A Message from
Chief Nursing
and Patient Care
Services Officer
Toby Marsh

UC Davis Health nurses make a positive impact on our patients’ lives. Our nurses provide science-based, compassionately delivered care to our patients every day. I admire and am grateful for the love and empathy our nurses continue to give. They are transforming lives with their kindness and skills.

In this issue of UC Davis Nurse, you will find highlights of the excellent care our nurses give each day. You will read about the gold-level Beacon Awards earned by both the Cardiothoracic Progressive Care and the Cardiothoracic Intensive Care Units, as well as our newest DAISY Award and Always Nurses recipients.

Please take a moment to read about Sandra Boykin and Mental Health First. This volunteer-based team is trained to de-escalate confrontations and direct aid and resources to those experiencing potentially life-threatening psychological issues. Also, find an update regarding the 2021 American Nurses Credentialing Center Magnet Conference, where ten UC Davis Health nurses attended to learn and share with colleagues throughout the nation.

MESSAGE FROM TOBY | CONTINUED ON PAGE 3

Michelle Linenberger, professional development nurse specialist and nurse educator at UC Davis Children's Hospital, has been appointed chair of ANPD's Recognition Committee.

The ANPD advances the specialty practice of nursing professional development for the enhancement of health care outcomes. Professional development as a specialty of nursing practice is defined by standards, based on research, and is critical to quality patient and organizational outcomes.

The Recognition Committee reviews submissions and selects recipients of awards and scholarships offered by ANPD, and the chair position is appointed by the ANPD National Board.

“Serving on a committee at the national level for my professional organization was important to me to not only get more involved and represent my institution, but also to grow my network nationally and share my expertise,” Linenberger said. “I am honored to work with a dedicated group of nursing professional development specialists from all over the country to improve the quality of care we provide and enhance patient outcomes by recognizing the outstanding achievements and contributors to ANPD.”

Michelle Linenberger, professional development nurse specialist and nurse educator at UC Davis Children's Hospital, has been appointed chair of ANPD's Recognition Committee.
Gratitude Heals

Our clinicians give themselves in many ways, including charitable giving. “Why I Give” offers a personal look at why one of our own gives to UC Davis Health.

Cathy Runne retired in 2017 following a stellar 28-year career at the UC Davis Children’s Hospital, primarily in the Neonatal Intensive Care Unit (NICU). She even passed her love of nursing in the NICU on to her daughter, Elizabeth, a nurse at Primary Children’s Hospital in Salt Lake City.

This past fall, Cathy provided a generous gift to launch the Neonatal Nursing and Families Innovation Fund. The fund has a dual purpose of encouraging NICU nurse education and professional development, while also supporting NICU patients and families through reunions, events and activities connecting them with the nurses, clinicians and staff who cared for the infants during their stay in the NICU.

When she’s not traveling and visiting her “Fab 5” UC Davis Nursing alumni – Nancy McMillan, Bonnie Merz, Andrea Varanini, and Nancy Angelone – Cathy is determined to make a difference in the lives of all those who enter UC Davis Children’s Hospital NICU.

We caught up with Cathy to learn what inspired her to donate to UC Davis Health and why giving back is important to her – especially now as she enters this next phase of her life.

Why did you become a nurse?
When I was young, I always wanted to take care of my sisters and stuffed animals. There are pictures of me in a play nurse dress, cap included. For a Christmas present, I received a “broken leg doll,” which came with a cast and crutches for healing. That was when I knew I wanted to become a nurse. Years later, I read an article in Life magazine featuring a new medical service, Neonatology, and decided that field was for me.

You had a wonderful career at UC Davis Children’s Hospital. What made it so memorable for you?
The collaboration and friendship with my nursing peers during my career was outstanding. The dedication of care for our tiny population made me very proud to be a member of UC Davis Health NICU.

Why is giving back to UC Davis Health important to you?
My family has received excellent care at UC Davis Health, benefiting from top-rated medical care and the latest research services to best practice nursing care. I want to continue to promote these qualities in the NICU.

Your daughter is a NICU nurse. Why is professional development important, and why did you want to support this with your gift?
To be able to expand your nursing knowledge enables one to provide best practice nursing care. I was fortunate to have those opportunities during my nursing care and I want to give back to provide the same for current nurses, as well as future neonatal nursing staff.

Your gift also supports families who have experienced a child in the NICU. Why was this important to you?
To have an infant in the NICU is such an emotional rollercoaster for the family members. I want to help promote opportunities for them to share their experiences with other families as well as the staff. To see a NICU graduate is very heartwarming for the nursing staff.

What would you tell your former nursing colleagues about investing in the future of nursing?
Investing in our future nurses is a way to continue our legacy and love for the nursing profession.

What comes next for Cathy Runne?
To continue to enjoy my retirement years being with family and friends!
UC Davis Health celebrates Hmong New Year and honors healthcare workers

On Friday, November 19, UC Davis Health, the Hmong Nurses Association and OCA Sacramento, which represents Asian Pacific American Advocates, celebrated the Hmong New Year and recognized Hmong healthcare workers for their work on the front lines during the pandemic.

The Hmong New Year celebrates the conclusion of the harvest season, marks the end of a year’s hard work, and is a time to honor ancestors. At the event, nineteen UC Davis Health employees were celebrated for the compassionate patient care that they gave throughout the pandemic. Chief Nursing and Patient Care Services Officer Toby Marsh, President of the Hmong Nurses Association Mai Lee, and Jinky Dolar from OCA Sacramento presented certificates from Sacramento Mayor Darrell Steinberg, California State Senator Richard Pan, and U.S. Congresswoman Doris Matsui.

