



ANNUAL NURSING REPORT

ROCHESTER GENERAL HOSPITAL 2024

Annual Nursing Report
Rochester General Hospital 2024
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Rooted in Community · Serve as One · Care Like Family · Embrace Tomorrow, Today

As we reflect on 2024, we have navigated challenges, celebrated triumphs, and, most importantly, reinforced the strength of teamwork in achieving extraordinary outcomes. We are reminded of the unwavering resilience, dedication, and commitment demonstrated by **our nurses**. At the heart of our success is the incredible strength of our nurses. Their expertise, compassion, and tireless work set a high standard for the care we deliver. But beyond their individual contributions, it is the collaborative spirit that truly defines our success. Every member of our team plays a vital role in ensuring that we provide the highest quality care to our patients.

Together, we approach the future with optimism, embracing tomorrow, today. The journey ahead is bright, as we continue to grow, adapt, and ensure care is delivered with unwavering commitment, excellence, and heart.

We are here for it — for the challenges, the rewards, and the lives we touch, every step of the way.

Special Thank You to the Nursing Annual Report Committee: Joan Beauchamp, Bethany Hudnell, Roxanne Souvannarath, Lindsey Sweet, & Jennifer Zarpentine



A MESSAGE FROM

Tammy Snyder, MPH

President and COO, Rochester General Hospital,
Rochester Regional Health

Dear RGH Nursing Team,

On behalf of the entire RGH Senior Leadership Team, thank you for your ongoing commitment and dedication for caring for our community. Each of you contributes to what makes RGH such a remarkable place, and I am grateful for our shared compassion and unwavering drive to enhance the health and well-being of our patients and community.

As I reflect back on 2024, I am in awe of the transformative work you have done. Here are a few achievements I'd like to highlight:

- Nurse Communication scores in our HCAHPS survey increased from 70.3% to 72.3%.
- Implementation of technology such as the Artisight, Virtual Care platform, Tap N GO, and electronic consents for our surgical and procedural patients
- Roll out of Bed-Side Shift Report and Q Reviews which will help ensure that we are enhancing our patients' experience while they are under our care. As a result of these efforts, our staff worked together percentage in our HCAHPS scores increased by 5%
- Improvements in Hospital Acquired Infection Rates include 8% improvement in CDIFF rates, 31% improvement in colorectal surgical site infections; RN Hand Hygiene scores have maintained at 96.6%; YOY mortality has improved 19% and the observed over expected is below 1.00. Additionally, in-hospital fall associated fracture rate improved 36% compared to 2023 and has an observed over expected rate below 1.0
- RN Bar Code Administration Compliance increased from 94.3% to 96.1%. This increase represents top performance as one of our LeapFrog measures
- Three Beacon Awards (MICU, SICU, and PACU)
- Mobility: Focusing on mobility helps to ensure our patients do not decondition while in our care and minimized the risks for Pressure Ulcers and PE/DVTs
- Creation of a Rapid Response Team with dedicated 24/7 nursing and revamping of the ECMO team structure

I'd like to recognize and thank Shari McDonald, CNO, and our all of our nursing leaders for their leadership over the last year.

2024 was a year of continued growth and culture change as we remained focused on raising the bar and delivering exceptional and compassionate care to every patient, every time. I look forward to supporting all of this work and hearing about the great things to come from our RGH nursing team in 2025!

Best,

Tammy Snyder, MPH

President and Chief Operating Officer, RGH

A MESSAGE FROM

Shari McDonald

RN, BSN, MSN, ACHE

VP, Chief Nursing Officer,
Rochester General Hospital

Dear Nursing Team,

It is with immense pride and appreciation that I share our 2024 Nursing Annual Report. I want to express my heartfelt gratitude for your unwavering commitment and contributions. Your tireless efforts and dedication to patient care have been nothing short of extraordinary and have been the driving force behind our success.

Over the last year, we have had so much to be proud of. You played a pivotal role in directly contributing to patient satisfaction and outcomes. Our patients and their families have felt the positive impact of your care, and their appreciation is clearly reflected in their feedback. We launched Virtual Care, which allows nurses to be at the bedside, and empowered our PCTs to partner more effectively through the PCT Academy and Med/Surg Academy. We have seen success with our phlebotomy classes, and the introduction of Protected Time for our nursing leaders. Each initiative has contributed to improving care, and your willingness to embrace innovation, collaborate across departments, and continually strive for excellence has played a crucial role in these achievements.

Our Employee Engagement scores for nursing increased from 7.1 to 7.5, and the *Moments That Matter* survey for new nurses showed a notable rise in those who feel they are thriving. Many expressed gratitude for the strong support and communication they received from their managers. We also celebrated the achievement of three Beacon Awards, along with the acceptance of our Magnet Journey document. I'm excited for the upcoming visit, where we'll have the opportunity to showcase the exceptional work of our nursing team!

The core values that guide us – *Rooted in Community, Serve as One, Care Like Family, and Embrace Tomorrow, Today* – are reflected in every patient interaction and team effort. You embody these values daily, and it's because of you that we continue to provide exceptional care. Your ability to connect with patients, comfort them in their most vulnerable moments, and provide a healing touch is truly remarkable.

Our nursing strategic plan and Magnet tenets have guided us to embrace the profession we all aspired to be part of. To the average person, the demands are high, the problems too complex, and the pressure too intense. However, our nurses stand apart with their unwavering commitment, understanding the role they play in the bigger picture. Patient care is optimized when nurse's work together to deliver high-reliability care—care that is evidence-based and results in continuous improvement in quality and safety, with our ongoing quest for zero harm. In this report, you will read about some of the accomplishments of our nurses and interprofessional teams that have allowed us to progress toward our goals.

I want to express my deepest appreciation for everything you do. Your hard work, passion, and dedication to nursing are truly inspiring. Thank you for making 2024 remarkable, and I look forward to all that we will continue to achieve together in the future.

With immense gratitude,



Shari McDonald, RN, BSN, MSN, ACHE

Vice President & Chief Nursing Officer, RGH



Michelle Beatty, EMBA, BSN, RN
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4400, 5100, 5200, Cath Lab, NIC



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Lindsey Sweet, MS HSM
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Jennifer L. Zarpentine, MSHA, RN, BSN, CPPS
Director of Clinical Operations, Nursing
Magnet Program Director &
Director of Nursing for 4500, 5400, 5500

2000 Pediatrics



2000 is a 12-bed unit with all-private rooms, specializing in pediatrics but also caring for medical-surgical patients when needed. All 12 beds are telemetry-capable and have continuous pulse oximetry monitoring. 2000 is the only unit that serves the pediatric inpatient population within Rochester Regional Health! All of our nurses are certified in ACLS, BLS, and PALS. In 2024, we implemented new order and report systems to track high flow nasal cannula (HFNC) usage on the floor, as it represented a new patient acuity mix for our unit.

We have expanded our cross-training/job-share program between 2000 and the Peds ED, with several nurses fully trained and working in both units, thereby enhancing their knowledge and skill sets. Combined Unit Councils were introduced, and the first successful meeting was held in October 2024 with both the Peds and 2000 Peds units. The plan is to continue meeting quarterly to address concerns or issues, as well as to collaborate on community events and projects. This initiative has fostered a more collaborative approach to patient/family care and has helped staff understand each other's workflows – *an idea that originated from a bedside nurse!*



Our staff on 2000 have also organized several team-building events and community outreach projects to improve unit morale and make a positive impact on our community, including: Adopt a Family for Christmas, Red Wings Game, Zoo Brew, and Pottery Night. We will continue striving to advance the services we provide to support the pediatric population in our community in 2025. We are also excited to add the initiation of continuous albuterol on the floor in 2025 to help prevent further transfers and to help our nurses advance in their careers through the clinical ladder, certifications, and college opportunities.

2600 (DOSA)



The Pre/Post Care Unit on 2600 has 54 beds, with 44 dedicated to adult and pediatric patients receiving preoperative services. Before being taken to the operating room, patients in pre-op are cared for in private rooms with either a door or a curtain for privacy. These treatment spaces also include a seat for a family member or friend, who is welcome to stay at the bedside until the patient goes to the operating room.

The team is committed to ensuring that each patient is both medically prepared and emotionally supported throughout the surgical process. Nurses thoroughly review patient records to ensure accuracy and completeness, including an extensive preoperative checklist that covers vital signs, medical history, and current medications—an essential step in identifying any potential risks before surgery. In addition to these assessments, pre-op nurses are responsible for key technical tasks such as starting IV lines, obtaining necessary lab work, and administering pre-surgical medications, all of which are critical to ensuring the patient's safety during the procedure.

In 2024, the unit established its CUSP team, leading to notable improvements in the patient experience through enhanced patient flow and improved handoff processes. The unit also held an annual toy drive to support the Pirate Toy Fund, the only nonprofit in the country that supplies toys year-round to agencies providing comfort to children in need.



In addition to monthly team engagement activities hosted on the unit, the team organized numerous out-of-work group activities to foster engagement and camaraderie among staff. The team takes pride in the exceptional care they provide in the Preoperative Unit and looks forward to continued improvement to ensure every patient receives the highest standard of care.

2800

2800, the general surgery inpatient unit, had a year of great growth. Nurses entering their second year have taken on the charge nurse and preceptor roles and are having a great time sharing all they know with new nurses and nursing students. Our team of staff nurses continues to grow and they are supported every day by the experienced nurses on the unit and the general surgery provider team. This team is having fun and making the unit a place that employees and patients want to be. Many members of the multidisciplinary team attend the regular CUSP meetings and the unit has seen some great changes come out of team member suggestions. The unit has added additional SCD machines, suction regulators, medication scanners, two new WOWs, and recliners. The patient population of the unit is changing for 2025 directly as a result of concerns raised at CUSP meetings.



3600



Our Labor and Delivery unit has eight labor rooms, nine triage rooms, two ORs and two PACUs. We circulate, scrub, and recover our own C-sections. Patients are cared for by highly skilled nurses who are learning techniques to encourage a vaginal delivery. In 2024 we continued to provide exemplary care. Our comfort committee is enhancing the labor experience but using low lighting, blue tooth projectors and fairy lights. Our unit has its own Spotify account with a playlist chosen by our team members for when the laboring mom desires music! We also increased our nurse certification rate from 65.1% in 2023 to 80.0% in 2024!

We reinstituted the nurse-provider meetings in an effort to increase communication and discuss what's working well—and what's not. This is also a time to discuss what nursing is seeing at the bedside in an effort to collaborate for positive patient outcomes. In 2024 all unit RN's were educated on the administration of methotrexate. Now patients that require this medication do not have to wait in the emergency department. Each month unit council discusses, demonstrates, and educates about a spinning babies maneuver. This greatly helps with our NTSV rates, and the patients enjoy learning about the maneuvers. 3600 Unit council sponsored a blood drive that was very successful and the 3rd floor leadership hosted a holiday breakfast for our team.



3800



Orthopedics/3800 is a 16-bed unit, with all private rooms, specializing in Orthopedic Surgery including: elective joint replacements, spine, and trauma. 3800 opened August 5, 2024. We were the first unit at RGH to go live with virtual nursing on August 12, 2024. Patients and staff have been enjoying virtual nursing. The virtual nurse is responsible for completing admissions, discharges, additional documentation, and answering any questions the patients or staff might have, which allows for the bedside nurse to have more hands-on time with their patients. What has been especially enjoyable for patients is that their virtual

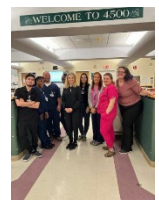
nurse one day, could be their in-person nurse the next day! Patients love seeing a familiar face on the TV screen. Our goal for 2025 is professional growth by helping our nurses join the clinical ladder and obtain nursing specialty certifications.

4400

4400 is a 26-bed step down unit. Our primary patient population is cardiovascular surgery, LVADs and thoracic surgery (such as but not limited to CABG, valve replacements, lung resections and LVADs). We care for patients as continuum from preoperative workup, postoperative care, and through discharge. Our population also includes care for any heart failure and/or medical management of LVAD patients. We are a fast-paced unit that focuses on building relationships with our patients that will help to address their holistic health management goals through surgery, education and lifestyle improvements. Our unit council is strong and we are working to integrate frontline team members' ideas into our culture. Daily we admit our surgical patients and prepare them for surgery directly on the unit. 2024 was a year of hosting many EXPLORE and non-explorer Nurses joining the 4400 team and aiding in their orientation and success at RGH.

4500 Surge Unit

4500 is a 24-bed surge unit, composed of ten private rooms and eight semi-private rooms, which admits patients with medical diagnoses and multi-symptom problems. We are fully staffed with nurses from around the country who are dedicated to their patients and continue to choose to work for our organization. The unit can support 16 telemetry patients and has a negative-pressure room. The goals for 2024 are zero HAI and zero falls with injury.

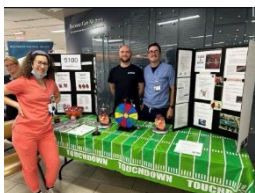


4800



4800 is a 39-bed Adult Acute Medicine/COVID unit. We specialize in adult medical patients and accept all COVID patients. 4800 also utilizes LPN's to the full scope of their license—overseen by a Charge Nurse--allowing them to take their own five patient assignments! As newer leaders, the Nurse Manager and Assistant Nurse Manager are focused on changing the culture and improving the overall morale on 4800! The main goals are focused on improving staff satisfaction while improving patient experience. Management will be honing in on recruitment and retention to solidify our 4800 team. We strongly support continued education. We have a number of PCT's and LPN's currently enrolled in school. We also encourage all of our LPN's and RN's to participate in the Clinical Ladder. Our patient focused goals include decreasing our hospital-acquired infections, increasing our call bell response times, improving patient mobility and decreasing our falls in the coming year!

5100

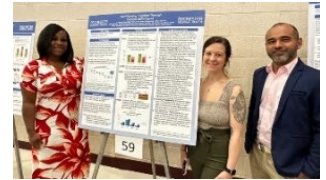


5100 is a 28-bed Cardiac Evaluation Unit (CEU) that provides care for patients experiencing cardiac complications. This includes caring for patients post TAVRs, PCI, AICD, PPM, and temporary pacemakers. We work closely with the Cath Lab and cardiac providers! We are the second or third highest



discharging and admission unit in the hospital, yet our readmission rate was 3.2 % in November. The culture on our unit highlights working together and building our bond through frequently gatherings. This gives us the time to decompress and get to know one another outside of work. Our unit

focuses on staff suggestions for a healthier work environment and creates a way to implement them. This past year we have moved our rounds to 10am to give nurses the time to complete morning patient care. We have one of the highest "Likelihood to Recommend" scores of all Med-Surg units, have 97% compliance in hand hygiene, and have been CLABSI free for 3 years. The environment, morale, and work satisfaction are at the highest peak for the unit in the last five years! We are continually aiming towards advancing our education through certifications and strive to have all our staff nurses on the clinical ladder by the end of 2025.



5200



5200 is a 26-bed Interventional Cardiology unit designated LVAD unit within the Sands- Constellation Heart Institute that specializes in the care of patients post PCI, TAVRs, PPM, AICD, temporary pacers, and post MI. 5200 is a good bridge between Med-Surg and step-down. The patients we care for allow nurses to develop cardiac skills that can be used anywhere in nursing. We also offer flexible self-scheduling to prioritize a work-life balance. In 2024, we focused on professional growth in staff and doubled our RN clinical ladder participation and had all PCTs trained in BLS and phlebotomy. Staff participated in regular committees and we increased our educational trainings. We also successfully decreased falls over 50% from 2023, had no CAUTIs in 2024, increased Hand Hygiene compliance to 97% and reduced patients length of stay from 7.96 to 4.92. In 2025, the team plans to keep

employee engagement high and continue to prioritize patients and quality metrics through teamwork initiatives. We will be working on recruiting more staff who are dedicated to caring for patients and serving the community. We are looking forward to embracing the future with new technology and being innovative to better serve our patient population.

5400

5400 is a 26-bed Med-Surg unit, specializing in the care of Neuro/Uro/ENT & Bariatric patients, both pre, but predominately post-operatively. Surgical procedures vary, but most commonly include craniotomies, spinal fusions and laminectomies, prostatectomies, and surgeries of the kidneys and bladder, gastric sleeves and bypasses. In addition, we provide care to head and neck cancer patients undergoing laryngectomies and tracheotomies. When specialty surgical service volume is down, beds become open to general surgery and general medicine patients. We are extremely proud to have achieved a re-accreditation from the American College of Surgeons for Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP) as a Comprehensive Center!

5500 Surge Unit

5500 is a 26-bed surge unit, composed of 10 private rooms and 8 semi-private rooms, which admits patients with medical diagnoses and multi-symptom problems. We are fully staffed with Agency nurses from around the country who are dedicated to their patients and continue to choose to work for our organization. The unit can support 16 telemetry patients and has a negative-pressure room. The goals for 2024 are zero HAI and zero falls with injury.



5800



5800 is a 39-bed Acute Medicine/Behavioral Unit specializing in the care of adults with a wide variety of diagnosis such as: CHF, Sepsis, Respiratory illnesses, Acute Renal Failure, Liver Failure, Gastrointestinal Bleed, Alcohol withdrawal, Substance abuse, and Dementia. We have 16 telemetry beds available. With our large



population of behavioral patients, our staff excels at keeping this population safe while limiting the use of restraints, and working together to improve their mentation. In 2024 we devised and implemented the 5800 LPN Staffing Model. This model was devised to utilize our LPN's to their full scope of practice. They received extensive training that enabled them to independently take a patient assignment rather than being "with" an RN. This care delivery model requires effective communication among our team members to provide the best care possible. A testament to that great care was being chosen by the Vision Automotive Group team for their Community Cares Program. The Vision team visited 5800 to see all our hard work in action, and brought lunch, flowers, lifetime inspection tags, and many thanks. 5800 was chosen to pilot a mobility Tech program and Sequoya is now a very important part of our team, getting our patients up and out of bed to chair daily, ambulating when possible, and providing general patient care along the way. With her help, coupled with diligent skin checks and staff education, we were able to slash 5800's hospital acquired pressure injury incidences by more than 50%. We are always encouraging staff growth. We have several RN's and LPN's working on their Clinical Ladder binders. Additionally, we support our LPN's on their way to be RN's, and PCT's who are enrolled in nursing school. This year brought a lot of new faces to our unit – many brought with them a fresh look at our unit, and formed a new Unit Council that's now up and running full force with many fun activities to build and support our core team both inside and outside the hospital. 5800 was chosen to be a part of an IHI Care front project—1 of only 2 units in the hospital. You can come visit and see our interactive snake and ladder game that generates prizes for our PCTs based on their performance and involvement.

