



# our nurses' story





Our Dayton Children's team along with the entire world has been faced with challenges in our professional and personal lives that we did not anticipate, nor did we have on our life "bucket list." The COVID-19 pandemic has impacted every aspect of our lives, both personally and professionally. My pride for your nursing care, response to constant change and ability to even improve our patient experience and nurse sensitive care outcomes during this time is amazing. I can't begin to thank you for all that you did for our patients, families and each other in 2020.

This past year has brought us significant changes in our patient care needs. We've experienced dramatic increases in our behavioral health volumes, trauma numbers and neonatal intensive care unit patient volume and acuity. These changes resulted in our continuous need to evaluate staffing levels and plans using your feedback, data analysis and performance improvement principles.

This annual report features your nursing practice using the principles of shared governance to care for your patients and families in ways that are above and beyond. Those include:

- Performance-based outcomes related to Hospital Acquired Condition (HAC) improvement strategies.
- Implementation of our shared governance council focused on informatics/technology.
- Expansion of behavioral health services.
- Improvements in barcoding medications and pyxis upgrades.

You will see the amazing achievements we have made as we achieved our previous strategic plan and are pivoting toward our new plan — called reinventing the path to children's health. As the pediatric anchor, we're ready to lead this effort toward the health of children, not just their health care. This plan will require each one of you to propel us in this pursuit. The health of children depends on it. Thank you for all that you do to care for our region's children.

**Thank you,**  
**Jayne Lachey Gmeiner, MS, RN, NEA-BC**  
chief nursing officer  
Dayton Children's Hospital



176  
beds



380,000+  
total visits



**magnet  
recognized**  
since 2016 among the  
top seven percent of  
hospitals nationwide



# about us



WRIGHT STATE  
UNIVERSITY

together with  
**Wright State University  
Boonshoft School  
of Medicine**

only pediatric military civilian  
integrated residency  
in the country



**gold**



**level 1**  
pediatric trauma  
center



**983**  
nurses

**24%**  
nurses

105 APRNS  
867 RNs  
11 LPNS

certified

## about our nurses

**65%**  
nurses

**5**  
nurses

BSN or higher

doctorate degrees

# cameo of caring 2020



## Allison Scott, MSN, RN, CPN

Allison Scott, MSN, RN, CPN, nurse educator for specialty pediatrics was selected as the 2020 Cameo of Caring award winner.

In her eight years at Dayton Children's, Allison has demonstrated a natural ability to assist others while seamlessly educating them in the process.

"We are impacting someone greater beyond ourselves and the most rewarding feeling is actually being there to serve others in their time of need, when they need it the most," Allison said in the video.

She described pediatrics as a "breath of fresh air," because it is something that she enjoys doing.

Allison has been instrumental in developing new processes and nursing education for GI providers. She has also committed herself to assisting with our behavioral health population.

She serves as the current chair of the patient experience council.

Allison shows her commitment to caring for the community by serving as a clinical instructor for one of our local universities and being an active volunteer with the Dayton Police Department and their outreach programs aimed at aiding at-risk children.

"That's the biggest passion that I have to touch as many (patients) as we can and change the world," Allison said in the video.



# nursing excellence award winners 2020



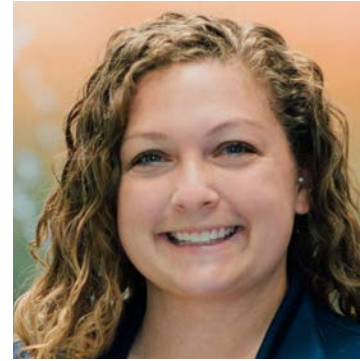
**Lindsay Coffey**  
7 Specialty Pediatrics  
advocacy moral agency



**Stephanie Sanders**  
pediatric procedural unit  
caring practices



**Amy Staup**  
hematology/oncology  
clinical inquiry



**Caitlin Hicks**  
PICU/transport  
clinical judgment



**Samantha Mescher**  
neurology clinic  
collaboration



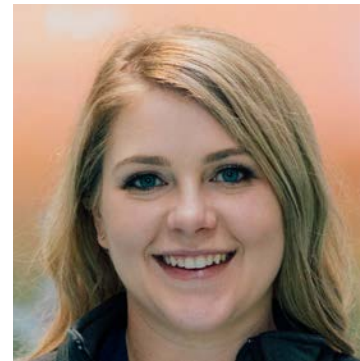
**William Andres**  
main emergency  
department  
facilitator of learning



**Layne Wright**  
inpatient behavioral  
health unit  
outstanding  
new employee



**Rebekah Colon**  
TCU  
outstanding  
new graduate



**Christina Jacobs**  
main emergency  
department  
response to diversity



**Leora Langdon**  
pulmonary clinic  
systems thinking



# cameo of caring 2019

## **Michele Nadolsky, BSN, RN, CPEN**

Over the last 25 years, Michele has been a driving force in process improvement initiatives throughout Dayton Children's. Michele's vast knowledge and clinical aptitude have put her on the leading edge of several ground-breaking endeavors.

