2017 Nursing Annual Report

“Never forget, that each day as the sun rises, hope soars”
Welcome to the 2017 Nursing Annual Report.

St. Vincent’s nurses touched thousands of lives across all of our practice settings this year. While the clinical competencies may have varied depending on the population served, the characteristics which distinguish St. Vincent’s nurses are exactly the same across the board. Compassionate, caring, responsive and sensitive to those in need are the hallmarks of our team. As you review the successes highlighted in this report, take a moment to reflect on your own contributions to our team, our patients and their families. In this time of never ending challenges in healthcare, our nurses joined hands with our multidisciplinary partners to keep safe, high-quality care as a top priority.

Thank you for your commitment to pursuing our Magnet re-designation. This journey provided the opportunity to face challenges with courage, creativity and an unwavering commitment to providing exceptional care to our patients and our community. Congratulations to everyone who achieved their professional certification, completed a degree or simply took a step toward enhancing their own professional growth. Your personal investment in life-long learning is appreciated and we are so grateful for your many contributions.

Nurses are often described as the “heart” of an organization. St. Vincent’s heart is alive and well and I am honored to serve as your leader.

In gratitude,

Dale Danowski, MBA, BSN, RN
Senior VP, Chief Nursing Officer
“Unity is strength...when there is teamwork and collaboration, wonderful things can be achieved.”

— Mattie Stepanek
Medical Mission at Home

CARING FOR OUR NEIGHBORS

Thanks to more than 400 volunteers, St. Vincent’s third annual Medical Mission at Home was another inspiring success.

This year’s Medical Mission was held on Sunday, November 4, at Cesar Batalla School in Bridgeport, where nearly 400 people were given access to free medical care, foot washing and podiatry services, nutrition, physical therapy, smoking cessation, spiritual care, behavioral health and social services, mammograms, vaccinations and flu shots, reader eyeglasses, haircuts, and more.

‘Truly I tell you, whatever you did for one of the least of these brothers and sisters of mine, you did for me.’

Matthew 25:34-40

Watch the inspiring 2017 Medical Mission at Home [here](http://example.com)
“Leadership requires the courage to make decisions that will benefit the next generation.”

— Alan Autry
A Triple Blessing

The girls, Riley and Micah, were born first and second and weighed in at 4 lbs 18 oz. Third to make his appearance was baby brother Hudson weighing 5 lbs 8 oz. All three babies were an impressive 18” tall.

According to the Centers for Disease Control (CDC), only 4,123 sets of triples were born in 2017. That works out to 5 in 100,000 live births. In March of 2017, The Family Birthing Center (FBC) staff at St. Vincent’s Medical Center was blessed with the opportunity to deliver these three beautiful babies. The two girls and one boy were only the second set of triplets born at St. Vincent’s in the past decade.

It takes a village to prepare for the delivery of triplets. Each baby needs to have their own delivery team – as well as the staff to help with the care of the mother. There was an air of excitement as each baby was welcomed into the world, then assessed upon delivery by their assigned team. The babies were then weighed and able to interact, faces to faces, with their family right away. After a brief stay, all three babies went home to their two-and-a-half-year-old brother, who was also born at St. Vincent’s. The family of six have even found time to return to St. Vincent’s for visits on occasion, much to the delight of the FBC staff – and everyone else they encounter.

Multiple Choice

“For the birth of our triplets, it was important to us to have access to the best trained NICU staff available. We chose St. Vincent’s. It’s the best of both worlds – the latest technology within a more intimate and personal setting. I can’t imagine starting life together anywhere else.” - Mom

*Triplets Micah, Hudson and Riley make their debut with NICU nurses (L to R) Susan Bousa, RN; Margaret Faustine, RN; and Krystie Williams, RN.*
Thirty percent of mothers in our local community report having to reuse a dirty diaper at some point due to lack of money. Government assistance does not currently pay for diapers.

While attending the national Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN) convention in June 2016, Nurse Manager Melissa Melendez, BSN, RNC-MNN, participated in a session about diaper need. It was there that Melissa brought the plight of many families in our Bridgeport community to the attention of the National Diaper Bank and Huggies.

Based on the attention that Melissa brought forward, the two organizations teamed up to arrange for a donation of 10,000 diapers to St. Vincent’s in July 2017. This was all part of Huggies national “No Baby Unhugged” program to ensure babies get the hugs they need to help them thrive.

The diapers that were received from the National Diaper Bank and Huggies were housed at St. Vincent’s Family Health Center and made available to families in need.

Because of her participation, Melissa was asked to be featured in a video addressing diaper need. This video was presented to hundreds of nurses across the country at the June 2017 AWHONN convention.
Rolling for Ralph

AND THE AMERICAN LUNG ASSOCIATION

By Denise Buonocore, APN-C, ACNP-BC, CHFN, CCRN, Department of Cardiology

The year after Ralph died from lung cancer was the first year I rode. For me it has turned into a now 7-year quest to help the American Lung Association (ALA) fight and find a cure for all types of lung disease.