“The New Year is a chance for us to express our extreme gratitude and thanks for all that you have done, and continue to do, during this ongoing pandemic,” said Marsh. “You come to work each day to care for our patients with extraordinary love, compassion, courage and integrity and I am extremely grateful for you.”

Each attendee received a Hmong nurse’s pin as part of the festivities.

You will also read about our celebrations for Diwali and the Hmong New Year. The events were a time to pause, reflect and honor nurses who have provided exceptional patient care throughout the pandemic and celebrate the diversity of our nursing team members.

I hope this edition of UC Davis Nurse highlights the tremendous care and service our nurses continue to provide with extraordinary love, compassion, courage, and integrity in every situation.

With much appreciation and love,

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

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Instagram: @tobymarshrn

CTICU Receives Gold Beacon Award

Cardiothoracic Intensive Care Unit (CTICU) was honored to receive the gold-level American Association of Critical Care Nurses (AACN) Beacon Award in 2021. Gold is the highest level of the Beacon Award. According to AACN, units that demonstrate an effective and systematic approach to policies, procedures and processes include engagement of staff and key stakeholders; fact-based evaluation strategies for continuous process improvement;

From left to right: P.Tracy Santiago, Floricel Oliva-Dizon, Alicia Kifioi, Sam Daddow, Stacey Camposagrado, Melissa Quon, Tabor Laflam, Angelina Bozhko, Melissa Pereira, Holly O’Keeffe, Lauren Gerety, Juliet Chu, Nichole Cuyegkeng, James Campbell, Jennifer Perisho, Randy Owensby, and Kevin Floyd
Happy New Year (nyob zoo xyoo tshiab) to everyone! My name is Mai Lee, RN, BSN, CEN, and I have been an RN for 32 years with the last 13 years as a CNII in the Emergency Department. I am also the co-founder and currently the National President of the Hmong Nurses Association (HNA).

So, who and what is the Hmong Nurses Association? Prior to the Hmong Nurses Association, there was no other organization or association of its kind that represented the Hmong nursing professionals. In an effort to bridge this gap, the Hmong Nurses Association was formed in 2018 as a nonprofit 501(c)(3) organization with a vision to empower Hmong nurses to strengthen their careers and reach their full potential in the nursing profession in solidarity with sharing knowledge to improve and sustain the health of its members and community.

HNA’s mission is to be a professional organization that unites and empowers Hmong nurses to strengthen nursing knowledge and clinical practice towards the highest standards, to passionately sustain the collegial interactions amongst nurses through networking and mentorship, promote awareness and education of culturally competent care, and to educate the Hmong community about wellness management. HNA provides a unique opportunity for Hmong nurses as well as the communities they serve because of its vision and mission.

Hmong Nurses Association is very honored and proud to have collaborated with UC Davis Health and OCA Sacramento this year in recognizing and celebrating their Hmong staff during the Hmong New Year. Traditionally, the Hmong New Year is celebrated and held from the fall season to the end of the year; however, the pandemic has disrupted our daily lives. Therefore, for the safety and well-being of everyone, the annual Sacramento Hmong New Year was canceled. Despite the change, the UC Davis Health Hmong New Year Celebration of Health Care Workers event held on November 19, 2021, brought gratitude and honor to the UC Davis Health Hmong staff.

UC Davis Health recognized and celebrated these individuals for their dedication, service, and commitment to providing excellent care to the patients and the community during a very challenging time of a pandemic and social injustice and unrest. In addition to fulfilling their full-time job duties, many volunteered at the COVID Vaccine Clinics and collaborated with community organizations to educate the underserved communities to dismiss misinformation on COVID-19.

UC Davis Health is the first trailblazing health care system in the US to celebrate their Hmong staff, and we appreciate this gesture. It truly shows UC Davis Health’s dedication and commitment to its mission of “grounded in equity, we provide unparalleled care across California, transforming lives and communities.”

This past year has been difficult and challenging, calling for extraordinary efforts, perspective, and sacrifice. However, through collective thinking, collaborative efforts, and cooperative actions, we all have come through this stronger than ever. I am very proud and honored to be working here at UC Davis Health. It is the first time in my nursing career that I am witnessing a healthcare system in the US include an appreciation event for its diverse healthcare staff, especially the Hmong.
Cancer Center Updates

Celia Pena

Celia Pena joined the UC Davis Comprehensive Cancer Center and Cancer Care Network in August 2021. After eight years in the UC Davis Children’s Hospital PICU/PCICU, she transitioned to the Cancer Center, as her passion has always been Oncology. She hit the ground running, implementing the first New Grad RN Residency Program. As a result, two new graduates were welcomed to the team and we are excited to support their growth and ignite a passion for Oncology. In a very short amount of time, Celia has organized a curriculum that creates a rich learning environment for the new graduates by partnering with the Center for Professional Practice of Nursing and Oncology Nursing Society.

Ines Hodzic

Ines Hodzic served as one of the UC Davis Health’s 2022 Evidence Base Fellows (EBF). She has been a key member of infusion services at the UC Davis Comprehensive Cancer Center since January of 2021. Ines has a passion for patient education and uses her time at the chairside to build therapeutic relationships with her patients. She is always eager to learn and advance her clinical skills and has a passion for practice improvement. We are thrilled that she was accepted into the EBP fellowship. Ines is interested in collaborating with the leadership team to evaluate the volumes of ultrasound IV starts and assess if the teams are placing the best types of central lines for our oncology patients.

