

# NURSING

## Annual Report

### 2012-2013



**Children's  
Hospital  
LOS ANGELES®**

We Treat Kids Better





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## A Note From our Magnet Program Managers

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The years 2012 and 2013 were indeed eventful. In 2012, we completed the Magnet Document and hosted the site visit for members of the American Nurses Credentialing Center. In early 2013, we received the wonderful news that we once again earned Magnet recognition for nursing excellence. It was all made possible by the collective efforts of every single person at Children's Hospital Los Angeles. The celebration of our shared achievements continues as we highlight the best of what we do in this 2012-2013 Nursing Annual Report.

Sincerely,

Susan Crandall, BSN, RN, CCRN  
Margaux Chan, BSN, RN, CPN



*Susan Crandall, BSN, RN, CCRN (left),  
and Margaux Chan, BSN, RN, CPN*

## A 2012 and 2013 Overview

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### Our Hospital:



365

Patient beds

106

Intensive care beds

50%

Approximate percentage of our patients under the age of 4

48

Outpatient clinics

131

Number of high school students, plus six student volunteers, who came to Children's Hospital Los Angeles for CAMP CHLA, a five-day summer program providing exposure to health care careers, in 2013

6,000+

Patient visits handled by the Division of Adolescent and Young Adult Medicine, with the help of its community outreach sites

Average daily census:

Annual transport patients:

Average number of days our patients are in the hospital:

Number of patients seen in our Institute for Maternal-Fetal Health:

## Our Nurses:



*Nadia Miranda, RN, wearing a sash to remind others not to interrupt her as she safely gives medication*

80

Nurse practitioners

8

Nurse anesthetists

55%

Percentage of our nurse leaders who have a national certification

60%

Percentage of our nurse leaders who have a master's degree or higher

104

Nurses in the Versant RN Residency Program during 2013

8.9

Our nurses' average years of tenure

1,100

Approximate number of nursing students our expert nurses teach each year

**2012**

**2013**

272

287

2,238

1,684

7.36

7.40

479

500

# Welcome

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Children's Hospital Los Angeles nursing is always about the future. We have so much to be proud of and yet so much still to strive for.

We are not satisfied by just outperforming the mean or median of national patient safety goals. We've stepped up our efforts to eliminate any risks to the children and families we serve; we're striving to get to zero. Every nurse at Children's Hospital is inspired by the opportunity to provide excellent care. As we work to create an environment for superior care, we understand the imperative of addressing certification and formal nursing education. Through our collaborative governance process, we've made impressive steps toward building a well-educated, specialty-certified nursing workforce.

In 2013, a council dedicated exclusively to research and innovation was established, as was an innovative new partnership between Children's Hospital Los Angeles and the University of California, Los Angeles (UCLA) School of Nursing. This collaboration will provide Children's Hospital with access to the superior nursing scholars in the top-ranked UCLA School of Nursing. Our partnership will continue to improve the health and well-being of children through the rigor of research and innovation.

There has never been a more exciting time in the practice of nursing at Children's Hospital Los Angeles. Every day is a new day pushing us forward as professionals and providers of care.

Sincerely,



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



## A Letter From the President

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One of my favorite images from my time at Children's Hospital Los Angeles is the photograph of Mary Dee Hacker, MBA, RN, NEA-BC, FAAN, a handful of our nurse leaders and me just as we received the news that we had achieved Magnet status for the very first time in 2008. It truly captures the jubilation we felt at earning what we had worked so hard to achieve—recognition as one of the top hospitals for nursing in the United States.

Flash forward four years, to how happy we were to hear the news that we had again been designated a Magnet hospital by the



*Mary Dee Hacker, MBA, RN, NEA-BC, FAAN (center), and Richard D. Cordova, FACHE, celebrate the hospital's first Magnet designation announcement in 2008.*

American Nurses Credentialing Center. The first time was great, but to have our nurses' hard work and achievement recognized yet again was even better. It was not only confirmed, but reconfirmed—our hospital is simply among the best of the best.

It's a testament to the hard work and determination of our nurses and everyone at Children's Hospital Los Angeles that we didn't rest on our laurels after our first Magnet recognition. Our team went right back to work preparing for redesignation. The same is true now; our nurse leaders are already laying the groundwork for redesignation in 2017.

We may treat kids better, but we can always find ways to improve—to treat kids even better still. Our nurses are at the core of these efforts—and they are constantly looking for ways to hone and

improve the way we provide care. Like everyone at Children's Hospital Los Angeles, they believe that children deserve the very best care possible. You'll see example after example of this commitment as you read through this Nursing Annual Report.

Thank you for taking the time to learn more about the outstanding work our nurses do here at Children's Hospital Los Angeles.

Sincerely,

*Richard Cordova*

Richard D. Cordova, FACHE  
President and Chief Executive Officer



## Mary Dee Hacker: Commitment to Leadership

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1975

Began as a staff nurse at  
Children's Hospital Los Angeles

1979 - 1982

Served as nurse manager of the  
Pediatric Intensive Care Unit

1993

Began serving as vice  
president of Patient Care  
Services and chief nursing officer

Mary Dee Hacker, MBA, RN, NEA-BC, FAAN, has been committed to Children's Hospital Los Angeles for more than three decades, since beginning as a staff nurse in 1975. She has held various administrative nursing positions at the hospital, including nurse manager of the Pediatric Intensive Care Unit (1979-1982). She has served as vice president of Patient Care Services and chief nursing officer since 1993.

With her history at Children's Hospital, Hacker is one of the most respected members of our staff. Her strengths include her ability to work with others to solve problems, motivated by the constant aim of moving forward and improving the way things work. She never says, "This is good enough." Instead, she continually develops and advances the hospital's workforce in order to be prepared for the complexity of patient care in the years ahead.

Hacker is an incredibly passionate leader, recognized nationally by her peers. Her work has earned her numerous awards, and she has been appointed to many prestigious boards across Los Angeles, Southern California and the nation. Some of her accolades and achievements include:

- Invitation to serve on the DAISY (Diseases Attacking the Immune System) Foundation board in 2005
- Receiving the Diane Cooper Lifetime Achievement Award from NurseWeek magazine, 2009
- Induction as a fellow to the American Academy of Nursing (FAAN), 2010
- Appointment to the board of the California Institute for Nursing & Health Care (CINHC), 2011
- Appointment to the Commission on Magnet Recognition Program® (COM) to fill the American Academy of Nursing representative position, 2013

Hacker's leadership presence at every level of Children's Hospital Los Angeles enables her to influence organization-wide change. She has been the driving force behind the Versant RN Residency in Pediatrics, a 22-week program that provides new nursing school graduates with a comprehensive clinical and learning experience to prepare them for work in the acute care environment at the hospital.

She is also an active member of various decision-making bodies at the hospital, including the Executive Leadership Team, the Quality Leadership Council, the Committee for Expedited Event Review and Corrective Action (CEERCA) and the Family-Centered Care Committee. She is committed to her many roles, the most important one being her membership on the Children's Hospital Los Angeles Board of Trustees.

A NurseWeek article from Aug. 10, 2009, best describes her appointment:

*When Richard Cordova, CEO of Children's Hospital Los Angeles, walked into the office of Chief Nursing Officer Mary Dee Hacker and asked her to stand up, she was surprised by the unusual request. She was even more intrigued when he said that he wanted to be the first to congratulate her. Cordova told Hacker that the governance committee had decided to revise the hospital's bylaws to appoint the Chief Nursing Officer to the Board of Trustees. The decision would make Hacker the first CNO in the hospital's history to have a voting seat on the board.*

This was a remarkable move, since it is a rarity for nurses to be members of a hospital board. The NurseWeek article noted that "one recent study of more than 120 community health systems showed that only 2.3 percent of the systems have nurses serving in that capacity on the hospital board."

During the hospital's Magnet redesignation announcement on Jan. 16, 2013, the Magnet Commission recognized the importance of Hacker's membership on the Board of Trustees:

*"The fact that you, as the chief nursing officer, are a voting member of the Board of Trustees and that it's actually articulated in the organization's bylaws is highly unusual and really speaks to the commitment to your role as a nursing leader and the organization's commitment to nursing. The Board actually was very articulate and described your active participation and accountabilities that have facilitated high-level functioning and quality outcomes, because you and your entire team are moving as one, and your vision supports and enhances the direction of the organization. This is outstanding work."*



## Finding a Better Way in the Day Hospital

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In the past, children with cancer and blood diseases would undergo treatments like chemotherapy as inpatients. As medicine has improved, many of these treatments are now given as outpatient procedures, keeping kids home with their families where they belong. But this shift has resulted in a higher volume of patients in our outpatient settings—something that has slowly evolved over time. This presented a unique challenge for nurses in the Day Hospital at Children’s Hospital Los Angeles.

The hospital’s outpatient Hematology-Oncology Infusion Center cares for approximately 20-28 patients per day, with 5,689 visits per year. The Day Hospital is part of the Infusion Center and provides outpatient services for children who need support for chronic hematologic and oncologic conditions such as sickle cell disease, thalassemia, leukemia and other blood disorders, as well as solid tumor cancers.

In the Day Hospital’s earliest days, patient volume was low enough to allow for flexible and informal scheduling. But as more patient care moved to the outpatient setting, the volume of patients and services handled at the Day Hospital increased exponentially. The unit’s longstanding scheduling process was constantly challenged to meet the volume demands and complex treatments of patients while continuing to ensure patient safety and quality care.

The informal scheduling system instructed patients and families to arrive on a given day, but did not provide them with appointment times. This meant that several patients might arrive at the same time. It was upsetting and overwhelming for the frontline staff, and frustrating for patients who were left waiting for a nurse to tend to them.

A task force was developed to address the issue and assess the scheduling system, staff utilization, patient arrivals and workflow. This team included a core group of clinical nurses, a patient assistant liaison, a clinic supervisor and managers. To guide its work, the task force articulated three main goals:

- Decreased wait time for beds
- Measurable improvement in patient care, as indicated by patient responses on the patient satisfaction tool
- Measurable improvement in workplace satisfaction as indicated by results of a survey of nurses' perceptions after the changes were implemented

The group first conducted a detailed assessment of current patient-care trends in the Day Hospital, identifying the typical patient treatments and hours of nursing care required. This information was then used to improve the current electronic scheduling system to provide definitive appointment times and appropriate blocks of time for delivery of care.

The task force members ensured that clinical staff, patients and families were well-informed about the new scheduling system prior to the start of the new process. In January 2011, the front desk staff began to communicate the upcoming scheduling changes to patients and families. Nurses reinforced the changes by stating the return appointment arrival time and date at

the time of discharge. In addition, the charge nurse was available to answer any questions and listen to patient and family concerns.

On Feb. 7, 2011, the new scheduling system formally began. Patients and families have embraced the change and have provided positive feedback regarding their experiences. They have noted a dramatic reduction in wait time, from one to three hours to just 15 to 45 minutes.

Moreover, the nurses in the Day Hospital have expressed increased satisfaction, too. Below are just some of the positive comments nurses made in a survey conducted after the implementation:

- *"I'm not so stressed. Day Hospital families are very happy with the change so far."*
- *"It's less noisy in the Day Hospital, less waiting time as well."*
- *"It seems calmer than before."*

By coming together to address this challenge, nurses created a new and better way to work in the Day Hospital. Thanks to their efforts, the new process has increased operational workflow to accommodate all patients in a timely manner—without compromising safety and quality of care.





## UCLA Partnership Focuses on Nursing Research

*University of California, Los Angeles (UCLA) School of Nursing (left)*

Nurses at Children's Hospital Los Angeles are poised to change nursing practice with a new academic partnership inspired by the desire to promote the health and well-being of children.

This innovative collaboration between Children's Hospital and the University of California, Los Angeles (UCLA) School of Nursing will bring together nurses from the two powerhouse organizations.

The agreement comes at a propitious moment. "Our Nursing team has reached the wonderful point that the work we're doing requires us to analyze it, determine its efficacy and prove new methodologies," says Mary Dee Hacker, MBA, RN, NEA-BC, FAAN, vice president of Patient Care Services and chief nursing officer at Children's Hospital.

"There are so many opportunities with this collaboration that will advance nursing practice by bridging clinical practice and research," adds Courtney H. Lyder, ND, ScD (Hon), FAAN, dean of the UCLA School of Nursing.

The hospital will establish a Center for Nursing Research within The Saban Research Institute of

Children's Hospital Los Angeles to support nurses in designing projects, analyzing data and presenting findings. In addition, nurses from Children's Hospital and UCLA will exchange scholarly information to keep clinicians and researchers abreast of best practices.

The partnership also is expected to usher in new, joint educational efforts, including training, conferences and other scientific meetings on subjects of mutual interest.

Four PhD-level nurses at Children's Hospital will join the UCLA School of Nursing faculty: Nancy Blake, PhD, RN, NEA-BC, CCRN, FAAN, Patient Care Services director, Critical Care Services; Lori Marshall, PhD, MSN, RN, administrator, Patient Family Education; Mary Baron Nelson, PhD, RN, CPNP, nurse researcher, Brain Tumor Program; and Rita Secola, PhD, RN, CPON, FAAN, Patient Care Services director, Hematology-Oncology.

Hacker is excited by the possibilities. "Children's Hospital is internationally known for the academic work done by its physicians," she says. "It's time for our nurses to look at all aspects of nursing."

# Why Certification Matters

Earning Board certification requires discipline. To prepare for the exam, most nurses take one or more preparatory classes, pore through review books and utilize study groups. Once nurses become certified, they must fulfill certain requirements to maintain their certification, depending on the certifying organization.

This creates a commitment to lifelong learning through studying for required tests, attending conferences pertinent to certification and reading professional literature. Often, certified nurses must complete more continuing education units (CEUs) than required for their license renewal. These higher expectations create a higher level of expertise, contributing to new

knowledge within nursing practice and promoting an increased level of patient safety.

National certification enhances professional credibility and personal confidence in clinical abilities and validates specialized knowledge. It increases nurses' feelings of personal accomplishment, as certified nurses are often recognized in the workplace as adept and proficient leaders. They are empowered to share their knowledge and expertise in their workplace and community. Certification is not just mere letters after a name; it identifies nursing's highest value of professionalism.

Victoria Winter, RN, MSN, CNS, CCRN (Pediatrics), CCRN (Neonatal), clinical nurse in the hospital's Cardiothoracic Intensive Care Unit, was recognized as one of 1,488 certified critical care nurses (CCRN) in the country to have been continuously certified as a CCRN for 20 years by the American Association of Critical-Care Nurses.

Winter shares why certification is important in her practice as a clinical nurse:

"Being a certified nurse is my commitment to lifelong learning and my career growth. It is important to me for the following reasons:

- The personal challenge and for my self-improvement
- To advance my specialty knowledge and education
- To demonstrate my mastery of skills, knowledge and abilities to patients and their families

"Certification validates the specialty knowledge, experience and clinical judgment required of an intensive care nurse. It is an important indicator to patients and employers that a nurse is qualified and competent and has met rigorous requirements



to achieve this additional credential in the complex specialty of critical care.

"Today's acutely and critically ill patients require heightened vigilance and extraordinarily intricate care from a team of highly skilled professionals. This is very evident at Children's Hospital Los Angeles, with our vulnerable pediatric population and their families. Everyone in this health care setting, including the patients, employees and nurses, benefits from certification as a mark of excellence. Nurses in Magnet-designated hospitals and facilities recognized for excellence with the AACN Beacon Award for Critical Care Excellence report healthier work environments and higher job satisfaction, both of which contribute to better outcomes for patients and families."