It started as a way to honor my friend Ralph MacDonald who was diagnosed with lung cancer. The Autumn Escape Bike Trek (AEBT) is a 3-day fundraising bike ride for the American Lung Association (ALA), now in its 33rd year. The ride, a total of 160 miles, starts on day one from Plymouth, Massachusetts, and rides onto Cape Cod — crossing the Cape Cod Canal down to Falmouth — and ends the day in Sandwich, Massachusetts. After staying overnight in a camp, day two starts in Sandwich and travels up the Cape through the town of Dennis, onto the Cape Cod Bike trail to Chatham, and then overnight in another camp in the town of Brewster. The last day of the trek takes us through the rolling hills of Wellfleet and Truro on our way to the finish line in Provincetown.

The size of our team has varied over the years, but in the last several years three St. Vincent’s nurses and support staff have joined us, including Suzanne DiMenna, BSN, RN, RN-BC, Cindy Cervini, MSN, RN, CNL, and Mary Matera. Most of the team members have joined to ride in honor of those they know with lung disease. Together, the St. Vincent’s participants have raised over $15,000 for the ALA. In addition to Ralph, I now ride for friends, family members, and neighbors who have either been affected or died from lung disease. We ride rain or shine and the trek has truly both changed and challenged me. Our team rides throughout the spring and summer to train and to help get us into shape for the ride.

It is a great sense of accomplishment when we cross that finish line in Provincetown. But the biggest accomplishment of all is knowing that, in some small way, we are helping to make a difference in the lives of people with debilitating lung disease who are challenged daily just to breathe. This is why we roll.
Journey to Magnet Redesignation

EXCITEMENT, REFLECTION, AND HARD WORK

The Magnet re-designation journey was not a stranger to the phenomenon of change. With organizational change driving uncertainties, the idea of teamwork and rallying staff would appear to be a challenging activity.

The journey to Magnet re-designation has been a journey of excitement, anxiety, reflection and hard work. Ideally, we all know and understand that the work we do should be recognized, but nurses are an inherently modest bunch who prefer just to get on with a vocation that started over a century ago. We have come a long way since the Lady with the Lamp, but our understanding of health and awareness is the same.

The Magnet Champion committee pondered how to motivate the nursing staff in a time of dynamic change and uncertainty. A music video was created, where nurses in all departments had the opportunity to show off their Elvis moves. The executive team even participated and the team spirit began to grow. The next thing we talked about was having a Magnet kick-off. Our fearless and sleep-deprived leader Linda Plecity, and Nurse Educator, Kim Adler, started the kick-off day at 4 am for the night shift and continued throughout the day and evening shifts. Games helped to entice people to answer quiz questions about our Exemplary Professional Practice and Nursing Leadership. Everyone was rewarded with candy, snacks, and food. We also had raffle prizes and a good day was had by all. Negativity was turning into acceptance. Acceptance was turning into motivation. Motivation was turning into believing that we deserve the highest recognition for nursing excellence.

The mock survey was coming quickly and the three of us were a bundle of nerves. We were chosen as escorts for the mock appraisers. Brian helped to ease some nerves by imitating Helen’s Scottish accent (sounding nothing like Sean Connery, but more like Harry Potter). We watched Kellie study the itinerary over and over again, hoping that somehow it would be eaten by an alien, and periodically lifting her head up to say, “Where are we going next?”

It was part of our job; as Magnet Champions, it was our responsibility to make sure that the staff understood the task at hand: To demonstrate why we should be considered a place of nursing excellence. The turtle was coming out of it’s shell. Slowly but surely, staff members were feeling empowered. Escorting the mock survey appraisers was a daunting task for us, but we were rewarded with new, wonderful friendships.
The Heart of St. Vincent’s

CARDIOLOGY SERVICES YEAR IN REVIEW
By Nicole Simpson, MSN/MHA, RN, Nurse Manager, Level 6 Cardiology; Susan Skoog, BSN, RN, Nurse Manager, ICU/PCU/CU; Jessica Russell, MSN, NP-C, CCRN, Department of Cardiovascular Surgery; and Tina Strazza, MSN, RN, Nurse Manager Outpatient Cardiology

Cardiology at St. Vincent’s touches many areas of the hospital — as it continues to stay on the cutting edge of best practice care for the cardiac medical, surgical, and procedural patients.

In Outpatient Cardiology, the team in the Electrophysiology (EP) Lab has begun offering the CardioMems and the MICRA device procedure. CardioMems is performed by inserting a tiny sensor into the pulmonary artery (PA), which allows congestive heart failure patients to be monitored for changes in intracardiac pressures. The sensor detects slight changes in PA pressure, prior to the patient feeling symptomatic, alerting their provider and giving them the opportunity to adjust medication up or down without a hospital stay. The MICRA device is a new leadless single chamber pacemaker. The small device remains in the wall of the heart pacing the right ventricle without leads or a battery pack inserted under the skin.