East 3/South 1 2021 Community Involvement Day

Each year, the East 3/South 1 Unit, led by its Unit-based Practice Council (UBPC), conducts community outreach as a team-building event and brings awareness to community needs. Thirteen staff volunteers helped Sacramento Food Bank & Family Services prepare 1,000 food packages which consisted of varied packed and canned foods like cereals, pasta, sauce, fruits, milk, soup, peanut butter, beans, honey, tuna, and chicken. Each package contained 17 lbs. of food and was distributed to San Juan United School District students. The food boxes were meant to last students one to two weeks. In addition to volunteering, the unit also generously donated $525 to the food bank. Since the pandemic, Sacramento Food Bank & Family Services increased its service to 300,000 individuals in the region. This event was such a memorable experience for the nurses, especially with the pandemic and its challenges. They were able to get away from their unit as a team and serve the community while experiencing the impact of their service and generosity.
**CTSC Clinical Research Center (CCRC)**

How does the study of new treatments advance?
At UC Davis Health, the Clinical and Transitional Science Center (CTSC) Clinical Research Center (CCRC) serves as an institutional resource at the intersection between study participants and scientists.

CCRC is responsible for supporting clinical research across the institution. The CCRC offers many services such as Investigational Drug Infusions, Phlebotomy, Physical Exams, CPETs, Lab Services, and much more. In addition, the CCRC supports studies and patient populations across the age continuum, from infants to the elderly.

Currently, the clinic supports multiple studies surrounding Duchenne’s Muscular Dystrophy (DMD), a neurodegenerative disease with limited treatment options and no cure. One such study, a gene therapy protocol, is demonstrating significant improvements in preliminary analysis yet unseen with current therapies, which is very exciting! Unfortunately, because of their medical condition, most, if not all, of the young study participants take on large burdens, including multiple hospital visits, blood draws, and muscle biopsies. The CCRC prides itself on its ability to provide the required study interventions while minimizing stressors for these young children, who are generally between 4 and 12 years old.

CCRC staff provides the service to infuse investigational drugs and performs a myriad of study-related activities. Often, infusion of investigational drugs comes with a risk of an adverse reaction. However, because the staff is ACLS and PALS certified, they are prepared to deal with emergencies in an effective and efficient way while maintaining compliance and keeping patients’ safety at the forefront.

“The clinic staff at the CCRC is wonderfully prepared to make our study participants feel at home when they arrive. It is wonderful to see these children smiling,” said Chris Kain, Nurse Manager of the CCRC.

**East 4 Accelerated Access Unit - PRISM**

In the fall of 2021, the Accelerated Access Unit became the sixth medical-surgical unit at UC Davis Health to earn the PRISM Award. The award, which stands for Premier Recognition in the Specialty of Med-surg, is the first of its kind honoring med-surg nursing units in the United States and internationally. It’s a collaboration between the Medical-Surgical Nursing Certification Board (MSNCB) and the Academy of Medical-Surgical Nurses (AMSN).

The Accelerated Access Unit is a 34-bed medical-surgical unit that serves a diverse patient population, including direct admits, emergency department, and clinical referrals. Accelerated Access earned a near-perfect score in Patient Outcomes, a perfect score in Health Practice Environment, and advanced scores in five of the six categories reviewed. The designation makes UC Davis Health number one in California for PRISM awards and the only hospital west of the Mississippi with six or more designations.

The award is very prestigious and speaks to the exemplary patient care provided at UC Davis Health. “I am more than proud of our PRISM designation especially considering the challenges we experienced related to COVID-19,” said Darrell Desmond, nurse manager of the unit. As a result of this great honor, Darrell was asked by the awards committee to participate in a national round table to discuss the PRISM journey and strategies used during the application process.
East 6 Cardiothoracic PCU Gold Beacon Award

The American Association of Critical Care Nurses (AACN) recognizes our E6 Cardiothoracic Progressive Care Unit (PCU) with the gold-level Beacon Award for Excellence. There are currently only three PCUs in California with this prestigious award. The award has three levels – bronze, silver, and gold and East 6 PCU earned the highest distinction of gold – the only PCU to do so.

The Beacon Award for Excellence recognizes unit caregivers who successfully improve patient outcomes and align practices with AACN’s six Healthy Work Environment Standards. To achieve one of the three levels of the award, units must meet national criteria consistent with the ANCC Magnet Recognition Program, the Malcolm Baldrige National Quality Award, and the National Quality Healthcare Award over a three-year-long period.

The Cardiothoracic PCU’s gold-level Beacon Award for Excellence signifies an effective and systematic approach to policies, procedures and processes that include engagement of staff and key stakeholders; fact-based evaluation strategies for continuous process improvement; and performance measures that meet or exceed relevant benchmarks. The PCU earned this award by meeting the following evidence-based Gold Beacon Award for Excellence criteria:

- Leadership Structure and Systems
- Appropriate Staffing and Staff Engagement
- Effective Communication, Knowledge Management, and Learning and Development
- Evidence-Based Practice and Processes
- Outcome Measurement

We are proud to have received this award and would like to recognize our entire team with a special thank you! This prestigious award was possible through the hard work and dedication of all our East 6 family, as well as the cumulative collaborative efforts made with our interdisciplinary teams! ♦

CTICU RECEIVES GOLD BEACON AWARD | CONTINUED FROM PAGE 3

and performance measures that meet or exceed relevant benchmarks.