Michele served as a charge nurse in the emergency department for many years, then in 2016 she became one of the first clinical team leaders (CTL) in the hospital. She quickly adapted to her new leadership responsibilities, bridging the gap between management and front line staff.

As a systems thinker, Michele recognized inconsistencies with the ED triage process. She orchestrated the development of "Triage Boot Camp," a comprehensive peer-to-peer re-education of the triage process. This training validates triage competency and standardization which enhances patient safety and the patient experience.

Michele became one of our first trauma nurse leaders (TNL) in 2011. She was a part of the grass roots effort to elevate Dayton Children's Hospital to a level 2 trauma center. The TNL program has been recognized by the American College of Surgeons.

She is a course director for both ENPC and TNCC, helping expand course availability here at Dayton Children's and at other hospitals. Michele routinely precepts new nurses, students and Partners in Practice nurses from Wright-Patterson Air Force Base. Michele guides novice airmen through the intricacies of emergency medicine and prepares these troops for deployment in foreign lands.

Michele volunteers her services to the American Red Cross and was deployed to communities devastated by Hurricane Michael in 2018. Michele is the head of her post in the American Legion — the nation's largest wartime veteran's service organization.

Michele is a wealth of knowledge and a valuable member of both the ED team and Dayton Children's nursing staff. She continually advocates for patients at a unit level and systems level. In addition, she encourages critical thinking and professional growth of her colleagues.



# nursing excellence award winners 2019



**Amy Kunkel**  
IV therapy  
advocacy moral agency



**Ashley Gremling**  
hematology/oncology  
caring practices



**Cassandra Harris**  
emergency department  
clinical inquiry



**Chelsea Frantz**  
two west  
clinical judgment



**Diane Faulkner**  
trauma PI coordinator  
collaboration



**Ashley Brugger**  
TCU  
facilitator of learning



**Amanda Friedlander**  
surgery  
outstanding  
new employee



**Kayla Hurst**  
specialty pediatrics  
outstanding  
new graduate



**Kymbrynn Henneke**  
house float  
response to diversity



**May Bustillos**  
Dayton Children's  
Pediatrics  
systems thinking



# 524

DAISY nominations

## DAISY award

The quarterly DAISY Award recognizes nurses for their extraordinary acts of compassion and excellence in their work with patients, families, the community and their co-workers. All nurses, in any role, may be nominated and considered for a DAISY Award.

### **January 2019**

Britney DuBro, PICU

### **February 2019**

Janelle Harshbarger,  
emergency department

Emily Hennegan,  
emergency department south campus

### **March 2019**

Karinne Riesenbergs, specialty pediatrics

### **April 2019**

Madilyn Ullmer, emergency department

### **June 2019**

Sonja Poffenberger, specialty pediatrics

### **July 2019**

Amanda Bowersox, NICU

### **August 2019**

Mary Poppaw, home health care  
MaKayla Oney, TCU

### **September 2019**

Julia Hanaway,  
specialty pediatrics three west  
Benjamin Blue, NICU

### **October 2019**

Karla Cox, post-anesthesia care unit

### **December 2019**

Jordan Buxton, float

### **January 2020**

Casey Hookfin, three west

### **February 2020**

Jenifer Selmon,  
hematology/oncology

### **July 2020**

Jacob Stites,  
seven specialty pediatrics

### **August 2020**

Jennifer Lowe,  
gastroenterology clinic

### **September 2020**

Jill Dawson, NICU

### **October 2020**

Chelsea Stewart, PICU

### **November 2020**

Dalton Peak, seven specialty pediatrics

### **December 2020**

Tyler Turner, hematology/oncology

# 119

POPPIES nominations

## POPPIES award

The POPPIES award stands for “Power of Positive People in Excellent Service” and is given by nursing to clinical support staff, respiratory therapists, environmental services, facilities and many others. The award honors someone who has provided excellent service and partnership to nursing.

