



UCSF Department of Nursing 2022-2023 Annual Report

UCSF Health



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Suresh Gunasekaran

President and CEO
UCSF Health

Nurses are essential to every part of UCSF Health.

Comprising almost one-third of UCSF Health’s employees, nurses work on each of our campuses, in San Francisco and the East Bay, and in our inpatient units, our clinics, perioperative areas and beyond. They often are the first and last people our patients and families see when seeking care. Nurses truly are the ambassadors of our health system.



Their compassion and expertise are primary reasons so many patients choose to be seen at UCSF Health. And their courage and selfless actions during the pandemic to help others—not just here but across the country—are legendary.

While UCSF nurses’ most visible role may be patient care providers, they also are faculty, students, researchers and educators. They determine health policy, clinical operations, and health system strategy. They advocate for and live our PRIDE Values (Professionalism, Respect, Integrity, Diversity and Excellence) and our commitment to diversity, equity and inclusion—not just for our patients and families, but for their colleagues and the community.

UCSF nurses’ dedication to their profession also resulted in UCSF Medical Center and UCSF Benioff Children’s Hospital San Francisco earning the prestigious Magnet designation for excellence in nursing by the American Nurses Credentialing Center for a third time. Only 10 percent of registered hospitals in the country earn Magnet status, and we are the only hospital in San Francisco to hold this distinction.

Not surprisingly, according to Gallup, nurses continue to garner the highest ethics rating from Americans among a diverse list of professions, a distinction they have held for more than two decades.

The nation’s top nurses work for our health system. I am exceptionally proud to be part of their team and grateful for their passion and dedication to the patients and families we are privileged to serve.

Madelyn (Maddy) M. Pearson, DNP, RN, NEA-BC

Chief Nursing Executive, Vice President of Patient Care Services
UCSF Health

Senior Associate Dean for Clinical Affairs
UCSF School of Nursing



I am delighted to extend my warmest greetings as I step into the role of the Chief Nursing Executive at UCSF Health. I am filled with enthusiasm and a deep sense of privilege to be part of this dedicated and compassionate health care community.

The stories in this annual report demonstrate the passion for patient care and the commitment to excellence that inspired me to join this team. Having served in similar roles at some of our country’s leading health care systems in Boston and New York, I pursued this position because of the way the teams at UCSF Health continually elevate health care. I look forward to collaborating with each of you to continue achieving new heights in patient satisfaction, team engagement/wellbeing, quality of care, financial strength, diversity, and professional development.

As we embark on this journey together, we will build a vision to foster an environment of collaboration, innovation, and continuous improvement. I believe that by working collaboratively, we can transform care through our expert clinical and leadership teams, build upon the already thriving shared decision making, support our use of best practice and generation of evidence, and empower our nursing and health care teams to reach their fullest potential.

Your dedication to providing exceptional patient care has already made UCSF Health a beacon of hope and healing in our community, across the country, and globally. I am confident that, together, we will build on this foundation and further distinguish ourselves as an institution that sets the standard for nursing and clinical excellence.

I look forward to meeting each of you personally, hearing your insights, and working collaboratively to achieve our shared goals. Please feel free to reach out to me with your thoughts, ideas, and feedback. Our success is a collective effort, and I am excited to be part of this incredible team.

Here’s to a future filled with growth, success, and the unwavering commitment to providing exceptional care to our patients and families.

Judie Boehmer, MN, RN, NEA-BC, FABC

Vice President, Chief Nursing Officer
UCSF Benioff Children’s Hospitals

Clinical Associate
Department of Family Health Care Nursing
UCSF School of Nursing

If I were to choose one word to summarize my feelings about the last two years, it would be gratitude.

I have gratitude for the opportunity to join an organization like UCSF Health that truly embodies its mission and values. Gratitude for our communities that continually entrust us with their care. And gratitude for our exceptional nurses who have been through so much since 2020, yet through it all have maintained an unwavering dedication to excellence.



As Chief Nursing Officer for UCSF Benioff Children’s Hospitals (BCH), I am honored to witness daily acts of heroism from our pediatric nursing teams in Oakland and San Francisco. Their expertise and compassion know no bounds, and their commitment to keep learning from each other and striving to do better sets us apart as a provider of choice.

Pediatric nurses do so much more than provide expert-level care. Because they understand that you can’t take a one-size-fits-all approach to caring for kids, our BCH nurses work hard to normalize the hospital environment, making it feel like a home away from home through individualized care plans for each child and their loved ones.

Our nurses also lead the charge in ensuring our patients stay safe. Thanks to their efforts, we saw a significant decrease in harms over the past year at both BCH Oakland and BCH San Francisco. These achievements paved the way for our San Francisco hospital’s prestigious Magnet designation, as well as our Oakland hospital earning a top 12 national ranking in quality and safety from The Leapfrog Group.

As leaders in every sense of the word, our nurses also make significant contributions to the nursing profession at large. Whether it be through sharing their knowledge at national conferences or developing new initiatives to build a more equitable and diverse workforce, UCSF nurses show up time and again as empowered changemakers.

I want to recognize you, our nurses, for setting a new bar for excellence and changing so many lives for the better. Your work impacts generations, and for that we should all be grateful.

Arthur Dominguez Jr., DNP, MSN, RN, CENP

Vice President, Chief Nursing Officer
UCSF Medical Center Adult Services

Assistant Clinical Professor
Department of Community Health Systems
UCSF School of Nursing

I want to start off with a sincere THANK YOU and express my great respect and appreciation to you, our University of California, San Francisco nurses in Adult Services, Pediatrics, Ambulatory and Psychiatry, as well as advanced practice providers and nurse leaders. Across the continuum of care and in clinical care settings, our UCSF nurses deliver care each and every day that is a unique blend of compassion,

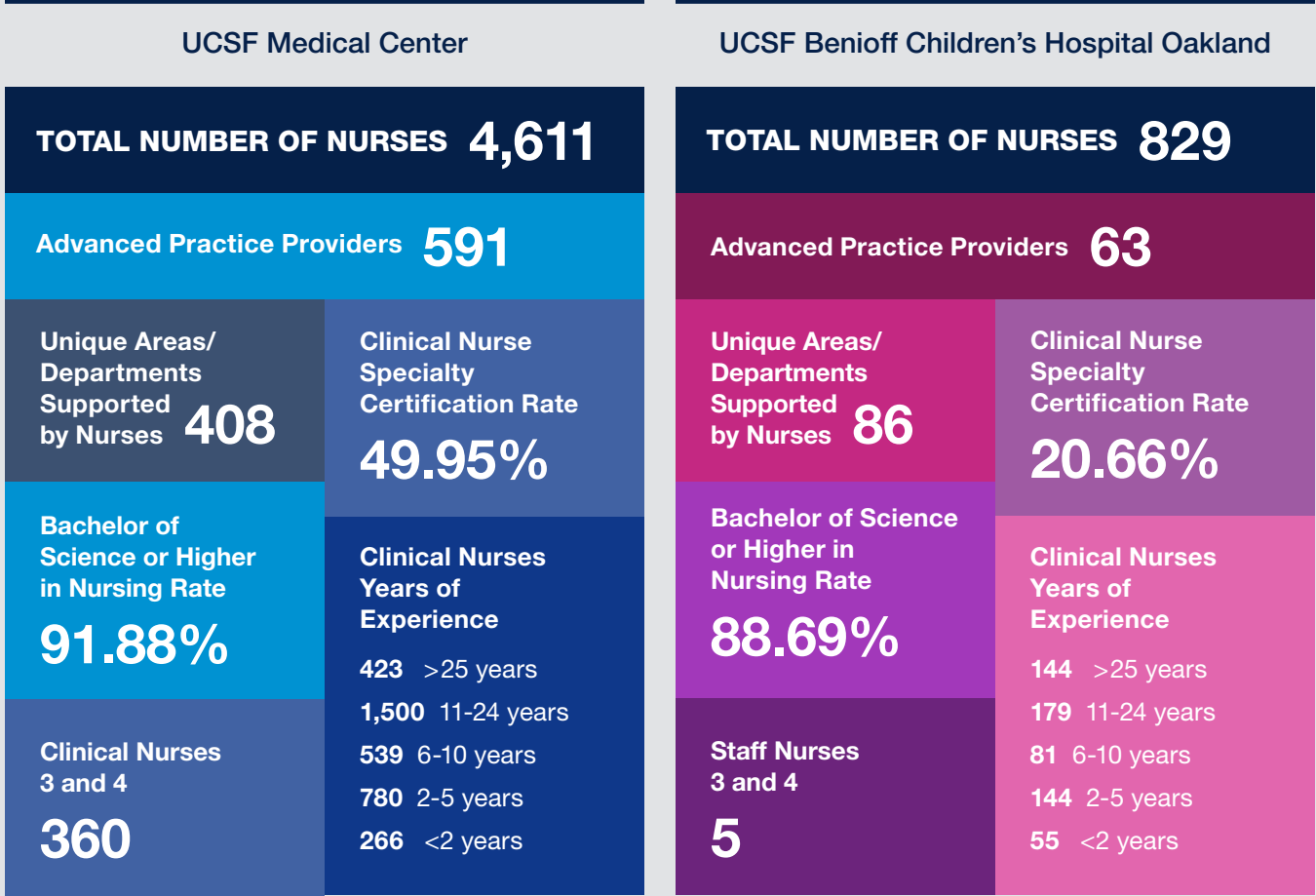


knowledge, skill set, expertise, dedication, commitment and heart. We recognize our nurses’ content expertise and provide an equitable voice for team members to be part of our shared decision-making model. This model ensures our nurses at all levels continue enhancing and advancing outcomes, research, innovation, safety, equity and quality of care for all.

