

**[MyLVHN Soars to 100K](#)**

We've reached 100,000 activations.

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# MyLVHN Soars to 100K

BY [JENN FISHER](#) · MAY 12, 2016

Here's an inspiring fact: LVHN is setting some history when it comes to patient portals, at least within the Epic world. In less than a year of promoting MyLVHN, our version of Epic's MyChart®, we have rocked previous records. Late last week, "Patient 100,000" activated his or her MyLVHN account. The rate of growth of our portal is higher than all other Epic clients. Kudos to all who have introduced and educated patients about the benefits of MyLVHN and helping us reach an Epic milestone!

## **Crawl. Walk. Run. Soar!**

The early strategy with MyLVHN was to start slow with a





pilot program. Sixteen LVPG locations (representing 14 practices) were the early MyLVHN pioneers. In May 2015 when the pilot programs started, we had 10,000 MyLVHN activated accounts; most sprouted organically as patients found the portal while visiting LVHN.org.

By early August when we rolled out MyLVHN to our colleagues and officially started counting enrollments, we were already up to 27,000 activations and moving along at a good pace. In early October 2015, that number mushroomed to more than 35,000 accounts. Then beginning in early December, we launched a short MyLVHN mass media campaign, and in January 2016, an email campaign targeted people who hadn't activated their accounts yet. Those efforts propelled MyLVHN activations to surge from nearly 50,000 in early December to more than 80,000 MyLVHN users at the start of the NCAA's March Madness tournaments. (Bear in mind, our revised Max Goal for an SSP bonus was 55,000.) Since then, the activations keep rolling in. We ticked the history-setting 100,000 mark on May 6.

### **More than Activations: Access and Convenience**

Though we have grown MyLVHN faster than any group before, we're also optimizing the portal to offer MORE to our patients. Here's a recap of what has been added to the portal for patients to make care more accessible and convenient – and what's next:

- **Patient Entered Questionnaires:** Otherwise known as PEQs. These electronic forms (limited to about 17 types right now) are sent to patients through MyLVHN and collect information that would otherwise need to be added to the electronic medical record at the appointment. Each form is in a click-and-select format, with space to type extra information, if needed. For patients who already have a record in Epic, relevant information will pre-populate into the appropriate form(s). Pre-populated information can be updated if something has changed since the last visit.
- **eCheck in:** Also known as electronic check in, is a functionality intended to reduce delays at check in by letting patients virtually check in for an appointment in advance. Through their MyLVHN

account, a patient can confirm demographics, medications and allergies; they can pay their co-pay; and they can complete any patient entered questionnaires (PEQs) assigned to them. **Future state:** eCheck in patients will be able to print a barcode and scan in as “arrived” at their LVPG practice.

- **Virtual Visits:** This visit type (akin to a very secure Skype experience) will eventually be available for patients for non-emergency types of concerns. However in the meantime, [virtual check-out](#) will be piloted in the near future by one of our busy LVPG surgical groups for low-risk patients. Further pilot programs will also test this functionality so the patient experience is refined and customized for LVHN.
- **eVisits:** The eVisit is currently being piloted by [LVPG Internal Medicine—3080 Hamilton Blvd.](#) and [LVPG Family Medicine—Cetronia Road](#). An eVisit is an option if you have a non-urgent problem that doesn't usually require an in-person visit. Instead of going to the office, you will answer a clinically validated questionnaire related to the type of problem you are experiencing:
  - Cough/cold
  - Red eye
  - Urinary problems
  - Vaginal discharge
- After completing and submitting the questionnaire on your MyLVHN account, your health care provider will review and then reply through MyLVHN with care instructions.
- **Open Scheduling:** On the near horizon, open scheduling will be available and accessible from a provider's [LVHN Find a Doctor](#). In this scenario, a patient will be able to click a button on the provider's page schedule an appointment. This functionality is all about ease of access to our practices, providers and medical resources.

