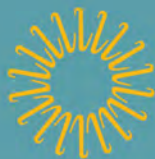




2022-2023 Nursing Annual Report



The Miriam Hospital
Lifespan. Delivering health with care.®



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Miriam Nurses are Extraordinary

I am excited to share The Miriam Hospital's Nursing Annual Report for 2022-2023. This report showcases the outstanding achievements of our nursing team, who have demonstrated exceptional dedication in providing compassionate, competent, and high-quality care. Through this report, we highlight our commitment to the mission of Delivering Health with Care.

The Nursing Annual Report offers a detailed summary of the essential role played by our clinical nurses in enhancing patient care and outcomes. Despite the unprecedented challenges presented by the pandemic, our nursing team remained steadfast in their commitment to patient care, overcoming significant nursing and supply chain shortages and the moral distress that affected many caregivers nationwide.

As you read through this year's Annual Nursing Report, you will get a glimpse of the remarkable care delivered by our nurses and their achievements of excellence in zero harm in multiple departments quarterly and annually. Their noteworthy achievements include reducing catheter-associated urinary tract infections (CAUTI) from nine in 2022 to four in 2023 and central line-associated bloodstream infections (CLABSI) from five in 2022 to four in 2023. Hand hygiene observations increased from 18,673 in 2022 to 38,979 in 2023. Several of our units achieved zero harm events for extended periods.

We celebrated the 4 East team for achieving over four years without a CLABSI and over two years without a CAUTI. We celebrated the CCU team for achieving zero CLABSIs for over seven years and zero CAUTIs for over two years. Lastly, we recognized the ICU for achieving zero harm events for 2023. We have an active community of nursing experts committed to their professional growth and making significant contributions to the nursing profession through clinical advancement, research, and presenting at local, national, and international conferences. This is truly what excellence looks like!

We are proud of our nurses' achievements and their commitment to our Zero Harm/High-Reliability journey. Their resilience, creativity, compassion, and competence are commendable and inspirational attributes.





History of The Miriam Hospital

The Miriam Hospital is a private 247-bed, not-for profit, acute care teaching hospital located in Providence, Rhode Island. The Miriam Hospital’s historical roots date to 1907, when The Miriam Hospital Association was formed. Barred from practicing at other community hospitals, Jewish physicians and their patients wanted a facility comfortable for them- one that would provide quality medical care for Jewish immigrants and be sensitive to their cultural needs, while welcoming all the people of Rhode Island. With the support of their community, women in Rhode Island’s Jewish community began their philanthropic efforts to establish a hospital. They collected monies in “pushkies” going door to door until 1926, when there



Pushke boxes were placed in homes throughout Providence to raise funds to establish the hospital.

were enough funds to open a 63-bed hospital. From that humble origin over 90 years ago, The Miriam Hospital moved from Parade Street to its current location on Summit Ave on the East side of Providence in 1952 and expanded to 150 beds.

The Miriam Hospital is part of the Lifespan Health System, Rhode Island’s first health system. Founded in 1994 by Rhode Island Hospital and The Miriam Hospital, Lifespan is a comprehensive, integrated, academic health system affiliated with the Warren Alpert Medical School of Brown University. Lifespan affiliates also include Rhode Island Hospital’s pediatric division, Hasbro Children’s Hospital; the Emma Pendleton Bradley Hospital, a pediatric psychiatric facility that provides both inpatient and outpatient services; Newport Hospital; Gateway Healthcare, Inc., a community behavioral health provider; Lifespan Physician Group, a multispecialty practice; and Coastal

Medical, a primary and specialty ambulatory care provider.

In 1998, The Miriam Hospital became the first hospital in Rhode Island to achieve Magnet® designation. To date, The Miriam Hospital is a six-time consecutive Magnet designated hospital and continues to be recognized as the highest quality-care hospital in the state by *US News and World Reports*.

The Miriam Hospital Nursing Structure

Nursing at The Miriam Hospital is represented at every level of decision making. The president of The Miriam Hospital, Maria Ducharme, DNP, RN, NEA-BC, started her career at The Miriam Hospital. Our Chief Nursing Officer, Vanzetta James, DNP, MBA, RN, CCRN, NEA-BC is connected to all higher decision making and represents and advocates for nursing interests.

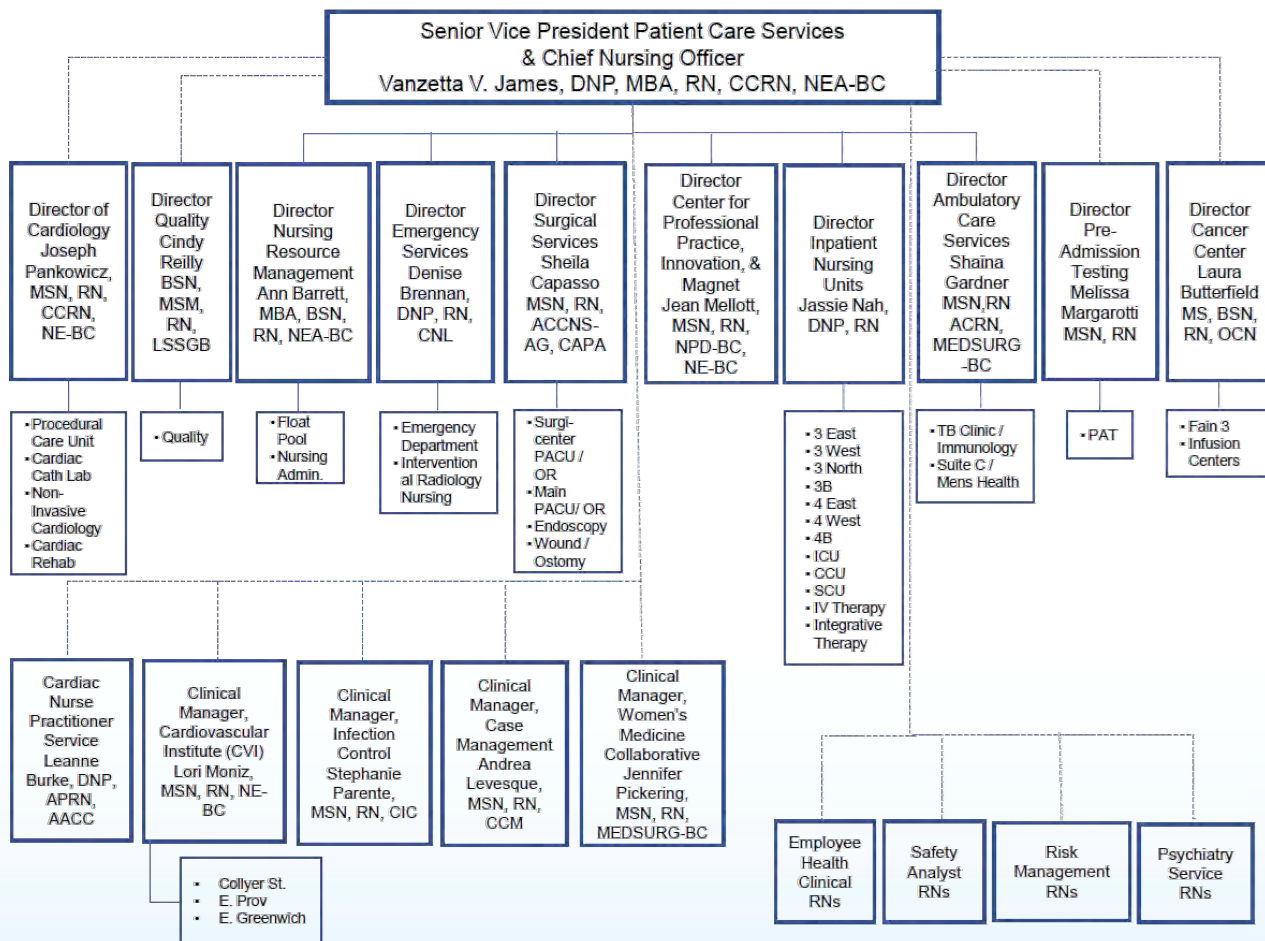
All nurses delivering care at The Miriam Hospital have access to leadership, including the Chief Nursing Officer. Despite the complex organizational structure inherent to a large healthcare system, pathways to nursing leadership are accessible.





Organizational Overview

The Miriam Hospital Nursing Structure (continued)





Organizational Overview

Nurse Demographics

Demographics of Registered Nurse Workforce at The Miriam Hospital

	Inpatient	% Represented	Ambulatory	% Represented
AMER. INDIAN OR ALASKA NATIVE	2	0%	0	0%
ASIAN	19	3%	12	2%
BLACK OR AFRICAN AMERICAN	21	4%	9	2%
HISPANIC OR LATINO	38	7%	16	4%
NOT SPECIFIED	2	0%	0	0%
TWO OR MORE RACES	9	2%	3	1%
WHITE	452	83%	376	90%
Total	543		416	

Lifeworks, December 2022

A Brief Overview of Magnet®

The Magnet Recognition Program®, offered through the American Nurses Credentialing Center (ANCC), recognizes healthcare organizations for quality patient care, nursing excellence and innovations in professional nursing practice. Consumers rely on Magnet designation as the ultimate credential for high quality nursing. Magnet is the leading source of successful nursing practice and strategies worldwide. The Miriam Hospital is one of an elite group of hospitals to achieve Magnet designation six times. The Miriam Hospital has earned this highest nursing credential through extensive application processes every four years. This can only be accomplished in a hospital where nurses participate at all levels of care and all levels of leadership within the organization to make clinical and systems decisions to improve patient outcomes and experience. Magnet designation also requires the support and participation of all departments and employees in the hospital, placing patient care first and foremost in the mission of *delivering health with care.*



The Magnet® Empirical Model





Organizational Overview

Lifespan Success Factors

Lifespan Success Factors describe how we work together, and how we get things done. They work in concert with our CARE Values, which tell us who we are when we are at our best. There are four Core Success Factors for all Lifespan employees, plus four additional Leadership Success Factors for all Lifespan leaders. Success Factors come alive through Lifespan's Talent Management system, which defines all people management and development processes. Through tools and programs which support employee recruitment, selection, and growth, Lifespan is creating the shared capabilities we need to achieve our strategic goals. Nursing strategy and Professional Practice Model align with the Lifespan Success Factors and strategic plan.



CORE SUCCESS FACTORS



WORKING TOGETHER

Instill Trust

Gain the confidence and trust of others through kindness, honesty, integrity, and authenticity

Value Differences

Recognize the value that different perspectives and identities bring to an organization

GETTING THINGS DONE

Prioritize Patients & Community

Build compassionate relationships which embrace unique patient and community needs

Collaborate

Build partnerships and work collaboratively with others to meet shared objectives

WE ARE LIFESPAN

We care. We work together. We get things done.





