



Mass General Brigham
Brigham and Women's Faulkner Hospital

Department of Nursing

2021
Annual Report



Table of contents

A letter from Cori Loescher, MM, BSN, RN, NEA-BC, Chief Nursing Officer and Vice President of Patient Care Services	4
---	---

Transformational Leadership

Nursing Administration	5
Nurse Directors, Assistant Nurse Directors and Flow Managers	5
Program Directors and Managers	6
Professional Development Managers	6
Nurse Scientists	6
At Fall Nursing Summit, the Unit Based Councils and Nursing Shared Governance Committees come together to vision the future of Shared Governance	7
Clinical nurse lends her expertise to the Diversity, Equity & Inclusion Council	8
Making a difference in the communities we serve	9
New Employee Resource Group gives nurses of color a forum for fellowship and professional and personal growth	10

Structural Empowerment

Nurses attend 2021 ANCC National Magnet Conference	11
Nurse Recognition Awards recognize excellence in nursing	12
2021 DAISY Awards	13
2021 APP in Excellence Award	14
Boston Globe’s Salute to Nurses	14
2021 Pillars of Excellence Awards	14
Department of Nursing adopts new Nurse Scientist Model	15
Celebrating our certified nurses	16
Congratulations to our newest certified nurses	17
Commitment to education	18
Inspiration from our lifelong learners	19
Newly Licensed Nurse Residency Program expands to the perioperative areas	20

Exemplary Professional Practice

Professional Practice Model	21
Nursing Peer Review	21
Shared Governance Committees	22-25
Quality Data	26-27
Suspect sepsis? Remember to CALL-IT	28

New Knowledge, Innovations and Improvements

Publications and presentations	29
Periop 101 Program helps registered nurses transition to the operating room	30
Increased access to palliative care consult service gives patients, families and staff much needed support in the ICU	30-31
“Tap N Go” streamlines Epic access	32-33
Bariatric ERAS Program proves successful	34

A letter from Cori Loescher, MM, BSN, RN, NEA-BC Chief Nursing Officer and Vice President of Patient Care Services

Dear Nursing Colleagues,

Welcome to our 2021 Annual Report!

We began 2021 feeling hopeful that the COVID-19 pandemic might soon subside as vaccines became available. I was elated on that first day shots were administered here at Brigham and Women's Faulkner Hospital to see so many of our nursing colleagues step up to receive their first dose. I felt an overwhelming sense of pride to know you were doing your part to protect your patients, your families and yourselves. While the vaccines have been highly effective at preventing serious illness, and hospitalizations, the Delta variant emerged and again we felt a sense of dread. We were lucky here in Massachusetts to see the rate of COVID-19 hospitalizations remain manageable most of the year, but this fall brought a wave of patients hospitalized with other illnesses and in need of outpatient care. Despite your fatigue, you have stepped up to care for those in need. For that, I am forever grateful.

With a new variant on the rise at time of this writing and a nation-wide shortage of healthcare workers, we continue to face challenges each and every day. But I do have hope that things will get better. Clinical nurses, nurse leaders and multidisciplinary teams meet regularly both at the local and system level to manage the resources we have and we're implementing new ideas to attract and retain our nursing staff, including offering opportunities within to explore new career opportunities right here at Brigham and Women's Faulkner Hospital. You will read more about that later in this report.

Despite the challenges, we have stayed strong, together. And we had quite a successful year. In fact, we were able to accomplish most of our Strategic Goals, despite caring for higher acuity patients and increased volume. You can feel proud of that accomplishment.

We also have made progress toward Magnet redesignation. In September, our interim monitoring report was accepted by the Magnet office. That puts us about halfway between our designation in 2019 and when our redesignation documents are due in 2023.

I hope reading this year's Annual Report makes you feel a sense of pride in your work and our organization. On a personal note, I cannot thank you all enough for the work you do. To those of you coping with the physical and emotional burden of caring for our sickest patients and those of you overwhelmed by the sheer number of patients you see each day, please know your struggles do not go unnoticed and that without you we could not accomplish our mission to care for the people in our communities.

Sincerely,



Cori Loescher, MM, BSN, RN, NEA-BC
Chief Nursing Officer and Vice President of Patient Care Services

Nursing Administration



Cori Loescher, MM, BSN, RN, NEA-BC
Chief Nursing Officer and
Vice President of Patient
Care Services



Robin Kaufman, DNP, APRN, FNP-C, NEA-BC
Associate Chief Nurse,
Perianesthesia/Procedural
and Ambulatory Services



Lynne Morrison, MS, RN
Associate Chief Nurse
of Inpatient Nursing



Colleen West, DNP, MBA, RN, CPHQ
Executive Director of
Nursing Professional
Development, Practice
and Innovation

Nurse Directors, Assistant Nurse Directors and Flow Managers



Patrice Baril, MSN, RN, CNOR
Nurse Director
Operating Room



Mary Anne Barry, MBA, BSN, RN
Nurse Director 7 South and
IV Team



Allison Bernard, PhD, DNP, RN
Nurse Director 6 South



Juliet Gleason, MBA, MSN, RN
Nurse Director 7 North
and Float Pool



Kathryn James, BSN, RN
Nurse Director 2 South
(Interim)



Erin Kelleher, BSN, RN
Assistant Nurse Director
Ambulatory Services



Brenda Miele, MSN, RN
Nurse Director 7 North
and Float Pool



Pam Park, MSN, RN, FNP-C
Perioperative Flow/
Operations Manager



Robin Powell, MSN, RN, CEN
Nurse Director Emergency
Department



Suzelle Saint-Eloi, MS, RN
Nurse Director 6 North



Estier Sayegh, MBA, BSN, RN, CNRN, PCCN, CCRN
Nurse Director ICU,
Dialysis and Respiratory

Program Directors and Managers



Shelly Bazes, MS, RN, WHNP-BC
Program Manager, Patient Acuity



Cody Hedglin, MSN, RN, CWON
Program Manager, Wound
Ostomy Continence Care



Rose LaPlante, MBA, MSN, RN
Program Manager, Nursing
Quality and Magnet



Paula Wolski, MSN, RN-BC
Program Director,
Informatics for Nursing/
Patient Care Services

Professional Development Managers



**Susan Belton, MSN,
BS, RN, CNL**
6 North and 7 North



**Jennifer Capone,
MSN, RN**
Nursing Orientation and
Transition to Practice



Lauren Donovan, MSN, RN
Endoscopy, OPIC, Pain
Management Center and
Cardiac Rehabilitation



**Phil Malleon,
MSN, RN, NPD-BC**
6 South, IV and
Float Pool



**Kathy McCarraher, MHA,
BSN, RN, CPAN, ONC**
PACU, 7 South, Center for
Preoperative Evaluation
and Pre-Op Holding



**Maria Murphy
McKay MSN, RN**
Operating Room



**Tedi Hughes, MSN,
RN, PMHCNS-BC**
2 South



**Patricia Rabbett, MSN,
RN, CCRN-K**
Interventional
Radiology/
Interventional
Nephrology, ICU
and Dialysis



**Terry Roche, MSN,
RN, NPD-BC**
Per Diem Educator



**Beth Waters, MSN, RN,
CPEN**
Emergency Department,
Nursing Supervisors and
PCA Float Pool

Nurse Scientists



**Helene Bowen Brady,
DNP, MEd, RN,
NEA-BC, NPD-BC**



**Kathleen Ahern
Gould, PhD, RN**

At fall Nursing Summit, the Unit Based Councils and Nursing Shared Governance Committees come together to vision the future of Shared Governance

Brigham and Women's Faulkner Hospital's Department of Nursing recently gathered chairpersons from each of the Unit Based Councils, Nursing Shared Governance Committees and the APP Council for their annual fall summit meeting. The summit is designed to develop leadership skills, share examples of unit- or committee-level practice improvements and engage clinical nurses in the development of the Department of Nursing's Strategic Goals.

At the start of the summit, Cori Loescher, MM, BSN, RN, NEA-BC, Chief Nursing Officer and Vice President of Patient Care Services, reviewed the 2021 Nursing Strategic Goals with participants. "Even though it was a challenging year, it was really a positive year in terms of what we were able to achieve," she said. "We were able to accomplish most of our goals despite caring for higher acuity patients and an increased volume. You can feel proud that this was a good year."

After reviewing the 2021 accomplishments, participants spent time in small groups to provide feedback on Brigham and Women's Faulkner Hospital's 2022 Strategic Goals and nursing priorities. Loescher and nursing leadership will use this feedback to finalize the 2022 Nursing Strategic Plan.

The summit included updates from each of the Unit Based Councils and Shared Governance Committees. Joanne Hallahan, BSN, RN, and Sarah Munier, MSN, RN, CEN, shared the Emergency Department Unit Based Council's work, "Behind the Curtain," which aims to reduce noise in the busy ED. Clinical Leader Jacqueline Dejean, BSN, RN, and Monica Pina, BSN, RN, shared the 7 North Unit Based Council's efforts to consistently perform bedside shift reports utilizing a standardized tool. This improvement, and inclusion of patients in bedside



Participants listen intently as their colleagues share their thoughts on the future of Shared Governance at Brigham and Women's Faulkner Hospital

reports, is aimed at improving outcomes such as decreasing patient fall rates and addressing call bell fatigue.

Participants shared their thoughts on the impact this day will have on their professional practice. One said the summit "helps inspire ideas and projects to start on the unit and helps us to better understand struggles on other units (and) get to know our peers." Another said, "I am excited to bring back to my unit all I have learned today and hopefully instill excitement in my peers to continue to strive for ways to meet the best patient outcomes."

As a final reflection, Loescher shared her thoughts, "We are still in a pandemic, in the middle of staffing crisis and dealing with a high patient census, but, despite those challenges, I think the future is bright. This is important work, it's who we are and that's why we are a Magnet organization. You are all committed to doing the work of providing the highest quality care to our patients despite the struggles we are currently facing."

Clinical nurse lends her expertise to the Diversity, Equity & Inclusion Council



June Scott, RN

Co-chaired by Senior Director of Public Safety and Support Services Terrance Lassiter and 6 North Nurse Director Suzelle Saint-Eloi, MS, RN, with support from Executive Sponsor and Brigham and Women's Faulkner Hospital President David McCready, the Diversity, Equity & Inclusion Council is focused on recommending strategic priorities and actions related to diversity, equity, inclusion, community health and health equity for our employees, patients and the communities we serve. The group works collaboratively with colleagues from across the Brigham family and Mass General Brigham to ensure that we continue to keep diversity, equity and inclusion at the heart of all we do.

6 North's June Scott, RN, is among the multidisciplinary group of council members. Scott has a daughter who is blind. Witnessing a lack of accessibility firsthand has inspired her to devote much of her life to disability studies. She has a master's degree in Disability Studies and is ADA certified.

When she is not caring for patients at Brigham and Women's Faulkner Hospital, she uses her lived experience and her specialized training consulting, offering expert legal opinions and teaching. She has developed curriculum for healthcare and business students at the university level and is involved in a wide range of other organizations focused on diversity, equity and inclusion.

"I am excited to be part of the Diversity, Equity & Inclusion Council on our campus. I love this work. It's so energizing to help make people's voices heard that might not otherwise be heard," she says.

"So far, being part of the group has been very rewarding. I am really excited about the work we are doing here at Brigham and Women's Faulkner Hospital and that it's multidisciplinary. Different perspectives are so important to do this work. All of our lived experiences inform this work. We learn so much from each other."



Diversity, Equity & Inclusion Council

If you would like to join the Diversity, Equity & Inclusion Council, or if you have ideas for how we can do better for our patients and each other, please reach out to Suzelle Saint-Eloi at suzelle_sainteloi@dfci.harvard.edu.

Making a difference in the communities we serve

Throughout the year, Brigham and Women's Faulkner Hospital nurses extend their reach beyond our hospital walls, volunteering in our community.

Shelly Bazes, MS, RN, WHNP-BC, Program Manager for Patient Acuity was among those who volunteered aboard the Mass General Brigham Community Care Van over the summer.



Bindu Thomas, MS, RN, FNP-BC, from the Weiner Center for Preoperative Evaluation and her daughter Rachel volunteered at SunSplash, an annual event at the Italian Home for Children which caps off the summer with a day of fun.



