

Nursing Services Newsletter for Monroe Carell Jr. Children's Hospital at Vanderbilt

FALL 2024

"Paws" for Progress Research Study Demonstrates Positive Impact of

Research Study Demonstrates Positive Impact o Facility Dog Intervention

Serving Children 4 in Need

Celebrating 25 Surgical Mission Trips to Guatemala



Elevating 6 Frontline Voices

New CNO Initiates Daily Senior Leader Rounds



Responding to 🕝 Patient Feedback

Pediatric ED Transitions to Chronologically Numbered Rooms



Welcome to The Thread

A letter from our Chief Nursing Officer

Welcome to our first edition of *The Thread*. This newsletter is part of an ongoing effort to respond to one of the dominant themes that emerged in my "First 100-Day Assessment" conducted between March and June of 2023. I heard through staff storytelling and interviews that there were opportunities to have more regular connection, communication, and conversation with the CNO's office and with the Senior Leadership of the Nursing and Patient Care Services.

In December of 2023 members of my senior team launched a daily senior leader rounding practice in which we spend an hour every day engaging with local team members to connect on issues most important to you. We've expanded our membership in those daily rounds to include quality, operational, and physician leader partners over the spring and summer. Through these valuable conversations we have been given numerous opportunities to partner with you to improve your environments of care in large and small ways. Be it problem solving on a piece of equipment, to replacing a broken DAISY pin, to evolving the way we onboard and orient staff, your voices are elevating the things that matter most every day. I have been so grateful for your engagement and the candor you continue to offer us in these daily connection points.

The Thread serves to expand our daily conversation by offering a place where we can celebrate, across our diverse environments of care, the incredible work happening every day in Monroe Carell Jr. Children's Hospital at Vanderbilt. It's not enough to make sure you have access and connection to our formal leaders; I want you to also hear from the voices of informal leaders. Each of us, in our practice, can lead in critical ways, and it is my hope that this publication will serve to connect you meaningfully with individual leaders across our clinical care areas.

In this first edition you'll get to see some of our informal and formal leader stories. We'll introduce you to critical work led by our Facility Dog Program staff, patient experience improvement work led by our ED staff, staff led clinical improvement work in the space of unplanned extubations, and much more. You'll be introduced to team members advancing through the newly redesigned Vanderbilt Professional Advancement and Recognition of Excellence (VPARE) program, certified nurses, and Daisy and Credo winners.

Many of your stories are also showing up in our Magnet document, at national and regional conferences, in national publications, in internal poster galleries, in your VPARE narratives, and at our newly launched Monroe Carell Nursing Grand Rounds. It has been a joy to get to know you as clinicians, scientists, educators, and leaders, but most of all, as humans.

I hope you leave this inaugural issue of *The Thread* feeling as inspired by the stories of our remarkable Monroe Carell team as I have been collecting them. We have so many powerful stories to share, and it has been my joy to connect with many of you personally to learn from you and celebrate your remarkable impact on our communities.

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Gretchen K.D. McCullough, MSN, RN, NEA-BC *Chief Nursing Officer*





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Neonatal Services

Associate Nursing Officer Update

It is my honor to be selected to write for the inaugural issue of *The Thread* and represent Neonatal Services. I had the privilege of joining the Monroe Carell Jr. Children's Hospital at Vanderbilt team in January of 2024, relocating from Wisconsin. I was drawn to Vanderbilt due to the prestige associated with the name and the nationwide recognition of achievements. What I found here has surpassed my imagination, and I am grateful for the welcoming nature, the fast friendships, and the commitment to excellence I hoped to find here.

The excellence in Neonatal Services is evident in many different forms and the desire to be the best is apparent in the progression of our outcomes. The foundation of Neonatal Services is rooted in caring for premature infants. With the loss of Dr. Mildred Stahlman this year, we honor her legacy by reaching top quartile performance in the survival of inborn infants born between 22 and 29 weeks when benchmarked against like centers in the Vermont Oxford Network. Our "tiny baby team" is top notch and the improvement in survival is a testament to our commitment to this special population.