6800

We are a 39-bed med-surg overflow Orthopedic. We have a mix of nurses working together to care for our patient population. Earlier this year, our LPNs successfully met the challenge of having their own five patient assignment, and we are so proud of them! Though we did lose some of our core staff members when 3800 opened, we are working on building our team back up. This year, we have hired four LPNs and have a successful Unit Council run by Maria Mounnarat. In 2024, we worked closely with physical therapy and occupational therapy to get a medical gym up and running to improve mobility and get patients stronger. 6800 has had numerous DAISY nominations, as well as an award recipient. In 2025, we hope to improve our patient satisfaction scores and decrease our patient falls.

B7000

B7 is a 28-bed unit that cares for patients who are waiting for alternative level of care.

7800

Over the past year, our nursing unit has demonstrated exceptional care and commitment, with a number of notable achievements that highlight both the quality of care we provide and the recognition our team has received. One of the most significant accomplishments is the recognition of our nurses through the DAISY Award program. We had twelve DAISY nominations, with two nurses honored as DAISY award winners for

their outstanding contributions. One of these nurses was nominated three times by a single family, a testament to her consistent, compassionate care that made a lasting impact on those she served.

We also celebrated a major milestone with the successful discharge of a long-term patient who had been in our care for 1.5 years. This achievement reflects the dedication and teamwork involved in ensuring the patient's safe transition to a new facility, which was a challenging but rewarding process. Additionally, our unit helped facilitate an emotional and meaningful moment for one patient who was able to meet her new granddaughter in the maternity ward, demonstrating the importance of compassionate care in helping patients experience life's precious moments.



In the area of stroke care, we made significant strides this year. We have been actively involved in restarting 7800 charge nurse going down to ED stroke alerts, which has improved our response times and collaboration with other healthcare teams to ensure the best possible outcomes for stroke patients. Our unit also successfully completed the DNV stroke survey, which is a major achievement in maintaining high standards of stroke care and reaffirming our commitment to excellence. To further enhance our expertise, a 7800 team member participated in Stroke Camp weekend, gaining valuable insights into stroke rehabilitation and patient support, which they brought back to improve care for our own stroke patients.

These milestones reflect not only the hard work and dedication of our staff but also our ongoing commitment to providing exceptional care, fostering teamwork, and enhancing the patient experience in every aspect of our work.

Adult Emergency & Crisis Intervention Unit (CIU)

The Adult Emergency Department provides essential care for patients over 22 years old with emergent illnesses and injuries throughout Western New York, Genesee County, and Finger Lakes Region. The ED has 60 rooms, 2 trauma bays, and over 60 non-traditional care spaces. There are trauma beds, dialysis equipped rooms, negative-pressure rooms, and gynecological exam and procedure rooms. We have completed a lot of great projects this year that continue to support the growth of our department! We started a unit specific Work Place Violence committee that meets monthly, reinvigorated our Unit Council meetings, purchased new waiting room furniture for our patients and visitors, and started an electronic communication board in our breakroom to get real-time information and updates to our staff. The emergency department entrance is now equipped with an EVOLV weapons detection system to enhance safety for patients and staff. We transformed 22 rooms on the ground floor into ED equipped rooms to care for patients in private rooms as we work to minimize providing care to patients in hallway spaces. We started a PCT academy to provide specialty education for our PCT's taking care of critical patients. Two of our extraordinary nurses, Jason Kowalski and Yanira Cornier were presented with the DAISY Award this year and we are so proud of the care they provide to our patients! We have had twelve New Graduate Registered Nurses and seven experienced Registered Nurses join our team this year. Our goals for 2025 are focused on improved quality and safety for the patients we care for!



The Crisis Intervention Unit (CIU) is a unique unit within the Emergency Department due to its environment. The unit has six rooms with an open milieu that is staffed by one nurse and one behavioral health technician or patient care technician with support by behavioral health team members. The unit provides a safe, enclosed environment that is ideal for potentially dangerous patients who are at risk for harming themselves or others, as well as intoxicated patients who might leave and subsequently injure themselves due to their

intoxication. The CIU also provides a calming and secure environment that allows patients in mental health crisis to be managed with less aggressive medical therapies or restraints. Patient flow to the CIU is often vital to maintaining patient flow and care through the ED at large. In 2024, we initiated electronic patient rounding with ObservSmart. This system allows for improved rounding practices and real time data collection for patient safety on the unit. We also installed a TV and patient safe furniture in our patient milieu to help improve our patient experience while they undergo observation and evaluation. We also offered TRUST training for our staff as a tool to assist in de-escalation skills and situational awareness.

Cancer Center

The Lipson Cancer Institute was founded on a commitment to provide comprehensive and quality cancer care from one integrated program. As a recognized leader in the treatment of cancer and blood disorders, we employ the most up-to-date, innovative therapies and tap into the most promising research in cancer detection, diagnosis, and treatment. This commitment to clinical innovation helps our patients and their families enjoy higher success rates, fewer treatment-related side effects, and longer, healthier lives.

Care Management

The Care Management Team is based in almost every unit of the hospital- actually 14-15 units- and works closely with the multi-disciplinary team, unit staff and social work partners to ensure a safe discharge plan for our patients. Care Management works with home care agencies locally and across the state, independent living facilities, community shelters in Rochester, surrounding counties and as far as Buffalo, hospice teams, durable medical equipment vendors, literacy programs, chemical



dependency facilities, insurance companies and pharmacies to obtain prior authorizations and cost of medications; managed long term care agencies (example: Elder One, I Circle or Nascentia), obtaining appointments; and outside resources (example: Dept of Human Services, Lifespan and Adult Protective Services) that give patients and their caregivers the assistance they need for a successful home plan. Our care managers think outside the box and go the extra mile getting creative to assist with discharging complex patients to their home- going as far as Texas or the country of Turkey. Besides offering all these wonderful resources, our team educates patients and their caregivers to avoid readmissions and decrease wasted bed days. They are an incredible wealth of knowledge of how to access and share information, navigate systems and obtain resources for the best possible discharge plan. We have monthly in-services with outside resources that we use to educate and inform our in-house team members on the multi-disciplinary team and our incredible care management team giving them more information to share with our patients and caregivers as well. Our hospital is very lucky and blessed to have such a committed, compassionate and creative team assisting our patients with a safe discharge plan!

Cath Lab & Non-Invasive Cardiology (NIC)



Our Cardiac Cath Lab stands at the forefront of cardiovascular care, boasting a 26-bed pre/post area, 4 Cath Angio procedure rooms and 3 Electrophysiology procedure! Our diverse patient population, age 16 and up, encompasses those requiring cardiac diagnostics and/or intervention due to atherosclerosis of their heart arteries or due to electrical pathway dysfunctions that require treatment. With over 8,000 annual patient visits/procedures, we specialize in acute and non-acute cases, offering services such as coronary angiograms, angioplasties, electrophysiology studies & ablations, and various cardiac device implants

(pacemakers, cardiac defibrillators, etc.), structural heart (TAVR, Watchman, MitralClip), advanced heart failure and non-invasive cardiology (TEE, cardioversion).



Our unit stands out within the hospital as a pioneer in advanced procedural cardiac services, offering structural heart procedures such as Transcatheter Aortic Valve Replacement (TAVR) as a less-invasive alternative to traditional cardiothoracic surgery. Additionally, our innovative same-day procedural discharge program has evolved, significantly reducing inpatient

admissions and ensuring open beds for emergency department admits. Patients undergoing cardiac stenting, ablation and valve replacement experience a streamlined recovery in our pre/post area before being discharged home. The efficient performance of discharge dependent trans esophageal echocardiograms (TEEs) and cardioversions further supports swift patient discharges. Some of the things our unit is most proud of are our new team members, our custom lead fitting and replacement program, quarterly dinner/teaching series, as well as crushing our Same-Day Discharge goals! In 2025, we strive to continue surpassing previous year metrics and to continue to sustain a cohesive unit that embodies a familial atmosphere rooted in compassion, teamwork and clinical support/growth.



CICU

The Cardiac intensive Care Unit (CICU) is a 10-bed unit caring for patients with advanced heart failure and may require mechanical circulatory support. Our Board Certified in Cardiovascular Disease by the American Board of Internal Medicine (ABIM) team, guiding Cardiac Fellows and residents, medically treats our patient population. CICU's patient population can consist of patients who present in cardiogenic shock, post myocardial infarction, post cardiac arrest and advanced heart failure. A number of the patients require advanced mechanical support from an IABP (Intra-Aortic balloon Pump), Impella support or dialysis treatments. We will also do all the LVAD (Left Ventricular assist Device) workup care in the ICU, prior to implantation of a LVAD. Many of the patients do not look like a "typical ICU patient" although they are very sick. The nursing team continually mobilize the patients walking them through the ICU with their mechanical support device. The limited use of a Foley catheter has almost eliminated catheter-associated infections in CICU. It has been over two years since our last CAUTI (Catheter-Associated Urinary Tract infection) and over a year since the last CLABSI (Central Line Associated Infection).

The Sands-Constellation Heart Institute (SCHI) Advanced Heart Failure and Mechanical Circulatory Support recognized as the 2024 Outstanding Heart Failure Care Team by the Heart Failure Society of America (HFSA). We are proud of our CICU Academy Week and Dr. Coniglio's lecture series every other Friday for staff education. The unit continues to be focuses on mobility early ambulation of patients, continued central line and Foley catheter reduction in an ICU setting, increasing Clinical Ladder certification and development of RN roles/education.



CTICU

The Cardiothoracic Intensive Care Unit (CTICU) is a 12-bed unit caring for postoperative adult cardiac surgery patients. Typical surgeries include Coronary Artery Bypass Grafts, valve repair or replacement, aortic aneurysm repair, and implantation of cardiac devices. The CTICU offers nurses the opportunity to become trained as experts on invasive cardiac monitoring with advanced ICU nursing skills, including the management of Intra-Aortic Balloons, Impellas, Ventricular Assist Devices, and ECMO. 2024 has been a great year for CTICU. We remained CAUTI-free (our last one was on 6/20/2021). We hired 16 new RN's and nine new PCT's. We held multiple classes and in-services for our staff, including three ICU RN Academy Weeks, two Sylvia James ICU PCT Academy Days, multiple Back 2 Basics classes and Skin Emergency In-services, 17 ACLS Megacodes, and a "CRU and Brew" party to aid in CRU form completion.



We started honoring an Employee of the Month. A group of our staff attended the NTI Critical Care Conference, and our CSI group presented their quality improvement project implementing a new VAD driveline dressing which improved patient outcomes. We had seven nominees for Patient Care Services awards, with four award recipients. Also, our very own intensivist, Dr. Rebecca Gooch, received the Father George Norton Physician Excellence Award. We had six Daisy Award nominees with Doug Giroux as a deserving recipient.

Our unit Mobility Project has led to 61% of our patients getting out of bed at least twice per day, including ECMO and intubated patients. At the NYONL Conference, Carmine D'Angelo was a poster presenter for "Making Technology Drive Outcomes: A Feasibility Study" and Jarvis McGrath was a podium presenter for "Data Analysis: Bias Removal Validates Successful Interventions." At the Leader Summit Poster Session, we won a Pillar Award: Passion for Quality with our new Intensive Care Unit Shift Note. Last but not least, three of our RN's are attending or have been accepted into CRNA School.

Extracorporeal Membrane Oxygenation (ECMO) Team



2024 has been an extraordinary year for the ECMO team at RGH. This year, we had the privilege of caring for some of the most challenging and critically ill patients in our history - patients we might call "non-traditional." These were individuals who, without ECMO, would not have survived. Taking on such complex cases required us to think innovatively, expand our knowledge base, and

push the boundaries of what we thought possible. While not every case resulted in the outcome we had hoped for, each one taught us invaluable lessons. These experiences have directly contributed to our team achieving the best survivability rates we've ever recorded - surpassing the national benchmark set by the Extracorporeal Life Support Organization (ELSO). The ELSO benchmark for VA ECMO survival to discharge or transfer is 47%. At RGH, we achieved an impressive 65% survival rate this year. This is a remarkable leap, especially when compared to our previous years: 25%, 55%, 38%, 26%, and 26%. Such growth in patient outcomes speaks volumes about the dedication and expertise of our team. To say we are proud of our accomplishments in the cardiac ECMO field this year would be an understatement.

Historically, our team managed a similar number of VV and VA ECMO runs each year. In 2024, however, we saw a significant shift, with 49 VA ECMO patients compared to just 11 VV ECMO patients. Despite this disparity, our VV survival rate was 54%, slightly below the national benchmark of 59%. One particularly

memorable VV case involved a young patient suffering from interstitial lung disease of unknown origin. Her case brought together a multidisciplinary team of heart failure specialists, pulmonologists, critical care physicians, ECMO specialists, and trainees. Together, they worked tirelessly to advocate for her as a potential lung transplant candidate. Tragically, despite the team's relentless efforts and collaboration with NYU's transplant center, she did not survive. Yet the knowledge gained from her care was immense and will undoubtedly inform our future approaches to such cases.

At the heart of ECMO at RGH is our people. Our specialized group of nurses and respiratory therapists consistently rise to the occasion, making extraordinary care possible. In a country with an estimated 1,431 ECMO specialists, RGH stands out with 31 highly trained professionals. Their combined knowledge in critical care, cardiac care, and pulmonary care is unparalleled and a true asset to our community. As we reflect on our achievements and the lessons learned, we are inspired to continue pushing boundaries, improving outcomes, and delivering the highest level of care to our patients. Our successes are a testament to the dedication of our team and the power of innovation in the face of the toughest challenges.

Employee Health

Employee Health/Occupational Health (WorkReady) provides work related health services to all RRH employees, and volunteers. The department provides pre-placement physicals, annual health assessments, annual fit testing, and immunizations, as well as care for work-related injuries and referrals as necessary. All services are provided free of charge to all RRH employees and volunteers.

G1 Behavioral Health



G1 is an acute Psychiatric unit that has 29 beds to serve patients with all different types of psychiatric illnesses. This year we had another year of great accomplishments! First I would like to mention our RN recruitment! The beginning of the year we started out with 12 agency RNs and will end the year with one! We have been extremely successful in recruiting our student nurses through their clinical experience and through the Explore program. We currently have six nurses in the Nurse Residency Program! We have also worked hard this year to improve RN/patient ratio. It is currently 5:1 on the day shift and 7-8:1 on the night shift. Patient and team safety is our first priority. This year we introduced electronic rounding. Rounding is the most important job we have to ensure patient safety. All of our patients are receiving at least every 15 minute rounding observation and if we they need closer observation, we can place them on 7.5 minute observation, line of sight or on a 1:1. Upon admission to G1 a beacon is placed on each patient. The beacon is similar to a smart watch. It is indestructible and ligature resistant. It submits a signal to the rounder's tablet when rounder is within a certain proximity to the patient. They can then chose where the patient is, and if they are awake or asleep. With electronic rounding, we can ensure patients are being rounded on accurately, record their location, monitor how much sleep they are getting each night, and it is all automatically recorded into Epic. The electronic rounding ensures accuracy by patient lighting up in red when rounding is going to be late.

We just received new psych safe furniture! All of our patients received brand new weighted beds and night stands. This helps increase patients safety and helps promote cleanliness of the rooms as patients now have a place to store some of their belongings. We also received weighted tables for our patient dining room and patient common area.

The Broset violence indicator was just added to the EPIC story board. This makes it easy for the nurse and provider to assess patients' history of violence without having to search through EPIC to determine if the patient has a history of violence and what their present indication for violence is.

Our CUSP project that we are currently working on was created from our Culture of Safety Survey. We currently have the RN report off on her patients to the oncoming RN that is taking over for them. In our survey, team members wanted to change to a team report. This is important as we all are involved in each patient's care, and important information was not being cascaded to all team members. We also continue to work on our CUSP project for 2024 is to develop a Crisis Intervention Team that will create an organized, effective team approach during a crisis situation.

GI Endo/Pulmonary

RGH's GI Endoscopy and Pulmonary team cares for inpatient and outpatient patients undergoing screening, diagnostic, and/or therapeutic GI or pulmonary procedure. We are a 13 bay, 4 procedure room area that utilizes a multidisciplinary team approach to our care, working in conjunction with Anesthesia, Pulmonologists, Gastroenterologists, Surgeons, and APPs. Our diverse patient population, age 16 and up, encompasses those requiring gastroenterology procedures and pulmonary procedures with over 6,000 annual procedures. In 2024, we were able to provide new advanced procedures to support the need of our community and help to provide cancer diagnosis sooner, with Navigational Bronchoscopies and Endoscopic Ultrasounds. Both of these are game changers to this community and provide a diagnosis to start treatment sooner. We welcomed one of our GI Fellows as a new attending in October, 2024 and have welcomed two new fellows for a total of six. Our fellows began an educational program with Olympus and Boston Scientific to ensure they are trained and knowledgeable on our equipment and supplies and are able to support proper handling of equipment; with this we have seen a 17% decrease in damaged endoscopes. We welcomed two new babies into our endoscopy family this past summer, welcome Brynlee and Josie! Our CUSP team was able to organize a new patient tracking board and waiting room information packet for our and cath lab patients and their families, our RNs are working on scheduling screening colonoscopies to help decrease the waiting list and fill block time appropriately, our team was provided mock code training and telemetry training, and we were able to obtain new lead and radiation glasses for our advanced procedures. We also had a Daisy Award nominee and multiple Rock Star nominees, in fact, Dr. Gutman had the most nominations at RGH for a provider. One of our nurses created GLP-1 guidelines for our patients this fall to help decrease the amount of outpatient cancelations due to these new medications (thank you Trisha)! We welcomed a new Systems Chief of Gastroenterology and are so excited to say it's our own Dr. Jason Gutman. In 2025, we are increasing our anesthesia time to two anesthesiologist, five days a week helping to prevent adverse events, perform more advance procedures, and provide high quality, safe patient care.