Over the holidays, the team on 7 South chipped in to donate Christmas gifts to the kids at the Italian Home for Children.

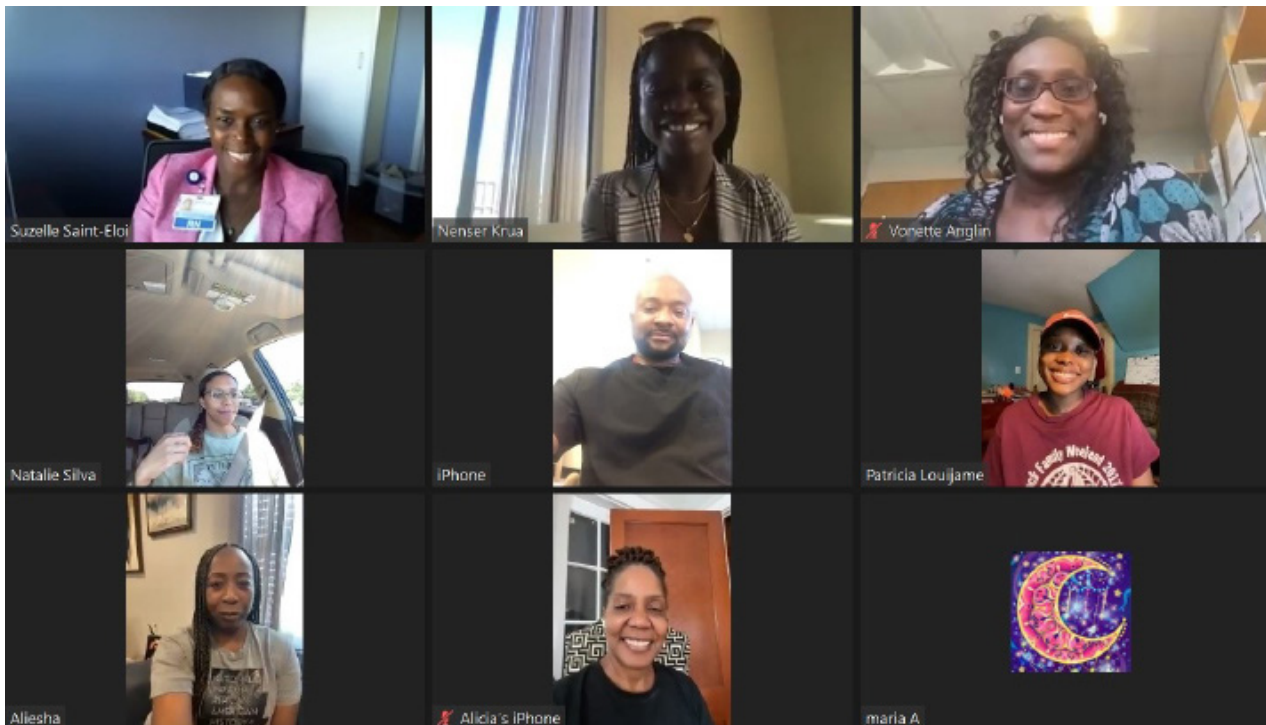


The APP Council collected diapers, wipes and feminine hygiene products after the Brigham and Women's Faulkner Hospital Emerging Leaders Committee identified this critical need in the community.

The APP Council also collected toys to donate to the kids at the Italian Home for Children.



New Employee Resource Group gives nurses of color a forum for fellowship and professional and personal growth



With support from 6 North Nurse Director and Co-Chair of Brigham and Women's Faulkner Hospital's Diversity, Equity & Inclusion Council Suzelle Saint-Eloi, MS, RN, the Nurses of Color Employee Resource Group (ERG) brings together colleagues from across the hospital. The group, which meets monthly via ZOOM, is focused on supporting nurses of color, providing an environment where colleagues can share experiences and collaborate to enact change.

"This is a dynamic group of nurses from all different backgrounds," says Saint-Eloi. "Some are new to practice. Some have years of experience. Together we have a lot to offer each other and the Brigham and Women's Faulkner Hospital community."

Founding member, Patricia Louijame, BSN, RN, hopes the group will have an impact on the broader Brigham and Women's Faulkner Hospital community. "We're not expecting drastic change right away, but we're hopeful," she says. "I hope the launch of our ERG shines a light on issues faced by our Black and

Brown colleagues here at Brigham and Women's Faulkner Hospital and makes people think about how they can support their colleagues in trying times like these."

Float Pool nurse Saeed Siddique, BSN, RN, says he joined the group to make his voice heard. "Joining the group will open lot of opportunities for me and will enable me to learn from my colleagues as well as know what they are about in their discipline. The ERG is very paramount to me. I think it will set the tone for the minority in the hospital and will help develop them professionally," he says.



**Nurses of Color
Employee Resource Group**

Interested in joining the Nurses of Color ERG? Contact Suzelle Saint-Eloi at suzelle_sainteloi@dfci.harvard.edu.

Nurses attend 2021 ANCC National Magnet Conference

The American Nurses Credentialing Center's (ANCC) Magnet Recognition Program® recognizes healthcare organizations for quality patient care, nursing excellence and innovations in professional nursing practice. Brigham and Women's Faulkner Hospital earned Magnet designation in 2019 and its interim monitoring report was accepted in September of 2021, which is due halfway through the four-year Magnet designation. In November, seven representatives from the hospital attended the ANCC National Magnet Conference® in Atlanta to learn about innovations other hospitals have undertaken to improve their practice environments.

Among the delegates from Brigham and Women's Faulkner Hospital were Cori Loescher, MM, BSN, RN, NEA-BC, Chief Nursing Officer and Vice President of Patient Care Services, Beth Waters, MSN, RN, CPEN, Professional Development Manager for the Emergency Department, Nursing Supervisors and PCA Float Pool, Rose LaPlante, MBA, MSN, RN, Program Manager for Nursing Quality and Magnet, Lynne Morrison, MS, RN, Associate Chief Nurse of Inpatient Nursing, Brenda Miele, MSN, RN, Nurse Director for 7 North and the Float Pool, Jennifer James, BSN, RN, Float Pool Staff Nurse, and Erica Babine, MSN, RN, 7 South Clinical Leader.

Between them, the group attended over 35 different sessions where presenters shared new ideas on improving the practice environment, patient experience and staff experience. The team has brought some of these ideas back to Brigham and Women's Faulkner Hospital in hopes of implementing them here. During some sessions, the team found Brigham and Women's Faulkner Hospital is already ahead of the curve. "Sometimes it's validating to go to a session and be able to say, 'We already do that!'" says Loescher.

All seven attended the general sessions, which included keynote addresses from photographer and filmmaker Carolyn Jones, Big Little Breakthroughs: How Small, Everyday Ideas Drive Gigantic Results author Josh Linker and Marcus Engel who was blinded and severely injured by a drunk driver and



From left: Cori Loescher, MM, BSN, RN, NEA-BC, Chief Nursing Officer and Vice President of Patient Care Services, Beth Waters, MSN, RN, CPEN, Professional Development Manager for the Emergency Department, Nursing Supervisors and PCA Float Pool, Rose LaPlante, MBA, MSN, RN, Program Manager for Nursing Quality and Magnet, Lynne Morrison, MS, RN, Associate Chief Nurse of Inpatient Nursing, Brenda Miele, MSN, RN, Nurse Director for 7 North and the Float Pool, Jennifer James, BSN, RN, Float Pool Staff Nurse, and Erica Babine, MSN, RN, 7 South Clinical Leader

speaks about the nursing care he received. "This was my first time at the Magnet Convention, and I thought the keynote speakers were really inspiring," says James.

For Loescher, who has attended the Magnet Convention in the past, this year's event was especially impactful. Last year, due to the COVID-19 pandemic, the convention was canceled. This year, under strict precautions, the event was able to take place. "A number of the presenters were prepared and ready to present last year. They came this year with their pre-pandemic information, which they had to update to include what was sustained or retained during the pandemic. There was a lot of good work presented, but it was clear the pandemic put a monkey wrench in a lot of it," she says. "I look forward to next year and seeing how the work has changed two years into the COVID-19 pandemic. But, at the end of the day, I just love that we could bring a group from the hospital to go and enjoy each other's company and learn. The environment was inspiring."

And for LaPlante, who will lead the effort to submit our Magnet redesignation documents in 2023, the convention was a chance to take stock of how we are doing and the areas where more focus is needed. "It was exciting to learn what other hospitals are doing and what we might be able to implement here," she says. "We were already able to share some of what we learned with the Magneteers committee, and we plan to share it more widely as well."

Nurse Recognition Awards recognize excellence in nursing

Each year during National Nurses Week, Brigham and Women's Faulkner Hospital celebrates its nurses with Nurse Recognition Awards.

6 North nurse Terry Doyle, BSN, RN, was presented with the Mary Devane Award. The award was established in 1998, by the family of Mary Devane, to be given to any member of Brigham and Women's Faulkner Hospital Department of Nursing (RN, PCA, UST, MHW, Secretary) in recognition of their commitment to delivering patient care with compassion, kindness and humor.

6 North nurse Patricia Louijame, BSN, RN, received the Elaine Hazelton Memorial Scholarship Award. Elaine Hazelton's family established this award in 2009 to be given to a nurse who demonstrates a dedication to Brigham and Women's Faulkner Hospital within the practice and advance of nursing. This recipient should be continuing his or her nursing education.

7 South nurse Digi Rojas, BSN, RN, received The Angela McAlarney Award. The McAlarney Award was established in 2003 to be given to a member of Brigham and Women's Faulkner Hospital's Department of Nursing in recognition of excellence in patient and family education.

6 North's Cassandra Antoine, BSN, RN, 6 South's Jacqueline Slattery, BSN, RN, MEDSURG-BC, and the ICU's Lauren Lavallee, MSN, RN, all received Mrachek



From Left: Jacqueline Slattery, BSN, RN, MEDSURG-BC, Cassandra Antoine, BSN, RN, Patricia Louijame, BSN, RN, Lauren Lavallee, MSN, RN, and Abby Dubel, BSN, RN; Not Pictured: Terry Doyle, BSN, RN, Digi Rojas, BSN, RN, and Barbara Deralus.

Awards. The Mrachek Award was established in 1995 and is given to three members of Brigham and Women's Faulkner Hospital's Department of Nursing in recognition of their clinical skills and to support their continuing education in the nursing profession.

Abby Dubel, BSN, RN, from the Float Pool, received the Newly Licensed Nurse Award. This award was established in 2019 and is given to a Newly Licensed Nurse hired in the previous 12 months at Brigham and Women's Faulkner Hospital in recognition of their personal and professional growth.

The Emmly Fidelia Nursing Support Staff Award was established in 2020 to be given to any support staff member of the Department of Nursing (PCA, UST, MHW, Secretary) in recognition of their integral role to the commitment and delivery of care for the units, staff and patients they care for/work with. This year's recipient was presented to 6 North's Barbara Deralus.

The Evidence-Based Practice Award, established in 2019, is given in recognition of a multidisciplinary unit-based team or committee with a project that contributes to evidence-based practice. This year's recipient was the ICU for their work in CAUTI prevention.



The ICU team receives their Evidence-Based Practice Award

2021 DAISY Awards

Congratulations to Brigham and Women's Faulkner Hospital's 2021 DAISY Award Winners!

The DAISY Foundation is an international program established in memory of J. Patrick Barnes who died at the age of 33 from Idiopathic Thrombocytopenic Purpura, an auto-immune disease. The Barnes Family was inspired by the care that Patrick received and established this unique program to recognize and thank the nurses who make a profound difference in the lives of their patients and families. The DAISY Award recognizes those nurses who go above and beyond their regular job responsibilities to make Brigham and Women's Faulkner Hospital a great place to receive care.

The DAISY Nurse Leader Award annually recognizes the incredible work that nurse leaders do every day. At Brigham and Women's Faulkner Hospital, nurse leaders include Nurse Directors, Nursing Supervisors, Professional Development Managers, and Program Managers in the Department of Nursing.

