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NEW KNOWLEDGE AND INNOVATIONS

UC San Diego Nursing Research and Evidence-Based Practice



Five Magnet
Componets

Transformational Leadership

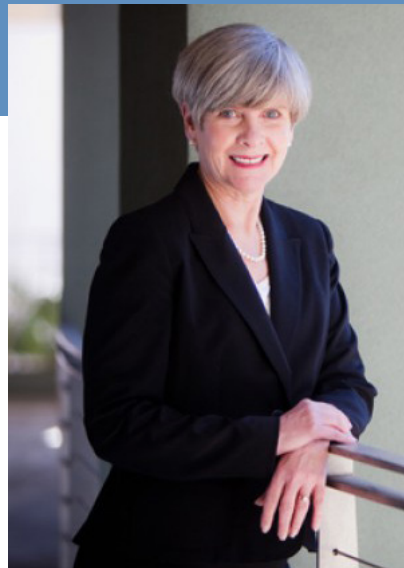
Structural Empowerment

Exemplary Professional Practice

New Knowledge and Innovation

Empirical Outcomes

Shared Governance committee membership is a great way to become personally involved in the Magnet journey and to help shape the future of nursing at UCSD. For more information go to our nursing website at [http:// medinfo.ucsd.edu/nursing/ committees/](http://medinfo.ucsd.edu/nursing/committees/) to learn about committee membership opportunities.



Message from the
The Chief Clinical Officer

This issue of the UC San Diego Health System nursing journal highlights how our nurses generate and disseminate new knowledge. We have a lot to be proud of in this regard as UC San Diego Health System Magnet nurses. I applaud our many nurses who are dedicated to life-long learning, and their contributions to nursing. We have recorded over 50 research projects since our Magnet designation, and over 200 publications and presentations. I strongly encourage nurses to participate in research and develop their own investigations to move our practice forward.

Reflecting back on how fortunate we are to work in an environment that supports this spirit of inquiry, I came to the conclusion that I should personally lead by example. This year, with the changes in our professional practice model, adoption of the Joanne Duffy Quality Caring Model, and emphasis on improving the patient experience, I have decided to become a UC San Diego Health System nurse researcher to help solidify these changes in our nursing practice. The new practice model focuses on self-care and the development of caring relationships. The Quality Caring Model informs us that feeling cared for is essential for health promotion. People are more likely to engage in self-care activities if they feel cared for by others.

It is clear that nurses are ready for this change. An unprecedented 86% of you engaged in the on-line learning about the changes in the practice model, and nearly 400 of you provided direct feedback and affirmation that the changes, with renewed attention to self-care and caring, will better meet your needs as nurses. I read each and every one of your comments submitted to me on the survey and also in the RN satisfaction survey. I understand and accept that we have room for improvement in developing caring practices at all levels in the organization; including at the leadership level. The practice model is beautiful on paper, but now we all have to do the hard work to make it come alive.

How is nursing research going to help to make this happen? We need to understand at a deeper level what it means and what is required to feel cared for by others. What contextual features promote caring behaviors that result in the feeling cared for emotion? What workplace conditions lead to the feeling cared for emotion? I have worked with Judy Davidson to build an interprofessional team, with a variety of skills, to explore this phenomenon: the human emotion of feeling cared for by others. Research is best performed in a team, building on the skills of others. Catie Madani has completed her PhD in nursing and is guiding us on the methodology for the study. We will be conducting a survey of patients, families, staff and physicians and then analyzing the data for the answer to our research questions. The very unique part of this project is that after data analysis, we will be soliciting a volunteer group of artists to transform the findings into a variety of art forms, which may include poems and visual art. Those art forms will be used for educational purposes to disseminate our research findings.

I have joined the ranks of UC San Diego Health System nurse researchers with pride, and with hopes that this effort will shed new light on strategies to promote caring between each other, our healthcare team colleagues, and the patients and families we serve.

Sincerely,

MARGARITA BAGGETT, MSN, RN
CHIEF CLINICAL OFFICER

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UCSD Image of Nursing Council

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Nursing Research and Evidence-Based Practice Council

By Laura Dibsie, MSN, RN, CCRN, CNS

When Shared Governance was in its formative stages at UC San Diego, there were many people invited to participate in the process and contribute to the future of Nursing within the organization. Staff in the Nursing Education, Development and Research (EDR) Department felt strongly about bringing their experience, knowledge, and expertise to Shared Governance as well. EDR was asked to spearhead a Research Council and to take responsibility for facilitating the incorporation of evidence-based practice into the Department of Nursing.

The mission and activities of the Council were expected to align with the Magnet® component of New Knowledge, Innovations and Improvement. A few of the specific activities the manual indicates Magnet®-recognized organizations will perform are:

- Integrate evidence-based practice (EBP) and research into clinical processes.

- Educate nurses about EBP and research.
 - Enable nurses to explore safest and best practices for patients.
 - Generate new knowledge.
 - Evaluate and use published research in practice.
 - Disseminate knowledge gained to the community of nurses (internally and externally).
- (American Nurses Credentialing Center [ANCC], 2014, p. 55)

It did not take long to realize that Nursing Research and Evidence-Based Practice was at the root of many aspects of Nursing Shared Governance. The image representing the original Shared Governance model, with its overlapping circles of influence, was soon modified. The new image reflected a foundation beneath the entire Shared Governance model of Nursing Research and Evidence-Based Practice, thus reflecting that all the work within each of the Councils should, and could, have evidence-based practice as its base. The



Laura G. Dibsie, MSN, RN, CCRN, CNS is currently the chair of the Nursing Research and Evidence-based Practice Council. She began her nursing career while in high school and took the opportunity to become a volunteer at the local community hospital. Upon being introduced to the Chair of the Health Sciences Department at University of Southern California (USC), she decided to submit an application to the newly opened School of Nursing and was accepted into the 3rd graduating class. After having grown up in the LA area, Laura decided to begin her working career in San Diego and was offered a new graduate position at Mercy Hospital.

Nursing Research and EBP Council was thought to be a source of support, and a resource to find information necessary to make enlightened decisions.

The Council was originally given several important responsibilities:

- Promote concepts of evidence-based practice and ensure staff recognize the concepts within their practice.
- Provide education to staff about evidence-based practice and nursing

research.

- Review projects and mentor staff pursuing CNIII advancement.
- Support nursing research within the Department of Nursing.

Just a few months ago, Council members reviewed, updated, and approved the bylaws which include the following mission statement and purpose. The bylaws were also submitted to the Nursing Cabinet.

Since the beginning of the Council, and under the initial leadership of Dr.

Caroline Brown, policies and nursing clinical practice guidelines have been closely linked to the latest nursing evidence. Under Dr. Brown's leadership, UC San Diego collaborated with nursing leaders within the community and formed the San Diego Evidence-Based Practice Institute (EBPI). In this 9-month course, staff nurse fellows with their advanced practice mentors, learn about each stage of an EBP change project and receive education and resources needed to take an idea

from 'asking a question' through implementation, to adoption of the change. It is from this collaborative venture that the UC San Diego Nursing Evidence-Based Practice model – the 8 A's – was developed and is now utilized by the Department of Nursing as our model for EBP and change.

UC San Diego remains involved in the EBPI through our current Nursing Research and EBP Liaison, Dr. Judy Davidson, serving on the faculty. Additionally, several staff nurses and

Mission Statement

The UC San Diego Nursing Research and Evidence-Based Practice Council:

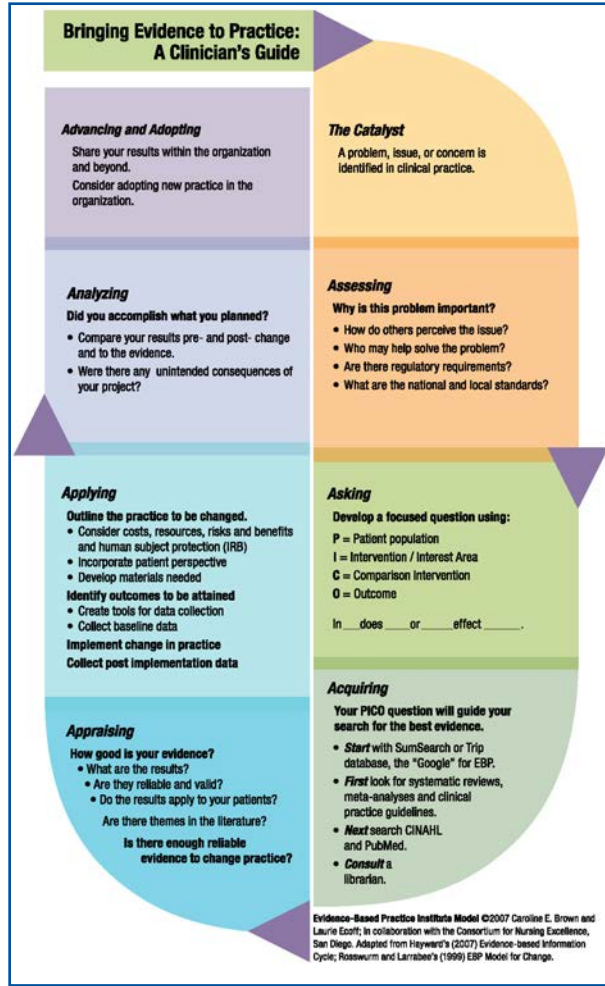
- Exists to ignite the spirit of inquiry and create, nurture, and sustain a culture of evidence-based nursing practice.
- Endeavor to improve patient outcomes by promoting, facilitating, and conducting nursing research studies, as well as develop evidence-based practice changes, quality improvement and innovations.
- Foster an understanding of principles of evidence-based practice, quality improvement, research and innovations, and significance to nursing practice.
- Facilitate interprofessional collaboration on evidence-based practice projects, quality improvement projects, research, and innovations.
- As part of Shared Governance structure supports other councils and committees within the Department of Nursing with issues related to project development and dissemination, upon request.

Purpose

- Create and oversee the structure and process for nurses to conduct projects with the intent to improve and advance practice.
- Support evidence-based practice, quality improvement, research, and innovative projects.
- Encourage interprofessional collaboration to generate advances in practice.
- Provide resources to promote evidence-based practice, quality improvement, research and innovation.
- Provide a forum for creative and innovative thinking.
- Facilitate dissemination of the results of nursing and interprofessional evidence-based practice, quality improvement, research, and innovative projects.
- The Council aligns to the professional practice model by operating within a shared governance model overseeing the structure and processes supporting nursing research and innovative projects intended to optimize stellar outcomes. Also, the Council provides teaching and professional development programs.



The 8 A's



Council has partnered with the Professional Development Council (CPC) to offer workshops to CNIII candidates. The goal of the CNIII workshops is to review advancement criteria, address frequently asked questions, review project types (Quality Improvement, EBP, and Nursing Research) to help candidates frame their work, and use examples of completed projects for small group discussion.

This forum allows many more candidates to directly hear CNIII information and encourages participants to provide peer review to other attendees, all the while interacting with members of both Councils, in the hope of eliminating the mystery of the advancement process. Ultimately, the goal of the CNIII workshop is to facilitate the growth

and advancement of as many staff nurses to CNIII as are interested in completing a project and promoting.

mentors participate and develop change projects every year. UC San Diego participants are selected each year by the Nursing Research and EBP Council and asked to share their work at our annual conference. The culmination of the EBPI each Fall is a wonderful conference to highlight the participants' work and graduation ceremony. This is an opportunity for any interested staff to learn more about the program and what is involved in the projects.

Staff nurses interested in advancing to Clinical Nurse III are strongly encouraged to bring a project idea to the Council for support and feedback on their project ideas. The group will help to narrow the project scope, suggest steps for initiating the project, direct the nurse to resources, and help determine appropriate outcomes for monitoring success. In the last three years, the Nursing Research and EBP

In order to fulfill the objective of education and dissemination, Council members coordinate the Annual Nursing Research and EBP Council Conference – Nursing Innovations and Inquiry. The conference has grown a great deal over the last 8 years and is recognized as a high quality and professional forum for the dissemination of the wonderful work being done by nursing at UC San Diego and from the San Diego area as a whole. Additional information about the conference, and details about this year's event are located on page _____.

An innovative approach to connecting at least 55 nurses who have conducted research at UC San Diego is the "virtual interest network". This network is considered a 'task force' of the Council. Nurses within this group may use the list for networking, consultation, or to celebrate their successes as they advance the practice and science of nursing. Contact j davidson@ucsd.edu if you would like to be added to the list.

The Nursing Research and EBP Council welcomes new members. Meetings are located in Hillcrest in the EDR conference room located at 4235 Front Street, Room 130. A call in option is available, if you are unable to be present. No experience with nursing research is required, just a spirit of inquiry and desire to learn about and support nursing research and evidence-based practice within our organization.

	PI	EBP	Research
Purpose	Review, Revise & change processes to achieve improved outcomes	Improve practices by using the latest, most appropriate evidence	Create new knowledge
Structure	Group/team	Individual or group	Individual or group/team
Process (all involvement measurement)	Process Improvement Methods: PDSA	EBP methods: 8A's method, Ecoff/Brown	Research methods
Outcomes	Improved procedures or processes	Practice changes, new protocols, standards	New knowledge that can be tested and applied to practice

Fact or Fiction: Evidence Surrounding Family Presence

By Judy Davidson, DNP, RN, FCCM

This year Mary Ekno, Kim Savidan, Nancy Newman, Dianne Warmuth, Annemarie Degen-De Cort and Judy Davidson conducted a review of the literature and wrote a manuscript that will be published in Critical Care Nursing Quarterly, reviewing the literature on the obstacles to implementation of a family-centered care model inclusive of family presence. Test yourself on these statements regarding family presence. Are they fact, fiction or partial fact? (See answers below)

	CONCERN	ANSWER
1	Open visiting practices increase infection	
2	Family presence during procedures increases infection	
3	Family presence in burn patients increases infection	
4	Family presence in the NICU increases infection	
5	Family presence on rounds is anxiety producing for families	
6	Family presence on rounds will slow down rounds	
7	Family presence on rounds will decrease the quality of teaching rounds	
8	Family presence on rounds increases legal risk	



Judy Davidson, DNP, RN, FCCM is an experienced researcher, educator, lecturer and clinical nurse specialist. She is doctorally prepared with a specialization in Organizational Leadership from Case Western Reserve University. She is actively involved in the Society of Critical Care Medicine (SCCM) as chair of the Post Intensive Care Syndrome task force, chair of the SCCM Ethics Committee, co-author of the 2013 SCCM Pain Agitation and Delirium guidelines, and lead author of the SCCM guidelines for Patient and Family Centered Care. Dr. Davidson is also involved in the American Association of Critical Care Nurses, Research Chair for the Gamma Gamma Chapter of Sigma Theta Tau and member of NaCNS and the ANA. She is adjunct faculty for SDSU and guest lecturer for PLNU. She is a nurse theorist and has published a midrange theory entitled Facilitated Sensemaking which guides nurses in the care of the families of patients experiencing critical illness. Dr. Davidson has published over 50 peer-reviewed manuscripts in medical and nursing journals. She has also authored book chapters on "Measuring CNS Outcomes" and "Moral Distress".

Answers:
 (1) Fiction, (2) Fiction, (3) Fiction, (4) Fiction, (5) Partial fact. If rounds are not managed properly both staff and family may have anxiety. The majority of family members would prefer to be present on rounds (6) Fiction, (7) Fiction, (8) Mostly fiction. The risk of confidentiality needs to be managed, but the benefit to the patient and family of improved communication appears worth the risk.
 For a list of references supporting these statements contact j davidson@ucsd.edu

Evidence-Based Practice/QI/Research/Innovations

A comprehensive list of all the publications and presentations by UC San Diego nurses.

NAME	UNIT	PROJECT TYPE	PUBLICATION CITATION	TITLE OF TALK OR POSTER	CONFERENCE INFORMATION
Burkard, J.F., Tyler, R., Jones, S.F., & Lee, E.T.	PACU	Podium Presentation	Abstract available at Virginia Henderson Global Nursing e-Repository.	Evidence-based outcomes to detect obstructive sleep apnea, identify co-existing factors, and compare characteristics of patient's discharge disposition.	(2014, July). Presentation presented at Sigma Theta Tau International's 25th International Nursing Research Congress, Hong Kong, China. Abstract available at Virginia Henderson Global Nursing e-Repository: 66995.
Karen Mitchell	ED Hillcrest	Podium Presentation	Abstract available at Virginia Henderson Global Nursing e-Repository.	ED community placement project (EDCPP): Right service-right venue approach in managing ED frequent users.	(2014, July). Presentation presented at Sigma Theta Tau International's 25th International Nursing Research Congress, Hong Kong, China. Abstract available at Virginia Henderson Global Nursing e-Repository.
Judy Davidson	All	Podium Presentation	Development of a Tool to Explore Blame-Related Distress. STTI Odyssey Research Conference, October 2014		
Judy Davidson	Both	Podium Presentation		Creating a culture of evidence-based practice: Design your own evidence-based practice institute	Magnet, Dallas, October 2014
Bryan Do	Hillcrest	Podium Presentation		Improving Burn Documentation: A multisystem approach	Western Region Burn Conference/ American Burn Association Las Vegas, November 6-8, 2014.
Judy Davidson and Shannon Chakedis	Both	Podium Presentation		Development of a tool to explore blame-related distress	Sigma Theta Tau Odyssey Research Conference, November 14, 2014, Ontario

* See Pages 41-47 for the full list of Projects



Annual Nursing Research and Evidence-Based Practice (EBP) Council Conference Nursing Inquiry and Innovation

By Laura Dibsie, MSN, RN, CCRN, CNS

Many hours of work go into planning a large conference. The Nursing Research and EBP Council members that comprise the planning committee devote time above and beyond council meetings, to provide an exceptional education event for UC San Diego nurses. The 2014 conference was the 7th annual event and was attended by 160 nursing participants. All of the attendees were honored to hear Anne B. Hamric, PhD, RN, FAAN, a national leader in compassion fatigue research, share the work being done in that arena. The Human Resources Department was a generous sponsor for our keynote speaker, in recognition of the important work Dr. Hamric is doing for health and well-being of nursing and healthcare professionals. Over 50 other projects were presented as podium and poster presentations. (See Tables 1 and 2 for speaker lists and poster presenters)

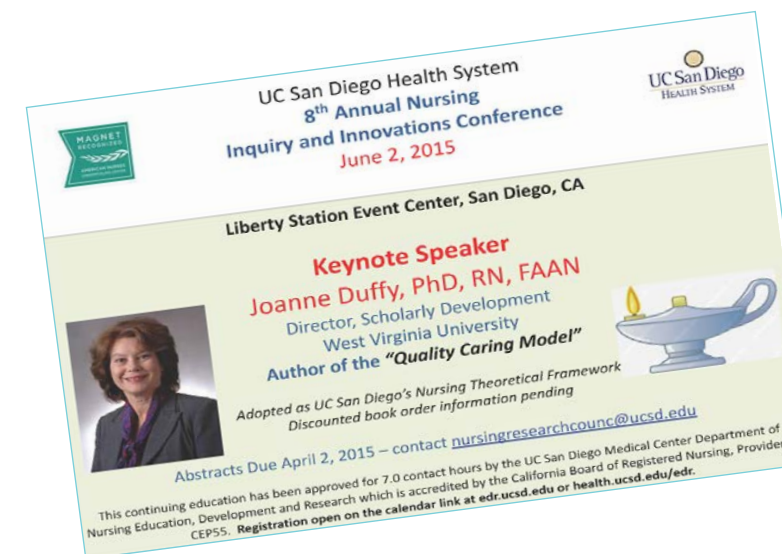
Three poster presentations were recognized for their outstanding work and received free registration to the 2015 conference.

- Sherry Careau, RN, Sulpizio Cardiovascular Center ICU: Nursing Barriers to Effective Workflow Study
- Shar Moseley, RN, Thornton PCU: Implementation of a Comfort Care Order Set
- Lisa Ross, RN The Use of iPads for the Non-pharmacological Management of Agitation in Individuals with Dementia

The day, overall, was a huge success. June 2, 2015 will be the 8th Annual conference and will return to the Liberty Station Event Center in Point Loma. It is rewarding to see the Council's conference emerging as one of the highest quality and professional nursing conferences in the area. The planning is in full swing and it is shaping up to be another stimulating and intriguing day. The keynote

speaker this year is the author of the Quality Caring Model for Nursing, Joanne Duffy, which serves as the theoretical framework for UC San Diego Nursing's new professional practice model. Potential poster and podium presenters submitted over 50 abstracts. The projects include many of those completed by unit and organizational shared governance councils, research by nurses at UC San Diego, and completed throughout the UC System and San Diego area hospitals as well. This year we are proud to add an art exhibit to our conference, celebrating the manner in which art is used to help transfer knowledge into practice. To date, nearly 100 attendees have registered, but the venue can accommodate many more! Registration is available at health.ucsd.edu/edr.

The conference planning committee is proud to be the recipient of the 2015 UC San Diego Nursing Team Award, and is determined to provide everyone with another outstanding day! We hope you can join us and look forward to seeing you there!