## Our Certified Nurses

### 4 East

Irene V. Aberin	CPON
Lilibeth L. Aguado	CPHON
Shannon Elizabeth Arredondo	CPHON
Dania Marisa Bourque	CPON
Staci A. Castillo	CPON
Beata B. Chmielewski	CPHON
Dawn Marie Dunkin	CPHON
Renee A. Flores-Garcia	CPON
Diane M. Grade	CPHON
Anne C. Halili	CPHON
Jacquelyn Alvina Hone	CPON
Makenzie Johnson	CPON
Jacqueline Denise Marroquin	CPHON
Heather Joy Mehl	CPON
Johanna Navia	CPON
Alexandra Ornelas	CPHON
Marifel Pagkalinawan	CPHON
June Nicole Palacio-Bhojwani	CPON
Luzmarie Barron Ramirez	CPHON
Afshid Roozrokh	CPON
Sirinan Srilanchanarak	CPON
Allison Christine Taylor	CPHON
Peggy L. Townsend	CPHON
Kerry S. Vancura	CPON
Maria L. Medina-Velasco	CPHON
Kelsie Patricia Wagner	CPON
Sonya L. Williams	CPON

### 4 West

Melissa Stewart Aguirre	CPON
Diane Rita Altounji	CPON
Michelle D. Castle	CPON
Sona Daldumyan	CPON
Lizzele J. Dulay	CPON
Sharayah Beth Elkins	CPHON
Anoush Mary Essajanian	CPHON
Libertad Garcia	CPHON
Renita Arlene Joseph	CPHON
Sean Hyum-Sung Plank	CPN
Courtney A. Rogers	CPON
Swati Harshad Saiben	CPHON
Kimberly Nicole Schenk	CPHON
Donald E. Stewart	CLC
Deborah K. Weiss	CPN
Cara Suzanne (Lunsford) Wise	CPHON

### 5 Duque

Kelli Anderson	CPN
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### 5 East

Stephanie Kate Bedsworth Brewis	CPN
Sarah Elizabeth Brodhead	CPNP
Monica Chea Lopez	CPN
Nora A .Delgado	CPN
Ivy L. Dolinski	CPNP
Lorena Maria Ferrer-Pyorala	CPN
Giuliana V. Fiore	CPN
Amy Jean Girguis	CPN
Natalie Goldman	CPN
Frances H. Guzek	CNOR-CPN
Michelle M. Karlu	CPN
Jolene Marie Knapp	CPN
Emily Lam	CPON
Chris Lins	CCRN
Angela Adriana Madrid	CPN
Susan (Sue) Martinez	CPN
Janet Mooney	CPN
Sherry Nolan	CPN, CNS-BC
Sarah G. Ramirez	CPN
Stefanie Brooke Rionda	CPN
Erin Schmidt	CPN
Abigail Barbara Shetland	CPN
Marcela M. Solorio	CPN
Irina V. Tarasova	CPN
Sahar Vann	CPN

### 5 West

Lesley Navea Abcede	CPN
Linda B. Allen	CPN
Arnie B. Banez	CPN
Marlene Julasavee Cox	CPN
Josephine Ellashek	CPN
Margaret-Ellen Frankel	CPN
Susan L. Gonzalez	CPN
Susan D. Jensen	CPN
Sharlene C. Odhner	CPN/CPEN
Judith A. Tighe	CPN
Diana H. Vaughn	CPN
Polin Yousefzadeh	CPN
Cheryl Ann McCauley	CPN
Donna Lee Vanca	CPN

## 6 East

David Miller Barrios	CPN
Robert Clarke Briscoe IV	CPN
Anne A. Casale	CPN
Monica Ann Coles	CPN
Eileen R. Duncan	CPN
Samar El Houry	CPN
Leslie Carol Friedman	CPN
Evelyn Sofia Garcia	CPN
Kristine N. Gawley	CPN
Semhar Y. Hailemichael	CPN
Lavonda Hoover	CPNP-PC, CPN
Elaine C. Iwamoto	CPN
Catherine Kissinger	NE-BC
Margaret Lee	CCRN
Stephanie Martinez	CPHON
Soon Kim Perez	FNP-BC
John Randall Rutland	CPN
Caroline Kelton Sanborne	CPN
Kristine Tom Tapia	CPN
Jerusa Deposo Urbanozo	CPHON
Talya Weiss	CPN
Flora Yuen	CPN

## 6 North

Yolanda Amador	CCRN
Lori Chan	CPN
Minette Luna Galam	CCRN
Rosalia Guzman	CPN
Yvonne M. Hughes-Ganzon	CPN, CCRN
Vannga Nguyen	CPN
Amanda Esther Price	CPN, CRRN
Julita Arceo Reyes	CPN

## 6 West

Tiffany Michelle Allen	CPN
Olivia Banuelos	CPN
Jesibelle Perpetua T. Bernardo	CPHON
Gene Rainier Calderon	CPHON
Christina Annamaria Cerda	CPHON
Terri Lynn Cole	CPN
Kelley Dobard	CPN
Ashley Beth Dunser	CPN
Sabrina Agustina Escalante	CPN
Frances Leah Jameson	CPN
Taeree Kang	CPN
Tae Ree Kim	CPN
Christiane Marie Lieu	CPHON
Vicky Chi Lin	CPN

Lynette Maria MacFarland	CPN
Marites Rapanot Narciso	CPHON
Kristen Lee Owen	CPHON
Kathleen Sanborn Palas	CPN
Caroline Maria Ross	CPN
Melonee Silagon Sanchez	CPHON
Linda Sy	CPHON
Theresa Ann Tostado	CPN
Jaime Truluck	CPN
Gloria N. Verret	CPN
Johanna Camille Villegas	CPN
Shawna M. Winans	CPN

## Access Center

Isaac N. Gonzalez	MECN
Erin Ashley West	CPN, CPNP

## Adolescent and Young Adult Medicine

Bianca Salvetti	CPNP, CCRN
Nanora M. Thompson	CNP

## Ambulatory Care

Susan R. Benson	RNC
Deborah A. Noble	CPN
Rachelle Christine Rogan	CPN

## Ambulatory Surgery Center

Miguel R. Aventino	CCRN
Margaux Cecile Lozada Chan	CPN
Martha B. Doughty	CPN
Laura Monica Bala Fernandez	CCRN
Lorena Flores	CPON, CPN
Meredith Leigh Shaw	CPEN
Jason Robert Vargas	CPN

## Anesthesiology

Paula Jean Belson	CRNA
Melissa Anne Callaghan	CRNA
Shama Pathan Farooqui	CRNA
Saralee S. Glaser	CRNA
Sarah Polkinghorn Gubbins	CRNA
Mary Elias Iwaszewski	CRNA
Judy Mi Hee Koempel	CRNA
Shinny Thomas	CRNA

## Blood Bank and Blood Donor Center

Renee Marie Barnett	CPN
Brian J. Cook	CFNP
Andriana Pavlovich	CPN

## Bone Marrow Transplant Unit

Ann Moaje Alvarez	CPHON
Debra Lynn Barnes	NE-BC
Natalie Davis Bower	CPN, CHCR
Kristina L. Brown	CPON
Stephanie Margaret Davis	CPHON
Dannielle Eramia	CPHON
Vilma Evangelista	CPON
Gwen Kimball	CPHON
Dawn P. Landery	CPON
Kristin Ann Malicse	CPHON
Shabana Wadalawala Mather	CPHON
Mary F. Moses	CPON
Sarah Toba (Zanella) Mutia	CPHON
Donna M. Quiroz	CPON
Shinyi Tang	CPON

## Cardiothoracic Intensive Care Unit

Andrea R. Aguilar	CPN, CCRN
Madeleine Cabalitan Ayllon	CCRN
Virginia A. Culla	CCRN
Elizabeth Suzanne Daley	CCRN
Norma Alice Dansak	CCRN
Raulin D. Feria	CPN, CCRN
Harry Alexander Ford	CCRN
Sylvia Gomez	CCRN
Juliet Christine Goss	CCRN
Kelli M'Sean Kleyhauer	CCRN
Lois E. Lingayon	CCRN
Aristole Visperas Marasigan	CCRN
Melinda Martinez	CCRN
Kathleen S. Mc Intyre	CCRN
Amy Nash Parker	CCRN
Lisa A. Rizzi-Wagner	CCRN
Nicole Leanne Rohr	CPN
Gloria E. Trejo	CCRN
Jill Marie Whittey	CCRN
Victoria J. Winter	CCRN
Elizabeth Ann Zlotorynski	CPN

## Cardiothoracic Surgery

Stacey Beth Adler	CPNP-PC, CPN
Jo-Ann Marilyn Casenas Castanares	CCRN
Debra Ann Dechant	CCRN
Ellize Nickole Ergina	CPNP-AC
Pamela Michelle Faire	CPNP-PC, CPNP-AC
Kay M. Gilmore	CPN
Melanie A. Green	CPNP-AC
Donna J. Guadiz	CCRN/ CCTC

Monica V. Horn	CCRN, CCTC
Flerida Imperial-Perez	CCNS
Ruth E. Lemus	CCRP
Elizabeth Ann Miller	CPNP-PC
Kaberi Kumita Mozumder	PNP-BC
Carol Okuhara	FNP-BC, CPNP-AC
Dione Dela Cruz Paras	CPNP-PC
Pahnthea Pedoeim	CPNP-PC
Nancy Ann Pike	FNP-BC, CPNP-AC
Lillian Vicky Rosu	FNP-BC, CPNP-AC
Nhu N.Tran	CCRN, CCRP

## Cardiovascular Acute Care Unit

Jennifer L. Baldwin	CPN
Michelle Marie Beato	CPN
Carmelita Clark	CPN
Darcey Lynn Diaz	CPN
Marcia Lachelle Massey-Norfleet	CPN
Nubia Ruth Newsome	CPN
Graciela Garcia Ruiz	CPN
Stephanie Ann Vandehey	CPN
Brittany Michelle Warren	CPN
Elysia M. Weiner	CPN
Erika Ann Winn	CPN
Aileen Yanga De Guzman	CPN
Annie Yeremian	CPN

## Care Coordination

Elisa D. Barrios	CPN
Terece C. Jones	CPN
Diana Helen Lopez	CPON
Marisa Martinez	CPN

## Center for Fetal and Neonatal Medicine

Lindsay Danielle Goss	NNP-BC
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## Clinical Education and Professional Development

Debbie L. Reid	CPON/ RN-BC
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## Critical Care Medicine Nursing

Rica Sharon Prospero Morzov	CPN
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## Emergency Department

Sheila Ann Anulao	CPN
Monica Andrea Calfa	CPN
Beth Christie Clark	CPN, CPEN
Anabel Enriquez Costa	CPN, CPEN

Tom Cottrell	CPN
Laura Elise Du Four	CPN
Monica V. El'Shaddai	CPN
Mariella Flores	CPN
Robin L. Goodman	CPEN
Armstrong Hao	CPN
John Hulse	CEN
Claire J. Meyer	CPN
Natasha N. Monteith	CPN
Inge M. Morton	CPN
Phaedra Lynn Nguyen	CPEN
Sharon L. Noonan	CPN, CPEN
James O'Connor	CPEN
Nicole D. Sheppard	CPEN
Catherine Shijo	CPN
Amanda Lynn Silver	CPN
Gina Marie Terrazzino	CPN
Valorie M. Tripoli	CPN
Christi Ellen Warren	CPEN
Stephanie D. Watchler	CPN

## Emergency Transport

Erin Elizabeth Balek	CPN, CPNP-PC
Leslie R. Carey	C-NPT
Susan L. Cesinger	C-NPT
Russell A. Gill	C-NPT
Martha A. Martinez	C-NPT
Jenifer Ann Meyers	C-NPT
Marilou De Guzman Millares	CPN, CNPT, CCRN
Judy Sherif	CPN
Terri E. Stambaugh	CPN, C-NPT
Yolanda Andalon Won	CPNP

## Employee Health Services

Melanie T. Moya	CFNP
Roy Villena Tatlonghari	CANP

## Endocrinology

Anna Gastelum Bitting	CDE
Louise A. Brancale	CDE
Eulalia Carcelen	CDE
Christine Hertler	CDE
Barbara K. Hollen	CDE
Mary T. McCarthy	CDE
Debra Dee Miller	CDE
Maria De Jesus Nuques	CDE
Kailee Rene Roeser	CPN, CDE
Cassie Song	CDE

## Executives and Directors

Nancy Blake	CCRN, NEA-BC
Sharon Chinn	CRRN
Kimberly Dodson	CNOR
Barbara P. Gross	NEA-BC
Mary Dee Hacker	NEA-BC
Rita L. Secola	CPON
Suzanne L. Taylor	RN-BC

## Gastroenterology

Zulema Vega	CPN
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## General Pediatrics

Marcia Jean Lee	CPNP-PC, PMHS
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## Hematology-Oncology

Tamiko Aaron	CPN
Mary Dannette M. Abero	CPNP-PC
Chelsea Marie Balian	CPNP
Stana Bogojevic	CRNI, CPN
Margaret S. Bottcher	CPNP
Sherri Lynn Carcich	CPON
Susan M. Carson	CPNP
Shanna Christoffersen	CPON
Kei Yun Chung	CPN
Desirae Lehman Clark	CPN
Christina Izumi Cruso	CPN
Dorothy Cuason	CCRN
Melissa Parra Doyle	CPNP
Anna Christine Evans	CPNP, CPHON
Cassie Dawn Garretson	CPN
Jonelle Beth Gray	CPNP, CPHON
Deborah G. Harris	CPNP-PC/AC
Nancy S. Hart	CPON
Dee Imai	CPON
Vartan Kevork Khemo	CCRN
Maria-Theresa Lapinid	CCRN
Lisa K. Lee	CCRN, CPNP-PC
Vivian LeSassier	CPNP
Wendy Seto Leung	CPNP
Kellie A. Loera	CPON
Deborah Marino	CPON
Patricia A. McMahon Peterson	CPNP
Meghan T. Meehan	CPON
Mary Baron Nelson	CPNP
Maki Okada	CPNP, CPON
Eliza Swanson Pedroja	CPHON
Lindsay Marie Quirk	CPNP
Kasey Rangan	CPNP

Susan L. Rhoads	CPN, CHES, CLE
Patricia Rios	CPON
Yael L. Rosenthal	CPNP
Gina Marie Santangelo	CPNP, CPON
Laura J. Vasquez	CPON
Tanea Dwan Washington	CPNP, CPHON
Jami Vander Wielen	CPNP
Kathryn J. Wilson	CPN

## Hematology-Oncology Clinical Research

Scarlett Vasiliki Czarnecki	CPHON, CCRP
Jennifer Lee Harrington	CPNP-PC/AC
Renna G. Killen	CCRP
Felicia N. Romagnoli	CPON

## HOPE Center

Kathleen Ruccione	CPN
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## House Supervisor

Deann E. Dover	CPN
Jeanette M. Goggins	CPN
Katherine M. Meyer	CPNP-PC/AC
Jenese Morris-Rubottom	CPN
Nancy Cleghorn O’Gorman	CPN
Desiree D. Ritter	CPN, PHN

## Human Resources

Stephanie J. Brady	CPN, CHCR
Andree R. Mulia	CHCR

## Human Subjects Protection Program

Rebecca Dahl	CIP
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## Infection Control

Mary Virgallito	CIC
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## Institute for Maternal-Fetal Health

Ancy Abraham	NNP-BC
Wendy Leigh Adams	NNP-BC
Jennifer Buchanan	IBCLC
Pamela Lynn Costa	NNP-BC, RNC-NIC
Sandra Luz Espinosa	NNP-BC, RNC-NIC
Bonnie Solim Lee	NNP-BC, RNC-NIC
Tiffany Lynne McGuire	NNP-BC

## Kidney Transplant

Gwen (Green) Brown	CNP
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## Knowledge, Information and Decision Support (KIDS) – Clinical Informatics

Shirley C. Hammers	CPN
William C. Kenny	CPN
Patricia A. Tejada	CPN

## Las Madrinas Simulation Lab

Caulette Young	CCRN
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## Nephrology – Clinical

Alicia N. (Sanchez) Bertulfo-Sanchez	CPHON
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## Newborn and Infant Critical Care Unit

Sonja Ann Alli-Casella	RNC-NIC
Haley Alexis Barickman	RNC-NIC
Susan V. Bugsch	RNC-NIC
Judith Crews	RNC-NIC
Nicole C. Ainsworth	RNC-NIC
Suzanne Y. Cuano	RNC-NIC
Beverly S. Drummond	RNC-NIC
Marta A. Dubon	RNC-NIC
Margaret Ann Espinoza	RNC-NIC
Sharon Fichera	NNP-BC
Donna Jean Flores	RNC-NIC
Judith Foote-Merryman	RNC-NIC
Jacquelyn Marie Gayer	RNC-NIC
Robert Fred Giesler	RNC-NIC
Anne B. Gleeson	RNC-NIC
Dolores M. Greenwood	RNC-NIC
Audrey Rose (Arndt) Jamora	RNC-NIC
Laura A. Klee	RNC-NIC
Jennifer Wing-Yee Leong	RNC-NIC
Michelle Costabile Machado	CCRN
Nancy Julie McNeill	CPNP, RNC-NIC
Maxine Orijei Ogbaa	RNC-NIC
Lorie J. Pagado	RNC-NIC
Valerie Lynn Phillips	RNC-NIC
Amy Leigh (Griffey) Ralston	RNC-NIC
Diane E. Real	RNC-NIC
Michael Franklin Rokovich	RNC-NIC
Lisa Marie Rosik	RNC-NIC
Sally Ruth Scharg	RNC-NIC
Elizabeth Bothwell Schaub	RNC-NIC
Suet Ching Sham	RNC-NIC
Paige Elizabeth Smith	RNC-NIC
Patricia Lopez Villanueva	RNC-NIC
Baro Whang	CCRN
Elsa M. Yedinak	RNC-NIC

