
Lehigh Valley Health Network

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Magnet Moments
2007

Lehigh Valley Hospital and Health Network
Discover the **Inspiration** Behind Our Care

We are a "magnet" for clinicians, because we support and reward outstanding practice. And we are a "magnet" for patients. They are our highest priority and the motivation and inspiration behind our successes.

Clinical Services includes:
- Patient Care Services
- Pharmacy Services
- Regional Heart Center
- Home Health Services
- Care Continuum
- Trauma and Burn Services

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Magnet Moments 2007
This year we've talked and heard a lot about inspiration. For our Friends of Nursing Celebration, we were asked who inspires us to be great caregivers. I always think of Bert Stichter, R.N., my predecessor (pictured on the right with me at the Friends of Nursing Celebration). It was Bert who gave me my first job at Lehigh Valley Hospital in 1982. I learned from her how to dream big and then find ways to make those ideas happen. For instance, she developed our critical care internship program—a new concept in hospital education at the time. Today it's expanded into other specialties.

I'm inspired by all of you, as well. I look back on our accomplishments each year with sheer amazement. Throughout the pages of this clinical services annual report for 2007, you'll discover just how talented and compassionate you are. You'll also see the outcomes of what we do, including patient satisfaction scores, medication error rates and patient fall rates. And you'll see how we measure up to our goals.

Most importantly, you'll read the stories behind our care, as told by colleagues, a patient and a family caregiver. They share what inspires them to ensure all patients receive the best care. As we reflect on the past year, these stories remind us that patients are at the center of everything we do.

Over the past year, we've excelled in some areas, while there's room for improvement in others. But that's what makes us a Magnet hospital. We're able to ask: How can we continue to improve? And then we do it! Guiding us are our Forces of Magnetism, defined by the American Nurses Credentialing Center. Throughout this report, you'll learn how our patient care exemplifies these Forces (also outlined in our index to the left).

As we look forward to 2008, I encourage you to draw upon your inspirations and then pass them on. Find ways to inspire others to grow, develop and enhance patients' and families' experiences here.

As always, thank you for making 2007 another great year!

Senior Vice President, Clinical Services
Quality of Clinical Leadership

We are knowledgeable, strong risk-takers who follow a well-articulated, strategic and visionary philosophy in the day-to-day operations. We are leaders at all levels and strong advocates for our colleagues and patients.

Setting Priorities for Our Future

In 2005, nursing staff endorsed a vision for nursing. It defined 29 goals for nursing through 2016, which include nurse-to-patient ratios, research, work environments and more. During the past year, members of the R.N. Advisory Council (made up of nurses representing each unit), as well as nursing leaders and educators, prioritized what they want to concentrate on first (see chart below).

“They agreed to start with retention strategies, patient and staff satisfaction, respect and recognition,” says Molly Sebastian, R.N., vice president of patient care services, who is leading this project called Future Search. (She also presented the initiative at the 2007 annual Magnet Conference in Atlanta.) “By next summer, we will have strategies in place to address these goals.”

Nursing Priorities

R.N. Advisory Council members, nursing leaders and nursing educators prioritized the Future Search goals they will begin to work on in 2008.

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<tr>
<th>R.N. Advisory Council</th>
<th>Leaders and Educators</th>
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<tr>
<td>Family presence</td>
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<td>Retention strategies</td>
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<tr>
<td>Respect and recognition</td>
<td>Patient and staff satisfaction</td>
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<tr>
<td>Safe nurse-to-patient ratios</td>
<td>Quality patient care based on evidence</td>
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<tr>
<td>Advanced technology</td>
<td>Advanced academic degrees</td>
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Becoming culturally aware—In April, caregivers spent a week in Puerto Rico, learning about its culture and traditions in order to better care for patients. On the trip were: (front row) Eric Gertner, M.D., his wife, Debbie, Rory Marraccini, M.D.; (back row) Krista Hirschmann, Doreen Svanda, Abby Letcher, M.D., Pat Atno, Damary Patton, R.N., Jarret Patton, M.D., Margaret Haddinger and University of Puerto Rico professor Carlos Rosado (a new friend). Here, they explore Castillo San Cristóbal, a historic fort in Old San Juan.
Becoming Culturally Competent

As the Lehigh Valley becomes more culturally diverse, staff members are becoming more culturally educated. "In order to provide excellent care, we need to be culturally competent," says case manager Cynthia Atamian. She and Jarret Patton, M.D., are participating in a Cultural Competence Leadership Fellowship from the Health Research and Educational Trust. They are learning strategies for addressing the challenges of caring for diverse patients and sharing them with colleagues.

Atamian and Patton also are members of the LVHHN Cultural Awareness Implementation Team formed last year. Its goal: to develop curriculum to teach staff how to ask the right questions in order to be sensitive to patients' cultural needs.

To learn more about our growing Puerto Rican population, 10 staff members (including Patton) traveled to the island last spring to experience its culture firsthand. They toured hospitals, met with health care professionals and dined with people from all walks of life.

Home Care Patients

By Charlene Bergstresser, R.N.
Director, planning and program development for Home Health Services

A highlight of my home care career has been representing the Lehigh Valley on a Pennsylvania Home Care committee that helps patients across the Commonwealth. Our task: develop legislation that standardizes the reimbursement for home care providers for tele-medicine services provided to underprivileged patients. After months of work, our plan was introduced statewide. It identifies three levels of home-based tele-medicine, each with a different reimbursement amount. I'm confident by working closely with government and providers, patients will receive the health care they need at home, regardless of their ability to pay. I am honored to be part of such a team.
Patient-Centered Construction

When it was time to draw up the blueprints for our new seven-story patient care tower, the Kasych Family Pavilion, our nurses, other caregivers, former patients and families were the architects. They recommended ways units could be designed to maximize efficiency and help patients and visitors feel comfortable. It was caregivers who recommended spacious rooms with wider doorways, patient lifts in every room, and having multiple nurses' stations per unit to keep noise levels down. They also toured mock patient rooms and suggested improvements for the new rooms before they were constructed. Their involvement ensured the newly opened Kasych Family Pavilion was built with a focus on the needs of patients and their families.

Organizational Structure

Our structure is generally decentralized, and shared and productive decision-making prevails. We are dynamic and responsive to change. We have strong clinical representation in committee structure, and our senior vice president for clinical services is a member of senior management.

Taking Action With Satisfaction

The results of last year's employee satisfaction survey for nurses are very good, especially compared to other hospitals. Nurses were asked to agree or disagree, on a scale of 1 to 5, with many statements. Below are some results (5=completely agree, 1=completely disagree).

| Attribute | Score | %
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<tbody>
<tr>
<td>I would recommend LVHNH to a friend of relative who needed care.</td>
<td>4.16</td>
<td>99%</td>
</tr>
<tr>
<td>I'm proud to tell others that I work for LVHNH.</td>
<td>4.45</td>
<td>98%</td>
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<tr>
<td>My immediate manager/supervisor consistently stresses the importance of patient satisfaction.</td>
<td>4.25</td>
<td>90%</td>
</tr>
<tr>
<td>My co-workers have a great deal of interest in satisfying patients.</td>
<td>4.00</td>
<td>88%</td>
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Results were used to tabulate scores for the four items (below) that best determine how nurses feel about their workplace.

| Key Indicator | LVHNH Score | Nationwide Average | %
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<tbody>
<tr>
<td>Overall satisfaction</td>
<td>4.39</td>
<td>3.59</td>
<td>27%</td>
</tr>
<tr>
<td>Retention (Desire to be working for the hospital one year from now)</td>
<td>4.32</td>
<td>3.81</td>
<td>84%</td>
</tr>
<tr>
<td>Morale</td>
<td>4.13</td>
<td>3.88</td>
<td>91%</td>
</tr>
<tr>
<td>Engagement</td>
<td>3.25</td>
<td>3.08</td>
<td>83%</td>
</tr>
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"Because we're Magnet, we celebrate our strengths and strive to do even better by finding ways to improve our care," says Molly Sebastian, R.N., vice president of patient care services.

Therefore, each unit celebrated its successes and then created action plans to make changes in lower-scoring areas. Issues that arose network-wide, like equipment availability, are being addressed by managers, staff and the R.N. Advisory Council.
**Battling Bacteria**

More than 70 percent of the bacteria that cause hospital-acquired infections are resistant to at least one of the antibiotics most commonly used to treat them, according to the National Institutes of Health. “Drug resistance is, in part, the result of the overuse and misuse of anti-infection medications and has a significant impact on patient outcomes,” says clinical pharmacy specialist Jason Laskosky (below, right).

So when he recognized an increased interest from his colleagues to implement an antimicrobial stewardship program, he jumped at the opportunity to get involved. Laskosky and a multidisciplinary team of physicians, pharmacists, nurses, information systems and data management specialists developed a program to optimize clinical outcomes and minimize unintended consequences of antibiotic use, such as drug toxicity and the emergence of resistant organisms.

Facets of the program include education and clinical pathways development. Another component involves using computer-assisted physician order entry (CAPOE) to place limits on the use of specific antibiotics and require approval for others. Flash screens notify the physician of approved medications and help select the best dose for the patient. “This program helps ensure every patient receives the most appropriate medication for the best possible outcome,” says Laskosky, pictured with colleagues Susan O’Neill, R.N. (left), and Renee Grow, R.N.

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**Ideal Patient Care**

By Gerard Migliore of Allentown

I've spent a lot of time in hospitals. I was born with a hereditary kidney disease. After having a kidney transplant 20 years ago, I'm doing great. Every six weeks I go to LVHHN to have blood drawn for tests. But I'm more than just a patient. I am one of 24 patients, family members and community leaders serving on the Patient-Centered Experience Advisory Council. Our charge: to help the hospital carry out its 10-year mission for creating the ideal patient experience by putting patients' needs and those of their families first.