TOPIC	SPEAKER	ADDITIONAL AUTHORS	HOSPITAL/UNIT
Exploring Distress caused by Blame for a Negative Patient Outcome	Judy Davidson, DNP, RN, FCCM	Shannon Chakedis RN, OCN Donna Agan PhD	UCSD/EDR
QUALITY IMPROVEMENT PROJECTS			
Does Environment and Technology Affect Nursing Productivity: A study in medication administration	Kim Savidan MSN, RN, ENL, PHN		UCSD Thorton/ 2 East
Improving Inpatient Hypoglycemia Management	Brittney Serences MSN, RN, FNP-BC, BC-ADM	Suzanne Lohnes MA, BSN, CDE Diane Pearson NPH, RN, CDE Kristen Kulasa MD Patricia Juang MD	UCSD/EDR
Inpatients' Need for Comfort and Preferences for Integrative Medicine	Lori Montross PhD, Assistant Professor, Director	Gene (Rusty) Kalenburg MD Lauray MacElhern Kim Reynolds Dr Elen Beck Erin Raskin Andrea Trejo Ellen Nyheim MSN, RN	UCSD Inpatient Integrative Medicine
Improving Patient Sleep Quality in the ICU	Russell Haight BSN, CCRN, MICP		Sharp Grossmont
INNOVATIVE PROJECTS			
An Innovative Approach to Skill Mix	Cristina Cazares-Machado MSN, RN, BS		UCSD Hillcrest/ 6East
Improving Oncology Practices in Hong Kong: An international educational collaborative	Lori Johnson RN, MS, OCN		UCSD/EDR
NURSING RESEARCH STUDIES			
Identification of PTSD Symptoms in Post-ICU Patients	Heather Warlan PhD, RN, CCRN	Lois Howland DrPH, MSN, RN Ann Mayo DNSc, RN, FAAN Cynthia Connelly PhD, RN, FAAN	UCSD Hillcrest/CCU
Correlational Study of Sleep Apnea Patients' Characteristics with Discharge Locations	Ester Lee MBA, MNP, RN	JoAnn Daugherty PhD, RN, CNL Joseph Burkard DNSc, DPNC, CRNA	UCSD Hillcrest/ Peri-Anesthesia
The Effectiveness of Dexmedetomidine on Pain Management and Rate of Respiratory Depression on Obstructive Sleep Apnea Patients: A systematic review	Cynthia Postel, RN	Crystal Smith, RN April G Cate, RN	UCSD NICU
EVIDENCE-BASED PRACTICE PROJECTS			
A Developmental Approach to "Safe Sleep" in NICU Patients Preparing for Discharge	Cynthia Postel, RN	Crystal Smith, RN April G Cate, RN Peggy J Castor, RN Cristina O Sullivan, RN Erika Clemens, RN	UCSD NICU
Implementation of an Evidence-based Preceptor Program	Jessica Brady BSN, RN, CCRN	Laura Dibsie MSN, RN Patty Graham MSN, RN Frann Teplick MSN, RN Meredith Miller RN	UCSD Thornton/ICU
Inflammatory Bowel Disease: Emphasis on pneumococcal vaccine administration	Courtney Thompson RN, BAN PCCN		UCSD/GI Procedures
Bringing EBP to Inpatient Pain Assessment and Management	Cassia Yi MSN, RN, CCRN, CNS	Bev Morris RN, CNP, MBA	EDR
KEYNOTE ADDRESS			
Moral Distress: From Research to Translation into Practice	Ann B. Hamric, PhD, RN, FAAN		Virginia Commonwealth University

	POSTER	PRESENTER	HOSPITAL/UNIT
QUALITY IMPROVEMENT	Incorporating 3 clinical pathways into the Change of Shift Report Form on FMCC	Lindsey Patnaude RN, Frann Teplick MSN, RN, James Estoesta RN, MSNc, Jenffer Lockrem RN, MSNc	UCSD FMCC
	Triage Redesign Implementation and Pod Project: TRIPP	Marlena Montgomery RN, CEN, Bernadette Cale RN Beverly Kress BSN, RN	UCSD ED
	UC San Diego Thorton Hospital 2E Call Back Program	Jessica Brady BSN, RN, CCRN	UCSD 2 East
	Bridle Use: Decrease in X-ray Exposure, Nursing Cost, and Restraint Days	Felipe Gutierrez MSN, CMSRN, FNP, Donna Cahill MSN, RN-BC CNS, Janet Murphy, RN	Scripps Mercy
	Infection Control and the Psychology of Compliance	Patty Graham MSN, RN, Trish Bielski RN, MSc, Norvie Payton RN, MSc, Nancy Barker RN, Shannon Hall, RN, BSN	UCSD CCU
	Developmental and Initial Testing of a Family Presence Audit Tool	Patty Graham MSN, RN	UCSD CCU
	The role of staff education in CAUTI maintenance bundle compliance	Andrea Bacuetes SN, Megan Clowar SN, Mark Ebert SN, Katie Wald SN, Alysa Willis SN, Dianne Warmuth MSN, RN, Ellen Nyheim MSN, RN, Judy Davidson DNP, RN, FCCM	CSU San Marcos
	Promoting RN certification in the Behavioral Health Unit	Sarita Shakya MSN, RN-BC	Scripps Mercy BHU
	Evaluation of the Huddle	Roxana Hazin SN	UCSD System Wide
	Program: Regulatory readiness and knowledge	Ellen Nyheim MSN, RN, Judith Pfeiffer PhD, RN, NEA-BC, PMHCNS-BC, Judy Davidson DNP, RN, FCCM	
	Descriptive study of noise level in Progressive Care Unit	Julie Zimmerman MSN, RN	UCSD EDR
	Open visitation in the NICU	Michelle Carson RNC, MSN, Mary Ekno RN, Kathy Hoang RN	UCSD NICU
	Improving Interdisciplinary communication with the NICU	Michelle Carson RNC, MSN	UCSD NICU
	Charge Nurses' Handoff: Leading the way at the bedside	Melvin Ersando RN, Karen Armenian MSN, RN, CMSRN	UCSD 6 West
	EVIDENCE-BASED PRACTICE PROJECTS	Improving staff nurse compliance using the "teach-back" method	Edna Culp RN, MSNc, Judith Pfeiffer PhD, RN, Laura Giambattista BSN, RN
Implementing Evidence-based Practice to Reduce Alarm Fatigue		Julie Zimmerman RN, MS, Mark Miller RN, MSNc	UCSD 2 East
ED Community Placement Project: "right service-right venue" recidivism reduction strategy		Karen Elizabeth Mitchell, RN, MSN, Christian Tomaszewski MD, MBA, Catherina Madani MSN, RN	UCSD ER
Implementing CAUTI Maintenance Bundle in the PCU		Hsiu Jan Chen RN, Diane Warmuth RN, MSN, Hannah Chhatah RN, MSN	UCSD Hillcrest PCU
Improving Transitions of Care		Laura Giambattista RN, BSN, Sherry Carreau RN, BSN	UCSD EDR
Implementation of a Comfort Care Order Set: Improving patient comfort and nurse knowledge		Shari Moseley BSN, RN, CCRN	UCSD 2 E
Implementing a Central line Dressing Team to Decrease CLABSI		Arlene Ferrer RN, BSN, OCN, Faye Dunable RN, Aran Tavakoli RN, MSN, AOCNS	UCSD 3 W BMT/Onc
Perceptions of Progressive Care Nurses on the Value of Certification		E Balasuit RN	Sharp Memorial
Evaluating the Effectiveness of a Standardized Preceptor Program		Nicole Ward RN, CCRN, Jessica Brady BSN, RN, Frann Teplick MSN, RN-BC, CNS, Judy Davidson DNP, RN, FCCM, Patty Graham MSN, RN, Laura Dibsie MSN, RN	UCSD System-wide
Benefits of Formal Education in Mentoring		Kristina Christensen RN, BSN, Catie Madani RN, MSN, Sabrina Boone RN, MSN	UCSD TICU
Nurse Led Follow U-up Phone Calls for Stroke Patients		Elaine Moriera Ali RN	UCSD 10 East
The Use of Motivational Interviewing in Inpatient Stroke Patient Education		Monica Neslage RN	UCSD 10 East
Video Monitoring: Improving Patient Safety and Efficiencies in Increased Observation		Jay Estacio RN, Laura Vento MSN, RN, CNL, Paige Burton, MSN, RN	UCSD Acute Care
The Implementation of Bedside Shift Report Utilizing AIDET		James Lee Estoesta RN, MSNc, Frann Teplick, RN, MSN	FMCC
Implementing a Mentoring Program on Labor & Delivery		Wendy Ellingsen RN, Jocelyn Angel, RN, Fran Teplick RN, MSN	UCSD L & D
NURSING RESEARCH STUDIES	Nursing Barriers to Effective Workflow Study	Shari Carreau RN, BSN, Catie Madani RN, MSN, Mobe Montesa RN, BSN, MASH, Cassia Yi RN, MSN	UCSD CVC ICU
	Indication Based ECG Monitoring Reduces Inappropriate Utilization	Ala Garza MSN, RN	UCSD 10 East
	Inhaled Aromatherapy for the Reduction of Anxiety in Hospitalized Blood Marrow Transplant Patients: Pilot Study	Julie Chrisco RN, Aran Tavakoli RN, MSN, AOCNS	UCSD 3 W BMT/Onc
	The use of iPads for the non-pharmacological management of agitation in individuals with dementia	Lisa Ross BSN, RN-C, Ipsit Vahia, MD, Sarah Ranirez MS, Cheng Vang, BS	UCSD SBH

2014 Nursing Research Conference Poster Presentation Award Winners

Lisa Ross, BSN, RN-C

Lisa Ross, BSN, RN-C was awarded "Innovative Poster of the Year" at UC San Diego's Nursing Research, EBP, and Innovations conference. Lisa began her career at UC San Diego Health System when she was hired as a CN II in the Senior Behavioral Health unit, a 14-bed acute care geriatric psychiatry unit located on 7 East at our Hillcrest location. She was an experienced hospice nurse as well as a psychiatric nurse. Lisa has advanced her practice by becoming ANCC certified in Adult Mental Health/Psychiatric nursing. In addition to sharing her work at the national NICHE conference in April, 2014, she was also selected to share her research at the national American Psychiatric Nurses conference in October, 2014. Lisa is actively expanding her ability to meet the varied needs of the senior population by being an active member of the Holistic Nurses Committee. See (Insert hyperlink to poster pdf) to view Lisa's award winning poster on Tablet Devices (iPad) for Control of Behavioral Symptoms in Older Adults with Dementia

Lisa is also one of UC San Diego Health System's Geriatric Resource Nurses having completed this program through the Nurses Improving Care for Healthsystem Elders (NICHE) education resource website. UC San Diego Health System earned exemplar designation by the NICHE organization for providing excellence in care for seniors through many programs in our health system. There are approximately 500 NICHE designated hospitals in the US, Canada and Mexico but only 34 exemplar sites. Nurses interested in expanding their knowledge about care for seniors on any unit in any setting can become a Geriatric Resource Nurse with tutoring provided as needed. The program is free and at completion 30 CE's are awarded. Please contact Judith Pfeiffer at jpfeiffer@ucsd.edu for additional details.

Sherry Carreau, BSN, RN

Results of a time and motion study in the ICU at Sulpezio Cardiovascular Center ICU sought to identify barriers to effective and efficient nursing care of postoperative open-heart surgery patients receiving 1:1 nursing care. The poster representing this study, and the outcomes, was presented by Sherry Carreau, BSN, RN and received recognition from the conference participants. No significant barriers to nursing workflow were identified, and the observers noted 40% of nursing time devoted to direct patient care activities. The study provided an initial understanding of ICU nursing workflow activities in the care of the immediate postoperative care of cardiac surgery patients.

Sherry Carreau attended Nursing school at Creighton University in Omaha, NE. She worked as an ICU nurse at Creighton Hospital for 2 years, then moved to San Diego where she worked as an ICU nurse in TICU and then CVC ICU. In 2012, Sherry became a Transitions Coach and is now a member of the Nursing Education Development and Research Department. She and her husband (a UC San Diego Resident) have 3 beautiful children (5 yrs, 2 yrs, and 4months). Keeping track of, and taking care of her family fills her time away from work. She enjoys spending time with her kids, going to movies, and getting out to enjoy adult time with her husband and friends.

Nursing Barriers to Effective Workflow Study: An Observational Study

UC San Diego Health System | Sherry Carreau, BSN RN, Catherina Madani, PhD(c) RN, Mobe Montesa, MHA RN, Cassia Yi, APRN | scarreau@ucsd.edu

Background

- Innovative efforts at reducing waste and improving efficiency are the current reality and future challenges facing the nursing workforce
- Staff-to-patient ratios are one area under consideration as a means to reduce waste, while maintaining quality patient-and-family-centered care
- In order to properly understand barriers to nursing workflows when caring for 1:1 patient ratios assignments, a comprehensive approach must be undertaken
- A time and motion observational method has been effective in elucidating the nature of ICU nurses' work activities and offers a more in-depth understanding of the ICU as a unique work environment
- The information regarding work activity patterns of 1:1 ratio assignments can be used by administrators and managers in a variety of ways, such as evaluation staffing needs, assessing training needs, understanding workload, or understanding how nursing care changes when with the introduction of technologies such as EMRs

Results

Nursing Activity Taxonomy

Nursing Activity	Required Activity
Medication Administration	Medication Administration
Assessment	Assessment
Documentation	Documentation
Communication	Communication
Education	Education
Monitoring	Monitoring
Preparation	Preparation
Response	Response
Support	Support
Transportation	Transportation
Wound Care	Wound Care
Other	Other

Discussion

- Overall nurses spent 40% of their time in Direct Patient Care activities, 33% in Indirect activities, less than 1% of time in Delayed care activities, and 20% of time in Non-Patient Care activities
- Nursing time spent on Direct Care across shifts was highest in the immediate postop period, as would be expected
- This may be helpful in other institutions who perform open heart surgeries when considering nurse to patient ratios
- Would have been ideal to observe equal number of PTE to CABG/Valve patients for comparison (PTE vs. CABG/Valve patients)
- Limitations include: possible Hawthorne effect, nurses asking the observers for more physical space which led to some inaccurate observations, fewer daytime hours being recorded due to late care and early exitation, some observers recording nursing activities
- Despite these limitations this study provides an initial understanding of ICU nursing workflow activities in the care of immediate postoperative care of cardiac patients

Objective and Methods

SETTING:
UCSD Sulpezio Cardiovascular Center Intensive Care Unit

OBJECTIVE:
To identify any barriers to effective and efficient nursing care of postoperative open-heart-surgery patients receiving 1:1 nursing care

SAMPLE:
ICU nurses caring for immediate post-op open heart surgery patients

METHODS:
Descriptive Observational Time and Motion Design
Nurses were recruited anonymously from a single unit (CVC ICU) to participate in the study
4 observers were trained and audited for consistency in categorizing nursing activities
The observers utilized a Motorola Xoom Tablet to collect the data with the Time Keeper application
This app allowed us to record simultaneous events, multiple categories, and document narrative notes
The observation was initiated upon the arrival of the patient to the ICU, and concluded when the patient was either 24 hours post-op or extubated

Conclusions

- We did not find any significant barriers to nursing workflow
- While nurses are busy with direct patient care in the immediate post-op period, they become more busy with non-direct patient care activities as the post-op period progresses
- The data, taken as a whole, provides a rich description of ICU nursing activities for open-heart surgery patients

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Shar Moseley, BSN, RN, CCRN

Shari Moseley, BSN, RN, CCRN was awarded EBP Poster of the year at the 2014 UC San Diego Nursing Research and EBP conference for her in-process project to develop a comfort care order set. Shar conducted a community survey to identify comfort care order sets from many other hospitals. She then analyzed them for commonalities and evidence-based practices. Additionally she surveyed nurses about issues related to caring for patients with comfort care status. Following her analysis, she constructed a draft UC San Diego order set, in collaboration with the pharmacy and Howell service. The order set has been approved and added to EPIC, and is available system-wide. She hopes that this inter-professional project will decrease delays in care, increase consistency in the approach to comfort care, decrease unnecessary laboratory tests and treatments, and improve symptom management.

Shar is the mother of twin 3 year olds. She says, "They comprise one half of my heart each". She is healing touch certified and donates 8 hours/month to patients at UC San Diego who can benefit from healing touch. She sits on the Infectious Disease Committee, the Nursing Quality Council, and her unit-based Shared Governance Committee. She is one of the 50 trained staff that will work in the Infectious Disease Care Unit (IDCU), if needed. Shar is grateful for all the help and support received throughout her career. She is returning to school to pursue doctoral studies and is anxious to correlate the post data from her project and publish her results.

UCSD Comfort Care Order Set (CCOS): Improving Patient Comfort

UC San Diego Health System | Shar L. Moseley, BSN RN, CCRN | smoseley@ucsd.edu

Catalyst

- No current order set exists for patients transitioned to Comfort Care (CC) at UCSDHS
- Current practice is for MD to first text orders resulting in:
 - Orders that conflict with goals of care not being discontinued
 - Orders missing for interventions associated with comfort at end-of-life
- UCSD Palliative Service not being consulted at time of transition in 75% of CC patients
- No required learning module for educating RN's on EOL care currently exists at UCSDHS

Analyze

100% Compliance to the Palliative Care Service at EOL among supported inpatients in improving Quality of Death and Dying & improved patient and caregiver outcomes

Advancing/Adopting

- Nine comfort care protocols were evaluated from hospitals for consistency and evidence-based practice
- Literature was reviewed for new and unique interventions
- A pre-survey was sent to UCSDHS RN staff to determine needs (187 respondents)
- A complete protocol was drafted and approved and submitted to EPC for build
- Education Rollout on LMS (Learning Management System) planned for June/July 2014

Acquire/Appraise/Ask

SETTING:
UCSDHS is a 552 bed tertiary care Medical Health System in Southern California

EBP Change Model:
San Diego Evidence Based Practice Institute Model, Brown, Knoff

Internal Evidence to Support the Practice Change:

- No currently existing CCOS
- Continuation of unnecessary, uncomfortable and costly interventions
- Evidence of Underutilization of Palliative Care Service at EOL among supported inpatients in improving Quality of Death and Dying & improved patient and caregiver outcomes

Literature Review:

- Systematic review key words: "palliative", "end-of-life", "comfort care", "quality of death", "care bundles" and "support"
- Inclusion time frame: 2000-2010
- Databases searched: PubMed, CINAHL, and Cochrane
- 816 titles identified; 127 articles were reviewed; 16 titles met inclusion criteria

PRICO Question:
Will the availability of a Comfort Care Order Set (CCOS) vs. the standard practice of MD's first texting orders when patients transition to Comfort Care (CC) improve RN confidence and knowledge of interventions for patient and family care at End-of-Life (EOL) and increase utilization of Howell Palliative Care Service at UCSDHS.

Conclusions

- This non-pharmacological intervention may reduce the use of medication use which may in turn decrease harm in the geriatric-psychiatry patient.

References

- Cohen-Mansfield J. Nonpharmacological Management of Behavioral Problems in Persons with Dementia: The TREA Model. *Alzheimer's Care Quarterly*. 2000; 1: 22-34.

Tablet Devices (iPad) for Control of Behavioral Symptoms in Older Adults with Dementia

University of California San Diego Health Sciences | Lisa Ross, BSN, RN-C, Sarah Ramirez, Alok Bhatt, Cheng Vang, Jennifer Gahan, Elizabeth Ryer, Omid Salaami and Dr. Ipsit Vahia

Background

- Polypharmacy, and use of antipsychotic medications, is a rapidly growing area of clinical concern
- Medications to manage behavioral symptoms in older adults can have serious adverse effects including falls and delirium
- Medications have limited efficacy in controlling problem behaviors
- Evidence-based safe and cost effective management of behavioral symptoms in dementia include non-pharmacologic interventions

Results

Figure 1: Patient M
82 y.o. Caucasian Female;
DX: Dementia NOS, Psychosis NOS;
MoCA: 8/30

Discussion

- Preliminary data indicate that use of iPads for older psychiatric inpatients is both safe and feasible.
- Engaging patients in activities that recruit visual attention can reduce agitation
- Use of technology in older adults can be limited due to lack of familiarity with touch-based devices
- There may be difficulty engaging patients with delirium, lower cognitive functioning and/or visual or hearing impairments
- Is it the iPad or the personal interaction which helps control the symptoms?
- We have also identified other practical uses, such as translation and to facilitate communication with the aphasic patient.

Objective and Methods

SETTING: UCSD Medical Center Senior Behavioral Health Unit

OBJECTIVE:
To determine whether iPads as a clinical tool for patients at risk of behavioral agitation may reduce the use of behavioral PRN medications

- Assess older adult's ability to familiarize themselves with touch screen technology and assess feasibility and safety of iPad use
- Establish protocols for individualizing iPad and app selection
- Outcome Measure: Reduction in the use of PRN antipsychotic medication

THEORETICAL FRAMEWORK:
Three theoretical models for non-pharmacologic interventions:
1. The unmet needs model-addresses underlying needs causing inappropriate behaviors
2. Behavior/learning model-problem behaviors are learned through reinforcement by staff who provide attention when problem behavior displayed
3. Environmental vulnerability/reduced stress-threshold model-reduced stimulation levels or provision of relaxation techniques

TREA (Treatment Routes for Exploring Agitation):
Focus on: prevention, accommodation and flexibility for intervention

METHODS:
iPads are used for purpose of engagement and also for acute de-escalation on the unit
Nursing staff and volunteers supervise iPad use
Primary outcome measure is reduction in the number of elective PRN doses administered

Figure 2: Patient I
91 y.o. Caucasian Female;
DX: Severe Dementia, likely AD;
MoCA 8/25; Visual Impairments

Conclusions

- This non-pharmacological intervention may reduce the use of medication use which may in turn decrease harm in the geriatric-psychiatry patient.