## Operating Room

Katharina Becker	CNOR
Norma M. Corona	CNOR
Erin Terrell Crawford	CPN
Melinda R. Dizon	CNOR
Verzhine Fodolyan	CNOR
Paula E. Guzman	CNOR
Angela M. Hartley	CNOR
Angel Holzschuh	CNOR
Meredith Renee Johnson	CNOR
Jingdong (Kenny) Kou	CNOR
Rodrigo S. Lopez	CNOR
Renee A. Lucci	CNOR
Andrea Carole McMonigal	CNOR
Jessica Belle Reyes	CNOR
Florence E. Rivera	CNOR
Nur S. Abdullah Saldivar	CNOR
Adriana Savadjan-Smith	CNOR
Cheryl Michelle Smith	CNOR

## Ophthalmology

Kathleen J. Anulao	FNP-BC, CPN
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## Orthopaedics

Jennifer Mae Antin	CPN
Elaine Butterworth	CPN
Phyllis J. Dambra	CIP
Ann M. Wakulich	ONC

## Pain Management Team

Susan Marie Hunt	CPNP-PC
Deborah L. Jury	CPNP-AC, CNS
Meghan Sullivan Middleton	CPNP-PC/AC, CNS-BC

## Patient Care Services Float Pool and IV Team

Kimberley De La Cruz Bacus	CPN
Terrie T. Ballard	CPN
Joann Barreras	CPN
Ana Borde	CPN
Sharon Elizabeth Burdick	CCRN
Dolores A. Buslon	CPN
Maria Angelica Castro	CPN
Monica Ciccarelli	CPN
Paul A. Ciriacks	CPN
Emma A. Clark	CPN
George Dennis Cruso	CPN
Kylan Mario Dhembi	CPN
Jessica Lawson Garcia	CPN

Monique Rene Gateley	CPN
Lynne Charlotte Harris	CPNP
Kerri Michele York Hunter	CPN
Kathy Kelly	CPN
Ruth Ellen Klinsky	CPN
Rebecca Rose Kvamme	CPN
Linda S. Loiselle	CPN
Gayle C. Luker	CPN
Mary Ann Macaspac	CPHON
Jeanne M. Marshall	CPN
Christopher L. May	CPN
Erin Rachel Messing	CPN
Sara Marie Moore	CPN
Patricia Mueller	CPN
Christina Anne Ng-Watson	CPN
Amy Marlene Omuse	CPN
Kimberly Pandora Hodge	CPN
Joan Marie Flom Pritchard	CPN
Christine Leigh Reardon	CPN
Velma Leon Guerrero Reyes	CPN
Corina Rico	CPN
Vanessa Rios	CPN
Karen Denise Rivas	CPN
Jocelyn Robinson	CPN
Martha Samuel	CPN
Melissa Jeannette Simpson	CPN
Joannie A. Stoker	CPN, CCRN
Megan Marie Summers	CPN, CCRN
Chrystal (Light) Uy	CPN
Du Thanh Vo	CPN

## Pediatric Intensive Care Unit

Meredith Anne Blackburn	CCRN
Frances Blayney	RN-BC, CCRN
Alejandra Briseno	CCRN
Agnes E. Bundac	CCRN
Steve L. Calver	CCRN
Sherry Cauley	CCRN
Susan Crandall	CCRN
Rebecca Carey (Perez) Douglas	CPN
Victoria Joanne Duncombe	CCRN
Heather Noel Favret	CCRN
Katherine Anne Fernandez	CCRN
Jonathan Taylor Foley	CCRN
Corey Fritz	CPNP-PC/AC
Emily Fu	CPN
Kari Leeann Gleason	CCRN
Jennifer M. Huson	CPNP
Megan H. Javidi	CCRN

Krichelle Ann Larson	CCRN
Nancy Lavoie	CCRN
Sandra Lee	CCRN
Teresa L. Loera	NE-BC
Louis M. Luminarias III	CCRN
Mary Evelyn McCulley	PPCNP-BC, CPNP-AC
Monica Lee Nuss	CCRN
Fatima B. Padron	CCRN
Diana Chao Ting Poon	CCRN
Christopher A. Price	CCRN
Hui-Wen Sato	CCRN
David Schmidt	CPNP, CCRN
Tabitha Maria Schwartz	CCRN
Kieran Meltvedt Shamash	CCRN
Suzette Dee Sweeney	CCRN
Linda A. Topper	CCRN
Amina Ruth Naef Winter	CPN
Karen Noleen Young	CCRN
Colleene Young	CCRN

### Pediatric Surgery

Linda Camacho	CPNP
Beth A. Harrison	CWOCN
Donna E. Nowicki	CPNP
Andrea Lynne Parker	CPNP
Teresa Lynn Renteria	CWOCN

### Perioperative Services

Nancy Bridges	CNOR
Dawna Lee Willsey	CNOR

### Plastic Surgery/Craniofacial

Amy Dawn Goodier	CPNP
Karla Aurine Haynes	CPNP
Chi Kim Phan	CPNP

### Post-Anesthesia Care Unit

Cynthia K. Burrola	CPN
Allan J. Cresencia	CPN
Mary Ellen Farr	CPN/CCRN
Melanie K. Forne	CPN
Erin L. Lowerhouse	CPN
Marvin B. Mangahis	CPN

### Pulmonary

Sheila Siu Ho Kwok Kun	CPN
Jennifer Leigh Murray	CPNP

### Quality Improvement and Safety Services

Rhonda Sue Filipp	CPN
Nicole Catherine Que	CCRN
Dave Tan	HACP

### Radiology Nursing

Margo W. Coon	CPNP
Constance C. Gallardo	CFNP
Vanessa L. Guerrero	CPN
Martha A. Jarquin	CPN
Denna S. Jung	CPNP-PC/AC
Julie A. Makin	CPN
Susanne M. Matich	CPNP-PC/AC
Claudia M. McCollum	CPN
Marilyn Mills	CRN, RN-BC
Laurie F. Newton	CPN
Ginny Than	CFNP
Veronica Wallace	CPN
Holly Hurley Marie West	CPN

### Risk Management

Karen Prommer	CPHRM
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### Versant™ RN Residency

Jessica Lauren Klaristenfeld	RN-BC
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### Surgical Admitting

Jocelyn Andrea Ablian	CPNP
Leticia R. Boutros	CPNP
Natalie D. Cheffer	CPNP
Beatrice L. Chun	CPNP
Debbie L. Hand	CPN
Yvonne J. Olive	FNP-BC
Stefanie Ann Proia	CPNP
Debra A. Rannalli	CPNP
Patricia Ann Rodriguez	CPNP

### Trauma Services

Elizabeth Ann Cleek	CPNP
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### Urology

Nicole Jennifer Freedman	CPNP
Valerie Jean Gordon	CGRN

**Total Number of  
Certified Nurses:**

551



*Andrea Alaniz, RN, RNII in the NICCU, cares for a patient.*

## Advanced Degrees

Children's Hospital Los Angeles is committed to encouraging its nurses to pursue their professional development by advancing their education and obtaining certifications. We actively promote and communicate opportunities for professional growth, and nurse leaders allow flexible scheduling to accommodate a balance of work, school and home life. The hospital offers financial support for education and informs nurses of opportunities at local and online colleges and universities.

The hospital offers:

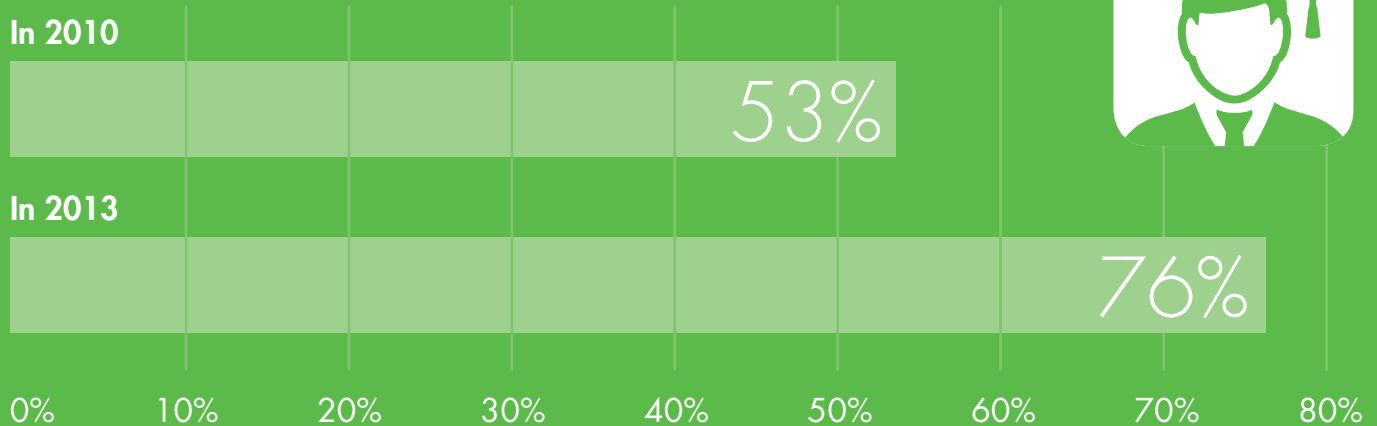
- A tuition assistance program
- An RN to BSN tuition reimbursement program
- Reimbursement programs for graduate students
- The John E. Anderson Endowment for Scholarships in Nursing—a tuition reimbursement program for master's and doctorate degrees
- College and university information sessions from more than five different organizations
- Partnerships with several schools and programs that offer tuition discounts to our employees
- An Academic Advancement Opportunities portal on the hospital's intranet site

### New Advanced Degrees in 2012-2013:

#### Bachelor's Degree (BSN)

Leticia Avram, RN, (5 West)  
Jennifer Baldwin, RN, (Cardiovascular Acute)  
Julie Bernard, RN,  
(Newborn and Infant Critical Care Unit)  
Leah Carrillo, RN, (6 West)  
Maria Castro, RN, (Nursing Resources)  
Beth Clark, RN, (Emergency)  
Tom Cottrell, RN, (Emergency)  
Stephanie Gill, RN, (5 East)  
Elizabeth Gutierrez, RN, (5 East)  
Martha Jarquin, RN, (Radiology)  
Linda Kelso, RN, (Radiology)  
Jolene Knapp, RN, (5 East)  
Christina Lai, RN, (5 East)  
Cindy Lee, RN, (6 West)  
Megan Mara, RN, (5 East)  
Ugo Ndubaku, RN, (5 East)  
Laurie Newton, RN, (Radiology)  
Marcia Massey Norfleet, RN,  
(Cardiovascular Acute)

## Nurses with a BSN degree or higher



Amanda Price, RN, (6 North)  
 Marina Ramirez, RN,  
 (Cardiothoracic Intensive Care Unit)  
 Viktorya Roytman, RN, (5 East)  
 Laura Schneider, RN, (5 East)  
 Paige Smith, RN,  
 (Newborn and Infant Critical Care Unit)  
 Melissa Stewart, RN, (4 West)  
 Johanna Stoakes, RN, (5 East)  
 Adriana Torres, RN, (CV Acute)  
 Stefanie Valenzuela, RN, (Emergency Department)  
 Gloria Verret, RN, (6 North)  
 Cindy Viduya, RN, (Float Team)  
 Tina Yoshimura, RN,  
 (Newborn and Infant Critical Care Unit)

### Master's Degree (MSN)

Sarah Brodhead, RN, (5 East)  
 Dixie Chelew, RN, (6 West)  
 Judy Demello, RN, (Emergency)  
 Heidi Geary, FNP, (Pediatric Intensive Care Unit)  
 Will Jackson, RN, (6 West)  
 Gwendolyn Kimball, RN,  
 (Bone Marrow Transplant/4 West)  
 Jessica Klaristenfeld, RN,  
 (Versant RN Residency Program)  
 Jennifer Meyers, RN, (Emergency Transport)  
 Michelle Pride, RN, (Pediatric Intensive Care Unit)

### Doctoral Degree (PhD)

Nancy Blake, RN, (Critical Care Services)  
 Mary Baron Nelson, RN, (Radiology)  
 Kathy Ruccione, RN, (HOPE Program)



*Nancy Blake, RN, received her doctorate in critical care services.*



## Nurses with an MSN degree or higher

In 2010

11%

In 2013

14%

0% 2% 4% 6% 8% 10% 12% 14% 16%



## Morris and Mary Press Humanism Awards

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The top honors for employees at Children's Hospital Los Angeles are the annual Morris and Mary Press Humanism Awards, which recognize individuals and a department or work group who have gone beyond their daily job expectations and consistently demonstrate compassion, caring and excellent communication with patients, families and team members.

The 2012 Nursing winner was **Kathleen McIntyre, RN**, of the Cardiothoracic Intensive Care Unit.  
The 2013 Nursing winner was **Irene Klecha, RN**, of the Institute for Maternal-Fetal Health.

The dedication, service, knowledge and thoughtfulness of our Humanism Award winners help make Children's Hospital Los Angeles stand above the rest.

## Children's Hospital Nurse Leaders Receive the Mary Rose Castleforte Leadership Award

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*Kay Gilmore (bottom row, middle)*

The following CHLA nurse leaders were recognized with the Mary Rose Castleforte Leadership Award in 2012 and 2013:

**Kay Gilmore, RN**, operations manager of Cardiovascular Acute Unit – October 2012

**Desiree Ritter, RN**, manager of nursing resources and Duque 5 West Unit – October 2013

Each year on National Bosses Day, the award is presented to a nurse manager in recognition of his or her daily dedication to co-workers, Children's Hospital's values, and our patients and families. The winners are selected from a pool of nominees provided by nurses and managers' direct reports.



*Desiree Ritter (middle)*

Named after former Children's Hospital Los Angeles Nurse Manager Mary Rose Castleforte, the award was established by her niece, Caroline Castleforte, MD, who completed her pediatric residency at Children's Hospital. Looking for a way to recognize her aunt's contribution to pediatric medicine and to her own career, Caroline worked with Mary Dee Hacker, MBA, RN, NEA-BC, FAAN, chief nursing officer of Children's Hospital, to create the award as a way to celebrate nurse managers every year.

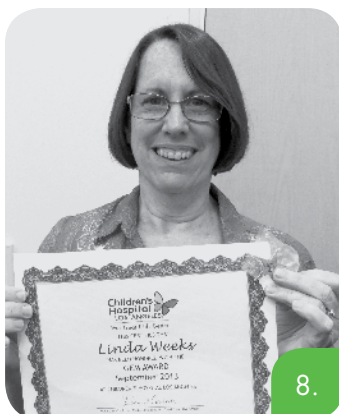


## The GEM Award

The GEM (Going the Extra Mile) Award recognizes individuals, including nurses, who exemplify the values of Children's Hospital Los Angeles:

- We achieve our best together.
- We are hopeful and compassionate.
- We are learners leading transformation.
- We are stewards of the lives and resources entrusted to us.
- We serve with great care.

These are the values that make Children's Hospital one of the top hospitals in the nation. A number of our nurses were honored with the GEM award in 2012 and 2013:



### 1. **Armstrong Hao, RN**

*January 2012*

### 2. **Victoria Winter, RN**

*March 2012*

### 3. **Lori Chan, RN**

*April 2012*

### 4. **Tanisha Kipling, RN**

*August 2012*

### 5. **Dawn Landery, RN**

*December 2012*

### 6. **Yolanda Amador, RN**

*January 2013*

### 7. **Mary Grossman, RN**

*April 2013*

### 8. **Linda Weeks, RN**

*September 2013*

### 9. **Sheila Anulao, RN**

*November 2013*

# DAISY Awards 2012-2013

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The DAISY Awards, which recognize nurses who exemplify excellence in patient care, have become a celebrated tradition at Children's Hospital Los Angeles.

