Extra: Lives Outside the Hospital

Debbie Reid: From Couch Hugger to Competitive Swimmer

by Candace Pearson

After a long day’s work at Children’s Hospital Los Angeles, Debbie Reid, MSN, RN, CPON, jumps on her bike and rides 20 to 30 miles. On weekends, she covers 40 to 50 miles. Sometimes she adds in a long hike through the hills, plays co-ed softball or hits golf balls at the driving range.

“I do some sort of activity at least six days a week, sometimes seven,” says Reid, manager of Patient Care Services Staff Development. The result: Her energy level is higher and her stress quotient lower.

It’s a stark contrast to the pre-2008 Reid, who would typically come home after work and “hit the couch,” she says. Determined to reform, Reid had already joined a gym and lost 25 pounds when she attended a hospital holiday party that December. There, CHLA President and CEO Richard D. Cordova, FACHE, said he wanted to participate in the Nautica Malibu Triathlon, but focus on the running and biking portions. He needed a swimming partner.

Reid’s pal, Rita Secola, PhD, RN, CPON, Patient Care Services director in Hematology-Oncology, volunteered her. “Oh, Debbie’s a fish,” Secola said. “She’d love to do it.”

This September will be Reid and Cordova’s sixth year partnering in the triathlon, which benefits cancer research at Children’s Hospital. Reid begins training in May, attending lifeguard-run clinics at Zuma Beach. In some ways, she’s been preparing for the event her whole life. She started swimming lessons at age 3 and joined a swim team at 7.

Debbie Reid doesn’t think of herself as an inspiration, though others might. “Debbie has pushed me every year to get ready,” says Cordova. “Her tenacity and attention to detail most certainly carry over to her work here at CHLA.”

Reid is grateful to be raising funds for the hospital—and for her newfound healthier life. “Before this, I watched people do things,” she says. “Now I’m the one doing them.”

Volunteers in Action

Marisa Messer Finds Her Heart in a Vietnamese Orphanage

by Candace Pearson

When she arrived in Vietnam, she fell in love with the “gorgeous” country. “Vietnam holds a special place in my heart,” says Messer, an Emergency Department nurse at Children’s Hospital Los Angeles.

Messer volunteered at the GoVap Orphanage in Ho Chi Minh City (formerly Saigon), home to about 300 children. Many suffer from effects of the defoliant Agent Orange, used during the Vietnam War to expose forested areas. Now, 50 years later, children are exposed through both genetics and contaminated fields.

“It was a pretty daunting experience,” says Messer, who treated children with severe cases of hydrocephalus, Down syndrome, cerebral palsy and genetic malformations.

In December 2012, Messer—who describes herself as “pretty spontaneous and adventurous by nature”—came to Children’s Hospital as a traveler. Seven months later, she signed on to the staff. “The variety of people we serve satisfies my need for excitement and cultural diversity,” she says. “Sometimes I still feel like I’m traveling, getting to see all the things we see.”

But she left part of herself behind—a now 2 1/2-year-old girl at GoVap Orphanage named Nhung (“Velvet” in English). Messer hopes to someday adopt Velvet once the U.S. lifts restrictions on adoptions from Vietnam. She has already gone back twice to visit Velvet and plans to go again soon. “I know she’s in good hands,” she says.

This October, Messer has signed on with other CHLA staff for a medical mission in Haiti. The year of on-the-road volunteer service changed her. “It’s liberating to know I can survive pretty much anywhere,” she says, adding, “I’m more aware now of how much of the world is out there. It’s strange to say, but traveling like this has made me more human.”

Marisa Messer, BSN, RN, at the GoVap Orphanage

For nearly a year, Marisa Messer, BSN, RN, traveled through 13 countries, volunteering her services in medical clinics and orphanages in seven of those countries as she went, first in Central America, then South America and Southeast Asia.
Nurses’ Spirit of Camaraderie Creates Lasting Retaining Staff

by Vicki Cho Estrada

Last fall, things got a little crazy on 6 West. One day, nurses and other staff members reported to work in their PJs, robes and fluffy slippers. That same week, they dressed as twins with their co-workers, wore mismatched clothes with wacky hairdos and donned superhero and princess costumes.

Not exactly appropriate work attire for Children’s Hospital Los Angeles, but it was Spirit Week—dubbed “a week dedicated to each other where everyone’s silly sides and creative cats come out and represent the 6 West spirit!”