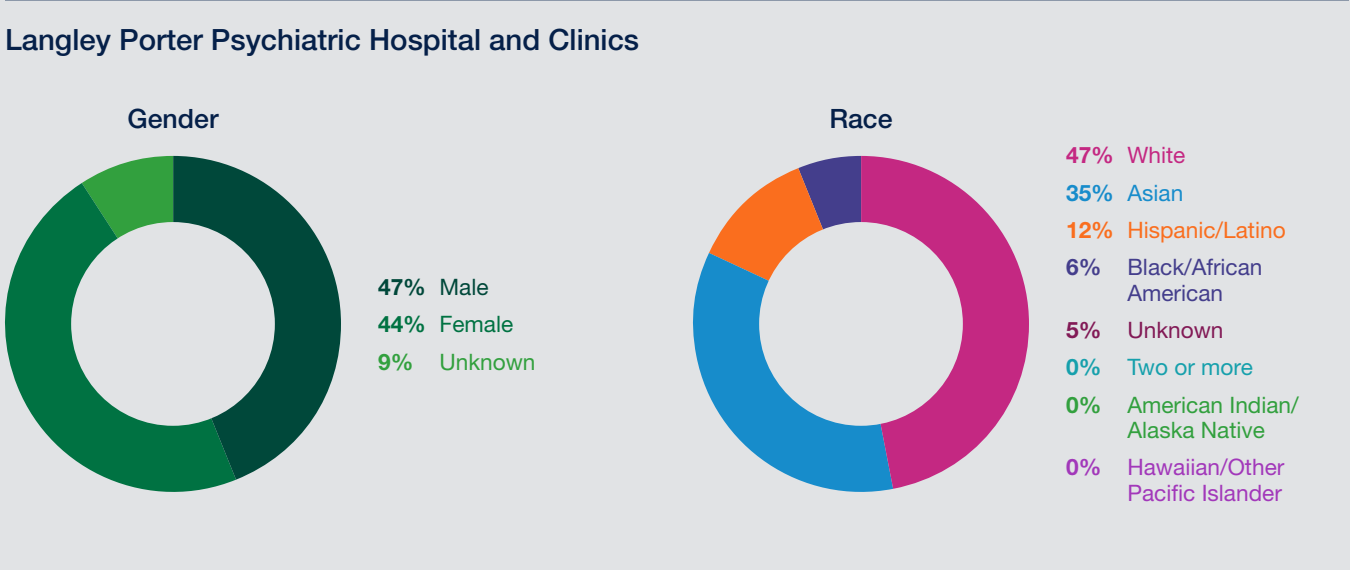
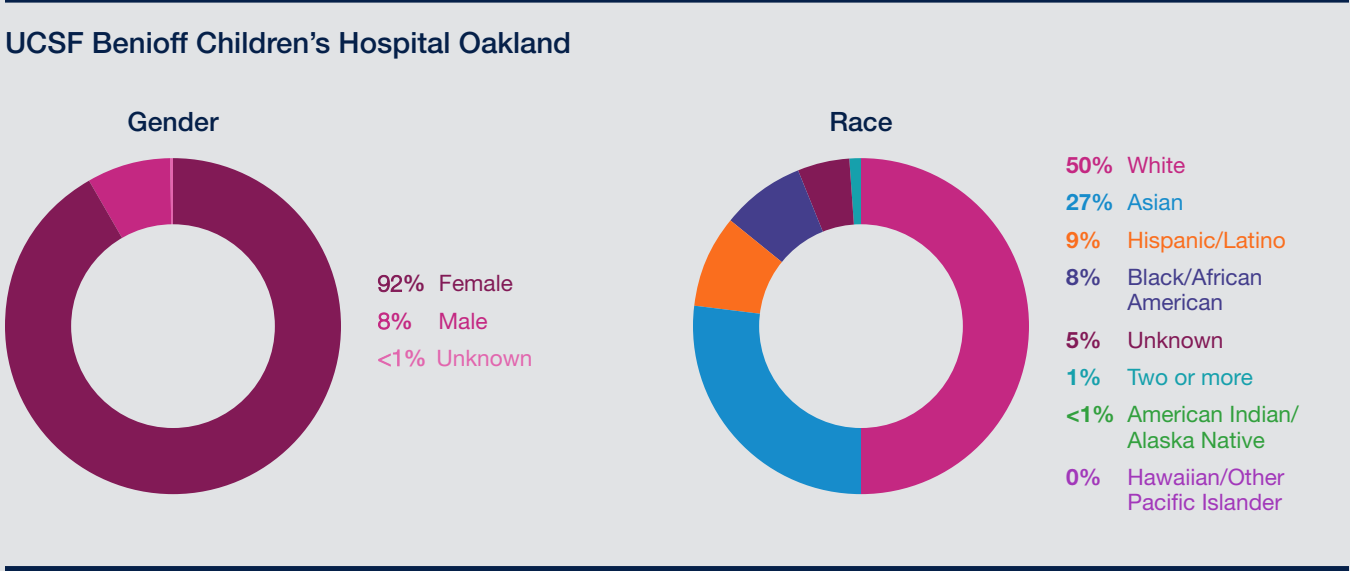
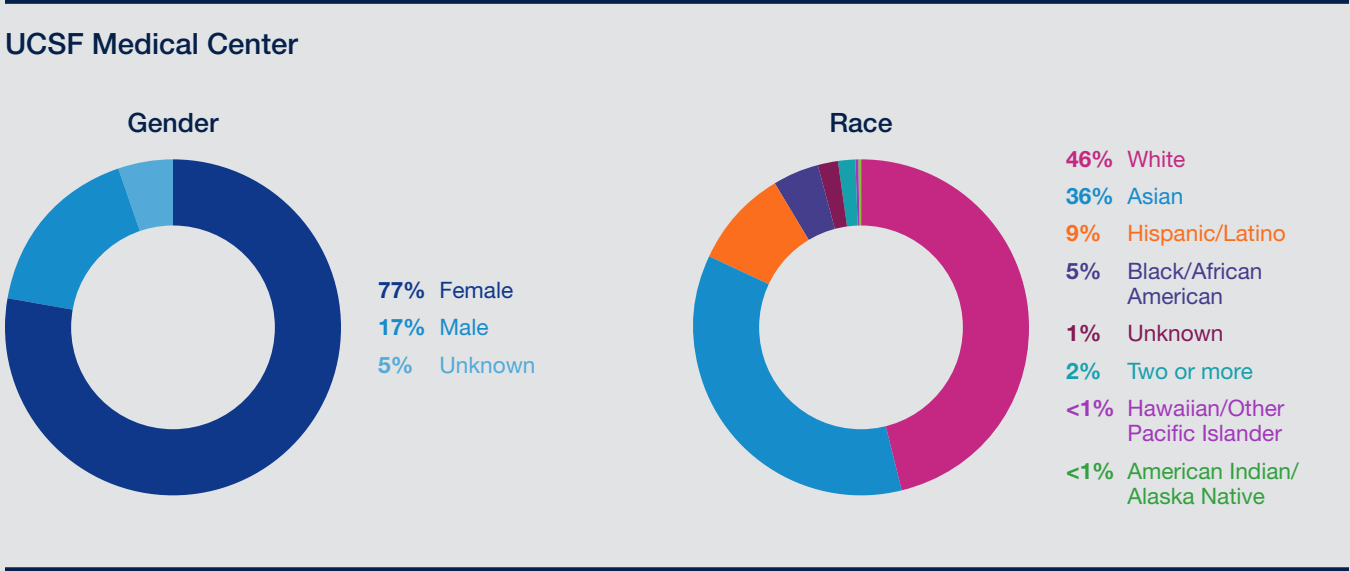
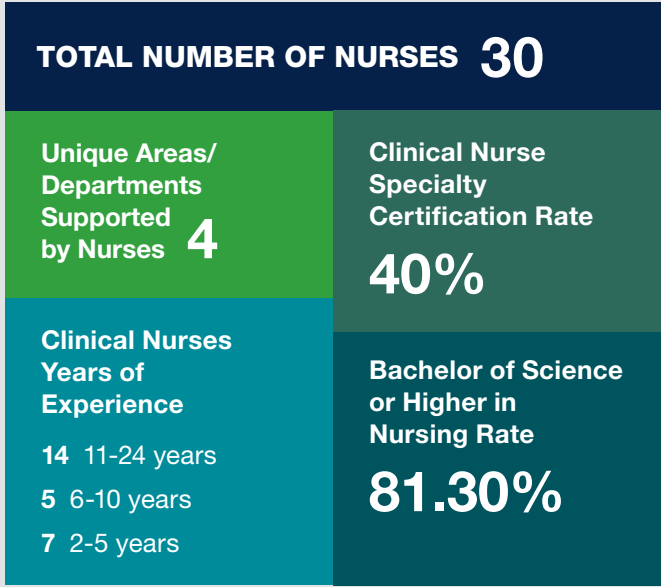
I am excited to share with you UCSF’s 2022-2023 Nursing Annual Report, which includes exemplars of nursing excellence in practice, remarkable achievements in nursing, and inspirational reflections of professional practice. UCSF is the only hospital in San Francisco to receive Magnet recognition from the American Nurses Credentialing Center. This achievement is a direct reflection of our Department of Nursing’s Professional Practice Model of Synergy, which declares that optimal outcomes are achieved when patients and family needs are aligned with the abilities of our nurses. We also have more than 100 Unit Councils addressing many dimensions of nursing practice, helping to create an optimal healing environment for patients and their families.

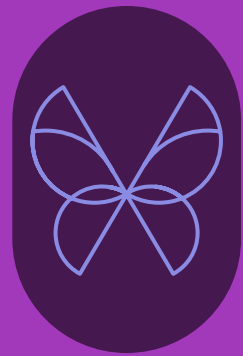
As Chief Nursing Officer for UCSF Adult Services Hospitals, I couldn’t be prouder to be part of UCSF Health’s nursing team. I am in constant admiration of the love you have for our patients, their loved ones and each other. We pause in silence, admiration and joy for the lives you touch and the impact you have, both directly and indirectly, in being part of the nursing team at UCSF. Thank you, UCSF nurses. I hope you enjoy and reflect upon the beautiful milestones and stories detailed in this year’s annual report.

UCSF Health Nursing by the Numbers



Langley Porter Psychiatric Hospital and Clinics





Transformational Leadership

nurses embody transformational leadership through evidence-based practice, teamwork, creativity, and dedication. Our nurses inspire each other, interprofessional colleagues, and our patients, all with the aim of achieving optimal outcomes.

All nurses at UCSF Health are leaders. Driven by a strong professional practice and passion to continually improve, our

IT Anti-Racism Committee

Systemic racism and oppression have been deeply rooted in the culture, laws, health care and other aspects of society. Racism impacts everyday life so adversely that it has affected multiple generations. To help combat these issues within the Information Technology (IT) department, an Anti-Racism Committee (ARC) was established. This interprofessional committee collaborates with all of UCSF Health with a focus on the IT department and, as such, has updated its name to the Health IT Anti-Racism Committee.

This committee's first co-chairs were a nursing informaticist and a clinical systems project manager. Under their leadership, the committee created a roadmap, a transformational charter structure, an evidence-based race climate survey that established a baseline, and a blueprint for fostering a collective commitment to anti-racism.

Within the first year, all goals on the roadmap were met. The committee established a grassroots speakers series open to nursing and other groups, and the heart-to-heart sessions continue on the path of open dialogue, empathy and fostering understanding on race and related topics. In its commitment to promoting awareness, the committee created an anti-racism website with a learning library, artwork and inspirational quotes. In subsequent



years, subcommittees were formed and the committee's collaboration with various nursing groups have played a role in addressing

biases found in patient safety alerts, change requests, and health equity data. Members of this committee have consulted on various processes and change needs throughout UCSF Health.

This committee's impact is transformational and inspiring. Its initiatives have fostered an inclusive environment, promoted education and awareness, created leadership opportunities, and influenced policies and practices.

Jennifer Leos, MSN, RN-BC, PHN, (pictured above) the first nursing informaticist chair of the committee and a foundational partner, established the first workshop for "Incorporating Cultural Humility in Clinical System Workflow Design" available for UCSF team members and informatics champions. This work is being disseminated via an upcoming publication in the *Journal for Informatics Nursing*. Jennifer said her own lived experiences of being a Latina facing the effects of systemic racism and implicit and explicit bias fueled her passion in this work.

By challenging the status quo and openly sharing resources and ideas, this work has inspired others to join the anti-racism movement.

TRANSFORMATIONAL LEADERSHIP



UCSF Leadership Institute Provides Opportunities for Career Growth

The UCSF Leadership Institute significantly expanded this past year, growing its local, regional and global partnerships and delivering leadership development and evidence-based practice training to more health care providers than ever before.

The Leadership Institute, a partnership between the UCSF School of Nursing and the UCSF Health Center for Nursing Excellence and Innovation that launched in 2021, achieved the following milestones during 2022-2023:

- **Launched** a new partnership with Stanford Medicine Children's Health
- **Significantly** expanded the partnership with the Kaiser Permanente Scholars Academy
- **Received** a \$1.5 million, four-year gift to provide evidence-based practice training and leadership development for nurses in Taiwan
- **Continued** a long-term partnership with the Hong Kong Sanatorium & Hospital (HKSH) to offer an international evidence-based practice fellowship for 15 inter-professional frontline team members

- **Continued** a strategic partnership with MinSheng General Hospital in Taiwan as part of the Era Minkun Yang Memorial Global Leadership Initiative to provide evidence-based practice training and leadership development for 18 nurses and inter-professional team members
- **Expanded** the team to now include four School of Nursing faculty members, six executive coaches and seven team members across UCSF Health and the School of Nursing to support the institute's planned and future growth
- **Additionally, the Leadership Institute has continued to deliver outcome-driven leadership development and evidence-based practice training to nurses and other clinicians across UCSF Health, including launching two leadership programs specifically for the areas under the senior vice president and chief operations officer division.** Furthermore, the institute deepened its investment in the UCSF Health Department of Nursing by growing its current programs and launching new initiatives, including the Transitioning into Leadership Program.

Mount Zion teams rated higher in areas of “I am full of energy” and “Through my work, I feel that I have positive influence on people.”