Bonnie and J. Mark Barnes founded the DAISY (Diseases Attacking the Immune System) Foundation in memory of their son, J. Patrick Barnes, who died of complications from an autoimmune disease (idiopathic thrombocytopenic purpura) at age 33. In tribute to and appreciation of the nurses who cared for their son, they established the DAISY Foundation to honor nurses who positively impact the lives of their ill patients and coping families.

Children's Hospital is one of more than 50 hospitals in the United States to partner with the DAISY Foundation. Recipients of the DAISY Award receive a certificate, a DAISY pin, Cinnabon™ cinnamon rolls and a unique, hand-carved stone statue called "The Healer's Touch," created by artisans in Zimbabwe.

## 2012

*January* 1. Nida Oriza, BSN, RN

*February* 2. Meghan Middleton,  
MSN, RN, CPNP-PC/AC, CNS

*March* 3. Chris Lins, ADN, RN, MAEd

*April* 4. Bobby Hett, BSN, RN

*May* 5. Yvonne Hughes-Ganzon,  
BSN, RN, CCRN, CPN

*June* 6. Kat Ramos, BSN, RN

*July* 7. Vanessa Guerrero, BSN, RN, CPN

*August* 8. Virginia "Gee" Culla, BSN, RN, CCRN

*September* 9. Eileen Schmidt, BSN, RN

*October* 10. Dannielle Eramia, BSN, RN, CPHON

*November* 11. Meghan Meehan,  
MSN, RN, CPON, VA-BC

*December* 12. Ramon Tapia, ADN, RN

## 2013

*January* 13. Julita "Lita" Reyes, BSN, RN, CPN

*February* 14. Grace Ruiz, BSN, RN, CPN

*March* 15. Tanisha Kipling, BSN, RN

*April* 16. Inge Morton, BSN, RN, CPN

*May* 17. Dawn Landery, ADN, RN, CPON

*June* 18. Julie Fiore, BSN, RN, CPN

*July* 19. Brandi Bowen, ADN, BS, RN

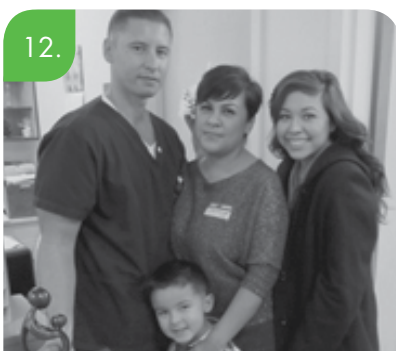
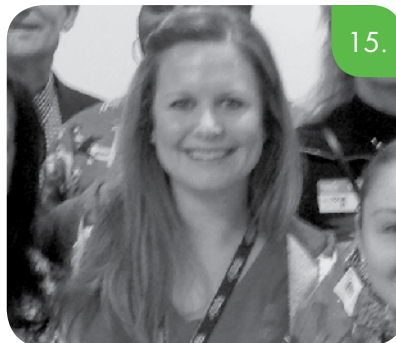
*August* 20. Gigi Giesler, MSN, RN

*September* 21. Maxine Ogbaa, BSN, RN, RNC-NIC

*October* 22. Geraldine (Jeri) Fonacier, BSN, RN

*November* 23. Nancy Hart, MSN, RN, CPON

*December* 24. Anthony Opimo, BSN, RN, CPHON



# Children's Hospital Nurses Inducted Into American Academy of Nursing

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Three Children's Hospital Los Angeles nurses—**Nancy Blake, PhD, RN**; **Rita Secola, PhD, RN, CPON**; and **Nancy Pike, PhD, RN, CPNP-AC, FAHA**—were inducted into the American Academy of Nursing at the academy's annual meeting Oct. 19, 2013, in Washington, D.C.

Their induction represents the highest honor an individual nurse can receive for excellence and advancing the profession of nursing.

"I am beyond excited to learn of their acceptance. Please join me in congratulating them. This is an incredible honor for them and for all of us," says

Mary Dee Hacker, MBA, RN, NEA-BC, FAAN, vice president of Patient Care Services and chief nursing officer at Children's Hospital.

To be considered, Blake, Secola and Pike were each required to submit a professional portfolio of documents, including letters of sponsorship from members of the academy, which they received from Hacker. Their doctorate work at the University of California, Los Angeles, was significant in the evaluation of their applications. A team of three academy fellows reviews and scores each application. The team then presents the candidates to the membership committee for selection.

## The Hospital Hero Award

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The Hospital Hero Award, a project of the National Health Foundation, is awarded annually and honors dedicated health care professionals who help to create miracles for their patients. It is an opportunity for member hospitals of the Hospital Association of Southern California to recognize the outstanding achievements and remarkable events that occur on the "front lines" of health care throughout the Southern California region. Hospital Hero Award winners are selected based on a hospital's own unique mission and values.

Children's Hospital Los Angeles Hospital Hero awardees:



**Kelli Anderson, RN, 2012** *(left)*



**Fran Blayney, RN, 2013** *(right)*



American Academy of Nursing Celebration  
*Nancy Pike (left), Nancy Blake, Mary Dee Hacker and Rita Secola*

## Congratulations to Our Nominees for the 2012 Nursing Excellence Awards!



### Patient and Staff Management

**Phan Dang**, RN, BSN, Education Manager, Acute Rehabilitation Unit

**Rachel Guzman**, RN, Operations Manager, Medical Services

### Volunteerism and Service

**Jennifer Huson**, MSN, CPNP, CNS, Pediatric Nurse Practitioner, Pediatric Intensive Care Unit

### Home, Community and Ambulatory Care

**Sheila Kun**, RN, BSN, BA, MS, CPN, Nurse Care Manager, Pediatric Pulmonology

### Education and Mentorship

**Inge Morton**, RN, BSN, CPN, Education/Clinical Manager, Emergency Department

*Children's Hospital's nominees with Mary Dee Hacker, MBA, RN, NEA-BC, FAAN, vice president of Patient Care Services and chief nursing officer (third from right)*

## Congratulations to Our Nominees for the 2013 Nursing Excellence Awards!

### HOME, COMMUNITY AND AMBULATORY CARE



**Sandra Mintz, RN, BSN,  
Nurse Care Manager**



**Christina Izumi Cruso,  
RN, BSN, CPON, RN III**

### CLINICAL NURSING, INPATIENT



**Geri Gregorczyk,  
RN, BSN, RN III**

## Celebrating Our Nurse.com Nursing Excellence Awards Nominees

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Nurse.com's National Nursing Excellence Awards honor superior nurses in regions across the country. In 2013, three nurses from Children's Hospital Los Angeles were named as regional finalists:

- **Christina Cruso, RN**, (Hematology-Oncology) – Home, Community and Ambulatory Care
- **Sandra Mintz, RN**, (Rheumatology) – Home, Community and Ambulatory Care
- **Geri Gregoroczky, RN**, (Transport) – Clinical Nursing, Inpatient

They were among 30 California nurses who were honored for excellence at a gala celebration Aug. 23, 2013. At the gala, six nurses were named winners and went on to compete for National Nurses of the Year. Five CHLA nurses were state finalists for the 2012 awards:

- **Jennifer Huson, MSN, PNP**, (Critical Care Services) – Volunteerism and Service
- **Rachel Guzman, RN**, (Duque 5 West) – Patient and Staff Management
- **Phan Dang, RN**, (Rehabilitation Unit) – Patient and Staff Management
- **Sheila Kun, RN, BSN, MS**, (Pulmonology) – Home, Community and Ambulatory Care
- **Inge Morton, RN, CPN**, (Critical Care Services) – Education and Mentorship

**Phan Dang, RN, won the honor in the Patient and Staff Management category for 2012.**

Children's Hospital Los Angeles leaders shared their praise and congratulations:

*"As the chief nursing officer at Children's Hospital, I am honored to work with these outstanding nurses. I am also very proud to work at a hospital where so many nurses nominated nurse colleagues for these very special awards."*

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

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*"Congratulations to all! I'm so proud!"*

—Richard D. Cordova, FACHE, President and CEO

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*"This is great news, and having spent time with some of our Trustees today, they clearly acknowledge and appreciate the unsurpassed work done by our staff. Congratulations!"*

—James Stein, MD, FACS, FAAP,  
Associate Chief of Surgery, Chief Quality Officer

## Jennifer Huson Receives Cherokee Inspired Comfort Award

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Jennifer Huson, MSN, PNP, CNS, was named the 2011 winner of the national Cherokee Inspired Comfort Award. A nurse practitioner in the Pediatric Intensive Care Unit at Children's Hospital Los Angeles, Huson was honored for the award during Nurse Week in 2012. She was nominated by colleague Christina Cruso, RN, in Hematology-Oncology.

For the past 11 years, Huson has volunteered at Camp Dream Street in Southern California, which offers a number of free sleep-away summer camps for children and young adults with life-threatening and chronic illnesses. Huson, who has been the nursing director for Dream Street's Young Adult Program since 2005 and for the Kids Camp since 2007, says she is "inspired by children overcoming obstacles, like amputees climbing rock walls, seeing them share common medical challenges and relating to each other." Children's Hospital patients make up about one-third of the campers.



"Working in the Pediatric Intensive Care Unit, I see patients at their worst, so it's really important for me to see them having fun and know they have a life outside the hospital," says Huson.

The Cherokee Inspired Comfort Award is granted by Cherokee Uniforms as a way of recognizing the caring and highly competent work of nurses and other non-physician health care professionals who exhibit exceptional service, sacrifice and innovation while positively impacting the lives of others. Since the Cherokee Inspired Comfort Award was established in 2003, nearly 9,900 health care professionals have been nominated. A panel of Cherokee representatives and past Cherokee Inspired Comfort Award recipients evaluates nominations and chooses the honorees.

## Kathy Stevenson, BSN, RN, Featured in Working Nurse Magazine

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Kathy Stevenson, BSN, RN, was recently acknowledged with a feature in Working Nurse magazine. Stevenson received a framed copy of the article, "Disaster Response Nursing," which was published in the magazine's September/October issue. In the article, Kathy talks about preparing people and facilities for large-scale emergency events.

Stevenson, Kathy, BSN, RN, Disaster Response Nursing, Working Nurse Magazine, September/October 2013, pgs 14-17

# UCLA School of Nursing Honors Children's Hospital with Community Health Leadership Award

Children's Hospital Los Angeles was honored with the Community Health Leadership Award at the third annual Nurse 21 awards at the University of California, Los Angeles (UCLA) School of Nursing, in recognition of more than 112 years of providing care for patients in 47 nations across six continents. The award was presented on May 9, 2013, at the Montage Hotel in Beverly Hills.

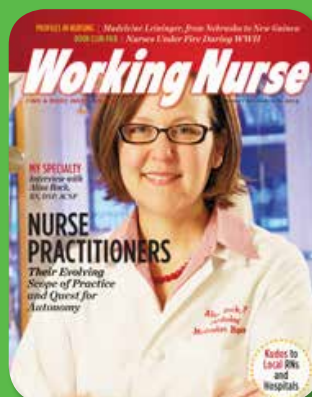
"These incredible individuals and organizations that we honor are visionary leaders in health care and are strong advocates for the role of nursing," says Courtney H. Lyder, dean of the UCLA School of Nursing. "Their impact has been enormous and will continue to be so as nurses play an increasingly important role in making sure that all individuals have access to quality care delivered with compassion and dignity."



*Olga Taylor (left), Gail Margolis, Esq., Rolando Gomez and Ellen Zaman*

## Daily Rundown

On May 9, 2013, "The Daily Rundown" on MSNBC aired a clip of nurses at Children's Hospital Los Angeles celebrating Nurses Week. The show is anchored by NBC News White House Correspondent Chuck Todd.



*Kathy Stevenson, BSN, RN, was published in Working Nurse magazine.*

## Cardiothoracic Intensive Care Unit Receives 'Gold' Beacon Award

In September 2013, the Cardiothoracic Intensive Care Unit (CTICU) in the Heart Institute at Children's Hospital Los Angeles was awarded the prestigious "Gold" Beacon Award from the American Association of Critical Care Nurses. A special ceremony was held Nov. 4, 2013, to hang the plaque and commemorate the honor.

According to the American Association of Critical Care Nurses website, "The Beacon Award for Excellence lauds North American hospital units that employ evidence-based practices to improve patient and family outcomes. Recipients of a Gold Beacon Award

demonstrate excellence in sustained unit performance and patient outcomes."

Only five other pediatric cardiac ICUs in the U.S. have earned a Beacon Award—and only three of those units have received a Gold, notes Barbara Gross, RN, MSN, NEA-BC, director of the Heart Institute.

"The managers and I would like to thank the staff for all they do every day. I cannot tell you how proud I am. This is an achievement of excellence," Gross says. "Each and every one has contributed to this, and it is because of you that we have been awarded the Gold."



*Mary Dee Hacker, MBA, RN, NEA-BC, FAAN (left) and Sylvia Del Castillo, MD (right), with members of the Beacon Award application writing team.*

### The writing team that completed the award application included:

Barbara Gross, RN, MSN, NEA-BC  
Melanie Guerrero, RN, MSN  
Florida Imperial-Perez, RN, MSN, CNS  
Nida Oriza, RN, BSN  
David Romberger, RN, BSN  
Victoria Winter, RN, MSN, CNS, CCRN (Pediatrics), CCRN (Neonatal)  
Beth Zemetra, RN, BSN

# The Emergency Department Recognized With Lantern Award

The Children's Hospital Los Angeles Emergency Department and Level 1 Pediatric Trauma Center received the Emergency Nurses Association (ENA) 2013 Lantern Award.

This recognition is given to emergency departments that exemplify exceptional practice and innovative performance in the core areas of leadership, practice, education, advocacy and research. The award is a visible symbol of an emergency department's commitment to quality, a healthy work environment and accomplishment in incorporating evidence-based practice and innovation into emergency care. There were 38 applications submitted for the 2013 Lantern Award, and the CHLA Emergency Department was one of nine that met the award criteria.

The application, which includes exemplars and quality data, was completed by a writing team that included emergency department nurses, physicians, pharmacists and our interprofessional colleagues from the Trauma Program, Employee Health, Disaster Preparedness,

Social Work, Decision Support Services and the Employee Assistance Program. A formal awards gala to honor ENA award winners, including Lantern Award recipients, was held at the ENA Annual Conference in Nashville, Tenn., on Sept. 21, 2013.

This is a well-deserved acknowledgement of the Emergency Department team. Children's Hospital Los Angeles cares for the sickest and most critically injured children and adolescents in our community. Our Lantern application demonstrated the strength of our nursing professionalism and interprofessional collaboration. We achieve our best together to provide the highest-quality research- and evidence-based pediatric emergency care.



*Emergency Department staff were honored with the 2013 Lantern Award from the Emergency Nurses Association.*

## The writing team included:

### Project Managers

Susan Cline, RN, Education Manager  
Inge Morton, RN, Clinical Manager

Brian Burns, RN, BSN  
Anabel Costa, RN, BSN, CPN, CPEN  
Robin Goodman, RN, MSN, CPEN  
Phaedra Nguyen, RN, CPEN  
Sharon Noonan, RN, BSN, CPEN  
Natasha Monteith, RN, BSN, CPN  
Nicole Sheppard, RN, BSN, CPEN  
Amanda Silver, RN, BSN, CPN  
Gina Terrazzino, RN, BSN, CPN  
Stephanie Watchler, RN, BSN, CPN  
Ashton Wengrenowitz, RN, BSN

Bridget Berg, MPH  
Danica Lieberman, MD  
Alan Hermanson, MSN, FNPACP  
Sandy Himmelrich, MSW  
Armine Khachatryan, PharmD  
Karine Kent, PharmD  
William Luiz  
Beth Maldonado, LCSW  
Ameer Mody, MD  
Kathleen Stevenson, RN, MSN

# Cardiovascular Acute Unit Is a Top Nursing Team in the Nation

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*The Cardiovascular Acute Unit at Children's Hospital Los Angeles was recently selected by the monthly trade magazine ADVANCE for Nurses as a 2013 National Best Nursing Team. The team was recognized for its efforts in going above and beyond in using the Transformation of Care at the Bedside process to better deliver information about patients' plans of care.*

*The judging criteria were based on the team's adaptability, expertise, outreach and initiative. The award originated from an entry submitted by **Melanie Guerrero, RN, MSN**, clinical manager of the unit. Below is her essay.*

## **Cardiovascular Acute Unit at Children's Hospital Los Angeles uses the Transformation of Care at the Bedside process to better deliver information about patients' plans of care**

Advances in the nursing profession are achieved by creating evidence-based initiatives and innovations that improve the quality of patient care. In July 2011, a move into a brand-new inpatient facility permitted our hospital to create a new Cardiovascular Acute (CV) Unit, which did not previously exist. The new nursing team quickly identified a desire to improve the fragmented delivery of information about the patient's daily plan of care. To do so, a group of nurses in this unit created a structured model called "Clinical Bedside Rounding at 8" using the Transformation of Care at the Bedside process.