Nearly everyone on the floor participated in the week’s themed days (Sports Sunday, Nerdy Monday, Twin Tuesday, Wacky Wednesday, ‘80s Throwback Thursday, Fantasy Friday and Slumber Party Saturday), which wasn’t surprising. The unit has one of the most active Recruitment and Retention (R&R) committees in the hospital, with a penchant for planning activities to improve team building, boost inclusiveness and morale, and make the workplace more inviting.

“We had this idea, ‘What if we did something fun, like Spirit Week in high school?’ We took the idea and ran with it,” says 6 West’s R&R committee chair, Tess Narciso, RN, adding that during the week, a Spirit Stick—a glitter- and foam-decorated 30-cc syringe—was given to the most spirited employee on every shift. “It’s funny how simple the concept was—to let loose and be yourself—but it was cool to see people bond at work in a fun and silly way.”

The committee is made up of several nurses, including Abigail Aragon, BSN, RN; Tracy Briatico, BSN, RN; Victoria Briones, BSN, RN; Gene Calderon, BSN, RN; Courtney Carmona, BSN, RN; Claudia Castellon, LVN; Hanna Chong, LVN; Tiffany Crow, BSN, RN; Ashley Dunser, BSN, RN, CPN; Rikki Hurtado, BSN, RN; Christiane Lieu, BSN, RN; Rene Mendoza, BSN, RN; Andrea Muller, BSN, RN; Melonee Sanchez, RN, ADN; Tamara Sibala, BSN, RN, PHN; Razel Talle, RN, ADN; Jaime Truluck, BSN, RN, CPN; Nicole Westrick, BSN, RN; and Shawna Winana, BSN, RN, CPN.

Like other R&R committees at the hospital, the group plans activities aimed at recruiting and retaining staff, but has taken its effort to another level. Besides Spirit Week, which will be back this fall due to popular demand, there are monthly game nights, hikes and beach days, weekend trips, movie nights, potlucks, garage sales, picnics and holiday parties. 6 West also recognizes an outstanding employee every month with its Little GEM (Going the Extra Mile) Award, which is similar to the hospital-wide GEM Award.

The unit recently held its first Biggest Loser weight-loss competition, in which 13 staff members collectively lost 200-plus pounds and raised more than $1,000 in donations. Half the money was awarded to the winner and the other half went toward funding R&R activities.

“The R&R committee makes a huge difference in our work—people are excited about working here,” says 6 West Education Manager Cheryl Franco, MSNEd, RN, noting Spirit Week in particular “brought everyone together and showed how important it is to have a really strong team. That translated right over to the patients—the kids just loved it.”

Operations Manager James Mandani, MBA, MSN, RN, adds, “The committee has created a sense of community and we have really seen the spirit on the floor grow in recent years. When even doctors dressed up for Spirit Week, we saw how that spirit permeated throughout the floor.”

He says creating closer bonds is especially important on 6 West, a medical/surgical floor that treats a wide range of higher acuity patients, from postsurgical, including liver and kidney transplants, to a new epilepsy population.

“It’s a challenging work environment, but the teamwork is unbelievable. The staff is very tightknit and we truly care about each other,” adds Tiffany Allen, BSN, RN, CPN, who has hosted three garage sales to raise funds for R&R activities.

Last spring, she and several 6 West colleagues collected donations and organized a garage sale to raise money for a nursing assistant who is battling cancer. “Work is serious and hard, but those little things—like gathering everyone to do a garage sale and donating money for a colleague—boost our morale. It gives us something to look forward to, lifts us up and reminds us that we’re surrounded by super-talented, super-loving colleagues.”
Jaime Truluck was a travel nurse for 10 years and decided to stay on 6 West in 2012 after experiencing the floor’s camaraderie. “When I came to 6 West, I felt like it was a big family. I love the fact that my co-workers have my back. In a crisis, they’re there to help me. It’s that type of thing you look for in a unit and makes you want to stay.”

She opens her home in Glendale to 6 West staff and their families for a monthly game night, with activities ranging from board games to Xbox and video games. “We try to time our R&R events so both day and night shift staff can come and build morale between shifts,” says Truluck, one of several committee members who works nights.

