

Nursing Annual Report 2021



2021 **Nursing Annual Report**

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Lindsey Casey, MSN, RN, NEA-BCSenior Vice President, Chief Nursing Officer

A letter from the Chief Nursing Officer

Dear nursing colleagues,

It is my absolute pleasure to share with you the Children's Hospital New Orleans 2021 Nursing Annual Report. This publication highlights our exceptional nursing team and their dedication to nursing excellence despite the continued challenges of the pandemic, the national nursing shortage, and one of the strongest hurricanes to every hit Louisiana, Hurricane Ida. I am incredibly proud of the countless accomplishments of our nurses as they stayed focused on our journey to Magnet® designation, and I am honored to work alongside such dedicated clinicians who continue to live out our Who Dat culture by saying yes, or "We Dat" to the children of Louisiana and the Gulf South.

I hope you enjoy getting to know our team, reading about our achievements, and reflecting on such a memorable year.

Thank you,

Lindsey Casey, MSN, RN, NEA-BC Senior Vice President, Chief Nursing Officer

Guiding our efforts

Vision: To be the regional leader in pediatric nursing excellence by caring for every child as our own.

Mission: To provide comprehensive, compassionate pediatric nursing care for all children through communication and collaboration to deliver the highest quality care with a commitment to education, professional development, and a nursing model that is rooted in evidence-based practice and research.

Nurse Satisfaction

Children's Hospital values the impact nurses have in the organization and recognizes employee engagement as an important factor for success.

 Children's Hospital utilizes the National Database of Nursing Quality Indicators (NDNQI), an RN survey to evaluate RN satisfaction annually.

Nurse Sensitive Indicators

- Children's Hospital compares nurse-sensitive quality indicators to national benchmarks through NDNQI to ensure that we are providing the best and safest patient care.
- Data is submitted quarterly to NDNQI, and indicators are compared at the unit level to similar unit types in other hospitals.

Exceptional Patient Experience

- Children's Hospital evaluates perceived performance by comparing patient satisfaction scores to national benchmarks
- Children's Hospital uses the National Research Corporation (NRC) survey tool to evaluate patient and family experiences and identify areas for improvement.
- Children's Hospital began surveying in all ambulatory areas in the first quarter 2019.

The data that Children's Hospital has obtained reflects outperformance greater than 50% of the time for eight consecutive quarters (Q1 2020 – Q4 2021). And while these are excellent results, we'll be working to perform even better in 2022.

RN Survey - Upcoming in June 2022

Empirical model



Marching to Magnet

Children's Hospital's goal of achieving Magnet® status began to take shape in 2017 with an organization-wide shared vision to create a culture of nursing excellence. The American Nurses Credentialing Center (ANCC) Magnet Recognition Program® was chosen by the Division of Nursing as a set of standards to guide the development of structures and processes to support the hospital's nurses and the advancement of nursing practice. By January 2020, Children's Hospital New Orleans met all eligibility requirements for the ANCC Magnet Recognition Program® and officially submitted a program application.

Magnet® status is the highest and most prestigious award an organization can obtain, said Stephanie



Coig, MBA, BSN, RN, NEA-BC, CPN, Magnet Program Director. It is validation of excellent nursing care, a reflection on nursing satisfaction, patient outcomes, and patient satisfaction. The focus is nurses' role in the organization at all levels.

Coig worked closely with Shellie Trahan, BSN, RN, CPN, Magnet Program Manager, who focuses on the hospital's ambulatory areas. "Children's Hospital is seeking Magnet® designation, the highest credential awarded to healthcare organizations by the ANCC. To me, Magnet® designation validates that excellence in nursing practice and quality patient care are provided to the patients and families that trust us to care for their precious children."



Over the following 18 months, 94 written documents were prepared providing examples of how Children's Hospital meets the Magnet® standards from all nursing practice areas across the organization. The document was submitted to the ANCC in May 2021. After only three months (and during Hurricane Ida), Children's Hospital received notification of the decision to advance directly to a site visit.

"Moving directly to a site visit is rare, especially for initial Magnet® applicants," said Coig who began leading the Magnet journey in January 2019. "In her 15-year history, our lead appraiser sent only two organizations directly to a site visit."

The announcement of the site visit was made during Pediatric Nurses Week, October 4-8, 2021. During the celebration, the Magnet® design and theme, "Marching to Magnet," was revealed, featuring an image of nurses second-lining. The theme was used to celebrate the advancement to site visit and inspire nurses to reflect on all of the amazing accomplishments to be showcased during the visit.



Children's Hospital's virtual Magnet® site visit was held December 8-10, 2021, when three ANCC Magnet® appraisers aimed to verify, clarify, and amplify the accomplishments and impacts of Children's Hospital nurses on patients, the organization, and the community. Leading up to the site visit, 49 frontline nurses were identified as Magnet Champions and led unit-level preparation activities. Nurses, administrators, physicians, and support services met with the appraisers in 43 Zoom sessions meant to showcase Children's Hospital's nursing culture. Coig managed the meeting command center with Farrin Guillory, BSN, RN, RN-BC, Nursing Informatics Specialist, and Christopher Raff, LCMC Health Director of Virtual Care. The appraisers visited 36 different nursing practice areas, including all inpatient areas, several specialty care areas, and off-site ambulatory clinics.

"It's really hard to detect an organization's culture virtually," said Coig. "Our nurses really fed off of each other, were supportive of each other, and helped ensure the appraisers were able to really feel our culture. It was amazing to be able to show that."

During the closing session, comments from the appraisers expertly summarized what Children's Hospital aimed to prove. The engagement shown during the visit helped validate what was described in the application.

"It has been an honor to lead Children's Hospital through the Magnet® journey," said Coig. "As the Magnet Program Director, I have had the unique opportunity to tell our inspiring story of nursing excellence. I am incredibly proud of our nurses for their extraordinary accomplishments and impacts on our patients, our organization, and our community."

The Magnet® designation decision is expected in early 2022.

To see the growth of Children's and the Nursing division is amazing, said Trahan. "Working on our journey to Magnet® I have seen firsthand the incredible talent, nursing contributions, and the positive impact on excellent patient outcomes that nurses provide

every day.









Casey promoted to Senior Vice President and Chief Nursing Officer



Lindsey Casey, MSN, RN, NEA-BC, has risen among the ranks to become Children's Hospital's Senior Vice President and Chief Nursing Officer. She began her career at Children's Hospital in 2001 as a nurse tech in the PICU. After graduating with her Bachelor of Science in

Nursing degree from LSU Health New Orleans, she worked as a bedside caregiver for ten years before acquiring the role of PICU Director. Casey served in this capacity for five years while simultaneously earning her Master of Science in Nursing degree from Loyola University New Orleans.

She then became Senior Director of Critical Care with oversight of the CICU, NICU, PICU, Emergency Department, ECMO program, Respiratory Therapy,

and advanced practice providers. From 2018 to 2021, Casey served as Children's Hospital's Assistant Vice President, Hospital Operations, bringing her strong clinical background to lead Children's Hospital's hospital-based services. In her tenure as AVP of Hospital Operations, Casey served as executive leader over the laboratory, pharmacy, radiology, and rehabilitation services.

Appointed Senior Vice President and Chief Nursing Officer in November 2021, Casey serves as the executive over all practice areas of nursing, will support the organization's strategic priorities, and will serve as executive leader over the hospital's journey to achieve Magnet® designation. She is also the service line executive for the Center for Cancer and Blood Disorders and Neonatology, two of the hospital's signature programs.



Transformational **leadership**

What does being a Magnet® organization mean to you?

Nurses throughout the organization have spent the last several years improving and aligning their practice in order to achieve Magnet® status as designated by the American Nurses Credentialing Center. With their goal well in sight, Children's Hospital nurse leaders were asked, "What does being a Magnet® organization mean to you?" Here's what they had to say.



Stephanie Coig, MBA, BSN, RN, NEA-BC, CPN
Magnet Program Director
Achieving Magnet® provides external validation of the excellent nursing care that our amazing nurses provide every day.



Jill Fragoso, MA, BSN, RN, COHN-S
Assistant Vice President
Human Resources
Magnet® means greater collaboration
and safer work environments, positively
influencing our current and future nurses!



Diana Diaz, BSN, RN, PED-BC
Department Director, 6 Center
Magnet® is embracing a culture
of ownership, accountability, and
responsibility to the nursing profession
and our patients.



Melissa Nunn, DNP, APRN,
CPNP-PC/AC, CNE
Director of Advanced Practice Providers
Being a Magnet® organization allows
Registered Nurses and Advanced Practice
Registered Nurses to achieve their
highest professional development that is
meaningful to them.



Elena Vidrine, MSN, RN, NEA-BC, PED-BC
Director of Nursing Professional
Development
Magnet® means our nurses are
empowered and supported in all
aspects of their profession.



Laura Tassin, MHA, BSN, RN, CPN
Director of Regional Ambulatory Clinics
Being Magnet® designated means that
our nurses are empowered to drive
practice changes that positively impact
patient outcomes.



Evan Bertucci, MHA, BSN, RN
Department Director of Transport Services and Case Management
Our hospital is committed to maintaining a high standard of quality care that is outcome-driven; arguably THE most important factor that influences parents choosing us.



Lindsey Casey, MSN, RN, NEA-BC
Chief Nursing Officer
Magnet® is the external validation of
nursing excellence at Children's Hospital
New Orleans. It affirms our dedication
to continuous quality improvement and
creating an environment that supports the
delivery of nursing care at the
highest level.



Erin Serrano, BSN, RN, CCRN
Nurse Manager, Ambulatory
Heart Center
Magnet® is nursing excellence provided
every day to our patients and families.



Crystal Maise-Dykes, MSN, RN, RNC-NIC, NE-BC Department Director, NICU Magnet® means that nurses have a seat at the table to implement changes based on evidence-based practice.



Gwenn Marelo, BSN, RN, CPN
Senior Director, Physician Services
Magnet® allows us to attract and
retain talented nurses and to provide
exceptional care.



Christina Coffman, MSN, RN, CPN Nurse Manager, Children's Hospital Specialty Care Baton Rouge

Magnet® means excellence in nursing care and an ability to provide outstanding health care services.



Melissa Woolridge, BSN, RN, CMGT-BC Nurse Manager of Case Management Magnet® means better patient outcomes, higher nurse satisfaction, and highly educated nurses.