In this particular organization, daily bedside rounding has been used in critical care settings. However, what made this process so special was that it was the first successful implementation in a medical-surgical nursing unit, where the nurse presented to the medical team regarding the patient's overnight status, discharge barriers and other patient issues, which then generated a plan of care. Historic challenges to rounding included resistance to change from all disciplines, as well as time limitations hindering effective collaboration on each



*Cardiovascular Acute Unit Team*

patient. However, through dedicated nursing leadership and teamwork, specific initiatives were developed to overcome these barriers through the following measures:

- Clear expectations were set to promote the idea that rounding would occur and needed to be a priority. In addition, the team's drive to round successfully for five to 10 minutes per patient was pertinent.
- Unit leaders carefully listened to staff and shared immediate feedback to ascertain issues and address them promptly. This was done by actively soliciting feedback from staff through one-on-one outcomes rounding, as well as through group communication opportunities. Over time, this continuous feedback loop promoted ongoing problem-solving and progressive improvements in the rounding process.
- Nurse resource support was shifted geographically to begin rounding at the same nurses' stations each morning. This helped nurses administer medications and maintain unit workflow. It also supported them in maintaining a positive and flexible attitude through a continually evolving process.

In May 2012, less than a year after the move to the new facility, nurses led the following implementations:

- Step 1 – A two-sided green daily report sheet was created and launched. Night-shift nurses complete the front page with the patient’s overnight status (e.g., vital signs, fluid balance, abnormal assessments or lab values, barriers to discharge, feeding regimens and parent concerns). Day-shift nurses use the front of the green sheet to present the patient. The back of the sheet is then used to record the plan of care that the medical team has created for the day. The day-shift nurse restates the plan to ensure understanding and provides the opportunity for the family to ask questions.
- Step 2 – Key rounding team participants were identified, including the attending physician or primary nurse practitioner, bedside nurse, cardiologist and family member/caregiver; a rounding schedule was also coordinated.
- Step 3 – After staff education was given, rounds were implemented.
- Step 4 – Workflow challenges (e.g., interference with patient care, given that RNs need to give 8 a.m. meds and perform head-to-toe assessments) were identified and resolved.
- Step 5 – Signage was developed and placed at the patient’s room door to indicate whether parents wished to participate in bedside rounding each day.

The implementation was not without its challenges, which the nursing team proactively addressed, leveraging the teamwork of the unit’s members to develop creative solutions. The main challenges were workflow interruption for 15 to 20 minutes per patient, and having the bedside nurse ready to present versus giving medications or providing direct patient care at 8 a.m. However, through weekly updates and education, nurses were able to schedule their morning workflow around patient care. Efficiencies have been gained so that rounding times now average between five and 10 minutes per patient.

Since the implementation of “Clinical Bedside Rounding at 8” in May 2012, improvements have been seen in nursing satisfaction scores, family satisfaction, discharge planning and care coordination. Nurses have noted increased understanding of the patient’s

overall daily plan of care and treatment goals. Confusion from parents has decreased and fewer phone calls have been required between nurses, nurse practitioners and doctors to verify the plan of care.

Nurses also noted that this process has allowed them to identify patients needing acute interventions earlier in the shift. More importantly, the unit’s quarterly patient satisfaction scores related to nurse communication with patients and families (as measured by a third-party vendor survey mechanism) jumped 72 percent to a nearly perfect score: from 56.9 in July-September 2011 to 98.1 for April-June 2012.

In addition, parents’ ability to ask questions or make suggestions based on their observations of their child’s health has increased. One parent stated: “I feel I know what is happening with my child and that everyone is on the same page.” Second, having the bedside nurse, physician, nurse practitioner and family at the bedside provided “on-the-spot education” for both the nurses and families by the physician or nurse practitioner. Third, discharge planning improvements resulted from identifying discharge barriers for parents and caregivers (e.g., translation, medication or dietary instruction and equipment usage education) earlier in the day. With earlier identification, nurses were able to address these issues more efficiently.

Since its implementation in May 2012, the process continues to evolve on a daily basis through the teamwork approach of the nurses on the unit. Future steps include recruiting additional disciplines (such as the dietitian/nutritionist, clinical care coordinator, social worker and a spiritual care representative) to take part in rounding. The Cardiovascular Acute Unit nurses will be looking for other medical-surgical units in the organization that would benefit and will partner with them to implement this process in order to improve the quality and safety of other patient experiences. The innovation of this team has truly transformed care on this unit, which has created a culture of change for the nurses and families in the CV Acute Unit and beyond.



## Lectures

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**Sandra Watcher, RN**, presented "Rheumatic Disease in Children" for the University of California, Los Angeles (UCLA) Nurse Practitioner program in February 2012.

**Meghan Middleton, RN**, lectured on "Pain Assessment and Management" at the UCLA School of Nursing in February 2012.

**Nancy Blake, RN**, presented a lecture, "Roles of the Professional Nurse," to UCLA Master of Science in Nursing students in January 2012.

**Colleene Young, RN**, presented "Thar She Blows! Intra-Abdominal Hypertension and Intra-Abdominal Compartment Syndrome" and "Being Beacon: How to Write and Maintain it. Being the First PICU Awarded Beacon of Excellence in 2011" at the American Association of Critical Care Nurses' National Teaching Institute and Critical Care Exposition in Orlando, Fla., in May 2012.

**Brenda Barnum, RN**, co-presented a breakout session, "Here We Go Round: Navigating the Ethics of Care for Chronically Ill Children," at the 19<sup>th</sup> annual Collaborative Ethics Conference: Ethics of Caring in Los Angeles in March 2012.

**David Davis, RN**, and **Dave Tan, RN**, presented "Engaging the Front Line Staff in Quality and Patient Safety" to the Quality and Safety Leaders Forum of the Children's Hospital Association in San Diego in May 2012.

**Sheila Kun, RN**, gave an oral and poster presentation, "Surviving the Night: Independent Living for CCHS Young Adults," and presented a breakout session, "Preparing for Achieving Adult Independence for CCHS/CHS Patients Age 15+," at the International Conference on Primary Central Hypoventilation in Warsaw, Poland, in April 2012.

**Sherry Nolan, RN**, and **Diane Grade, RN**, gave a video and podium presentation, "Medicus (Please Don't) Interrupt Us: Reducing Medication Errors in an Inpatient Pediatric Setting by Decreasing Distractions,"

at the International Patient Safety Congress in Birmingham, England, in May 2012. Nolan also gave an oral presentation on the same topic to staff at Great Ormond Street Hospital in London.

**Susan M. Carson, RN**, gave a presentation on "The Role of the Clinical Nurse Specialist in a Comprehensive Thalassemia Clinic" at the Thalassemia Nursing Master Class in Hong Kong in February 2012. She also gave a presentation, "The Challenges Facing Adults with Sickle Cell Disease," to the nurses at Loma Linda Hospital in Loma Linda, Calif., in May 2012.

**Mary Baron Nelson, RN**, gave a presentation, "CNS Injury in Children with Brain Tumors Treated with Chemotherapy," at the International Nursing Conference on Child and Adolescent Cancer Survivorship in Williamsburg, Va., in June 2012.

**Sandra Mintz, RN**, spoke on "Forming an Education and Support Group from the Ground Up" and gave a poster presentation on "Health-Related Quality of Life in Adolescents with Rheumatic Disease" at the annual American College of Rheumatology (ACR/ARHP) Scientific Conference in Washington, D.C., in November 2012.

**Catherine Goodhue, NP**, presented "Congenital and Acquired Liver Disease in Single Ventricle Patients" at the American Association for the Study of Liver Disease in Boston in November 2012.

**Sharee Anzaldo, RN**, lectured at UCLA on "Gastrointestinal Disorders, Genitourinary and Renal Disorder, Fluid and Electrolyte Disturbances" in October 2012.

**Catherine Goodhue, NP**, presented "A New Look at Heterotaxy: An Association Similar to VACTERL" at the American College of Medical Genetics and Genomics conference in Phoenix in March 2013; "Delayed Family Reunification of Pediatric Disaster Survivors Increases Inpatient Hospital Costs: A Simulation Study" at the Academic Surgical Congress in Las Vegas in February 2013; and "Don't be Mellow

When an Infant is Yellow: Deciphering Cholestasis” at the California Association of Nurse Practitioners’ 36<sup>th</sup> annual Educational Conference in Monterey, Calif., in March 2013.

**Felicitas dela Cruz, RN**, gave a podium presentation, “Growing Our Own: Preparing Non-nursing College Graduates as APRNs and Nurse Educators,” at the Western Institute of Nursing’s 46<sup>th</sup> annual Communicating Nursing Research Conference in Anaheim, Calif., in April 2013.

**Brenda Barnum, RN**, was a lecturer for a course at the University of Southern California (USC) on “Challenges in the Forefront of Biomedical Ethics” and “Informed Consent: A Reflection of Respect” in March 2013.

**Jennifer Baldwin, RN, Delilah Dees, RN, and Ani Yeremian, RN**, presented at the Get Well Network’s sixth annual user conference, Get Connected 2013, in San Diego in April 2013.

**Sharee Anzaldo, RN**, presented “Gastrointestinal, Genitourinary and Renal Disorders, and Children with Special Needs” at the UCLA School of Nursing in July 2013.

**Jennifer Baldwin, RN, and Aileen De Guzman, RN**, presented “Bedside Rounding” at the Patient & Family Centered Care Conference in Long Beach, Calif., in June 2013.

**Nancy Blake, RN**, presented “Staffing for a Healthy Work Environment” and “Authentic Leadership” at the AACN Nurse Manager Conference in Las Vegas in September 2013.

**Stacey Boyer, RN**, presented “Pacemaker and Implantable Cardioverter Defibrillator Follow-up in Children and the Impact of Home Monitoring” at the Annual Conference of the Western Society of Pediatric Cardiology in Monterey, Calif., in June 2013.

**Sharon Fichera, RN**, presented “Sepsis in the Newborn” and “Newborn Surgical Emergencies” at the National Association of Neonatal Nurses Northern California Chapter in Napa, Calif., in August 2013.

**Nicole Freedman, RN**, presented “Updated AAP Guidelines for the Management of Febrile Urinary Tract Infections in Infants 2-24 months” at the APN Journal Club in September 2013.

**Kay Gilmore, RN**, presented “Closer to Home: Bringing ECHOs to the Bedside” to the Western Society of Pediatric Cardiology in Monterey, Calif., in June 2013.

**Melanie Guerrero, RN**, presented “Transforming Care: Daily Bedside Rounding in a Pediatric Cardiovascular Acute Unit” to the Western Society of Pediatric Cardiology in Monterey, Calif., in June 2013.

**Kim Harder, RN**, presented “The Journey Home: Use of Technology to Facilitate Discharge Teaching” at the Joint Conference on Advances in Pediatric Cardiovascular Disease Management in Los Angeles in September 2013.

**Susan Hunt, RN**, presented “Pediatric Pain Assessment and Management” at Loma Linda University in July 2013.

**Monica Horn, RN**, presented “Pediatric Ventricular Assist Device: Bridge to Cardiac Transplant” at the North American Transplant Coordinators Organization Annual Meeting in San Diego in August 2013.

**Ruth Lemus, RN**, presented “Hypoplastic Left Heart Case Studies” at the Society of Thoracic Surgeons’ Advances in Quality and Outcomes: A Data Managers Meeting in Boston in September 2013.

**Meghan Middleton, NP**, presented “Pain Theory and Management” and “Interventional Pain Management Techniques” to the Versant™ RN Residency Program in Los Angeles in September 2013.

**Sandra Mintz, RN**, presented “Transitioning the Young Adult,” “School Issues” and “Intimacy for the Young Adult” at the Juvenile Arthritis Conference in Anaheim, Calif., in July 2013.

**Nancy Pike, RN**, presented “Long-term Outcomes in Fontan Survivors: What Can We Expect in the Future; Are Two Ventricles Better than One” at the Joint Conference on Advances in Pediatric Cardiovascular Disease Management, sponsored by Children’s Hospital Los Angeles in September 2013. She also presented “Growing Up with a Single Ventricle: Quality of Life Post-Fontan” at the 24<sup>th</sup> annual Western Society of Pediatric Cardiology conference in Monterey, Calif., in June 2013.

**Kathleen Ruccione, RN**, presented “Health Communication: Words are Powerful Drugs” at the third annual Adam Hay Lecture for the Children’s Cancer and Leukemia Group in London in June 2013, and “Adolescents’ Psychosocial Health-Related Quality of Life Within Six Months After Cancer Treatment Completion” to the Association of Pediatric Hematology-Oncology Nurses in Louisville, Ky., in September 2013.

**Judith Tighe, RN**, and **Arnie Banez, RN**, presented “Transitioning the Ventilated Patient to Home” at the Patient & Family Centered Care Conference in Long Beach, Calif., in June 2013.

**Gloria Verret, RN**, presented “Trends in Pediatric Disparity Research” at the ELM Research Conference at the Drew University School of Nursing in Los Angeles in August 2013.

**Kristi K. Westphal, RN**, presented “When Exercise Turns Deadly: Acute Exercise-Induced Rhabdomyolysis in Children” at the National Association of Pediatric Nurse Practitioners’ 34<sup>th</sup> Annual Conference in Orlando, Fla., in April 2013 and “From Bumps to Bleeds: Management of Pediatric Head Trauma” at the California Association of Practitioners’ 36<sup>th</sup> annual Educational Conference in Monterey, Calif., in March 2013.

**Hui-Wen Sato, RN**, **Nancy Blake, RN**, **Kieran Shamash, RN**, and **Tiffany Li, RN**, presented “Healthy Work Environments” at UCLA in May 2013.

**Allan Cresencia, RN**, gave a podium presentation, “Pediatric Syndromes and Their Conundrums,” at the American Society of PeriAnesthesia Nurses’ National Conference Specialty Practice Group –

Pediatrics Session in Chicago in April 2013 and at the International Conference for PeriAnaesthesia Nurses in Dublin, Ireland, in September 2013.

**Susan Crandall, RN**, gave a presentation on “Taming the Beast: Conquering the Demographic Information Form and Harnessing Data to Transform Your Organization” and co-presented “Magnet Sustainability: Infusing the Magic of Innovation Through Designation, Redesignation, and Beyond” at the American Nurses Credentialing Center National Magnet Conference in Orlando, Fla., in October 2013.

**Nancy Blake, RN**, and **Kathleen Stevenson, RN**, gave a presentation on “Disaster Preparedness: Nurses Partnering with the Community to Influence Policy and Response” at the American Nurses Credentialing Center National Magnet Conference in Orlando, Fla., in October 2013.

**Cecily Betz, RN**, and **Kathryn Smith, RN**, gave a presentation on “Promoting Inclusive Health Care for Individuals with Developmental Disabilities” at the American Nurses Credentialing Center National Magnet Conference in Orlando, Fla., in October 2013.



*Allan Cresencia, RN, in Dublin, Ireland*

## Posters

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**Nancy Blake, RN**, presented a poster, "The Relationship of Healthy Work Environments (Communication, Collaboration, and Leadership) and Patient and Nurse Outcomes," at the Association of California Nurse Leaders in Rancho Mirage, Calif., in February 2012 and at the Society of Pediatric Nurses' 22<sup>nd</sup> Annual Convention in Houston in April 2012.

**Phyllis D'Ambra, RN, Lisa Costantino, RN, Christel McRae, RN, Debbie Nobel, RN, Sue Benson, RN, Rachelle Rogan, RN, Sharon Wagner-Lees, RN, Dee Imai, RN, Nancy Hart, RN, Stephanie Johnson, RN, Mary Virgallito, RN, and Margaret Ecker, RN**, contributed to a poster presentation, "Kids and Germs and the Ambulatory Setting: How Nurse Leaders Translated Inpatient Rules to Meet Outpatient Realities," at the Association of California Nurse Leaders' annual conference in Rancho Mirage, Calif., in February 2012.