Wellness Program at Mount Zion

Nursing can be a fulfilling career. However, because nurses often face extended working hours and the emotional nature of patient demands, nursing can also be one of the most stressful professions. In 2022, UCSF Mount Zion (MZ) launched a comprehensive Wellness Program in response to ongoing nurse burnout, pioneered by MZ nursing leadership and supported by the Mount Zion Health Fund. The program’s efficacy is measured by the Gallup Engagement Survey and Maslach Burnout Inventory (MBI). Frontline nurses helped develop the program so that the interventions would have an impact. The program has a three-pronged approach including a dedicated on-site wellness space, live classes, and off-site retreats.

The on-site wellness room serves as a relaxing atmosphere where team members can have a light snack or a sparkling drink, use the massage chair, write in a journal, become inspired by a book of nursing haikus, or color on the collaborative art wall. The wellness room also hosts 20-minute massage therapy, Stretch Lab, and acupuncture sessions. Past classes also included qigong and poetry sessions.

The “Healing Our Healthcare Heroes” off-site wellness retreat was a collaborative partnership with 1440 Multiversity and MZ nursing leadership, located in the redwoods of the Santa Cruz mountains. This all-inclusive program consisted of freshly prepared meals and holistic classes such as qigong, yoga, meditation, music, and hiking. Various keynote speakers discussed



resilience in trauma, recognition of moral injury and self-care, grief, and healing, and finally the journey back to joy and growth. This three-day, two-night retreat allowed team members to take a step back, reflect and heal while learning new skills.

The comprehensive MZ Wellness Program’s value is demonstrated through improvement on the Gallup Engagement question, “How often do you feel burned out at work?” Moreover, the MBI showed progress on nursing teams’ professional efficacy and personal accomplishments. Teams rated higher in areas of “I am full of energy” and “Through my work, I feel that I have positive influence on people.” Additionally, baseline stress level before intervention was 3.49, and post-intervention stress level improved down to 1.93.

Phase 2 of the program included Code Lavender as an MZ clinical nurse III project. This pilot bundle tool is used for acute situations that induce team member burnout. This involves utilizing a cart with wellness amenities like healthy snacks and hydration items, use of chaplain services for decompression and debriefing, and a 10-to-15-minute break in the wellness room. Additionally, a second dedicated wellness space in the MZ Cancer Center will be part of the expanded phase 2 MZ Wellness Program. Nurses are grateful to the creative minds of MZ nursing leadership and team members for shaping this effective resource for the MZ teams.

New Program Spotlight: Transitioning into Leadership Program

The inaugural cohort of the *Transitioning into Leadership Program* launched in March 2023 for 20 nurses and advanced practice providers. This program was a six-month mentored experience for nurses who aspired to serve in a leadership role or who demonstrated strong leadership potential. Throughout the program, participants developed the awareness, knowledge, and skills necessary to begin leading teams, units, or initiatives across health care delivery settings. Seasoned health care and industry leaders served as the program faculty who led participants on their journey toward effective leadership within health care.

The outcomes for the *Transitioning into Leadership Program* focused on aiding participants in developing a foundational awareness of their individual strengths as leaders; acquiring the knowledge required for vision-setting, change implementation, and advancement of quality and safety outcomes; and increasing their own cultural awareness and humility, as well as their resiliency and well-being.

“The mentorship for the Transitioning into Leadership Program was a great learning experience in teaching me what kind of leader I am and what kind of leader I want to be moving forward. My mentor played an integral part in helping shape and guide me through the program and my career path. He was a great inspiration and advisor in planning my leadership career goals.

PARTICIPANT
Rozanne Sherlock, Clinical Nurse III, Neurological ICU

“I have gained new experiences and realizations on how becoming a mentor impacts my personal and professional growth. While participating in the mentorship program through the Transitioning into Leadership Program at UCSF, I was fortunate to mentor an expert clinical nurse who sought to challenge her leadership skills with the intention to become an amazing leader. I quickly witnessed the rise of a natural born leader that existed in her!

MENTOR
Rudy Pacol, MS, RN, CCRN-K, Director, Pediatric Acute Care & Pediatric Services

By the Numbers

8 NURSES completed projects within the 2022 Evidence- Based Practice Fellowship Program.

10 FELLOWS were accepted into the 2023 Evidence-Based Practice Fellowship.

4 COHORT leadership programs were launched in 2022-2023 for UCSF Health nursing leaders.

NEARLY 75 UCSF Health nursing leaders participated in these leadership programs.

OVER 30 UCSF Health nursing leaders served as mentors for participants within the Transitioning into Leadership and Foundations for Excellence in Healthcare Leadership Programs.



Nursing Services Strategic Plan

Over the last two years, the Department of Nursing embarked on a journey to develop the Nursing Services Strategic Plan 2022-2025. The vision was to become the world’s preeminent nursing program through dynamic planning with respect to targeted outcomes.

Nurses from all practice areas worked in forums focusing on key topics

INSPIRATION Help nurses develop an understanding and vision for where nursing could be

ASPIRATION Create pathways that would make it possible to achieve the goals

ACTION Identify strategies to move the pathways forward and define the measures that would demonstrate success

More than 300 nurses working in these groups produced 1,700 action items required for success. This list included aspects of current practice that were providing high value, as well as areas that could benefit from transitional and transformational change. The team identified what would become its strategic priorities and the measures that would enable achieving them. This process resulted in 11 workstreams seeking to advance three strategic priorities:

- 1 Care models that are responsive to the needs of patients and communities. The models will demonstrate superior quality and safety, and provide excellence in both care and the patient experience.
- 2 Clinical innovation that is based on:

 - Professional inquiry to enable the inclusion of evidence to advance the nursing practice.
 - Leveraging technological advances.
- 3 Leadership that supports the practice of nursing and demonstrates integration in comprehensive care models.

The department prioritized which measures to work on first and developed tactics to enable team members to move the process forward. A review framework was established that helps identify and eliminate redundancy and aligns the strategic priorities with the larger organizational goals. The work continues.

Nurse Leaders Outside the Nursing Department

In today’s rapidly evolving healthcare landscape, a profound and unparalleled transformation is taking place that requires leaders to navigate past current challenges and actively transform organizations to prepare for and thrive in the future. At UCSF, one strategy to accomplish this is harnessing excellent nursing talent in a variety of senior leadership positions. Nurses are leading many departments across UCSF, providing vision, problem solving, change management, and inspiration to their teams. Some examples of these roles include:



FIRST ROW
Sheila Antrum, MHSA, BSN, RN
Senior Vice President and Chief Operating Officer
Stephanie L. Collins, DNP, APRN, RN
Vice President/Assistant Vice Chancellor of People Wellness, Human Resources



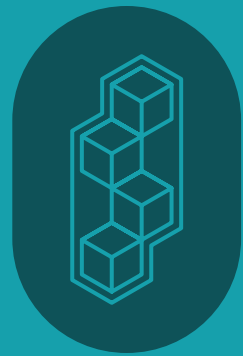
SECOND ROW
Cynthia Barginere, DNP, RN, FACHE
Senior Vice President and President of Adult Services
Kimberly Dimino, JD, MSN
Executive Director of Health Risk Management



THIRD ROW
Kelly Ingrassia, JD, BSN, CJCP
System Director of Regulatory Affairs
Gina Intinarelli-Shuler, PhD, RN, MS
Chief Population Health Officer
Eunice Jones, DNP, MSHA, RN
Vice President of Quality and Safety



FOURTH ROW
Sandy Stall, MSN, RN-BC
Director of Enterprise Information Analytics Health Operations
Rebecca Alvino, MS, RN, CNS
Director of Sterile Processing
Lisa Mogannam, RN
Senior Design and Construction Organizational Consultant



Structural Empowerment

UCSF nurses, advanced practice providers, and clinical care partners are valued decision-makers across the organization. We are recognized for our expertise and commitment to patients and the community at large.

Our UCSF PRIDE values as well as the principles of Diversity, Equity and Inclusion are the core of our organization and shape every program and council. This ensures that all employees are able to learn, grow and thrive at UCSF.

The UCSF Nursing Shared Decision-Making Model is an integrated council structure that brings together nurses from all levels to focus on continually improving patient and nursing care outcomes. The model consists of a Coordinating Council and Nursing Leadership Group, peer councils, unit councils, five core councils focused on clinical practice, clinical inquiry, diversity, equity and inclusion (DEI), professional development, and Magnet unit/department champions.



STRUCTURAL EMPOWERMENT



Best Day at Work

The Pediatric Hematology/Oncology/Bone Marrow Transplant (C6) Engagement Committee was founded in early 2020 as a response to 2019's low Gallup Survey staff engagement scores. Originally a task force, it was put together to address team members' concerns regarding feelings of belonging and to address what people needed to thrive in the workplace. Over the past two years, the committee has worked tirelessly to create sustainable practices and continue moving the needle toward creating a culture where everyone can thrive and feel like they belong.

With the assistance from an organizational development consultant, the committee planned a clinical review workshop called “*Best Day at Work*” in 2022. The aim was to develop an understanding of each team member's best day at work so supervisors could plan and respond effectively to the needs and concerns. The committee found that team priorities of clear communication, teamwork, kindness and accountability are necessary for people's engagement. By focusing on what one's “*Best Day at Work*” looks like, the group set a framework for leaders and nursing team members to strive for an intentional work culture which, in turn, improved overall job satisfaction and engagement scores.

Accomplishments since launching the “*Best Day at Work*” campaign include increased awareness for healthy communication and interactions with each other, enhanced partnership with unit leadership and charge nurses, and professional development skills trainings at staff meetings. The trainings covered topics such as reducing workplace gossip, giving and receiving feedback, and assertive communication. The committee believes that 2023 Gallup engagement scores improved due to the work of this campaign. C6 is committed to creating a space where team members feel safe and are encouraged to talk about things that are difficult about their jobs. The committee plans to continue listening, holding each other accountable, and working together to find solutions and move forward.

Acronym for *Best Day*

- B** Be kind
- E** Exceptional teamwork
- S** Show up with respect
- T** Take care of each other

- D** Develop relationships
- A** Accept accountability
- Y** You are the change you want to see

