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2024 Annual Report

NIH Clinical Center Nursing Department



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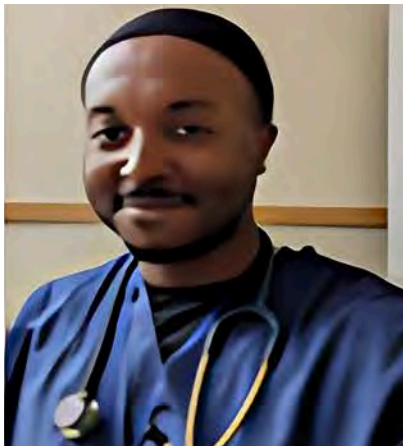
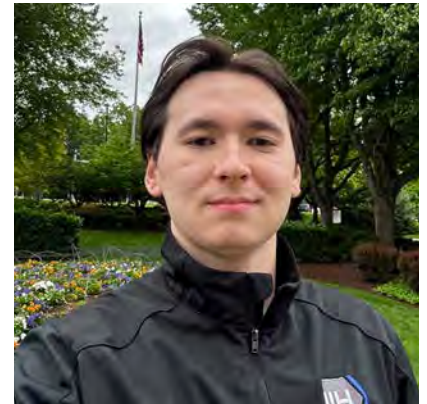
U.S. Department of Health and Human Services | National Institutes of Health | NIH Clinical Center



Clinical Research Nursing

The specialized practice of professional nursing focused on maintaining equilibrium between care of the research participant and fidelity to the research protocol. This specialty practice incorporates human subject protection; care coordination and continuity; contribution to clinical science; clinical practice; and study management throughout a variety of professional roles, practice settings, and clinical specialties.

International Association of Clinical Research Nurses. (2012). "Enhancing Clinical Research Quality and Safety Through Specialized Nursing Practice." Scope and Standards of Practice Committee Report.



**The NIH Clinical Center
Nursing Professional Practice Model**

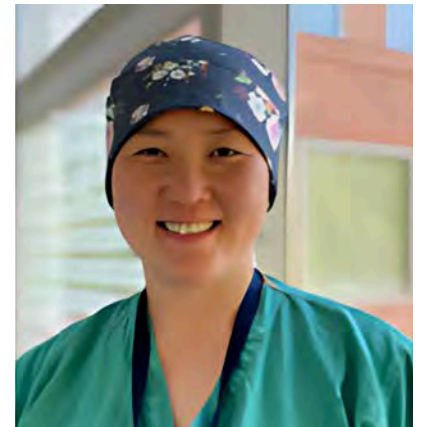




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Mission

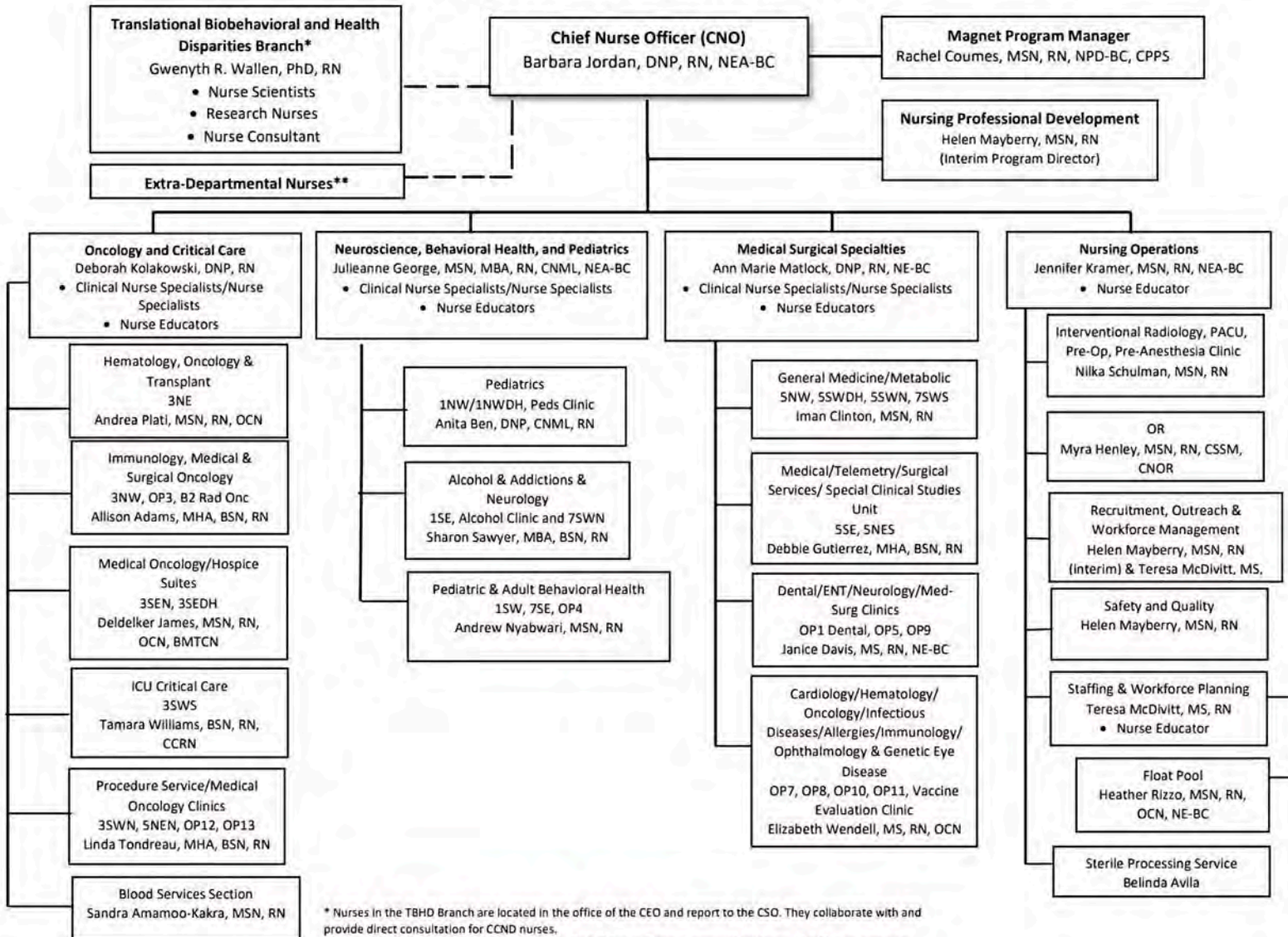
We improve human health by supporting cutting-edge clinical research and providing compassionate, evidence-based nursing care to a diverse population of patients and their families.

Vision

To be the premier Nursing Department where the world's best clinical research nurses provide expert patient care, generate new knowledge, and develop innovative practices to improve patient outcomes.

NIH Clinical Center Nursing Department Organizational Chart

Clinical Center Nursing Department



* Nurses in the TBHD Branch are located in the office of the CEO and report to the CSO. They collaborate with and provide direct consultation for CCND nurses.

** Nurses (including APRN's) working in other Clinical Center Departments and Institutes. The CNO approves the credentials and privileges for these nurses to practice in the Clinical Center.

7/2024

Nursing Department Executive Team



Barbara Jordan, DNP, RN,
NEA BC,
Chief Nurse Officer



Jennifer Kramer MSN,
RN, NEA-BC
Service Chief, Nursing
Operations



Deborah Kolakowski,
DNP, RN
Service Chief, Oncology
and Critical Care



Julieanne George, DSL(c),
MSN, MBA, RN, NEA-BC,
CNML, NC-BC
Service Chief,
Neuroscience, Behavioral
Health, and Pediatrics



Ann Marie Matlock, DNP,
RN, NE-BC,
Service Chief, Medical
Surgical Specialties



Diane Walsh, MS, RN,
Special Assistant to the
Chief Nurse

The Nurse Executive Team includes the Chief Nurse Officer (CNO), the Service Chief for Oncology and Critical Care, the Service Chief for Medical Surgical Specialties, the Service Chief for Neuroscience, Behavioral Health and Pediatrics, the Service Chief for Nursing Operations, and the Special Assistant to the Chief Nurse. The Nurse Executive Team meets regularly to plan operations, allocate resources and set policy to govern clinical research nurse practice.