**Alejandra Briseno, RN, Gena Favero, RN, and Cindy Rowlett, RN**, presented a poster, "Professionalism: Actions Speak Louder Than Words," at the Society of Pediatric Nurses' 22<sup>nd</sup> Annual Convention in Houston in April 2012.

**Sherry Nolan, RN, Cheryl McCauley, RN, and Kristine Gawley, RN**, presented their poster, "Medicus (Please Don't) Interrupt Us: Decreasing Medication Errors by Decreasing Distractions," at the Society of Pediatric Nurses' 22<sup>nd</sup> Annual Convention in Houston in April 2012.

**Ruth Paul, RN, Susan Santner, RN, and Ani Burr, RN**, presented a poster, "Maintaining Morale and Teamwork During a Time of Transition," at the Society of Pediatric Nurses' 22<sup>nd</sup> Annual Convention in Houston in April 2012 and 23<sup>rd</sup> Annual Convention in Nashville, Tenn., in April 2013.

**Flora Yuen, RN, Yesenia Duarte, RN, and Irma Quijano, RN**, presented their poster, "Cultural Implications in the Implementation of an Infant Safe Sleep Initiative," at the Society of Pediatric Nurses' 22<sup>nd</sup>

Annual Convention in Houston in April 2012 and at the Transcultural Nursing Society's 38<sup>th</sup> Annual Conference in Orlando, Fla., in October 2013.

**Cathy Kissinger, RN, and Phyllis D'Ambra, RN**, presented a poster, "A Multidisciplinary Approach to the Care of Patients Undergoing Spinal Fusion for Idiopathic Scoliosis," at the Society of Pediatric Nurses' 22<sup>nd</sup> Annual Convention in Houston in April 2012.

**Gloria Verret, RN, and Phan Dang, RN**, presented a poster, "Hospital-Wide Unit Huddles to Improve Communication, Patient Safety and Staff Satisfaction," at the Society of Pediatric Nurses' 22<sup>nd</sup> Annual Convention in Houston in April 2012.

**Jennifer Huson, NP**, presented her poster, "Utilizing Nursing in a Unique Environment to Address an Underserved Population," at the Society of Pediatric Nurses' 22<sup>nd</sup> Annual Convention in Houston in April 2012.

**Sheila Kun, RN**, gave a poster presentation, "Knowledge of Home Health Nurses on Pediatric Emergency Tracheostomy and Ventilator Care," at the American Thoracic Society International Conference in San Francisco in May 2012.

**Mary Moses, RN, Shinyi Tang, RN, and Dawn Landery, RN**, gave a poster presentation, "To Maintain Retention on a High-Acuity Pediatric Hematopoietic Transplant Unit," at the European BMT Conference in Geneva, Switzerland, in April 2012.

**Dawna Willsey, RN**, presented a poster, "Integrated Specialty Orientation: Versant RN Residency in Pediatrics and AORN Periop 101," at the eighth annual Versant Client Conference in San Antonio in November 2012.

**Erin Lowerhouse, RN**, presented a poster, "Forming Alliances: Teamwork on the Perioperative Island," at the eighth annual Versant Client Conference in San Antonio in November 2012.

**Erin Hollenbeck, RN, Lauren Toneck, RN, Sarah Corralejo, RN, Lindsey Webb, RN, and Kelly Kim, RN,** presented a poster, "Implementing a Quiet Hour in the NICCU," at the eighth annual Versant Client Conference in San Antonio in November 2012.

**Rosin Atashian, RN, Susan Tuano, RN, and Robert Giesler, RN,** presented a poster, "PICC Care and Management," at the Coastal California Association of Neonatal Nurses (CoCANN) conference in February 2013 in Los Angeles.

**Mary McCulley, NP, and Jennifer Huson, NP,** presented a case study poster, "Primary Ciliary Dyskinesia in Infants with Congenital Heart Disease," at the 42<sup>nd</sup> Critical Care Congress of the Society of Critical Care Medicine in Puerto Rico in January 2013.

**Gloria Verret, RN, Frances Jameson, RN, and Rosanna Preall, LVN,** presented a poster, "Launching a Journal Club to Promote Education and Teamwork in a New Unit," at the Society of Pediatric Nurses' 23<sup>rd</sup> Annual Convention in Nashville, Tenn., in April 2013.

**Nida Kan-Ari, RN, Katrina Lazo, RN, and Kelsey Wong, RN,** presented "The Benefits of Integrating New Graduate Float Residents into RN Residency Programs" at the Society of Pediatric Nurses' 23<sup>rd</sup> Annual Convention in Nashville, Tenn., in April 2013.

**Dawn Landery, RN, and Jonelle Gray, NP,** gave a poster presentation, "A Multidisciplinary Intervention Fosters Dissemination and RAPID Implementation of Evidence-Based Medicine," at the American Society for Bone Marrow Transplant Conference in Salt Lake City in February 2013.

**David Davis, RN, and Lisa Costantino, RN,** gave a poster presentation, "A Tool for All Trades: Our Experience in Creating an Interdisciplinary Tool for Professional Performance Evaluations and Peer Review," at the 35<sup>th</sup> annual Association of California Nurse Leaders Conference in San Diego in February 2013.

**Melanie Guerrero, RN, Sandy Hall, RN, and Jessica Klaristenfeld, RN,** presented a poster on "Supporting New Graduate Nurses Through a Comprehensive Evidence-Based RN Residency Program" to the Organization of Healthcare Educators in Glendale, Calif., in June 2013.

**Sheila Kun, RN,** presented a poster on "Delay in Home Respiratory Therapy: A System Analysis of Delay In Outpatient Equipment Delivery" at the American Thoracic Society International Conference in Philadelphia in May 2013.

**Rosanna Preall, RN,** presented a poster on "6 West Journal Club" at the ELM Research Conference at the Drew University School of Nursing in Los Angeles in August 2013.

**Kelli Anderson, RN, Gloria Verret, RN, and Jennifer Buchanan, RN,** presented a poster, "RN Remedies: A Nurse-Driven Blog Program Reaches Out Globally," at the American Nurses Credentialing Center National Magnet Conference in Orlando, Fla., in October 2013.

**Sandy Hall, RN, Diane Altounji, RN, Laura Rohnert, PT, Joan Godell, RN, and Felicitas dela Cruz, RN,** presented a poster, "A Staff-Driven Initiative to Improve Evidence-Based Practice at the Bedside," at the American Nurses Credentialing Center National Magnet Conference in Orlando, Fla., in October 2013.

**Noreen Clarke, RN, Kathryn Smith, RN, and Cecily Betz, RN,** presented two posters, "Let's Get Involved: Advocacy on the Local, Regional, State, National and International Level" and "Creation of Nurse-Directed Clinics for Children with Special Health Care Needs," at the American Nurses Credentialing Center National Magnet Conference in Orlando, Fla., in October 2013.

## Publications

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**Phan Dang, RN**, wrote an article, “Changing Lives—The Inpatient Rehabilitation Unit at Children’s Hospital Los Angeles,” published in the February/March 2012 issue of the *Rehabilitation Nursing Journal*.

**Rita Secola, RN**, co-wrote “Targeting to Zero,” an article published in the *Journal of Pediatric Oncology Nursing* in January 2012.

**Sheila Kun, RN**, co-authored “End-of-life Discussions and Advance Care Planning for Children on Long-Term Assisted Ventilation with Life-Limiting Conditions” for the *Journal of Palliative Care*, published in March 2012.

**Nancy Pike, NP**, co-authored “Early Developmental Outcome in Children with Hypoplastic Left Heart Syndrome and Related Anomalies: The Single Ventricle Reconstruction Trial,” published in *Circulation*, a journal of the American Heart Association, in May 2012.

**Inge Morton, RN**, authored the Pediatric Trauma chapter in the seventh edition of the “Trauma Nursing Core Curriculum,” published by the Emergency Nurses Association.

**Kathleen Ruccione, RN**, published two articles—“Children’s Oncology Group Return of Research Results Task Force: Recommendations for Offering a Summary of Research Results to Participants and Guardians,” *Journal of Clinical Oncology*, October 2012, and “Children’s Oncology Group’s 2013 Blueprint for Research: Nursing Discipline,” *Pediatric Blood and Cancer*, December 2012—and a book, “Childhood Cancer Survivors: A Practical Guide to Your Future,” third edition.

**Susanne Matich, RN**, had an article, “Just Pediatrics: A Eulogy for Chloral Hydrate,” published in the *Journal of Radiology Nursing*, December 2012.

**Diane Altounji, RN**, and **Rita Secola, RN**, published “Self-Care: What It Means to the Pediatric Hematology Oncology Nurse” and “A Crossover Randomized Prospective Pilot Study Evaluating a Central Venous Catheter Team in Reducing Catheter-

Related Bloodstream Infections in Pediatric Oncology Patients” in the *Journal of Pediatric Oncology Nursing* in January 2013. They also published “Nursing Considerations for Children, Adolescents and Young Adults with Hematological Malignancies” in *Hematological Malignancies in Children, Adolescents and Young Adults*, January 2013.

**Catherine Goodhue, NP**, published an article, “Can a Pediatric Trauma Center Improve the Response to a Mass Casualty Incident?” in *Trauma Acute Care Surgery*, October 2012.

**Robin Goodman, RN**, authored the Pediatric Trauma chapter in the seventh edition of the “Trauma Nursing Care Curriculum,” published by the Emergency Nurses Association.

**Catherine Goodhue, NP**, published “Delayed Family Reunification of Pediatric Disaster Survivors Increases Mortality and Inpatient Hospital Costs: A Simulation Study” in the *Journal of Surgical Research*, September 2013. She also published “Persistent Hyperbilirubinemia in a Newborn” in the *Journal of Pediatric Health Care*, April 2013, and “Chylous Ascites Following Kasai Portoenterostomy: Case Report and Review of the Literature” in the *Journal of Pediatric Surgery Case Reports*, July 2013, and “On-Q® Pain Pump Versus Epidural for Postoperative Analgesia in Children” in *Pediatric Surgery International*, July 2013.

**Dawna Willsey, RN**, authored an online educational learning module, “Care of the Pediatric Patient in Surgery,” in March 2013.

**Diane Altounji, RN**, **Monica Grover, RN**, **Sona Daldumyan, RN**, and **Rita Secola, RN**, published “A Self-Care Retreat for Pediatric Hematology Oncology Nurses” in the *Journal of Pediatric Oncology Nursing*, January 2013.

**Kathy Ruccione, RN**, co-authored “Post-traumatic Growth Among Ethnically Diverse Adolescent Cancer Survivors” for *Psycho-Oncology*, April 2013.

**Kathy Ruccione, RN**, and **Kathy Meeske, RN**, co-authored "Adolescents' Psychosocial Health-Related Quality of Life Within Six Months After Cancer Treatment Completion" for Cancer Nursing, April 2013.

**Susanne Matich, NP**, published "Just Pediatrics: Just Say 'No' to Codeine: The Story of Kids, Ultrarapid Metabolizers, and the CYP2D6 System" in Journal of Radiology Nursing, June 2013.

**Barbara Britt, RN**, published "Hurry Up and Trust Me" in a section in "The Patient-Centered Payoff: Driving Practice Growth Through Image, Culture and Patient Experience," September 2013.

**Nancy Blake, RN**, published "Effective Staffing for a Healthy Work Environment" in AACN Advanced Critical Care in October 2013 and "Healthy Work Environments and Staff Nurse Retention: The Relationship Between Communication, Collaboration and Leadership in the Pediatric Intensive Care Unit" in Nursing Administration Quarterly, November 2013.

**Felicitas A. dela Cruz, RN**, published "Level of Acculturation, Food Intake, Dietary Changes, and Health Status of First-Generation Filipino Americans in Southern California" in the Journal of the American Association of Nurse Practitioners, and "Transition of Second Career Students Through Socialization into Professional Nursing," in Nurse Education Perspectives, 2013.

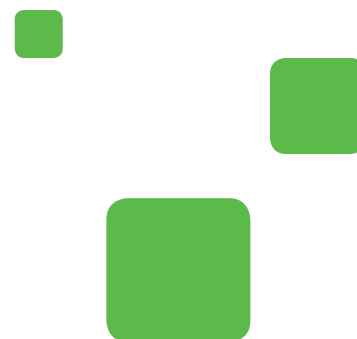
**Erin Lowerhouse, RN**, published "Handoff Communication: Overcoming Barriers in the Periop Department" in the American Society of Perianesthesia Nurses PSG Newsletter, September 2013.

**Valerie Gordon, RN**, published "CIC Clean, Intermittent, Catheterization: Guidelines for Healthcare Professionals" in Wellspect Healthcare, 2013.

**Laura Klee, RN**, published "Antithrombin III Administration in Neonates with Congenital Diaphragmatic Hernia During the First Three Days of Extracorporeal Membrane Oxygenation" in Journal of Pediatric Surgery, September 2013.

**Kathy Ruccione, RN**, published "Children's Oncology Group's 2013 Blueprint for Research: Nursing Discipline" in Pediatric Blood & Cancer, June 2013.

**Kristi K. Westphaln, RN**, published a case study, "Emergency Management of Pancreatic Injury in a 5-year-old," in Advanced Emergency Nursing Journal, 2013.





*Elise Aube, RN, cares for an operating room patient.*

# The Nurses of the Children's Orthopaedic Center

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Phyllis D'Ambra, MPA, RN, calls scoliosis screenings in schools her "mission in life." She visits more than 250 schools every year, screening children, adolescents and teens who have been referred by a school nurse for scoliosis. "It is important to screen early and to continue to monitor the children closely from then on," D'Ambra says. She is just one member of a special team that makes up the core of the nursing staff at the Children's Orthopaedic Center (COC) at Children's Hospital Los Angeles.

The COC is the fourth-ranked orthopaedic clinic in the nation on the 2013-14 U.S. News & World Report rankings of pediatric specialties. It is no wonder why hundreds of families bring their children to the Center every year.

The success of the COC depends on the interdisciplinary teamwork of physicians, surgeons, prosthetists, biomedical engineers, physical therapists and nurses. Ann Wakulich, BSN, RN, ONC, Elaine Butterworth, RN, CPN, and D'Ambra, nurse manager, are at the heart of the program, serving as advocates and assisting patients and families in meeting their needs as they receive care. They coordinate patient care, treatment plans, and pre- and post-surgery care if needed. They also visit patients in the inpatient units after surgery and collaborate with other members of the health care team, including nurses and physicians on the unit.

In addition, the Center's nurses provide a comprehensive education program for their patients, including information on hip disorders, club feet, fractures, external fixations, bone cancers, bone tumors and spine deformities. The program prepares patients and their families for the treatment of their diagnoses.

"We schedule a personal education session and tours of departments they will visit," says Butterworth. The nurses provide appropriate educational materials, some of which they develop themselves, and recommend external websites as additional resources.

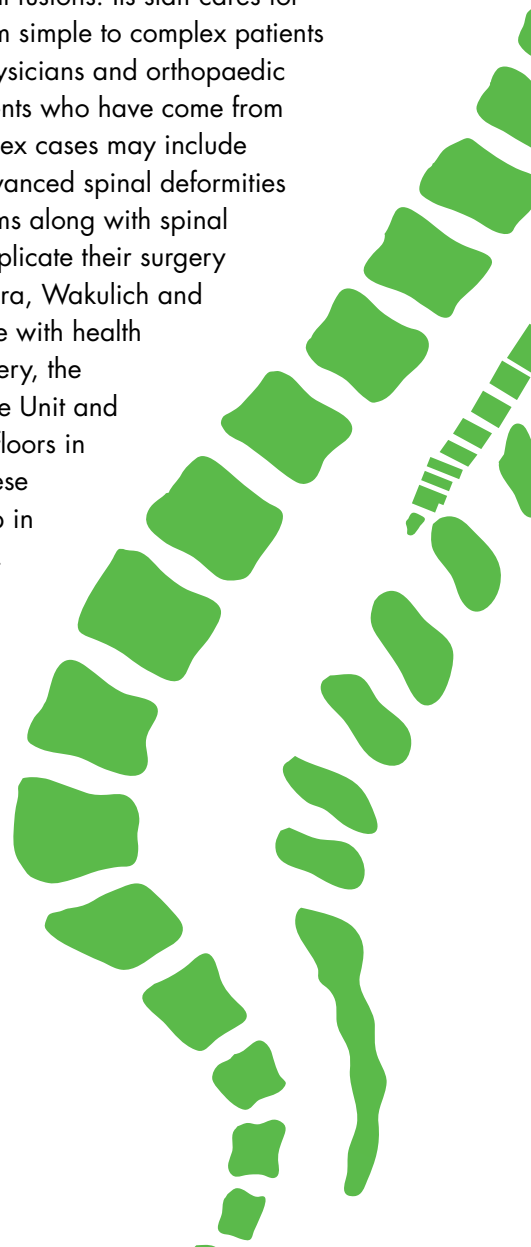
"We refer families to various support groups to help them understand and cope with their child's diagnosis,"


she adds. "We also arrange individual meetings with another family with a child of the same diagnosis."