# Terry's Take: Innovation Needs You and You and You

BY [TERRY CAPUANO](#) · MAY 11, 2016



Innovation is a word that might trigger thoughts of a major breakthrough in technology involving devices like computers or smart phones. While these innovations have had a dramatic impact on our lives, it is the generation of ideas and the testing and application of them that makes a difference, every day, in those we encounter in health care.

What is your role in innovation? It doesn't matter the title you hold here at LVHN, we all have a role in

developing, nurturing and launching innovations. All of us.

## Developing Innovations

When I am on gemba walks, I hear about the ways colleagues think on their feet and improvise when situations call for it. That sort of nimble problem-solving is innovation happening in real-time. To help our organization cultivate a climate that inspires innovation, the March Leader to Leader meeting devoted significant time to a presentation about innovation. You can [read the full article here](#) and [watch video](#) that was shot that day, but suffice it to say, your ideas are important to help us remain a viable and competitive health care provider, all while ensuring an excellent patient experience. It's a tremendous task, but one we must take on. To help us, several initiatives are in place.

For instance, LVHN's zeal for innovative ideas led to the development of a formal home to incubate them: the [Air Products Center for Connected Care and Innovation at LVHN](#). CCCI was launched in late November 2015 as the place to vet, develop and help implement innovative ideas that can help transform health care.

In the coming months, CCCI-inspired virtual visits (Skype-style but with added security protection) will be pilot-tested in a few LVPG locations. Those test projects will help identify any issues patients may experience using these tools. That feedback will then inspire innovative thinking to improve the patient experience. I am looking forward to seeing how we will successfully use technology in this new care model and others to come.

## Nurturing Innovations

Pilot projects conducted at limited locations have been hugely helpful to nurture innovations that our Network wants to pursue. Last year, pilot projects at 14 practices (16 sites) helped LVPG test and subsequently launch MyLVHN across all ambulatory sites. Recently this same type of trial run paradigm was used to test and implement patient entered questionnaires (PEQs), another patient-focused initiative that helps us help improve patient care and experience. Pilots help tell us what we need to do before we scale-up and roll-out a new initiative to the entire organization.

Right now, colleagues on 5T at LVH–Muhlenberg and 6K at LVH–Cedar Crest are pilot testing an Epic application that integrates MyChart® Bedside with features of the widely-used LVHN ROADMAP, a printed communication tool. Even though ROADMAP is beloved, colleagues are seeking ways to make it



*Donna Rodenbaugh and Elke Burrough, explain MyChart Bedside to a patient.*

even better using innovative technology. In this case, the Bedside application is accessed using a tablet computer that is assigned to patients in their rooms. Securely posted information covers touch points that are important to patients: the tests for that day; the names and photos of the care team; the patient's medication list. Using the tablet, a patient (and his or her family, if present) stays informed about – and engaged in – their care. When the patient is discharged, the inpatient discharge summary will transfer to the patient's MyLVHN account, continuing that engagement into the outpatient setting. Patient feedback has already led to a few improvements that will make the patient experience even better with this program.

In each of these cases, colleagues are helping nurture new ideas while finding the best ways to offer (or improve) them. When new ideas are presented in your area, do what you can to help nurture them so they can be fairly assessed.

### **Innovation can be High-Touch, too**

Technology and innovation seem joined at the hip, but innovation doesn't have to rely on technology to make a big impact. What innovation **does** rely on is taking an idea and putting it into action. Our network's sustainability specialist, Katie Velekei, is working with a sewing club at Dieruff High School in Allentown to reuse blue wrap that protects cleaned surgical instruments but is removed prior to surgery. We go through TONS of this waterproof product every year and until now, that material was recycled. Velekei wondered if it could be put to better use. Thanks to innovative thinking, a community partnership – and saying “Yes,” more than saying, “No” – it is. The *Sew What* club at Dieruff is making ponchos, bags and other items that will be given to homeless individuals by LVHN's Street Medicine program. This innovative project helps students make an impact in the lives of others, while at the same time they are putting a serviceable material to a better use, all because inspiration led to an innovation.