Message from the Chief Nurse Officer

Greetings Colleagues,

We are pleased to provide the calendar year 2024 annual report of the activities and accomplishments of the National Institutes of Health Clinical Center Nursing Department and its partners. 2024 was truly the “Year of Magnet!” We began the year by completing the Magnet document that told the stories and provided the data to demonstrate how the Clinical Center met and exceeded the Magnet standards. The document was submitted on March 31, 2024. Immediately, we began to plan for the Magnet appraisers’ visit in August. Our Magnet Program Director, Rachel Coumes, the Magnet Ambassadors, and nurse leaders prepared us for an amazing visit. On November 18th, we received the news that we were designated Magnet *with Distinction*™. This was and is a well-deserved recognition of the high-quality care that is provided to our patients and the positive practice environment in which we work. Very few organizations hold this high distinction.

In addition to our Magnet visit, we also had a very successful visit from The Joint Commission. All the work that had been done over the prior three years, including the addition of the Sterile Processing Service to the Nursing Department, showed throughout the survey. In 2024, we continued our construction projects and saw most of the 3rd floor nurse station renovations completed. We also completed the patient exam room refresh on OP7 and OP9 and began the work on OP3 and OP8. The Pediatric Clinic began renovations along with the 1H Alcohol Clinic. Our Shared Governance Committees and Unit Practice Councils continued to serve as the backbone of our department and accomplished so much.

I would like to thank the editorial team and all the contributors from the Nursing Department and Clinical Center for creating an outstanding report. 2024 was an outstanding year! We accomplished many of our goals and began the work to create our next 3-year strategic plan. I am honored and privileged to be able to work with you and for you as your Chief Nurse Officer. Thank you for all that you do and for an incredible 2024!

Sincerely,

Barbara Jordan, DNP, RN, NEA-BC
Chief Nurse Officer
NIH Clinical Center Nursing Department



The NIH Clinical Center Receives Prestigious Magnet *with Distinction*TM Designation

The NIH Clinical Center earned the prestigious designation *Magnet with Distinction*TM November 2024. This recognition is the result of a five year Magnet journey, which began in 2019. NIH was only the 19th healthcare organization to achieve this honor.

*Magnet with Distinction*TM designated organizations have demonstrated sustained excellence in nursing practice and patient care, with an emphasis on quality outcomes and safety.



This designation highlights an organization's:

- Excellence in Nursing Practice: Clinical Center nurses are expert in clinical research nursing practice.
- High Standards of Patient Care: The hospital adheres to the highest standards of patient care, using evidence-based practices to achieve optimal patient outcomes.
- Professional Development: There is a strong focus on the ongoing education, training, and professional development of nursing staff, ensuring they are equipped with the latest knowledge and skills to provide high-quality care.
- Interdisciplinary Collaboration: The NIH Clinical Center excels in collaboration between nursing teams and other healthcare professionals, ensuring comprehensive and coordinated patient care.
- Continuous Improvement: This designation highlights a commitment to continuous quality improvement, not just in nursing practice, but in overall healthcare delivery within the institution.



The Magnet with DistinctionTM recognition is a reflection of the organization's commitment to providing exceptional nursing care, and it places the NIH Clinical Center among the top hospitals in the country in terms of nursing excellence, quality, and safety.

TRANSFORMATIONAL LEADERSHIP



Service Chiefs Joined CCND Leadership August 2024



Jennifer Kramer MSN,
RN, NEA-BC
Service Chief, Nursing
Operations



Julieanne George, DSL(c),
MSN, MBA, RN, NEA-BC,
CNML, NC-BC
Service Chief,
Neuroscience, Behavioral
Health, and Pediatrics

Jennifer Kramer joined us from Lifebridge Health and assumed the role of Nursing Operations Service Chief. Julie George joined us from INOVA Fairfax Hospital and is leading the Neuroscience, Behavioral Health, and Pediatrics Service. Both Service Chiefs arrived in time to participate in the ANCC Magnet Site Visit and have been integral to supporting ongoing nursing excellence initiatives within their services and throughout the department.

We Welcomed New Leaders and Said Farewell to Others



Dr. Yvonne Rowe joined the CCND as Nurse Manager of 5SWDH, OP1, OP5, and OP9. Dr. Rowe has over 26 years of nursing experience in a variety of nursing roles.

Yvonne Rowe, DrPH, MSN



Dr. Ann Peterson, Clinical Nurse Specialist, retired after 26 years of dedicated service to the NIH Clinical Center in December 2024.

Ann Peterson, PhD, RN,
APRN-CNS, CMSRN



Captain Janice Davis, MSN, RN, Nurse Manager of OP1, OP5 and OP9 retired after many years of service to the NIH Clinical Center.

Captain Janice Davis, MSN, RN



Andrea Plati, MSN, RN, Nurse Manager of 3NE retired after several years of service to the NIH Clinical Center in December 2024.

Andrea Plati, MSN, RN

CCND Shared Governance and Unit Practice Council Leadership Workshop

The NIH Clinical Center Nursing Department hosts an annual workshop for new Shared Governance and Unit Practice Council chairs and co-chairs. Workshop curriculum includes education related to leadership, meeting facilitation, evidence-based practice, and project management. Twenty seven nurses attended the 2024 workshop.



Team Lead Leadership Development

In alignment with the Clinical Center Nursing Department's (CCND) goal to "Develop a comprehensive transition-to-practice program for nurses moving into new roles," targeted training initiatives were implemented to support the ongoing professional development of CCND's Team Leads. As part of these efforts, Team Leads participated in the American Nurses Association's "The New Nurse Manager Basics Workshop," a comprehensive and interactive training program specifically designed to prepare nurses for success in leadership roles. This workshop offered a robust foundation in essential leadership competencies equipping participants with the skills and knowledge required to effectively transition from clinical practice to roles in nursing leadership.

Topics included effective communication strategies, principles of unit operations, conflict resolution, staff engagement, and core business processes relevant to healthcare environments. By engaging in this structured educational experience, Team Leads enhanced their ability to make informed decisions with confidence, and foster collaborative and efficient work environments.



The workshop not only strengthened their understanding of the multifaceted role of a nurse manager but also directly supported the department's goal of cultivating a skilled, adaptable, and resilient nursing leadership pipeline committed to delivering high-quality, patient-centered care.

STRUCTURAL EMPOWERMENT



2024 Highlights from Our Shared Governance Committees

Nursing Practice Council

The Nursing Practice Council (NPC) supports professional nursing practice grounded in evidence and facilitates professional development through collective decision-making. All credentialed nurses working at the NIH are governed by decisions made through NPC. Accordingly, these nurses are encouraged to raise practice issues and to submit NPC requests for discussion and consideration. In addition, NPC provides a forum to disseminate information regarding professional nursing practice standards. NPC is open to any credentialed nurse to raise practice issues and to submit NPC requests. Credentialed nurses must stay informed about the decisions made by the NPC. This is achieved through active participation in committee functions and the clear articulation of their perception of an issue, question, or concern related to professional nursing practice and recommendations of changes to the same.

In 2024, the NPC processed a total of 196 NPC requests and Shared Governance initiatives that supported the CCND *Magnet with Distinction* journey. Through the committees, the NPC continued to support quality improvements within the Clinical Center Nursing Department, unit-based and hospital wide.

At the beginning of 2024, in collaboration with the Department of Clinical Research Informatics (DCRI), the Shared Governance Chairs, Chair Elects and committee sponsors, a new NPC tracking document in real time began. A new, simplified automated NPC Request Form was also developed allowing new NPC requests to be entered on the new NPC Tracking List. During the year the NPC Chair worked with the committee chairs to continue to review outstanding requests and determine their status. Stakeholders were contacted to see if their requests were resolved, could be closed, or would remain open for follow up. Many of the outstanding NPC requests were updated. This was a huge accomplishment for the Nursing Practice Council and shared governance structure. .