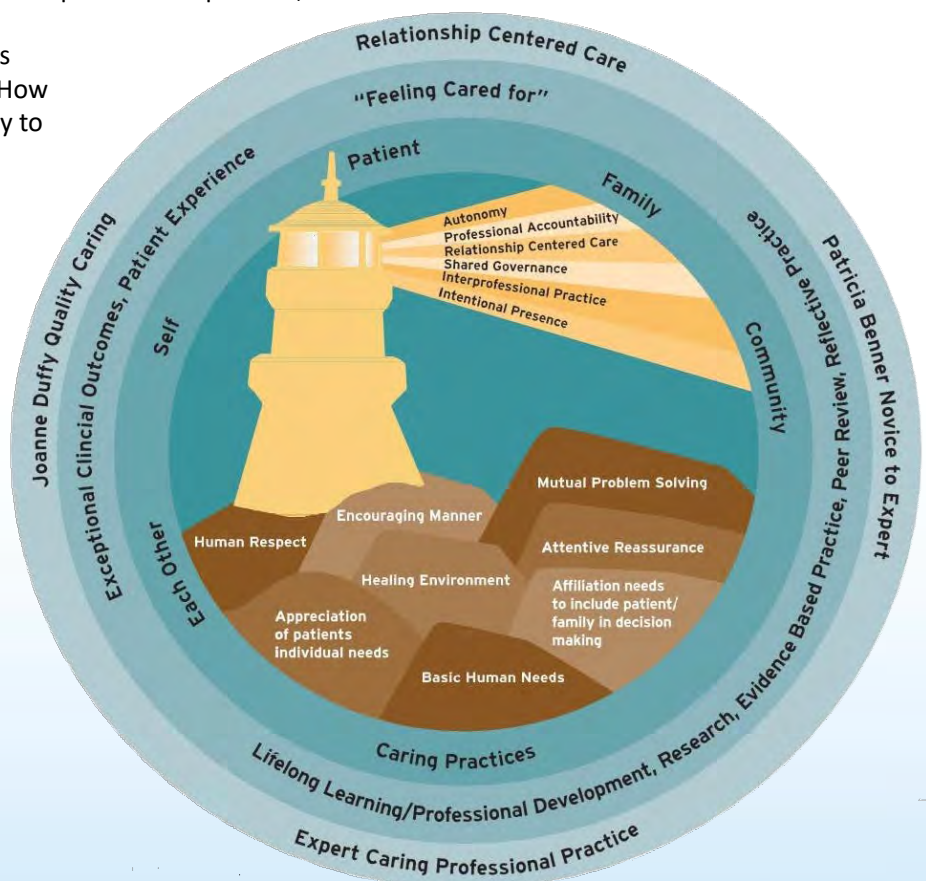
Organizational Overview

Professional Practice Model

The Miriam Hospital's professional practice model provides an image that helps illustrate the professional elements and relationships that define the team's unique contributions to providing health with care. It is a description of the framework that illustrates how nurses practice, collaborate, communicate, care, and develop professionally.

The main theorists who guide professional practice are Patricia Benner and Joanne Duffy. Their work lays the foundation for patient- and relationship-centered care and how to develop nurses from the onset of their career experienced, expert-level nurses leading within the organization. Through the adoption of these theories, lifelong learning, peer feedback and reflective practice, curiosity and research, and evidence-based practice are the expectation, leading to exceptional clinical outcomes, patient experience, and heightened professional satisfaction. The Miriam Hospital's professional practice model affects each nurse, patient, team, and family. Value is placed on autonomy, professional accountability, relationship-centered care, participation in professional governance, collaboration and interprofessional practice, and intentional presence.

Consider ways you embody this model in your everyday work. How do you leverage your autonomy to provide high quality care, or collaborate with the interdisciplinary team to ensure the patient has an exceptional experience? How do you ensure intentional presence when interacting with your coworker, and what is the benefit of this action?



The Miriam Hospital Professional Practice Model





Organizational Overview

Belonging and Equity

Belonging and Equity touches every part of the organization and is everyone's responsibility as a standard of excellence. Belonging and Equity informs how nurses plan, manage, and deliver care to patients and how they interact with colleagues. In 2022, Christin Zollicoffer, PMP, TIPC, joined the Lifespan team as Vice President and Chief Equity Officer. She and her team are charged with ensuring that diversity, equity, and inclusion considerations are incorporated into decision-making processes across the organization with the goal of guaranteeing fair and equitable treatment to all.

The Miriam Hospital has a multidisciplinary Belonging and Equity council that is chaired by a registered nurse. Through efforts that are coordinated with the organization-wide Belonging and Equity department, this council:

- Raises awareness of the needs and considerations for care for minority populations.
- Plans and supports activities that advance Belonging and Equity.
- Proposes, creates, and reviews policies related to Diversity, Equity, and Inclusion.

In January 2023, the Belonging and Equity council brought Alice Eichenbaum, a Rhode Island Resident and Holocaust survivor, to speak to an in-person and on-line audience. (To watch her interview, [CLICK HERE](#))

The Belonging and Equity council recommended all single-use bathrooms be made gender neutral, with signage that communicated this. While they intended for this to be a TMH project, the Belonging and Equity department recommended this as a Lifespan-wide project, and it has been incorporated into the budget for all hospitals and sites for the 2024 fiscal year.

The council coordinated hospital-wide personal care item drives for Youth Pride, Inc, a local non-profit that supports LGBTQ+ youth that need additional support. They contributed to the Lifespan-wide IDEAS newsletter related to Juneteenth and Veterans Day, and the council supported Safe Zone Certification for TMH ambulatory clinics and rehab. The Belonging and Equity council helps bring the Lifespan organization-wide vision of belonging and equity to life here at The Miriam Hospital. For more information about BE council at TMH, contact JCoyn@lifespan.org.



Alice Eichenbaum and the TMH Belonging and Equity Council, January 2023.





Here for Us Peer Support Program Selected for Podium Presentation at 2023 ANCC Magnet Conference in Chicago, IL

In the aftermath of the COVID-19 pandemic, turnover and burnout within The Miriam Hospital's nursing workforce and other departments rose, and individuals voiced feelings of hopelessness and helplessness. Nurse leaders within the organization identified a need to support those caring for patients in dire circumstances. In February 2022, an organization-wide plan was approved to implement a peer support program. Employees could receive training and respond to their colleagues who voiced a need for individual or group peer support. The training occurred in April 2022, and the first cohort was comprised of 12 staff members, seven being clinical nurses. The Miriam Hospital supported these employees by compensating them for their time and covering the cost of the training. When a staff member or team experiences an untoward event at work or home, peer support can now be activated, and an intervention occurs within a time frame that meets the needs of those involved. During a peer support session, individuals are given the space to talk through their feelings on events that they have experienced or witnessed; their responses to these stressful events are validated; and they are offered coping techniques and resources. If additional resources or support is needed, the peer support team member advocates for this. Since its commencement, the peer support team has provided 16 group interventions and 46 individual interventions. They promote awareness of their services during health fairs, lunch-and-learns, posters, flyers, and word of mouth referrals. The success of this program has been celebrated internally, and two peer support members, Amy Schenck, BSN, RN, HNB-BC and Elizabeth Lepage, BSN, RN, PMH-BC, presented at the 2023 annual ANCC Magnet conference in Chicago IL! Once again, The Miriam Hospital leads the way by promoting workforce well-being not only for nurses, but for every employee in the organization who needs it. For more information about *Here For Us* Support, please email hereforus@lifespan.org.



Left to Right: Original 2022 Here For Us Cohort; Amy Schenck, BSN, RN, HNB-BC and Elizabeth LePage, BSN, RN, PMH, Presenters at Magnet 2023 in Chicago, IL





Expert Nurses Take on a Night Leadership Role

The Miriam Hospital's nursing practice is aligned with system- and hospital- specific mission statements: **Deliver health with care** and **Inspire one another to improve the health and spirit of the lives we touch**. The nursing philosophy includes emphasizing caring and therapeutic relationships with patients and colleagues. In alignment with this philosophy, leadership identified a need for additional expertise and support on the night shift. In June of 2021, Aenoy Nirandone, BSN, RN, clinical nurse in the float pool, volunteered to trial a Clinical Support Nurse role on the night shift. The purpose of this was to support the medical surgical inpatient nurses as they delivered health with care. She supported novice registered nurses in their transition to practice by assisting in the assessment of high acuity patients, responded to rapid responses, mentored clinical nurses, and provided feedback. She supported quality improvement initiatives and aided nurses with escalation of care. Within the first few months it was clear that this role had a positive impact on the clinical nurses on the Medical Surgical units, as evidenced by the recognition she received from clinical nurses and nurse managers. Because of the success of this position, clinical leaders within our organization advocated for this to become a permanent position. In November 2022, the formal job description was created, vetted, and approved. It was posted in January 2023 and additional Clinical Support Nurses were hired, including Missy Liard, BSN, RN and Shannon Gillespie, BSN, RN. They cover the night shift from 7:00 PM until 7:00 AM seven days a week. They work collaboratively with the off-shift nursing supervisors to identify focus areas such as high-risk patients, units experiencing a surge in census, or units where there is a greater number of novice nurses. They help develop care plans, provide guidance on advocacy and escalation of care, assist with determining unit assignments, and role model professional behavior with patients and the care team.



Above: Aenoy Nirandone BSN, RN, receiving Safety Award in 2022 Below: Missy Liard BSN, RN and Shannon Gillespie BSN, RN, Nurse Support Nurses added in 2022 and 2023





Transformational Leadership

Nursing Strategic Plan 2021-2023

At The Miriam Hospital, nursing practice is predicated upon patient-centered, relationship-based care, exceptional clinical outcomes, and patient experience. The 2021 to 2023 Nursing Strategic Plan (NSP) aligned the mission, vision, and goals of nursing with the CREATE Lifespan Strategic Plan and the Magnet® core components. The strategic plan was created in 2021 by the interim chief nursing officers, nurse managers, advanced practice managers, and assistant clinical managers. Each of the 11 strategic goals had associated tactics that led to achieving that goal. Nursing leaders throughout the organization kept these goals and the associated tactics in mind as they planned initiatives and measured success.

Nursing Strategic Plan 2021-2023

The Miriam Hospital Nursing Strategy Statement : <i>At The Miriam Hospital, nurses' practice is predicated upon patient centered, relationship based care, exceptional clinical outcomes and patient experience. Our team aims to excel in providing high quality care at a level of national distinction.</i>		TMH / LIFESPAN STRATEGIC PLAN:						Magnet Components			
		<i>Care Transformation & Quality</i>	<i>Research & Education</i>	<i>Engagement & Culture</i>	<i>Access, Equity & Population Health</i>	<i>Teamwork & Patient Experience</i>	<i>Excellence in Ops & Financial Health</i>	<i>TL: Transformational Leadership</i>	<i>NK: New Knowledge/Innovations</i>	<i>RP: Exemplary Professional Practice</i>	<i>SE: Structural Empowerment</i>
STRATEGIC GOALS											
1	Support on-going professional development, leadership development, succession planning, and nurses' ability to practice to the full extent of their education, training, and certification.		X	X				X			X
2	Optimize professional development and collaboration between interprofessional teams; refine our strategic outreach with our academic and community partners.		X	X				X			X
3	Enhance clinical nurse involvement in innovation, formal clinical inquiry, and translation into evidence based care.	X	X	X		X			X		X
4	Fortify structural empowerment by strengthening our nursing professional governance and practice.	X		X			X				X
5	Advance performance utilizing high reliable principles and achieve zero harm.	X	X				X	X		X	
6	Advance and promote diversity, equity, inclusion and belonging for our workforce and into the care for our colleagues, patients, families and communities.		X	X	X	X				X	
7	Incorporate caring practices (self and each other) in our professional work environment to improve RN engagement and satisfaction.		X	X				X		X	X
8	Partner with content experts to recruit, develop, and retain an exceptional workforce that is committed to and representative of our shared values and meet staffing needs		X	X				X		X	X
9	Optimize information science and technology engaging both the provider and patient, to enhance care.					X	X	X	X	X	
10	Ensure a healthy and safe work environment for nurses and the interprofessional team.		X	X						X	
11	Improve access and advance population health				X	X	X	X	X	X	

The next nursing strategic plan is currently being developed. It will align with Lifespan's and The Miriam Hospital's mission and Lifespan's Success Factors.





Strategic Plan: Accomplished Goals

Goal 1 & 2: Newly Licensed Nurse Residency Program won award and PTAP reaccreditation, Perioperative 101 Nurse Residency Program with New England Institute of Technology was launched, and affiliation agreements were made with Capella University, University of Rhode Island, and Walden University. The Levinger Scholarship was initiated, providing financial support above and beyond the benefit-based professional development funding for those completing their BSN, MSN, or DNP programs.

Goal 3: The Miriam Hospital nurses participated in four IRB approved research projects, one of which is ongoing. Nursing supported over 20 nurses attending conferences related to their specialty.