This year, a team of hospital colleagues began evaluating more than 4,000 ideas—generated by network staff, patients and families—for enhancing patient care. With our help, hospital colleagues already are pursuing seven projects that include ideas for patient navigation, cultural competency, family presence and more.
Management Style

Our clinical leaders create an environment supporting participation. They encourage, value and incorporate feedback from staff at all levels. They are visible, accessible and committed to communicating effectively with staff.

No Nursing Shortage Here

LVHHN's vacancy rate for nurses, 3.4 percent, continues to be below the national average (which fluctuates between eight- and 12 percent). "We don't have a nursing shortage because of our reputation as a Magnet hospital and the many programs we offer," says Marilyn Guidi, R.N., director of staffing for patient care services.

These programs include various scheduling options including weekend-only shifts and eight- and 12-hour shifts, competitive pay and benefits, and educational opportunities. New this year, nurses have the opportunity to shadow someone on a unit where they are interested in working—even before applying for a position. (This was an outcome of a study to find ways to keep older nurses working longer. See page 19 for more details.)

Also, for the first time this year, human resources consultants and staff began conducting group interviews of G.N.s (graduate nurses). These allow staff to observe G.N.s interacting with others, and G.N.s the opportunity to meet other prospective staff. "G.N.s tell us they really like it," Guidi says. When G.N.s and R.N.s are hired for medical-surgical units, a nurse liaison—a new nonclinical position—stays in touch with them to answer their questions and help them acclimate to the network.

Mentoring New Nurses

By Nancy Tretter-Long, R.N.
Clinical resource specialist
LVH-Muhlenberg (left)

I enjoy my new role as a clinical resource specialist (CRS), a position created last year to help mentor and retain new nurses. My CRS colleagues and I work in the evenings and at night to help new nurses with everything from inserting an IV to solving problems independently. After being at the bedside for 25 years, I have found this position to be the best of both worlds. I use my experience to encourage nurses who are just starting out. I remind them that confidence doesn't develop overnight, but if they stick with it, they will succeed. I still learn something new daily, and what I've found to be most important is tapping the knowledge of other colleagues. When we work together as a team, we provide better care for our patients.

Following My Dream

By Chris Marakovits, R.N.
6T, LVH-Muhlenberg

After working as an officer manager for 21 years, I decided to follow my dream of becoming a nurse and enrolled at Cedar Crest College. I didn't know if I could do it, but I knew I wanted to make a difference in people's lives. As a new graduate, I was anxious whenever I faced new patient procedures that had not been covered in the classroom, but clinical resource specialist Nancy Tretter-Long, R.N., guided me. As a result, I've gained confidence in my abilities. Having access to clinical resource specialists has lifted the burden of challenging situations and allowed me to grow to be a better nurse.
Professional Models of Care

Our models of care give us the responsibility and authority for the provision of direct patient care. We are accountable for our own practice and coordination of care, and provide for the continuity of care. We consider patients’ unique needs and provide skilled clinicians and adequate resources to accomplish desired outcomes.

Somebody to Lean On

When Karen Good’s husband was deployed on a U.S. Navy vessel, their 3-year-old daughter, Stephanie, developed a high fever, wouldn’t eat or drink, and started hallucinating. Good (below, right) took her to the hospital where she was admitted. But her worries didn’t end there. The hospital policies prohibited her from bringing her 6-week-old daughter, Faith, in to visit during Stephanie’s week-long stay.

With family across the country, Good left Faith with church members during the day while she’d make the 90-minute trip to the hospital. Thankfully, her daughter made a full recovery.

Now 20 years later, Good and other clinicians are championing family presence to ensure situations like this don’t happen to patients like Asa (below, left), with his mother, Kristie Frantz. Instead of adhering to strict visiting hours, patients and/or family members can designate people allowed to be with their loved ones when they want, including during trauma resuscitation. Family presence was introduced hospital-wide in 2006, and colleagues currently are looking at ways to measure patient and family satisfaction.

Providing a Safe Discharge

By Miki Butler
Complex case manager

I’ve been exposed to social work for most of my life. My parents provided a loving home for children in foster care, and my sister became a social worker. Six years ago, I accepted a case manager position here, and a year ago, I moved into a newly created position: complex case manager. I help meet the needs of patients who have both medically and socially complex cases, such as patients with frequent admissions or who have no family support. Though my role is similar to a regular case manager, I work on fewer cases at a time to really help solve unique complex situations. But our goal is always the same: a safe discharge plan for all patients, regardless of how they get here or what they need.
Quality of Care

Quality is our organization's driving force. Our leaders provide an environment that positively influences patient outcomes, and our staff members believe they provide high-quality care to patients.

A Prescription for Efficiency

What's able to dispense the 50 most-prescribed drugs in seconds, reduce medication errors and track a prescription from order entry to pickup? It's the PharmASSIST automation and workflow technology at Health Spectrum Pharmacy at LVH–17th and Chew and LVH–Cedar Crest. "This system improves patient safety and frees up colleagues to spend more time answering patients' questions and concerns," says Brian Lenich, R.Ph., administrator, Health Spectrum Pharmacy Services.

The system, which also will be installed soon at the pharmacy at LVH–Muhlenberg, consists of two components: an automated medication-dispensing cabinet that saves the time normally spent to count pills, and workflow technology that uses bar-code and scanning devices to decrease errors. "Because the system is electronic, pharmacists like Paul Mattern, R.Ph., pharmacy manager at LVH–17th and Chew, (below), can see at a glance where the prescription is throughout the process or if it's been picked up," Lenich says.
The Case of the Missing Meds ... Solved!

Many of our patients are transferred among multiple patient care areas—from the emergency department to the operating room to medical-surgical units. Patients' medications, however, don't always follow them. So nurses must call the pharmacy to report the medications as "missing" and to request more.

"This was very dissatisfying, especially for nurses administering medications and pharmacy staff taking multiple phone calls and refilling the requests," says Lisa Durkin, Pharm.D., associate director of LVH–17th and Chew and LVH–Cedar Crest pharmacies. "Not to mention, patients didn't always get their medications in a timely manner." The worst time of the day was at 9 a.m. when patients receive their morning dosages—usually the highest medication distribution of the day.

So last year, nurses, pharmacists and pharmacy technicians teamed up to determine how to reduce the number of missing medications and the frustrations for all involved. They decided to provide nurses on units with a fresh, 24-hour supply of medications at 6:30 a.m., rather than at 10 a.m. That way, patients' 9 a.m. dosages were guaranteed to be there—even for patients who may have moved to the unit during the night (without their medications).

The plan worked so well, the number of missing medications reported dropped 43 percent between March and October.

"Staff are extremely pleased at our progress, and nurses welcome less interruptions during medication administration," Durkin says.

Missing Medications
A new plan helped reduce missing medications by 43 percent.

Helping Women
By Lauren Garges, M.S.P.T.
Physical therapist, Pelvic Floor Rehabilitation

Every day I'm thankful I have a rewarding job. I help women who have pelvic pain, bladder-related pain or urinary incontinence. So many women don't realize help is available. They don't have to suffer in silence.

Through our Pelvic Floor Rehabilitation program, I'm able to help women enjoy their lives again. I teach them about their condition and reassure them they're not alone. With therapy, I help them regain strength and control of their pelvic floor muscles, and educate them on how to progress when therapy is complete.

One woman was so happy with her successful treatment she and her husband brought me flowers. It's good to know I can improve the quality of life for my patients.
Quality Improvement

We have structures and processes for the measurement of quality, and programs for improving the quality of care and services within the organization.

Medication Error Rate

Medication error rates are decreasing at both LVH-Cedar Crest and LVH-Muhlenberg. Contributing to this is the continued implementation of new technology including CAPOE (computer-assisted physician order entry) and medication bar coding, as well as the storage of medications in patient rooms at LVH-Muhlenberg.

![Graph showing medication error rates](image)

**Inpatient Fall Rates**

Fall rates at both LVH-Cedar Crest and LVH-Muhlenberg decreased in the past year. Fall Task Force members and unit fall coordinators have been successful at identifying trends and communicating appropriate action plans and educating colleagues on ways to prevent falls.

![Graph showing fall rates](image)

**Outcomes 101**

The new Outcomes Institute program was a hit with nurses who attended this year. Their working knowledge of evidence behind the national initiatives they work on increased 23.8 percent after attending an eight-hour session. Attendees, including direct care nurses, managers and educators, focused on quality, regulatory agency requirements, evidence-based rationale, Institute for Healthcare Improvement initiatives and Core Measure requirements. The ultimate goal is to have all nurses participate.

**Fall: Any unplanned descent to the floor (according to the National Database of Nursing Quality Indicators and the Institute for Healthcare Improvement)**
Congestive Heart Failure (CHF) Smoking Cessation Education

Our goal is to educate all CHF patients who smoke or have a history of smoking about the dangers of doing so, and then share information with them about smoking cessation. Nurses at LVH-Cedar Crest and LVH-Muhlenberg reached that goal several times over the past year.

Teaching Congestive Heart Failure (CHF) Discharge Instructions

Before patients hospitalized for CHF are discharged, we're making significant improvements in teaching them how to manage their symptoms at home. These improvements are evident at all our hospital campuses.
Overall Patient Satisfaction With Home Care

Patient satisfaction scores for home care fluctuated in the low 90s and were above the national Press Ganey benchmark. But staff members wanted to get closer to 100. In late 2006, they formed a Patient Satisfaction Committee to take an in-depth look at the department's Press Ganey scores. As they discovered areas that could be improved, they developed and implemented action plans. For instance, the department scored low on a question about the helpfulness of phone personnel. So the committee developed Think Ting. Inspired by the Chinese Ting symbol for listening with your whole body and your heart, they implemented a program to encourage staff to really listen before responding to patients and their caregivers who called with concerns. The department's scores remain in the 90s and have been steadily climbing since March 2007. The next step: to implement a program to help staff members resolve issues raised by patients and their caregivers.

Overall Patient Satisfaction With Nursing

Our patient satisfaction scores at both LVH-Cedar Crest and LVH-Muhlenberg are at or near our benchmark, the "90s Club." Units have a goal of hitting 90 each year, and once they do, to continue striving toward 100.
Consultation and Resources

We provide adequate resources, support and opportunities for the utilization of experts (particularly advanced practice clinicians) and encourage staff to become involved in professional organizations.