Infection Prevention

Infection Prevention partners with nursing daily to prevent healthcare-associated infections (HAI) and to keep our patients and team members safe. In 2024, hospital-goals included a composite HAI score, hand hygiene compliance, and total knee replacement surgical site infection (SSI), highlighting leadership support for patient safety and Infection Prevention. Recognizing the increased risk of infection among patients with complex medical conditions, the IP team launched High-Risk Rounds in 2024 on units with increased HAIs, assessing

adherence to best practice, maintenance basics, and utilization of devices, alongside Unit Nursing Leadership. As of November 2024, device utilization has decreased significantly, through multidisciplinary efforts, with a 5% decrease in Central Line use and an almost 12% decrease in indwelling urinary catheter use, compared to 2023. Continued focus on Hand Hygiene helped to raise compliance from 92.6% to 95.8%, hospital-wide. Additionally, the Knee Replacement SSI goal was met with only 2 infections, which is about half of the predicted number. Decreased rates of MRSA and C. diff were also achieved in 2024, compared with 2023. The team looks forward to continued partnership with front-line team members in 2025, continuing the relentless focus on Quality and Safety!

Inpatient Dialysis (4300)



4300, or Inpatient Dialysis, is a procedural area that administers treatment to patients with Kidney Disease, including Hemodialysis and Peritoneal Dialysis. Due to our continuous census increase, our hours of operations have also expanded to accommodate current needs. In 2024 our Unit was able to upgrade all of our Peritoneal Dialysis Cyclers (PD). In 2024 our RN daily staffing allowance was increased to 9 due to continued increased Census - on average our in-unit nurses perform 6-8 treatments per day. Our census averages 50 to 60 patients a day and we generally dialyze 50% to 70% of the

census on any given day. As a result of continuous fine-tuning of our scheduling system, we have been able to increase our capacity from 50 patients to 60 patients in a unit with only six beds. Our overnight off unit program is still going strong and we are currently working on having overnight coverage seven nights per week. This overnight program has led to increased nursing satisfaction as a result of decreased on-call requirements! Due to natural attrition, and patient acuity, our overnight program currently requires two on-call staff working together to ensure emergent patient needs are met. The exciting news is that we are training several new to dialysis nurses that will help with our progressive specialty program, and we continue to not utilize travel RNs to fill this gap in a specialty area of care. As of November 30, we performed 7,431 treatments, which is 1,302 more treatments we performed last year.

Clinical Ladder nurses represent 45% of our staff and we are promoting ACLS certification above the standard BLS requirement for this specialty area – currently this represents four nurses on our staff. Our Charge RNs continue to collaborate with both IR and ED on a regular basis to facilitate the workflow of these units while ensuring optimal patient care progression through the Health System. In 2024, we continued our efforts to decrease delays in Inpatient Dialysis by educating staff throughout the hospital, remove the need for agency nurses, and add an additional scheduling enhancement in an effort to accommodate more patients who are more acute than their baseline. Our nurses continue to volunteer having a strong Community presence at Foodlink, Pet Rescues, Kidney Walk, and Schools and Holiday Drives.

Interventional Radiology (IR)



Interventional Radiology performs minimally invasive procedures with the assistance of imaging such as: fluoroscopy, CT and Ultrasound. We treat young adult to geriatric patients as well as the occasional older pediatric patient. Our procedures are performed under local anesthetic, moderate sedation or with anesthesia. We treat a wide variety of conditions and diseases through insertion of various small devices such as wires and catheters. Some examples include

aneurysm, stroke (thrombectomy), epistaxis, tumor ablations, GI bleeding, PE treatment, IVC filter placement/removal, pelvic congestion syndrome, fistulagram, tissue biopsies, angiography and kyphoplasty. IR performs over 40 different procedures.

Our Clinician Navigator, Alice, plays a crucial role in caring for our patient population. She is often the first point of contact for our outpatients, following their care from pre-procedure to post discharge. The nurse coordinator role is currently supported by Brendan, Heidi and Olivia. They ensure timely and safe care for all of our patients. Their daily workflow consists of managing a busy outpatient schedule while coordinating multiple inpatient add-on requests and emergencies. This spring, Heidi accepted the role as our new Clinical Resource Nurse. This role is new to IR, and in a short period of time she has organized a number of learning opportunities. In collaboration with our IR radiologic technologist, Jared, she held our first “Spin Class” (ensuring the proper positioning of a patient for particular imaging techniques). She also organized a Mock Code, EKOS in-service, and “Dinner with a Doc” (Dr. Pyne’s presentation of various IR procedures with a Q&A).



Our current CUSP project began in November of 2023, focusing on Neurointerventional Radiology. Our main objective is fostering a greater level of safe communication during all phases of treatment. As a first pillar, we addressed the time-out process. We had previously established a standardized format for our time-out and now are enforcing the safety pause where all team members are held accountable to stop and listen. The team is providing real time feedback via Redcap survey for each procedure. In addition, we have streamlined our procedure specific discharge instructions to encompass evidence based practices and provide patients with pertinent information upon discharge. In 2025, we will be focusing on an upcoming Rapid PE Study as well as other educational opportunities.

Our department has organized and enjoyed various gatherings, potlucks and informal celebrations throughout the year. From Nurses Week to Imaging Week and everything in between. Our Halloween “Wig Exchange” was a great success! Our patients and other team members enjoyed our excitement. For Thanksgiving, not only will we be celebrating what we are thankful for but, adding some sweetness to it! During Christmas time we have a Secret Santa gift exchange and Holiday Celebration. We have some pretty crafty team members and our decorations are pretty neat! We have very gifted team members who can whip up some great food!



Medical Intensive Care Unit (MICU)



The Medical Intensive Care Unit (MICU) has 18 beds and cares primarily for adult medical patients. The MICU takes a high level of professionalism, with the nurses and physicians working together as a team. Not only do we see medical patients, but are also exposed to cardiac, neuro and surgical complexities. This diverse patient population allows us the opportunity to have our nurses trained on managing several devices including Intra-Aortic Balloon Pumps, Impellas, Continuous Renal Replacement Therapy and ECMO. The MICU has had numerous

DAISY nominations, as well as an award recipient. We have drastically decreased Foley utilization and hospital-acquired infections. All of our hard work and devotion to our patients led us to receive the Silver Beacon Award this year. Rooted in our community, the MICU participates in several projects throughout the year such as adopting families during the holiday season and raising money for animal shelters. As 2024 comes to an

end, we are excited to have six new RNs who will complete orientation in the beginning of 2025. In 2025, we will be working to decrease pressure injuries and improve patient mobility.

Medical Short Stay Unit (MSU)

The Medical Short Stay Unit cares for a wide variety of patient conditions and complexities. This is a discharge driven unit caring for med-surg patients at an ED pace. Our most common patients have cardiac, neuro, GI, infectious, or mobility concerns. We are equipped with negative pressure rooms and telemetry monitoring. MSU is part of Emergency Services and works closely with the Adult ED for any acute or decompensating patients. The MSU is fully functional with dedicated nursing, provider, and social work team members which contributes to the collaborative environment. As the patient population evolves and ages, we see more complex patients and acute events. As a collective, our nurses are now ACLS certified! We also brought on agency nurses and hired core staff nurses to support safe staffing. We expanded our unit this year physically by adding five extra beds and bringing our census up to 38. We consistently average the highest daily discharges in house, ranging anywhere from 15-25+ daily. We are continuing to recruit staff RNs to build our team and make it even stronger! We have hired six core RNs in 2024. Our goal is to continue to build our team and lift each other up to make this a positive work environment and keep patient safety at a priority.



Medical Step Down Unit MSDU



The Medical Step Down Unit (MSDU) is an 18-bed unit that serves a wide variety of complex patients. We specialize in the care of patients who are too ill for a general medical/surgical floor, yet do not require the intensive care unit. Common services provided in the MSDU include airway management, ventilator support, insertion and maintenance of central lines and chest tubes, titratable IV medications/infusions, telemetry, invasive monitoring, and sustained low-

efficiency dialysis. The MSDU is unique in that we house patients with differing levels of care. Because our patient population requires closer monitoring and frequent interventions by nursing, our patient ratios are lower, typically 1:3 or 1:4. Our nurses have the opportunity to work closely with the ICU provider teams as well as respiratory therapists, who are both on the unit 24/7. We are proud of the many projects we worked on in 2024 to improve patient safety, including CAUTI/CLABSI reduction, improved skin integrity, and increased staff satisfaction. The MSDU has had several Daisy Nominations and a Honey Bee Award recipient. Building our team of core staff nurses and decreasing our reliance on agency staff remains a strong priority for MSDU going into 2025. In 2025, MSDU will prioritize optimizing multidisciplinary rounds, and improving our patient's ambulation/mobility experiences.

Neonatal Intensive Care Unit (NICU)

The NICU at RGH cares for the tiniest patients, 32 weeks and greater. Within our 14 bed unit, we saw days of record high census in 2024 and sicker patients. We introduced the use of less invasive surfactant, RAM Cannula and continue to have a robust donor breast milk program. We welcomed five RNs and six PCTs to the NICU team within the last year. Several nurses were recognized for their dedication to the unit and their patients by being nominated for a Daisy award. The units NICU Council was re-invigorated, starting great conversations and initiating change. The team continues to celebrate each other and their accomplishments in a variety of ways including NICU Nurses Week and PCT Appreciation Week. We are also proud to share that in 2024, the RGH NICU scored 27th overall and 3rd overall in medium sized NICUs for the National Read-A-Thon.



Nursing Education and Onboarding



This year, the RGH Nursing Education and Onboarding Nurse Educators have continued to play a vital role in shaping the knowledge and skills of our nursing and patient care technician staff. The Nurse Educators facilitate comprehensive core orientation and onboarding programs for new nurses and patient care technicians that effectively integrates clinical knowledge, organizational policies, and patient care protocols. The team ensures that new staff members feel welcomed and supported through their first week and beyond. A key change to the RGH welcome was the incorporation of

the Future RGH Rock Star presentation by RGH Senior Leaders. This dedicated time allowed new team members to become familiar with the RGH Senior Leadership team and understand our commitment to quality and safety at RGH.

In addition to Core Orientation, the team is responsible for RGH Mandatory Skills Day. Recognizing the need to make mandatory skills training more engaging and effective, the Nurse Educators reworked the traditional skills day format. The team partnered with the marketing team to enhance the signage and visual appeal of skills day. Key improvements included: development of patient scenarios, incorporation of games and interactive activities, introduction of prizes. These tactics allowed for team members to apply their knowledge, enhance their knowledge and skill set and provide a more interactive environment making the day not just educational but more enjoyable.



Nursing Program Managers

In 2024, Bethany Hudnell joined Joan Beauchamp, Roxanne Souvannarath, and Katrina Lorenzetti as one of RGH's Nursing Program Managers. Joan has welcomed nearly 40 Explore RNs this year and 39 Excel PCT Interns in our Summer Excel Internship Program. Roxanne supports our Global Nursing Program and mentors our Internationally Experienced RNs at RGH. Katrina supports our Peri-Operative Explore Program and, with Bethany, is a RGH Coordinator for our New Grad Nurse Residency Program. Bethany is the Chair of our Nursing Professional Practice Council and also ensures all of our nursing students have a positive and educational experience during their clinical rotations. We prioritized a welcoming and supportive environment for the 800 nursing students this year and opened our Nursing Student Lounge to provide a designated space for these students and their instructors. We continue to collaborate with our HR department, surrounding schools, and nurse leaders to focus our efforts with recruitment, retention, and support for our new nurses.

Nursing Shift Supervisor (NSS)

The Nursing Shift Supervisor team is comprised of highly skilled clinical nurses who are the leadership in the off hours for our team. They support the nursing teams clinically with a variety of different skill sets, support staffing, provided needed materials, and help to problem solve personnel issues. The team expanded this year to providing overlapping coverage overnight to be able to work more closely with the frontline nursing teams in meeting their quality and patient satisfaction goals. The goal of the NSS team is to partner with the nursing team to enhance the care that is provided. As a team they are looking to expand and provide education in the off hours.

Operating Room (OR)



The Operating Room at RGH has 24 suites that are able to serve all ages of our community. We are a state-of-the-art procedural area with a one to one patient ratio, utilizing updated technology to care for our patients. Some recent examples of this are: Aquablation, Calyxo, Bariostim, and the addition of a fourth Davinci Robot. We utilize a multidisciplinary team approach to

our care, working in conjunction with anesthesiologists and surgeons. Nursing in the OR is its own specialty skill set and we have an excellent Perioperative Explorer Nursing Program. In 2024 we have been able to successfully recruit and retain 5 RN from this program. 36 % of our eligible nurses are CNOR certified. We have had multiple OR team members recognized via the RGH Rock Star Award and daisy award. The OR continues to see a downward trend in Nursing turnover year after year going from 14.4% in 2023 to 5.7% in 2024. On average we perform roughly 1,500 procedures monthly. In 2024 we performed the first TAMBE procedure in our local area. The Operating Room has been involved in Specialties DNV Survey for Orthopedics, Bariatrics, VAD program and COEMIG certified. In 2025, we are excited to partner with RRH's surgical technology program.

PACU

PACU is a 34-bed unit that has space in both the legacy and SANDS buildings. We provide care for all ages and our patient acuity ranges from ICU care to outpatient. We are unique because of the magnitude of the scope of service that our unit provides. The staff in PACU are responsible for caring for patients from general surgery, vascular, ENT, orthopedic, neurosurgery, urology, gynecology, bariatrics, colorectal, ophthalmology, dental, oral-maxillofacial, podiatry, plastic surgery, cardiothoracic surgery, pulmonology, GI, interventional radiology, EP lab cases, patients having anesthesia for an MRI, pediatrics, and electroconvulsive therapy. In 2024 our team volunteered together on three occasions. We partnered with a local organization to collect food at Thanksgiving and delivered Thanksgiving meals to 6 families. We collected money, purchased, and delivered Christmas gifts for four local families. We also volunteered at the autism open golf tournament. At work in 2024 our team focused on increasing our compassion. We participated in weekly unit activities that were created to increase compassion for ourselves, our teammates, and our patients. Staff were surveyed before the initiation of these activities and after six months of participation. The survey results showed that these activities increased staffs resiliency and feelings of compassion for their patients. In short, happy nurses are better nurses. In 2024 we implemented a new nonverbal pain scale for both intubated and non-intubated patients. Additionally, we hired the PACU's first ever LPN. Our LPN is primarily responsible for calling our same day surgery patients postop day one. The opportunity to provide teach back to this population and answer questions they have, will hopefully prevent readmissions and increase patient satisfaction scores.



Pediatric Emergency



Our Pediatric Emergency Department serves the community of Rochester and provides care for patients from birth to 21 years old. In 2024, we hired eight new graduate nurses who participated in the New Grad Fellowship RN program along with New Residency Program (system wide initiative for all new nurses under 1yr experience). New grad's evidenced based project through the NRP program earned honorable mention: "How to best treat pediatric patients who are experiencing a mental health crisis." Peds ED kicked off our CUSP project initiation in July- focused

on safety of staff and patients in the unit; with a specific focus on MHA patients in Acute Distress to quickly assess and place patients in most appropriate unit for their psychiatric evaluations and to decrease escalated events in the Peds ED milieu.

In 2024, we continued our RN Cross Training/Job share program with the inpatient 2000 Peds unit. Initiation of joint unit council between 2000/ Peds ED to improve unit relations as well as decrease barriers to patient care was suggestion of bedside nurse and in October they held first meeting with plan to continue quarterly connections.

Many of our bedside nurses, clinical nurse leaders and educators teach programs for both RGH and the RRH system as well: PEARS/PALS/ACLS/PSO/NRP. We continue to participate in community outreach events and team building exercises as well to enhance our staff's experience with their community and peers through partnerships with various external agencies: Easter Egg Drive for The Boys and Girls Club of Rochester in March (team stuffing party); a community Health Fair June, and Back Pack Drive for The Boys & Girls Club of Rochester in August; Peds ED adopted a family for Christmas through the social work department at RGH; Toy and clothing donation for the Bivona Child Advocacy Center of Greater Rochester in November. We will strive to continue advancement in the services we provide to support the pediatric population in our community in 2025. We also look forward to helping our nurses advance in their careers through the Clinical Ladder, certifications and college opportunities.



Pre-Admission Testing (PAT)

The Pre-Admission Testing (PAT) unit is a dedicated space that includes 12 private exam rooms for patients who have scheduled surgical procedures. The mission of the unit is to optimize a patient prior to their surgical/procedural experience so they can achieve the highest quality outcomes. This is achieved by a team of patient care technicians, LPNs, RNs, and advanced practice providers who work together to review each patient's history and fitness to receive anesthesia in an appointment based clinic. The staff is dedicated to obtaining the appropriate studies to assure each patient's preparedness for their procedure. This may include lab studies, EKG, imaging, or cardiac clearance. During the patient's appointment, they receive preoperative education and instructions based on various "ERAS" and procedure specific protocols. In 2024, the team began evaluating all patients under the Strong for Surgery Program in order to better screen and prepare patients for surgery, and also participated in a project focused on identifying social work needs in PAT by implementing the practice of completing the social determinants of health screen during the PAT visit. Operationally, the team worked with central stores to create daily PAR levels for supplies and a successfully implemented a process in which central store automatically stocks routine supplies in the store room. In 2025, we are looking forward to potentially moving to a new space and reevaluating how we can improve our processes in order to provide the very best patient experience.