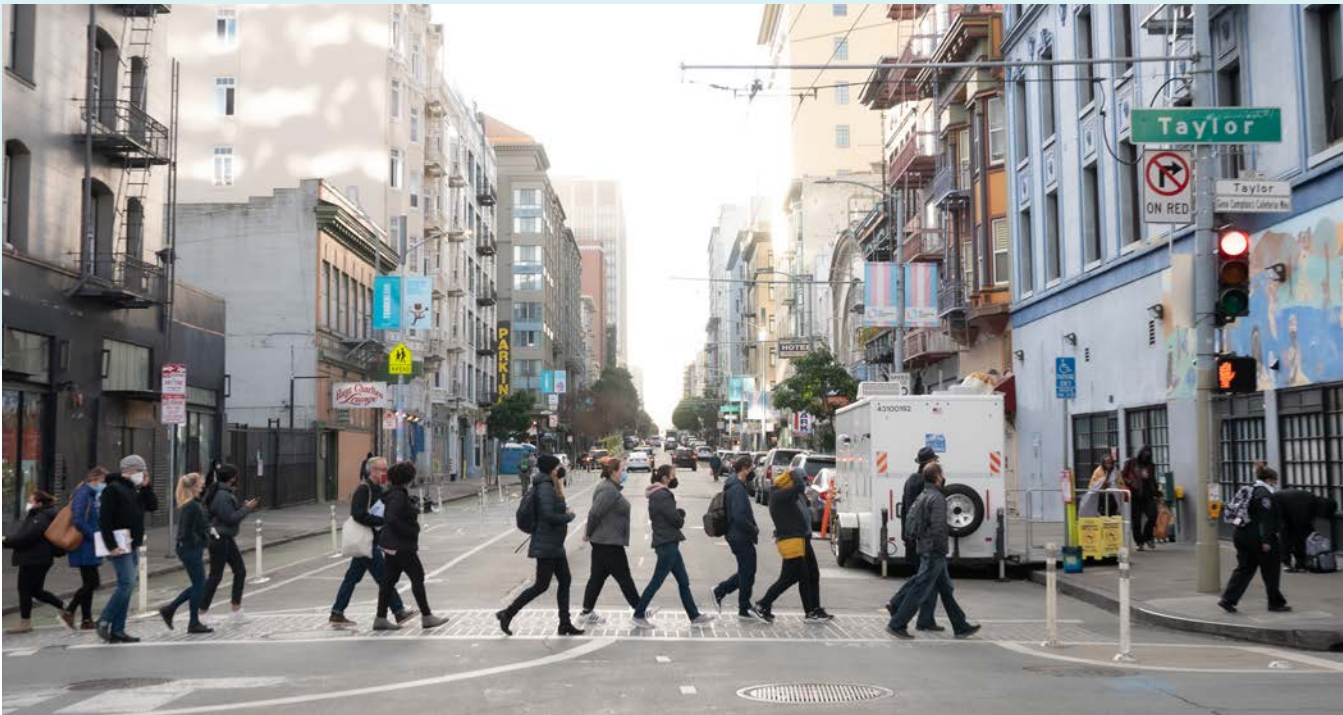
Healers at the Gate

To advance the UCSF PRIDE value of diversity, the Department of Nursing has partnered with a community ally, GLIDE. GLIDE is a nationally recognized center for social justice, dedicated to fighting systemic injustices, creating pathways out of poverty and crisis, and transforming lives. GLIDE is also a religious entity that provides services for any and every member who wants to be a part of its community. Located in the Tenderloin neighborhood of San Francisco, GLIDE is home to the disenfranchised and unhoused of San Francisco. For nearly 60 years, GLIDE’s aim has been to focus on love and radical inclusivity. Its social justice team strives to provide perspective and empathy for a community who has been victim to trauma, substance use disorders, abuse and a myriad of other challenges throughout their lives. GLIDE provides perspective that the people that it serves should not be defined by their experiences.

In an attempt to address systemic racism and inequitable treatment in health care, GLIDE helped create a health care training program at UCSF Health known as “Healers at the Gate.” This is a three-day immersive experience into the daily challenges and successes of those who live and serve in the Tenderloin. The program aims to get health care providers to examine how they are affected by and contribute to the challenges and barriers that are in place for certain patient populations.

Rooted in empathy and service, “Healers at the Gate” brings together campus security supervisors, nurses and nursing supervisors, social workers, and other health care professionals from across the UCSF system to come face-to-face with community members who are impacted by racism, homelessness, substance abuse, and more. Hosted in the Tenderloin neighborhood and framed as a justice pilgrimage to GLIDE, the immersion program aims to change the perspectives of health care workers and interrupt patterns of harm inflicted upon minority patients and families on the UCSF campus.

GLIDE has helped transform and inspire many UCSF nurses and other clinicians through its “radical inclusion” approach, modeling truth-telling on how inequities have been rooted in the history of slavery while also celebrating love, inclusion, and change.



Justice Pilgrimage to Alabama

In March 2023, a diverse group of UCSF leaders, GLIDE team members, and community members journeyed to Alabama. Of the 22 interprofessional participants from UCSF who attended, five were nurses and one was a patient care assistant. GLIDE’s Center for Social Justice led this intentional pilgrimage to three historic civil rights cities—Selma, Birmingham, and Montgomery—to educate attendees on the history and origins of slavery and racism.

During the pilgrimage, the group visited iconic symbols of the Civil Rights Movement such as the 16th Street Baptist Church, the Edmund Pettus Bridge, the Equal Justice Initiative’s Legacy Museum, the National Memorial for Peace and Justice, and more. The group saw vivid images of brutality, listened to many tragic stories, and engaged in impactful reconstructive dialogue in hopes of breaking down the walls of systemic racism. In addition, the group met with colleagues and some of Alabama’s front-line activists to learn the challenges they face throughout their journey for equity, the hope they bring to the communities in the South, and proposals to collaborate on ways both Alabama and California can cultivate antiracism initiatives.

The experiences and educational opportunities told stories of enslavement and the way slavery directly led to the mass incarceration and systemic racism that continue to plague society. This pilgrimage was an immensely powerful experience for all participants. Discussions were difficult and images were filled with despair, but through it all many members of the group discovered that coming together as one brought hope, ideas and power to fight the systemic barriers that still exist today.

Participants learned how racism has continued to morph in the U.S. through systems of oppression, policies, laws, and brutality.



Nursing Diversity, Equity & Inclusion (DEI) Council

Nurses who saw that UCSF did not have a structured nursing-centric body to advance health equity took action by starting the Nursing Diversity, Equity and Inclusion (DEI) Council, a Magnet core council, in November 2020. The council is comprised of Department of Nursing team members from varied backgrounds, roles, and areas of the health system including the most recent addition, Benioff Children’s Hospital Oakland. As an advocate for greater inclusion, the council welcomed UCSF’s first-ever patient care assistant to serve as a council co-facilitator, partnering with a nurse co-facilitator. This prompted other UCSF Health Magnet councils to invite and include the valuable contributions of more Department of Nursing team members who historically have only been clinical nurses.

The council meets monthly to provide a brave space to discuss issues that have impact on intrapersonal, interpersonal, institutional and systems levels. Improving all levels will improve patient outcomes. The past two years’ activities and accomplishments include:

- Publication in the *American Journal of Nursing* with an article titled, “Equitable patient care equals equitable hair care,” featuring the council’s textured-hair care initiative.
- Creation of the first Exceptional Clinical Care Partners Awards (e.g., medical assistants, patient care assistants/technicians) during Nurses Week to increase recognition of valuable Department of Nursing team members.

The council recognizes that advancing diversity, equity, inclusion and belonging starts with building community.

- Co-facilitation with the Professional Development Council of Nursing Grand Rounds to feature Dr. Anna Valdez, who has spoken nationally about anti-racism and who spoke at UCSF on “Addressing Bias and Racism in Nursing: Leading a Path to Health Equity.”
- Participation in the “Justice Pilgrimage to Alabama” with GLIDE.
- Co-submission with the Professional Development Council to UCSF School of Nursing Chow Imagine Fund to pitch for a UCSF Department of Nursing diversity campaign.
- Representation in the system-wide Health Equity Council.
- Utilization of real case studies to develop skills to address micro-aggressions.
- Contribution to the Nursing Strategic Plan.
- Presentations from diversity leaders.
- The council is looking to identify metrics to support new initiatives. It looks forward to collaborating with other UCSF DEI and anti-racism groups who are committed to make meaningful change for the UCSF community and beyond.



We Belong

“We Belong” is a UCSF Benioff Children’s Hospital initiative focused on improving diversity within the pediatric hospital’s nursing workforce. This strategic initiative is anchored in the recommendations from the recent National Academy of Medicine report on the Future of Nursing. One recommendation encourages all health care delivery institutions to improve the patient care experience by ensuring that their team members reflect the diversity seen within the demographics of their patient population.



“We Belong” has three aims: Standardizing the hiring process with a focus on equity to mitigate bias, improving retention for nurses who are Black, Indigenous and people of color (BIPOC), and utilizing effective diversity recruitment strategies to recruit a more diverse nursing workforce.

This diverse 20-person team has a revolving member list. Members include front-line team members, managers, and directors. This initiative is fully supported by the executive sponsorship of adult and pediatric assistant chief nursing officers, who regularly attend meetings and provide input and support to ensure the initiative’s success.

The “We Belong” initiative has experienced remarkable success. It completed its first aim to standardize the hiring process, which involved creating a nursing hiring toolkit that includes a standardized methodology for all hiring managers to use. The toolkit contains a standard question set, interview panel criteria, and a critical evaluation tool. Assessment of hiring data revealed a considerable improvement in diverse hiring. The “We Belong” team is now focused on its next goal, retention. Early efforts show promise in improving pathways for nursing advancement and deepening the understanding and data analysis of current retention issues through Gallup Engagement Survey analysis.

Meaningful Recognition

Meaningful recognition is a vital component of all our work. Recognition fosters a culture of appreciation and empowerment, and it strengthens staff engagement, motivation, and a sense of belonging. See more on our recognition efforts on page 37.



Exemplary Professional Practice

UCSF Nursing provides exemplary care for our patients, families and community through every aspect of our professional practice model. The heart of UCSF Nursing centers on our patients and their families, leveraging our partnerships with the interdisciplinary team to create a comprehensive care plan. We are committed to a shared vision of innovation and cutting-edge clinical practice which supports the most effective, efficient and compassionate care of patients throughout their continuum of care. Our practice is rooted in evidence and focuses on providing high-quality care and outstanding patient outcomes. Achieving high-quality patient outcomes is a core pillar of UCSF Health. UCSF Nursing leads and collaborates with interprofessional teams to improve patient outcomes across care areas via robust quality improvement and safety initiatives.



UCSF Nursing Professional Practice Model



CIRCLE

- Context of the care environment
- Illness to wellness continuum
- Shared decision-making
- Global reach of UCSF
- Wrap-around care

SPACE WITHIN THE CIRCLE

- Potential for personal and professional growth and new opportunities

PEOPLE

- Diversity of patients, families, nurses, the health care team, and communities of care across the healthcare continuum
- Partnership between the patient family and nurses
- Interdisciplinary collaboration between nursing staff and others

HEART

- Patient and family-centered care, the UCSF Medical Center and UCSF Benioff Children's Hospitals' care delivery system
- Evidence-based, excellent care the heart of UCSF Nursing
- Optimal patient/family outcomes or synergy

HANDS

- Caring, Healing, Teaching and Discovering, the UCSF Medical Center and Benioff Children's Hospital Mission
- Compassionate guidance of patients and families through a complex multi-hospital health system
- Nurse competencies aligned with patient/family needs

A Team-Based Approach to Decreasing Pressure Injuries

Exemplary outcomes across nurse-sensitive indicators illustrate the effectiveness of nursing leadership in quality improvement at UCSF Health. We continue to make the prevention and reduction of hospital-acquired harms a priority across our health system. We aim to reduce and prevent central-line bloodstream infections, catheter-associated urinary tract infections, clostridium difficile infections, patient falls, and hospital-acquired pressure injuries.

Reducing Adult Pressure Injuries

For adult inpatients, the Wound Care Team collaborated with Skin Champions to implement a new best practice skin assessment to identify and reduce pressure injuries and other important skin conditions. The assessment, known as 2RN skin assessment, is used at key points during hospitalization.

The adult critical care units achieved a 46.45 percent reduction in these injuries in fiscal year 2023, thanks to the collaborative effort of the Wound Care Team, Skin Champions, ICU nurse leaders, Clinical Nurse Specialists, Continuous Improvement, and Quality and Analytics teams.

The group utilized Lean A3 thinking and continuous improvement methodology to develop two main methods to guide nurses in this work. A Mepilex guide gave nurses and other care providers information about the use of prophylactic sacral dressings in routine pressure injury prevention. In addition, a patient positioning guide outlined appropriate patient positioning to relieve pressure. Both resources included videos that team members could watch whenever they needed instruction.

Stage 2+ HAPI Rates

85 FEWER INCIDENTS
in fiscal year 2023 across 25 units

Dramatic Improvement for Patients at Biggest Risk

Patients in the Adult Intensive Cardiac Care (ICC) Unit are at particularly high risk for developing hospital-acquired pressure injuries. Several factors contribute to the high HAPI risk, including the patients’ immobility, their clinical instability, and their need for invasive therapies such as mechanical ventilatory and circulatory support. Patients on extracorporeal membrane oxygenation (ECMO) have the highest rate of HAPI development among the ICC population, so nurses there developed targeted interventions to reduce risk and prevent injury for these patients. Nurses created an ECMO HAPI prevention bundle that includes products to protect the patient’s head, heels and cannula sites, as well as use of a waffle overlay between the patient and the mattress. ICC nurses also developed guidelines for repositioning unstable patients using a microturn. Skin Champions and Wound Care Team nurses made weekly HAPI rounds to assess patients and educate team members regarding new and ongoing prevention efforts.