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THE LIFECYCLE OF A PROJECT

By Debbie Ashton, BSN, RN, CNN

What does the evidence say...?

It all started with a question.

The American Nephrology Nurses Association (ANNA) maintains a bulletin board on their website for nurses to post questions and answers on all subjects relating to Nephrology nursing. I was particularly interested in a thread related to blood product administration during hemodialysis, and noticed each of the 12 responses to the post were different. I decided to poll my colleagues on the same subject. Again, several different techniques were described.

This lack of standardization inspired my clinical question: **What does the evidence say about management of intradialytic blood transfusions?** 100% of UC San Diego Acute Dialysis respondents indicated they wanted an evidence-based procedure.

Laura Dibsie, Chair of the Nursing Research and EBP Council, helped me develop a PICO question, and I was off! I spent a great deal of time investigating this topic and ultimately developed a standardized procedure for administration of blood during dialysis.

My first opportunity to disseminate the work I had done on my project was a podium presentation at the 2012 UC San Diego Nursing Research and Evidence-Based Practice Conference. The presentation was my opportunity to describe the process I followed to ask a question, search for evidence, and develop the procedure.

My second presentation was my work displayed in poster format at the 2012 American Nephrology Nursing Association (ANNA) National Symposium. I had never created a poster before, but learned there are helpful templates on the UC San Diego Nursing Resource Hub (EDR website). More importantly, I learned that using a template and following the suggestions made the process painless!

At that conference, two of the editors of our national journal, Nephrology Nursing Journal, asked if I would be interested in writing a manuscript and submitting it for publication. I agreed to do so and began writing my article. It took no less than a year, even with the tireless help of the journal's column editor. The revisions seemed endless. With the help and support of our own Nursing Research & Evidence-Based Practice Council, and the journal Editor, my article was accepted and published in the 2014 July/August issue of the Nephrology Nursing Journal.

My third presentation was another poster presentation at the 2013 UC San Diego Nursing Research and Evidence-Based Conference.

My fourth presentation was in October, 2014. I had the privilege and honor of being an invited speaker to present my work as a podium presentation at the ANNA Fall Symposium in Savannah, Georgia. The presentation was



Debbie Ashton BSN, RN, CNN graduated with a BSN from CSU Dominguez Hills. She has worked at UC San Diego for a total of 28 yrs. She works in the Nephrology Department and can be found treating patients at both campuses. She is specifically interested in the implementation of evidence-based practice as well as patient and family teaching. Debbie joined the Nursing Research and EBP Council because she desired to be a part of establishing evidence-based practice at UC San Diego. Through participation in the Council, she has worked with many UC San Diego experts in nursing research and EBP, and has learned a great deal. She says the group “energizes and inspires” her. She is an invaluable part of the group having taken on the role of ‘communication manager’ and secretary. When she is away from the Medical Center, Debbie enjoys spending time with friends, hiking, camping, gardening, sewing, quilting, and learning. She is a gifted artist.

titled “Transfusion Confusion”.

Here is the most amazing and rewarding part of this ‘lifecycle.’ I’ve been notified that my work will be cited in the latest edition of our professional organization’s Core Curriculum for Nephrology Nursing!

Finally, I presented my work at the Professional Development Council for my CN III project.

As you can see, I’ve gotten a lot of ‘mileage’ out of one project! It has provided me with a great deal of personal and professional satisfaction. In addition, this process is an example of the Magnet components related to lifelong learning, utilizing evidence-based practice, and disseminating findings internally and externally. However, the most significant part of this ‘journey’ is the contribution to the science of nursing practice, and insuring our patients receive care based on evidence.

If you have a burning clinical question, I urge you to consider taking these same steps. I can assure you, if you are curious about something, you will find others who feel the same. You can find help, encouragement, and nurturing from the members of the Nursing Research and EBP Council and from mentors within the Education Development and Research department.

If you decide to take this journey, you will be contributing to the advancement of our professional practice, which will lead you to our ultimate purpose as Nursing professionals: to deliver state of the art, evidence-based care. Our patients deserve nothing less!

My name is Debbie Ashton. I am a CNIII in the Acute Hemodialysis unit.

May the spirit of inquiry be with you!

Using the UC San Diego Evidence-Based Practice Change Model

By Laura Vento, MSN, RN, CNL

Advancing and Adopting

Podium Presentations:
2013 UC San Diego Nursing Inquiry and Innovations Conference
2014 ACNL Regional Conference
Poster Presentations:
2014 ACNL National Conference
2014 UC San Diego Nursing Inquiry and Innovations Conference
Publications:
- Accepted for JONA, July, 2015

Analyzing

- The video monitoring program, combined with a nursing-driven sitter protocol in the first year (9 of 12 months implementation) resulted in a 20.8% reduction in sitter staffing (13.49 FTEs) for an estimated savings of \$643,618.
- In the 2nd year, the program realized a 51.4% reduction in sitter staffing (33.4 FTEs) compared with fiscal year 2012 baseline for an estimated savings of \$1,593,540
- UCSDHS outperformed or equaled benchmarks in a majority of quarters for falls per 1000 patient days (5 of 6 quarters) and falls with injury per 1000 patient days (4 of 6 quarters).

Applying

- Mobile Video Monitoring Program Implementation
- Video Monitoring guidelines developed --Operational plan for standardized workflow
- 6 mobile Video Monitoring devices (including two-way audio communication) deployed across 7 acute care units
- Developed Nurse Protocol: Physician no longer orders sitter, nursing initiates per protocol



Laura Vento MSN, RN, CNL is Assistant Nurse Manager of Quality for the Medical Surgical division at UC San Diego Health System. She joined UC San Diego in 2008 as a Master's Entry (Clinical Nurse Leader) new graduate RN from University of Virginia, having a previous bachelor's degree in Health Science from James Madison University. Laura was inspired to pursue nursing during her two year service as a rural health extension Peace Corps Volunteer in East Timor. Laura joined the Nursing Research Council after her experience utilizing the council as guidance and consultation in her own evidence-based practice project "Implementing teach back during transitions of care". She has been an active member of the Research Council and conference planning committee since 2012.

Bringing Evidence to Practice: A Clinician's Guide

Advancing and Adopting

Share your results within the organization and beyond.
Consider adopting new practice in the organization.

Analyzing

Did you accomplish what you planned?

- Compare your results pre- and post- change and to the evidence.
- Were there any unintended consequences of your project?

Applying

Outline the practice to be changed.

- Consider costs, resources, risks and benefits and human subject protection (IRB)
- Incorporate patient perspective
- Develop materials needed

Identify outcomes to be attained

- Create tools for data collection
- Collect baseline data

Implement change in practice

Collect post implementation data

Appraising

How good is your evidence?

- What are the results?
- Are they reliable and valid?
- Do the results apply to your patients?

Are there themes in the literature?

Is there enough reliable evidence to change practice?

The Catalyst

A problem, issue, or concern is identified in clinical practice.

Assessing

Why is this problem important?

- How do others perceive the issue?
- Who may help solve the problem?
- Are there regulatory requirements?
- What are the national and local standards?

Asking

Develop a focused question using:

P = Patient population
I = Intervention / Interest Area
C = Comparison Intervention
O = Outcome

In ___ does ___ or ___ effect ___.

Acquiring

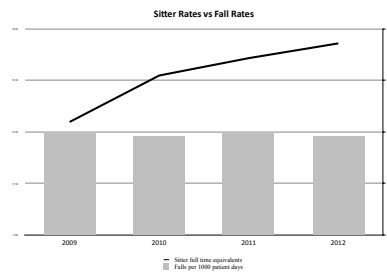
Your PICO question will guide your search for the best evidence.

- Start with SumSearch or Trip database, the "Google" for EBP.
- First look for systematic reviews, meta-analyses and clinical practice guidelines.
- Next search CINAHL and PubMed.
- Consult a librarian.

Evidence-Based Practice Institute Model ©2007 Caroline E. Brown and Laurie Ecoff; In collaboration with the Consortium for Nursing Excellence, San Diego. Adapted from Hayward's (2007) Evidence-based Information Cycle; Rosswurm and Larrabee's (1999) EBP Model for Change.

The Catalyst/Assessing

- In FY12 UC San Diego Health System spent \$3,879,976 in sitter cost while the average hospital spent \$1,300,000
- In a Cal NOC prevalence study UCSD ranked in the 90th percentile of sitter use.
- While sitter costs nearly doubled, fall rates remained stagnant



Asking

PICO Question

- In acute care patients identified to be a high fall risk does Video Monitoring and implementation of a nurse driven protocol as compared to physician ordered sitters reduce sitter use and patient falls?

Acquiring & Appraising

Internal evidence

- A frequently cited reason for sitter was fall risk, however as sitter use increased, patient falls remained stagnant

Literature Review

- No correlation was found between sitter use and fall rates
- Sitters have been shown to be inefficient and ineffective as a safety intervention to prevent falls
- Limited evidence on Video Monitoring: one study centralized video monitoring program across 7 acute care units. In the first 3 months 57 falls were prevented and realized 5.62 times return on investment

The Quality Caring in Nursing Model: One-on-one with Joanne Duffy, PhD, RN, FAAN

By Michael Baumgardner, MSN, RN, CCRN, CNL

The members of the Clinical Practice Council have put many hours of work into researching, selecting, and adapting Joanne Duffy's Quality Caring in Nursing Model (QCM) for UC San Diego's nursing professional practice model. All staff will be provided the opportunity to attend a 2-hour education event to unveil the model. Because the value of the human person is central to her theory, and a focus of the renewal of our Professional Practice Model, the Research Council wanted to introduce Joanne to all of our nurses. Michael Baumgardner had the opportunity to get to know Dr. Duffy during a phone interview. Following is the summary of their conversation.

The Quality Caring in Nursing Model (QCM) was recently adopted as a tool to renew the Professional Practice Model at UC San Diego Health System. While the previous model recognized the interrelatedness between each arm of the "Starfish", it was perceived as heavy on leadership concepts and deficient in areas of importance to bedside nurses and patient relatedness. The QCM was developed by Joanne Duffy in 2003 as a tool to help nurses build caring relationships in the workplace. In essence, her theory maintains that by fostering these relationships, positive outcomes will be achieved by patients, their families, and their health care providers.

Joanne is the oldest of five children. She grew up in the Northeast with her Irish Catholic parents and siblings. When she was only eleven years old, her mother took ill. It became her responsibility, as the eldest, to care for

her mother and younger siblings. She acknowledges that her real aspiration, as a young woman, was to go to medical school. However, her guidance counselor encouraged her to pursue more "typical" professions for young women, such as a "secretary, teacher or nurse". Her passion for biology and "caring for others" is what eventually led her to nursing school.

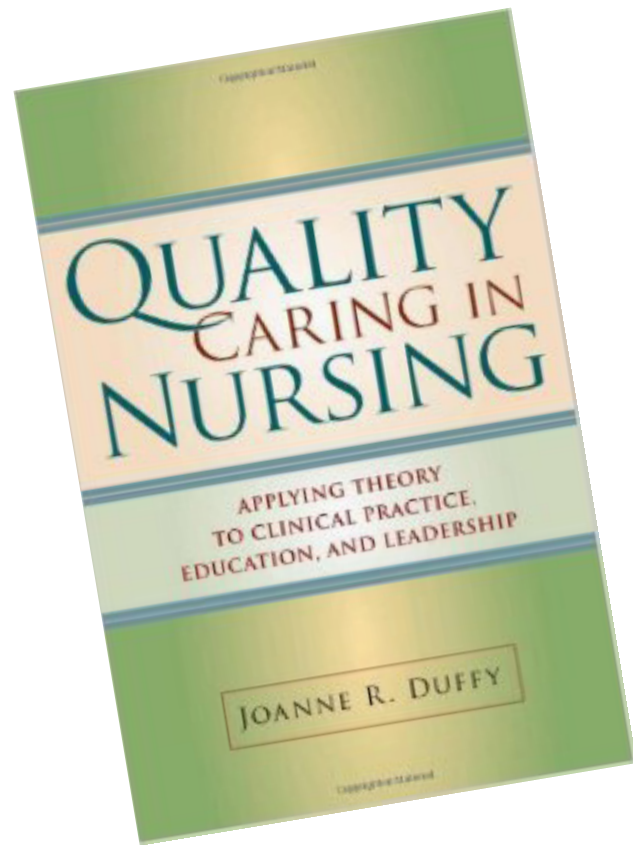
Soon after graduation, Joanne began to work in a Coronary Care Unit in an academic hospital. From the first days on the unit, she was driven to be "a good nurse" for her patients and would constantly read about improving practice at the bedside. She said she was never satisfied with just recognizing a problem about delivering healthcare. Instead, she was always trying to turn a problem into a question that could be answered through research. This passion for improving outcomes for her assigned patients didn't go unnoticed. A group of physicians observed this young nurse asking questions and looking for answers during their daily rounds. Her inquisitiveness led them to invite her to be a part of a research project. It was from that experience that she pursued a career as a nurse researcher.

Early in her doctoral studies, she read Jean Watson's theory and states, "It hit me between the eyes". What interested her most about Watson's theory was the emphasis on relatedness. Her journey has been one that is founded on caring for others through personal connection. It is those connections that result in a person feeling cared for and, thus, more engaged in decisions about their health care. "I just gravitate," Joanne said



Michael Baumgardner MSN, RN, CCRN, CNL has worked for UC San Diego Health System for four years. He is currently the assistant nurse manager of the Progressive Care Unit (7/9/11 PCU), the co-chair of the Shared Governance Nursing Cabinet, and member of the Nursing Research and EBP Council.

Michael earned his bachelor's degree, with an emphasis in biology, from UC Santa Cruz. He was contemplating entering medical school upon graduation, but decided instead to take a year off from school. During that time he worked within a Skilled Nursing Facility in their admission department. His caring personality was an instant fit in working with families troubled with making the decision to place a loved one in a facility. While working in that capacity, Michael decided that medical school was not the academic degree he wanted. Instead, he began a five-year discernment process about a vocation in ministry.



“to theories that focus on relationship because of my own experience.”

While inspired by Watson’s theory she found it to be somewhat philosophical and difficult to apply to her research. She was searching for a tool to use as an intervention in a research project. This quandary left her at a crossroad, as she needed a theory that was more at the level of the individual. Unable to find a theory that she felt connected to, she abandoned the research project and sat down to put a theory of her own on paper. It was this theory that has become the QCM in nursing.

She never expected the QCM would become such a big deal. Her thought was that it would be used for interventions in heart patients and nothing more. As she disseminated her research findings, which included bedside nurses in other specialties were requesting her help in applying the model to questions within their practice. Joanne acknowledges the biggest surprise, and greatest satisfaction, is seeing how well her theory resonates

with the staff nurse.

Her theory has been adopted in many hospitals across the country with stellar outcomes. As we begin to use the QCM as a nursing theory to help guide us at UC San Diego, she notes that its success will depend on three things:

- First, there needs to be complete commitment on the part of leadership. They have to provide the environment that permits inquisitiveness from the staff nurses.
- Second, the nurses at the bedside need to believe they have a role in the model. They need to notice a problem in the delivery of care, and turn the problem into a question that leads to better outcomes.
- Finally, be sure to know what you are hoping to achieve. When the goals are clearly defined, then the outcomes can be measured and publishable. The degree of success in any process, she believes, is the extent to which the stakeholders are transparent.

One can tell the passion that Joanne has for nursing as she tells the story of her journey. She believes that as quality

of caring reemerges as a focal point in nursing, it will produce outcomes that will lead to new ways of thinking of nursing as an honorable profession. “Nursing is not just my profession, it is my vocation . . . it colors everything in my life.”

Joanne Duffy, PhD, RN, FAAN will offer the keynote address at the 8th Annual UC San Diego Nursing Research and EBP Conference: Nursing Inquiry and Innovation, See page 9 for more information.

Demystifying the Process of Evidence Based Practice: A novice point of view

By Karen Elizabeth Mitchell-Keels, MSN, RN, CMCN

To “demystify” is to make a difficult or esoteric subject clear and easy to understand. This can be a tall order when attempting to explain how to get around the mystery of getting started on your first an evidence-based practice (EBP) project. Many of the barriers for nurses are simply in their perception of what it takes to get involved. If you talk to the average frontline clinical nurse about initiating an evidence-based change project, many of the responses will reveal that nurses are unclear how to get started. Some nurses lack the confidence or the belief that they are able to make a difference in a large academic organization. According to Brown and Ecoff, there are organizational obstacles (lack of time and nursing autonomy) that top the list of perceived barriers for nurses in an academic medical center (Brown, Wickline, Ecoff, & Glaser, 2009). Then there is the perception that nursing research, or the implementation of evidence into practice, is an arduous process that uses rigorous guidelines and is steeped in frustration. Review of the literature reveals other common elements, that prevent nurses from getting involved in evidence-based projects, also include lack of peer support and limited knowledge or skills in the nursing research process (Rumoro, 2013).

In this article, I’d like to share with you my wonderful experience in a successful evidence-based change project, from the novice perspective. I hope to encourage those who may be interested in making a difference and improving practice through EBP, but are

unsure. It has been my experience that every nurse can take an active role in improving healthcare outcomes at UC San Diego Health System, sometimes we just need to know how to begin. I believe that the most important skills that a nurse can bring to a project are heartfelt passion for your patient’s well-being, open-mindedness, and flexibility. The actual process of project development is acquired as you grow with your project. Self-confidence is garnered along the way with the support of the experts and leaders in your facility. As a novice, one of the biggest breaks you can give yourself is to follow your passion.

Years ago as an ED clinical nurse, I experienced firsthand the challenges in caring for homeless patients that suffer from substance abuse and co-occurring psychiatric disorders that frequent the ED. This can be a very challenging and yet rewarding job. My interest developed into a passion to improve care and quality in the ED, and advocate for disenfranchised patients that require links into resources that better meet their needs. A quote by Steven Jobs states, “You have to be burning with an idea, or a problem, or a wrong that you want to right. If you’re not passionate enough from the start, you’ll never stick it out.” I personally believe that it is important for nurses to be involved in projects for which they have a passion. In speaking with many nurse colleagues, I found others believe this to be true as well.

I was fortunate enough to become involved with a project that I felt passionate about and that also was



Karen Elizabeth Mitchell-Keels, MSN, RN, CMCN started as a Clinical Nurse II in the Emergency Department in 2003. She went on to study outpatient care coordination and case management, and became a Certified Managed Care Nurse in 2007. In 2012, she earned a Master’s Degree in Nursing (MSN) with an emphasis in Healthcare Organizational Leadership from Grand Canyon University. Karen entered her Doctoral Residency in March of 2015. Karen is the UC San Diego Health System Department of Emergency Medicine’s Clinical Educator and Outreach Manager. This unique role blends nursing education and community outreach. Her professional focus is developing evidence-based practice collaborative models that enhance nursing education. She is particularly interested in the “Compassion Fatigue” phenomenon experienced by ED nurses in urban settings. Karen also serves as a Diversion Evaluation Consultant on the California Board of Registered Nurses (BRN) Diversion Council.

in alignment with UC San Diego Healthcare's commitment to serving our community. The "Structural Empowerment" component of Magnet states that nurse leaders develop strong partnerships with community organizations to improve patient outcomes and advance the health of the communities they serve (AACN, 2014). The "ED Community Placement Project (EDCPP)", is a collaborative partnership between UC San Diego Health System (UCSDHS) and the community. This is a nurse-led, multidisciplinary, innovative relationship between specialized community based organizations (CBO's), through a contractual agreement, to provide services for our highest frequent ED users upon ED discharge. My interest in this project grew from my clinical experience in the ED, yet seeking Senior Management Team (SMT) support was not difficult.

Knowledge and innovation require nurturing, beginning at the unit level (Gawlinski, 2011). Nursing experts in EBP suggest that support from nursing and organizational leadership is the first step toward success in quality improvement projects. Sound advice for the novice researcher, is to seek assistance and support from their immediate leadership early in the planning phases of a project, and to maintain open communication regarding the project goals. If you are

uncertain what process improvement project to undertake, seeking advice from your leadership can offer a wealth of information.

Our ED Nursing Director, Beverly Kress, RN, BSN leads from a "Transformational Leadership" style. As my Capstone preceptor during my Masters of Nursing (MSN) program, Beverly empowered me to practice at the "top of my license" and advocated for my professional autonomy as I moved through the process. She set the bar high by suggesting that I do a project focusing on a unit specific issue that would yield measurable outcomes and improve patient quality in the ED. Exemplary professional practice is evidenced by inter-professional collaboration (AACN, 2014) as evidenced by the support received by physician leadership for this project. Drs. Theodore Chan, Department of Emergency Medicine Chair and Christian Tomaszewski, Department of Emergency Medicine Medical Director, paved the way to higher organizational stakeholder buy-in. Inter-organization cooperation from departments such as Care Coordination, Psychiatry and Pharmacy were crucial to the success of this project. The lion's share of support is from the ED nursing staff and Social Workers who, on a daily basis continue to use the process to serve our patients.