Historically, this is the third time the CTICU has earned a Beacon Award. The CTICU was award Beacon Awards in 2004 and 2018. According to the AACN, CTICU’s 2021 application demonstrated that the work done in the CTICU embodies the UC Davis Health mission of providing science-based care by training nurses in specialized cardiac devices, promoting continuing education and utilizing research and data-driven results to provide the best care.

Furthermore, the AACN highlighted processes that exemplify compassion and can promote family satisfaction. CTICU is one of six UC Davis Health units to receive this esteemed award. ♦
Advancing Research through Close Collaboration

In 2020, the Evidence-Based Practice (EBP) and Research Council reviewed seven different EBP Models (Table 1) to affirm the existing alignment with the Iowa Model or to adopt a new EBP model at UC Davis Health. The council found that the Advancing Research through Close Collaboration (ARCC) Model best aligned with UC Davis Health’s concept for EBP. Our commitment to EBP is visible in our mission to provide science-based, technologically precise, compassionately delivered nursing care, and to strengthen our practice through a commitment to innovation, nursing research and ongoing learning. Launch of the new EBP Model commenced with a brief survey in April 2021 and keynote presentation at the May 2021 Nursing Science and Professional Governance Conference.

The ARCC model consists of two components – one referring to the infrastructure necessary for EBP (figure 1) and the other referring to the EBP implementation process itself (Figure 2).

The ARCC Model was first conceptualized in 1999 to assist advanced practice nurses in implementing EBP. It has since been applied to a wide range of clinical staff. The Model includes infrastructure, culture, and organizational systems as components central to facilitating and sustaining EBP throughout the organization (Figure 1).

- It incorporates an organizational assessment of the EBP culture to identify organization readiness, strengths, and potential barriers to EBP implementation.
- It features development and use of EBP mentors to assist clinicians at the point-of-care to recognize the value of EBP and enhance confidence in implementing evidence-based care.
- Implementation of this model can improve patient, staff, and hospital outcomes.

ARCC Model: Culture, Systems and Outcomes

![ARCC Model: Culture, Systems and Outcomes](image-url)
### ARCC Model: 7 Step EBP Process

<table>
<thead>
<tr>
<th>Step</th>
<th>Activity</th>
</tr>
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<tbody>
<tr>
<td>0</td>
<td>Cultivate inquiry</td>
</tr>
<tr>
<td>1</td>
<td>Ask a clinical question using PICO(T) format</td>
</tr>
<tr>
<td>2</td>
<td>Search &amp; collect high-quality evidence</td>
</tr>
<tr>
<td>3</td>
<td>Critically appraise evidence</td>
</tr>
<tr>
<td>4</td>
<td>Integrate &amp; apply evidence into practice</td>
</tr>
<tr>
<td>5</td>
<td>Evaluate &amp; compare outcomes of the EBP change</td>
</tr>
<tr>
<td>6</td>
<td>Disseminate outcomes of the EBP change</td>
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</tbody>
</table>

Figure 2. ARCC Model: 7 Step EBP Process

### Table 1. EBP Models Reviewed by the EBP & Research Council in 2020.

<table>
<thead>
<tr>
<th>Model</th>
<th>EBP Model Type</th>
<th>Key Concepts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stetler Model</td>
<td>Process</td>
<td>Built on the need to use research knowledge in clinical practice, integrate EBP concepts, and refine essential concepts including the addition of external and internal evidence. Includes five phases to use research data. Considered practitioner-oriented.</td>
</tr>
<tr>
<td>Iowa Model</td>
<td>Process</td>
<td>Starts with encouraging clinicians to identify triggers/clinical issues. Uses a multiphase change process with feedback loops to guide clinical decisions and organizational practices that affect patient care outcomes. Includes 10 EBP Process steps.</td>
</tr>
<tr>
<td>Johns Hopkins Nursing EBP</td>
<td>Process</td>
<td>Problem-solving approach to clinical decision-making accompanied by tools to guide individual or group use. Uses a 3-Phase EBP process called PET; each phase consists of a 4-8 steps.</td>
</tr>
<tr>
<td>Model for Change to EBP</td>
<td>Process</td>
<td>Based on theoretical and research literature related to EBP, research utilization, standardized language, and change theory. Uses 6 steps to guide practice change.</td>
</tr>
<tr>
<td>EBP Model for Staff Nurses</td>
<td>Process</td>
<td>Process to implement EBP builds on concepts from the Iowa Model, the Stetler model, and Rosswurm and Larrabee’s model. It focuses on the centrality and involvement of staff nurses in making EBP clinical changes.</td>
</tr>
<tr>
<td>Promoting Action on Research Implementation in Health Services (PARHIS) Framework</td>
<td>System &amp; Process</td>
<td>Successful implementation requires three main elements. When each of these elements is at a high level, the probability of successful EBP implementation is enhanced.</td>
</tr>
<tr>
<td>Advancing Research and Clinical practice through Close Collaboration (ARCC) Model</td>
<td>System &amp; Process</td>
<td>This model includes infrastructure in the framework/model as a central part of facilitating and sustaining EBP at the point-of-care and throughout the organization. Uses EBP mentors to facilitate evidence-based care with clinicians and to create a culture that supports and sustains EBP.</td>
</tr>
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Since Spring 2021, the EBP & Research Council and the Center for Nursing Science have prepared a variety of activities as part of the roll out of the ARCC Model:

- Presentation of ARCC Model to Professional Governance Council.
- Baseline assessment of EBP beliefs, practices, and culture among nursing staff.
- Emails to UBPCs regarding EBP Model launch plan and baseline survey.
- Keynote lecture on the ARCC Model by co-founder Lynn Gallagher-Ford at the 2021 Nursing Science and Professional Governance Conference on May 12, 2021. This is available on the Center for Nursing Science website to promote viewership and further dissemination.
- Leadership focused two-day program led by ARCC Model by co-founder Lynn Gallagher-Ford for PCS and Nursing Leadership in February 2022.
- Delivery of presentations and resources to UBPCs regarding ARCC EBP Model.
- Identification and training of UC Davis “EBP Mentors” at November 2021 EBP Immersion Workshop.
- Continuation and (expansion) of the EBP Fellowship program.
- Post-implementation assessment of EBP beliefs, practices, and culture among nursing staff in April 2022.