Goal 4: Professional governance at The Miriam Hospital has rebounded, and clinical nurse involvement in core councils, specialty councils, and unit-based councils have increased.

Goal 5: The Miriam Hospital experienced a dramatic reduction in falls and falls with injury after instituting the *Stay With Me* program, proactive rounding by advanced practice managers, and other initiatives. There is more clinical expertise and leadership available to off-shift nurses with institution of evening assistant clinical managers (ACMs). Multiple units have enjoyed Zero CAUTI and CLABSI for extended periods of time.

Goal 6: Multiple educational offerings related to Diversity, Equity, and Inclusion were offered. This was a priority for the CPPI department, which worked collaboratively with The Miriam Hospital Diversity Council.

Goal 7: Mentoring programs for newly licensed RNs instituted, units emphasized teambuilding through visual boards, out-of-work outings, and moments of appreciation.

Goal 8: Our turnover rate has decreased from 18 percent to 13 percent in the last 12 months; 90 percent of our new nurse residents are still with us at the 12-month mark.

Goal 9: IV Pump Integration, Capnography, NRC patient experience portal, Power BI dashboards, SONAR to improve perioperative communication.

Goal 10: Workforce Safety Committee worked with ED to obtain 24/7 Providence Police detail in the ED, which led to a reduction in physical and verbal assaults.

Goal 11: ED Social Determinants of Health (SDoH) program provided bridge to primary care and met other needs that prevented our community from remaining healthy. STI clinic expanded services to accommodate people assigned female at birth and increased their female clients' utilization of services. Women's Medicine Collaborative redesigned RN phone triage, expanding access to sick appointments within 24 hours.



Leaders Celebrate Zero Harm Successes on 3B



Transformational Leadership

Nurse Manager Leads Hospital-Wide C diff Reduction Efforts

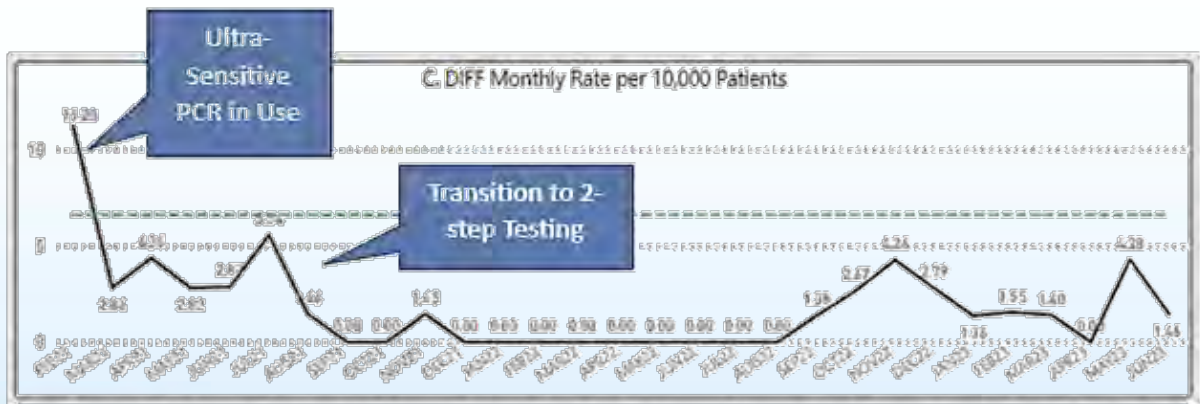


Stephanie Parente, MSN, RN, CIC

Clostridium difficile infection is often a hospital-acquired infection that may be caused by the overuse of antibiotics. Diagnosis of active C diff leads to a care and environment management plan that includes specialized cleaning, personal protective equipment usage, and antibiotic administration. The Miriam Hospital experienced higher than expected C diff rates, as high as 0.11percent , which is almost three times higher than the target and expected infection rate when compared to our organization, regional, and national rates.

Our Infection Control department, led by Stephanie Parente, MSN, RN, CIC, found this trend concerning and reviewed current evidence-based practices. Stephanie hypothesized that our use of a single ultra-sensitive PCR test for C diff infection may be a reason we were experiencing such high rates. Patients colonized (but without active infection) with C diff may have been categorized as having active infection because of the use of this ultra-sensitive test.

Stephanie worked at an organization that used a two-step C diff testing process, which tended to detect active versus latent C diff more accurately. Stephanie discussed this concern with The Miriam Hospital's infection control committee. Together with Barbara Pashnik, BSN, RN, CIC, they collaborated with medical microbiology to assess the feasibility of changing the process. Dr. Lonks, director of Infection Control, also led discussions with the hospitalists. Stephanie oversaw changing the electronic medical record and ensuring we were able to smoothly transition to a two-step C diff testing process. Stephanie met with multiple nursing leadership groups, to ensure information was disseminated before the change. Because of Stephanie's membership in the infection control committee, an organization level decision-making group, The Miriam Hospital was able to dramatically reduce the rate of active C diff infection hospital wide. Due to this change, The Miriam Hospital has been able to maintain a C-diff Infection rate that is well below the national average.



C diff monthly rates fell dramatically after implementing the 2-step testing.





Transformational Leadership

Leadership Wellness Rounds: Every Shift in Every Department

The Miriam Hospital nurse leaders seek out ways to address the wellness of nurses and other employees at the hospital. The Wellness Wednesday program began in May 2021 and was sponsored by the Integrative Therapy department and the Wellness Council. This initiative fosters resiliency and employee and nursing well-being and is championed by leaders within the organization in response to nursing and support staff fatigue. The goal of Wellness Wednesdays was to provide time for hospital nurses, doctors, and support staff to enjoy a beverage and snack, and to pause and breathe, which can decrease stress of the individual within their hectic work environment. The goal is to offer thanks and overt, vocal appreciation by nursing leadership to the clinical nurses and staff who are working that day. Wellness Wednesday occurs on Wednesday during the day shift. Each floor of the hospital has a different week per month. When the wellness of nurses and hospital staff is supported and improved, a positive impact on patient care follows. In February of 2022, Wellness Wednesdays was expanded to the ambulatory nursing sites. Each ambulatory site leader coordinates the intentional distribution of snacks and beverages and the accompanying thank you. To support the night shift nurses, leadership also rounds once a month. They travel to each unit that is open between 11:00 p.m. and 2:00 a.m. and are accompanied by a pet therapy dog: a bonus! Our hospital leadership, including the chief nursing officer and other nursing leaders, appreciate the commitment of our night shift to our patients.



From Left to Right: Ann Barrett, MBA, RN, NEA-BC; Maria Ducharme, DNP, RN, NEA-BC, Clinical Nurse 3 North with Vanzetta James, DNP, MBA RN, CCRN, NEA-BC and with Vegas (Pet Therapy Dog)





Transformational Leadership

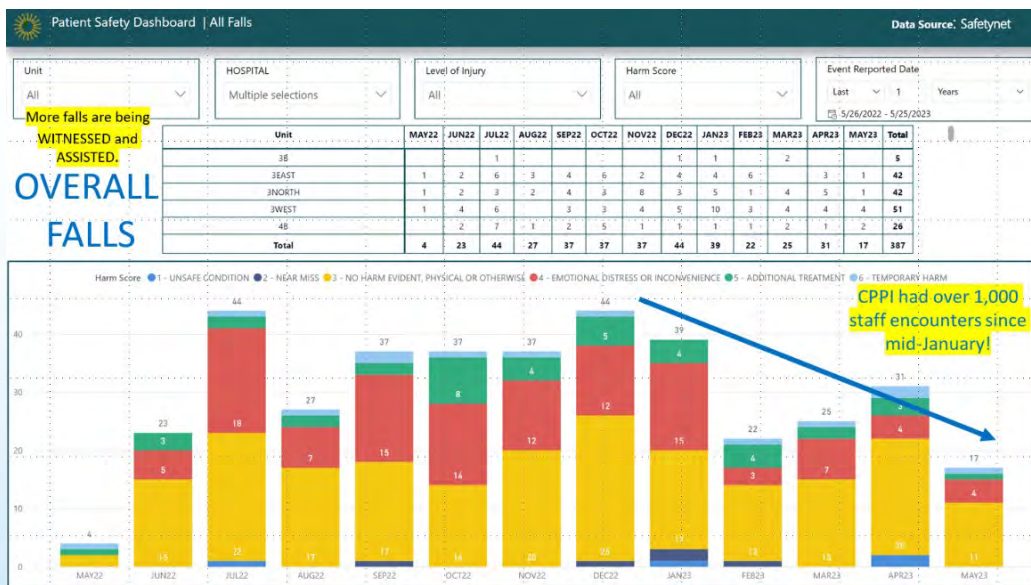
Center for Professional Practice and Innovation Restructure



CPPI Staff, December 2022

In January 2023, the Center for Professional Practice and Innovation (CPPI) expanded its department by including the advanced practice managers (APM) in its structure. APMs level-set their knowledge and skills around nursing professional development and further enhanced collaboration with the central CPPI staff.

As a combined team, CPPI is well-positioned to improve efficiencies around orientation and onboarding and provide comprehensive support for ongoing professional development. A shared focus on quality outcomes and role optimization have been the hallmarks of the transition. Using intentional rounding, CPPI staff contributed to improvement outcomes related to falls and CAUTI.



Unit Based Intentional APM Falls Rounding contributed to the hospital-wide reduction in falls.





Welcoming New Leadership to The Miriam Hospital

In August 2023, Jassie Nah, DNP, RN, joined The Miriam Hospital as the Director of Inpatient Nursing Operations and Respiratory Services. Jassie has been with Lifespan for over 14 years and brings a wealth of experience to the position. During her tenure with Lifespan, Jassie has demonstrated professional growth from clinical nurse and assistant clinical manager to nurse leader. She has diversified her experience through various roles, which include nurse leader at Sturdy Hospital and nursing supervisor at UMass Memorial Medical Center. These rich experiences have provided her with the clinical and leadership expertise to lead our nursing and respiratory teams. Jassie is a lifelong professional learner, as evidenced by her educational achievements. She holds a Doctor of Nursing Practice in Health Care Systems Leadership from Chamberlain University; a Master of Science in Nursing, Nurse Executive from Chamberlain University; a Bachelor of Science in Nursing from the University of Rhode Island, and an Associate of Science in Nursing from the Community College of Rhode Island. Some of Jassie's notable accomplishments include decreasing nursing vacancy from 69 percent in FY21 to a current vacancy rate of 26 percent and reducing staff voluntary turnover from 43 percent to an impressive 15 percent. She has also collaborated with multi-disciplinary teams to significantly decrease CAUTI rates and has been actively working towards reducing falls and infection rates, all while prioritizing positive patient experiences. Her dedication to the nursing community is evident through her role as an adjunct clinical and lecture faculty member for the Community College of Rhode Island and her membership in the Organization of Nurse Leaders. Jassie's passion for patient-centered care and enhancing the overall patient experience aligns perfectly with our mission at The Miriam Hospital. We are incredibly excited to have her join our fantastic team!



Jassie Nah, DNP, RN





Structural Empowerment

Certification

The Miriam Hospital is committed to professional development and improving certification rates among professional nurses. The Center for Professional Practice and Innovation (CPPI) provides free certification resources, free access to certification exams, and courses that help nurses prepare for some of the more common certifications. Decentralized support for certification occurs on the unit level. Specialty areas provide financial and educational support for specialty certifications. When nurses become certified, they are celebrated on their units and during moments of reward and recognition at hospital-wide meetings. Nurses at The Miriam Hospital take pride in this great clinical achievement. To the Right is a list of specialty certifications our professional nurses hold: To learn more about the financial and educational support offered by The Miriam Hospital for specialty certification, please reach out to your clinical leader or to CPPI at CPPI@lifespan.org.

