



**Empowerment**  
**Engagement**  
**Excellence**



Rush Copley Medical Center

**Rush Copley  
Medical Center  
Is a Magnet<sup>®</sup>  
Recognized  
Hospital**



# Rush Copley: A Magnet for Nursing Excellence

Throughout 2019, the outstanding performance and genuine compassion of Rush Copley nurses culminated in a reason to feel special pride. The American Nurses Credentialing Center distinguished Rush Copley with Magnet Recognition after touring 27 units, meeting more than 200 staff members, 25 community members, and many physicians. This honor comes from the largest and most prestigious nurses credentialing organization in the world. The Magnet Recognition Program® identifies health care organizations for meeting rigorous standards. It is the highest national honor an organization's nurses can achieve. In fact, among 6,300 U.S. hospitals, only 505 U.S. health care organizations earned this coveted recognition.

Furthermore, we are delighted to be noted with seven exemplars, or examples of best practice. To many of us at Rush Copley, this recognition was no surprise. We see excellence every day. Rush nurses take the initiative to improve care, such as reducing pressure injuries. Their dedication is evident in the urgency expressed when promptly moving ED patients who have chest pain into the cardiac cath lab. It is obvious in the reduction of catheter-associated urinary tract and central line infections. It is clear in the gentle way they hold a newborn or carefully help a patient gain the confidence to walk after surgery.

For this commitment to excellence, Rush Copley nurses are rewarded with high job satisfaction and an empowering, appreciative, supportive community. Likewise, Rush Copley is rewarded with high nurse retention and patient satisfaction rates.

Achieving Magnet recognition reinforces the culture of excellence that is a cornerstone of how we serve our community. It is tangible evidence of our nurses' commitment to providing the very best care to our patients, of which we are very proud. We are also continually motivated to further improve our care. In the following pages, you'll discover examples of care that demonstrate why our nurses earned this coveted status.

We congratulate each nurse for sharing in this achievement.



**Mary Shilkaitis, MSN, MBA, RN,  
NEA-BC, FACHE, SVP Operations,  
COO and CNO**

*Mary Shilkaitis*

# Leveraging Consistency and Communication to Enhance Nursing

In 2018, Rush Copley earned full accreditation in shared governance by the Forum for Shared Governance. However, we had several areas from the survey results that we wanted to improve. This year, we were able to address these issues by enhancing our processes — making 2019 a great year for our nursing staff.

Our first accomplishment was establishing a consistent, thorough orientation process to offer new shared governance members the support they needed to run effective partnership meetings. Now, once each month, new members, myself, and administration meet for an official orientation. Together, we answer questions and tailor guidance to each department's particular needs. In addition, new members are provided with the tools they need to remain organized. This standardized process is a tremendous improvement. We look forward to new members feeling more comfortable and welcome into their new role.

We also added a vice chair to all committees and congresses to work with the chairperson for a smoother transition once the chair has completed his or her term. The new chairs can then begin their term with a higher command of the tasks.

Encouraging greater participation from shared governance members was another initiative. This past year, many departments leveraged Padlet, an online communication board for sharing and discussing information.

We also gave members from several departments the option to participate in meetings via phone, which makes life easier for staff to attend meetings when off campus. The change has already increased participation and we look forward to continual growth!

Another goal inspired by the Nursing Executive Congress addressed staffing effectiveness. This year, staffing presented challenges regarding Cost Containment Days (CCD) and floating. To respond, a separate staffing effectiveness committee, comprised of members from most nursing departments and the Nursing Administrative Supervisors, met quarterly to address concerns. With better communication, new guidelines decreased floating rates and improved nursing satisfaction.

I am proud of our nurses' hard work throughout the year! We made great strides — in part, because nurses have a voice here! That's empowering. I want all our nurses to join me in looking ahead with optimism as we begin 2020 at Rush Copley!



**Cheryl Hollmier, BSN, RN,  
CMSRN, Chair, Nursing  
Executive Congress**

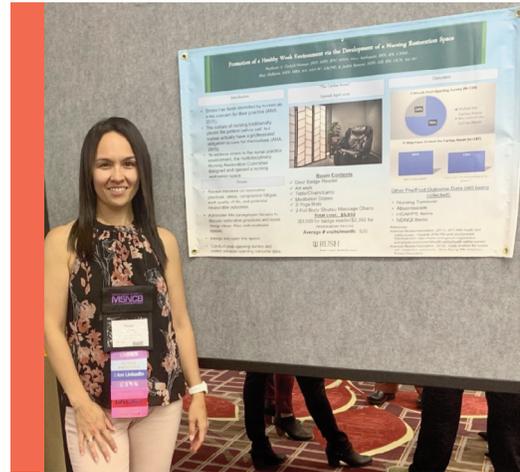
A handwritten signature in black ink that reads "Cheryl Hollmier". The signature is written in a cursive, flowing style.

# Transformational Leadership

## Retreat Sparks System-wide Dialog

In October, nursing leadership participated in a Rush Nursing Integration Retreat. The retreat included leadership from Rush Copley, Rush Oak Park, Rush University Medical Center, and Rush University College of Nursing who met to:

- Gather nursing leaders from across the RUSH system depicting historic milestones.
- Develop a system-wide, 2021-2025 nursing strategic plan
- Build a community of collaborators for positive impact across the system.



Tanya Antal, MSN, RN, CMSRN, SCRNP

The Rush system has a rich nursing history. Past accomplishments were highlighted depicting historic milestones. The 2019 goals were also reviewed. Rush Copley was represented by Tanya Antal, Vice Chair Nursing Executive Congress and Clinical Nurse Resource Team, who presented Nurse Restoration and the Caritas Room.

