Our nurses ensure high-quality patient outcomes and a culture of safety.
Letter from the chief nursing and patient care services officer

It’s certainly been a decade of extraordinary transformation and uncertainty in our health care sector, and last year was no exception. Yet despite the turbulence of the times, UC Davis nurses continued to demonstrate extraordinary commitment and selfless collaboration throughout the course of 2017 – adapting to the various changes that we necessarily face together, and also proactively creating new improvements to benefit those we serve.

1) Creating and influencing change focused on the patient experience. UC Davis nurses introduced or expanded several initiatives to improve throughput and increase comfort for our patients, such as ER rapid care and boarder care, a new discharge reception area, the Stepping Forward transfer project and PICC line verification.

2) Dedication to learning and empowerment. Approximately 85 percent of UC Davis nurses held a BSN or higher in 2017, above national goals and nearly 20 percent higher than at the start of the decade. A record average of 44 percent of clinical nurses held specialty certification, also exceeding our goals. Our nurses continue to bolster their expertise through our own internal career development programs and in outside settings such as the Betty Irene Moore School of Nursing at UC Davis.

3) Continuing our Magnet culture. Our professional nursing staff continues to create an environment where nurses flourish, are involved in decision making, and is interdisciplinary. Throughout this past year, our professional nursing staff, from across the medical center, compiled examples and outcome data of nursing’s work demonstrating we have created a culture that has the best patient outcomes and best work environment.

4) Incredible compassion. Despite the ever-shifting demands on their time, our nurses consistently demonstrate astonishing levels of kindness – within the walls of our hospital and in the community at large. DAISY Award-winning compassion, international medical missions, and an impressive milestone for our pillowcase project are among the highlights you’ll find in the pages that follow.

Thank you all for your special dedication – to our organization, our field, each other, and ultimately our patients.

Toby K. Marsh, RN, MSA, MSN, FACHE, NEA-BC
Chief Nursing and Patient Care Services Officer
UC Davis Medical Center
Transformational Leadership

Nurses at all levels of the organization demonstrate advocacy and influence change to achieve extraordinary outcomes in an environment of mutual respect.

**Nursing verification speeds availability of PICC lines**

The average time between the placement of peripherally inserted central catheters and their availability for use decreased from 4 hours to just 6 minutes after the introduction of 3CG technology in January 2017. Although specially trained nurses at UC Davis have placed PICC lines for more than 20 years, physicians have been responsible for verifying tip placement. The new technology implemented last year now allows PICC nurses to use a patient’s cardiac electrical activity to confirm placement, avoiding the wait for physician verification.

**ER Rapid Care reduces time to discharge**

Low-to-moderate-acuity emergency department patients saw their median time from arrival to discharge decrease by 20 percent in 2017, after clinical nurses, physicians and nursing leaders collaborated to redesign the unit’s nursing practice environment.
Discharge reception area improves throughput

In early 2017, chief nursing officer Toby Marsh and nurse manager Mary Lee-Fong worked to operationalize a special discharge reception area that has decreased average discharge time and freed up beds for patients awaiting admission. The area, located near the hospital’s main entrance, uses an underutilized pharmacy/admitting reception room to accommodate up to 29 patients awaiting discharge. The lounge is staffed by nurses who transport patients from inpatient units, serve as an educational resource, assist with filling prescriptions, schedule appointments, and arrange for transportation.

Chief nursing officer is new president of California Association of Healthcare Leaders

Toby Marsh was chosen in 2017 to serve a year-long term as president of the California Association of Healthcare Leaders (CAHL) in 2018. The association is an independent chapter of the American College of Healthcare Executives for the Northern and Central California Region, and serves 50 of the state’s 58 counties between the Oregon border, the Central Coast and Kern County. The organization pursues a variety of mentor projects and partnership training programs throughout the year.

