

## Nurse Leader



## In the Spotlight

**LeAnne S. Kerr**  
Trauma Program Manager

I earned my BSN in 2005 from the University of Miami and began my career with MCH as a care assistant in 2004. After graduation, I worked as a staff nurse in the Emergency Department (ED) until I was promoted to Clinical Coordinator for the ED in 2009, and in February, 2010, transferred to Trauma Services as Clinical Coordinator. I have been very involved with the trauma team and have often volunteered my time to the program. I am a certified pediatric nurse (CPN), as well as being a certified pediatric emergency nurse (CPEN). I am also a child passenger safety technician (CPST) and work cohesively with the Preventive Medicine Department and Safe Kids Program.

I have always had a passion for trauma care. It was the primary reason I chose to pursue my professional growth at MCH. I have also completed a forensic nursing certification course which has helped me to understand the importance of evidence collection and bruising patterns on our trauma patients. My hobbies are school

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## Resident's Day

By Lisa Martinez, BSN, RN, C



In June 14, 2010, the Hospitality Council sponsored International Resident's Day.

Each unit celebrated by honoring the residents with a luncheon to celebrate the occasion and various international dishes were served. The celebration provided an opportunity to recognize the residents for their hard work and dedication. The celebration also helped to build a rapport between the units and the residents. The occasion was a huge success.



## Appreciation

By Patty Tavio, BSN, RN



After a very long and difficult day, employee morale can plummet along with our Mood Elevators. In 3 South, we have discovered a unique way to cope thereby advancing Mood Elevators to grateful, hopeful and optimistic.

Appreciating each other is a very important aspect of employee morale, especially after a long day when co-workers have supported each other as needed.

In the employee lounge, we have dedicated a bulletin board for use in expressing appreciation for our coworkers. Carolina Ferraz, RN, suggested the idea and it has been successful from the very beginning. Staff is encouraged to write messages of appreciation on small cards and to identify whom they are acknowledging and why. Employee morale has risen on the floor since the start of the "What I appreciate about you" board. Everyone is using it, and it has reflected positively in the employees' Mood Elevators.

A simple gesture has become a very powerful tool.



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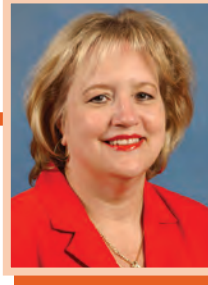
## Nurse Leader In the Spotlight

LeAnne S. Kerr  
Trauma Program Manager

(I started my MSN in Nursing Administration in the fall of 2010), and I am teaching myself to play the clarinet (because I believe it is never too late to develop a gift or ability and never too late to learn something new and grow in different ways).

I have a wonderful husband, Damian, and amazing daughter, Kaiyu, who both support all my goals and dreams. A motto I try to live by is: "I Am Second," which is a Christian phrase that reminds me that I should always consider others before myself. I am truly humbled by the honor I have been given to help to lead MCH in becoming an even more outstanding trauma center with a comprehensive trauma program.

I look forward to advancing this initiative, together with the many other stakeholders in the Trauma Program.



### From the Desk of Jackie Gonzalez

Dear Nursing Team:

The fall is always a busy time for us at Miami Children's. Census surges once children are back in school and this year is no exception. As always, I am delighted by the team work shown by our nurses as we work to staff capacity units and to meet the needs of children and their families with our customary caring style.

Even as we juggle a full house, we are also collaborating with hospital teams on new and exciting initiatives. Nursing teams are serving along with other colleagues and family members in an advisory capacity as we plan for our new bed tower. This new construction initiative, which will make possible the provision of private rooms for our three critical care units, will offer our patients a new level of comfort in the most technologically advanced environment. It will provide an improved environment to work in as well. I thank the nursing leaders who have been working with our planning and construction teams to make this project a reality.

In addition, other nursing team members are actively involved in collaborating to advance our electronic medical record or PEDS (Pediatric Electronic Data System). We recently contracted to install Cerner, a leader in medical IT technology. Now we are moving ahead to merge existing data systems with the new system, train staff to utilize PEDS, and coordinate with physician offices to acquire equipment and training to implement the system—all with the common goal of improving care and coordination.