Since then, the HAPI prevention bundle, microturn use and weekly prevention rounds have been hard-wired into the unit culture. Since starting the ECMO HAPI prevention bundle, the ICC has reduced its sacral HAPI rates in patients on ECMO by 75 percent.



Reducing HAPI in Children

Keeping in mind UCSF Health’s global aim of zero patient harm, Benioff Children’s Hospitals’ Quality and Safety team members prioritized Hospital-Acquired Pressure Injury (HAPI) as a top harm to reduce and potentially eliminate. During the autumn, the children’s hospital units experienced a surge in admissions related to acute respiratory illness. So many pediatric patients needed respiratory devices, including Non-Invasive Ventilation (NIV), which led in turn to an increase in Respiratory Device HAPI (RD-HAPI). In response, the hospital pulled together a cross-bay multidisciplinary team in October 2022 that included the Department of Nursing, the Respiratory Department, the Center for Nursing Excellence, and physicians.

The multidisciplinary team implemented a bundle approach to improve knowledge and awareness, and deployed audit tools to reinforce behaviors to align with best practices to decrease RD-HAPI. The most impactful intervention was increasing the frequency of rounds on all units with high-risk patients, commonly referred to as “NIV rounding.” These rounds are led by the respiratory clinical practice specialist, a pressure injury prevention nurse, a unit-level clinical nurse specialist, and the bedside nurse. The RD-HAPI rate at Benioff Children’s Hospital San Francisco was 0.025 per 1,000 patient days in fiscal year 2022, with a rate that peaked in December at 0.08 per 1,000 days. The goal was to decrease this RD-HAPI rate by 15 percent.

By April 2023, the team noted that, when NIV bundle compliance was greater than 85 percent, RD-HAPI decreased by 17 percent. By tracking unit level process metrics, the team celebrated some units with high success rates and learned from their processes. Also, the team drilled down on potential opportunities within each unit and identified opportunities for reinforcement or improvements to bolster compliance. The team will take lessons learned from the HAPI task force, refine the approach, and iterate for alignment across all the Benioff Children’s Hospitals.

Code CARE: Helping Patients with a Trauma-Informed Approach

Patients who are Black and Latinx have reported confronting challenging situations during their treatment at the hospital. They are often dealing with a stressful and unfamiliar environment, which can be exacerbated if the clinical team members are not culturally sensitive to their needs. UCSF developed Code CARE as a de-escalation and crisis intervention program with an anti-racism and trauma-informed care lens to assist with providing optimal care when racial, medical or policy concerns arise for patients and families.

Code CARE provides training and methods for team members to respond to cases in which patients or their families feel as if the medical care they are receiving is biased to some degree, or they don’t understand one of the hospital’s many policies. Code CARE also helps meet patients’ or family members’ needs so that the nursing and medical teams can have a clearer pathway to perform their duties.

Nursing leadership, led by **Diane Vonbehren**, MSN, RN, served as executive sponsor for the program. Clinical nurse **Julie Knowles**, BSN, RN, contributed the nurse perspective and real-life scenarios from which to develop training, as well as suggestions for how to best document Code CARE responses. **Kate Farley**, MSN, RN, the children’s hospital nursing supervisor, was critical in developing the response protocol, as well as training and mentoring the team. **Dawn Bradley**, MSN Ed., RN, NPD-BC, CPN, Nursing Professional Development Specialist (NPD-S), developed simulations for Code CARE situations with other members of an interdisciplinary team and continues to offer this training today.



Acronym for CARE

C

Consider the facts

A

Awareness of your assumptions & perspectives

R

Recognize other perspectives

E

Evaluate the best option(s) to move forward

Another important goal of Code CARE is to reduce the amount times that security personnel or the UCSF police are called to neutralize a perceived threat from patients and families, especially for families who are Black, Latinx families and families for whom English is not their primary language. Code CARE can prevent matters from escalating to a level that requires uniformed intervention, reducing additional trauma for patients, families and team members.



Improving Neurodevelopmental Outcomes in Newborns with Congenital Heart Disease

Newborn Individualized Developmental Care and Assessment Program (NIDCAP) is an evidence based, comprehensive program that incorporates personalized developmental and family-centered care that, when implemented for preterm infants in the Intensive Care Nursery (ICN), improves their outcomes, including their brain structure and function.

The Cardiac Intensive Care Unit (CICU) and the Cardiac Transitional Care Unit (CTCU) at Benioff Children’s Hospital San Francisco implemented a comprehensive, multidisciplinary, family-integrated program to support the neurodevelopment of newborns with congenital heart disease (CHD) based on the NIDCAP strategies. The Neonatal Cardiac GRAND Program (GRowth and Neuro-Development) consists of four bundles of support: care, comfort, feeding and parent. Each bundle contains elements of care that support infant growth and development. Examples include developmental positioning, early holding, massage therapy, acutherapy, oral sucrose for painful procedures, oral care with breast milk, lactation support and early physical and occupational therapy. Although all elements are critical to optimize neurodevelopment, the most important is the parent-infant relationship.

In the GRAND Program, parents read to, sing to and comfort their critically ill infants. They are encouraged to participate in their infants’ care, including oral care, diaper change, temperature assessment, holding and breast feeding. While these actions may seem simple, it takes a very skilled nursing team to place a baby with multiple lines, tubes and drains safely into their parent’s arms.

The key to the program’s success lies largely with the GRAND RN team. This team consists of eight CICU and CTCU RNs who specialize in neonatal cardiac and developmental care. They assume responsibilities for guideline development, education, outcome measurement, and leadership in GRAND Rounds. Specifically, these nurses have implemented several key effective interventions, including developmentally appropriate positioning even in the immediate postoperative period, and safe holding guidelines for critically ill newborns with multiple lines and tubes.

This is a unique opportunity for cardiac RNs to advance professionally as leaders and experts, implement evidence-based care, and work collaboratively with a multidisciplinary team.

Bringing Equitable Hair Care to the Hospital

Part of the Nursing Diversity, Equity & Inclusion (DEI) Council’s work is to examine current patient care and find ways to improve the practice of nursing through an equitable lens. Nurses aspire to provide holistic care. Personal grooming maintains a patient’s dignity and helps keep their spirits up during the challenges of hospitalization.

One day, when offering personal care items to a patient who was Black, a nurse realized the patient would be unable to do her hair due to inadequate supplies. The hospital’s hair care options included shampoo, shower caps, baby shampoo and a fine-toothed comb. When a nurse brought this to the attention of the Nursing DEI Council, a nurse manager mentioned that she had arranged for a special order of coconut oil for use as a hair oil. In addition, the council identified an already contracted hospital supplier that offered a wide-toothed comb that would work with more hair types. One of the clinical nurse specialists on the council presented the

need, obtained the approval, and began the ordering process. Soon these supplies were stocked on all units.

Since the rollout of these products, hospital team members and patients have responded positively. To evaluate the new hair care options and to determine the need for other products or additional team member education, the council continues to solicit feedback from patients and team members. Inequitable hair care in hospitals should no longer be the norm. **Irene Friedman**, MS, RN, and **Michelle Sison**, MSN, RN, published an article on this simple, inexpensive and easily scalable solution in the *American Journal of Nursing* in December 2022, in hopes that other health care settings adopt similar practices.

Offering more inclusive hair products represents a small but important step in addressing systemic racism in health care.



The Nursing Diversity, Equity and Inclusion Council

Announcing the addition of the following products to care for patients with textured hair.

Coconut Oil and a Wide Tooth Comb



For suggested use, see email with "Tip Sheet for Care of Textured Hair"

As part of our efforts to provide more culturally informed and equitable care, the Nursing DEI Council has been evaluating practices that do not meet the needs of our diverse patient population. Haircare for patients with textured hair (also referred to as natural/Black hair) is sometimes neglected due to staff unfamiliarity and lack of appropriate supplies.

UCSF Health
Department of Nursing



Population Health Improves Many Aspects of Care

A diverse team of nurses in UCSF Health’s Office of Population Health (OPH) supports patients throughout the full continuum of care. UCSF Health created OPH in 2015 to lead efforts to improve not only patients’ health but also their experience in UCSF’s care, while lowering the costs of care. OPH works closely with leadership across UCSF to execute a system-wide strategy of delivering innovative models of value-based care.

Following up on Subcritical Results

When a patient has lab, imaging, or microbiology testing done, the results might be subcritical, meaning they are not immediately life-threatening but are considered to pose a significant risk if not addressed. More than 20 years ago, some patients experienced harm because subcritical results were not followed up on, leading UCSF to create the Relay Center. Much has changed in the ensuing decades: The program was originally housed on the clinical lab team, workflows were created in a pre-EPIC era, and the clinical lab relay center was staffed by administrative employees who almost exclusively called clinics and faxed results. In order to establish a centralized team and to redesign the program to create a closed-loop system with clinical oversight, the Relay Center was transitioned to the nurse-led OPH team in December 2022. In the first eight months of OPH oversight, the Relay Center team improved efficiencies and effectiveness, closing the loop for more than 10,000 patient results.

A One-Stop Shop for Cancer Patients’ Care

The OPH Oncology Medical Home (OMH) is a patient-centered care delivery model for patients receiving outpatient chemotherapy. Cancer patients are often overwhelmed with everything that’s happening to them, and welcome having one central team that directs their care. The OMH team—an oncology trained nurse and a healthcare navigator—works with the primary oncology teams and services at the Cancer Center to reduce inpatient admissions and emergency department visits through enhanced care coordination, triage processes, and symptom management strategies.

In January 2023, OMH partnered with the Breast Oncology Clinic to launch the Oncology Care Chat, a digital tool that proactively screens for treatment side effects for seven days after IV chemotherapy. Responses are sent to the OMH nurse for further triage and escalation if necessary. The tool also provides educational tips and resources to enable the patient to manage their symptoms at home. Twelve patients have enrolled in the pilot and interviews and surveys indicated high levels of patient satisfaction with the Oncology Care Chat.

Striving for Equitable Post-Discharge Outreach

In 2013, UCSF implemented a hospital-wide, automated, multilingual post-discharge phone call program as part of the Care Transitions Outreach Program (CTOP). Patient-reported post-discharge concerns are first identified via automated telephonic outreach. For certain ‘at-risk’ patients who fail to answer the automated call—those over 85 years old, discharged home with services, or limited English proficiency—a nurse reviews the chart and calls the patient if they have not already been contacted by another clinician. For all patients who identify a concern, a nurse speaks with the patient to provide symptom triage, teaching, care coordination, and referrals to social work, pharmacy, or patient relations as indicated.

CTOP now calls nearly all hospital discharges, 27,000 patients per year, with a 77 percent reach rate, with the notable exception of patients who were Black, who had a markedly lower 65 percent reach rate. To improve overall reach rates and to address the identified inequity, CTOP developed a tailored outreach escalation approach. First, patients who did not answer the automated call received a follow-up text message with the same information, translated into the same languages. Then, a nurse reviewed the charts of patients who were Black who did not answer the automated call or text message and placed a personal call.

Because the text increased the overall reach rate, it reduced the number of patients requiring a personal call, improving efficiency. Nurses were able to complete calls to this limited number of patients within the scope of their existing roles, without requiring additional hours or CTOP personnel.

Adding text messages increased the overall reach rate from 77 percent to 84 percent. For patients who were Black, adding text messages increased the reach rate from 65 percent to 71 percent; adding a personal call further increased the reach to 77 percent.

Reducing Repeat Emergency Visits

OPH’s Care Support team, in collaboration with UCSF Parnassus Emergency Department (ED) leadership, launched the Short-Term Emergency Department Discharge Intervention (STEDDI) in November 2020 to improve the experience of particularly complex patients who often find themselves making repeat visits to the ED. STEDDI aims to reduce unnecessary hospitalizations and return visits to the ED by providing high-touch care management for one to two weeks after discharge. Three advanced nurse specialists work in partnership with three licensed clinical social workers to assess each patient, identify potential issues that could lead to a return visit to the ED and expeditiously intervene using a compassionate, patient-centered approach. In the first two years, the STEDDI team achieved a 20 percent reduction in the 30-day re-visit rate to the Parnassus ED and helped improve the UCSF Health patient experience.