Quality/Safety

The Rochester General Hospital (RGH) Quality and Patient Safety specialists are responsible, in partnership with the RGH Leader team, for oversight of quality and safety for all nursing, medical and support service areas within RGH.

Highlights for the partnership with the Nursing team for 2024 include driving RGH multidisciplinary quality projects - PE/DVT reduction and addressing patient skin care needs/pressure injury reduction. In addition and with collaboration with the RGH Senior Leader Team, 5 RGH Comprehensive Unit based Safety Program (CUSP) teams were implemented, bringing the total of CUSP teams at RGH to 24. Through CUSP's staff empowering

framework, there have been numerous grassroots safety projects implemented by our nursing team members and colleagues, including presentation to the RGH Quality Committee, the Quality Committee of the Board and other Executive Leader meeting. This demonstrates the high caliber of RGH nursing and the dedication of the Quality and Patient Safety Specialists at RGH.

Regulatory

The regulatory department at Rochester General Hospital is primarily supported by Dorothy Day. Her role is to provide and support regulatory, accreditation and certification activities to achieve and sustain ongoing compliance at RGH, but supports the regulatory team across the system. She represents the organization in interfaces with regulatory and accreditation agencies (DNV, DOH, CMS, OMH, etc.) during both announced and unannounced surveys. She work closely with leaders to develop and implement plans to meet new or revised regulations or standards, and to promote and maintain compliance.

Sands 300 Postpartum



Sands 300 provides care to a variety of patients, making a positive difference every single day in the lives of the patients, family members and visitors. Our patient population includes antepartum, postpartum, gynecological surgery and general medical/surgical patients. In 2024, we welcomed a new Assistant Nurse Manager, four RNs and three PCTs to the team. Our team continues to work together, supporting each other both at work and outside of work. Over the past year, the team has consistently meet the goal for hand hygiene and BCMA along with improved HCAPS. We are a Baby Friendly Hospital and are working towards our re-designation in 2025. In addition, in 2025 we will focus on thermoregulation through the use of an isolette to prevent NICU admissions and promote maternal bonding.

Sands 600



Sands 600 is a 36-bed unit that specializes in Hematology/Oncology and Palliative Care, as well as caring for Med-Surg overflow patients. Our nurses specialize in chemotherapy administration, Medi port access and end-of-life care/hospice. As we embark on our redesignation for palliative care for the DNV survey, Sands 600 will continue to set the standard for end-of-life care. We pride ourselves on treating all patients with kindness, respect, and above all compassion. The unit is working very hard on eliminating CLABSI, sharpening chemotherapy administration policies/procedures as well as hiring new full time core staff. Other focuses of 2025 include team building/bonding, mobilization, preventing skin injuries, and preventing infections for our population!

Surgical Intensive Care Unit (SICU) & Neuro Critical Care Unit (NCCU)

The Surgical Intensive Care Unit (SICU) & Neuro Critical Care Unit has 12 beds that support critical surgical and neurological needs. This team supports a vast population of patients from critical stroke care to complex surgical cases. Our team prides themselves on the positive unit culture that brings the team together and that has significantly grown within the 2024 year. We have celebrated two RN to NP graduations and two RNs retirement after many years of RGH service. We have welcomed many addition to our SICU family this last year; six new RNs, four PCT's and one new PA. SICU continues to have low agency utilization and has converted three agency RNs to core staff this year. Among our core staff three RNs have obtained CCRN certification and we have has many nurses advance on the clinical ladder. SICU leadership team was filled with all SICU grown RNs. The team continues to work together to give the best care to our



community. Our team is strong; they hold each other accountable and strive for the best patient outcomes. We have been awarded the Silver Beacon Award for Excellence and had 15 Daisy nominations with three award winners. This year's CUSP project has impacted patient safety by creating an all-inclusive, new ICU rounding tool to improve interdisciplinary communication and address patient needs. Our goal for 2025 is to perform below benchmark for ICU pressure injuries as well as improve on patient mobility metrics.

Surgical Step Down Unit (SSDU)



The Surgical Step Down Unit (SSDU) is a 24-bed unit located on Sands 8. Our patient population includes vascular patients, complex ENT, up to 6 SICU managed stepdown patients, and high acuity pulmonary patients. In 2024, we continued to build back our team and with the return of our surgical patients, we welcomed back nursing students from many local colleges and universities!

This year we were able to expand our core team immensely, retaining 3 LPN to RN graduates, two PCT to RN graduates, and two Agency to CORE conversions. One of our new team members has even ascended into the role of our CRN following the retirement of our beloved Karen Carpenter, after over 35 years in nursing and 25 continuous years with RGH! We were also chosen by four Explorer RNs bringing our units to over 50% core team members and counting! This year we invested hundreds of hours into our team members and have trained nearly all core staff to our stepdown acuity and charge, resulting in a huge jump in quality measures and staff satisfaction. Our patients feel more cared for than they ever have. Our team has invested in themselves, with three achieving clinical ladder status, three more submitting their binders, and three RNs signing up for certification. We have been honored to be a part of a PCT retention project with our CNO and executive leadership, focused on supporting team member retention and job satisfaction through the national organization: Insititute of Healthcare Improvement. Through this project we have learned a lot and our PCT/RN relationship has never been stronger!



In 2024, we established a Unit Council and increased participation in NPPC. We established a CUSP team and a falls committee. Our new CRN also developed an educational power point with staff kudos, tips/tricks, and our quality measures. This is updated monthly and plays 24 hours a day on our nursing station TV, and the team feels they are more empowered with knowledge than ever! We want to increase recognition, focus on improving skin care, and decreasing our pressure injuries in SSDU. We have placed more power in the nurses' hands and grown our MDR to include nurse driven assessments for all lines/foleys/ and restrains, seeing a significant reduction in utilization. We want to be a welcoming work environment where the team works together to increase patient satisfaction, retain our current staff, and attract our Explorer Nurses and Capstone Students to join our amazing team!

Vascular Access Team



This team continues to support the care of our patients and guide the front line staff utilizing a highly trained skill set that helps to provide optimal vascular access in even the most vulnerable patients. The team is made up of 12 RNs and one PCT/phlebotomist. 58% of our RNs have a BSN or higher and 41% hold at least one national certification and 41% have advanced on the Clinical Ladder. The team is skilled in placement of PIV, phlebotomy, midlines, PICC, accessing mediports, and assuring CVC line patency. They are trained to utilize ultrasound guided techniques for our patient population with continually growing acuity. This team demonstrates leadership not just in their ability to collaborate with others but they bring EBP to

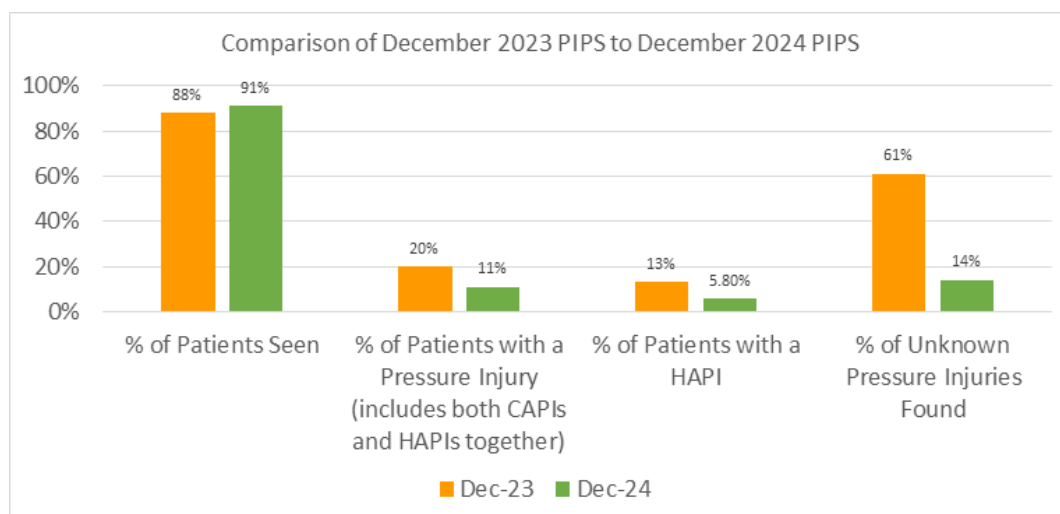
life, utilizing the INS guidelines as they collaborate in building policies and practices related to vascular access. They are a valued resource to our providers when looking for the best options for the patient. In 2024 the VAT has partnered to decrease the incidents of PIV infections and CLABSI through education both at the unit level and on mandatory education days. They continue to work to train members of the ED and the ICUs in the use of ultrasound guided PIV placement so that there are more available experts to assist our unit nurses and patients. They look forward to providing this education to the Rapid Response nurse team in 2025. Two of our team members sit on the local chapter of GVNA – extending their nursing leadership beyond the walls of RGH. Taylor Condidoria RN was presented with the Nurse Educator award by GVNA in 2024. The members of this team are highly engaged, demonstrate autonomy and exemplary professional practice, and they look forward to making a difference for our patients and our teams every day.

Wound Care Team

Wound, ostomy, and continence (WOC) nursing is a nursing specialty involved with the treatment of patients with acute and chronic wounds, patients with an ostomy, and patients with incontinence conditions. The WOC nurse provides direct care to people with wounds, abdominal stomas, fistulas, drains, pressure ulcers and continence disorders, and participates in assessment, planning, implementation and evaluation of patients with wound, ostomy and continence care needs. As an educator, consultant, researcher and administrator, the WOC nurse plays a pivotal role in the guidance of optimal patient care in multiple healthcare settings. In collaboration with the unit nursing teams at RGH, our team made significant strides in enhancing patient care and improving clinical outcomes throughout 2024. Key accomplishments include:

- Streamlining the PIPS process, ensuring more accurate data collection, and that a greater percentage of the patient census was seen.
- Meeting a need for real time data, newly staged HAPIs were tracked weekly and sent to the nursing leadership team. This allowed leaders to review patients and intervene in preventative care sooner. Due to the help and collaboration of all team members, we are excited that we continue to see a week by week downward trend.
- The successful implementation of a prevention bundle for patients with a Braden score of 18 or less.

Significant improvements comparing PIPS results from the end of 2023 to the end of 2024.



2024 has been an exciting year as we submitted our document for RGH's fifth Magnet redesignation. This submission featured more than 120 stories highlighting the incredible work our nurses have led, contributed to, and monitored—all in service of improving patient care, supporting their teams, and strengthening our community. Our document also included more than 30 outcomes that our teams improved over the past few years including our falls with injury, CAUTI, length of stay and patient satisfaction.

Magnet is closely tied to the RRH Mission, Vision and Values as it empowers nurses to collaborate, invent, elevate and celebrate nurses and how they provide care at RGH. Caring like Family was highlighted in several stories on how our nurses supported our families and each other through food drives, special learnings for patient care, participation in community events and so much more. We also were able to show how our nurses used technology, equipment and grants to Embrace Tomorrow, Today.



As we look forward to 2025, we eagerly await our Magnet site visit where we will have the opportunity to Validate, Verify and Amplify our enculturation of what it means to be a nurse at RGH. Our nurses will lead the charge in showing how each of you put our patient's first in caring, leading and knowing as part of our Nursing Professional Practice Model by sharing new ideas, leading projects, and driving outcomes for those who need it the most.

We encourage you to continue to take part in the many activities that elevate our nurses like the clinical ladder, advancing your BSN, gaining your certifications and so much more as these are the cornerstone of Magnet.

Until we celebrate in our Magnet site visit, we encourage each of you to empower charge, lead the outcomes and continue to provide innovative care.



Standardized Nurse Manager Professional Development Training

In 2023, the RGH Senior Nurse Leadership Team took an important step toward strengthening the leadership structure by creating a standardized onboarding program for new Nurse Leaders. This initiative aimed to provide new leaders with the tools, information, and clarity necessary to excel in their roles, ultimately contributing to a more effective, efficient, and supportive environment for both staff and patients.

The importance of leadership in nursing cannot be overstated, especially as the healthcare landscape continues to evolve. In 2024, there was a heightened focus on improving nurse retention, a critical issue in the nursing profession. Research, including a 2018 national survey of nearly 4 million registered nurses, found that poor management and leadership was the second most common reason nurses leave the profession. This data has underscored the need for the system to invest in developing strong nurse managers who are equipped to build supportive, positive unit and department cultures.

After reviewing comments from the 2023 Employee Engagement Survey, polls, focus groups, and nurse manager council, nurses have expressed a strong preference for managers who not only lead with authority but also show empathy, support, and appreciation. Nurses value managers who are engaged and proactive, those who have their backs and make them feel respected and valued. This creates a culture of trust, which is crucial to improving job satisfaction and retention rates.

However, feedback from new nurse managers revealed a significant gap in formal leadership training. Many reported that they had not received structured training to help them navigate their leadership responsibilities effectively. This lack of preparation often left them feeling unprepared to support their teams or manage the complexities of leadership within healthcare.

By focusing on leadership development, RGH aims to create a ripple effect, where well-supported managers are able to inspire and retain their teams. This approach recognizes that nurse managers play a pivotal role in shaping the culture of their units and departments. A positive and supportive leadership style can lead to higher levels of staff engagement, job satisfaction, and, ultimately, better patient outcomes.

As RGH continues to prioritize nurse retention and leadership development, the goal is clear: to create a supportive, empowering environment where nurses feel valued and appreciated, leading to stronger teams and a more sustainable workforce. The investment in new leader training is just one of many steps RGH is taking to ensure that its leadership team is prepared to meet the challenges of tomorrow, today.

Nursing Residency Program & 2004 Kick-Off

Empowering nurses to deliver safe, high quality care, grounded in evidence-based practice is what we strive for at RGH. In 2024, we had our second ever cohort of new graduate nurses complete Nurse Residency Program (NRP). We graduated 97 new nurses this year! The yearlong residency focuses on supporting the new nurse through their first year, using concepts based in leadership, patient outcomes, professionalism and evidence-based practice. Nurse residents meet monthly to support one another and collaborate with experts from Rochester Regional Health System. In 2024, our nurses who graduated from our NRP completed nine evidence-based projects where they partnered with nursing leaders at RGH and with our librarians to develop their own PICOT (patient, intervention, comparison, outcome, time) question. The NRP is a continuing improvement project, receiving and implementing feedback from residents, facilitators and coordinators. This past October we had a wonderful Nurse Residency Kick-Off!

We learned at a system level and then followed it up with some RGH team fun! We played some team ice breakers (their competitive sides came out), and every group created team names! Each group began discussions on potential EBP project ideas. The group was highly engaged and participative. Looking forward to how the year progresses!

Based on feedback from prior cohorts, our new NRP coordinators Katrina Lorenzetti & Bethany Hudnell, RGH RN Program Managers are making it a priority that our residents not only receive the system information, feel engaged in their EBP projects, but also receive tangible RGH specific information that will help their practice today. Ensuring that as they leave each session, they have gained a basic nursing need that will help their practice at RGH. Maslow's Hierarchy: If we give someone water/food when they are hungry--fulfilling their most basic need--after that they will be more receptive to us educating them on lifestyle.

Ultimately, if we give our residents their basic needs: what is the best way to find out who is covering my patient, what are covering provider's roles, what is ERT vs. CODE vs. Stroke Alert vs. ENIT vs. rapid response--information that fulfills their basic practice needs--they will likely be more engaged and able to receive the higher-level discussions and participation: EBP project etc. We sincerely are looking forward to this year's cohort and hope you all see its fruit within your teams as well.



Nursing Professional Practice Council

The Nursing Professional Practice Council (NPPC) is excited to continue its embracing of Shared Governance across all RGH inpatient-nursing units. The council is led by Bethany Hudnell, RN Program Manager. NPPC is composed of nursing representatives (RN, LPN, PCT, Secretaries) serving as a critical link between nursing and leadership. We advocate for the delivery of superior patient care, patient satisfaction and nursing satisfaction. We are a dynamic vehicle for promotion of positive change through education and shared governance. This year we have worked on many projects like: Patient Birthday cards, Daisy Award Winner Overhead Announcement, Assignment Sheet Legend, and supported a clothing Drive for the ED Clothing Closet. We meet every third Wednesday of the month from 3:30 pm to 5 pm in the Weiner room on RGH Campus. To become a member, you would need to attend meetings regularly, and be committed to getting information to your units and working alongside NPPC to develop initiatives for your area to increase our core values as a committee in your area. Please reach out directly to Bethany Hudnell if you think this may interest you!



RGH RN Retention Committee

RGH & RUNAP have officially launched our RGH RN Retention Committee as of 12/12/2024. This committee has appointed RGH leaders as well as appointed RUNAP members who will be focusing specifically on increasing RN retention and decreasing agency RN volumes at RGH. The committee will start off by meeting on a monthly basis and then will transition to quarterly as progress is made. They plan to look at a wide variety of data and help implement strategic plans on the topic. All RGH RNs should keep an eye out for a 3-4 question survey, developed by this committee, coming out January 2025. The committee intends to use this data in an effort to gain an understanding on where their focus should start.

Current members: Bethany Hudnell, Program Manager, Lauren Smith (OR Staff Nurse), Carmen Camelio (MICU Staff Nurse & RUNAP President), Matthew Mendolera (ED Staff Nurse), Katie Van der Jagt (5200 Nurse Manager), Nicole Messcher (MSU Nurse Manager), Gillian Kingsley (L&D Staff Nurse).

Per Diem Nurse Retention in SICU

The nursing team in the SICU/NCCU made change to their unit policy to improve retention and satisfaction for our per diem RNs. There was a trend in the SICU that per diem RNs would come to work and be floated to other units often, as a per diem would float first. This created an environment of dissatisfaction and discouragement for those nurses. They felt that the team did not need their help when they had picked up. This concern was brought to SICU's unit council in which they decided to add per diem nurses to our float list so they could rotate through float dates like the full time and part time staff do. The SICU nurses felt that we valued our per diem just the same as all other staff nurses. Now they have a float date like all other nurses. The SICU per diem RNs feel valued and are happy to help and pick up in the unit!