We belong to an organization that fosters nursing innovation and inquiry, and we have outstanding academic and leadership support to be successful. This support can be applied to all phases of project development and is readily available to all interested nurses. We have incomparable librarian support from Mary Wickline (bio on page X) that provides the foundation of searching for relevant literature. I encourage any nurse, experienced or not, to make an



appointment with her. Mary's expertise and skillful instruction saved me time and steered my searches to appropriate scholarly articles.

The Nursing Research and Evidence-based Practice Council, meets every second Friday of the month. This Shared Governance Council oversees the structure and process supporting nursing research and innovative projects. Under the leadership of Judith Pfeiffer, PhD, RN, NEA-BC and Laura Dibsie, MSN, RN, CCRN, Council Chair, I was coached and cared for in each step of study development, abstract writing, and Institutional Review Board (IRB) submission to the Human Subject Protections Program. This council was warm and nurturing and allied my fears and reservations about nursing research. There are many other mentors available within the organization eager to support nurses. My association with the Council introduced me to Catherina (Catie) Madani,, PhD RN. Although my project is implemented now, we continue to meet frequently and collaborate on publication goals and data analysis related to the project. She is both a mentor and a role model.

Many of the fears that discourage nurses, and cause them to abandon their project dreams, can be diminished when they engage in an empowering nursing mentorship relationship. I also garner a great deal of support from Judy

Davidson, RN, DNP who joined UC San Diego over 1 year ago, as Nursing Research and Evidence-Based Practice Liaison (see bio page 7). I meet with Dr. Davidson frequently for feedback, guidance on projects, abstract, and publication. Collaboration with nurse researchers, for the first-time nurse researcher, will save time and shine a guiding light on the potentially overwhelming process. The benefit this novice researcher gained from such mentorship is unparalleled. I suggest that reaching out to any of these resources as great place to start.

Never underestimate how far a simple project can go when you stick with it and are surrounded by organizational support. I have enjoyed the opportunity to share our outcomes in various nursing conferences; ANA Quality Conference, ENA Annual Conference and the Association of California Nurse Leaders conference are just a few. The ultimate experience was presenting at the Sigma Theta Tau International Nursing Congress in Hong Kong. Each of these ventures was supported wholeheartedly by my Nursing Director and the organization. It took hard work and persistence on my part, but I could have never done it alone.

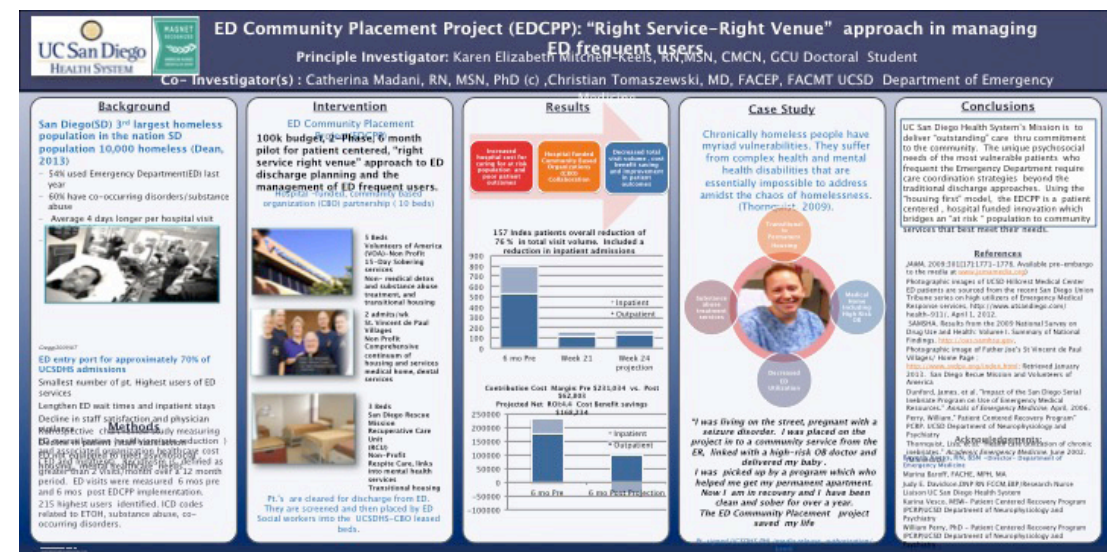
We all agree that, to affect better patient outcomes, new knowledge must be transformed into clinically useful forms, effectively implemented across the entire care team within a systems context, and measured in terms of



meaningful impact on performance and health outcomes (Stevens, 2013). Along the journey you will encounter moments of elation and frustration. They are all lessons to gain useful experience and wisdom, and will serve you well as you move your project forward. I can't stress enough how important it is to harness your passion, seek leadership support, direction, and be persistent. Intraprofessional collaboration is key! The biggest take way is to embrace the Magnet model of shared governance and reach out to build those nurturing relationships to help guide you through this process. That is what I did and it has never failed me yet.

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Test Yourself: Is this an Evidence based practice, performance improvement or research project?

By Judy Davidson, DNP, RN, FCCM

Project A: Pain Management

Cassia and Bev read a new practice guideline which highlighted to them that the pain assessment tool used at UC San Diego Health System, for patients who could not provide a verbal response, was outdated. The guidelines advocated a newer assessment method with better validity and reliability. The two nursing leaders decided to do a project to replace the outdated assessment tool for an up-to-date version.

Is this EBP, PI or Research?



Cassia Yi and Bev Morris

Project B: Seizures

Rachelle works with seizure patients. She had looked to the literature for setting up nursing guidelines for seizure care, but found no answers to some of her questions. She decided to do a project to look at video recordings of seizure patients and analyze the different transitions a patient makes during the seizure, to better describe the characteristics of the lifecycle of a seizure. Two of the questions she is trying to answer are, "What percent of patients have a head turn to signal the start of a tonic clonic seizure?" and "How long are patients with tonic clonic seizures apneic during a seizure?"

Is this EBP, PI or Research?



Rachelle Compton

Project C: Surgical Site Infections

The American Association of Operating Room Nurses publishes guidelines for surgical preparation. The guidelines are not new. UC San Diego Health System has published practice standards to follow the guidelines. Sarah is working on a team to help decrease surgical site infection rates. Sarah is doing a project to determine compliance with the policy and potential areas for improvement.

Is this EBP, PI or Research?



Sarah Fieberger

Answers:

Project A: Evidence-based practice change because the published guidelines supported a change in practice that had not yet been implemented at UCSDHS. Others had already tested the new assessment tool and found it to be valid and reliable.

Project B: Research. Rachelle is investigating something new or novel that has not been reported in the literature before.

Project C: Performance improvement. We know this because there are published guidelines that UC San Diego Health System has adopted internally and this project is designed to improve adherence to the best practices which should have already been implemented.

PI, EBP OR RESEARCH DONABEDIAN: STRUCTURE, PROCESS & OUTCOME			
	PI	EBP	Research
Purpose	Review, Revise & change processes to achieve improved outcomes	Improve practices by using the latest, most appropriate evidence	Create new knowledge
Structure	Group/team	Individual or Group	Individual or group/team
Process (all involvement measurement)	Process Improvement Methods: PDSA	EBP methods: 8A's method, Ecoff/Brown	Research methods
Outcomes	Improved procedures or processes	Improved procedures or processes	New knowledge that can be tested and applied to practice

The difference between Evidence-based practice, performance improvement is represented in the graphic. Additional resources are available on the nursing resource hub under the Research and EBP tab.

In Support of Nurses Resources Available to all Staff

Nurses at UC San Diego are fortunate to have access to many resources to complete projects. Not only are many mentors available to provide support and guidance, but access to publications within the online clinical library is unparalleled. Two exceptional people are also readily available to all staff, and we would like to introduce you to them here.

Nurse Scientist



In July of 2013, Judy Davidson, DNP, RN was hired to support nurses with project development, presentation, and publication.

She is a consult service to all nurses who are working on projects to advance practice. Any nurse in any department may contact her for advice or support. Although her office is in La Jolla in the MCM trailer (located East of Moores Cancer Center), she is available to come to any location, upon request, and spends approximately half of her time in Hillcrest. She has developed a variety of tools that are posted for public use on the nursing resource hub. There are over a dozen worktools to help nurses perform evidence-based practice, performance improvement, and research projects at the Nursing Research Council website: <http://medcenter.ucsd.edu/edr/research-EBP/Pages/WorkToolsTemplates.aspx>

- These tools include:
- Poster and Presentation templates for EBP, PI and Research Projects
 - A self-assessment guide to determine whether your project is EBP, PI or Research
 - Guidance on presenting and publishing

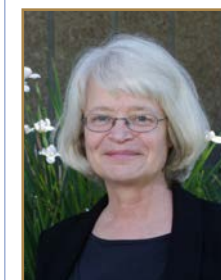
- Guidance on presenting case studies while protecting patient privacy rights.
- A project report-out tool to use at internal meetings to update others on project progress

Additional tools are found at the CNII website: <http://medcenter.ucsd.edu/edr/development/council/Pages/CNII-CNIII-resources.aspx>

Although targeted for those advancing to the level of CNIII, these project management tools might be helpful to any nurse considering a practice change. These include PICO and PDSA worksheets.

Medical Librarian

For many years, Mary Wickline has served UC San Diego Health System



nurses as "the nurse's librarian". She has supported countless nurses create lists of meaningful search terms, learn how to search the literature, refine

PICO or research questions, conduct literature reviews, and obtain full-text articles. Mary's office is located in the Biomedical Library on the main campus in La Jolla. You can visit her there for personalized instruction. A trip to the library is easy using the UC San Diego free shuttle from either Hillcrest or La

Jolla campuses. However, if you'd like to engage in evidence review from the comfort of your home or workplace, she is only a click away from any nurse who needs her advice or support: mawickline@ucsd.edu. This service to UC San Diego nurses exists because of our relationship with the School of Medicine. The UC San Diego Health System library access for nurses is the best in San Diego County. Mary goes above and beyond to keep our services a cut above. Once she knows your topic of interest, it is not unusual for her to email you information about a new article or grant opportunity related to your work.

Mary also performs very high level professional volunteerism. Just as in nursing, librarians have projects of increasing complexity. Mary is currently working together with Judy Davidson and Patty Graham on an international project with the Society of Critical Care Medicine to update the SCCM/ACCM Guidelines for Family Centered Care. Mary is the guideline writing team's librarian leading a group of over 20 scientists from all over the world in a systematic review of the literature related to family centered care. This is one of the most challenging and rewarding experiences a librarian can engage in. She is the 'keymaster' to the data that is being reviewed to assure that the document is evidence-based. As Mary pointed out one day, "If one of the nurses or physicians does not know how to do their role on the project, they can learn from someone else. If a doctor or nurse makes an error in analysis of the evidence, there is a second person always assigned to assure accuracy as a quality control, but if the librarian is not accurate, it can be a real problem because there is only one librarian on the guideline writing panel". Mary just

finished organizing and executing a literature review including over 250 citations so that the group could review every published report of surveys or interviews of families, patients, staff or physicians related to family centered care in the ICU.

We are grateful for her enduring support and willingness to share her expertise. Mary encourages us to add the library website to our favorites at <http://libraries.ucsd.edu/clinlib/nursing/>. From this site you can use a variety of search engines to begin a literature review, request an article or book, or learn utilize remote access to the library from home.

Nursing Evidence-Based Practice and Statistics Consultant

JoAnn Daughtery PhD, RN, CNL has worked for UCSD health Systems since 2002. Her first position was in Nursing Education Development and Research as an Academic Liaison to the schools of nursing in the area.



Currently, she is a per diem staff RN in Preoperative Care center at Chancellor Park (La Jolla). Joann also teaches nursing at California State University San Marcos. At Judy Davidson's invitation, she has been working with staff nurses on the statistical analysis of their EBP and research projects. She thoroughly enjoys helping the staff with their interesting and important questions that lead to improved care of patients at our hospitals. It is great to be a part of a nursing department that encourages staff involvement in nursing research and QI. She hopes to meet more of the staff at our future data analysis classes. If you would like to be notified of upcoming data analysis classes, please contact Judy Davidson jdavidson@ucsd.edu to be placed on the interest list.

For My Mother

By Jiraporn (Ann) Rouysaen, RN and Esther Lee, MBA, MNP, RN

It was an honor to be by her side when she took her last breath.

As my sister and I watched my mother's chest rise and fall with each slowing breath, we saw a single tear fall from her eyes as they lay close, it was then that we knew my mother's time had come. My sister and I sat silently next to her. We both kissed her goodbye for the last time. I gently thanked her for the wonderful time we had together, and all the great opportunities she had afforded me.

When my mother was diagnosed with an end stage cancer, she had made a phone call from her home in Chiangrai, Thailand to discuss with me, her last wishes. She had made it clear during our conversation that she did not want heroic measures to save her life, like CPR and intubation. When she started to lose her mobility, I flew back to be with her during her end of life care. Soon after my arrival, she lost her ability to swallow, but she was still able to communicate. At this point, she did not want to have any treatment that prolonged her life. Despite her rapidly deteriorating condition, many decisions still need to be made other than her wishes not to have CPR and intubation. I knew that she needed a Living Will.



The healthcare and legal team at Chiangrai Hospital and I had initiated the first draft of Living Will that allowed my mother to make her medical choices ahead of time. She became the first person to sign a Living Will in Chiangrai, Thailand. The Living Will had not only taken stress off our family decision, but also enhanced our meaningful conversation at a difficult time. Soon after the Living Will was signed, my mother started to lose her consciousness, and she could no longer make decisions for herself. However, the Living Will had extended her right to have comfort care when she needed it, and a peaceful passing at her end of life. — *Jiraporn (Ann) Rouysaen, RN*

I always remember my mom as a kind, tolerant, forgiving, and generous person.

Jointly, my mom and dad's unconditional love have given me the strength and wisdom to overcome many of my life challenges. My mom's passing in 2013 has left me with much grief which motivated me to writing and completing my first scholarly work, "The Arduous and Challenging Journey of Improving Patient Safety and Quality of Care", a project I started earlier and now dedicated to the memory of my mom. In the process of finishing this manuscript, I found strength and comfort which filled a void left by her departure. I feel most honored that this manuscript was published in the 2013 December issue of the Journal of PeriAnesthesia Nursing; I take pride in the fact that this article was also nominated and won the 2014 Mary Hanna Journalism Award presented to me in the 2014 National Conference of PeriAnesthesia Nursing.



This photograph of my mom and me is the last photograph of us taken together after lunch in a place famous for its chocolate dessert. It was never the intention to sit in front of the script on the wall behind us. The discovery of the narrative in the photograph after my mom's passing touches me with tenderness and makes it more poignant and meaningful whenever I look at this picture of us together. "I invite you to watch, smell, taste and feel my love story." — *Esther Lee, MBA, MNP, RN, Assistant Director, PeriAnesthesia Nursing, Hillcrest/Thronton/SCVC*

Fun Facts

Can nurses be the principal investigator (lead investigator) on a research project at UC San Diego Health System?

The overwhelming answer to that is YES! In fact we believe UC San Diego Health System has more active nursing research than anywhere else in San Diego. There are over 40 open research projects with nurses as investigator and in the majority of those studies the nurse is the principal investigator. Click here for the large list of current nursing research at UC San Diego Health System. (See Table C for examples)

What kinds of nurses conduct research at UC San Diego Health System?

Many are in school for their master's or doctorate degree, but others just have a burning question that they want to answer. Some are moving towards clinical ladder advancement and choose a topic that is novel or new and needs to be conducted in a research format for the protection of human subjects.

If I wanted to conduct a study what would my first step be?

All researchers need to complete an online training program. The link can be found at: <http://irb.ucsd.edu/training.shtml>. You will do both the very short UC San Diego Health System specific training and the <https://www.citiprogram.org/program>. When you register make sure to check University of California, San Diego as your affiliation. Complete the biomedical series of workshops. Additional resources for developing a protocol can be found at these links: <http://irb.ucsd.edu/>.

Once training is complete you will register for an IRB password and ID, and then construct a protocol. For further instructions

Should nurses put a physician on the project as principal investigator to get through the IRB easier?

No. There is no reason to do this. The applications are reviewed identically whether the project is submitted by a physician or a nurse. If a nurse needs a mentor, that person can be listed as a co-investigator on the forms. Mentors can be from any discipline.

What is the IRB?

The Investigational review board or IRB reviews research protocols and provides oversight for the protection of human subjects. There is so much research at UC San Diego Health System that there are 5 IRBs which each convene monthly. There are three nursing representatives to the IRB: Judy Davidson, Deborah Wayne and Judith Pfeiffer. In addition to reviewing protocols to make sure they contain the essential elements for approval, they also assure that protocols that affect nursing do not bear an undue burden on nurses in the workplace.

	Study Title	Date Approved by IRB	Study Status	Date Study Completed	Principal Investigator Name(s) and Credentials	Role(s) of Organization's Nurse(s) in the Study	Study Scope			Study Types (Check all that apply)		
							Internal to a Single Organization	Multiple Organizations within a System	Independent Organizations Collaboratively	Replication	Qualitative	Quantitative
1	13083 Predictors of symptom burden in pulmonary arterial hypertension	August 15th 2013	Approved		Madani, Catarina, MS, RN	Staff nurse, Subl	X				X	
2	101501XX A qualitative exploration of compassion satisfaction among nurses	Sept. 14, 201	Analysis in Progress	6/1/2011	Burtson, Paige, MS, RN	Manager, PI	X				X	
3	110886 The Effects of Kelee Meditation on Work-Related Stress, Compassion Satisfaction, Compassion Fatigue, Anxiety, Depression, and General Stress in Actively Employed Registered Nurses	7/21/2011 renew 7/19/12 renew 7/18/13	Approved	Enrolling	Burtson, Paige, MS, RN	Manager, PI		X				X
4	131072 Development of a tool to explore blame for a negative patient outcome	8/16/2013	Data Analyzed		Davidson, Judy, DNP, RN	Research Liaison, PI. Shannon Chakedis, Staff Nurse Sub I			X			X
5	131407 Evaluation of an educational intervention to reduce the effects of stressors associated with Compassion Fatigue among nurses	10/30/2013	Data Analyzed		Hevezi, Julie, MS, RN	Staff nurse, PI	X					X
6	140039 Increasing pneumococcal vaccine administration.	12/18/2013	Data Analyzed		Thompson, Courtney, BAN, RN, PCCN	Staff nurse, PI		X				X
7	130146 The Cost of Caring: The effects of Compassion Fatigue among Emergency Department Staff at UC San Diego Health Systems, Hillcrest	1/28/2013	Approved		Mitchell, Karen, MS, RN	Educator, PI	X				X	X
8	130924 UC San Diego Health System, Hillcrest Emergency Department Community Placement Project	8/22/2013	Approved		Mitchell, Karen, MS, RN	Educator, PI	X					X

* See Pages 48-50 for the full list of Projects

UC San Diego Nurses in the Spotlight

by Beverly A. Morris, Sherlita Aguilar, Lori Johnson and Catie Madani

Shaping Evidence-Based Practice Around the World

By Beverly A. Morris RN, CNP, MBA

With the increased speed of new knowledge and the introduction of technology, keeping current is critical. Ongoing high quality education supported with evidence based practice is the most effective and sustainable strategy to improve professional nursing practice and assure that our patients experience the most current available care. A great deal of important and effective work to improve quality and safety of care are performed in hospitals with little of that work reported in the literature. (BMJ 2009; 338:a3152) "Improvement is an applied science rather than an academic discipline; its immediate purpose is to change human performance rather than generate new, generalizable knowledge." Providing other professionals with the depth and detail of change projects, through publications and continuing nursing education, can help nurses strengthen their professional skills and improve patient outcomes. To this end,

the specialty of orthopaedic nursing advances practice with an eye on the international healthcare marketplace as a venue to both learn and share best practices.

In 2010 nurses from the University of California, San Diego Health System published our results of a joint replacement project in an international orthopaedic nursing journal. The article is a step-by-step approach in the development of a collaborative clinical practice guideline which subsequently became adopted as a best practice model by the Queen Elizabeth Hospital in Adelaide Australia (Morris, Beverly A, Benetti, Maureen, Marro, Hanna, Rosenthal, Cynthia (2010) Clinical Practice Guideline for Early Mobilization Hours After Surgery; Orthopaedic Nursing, Vol 29, Issue 5). An anesthesiologist from the Queen Elizabeth Hospital was searching for U.S. models that demonstrated improvements in the care of the joint

replacement population, and discovered the UC San Diego functional report in a literature search. Just as the United States has government involvement in healthcare (Affordable Care Act), the South Australia government directed their hospitals to improve the quality of care and length of stay, in a cost effective manner, for the joint replacement population.

In 2011, the senior author, Beverly Morris, was invited to develop an education program with the Queen Elizabeth Hospital interdisciplinary team, in order to work toward replication of the published joint replacement clinical practice guideline.

