Dear Colleagues:

As psychiatric-mental health and addiction nurses, relationships are central to our everyday practice. The nurses at Sharp Mesa Vista Hospital and Sharp McDonald Center (SMVH/SMC) make meaningful connections with patients, families and other healthcare professionals that support healing and recovery from mental and substance use disorders. Patients who come to our facilities are often feeling very vulnerable and our nurses have the knowledge, skill, caring and patience to — as Florence Nightingale said — “put the patient in the best condition for nature to act upon him.” They do this by creating an environment of healing — for the body, mind and spirit. Caring is in our nurses’ nature; they provide hope when it feels that there are no more choices, generously share resources when the patient and families are ready, and ensure safety throughout the process. I have the highest regard for the nurses at SMVH/SMC as they care for a complex, vulnerable, marginalized patient population. They continue to envision the patient as a whole being, with rich and hopeful stories.

Our nurses face the challenges of growing medical and psychosocial complexity that increase their scope of work. I admire their engagement and desire to improve and grow, each and every day. Please enjoy a review of our nurses’ work through this inaugural SMVH/SMC Nursing Report. And feel proud. I certainly am!

Sincerely,

Cheryl Odell, MSN, RN, NEA-BC
Vice President and Chief Nursing Officer
Sharp Mesa Vista Hospital & Sharp McDonald Center

COVER PHOTO: (From left) Teresia Ngeno, RN (SBU), Sara Ackerman, RN (East County Outpatient), and Ben Contreras, RN (AL Office)
Our First Annual Nursing Report

This inaugural report describes the accomplishments of SMVH/SMC nurses since 2013. Since we are pursuing Magnet Designation, this report is organized by the four components of the Magnet Model: Transformational Leadership, Structural Empowerment, Exemplary Professional Practice and New Knowledge, Innovations & Improvements. Magnet Designation is the most prestigious credential a healthcare organization can achieve for nursing excellence and quality patient care. It will recognize the extraordinary accomplishments of SMVH/SMC nurses.

Our Journey to Magnet Is Ongoing

We officially launched our Magnet Designation Journey in May 2016, but we have been preparing for several years. We held an off-site retreat where 35 nursing leaders set a strategy for achieving Magnet designation. At this meeting, participants confirmed their desire to achieve Magnet designation and were eager to get started. When asked about their understanding of Magnet, some participants provided the following descriptors:

- Excellence; quality of care we give our patients; a place where people want to work
- Constant growth; constant improvement
- Attracting the best
- Engage nurses; improving outcomes
- Nursing empowerment all the way to the front line
- Frontline and leadership working together.

An analysis of all participant feedback revealed a word cloud (see below). As part of our Magnet launch, a theme was developed for our journey — Caring is in Our Nature.

In Pursuit of Planetree Designation

In addition to preparing to apply for Magnet designation, we are also pursuing another patient-centered framework — Planetree. Our preparation for Planetree Designation began in 2012 and we have accomplished significant milestones in creating patient-centered care in healing environments. The principles of the Planetree model are to personalize individual needs, humanize respect and dignity, and demystify information. To this end, we have accomplished the following:

- Extended visiting hours and enhanced family accommodations
- Promoted the use of healing gardens
- Remodeled two units (Senior Behavioral Unit and East Wing 1), Electroconvulsive Therapy (ECT) area and the South Rotunda refresh
- Identified department-specific criteria for achieving patient-centered care
- Identified key components used to personalize the patient experience
- Conducted a Planetree Retreat in May 2016
- Remodeled the physicians’ and staff lounges
- Transitioned Peer Support to a volunteer program
- Initiated a Care Partners program
- Redesigned brochures and pamphlets with patient/family input
- Reorganized and reconfigured committee structure
- Initiated a new Employee Onboarding, which includes a commitment to our philosophy
- Continued Pet Therapy and visitation programs
- Expanded healing arts programming, including aromatherapy in inpatient settings.

Ongoing Hospital Modernization

In 2011, SMVH leadership and frontline staff initiated plans to modernize and remodel our 50-year old facility, using best practices for safety and utilizing nature to enhance the wellbeing of our patients. We created healing environments that included open nursing stations in an effort to remove barriers between staff and patients. A Senior Behavioral Unit was increased from 13 to 23 beds; and East Wing 1 was increased from 16 to 25 beds; increasing bed capacity for the growing San Diego community. The ECT Suite and Pharmacy areas were also remodeled. Best practices were employed in decisions regarding: workgroup collaboration, design features, safety needs, technology advancements, family spaces, recovery/patient-centered care, and increasing staff and patient connections. The aim was to create a standard for future renovation projects at this facility and be a resource to other similar facilities going through redesign. Components of redesign included: anti-ligature features, textile choices, color, flooring, and strategies, design, and implementation using environmentally safe materials. The next area slated for remodel is the Child and Adolescent Inpatient Unit. Considerations for this remodel include: Sally Port, Snoezelen (Multi-Sensory) Room, welcoming front entrance, increased bed capacity, improved lighting technology in patient rooms, enhanced back patio, rooms for increased visualization, and improved patient and staff common interactive spaces.

Transformational leadership starts with a vision and incorporates participative leadership and management to achieve exemplary outcomes. Nursing leadership, informed by a shared governance structure, provide an infrastructure for continuous improvement. Various strategic initiatives build a foundation to support a culture of quality and safety, including the Sharp HealthCare Center of Nursing Excellence, which sets the vision for the nursing enterprise.

Six Sigma/Lean/Change Management Training

Change is a part of everyday life at SMVH/SMC. Nursing staff are trained in Sharp HealthCare’s continuous improvement methods: Lean Six Sigma, Change Acceleration Process, and Work-Out. Lean Six Sigma is an important part of our ongoing journey to make Sharp the best place to work, practice medicine and receive care. White Belts learn Lean Six Sigma awareness, apply basic A3 problem-solving, assist in the identification of waste, and are active participants in huddles, learning boards and problem solving. Yellow Belts provide local assistance for meeting facilitation, group problem solving, and meeting effectiveness, help instill new tools and techniques across the organization, identify and complete A3 problem solving in the workplace, and assist in the identification and mitigation of waste. Green Belts oversee project analytics and are leaders in addition to their current job responsibilities, participate in Six Sigma projects, facilitate rapid improvement events and 5S events, and coach A3 problem solving. Nursing staff who have achieved White, Yellow and Green belts include:

**Six Sigma Green Belt**
- Loralie Woods

**Six Sigma Yellow Belt**
- Jennifer Armentrout
- Cathryn Cooper
- Laurie Costa
- Debra Downes
- Nancy Earl
- James Hall
- Robin Inkel
- Bozena Kik
- Linda Kuetzko
- Vanessa Kurzon
- Teresia Ngeno
- Cheryl Odell
- Corinne Powell
- Jesselyn Quiapo
- Gregory Robin
- Tim Sanford
- Gretchen Smith
- Maria Sufan
- Chandra Vincent
- Stephanie Velbis

**Six Sigma White Belt**
- Martha Acosta
- Tricia Armfield
- Al Arriaga
- Sarah Badilla
- Kimberly Bailey
- Stephanie Bailesta
- Stephanie Bautista
- Breanah Bandrowsky
- Joshua Barder
- Tonya Bell
- Marc Brunton
- Patricia Burningham
- Danielle Campbell
- Michelle Etherington
- Lynda Goldberg
- Naia Gomez-Andrade
- Sandra Gray
- Brooke Hartsock
- Susan Hobik
- Rebecca Johnson
- Bozena Kik
- Vanessa Kurzon
- Jill Ledbetter