Workplace Violence Committee

The RGH Workplace Violence (WPV) Committee was re-established in May 2023 under co-directors Nicole Erdley, RN, BSN, Director of Nursing and Michael Rhodes, Senior Director of Safety and Security. The RGH WPV committee is a sub-committee of the larger RRH System Workplace Violence Steering Committee. The RGH WPV committee has representation from all disciplines and includes frontline team members. Following a successful 2023, the RGH WPV committee continued to grow with the following initiatives:

- Self-defense, reality based, de-escalation and situational awareness trainings
- The launch of TRUST training for safety and security and psychiatric teams
- Further development of the Computer-Aided Dispatch (CAD) system
- Successful Infant Abduction Drill
- Transparent incident reviews
- Replacing Send Word Now with Alert Media for more robust and reliable mass notifications
- Department specific (high risk departments) Security Risk Assessments lead by Mike Rhodes, including many frontline team members
- The RGH Adult ED has launched a robust department specific WPV committee

Most notably, in November of 2024, Governor Kathy signed into legislation the approval of Peace Officer status for select members of the RGH safety and security team.

RGH Patient & Family Advisory Council: 2024 Year in Review

The Patient & Family Advisory Council (PFAC) at Rochester General Hospital continued its grassroots work to elevate patient and family voices, focusing on enhancing the healthcare experience through targeted initiatives, collaborative discussions, and actionable recommendations. Here follow the highlights of the Council's work in 2024:

- **Diversifying Council Membership:** Identified diverse patient types and demographics to enhance council representation, guiding recruitment efforts aimed at expanding the membership of patient and family advisors.
- **Improving Internal Wayfinding:** Provided insights on wayfinding around RGH, highlighting the need for improved staff engagement, clearer elevator and floor designations, enhanced visual indicators, and better signage. Recommended implementing a wayfinding concierge to assist patients and families effectively.
- **Creation of PFAC By-Laws:** Developed and ratified bylaws formalizing the council's structure, culminating in a formal signing by both leadership and patient/family advisors on June 20, 2024.
- **Balancing Rights and Duties in the ED:** Engaged in a case study presented by Dr. Chris Reynolds, focusing on managing patient rights and duties in the Emergency Department and gathering council insights.
- **Enhancing the Informed Consent Procedure:** After a multi-meeting discussion, the council recommended expanding the "Informed Consent Procedure" to include clearer definitions of risks and benefits, emphasize understanding side and after effects, and ensure effective communication of clinical evidence. These recommendations were shared with the Senior Director, Regulatory & Compliance, and incorporated into policy updates.
- **Inpatient Medication Reconciliation Process Recommendations:** Reviewed the current inpatient medication reconciliation process, recommending that patients be informed about withheld medications and the reasons for medication changes, with a focus on clearer communication in the After Visit Summary and discharge instructions.

- **Improving the After Visit Summary (AVS) and Discharge Instructions:** Reviewed examples of the AVS, identifying the most critical and important patient and family information. Collaborated with Marketing, Design, and Health Informatics to emphasize clarity and consistency in formatting and instructions, particularly for medication lists and post-discharge emergency contact information. Agreed to refine the discharge instructions format to prioritize essential information on the cover or first page of the AVS.

RGH CareCREW

The RGH CARECrew is a dynamic, multidisciplinary team formed with the mission of “Celebrating All, Recognizing Everyone.” This initiative was created to foster a culture of appreciation, collaboration, and recognition within Rochester General Hospital (RGH), where every member of the team, regardless of role, feels valued and supported. By working closely with colleagues from various disciplines, nurses ensure that the CARECrew's mission extends beyond words, translating into tangible actions that uplift the entire healthcare environment. Nursing plays an integral role in this team, as the committee's co-chairs are both nurses and there are several additional nursing members on the team!

The CARECrew provided several fun events including: free Hot Chocolate on National Hot Chocolate day, create your own Valentine's Day make or take Stations, cards and carnations during Patient Experience Week, live music, Farmer's Market, and fun games at our Summer Picnic! We also had our inaugural Passport to RGH where departments got to showcase all the wonderful things they do to employees, patients, and visitors! We brought back our family-inclusive events with the Fall Festival in October and the HoliYAY Jubilee in the beginning of December, as well as had our Third Annual Gingerbread House Contest. These events were a great way for team members to spend time with their co-workers and families by enjoying games, free food, face painting, trick or treating, photo opportunities, horse drawn wagon rides and more!



“Nurses Make the Difference” – Nurses’ Week 2024

“Nurses Make the Difference” was the theme for our Nurses’ Week celebration in May! The week was full of festivities including: food trucks, a preceptor recognition luncheon, popcorn, candy carts, gift basket raffles, and bingo! The digital boards throughout RGH showcased our pictures of our amazing nurses all throughout the hospital! For the third year in a row, RGH presented our nurses with a Nurses Lounge where nurses could stop in to relax before shift, during break or after their shift for tranquility, a massage, drinks and snacks. The nursing lounge days/hours were extended based on feedback received from years prior! As a gift the nurse’s received a beautiful clear RRH bag with a trendy “Nurse” shirt and an aroma therapy clip! RRH Recruitment provided games and giveaways throughout the week as well!

This year we had a special surprise dedication from Shari McDonald, CNO, and Tammy Snyder, President/CCO, of the Daisy Award Wall! This daisy board and statue now are displayed at the hospital’s main entrance to showcase honor to all of the most recent daisy award recipients, and also to emphasize the importance of the nurse’s crucial role in the hospital and in our patient’s and family’s lives every single day. During that dedication, Shari, honored all of our Nursing Professional Practice Council members with a flower and a star pin for all of their hard work in their areas.



At the conclusion of the week, our Nurses and other healthcare professionals were honored during the annual Patient Care Services Awards Ceremony in the TWIG. The theme of the award ceremony was glitz & diamonds which made for a lux and V.I.P. atmosphere. We were able to recognize our nominees and winners with their family and friends in attendance.

The award recipients were:

- Social Work Excellence In Practice Award: **Julie Dorey**
- Naomi Dailey Secretarial Support Excellence Award: **Shayla Wiggins**
- Missi Stanzione Patient Care Technician Compassion Award: **Bev Sainteme & Ta'Asia Davis**
- Katie McMahan Patient Care Technician Excellence Award: **Bernita Dorsey**
- Advanced Practice Nursing Excellence Award: **Jarvis McGrath**
- Maureen Murphy Partnership In Care Award: **Jennifer Gutowski & Levi Gangi**
- Kathryn Schmidt, RN, Excellence In Patient Advocacy Award: **Lindsay Guercio**
- Marguerite Koderl, LPN, Nursing Excellence Award: **Rebecca Vigna**
- The Genesee Hospital School Of Nursing Alumni Association Excellence In Nursing Practice Award: **Karen Carpenter**
- Diane J. Huss Continuing Excellence Award: **Bethany Scantlin**
- M. Jeanne VanNiel Clarke, RN, Excellence In Nursing Award: **Amber Phillips, Emily Pike, & Lauren Grip**
- Sophia Palmer Nursing Leadership Excellence Award: **Chad Basile & Kristen Paliani**



Ronald McDonald Hospitality Cart

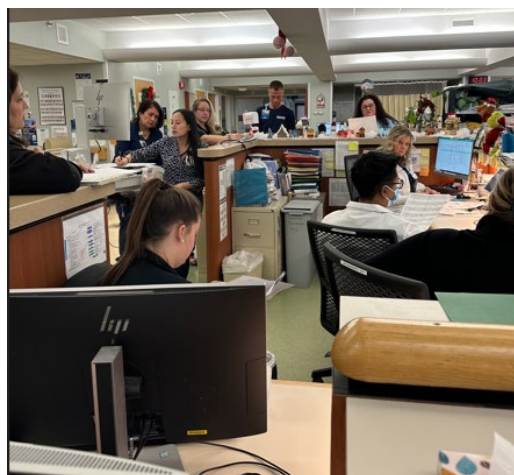
Sarah Kiley, Nurse Manager of NICU & Sands 300, and Tabitha Preston, Nursing Manager of Pediatric ED and 2000, in partnership with the Ronald McDonald House Charities of Rochester launched the Ronald McDonald Hospitality Cart on October 8, 2024. The cart is loaded with toys, snacks, and small surprises for the little patients and their families and goal is to make children and their families feel more comfortable while they are going through some of their most challenging moments. Volunteers help to prepare and distribute goodies from the cart which also plays music while it makes its regular rounds through the Pediatric Emergency Department, Inpatient Pediatric Unit, NICU, and Postpartum Unit.



It has been just a few months since our cart first began making rounds. We are absolutely thrilled with what we've accomplished so far and can't wait to see the joy we'll continue to bring! While we started part-time, the impact was so immediate and inspiring that we quickly expanded to five days a week! In that short three months, we've served 1,038 individuals—a testament to the joy and support we're bringing to patients and their families.

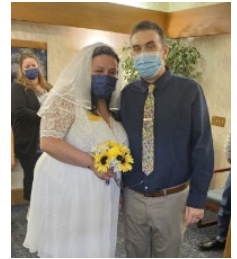
Nursing's Impact in Patient Throughput

With a continued focus on length of stay and throughput we have made improvements to our multidisciplinary rounds (MDR) process. This daily huddle is a platform for the team to gather and discuss discharge planning for each and every patient. As we continue to look for opportunities to improve this process the Nursing teams suggested that we make a switch in the order of presentation. Huddles were consistently taking more the 45 minutes and this suggestion was to have our hospitalist partners present first in order to improve the flow of conversation. This switch was combined with a hospitalist effort to improve geography and ensure increased physician attendance at MDR. Making to adjustment has assisted with shortening the duration of MDR allowing for the teams to have more time with their patients.



Wedding at RGH

A patient on Sands 600 had a new diagnosis of leukemia. He spent weeks here being away from his family due to receiving treatment. One day the patient and his fiancée decided to speed up their wedding planning with all these life changes! Kudos to the Sands 600 team for putting together this beautiful and heartwarming ceremony and reception right on their unit!



Action Plan to Decrease Supply Costs on 4800

In an analysis of supply costs per unit, it was noticed that the run rate on unit 4800 from 2023 was consistent until the month of October of 2023 where the last 3 months of the year significantly jumped from where it started in the beginning of the year. Analysis of supplies from 2024 showed an increase in supplies specifically in dressing supplies, CHG wipes, locaters, Spo2 sensors, gowns, male/female external catheters, and feeding tube supplies. The unit also worked on a new project and initiative in July of 2024, which required a large bulk order of wound care supplies. This included mepilex dressings, creams, saline solutions, and much more. The start of a “wound care closet” was part of the unit’s pressure injury action plan to have more supplies readily available to use for the patients. However, this huge cost in addition the other supplies needed for patient care caused the supplies budget to be highly unfavorable. Therefore, an action plan was needed to see how the unit can decrease supply costs and still ensure there are enough supplies on the unit for the patients.

A supply cost analysis was conducted to evaluate the trends in supply costs, patient days, and cost per patient days on 4800. 2023 was compared to 2024 to see where there were areas of opportunities. July of 2024 caused the supplies budget on 4800 to become highly unfavorable; however, it was noticed that the unit’s trend line already moving upwards prior to developing the new wound care closet. The next step taken was looking at the item list year to date for the unit to see where majority of costs are happening and compare costs from the previous years. There are multiple reasons why supply costs can increase throughout the year and it can be broken down into if it relates to the patient’s care or related to supply waste. From the supplies ordered YTD, it was determined that decreasing supply waste could be an area of opportunity as many of the frequently ordered supplies were not out of the ordinary and were normally stocked items. Therefore, three interventions were developed around decreasing supplies waste with a goal to decrease costs by 10% and reverse the trend line to go favorable.

2023 Supply Cost Analysis														
Supply Cost														
Sum of TC	Column Labels	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Trend Lines
Row Labels														
RGH 4800		\$ 16,704	\$ 15,772	\$ 19,594	\$ 19,915	\$ 20,940	\$ 17,744	\$ 20,300	\$ 25,965	\$ 27,534	\$ 31,444	\$ 29,787	\$ 30,425	
Patient Days														
Accountin	FY 2023 -	FY 2023 -	FY 2023 -	FY 2023 -	FY 2023 -	FY 2023 -	FY 2023 -	FY 2023 -	FY 2023 -	FY 2023 -	FY 2023 -	1FY 2023 -	1FY 2023 -	Trend Lines
10310002		1,162	1,047	1,160	1,125	1,157	1,094	1,126	1,111	1,100	1,157	1,085	1,156	
Cost per Patient Day														
Accountin	FY 2023 -	FY 2023 -	FY 2023 -	FY 2023 -	FY 2023 -	FY 2023 -	FY 2023 -	FY 2023 -	FY 2023 -	FY 2023 -	FY 2023 -	1FY 2023 -	1FY 2023 -	12 - December
10310002	\$	14	\$ 15	\$ 17	\$ 18	\$ 18	\$ 16	\$ 18	\$ 23	\$ 25	\$ 27	\$ 27	\$ 26	
2024 Supply Cost Analysis														
Supply Cost														
Sum of TC	Column Labels	Jan	Feb	Mar	Apr	May	Jun	Jul	Trend Lines					
Row Labels														
RGH 4800		\$ 40,617	\$ 29,267	\$ 29,629	\$ 27,461	\$ 26,007	\$ 29,964	\$ 41,346						
Patient Days														
Accountin	FY 2024 -	FY 2024 -	FY 2024 -	FY 2024 -	FY 2024 -	FY 2024 -	FY 2024 -	FY 2024 -	FY 2024 -	FY 2024 -	Trend Lines			
10310002		1,166	1,072	1,136	1,109	1,158	1,092	1,128						
Cost per Patient Day														
Accountin	FY 2024 -	FY 2024 -	FY 2024 -	FY 2024 -	FY 2024 -	FY 2024 -	FY 2024 -	FY 2024 -	FY 2024 -	FY 2024 -	07 - July			
10310002	\$	35	\$ 27	\$ 26	\$ 25	\$ 22	\$ 27	\$ 37						

The first intervention developed was to re-start monthly meetings with the central stores department to review supplies from the past month and adjust PARs as necessary to decrease bulk orders and only get stocked with what the unit needed and minimize any extra supplies. In addition to these monthly meetings, a meeting was set with the 4800 nurse manager, 4800 assistant nurse manager, and unit secretary about the process in ordering supplies and how we can re-adjust and pivot in certain areas. This would be to help decrease in bulk supply orders as well and see where supplies are being list. It was determined that all large orders would need to be reviewed by the nurse manager first to see if there are other ways we can get supplies without a large bulk order. Lastly, creating a team of 3-4 people who can champion monitoring supplies and helping decrease waste was determined to be a vital part in the success of this action plan. This group would consist of nurse leaders, charge RNs, PCTs, and US who can help create a plan in how to decrease any waste. They would also be in charge of educating staff, reinforcing, and monitoring for effectiveness.

Since implementing the action plan for supply usage, cost was significantly reduced!

Quarter 1: \$12,343 (over budget)

Quarter 2: \$8,814 (over budget)

Quarter 3: \$32,525 (over budget)

Quarter 4: \$5,853 (over budget)

The unit secretary and assistant nurse manager on 4800 continue to be the supply champions who identified a better ordering process for floor items, including switching isolation gowns to a less expensive option. The supply champion team continues to huddle with staff weekly and reminding everyone to not pre-stock patient rooms but to only take what they need.

Structural Empowerment on 5200



Alyssa Damiano is an RN IV on the cardiac interventional floor at RGH (known as 5200). In the past two years, she has truly taken advantage of everything RRH has to offer then it comes to professional growth and exhibiting structural empowerment as a registered nurse. In 2022, she was a summer excel intern on 5200 and worked full time hours with a nurse for over two months. During this time, she got one on one training with an experienced nurse and got familiar with the hospital and cardiac patients. After her internship, she worked as a PCT as she finished nursing school at St. John Fisher University. When she graduated in May 2023, Alyssa accepted a new grad RN position on 5200 and quickly jumped in to her nursing career.

Throughout her first year of nursing, she has achieved many professional achievements and has gotten involved throughout our organization. She is an active unit council member, participates in recruitment events for the unit, and has contributed too many quality and patient initiatives. All of her dedication and hard work has allowed her to advance and be promoted from RN I to RN IV. Since this major accomplishment, Alyssa has been a role model to her colleagues and new grads coming in as she has worked with many nursing career students and new grad RNs. As the newest charge on 5200, she has already been recognized by a co-worker. She stated, "Alyssa is such a team player and was looking out for all the nurses and techs throughout the day offering assistance. Towards the end of the shift, a new admit was unresponsive and Alyssa helped the nurse and assisted the patient in a calm manner. I am very thankful for Alyssa's clinical knowledge and willingness to help nurses and techs alike." Alyssa has now taken the initiative to continue to professionally grow and pursue her FNP at St. John Fisher University. She always takes advantage of any opportunity she can to advance her knowledge and career and we are excited to watch her continue to grow!