The benefits of the PEDS system are significant for caregivers and patients alike. We will have all elements of the patient's care history in one unified system that can be accessed by members of the care team. In addition, PEDS will provide checks and balances associated with drug allergies and interactions, helping serve as a safety net, identifying when patients are allergic to specific drugs or when prescriptions are at odds with an existing medication.

Thank you one and all as we work together to put new facilities and systems in place to enhance care practice at Miami Children's, even as we work intently to keep up with the demands of a busy hospital. As always, you do it all. Thank you for being champions for children

Sincerely,

**Jackie Gonzalez, ARNP, MSN, NEA-BC, FAAN**

Senior Vice President / Chief Nursing Officer / Patient Safety Officer



# Highlights of the Organ Donation Champions at MCH

By Bing Wood, RN, MSN, ARNP

**M**iami Children’s Hospital will be receiving the Organ Donation Medal of Honor issued by the Secretary of the United States Department of Health and Human Services at the sixth annual National Learning Congress on Nov. 3-4, 2010. This recognition is presented to MCH for meeting or exceeding a donation rate of 75 percent in a single 18-month period of time. This is our second year to receive this award and this achievement is a direct result of your efforts and our dedicated medical staff who work collaboratively with Life Alliance Organ Recovery Agency to improve the donation process in order to save lives.

This year, MCH is a recipient of three awards from Life Alliance Recovery Agency. MCH has been selected as a recipient of a Hospital Achievement Award in recognition of its attainment of an 80 percent donation rate during 2009. In addition, PICU will be receiving the 2010 Hospital Unit of the Year Luminaire Award for its continuous support and unwavering dedication to organ donation, turning tragedies into miracles. Lastly, Dr. Shayan Vyas, PICU fellow, has been selected as the 2010 Physician of the Year Luminaire Award. He was chosen from among all physicians in South Florida to receive this award. The 8th Annual

Luminaire award will be presented on October 23, 2010.

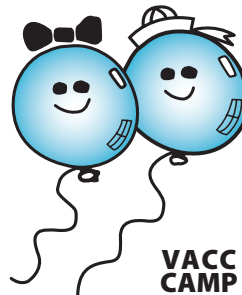
Higher rates of pediatric organ donation give favorable results to organ transplantation and therefore extend and improve the lives of many unfortunate children awaiting organ transplantation. Not only do we participate in organ donation, we also partner with the University of Miami on tissue donation.

## VACC Camp

By Valeria Riorda, RN, BSN - 3 East

**V**ery spring, Miami Children’s Hospital hosts VACC camp, a week-long camp for ventilation-assisted children. VACC camp was organized by a devoted group of doctors and nurses from MCH. It was started in 1986 as a small camp to give a little support and fun to children who require a ventilator. The camp throughout the years has evolved to a big event in these children’s lives. Campers and families from throughout the country, unite at a local park to enjoy fieldtrips and campsite entertainment. 3 East became a

part of this great cause as support nursing staff. As a 3 East respiratory nurse, it gives me great satisfaction to volunteer with my colleagues and watch these children laugh and enjoy all the activities provided for them. It’s a more relaxing and enjoyable pace for both,



patient and nurse, rather than the hospital setting. It is great to see the smiles and carefree fun these kids have when they’re with their friends and volunteers that have also been part of the camp for years. Parents also benefit from this comforting environment through networking with other parents with whom they can relate. VACC camp is a true blessing for everyone involved. It is fulfilling to know we contributed to such an amazing gift provided for these special children and their families.





# What We Need to Know About the NCLEX for 2010

By Carol Ann Hoehn, RN, BSN

Starting on April 1, 2010, graduating nurses will be taking a more difficult exam than the one taken by students three years ago, according to the National Council Licensure Examination (NCLEX) for RNs.<sup>1</sup> This is in response to changes in U.S. healthcare delivery and nursing practice that have resulted in greater acuity of patients cared for by entry-level RNs. According to the NCSBN 2010 NCLEX Test Plan, nursing “employs critical thinking to integrate increasingly complex knowledge, skills, technologies and client care activities into evidence-based nursing practice.”<sup>2</sup> Healthcare in the U.S. has “become even more complex and sophisticated, requiring new nurses to have a greater baseline nursing knowledge and critical-thinking skills.”<sup>3</sup>