Photo: Amanda Gastelum Munoz, MSN, CNL, RN, Senior Specialist, Nursing
Improving Hand Hygiene
In high reliability organizations, clinical processes are standardized and hardwired to ensure the best practices are being employed in an effort to reduce healthcare-associated infections. SMVH/SMC leadership and frontline staff have focused on hand hygiene as an infection prevention strategy for several years. A multi-modal approach has been utilized to foster hand hygiene compliance for all employees. Hand hygiene compliance within nursing staff has increased 51 percent since 2013. Interventions implemented to foster hand hygiene has included:

- Utilizing the Joint Commission Targeted Solutions Tool-Hand Hygiene
- Hospitalwide training and monthly educational sessions
- Reviewed and clarified the definition of “Wash in” and “Wash out” for the inpatient psychiatric setting
- Continued monitoring by observers. Enhanced coaching provided; barriers to hand hygiene solicited and addressed
- Created visual and verbal prompt for cross-monitoring (ID badge guards).

Collaboration with Sharp Memorial Hospital Regarding Medically Complex Cases
Admissions to behavioral health facilities have been getting more complex over time; more and more patients present with medical co-morbidities in addition to primary behavioral health challenges. SMVH/SMC leadership and frontline staff have been working collaboratively with leadership at Sharp Memorial Hospital (SMH) to ensure that equipment and resources are available to nursing staff caring for patients with primary behavioral health diagnoses and secondary concurrent medical problems. Administrative Liaisons from both hospitals in collaboration with the Intake Department at SMVH initiated a daily phone huddle to review pending admissions and assign priority for placement. Historically, the hospitals relied on physicians for placement of patients to SMVH; vital safety information such as isolation precautions, need for medical devices, and fall risk were not always conveyed accurately. A worksheet, “Pending Behavioral Health Transfers,” was developed and this tool allows for clinical review prior to the huddle. It formalizes and standardizes the process of medical clearance and appropriateness. Since implementation of the daily huddle, all medical issues are addressed prior to placement, ensuring patient, staff, and workplace safety. This tool is aligned with our goal of becoming a high reliability organization, sensitive to the needs of patients accessing our services by reducing wait times for transfers from SMH medical units and the emergency department.
Structural Empowerment: Engagement, Lifelong Learning, Community.

Structural empowerment requires nurse engagement at every level, with a commitment to lifelong learning. We emphasize the principle of lifelong learning for all nursing staff. A commitment to our internal and external community assures that individuals receive the services they require.

Our Nurses Are Satisfied and Engaged

Every year, Sharp HealthCare measures employee engagement through a satisfaction survey. Specific areas where nurse satisfaction was high are shown below.

Table 1: 2015 and 2016 Employee Engagement Survey Items

<table>
<thead>
<tr>
<th>SURVEY ITEM</th>
<th>PERCENT FAVORABLE</th>
<th>2015</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall, I am satisfied with my job.</td>
<td>87</td>
<td>91</td>
<td></td>
</tr>
<tr>
<td>I know what is expected of me in my job.</td>
<td>95</td>
<td>97</td>
<td></td>
</tr>
<tr>
<td>Sharp HealthCare provides me the opportunity to improve my professional knowledge and job skills.</td>
<td>91</td>
<td>91</td>
<td></td>
</tr>
<tr>
<td>My job gives me an opportunity to do the things I do best.</td>
<td>87</td>
<td>91</td>
<td></td>
</tr>
<tr>
<td>Employees of Sharp HealthCare show an attitude of genuinely caring about the customer.</td>
<td>89</td>
<td>93</td>
<td></td>
</tr>
<tr>
<td>My coworkers are friendly and helpful.</td>
<td>94</td>
<td>93</td>
<td></td>
</tr>
<tr>
<td>The people I work with treat me with respect.</td>
<td>94</td>
<td>91</td>
<td></td>
</tr>
<tr>
<td>My supervisor treats me with respect.</td>
<td>88</td>
<td>91</td>
<td></td>
</tr>
</tbody>
</table>

SMVH/SMC Nurse Residency Program — A Path to Professional Nursing

SMVH/SMC nursing leadership initiated a Nurse Residency Program (NRP) in 2011. The primary goal of the NRP was the recruitment into the psychiatric-mental health and addiction nursing specialties and retention. Since its inception, 43 nurses have graduated from the program. Components of the program include didactic instruction, clinical immersion and competency validation, looping, mentoring and debriefing. To-date, the NRP has achieved a 71 percent retention rate. Respondents to a survey have listed the greatest source of job satisfaction as:

- “Knowing that you are helping patients get through a difficult time in their lives.”
- “Being part of a patient’s recovery. Working as part of a great team and knowing I make an important contribution.”
- “Positive, measurable patient outcomes.”
- “Patient improvements in condition; coworkers create a pleasant environment; teamwork.”

Photo: Laura Thill, RN, Advanced Clinician, ICU, 2016 Nurse of the Year
Graduates of the SMVH/SMC Nurse Residency program include:

2016  Leila Riches, Mary A-Spears, Stephanie Ballesta, Jennie Francis, Erica Tiscarano, Brentt Bean, Jeff Casprini, Erin Hansen, Kristine Pagaduan, Helen Rees, Madeleine Thompson, Tim Sanford, Cristina Diocson, Erica Gemignani, Stephanie Harrington

2015  Jonathan Brininger, Kathleen Rhea

2014  Lauren Cheney (Kruz), Laurie Costa, Justin Sabol, Laurie Michelson, Ashlee Deninger, Rachel Suh (Yang)

2013  Patricia Armfield (Lead), Erica St. Pierre, Jennifer Alii (Advanced Clinician [AC]), Lilah Joy Arellano (Leon Guerrero), Carol Ross (AC)

2012  Laura Thill (AC), Candice Toscano, Annie Mascorro, Ellen Todd, Tanya Rowe, Kevin Kreeger, Teresia Ngeno (Lead), Linda Maurer (AC), Cyrus Cammayo

2011  Brad Beckwith, Irene Greene-Grant, Marlena Barber, Jay Villaflores, Brooke Hartstock (Lead), Jenna Kwiatkowski, Christine Locke (Lead), Nicole Raymundo (AL)

Nine NRP graduates (names bolded above) assumed nursing leadership roles.

Raising the Bar: Baccalaureate Preparation

Evidence-based and safe nursing care depends on an educated, informed and engaged professional nursing workforce. SMVH/SMC’s nursing strategic plan is aligned with the Institute of Medicine report The Future of Nursing: Leading Change, Advancing Health, where academic and service nurse leaders are working “together to increase the proportion of nurses with a baccalaureate degree from 50 to 80 percent by 2020” (page 12). SMVH/SMC leadership has consistently hired more nurses with a baccalaureate degree. Additionally, there are a significant number of clinical nurses practicing with master’s degrees.