Bi-Annual Equipment Assessments

As a part of leader rounding and the engagement survey, the RGH Senior Leadership Team heard the requests from the front line staff for the need of new or additional equipment. In 2024, we started bi-annual equipment assessments and then worked together to support the purchase of tools to be able to support every day work as well as programs like the fall program, mobility, and increase safe patient handling. While not an inclusive list, here is a snapshot of the investment in 2024:

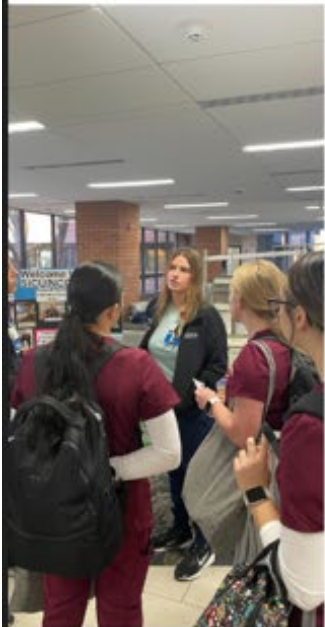
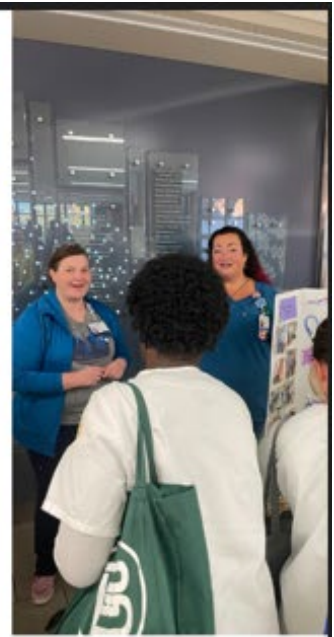
- 60+ rolling walkers
- 70 over-bed tables
- 24 recliner re-allocation to units for use
- 80 tele boxes
- 75 SCD machines
- 40 visitor chairs
- 30 bedside scanners
- 100 hoyer slings and disposable ones
- 4 EKG machines
- 8 commodes
- 1 bladder scanner
- 2 vein finders
- All new feeding pumps

We continue to advance this work in 2025 and just received a donation to purchase vein finders for many units. We appreciate your feedback, requests and insight as we work to continue this effort in 2025.

Supporting our Future Nurses: Clinical Kickoff/Nursing Student Lounge

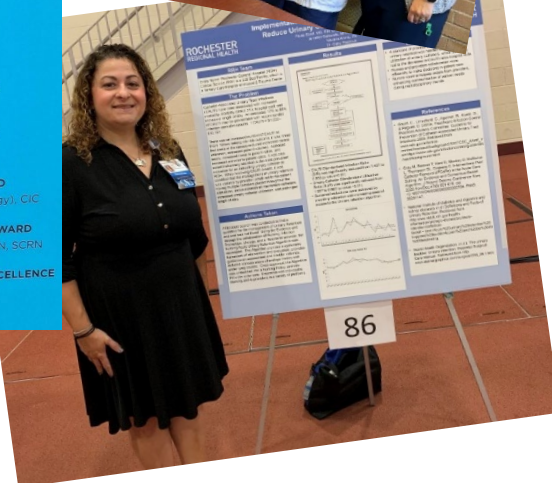
During 2024, Rochester General Hospital nurses helped support over 800 nursing students from 14 different nursing schools. This year we worked to welcome and support our nursing students in a multitude of ways. Our goal was to engage our nursing students and get them excited to work with us at RGH. Nurses from different units welcomed nursing students at our clinical kickoff, where they volunteered their time to highlight the units they work on. Our nurses were excited to share the exciting things they are doing in their departments and also encouraged nursing students to shadow or apply for jobs to work with them! We have also added a Nursing Student Lounge on the RGH Campus to ensure our students have a comfortable space for their bags, jackets, lunches, and also to pre-and-post conference! We keep this room stocked with information about job and internship opportunities. It has been making quite the impact on them!





Clinical Nurse Specialists

This year, the Clinical Nurse Specialist (CNS) team has continued to exemplify excellence in advanced nursing practice, particularly in our commitment to at-risk populations. Comprised of masters and doctoral prepared Advanced Practice Registered Nurses (APRNs), CNSs provide diagnosis, treatment, and ongoing management of patients while also supporting nursing & provider teams. Our focus remains on driving practice changes throughout the hospital and organization, ensuring that best practices and evidence-based care are at the forefront of our efforts to achieve optimal patient outcomes. The CNS team has been instrumental in leading and partnering with nursing and providers in multiple initiatives aimed at reducing patient harm including: HAPI prevention, HAI prevention, mobility, and VTE prevention. Throughout the year, the team has been involved in standardizing policies, protocols, products throughout RRH to ensure quality care is delivered to our patients. The team has also developed and taught several educational opportunities for both nursing and providers inside our organization and within the community, including our outstanding rural communities. To support the organization's commitment to quality and safety, the CNS team actively supports several DNV certifications. The team's dedication to excellence has not gone unnoticed. This year, the CNS team has been nominated for and received several awards. Members of our team have had the opportunity to present at both local and national conferences. These presentations have not only showcased our work, and the work of the organization, but have facilitated valuable discussions and sharing of best practices.



International Nursing

Corazon Garcia is our first International Experienced Nurse at RGH that was hired through our Global Nursing Program. Ivonne Clement, BSN, RN, VP of Global Nursing; May Potter, Manager of Talent Acquisition of Global Nursing; and Kristee Aliten, MSN, BSN, RN, Program Manager of Global Nursing worked together to ensure she had a smooth transition moving here from the Philippines to the United States. Roxanne Souvannarath, BSN, RN, Program Manager, partnered with 4800's leadership team, to provide a thorough orientation plan for her to successfully make the transition to nursing practice to a U.S. healthcare system. She has built relationships with her colleagues who are now like family to her here in Rochester that continue to support her both at and outside of work. Corazon's confidence has grown with the support of the Global Nursing team and 4800's staff. As we see our Global Nursing Program grow and more talented clinicians like Corazon join our RRH team, we continue to hold true to our values and embrace tomorrow, today.



Music Therapy on Sands 600

Sands 600 began participating in a music therapy pilot for our patients in Q4 of 2024. The nursing team has become excellent advocates for music therapy for their patients. The staff have recognized the benefits of music therapy for patients who are depressed, anxious, or fearful. Most of the nursing team has never worked with a music therapist before, so this has been a new, exciting experience. It has been great to see patients engage in music therapy, and even see staff singing along to familiar tunes at the nurse's station. Our patients who have long lengths of stays look forward to music therapy each week. Of the surveys collected so far, all patients and family noticed benefits of music therapy and believe it makes a difference in the care and services RGH provides. Some quotes from patients really show the benefits music therapy has brought to Sands 600 in just a short time. "I enjoyed every bit of it, more than you'll ever realize." "As soon as I heard your voice, I started smiling." "It makes a difference. I really needed it today." The nursing team is looking forward to continuing the six-month pilot and hoping to see continued positive results! There are even plans to do music therapy sessions with the nursing team!



Oral Hydration

In October 2024, in response to the Nationwide IV fluid shortage a multidisciplinary team convened to review literature regarding oral hydration to determine how to best implement an oral hydration protocol to ensure that our patient's hydration needs were met during this crisis. The multidisciplinary team included members from the following teams: physicians, nursing, dietary, speech language pathology, and pharmacy, materials management to gather diverse insights and expertise. The team identified and evaluated various oral hydration solutions and broths considering patient preferences, tolerability, and electrolyte composition. Once the final recommendations for oral hydration solutions were identified, the team worked with the Care Connect team to create a standardized order panel for within the electronic medical record to facilitate the ordering of oral hydration solutions when appropriate. Additionally, the oral hydration solutions were incorporated within the intake and output documentation for nursing. The team worked with department leaders to operationalize the use of the oral hydration solutions. Educational materials were developed for the documentation and the order panel. These efforts helped to reduce IV fluid usage to conserve for our most at risk patients and paved the way for an innovative non-invasive way for our patients to maintain adequate hydration ongoing.

Total Solar Eclipse: April 8, 2024

On April 8th 2024, Rochester NY found itself in the path of a total solar eclipse. An event that was just a few fleeting moments, required months of preparation as our healthcare system and community prepared to welcome nearly 150,000 visitors chasing the eclipse. Although the eclipse began at 2:07 and was complete by 4:33pm, our teams were ready for whatever might come. Emergency responders were stationed throughout the area strategically for quick access in the case of an emergency. This meant that some of our normal work flow in our hospitals needed to be altered or paused during that actual span of the eclipse. Most of the impact was focused on any patient movement in our community during that time. We worked with Monroe Ambulance to coordinate weekend discharges the 2 days prior to the eclipse as they would not be able to assist with transportation for discharges on the day of the eclipse. All other forms of transportation/ discharges were paused between 2pm-5pm for driver and patient safety. Our teams staffed up incase this had an effect on patient access or delays. Our staff and patients were provided with safety glasses to observe the eclipse as well as eclipse themed treats for staff to enjoy while taking in this "once in a lifetime" event. All in all, the moon passed in front of the sun without a hitch and many were able to take in this experience, even in spite of a generally cloudy day. In the end, we were ready, we were here for it, and we had a little fun!



Virtual Nursing & 3800 Opening



As part of our RRH Strategic Plan for 2024, Innovation and Technology are key enablers for success. Thomas Edison said, “There’s a way to do it better – find it.” We have started to build a new multidisciplinary model of patient care using innovative processes, technology, & virtual care models. Our goal is to enable our teams to work more efficiently to deliver the right care, at the right place, at the right time to improve our team & patient experiences. Virtual Nursing kicked off at RGH on August 5th with the opening of the new orthopedic unit, 3800. Some of the benefits of such a platform include: retention of staff, bedside report, safety and patient experience. We are thrilled to be exploring and instituting this technology for both our patients and staff.

On August 12, 2024, 3800 went live with virtual nursing. It has been an exciting journey to be the first unit in the hospital to go live with this innovative platform. Our virtual nurse helps with admissions, discharges, charting, and hourly rounding. The virtual nurse is able to help with the units quality metrics. Some of these quality metrics are: completing IV assessments, dressing change audits, and help to keep patients from getting out of bed or out of the chair without assistance by giving the patient ques and contacting the bedside staff. They have also helped to remind the bedside staff of changing out ice packs for Cryotherapy to help with pain management.



What have we heard?

“I’ll see you tomorrow on the TV!”

“I was your nurse yesterday and today I am your virtual nurse today”

Patient feedback:

“It seems like such a smart idea”

“They really took the time to answer my questions”

“I think it’s really cool”

CUSP Project Success Stories: SICU

RGH is up to 24 Comprehensive Unit-based Safety Program (CUSP) units! CUSP teams use safety science as the basis for evaluating the process of providing care on their units. The CUSP movement has internationally demonstrated that this framework improves the safety culture of the unit and decreases harm to patients. The most important driver of the CUSP framework is the recognition that the best people to identify risks and implement change are the team members that do the work every day – all the staff that provide care or support for patients in the area – this is the CUSP team!

Early this year, the Surgical and Neuro Intensive Care Unit developed a CUSP team to identify patient safety concerns within in the unit. The first project that the team had identified as a large need was a way to help uniformly identify and communicate patients goals, plans for the next shift, orders that need to be changed or added and other patient specific information. An idea for a new nurse driven rounding tool was brought up in one of the meetings. This would create a space for nursing to get involved, review orders, talk about patients plan and ensure direct communication with providers at a specific time of the day. First, the CUSP team developed a unique to SICU rounding Daily Checklist and surveyed the team if there were points to add or to change. Next, the rounding tool was piloted. The night nurse would fill out the Daily Checklist and hand it off with the day nurse so they can present it in rounds. The Daily Checklist now is incorporated in our daily

multidisciplinary rounds presented by the nurse. We have seen improvement in the accuracy of orders for patients. An example of the success for the checklist is daily weight orders and logging daily weights has had a 24% increase in compliance from August to December. In the fourth quarter this year every nurse has been asked in leadership one-to-ones their thoughts on the Daily Checklist; including successfulness and barriers. Leadership will bring this information to the CUSP team to continue to improve on the success of the project.

Pediatrics Project: Children in Psychiatric Crises

The 2024 Nurse Residency Program (NRP), Pediatric service line, Elizabeth McGarvey, RN; Gabriella DeMeo, RN; Jasmine Clark, RN; Carrie Ribbing, RN; Paige Hameister, RN and Sally Hannafon, RN chose to do their NRP evidence based project on Children in Psychiatric Crises. Based on the research findings they developed their unit CUSP project around the Pediatric Psychiatric crisis in the RGH Pediatric ED. They have used this project to implement many hospital initiatives to increase safety within the department for both staff and patients. Some of these changes include meeting patients in acute crisis in the EMS vestibule to figure out a plan, which decreases aggressive or violent safety events in PEDS ED, EMS calling the charge nurse, and the nurse and MD then responding to the EMS vestibule to assess the patient and situation. The vestibule is now equipped with a phone for communication to the charge nurse as well as clear directions of process. To accomplish this goal they had many working meetings and ensured connection to many local emergency services to establish their partnership as well. They believe pediatric mental health is an ongoing crisis with a continued need for growth and development and that children's mental health matters as they are our future! They plan to conduct a more extensive evidence synthesis to identify interventions which RRGH might consider in the future to improve mental health crisis care for Pediatric patients.

Children in Psychiatric Crises

Elizabeth McGarvey, RN; Gabriella DeMeo, RN; Jasmine Clark, RN; Carrie Ribbing, RN; Paige Hameister, RN & Sally Hannafon, RN
Pediatric Emergency Department, Rochester General Hospital, Rochester, NY

Background

- Mental illness in children increasing
- The American Academy of Pediatrics declared a national state of emergency⁽¹⁾
- 50% of children and youth admitted to psychiatric inpatient care were boarded in the ED⁽²⁾
- EDs struggle nationwide with boarding pediatric patients awaiting psychiatric treatment
- COVID-19 exacerbated urgent youth mental health crisis driving EDs to act as crisis units⁽³⁾
- 2009-2015 mental health ED visits increased by 56.4% for children⁽⁴⁾
- 2009-2015 329% increase in ED visits for deliberate self-harm⁽⁵⁾
- Media reports mentally ill children languishing in EDs without appropriate care⁽⁶⁾



Problem

- Children lack adequate access to optimal ED emergency mental health care⁽⁷⁾
- ED is the first stop for youth experiencing psychiatric crisis
- Boarded pediatric patients often wait extended periods awaiting psychiatric placements⁽⁸⁾
- Boarded patients often receive limited psychiatric intervention due to limited hospital resources⁽⁹⁾
- Hospital average wait for admission or transfer to a psychiatric bed of 48 hours
- Settings for boarded youth include:
 - Lack of privacy with overstimulating environments
 - Exposure to psychiatrically or medically ill adults
 - Frequent absence of appropriate assessment and treatment for mental health conditions⁽¹⁰⁾

PICOT Question

What is the best practice for treating pediatric patients requiring emergent psychiatric observation?

What is the best practice for treating pediatric patients in an acute mental health crisis?

- Those treating children with mental health issues should be child specialists and be specifically trained in working with children with mental health issues⁽¹¹⁾
- The presence of a dedicated pediatric mental health professional team was associated with shorter lengths of stay and reduced hospital admissions⁽¹²⁾
- In emergency rooms that are not appropriately equipped or that have providers not appropriately trained on the unique health care needs of children, this failure can lead to delayed or incorrect diagnoses, inappropriate treatments, [and] suboptimal care⁽¹³⁾



"You can't just take a child into a room, do adult psychotherapy, and think, 'Well, that's going to work when they go back out into the world' because they're not in charge of themselves, they're children" Greenville Dafoy, MD⁽¹⁴⁾

Conclusion

- Pediatric mental health is an ongoing crisis with a continued need for growth and development
- The healthcare system has opportunity to improve treatment processes surrounding pediatric patients exhibiting a psychiatric crisis
- Current RGH structure is a joint adult and pediatric psychiatric evaluation space
 - Providing a designated pediatric psychiatric patients can avoid boarding in emergency departments and adult crisis intervention units,
 - Should improve the outcome of pediatric mental health emergencies
- Children's mental health matters! They are our future.

Future Implications

Conduct a more extensive evidence synthesis to identify interventions which RRGH might consider in the future to improve mental health crisis care for Pediatric patients.



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ROCHESTER REGIONAL HEALTH

CTICU Nursing Excellence



Nurses from our CTICU team (Lauren Grip, Leo Clayton, Shavonne Sanchez and Jeanette Vereecke) delivered their final presentation of our AACN CSI project at Lenox Hill Hospital in NYC. This project was awarded to the CTICU in the form of a grant from Edward's Life Sciences and partnered with AACN to afford a team of nurses the opportunity to come up with a patient centered quality improvement project. The CTICU team chose to focus on reducing the rates of readmission due to the incidences of driveline infections. The team

standardized a new driveline dressing and created educational tools to help bedside nurses feel confident in their own education and the education of their LVAD patients. The presentation showed a decrease in readmission rates due to driveline infections and improved nurse satisfaction with the LVAD dressing and education!

Decreasing Infections on Sands 600

When Nadezhda Davenport, Assistant Nurse Manager on Sands 600, started in her new role, she noticed that patients, those specifically with central lines, were being neglected in terms of providing daily care. As a nurse, she is always look for room for improvement and “teachable moments” and as the new Assistant Nurse Manager, she took the role to improve quality of care for our patients while instilling RGH's values by caring like family. She sees our patients as if they are her own family and she believe that everyone deserves the best care and provide that daily care such as bathing, brushing teeth, and getting out of bed. If she was in different shoes, she knows that she would have a sense of calmness knowing my loved one was cared for.

As of March, we have been working tirelessly to instill these values on our floor. Some of the actions involved:

- Weekly auditing including developing a time frame where this work should be done
- Rounding with the techs and patients around 2pm
- Initiating charge PCT and delegating audits to that PCT
- Teamwork culture (Changing the thought process of “this isn't my patient” to “these are all of our patients”)
- CHG stars
- Closely looking at avatars to seek out patients that truly need CHG bathing
- Tech corner

The relentless focus on providing the very best care resulted in an improvement in CHG bathing and teamwork amongst patient care techs!