A Modern Healthcare “Rising Star under 35”

Emily Torres, nurse manager of UC Davis Medical Center’s T-6 Medical-Surgical and T-4 ENT/Internal Medicine units, was selected as one of six “rising stars under 35” to receive Modern Healthcare magazine’s 2017 Excellence in Nursing awards. Torres, the sole Californian to earn rising star status, was one of the medical center’s founding Quality and Safety Champions and given the mission in 2010 to help reduce ventilator-associated pneumonia (VAP). After developing a root-cause analysis tool, Torres helped identify roadblocks to VAP prevention in the operating rooms by working collaboratively with colleagues across disciplines.
Structural Empowerment

Nurses engage in shared decision-making to establish standards of practice and improve patient outcomes through professional development, collaboration and contributions within the community.

Specialty certification exceeds goals

More than 700 certified clinical nurses provide patient care in clinical settings at UC Davis Health, both inpatient and outpatient, and 1,200 certified nurses of all levels work at the health system in total. In 2017 an average of 44.5 percent of clinical nurses held specialty certification, exceeding the goals set by Patient Care Services.

Nurses achieve specialty credentials through a formal process that includes specialized education, experience in a specialty area, and a board exam. The resulting certification offers patients and families reassurance that nurses are qualified, experienced and have met rigorous requirements.

UC Davis supports nurses in lifelong learning, and recognizes specialty certification through differential pay. The hospital also encourages special celebrations during Certified Nurses Day in March, and recognizes certified nurses in newspaper advertisements and posters.

Boosting the transition to critical-care careers

In an effort to support currently employed acute care nurses interested in a transition to adult critical care, the Patient Care Resources unit developed and implemented the Critical Care Career Development Program. The program provides practicing nurses with the knowledge and skills needed to successfully work in the critical care arena. Four nurses have participated to date.
Medical mission – Philippines

For the last three years the UC Davis Children’s Surgery Center’s Christy Inzaina has traveled to the Philippines with Faces of Tomorrow, a Davis-based nonprofit that helps provide medical and surgical services to children with facial deformities around the world. In 2017, Inzaina was part of a team of 35 surgeons, anesthesiologists, registered nurses, pediatric critical-care physicians, scrub techs and orthodontists/dentists that were together able to provide approximately 50 patients with a total of about 80 procedures.

Community classrooms served by Operation Backpack

Pediatric nurses collected a total of 332 backpacks filled with supplies – or enough to serve roughly 11 classrooms in the community – during the sixth year of Operation Backpack. Patient Care Services donated 121 backpacks, including 48 for high school students, while ambulatory areas donated 162 backpacks and the Emergency Department donated 69 backpacks. The program aims to help ensure that all children are prepared for school in order to improve their chances for success.

Medical mission – Guatemala and Tanzania

Certified registered nurse anesthetists at UC Davis continue to volunteer their time and expertise with Rotaplast International, a San Francisco-based nonprofit that partners with Rotary Clubs and others to provide free surgical treatment for cleft lip, palate deformities, burn scarring and congenital anomalies. CRNAs on the medical missions help to complete preoperative evaluations, provide safe anesthesia care and pain management during procedures, and oversee postoperative stays. Dave Rowen participated in a mission to Guatemala in 2017 and Rebecca Orlino volunteered in Tanzania. In 2018, Hil Tantoco will travel to Tanzania and Sharyn Babbit and Orlino head to Colombia. Past participants in overseas missions include Kelly Bias, Derek Evans, Steve Salvemini and Gary Stock.
Employees volunteer to assist Northern California fire victims

Pediatric intensive and cardiac care nurse Nicole Vance was one of many UC Davis Health employees who volunteered to help families affected by California’s historic 2017 urban wildfires. Vance rallied her network of colleagues – including PICU staff, pediatric transport team members and Davis 7 nurses, along with family and friends – and within 48 hours had gathered $2,800 in Visa gift cards, more than 1,100 diapers, 220 N95 respirators and various other supplies for evacuees, as well as 300 pounds of pet food for the Sonoma Humane Society.
10,000th pillowcase sewn for pediatric patients

In 2017, PACU assistant nurse manager Michele Kim, RN, BSN, CCRN, and colleagues reached an astounding 10,000 pillowcases sewn for pediatric patients. What started as a community service project with Kim’s high-school daughter in 2012 has now turned into a massive project that aims to make pillowcases for every child who has surgery at UC Davis Medical Center. Many PACU and CSC nurses and even pediatric anesthesiologists have donated fabric and helped to sew the beautifully colored and humanizing gifts.