## Sharing Innovative Ideas

You've heard the one about, "If a tree falls in the forest but no one is around to hear it, does it make a sound?" Same thought process goes for ideas – they need to be expressed or they fall like trees unheard.

Do you have ideas that could improve patient care or work processes? Make sure you share them!

Here are possible pathways to take:

- Discuss ideas and innovations at team meetings or directly with your manager.
- Epic optimization ideas should be shared with your department's leadership.
- Share your innovative ideas with your department's leadership so they can move them to the attention of the Air Products CCCI.

Another alternative: Post your ideas right here in the comments section. As a community of colleagues, we can then consider how your innovation might help us on our mission to comfort and care for people in our area and discuss ways to hone your idea further. Innovating health care is a process that not only needs your help, it requires it.

Thank you for all you bring to our innovation efforts,

Terry



*Terry Ann Capuano*

**ABOUT ME:** My name is Terry Capuano, RN and I am the executive vice president and chief operating officer at Lehigh Valley Health Network (LVHN). I have worked at LVHN for 30 years, serving as COO for the last five years. I greatly enjoy meeting colleagues, sharing stories and enhancing relationships throughout the network. [Learn More](#)

# Professional Legacies: 2016 Friends of Nursing Award Recipients Accomplish the Exceptional

BY [JENN FISHER](#) · MAY 13, 2016

“Legacy” was the theme of our 2016 Friends of Nursing Celebration, and our award recipients each accomplished their exceptional professional legacies in their own ways. Each week on LVHN Daily, you’ll have a chance to meet some of our 2016 Friends of Nursing award recipients and learn from their stories. Here are this week’s featured recipients:

## **A Transformational Leader**

When LVHN launched the University HealthSystem Consortium and the American Association of Colleges of Nursing (UHC/AACN) Nurse Residency Program™ three years ago, there was an awareness of the evidence-based practice (EBP) project requirement within the curriculum. However, we had no concept of the magnitude of this requirement.

As a PhD-prepared nurse with a passion for nursing research, EBP and nursing quality, **Carolyn Davidson**, patient care services administration, developed a vision, expectations and processes for the EBP projects. To date, 100 EBP projects have been completed, with more than 60 projects in various stages of development by current nurse residents. Accomplishments like this helped earn Davidson the **Anne Panik Transformational Leadership Award**.



These projects have impacted clinical practice and patient outcomes beyond our wildest expectations and earned us an Exemplar in our recent Magnet redesignation. The appraisers stated our EBP curriculum, projects themselves and outcomes are the most robust they've ever seen.

Davidson's nominator, Cindy Cappel, wrote, "A successful program is rarely the efforts of a single individual, but in this case, a single individual, Dr. Davidson, is responsible for the unprecedented, unanticipated and unimaginable success of the EBP portion of the Nurse Residency Program curriculum. That is what transformational leadership is all about!"

### **Mirroring Nightingale's Legacy**

Celebration of our nursing legacy must include a tribute to the founder of modern nursing, and we do that through presentation of **The Florence Nightingale Exemplary Professional Practice Award**. Exemplary professional practice is another of the Magnet model components. As recipient of this prestigious award, **Debra Peter**, clinical informatics, will have her name added to the sculpted bust of Florence Nightingale displayed on the first floor of LVH–Cedar Crest's Kasych Family Pavilion.



Peter represents so many things associated with Nightingale's legacy.

- For example, Nightingale championed the nursing profession and worked tirelessly during the Crimean War. Peter was a champion for Epic and served as the front line Epic clinical practice management (CPM) champion, often working long days and nights.
- Nightingale was a prolific author. Peter's most recent article on TeachBack spawned more than 70 consultation requests, including from hospitals in Italy and Australia.
- Nightingale spearheaded nursing research. Peter recently coordinated an IRB-approved study to determine the effect of the CPM model on our professional practice.

### **Outstanding Nurse Certification Results**

Evidence shows that nurses who are board-certified in their practice specialty positively impact patient outcomes. Magnet designation requires that our health network supports nurses seeking board certification and that the number of certified nurses is continuously improving. This year, two units received certification awards. The awards considered the highest number of eligible board-certified nurses and the most significant increase over the previous year.



