Rising to the Challenge of the Changing Healthcare Landscape

Message From Corporate Vice President and Chief Nursing Officer
Deborah S. Mulvihill, R.N.

Nursing has become more complex in ways we never could have imagined. Forty years ago, nurses were primarily direct care providers and managers. Patients were hospitalized much longer and were less acutely ill. The medical-surgical units of yesterday are today’s critical care units. The Affordable Care Act has changed how healthcare is delivered, resulting in opportunities to redefine and expand the traditional roles of nurses.

Just as the healthcare delivery system is undergoing a transformation, nursing roles are evolving to decrease the fragmentation of care. Nurses are instrumental in redesigning processes to improve care transitions between different locations or different levels of care within the same location. The focus on providing quality care with excellent clinical outcomes must be combined with efforts to reduce preventable readmissions and decrease the average length of stay.

Transition from hospital to home is especially challenging for patients with chronic diseases. What is the best way to ensure that a patient understands the plan of care and steps to take upon discharge? How do we facilitate a patient’s transition from the hospital to the physician’s office and vice versa? What is the best way to effectively connect the patient/family/caregiver to community resources? How can we follow up with patients to identify early warning signs of an adverse event? It is time to redesign care coordination, focusing both on interacting with patients and families at the facility and overseeing and monitoring patient populations in the community. Patients and families must be at the center of care in every interaction and process.

Nurses throughout Baptist Health are rising to the challenge of this changing healthcare landscape. In this issue of Nursing Excellence, you will read about the dynamic, specialized role of the infection control practitioner, the unique role of the quality core measure nurse and the expanding role of the advanced practice registered nurse in hospitals, outpatient settings and in primary care. These nurses improve patient safety, enhance the patient experience and reduce the cost of care.

You’ll also be inspired by nurses who strive to optimize performance by improving the health of the population they serve and those who positively impact the delivery of care and patient satisfaction through nurse-driven performance improvement initiatives. In times of crisis, nursing is at the forefront. Our Profile of Success highlights Jean Arias, R.N., who leads the Baptist Health Emergency Preparedness and Security Department and ensures that we are ready for any emergency.

Over the years, nurses have reinvented themselves, and new career pathways have evolved. Baptist Health nurses not only are expert clinicians, they are expert educators, managers, navigators, entrepreneurs and innovators. We want Baptist Health to be nationally known for the professional practice of nursing; however, regardless of what the future brings, we always will remain steadfast in our commitment to providing exceptional patient care.
Meet Barbara Russell, R.N.

Barbara Russell, R.N., is a name known throughout Baptist Health and the international nursing community. She has been with Baptist Health for 48 years and currently serves as director of Infection Control Services at Baptist Hospital. Ms. Russell has specialized in infection control for 35 years and is nationally certified. She is a member of the Baptist Health Emergency Preparedness Council, chairs the Clinical Ethics Committee of the Miami-Dade Emergency Preparedness Coalition and is vice president of the Florida Nurses Association (FNA).

Ms. Russell’s career has been filled with high honors and rich experiences. The FNA recently inducted her into its prestigious Hall of Fame. In 1988, she received a Certificate of Commendation from the Department of Health and Human Services for her AIDS work. She chaired both the FNA and American Nurses Association (ANA) HIV Task Forces and represented the ANA on the International Council of Nurses HIV Task Force.

Ms. Russell has testified before OSHA, the CDC, Florida legislators and three U.S. congressional subcommittees on behalf of healthcare worker safety. She also has authored numerous articles for professional publications.

Ms. Russell currently chairs the FNA’s Task Force on Ebola. As a valuable member of the Baptist Health team who helped us prepare to effectively handle any potential Ebola virus cases, she made us feel informed, competent and safe. We are so fortunate to have Ms. Russell working at our side.

Infection control and prevention (ICP), an arm of epidemiology, focuses on the prevention and management of healthcare-associated infections. In these times, never before has the infection control and prevention nurse been more important.

ICP nurses identify, prevent and control outbreaks of infection in healthcare settings and the community. They work to stop infections from spreading from patient to patient, patient to staff, staff to staff and staff to patients. ICP nurses monitor and investigate suspected or definite cases of infection through surveillance and outbreak management. They ensure that cleaning, disinfection, sterilization, hand hygiene and the selection of personal protective equipment are top priorities.

