

AMAZING THINGS
HAPPEN HERE EVERY DAY

SETON NURSING 2010



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DEAR COLLEAGUES:

This year's annual report shares dozens of stories and insights from amazing Seton nurses.

As I reflect over the past year, I am reminded by how much Seton nurses continue to grow as professionals, leaders and caregivers.

As we look ahead to next year, I encourage you to review the new, groundbreaking report by the Institute of Medicine (IOM) called the "Initiative on the Future of Nursing: Leading Change and Advancing

Health." The report includes a series of recommendations, many of which, I am happy to report, Seton has already embraced. For example, we have already created an RN Residency Program and continue to develop new partnerships to encourage our nurses to pursue higher levels of education. Our hospitals have embraced technology and informatics like OptiLink to better match staffing with patient acuity. The list could go on.

One of the policy statements in the IOM report that resounded with me is, "Nurses must see policy as something they shape." I am so proud to be part of an organization where this is not just an aspiration, but also a reality. When I read the stories in this year's Nursing Annual Report, I am struck by how many nurses use words like "empowered," "valued" and "respected" to describe how they feel about their jobs.

As your system chief nursing officer, please know that I am committed to nurturing the amazing culture we have developed together here at the Seton Family. Thank you for your ongoing commitment and dedication to your work and for choosing to be a Seton nurse.

Joyce Batcheller, DNP, RN, NEA-BC, FAAN **Network Chief Nursing Officer**

Joyce Sotcheller

People & Places

Seton nurses have an unwavering commitment to excellence in patient care.

Working in a hospital is all about extremes. A miracle unfolds down the hall from a tragedu. A life is saved within minutes of a life lost. Nurses with the Seton Family of Hospitals are part of this amazing rollercoaster every day on the job. And they wouldn't have it any other way.

Who We Are

Skilled, competent, curious and compassionate are just a few words that come to mind when describing a typical Seton nurse. In reality, there is no "typical" Seton nurse. Coming from all walks of life, Seton nurses are as diverse as they are passionate.

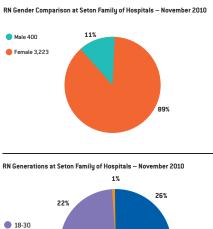
The Seton Family encourages and supports its nurses to seek certifications and advanced degrees, whether a bachelor's, master's or doctorate. Everyone - from bedside to boardroom - is encouraged to continue learning. Leading by example, Seton's Network Chief Nursing

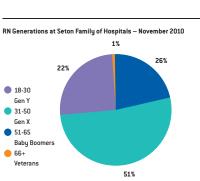
Officer Joyce Batcheller, DNP, RN, NEA-BC, FAAN, earned her Doctorate of Nursing Practice in 2010 from the Anita Thigpen Perry School of Nursing at Texas Tech University Health Sciences Center.

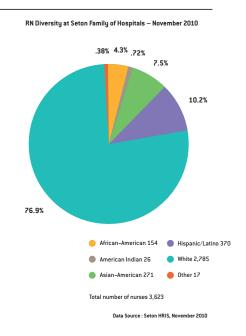
How We Practice

As a non-profit organization, the Seton Family is driven by its mission to provide the highest level of health care to everyone who comes through its doors. And Seton has a lot of doors. The network has been growing rapidly to meet the complex health care needs of the region. In 2010, Seton had 24 clinical locations in 11 counties.

As needs change, Seton nurses utilize innovative practices every day, adhering to professional standards and honoring the mission, vision







Mission

The mission of nursing at Seton is to employ innovative and transformational leadership within the network and the community to ensure the highest quality of patient care and optimal health outcomes for those we serve.

Vision

Seton nursing is a core strategy of the Seton Family's ministry to meet the complex health care needs of Central Texans, with a special concern for those traditionally not served or underserved.

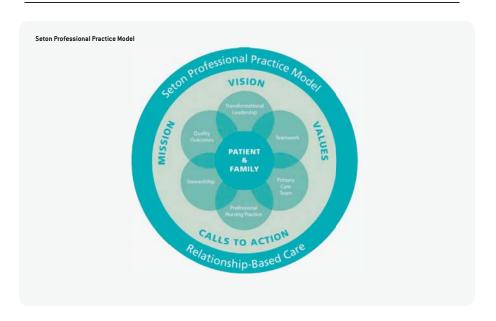
Philosophy

Seton nurses believe that nursing is an applied art and science. The focus of professional nursing practice is to provide excellence in holistic care (mind, body, spirit) to individuals, families and communities throughout the health care continuum.

Nursing care is given with honor and respect for the inherent worth and respect of each individual - regardless of resources, age, gender, disability, sexual orientation, national origin, race, religion or health condition.

In exchange for the trust society grants through licensure, Seton nurses take personal responsibility to maintain competency in practice through continuing education and assume responsibility and accountability for individual nursing judgments and actions.

"I feel honored to work at Seton and am committed to Seton's mission of helping people heal." - Theresa Lambert, RN, SSC



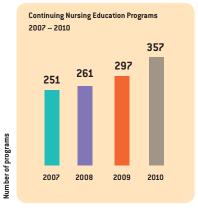
Shared Governance

Shared Governance lies at the heart of Seton nursing and is what makes Seton nurses among the most empowered professionals in the nation. Nursing Congress and Specialty Councils, which form the basis of shared governance, encourage bedside nurses to be directly involved in policies and decisions that affect their clinical practice. Nursing Congress meetings are open to all Seton nurses and are held the second Thursday of every month. For more information about how you can get involved in Nursing Congress, ask your clinical manager.

"A couple of years ago, I had the opportunity to become a rep for the Clinical Ladder Committee. After attending some meetings, I began to realize what shared governance was really about. For the first time in my nursing career, I had an alternative route to affecting the delivery of patient care. I had access to a forum that not only encouraged my input, but also gave it due consideration." — Karla McKinneu, RN, CMSRN, UMCB

Professional Development

Seton has created a number of programs to support the professional development of its nurses from newly minted graduates to seasoned veterans. All Seton nurses are encouraged to continue their education and seek certifications or advanced degrees. Tuition reimbursement is available and managers can offer flexible work schedules. Seton also offers hundreds of continuing education courses at convenient times and locations throughout the year. Three programs – RN Residency, Clinical Ladder and Seton Nurse Scholarship Endowment – should be of special interest for current or future Seton purses.



Data Source : Nursing Education CNE Database

Seton's RN Residency Program

Seton launched its RN Residency Program in September 2007 with an initial cohort of 65 residents, all fresh out of nursing school. Created to prepare recent nursing graduates for the rigors of the job and to reduce turnover among rookie nurses, the RN Residency Program has graduated more than 700 nurses and counting. Each year, three to four cohorts spend a total of 18 weeks in the program. Residents are matched with a mentor and preceptor and spend time twice a week in classroom learning at the Seton Clinical Education Center (CEC). They also spend three days a week on the floor of the hospital where they will work after their residency ends. Acceptance to the program is competitive. Of the 243 completed applications for the most recent cohort, only 60 were accepted.

Early reports indicate that the RN Residency Program has succeeded in meeting one of its goals: reducing turnover among new graduate nurses. What's more, RN Residency Program graduates, like Jamie Moran (see story below), credit the program with preparing them for the challenges of nursine.

Seton's RN Residency Program: Preparing the next generation of nurses

One of the first graduates of Seton's RN Residency Program at Seton Highland Lakes Hospital, Jamie Moran now works at the 25-bed hospital in Burnet County as an infection preventionist and occupational nurse.