The first **Award for Professional Certification** recognizes a department with more than 15 staff members. The award donor, The Allentown Hospital School of Nursing Alumni Association, presented this award to colleagues from the **Children's ER**.

**The Tewari Family Award for Professional Nursing Certification** recognizes a department with less than 15 staff members. This award was presented to **inpatient wound services**.



### Caring for Caregivers as Well as Patients

**Janet Williams** had an exciting 2015. She completed her baccalaureate degree in nursing, was awarded the outstanding student award and became a first-time grandmother.

After 40 years in the operating room – the last 12 at LVH–Muhlenberg – Williams has not forgotten the little things that make a big difference. For example, she meets with patients in the pre-op area to establish a rapport and then sets an alarm on her watch as a reminder to go out and speak with family members after the surgery is finished. She also feels strongly that it is important to care for the caregiver.



### Building Bridges Between Nurses, Doctors, Patients and Families

Our Magnet appraisers had lunch with physician leaders and said they had never visited a hospital where physicians praised nurses as highly as our physician did. This respect is exemplified by **The Professional Excellence Council Physician Friends of Nursing Award**, which recognizes a physician who demonstrates

collaborative practice with nurses to promote the best practices and associated optimal patient outcomes.

Medical-surgical ICU clinical nurse Bev Tibbott

nominated this year's recipient, **Rita Pechulis, MD**, on behalf of the entire unit, for which Pechulis serves as medical director.



Tibbott detailed a situation in which she was assigned to a patient whose family member had been disrespectful to the nurses. As this continued, the family member made negative and combative remarks to and about her.

Tibbott wrote, "Other staff members attempted to intervene but were unsuccessful. Thankfully, Rita was the attending physician on service. Despite the increased weekend workload, Rita conducted more than an hour long meeting with the family, after which she informed me of the discussion. She told them I was one of the best nurses in the unit, with over 30 years of experience, and that I had served time in the military defending our country. I had no idea Rita knew my background and credentials. Through her actions, Rita built a bridge between the health care team, patients and families, as she does so effortlessly, selflessly and frequently."

### **A Deeper Meaning of 'Academic Excellence'**

For **The Dr. John M. Eisenberg Award for Excellence as a Student Nurse**, faculty members of our local baccalaureate nursing programs were asked to nominate a nursing student. This year's recipient, **Therese Christine O'Loughlin** from DeSales University, was selected by competition to speak at a university-wide academic excellence program. The speech was requested to address, "What academic excellence signifies."



The message of the speech showed the heart of this young woman, who encouraged those present to go beyond academic excellence to "take the time to see the person," sharing that this is when "true excellence has been reached."

The ending of the speech speaks to seeing the face of someone who suffered an unpleasant event. She wrote, "Go beyond academic excellence and live out the excellence of truly seeing each person you encounter. Start here at DeSales, but take it into your careers. All of you have proved your ability for attaining excellence. Now go that step further."

# Join Our Memorial Day Observance on May 25

BY [GERARD MIGLIORE](#) · MAY 10, 2016

**All colleagues are invited to join LVHN's fourth annual Memorial Day Observance on May 25 to honor those who died serving our country during war. While the annual federal observance is the last Monday in May, our event is Wednesday, May 25, so more colleagues can participate.**

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The 20-minute ceremony will take place live in the LVH–Cedar Crest auditorium at noon and will be simulcast to the following locations:

- LVH–17<sup>th</sup> Street auditorium



- LVHN–Mack Boulevard auditorium
- LVH–Muhlenberg, the Frank Banko Educational Conference Center room D
- LVHN–Tilghman third-floor conference room
- LVH–Hazleton Employment & Technology Center, third-floor education room
- LVHN–One City Center (Renaissance Hotel fifth-floor ballroom)
- LVH–Cedar Crest ECC room 10 (auditorium overflow )

Originally established to honor Civil War dead in 1868 and called Decoration Day, the holiday later was renamed Memorial Day to recognize the fallen from all conflicts. Our observance will include a Veteran Colleague Honor Guard with representatives from each of the five U.S. military service branches: Army, Marines, Navy, Air Force and Coast Guard.