The knowledge and skills required to be an ICP nurse are diverse and specialized. Knowledge of microbiology, epidemiology, infectious diseases, sterilization and disinfection, medication, vaccine and antibiotic usage and regulatory requirements are vital for success. Nurses considering a career in infection control and prevention should earn a Bachelor of Science degree at a minimum. However, a Master of Science degree is preferred. Additionally, nurses can take the national Board certification examination to become certified in infection control.

Our ICP nurses provide direction for isolation practice and oversee post-exposure prophylaxis. They stay informed and diligently follow the guidelines that come from the county and state health departments and the U.S. Centers for Disease Control and Prevention. During the recent Ebola crisis at U.S. hospitals, our ICP nurses and Emergency Preparedness team members worked tirelessly to inform, teach and protect us all.

As a direct result of our ICP nurses, our patients, staff and the community are safer. Infection control and prevention is a dynamic nursing specialization that will continue to be in strong demand.
Healthcare has become increasingly focused on tracking quality outcomes and creating transparency within process-of-care standards to achieve hospital compliance. In 2003, the Centers for Medicare and Medicaid Services (CMS) realized that practitioners and institutions were being reimbursed for patient care that was evidence-based. CMS decided to hold participants accountable by implementing specific guidelines. Hospitals that did not meet these guidelines, indicating that quality care was not being provided, would receive lower reimbursement. Core measures were born. Because The Joint Commission (TJC) standards also are based on CMS guidelines, healthcare providers must work together to follow and meet CMS and TJC guidelines in order to improve care performance measurements.

In 2005, South Miami Hospital leadership approved the formation of a Quality (Core) Measures department, which led to the inauguration of a new role — the quality (core) measure nurse. The department started with two nurses and grew to 10 nurses in 2014 to meet the additional core measure standards. These nurses have extensive experience in critical care and other specialty areas associated with core measure standards.

Quality measure nurses at South Miami Hospital have a unique role. They serve as dedicated resources and experts for educating physicians, nurses and other allied healthcare professionals, auditing and concurrent monitoring for compliance of CMS guidelines and standards.

Thanks to leadership support and the collaborative efforts of the quality measure nurses, staff nurses, physicians and members of the interdisciplinary team, South Miami Hospital has been recognized by The Joint Commission as a Top Performer in Key Quality Indicators in 2010, 2012 and 2013. Our 2013 composite score was 99.7 percent.

In addition, Magnet-designated hospitals and those applying for designation are now required to submit nurse-sensitive clinical indicators from the core measure sets in support of nursing’s role in maintaining quality outcomes. Therefore, the role of the quality measure nurse in the hospital setting not only is beneficial, it is essential for patient care delivery, quality and safety.

Core Measure Nurse Guides Quality Results

Elective delivery is one of five measures that make up The Joint Commission’s Perinatal Care core measure set. The measure aims to reduce the number of non-medically indicated elective deliveries between 37 and 39 weeks of gestation, which in turn decreases neonatal morbidity and mortality as well as healthcare costs.

In order to achieve the national benchmark, Cynthia Shapiro, R.N., a highly experienced, dedicated core measure nurse, was chosen to lead the efforts and collaborate with physicians and staff. In July 2013, the multidisciplinary team implemented processes for education and data collection for elective delivery. The hospital also joined the Florida Perinatal Quality Collaborative, whose purpose is to improve Florida’s maternal and infant health outcomes through the delivery of evidence-based perinatal care.

In one year, the hospital’s elective delivery rate went from 10 percent, compared to a national top 10 percent benchmark of 20 percent, to 0 percent, achieving the national top 10 percent benchmark. South Miami Hospital is committed to maintaining this national quality measure to ensure the best outcomes for mothers and their babies.
Doctors Hospital

Message From Chief Nursing Officer Diane Amado-Tate, R.N.

Healthcare workforce experts report that the number of nurse practitioners has increased significantly over the past 10 years, with an estimated 192,000 currently practicing in the U.S. Their special skills are being utilized in hospitals, outpatient settings and in the area of primary care. New approaches to delivering patient-centered, high-quality, efficient care are being explored as the demands for medical care for our aging population continue to rise.