The fact that Seton offered an RN Residency Program in the first place helped convince Jamie to choose Seton over some of the other hospitals that tried to recruit her out of nursing school. "I was looking for the protection of a residency," Jamie explained. "I didn't just want to be thrown out into full patient care on my own."

Jamie spent 18 weeks in the RN Residency Program, twice a week at the CEC for classroom learning and three times a week working the floor at Seton Highland Lakes Hospital. "Nurses at Seton are truly empowered to improve the quality of patient care," she said. "I wouldn't have known about Transforming Care at the Bedside, Nursing Congress or the many nursing leadership opportunities at Seton without this program."

A resident of Burnet County, Jamie loves working close to home in a rural setting. "I love rural health. I went to nursing school because I wanted to bring high-quality nursing care to older, rural adults."

Jamie already has set her sights on ways she can improve the quality of health care and will soon complete her master's degree from Texas Tech. Her colleagues at Seton Highland Lakes Hospital voted her Seton Highland Lakes Nurse of the Year in 2010.

Jamie continues to work with the residency program. "Jamie is wonderful," said Pam Castles, manager of Seton's RN Residency Program. "She was part of our second cohort and has given back to the residency program through her support as a mentor, preceptor and skills lab proctor."

Clinical Ladder

Clinical Ladder is one of the ways Seton encourages and rewards its nurses for growing professionally. Open to all Seton nurses who work in direct patient care, Clinical Ladder is a differentiated practice and performance program that offers nurses a financial incentive for becoming more balanced and involved health care professionals. Nurses have many different ways to demonstrate their performance and move up the clinical ladder. In addition to peer, manager and self-appraisals, nurses can earn clinical ladder points by earning certifications, participating in the governing process, conducting nursing research or getting involved in a community project. In an effort to keep more master's-prepared nurses at the bedside, Seton has rolled out the new Clinical Ladder V, the highest level available.

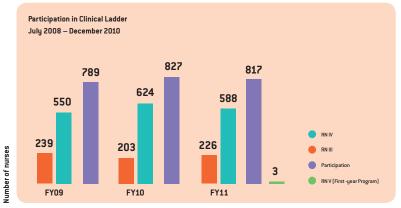
"I appreciate being respected as a professional through the Clinical Ladder. As a nurse for 39 years, this feels very special and new to me after many years feeling like a 'body' to fill a slot. Because everyone is respected, I feel our patients get the best care, delivered with compassion and kindness." — Maru MacLennan, RN, CCRN, SMCA

Seton Nurse Scholarship Endowment Program

Established in 2005, the Seton Nurse Scholarship Endowment provides funding to Seton associates who want to pursue or continue their nursing education. To date, 105 scholarships totaling \$185,000 have been awarded to individuals pursuing degrees ranging from associate to doctorate. This year's 20 scholarship recipients (listed in the back of this report) represent each of Seton's 10 hospitals and were selected from a competitive pool of 125 applicants and received a \$2,500 scholarship.

Thanks to generous donors, including community members, physicians, nurses and Seton associates who give through the annual "Seton Cares" employee campaign, the Seton Nurse Scholarship Endowment currently stands at \$4.3 million – just shy of its \$5 million goal.

One of the scholarship winners, Nancy Hermes, RN, works in the emergency department at Seton Edgar B. Davis Hospital in Luling. A single mom raising a child with cerebral palsy, Nancy has been on both the giving and receiving side of hursing care. One day, Nancy would like to become a clinical manager — and the \$2,500 scholarship will help make the dream of earning her BSN a reality.



Data Source : Nursing Systems Clinical Ladder Database



University Medical Center Brackenridge provides healing care and hope to worldrenowned stuntman

After falling from a 14-foot platform, stuntman Lee McConnell was airlifted from the "True Grit" movie set near Granger, Texas, to University Medical Center Brackenridge, landing in the

Emergency Department with a broken arm and a compound fracture of his left leg. Initially, the case appeared to be routine; however, it unexpectedly became complicated overnight when McConnell developed a soft tissue infection. Because of where he fell, the leg wound was exposed to a mixture of dirt and manure, which led to three major surgeries and a fiveweek stay at University Medical Center Brackenridge.

Karen Winsor, RN, CNS for Orthopedic Trauma at University Medical Center Brackenridge, was a member of McConnell's eighth-floor care team. "Part of my role as an advanced practice nurse is to visit patients every day to assess how they are responding to treatment post-surgery. I also look at the patient's whole psucho-social condition."

Karen recalls that Lee was always a pretty optimistic patient, very upbeat. But at a certain point, he really began to get scared. "Lee had to face the possibility of losing his leg and deal with the pain and fear that comes with the unknown," she said. "We all did our best to help him understand the healing process and provide opportunities for distractions and laughs."

McConnell and his wife, an ER nurse in Virginia, gave high marks for the care he received from the eighth-floor staff. In the words of McConnell himself, "My nurse Karen Winsor and her team took me under their wings and treated me like family."

Now recovering from the worst injury in his career, McConnell recently sent a letter to the team thanking them for "giving me that spark in the darkness to walk me though this rough patch of road." What better way to sum up what Seton nurses are all about.

Karen has been in collaborative practice for the past seven years with the orthopedic surgeons at Austin Skeletal Trauma Specialists. "I know I'm doing what I'm supposed to be doing." She credits University Medical Center Brackenridge for encouraging her to achieve her dream job. "Brackenridge provides opportunities. If you aren't scared to get outside your comfort zone and ask for them, you can do anything you want here"



Destination therapy taking Seton patients to great places

VAD Outreach Coordinator Erin August, RN, BSN, has had patients with advanced heart failure who hadn't been able to feel their toes in years — much less walk to their mail boxes. However, after receiving the HeartMate II, a left ventricle assist device [LWAD],

these patients were not only back on their feet, but also participating in events to raise funds for heart research and increase community awareness of heart disease.

For end-stage heart failure patients, transplantation has traditionally been the only option open to them. However, for many, the wait list for a donor heart is often too long — while age, additional health problems or other complications may render others ineligible. Fortunately, these patients have another option with the HeartMate II.

Approved by the FDA in January 2010 for destination therapy (permanent use), the LVAD attaches to the heart and is designed to assist or take over the pumping function of the patient's left ventricle. This technologically advanced device is quiet and compact, slightly larger than a D-cell battery, making it suitable for a smaller-framed patient. Surgery is less invasive as well, typically lasting a mere four to six hours from start to finish with a hospital stay of only 10-14 days.

Whether patients choose to live permanently with the HeartMate II or move forward with transplantation, they do not have to face such important decisions on their own. "We have a huge multi-disciplinary team that goes in to interview patients to see what would be in their best interest to give them a longer, better quality of life," Erin explained.

Seton is one of only 78 centers in North America certified for destination therapy, "We're also the only center in Austin implanting these types of devices," Erin said. "We currently have several patients on LVADs, ranging in age from the mid-30s to 80 years old."

One of these patients is Caldwell County resident, Ronald Breaux. An avid outdoorsman, the 57 year old was diagnosed with congestive heart failure 10 years ago and told that his only option for survival was a heart transplant. However, finding a donor match proved challenging and Ronald's health deteriorated as he waited. But what looked like a hopeless situation took a positive turn in March 2010, when Ronald received his HeartMate II at Seton Medical Center Austin. Just two weeks later, he was home walking around and enjoying life at his Hill Country ranch.