Figure 2:
Percentage of Clinical Nurses with Baccalaureate Degrees

Several of our Mental Health Associates are pursuing RN degrees. Currently 10 RNs are pursuing BSNs and eight clinical RNs are in Master’s programs. SMVH/SMC nursing leadership is a founding member of Sharp HealthCare’s Center of Nursing Excellence (CoNE). Established in 2009, CoNE provides structures and processes to address nursing workforce challenges, along with a common infrastructure for nursing professionals to share best practices and enhance collaboration across the system. CoNE’s strategic quality goal is to consciously integrate evidence-based practice and research into clinical and operations for innovations in patient care, nursing, and the practice environment. Since its inception, CoNE has provided three scholarships to SMVH/SMC nursing staff totaling $12,000 to defray the costs of their nursing education.

Recognition of Nursing Excellence

SMVH/SMC recognizes the contribution of its exceptional nursing staff through various award programs. These include the Guardian Angel Program, Employee of the Month and Year, Nurse and LVN/LPT of the Year, Nursing Support Staff of the Year, Spirit of Caring Award, and the Sharp HealthCare CORE and Pillar Awards.

Guardian Angel Program

The Foundations of Sharp HealthCare launched the Guardian Angel Program nearly 10 years ago to provide patients and their loved ones an opportunity to recognize caregivers who made a difference during their hospital visit, while also supporting Sharp. In return, each Guardian Angel receives a letter informing them that a donation was made in their honor. If it is their first recognition, they are honored at individual ceremonies and presented with a custom-made lapel pin to wear proudly through our facilities. The following employees have been so recognized over the past three years.

2016  Justin Sabol, Reymund Pacio

2015  Richard Donahoe, Grace Lee, Manuela Manning

2014  Alisha Carpenter, Kenneth Fernandez, Suzi Johnson
Employee of the Month

The Employee of the Month program honors employees for service excellence. Nursing staff who have received this award include:

2016  Marichi Reed (CAP3†), Roland Guy (CAP3), Ryan Harina (ICU), Robert Bayaca (EW1)
2015  Andy Freeburn (CAP3), Laure Corta (EW2), Sara Ackerman (East County Outpatient), Lotus Parkstone (SMC), Danielle Campbell (NR), Maria Sufan (CAP3), Rhonda Hart (EW1)
2014  Lilah Joy Arellano (Leon Guerrero) (NR), Jennifer Armentrout (EW2), Shanel Chaifa (SMC), Aaron Hawkins (ICU), Debi Williams (AL)
2013  Darryl Butson (SMC), Lila Villanueva (SBU), Michele Guassac (NR), Melissa Herriott (EW2), Kirstin Schlecht (Intake)

Nurse of the Year/LVN-LPT of the Year

Frontline nurses are central to The Sharp Experience and contribute to SMVH/SMC’s innovations and accomplishments. Each year, SMVH/SMC honors nurses who demonstrate outstanding qualities in their chosen area of practice and who show a commitment to the nursing profession. While all the nurses at Sharp are truly exceptional, a select few exemplify an above-and-beyond standard of excellence that deserves special recognition. The Nursing Excellence Awards provide the opportunity to recognize and reward Registered Nurses for the special contribution they make to SMVH/SMC. The goal is to honor nurses who demonstrate outstanding qualities in their chosen area of practice and a commitment to the profession of nursing.

The Licensed Vocational Nurse (LVN)-Licensed Psychiatric Technician (LPT) Award provides the opportunity to recognize and reward an outstanding LVN or LPT in a clinical setting for the special contribution they make to SMVH/SMC. The goal is to honor individuals who demonstrate outstanding qualities in their area of practice and contributions to patient care.

Recipients of the nursing excellence and LVN-LPT awards from 2013 — 2016 include:

2016  SMV/ICU  Laura Thill, RN
      SMV/ICU  Lori Jones, LPT
2015  SMV/EW2  Jennifer Armentrout, RN
      SMV/SR  Donald Coordes, LVN
2014  SMV/SR  Marina Buhle, RN
      SMV/NR  Cheryl Okuboye, LVN
2013  SMV/SBU  Christine Locke, RN
      SMV/SR  Donald Coordes, LVN

†CAP3 = Child & Adolescent Program; ICU = Intensive Care Unit; EW1 = East Wing 1; EW2 = East Wing 2; SMC = Sharp McDonald Center; NR = North Rotunda; AL = Administrative Liaison; SBU = Senior Behavioral Unit; SR = South Rotunda
Nursing Support Staff of the Year — Patient Care Direct
The Nursing Support Staff of the Year Award seeks to recognize nursing support staff who reflect a positive, professional image by his/her commitment to leadership, collaborative practice, support of professional growth and excellence in patient care. SMVH/SMC award recipients include:

2016 SMV/SBU  Giovani Soto Elizarrazaz, MHA
2015 SMV/SBU  Mariann Stafford, MHA
2014 SMV/SR  Eric Biggins, MHA
2013 SMV/ICU  James Sullivan, MHA

Nursing Support Staff of the Year — Patient Care Indirect
2016 SMV/ICU  Kevin Perez, UC
2015 SMV/SR  Maria Rodriguez, UC
2014 SMV/Staffing Office  Valerie Stoffel
2013 SMV/Transportation  James Garronbone

Employee of the Year
2016 SMVH/SMC  Roland Guy, MHA

Spirit of Caring Award
The recipient of the 2016 Jim and Sally Haugh Spirit of Caring Award was Sara Ackerman, RN, SMVH — East County (outpatient services). Robert Bayaca, MHW, won the award in 2010. The Jim and Sally Haugh Spirit of Caring Award was established by James C. Haugh, Chairman Emeritus of Sharp HealthCare in 1987 as a memorial tribute to his wife Sally to honor the exceptional care she received at Sharp. The award is presented annually to caregivers throughout Sharp HealthCare who exemplify exceptional care. Formerly named the Sally Breuner Haugh Spirit of Caring Award, this honor has been renamed the Jim and Sally Haugh Spirit of Caring Award to memorialize the compassion and leadership of both Sally and Jim, who passed away in early 2015.

Frontline nurses are central to The Sharp Experience and contribute to SMVH/SMC’s innovations and accomplishments.
The Center of Recognized Excellence (CORE) and Pillars of Excellence Awards recognize team members and partners who exemplify the spirit of The Sharp Experience and produce extraordinary results under one of the seven Pillars of Excellence. Each year, SMVH/SMC presents CORE Awards to recognize exemplary team members. All CORE Award winners are then considered for Sharp’s systemwide Pillars of Excellence Awards, which are honored at the annual All-Staff Assembly. The following is a list of SMVH/SMC CORE and Pillar award recipients.