The current shortage of primary care physicians in the country has led to new opportunities for nurse practitioners. Currently, an estimated 52 percent of nurse practitioners practice in primary care, and this number is expected to increase. In hospitals, nurse practitioners function as specialized team members, providing support to physicians and nurses.

Today’s healthcare challenges demand a stronger provider workforce that is flexible to emerging models and innovation. Nurse practitioners bring a different skill set to the care team and can provide treatment to patients who are at high risk or require additional support. Now, more than ever, nurse practitioners are being recognized as valued members of the healthcare team.

At Doctors Hospital, our nurse practitioners work collaboratively with other healthcare providers to deliver care and apply evidence-based practices to a diverse population of patients. Their interventions help improve patient satisfaction and safety, decrease patient length of stay and increase physician and nurse satisfaction.

Our highly skilled advanced practice nurses bring their specialized knowledge in four areas to meet the needs of patients and families directly at the point of care. (See story at left.) Their value has been measured in our exceptional patient outcomes, and I am confident that we will continue to see their effectiveness as the healthcare needs of our nation evolve.

Advancing Their Practice, Impacting Patient Care and Outcomes

Meet the Doctors Hospital advanced registered nurse practitioners, left to right: Ashley Poster, ARNP, Nilda Gonzalez, ARNP, Margarita Hernandez, ARNP, and Katty Guevara, ARNP. They are recognized for providing high-quality care that results in positive outcomes for patients and their families. From admission to discharge, our ARNPs address specific patient needs in the specialty areas of orthopedics, cardiac, palliative care and wound care.

Historically, the demographics of our population have been marked by aging and chronic illness. “We’ve made an impact by improving communication with patients, engaging them in their care plan and anticipating their needs to prevent complications and readmissions,” Ms. Gonzalez said. “As a result of our efforts, patient readmissions have consistently declined.”

ARNPs will become more crucial to healthcare delivery as more Americans gain access to broader services through healthcare reform efforts. Trends indicate that the focus in the future will shift to wellness and prevention. “We are addressing this growing trend through patient education, collaboration with other healthcare providers and partnerships with community resources,” said Ms. Guevara.

Doctors Hospital’s ARNPs continue to advance their practice in order to meet the expanding healthcare needs of our patients, families and community.

Diane Amado-Tate, R.N.
As the healthcare model evolves, management of the disease process will move from acute care episodes to a broader model of partnership between physicians, healthcare organizations and insurance companies. Emphasis will be on safe, efficient and low-cost care in the hospital setting, and nurses certainly will impact these areas.

Nurse-led changes impacted the delivery of care in our Emergency Department. In 2014, patient volume in the department was at 97,000, of which 27,000 patients were children. With nine beds in the department, the wait time to see a physician, physician assistant or advanced practice nurse was more than 70 minutes and the rate of patients who left without being seen (LWBS) was well above the national benchmark.

Our nurses were not satisfied with the status quo and potential safety issues and formed a Pediatric Rapid Care Task Force. This group’s goal was to redesign the workflow to improve throughput, reduce door-to-provider time to less than 60 minutes and decrease the LWBS rate to meet the national benchmark.

The new rapid care process allows for patients with minor illnesses to be triaged, assessed and treated in a shorter time period in a separate location in the Pediatric Emergency Department. Rooms within the unit are used for higher acuity children who require more extensive evaluation and treatment.

The task force piloted this process, noted the improvements and requested permanent changes, which were approved by the senior executive team. Three full-time employees were added and additional triage education was provided to increase the number of nurses available for triage.

The Rapid Care Task Force has reached its goals. Time-to-provider has fallen to 30 to 40 minutes — well below the 60-minute goal, and LWBS has fallen to 1 to 2 percent, compared to the national benchmark of 3 percent.
Cheryl Cottrell, R.N.


PI nurses report outcomes at the Quality and Patient Safety Committee meeting and include updates on the Pillar boards and monthly newsletters. Quality improvement plans such as Teams Refocus Imagine and Measure (TRIM) are implemented when data reveals an opportunity for improvement. An interdisciplinary team analyzes current practices and brainstorms ideas. Plan-Do-Study-Act is then implemented and monitored for outcomes. The TRIM model is being used to improve our Emergency Department throughput.