DAISY Nurse Leader Award



James Grafton, MSN, MHA, RN, CCM

DAISY Award Winners



Emily Flynn, BSN, RN, and
Gina Marinelli, BSN, RN



Chris Malone, BSN, MPA, RN,
CPAN, CCRN



Sean Ford, BSN, RN

Here's an example of a DAISY Award nomination narrative. Emily Flynn, BSN, RN, and Gina Marinelli, BSN, RN, were both nominated by their coworker, Karen Jewett, RN, who shared:

Emily Flynn, BSN, RN, and Gina Marinelli, BSN, RN, have been going above and beyond for one of our patients. The patient has been on 6 South for nearly a year. She has encountered many physical and emotional challenges along with complicated discharge planning needs, her care plan is one obstacle after another. Although she has one son, she is basically alone. She is everyone's patient, as we all know her and take care of her. Gina and Emily have adapted her as family. Gina buys her favorite foods and brings them in. She finds and plays her favorite music on the iPad. She makes pictures and signs and hangs them all over her room. She reads the bible to her and takes her downstairs to the meditation room. She makes sure Spiritual Care Services comes up to see her. Gina is an angel. It is amazing to me to see how one person's actions can really affect another's life. Emily, who is in the Float Pool, makes time to see her whenever she is working. She too will bring things in for her, take her to the chapel and the gift shop and take her for a ride in the wheelchair. She will get her special things to eat. She will sing to her and read to her. One day when I was working, Emily was working on another floor that day and was done at 3:30 pm, she then came and sat with our patient for two hours, spending time with her. Recently it was her birthday, Gina brought in cards for everyone to sign, a big cake and brought her lunch. Emily was FaceTiming her as well. Both treat her like a queen and make her feel so important. Most of all, they both make her feel so loved and they tell her every time they are here. They show her love and respect, without these two, she would be alone and scared. When you witness this kind of care all the time, it makes other staff step up a bit as well. I know I feel proud to work on 6 South because of the true caring and humanitarianism, this is who they are.

Boston Globe's Salute to Nurses

This year, more than 800 nurses were nominated for the *Boston Globe's* "Salute to Nurses." Among this year's nominees were eleven of our colleagues:

All of Our Intensive Care Unit Nurses!

Alison Carr, BSN, RN, CEN
Emergency Department

Patricia Connolly, BSN, RN
ICU

Jon Debach, BSN, RN
6 South

Therese Doyle, BSN, RN
6 North

Meghan Gallagher, BSN, RN
Float Pool

Phyllis Garr, BSN, RN
Pre-Op Holding

Jordan Lizotte, BSN, RN
6 North

Meaghan McCarthy, MSN, RN, CCRN
ICU

Kerri-Anne Morse, BSN, RN
7 South

Elizabeth Vazquez, BSN, RN
Case Management

Pillars of Excellence Awards

The Pillars of Excellence Awards recognize and celebrate the outstanding contributions of our talented employees from across the Mass General Brigham system. Colleagues are nominated for their commitment to exceptional patient care, optimizing collaboration, advancing innovation and progress, enhancing efficiency, fostering community or integrating diversity, equity and inclusion. In 2021, several members of the Department of Nursing were honored with Pillars of Excellence Awards:

Individual Recipients from the Department of Nursing

Anna Costello, BSN, RN
2 South Clinical Leader
Category: Efficiency

Mary Martin, BSN, RN, CNOR
Operating Room Clinical Leader
Category: Collaboration

Team Recipients from the Department of Nursing

COVID-19 Testing Tent



Katie Killinger, MSN, BSN, NP-C

2021 APP in Excellence Award

Brigham and Women's Faulkner Hospital's APP in Excellence Award was established to recognize and celebrate the important contributions Advanced Practice Providers (APPs) make to the hospital. APPs include nurse practitioners, physician assistants and certified nurse anesthetists. This year's recipient was Chief NP of Orthopedic/Spine Surgery Katie Killinger, MSN, BSN, NP-C.

Department of Nursing adopts new nurse scientist model

As part of its journey toward ANCC Magnet® recognition, Brigham and Women's Faulkner Hospital has long employed a nurse scientist to support evidence-based practice and research, including the design and conduct of scientific studies, the collection and analysis of data and the dissemination of findings. Recently, the organization recruited Kathleen Ahern Gould, PhD, MSN, RN, to join Helene Bowen Brady, DNP, Med, RN, NEA-BC, NPD-BC, as nurse scientists. Both nurse scientists bring a unique set of skills and, within this new model, will provide seamless support to the Department of Nursing.



Helene Bowen Brady, DNP, Med, RN, NEA-BC, NPD-BC and Kathleen Ahern Gould, PhD, MSN, RN

Gould studied nursing at St. Elizabeth School of Nursing and began her career in critical care. A life-long learner, she later earned a BA in Education/Psychology at Emmanuel College and an MSN at Anna Maria College. In 2009, she completed her PhD in Nursing Research at Boston College. Gould has had a long career as both an educator and an editor. In addition to her role at Brigham and Women's Faulkner Hospital, she serves as Editor in Chief of the journal *Dimensions of Critical Care Nursing* and as an adjunct faculty member at Boston College.

Bowen Brady has spent much of her life at Brigham and Women's Faulkner Hospital. In fact, she was born here! She began her nursing career as a nursing student at St. Vincent's School of Nursing and later earned her BSN at Boston College. As a new nurse, she worked at the bedside at Brigham and Women's Faulkner Hospital before moving on to roles in community health and school nursing. Like Gould, Bowen Brady is a lifelong learner, she went on to earn her Med at Cambridge College and her DNP in Leadership at Regis College. In addition, she holds two national nursing specialty certifications. She returned to Brigham and Women's Faulkner Hospital in 2007 as the Nurse Educator for 6 North. Over the years she has held numerous leadership roles including Program Manager for Professional

Practice/Magnet Designation and eventually the role of Associate Chief Nurse of Practice and Innovation prior to her transition to nurse scientist. Bowen Brady is recognized for her leadership in establishing the foundations required for ANCC Magnet designation. This foundation continues to support excellence in Brigham and Women's Faulkner Hospital's nursing practice environment.

Both Gould and Bowen Brady are excited to share the work of nurse scientist. "My role as the DNP is to help implement the evidence and the research that has been done. Kathy's role as the PhD is to support nurses to design and conduct new research studies," explains Bowen Brady.

For Bowen Brady, the culture at Brigham and Women's Faulkner Hospital is what has kept her here over the years. And for Gould, it's that culture that drew her to her new role. "I am so impressed with the level of engagement here. So many nurses participate in conferences and poster presentations, belong to professional organizations and hold certifications," she says. "For someone like me, it's really easy to step into a system that's already functioning at such a high level."

Celebrating our certified nurses

Brigham and Women's Faulkner Hospital is proud to recognize the members of our nursing staff who currently hold professional nursing certification (this list is reflective of nurses working here as of December 2021).