In 2013 at the Australian – New Zealand international orthopaedic nursing conference, Racing to the Challenge, both Ms. Morris and her counterpart from Queen Elizabeth Hospital, Lesley Thomas, Orthopaedic Nurse Practitioner, presented joint replacement clinical practice guideline outcomes.

Journey to the Finish Line: Fast Track Joint Replacements in the Queen Elizabeth Hospital

By Lesley Thomas, Orthopaedic Nurse Practitioner, The Queen Elizabeth Hospital, South Australia

The Queen Elizabeth Hospital performs between 300-350 joint replacement procedures per year. Health round table data indicated average length of stay (LOS) to be between 7 and 8 days, with best practice benchmarks being 5 days. Our objective was to reduce average LOS to between 4 and 5 days. We developed clinical guidelines tailored to our hospital based on proven fast track programs. The guidelines spanned the entire patient journey from pre-op through surgery and the post-operative periods. Education on the guidelines was delivered to everyone involved in the patient journey, including the patients, so as to provide a clear and consistent pathway everyone could follow. Lean thinking methodology provided a basis for this multidisciplinary project to be successful, by ensuring everyone worked together to get to the finish line.



Shift change report is called 'Handover' at the Queen Elizabeth Hospital in Adelaide, Australia and is performed by every RN from both shifts. Each patient is assigned a primary nurse. However, their practice model is that every nurse per shift should be familiar with every patient. Rounds are performed at the bedside with review of the patient's care plan.



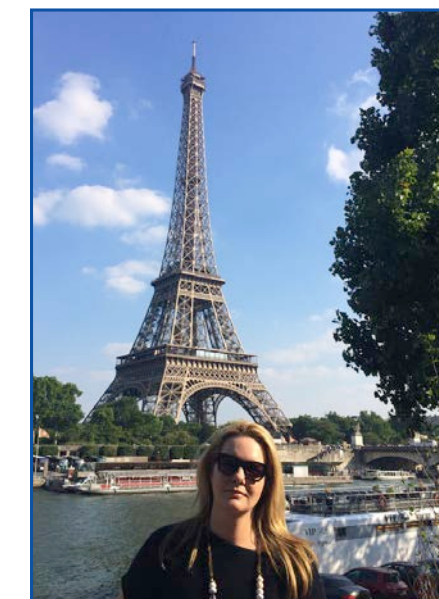
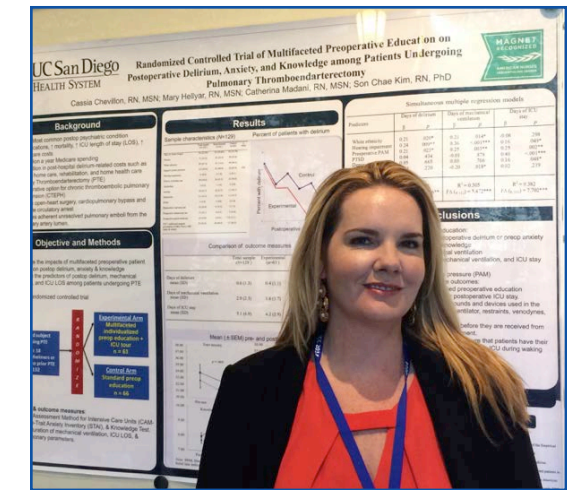
Presenting in Paris and NTI

By Catie Madani, PhD, RN, CHPN

This past June, I was fortunate enough to represent UC San Diego Nurses at The International Chronic Thromboembolic Pulmonary Hypertension (CTEPH) Association's annual meeting in Paris, France. I was proud to represent the stellar work I did with Cassia Chevillon (Yi), Mary Hellyar, Sherry Carreau and Mobe Montesa.

UC San Diego is the world leader in managing CTEPH. Experts from across the globe were referred to UC San Diego for our expert opinion and large database on different topics in CTEPH disease management. UC San Diego had a total of 8 posters from nurses and physicians. I had the pleasure to meet clinicians from Europe to Japan. Sharing the impact of our CTEPH program on an international level, made this springtime trip to Paris memorable on so many levels.

Presenting your work on an international arena sounds more daunting than it actually is. Look for the submission guidelines of international societies in your area of practice and go for it!



A Wonderful Journey

By Sherlita Aguilar, BSN, RN, ONC

Presenting at a national conference is not something that I have always wanted to accomplish, but looking back, it is one of the most rewarding and amazing experiences of my nursing career. My journey began when I spearheaded the Apheresis unit's Performance Improvement (PI) project to decrease the rate of Central Line-Associated Bloodstream Infections (CLABSI).

The Apheresis unit developed CLABSI preventive strategies in collaboration with the hospital Infection Prevention and Clinical Epidemiology (IPCE) department and the following team members:

- Aran Tavakoli RN MSN, Oncology Clinical Nurse Specialist
- David M. Ward MD, Apheresis Medical Director
- Amber P. Sanchez MD, Associate Medical Director
- Majella Vaughn MPH, Administrative Assistant
- Edita Petil BSN, Apheresis Clinical Nurse
- Odette Ada BSN, Nurse Manager.

This intra-professional team was supportive and provided valuable insight and guidance. Unit-specific improvements were based on hospital policies and best practice guidelines from well recognized organizations. The Apheresis CLABSI

preventive strategies included:

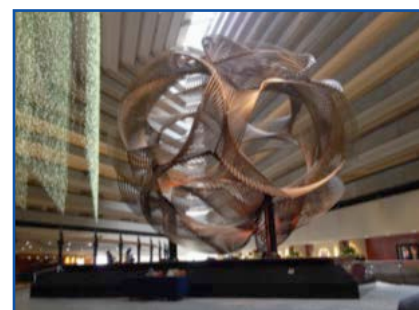
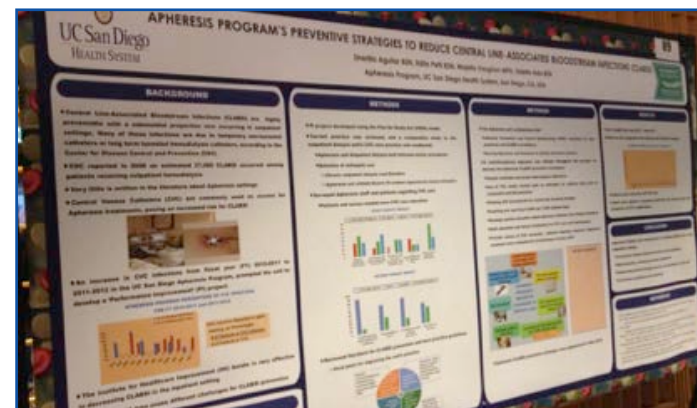
- adherence to proper hand hygiene and aseptic technique
- sterile alcohol pads as antiseptic for catheter hubs
- utilizing central venous catheter (CVC) kits for central line dressing changes
- patient education
- staff training and education
- periodic review of central line necessity.

The unit started reporting CLABSI as central line days, in compliance with Centers for Disease Control and Prevention (CDC) guidelines. Involvement and cooperation from both Apheresis staff and patients made a huge impact on the success of the project. Within three months of implementing the Apheresis CLABSI preventive strategies, a significant decrease in CLABSI infection rates were observed from a unit specific rate of 4.11% for fiscal year 2011 – 2012 to zero central line days. The UC San Diego Apheresis Program maintained a zero central line rate of CLABSI infections for twenty three months.

The project was presented at the 1st Annual UC San Diego Essentials and Advances in Apheresis Therapies conference held in San Diego, California, March 7th to 9th, 2013. This conference was a multidisciplinary

event, attended by allied health professionals, nurses and physicians, and the presentation was very well received. I thought this would be the culmination of my journey, but it was just the beginning. This speaking engagement further motivated me to share this project and our positive outcomes with other disciplines. In April 2014, I presented this project at the American Society for Apheresis (ASFA) and World Apheresis Association (WAA) joint conference held in San Francisco, California. The conference was attended by over 500 physician, nurses and allied health professionals from 36 different countries. This conference allowed me to present the UC San Diego Health System Apheresis Program's Preventive Strategies to Reduce CLABSI not only to the nation, but also to the world.

As a member of the UC San Diego Nursing Research and Evidence-Based Practice Council, I gained valuable knowledge and words of encouragement, which greatly assisted me in preparing for the presentation, in particular from Judy Davidson RN, DNP. Certainly, it was a wonderful nursing journey, and I am grateful to be a part of a team that is able to improve patient care and safety while simultaneously sharing the outcomes with my colleagues.



Improving oncology nursing practice in Hong Kong: An international educational collaborative

By Lori Johnson, RN, MSN, OCN

Nursing practice has historically evolved through trial and error, with nurses the world over 'reinventing the wheel' whenever they sought to improve the quality of patient care. More recently, the ever-growing body of nursing literature makes practice advances readily available, which allows nurses everywhere to learn from each other through published outcomes. Hospital Authority, the government-run health care entity that oversees the seven hospital systems in Hong Kong, takes a different approach. Each year Hospital Authority sends a contingency of advanced practice nurse leaders to an international site for four weeks of intensive training, from which they extract identified best practices that promise to improve patient care in Hong Kong. In March 2013, a group of five oncology advanced practice nurse leaders visited UC San Diego Health System.

During these four weeks, they were to examine our hematology-oncology nursing practice, with a focus on bone marrow and stem cell transplant.

A curriculum was developed and tailored to meet the specific outcomes identified by the visiting scholars. The curriculum consisted of the following:

- Oncology classes that are offered annually at UC San Diego
- Expert speakers who provided private lectures on topics ranging from total body irradiation to stem cell processing
- Time spent observing nursing practice in action in both inpatient and outpatient clinical areas

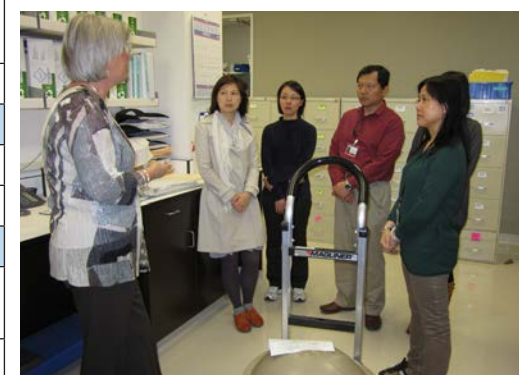
To round out the month-long visit, cultural excursions to Balboa Park and the San Diego Zoo provided bonding time for hosts and guests.

Throughout the month we were engaged in lively conversations as we compared the challenges we share,

along with our sometimes very different solutions to these challenges. A weekly debriefing allowed for exchange of ideas and for adaptation of the curriculum to ensure that goals were being addressed. At the end of the month a formal survey was administered to evaluate the curriculum. The visiting scholars were asked to identify best practices that they intended to bring back to Hospital Authority.

In addition to the measurable outcomes, there were wonderful outcomes for UC San Diego Nursing Services. Our visitors validated the outstanding work we are doing, and gave us the opportunity to see ourselves from the perspective of expert nurses who are anxious to work in an environment that supports nursing excellence and fosters professional nursing- an environment like UC San Diego!

UCSDHS Best Practices Recommended for Adoption by Hong Kong Nurses	Hong Kong Authority's Response to Recommendations
TECHNOLOGY	
Electronic Medical Record	Implement in the near future
Web-Based Resources	Immediate Implementation
Barcode Scanning	Implement As Soon As Feasible
SAFETY	
Standardized central line dressing kit	Near Future
Independant double verification for chemotherapy	Implement As Soon As Feasible
Up-to-date weight for each chemotherapy infusion	Declined Implementation
Pre-filled syringes	Implement As Soon As Feasible
STAFF DEVELOPMENT	
Standardized training continuing education	Immediate Implementation
Standardized nursing guidelines	Immediate Implementation
COST SAVING	
Mixing chemotherapy only after confirm laboratory values	Immediate Implementation
On-line medication information	Future Consideration



Holistic Nursing and Interprofessional Research at UC San Diego

By Eloisa Cutler

As a Respiratory Therapist (RT), caring for patients at the end-of-life can be one of the most challenging and heartbreaking aspects of our job. We are trained to be compassionate and empathetic, but we have to be careful, because it can be very draining emotionally when we become attached to our patients. This is particularly true in the case of Cystic Fibrosis (CF) patients, where relationships are cultivated over many years, due to the chronic nature of the disease.

Last year, I attended a palliative care class, with my co-workers in Respiratory Therapy. During the class, there was some discussion about compassionate extubation. One of my peers spoke up about the timing in which RTs become aware of the extubation decision, despite the major role they play during this process. Her concern was that RTs are not given enough time to be emotionally prepared, and may feel left out of the decision process despite being integral to the patient's care. Shortly after the class, Catie Madani, an RN who I've worked with in the Thornton ICU, had a conversation with me about this issue. She suggested that it would be interesting and important to investigate the emotional effects on RTs of performing compassionate extubation. We decided to collaborate on an exploratory study here at UC San Diego. After researching the literature and finding very limited published data, we co-wrote the research plan, received IRB approval, and began interviewing therapists. We expect to complete the project before the end of the year.

Personally, this is a very important study to me. It was surprising how little literature was out there to help understand and support the RT's role

during compassionate extubation, despite the vital role we play. Respiratory Therapists are the health care providers who actually have the responsibility to physically withdraw advanced life support.

We hope our findings lead to a better understanding of the RT's perspective, and how they cope during this challenging process. This may lead to theory development as well as encourage UC San Diego and other institutions to become more aware of the RT's role and emotional response during compassionate extubation. Limitations in the present process and ideas for improvement may also be discovered, and in turn, lead to improved RT education at the national level. Ultimately, this will provide better care for patients and their families during one of the most difficult times in their lives. I am honored to be a part of this study.

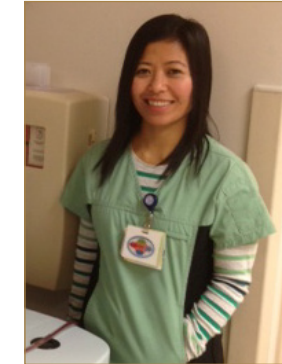


Eloisa Cutler

UC San Diego Nursing Research and EBP Council Members



Karen Vejvoda, BSN, RN, CDE, has been employed at UCSD since 1998, working the entire time with the Diabetes Prevention Program, a multi-center clinical trial sponsored by the National Institutes of Health (NIH). As a research nurse, she focuses on careful data collection while monitoring the safety and wellness of the study subjects. She is required to adhere to many local, state and federal regulations during the study protocol. Karen uses her skills as a Certified Diabetes Educator when she helps study participants learn protocol-prescribed lifestyle and diabetes management behaviors. She completed the UCSD Extension Certificate Program in Clinical Trials Design and Management, and achieved national endorsement as a Certified Clinical Research Coordinator. Karen joined the Nursing Research and EBP Council for the opportunity to collaborate with nurses who love learning and enjoy the rewards of the research process. Research offers Karen an exciting opportunity to make a difference now and for the future. She is grateful that the Council welcomes all nurses, no matter their background or clinical role, and has learned about nursing research through her membership. Karen believes, "If you are new to the research process, want to strengthen your developing research skills, or are a seasoned research veteran, this is the place for you. It's truly energizing to be around such a dedicated, enthusiastic, professional group of nurses." She encourages other nurses to join the Council and inquire about your practice through research and evidence-based practice techniques.



Sherlita Aguilar BSN, RN, ONC, is a clinical nurse in the Apheresis Program of the UC San Diego Health System. She received her Bachelor of Science in Nursing from St. Louis University in the Philippines in 1998, and has worked in various fields, with a special interest in community nursing. Sherlita immigrated to the United States of America in 2007, to improve her skills and increase her knowledge of nursing practice. She worked at Sharp Coronado Hospital in the Telemetry/Medical Surgical area in 2008. After hearing so many great things about UCSD, she joined the Trauma/Orthopedics/Neuro-Surgery Acute Care Med/Surg Specialty Unit and worked there for six years. While a member of the 8th floor staff, she joined the Bonafide Orthopedic Nursing Education Symposium (BONES) committee and became Orthopedic Nurse Certified (ONC). In 2011, she transferred to the Apheresis Program to venture into other fields of nursing. Joining the Nursing Research and Evidence-Based Practice (EBP) Council was one of the most fulfilling professional collaborations of her nursing career. This council benefited her in many different ways, including gaining access to a vast number of nursing projects, which gave her insight into increasing her knowledge base and improving patient outcomes. She presented her Central Line-Associated Bloodstream Infection (CLABSI) project in fulfillment of her Clinical Nurse III advancement to the Council, and has embraced many opportunities to disseminate her work.



Michael Baumgardner, MSN, RN, CCRN, CNL is currently the assistant nurse manager of the Progressive Care Unit (7/9/11 PCU), the co-chair of the Shared Governance Nursing Cabinet, and a member of the Nursing Research and EBP Council. Michael earned his bachelor's degree from UC Santa Cruz. He was contemplating entering medical school upon graduation, but decided instead to take a year off from school. During that time he worked within a Skilled Nursing Facility in their admission department.

While working in that capacity, Michael decided that medical school was not the academic degree he wanted. Instead, he began a five-year discernment process about a vocation in ministry.

In 1995 Michael received a Master's in Divinity from the Pontifical Gregorian University in Italy and was ordained a priest. He has worked extensively with end of life care while serving as a Catholic Priest in the Diocese of San Diego and as a spiritual counselor at San Diego Hospice. It was his work within hospice that inspired him to reconsider a career in the healthcare industry. The interdisciplinary and holistic approach to providing care for hospice patients made such an impression on him, he decided to pursue a nursing degree. He attended the University of San Diego, Hahn School of Nursing and received his Master's in Nursing in 2011. Shortly after graduating, Michael was hired to work on the progressive care unit. Recently, Michael joined the Nursing Research and EBP Council at UC San Diego to learn from others who have been engaged in the process of conducting research. He is passionate about bringing an interdisciplinary approach to the care of the human person that promotes the dignity of both the patient and family.

Michael returned to school in the Fall of 2014 to work on his PhD in Nursing at University of San Diego. His research interest is focused on the impact of the inclusion of palliative care on the spiritual well-being and quality of life indicators in the caregiver.

UC San Diego Nursing Research and EBP Council Members

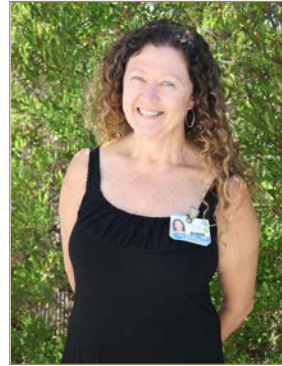


Mary A. Wickline, MLIS, M.Ed. graduated from UCLA with a Master's in Library and Information Science.

It was a mid-life career change to become a librarian, although she feels she is 'a born librarian'. Mary loves searching for and finding information. Long before she returned to school to pursue librarianship, she was the person her friends asked to find information (pre-Google). She helped lawyers, journalists, and, simply, friends with newly-diagnosed relatives who wanted more information.

She applied for the position at UC San Diego because it was an Instruction & Outreach Librarian position. The thought of teaching with the resources available at UC San Diego was wonderful. She attributes a great deal of her success as a librarian to the Nursing Education Development and Research (EDR) department. She considers EDR nurses the 'fingers' throughout the organization. By partnering with EDR staff and attending departmental meetings, she was able to focus her work toward alignment with the goals of the organization. She considers the Nursing Research and EBP Council an excellent partner in facilitating the work of nurses who seek to improve the organization. She remains an active partner and resource for all staff needing any kind of guidance or assistance in searching databases for information.

Mary believes there is so much innovative, transformational work in nursing at UC San Diego, and it has been her pleasure to work in an environment that cares about bringing research to practice. She believes nurses, teachers, and librarians are hard-wired to help – at least the early adopters at the leading edge of practice seem to be, and that, in itself, makes them great to work with!



Lori Herman, BSN, RN is one of the newest members of the Nursing Research and Evidence-based Practice Council. Lori graduated with a BA in Communications from University of Hawaii and had her first career in cable programming and marketing. Although she grew up in Hawaii, she has called San Diego "home" since 1989. After completing the Grossmont College Nursing Program in 1998, she joined UC San Diego in 1999 as a critical care and trauma nurse in the SICU/Trauma Unit at Hillcrest. Currently, she is a Nurse Registrar with Trauma Administration and is also a Trauma Nursing Core Course (TNCC) Instructor. Lori and her 'supportive, loving' husband are avid SDSU basketball and Padre baseball fans. She has 4 children - a pharmacist, airman, college coed, and the dog!!



Laura Vento RN, MSN, CNL is Assistant Nurse Manager of Quality for the Medical Surgical division at UC San Diego Health System. She joined UC San Diego in 2008 as a Master's Entry (Clinical Nurse Leader) new graduate RN from University of Virginia, having a previous bachelor's degree in Health Science from James Madison University. Laura was inspired to pursue nursing during her two year service as a rural health extension Peace Corps Volunteer in East Timor. Laura joined the Nursing Research Council after her experience utilizing the council as guidance and consultation in her own evidence-based practice project "Implementing teach back during transitions of care". She has been an active member of the Research Council and conference planning committee since 2012.