Clinical Case Management Department
Multidisciplinary Huddle updates

The year of 2021 was a year of change and incredible growth for the case management team. Prior to the initiation of the standardized multidisciplinary huddle, the case manager (discharge planner) and providers had informal phone conversations to discuss a patient’s discharge needs.

The multidisciplinary huddle is a structured, standardized format of communication with team members. As the case manager facilitates the huddle, the discussions are focused on each patient’s clinical status, the logistics for readiness and follow-up actions that ensure an efficient and safe discharge. The huddle is a real-time sharing of information that promotes a proactive environment for discharge planning. The members of these huddles include the charge nurse, utilization review, PT/OT, pharmacy, patient navigator, social services, dietician, and the physician.

With the implementation of the multidisciplinary huddles on Davis 11 Trauma (Blue & Gold), Davis 6 Cardiology (CVT, CVP, CCU & HMA), East 5 Neuro, East 6 Cardio/thoracic PCU, East 3, East 4, East 8 and Tower 6 Med/Surg floors, the case managers have become the facilitators of a multidisciplinary team.

And of course, the all-important Expected Discharge Date (EDD) which the discharge planner ensures is established, reviewed, and updated daily and as needed. To improve communication to all staff, the discharge planner indicates the plan and any barriers in the EDD comment box.

The case managers have repeatedly voiced how the huddles with the multidisciplinary team has improved their daily workflow and they will continue to be a focus in 2022.
The 2021 American Nurses Credentialing Center (ANCC) Magnet® and Pathway to Excellence® Conference was held in Atlanta, Georgia. Ten UC Davis Health nurses, and approximately 7,000 other nurses from across the globe, attended the event to learn from more than 70 concurrent sessions, 150+ poster sessions, and fantastic keynote general session speakers. Both the ANCC Nursing Continuing Professional Development (NCPD) Summit and the Magnet4Europe meeting were held immediately prior to the conference.

Sabrina McKinney, assistant nurse manager at UC Davis Health, presented her Doctor of Nursing Practice (DNP) work in a podium presentation titled “Support During the Pandemic: Impact of an Expanded Hospital Orientation on New Graduate Nurse Confidence” at the NCPD Summit.

At the Magnet4Europe meeting, findings from the Clinician Wellbeing Study with the sixty US Magnet facilities, including UC Davis Health, were shared. As a participant in the Magnet4Europe, UC Davis Health is ‘twinned’ with OLV Aalst in Belgium. Ann Van de Velde, Chief Nursing Officer, and Marion Boriau, Director from the Belgium hospital, attended the event and were finally able to meet in person after meeting biweekly with Ellen Kissinger and Lori Madden. Along with long standing colleague from Belgium, Danny van Heusden. Conditions permitting, Ann and Marion will visit UC Davis Health in 2022.

In a concurrent session of the Magnet Conference, Lori Madden presented her podium presentation, “Building Infrastructure for Curiosity.” UC Davis Health nurses attending the event enjoyed various sessions and will present highlights at nursing meetings in early 2022.
CipherRounds

The nursing leadership of UC Davis Health brought CipherRounds to the pilot units of Tower 8 and East 8 in the spring of 2020. CipherRounds uses digital innovation and technology to allow nurse managers and charge nurses to conduct patient rounds that are effective and more meaningful. This standardized process engages patients and their family members in a purposeful way that empowers them to become partners in their hospital experience. CipherRounds has been shown to have many benefits, including enhancing the visibility of rounding nurse leaders, driving staff efficiency and accountability, and promoting therapeutic communication between nurses, patients, and patients’ family members.

When the nurse leader rounds on patients with CipherRounds using the iPad, they can access specific patient information in the app from data received from the electronic medical record (EMR) through Epic. The rounding guide in this platform includes information that is individualized to each patient and consists of the patient’s protected health information (PHI), and personal preferences or escalations that require follow-up communication with the patient or family member.

Each time a nurse leader rounds using CipherRounds, the patient or their family member can communicate valuable feedback about their hospital stay. This real-time information allows the rounding nurse to identify areas of opportunity as well as issues that require escalation to other departments, including Environmental Services, Food and Nutrition Services, and Plant Operations and Maintenance.

Tower 8 Assistant Nurse Manager Raul Rivera conducting CipherRounds

The rounding nurse will then receive automated feedback through CipherRounds once issues have been resolved by the appropriate service. The rounding guide also calls for the nurse to survey the patient’s environment to ensure proper safety measures and cleanliness. During subsequent rounds, the history tab in the rounding guide makes information about past issues available for follow-up, allowing the rounding nurse to close the loop with the patient and their family member to achieve meaningful results.