They introduce some patients to additional resources as well, such as "Curvy Girls," a support group that helps adolescent girls with spinal deformities cope with their diagnosis and live a normal life. The group even helps patients with simple matters, such as the best summer clothes to wear with a back brace. Resources and networks like these give families insight into their future and help in managing their child's health and family lifestyle.

The Children's Orthopaedic Center is one of the leading providers of pediatric spinal surgeries in the nation, including spinal fusions. Its staff cares for all levels of acuity, from simple to complex patients referred from other physicians and orthopaedic centers and even patients who have come from other countries. Complex cases may include children who have advanced spinal deformities or other health problems along with spinal issues, which can complicate their surgery treatment plan. D'Ambra, Wakulich and Butterworth collaborate with health care providers in Surgery, the Pediatric Intensive Care Unit and the Medical/Surgical floors in the management of these patients, and follow up in the COC after surgery.

The Center also provides a class for spine surgery patients who have scoliosis. The class teaches patients and families about the care they should expect before and after surgery and introduces them to the interdisciplinary team members who will be caring for them.





"This class provides a setting for teaching and group discussions. A physical therapist is also involved," says Wakulich. "The class provides the patients, often teens, a chance to meet with other peers going through the same procedure, alleviating some fears they may have. Feedback has been very positive."

The COC nurses provide a separate class for spine surgery patients diagnosed with neuromuscular scoliosis, as these patients have special needs not associated with other spinal conditions. Wakulich says that patient concerns often include housing, transportation and assistance at home.

"A family-centered care approach is helpful to the family, physicians and nursing staff to decrease stress levels and provide an optimum situation for post-operative recovery," she explains. "We involve a multidisciplinary team that includes Nursing, Social Work, Physical Therapy, Child Life and Clinical Nutrition."

D'Ambra, meanwhile, has been extending the Center's services beyond the boundaries of Children's Hospital Los Angeles. For the past 31 years, she's been championing its community outreach efforts through her school-based scoliosis screenings. The COC provides free primary and secondary screenings for students from various public and private schools, from Lancaster to Lake Elsinore, via a program mandated by the state of California.

"I go to 10 schools on any given day in various school districts to rescreen 40 to 60 students per site," D'Ambra says.

She visits schools twice a week to assist school nurses, and every week she finds at least one child who is in need of a body brace or spinal surgery. The program also provides education to various public and private school nurses on how to screen for scoliosis. Early detection of this progressive condition can make a difference in a child's quality of life.

"If scoliosis can be identified early enough, bracing works in 85 percent of cases," she says. "This work is so uplifting because you can see the results."



*Ann Wakulich, BSN, RN, ONC, (left), Phyllis D'Ambra, MPA, RN, and Elaine Butterworth, RN, CPN*



*Phyllis D'Ambra, MPA, RN, performing a scoliosis screening*

## Rheumatology Support and Education Group

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Patients with rheumatic conditions and their families often struggle with issues of self-image, social interaction and hopelessness about the future. The Rheumatology team at Children's Hospital Los Angeles recognized this problem based on its years of experience interacting with this population. After reviewing literature and consulting with colleagues at other facilities, the team created innovative, structured support groups for patients and families to address these needs.

"Families Living with Rheumatic Diseases" is a unique and dynamic program that provides education and therapeutic support to children, adolescents and parents in a safe and fun environment, where children and families can learn more about their conditions, share experiences and learn to live successfully with a chronic illness. Since the inception of the community outreach program in 2009, the support groups have evolved from a six-week session held quarterly to an ongoing series held every other month for 2 1/2 hours. This change was made after a needs assessment of both patients and families.

Sessions for parents are held in both English and Spanish, while activities are available to occupy siblings and younger children. Facilitators and guest speakers provide education and support, and participants also benefit from each other's shared experiences. Each interactive session focuses on a specific aspect of life with a rheumatic illness. Topics include transition, schools, coping, self-esteem, wellness, depression, self-advocacy and nutrition.

The program began as a collaborative effort between the Children's Hospital Los Angeles CORE Rheumatology staff and the community organization LupusLA in 2009; Coach Art joined the collaboration in 2010. The following year, program staff members Sandra Mintz, BSN, RN, Suhas Radhakrishna, MD, and Maggie Sepkowitz, LCSW, were awarded a \$30,000 Quality of Life research grant, which concluded in early 2013.

Through extensive collaboration between these three organizations, the Rheumatology team was able to use objective measuring tools to evaluate the project's success. This was done through the use of surveys given to participants before and after each session. The responses were on a numbered (Likert) scale so that the outcomes could be easily measured.

"I was glad I had people to talk to who had similar feelings," says one participant, age 11. "I would look forward to seeing how other people dealt with the same problems as me. The doctors talked about how we could have a normal life even though we had restrictions. It made me feel so much better."

As a result of the grant study findings, the program has gained national recognition as a role model for others like it. Mintz presented at a symposium to educate others on how they could develop similar programs in their areas, and Sepkowitz presented a poster on the team's research findings at the American College of Rheumatology/Association of Rheumatology Health Professionals' Annual Meeting.



The success of the program is greatly attributed to the staff who have supported it over the years, and their generous collaborators. Children's Hospital Los Angeles team members include:

### Program Leaders

Sandra Mintz, BSN, RN  
Liz Morasso, MSW  
Maggie Sepkowitz, LCSW

### Facilitators

Nadya Hernandez, MSW  
Liz Morasso, MSW  
Michael Viscariello, LCSW  
Liz Wilson, MSW

### Physician Support

Diane Brown, MD, PhD  
Rhina Castillo, MD  
Katherine Marzan, MD  
Anusha Ramanathan, MD  
Andreas Reiff, MD  
Bracha Shaham, MD

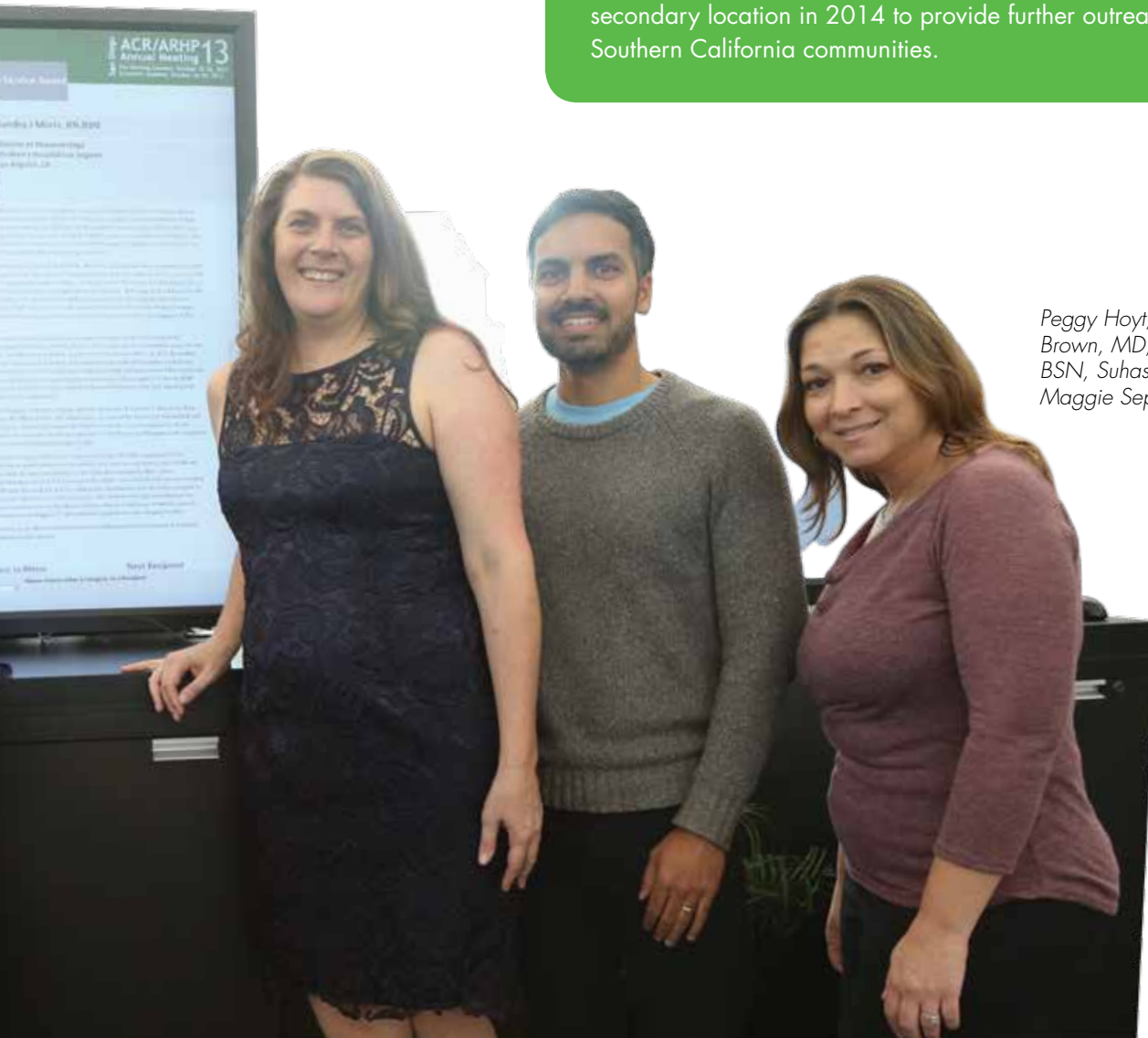
### Guest Speakers

Jill Blitz, PT, DPT, ATP  
Diana Hanley, OTR/L

### Research Collaborator

Jeffrey Gold, PhD

In addition, the Juvenile Arthritis Association has now joined the list of the program's supporters. One of its goals is to support expansion to a secondary location in 2014 to provide further outreach to additional Southern California communities.



*Peggy Hoyt, MHA, BSN (left), Diane Brown, MD, PhD, Sandra Mintz, RN, BSN, Suhas Radhakrishna, MD, and Maggie Sepkowitz, LCSW*

## Nurse Week Essay Winner 2012

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Describe a moment when you knew you made a difference.



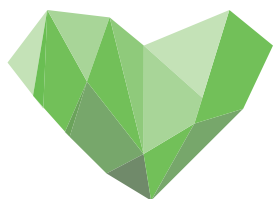
### By Miguel Aventino, RN, PACU

It was not too long ago when I remembered one of the happiest moments of my life: being hired as a patient care service aide back in November 1997 on 6 North. It was a joyous time because I was close to realizing my dream of becoming a nurse here at Children's Hospital Los Angeles. Finishing nursing school in December 1998, I was even more delighted to discover that I was chosen to become part of the very first Versant RN Residency at Children's Hospital in July 1999.

The training and the education I received during the RN Residency program were remarkable and truly useful. It enhanced theories learned from school, combined with evidence-based applications that guided my practice even to this day. But what really caught my attention to work here is the realization that I can make a contribution in someone else's life because I am a nurse. Children's Hospital nurses enjoy the reputation of being knowledgeable leaders. Moreover, it is the values of respect, excellence, service, knowledge and teamwork that became the infrastructure of our culture of caring and nurturing. Indeed, Children's Hospital Los Angeles is an exceptional place to work. It's like shopping in a favorite department store, where you know staff will treat you great right from the start. This is what I hear parents and guests constantly comment to me during discharge and during their visits here at Children's Hospital—that their children are not only being treated well for their ailments, but also being cared for every step of the way.

These ideals impressed me because they reminded me of a particular instance that I know I made a difference in someone's life. It was the summer of 2001 when I received an assignment from the charge nurse that I would be receiving a patient who was initially treated at another hospital. This patient was a 17-year-old teen named Pete\* who was involved in a motor vehicle accident and was thrown several feet from his car. As a result of the accident Pete became quadriplegic, stuporous and necessitated a tracheostomy tube to help him breathe. Dad was with his boy and looked pretty anxious and demanded everything be done right for his child. I introduced myself and laid out the plan of care for Pete. Teamwork from other disciplines, such as the physical therapists, respiratory therapists, occupational therapists, Child Life and Spiritual Services played an integral part of his voyage to recovery.

Weeks became months as Pete struggled to show hints of any improvements past his pre-admission baseline. Family conferences were held after each new approach to Pete's rehabilitation process to update family of his status. Pete's dad was his sole source of family support. His dad would always advocate for other methods of treatment, including acupuncture, in the hopes that Pete might

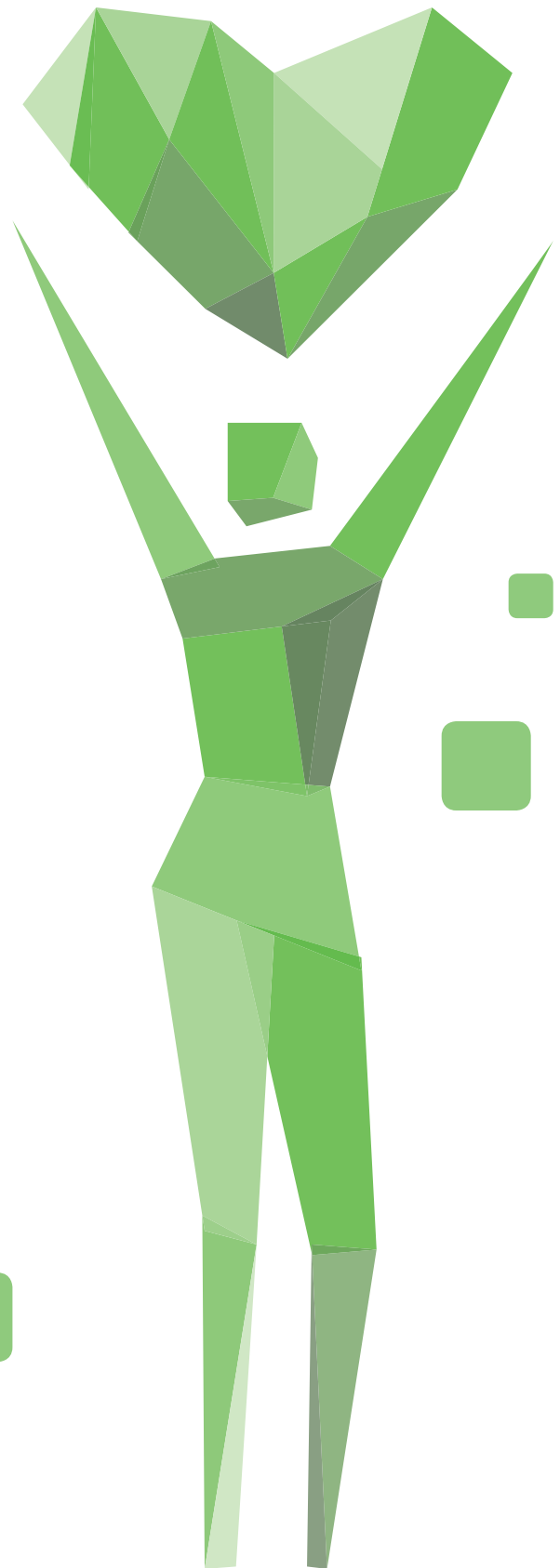


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one day wake up from his stuporous state. I had even suggested to Pete's dad to bring in his favorite things, pictures, and to play his favorite CDs. Each day I had Pete, I would play his favorite music, chat with him, and tell him exciting stories or read to him when time would allow me to do so. The inevitable day had come, however, when our rehab doctor sadly announced that Pete's care would be transferred to a subacute facility near the patient's place of residence. Pete's father broke down in tears. However, with his resilient spirit, he whispered to me, "I am not worried ... Pete will bounce back. I know it; and he is stronger than me!"