Laura G. Dibsie, MSN, RN, CCRN, CNS is currently the chair of the Nursing Research and Evidence-Based Practice Council. She graduated from USC with a BSN prior to starting her career in San Diego. During the first years of her career, she completed a training program for the surgical intensive care unit, precepted new staff, participated in shared governance, and met many wonderful patients, families, and colleagues. She was motivated to continue along the path of lifelong learning and obtained her Masters in Nursing degree (MSN) from University of San Diego Hahn School of Nursing in 1996.

While advancing herself professionally, she also met and married her husband. They have made San Diego their permanent home and have 3 beautiful daughters. The choice to maintain work – life balance brought her to UC San Diego in 2001. The environment at UC San Diego and the changes made in the Department of Nursing have allowed her to publish, attend local and national conferences as a poster and podium presenter, collaborate with many well respected experts, and achieve many personal and professional goals. Laura is the Clinical Nurse Specialist for the Surgical Intensive Care/Trauma Unit (SICU) at Hillcrest, outgoing Chair of the Nursing Skin Committee, and an active member of several other organization wide groups. She strongly encourages staff to participate in Shared Governance, take the opportunity to meet and collaborate with peers from throughout the organization, and be inspired by the good work being done by UC San Diego nurses.



Karen Elizabeth Mitchell-Keels, MSN, RN, CMCN started as a Clinical Nurse II in the Emergency Department in 2003 and became a Certified Managed Care Nurse in 2007. In 2012, she earned a Master's Degree in Nursing (MSN) with an emphasis in Healthcare Organizational Leadership from Grand Canyon University. Karen entered her Doctoral Residency in March of 2015. Karen is the UC San Diego Health System Department of Emergency Medicine's Clinical Educator and Outreach Manager. This role blends nursing education and community outreach. She is interested in the "Compassion Fatigue" phenomenon experienced by ED nurses in urban settings.

Karen's passion to improve healthcare conditions for "at risk" homeless patients suffering with co-occurring, psychiatric mental disorders and substance abuse, has been the mainstay of her research this year. She is the principle investigator on an IRB approved study "ED Community Placement Project, 'a right service- right venue' approach in the management of ED frequent users". She has presented her work locally and nationally, and internationally. In 2014, Karen was honored with UC San Diego Health System Nurse Consultant of the Year award for her work on the project.

Karen was introduced to the UC San Diego Nursing Research and EBP Council when she attended the graduation program for the San Diego Evidence Based Practice Institute Consortium for Nursing Excellence. Little did she know the invitation to join the council would make a significant impact on her career trajectory.

Karen also serves as a Diversion Evaluation Consultant on the California Board of Registered Nurses (BRN) Diversion Council.



Judy E. Davidson, DNP, RN, FCCM is instrumental in inspiring advancements in our caring profession.

She is the Nursing Research and Evidence-Based Practice Liaison, an experienced researcher, educator, lecturer and clinical nurse specialist. She is doctorally prepared with a specialization in Organizational Leadership from Case Western Reserve University. She is actively involved in the Society of Critical Care Medicine (SCCM) as chair of the Post Intensive Care Syndrome task force, chair of the SCCM Ethics Committee, co-author of the 2013 SCCM Pain Agitation and Delirium guidelines, and lead author of the SCCM guidelines for Patient and Family Centered Care.

Dr. Davidson is also involved in the American Association of Critical Care Nurses, Research Chair for the Gamma Gamma Chapter of Sigma Theta Tau and member of NaCNS and the ANA. She is adjunct faculty for SDSU and guest lecturer for PLNU. She is a nurse theorist and has published a midrange theory entitled "Facilitated Sensemaking" which guides nurses in the care of the families of patients experiencing critical illness.

Dr. Davidson has published over 50 peer-reviewed manuscripts in medical and nursing journals. She has also authored book chapters on "Measuring CNS Outcomes" and "Moral Distress".

UC San Diego Nursing Research and EBP Council Members



Heather Warlan PhD, RN, CCRN

began her career in psychiatric research at the University of Wisconsin-Madison. After moving to San Diego in 2004, she began working at UC San Diego as the deputy program manager of the Neuropsychiatry and Behavioral Medicine Unit's research group. In 2010 she graduated with a master's in nursing and started a new journey in the CCU at Hillcrest. On the unit, Heather worked as a bedside nurse, code nurse, and preceptor. She taught pre-licensure and master's-level students at the University of San Diego (USD), Hahn School of Nursing and Health Science in the simulation lab using both mannequins and standardized patients. At the same time she was also enrolled at USD earning a PhD in nursing. It was her experiences, both in psychiatric research and as a critical care nurse, that led to her research topic, ICU-induced PTSD. Recently, she transitioned into the Regulatory Affairs department at UC San Diego and is clinical faculty at USD.

Upon completing her dissertation research, Dr. Warlan had her abstract submission accepted for a podium presentation at the 2014 UC San Diego Nursing Research and EBP Conference. This research has also been presented as a poster at the Western Institute of Nursing (WIN) and at USD's Graduate Research and EBP Conference. Heather's review of literature related to her topic will be published in June of this year (see citation below), with the research results currently under review for publication as well.

Warlan, H. & Howland, L (2015). Posttraumatic stress syndrome associated with stays in the intensive care unit: Importance of nurse involvement. *Critical Care Nurse* 35(3).



Frann Teplick, MSN, RN-BC, CNS

received her education and began her obstetrical/perinatal nursing practice on the Northeast Coast. She graduated with a BSN from the University of Bridgeport (Connecticut) and an MSN from the University of Pennsylvania (Philadelphia) in the early 1980's. Shortly after starting her advanced practice nursing career as a Clinical Nurse Specialist (CNS), she received specialty certification as a High Risk Perinatal Nurse. Frann ventured to San Diego in 1990, and has been involved with perinatal healthcare in a variety of institutions. She returned to the academic environment in 1999 as the Perinatal CNS for OB services at UC San Diego Medical Center. Her love for the high risk obstetrical patient is evidenced by a few of her career highlights such as: developing a Maternal/Fetal ICU in Philadelphia with a noted publication, contributions to the National Certification Corporation OB Critical Care Certification Task Force, collaboration with colleagues in San Diego county to develop the annual AWHONN Fetal Monitoring Courses, assisting with opening the first Perinatal Special Care Unit in San Diego, and educating nurses locally and nationally regarding best perinatal nursing practice. Frann has been an active member of the Nursing Research and EBP Council since its inception. Her involvement with the Council and its activities are many and varied. She assisted with the implementation of the "Digging for Dinosaurs" clinical inquiry program, provided staff in-services/classes regarding evidenced-based practice, assisted with project discussions in CNIII Workshops, reviewed and critiqued EBP projects, developed/implemented an interdisciplinary research project in L&D with noted publication and poster presentation at a national AWHONN conference, assisted with coordination of the annual Nursing Research and EBP Conference, and has mentored staff to present poster presentations at local and national conferences.



Evelyn Pacio, MSN, RN

graduated from Point Loma Nazarene University with a BSN in 2000, and from University of Phoenix with a MSN/MHA in 2011. Since 2008, she has been an Assistant Nurse Manager in the Family Maternity Care Center and has worked previously in Postpartum, Labor and Delivery, and Ambulatory Surgery Center (Pre-op and PACU). Evelyn is a newer member of the Nursing Research and EBP Council, and also belongs to the FMCC/BCR Quality Council. Other committees fortunate enough to have Evelyn's membership are: POC/Education, OB Jacobs Medical Center, Perinatal Division, Patient Education, and others. Another Council member and colleague, Frann Teplick, invited her to attend the Nursing Research and EBP Council. She says, "The Council has encouraged me to put my thinking cap on, develop ideas, implement, and evaluate a project. With our Magnet designation, it's important to measure outcomes before, during, and after a performance improvement project. One of my goals is to complete a research based project by the end of 2015". When not at the Medical Center, she enjoys relaxing with family and friends, watching the National Geographic show "Wicked Tuna," and going to church.



Dianne Warmuth, MSN, RN, CNS

earned a BSN from CSU Fresno and an MSN as a Critical Care CNS from California State University Long Beach. She began her nursing career in a small community hospital in Fresno, and her first critical care job was in the Trauma Surgical ICU at Loma Linda Medical Center. She came to UC San Diego to work in the trauma unit and had several different roles over the years, which ultimately allowed her to return to graduate school.

Dianne moved to Spain with her family for 5 years and worked for the Navy Marine Corps Relief Society as a Visiting Nurse. Her travels continued as she moved to Connecticut and was able to continue her visiting nurse role, while also working as a critical care and ER Educator in a small community hospital.

From the North, she made her way South and worked as a critical care educator for Methodist University Hospital in Memphis. Her travels finally returned her home to San Diego where she worked at Sharp Hospital as a post kidney transplant coordinator and then took a position at UC San Diego as a Critical Care CNS for the PCUs at Hillcrest.

Dianne recently assumed the role of Advanced Practice Council Chair, was previously the Chair of Quality Council, is a member of the CAUTI task force, the Nursing Cabinet, and the Nursing Research and EBP Council.



Debbie Ashton, BSN, RN, CNN

graduated with a BSN from CSU Dominguez Hills. She has worked at UC San Diego for a total of 28 yrs. She works in the Nephrology Department and can be found treating patients at both campuses. She is specifically interested in the implementation of evidence-based practice as well as patient and family teaching. Debbie joined the Nursing Research and EBP Council because she desired to be a part of establishing evidence-based practice at UC San Diego. Through participation in the Council, she has worked with many UC San Diego experts in nursing research and EBP, and has learned a great deal. She says the group "energizes and inspires" her. She is an invaluable part of the group having taken on the role of 'communication manager' and secretary.

When she is away from the Medical Center, Debbie enjoys spending time with friends, hiking, camping, gardening, sewing, quilting, and learning. She is a gifted artist.



Catherina (Catie) Madani, PhD, RN, CHPN

started at UC San Diego in Thornton ICU in 1999. She received her Bachelors in Nursing from the University of Massachusetts, Amherst in 1998, and a PhD in Nursing from the University of San Diego in December 2014.

Catie's professional focus is Palliative Care as well as care at End-of-Life. She is the current co-chair of UC San Diego's interprofessional Palliative Care Committee. Her dissertation, entitled "Predictors of Symptom Burden in Pulmonary Arterial Hypertension", reflects her passion. Catie is an active member of San Diego's Sigma Theta Tau, Zeta Mu chapter, and Hospice and Palliative Nursing Association chapters. She is a HPNA Nationally Approved Educator. Catie has disseminated her work nationally and internationally.

She joined the Nursing Research and EBP Council when she returned to school several years ago. She hoped to find mentors and collaborators for school projects and her work, in general. She found being a part of this group has been very helpful, and allowed her to make some wonderful friendships and professional relationships.

UC San Diego Nursing Research and EBP Council Members

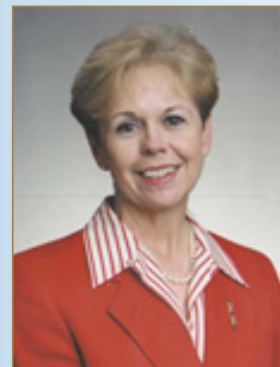


Judith Pfeiffer PhD, RN, NEA-BC, PMHCNS-BC is Director of Nursing Education, Development & Research and Director of Psychiatric Services. She joined UC San Diego Health System in 1997 and became Director of EDR in 2011. At that time she also joined the Nursing Research and EBP Council as Administrative Liaison. Dr. Pfeiffer oversees the NICHE (Nurses Improving Care for Healthsystem Elders) program, advocates for Peer Review, and supports Magnet principles in all her work. She was appointed to the Institutional Review Board in 2002 and is an Assistant Professor, UCSD School of Medicine, Psychiatry department. Dr. Pfeiffer received her PhD in Leadership and Human Behavior and holds an MSN in Psychiatric Nursing/Clinical Specialization. She is ANCC Board certified as a Psychiatric/Mental Health Clinical Nurse Specialist as well as Nurse Executive-Advanced. When not at work, Judith enjoys travelling.

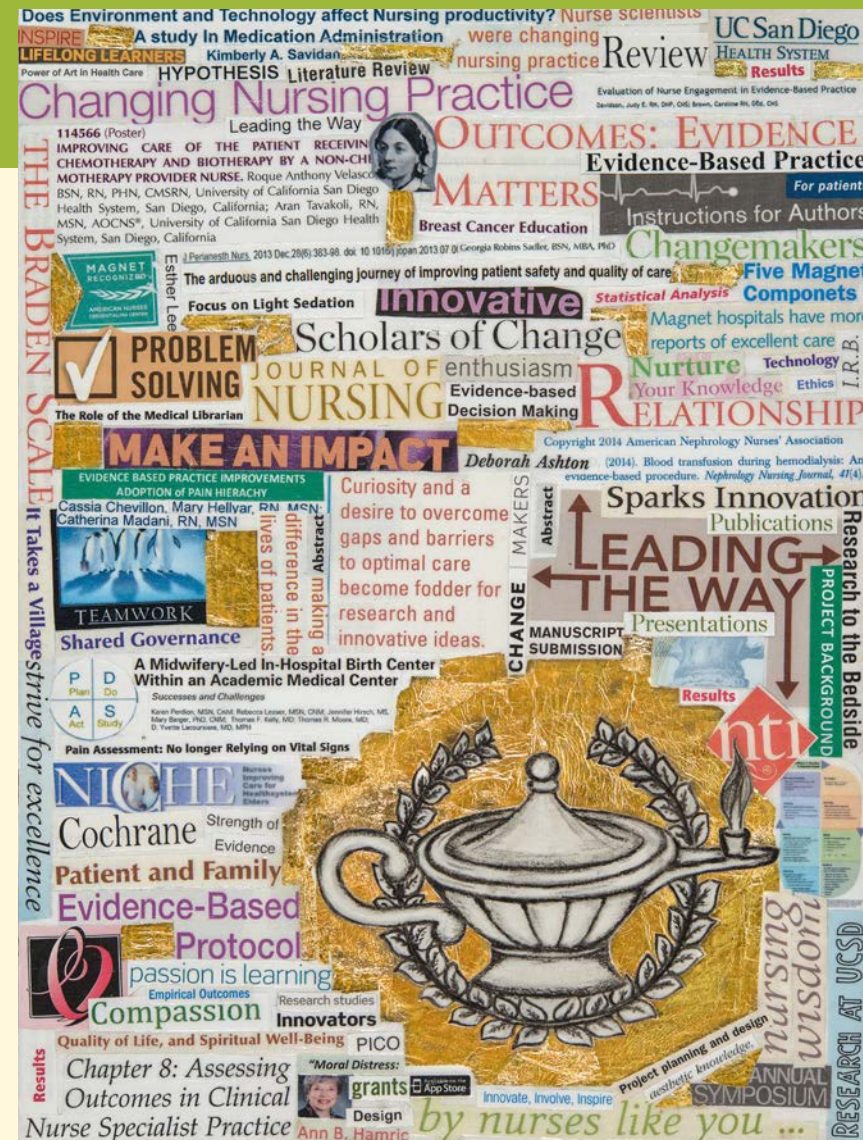
Additional Authors



Lori Johnson, RN, MSN, OCN
Clinical Nurse Educator, Moores Cancer Center



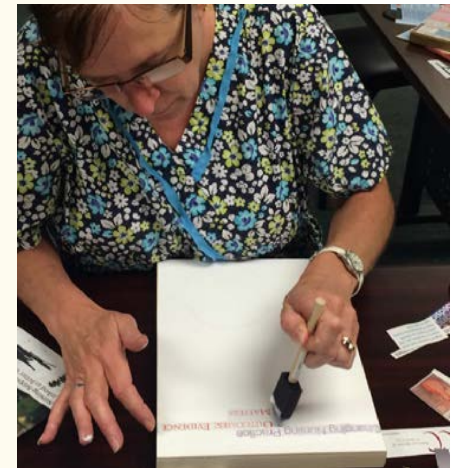
Beverly A. Morris RN, CNP, MBA
Clinical Nurse Educator, Acute Care



“Aesthetic Knowing” is a fine art project created by the Nursing Research and Evidence Based Practice (EBP) Council in tribute to nursing as an ‘Art and a Science’. Aesthetic knowing was first described by Carper (1978) to acknowledge that using the artistic senses can create a deeper understanding of a concept. In this case, the concept of study was knowledge dissemination. We create knowledge through projects designed to advance the profession then disseminate this knowledge in the form of presentations and publications. This decoupage collage was created using printed materials that included recent presentations and publications of many UC San Diego nurses. Also included was a reference to the keynote address featured by guest speaker Dr. Ann B. Hamric at the 2014 EBP/Research Innovations Conference. Searching the array of inspiring research publications, podium presentations and other journal articles, the council members clipped key phrases and terms that together created a comprehensive view of the work of UC San Diego nurses. Look through the collage to find the tribute to our medical librarian, Mary Wickline, who tirelessly and graciously supports nurses in their efforts to disseminate new knowledge.

Florence Nightingale’s historical contribution to nursing is reflected here both as the council logo of the “Nursing Lamp of Knowledge” for her early work of data collection; and for her recognition of nursing as a fine art. The significance of the “Art of Nursing” has been linked to both the development of critical thinking and clinical judgment and as an inextricable component of professional nursing knowledge alongside scientific knowledge (AACN, 2008). “Art is also very therapeutic and beneficial to self-care congruent with our new professional practice model,” states Linda Lobbstaef UC San Diego Nurse and Artist that provided the charcoal sketch and taught the group the decoupage technique. Her work was displayed at the 2014 National Magnet conference, and will also be displayed, along with the work of other staff, at the Nursing Research and EBP Conference this year on June 2.

About the Cover



References:
American Association of Colleges of Nursing. (2008). *The essentials of baccalaureate Education for Professional Nursing Practice*. Washington, DC: Author
Carper, B.A. (1978). Fundamental patterns of knowing in nursing. *Advances in Nursing Science*, 1(1),13-23.



The Evidence-Based Practice Council wins 1st Nursing Team of the Year Award.



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For more information about nursing at UCSD, log on to our nursing website at <http://medinfo.ucsd.edu/nursing>.

First Name	Last Name	Unit	ProjectType	Publication Citation	Title of Talk or Poster	Conference Information
Deborah	Ashton	Hillcrest	Podium Presentation			
Laren	Mitchell	Hillcrest	Podium Presentation			
						(2014, July). Poster presented at Sigma Theta Tau International's 25 th International Nursing Research Congress, Hong Kong, China. Abstract available at Virginia Henderson Global Nursing e-Repository: 67002
	Holt, L.C., Bormann, J., Taylor, A., Liu, L., & Burkard, J.F.	PACU	Poster Presentation	Abstract available at Virginia Henderson Global Nursing e-Repository.	Efficacy of mantram repetition program on insomnia in veterans with posttraumatic stress disorder.	
Esther	Lee	La Jolla	Poster Presentation	Study of OSA Patients' Characteristics and Discharge Location, STTI Odyssey Research Conference, October 2014.		
Trika and Cindy	Clemens and Postel	Hillcrest	Poster Presentation		They were awarded the best poster for "Models of Care."	National Perinatal Conference
Trika and Cindy	Clemens and Postel	Hillcrest	Poster Presentation			NANN
Deborah	Ashton	Dialysis	Publication	Blood transfusion during hemodialysis: An evidence-based procedure. Nephrology Nursing Journal, 2014;41(4).		
Caroline	Sánchez C, Valdez A, Johnson L.	Moore's Cancer Center, EDR	Publication	Hoop dancing to prevent and decrease burnout and compassion fatigue. J Emerg Nurs. 2014 Jul;40(4):394-5. doi: 10.1016/j.jen.2014.04.013.		
				Fall Risk Following Knee and Hip Arthroplasty Associated with Continuous Peripheral Nerve Blocks" has been accepted for publication in the J. of Med-Surg Nursing, 2016 in press.		
Deverly	Morris et al.	Hillcrest	Publication			
				chapter Societal Reintegration following a Burn Injury. published in the 2014 Fourth Edition of Medical, Psychosocial and Vocational Aspects of Disability.		
Cindy and Ann	Rutter and Malo	Hillcrest	Publication	A Correlational Study of Sleep Apnea Patients' Characteristics with Discharge Locations" Journal of PeriAnesthesia Nursing. In Press		
Esther	Lee	La Jolla	Publication			
Feather	Warlan	Both	Publication	Warlan, H. & Howland, L. ICU-related PTSD: the importance of nurse involvement. Critical Care Nurse (in press).		
Nicole	Wayne	Hillcrest	Publication	Trying Times. Critical Connections. August-September 2014		
Judy, Kim, Dianne, Nancy, Annemarie	Davidson, Savidan, Barker, Warmuth, Degen-DeCort	Both	Publication	Using evidence to overcome obstacles to family presence. Critical Care Nurse Quarterly. 2014;37(4):407-421.		
Judy	Davidson	Both	Publication	Family presence during cardiopulmonary resuscitation: an opportunity for meaning-making in bereavement. Kentish-Barnes N, Davidson JE, Cox CE. Intensive Care Med. 2014 Jul 11. PMID: 25011576		
Esther	Lee	La Jolla	Publication	An educational Plan for all the Nursing Staff in the Procedural Treatment Unit of the Sulpizio Cardiovascular Center Journal of PeriAnesthesia Nursing. In Press		
Lara and Frann	Fieberger and Teplick	Hillcrest	Podium Presentation		Educational intervention to improve adherence to SSI protocol in planned C-Sections	EBPI Conference, Schaetzel Center La Jolla, November 20, 2014
Melissa, Laura, Lara, Leah	Anderson, Vento, Lubimirsky, Yoshisaki-Yusi	Both	Poster Presentation		Creation of a nurse protocol to reduce indwelling catheter days	EBPI Conference, Schaetzel Center La Jolla, November 20, 2014
Leah and Geoffrey	Adrid and Marascan	Both	Poster Presentation		Development of a standardized hospital supervisor orientation to improve confidence, consistency and throughput	EBPI Conference, Schaetzel Center La Jolla, November 20, 2014
Christine	Ensign	CHF Clinic	Poster Presentation		Heart failure patient self-care: An Evidence-based outpatient management program.	Western Institute of Nursing's 48th Annual Communicative Nursing Research Conference to be held April 24, 2015 Hotel Albuquerque at Old Town in Albuquerque, NM
Cathleen	Sugarman	La Jolla	Publication	Creating and Standardizing Annual Chemotherapy Competencies Throughout a Healthcare System. Carreon, Nancy; MS, RN; Sugarman, Cathleen; MSN, RN; Beener, Elizabeth; MSN, RN; CNS, CMSRN; Agan, Donna ; pg. 35-39		
Esther	Lee	La Jolla	Podium Presentation		CORRELATIONAL STUDY OF SLEEP APNEA PATIENTS' CHARACTERISTICS WITH DISCHARGE LOCATIONS" has been selected for both Oral PowerPoint Presentation and Poster Presentation at the 34 th ASPAN National Conference in San Antonio, Texas. Wednesday, April 29, 2015.	