Trisha Tran, MSHCM, BS, BSN, RN, NE-BC, CPN

Department Director, Operating Room and Sterile Processing

Magnet® recognizes all the hard work and dedication our nurses have shown and will continue to do.



Ashleigh Couturie, MHA, BSN, RN, CPN Department Director, 3 Center Magnet® designation means validation and recognition of all the hard work our nurses do every day to provide the absolute best care for our patients and families.



Isabella Booher, BSN, RN, CCRN

Department Director, PICU Magnet® designation is confirmation that we are providing quality nursing care and our nurses are the driving force to improve patient outcomes.



Birgit Kleinbeck, MSN, RN, NEA-BC, CPN Nurse Manager, Heart Center Magnet® demonstrates the commitment of an organization to achieve nursing excellence, and nurses not only have input but are the driving force in policy making.



Shellie Trahan, BSN, RN, CPN

Magnet Program Manager Magnet® designation validates that excellence in nursing practice and quality care is provided to the patients and families that trust us to care for their precious children. Magnet® highlights the collaborative efforts between nursing, physicians, and other hospital departments.



Lesley Loewe, MHA, BSN, RN, NEA-BC

Department Director Nursing Operations

Magnet® designation means that our nurses are empowered to have a voice to drive practice change, which leads to better outcomes for our patients.



Christina Dougherty, BSN, RN

Manager, Patient Safety and Quality



Lisa Labat, MBA, BSN, RN, NEA-BC

Assistant Vice President, Patient **Care Services**

Magnet® demonstrates our prioritized and purposeful commitment to a healthy work environment that optimizes patient care and team member outcomes and experiences.



Magnet® designation highlights, for me, all of the amazing work our nurses do day in and day out, as well as our organization's commitment to the nursing profession.



Mark Ranatza, MHA, BSN, RN

Service Line Administrator, Behavioral Health Magnet® means an organization is committed to setting the highest standards of patient quality and safety through exemplar nursing practice.



Kelsie Helmstetter, MHA, BSN, RN, NEA-BC Nurse Manager, Trauma Program, Burns,

and Wound Care

Magnet® designation signifies the value placed on nursing staff and dedication to improving patient outcomes.



Patrick Haggerty, MBA, BSN, RN

Nurse Manager, Juvenile Justice Intervention Center

Magnet® designation is proof of what we knew all along, that Children's Hospital values and empowers nurses to lead with excellence.



Mallory Mechler, BSN, RN, CCRN

Department Director, CICU Magnet® designation displays the unwavering drive our nurses at Children's Hospital of New Orleans have to provide excellent quality care to every patient.



Angela Seput, MBA, BSN, RN-BC, NE-BC Department Director, 5 Center Magnet® represents the strong voice that nurses at our organization have in all decision-making.



Monica Bacino, MHA, BSN, RN, CPHON Department Director, 4 West Magnet® designation validates the hard work and dedication of our nurses to provide quality care.



Lynn Winfield, MBA, BSN, RN, CPHON, NEA-BC

Service Line Administrator, Center for Cancer and Blood Disorders

Magnet® designation helps us to showcase the care we provide and excellent work we do on a daily basis. It also helps us attract and keep nurses.



Korie Sims, MBA, BSN, RN, CPN

Department Director, Emergency Services Having our organization obtain Magnet® designation highlights the hard work our nursing workforce puts forth daily to ensure our patients receive the safest quality care possible.



Danielle Townsend, BSN, RN

Manager, Patient Safety and Quality Magnet® designation recognizes and validates to the community the high-quality care that we provide to our patients and their families.



Gary Lynne Lipani, BSN, RN

Manager, Greater New Orleans
Immunization Network
Magnet® designation makes me proud
that I am part of a team that provides
excellent nursing care to all patients
and families and that we are recognized
nationally as a great place to work
and grow!



Amanda Osborne, BSN, RN, CNOR

Department Director, Same Day Surgery, Special Procedures, Sedation, Interventional Radiology, and Cardiac Cath Lab

Nursing is vital to the success of our mission, and we have support and encouragement from our entire organization!



Tara Gauthier, MSN, RN, NEA-BC

Department Director, CARE Center
As a Magnet® organization, Nursing
is presented as an evidenced-based
profession that has taken years to
improve practice and patient safety. It
shows ongoing assessment and process
improvement. For those of us who
have worked 20+ years here, Magnet®
recognition is a true testament to how far
we have come and how our voice
and our practice are finally recognized
with respect.



Leah Stanton, LPN

Clinic Manager, Children's Hospital Pediatrics (Napoleon) Delivering nursing excellence and quality care to our pediatric patients/families... Making the difference in healthcare.

Nurses lead COVID-19 vaccine efforts

As the COVID-19 pandemic continued to tax healthcare systems worldwide in 2021, Children's Hospital nurses remained committed to serving the community. In addition to providing drive-through COVID-19 testing for children, families, and school communities, the hospital became a community vaccination site during the initial rollout of the vaccine in early 2021. Children's Hospital's State Street Conference Center was transformed into a community vaccination site with Kelsie Helmstetter, MHA, BSN, RN, Nursing Supervisor, serving as Community Vaccine Coordinator and leading the daily operations of the community vaccination program. She was supported by Lindsey Casey, MSN, RN, NEA-BC, Assistant Vice President Hospital Operations; Lisa Labat, MBA, BSN, RN, NEA-BC, Assistant Vice President Patient Care Services; and Lesley Loewe, MHA, BSN, RN, CPN, Department Director Nursing Operations.

With expertise in ambulatory administrative operations, Shelley Lopez, MHA, BSN, RN, RN-BC, Director of Ambulatory Nursing Practice, oversaw the scheduling of patients for the vaccine clinic. As the first eligible group per the state guidelines were healthcare workers and persons over the age of 70, Gretchen Dondis, BSN, RN, Director of Outreach Development, assisted in identifying community healthcare workers both affiliated and unaffiliated with Children's Hospital to schedule vaccination appointments. Dondis compiled a comprehensive list of community healthcare providers, facilitated communication with the healthcare providers, and began scheduling first dose vaccinations in early January to these eligible adults in the New Orleans and surrounding community.

State eligibility criteria for vaccines rapidly expanded to additional adult populations by mid-January 2021. As part of its community vaccination initiative and in partnership with ThriveKids, Children's Hospital's school wellness initiative, and New Orleans public schools, Children's Hospital began administering the COVID-19 vaccine to New Orleans public school nurses, school teachers, administrators, nurses, and support staff across the state at the onsite vaccination center.

In March, the state eligibility criteria were revised to include vaccines for all persons 16 years of age or older with underlying high-risk conditions. By the end of March, with a decline in patient volume and the opening of a mass vaccination site by LCMC Health, the on-site Children's Hospital vaccine clinic was closed.

In May, the vaccine became available for children and teens 12 to 17 years of age. Working with 13 ThriveKids' school partners, Children's Hospital hosted 26 mobile events where over 900 students, staff, and faculty were fully vaccinated and/or boosted. Through virtual town hall meetings with school systems statewide, ThriveKids' nurses continued to provide guidance to schools on CDC guidelines and the implementation of mandates in the classroom. As vaccinations became available for children, the town halls included education and information on accessible locations for the vaccination.



Transformational Leadership

To ensure no child was left behind, vaccines were also made available by the mobile vaccination team at Children's Hospital's pediatric primary care clinics as eligibility criteria further expanded. Children's Hospital Pediatrics Lakeside Clinic was the first of Children's Hospital's primary care clinics to offer COVID-19 vaccines for this population. In November, the vaccine was approved for children ages 5 to 11, at which point all Children's Hospital primary care clinics began offering the vaccine. The hospital also supported vaccination of the pediatric population through a vaccine clinic in the Ambulatory Care Clinic at the main campus and at the primary care clinics across the surrounding area on Saturdays.

Through their efforts, Children's Hospital's interprofessional team had successfully administered 13,691 vaccines, 5,500 of which were administered to school teachers, staff, and students. ThriveKids was recognized in April 2021 by the Jefferson Parish School Board for the outstanding COVID-19 support provided to the school system. Children's Hospital and the primary care clinics continue to vaccinate children and spread the message that vaccination is the best protection against COVID-19.

Nurse Residency Program adds value

Despite the many challenges experienced in 2021, the LANTERN Nurse Residency Program continued to be a valuable path for new nurse graduates looking to jumpstart their careers. Throughout the year, 74 Children's Hospital nurses entered the program; 333 have

participated in the program since its inception in 2017.

In May of 2021, the LANTERN Nurse Residency Program received full accreditation from the Commission on Collegiate Nursing Education (CCNE), the leading accrediting body for nurse education and nurse residency programs. Accreditation is considered the industry's gold standard and provides a metric by which nurse residency programs are measured. The LANTERN Program is the first Vizient Nurse Residency Program in the state to receive CCNE accreditation. The program was awarded a five-year accreditation, the maximum term.

We are really excited to be able to say that we are CCNE accredited, said Katy Tanet, MHA, BSN, RN, NPD-BC, Residency Nurse Coordinator. This was a rigorous process that

took us over two years to achieve. This

accreditation affirms that our program meets the standards. We are continuously striving to improve our nurse residency program so that we may better support our new graduate nurses as they transition to practice.

Overcoming COVID-19 challenges

COVID-19 continued to make an impact on nurse residents' ability to meet in person in 2021. In early 2021, due to social distancing restrictions, seminars were held virtually over Microsoft Teams. Beginning gradually in the spring, nurse residents attended small in-person meetings as well as hybrid meetings, with each LCMC Health hospital meeting separately at their own facility while at the same time meeting virtually with the other facilities. This was the norm until July of 2021, when program participants were able to meet as one LCMC Health group for the Wound Care Carnival. The next COVID-19 surge required a return to restricted meeting size. In September, due to Hurricane lda, the group pivoted to online modules and postponed graduation for Cohort 7. Meetings at separate facilities resumed in October of 2021.

Being able to meet in person faceto-face is beneficial for peer support
and socialization, said Tanet. As
a large health system, when nurse
residents get to meet with nurse
residents at other hospitals, they are
able to create a built-in professional
network where new nurses can share
experiences and boost reassurance
and confidence in a supportive
environment. We look forward to
meeting in person in 2022 with all of
our LCMC Health nurse residents.

In October of 2021, East Jefferson General Hospital joined the LANTERN Program as the sixth LCMC Health hospital in the program.