To participate in the Florida Professional Excellence Program, Mariners Hospital leaders have defined measures that show we provide high-quality care. In nursing, these are the National Data Quality Nursing Improvement measures.

As a Critical Access Hospital, we report five measure sets to The Joint Commission. Mariners Hospital collects CMS quality measures even though as a CAH, it is not mandated. We also report unique measures in the MBQIP, which was implemented in 2010 as a key quality improvement activity within the Medicare Rural Hospital Flexibility grant program. Two new MBQIP measure sets are the Emergency Outpatient Transfer Communication Measure, which monitors pre-transfer communication between the two Emergency Departments, and Medication Review, which ensures that a pharmacist reviews all computerized physician order entries within 24 hours.

We are eager to participate in this national study to ensure that we continue to exceed benchmarks currently being established for Critical Access Hospitals.

Mariners Hospital’s Emergency Department patient satisfaction scores in 2014 rose above the 90th percentile, and several factors contributed to this improved performance. Emergency technicians were hired to improve patient flow and throughput. They complete IV starts, phlebotomy, wound care and orthopedic splinting, allowing nurses to spend more one-on-one time with patients during assessments, medication administration and discharge planning and education. In turn, patients value the attention they receive from a highly skilled multidisciplinary team.

Proficient patient rounding also has improved patient satisfaction. Nurses keep patients informed, welcome family and friends at the bedside and provide them comfort, and manage physicians and staff involved in patient care.

A culture of recognition contributes to the unit’s success. Peers offer each other feedback, and leadership shares successes in weekly emails and during department meetings. The resulting cohesive work environment energizes employees and motivates them to provide excellent service to patients seeking emergent care.

Members of the Emergency Department include (first row, left to right): Marcel Giguere, R.N., Martha Sanders, Diane Hill, R.N., and Mindy Laack, R.N. Second row: Sylvia Gonzalez, R.N., Dawn Hire, MSN, and Thomas Morrison, M.D.
From the bedside to the boardroom, across the continuum of care and the myriad of nursing care positions, impacting the patient experience is, and should always be, a nurse’s greatest role.

West Kendall Baptist Hospital’s culture of patient- and family-centered care ensures an excellent patient experience — always. Following an orientation, every new staff member signs a commitment statement that reflects our dedication to compassionate, safe, quality care. It includes a promise to be:

- **Available**: Help those who need care or assistance whenever the opportunity exists.
- **Caring**: Treat all people with respect, compassion and dignity.
- **Considerate**: Anticipate patients’ choices, needs and expectations; then respond appropriately.
- **Innovative**: Work in interdisciplinary teams to promote learning and the improvement of patient care.
- **Partners**: Empower, involve, inform and educate patients and families.
- **Safe**: Protect patients from possible harm by following established safety standards.

Our nurses practice a model of “always.” This includes hand hygiene before and after each patient contact; 100 percent compliance of universal protocol prior to an interventional procedure or surgery; evidence-based practices to achieve better outcomes of care; core measure protocols/order sets; Studer evidence-based practices, leader and patient rounding; and care that is always framed from our Professional Practice Model.

Our nurses provide an outstanding patient experience and our excellent outcomes have been rewarded with Magnet designation from the American Nurses Credentialing Center. Notable service and quality results highlighted on our successful Magnet survey include:

- Patient satisfaction at or above the 90th percentile in inpatient and emergency services.
- National Database of Nursing Quality Indicators (NDNQI) at or above the benchmark the majority of the time.
- Pain management satisfaction above the benchmark during the entire two-year Magnet period.
- National Quality Measures (core measures) in the top decile, and at 100 percent for three quarters.
- Patient length-of-stay (LOS) consistently below the case-mix index adjusted LOS benchmark.
- Heart failure and pneumonia readmission rates below the benchmark the majority of the time.