Quality & Safety

Seton nurses are setting the standard for quality and safety in Central Texas.

Going to the hospital — whether it be for routine outpatient surgery, a life-saving heart transplant or a round of chemotherapy — is often daunting for patients and their loved ones. Seton nurses never forget their responsibility to provide the highest level of care and the precious power they have to calm a patient's nerves or reassure a family member that everything will be fine.

Setting the Standard for Excellence

The Seton Family is the only health care network in Central Texas with Magnet" hospitals, the highest mark of nursing excellence. Developed by the American Nursing Credentialing Center (ANCC), the Magnet Recognition Program® honors health care organizations that provide the very best in nursing care.

In addition to Seton's four Magnet sites, five of its other hospitals are designated by ANCC as Pathway to Excellence® sites. Only a small percentage of U.S. hospitals have earned this national recognition, which is reserved for hospitals that meet rigorous standards and successfully demonstrate that they provide a positive practice environment where nurses can thrive.

"Seton Shoal Creek is one of only two free-standing psychiatric hospitals to earn Pathway to Excellence designation in the history of the American Nursing Credentialing Center. We are so proud of all our nurses have accomplished." – Susan Grice, RN, DNSc. NEA-BC. PMHCNS-BC. CNO. SSC

What does Magnet really mean to Seton nurses? Here's what some of our nurses had to say:

"To me, being a Magnet nurse means taking the art of nursing one step further — defining the role of the nurse, not as a health care assistant, but as informed provider whose focus is on educating the patient, family and fellow associates." — Trish Morrison, RN, SNW

"I have worked for other organizations that say they are trying for Magnet status. But after moving to Dell Children's, I have learned what a true Magnet hospital looks and feels like. It's a place where upper management listen to the concerns of staff nurses and make real changes based on nurse input. It's a place with constant opportunities for continuing education or higher education." – Jacqueline Rubinstein-Ayala, RN, Seton Premiere Staffing

"Magnet designation provides a degree of professional pride and commitment to excellence that I have not experienced at non-Magnet facilities.

The nursing teams strive to improve performance, using data to learn, and supporting and mentoring each other to excellence. As a result, patient outcomes are always improving and the patient experience is top notch." – Sandy Miller, RN, BSN, NE-BC, SMCA

"We are respected by the physicians we work with unlike any hospital I've ever worked in. They rely on us to be their eyes and ears, so when we call and tell them something is not right, they listen and they react. They recognize when we've caught something early and tell us how grateful they are.

They teach us along with the residents. Every day, we are presented with the opportunity to learn. We are a team — RTs, RNs, CAs, MDs. I don't think it gets any better than this." — Fran Sutton, RN, Dell Children's

"I am so happy that we achieved Magnet designation. I've always been proud of Seton, but with Magnet, we have total bragging rights. Not only can I tell friends and the public that we have a great hospital, but I can also tell them that they will receive the highest level of nursing care available. I think nurses are the true face of health care. The most beautiful words in our language are not, "I love you," but "I am a nurse and I am here to help you." "

— Marina McGebee. RN. SMCA

"Working for a Magnet hospital perpetuates excellence." - Laura Dillon, RN, UMCB

Relationships count at Seton Southwest Hospital

Professional athlete Andrea Fisher has been a patient at Seton Southwest on several occasions for emergency care and surgery for sports injuries. "They have always made me feel very welcome and taken amazing care of me," she said. "The support for my recovery has been just amazing."

About a year ago, Andrea was admitted for outpatient knee surgery. When the surgeons went in to make the repair, there was more work than anticipated. As a result, she went from being an outpatient to an inpatient, spending two days in the hospital.

"The staff was able to accommodate my needs, while making me feel like their most important patient, even though the hospital was full. During a very rough physical and mental time for me, they were there to make sure I was OK every step of the way."

Patient Safety

Seton continues to receive national attention for its quality and safety initiatives. In addition to achieving excellent outcomes in nurse-sensitive indicators such as pressure ulcers and perinatal safety, Seton nurses are making strides to reduce bloodstream infections and are setting the standard for excellence in venous access.

"The key to high reliability in health care lies in mutual accountability, flattening of the hierarchy and having a relentless questioning attitude. The great thing about the interdisciplinary simulation we do at Seton is that nurses, physicians and other members of the health care team get to see and experience the value of these behaviors firsthand. That is to say, we get to model them in a virtual environment that is safe, reflective and compelling. Seton nurses are among the nation's leaders in using simulation as a tool to attain high reliability." — Dr. Frank Mazza, Vice President, Chief Patient Safety Officer, Associate Chief Medical Officer



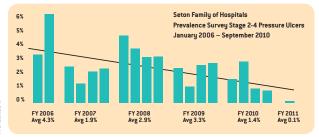
On the road to zero preventable pressure ulcers

"I felt like there was something we could do better." That's a phrase you often hear from Seton nurses and health care professionals like Mary Ellen Jackson, a respiratory therapist in the ICU at University Medical Center Brackenridge. She's been with

Seton since 1981, but started doing skin work in 2008. She couldn't help but notice how many of her patients suffered from redness, pressure ulcers and breakdown on the lips and cheeks due to endotracheal tubes and other airway devices.

"I wouldn't want that to happen to my parents – or anyone else's parents, so I discussed it with my colleague Jill Fry, RRT, and our day shift supervisor Anthony Rodriguez, BS, RRT," Mary Ellen recalled. "We decided to see if we could make some changes. Even if we were helping only a few people, we felt like it would be a good thing."

Working together with Jill, Anthony and Joel Veranno, RN, BSN, CWON, who directs the Wound Ostomy Continence Nursing program for the ICLI/
IMC at University Medical Center Brackenridge, the team created a new patient audit tool that combined skin and respiratory care. The team also developed different treatment modalities to prepare and protect the skin, assembled kits with all the necessary materials and posted educational signs throughout ICU. The goal was to develop best practices for both preventative care and interventional care steps in relation to airway device-related skin problems.



Data Source : Statit (Database maintained by Clinical Quality and Patient Safety, SFH)

The information gathered at the bedside audits was so promising that Mary Ellen and her team took the data to a network-level SKIN meeting. There, Mary Ellen was asked to chair a committee of respiratory therapists from all Seton hospitals and clinical sites to collaborate and share best practices.

Encouraged by her research, Mary Ellen made an appointment to visit Chris Russian, MEd, RRT-NPS, RPSGT, a well-published professor at Texas State University in San Marcos who serves as the director of Clinical Education for the Respiratory Therapy Program. Mary Ellen wanted to know if Dr. Russian thought there might be a publishing opportunity for her research. His reaction was better than expected. "He was very excited," Mary Ellen said. "He hadn't read anything about it before and agreed to help us." Mary Ellen and her team won a TEAM Excellence Award (which are presented to associates working in teams who make a significant contribution to patient care) for their efforts and are excited to be charting new territory in patient care.

Bloodstream Infections

The 7N oncology unit at Seton Medical Center Austin works tirelessly to prevent port-a-caths and Peripherally Inserted Central Catheter (PICC) line infections among their vulnerable patients. Following a literature search on current oncology practices and discussions with other facilities, the nurses developed a set of best-practice criteria focused on communication, education and a renewed culture of safety. Nursing staff were educated on the new guidelines for managing central venous catheters and other measures were taken to reduce the risk of infection in the patient's room. In the first six months after the project was launched, the unit has had zero bloodstream infections. From December 2008 to December 2009, there was a 70 percent decrease in the number of bloodstream infections for the unit.