2016 CORE and Pillar Awards

Residential, Partial Hospitalization and Intensive Outpatient (Quality Pillar, Department)
Larkin Hoyt, Roger Anderson, Katie Posner, Sherri Wiechert, Lotus Parkstone, Judith Adams, Lisa Mills, Max Doshay, Tracy Shepler, Jonathan Yahalom, Kelsey Bradshaw, Yshan Xu, Sharon De Peralta, Cynthia Merza, Kenneth Avery, Shanel Chalfa, Kristine Vickery, Chester Alexander, Darryl Butson, Lindsay Kramer, Monica Hinton, Jane Firth, Robert Young, Debra Lux, Lynn Tabb, Crystal Barrera

Jesselyn Quiapo (Service Pillar, Individual)

Center of Nursing Excellence Scholarship Program — SHC Multi-Entity* (People, Team)
Christine Basiliere, Carmen Colombo, Laurie Eccott, Caroline Etland, Shawna Fallon, Ana-Maria Galo, Gabriella Malagon-Maldonado, Cheryl Odell, Katherine Reif, Christopher Walker, Pamela Wells, Louise White, Loralie Woods, Karen Flowers

Senior Behavioral Unit Leadership (People Pillar, Team)
James Sommerville, Jesselyn Quiapo, Laurie Michelson, Linda Maurer, Teresia Ngeno, Susana Corpus, Jennifer Alli, Sarah Caliguiri

Senior Intensive Outpatient Program (People Pillar, Department)
Marilee Valine-Foley, Veronica Campbell, Maricar Jenkins, Ruth Juarez, Jennifer McWaters, Tara Schwartz, Heather Graham, Nancy Burtak, Susann Richards, Ashley Malooly, Caroline Atterton, Kirsti Woods, Frank Ogle, Alan Berkowitz

Child and Adolescent Inpatient Services (CAP3) (Finance Pillar, Department)
Kelsey Bradshaw, Robin Inkel, Breana Bandrowsky, Stephanie Velbis, Peter Lopez-Perez, Todd Winnick, Tim Sanford, Sarah Badilla, Michael Benedetti, Yassir Kazhia, Ryan Suzukawa, Devin Albert, Molly Willis, Peter Meaden, Lynda Goldberg, Arlene Hernandez, Jesse Rodriguez

SMV Administrative Liaisons (Growth Pillar, Team)
Marina Buhle, Wendy Barlow, Benjamin Contreras, Douglas Haralson, Debra Downes, Nicole Raymundo, Pamela Lippert, Joe Lacanienta, Linda Farmer

2015 CORE and Pillar Awards

SMVH Modernization and Expansion* (Growth, Team)
Kathi Lencioni, Pat Nemeth, Cheryl Odell, Mary Kay Shibley, Tim Crowe, Jennifer Baker, Doug Lester, Michael Richards, Jeff Henninger, Mike Coronado, Steinar Sire, Mark Clark

Child & Adolescent Inpatient Services* (Safety, Department)
Alisha Carpenter, Encarnacion Apostol, Sharon Maidment, Mary Mowen, Marichi Reed, Roland Guy, Kimberly Bailey, Al Arriaga, Anita Plath, Thomas Royce, Susan Hlobk, Mary Anne Uy, Mary Sufan, Patricia Bunting, James Holt, Michelle Etherington, Michael Ulrich, Corinne Powell, Peggy Wilson, Andrew Freeburn, Kathleen Rhea, William Downes, Benjamin Trujillo, Kristin Steele, Robin Inkel, Ryan Thebo, Stephanie Velbis, Peter Lopez-Perez, Todd Winnick, Justin Sabel, Sarah Badilla, Michael Benedetti, Ashlee Bolt, Ryan Suzukawa, Devin Albert, Molly Willis, Peter Meaden, Abby Newcomb

Corinne Powell (Service, Individual*)

Eating Disorders Outpatient Program (Service, Department)
Nancy Burtak, Linda Santangelo, Amanda Dahlin, Stacey Haywood, Kellie Hunziker, Amy Ornelas, Roxanne Weber, Tammy Wehr, Abby Griesbach

Edmund Gaeta (Growth, Individual)

2014 CORE Awards

Melissa Herriott (Quality, Individual)

Trauma-Informed Care (Team, Quality)
Alisha Carpenter, Jen Wojciechowski, Gayle Sitarz, Sanjoy Sathpathy, Loralie Woods, Cheryl Odell

Adolescent Cognitive Intensive Outpatient Program (Growth Pillar, Department)
Alisha Carpenter, Jen Wojciechowski, Kristen Ash, Lisa Hazlewood, William Wright, Joseph Sheridan, Melina Fischer

Intergenerational Therapy Team (Quality Pillar, Team)
Marilee Valine-Foley, Alison Wilbanks, Jonathan Yahalom, Ruth Juarez, Jennifer McWaters, Tara Schwartz, Jen Wojciechowski, Nancy Burtak, Alisha Carpenter, Ashley Malooly, Caroline Atterton, Roland Guy, William Wright, Kimberly Thornton, Jesslyn Goldbaum, Tracy Shepler

Cognitive Therapy and Dialectical Behavior Therapy (Community Pillar, Department)
Suzanne Whittemore, Sukir Erikat, Amber Salvador, Safa Rashid, Colleen Auth, Julie Braatz, Joseph Gannon, Maggie Gorman, Kandira Hebert, Christina Huang, Ali Mazzolo, Jackie Noonan, Diane Quizon, Laura Thackray, Angelica Waring, Kristin Whitaker, Nancy Burtak
Nursing Practice Council (People, Team)
Amanda Gastelum Munoz, Jerean Dashtizad, Erica St. Pierre, Tricia Armfield, Laura Thill, Christine Locke, Amy Recker, Linda Maurer, Jay Villaflores, Robin Inkel, Kevin Costiglio, James Barren, Gayle Sitarz, Mary Kay Shibley, Loralie Woods, Teresia Ngeno

Child & Adolescent Technology Task Force (Growth, Team)
Alisha Carpenter, Jen Wojciechowski, Marsha Lubick, Elizabeth Chan

Dual Aftercare Program (Community, Department)
Khara Rice, Tamu Harris, Mary Vannoy, Elizabeth Rogers, William Claude, Mary Beth Bryan, Chiou-Ling Lai, Jonnas Ferma, Matt Dalrymple

2013 CORE and Pillar Awards
Julie Heriford (Quality, Individual)
COG Outpatient Program (Quality, Department)
HBIPS Measures (Quality, Team)
Fadi Nicolas, Anna Carrillo, Michael Plapper, Kathi Lencioni, Cheryl Odell, Rebecca Kjonegaard, Loralie Woods, Julie Heriford, Shauna Terrac, Mary Kay Shibley

John Paul (JP) Conley* (Service, Individual)
Inpatient Program Redesign* (Service, Team)

Frontline Impact & Evidence-Based Practice (EBP) Program
The Frontline Impact & EBP Program, in partnership with the Advisory Board Company, is designed to help organizations harness the untapped innovation and leadership potential of frontline staff by providing them with the skills, opportunity, and confidence to implement their own improvement ideas successfully, ultimately to the benefit of the organization.

The Frontline & EBP Program consists of five leadership development classes in addition to four EBP workshops beginning in January each year, and culminates with a Result Summit at the end of the year. New leaders are mentored by an experienced coach. Participants design and complete a Performance Improvement/EBP project that have measurable results and attend a series of intensive learning sessions to support that work. Their presentations are noted in the New Knowledge, Innovations & Improvements section of this report.

Participants emerge from the experience as confident, engaged, and productive Frontline Leaders, willing and able to take on new challenges. Individuals who have served as coaches for upcoming leaders include:

San Diego Evidence-Based Practice Institute (EBPI)
Sharp HealthCare participates in the San Diego EBPI, which prepares teams of staff fellows (interprofessional staff) and mentors to change and improve clinical practice and patient care. This evolution in practice and care occurs through identifying a care problem, developing a plan to solve it and then incorporating this new knowledge into practice. The EBPI is part of the Consortium for Nursing Excellence, San Diego, which promotes evidence-based practice in the nursing community. The consortium is a partnership between Sharp HealthCare, Scripps Health, Palomar Health, Rady Children’s Hospital – San Diego, University of California, San Diego Health System, U.S. Department of Veterans Affairs (VA) San Diego Healthcare System, Elizada Hospice, Point Loma Nazarene University, San Diego State University, Azusa Pacific University and the University of San Diego Hahn School of Nursing and Health Science.