Where in the World?

From York and Baltimore to Canada and Norway, LVHHN clinicians are sharing our best practices with hospitals worldwide—whether it's visiting them or hosting them here.

“We have a professional obligation to impact care beyond our community by sharing what makes us Magnet,” says Kim Hitchings, R.N., manager of the Center for Professional Excellence.

For instance, Hitchings was part of a group that greeted administrators and nurses from Norway’s Akershus University Hospital. They made three trips to LVHHN in 2007 to learn more about our nursing structure, pharmacy and best practices, and to tour our hospitals. While constructing a new 600-bed hospital, they are considering developing computer-assisted physician order entry (CAPOE), a pharmacy robot similar to ours, a nursing float pool and a nursing structure that does not report to physicians—new concepts in Norwegian hospitals.

The Birth of a Professional Chapter

By Lynda Thom-Weiss, R.N.
Neonatal intensive care unit

Two years ago when I went to the National Association of Neonatal Nurses annual conference, I was drawn to the camaraderie of the Delaware Valley chapter. The nurses demonstrated how you could improve neonatal nursing practice while having fun. So when my colleagues and I returned, we started our own chapter in the Lehigh Valley. This way we don’t have to travel to chapters in Philadelphia or New Jersey. It’s been a huge success and so much fun. We participate in continuing education closer to home, and find inspiration and comfort in the stories we share with each other. Last year I went back to the conference and presented a poster on “The Birth of a Chapter,” showing how we’re enhancing patient care through our professional chapter.

Working Together for Heart Patients

In 2006, we partnered with Grand View Hospital to create a cardiac catheterization lab at its Sellersville facility. “Originally, only diagnostic procedures were performed there, and patients who needed an interventional procedure like angioplasty were transferred to Lehigh Valley Hospital,” says Diane Conley, director of invasive cardiology for both Lehigh Valley Hospital and Grand View.

After the cath lab opened, Grand View nurses came to LVHHN to learn evidence-based protocols and their role during interventional procedures. “The collaborative relationship proved to be very beneficial to patients,” Conley says. Since July, more than 200 patients have received interventional heart procedures at Grand View, closer to their homes.
Clinicians as Teachers

Our professionals are involved in educational activities within the organization and community. We welcome and support students from a variety of academic programs, and develop and mentor staff preceptors. Staff in all positions serve as faculty and preceptors for students. Our patient education program meets the diverse needs of patients in all care settings.

It's the Laughter They're After

Based on research findings from a literature search, Cedar Crest College student nurses Tracy Arnold (left), Leighanne Hartman, Lynda Kunsman (right) and Carol Shannon discovered humor is healing and most patients welcome it. The group created a humor assessment questionnaire for nurses and others who approach patients and now recommend the use of humor at the bedside. This team presented their study at LVHHN's annual Research Day in October. About 200 staff members attended. "Research is the backbone of nursing practice, the foundation of what we do every day and how we care for our patients. The collaboration between Cedar Crest nursing students and Lehigh Valley Hospital is a win-win situation," says Mae Ann Pasquale, R.N. (center), assistant professor of nursing at Cedar Crest College.

Operation C-Section

Over the past year, LVHHN opened its operating room doors to three groups of high school students, allowing them to view a live Cesarean section. In partnership with the Da Vinci Science Center, clinicians like labor and delivery nurses JoAnne Stewart, R.N., and Michelle Adams, R.N., used live video conferencing technology to broadcast between the center and hospital. Students saw everything from the preparation of the operating room to the announcement of the baby's gender.

One student who witnessed a live baby's birth is 17-year-old Charlisa Summerville (left) of Whitehall. She was a member of the hospital's 2007 Emerging Health Professionals program and is exploring careers in pediatrics and nursing.

In addition to "Live from LVH: Operation C-Section," LVHHN colleagues also helped Da Vinci Science Center staff develop "What Hurts?", an interactive display that introduced children to health care by allowing them to be a doctor and solve a medical challenge. The current display teaches children about safe driving.
Autonomy

We assess and provide actions appropriate for care based on competence, professional expertise and knowledge. We are permitted and expected to practice autonomously, consistent with professional standards. We exercise independent judgment within the context of interdisciplinary and multidisciplinary approaches to care.

Every Catheter Has a Silver Lining

Nationwide, more than 20 percent of all hospitalized patients have a urinary catheter inserted during their stay, and almost 3 percent of those patients acquire a urinary tract infection. "Knowing this, we wanted to explore opportunities to reduce our numbers," says Terry Burger, R.N., director of infection control and prevention.

Evidence had shown silver-coated urinary catheters reduced catheter-associated urinary tract infections, so we started using them exclusively. Then last year, a team conducted a research study to ensure positive outcomes.

What they found: Urinary tract infections associated with catheters dropped 25 percent over the three-month period the study was conducted. This enhanced patient satisfaction and reduced costs and length of stay.

Under Observation

Care in LVH—Cedar Crest's new observation unit is driven by nurses' ability to use strict protocols to work autonomously. "The unit cares for patients who need care for less than 23 hours for asthma, allergic reactions, cellulitis, nausea, vomiting and dehydration, hypoglycemia, back pain and those with chest pain whose initial heart tests are normal," says unit director Paulette Kennedy, R.N.

Previously, these patients were admitted to beds that could have been utilized for patients with more serious conditions. The ability of nurses like Andrea Ossiander, R.N. (right), to efficiently assess and treat patients like Margarita Torres helps us quickly determine if patients need to stay or can go home, giving us beds to care for more people.

My Patients

By Fran Hnat

Financial coordinator for pharmacy medications

Hanging above my desk is my wall of inspiration. There's a business card from a disc jockey for whom I helped get medications to treat high blood pressure and diabetes. There's an ultrasound of a baby whose mother I assisted to get blood clot prevention medication. As a financial coordinator, I help patients who are uninsured or underinsured obtain free or reduced-cost prescription medications. Over the past year, I secured more than $650,000 worth of medications for patients. I meet with patients to learn their needs, help them fill out applications and later, get refills. My goal is to never say no. I believe everyone is entitled to quality health care and prescription medications.
Professional Image

We provide services characterized as essential by other team members. We are viewed as integral to the organization's ability to provide patient care and effectively influence system-wide processes.

Better Nurses by Farr

The Allentown Hospital School of Nursing students knew if they wanted quality nursing shoes to start their careers, they could find them at Farr Brothers Shoe Stores. Farr's sold comfortable shoes for those long hours on your feet. The shoe stores closed in the mid-1980s, but the Farrs' reputation for offering the best to nurses continues.

Last year Elsa Farr (right) of Allentown, wife of shoe store proprietor Harvey Farr, donated in excess of $20 million from her trust to support LVH-HN nurses who want to return to school, attend professional conferences, earn special certifications and pursue other professional development. It's the second-largest single gift the hospital has ever received.

Images of Magnet Care

As Magnet caregivers, we help our patients and their loved ones express their feelings of loss, hope and compassion. We, too, experience similar emotions and sometimes find comfort by expressing ourselves through art. Last year, colleagues displayed their original works in an exhibition, Images of Magnet Care...Through the Eyes of the Caregiver.

On display was a scrapbook Eva Fox, R.N., created to show unit milestones in the Regional Heart Center at LVH-Muhlenberg. One story depicts how she and her colleagues used "The Wizard of Oz" to inspire a patient to walk after open-heart surgery. Also on display was a photograph by patient care administrator Courtney Vose, R.N., highlighting colleagues' trip to a Washington, D.C., rally aimed at improving access to emergency care for all Americans.
Stepping Up to the Plate

"With patient volume up 22 percent in the electrophysiology (EP) lab, more staff competent with EP procedures were needed," says Kris McMurtrie, R.N., director of invasive cardiology at LVH–Cedar Crest.


After six months of education and shadowing, these five nurses are now qualified to assist during EP procedures. Because more EP lab nurses are available, patients who need pacemakers, implantable defibrillators and other EP procedures are receiving care more quickly. Plus, EP lab physicians and colleagues are thrilled to have the additional support.

The Gift of Patient Care

By Sandy Derbyshire, R.N., medical-surgical ICU
Recipient of the 2007 Friends of Nursing Award for Excellence in Critical Care Nursing

Last year I cared for a patient who had just been told he had metastatic cancer. On election night—a special night for this man—I stayed to watch the returns with him. He was discharged soon afterward. His family left me an angel figurine, thanking me for my compassion.

A year after the man died, I received a note from his daughter. It read: "Know how important everything you do is, not just for your patients but their families as well."

As nurses we continuously give of ourselves. Sometimes the true gift is overshadowed by the sincere gift received.

Learn more about our Friends of Nursing awards on page 32.
Building Leadership From Within

In response to rehabilitation services colleagues' requests for more professional development opportunities, the Enhanced Staff Responsibility Program was created in June 2006. “It offers growth and advancement opportunities to clinical staff,” says Jennifer Roeder, director, specialized rehabilitation programs. “It's a great way for clinicians to take on added responsibility and develop more skills.”

Occupational, speech and physical therapists have an opportunity to move into a process improvement leader, educator/mentor or clinical specialist role. Physical therapist Jennifer Wallace (left) is one of 15 colleagues benefitting from this program. Often traveling between several outpatient facilities to care for patients, she gets to know many colleagues and areas where they work. “Taking on this new responsibility was a natural transition for me,” Wallace says. She now mentors new colleagues, helping orient them to the department, and organizes guest speakers and seminars for all colleagues. “Continuing education is very important for growth in our field,” she says. “This kind of collaboration helps our entire department work together even more as a team.”

Writing It Out

Andrea Smith, R.N.,* walks into the neonatal intensive care unit (NICU) conference room, picks up a sheet of paper and pen, and begins writing (see her essay, left). She recounts an experience from the day before and then reads her essay aloud to colleagues in the room.