Mentorship at The Miriam Hospital

The Miriam Hospital supports and values both formal and informal mentoring. Mentoring relationships build camaraderie, support novice nurses, foster self-worth, and a sense of professional contribution for experienced nurses. Mentoring can include providing information, advice, support, and ideas leading to a long-lasting relationship. Informal mentoring occurs organically and, while it may go unnoticed, provides a novice nurse, or nurse entering a new specialty or new position, with a powerful relationship that they can tap into when work or life related challenges arise.

The Miriam Hospital Mentorship Program launched in August 2022. Mentors have provided feedback that they feel “honored, valued, and enjoy sharing the knowledge while assisting their mentee through challenging situations.” Mentee feedback has also been positive, and they report feeling “grateful to have a mentor and finding benefit in being able to have someone to discuss new experiences with.” If you are interested in becoming a mentor email CPPI@lifespan.org.



Nursing Certifications:

- Medical Surgical (MEDSURG-BC)
- Orthopedic (ONC)
- Critical Care (CCRN)
- Urology (CURN)
- Gerontology (GERO-BC)
- Certified Bariatric (CBN)
- Pain Management (CPM-BC)
- Operating Room (CNOR)
- Oncology (OCN)
- Psychiatric Mental Health (PMH)
- Certified Case Manager (CCM)
- Wound Ostomy Care (WOCN)
- Emergency room (CEN)
- Infection Control (CIC)
- Vascular (CVN)
- Professional in Healthcare Quality (CPHQ)
- Nurse Executive (NE-BC, NEA-BC)
- Ambulatory Perianesthesia (CAPA)
- Peri Anesthesia (CPAN)
- Cardiac Vascular (CVN-BC)
- Certified Infection Control (CIC)
- Progressive Care (PCCN)
- Professional Development (NPD-BC)
- Gastroenterology (CGRN)
- Holistic Nursing (HBN-BC)
- Acute Critical Care Nurse Specialist (ACCNS)
- AIDS Certified RN (ACRN)
- Clinical Research Professional (CCRP)
- Stroke Certified (SCRN)

This is NOT an exhaustive list



Structural Empowerment

IMPACT Team: Interdisciplinary Recognition

The Miriam Hospital offers many opportunities for interprofessional teams to be recognized for exemplary work, improved patient or staff safety or outcomes, gains in efficiency, and community engagement. The IMPACT team at The Miriam Hospital strives to Improve (I) Mobility (M) Promotion (P) for all hospital patients through Activity (A), Communication (C), and Training (T). In October 2022, the IMPACT team at The Miriam Hospital was celebrated for their contributions to improved patient safety and outcomes. Accomplishments include implementing a mobility bundle to help increase the frequency that patients mobilize and consistently presenting at every nursing orientation. IMPACT members ensure newcomers understand the value of accurate fall risk assessment, scoring, documentation, and the resources available to mobilize patients safely. Initiatives that were championed by the IMPACT team on single units at The Miriam Hospital have expanded hospital-wide and cross-pollinated other hospitals within the Lifespan system. Their work directly and indirectly influences the care of the patients we serve. They were awarded the Safety Team of the Quarter at The Miriam Hospital for January-March 2022, and in October 2022 they were celebrated for their contributions to improved patient safety and outcomes.

Celebration of Individual Achievements- So Many Ways to be Recognized!

At The Miriam Hospital, clinical nurses are recognized for their professional achievements and impact on patient outcomes in many ways. From individualized thank you notes from leaders to nurses, verbal praise from peers, nomination for monthly, quarterly, or annual nursing awards, and patient nominations through the Daisy Award Program, clinical nurses are honored for excellence. Here are some of the clinical nurses who have been recognized during 2022 and 2023:

Izeman Nurse Leader Award:

The Henry Izeman, MD Nursing Leadership Award was developed to recognize a TMH Nurse Leader who has demonstrated significant leadership in the cultivation of an environment of safety and nursing excellence. Award Criteria were developed based on the ANA Nursing Administration Scope and Standards of Practice.



From Left to Right: 2022: Melanie Marco, MSN, RN, NPd (CPPI) 2023: Lindsey Corrente, MSN, RN, CEN (4W)





Structural Empowerment

Celebration of Individual Achievements- So Many Ways to be Recognized! (cont'd)

Jaffe Award:

The Jaffe Foundation established *The Award for Excellence in Nursing* at The Miriam in 1986. Edwin Jaffe, chairman of the board of the Jaffe Foundation, established the award after having firsthand experience as a patient on Hassenfeld Three West. Mr. Jaffe had demonstrated his commitment to The Miriam Hospital in his tenure as member and as chairman of the hospital's board of trustees. In establishing the award, through his family's foundation, he demonstrated further the Jaffe Foundation's commitment to The Miriam Hospital and to the continued efforts to recognize nurses who strive for excellence and for achievement of personal potential through the care of others.



2022:
Jessica Worth, BSN, RN (ICU)

2023:
Lynne Jordan, RN, ONC (Pre-Admission Testing)
Julie Quinn, BSN, RN, CCRN (ICU)

Hurvitz Awards

This award is presented to an individual or team that makes the largest impact by improving patient outcomes, saving lives, and reducing costs at The Miriam Hospital. Arthur Hurvitz was a champion for quality and safety at Miriam Hospital. As a former board chair and life trustee of The Miriam Hospital, Arthur set a high bar for quality patient outcomes. The Miriam Hospital encourages staff to always be thinking of innovative ways we can improve the quality and safety of our patient care.



2022: Wound Care Ostomy Nurses Deb Hegerich-Bartula, MSN, RN, WOCN and Erin Dellagrotta, BSN, RN, WOCN – Hypoperfusion Skin Damage

2023: SPD-Infection Control Collaboration- Endoscope Decontamination Process Redesign





Structural Empowerment

Celebration of Individual Achievements- So Many Ways to be Recognized! (cont'd)

Daisy Award Winners

DAISY Award honorees personify The Miriam Hospital's remarkable patient experience. These nurses consistently demonstrate excellence through their clinical expertise and extraordinary compassionate care. They are recognized as outstanding role models in our nursing community. What is The DAISY Award? The DAISY Award is an international program that rewards and celebrates the extraordinary clinical skill and compassionate care given by nurses every day. The Miriam Hospital is proud to be a DAISY Award Partner, recognizing one of our nurses with this special honor quarterly. The DAISY Award for clinical nurses is presented four times a year, and the DAISY Leader Award is presented twice a year. Unit Council Steering, in a blind peer-review process, selects nurses who best meet award criteria and model caring relationships. To learn more about the Daisy Award Program, [CLICK HERE](#)

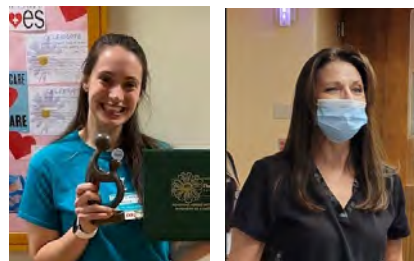


2022:

- Jennifer Gesualdi, BSN, RN (3B)
- Susan Campopiano, BSN, RN (3E)
- Samantha Moreau, BSN, RN (4W)
- Deborah Hegerich-Bartula, MSN, RN,
CWON (Wound Care)
- Gary Lamontagne, BSN, RN (ICU)
- Marianne Mancini, BSN, RN (PAT) *(not shown)*

2023:

- Tanya Altrui, BSN, RN (3W)
- Vanessa Mansi, BSN, RN (4B)
- Kari Domenici, RN (CCU)

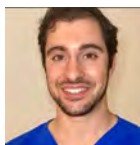




Celebration of Individual Achievements- So Many Ways to be Recognized! (cont'd)

Preceptor of the Year:

Preceptors have the power to inspire nurses to achieve greatness. An effective preceptor guides clinical nurses along the novice to expert continuum to ensure successful transition from academia to the professional practice environment. Preceptor support is key to a new nurse's confidence, socialization, professional development, and overall retention. Qualities of an outstanding preceptor include enthusiasm for teaching, practice excellence, a commitment to improving patient outcomes, positive professional attitude, skillful communication, sensitivity to learning needs, and critical thinking. This year we recognized the exemplary work of several exceptional preceptors from a variety of departments within the hospital. There were 29 preceptors nominated! All preceptor of the year nominees were honored during a recognition breakfast with Vanzetta James, DNP, MBA, RN, CCRN, NEA-BC, Chief Nursing Officer, during Nurses Week.



Paola Vieira, BSN, RN (SCU- 2nd floor, critical care)

Michelle Lyons, BSN, RN (3East)



Paul Gosselin RN, CVN-BC (Cath Lab- Procedural)

Dustin Wilcox, BSN, RN, CPM-RN (4B)

Jessica Rua, BSN, RN, CVN-BC (CVI- Ambulatory)

My Preceptor

...was calm, patient, and reassuring while also helping new nurses step out of their comfort zone and into the profession of nursing."

... made it so that each shift I would go home and be excited to come back and learn more with her."

... supported me through many critical situations and rapid responses."

... took the time to learn my strengths and weaknesses on an individual level. This gave him the chance to find the best ways for me to learn while not feeling overwhelmed or unsupported."





Structural Empowerment

Celebration of Individual Achievements- So Many Ways to be Recognized! (cont'd)

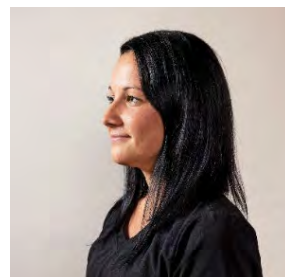
Rhode Island Monthly Excellence in Nursing Awards

Every fall, Rhode Island Monthly honors nurses from a variety of specialties, highlighting the ways Nursing impacts the health of communities and individuals. Nurses are nominated by peers, family members, or patients through an online nomination process. Recipients of this award are honored with a photo shoot, interview with Rhode Island Monthly journalists which is published in a Fall edition of the *Rhode Island Monthly* magazine, and a reception during which they receive their award and celebrate with loved ones and colleagues. A call for nominations occurs in August or September each year, so if you are interested in nominating someone for this prestigious award, please mark your calendar!

2022: Ashley Giarusso,
BSN, RN, CEN

2023: Dawn Packer,
BSN, RN, CV-BC

2023: Victoria Horsfield,
BSN, RN-BC-Psychiatry



Pictures courtesy of RI Monthly

4B: Providing Culturally Sensitive Care

A patient with acute medical and psychological challenges was admitted to 4B in August 2021. He displayed erratic behavior towards staff, warranting constant observation. Despite his unpredictable behavior, the nurses on 4B treated him with exceptional compassion and cared for him in ways that maintained his dignity and sense of belonging. Through their intentional presence and attention to his medical and social needs, they ensured he felt cared for and was shown human respect despite his difficult social situation and behavioral health challenges. In addition to consults with clinical social work, integrative therapy nurses, and psychiatry, clinical nurses on the unit donated clothing and personal care items. Nurses helped him to maintain his appearance by cutting his hair and trimming his beard. They included him in holidays by displaying his name with staff included him in the 4B unit decorations for names on celebration boards.

Upon this patient's discharge over a year after being admitted, multiple departments recognized the extraordinary care provided by the nurses and other members of the interprofessional team. The clinical nurses embodied the caring factors of our professional practice model.



4B team earning quarterly Safety award, summer, 2023





Structural Empowerment

Clinical Advancement

Clinical Advancement is a formal process to foster and encourage expert clinical practice and ongoing professional learning. It offers professional nurses at The Miriam Hospital an opportunity to strive for, achieve, and be rewarded for nursing excellence. Clinical Advancement participants are awarded points for many of the activities inherent in the clinical role, such as taking charge, preceptor, being recognized by peers or leadership, attending a conference, being a member of a professional organization, being a shared governance council member, volunteering, completing quality audits, contributing to the Magnet document, or being a mentor. All nurses with two years of experience and certification are eligible for Clinical Advancement, Nurse 2, which comes with an annual monetary award.