The Cardiac Cath Lab has also been busy with the growth of three specialty areas. The entire team has advanced to provide expert care in coronary interventions, structural heart interventions and peripheral interventions. The Cath Lab Team, in concert with ICU, rolled out a new procedure using the EKOS™ System. This procedure is used to treat intermediate risk pulmonary embolisms that lodge in the large arteries of the heart. The procedure is targeted at patients who have failed traditional medical therapy and have compromise to their heart muscle. In addition, the Cath Lab team together with the ED team have also established St. Vincent’s as a receiving hospital for patients transferring from nearby Griffin Hospital needing emergency coronary interventions. We are 100% compliant with the current American College of Cardiology (ACC) benchmark of 90 minutes from ED door to an open coronary artery. This rapid restoration of circulation to the heart muscle greatly improves mortality rates or these high-risk patients. This is only accomplished by a highly collaborative effort between EMS, the ED and Interventional Cardiology.
The Heart of St. Vincent’s (Continued)

In the Structural Heart arena we added three new procedures. TMVR (Transcatheter Mitral Valve Repair-MitraClip) is a procedure done for mitral regurgitation, when the valve is not strong enough to control the flow of blood through the heart and allows it to back up. The clips are placed on the leaflets of the valve to help it function and control blood flow through the heart. This significantly reduces mitral insufficiency, heart failure symptoms and improves quality of life. We also added the LAAC (Left Atrial Appendage Closure) or Watchman procedure that closes the left atrial appendage in the heart to prevent clot formation and stroke in patients with non-valvular atrial fibrillation. This is an alternative to long-term anticoagulation for patients who meet the criteria for this procedure. Additionally, we added the PVL (Peri-Valvular Leak) repair procedure. This procedure helps reduce leakage of surgically replaced aortic and mitral valves. The leak is plugged to reduce the incidence of heart failure & decrease the risk of infectious endocarditis. We are currently the only hospital in Connecticut that offers all five of these structural heart procedures and performs them all in the Cardiac Cath Lab.

Cardiology Awards for 2017

- AHA Silver Award for care coordination with EMS and meeting best practice standards
- ACC/Action Platinum Award for the second year in a row, for the care of STEMI and NSTEMI patients
- Recertification from American Association of Cardiovascular and Pulmonary Rehabilitation (AACVPR) for our Cardiac Rehab Program
- AHA’s highest designation Gold Plus Award for care of patients with CHF
- AHA Bronze award for NSTEMI care of patients that meets current evidence based practice guidelines
- Echocardiography certified by Intersocietal Commission on Accreditation for Echo (ICAEL)
- Cardiology has completed the ACC Navigator Program for HF & AMI care

“Coming together is the beginning. Keeping together is progress. Working together is success.”

— Henry Ford
A little over a year ago, my family faced the unthinkable, when we lost our father suddenly. Our dad was admitted in septic shock. He was skillfully cared for in our ED and then the ICU.

As an employee, I was comforted having the expert and loving care for my dad by those with whom I have worked alongside for years. The staff kept us well informed and answered our questions every step of the way. It soon became clear that my dad was not going to survive. Despite all of the efforts to save him, the infection was just too overwhelming.

As we were faced with letting him go, we were devastated. Less than 24 hours after arrival — my dad had slipped away. Our nurse, Donna Iaffaldano, BSN, RN, Cath Lab, gave us a small gift that touched our hearts greatly. She had printed rhythm strips of my dad’s heartbeat and preserved them in blood tubes so we could each have a tangible reminder of my father. This small act of kindness went such a long way for my mom, my sister, our children, and me. When we feel especially low, we have this special gift to hold onto and remember our loved one.

This is such a beautiful example of going above and beyond, and using creativity to impact the experiences of the families cared for at St. Vincent’s. Taking the time to prepare and give such a precious gift truly touched our hearts!
Wound Care

HEALING IN ACTION
By Jennifer Gengo, MSN, RN, CWOCN, Manager, Wound Care Centers

Wound Care at St. Vincent’s started as one nurse educator sharing her wound and product knowledge with nursing staff and physicians. By 2017, we had evolved into a small army of wound care advocates who treat the whole patient, not just the hole in our patients.

The wound care centers treat an average census of 180 patients per week. The nursing staff are dedicated to their patients and the interdisciplinary process that helps us achieve exemplary results. We exist to provide a service, hope, and small miracles to our patients every day. One such example is our patient R.H. who presented in 2017 at the Stratford Wound Care Center with lymphedema wounds to his lower extremities. R.H. was embarrassed to go out in public due to his wounds. After several weeks of wound care, which included physician debridement, customized interdisciplinary approach to topical management, and the help of his case manager’s community outreach to the lymphedema therapy clinic, R.H. was healed. He is no longer embarrassed and returns to the clinic periodically for check-ups.

