Traci Hackler, RN, CPHON-Member
- Lora Parker, BSN, RN, CPHON-Member
- Olivia Holmes, PCT-Member
- Kara Burge, LCSW-Member
- Allison Jiles, CCLS-Member
- Lindsay Billings, BSN, RN, CPN, CPHON- Member
- Karly Brooks, BSN, RN- Member
- Emily Giboney, BSN, RN, CPN- Member
- Devin Nelson, BSN, RN- Member
- Allison Porter, BSN, RN, CPN- Member
- April Robinson, BSN, RN- Member
- Brook Scalzo, BSN, RN, CPN- Member
- Misty Scott, US- Member
- Cory Davis, Clinic COM- Member

Purpose

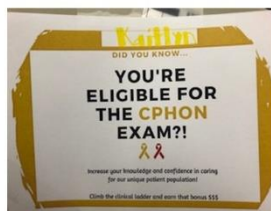
We are a specialized team dedicated to providing family-centered care with hope for healing.

Task Forces/Subcommittees

- Stress/Resiliency Task Force
 - Sunshine committee continues to organize celebration of birthdays, certifications, and nurses week.
- Bedside Report Committee: created mandatory education PowerPoint. Go live for bedside report to be done on all shifts was 9/1/19. Audits to be done.

Fiscal Year 2020 Goals

- Safety:
 - Decrease CLABSI rate by 50%
 - CLABSI rate for FY19 =6 and in FY 20=3
 - Decrease nurse driven chemotherapy administration errors
 - Started monthly chemo error reports
 - Chemo errors FY19=73, FY20=49
 - Decreased chemo errors by 33%.
- Teamwork
 - Increase patient satisfaction top box scores for "would recommend" in FY 20.
 - Increased from 81.3% in FY19 to 88.6% in FY20.
- Excellence
 - Increase number of CPHON certified nurses
 - Put postcards in eligible nurses mailbox notifying them they were ready to sit for certification exam
 - In FY20 we increased our certified nurses by 10%.
 - Provided 3 CPHON review courses since June 30, 2018.



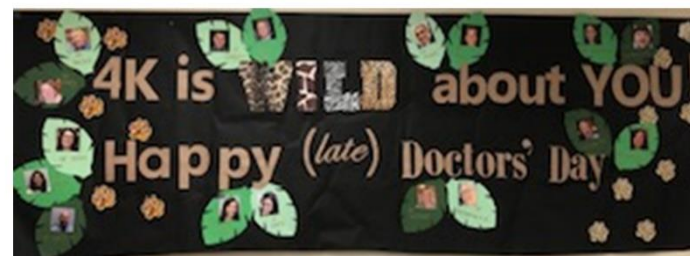
#morethanever

- On boarded two new Versant nurses during COVID
- Utilized crossed trained staff within service line to accommodate lower inpatient volumes and fulfill staffs FTE
- Celebrated ancillary staff during social work appreciation week
- Celebrated doctors day and hosted ice cream party in celebration of onboarding our new Fellow.



Connections

- **Safety, Pursuit of Excellence, & Quality:** Bedside nurses and council members represent unit on all organizational councils & HAC committees (CLABSI, CAUTI, VTE, Pressure Injuries, PIVIE, Re-admit HAC).



Future Direction

- Quality and Safety
 - Decrease CLABSI
 - Educate patients/families on the importance of good oral hygiene and CHG bath wipes how it relates to CLABSI.
 - Interactive whiteboards on patient bathroom doors for increase communication and education between team and family
 - Hygiene audits.
 - K- Card audits for inpatient and outpatient.
 - Active members of SPS CLABSI Workgroup
 - FACT accreditation
 - Increasing transplant education for the bedside nurse for current and future transplants to standardize practices in anticipation for
- Engagement
 - Patient Experience: Increase the "would recommend" benchmark question on our patient survey.
 - Continuing work on bedside report education and expectation. Go Live 9/1/19
- Innovation
 - Increase MYCHART sign-ups in the Hem/Oncology population
 - Educate families and employees on value of using MYCHART.



Nursing Annual Report & Council Celebration Special Edition 2020

APP Council



Alicia Cook, MNsc, APRN, CPNP-AC, Chair and Coordinator; Sally Puckett, MSN, APRN, CPNP-PC: Co-Chair

Membership

- Alicia Cook, MNsc, APRN, CPNP-AC, Chair and Coordinator
- Sally Puckett, MSN, APRN, CPNP-PC: Co-Chair
- Brittani Arnold, MSN, NNP: NICU Rep
- April Carpenter, MNsc, APRN, CPNP-PC: Coordinator
- Ashley Conger, MSN, NNP: NICU Rep
- Cheree Crawley, MSN, APRN, CPNP-PC: PICU/Burn Rep
- Sabra Curry, MSN, APRN, NNP-BC: Coordinator
- Michelle Davis, MNsc, APRN, CPNP-PC: ED Rep
- Brittany Fuls, MSN, APRN, CPNP-AC: Outpatient Rep
- Erika Funmaker, MNsc, APRN, FNP: ED Rep
- Suzanne Huetter, MNsc, APRN, CPNP-PC: Surgical Rep
- Anne Hiegel, MNsc, APRN, CPNP-PC: Outpatient Rep
- Leslie Humiston, MNsc, APRN, CPNP-PC: Coordinator
- Bonnie Kitchen, MNsc, APRN, CPNP-PC, CPNP-AC: Coordinator
- Kathryn Lehner, PA-C, MSPAS: PA rep
- Kellie Lisenby, MNsc, APRN, CPNP-AC: Surgery
- Melissa Mantz, MSN, APRN, CPNP-PC: Inpatient rep
- Lou Anna McAdams, MNsc, APRN, NNP-BC, PNP-BC: Coordinator
- Keri Norris, MSNA, APRN, CRNA: CRNA Rep
- Megan Osam, MNsc, APRN, CPNP-PC: Coordinator
- Crystal Paparic, MNsc, APRN, CPNP-PC: Coordinator
- Angela Roberson, MNsc, APRN, PCNS-BC, FCNSI: CNS Rep
- Kristen Sheppard, MNsc, APRN, CPNP-AC, CPNP-PC: Coordinator
- Haleigh Shumate, MSN, APRN, CPNP-PC: Inpatient Rep
- Ashley Wright, MNsc, CPNP-AC, CPNP-PC: CVICU Rep
- Rachel McKnight, MNsc, CPNP-AC, Coordinator

The purpose of the APP Council is to provide a forum for all APPs practicing on the ACH campus to discuss professional and practice issues. In addition, this council is responsible to network with leaders both inside and outside of the organization to create and implement plans which address these issues. The council also facilitates communication among all APPs.

Goals

Quality and Safety

- Review Nursing Board Reports quarterly

Engagement

- Streamline hiring and credentialing process
- Develop and implement APP Compensation Plan
- Improve APP Orientation process
- Improve APP Mentoring process

Optimization

- Overhaul APP Resources Webpage
- Formalize RQI process/requirements for APPs

Innovation

- Participate in the writing of the Magnet Document concerning APPs

#morethanever

- Implemented virtual platform for APP Council meetings
- APPs staffed COVID Drive-Thru screenings
- Designed, implemented, and staffed COVID Telemedicine visits
- APPs continue to meet the dynamic and emergent needs of the hospital throughout the COVID pandemic
- The APP Council, in the midst of COVID19, has been able to roll out a new formalized orientation and mentoring process to onboard new APPs
- APP Grand Rounds has been re-accredited to provide continuing education credit to APPs through a virtual platform with increased access for all APPs across campus

Connections

- Work together with nurses at the unit level to address clinical practice, quality and safety, professional excellence, and recruitment and retention on respective committees
- Serve on multidisciplinary leadership teams and task forces at the unit level to accomplish unit, department and organizational goals on a regular basis
- Arkansas State Board of Nursing networking for the purpose of informing APPs of any new changes to prescribing laws and regulations
- Assisting the ACH Academic Director of Nursing with the coordination of APP students and preceptors from Colleges of Nursing
- Participating in research efforts to improve health care outcomes for infants and children
- Connect Council activities to the Professional Practice Model, especially during the COVID pandemic.

Task Forces/Subcommittees

- Orientation Committee**
 - Goal to improve and streamline the onboarding process for all new APPs
- Mentoring Committee**
 - Goal to connect all new APPs with a veteran APP before they have even set foot on campus as an ongoing resource and mentor
- APP Grand Rounds Committee**
 - Goal to accredit educational series for continuing education and find ways to offer/reach all APPs through this platform



Future Direction

- In FY21, in alignment with the ACH Strategic Plan, our APP Council will work toward:
 - Providing the most up-to-date, best practice and safe APP care to all patients by having a monthly review of safety events and new hospital policy during the APP Council meeting
 - Continuing to encourage the expansion of APP Telemedicine opportunities for the children of Arkansas so that no child is without convenient and local access to care in Arkansas
 - Continue to promote and advocate for diversity, inclusion, and equity within the APP Council, but also, throughout the hospital councils and leadership teams



Nursing Annual Report & Council Celebration Special Edition 2020

Organizational Clinical Practice Council

Leslie Easley, BSN, RN, CPN / Ellen Mallard, DNP, APRN, ACCNS-N, RNC-NIC



Membership

- Robyn, Abernathy
- Stephanie Benning
- Susan Bibb
- Brittany Bradley
- Joanna Carpenter
- Thad Carter
- David Clausung
- Cynthia Covert
- Erin Covington
- Kendyl Doan
- Leslie Easley
- Shirley Elmendorf
- Jenny Janisko
- Karen Jones
- Janie Kane
- Jessica Keisler
- Bonnie Kitchen
- Allie Lee
- Shea Long
- Nikki Mallaby
- Ellen Mallard
- Missie Martinous
- Ginger McEarl
- Brittany Mitchell
- Kelly O'Cain
- Kim Parr
- Amy Ramick
- Emma Rhoads
- Angela Roberson
- Kimberly Wehrle
- Stephanie White
- Nicole Whiteaker
- Emily Willems
- Candace Williams

Purpose & Goals

- Promote consistency of care across the continuum
- Oversee and recommend changes to current practice based on best available evidence
- Explore and implement innovative practice changes
- Establish functional patterns of communication between councils and committees, task forces, and groups
- Evaluate outcomes relative to clinical practice
- Continually assess & evaluate all work and the impact to strategic plan, includes goal-setting

Task Forces/Subcommittees

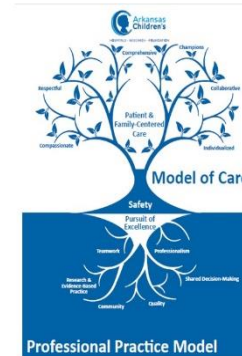
- Black African American Employee Resource Group (BAAERG)
- Care Plan Taskforce
- Hospital Acquired Condition (HAC) teams (e.g. catheter-associated urinary tract infection (CAUTI), central line-associated blood stream infection (CLABSI))
- Diversity and Inclusion Committee
- Educator Council
- Director's Council
- APRN Council
- Value Analysis Committee (VAC)
- Vascular Access Team (VAT Team)
- EPIC Optimization

#morethanever

- Due to COVID, Org CP limited interaction due to meeting restrictions & environmental stressors. Incorporated virtual/in-person meetings to increase involvement, encourage engagement, & complete necessary changes within the organization.
- Approved multiple EPIC changes to assist with workflow and streamline documentation for the following:
 - Pain Reassessment
 - Clubbing Assessment Row
 - In & Out Straight Cath
 - Extremity Circumference Assessment Row
 - Bone Flap Assessment Row
 - Running Total Number of IV Sticks
 - Infusaport
 - Pain Management Education
 - Enteral Tube
 - Endotracheal Tube Repositioning
 - BP Cuff Size
- Coordinated with Org Quality/Safety council standardizing the Pre-Procedural Checklist
- Approved the use of aromatherapy for patients/families throughout hospital
- Actively working with BAEERG to facilitate diversity in hair care

Connections

- Submissions are reviewed and directed to the Org CP Council following discussion & delegation at Org Steering Committee meetings. If/when approved, information is disseminated to various stakeholders via the CAB council representatives and other shared governance councils.
- All work completed by this council is a collaborative effort with other committees and groups. Our joint effort utilizes research and evidenced-based practice to promote excellent and comprehensive care.



Future Direction

- Continue innovating keeping members engaged and active in shared governance
- Promote positive change in pursuit of excellence
- Identify areas of improvement & collaborate to create consistent care across the care continuum



Nursing Annual Report & Council Celebration Special Edition 2020

Nursing Research Council

Chair: Amy Eichenlaub, RN BSN CPHON

Co-Chair: Marlene Walden, PhD APRN NNP-BC CCNS FAAN



Membership



Amy Eichenlaub, Chair



Marlene Walden, Co-Chair

Nursing Department

- Stephanie Benning, MSN APRN PCNS-BC CPN
- Amy Eichenlaub, BSN RN CPHON
- Amy Huett, PhD RN NP-BC
- Dalton Janssen, MSN RNC-NIC
- Debra Jeffs, PhD RN NP-BC FAAN
- Aimee Jorgenson-Stough, DNP APRN CPNP CPEN
- Janie Kane, MS RN PCNS-BC
- Austin Lovenstein, MBA MA BS CRS
- Ellen Mallard, MSN APRN ACCNS-N RNC-NIC
- Leslie Moore BSN RN RNP CPN CPXP
- Amy Ramick, DNP RN ACNS-BC NP-BC
- Angela Roberson, MNSc APRN PCNS-BC
- Marlene Walden, PhD APRN NNP-BC CCNS FAAN
- Jay White, DNP APRN CPNP-AC CPN

Arkansas Children's Research Institute

- Amanda Holloway, CHRC
- Beverly J. Spray, PhD
- Jocelyn Wright, BSN RN CCRP

Library

- Lindsay Blake, MLIS

Pastoral Care

- James Henrich, ThM

Pediatric Medicine

- Rebecca Cantu, MD MPH

Rehabilitation Department

- Mandy Yelvington, MS OTR/L BCPR BT-C

Respiratory Therapy

- Denise Willis, MS, RRT-NPS AE-C

Goals

- Ensure CITI training (research ethics and compliance training) for all Research Council members
- Provide education at Research Council meetings
- Partner with hospital-acquired condition teams (HACs) and clinical area-based councils (CABs) to implement best practices to improve patient outcomes
- Celebrate scholarly activities of nursing staff during Pediatric Nurses Week
- Review research protocols prior to Institutional Review Board (IRB) submission as applicable
- Review Evidence-based Practice (EBP) Summaries completed by the Nursing Research Department
- Increase access to evidence-based resources
- Increase integration of research through recruiting interprofessional staff and clinical nurses to the council

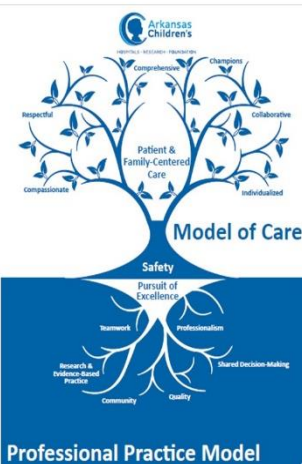
Connections

COVID Challenges and Successes

- Transitioned council meetings to virtual to ensure the safety of members
- ACRI virtual town hall meetings every other week
- ACRI oversight of clinical studies in progress:
 - Virtual Reality for Burn Wound Care Pain in Adolescents
 - Impact of Animal Assisted Intervention in Hospitalized Children with Acquired Brain Injury undergoing Pediatric Rehabilitation
- Suspended enrollment – March 2020
- Safety plans submitted to ACRI – June 2020
- Approval to resume - August 2020
- Collaboration across AC system to create new research/project policy and new project app

Future Direction

- More fully integrate research across the AC system



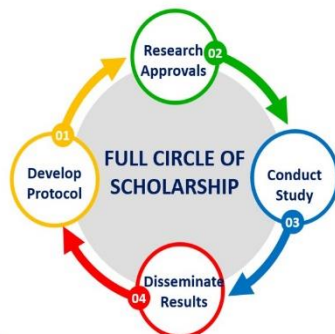
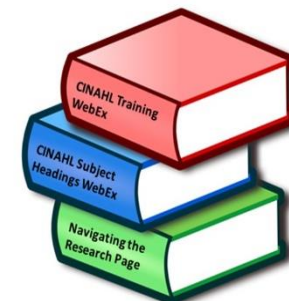
#morethanever

- Research accomplishments: Full circle from approval to dissemination of results

- Reviewed Research Protocols

- Organized Education Sessions

Nursing Research Studies Reviewed





Nursing Annual Report & Council Celebration Special Edition 2020

Special Staffing Team Council

Amanda Andrews, RNII, Chair

Mandy Jones, RNIII, Co-chair



Membership

- Amanda Andrews, RNII- Chair
- Mandy Jones, RNIII- Co-chair
- Candace Caldwell, RN- Recorder
- Melissa Clark, RNIV- Facilitator
- Leslie Easley, RNIV
- Imoni Adams, RNII
- Kim Watts, RNIII
- Jennifer Harper, RN
- Tonia Ellis, RNIV
- Amber Speer, RNIV
- Wheezie Smith, RNIII
- Brittany Moyers-Logue, RNIV



Goals

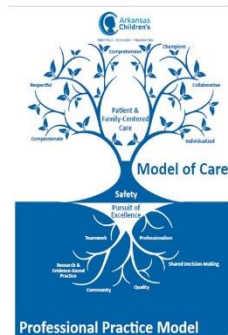
- Assess current practices hospital-wide for safety and evidentiary practice, and make suggestions for change that benefit all units.
- Serve as role models of nursing care and clinical experts that serve as resources to all ACH staff.
- Contribute to our greater community by making donations to local drives and volunteering at community events.

#morethanever

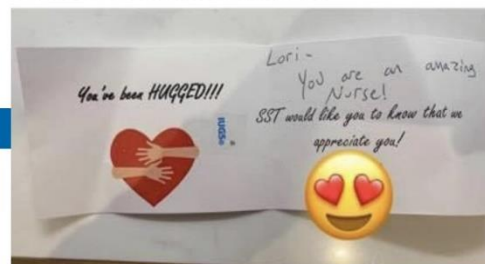
- Amanda Andrews, RN and Mandy Jones, RN volunteered to go with other nurses from ACH and UAMS to NYC during the COVID pandemic.
- Our council had to come up with creative ways to keep members engaged and involved. We have virtual staff meetings on social media and council meetings via email.
- Project to boost morale for all ACH staff- Hand out Hugs.
- Collections of masks, snacks, and other pick me ups were donated to nurses working on the front lines in NYC.

Connections

- Describe how your Council demonstrates the work of shared decision making.
- Connect Council activities to the Professional Practice Model, especially during the COVID pandemic.



Days like today at work are NOT fun! 😞 Been feeling the nurse burn out lately, so I hope the person that left this on my computer knows how much this meant and was appreciated! You know who you are!



You, Nora Kate Currey and 63 others · 15 Comments

Love

Comment

Purpose

- The Special Staffing Team council strives to engage staff in fulfilling and meaningful employment by attracting and retaining talented nurses who are highly skilled and exemplify the ideals of the ACH model of care.

Task Forces/Subcommittees

- Hand out hugs

Future Direction

- Continue with creative meeting strategies.



Shared Decision Making 2021 Council Posters

(pages 45 – 59)

ABOUT COUNCILS

WHAT IS A COUNCIL?

A council is an interdisciplinary work group designed to achieve improved quality and safety in patient care as well as performance excellence.

WHAT IS THE PURPOSE OF A COUNCIL?

A council's purpose is defined as meaningful and purposeful work impacting the quality and safety of care among the professional interdisciplinary team and through professional practice delivery for patient and family centered care.

WHO CAN JOIN A COUNCIL?

Nurses of all clinical levels are welcome to join clinical area-based shared decision-making councils. Clinical area-based council members represent their areas on organizational-level councils. Other team members — like therapists/ ancillary team members, patient care technicians, and providers — can serve various roles on councils, too.

WHAT IS THE NURSING ROLE ON A COUNCIL?

Given the unique role of nurses and the accountability for coordination of care among disciplines and ensuring continuity of care across the patient care continuum, the shared decision-making structure serves as a key method for promoting professional practice and patient and family centered care.

COUNCIL HISTORY & GOALS

WHEN DID ACH COUNCILS BEGIN?

In 2009, a group of nursing leaders and nurse clinicians from across the organization gathered over 18 months and created the shared decision-making model. Launched in mid-2010, the purpose was to provide an organized, interdisciplinary approach led by nurses to advance professional practice and improve the quality of patient care in order to achieve the goals of the nursing strategic plan and ensure excellence in patient care outcomes.



ARE THE COUNCILS EFFECTIVE IN ACHIEVING THE SHARED DECISION-MAKING GOALS?

Over 300 council leaders and members, including 20% of the nursing workforce participated in a 2020 council survey, a significant predictor of engagement in shared governance. Council member feedback over time has resulted in modifications in the shared governance structure and bylaws to enhance effectiveness.

BENEFITS OF JOINING

PATIENT FOCUSED

Councils provide nurses and staff with opportunities to present new ideas or to problem-solve issues related to quality and safety, clinical practice, and recruitment and retention. Initiatives that improve patient safety and family-centered care, such as giving bedside report, are proposals that originated in clinical area-based councils.

CAREER FOCUSED

Council participation also adds to a nurse's portfolio in order to advance on the clinical ladder. They create opportunities for networking, developing leadership skills, and promoting professional career development.

TEAM FOCUSED

Additional benefits include celebrating nurses, recruiting new nurses, and influence the education of student nurses. Councils promote interdisciplinary teamwork.

COMMUNITY FOCUSED

Many of the councils participate in local volunteer opportunities. It is a great way to give back to others, help improve the community, meet new friends, learn a new skill and so much more!



Nursing Annual Report & Council Celebration

Special Edition 2021

2B Burn Center Council

Christine Grauer, RN IV, BSN, CCRN: Chair & Mandy Yelvington, MS, OTR/L, BCPR, BT-C: Co-Chair



Membership

- Lizzie Alvarez, RN II, BSN
- Elissa Annesley-DeWinter, RN IV, CCRN
- Kendyl Doan, CE, BSN, CPN
- Alexis Edwards, RN II, BSN
- Georgia Franklin, RN II, BSN (Alternate)
- Courtney Gentry, RN II, BSN
- Jenny Janisko, DNP, RN, NE-BC
- Danie Mashburn, RN II, BSN
- Helen McLennon, RN II (Recorder)
- Stephanie Rice, RN II, BSN
- Pat Scott, Burn Tech (Ad Hoc)
- Nikki Spriggs, PCM, BSN, CCRN (Facilitator)
- Lauren Whitby, RN II, BSN
- Gretta Wilkinson, RN
- Ryland Walt Steele, MPAS, PA-C

Purpose

The purpose of our council is to engage in decision making on clinical practice, quality and safety, professional education/excellence, and recruitment and retention specifically related to the Burn Center.