CipherRounds also gives the patient and their family member the opportunity to acknowledge staff for outstanding care delivery. When a patient or family member recognizes an employee, the rounding nurse can select the staff member’s name in an email field and type in the patient’s compliment. This message is then forwarded to both the person being recognized and their manager for recognition in the Best Rewards System. This important feature is a valuable tool that nurse leaders can use to acknowledge their staff for the exceptional care they give to our patients.

Since its initial rollout on Tower 8 and East 8, CipherRounds has also been implemented with other rounding guides. These include staff rounding, hand hygiene audits, CAUTI and CLABSI prevention audits, and medication administration audits. This growing use of CipherRounds speaks to its success as an effective tool for achieving continuous quality improvement at UC Davis Health.
Mental Health First

A poet, writer, activist, artist, and a nurse in the emergency department since 2015, Sandra Boykin has been instrumental in the development and care of our patients, especially those with behavioral health concerns.

Having worked in mental health facilities for more than a decade, Sandra has learned most outbursts start due to lack of space, need for shelter or food, a medication need and not a criminal conduct by itself. Budding from this concept, she founded a Sacramento based “Mental Health First” (MH First). This is a cutting-edge model for non-police response to mental health crisis. It’s an independent team of volunteers trained to de-escalate confrontations and direct aid and resources to those experiencing potentially life-threatening psychological issues. The purpose is to interrupt and eliminate the need for law enforcement in mental health crisis first response by providing mobile peer support, de-escalation assistance, and non-punitive and life-affirming interventions, therefore decriminalizing emotional and psychological crises, and decreasing the stigma around mental health, substance use, and domestic violence, while also addressing their root causes: white supremacy, capitalism, and colonialism.

MH First relies heavily on building community connections by regularly canvassing neighborhoods and 24-hrs businesses that may need assistance. By having trained community members statewide with mental health first responder skills, the hope is to eventually be able to offer MAT (medication assisted treatment), low-barrier mental health respite, and short-term post crisis case management to those in need.

Sandra has published many articles and has won many awards including “Anthony F. Logan Award” for outstanding contributions by a community partner to public interest law and client communities and “Black Girl Magic Award” from Psychologist for Social Responsibility. She is a founding member of the “Capital City Black Nurses Association” and says, “continuing the work of our ancestors on behalf of our children is the highest calling one can have”.

Ambulatory Department’s Nothing by Mouth Workgroup

A collaborative workgroup made up of RNs, physicians, representatives from orthopedics, anesthesia, preoperative calls, and pre operate and operative inpatients, was formed in an effort to eliminate nothing by mouth (NPO) errors for pediatric patients. The group created an interactive document for parents which integrated with our current dot phrase with the emphasis that the instructions would be available for the parent to “fill in the blanks”.

The group discovered when they involved the parent and child as part of the information sharing, the adherence to the instructions were more likely to be retained. The group meets each week for updates and to identify areas where communications with patients could be improved.

The group has finalized the dot phrase, with the plan to roll out to all specialty areas as well as the adult population for all surgical areas and plan to have information available to patients in five languages.
Congratulations to our DAISY Award recipients!

You exemplify the nursing values of courage, compassion, and integrity in every situation.

The DAISY Award is a nation-wide program that recognizes nursing excellence. In memory of Patrick, the Barnes family recalled the skillful and compassionate care Patrick received from his nurses during his eight-week hospitalization. They wanted to say “thank you” to nurses everywhere by establishing a recognition program - the DAISY Award For Extraordinary Nurses - to honor the super-human work nurses do every day at the bedside.

Hien Van, BSN, RN | Davis 6 Cardiology

One night I was so overtired and stressed I couldn’t sleep, and I had severe pain in my back. Hien took the time to stay with me and massaged my back so I could get some sleep. She stood by my side when I was depressed and took the time to talk, which calmed me.

Carol Leija, MSN, RN, OCN | Comprehensive Cancer Center

As soon as Carol arrived in the office Monday morning, she was back on the phone to ensure that the proper arrangements would be in place before the patient’s discharge. The hard work resulted in authorization for outpatient care at UC Davis Health. Carol’s advocacy prevented fragmentation of care, which can occur when the patient receives care at more than one health system.

Osman Danice, BSN, RN | East 3 Adult Acute Care

I have personally been a healthcare provider as a clinical pharmacist, and I have never witnessed such an empathetic, compassionate, honest, going above and beyond healthcare provider with the innate assertive, competent drive to help humanity! Nurse Osman has demonstrated nothing but a humanitarian manifested character to maximize or optimize the patient’s overall quality and quantity of life. He strives to cheer and treat patients through a mutualistic approach, i.e., involving the patient within their healthcare plan alongside maintaining an open mind, lacking any barriers to hinder his methods/approaches to do the best and right thing for his patients.

Rebecca Hall, NP, MSN | Cardiac Cath Lab/ Electrophysiology

Rebecca focused on quality and patient safety by collaborating with the multidisciplinary care team, while she also maintained vigilant oversight to make sure patients and caregivers were well taken care of and had a great UC Davis Health patient experience.

Ashnita Singh, BSN, RN | South 1 Adult Annex

When a nurse can make you feel like you’re family, so you’re not so homesick while fighting to get well, that is a blessing.
Richard Love, RN | MICU

A nurse that stood out was Richard Love. He was always so full of life and made sure to make us laugh and smile during such a hard time. He was both professional and respected of all of our heavy emotions but never failed to lift our spirits. His smile brightened every room, and his laugh was contagious. He was the light in the darkness, and I’m grateful that he was by my dad’s side. He made the long journey more bearable and was our greatest advocate. Someone I would want by my bedside, and that says a lot!