After she's done, they offer their insight as part of Narrative Pediatrics. It's a biweekly 90-minute session that allows interdisciplinary colleagues to address their experiences with caring for patients and their families.

Narrative medicine is a relatively new approach in health care education. Caregivers are encouraged to write about their patient care experiences in ordinary language. Pediatrics department colleagues are taking the concept to a new level by using it to identify and remove barriers for creating ideal patient- and family-centered experiences. The result is better care for our patients and renewed energy and passion for caregivers.

*Because Narrative Pediatrics is a confidential forum, the nurse's name has been changed.
**Working In a Workout**

How does open-heart nurse Lisa Forstburg, R.N. (below, right), unwind after a 12-hour shift? Some days, it’s by working out at the hospital’s new Healthy You Fitness Center. “It’s a great way to relieve stress,” says Forstburg, who also exercises in the morning on her days off.

Her husband, Robert, joined, too. They both received a customized workout (provided for members by exercise physiologists like Jackie Svrcek, on left). They also receive reimbursement for their memberships through LVH’s Culture of Wellness program, a yearly $500 benefit to spend on fitness clubs, exercise classes and other health-related programs. “It’s a great incentive to stay dedicated to working out,” Forstburg says. Another reason is her job. “As a cardiac nurse, I know how important it is to stay heart healthy.”

The fitness center opened in September under the guidance of Joanne Koury, manager, and John Graham, director of corporate and community fitness.

**Staying at the Bedside**

By Virginia “Ginny” Geist, R.N.
4C, LVH-Cedar Crest

At 60, I don’t have as much energy as I used to. That’s why in 2003, I began working part-time on night shift. It’s easier on my body, and I can help care for my widowed mother, Virginia Short (left). I know I’m not alone. In fact, 26 percent of my nursing colleagues are older than 50. In anticipation of losing experienced nurses, I along with other nurses and human resources staff conducted a research study last year to find ways to help older nurses work for as long as they want.

Based on the findings, several changes already have been made, including a reduction in nurse-to-patient ratios on medical-surgical units, a career consultant to assist older nurses seeking other positions, flexibility in scheduling and installing patient lifts.

Last October, I helped present this study at the annual Magnet conference in Atlanta.
Community and the Organization

We establish relationships within and among all types of health care and community organizations.
We develop strong partnerships that support improved client outcomes and our community's health.

Ensuring Safe Journeys

Throughout the Lehigh Valley, about 95 percent of car seats are installed incorrectly, says Bill McQuilken (top left), LVHHN’s trauma prevention coordinator. That’s why he and a team of car seat safety technicians hold free car seat inspections. Over the past year they inspected 254 child passenger seats at 20 events.

Here, McQuilken shows Trevor Gilotti of Lehighton how to install a car seat, ensuring 4-month-old Madison is safe and secure. McQuilken and his colleagues, Deanna Shisslak, parent education coordinator, and Donna Grather, R.N., pediatric trauma coordinator, also host community education events about topics such as babysitting, parenting, and pedestrian and bicycle safety.

LVHHN is the only hospital in the region with employees who are nationally certified as car seat safety technicians. Car seat safety checks are held twice a month; parents can make an appointment by calling 610-402-CARE.
A Contest in Which Everyone Wins

Children at Allentown’s Central Elementary School needed supplies to start the 2007-08 school year, but many families didn’t have the money to buy them. So our clinicians responded. Led by Hope Johnson, R.N. (below, far right), of perioperative services, colleagues from 50 departments competed against one another to see who could collect the most school supplies.

This “stack the pack” contest made everyone a winner. Staff donated an astounding 2.5 tons of supplies, including everyday items like paper, glue and crayons, and special touches like gift cards for the school’s teachers. (Back row, from left) Nicole Hartman, R.N., Karen Jones, R.N., Carmen Ozoa, R.N., Karen Palladino, R.N., and Johnson helped present the supplies to smiling children like first- and second-graders (front row, from left) Faith, Amanda, Jinnehiz and Javier at a school assembly. School officials also thanked our employees at the assembly, but the real thanks could be seen in the smiles of the children.

Better Communication for Patients

By Guillermo Lopez Jr. of Bethlehem (far right)

My mother, Sara (far left), spoke mostly Spanish. But when caregivers spoke English to her, she acted like she understood every word, even nodding and smiling. Then when they left, she would turn to me and ask, “Junior, what did they say?”

I learned to ask for an interpreter so the burden of explaining complicated health information to my mom didn’t fall on me. It’s the reason LVHN has seven full-time medical interpreters who are trained in Spanish and 81 staff members who are trained to interpret in Spanish, Arabic, Portuguese and French. A telephone interpreter service also is available to assist staff in many more languages. My mother (also pictured with my son, Daniel, wife Isabel and daughter Amy Perando) passed away in June 2006. As a member of the Patient-Centered Experience Advisory Council, I shared her story to remind caregivers to offer interpreter services to patients, even if they don’t ask.
Interdisciplinary Relationships

We value working relationships within and among our disciplines. We base mutual respect on the premise that all team members make essential and meaningful contributions to clinical outcomes.

My Inspiration

Children and Their Families

By Sharon Manifold
Physical therapist, pediatric rehabilitation

Every workday is rewarding and presents its own set of challenges as I help children, like Katrina (right), and their families live the lives that are important to them. But I don't do it alone. In pediatric rehabilitation, I work closely with speech therapists, audiologists and occupational therapists, as well as patients' families. Collectively, we had almost 12,000 sessions with children this year—a more than 300 percent increase over 2006. We also started collaborating with neonatal intensive care unit (NICU) caregivers to support developmental care efforts, including the positioning of babies to promote growth and optimal musculoskeletal development. Together, we assist patients and their families through their journeys. They often begin with difficult news and end with heartwarming stories of courage.

RRT: A Resource for Nurses

As soon as Chris Schoup, R.N. (at left), arrived for her morning shift, she checked her patient who was recovering from an open appendectomy. The woman was pale and having trouble breathing. Schoup alerted the attending physician, and they agreed she would closely monitor the patient. The woman's condition slowly declined, but Schoup couldn't determine the cause. So she called the attending physician and the RRT—the Rapid Response Team.

Within minutes (below, from left) critical care nurse Marilyn Leshko, R.N. (with a RRT supply bag), hospitalist Caroline Shedlock, M.D., and respiratory therapist Joel Strohecker arrived. After reviewing the woman's medical history, taking her vitals and conducting several tests, the team, which also included the attending physician and Schoup, agreed the patient should be moved to critical care. Caregivers then discovered the woman had a potentially fatal blood clot in her lung.

The RRT gives nurses on medical-surgical and step-down units another resource. Research shows patients can begin to deteriorate before they actually experience a respiratory or cardiac arrest. "It's difficult to determine if there's a decline in cardiac arrests because of the team," says clinical information specialist Beth Karoly. "Yet, we know it is a valuable resource to nurses." During the past year, the RRT responded to 500 calls at LVH–Cedar Crest and 207 calls at LVH–Muhlenberg.
Professional Development

We support personal and professional growth and development. Our programs promote formal education, professional certification and career development. We promote competency-based clinical and leadership/management development, and provide adequate human and fiscal resources for professional development.

‘Count Families In’

Jim O’Neill (right) lay unconscious in his Toronto hospital bed with his partner of 30 years, Patrick Conlon, sitting by his side. Eight days before, O’Neill had been diagnosed with sudden, life-threatening lung failure with a 50-50 chance of survival.

Throughout a 15-week hospital stay and nearly year-long recovery, Conlon stayed an active member of the care team. “The doctors and nurses were the experts on his illness, but I am the expert on Jim,” says Conlon, who helped tend to his partner’s pressure ulcers, eased his fears of having a tracheotomy and assisted in other bedside care.

Conlon and O’Neill shared their story with LVHHN caregivers as last year’s Medallion Lecture speakers—held during Nurses Week to recognize staff. They encouraged staff to put patients first while “counting families in.” Their message mirrors our philosophy of the patient-centered experience and our efforts to create an environment in which we spend more time at the bedside while recognizing families as part of the care team.

Conlon and O’Neill were so impressed with our efforts they invited us to attend the Ontario Hospital Association’s second annual conference on patient- and family-centered care in Toronto. We were the only U.S. hospital colleagues to attend.

My Inspiration

Part of the Team

By Kristin Held, Pharm.D.
Pharmacy practice resident

When I began pharmacy school, I did not realize the variety of opportunities available to pharmacists. After exploring different options, I continued my professional development in the acute care setting. Following graduation, I was accepted into a one-year pharmacy residency at LVHHN. The program currently is in its second year and received preliminary accreditation last summer—a rare feat to achieve on the first attempt. LVHHN is the only institution in the area that offers this opportunity. Although the program is intense, my experience has been positive. I believe the residency will prepare me for a clinical position where I would work alongside health care professionals daily and be a valuable asset to the medical team.
Presentations

We conduct leading-edge research and present what we’ve learned at regional, national and international conferences. Here’s a look at what our clinicians have accomplished during the past fiscal year.

POSTER PRESENTATIONS

Albertson, Julie; Cartwright, Laurie; Dieter, Marie; Horvath, Rachel; Lassenderfer, Cheryl; and Scheirer, Rosemary. Decreasing the Emergency Department Length of Stay for the Trauma Patient. ENA General Assembly, San Antonio, Texas, September 2006.

Ayers, Nancy; Becker, Marsha; Darr, Carol; Fe ley, Saralyn; Rock, Pamela; Smith, Suzanne; and Weand, Rick. A Systematic Approach to Tobacco Cessation Intervention. AARC 51st International Respiratory Conference, Las Vegas, Nev., December 2006.

Badillo, Kimberly; Bokovoy, Joanna; Buckenmeyer, Charlotte; Delpeau, Paul; Martin, Andrew; Panik, Anne; Sierze ga, Gina; and Vose, Courtney. An Emergency Department Waiting Room Study: Improving the Experience. ENA Leadership Conference, Boston, Mass., February 2007.