Career Ladder helps nurses step up in the profession

Patient Care Services launched a new “Career Ladder” nursing advancement process in 2017. The process provides a consistent framework for promotion into the Clinical Nurse III category, incorporating feedback from nursing staff and reflecting the organization’s values. Through a written and oral portfolio process, applicants summarize their clinical expertise and highlight their competence as practitioners, educators, advocates and health leaders. Some of the most notable educational achievements in the inaugural round of 16 applicants included six nurses with graduate degrees earned or in progress, 15 with specialty certifications, and several who had published articles, presented at conferences, represented councils, or participated in research and quality improvement projects.
Daisy Awards for Extraordinary Nurses

Several extraordinary UC Davis nurses in 2017 received The DAISY Award, designed to demonstrate society’s profound respect for the education, training, brainpower, skill and caring that nurses put into their daily work.

Extraordinary teamwork

A DAISY team award recognized 64 nurses with the Tower 8 Transplant and Metabolic Unit for more than seven months of compassionate care they provided an elderly patient with a history of dementia. Because the patient didn’t have any family, lacked the capacity to understand his care situation and didn’t speak English, the Tower 8 nursing team developed a unique plan of care that was entirely patient-centered – and required extraordinary amounts of collaboration and coordination. Team members brought in special home-cooked Korean foods to help meet the patient’s nutritional needs, and Korean newspapers, coloring books and puzzles to engage his mind and reduce bouts of agitation and confusion. Staffers also took turns walking with him several times each day to help maintain his health and keep him safe from wandering away.

The nonprofit DAISY Foundation established the national award program in memory of J. Patrick Barnes, who died at age 33 of the autoimmune disease Idiopathic thrombocytopenic purpura. Awestruck by the clinical skills and compassion of Patrick’s nurses, the Barnes family created the award to thank nurses across the nation. Recipients at participating hospitals are nominated by peers, physicians, patients and families, staff and administrators. Fifteen nurses and one nurse leader received individual DAISY honors in 2017.
Individual Awards

1) Judie Boehmer, RN, MN, NEA-BC, FABC
   Nurse Leader Award
   Executive Director, Patient Care Services

2) Makeda Byrd, RN, BSN
   Davis 6 Cardiology Services

3) Hazel Callahan, RN
   GI and Endoscopy Unit

4) Joel Digao, RN, BSN
   Davis 12 Surgical Specialties Unit

5) Julie Hamilton, RN, BSN, CCRN
   Tower 7 MSICU Gold

6) Holly Kidd, RN, BSN
   Main Operating Room

7) Michelle Kim, RN, BSN, CCRN
   PACU

8) Erin Kozlowski, RN, BSN
   Tower 7 MSICU Blue

9) Krysta Lewis, RN, BSN, CCRN
   CTICU

10) Katie Lund, RN, BSN
    Davis 11 Trauma Nursing Unit

11) Vanessa Nauta, RN, BSN, CEN
    Emergency Department

12) Scott Prudhomme, RN, BSN
    Radiology

13) Katherine Suggett, RN, BSN, CHFN
    Cardiology Clinic

14) Mahabet Trute, RN, BSN
    Davis 12 Surgical Specialties Unit

15) Red East D Tumang, RN, BSN
    Patient Care Resources

16) Yan Wang, RN, BSN
    East 5 Neuro
Nationally ranked School of Nursing

The Betty Irene Moore School of Nursing at UC Davis breaks traditional boundaries, develops innovative partnerships and creates leaders who advance health care.