How the STEDDI Program Helps Reduce Unnecessary Hospitalizations and Return Visits to the Emergency Department

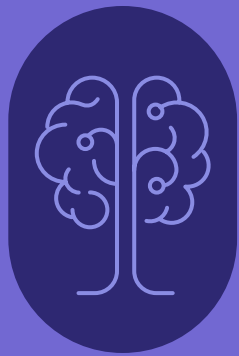
High touch model of support

Patient education on early symptom recognition & self-management

Linkage to care teams

Linkage to appropriate level of care

Coordination of home care services and community resources



New Knowledge, Innovation & Improvement

Every day, UCSF nurses utilize evidence as the basis for their practice. In addition to implementing the latest science, nurses follow their clinical inquiry to discover new knowledge through research. They also design and test innovations that improve patient care, enhance value, and optimize care delivery systems by improving quality and performance. This section highlights a few exemplars of nursing excellence and some of nurses' recent contributions to advancing research, evidence-based practice, quality improvement and innovation in healthcare.



Finding New Treatments Through Research

Research plays a pivotal role in advancing the nursing profession. UCSF nurses identify gaps in practice, develop novel interventions, and evaluate them through a rigorous scientific approach. Research nurses are catalysts for positive change in healthcare, driving innovation, and ultimately enhancing the well-being of patients and communities.

The **Clinical Nursing Research Grant**, funded by the Department of Nursing in partnership with the UCSF School of Nursing, promotes this culture of research scholarship. It annually funds teams of nurses and faculty members to conduct clinical studies within the health system. This partnership generates rigorously tested and clinically relevant evidence for nursing practice.

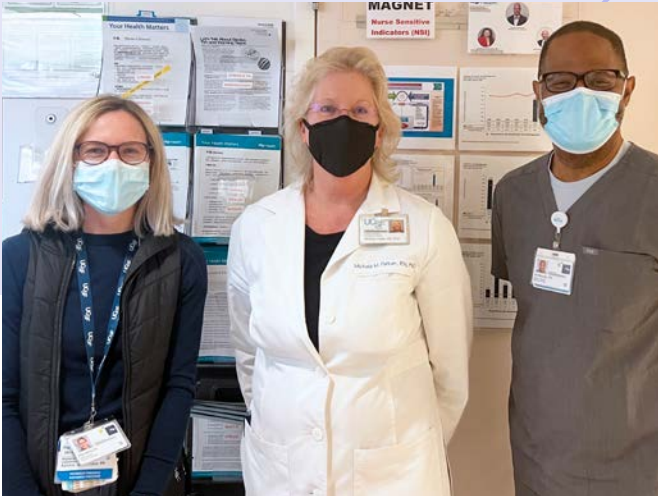
2023 GRANTEES

Emely Alfaro, MS, RN and **Christine Miaskowski**, PhD, RN, FAAN: *Identification of Subgroups of Oncology Patients with Distinct Difficult Intravenous Access Profiles and Associated Risk Factors* (pictured left to right top)

Brian Cunningham, BSN, RN, CCRN-CSC, **Mya Childers**, MS, RN, CCRN-K, and **Soo-Jeong Lee**, PhD, RN, FAAOHN: *Feasibility and Efficacy of Enhanced Stress Resilience Training for Psychosocial and Occupational Wellbeing of Critical Care Nurses* (pictured left to right bottom)



Publications	2020	2021	2022
Research	20	23	27
Non-Research	19	36	32



Nurses and Faculty Research Heart Monitors Together

Karolina Ho, MS, RN, CCRN-CSC, a clinical nurse in the cardiac intensive care unit at Parnassus since 2012, and **Michele M. Pelter, PhD, RN, FAHA**, the director of the Electrocardiographic (ECG) Monitoring Research Lab and associate professor at the UCSF School of Nursing (SON), began a collaborative research journey seven years ago. Their paths converged at an annual UCSF Clinical Inquiry Conference, igniting a partnership to advance the clinical nursing practice through research. Karolina’s focus on improving bedside ECG monitoring in the adult ICUs aligned perfectly with Michele’s expertise in hospital-based ECG monitoring.

In 2020, they were awarded a Clinical Nurse Research Grant, with both serving as co-principal investigators. Karolina and Michele recruited other UCSF Health nurses, including **Hildy Schell-Chapel, PhD, RN, FAAN**, Director of Practice and Research, Clinical Nurse Specialists **Sarah Berger, MS, RN, CNS**, **Amy Larsen, MS, RN, CNS**, and **Cass Sandoval, MS, RN, CNS**, two adult ICU clinical nurses, **Gopi Ganesh, MS, RN, CNS**, and **Shelvin Prasad, MSN, RN, CNL**, current SON master’s student **Arthur Murray**, and **Thomas Hoffmann, PhD**, a statistician in the SON. Their study,

conducted during the pandemic, compared nurses’ measurements of patients’ cardiac cycles done by hand with computerized measurements from ICU monitors. The QT interval (QTc=heart rate corrected) represents one cardiac cycle which, if prolonged, increases the risk of torsade de pointes, an arrhythmia that can lead to sudden cardiac death. Typically, nurses use handheld calipers on a printed ECG to measure the QT/QTc, but this method is prone to inaccuracies, is time-consuming, and often goes undocumented. In 2019, UCSF introduced new bedside ICU monitors with electronic calipers (e-calipers) and an algorithm that automatically measures and continuously displays the QT/QTc. However, no prior study had examined the agreement between computerized measurements and nurses using e-calipers. Karolina and Michele’s research found close agreement between the two methods.

Building on this study, in 2023, the team compared computerized QT/QTc’s from bedside ICU monitors to those derived from a standard 12-lead ECG and found good agreement between the two methods, further supporting the idea that computerized measurements might be a suitable alternative to nurse-measured QT/QTc’s.

Their research findings have been presented at local conferences and several UCSF Health practice councils. The team wrote an article, “Agreement of Computerized QT and QTc Interval Measurements Between Both Bedside and Expert Nurses Using Electronic Calipers,” that was published in the *Journal of Cardiovascular Nursing*. Karolina earned a master’s degree from SON with Michele as her mentor and is currently in the SON Doctor of Nursing Practice program.

“Karolina and Michele concluded: “Our pilot study suggests that computerized measurements might be a suitable alternative to nurse measured QT/QTc’s and may reduce inaccuracies (and) nurse burden and increase adherence to practice recommendations.”

Frontline Care Providers Learn the Value of an Evidence-Based Approach

An advanced initiative within the UCSF Leadership Institute, the Evidence-Based Practice (EBP) Fellowship Program is a nine-month initiative for frontline care providers interested in gaining graduate level EBP education. This program engages participants in an innovative and educational experience focused on facilitating an evidence-based approach to implementing a formal practice change. It also shows participants how to assess the outcomes and impact of the interventions in a clinical setting. Participants receive support from expert facilitators and trained mentors. The program provides an outstanding pathway for professional growth and development and lifelong learning.

2022 EBP FELLOWS (pictured right to left)

- David Jenkins, BSN, RN**
Langley Porter
Psychiatric Hospital
- Silvia Lu, BSN, RN**
Pediatric Intensive Care
- Michelle McKinney, BSN, RN**
Pediatric Medical
Surgical Care
- Karizza Fan, BSN, RN, CHPN**
Hematology, Oncology, Bone Marrow Transplant
- Rosa Weed, MS, BSN, RN**
Mount Zion Medical
Surgical Care
- Erin Livingston, BSN, RN**
Pediatric Cardiac
Transitional Care
- Avery Drenth, BSN, RN**
Adult General Medicine
- Corin Alcorn, BSN, RN, CCRN** (not pictured)
Neuro Intensive Care

Discharge Champions Help Patients Go Home Early

The orthopedic unit at UCSF Mount Zion can have up to 15 admissions and discharges in one day. Pressure is placed on nurses to discharge multiple patients before noon, often without enough support to ensure success. **Rosa Weed, MS, BSN, RN**, a clinical nurse III on the unit, decided to tackle this issue. She participated in the 2022 UCSF Evidence-Based Practice (EBP) Fellowship to learn about ways nurses can improve based on research evidence. With support from her leadership and unit council, Rosa implemented the role of a Discharge Champion nurse (DC-RN), who works with others on the team to eliminate barriers and decrease the primary nurse’s workload. DC-RNs ensure that the patient understands the plan for the day and is prepared for the discharge, such as arranging a ride home.

Rosa measured the impact of DC-RNs by tracking the rates of discharges before noon on her unit. She found that DC-RNs improved this metric by 10 percent. Rosa’s systematic and data-driven approach demonstrated the power nurses hold in implementing evidence-based improvements at UCSF. The EBP Fellowship opened the doors for Rosa to expand on this project as she pursued her master of science in Healthcare Administration and Interprofessional Leadership at UCSF. She is continuing her professional development and leadership by pursuing her Doctor of Nursing Practice at the UCSF School of Nursing.



Supporting Limited-English Proficiency Families with Translation Tools

Language barriers at the bedside during hospital stays can play a key part in the quality of care that people with diverse languages and cultures receive. **Silvia Lu**, BSN, RN, clinical nurse II at UCSF Benioff Children’s Hospital, Oakland, observed the disconnect between healthcare workers and families with limited-English proficiency (LEP) while working in the Pediatric Intensive Care Unit.

With a desire to bridge communication gaps and improve inclusivity in Black, Indigenous, People of Color communities, Silvia had an idea for a solution. Through UCSF’s Evidence-Based Practice Fellowship Program, this idea became a project that supports Diversity, Equity and Inclusion (DEI) and improves the experiences of LEP families. Silvia created the Bedside Fixed-Phrase Translation Tool. It includes bedside sheets with commonly used phrases translated into Spanish to facilitate communication between healthcare workers and Spanish-speaking families.

The Fellowship Program allowed Silvia to explore this idea, implement a practice change on her unit, and draw data-driven conclusions about the effectiveness of the tool. Moreover, this project was granted funds through the 2022 DEI Award to assist with further outreach.

Silvia’s work inspired more confidence in the use of translation tools that contain preset or fixed phrases. These phrases are simple, short and used for basic common needs. Using a fixed-phrase translation tool when other interpreter options are not readily available has an impact on dismantling language barriers and improving the patient and family experience.



Preventing Patient Falls with Evidence-Based Quality Improvement

Patient falls in hospitals continue to be a significant challenge globally, with almost 1 million hospital falls occurring in the U.S. each year. UCSF identified fall prevention as a top priority in the Adult Acute Care areas. Clinical nurse specialists, nursing professional development specialists, Nursing Quality and Analytics, and Nursing Continuous Improvement came together to work on solving this problem. Using an evidence-based quality improvement (EBQI) approach, the team used internal data to identify the areas of greatest need and best practices. They also looked at others’ experience, including the use of an effective evidence-based tool. This tool included a colorful poster, called Fall TIPS, specifically designed to engage and involve the patient in fall prevention.

Partnering with unit leadership and unit fall champions, an implementation plan was created and enacted upon. Within three months after the implementation, fall counts and rates decreased by over 20 percent and falls with injury counts and rates decreased by over 40 percent. The team is currently working on sustaining the success and spreading the practice to other areas within the hospital.



Reduction of Pediatric Urinary Catheter Infections

Catheter-Associated Urinary Tract Infections (CAUTIs) are preventable harm events associated with morbidity and mortality and are one of the leading causes of healthcare-associated infections. After an uncharacteristic spike in the pediatric CAUTI rate in 2021-2022, a cross-bay CAUTI Task Force was formed with representatives from the Benioff Children’s Hospital’s Oakland and San Francisco campuses to develop and implement interventions. The task force is interdisciplinary, with membership from nursing and physicians from various units and services, Quality Improvement, Hospital Epidemiology and Infection Prevention, and Patient Safety.