Bartman, Kim; Clark, Sharon; Groller, Karen; Petruccelli, Donna; and Rowan, Cheryl. Successful Implementation of a Quality Improvement Initiative for the CHF ICHQ Discharge Instructions Care Measure on a Vascular Unit.

Bokovoy, Joanna; Gogal, Christina; Kleinbach, Dale; Lavin, Marjorie; Pucklavage, David; Sierze ga, Gina; and Yanchunas, Sean. The Impact of a Mobile Medication Cart on the Medication Delivery Process. Sigma Theta Tau Society Xi Omega Chapter Research Night, Kutztown University, Kutztown, Pa., March 2007.

Bokovoy, Joanna; Gogal, Christina; Kratz, Melissa; Kutzler, Deidre; Peter, Debra; and Swisher, Brandi. Can We Do It Better? An Innovative Study by Direct Care Oncology Nurses to Optimize the Chemotherapy Validation Process. Oncology Nursing Society Congress, Las Vegas, Nev., May 2007.


Davies-Hathen, Nancy; Fritz, Kotrina; Parker, Patricia; Petruccelli, Donna; Rossi, Michael; and Skibba, Joshua. Effective Use of Information Technology to Improve Quality of Care for Heart Failure Patients. Heart Failure Society of America 2006, Seattle, Wash., September 2006.


Dunn, Linda; Gerhardt, Laura; Jones, Rodney; Miller, Kenneth; and Traub, Chad. Airway Pressure Release Ventilation as a Recruitment Maneuver to Facilitate Lung


Fulcher, Julie; Gutekunst, Mark; Herron-Buttillo, Kathy; Haines, Diana; Fontaine, Georgine; Hoffner, Sharon; Joho, Brian; Murphy, Shawnna; Zambo, Jennifer; Matala, Patricia; Yeager, Timothy; Van Poots, Holly; Casey, Krista; Buckenmyer, Charlotte. Evidence-Based Pediatric Oral Rehydration Protocol. Kutztown University Sigma Theta Tau, Research Day, March 2007.


Gallagher, Ann; Haines, Diana; Buckenmyer, Charlotte; Lewis, Christina; and Vose, Courtney. Implementation of an Electronic Emergency Department Medical Record System. Kutztown University Sigma Theta Tau, Research Day, March 2007.


Kessler, Beth; Sewald-Dries, Rachel; and Snyder, Megan. Rounding It All Up For Patient Satisfaction and Safety. American Nephrology Nurses Association 37th National Symposium, Dallas, Texas, April 2007.


Kromis, Leroy. ADRs Correlated With DRG, Reveal LOS and Cost Trends. ASHP Midyear Clinical Meeting, December 2006.


Wertman, Vicki; Fulcher, Julie; Matula, Pat; Davidson, Carolyn; Gogle, Julie; Linden, Erika; Haines, Diana; Buckenmyer, Charlotte; Roesser, Gwen; Sierzega, Gina; Alchtmie, Christine; Baker, Kathleen; Bailey, Judith; Kimmel, Sharon; Torchen, Carol; Panik, Anne; Capuano, Terry; and Bokoyev, Joanna. “Shouldn’t We Be Doing That Here?” Empowering Direct Care Nurses to Drive an Evidence-Based Culture. 10th Annual Magnet Conference, Denver, Colo., October 2006.

**ORAL PRESENTATIONS**


Begany, Diane; and Brown, Andrew. Pediatric Near Drowning. Updates in Respiratory Care, Fogelsville, Pa., September 2006.


Bokevov, Joann; Capuano, Terry; Hitchings, Kim; and Houser, Janet. The Relationship of Professional Practice Elements and Unit Performance. 10th National Magnet Conference, Denver, Colo., October 2006.
Breinich, Kim; Brown, Andrew; Dickey, Lynn; Gessner, Dave; and Snyder, Anne. The Use of HFJV to Bridge the Continuum of Care From Salvege Therapy to a Lung Protective Strategy. 24th Conference on High-Frequency Ventilation of Infants, Children & Adults, Snowbird, Utah, March 2007.


Guidi, Marilyn; Applegate, Linda; and Villanueva, Rebeida. AARP Wants You & So Do We: retaining Older Nurses in Direct Care. Center for American Nurses Workforce Conference, San Antonio, Texas, May 2007.


Hitchings, Kim; Ingaglio, Linda; McCucci, Keith; Shigo, JoJo; and Wissner, Eileen. Our Magnet Journey. Professional Development Presentation, York Hospital, June 2007.


McCucci, Keith; and Wargo, Michael. Trauma Care-200 MPH to Impact. State Emergency Medical Services Conference, State College, Pa., August 2006.


Morgan, Georgianna; and Sebastian, Molly. Clinical Practice Peer Review: Response to Quality of Care Issues. 30th National Magnet Conference, Denver, Colo., October 2006.


June 2007
Creating the Ideal Patient

Snyder, Schelly. Mentoring Beyond the SNAP Experience (Workshop). Fostering Tomorrow’s Mentors, The 54th Annual Convention, Student Nurses’ Association of Pennsylvania, Harrisburg, Pa., November 2006.


TELECONFERENCES

Publications
Capuano, Terry; Drexinger-Durshin, Linda; Millard, Jody; and Hitchens, Kim. The desired future of nursing doesn’t just happen—engaged nurses create it. JONA, 37(2): 61-63; 2007.


Odom, Catherine. A clinical exercise physiologist’s viewpoint. The Connection (Official newsletter of the American Association of Heart Failure Nurses); Issue 11, Spring 2007.

Pagella, Patrick; Cipolle, Mary; Sacco, Eileen; Matala, Patricia; Bokvey, Joanna; and Karoly, Elizabeth. A randomized trial to evaluate compliance in terms of patient comfort and satisfaction of two pneumatic compression devices. Orthopaedic Nursing, May/June 2007; (26)3.

Petruccelli, Donna. Guest editor and contributing author—The Connection (Official newsletter of the American Association of Heart Failure Nurses); Issue 11, Spring 2007.

Potulnycky, Mary Jean; Kimmel, Sharon R.; Ritter, Marlene; Capuano, Terry; Gross, LaDene; Riegel-Gross, Kelly; and Panik, Anne. Non-punitive medication error reporting: 3-year findings from one hospital’s primum non nocere initiative. JONA, July/August 2006; 36 (7/8): 370-376.

Capuano, Terry; Pinter, Kristi; and Rosser, Gwendolyn. Developing Clinical Leadership Capability. The Journal of Continuing Education in Nursing, May/June 2007; (38)2.

Certifications
Getting certified in a specialty is a validation of your knowledge and expertise, and demonstrates that you meet nationally recognized standards of knowledge. Here is a list of our certified professionals.

Adult Health (A.P.R.N., B.C.)
Sharyn Lang

Advanced Practice Nursing (A.P.R.N., B.C., N.P.C.)
Ann Lushis
Louise Andreescavage
Mary Elizabeth Dammeyer
Carolyn Davidson
Shirley Giansante

Afaf Khoury
Karen Peterson
Donna Petruccelli
Courtney Vose
Kerry Charles Willis

Ambulatory PeriAnesthesia Nurse (C.A.P.A.)
Peggy Pearson

Ambulatory Care Nurse (R.N., B.C.)
Kaye Barnhart
Debora Hanong
Ann Marie Hernandez
Carol Saxman

Cardiac/Vascular Nurse (R.N., B.C.)
Kimberly Barton
Karen Diane Groller
Karen Sladovnik

Certified Case Management (R.N., B.C.)
Amy Wisniewski

Critical Care Clinical Nurse Specialist—Cardiac Medicine Subspecialty (CC.N.S.—C.M.C.)
Peggy Pearson

Critical Care Nursing, Adult (C.C.R.N.)
Eugene Anderson
Sandra Axel
Angela Barrell
Malto Bartges
Beth Beatty
Frederick Beers
Jeremy Benninger
Eileen Borchards
Monica Denise Bridges
Rebecca Bruner
Melissa Summerhayes
Irene Elsa Buchert
Cindy Ann Buhm
Tina Louise Burke
Sandra Carwell
Lucy Castdll
Diane Chaplin
John Collins
Susan Collins
Linda Coyle
Janis Croisette
Kathleen David
Carolyn Davidson
Nancy Davies—Hathen
Sandra Derbyshire
Jane Dilliard
Tera Everard
Eileen Frucht
Cathy Furman
Colleen Gallagher
Tracey Gallant
Diane Gethardt
Roslyn Marie Harris
Cindy Havel
Barbara Hemphill
Kathy Herren
Timothy Hickey
Jennifer Ann Hoff
Susan Hoffman
William Karpovich
Matthew Karpovich
Daniel Kelly
Dorothy Koubou
Jason Krammer
Cheng Kutos
Jennifer Ann Landis
Sharyn Lang
Denise Laub
Daniel Leskho
Marlyn Leskho
Diane Limoge
Terry Lippowitch—Vogel
Leslie Sue Maston
Michelle McAlister
Susan McCauley
Denise Joy Mclnness
Cynthia Meeber
Susan Merrifield
Sharon Mouchref
Susan Niemiekiewicz
Susan O'Neill
Jennifer Brooks Orlando
Eileen Palmer
Ruth Pearce
Tara Pendrak

 Donna Petruccelli
Carmella Ann Preti
Anne Rabeet
Richard Riccio
Darryl Judson Rotherford
Joseph Rycek
Jeana Marie Santostefano
Molly Sebastian
Carol Shalaway
Lori Snyder
Cathryn Starr
Susan Steidel
Stephanie Stezenko
Gerald Studio
Angela Stuassker
Deborah Stupak
John Swircek
Andrea Tewari
Debra Torcivia
Carolyn Traglia
Michelle Trzesniowski
Cynthia Elaine Umbrell
Tina VanBuren
Eileen Wasson
Julia Wernkheiser
Kerry Charles Willis
Lori Veselofska
Lynette Yoder

Critical Care Nursing Cardiac Medicine Subspecialty (C.C.R.N., C.M.C.)
Michelle Trzesniowski

Critical Care Nursing Cardiac Surgery Subspecialty (C.C.R.N., C.S.C.)
Diane Chaplin

Critical Care Nursing, Neonatal (C.C.R.N.)
Diane Chaplin

Critical Care Nursing, Pediatric (C.C.R.N.)