Venous Access

Seton nurses are also leaders in safe, effective venous access. In 2010, Seton Medical Center Austin was one of only three sites nationwide selected by Baird Access Systems, a device company, to participate in a Beta Site clinical trial on the placement of PICCs using ECG technology. Three Seton nurses were asked to participate in the trial: Roberta Lynn Deutsch, RN, CRNI; lan Grey, RN; and Teresa Bull, RN, CRNI. Additionally, in September 2010, one member of the team, Roberta Lynn Deutsch, RN, CRNI, was selected to participate in a panel discussion about this new technology at the Association of Vascular Access meeting

To further enhance the care patients receive throughout Central Texas, Seton nurses Sheila Hale, RN, CRNI; Gwen Irwin, RN CRNI; and Roberta Lynn Deutsch, RN, CRNI; created the Central Texas Vascular Access Network, a multidisciplinary group with about 20 members. The goal of the network is to standardize care for central lines throughout Central Texas

I know you are good, but today you have to be better

Katherine Esteban, RN, will never forget the last day of her team leader training in the Seton Medical Center Austin Emergency Department. On that warm September day, EMS brought in a 47-year-old male in full



cardiac arrest. In addition to the patient's amazing outcome, what Katherine remembers most are the words spoken by his wife: "Go tell the nurses that I know they are good, but today they have to be better."

For 45 minutes, the patient went in and out of defibrillation and almost lost his life. During the code, he was shocked nearly 25 times. Given the patient's

condition, the ED physician, Dr. Carmen Julian, initiated a Code STEMI.

The patient was quickly transferred to the cath lab where a blockage in his right coronary artery was successfully opened up with a stent.

A week later, the patient went home to his family. But before he left, Katherine and Melody DeMaris, RN, the patient's primary nurse, took the time to visit with him and his grateful wife, who had actually performed CPR on him before help arrived. "He said we were his angels and promised to make some serious lifestyle changes so that he would not be back," Katherine recalled. "I believe anything is possible after seeing this."

Katherine has been with Seton since 2004 and feels lucky to work at a hospital that supports her professional growth. "This ER is phenomenal," Katherine said. "Our manager, Curtis, is really involved in keeping us educated and has encouraged us all to get our CEN (Certified Emergency Nurse). My preceptor, Darren Hodgson, RN, provided moral support and training I needed to be my best that amazing day." Katherine also appreciates the ED physicians she works with at Seton Medical Center Austin. "Our doctors communicate with the nurses very well and involve us in the care of the patient. They make us feel important and special."

RESEARCH & INNOVATION

Seton nurses don't just read about the latest research — they write it.

Seton nurses have both the tools and training to use research and evidence-based practice to improve clinical practice. They are encouraged to ask questions and challenge the status quo.

Research

Nursing research is growing by leaps and bounds at Seton. Even more opportunities are on the horizon as Seton rolls out its partnership with The University of Texas Southwestern Medical Center in Dallas, one of the nation's preeminent medical schools.

Nurses throughout the Seton Family are involved in nursing research at many levels. Some are publishing their work in national, peer-reviewed journals and presenting at prestigious regional, national and international conferences, while others are learning the ropes of research at workshops offered by Seton's Center for Nursing Research (CNR). In collaboration with the Magnet and education departments, the CNR offers quarterly classes to nursing associates with didactic and practical information regarding acquisition and appraisal of data-driven information, research methodology and human subjects protection.

Jennifer A. Downing, RN, MSN, a nurse at Seton Medical Center Austin, and Deb Castro, RN, BSN, with Seton Northwest Hospital, completed "A Qualitative Study of Phlebotomy Device Selection" in 2010. Jennifer served as the principal investigator of the study, which was the firstever to examine the decision process that staff employ when selecting phlebotomu devices, specifically the choice between butterfly or traditional vacutainer needle devices. Jennifer, a former participant in the collaborative Seton and University of Texas at Austin Nursing Research Fellowship, had a poster accepted at the Southern Nursing Research Society conference and was also invited to present her findings to peers at Seton's Nursing Symposium and the Central Texas Clinical Research Forum. She was joined by Kenn Kirksey, RN, PhD, ACNS-BC, director of Nursing Research; and Linda Yoder, RN, MBA, PhD, AOCN, FAAN, associate professor of Nursing and director of the Graduate Program in Nursing Administration and Healthcare Systems Management at UT-Austin School of Nursing, in conducting this study.

"I value being part of a system that listens to the professional nursing staff as we work together to improve patient care and outcomes. I feel encouraged to improve my practice through many opportunities to learn and engage in meaningful nursing research." – Jan Alexander, RN, MSN, CPN, Dell Children's



Early intervention improves odds for twin preemies

The NICU at Seton Medical Center Austin is no stranger to amazing things. Every day, the tiniest patients and their families receive the highest level of care. "Nursing staff plays a tremendous part of any success in the NICU," said Dr. John Loud, NICU medical director.

"The nurses in the NICU are the eyes, ears and hands at the bedside. As physicians, we rely on their expertise to notice changes. Nurses help evide our care and are really integral to everything we do."

Last year, Dr. Loyd and the NICU team cared for twins with bilateral congenital hearing loss, discovered during routine screening. The babies received cochlear implants when they were nine months old, a therapy new to the Austin area for neonates. "The implants should tremendously improve their quality of life," Dr. Loyd said. "By diagnosing the hearing loss early, the likelihood that these two children develop normal speech when they are older is vastly improved."

Evidence-based Practice

Seton nurses are using research to put evidence-based practice into action. In October 2010, Seton hosted its second Nursing Symposium. Attended by more than 150 participants, the full-day event featured speakers from around the nation.

"One of the things I love about Seton is that it is so focused on evidence-based practice. You are expected to ask questions, and there are librarians available to help you research the literature. You can take your idea up the ladder to make a change in clinical practice." – Jamie Moran, RN, BSN, SHL



Seton nurse implements evidence-based practice at Dell Children's

Sharon Demel, RNC-NIC, MSN, is a clinical nurse specialist in the NICU at Dell Children's Medical Center. Last year, she worked closely with neonatologist Dr. Mitch Imm to implement a Total Body Cooling program, which treats term infants with Hypoxic

Ischemic Encephalopathy (HIE). Characterized by brain injury due to a lack of blood flow HIE occurs in two out of 1,000 live births and can lead to developmental delays, disabilities and even death.

With Dr. Imm, Sharon developed a policy based on evidence-based practice from several research studies and information attained by attending conferences. They also established a treatment protocol, developed a physician order set and nursing documentation sheet, and educated bedside NICU nurses and RTs within the Seton Family. Sharon and Dr. Imm have also traveled to outlying communities to educate hospitals about the availability of this new service and what they need to do until the neonatal transport team arrives at their facility.

"I am very proud to say that Seton supports the concept of implementing evidence-based practice programs," Sharon said. "This initiative would not have been possible without the prompt purchase of equipment and recognition of training that was needed to make this a reality for our patients."

The new treatment, which must be initiated within six hours of birth and only to term infants who meet stringent criteria, has been offered at Dell Children's Medical Center since September 2009. A multi-disciplinary team of physicians and nurses cool the infant's body temperature to 33.5 degrees and then slowly re-warm in 72 hours. Several multi-center studies have shown that the treatment provides a level of neuroprotection and helps decrease the cascade of injury for these tiny patients. Total Body Cooling is now the standard of care to treat term infants with HIE.