Through the work of the task force, several systems and processes were improved. Improvements in the electronic health record functionality allowed nurses to document perineal and urinary catheter care separate from standard bathing, and to track increased compliance for this element. Huddles brought all members of the team together, making nurses aware of the situation and giving the units essential feedback. High-risk huddles for catheters in place for three or more days allowed for catheter removal assessment and emphasis on care for those catheters unable to be removed. There was also a change in diapering practices to avoid contamination of the urinary catheter insertion site.

These targeted interventions resulted in a significant decrease in the cross-bay pediatric CAUTI rate. The goal for reduction was to decrease the cross-bay CAUTI rate from 2.78/1,000 in-dwelling catheter days (baseline rate from October 2020 through September 2021) to less than 2.51/1,000 in-dwelling catheter days by June 30, 2023. The task force’s improvement efforts reduced the CAUTI rate to 1.45/1,000 in-dwelling catheter days from January 2022 to May 2023, well beyond the goal.

UCSF Health Informatics Champion Program

UCSF Health Nursing Informatics is empowering professional nurses and allied health professionals with its first “Informatics Champion” (IC) cohort launched in Spring 2022. Designed to advance the footprint of nursing informatics across the health system, the program improves the engagement of frontline clinicians in information technology design, as well as implementation and improvement efforts. The program represents a step toward the broader vision of infusing nursing informatics competencies in caregivers of all abilities, from novice to expert.

Although more and more health systems have a centralized Nursing Informatics team with dedicated career informaticists, few of those models pay for direct care clinicians to spend time with the Nursing Informatics team. Mentored by a Clinical Nurse Informaticist (CNI), emerging informaticists gain first-hand experience in this specialized field of nursing. After a high competitive application process, 10 Informatics Champions, or ICs, were selected, representing a variety of care areas across our health system.

The 10 ICs developed several projects that led to many improvements. The total minutes of documentation in procedure navigators and chart review decreased. Manual data entry during interdisciplinary rounds and duplicative documentation for outpatient infusion units was eliminated. Qualitative survey data showed that Informatics Champions were highly satisfied with the program and agree that the informatics concepts that they learned valuably contributed to their clinical practice.

School of Nursing



Catherine L. Gilliss, PhD, RN, FAAN

Dean and Styles Professor of Nursing
Associate Vice Chancellor for Nursing Affairs
2017-2023



On behalf of the UCSF School of Nursing, I am pleased to share some of our major achievements in 2022-2023, including our collaborations with UCSF Health to develop nurse leaders and initiate innovative programs that improve patient care.

As one of the four graduate schools of health sciences at UCSF, the School of Nursing equips the next generation of nurse leaders with the skills, knowledge and experience to deliver care and improve outcomes. Every year, we confer nearly 200 DNP, PhD and master's degrees to our graduates, a diverse group committed to social justice and health equity. Our graduates lead in health care systems, design and evaluate innovations in patient care, shape policy and public health, advocate for patients and communities, and conduct research that deepens our understanding of health and health care.

Our academic programs have long ranked among the best in the country and we consistently secure competitive research and training grants that enable us to remain the top public recipient of National Institutes of Health funding among schools of nursing nationwide.

Diversity, equity and inclusion are central to our work. About 43 percent of our students are from groups historically underrepresented in the health care sector, and 40 percent are the first in their families to graduate college. In addition, we have launched a new hiring program to add Health Equity Scholars to our faculty. We welcomed **Jose Gutierrez**, PhD, as our first Health Equity Scholar this past year, and **Coretta Jenerette**, PhD, RN, FAAN, has just joined our school as the Senior Health Equity Scholar on September 1, 2023. In addition, we are actively recruiting more faculty members to lead this work.

This past year, we made significant progress in our plans to expand our education programs to meet the demand for more doctorally prepared nurses. In 2024, we plan to launch a new Post-Baccalaureate Pathway to the DNP degree. This new pathway will allow registered nurses with a BSN to combine study of an advanced practice role with the innovation and leadership focus fundamental to the DNP curriculum. The new pathway will align with the current curriculum, now open to nurses with master's degrees.

Our clinical collaborations and educational integration with UCSF Health Nursing continues. The UCSF Leadership Institute provides leadership preparation to those who are leading at UCSF and beyond. The DNP scholarship program, jointly implemented between the school and UCSF Health Nursing, offers support to six UCSF Health nurse scholars each year in support of their study in the UCSF DNP program. Three faculty members—**Christine Miaskowski**, PhD, RN, FAAN, **Laura Wagner**, PhD, RN, FAAN, and **Sandra Staveski**, PhD, RN, FAAN—are supporting nurse-led research within UCSF Health. More of our faculty are working collaboratively with UCSF Health to launch new initiatives. In the following pages, I invite you to read about the innovative programs we are leading to prepare nurse leaders and advance patient care.

UCSF Leadership Institute Delivers Leadership Development, Trainings to More Health Care Professionals

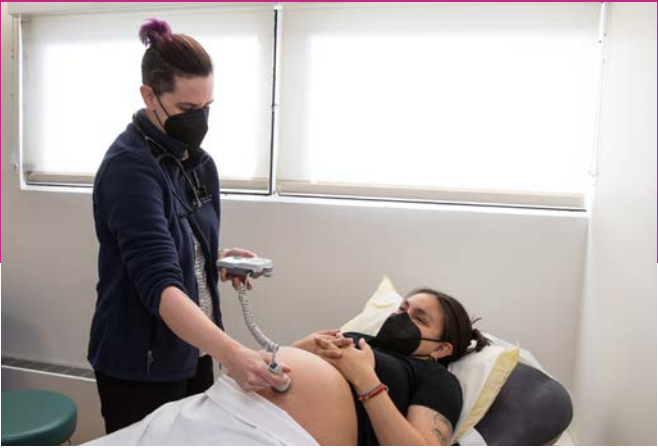
As it enters its third year, the UCSF Leadership Institute continues to grow its partnerships and impact.

A collaboration between the UCSF School of Nursing and the UCSF Health Center for Nursing Excellence and Innovation, the Leadership Institute provides leadership development programming and evidence-based practice trainings to nurses and other health care providers across the career spectrum. See page 8 for more information on the Leadership Institute.



Growing the Network of Volunteer Faculty

The UCSF School of Nursing is continuing to grow its Volunteer Faculty Network, a community of dedicated volunteers who are committed to supporting the school’s mission. The volunteers serve as preceptors to nursing students, deliver guest lectures, provide skills lab support, evaluate comprehensive exams, offer strategic support and more. The network numbers over 400 health care providers and leaders and continues to grow.



Leading the Way in Developing New Patient Care Programs

Comprehensive Care for Publicly Insured Pregnant Patients

The UCSF School of Nursing, UCSF Health Office of Population Health and UCSF Department of Obstetrics, Gynecology and Reproductive Sciences expanded a partnership to improve care for more than 400 pregnant patients who are publicly insured and their newborn babies every year.

The expanded partnership, which builds off the success of the School of Nursing’s longstanding Young Women’s Clinic, enhances care by delivering individualized and comprehensive services.

Andrea Kuster, DNP, RN, FNP, associate professor at the School of Nursing, is leading the partnership as director of Obstetric MediCal Services at UCSF Health. Andrea works in collaboration with Roxanna Irani, MD, PhD, ambulatory medical director for Women’s Health Services, and Megan Paul, BSN, RN, administrative director of Obstetrics Clinic at UCSF Health.

Treating Substance Use Disorders

A new centralized resource that connects UCSF clinicians with experts who specialize in substance use disorders will enable doctors to better assess and treat in-hospital patients. Led by School of Nursing professor Matt Tierney, MS, NP, FAAN, the new consult service is being launched at the UCSF Helen Diller Medical Center at Parnassus Heights.

Nurse-Led Collaborative Care Diabetes Program

Professor Carolina Noya, PhD, FNP, is leading a new UCSF Health collaborative care program to support publicly insured patients who are struggling with managing type 2 diabetes.

A case management team that consists of two nurses and a health care navigator works with a pair of consultants—Carolina and endocrinologist Victoria Hsiao, MD, PhD—to discuss the patient treatment and make recommendations to primary care providers. The program’s interdisciplinary team is part of what distinguishes it from other programs.

Increasing Access to Mental Health Services

Chelsea Landolin, MS, RN, NP, associate professor, and Kara Birch, DNP, RN, NP, associate professor, are working to ease access to mental health services by bringing this care to the clinics that patients already visit.

Chelsea developed a model of cognitive behavioral therapy for primary care settings and implemented the approach at UCSF Health’s Laurel Village Primary Care Clinic. Between fall 2020 and spring 2023, Landolin increased the number of psychiatric service hours for UCSF primary care patients by 40 percent.

Meanwhile, Kara joined the team at Golden Gate Obstetrics and Gynecology (OBGYN), a UCSF Health affiliate, to provide integrated mental health services.

Recognition

Thank you, nurses!

Recognizing nurses for their vital work is essential to honoring the importance of their contributions to UCSF and our patients. Nurses often work long hours and go above and beyond their duties to ensure our patients are safe, experience optimal outcomes and are satisfied with their experience at UCSF. From delivering high-quality patient and family care, to supporting our local and international communities, UCSF nurses are key to our success, helping to elevate the nursing profession and improve health care. In addition to acknowledging nurses' achievements, UCSF strives to recognize nurses by providing opportunities for professional growth. The amazing work nurses do every day deserves ongoing recognition and celebration.



RECOGNITION

DAISY Award Recipients

The prestigious DAISY Award for Extraordinary Nurses recognizes nurses who work collaboratively with others, serve as role models for the profession, communicate clearly and effectively, and create special connections with patients or their families. The nomination provides an opportunity for patients, families, managers, physicians, and staff to recognize nurses for the extraordinary and compassionate care that they provide.

The award was established in memory of J. Patrick Barnes, to say thank you and recognize nurses world-wide for the extraordinary and compassionate care that they provide to patients and families.

Recipients included registered nurses, licensed vocational nurses, nurse leaders and nursing teams. Honorees receive an award certificate, a DAISY Award pin, and a hand-carved serpentine stone sculpture from Zimbabwe entitled "A Healer's Touch" at their individual celebrations. In addition, the DAISY Foundation includes spotlights of each awardee on their website: www.daisyfoundation.org/daisy-award/honorees.



37 Individual Awards

2 Team Awards

4 Nurse Leader Awards

1 Award for Nursing Ethics

2 Award for Advancing Health Equity



Distinguished Nurse Award

The Distinguished Nurse Award is the highest award a nurse can receive and is recognized by the Chancellor’s Office during the Founders Day Award ceremony. This award recognizes the outstanding contribution to the care of patients and fosters professional and public awareness of achievements in nursing practice. It is presented to a professional nurse who is actively engaged in a project or approach that contributes to nursing practice, education, or leadership at UCSF Health.

2022 DISTINGUISHED NURSING AWARD Tina Ly, BSN, RN

Tina Ly is a clinical nurse III in the intensive care nursery at Benioff Children’s Hospital San Francisco. She’s worked at UCSF for 14 years. Earlier in her career, she spent some time as a travel nurse so she could learn the best practices at other hospitals. She saw a device called the T-Piece Resuscitator, which is used in the 10 percent of newborns who need assistance breathing at birth.

“At UCSF, we use the flow inflating bag, but this device requires a level of experience and expertise to get it right,” Tina says. “If you give too much, you can blow a ‘pneumo,’ which is a little hole in their lungs. If you give too little, it’s just not enough to open up their lungs. You don’t have a lot of time to think and adjust. You need to do it fast but you need to do it safe. The T-piece resuscitator allows us to do that.”

“I really felt like this was something that we could adopt here,” Tina says. She created and implemented a training program, including a training video. When doctors feel confident using the T-Piece Resuscitator, it enables them to give better, more efficient and more accurate care.

► VIDEO OF TINA www.tinyurl.com/UCSFTinaLy



2023 DISTINGUISHED NURSING AWARD John Sedgwick, MN, RN, CCRN

John Sedgwick, a nurse for 30 years, is a clinical nurse IV on the medical intensive care unit on Parnassus. He developed a tool to help nurses smoothly, gracefully and thoughtfully assist patients and their families in the transition from a critical illness to hospice care.

