



All Aboard

Tracking Our Magnet® Journey

Vol. 10 Fall 2021

Welcome



Introducing **Dr. Sharon Smyth, D.N.P., R.N., C.N.M.L.**, our new Chief Nursing Officer.

Dr. Smyth, a native of England, was most recently the senior director of nursing for the Department of Emergency Medicine at The Johns Hopkins Hospital and Johns Hopkins Bayview Medical Center, as well as the accountable leader of the supplemental staffing unit and co-director of the Capacity Command Center at JHH.

During the COVID-19 pandemic, Dr. Smyth proudly served as chief nursing officer for the Baltimore Convention Center Field Hospital.

We are thrilled to welcome Dr. Smyth to campus.

A New Era Dawns

I couldn't witness the informed consent forms signed by patients in my early career.

I was a 17-year-old LPN, and wasn't able to sign a legal contract yet! I earned an associate's degree to become an RN two years later, and my first CNO role came 12 years after that — all while attending graduate school that culminated in my doctorate from Teachers College, Columbia University.

In 1997, when I joined the executive team here at Johns Hopkins Bayview, a day in the life of a nurse looked very different.

Nurses charted with pen and paper, and there were no iPhones to tap orders into or bar codes to scan on patients' wristbands. The BMO had just been built! Most of our nurses— including our nurse managers — didn't have advanced degrees.

Today, all of our nursing directors have attained a master's degree or higher, as have nearly all of our managers. Technology and innovation are daily practice features of our diverse nursing workforce. Our nurses grow their professional practice through continuous learning, forge clinical communities to enhance patient safety, and foster a spirit of inquiry through research and EBP projects.

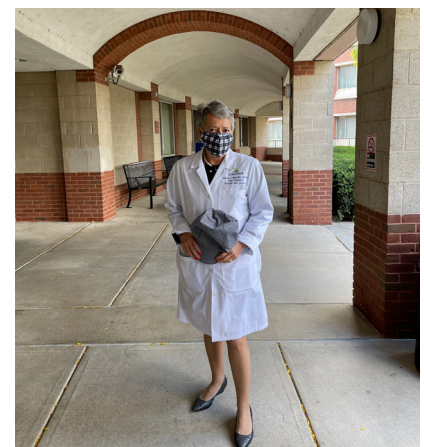
The proudest moments of my career have happened on this campus.

Promoting professionalism

Today, more than 60% of our nurses have a BSN degree or higher, and more than one third of them hold an advanced professional certification.

Achievements I am proudest of in this domain include:

- Redefining a clinical ladder and educational support programs that have combined to advance hundreds of careers. We currently have the highest number of doctoral-prepared nurses on staff in our history.
- Establishing new layers of leadership and developing nurses who want to grow into management roles.
- Building relationships with local programs that allow us to grow our own workforce, including a long-standing program at Sollers Point Technical High School, right in our back yard.



Next Stop:

Retirement celebration for Dr. Koszalka.

- November 17
- 3 to 5 p.m.
- Knott
Conference
Center.

All staff are
invited.

Light
refreshments
will be served.

Please plan to
join us!

- Forming new paths in nursing: clinical informatics, nursing education, quality and patient safety now rely on nurses who got their start at the bedside, whose history in patient care is foundational to the work they do in these specialized roles.

Embracing technology and innovation

- I was the executive sponsor for the Epic implementation, advocating for the needs of nursing for the entire Johns Hopkins Health System.
- Making use of Lean Management, I've adopted and shared the tools that allow our nurses to problem-solve and create new practice standards in a time of limited resources.
- I expanded our nursing float pool to address a nursing shortage. Now more than 150 people strong, this team is a model across our health system and allows us to maintain a nimble work force embedded right on our campus, including more than a dozen critical care resource nurses.

Integration That Responds to the Future

- Modeled after physician practices, I launched the first nursing-specific clinical communities. Our nurses have strengthened relationships with colleagues from across JHM, addressing clinical issues such as fall prevention and standardized nursing documentation. These relationships have acted as a springboard to harmonize the way we educate new nurses, flex nurse staffing and share resources.
- We have also grown our presence in the ambulatory market tremendously, with more than 165,000 clinic visits on our campus annually. Nurses play a foundational role in meeting the changing demands of regulation and clinical program expansion — all while monitoring the outcomes of new practice.

Amplifying voices

- Councils of front-line nurses, such as the Professional Practice Council, allow our nurses to impact hospital operations, influence policies and share new practices. As we promote autonomy at the bedside, these councils forge connections across our Medical Center and keep us tied to our common mission.