The National Council of State Boards of Nursing (NCSBN) evaluates the NCLEX passing standard every three years. This past December 10, 2009, the NCSBN voted to raise the passing standard for the NCLEX-RN. The NCSBN Board of Directors determined that “safe and effective entry-level RN practice requires a greater level of knowledge, skills, and abilities than was required in 2007.”<sup>3</sup>

The American Association of Colleges of Nursing, which represents U.S. baccalaureate and higher-degree nursing education programs, typically notifies its members of elevated test standards, said Geraldine Bednash, RN, PhD, FAAN, chief executive officer and executive director. “However, the announcement of the new standards was made too late for schools of nursing to revise their curriculums,” she said. Dr. Bednash states, “We know that when passing standards are changed, there tends to be a temporary dip in the pass rates, until the schools are able to adjust their curriculums.”

An example of the new changes would include a question describing several patients and asking whom the nurse should see first. The student might say “all of them,” which is not necessarily wrong, but the correct response would be that the most acute patient needs to be seen first, according to Barbara Irwin, RN, BSN, Director of Nursing for Kaplan Nursing.

Other changes include increased emphasis on the management of care subcategory. The NCSBN defines management of care as “providing and directing a nursing care that enhances the care delivery setting to protect clients, family/significant others and healthcare personnel.”<sup>1</sup>

The test will reduce emphasis on the subcategory of reduction of risk potential, defined as reducing the likelihood that clients will develop complications or health problems related to existing conditions, treatments or procedures.

The American Association of Colleges of Nursing (AACN) encourages nursing students to take the NCLEX as soon as possible after graduating when the knowledge they gained in school is still fresh in their minds.

1. Janet Boivin, RN, April 5, 2010 page 22 *Nursing Spectrum*.
2. *Difficulty of NCLEX to be Increased*, Janet Boivin, RN, Dec. 16, 2009 *allnurses.com*.
3. *New passing standard for the NCLEX-RN Examination to Start on April 1, 2010* by bogchi2000 *allnurses.com* Dec. 16, 2009.

## N U R S I N G N E W S

### NEW HIRES

Vanessa Carrillo, 3N  
Crisvelle Esteves, 3N  
Willyne Lozandier, 3N  
Stephanie Soto, 3N  
Anilady Casserino, 3N  
Lisette Perez, 3N  
Japit Quintana, 2E  
Kavita Amachee, 2E  
Amber Sniff, PICU  
Yorsuana Gonzalez, 3S  
Ingrid Hernandez, ER

Antonella Bonvecchio, GI lab  
Daniela Ibarra, 3S  
Natalie Basso, float pool  
Lauren Wong, Radiology  
Allyson Gobus, float pool  
Viviane Durenay, float pool  
Emmanuel Ramirez, float pool  
Mallory Fink, float pool  
Katy Cabanillas, float pool  
Mabel Tuma, float pool  
Natalie Del Rio, float pool

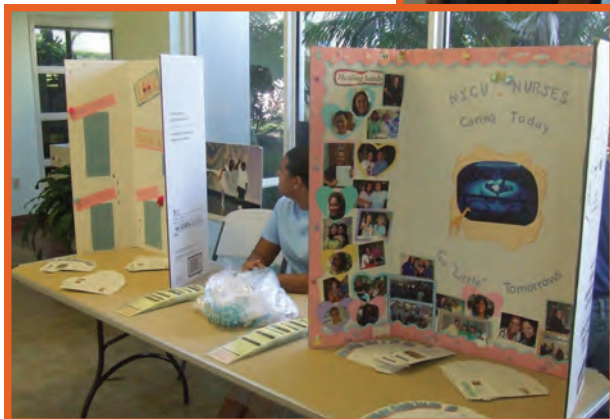
Sarah McSpadden, float pool  
Carolina Marquez, float pool  
Esther Wooten, float pool  
Gabrielle Lugo, float pool  
Cindy Saintval, float pool  
Maibys Molina, float pool  
Anandy Cruz, float pool  
Alexandra Romeo, float pool



# Back to School Health Fair

The Back to School Health Fair was held August 21 at the City of Miami Charles Hadley Park. Many units at MCH set up tables of information and “goodies” for the families. NICU participants Joy Ortiz and Suzette Coulton represented NICU with a table on infant safety awareness.