The current state of nursing across the system was discussed using the World Café methodology, discussing Strengths, Weaknesses, Opportunities, and Risks (SWOR). Goals for 2020 were presented. The collected information was used to compile recommendations and strategies. With the team's priorities in mind, a draft of the Rush Nursing Integration Strategic Plan 2021-2025 will be developed.

The retreat was one of many system integration activities in 2019 that worked to benefit all Rush nurses.

## New Program Prepares Future Leaders



To feel empowered, nurses need resources to promote success and grow professionally. In 2019, the Clinical Coordinator Development Program launched and focused on developing the skills, knowledge, and attitudes for effective leadership. Participants included current and new clinical coordinators, as well as nurses who were identified for their leadership potential.

This program's four quarterly sessions focused on:

- Roles and responsibilities
- Emergency management
- Conflict management
- Human resource management

Technology, applications, and simulations were utilized in the program to enhance each nurse's experience.

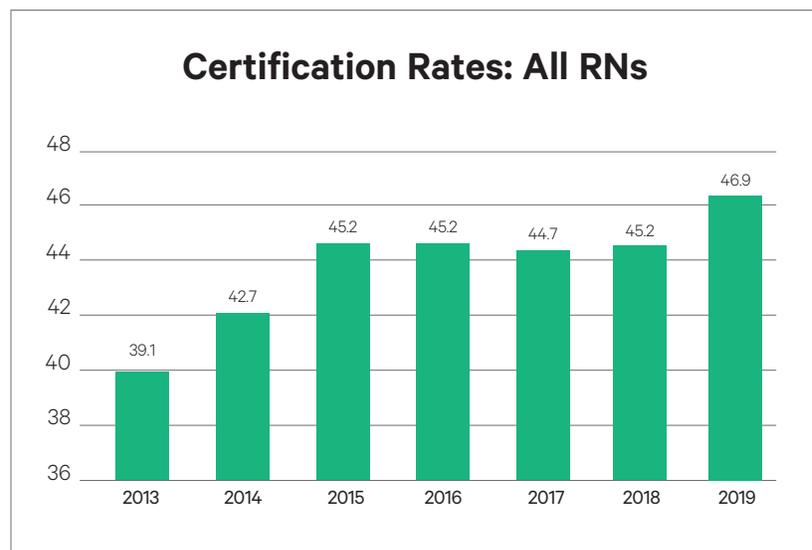
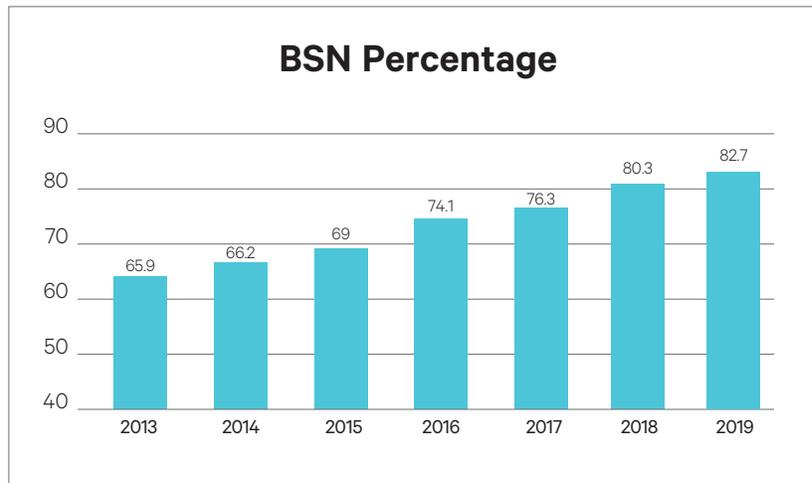
To date, approximately 95 nurses have completed more than 75 percent of the redeveloped program. In the next fiscal year, data will be analyzed and presented to leadership teams. Over time, the information will guide changes to the curriculum to meet the evolving needs.

# Structural Empowerment

Lifelong learning is the cornerstone of professional growth. In 2019, the Rush Copley nursing community achieved record-high percentages for earning nationally recognized certifications, and surpassed the 80% BSN by 2020 initiative.

Congratulations to the following registered nurses for obtaining their national specialty certification:

- Melissa Acton**, RNC-OB, L&D
- Melissa Banks**, RNC-OB, L&D
- Wendy Biela**, CNOR, Surgery
- Denise Candela**, RNC-OB, Maternal Fetal Medicine
- Lauren Eischen**, WCC, MS2
- Jessie Elizalde**, RNC-NIC, NICU
- Shannon Esler**, CMSRN, MSII
- Ivette Fernandez**, CMSRN, MSI
- Melissa Kruse**, CMSRN, MSII
- Kathryn Kucala**, RNC-NIC, NICU
- Dawn McQuality**, CNML, ICU
- E. Javier Medero**, NEA-BC, Perioperative Services
- Ewa Merchel**, RNC-OB, L&D
- Maryssa Quinn**, RNC-NIC, NICU
- Karina Sanchez**, WCC, Resource Team
- Wendy Siewierski**, CNOR, Surgery
- Jamie Tabrizi**, RNC-MNN, Obstetrics
- Patrycja Tyski**, RNC-NIC, NICU
- Kim Vandervall**, RNC-OB, L&D
- Kathryn Weber**, RNC-OB, L&D
- DeAnna Zaccardi**, CGRN, GI/Pain Clinic
- Madonna Zafra**, WCC, MSI



## Heimer Becomes Beacon of Leadership



**Andrea Heimer, MSN, RN, CCRN-K**

Andrea Heimer was appointed chair of the American Association of Critical Care Nurses' (AACN) Beacon Award redesign task force. Heimer was chosen for her passion and knowledge of the Beacon Award improvement and outcomes processes. Heimer has been an AACN Beacon reviewer since 2018. In her role as chair, she will establish agendas for meetings, evaluate the group's progress, ensure desired outcomes, and identify and recommend future chair candidates.