Clinical Practice Committee (CPC)

The Clinical Practice Committee (CPC) maintains evidence-based Standards of Practice (SOP), Procedures (PRO) and Elsevier Skills® with NIH Guideline documents for the NIH Clinical Center Nursing Department (CCND). In 2024, the CPC team partnered with Clinical Nurse Specialists (CNS), Nursing Information Systems committee (NIS), Nursing Professional Development (NPD), Nursing Research Participant Education Committee (NRPEC), Safety and Quality, DCRI, Website Request team and other partners to ensure efficient and timely project completion. Twenty-five documents were edited, reviewed, approved & posted to the nursing intranet. CPC developed three Elsevier Skills® with NIH Guidelines. There was a total of twenty NPC requests delegated to CPC. Of this number, ten NPC requests were completed and closed out.

CPC continued its utilization of MS Teams in both meeting and group collaboration capacities to optimize committee functioning. In 2024, the CPC Committee was delighted to welcome and work closely with a new Staff Assistant for Shared Governance. Additional Committee project highlights included collaboration on the Limb Restriction Order & Communication Project & NPC request tracker updates. The CPC committee is ever grateful for the leadership and support provided by Nursing and its strong partnerships that extend throughout the nursing department and far beyond.

2024 Highlights from Our Shared Governance Committees

Nursing Research Participant Education Committee (NRPEC)

The Nursing Research Participant Education (NRPEC) Committee facilitates the systematic review and development of education materials designed to support research participants at the National Institutes of Health. NRPEC members utilize an Evidence Based Practice model and collective decision making to develop and revise research participant education materials. NRPEC works with the Clinical Center's Research Participant Education Committee (RPEC) to facilitate document revisions and dissemination of the materials to research participants and their caregivers.

In 2024, NRPEC facilitated the systematic review of 58 patient education documents. 32 documents were published on the Patient Education Document Directory. NRPEC completed NPC requests, including the creation of a welcome letter template to assist patient care units in creating an informational document for the patients and their caregivers. In addition, NRPEC implemented Document Tracking via Excel on the MS Teams Channel to improve efficiency.

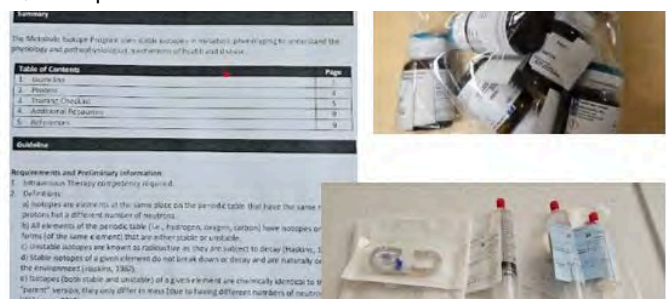
Performance Improvement Committee (PIC)

In alignment with its mission to promote quality outcomes and uphold research integrity, the Performance Improvement Committee (PIC) continued to identify and address opportunities for improvement across the Clinical Center Nursing Department (CCND) throughout 2024.

In 2024, PIC supported CCND's preparation for the Joint Commission visit. Several PIC members participated in a Joint Commission mock survey, and the committee served as an active channel for collaboration between nursing staff and Safety and Quality teams to ensure readiness and alignment leading up to the visit.

PIC also responded thoughtfully to workflow challenges that arose following the implementation of the Patient Transport Policy, launched in mid-2023. In collaboration with bedside nurses, radiology staff, and safety and quality representatives, we facilitated cross-disciplinary discussions to ensure that policy requirements could be upheld while also addressing the challenges that nurses were facing. PIC developed and presented actionable recommendations that maintained the high standards of patient safety reflected in the Transport Policy while also supporting efficiency in care delivery.

Additionally, PIC took meaningful steps to address opportunities for improvement submitted through Nursing Practice Council (NPC) requests. Two dedicated workgroups were launched this year, both addressing issues previously handled in varied ways across units. By standardizing these processes department-wide, the goal was to promote clarity, consistency, and shared expectations. The first workgroup focused on standardizing the labeling process for Theraworx wipes to ensure that wipes placed in warmers could be easily identified and discarded after seven days, as instructed by the manufacturer. The second workgroup aimed to enhance the experience of nurses who float between units by creating a standardized float resource guide template and establishing a clear, accessible process for retrieving this information. Through each of these initiatives, PIC continues to function as a mechanism for translating staff feedback and data into action. By engaging direct-care nurse, interdisciplinary, and leadership perspectives, the committee advances a culture of collaboration, innovation, and patient-centered excellence across the CCND.



2024 Highlights from Our Shared Governance Committees

Wellness, Recognition and Retention Committee (WR&R)

The Wellness, Recognition & Retention (WR&R) Committee aims to foster a culture of employee wellness and recognition by implementing wellness activities, recognition programs, and retention efforts designed to promote self-care and retain highly qualified healthcare professionals. In 2024, the committee organized several ambitious and successful events. Certification Day was held at the FAES Terrace, to support professional development and certification efforts. The Nursing Awards Week celebrated nursing excellence with a week packed full of events held at different times to include day and night shift nurses. During the 2024 CCND Awards Ceremony, we had the honor to host Dr. Bernadette Melnyk who spoke on the importance of Evidence Based Practice in Nursing.

The committee also introduced Employee Wellness Initiatives, including acupuncture sessions and the Code Lavender pilot, to promote staff health and well-being. The Best Friends at Work Competition saw the highest number of submissions with the winning teams displayed below. Additionally, the committee organized Holiday Events, such as a door decorating contest and a roaming Santa, to foster festive cheer and community spirit among employees. These activities highlight our WR&R representatives' commitment to enhancing the overall employee experience by fostering a positive and uplifting environment.



Nursing Information Systems Committee (NIS)

In 2024, in collaboration with the Department of Clinical Research Informatics (DCRI) to update, manage, and improve NIH's electronic medical record, Clinical Research Information Systems (CRIS), the NIS Committee reviewed 90 Nursing Practice Council (NPC) requests for review/discussion/vote (including 63 new requests and 27 prior requests). The NIS Committee coordinated with other Clinical Center Nursing Department (CCND) Shared Governance Committees - NPC, CPC, PIC, NWR&R, EBP-RIC, and request stakeholders, in efforts to safeguard patient care, refine clinical practice, and advance research, while improving clinician workflow. The NIS Committee approved 30 NPC requests, completed 23 requests (including requests from prior years) and reviewed 15 requests for informational purposes only, prior to submission for order set requests.

Highlights of approved completed NPC requests include: Patient Safety and High Falls Risk documentation upgrades, Patient Acuity Mapping Improvements for Outpatient Nursing Units to aid in proper capture of patient acuity and nursing workflow, Vascular Access Device Flowsheet additions and revisions for improved documentation/communication/infection prevention efforts, and Patient's Preferred Language added to Behavioral Health patient documentation revisions for improved assessment in Distress/Abuse & Neglect/Suicide Risk Screening notes. NIS Committee ongoing workgroups for Inpatient Admission Assessment and Nursing IPASS Shift Report Handoff documents continued in 2024, and those documents currently await final revisions and document build.

2024 Highlights from Our Shared Governance Committees

Evidence-Based Practice-Research Innovation Council (EBP-RIC)

The Evidence-Based Practice-Research Innovation Council (EBP-RIC) provides consultation and/or guidance to Clinical Research Nurses (CRNs) and other inter-professional team members interested in seeking evidence to answer clinical inquiries or pressing practice questions aimed at improving patient care or the work environment through systematic approaches such as evidence-based practice projects (EBP) or quality improvement (QI) processes. The chair and chair-elect participated and contributed to all CCND Coordinating Council meetings as prescribed.