Additionally, we celebrate our improvement in the rate of central line associated blood stream infections (CLABSI) from 0.59 infections per thousand-line days to 0.47 infections per thousand-line days! We continue to appreciate an improvement in our unplanned extubation (UE) rate and as of September 2024 are applauding a rate of 0.74 per 100 ventilator days! The improvement in these two metrics is a testament to the multidisciplinary commitment to quality and the willingness of teams to focus on continuous improvement. The Vanderbilt University Hospital nursery space allows for the team to preserve the mom-baby dyad while providing the appropriate level of care needed for the infant. This collaboration has allowed us to appreciate improvement in our skin-to-skin rates during scheduled cesarean sections.

We have realized much success and have more work to do. Multidisciplinary task forces have been hard at work to address key areas of leadership, safety, communication, multidisciplinary team collaboration, and giving a voice to all roles to strengthen our culture. We will continue to focus on inclusivity in our care to optimize our family-centered care model. Finally, we look forward to strengthening our collaboration throughout Monroe Carell to further integrate Neonatal Services while maintaining and celebrating what makes us special.

In looking to the future, exciting things are on the horizon for Neonatal Services. As internal and external demands for our services have increased, we are excited to expand our footprint temporarily to the 12th floor with our final new home on the 14th floor. The additional beds in Monroe Carell, available in 2025, will elevate our capacity from 116 to 131 and will allow for the development of a specialized unit focused on technology dependent patients with chronic lung disease. Finally, our blooming Women's and Infants' partnership allows us to reimagine and strengthen the entirety of the perinatal care team to become top performing care providers. Personally, I feel blessed to have joined this team and am excited for what the future holds!

Take care,

Micol R Miring

Nicole Neisinger, MSN, RN Associate Nursing Officer, Neonatal Services





What I found here has surpassed my imagination and I am grateful for the welcoming nature, the fast friendships, and the commitment to excellence I hoped to find here.

"Paws" for Progress

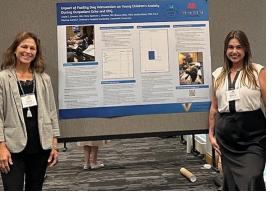
Research Study Demonstrates Positive Impact of Facility Dog Intervention

hen nursing leader Michelle Robertson, MSN, RN, CNML connected with Leslie Grissim, MA, CCLS, handler for Squid, facility dog at Monroe Carell Jr. Children's Hospital at Vanderbilt, her idea was small: trialing a once-a-week pilot program serving pediatric cardiology clinic patients undergoing Echo and EKG procedures. It wasn't long before everyone recognized the potential for this program to turn into something much larger! Partnering with Senior Director of Nursing Professional Practice Patti Runyan, DNP, MBA, RN, NEA-BC, EBP-C, and her colleague, Jessika Boles, PhD, CCLS, the team designed a quasi-experimental research study assessing the relationship between young children's anxiety and facility dog intervention during non-sedated Echo and EKG procedures. Nurses Spencer Shreeve, BSN, RN, Briana Jeffries, BSN, RN, CPN, and Mel Firebaugh, BSN, RN, took active roles in participant recruitment and data collection for this study.

Interestingly, their research showed a statistically significant relationship between facility dog intervention and decreased anxiety in young children during ECHO and EKG — even in children with a history of multiple prior procedures. On Sept. 13, Leslie and Spencer were invited to present these results at the Cardiac Neurodevelopmental Outcomes Collaborative in St. Louis, Missouri. – *by Jessika Boles*

DOT 5 Cardiology Clinic patient Harper Rhody visit with Leslie Grissim, Nicole Van Dermeir, Rachel Arnold, and Squid in the Echo room.





Leslie Grissim and Spencer Shreeve present their facility dog research findings at the Cardiac Neurodevelopmental Outcomes Collaborative in St. Louis, Missouri.



Harper Rhody shows her appreciation to Squid for helping decrease anxiety during her visit.