Leanna Miller, BSN, RN, RNC-OB | Davis 3 University Birthing Suites

When my daughter was born, Leanna knew exactly the right words to say but also knew when to give my family and me private time together. She was able to find the perfect balance with her presence that made me feel extremely supported, but also able to grieve alone. When it came time to take my baby to create a memory box, she held my daughter with such care and love. To Leanna, she wasn’t just a fetus, but my baby, and I will never be able to thank her enough for that feeling.

Oki-Ki Kim, MSN, RN | Operating Room

Ok-Ki came to our unit and promptly demonstrated courage in working quickly in a unit/OR that she was unfamiliar with to provide prompt care to save a patient’s life. I have no doubt in my mind that Ok-Ki’s knowledge and skills helped our OBGYN’s perform the cesarean hysterectomy as quickly and safely as possible. The patient was ultimately transferred to the ICU, required additional surgery, and ended her hospitalization in Tower 3 Women’s Pavilion. She was discharged with her newborn and was able to return safely home to her other children.
### Our Newest Nurses

#### COHORT 37

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
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<tbody>
<tr>
<td>Vivian Au</td>
<td>Patient Care Resources</td>
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<td>Jennifer Chen</td>
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<td>Bau Dao</td>
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<td>Jason Edmiston</td>
<td>Operating Room</td>
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<td>Austin Friedheim</td>
<td>Davis 12 Surgical Specialties Unit</td>
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<td>Bailey Gary</td>
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<td>Adiel Geronimo</td>
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<td>Alexandra Hazen</td>
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<td>Amanjot Kaur</td>
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<td>Rachel Matuskey</td>
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<td>Katelyn Nusser</td>
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<td>Brett Schreiner</td>
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<td>Olga Elena</td>
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<td>Vivian Flores</td>
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<td>Lea Fong</td>
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<td>Abigail Messer</td>
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<td>Zong Moua</td>
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<td>Nicole Muth</td>
<td>Davis 14 Ortho/Trauma Unit</td>
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<td>Christine O’Connor</td>
<td>Patient Care Resources - MICU</td>
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<td>Lorna Roberts</td>
<td>NICU</td>
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COHORT 38 CONTINUED

Shelby Rowen - Davis 11 Trauma Nursing Unit
Amanda Ruiz - Davis 12 Surgical Specialties Unit
Rachel Sanchez - Patient Care Resources
Darcy Scarrott - NICU
Phoebe Scholar - Patient Care Resources - MICU
Stephanie Sek - Davis 11 Trauma Nursing Unit
Gulnazbanu Siddiqui - Patient Care Resources
Danica Stevenson - Patient Care Resources
Mariah Stoeltzing - Patient Care Resources

Mariana Tan - Patient Care Resources
Christina Tran - Patient Care Resources
Van An Tran - Tower 7 MSICU Gold
Ronald Vergara - Tower 7 MSICU Gold
Dhivya Valluvan - Adult Annex Unit
Yao Yao Wang - Patient Care Resources
Caroline Wills - Patient Care Resources
Emily Xiong - Patient Care Resources
Katie Zhimanov - Patient Care Resources

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Joshua Abulencia - Tower 8 Transplant/Metabolic
Tania Casillas Felix - Davis 11 Trauma Nursing Unit
Jennifer Char - Operating Room
Cigie Mae Coronel - Patient Care Resources
Rayleen Dumayas - East 5 Comprehensive Acute Rehab
Heindrex Espeleta - Cancer Center Operations
Desire Espena - Davis 5 NICU
Danielle Galasso - Davis 5 NICU
Carmen Garcia - Davis 5 NICU
Katherine Girdler - Davis 11 Trauma Nursing Unit
Lauren Gorman - Emergency Medicine
Johanna Inda - East 4 Accelerated Access/Hospitalist Service
Emily Jang - Burn ICU
Dean Karlo Lagazo - Emergency Medicine
Taryn Kilgore - Davis 5 NICU
Kelly Lee - Davis 7 Pediatrics
Sunshine Lee - Davis 11 Trauma Nursing Unit
Tashena McNeil - Davis 11 Trauma Nursing Unit
Andrea Miller - Davis 11 Trauma Nursing Unit

Thuy Misenti - Davis 14 Ortho/Trauma Unit
Johann Montecillo - Patient Care Resources
Chia Moua - East 5 Neuro
Shreya Narayanan - Davis 3 University Birthing Suites
Yana Olejnic - Davis 11 Trauma Nursing Unit
Ginnie Oribello - Tower 8 Transplant/Metabolic
Quan Pham - East 5 Neuro
Nadiah Reed - Davis 14 Ortho/Trauma Unit
Bethanni Riedel - Davis 14 Ortho/Trauma Unit
Mario Rodriguez - Davis 5 NICU
Erin Ryder - Burn ICU
Alexandra Salatti - Davis 7 Pediatrics
Maricres Salva - East 4 Accelerated Access/Hospitalist Service
Sidette San Agustin - Davis 14 Ortho/Trauma Unit
Bethanny Santamaria - Adult IV Infusion Center
Anmol Sharma - East 6 Cardiothoracic PCU
Harold (Dean) Speer - Burn ICU
Molly Szczech - Davis 3 University Birthing Suites
Sarah Truong - Emergency Medicine
Linda Vue - Emergency Medicine
Jingyu (Jennie) Zhang - Davis 11 Trauma Nursing Unit