UC Davis Health nurses help teach in entry-level nursing program

Several UC Davis Health nurses serve as part-time clinical instructors for the new Master’s Entry Program in Nursing at the Betty Irene Moore School of Nursing at UC Davis. The 18-month accelerated-degree program — which graduated its inaugural class in December — offers the quickest route to registered nursing licensure for adults who have already completed an undergraduate degree in another discipline, as well as prerequisite courses. Clinical instructors serve an important role in teaching specialty practice elements across nursing courses for the program, and each instructor guides a group of eight students in a clinical environment. A number of the 24 inaugural graduates honored popular instructor and UC Davis nurse Robert Montgomery (shown in the image above) by requesting him to pin them during their pinning ceremony, a symbolic welcoming of newly graduated nurses into the nursing profession.

Classes of 2017 feature several UC Davis Health nurses

From the Doctor of Philosophy program through the new Master’s Entry Program in Nursing, the Betty Irene Moore School of Nursing’s 2017 graduating classes included several UC Davis nurses. Five graduates of the prelicensure master’s entry program (including the NICU’s Alana Matarazzo and Brooke-Ashley Cook, shown above) were accepted into the UC Davis Medical Center Nurse Residency program, a series of learning and working experiences that help with the transition from school to professional practice. The program is part of the Vizient/American Association of Colleges of Nursing (AACN) Nurse Residency Program.
Betty Irene Moore Hall opens

More than 800 people attended an October grand opening celebration for Betty Irene Moore Hall, which serves as the new home of the Betty Irene Moore School of Nursing at UC Davis and supports interprofessional health sciences education for nursing, medicine, public health, informatics, and more. The transition to the innovative new space marked a significant milestone in the life of the fast-growing school, established in 2009 through a $100 million commitment from the Gordon and Betty Moore Foundation — the nation’s largest grant for nursing education. In the decade since it has launched five highly complex educational programs focused on dissolving traditional boundaries, developing innovative partnerships and creating leaders who advance health care, and been ranked in the top 50 of the nation’s best master’s-degree nursing programs.

The grand opening festivities at Betty Irene Moore Hall in October 2017 included a ribbon cutting ceremony, building tours and simulation suite exercises. From left, Victoria Jackson, nursing student; Russ Bell, School of Nursing National Advisory Council Chair; Nancy Rodriguez, nursing student; Kathleen Justice-Moore and Ken Moore, Gordon and Betty Moore Foundation; Heather M. Young, founding dean of the Betty Irene Moore School of Nursing; UC Davis Chancellor Gary S. May; Thomas Nesbitt, UC Davis interim vice chancellor for human health sciences; UC Davis Provost Ralph Hexter; Lars Berglund, interim dean for UC Davis School of Medicine; Sameera Mokkarala, medical student.
Nurses ensure high-quality patient outcomes and a culture of safety through interprofessional collaboration and the integration of the professional practice model with the delivery of patient care.

Caring for boarder patients in the emergency department

To improve high-quality care and boost patient experiences in our emergency and trauma care department, ED nursing director Rupi Sandhu, RN, BSN, MBA, implemented a new staffing model in 2017 that allocated dedicated medical/surgical nurses to specifically care for patients awaiting admission from the ED. These nurses report to the manager for their assigned units, but work exclusively in the ED providing care to “boarder” patients. The technique has helped to ensure appropriate levels of care for patients awaiting admission; decrease PCR resource utilization in the ED to help assure availability for inpatient areas; and increase the availability of ED nurses to care for ED patients.