Evidence-based practice promotes positive change

The Evidence-based Practice (EBP) project, one of the core components of the program, requires each resident to conceptualize and lead a project aimed at making a significant improvement within the hospital. The project assists staff nurses in solving clinical practice problems by applying the best available scientific evidence. The nurse residents identified a clinical practice issue, searched the

literature for the latest evidence and research related to the issue, and critically appraised the evidence to determine if it was strong enough to guide a practice change on their unit. The next step was to implement the new evidence-based practice. And finally, the residents evaluated the outcomes of the practice change.

Three of the Cohort 6 Children's Hospital nurse residency EBP projects were selected as top five winners by the Nurse Residency Advisory Board. Whitney Chauvin, BSN, RN; Jordan Eppley, BSN, RN; Chanie Mollere, BSN, RN; Emily Osborne, BSN, RN; and Joanna Smilari, BSN, RN, were honored for "Benefits of Colostrum in Neonates." Alexandra Dempster, ASN, RN; Brittany Dillard, ASN, RN; Natalie Dufrene, BSN, RN; Ashley Ferrara, BSN, RN; Paige Kastner, BSN, RN; Emma Lunne, BSN, RN; and Heidi Schexnayder, BSN, RN, were honored for "Have No Fear, the Music is Here." Elizabeth Carter, BSN, RN, CPN; Brooke Juneau, BSN, RN; Crystal Tate, ASN, RN; and Amber Williams, BSN, RN, were recognized for "Eye See it Now: Preventing Corneal Abrasions in Pediatric Postoperative Patients."

One of the Cohort 7 Children's Hospital nurse residency EBP projects was selected as a top five winner by the Nurse Residency Advisory Board: "Nurse Comfort in Pediatric Abuse Screenings" by Zoe Alexander, BSN, RN; Lauren Daigle, BSN, RN; Madison Kahn, BSN, RN; Rachael Poissenot, BSN, RN; and Shelby Story, BSN, RN.

2022 at a glance

- 47 nurses graduated from Cohort 6 in March 2021
- 25 nurses graduated from Cohort 7 in October 2021
- 31 nurses entered Cohort 8 in April 2021
- **43** nurses entered **Cohort 9** in October 2021



Established in 2017, the LANTERN Vizient/ AACN Nurse Residency Program assists new nursing graduates with their role during their first year of clinical practice.

The 12-month program, a partnership between LCMC Health hospitals and LSU Health New Orleans; Delgado Community College School of Nursing; and University of Holy Cross School of Nursing, focuses on critical thinking, patient safety, leadership and communication skills, evidence-based practice, and professional development.

The LANTERN Program is presently the only nurse residency program in Louisiana and one of 40 in the country that is CCNE accredited.





The Vizient/AACN Nurse Residency Program

- The Vizient/AACN Nurse Residency Program is the largest in the country. There are almost 650 hospital systems that participate in the Vizient Program, with over 20,000 new graduate nurses per year.
- The residency program supports the new nurse through monthly continuing education classes, mentoring, and guidance with beginning his/her own professional development portfolio.
- According to the Casey Fink Graduate Nurse Experience Survey, the nurse residents report improved confidence, competence, ability to organize and prioritize, and communication, as well as decreased stress.

Structural **Empowerment**

is demonstrated through the development of structures and processes that provide an environment where the organizational mission, vision, and values are a foundation for professional practice and improvement in patient outcomes.

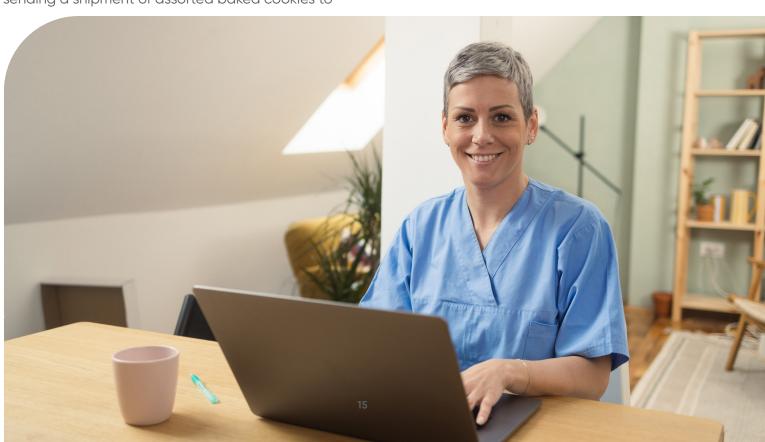
Opportunities offered for nursing certifications

Children's Hospital maintains its commitment to its nurses and their endeavor to become experts in their field. In 2021, five virtual review courses were attended by 72 nurses. The courses offered were Nurse Executive, Pediatric Emergency Nurse, Pediatric Nurse, Pediatric Critical Care Nurse, and Neo-Natal Intensive Care Nurse. Additionally, LCMC Health sponsored two courses that were offered to Children's Hospital nurses, the Ambulatory Care Nursing course and the Perioperative Nurse course.

E-courses were offered for certified pediatric hematology oncology nurses, which allowed the nurses more flexibility with time and pace. Ten Children's Hospital nurses participated.

March 19, 2021, marked Certified Nurses Day. Children's Hospital celebrated its certified nurses by sending a shipment of assorted baked cookies to each certified nurse's home. Nurses who received a certification for the first time within the year received a certificate signed by the CNO, along with a certified nurse padfolio.

- In 2021, 79 nurses participated in live certification courses; 10 nurses took advantage of an e-course option.
- There were 48 newly certified nurses in 2021.
- By the end of 2021, Children's Hospital had 326 certified nurses, raising the certification rate to 61.8%. The average pediatric Magnet[®] organization certification rate is 44.08%.



Clinical Ladders advance nursing practice

Now in its third year, Children's Hospital's RN Clinical Ladder program continues to earn interest as a viable path toward nursing excellence. In 2021, 27 new nurses were accepted on the ladder, bringing the total number of nurses to 88. Of those, there are 81 Level III participants and seven Level IV participants.

The Clinical Ladder criteria are reviewed annually by the Nursing Professional Development Council to ensure the program meets the current needs of the nursing staff. Only one revision was made to the program in 2021: the Magnet Champion role was added as a qualifying role for the EP-5 Professional Resource Role category.

It's important for our LPNs to have opportunities for professional growth, said Elena, MSN, RN, NEA-BC, PED-BC, Director of Nursing Professional Development. The LPN Clinical Ladder program incorporates the same metrics

as the RN program. The criteria encourage LPNs to get involved and be engaged in their nursing practice.

Children's Hospital initiates new LPN Clinical Ladder Program

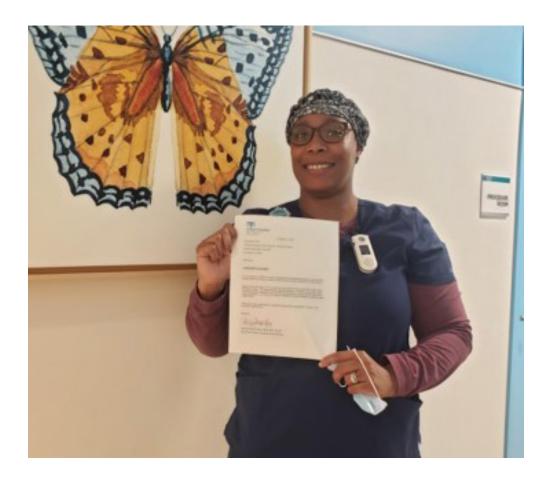
Due to the success of the RN Clinical Ladder program, the organizational Shared Governance Professional Development Council, in collaboration with the Ambulatory Unit Council, created a new Clinical Ladder program for the Licensed Practical Nurse (LPN).





LPNs comprise **6.3%** of Children's Hospital's nursing division.

52 LPNs provide nursing care in 20 departments.



Children's Hospital's first LPN Clinical Ladder awardee is Erica Bivins from Northlake Pediatrics

The LPN Clinical Ladder is a great process for LPNs, said Erica Bivins, LPN, Children's Hospital New Orleans. I am honored to be chosen as the first LPN to receive the Clinical Ladder recognition. I was informed about it and thought, 'Ok let me try this.' The process is long, and you get to learn great things about yourself. When I pledged to participate, it allowed Children's Hospital the chance to highlight my accomplishments. Clinical Ladder promoted employee engagement. When you move up the ladder it means that you've gained more experience, furthered your education, and taken on more responsibility. If you choose to participate in the LPN Clinical Ladder, it will be a rewarding experience. I am glad I was told about it. I am proud to be chosen to receive this recognition.

Nurses lead in Hurricane Ida response efforts

On Sunday, August 29, the 16th anniversary of Hurricane Katrina, Hurricane Ida made landfall along the Louisiana coast as an unprecedented Category 4 hurricane. High winds and heavy rain devastated much of south Louisiana, including New Orleans. Children's Hospital's main campus fared well during the storm, and team members were able to continue caring for kids in a safe environment, without interruption. For six days, two teams of over 400 nurses remained on site to care for 121 patients and 50 family members who sheltered in place at Children's Hospital.

Several nursing leaders participated in the hospital's incident command center providing resources for team members and families that included housing on and off-site for employees whose homes were uninhabitable, a designated FEMA sign-up area, laundry services, pet care, ice, and gas. A "Children's Hospital Mart" was established that allowed employees to acquire essential needs, such as groceries and personal hygiene and baby products, before leaving work, knowing that there was limited access to public stores.

The team also distributed donated generators, gas cans, box fans, extension cords, and air conditioning units.

Caring for patients most affected

For Children's Hospital's off-site clinics, focus was on providing access to patients as soon as it was possible. All off-site clinics experienced power and internet outages; all but two clinics were able to reopen as soon as utilities were restored. To accommodate patients, the nursing staff rotated to different clinics, sometimes in a different city, to provide care where it was needed.

Children's Hospital's Baton Rouge and Lafayette Specialty Care Clinics supported patients and team members by providing an opportunity to care for patients via Epic and telephone and by welcoming several Children's Hospital team members who were displaced from their homes.

Two Children's Hospital Primary Care Clinics located in the hardest hit areas were forced to close for an extended period due to damage and electrical outages. To serve the needs of patients in these areas, the primary care team quickly responded by implementing a nurse call center that funneled calls to a central call center. With extended closure expected, the Ormond Pediatric Clinic was relocated to the main campus, and the Children's Hospital Pediatrics (Pelican Pediatrics) Laplace Clinic temporarily relocated to the Children's Hospital Pediatrics Rue de Sante location. Once



Ormond Pediatric Clinic reopened, Children's Hospital Pediatrics (Pelican Pediatrics) Laplace shifted its clinic operations there until building renovations are completed at the end of 2022.