Q3 2021 NEWLY RECOGNIZED CLINICAL NURSES III

Merrilee Catanzaro - Emergency Department
Kaylah Hallam - Emergency Department
Tatyana Nikitchuk - Davis 14 Ortho/Trauma
Angelina Nochez - Davis 3 University Birthing Suites
Jason Yee - Tower 7 MSICU Gold
Newly Specialty Certified Nurses

Ambulatory Care Nurse (AMB-BC)
Sylvia Chan

Acute Care Nurse Practitioner (ACNP-BC)
James Oliver
Rupinderjit Kaur Samra

Adult Gerontology Acute Care Nurse Practitioner (AGACNP-BC)
Daniel Klug

Bone Marrow Transplant Certified Nurse (BMTCN)
Lauren Jacobs

Certified Dialysis Nurse (CDN)
Diane Flavia Franco

Certified Emergency Nurse (CEN)
Danielle Tercero

Certified Hospice and Palliative Nurse (CHPN)
Sarah Sokol

Certified Medical Surgical Registered Nurse (CMSRN)
Iris Catubig
Jane Chon
Verona Noel
Flecilda Obra
Karen Penano
Shayal Prasad
Richele Sanchez

Certified Nurse Operating Room (CNOR)
Danielle Bragg
Karin Bryner
Phung Huynh

Certified Post Anesthesia Nurse (CPAN)
Cynthia Sundestedt
Renee Vaccarezza

Certified Wound, Ostomy, Continence Nurse (CWOCN)
Svetlana Mandzyuk

Critical Care Registered Nurse (CCRN - Adult)
Lorraine Bernadas Agustin
Ben Gayoba
Kyle Graber
Samuel Lockhart
Tori McGuire
Michele Merson
Steven Patras
Jennifer Ramey
Jennifer Taylor
Andrew Zacha

Critical Care Registered Nurse (CCRN - Neonatal)
Emily Jacobsen

Critical Care Registered Nurse (CCRN - Pediatric)
Mikaela Hansen
Carlye Mille
Amy Zarate

Family Nurse Practitioner (FNP-BC)
Avinesh Prakash

Inpatient Obstetric Nursing (RNC-OB)
LeeAnna Miller

Nursing Professional Development (NPD-BC)
Daniel Aquino

Medical-Surgical Nursing (RN-BC)
Imelda Calvan
Brenna Epperson

Oncology Certified Nurse (OCN)
Bea Anton
Lourdes Lombiao
Carmina Rendon
Christopher Robinson
Chuie Saetern
Jia Wang

Pediatric Nurse (RN-BC)
Chelsea Jones

Progressive Care Certified Nurse (PCCN)
Eva Kwong
Susan Lee
Gemiruth Navarro
Karissa Rubi

Psychiatric Mental Health Nurse Practitioner (PMHNP- BC)
Ann Marie Coria
Always Nurse

What does it mean to be an “Always” nurse?
These nurses were part of the treatment team, where every patient who returned a survey answered “always” to all three nursing questions below:

1. Nurses treated you with courtesy/respect
2. Nurses listened carefully to you
3. Nurses explained in a way you understand

How do scores get assigned to individual nurses?

1. In Epic, all HCAHPS Nurse Communication scores are assigned to each nurse as a member of that patient’s treatment team.
2. Each individual nurse’s Top Box score is based on all surveys received in that timeframe where they were part of the patient’s treatment team.

Results based on surveys received between 04/01/21-06/30/21

- 1,024 HCAHPS surveys received with 1,835 nurses as part of the patient’s treatment team.
- Of the 1,835 nurses, 1,069 have a sample size of 5 or more.

4/1/21 to 6/30/21

Monroe Abelarde - South 1 Adult Annex
Kathlyn Andrada - Patient Care Resources
Mandeep Bahniwal - East 8 Med/Surg Specialty Unit
Philine Barrera - Pain Clinic
Antoniya Boyd - Tower 8 Transplant/Metabolic
Eric Brickson - SICU
Francis Brillantes - East 8 Med/Surg Specialty Unit
Tahmara Camp - Davis 6 Cardiology
Truc Cao - Burn Unit
Alexandra Capossele - Tower 3 Women’s Pavilion
Alicia Casaneda - Tower 3 Women’s Pavilion
Kathleen Catricala - Burn Unit
Delia Christian - NSICU
Juliet Delima - East 8 Med/Surg Specialty Unit
Amanda Forbes - Davis 8 Oncology/BMTU
Ruth Freeman - East 8 Med/Surg Specialty Unit
Allison Gibson - Davis 10 PICU/PCICU
Evelyn Gutierrez - East 8 Med/Surg Specialty Unit
Florence Iyasere - Davis 10 PICU/PCICU
David Karn - Davis 10 PICU/PCICU
Jerry Kerektes - Davis 10 PICU/PCICU
Alexander Kolivayko - Tower 7 MSICU Blue
Anika Kutschmar - Emergency Department
Vanessa Joy Lucero - East 8 Med/Surg Specialty Unit 8
Seth Mayoral - Emergency Department
William Miller - Tower 7 MSICU Blue
Sarah Mois - East 4 Accelerated Access/Hospitalist
Emerald Moises - Davis 6 Cardiology
Ramona Moll - Emergency Department
Rex Morante - Tower 8 Transplant/Metabolic
Linh Nguyen - Cardiovascular Support Unit
Susana Noel - Davis 10 PICU/PCICU
Ruth Nyide - Davis 8 Oncology/BMTU
Elina Ozeruga - Davis 10 PICU/PCICU
Margaret Ponulak-Lewalski - Davis 10 PICU/PCICU
Contact
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- Ellen Kissinger
  elkissinger@ucdavis.edu