Home-Based Palliative Care program

UC Davis has a long history of supporting the medical needs of patients in the community through initiatives such as the Home-Based Palliative Care program, which focuses on improving continuity and care coordination for patients as they transition back into their homes. Laurie Aloisio, RN, BSN, undertook a small pilot project that produced successful improvements in symptom management and reductions in hospitalizations and emergency department visits. In 2017, after demonstrating the success of this program, the UC Davis Home Health and Hospice unit secured funding to extend the program an additional year.
Improving time to resolution for hypoglycemic patients

Active blood glucose management is paramount to optimal outcomes in hospitalized patients with diabetes – but the task can also be challenging. However, targeted efforts last year in the East 6 Cardiothoracic Progressive Care Unit helped to decrease median time from initial recognition of hypoglycemia to resolution – a key indicator of quality of care – by 43 percent. The unit receives adult and elderly patients from the ED, transfers from other facilities, direct admissions from the cardiology clinic, cardiac procedural patients, intra-hospital transfers and ICU overflow. All typically have longstanding uncontrolled diabetes, and medical management places them at high risk for hypoglycemia. Berit Bagley, RN, BSN, CDE, examined current practice and worked with East 6 nurses to improve time to resolution through targeted, evidence-based nursing education.

A matter of balance to prevent unintentional falls

The UC Davis Trauma Prevention and Outreach program was established in 1996 to help decrease preventable death and injuries through education, research and outreach. In one major initiative, program leader Christy Adams, RN, MSN, PhD, assembled a consortium of four area trauma centers and over 50 key stakeholders to decrease the number of unintentional falls among the elderly. The group’s efforts led to the founding of A Matter of Balance, an award-winning, evidence-based workshop held in the Sacramento area. The working group facilitated seven of the free workshops for older adults in 2017.

Stepping forward to reduce patient anxiety

Transferring from the intensive care unit to an acute-care unit may cause significant anxiety for some patients. To help ease it, staff from the East 6 Cardiothoracic PCU implemented the “Stepping Forward” patient-education program. As patients progress in their recoveries, CTICU nurses educate them about the differences between an ICU and a progressive care unit, and how leaving the ICU is a step closer to being discharged home. Actual transfers between the CTICU and East 6 are also handled via a formal process that features strong initial communication – which allows the CTICU nurse to adequately prepare patient and family for transfer – as well as strong communication during the transition itself via formal introductions among all parties, bedside report and a time for questions.
Re-igniting the Spirit of Caring celebrates a decade of impact

2017 marked the 10th anniversary of Re-igniting the Spirit of Caring, a three-day workshop initially launched to support primary nurses and then expanded to serve respiratory therapists, hospital unit service coordinators, physicians, social workers and other care team members. Classes are considered a rare opportunity for care providers to step outside of their busy, complex daily worlds and focus attention on self-care, strengthening relationships with coworkers, and ultimately reconnecting with the core purpose of their work – caring for people who need compassion and help. Former chief nursing officer Carol Robinson introduced the classes with the idea that nurturing the heart and souls of nurses is as valuable as providing education for the mind.
Marie Manthey helps UC Davis celebrate National Nurses Week

Nurse, author and primary nursing innovator Marie Manthey spoke at the annual Celebration of Nursing Excellence ceremony that marked National Nurses Week 2017 at UC Davis Medical Center. Manthey, president emeritus of Creative Healthcare Management, is recognized as one of the founders of primary nursing care model that UC Davis uses to provide relationship-based care. The special approach gives nurses the opportunity to provide personalized care and create a relationship beyond the typical nurse/patient assignment, hopefully in turn improving both patient and nursing satisfaction.

Professional Governance Celebration

The Nursing Research Council hosted the 2017 Professional Governance Celebration, which showcased the outstanding work of nurses across UC Davis Health and highlighted the efforts of Unit-Based Practice Councils. Fifty displayed posters reflected work across patient-care areas addressing four performance excellence commitments – including Best People and Practice Environment, Best Patient Experience, Best Quality and Best Financial Performance. The Nursing Research Council assists nurses with implementation of evidence-based practice and mentoring to understand, evaluate and conduct nursing research.