2 South

Rose O'Sullivan, BSN, RN, PMH-BC

6 North

Bina Darai, MSN, RN, FNP-BC

6 South

Anne Marie Cecala, BSN, HNB-BC

Lindsay Farina, MSN, RN, NP-C*

Lusy Gonzalez, MSN, RN, MEDSURG-BC

Jacqueline Slattery, BSN, RN, MEDSURG-BC

Kelly Tuguinay, MSN, RN, FNP-BC

7 North

Katty Halloran, BSN, RN, MEDSURG-BC

Tracy Lane, MSN, RN, MEDSURG-BC

Sia Willis, BSN, RN, CMSRN*

7 South

Ruth Ducrepin, MSN, RN, NP-C

Caroline King, RN, MEDSURG-BC

Case Management

Rose Allain, BSN, RN, CCM

Latonya Bacon, BSN, RN, CCM

Dawn Hickey, BSN, CMGT-BC

Joanne Kelly, BSN, RN, CCM

Margaret Kelly, BSN, RN, CCM

Kathy Lang, BSN, RN, CCM

Atiya Niles, BSN, RN, CCM

Leslie St. Cyr, BSN, RN, NC-BC, CCM

Paula Winskowicz, BSN, RN, CCM

CDI/Quality

Adriana Cecchini, MSN, RN, CIC

Kirsten Larrabee, RN, CCDS

Emergency Department

Margaret Anastasi, MSN, RN, ANP-BC

Brittany Ballaron, BSN, RN, CEN

Alison Carr, BSN, RN, CEN*

Jill Grant, BSN, RN, CEN

Sarah Munier, MSN, RN, CEN

Shea North, BSN, RN, CEN

Thea Patterson, BSN, RN, CEN

Kathleen Roane, RN, CEN

Kelly Sheehan, MSN, RN, FNP-BC

Kathleen Shubitowski, MSN, RN, CEN

Gastroenterology

Helen Driscoll, MSN, RN, CGRN

Dara Keenan, RN, CGRN

Mary Morris, BSN, RN, CGRN

Catherine Murphy, BSN, RN, WCC

Intensive Care Unit

Heather Crocker MSN, RN, NP-C

Daniel Fortin, BSN, RN, CCRN

Linda Luce, BSN, RN, CCRN

Ellen McCarthy, DNP, MSN, RN, CCRN

Meaghan McCarthy, MSN, RN, CCRN

Hollis Solorzano, MSN, RN, CCRN

IV Therapy

Christine Canavan, BSN, RN, CRNI

Jestin Jose, BSN, RN, VA-BC

Violeta Ramirez, BSN, RN, CRNI

Nursing Float Pool

Patricia Viel, BSN, RN, CCM

Nursing Leadership

Patrice Baril, MSN, RN, CNOR

Shelly Bazes, MS, RN, WHCNP-BC

Helene Bowen-Brady, DNP, M.Ed, RN, NEA-BC, NP-BC

James Grafton, MSN, MHA, RN, CCM

Robin Kaufman, DNP, RN, FNP-BC, NEA-BC

Cori Loescher, MM, BSN, RN, NEA-BC

Pamela Park, MSN, RN, FNP-C

Robin Powell, MSN, RN, CEN

Estier Sayegh, MBA, BSN, RN, CCRN, PCCN, CNRN

Colleen West, DNP, MBA, RN, CPHQ

Paula Wolski, MSN, RN-BC

Nursing Supervisors

Julia Almeida, BSN, RN, MEDSURG-BC

Operating Room

Joanne Cassiani, BSN, RN, CNOR

Susan Clark, RN, CNOR

Shannon Curran, BSN, RN, CNOR

Janet Donovan, RN, CNOR

Nola Dzen, BSN, RN, CNOR

Mary Finn, RN, CNOR

Suzanne Francis, MSN, RN, CNOR

Gabrielle Harris, BSN, RN, CCRN

Maura Lauenstein, RN, CNOR

Mira R. Lumahan, BSN, RN, CNOR

Mary Martin, BSN, RN, CNOR

Cora McHugh, BSN, RN, CNOR

Jennifer Morrison, MSN, RN, FNP-BC

Sarah Nee, BSN, RN, WOCN

Valerie Orenberg, BSN, RN, CNOR

Linda Sabo, MSN, RN, CNOR

Jeanne Smith, BSN, RN, CNOR

Sandra Spaulding, BSN, RN, CNOR

Jean Tremblay, RN, CNOR

Pain Clinic

Kathleen Armando, BSN, RN, PMGT-BC*

Ann Kandalaf, RN, PMGT-BC*

Gail Vaughn, BSN, RN, PMGT-BC*

Post-Anesthesia Care Unit

Evelyn Kelleher, BSN, RN, CCRN, CPAN*

Anh Phuong Le Nguyen, BSN, RN, MEDSURG-BC*

Chris Malone, MPA, BSN, RN, CPAN, CCRN

Charlene Salvi, BSN, RN, CPAN*

Pre-Operative Holding

Carolyn Geoghegan, RN, CAPA*

Sania O'Leary, BSN, RN, CAPA*

Diane Pessa, MSN, RN-BC

Dan Rec, BSN, RN, CAPA

Professional Development

Susan Belton, MSN, RN, CNL

Cody Hedglin, MSN, RN, CWON

Tedi Hughes, MSN, RN, PMHCNS-BC

Philip Malleon, MSN, RN, NP-BC

Kathryn McCarragher, MHA, BSN, RN, CPAN, ONC

Patricia Rabbett, MSN, RN, CCRN-K

Theresa Roche, MSN, RN-BC

Beth Waters, MSN, RN, CPEN

Advanced Practice Registered Nurses

Addiction Recovery and Inpatient Counseling

Madeline Spinosa, MSN, RN, ANP-BC, CNS

Elizabeth Walsh, MSN, RN, FNP-BC, ARP

Anesthesiology

Beth Brown, MSN, RN, CRNA

Ashley Broyles, MSN, RN, CRNA

Arthur Dayton, MSN, RN, CRNA

Stephanie Diaz, MSN, RN, CRNA

Raya Goldenberg, MSN, RN, CRNA

Diane Hake, MSN, RN, CRNA

Kimberly Kleinsorge, MSN, RN, CRNA

Krista Klopfenstein, MSN, RN, CRNA

Letitia Mazzaferro, MSN, RN, CRNA

Elizabeth McCann, MS, RN, CRNA

Michael McSweeney, MS, RN, CRNA

Jessica Morrissey, MS, RN, CRNA

Elizabeth O'Brien Varnum, MSN, RN, CRNA

Melanie Omojola, MSN, RN, CRNA

Landree Parrott, MSN, RN, CRNA

Sarah Toczykowski, MS, RN, CRNA

Julia Young, MSN, RN, CRNA

Center for Pre-Operative Evaluation

Elaine Charbonnier, MSN, RN, ANP-BC

Deborah Georgenes, MSN, RN, NP-C

Nickisha Hurlock, MS, RN, NP-C

Karen Lamping, MSN, RN, NP-C

Sharon Levine, MSN, RN, FNP-C

Tracy Marino, MSN, RN, NP-C

Kristen McKenzie, MSN, RN, FNP-C

Samantha Morrison-Ma, MSN, RN, NP-C, WHNP-BC

Anna Peterson, MSN, RN, ANP-BC

Bindu Thomas, MS, RN, FNP-BC

Medicine

Vonette Anglin, MSN, RN, ANP-BC

Jessica Ashman, MSN, RN, NP-C

Johanna Baldassari, MSN, RN, FNP-BC

Sharran Burney, MSN, RN, FNP-BC

Heidi Duran, MSN, RN, NP-C

Janice Galinsky, MSN, RN, ACNP-BC

Andrea Guarente, MSN, RN, MEDSURG-BC, FNP-BC

Jess Lara, MS, RN, FNP-BC

Rebecca Mogensen, MSN, RN, ACNP-BC

Alla Sherer, MSN, RN, NP-C

Julie Vosit-Steller, DNP, RN, FNP-BC, CHPN, AOCN

Occupational Health

Dinah McDonald, MSN, RN, ANP-BC, COHN-S/CM

Suzanne Young, MSN, RN, FNP-BC

Orthopaedic Spine Surgery

Lindsay Bandazian, MSN, RN, ANP-BC

Samantha Erikson, MSN, RN, NP-C

Katherine Kane, MSN, RN, ONP-C, ANP-BC

Katherine Killinger, MSN, RN, NP-C

Jillian Martin, MSN, RN, NP-C

Laurie Rieger, MSN, RN, AGPCNP-BC

*New certification in 2021

Congratulations to our newest certified nurses!

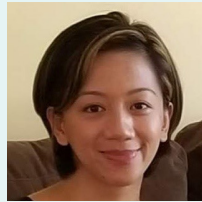
Despite the day-to-day challenges of ongoing COVID-19 pandemic, nurses at Brigham and Women's Faulkner Hospital are committed to advancing their practice. This year, 12 of our colleagues earned a new certification. Here are some of their stories.



"Becoming certified in Pain Management validated my knowledge of Pain Management and has allowed me to do the evidence-based work we do daily with pride and confidence.

After 46 years (21 of those years in Pain Management), getting certified was my last professional goal before retirement."

– Kathleen Armando, BSN, RN, PMGT-BC (retired, 2021)



"I took the exam for personal and professional growth. There's no way we know everything about nursing and the exam proves that, so then it pushes us to have

the appetite for more knowledge and skills – for quality nursing care especially."

– Sia Carias, BSN, RN, CMSRN



"I had heard that the certification exam would be challenging, but I was committed to reach my goal.

In obtaining this goal for myself, I feel I am delivering the safest and best quality care to all of our patients."

– Carolyn Geoghegan, RN, CAPA



"At first, I was nervous about the commitment. But my co-workers were so supportive that it made the process a little easier. While studying, I realized the enormity of the

field I practice in and decided I needed more time to study. In all I probably spent 60 hours studying. When the day of the exam came, I felt prepared and I passed! The feeling of pride that I felt made the whole process worth it!"

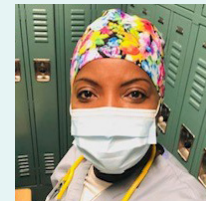
– Amie Kandalaf, RN, PMGT-BC



"When I took the CPAN/CAPA review course, I knew I wanted to take the CPAN certification exam. The review course itself is a great way to tie in

everything we learn through orientation and at the bedside and studying for the exam helped everything make more sense."

– Evelyn Kelleher, BSN, RN, CPAN



"Medicine is evolving and changing at a fast rate. It is now vital to stay current with the latest evidence-based practice in order to provide the best care to our

patients. Being certified helps me provide current education to my patients and their families."

– Sania O'Leary, BSN, RN, CAPA



"When I returned to PACU after my deployment to the ICU during the COVID-19 surge, and got myself oriented to my new role as the orthopedic service line Clinical

Leader, I decided that after 17 years as a PACU nurse it was time to get certified. Becoming CPAN certified was truly one of my biggest achievements during this very challenging year."

– Charlene Salvi, BSN, RN, CPAN



"Throughout the studying process, I learned so much that was applicable in my daily shifts. I felt myself becoming a stronger nurse while studying for the CEN; having a more in-

depth grasp and understanding on critical patient care. I feel like studying for and obtaining my CEN was a great next step in my career. I love emergency medicine and wanted to push myself towards excellence in the specialty."

– Alison Carr, BSN, RN, CEN



"Pursuing certification in my specialty area allows me to provide my patients with evidence-based information pertaining to their chronic pain."

– Gail Vaughn, BSN, RN, PMGT-BC

Commitment to education

In 2010, the Institute of Medicine (IOM) recommended that the nursing profession increase the number of nurses with bachelor's degrees in nursing (BSN) to 80 percent by the year 2020 and that nurse leaders pursue advanced degrees in nursing. As of December 2021, over 93% percent of registered nurses at Brigham and Women's Faulkner Hospital hold a BSN or higher. Even though Brigham and Women's Faulkner Hospital exceeds the 2020 IOM goal, nurses in all patient care areas and within the leadership team continue to pursue additional education.

Congratulations to the following Brigham and Women's Faulkner Hospital nurses who committed to advancing their education and graduated in 2021!

Erica Babine, **MSN**, RN,
St. Joseph's College-Maine, March 2021

Robin Powell, **MSN**, RN, CEN,
Emmanuel College, May 2021

Lusy Gonzalez, **MSN**, RN, MEDSURG-BC,
Emmanuel College, May 2021

Lauren Lavallee, **MSN**, RN,
Sacred Heart University, May 2021

Ann-Marie Bermingham, **MSN**, RN,
Emmanuel College, May 2021

Helen Driscoll, **MSN**, RN, CGRN,
Emmanuel College, May 2021

Miracia Charles, **MSN**, RN,
Curry College, May 2021

Faydene Small-Jones, **DNP**, MHA, MSN, RN,
Regis College, May 2021

Lindsay Farina, **MSN**, RN, NP-C,
Northeastern University, May 2021

Mary Catherine West, **MSN**, RN,
Western Governor's University, July 2021

Rose LaPlante, **MBA**, MSN, RN,
Fitchburg State University, August 2021

Allison Bernard, **PhD**, DNP, RN,
Capella University, September 2021

Ellen McCarthy, **DNP**, MSN, RN, CCRN,
Regis College, December 2021

Mary DeSeignora, **MSN**, RN,
Southern New Hampshire University, December 2021

Are you thinking about going back to school or becoming certified?

Brigham and Women's Faulkner Hospital offers employees assistance through the tuition reimbursement program. Through the program, full-time employees are eligible to receive up to \$2,500 per calendar year to pay for academic courses taken for credit at an accredited educational institution.

Registered nurses may also receive up to \$400 for certification-related expenses. These benefits are pro-rated for part-time employees who work 16 hours or more.

For more information, call Human Resources at 617-983-7901.

Inspiration from our lifelong learners

The drive to continue your education is motivated by different factors depending on the individual. Here at Brigham and Women's Faulkner Hospital, our newest graduates prove just that. Here are some of their stories.



"I was born in Trinidad and Tobago and studied nursing in Scotland. When I moved to the United States, I saw a lack of diversity in the nursing workforce. I discovered that a major contributor to the lack of diversity is the Health-Related Quality of Life (HRQOL) of minority nurses who were pursuing undergraduate and graduate degrees in nursing. Hence, my research is titled 'Predicting Relationships Between HRQOL Conditions and Academic Outcomes for Minority Nursing Students.' My research is applicable to both academic and clinical settings. I hope that my achievements and journey related to this work inspire others to do the same."

– Allison Bernard, PhD, DNP, RN



"I decided to go back to school because I realized that I loved teaching and orienting new nurses and being regarded as a resource on my floor. It's a great feeling for others to look to you for guidance and to be considered as helpful. I felt like I genuinely contributed to their knowledge. So I enrolled to obtain my Masters in Nursing Education in order to enhance my skills as a future educator and learn more about how I can foster the education of students and current/new nurses."

– Lusy Gonzalez, MSN, RN, MEDSURG-BC



"Immigrating from a third world country (Barbados) to a first world country (USA) showed the difference and the great divide in economics, healthcare and culture. The common denominator that made us all identical was that the health of individuals was similar. The diseases and diagnoses could be found in both countries and people were dying, as death did not choose according to economic wealth. Families were restricted in visiting their loved ones according to location (Intensive Care Unit) and the severity of the diagnosis. My research was titled 'The beliefs and attitudes of nurses towards open visitation while restricting family members in an intensive care unit during COVID-19.' Even though this research was done in the ICU, it is applicable to any unit in the hospital setting and at any time, not just during a pandemic."

– Faydene Small-Jones, DNP, MHA, MSN, RN

Newly Licensed Nurse Residency Program expands to the perioperative areas

At Brigham and Women's Faulkner Hospital, traditionally, the newly licensed nurse residency program has been geared toward nurses on the medical/surgical units, but in 2021 the program expanded to include the perioperative areas.

"Historically, our critical care areas have not taken newly licensed nurses. That's because newly licensed nurses need to work on time management and prioritization and develop their critical thinking skills before they can move to a critical care area," explains Kathy McCarraher, MHA, BSN, RN, CPAN, ONC, Professional Development Manager for 7 South, the Weiner Center for Preoperative Evaluation, the PACU and Pre-Op Holding. "Now, along with the newly licensed nurse residency program, there are additional resources that include the American Society of PeriAnesthesia Nurses Competency Based Orientation Program, the Boston ICU Consortium Program, didactic classes with the PDM and shadow experiences with a CRNA in the OR and in the ICU that help give a newly licensed nurse a structured orientation to critical care."

The timing was just right for Jillian Sweeney, BSN, RN. While still in nursing school, Sweeney became a PCA in the PACU at Brigham and Women's Faulkner Hospital. She earned a reputation as hard working, engaged and motivated, making her an easy choice for the first newly licensed nurse in the perioperative areas. Upon finishing nursing school, she started her orientation in Pre-Op Holding first. "When they offered me the option to stay on as a newly licensed nurse, I couldn't say yes fast enough," says Sweeney.

Her preceptors in Pre-Op Holding were staff nurse Phyllis Garr, BSN, RN, and charge nurse Carolyn Geoghegan, RN. Regularly scheduled meetings were planned between them and McCarraher to review the previous week and set goals for the upcoming week. "During my first ten weeks in Pre-Op Holding, Phyllis taught me everything I know about IVs and time management. She has been so supportive. I can ask her anything," says Sweeney.