What a privilege it has been to work with each of you to advance the work of this wonderful institution. I know that I leave you in capable hands during this challenging time, and wish you continued health, safety and success!

With much admiration,

Maria V. Koszalka, Ed.D., RN
Chief Nursing Officer
Vice President, Patient Care Services



Kudos & Recognitions

Exemplary Professional Practice

Congratulations to ACE nurse **Jessica Peters, BSN, RN**, from 6 Surg! Peters was recognized by the Johns Hopkins University School of Nursing during their Evening with the Stars event. The Elsie Peyton Jarvis Star Nurse Award given to Peters was established in 2017 to recognize Hopkins nurses who demonstrate clinical excellence and have made a significant difference to the nursing profession.

Peters' nomination read, in part, "She led the way for 6 Surg to win the Bullseye/VP Award for a performance improvement project called 'On the MOVE.' Not only did Peters accomplish this goal, but she was also able to engage staff and patients to work together and consistently ambulate in the hallways both day and night shift. She is an outstanding role model."



Welcome PPC Chairs

Structural Empowerment

Stephanie Deighton, MSN, RN, CCRN, (Float Pool) and **Ashley Wujek, BSN, RN**, (6 Surg) have taken the reins of the Professional Practice Council. We greatly appreciate the leadership of **Nicci Domanski, MSN, RN, CCRN** (Float Pool) and **Sam Mokracek, BSN, RN, CMSRN** (Med B) for leading this important shared decision-making body for more than two years through the COVID-19 pandemic.



Shaping the Future

New Knowledge, Innovation & Improvements

Burn nursing has recently been approved to become a nursing specialty, like critical care nursing or med-surg nursing. Several nurses from our Burn Center are working at the national level with the American Burn Association to design the core curriculum, create and review the study content for the ABA, and write the certification exam.

We appreciate the work of **Carrie Cox, MS, RN**; **Emily Werthman, BSN, RN**, and **Yvette Wilson, DNP**, as they advance the professionalism of burn nursing throughout the nation.



Escaping Competencies-Fatigue

Transformational Leadership

Competencies are an annual necessity for nurses. Typically targeting low-frequency, high-risk skills, competency testing is led by our educators on every unit. These skills days are required to remain employed and are reported as part of our Joint Commission survey.

But do they have to be boring? Definitely not!

Rather than using PowerPoint presentations or guest speakers to reinforce nursing knowledge, three of our nurse educators recently captured the attention of their teams through gamification, team-building, a little friendly competition and prizes! Their goal was to ensure that nurses and techs — as many as 150 attendees per specialty — walked away with more than just a completed checklist.

Kelly Baca, MSN, APRN-CNS, RNC- NIC, clinical nurse specialist for the NICU and pediatrics, set up an escape room challenge for her pediatric colleagues. Building on sequential clues that required research, teamwork, solving puzzles and correctly answering multiple quizzes — all under the pressure of a ticking clock — the nurses reinforced knowledge on skills they don't often use, including restraints and a pediatric code.

“It all began with trying to do them differently: simulation, hands-on, but more engaging,” says Baca. “We know we have to do it, but we wanted to make it more entertaining. We've been through so much with COVID, something for team-building that would gather people together is a great recovery.”

Pediatric ACE nurses **Christine Mitchell** and **Kimberly Rivera** clocked the teams' completion times and gave prizes to the fastest teams.

In the emergency department, nursing practice specialist **Karen Talbot** brought the Olympics to town. Since the ED has so many new staff members, Talbot decided to use the scheduling system to mix nurses and PCTs onto small teams with coworkers who rarely work the same shifts. Building new relationships and improving morale were just as important as testing the clinical knowledge of these small teams.

To win a gold, silver or bronze medal, the teams had to work their way through challenges of increasing complexity, combining scavenger hunts, policy questions and skills to open a box with six different locks on it!



Nurse residency program cohort II just graduated by playing an “Escape Nurse Residency” challenge, but games are an ongoing part of their full curriculum, says nursing professional development specialist **Kim Paul, MS, BSN, RN**.