Second, we have learned that sometimes it takes a real team to provide exceptional wound care. T.S. was a patient that was touched by both of our Wound Care Centers. He was referred to our Trumbull, Connecticut, location for multiple bilateral lower extremity wounds. Because the wounds were on his feet and ankles, it was decided that one of our podiatry wound clinics would best serve his needs. He was then referred to a vascular surgeon on our team to maximize the circulation to his legs. Despite intervention, he still had some areas where the disease was present. The clinical team members thought out-of-the-box with the goal to preserve his limbs. We performed a test to see if hyperbaric oxygen (HBO) therapy would be an option for him, and it was. Because the HBO beds in our Trumbull location were full at the time, we were able to accommodate him at our Stratford, Connecticut, location. The clinicians from both offices communicated each week and got him through his wound care and HBO treatments.

We strive to inspire our patients, and to earn their trust and commitment to their healing team. In 2017 we had a very special elderly patient who had met our inpatient team while hospitalized for a traumatic injury during a visit to see family in Connecticut. After her return to upstate New York, she chose to fly back and forth weekly for visits at the Trumbull Wound Care Center because she was so confident in her team.

We are proud to say that both of our Wound Care Centers are the recipients of Healogics Center of Excellence Awards for 2017 for achieving our key performance indicator goals.
I was hired for my very first nursing job straight out of college. I began my nursing career at St. Vincent’s Behavioral Health Westport Campus in early 2017 on North II, the Child/Adolescent unit.

Out of the four different and unique units, I instantly felt at home on the child and adolescent unit. I felt as if I could make a difference with the young patient population. I was also welcomed with open arms by the staff on the unit. Our team of nurses and mental health workers became the first wave of brand new nursing staff on North II. We were then blessed with an exceptional nurse manager to lead our team.

The strength of our team was put to the test with a challenging mix of very acute patients in September of 2017. As a new nurse, fresh out of nursing school, it was extremely challenging but I never felt alone. As a team, we all supported each other — even if it meant coming to work early or staying late. I appreciated all the supportive gestures, ranging from treats from co-workers to hugs and after-hours phone calls after a rough shift to see how I was doing.

Eventually, the dust settled and the acuity of the unit decreased. This was mostly due to the exemplary work by our amazing team and the leadership of our new nurse manager. We were all committed to providing the best possible care to our very unique patients. The addition of a group of more experienced nurses and mental health workers further strengthened our team of caregivers.

As nurses, we depend on support from each other during high acuity times on the patient care unit. It is very important — especially with the challenges we encounter while performing our jobs each day, that we support and encourage each other so we can continue to deliver the best possible care.
One year ago, the Ascension AIM4Excellence team presented departmental leaders with various tools and resources to support the identification of inefficiencies and to provide a streamlined, organized approach to finding solutions and “quick wins.”

The primary objective of this communication tool is to assist in leading daily huddles. Nursing, along with additional members of care teams, are afforded an up-to-date visual to assist in driving critical results in the right direction by continuously:

- Communicating the “critical few goals” that are most important in their areas;
- Revealing current performance toward each critical goal;
- Engaging the subject matter experts (clinical staff) to identify the solution and close gaps between current and expected performance (goal); and
- Providing rewards and recognition of staff achievements.

Deborah Gilbey, MSN, RN, RNBC, CRRN, Nurse Manager for 10 East Inpatient Rehab, appreciates her staff’s use of the board. She says: “With all change, there is a little resistance at first. However, the 10 East team is committed to utilizing the Daily Management Board. The staff tracks our quality metrics daily to provide the best quality care for their rehab patients. Our staff takes pride in the outcomes they have achieved with this new initiative. They look forward to seeing their future results.”
Nursing Core Values

TRUST
The environment at St. Vincent’s promises that everyone will receive the highest level of safe, compassionate, physical, emotional and spiritual care. We trust that we work in a safe and healthy environment where we are supported and encouraged to care for ourselves and each other.

CARING
St. Vincent’s is committed to building a healthcare system where patients get the right care and the best care every time. We are inspired to see our roles beyond tasks and technology to the true heart of nursing…caring. Caring behaviors are evident in the way we care for our patients and families, ourselves, and our colleagues.

SPIRITUALITY
At St. Vincent’s, spirituality is incorporated into everything we do. We recognize that a person’s spirituality and beliefs are very personal. Honoring that individuality allows us to maintain a culture of caring by always respecting the dignity and diversity of each person. We take pride in listening and responding to the needs of each individual.

SAFETY
Our commitment to a culture of safety stems from the teamwork and leadership of all disciplines. Practices are evidence-based and patient-centered. We are patient advocates in assuring patient safety. Continual emphasis on safety and high quality care is recognized and rewarded.

COLLABORATION
We are committed to cultivating an environment that fosters open communication, collaboration and teamwork. We play a pivotal role in best serving our patients and families. Sharing knowledge, decision-making, innovations and feedback are all ways that, together, we produce exceptional outcomes in a dynamic and challenging environment.