We began the year by touring inpatient and outpatient units, meeting with unit representatives from the EBP-RIC to engage them and answer any questions they had about the council's activities, meeting modalities, and calendar. We met with some unit managers to express the council's gratitude for supporting nurses engaged in various shared governance committees, especially EBP-RIC. We also sought their assistance in spreading the word to staff about the council's activities and the benefits of being part of it.

The EBP Fellowship co-directors, as content matter experts, provided EBP research process education to EBP-RIC meeting participants during our monthly meetings. The chair and chair-elect with the EBP-RIC executive sponsor, the EBP fellowship co-directors, and the immediate past chair, held post-meeting debriefing sessions during which we had a moment to reflect and begin planning for the next meeting's agenda.

During our monthly meetings, clinical research nurses and research nurses from the Institutes presented EBP initiatives as part of their Doctorate in Nursing Practice (DNP) degree requirements. Clinical inquiries submitted as NPC requests by nurses were also presented to the council and discussed. During the discussions, insights and guidance were provided to help conduct the initiatives to address the inquiries.

Over the course of the year, a total of nine EBP/DNP projects and three NPC requests directed to the council were presented at the monthly meetings. Project updates from EBP Fellows and Fuld Institute Immersion participants shared their EBP inquiry works. The EBP Fellowship co-directors conducted 11 EBP education sessions. These presentations were offered as learning opportunities on the essence of EBP. Additionally, the council members participated in the CCND 2024 EBP Poster Day initiative through abstract reviews and event support.



2024 UPC Projects

The 2024 Annual Unit Practice Council (UPC) updates were held in September. CCND UPC representatives participated in the forum to share their units' initiatives and discuss the impact of their work.



K-CARDS FOR HAPI PREVENTION IN THE ICU

2024 UPC Project: Improving HAPI Prevention Bundle Compliance in the ICU through the use of Kamishibai Card Rounding



OBJECTIVES

- To educate about the HAPI Prevention bundle elements
- To increase HAPI Prevention bundle compliance
- To ultimately reduce the number of HAPIs in the ICU

WHAT DOES THIS MEAN FOR ME?

- Review the bundle elements
- Stay up-to-date on documentation
- Have required items at bedside/in use

WHAT IS THE BUNDLE?

- Audits on patients with a Braden Score of ≤ 16
- Composed of both bedside and documentation elements

• Bedside:

- Presence of lift sheet
- 14 layers under patient
- Waffle cushion under patient's buttocks
- 2-fto poplacers for turning
- Mediex on sacrum
- Positioned L or R
- Heels floated
- Lines, tubes, and drain sites protected from pressure and moisture (Mediex, securement device, barrier, etc)
- Barrier cream used (if moisture or incontinence present)

• Documentation:

- Completed admission pink sheet
- Completed and accurate Braden Score
- Lines/Tube/drains site protection
- Skin protection described and q2 turning charted
- Nutrition supplements
- WOCN consult

WHAT ARE K-CARDS?

- Kamishibai means "paper drama" and is a Japanese form of storytelling on picture scrolls
- Have been used in the manufacturing industry for years but are also suited to healthcare
- An easy visual way to tell a story about bundle compliance- 90% compliance with the bundle - green card, <90% - red card



TIMELINE



Unit/Clinic	Projects
1NW	Bedside Handoff
3NE	Unit Newsletter, Spanish Fall Prevention Card
3NW	UPC Board, Transitioning 3NW Charge Nurses to MS Teams
3SEDH	Ultrasound for Vascular Access
3SEN	ICDx Plan of Care, UPC Board
5NW	Digital Protocol and Serial Testing Worksheet Clean Up, Med Room Poster De-Clutter and Update
5SE	Shift Roles/Responsibilities, IPASS Huddle, Charting for Acuity
5SWDH	Rapid Response, Code Blue Activation
7SE	Unit Protocol List, ETPB Ratings Update
7SWN	Seizure Monitoring Safety Procedure
3SW ICU	HAPI K-Card Rounding
OP1, OP5, OP9	Post Conference Presentations, Primary Nursing, Protocol Presentations
OP12, OP13, OP3, B2 Rad Onc	Suicide Screening OP12, OP13; Virtual Waiting Room OP3; Acuity Plus OP12, OP13
OP4	Gingerbread House, Specific Electronic Appointment Request (EAR)
OR	Change of Shift Handoff Checklist

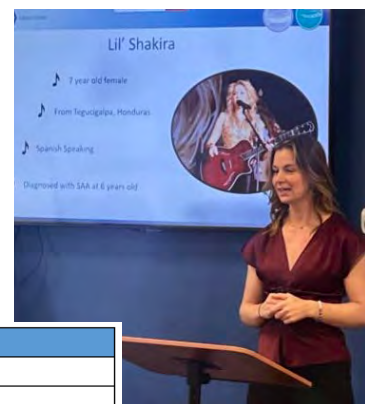
NIH Clinical Research Nursing Residency Program

The NIH Clinical Research Nursing Residency Program (CRNRP) is the first of its kind in the United States, designed to assist newly licensed graduate nurses in the transition from nursing school to professional practice and a career in clinical research nursing. The residency program curriculum emphasis is not centered on one clinical specialty, but on building critical thinking, professional practice skills, and clinical competency in the context of a clinical research environment.



Congratulations, Cohort 10!

During the 2024 CRNRP Case Presentation Day, nurse residents showcased the complexities associated with participation in clinical research, & highlighted the role of the Clinical Research Nurse in the delivery of quality patient care across different clinical specialties. The event was well attended both in-person and virtually, and sparked thoughtful discussion.



Presenter	Clinical Specialty Area	Topic
Aubry Grame	Pediatrics	Severe Aplastic Anemia
Nora Reyes	Pediatrics	Sickle Cell Disease
Carolyn Keating	Adult Behavioral Health	Major Depressive Disorder
Laura Gardner	Adult Medical-Oncology	Double-Hit Diffuse Large B Cell Lymphoma
Wujin Choi	Adult General Medicine	Cushing's Disease
Jana Bowcut	Operating Room	Transsphenoidal Surgery for Cushing's Disease



On September 26, 2024, Cohort 10 nurse residents celebrated the completion of their transition to practice program and first year as clinical research nurses in a graduation ceremony attended by family, friends, and colleagues both in-person and virtually. NIH Clinical Center CEO, Dr. James Gilman, MD, provided remarks to the guests of honor, as well as NIH Clinical Center CNO, Dr. Barbara Jordan DNP, RN, NEA-BC.

Welcome, Cohort 11!

In Fall 2024, we welcomed 9 new graduate nurses to the CCND as part of Cohort 11 of the CRNRP:

Nurse Resident	Clinical Specialty Area
Diana Devine	1NW
Dana Dinn Tandoc	1NW
Tiffany Gonzalez	3NW
Leah Ahearn	3NE
Soofi Daneshpour	3NE
Jordan West	3SEN
Moyra Santos	5NW
Janie Velasquez	7SWN
Thla Zing	Operating Room

Exemplary Professional Practice



Professional Development Highlights

As of December 2024, the CCND Office of Safety & Quality and the Office of Nursing Professional Development teams merged to become one team under the title, Nursing Professional Practice (NPP). This team is composed of Nurse Educators, Nurse Consultants, a Healthcare Simulator Technician, a Management Analyst, and a Program Support Assistant. In the Nursing Department and throughout the Clinical Center, this team leads and supports safety & quality initiatives, professional development programs (e.g., New Employee Orientation, Clinical Research Nurse Residency Program, Fundamentals of Clinical Research Nursing, IV/Blood Workshop, Charge Nurse Workshop, Preceptor Workshop, and more). And we facilitated student placement for individuals pursuing baccalaureate, graduate, and doctoral nursing degrees.