Name	Unit	Level	Year	Name	Unit	Level	Year
Katherine Baldwin, BSN, RN, CCRN	CCU	2	2023	Christine Doyle, MSN, RN, CHPN, PMGT-BC	ICU	4	2022 2023
Lindsay Bucci, BSN, RN-BC	Psychiatry	3	2022 2023	Keriann Eliseo, BSN, RN, CCRN	CVI	2	2023
Megan Andersen, BSN, RN, MEDSURG-BC	PACU	2	2022 2023	Kaitlyn Hamilton, BSN, RN, MEDSURG-BC	ICU	2	2022 2023
Donna Attardo, BSN, RN, CV-BC	Cardiac Rehab	2	2022 2023	Justine Hayden, BSN, RN, CVN- RN-BC	CVI	3	2022 2023
Deb Hegerich-Bartula, MSN, RN, CWON	Wound	4	2022	Victoria Horsfield, BSN, RN, PMH-BC	Psych	3	2022 2023
Idalina Colburn BSN, RN, OCN	Fain	3	2022	Faye Hollander, BSN, RN, CCRN	Fain	2	2022 2023
Bethany Cunningham, BSN, RN, OCN	Fain 3	2	2022	Lynne Jordan, RN, ONC	PAT	2	2022 2023
Mary Ellen Danzer, MSN, RN, OCN	Fain 3	2	2022	Robin Jones, RN, OCN	4B	2	2023
Erin Dellagrotta, BSN, RN, CWON	Wound	3	2022	Shahnee Lagor, BSN, RN-BC	VAT	2	2022
Liza Diaz, BSN, RN, CEN	Cath	2	2022	Maryann Lonks, BSN, RN, OCN	Fain	2	2022 2023
Ruth Dickinson, BSN, RN, OCN	WMC	3	2023	Katherine Lucas Baldwin, BSN, RN, CCRN	ICU	2	2022



Structural Empowerment

Clinical Advancement (cont'd)

Name	Unit	Level	Year
Carolyn Marsland, BSN, RN, OCN	Fain	2	2022 2023
Erin McAlice, BSN, RN, CVN-BC	CVI	2	2022
Kendra Norman, BSN, RN, CVN-BC (NEW)	CVI	2	2023
Kathryn O'Keefe BSN, RN, CCRN	ICU	2	2022
Justin Palmer, BSN, RN, CCRN	ICU	2	2022
Jennifer Patullo, BSN, RN, OCN	Fain	2	2022 2023

Name	Unit	Level	Year
Theresa Poirier, BSN, RN, CEN	ED	2	2023
Roseann Poyourow, BSN, RN, CEN	ED	2	2022 2023
Gloria Ribeiro BSN, RN, GERO-BC	PACU	2	2022 2023
Amanda Shippee, BSN, RN, CVN-BC	CVI	2	2023
Jessica Rua, BSN, RN, CVN-BC	CVI	2	2023
Mary Stone, BSN, RN, CCRP, CDCES	Cardiac Rehab	2	2022 2023
Erin Wollseiffen, BSN, RN, CURN	MOR	2	2022

For more information on Clinical Advancement, email cpqi@lifespan.org or visit the [Nursing Intranet Page](#).

Carol and Fred Levinger Nursing Excellence Fund

Thanks to a generous donation from the Levinger family, The Miriam Hospital began providing Levinger nursing scholarship awards in 2022. The purpose of the scholarship is to promote nursing recruitment and retention and advance professional nursing at The Miriam Hospital. This scholarship recognizes nurses who have demonstrated commitment to professional nursing and have the potential to positively impact the future of healthcare delivery. This scholarship opportunity aligns with the Institute of Medicine *Future of Nursing Report* recommendation to "...ensure the delivery of safe, patient centered care across settings, the nursing education system must be improved. Nurses are being called upon to fill expanding roles and to master technological tools and information management systems while collaborating and coordinating care across teams of healthcare professionals. Nurses must achieve higher levels of education and training to respond to these increasing demands. Education should include opportunities for seamless transition into higher degree programs from licensed practical nurses to the associates and bachelor's degrees and beyond."

If you are interested in applying for a Levinger scholarship, contact your nurse leader, email cpqi@lifespan.org or visit the [nursing intranet page](#) for the application information.





Structural Empowerment

Carol and Fred Levinger Nursing Excellence Fund (*cont'd*)

Below is a list of Levinger scholarship recipients from 2022 and 2023 (* signifies those awarded twice in the year)

2022

Cassandra Algier MSN, RN, CEN*	Tara D'Elena, BSN, RN, CEN
Celina Carreiro, RN	Rebecca DeStefano, MSN, FNP
Abbigael Cook, BSN, RN	Ashley Giarusso, BSN, RN, CGRN *
Jennifer Cunningham, MSN, APRN	Justine Hayden, BSN, RN, CVN- RN-BC
Tara D'Elena, BSN, RN, CEN *	Faye Hollander, BSN, RN, CCRN
Andrew Fournier, MSN, APRN	Victoria Horsfield, BSN, RN, PMH-BC
Caterina Fus BSN, RN, CEN	Cynthia Hughes, MSN, RN, NPJ-BC
Jose Garcia Urzua, nursing assistant	Shahnee Lagor, BSN, RN-BC
Ashley Giarusso, BSN, RN, CGRN *	Angela Lavoie, BSN, RN
Jennifer Gomes, RN, BSN	Amber Lourenco, BSN, RN
Kayla Keough, BSN, RN	Vanessa Mansi, BSN, RN
Dawn Packer, BSN, RN, CVN-BC *	Melanie Marco, MSN, APRN, AGCNS-BC, NPJ-BC
Justin Palmer, BSN, RN, CCRN	Michelle Masse, BSN, RN, OCN
Jennifer Pickering, MSN, RN, MEDSURG-BC	Erin McAlice, BSN, RN, CVN-BC
Theresa Poirier, BSN, RN, CEN	Dawn Packer, BSN, RN, CVN-BC *
Roseann Poyourow, BSN, RN, CEN *	Elizabeth Padin, BSN, RN
Sean Rebello, MSN, APRN, FNP-BC	Justin Palmer, BSN, RN, CCRN
Megan Rivero (Lowry), BSN, RN, OCN	Noelia Perez, BSN, RN
Sara Robot, BSN, RN-BC	Erika Petrin, BSN, RN*
Lynn Santos, BSN, RN	Roseann Poyourow, BSN, RN, CEN
Carmelia Strom, BSN, RN, CVN-BC	Sean Rebello, MSN, APRN, FNP-BC

2023

Amber Archer, BSN, RN, MEDSURG-BC	Megan Rivero, BSN, RN
Jennifer Badger, BSN, RN	Charles Tashjian, BSN, RN
Christie Bowser, MSN, APRN, ACCNS-AG, NPJ-BC	Kelsey Turgeon, BSN, RN
Melinda Bulgin, Student Nurse Intern	Ophelia Williams, CNA
	Lea Yenawine, BSN, RN*





Compassionate Oncology Care

Fain 3 is The Miriam Hospital's outpatient Cancer Center, where nurses certified in oncology care provide outpatient treatment. They receive continued education specifically related to socially sensitive topics which help inform their practice. Specifically, they assess the patient's physical symptoms as well as their spiritual needs, economic and financial situations, and emotional well-being at every interaction.

Faye Hollander, BSN, RN, OCN practices primary nursing within this setting, and she developed a therapeutic relationship with a patient with medical and socioeconomic needs. This patient had been chronically unhoused for many years. She was unable to consistently access basic human needs such as food, shelter, water, and clothes.

Due to a lapse in care, her cancer progressed, and she began chemotherapy. When this patient engaged with the nursing staff, specifically Faye, a strong and trusting nurse-patient relationship developed. By incorporating her goals, encouraging her engagement, providing her with human respect, and honoring her unique needs, she gained the patient's trust and was able to provide her with holistic, patient-centered, socially inclusive care. Faye advocated for this patient to receive a prepaid cell phone so that she could contact the clinic if symptoms from chemotherapy occurred that needed to be evaluated. This also ensured the patient did not have lapses in care due to her socioeconomic situation. Faye arranged to have her prescriptions paid for, and along with her colleagues they kept food that the patient enjoyed in the clinic for her visits. This patient-tailored approach to care that transcended her physical needs did not go unnoticed by the patient, who offered, "The Fain Clinic has been helping me ever since I was diagnosed. They gave me food and gift cards to help me out. That's my family. Faye (who I see at the clinic) is like my mother. She does everything. If my doctors say I need to eat more nuts, the next time I see her, I find nuts on my table. I didn't know I had support like that until I came here. I didn't realize I had all these friends, until the Fain Center." The care provided by Faye and the entire nursing and interprofessional team illustrates how they individualize each patient's physical / medical, social, and emotional needs while they undergo cancer care.

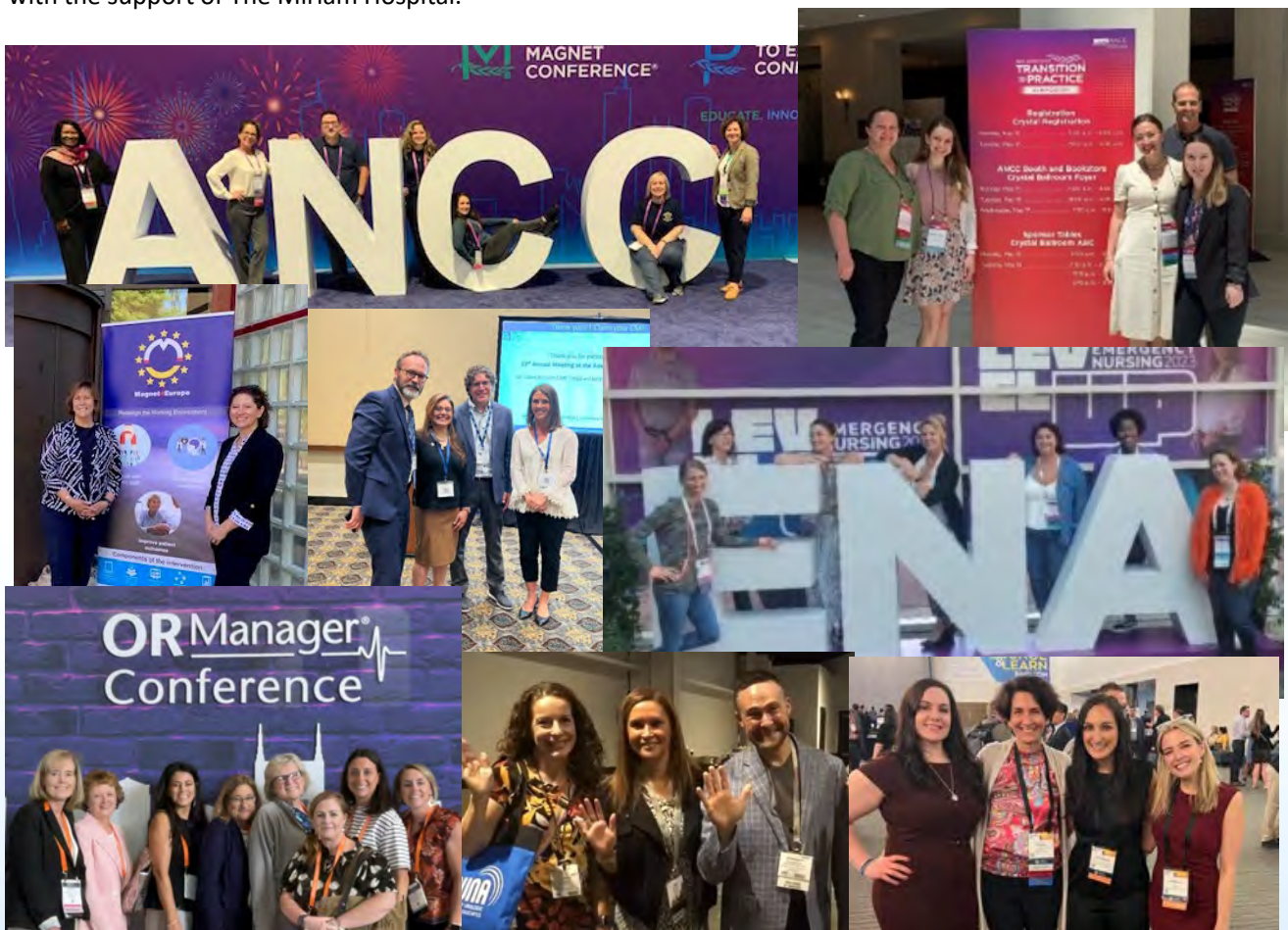




Structural Empowerment

Support for Attendance to Nursing Conferences

The Miriam Hospital supports nurses interested in furthering their education through the attendance of regional and national conferences. Thanks to the philanthropic support of local donors, and the leadership support from every department, clinical nurses can learn from industry experts, network with peers outside the organization, and be professionally inspired and re-energized. Nurses from The Miriam Hospital frequently present their work at local, regional, and national conferences, and are sources of innovation and inspiration for nurses at other organizations. Information nurses glean from conferences is shared, enabling us to keep abreast of best practices and continually grow and improve. In 2022 and 2023, over 30 nurses attended national and regional conferences with the support of The Miriam Hospital.