Jean McMenamin

Heidi Da Re
Michele Dunstan
Brenda Early
Margaret Godshall
Deanna Heydt
Neuroscience Nursing (C.N.R.N.)
Cathy Fuhrman
Nancy Jean Komatz
Mary Jean Lavin
Eileen Sacco
Maureen Smith
Barbara Tavani

NP-Family Nurse (A.P.R.N., B.C.)
Risa Derenberg

NP-Adult (A.P.R.N., B.C.)
Gretchen Fitzgerald

Nursing Administration (C.N.A., B.C.)
Terri Burger
Terri Capuano
Geraldine Fasching
Karen Ruth Good
Kim Kelly
Paulette Kennedy
Dale Kleinbach
Kimberly Theresa Korner
Bonnie Kosman
Erika Linden
Susan Newhard
Anne Rabet

Nursing Administration, Advanced (C.N.A.A., B.C.)
Nancy Davies-Haslen
Kim Hitchings
Anne Panik
Molly Sebastian

Oncology Nursing (O.C.N.)
Michele Achey
Darla Alden
Gwen Ann Bednarz
Elizabeth Conde
Kathleen Faube
Stephanie Melinda Forst
James Kocs
Karen Kramer
Erin Kathleen Light
Stella Polt
Nicole Reimer
Margaryn Rosenthal
Nora Zappe

Orthopedic Nursing (O.N.C.)
Rita Bendekovits
Kathryn Marie Hertzog
Barbara Larseen
Manmeet Thakral

Pediatric Nursing (C.P.N., B.C.)
Rebecca Bartholomew
Margaret Joyce Charazak
Michele Gessner
Margaryn Godshall
Loretta Gogel

Pamela Johnson
Kelly Larue-Vassallo
Sharon Lynn Mendes
Marie Pope
Eileen Ann Reitz
Christina Marie Rock
\n
Deborah Schantzenbach
Rene Scheirer
Sandra Lee Siplak
Tammy Straub
Laurel Tascher
Diane Taylor
Suzanne Trinkle
Susan Verhaz
Diane Carolyn Weslosky
Linda Widner
Janet Ann Williams
Rosemary Wimmer
Lori Young

Pediatric Nurse Practitioner (C.P.R.N.)
Ruth Duffield
Elizabeth Krail Nesland

Perioperative Nursing (C.O.R.D.R.)
Loretta Berta
Christine Blasko
Maureen Bredbenner
Gwenis Browning
Betty Burlan
Marta Buskirk
Rebecca Caffrey
Colleen Mary Camasta
Ruth Chaplin
Joan Collette
Bruce Confer
Susan Cooke
Patricia Cressman
Melanie Dronck
Delores Duffy
Lisa Durishin
Nancy Fahler
Lisa Farthing
Linda Foss
Beth Ellen Frickmann
Glenda Garza
Diane Genn
Joan Gosztograny
Georgette Guth
Carolyn Harlan
Wendy Heil
Darlene Hinkle
Dianne Hitzdos
Hope Lynn Johnson
Kay Louise Kern
Robert Kern
Diane Brown Kimsey
Lois Kiepinger
Dorothy Klotz
Carol Kowalczyk
Kathryn Kowalewski
Carol Lacek
Victoria Laporte
Jean Lasover
Craig Laverty
Anthony Manni
Carol Marriott
Cindy McEwan
Louis Newman
Mary Olexine
Perla Reese
Beverly Ribercky
Cynthia Ann Rosevelt

Rehabilitation Nursing (C.R.R.N.)
Rita Bendekovits

Wound Care (C.W.C.N.)
Kelly Aurand
Cynthia Lange-Koschitz
Kimberly Verger

Wound Specialists (C.W.S.)
Lisa Boyle
Leah Bradshaw
Ginger Holko
Suzanne Jones
Lisa Lynn Miller
Kimberly Pambianchi

Wound/Ostomy/Continence Nursing (C.W.O.C.N., C.C.C.N., C.W.O.C.N.)
Tiffany Cooper
Ruth Duffield
Margaret Gergar
Nancy Jane Ketner
Susan Landis
Carol Ruth Schaeffer
Joan Ellen Schwartz
Deborah Williams

Professional Affiliations

Our caregivers are not only members of local, regional
and national professional organizations, but they're also
presidents, vice presidents, chairs, secretaries, treasurers
and directors of them. We're at the forefront of sharing our
knowledge and expertise with clinicians across the country,
advancing ourselves and helping others develop professionally.

Here are our leaders:

American Association of Neuroscience Nurses (AANN)
Karen Palladino, R.N.
President, Local Chapter

American Organization of Nurse Executives (AONE)
Terry A. Capuano, R.N.
Advisory Council

Association of Operating Room Registered Nurses (AORN)
Joan Collette, R.N.
Board Member, Mid-Eastern Pa. Chapter

Delores Duffey, R.N.
Board Member, Mid-Eastern Pa. Chapter

Lisa Durishin, R.N.
Board Member, Mid-Eastern Pa. Chapter

Doris Fournica, R.N.
Secretary, Mid-Eastern Pa. Chapter

Glenda Garza, R.N.
President, Mid-Eastern Pa. Chapter

Hope Johnson, R.N.
Board Member, Mid-Eastern Pa. Chapter

Carol Kovalchik, R.N.
Nominating Committee, Mid-Eastern Pa. Chapter

Kathryn Kowalewski, R.N.
Board Member, Mid-Eastern Pa. Chapter and Pa. Chapter
Assembly Member, Endovascular Specialty, AORN

Cynthia Rosevelt, R.N.
Treasurer, Mid-Eastern Pa. Chapter

Deborah Schantzenbach, R.N.
President Elect and Chair-Program Committee and Web Site, Mid-Eastern Pa. Chapter

Diane Weslosky, R.N.
Secretary, Mid-Eastern Pa. Chapter

American Nephrology Nursing Association (ANNA)
Mary Joleen Pavelka, R.N.
President-Elect, Local-Keystone Chapter

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Ruth Duffield
Margaret Gergar
Nancy Jane Ketner
Susan Landis
Carol Ruth Schaeffer
Joan Ellen Schwartz
Deborah Williams

Subacute and Post-Acute Care (C.R.N.A.C.)
Sue Frances Neiman
Carol Trombauer

Progressive Care Nursing (PCN)
Erin Elizabeth Colley
Lyn Superio Daubert
Marita Susan Flores
Marie-Claude Gutekunst
Christine Hartner
June Sandom Kellogg
Susan Long
Tami Jean Melisch
Colleen Naprava
Usa Rai
Lynne Smith

Psych/Mental Health Nursing (R.N., B.C.)
Denise Boshish
Marjorie Dorward
Jane Halpin
Joanne Cora Jones
Cynthia Rocos
Cynthia Kutch
Michale Kratz
Julianne Kubisky
Gwen Hughes Kutzner
William Leiner Jr.
Patrieca Shelly
Paulette Thomas
Evelyn Uhler

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Treasurer, Mid-Eastern Pa. Chapter

Deborah Schantzenbach, R.N.
President Elect and Chair-Program Committee and Web Site, Mid-Eastern Pa. Chapter

Diane Weslosky, R.N.
Secretary, Mid-Eastern Pa. Chapter

American Nephrology Nursing Association (ANNA)
Mary Joleen Pavelka, R.N.
President-Elect, Local-Keystone Chapter

American Organization of Nurse Executives (AONE)
Terry A. Capuano, R.N.
Advisory Council

Association of Operating Room Registered Nurses (AORN)
Joan Collette, R.N.
Board Member, Mid-Eastern Pa. Chapter

Delores Duffey, R.N.
Board Member, Mid-Eastern Pa. Chapter

Lisa Durishin, R.N.
Board Member, Mid-Eastern Pa. Chapter

Doris Fournica, R.N.
Secretary, Mid-Eastern Pa. Chapter

Glenda Garza, R.N.
President, Mid-Eastern Pa. Chapter

Hope Johnson, R.N.
Board Member, Mid-Eastern Pa. Chapter

Carol Kovalchik, R.N.
Nominating Committee, Mid-Eastern Pa. Chapter

Kathryn Kowalewski, R.N.
Board Member, Mid-Eastern Pa. Chapter and Pa. Chapter
Assembly Member, Endovascular Specialty, AORN

Cynthia Rosevelt, R.N.
Treasurer, Mid-Eastern Pa. Chapter

Deborah Schantzenbach, R.N.
President Elect and Chair-Program Committee and Web Site, Mid-Eastern Pa. Chapter

Diane Weslosky, R.N.
Secretary, Mid-Eastern Pa. Chapter

American Nephrology Nursing Association (ANNA)
Mary Joleen Pavelka, R.N.
President-Elect, Local-Keystone Chapter
## Professional Development

**Healthcare Information and Management Systems Society (HIMSS)**
- Janice Wilson, R.N.
- Nursing Informatics Task Force

**The Hospital and Health System Association of Pennsylvania Division of Accredited Trauma Centers**
- Betsy Seislove, R.N.
- Executive Committee Member

**Journal of the Oncology Nursing Society**
- Susan Gardner, C.R.N.P.
- Reviewer, Oncology Nursing Forum

**National Association of Neonatal Nursing (NANN)**
- Carol Brensinger, R.N.
- Vice President, Northeastern Pa. Chapter

**Pennsylvania State Health System Association**
- Janice Wilson, R.N.
- Pennsylvania Eastern Regional Society of Gastroenterology

**Nursing Informatics Task Force Policy Liaison**
- Organization of Nurse Leaders Nurses and Associates (SGNA)
- Director, Quality, Practice and Research System Association of Program Chairperson, Greater

**American College of Healthcare Executives Lehigh Valley Chapter**
- Sandra Frey, R.N.
- Program Chairperson, Greater Lehigh Valley Chapter