For Garr, the experience has been mutually beneficial. "As a seasoned nurse, I was able to teach her the

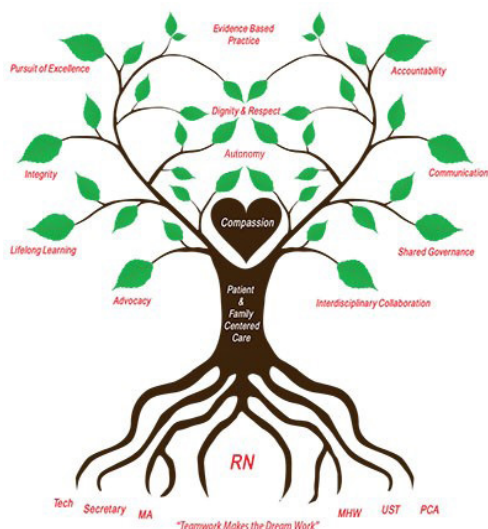


Phyllis Garr, BSN, RN, and Jillian Sweeney, BSN, RN, wear matching outfits in Pre-Op Holding

history and the why's behind the patient, the how's regarding learning many skill sets to care for our patients as whole. Teaching and mentoring Jillian as she perfects her clinical skills is an ongoing process that takes the expertise of all my colleagues because there are many ways to complete a skill," says Garr. "As it turned out, Jillian became a reverse mentor to me! She was able to show me different way to access technology. We really became a team of two—we even bonded by wearing coordinating outfits."

After ten weeks in Pre-Op Holding, Sweeney moved to the PACU. She and her PACU preceptors Barbara O'Coin, BSN, RN, and June Nichols, BSN, RN, developed a similar relationship to the one she had with Garr and she impressed the surgeons with whom she works. Urological surgeon Yefri Baez, MD, says, "She has done an absolutely wonderful job taking care of our post-operative urology patients. She is very thorough, efficient and knowledgeable despite being a new graduate."

For her part, McCarraher has been pleased to watch Sweeney succeed. "As a nurse educator, there is nothing more fulfilling than watching staff learn and grow in their careers. It's been a pleasure to watch Jillian blossom and come into her own as a nurse," she says.



Professional Practice Model

Professional Practice Models provide the framework for nursing practice and identify the essential elements that support nursing practice within an individual organization. Professional Practice Models are usually represented by a visual image that is meaningful and easily understood by current and future nurses. At Brigham and Women’s Faulkner Hospital, our Professional Practice Model guides exemplary professional practice for all nurses across the hospital and is exemplified in the stories shared in the annual report each year.

At Brigham and Women’s Faulkner Hospital, we believe high-quality patient care is only possible through teamwork. It’s both nurses and support staff working together efficiently that makes it all work. Like the majestic trees in the neighboring Arnold Arboretum, our nurses flourish with the strength gained from their support system. The registered nurses, technicians, secretaries, medical assistants, mental health workers, unit service technicians and patient care assistants all come together to form the root system that allows our nurses to do their jobs properly. With this support, they are able to focus on patient- and family-centered care delivered with compassion, dignity and respect. Our nurses collaborate with a strong interdisciplinary team to support patients and families and incorporate principles of evidence-based practice, accountability, communication, Shared Governance, advocacy, lifelong learning, integrity and pursuit of excellence into the practice of nursing.

Nursing Peer Review

Accountability in the pursuit of excellence



Since 2015, all registered nurses at Brigham and Women’s Faulkner Hospital have been participating in a formal, annual peer review process. In 2021, all nurses were assigned the web-based peer review educational module. The AACN’s Healthy Work Environment (HWE) continues to be included as an integral component of the peer review process. Peer facilitators continue to be key to the success of the peer review process by leading education, facilitating peer review sessions, and providing support to nurses on their individual units.

Thank you to our 2021 Peer Review Facilitators for making the process such a success!

6 North: *Ninon Bastien, BSN, RN, *Katherine Jimenez, BSN, RN

6 South: Elizabeth Rudie, BSN, RN, *Lusy Gonzalez, MSN, MEDSURG-BC, Kaitlyn Cowden, BSN, RN

7 North: Julie Kabukanyi, MA, BSN, RN, Kelly Coleman, BSN, RN, Katty Halloran, BSN, RN-BC, *Kaitlyn McCarthy, BSN, RN

7 South: Michelle Carignan, BA, RN

Emergency Department (ED): Kathy Nunan, BSN, RN, *Sara Lampeter, BSN, RN, *Doug Bouvier, BSN, RN

Intensive Care Unit (ICU): Kate Santiago, BSN, RN, Adena Matusow, BSN, RN, Meaghan McCarthy, MSN, RN, CCRN

Outpatient Infusion Center (OPIC): *Claire Hamrock, BSN, RN

Gregory Endoscopy Centre (GI): Kathy Glennon, RN, Helen Driscoll, MSN, RN, CGRN

Interventional Radiology/Interventional Nephrology (IR/IN): Bobbi King, BSN, RN

IV Team: *Jestin Jose, BSN, RN, VA-BC

Pain Management Center (PMC): Yvonne Brown, BSN, RN

Weiner Center for Preoperative Evaluation (CPE): Shirley Mahoney, BSN, RN

Pre-op Holding (POH): Dan Rec, BSN, RN, CAPA

Post-Anesthesia Care Unit (PACU): Kathy Leone, MBA, BSN, RN, Patricia Dowling, BSN, RN, *Ann-Marie Bermingham, MSN, RN

Operating Room (OR): *Catherine O’Leary, BSN, RN, *Valerie Orenberg BSN, RN, CNOR, *Maura Lauenstein, RN, CNOR, *Cora McHugh, BSN, RN, CNOR, *Matthew Wilson, BSN, RN, *Jennifer Jaszek, BSN, RN

Case Management: Kathy Lang, BSN, RN, CCM

Nursing Supervisors: Aliesha Wisdom, MSN, RN

*New facilitator in 2021

Shared Governance Committees

Nurses at Brigham and Women's Faulkner Hospital play an essential role in the delivery of high-quality, evidenced-based, cost-effective care to patients. Shared Governance is a model that provides a framework for building effective relationships between nursing and interdisciplinary colleagues to ensure the delivery of excellent patient care. In 2021, the foundation and strengths of our shared governance structure are evident in the committee accomplishments you will read about on the following pages.

Nursing Practice

The mission of the Nursing Practice Committee is to develop and evaluate standards of practice that support the delivery of patient- and family-centered nursing care at Brigham and Women's Faulkner Hospital based on current research, quality outcomes and evidence-based practices; and to support professional practice through the dissemination of best practice and the implementation of changes, as necessary, to nursing practice at Brigham and Women's Faulkner Hospital.



2021 Accomplishments

In 2021, the Nursing Practice Committee collaborated with multiple interdisciplinary teams to promote safe practices and improve patient care. We supported policies regarding wound care, pressure injury prevention, urinary catheter devices, Joint

Commission compliance, post-overdose care, room environment safety for suicidal patients, medication administration safety and COVID-19-related practice changes.

Members

Chair: Jill Grant, BSN, RN, CEN
Executive Sponsor: Colleen West, DNP, MBA, RN, CPHQ
Yvonne Brown, BSN, RN
Anna Costello, BSN, RN
Kristin Feeley, BSN, RN
Suzanne Francis, MSN, RN, CNOR
Amanda Ganzel, BSN, RN
Phyllis Garr, BSN, RN
Juliet Gleason, MBA, MSN, RN
Rose LaPlante, MBA, MSN, RN
Katie Lyons, BSN, RN
Ellen McCarthy, DNP, MSN, RN, CCRN
Phil Malleson, MSN, RN, NPD-BC
June Nichols, BSN, RN
Monica Pina, BSN, RN
Jacqui Slattery, BSN, RN, MEDSURG-BC
Ann Schifone, BSN, RN
Fay Small-Jones, DNP, MHA, MSN, RN
Lindsay Turransky, BSN, RN
Aliesha Wisdom, MSN, RN

Nursing Quality

The Nursing Quality Committee identifies, reviews and analyzes data regarding nurse sensitive indicators, hospital-wide safety issues and Department of Nursing strategic goals. The Nursing Quality Committee is responsible for disseminating data on a unit level as well as supporting action plans for quality improvement measures. Members serve as a resource on quality initiatives to the greater Brigham and Women's Faulkner Hospital nursing community.

2021 Accomplishments

In 2021, the Nursing Quality Committee continued to review and disseminate nurse sensitive indicator data through monthly updates to the unit nursing quality boards. To provide more frequent data updates, the committee revised the format of monthly data to include monthly falls with injury and inpatient pressure injury data graphs. The committee also reviewed and distributed monthly unit-level hand hygiene data. The committee reinvigorated the use

of the Fall TIPs process through a monthly auditing of the process to assess for trends and bring awareness to this component of fall prevention.

Members

Chair: Amanda Davenport, BSN, RN
Executive Sponsor: Rose LaPlante, MBA, MSN, RN
Maureen Holleran, MSN, RN
Anna Costello, BSN, RN
Maura Lauenstein, RN, CNOR
Ginny Ryan, MSN, RN
Kathy Glennon, RN
Larry Borbee, MM, BSN, RN
Kirsten Oteri, BSN, RN
Christine Sgroi, BSN, RN
Jeanne Hutchins, BSN, RN
Beth Waters, MSN, RN, CEN, CPEN
Trish Martin, MPH
Brittany Herrick, BSN, RN
Shashalee Reid

Professional Recognition and Advancement

The Professional Recognition and Advancement Committee promotes, values, nurtures and recognizes transformational leadership, structural empowerment, exemplary professional practice, new knowledge, innovation and research. The overarching goal is to achieve excellence in outcomes related to clinical nursing practice, patient- and family-centered care and organizational strategic goals.

2021 Accomplishments

In 2021, the Professional Recognition and Advancement Committee continued to review nominations and present the DAISY Awards and a DAISY Nurse Leader Award. Nurses holding certifications were celebrated on National Certified Nurses Day. The 2020 Annual Report was published and sent to all nurses' homes. The Professional Recognition and Advancement Committee also continued to support the Peer Review process.

Members

Chair: Ellen McCarthy, DNP, MSN, RN, CCRN
Executive Sponsor: Rose LaPlante, MBA, MSN, RN
Phyllis Garr, BSN, RN
Tracy Lane, MSN, RN-MEDSURG
Kathy McCarraher, MHA, BSN, RN, CPAN, ONC



Nursing Informatics

The Nursing Informatics Committee develops and evaluates standards of practice that support the documentation of patient- and family-centered nursing care at Brigham and Women's Faulkner Hospital based on current research, quality outcomes and evidence-based practices. The committee also supports the development of professional practice with the use of Digital Health eCare through dissemination of best practices, and changes in documentation standards whether regulatory or enterprise build to Brigham and Women's Faulkner Hospital nursing staff.

2021 Accomplishments

The Nursing Informatics Committee had a very busy year in 2021. We started 2021 supporting staff to move to Crisis Standards of documentation from December 2020 through March 2021 during the pandemic surge and then reverted to standard documentation in March. The committee continued to review monthly changes and two upgrades to support staff in the use of eCare. In the spring of 2021, we supported the roll-out of "Tap N Go"—a badge reader tool for clinical devices using Epic express mode. This simple tool increased staff efficiency and satisfaction. The committee has started the work to review possible changes in the EHR to decrease the burden of documentation, initially looking at possible note templates and evaluation of flowsheet content for duplication. This work will continue into 2022 and beyond.



Members

Co-Chair: Phi Le, MPH, BA
Executive Sponsor: Paula Wolski, MSN, RN-BC
Susan Belton, MSN, RN, CNL
Michelle Boudreau, BSN, RN
Alison Carr, BSN, RN, CEN
Helen Driscoll, MSN, RN, CGRN
Michelle Harnden, BSN, RN
Amie Kandalraft, RN, PMGT-BC
Sharon Magno, BS
Peter McCoy, BSBA
June Nichols, BSN, RN
Valerie Orenberg, BSN, RN, CNOR
Darren Scully, BSN, RN
Glades Vazquez, BSN, RN
Tim Wilder

Evidence-Based Practice/ Research Committee

The Evidence-Based Practice/Research Committee promotes evidence-based nursing practice and supports nursing research to improve patient and/or nursing practice outcomes at Brigham and Women's Faulkner Hospital. The committee provides support and mentorship for nurses involved in the development, implementation and evaluation of evidence-based practice projects or research studies. The committee maintains a database for all nursing projects and supports the dissemination of completed projects to conferences through abstract writing, poster development and preparation for oral presentations.