The event was sponsored by the MCH Talent Leadership Council, the City of Miami Police Department, Miami Dade County African Heritage Cultural Art Center, the Billy Raven Foundation, Miami Dade Police Department, Hands to Help Inc., and other community partners. Thank you to everyone involved who volunteered their time to help make this event such a tremendous success.



# 2010 Recommended Immunization Schedule

By Teresa Mackenzie, RN, CPN, CCM

The recommended pediatric vaccines include diphtheria, pertussis, tetanus, inactivated poliovirus, pneumococcal, haemophilus influenza type B, hepatitis B, hepatitis A, measles, mumps, rubella, influenza and rotavirus. Children who are U.S. born begin the primary series at birth, 2 months, 4 months and 6 months, with a booster at 18 months of age. Children who are delayed in receiving vaccines will require the recommended vaccines as per the catch-up protocol in order to enter day care. Many combinations of vaccines are manufactured and pediatricians are encouraged to follow the “recommended immunization schedule” developed by the Department of Health and Human Services, Centers for Disease Control and Prevention and accepted by the American Academy of Pediatrics.

A second series (boosters) including diphtheria, tetanus, polio, measles, mumps, rubella and varicella are due at the age of 4 to 6 years and prior to entry in kindergarten.

At 11 to 12 years of age, adolescents are required to have the Tdap (tetanus, diphtheria and pertussis) vaccine to enter the 7th grade. Also recommended but not required for this age group is the meningococcal vaccine. All females are encouraged to receive three doses of the human papillomavirus vaccine between the ages of 9 and 26 years of age.

It is highly recommended that adolescents planning to attend college receive the meningococcal vaccine if they have not previously received this vaccine and especially if they plan to live in a dormitory setting.

Seasonal influenza vaccines are recommended for all children ages 6 months to 21 years. The 2010 seasonal vaccine is now available and includes the influenza A strains including H1N1.

The MCH Pediatric Care Center (PCC) administers approximately 5,000 vaccines each year. Please contact the PCC at 305-669-6505 or ext. 2779, if you would like a copy of the recommended vaccine schedule or if you would like to make an appointment for your child.



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## Food for the Soul

*Food for the Soul is a regular feature of the Pursuit of Excellence newsletter. MCH nurses share favorite recipes such as this one by Tania Martinez, RN.*

### PEACH BERRIES AND CREAM PIE

It's a no-bake pie, quick and easy! I make this pie at Thanksgiving time and everyone seems to enjoy it.

*You will need:*

- 1 store-bought cookie crust pie shell
- Cool Whip®
- Strawberries, blueberries, raspberries, and/or blackberries (*whatever you can find or what you like best*)
- Peaches (*fresh sweet peaches or glass jar-preserved peaches*)
- 1 9-ounce cream cheese pack
- 1/3 cup sugar
- 1 teaspoon almond extract
- 1 teaspoon vanilla extract
- Strawberry or apricot preserves
- 1 teaspoon of honey
- 1 teaspoon lemon juice

**To make filling:** Whip the cream cheese and sugar with a hand mixer until softened and uniformly mixed. Add vanilla extract and almond extract and mix. Fold cream cheese mixture into 6 ounces of Cool Whip®. Fill pie crust with mixture and decorate with fruit.

**To make glaze:** In a small saucepan, add 2 tablespoons of preferred fruit preserves and the honey and lemon juice. Heat through and strain any chunks of the preserved fruit before drizzling over fresh fruit to add shine.

*Chill pie for about an hour and enjoy!*



“It’s not bad handwriting. It’s specifically encrypted for patient confidentiality and can only be viewed with these special glasses.”

### Reminder Box

Did you know that you are not permitted to arrive late to an MCH education class? Please allow plenty of extra time to make it to your scheduled class, particularly during high volume traffic hours.

Don't forget to CHECK THE MCH PORTAL for updated policy information.

Don't be caught unprepared!