KNOWLEDGE
We believe in creating an environment that promotes professional growth and development, supports the mission and vision and ensures high quality and safe care and outcomes. St. Vincent’s invests financially in continuing education and tuition assistance, and supports national certification so that nurses may experience personal and professional satisfaction as well as career advancement. Helping our patients feel empowered and make informed decisions about their care and treatment requires expertise and knowledge. We use our knowledge to empower others and drive change.

SCIENCE
Through the application of science, which is best described as advancing nursing practice through the use of assessment, problem solving, knowledge, experience, research and the integration of evidence into practice, our outcomes have continually improved. Nursing research is supported and conducted through our Nursing Shared Governance Councils.

INNOVATION
Creativity through courageous innovation is a core value at St. Vincent’s Medical Center. We are challenged every day to develop innovative ideas that will result in improved efficiency, safety, quality, service and professional practice. Innovation is accomplished by inspired and visionary nurses who are committed to excellence and to moving the organization forward to meet the challenges of an ever-changing healthcare environment.

Innovation
Spirituality
Safety
Collaboration

NURSING ANNUAL REPORT
Values Recognition Awards
LIVING THE VALUES OF ST. VINCENT’S

The following recipients were honored in 2017 for living the values of St. Vincent’s in a unique way:

- Mini Ajay, RN, Level 10
- Sheryl Hollyday, APRN, Palliative Care
- Donne Kelly, RN, Short Stay
- Donna Iaffaldano, BSN, RN, ICU
- Anne Marie Carlson, BSN, RN, CCRN, Emergency Department
- Jodi Palmieri, BSN, RN, IBCLC, Family Birthing Center
- Boguslawa “B” Peterson, RN, MSG
- Katherine Porpora, RN, St. Vincent’s Special Needs
- Ariana Rick, BSN, RN, Westport Behavioral Health
- Lisa Sanzo, BSN, RN, MSG
- Cathy Morrison, BSN, RN, Case Management
- Mary Sotolongo, BSN, RN, Case Management

Daisy Award Recipients

Congratulations to St. Vincent’s 2017 Daisy Award recipients who go above and beyond the traditional role of nursing:

- Hope Brewer
  January 2017

- Jennifer Nash
  May 2017

- Donna Kelly
  August 2017

- Suzanne Tortora
  October 2017
Nurses Week

National Nurses Week featured many activities, including the hospital’s annual awards and recognition reception, a daily blessing of the hands service, food trucks, a complimentary night shift coffee bar, and other treats. Associates and visitors alike also enjoyed a special slide show tribute to nurses in the Medical Center Main Lobby.

The annual recognition ceremony paid tribute to nursing staff for their achievements over the past year. The week was capped off with a beautiful video highlighting photos of nurses from each area set to music created by the Marketing Department at St. Vincent’s.
2017 Nursing Excellence Awards

**Research:** For driving excellent patient outcomes
Ashley Dobuzinsky, MSN, RN, CCRN

**Volunteerism and Service:** For those who continue to serve when not at work by volunteering in the community or serving the poor and vulnerable
Lindsay Slaybaugh, MSN, RN

**Education and Mentorship:** For serving as a role model and mentor to a nurse orientee by fostering the development of the orientee, being a strong educator, and tailoring the orientation process to the individual needs of the orientee.
Sharmin Kleiber, BSN, RN

**Nursing Practice:** For exceptional patient care and promotion of evidence-based nursing practice.
Betsy Hlavac, RN

**The Susan L. Davis Leadership Award:** Named for our former President and CEO, Susan L. Davis, a registered nurse and visionary leader who led St. Vincent’s through vast cultural change. This award is for staff nurses who demonstrate leadership qualities and are agents for organizational change.
Lori Broadbent, MSN, RN, CNL

**Greater Bridgeport Medical Association Recognition Award:** For the nurse who demonstrates a special sensitivity to patients and a strong commitment to the Bridgeport community.
Nicole Torony Ferraz, RN

**CT Post Fairfield County Top Nurses in 2017**
Patrick Murray, RN
Presentations

Poster Presentations


Emma Wittstein, DNP, RN RN-BC, OCN: Institute for Healthcare Improvements, March 2017

Presented at Conferences

Denise Buonocore
MSN, RN, ACNPC, CCNS, CCRN, CHFN
Lessons Learned in instituting a Bundle Payment Program. Ascension Cardiovascular Meeting. Atlanta, GA, February 2017

AACN Leadership Academy-Invited keynote, Leadership: Where do you start? Quinnipiac University, Hamden, CT, October 2017

Lynn Orser
MSN, RN, CCRN, PCCN, RN-BC
Preceptorship and Learning Styles, New England Region WOCN Annual Fall Conference, Nashua, NH, October 2017

Minimally Invasive Cardiac Procedures TAVR and Beyond, Merrimack Valley Chapter of the American Association of Critical Care Nurses Fall Conference, Westford, MA, November 2017

Sheryl Hollyday, APRN
Diagnosing Death: How APRN’s Can Assist Patients and Families American Association of Critical Care Nursing, National Teaching Institute, Houston, Texas, May 2017

Quinnipiac University, Hamden, CT, October 2017
Publications


Recognition

Marit Planton, BSN, RN: won 2nd place at the 13th Annual Science Symposium at SVMC for her oral presentation of Reducing Heart Failure Readmissions by Standardizing Heart Failure Education and Documentation (March 2017).