2021 Accomplishments

In 2021, the Evidence-Based Practice/Research Committee continued to promote evidence-based nursing practice and research by mentoring and supporting nurses across the organization. The project review process was streamlined to promote earlier initiation of projects at the local level. Ongoing education about evidence-based practice was provided at numerous nursing forums. Support was also provided for the dissemination of completed projects through abstract writing, poster development and preparation for oral presentations.

Members

Executive Sponsor: Helene Bowen Brady, DNP, MEd, RN, NPD-BC, NEA-BC

Executive Sponsor: Kathy McCarraher, MHA, BSN, RN, CPAN, ONC

Kathleen Ahern Gould, PhD, RN

Meigan Young Amaral, MSN, RN

Jackie Dejean, BSN, RN

Valerie Gritsevskaya, BSN, RN, CNOR

Joanne Hallahan, BSN, RN

Rose LaPlante, MBA, MSN, RN

Kelly Mastroianni, BSN, RN

Ellen McCarthy, MSN, RN, CCRN

Erica Babine, MSN, RN

Sarah Sargalski, MSN, RN, CEN

Shared Governance Coordinating Council



Once a month, the chair(s) and sponsors of the five Shared Governance Committees meet with Chief Nursing Officer and Vice President of Patient Care Services Cori Loescher, MM, BSN, RN, NEA-BC. Each chair highlights a review of topics discussed during their meeting and addresses any potential concerns. The objective of the Shared Governance Coordinating Council is to align goals and outcomes for the Department of Nursing. Updates from the Shared Governance Coordinating Council are shared with the Nurse Executive Board and Nursing Leadership.

Members

Mary Anne Barry, MBA, BSN, RN

Susan Belton, MSN, BS, RN, CNL

Amanda Davenport, BSN, RN

Jill Grant, BSN, RN, CEN

Rose LaPlante, MBA, MSN, RN

Cori Loescher, MM, BSN, RN, NEA-BC

Kathy McCarraher, MHA, BSN, RN, CPAN, ONC

Ellen McCarthy, DNP, MSN, RN, CCRN

Colleen West, DNP, MBA, RN, CPHQ

Paula Wolski, MSN, RN-BC

Quality Data

As nurses at Brigham and Women's Faulkner Hospital, we strive for a culture of exemplary professional practice involving quality and safety monitoring to ensure the highest delivery standards. Nurses throughout the hospital collaborate with multiple disciplines to make sure that care is efficient, effective, comprehensive and well-coordinated. As a profession dedicated to assessing others, it is important to benchmark our quality by collecting and analyzing data from like-sized hospitals and units throughout the country.

Brigham and Women's Faulkner Hospital is a member of the National Database of Nursing Quality Indicators (NDNQI), which is part of the American Nurses Association's National Center for Nursing Quality. NDNQI's mission is to aid the nurse in patient safety and quality improvement efforts by providing research based, national, comparative data on nursing care and the relationship of this care to patient outcomes. This is done by looking directly at Nursing Sensitive Indicators (NSIs). In previous years we have focused on NSIs related to clinical outcomes (CAUTI, CLABSI, falls with injury and HAPI). For the 2021 Annual Report, we are focusing on falls with injury in both the inpatient and outpatient setting. These two NSIs are continuously monitored for Magnet redesignation. We have displayed data from NDNQI showing the hospital-level rate of falls with injury in the inpatient and ambulatory areas, as well as a graphic showcasing unit-level performance in these areas to highlight our progress.

Falls with injury

Currently the process at Brigham and Women's Faulkner Hospital is to use Fall TIPS on the inpatient units to assess patient fall risk and provide a guide for patients who are at risk for falls and how to best take care of these patients. Falls TIPS came from a study by Patricia Dykes, PhD, MA, RN, that reviewed the impact of a Fall-Prevention Tool Kit to reduce falls and injuries. In her most recent study, Dykes et al. found that there was a 15 percent decrease in patient falls and a 34 percent decrease in falls with injuries when the Falls TIPS tool kit was initiated (2020).

Brigham and Women's Faulkner Hospital is utilizing many different initiatives to reduce falls and falls with injury including work within the Falls Committee, weekly Tuesday rounds with leadership to discuss three patients on the inpatient units who have either fallen or are at risk for falls, auditing of the intentional rounding process using REDCap, auditing of the Fall TIPS process with the goal of improving engagement and involving the patient in this process and unit-level improvement work in unit-based councils.

Dykes, P., Burns, Z., Adelman, J., Benneyan, J., Bogaisky, M., Carter, E., Ergai, A., Lindros, M., Lipsitz, S., Scanlan, M., Shaykevich, S., & Bates, D. (2020). Evaluation of a Patient-Centered Fall-Prevention Tool Kit to Reduce Falls and Injuries: A Nonrandomized Controlled Trial. *JAMA Network Open*. 3(11). doi:10.1001/jamanetworkopen.2020.25889

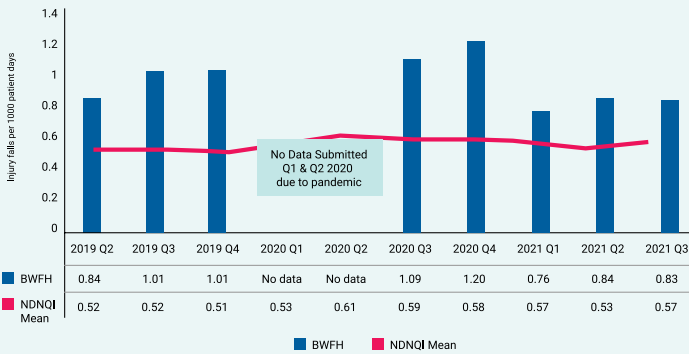
The data is displayed showing falls with injury at the hospital-level for both inpatient (see *Graph A*) and ambulatory (see *Graph B*). Below each graph is a table showing performance on individual units that we report on to NDNQI. For the unit-level data, red indicates the unit under performed the NDNQI benchmark of similar hospitals (bed-size 100-199) compared to Brigham and Women's Faulkner Hospital performance.

Green means the hospital outperformed the benchmark of similar hospitals. NDNQI provides a benchmark of like hospitals to allow us to compare our performance to similar hospitals and similar units and see how we are doing compared to other hospitals. It is also used for our Magnet redesignation work.

Inpatient

Graph A

Brigham and Women's Faulkner Hospital
Injury falls per 1,000 patient days
Compared by: Bed size (100-199)



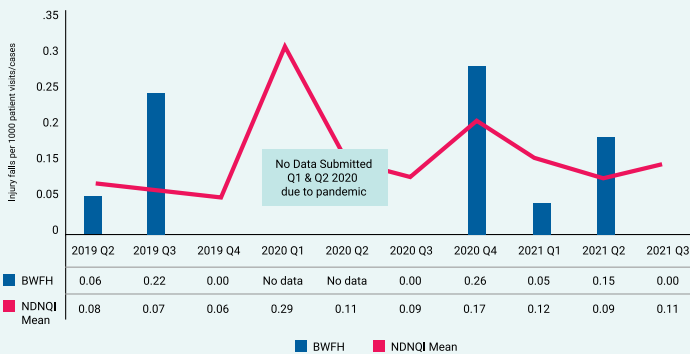
Inpatient units:
Injury falls per 1000 patient days

	Q4 2019	Q1 2020	Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021	Q3 2021
2 South	Green	Grey	Grey	Green	Red	Red	Green	Red
ICU	Green	Grey	Grey	Green	Green	Green	Green	Green
6 North	Red	Grey	Grey	Red	Red	Red	Red	Green
6 South	Red	Grey	Grey	Red	Red	Green	Red	Red
7 North	Red	Grey	Grey	Green	Red	Red	Red	Red
7 South	Red	Grey	Grey	Green	Green	Green	Green	Green

Ambulatory

Graph B

Brigham and Women's Faulkner Hospital
Injury falls per 1,000 patient visits/cases
Compared by: Bed size (100-199)



Ambulatory units:
Injury falls per 1000 patient visits/cases

	Q4 2019	Q1 2020	Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021	Q3 2021
IR/IN	Green	Grey	Grey	Green	Green	Green	Red	Green
Endo	Green	Grey	Grey	Green	Green	Green	Green	Green
PMC	Green	Grey	Grey	Green	Green	Green	Green	Green
OPIC	Green	Grey	Grey	Green	Green	Green	Green	Green
CPE	Green	Grey	Grey	Green	Green	Green	Green	Green
Cardiac Rehab	Green	Grey	Grey	Green	Green	Green	Green	Green
POH	Grey	Grey	Grey	Green	Green	Green	Green	Green
PACU	Green	Grey	Grey	Green	Green	Green	Green	Green
ED	Green	Grey	Grey	Green	Red	Red	Red	Green

Suspect sepsis? Remember to CALL-IT

According to the Centers for Disease Control and Prevention, one in three patients who die in the hospital has sepsis, which is a medical emergency caused by the body's extreme response to an infection. Sepsis occurs when an infection, such as pneumonia, causes an overwhelming response by the immune system resulting in organ dysfunction.

The most common symptoms of sepsis are low blood pressure, elevated respiratory rate, altered mental status, shock index greater than 1 (in which the HR is $>$ SBP), decreased urine output, elevated creatinine, elevated bilirubin and decreased platelet count. Patients who look acutely ill, have a possible infection, have risk factors such as being older than 65 and have other comorbidities most likely have sepsis.

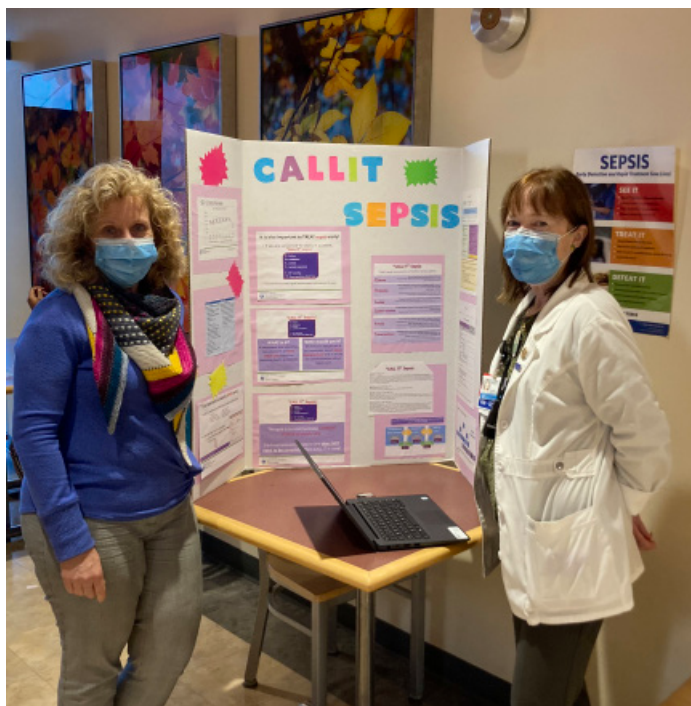
"At Brigham and Women's Faulkner Hospital we want everyone to CALL-IT if your patient meets the criteria—it could save their life!" says Beth Waters, MSN, RN, CPEN, Nursing Professional Development Manager for the Emergency Department, Nursing Supervisors and PCA Float Pool.

Brigham and Women's Faulkner Hospital's Sepsis Workgroup reminds staff to **CALL-IT**:

- C** CULTURES (blood cultures before antibiotics)
- A** ANTIBIOTICS (broad spectrum abx after 2 sets of blood cx- start within 1 hour)
- L** LACTATE
- L** LACTATE REPEATED (within 6 hours of initial lactate result $>$ 2)
- I** IV FLUIDS (aim for 30mL/kg for relative hypotension or lactate $>$ 4)
- T** TISSUE PERFUSION (manage ongoing hypotension/initiate vasopressors)

If you are interested in sepsis care and/or have ideas on how to improve sepsis performance in your unit, Brigham and Women's Faulkner Hospital's Sepsis Workgroup welcomes you to join the group!

Additionally, if you have questions about CALL-IT or our sepsis quality measures, please reach out to Katy O'Loughlin at kcoloughlin@bwh.harvard.edu.