CERTIFICATION SPOTLIGHT

Exam Prep Advice from a Newly Certified Pediatric Nurse

Pediatric Medicine Acute Care (PMAC) nurse, Regan Comperry, BSN, RN, CPN, earned her Certified Pediatric Nurse (CPN) credential in July 2024. Originally from the Nashville area, Regan joined Monroe Carell in February 2020 at the start of the COVID pandemic. When asked why she pursued CPN certification, Regan answered, "it validates your competency of providing care as a pediatric nurse" and provides "an extra layer of comfort for families when they see you are certified." PMAC recognizes its certified nurses by displaying their names and pictures for all to see. When asked how she would recommend preparing for the CPN exam, Regan suggested:

1.Take a review course: you can register via Learning Exchange for courses offered twice per year.

2.Complete practice questions, such as those found in the Nurse Builders question book

3.Review unfamiliar topics that you do not frequently see at work.

4.Give yourself a deadline to test;
this will provide motivation to study and gives you a measurable goal.
by Beezer Morgan and Shelly Bledsoe



Regan Comperry, BSN, RN, CPN, a Pediatric Medicine Acute Care nurse, earned her Certified Pediatric Nursing credential in July.



PACU nurse Olivia Bonnell interacts with a Guatemalan child who received surgical care at the Moore Surgery Center in Guatemala City.

Providing Surgical Care to Guatemalan Children

onroe Carell Jr. Children's Hospital at Vanderbilt has been sponsoring trips to Guatemala to provide surgical care to pediatric patients since 2005. Access to health care is a serious issue for the citizens of Guatemala. To put this in perspective, the United States reports 1.8-4.2 hospital beds for every 1,000 people compared to Guatemala's 0.6 beds. Poverty and geographical distance also pose barriers to care as nearly 80% of physicians are located in the country's capital of Guatemala City.

Members of the team that recently returned from service in Guatemala shared some of their experiences with us.

Certified Scrub Technologist, Kortney Hudson, remarked that she was moved by the efficiency of the Guatemalan team and "even with limited staff and supplies, they put patient safety first while still providing timely care." She felt that this was a great reminder of the importance of her role.

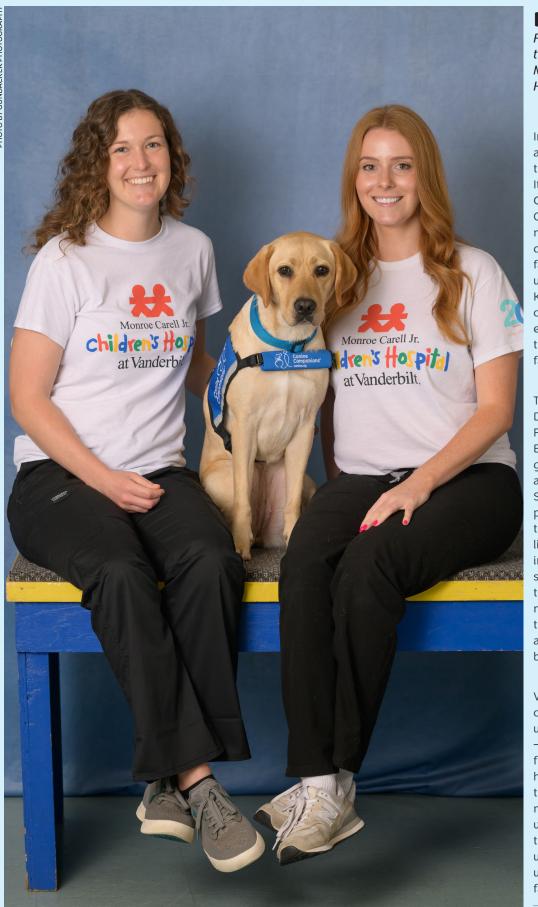
Circulating Registered Nurse 3, Melinda Garber, BSN, RN, CNOR, shared that the Guatemala team's powerful mission of "patient first" permeated every situation in her second surgical trip to Guatemala.

Olivia Bonnell, BSN, RN, CPN, Registered Nurse 3 in the Post Anesthesia Care Unit, reflected on the multidisciplinary team's ability to overcome language barriers through bilingual volunteers. "This enabled the teams to interact and learn from one another as well as assist with patient and family education," she said.