# Recognition for Nurturing Tomorrow's Leaders

The American Nurses Credentialing Center (ANCC) Practice Transition Accreditation Program (PTAP) sets the global standard for residency programs that transition registered nurses (RNs) into new practice settings.

In March, Rush Copley's START Nurse Residency Program received Accreditation with Distinction from the ANCC. Since its inception in 2010, the Rush Copley START Nurse Residency Program has offered 19 cohorts and successfully transitioned 186 newly licensed nurses to the hospital setting. In Illinois, Rush Copley is currently one of only 16 hospitals with an accredited residency program for newly licensed nurses.

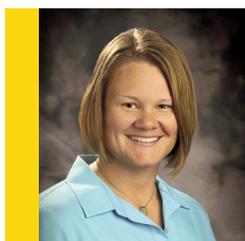
To receive this accreditation, organizations must exemplify how their nurses effectively enhance the skill, knowledge, behaviors, and attitudes of nurse residents. At Rush Copley, START nurses work in critical care (adult and neonatal), women's health, medical-surgical, intermediate care (ICA), physical medicine and rehabilitation (PMR).

Key categories that are measured and evaluated in the accreditation process include leadership, practice-based learning (PBL), organizational enculturation, quality outcomes, program development and design, and professional development of the nurse residents. All of these measures are guided by the Rush Copley Nursing Professional Practice Model.



## At Rush Copley, START stands for:

- Skill development
- Thinking critically
- Applying evidence at the bedside
- Resource utilization and support
- Transitioning into nursing practice.



**Claire Anderson, MSN,  
APRN, FNP-BC, CHFNP**

## Telephone Triage Taps Anderson for Guidance

Claire Anderson, Director of Clinical Services and Advance Practice Providers for Rush Copley Medical Group was selected to serve on The American Academy of Ambulatory Care Nursing (AAACN) task force. There, she'll participate in the establishment of guidelines and curriculum for teaching telephone triage. Anderson is one of five members on this national taskforce.



## Initiative Supports Amplifying Nurses' Innovations

Congratulations to Olivia Lemberger, Clinical Nurse Educator, Nursing Professional Practice on being awarded one of 12 inaugural fellowships from the Johnson & Johnson Nurse Innovation Fellowship program. Lemberger was chosen from more than 150 applicants nationwide. She will work with peers from across the nation to amplify and integrate nurse-led innovations.



**Olivia Lemberger, MSN, RN, CHSE**

## Recognition for Reaching the Pinnacle

Pinnacle Nurse Leaders are identified by their organization as extraordinary nurse leaders. This year, Barb Douglas, Director of Critical Care and Respiratory Services was awarded the Pinnacle Nurse Leader Recognition at the Power of Nursing Leadership event, celebrating the impact and achievements of nurse leaders throughout Illinois.



**Barb Douglas, MBA, BSN, NEA-BC**

## Student Nurses Initiative Earns Koerner Recognition

Katie Koerner received the 2019 Community Effort Award from the Illinois Organization of Nurse Leaders (IONL). This



**Katie Koerner, DNP, MBA, RN, CNML**

award is given to nurses who have an impact on their facility, community, and/or the nursing profession. They earn the award by initiating a project or innovation that has lasting impact on their profession. As IONL's Member Engagement Committee Chair, Koerner led the initiative to include student nurses as members to help them realize their potential and the importance of professional organizations to their career.

# Emergency Department Teaches How to Respond to Bleeding and Opioid Overdoses

In honor of the Emergency Nurses Week in October, the Emergency Department (ED) team set up a booth in the main lobby to highlight community outreach initiatives administered in partnership with the fire department and emergency medical system.

Approximately 75 people learned how to care for patients with uncontrolled bleeding during emergency situations. Participants included Rush Copley administrators, physicians, nursing staff, social worker, chaplains, patients, visitors, and volunteers. Attendees learned to recognize life-threatening bleeding, alert first responders, and how to stop the bleeding. Applying direct pressure on the injury, packing the wound with gauze or any piece of fabric, and applying a tourniquet are the vital initial responses.



**Jack Taxis, Becky Kovack, Dr. Hesham Hassaballa demonstrate how to stop bleeding.**

The ED team also spread information on the opioid epidemic and how anyone can help when an opioid overdose is suspected. More than 60 individuals attended this session which focused on identifying why a patient is unresponsive and when to use naloxone to counter the overdose effects. Hands-on experience taught attendees how to administer naloxone with an auto-injector and use the atomizer for the intranasal route. These sessions helped to establish a prepared community.

## Fellowship Supports Nurse's Research on Mindful Moments



**Stephanie Patronis, BSN,  
RNC-NIC NICU**

Stephanie Patronis, NICU Clinical Nurse, was awarded the Rush Nursing Research Fellowship sponsored by the Center for Clinical Research and Scholarship (CCRS) at Rush University. Only one clinical nurse, from each Rush hospital, who is interested in pursuing a research project is awarded the fellowship. Mentored by PhD-prepared nurses from the CCRS, Patronis receives eight paid hours per week to study, develop, implement, evaluate, and disseminate info on her project. Patronis will research how Mindful Moments, short yoga/mindfulness/meditation sessions before a shift, can help nurses decrease stress and burnout.