All service colleagues (active duty military, honorably discharged veterans, and members of the guard and reserve) are invited to wear their uniforms (in whole or in part; caps and fatigue jackets acceptable, class A, B or C acceptable) to work on May 25. Consult with your supervisor, as appropriate, if you plan to wear your uniform.

# Go Behind the Scenes at LVHN – Read the Spring 2016 Magnet Attractions

BY [JENN FISHER](#) · MAY 10, 2016

So much work happens behind the scenes here at LVHN. So let's take a peek. Inside the Spring 2016 edition of Magnet Attractions, you'll get an insider perspective for several nurse-centric events: Friends of Nursing interviews, our fourth Magnet® designation journey, and how radiation oncology nurses turned a conference learning into an evidence-based practice project.

Available exclusively online, Magnet Attractions can be read by:



- [Downloading the entire issue](#) (in PDF format) on the intranet home page (LVH.com)
- [Printing the PDF](#) and read it at your desk

You also can get a sneak preview by reading two stories below:

*[Rounds With Anne](#)*— Senior vice president of patient care services and chief nursing officer Anne Panik, RN, will share her behind the scenes perspectives about the Magnet designation announcement. This is also Anne’s final column for Magnet Attractions; read her message to you.

*[Professional Milestones](#)* – Publications, poster presentations and other accomplishments from your colleagues.

If you’d rather read Magnet Attractions stories here on LVHN Daily, we’ll present a new story from this issue once a week starting next week. This will allow you to read each story online. In addition, all Magnet Attractions stories will appear on the [nursing section](#) of LVHN Daily.

Once the stories are posted, you can make comments and let us know your thoughts on Magnet Attractions.

### **Rounds with Anne: Behind the Scenes**

I was alerted to expect a phone call at 2 p.m. on February 17. This was not just “a call”; it was, “The Call.” We would learn if we achieved Magnet® re-designation for LVH–Cedar Crest, LVH–17th Street, LVH–Muhlenberg, LVHN–Tilghman, Home Care and Hospice. Our team worked behind the scenes. We booked meeting rooms and auditorium spaces. We invited patient care services colleagues, physicians and LVHN leadership to attend. We prepared announcements for email, LVHN Daily and Lehigh Valley Health News. We ordered cupcakes. We even planned a video.



When February 17 arrived, we heard our joyous news in the company of hundreds of colleagues: We achieved Magnet recognition No. 4 together. What a wonderful moment! Thanks to everyone who worked behind the scenes to make it happen.

This issue of Magnet Attractions spotlights what goes on behind the scenes every day. For instance, colleagues in radiation oncology regularly care for patients who develop radiodermatitis, a painful side effect of treatment. Behind the scenes, they learned about a marigold-based treatment that had the potential to reduce the need for a topical steroid. They took that information and prepared an evidence-based project that compared the two. The compelling results were part of our Magnet evidence.

In this issue, you'll also go behind the scenes to learn what it's like if you are a Friends of Nursing nominee or one of our dedicated volunteer interviewers.

Every day at LVHN, a great amount of work occurs behind the scenes. I appreciate every detail you bring to your professional practice, because it directly benefits our patients. They are the people who see the end results of your dedication and marvel at it.

P.S.: This is my final "Rounds with Anne" column.

As you've likely heard, I'm retiring in June and taking on a brand-new role as "chief executive" of my life! I have loved nearly every day as your chief nursing officer (CNO). Some days were more challenging than others, but the joy I feel thinking about everything we – and specifically you – have accomplished in the six short years that I have been CNO is truly gratifying.

Since 2010, the number of bachelor's prepared RNs has increased from 45.3 percent to 60 percent; the number of doctor of nursing practice candidates has grown from 0 in 2010 to 15 who will complete their doctoral degrees in 2016. (Plus 10 additional colleagues are currently enrolled in DNP programs.) Our certification program has helped bring the percentage of direct care nurses who have earned board certification up to 48 percent. (Among nurse leaders, that percentage is 90 percent.)