Post-discharge call program helps reduce readmissions

The nurse-led, nurse-staffed post-discharge call program expanded throughout all adult inpatient units in 2017. We have subsequently seen lower readmission rates in patients reached by voice, as well as increases in HCAHPS transitions of care and communication domains. UC Davis Health reaches out to 1,500-2,000 patients per month after discharge through the CipherHealth Voice automated program and successfully reaches 63 percent, exceeding the national median. Patients with questions or concerns receive assistance callbacks from a team that includes Trish Smith, BSN, RN-BC, Diana Grabchuk, BSN, RN, and Diane Mua-Xiong, BSN, MSNc, RN, PHN, CCRN. The leader of the growing program is Kelly Grady, MSN, MPA, RN-BC, PHN, ONC.
New Knowledge, Innovations and Improvements

Nurses achieve best practice for patients by integrating evidence-based practice into patient care and generating new knowledge through nursing research.

UC Davis study finds **morning huddle** improves patient flow

A 2017 UC Davis nurse-led study published in the *Journal of Pediatric Nursing* found that patient safety, staff and patient satisfaction, and positive health outcomes improved after the addition of a ten-minute daily morning huddle. Cheryl McBeth, nurse manager for the pediatric intensive care unit (PICU), led the study to assess whether huddles could improve interprofessional and interdepartmental communication and collaboration at UC Davis Children’s Hospital. Researchers reviewed changes in patient flow before and after huddle implementation as measured by pediatric emergency department boarding times. Their findings noted positive changes, and have provided opportunities for learning, information sharing, establishing accountability, and developing trust and mutual respect.

MRI movies help reduce anxiety, **anesthesia in pediatric patients**

Fewer pediatric patients at UC Davis required general anesthesia for their MRI exams in 2017 due to the addition of a dedicated child life specialist in radiology along with special goggles that play DVDs during the procedure. Child life specialist Carla Andalis and nurse practitioner Danise Seaters, MSN, NP-BC, collaborated on the project to reduce patient anxiety and the possibility of side effects from anesthesia use. As of last summer, approximately 80 percent of MRIs were performed without anesthesia among patients ages 6-11, and 63 percent among kids ages 0-5.
Children’s Miracle Achievement Award

Two exceptional UC Davis nurses received the UC Davis Children's Miracle Achievement Award in 2017, designed to honor caregivers who have significantly elevated the care of children and been impacted by Children’s Miracle Network (CMN) funds.

Children's Surgery Nurse Manager Karen Semkiw, RNC, MPA, was nominated for her work to improve quality and care. Semkiw reviews approximately 5,000 medical records each year and provides insight into system issues that drive quality improvement efforts. Due in part to her efforts, UC Davis Children’s Hospital was the fourth nationwide and first on the West Coast to receive level I children’s surgery verification by the American College of Surgeons in 2016. The Children’s Miracle Network at UC Davis is also helping to raise funds for the new Children’s Surgery Center, scheduled to open late 2018.

Kandice Duns, assistant nurse manager of the UC Davis Newborn Nursery, was nominated for her work to improve the quality of care provided to obstetric and newborn patients. Duns is recognized for her leadership in developing an initiative to improve safe sleep practices for children – and particularly those in Sacramento County, who have some of the highest sleep-related deaths in California. Duns approached CMN at UC Davis for assistance, and all infant patients at UC Davis now receive a free sleep sack upon discharge thanks to a CMN grant.
## Podium Presentations