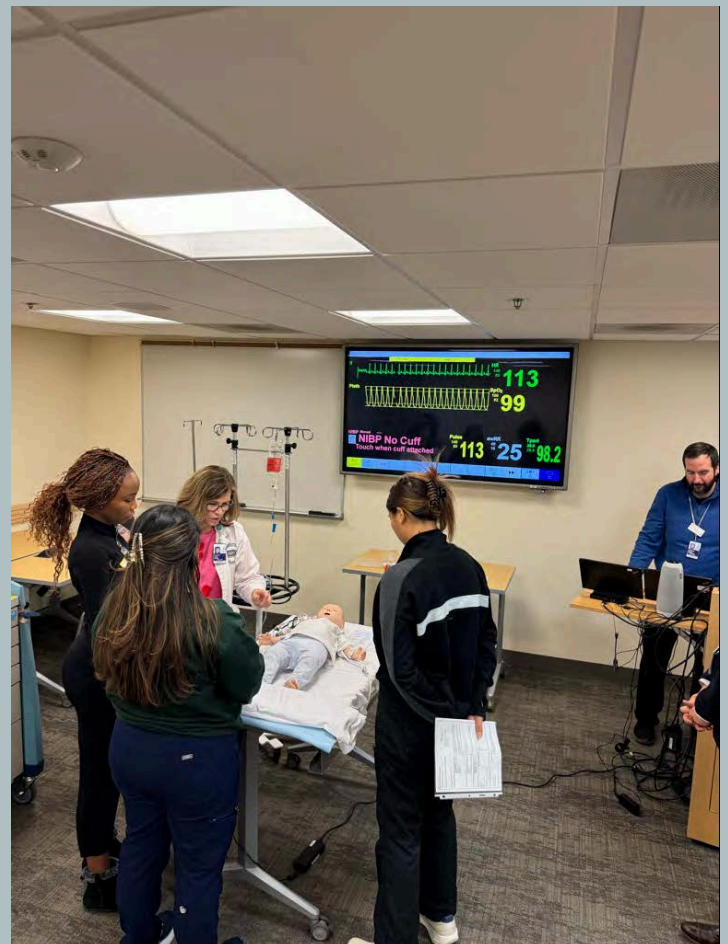
- Contributed to a very successful, unannounced Joint Commission triennial survey in April 2024.
- NPP staff managed the credentialing and privileging of more than 450 nursing staff who work in our Extra-departments, Institutes and Centers playing a pivotal role in ensuring a clinically ready workforce.
- Contributed to and influenced the implementation of Orders Reconciliation Manager (ORM) as a members of an interprofessional team led by the Office of Patient Safety & Clinical Quality.
- Safety and Quality CRN Forum has been rebooted and is meeting quarterly. CRN-Safety Quality have an opportunity to discuss quality and safety initiatives and learn from each other and experts in the field.
- Huddling for Excellence Guidelines were standardized and implemented in all CCND inpatient and ambulatory care locations. Team huddles are an effective method of communicating at the unit level and help facilitate high-quality and safe patient care while improving alignment with strategic goals.
- The Huddle for Excellence Guidelines established a collaborative way to share information, disseminate best practices, and addressing concerns and solutions in a timely manner.
- The monthly Performance Measurement Panel (PMP) and companion Speaking Points is 12 years old and is a recognized panel of clinical and operational metrics reported internally. In 2024, the PMP was expanded to accommodate new metrics such ambulatory suicide risk screening and service-level hospital acquired infection data.
- Data management efficiencies were trialed and implemented on several quality metrics with the objective being to provide the Nursing Department with an actionable data report.
- The Simulation Center team supported weekly simulations for Critical Care Medicine Department fellows, ISW Pediatric Emergency Care Training, INW Bridge to Practice sessions as well as Pediatric Clinical Emergency Response scenarios.



CCND Competency Program

As part of our ongoing commitment to excellence in patient care and professional development, our department is excited to be transitioning the competency program to incorporate the Donna Wright Competency model. This framework focuses on accountability, empowerment and ownership ensuring competencies are not only maintained but meaningfully connected to our daily practice. The model emphasizes staff engagement in identifying essential competencies and selecting validation methods that are practical, individualized and aligned with real-world nursing responsibilities. This transition marks a shift from traditional approaches toward a more dynamic, learner centered model. Competency validation will now be tailored through methods such as peer review, case studies, return demonstrations and evidence of daily work which encourages both collaboration and critical thinking.

We have successfully incorporated the Donna Wright model in our Ongoing Competency Assessment process in the last couple of years. We are grateful to our leadership and nursing staff for their support and enthusiasm throughout this transition. Their willingness to embrace change and develop innovative, thoughtful validation methods has been instrumental in ensuring our team remains confident and competent in delivering high quality care. We look forward to embracing this model for the entire competency program and the positive impact it will have on engagement, accountability and ultimately patient outcomes.



World Diabetes Day

The NIH Clinical Center's Inaugural World Diabetes Day was held on November 14, 2024 on the FAES terrace. The fair was created to raise awareness about diabetes, educate hospital staff on the latest diabetes technology, and enhance their understanding of blood glucose management, both professionally and personally. The event was conducted mainly in-person with various insulin pump and continuous glucose monitor vendors. The virtual meeting was hosted on Zoom, offering scheduled TechTalks that ran simultaneously with the in-person event. The virtual education sessions were presented by the pump & continuous glucose monitoring companies sharing their knowledge and features of their products with online attendees.

Education stations were available in-person with a focus on insulin administration, carb counting, and the introduction of the Diabetes & Blood Glucose Management Service Team (DBGMS) and their initiatives. A risk assessment for Type 2 diabetes was provided, as well as a photo booth for fun. About 100 attendees participated, including Clinical Center nurses, Extradepartmental registered nurses, endocrine fellows, and other health care providers. The event provided valuable learning opportunities for staff to improve both their professional knowledge and personal understanding of diabetes care.