Beth Waters, MSN, RN, CPEN, Nursing Professional Development Manager for the Emergency Department, Nursing Supervisors and PCA Float Pool, and Patricia Rabbett, MSN, RN, CCRN-K, Nursing Professional Development Manager for Interventional Radiology/ Interventional Nephrology, ICU and Dialysis host an information table outside the cafeteria on "CALL-IT"

Publications and presentations

Publications

The following articles published in 2021 include a Brigham and Women's Faulkner Hospital nurse as an author (Brigham and Women's Faulkner Hospital names are bolded).

Dykes, P.C., Khasnabish, S., Adkison, L. Bates, D., Bogaisky, M. Burns, Z., Carrol, D., Carter, E., Hurley, A., Jackson, E., Kurian, S., Lindros, E., **Ryan, V.**, Scanlan, M. Spivack, L., Walsh, M., Adelman, J. (2021). Use of a perceived efficacy tool to evaluate the FallTIPS program. *Journal of the American Geriatrics Society*, 10.1111/jgs.17436. Advance online publication. <https://doi.org/10.1111/jgs.17436>

Dykes, P. C., Khasnabish, S., Burns, Z., Adkison, L. E., Alfieri, L., Bogaisky, M., Carroll, D. L., Carter, E. J., Hurley, A. C., Jackson, E., Kurian, S., Lindros, M. E., **Ryan, V.**, Scanlan, M., Sessler, K., Shelley, A., Spivack, L. B., Walsh, M. A., Bates, D. W., & Adelman, J. S. (2021, January 21). Development and validation of a fall prevention efficiency scale. *Journal of Patient Safety*. 10.1097/PTS.0000000000000811. Advance online publication. <https://doi.org/10.1097/PTS.0000000000000811>

Hayes, C., Wood, L., Gaden, N., Gennaro, S., Gross, A., Hudson-Jinks, T., **Loescher, C.**, Maurer, M., Mittelman, M., Pearson, M., Sharp-McHenry, L., Thompson, L., & Vann Pelt, M. (2021). The dual epidemics of 2020: Nursing leaders' reflections in the context of whole person/whole systems. *Nursing Administration Quarterly*, 45(3), 243-253. <https://doi.org/10.1097/NAQ.0000000000000475>



Senior Director of Surgical and Procedural Services Jeffrey Blackwell, MHA, FACHE, Associate Chief Nurse of Perianesthesia/Procedural and Ambulatory Services Robin Kaufman, DNP, APRN, FNP-C, NEA-BC, and Chief of Anesthesiology David Shaff, MD, at the OR Manager Conference in Chicago.

Poster and podium presentations

The following abstracts by Brigham and Women's Faulkner Hospital authors were accepted for presentation in 2021.

Links to view each of these presentations can be found at www.bwfh.org/posters.

Administering Ketamine Infusions for Depression: Embracing Change in the Post Anesthesia Care Unit.

Jill Benoit, BSN, RN; Mary Deseignora, BSN, RN; Robin Egan, BSN, RN. 2021 ASPAN American Society of PeriAnesthesia Nurses National Conference: A Virtual Experience, April 25 – 29, 2021.

Determining Newly Licensed Nurses' Satisfaction with a Clinical Advancement Program.

Ellen McCarthy, DNP, MSN, RN, CCRN. Regis College DNP Poster Day, April 10, 2021.

Diffusion of Successful Same Day Discharge Practice for Total Joint Arthroplasty Patients to a Select Population of Mastectomy Patients.

June Nichols, BSN, RN; Charlene Salvi, BSN, RN. 2021 ASPAN American Society of PeriAnesthesia Nurses National Conference: A Virtual Experience, April 25 – 29, 2021.

50 Ways to Leave from Phase II: A Team Approach to Same Day Discharge.

David Shaff, MD; Robin Kaufman, DNP, APRN, FNP-C, NEA-BC; Jeffrey Blackwell, MHA, FACHE. Chicago, IL: OR Manager Conference, October 2021.

Supporting Retention and Succession Planning with Leadership Sabbaticals.

Robin Kaufman, DNP, APRN, FNP-C, NEA-BC OR Manager Conference, Chicago, IL: OR Manager Conference, October 2021.

What are the Beliefs and Attitudes of Nurses Towards Visitation while Restricting Family Members in an Intensive Care Unit during COVID-19.

Faydene Small-Jones, DNP, MHA, MSN, RN. Regis College DNP Poster Day. April 10, 2021.

What are the Beliefs and Attitudes of Nurses Towards Visitation while Restricting Family Members in an Intensive Care Unit during COVID-19.

Faydene Small-Jones, DNP, MHA, MSN, RN. Nurse's Week Presentation at St. Elizabeth's Medical Center Intensive Care Unit. May 10, 2021.

Periop 101 Program helps registered nurses transition to the operating room

At Brigham and Women's Faulkner Hospital, Operating Room nurses are highly skilled and committed to advocating for their patients. This year, several registered nurses took advantage of a new program to learn the ins and outs of the Operating Room. The Department of Nursing offered comprehensive on-the-job training through the Association of Peri Operative Registered Nurses' Periop 101 core curriculum. Among the first to register for the program was Kristyn Shields, RN.

Shields worked in the ICU and Gregory Endoscopy Centre prior to enrolling in Periop 101. "The ICU was always my passion, but the schedule—which includes nights, days, weekends and holidays—had gotten to be too much," she says. "OR nursing is so different from any other type of nursing because your patient is asleep, but I was lucky to be paired with two preceptors with whom I really clicked. So, while everything was all new to me, I was able to navigate the program and I am really glad I did!"



Kristyn Shields, RN

Increased access to palliative care consult service gives patients, families and staff much needed support in the ICU

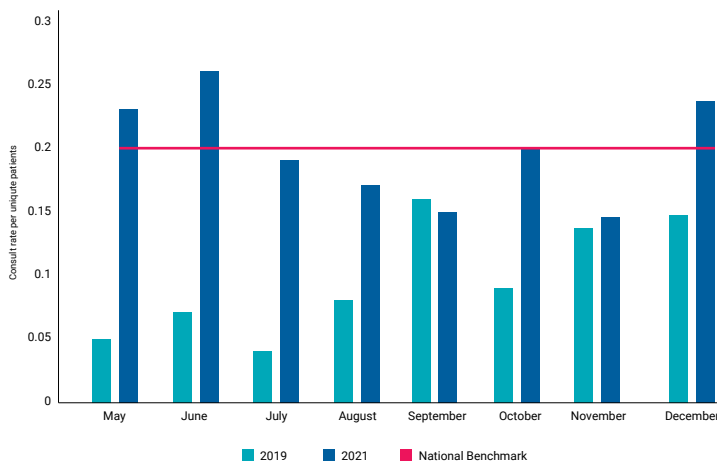
Patients admitted to the ICU have serious illnesses with complex medical needs. Patients and families need support with decision making and care options. Evidence supports involving the palliative care team within 48 hours of admission to the ICU to decrease overall length of ICU and hospital stay, reduce ICU mortality rates and health care costs and improve the quality of life for patients (Ma et al., 2019). In 2019, the ICU Unit Based Council started a project to improve the rate of Palliative Care Consults (PCC) for patients in the ICU, which in turn brings much needed resources to the patients, their families and the staff in the ICU.

"We noticed a lot of our patients and their families could benefit from palliative care services, not always in terms of end-of-life or code status discussion, but often times for chronic illness, multiple re-admissions or to help talk through options," explains ICU nurse Meigan Young, MSN, RN. "Often times, we think we can keep someone alive, or do invasive interventions, but patients and families don't always know they have the option to focus on comfort and quality of life. Many of our patients don't fully understand that they may never fully recover or return to what they consider a good quality of life. The palliative care team can form a relationship with the patient and their family and help them explore these discussions over time."

In reviewing ICU practice, the Unit Based Council found there was a lack of standardized criteria to identify patients in need of a palliative care consult resulting in unnecessary delays of appropriate referrals to the palliative care team. When PCCs were initiated, it was often very late in the patient's stay in the ICU preventing initiation of palliative care services in a timely manner. Since PCCs must be initiated by a provider at Brigham and Women's Faulkner Hospital, critical care nurses wanted to identify a creative strategy to address this gap. The Unit Based Council completed a literature search and invited John Halporn, MD, to discuss their idea. Nurses collaborated with the palliative care team and selected the Palliative Performance Scale (PPS) to objectively identify ICU patients in need of palliative care services. The Palliative Performance Scale (PPS) is a validated tool to screen patients for consults. The PPS was already built in Epic and the Unit Based Council educated the nursing staff on how to use the scale. The ICU providers were also educated on the process.

Using the process, patients are screened at the time of admission and if there is a change in the patient's status. Patients who score ≤ 40 percent on the PPS are deemed eligible for a PCC. The patient's nurse is responsible for discussing the PPS score with the team during interdisciplinary rounds which occur at

Palliative care consult rate per unique ICU patients



Members of the ICU Unit Based Council

least twice a day. After this discussion, providers are encouraged to enter the PCC.

ICU nurse Meaghan McCarthy, MSN, RN, CCRN, says, "With the PPS tool, we have seen nurses advocating for palliative care services and providers placing those orders sooner than they were placed in the past. Moving forward, an alert will pop up in Epic to let providers know that a PCC is warranted, further encouraging faster access to this important service."

Since implementing the PPS tool, the ICU has seen an increase in PCCs, as well as earlier initiation of consults. The rate of PCCs per unique ICU patient improved in 2021 (data was excluded during 2020 due to the COVID-19 pandemic). There have been some months where the number of consults per unique patients has exceeded the national benchmark of 20 percent. The ICU nurses are noticing improvement in patient care. McCarthy explains, "It has allowed patients and their families timely access to our palliative care services, providing more support and encouraging therapeutic conversations early on in the patients' course."

Young also noted that there has been a large increase in consults. "Dr. Halporn is now routinely part of our interdisciplinary rounds, which occur daily Monday to Friday. This was in hopes to make palliative care more present in the ICU and available for staff to talk with and ask for advice," she says.

The Unit Based Council hopes to disseminate the PPS process to the inpatient medical-surgical floors, so that patients, families and staff on other floors may also benefit.

Ma, J., Chi, S., Buettner, B., Pollard, K., Muir, M., Kolekar, C., Al-Hammadi, N., Chen, L., Kollef, M., & Dans, M. (2019). Early palliative care consultation in the medical ICU: a cluster randomized crossover trial. *Critical Care Medicine*, 47(12), 1707–1715. <https://doi.org/10.1097/CCM.0000000000004016>

“Tap N Go” streamlines Epic access

Single sign-on technology is used frequently in everyday life. Now, that technology is being implemented in the healthcare setting. This year, Mass General Brigham introduced “Tap N Go”—a single sign-on badge reader that helps caregivers spend less time signing onto the computer by simply tapping their badge to gain entry to Epic (or electronic health record). “Tap N Go” has been a welcome change across Mass General Brigham as one of the challenges with technological advances in Epic is the increased documentation burden placed on clinicians. Within the Mass General Brigham system, nurses, on average, spend 180 minutes per 12-hour shift documenting the care that they provide. National work is being done to look at reducing the burden of documentation, but as healthcare systems wait for potentially sweeping changes to documentation to come, some simple solutions, like “Tap N Go,” can help improve efficiency, usability and satisfaction for clinical staff.

To use “Tap N Go,” staff are required to do a full log-in after swiping their badge at the beginning of their shift. After this initial log in, staff can go to any device throughout the hospital and swipe in and swipe out. This one initial registration for the day lasts up to 12.5 hours. If a staff member loses their badge, they are asked to call the Help Desk and report their badge missing. The badge is then deactivated. Staff must then go to Human Resources to obtain a new badge, which is enrolled into “Tap N Go.”

In March and April of 2021, Brigham and Women’s Faulkner Hospital went live with “Tap N Go” throughout the campus in inpatient, outpatient and ambulatory practices for all staff who complete clinical documentation. This project was accomplished in part through Brigham and Women’s Faulkner Hospital’s Nursing Informatics Committee. The committee utilized a process improvement approach to the implementation by creating a two-page education document that highlighted the steps necessary to use “Tap N Go.” Staff training was provided by Paula Wolski, MSN, RN-BC, Program Director, Informatics for Nursing/Patient



Care Services and Executive Sponsor of the Nursing Informatics Committee.