## Future of Nursing Scholarship Recipients

Future of Nursing Scholarship recipients are awarded a \$4000 scholarship to help fund their graduate-level nursing education. This year, Rush Copley congratulates:

**Tammy L. Allen**, BSN, RN, CNML ICA

**Claire L. Anderson**, MSN, APRN, FNP-BC, CHFN

Rush Copley Medical Group

**Jessica Grant**, BSN, CMSRN Resource Team

**Lisa A. Hernandez**, BSN, RNC-MNN Obstetrics

**Susan Miller**, RNC-NIC, MSN, NICU

**Theresa A. Noonan**, BSN, RNC-OB L & D

**Molly D. Pretet**, BSN, RN, CPPS NSU

**Valerie A. Ricken**, BSN, CGRN GI/Pain/IVF

**Nicole A. Welcing**, BSN, RN, PCCN ICA

**Maria T. Yelo**, BSN, RN, PCCN ICA

**Kerry D. Zenobi**, BSN, CEN ED

**Janet Perez**, BSN, RNC-OB L & D

## Excellence in Patient Care Earns Scholarship

Each year, the medical staff honors three nurses with the Clinical Excellence Award for their performance and dedication to patient care. 2019 recipients were Jeannine Fox, Stephanie Sutton, and Nicole Eallonardo. Each received a \$500 scholarship for their continuing education.



**Jeannine Fox**, BSN, RN,  
CRRN, Rehab



**Stephanie Sutton**, BSN,  
RN, DSU/PACU



**Nicole Eallonardo**, RN, ICU

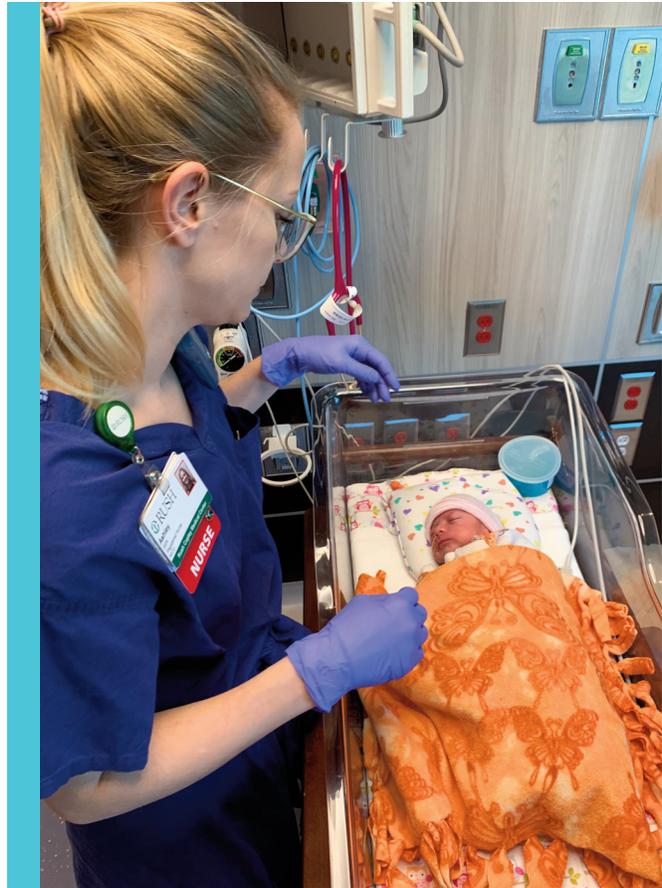
# Perinatal Care Award Marches On

In 2019, the March of Dimes honored Ashley Talip, Clinical Nurse, NICU with the Perinatal Nursing Excellence Rising Star Award, which recognizes and promotes nursing excellence for the care of mothers and babies. Talip joined the NICU team as



Ashley Talip, BSN, RN

a new graduate in February 2016. During her first year, she joined two committees to help improve respiratory management for critically ill infants with evidence-based practice changes.



*Her preceptors were amazed at her ability to recognize subtle changes in acutely ill infants as a new graduate nurse, thereby redirecting treatment that led to a positive patient outcome. Her ability to remain calm and stay focused during critical events was noted by the entire NICU team. Equally impressive is her positive attitude and gentle demeanor with NICU parents...She has accomplished more in her first three years as a nurse than many accomplish in a lifetime.*

—Nomination Document

## Enhancing Knowledge through Evidence-Based Education: Incorporating Interactive Computer-Based Learning in Orientation

In June, interactive computer-based learning modules, designed by the American Association of Critical Care (AACN), enhanced the START Nurse Residency and Nurse Fellow programs for ICU, NSU, and ICA RNs. These supplemental modules, known as the Essentials in Critical Care Orientation (ECCO), help novice progressive and critical care nurses develop the skills, knowledge, and confidence to optimize patient outcomes.

Clinical Nurse Educators Miriam Vejar-Ramirez and Andrea Heimer collaborated with Tammy Allen, Dawn McQuality and Barb Douglas to determine which modules were pertinent to instruction. Now, clinical nurse educators track when assigned modules are completed and may assign additional modules for further learning opportunities. This is an exciting improvement in orientation for novice nurses in progressive and critical care specialties.



# Exemplary

# Professional Practice

In June, Rush Copley partnered with Rush University Medical Center to achieve an Epic milestone. The goal was to implement Epic to meet quality, operational and financial goals, as well as standardize clinical and operational processes, and streamline workflows in delivering care. In September, the Clinical Informatics Committee and the Epic Credentialed Trainer/Super User Sub-Committee were launched to support interdepartmental communication and feedback from clinical nurses regarding documentation.