Judy Taylor, RN: ('86 Nursing) won Distinguished Alumni of the Year Award from St. Vincent’s College (March 2017).

Marilyn Faber, BSN, RN, CHTP, HN-BC, was presented with the 2017 President’s Award to Connecticut Faith Community Nurses by The Connecticut Nurses Association (October 2017).

Marilyn Faber, BSN, RN, CHTP, HN-BC, was also recognized as a 2017 Healthcare Hero by the Connecticut Hospital Association (June 2017).

Ellen Miller, BSN, RN: wrote a grant that was accepted and helped to provide clean water to Santa Maria de Jesus, a small town in Guatemala.

Lynn Orser, MSN, RN, CCRN, PCCN, RN-BC is a member of the American Association of Critical Care Nurses CCRN Exam development committee.
Degrees & Certifications

**BSN**
- Suzana Alvarez
- Adam Agyemang
- Brenda Chamale
- Patsy Eightmy
- Claudia Franco
- Deborah Gilbey
- Susan Gonvalves
- Linda Grantham
- Anne Howland
- Lisa Jelliffe
- Megan Kelly
- Heather Keogh
- Grace Kombe-Fondo
- Christina Lage
- Richard Miller
- Stacey-Ann Morgan
- Claudette Novella
- Stacey Piotrowski
- Carrie Pippert-Thompson
- Aneta Rafalo
- Kamil Raniewicz
- Christianne Reed
- Beata Robledo
- Christina Rowe
- Jessica Russell
- Susie Villalta-Smith

**MSN**
- Kim Adler
- Carmichael John
- Lorianne Meus
- Suzanne Tortora

**DOCTORATE**
- Ludy Cometa
- Jennifer Gilbert
- Erin Hallinan
- Emma Wittstein

**CERTIFICATIONS**

**Family Nurse Practitioner by AANP (NP-C)**
- Jessica Russell

**Family Nurse Practitioner by ANCC (FNP-BC)**
- Carmichael John

**Nursing Professional Development by ANCC (RN-BC)**
- Lynn Orser

**Gerontological Nurse By ANCC (RN-BC)**
- Rita Santacroce
- Jesusa Tolo

**Critical Care Registered Nurse by ANCC (CCRN)**
- Lynn Orser
- Matthew Libid
- Mary Ellen Lang
- Loretta Murphy

**Certified Rehabilitation Registered Nurse by RNCB (CRRN)**
- Deborah Gilbey

**Inpatient Obstetric Nursing by NCC (RNC-OB)**
- Debra Shanley

**Electric Fetal Monitoring by NCC (C-FEM)**
- Debra Shanley

**Clinical Nurse Leader by CNC (CNL)**
- Lorianne Meus

**Certified Nurse Operating Room by CCI (CNOR)**
- Kim Adler
- Mary Gene Fanzutti

**Certified Nurse Educator by ANCC (CNE)**
- Shannon Pranger

**Medical-Surgical Registered Nurse by ANCC (RN-BC)**
- Susan Gonvalves

**Bariatric Certification by ASMBS (CBN)**
- Susan Rodman

**Certified Medical Surgical Nurse (CMSRN)**
- Christianne Reed

**LOP**
- Rochelle Gibson, EP Lab, Level 2
- Yvonne Lewis, Float, Level 2
- Christina Jankowski, ED, Level 2
- Donna Iaffaldano, Cath Lab, Level 2
- Diane Rubenstein, ED, Level 2
Behavioral Health 30-day readmission rate: Based on great discharge planning and care coordination in the Child/Adolescent units of Westport is well below the 1.0 goal.

Cardio Thoracic infection rate has maintained a downward trend over the past year. This measure examines the infections in patients who have open heart surgery.
We began to monitor catheter-associated urinary Tract (CAUTI) infections in 2014. This graph represents our performance in 2017. The CAUTI rate = number of infections per 1,000 foley days.

We began to monitor patients on all clinical units for evidence of central line bloodstream infections (CLABSI) in 2014. This graph represents the data from 2017.
During 2017 there was a comprehensive education program presented on preventing patient falls. The data shows our improvement of a decrease in patient falls.

We have worked very hard over the past year to increase our compliance with hand washing. This graph depicts our hand hygiene compliance over the past year (2017).