Innovation

Clinical Education Center

Now in its third year, Seton's Clinical Education Center (CEC) continues to grow. Just last year, the CEC served as the formal training ground for 296 nursing students and 171 Seton RN Residents. At its core, the CEC is about inter-disciplinary team-based training using simulation and other immersive approaches to learning. The CEC is a place where nurses, respiratory therapists, physicians, residents, clinical assistants, pharmacists and social workers learn to interact as a team and provide patients with the best possible care.

Case events are among the tools used to improve patient care. The CEC has developed six case events, each involving a hypothetical patient and unique set of medical, social and economic challenges. Teams of health care professionals are assembled in a room, presented the case and tasked to work together to develop a care plan for the patient. An example of a case event is a male patient with lung cancer who refuses treatment because he needs to pay for his daughter's education. Not only do case events help members of the health care team to improve patient outcomes by working collaboratively, but they also teach members of the team to appreciate what each one brings to the table.

"As Seton's partnership with UT Southwestern continues to unfold, more medical residents will be training at Seton hospitals. Because nurses will be working closely with medical residents, the CEC is also conducting several simulations that pair nurses together with medical residents." – Buffy Allen, RN, MSN, Director of Interdisciplinary Clinical Skills Lab and Clinical Simulation

Transforming Care at the Bedside

Since 2003, Seton has actively participated in Transforming Care at the Bedside (TCAB), a national program of the Robert Wood Johnson Foundation and the Institute for Healthcare Improvement, Seton Northwest Hospital was one of only three original pilot sites in the nation. Through the years, dozens of nurse generated ideas to improve the delivery of patient care, and the daily work life of nurses has been tested and implemented across the Seton Familu.

In 2010, TCAB teams network-wide have been engaged in projects to improve bedside care. The sixth-floor TCAB team at Seton Medical Center Austin began inviting patients to its monthly meetings, while Seton Medical Center Hays launched a successful Journal Club and initiated projects in handoff communications and medication safety. Seton Shoal Creek Hospital used TCAB to streamline the admissions process. Seton Medical Center Williamson established an ER/ICU TCAB team - one of the first hospitals in the nation to do so.

Technologu and Informatics

The Seton Family continues to invest in new technology and informatics. At the bedside, nurses use electronic medical records (COMPASS) and personal digital assistants to improve patient care and safety. Information technology like OptiLink helps nurse managers make better staffing decisions based on patient volumes and acuity. Seton is one of the only hospitals in the entire country that has developed an acuity system for staffing for med-surg units.

"When I was asked to take students to Seton Medical Center Haus this past summer. I was very apprehensive because I knew they were completely computerized and I didn't know anything about COMPASS. When I got there, to my surprise I found the COMPASS sustem easy to maneuver. The best thing was I didn't have to search or wait for a chart. I could go to one computer and see what was going on with all my students and their patients. As far as the efficiency from an instructor's perspective, it left me so much more time to spend with my students." - Gwenn Scott, RN, MSN, FNP-BC, Austin Community College Professor and Part-time Nurse Practitioner, Seton Kozmetsky Community Health Center



Understanding the power of COMPASS to save lives

COMPASS, which stands for Care, Opportunity, Mission, Promise, Access. Safetu and Standardization. is Seton's electronic medical records sustem that is being rolled out in phases across the network. An increasing number of health

care professionals, including nurses, are witnessing the power of COMPASS to save time - and lives. Critical and acute care RN Joel Villasana is one of

One evening when he was working at Seton Medical Center Williamson, Joel had a patient admitted for abdominal pain with a suspicious CT scan. When he noticed some changes that led him to believe that the patient might be becoming septic, Villasana used Web Pager (the COMPASS Instant Messenger system) to reach the on-call physician. Because of this technology, he received orders almost immediately to start IV meds via COMPASS

Early intervention with the patient helped prevent a possible life-threatening condition that could have led to multiple organ failure and a longer hospital stay. "The advantage that COMPASS brings to research - quick response from physicians and intra-departmental communication - is really helpful,"

While recalling the care he was able to provide his patient that fateful evening. Joel added, "It was an epiphany for me about the value of COMPASS, an early sign of what it can do."

Seton nurses never lose sight of the fact that they are part of a health care ministry, not a business.

Spirit & Community

The Seton Family of Hospitals is a non-profit, faith-based organization driven buits mission, which is to care for and improve the health of those it serves with a special concern for the poor and the vulnerable

Caring for Each Other

Seton nurses are always there for each other and for their patients, but the job can sometimes take an emotional toll. Fortunately, the Seton Family offers several programs and services to help cope with stress job-related or personal. From tranquility rooms and the Seton Cove to the "Care for the Caregiver" program. Seton is committed to wellness and job satisfaction

Seton nurses also take great care to treat each other with respect and kindness. On the seventh floor at University Medical Center Brackenridge. for example, nurses with Seton Premiere Staffing (internal float pool) are greeted with a card that welcomes them to the unit and gives them essential contact and logistical information.



Providing quiet comfort when tragedy strikes

When Elsa Alejandro, RN, got the call that EMS was on its wau with a newborn "CPR in Progress," she was about to go off shift. By the time the tinu girl arrived at the Dell Children's Medical Center Emergency Department, she had already died; the umbilical cord

had wrapped around her neck during home delivery.

In terrible shock, the father was reluctant to hold the baby, but also didn't want to leave her alone when he left for University Medical Center Brackenridge to be with his wife, who was hemorrhaging from the delivery. So Elsa assured him that they would not leave her alone while

he was gone - and staued two hours past her shift to keep that promise. "I cleaned the baby up, put a cap on her and rocked her until the medical examiner arrived," she recalled.

A few days later, the baby's mom sent Elsa a card expressing her gratitude. Later that week, they spoke on the phone and cried together. "She told me that it gave her tremendous comfort knowing her baby was held."

A member of the Seton Family for three years, Elsa is a trauma nurse and performance improvement coordinator at Dell Children's. She received an Excellence in Action Award for her response that night, "I had a lot of people praising me for what I did," Elsa said. "But it was really something that I would want someone to do for mu child if I were in that position."

Caring for the Community

During Fiscal Year 2009, the Seton Family provided almost a quarter billion dollars in charity care to Central Texas, making it the region's largest community service organization. Seton also invested more than \$210 million on technology, infrastructure and construction of new facilities to better meet the area's growing health care needs. Seton serves approximately 86,000 public school students through its Children's/AISD Student Health Services Program, a unique collaboration with the Austin Independent School District, Mobile vans in outlying rural areas immunized nearly 700 children and made more than 3.600 visits. while nurses at Seton's four community health centers managed more than 31,000 outpatient medical visits.

Individual hospitals, units and nurses participated in charitable events throughout the year. At University Medical Center Brackenridge, for example, nurses collected 75 pairs of shoes in just five days for Haiti after the earthquake. Nurses from the sixth floor at Seton Medical Center Austin served lunch to the homeless at Caritas, while another group of University Medical Center Brackenridge nurses pooled their cash to send a staff member's son to summer camp while his parents were deployed

"I am proud that mu entire career has been working for non-profit agencies where patient needs are the top prioritu." - Katherine Pegues, RN, Dell Children's



Dell Children's sponsors sickle-cell fair

In September 2010, the Children's Blood and Cancer Center of Central Texas, a program of Dell Children's Medical Center, hosted a Sickle-Cell Family Wellness Fair at Dell Children's Healing Garden. The event was coordinated by Cindy Peña, MA, CCLS, a child life specialist who works with

children and their families to minimize the stress and anxiety of illness by providing education and support.