Kortney, Melinda, and Olivia were stationed at the Moore Center in Guatemala City where they assisted with surgeries, performed screenings, and helped to train facility staff. The Moore Center is funded by the Shalom Foundation and Vanderbilt University Medical Center and hosts three Operating Rooms, one Post Anesthesia Care Room, and 21 patient beds. All three ladies shared that they would return to Guatemala in a heartbeat to serve these patients and their families! – *by Ericka Simon and Ellis Daugherty*



A surgical team from Monroe Carell Jr. Children's Hospital at Vanderbilt carried out the hospital's 25th medical mission trip to Guatemala in September to provide much-needed health care to children in Guatemala City.



Double the Fun:

Four New Paws Join the Facility Dog Team at Monroe Carell Jr. Children's Hospital at Vanderbilt

In August, Kaylor Glassman and Meredith George received the call we had long awaited. It was time to head to Canine Companions training camp in Orlando, Florida to meet our next Monroe Carell Jr. Children's Hospital at Vanderbilt facility dog, Velour! After two weeks of intensive training, Kaylor, Meredith, and Velour officially graduated and headed home to Nashville to begin their work with children and families.

Thanks to generous gifts from Dunkin' Joy in Childhood Foundation, the Teddy Bear Ball hosted by Kacey Musgraves, and Amazon, Velour and her handlers have joined Squid and his handlers in providing animal-assisted interventions across the hospital like ambulation and mobility interventions, procedural support, and coping support to promote development and recovery. Staff can consult the facility dog team in eStar, and consults will be prioritized based on acuity of need.

Velour is a 51 pound, 2-yearold female labrador retriever who – according to Kaylor – is also part social butterfly! Velour loves to play and has boundless energy! Over the next several weeks, you may notice Velour and Kaylor visiting your work area as they acclimate to their new workplace home. They cannot wait to serve our children and families alongside you! – by Jessika Boles



Gretchen McCullough and Kara Powell, BSN, RN, CPN, PSTAM RN3, review supply room storage during Senior Leader Rounds.

Daily Senior Leader Rounds Elevates Frontline Voices

reated and initiated after Chief Nursing Officer Gretchen McCullough's "First 100-Day Assessment" here at Monroe Carell Jr. Children's Hospital at Vanderbilt, Senior Leader Rounds have become an integral part of our hospital culture and daily routines. These rounds, under Gretchen's leadership, have expanded to involve an interdisciplinary team, including members of the Nurse Administrative Board, Quality and Safety leaders, Operations leaders, and Physician partners, spending an hour in direct conversation with the people doing the work. Daily rounds allow staff to voice what is going well, highlight areas needing attention, and discuss how they can be supported in delivering safe and effective patient-and-family-centered care.

To support these rounds, Gretchen, has worked diligently to bridge gaps existing between leaders and staff. She intentionally uses therapeutic silence and active listening to foster meaningful dialogue. By approaching staff as people first and clinicians second, she has shifted the culture of rounds to one of openness and shared understanding!

Gretchen emphasizes that the impact of Senior Leader Rounds on nursing practice range from practical solutions — such as repairing a broken monitor or providing additional feeding pumps — to broader changes such as increasing the number of operating rooms or restructuring staff benefits. Additionally, many quality and safety initiatives stem directly from staff input, who identify gaps in care and anticipate patient safety needs. Gretchen notes that many tactics in the nursing strategic plan are influenced by these bedside conversations, affecting staff and overall hospital operations.

A recent success story from rounds involved increasing resources for Emergency Department nurses who are caring for behavioral health patients. Floor nurses raised concerns about the challenges of finding and securing outpatient placements for these children and adolescents. After concerns were shared with advocacy groups at the state level, Monroe Carell received a large disbursement of funds for behavioral health resources, including discharge planners and assessment specialists, that better support nurses in the management of patient care. This is just one story that highlights the tangible benefits of these daily interactions and conversations.