2024 CCND Nursing Excellence Awards

Nursing Excellence Awards

Clinical Excellence

Krista Bernier, RN

Excellence in Patient Education

Mary Nathalie Zacarias, RN

Safety and Quality

3NE CLABSI Prevention Champions

Leadership

Erica Jaworski, RN

Rising Clinical Research Nurse

Lizzy Hayford, RN

Nursing Education

Central Venous Access Device Fair Team

Team Excellence

Elena Fontan, RN & Alexa White, RN

Excellence in Partnership

5SWDH Staff

Clinical Inspiration

Karina Bridges, RN

Patient Care Technician

Shannon Rahman

Administrative Support

Latania Brown

Evidence-Based Practice

OR/ST/SPD Staff

Wellness Advocate

Andrea Gomez, RN & Karina Bridges, RN

Nursing Executive Service Awards

Chief Nurse Officer Award

Amy Wilkins, RN

Oncology & Critical Care Services

Trish Todd, RN

Neuroscience, Behavioral Health, & Pediatrics
Service

Kristina Hagan, RN

Medical Surgical Specialties

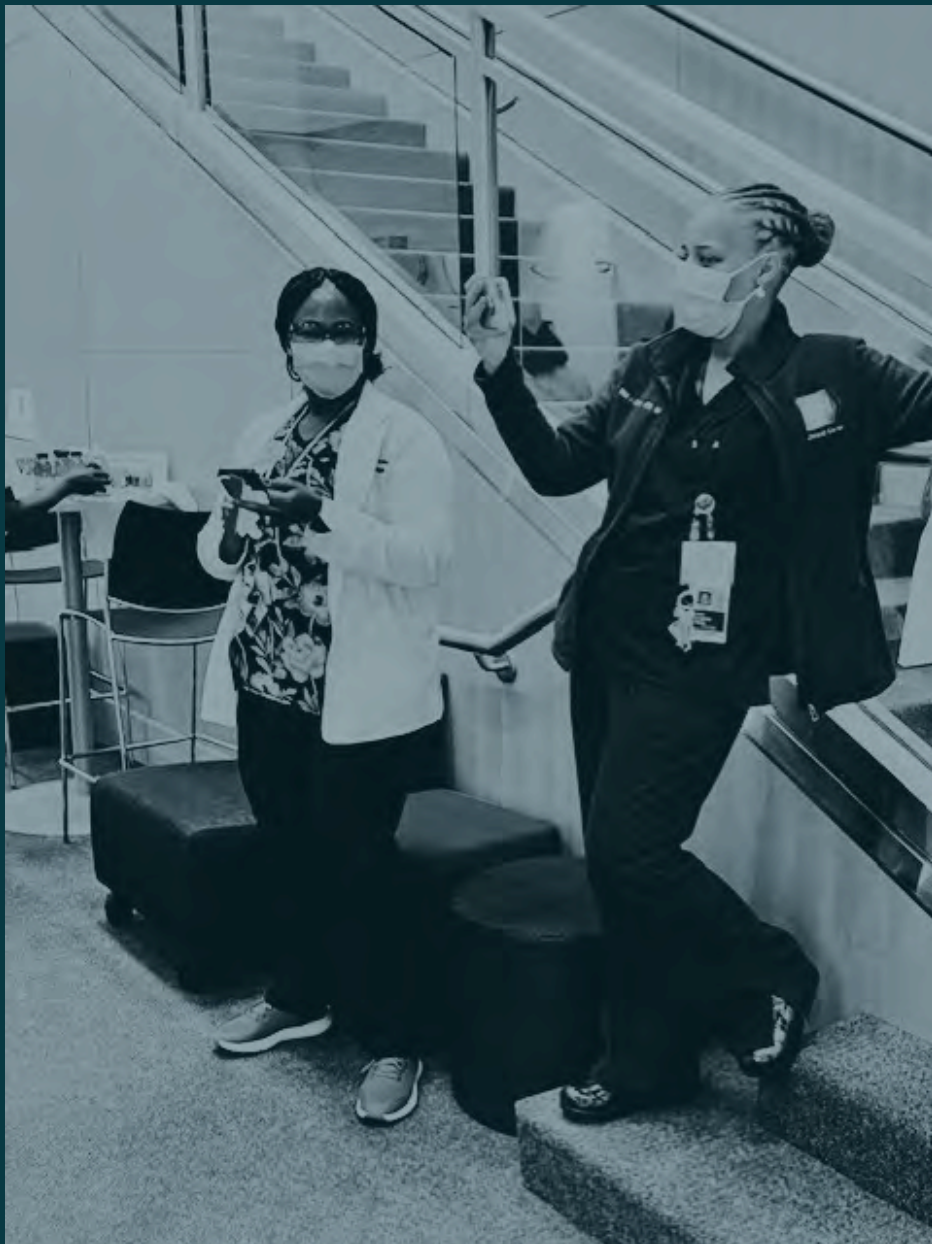
Iman Clinton, RN

Nursing Operations

Ray Nudo, RN



New Knowledge, Innovations, & Improvements



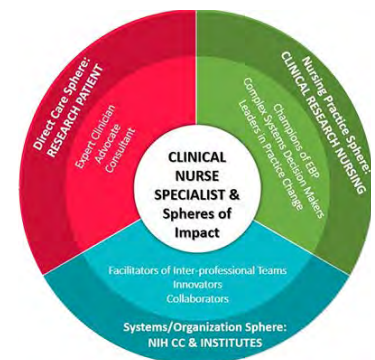
Clinical Nurse Specialists Promote EBP and Innovation

The Clinical Nurse Specialist (CNS) is an advanced practice registered nurse (APRN) with clinical specialty expertise for a population. A CNS practices in three spheres of impact: direct patient care, nurse/nursing practice, and at the organization/systems level. Activities in one sphere interact, impact, and enhance activities in the other spheres. The full impact of the role is demonstrated when the CNS functions in and across all three spheres. Therefore, the role fluctuates at any given time, depending on the needs of the healthcare system, patient care unit, patient/family, or community. Below are a few recent examples from the past year highlighting the practice of the NIH CNSs in each of the spheres of impact:

Clinical Practice Updates (CPU)

Changes or updates to products or clinical processes can happen quickly at the clinical center. These may result from new practice evidence, new research studies at the clinical center, or global impacts on supply availability. NIH Clinical Research Nurses (CRN) must receive timely information about changes and updates. To meet this, the NIH CC CNSs developed a Clinical Practice Update (CPU) document to delineate the information nurses need. These quick-to-read one-page documents provide all of the essential information about what is new or changed, including how to obtain needed supplies. Developing a CPU is streamlined and can be accomplished quickly to meet the demands of the changing nursing clinical practice.

A CPU does not replace a complete education, training, or competency assessment. Most of the current standards of practice or procedures support this. From the inception of the first CPU at the start of 2023, the CNS team developed 16 CPUs to communicate and guide the CRN's clinical practice. Recent CPUs include the iPort Advance Injection Port, CLABSI Prevention Updates, and Limb Restriction Assessment. CPUs are catalogued with other Nursing Practice documents on the Nursing Intranet under the topic heading, Clinical Practice Updates. The CNS group welcomes your ideas for a Clinical Practice Update and can be easily consulted by emailing us at CC-Nurs CNS Forum.



The NIH Clinical Center Nursing Department (CCND) EBP Program

The NIH CCND Clinical Nurse Specialists (CNS), Drs. Eugena (Gena) Bergvall and Patricia (Trish) Todd have advanced the NIH CCND practice and mission support by developing the first Evidence-Based Practice (EBP) Program and Fellowship, under the guidance of Service Chief, Dr. Deborah Kolakowski. Their visionary leadership established the EBP Fellowship and successfully coordinated the inaugural 2024 CCND Poster Day. This event displayed 25 innovative posters by clinical research nurses and nurse scientists, primarily mentored by Gena and Trish. Highlighting their commitment to advancing nursing practice and CCND mission, through EBP methodologies, the event featured Dr. Bernadette Melnyk, a pioneer in EBP, as the keynote speaker during the 2024 Nurses Week Awards Ceremony.

In their ongoing dedication to cultivating an EBP culture, Gena and Trish co-facilitated a significant two-day EBP leadership workshop, attended by over 60 nurses from CCND and the Clinical Center (CC)—this workshop, led by Drs. Lynn Gallagher-Ford and Karey Dufur from the Ohio State University Fuld National Institute for EBP, aimed to deepen the integration of EBP within the CC. Beyond these events, their mentorship extends to EBP consults with staff and collaborative efforts with their CNS colleagues, Drs. Steve Risch, Leslie Smith, and Susan Smith. Their dedication has guided direct care clinical research nurses in adopting and implementing EBP methodologies over the past 9-12 months to promote clinical inquiry to improve outcomes. Gena and Trish's personalized mentorship infrastructure not only enhances professional development but also bridges the gap between leadership and clinical care, leveraging their extensive clinical expertise to meet the unique needs of each CRN.





EBP Fellowship Cohort 3

Purpose:

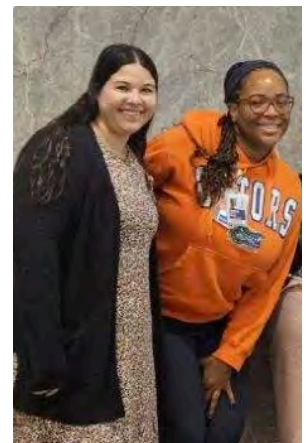
- The EBP Fellowship aims to assist clinical research direct care nurses in solving practice issues through a fellowship program. The program will blend CRN's clinical knowledge with research utilization and the process of making EBP practice changes. This program serves as a bridge to research translation through the development of an EBP culture.

EBP Fellowship Goals:

- Mentor the EBP nurse fellows through an EBP initiative using the seven steps of the EBP process.
- Provide EBP nurse fellows with advanced knowledge of evidence-based practice theory and application within a clinical research setting.
- Provide EBP nurse fellows with the necessary skills in research utilization and problem identification to promote the adoption of evidence-based practice.
- Foster professional and scholarly growth and development of clinical research nurses.