The fair, which was attended by more than 100 people, raised awareness about the programs and services available for local children diagnosed with sickle-cell disease, a hereditary blood disorder. Often diagnosed at birth, sickle-cell is predominantly, but not exclusively, found among African-Americans. Dell Children's Medical Center patients were invited to attend the event, which included face painting, a dunking booth, basketball clinics offered by the UT basketball team, karaoke and other entertainment and games.

Patty Adams, RN, an AISD school nurse for 13 years, organized a booth for Children's/AISD Student Health Services with fellow school nurse Marion Douglass, RN. Currently, the school nurse at Eastside Memorial Green Tech High School, Global Tech High School and International High School, Patty works with students with significant chronic diseases such as asthma, diabetes and sickle-cell anemia. "A lot of what I do is providing moral support to the students," Patty explained. In addition to helping students manage their health conditions, Patty works closely with parents. "Knowing that someone is here and knows what to do in an emergency gives parents the confidence to send their children to school," she said. "At any moment in time, sickle-cell disease can become life-threatening, just like diabetes."



Seton nurses provide a true family moment for ailing patient

Intermediate Care nurse Rosemary Ramirez, RN, gets emotional when she thinks about one of her unit's beloved patients, who recently passed away. "Over the years, we all became close with him and his family and took his passing to heart," Rosemary said. "He had a very close and loving relationship

with his sister and expressed regret at not being able to give her the kind of birthday he would have prior to his injury." Rosemary remembers how the nurses on the 6 West tried desperately to figure out what he used to do for his sister's birthday. After much prodding, he relented and told the nurses that he would always get her a huge birthday card signed by all of their family members and a cake. "He told us that it had been 20 years since he had given her that gift," Rosemary recalled.

What happened next speaks volumes about Seton nurses and the lengths they will go to support their patients. The unit swung into action and created a huge "Happy Birthday" banner peppered with well wishes from the entire staff. Next, the clinical assistant had the patient dictate a personal note for his sister. Once the note was typed, the patient, who was very frail at the time, placed an "x" for his signature. "After working a full shift, the night charge nurse went directly to the store and bought a birthday cake for the patient's sister," Rosemary recalled. "The staff surprised her with the cake and card — and everyone, including our ailing patient, sang happy birthday. The patient passed away two weeks later, but we were able to provide his family with a true family moment that will never be forgotten."

AMAZING THINGS HAPPEN HERE EVERY DAY

SETON NURSING 2010





Amazing people, amazing places, amazing things! What better way to describe the nurses with the Seton Family of Hospitals who do amazing things every day.

When you finish reading this year's Nursing Annual Report, you will know how simply amazing is the work accomplished by these outstanding women and men. On behalf of the Seton Board of Trustees and the Daughters of Charity, thank you. You are truly amazing!

- Sister Helen Brewer, DC, Chair, Seton Family of Hospitals Board of Directors

Each year, our nurses expand their horizons — whether it's participating in Continuing Education, making the commitment to pursue advanced academic degrees or receiving enhanced credentialing. Each time a nurse strengthens his or her skill set, the Seton Family of Hospitals grows stronger, safer and better positioned to carry out our mission. And in that spirit, I want to congratulate Joyce Batcheller, Seton's senior vice president of Nursing, for recently attaining her doctorate.

But the achievements of our nurses are by no means limited to academics. From our Magnet designation for four of our facilities, to our commitment to patient and associate safety, to compassionate care at the bedside, Seton nurses are an essential component in our delivery of care. They will become even more crucial as we continue to create a health care model that puts people, not providers, at the center of everything we do.

- Charles J. Barnett, President/CEO, Seton Family of Hospitals





Seton Southwest



▲
Seton Medical Center Austin



▲
Dell Children's Medical Center

Seton Edgar B. Davis





Dell Children's Medical Center



◆ University Medical Center Brackenridge



♦ Seton Medical Center Austin



◀ Seton Medical Center Hays

Seton Shoal Creek





Seton Highland Lakes



Seton Edgar B. Davis



◀ Dell Children's Medical Center

University Medical Center Brackenridge





Seton Northwest



Seton Medical Center Williamson



♦ Seton Medical Center Hays

Dear Seton Nursing Team:

As your leaders, we are exceedingly proud of the awards and recognitions you earn throughout the year. But we are equally proud of your everyday acts of courage and compassion. Please accept our deepest thanks for the amazing way you care for our patients and each other. Your commitment, creativity and critical thinking are what make Seton a true leader in patient care and clinical excellence.



Pictured here (from left): Leah May, RNC, MSN, CNO, UMCB; Susan Pastor, RN, ND, CNO, Dell Children's; Susan Crane, RN, MSN/MBA, NEA-BC, VP Neonatal Services; Susan Grice, RN, DNSc, CNS, NEA-BC, CNO, SSCS, Karen Litterer, RN, BSN, CIC, SON, SHL, Susan Ourston, RN, MSN, CDN, SSW, Nikki Rivers, RN, MBA, CNO, SMCH; Melanie Fox, RN, MSN, NEA-BC, CNO, SMCW. Not pictured: Michael Garcia, RN, BSN, JD, SDN, Surgical Services; Apryl Hagnes, RN, BSN, MHA, SDN, SEBD; Jo Keisman, RN, BSN, MBA, SDN, SSW; Angela Stalbaum, RN, MSN, NE-BC, CNO, SMCA; Yvonne VanDyke, RN, MSN, VP Nursing Education and Professional Development, administrator, CEC; Mary Viney, RN, MSN, CPHO, VP, Network JC Accreditation, Patient Logistics, Transfer & Call Center, Wound Care & Venous Access.

Awards and Recognitions

Lynn C. Andrus, RN, MSN, CEN, was nominated by the University of Colorado Denver and elected to represent student members as one of eight officers on the Board of Governors for the Western Institute of Nursing.

Kelly Barlow, RN, BSN, NCSN, was named School Nurse of the Year for Texas Education Region 13.

Patricia Gagnon, RN, BSN, CMSRN, was named a finalist for the regional NurseWeek Excellence Awards.

Marcie Moynihan, RN, MSN, CNS, was named Health Care Hero in the nurse category by the Austin Business Journal, August 2010.

Anne Robinson, RN, BSN, was appointed to the American Heart Association's "Mission Lifeline Science Task Force." Anne will be the only nurse and the only Texan serving on this prestigious national committee.

Texas Nurses Association "Fabulous Five"

Each year, the Texas Nurses Association – District 5 honors five registered nurses whose leadership, compassion and community involvement exemplify nursing at its best. In 2010, Seton nurses received four of the Fab 5 awards.

Elaina Díaz, RN, MSN, CMSRN, University Medical Center Brackenridge

Richard Easterling, RN, BS, Seton Northwest Hospital

Martha Gooding, RN, BSN, CCRN, Seton Northwest Hospital

Liz Murrah, RN, BSN, MS-HCA, NEA-BC, Seton Heart Specialty Care and Transplant Center

Daisy Award

In October 2010, the Seton Family began participating in the national DAISY (Diseases Attacking the Immune System) Award for Extraordinary Nurses program, founded in 2001 by the family of a patient who passed away at the age of 33. Nominated by staff, physicians, patients and families, the award honors nurses who, day in and day out, provide extraordinary care and serve as outstanding role models in their field.