West Kendall Baptist Hospital nurses are committed to providing high-quality service and compassionate care and proud to be a new Magnet hospital!
An increased focus on biological emergency preparedness and patient safety places infection control practitioners (ICPs) at a pivotal point in the history of their profession. Their role has expanded over the years and will continue to grow. In 2005, Baptist Outpatient Services had 16 centers in Miami-Dade County and one ICP. Today, the organization has 42 centers throughout South Florida and four ICPs. This team is actively involved in infection prevention, emergency preparedness and survey readiness at all Baptist Outpatient Services sites.

The focus of infection control in the outpatient setting shifts from management and containment of hospital-acquired infections in the hospital setting to prevention of new infections. ICPs are actively involved in planning, developing, directing, implementing and evaluating infection prevention and control activities. They monitor newly diagnosed patients for possible outbreaks, and communicate and collaborate with the local chapter of the Association for Professionals in Infection Control and Epidemiology to identify community trends or outbreaks.

Our infection control practitioners are involved in the development of emergency management plans to help ensure that our facilities are prepared for any type of crisis or disaster. Their valuable input about supply levels, triage process and staffing requirements during an emergency is included in the annual Hazards Vulnerability Assessment plans and disaster drills for Baptist Health.

Infection control practitioners participate in safety rounds at Baptist Outpatient facilities. During these rounds, ICPs survey staff, collect data and educate employees on infection control processes. They also offer our team members an annual one-hour education course on the topics of bloodborne pathogens and Occupational Safety and Health Administration standards.

Our infection control practitioners are valuable members of the safety team. They work with leadership, staff, physicians, engineers, architects and the community on infection control practices. Their expertise benefits patients, families and staff at all Baptist Health facilities as well as our community.

Profile of Best Practice in Infection Control

Baptist Outpatient Services looks to its infection control practitioners for guidance during a crisis — and every day. Lis Estevez, R.N., collaborates with fellow infection control practitioners, physicians, leaders and employees to ensure high standards of infection control and patient safety. She reviews advisories from the Florida Department of Health, Centers for Disease Control and Prevention and World Health Organization, and shares best practices.

Ms. Estevez has a Bachelor of Science in biology and a master’s degree in public health epidemiology. In 2007, she became a registered nurse and expanded her knowledge of the clinical aspects that impact infection prevention. She also is a certified Outreach Occupational Safety and Health Agency trainer, which empowers her to train Baptist Health engineers and architects.

Ms. Estevez enjoys the opportunities she has to educate the public. “The outpatient setting provides me with a link to the community,” she explained. “I’ve worked with people at local businesses, schools and camps to teach them how to prevent the spread of influenza.”
Versant RN Residency Program Receives ANCC Accreditation

Baptist Health's Versant RN Residency program is the first nursing residency program in the world to receive accreditation from the American Nurses Credentialing Center (ANCC). The ANCC Practice Transition Accreditation Program sets the global standard for hospital residency programs that transition registered nurses and advanced practice registered nurses into new practice settings.

“Accreditation from the ANCC confirms that our program is one of the best out there,” said Yvonne Brookes, R.N., director of clinical learning. “We are competitive at Baptist Health, so it was natural for us to pursue this endorsement.”

The accreditation process comprised an extensive application and intense survey visits that included interviews with residents, preceptors, nurse managers and chief nursing officers, says Marjorie Lima, R.N., manager of the program.

“During the site visits, our nurses spoke from the heart and validated the content of our application,” Ms. Lima said. “Surveyors were impressed by the fact that although Baptist Health is a large system, the support and resources that we provide nurses makes us seem small.”

The Versant program was launched in August 2007 and is now in its 18th cohort. The curriculum provides newly licensed nurses with the support, instruction and guidance necessary to develop the critical thinking and clinical skills that are essential to safe, high-quality nursing care. As a result, nursing turnover has decreased and nursing satisfaction and performance have increased.

“We certainly are proud of our program and our people,” said Deborah Mulvihill, R.N., corporate vice president and chief nursing officer. “This accreditation sends a message to nurses that Baptist Health will support them, and to patients and families that they can expect the very best level of care.”

Nursing Notes
Simulation: Transforming Knowledge Into Practice

As nurses’ roles expand to meet the needs of the changing healthcare system, simulation will continue to be an important aspect of the nursing education curriculum at Baptist Health. The use of simulation as a teaching strategy contributes to patient safety and optimizes outcomes of care, providing nurses with opportunities to experience clinical scenarios within a safe, supervised setting without fear of harm to a patient, says Yvonne Brookes, R.N., director of clinical learning.