EBP Fellows:

Karina Bridges, RN	Enhancing Patient Experience Through Integration of Aromatherapy in the Post Anesthesia Care Unit
Taylor Geitschier, RN	Transforming Nursing Education and Training Through Virtual Reality: Managing Complex Patients and Navigating Challenging Caregiver Dynamics
Mackenzie Hassanzadeh, RN	Development of Coordinated Teaching Approach for Complex Patient Learning in Allogenic Hematopoietic Stem Cell Transplantation Recipients



The Outpatient and Take-Home Diabetes Discharge Supplies, Care Delivery and Education

The diabetes discharge planning process at the CC was streamlined through a collaborative effort, spearheaded by the Diabetes Care APRN Clinical, Endocrine, and Diabetic Education Specialists, Dr. Assumpta Ude and Sue-Ann Arboine. This initiative addressed a critical clinical gap in care coordination, as no central management process ensured the timely provision of essential supplies for patients with diabetes or drug-induced hyperglycemia at discharge. By involving a multidisciplinary team, including representatives from the central hospital supply, pharmacy, and diabetes clinic, the initiative developed and tested a new system for Clinical Research Nurses (CRN) to order and distribute take-home diabetes supplies from any location within the Clinical Center (CC).

This effort created a one-page Clinical Practice Update (CPU), providing nurses with clear instructions for obtaining discharge supplies, enhancing their confidence and ability to access necessary items through the Visual Supply Catalogue. Initially, tested and launched in select units and an outpatient clinic, the pilot program also included an online survey for feedback, where nurses reported satisfaction with the ease and timeliness of supply delivery. Incidental findings alerted the CC to future opportunities to address supply shortage challenges and further process improvements. Overall, this initiative has significantly improved the effectiveness of the diabetes discharge processes, ensuring patients receive effective blood glucose management post-discharge.

VS30 Implementation

Phase 2 of the VS30 implementation was successfully completed in November 2024, marking a significant advancement in patient monitoring capabilities. This achievement was made possible through the dedicated collaboration between Clinical Center Nursing, BioMed, and DCRI, demonstrating a shared commitment to innovation in healthcare technology. As part of this phase, 170 new vital signs devices were deployed across outpatient clinics and the INW pediatrics unit, expanding access to real-time patient data and improving clinical efficiency. By leveraging advanced technology and integrating with the electronic medical record, the initiative has optimized workload management, reducing manual data entry and enhancing accuracy in patient assessments. The success of this project highlights the power of interdisciplinary teamwork in driving operational improvements, ultimately leading to better patient care, increased workflow efficiency, and a more technologically integrated clinical environment.



Nursing Station Refresh Project

The nursing station refresh project continued on the third floor throughout 2024 and is set for completion by the spring of 2025. This initiative focuses on upgrading nursing stations to create a more organized and functional workspace, incorporating additional storage and optimizing workflow to support nursing staff in delivering high-quality care. A well-designed environment minimizes delays, streamlines processes, and enables nurses to focus more effectively on patient needs. These improvements play a crucial role in enhancing patient care, safety, and operational efficiency. The renovation marks a significant milestone in improving both workplace effectiveness and patient outcomes. The new environment, designed for greater functionality, features an organized layout with seamless, solid surfaces that are easily disinfected. Additionally, the refreshed and modern space fosters a positive work atmosphere, reducing stress and boosting morale among healthcare staff. Ultimately, these enhancements contribute to a higher standard of patient care, increased productivity, and a more supportive and efficient healthcare setting. We look forward to continuing the project on the 5th and 7th floors in 2025.



Radiation Safety for CCND Nurses

The Division of Radiation Safety (DRS) and Radiation Safety Committee (RSC), in alignment with United States Nuclear Regulatory Commission (NRC) guidelines, have spearheaded a comprehensive initiative to enhance the education and training framework at the NIH CCND CRN. This program is meticulously designed to equip clinical and administrative staff with evidence-based knowledge for safely handling patients undergoing treatments with ionizing radioactive isotopes. Drs. Iman Clinton and Assumpta Ude, leading the 5NW clinical and administrative teams, worked closely with the DRS Health Physicist (HP) and RSC designee to integrate rigorous training protocols to minimize radiation exposure for patients and healthcare providers.

The educational structure implemented includes a multifaceted approach to training, encompassing mandatory annual radiation safety courses required for various clinical roles, including the NIH Fire Department and Intensive Care Unit Nurses. The curriculum features a didactic course supplemented by a 45-minute online video, a detailed presentation, and a subsequent radiation safety test. Practical training components include hands-on demonstrations on using Geiger meters and simulators and comprehensive guidance on proper protective procedures, such as donning and doffing of safety gear, self-monitoring, and emergency response techniques. This initiative also led to the revision of critical resources for managing patients treated with radioactive isotopes, notably updating the NIH CCND and M24-2 Management policies, enhancing visual safety communications, and improving patient education materials available on the nursing intranet. These materials provide crucial information in English and Spanish, ensuring that patients and their families are well-informed post-discharge.

CC Nursing Scholarly Activities 2024

Ariguzo, D., Glenn, D., & Bergvall E. (2024 May). Implementation of a self-releasing seatbelt tool for reducing the rate of unassisted falls on an inpatient neurology/neurosurgery patient care unit [Poster Presentation]. National Institutes of Health (NIH) Clinical Center Nursing Department (CCND) 2024 Nurses' Week Poster Day.

Bergvall, E. (2024, March 17 -19). Seizure semiology: What your patient is telling you [Podium Presentation]. 2024 AANN Neuroscience Nursing Annual Conference. Salt Lake City, UT.

Bergvall, E. (2024, September 17). Hot topics in seizure management among hospitalized patients [Invited Speaker]. 2024 CNS Week Maryland Association CNS Annual Chapter Dinner, Columbia, MD.

Bergvall, E., Camp, J., Jiang, Y., & Moss, P. (2024, March 10-13). Enhancing Usability for the CNS Personas: A usability design methodology to the NACNS website evaluation [Podium Presentation]. 2024 NACNS Annual Conference. New Orleans, LA.

Bergvall, E., Jabara, J., & Gomez-Mejia, M. (2024, May 1). Transforming nursing education through simulation: Past, present, and future [Podium Presentation]. NIH Clinical Center Grand Rounds, Bethesda, MD.

Bergvall, E., Plueger, M., & Dewar, S. (2024, January 19). Do we need guidelines for managing peri-ictal complicated behavior? Paving the way to a Delphi study [Podium Presentation]. 2024 AANN Virtual International Neuroscience Nursing Research Symposium (INNRS), Virtual.

Bergvall, E. & Stephens, C. (2024, March 10-13). Dynamic Duo: The CNS and Informatics Nurse Specialist bridging the technology gap [Podium Presentation]. 2024 NACNS Annual Conference. New Orleans, LA.
Bergvall, E., Von Gaudecker, J. R., & Walter, S. (in press). Epilepsy. Chicago, American Association of Neuroscience Nursing.

Bernaldez, P., Myers, M., Clinton, I., & Ude, A.O. (2024, May 8). Care for a patient with paraplegia requiring radiation isolation [Poster Presentation]. National Institutes of Health (NIH) Clinical Center Nursing Department (CCND) 2024 Nurses' Week Poster Day.

Chizoba, A. F., Ude A.O., Oparaugo, C., Olasunkanmi F., Chidera Okika, C., Dikas, L.F., Adogun, P., & Ukachukwu, L. (2024). Effect of healthy aging clinic and health insurance program on accessibility and affordability of health care among older persons in Nigeria communities [Accepted for the 2025 Global Network of Public Health Nursing Conference]. Calgary, Canada.

Farmer, N., Maki, K.A., Barb, J. J., Jones, K.K., Yang, L., Baumer, Y., Powell-Wiley, T.M., & Wallen, G.R. (In press). The association between geographic social vulnerability and microbiome diversity: An analysis of the human microbiome project (HMP1). mSystems.