First Name	Last Name	Unit	ProjectType	Publication Citation	Title of Talk or Poster	Conference Information	
				Sitter Reduction through Mobile Video Monitoring: Implementing a Nurse-Driven Sitter Protocol. JONA. July/Aug 2015 (In Press)			
Paige and Laura	Burston and Vento	Hillcrest	Publication			2015 ACNL Friday, March 20th Liberty Station Conference Center Point Loma	
Aura	Vento for Alice Chen	Hillcrest	Podium Presentation		Polishing Hourly Rounds by Implementing a Caring Communication Competency	2015 ACNL Friday, March 20th Liberty Station Conference Center Point Loma	
Corena	Sun	Hillcrest	Podium Presentation		Implementation of a Stroke Survivor Support Group at UC San Diego's Comprehensive Stroke Center	2015 ACNL Friday, March 20th Liberty Station Conference Center Point Loma	
Theresa	Angeles	Hillcrest	Podium Presentation		No habla Español: Neurological Assessments on Spanish-speaking Patients	2015 ACNL Friday, March 20th Liberty Station Conference Center Point Loma	
Christina	Casares-Machado	Hillcrest	Podium Presentation		An Innovative Approach to Skill Mix	2015 ACNL Friday, March 20th Liberty Station Conference Center Point Loma	
Resilda	Newsom	La Jolla	Poster Presentation		The Effectiveness of Dexmedetomidine on Respiratory Adverse Events, Overall Use of Narcotics, and Pain Levels in Perioperative Patients with Obstructive Sleep Apnea: A Systematic Review	2015 ACNL Friday, March 20th Liberty Station Conference Center Point Loma	
Janor	Yoshisaki-Yusi	Hillcrest	Poster Presentation		Enhancing Staff Nurses' Moral Through Charge Nurse Rotation in an Orthopedic Setting	2015 ACNL Friday, March 20th Liberty Station Conference Center Point Loma	
Denifer	Garner		Poster Presentation		Improving Safety with Titration of Continuous Infusions	2015 ACNL Friday, March 20th Liberty Station Conference Center Point Loma	
Denifer	Mitch	Hillcrest	Poster Presentation		Rn Self-Assessment When Caring For The Disruptive Patient	2015 ACNL Friday, March 20th Liberty Station Conference Center Point Loma	
Laren	Mitchell-Keels	Hillcrest	Poster Presentation		ED Community Placement Project (EDCPP): A "right service right venue" approach in managing ED frequent users- Phase II Update	2015 ACNL Friday, March 20th Liberty Station Conference Center Point Loma	
Marlena	Montgomery		Poster Presentation		Triage Redesign Implementation and Pod Project (TRIPP)	2015 ACNL Friday, March 20th Liberty Station Conference Center Point Loma	
Melissa	Anderson	La Jolla	Poster Presentation		Reducing Catheter Associated Urinary Tract Infections by Implementing a Nurse Protocol to Discontinue Indwelling Urinary Catheters	2015 ACNL Friday, March 20th Liberty Station Conference Center Point Loma	
Michele	Carson	Hillcrest	Poster Presentation		Improving Effective Communication	2015 ACNL Friday, March 20th Liberty Station Conference Center Point Loma	
Monica	Neslage	Hillcrest	Poster Presentation		Delivering Inpatient Stroke Education Utilizing Online Learning Modules and Motivational Interviewing	2015 ACNL Friday, March 20th Liberty Station Conference Center Point Loma	
Resilda	Newsom	La Jolla	Poster Presentation		Improving Nursing in Hong Kong: An Innovative Project. Magnet 2015. Atlanta.	2015 ACNL Friday, March 20th Liberty Station Conference Center Point Loma	
Laren	Mitchell	Hillcrest	Podium Presentation		"ED Community Placement Project "Right Service-Right Venue" approach in management of ED frequent users. 2015 ANCC National Magnet Conference® Atlanta, GA. Note: October 7-9, 2015		
Artiz Sandersall	Babette Brad	Trauma EDR	Podium Presentation		Acute Compartment Syndrome After Trauma	Bones, October 2013, Sheraton	
Judy	Davidson	EDR	Podium Presentation		Safe Patient Handling	Scripps Oncology Conference, Doubletree Hotel, San Diego 2013	
Judy	Davidson	EDR	Podium Presentation		Suffering and Compassion	Healthy Work Environments, Moral Distress and Distress Caused by Blame	AACN Regional Conference, San Diego 2013
Judy	Davidson	EDR	Podium Presentation		Family Presence on Rounds	Sigma Theta Tau Odyssey Research Conference, Handlery Hotel, San Diego November 2013	
Judy	Davidson	EDR	Podium Presentation		Exploring Distress Caused by Blame for a Negative Patient Outcome: Oncology Staff Experiences	5/3/2014. Oncology Nursing Society, Anaheim, CA	
Maley	Eileen	Care Coordination	Podium Presentation		San Diego care Transitions Partnership	Presentation on San Diego care Transitions Partnership – panel presentation with partners	
Maley	Eileen	Care Coordination	Podium Presentation			CCTP learning Sessions, various panel presentations in San Diego County on success of CCTP March 2013– March 2014	
Maley and Gilbert	Eileen and Tari	Care Coordination	Podium Presentation			California Association of NPs, March 2014	

First Name	Last Name	Unit	ProjectType	Publication Citation	Title of Talk or Poster	Conference Information
Malley	Eileen	Care Coordination	Podium Presentation		Innovative Role for NP in Transitions of Care; One Institutions Journey	California Association of Nurse Practitioners: work shop and poster presentation on , March 2014 (relates to TNS / NP role for Advanced Transitions of Care)
DiViello	Gabriela	Trauma	Podium Presentation		Acute Compartment Syndrome after Trauma	Bones, October 2013, Sheraton
Essica	Goggin	CF	Podium Presentation		Quality Improvement in Advanced CF	North American Cystic Fibrosis Conference, October 2013
Essica	Goggin	CF	Podium Presentation		Management of Chronic Pain in CF: Barriers and Successes	North American Cystic Fibrosis Conference, October 2013
Essica	Goggin	CF	Podium Presentation		End-of-Life Care in CF	American Academy of Chest Physicians, October 2013
Ratty	Graham	EDR	Podium Presentation		Family Presence on Rounds	Society of Critical Care Medicine, January 2014, San Francisco
Ratty	Graham	EDR	Podium Presentation		Family Presence on Rounds	STTI Odyssey Conference, November 2013
Julia and Tess	Hartford and Croughwell	BICU	Podium Presentation		Staff Initiated Adult and Pediatric Burn Care Competency among Nursing Staff in a Regional Burn Center/Non-Pediatric Hospital	Julia and myself co-authored it along with Eli Strait and Dan Smith. Western Burn Conference in AZ in October 2013
Julia and Tess	Hartford and Croughwell	BICU	Podium Presentation		Staff Initiated Adult and Pediatric Burn Care Competency among Nursing Staff in a Regional Burn Center/Non-Pediatric Hospital	Julia and myself co-authored it along with Eli Strait and Dan Smith. ABA conference Boston March 2014
Yento	Laura	Med/Surg	Podium Presentation		Video Monitoring to Reduce Sitter Use	ACNL, March 2014
Johnson	Lori	EDR	Podium Presentation		Integrative Medicine	Bones, October 2013, Sheraton
Lev	Morris	EDR	Podium Presentation		Challenging the Standard of Care: Prophylaxis	NAON National Congress, October 2013
Lev	Morris	EDR	Podium Presentation		Staff Benefits of Massage Therapy	WALK: Wireless Active Living Kit
Dlsen	Patrick	Quality	Podium Presentation		Meeting the Challenge of Mental Health in Hospitalized Seniors	Bones, October 2013, Sheraton
Judith	Pfeiffer	EDR	Podium Presentation		Technology failures during medication passes.	April 2014 National NICHE Conference
Jim	Savidan	3E	Podium Presentation		Technology failures during medication passes.	ACNL Regional, Feb 2014
Jim	Savidan	3E	Podium Presentation		Technology failures during medication passes.	ACNL Local, March 2014
Jennifer	Storch	BICU	Podium Presentation		Burn Care in Developing Countries: Establishing Sustainable Healthcare	American Burn Association 46 th Annual Meeting Boston, MA March 2014
Cassia and Mary	Yi and Hellyar	EDR	Podium Presentation		Randomized Controlled Trial: Evaluation of Multifaceted Preoperative Patient Education on Anxiety, Delirium, and Knowledge Among Post-Pulmonary Thromboendarterectomy (PTE) Patients	NICHE, April 2014
Cassia and Mary	Yi and Hellyar	EDR	Podium Presentation		RCT: Evaluation of Preoperative Patient Education for Pulmonary Thromboendarterectomy patients	NACNS PTE, 2014 Podium presentation
Cassia	Yi	EDR	Podium Presentation		Revision of the Pain Management Policy.	NACNS Conference, 2014- podium presentation
Cassia	Yi	EDR	Podium Presentation		care of the PTE patient across the continuum of care	Presented with Kathleen Watkins (CVC ICU) and Lea Brudgett (CVC PCU) 2014 CTEPH conference
Cassia and Mary	Yi and Hellyar	TICU	Podium Presentation		Relationship between pre-operative anxiety and post-operative delirium in ICU patients with post pulmonary thromboendarterectomy (PTE) surgery	UC San Diego Nursing Research and EBP Conference, May 29 2013 San Diego
Russell	Haight	6E and 6W	Podium Presentation		Improving patient sleep quality in the ICU	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
Jim	Savidan	2E	Podium Presentation		Does environment and technology affect nursing productivity?	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
Judy	Davidson	EDR, Moore's, Scripps Mercy	Podium Presentation		Exploring distress caused by blame for a negative patient outcome	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
Treselda	Newsom	PACU	Podium Presentation		The effectiveness of dexmedetomidine on pain management in the postoperative setting: A systematic review	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
Heather	Warlan	SICU & CCU	Podium Presentation		Identification of PTSD symptoms in post-icu patients	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
Cassia	Yi	Thorton ICU	Podium Presentation		Bringing Evidence Based Practice to Inpatient Pain Assessment and Management	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
Courtney	Thompson	GI Procedures	Podium Presentation		Inflammatory bowel disease: emphasis on pneumococcal vaccine administration	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
Esther	Lee	PeriAnesthesia	Podium Presentation		Correlational study of sleep apnea patients' characteristics with discharge locations	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
Mori	Johnson	EDR	Podium Presentation		Improving oncology practices in Hong Kong	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
Mori and Kim	Montross	Integrative med, etc.	Podium Presentation		Preferences of patients for integrative medicine	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
Essica	Brady	TICU	Podium Presentation		Creation of a standardized preceptor program	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
Christina	Cazares-Machado	6E	Podium Presentation		An innovative approach to skill mix in the medical-surgical environment	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014

First Name	Last Name	Unit	ProjectType	Publication Citation	Title of Talk or Poster	Conference Information
Brittany	Serences	EDR	Podium Presentation		Improving inpatient hypoglycemia management	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
Synthia	Postel	NICU	Podium Presentation		A developmental approach to 'safe sleep' in NICU patients preparing for discharge	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
Rann	Teplick	FMCC	Podium Presentation		High Risk to Critical Care Obstetrics	April 11&12/Sept. 5&6, 2013 Professional Education Center, Las Vegas, NV & Seattle, WA
Rann	Teplick	FMCC	Podium Presentation		High Risk to Critical Care Obstetrics	May 1 and 2 Professional Education Center, Las Vegas
Jeffrey	Trageser	Lifesharing	Podium Presentation	CMS Western Division Annual Conference. Thursday February 6, 2014	Creative Solutions to Placing Organs	
Herlita	Aguilar	Apheresis	Poster Presentation		PREVENTIVE STRATEGIES TO REDUCE CENTRAL LINE-ASSOCIATED BLOOD STREAM INFECTIONS	Sherlita Aguilar, BSN, Edita Petil, BSN, Odette Ada, BSN, Majella Vaughan, BS. UC San Diego Health System, San Diego, CA, USA has been accepted for poster presentation at the 2014 ASFA & WAA Joint Meeting San Francisco California at the Hyatt Regency. April 3, 2014
Hill and Wright	Brian and Kara	8th Floor Hillcrest	Poster Presentation		Acute Compartment Syndrome	October 2013 Bones Conference, Sheraton
Cherry	Carreau	EDR	Poster Presentation		Transitions of Care	NICHE 2014 Conference
Cherry and Laura	Carreau and Giambattista	EDR	Poster Presentation		Improving Transitions of Care through Teach Back Utilization and Readmission Risk Assessment	NICHE Conference, San Diego, CA
Cherry, Laura, Ayelet	Carreau, Giambattista, Ruppipham	EDR	Poster Presentation		Improving Transitions of Care through Teach Back Utilization and Readmission Risk Assessment	Health Literacy Conference Irvine, CA
Ruth	Chappell	10ICU	Poster Presentation		Hospital Day of Cardiac Arrest is Influenced by Arrest Etiology	January 2014 Society of Critical Care Medicine, Sheri Tran, Rebecca Sell, Ruth Chappell, Sheri Reakvam, Anushirvan Minokadeh Daniel Davis
Ruth	Chappell	10ICU	Poster Presentation		Temporal Variability of In-Hospital Cardiopulmonary Arrest Based on Etiology of Deterioration	January 2014 Society of Critical Care Medicine, Sheri Tran, Rebecca Sell, Ruth Chappell, Sheri Reakvam, Anushirvan Minokadeh Daniel Davis
Ashton	Deb	Dialysis	Poster Presentation		Blood Transfusion During Hemodialysis: An Evidence-Based Procedure	American Nephrology Nurses Association Annual Symposium April 2013 Las Vegas, NV
Ashton	Deb	Dialysis	Poster Presentation		Blood Transfusion During Hemodialysis: An Evidence-Based Procedure	UCSD Nursing Research Meeting: May 2013
Berrits	Dennis	8th Floor Hillcrest	Poster Presentation		Smoking and Osteoporosis	October 2013 Bones Conference, Sheraton
Malley	Eileen	Care Coordination	Poster Presentation		Transitions of Care.	American Association on Aging National Conference in San Diego, March 14, 2014.
Malley	Eileen	Care Coordination	Poster Presentation		An Innovative Approach to Reducing Readmissions by Targeting High Risk Patients with a Modifiable Risk	American Case Management Association April 2014 (TNS's and Advanced Transitions of Care)
Armenian	Karen	6W	Poster Presentation		Creating a standardized charge report in EPIC	ACNL, March 2014
Eileen and Patty	Lischer and Graham	Dialysis	Poster Presentation		Nurse Competency Assessment for a CRRT Program	poster presentation
Pham and Bliss and Zogby	Lysianne and Genevieve and Brittany	8th Floor Hillcrest	Poster Presentation		Compartment Syndrome	October 2013 Bones Conference, Sheraton
Catherina	Madani	TICU	Poster Presentation		Palliative Care Does not Mean Stopping PAH Medication; A Case Study in Optimal Care Coordination	Pulmonary Hypertension Association's 2014 International PH Conference & Scientific Sessions, Indianapolis; Sandra Lombardi, David Poch
Catherina	Madani	TICU	Poster Presentation		COMPARING ICU NURSING CARE IN POST-PULMONARY THROMBOENDARTERECTOMY PATIENTS VERSUS NON-PTE OPEN-HEART SURGICAL PATIENTS WITH A TIME AND MOTION STUDY	International Chronic Thromboembolic Pulmonary Hypertension (CTEPH) Conference 2014, Paris, France; Cassia Chevilion (VI), Mary Hellyar, Son Chi Kim
Karen Elizabeth	Mitchell	ED	Poster Presentation		The Next Wave of Leadership: The ED Community Placement Project (EDCPP): "Right Service-Right Venue"	2013-Association of California Nurse Leaders (ANCL) 36 th Annual Conference
Karen Elizabeth	Mitchell	ED	Poster Presentation		Compassion Fatigue: "The Cost of Caring" Cross sectional study using the self-reported survey (ProQual 5 Professional Quality of Life Scale) the effects of the ED Community Placement Project (EDCPP) on compassion fatigue among the ED staff.	2013 National Healthcare for the Homeless Council Annual Conference:
Karen Elizabeth	Mitchell	ED	Poster Presentation		The ED Community Placement Project (EDCPP): "Right Service-Right Venue" approach in managing ED frequent users.	2014 American Psychiatric Nurse Association- State Conference- Innovative Practices in Psychiatric Mental Health Nursing-
Karen Elizabeth	Mitchell	ED	Poster Presentation		The ED Community Placement Project (EDCPP): "Right Service-Right Venue" approach in managing ED frequent users.	2014-Seventh Health Disparities Conference - Implementing Inter-professional Collaborations to Achieve Health Equity's and Eliminate Health Disparities-Xavier University, New Orleans -

First Name	Last Name	Unit	ProjectType	Publication Citation	Title of Talk or Poster	Conference Information
ennifer	Storch	BICU	Poster Presentation		Cardiac monitoring following a neurological event	American Association of Neuroscience Nurses 46 th Annual Meeting, Anaheim, CA March 2014
ennifer	Storch	BICU	Poster Presentation		Traumatic brain injuries in the developing world	American Association of Neuroscience Nurses 46 th Annual Meeting, Anaheim, CA March 2014
assia	Yi	EDR	Poster Presentation		RCT: Evaluation of Preoperative Patient Education for Pulmonary Thromboendarterectomy patients	SCCM Poster presentation (2014) and Abstract Publication
assia	Yi	EDR	Poster Presentation		Bringing Evidence Based Practice to Inpatient Pain Assessment and Management	NICHE, 2014 Poster Presentation
ulie	Zimmerman	EDR	Poster Presentation		ETCO2 to improve patient safety	Sigma Theta Tau Odyssey Research Conference, Handlery Hotel, San Diego October 2013
Michelle	Carson	NICU	Poster Presentation		Open visitation in the NICU	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
Michelle	Carson	NICU	Poster Presentation		Improving interdisciplinary communication in the NICU	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
ulie	Zimmerman	2E	Poster Presentation		Implementing evidence based practices to reduce alarm fatigue	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
aren	Mitchell	Emergency Medicine	Poster Presentation		ED Community Placement project: Right service-right venue	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
tsui Jan	Chen	Hillcrest PCU	Poster Presentation		Implementing the CAUTI maintenance bundle in the progressive care unit	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
ulie	Zimmerman	EDR	Poster Presentation		Descriptive study of noise level in the progressive care unit	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
aura and Sherry	Giambattista and Carreau	EDR	Poster Presentation		Improving transitions of care	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
isa	Ross	SBH	Poster Presentation		The use of ipads for the non-pharmacological management of agitation in individuals with dementia	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
hari	Moseley	2E	Poster Presentation		Implementation of a comfort care order set	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
roxanne	Hazin	UCSD systemwide	Poster Presentation		Evaluation of the huddle program: regulatory readiness and knowledge retention	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
ylene and Faye	Ferrer and Dunable	3 W BMT/Onc	Poster Presentation		Implementing a central line dressing team to decrease CLABSI	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
ulie and Aran	Chrisco and Tavakoli	3 W BMT/Onc	Poster Presentation		Inhaled aromatherapy for the reduction of anxiety in hospitalized BMT patients	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
udy	Davidson and students	EDR and CSUSM	Poster Presentation		The role of staff education in CAUTI maintenance bundle compliance	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
tatty	Graham	CCU	Poster Presentation		Development and initial testing of a family presence audit tool	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
Ma	Garza	10East	Poster Presentation		Indication based ECG monitoring reduces inappropriate utilization	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
tatty	Graham	CCU	Poster Presentation		Infection control and the psychology of compliance	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
elvin and Karen	Ersando and Armenian	6W	Poster Presentation		Charge nurses' handoff: leading the way at the bedside	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
udy and Nicole	Davidson and Ward	UCSD systemwide	Poster Presentation		Evaluating the effectiveness of a standardized preceptor program	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
essica	Brady	2E	Poster Presentation		Development of a discharge follow up call-back program	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
ristina	Christensen	TICU	Poster Presentation		Benefits of formal education on mentoring	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
herry	Carreau	CVC ICU	Poster Presentation		Nursing Barriers to Effective Workflow: an Observational Study	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
Marlena	Montgomery	ED	Poster Presentation		Triage redesign implementation and the POD project: TRIPP	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
laine	Moreira Ali	10East	Poster Presentation		Nurse led follow-up phone calls for stroke patients	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
lonica	Neslage	10East	Poster Presentation		The use of motivational interviewing in inpatient stroke patient education	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
ay	Estacio	Acute Care	Poster Presentation		Video monitoring: Improving patient safety and efficiency with increased observation	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
indsay	Patnaude	FMCC	Poster Presentation		Incorporating 3 clinical pathways into the change of shift report standards on FMCC	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
arnes Lee and Frann	Estoesta and Teplick	FMCC	Poster Presentation		Implementation of bedside shift report utilizing AIDET	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
Wendy, Jocelyn and Frann	Ellingsen, Angel and Teplick	L&D	Poster Presentation		Implementing a mentoring program on labor and delivery	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014