As a team, we have earned four consecutive Magnet® designations and established a nurse residency program in 2013 that has achieved an outstanding 91 percent retention rate among our resident nurses.

I will always admire the great passion you bring to your work, and I look forward to seeing the wonderful milestones you achieve in the next phases of your careers.

## **Professional Excellence**

### **Awards**

Spirit of Hospice Award

Pennsylvania Hospice and Palliative Care Network (PHPCN) Annual Conference in Harrisburg, Pa., in April 2016.

Anna Fernandez, CNA, Inpatient Hospice

Brigitte Naratil, CNA, Inpatient Hospice

### [Circle of Excellence Award](#)

American Association of Critical Care Nurses (AACN) National Teaching Institute & Critical Care Exposition in New Orleans, in May 2016.

Maureen Smith, MSN, RN, CNRN, Patient Care Specialist

### **Interview**

“Dual-Focus Nursing Peer Review Model Drives Performance Improvement and Enhances Care Quality,” for [Healthcare Business Insights](#), in January 2016.

Carolyn Davidson PhD, RN, CCRN, APRN, CPHQ

Kim Hitchings, MSN, RN, NEA-BC

Oral Presentations

“[Integrating Evidence into Practice through a Nurse Residency Program](#),” at the American Nurses Association 7th Annual Nursing Quality Conference in Buena Vista, Fla., in March 2016.

Carolyn Davidson, PhD, RN, CCRN, APRN, CPHQ

Patricia Hoak, MSN, RN, NEA-BC

Matthew Briscese, BSN, RN

“Going Above and Beyond: The Practical Steps and Benefits of Setting Your Nurse Residency Program Apart,” at the Vizient/American Association of Colleges of Nursing Nurse Residency Program Meeting in Bonita Springs, Fla., in March 2016.

Cynthia A. Cappel, MSN, RN-BC, NE-BC

“Creating a Geriatric Focused Model of Care in Trauma with Geriatric Education,” at the 19th Annual Society of Trauma Nurses Conference, TraumaCon in Anaheim, Calif., in March/April 2016.

Kai Bortz, MSN, RN, CMSRN, CNL

Joseph J. Stirparo, MD

“[Transforming Care Through Telehealth – The Tipping Point is Now!](#)” at the American Organization of Nurse Executives in Ft. Worth, Texas, in March/April 2016.

Jackie Fenicle, MSN, RN, NEA-BC

Sharon Kromer, BSN, RN, CCRC, CTC

“Clustering Care Promotes Sleep and Enhances Patient Satisfaction,” at the 2016 Annual NICHE

Conference in Chicago,  
in April 2016.

Tracie Heckman, MSN, RN, CMSRN  
Arielle Cratsenberg, BSN, RN

“Creating a Geriatric Focused Model of Care  
in Trauma with Geriatric Education,” at the 2016 Annual NICHE Conference in Chicago,  
in April 2016.

Kai Bortz, MSN, RN, CMSRN, CNL

“Advance Directives: Implementing a Staff Nurse Driven Educational Intervention,” at  
the 2016 Annual NICHE Conference in Chicago, in April 2016.

Angela Latorre, BSN, RN, CMSRN  
Justine Barnes, BSN, RN, CMSRN

“Regulatory and ONS Standards Related  
to Hazardous Drugs – Are You and Your Patients Safe?” at the Oncology Nursing Society 41st Annual  
Congress, in San Antonio, in April/May 2016.

Tiffany Achenbach, MSN, RN, CMSRN  
Amy Yaple, RN

“Impacting Oncology Nursing Practice  
and Outcomes Through an Innovative and Robust Nurse Residency Program,” at the Oncology Nursing  
Society 41st Annual Congress in San Antonio, in April/May 2016.

Jennifer Lanter, BSN, RN  
Ashley Owoc, BSN, RN

“Mapping the Journey of a Pediatric Intermediate Care Unit,” at the Society of Pediatric Nursing 26th  
Annual Conference  
in Minneapolis, in April 2016.