<table>
<thead>
<tr>
<th>Presenter</th>
<th>Department</th>
<th>Conference</th>
<th>Location</th>
<th>Presentation title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brenda Chagolla RNC, MSN, CNS, NEA-BC</td>
<td>Birthing Suites/ Women’s Pavilion/Newborn Nursery</td>
<td>Neuroscience Nurses Conference</td>
<td>Opatija, Croatia</td>
<td>Implementation of perinatal safety bundles</td>
</tr>
<tr>
<td>Maureen Craig, RN, MSN, CNN</td>
<td>Nephrology</td>
<td>Home Dialysis Conference</td>
<td>Indiana University</td>
<td>Reaching your best life with home dialysis</td>
</tr>
<tr>
<td>Christi DeLemos, MSN, CNRN, ACNP-BC</td>
<td>Patient Care Services</td>
<td>Midwest Home Dialysis Conference</td>
<td>Kansas City, MO</td>
<td>How mobile applications are transforming how we perform research</td>
</tr>
<tr>
<td>Jennifer McGrath, AGACNP-BC</td>
<td>Trauma &amp; Acute Care Surgery</td>
<td>AANN Stroke Conference</td>
<td>Sacramento, CA</td>
<td>Informed Care: Understanding adverse childhood experiences as they relate to the trauma patient and their treatment team</td>
</tr>
<tr>
<td>Christine Picinich, MS, ACNP-BC</td>
<td>Neurological Surgery</td>
<td>UC Neurotrauma Conference – UC Davis</td>
<td>Kona, HI</td>
<td>The academic practice partnership for the development of informatics educational tools and resources</td>
</tr>
<tr>
<td>Michelle Sturges, BSN, RN, CCTC</td>
<td>Transplant Center</td>
<td>National Transplant Conference</td>
<td>Santa Barbara, CA</td>
<td>Academic practice partnership for the development of informatics educational tools and resources</td>
</tr>
<tr>
<td>Kathleen M Guiney, RN-BC, MN, MS</td>
<td>Neurocritical Care</td>
<td>UC Davis</td>
<td>Kona, HI</td>
<td>Diabetes risk in healthy living kidney donors</td>
</tr>
<tr>
<td>Jennifer McGrath, AGACNP-BC</td>
<td>Neurocritical Care</td>
<td>UC Davis</td>
<td>Kona, HI</td>
<td>Meningitis and encephalitis</td>
</tr>
<tr>
<td>Lori Kennedy Madden, PhD, RN, ACNP-BC, CCRN, CNRN</td>
<td>Center for Nursing Science</td>
<td>UC Neurotrauma Conference</td>
<td>Santa Barbara, CA</td>
<td>Traumatic brain injury: A modern experience at UC Davis</td>
</tr>
<tr>
<td>Stefanie Generao, MS, FNP-BC</td>
<td>Vascular Center</td>
<td>AANN Stroke Conference</td>
<td>乌鲁木齐, China</td>
<td>Not “Just a Nurse” – Neuroscience Nurses: Advancing patient care – Advancing the specialty</td>
</tr>
<tr>
<td>Christine Picinich, MS, ACNP-BC</td>
<td>Neurological Surgery</td>
<td>UC Neurotrauma Conference</td>
<td>Santa Barbara, CA</td>
<td>Advanced practice partnership for the development of informatics educational tools and resources</td>
</tr>
<tr>
<td>Jennifer McGrath, AGACNP-BC</td>
<td>Transplant Center</td>
<td>National Transplant Conference</td>
<td>Kona, HI</td>
<td>Academic practice partnership for the development of informatics educational tools and resources</td>
</tr>
<tr>
<td>Michelle Sturges, BSN, RN, CCTC</td>
<td>Transplant Center</td>
<td>National Transplant Conference</td>
<td>Kona, HI</td>
<td>Diabetes risk in healthy living kidney donors</td>
</tr>
<tr>
<td>Christine Picinich, MS, ACNP-BC</td>
<td>Neurological Surgery</td>
<td>UC Neurotrauma Conference</td>
<td>Santa Barbara, CA</td>
<td>Traumatic brain injury: A modern experience at UC Davis</td>
</tr>
</tbody>
</table>
Presentation title: Enlisting clinical experts to develop an advanced living kidney donor evaluation protocol
Conference: National Transplant Coordinators Conference

Presenter: Holly Kirkland-Kyhn, PhD, FNP, CWCN
Department: Wound Care Team

Presentation title: Presentation on Using Technology to Enhance Quality, Safety, and Research: A HAPU Project
Conference: CHPSO

Presentation title: Patient Related Risk factors in the Development of DTI in the ICU
Conference: CALNOC