CC Nursing Scholarly Activities 2024

Farmer, N., Tuason, R., Middleton, K. R., Ude, A., Tataw-Ayuketah, G., Flynn, S., & Wallen, G. R. (2024). Assessing acceptability: The role of understanding participant, neighborhood, and community contextual factors in designing a community-tailored cooking intervention. *Nutrients*, 16(3), 463.

Fatusin, F., Yang, L., Wallen, G., & Kearns-Todd, P. (2024, May 8). A culture of trust and support is needed: Supporting uninterrupted meal breaks [Poster Presentation]. National Institutes of Health (NIH) Clinical Center Nursing Department (CCND) 2024 Nurses' Week Poster Day.

Fatusin, F., Yang, L., Wallen, G., & Kearns-Todd, P. (2024, October 18-20). A culture of trust and support is needed: Supporting uninterrupted meal breaks [Poster Presentation]. 2024 IACRN Conference, Alexandria, VA.

Fontan, E. & Bergvall, E. (2024, April 28 – May 1). Personalizing and creating a culture of wellness with the AACNs Healthy Work Environmental Framework [Poster Presentation]. 2024 ANCC Transition to Practice Symposium, New Orleans, LA.

Fontan, E. & Bergvall, E. (2024, May 8). Personalizing and creating a culture of wellness with the AACNs Healthy Work Environmental Framework [Poster Presentation]. 2024 NIH CCND EBP Research Innovation Poster Day, Bethesda, MD.

Gerrard, C., Owens, M., Yang, L., Justement, B., & Bergvall, E. (2024, July 18-19) Access to mental resources via patient health portal [Podium Presentation]. Sumer Institute in Nursing Informatics (SINI), Baltimore, MD.

Gordon, T., Lee, L. J., Tchangalova, N., & Brooks, A. T. (in press). Psychosocial protective interventions for African American female breast cancer survivors: A systematic integrative review. *Supportive Care in Cancer*.

Kauflin, K., Smith, S. & Plati, A. (2024, April 24-29). The impact of Kamishibai Cards on nurse knowledge and adherence to a CLABSI prevention bundle. ONS 2024. Washington, DC.

Kearns-Todd, P. & Bergvall, E. (2024, March 10-13). Achieving the construct and infrastructure build of evidence-based practice within a research healthcare organization [Podium Presentation]. 2024 NACNS Annual Conference. New Orleans, LA.

Lee, L. J., Leslie, W., Ding, Y., & Ross, A. (in press). Professional quality of life, sleep disturbance, and health among nurses: A mediation analysis. *Nursing Open*.

Lee, L.J., Son, E.H., Farmer, N., Gerrard, C., Tuason, R.T., Yang, L., Kohn-Godbout, J., Nahm, E., Smith, L., Risch, S., & Wallen, G.R. (2024). Nature-based virtual reality (VR) intervention to manage stress in family caregivers of allogeneic hematopoietic stem cell transplant (HSCT) recipients: A two-phase pilot study protocol. *Frontiers in Psychology*. Doi:10.3389/fpsy.2024.1295097

CC Nursing Scholarly Activities 2024

- Maki, K. A., Goodyke, M., Rasmussen, K., & Bronas, U.G. (2024). An integrative literature review of heart rate variability measures to determine autonomic nervous system responsiveness using pharmacological manipulation. *J Cardiovasc Nurs* 39(1): 58-78.
- Matlock, A.M. (2024). AACN's Strategic plan, Part 3: Shaping care, leading through expertise and advocacy the transformation of health to people and communities. *Viewpoint*. December.
- Oko-Odoi, A., Bergvall, E., Kolakowski, D., & Allison-Aipa, T. (In press). Implementing a fall prevention protocol to reduce inpatient oncology fall rates. *Clinical Journal of Oncology Nursing*.
- Redmond, E., Hood, C., & Risch, S. (2024, May 1). Improving oncology outpatient transfer of care communication: Implementation of the I-PASS tool. Nurse Practitioner Association of Maryland Spring Membership and Continuing Education Meeting.
- Redmond, E., Hood, C., & Risch, S. (2024, May 8). Improving oncology outpatient transfer of care communication: Implementation of the I-PASS tool. [Poster Presentation]. 2024 NIH CCND EBP Research Innovation Poster Day, Bethesda, MD.
- Rousseau, R. (2024 May). Keeping them safe: Empowering nurse residents with de-escalation strategies. 2024 American Nurses Credentialing Center (ANCC) Transition to Practice Symposium.
- Rousseau, R., Houston, T., Woolery, M., & Nyabwari, A. (2024 May). Bridging the knowledge-practice gap in a pediatric inpatient clinical research unit with multimodality simulation. National Institutes of Health (NIH) Clinical Center Nursing Department (CCND) 2024 Nurses' Week Poster Day.
- Rousseau, R., Shin, P., & Gillis, R. (2025 May). Take One! Engaging simulated patients to implement the Alcohol Use Disorders Identification Test-Consumption (AUDIT-C). National Institutes of Health (NIH) Clinical Center Nursing Department (CCND) 2024 Nurses' Week Poster Day.



CC Nursing Scholarly Activities 2024

Schrader, S. & Bergvall, E. (2024, March 17-19). Madd for mAbs: The expanding role of monoclonal antibodies in neuroscience nursing. [Poster Presentation]. 2024 AANN Neuroscience Nursing Annual Conference. Salt Lake City, UT.

Schrader, S. & Bergvall, E. (2024, May 8). Madd for mAbs: The expanding role of monoclonal antibodies in neuroscience nursing. [Poster Presentation]. 2024 NIH CCND EBP Research Innovation Poster Day, Bethesda, MD.

Smith, L. (2024). Oncology: Liquid malignancies (Lymphoma and Leukemia). University of Maryland Adult and Gerontology Nurse Practitioner/Clinical Nurse Specialist Doctorate of Nursing Program.

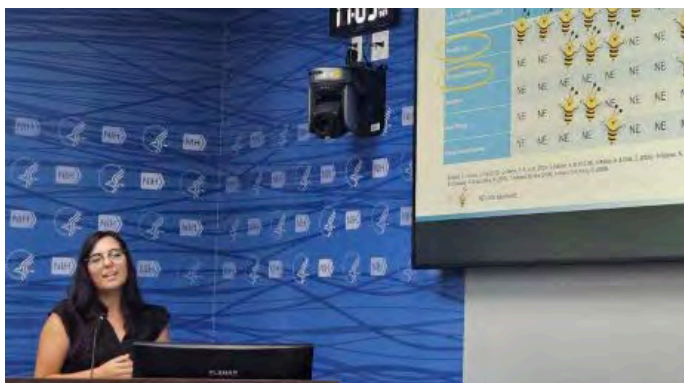
Smith, L., Mikula, M., Aaron, J., Michelin, A., & Thomas, A. (2024, April 24-29). Closing the lid on staff exposure to hazardous drugs and multi drug resistant organisms. 2024 Oncology Nursing Society Congress, Washington D.C.

Smith, L. & Smith, S. (2024). Hematological and immune disorders. In Makic, M.B. & Morata, L.T. Sole's Introduction to Critical Care Nursing (9th ed., pp. 451-490). Elsevier.

Start, R., Dellafave, R., Matlock, A.M., & Witwer, S. (2024) Revolutionizing the unsustainable: Propelling the science, practice and impact of the ambulatory nurse through meaningful value informed measurement. Nursing Economics. Sept/Oct.

Todd, P. & Bergvall, E. (2024 March 12). Achieving the construct and infrastructure build of evidence-based practice within a research healthcare organization. National Association of Clinical Nurse Specialists.

Ude, A.O., Oparaugo, C., & Chizoba, A. F. (2024). Unveiling healthcare workers' knowledge about ageism in Nigeria and the need for training next generation of caregivers [Abstract accepted for podium]. 2025 Global Network of Public Health Nursing, Calgary, Canada.





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