Aiding in storm cleanup

To lend a hand to neighbors in the River Parishes who were the hardest hit by Hurricane Ida, Children's Hospital New Orleans sent teams of volunteers in the weeks after the storm to aid in cleanup and recovery. Led by Mark Ranatza, MHA, BSN, RN, Service Line Administrator Behavioral Health, the Behavioral Health team made two separate volunteer trips to Montegut and Houma. The teams provided supplies and assistance to a local church that established a drive-through supply pick up station and helped to rehabilitate the home of a local teacher.







Nurses spotlighted in social media campaign

For Children's Hospital, 2021 was a year of growth. The campus transformation, RSV, COVID-19 Delta variant surges, and ongoing learning opportunities throughout the global pandemic presented many challenges, yet Children's Hospital nurses continued to answer the call to serve.

To celebrate the extraordinary commitment nurses showed the hospital, patients, and community during 2021, Children's Hospital launched "100 Days of Nursing," a social media campaign, on December 1. The campaign spotlighted one nurse each day for 100 days in recognition of providing one-of-a-kind care at Children's Hospital.

Throughout the campaign, Children's Hospital nurses were celebrated for their compassion, expertise, consistent demonstration of the Children's Hospital values, and their commitment to serve all children. These nurses ensure that Children's Hospital never pauses, even as we manage through staffing challenges and a consistent high census.

To culminate the 100 days, a large celebration is planned for March 2022.

Exemplary professional practice

Shared Governance promotes hospital-wide improvements

Now in its third year, the interdisciplinary Shared Governance structure at Children's Hospital continues to be successful in promoting hospital-wide improvements. With its six working councils, Shared Governance has made great strides in improving patient quality and safety, the patient experience, and team engagement. Through Shared Governance, Children's Hospital is building a culture of ownership, emphasizing professional autonomy and shared leadership, and decision-making.

In October 2021, the Shared Governance Coordinating Council revised the council bylaws by adding the option for council members to maintain membership past their one-year term and increasing the frequency of the Coordinating Council review of membership from once to twice a year. The council expanded its content experts by allowing for the inclusion of non-voting ad hoc members. As subject matter experts, provider champions, such as physicians, nurse practitioners, and physician assistants are now welcomed as ad hoc, non-voting members. In addition, each council is supplemented with a subject matter expert Executive Sponsor as an ad hoc, non-voting member.

Evidence-Based Practice and Research Council

To promote clinical research and the use of evidence-based practices (EBP), the council welcomed its second cohort into the EBP Fellowship program in January 2021. Working with a mentor for guidance, fellow participants completed an EBP project and attended monthly education seminars regarding the EBP process and using the Johns Hopkins EBP model. Topics of education included Developing PICO Questions and Searching for Evidence, Appraising the Evidence, Summarizing and Synthesizing the Evidence, Translation, Dissemination, and Symposium Preparation. Four groups entered the fellowship and will complete the program with a presentation at Children's Hospital's second Evidence-Based Practice and Research Symposium on March 23, 2022.

To support dissemination of research and evidence-based practice, the council recruited nine team members to participate in a Writing For Publication Workshop. Through a partnership with LSU School of Nursing, the team members learned the process of preparing a manuscript for publication submission.



The EBP Council allows our nursing staff to drive best practices by focusing on evidence-based research, said Erin Serrano, BSN, RN,

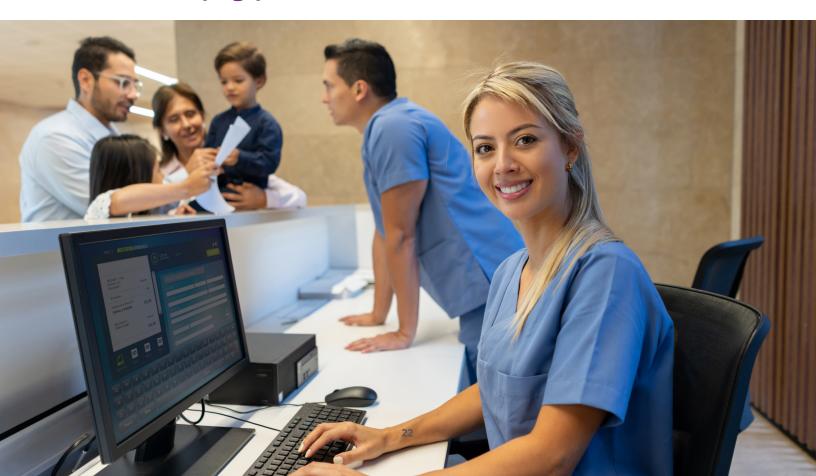
CCRN, Heart Center Nurse Manager.

As the EBP Council facilitator, I've gotten a firsthand look at the research process, and it's been so rewarding to help empower the staff throughout their journey, from developing their PICO research question to the Evidence-Based Research Symposium. It's exciting to watch best practice changes knowing they happened as a direct result of the hard work and dedication of our staff.

Informatics Council

The Informatics Council made several improvements in response to requests from nursing staff. When Hurricane Ida prompted the use of downtime forms, nursing staff suggested the forms align better with Epic. Roughly 15 forms were revised by the Council and uploaded to the BCA computers for access. With feedback from staff warranting a more succinct ACA/B-Safe linked reporting, the council facilitated a resource link in Epic for easy access to an ACA form. The council also optimized numerous Epic workflows for individual units. A few examples include NICU ventilator/oxygen mode of delivery added for a RAM cannula, revision of Pressure Injury Epic alerts to match the hospital's policy assessment frequency, and a discharge checklist for patients less than 1 week old.

We don't realize how much we rely on electronics. We use electronics to do audits, to communicate with our patients' families, to chart, to communicate with ancillary team members, and the list goes on. I joined the Shared Governance Informatics Council because I love that I can bring any issues or ideas from the bedside and work with the informatics team to make improvements. Over the past few years of being on the Shared Governance Informatics Council, I have noticed a significant difference in my daily work flow as a bedside nurse and clinical leader. Ashley Nguyen, BSN, RN, CCRN, PICU Clinical Leader





Patient Experience Council

The Patient Experience Council created a standard definition for patient and family-centered care at Children's Hospital. The definition serves as an explanation for the hospital's care delivery model for patients and families. Following branding, the definition will be added to the patient handbook and CHNOLA website.

To guide team members on creating a positive patient experience, the council reviewed patient experience "never events," those events that should never happen based on real-time patient experience issues. The council used this information to create team member education using the acronym A BIG RISE

A BIG RISE

Answer questions

Be kind

Introduce yourself

Give choices

Resolve issues

nvolve families

Smile often

Elevate others

Flyers will be disseminated to frontline staff in early 2022.

Patient and Family-centered care is an approach to providing healthcare services that encourage the health and well-being of children and young adults through a respectful partnership between healthcare providers, patients, and families.

This partnership empowers patients and families by including them in

- decision making
- providing education
- participating in patient care
- encouraging questions

This care model is based on the mutual understanding that this partnership leads to better outcomes for our patients.

Professional Development Council

The Professional Development Council completed several projects in 2021 aimed at enhancing the work experience for nurses. The

Caring with Communication project focused on improving

communication between team members and non-English speaking families. Badge buddies were developed that included several key phrases in Spanish to help team members interact with families while they access translation services. Four pilot units received education on the program. Following implementation of the badge buddy program in these units in early 2022, feedback will be gathered, modifications will be made, and the program will be rolled out hospital-wide.

In early 2021, the Professional Development
Council completed work on the development and
implementation of an LPN Clinical Ladder. To further
advance professional development, the council created a
clinical ladder pathway to guide other disciplines interested in
developing a Clinical Ladder program.

Under the guidance of the CNO, the council developed a Nursing travel reimbursement policy and tracking templates for nursing professional development funds. The Council will hand off the management of the process to the Nursing Professional Development Council in early 2022.

In late 2021, the Council began collaborating with the organization's Diversity, Equity, and Inclusion Committee to work on an initiative aimed to provide team member education and identification of team member allies for patients.

Being on the Professional Development Council has been a wonderful and exciting experience for me, said Anneke Matthews, MHA, BSN, RN, CPN. It feels great to be involved in making changes, as well as making a difference for CHNOLA's patients, families, and staff. Our council members are fun, engaged, and dedicated to working together to create initiatives and promote professional development within our organization.

Quality Council

In 2021, the work of the Quality Council focused on several key areas of improvement. With fall prevention being an ongoing focus, the team supported the creation of a house-wide **Falls dashboard** identifying trends for CHNOLA leaders. A fall prevention educational flyer and video for patients and families was drafted and will be the first of a series of patient-aimed safety videos to launch in early 2022.

A **Safety Coach Program** was initiated in 2020 with nurse champions serving as "safety coaches." Coaches are champions of error prevention techniques and offer real-time feedback on each unit. Throughout 2021, ongoing meetings were held to support, train, and empower coaches in their work.

The council worked with Pharmacy in 2021 to mitigate issues with medication barcode scanning and investigate processes requiring the use of alternate medication packaging.



Having prospective and input from staff members across the organization has helped us tailor a more comprehensive and informed approach to quality and safety initiatives generated by our council, said Kathleen Vincent, ASN, RN, Patient Safety Analyst.

Practice Council

Throughout 2021, the Practice Council identified opportunities for improvement in communicating with non-English speaking families. The council assessed the current translation services and sought feedback from team members regarding barriers or concerns with the services. The feedback was provided to the Social Services Department, which led them to seek better alternatives. In early 2022, new electronic devices will be distributed to all patient care areas, and a new translation service will be implemented.

Looking into 2022, the Council will begin a new project to create a pathway to guide team members in caring for disruptive patients and families.

I enjoy being a member of the Practice Council, said Danielle Townsend, BSN, RN, Patient Safety and Quality Manager. It is rewarding to be a member of a multidisciplinary team that works on projects that can make a difference in the care we provide to our patients.

4 West reduces central line infections

Prolonged neutropenia in pediatric cancer patients increases their susceptibility to central line-associated blood infections (CLABSI). Patients with acute myeloid leukemia (AML) are particularly at risk. Although CLABSI rates on 4 West tend to track higher than some other units, lowering the incidence became a priority in 2021.