Presentation title: Hospital-acquired pressure ulcers as compared to community-acquired pressure ulcers
Conference: CALNOC

Presentation title: Patient Related Risk factors in the Development of DTI in the ICU
Conference: Society for Advanced Wound Care
Location: San Diego, CA

Poster Presentations

Presenter: Liz Clifton, MSN, RN, CNS, CEN
Presentation title: Innovation in Disaster Preparedness Education: Integration of Simulation
Conference: California Hospital Association Disaster Planning Conference

Presentation title: Raising the bar for children’s surgery through level 1 verification
Conference: American College of Surgeons

Presenters: Nikki L Barba, ADN, RNC-OB, and Melaney L Stricklin, MSN, RNC-OB, CCE
Department: University Birthing Suites

Presentation title: Cannabinoid Hyperemesis Syndrome Complicated by Type I Diabetes in Pregnancy
Conference: Association of Women’s Health, Obstetric and Neonatal Nurses
Location: New Orleans, LA

Presenters: Christi DeLemos, MSN, CNRN, ACNP-BC, and Claire Basco, MSN, NP, CNRN
Department: Patient Care Services, Neurological Surgery

Presentation title: Secreting neuroendocrine tumors and the role of advanced practice nurses in management in the United States
Conference: World Federation of Neuroscience Nurses
Location: Opatija, Croatia

Presenters: Holly Kirkland-Kyhn, PhD, FNP, CWCN, Joanna Mello, PhD, FNP, CWCN, Jennifer Mattice, MS, RN, and Bo Vang, RN, WCC
Department: Wound Care Team

Presentation title: Bedside care in the ED – early identification and interventions for the prevention of pressure ulcers in the acute care setting
Conference: National Pressure Ulcer Advisory Panel Symposium
Location: New Orleans, LA

Presenter: Holly Kirkland-Kyhn, PhD, FNP, CWCN
Department: Wound Care Team

Presentation title: Burn Unit – What do first Responders know about Pressure Ulcers
Conference: National Pressure Ulcer Advisory Panel Symposium
Location: New Orleans, LA

PRESENTATION TITLE: Patient Related Risk factors in the Development of DTI in the ICU
CONFERENCE: National Pressure Ulcer Advisory Panel Symposium
LOCATION: New Orleans, LA

Presentation title: Obesity and Intentional Weight Loss- Health Related Quality of life
Conference: Sigma Theta Tau
Location: Dublin, Ireland

Presentation title: Patient Related Risk factors in the Development of DTI in the ICU
Conference: CALNOC

Presentation title: Hospital-acquired pressure ulcers as compared to community-acquired pressure ulcers
Conference: CALNOC

Presenter: Liz North, RN, BSN
Department: PICU

Presentation title: Zapping Ventilator Associated Pneumonia in the PICU for Half a Decade
Conference: AACN National Teaching Institute
Location: Houston, TX
In collaboration with Performance Excellence, the Quality and Safety Council continues standardizing communication, rounding and problem-solving important patient safety issues by implementing a problem solving tool known as the A3.

A3 stakeholders review real-time data, perform root cause analysis, review evidenced-based practices and create action plans to improve patient outcomes.

CAUTI

61 CAUTI in 2016
44 CAUTI in 2017

*N empirical outcomes figures reported by calendar year.
CLABSI

The Central Line Associated Blood Stream Infection (CLABSI) Workgroup is tasked with reducing patient harm associated with central lines.

92 CLABSI in 2016
51 CLABSI in 2017

Falls

The Falls Committee is focused on improving and standardizing the root cause analysis process for fall events to identify contributing factors.

89 falls with injury in 2016
89 falls with injury in 2017

HAPI

The wound care team continued to work with nursing to improve hospital acquired pressure injuries and identify community acquired pressure injuries present on admission.

23 HAPI Stage 2+ in 2016
15* HAPI Stage 2+ in 2017

*May be lower due to current coding limitations