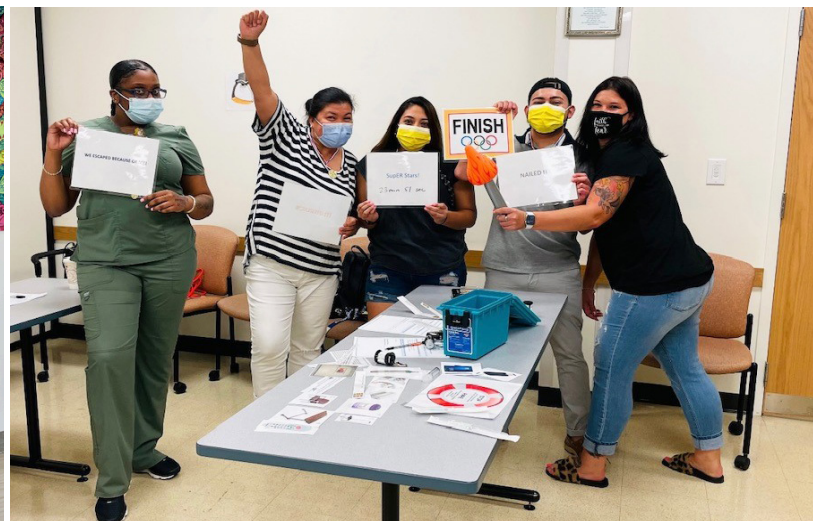
NRP Cohort II is happy to be free!

Nurse residents play customized versions of well-known game shows to learn about resource management, health care finance, patient safety and policies. A selfie-scavenger hunt is a great bonding and socialization activity early in the program that helps new teammates navigate to important locations throughout our campus.

Nursing education takes many forms, from classroom instruction to hands-on practice to Family Feud and Jeopardy! Magnet hospitals expect leaders to innovate, and we are grateful to the creative minds in NPIC for making competencies stick this year, while strengthening clinical and personal connections alike.



Clinical nurse specialist Kelly Baca, pictured center with ACE nurses Christine Mitchell, BSN, RN, CPN, and Kimberly Rivera, MSN, RN, CPEN



Gold medal winners from the Emergency Department.

Who's Who & What Do They Do:

Nursing Practice and Interprofessional Education (NPIE)

Transformational Leadership

The NPIE office takes up much of the second floor in Alpha Commons. These specialists empower our front-line nursing staff with the tools and knowledge required to operate at the top of their license.

Though they work from a centralized office, soon to be integrated with JHH, their relationships extend across our campus. Many of them spend 100 percent of their time on the units to which they're assigned.

Meet a few of these specialists to learn a bit about what they do!

Clinical Nurse Specialists are advanced practice RNs who are embedded on clinical units, integrating care across the continuum and providing personalized clinical support to improve nursing care and patient outcomes.

Rossana Oakley, CNS for the Department of Medicine: *"I facilitate onboarding of new clinical staff, providing didactic and hands-on training for staff on a variety of topics. I also chair the ACE Steering Committee and the PCT II Promotion Program, and participate in training, administration, research and quality improvement projects."*

Yvette Wilson, CNS for The Burn Center and the Surgical ICU: *"I was drawn to my role because I have always loved education and impeccable nursing practice is crucial to healing. It's how we share our skills with each other that empowers our leaders. We have the most amazing team of nurses on the planet."*

Nursing Professional Development Specialists influence the professional role, competence and

professional growth of learners in a variety of settings. Some work with policies, others lead product conversions, and several work directly with new nurses through courses like our nurse residency program.

Tamara George, MS, RN: *"I work with new nurses, summer nurse externs and high school students, and I organize courses like PCT Training and Basic Life Support. I have become the keeper of the training calendar! You would call me if you need help with training courses or myLearning."*

Nursing Practice Specialists focus on specific features of practice, sometimes dedicated to divisions like perioperative, maternal-child health or emergency medicine.

Cathy Lindauer, DNP, RN, CEN: *"You would come to me if you need help with a school decision or student placement or are interested in pursuing research. I was drawn to this role because I spent most of my career as a CNS in the ED and after I finished my DNP, I found that I wanted focus on bringing research to the bedside and looking for better ways of doing things."*

Tracey Bagwell, MSN, RN: *"I spend most of my time at work collaborating, strategizing and operationalizing. I work with colleagues from across the health system. We try to make patient education easy for patients and clinicians. I was drawn to my role because I believe that patient education is patient empowerment. It's the key to effective treatment."*

Learn more about the work of our NPIE colleagues by visiting insidehopkinsbayview.org/npie.

ACE

Now recruiting
ACE nurses.

Do you have what
it takes?

Learn more
from this video
featuring
**Evan Minarik,
BSN, RN, CEN**
from the
emergency
department.