“As an adjunct to clinical experience, simulation helps practitioners improve their knowledge, skills and expertise,” said Ms. Brookes. “For novice nurses, simulation bridges the gap to practical application. And for seasoned nurses, ongoing education facilitates growth, evaluates competencies and promotes patient safety.”

In the simulation lab, nurses practice crisis management by reacting to realistic and often stressful conditions, including high-risk, low-frequency clinical scenarios, explains Marrice King, MSN, a member of the clinical learning team.

The simulation lab is equipped with computer-animated mannequins that are programmed to replicate life-threatening medical emergencies. Before the simulation, participants review best practices. After the exercise, immediate video replay and debriefing give nurses the ability to reflect on successes and opportunities for improvement.

“The simulation lab provides freedom for learning,” said Nelson Pena, B.S. “It’s one of the few places where mistakes are welcome — and that’s because people learn from their mistakes.”

In the simulation lab are (left to right): Christine High, R.N., Denise Disney, R.N., Yvonne Brookes, R.N., Jill Simon, R.N., and John Mouw.

Nurses learn crisis management and critical thinking skills, improve competencies, experience teamwork, improve communication skills, learn to delegate and gain experience in the psychosocial aspects of patient care, says Denise Haughton, MSN.

Nurses learn by doing, Debbie Smith, MSN, explains. “Studies show that when we’re told how to do something, we remember 10 percent of the information. But when we do something, we remember 80 percent,” she explained.

The state-of-the-art Baptist Health Simulation Center being built in the new Education and Conference Center on the Baptist Hospital campus will ensure that nurses are provided with optimal educational experiences.
Emergency Preparedness and Security Director Jean Arias, R.N., leads the six-member department that ensures Baptist Health has the resources, training and equipment necessary to be ready for any crisis situation, including the recent Ebola outbreak that threatened U.S. hospitals.

Ms. Arias chairs Baptist Health’s Emergency Preparedness Council and Security Council. During a disaster, she coordinates the organization’s response efforts to ensure a standardized approach to disaster response and recovery. Reaching out into the community, she also serves as co-chair of the Miami-Dade County Healthcare Coalition on Emergency Preparedness.

Hurricanes and influenza outbreaks have caused Baptist Health to have special preparation expertise. The Emergency Preparedness and Security team works year-round, holding educational classes and conducting systemwide drills that test readiness. As a result of these efforts, Baptist Health was prepared to safely and effectively handle any potential Ebola virus cases and protect patients, employees and the community, says Ms. Arias.

“More than 3,000 staff members were trained to properly don and doff personal protective equipment to promote the safety of healthcare workers while caring for an Ebola patient,” Ms. Arias said. “We proved to be ready when suspected Ebola patients presented at our facilities. Our staff responded in a calm and expert manner, and the patients were treated and managed appropriately.”

Ms. Arias has been guiding emergency preparedness at Baptist Health since 2004. She started with an administrative assistant. Today, she coordinates the Emergency Response Team comprising 36 highly trained members and collaborates with leaders across the system to gain partnership at all levels.

Ms. Arias joined Baptist Health in 1992, bringing 30 years of nursing experience in critical care and home care. Her rich background includes developing the first psychiatric and infusion therapy home-care programs in South Florida. She also holds a Master of Science degree in marriage and family therapy — a degree that helps her connect with people and build teams, Ms. Arias says.

Ms. Arias served as director of Home Care for South Miami Hospital and was promoted to direct the systemwide program. She also managed Baptist Health’s helicopter service, which provided transportation to patients traveling from southern Florida and the Keys, and served as chief nursing officer of an expanding Baptist Outpatient Services.

The Minnesota native has three children who also are in the healthcare field and two grandchildren. She is a talented singer with fond memories of performing classical songs during her college days. And surprisingly, she is a single-engine VFR pilot. “My husband was a pilot, and I decided that if I was going to fly with him, I needed to know how to fly the plane,” Ms. Arias explained. “When we flew over South Florida, I looked down on the homes below and wondered which ones we had been in with our Home Care service and how many lives we had impacted.”