Goals

Quality & Safety:

- Patient & Employee Safety**
 - Decrease CLABSI and CAUTIs

Engagement:

- Nursing Retention & Workforce Planning**
 - Sponsor Versant Welcome Packs
 - Nurse Scheduling Group collaborates with nursing leadership to modify scheduling process to promote equitable weekend rotation and skills mix
- Nurse Engagement: Healthy Work Environment/Celebrate Accomplishments**
 - 2021 Nurses Week gift of scrub caps
 - Monthly themed Shout-Out Bulletin Board for staff celebrations and team building



Optimization

- Team Resilience**
 - Design custom t-shirts for all Burn Team members to order to boost team morale

Innovation

- Ongoing Magnet Readiness**
 - Identify nurses who are eligible to take certification exams and encourage use of study materials in 'Certification Library'

Outcomes #MoreThanEver

Quality & Safety:

- Patient & Employee Safety**
 - Celebrated > 365 days CLABSI-free with quizzes, a game, and treats



Engagement:

- Patient Experience**
 - Patient satisfaction scores at 85.6% average for FY 2021 compared to 84.4% average for 2020; five months with scores 100%
 - Ordered couches for all patient rooms to provide comfortable family accommodations

Optimization

- Team Resilience**
 - Nurse-led 'Debriefing Sessions' after deaths, large burn admissions, escalations of care, and codes provided staff with support
 - Burn Debriefing Facilitators – four frontline nurses and three nurse leaders – developed guidelines, a tool for debriefing, and survey for an Improvement U project

Innovation

- Innovation at the Bedside**
 - Introduced use of PureWick external female urinary catheter system to decrease CAUTIs while still capturing accurate urine output

Connections

The Burn Center Council supports collaborative and comprehensive evidence-based practice with a focus on high quality patient and family centered care through multidisciplinary teamwork and promotion of shared decision making.



Task Forces/Subcommittees

- HAC Group Task Force
- Nurse Scheduling Task Force

Future Direction

- 2021 Pediatric Nurses Week with socially-distanced celebrations and activities
- Recognition activities for staff achievements and special events
- Engagement with physician assistant to create educational pamphlet for patients and families to view on admission



Nursing Annual Report & Council Celebration Special Edition 2021

3C Intermediate Care Unit Council

Bethany Byrne BSN, RN – Chair Hannah Cummings BSN, RN – Co-chair



Membership

- Bethany Byrne BSN, RN – Chair
- Hannah Cummings BSN, RN – Co-chair
- Carla Mace BSN, RN – Recorder
- Jessi Brown RN, CPN
- Amanda Autin BSN, RN
- Alli Hammer BSN, RN, CPN
- Lisa McDougal BSN, RN
- Karina Salmeron-Zuniga BSN, RN
- Rachel Stewart BA, CCLS
- Crystal Tucek BS, RRT
- Kendyl Doan BSN, RN, CPN – Facilitator



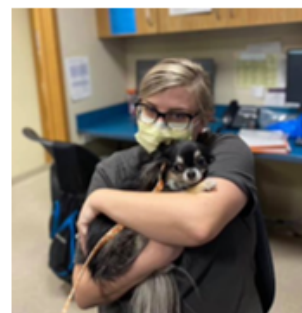
Fiscal Year 2021 Goals

- Quality and Safety
 - Continue excellent HAC trends
 - Meet preventable harm index regarding pressure injuries, PIVIEs, and escalation of care
- Engagement
 - Patient Experience: adaptation and promotion of bedside report and hourly rounding
- Optimization
 - Financial stability: appropriate resource utilization to reduce waste and lost resources



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- Covid Challenges**
 - We have responded to the challenge of continued necessity for social distancing by continuing council work via teams meeting.
 - Current covid vaccination compliance of 92%
 - Addition of 3 negative pressure rooms to accommodate rising covid cases this summer
- Celebrations/Success Stories**
 - Daisy Nominee: Shirley Pugh
 - Nursing Excellence Award Nominee: Shannon Wyatt for Daisy Lifetime Achievement and Spirit of Inquiry
 - Educator of the year finalist: Kendyl Doan
- Active projects**
 - Quality improvement project regarding CVL bundle and CHG bath compliance is underway
- Outcomes**
 - Giveback project during the holiday season with donations to operation Christmas child
 - Continued excellent HAC trends with no VURI, VAE, or CAUTI reported in FY21



Connections

- Shared Decision Making**
 - Bedside nurses and council members represent unit on all organizational HAC committees
 - PERR council
 - CAUTI, CLABSI, PIVIE
 - Daisy award committee
 - Quality/Safety & Clinical Practice councils
 - PUP/SKIN CHAMP



Purpose

- Improve patient safety at unit level, empower nurses to integrate quality initiatives, improve nurse retention and to deliver education and safe practice for our nurses, patients, and families.

Task Forces/Subcommittees

- Hand Hygiene
- Sunshine Fund
- Employee of the Quarter

Future Direction

- 3C council will formulate council plans once the nursing strategic plan is announced for 2022, with an emphasis on improving staff retention and continued top priority of promoting patient safety and experience.



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3D/3E Surgical Quality & Safety, PERR Council

Chair: Missie Martinous, BSN, RN, CPN/Co-Chair: Melissa Gearhart, BSN, RN, CPN



Membership

- Valerie Hamric, MSN, RN, CCRN- Director
- Nicole Whiteaker, BSN, RN, CPN- PCM, Facilitator
- Missie Martinous, BSN, RN, CPN- Chair
- Melissa Gearhart, BSN, RN, CPN- Co-Chair
- Beth Conley, BSN, RN, CPN- Recorder
- Jera Shepard, BSN, RN, CPN
- Kelly O'Cain, BSN, RN, CPN
- Allison Mooney, BSN, RN, CPN
- Sydney Milby, BSN, RN, CPN
- Connie Bell, BSN, RN, CPN
- Ginger King, BSN, RN, CPN
- Ashley Gober, BSN, RN

Purpose

- The 3D/3E Quality & Safety, PERR Council is dedicated to utilizing ideas and strategies to improve patient safety, quality of care, and family experience.

Goals

- Quality and Safety
 - Increased compliance and documentation of ADLs for all patients on unit for 24hr with real-time ADL forms/audits
 - Requested creation of EPIC missing measurement report to decrease number of missing measurements
- Engagement
 - Council input/survey for changes to holiday groupings. Tiered system implemented for number of weekend shifts related to years of employment
 - Encouraged responses for employee engagement survey. Discussion of ways to enhance work/life balance and decrease stress of employees.
 - Monthly review and discussion of NRC scores and comments to improve patient satisfaction
- Optimization
 - Major changes to leadership team/staffing on the unit lead to members adapting to additional roles.
- Innovation
 - Implemented 'bedside report champions' to improve compliance of practice change to bedside handoff.
 - Invited Amy Huett to present at council meeting in future to prepare for Magnet readiness

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- COVID presented challenges with being able to meet as a group, and to participate in community volunteer projects.
- The council hosted an underwear drive on the units to collect personal items for patients/families.
- Standardized the placement of emergency drug sheets in patient rooms for consistency and visibility.
- The council created a Teams group and transitioned to virtual meetings.
- Marked improvement of bath/linen/oral care completion and documentation for patients admitted greater than 24 hours since implementation of real-time forms/audits.

Task Forces/Subcommittees

- Representative joined the Inpatient Experience Taskforce Group.
- Frontline participation on the following HACS: CAUTI, CLABSI, PIVIE, PI, VTE, SSI, Readmissions, Slips/Falls, Overexertion, Exposures and Behavioral

Connections

- Group meetings and cascading information from organizational level meetings to the unit level
- Facilitated physician rounding while limited visitor restrictions were in place by offering face-time to additional caregiver.



Future Direction

- The 3D/3E council plans to collaborate with our orthopedic physician team to increase interdisciplinary knowledge and communication with the goal of improving patient safety, quality of care, and family experience
- Will continue to review NRC comments and scores to improve patient satisfaction
- Will evaluate tiered system for weekends and changes to holiday groupings for employee engagement and retention.



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3K Clinical Practice/Quality and Safety Council

Brittany Lequieu, Chair, RN III, BSN, CPN



Membership

- Angela Scott MNSc, RN, APRN, PCNS-BC
- Brandei Moragne RN IV, BSN, PCM, CPN
- Crissy Benson RN IV, BSN, CPN
- Courtney Johnson, RN II, BSN
- Caitlin Jackson, RN II, BSN
- Nikki Mallaby RN III-NIC
- Kelsey Lyle RN II, BSN
- Glenn Gross RN II, BSN
- Kelsey Kidd RN II, BSN
- Hayley Baker RN II, BSN

Purpose

- The purpose of Clinical Practice Quality and Safety Council is to assure excellence in patient and family centered care by promoting consistency of care across the continuum, evaluating practice utilizing internal and external benchmarks; identifying safety issues in the care environment; revising current practice based on the best available evidence using quality, safety, and process improvement tools; proactively implementing practice changes.

Goals

- Prepare for Joint Commission visit
- Provide skills fair for staff
- Educate staff on progressive mobility, increase understanding and implementation
- Identifying gaps in care and safety and intervening (ex. Increase in DVTs associated with femoral PICCs)

Celebrations

- Daisy award winner: Lana Ball RN II, BSN
- Top 40 nurses under 40: Kristan Cooper RN IV, BSN, CPN, CWOCN



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- One of our biggest challenges as a council since the pandemic is being able to have productive meetings. Specific challenges have been technical difficulties, not many agenda items, and other councils/committees not meeting leading to stagnation in our committee work.



Story of Resilience

- In contrast with the struggle of overstaffing we faced last year, 3K staff has experienced staffing shortages that has led us to increase our patient to nursing ratio and staff has shown resilience now #morethanever. Teamwork and dedication to our patients and this organization has been manifested during suboptimal conditions in our workplace. Safety and quality remain at the forefront of our minds, as well as our passion for the patients and the team that we love.

Future Direction

- Plan for virtual/socially distant skills fair.
- Ongoing communication with DVT/VTE HAC group surrounding reduction of DVTs and clotted PICC lines in our patient population.



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Ambulatory Council

Chair Devan Shaw, RN, CPN/Co-Chair Kimberly Wehrle, BSN, RN, CPN



Membership

- Laura Buse, MSN, RN, NE-BC
- Karen Kelley, BSN, RN, CPN
- Stephen King, Physical Therapy
- Jill Lasley, RN
- Tera Loyd, BS, RRT-NPS
- Kelley Means, BSN, RN, CPN
- Tammy Mobley, RN
- Tiffany Moore, RN
- Brook Scalzo, BSN, RN, CPN
- Devan Shaw, RN, CPN
- Terri Songer, MSNc, RN, CNML
- Jonna Turner, BSN, RN
- Kimberly Wehrle, BSN, RN, CPN
- Hailey Wood, BSN, RN

Purpose

As a designated group council, members engage in discussion and decision making on clinical matters within like services areas to gain consistency, integration and standardization within Ambulatory Care.

Goals

- To support the ACH and Patient Care Services mission, vision and strategic guidelines achieving quality and safe family centered care.
- Magnet readiness, staff engagement, patient safety and excellent patient experiences.
- Develop workflow for Transition of Care.
- To further develop our mentor program.

Task Forces/Subcommittees

- Currently developing a task force that will include members of Ambulatory Council, parents from Family Advisory Board (FAB), and teenager patients regarding Transition of Care to Adult Care.

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- Our council has continued to face obvious challenges of virtual meetings due to COVID-19. This has been exceptionally challenging during the recent COVID-19 surge due to staffing.

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- COVID-19 Vaccination Success: The COVID-19 vaccine clinic in Children's Hall every Friday has been very successful.
- We continue to work on our mentor program.
- 10-5 Rule Implementation
- In the works:
 - Workflow for Transition of Care to Adult Care across Ambulatory.



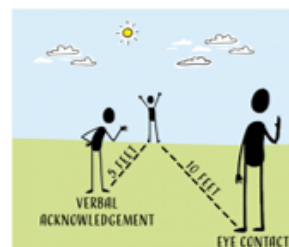
DO YOU KNOW ABOUT THE 10-5 RULE??

We can work together to create a welcoming environment by implementing the 10-5 rule.

TRY THIS: When you encounter another employee, patient & family, or guest on our campus try the following:

at 10 feet → Make eye contact, smile, and/or nod to those you encounter

at 5 feet → Acknowledge with a greeting. Do they look lost? If so, ask if you can help!



Brought to you by Ambulatory Council.

Connections

- Our council is interdisciplinary in order to achieve improved quality and safety in patient care and performance excellence.
- We promote staff involvement, teamwork and consistency across departments.
- Complimenting the formal organizational reporting structure, our members represent and report back to their work areas. Progress from our council is shared in Coordinating Council.
- Information from Coordinating Council is in turn shared with members of our council by the Chair and Co-Chair. This is shared governance in action.

Future Direction

- Continue to work on employee engagement by adjusting strategies based on survey feedback.
- To grow our mentor program which can help have a positive impact on staff retention.
- We will continue to work to develop strategies to help with patient satisfaction.



Nursing Annual Report & Council Celebration Special Edition 2021

APP (Advanced Practice Provider) Council

Chair: Alicia Cook, MNSc, CPNP-AC, Co-Chair: Sally Puckett, MNSc, CPNP-PC



Membership

- Alicia Cook, MNSc, APRN, CPNP-AC, Chair
- Sally Puckett, MNSc, APRN, CPNP-PC, Co-Chair
- April Carpenter, MNSc, APRN, CPNP-PC
- Haleigh Shumate, MSN, APRN, CPNP-PC
- Katrin Wooley, MNSc, APRN, CPNP-AC
- Jennifer York, MNSc, APRN, CPNP-AC
- Suzanne Huettner, MNSc, APRN, CPNP-PC
- Anne Hiegel, MNSc, APRN, CPNP-PC
- Brittany Fuls, MSN, APRN, CPNP-AC
- Angela Roberson, MNSc, APRN, PCNS-BC
- Whitney Tappan, MNSc, APRN, CPNP-AC
- Kumar Patel, PA-C, MSPAS
- Brittani Arnold, DNP, APRN, NNP-BC
- Ashley Daniels, MSN, NNP
- Keri Norris, MSNA, APRN, CRNA
- Kathryn Lehner, PA-C, MSPAS
- Eva Barlogie, PA-C, MSPAS
- Erika Funmaker, MNSc, APRN, FNP
- Emily Davis, MNSc, APRN, CPNP-AC
- Rachel McKnight, MNSc, APRN, CPNP-AC
- Sabra Curry, MSN, APRN, NNP-BC
- Crystal Paparic, MNSc, APRN, CPNP-PC
- Kristen Sheppard, MNSc, APRN, CPNP-AC, CPNP-PC
- Leslie Humiston, MNSc, APRN, CPNP-PC
- Michelle Davis, MNSc, APRN, CPNP-PC
- LouAnna McAdams, MNSc, APRN, NNP-BC, PNP-BC
- Megan Osam, MNSc, APRN, CPNP-PC
- Bonnie Kitchen, MNSc, APRN, CPNP-PC, CPNP-AC
- Debra Jeffs, PhD, RN, NPD-BC, FAAN
- Mary Salassi-Scotter, MNSc, RN, NE-BC
- Marlen Walden, PhD, APRN, NNP-BC, CCNS, FAAN

Purpose

- The purpose of the APP Council is to provide a forum for all APPs practicing at ACH to engage in discussions and decisions in relation to the APP role. In addition, this council facilitates communication among APPs to support the integration of the APP Council decisions into the practice setting.

Goals

- Develop and share "Best Practices" within the APP population.
- Participate in ongoing Diversity/Inclusivity training.
- Continue to develop a formalized Preceptorship Program for APP students at ACH Campus.
- Further advance relationship with UAMS College of Nursing.
- Develop formal protocols to recognize clinical excellence among APPs hospital wide.
- Engage in volunteerism.
- Formalize a leadership role for the PA population to address PA specific questions/oversight.
- Continue to Improve APP Grand Rounds, APP Orientation, APP Mentoring
- Improve APP ongoing education and training with formal voluntary standing role for APP Educator and utilization of ACU.
- Keep updated on APP legislation that affects APPs in Arkansas.

Task Forces/Subcommittees

- APP Mentoring Committee
- APP Orientation/Onboarding Committee
- APP Grand Rounds Committee
- APP Precepting Committee

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- During the COVID pandemic, the APP Council quickly pivoted to virtual meetings to continue their efforts toward bettering APP practice.
- APPs worked directly with the hospital as COVID screeners, in the COVID testing drive thru, and with the COVID telehealth program.
- APRNs continue to utilize telemedicine visits to help reach our patients at home.
- Despite the Pandemic, the Council achieved many goals including:
 - Resuming accredited APP Grand Rounds virtually to continue APP education. We can provide CE for APPs. The APPs themselves are able to request topics that they feel will be important to their practice.
 - Forming a new subcommittee to improve the precepting of APP students. This committee continues to improve education of future APP candidates.
 - Establish formal recognition of APPs for their contributions to the hospital including an "APP of the Month" and a spotlight on APPs in the APP Newsletter.
 - Our APP Director is meeting routinely with the APP coordinators and with ACH Section Chiefs to disseminate information and address concerns.
 - Our ACH Mentoring Committee has utilized the REDCap system to electronically document the mentor relationship for future data collection and ease of documentation.
 - We have established an Annual APP General Staff Meeting to provide APP specific updates, needs, initiatives to the APP group.

Connections

- Our Council participates in the shared decision making of the hospital by providing APP representatives for many of the hospital councils, quality and safety councils, and HAC groups.
- Ours APPs participate in quality improvement and research projects throughout the hospital and community.
- By precepting future APPs, we promote the pursuit of excellence in building the team work, professionalism, and education of future providers at ACH.





Nursing Annual Report & Council Celebration Special Edition 2021

CVICU Clinical Practice, Quality, and Safety Council

Matthew Burgess, BSN, RN III, CCRN, chair and Brittany Bradley, BSN, RN IV, CCRN, co-chair



Membership

- Jordann Bolton, BSN, RN
- Brittany Bradley, BSN, RN, CCRN
- Matthew Burgess, BSN, RN, CCRN
- Caroline Clark, BSN, RN, CCRN
- Ashley Dick, BSN, RN, CCRN
- John Diggs, ADN, RN, CCRN
- Abby Emanuel, BSN, RN, CCRN
- Kiley Engel, BSN, RN, CCRN
- Dake Holmes, BSN, RN, CCRN
- Amy Jenkins, BSN, RN
- April Jordan, MSNc, RN, NE-BC
- Janie Kane, MS, APRN, PCNS-BC
- Hannah Pillert, BSN, RN
- Courtney Potts, BSN, RN, CCRN
- Sidney Sharp, BSN, RN, CCRN
- Rachel Trull, BSN, RN, CCRN
- Eboni Willis, BSN, RN

Purpose

- Evaluate and update nursing practice according to evidence-based practice.
- Clarify practice issues and questions.
- Review and update hospital policies pertaining to the CVICU.
- Work on improving patient safety and reducing HACs.

Goals

- Quality and Safety
 - Patient & Employee Safety: Decrease SSI, CLABSI, and CAUTI incidence through real time practice audits and just-in-time teaching
- Engagement
 - Nurse Engagement: Nurse input into nursing practice in CVICU
 - Patient Experience: Patient and Family education, Parent involvement in care
- Innovation
 - Innovation at the Bedside: Nurse input into nursing problems.



Task Forces/Subcommittees

- PICC Dressing Change Team
- Partnership with CVICU Family Advisory Board
- Nurse Peer Review

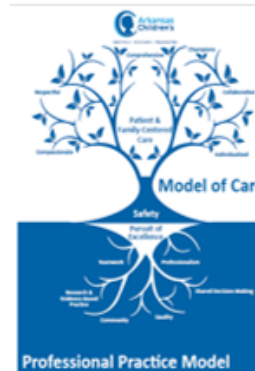
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- Our council kept working through email and virtual meetings. Because of virtual options, our council has actually seen increased participation.
- "Did You Know": staff submit questions and the council provides answers that are evidence-based, with rationale.
- Council Members serve as auditors for hand hygiene, foley maintenance, and CLABSI prevention.
- Standardized bath and foley care time to reduce CLABSI, CAUTI risk.
- CVICU celebrated one year without a level four medication event.
- CLABSI goal met for FY2020.
- Working on encouraging and educating parents about safe sleep for patients who qualify.
- Collaborating with social work to create staff education about caring for patients with substance use disorder.



Connections

- Bedside nurses provide input on practice changes that impact them.
- We empower bedside nurses to have input in educational and informational materials given to families.
- Council activities connect to the Professional Practice Model's aspects of research and evidence-based practice, teamwork, shared decision making, and professionalism.



Future Direction

- Continue to work to improve patient safety and reduce CLABSI, CAUTI, SSI, and PI.
- Work to encourage family participation in rounds, to increase family and patient satisfaction.
- Benchmarking performance against other like units via the PC4 collaborative.



CVICU Professional Excellence/Recruitment & Retention Council

Nursing Annual Report & Council Celebration
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Sarah McCullough, BSN, RNIV, CCRN, Chair

Ashlyn Ferguson, BSN, RN II, Co-Chair



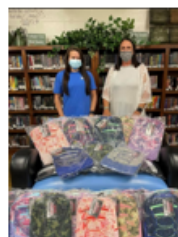
Membership

- Sarah McCullough, BSN, RNIV, CCRN
- Ashlyn Ferguson, BSN, RNII
- Ashley Crow, BSN, RNII
- Angela Glover, BSN, RN, CCRN, PCM
- Kierra Byrd, BSN, RNII
- Kristi Eustice, RNII, CCRN
- Stephen Feero, BSN, RNIII, CCRN
- Kris Jennings, RNII
- Raquel Kendall, MSN, RN V, CCRN
- Lindsey Knight, BSN, RNII
- Kelli Phelps, BSN, RNII, CCRN
- Tori Raphael, BSN, RNII
- Abby Smith, BSN, RNII
- Madison Stewart, BSN, RNII



Goals

- Facilitate professional development by encouraging CCRN certification among CVICU nurses
- Positively impact the community through volunteer opportunities and community outreach projects; Encourage employee involvement
- Retain nurses by providing adequate support and encouragement through preceptorship and the Mentor/Mentee program



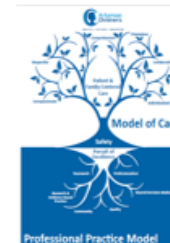
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- This year has been difficult to engage in normal council activities due to the COVID-19 pandemic, but CVICU has found numerous ways to outshine the darkness.
 - We were able to donate \$460 to the stocked & ready food pantry through a friendly unit competition in November.
 - During the Christmas season we collected toiletry donations for a local women's shelter.
 - Every year, we participate in THV 11's Summer Cereal Drive. This year the unit was able to donate \$350 to help the Arkansas Food Bank provide cereal for the children of Arkansas.
 - In February, to highlight Congenital Heart Defects Awareness week, we presented "Defects & Donuts" to our patient families.
 - For the start of the school year, the council ran a backpack drive to provide an Arkansas school with backpacks for students. This year we were able to donate 30 backpacks to Mountain View Elementary.
 - We've added several nurses to our certified nurses roster this year, bringing us to 38.6% of nurses certified!
 - A "Lots of Love" board was added to our break room to recognize peers for going above and beyond.



Connections

- Display professional excellence by informing CVICU nurses of the benefits of certification and celebrating CCRN certified nurses
- Impact the community through service projects, volunteer opportunities and donations
- Collaborate with Org Level PE/R&R by sending a member to the monthly meetings to participate and relay information
- Recognize others through the Employee of the Month Program and various unit awards
- Promote teamwork by encouraging healthy work relationships among peers



Purpose

- Recruit and retain professionals in the medical field that are new to CVICU. Promote nursing excellence and advance professional careers by providing education, encouragement and support to peers.