The R&R committee from 6 West is not alone in hosting activities to boost teamwork and morale. R&R committees throughout Children’s Hospital plan social outings, events and more. A group of 5 West employees recently hiked Mount Whitney as part of its training for the Cystic Fibrosis Foundation’s Xtreme Hike in September. The group plans to take several more hikes before participating in the foundation’s 20-mile hike in Santa Barbara to raise funds and awareness for cystic fibrosis.

In July, 6 North held a rehab team-building meeting that included arts and crafts and ice-breaker activities led by an art therapist and social worker, respectively.

“6 North is truly an interdisciplinary environment, where we have Occupational, Physical and Speech Therapy, Child Life, Social Work, nurses and other areas working together,” says Interim Nurse Manager Yvonne Hughes-Ganzon, BSN, RN, CRRN, CPN. “Team building is an invaluable component of patient success.”

Terri Cole, MSN, RN, clinical manager of 6 West, sums it up best. “Having spirit and team-bonding activities are important,” she says, “because they help maintain a healthy and happy environment. Families come to Children’s Hospital very concerned and worried about their children. By doing things to lift morale, we’re able to pass that on to patients and their families.”

The nurse leadership team at Children’s Hospital Los Angeles is working on an exciting program that would enable patients and families to easily access information on their diagnosis and follow-up care from home.

Karen Drenkard, PhD, RN, NEA-BC, FAAN, chief clinical/nursing officer of the GetWellNetwork, visited the hospital in July to meet with the leadership team and begin collaboration on a strategic plan to expand the hospital’s interactive care beyond the inpatient setting. Prior to her current position, Drenkard was the executive director of the American Nurses Credentialing Center (ANCC) and former director of the Magnet Recognition Program.

“Dr. Drenkard is incredibly passionate and knowledgeable about patient care and our goal is to work together to take what we already have to the next level,” says Lori Marshall, PhD, RN, MSN, administrator, Patient Family Education and Resources. “We want to be able to engage families at the highest level possible.”

The GetWellNetwork, delivered on mobile devices, PCs and TVs, allows patients to access information to better educate themselves about their condition.

“This is an exciting step in improving care outcomes,” says Marshall. “This is really about how to best partner with our families.”

Marshall has engaged a dynamic committee to facilitate leadership hospital-wide. The committee members include: Mary Dee Hacker, MBA, RN, NEA-BC, FAAN, vice president of Patient Care Services and chief nursing officer; David Davis, MSN, RN, associate vice president, Quality Improvement and Patient Safety; Sharon Chinn, BSN, RN, director, Patient Care Services; and Project Management Office leadership: David Abbott, James Cole and Steve Mason.
Voice of the Profession

Mary Dee Hacker, MBA, RN, NEA-BC, FAAN
Vice President of Patient Care Services and Chief Nursing Officer

This summer, I found myself once again at my favorite getaway waking up to the view of a magnificent freshwater lake and gorgeous, towering trees. Lake Tahoe is where I go year after year to unwind and breathe deeply. It is here among the white firs and the ponderosa pines that my mind takes a much-needed break from my daily responsibilities.

Compassion fatigue and a prevailing feeling of exhaustion are very real in our profession. Many nurses have self-sacrificing personalities, which can lead to long-term health issues. I encourage each one of you to create a long-term vision for how you will incorporate a sense of wellness into your everyday lives.

We have all heard flight attendants telling airline passengers that they must put the oxygen mask on themselves first before helping others, including their own children. As nurses, we need to remember this message. If we are not taking good care of ourselves, we will not be able to take good care of our patients.

In this issue of FloSheet, you’ll read about how the nurses of 6 West have created a community that consistently brings joy into their professional lives. Debbie Reid also shares her story on how she made a conscious decision to invest in her personal health and how that investment is paying off. She is an inspiration to us all.

A 6-month-old patient is gasping. Her heart rate drops, and suddenly she loses consciousness. Every second counts as medical professionals leap into action, providing cardiopulmonary resuscitation (CPR).

Minutes later, the team debriefs at the bedside. “Was CPR strong enough to generate a pulse?” asks one nurse. “Was defibrillation appropriately provided?” asks another. The patient—Maddie Sims, SimBaby™—is a high-fidelity, high-tech mannequin and this is all a training exercise, taking place in the Las Madrinas Pediatric Simulation Research Laboratory, part of the Children’s Hospital Los Angeles Simulation Center.