Her impact certainly has been far-reaching. And as the role and influence of nurses on the front line of patient care increases, Ms. Arias is determined to promote excellence in nursing. “I’m honored and humbled to have this opportunity to make a difference,” she said.
Nursing Achievements
Presentations, Publications and Research

Presentations:
Susan Aguilera, ARNP
A New Role in Nursing: Unit-based Manager, Patient Safety and Quality, AWHONN Annual Conference, Orlando, June 2014.

Maykel Aguirre, R.N., From Novice to Leader: Promoting Leadership


Carolyn Lindgren, Ph.D., R.N., Acuity-based Care and Research Practice Change, Alternate Level of Care Conference, Ontario, Canada.

David Lopez, R.N., Sustaining Organizational Capacity; Paying It Forward With Effective Mentorship, 10th Annual Versant Client Conference, Atlanta, Aug. Nov. 2014.

Maria Victoria Lopez-Beecham, M.D., Melody McNally, ARNP. Sim WARS, 2014 National Patient Safety Foundation Congress, Miami, October 2014.


Research:

Education and Certifications:
ARNP • Tihina Aiello, ARNP, Veronica Bellumini, ARNP, Amy Chu, ARNP, Maria Correa, ARNP, Milana DeCortada, ARNP, Gisselle Garcia, ARNP, Arnita Eladro, ARNP, Angela Laguna, ARNP, Armina Luccas, ARNP, Kelly McDonough, ARNP, Joseph Perna, ARNP, Sandra Segura, ARNP, Michelle Thomas, ARNP, Kelly Ulio, ARNP, Adrian Ulmo, ARNP, Francis Wahlewitz, ARNP.


Certified Professional in Healthcare Quality (CPHQ) • Susan Aguilera, ARNP., Larissa Vega, R.N.

Nurse Executive — Board Certified (NE-BC) • Heidi Stein, R.N., Linda Levine, R.N.

Nurse Executive, Advanced — Board Certified (NEA-BC) • Ann Marie Allen, MSN, Heather Pierce, MSN, Jan Weatherspoon, MSN.

Progressive Care Certified Nurse (PCCN) • Shangyu Liu, MSN, Ingrid Santamaria, R.N., Natasha Wilson, MSN.

Stoke Certified Registered Nurse (SCRN) • Adriana Hurley, R.N., Jessica Sanabria, R.N.

Professional Awards/Recognition

Vernon Bartholomew, MSN, named South Miami Hospital Leader of the Year.


Maria Cabrera, MSN, Amy Roberts, R.N., elected Board member of AGNP Miami-Dade Chapter.

Olivia Coccia, R.N., Robert Taylor, MSN, named West Kendall Baptist Hospital Employee of the Month.

Jocelyn Dampil, R.N., Fatima Garcia, R.N., named West Kendall Baptist Hospital DASY Extraordinary Nurse Honorees.

Griselle Diaz, MSN, named West Kendall Baptist Hospital Leader of the Year 2014.

Griselle Diaz, MSN, April Parchment, R.N., Jennifer Taylor, MSN, named West Kendall Baptist Hospital DASY Extraordinary Nurse Honorees.

Shakira Henderson, DNP, received the DASY Faculty Award.

Miami Hurtado, R.N., named South Miami Hospital Outstanding Nurse Educator of the Year.

Marrice King, MSN, awarded second place in essay contest at 10th Annual Versant Client Conference, Arlington, Va., Nov. 2014.

Deanne Leach, R.N., named South Miami Hospital 4 Paxton Nurse of the Year.

Becky Montelesio-King, DNP, elected treasurer of Florida Organization of Nurse Executives.

Sandra Nadel, R.N., named president of Oncology R.N. Society.

Aryl Rego, R.N., elected Board member of Miami-Dade Association for Professionals in Infection Control.

Barbara Russell, R.N., Inducted into the Florida Nurses Association Hall of Fame, and named South Florida Nurse of the Year 2014.

Geri Schimmel, R.N., serves as ASHRM faculty member and taught the Patient Safety Certification Program at the 2014 AHRQ Annual Conference and Exhibition, Oct. 2014.