Sharp actively supports the EBPI by providing instructors and mentors as well as administrative coordination. The San Diego EBPI includes six full-day class sessions featuring group activities, self-directed learning programs outside of the classroom and structured mentorship throughout the program. The EBPI fellows partner with their mentors and participate in a variety of learning strategies. Mentors facilitate the process of conducting an evidence-based practice change and navigating the hospital system to support the fellows through the process of evidence-based practice.

Mentors facilitate the process of conducting an evidence-based practice change and navigating the hospital system to support the fellows through the process of evidence-based practice.

*Awarded also won Pillar Award
The nine-month program culminates with a community conference and graduation ceremony in November, where the project results of all EBPI fellows are shared. Five fellows graduated from the EBPI program since FY2012 and completed projects that addressed the following issues in clinical practice and patient care: engaging patients in recovery action planning; working together to prevent falls; reduction of nurse injury on a geriatric-psychiatric unit, and interruptions during medication administration.

Table 2: 2012 – 2016 Evidence-Based Performance Improvement Projects

<table>
<thead>
<tr>
<th>YEAR</th>
<th>MENTOR</th>
<th>MENTEE</th>
<th>PROJECT</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016</td>
<td>Amanda Gastelum Munoz</td>
<td>Mary A-Spears Blair Davis</td>
<td>Team Communication and Pod Assignments: Working Together to Prevent Falls</td>
</tr>
<tr>
<td>2015</td>
<td>Nancy Earl</td>
<td>Jennifer Armentrout</td>
<td>Engaging Patients in RAP via Motivational Interviewing</td>
</tr>
<tr>
<td>2012</td>
<td>Loralie Woods</td>
<td>Jill Ledbetter</td>
<td>Reduction of Nurse Injury in a Geri-Psych Unit Through Adoption of Safe Patient Handling Program</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Chandra Vincent</td>
<td>Interruptions During Medication Administration</td>
</tr>
</tbody>
</table>

Service in the Community — Adjunct Faculty

Our professional nurses serve in the community as adjunct faculty at various health professions schools. Their impact on future healthcare professionals is critical to ensuring a vibrant workforce. A recent quote from a nursing student exemplifies these nurses’ influence on the next generation of professional nurses:

Mental health has always had a social stigma in my culture. Here at Sharp everyone leaves their “hat” or title at the door and participates in the process as equals. Sharp Mesa Vista helps me understand that no one, no matter how educated they are or the position they hold, has the right to predict the course of our future; of our life. Whenever possible, people work together and learn with peers, to increase mutual understanding, knowledge, and promote wellness.

— Student Nurse, National University, July 2016

Adjunct Faculty Appointments

- Azusa Pacific University
  - Nancy Earl, Lead RN
  - Larry Rankin, Clinical RN

- Living Works
  - Kris Lambert, Senior Specialist, Nursing

- National University
  - Luc R. Pelletier, Senior Specialist, Nursing
  - Vanessa Kurzon, Manager
  - Chandra Vincent, Lead RN
  - Loralie Woods, Manager

- Olivet Nazarene University
  - Larry B. Rankin, Clinical RN

- Point Loma Nazarene University
  - Kris Lambert, Senior Specialist, Nursing
  - Larry B. Rankin, Clinical RN
  - Kathleen Rhea, Clinical RN

- San Diego State University
  - Sharon B. De Peralta, Clinical RN

- University of California, San Diego
  - Vanessa Kurzon, Manager
  - Jay Villaflores, Clinical RN
  - Loralie Woods, Manager

- University of San Diego
  - Jennifer Armentrout, Clinical RN
  - Nancy Earl, Lead RN
  - Luc R. Pelletier, Senior Specialist, Nursing
  - Chandra Vincent, Lead RN
  - Amanda Gastelum Munoz, Senior Specialist, Nursing

- US Navy Independent Duty Corps School
  - Joe Lacanienta, Administrative Liaison

- Vinyasa Krama School of Yoga
  - Chris Marrazzo, Clinical RN

Adjunct Faculty: 24 Nursing staff serve as adjunct faculty with 11 colleges, universities and professional schools
SMVH/SMC Honors its Certified Nurses

SMVH/SMC values professional board certification of nurses in specialty areas. The Sharp HealthCare Center of Nursing Excellence partners with the American Nurses Credentialing Center (ANCC) to implement an efficient pathway to certification, which reduces test-taking anxiety and eliminates financial barriers through the Success Pays Program™.

This past year, clinical nursing staff created an ANCC certification preparation course. This program included evidence-based components and was conducted from Aug. 1-29, 2016. Eighteen staff attended the multi-week course, covering the following topics: neuroanatomy/physiology, high-risk behaviors, milieu therapy, crisis concepts and interventions, pharmacology and integrative therapies, crisis concepts and interventions, communication, test taking and practice questions. Thus far, six nurses have achieved board certification.

Below is a graph that shows the increasing number of certified nurses at SMVH/SMC.

![Certified Nurses Graph](image)

**We congratulate our nurses for achieving and maintaining board certification. The following list includes SMVH/SMC nursing staff certified in various nursing, education and other healthcare specialties.**

- **Adult Psychiatric-Mental Health Clinical Nurse Specialist (ANCC; PMHCNS-BC)**
  - Keyrah Hobbs
  - Luc R. Pelletier
  - Patricia Rodgers
  - Susan Wild

- **Certified Addictions Registered Nurse (IntNSA; CARN)**
  - Sandra Gray
  - Carole Haworth
  - Linda Kuetzoo
  - Lilah Joy Leon Guerrero
  - Matt Lockart
  - Annie Mascorro
  - Patricia Radley

- **Certified Medical-Surgical Registered Nurse (AMSN; CMRN)**
  - Bozena Kik

- **Certified Nurse Educator (NLN)**
  - Larry B. Rankin

- **Certified Professional in Healthcare Quality (HQCC)**
  - Sharon De Peralta
  - Luc R. Pelletier

- **Clinical Nurse Leader (AACN)**
  - Amanda Gastelum Munoz

- **Certified Case Manager (CCMC)**
  - Penny Peterson

- **Family Nurse Practitioner (AANP)**
  - Kelly Mullins

- **Nurse Executive (ANCC; NE-BC)**
  - Bozena Kik

- **Nurse Executive — Advanced (ANCC; NEA-BC)**
  - Cheryl Odell

- **Professional Certification: 43 Nursing staff certified in 12 healthcare specialties**

- **Nursing Professional Development (ANCC; RN-BC)**
  - Amanda Gastelum Munoz
  - Loralee Woods

- **Psychiatric-Mental Health Nursing (ANCC; RN-BC)**
  - Helen Aguilar
  - Jennifer Armentrout
  - Donis Baqueruir
  - Marc Brunton
  - Rhodora “Odette” Campos
  - Carlos Cisneros
  - Nancy Earl
  - Nicole Entenza
  - Kenneth Fernandez
  - Sharon Fritz
  - Carole Haworth
  - Rebecca Suzanne Johnson
  - Dawn Kochel
  - Joe Lacanienta
  - Matt Lockart
  - Maria Dulce Mariano
  - Ricardo Mera
  - Steven Molina
  - Cristin Peacock-Coleman
  - Conrine Powell
  - Fred Quinn
  - Judy Reagan
  - Amy Recker
  - Justin Sabol
  - Gretchen Smith
  - Elizabeth Thoreson
  - Tom Warmuth
  - Susan K. Williams
Engagement in our Professional Associations

Belonging and being engaged in a professional nursing organization advances the profession. Many of our nurses are active in their specialty nursing organizations and contribute to making healthcare better for all Americans by influencing policy and practice standards. Some have even held elected office in these prestigious nursing organizations. Belonging to a professional association is a venue for professional practice and excellence, healthcare and public policy, knowledge and research, unification and workforce and workplace advocacy. Below is a list of SMVH/SMC nurses and their professional organization affiliations.