Senior Leader Rounds are more than just an hour of people's time. Gretchen notes that Senior Leader Rounds are her favorite part of the day because of the chance to connect with nurses at the bedside. Daily conversations create room to make meaningful changes in the lives of those we serve while attending to the needs of the ones we serve alongside. As Monroe Carell continues to grow, Senior Leader Rounds will remain vital to our success in both patient care and staff engagement. -by Lia Herrera

Patient and Family Feedback Prompts Room Numbering Update

f you have spent time in the Pediatric Emergency Department (PED), you know it can be busy, sometimes expanding to hallway beds during peak illness seasons! Since the opening of our hospital in 2004, the rooms in the PED have been designated as Critical Care, Fast Track, Urgent Care, Trauma and Observation. Like many other things in our growing facility, it became apparent that the room designations and numbering system needed to be adapted to better meet our needs.

"Our patient census can be high," explains Bri Ewin, MSN, APRN, FNP-C, Manager of the Pediatric Emergency Department, "and we will open beds and put patients where we can, as staffing allows, to be able to care for those patients. We have not been able to consistently follow the naming of the rooms for a long time, so it was time for it to be updated."

In addition to the realities of dealing with a high census, perceptions of care, as well as wayfinding were also considerations for the update. Kate Copeland, MSN, RN, CPN, NEA-BC, Associate Nursing Officer, Emergency Services added, "The naming was confusing not just for families, but also for external referring physicians and rotating residents, because in the old numbering system, there were multiple rooms with numbers 1 through 8 within the department."

On July 9 room designations were removed and the PED tran-

sitioned to chronologically numbered rooms, 1 through 42. Renumbering a whole department was no small task; this change required updates within eSTAR, the Phillips monitors, Mobile Heartbeat, and the Get Well Network to match the new numbering. Looking to the future, Bri is positive that the update will help to improve wayfinding and will also lessen misconceptions about level of acuity and care being delivered. "We don't want anyone to ever feel like they aren't receiving the level of care they need based on the naming of the areas in our department." – *by Lauran Sevier*



Tiffany Bledsoe, Taylor Kelly, Lindsey Davis, and Joshua Matthews show the new room numbering in the PED.

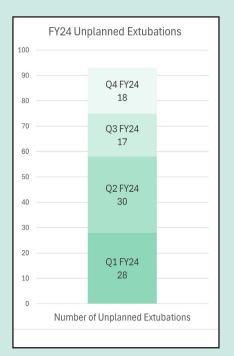
FY24 Unplanned Exubtation Reduction Goal Achieved

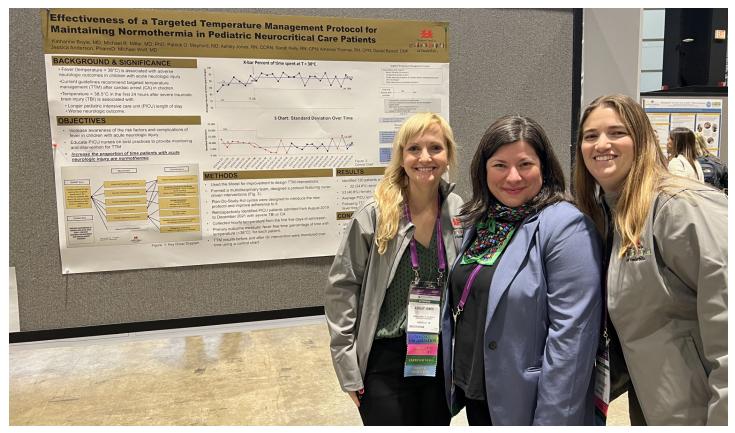
Quality Spotlight

Unplanned extubations can lead to a number of severe complications for intensive care patients, thus it is a high priority to reduce these occurrences at Monroe Carell Jr. Children's Hospital at Vanderbilt. As Amanda Mock MSN. RNC-NICU, EBP-C, Performance Management & Improvement (PM&I) Manager, Nursing Quality, explains, "One way we do this is through setting a pillar goal, or a target, threshold, and reach goal for the year. For FY24 the goal for Monroe Carell was to have ninety-three unplanned extubations or less." As you can see by the chart, the first two quarters of the fiscal year (FY) highlighted that we were not yet on track to meet this goal.