2024 Excel Nurse Intern Program

We had another wonderful summer welcoming area nursing students to spend their summer working alongside our wonderful RGH nurses. Our RGH Excel preceptors partnered to provide these students insight into the world of nursing, gaining critical thinking, time management, and communication skills, while helping to develop their confidence before they return to school. In 2024 we had 40 Excel Nurse Interns participate in the program, representing 16 colleges/Universities. They spent their summer working across 23 acute care units while also completing a collective, 120 shadows throughout RGH. This group met weekly to gain knowledge from our Unit Educators and CNS team while sharing observations and support for each other. For the first time this year, we had five nursing students join

the program from Puerto Rico, creating one more avenue for future nurses to see the wonderful opportunities at Rochester General Hospital.

We were also able to bring back our annual trip to Mercy Flight which is always a highlight of the summer. 96% of the Interns offered, accepted PCT/Nsg student positions before they left for school – hopefully we can convert those to RNs in 2025! Special thanks to our Unit Preceptors, Managers, Unit Educators, CNS and Talent Acquisition team for dedicating their time and commitment to these nursing students and the future of nurses and RGH.



No One Dies Alone (NODA) Program

No One Dies Alone is a national program that works to support staff, patients and their families when the decision is made to withdraw care or go hospice. There are times in which patients do not have family or their demise is imminent and it doesn't allow time for the family to arrive. This program is intended to utilize volunteers to sit vigil to help support the staff when there is a lack of family/friends for the patient. This as a program that was active at RGH in the past and was reinvigorated and launched on February 1, 2024 in the MICU with support from Volunteer Services. The initiative aims to provide compassionate companionship to patients at the end of their lives who do not have friends or family available at their bedside. The goal in 2024 was to expand to families that needed support or had a gap in their vigil so that the patient was never alone. This program was launched with, 29 volunteers who were provided training on the death process, patient comfort measures, vigil experience, human elements, and religious traditions. This was to allow the volunteers the tools that they needed to be able to best support the patient, their family and the staff.

When a patient or family is identified there is a process to activate the sign up for the volunteers to be able to get support during day time hours. As the program evolved, the program was expanded to Sands 600 and added improvements to include a tablet to enhance volunteer access to key contacts, sacred texts, music, and internet resources. The goal for 2025 is to expand the program and support for other patients and families at RGH.

Venous Thromboembolism (VTE) Prevention Workgroup

In 2024, RGH reinvigorated their Venous Thromboembolism (VTE) Prevention Workgroup in order to reduce the incidence of DVT and PE events occurring in the hospital setting. Following the completion of a thorough gap analysis and literature review of evidence-based practices involving VTE prevention, the workgroup began the move to standardize prevention measures throughout ambulatory and inpatient patient care areas.

By applying the concept of a prevention bundle, the multidisciplinary workgroup moved to implement best practices known to help prevent the occurrence of blood clots, including:

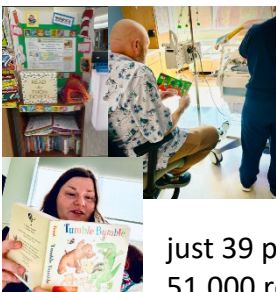
1. Chemoprophylaxis (the use of medication to prevent blood clots)
2. Mechanical prophylaxis (Sequential Compression Devices, known as SCDs)
3. Early and frequent ambulation and optimized mobility

Pharmacists worked to develop practice recommendations related to chemoprophylactic medication management and used the recommendation to educate providers and promote evidence-based practices. Physicians and Advanced Practice Providers reviewed and modified patient order sets to be inclusive of bundle elements and help eliminate process gaps involving preventative measures prescribed to patients. Nursing contributors educated all RGH nurses at the annual Skills Day regarding VTE prevention and educated system-wide nurses and assistive clinical personnel through an on-line learning module.

Collectively, the VTE Prevention Workgroup developed and instituted standardized, multidisciplinary VTE Case Reviews that allow for the on-going examination of the quality-of-care delivered in relation to VTE prevention measures. More than 35 cases were fully reviewed and debriefed with all levels of clinicians, resulting in the identification of numerous opportunities to improve clinical practices. The workgroup collaborated to enhance the ease of use of the electronic health record system by incorporating multiple modalities of VTE prevention practices in to existing order sets, examining our current VTE risk evaluation practice standards for both medical and surgical service lines and aligning prevention interventions to each individual patient's risk level, as well as modifying nursing documentation platforms to improve visibility of and adherence to prescribed VTE prevention regimens and the development of best practice advisory triggers to ensure that whenever ordered chemoprophylaxis is unable to be given, nursing is prompted to notify the patient's provider to provide further education and review the patient's ordered prophylactic regimen. Additionally, the workgroup advocated for RGH to obtain additional mechanical prophylaxis equipment to ensure that our supply met our patient's needs.

The work in the VTE prevention space is on-going and we continue to focus on preventing patient harm by standardizing best-practices related to VTE prevention throughout RGH and RRH.

NICU Read-a-thon!



In honor of National Literacy Month and NICU Awareness Month, Rochester General Hospital TWIG Neonatal Intensive Care Unit (NICU) participated in the annual Babies With Books (BWB) NICU read-a-thon from September 12-22. This annual competition helps support NICU families, and celebrate shared reading. The BWB NICU Read-a-thon is an international reading competition between over 170 hospitals across the US and four other countries, promoting reading to babies in the NICU. It started in 2022 with just 39 participating NICUs and has been growing since, with over 190 participating and over 51,000 reading sessions during last year's read-a-thon.

RGH Nursing Impact on Mobility

Mobilization or the action of capable movement has the ability to prevent many hospital acquired conditions and decrease length of stay. With the creation of new reports, it was identified in August that more than 38% of our patients were not being mobilized. A multidisciplinary team convened and evaluated the current practices at RGH, supply needs for mobilization, current resources and put together a comprehensive plan to start mobilizing more patients. With support from the Senior Leadership team, resources were allocated for ordering of equipment and the hiring of the first mobility tech. Engagement of leadership at the unit level that included partnership of PT and OT was essential and RGH was able to decrease our % of patient not out of bed to 28% at its lowest. Each reduction by 1% is thousands of opportunities to mobilize our patients and improve outcomes. Some of our units cut their not out of bed by more than 50%. This took immense effort of our nursing teams in collaboration with other specialties to make this possible. As we embark on 2025, we will continue to enhance our mobility program by working on, out of bed > two times daily and ambulation of our patients. Thank you to all of the nurses who made this a priority for your patients.

Areas of Excellence

At Rochester Regional Health, our dedication to quality is reflected in the teams we hire, the care we provide and the services we offer. This commitment to safe, reliable and high-quality care is also demonstrated through our regulatory compliance and accreditations. Below outlines some of the areas of excellence at Rochester General Hospital and the units that are involved in the accreditation process. The team commitment helps our organization highlight strengths, reaffirm compliance, and drive continuous improvement.



Orthopedic Center of Excellence (Hip & Knee, Spine, and Shoulder) Since 2021

Units: 6800, Peri-Op, Rehab Services

DNV's advanced orthopedic & spine certifications provide a means for consumers to make an informed decision on the quality of care that they will receive at a hospital. The survey is 2.5 days long and occurs on an annual basis.

Palliative Care Program Certification (PCPC) Since 2022

Units: Sands 600, MICU.

The Palliative Care Program Certification (PCPC) recognizes excellence in inpatient palliative care treatment. The certification validates compliance with accepted standards of palliative care practice and has a systematic approach to continuous quality improvement in the delivery of palliative care. The survey is 1 day long and occurs on an annual basis.



Comprehensive Stroke Center (CSC) Certification Since 2021

Units: 7800, SICU/NCCU, ED, Radiology

Comprehensive Stroke Center (CSC) Certification is for hospitals with the team, infrastructure, and expertise to diagnose and treat stroke patients who require intensive medical and surgical care, specialized tests, or interventional therapies. A CSC delivers the highest quality of care to the most complex cases and offers evidence-based treatments with cutting edge research protocols and is a resource center for other hospitals. The survey is 2 days and occurs annually.

Get With The Guidelines® – Stroke

Units: NCCU, ED, 7800, Radiology including CT & IR, MSU

Hospitals that participate actively and consistently in Get With The Guidelines®- Stroke are eligible for public recognition. The recognition is an in-hospital program for improving stroke care by promoting consistent adherence to the latest scientific treatment guidelines. RGH was awarded GOLD PLUS with Target: Stroke Honor Roll Elite and Target: Type 2 Diabetes Honor Roll. Data is submitted quarterly and awards are determined on calendar year.



VAD Certification Since 2019

Units: 4400, 5200, ED, CTICU, CICU

The VAD Credentialing Survey process audits an organization's VAD Program in quality, program management, staffing management, infection prevention and control, VAD Program Service Delivery, and an evaluation of the multidisciplinary approach from pre-hospital care through discharge planning. The survey was 1 day long and occurs on an annual basis.

Bariatric Center of Excellence

Units: Peri-Op, 5400, 2800

Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP) is a nationwide program that helps hospitals provide safe and effective metabolic and bariatric surgical care. Applicable to both inpatient and outpatient bariatric surgery centers, nearly 1,000 sites in the US and Canada have undergone independent, voluntary, and rigorous peer evaluations. MBSAQIP accreditation promotes uniform standards and continuous quality improvement.



RGH Hand Hygiene Compliance

Hand hygiene is a critical component in maintaining patient safety and reducing healthcare-associated infections. RGH has demonstrated a continuous improvement in hand hygiene compliance throughout 2024. The overall compliance rate has steadily increased, reflecting the effectiveness of ongoing efforts to promote and monitor hand hygiene practices. Below is a breakdown of the compliance rates for different staff groups:

- Overall Compliance: RGH achieved an improvement in overall hand hygiene compliance, rising from 95.3% in January to 97.3% in December. This reflects a concerted effort across all departments to ensure adherence to proper hand hygiene practices.
- Nurse Compliance: Nurse compliance rates increased from 96.9% in January to 97.9% in December.
- Provider Compliance: The compliance rate for providers rose from 93.5% in January to 96.9% in December.
- EVS Compliance: Environmental Services (EVS) staff saw an improvement from 92.3% in January to 95.4% in December.
- PCT/CNA/Tech Compliance: The compliance rate for Patient Care Technicians (PCTs), Certified Nursing Assistants (CNAs), and technicians improved from 92.8% in January to 96.8% in December.

Recognizing the importance of consistent observation and support, in 2024, RGH incorporated light-duty workers into the hand hygiene monitoring process. These workers assisted in observing hand hygiene practices and ensured that hand sanitizers and other hygiene products were consistently stocked and available. Their involvement was instrumental in maintaining a high standard of compliance across the hospital.

The steady improvement in hand hygiene compliance at RGH throughout 2024 highlights the success of the hospital's monitoring strategies, feedback mechanisms, and collaborative approach. With a continued focus on real-time observation, feedback, and the engagement of all staff members, RGH is well-positioned to maintain and further improve hand hygiene compliance. This collective effort plays a crucial role in ensuring patient safety and the reduction of healthcare-associated infections.

Pneumbra Award

The Pneumbra Award is a quarterly award for the Adult ED that highlights all the team members who were involved in the fastest IV thrombolytic administration time for the quarter.

Q1 2024 (19 minutes)

Abigail Streb RN
Brenna Linder RN
Richard Coia, MD
Kayleigh Wilber PA

Q2 2024 (25 minutes)

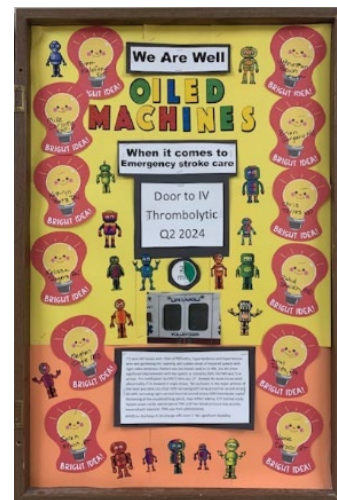
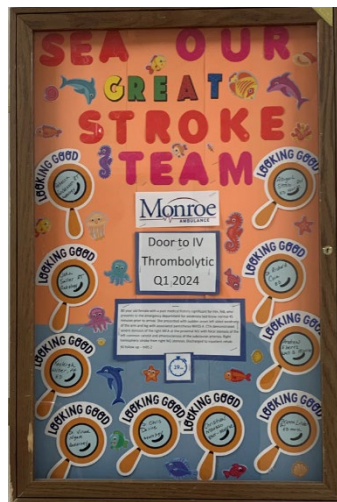
Melissa Rogers, CNL
Kathryn Batz, RN
Bryan Gargano, MD
Chris Torres, NP

Q3 2024 (23 minutes)

Eva Hungerford-Tausch RN
Gabriella Gavin RN
Bailey Oldham, RN
Patrick Martin MD
Jennifer Jackson PA

Q4 2024 (19 minutes)

Tatiana Abaya, RN
Amelia Corrigan, RN
Benjamin Kasper, MD
Matthew Daley, PA



Infection Prevention GOAT Award

The Infection Prevention Greatest of All Time (GOAT) award recognizes units or individuals that have contributed to prevention of infections and for their commitment to keeping our patients infection free. Below are the 2023 GOAT recipients

- February: Special Honor: SICU for a full year with zero infections (CAUTI, CLABSI, C. diff, MRSA bacteremia)
- March: MICU for excellent identification, utilization, and adherence to isolation precautions
- April: Scott Sleeper for incredible IP Partnership and advocacy!
- May: ED for great Communicable Disease Identification and Isolation and flagging of EMS lines

The Honey Bee Award

Nursing recognizes that they cannot do what they do every day without the many support services around them. As a way to acknowledge individuals in support services who go above and beyond to meet the needs of our patients and staff, the Honey Bee Award was adopted at Rochester General!

The Honey Bee Award is awarded to an individual, not in nursing or the provider service line, who has a positive impact on our patients and teams. The nomination focuses on those who are caring and have a positive attitude, are responsive and timely to patients' needs, do an excellent job at communicating with the healthcare team, and go above and beyond to support the patients and teams. Nominations for this award are collected quarterly, and winners receive a bee pin, flowers, certificate, a jar of RGH honey, and get to sign the Honey Bee Banner.

The DAISY Committee was instrumental launching the award and this award will continue to be led by operations with the support of our CNO and the nursing leadership as a way to help recognize those who support nursing every single day and who make a difference for our patients and their families.

Congratulations to our 2024 Recipients!

First Quarter 2024: **Jean Sanders**, Security & **Lucy Cruppi**, Patient Access Associate

Second Quarter 2024: **Tyler Mitchell**, Security, **Francis Walker**, CICU Secretary, & **Cara Lizotte**, Specimen Management Technician

Third Quarter 2024: **Evelyn Diaz**, Patient Care Technician Senior, **Luda Kravchuk**, Patient Care Technician, **Bora Zuzi**, EVS Assistant, & **Lauren Donnelly**, IntraAortic Pump Tech

Fourth Quarter 2024: **Carmen Jimenez**, Patient Care Technician, **Lily Farrand**, Patient Care Technician, & **Jamerson Brown**, Patient Care Technician





Rochester General Hospital Proudly Honors Our Nurses with the DAISY Award

The DAISY (Diseases Attacking the Immune System) Award is an international recognition program that honors and celebrates the skillful, compassionate care nurses provide every day. The DAISY Foundation was established by the family of J. Patrick Barnes after he died from complications of the auto-immune disease ITP in 1999. During his hospitalization, they deeply appreciated the care and compassion shown to Patrick and his entire family. Patrick's family felt compelled to say "thank you" for the compassion and skill nurses bring to patients and families every day. The DAISY Award for Extraordinary Nurses celebrates nurses in more than 2,400 healthcare facilities around the world.

2024 First Quarter DAISY Winners



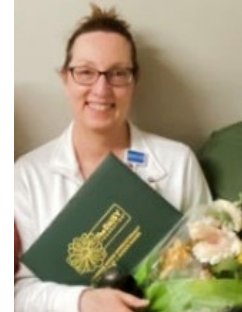
**Doug Giroux, RN
CTICU**



**Maria Mounnarat, RN
6800**



**Britta Hansen, RN
7800**



**Kathy Truesdale, RN
5800**

2024 First Quarter DAISY Leader Winners



**Sarah Kiley, NM
NICU/Sands 300**



**Nicole Messcher, NM
MSU**

2024 Second Quarter DAISY Winners



**Jason Kowalski, LPN
Adult ED**



**Erica Altman, RN
7800**



**Kyra Mills, RN
SICU**

2024 Second Quarter DAISY Leader Winner



**Jennifer Adjei, NM
4400**

2024 Third Quarter DAISY Winners



**Kaitlin Hobbs, RN
PACU**



**Kerry Lefebvre, RN
SICU**



**Ny-Ja McEwen, RN
OR**

2024 Fourth Quarter DAISY Winners



Amy Perdue, RN
Sands 600



Justin House, RN
Adult ED



Bill Roberts, RN
Adult ED

2024 Fourth Quarter DAISY Leader Winners



Takara Gray, ANM
7800



Jennifer Zarpentine, DON
Clinical Operations



Katrina Lorenzetti, RN Program Manager
OR

Congratulations to our 2024 DAISY Winners!