### Alpha Tau Delta
- Stephanie V. Ballesta

### Academy of Integrative Health & Medicine
- Jennifer Francis

### American Academy of Nursing
- Luc R. Pelletier

### American Association of Nurse Practitioners
- Kelly Mullins

### American Nurses Association
- Sarah H. Badilla
- Odette Campos
- Naia Gomez-Andrade
- Erin Hansen
- Olivia Kearnes
- Petra Klew
- Vanessa Kurzon
- Kris Lambert
- Jacqueline Linehan
- Abby Nauman
- Luc R. Pelletier
- Jesselyn Quiapo
- Larry Rankin
- Leila Riches
- Loralie Woods
- Shadette Soriano
- Joyce Wei

### American Psychiatric Nurses Association
- Jennifer Armentrout
- Patricia L. Burningham
- Odette Campos
- Daniel M. Casale
- Laurie Costa
- Nancy Earl
- Erica Gemignani
- Naia Gomez-Andrade
- Vanessa Kurzon
- Kris Lambert
- Luc R. Pelletier
- Cheryl Odell
- Cristin Peacock-Coleman
- Larry Rankin
- Leila Riches
- Loralie Woods
- Esperanza Zamora

### Association of California Nurse Leaders
- Bozena Kik
- Cheryl Odell
- Naia Gomez-Andrade
- Mary Kay Shibley
- Loralie Woods

### International Nurses Association
- Hannah Biernacki

### Kripalu School of Ayurveda
- Chris Marrazzo

### National Alliance on Mental Illness
- Justin Sabol

### National Association for Healthcare Quality
- Luc R. Pelletier
- Sharon B. De Peralta

### National Black Nurses Association
- Larry Rankin
- Donny Brown

### National Coalition Against Domestic Violence
- Kris Lambert

### Philippine Nurses Association
- Theresa Dacuycuy

### Sigma Theta Tau International
- Jennifer Armentrout
- Laurie Costa
- Cristina Dicoson
- Nancy Earl
- Bozena Kik
- Joe Lacanienta
- Kris Lambert
- Jacqueline Linehan
- Cheryl Odell
- Shadette Soriano
- Loralie Woods
- Rachel Yang

### Western Institute of Nursing Research
- Kris Lambert

### Yoga Alliance
- Chris Marrazzo

Engagement in Professional Associations: 67 Nursing staff involved with 18 professional associations
Community Volunteer Service

Community service is an important part of the professional nursing role. In 2015, SMVH/SMC staff provided education and information on a variety of behavioral health topics and participated in community health and behavioral health events. In addition, staff actively participated in community boards, committees and other civic organizations. Examples of community organizational involvement are below:

AIDS LifeCycle — Medical Team
Cristin Peacock-Coleman
Alzheimer's Walk San Diego
Shadette Soriano
Cerebral Palsy
(Promoting Independence)
Peggy Wilson
Football Official
William Wright
Helen Woodward Humane Society
Maria Sufan
Horizon Christian Academy — Health Screenings
Jennifer Alli
National Alliance for Mental Illness
Shadette Soriano
Military Outreach Ministry
Kris Lambert
Operation Engage America
Luc R. Pelletier
Operation Stand Down (Veterans)
Patricia L. Burningham
Debra Dowmes
Carole Haworth
Kelly Mullins
Cheryl Odell
Philippine Tornado Relief
Maria Sufan
St. Andrews by the Sea
Penny Peterson
San Diego Tour de Cure, Fight to Stop Diabetes
Joe Lacanienta
San Diego Food Bank
Kris Lambert
Sharp Lends a Hand (Stand Down, Food Bank, etc.)
Tricia Armfield
Joe Lacanienta
Jill Ledbetter
Loralie Woods
The Flying Samaritans
Kris Lambert
Thousand Smiles
Leila Riches
United Service Organizations (USO)
Kris Lambert
Walk for Lupus
Joy Ilao
We All Count (San Diego)
Amanda Gastelum Munoz

Photo: Teresia Ngemo, RN (SBU)

SMVH/SMC nurses practice autonomously, and exemplary professional practice requires ongoing collaboration with other healthcare professionals, patients, their families and other stakeholders. Professional nurses are accountable for the clinical services they provide to a variety of behavioral health populations. Exemplary practice emphasizes evidence-based practice, quality and safety — each and every day.

The SMVH/SMC Professional Practice Model (PPM), developed by frontline nurses, is the framework used to envision and provide nursing care. Our PPM serves as a framework for all nursing activities and forms the basis of our pursuits of innovation in nursing science. Sharp HealthCare’s nursing vision is “Transforming lives through caring, innovation and leadership.”

We are guided by 7 pillars of excellence: Quality, Safety, Service, People, Finance, Growth and Community. SMVH/SMC’s PPM includes 5 components: Professional Nursing Values, Professional Relationships, Leadership Approach, Care Delivery System, and Reward and Recognition. Our care delivery system (circle in graphic below) envisions patient and family-centered care that is relationship-based, trauma-informed and recovery-focused.

The foundation of our nursing practice at SMVH/SMC includes the Magnet Recognition Program components of Transformational Leadership, Structural Empowerment, Exemplary Professional Practice, and New Knowledge, Innovations & Improvements; a shared governance structure; core values of The Sharp Experience: Integrity, Caring, Innovation, Safety and Excellence; and our professional nursing scope of standards and practice. The PPM is depicted below.
NDNQI RN Engagement Survey

SMVH/SMC contributes its data to a national database of nurse-sensitive quality indicators, the National Database of Nursing Quality Indicators (NDNQI®). A component of NDNQI is the employee engagement survey. The NDNQI Survey was administered most recently in June 2016. SMVH/SMC nursing leadership believes that “engaged nurses are central to effective, efficient, caregiving teams. By capturing the voice of nurses, organizations can use these insights to understand the unique concerns of nurses, build a patient-centered culture that reduces stress for caregivers, and support strategies to attract and retain valued nurses.” The survey is a multi-dimensional view of nurse engagement and provides nursing leadership with data on strengths and opportunities for improvement. All scores were above the national mean compared to other psychiatric hospitals (see below).

Figure 4: SMVH/SMC NDNQI RN Engagement Survey Results

External Recognition for Exemplary Professional Practice

SMVH/SMC has received recognition from external organizations acknowledging various aspects of our care and services.

National Database for Nursing Quality Indicators (NDNQI) Recognition

Sharp Mesa Vista Hospital won the Award for Outstanding Nursing Quality for Psychiatric Hospitals in 2012 and 2014. In 2012, SMVH had no incidences of physical restraints for four consecutive quarters and scored in the top 15 percent in patient satisfaction with nursing among NDNQI-participating hospitals. “By providing a national database and RN surveys for examining relationships between nursing and patient outcomes, the National Database of Nursing Quality Indicators (NDNQI) delivers evidence to support the importance of nurse sensitive measures in overall patient experience strategy.”