In March of 2024, a multidisciplinary, multi-unit workgroup was formed to share trends, improvement initiatives, successes (and failures) across all intensive care units (ICUs) at Monroe Carell. Led by Christa Sala MS, RRT-NPS, Pediatric Respiratory Care Department Director, along with Dustin Hipp, MD, MBA, FAAP, CMQ, and Amanda Mock as the Quality and Safety Lead, and includes nursing, physician, and respiratory therapy representatives from our pediatric intensive care unit (PICU), pediatric cardiac intensive care unit (PCICU), and neonatal intensive care unit (NICU).

Through the improvement efforts of individual ICU workgroups, we were able to end the FY exactly at our goal of 93 unplanned extubations. We are excited to see continued improvements with the addition of this new workgroup that brings together expertise from all ICUs. Together, we will continue striving to decrease the number of unplanned extubations at our hospital next year. – by Casie Smith





Ashley Jones and Amanda Thomas are congratulated by Gretchen McCullough while presenting their quality improvement poster at the 2023 ANCC National Magnet Conference in Chicago, Illinois.

PICU Nurse Ashley Jones Advances to RN4 with New VPARE Program

shley Jones, RN, CCRN, is a charge nurse in the pediatric intensive care unit. She has a bachelor's degree in Public Health from Middle Tennessee State University and became a nurse shortly after, thinking she would get some nursing experience and later become a NP. She enjoyed the bedside so much she has been working in the PICU for 14 years now. She recently advanced to an RN4 with the new Vanderbilt Professional Advancement and Recognition of Excellence (VPARE) program. Ashley's leaders helped her see how much she was already doing and encouraged her to advance. For Ashley, advancement was always about improving patient care.

Ashley believes that VUMC benefits when nurses advance as it puts their hard work on display at places like conferences, and it



It is important for nurses to know that you can change and improve things...and be recognized for the things you are doing! shows how nurses are making a difference for the benefit of their patients. Ashley presented her collaborative poster at the Neuro Critical Care Conference in San Antonio in October of 2022 and the 2023 ANCC National Magnet Conference in Chicago. It was entitled, "Effectiveness of a Targeted Temperature Management Protocol for Maintaining Normothermia in Pediatric Neurocritical Care Patients." The multidisciplinary team developed a protocol to keep patients normothermic to improve patient outcomes by reducing incidence of fevers. They tracked the patients' temperatures during the first five days of their ICU stay and saw that with the new protocols the percentage went up from 88% to 93%-time fever free.

One unexpected benefit Ashley experienced during the VPARE process was the mentoring and encouragement she received from her leaders. She highlighted the resources on the website and the availability of VPARE mentors as key improvements of the redesigned program.

Ashley urges others to advance noting how important it is for personal growth, improving patient care, and helping others grow. "It is important for nurses to know that you can change and improve things...and be recognized for the things you are doing!" – by Debbie Poloway





Jeremy Crawford, MMHC, BBA, BSN, RN, NE-BC, Director of Nursing Operations, was awarded the VUMC Five Pillar Leader Award at the September 2024 Leadership Assembly.



Keiryn Weiss, BSN, RN, CPN, Registered Nurse 2, Pediatric Emergency Department, received the DAISY award. From the nomination: "She [Keiryn] reminded me that amidst the clinical efficiency of a hospital, there's room for humanity and kindness."



Sarah Harmon, MSN, RN, CCRN, Manager, Neonatal and Pediatric Transport, was awarded the AAP Section of Transport Medicine Quality Improvement Project Award at the American Academic of Pediatrics National Conference and Exhibition in September 2024.



Stacey Williams, DNP, APRN, CPNP-AC, Inpatient Nurse Practitioner, Pediatric Cardiac Intensive Care Unit, was approved by the American College of Critical Care Medicine (ACCM) as a member of the Fellowship in the American College of Critical Care Medicine (FCCM).