A survey tool that measures users’ perceived usefulness was used to gain staff feedback and satisfaction with this new technology. Staff were surveyed one

week prior to implementation, and then two weeks after implementation to gain feedback on the impact of “Tap N Go.” The IS project team collaborated with the Nursing Informatics Committee on this project, by helping staff members register badges, updating computers, installing badge readers and assisting with turning on the devices for go-live. The Outpatient Infusion Center was identified as the hospital’s pilot unit, and work started in there in March of 2021. By April 26, 2021 all clinical areas in the hospital had been converted to “Tap N Go.” In total, around 575 devices were activated by the IS team to utilize “Tap N Go.”

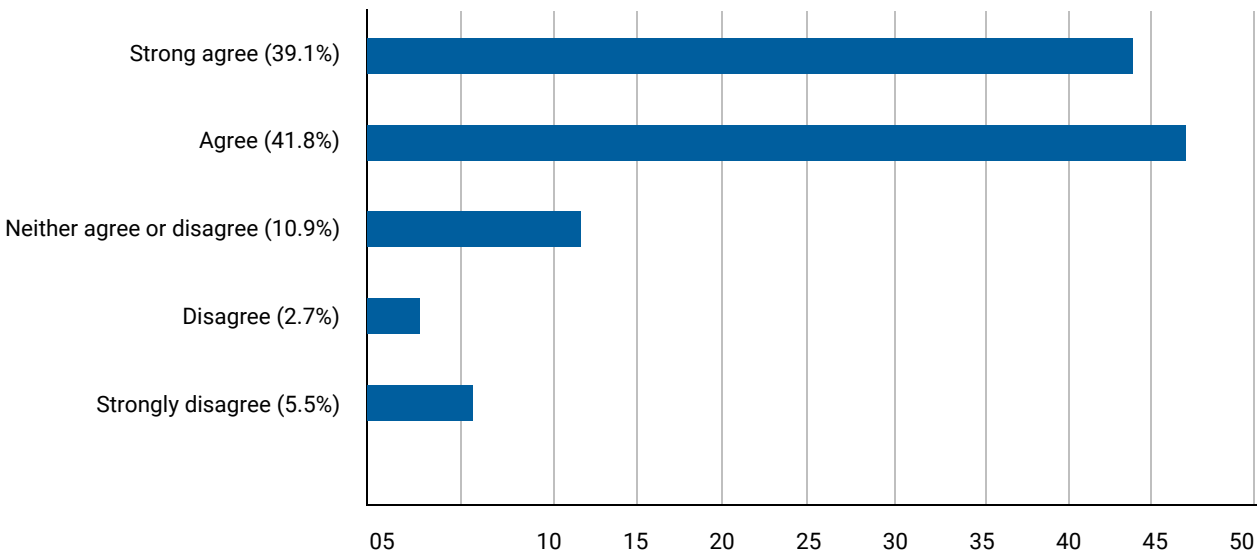
Post implementation, staff survey feedback was positive, with over 61 percent of respondents reporting that “Tap N Go” enhanced their on-the-job effectiveness, while over 80 percent reported that the application made it easier to do their job. Staff provided additional comments to the survey results. Many reported the ease of use and impact on their everyday working life in using this technology. One respondent wrote, “I appreciate the efficiency and ease of use of ‘Tap N Go.’ Logging in to some of the computers before was time consuming and this is a much easier process.” Another individual summed it up by saying, “This simple project has made our work so much quicker—brilliant!”

The Brigham family gets their “Tap N Go” results as an entity, and as of August of 2021 the addition of “Tap N Go” has saved 41,378,255 clicks from March 26 through September 26, 2021. This is based on an estimate average of five clicks for username/eight clicks for password entry. Across the Brigham family in this timeframe, it was found that 3,831 hours have been saved since moving to “Tap N Go.” Badges have been tapped 2,758,551 times, and 15,695 users are enrolled across the Brigham family.

The next step for “Tap N Go” is to incorporate it on every device that staff use to log into Mass General Brigham applications. The Nursing Informatics Committee continues to advocate for and support staff workflow efficiency and staff satisfaction. As the organization looks to reduce documentation burden, this was one way in which a small application allowed for a massive impact on all clinical staff.

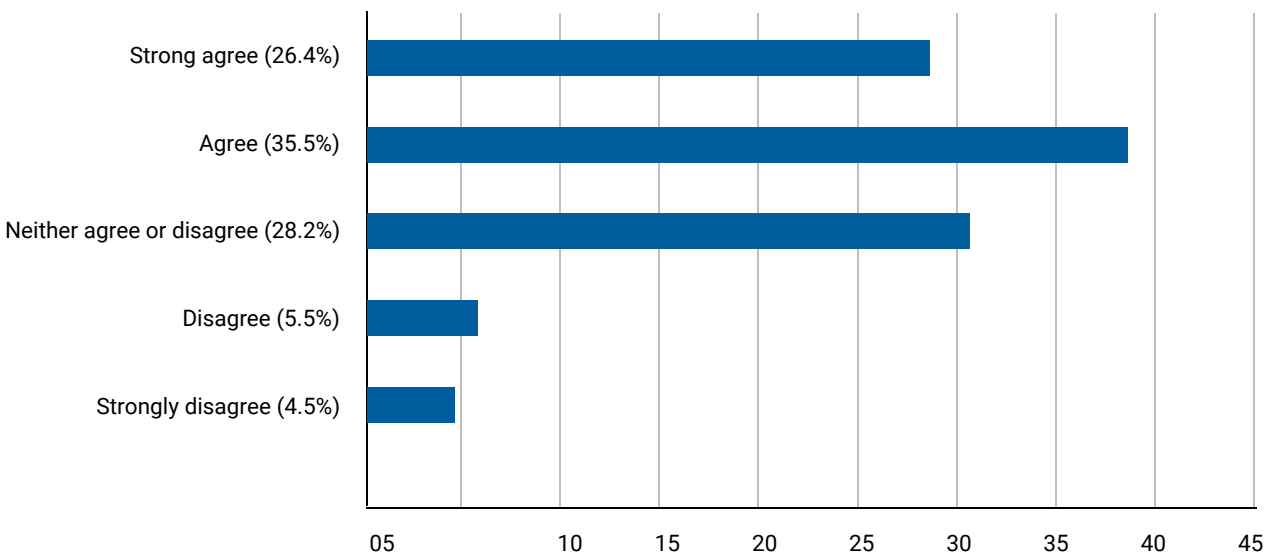
Post implementation survey

Using Tap n Go makes it easier to do my job



Post implementation survey

Using Tap n Go enhances my effectiveness on the job



Bariatric ERAS Program proves successful

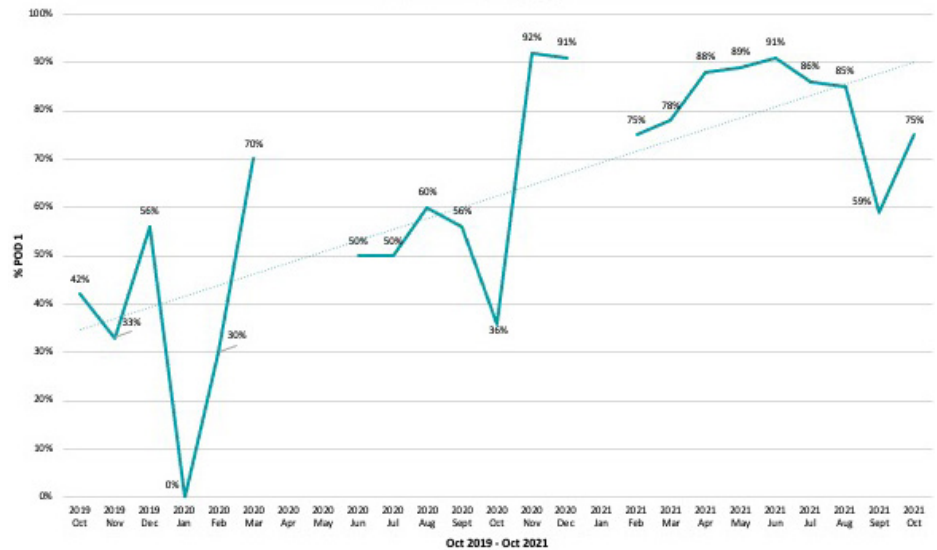
In 2021, a collaborative effort between the Department of Surgery and the Department Nursing was created to decrease length of stay for the bariatric patient population. This was done through the creation of a bariatric ERAS—which stands for enhanced recovery after surgery—program, with an initial goal of discharge on post-operative day one for 70 percent of this population. Prior to the start of this program, all bariatric patients were put on an ERAS program prior to surgery, but this program puts them all on the same pathway, with clear expectations and goals of care to ensure all patients are given the greatest chance of decreased post-operative symptoms.

“Having everyone on the same page is helpful,” says 7 South Nurse Director Mary Anne Barry, MBA, BSN, RN.

The hospital’s perioperative services team are the first faces the patients see. In fact, it is the pre-operative nurses who confirm patients have started on the pathway correctly. Pre-operative nurse Phyllis Garr, BSN, RN, says, “The process is pretty ingrained at this point. Pre-operative nurses provide education to patients on what ERAS is, and the benefits it provides them post-operatively.”

The bariatric ERAS program rolled out in April of 2021, but had been in development since 2019 by Thomas Tsai, MD, MPH. In April, Dr. Tsai spoke at a combined 7 South night and day shift staff meeting to educate staff on this new process. Michelle Carignan, BA, RN, a staff nurse on 7 South, said, “The nurses’ role is so much more autonomous [now], our job is to advance these patients so they can go home the next day.” Carignan explains that nurses are instrumental in encouraging patients and ensuring that they are advancing through early ambulating, treating pain with nonnarcotic medications and

BWFH %POD1 (SG)

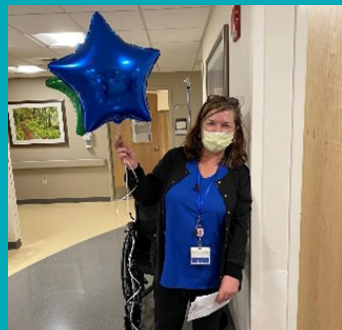
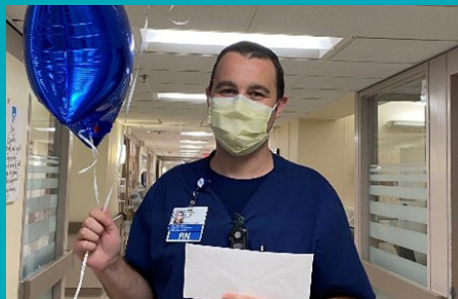
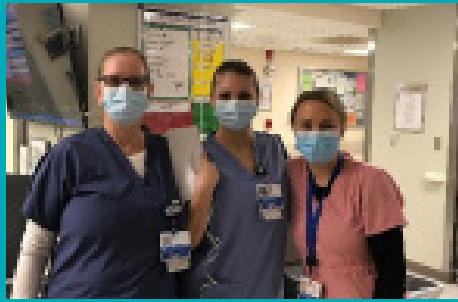


encouraging oral intake once nausea is resolved. All patients are given a scheduled antiemetic, and the nurses can advocate for additional medications if that is not enough. Carignan further explains how there is a great deal of education these patients need to receive around hydration, as dehydration is the biggest risk of readmission.

There are continual improvements being made to help these patients reach the goal of post-operative day one discharge, including a recent change in October where the team has moved away from crushing medication, and now allowing patients to take oral medications. This helps keep patients on the same medications and process they will be on once home, leading to an improved chance of being able to discharge on post-operative day one. Overall, since the rollout in April, all but one month has seen the unit meet the goal of greater than 70 percent of patients discharged on post-operative day one. The trend since 2019 to the present is an upward climb, showing the benefit of this program. Because of this, Dr. Tsai has increased the goal to 80 percent post-operative day one discharge moving forward.

Snapshot 2021:

A look back at some of the moments that defined our year



Our Mission

Our mission is to provide compassionate, high-quality, evidence-based, nursing care in a learning environment that meets the diverse needs of our patients, families and communities.

Our Vision

To be the premier department of nursing in an academic community hospital in the New England area.

Our Values

All of our nurses demonstrate a commitment to the profession of nursing through the following core values:

RESPECT

INQUIRY

COLLABORATION

EXCELLENCE



brighamandwomensfaulkner.org