Association for Ambulatory Behavioral Healthcare (AABH)

The Senior Intensive Outpatient Program at SMVH received the “Program of the Year” award from the Association for Ambulatory Behavioral Healthcare based on its clinical innovation, community collaboration, outreach and advocacy. The program was selected for this prestigious recognition over nationally recognized organizations competing this year.

Association of California Nurse Leaders

In 2015, the Association for California Nurse Leaders (ACNL) recognized Cheryl Odell, SMVH/SMC’s Chief Nursing Officer, with an award for Excellence in Leadership for San Diego, CA. The ACNL is the influential voice of nursing leadership advocating for the advancement of the nursing profession. Their vision is positioning nurse leaders to create and influence the future of health care.

San Diego Psychiatric Nursing Society

In 2015, the San Diego Psychiatric Nurses Society (SDPNS) recognized Amanda Gastelum Munoz as Expanded/Advanced Practice Psychiatric Nurse of the Year. The SDPNS is a group of generalist and advanced practice psychiatric-mental health nurses representing many of the local behavioral health organizations. Every year, they recognize nurses who have made a difference in professional nursing.

Trauma-Informed Care and Restraint Reduction

The use of restraint and seclusion can be traumatic for patients and staff. SMVH/SMC has been on a journey to reduce the use of physical and mechanical restraint and seclusion for many years. A variety of evidence-based interventions have been employed to reduce restraint and seclusion, including:

• Ongoing training in crisis prevention and management
• Monitoring and trending of restraint and seclusion data
• Implementation of an assault risk assessment into the clinical nursing workflow
• Patient and staff debriefing (patient debriefing increased 15 percent in FY2016).
Patients rate their satisfaction with SMVH/SMC nursing services as measured regularly through the Press Ganey survey. These surveys are reviewed by managers and frontline staff, which informs the enhancement and continuous improvement of our programs. When compared to other freestanding psychiatric hospitals, SMVH/SMC rates higher in all nursing sensitive items.

High Rankings in Hospital-Based Behavioral Inpatient Psychiatric Services Core Measures

SMVH/SMV has participated in the Hospital-Based Behavioral Inpatient Psychiatric Services (HBIPS) core measure reporting since 2008. HBIPS is a major leadership effort to improve quality, safety and performance. Management staff have worked collaboratively with frontline staff to ensure that systems and infrastructure support compliance with these evidence-based core quality measures. Nurse-sensitive core measures include: seclusion and restraint (HBIPS-2 and HBIPS-3) and Tobacco Cessation. Our restraint reduction performance has been described above.
In regards to the Tobacco Cessation measure, although smoking in general has decreased in the past few years, smoking rates among patients with mental health issues continues to be high. For those with phobias and fears, 34.3 percent smoke; 88 percent of patients with schizophrenia smoke. This is compared to 18.3 percent of people without a mental illness who smoke. At SMVH/SMC, the percent of patients admitted who smoke is decreasing.

Table 3: SMVH/SMC total admits, current everyday or same day smoker numbers and rates

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<tr>
<td>SMVH</td>
<td>SMC</td>
<td>SMVH</td>
<td>SMC</td>
</tr>
<tr>
<td>Total Admits</td>
<td></td>
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<tr>
<td>9005</td>
<td>367</td>
<td>9078</td>
<td>364</td>
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<tr>
<td>Current Everyday or Same Day Smoker</td>
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<tr>
<td>2172</td>
<td>77</td>
<td>1856</td>
<td>58</td>
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<tr>
<td>Current Everyday or Same Day Smoker Rate</td>
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<tr>
<td>24.1 percent</td>
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<td>21.0 percent</td>
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Tobacco Cessation measures include TOB-1: Tobacco Use Screening and TOB-2: Tobacco Use Treatment Provided and Offered. SMVH is above the state and national targets on these measures. Frontline staff and managers continue to ensure that structures and processes are in place to ensure evidence-based care of persons who smoke and adherence to the measure requirements.

Figure 8: HBIPS tobacco cessation measures compared to State, National, and benchmark — 2015

Photo: Christina Devoe, RN (Intake)
New Knowledge, Innovations & Improvements

To date, SMVH/SMC has completed two IRB-approved research studies to advance nursing science in psychiatric-mental health and addictions nursing and initiated a new study. In addition, clinical and administrative nurses have managed and participated in various evidence-based and performance improvement projects.

Increasing Patient Engagement to Reduce Assaults Among Psychiatric Inpatients

This study was conducted to answer the question: Can increased patient engagement reduce the incidence of assault among psychiatric inpatients? The incidence of violence and assault among psychiatric inpatients has been associated with multiple factors, one of which is the lack of relationship with staff. We questioned our success in this effort. Methods to predict risk for violence would allow for the introduction of preventive efforts. We hypothesized efforts to increase patient engagement would reduce the incidence of assault. This research study was a quasi-experiment with parallel group comparison. The comparison groups were a baseline patient population, prior to intervention, and the treatment population of patients after the intervention. Efforts to improve patient engagement using a valid and reliable survey tool, the Inpatient Treatment Alliance Scale (I-TAS), did not result in an increase. This suggests the staff on SMVH’s ICU is successfully engaging patients in treatment. It may be that with such a high initial I-TAS score of 83 percent, efforts to improve patient engagement could not produce a detectable change, that is, patient engagement may already be at, or near, a maximum. The reduction of assault incidents (during the research period, quarterly, and compared to the prior year) is associated with a beneficial effect from the introduction of a violence risk assessment tool (the Broset Violence Checklist).

The Effectiveness of a Psychiatric-Mental Health Nurse Residency Program on Retention

This study was initiated to answer the question: How effective is a Nurse Residency Program (NRP) in retaining new graduate nurses in a psychiatric-mental health setting? This study design was a quantitative time-sequenced comparative study of multiple cohorts of nurse graduates who were hired into the new NRP at SMVH. The study used a convenience non-probability sample of new graduate nurses at SMVH. The NRP provides social support for new graduates and enhances the employees’ organizational commitment and job satisfaction. All of the respondents were satisfied with their job and believed that the NRP offered a welcoming environment. The retention rate of new graduate nurses is 71 percent. To date, nine NRP graduates assumed management roles (Lead, Advanced Clinician, Administrative Liaison). Seventy-six percent of survey respondents used evidence three to seven times during their employment to change their practice.
Psychometric Testing of a Survey to Measure Patient Engagement in Hospitalized Patients
There are a limited number of surveys in the public domain measuring patient empowerment, engagement, and activation. The Sharp HealthCare nurse researchers propose to continue their work on developing national strategies for nursing practice related to patient engagement (PE). They see patient engagement and activation as a health reform imperative and improvement opportunity for nursing to foster patients and families to be fully engaged and active in their health and care. To fill the gap in performance measures related to PE and activation, it is critical that instruments to measure patient centered care (PCC) and PE be developed, psychometrically tested, and used to examine the impact that a PCC approach and PE interventions have on patient/family activation and other important outcomes. A strategy described in this action brief was “measurement of PE and activation (self-management), shared decision-making, and patient reported outcomes.” The authors have identified an initial set of items for the survey through a consensus process utilizing subject matter experts at Sharp HealthCare and a group of national external experts in PE. The testing of this survey is in alignment with the SHC Center of Nursing Excellence’s vision and strategy of “advancing the profession through inquiry and performance excellence” and “through new knowledge & innovation.” This study will be initiated in Spring 2017.