From planning to training to go-live to optimization, nurses played a significant role in Epic's success. Twenty-four credentialed trainers and 240 clinical super-users assisted in training and supporting more than 1500 clinical end-users. This team quickly became the internal experts in their modules. Nursing leadership, subject matter experts (SMEs), and super-users assisted in:

- Mapping workflows
- Identifying changes to improve patient care
- Incorporating a model of care and clinical decision support into electronic documentation.

Continued efforts are underway to review safety metrics, identify risks and opportunities, review risk reduction plans, and embrace the opportunity to make clinical documentation changes that improve patient care.

# Safety Observer Training Improves Consistency

To improve workplace safety and behavioral health patient care, nurse directors performed a gap analysis on the state of the safety observer role. Their results showed that RNs, patient care technicians and secretaries may be assigned to a safety observer role without a consistent training process. As a result, the Restraints and Safety



Observer Committee implemented the following initiatives:

- The safety observer checklists in the Emergency Department (ED) and inpatient units were standardized so all observers reference the same checklist.
- Safety Observer Guidelines policy was revised to require the standardized checklist during handoff and implement visitor guidelines.
- Safety observer training includes how to perform an environmental check and remove any item, device, or equipment patients could use to harm themselves.
  - The team trained 577 clinical staff in 72 sessions over six days.
  - The team will complete informational rounds during partnership meetings with ancillary teams, such as respiratory, EVS, physical therapy, radiology, and care management.
- A safety observer orientation that includes a NetLearning module; four-hour shadow time observing a behavioral health patient; and one-to-one training on environmental checks, documentation, and handoff.
- Improved safety observer documentation in electronic health records.

Additionally, organizational leaders hold daily safety huddles to address patients' needs and care plans in behavioral health.

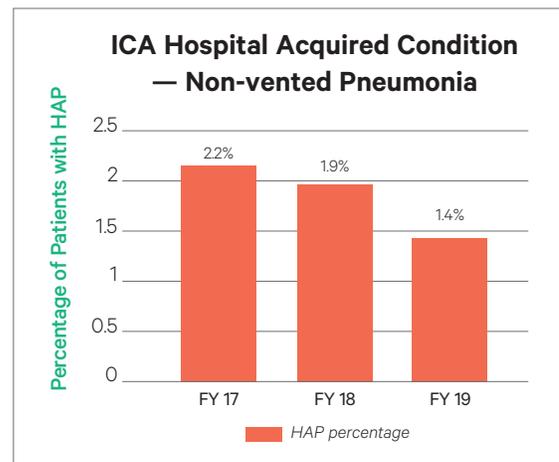
These changes assure a higher measure of quality and safety for patients and staff.

## Reducing Infection Rates with Oral Care

Hospital-Acquired Pneumonia (HAP) is one of the most common infections responsible for high morbidity and mortality rates. While ventilators are sometimes associated with pneumonia (VAP), cases of non-ventilator associated pneumonia are often overlooked and under reported. The Intermediate Care Area (ICA) practice committee reviewed clinical practice guidelines regarding non-ventilated, hospital-acquired pneumonia (NVHAP) and learned that limited studies show educating caregivers on oral care can reduce HAP rates.

In response, the ICA implemented oral care practices to prevent NVHAP. Education includes holding a competency day with return demonstrations, placing visual reminders in patient rooms, and distributing flyers in the unit. A bulletin board for family education was placed near the entrance of the ICA.

During the past two years, outcomes revealed that brushing patients' teeth or dentures, as well as the soft and hard palate, after meals and before sleep, significantly reduced NVHAP the ICA.