"In 2020, a high CLABSI rate on 4 West sparked the nursing team to assess opportunities for improvement," said Lynn Winfield, MBA, BSN, RN, NEA-BC, CPHON, Cancer and Blood Disorders Service Line Administrator, who organized a taskforce to investigate the matter. Comprising the taskforce was Winfield and Monica Bacino, MHA, BSN, RN, CPHON, Department Director 4 West; Victoria Skinner, BSN, RN, CPHON, CPN, 4 West Clinical Leader; Olivia Cornwell, MSN, APRN, CPNP-PC/AC, CPHON, Hematology Oncology Nurse Practitioner; Theresa Kent - MSN, APRN, FNP-C, CPHON, Hematology Oncology Nurse Practitioner; Kathleen Vincent, ASN, RN, Patient Safety Analyst; and Ashley Duhon, MHA, BSN, RN, CPHON, CPN, Acute Care Nurse Educator.

"Our team conducted a literature review and completed a deep dive assessment on potential inconsistencies in practice," said Bacino, who indicated that over half the CLABSI cases were due to mucosal barrier injury (MBI). "There were many necessary interventions that were identified and subsequently implemented."

Practice improvements included:

- Standardized central venous line (CVL) education assigned to staff
- Removal of jackets and pulling up of long sleeves during CVL care
- · Daily leadership rounding on all patients
- · An update of job instruction sheets
- Mandatory use of a buddy system for all central line tasks
- Implementation of 15-second scrub time and 15-second dry time when cleaning central line ports
- · Concentration on patient hand hygiene;
- Reinforcement of environmental cleaning with EVS and spot checks

- CLABSI education with all RNs on the unit
- Institution of TruD cleaning for every patient room upon discharge
- Institution of a no ring/bracelet policy
- Extensive staff meetings, where input from all RNs resulted in ordered hand scrubs for use upon entering unit, curos caps for end of tubing, and individual hand sanitizer for patient use. In addition, the nurse station was added to high touch cleaning and independent observations of central line tasks were conducted by Kent.

"Tory and I discovered trifuse in a CL article and presented it to the taskforce," said Bacino. "We trialed it on 4 West for all lab draws and found it to be very beneficial."

The 4 West staff worked with doctors to bundle lab draws whenever possible and have patients placed on KVO fluids to decrease line entering frequency. A CHG bathing information handout and central line informational/infection prevention handout were developed and given to families on admission. A new patient daily cares poster was created and placed in all inpatient rooms, and a hibiclens instructional handout was devised and distributed upon outpatient discharge for patients with central lines. In addition, all faucets in 4 West public areas were changed to touch free, and a hand wave plate was installed to the back door of the unit. To utilize the newest initiatives in improving patient outcomes, Children's Hospital joined the Solution for patient Safety (SPS) Hematology Oncology CLABSI initiative and SPS Pioneer Cohort for CLABSI. "While a core team worked on the project, it was a collective effort of all 4 West nurses to focus on patient safety and quality to drive the success of the interventions," said Bacino.

Results of their efforts showed a yearly decrease in CLABSI by 83.85 percent, a rate of 0.57, down from 3.53, by the end of 2021.

"I am really proud of all we were able to accomplish as a team on 4 West to improve our CLABSI rate," said Carly Johnson, BSN, RN, RN-BC, Staff Nurse, 4 West." Our hard work really paid off."

Nurses improve and expand genetics programs



A lack of standardization and consistent workflow in the newborn screening program has historically caused delays in care for newborns diagnosed with inborn errors of metabolism statewide. Intending to close this gap, Rainbow Laurant, BSN, RN, RNC-NIC, Nurse Navigator, Genetics, began developing a systematic approach to the screenings process when she joined Genetics in 2017. In 2019, Bonnie Brignac, BSN, RN, Nurse Navigator, Genetics, became the designated newborn screening coordinator, and the RN team began implementing improvements that have accelerated access to care for these babies.



Almost all babies born in Louisiana are screened for more than 40 genetic disorders, said Laurant. Of those disorders, 75 percent are medically

managed by Genetics. Every year that we decrease the turnaround time from the initial notification to confirmation of the disorder, we are able to get these babies into treatment sooner.

The team led initiatives to improve workflows and educate community providers across the state, resulting in a significant impact on the length of time from a presumptive positive newborn screen for an inborn error of metabolism to the time for follow-up testing and treatment.

In 2021, the Genetics Department received over 175 positive inborn error of metabolism newborn screenings. Laurant and Brignac coordinated care for these newborns, from testing and diagnosis through treatment and follow up.

To coordinate follow-up testing and treatment and support care across the continuum, Laurant collaborated with nurse navigators and genetic counselors through several multi-specialty clinics: Down Syndrome and Neurofibromatosis with Hannah Meddaugh, MGCS, LCGC, Genetic Counselor; Craniofacial/Cleft Palate with Mary Ellen Alexander, MSN, RN; Vascular Anomalies with Kasey Davis, ASN, RN; and Disorders of Sexual Development with Renee Lemoine, BSN, RN, CPN.

Cardio-Genetics clinic opens in 2021

A new clinic launched in 2021 to support patients with congenital cardiac and/or cardiovascular disorders and conditions. The Cardio-Genetics Clinic is the result of a collaboration between Laurant and Brianac and Heart Center nurses Erin Serrano, BSN, RN, CCRN, Heart Center Nurse Manager; Alli Carter, BSN, RN, Heart Center Nurse Navigator; and Lauren King, MSN, RN, FNP-PC, Heart Center Nurse Practitioner. Held monthly at the Children's Hospital Specialty Care Clinic in Covington, the Cardio-Genetics Clinic offers a comprehensive multidisciplinary approach to the care of patients and includes a cardiologist, geneticist, cardiology and genetic nurses, a genetic counselor, and cardiac sonographer.

NICU implements post-operative handoff tool

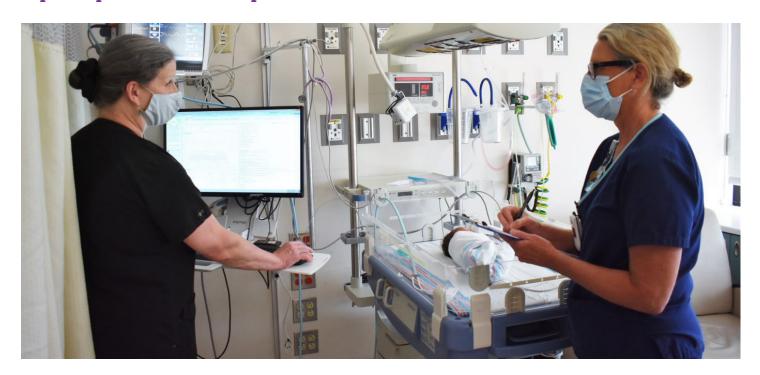
Improving the standard of care for post-operative neonates was the goal of a NICU initiative in 2021 that involved Children's Hospital's collaboration with an international network working to transform neonatal care across the world. The Vermont Oxford Network's (VON) National Collaborate encompasses over 500 NICUs worldwide partnering on process and quality improvement projects. Although Children's Hospital has submitted data to VON's past collaboratives, 2021 was the first year they participated in its expanded version, iNICQ. In particular, the initiative took aim at the hospital's post-operative handoff procedure.

The NICU did not have a standardized handoff for patients transitioning care from the operating room to the NICU, said Lauren Richard, BSN, RN, CCRN, VON Clinical Reviewer, who led the initiative to create a multidisciplinary approach to the post-operative handoff process.

With research supporting a reduction of medical errors and prevention of adverse events and near misses when standardized post-operative handoff procedures are utilized, we knew we needed to make it a priority.

The NICU set a goal of improving patient outcomes to achieve an increase in post-operative neonatal temperatures greater than or equal to 36 degrees, the minimum temperature accepted by the NICU of neonates transitioning from the operating room.

Nearly all staff surveyed agreed that standardized handoff was important for patient care, yet less than half reported that post-op surgical handoff was occurring on a regular basis. Focusing on the primary drivers of communication, teamwork, families and partners, and standard processes, the NICU implemented a multidisciplinary standardized handoff tool. To support the patient and family-centered care model, the process for handoff



incorporates communication and is inclusive of the postoperative plan of care with the patient's caregivers.

Following implementation and in collaboration with social services and child life therapies, every caregiver reported that they were updated on the patient's plan of care within one of the patient's procedures and rated their overall surgical experience as good to excellent.

"Overall, both the surgical and neonatal teams have a better understanding of what happens to our patients before, during, and after surgery, lending itself to more continuous care," said Haven Schultz, BSN, RN, RNC-NIC, NICU Registered Nurse.

Clinically, postoperative temperatures greater than or equal to 36 degrees in neonates upon return to the NICU from surgical procedures improved to an average of 88.5 percent.

I am so excited about the success of the VON iNICQ collaborative, said Lauren Richard, BSN, RN, CCRN, VON Clinical Reviewer.

Despite all the challenges faced over the last year with COVID and Hurricane Ida, the team was able to create meaningful change in the post-operative handoff process. The teamwork was truly great to see.

The NICU's initiative will be featured on the national level at the VON Critical Transition webinar in April 2022.

NICU protocols reduce pressure injuries

When Melissa Baker, MSN, RN, CPN, NICU Clinical Nurse, recognized that NICU patients receiving ECMO therapy had a high number of pressure injuries, she set her sights on helping to reduce this risk. A member of the organizational Pressure Injury Prevention team, she understood not only the factors contributing to pressure injuries but also the hesitancy of caregivers to reposition critically ill patients. In February 2021, Baker joined the Evidence-based Practice Fellowship cohort 2 to explore the PICO question: "For NICU patients on ECMO, what are the best practices to reduce the occurrence of pressure injuries?"

With collaboration and guidance from EBP mentor, Margaret Richmond, MPH, Decision Support Analyst, Baker reviewed the literature and made recommendations for practice changes that included frequent repositioning, use of gel pillows in occipital areas, nutrition consultation, wound care consultation, and daily skin care and moisture management. Interventions included a "Time 2 Turn" sign at the patient bedside as a reminder for every two-hour repositioning, an update to the "Nursing care of the ECMO patient" Elemeno education, inclusion of nutrition and wound care consultations

in the plan of care, and incorporation of moisture management devices. With assistance from David Hebert, RRT-NPS, ECMO Coordinator, all key stakeholders were educated on the new protocol. "David was a huge asset to this endeavor," said Baker. "He pushed it through the committee, communicated with the surgeons, and helped to convince our team that repositioning our patients was necessary."