Five years had passed, and I had transferred to the PACU team. One day, as I was transferring a patient back to 6N from the perioperative services, I was stunned to hear my name being called out loud at the 6 North dome area. I was stunned to see that Pete was walking that day and talking to me. His father, who looked in utter jubilation, accompanied Pete that day. Pete told me all about his stay at 6N when I was taking care of him. He was thankful to me for the care that I gave him. He said that he could hear everyone's voices, including mine; we were unaware that Pete could actually hear our voices when we were around or near him. He was particularly thankful that I told him stories and played his favorite CDs. From that day on, I was deeply touched, honored and humbled by the fact that I truly made a difference in someone's life.

*\*Name was changed to protect the patient's privacy.*



## Nurse Week Essay Winner 2012

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Describe a moment when you knew you made a difference.



**By Jennifer Henkin, RN**

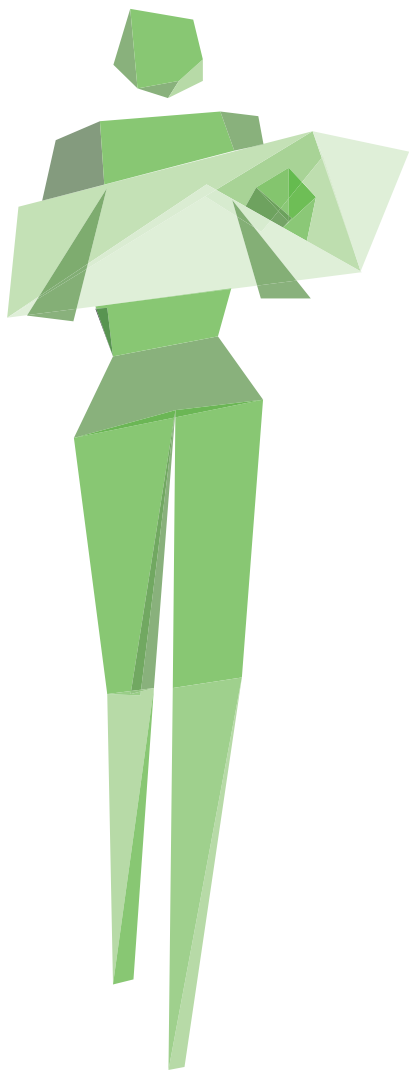
It was an hour before shift change. The Code Blue came from labor and delivery. That is never a good sign. A handful of NICCU nurses ran out to assist; I stayed behind prepping the admission bedspot with goosebumps forming on my skin. It was a chaotic scene in the unit as rumors were flying around about what was occurring in labor and delivery. Perfusion was being paged overhead and the NICCU nurses kept running back and forth for supplies. The infant had been delivered by emergency Cesarean section while every attempt was being made to resuscitate mom. She never awoke to see her baby.

The baby was eventually brought to the NICCU in a transport isolette by a somber team. At 33 weeks, she was early but well-developed and large for her gestational age. A beautiful baby with faint red curls. Intubated in the delivery room, the nurse practitioners and neonatologist began preparing for an umbilical line. A group of family and friends had gathered in the waiting room, eyes red from crying and blank expressions. It was a week before Thanksgiving and no one expected this.

Dad and (maternal) grandmother entered the room as we were preparing the infant for lines. Everyone dropped what they were doing and just stood back as dad reached out to touch his daughter. Tears flooded my eyes. As the admission nurse, I was responsible for updating dad on the status of his infant. But, at that moment, there was nothing I could say to make him feel anything. He had just experienced the loss of his beloved wife and the miraculous birth of his daughter.

Over the next few weeks, I became a primary nurse for the baby. She was extubated rather quickly and was on a nasal cannula for a short period of time. Dad came to visit before and after work. At first he was very quiet and reserved. I can only imagine how difficult it was for him to try and bond with his daughter. As the weeks wore on, he began to open up and take more interest in his daughter's care. He admitted he needed help with the daily tasks like bathing, feeding, changing, etc. I demonstrated how to change her diaper, making sure to wipe front to back. We had a spa day where dad learned how to bathe his daughter. I emphasized the importance of the water's temperature and how to perform a swaddle bath so the baby didn't get too cold. His large hands gently supported her head as he scrubbed her red curls with a soft brush. I stood by for support and as photographer.

Dressing his baby girl was a real challenge! Her arms and legs moving, she looked like a bug that had been turned on its back. Dad was cautious at first, trying to pull the onesies over her tiny head, but he became much more adept at controlling her. Dad was always impressed with how I had his little girl



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wrapped up tight in a blanket. I explained that it was like wrapping up a burrito, but dad just couldn't get down this task. His daughter was able to break out of the blanket in seconds. He was able to offer her a bottle at three weeks of age. I patiently taught him how to mix the formula. I wrote out the recipe on an index card so he could post it on the fridge. We experimented with various ways for dad to hold his tiny daughter to support her as she ate. It took some time for him to become comfortable and confident feeding her. I spent a lot of time coaching dad on the importance of pacing with the bottle and watching her skin color as she ate to make sure she wasn't holding her breath. I demonstrated how to transition the baby from a feeding position to a burping position. At first dad looked uncomfortable and clumsy. It didn't take long before he did these things with ease.

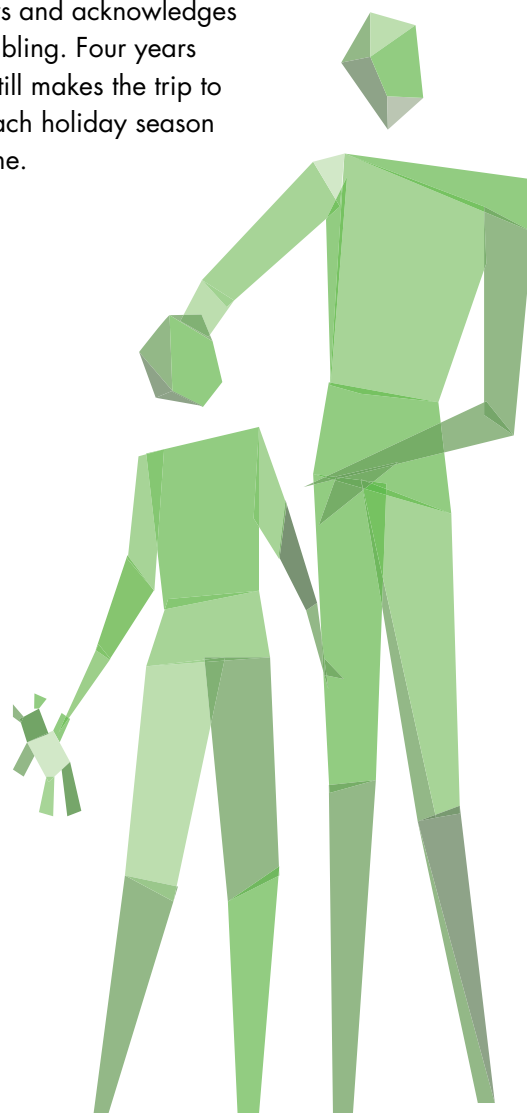
Shortly after Christmas the baby was up to full feeds and maintaining her oxygen saturations on room air. I asked dad if preparations were being made at home for her arrival. Did he have a car seat? A crib? A baby monitor? Bottles? I was beginning to realize that dad was indeed ready to take his baby girl home. There was little else I could do to prepare him.

Dad and baby went home after the New Year. I escorted them out of the hospital and watched as he placed his daughter in her new car seat. We exchanged a hug and I wished him the best of luck. He had tears in his eyes as he thanked me for helping him during the most difficult time in his life.

It was a year later and I was working night shift on Christmas Eve. It was a relatively slow night and I was just settling into a routine when I was called to the front desk. There stood dad holding his red-haired smiling daughter dressed in red and green. I ran out of the unit to greet him with a hug. Dad filled me in on how things were going. There were difficult days, but for the most part, things were going well. He then admitted that without my patience, care and teaching, he didn't know how he could have gotten through such

a difficult time. Dad said that caring for his baby girl at home had been made easy because of how I had helped him prepare. Despite the fact that his daughter was now eating baby food, he still had the index card with the formula recipe on his fridge. He said it was a daily reminder of how my compassion had made a difference in his life.

This is why I am a nurse. Being there on the day this man witnessed the birth of his daughter and death of his wife still haunts me. However, I have hope knowing that I was able to help this broken family mend itself. The fact that this man still remembers and acknowledges me is humbling. Four years later, he still makes the trip to the unit each holiday season to thank me.



# Nurse Week Essay Winner 2013

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## Nursing at CHLA: Making a Difference!



**By Lauren Dombrova, RN**

Not every story ends with “happily ever after,” but that does not negate the happiness within it, or the triumph, which is intermingled with the sadness. It is neither a good thing nor a bad thing, it just is. This story is one of those; it is about a patient named James\*, and the team of nurses on 6 North Inpatient Rehab who cared for him and his family.

When I first saw James, he looked much like any other teenager. Asleep in his bed, napping under the dutiful eye of a loving parent. His brand-new Nikes were poking out from his blanket, and, though his eyes were closed, I could hear the classic '80s rock coming from the CD player. He looked peaceful and content. I could almost let myself believe that James was like any teenager, and that I was not his nurse, but just a friend stopping by to say hello. His peaceful face hid the turbulent truth: James had recently been diagnosed with cancer. It was rare, it was aggressive, and in less than a month, it had robbed him of the ability to move his arms and legs.

James' case was beyond challenging. It took five staff members just to move him in and out of his bed, and an entire team of nurses to provide him with the care he and his family really needed. In the days after he arrived, I knew James would not be a typical patient on 6 North. Our typical patient is greeted as he arrives on a gurney, and hugged goodbye a month or two later as he walks out to resume a life that includes plans for the future, for prom, for college. I knew the narrative of James' life had taken a different turn, and I was particularly mindful that with every new day he was granted, our team needed to make a difference for him and his family.

Shortly before James was discharged from our unit, our nursing team collaborated with our excellent Child Life specialist to organize a music concert for James. The music of choice was '80s classic rock. I had always wanted to ask why he loved the music of that era. Too young to remember it, his enthusiasm surely was not fueled by nostalgia. Then one day it clicked: '80s rock lacks the cynicism of much of the contemporary music of his peers. The '80s brought us not just a questionable array of flamboyant hair options, but also the term *power ballad*: love mixed with strength. It made sense.

I remember James' face as he was wheeled into the schoolroom turned rock arena. Rows of seats were filled with friends and family in '80s attire. Framed pictures of hair bands bedecked the walls, and a VIP pass was placed around his neck. At first he was surprised, but then he beamed that toothy smile we had all come to love. At that moment I saw James as a teenager instead of a patient,



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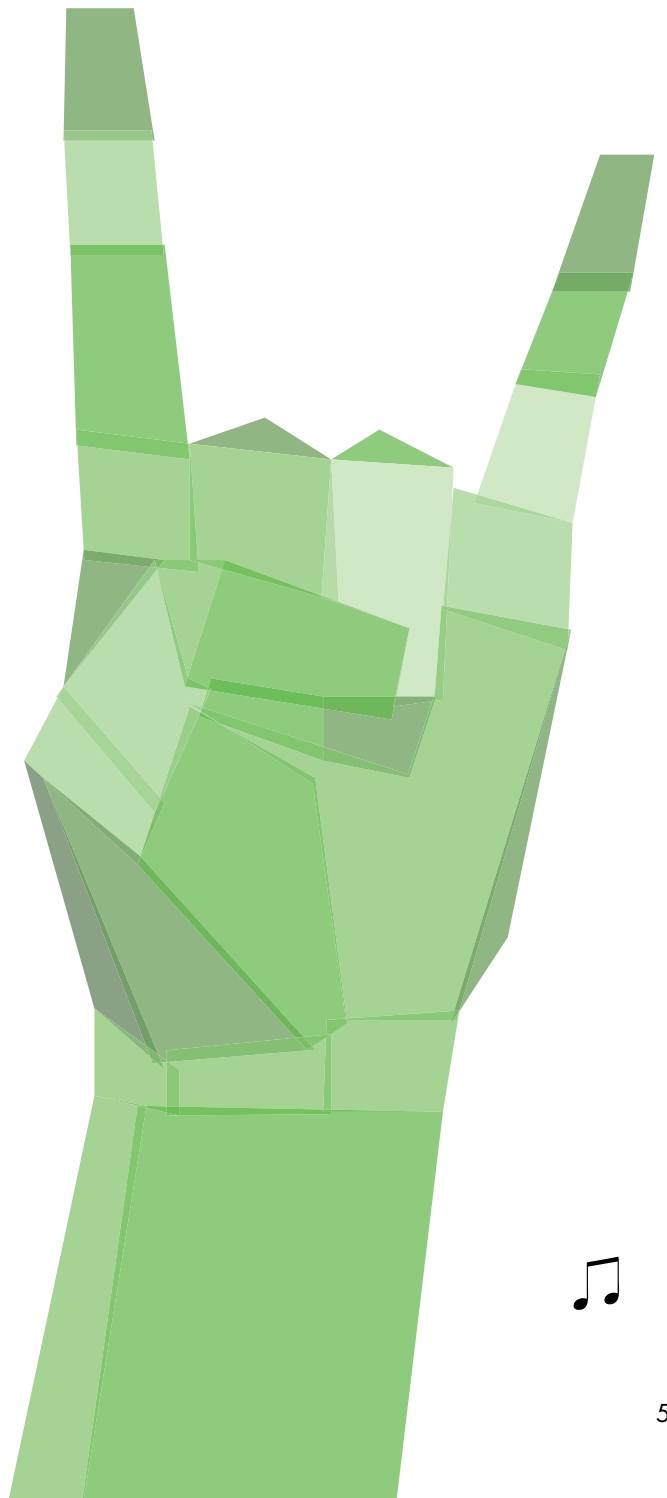
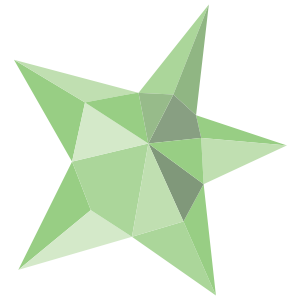
surrounded by those he loved, doing the things he loved, and listening to the music that moved him. This is how I always try to remember him.

James died in November of 2012. His parents tearfully thanked us, over and over again, for the care we had given their son. They commented specifically on how we came together seamlessly to take care of their son. It probably seemed like an endless stream of professionals coming to provide care at just the right time. The truth was, it was the work of a team.

The stories that warm our hearts often focus on the patient who beats all odds: the girl who walks out of the hospital, after being told she would never walk again; the boy in cardiac arrest who lives to tell his story. As a rehabilitation nurse, I see these miraculous recoveries every day, which is the reason I was drawn to this specialty.

I have come to realize that it is these other stories—the ones without fairy tale endings, like that of James and his family—which are the true tests of our ability to make a difference.

*\*Name was changed to protect the patient's privacy.*



# Acknowledgments

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Jessica Kucinskas

### **Editor**

Sarah Brown



## Magnet Oath

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As a representative of this Magnet Hospital, I pledge to uphold the Children's Hospital Los Angeles culture of distinction. As an integral part of this Children's Hospital Los Angeles community, I will continue to promote collegial interdisciplinary teamwork to provide even higher-quality family-centered health care. I will also advocate and support the further advancement of excellence in my own practice through the leadership and empowerment fostered by the core Magnet principles. I will constantly endeavor to strengthen my expertise through new evidence-based knowledge and lifelong learning. Lastly, I do swear to do all in my power to maintain the highest exemplary professional practice.

## Nursing Mission

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### **We create hope and build healthier futures.**

As nursing professionals, we are committed to advancing our practice by:

- Caring for children, young adults, families and each other
- Advancing knowledge
- Preparing future generations
- Knowing that excellence is achieved through collaborative relationships

## Nursing Vision Statement

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Nursing care at Children's Hospital Los Angeles is recognized internationally as a model for nursing excellence. By utilizing best practices, we provide outstanding family-centered care in an environment that honors our diverse community. We strongly promote lifelong learning and collaborative interdisciplinary relationships. In addition, our emphasis on nursing research, leadership and professional development makes Children's Hospital the organization of choice for a career in pediatric nursing.

## Nursing Values

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As nurses:

- We achieve our best together.
- We are hopeful and compassionate.
- We are learners leading transformation.
- We are stewards of the lives and resources entrusted to us.
- We serve with great care.



We Treat Kids Better

[CHLA.org](http://CHLA.org)