Task Forces/Subcommittees

Mentor/Mentee Program - Encourages and strengthens newer nurses by establishing and maintaining positive relationships among peers. Allows opportunities for growth for both the new and experienced nurses.

Future Direction

- Increase nurse resiliency, staff satisfaction and professional excellence with events, projects and education aimed at employee development and recognition.



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Educator Council

Shea Long, BSN, RN, CPN/ Lindsey Ward, BSN, RN, CPHON, CPN



Membership

- Amy Huett, PhD, RN-BC
- Beth Brown, BSN, RN, NE-BC
- Brady Dixon, BSN, RN-BC
- Carol Oldridge, BSN, RN, CPN, CPHON
- Crissy Benson, BSN, RN, CPN
- Heather Neal-Rice, MEd, LRCP, RRT, RRT-NPS, AE-C
- Holly Hanson, BSN, RN, CCRN
- Jessica Weaver, BSN, RN
- Joanna Carpenter, MSN, RN, NP-BC
- Julie Bane, DNP, RN, NP-BC
- Kendyl Doan, BSN, RN, CPN
- Kristen Wilson, BSN, RN, CPN
- Lametrica Wafford, MNSc, RN, NP-BC
- Lesa Slaughter, BSN, RN, CPEN, TCRN
- Lindsey Ward, BSN, RN, CPHON, CPN
- Lisa Hampton, BSN, RN, CNOR
- Mallory Hill, BSN, RN, CPN
- Maria Allred, BSN, RN, CPN
- Maria Eilers, MSN, BSN, RN
- Nici Belknap, MSN, RN-BC, RNC-NIC
- Paula McElhanon, RT (R)
- Shea Long, BSN, RN, CPN
- Shonda Grappe, BSN, RN, CCRN
- Teresa Jacobs, RN

Purpose

The purpose of the Educator Council is:

- to provide direction and guidance for education and nursing professional development by promoting collaboration of educators
- to facilitate interdisciplinary communication, and evaluate clinical outcomes relative to education initiatives

Goals

- Quality and Safety**
 - BD Syringe Education (ACH)
 - Bedside Hand-off Using IPASS
 - Monthly PIVIE HAC Updates
 - Nursing Peer Review Lessons Learned
 - Regulatory Compliance Communication Forum for Clinical Educators
 - Standardized Intraosseous Needle Requirements
 - Standardized Restraints Competency Requirement (ACH)
- Engagement**
 - Diverse Hair Care Education & Subgroup
 - Learning Needs Assessment
 - Monthly Magnet Updates
 - Nursing Excellence Awards
 - Preceptor of the Quarter Recognition
 - Preceptor Pulse Newsletter
- Optimization**
 - ANPD Continuing Education Webinars
 - Epic Updates
 - Quarterly Continuing Education for Educators
- Innovation**
 - Computer-Based Competency Process Evaluation

Council Submissions

- Advance Care Planning
- BD 50ml Syringe Submission
- Belmont Rapid Infuser Education & Training
- CAUTI HAC Policy Education
- Code Narrator Education
- Computer-Based Competencies in ACU
- Diverse Hair Care Education
- Hand-off Standardization Using IPASS
- International Dysphagia Diet Standardization Initiative (IDDSI)

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- Educator Council shifted to the Microsoft Teams virtual platform in April 2020, increasing team engagement and attendance
- 60 Nurses Trained during COVID pandemic on new Belmont Rapid Infuser Training
- System-wide implementation of hair care products for African American/Black patients, and patients of color
- Area-specific Learning Needs Assessment data shared with Clinical Educators for education development
- System-wide recognition of nurse preceptors
- Bedside hand-off audits revealed education gaps leading to development of education flyers

Connections

- Educator Council plays a key role in connecting council work and initiatives to the clinical nurse through education and professional development.
- Council members demonstrate teamwork through sharing ideas, expertise, and experiences to create the optimal learning experiences in the pursuit of excellence.
- Educator Council utilizes the Learning Needs Assessment to connect nurses to research and evidence-based professional development opportunities.

Future Direction

The Educator Council's future direction:

- to continue to promote professional development and nursing excellence in support of the Nursing Strategic Plan
- to use its expertise in the educational process to create change and promote quality in the practice and learning environments
- to promote active membership in the Association of Nursing Professional Development
- to promote the Nursing Professional Development board certification for Clinical Educators





Nursing Annual Report & Council Celebration Special Edition 2021

Hematology/Oncology Services Council

Emily Willems, BSN, RN CPHON

Karly Brooks, BSN, RN, CPHON



Membership

Amy Allen MSN, RN, NE-BC	Director	
Misty Scott	Unit Secretary	Guest
Lora Parker BSN, RN, CPHON	RN IV	Recorder
Emily Huffman BSN, RN	Clinical Project Manager	Guest
Sara Neal BSN, RN, CPN, CPHON	PCM	Facilitator
Brook Scalzo BFA, BSN, CPN	RN III	Member
Kara Burge LCSW	Social Work	Guest
Sandra Smith	RN III	Member
Lindsey Ward BSN, RN, CPN, CPHON	Clinical Educator	Guest
Victoria Filipek BSN, RN, CPN, CPHON	RN III	Member
Ricki Isom RN, CPN, CPHON	RN III	Guest
Robyn Abernathy MSN, RN, CNL, CPHON	RN IV	Guest
Olivia Holmes	PCT	Member
Karly Brooks BSN, RN, CPN	RN III	Member; PERR Representative; Co Chair
Kaitlyn Richter BSN, RN, CPN	RN III	Member
Emily Lively BSN, RN, CPN	RN III	Member
Lindsay Billings BSN, RN, CPHON, CPN	RN III	Member
Lana Briggs BSN, RN	RN III	Member
Emma Patrick BSN, RN	RN III	Member
Loretta De Palo RN	RN III	Member
Sarah Frantz CCLS	Childlife	Guest
Carl Floyd BSN, RN	RN III	Member

Goals

- Quality and Safety
 - Decrease CLABSI and increase hygiene compliance
- Engagement
 - Council member representative on Diversity & Inclusion council
- Optimization
 - Maintain monthly meetings and engagement using online meetings
- Innovation
 - Ongoing Magnet Readiness



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- Coordinated a "blessing bags" drive for the homeless packing over 50 bags of nonperishable food, toiletries, blankets, and coats.
- Adopted two families to fulfill Christmas wish list
- Revising practice of PCT obtaining vital signs
- Toy drive to restock our toy closet
- Hygiene audits to help reduce CLABSI
- Created new guidelines with Child Life for visitors under eighteen years old of end-of-life patients



Connections

- **Collaborative:**
 - Maintain monthly meetings via Zoom
 - Use Facebook updates and safety huddles to discuss changes in practice or safety concerns in council
- **Patient & Family Centered Care:** Continue to promote bedside shift report
- **Worked with Org Level Council:** Submission to add oral hygiene flowsheet to mouthwash in MAR in EPIC
- **Interdisciplinary Teamwork:**
 - Created mentorship program for new nurses on 4K with a plan to expand program to clinic and PCT
 - Representation on council from multiple disciplines including social work, child life, and PCT



Purpose

- We are a specialized team dedicated to providing family-centered care with hope for healing.

Task Forces/Subcommittees

- **Sunshine Committee**
 - Help to maintain bulletin boards and coordinate celebrations for social work, child life, dietetics, and new hires.

Future Direction

- Continue to increase patient safety by decreasing CLABSI
- Increase resilience among staff



Nursing Annual Report & Council Celebration Special Edition 2021

Infant/Toddler Unit PERR Council

Chair: Tredijah Sykes BSN, RN Co Chair: Chloe Crouch BSN, RN



Membership

- Pam Atkinson BSN, RN, CPN
- Lana Ball BSN, RN
- Nicole Bernard BSN, RN, CPN
- Chloe Crouch BSN, RN
- Susan Easterling BSN, RN, CPN
- Megan Hayes BSN, RN
- Kandace Hoy BSN, RN
- Rachel Jackson BSN, RN, CPN
- Roxi Jones BSN, RN
- Danelle Lewis BSN, RN
- Hannah Ricketts BSN, RN
- Tredijah Sykes BSN, RN
- Megan Yonker BSN, RN, CPN
- Crissy Benson BSN, RN, CPN
- Kim Prater BSN, RN, CPN
- Ashley Thacker BSN, RN, CPN



Purpose

- Recruit and retain professionals that are new to the medical field as well as those that are new to the facility and/or our respective units. Provide education and encouragement to nurses to promote excellence in nursing and advancements in their professional careers, not only within the organization but within the community as well.

Goals

- Further develop and implement mentoring program for new nursing aiding in their transition to professional practice.
- Increase unit morale by recognizing fellow coworkers for their hard work, advocacy and dedication to the unit.
- Increase employee involvement in volunteer opportunities and community outreach projects.
- Continue to push for increase in patient satisfaction by utilizing communication tools to ensure accurate plan of care between care team and family.



Task Forces/Subcommittees

- Open House
- Community Service
- Mentor Program
- Christmas Week Nurses Week
- Respiratory Therapy Week

#morethanever

- Due to COVID our council transitioned to email meetings and checking up on each other individually on our shifts instead of meeting in person this year.
- This year our largest challenge was our unit's turnover rate. We have had to work with the smallest amount of nurses ever on our respective shifts. ITU staff has excelled in team work this year to be the support system and encouragement our teams need. We installed a candy and treat basket at the front of our unit to keep us fueled for our shifts. Everyone takes turns replacing the goods in the basket.



Connections

- ITU promotes shared governance by team work, problem solving and accountability. With the goals of improved staff satisfaction, productivity, and patient outcomes.
- The projects completed by the council throughout the year aid in insuring that we are practicing to the best of our ability, thus enhancing the strong patient and family centered care we strive to provide.



Future Direction

- Maintaining employee satisfaction and unit moral is the forefront of our council's focus with projects aimed specifically at employee development and recognition.
- Maintain Mentor Program by developing a unique plan for each new employee to meet their individual needs.
- Continuing to engage the community in service outreach projects.



Nursing Annual Report & Council Celebration Special Edition 2021

Neuroscience Service Line Council

Chair- Allison Curtis, BSN, RN, CPN Co-Chair- Laura Gill, BSN, RN



Membership

- Jessica Hodges, RN, CPN
- Amber Jones, MSN, RN, NE-BC
- Jennifer Warren, EEG tech
- Aurielle Westfall, RN, CPN
- Stephanie Benning, MSN, APRN, PCNS-BC, CPN
- Beth Ritter, BSN, RN, CPN
- Laura Gill, BSN, RN
- Lauren Haird, BSN, RN
- Mallory Hill, BSN, RN, CPN
- Kim Cannon, BSN, RN
- Allison Curtis, BSN, RN, CPN
- Bekah Joyner, BSN, RN, CPN
- Ginger McEarl, MSN, RN, CPN
- Jaqueline Edens, BSN, RNC-NIC
- Shanna Prater, LPN
- Tiffany Boyd, BSN, RN, CPN
- Diane Micco, BSN, RN, CPN
- Angela Riggs, BSN, RN, CPN
- Shelby Richards, MSN, APRN
- Justin Smith, BSN, RN, CPN
- Tracy Tackett, CNIM, REEGT
- Lea Woodrow, BSN, RN, CNOR
- Tomi Grubb, LPN
- Stacey Hawkins, BSN, RN, CPN
- Nita Wallace

Purpose

- The purpose of the Neuroscience Service Line Council is to connect front line staff of 4D, 5D, and the Neuroscience Center to organizational initiatives by developing goals related to clinical practice, quality and safety, professional excellence and recruitment and retention.

Goals

CPQS Goal: The Neuroscience Service Line will double the number of near miss event reports in FY21 from FY20 with a total of 104.

Action Steps:

- Create spaces for education on near miss reporting including
- Identify barriers and develop resources as it relates to reporting near misses.
- Complete monthly count of near miss event reports for each department to present to council and modify action steps/ goal if necessary.

PERR Goal: The Neuroscience Service Line will increase their percentage of certified nurses to 53% by the end of FY21. This accounts for 2 additional nurses to obtain certification by the end of FY21

Action steps:

- Purchase or develop resources for nurses who are seeking certification or recertification.
- Celebrate new certifications
- Complete monthly count of certified nurses for each department to present to council and modify action steps/ goal if necessary

Bonus Goal: In September, the council decided to focus on staff morale. The council initiated employee of the month. The council also provided a coffee station for each area and have plans for fun bulletin boards.

Task Forces/Subcommittees

- The Neuroscience Service Line Council developed two subcommittees that focused on the two goals listed above.

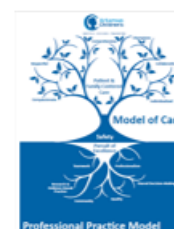
#morethanever

- COVID presented the challenge of not being able to meet in person. Our council met this challenge by staying engaged in a virtual setting via TEAMS and email.
- The council successfully met the PERR Goal with 53% nurses certified. The council was very close to meeting our goal for doubling Near Miss events.
- The Council celebrated our first "Employee of the Month" for September. The Council used a "Getting to know you" form that lets each area celebrate the employee how they want to be celebrated.



Connections

- Neuroscience Service Line Councils uses shared decision making by creating innovative ways that connect front line staff to organizational initiatives.
- The Neuroscience Service Line Council uses the Professional Practice Model when developing goals to improve care of our patients and with a constant pursuit of excellence.



Future Direction

The Neuroscience Service Line Council will continue to work on goals related to increasing reports of near miss events and increasing certification rates. In addition to this, the council will continue to keep a pulse on our staff resiliency and offer assistance and opportunities to improve staff morale as we continue to face challenges related to COVID.



Nursing Annual Report & Council Celebration Special Edition 2021

Perioperative Council

Jill Chandler BSN, CPN, RN IV Chair/Shannon Amara-Bangali ADN, RN II, BBA Co-Chair



Membership

Jill Chandler BSN, CPN, RN IV-Chair
Shannon Amara-Bangali ADN, RN II, BBA co-chair
Jennifer Bates, ADN, RN, CPN, RN III
Monique Brown CST, ST III
Sydney Davenport BSN, CPN, PCM
Keri Hamm BSN, CNOR, PCM
Lisa Hampton BSN, CNOR, CE
Melinda Harris BSN, CNOR, PCM
Faith Jones BSN, RN II
Ashley Lander BSN, RN II
Allie Lee BSN, RN II
Angie Livingston BSN, CPN, RN III
Nancy Marret ADN RN II
Sondra McNatt, BSN, CNOR, RN IV
Brittany Mitchel BSN, CPN, RN III
Rachel Nalley BSN, RNII
Danielle Nicpan CRST, ST III
Shelby Ross BSN, RN II
Kara Sullivan MSN, CPN
Kristen Wilson BSN, CPN, CE

Purpose

The Perioperative Services PERR/CPQS CAB Designated Group strives to provide shared governance through all of our departmental initiatives. We are a group of diverse health care professionals with the ultimate goal of making the patient experience excellent. The council strives to increase nursing and employee satisfaction by implementing resiliency debriefing sessions, mentoring and other employee education programs.

Goals

- Quality & Safety:**
- Hand Hygiene
 - Needle Stick Protocol Audits
 - Bone Marrow Team
 - Decrease Instrument Issues SPD
 - K-Card Audits: WHO, timeout, SSI, CAUTI
 - SSI 53% better than target, VTE consistently above target
 - First Case Starts, and turnover time above CHA average. Day of case cx reduced 3.5%
 - Improve Inventory: standardize, accuracy
 - EPIC Updates: Procedures, Medications, D/C Instructions, bedside unit case fields
 - Autism protocol and pathway updated
 - Orientation skills lab update
 - ASD employee and caregiver red cap questions/on-going audits implemented

Engagement:

- Incivility training
- Support council sponsored events
- Wellness training
- Team building exercises
- EES overall improvements
- "Milestone" and national celebrations
- Return of ZB to FT and PT
- Promotion career ladder (RN periop and OR ST)
- Diversity and Inclusion sessions

Optimization:

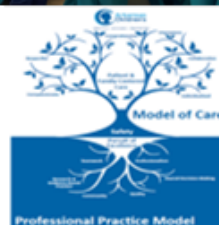
- Mentor Program
- Grief support sessions
- Resiliency Debriefing Session (on hold)

Task Forces/Subcommittees

- Periop Governance Council
- Org PERR Career Ladder
- CAB Mentor taskforce
- HAC: SSI, VTE, CLABSI, CAUTI
- Milestones
- Patient warming
- Handoff

#morethanever

- New Council Newsletter monthly updates
- New hire welcome letter/get to know you questions
- Book Drive to local school, 390 total
- Patient satisfaction target 91.0, achieved 91.3
- Quarterly Employee recognition
- Promote culture of safety-update bedside hand off to PACU in progress
- Rapid sensory patients: new distraction toys, update information/apps/distraction IPAD
- Revamped celebrations-"Milestones"
- 10% increase in OR certifications, multiple career ladder promotions in periop areas
- Covid: Unit Infection prevention Ambassador
- Education staff for Covid process changes
- Covid: facilitator to ensure testing completed for scheduled cases



Connections

The Professional Practice Model at Arkansas Children's Hospital drives our focus for patient and family centered care. Our council's shared decision making promotes quality and interdisciplinary teamwork. We use evidence-based practice to promote change while maintaining our core values of safety, teamwork, compassion, and excellence. We strongly encourage our nurses to be their best in their professional practice in order to provide exceptional care to our patients and families. The council uses team connection events to celebrate our diverse roles, certifications, and achievements. Through service projects we represent Arkansas Children's Hospital while giving back to the community.

Future Direction

Quality and Safety:

- Autism (ASD-ID) assessment (questionnaire) go live house/system-wide
- Coordinate patient teaching with clinics improve understanding pre-op, post-op care/DC
- Update PPI care giver teaching video
- Increase OR bair hugger use, use in PACU, units to pre-warm inpatients coming to OR.

Engagement:

- Nurse Retention – onboarding, and orientation process improvements, preceptor training, update mentor program
- Nurse Engagement debriefing sessions, mentor training, team building, unit national celebrations
- EES Goals: Increase staff involvement patient care/processes, creative staff recognition

Optimization

- Resilience Debriefing Sessions-Restart



Nursing Annual Report & Council Celebration Special Edition 2021

Professional Excellence Recruitment and Retention Organizational Council

Tiffany Smallwood, BSN, RN, CPN, Chair



Membership

- Shannon Amara-Bangali, BBA, RN, Surgical Services
- Elissa Annesley-DeWinter, RN, CCRN, Burn
- Julie Bane, DNP, RN, NP-BC, Transition to Practice
- Karly Brooks, BSN, RN, CPHON
- Bethany Byrne, BSN, RN
- Laura Buse, MSN, RN, NE-BC, Outpatient Clinical Operations Manager
- Katie Cruz, BSN, RNC-NIC, NICU
- Sophie Duggan, BSN, RN
- Chad Dugger, BSN, RN, CPN, Palliative Care
- Kristi Eustice, RN, CCRN
- Megan Hayes, BSN, RN
- Amy Huett, PhD, RN, NP-BC, Director of Nursing Excellence
- Debra Jeffs, PhD, RN, NP-BC, FAAN, Academic Nursing Education Manager
- Dani Masburn, RN
- Leslie Moore, BSN, RN, CPN, CPXP, Patient Experience
- Brittany Moyers-Logue, BSN, RN, CPN, SST
- Kristen Newton, RN, Case Manager
- Crystal Paparic, MN5c, APRN, PNP-PC, Critical Care
- Jessica Powell, BSN, RN, Peri-Op Services
- Shanna Prater, LPN, Neuroscience Clinic
- Janise Sanders, BSN, RN, R/R, Human Resources
- Jera Shepard, BSN, RN, CPN
- Tyler Simpson, BSN, RN, SD, Progressive Care
- Tiffany Smallwood, BSN, RN, CPN
- Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Nurse Scientist Manager

Purpose

Implement evidence-based strategies to attract and retain talented nurses, who demonstrate ideals of the ACH Model of Care and Professional Practice Model. Promote a healthy work environment in which nurses can thrive and develop professionally. Promote professional nursing practice and nursing excellence. Support advancement of nursing within ACH and the wider community.

Goals

PERR Council aligns with organizational values of Safety, Compassion, Teamwork, Excellence through the following goals:

- Support a healthy work environment through meaningful recognition and connection
- Advancing professional nursing excellence by increasing BSN or higher nursing degrees, professional certification rates, and involvement in scholarly activities
- Supporting nurse recruitment and retention

Task Forces/Subcommittees

Recognition/Certification Task Force:

- Ensure recognition and retention of ACH nurses on an organizational, state, and national level

DAISY Subcommittee:

- Recognize outstanding, compassionate nurses through the DAISY recognition program

Mentoring Task Force:

- Provide standardized resources, tool kits, and structure while encouraging each clinical area/department the opportunity for creativity in nurse mentoring

Professional Development Taskforce:

- Develop the ACHieve Career Ladder and electronic portfolio for nursing professional advancement

Scholarly Activity Taskforce:

- Promote professional excellence through scholarly activities including an organizational-wide journal club



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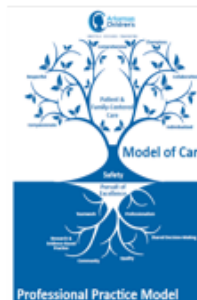
- COVID Challenges:** In-person meetings!
 - Virtual meetings using technology and communication via email followed.
 - DAISY Award ceremonies required adaptation.
- PERR ORG Council Successes:**
 - DAISY nominations, selection and awards continued! 12 DAISY awards in 2020 and 7 so far in 2021
 - 74% of nurses hold BSN and higher nursing degrees
 - 50% of nurses hold national professional certifications
 - New Certification preparation E-Learning available
 - 96% student nurses satisfied with ACH learning
 - Nursing Excellence Awards presented to nurses during Pediatric Nurses Week 2020
 - Updated Council Member Orientation with direct-to-video link embedded in email to all nurses based on Council Health Survey conducted in fall 2020
 - Created Council Member Welcome Letter
 - Created Council Recruitment Brochure
 - Monthly Nurse Resiliency Series

ACH Councils

- 2B BURN COUNCIL
- 3C IMU COUNCIL
- 3D/3E CP/QS PE/RR COUNCIL
- 3K ITU/AC/ SE/SD CP/QS COUNCIL
- 3K ITU/AC/ SE/SD PE/RR COUNCIL
- 4D EMU COUNCIL
- 4K HEM/ONC/APHERESIS/DAY MED COUNCIL
- AMBULATORY COUNCIL
- APP COUNCIL
- CVICU/ECMO CP/QS COUNCIL
- CVICU/ECMO PE/RR COUNCIL
- DIRECTOR COUNCIL
- ED CP/QS COUNCIL
- ED PE/RR COUNCIL
- EDUCATOR COUNCIL
- NICU CP/QS COUNCIL
- NICU PE/RR COUNCIL
- ORGANIZATIONAL CP COUNCIL
- ORGANIZATIONAL QS COUNCIL
- ORGANIZATIONAL PE/RR COUNCIL
- PICU CP/QS COUNCIL
- PICU PE/RR COUNCIL
- RESEARCH COUNCIL
- RESOURCE TEAM/ RN SUPERVISORS
- CP/QS PE/RR COUNCIL
- SURGICAL SERVICES COUNCIL

Connections

- PERR ORG Council collaborates with the Coordinating Council, all organizational, clinical area based, and support councils to ensure good communication between all councils.
- PERR ORG Council embodies the Professional Practice Model by utilizing shared decision making to engage ACH nurses in the pursuit of excellence while ensuring patient and family-centered care.