Heather Engiles, BSN, RN  
Claire Lollis, BSN, RN, CPN

### **Poster Presentations**

“Helping Nurses Cope with Patient Death: Coping Resource Bundle,” at the Vizient/AACN Nurse  
Residency Program Meeting in Bonita Springs, Fla., in March 2016.

Brittany Esgro, BSN, RN  
Amy Gust, BSN, RN  
Kate Saunders, BSN, RN  
Courtney Yankelitis, BSN, RN

“Annual Unit-Based Validation Using Simulation,” at the 19th Annual Society of Trauma Nurses

Conference, TraumaCon in Anaheim, Calif., in March/April 2016.

Linda Reinhart, MSN, RN

“Project HUSH—Helping Understand Sleep Heals,” at the Eastern Nursing Research Society 28th Annual Scientific Sessions in Pittsburgh, in April 2016.

Marian Daku, BSN, RN, CCRN

Denise Davis-Maludy, MBA, BSN, RN, CCRN

Eva Fox, BSN, RN

“There’s No Place Like Home: Meeting the Needs of Long Term Patients in an Acute Care Facility,” at the American Association of Neuroscience Nurses 48th Annual Educational Meeting in New Orleans, in April 2016.

Holly D. Taviani, MSHSA, BSN, RN, CNRN

“EMR Downtime Protocol,” at the American Nursing Informatics Association 2016 Annual Conference in San Francisco, in April 2016.

Susan Teti, MSN, RN

“EMR Breastfeeding Screens,” at the American Nursing Informatics Association 2016 Annual Conference in San Francisco, in April 2016.

Cheryl Kraemer, MSN, RN-BC, RNC-OB

“Challenges and Successes: Integrating Patient Education in the EMR,” at the American Nursing Informatics Association 2016 Annual Conference in San Francisco, in April 2016.

Joanne Stewart, BSN, RN-BC, RNC-OB

“Clinical Readiness—Unique Strategies to Empower Clinical Transformation for EHMR Implementation,” at the American Nursing Informatics Association 2016 Annual Conference in San Francisco, in April 2016.

Marjorie Lavin, MS, RN, CNRN

### Specialty Certifications

Michelle Applegate, RN, CMSRN

Maureen Bamert, RN-BC

Alison Bedekovich, RN, CMSRN

Felicia Bennett, RN, CMSRN

Caitlin Brochu, RN, CMSRN

Jonathan Butron, RN, CMSRN

Alisa Circosta, RN, CMSRN

Rebecca Dale, RN, CMSRN

Jessica Dalton, RN-BC

Cara Eckhart, RN, CMSRN

Anna Folk, RN, CPN

Stephanie Forst, RN, CMSRN

Kirsten Gustafson, RN-BC

Stacia Horvath, RN, CMSRN

Kristen Kelly, RN-BC

Cheryl Kraemer, RN-BC

Michelle Martin, RN, RNC-NIC

Patricia Mitzak, RN-BC

Jean Park, RN, CEN

Robert Ramos, RN-BC

Stephanie Remy, RN, CMSRN

Joanne Stewart, RN-BC

Katie Turner, RN, CMSRN

Nicole Urban-Miller, RN-BC

Julianne Wagner, RN, CEN

Amy Yaple, RN, CMSRN

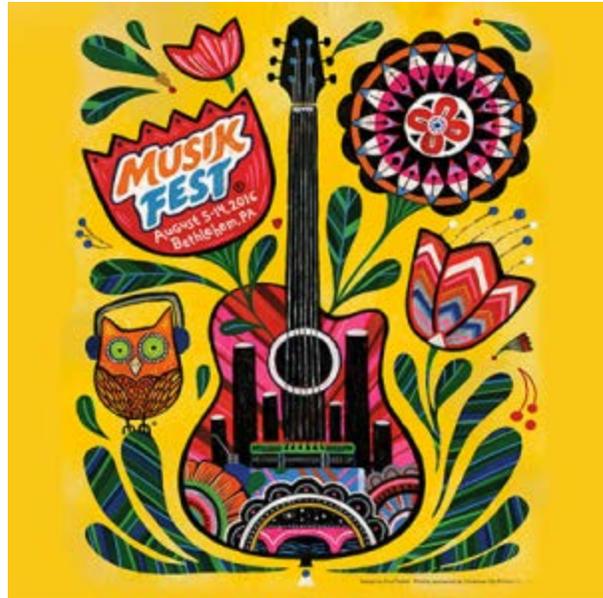
# A Festivus for the Rest of Us: Be a Musikfest Volunteer