During 2017 there was a comprehensive education program presented on preventing patient falls. The data shows our improvement of a decrease in patient falls.
Our MRSA infection rates have been monitored for the past five years.

This graph is representative of the monthly MRSA infections for 2017.

We have had a drop in the pressure ulcer rate in 2017.

American Heart Association (AHA) guidelines state that hospitals treating STEMI patients should reliably achieve a door-to-balloon time (D2B) of 90 minutes or less.

This graph represents our 100% compliance in reaching the goal of 90 minutes.
Mission in Motion

PROFESSIONAL CAMARADERIE ON THE MOVE

The David H. Lobdell, M.D. Clinical and Anatomic Pathology Laboratory, Unit Practice Council (UPC), was looking for a way to create professional camaraderie and to show their appreciation to other Medical Center departments.

A member of the UPC suggested that they create a peddler’s cart, which would be filled with a theme-inspired bounty of goodies for the chosen recipient of the cart. But first, the Laboratory UPC had to find a cart! Thank goodness for the internet. The Laboratory’s “diamond in the rough” was discovered on a consignment website. After a good scrubbing, an addition of a few shelves and a couple of coats of new paint, it was ready to go. Everyone in the Laboratory contributed towards upgrading the cart, as well as the treats for the cart. The goody-laden cart was wheeled into the unsuspecting Emergency Department and presented to a very surprised group!

After the cart’s maiden voyage, the department that received the cart would, in turn, select the next department the cart would travel to and so on, and so on. Since the Lab presented the cart to the Emergency Department in September of 2017, it has traveled to the ICU, Respiratory Department and Environmental Services. The cart will stay at each location for about 4-6 weeks.

A member of the Laboratory UPC had written “a poetic prose” that was read when the cart was first presented. This prose has been read each time the cart has been gifted to the next recipient.
St. Vincent’s Angel Cart

TO HONOR YOUNG LIVES LOST

In the tragic event that an infant or young child passes at the Medical Center, the ED Unit Practice Council (UPC) created an Angel Cart to help honor the lost life and help bring comfort to family members.

Ann Gorton and Anne Marie Carlson, BSN, RN, are the ED UPC co-chairs. Anne Marie explained that the Angel Cart helps to show the parents and family that the staff recognizes their pain.

The cart can also help bring comfort to staff in their role as caregivers as they often feel there is nothing they can do. This allows them to do something to assuage some of the intense pain of the situation.

In addition to the cart, the ED staff knitted baby caps and the Purchasing Department created the beautiful blankets. Because the clothes are impounded in an infant death for investigation, the caps and blankets are put on the baby and then given to the parents as a keepsake, holding the smell and impressions of the baby wearing them. The caps and blankets are placed into decorated boxes with the butterfly motif.

The cart contains the caps, blankets and boxes, along with angel pins, Forget-Me-Not seeds to plant and a Forget-Me-Not prayer. Also, ribbons are provided to tie a lock of the baby’s hair, and pink and blue inkpads to finger and footprint the baby as a remembrance. There are “Moses” baskets to hold the baby while the family says goodbye.

“They may forget your name, but they will never forget how you made them feel.”
— Maya Angelou
Clean Water

A MISSION IN SANTA MARIA DE JESUS

By Ellen Miller, BSN, RN, RN-BC

For the people of Santa Maria de Jesus, Guatemala, families are only allowed to get water for 30 minutes every other day.

I have been going on medical missions for the past 16 years with Helping Hands Medical Missions (HHMM). During a course of a mission in Santa Maria de Jesus, many of the children and adults who visit the clinic are diagnosed with parasites; a direct result of drinking contaminated water. Left untreated, parasitic infections lead to malnutrition and a compromised immune system. We have been treating parasitic infections with medication; however, this is only a short-term solution. Many of the parasites return when the medication is finished due to re-consumption of the contaminated water. There is a limited supply of clean water in the village due to insufficient and damaged infrastructure of their water containment and delivery system. Many of the people in the village, especially the children, have become very ill, and in some cases die, due to the consumption of dirty water. Clean water is a necessity of life; it is something we may take for granted, but for the people of Santa Maria, it is a daily struggle.

The current situation is that they only have one uncovered water storage tank collecting water from one of the three natural springs. Because the tank is uncovered, the water becomes contaminated by vegetation and wildlife that happen to fall into the tank. Each spring needs a covered tank to collect the water and maintain sanitary conditions.

Recently, I applied for and received “The Partnership in Ministry Grant Award” from Ascension Health to build a water capture system in Santa Maria, Guatemala. This award program recognizes social, parish and healthcare ministries that collaborate in delivering projects or services that benefit others and align with our mission.

Once the grant was awarded, I was not only able to obtain three sealed water containment systems, I also replaced the piping system that brought the water from the spring to the water containment tanks. These new pipes will allow them to pump water from the springs to the new tanks in a more efficient manner. This new water capture system is providing access to clean water for 25,000 Mayans. By improving the water access, it will increase their overall health, decrease parasitic infection, decrease malnutrition and improve the Mayan’s compromised immune system. I will be monitoring improvement by measuring the incidence of clinic visits and medication usage related to parasitic infection.