Future Direction

PERR will continue to support the Nursing Strategic Plan by maintaining the current PERR Council task-forces and subcommittees and implementing the following actions:

- Strengthen the Center for Nursing Excellence
- Evaluate the ACHieve Career Ladder for nursing professional development
- Build resiliency of nursing workforce
- Increase retention of nurses
- Support success of nursing students
- Continue to increase nurses' certification, promote academic progression, and support nursing scholarship



Nursing Annual Report & Council Celebration Special Edition 2021

Nursing Research Council

Chair: Dalton Janssen, MSN RNC-NIC

Co-Chair: Marlene Walden, PhD APRN NNP-BC CCNS FAAN



Membership

Nursing Department

- Dannis Armikarina, BSN RN CCRN-K
- Stephanie Benning, MSN APRN PCNS-BC CPN
- Cynthia Greenwell, BSN RN, CCRC
- Amy Harrison, BSN RN CPHON
- Amy Huett, PhD RN NP-BC
- Dalton Janssen, MSN RNC-NIC
- Debra Jeffs, PhD RN NP-BC FAAN
- Janie Kane, MS RN PCNS-BC
- Austin Lovenstein, MBA MA BS CRS
- Ellen Mallard, MSN APRN ACCNS-N RNC-NIC
- Leslie Moore, BSN RN RNP CPN CPXP
- Amy Ramick, DNP RN ACNS-BC NP-BC
- Angela Roberson, MNSc APRN PCNS-BC
- Marlene Walden, PhD APRN NNP-BC CCNS FAAN
- Jay White, DNP APRN CPNP-AC CPN
- Shannon Wyatt MSN APRN FNP-BC CCRN

Arkansas Children's Research Institute

- Amanda Holloway, CHRC
- Beverly J. Spray, PhD

Dept of Infectious Disease

- Archana Balamohan, MD

Library

- Lindsay Blake, MLIS

Parent Advisor

- Lindsey Overman, MS CCRP

Pastoral Care

- James Henrich, ThM

Rehabilitation Department

- Mandy Yelvington, MS OTR/L BCPR BT-C

Respiratory Care Services

- Denise Willis, MS RRT-NPS AE-C

Goals

- Ensure CITI training (research ethics and compliance training) for all Research Council members
- Provide education at Research Council meetings
- Partner with hospital-acquired condition teams (HACs) and clinical area-based councils (CABs) to implement best practices to improve patient outcomes
- Celebrate scholarly activities of nursing staff during Pediatric Nurses Week
- Review research protocols prior to Institutional Review Board (IRB) submission
- Review Evidence-Based Practice (EBP) Summaries completed by the Nursing Research Department
- Increase access to evidence-based resources
- Increase interprofessional and departmental voices in research through recruiting interprofessional staff and clinical nurses to the council

Purpose

- The purpose of the Research Council is to increase the scientific foundation of nursing practice and serve as the organizing body for all nursing research being conducted at Arkansas Children's Hospital

Outcomes

- 1 educational event
- 3 research studies presented
- 5 Protocols reviewed in the last year
- 87% CITI trained members
- 10 EBP summaries
- 2 new disciplines joined council
- 17 meetings held during the COVID pandemic
- Invited 3 past Principal Investigators to present findings to the Nursing Research Council
- Began a mentorship project to engage and educate prospective nurse researchers

Task Forces/Subcommittees

- MyChart Experience Research Project Subcommittee submitted an ACRI Nursing and Allied Health mentored research grant application



Connections



- Transitioned council meetings to virtual to ensure the safety of members
- ACRI virtual town hall meetings monthly
- Dr. Jeffs presented in the town hall meeting
- Collaboration across AC system to create new research/project policy and new project app
- Support the development of the new ACNW Nursing Research Committee
- Provide education to staff and support new investigators

Future Direction



- The council aims to empower and educate staff on the research process
- The council aims to enhance studies by staff which results in high quality findings that positively impacts patient care and professional practice
- The council aims to provide studies that will provide experience to novice researchers and enhance the knowledge of experienced ones

NURSING RESEARCH



Dear Nursing and Interprofessional Colleagues,

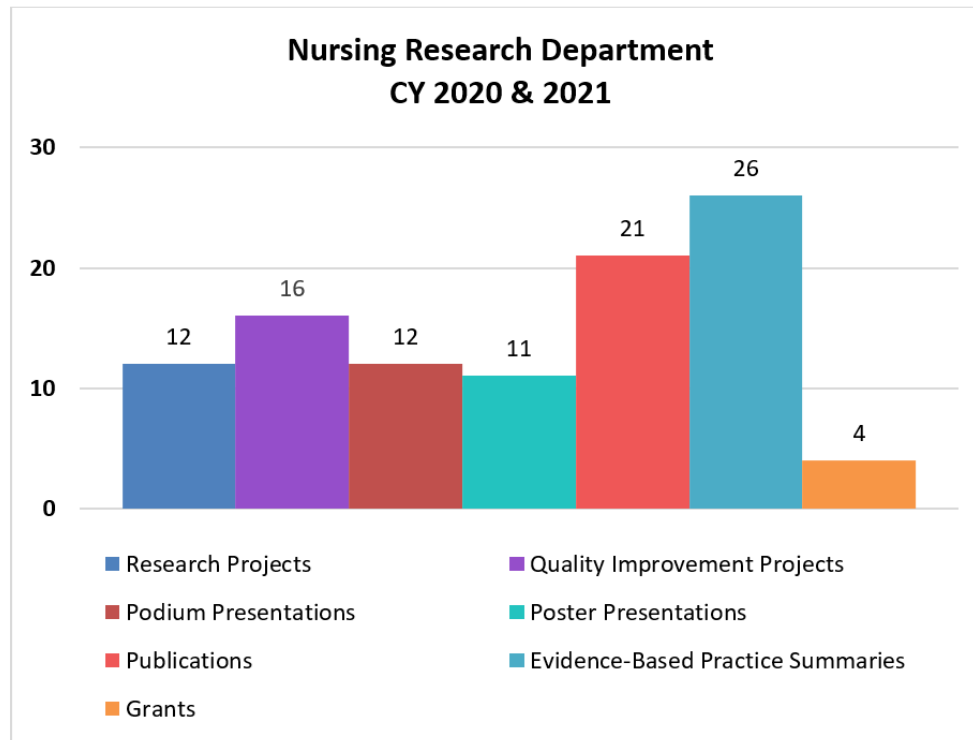
Throughout the past two years and amid these unprecedented times, the nurses at Arkansas Children's have demonstrated resiliency and a steadfast commitment to improving the lives of the children and families we serve and to advancing the profession of nursing practice. In our nursing research report below, you will see the many exemplary accomplishments of Arkansas Children's nurses including publications, presentations, evidence-based practice summaries, research studies, quality projects, and grants. The Nursing Research Department remains committed to generating evidence for practice, creating opportunities for nurses to lead in ethical and relevant research, and producing meaningful ways for research evidence to augment current practice and improve patient outcomes.

Thank you from the deepest of our hearts for your hard work, courage and dedication to the children and families of Arkansas. Please let the research team know how we may better assist you in providing exemplary nursing practice and supporting your professional scholarship. Again, congratulations!

Sincerely,

Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN

NURSING RESEARCH



Arkansas Children's team members bring their unique interprofessional perspectives to advance the understanding of complex healthcare issues. In 2020 and 2021, team members published 21 manuscripts and presented a total of 11 poster presentations and 12 podium presentations at various conferences throughout the United States and globally. Nurses were also Principal Investigators or Co-Investigators on 12 research studies and were involved in 16 quality projects. Four nurses received grants for their research. The Nursing Research Department provided 26 evidence-based practice summaries for nurses throughout the healthcare system. Numerous nurses and departmental teams were recognized for their excellence in nursing practice, leadership, and teamwork. Finally, the Department completed over 650 consultations consisting of abstract reviews, database management, dissertation/DNP/capstone projects, evidence-based practice summaries, research projects, quality projects, research protocol development, navigating the Institutional Review Board (IRB), letters of determination, literature searches, poster development, publications, and survey development.

NURSING RESEARCH

PUBLICATIONS ONLINE AHEAD OF PRINT (ePub)

Joseph Hagan, ScD, **Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN**, and Melinda Colleen Brand, PhD, APRN, NNP-BC. (2021). Fewer Patients Per Nurse Does Not Offset Increased Nurse Stress Related to Treatment Uncertainty and Death from Caring for Higher Acuity Patients in the Neonatal Intensive Care Unit. *Advances in Neonatal Care*. doi: 10.1097/ANC.0000000000000930

Sowmya Patil, MBBS, MD, FAAP, **Karalyn Kerby, BSN, RN, CPN, Amy Ramick, DNP, RN, ACNS-BC, NPD-BC**, and Justin Criddle, MBA, CSSBB. (2021). "Is that for here or to go?" Drive Through Pediatric Vaccine Clinic as a Novel Approach During a Global Pandemic. *Disaster Medicine and Public Health Preparedness*. doi: 10.1017/dmp.2021.338

Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Lee Anne Eddy, DNP, RN, NEA-BC, Amy Huett, PhD, RN, NPD-BC, Austin Lovenstein, MBA, MA, BS, **Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, Debra Jeffs, PhD, RN, NPD-BC, FAAN**, and **Angela Scott-Roberson, MNSc, RN, APRN, PCNS-BC, FCNSI**. (2021). Use of the Council Health Survey to Assess Shared Governance in a Children's Hospital during the COVID-19 Pandemic. *Nurse Leader*. doi: 10.1016/j.mnl.2021.12.006

Mandy Yelvington, MS, OTR/L, BCPR, BT-C, Gregory Armstrong, BSPO, CPO/L, **Ellen Mallard, DNP, APRN, ACCNS-N, CWOCN-AP, RNC-NIC**, Shukla, Ankita MD, and Eric Braden, CHSOS. (2021). Use of 3D Printing Technology for Cervical Thoracic Lumbosacral Orthosis Fabrication. *Journal of Prosthetics and Orthotics*. doi: 10.1097/JPO.0000000000000379

PUBLICATIONS IN-PRINT

Matthew Linam, MD, MS, **Elizabeth Marrero, MSN, RN, CNOR(e), CICI, Michele Honeycutt, MNSc, RN, CIC, FAPIC, Christy Wisdom, MSN, RN, CIC, FAPIC, Anna Gaspar, MSN, RN, CIC**, and Vini Vijayan, MD. (2019). Focusing on Families and Visitors Reduces Healthcare-Associated Respiratory Viral Infections in a Neonatal Intensive Care Unit. *Pediatric Quality and Safety*, 4(6), e242. doi: 10.1097/pq9.0000000000000242

Patricia N. Scott, DNP, RN, PNP, Ashley Davis, PhD, RN, Laura E. Gray, PhD, RN, CNE, **Debra Jeffs, PhD, RN, NPD-BC, FAAN**, and Leanne L. Lefler, PhD, RN, APRN, FAHA, FAAN. (2020). Imperatives for Integrating Culture of Health Concepts into Nursing Education. *Journal of Nursing Education*, 59(11), 605-609. doi: 10.3928/01484834-20201020-02

Patricia N. Scott, DNP, RN, PNP, NCSN, Leanne L. Lefler, PhD, RN, ACNS, BC, APRN, FAHA, FAAN, **Debra Jeffs, PhD, RN, NPD-BC, FAAN**, Ashley Davis, PhD, RN, Tina Lear, MHA, and Alisa Haushalter, DNP, RN, PHNA-BC. (2020). A Tristate Education Model to Prepare Nurses to Serve on Health-Promoting Boards. *Journal of Continuing Education in Nursing*, 51(10), 528-532. doi: 10.3928/00220124-20201014-10

NURSING RESEARCH

M. Terese Verklan, PhD, CCNS, RNC, FAAN, **Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN**, and Sharron Forest (Eds.). (2020). *Core Curriculum for Neonatal Intensive Care Nursing (6th ed.)*. Elsevier Publishing.

Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN. (2020). Pain Assessment and Management. In M. Terese Verklan, PhD, CCNS, RNC, FAAN, **Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN**, and Sharron Forest (Eds.). *Core Curriculum for Neonatal Intensive Care Nursing (6th ed.)*. Elsevier Publishing.

Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Dalton Janssen, MSN, RNC-NIC, and Austin Lovenstein, MBA, MA, BS, CRS. (2020). What Keeps Neonatal Nurses Up At Night and What Gets Them Up In The Morning? *Advances in Neonatal Care, 20(6)*, 102-110. doi: 10.1097/ANC.0000000000000723

Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Elizabeth “Charley” Elliott, PhD, APRN, NNP, Andrew Ghrayeb, MT-BC, NMT, Austin Lovenstein, MBA, MA, BS, CRS, **Amy Ramick, DNP, RN, ACNS-BC, NPD-BC**, Greg Adams, LCSW, ACSW, FT, Brent Fairchild, BA, MDiv, BCC, and Brian Schreck, MA, MT-BC. (2020). And the Beat Goes On: Heartbeat Recordings through Music Therapy for Parents of Children with Progressive Neurodegenerative Illnesses. *Journal of Palliative Medicine, 24(7)*, 1023-1029. doi: 10.1089/jpm.2020.0447

Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Austin Lovenstein, MBA, MA, BS, CRS, Amelia Randag, CCLS, **Sherry Pye, DNP, APRN, CCRN, CCTC**, Brianna Shannon, CCLS, Esther Pipkin, MS, CCLS, CBIS, **Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, Keri Helmick, BSN, RN**, and Margaret Strickland. (2020). Methodological Challenges Encountered in a Study of the Impact of Animal-Assisted Intervention in Pediatric Heart Transplant Patients. *Journal of Pediatric Nursing, 53*, 67-73. doi: 10.1016/j.pedn.2020.04.017

Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Austin Lovenstein, MBA, MA, BS, CRS, Amelia Randag, CCLS, **Sherry Pye, DNP, APRN, CCRN, CCTC**, Brianna Shannon, CCLS, Esther Pipkin, MS, CCLS, CBIS, **Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, Keri Helmick, BSN, RN**, and Margaret Strickland. (2021). Methodological Challenges Encountered in a Study of the Impact of Animal-Assisted Intervention in Pediatric Heart Transplant Patients. *Association of Child Life Professionals (ACLP) Monthly*, June 2021.

Mary Gordon, PhD, APRN, CNS-BC, **Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN**, Curt Braun, PhD, Joseph Hagan, ScD, and Austin Lovenstein, MBA, MA, BS, CRS. (2021). Parents’ Perception of Fall Risk and Incidence of Falls in the Pediatric Ambulatory Environment. *Journal of Pediatric Nursing, 61*, 424-432. doi: 10.1016/j.pedn.2021.09.028

Stephanie Benning, MSN, APRN, PCNS-BC, CPN, Rhonda Wolfe, RN, Monica Banes, MSN, RN, CPN, Leah Moten, BSN, RN, CPN, **Toni Lynch, BSN, RN, CPN, Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN**, and Mary Gordon, PhD, APRN, CNS-BC. (2021). Call to Action: Addressing Pediatric Fall Safety in Ambulatory Environments. *Journal of Pediatric Nursing, 61*, 372-377. doi: 10.1016/j.pedn.2021.09.012

NURSING RESEARCH

Melinda Colleen Brand, PhD, Holly Shippey, MSN, Joseph Hagan, ScD, MSPH, Sandra K Hanneman, PhD, Barbara Levy, BSN, Stefany Range, BSN, Nattaya Wongsuwan, MSN, Amy Zodin, BSN, and **Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN**. (2021). Comparison of Psychological and Physiological Stress in NICU Nurses: Effects of Unit Design and Shift. *Advances in Neonatal Care*, 21(4), E93-E100. doi: 10.1097/ANC.0000000000000837

Sabra Curry, APRN, NNP-BC, Ellen Mallard, DNP, APRN, ACCNS-N, CWOCN-AP, RNC-NIC, Elizabeth Marrero, MSN, RN, CNOR(e), CIC, Melinda Walker, MSN, RN, RNC-NIC, Robin Weeks, MSN, RNC-NIC, Allen Harrison, MD, BSN, CCRP, Melany Temple, MSN, RNC-NIC, NE-BC, Cara Holland, BSN, RN, RNC-NIC, and Katherine Brandon, BSN, RN. (2021). The Impact of a Dedicated Nurse on the Prevention of Central Line-Associated Bloodstream Infections in the NICU. *Neonatal Network*, 40(2), 88-97. doi: 10.1891/0730-0832/11-T-658

Stephanie Evans, MSN, RN, CPPS, Angela Green, PhD, RN, FAAN, CPHQ, Angela Roberson, MNsc, RN, APRN, PCNS-BC, FCNSI, Tammy Webb, MSN, RN, NE-BC, and Christopher Edwards, MD. (2021). Implementing a Watcher Program to Improve Timeliness of Recognition of Deterioration in Hospitalized Children. *Journal of Pediatric Nursing*, 61(Nov-Dec 21), 151-156. doi: 10.1016/j.pedn.2021.05.011

Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Austin Lovenstein, MBA, MA, BS, CRS, Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, Beverly Spray, PhD, Anthony Denton, Jodie McGinley, Leah Eisenberg, JD, MA, HEC-C, Greg Adams, LCSW, ACSW, FT, Sergeant Jeffrey Plunkett, Officer Henry Moore, Clayton Goddard, RN, Paramedic, Charles Wooley, RN, CPEN, Paramedic, and Staci McElroy, BSN, RN, CCRN. (2021). Perceptions of the Moral Obligations of Pediatric Nurses During an Active Shooter Event in a Children's Hospital. *Journal of Pediatric Nursing*, 60 (Sep-Oct 2021), 255-259. doi: 10.1016/j.pedn.2021.07.014

Denise Willis, MS, RRT, RRT-NPS, AE-C, Austin Lovenstein, MBA, MA, BS, CRS, Beverly J. Spray, PhD, **Michele Honeycutt, MNsc, RN, CIC, FAPIC, and Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN**. (2021). Practices and Perceptions of Face Mask Use in a Pediatric Health System During the COVID-19 Pandemic. *Respiratory Care*, 66(7), 1096-1104. doi: 10.4187/respcare.08944

Xiomara Garcia, MD, Elizabeth Frazier, MD, **Janie Kane, MS, APRN, PCNS-BC, Amber Jones, MSN, RN, NE-BC, Carrie Brown, MD, Tonja Bryant, BSN, RN, and Parthak Prodhon, MD**. (2021). Pediatric Critical Care Transport and Palliative Care: A Case Series. *American Journal of Hospice and Palliative Medicine*, 38(1), 94-97. doi: 10.1177/1049909120928280

LOCAL AND REGIONAL PODIUM PRESENTATIONS

Union University Doctoral Student Orientation Workshop, December 4, 2020, Virtual, Jackson, TN

- Elizabeth "Charley" Elliott, PhD, APRN, NNP-BC, **Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN**, and Andrew Ghayreb, MA, MT-BC. And the Beat Goes On: Heartbeat Recordings through Music Therapy for Parents of Children with Progressive Neurodegenerative Illnesses.

NURSING RESEARCH

Southern Society of Pediatric Research - Southern Regional Meeting, February 13, 2020, New Orleans, LA

- **Katherine Mason, MSN, BSN, PNCP.** Got Polio? A QI Project Improving Vaccination Rates in Off-Therapy Cancer Patients at Arkansas Children's Hospital.

Innovations and Improvement Council, Seattle Children's Hospital, January 20, 2021, Virtual, Seattle, WA

- **Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN,** Austin Lovenstein, MBA, MA, BS, CRS, Anthony Denton, Greg Adams, LCSW, ACSW, FT, Leah Eisenberg, JD, MA, HEC-C, Clayton Goddard, **Staci McElroy, BSN, RN, CCRN,** Jodie McGinley, Henry Moore, Jeffrey Plunkett, **Amy Ramick, DNP, RN, ACNS-BC, NPD-BC,** Beverly Spray, PhD, **Stephanie White, BSN, RN, CPN, VA-BC,** and **Charles Wooley, RN, CPEN.** Run-Hide-Fight: Perceptions of the Moral Obligation of Pediatric Nurses in an Active Shooter Event.

2021 Arkansas Nursing Research Conference, April 9, 2021, Virtual, Little Rock, AR

- Austin Lovenstein, MBA, MA, BS, CRS, **Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Amy Ramick, DNP, RN, ACNS-BC, NPD-BC,** Beverly Spray, PhD, Anthony Denton, Jodie McGinley, Leah Eisenberg, JD, MA, HEC-C, Greg Adams, LCSW, ACSW, FT, Sergeant Jeffrey Plunkett, Officer Henry Moore, Major Clayton Goddard, RN, Paramedic, **Charles Wooley, RN, CPEN, Paramedic,** and **Staci McElroy, BSN, RN, CCRN.** Run-Hide-Fight: Perceptions of the Moral Obligation of Pediatric Nurses in an Active Shooter Event.
- **Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN,** Elizabeth "Charley" Elliott, PhD, APRN, NNP, Andrew Ghayeb, MT-BC, NMT, Austin Lovenstein, MBA, MA, BS, CRS, **Amy Ramick, DNP, RN, ACNS-BC, NPD-BC,** Greg Adams, LCSW, ACSW, FT, Brent Fairchild, BA, MDiv, BCC, and Brian Schreck, MA MT-BC. Heartbeat Recordings Through Music Therapy for Parents of Children with Progressive Neurodegenerative Illnesses.

Arkansas State University Alliance for Grief and Loss Seminar, April 16, 2021, Virtual, Jonesboro, AR

- **Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN,** and Andrew Ghayeb, MT-BC, NMT. Legacy Creation through Music Therapy Heartbeat Recordings.

University of Tulsa School of Nursing Distinguished Lecture, October 1, 2021, Tulsa, OK

- **H. Allen Harrison, MD, BSN, CCRP.** A Non-Traditional Path: The Experiences of Dr. Allen Harrison.

NATIONAL AND INTERNATIONAL PODIUM PRESENTATIONS

Sigma's 31st International Nursing Research Congress: Congress 2020, July 24, 2020, Virtual

- Mary Gordon, PhD, APRN, CNS-BC, **Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN,** Curt C. Braun, PhD, and Joseph L. Hagan, ScD. Parental Survey to Access Risk Factors and Incidence of Falls in Pediatric Ambulatory Services.

NURSING RESEARCH

National Pediatric Nurse Scientist Collaborative, October 16, 2020, Virtual

- **Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN**, and Elizabeth “Charley” Elliott, PhD, APRN. And the Beat Goes On: Heartbeat Recordings through Music Therapy for Parents of Children with Progressive Neurodegenerative Illnesses.

34th Annual Gravens Conference, March 3, 2021, Virtual

- Amy Smith, PhD, CCLS, MT-BC, Colleen Brand, PhD, Christopher Rhee, MD, Joseph Hagan, ScD, MSPH, **Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN**, Helen Shoemark, PhD, RMT, Alix Brickley, MM, MT-BC, and Patricia A. McIver, BSN. The Effects of Live Contingent Singing on Preterm Neonates with Bronchopulmonary Dysplasia.