2024 DAISY Nominees

Celina Abowu
Megan Adams
Ebenezor Addo
Ira Adlaon
Lisa Aggas
Yusnavys Alfonso Flores
Brienne Alston
Erica Altman
Ali Alyasiri
Emaan Arif
Kyllynn Arthur
Samantha Ashley
Jennifer Baker
Mary Line Balthazar
Dayna Basic ✿
Smriti Bhetuwal ✿
Joe Blair
Liz Borelli
Alyssa Bowersox ✿
Delaney Brehm
Josh Bridge
Sarah Bronk
Joy Budinger
Jonathan Bui
Kevin Bui ✿
Kail Burfield
Natalie Burgeson
Kelley Burris
Dan Butakov
Johanna Campbell
Anie Carestia ✿
Jazeray Carter
Barbara Case
Grace Casleberry
Ciara Cassidy
Natalie Christensen
Leo Clayton
Shelby Congdon ✿
Abby Cooley ✿
Gabby Cortez
Melanie Cotton ✿
Tiffani Crewe
Kalani Dancoe
Alan DeCarlo
Jen Delmadoros

Thomas Devries
Jess DiBiase
Olivia Dickerson ✿
Katie Dickson
Carolian Doane
Claudette Drew
Gabriella Drummond ✿
Jas Elliot
Paulna Etienne
Xiomara Figueroa
Sherby Fleuisma
Jenna Flynn
Carleton Fox
Katie Fox
Lauren Fraiser
Sandra Gerstner
Weghata Ghebregabiher
Anita Giordano
Heather Giordano
Douglas Giroux
Sarah Goltzman
Yelena Gorchakov ✿
Ellen Gordon
Ayana Gordon
Tressa Goshorn
Cammie Hamelin
Britta Hansen
Takeyah Harper
Evan Harrison
Stephanie Hasenauer
Shaneka Heard
Saudia Heron
Marissa Hess
Kaitlin Hobbs
Carin Hodgson
Maddison Holmes
Sarah Hooker
Justin House ✿
Eva Hungerford
Heidi Hutchins
Bridget Hyland
Sarah Johnson
Takeyah Jones-Harper
Emily Jurus
Brendan Keegan

Audrey Kelly
Christa Kendall
Zahida Kotoric ✿
Jason Kowalski ✿
Susan Kribbs ✿
Evan Krohl ✿
Liza Lamberton
Madison Lamendola ✿
Melissa Larock
Kerry Lefebvre
Morgan Levy
Brenna Linder
Becky Lindsay
Stephanie Llerena
Adam Lock
Colleen Logue
Keith Long
Hannah MacLaughlin
Lisa Malavez
Heather Malley
Shelley Malley
Megan Mann ✿
Korinna Mantesta
Caroline Martin
Mike Martinez
Juliana Masic
Keysha Matos
Leah Matou
Allison May ✿
Shelby Mayes
Ny-Ja McEwen
Cassandra McFadden
Susan McGuirk
Kristen McMullen
Donna Meyers
Patricia Millen ✿
Amanda Miller ✿
Kyra Mills
Jessica Morales
Maria Mounnarat
Savanah Murray ✿
Caroline Nelson
Nigosi Ngozi
Susan Nguyen

Keith Nieckarz
Karen O'Brien
Patricia Olson
Kailyn O'Neal
Amy Perdue
Drew Piazza
Kayla Piedmonte
Alyssa Pignato 🌸
Donna Pina
Angela Quick-Coleman
Melisa Ramirez
Jenna Reagan
Jennifer Reese
Erin Rinas
Carlos Rivera
Bill Roberts
Laura Rogers

Nicole Rossetti 🌸
Ryan Ruscio
Olivia Russo
Kathy Schindler
Diana Schirck
Torrey Schmidt 🌸
Matthew Schumann
Amanda Seils
Marissa Shepard
Keisha Sinopoli
Mae Siphakongviseth
Myra Smith
Joanne Smith
Lauren Snyder 🌸
Debra Stith
Diana Strassman
Amanda Sullivan 🌸

Katie Swider
Heidi Thaine
Natalia Tlustochowicz
Louise Toepper
Linda Toth
Kathy Truesdale
Alyssa Umbrino
Susan Vanderstynne
Jeanette Vereecke
Kim Vessa 🌸
Caitlyn Vignari
Isabel Walordy
Lisa Williams
Katie Williams
Caitlyn Windus
Rebecca Wohlfert
Gina Zampatori

🌸 Multiple Nominations

RN Certification List

Certification is a voluntary designation earned by individuals who demonstrate a level of competency, skill, and knowledge in their field. It gives a nurse professional recognition as it proves that they have met stringent professional requirements and demonstrates professional competency in a specialty. Congratulations to the following whose credentials and commitment to excellence are recognized, trusted, and appreciated!

Aileen Olson	Brittney Marble	Grant Seaman	Julia Held
Alaina Bartl	Brooke Swinton	Gretchen Salber-Grenier	Kailey Colway
Alaina Haller	Cait Traut	Gurmit Kaur	Kaitlin Hobbs
Alexandra Vadas	Caitlyn Windus	Gwendolyn Williams	Kaitlyn Fahmer
Alicia Affronti DiGuardi	Cameron St. Clair	Hannah Bennett	Karen Angulo
Alicia Ryan	Carolian Doane	Heather Belcher	Karen O'Brien
Allison May	Carrie Rauen	Heather Giordano	Kate Higgins
Alyson Bernhagen	Cathleen Fox	Heather Malley	Katelynn Sheridan
Alyssa Bowersox	Chance Nadritch	Heather Salamone	Katherine Smith
Alyssa Tao	Ching-Ying Chiang	Helena Szczepanik	Kathleen Bell
Amanda Anderson	Christina Gray	Irina Campbell	Kathleen Collins
Amanda Gilardi	Christine Bucklin	Jacob DeGuire	Kathleen Giardino
Amanda Kelley	Christine Westcott	Jacob Volker	Kathryn Bantle
Amanda Kessler	Christopher Bocchino	Jamie Kircher	Kathy Giruzzi
Amanda Nabinger	Claire Gardner	Jammie Vatalaro	Katie Barrett
Amanda Seils	Constance Ealy	Janelle Guarrera	Kelly Finn
Amanda Sullivan	Dalia Henson	Janet Rojek	Kelly Sampognaro
Amber Schwartz	Daniel Osimowicz	Jarvis McGrath	Kelly Volker
Amy Cappellino	Danielle Greenlaw	Jeanette Vereecke	Kelsey Hawkins-Rusch
Amy Corrigan	Danielle Russell	Jeanne Moran	Kerrie Bell
Amy Cristales	Danielle Vito	Jenna Hanley	Keshia Givens
Amy Reed	Dawnn Walters	Jenna Lehrer	Kim Mcfarland
Amy Scarsella	Deborah Lawson	Jennifer Delmadoros	Kimberly LaRock
Andrea Pane	Deborah Williams	Jennifer Gates	Kimberly Stevenson
Andrew Cooke	Diedra Sutton	Jennifer Hillier	Kimberly Wood
Andrew Maslyn	Douglas Giroux	Jennifer Krehling	Krista Chinnici
Andrew Piazza	Elizabeth Arena	Jennifer Montes	Kristen Fallon
Angela Byrnes	Elizabeth Chase	Jennifer Padilla	Kristen McMullen
Anh Tran	Ellen Lewis	Jennifer Palermo	Kristin Santillo
Anie Carestia	Emily Brown	Jessica Brown	Kristin Wright
Anna Fillion	Emily Eberhard	Jessica Ford	Larissa Bodine
Anna Tarnashinsky	Emily Gruendike	Jessica Rykowski	Laura Rogers
Anne Cannon	Emma Menning	Jessica Vergara	Lauren Frasier
Ashley Walsh	Eric Perrin	Jill Stockwell	Lauren Grip
Audrey Kelly	Erica Dispenza	Jillian Pica	Lauren McKnight
Becky Lindsay	Erica Quist	Joan Beauchamp	Lauren Nicolosi
Bethany Hudnell	Evan Harrison	Johnny Zhang	Lauren Smith
Bethany Scantlin	Ezra Bliss	Jonathan Bui	Lauren Spicer
Betsy Hernandez	FNU Geetika	Joseph Colway	Layna Sinack
Breighanne Christensen	Gillian Kingsley	Joseph Ilardo	Leo Clayton
Brittany Robison	Grace Vander Molen	Judith Ross	Linda Blahy

Linda Toth	Mauriana VanPutte	Nicole Dalberth	Sarah Bronk
Lindsay Guercio	Megan Adams	Nicole Hancock	Sarah Buscaglia
Lisa Aggas	Megan Cavo	Nicole Ilardo	Sarah Guglielmo
Lisa Marino	Megan Malloy	Nicole Marianetti	Sarah Miller
Lisa Williams	Meghan Nicholson	Nicole Park	Sarah Priore
Liza Lamberton	Melina Leone	Niki DuPont	Sarah Wolf
Lori Dambaugh	Melissa Lynch	Nina Boutakov	Shannon Finucane
Luba Melnik	Melissa Mc Cormick	Nora Gramlich	Shannon Flye
Lyndsey Allison	Melissa Stewart	Nora Welch	Sharon Hughes
Lynn Evans	Merelyn Aragon	Paula Ebert	Sharon Tucker
Madeline Hutchins	Michael Fox	Paula Sedita	Stacy Keech
Madison Gottstein	Michele Kearney	Paulo Silva Pestana	Stephanie Dodd
Magdalena Roberts	Michele Lock	Peter Kolts	Stephanie James
Margaret Lewis	Michele Wells	Phoebe Sheehan	Susan Chiapperini
Maria Frenza	Michelle Draper	Rachel Carey	Susan Stell
Marina Brace	Michelle Trenkler	Rachel Weilert	Suzanne Maynard
Marisa Arrowood	Michelle Wang	Rachelle Alexandre	Tammy Nguyen
Marisa Sweet	Mindy Campanaro	Rachelle Barbis	Taylor Condidorio
Marisol Luis	Molly Chambery	Rebecca Ferguson	Terri Viavattene
Marissa Corato	Molly Maguire	Renee Walton	Victoria Cenzi
Mary Gravino	Morgan Levy	Robyn Galanti	Wegahta Ghebregabiher
Maureen Hunter	Natalie Christensen	Ruth Kasian	Yisel Ruiz
Maureen Kenny	Nicholas Grant	Samantha Strub	Zahida Kotoric

Certifications in WorkDay as of December 31, 2024



Clinical Ladder Advancements

Nurses participate on the Rochester Regional Health Clinical Ladder to further their career and contribute to the wellbeing of their patients and the success of the entire organization. The framework provides a clear, achievable career path for clinical professionals, which supports professional growth, encourages opportunity and boosts retention. Advancement level opportunities are titled RN II, RN III and RN IV and the required activities are structured around the three pillars of Leadership, Quality and Organizational contribution.

- The *Leadership Pillar* includes activities of performance involving professionalism, education and clinical expertise.
- The *Quality Pillar* includes activities involving nursing research, clinical safety initiatives, and evidenced based practice and performance improvement outcomes.
- The *Organizational Contribution Pillar* includes activities and initiatives intended to improve customer service outcomes and the patient and family experience.

Congratulations to the following individuals who successfully advanced on the Clinical Ladder in 2024!

Abby Richardson , RN IV	Hannah Vinci, RN IV	Marissa Pecora, RN II
Alex Barabas, RN II	Heather Giordano , RN IV	Melina Leone, RN IV
Alissa Pignato, RN IV	Jessica Brown, RN III	Michelle Lock RN IV
Alyssa Damiano, RN IV	Jon Bui, RN III	Michelle Trenkler, RN IV
Andrew Cooke, RN IV	Justin House, RN II	Natalie Vu-Sivay, RN IV
Anna Tarnashinsky, RN IV	Kaitlin Hobbs, RN IV	Olivia Keefe, RN IV
Attira Moore, RN III	Kalpana Rai, RN II	Patricia Velier , RN III
Breighanne Christensen, RN III	Karen O'Brien, RN IV	Phuong Ann Tran, RN IV
Breighanne Christensen, RN IV	Katelyn Fullone, RN IV	Rachel Carey, RN III
Brenna Linder, RN IV	Kayla Piedmonte, RN IV	Robin Rapone, RN III
Brooke Gisel, RN IV	Kimberly LaRock, RN IV	Samantha Strub, RN IV
Caitlin Traut, RN IV	Krystal Lange, RN III	Sarah Hooker, RN III
Caroline Martin, RN IV	Lauren Savine, RN III	Sarah Wolf, RN IV
Carrie Rauen, RN III	Lauren Zaino, RN III	Shelly Delace, RN IV
Christel Wight , RN IV	Leo Clayton , RN IV	Sonia Guzman, RN III
Cimmaron Norton, RN IV	Lindsay Santucci, RN II	Stephanie Holtz, RN III
Danielle Hussar-Barron, RN IV	Lindsey Allison, RN IV	Stephanie McAfee, RN III
Donna Hill, RN III	Louise Toepper, RN III	Torrey Schmidt, RN IV
Emily Brown , RN IV	Lynda Rossi, RN III	Tressa Goshorn, RN III
Emily Pike , RN IV	Maddie Worden, RN IV	Victoria Soley, RN IV
Gabrielle Wangler, RN III	Madeline Hutchins, RN IV	Vira Zadoyannaya, RN III
Hailey Enright , RN III	Madison Lamendola, RN III	
Hannah Bennett, RN IV	Maria Mounnarat, RN III	



NPPC Clothing Drive

The Nursing Professional Practice Council (NPPC) sponsored a successful clothing drive that allowed the team to re-stock Steven's Closet in the ED. Steven's Closet was starting in order to supply patients without weather appropriate clothing (soiled/damaged) upon discharge. The drive also was able to provide Post-Partum with some -new/like new- nursing shirts and bras that they were extremely thankful for!



Paramedic/ICU Nurse

Lyndsey Allison not only serves our patients within the walls of our hospital yet out on the field as a paramedic. During one of her paramedic shifts, she had a patient that was experiencing cardiac issues. He coded several times in the field, requiring CPR each time. Each time he had return of circulation he was able to speak with her. The patient was transported to RGH ED, taken quickly to the Cardiac Cath Lab and placed on ECMO. He is was then transferred to the MICU where Lindsey is a Registered Nurse. This is one standout example of how Lyndsey's commitment in both roles exemplifies the heart of healthcare, bridging gaps and enhancing the well-being of everyone they encounter. Way to go Lyndsey!

NPPC Member Medical Mission



This past summer, Tangerine Hall, CTICU RN, had the amazing opportunity to conduct their second medical mission trip with Nurses with Purpose (NWP) with this adventure occurring in the mountains of Coban, Guatemala aiding the predominantly Q'eqchi' Mayan people of the area. Tangerine, along with 6 other nurses from across the USA representing NWP, worked in partnership with a local missionary group in Coban- Misioneros Sin Fronteras- as they strive to expand on their medical outreach in the area. During 4 mission service days we provided healthcare screenings; assessments- complete with vital signs, blood glucose checks, weights; wound care; basic first aid; an abundance of healthcare education and distributed essential care items and over-the-counter medications at different clinics and community centers servicing almost 400 men, women, and children.

They are thankful for the donations from some of their CTICU coworkers and RRH employees so they could provide these communities with personal care items such as feminine hygiene products to over-the-counter medications such as Lidocaine patches, multivitamins, allergy pills and powdered electrolyte supplements.

Tangerine believes that the opportunity to provide efficient treatment in an under-served community through a medical mission trip is paramount to anyone in Healthcare resetting their thinking when feelings of burnout creep in and redefine one's sole purpose of choosing this career path.



NPPC Children & Youth Hats, Mittens, & Scarves Drive

NPPC believes the heart of nursing is connecting with and serving our community in need. This holiday season our committee chose to collect brand new hats, mittens and scarves for Go Ministries Rochester. Go Ministries is located at 2238 Clifford Avenue and was established in 2016. They are committed to seeing a transformation in the lives of youth and families in Rochester. Their programs consist of a clothing center, food pantry, and youth group for youth and families in our city. We were able to donate an overflowing basketful of items to the center, helping many children and youth keep warm this winter!



PACU Halloween Costume Collection

The RGH Care Crew added costume donations to their list of fall fest activities for 2024. Another example of how the staff at RGH care for the community, fifty costumes ranging from infant to adult sizes were donated by employees from various departments. Speedy's dry cleaners generously offered to dry clean every costume free of charge. The costumes were displayed on a rack at the 2024 fall fest. Two team members from the RGH PACU volunteered to sit at the costume booth and assist individuals from the community in choosing costumes and accessories. The costume rack was also available for both team members and community members to peruse any last minute costume needs in the afternoons and evenings leading up to Halloween. In total, 40 costumes were given out to both community members and employees.

Cath Lab Sock Hop!



The Nurses' Sock Hop Fundraiser was a smashing success! Thanks to the incredible support of RGH community, the event brought back the charm of the 1950s with root beer floats, rock 'n' roll hits, and plenty of dancing. Organized by our very own Susan Stell RN, the afternoon was filled with laughter, sweet treats, and exciting raffles—all to benefit Stephen's Closet. Together, we collected 604 pairs of socks and made a difference while having a blast. Thank you to everyone who joined us and helped make the event unforgettable!

4400 Participates in the AHA Walk!

Jaquae Stevens, Amanda Sullivan, Leticia Williams, Kiesha Sinopoli, and Jen Adjei from 4400 proudly participated in the SCHI department's table at the American Heart Association (AHA) Race to promote cardiovascular health and wellness. As part of our commitment to advancing heart health awareness, we provided complimentary blood pressure screenings to attendees, offering a valuable service to the community. Our table also featured interactive games and prizes, creating an engaging and educational experience.

This initiative underscores our dedication to educating individuals about the importance of maintaining healthy blood pressure levels to reduce the risk of heart disease and stroke. By directly engaging with race participants and attendees, we aimed to empower them with practical strategies to improve cardiovascular health, including adopting lifestyle modifications and prioritizing regular checkups.

Our team was honored to support this event and contribute to fostering a healthier community, one step at a time. Together, we strive to make a positive impact and promote heart-healthy living for all.



“Maturity is the capacity to endure uncertainty.”

—John Huston Finley



Each day in medicine we balance two realities. On one hand, we practice excellence and precision – engaging our competent skills that heal. On the other hand, we witness uncertainty, grief, and the ever-changing human condition. Nurses live out these realities on every shift, exercising their clinical expertise with compassion while also walking with patients, families and even colleagues who face difficult diagnoses and an unknown future. Holding both precision and uncertainty is not easy, and we pause to remember those nurses who have died in the past year. They faced the uncertainty that we all must eventually face, holding in their hearts the understanding, guidance and tender care they offered to so many throughout their careers. We are grateful for their service and for the service of all nurses, past and present, who have balanced precision and uncertainty with a compassionate heart.

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REGIONAL HEALTH

Rochester General Hospital