Charlie Burks, RN, Seton Southwest Hospital Ashley Criswell, RN, Seton Medical Center Austin Kenzie Field, RN, Seton Medical Center Austin MaFe Gensoli, RN, Seton Medical Center Williamson

Lucky Hollingsworth, RN, Dell Children's Medical Center Rikki Hudgins, RN, Seton Medical Center Austin Johanna Quinn, LVN, Seton Edgar B, Davis Hospital Eva Rodriguez, RN, Seton Northwest Hospital

Seton Nurse Scholarship Endowment Recipients

Dell Children's Medical Center

Isaias Cerrito Lisa Reinke Katherine Pegues Diane Taylor

Seton Cancer Screening Sarah Cervantes

Seton Edgar B. Davis Hospital Nancy Hermes

Seton Highland Lakes Hospital Linda Sageser

Seton Medical Center Austin Mary Ellen Roche Genevieve O. Akpaitim Lauren Kurth

Seton Medical Center Hays

University Medical Center Brackenridge

Amy Chapman Stephanie Houghton-Bowman Rosemary Ramirez Jonathan D. Hecht

Seton Southwest Hospital Jennifer Marquart

Seton Shoal Creek Hospital Theresa Lambert

Seton Northwest Hospital Janeen McSwain

Seton Medical Center Williamson Christin Bechtel Stanley R. Lundrigan





2010 Nursing Scholarly Works

Poster Presentations

Jonathan Hecht, RN, BSN, CCRN-CMC, and Jeanne Bragiel, RN, CNRN, CCAP, presented "Identifying the Patient at Ultra-High Risk for Development of Pressure Ulcers" at the NDNQI conference in New Orleans, January 2010.

Linda Vochatzer, RN, MSN, CPHQ, and Debbie Wickett, BA, presented "Navigating the Data Highway: Optimizing Dissemination of NDNQI Data to Nursing Staff at the Unit Level" at the NDNQI Data Use Conference in New Orleans, January 2010.

Jennifer Downing, RN, MSN; Deborah Castro, RN, BSN; Kenn M. Kirksey, RN, PhD, ACNS-BC; and Linda Yoder, RN, MBA, PhD, AOCN, FAAN; presented "A Qualitative Study of Phlebotomy Device Selection" at the Southern Nursing Research Society in Austin, February 2010.

Judy Smith, RN, BSN, CRNI; Kenn M. Kirksey, RN, PhD, ACNS-BC; Heather Becker, PhD; Eduardo Chavez, RN, BSN; and Nancy L. Mastronardi, RN, BSN; presented "Predictors of Nurses' Intentions to Utilize Best Practice Disinfection Techniques in Needleless Intravenous Systems" at the Southern Nursing Research Society in Austin, February 2010.

Stephen Pont, MD, MPH, and Ava Wood, RN, MSN, NE-BC, presented "Partnering to Improve Student Health: Austin Independent School District and Dell Children's Medical Center of Central Texas" at the Annual Forum for Improving Children's Healthcare and Childhood Obesity Congress in Atlanta,

Laura Winslett, RN, MSN, CNS-C, CCRN, CNOR, presented "Mentorship: A Day of New Perspectives" at the first Texas Clinical Nurse Specialist Conference in Austin, April 2010.

Rosanne Lindsey, RN, CCRN, and Martha Gooding, RN, BSN, CCRN, presented "Inclusion in Care - Implementing Family-Centered Care in a Small Community Hospital Beacon ICU" at the AACN National Teaching Institute & Critical Care Exposition in Washington, D.C., May 2010.

Barbara Ruben, RN, BSN, COCN, presented "Postoperative Tracheostomy Protocol for Obese and Low Braden Score Patients in the ICU Setting" at the WOCN/WCET Joint Conference in Phoenix, June 2010.

Kenn Kirksey, RN, PhD, ACNS-BC, presented "Lipodystrophy-related Symptoms and Perceived Body Distress in HIV-Positive Individuals over Three Months; and Perceived Body Distress of HIV-Positive Individuals over Three Months; and Perceived Body Distress of HIV-Positive Individuals over Three Months; and Perceived Body Distress of HIV-Positive Individuals over Three Months; and Perceived Body Distress of HIV-Positive Individuals over Three Months; and Perceived Body Distress of HIV-Positive Individuals over Three Months; and Perceived Body Distress of HIV-Positive Individuals over Three Months; and Perceived Body Distress of HIV-Positive Individuals over Three Months; and Perceived Body Distress of HIV-Positive Individuals over Three Months; and Perceived Body Distress of HIV-Positive Individuals over Three Months; and Perceived Body Distress of HIV-Positive Individuals over Three Months; and Perceived Body Distress of HIV-Positive Individuals over Three Months; and Perceived Body Distress of HIV-Positive Individuals over Three Months; and Perceived Body Distress of HIV-Positive Individuals over Three Months; and Perceived Body Distress of HIV-Positive Individuals over Three Months of HIV-Positive Individual IndividSelf-Efficacy and Perceived Effectiveness of Self-care Symptom Management Strategies used by Individuals with HIV and ART-related Symptoms;" "Depression and Self-Care Sumptom Management Strategies in People Living with HIV Infection;" and "Racial Health Care Disparity: HIV-related Sumptoms and Side Effects of Antiretroviral Treatments Experienced by American Asian/Pacific Islanders and Substance Use for Symptom Management" at the International AIDS Conference in Vienna, July 2010.

Camille Moore, RN, presented "RN Residency Committees: Fostering Individual and Organizational Transformation" at the Versant Client Conference in Las Vegas, September 2010.

Jo Keisman, RN, BSN, MBA, presented "Learning While Leading" at the 2010 Seton Nursing Symposium and at the 19th Annual Academy of Medical-Surgical Nurses Convention in Las Vegas, October 2010.

Mary Ellen Jackson, RRT; Joell Verano, RN, BSN, CWPN; Jill Fry, RRT; and Anthony Rodriguez, RRT, BS; presented "Skin Preparation Process for the Prevention of Skin Breakdown in Patients who are Intubated and Treated with Rotoproning" at the International Conference of the AARC in Las Vegas, November 2010.

Podium Presentations

Jonathan Hecht, RN, BSN, CCRN-CMC, and Jeanne Bragiel, RN, CNRN, CCAP, presented "Identifying the Patient at Ultra-High Risk for Development of Pressure Ulcers" at the NDNQI conference in New Orleans, January 2010.

Kenn M. Kirksey, RN, PhD, ACNS-BC; Linda Vochatzer, RN, MSN, CPHQ; Nancy L. Mastronardi, RN, BSN; presented "Autonomy, Self-Efficacy, Influence of Leadership Behaviors and Shared Governance as Predictors of Registered Nurse Job Satisfaction in an Acute Healthcare System" at the Southern Nursing Research Society in Austin, February 2010.

Buffy Allen, RN, MSN, presented "Simulation in Nursing Education" at the Texas Board of Nursing Faculty Workshop: Nursing Education and Transition into Practice in Austin, February 2010.

Claudia Perez, RN, MHI, presented "Aligning Forces for Quality" at the TCAB Learning Committee Meeting in Orlando, February 2010.

Shannon Billingsley, RN, MSN, ACNP-BC, CCNS, presented "Trauma Radiology: Pearls and Pitfalls of the Initial Work-up" at the first Texas Clinical Nurse Specialist Conference in Austin, April 2010.