National Pediatric Nurse Scientist Collaborative: A Research Network, August 17, 2021, Virtual

- **Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN**. Perceptions of the Moral Obligations of Pediatric Nurses During an Active Shooter Event in a Children’s Hospital.

2021 ANCC Pathway to Excellence and ANCC National Magnet Conference, November 11, 2021, Atlanta, GA

- **Stephanie Benning, MSN, APRN, PCNS-BC, CPN**. Behavioral Risk Precautions: Improving Workplace Safety.

LOCAL AND REGIONAL ORAL POSTER PRESENTATIONS

2021 Arkansas Nursing Research Conference, April 9, 2021, Virtual, Little Rock, AR

- **Julie Bane, MS, BSN, RN, NPD-BC**. Evidence Based Practice Beliefs in New Graduate Nurses.
- **Michael Evans, BSN, RN**, Paula Grigorian, MD, Tonya Thompson, MD, MA, and Abdallah Dalabih, MD, MBA. Deep Sedation for Ophthalmology Procedures in an Outpatient Setting.
- **Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, Mary Salassi-Scotter, MNsc, RN, BC-NE, Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Amy Huett, PhD, RN, NPD-BC**, and Austin Lovenstein, MBA, MA, BS, CRS. Self-Care for Healthcare: A COVID-19 Self-Assessment for Nurses and Nurse Leaders at Arkansas Children’s.
- **Shonda Grappe, BSN, RN, CCRN, Holly Hanson, BSN, RN, CCRN, Blair Langston, MSN, RN, CCRN**, Matthew P. Malone, MD, and Eric Braden, CHSOS, NREMT-B. Process Improvement through Interdisciplinary Simulation within the Pediatric Intensive Care Unit.

NURSING RESEARCH

NATIONAL AND INTERNATIONAL POSTER PRESENTATIONS

Society of Pediatric Nurses (SPN) Conference, April 22, 2020, Anaheim, CA

- **Ginger McEarl, MSN, RN, CPN.** The Impact of Bedside Reporting on Patient Safety Events, Patient Satisfaction, and Nurse Accountability in an Acute Care Pediatric Unit of a Large Academic Children's Hospital.

Society of Pediatric Sedation Conference, October 31, 2020, Virtual

- **Michael Evans, BSN, RN,** Paula Grigorian, MD, Tonya Thompson, MD, MA, and Abdallah Dalabih, MD, MBA. Deep Sedation for Ophthalmology Procedures in an Outpatient Setting.

Society of Critical Care Medicine 50th Annual Congress, January 31, 2021, Virtual, Anaheim, CA

- **Michael Evans, BSN, RN,** Paula Grigorian, MD, Tonya Thompson, MD, MA, and Abdallah Dalabih, MD, MBA. Deep Sedation for Ophthalmology Procedures in an Outpatient Setting.

Academy of Neonatal Nurses (ANN) 2021 Spring Advanced Practice & Low Risk Neonatal Nurses Conference, April 14, 2021, Virtual, Honolulu, HI

- **Brittani Arnold, DNP, MSN, APRN, NNP-BC, CCRN-N, RNC-NIC.** The Utilization of an Evidence-Based NICU Specific Ventilator-Associated Pneumonia (VAP) Bundle with Compliance Checklist to Reduce VAP Rates: A Quality Improvement Project.

University of Iowa Evidence-Based Practice Conference, April 14, 2021, Virtual, Iowa City, IA

- **Amy Williams, BSN, RN.** Improving the Recognition of Celiac Disease in Pediatric Primary Care.

American Organization for Nursing Leadership, July 11 – 14, 2021, Washington, DC

- Angela Green, PhD, RN, CPHQ, FAAN, Tammy Webb, MSN, RN, NE-BC, and **Lee Anne Eddy, DNP, RN, NEA-BC.** Sources of Professional Stress and Satisfaction for Pediatric Nurses.

Association of Nursing Professional Development (ANPD) 2021 Annual Convention, August 3, 2021, Chicago, IL

- **Nici Belknap, MSN, RN, NPD-BC, RNC-NIC.** NICU Morsels of Knowledge: Engaging Nurses in Professional Development One Morsel at a Time.

NURSING RESEARCH

EVIDENCE-BASED PRACTICE SUMMARIES

Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Jeannie DeLoach, BSN, RN, CPN. (2020). *Current Evidence and Scope of Practice for Refeeding Ostomy Contents Back Through Mucosal Fistula.*

Question 1: In pediatric patients, is mucosal fistula refeeding (MFR) of fluids into the intestine of pediatric patients supported with evidence?

Question 2: Is mucosal fistula refeeding within the scope of practice for nursing?

Grade Criteria: Weak recommendation with low-level evidence to support the practice of MFR. Benchmarking data indicates this practice is within the scope of nursing, and if appropriate, education and competencies are developed is in agreement with the Arkansas State Board of Nursing's decision-making model.

Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Clinical Practice Council. (2020). *Transpyloric vs Nasogastric Feeds.*

Question: In neonates, how does transpyloric (TPF) compare to gastric (GF) in avoiding lung injury and/or pulmonary aspiration?

Grade Criteria: Weak recommendation with low-level evidence to support the early implementation of TPF in very early preterm infants.

Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Teresa Crutchfield, BSN, RN, RN-NIC. (2020). *Gonad Shielding in Neonates.*

Question 1: In neonates, how does gonad shielding compare to no gonad shielding affect radiation dosing?

Question 2: Does evidence and current recommendations support the current practice of not shielding the gonads of neonates in the neonatal intensive care unit (NICU)?

Grade Criteria: High-level evidence for strong recommendation to resume gonad shielding for male neonates. Moderate-level evidence with conflicting recommendations for excluding female neonates from gonad shielding.

Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Shirley Elmendorf, BSN, RN, RNC-NIC. (2020). *Implementing Safe Sleep Interventions in the Neonatal Intensive Care Unit (NICU) with Neonates Displaying Gastro-Esophageal Reflux (GER).*

Question: In neonates displaying gastro-esophageal reflux (GER), does elevating the head of the bed and placing neonates in the prone position reduce the likelihood of aspiration compared to American Academy of Pediatrics (AAP) recommendations for placing stable neonates greater than 32-weeks post-menstrual age in the flat, supine position.

Grade Criteria: Moderate recommendation with weak-level evidence that all stable neonates over 32-weeks post-menstrual age should be placed in the supine, flat position for sleep. Implementation of all Safe Sleep interventions is recommended by the AAP.

NURSING RESEARCH

Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Karalyn Kerby, BSN, RN, CPN. (2020). *Drive-Through Immunization for Pediatric Patients.*

Question: In healthy pediatric patients requiring immunizations, what is the effect of a drive-through service compared to traditional face-to-face clinic immunizations?

Grade Criteria: Strong recommendation with very low-level evidence to support drive-through immunizations for healthy pediatric patients.

Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Sondra McNatt, BSN, RN, CNOR. (2020). *Reducing Post-Operative Hypothermia in PACU; Warming Device vs. Warmed Cotton Blankets.*

Question: In pediatric outpatient dental surgery patients, does the use of forced air warming (FAW) (Bair Hugger) reduce unplanned perioperative hypothermia (UH) when compared to standard care of warmed cotton blankets?

Grade Criteria: Moderate recommendation with low-level evidence to support the use of FAW pre-, intra-, and post-operatively in addition to other thermal management bundle interventions to reduce the likelihood of unplanned hypothermia in pediatric outpatient dental surgery patients.

Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Angela Roberson, MNsc, RN, APRN, PCNS-BC, FCNSI. (2020). *Rectal Temperature Policy Update.*

Question: In pediatric patients, is the current policy of Arkansas Children's Hospital (ACH) regarding rectal temperature measurement supported by current evidence?

Grade Criteria: Strong recommendation with very high-level evidence to support current policy for obtaining rectal temperatures in pediatric patients.

Amy Ramick DNP, RN, ACNS-BC, NPD-BC, and Leslie Rylee, MSN, RN, NE-BC. (2020). *Using Hare Traction in Pediatric Patients.*

Question 1: In pediatric patients with orthopedic injury, is Hare Traction supported for therapy longer than initial injury or transport?

Question 2: In pediatric patients with orthopedic injury using Hare Traction, is it within the scope of practice for nursing staff to manipulate traction settings?

Grade Criteria: The conclusion of this review is there is no evidence to support the use of the Hare Traction device in pediatric patients in the inpatient setting beyond the initial injury period. After a careful review of the Arkansas Nurse Practice Act, current Arkansas Children's policies, and Elsevier Clinical Skills it is not within the scope of practice for Registered Nurse to manipulate traction or adjust weights.

Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Stephanie White, BSN, RN, CPN, VA-BC. (2020). *Longevity of Ultrasound Guided Extended Dwell Peripheral Intravenous Catheters (PIV).*

NURSING RESEARCH

Question: In pediatric patients, does ultrasound guidance for insertion of extended dwell PIV affect dwell time when compared to extended dwell PIV insertion without ultrasound guidance?

Grade Criteria: Moderate recommendation with moderate-level evidence to support the ultrasound guidance for extended dwell PIV insertion.

Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Shannon Wyatt, MSN, RN, CCRN. (2020). *Mindfulness Training and Retention of New Graduate Nurses.*

Question: In new graduate nurses (NGN), does training in mindfulness exercises reduce stress during and improve the retention rates after orientation?

Grade Criteria: Strong recommendation with medium-level evidence in support of incorporating mindfulness training during the orientation of NGNs to reduce stress and increase retention rate.

Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Mandy Yelvington, MS, OTR/L, BCPR, BT-C. (2020). *Using Telehealth in Occupational Therapy.*

Question: In patients requiring occupational therapy services, are outcomes measured equivalent for telehealth sessions when compared to face-to-face traditional sessions?

Grade Criteria: Strong recommendation with moderate-level evidence to support the use of telehealth for Occupational Therapy visits.

Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, Stephanie Benning MSN, APRN, PCNS-BC, CPN, and Justin Smith, BSN, CPN, MSE. (2021). *Efficacy of Oral Antibiotics vs. Intravenous Antibiotics in Post-Operative Neurosurgery Patients.*

Question: In post-operative pediatric neurosurgical patients, is administration of prophylactic antibiotic doses given intravenously (IV) more effective than oral (PO) doses for preventing post-operative surgical infections?

Grade Criteria: There is no evidence to directly support or refute the use of PO antibiotics postoperatively in pediatric neurosurgical patients.

Jade Anschultz, AASN, RN, Devin Byrd, RN, Briana Crowder, AASN, RN, Kaityln Davis, RN, Allie Dopson, BSN, RN, Meredith Krupka, BSN, RN, Lucy Moore, RN, Julian Rodriguez, AND, RN, Jennifer Scott, BSN, RN, Jordan Shields, BSN, RN, Gabrielle Stukel, BSN, RN, Michaela Weatherly, RN, Hailey Webb, RN, Hannah Whatley, BSN, RN, and Hunter Whatley, BSN, RN; Brittany Barnello, RN, Anna Ledbetter, RN, Tori Raphael, RN, Sarah Shamlin, RN, Sarah Shaw, RN, Kayla Stephens RN, Meredith Hammontree, RN, Scott Austin, RN, Rachel Browning, RN, Alyssa Duff, RN, Erica Kelly, RN, Kindell Carr, RN, Alex Lipe, RN, Annie Barrow, RN, Hannah Schwartz, RN, Darla Miller, RN, Ashland Bourn, RN, Tiffany Garner, RN, and Zuheily Almaraz, RN; Mentors: Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Amy Huett, PhD, RN, NPD-BC. (2021). *Standardized Nursing Hand-Off.*

NURSING RESEARCH

Question: In pediatric nursing practice, does standardized nursing handoff improve quality of nursing care compared to non-standardized handoff?

Grade Criteria: Moderate recommendation with low-level evidence to support the use of a standardized nursing handoff process.

Zach Abler, BSN, RN, Lizzie Allgood, BSN, RN, Abby Baker, ASN RN, Emily Balliviero, BSN, RN, Mary Helene Brady, BSN, RN, Darius Brown, BSN, RN, Kathryn Burrow, ASN, RN, Rayonna Carr, SN, RN, Thohmas, Congdon, BSN, RN, Billy Cooper ASN, RN, Alyssa Dixon, BSN, RN, Alexis Doyle, BSN, RN, Rebecca Filler, BSN, RN, Aubree Furman, BSN, RN, Ethan Gachot, BSN, RN, Maggie Germany, BSN, RN, Tegin Gilliam ASN, RN, Carmen Gresham, ASN, RN, Keeleigh Homesley, ASN, RN, Sarah Howard, ASN, RN, Ashlee Hughey, BSN, RN, Mikalya Lemley, BSN, RN, Katherine Lercher, BSN, RN, Annabel Loyd, ASN, RN, Maria Martinez BSN, RN, Kate Mead, BSN, RN, Sydney Morton, BSN, RN, Grace Murphy, BSN, RN, Katherine Rivas, BSN, RN, Quinn Rolfe BSN, RN, Shelby Scott ASN, RN, McKenzie Siegler, ASN, RN, Alyssa Talkington, BSN, RN, Amber Tims, BSN, RN, Randee Toye, BSN, RN, Ari Valencia, ASN, RN, Kayla Woods-Gray, BSN, RN, Taylor Wu, BSN, RN, and Carrie Ann Wyatt, ASN; *Mentor: Amy Ramick, DNP, RN, ACNS-BC, NPD-BC. (2021). Mindfulness for Pediatric Nurses.*

Question: In pediatric nursing practice, does training in mindfulness exercises reduce stress and improve performance when compared to not practicing mindfulness?

Grade Criteria: Moderate recommendation with low-level evidence to support the use of a mindfulness exercises to reduce stress and improve performance in pediatric nurses.

Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Brian Ballard, RN, NREMT. (2021). The Efficacy of Using Pre-Filled 3ml NS Syringes Versus 10ml NS Syringes on Pediatric Patients During PIV Starts to Prevent Infiltrations.

Question: In pediatric patients, is the use of commercially pre-filled 3 ml Normal Saline (NS) syringes versus 10ml NS syringes during peripheral intravenous (PIV) starts more efficacious for successful cannulation?

Grade Criteria: There is no recommendation due to lack of evidence to guide practice.

Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Stephanie Benning MSN, APRN, PCNS-BC, CPN. (2021). Pump Regulated External Ventricular Drainage.

Question 1: Is the use of reverse threaded intravenous infusion pumps to regulate drainage from external ventricular drains (EVD) compared to the standard of gravity drainage supported by evidence?

Question 2: What is the current standard of care for management of EVDs in pediatric patients?

Grade Criteria Question 1: Weak recommendation with low-level evidence to support the use of a reverse threaded infusion pump to regulate drainage from EVD.

Grade Criteria Question 2: Current clinical practice guidelines exist to guide the development of EVD management practices.

NURSING RESEARCH

Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Elizabeth Jaeger, BSN, RN, CPN. (2021). *Current Recommendations for Replacement/Removal of Percutaneous Endoscopic Gastrostomy Tubes.*

Question: In pediatric patients, is there an evidence-based recommendation for the timing of removal/replacement of a PEG tube 3 months after placement compared to 6 months after placement?

Grade Criteria: There is no evidence to support the timing of PEG tube replacement in pediatric patients.

Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Brittany Wade, BSN, RN, CCRN. (2021). *Use of Weighted Blankets with Intubated Patients in the Pediatric Intensive Care Unit.*

Question: In pediatric intubated patients, will the use of a weighted blanket reduce the amount of sedation needed when compared to sedation needed without a weighted blanket?

Grade Criteria: Weak recommendation with low-level evidence to support the use of weighted blankets for intubated pediatric patients.

Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Dake Holmes, BSN, RN, CCRN. (2021). *Keep Vein Open Rate for Adult Patients with Congenital Heart Defects.*

Question: In adult patients with congenital heart defects is there a recommended keep vein open rate supported by evidence?

Grade Criteria: No recommendation due to lack of evidence to guide practice.

Marlene Walden, PhD, APRN, NNP-BC, CCNS, CRS, FAAN. (2021). *Staffing Models to Improve COVID-19 Surge Capacity in a Children's Hospital.*

Question: In a children's academic hospital, what staffing models can improve nursing surge capacity during the COVID-19 pandemic?

Grade Criteria: Weak recommendation with low-level evidence to support the use of team-based nursing approach that utilizes a staffing mix of critical care nurses and a temporary deployment of nurses from non-critical care areas to care for COVID-19 patients during surge conditions.

Allred, Jasmine, BSN, RN, Barnes, Olivia, ASN, RN, Lane Boyd, BSN, RN, Renee Bryan ASN, RN, Karsten Burdin, BSN, RN, Maggie Catteau, BSN, RN, Savannah Clifton, BSN, RN, Annie D'Spain BSN, RN, Bethany Estes, BSN, RN, Jaymi Fields, ASN, RN, Jessica Flis, BSN, RN, Tess Frost, BSN, RN, Abigail Green, ASN, RN, Ella Greer, BSN, RN, Jasiel Guardado, ASN, RN, Ana Guerrero, BSN, RN, Tayler Harmon, BSN, RN, Ally Henderson, BSN, RN, Rachel Huntze BSN, RN, Morgan King, BSN, RN, Macy Matlock, BSN, RN, Sabrina Maxfield, BSN, RN, Dana McIntosh, BSN, RN, Haley Morton, BSN, RN, Presley Mullins, BSN, RN, Brittany Pehrson, BSN, John Poole, ASN, RN, Shelby Powell, BSN, RN, Hannah Reynolds, BSN, RN, Emma Sherpa, BSN, RN, Laura Sifuentes, BSN, RN, Sophe Sligh, BSN, RN, Hannah Stanton, BSN, RN, Madison Stewart BSN,

NURSING RESEARCH

RN, Abigail Sullins BSN, RN, Sydney Summers, BSN, RN, Cassie Taylor, BSN, RN, Erin Tilley, BSN, RN, KeLontra Toombs, ASN, RN, Ashley Wade, BSN RN, Maddie Werley, BSN, RN, and Mandy Wermann, BSN, RN; Mentors: Marlene Walden, PhD, APRN, NNP-BC, CCNS, CRS, FAAN, and Amy Ramick, DNP, RN, ACNS-BC, NPD-BC. (2021). *Patient Aggression Toward Nurses.*

Question 1: In pediatric nursing practice, what is the impact of patient aggression on nurses' psychological well-being?

Question 2: How do healthcare leaders and institutions best support pediatric nurses psychological well-being following an incident of patient aggression in the workplace?

Grade Criteria: Moderate recommendation with low-level evidence to support increased training, organizational and respite programs, blame-free reporting and enhanced security to assist staff after an incident of patient aggression in the workplace.

Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Shannon Wyatt, MSN, RN, CCRN. (2021). *Update Current Summary on Mindfulness Training for Nurses.*

Question: In nurses, does training in mindfulness exercises reduce stress during and improve the stress and mindfulness attention scores?

Grade Criteria: Strong recommendation with medium level evidence in support of incorporating mindfulness training during the orientation of new graduate nurses to reduce stress and increase retention rate.

Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Lindsey Ward, BSN, RN, CPN, CPHON. (2021). *Temporal vs Axillary Temperature Accuracy. (Update)*

Question: In pediatric patients is the current policy of Arkansas Children's Hospital regarding temperature measurement supported by clinical evidence?

Grade Criteria: Strong recommendation with high-level evidence to support rectal temperature measurements for routine vitals in pediatric patients.

Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Joanna Carpenter, MSN, RN, NPD-BC. (2021). *Aggression Prevention and De-Escalation Training for Healthcare Workers in Pediatric Settings.*

Question: In pediatric settings, what is the best evidence for aggression prevention/de-escalation training for healthcare workers?

Grade Criteria: Weak recommendation with low-level evidence to support specific aggression prevention/de-escalation training for healthcare workers.

Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Jamie Bandy, MPSA. (2021). *The Impact of COVID-19 on Pediatric Dental Care.*

NURSING RESEARCH

Question 1: Did COVID-19 impact dental clinical outcomes in children?

Question 2: Did COVID-19 impact dental financial outcomes in children?

Grade Criteria: Evidence supports that the COVID-19 pandemic has had a significant impact on the overall provision of dental health services to children. Moreover, children who are from lower socioeconomic backgrounds may experience higher levels of dental disease and more difficulty in accessing dental care

Amy Ramick, DNP, RN, ACNS-BC, NP-D-BC, and Tiffany Smallwood, BSN, RN, CPN. (2021). *Development of Routine Admission Orders for Emergency Room Admissions.*

Question: In pediatric emergency departments, does the use of nurse-initiated interventions improve patient throughput to inpatient units?

Grade Criteria: Moderate recommendation with medium-level evidence to support nurse initiated interventions in the emergency department to improve throughput to inpatient units.

CURRENT RESEARCH PROJECTS

Debra Jeffs, PhD, RN, NP-D-BC, FAAN, Tiffany Teague, MSN, APRN, FNP-BC, Esther Huah-Chi Teo, MD, Alice Fagan, MD, Elizabeth Marrero, MSN, RN, CNOR(e), CIC, Shasha Bai, PhD, Lauren Baxley, BSN, RN, CCRN, Elissa Annesley-DeWinter, RN, CCRN, Amber Files, MSN, RN, Marlijne Cook, Mandy Yelvington, MS, OTR/L, BCPR, BT-C, Julie Nick, BS, Sunitha Kenchey, MS, Eric Braden, CHSE, CHSOS, EMT-B, and Beverly J. Spray, PhD. Novel Virtual Reality for Burn Wound Care Pain in Adolescents.

Debra Jeffs, PhD, RN, NP-D-BC, FAAN, Mistie Cook, BSN, RN, CPN, CPHON, Amy Allen, MSN, RN, NE-BC, Helyn Jones, MBA, RN, CPN, Lindsey Miller, BSN, RN, CPHON, CPN, Tammy Mobley, BSN, RN, PCCN, Carol Oldridge, BSN, RN, CPN, CPHON, Lindsey Ward, BSN, RN, CPN, CPHON, Renee Hunte, MA, CCLS, and Beverly J. Spray, PhD. Virtual Reality for Implantable Port Access in Adolescents with Cancer.

Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Mandy Yelvington, MS, OTR/L, BCPR, BT-C, Austin Lovenstein, MBA, MA, BS, CRS, Amy Ramick, DNP, RN, ACNS-BC, NP-D-BC, Frank Bregy, OTR/L, CBIS, NDT, Michael Nelson, PT, MSPT, PCS, Angela Roberson, MNSc, RN, APRN, PCNS-BC, Blaire Ross, MS, CCLS, Beverly J. Spray, PhD, and Vikki Stefans, MD. Impact of Animal Assisted Intervention in Hospitalized Children with Acquired or Traumatic Brain Injury Undergoing Pediatric Rehabilitation.

Michael Evans, BSN, RN, Abdallah Dalabih, MD, MBA, Tonya Thompson, MD, MA, Paula Grigorian, MD, and Christine Hsu, MS. Pediatric Sedation and Ophthalmology: Comparing the Risk of Deep Sedation in Ophthalmology Cases to Other Procedural Sedation Cases Performed Outside of the Operating Room.