“Water is life, clean water means health.”
— Audrey Hepburn
Nondiscrimination - Section 1557

DISCRIMINATION IS AGAINST THE LAW!

St. Vincent’s Medical Center complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. St. Vincent’s Medical Center does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

St. Vincent’s Medical Center provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters; and
- Written information in other formats (large print, audio, accessible electronic formats and other formats).

St. Vincent’s Medical Center provides free language services to people whose primary language is not English, such as:

- Qualified interpreters; and
- Information written in other languages.

If you need these services, contact Case Management at (475) 210-5608.

If you believe that St. Vincent's Medical Center has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with:

Section 1557 Coordinator, 2800 Main Street, Bridgeport, CT 06606
P (475) 210-6300, TTY (203) 576-6096, F (203) 581-6534, section1557coordinator@stvincents.org

You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, the Section 1557 Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:


St. Vincent’s Medical Center cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo.

St. Vincent’s Medical Center no excluye a las personas ni las trata de forma diferente debido a su origen étnico, color, nacionalidad, edad, discapacidad o sexo.

St. Vincent’s Medical Center proporciona asistencia y servicios gratuitos a las personas con discapacidades para que se comuniquen de manera eficaz con nosotros, como los siguientes:

- Intérpretes de lenguaje de señas capacitados.
- Información escrita en otros formatos (letra grande, audio, formatos electrónicos accesibles, otros formatos).

St. Vincent’s Medical Center proporciona servicios lingüísticos gratuitos a personas cuya lengua materna no es el inglés, como los siguientes:

- Intérpretes capacitados.
- Información escrita en otros idiomas.

Si necesita recibir estos servicios, comuníquese con Case Management at (475) 210-5608.

Si considera que St. Vincent's Medical Center no le proporcionó estos servicios o lo discriminó de otra manera por motivos de origen étnico, color, nacionalidad, edad, discapacidad o sexo, puede presentar un reclamo a la siguiente persona:

Section 1557 Coordinator, 2800 Main Street, Bridgeport, CT 06606
P (475) 210-6300, TTY (203) 576-6096, F (203) 581-6534, section1557coordinator@stvincents.org

Puede presentar el reclamo en persona o por correo postal, fax o correo electrónico. Si necesita ayuda para hacerlo, Section 1557 Coordinator está a su disposición para brindársela.

También puede presentar un reclamo de derechos civiles ante la Oficina para Derechos Civiles (Oficina de Derechos Civiles) del Department of Health and Human Services (Departamento de Salud y Servicios Humanos) de EE. UU. de manera electrónica a través de Office for Civil Rights Complaint Portal, disponible en https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, o bien, por correo postal a la siguiente dirección o por teléfono a los números que figuran a continuación:


ATTENTION:
Language Assistance Services Available

ENGLISH
ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-475-210-5608

ESPAÑOL / SPANISH
ATTENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-475-210-5608

POLSKI / POLISH
UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-475-210-5608

PORTUGUÊS / PORTUGUESE
ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-475-210-5608

ITALIANO / ITALIAN
ATTENZIONE: In caso la lingua parlata sia l’italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-475-210-5608

ESPAÑOL / SPANISH
ATTENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-475-210-5608

FRANÇAIS / FRENCH
ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-475-210-5608

GREEK
ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 1-475-210-5608

HINDI / हिंदी
यहाँ द्वारा आप हिंदी बोलते है तो आपके लिए मु त म भाषा सहायता सेवाएं उपल ्भ हैं। 1-475-210-5608

RUSSIAN / РУССКИЙ
ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-475-210-5608

ARABIC / ترجمة
للرضاية وخلال الإعلان، نحن نقدم خدمات الترجمة المجانية. لاتنسى الاتصال بنا على 1-475-210-5608

GREEK
ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 1-475-210-5608

TAGALOG / FILIPINO
PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-475-210-5608

VIETNAMESE / TIẾNG VIỆT
CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-475-210-5608

ALBANIAN / SHQIP
KUJDES: Nëse flitni shqip, për ju ka në dispozicion shërbime të asistencës gjihësore, pa pagesë. Telefononi në 1-475-210-5608

KOREAN / 한국어
주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-475-210-5608

The document is an annual report from the St. Vincent’s Medical Center, highlighting language assistance services available to patients. It lists the contact number for assistance in various languages: English, Spanish, Polish, Portuguese, Italian, French, Greek, Hindi, Russian, Arabic, Tagalog, Vietnamese, Albanian, and Korean. The report is designed to ensure that patients can receive assistance regardless of their language, ensuring that communication barriers are minimized. The contact number for assistance is 1-475-210-5608.
“Children are the hands by which we take hold of heaven.”

— Henry Ward Beecher