Leading New Knowledge — Presentations and Publications
SMVH/SMC nurses disseminated new knowledge and innovations through presentations and publications to internal and external audiences. Bolded author names are nurses at SMVH/SMC.

Internal Presentations — Poster (2013 — 2016)
Ballesta, S., Francis, J.N., Riches, L., & Thompson, M. Patient-perceived involvement & satisfaction in care via personalized whiteboards in an inpatient psychiatric unit. SMVH NRP Nurse Pinning Ceremony, August 4, 2016.
Bean, B. Nurse burnout in the mental health setting. SMVH NRP Nurse Pinning Ceremony, August 4, 2016.
Bell, T. Using the Recovery Action Plan (RAP) workbook to create a relapse prevention program (RPP) prior to patient discharge. Frontline Impact Program, Sharp Metropolitan Medical Campus, January 7, 2014.

Hansen, E. Nursing interventions for anorexia. SMVH NRP Nurse Pinning Ceremony, August 4, 2016.
Lockart, M. Outpatient nursing treatment planning initiative. Frontline Impact Program, Sharp Metropolitan Medical Campus, January 7, 2014.
Molina, S. What is your treatment team goal? Frontline Impact Program, Sharp Metropolitan Medical Campus, January 7, 2014.
Recker, A. What’s in your fridge? Sharp Metropolitan Medical Campus, 2013.
Schlecht, K. Chemical dependency phone triage. Frontline Impact Program, Sharp Metropolitan Medical Campus, January 7, 2014.

Internal Presentations — Podium (2013 — 2016)
Dorn, N. Team STEPPS closed loop communication. Sharp Mesa Vista Hospital, January 21 & 21, 2014.
Hansen, E. Nursing interventions for anorexia. SMVH NRP Nurse Pinning Ceremony, August 4, 2016.
Inkel, R. Workshop: Toward a higher standard of safety. Sharp Mesa Vista Hospital, 2016.


Suhir, E. End of life and mental illness. UCSD; Cal State University San Marcos, 2016.

Woods, L. ANCC Psychiatric Certification Nursing Professional Development class: Sharp Mesa Vista Hospital, August, 2016.


Woods, L. Unit Practice Council leadership development workshop. Sharp Mesa Vista Hospital, San Diego, CA, October, 2015.


External Presentations — Poster (2013 — 2016)


Gastelum Munoz, A. The ongoing assessment of suicide and lethality assessments using evidence-based practices and an interdisciplinary approach. APNA/California Conference, April, 2014.


Odell, C. The ongoing improvement of suicide & lethality assessments using evidence-based practices and an interdisciplinary approach. APNA California Conference, Los Angeles, CA, April 26, 2014.


External Presentations — Podium (2013 — 2016)

Armentrout, J. Engaging patients in recovery action planning via motivational interviewing. UCSD Nursing Research and EBP Conference, June, 2016.


Gastelum Munoz, A. A journey to improve nursing autonomy: Implementing shared governance in a behavioral health setting. APNA/California Conference, April, 2014.


Lambert, K. Integrating the lived experience of recovery and recovery principles into psychiatric-mental health nursing graduate and undergraduate curriculum through collaborative partnerships, innovative projects and reflective learning. APNA 29th Annual Conference, Orlando, FL, October 28-31, 2015.


Lambert, K. Using the language of recovery in the acute care setting (Keynote speaker). Mayo Clinic, 2015.


Odell, C. Leadership panel interview. APNA/California Conference, Los Angeles, CA, April 26, 2014.

Rankin, L. A journey to articulating the meaning, quality and integrity of the degree. 2015 LiveText Annual Conference, Nashville, TN, July 14, 2015.
Suhir, E. End of life and mental illness. UCSD; Cal State University San Marcos, 2016.


Publications (2013 — 2016)


Innovations in Health Information Technology and Its Benefits

Health information technology (IT) has an important role in helping nurses work safer. Over the past few years, SMVH/SMC has implemented various hospitalwide initiatives that serve to enhance the quality of care and safety provided to our patients through IT. These include the following:

• **Barcoding:** Barcoding was implemented in 2013 to reduce administration errors. In addition, in 2014, the Sharp Metropolitan Medical Campus, of which SMVH/SMC is part, implemented a comprehensive Medication Administration Error Reduction Initiative with aims of identifying leading distractions/interruptions during medication administration; recognizing the need for a culture change for patient safety during medication administration; recognizing that ALL steps of medication administration are “Critical Safety Tasks;” describing how all disciplines play a role in medication safety; and incorporating mindfulness into daily practice.

• **Electronic Health Record (EHR):** Cerner was implemented in all inpatient areas in 2010 to replace the paper medical record. In July 2015, the Ambulatory Care Cerner product was implemented in all outpatient areas.

• **Elopement Prevention Technologies (Phones):** As part of multi-modal effort to reduce elopements from locked units, new phones were purchased in 2016 and are being used to assist in locating patients who have eloped.

• **Link System (Panic Buttons):** Since safety in the workplace is a priority, “Code Green Alert” was implemented in 2016. The tool is used to call for help without drawing attention to the user. It can be activated by simply pressing the panic buttons located on identified computers and/or wall mounted devices in designated consult/group rooms. In all, 100 panic buttons are now available to staff at SMVH.

• **Marbella:** Marbella, implemented in 2016, is a clinical performance management solution for collecting and viewing data in real time. It allows clinicians to securely record and track clinical and organizational data to analyze performance and improve outcomes. It is used to measure basic process management/improvement (e.g., rounding, surveys, Root Cause Analysis action plan measurements); compliance assessment (e.g., audits, The Joint Commission tracer methodology); deployment assessment (e.g., Institute of Healthcare Improvement [IHI] Always Events® framework); and knowledge transfer assessment (e.g., behavior/practice change measurement).

• **Interpreter iPads:** Access to interpreter services is an important component of quality care. In addition to in-house and on-call interpreter services, in 2016, SMVH purchased and made available iPads to serve as virtual interpreters.

• **Real Learning for Solutions:** Real Learning (RL) was implemented in 2015 and is Sharp HealthCare’s online patient safety incident reporting system. Users can report patient safety events or hazardous conditions that could impact patient safety. Staff report events that reach the patient as well as near misses/great catches and events that could have caused harm but were intercepted before reaching the patient. All RL events at Sharp HealthCare can be reported anonymously or with contact information.

• **Inpatient Unit Security Cameras:** Outmoded security cameras were replaced on all of the inpatient units in 2014. Monitoring screens are located in central nurses’ stations for all staff to use to monitor the safety and security of their therapeutic milieu.

• **TeleTracking:** A bed inventory and management system was implemented in 2013. The system supports the timely admission, transfer and discharge of patients.

• **VitalsLink:** VitalsLink is a product that reduces the process steps in taking and recording vital signs. Vital signs captured by the VitalsLink product communicates wirelessly to immediately record data in Cerner. It was implemented in 2014.

Acknowledgements

Our sincere thanks to all who contributed to this report.

Angela Behke, Jennifer Chapman, Connie Dupuette, Karen Flowers, Steven George, Julie Herford, Ameen Kouchei, Richard Loving, Emilia Macias, Beth Redman, Stacey Robinson, Mary Kay Shibley, Chandra Vincent, Marisol Vizcarra


8Ibid.