As a result of Baker's investigation and the collective effort of patient care providers, the percentage of ECMO patients incurring a pressure injury has decreased by 45 percent.

As a member of the EBP Fellowship and Pressure Injury Prevention Team, I was able to contribute to bridging the gap in best practices and stimulate the ECMO team to prioritize skin care as an essential element in the care of ECMO patients.

New knowledge, innovations, and improvements

Study reveals perceptions of end-of-life care

The sudden or anticipated death of a child is one of the most challenging and unique experiences that pediatric nurses may encounter in practice. While pediatric nursing may be a rewarding career for some, it involves unique challenges inherent in the care of children who face serious illness, suffering, and death. Many nurses encounter feelings of inadequacy that may impede their ability to provide optimal care for pediatric patients at the end of life (EoL).

There is a paucity of research on nurses working with dying children, said Dianne Richoux, MSN, RN, CPN, Nurse Educator, who conducted a study in 2021 investigating nurses' experience with this subject at Children's Hospital. One study reported that nurses working in critical care units, particularly pediatric units, are at risk for developing symptoms of secondary traumatic stress. There is also evidence to suggest that the effect of caring for pediatric patients at the EoL may affect quality of care.

Richoux enlisted Lynn Winfield, MBA, BSN, RN, CPHON, Service Line Administrator, Blood and Cancer Disorders, as a Co-Principal Investigator and Monica Bacino, MHA, BSN, RN, CPHON, Department Director 4 West, to assist with data collection. Titled "Pediatric Registered Nurses' Attitudes towards Caring for Dying Children and Their Families," the purpose of the study was to describe individual staff registered nurses' attitudes towards caring for dying children and their families. The study aimed to describe the level of experience, and preparation of the registered nurses caring for pediatric patients and their families at the EoL.

A comparative, descriptive study was conducted using the Frommelt Attitudes Toward Care of the Dying (FATCOD-B) tool, a 30-item questionnaire designed to elicit attitudes towards caring for dying children and their families. There were 132 Children's Hospital nurses who participated in the study by completing the electronic survey.

The study revealed that 94 percent of participants had previously cared for terminally ill patients and their families. Nurses who work on the hematology/oncology and critical care units scored, on average, six points higher than those in other units, indicating a statistically significant difference in attitude towards dying patients and their families among these nurses in particular. There was also a statistically significant difference in respondents who have cared for a terminally ill child compared to those who had no experience caring for dying children.

Results of the study suggest an implication for implementation of EoL care education to support nurses in caring for patients at the EoL. "The findings from this study provided valuable feedback and identified knowledge gaps present within the organization, specifically, with new graduate nurses as they transition to bedside care," said Richoux, who is hopeful that hospital administrations will optimize educational resources related to EoL care. "This research has provided provoking and innovative ideas for clinical interventions."

The findings from this study have initiated conversations between nursing professional development and staff nurses. Improvements to the new nurse orientation, preceptor education, and annual competencies will incorporate communication techniques and care specific to the patient and family coping with the end of life. "Interdisciplinary collaboration involving providers, palliative care members, and nursing staff can help provide insight to optimal evidence-based end-of-life care," said Richoux.

ThriveKids expands in 2021



ThriveKids continues to gain momentum in advancing the health and well-being of Louisiana's students.

Launched in 2020, the comprehensive community-based initiative provides wellness programs for students and schools throughout the state. The program offers school-based virtual care, mental and behavioral health services, sports medicine, COVID-19 support, a nurse hotline, chronic condition management, and education and resources to school nurses.

In 2021, ThriveKids strengthened its partnerships with schools in Orleans and Jefferson parishes. as well as other school districts statewide. Seven reaistered nurses joined the team of ThriveKids nurses who fulfill roles such as school nurses and nurse navigators. Nurses new to the program are Benita Dussett, MSN, RN, Nurse Navigator of COVID Testing for Jefferson Parish Schools; Stacie Radosta, BSN, RN, School Nurse for East Jefferson High School; Jennifer Staples, BSN, RN, School Nurse for William Hart Elementary and Thomas Jefferson School for Advanced Studies; Cherlyn Rainey, BSN, RN, School Nurse for Marerro Middle School; Penny Nunenmacher, ADN, RN, Jefferson Parish Child Search Nurse; Monica Johnson, DNP, MBS, HCM, RN, ThriveKids Nurse for summer sessions: and Pearlette Carter, BSN, RN, School Nurse Consultant and parttime School Nurse for Isidore Newman School. These RNs provide nursing care directly at the respective schools and facilitate and coordinate any needed referrals for additional healthcare services.

Patricia Houin, ASN, RN, Nurse Coordinator, organizes the program and works with an extensive team of physicians, social workers, registered nurses, sport medicine trainers, and other administrators to provide care to Louisiana's kids in schools across

the state. In this unique role, Houin collaborates with all team members and coordinates care of patients referred from the partner schools, participates in training and education of the school nurses, and works closely with school administrators to meet the needs of all children.

Children's Hospital provides ongoing support and education to the school nurses throughout Louisiana. In 2021, the Diabetes Nurse Navigator, Sonja Washington, MSN, RN-CDE, conducted an educational webinar that offered continuing education hours on pediatric diabetes to school nurses.

In April 2021, ThriveKids was recognized by the Jefferson Parish School Board for its contributions during the COVID-19 pandemic. Through virtual town hall meetings with school systems statewide, ThriveKids' nurses provided guidance to schools on CDC guidelines and the implementation of mandates in the classroom. As vaccinations became available for children, the town halls included education and information on accessible locations for the vaccination. Through their efforts, Children's Hospital administered 13,691 vaccines, 5,500 of which were given to schoolteachers, staff, and students.



Council leads planning for inaugural Research Day

Initiated by Children's Hospital's Evidence-based Practice and Research Council, LCMC Health's first system-level Research Day was held December 3, 2021, at University Medical Center. Representatives from each LCMC Health hospital planned the event entitled Resilience and Reinvention During Turbulent Times. Sixty-four members of the LCMC Health healthcare team attended.

Dr. Gigi Dunn, MD, delivered the keynote address: "Simply Do This! How to Create Your Own Selfcare Healthcare Plan." Lisa Labat, MBA, BSN, RN, NEA-BC, Assistant VP of Patient Care Services represented Children's Hospital on a panel discussion with LCMC Health chief nursing officers and nursing leadership. The event also included four podium presentations and nine poster

presentations from representatives from LCMC Health hospitals and LSU Health School of Nursing. Two of these presentations were made by Children's Hospital nurses. "Making Mentorship a Priority in Ambulatory" was a podium presentation by Laurie Tassin, MHA, BSN, RN, CPN; Kristin Broussard, MHA, BSN, RN, CPN; and Shelley Lopez, MHA, BSN, RN, RN-BC. Nichole Palmisano, MSN, APRN, CPNP-PC, presented the poster "Transplant Teen Transition (T3) Clinic: A Quality Improvement Initiative to Facilitate Transition Readiness in Pediatric and Young Adult Kidney Transplant Recipients." The closing session entitled "Taking Care of Yourself and Your Team: Strategies for Achieving Joy in the Workplace" was given by Jay Kaplan, MD, FACEP, and Hannah Stiller, MS.









Making mentorship a priority in ambulatory

Laurie Tassin, MHA, BSN, RN, CPN; Kristin Broussard, MHA, BSN, RN, CPN; and Shelley Lopez, MHA, BSN, RN, RN-BC, teamed up and joined the EBP Fellowship program with the PICO question "What are the best practices for implementing a formal ambulatory nursing mentorship program?" The group evaluated 15 scholarly articles and found several key components that were included in their program development: gauging readiness for mentorship; selective matching of mentormentee pairs; formal training for mentors; frequent face-to-face interactions; the value of networking with other leaders; and the importance of gaining administrative support. Following a call for participants, six mentor-mentee pairs were formed, and mentors participated in formal mentor training. The pairs met monthly for 12 months with the aim to promote professional and personal development. At the halfway mark, the team surveyed the participants for feedback with positive results.

The response from mentees about their experience was overwhelmingly favorable and included comments such as:

Great fit for my goals. Mentor is very personable, and easy to relate to and talk to.

I enjoy having someone to be accountable to regarding professional development and taking time out of my schedule to focus on professional goals. My mentee pairing is great!

Our sessions have been mutually beneficial, and I can see the relationship continuing beyond the formal mentorship program.

Nearly halfway through the year-long program, several mentees achieved goals that were identified at the beginning of the program. One participant joined the EBP Fellowship program; another joined the Shared Governance Council and obtained a nursing specialty certification. One participant attended an educational symposium and participated as a guest at a local professional organization, and one participant is working towards a CLC certification.

Transplant Teen Transition (T3) Clinic: A Quality improvement initiative to facilitate transition readiness in pediatric and young adult kidney transplant recipients

With a large percentage of adolescent and young adult patients being treated in Children's Hospital's kidney transplant program, Nichole Palmisano, MSN, APRN, CPNP-PC, recognized the need for a successful transition to adult kidney transplant care. Adolescent kidney transplant recipients have the highest transplant rejection rates compared to other age groups. However, the program did not have a protocol in place or a dedicated team to help facilitate this transition. Working with Amy Henke, PsyD; Courtnie Breaux, MHA, BSN, RN, CPN; and Isa Ashoor, MD, Palmisano embarked on a quality improvement initiative to provide the tools and resources for these patients to have a seamless and successful transition to adult transplant care.

The initiative resulted in improved care for patients. All patients who participated had stable graft function at their last follow-up appointment, and 20 percent of patients (three in total) were successfully transitioned to adult transplant care.

The teenage and young adult population certainly needs individualized care and additional support, ** said **Palmisano.** Thave tremendous respect for this population of patients as they try to navigate the adult health care system for the first time. Our goal is to provide them with the knowledge and selfmanagement skills needed to allow a successful transition into adulthood.



Society of Pediatric Nurses Conference features Children's Hospital nurses

To showcase education and advancements across the breadth of the pediatric nursing profession, the Society of Pediatric Nurses (SPN) hosted their 31st Annual Conference April 14–17, 2021. The virtual event was themed "Converging Ideas to Create a Healthier Future" and featured five presentations by Children's Hospital nurses.