First Name	Last Name	Unit	ProjectType	Publication Citation	Title of Talk or Poster	Conference Information
dna and Laura	Culp and Giambattista	8E and EDR	Poster Presentation		Improving nursing staff compliance using 'teach-back' method	7th Annual Nursing Inquiry and Innovations Conference, Liberty Station, May 20 2014
had	Hutchinson	8th Floor Hillcrest	Poster Presentation		Hosting a Professional Orthopedic	National association of Orthopedic Nurses National Congress, May 2014
heather	Warlan	PIPS	Poster Presentation		Identification of PTSD Symptoms in Post-ICU Patients. University of San Diego, Graduate Research Symposium; May, 2014.	USD Graduate Research Symposium
heather	Warlan	PIPS	Poster Presentation		Identification of PTSD Symptoms in Post-ICU Patients. Western Institute of Nursing (WIN); April, 2014.	WIN
udy	Davidson	EDR	Publication		Davidson, J. E., & Brown, C. (2014). Evaluation of nurse engagement in evidence-based practice. AACN Adv Crit Care, 25(1), 43-55. doi: 10.1097/nci.0000000000000006	
udy	Davidson	EDR	Publication		Davidson, J. Moral Distress. In: Thompson, D. & Kaufman, D. Critical Care Ethics: A Practice Guide. 3rd Edition. Chicago, Society of Critical Care Medicine 2014	
udy	Davidson	EDR	Publication		Davidson, J. How can I organize the process of ethical decision-making. In: Thompson, D. & Kaufman, D. Critical Care Ethics: A Practice Guide. 3rd Edition. 2014 Chicago, Society of Critical Care Medicine	
udy	Davidson	EDR	Publication		Davidson, J.E., Johnson, M., Assessing outcomes in clinical nurse specialist practice. In Kleinpell, R. Outcome assessment in advanced practice nursing. 3rd ed. New York, NY: Springer; 2013.	
udy	Davidson	EDR	Publication		Implementation of the pain, agitation, and delirium clinical practice guidelines and promoting patient mobility to prevent post-intensive care syndrome. Davidson JE, Harvey MA, Bemis-Dougherty A, Smith JM, Hopkins RO. Crit Care Med. 2013 Sep;41(9 Suppl 1):S136-45. doi: 10.1097/CCM.0b013e3182a24105. PMID:23989091	
udy	Davidson	EDR	Publication		Crit Care Med. 2013 Sep;41(9 Suppl 1):S30-8. doi: 10.1097/CCM.0b013e3182a16898. Benzodiazepine versus nonbenzodiazepine-based sedation for mechanically ventilated, critically ill adults: a systematic review and meta-analysis of randomized trials. Fraser GL1, Devlin JW, Worby CP, Alhazzani W, Barr J, Dasta JF, Kress JP, Davidson JE, Spencer FA. Benzodiazepine Versus Nonbenzodiazepine-Based Sedation for Mechanically V	
udy	Davidson	EDR	Publication		AJN in review	N/A
udy	Davidson	EDR	Publication		Nightmares in the ICU New York Times, July 23, 2013	NA
udy	Davidson	EDR	Publication		Improving the family experience through presence at brain death evaluation*. Crit Care Med. 2014 Apr;42(4):1002-3. doi: 10.1097/CCM.0000000000000253. PMID:24633108	
shnton	Deb	Dialysis	Publication		American Nephrology Nurse's Association Journal, Clinical Consult, "Giving Blood During Hemodialysis", in press.	na
essica	Goggin	CF	Publication		Chapter publication HPNA 2013	na
Mitchell	Karen	ED	Publication		Mitchell, K, Tomaszewski, C., Madani, C. Emergency Department Community Placement Project (EDCPP): ED Recidivism Reduction Project. American Journal of Medical Quality 2014;29:2, 105-106.abs	
sther	Lee	Periop	Publication		The arduous and challenging journey of improving patient safety and quality of care. Journal of PeriAnesthesia Nursing, Vol 28, No 6 (December), 2013; pp 383-398	na
sther	Lee	Periop	Publication		Magnet Journey: A Quality Improvement Project- Implementation of Family Visitation in the PACU	Journal of PeriAnesthesia Nursing

First Name	Last Name	Unit	ProjectType	Publication Citation	Title of Talk or Poster	Conference Information
Heverly A.	Morris, RN, CNP, MBA	Department of Nursing Education, Development & Research	Publication	Association Between the Use of Continuous Peripheral Nerve Blocks and Risk of Falling Following Knee and Hip Arthroplasty. Journal of Orthopaedic Nursing		
Karen	Perdion	MIS	Publication	A Midwifery-Led In-Hospital Birth Center within an academic medical center: successes and challenges. Karen Perdion, MSN, CNM, Rebecca Lesser, Jennifer Hirsch, Mary Barger, Thomas Kelly, Thomas Moore, D. Lacoursiere. J Perinat Neonat Nurs Volume 27 Number 4, 302-310		
Caroline	Rubin	TICU	Publication	Rubin C, Louthan RB, Wessels E, McGowan MB, Downer S, Maiden J. Crit Care Nurs Q. 2013 Apr-Jun;36(2):233-6. doi: 10.1097/CNQ.0b013e3182840d1.		
Georgia Robins	Sadler	Moore's	Publication	Breast Cancer Education for the Deaf Community in American Sign Language Sean Hickey, MD, Erin L. Merz, MA, Vanessa L. Malcarne, PhD, Darlene Clark Gunsauls, MS, Jessica Huang, PharmD, and Georgia Robins Sadler, BSN, MBA, PhD May 2013;40:3 • Oncology Nursing Forum		
Jennifer	Storch	BICU	Publication	Storch, J (2014) Care in an Austere Environment Pediatric Critical Care Medicine: Basic Science and Clinical Evidence 2nd Edition, in press		
Rann	Teplick	EDR	Publication	MCN Am J Matern Child Nurs. 2014 Jan-Feb;39(1):41-7; quiz 48-9. doi: 10.1097/NMC.0b013e3182a8de72		
Cassia and Mary	Yi and Hellyar	EDR/TICU	Publication	Comparing methods to secure external fetal-monitoring devices. Panelli D1, Teplick F, McCarthy M, Hebert S.		
Aran	Tavakoli	EDR	Publication	AJCC. Relationship between pre-operative anxiety and post-operative delirium in ICU patients with post pulmonary thromboendarterectomy (PTE) surgery; in press		
Lalge, Laura, Margarita	Burston, Vento, Baggott	Hillcrest and Administration	Publication	AAACN scope and standards for acute care clinical nurse specialist practice, AACN, Alisa Viego, May 2014 http://www.aacn.org/wd/practice/docs/128101cnsstds2010.pdf		
				Anderson, R., Ellerbe, S., Haas, S., Kerfoot, K., Kirby, K., & Nickitas, D. (2014). In J. Mensik (Ed.), Excellence and evidence in staffing: A data-driven model for excellence in staffing (2nd edition). Nursing Economics, 32(3, Suppl.), 1-36.		
				We are added at the end as contributing authors.		

Study Title	Date Approved by IRB (mm/dd/yy)	Study Status	Date Study Completed	Principal Investigator Name(s)	Principal Investigator Credentials	Role(s) of organization's Nurse(s) in the Study	Internal to a Single Organization	Multiple Organizations within a System	Independent Organizational Collaboratively	Replication	Qualitative	Quantitative
130902 Identification of Posttraumatic Stress Disorder Symptoms in Post-ICU Patients	7/18/13	Analysis in progress		Warlan, Heather	PhD RN	Staff nurse, PI	X					X
121361 An Outpatient Phase III efficacy study of Ecopipam (PSYRX 101) in the symptomatic treatment of self-injurious behavior in subjects with Lesch-Nyhan Disease	Approved 12/06/12 renewed 12/05/13	Approved		Reiner, Gail	DNP RN	Nurse Practitioner, PI	X					X
121287XX Descriptive Study of Noise Level on Progressive Care Unit	9/7/12	Manuscript in progress		Zimmerman, Julie	MSN RN	Clinical Nurse Specialist, PI		X				X
130598XX Evaluation of Utilization and Impact of Chemotherapy Class for Patients and Caregivers at UC San Diego Moores Cancer Center	4/26/13	Approved		Johnson, Lori	MS RN	Educator, PI	X					
120721XX Chart Review - Potential Obstacles in Cystic Fibrosis in Palliative and End of Life Care	5/2/12	Approved		Goggin, Jessica	MAS							
121287XX Descriptive Study on Noise Level in a Progressive Care Unit	9/7/12	Approved		Zimmerman, Julie	MSN RN	PI, CNS						
140165XX Implementing Evidence-Based Practice to Reduce Alarm Fatigue	1/17/14	Approved		Zimmerman, Julie	MSN RN	PI, CNS		X				X
130552XX Capnography monitoring to reduce respiratory depression events	4/12/13	Approved		Zimmerman, Julie	MSN RN	PI, CNS						
130443XX Cystic Fibrosis Adult Advance Care Chart Review	3/28/13	Approved		Goggin, Jessica	MAS							X
091403. ACTG 5250: Durability of Adherence in Self-Management of HIV.		Approved		Gilbert, Tari			X				X	
120365 Assessing Patient Knowledge of and Preferences for Healing Touch in the Thornton PeriAnesthesia Care Unit at UC San Diego Medical Center	4/4/12	Approved		Parks, Dee			X				X	
14043 The effects of the Evidence-Based Practice (EBP) Institute on EBP beliefs, implementation, group cohesion, and job satisfaction amongst EBP participants.	3/4/14	Approved		Davidson, Judy	DNP RN	CNS, PI. Staff are participants in study			X		X	X
130621XX A Pilot Project Examining Obstructive Sleep Apnea Patients' Characteristics Discharged to Home versus Admitted to a Monitored Bed after Elective Surgery Procedures.	5/10/13	Manuscript in progress		Lee, Esther	MSN RN	Assistant Director, PI	X				X	
140596 Inhaled Aromatherapy for the hospitalized Blood and Marrow Transplant (BMT) Hematology/Oncology patients	5/5/14	Approved		Tavakoli, Aran	MSN RN	CNS, with Julie Chrisko Graduate student	X				X	X
140114 A Practice Evaluation: Magnet Model - Transformational Leadership and Organizational Outcomes	3/20/14	Complete		Phillips, Gerard	DNP RN	Director		X			X	
140371 Compassion fatigue in respiratory therapists related to terminal extubation	3/20/14	Approved		Madani, Catarina	MS RN	Staff nurse	X					X
140458 Qualitative assessment of the needs of critical illness survivors	5/19/14	Approved		Davidson, Judy	DNP RN	PI, Patricia Graham RN CNS Sub I			X		X	X
141157 Music to enhance the healing environment in the ICU	8/24/2014 Approved Pending 10/14/2014 Approved	Approved		Paine, Contance	RN	Staff nurse, TICU, Sub I's: Madani Catie RN TICU, Cassia Yi RN CNS EDR	X					
140941 Managing life after stroke	6/10/2014	Approved		Meyer, Dawn	RN NP	Stroke Center NP	X				X	X
101286 Antihypertensive Treatment of Acute Cerebral Hemorrhage (ATACH)-II: A Phase III Randomized Multicenter Clinical Trial of Blood Pressure Reduction for Hypertension in Acute Intracerebral Hemorrhage (NINDS R01 NS062091, R01 NS061861; v1.0)	7/17/14	Approved		Meyer, Dawn	RN NP	Stroke Center NP						
110159 Platelet-Oriented Inhibition in New TIA and Minor Ischemic Stroke (POINT)	10/23/14	Approved		Meyer, Dawn	RN NP	Stroke Center NP						
131162 Symptom and Time to Treatment for Stroke		Approved		Meyer, Dawn	RN NP	Stroke Center NP						
140042 - IS Platelet Hyperactivity the Key to Increased Stroke Recurrence in Post-Stroke Depression	4/17/14	Approved		Meyer, Dawn	RN NP	Stroke Center NP						

Study Title	Date Approved by IRB (mm/dd/yy)	Study Status	Date Study Completed	Principal Investigator Name(s)	Principal Investigator Credentials	Role(s) of organization's Nurse(s) in the Study	Internal to a Single Organization	Multiple Organizations within a System	Independent Organizations Collaboratively	Replication	Qualitative	Quantitative
141070 * Perceived Barrier to Medication Error Reporting in Staff Nurses	11/19/14	Data analysis in progress		Rouysaen, Jirapom	RN	Staff nurse						
141756 Exploring the Human Emotion of Feeling Cared For	1/30/15	Approved		Margarita Baggett	RN	CNO, Royya Moor MD, Subl, Valerie Lake, Subl, Julie Jurf Subl, J Davidson CNS, J Pfeiffer Director subl, L. Lobbestael subl,		X			X	

Completed Studies with RNs as Principle Investigator

121147XX Intensive Care Nursing Triggers for initiation of a Palliative Care consult	8/7/12	Complete		Chevillon Cassia	MS RN	Clinical Nurse Specialist, PI	X					X
130929 Nursing Barriers to Effective Workflow Study	8/22/13	Complete		Carreau, Sherry	BSN RN	Sherry Carreau, Educator, PI Mobe Montesa, NM Subl, Cassia Chevillon Yi, CNS Subl, Catie Madani Staff nurse Subl	X					X
140279 The Outpatient Management of Superficial and Partial Thickness Burns: An Educational Outreach Visit for Providers	2/10/14	Completed		Jewitt, Jennifer	MS RN	Staff nurse, BICU	X				X	X
101271XX An examination of the effectiveness of a bedside nurse discharge coach to reinforce teach back in the inpatient setting	Aug. 25, 2011	Completed	Aug-12	Burtson, Paige	MS RN	Manager, PI, Laura Vento, RN Project Mgr, Subl	X					
131069 A Study of the Interrelationship of Compassion Fatigue, Compassion Satisfaction and Self-Care Strategies for Cardiovascular Intensive Care Unit Nurses: A Pilot Study	9/9/13	Completed		Parsons, Maurene		Staff nurse as PI	X					X
130890 P.I.: Christensen, Kristina - Benefits of staff education on mentoring.	7/25/2013	Completed exempt		Christensen, Kristina	BSN RN	Staff nurse, PI	X					X
101271XX An examination of the effectiveness of a bedside nurse discharge coach to reinforce teach back in the inpatient setting	Aug. 25, 2011	Completed	Aug-12	Burtson, Paige	MS RN	Manager, PI, Laura Vento, RN Project Mgr, Subl	X					
120790XX Nurse's Sleep Knowledge, Attitudes and Behaviors Instrument (Sleep KAB) Development	5/11/12	Closed	Incomplete. Closed 1/24/2014	Brown, Caroline	EdD RN	Research Liaison, PI		X			X	X
121225 Evaluating Hospital Noise	4/12/00	Expired	Closed	Castor, Peggy	RN	Staff Nurse, PI	X					X
120042 Evaluation of a Nurse Initiated Sepsis Protocol for Code Sepsis Events	1/26/12 renew 11/15/12	Closed		Bruce, Heather (Rose)	MSN RN	Staff nurse, CNIII PI	X					
150346 Effect of Meaningful Recognition on Registered Nurses' Compassion Satisfaction and Compassion Fatigue	Rely on. 2/19/2015	Data complete		Dibsie, Laura	MS RN	CNS PI			X	X	X	X

Nurses as subinvestigators within an interprofessional research team

Study Title	Date Approved by IRB (mm/dd/yy)	Study Status	Date Study Completed	Principal Investigator Name(s)	Principal Investigator Credentials	Role(s) of organization's Nurse(s) in the Study	Check only one			all that apply		
							Internal to a Single Organization	Multiple Organizations within a System	Independent Organizations Collaboratively	Replication	Qualitative	Quantitative
120261 Emergency Use Protocol for EPI-743 in acutely ill patients with inherited mitochondrial respiratory chain diseases within 90 days of end-of-life care	Approved 3/01/12 renewed 2/28/13			Haas, Richard H.	MD	Gail Reiner, Subl		X				X
120325 Behavioral Training and MRI Studies in Tourette's Syndrome	Approved 3/01/12 renewed 2/28/13			Aron, Adam	MD	Gail Reiner, Subl		X				X
130623 Tablet devices (iPads) for control of behavioral symptoms in older adults with dementia	Approved 6/6/13			Dr. Ipsit Vahia	MD	Lisa Ross, Staff RN Sub I	X					
13083 Predictors of symptom burden in pulmonary arterial hypertension	August 15th 2013	Approved		Dr. Madani	MD	Madani, Catarina Staff nurse, Subl	X				X	

Study Title	Date Approved by IRB (mm/dd/yy)	Study Status	Date Study Completed	Principal Investigator Name(s)	Principal Investigator Credentials	Role(s) of organization's Nurse(s) in the Study	Check only one			Study Types (Check all that apply)		
							Internal to a Single Organization	Multiple Organizations within a System	Independent Organizations Collaboratively	Replication	Qualitative	Quantitative
110926X Association Between the Use of Continuous Peripheral Nerve Blocks and Risk of Falling Following Knee & Hip Arthroplasty	4/14/17	Approved	Completed 1/12/2014	Finn, Daphan, MS, Ifield, Brian, MD	RN, CNP, mBA	Morris, Beverly A et al	X				X	X
Caring for Patients from Saudi Arabia in the United states; Healthcare Staff Experiences and Challenges	9/9/13	Approved		Dr. Anthony Perricone	MD	Cassia Yi, RN, MSN, CNS- Co-investigator- survey distribution and data collection	X					X
131476 Resuscitation Quality Improvement: A Study of UCSD's ART Inpatient Cardiac Arrest Matrix	12/5/13	Approved		Dr. Dan Davis	MD	Ruth Chappell BSN RN CCRN, Sherri X soon to be subl		X				X
110926X Association Between the Use of Continuous Peripheral Nerve Blocks and Risk of Falling Following Knee & Hip Arthroplasty	Originally approved 6/23/11, renewed 6/7/12, 5/23/13 and 3/27/14			Brian Ifield	MD, PI	Bev Morris RN NP Sub I	X					X
140473 The evolution of a tonic clonic seizure	6-Mar-14	Approved		Iragui	MD, PI	Rachelle Compton RN MSN, Subl	X					X
141263 UCSD Stroke Center Registry	9/19/14			Meyer, Brett	MD	Dawn Meyer RN NP						
140337 A phase IIIb, double-blind, multicenter study to evaluate the efficacy and safety of Alteplase in patients with mild stroke: rapidly improving symptoms and minor neurologic deficits (PRISMS), Version 1 Initial Application	4/3/14			Modir, Royya	MD	Dawn Meyer RN NP						
131105 A Multicenter, Double-Blind, Placebo-Controlled, Randomized, Parallel-group study to evaluate the Safety and Efficacy of Intravenous Natalizumab (BG00002) on Reducing Infarct Volume in Acute Ischemic Stroke - Version 2 (06 June 2013)	10/24/13			Hemmen, Thomas	MD	Dawn Meyer RN NP						
130718 Hypothermia in Acute Stroke with Thrombolysis Imaging Evaluation of Revascularization (HASTIER) Version 1.1 (This is a Sub-Study of IRB # 090979 - Phase 2/3 Study of Intravenous Thrombolysis and Hypothermia for Acute Treatment of Ischemic Stroke (Protocol version 5.1) -Intravascular Cooling in the Treatment of Stroke 2/3 (ICTuS 2/3) Trial	7/18/13			Hemmen, Thomas	MD	Dawn Meyer RN NP						
Complete												
131322 Assessing video education vs. standard education in enhancing and understanding and retention of warfarin information in new warfarin users.	11/22/13	Complete		Uche, Ozioma P	PharmD	Ayelet Ruppim, Educator, Sub I	X					