“We’ll be working really hard with patients who are very sick but then we’ll realize they are not going to survive their hospital stay,” John says. “So we will transition folks from receiving a lot of intensive therapies to comfort care, in which our focus shifts to providing comfort and relief of distressing symptoms.”

John developed a comfort care flow sheet. “Nurses document a lot on flow sheets,” he says. “That helps us assess and document distressing symptoms. But for the comfort care patient, we don’t need to do a detailed neuro assessment and fill out 117 rows of information. That’s not important right now. The important thing is comfort.”

The comfort care flow sheet makes it quick, easy and efficient for nurses to document what’s going on with the patient, “so they can spend less time facing the computer and more time facing the patient and their family members,” John says. That way, “we can be present and help them transition through this difficult and unique time in their lives.”

► VIDEO OF JOHN www.tinyurl.com/UCSFJohnSedgwick



Nurses Week Awards

UCSF Health honors a wide variety of nurses and clinical care partners from different clinical areas. With feedback from clinical nurses in 2022 and 2023, the 15 Nursing Excellence categories expanded to 27 categories to be more inclusive. Each Nursing Excellence Award winner received a surprise celebration in their place of work surrounded by their peers and a member of the senior leadership team. Then, in May 2023, UCSF Health’s DEI Council hosted the first ever Exceptional Clinical Care Partner Award Ceremony in 10 different clinical areas. The list of winners is below.

2022 Nursing Excellence Award Categories

- SHEILA MANN AWARD FOR CARDIOVASCULAR NURSING PEDIATRIC SERVICES**
Marie Abinader-Jaime, RN, CN II
- COLLEAGUE OF NURSING AWARD**
Kristen Szeto, NA, CPA
- AMBULATORY NURSING AWARD**
Wendy Chin, RN, CN II
- JEANNE YALON AWARD FOR ONCOLOGY NURSING**
Zachary Johnston, RN, BSN, CHPN
- PERINATAL NURSING AWARD**
Megan Brown, RN, CN II
- ADVANCED PRACTICE NURSING AWARD**
Mary Lesh, RN, MSN, CPNP-PC, NP II
- NURSING LEADERSHIP AWARD**
Catherine Mitsuoka, RN, MSN, Nurse Manager
- COLLEAGUE OF NURSING AWARD**
David Woolsey, RCP, Respiratory Clinical Specialist
- COMMUNITY VOLUNTEER SERVICE NURSING AWARD**
Selena Srabian, RN, CN II
- EMERGENCY NURSING AWARD**
Sheila Pardo, RN, CEN, CN II
- CLIFFORD K. & AVOLA WILSON MEMORIAL AWARD FOR CRITICAL CARE NURSING**
Shea Williams, RN, CCRN, CN II
- SHEILA MANN AWARD FOR CARDIOVASCULAR NURSING ADULT SERVICES**
Ernst Jeriel Esmillo, RN, CN II



Nurses Week Awards (cont.)

2023 Nursing Excellence Award Categories

- AMBULATORY NURSING AWARD** ADULT SERVICES
Lily Chan, RN, CN II
- AMBULATORY NURSING AWARD** PEDIATRIC SERVICES
Valerie Cantrell, RN, BSN, AMB-BC, CN II
- NURSING LEADERSHIP** PEDIATRIC AMBULATORY SERVICES
Alicia Che-Leung Heilman, RN, BSN, BA, Assistant Unit Director
- COMMUNITY SERVICE AWARD** Rosa Villarroel, RN, CN II
- CLIFFORD K. & AVOLA WILSON MEMORIAL AWARD FOR CRITICAL CARE NURSING** ADULT SERVICES
Danica Cunanan, RN, BSN, CCRN, CN II
- CLIFFORD K. & AVOLA WILSON MEMORIAL AWARD FOR CRITICAL CARE NURSING** PEDIATRIC SERVICES
Baron Bautista BSN, CCRN, CFRN, CN III
- INTERPROFESSIONAL TEAM COLLEAGUE AWARD**
Brianna Negrete, MM, MT-BC, NICU MT, Music Therapist
- EMERGENCY NURSING AWARD** ADULT SERVICES
Murphy Ellis, RN, BSN, CEN, CN II
- NURSING PRACTICE AND PROFESSIONAL DEVELOPMENT AWARD** Lori Fineman, MS, CNS, CCRN, Clinical Nurse Specialist
- NURSING LEADERSHIP AWARD** PEDIATRIC SERVICES
Bridget Canty, RN, MSN, Director of Pediatric Critical Care
- MEDICAL-SURGICAL NURSING AWARD** ADULT SERVICES
Warren Payneta, RN, MSN, CMSRN, CN III
- HELEN B. RIPPLE AWARD FOR NEUROSCIENCE NURSING**
Bernice Cheng, PNP, Pediatric Nurse Practitioner
- NURSING LEADERSHIP** ADULT AMBULATORY SERVICES
Sarah Brynelson, RN, MS, CNS, Nurse Manager

- NURSING LEADERSHIP** ADULT SERVICES
Irish Criseno, RN, MSN, Unit Director
- SHEILA MANN AWARD FOR CARDIOVASCULAR NURSING** Lindsay Meyer, RN, CN II
- EMERGENCY NURSING AWARD** PEDIATRIC SERVICES
Carrie McGuinness, RN, Charge Nurse
- MEDICAL-SURGICAL NURSING AWARD** PEDIATRIC SERVICES
Mayra Marquez, RN, CN II
- JEANNE YALON AWARD FOR ONCOLOGY NURSING** ADULT SERVICES
Catriona Earnshaw, RN, CN II
- JEANNE YALON AWARD FOR ONCOLOGY NURSING** PEDIATRIC SERVICES
Stephanie O'Shea, RN, CN II
- PATIENT CARE SUPPORT COLLEAGUE**
Maria Lorenzana, HUSC
- PERIANESTHESIA NURSING** ADULT SERVICES
Monte Soza, RN, BSN, CPAN, CN II
- PERIANESTHESIA NURSING** PEDIATRIC SERVICES
Alex Wu, RN, CN II
- PERINATAL NURSING AWARD**
Thanh Tran, RN, CN III
- PERIOPERATIVE NURSING** ADULT SERVICES
Christina Walter, RN, CN III
- PRECEPTOR AWARD** PEDIATRIC SERVICES
Kelli Flannery-Cid, RN, CN III
- PRECEPTOR AWARD** ADULTS SERVICES
Trisha Davis, RN, BSN, CCRN, CN II
- PERIOPERATIVE NURSING** PEDIATRIC SERVICES
Patricia Stone-Makori, RN, CNOR, CN II

2023 Exceptional Clinical Care Partner Award Categories

- ADULT ACUTE CARE AWARD**
David Vilan, Patient Care Assistant
- PEDIATRIC ACUTE CARE AWARD**
Liu Fen Zeng, Patient Care Assistant
- ADULT CRITICAL CARE AWARD**
Helcerna Hernandez, Patient Care Assistant
- ADULT PERIOPERATIVE CARE AWARD**
Rolando Mendoza, Surgical Technician
- ADULT PERIOPERATIVE CARE AWARD**
Cory Reyburn, Surgical Technician
- ADULT EMERGENCY SERVICES AWARD**
Jose Gonzalez-Villareal, Patient Care Technician
- PEDIATRIC EMERGENCY SERVICES AWARD**
Gabriel McMillan, Patient Care Technician
- ADULT AMBULATORY CARE AWARD**
Nelli Torchiyan, Medical Assistant
- PEDIATRIC AMBULATORY CARE AWARD**
Dora Kaywood, Medical Assistant



2022 Exceptional Advanced Practice Provider Awards

The Exceptional Advanced Practice Provider Awards recognize select nurse practitioners, physician assistants, certified nurse midwives, and certified registered nurse anesthetists for exemplary demonstration of UCSF Health’s values in their clinical practice and interaction with patients, faculty, and staff.

FIRST ROW BELOW

Robin Clark, PA-C
Senior Physician Assistant
Department of Emergency Medicine

Krisztina Emodi, NP-C, MPH, CNS
Nurse Practitioner
GU Surgical Oncology

SECOND ROW BELOW

Joseph Veator Lake, MSN, AGACNP-BC
MICU Lead Nurse Practitioner
Department of Critical Care Medicine

Michelle “Shelly” Nakaishi, RN, MS, CPNP
Certified Pediatric Nurse Practitioner,
Pediatric Primary Mental Health Specialist
UCSF Benioff Children’s Hospital Oakland, Psychiatry



2023 Exceptional Advanced Practice Provider Awardees

FIRST ROW BELOW

CLINICIAN Ariel Joves, MS, NP, Neurohospitalist Nurse Practitioner, Department of Neurology

EDUCATOR Sian Mara, PA, Urology Surgery Oncology Physician Assistant, Department of Urology

SECOND ROW BELOW

SCIENTIST Lisa Catalli, MSN, NP, Hepatology Nurse Practitioner, UCSF Hepatology and Liver Transplant Clinics

LEADER Megan Rathfon, MS, NP, ACHPN, Inpatient Geriatrics Nurse Practitioner, Department of Medicine

THIRD ROW BELOW

DIVERSITY, EQUITY, & INCLUSION
Alexandria Ludlow, MS, NP, Nurse Practitioner, Obstetrics, Gynecological and Perinatal Specialty

FINANCIAL Stephanie Feng, MS, NP, Genitourinary Medical Oncology Nurse Practitioner, Department of Medicine



2022 Chancellor’s Award for Exceptional University Management

The Chancellor’s Award for Exceptional University Management recognizes exceptional departmental and employee management by staff members who demonstrate outstanding dedication to the betterment of their staff and UCSF.



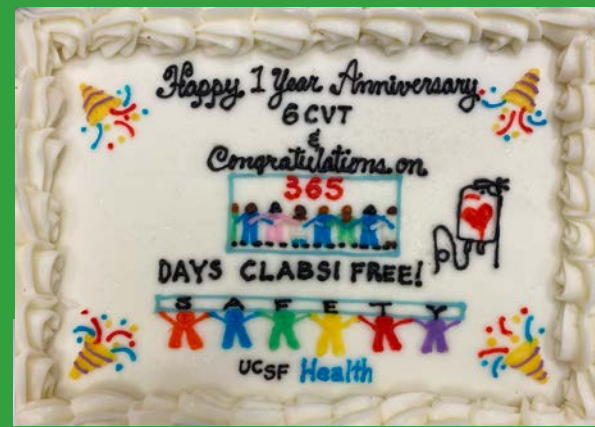
Tristin Penland, MS, RN, CCRN
Patient Care Director,
Adult Critical Care Services,
UCSF Health

When UCSF suddenly needed a safe place to house and care for Covid patients in the early days of the pandemic in 2020, it converted the closed Intensive Care Unit at Mount Zion Hospital into a Respiratory ICU. “If you want to see what teamwork looks like, we got a hospital open in 30 days,” Tristin says. “It’s pretty amazing. We really banded together to say, how are we going to take care of these patients? And then, how are we going to take care of each other?”

Six hundred critical care nurses report to Tristin. “The thing that I love so much about the work that I do is this is a team sport,” Tristin says. “I have an amazing team and I never feel like I’m alone. I make sure that’s something my team feels as well.”

► VIDEO OF TRISTIN:
www.tinyurl.com/UCSFTristinPenland

During the pandemic, UCSF faced many challenges that it had never seen before. “We really had to innovate,” says Tristin Penland, patient care director for Adult Critical Care Services for UCSF Health. “The great thing about nurses is that’s one thing that we do really well — we find a workaround for anything and everything.”





UCSF Nursing Excellence Fund

If you would like to make a gift to the UCSF Health Department of Nursing, you may do so by visiting this website and directing the gift to “Nursing Excellence - UCSF Health”:
<http://tiny.ucsf.edu/SupportNursing>