Deedy Richoux, MSN, RN, CPN, and Brittney Sweeney, MSN, RN, gave the podium presentation, "Perceptions of Practice Readiness." The four poster presentations were "An Evidence-based Approach to EBP" by Stephanie Coig, MBA, BSN, RN, NEA-BC, CPN; Elena Vidrine, MSN, RN, NEA-BC, PED-BC; and Katy Tanet, MHA, BSN, RN, NPD-BC; "The Effect of Nurse Preceptor Experience Level on the Turnover Rate of Inpatient Nurses at a Pediatric Hospital," by Ashley Duhon, MHA, BSN, RN-BC, CPHON; Stephanie Coig, MBA, BSN, RN, NEA-BC, CPN; and Amanda Thibodeaux, MHA, BSN, RN, CPN; "Human Trafficking" by Tristen Palumbo, MBA, MSN, RN, CPEN, CPN; and "Decreasing Falls" by Jinger Roy, DNP, APRN, FNP-C, which won the SPN Poster Excellence Award for Quality Improvement.

The Effect of Nurse Preceptor Experience Level on the Turnover Rate of Inpatient Nurses at a Pediatric Hospital

Ashley Duhon, MHA, BSN, RN, PED-BC, CPHON Stephanie Coig, MBA, BSN, RN, NEA-BC, CPN Amanda Thibodeaux, MHA, BSN, RN, CPN

Nurse turnover is a chronic challenge in healthcare, affecting hospitals nationwide. Although literature suggests several reasons for turnover, experience level of the nurse preceptor had not yet been evaluated as one of them. Given that evidence also suggests that nurses who were precepted by experienced, confident nurses felt more confident in the nursing care they delivered, Coig, Duhon, and Thibodeaux initiated a nursing research study to investigate the impact of nurse preceptor experience on nurse turnover. Their investigation answered the question: Does experience level of a new graduate nurse preceptor impact turnover rates of inpatient nurses with two years or less

experience at a pediatric hospital?
A retrospective study was conducted of 178 new graduate nurses hired at CHNOLA who completed their orientation period between January 1, 2015, and December 31, 2017. The team collected data from human resource reports, employee records, and personal interviews. Analysis of the results indicated no statistical significance in the relationship between experience level of nurse preceptors and nurse turnover of the new graduate nurse with less than two years of experience at a pediatric hospital.

Recommendations for future research include a multi-site study with a larger sample. As the study was conducted within the pediatric specialty, repeating it in other specialties, and on a larger scale, may produce different results.



Nurse turnover is a challenge in hospitals nationwide, said Ashley Duhon, MHA, BSN, RN, PED-BC, CPHON, Acute Care Nurse Educator. To

address the challenge, we must first find the cause. The opportunity to conduct this research study was insightful, as our research showed experience levels of preceptors did not have an impact on turnover rates of new graduate nurses.

Perceptions of Practice Readiness

Deedy Richoux, MSN, RN, CPN, and Brittney Sweeney, MSN, RN

At CHNOLA, more than 80 percent of hired nurses are new graduates. The transition to practice for these newly licensed and experienced nurses is challenging across many dimensions, and the preceptor role is vital to a successful transition to practice, assuring organizational enculturation and clinical competence. Despite the criticality of this role, preceptor perceptions of new graduate nurses' practice readiness using a valid and reliable tool had not been widely studied.

Sweeney and Richoux examined and compared preceptors and new graduate nurses' perceptions of practice readiness in order to isolate the specific nursing competencies that are driving nursing's preparation-practice gap. A quantitative comparative-descriptive research design was used, and data was collected using the Nurse Practice Readiness Tool. Participants were asked to rate their level of satisfaction of proficiency in six nurse practice readiness categories that are associated with competencies: Communication, Technical Skills, Responsibility Management, Professionalism, Clinical Knowledge, and Critical Thinking.

The analyses revealed that the perceptions of practice readiness did significantly differ between preceptors and new graduate nurses on several key competencies. Critical thinking, communication, and responsibility management revealed statistically significant differences between the preceptee's perception of practice readiness compared to the preceptor's perception. Several competencies showed statistically significant differences between preceptors' and new graduate nurses' perceptions of practice readiness with a 95 percent confidence level: Anticipate Risk; Asking for Assistance; Conflict Resolution; Multiple Responsibilities; and Prioritization. Based on the data, the fewer years of preceptor experience, the more likely

the preceptor was to agree that the preceptee was ready for practice.

The significant findings of this nursing research study have many transition-to-practice implications for new graduate nurses and specifically the preceptor/preceptee relationship at CHNOLA, including revisions to the preceptor development workshop, incorporation of the unit-based educator to support the structure of the unit-based orientation, and a closer partnership with academic nursing school faculty to improve the transition and decrease the identified gaps in practice readiness.

Given the state
of the country
as a result of
the COVID-19
pandemic,
nursing students
have been



catapulted into bedside nursing care with higher acuity patients and fewer resources than ever before, said Brittney Sweeney, MSN, RN. This research has been enlightening to the needs of newly graduated nurses hired here at Children's Hospital, and also to their preceptors. It is vital that we understand the needs of these nurses and provide them with the resources and support that they need so that our patients can receive the best care available.

Human Trafficking

Tristen Palumbo, MBA/MSN, RN, CPEN, CPN

A lack of knowledge regarding human trafficking and education available for healthcare providers and ancillary staff in the emergency department led Palumbo, Clinical Leader of the Pediatric Emergency Department at West Jefferson Medical Center, to pose the PICO question: In the pediatric population, does mandatory education and training to identify victims of human trafficking in comparison to current practice increase the number of trafficking survivors identified?

Palumbo completed a literature review and baseline assessment of human trafficking knowledge of the Emergency Department nurses through a survey. She implemented several recommendations from the literature including an educational PowerPoint for all staff overviewing human trafficking and development of an icon in the electronic medical record for ED staff to click for "concerns for human trafficking." If the nurse indicated "yes" to the icon, she or he would be prompted to discuss the concerns with the physician and social worker, and a CARE Center referral would be initiated on discharge.

Following implementation, a concern for human trafficking was identified by one nurse, and the appropriate follow up was initiated. Three months following staff education, Palumbo administered the same education assessment survey and found two notable areas of improvement: an increase in comprehensive awareness and an increase in the belief that there are sufficient materials to increase awareness of human trafficking in the ED.



I think that
this project was
successful in
giving providers
a different
perspective on the
patients that we

see each day, "said Palumbo. "I completed this project because there was a gap in the practice that we were providing, and I knew that we as a treatment team could do better if the information was available. Staff were receptive to the human trafficking education, and to this day, I still get asked from my peers about concerns with patient cases. That speaks to the ability to adapt and understand the complexity of human trafficking. Unfortunately, we may not be able to get them to safety on the first visit, but we are able to create a safe space to return to so that their story can be heard when they are ready.

Nurse residents present at national conference

The **2021 Vizient Nurse Residency Program Conferenc**e was held virtually in September for nurse residents and nurse residency coordinators to connect with others across the country. The conference served as a platform for experienced nurse residency coordinators to share their successful approaches to engaging new nurses with other nurse residency coordinators. It also allowed new nurse graduates to grow professionally by presenting their evidence-based projects, networking with others, and continuing their life-long educational journey.

Two nurse residents submitted abstracts of their evidence-based practice projects and were accepted for the 2021 Vizient Nurse Residency Program Virtual Conference.

Emily Mjeld, BSN, RN, an NICU RN, presented "A Picture is Worth a Thousand Words – Using Signs to Communicate Patient Status in the NICU." She shared her team's work on developing universal signage to communicate appropriateness of supplemental oxygen administration and a patient's DNR status among team members caring for patients in the NICU.

Her team members included:

- · Haylee Atwell, BSN, RN
- · Alexis Desalvo, BSN, RN
- · Ashara Grimes, BSN, RN
- · Victoria Nielsen, BSN, RN
- · Jade Thibodeaux, ASN, RN

Josh McCarthy, BSN, RN, CPN, of the Nursing Resource Team presented "When Helping Hurts: The Battle of Compassion Fatigue." McCarthy shared his team's poster on how they sought to increase the utilization and knowledge of available resources in the workplace to decrease compassion fatigue.

His team members included:

- · Jenna Hebert, BSN, RN
- · Malanie Induni, BSN, RN, CPN
- · Margaret Gardener, BSN, RN
- · Collin Copeland, BSN, RN



Awards and recognition



NICU nurses honored by the March of Dimes

The **Excellence in NICU Nursing Award** was created by the March of Dimes to pay tribute to the efforts of NICU nurses who work diligently for the health of all moms and babies. The regional award is given to nurses who promote excellence in nursing care for NICU moms and babies and possess the ability to improve the quality of care given to NICU babies.



Lisl Antee, ASN, RN, RNC-NIC, NICU Clinical Leader, was presented with the 2021 Excellence in NICU Nursing Award at the annual March of Dimes Signature Chef Gala held at the Omni Royal Orleans in December of 2021.

In addition to Antee, five Children's Hospital NICU nurse nominees were among the top 10 finalists for the award.

Congratulations to the finalists:

Lauren Caponegro, BSN, RN, CCRN Teresa Lanoue, BSN, RN, CCRN Monique King, BSN, RN Kayla Robin, BSN, RN Elena Starlight, BSN, RN, RNC-NIC



Lisl is always brainstorming new and innovative ways to improve patient care and the family experience, and advance the role of the bedside nurse, said Dee Demma, MSN, RN, Clinical Leader Nursing Administration, who nominated Antee.



Children's Hospital recognizes outstanding nurses

The second annual **Children's Hospital New Orleans Nursing Excellence Awards** celebrates the outstanding achievements of nurses throughout the organization and those who support their efforts. Four distinguished nurses and a nurse champion were presented the award during Pediatric Nurses Week. They were among 14 candidates selected by a senior leadership panel of judges.

**As a former nurse recruiter and now the Director of Human Resources, I was humbled to have been chosen to help review the nominations for the Nursing Excellence Awards, ** said Rachel Perkins, Director of Human Resources and Children's Hospital Nursing Excellence Awards Panel Judge. "Reading the extraordinary nominations reminded me of how fortunate I am to work amongst the best team members at Children's Hospital. Each day our employees stand in the gap to provide exceptional care to our patients, families, and community. The Nursing Excellence Awards nominees consistently demonstrate their care and compassion and are a true reflection of the Children's Hospital Values! I am honored to have been part of the selection process."