SHINE-ing a Light on Mother-Baby Safety

New Knowledge, Innovation & Improvements

New moms and babies have been the heart of **Sue Aronson's** practice for 38 years; now a float pool nurse, she spends her time in Labor and Delivery and the mother-baby unit. As part of her ACE promotion, she joined the MCH CUSP team, which got her thinking, "Where could the next patient possibly be harmed?"

Aronson joined forces with Patient Safety Specialist **Katharine Giancola** to investigate infant feeding. A recent audit showed that zero patient charts met the standard of care for the documentation of infant feeding, though the goal is that 95% of charts reflect the proper cycle of feeding, latch scores and diaper output.

"Zero. Really?" she thought.

Since we practice a couplet model of care, moms and babies are together in their room where feedings are private, but still need to be charted. New moms need lots of support as they learn to breastfeed, and it can be hard for babies to get the nutrition they need during those first few days of life.

Says Aronson, "Our concern was, 'Is this real or is it just not documented?'" The team used Lean Management tools to find the root cause of this safety issue, and systematically created a plan to improve scores. The team found that there were education issues, along with staffing challenges and time management concerns.

Addressing Staffing, Education, Accountability

After increased training, including a four-hour didactic class with travelers, and new, bilingual visual reminders improved the scores by just 40%, the

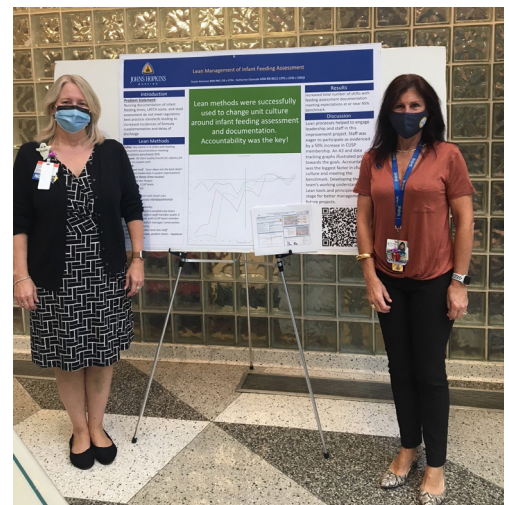
CUSP team turned to a tiered system of accountability, with penalties for missing documentation. The team's messaging was, "Ensure the babies are safe and demonstrate your care!"

This step helped to change the culture and one year later, their compliance rate of 95% is stable, above the standard of care, **even with more than 40 agency nurses currently supporting the unit.**

Aronson's advice to nurses looking to expand their work in research, performance improvement or EBP? "Get support from the right people. Seek out those who will support you with your ideas. Build a network who are interested in process or quality improvement, who will share their energy with your project. Then, give it heart!"

Did you know?

Seven JHBMC projects were accepted for the SHINE conference! **Learn more: [insidehopkinsbayview/nursing/research](https://insidehopkinsbayview.com/nursing/research).**



Katharine Giancola, MSN, RN, IBCLC, C-EFM, left;
Sue Aronson, BSN, RNC- INOB, C- EFM, right.

Our Time to SHINE!

Congratulations to the nurses selected to share their work at the SHINE Conference this year.

Quality Improvement Posters

- Susan Aronson, BSN, RN; Katharine Giancola, MSN, RN - *Improving documentation of infant assessments: A Culture Change.*
- Annie Duremdes, MSN, RN; Cyndi Bochniak, BSN, RN; Sarah Pierorazio, BSN, RN; Angel Shoemaker, BSN, RN; Joe Rainwater; Kim Goldsborough, DNP, RN - *Perioperative enhanced family communication during COVID-19: Creating a story with text messages a Process Improvement Initiative.*
- Lavinia Patel, BSN, RN; Marcia Dawson, MS, RN-BC, NE; Ishaan Gupta, MD; Breanna Sloan, BSN, RN - *A multi-disciplinary initiative to improving management of heart failure patients on a medical telemetry unit.*
- Lisa Smith, MSN, RN; Carrie Cox, MSN, RN; Rowena Orosco, BSN, RN; Carolina Flores, BSN, RN; Julie Caffrey, DO, MS, FACOS. *A novel approach in reducing catheter associated urinary tract infection in a regional burn center.*
- Rachel Moseley MS, BSN, CWON, APHN; Lindsay Rice, BSN, RN, CWCN; Cynthia A Walker, MSN, APRN-CNS, CWON; Helen Borte BSN, RN, BMTCN; Retzer Cariaga, DNP, MPH, RN; Holley Farley, MSN, RN; Alphonse Rahman, DNP, APRN, CNS, CCRN; Allison Springler, Esq., RN - *Best Practices for Completing Root Cause Analysis (RCA) of Hospital Acquired Pressure Injury Stage 3 or Greater (HAPI 3+)*