Jennifer Downing, RN, MSN, and Kenn Kirksey, RN, PhD, ACNS-BC, presented "A Qualitative Study of Phlebotomy Device Selection" at the Central Texas Research Forum in Austin, May 2010.

Andrea Walker, RN, BSN, OCN, presented "Preventing PAC/PICC Line Infections" at the Annual Oncology Nursing Society Congress in San Diego, May 2010.

Rita Kluny, RN, BSN, MTh, BE-HN, HTCl, presented "Healing Touch for Babies" in Colorado, March 2010, and Minneapolis, June 2010.

Mary Viney, RN, MSN, NEA-BC, presented "Transforming Care – The Backstage Story" at The Summer Institute – Evidence-Based Practice in San Antonio, July 2010.

Dana Bajoie, RN, BSN, and Elaina Diaz, RN, MSN, CMSRN, presented "Mentor Circles: Transforming to Meet the Needs of Larger Cohorts" at the Versant Annual Client Conference in Las Vegas, August 2010.

Mary Viney, RN, MSN, NEA-BC; Karen Burkman, RN, MSN, NEA-BC; and Janet Smith, PT, MS; presented "Pressure Ulcer – Teamwork" at the HPI National Safety Summit in Nashville, September 2010.

Susan Pastor, RN, DNS, and Dana Danaher, RN, MSN, presented "Achieving Results Through Pediatric Asthma Core Measures" at the HPI National Safety Summit in Nashville, September 2010.

Pam Feely, RN, BSN, and Mark Jatzlau, RN, BSN, presented "Put the Oxygen Mask on Yourself First: Zero Associate Injuries Related to Patient Handling in a Trauma ICU" at the HPI National Safety Summit in Nashville, September 2010.

Mary Viney, RN, MSN, NEA-BC; Karen Burkman, RN, MSN, NEA-BC; Karen Hollis, RN, BSN, WOCN; and Janet Smith, PT, MS; presented "A Journey Toward Zero Preventable Pressure Ulcers by Way of High-Reliability Principles" at the HPI National Safety Summit in Nashville, September 2010.

Gary Robb, RPh, and Helen Marak-Walker, RN, MSN, presented "Using Focus and Simplify for New Processes and Policies: Managing Patients on U-500 Concentrated Insulin" at the HPI National Safety Summit in Nashville, September 2010.

Catherine Ullman, RN, BSN, presented "Eliminating Patient Identification Errors with Lab Specimens" at the HPI National Safety Summit in Nashville, September 2010.

Jo Keisman, RN, BSN, MBA, and Carlos Rodriguez, MPH, presented "Staying on Track: Using a Shared Webspace to Drive Your Safety Event Investigation" at the HPI National Safety Summit in Nashville, September 2010.

Jo Keisman, RN, RN, BSN, MBA, presented "Using a Shared Webspace to Drive your Serious Safety Event Review" at the HPI National Safety Summit in Nashville. September 2010.

Mary Ann Whicker, RN, MSN, presented "Promoting Team Collaboration through Interdisciplinary Skills Labs" at the Versant Client Conference in Las Vegas. September 2010.

Mary Viney, RN, MSN, NEA-BC, and Claudia Perez, RN, MHI, presented "Transforming Care – The Next Generation" at the Seton Nursing Symposium in Austin. October 2010.

Karen Crump, RN-BC, presented "Strategies for Reduction of Seclusion and Restraint on a Child and Adolescent Unit" at the American Psychiatric Nursing Association National Conference in Louisville, October 2010.

Joyce Batcheller, RN, DNP, NEA-BC, FAAN, presented "The Power of Quantification: A Data Driven Enterprise" at the 37th Annual Meeting of the American Academy of Nursing in Washington, D.C., November 2010.

Karen Burkman, RN, MSN, NEA-BC, presented "Duty to Our Patients: Board of Nursing and Patient Safety Standards – Promoting a Culture of Safety" at the CHAT conference in Austin, November 2010.

Mary Viney, RN, MSN, NEA-BC, and Annette Bartley (Wales) presented "Transforming Care – An International Perspective" at IHI in Orlando, December 2010.

Publications

Yvonne Van Dyke, RN, MSN, authored "Growing your own Nursing Staff with a Collaborative Accelerated Second-Degree, Web-based Program" in The Journal of Continuing Education in Nursing, March 2010.

Alice Davis, RN, BSN; Frank Mazza, MD; Rachel Toungate, MIS; Leigh Fredholm, MD; and James Davis, RN, MSN; co-authored "High Reliability in Palliative Care at the Seton Family of Hospitals" in Supportive Voice, Spring/Summer 2010.

Margaret Butler, RN, BSN, MBA, CNOR, authored "Minimize the Convergence of the Ever-present Elements of the Fire Triangle – Ignition Source, Fuel Source and Oxidizer," in Outpatient Surgery Magazine Online, June 2010.

Mary Ann Whicker, RN, MSN, and Maggie Huebner co-authored "Orientation without Walls: Opening of an Acute Care Hospital," in the Journal for Nurses in Staff Development, accepted July 2010.

Kenn Kirksey, RN, PhD, ACNS-BC, in collaboration with colleagues from The University of California at San Francisco International Nursing Network for HIV/AIDS Research, authored "Prevalence, Correlates and Self-Management of HIV-related Depressive Symptoms" in AIDS Care, September 2010.

Lauren Brandt, RN, MSN, CNS, CNRN, authored "Alternating Stimulation of Synergistic Muscles during Functional Electrical Stimulation Cycling Improves Endurance in Person with Spinal Cord Injury," in the Journal of Electromyography and Kinesiology, December 2010.

Kenn Kirksey, RN, PhD, ACNS-BC, wrote a chapter titled "HIV Symptom and Management and Quality of Life" for Joyce Fitzpatrick's book Encyclopedia of

Vickie Simpson, RN, MSN, CCRN, CPN, authored "Protecting Fragile Skin: Nursing Interventions to Decrease Pressure Ulcer Development in the Pediatric Intensive Care Unit" in The American Journal of Critical Care, accepted 2010.

Judy Smith, RN, MSN, CRNI, and Kenn Kirksey, RN, PhD, ACNS-BC, co-authored "Autonomy and Self-Efficacy as Influencing Factors in Nurses' Behavioral Intention to Disinfect Needleless Intravenous Systems," published in the Journal of Influsion Nursing, accepted 2010.



Sites

Dell Children's Medical Center of Central Texas

4900 Mueller Blvd. Austin, TX 78723 512.324.0000

Seton Edgar B. Davis Hospital

130 Hays St. Luling, TX 78648 830.875.7000

Seton Highland Lakes Hospital

3201 S. Water St. Burnet, TX 78611 512.715.3000

Seton Medical Center Austin

1201 W. 38th St. Austin, TX 78705 512.324.1000

Seton Medical Center Hays

6001 Kyle Pkwy. Kyle, TX 78640 512.504.5000

Seton Medical Center Williamson

201 Seton Pkwy. Round Rock, TX 78665 512.324.4000

Seton Northwest Hospital

11113 Research Blvd. Austin, TX 78759 512.324.6000

Seton Shoal Creek Hospital

3501 Mills Ave. Austin, TX 78731 512.324.2000

Seton Southwest Hospital

7900 FM 1826 Austin, TX 78737 512.324.9000

University Medical Center Brackenridge

601 E. 15th St. Austin, TX 78701 512.324.7000



Denotes Magnet Designation



Denotes Pathway to Excellence Designation

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