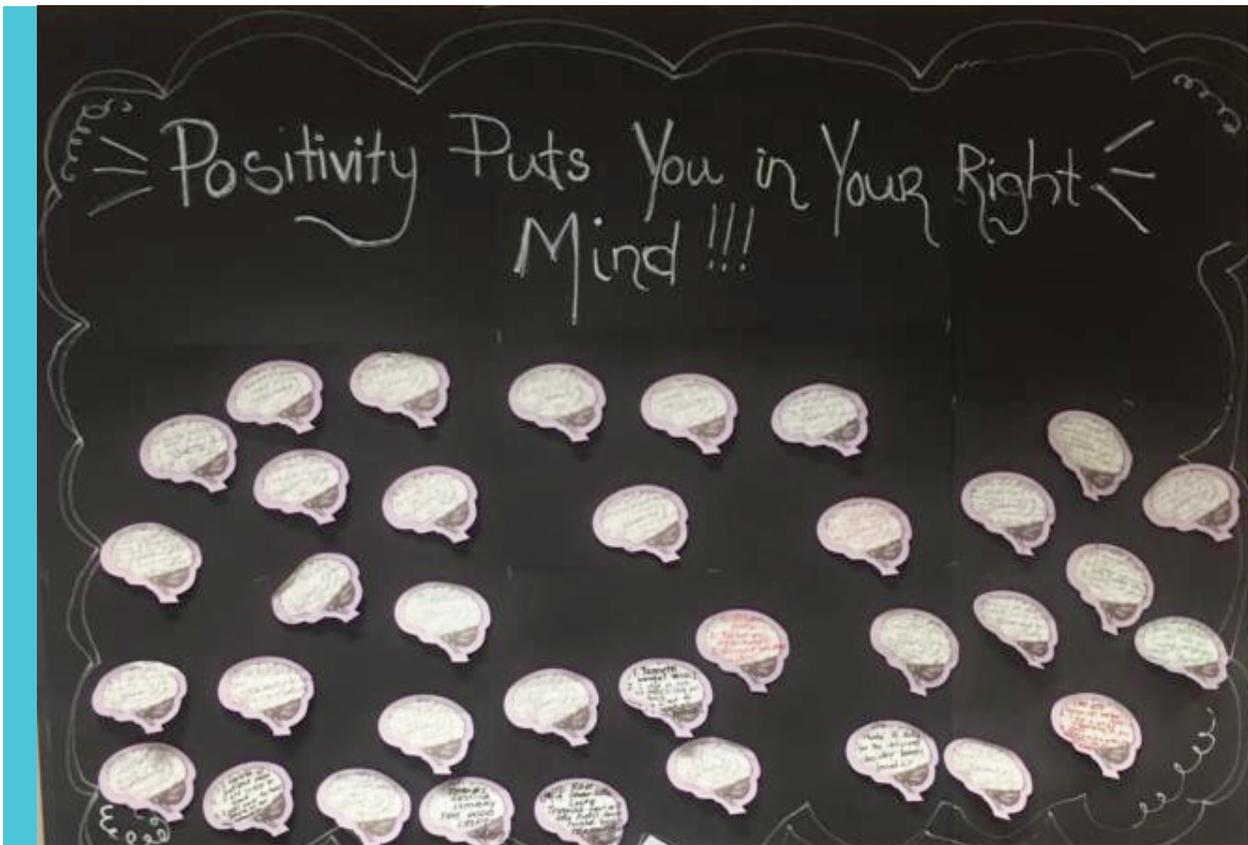




## ICA Gets Creative to Enhance Their Work Environment

The Immediate Care Area (ICA) team-building committee routinely meets to focus on enhancing their practice environment, improving retention, and giving back to their patients and community. Some of their great initiatives include:

- Surveying ICA staff, which revealed a need to develop a healthy practice environment while managing the department's workload. Staff also wanted to celebrate the team's successes.
- Raising awareness of a team member's need for assistance by writing his or her name in red on the staffing board. Then, other team members know to assist. If a staff member sees a peer struggling, they can also write the coworker's name in red.
- Maintaining a system that ensures staff members have an uninterrupted, 30-minute meal. When each shift starts, partners are assigned and required to schedule meal breaks. Prior to their break, staff hand off to their partner.
- Arranging potlucks, summer picnics, Healthplex workouts, volley ball tournaments, and holiday celebrations throughout the year. Monthly raffles raise funds to ensure events are free or only a minimal fee.
- Planning a craft night to make holiday ornaments for hospitalized patients; assisting the non-profit, Feed My Starving Children, pictured above, by packing nutritious meals to feed the hungry; and caroling at a skilled nursing facility.



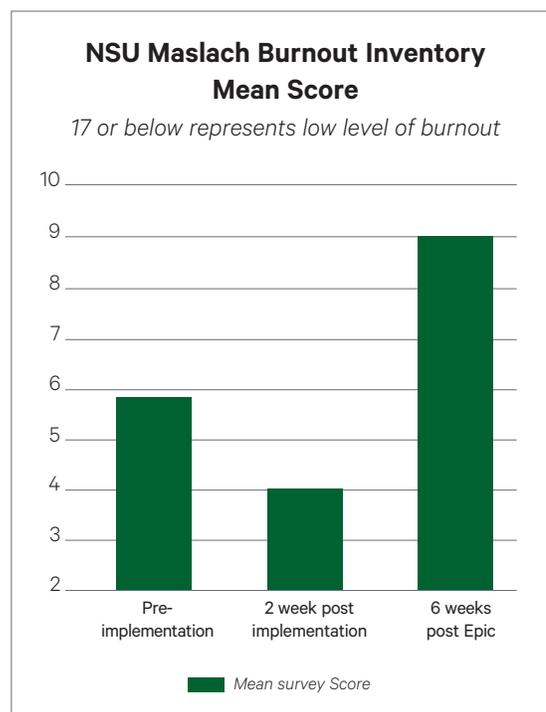
**Burnout scores decreased after implementing the positivity board. Stress rose slightly after Epic was implemented, but maintained a low-level.**

## NSU Uses Positivity to Fight Burnout

To reduce burnout in the work environment, the Neuroscience Unit (NSU) repeated a study which showed that positivity training helps decrease burnout.

The study began by using the Maslach Burnout Inventory (MBI) to assess nurses' emotional exhaustion. Unit nurses were asked to write three positive items from their shift — no matter how challenging — and place them on the positivity board. According to the MBI, a score of 17 represents low-level burnout; 18 – 29 shows moderate level; and more than 30 is high-level of burnout. Because the organization would be implementing EPIC, a new electronic health record, and this could cause stress among staff, the MBI was administered at key points during the implementation process.

The graph notes that burnout scores decreased after implementation of the positivity board. After Epic implementation, scores rose slightly, but remained in the low range confirming the value of positivity in practice.





# New Knowledge, Innovations and Improvements

## NICU Design: Building a Nurturing Environment

At the heart of Family Centered Care (FCC) is the belief that the health care team and the patient's family are partners in meeting the needs of the patient and loved ones. In order to provide FCC, a multidisciplinary team formed to redesign Rush Copley's Neonatal Intensive Care Unit (NICU). Early on, NICU staff recognized the needed to improve accommodations for parents and visitors.