Starting Top Left: ANCC, ANPD, Magnet 4 Europe, American Delerium Society, ENA, OR Manager, SUNA, APP Executive Leadership Summit





Structural Empowerment

Support for Attendance to Nursing Conferences

Conference or Specialty	Location	Nurses in Attendance	
Adv. Practice Executive Leadership Summit	Park City, UT	Leanne Burke*	Ashley Arnold*
Amer. Association Ambulatory Care Nurses	Virtual	Leigh Hubbard*	
Amer. Assoc. of Nurse Practitioners	New Orleans, LA	Nancy Stone*	
Amer. College of Cardiology, RI State Dinner	Providence, RI	Patricia Shea Leary*	
Amer. College of Cardiology, RI Team Conference	Providence, RI	Nancy Stone*	
American Delerium Society	Providence, RI	Lauren Scully*	
American Society for Metabolic and Bariatric Surgery	Las Vegas, NV	Kellie Armstrong	
ANCC PTAP Symposium	Orlando, FL	Melanie Marco* Vanessa Mansi* Cassandra Algier*	Jon Medeiros* Kaitlyn Hamilton*
ANCC Magnet Conference	Chicago, IL	Leigh Hubbard Joy Jacavone Amy Schenck* Christopher Amore	Vanzetta James Elizabeth LePage* Stephanie Ramirez
AONL Professional Governance	Denver, CO	Jean Mellott Aja Dawson Charlene Hokanson	Vanzetta James Brenda Iozzi
Association of Nurses in AIDS Care	New Orleans, LA	Stacey Chapman	Donna Nunez
Association of Nursing Professional Development Conference	Atlanta, GA	Jean Mellott Jill Lukin Dawn Packer	Cynthia Hughes Nicole Hebert
Association of OR Nurses	San Antonio, TX	Cathy Insana	Julie Greenhalgh
Emergency Nursing Association	San Francisco, CA	Mary Larochele Erin Switzer Rose Poyourow	Caterina Fus* Cassandra Algier* Shalana Jett
Eastern Nursing Research Society	Providence, RI	Leanne Burke*	
EPIC, Nurse Informatics	Verona, WI	Heather Laplume*	
Magnet 4 Europe	Oslo, Norway	Jean Mellott	Leigh Hubbard*
National Urologic Nursing Conference	New Orleans, LA	Chris Tucci*	
National Wound Continence Nurses	Las Vegas, NV	Erin Dellagrotta*	Deborah Hegerich Bartula*
Organization of Nurse Leaders	Dartmouth, MA	Charlene Hokanson*	
OR Manager	Nashville, TN	Cathy Insana Sheila Capasso	Michelle Gelinas
TransCatheter Cardiovasc. Therapeutics Conference	San Francisco, CA	Patricia Connolly *	Nicole Navarro

* indicates those that presented via poster or podium at the conference.



Exemplary Professional Practice

Nurse Satisfaction

As valuable members of the healthcare team, The Miriam Hospital recognizes the importance of ensuring clinical nurses are engaged and energized by the work they do and the teams they work with. A nurse that experiences high levels of satisfaction and engagement provides higher quality, more compassionate care, identifies ways to creatively solve workplace challenges, and trusts their leadership to support their ongoing growth, development, and specialization.

In October 2022, 77 percent of eligible clinical nurses completed the National Database of Nursing Quality Indicators (NDNQI) RN satisfaction survey. Fifteen out of the 25 eligible units outperformed the national benchmark in at least three of the four categories when compared to other teaching hospitals of similar size:

These units or departments outperformed the national benchmarks for at least three of the four categories.

NDNQI Results Review					
Y= Outperforms the Mean N= Does NOT outperform the Mean	Fundamentals of Quality Nursing Care	Leadership Access and Responsiveness	Professional Development	Interprofessional Relationships	Total
TB Clinic / Immunology	Y	Y	Y	Y	4/4
Womens Medicine	Y	Y	Y	Y	4/4
Cardiac Rehab	Y	Y	Y	Y	4/4
Hem Onc Fain 3	Y	Y	Y	Y	4/4
3 West	Y	Y	Y	Y	4/4
Float	Y	Y	Y	Y	4/4
3 East	N	Y	Y	Y	3/4
Suite C / Mens Health	N	Y	Y	Y	3/4
3 North	Y	N	Y	Y	3/4
Inpatient OR	Y	No Data	Y	Y	3/4
CCU	Y	No Data	Y	Y	3/4
Inpatient PACU	Y	No Data	Y	Y	3/4
PCU Procedural Care Unit	Y	Y	N	Y	3/4
Surgicenter PACU	Y	Y	N	Y	3/4
Cath lab / Non-Invasive	Y	Y	Y	N	3/4





Exemplary Professional Practice

Celebrating Zero Harm in Every Area

Everyone is responsible for reducing the occurrence of Hospital Acquired conditions. Nurses protect patients from hospital acquired conditions by implementing best practice interventions that lead to safe care for their patients. The following units experienced multiple months where there were ZERO events in their areas during 2022 and 2023! These achievements were celebrated with on-unit recognition by the Zero Harm Committee and leadership.

ICU	CCU
3 East	SCU
3 West	4 East
3 North	4 West
3B	4B

ICU	SCU
3 East	4 East
3 West	4 West
3B	4B
CCU	



ICU	CCU
3 East	SCU
3 West	4 East
3 North	4 West
3B	4B

ICU	CCU
3 East	SCU
3 West	4 East
3 North	4 West
3B	4B

In ambulatory and procedural areas, nurses ensure the safest care possible for their patients. By coordinating care, preventing procedural areas and falls, patients coming to the hospital or clinics for care remain safe. Below are ambulatory areas who have achieved zero harm over the last 2 years:

NO Procedural Errors 2022-2023
Main OR
Endoscopy
Cath Lab
Fain OR
VIR

NO Falls for Multiple Months		
Endoscopy	Suite C / Men's Health	Cardiac Rehab
Cath Lab / Non-invasive Cardiology	TB Clinic / Immunology	CVI- Collyer
Interventional Radiography	Women's Medicine Collaborative	CVI- East Greenwich
Pre-Admission Testing	Surgicenter PACU	CVI- East Providence
PCU	Inpatient PACU	Cancer Care





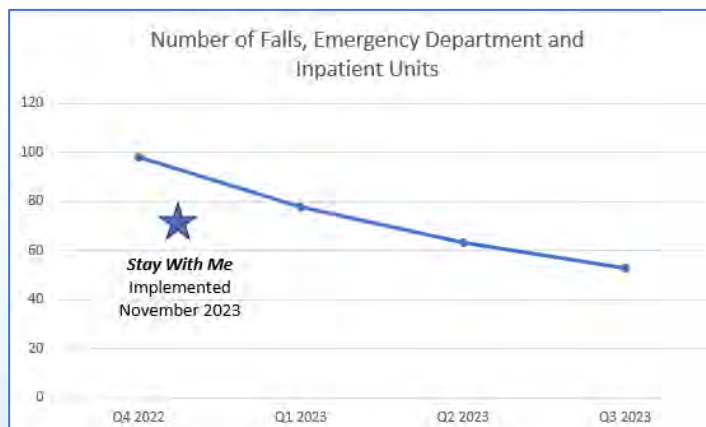
Exemplary Professional Practice

Stay With Me Program

The Zero Harm Council is an organization-level interprofessional decision-making group comprised of nurses, physical and occupational therapists, and an infection preventionist. This group analyzes data related to the hospital’s zero harm initiatives, including catheter associated urinary tract infections (CAUTI), central line bloodstream infections (CLABSI), hospital acquired pressure injuries (HAPI), and falls. They work closely with the Interprofessional Falls Committee, a group that includes advanced practice managers, physicians, secretaries, nursing assistants, quality professionals, and physical and occupational therapists. These two groups identified that a significant portion (between one and two thirds of falls) were related to toileting. They reviewed the use of well-established interventions, including the use of non-skid socks, using appropriate personnel and equipment, and ensuring all cords in lines were discontinued appropriately. The theme that prevailed was that patients were being left alone while toileting. This interprofessional group developed a plan to decrease the falls rate related to toileting, seeing that this could have a profound impact on the safety of patients. The team completed a literature review, listened to the concerns of inpatient and emergency department nursing and supportive personnel, developed a brief training, and designed and installed standardized signage on the doors to all restrooms in the inpatient and emergency department spaces. Many members provided unit level education and helped to post the new signage. A Nurse Practice Alert was distributed about the *Stay With Me* program.



Stay With Me Signage is posted on every patient bathroom door.



At the completion of this intervention, the rate of falls related to toileting decreased substantially, and the number of falls hospital-wide decreased quarter over quarter. Falls Champions throughout the organization continue to encourage nursing and supportive personnel to stay with patients when they are toileting. This is one example of how nurses collaborating amongst themselves and with the interprofessional team can develop innovative ways to keep patients safe. To join the Zero Harm Council, please reach out to Dawn Packer, the council’s chair DPacker1@lifespan.org.





Exemplary Professional Practice

Zero Heroes: Intensive Care Unit - August 2022-August 2023

From August 2022 to August 2023, the ICU team, led by Erin Lawson, BSN, RN, CCRN, Nancy Bushy, MSN, RN, ACCNS-BC, CCRN-K, Elizabeth Brayton, BSN, RN, and Molly Olm, BSN, RN, were able to protect their patients from harm through a variety of quality improvement interventions and ongoing vigilance related to patient care. In an area where patients are vulnerable to hospital acquired conditions (HACs), the ICU team worked diligently to prevent untoward outcomes for their patients. This work included ensuring basics, like exceptional hand hygiene practices, bedside reporting, and the provision of daily care of lines and skin, and creative interventions to address other underlying causes of HACs:

- **HAPI-** Interdisciplinary Collaboration between rehab, respiratory, and nursing to ensure skin care was managed effectively, despite immobility.
- **CAUTI-** CAUTI utilization (need) discussed daily at collaborative care rounds.
- **CLABSI-** Integrating blood culture collection process changes to ensure uncontaminated cultures.
- **Falls-** Vigilance related to rehab, frequent rounding, and bed alarms.



ICU team photo





Exemplary Professional Practice

Outstanding Patient Experience, Thanks to Nursing Efforts



Patients choose The Miriam Hospital because they know the quality of care is exceptional, and they trust they will be treated with compassion and respect at every interaction. Nurses are uniquely positioned to ensure the whole patient is considered when restoring health. Through their assessment, intentional presence, appreciation for the individual, provision of education, and collaboration with others, nurses ensure that patients have a good hospital or clinic experience. This influence can have lasting effects on a patient’s willingness to engage with their healthcare providers or the hospital in the future. The trust that is established between the patient and the nurse leads to better outcomes during this and future encounters. The Miriam Hospital consistently outperforms other similar hospitals nationwide in the categories of Safety, Courtesy and Respect, Teaching, and Listening Carefully. Each time a clinical nurse establishes trust with their patient, the mission of the hospital is realized.