NURSING RESEARCH

Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Austin Lovenstein, MBA, MA, BS, CRS, Andrew Ghrayeb MT-BC, NMT, Greg Adams, LCSW, ACSW, FT, **Alexandria Barber, BSN, RN, RNC-NIC, Juliane Crafton, RN**, Elizabeth “Charley” Elliott, PhD, APRN NNP-BC, **Rachel Picking, MSN, RN, CPN**, Elena Rabago, MS, CCLS, **Amy Ramick, DNP, RN, ACNS-BC, NPD-BC**, and Miranda White, LCSW. Heartbeat Recordings through Music Therapy for Bereavement and Legacy Creation in Parents of Neonates with Life-Limiting Conditions.

Megan Hoyt, BSN, RN, CPN, and Debopam Samanta, MD. Epilepsy Care Experiences in the Complex Epilepsy Clinic.

Stephanie Benning, MSN, APRN, PCNS-BC, CPN, Lisa M. Kath, PhD, **Amy Decker, MS, RN, LAMFT, LAC, CPN**, and **Madyson Harmon, BSN, RN**. Effects of Direct and Indirect Experiences of Patient Behavioral Events.

Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Austin Lovenstein, MBA, MA, BS, CRS, **Stephanie Benning, MSN, APRN, PCNS-BC, CPN**, Greg Adams, LCSW, ACSW, FT, **Amy Decker, MS, BSN, LAC, LAMFT, CPN, Crissy Allen-Doyle, RN, BSN, CCRN, Maria Eilers, MSN, RN, CPN**, and **Amy Ramick, DNP, RN, ACNS-BC, NPD-BC**. Understanding the Lived Experience of Patient Aggression Towards Nurses and Care Attendants Within a Children’s Hospital.

COMPLETED RESEARCH PROJECTS

Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Austin Lovenstein, MBA, MA, BS, CRS, Andrew Ghrayeb, MT-BC, NMT, Greg Adams, LCSW, ACSW, FT, Brent Fairchild, MDIV, BCC, Charley Elliott, PhD, APRN NNP-BC, **Amy Ramick, DNP, RN, ACNS-BC, NPD-BC**, and Brian Schreck, MA, MT-BC. And the Beat Goes On: Heartbeat Music Therapy for Children with Progressive Neurodegenerative Illness.

Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Austin Lovenstein, MBA, MA, BS, CRS, Anthony Denton, Greg Adams, LCSW, ACSW, FT, Leah Eisenberg, JD, MA, HEC-C, Clayton Goddard, **Staci McElroy, BSN, RN, CCRN**, Jodie McGinley, Henry Moore, Jeffrey Plunkett, **Amy Ramick, DNP, RN, ACNS-BC, NPD-BC**, Beverly Spray, PhD, **Stephanie White, BSN, RN, CPN, VA-BC**, and **Charles Wooley, RN, CPEN**. Run-Hide-Fight: Perceptions of the Moral Obligation of Nurses in an Active Shooter Event.

Sara Neal, BSN, RN, CPN, CPHON, Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Feliciano “Pele” Yu, Jr., MD, Shelly Randall, PhD, RN, CNE. Mindfulness Sessions for Prevention of Compassion Fatigue in Pediatric Oncology Nurses.

Denise Willis, MS, RRT-NPS, AE-C, **Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN**, Austin Lovenstein, MBA, MA, BS, CRS, **Michelle D. Honeycutt, MNSC, RN, CIC FAPIC**, and Beverly J Spray, PhD. Practices and Perceptions of Face-Mask Use in a Pediatric Health System During the Covid-19 Pandemic.

NURSING RESEARCH

QUALITY IMPROVEMENT PROJECTS

Connie Banks, Nici Belknap, MSN, RN, NPD-BC, RNC-NIC, Tracey Bradley-Simmons, MSN, RN, CCM, Wendy Cole, Allison Conrad, BSN, RN, RNC-NIC, CLC, Lindsey Droste, MSN, CNL, RNC-NIC, IBCLC, CPST, Delaney Grubbs, Jennifer Henthorne, MSN, RN, RNC-NIC, Jasa Horne, Rhonda Huston, BSN, RNC-NIC, Dalton Janssen, MSN, RNC-NIC, Luann Jones, DNP, APRN, NNP-BC, NE-BC, Carol McAden, Anna Standridge, Melany Temple, MSN, RNC-NIC, NE-BC, Sara Traylor, Kari West, MSN, RN, RNC-NIC, and Caroline Woodson BSN, RNC-NIC. (2020). iNICQ Vermont Oxford Network Experience-Based Co-Design Project.

Stephanie Benning, MSN, APRN, PCNS-BC, CPN, Ginger McEarl, MSN, RN, CPN, Ambre' Pownall, MSN, APRN, PPCNP-BC, and Shanna Prater, LPN. (2020). Neurology Clinic Visit Length.

Taira Bernard, MSN, MBA, RN, PNP-AC, Lisa Boyd, BSN, RN, CPEN, Thad Carter, BSN, RN, CPEN, Michelle Davis, APRN, MNsc, CPNP, Jill Felix, BSN, MHI, RN, CPEN, Erika Funmaker, APRN, MNsc, CPNP, Jill Jacobs, BSN, RN, CPEN, Jessica Parent, BSN, RN, CPEN, Bonnie Phillips, BSN, RN, CPEN, Lesa Slaughter, BSN, RN, CPEN, TCRN, Dyllen Wolfe, BSN, RN, CPEN, CPEN, and Cheley Yielding, BSN, RN, CPEN. (2020). Emergency Department Low Acuity Throughput.

Traci Hackler, RN, CPHON, Sydney Harrell, BSN, RN, Krystle Morgan, BSN, RN, CPHON, CPN, Carol Oldridge, BSN, RN, CPN, CPHON, and Whitney White, RN. (2020). HemOnc Preventing Lost Charges.

Jenny Janisko, DNP, MSN, RN, NE-BC, and Austin Lovenstein, MBA, MA, BS, CRS. (2020). Impact of TeamSTEPPS Implementation on the Patient Experience Scores in a Pediatric Intensive Care Unit.

Amber Jones, MSN, RN, NE-BC, Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, and Austin Lovenstein, MBA, MA, BS, CRS. (2020). Impact of Animal Assisted Intervention on Stress Reduction of CVICU Team Members at Arkansas Children's Hospital.

Mary Salassi-Scotter, MNsc, RN, BC-NE, Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Amy Huett, PhD, RN, NPD-BC, Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Austin Lovenstein, MBA, MA, BS, CRS. (2020). Self-Care for Healthcare: A COVID-19 Self-Assessment for Nurses and Nurse Leaders at Arkansas Children's.

Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Amy Huett, PhD, RN, NPD-BC, Lee Anne Eddy, DNP, RN, NEA-BC, and Debra Jeffs, PhD, RN, NPD-BC, FAAN. (2020). Use of the Council Health Survey to Assess and Transform Shared Governance at Arkansas Children's Hospital.

NURSING RESEARCH

Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Amy Huett, PhD, RN, NPD-BC, Lee Anne Eddy, DNP, RN, NEA-BC, Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Austin Lovenstein, MBA, MA, BS, CRS. (2020). Virtual Salons for the Soul: Using Technology and Laughter to Create Connectedness and Foster Resiliency Among Pediatric Nurses during the COVID-19 Pandemic.

Brian Ballard, RN, NREMT, Scottie Smith, BSN, RN, Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, and Austin Lovenstein, MBA, MA, BS, CRS. (2021). Recommended Syringe Size and Flush Volume when Initiating Peripheral Intravenous Catheters for Pediatric Patients in the Emergency Department.

Albrey Berber, DNP, APRN, PNP-PC. (2021). A 3 Year-Old Female with Global Developmental Delay in Primary Care.

Rebecca Botterweck, DNP, APRN, FNP-BC, CPN. (2021). Standard Fasting Instructions to Decrease Day of Surgery Cancellations.

Dominique Ford, BSN, RN, CPHON, CPN, Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, and Austin Lovenstein, MBA, MA, BS, CRS. (2021). Nurse Hand-Off Report Checklist in Hematology/Oncology at Arkansas Children's Hospital.

Jamie Bandy France, MPSA, **Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, and Austin Lovenstein, MBA, MA, BS, CRS. (2021).** Did COVID-19 Impact Clinical or Financial Outcomes of the Dental Outreach Programs?

Constance Gober, BSN, RN, CPN. (2021). Evaluation of Processes and Outcomes at Chicot Elementary & Stephens Elementary School-Based Clinics.

Sondra McNatt, BSN, RN, CNOR, Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN, and Austin Lovenstein, MBA, MA, BS, CRS. (2021). Maintaining Normothermia of Pediatric Surgical Patients in the Peri-Operative Setting at Arkansas Children's Hospital.

GRANTS AWARDED

Patricia N. Scott, DNP, RN, PNP, Ashley Davis, PhD, RN, **Debra Jeffs, PhD, RN, NPD-BC, FAAN, Leanne L. Lefler, PhD, RN, APRN, FAHA, FAAN, Margo Bushmaier, Alisa Haushalter, Tessie Bowmaker, Sarah Bemis, Jennifer Valentine, Stephanie Whiting, Tracy McClinton, Karen Hernan, Samantha Forir, Tina McElravey, MHA, Laura E. Gray, PhD, RN, CNE, and Dwayne Spencer** were awarded the Future of Nursing Campaign for Action: Nursing Innovations Fund Award for \$40,000 in October 2020 for two years for their project: Nurses Building a Culture of Health in the Arkansas-Tennessee Delta (Nurses CHAT). (2020)

NURSING RESEARCH

Michael Evans, BSN, RN, Abdallah Dalabih, MD, MBA, Tonya Thompson, MD, MA, Paula Grigorian, MD, and Christine Hsu, MS, were awarded \$5,000 through the ACRI/ABI Nursing and Allied Health Research Grant for the study, “Pediatric Sedation and Ophthalmology: Comparing the Risk of Deep Sedation in Ophthalmology Cases to Other Procedural Sedation Cases Performed Outside of the Operating Room.” (2020)

Megan Hoyt, BSN, RN, CPN, and study team were awarded \$5,000 through the ACRI/ABI Nursing and Allied Health Research Grant for the study, “Epilepsy Care Experiences in the Complex Epilepsy Clinic.” (2020)

Dalton Janssen, MSN, RNC-NIC, Marlene Walden, PhD, APRN, NNP-BC, CCNS, CRS, FAAN, Amy Ramick, DNP, RN, ACNS-BC, NPD-BC, Austin Lovenstein, MBA, MA, BS, CRS, **Debra Jeffs, PhD, RN, NPD-BC, FAAN, Dannis Armikarina, BSN, CCRN, Leslie Moore, BSN, RN, RNP, CPN, CPXP**, and Beverly Spray, PhD were awarded \$4,955 through the ACRI/ABI Nursing and Allied Health Research Grant for the study, “Impact of MyChart Information Release Mandate on Nurse, Patient, and Family Interactions in a Children’s Hospital”. (2021)





NURSING RESEARCH

Heartbeat Recordings Through Music Therapy for Parents of Children with Progressive Neurodegenerative Illnesses

Marlene Walden, PhD APRN NNP-BC CCNS FAAN; Elizabeth “Charley” Elliott, PhD APRN NNP;
Andrew Ghayeb, MA MT-BC; Austin Lovenstein, MBA MA BS; Amy Ramick, DNP RN ACNS-BC NPD-BC;
Greg Adams, LCSW ACSW FT; Brent Fairchild, BA MDiv BCC; Brian Schreck, MA MT-BC



Background

- Parents of children with progressive neurodegenerative illnesses (PNDI) experience chronic sorrow.



- Heartbeat recordings (HBR):
 - used by music therapist in pre-loss care.
 - forever preserves the sound of the child's heartbeat into a favorite song.
 - may serve as a lasting memory and a continuing bond with the child long after the child's death.

Purpose

- To describe the lived experiences of HBR for bereavement in the lives of parents of children with progressive neurodegenerative illnesses.

Methods

- Design: Husserl's phenomenology
- Setting: Arkansas Children's Hospital
- Participants: Purposeful sample of English speaking parents of children with PNDI
- Procedures
 - IRB approval from the University of Arkansas for Medical Sciences
 - Production of heartbeat recordings
 - Parental interviews at 3 months using semi-structured interview guide
- Data analysis
 - Data audited according to Colaizzi's methodology concurrently with mind mapping to capture themes

Demographics

Parents (n=11)

- Mean age was 36 years
- 82% were Caucasian, all female
- 80% were married and 55% worked full time

Child

- Mean age was 5 years
- 55% were male and 82% were diagnosed with a PNDI in utero or within the first year of life
- 4 children (36%) had died before the 3-month interview

Themes and Illustrative Quotes

1. BIFOCAL VIEW

Parental Lens: *Just the first thing that comes to my mind is how beautiful she was. [Chuckle] She had a real sweet, sweet little spirit, but she was a tough little booger too now. She was just full of love. She's precious. She was a blessing to us...* (P2)

Medical Lens: *... she had a brain disease, MLD, [metachromatic leukodystrophy]. When she was three, she started showin' signs of walking slow at first, and then she kinda gradually lost control of her hands. She couldn't eat... She started walking zigzaggin' and falling. It just progressed.* (P2)

2. NAVIGATING LIFE AND RELATIONSHIPS

Caregiver Fatigue: *"You don't realize how much it wears you down until you're like, I'm exhausted all the time, I can't think..."* (P5)

Marriage: *...My husband and I almost ended up getting a divorce, because ...it wasn't fair to him to have to be at home and be a single dad [while I was at the hospital] ...It was very hard for me to see my very loving husband just be distant, and hateful, and mean* (P7)

Job: *...you feel like you need to be at work, but then the other part of you is like, I don't really care what happens at work... Then you've got doctor's appointments several times a month. It's hard to balance it... you don't wanna feel like you're taking advantage of your job, being gone a lot, but then you know it's your child. What choice do you have?* (P5)

Grief and Loss: *It's devastating. You kinda mourn the life that you had planned for your child. ...You mourn that as a parent because it's definitely—it wasn't the life that you dreamed of. Cuz you have all these dreams of what you want your child to do and what you hope they'll become. It's like a loss. It really is.* (P5)

Brought Us Together: *...it was really hard, but it brought us together. ...I think we just relied on each other more* (P2)

Paying It Forward: *We... want to definitely do something to help other families... I'm actually a volunteer on the parent's advisory board at Children's now* (P11)

Themes and Illustrative Quotes (Cont.)

3. COPING THROUGH SPIRITUALITY

I hafta tell ya the Lord helped me get through it... I quit goin' to church cuz I had to stay home with her... That's when it was hard for me cuz I needed that. I needed the church... That's my strength. It wasn't like God abandoned me or anything or I abandoned Him. It was just like He was there. You know that song when He carries ya? When you don't know He's carryin' ya 'til later (P2)

4. LEGACY CREATION

Song Selection: *[The song] spoke to me in regards to her personality, how strong she was, how she's fought her entire life...It's a Christian song about how... your blessings can come from things that you didn't even realize were blessings. That's how she was. I had no idea that when I had her... that she would bless my life the way that she has. ...I'm a better person, and I'm a different person for having a child like her...* (P5)

Heartbeat Recording as a Connection: *[It] felt like a religious experience. It's the only way I know to describe it. It was sacred and quiet. It's like the world stopped for a little bit. It just helps me stop and take a breather, and I just listen, and it's like my heart synchs up with his, and it just helps me calm down* (P7)

I have a piece of him that I can hear for forever. It's not like he's just gone and I have to try and imagine it. I can hear it. It's like a dose of reality; it brings me back to earth, it brings him back to earth for a little bit (P7)

Conclusions

- HBR assisted in meaning-making that validated the child's life and supported the parents' expression of grief and their ability to cope.
- Further research is needed to validate the impact of HBRs in diverse populations.

NURSING RESEARCH



Impact of Bedside Nursing Report

Ginger McEarl, MSN, RN, CPN

Background

The main function of a bedside handoff report is to communicate pertinent patient information from one individual to another. Recent studies show that unstructured bedside reports that occur away from the bedside reduce patient satisfaction, decrease recognition of preventable errors, and place quality of patient care in jeopardy. According to The Joint Commission, approximately 80% of medical errors are credited to ineffective communication.

Purpose

The purpose of the quality improvement (QI) project was to determine: 1). If the implementation of bedside reporting in an acute care pediatric unit improved preventable errors through an event reporting system known as Safety Tracker, 2). Improve patient satisfaction scores in relation to provider communication, and 3). Increase nurse accountability by utilizing a standardized bedside reporting system.

Research Question

What is the impact of bedside reporting on patient safety events, patient satisfaction, and nurse accountability in a pediatric unit?

Methods

- Project Dates: December 2018 to January 2019.
- Conducted in a 356-bed pediatric teaching hospital on a 30-bed acute care medical-surgical unit that provides care to children 0-3, with an emphasis on tracheostomy and ventilated children.
- Staff were surveyed to collect pre/post data to assess the need for a standardized handoff reporting tool.

Methods (cont.)

- A SBAR handoff reporting tool was developed and utilized for the project.
- Primary investigator collaborated with the quality department to review, analyze, and identify safety trends and events reported through Safety Tracker.
- National Research Corporation Health (NRC) helped determine patient satisfaction scores related to provider communication.



Key Metric Dashboard



Key Metric Dashboard



Results

- Safety Tracker reporting increased from an average of 20 events per month to 34 events in one month post survey.
- Participation rate for the project was 85%.
- Nursing experience ranged from novice to expert level.
- Patient satisfaction scores increased from 68.4% to 75% over the six-week project period in "Good communication between staff."

Discussion of Findings

The increase in Safety Tracker reporting can be attributed to increased recognition of preventable errors identified during bedside report during peak season/high census.

Nurse Feedback & Barriers

- Qualitative findings indicated participants liked the consistency and structure of the SBAR reporting tool.
- Nurses felt the tool increased accountability for their practice when preventable errors were recognized during bedside report.
- SBAR tool included families and decreased the risk of miscommunication

Barriers:

- Staff concern related to potential patient/family sleep disruptions.
- Apprehension related to discussing sensitive information at the patient's bedside.
- SBAR tool not being updated and/or utilized.

Implications for Practice

- Obtain nurses perspective on advantages/disadvantages of a standardized reporting process.
- Educate nurses regarding barriers encountered.
- Additional research is needed for the pediatric population including additional studies with a larger sample size.
- The need for a standardized bedside handoff reporting process is ongoing. It is imperative to choose the right system to best fit your organization's needs.
- Healthcare organizations should consider implementing a standardized reporting process to help decrease preventable errors, increase patient satisfaction, and improve nurse accountability for their practice.

NURSING RESEARCH

Deep Sedation for Ophthalmology Procedures in an Outpatient Setting

Michael Evans RN BSN, Paula Grigorian M.D. Tonya Thompson, M.D. MA, Abdallah Dalabih M.D. MBA



Background

- Deep Sedation for pediatric patients outside the operating room (OR) is becoming common for multiple procedures including lumbar punctures, bone marrows, radiologic studies, and much more
- However, a multi-center study by the Pediatric Sedation Research Consortium involving over 50,000 patients only included 44 ophthalmology procedures.
- In the same multi-center study adverse events occurred in 3 to 10% of patients undergoing deep sedation
- Little data exist on patients receiving deep sedation for ophthalmology procedures in an outpatient hospital setting.

Purpose

- To evaluate the safety and efficacy of patients receiving deep sedation outside of the OR for ophthalmology procedures at Arkansas Children's Hospital.

Research Question/Hypothesis

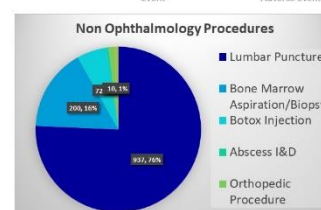
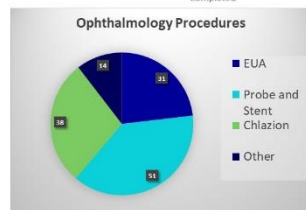
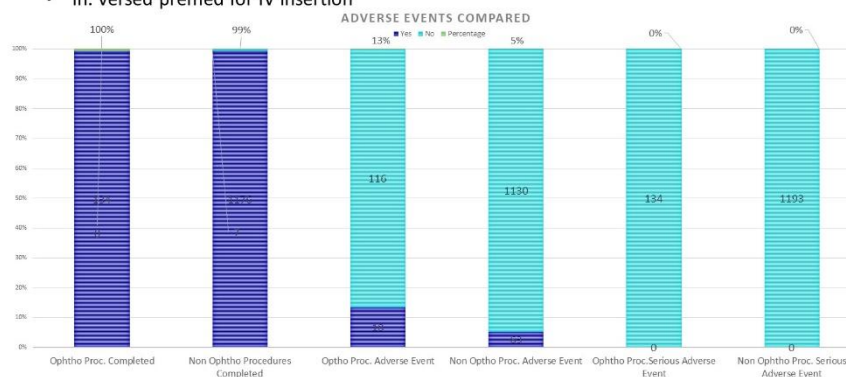
1. Do Patients undergoing deep sedation for minimally to moderately invasive ophthalmology procedures have a similar risk profile to patients undergoing other more studied procedures?

Methods

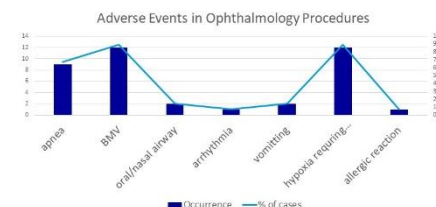
- A retrospective review was completed of 134 patients who underwent deep sedation for a ophthalmology procedures at Arkansas Children's.
- Data on demographics, procedure completion, medications used, and complications were compared to 1154 other patients who underwent other minimal to moderately invasive procedures.
- All sedations were performed by **Critical Care or ED physicians** with sedation nurses present.
- **Medications Used**
 - Propofol for Analgesia
 - Fentanyl or Ketamine for Pain Control
 - In. versed premed for IV insertion

Results

- Patients undergoing deep sedation for ophthalmology procedures experienced a **statistically significant occurrence of adverse events (13%)** when compared to patients undergoing non-ophthalmological procedures which occurred 5% of the time ($p=0.0001<0.05$).
- **Serious Adverse Events (SAE):** Death, CPR, ETT or LMA placement, and unplanned admission
- **Adverse Events Apnea (AE), Oral/Nasal Airway Placement, BMV, Hypoxia, Hypotension, Laryngospasm and Allergic Reactions**
- **No SAEs occurred in either group.**



Discussion of Findings



- Airway positioning was the most common complication (17) but not listed as an adverse event.

Implications for Practice

- More research is needed, but deep Sedation should be considered for minimal to moderately invasive ophthalmology procedures. Although there is a statistically significant difference in complications the risk profile is very similar to other frequently performed procedures.