Louise Fazio, MSN, RNC-NIC, CNML, NICU Clinical Nurse Manager, started by asking the staff to develop a "wish list." Three NICU clinical nurses Beth Williams, RN, RNC, Sherry Rees, BSN, RNC Katherine Chandler, BSN, RNC, as well as Nikki Sosa, NICU PCT, and Vanessa Nonato, RT represented their peers on the design team. Discussions focused on the needs of the baby, parents, families and the NICU Care Team.

The new design called for all-private rooms so babies reap the health benefits of spending more time with their parents. Parents can enjoy a convenient restroom and shower. Staff wanted parents to have an area where they could relax so a separate area accommodates computers, movies and other amenities.

The staff also have a comfortable space to relax during breaks. Specialty carts "mobilized" equipment and supplies for better efficiency. With varied simulations, nurses enhanced additional work flows.

After months of design, planning, and simulations, the new NICU offers safe quality care for every baby and an atmosphere of comfort and compassion for the families and staff.



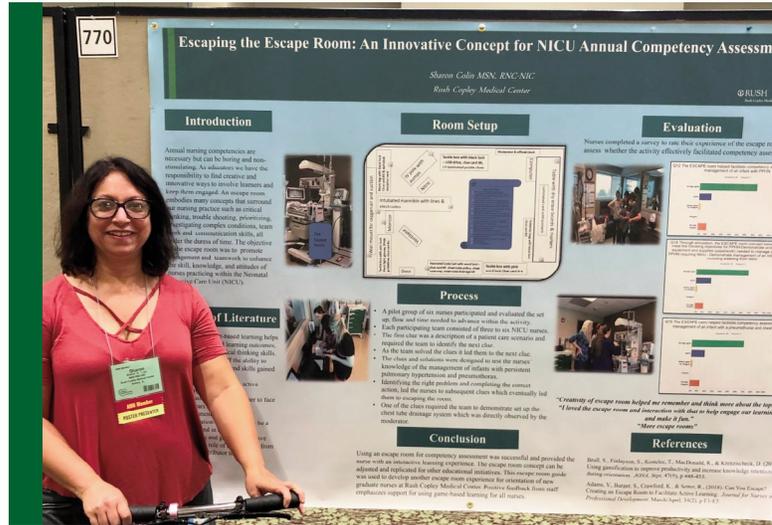
### The Redesign Team

- Anderson Mikos Architecture
- Louise Fazio, MSN, RNC-NIC, CNML, NICU Clinical Nurse Manager
- Beth Williams, RN, RNC
- Sherry Rees, BSN, RNC
- Katherine Chandler, BSN, RNC
- Nikki Sosa, PCT
- Vanessa Nonato, RT
- And a multidisciplinary team of neonatologists, parents, nurses, and facility and ancillary staff

# Podiums, Posters and Publications

## Escape Rooms Help Assess Competency

At the 19th Annual Academy of Neonatal Nursing's National Conference in September, Sharon Colin, Clinical Nurse Educator, NICU, presented *Escaping the Escape Room: An Innovative Concept for NICU Annual Competency Assessment 9*. Her talk explained how interactive game-based learning helps achieve sustained learning outcomes, improves critical thinking, and helps staff transfer knowledge and skills to other situations. Likewise, escape room games engage learners, promote teamwork, and meet the objectives of competency assessment. Colin also presented the topic at Edward Hospital's 16th Annual Evidence-Based Practice Conference in October.



**Sharon Colin, MSN, RNC-NIC**



**Suzanne Sterchi, MSN, RN, CNOR, NEA-BC**



**Sharon Brooks, MSN, APRN, RNC-OB, CENP**



**Mary Shilkaitis, MSN, MBA, RN, NEA-BC, FACHE**



**Laurel Ris, MBA**

## Rekindling Passion for Nursing Sparks Better Care

In September, Suzanne Sterchi, Sharon Brooks, Mary Shilkaitis, and Laurel Ris, published "Reconnecting Nurses to Their Passion and Enhancing the Patient and Family Experience" in the *Journal of Nursing Administration (JONA)*. They discussed how Rush Copley integrated Watson's Caring Theory into its values and culture, and the motivators that improved nurses' practice and the patient experience.



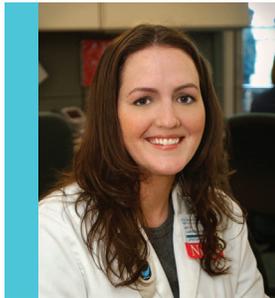
**Kim Abner, MSN, RN, CMSRN, CNL**

## How an Acuity Tool Improves Productivity and Outcomes

Kim Abner, Coordinator Quality Analytics, authored “Standardizing Patient Acuity: A Project on a Medical-Surgical/Cancer Care Unit.” MedSurg Nursing Journal published the article in December, 2018. The piece discussed using an objective, standardized acuity tool to create nurse/patient assignments that improve productivity and clinical outcomes.



**Kathy Ostrander, MSN, RN, CPN, Clinical Nurse Educator, ONP**



**Beth Garrison, MSN, MBA, APRN, ACNP-BC, CWOCN, RN-BC, Clinical Training Coordinator, Epic**

## Real-Time Assessments Improve Satisfaction and Savings

In March, Kathy Ostrander, Clinical Nurse Educator, ONP and PMR, and Beth Garrison, Clinical Training Coordinator, Epic presented “One Hospital’s Experience with Implementing On-Demand Annual Competencies for Nurses” at the 36th Annual Rush University Forum for Research and Clinical Investigation. They discussed higher clinical nurse’s satisfaction and the organization’s financial savings when on-demand competency assessments are completed in real-time. Plus, Ostrander and Garrison were awarded third place in the poster judging!