Newly Licensed Nurse Residency Program

The Nursing Residency Program at The Miriam Hospital, the only one of its kind in Rhode Island, has received accreditation from the American Nurses Credentialing Center (ANCC). There are only some 200 such programs worldwide. Accreditation is granted for four years. The ANCC’s Practice Transition Accreditation Program (PTAP) sets the global standard for residency programs that transition registered nurses into new practice settings. Achieving PTAP accreditation requires a rigorous application process, submission of a self-study document that showcases the program, and a virtual site visit. To be recognized is a testament to the valuable hands-on experience and personal support the program provides new nurses.

“Having a Newly Licensed Nurse Residency Program that is accredited is a distinguishing factor and a great honor,” said Maria Ducharme, president of The Miriam Hospital. “We value the evidence-based framework that assists in bridging a nurse’s experience from academia to practice. In the current environment, programs that assist in developing and retaining nurses are more important than ever.”

“Our program goal is to provide the tools, resources, and support to ensure our new nurses have a smooth transition from student to professional practice. Evidence shows that organizations with accredited practice transition programs have higher retention rates,” said Melanie Marco, MSN, APRN, AGCNS-BC, NPD-BC, nurse residency program manager.





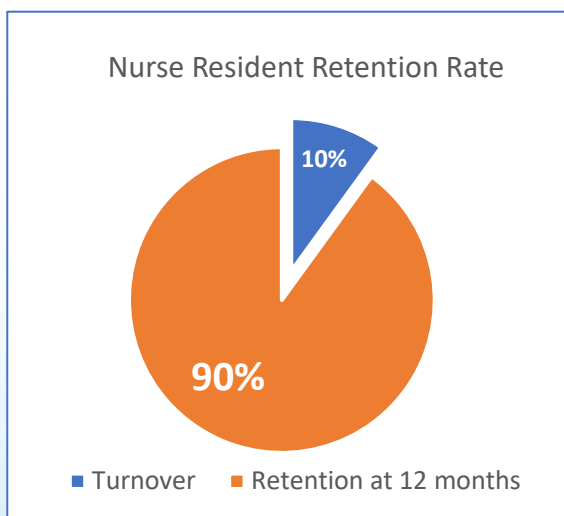
Newly Licensed Nurse Residency Program Evidence-Based Practice Projects

Key elements of the Newly Licensed Nurse Residency program include peer support built into its framework, shared classes, experiences, and social and professional networking opportunities. Nurse residents are also introduced to evidence-based practice and research. They are provided with protected time during some of their classes to explore a topic of their choice that is related to the nursing profession or nursing practice. Below is a list of evidence-based practice projects from the newly licensed nurse residents:

- The Effectiveness of Compression Stockings as DVT Prophylaxis: Are they needed?
- Be happy! Prevent HAPIs
- Chest Tube Maintenance & Complication Troubleshooting
- What is the Effect of Accurately Recording Intake and Output?
- Lock it up - A safe and Effective Multi-use Medication Storage Solution
- Improve Efficiency of Pre-Op Patients by Modifying Current Pre-Op Checklist
- Development of a Mock Schedule Template to Assist Newly Licensed Nurses with Time Management
- Implementation of a Nurse Driven Travel-Off Telemetry Protocol
- Prevention of Hemolyzed Blood Draws in the ED
- Improving Patient's Trust in Nursing Care
- Benefits of Social Media in the Workplace
- Xylazine Nurse Education at The Miriam Hospital

Some of these projects have led to policy revisions, new tools to promote safer practice, or an expansion of knowledge and/or awareness of emerging healthcare topics. During newly licensed nurse residency graduation, evidence-based practice projects are exhibited, and nurses from the organization are invited to speak to the residents about their work.

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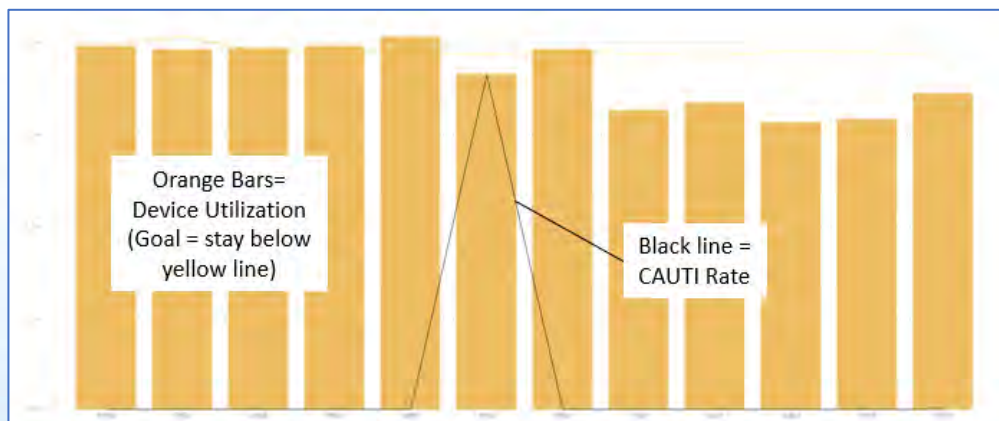


CAUTI Call to Action

Nurses throughout the organization came together to tackle a concerning rise in catheter associated urinary tract infections (CAUTI), which increased from 2021 to 2022. The infection prevention specialists identified this concern and worked collaboratively with various inpatient units and CPPI to tackle this patient safety challenge. The Chief Nursing Officer advocated for a call to action, as CAUTIs are zero harm events that can lead to adverse patient outcomes. A nursing needs assessment was completed in October 2022 and revealed that there were gaps in learning and technique related to the care of people with foley catheters. Infection Prevention, CPPI, and unit leadership worked together to ensure preceptors, those assisting with orientation competencies, and those providing maintenance care for patients with foley catheters were retrained on proper technique based on the most current recommendations. Units developed tailored interventions related to audit findings.

- The ICU added catheter status as a topic discussed with the multidisciplinary care team for every patient. This led to the prompt discontinuation of catheters on that unit.
- Hospital-wide there were efforts to ensure patients understood the risk of catheters and the importance of daily catheter maintenance care. These two topics were often misunderstood by patients. The Zero Harm booklet was published in the winter of 2022 and offered clinical nurses scripting for when a patient declines maintenance care.
- Advanced Practice Managers began intentionally rounding on the inpatient units and emergency department. During these rounds, they would ensure staff received just in time training about care of patients with catheters and how to follow the policies and procedures related to catheter discontinuation.

Hospital-Wide CAUTI Rate and Standardized Device Utilization Ratio



All these efforts paid off. The Miriam Hospital experienced a sharp decline in CAUTI with the implementation of these tactics.

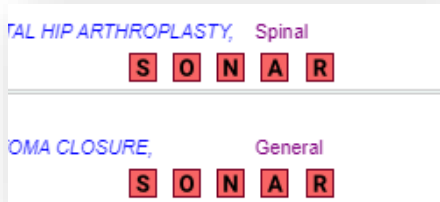




Exemplary Professional Practice

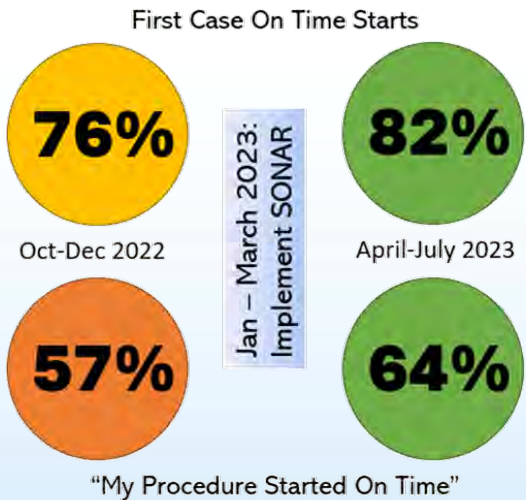
Improving Procedure On-Time-Starts (OTS) and Patient Experience

A key driver of efficiency and patient experience for surgical services departments is related to procedures starting on time. When a procedure begins on time, it means that the patient has been fully prepared, nursing, anesthesia, and procedural/surgical teams are ready to go, and equipment and supplies are in place. When all elements are synchronized, everyone benefits. OTS rates are evaluated regularly, and when there is a breakdown in the perioperative flow, the multidisciplinary team evaluates causes and works to bring about solutions. In the Fall of 2022, OTS and patient experience related to the question, “My procedure started on time” were both below The Miriam Hospital’s established benchmark. Barbara Wilson, MSN, MBA, CNOR, NEA-BC, Lifespan Vice President of Perioperative Services, attends monthly multidisciplinary meetings and inquired about use of technology to improve communication among the interdisciplinary teams, thereby enhancing care coordination and on-time starts. Barbara recommended S-O-N-A-R, a visual communication system that enables members of the perioperative team to communicate each perioperative phase of readiness. S-O-N-A-R is an acronym:



- S:** Surgeon completes the Universal Protocol steps and site marking.
- O:** OR nurse completes SBAR with the perioperative nurse and a supply check in the OR.
- N:** Pre-Op nurse documents critical steps in the pre-operative phase.
- A:** Anesthesia completes assessment documentation.
- R:** (For READY) Automatically illuminates once all four elements are completed.

Each member of the team takes ownership of their phase of care, and they can view the progress of their colleagues. Sheila Capasso, RN, MSN, ACCNS-AG, CAPA, Director of Surgical Services, discussed this with her management team and determined this tool would help improve OTS and Patient Experience. The management team discussed S-O-N-A-R with their nursing teams during huddles and staff meetings, and they made recommendations based on their direct care workflows, which were incorporated into the LifeChart build. The Perioperative Status board was updated with the S-O-N-A-R visual queue in March 2023. For the first three months after S-O-N-A-R implementation, documented OTS rose by six points, and the patient experience scores related to the question, “My procedure started on time” improved by seven points!





New Knowledge and Innovation

The Nurses at the Wheel Conference is Back

The Nurses at the Wheel conference began as a small, hospital conference over a decade ago and grew to include Newport Hospital, Rhode Island Hospital, and Bradley Hospital. This year's conference was the first to be held since the pandemic and was limited to TMH employees. The half-day conference included a warm welcome from Vanzetta James, chief nursing officer; an inspiring keynote speaker, Olivia Lemberger PhD, MSN, RN, CHSE, NPD-BC, ANA Innovation Design Strategist; five rapid fire Research and Practice Improvement presentations, and 10 thought-provoking poster presentations. Over 50 people attended the conference, and feedback was overwhelmingly positive. The Evidence-Based Practice council is already planning the 2024 Nurses at the Wheel conference for next November.



From Left to Right: Karen Schaefer, Jennifer Nappi, Patrick Murphy, Christie Bowser, Mary Stone, Leigh Hubbard, Olivia Lemberger, Safiya Naidjate, Jonathon Carpenter, Heather Laplume, Melanie Marco, Nicole Hebert, Amy Schenck.