References

- Joseph P. Cravero, George T. Blike, Michael Beach, Susan M. Gallagher, James H. Hertzog, Jeana E. Havidich, Barry Gelman ; and the Pediatric Sedation Research Consortium
Pediatrics September 2006, 118 (3) 1087-1096; DOI: <https://doi.org/10.1542/peds.2006-0313>
- Harris PA, Taylor R, Thielke R, Payne J, Gonzalez N, Conde JG. Research electronic data capture (REDCap)—a metadata-driven methodology and workflow process for providing translational research informatics support. J Biomed Inform. 2009;42(2):377-381. doi: 10.1016/j.jbi.2008.08.010 [doi].
- Kamat, Pradip P. MD, MBA1,2; McCracken, Courtney E. PhD1; Gillespie, Scott E. MS1; Fortenberry, James D. MD, MCM1,2; Stockwell, Jana A. MD, FCCM1,2; Cravero, Joseph P. MD3; Hebbard, Kiran B. MD, FCCM1,2 Pediatric Critical Care Physician-Administered Procedural Sedation Using Propofol, Pediatric Critical Care Medicine: January 2015 - Volume 16 - Issue 1 - p 11-20 doi: 10.1097/PCC.0000000000000273



NURSING RESEARCH

Practices and perceptions of face mask use in a pediatric health system during the COVID-19 pandemic

Denise Willis MS, RRT-NPS, AE-C; Austin Lovenstein MBA, MA, BS; Michele Honeycutt MNSC, RN, CIC FAPIC; Beverly J Spray PhD; Marlene Walden PhD, APRN, NNP-BC, CCNS, FAAN



Background

- The novel coronavirus disease outbreak began in 2019 (COVID-19) and was declared a pandemic by the World Health Organization on March 11, 2020.
- The virus is transmitted through respiratory droplets and close contact.
- Physical distancing and wearing of face masks in public is recommended to mitigate the spread of COVID-19.
- Arkansas Children's (AC) implemented a face mask requirement on April 29, 2020 for all staff and visitors over 2 years of age prior to the state of Arkansas face covering mandate on July 20, 2020.
- Individual practices for face mask use in public are highly variable.

Purpose

To explore practices and perceptions of face mask use of staff working in a pediatric health system.

Methods

- Descriptive, exploratory study using survey methodology.
- Study was approved by the Institutional Review Board of the University of Arkansas for Medical Sciences (UAMS).
- All AC team members or UAMS staff working on any AC campus were eligible to participate.
- Employees under 18 years of age, students and volunteers were excluded.
- Survey was anonymous and was open for a 2-week period between July 22 – August 5, 2020.
- Data were collected electronically using the Research Electronic Data Capture application.

Instrument

- Survey domains included type of face mask worn, mask care and handling, challenges or health issues with mask wearing and optional open response to describe other concerns.

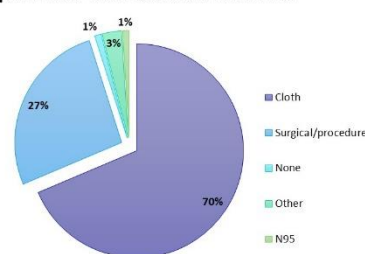
Demographics

- 1011 participants completed the survey.
- 84% (n = 847) of respondents were female.
- 78% (n = 788) of respondents were clinical staff.
- Nurses accounted for 53% (n = 418) of clinical respondents.

Results

- 76% (n = 760) of all respondents agreed or strongly agreed that correctly worn masks are effective in preventing the spread of COVID.
- Main reason for wearing a mask was to protect others (50%, n = 506), protect self (26%, n = 264) and hospital policy (20%, n = 204).
- 70% (n = 701) of staff reported wearing a cloth mask outside of their work area.

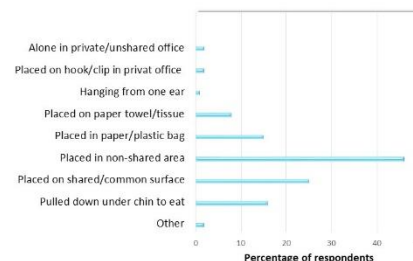
Type of Mask Worn Outside of Work Area



Results (Cont.)

- Mean number of days a cloth mask was worn before washing was 3.9 ± 14.5 .
- Mean number of days a surgical mask was worn before replacing was 2.9 ± 3.2 days.
- 87% (n = 875) of participants stated masks are frequently or very frequently replaced when damp or wet.
- Most common method for mask removal and handling during lunch or break was placing in a non-shared area such as pocket, purse, bag or locker by 46% (n = 462).

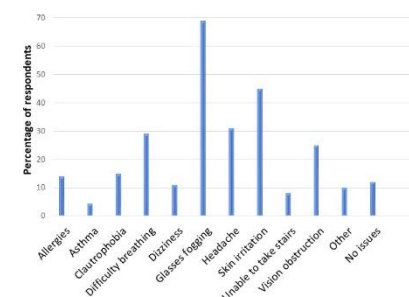
Mask Handling During Lunch or Break



Results (Cont.)

- Glasses fogging was the most common challenge reported (69%, n = 701) followed by skin irritation (45%, n = 456), headache (31%, n = 316), and difficulty breathing (29%, n = 294).

Challenges or Health Issues



Conclusions

- Practices for care and handling of face masks vary widely among staff in a pediatric health system.
- Some do not feel that masks are effective in preventing virus spread.
- Hand hygiene for mask handling is not practiced consistently.
- A large number of staff reported to have experienced challenges or health issues when wearing a mask.
- Many participants expressed concern wearing masks previously considered single patient use for an extended amount of time and do not feel safe in performing job duties.

Frequency of hand hygiene

Mask handling	Never	Rarely or Occasionally	Frequently or Very Frequently
Before putting on	6%, 60	38%, 382	56%, 568
Before removing	10%, 97	47%, 471	44%, 441
After removing	5%, 46	33%, 333	62%, 628

- Most common themes for open-ended responses were safety and efficacy concerns of reusing masks, concern with other's improper mask practices, and staff feeling unsafe.

Run-Hide-Fight: Moral Obligation of Pediatric Nurses in an Active Shooter Event

Marlene Walden, PhD APRN; Austin Lovenstein, MBA MA BS; Amy Ramick, DNP RN; Anthony Denton; Beverly Spray, PhD; Jodie McGinley; Greg Adams, LCSW; Leah Eisenberg, JD MA HE; Clayton Goddard, RN, Paramedic; Officer Henry Moore; Sergeant Jeffrey Plunkett; Stephanie White, RN BSN; Charles Wooley, RN, Paramedic



Background

- Active shooter events (ASEs) are becoming more common within today's society.
- Sacred oath that advocates nurses putting their patient's needs before their own may place nurses at increased risk and impair their judgment during an ASE.
- Pediatric nurses may experience extreme moral or ethical angst about leaving their patients during an ASE in order to survive the event.
- Little is known about parents' views of nurses' moral obligations during an ASE.

Research Questions

Do perceptions of pediatric nurses and parent/family advisors (P/FA) differ regarding the:

- nurses' moral obligations to children and their families
- level of personal risk that nurses should accept to protect children and their families in the inpatient/outpatient setting during an ASE?

Methods

- Descriptive, exploratory study using survey methodology.
- Survey open from March 1 through June 20, 2020.
- Sample included members of P/FA Councils and licensed LPNs, RNs, and APRNs practicing in 4 children's hospitals across the United States:
 - Arkansas Children's (Little Rock & Springdale, Arkansas).
 - Cook Children's Medical Center (Forth Worth, Texas).
 - Nemours/Alfred I. duPont Hospital for Children (Wilmington, Delaware).
 - Seattle Children's Hospital (Seattle, Washington).

Methods (Cont.)

Nurse & P/FA Surveys

- Survey based on work of Hartford Consensus (Jacobs and Burns, 2017).
- Five primary domains including appropriateness of national guidelines, personal preparedness, moral accountability, professional and legal concerns, and personal risk expectations.

Results

- Nurse Respondents
 - 874 responses retained for analyses.
 - 73% were clinical nurses from diverse hospital settings.
 - 92% were female; 89% Caucasian.
 - Only 29% had active shooter training that addressed moral obligations of nurses.
- P/FA Respondents
 - 81 responses retained for analyses.
 - 95% were female; 82% were Caucasian.
 - 54% never received active shooter education.

Top 5 Themes of Nurses

- Save self first in order to help others
- Dependent on situation
- Duty/moral obligation to children/staff
- Difficult to predict response
- Staff needs more training

Top 5 Themes of P/FAs

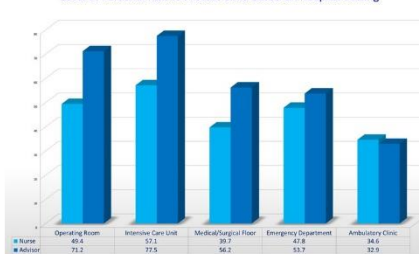
- Communication and education is essential
- Parents have responsibility
- Stay calm
- Just try to do your best
- Nurses should not be expected to put themselves in danger

Only 30% of nurses felt mentally prepared to respond to an ASE.

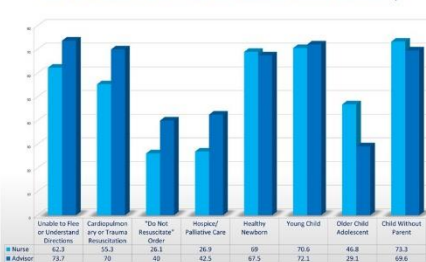
Results (Cont.)

Percentages of Agree/Strongly Agree of Respondents on Moral Obligations of Pediatric Nurses in an ASE	Nurse (n=874)	P/FA (n=81)
National Run-Hide-Fight campaign provides helpful emergency guidance for healthcare professionals working in pediatric hospitals.	46.3%	30.9%
Nurses have a professional duty to protect patients similar to the duties of law enforcement officers and firefighters to protect the public.	76.4%	66.7%
Nurses have a higher obligation to protect the lives of pediatric patients than I would with adult patients.	57.2%	56.8
Nurses could/should lose their professional license if they leave their patient in an ASE, especially if the patient was hurt or dies.	39.0%	18.5%
Personal risk to meet the obligations to patients is part of a nurses' job.	83.4%	42.0%
It is the personal choice of nurses to put themselves at risk when trying to save the lives of patients in an ASE.	69.7%	49.4%
If parent is present during an ASE, parent should accept responsibility for the safety of their child.	48.8%	83.9%

Percentages of Respondents Indicating Nurses Should Accept a High/Very High Level of Personal Risk to Protect Child Based on Hospital Setting



Percentages of Respondents Indicating Nurses Should Accept a High/Very High Level of Personal Risk to Protect Child Based on Patient Vulnerability



Discussion of Findings

- Nurses and parents should mentally prepare and plan for what they will do in an ASE.
- Nurses must carefully consider the moral and legal ramifications of their actions during an ASE and balance their own personal risk tolerance level against the need to protect patients and families.
- Hospital setting, patient vulnerability, personal/professional value system and parental presence may influence nurses' perceived obligations to patients during an ASE.
- Nurses' decisions to stay or leave is ultimately a personal choice, not a moral obligation.
- P/FAs reported a desire for more education and to partner with nurses during an ASE.
- Healthcare organizations should have departmental specific safety plans that address both evacuation protocols as well as measures to secure clinical areas.



Self-Care for Healthcare: A COVID-19 Self-Assessment for Nurses and Nurse Leaders at Arkansas Children's



Mary Salissi-Scotter, MNsc, RN, NE-BC; Amy Ramick, DNP RN ACNS-BC NPD-BC;

Marlene Walden, PhD APRN NNP-BC CCNS FAAN; Austin Lovenstein, MBA MA BS; Amy Huett, PhD RN NPD-BC

Background

- Nurses caring for patients during the COVID-19 pandemic face challenges providing care with shortages of staff and vital personal protective equipment while fearing for themselves and their family.
- Nurses are physically and psychologically exhausted which may lead to increased compassion fatigue, burnout, and turnover.
- Healthcare leaders must understand the personal and professional challenges pediatric nurses are facing during the COVID-19 crisis in order to best support nurses' psychological health and well-being, improve work-life balance, and create a culture of wellness.

Purpose

- To assess nurses' and nurse leaders' perceptions of personal, team, and overall organization health and well-being in response to the COVID-19 pandemic.

Methods

- Quality improvement project using survey methodology.
- The *Impact Assessment of COVID-19 on Employee Wellness & Retention Survey*, developed by Self Care for Healthcare (2020), was administered between October 5 and October 26, 2020 to all nurses and nurse leaders at Arkansas Children's.
- Survey focused on:
 - Personal/professional challenges that nurses are facing during the COVID-19 crisis.
 - Personal/professional lessons learned.
 - Status of physical, emotional and spiritual health.
- Responses to open ended questions were independently coded and organized into thematic categories.

Demographics

A total of 206 nurses responded to the survey. Sixty-eight percent of respondents were clinical nurses, employed full-time (82.7%), and had, on average, 18 years of nursing experience.

Themes and Illustrative Quotes

PERSONAL/PROFESSIONAL CHALLENGES

- **Personal Protective Equipment (PPE) Concerns**
 - Wearing PPE for 12 hours straight is very difficult.
 - I don't feel safe wearing the same mask for 12 hours.
 - I have found it more difficult to connect to parents/families due to the precautions in place. Seems I cannot provide the same level of comfort/rapport and that has been tough for me professionally.
- **Personal/Family Health/Safety**
 - Being scared to come to work; scared that I may bring something home to my family.
- **Social Isolation**
 - Feeling isolated from family and friends has been hard, especially as social distancing continues.
- **Unclear Guidelines**
 - Dealing with continuous changes that are not consistent day to day. Very frustrating as to who I need to listen to...whose science is accurate?
- **Mental Health and Burnout**
 - Being stretched so thin and asking for more and more of us without having anything left to give.
- **Overwhelming Work/Life Balance**
 - Learning to balance work and home when there is not clear boundaries.
 - Unable to turn off work when being faced with endless COVID information. Feel like I work 24 hours a day.

PHYSICAL, EMOTIONAL SPIRITUAL HEALTH

- **Stressed**
 - Not doing well. Stresses of the job only increase during this time. Need reassurance that we are doing a good job in spite of everything going on. Instead, I feel that more and more is asked of us with less and less resources.
- **Emotionally Exhausted/Burned Out**
 - Physically: average, emotionally; drained and spiritually unfulfilled. This is truly the first time in my nursing career that I am completely burned out.
- **Grateful**
 - I am grateful to be healthy, choosing to see each day as a blessing and trying my best to stay positive.

Themes and Illustrative Quotes (Cont.)

PERSONAL/PROFESSIONAL LESSONS LEARNED

- **Benefits of Virtual Work**
 - Adaptation to virtual meetings and collaboration was not difficult and allowed me to be more productive.
- **Cherishing Relationships**
 - Life is short. Tell your loved ones how much they mean to you.
 - To value time together, slow down, smell the roses (through my mask).
- **Gratitude**
 - ...Blessed...to have a stable job...I am grateful and blessed...to be a healthcare worker.
- **Disillusionment**
 - That some people disregard other people's lives by refusing to wear masks in the community. If it was just going to affect them personally, I get it, but their behavior affects everyone else, and they have a total disregard for it.
- **Make Time for Self-Care**
 - That I have no control on what is going on in the world at this time. Take this time to just be still and listen.
 - Try to remind others there can still be joy in the world. There can be kindness and understanding. Even through the hardships, there is a rainbow for people to see and have hope, if they would just look.
- **Professional Growth**
 - How to communicate effectively in an abnormal environment.
 - Continued growth professionally with technical skills.

Conclusions

- Nurses are struggling personally and professionally in response to the pandemic, but there is also hope and resiliency.
- Personal protective equipment is causing physical difficulties, safety concerns, and social distance from patients and families.
- Nurses are struggling with overwhelming work/life role changes, personal fear, change fatigue, and social isolation.
- Healthcare organizations should ensure that sufficient resources are available to support nurses' and leaders' psychological health and well-being, improve work-life balance, and create a culture of wellness.



Use of the Council Health Survey to Assess and Transform Shared Governance at Arkansas Children's Hospital

Marlene Walden, PhD APRN NNP-BC CCNS FAAN; Amy Huett, PhD RN NPD-BC; Lee Anne Eddy, DNP RN NEA-BC; Debra Jeffs, PhD RN NPD-BC FAAN; Austin Lovenstein, MBA MA BS; Amy Ramick, DNP RN ACNS-BC NPD-BC



Background

- Shared governance councils are the heart of nurse empowerment and the nurses' ability to have a voice in decision making that enhances patient safety, quality of nursing care delivery, and patient outcomes.
- Little is known about how councils function within a shared governance environment.

Aim

- To assess how nursing councils currently function within the shared governance environment at Arkansas Children's Hospital.

Methods

- Quality improvement project
- Council Health Survey (Hess and the Forum for Shared Governance, 2017) is a 25-item instrument comprising 3 subscales:
 - Structure** that includes 3 items assessing key elements of the foundational charter/bylaws
 - Activities** that includes 17 items that measure the processes of council work such as leadership engagement and decision-making
 - Membership** that includes 5 items that considers the preparation and support for Council members
- Council Health Survey was administered between October 5 and October 19, 2020.
- Surveyed all members of nursing organization and clinical area based councils within the system.

Council Health Survey Results (n=72)

OUR COUNCIL HAS CHARTER/BYLAWS THAT:	Agree/Strongly Agree
• Define its work.	68 (95.8%)
OUR COUNCIL MEMBERS:	Agree/Strongly Agree
• Have a management leadership team that is engaged in our council work.	56 (77.8%)
• Are engaged during the meetings (e.g., participate in discussions, share ideas, offer solutions, etc.).	54 (75.0%)
• Make decisions that reflect the values and preferences of those they represent.	61 (84.8%)
• Use data and/or evidence-based practice in making decisions.	61 (84.7%)
• Makes decisions that are aligned with the organization's strategic goals.	63 (88.8%)
• Participates in activities that improve the care of patients.	64 (90.1%)
• Participates in activities that improve our professional practice environment.	65 (90.3%)
OUR COUNCIL HAS:	Agree/Strongly Agree
• Strategies to ensure members have dedicated time to complete council work.	34 (47.9%)
• Formal education or training for new council members/leaders.	38 (52.7%)
• Established clear avenues for non-council members to contribute to council work.	45 (62.5%)
• A process to assess each other's participation in the council.	27 (38.0%)

Themes

- COVID-19: A New Normal for Councils**
Frontline staff and council leaders are struggling to balance the demands put forth by the pandemic, on a personal and professional level; these things are intertwined and cannot be separated... Frontline staff and council members are being asked to carry on as normal, but things simply are not normal.
- Engagement**
I think that a designed way to ensure that members are held accountable for attending meetings and performing some work for the Council would be amazing. Maybe there is a way to give a "grade" or some way to track performance besides just being a member.
- Influence on Decision-Making**
They make great plans, [but] then by the time it goes through all of the red tape, nothing changes. There are changes that need to be made at the unit level. Not every unit will fit [within] the same policy.
- Strengthening Councils**
We need to look at Council Chair/Co-Chair succession planning and try to design a way to successfully train and prepare people for these positions so that they would want to stay in that position for awhile.

SWOT Analysis



Council health is fundamental to successful shared governance



Hess, R. G., Bonamer, J. I., Swihart, D., & Brull, S. (2020). Measuring Council Health to Transform Shared Governance Processes and Practice. *JONA*, 50(2), 104-108.




Toni Lynch, BSN RN CPN; Stephanie Benning, MSN APRN PCNS-BC CPN; Austin Lovenstein, MA BS;
Chary Akmyradov, PhD; Marlene Walden, PhD, APRN, NNP-BC, CCNS, FAAN

- Pediatric patients are at high risk for falling and for serious complications associated with falls.
- A fall is defined as “a sudden, unintentional descent, with or without injury to the patient, that results in the patient coming to rest on the floor, on or against some other surface, on another person, or on an object” (National Database for Nursing Quality Improvement, 2016).
- Illness, medications, medical/ surgical procedures, and developmental age may increase fall risk in children.
- The actual number of falls in the ambulatory setting is probably underestimated and may not be fully captured in the organization's adverse event reporting system.
- Preventing falls poses particular challenges, given high volume and short patient/family contact times.
- Little data exists regarding risks associated with ambulatory falls.
- No studies have examined parent perspectives of fall risks in the pediatric ambulatory healthcare setting.

- Multi-site descriptive correlational design using survey methodology.
- Survey was conducted at four Texas Children's Hospital ambulatory clinics and four Arkansas Children's Hospital (ACH) clinics.
- Surveys were administered by paper copy, QR code or survey link.
- Surveys were available in English and Spanish.
- ACH survey was administered Monday through Friday for two weeks.
- Survey were confidential and anonymous.
- ACH parent responses were extracted for analysis.
- Submission of the survey was considered consent to participate
- Parents who provided an email address were entered into a drawing for a \$25 gift card.

Arkansas Children's Hospital Patient Falls Survey



Welcome to the paper version of the Fall Safety Survey. Please answer the following questions.

About YQ's parent(s) and your visit today

How many adults, including yourself, came with you to today's Arkansas Children's Hospital? _____

How many children came with you today to Arkansas Children's Hospital? _____

What time did you arrive at the ER? _____

What time did you leave the exam room? _____

How long did you wait in the waiting area before someone brought you here by the MRI, Nurse Practitioner or Physician Assistant. (This time from your waiting area to the exam room, not the appointment in the ER.)

How long did you wait in the waiting area before someone brought you here by the MRI, Nurse Practitioner or Physician Assistant.