**American College of Healthcare Executives Lehigh Valley Chapter**
- Melissa Kratz, R.N.
- Secretary, Greater Lehigh Valley Chapter

**American College of Healthcare Executives Lehigh Valley Chapter**
- Deidre Kurzner, R.N.
- Secretary, Greater Lehigh Valley Chapter

**American College of Healthcare Executives Lehigh Valley Chapter**
- Jennifer Bortz, R.N.
- Audio/Visual Committee Member, Mid-Eastern Chapter

**American College of Healthcare Executives Lehigh Valley Chapter**
- Anne Brown, R.N.
- President, Mid-Eastern Chapter

**American College of Healthcare Executives Lehigh Valley Chapter**
- Margaret Dennis, R.N.
- Educational Committee Member, Mid-Eastern Chapter

**American College of Healthcare Executives Lehigh Valley Chapter**
- Maura Diehl, R.N.
- Food/Vendor Committee Member, Mid-Eastern Chapter

**American College of Healthcare Executives Lehigh Valley Chapter**
- Cynthia Hertzog, R.N.
- Education Chair, Mid-Eastern Chapter

**American College of Healthcare Executives Lehigh Valley Chapter**
- Bernadette Maron, R.N.
- Food/Vendor Committee Member, Mid-Eastern Chapter

**American College of Healthcare Executives Lehigh Valley Chapter**
- Dorothy McGinley, R.N.
- Secretary, Mid-Eastern Chapter

## New Hires and Promotions (Management Level)

Whenver possible, we prefer to promote from within the network. We also recruit individuals outside the organization we are looking for. Here are the new hires and promotions at the management level.

**Sharon Clark, R.N.**
- Director, 4C and Express Admission Units
- LVH-Cedar Crest

**Robert Dallas**
- Director, Outpatient Rehabilitation Services

**Carolyn Davidson, R.N.**
- Director, Quality, Practice and Research

**Paul DelPais, R.N.**
- Director, Emergency Services
- LVH-Cedar Crest

**Bernadette (Mickey) Gerhard, R.N.**
- Director, Clinical Services
- Lehigh Valley Hospital

**John Graham**
- Manager, Healthy You Fitness Center

**Bonnie Kosman, R.N.**
- Administrator, Transitional Skilled Unit

**Joanne Koury**
- Manager, Totally You Fitness Center

**Susan Lawrence**
- Administrator, Care Continuum

**Denise McPherson, R.N.**
- Director, Regional Heart Center, Medical

**Cyndy Meeke, R.N.**
- Director, Open-Heart Unit/Transitional Open-Heart Unit

**Keith Micucci, R.N.**
- Director, Emergency Services, LVH-17th and MedEvac

**Nicole Reimer, R.N.**
- Director, 2C

**Jennifer Roeder**
- Director, Specialized Rehabilitation Programs

**Helen Schmell, R.N.**
- Director, Transitional Skilled Unit

**Kelly Shakh**
- Administrator, Rehabilitation Services
Nursing Degree Completion

These nurses completed their nursing degrees in 2007:

Jeanine Albert, R.N., B.S.N.
University of Scranton

Mary Bacher, R.N., B.S.N.
Bloomsburg University

Airisal Berrios, R.N., B.S.N.
Cedar Crest College

Michelle Betz, R.N., B.S.N.
Cedar Crest College

April Blandford, R.N., B.S.N.
Cedar Crest College

Christopher Bonner, R.N., A.D.N.
Northampton Community College

Kareh Bouson, R.N., B.S.N.
Excelsior College

Tiffany Boyd, R.N., B.S.N.
Cedar Crest College

Megan Breining, R.N., B.S.N.
West Virginia University

Lisa Bryn, R.N., A.D.N.
Northampton Community College

Ian Chapman, R.N., B.S.N.
DeSales University

Charlene Christman, R.N., B.S.N.
Cedar Crest College

Nicole Christman, R.N., B.S.N.
Bloomsburg University

Padraic Colley, R.N., B.S.N.
Cedar Crest College

Sarah Cruz, R.N., B.S.N.
Cedar Crest College

Carrie Dauscher, R.N., B.S.N.
West Chester University

Danielle Davidyack, R.N., A.D.N.
Lehigh County Community College

Eriel Day Lewis, R.N., B.S.N.
University of Scranton

Kathleen Duckworth, R.N., A.N.D.
Northampton Community College

Jennifer Dumas, R.N., B.S.N.
Cedar Crest College

Lynn Edwards, R.N., B.S.N.
DeSales University

Jillisa Ehst, R.N., B.S.N.
Drexel University

Stacey Elam-Baduini, R.N., A.D.N.
Passaic County Community College

Susan Elberfeld, R.N., A.D.N.
Cedar Crest College

Mary Bacher, R.N., B.S.N.
DeSales University

Kimberly Beininger, R.N., B.S.N.
Cedar Crest College

Janine Hahn, R.N., A.D.N.
Lehigh Carbon Community College

Leahna Haldeman, R.N., B.S.N.
Montgomery County College

Helena Heinrick, R.N., B.S.N.
Cedar Crest College

Susan Herman, R.N., B.S.N.
DeSales University

Lisa Holzworth, R.N., B.S.N.
Cedar Crest College

Ranee Houtz, R.N., B.S.N.
Cedar Crest College

Shannon Huffaker, R.N., B.S.N.
Cedar Crest College

Maria Joaquino, R.N., A.D.N.
Northampton Community College

Bridget Kalogerakis, R.N., B.S.N.
Bloomus University

Melanie Kershner, R.N., B.S.N.
DeSales University

Erica Kincaid, R.N., B.S.N.
Alvernia College

Joseph Kleca, R.N., A.D.N.
Northampton Community College

Tracy Knauss, R.N., B.S.N.
DeSales University

Stephanie Kanka, R.N., B.S.N.
DeSales University

Megan Lawrence, R.N., B.S.N.
East Stroudsburg University

Emily Lechten, R.N., B.S.N.
Bloomus University

Karen Leonardis, R.N., A.D.N.
Warren County Community College

Christine Lessinger, R.N., B.S.N.
Cedar Crest College

Tiana Mahr, R.N., B.S.N.
Cedar Crest College

Kelly Manwiller, R.N., B.S.N.
Alvernia College

Janelle Matsago, R.N., B.S.N.
University of Scranton

Erik McDonald, R.N., A.D.N.
Lehigh Carbon Community College

Kerry Moyer, R.N., B.S.N.
DeSales University

Stephanie Nelson, R.N., A.D.N.
Montgomery County Community College

Anthony Pacelli, R.N., A.D.N.
Lehigh Carbon Community College

Cheryl Palm, R.N., A.D.N.
Montgomery County Community College

Beth Pantelel, R.N., A.D.N.
Northampton Community College

Jennifer Pareja, R.N., A.D.N.
Lehigh Carbon Community College

Pamela Pashley, R.N., B.S.N.
Reading Hospital School of Nursing

Tara Pendrak, R.N., M.S.N.
DeSales University

Carmella Prestt, R.N., B.S.N.
Wilkes University

Jenna Priest, R.N., B.S.N.
DeSales University

Jamesetta Quicheh, R.N., B.S.N.
Cedar Crest College

Deborah Reilly, R.N., B.S.N.
Manchester University

Tracy Remaley, R.N., A.D.N.
Northampton Community College

Erik Resch, R.N., A.D.N.
Lehigh Carbon Community College

Gregory Romano, R.N., A.D.N.
Northampton Community College

Catherine Romig, R.N., B.S.N.
Alvernia College

Jean Sales, R.N., B.S.N.
Villanova College

Susanne Sandt, R.N., M.S.N.
DeSales University

Jessica Santos, R.N., B.S.N.
Iversona College

Susan Schoenig, R.N., B.S.N.
Albino Memorial Hospital School of Nursing

Helen Seidel, R.N., A.D.N.
Northampton Community College

Amy Surfas, R.N., A.D.N.
Lehigh Carbon Community College

Wayne Sowers, R.N., A.D.N.
Montgomery County Community College

Kimberly Stettler, R.N.
B.S.N.
Cedar Crest College

John Swirczek, R.N., M.S.N.
University of Scranton

Erin Tresta, R.N., M.S.N.
DeSales University

Thomas Wagner, R.N., B.S.N.
Kutztown University

Kelby Warshofsky, R.N., A.D.N.
Warren County Community College

Elizabeth Wheatley, R.N., B.S.N.
Cedar Crest College

Katherine Whetstone, R.N., A.D.N.
Northampton Community College

Christine Whitehead, R.N., B.S.N.
Bloomus University

Windy Williams Alonso, R.N., A.D.N.
Northampton Community College

Mary Wirth, R.N., A.D.N.
Northampton Community College

Robyn Wisor, R.N., A.D.N.
Lehigh Carbon Community College

Dorothy Yeley, R.N., A.D.N.
Warren County Community College

Susan Zorn, R.N., A.D.N.
Northampton Community College

Bridget Kalogerakis, R.N., B.S.N.
Bloomus University

Melanie Kershner, R.N., B.S.N.
DeSales University

Carmella Prestt, R.N., B.S.N.
Wilkes University

Jenna Priest, R.N., B.S.N.
DeSales University

Jamesetta Quicheh, R.N., B.S.N.
Cedar Crest College

Deborah Reilly, R.N., B.S.N.
Manchester University

Tracy Remaley, R.N., A.D.N.
Northampton Community College

Erik Resch, R.N., A.D.N.
Lehigh Carbon Community College

Gregory Romano, R.N., A.D.N.
Northampton Community College

Catherine Romig, R.N., B.S.N.
Alvernia College

Jean Sales, R.N., B.S.N.
Villanova College

Susanne Sandt, R.N., M.S.N.
DeSales University

Jessica Santos, R.N., B.S.N.
Iversona College

Susan Schoenig, R.N., D.P.L.
Albino Memorial Hospital School of Nursing

Helen Seidel, R.N., A.D.N.
Northampton Community College

Amy Surfas, R.N., A.D.N.
Lehigh Carbon Community College

Wayne Sowers, R.N., A.D.N.
Montgomery County Community College

Kimberly Stettler, R.N.
B.S.N.
Cedar Crest College

John Swirczek, R.N., M.S.N.
University of Scranton

Erin Tresta, R.N., M.S.N.
DeSales University

Thomas Wagner, R.N., B.S.N.
Kutztown University

Kelby Warshofsky, R.N., A.D.N.
Warren County Community College
Recognized for Excellence

FRIENDS OF NURSING AWARDS
Friends of Nursing recognizes and promotes excellence in nursing practice, nursing education and nursing research. Clinicians are nominated for annual awards by colleagues, patients and family members, and are recognized at the annual Friends of Nursing Celebration held in the spring. Forty awards were presented at our celebration, attended by more than 400 people.