The Pediatric Gene Therapy Workgroup was awarded the Elevate Team Award at the September 2024 Leadership Assembly for their work to provide access to new, life changing gene therapies for pediatric patients. This interprofessional team included nurses:

- Rachel Cox, BSN, RN, CPN, Patient Care Coordinator, DOT 5 Cardiology Clinic
- Ashley Frost, MSN, RN, CPN, Manager, DOT 6 Hematology/Oncology Clinic
- Michelle Robertson, MSN, RN, CNML, Manager, DOT 5 Cardiology Clinic
- **Candy Stefansic,** MSN, RN, CPON, NE-BC, Senior Director Nursing, Pediatric Ambulatory Specialty Care
- Holly Tyler, BSN, RN, Assistant Manager, DOT 6 Hematology/Oncology Clinic





Meagan Davis, MHA, BSN, RN, joined Monroe Carell Jr. Children's Hospital at Vanderbilt as Manager of the Pediatric Acute Care (PAC) unit.

RN4 Advancements: Lara Bauchiero, Lindsey Davis, Katharine Gillett, Rachel Griffith, Ashley Jones, Alexis Kehmna, Sarah Kelley, Carmen Magers, Allison Pitts, Caitlin Schwab, Jennifer Wilbanks, Kaylee Wilson **RN3 Advancements:** Kayla Adkins, Clara Armstrong, Alexandra Basom, Aubrey Baxter, Chelsea Beardsley, Victoria Bell, Rebecca Bilodeau, Olivia Bonnell, Annabeth Breeden, Meredith Caldwell, Elizabeth Cravens, Allison Dodson, Brienna Emmer, Melinda Garber, Emily Gross, Madison Hodges, Josee Hodges, Marcie Klemas, Brooke Kuluz, Leigha Lobkovich, Maggie McConnell, Elizabeth Mockmore, Alyssa Orlando, Anna Parks, Snehal Patel, Delaney Polk, Taylor Roach, Alexa Scheppler, Savannah Shaw, Erin Shook, Maddie Stohler, Logan Youngblood



Sarah Beth Harmon, BSN, RN, has been named Assistant Nurse Manager for the Pediatric Emergency Department.

LPN3 Advancements: Brittany Darnell, Kimberlyn Fender



Grissim, Leslie: Shreeve, Spencer, & Boles, Jessika (2024, September 13). Impact of Facility Dog Intervention on Young Children's Anxiety During Outpatient ECHO and EKG [Poster presentation]. Cardiac Neurodevelopmental Outcomes Collaborative, St. Louis, MO. Harmon, Sarah (2024, September 27 -October 1) Improved Morbidity and Mortality of Outborn VLBW Infants Transported [Conference session]. American Academy of Pediatrics National Conference and Exhibition, Orlando, FL. Wang, Chen Chia: Gupta, Ashwin: **Stone, Michelle: Milovancev, Mon ica: Townsend, Kelsie:** Zhao, Shilin: **Greeno, Amber.** (2024). A Protocol Driven Approach to Reduce Lengths of Stay for Pediatric Blunt Liver and Spleen Injury Patients. Journal of Trauma and Acute Care Surgery, 97(3): p 371-378, September 2024. | DOI: 10.1097/ TA.000000000004259



Chief Nursing Officer Monroe Carell Jr. Children's Hospital at Vanderbilt Gretchen McCullough, MSN, RN, NEA-BC

Editorial Advisors

Christina Echegaray Ashley Ried, MMHC, BSN, RN, CPPS, NE-BC

> **Content Manager** Shelly Bledsoe, MSN, RN, NE-BC

> > Editors

Jessika Boles, PhD, CCLS Ashley Ried, MMHC, BSN, RN, CPPS, NE-BC Casie Smith, BS, RRT-NPS

Photography

Christy Crockett Gundacker Photography Donn Jones The Moore Surgery Center Elizabeth (Beezer) Morgan, BSN, RN, CPN Ashley Ried, MMHC, BSN, RN, CPPS, NE-BC Patti Runyan, DNP, MBA, RN, NEA-BC, EBP-C Erin O. Smith Susan Urmy **Design and Art Direction** Diana Duren

Editorial Board Members

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A Pediatric Medicine and Acute Care (PMAC) patient expresses their gratitude to Monroe Carell staff via their artwork.