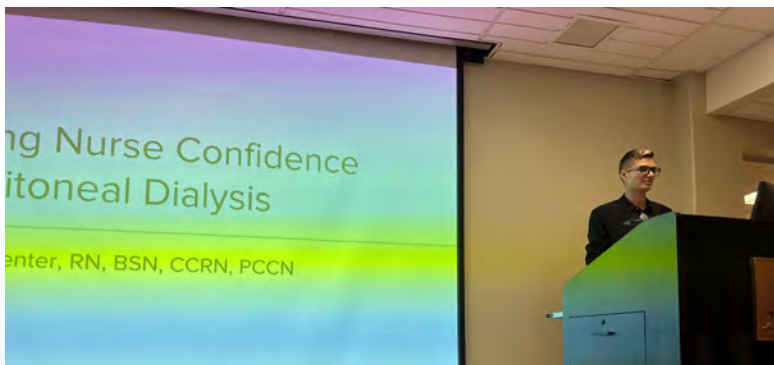
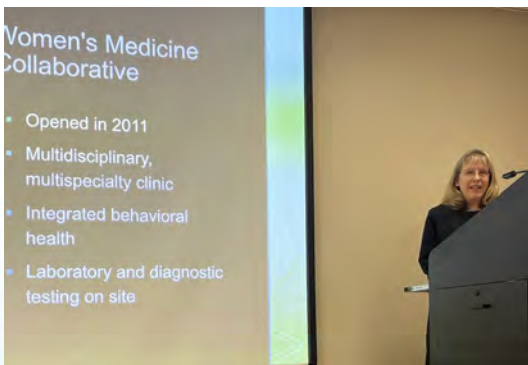




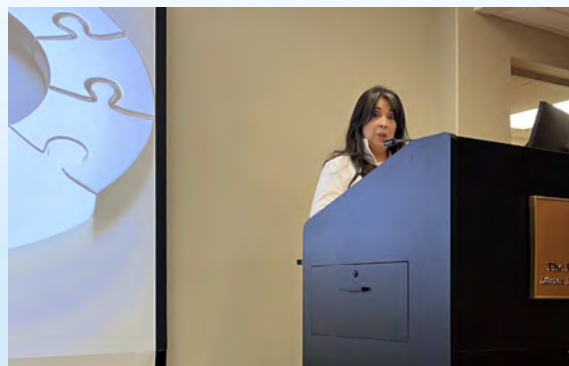
New Knowledge and Innovation

Nurses at the Wheel Presenters

Podium Presentations	Presenter
Welcome!	Dr. Vanzetta James, SVP, CNO, TMH
Keynote Speaker: Nurse Innovators: Framing the Future of Healthcare	Dr. Olivia Lemberger, Innovation Design Strategist, ANA
The Screen and Intervene Initiative: Implementing a SDoH Screening and Resource Intervention for Adult Mental Health Patients in the Emergency Department	Denise Brennan, Elizabeth LePage, Elizabeth Padin
Increasing Nursing and Patient Confidence with Peritoneal Dialysis	Jonathan Carpenter
Decreasing Preventable Hospitalizations and ED Use for HTN Episodes	Jennifer Nappi, Safiya Naidjate
Showcasing the Successes of Nursing– An Overview of the Sailing to Seven Magnet Document	Leigh Hubbard
Closing the Orientation Gap through Layered Learning	Jean Mellott, Dawn Packer, Christie Bowser Nicole Hebert



*Jennifer Nappi, MSN, RN, CDOE;
Jonathan Carpenter, BSN, RN, CCRN,
PCCN; Elizabeth Padin, BSN, RN*





New Knowledge and Innovation

Nurses at the Wheel Presenters

Poster Presentations	Presenter
Sepsis Identification by Nurses in the Emergency Room: A Quality Improvement Project	Patrick Murphy
Same-Day Sick Visit Appointment Expansion Program	Jennifer Pickering
Cardiac Rehabilitation Outcomes of Participants with Non-English Preferred Language	Mary Stone
The Clinical Nurse Specialist: Essential Advanced Practice Role	Karen Schaefer
Effects of a Structured Mentorship Program on Experienced Nurses Mentoring Newly Licensed Nurses at a Magnet™ Hospital	Jill Lukin Melanie Marco
Increasing Medication Administration Safety: Implementation of IV Smart Pump Integration Workflows at the Bedside	Heather Laplume
Nurse Driven Heparin Continuous Infusion Protocol Optimization with EHR Decision Support	Heather Laplume
Effect of Transcendental Meditation on Well-Being of Newly Licensed Nurse Participants in an Accredited Transition to Practice Program at a Magnet™ Hospital: A Pilot Study	Cynthia Hughes, Melanie Marco, Jean Mellott, Amy Schenck
Heparin Great Escape	Nicole Hebert
Nurse for a Day : A Collaborative Experience	Melanie Marco, Melissa Sabella, Kelly Foster



From Left to right: Amy Schenck, BSN, RN, HBN-BC, Dawn Packer BSN, RN, CVN-BC, and Melissa Sabella BSN, RN, OCN





Screen and Intervene: Implementing a Social Determinants of Health Screening and Resource Intervention in the Emergency Department

In 2022, Denise Brennan, DNP, RN, CNL, Director of Emergency Services, Radiology Nursing and Stroke Program, received Institutional Review Board (IRB) approval for a nurse-driven research project that aimed to improve care for patients with behavioral health problems who sought care in the ED. She found that screening for Social Determinants of Health (SDoH) was done in primary care clinics, yet many patients seek care for their mental health problems in the ED. She was interested in learning if SDoH factors were contributing to their healthcare access challenges. Her IRB approved research project aimed to implement a screening tool and connect patients that needed assistance with an intervention. The screening tool assessed for challenges accessing healthcare, stable housing, food, transportation, and utilities. A secondary aim was to reduce time in the ED for people seeking mental health care and reduce readmissions to the ED for people enrolled in this program. Nurse navigators conducted the screenings and follow-up for patients who chose to enroll in this program. The intervention time frame ended in the spring of 2023. Data analysis revealed that most patients who enrolled had at least two conditions related to mental health. Almost 70 percent of patients had more than one identified need. Transportation and housing were identified most often. Over 90 percent of those who enrolled accepted an intervention relating to their social determinants of health needs. Ninety percent agreed to a two-week follow up phone call from the navigator, but only 37 percent were able to be reached two weeks after their emergency department visit. Of those reached, 100 percent felt the program should be offered on an ongoing basis. ED visits and mental health boarding hours were both reduced by half. This research uncovered systemic challenges that our community faces. Telephone access was inconsistent and was a barrier for patients to complete their follow up with the navigator and with their primary care doctors. In Rhode Island, there are inadequate resources for housing and transportation, the two factors most identified during the screening process.



In September 2023, American Nurses Association of Rhode Island invited Denise, Elizabeth LePage BSN, RN, PMH, and Elizabeth Padin, BSN, RN to present their research at a nationally advertised webinar. They also presented at the Nurses at the Wheel conference where nurses from The Miriam Hospital attend to learn about nursing innovation and research conducted within the organization.



Rethinking Heart Failure Management



Ambulatory clinical nurses caring for patient with cardiac health problems, including congestive heart failure (HF), routinely triaged patient calls and concerns related to fluid overload and/or shortness of breath (SOB), common symptoms experienced by a person with HF. In the Cardiovascular Institute (CVI), clinical nurse Jennifer Cabral BSN, RN identified a need for practice improvement in the Spring of 2022, as she was concerned about the frequent delay between receiving a concerning call from a patient, developing the plan of care, then re-connecting with the patient to provide the education. She learned that a similar clinic developed a nurse-driven diuretic titration protocol to reduce the time to intervention when patients called with HF exacerbation symptoms. This protocol is driven by the American Heart Association / American College of Cardiology (ACC)/ 2022 Heart Failure Society of America (HFSA) clinical practice guidelines.

Jennifer reviewed the protocol and considered ways to implement this evidence-based practice into the workflow for the patient population seen at CVI and proposed the adoption of a nurse-driven diuretic titration protocol. Together with her leader, Lori Moniz, MSN, RN, they drafted a version that would meet the needs of their patient population, included the interdisciplinary team, including pharmacy and providers, and also solicited feedback from the clinical nurses at each CVI location. After several iterations, the protocol was approved and enacted in Spring 2023. After adopting this evidence-based practice, the experience of the patient, clinical nurse, and provider are all more streamlined, and the likelihood that a delay in care would lead to a patient seeking emergency room level care or being hospitalized was reduced. In many cases, the turnaround time has been eliminated.

Meet Dr. Karen Jennings Mathis, Nurse Researcher for The Miriam Hospital



Karen Jennings Mathis, PhD, APRN-CNP, PMHNP-BC, FAED, is a research scientist at the Center for Professional Practice and Innovation (CPPI) and the Center for Behavioral and Preventive Medicine (CBPM) at The Miriam Hospital. She is an assistant professor of Psychiatry and Human Behavior at the Warren Alpert Medical School. Karen earned a BA in Psychology from Amherst College and a MS and PhD in nursing from Boston College. She subsequently completed the NIMH T32 Midwest Regional Postdoctoral Fellowship at the University of Chicago (2016-2018), was tenure-track faculty at the University of Rhode Island (2018-2023) and is a scholar of the NIMHD Health Disparities Research Institute. Karen is also a psychiatric mental health nurse practitioner. If you have an idea or question, reach out to CPPI at cpqi@lifespan.org, or talk with your leader. Curiosity and innovation are a part of nursing's legacy, and we want to help you grow your ideas.





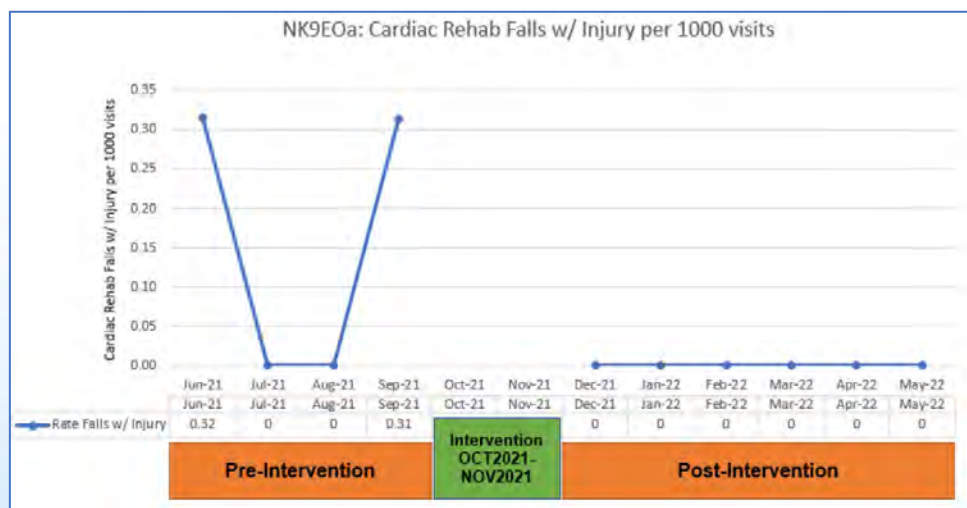
New Knowledge and Innovation

Reducing Falls in the Cardiac Rehab Gym



The Miriam Hospital's Cardiac Rehab (CR) program resides at 208 Collyer St. The department houses a large classroom, individual exam rooms, cardiac testing, and a large exercise gym, including treadmills, ellipticals, and weight machines. Patients enrolled in CR have recently experienced a cardiac event or procedure. These patients are generally older and due to their medical conditions, at a higher risk for physiologic and mechanical falls. Despite this risk, the American College of Cardiologists and other governing bodies highly

recommend CR, because participation in a CR program has been demonstrated to improve the life expectancy of people who have experienced cardiac events. In 2021, the CR program experienced a falls with injury rate that was higher than expected. Clinical nurses worked with exercise physiologists to determine the cause of these falls and developed an action plan to prevent them from happening in the future. The group evaluated the footprint of the gym, the utilization of the various pieces of equipment, and visual indicators that would alert patients of where equipment was located. They also evaluated the safety education that patients undergo and compared this to other CR programs nationwide. Over the period of two months, they redesigned the footprint of the gym, removed infrequently used equipment, improved the visual cues around each piece of equipment, and implemented a refined safety education course, contract, and treadmill safety quiz. After completing these actions, the cardiac rehab clinic experienced a six-month period where there were no falls with injury.



After the Cardiac Rehab gym redesign, falls with injury were dramatically reduced.





The Miriam Hospital
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