Research Posters

- Cathleen Lindauer DNP, RN; Karen Gabel Speroni, PhD, RN, MHSA; Taylor Lurz, BSN, RN; Rossana Oakley, MSN, RN; April Zakes, BSN, RN - *Effect of a nurse-led, patient-centered, gratitude intervention on patient hospitalization experience (Poster and Podium Presentation).*
- Cindy Walters DNP, RN; Karen Gabel Speroni, PhD, RN, MHSA - *Effect of professional nursing governance on nurse-related outcomes.*

Patient Safety is All in the Family

Exemplary Professional Practice

Congratulations to mother-daughter dynamic duo **Patty Borowski, MSN, RN**, and **Rebecca Borowski, BSN, RN**, who, along with several colleagues, recently won a Patient Safety Star award for their quick-thinking teamwork that saved a patient whose LVAD had run out of battery life.

A former member of the emergency department, Becca is now is a nurse on the Surgical ICU, where mom Patty worked for the first 10 years of her career, before becoming a patient care coordinator. "Watching my daughter grow up and become a nurse has reminded me, after all these years, why I became a nurse," says Patty. "Because I care about people."

Becca, a nurse for two years, felt helpless during the event and wasn't aware that mom Patty was on the case as well. She learned from her mom that even when you think you've seen it all, you have to stay humble. "My mom taught me to pay attention to detail and never panic because if you panic, you'll miss something. She reminded me that at the end of the day, we all did what we do best and saved a life."

We appreciate the exemplary professional practice of the Borowskis and their colleagues who saved the life of their patient.



A few fast facts about Alicia Olakanye

Favorite book: *The Invention of Wings*, by Sue Monk Kidd

Favorite concert or musician: Jill Scott

Where do you always go out to dinner: The restaurant where I got married- 2941 in Virginia

Vacation I would do again: We always go to the British Virgin Islands.

What is your superpower at work: Multitasking

One colleague I admire: someone on my team, Kelly Turner

When I am not at work, I like to spend time with my family.

If I weren't a nurse, I would be a pediatrician.



Spotlight on Informatics

Structural Empowerment



Senior Clinical Informatics Analyst **Alicia Olakanye, MS, RN**, doesn't consider herself tech-savvy. Though she's a millennial, she's the last person in her circle of friends to download an iPhone upgrade or pick up the latest digital gadget.

A nurse for 17 years, including a decade in direct patient care within maternal-child health, Olakanye now provides "elbow support" to Epic users throughout the Department of Nursing. Her path to supporting technology comes from her love of helping people and being a resource for colleagues in patient care settings, "bridging care with technology."

While in a clinical role at another health system, Olakanye was recruited to support the EMR in use on her unit, which is a common path for nurses who want to work within the informatics field. Olakanye explains that many of her colleagues find they're interested in technology by being the go-to resource on the unit for users who have questions — providers and staff — and then helping to customize software solutions to make work easier.

During her career, Olakanye has witnessed the transition from paper charting to a digital environment, and she returned to graduate school to specialize in the informatics field.

One of Olakanye's achievements in her informatics work was building the patient movement guide as part of the Epic implementation, defining the workflow of processing patient admissions, transfers, discharging patients, and managing bed assignments. This highly integrated workflow involves multiple disciplines and can be complex, requiring communication with many clinicians. Patient movement affects patient care and safety, billing, medication delivery to the correct location and orders reconciliation.

Olakanye says that there is always a learning curve with a product like Epic, and that she loves the dynamic nature of her work. "We continually customize and upgrade the software to meet new regulatory requirements, address results from The Joint Commission surveys, or respond to changes in CMS rules and patient safety demands." Being able to influence the software products to ensure her colleagues in patient care are satisfied is important to her.

"It all goes back to being a nurse, because I like to care for people," says Olakanye. "As a clinician, I understand their frustrations and can make their struggles better. Coming in and rescuing people feels good! It's rewarding."

Magnet hospitals provide many paths forward in nursing, from the bedside to leadership to specialties like informatics, patient safety and more. To learn more about how you can advance your career, visit insidehopkinsbayview.org/intheknow.

"Not in his goals, but in his transitions is man great." — Ralph Waldo Emerson



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