☐ Less than 60 minutes ☐ 1-2 hours ☐ 3-4 hours ☐ Greater than 4 hours

Name of clinic you visited today: ☐ Hematology/Oncology Clinic ☐ Pediatric Endocrine Clinic

General Pediatric Clinic: ☐ C of D of Memphis Clinic ☐ C of D of Memphis Clinic

ABOUT THE CHILD who was seen by a Arkansas Children's Hospital Fall Care Provider

What is the gender of this child? ☐ Male ☐ Female

What is the age of this child? ☐ 0-1 year ☐ 1-2 years ☐ 3-4 years ☐ 5-6 years ☐ 7-12 years ☐ 13-17 years

Is this child confined to a wheelchair? ☐ Yes ☐ No

Is this child an isolated chronic faller? ☐ Yes ☐ No

Does this child take a medication that causes drowsiness? ☐ Yes ☐ No

Does this child have a condition that affects his/her ability to walk? ☐ Yes ☐ No

Did the child fall while in the waiting area? ☐ Yes ☐ No

IF YOU ANSWERED "YES" TO THE QUESTION ABOVE, PLEASE ANSWER THE FOLLOWING SIX QUESTIONS

1. How many times did the child fall in the waiting area? ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐ 11 ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17 ☐ 18 ☐ 19 ☐ 20 ☐ 21 ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27 ☐ 28 ☐ 29 ☐ 30 ☐ 31 ☐ 32 ☐ 33 ☐ 34 ☐ 35 ☐ 36 ☐ 37 ☐ 38 ☐ 39 ☐ 40 ☐ 41 ☐ 42 ☐ 43 ☐ 44 ☐ 45 ☐ 46 ☐ 47 ☐ 48 ☐ 49 ☐ 50 ☐ 51 ☐ 52 ☐ 53 ☐ 54 ☐ 55 ☐ 56 ☐ 57 ☐ 58 ☐ 59 ☐ 60 ☐ 61 ☐ 62 ☐ 63 ☐ 64 ☐ 65 ☐ 66 ☐ 67 ☐ 68 ☐ 69 ☐ 70 ☐ 71 ☐ 72 ☐ 73 ☐ 74 ☐ 75 ☐ 76 ☐ 77 ☐ 78 ☐ 79 ☐ 80 ☐ 81 ☐ 82 ☐ 83 ☐ 84 ☐ 85 ☐ 86 ☐ 87 ☐ 88 ☐ 89 ☐ 90 ☐ 91 ☐ 92 ☐ 93 ☐ 94 ☐ 95 ☐ 96 ☐ 97 ☐ 98 ☐ 99 ☐ 100 ☐ 101 ☐ 102 ☐ 103 ☐ 104 ☐ 105 ☐ 106 ☐ 107 ☐ 108 ☐ 109 ☐ 110 ☐ 111 ☐ 112 ☐ 113 ☐ 114 ☐ 115 ☐ 116 ☐ 117 ☐ 118 ☐ 119 ☐ 120 ☐ 121 ☐ 122 ☐ 123 ☐ 124 ☐ 125 ☐ 126 ☐ 127 ☐ 128 ☐ 129 ☐ 130 ☐ 131 ☐ 132 ☐ 133 ☐ 134 ☐ 135 ☐ 136 ☐ 137 ☐ 138 ☐ 139 ☐ 140 ☐ 141 ☐ 142 ☐ 143 ☐ 144 ☐ 145 ☐ 146 ☐ 147 ☐ 148 ☐ 149 ☐ 150 ☐ 151 ☐ 152 ☐ 153 ☐ 154 ☐ 155 ☐ 156 ☐ 157 ☐ 158 ☐ 159 ☐ 160 ☐ 161 ☐ 162 ☐ 163 ☐ 164 ☐ 165 ☐ 166 ☐ 167 ☐ 168 ☐ 169 ☐ 170 ☐ 171 ☐ 172 ☐ 173 ☐ 174 ☐ 175 ☐ 176 ☐ 177 ☐ 178 ☐ 179 ☐ 180 ☐ 181 ☐ 182 ☐ 183 ☐ 184 ☐ 185 ☐ 186 ☐ 187 ☐ 188 ☐ 189 ☐ 190 ☐ 191 ☐ 192 ☐ 193 ☐ 194 ☐ 195 ☐ 196 ☐ 197 ☐ 198 ☐ 199 ☐ 200 ☐ 201 ☐ 202 ☐ 203 ☐ 204 ☐ 205 ☐ 206 ☐ 207 ☐ 208 ☐ 209 ☐ 210 ☐ 211 ☐ 212 ☐ 213 ☐ 214 ☐ 215 ☐ 216 ☐ 217 ☐ 218 ☐ 219 ☐ 220 ☐ 221 ☐ 222 ☐ 223 ☐ 224 ☐ 225 ☐ 226 ☐ 227 ☐ 228 ☐ 229 ☐ 230 ☐ 231 ☐ 232 ☐ 233 ☐ 234 ☐ 235 ☐ 236 ☐ 237 ☐ 238 ☐ 239 ☐ 240 ☐ 241 ☐ 242 ☐ 243 ☐ 244 ☐ 245 ☐ 246 ☐ 247 ☐ 248 ☐ 249 ☐ 250 ☐ 251 ☐ 252 ☐ 253 ☐ 254 ☐ 255 ☐ 256 ☐ 257 ☐ 258 ☐ 259 ☐ 260 ☐ 261 ☐ 262 ☐ 263 ☐ 264 ☐ 265 ☐ 266 ☐ 267 ☐ 268 ☐ 269 ☐ 270 ☐ 271 ☐ 272 ☐ 273 ☐ 274 ☐ 275 ☐ 276 ☐ 277 ☐ 278 ☐ 279 ☐ 280 ☐ 281 ☐ 282 ☐ 283 ☐ 284 ☐ 285 ☐ 286 ☐ 287 ☐ 288 ☐ 289 ☐ 290 ☐ 291 ☐ 292 ☐ 293 ☐ 294 ☐ 295 ☐ 296 ☐ 297 ☐ 298 ☐ 299 ☐ 300 ☐ 301 ☐ 302 ☐ 303 ☐ 304 ☐ 305 ☐ 306 ☐ 307 ☐ 308 ☐ 309 ☐ 310 ☐ 311 ☐ 312 ☐ 313 ☐ 314 ☐ 315 ☐ 316 ☐ 317 ☐ 318 ☐ 319 ☐ 320 ☐ 321 ☐ 322 ☐ 323 ☐ 324 ☐ 325 ☐ 326 ☐ 327 ☐ 328 ☐ 329 ☐ 330 ☐ 331 ☐ 332 ☐ 333 ☐ 334 ☐ 335 ☐ 336 ☐ 337 ☐ 338 ☐ 339 ☐ 340 ☐ 341 ☐ 342 ☐ 343 ☐ 344 ☐ 345 ☐ 346 ☐ 347

Demographic and Setting Data (N=608)		Frequency (%)
Survey Language		
	English	573 (94%)
	Spanish	35 (6%)
Gender		
	Female	291 (48%)
	Male	312 (52%)
Number of Adults		
	1	382 (63%)
	2	200 (33%)
Number of Children		
	1	465 (77%)
	2	105 (17%)
Adult Age in Years (Mean \pm SD)		36.6 \pm 10.3
Child Age in Years (Mean + SD)		9.1 \pm 5.9
Waiting Time From Arrival to Exam Room		
	0 - 30 Minutes	475 (80%)
	31 - 60 Minutes	92 (16%)
Waiting Time From Arrival to Seen By Care Provider		538 (92%)

Protecting Children by Preventing Pediatric Ambulatory Falls



Fall Data (N=608)	Frequency (%)
Child Fall	
Yes	18 (3%)
No	590 (97%)
Child Fall in Waiting Room	
Yes	12 (2%)
Child Fall in Exam Room	
Yes	11 (2%)
Fall Location	
Only in Waiting Room	7 (39%)
Only in Exam Room	6 (33%)
Both in Waiting Room & Exam Room	5 (28%)
Child Has Condition Affecting Their Ability to Walk	
Yes	140 (23%)
No	466 (77%)
Child Takes A Medication That Causes Drowsiness	
Yes	171 (28%)
No	432 (72%)
Child Uses Assistive Device To Walk	
Yes	48 (8%)
No	558 (92%)
Child Is Confined To A Wheelchair	
Yes	49 (8%)
No	557 (92%)

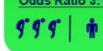
Significant Predictors of Fall Risk of Children in the Ambulatory Setting



Use of Assistive Device to Walk
($p = 0.0002$)
Odds Ratio 7:1



Medication That Causes Drowsiness ($p = 0.026$)



Medical Condition
That Affects Child's
Ability to Walk
($p = 0.005$)



The incidence of reported falls by parents to a hospital employee was 24%.

- 1) What is the incidence of reported falls by parents to a hospital employee in pediatric ambulatory services?
- 2) What are the risks associated with falling in pediatric ambulatory services from the parents' perspective?

Discussion

- Children who have medical conditions that affect their ability to walk or use assistive devices or who take medication that cause drowsiness are at increased risk for falling in the ambulatory setting.
- These falls typically are not reported by parents and are not captured in adverse event reporting systems.
- Additional preventive strategies should be explored to prevent falls in children with special needs.

NURSING AWARDS, HONORS AND ACCOMPLISHMENTS

2020

Dannis Armikarina, BSN, RN, CCRN-K, recipient of the William Randolph Hearst Scholarship through UAMS College of Nursing

Brittani Arnold, DNP, MSN, APRN, NNP-BC, CCRN-N, RNC-NIC, awarded a \$1,000 travel scholarship by Abbott Nutrition to attend the Academy of Neonatal Nursing's (ANN) Advanced Practice and Low Risk Neonatal Nurses Conference

Angela Roberson, MNSc, APRN, RN, PCNS-BC, FCNSI was inducted as a fellow in the National Clinical Nurse Specialist Academy

Mary Salassi-Scotter, MNSc, RN, BC-NE, received the Lifetime Achievement Award at the 2020 Arkansas Business Health Care Heroes Awards

Lametria Wafford, MNSc, RN, NPD-BC, elected to serve on the Content Planning Committee for the Association for Nursing Professional Development (ANPD) Annual Conference

NURSING AWARDS, HONORS AND ACCOMPLISHMENTS

2021

Crissy Allen, BSN, RN, CCRN, received recognition for the Outstanding Psychiatric Mental Health Nursing Research Poster or Podium Award and Top Ten Student Poster Awards – Best Overall, Second Place Awarded, 2021 Arkansas Nursing Research Conference.

NICU CLABSI Team's manuscript in Neonatal Network entitled, “The Impact of a Dedicated Nurse on the Prevention of Central Line-Associated Bloodstream Infections in the NICU,” was selected as the 2021 Manuscript of Exceptional Merit and received special recognition at the Academy of Neonatal Nursing Chicago conference.

Bethany Hutchins MSNc, APRN, CPNP-AC, was recognized as AY's 2021 Best Healthcare Professionals of Central Arkansas.

Katherine Mason, MSN, APRN, PNP-BC, BSN, RN, CPHON, received the University of Arkansas for Medical Sciences MVP Award.

Jennifer Livingston, APRN, CPNP-PC, SANE-P, received the Protector Award by the Children's Protection Center

NURSING AWARDS, HONORS AND ACCOMPLISHMENTS

40 Under 40 Nurse Leaders



2020

Julie Bane, MS, BSN, RN, NPD-BC

Nici Belknap, MSN, RN, NPD-BC, RNC-NIC

Blake Frazier, BSN, RN, CCRN

Ellen Mallard, DNP, APRN, ACCNS-N, CWOCN-AP, RNC-NIC

Kristen Morris, CRNA, MS, BS

2021

Kristan Cooper, MSN, RN, CPN, CWOCN

Loren Utely, BSN, RN, CCRN



NURSING AWARDS, HONORS AND ACCOMPLISHMENTS

Arkansas Great 100 Nurses for 2020



Tracey Bradley-Simmons, MSN, RN, CCM

Stephanie Cordova, RN

Sabra Curry, MSN, APRN, NNP-BC

Stephanie Evans, MSN, RN, CPPS

Debra Jeffs, PhD, RN, NPD-BC, FAAN

Luann Jones, DNP, APRN, NNP-BC, NE-BC

Brandi McIntosh, MSN, RN, RNC-NIC

Kimberly Rhodes, MSN, APRN, FNP-BC, CPNP-AC

Angela Roberson, MNSc, RN, APRN, PCNS-BC, FCNSI

Becky Watkins-Bregy, RN

Charles Wooley, RN, CPEN

Latoya Young, MSN, APRN, AGP-C, RNC-NIC

NURSING AWARDS, HONORS AND ACCOMPLISHMENTS

Arkansas Children's ONE TEAM Value Awards

2020

**Compassion Award: Team Winner:
ACH Growth and Development Clinic**

**Teamwork Award: Team Winner:
ACH Jonesboro Clinic**

**Excellence Award: Individual Winner:
Kim Rhodes, MSN, APRN, FNP-BC**

**Champion for Children Award: Team Winner:
NICU CLABSI Team**

2021

**Safety Award: Individual Winner:
Sara Neal, MSN, RN, CPN, CPHON, 4K Patient Care Manager**

**Excellence Award: Individual Winner:
Andrea McMaster, BSN, RN, RNC-NIC, 3H NICU RN III**

NURSING AWARDS, HONORS AND ACCOMPLISHMENTS

Preceptor-of-the-Quarter Awards

2020

Claudia Bednar, RN, RNC-NIC
Brittany Blankenship, MSN, RN, CPN
Hannah Jernigan, BSN, RN
Emily Pinter, BSN, RN, CPHON
Shelby Richards, BSN, RN

2021

Erin Vocque, RN, RNC-NIC
Amanda Byrd, BSN, RN
Angie Allen, BSN, RN, CPN
Katelynn Sawyer, BSN, RN

NURSING AWARDS, HONORS AND ACCOMPLISHMENTS

APP-of-the-Month Awards

2021

Sally Puckett, MNSc, APRN, CPNP-PC

Candace Mayle, DNP, APRN, CPNP-AC, CPHON

Shari Eickmeyer, MSN, APRN, FNP-C, ACHPN, HEC-C

Katherine Mason, MSN, APRN, PNP-BC, BSN, RN, CPHON

Michelle Davis, APRN, CPNP-PC

Bonnie Kitchen, MNSc, APRN, PPCNP-BC, PPCNP-AC

Haleigh Shumate, MSN, APRN, PNP-PC

NURSING AWARDS, HONORS AND ACCOMPLISHMENTS

Clinical RN of the Year: 2020 and 2021

Awarded to the outstanding **Clinical RN or Specialty Nurse** of the year. One RN from each designated area (Medical/Surgical, ICU, Ambulatory, Ancillary/Surgical Services, Specialty) was recognized for contributions to the strategic priorities.

Criteria for Selection:

- Provides exceptional patient and family-centered care
- Demonstrates clinical excellence in care
- Models exemplary interpersonal skills
- Collaborates exceptionally with healthcare team
- Serves as an outstanding resource and mentor to staff
- Exceptionally advocates for patients, families, and staff
- Leads and encourages shared decision making
- Actively engages in unit and/or organization wide initiatives
- Participates in research and evidence-based practice, and integrates findings into clinical practice
- Demonstrates commitment to professional development



NURSING AWARDS, HONORS AND ACCOMPLISHMENTS

Clinical RN of the Year: 2020 and 2021

Awarded to the outstanding **Clinical RN or Specialty Nurse** of the year. One RN from each designated area (Medical/Surgical, ICU, Ambulatory, Ancillary/Surgical Services, Specialty) was recognized for contributions to the strategic priorities.

AMBULATORY

2020

Jamie Burnside, RN, CPN

2021

Julie Shaver, BSN, RN, CPN

SPECIALTY NURSES

2020

Donna Holmes, RN, CPN

2021

Lauren Baxley BSN, RN, CCRN-K

SURGICAL-ANCILLARY:

2020

Kimberly Almond, BSN, RN, CPN

2021

Laura Akers, BSN, RN, CPN

NURSING AWARDS, HONORS AND ACCOMPLISHMENTS

Clinical RN of the Year: 2020 and 2021

Awarded to the outstanding **Clinical RN or Specialty Nurse** of the year. One RN from each designated area (Medical/Surgical, ICU, Ambulatory, Ancillary/Surgical Services, Specialty) was recognized for contributions to the strategic priorities.

INTENSIVE CARE:

2020

Taylor Long, BSN, RN, CCRN

2021

Scarlett Yates, RN

MEDICAL-SURGICAL:

2020

Whitney Baldwin, RN, CPN, CPHON

2021

Kaitlyn Richter, BSN, RN, CPN, CPHON

LPN of the Year: 2020 and 2021

Awarded to the outstanding LPN of the year.

Criteria for Selection:

- Provides exceptional and compassionate care
- Models excellent interpersonal skills
- Collaborates exceptionally with healthcare team
- Maintains excellent rapport with patients and families
- Advances own professional development
- Demonstrates clinical excellence

2020

Brittany Dunaway, LPN

2021

Shanna Prater, LPN

NURSING AWARDS, HONORS AND ACCOMPLISHMENTS

Commitment to Excellence Award: 2021

Special award in 2021!

Christen Clemons, BSN, RN, CPN

Criteria for Selection:

- Promotes and supports positive patient outcomes
- Serves as a source of positivity for peers and other staff
- Easily adapts to rapidly changing policy and procedure
- Innovative spirit when combatting the unknown
- Utilizes technology to promote holistic family-centered care

Adaptability Award: 2021

Special award in 2021!

Emergency Department

Criteria for Selection:

- Conserves organizational resources
- Fosters team spirit and team building within the work environment
- Maintains focus on patient safety and experience
- Consistently provides compassionate care during unusual circumstances
- Maintains positive attitude while acknowledging fears and concerns related to the pandemic

NURSING AWARDS, HONORS AND ACCOMPLISHMENTS

Nursing Leader of the Year Award: 2020 and 2021

Awarded to the outstanding leader of the year (Nurse Directors, PCMs, and other PCS nursing leaders)

Criteria for Selection:

- Highly respected, transformational leader
- Engaged, approachable, and active mentor
- Exceptional, advocate for nursing staff
- Encourages shared decision making
- Role-models collaborative relationships
- Communicates exceptionally with staff
- Champions a healthy workplace through modeling behaviors reflective of Arkansas Children's mission and core values
- Consistently displays integrity
- Role models and promotes evidence-based practice
- Demonstrates commitment to professional development
- Resolves conflict effectively

2020

Jenny Janisko, MSN, RN, NE-BC

2021

Amber Jones, MSN, RN, NE-BC

APRN of the Year Award: 2020 and 2021

Awarded to the outstanding APRN of the year, including Advanced Nurse Practitioners, CNSs, or CRNAs (both ACH and UAMS employees working on ACH campus).

Criteria for Selection:

- Provides exceptional patient and compassionate care
- Demonstrates advanced clinical expertise
- Excellent communication with patients, families, staff
- Exceptionally mentors and teaches other staff
- Exhibits commitment to the profession of nursing
- Takes responsibility for professional development
- Advances research and evidence-based practice
- Promotes interdisciplinary collaboration across the care continuum

2020

Sabra Curry, MNSc, APRN, NNP-BC

2021

Alicia Cook, MNSc, APRN, CPNP-A

NURSING AWARDS, HONORS AND ACCOMPLISHMENTS

Nursing Educator of the Year Award: 2020 and 2021

Awarded to the outstanding nursing educator of the year, including Clinical Educators, CNSs, and Clinical Education Specialists

Criteria for Selection:

- Demonstrates exceptional clinical expertise
- Exceptionally engages and motivates staff
- Communicates exceptionally well with staff
- Highly creative and interactive
- Role models and promotes lifelong learning
- Role-models and promotes evidence-based practice
- Highly accessible to nursing staff

2020

Monica Russell, BSN, RN, CCRN

2021

Lametria Wafford, MNSc, RN, NPD-BC

Nurse in a Supporting Role Award: 2020 and 2021

Awarded to the outstanding nurse who contributes to excellence in nursing practice through their support of clinical nurses.

Criteria for Selection:

- Models exemplary interpersonal skills
- Collaborates exceptionally with healthcare team
- Serves as an outstanding resource and mentor to staff
- Advocates for exceptional patient care
- Leads and encourages shared decision-making
- Actively engages in unit and/or organizational-wide initiatives
- Demonstrates commitment to professional development
- Engaged, approachable, and active mentor
- Exceptional, empathetic advocate for multidisciplinary teams
- Outstanding support in achieving quality outcomes

2020

Dawn Morris, BSN, RN, CPN

2021

Emily Huffman, BSN, RN

NURSING AWARDS, HONORS AND ACCOMPLISHMENTS

Preceptor of the Year Award: 2020 and 2021

Awarded to the outstanding staff member who serves as a preceptor for other nurses transitioning to nursing practice at Arkansas Children's.

Criteria for Selection:

- Incorporates organizational and unit policies
- Fosters a safe clinical learning environment
- Demonstrates safe professional practice
- Integrates adult learning principles within the learning environment
- Provides preceptee with timely, objective, and constructive feedback
- Facilitates effective communication between preceptee and interprofessional team
- Fosters collegiality
- Integrates evidenced-based practices into precepting experiences for optimal outcomes
- Demonstrates advocating for the preceptee

2020

Erin Squires, BSN, RNC-NIC

2021

Allison Conrad, BSN, RN, RNC-NIC

Rookie of the Year Award: 2020 and 2021

Awarded to the outstanding new Clinical RN of the year for their contributions to Arkansas Children's strategic priorities.

Criteria for Selection:

- No more than 2 years of RN experience at Arkansas Children's
- Role models the Arkansas Children's mission
- Embodies the core values of Safety, Teamwork, Compassion, Excellence
- Consistently displays a positive, can-do attitude
- Dedicated and willing to go above and beyond
- Inspires positive morale in fellow staff
- Supportive and empathetic to patients, family, and staff
- Exceptional team player

2020

Susan Easterling, BSN, RN, CPN

2021

Amendien Thomas, RN

NURSING AWARDS, HONORS AND ACCOMPLISHMENTS

Friend of Nursing Award: 2020 and 2021

Awarded to the outstanding individual who, though not a nurse, supports and recognizes the importance of the practice of nursing at ACH.

Criteria for Selection:

- Collaborates exceptionally with nurses
- Outstanding support in achieving quality outcomes
- Committed to the development of nurses
- Serves as an excellent resource to nurses

2020

Jimmy Tutton, CLA II/ PBT(ASCP)

2021

Susan Kemp, BS

Spirit of Inquiry Award: 2020 and 2021

Awarded to the individual who actively participates in and role models a spirit of clinical inquiry.

Criteria for Selection:

- Actively engaged in research, evidence-based practice, or quality improvement
- Displays creativity and innovation to improve patient outcomes or care delivery
- Disseminates scholarship through presentations or publications
- Mentors staff in clinical inquiry and scholarship
- Demonstrates exemplary clinical expertise

2020

Charles Wooley, RN, CPEN

2021

Shannon Wyatt, MSN, RN, CCRN

NURSING AWARDS, HONORS AND ACCOMPLISHMENTS

DAISY Lifetime Achievement Award: 2020 and 2021



This DAISY Foundation Award is designed to recognize a nurse who has over his/her career promoted the positive image of the nursing profession through active mentoring, role modeling, and advocating for patients.

Criteria for Selection:

- Minimum of 10 years' experience at Arkansas Children's
- Distinguished career as a nurse in clinical practice, administration, education, and/ or research that promotes a positive image of professional nursing
- Demonstrates and actively engages in the professional development of self and others in the nursing profession
- Serves as a role model and advocate for nursing practice and the advancement of nursing as a profession
- Advocates for the improvement of patient care and serves as an exemplar for enhancing the patient experience
- Recognized by the broader nursing community as a transformational nursing leader

2020

Greta Wilkinson, RN

2021

Michele Honeycutt, MNSc, RN, CIC FAPIC

NURSING AWARDS, HONORS AND ACCOMPLISHMENTS

DAISY Award For Extraordinary Nurses: 2020-2021

Through the DAISY award recognition program, we honor the super-human work nurses do for patients and families every day. There are over 4,000 healthcare facilities in all 50 states and 25 other countries committed to honoring nurses with the DAISY Award. The impact of the program on nurses and their organizations is deep, affecting nurses' job satisfaction, retention, teamwork, pride, organizational culture, healthy work environment, and more.

2020

Star Edington, BSN, RN
Bianca Giese, BSN, RN
Steven Giompoletti, BSN, RN
Amy Jenkins, BSN, RN
Hannah Jernigan, BSN, RN
Stephanie Nix, BSN, RN, RN-BC
Randy Rice, MBA, BSN, RN, RN-BC
Taylor Robinson, BSN, RN
Rosalie Saylor, BSN, RN, RNC-NIC
Megan Allen, ASN, RN
Laikin Davis, BSN, RN, CPN
Lana Ball, BSN, RN



2021

Cara Holland, BSN, RN, RNC-NIC
Karen Kelley, BSN, RN, CPN
Jackie Rankin, BSN, RN CCRN
Rachel Cunningham, BSN, RN
Amy Kruger, BSN, RN, CCRN
Enrique Ceniceros, BSN, RN
Eimear Melton, BSN, RN CPEN

NURSING AWARDS, HONORS AND ACCOMPLISHMENTS

DAISY Team Award For Extraordinary Nurse Teams

2020

3K ITU Night Shift

2021

2D Burn Center



FOR EXTRAORDINARY NURSES

**HONORING NURSES INTERNATIONALLY
IN MEMORY OF J. PATRICK BARNES**