Gwenis Browning, R.N.
Operating Room
LVH-Cedar Crest
Joseph J. Preok, M.D., Award for Excellence in Perioperative Nursing

Diane Chapin, R.N.
Float Pool
Joseph and Judith Kaminski Award for Excellence as a Float Nurse

Kimberly Ciazzo
7C Oncology Unit
The Medical Staff Technical Partner Award

Sandia Derbyshire, R.N.
Medical-Surgical ICU
Award for Excellence in Critical Care Nursing

Judith Dorans, R.N.
61/Pulmonary Endoscopy Unit
William F. Ihrie Jr. and

Elizabeth A. Hulse Digestive Sciences Award
Sharon Durval, M.S.P.T.
Homecare Physical Therapy
The Bill Mason Family Award for Excellence in the Delivery of Rehabilitation Services

Carol Fortenbaugh, R.N.
Mother-Baby Unit
Dr. and Mrs. Joseph Miller Award for Excellence in the Delivery of Obstetrical/Gynecologic Nursing Care

Julie Fulcher, R.N.
Emergency Department
LVH-Muhlenberg
The Medical Staff Nursing Practice Award

Jim Gates, R.R.T.
Respiratory Care
Open-Heart Unit
Dr. and Mrs. Peter Miraldo Award for Excellence in the Delivery of Respiratory Care

Jennifer Goetz, C.R.N.A.
Anesthesia
LVH-Cedar Crest
The Medical Staff Certified Registered Nurse Anesthetist Award

Diana Haines, R.N.
Emergency Department
LVH-Muhlenberg and LVH-17th and Chew
The Jeffrey L. Hitchings Award for Excellence in Education

Lillian Elizabeth Higgins, R.N.
Emergency Department
LVH-Cedar Crest
The Rose Trellel Award for Excellence as a Preceptor

Kimberly Hischak, R.N.
Neuroscience ICU
The Rachel Sniatka, B.S.N., R.N., Award for Excellence in Neuroscience Nursing

Nancy Humes, R.N.
Burn Center
The Robert Lurig Memorial Award for Excellence in Burn Care

Tina Jones, R.N.
Homecare Skilled Nursing
Alma W. Holland Award for Excellence in Home Care Nursing

Heather Katz
Student, DeSales University
The John M. Eisenberg, M.D., Award for Excellence as a Student Nurse

Carolann Kintd
5C Medical-Surgical Unit
LVH-Cedar Crest
The Medical Staff Support Partner Award

James Kocis, R.N.
7C Oncology Unit
Cancer Services Leadership Council Excellence in Cancer Care Award

Jill Krzstoinski, C.R.N.A.
Anesthesia
LVH-Cedar Crest
The Medical Staff Certified Registered Nurse Anesthetist Award

Dorothy Kuntz
Adult Behavioral Health
Award for Excellence as a Mental Health Technician

Christine Lehman
Mother-Baby Unit
The Fleming Nursing Caring Award

Kathleen Leszeni, H.T.
Histology
Health Network Labs
Kathy Kundt-Bulla Memorial Award for Excellence as a Laboratory

Lori Milat, R.N.
Pediatric ICU
M.G. Asnani, M.D., Award for Excellence in Pediatric Nursing

Deborah Noonan, L.P.N.
Mother-Baby Unit
The Helen Potts Licensed Practical Nurse Award

Theodore Phillips, M.D.
Lehigh Valley Heart and Lung Surgeons
Professional Excellence Award
Council Physician Friends of Nursing Award

Melissa Pina
Lehigh Valley Physicians Practice
Department of Legal Services Award for Excellence in the Promotion of Patient Care

Christine Reichard
6 Tower
Medical-Surgical Unit
The Medical Staff Administrative Partner Award

Ellen Saunders, R.N.
Transitional Skilled Unit
LVH-17th and Chew
The Fleming Nursing Caring Award

Allen Smith, R.N.
AIDS Activities Office
Josephine Ritz, R.N., Nursing Award for Excellence in Patient and Family Teaching

Megan Snyder, R.N.
6 Tower
Medical-Surgical Unit
Dr. and Mrs. Donald R. Gagler Medical-Surgical Nursing Award

Marlene Spevak
5C Oncology Unit
The Medical Staff Support Partner Award

Holly Tavanian, R.N.
7A Neuroscience Unit
DAA Orthopaedic Specialists

Award for Excellence in Orthopaedic Surgical Nursing

Judith Veglia, R.N.
Post-Anesthesia Care Unit
LVH-Cedar Crest
Allentown Anesthesia Associates, Inc.
Post-Anesthesia Care Nursing Award

Bonnie Wasilowsky, R.N.
Neurosurgery ICU
Award for Excellence in Critical Care Nursing

Rosemarie Wimmer, R.N.
Operating Room/Post-Anesthesia Care Unit
LVH-17th and Chew
Commitment to Patient Safety Award

Robin Zwolenik
Emergency Department,
LVH-Muhlenberg
The Medical Staff Administrative Partner Award

Emergency Department
LVH-Cedar Crest
The Lehigh Valley Health Network Board of Trustees Award to Recognize a Department that Demonstrates a Commitment to Professional Excellence

Emergency Department
LVH-17th and Chew
The Fleming Award to Recognize the Search for Best Practice

Outpatient Cancer Services
LVH-Cedar Crest (A)
LVH-Muhlenberg (B)
The LVHN Senior Management Council Patient Satisfaction Award

6 Tower
Medical-Surgical Unit
The Fleming Award to Recognize the Search for Best Practice
PROFESSIONAL AWARDS

Kim Bartman, R.N.
- Nightingale Awards of Pennsylvania Patient's Choice Award Recipient
- Pennsylvania State Nurses Association Courage, Commitment and Compassion Award Recipient
- New York Times Magazine Tribute to Nurses—Honorable Mention

Bartman helped revitalize a community Amputee Support Group and organizes the group's fund-raising events. She also lobbied in Harrisburg for the passage of a bill that would provide insurance coverage for prosthetic limbs.

Lynn Harris, R.N.
- Nightingale Awards of Pennsylvania Nursing Education Award Recipient

Through a unique reciprocal education program, patient care specialist Harris provides cardiac education to LVHHN caregivers while other specialists educate cardiac colleagues about their areas of expertise.

Kim Hitchings, R.N. (below, far right), and the LVHHN Professional Excellence Council (PEC) Nursing Advocacy Committee
- Pennsylvania State Nurses Association Advocacy-Legislative Award Recipient

Committee members address legislative issues impacting nursing practice, increase public understanding of the nurses' role in health care and communicate media portrayals of nurses as expert sources. Molly Sebastian, R.N., vice president of patient care services (bottom row, right), is pictured with PEC Committee members (back row, from left) Deb Stupak, R.N., Jodi Koch, R.N. (chair of the Professional Excellence Council), Grace Oberholtzer, R.N., Hope Johnson, R.N.; and Paulette Kennedy, R.N. (front row, left).

SERVICE STARS

Each month, colleagues and patients nominate employees who exceedingly deliver the best patient care and service for Service Star of the Month recognition. Here are the clinical services colleagues who received the Service Stars in the past year.

Laura Barany, R.N., 6T
Charlene Bergstresser, R.N., home health
Kai Bortz, R.N., transitional trauma unit
Foretta Byles, technical partner, 6T
Christina Kerchner, R.N., open-heart unit
Sharon Kloiber, R.N., case manager
Carol Lackner, support partner, 7B
Bonnie Magline, office coordinator, Burn Recovery Center
Alison Niebell, R.N., 6T
Vicki Trexler, R.N., medical-surgical intensive care unit
Suzanne Vesely, office coordinator, Burn Recovery Center

STAR CELEBRATION

The annual Star Celebration is where colleagues are honored for consistently demonstrating PRIDE behaviors. These clinical services colleagues received awards this year.

Service Star of the Year Award
Patti Kopko, case manager

Most Creative Reward and Recognition (R & R) Program Award
7A/Neuroscience Unit
Our Magnet Story

Lehigh Valley Hospital and Health Network is designated a Magnet hospital because of its ability to attract and retain the best and brightest clinicians by creating and sustaining a work environment that facilitates and rewards outstanding practice. Our Magnet story is best told through the stories of our clinicians.

Lehigh Valley Hospital and Health Network, named one of America's Best Hospitals by U.S. News & World Report in 2007 for the 12th consecutive year, is one of Pennsylvania's largest teaching hospitals. Its advanced regional resources include a Level I Trauma Center with added pediatric qualifications, regional Burn Center, as well as kidney and pancreas transplant, perinatal/neonatal, cardiac, cancer care, neurology and complex neurosurgery capabilities.

Read about our care delivery team online at lvh.org/nurses and in Magnet Attractions, our bimonthly magazine. If you would like to receive a printed copy of Magnet Attractions, call 610-402-CARE.

Our Magnet Caregivers
On the cover (from top): Andy Brown, R.R.T.; Karen Brixius, R.N.; Rosalie Boucher, R.N.; Emmanuella Ndujife; Michael Wargo, R.N., and Joseph Rycek, R.N.

At right (from top): Robert Allman Jr., R.R.T.; Melanie Kershner, R.N.; Paula Travis, R.N.; Lisa Bauer, R.N.; and Tenise Everk, R.N.