BY [GERARD MIGLIORE](#) · MAY 10, 2016

LVHN is once again the official health care provider for Bethlehem's popular Musikfest, Aug. 5-14. That means volunteers are needed to staff the four LVHN health tents. It's a chance to support LVHN's mission, hear some great music and have fun interacting with our community.

Both clinical and nonclinical colleagues are needed for shifts ranging from 2 ½ to 4 hours. Licensed colleagues (such as registered nurses, physicians and physician assistants) will be appropriately compensated.

If you are a non-licensed colleague you'll receive a free health network T-shirt and \$10 in food tickets for each



shift worked. It's August, so it's likely there's no soup for you, but there will be plenty of other tempting treats, from pierogies to pretzels. And if those pretzels are making you thirsty, an endless variety of cool and refreshing beverages await.

See the links below for additional details and available shifts. Signing up is easy. Provide us with a few basic facts like your employee ID and department cost center, and yada, yada, yada, you'll be ready to volunteer.

Thanks and see you at Musikfest.

Additional information:

# Share and View Photos on LVHN Daily

BY [RICK MARTUSCELLI](#) · MAY 11, 2016

A colleague is speaking at a national conference. Your department is celebrating an outstanding achievement.

A member of your team is named the recipient of a prestigious award.

What do all these things have in common? They're all great photo opportunities. And where can you share these photos? On LVHN Daily, of course.

LVHN Daily's colleague photo gallery is the perfect place to share images and information about what's going on around you. It's also a great place to learn about the awesome (and fun) things colleagues are doing throughout our health network.



A graphic with a pink and purple gradient background. The text "Submit Your Photos for the LVHN Daily Gallery!" is written in white, sans-serif font, centered on the image.

# Submit Your Photos for the LVHN Daily Gallery!

## Where to find it

The four photos most recently submitted appear on LVHN Daily's home page at the top of the right-hand column. Click on a photo to expand it, and read a photo caption. To view all the photos that have been submitted, click ["View all photos."](#)

## How to share a photo

In the right-hand column of LVHN Daily's home page, click ["Submit Now."](#) Then, share your name, email address and message. In the message section, tell us who is in the photo and describe why the photo was taken. There's no need to write like Shakespeare. We'll simply use the info you submit to write a short caption. Finally, attach your photo and click "Send."

## Things to keep in mind

- **Professional camera not needed.** Cell phone photos work perfectly.
- **Work-related stuff only, please.** Although photos of your kids and pets are cute, your personal Facebook page is a better place for them. Photos on LVHN Daily should show the great work, amazing accomplishments and camaraderie of colleagues.
- **Be timely.** No one wants to see a photo of your department's Christmas tree decorating contest in July. The sooner you send your photo, the better.
- **Show your passion.** Be creative and have some fun when snapping a picture.

So start taking and sharing photos today. And visit LVHN Daily regularly to see what colleagues are up to. After all, a picture is worth a thousand words.

# Attend the Employee College Fair

BY [RICK MARTUSCELLI](#) · MAY 12, 2016

Are you thinking about going back to school but are unsure where to start? Plan to attend the 2016 Employee College Fair. All colleagues are welcome to stop in any time throughout the event. Here are the details.

## **2016 Employee College Fair**

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Wednesday, May 18

11 a.m.-6 p.m.

LVH – Cedar Crest's Kasych Family Pavilion ECC  
rooms 6, 7 and 8