“The simulations are amazingly realistic,” says Caulette Young, BSN, RN, CCRN, simulation specialist educator. “When the patient can breathe, and you can feel a pulse or listen to heart sounds, things start to feel very real, allowing staff to respond like they would in a real-life emergency.”

Simulation has been used for decades in such industries as aviation, aerospace and the military, and has taken hold in medical education and research with the push to reduce errors and improve team response and patient outcomes.

The 5,000 square-foot Simulation Center has been jump-started with a $5 million endowment from Las Madrinas, one of the hospital’s first affiliate fundraising groups. The simulation environments, soon to start renovation, can be transformed into everything from operating and intensive care rooms to a cath lab, procedure unit and more.

In addition to Young, the simulation team encompasses Alyssa Rake, MD, medical director, and assistant professor of Pediatrics at the Keck School of Medicine of the University of Southern California; Suzanne Taylor, MSN, RN-BC, EMT, director, Clinical Education and Professional Development; and, Chynna Ungson, BS, project leader.

The Simulation Center also has Hope Sims, SimNewB®, replicating a full-term newborn. Both Maddie and Hope are “high-fidelity” mannequins, programmable with a range of symptoms and responses. Stationed at a laptop, Young can change vital signs with preprogrammed scenarios or “on the fly”—and add crying and other vocalizations to challenge trainees.

ECMO simulators enable training for extracorporeal membrane oxygenation. Several “low-fidelity” mannequins include ones that can be connected to a dialysis machine, “task trainers” to practice procedures such as intubation or inserting central lines, and a Q-CPR Resusci Anne®, which provides immediate feedback on CPR technique via a computer program.

Among those going through training are medical residents and interns, nurses attending Pediatric Advanced Life Support (PALS) courses, RN residents practicing skills and students in Camp CHLA. The Simulation Center also collaborated with the Trauma team in the Emergency Department to create real-life scenarios such as a child ejected during a car crash and brought in by paramedics.

The most important part of a simulated event is the debriefing process at the end. Debriefing builds critical thinking and allows for reflection and analysis, while improving team dynamics and communication skills. “This is a safe place to learn new or rarely done procedures,” says Young, “and a safe place to make mistakes.”

Children’s Hospital Originals

No-Risk Simulation Training

by Candace Pearson

Alyssa Rake, MD, medical director, and Caulette Young, BSN, RN, CCRN, at the Las Madrinas Pediatric Simulation Research Laboratory

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A Former Patient’s Mother, Now a Nurse
by Vicki Cho Estrada

Twenty-two years ago, Deborah Marino, BSN, RN, experienced an “aha” moment when her newborn son, Cory, became a patient at Children’s Hospital Los Angeles. As he underwent three surgeries to treat his right clubfoot, she decided to go back to school to become a nurse.

“I remember the staff made me feel so welcome, I felt like I was in the best and safest place; that’s when I realized my career path,” says Marino, who joined CHLA in 1997 on 4 East before becoming a nurse care manager in charge of patients with solid tumors in Hematology-Oncology in 2006.

She currently facilitates care for about 50 neuroblastoma and retinoblastoma patients, from newborns to teenagers, helping them navigate their treatment at the hospital—coordinating their appointments, following up with their families, helping them interpret information and answering questions.

Marino may work with patients with neuroblastoma, a cancer that develops from immature nerve cells found in several areas of the body, for up to 18 months, and coordinate such treatments as surgery, radiation, chemotherapy and stem cell transplants. For those with retinoblastoma, a rare eye cancer, treatment may take six months and involve chemotherapy, radiation and surgery.

Marino acknowledges that working with patients suffering from serious health conditions can be challenging. While one type of neuroblastoma is easily cured, another type can be difficult to treat, with a 45 percent survival rate. Retinoblastoma is highly curable if detected early, but half of all patients will lose an eye.

“It’s difficult when a treatment fails or a patient loses his life. You make a connection with families during a difficult period in their lives,” says Marino.

What she loves most about her job is working with children, “who get through their therapies like it was going to the park and playing. It’s amazing to see a cancer patient come to the hospital and look forward to playing games and putting puzzles together.”

Marino adds, “There’s never a day that I don’t learn something, even if it’s how to help a family better move through this process. I can’t solve all problems or cure cancer, but I can make it easier for my families.”