## Global Innovations into Practice

Olivia Lemberger presented “An Integrative Review of Cross-Industry Global Innovation: Evidence-Based Strategies for Nursing Practice” at the Rush System Research Symposium in February.

## Restorative Spaces: A Healthy Addition in the Workplace

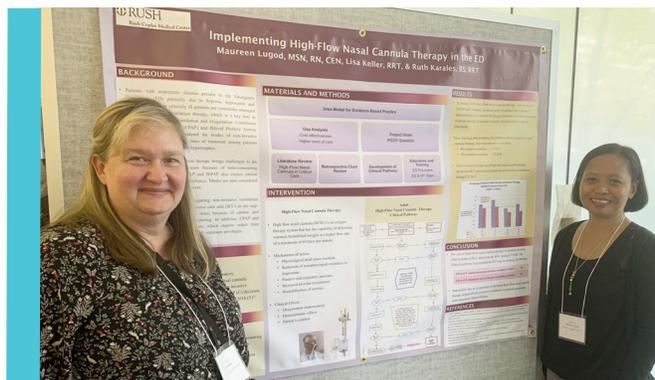
At Sigma Theta Tau’s Creating Healthy Work Environments Conference in February, Mary Applequist and Stephanie Gedzyk-Nieman, Associate Professor at Lewis University, took the podium to present “Promotion of a Healthy Work Environment via the Development of a Nursing Restoration Space.”



**Mary Applequist, BSN, RN, CNML and Stephanie Gedzyk-Nieman, DNP, RNC-MNN**

# Reducing ICU Admissions

At the University of Chicago Medicine's 2019 Annual Nursing Research and Evidence-Based Practice Symposium, Maureen Lugod, Clinical Nurse Educator, Emergency Services, Lisa Keller, Adult Respiratory Clinical Specialist and Ruth Karales, Manager Respiratory Therapy presented "Implementing High-Flow Nasal Cannula Therapy in the ED." They discussed using high-flow nasal cannula therapy in patients who have respiratory distress and the resulting reduced ICU admissions.



**Lisa Keller, RRT and Maureen Lugod, MSN, RN, CEN.**

## Addressing Opioid Abuse Use Before it Starts

Karyn Garcia, Clinical Manager at Castle Surgical Center, presented "Teaching Surgical Patients Safe



**Karyn Garcia, MSN, RN, CAPA**

Opioid Use" at Edward Hospital's 16th Annual Evidence-Based Practice Conference in October. With both the poster and the podium, Garcia discussed the value of standardized patient discharge education regarding safe opioid use, storage and disposal. Patients were also contacted seven days after surgery to make sure they understood the nurse-led, teaching session and to have questions answered.

## Taking a Stand on Falls in the ED

In October, Maureen Lugod, Clinical Educator Emergency Services, presented "Help Me I've Fallen! Implementing Post-Fall Huddles in the ED" at the Emergency Nurses Association (ENA) National Conference in Texas as well as the Illinois ENA Spring Symposium. Lugod discussed how post-fall huddles helped identify the cause of falls, which decreased with staff's heightened awareness.

## Opening the Door to the Caritas Room

In Chicago, Tanya Antal, Resource Team Clinical Nurse, attended the American Medical Surgical Nursing (AMS) Annual Convention where she presented "Promotion of a Healthy Work Environment via the Development of a Nursing Restoration Space." Tanya spoke on developing the restorative Caritas Room, why nurses use the space, and the inevitable outcomes.



**Tanya Antal, MSN, CMSRN, SCRNP**

## 400 More People Gain a Stroke of Insight

Deb Brunelle, Manager Neuroscience Services/Stroke Coordinator generously spent time educating the community on: recognizing the signs and symptoms of stroke; calling 911 quickly; driving to the hospital; and caring for the aging brain. Brunelle's community education reached almost 400 people!



**Deb Brunelle, MSN, RN, CNRN, SCRNP**

# We Are Magnet

Rush Copley Medical Center achieved Magnet® recognition in January as a reflection of its nursing professionalism, teamwork and top tier outcomes in patient care. The American Nurses Credentialing Center's Magnet Recognition Program® distinguishes organizations that meet rigorous standards for nursing excellence. With this credential, Rush Copley joins the global community of Magnet-recognized organizations which includes the Rush University System for Health (RUSH) partner hospitals – Rush University Medical Center and Rush Oak Park Hospital. Just 505 U.S. health care organizations out of more than 6,300 U.S. hospitals have achieved Magnet recognition.

Rush Copley nurses set the standard when it comes to quality, compassionate patient care and Magnet recognition provides our community with the ultimate benchmark to measure that care.

Achieving Magnet recognition reinforces the culture of excellence that is a cornerstone of how Rush Copley serves our community. Rush Copley received seven exemplars, or examples of best practices in areas that include the following:

- Keeping Care in Healthcare – Rush Copley nurses were recognized for their ability to connect passion and caring of patients into practice
- Nurse satisfaction – 16 of 21 units exceeded the national benchmark
- Hospital acquired pressure injury rate outperformed benchmark in 100 percent of nursing units
- Central line associated blood stream infection outperformed benchmark in 100 percent of nursing units
- Catheter associated urinary tract infection outperformed benchmark in 100 percent of units
- Ambulatory Emergency Department long bone fracture time to pain management outperformed benchmark
- Emergency Department door to balloon time (time to get a patient to a cardiac catheterization) outperformed the benchmark

Research demonstrates that Magnet-recognized organizations are commonly shown to have higher patient satisfaction with nurse communication, lower patient mortality rates, higher job satisfaction among nurses and increased nurse retention rates.







Rush Copley Medical Center