Nursing excellence award recipients

Champion of Nursing



Anastasia (Ana) Callejo, MHA, R.T.(R)(ARRT)
Inpatient Radiology Lead
Technologist
For supporting nurses by demonstrating service and valuable assistance to the nursing profession.



Angele Charlet, BSN, RN
Clinical Nurse, Same Day
Surgery Unit
For inspiring learning and growth
of nurses in their roles, tailoring
the orientation program to meet
individualized educational needs,
and acting as a role model of
professional nursing behaviors.

Preceptor of the Year



Outstanding Community
Involvement
Janin Pierce, BSN, RN, CPN
Clinical Nurse Children's Hospital
Specialty Care – Covington
For demonstrating service to the
community and encouraging other
nurses to foster community growth.



The Umbrella Award
Kristin Broussard, MHA, BSN,
RN, CPN
Clinical Leader, Children's Hospital
Specialty Care – Covington
For exemplifying excellence in
all elements of the Children's
Hospital Professional Practice
Model: Compassion, Teamwork,
Professionalism, Communication,
Evidence-based Practice and
Research, and Quality of Practice.



Excellence in Nursing Leadership Laurie Tassin, MHA, BSN, RN, CPN Director Regional Ambulatory Clinics
For exemplifying communication and relationship building, knowledge of the healthcare environment, leadership, and professionalism.

Hospital honors its DAISY dozen

The DAISY Award for Extraordinary Nurses gives fellow nurses, hospital staff, providers, and patient families an opportunity to recognize nurses who demonstrate excellent clinical skills and tremendous compassion. Of the 63 Children's Hospital nurses nominated in 2021, 12 received the award.

DAISY Award Recipient Tessa Ayme, BSN, RN, Metairie Pediatrics

"She has a positive attitude that shines so brightly you can see her smile, even under her mask. Her clinical competence is outstanding, so much so that she trains new nurses and checks off their

competencies all while managing our very busy patient load. She is kind and patient with parents of new babies and supportive of all of our parents in their care of their children whether sick or well. With over 10 years of experience in the NICU, she is an expert at feeding babies and will take the time to teach our parents when their babies are having difficulty taking a bottle. Our patients LOVE her!"

Congratulations to
Children's Hospital's
2021 DAISY Award recipients:

Tessa Ayme, BSN, RN, Metairie Pediatrics
Aprille Baham, ASN, RN, 3 Center
Elizabeth Caffery, ASN, RN, CPN, 6 Center
Elizabeth Clement, BSN, RN, 5 Center
Paige Kastner, BSN, RN, 3 Center
Sara Lass, BSN, RN, CCRN, CICU
Veronica Lebourgeois, BSN, RN, PICU
Sydney Mayfield, BSN, RN, CPN, 3 Center
Janin Pierce, BSN, RN, CPN, Northshore Center
Ellie Pugh, BSN, RN, 5 Center
Veronica Quitanilla, BSN, RN, CPN, PICU
Brittany Russell, BSN, RN, CICU

DAISY Award Recipient Ellie Pugh, BSN, RN 5 Center

"During my stay, she always had a positive attitude and smile on her face. She put her patients' needs first. I was afraid of receiving judgment because of having a mental

health diagnosis in a medical

hospital but she treated me as a human. I wasn't a label. She didn't make me feel like I didn't need to be there or like I was wasting their time. She helped me make bracelets, listened, laughed, and talked with me, and did anything she could to make me comfortable. She cried with me, she reassured me, she huaged me. She wasn't a robot or just there to give me medication and take vitals. She showed compassion and vulnerability. Hospitals are known for being a dark and scary place, but her bubbly personality overruled. Her light shines through any darkness. She went above and beyond and did more than what was asked of her. She took exceptional care of me on a medical and emotional level. Considering she is a night shift nurse, I believe this was worth recognizing because I didn't have as much interaction and the environment is subject to change around these times! I'm grateful for the time spent with such amazing nurses who took care of me and treated me with respect."



FOR EXTRAORDINARY NURSES

IN MEMORY OF J. PATRICK BARNES

The DAISY (Diseases Attacking the Immune System) Foundation was formed in 1999 in honor of the Bonnie and Mark Barnes' son, J. Patrick Barnes, a 33 year old who died of an auto-immune disease. With a desire to fill the "giant hole in our hearts that Pat's passing had left," his family wanted to acknowledge the gifts nurses give their patients and families every day, just as the Barnes had experienced.

First nurse practitioners graduate from hospital-sponsored program

Through a Children's Hospital New Orleans and LSU Health School of Nursing partnership established in 2018, five Children's Hospital neonatal nurses became the first to graduate as doctors of nursing practice (DNP).

Graduating in May 2021 and transitioning to nurse practitioner positions at Children's Hospital are:

Courtney Finnegan, DNP, APRN, NNP-BC, CCRN
Mallory Lasalle, DNP, APRN, NNP-BC, CCRN
Gabrielle Letort, DNP, APRN, NNP-BC, CCRN
Jamie Posseno, DNP, APRN, NNP-BC, CCRN, CLC;
Christie Witherell, DNP, APRN, NNP-BC, CCRN, IBCLC

The Neonatal Nurse Practitioner post-baccalaureate DNP program incorporates in-person classes held at LSU Health School of Nursing, online modules, and clinical experience. After completing the curricula and scholarly project, students are able to sit for their board certification examination. In completion of the project and DNP-specific courses, students are trained to not only care for patients but also identify and remedy any quality improvement initiatives as needed. After graduation, NPs practice in the hospital or community as providers.

Accepted applicants are supported through the three-year program with tuition, fees, and supplies in exchange for three years of service in the Children's Hospital NICU after graduation. With the approval of the organization, nurses are able to implement their DNP projects in an LCMC Health facility. They

are supported by Children's Hospital's CNO and Advanced Practice Director in preparing and planning for credentialing and future practice.

"The NNP Program shows that nurses have the support of mobility within the organization," said Melissa Nunn, DNP, APRN, CPNP-PC/AC, CNE, Director of Advanced Practice. Those NNPs employed by Children's Hospital provide NICU coverage at Children's Hospital, Touro, and East Jefferson General Hospital.

Our current group has been working extra hours to ensure 24-hour coverage of these units as mandated by NANN guidelines. The new group of NNPs will alleviate the staffing burden from our current NNPs and allow for double coverage most days, said Melissa Nunn, DNP, APRN, CPNP-PC/AC, CNE

The Children's Hospital and LSU Health School of Nursing partnership strengthens the connection between the two organizations, allows LSU to be identified as a preferred clinical partner for clinical placements, and improves the opportunity for Children's Hospital-employed NPs to participate in LSU programs, such as academic appointments; the Leadership Academy and Writing Workshops; and grant partnerships.





2 NNPs graduating May 2022

2 NNPs graduating May 2023

3 NNPs graduating May 2024

Nurses complete graduate programs

Children's Hospital New Orleans recognizes the nurses below for completion of an advanced degree program.

Unit	RN name	School	Graduation date	Degree
NICU	Mallory Leblanc	LSU Health New Orleans	May 2021	Doctor of Nursing Practice (NNP)
NICU	Christie Witherell	LSU Health New Orleans	May 2021	Doctor of Nursing Practice (NNP)
NICU	Courtney Finnegan	LSU Health New Orleans	May 2021	Doctor of Nursing Practice (NNP)
NICU	Jamie Posseno	LSU Health New Orleans	May 2021	Doctor of Nursing Practice (NNP)
NICU	Gabrielle Lester	LSU Health New Orleans	May 2021	Doctor of Nursing Practice (NNP)
Operating Room	Crystal Tate	Louisiana State University of Alexandria	August 2021	Bachelor of Science in Nursing
CICU	Charlene Hammond	University of Louisiana Lafayette	May 2021	Bachelor of Science in Nursing
Children's Hospital Specialty Care - Covington	Janin Pierce	Southeastern Louisiana University	December 2021	Bachelor of Science in Nursing
Heart Center	Alli Carter	Southeastern Louisiana University	July 2021	Bachelor of Science in Nursing
Operating Room	Kristine Guillot	University of Louisiana Lafayette	May 2021	Bachelor of Science in Nursing
Pulmonology	Rachael Dufresne	Loyola University of New Orleans	May 2021	Master of Science in Nursing (FNP)
Hematology/ Oncology	Olivia Cornwell	University of South Alabama	April 2021	Master of Science in Nursing (CPNP-AC)
Nursing Professional Development	Nicole Sachitano	Loyola	July 2021	Master of Science in Nursing
Children's Hospital Specialty Care - Covington	Laura Tassin	Louisiana State University Shreveport	May 2021	Master of Health Administration
Children's Hospital Specialty Care - Covington	Kristin Broussard	Louisiana State University Shreveport	May 2021	Master of Health Administration
Orthopedics	Patricia Cadella	University of Louisiana Lafayette	December 2021	Bachelor of Science in Nursing

Employee Recognition Committee honors nurses

Team Members of the Month

Children's Hospital New Orleans team members of the month consistently demonstrate a high degree of excellence, professionalism, and integrity in the performance of their duties and have proven their willingness to extend themselves to help others both on and off campus.

Congratulations to the following nurses who were recognized in 2021 for their outstanding service.



Jasmine Hawkins, BSN, RN Clinical Nurse Emergency Department February 2021



Caitlin Alvarez, BSN, RN Clinical Nurse 3 Center October 2021



Emily Lambert, BSN, RNClinical Leader CVOR
November 2021



Lisa Lupin, BSN, RNRegistered Nurse
Transfer Center
December 2021

2021 Leaders of the Quarter

Similar to Employees of the Month, the Leader/Provider of the Quarter is chosen for demonstrating excellent performance of their duties and willingness to help others.

Children's Hospital and the Division of Nursing are proud to acknowledge the following nurses awarded for their exemplary contributions.



Leah Stanton, LPNClinic Manager
Children's Hospital Pediatrics
(Napoleon)
Quarter 2 2021



Kelsie Helmstetter, MHA, BSN, RN, NEA-BC Interim Trauma Program Manager Quarter 3 2021



Nicole Laborde, MBA, BSN, RN, CPN Senior Director Physician Services (Primary Care) Quarter 4 2021

Nursing by the numbers





RNs ON THE CLINICAL LADDER



93

different units/ departments

92 CNE credits offered 63_{RNs} 🌣

nominated for DAISY award by patients & families in 2021



61.8%

RNS HOLD A NURSING

SPECIALTY CERTIFICATION

Notes

Notes

Children's Hospital New Orleans

Nursing Annual Report 2021