### **January 2019**

Paula Schneider, financial counselor

### **March 2019**

Danielle Palmer, PCA,  
emergency department

Fern Leland, interpreter

### **May 2019**

Gary Creager, PCA, float

### **June 2019**

Kelsey Goins, PCA,  
emergency department

### **July 2019**

Jillian Compton, PCA, float

### **August 2019**

Chase Chambers, resident

Matthew Zuzolo, lab technician

Jennifer Nichols,  
manager – community testing

Shellie Vencill, neurology, EEG tech

### **September 2019**

Shann Stout, polysomnographer

### **October 2019**

Haleigh Wysong, emergency tech

### **November 2019**

Drema Spiller, PCA,  
hematology/oncology

### **December 2019**

Sarah Wise, security

### **January 2020**

Alexis Lambert,  
hematology/oncology

### **February 2020**

Allen Avery, environmental services

### **July 2020**

Roberta Nichols, laboratory

### **August 2020**

Donna Dawkins,  
perioperative services

### **September 2020**

Amber Kombrinck, TCU

### **October 2020**

Taylor Hoke, float PCA

### **November 2020**

Marie Patel, cardiology

### **December 2020**

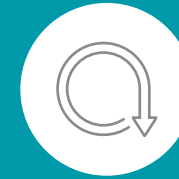
Brooke Mazur, south campus  
emergency department

Dayton Children's implemented extended dwell (ED) catheters in July 2019. These catheters are placed using ultrasound to capture a deeper, larger vessel. By using these vessels, it allows the catheter to dwell longer than the shorter catheters used in the superficial vessels. Extended dwell catheters are placed in the upper arm and terminate before the armpit, rendering it a peripheral catheter.



## why

Dayton Children's had an increase in the number of peripherally inserted central catheters (PICC) inserted for less than the seven-day requirement, especially for the headache population. These patients receive medication to break the cycle of their headaches. This medication can be hard on the superficial veins using the shorter catheter. Most patients required five to six peripheral catheters (PIVs) within a 48 hour period, due to the harshness of the medication.



## downside

As with any other catheter, there are risks. These risks can include leaking at the site, thrombus, phlebitis and occlusion. Anything requiring a central line, such as total parenteral nutrition (TPN), vasopressors and some antibiotics (vancomycin) cannot be infused through the catheter due to the tip location. The extended dwell catheters cannot be sent home with the patient. If the medication infiltrates during infusion, the infiltrate will be harder to detect due to using a deeper vessel.

# extended dwell catheters



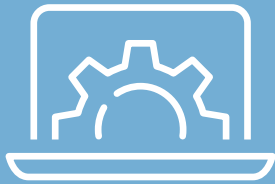
## benefits

The main benefit is the catheters can dwell for up to 30 days, avoiding multiple sticks. Another significant benefit is the ability to draw labs due to the reinforced tip, avoiding additional sticks. In using these catheters, central line days are decreased, therefore decreasing the chance of a central line associated blood stream infection.



## to date

The vascular access team has placed 20 extended dwell catheters since July 9, 2019. Some of those included four headache patients in the specialty pediatrics unit who would have otherwise had PICCs for a short period of time. Eight acutely-ill children avoided PICCs in the PICU with the use of extended dwell catheters. One patient in the transitional care unit who was difficult to stick also benefited from the catheter for medication, fluid administration and frequent lab draws. The youngest patient is 2-years-old and the oldest is 21-years-old.



# clinical informatics team/ SUIT team

Providers have a silent partner in every encounter with a patient and the family – the technology and computer systems that record, analyze, store, consolidate and communicate that patient's information. This silent partner can make or break a patient encounter. It can make a provider's job easier, allowing them more time to focus on the patient or make simple tasks a complicated jumble of frustration.

The goal of Dayton Children's clinical informatics team is to collaborate with clinical information systems (CIS) to ensure technology is a tool rather than a barrier to providing exceptional patient care. Created in April 2018, its first major task was helping prepare for a double Epic upgrade six months later.

"We leapfrogged to the latest version of Epic, which gave us a lot of innovative functionality that we didn't have before," says Melissa Michener, director of the team. "It also substantially changed the look and feel of the system, so that was going to be a pain point for our caregivers. To ease that pain, we worked with clinical leaders and CIS to create the SUITs – super user informatics team."

The "super user" concept started as Dayton Children's geared up to open the patient tower in 2017. Eight new technologies were implemented at the same time – an almost unheard-of feat. To ensure success, clinical leaders were selected to train extensively on the advancements then train their staff prior to opening. They were called super users.

The SUITs took that concept to the next level. Instead of going back to business as usual after a certain technology was implemented, this team would continue to serve in this role as new technologies were acquired and implemented.

The SUITs are nurses, respiratory therapists and ancillary team members selected to be early adopters of the technology. They became experts in what was going to change in Epic and how it was going to function so they could be a resource for their co-workers when the switch happened.

"We were the go-to person when someone ran into a snag," says Courtney Wagner, RN, neurology clinic. "We didn't take patients on the days we were staffed in our SUIT role so that we could be instant tech support right there in the trenches. We also made sure the upgrades were functioning as we expected them to and if they weren't, we knew who to escalate the problem to for the quickest resolution."

Two other big projects the team participated in involved the Epic builds for home health care and the hospital's first-ever inpatient behavioral health unit.

"Mental health is a rapidly evolving area and it's a new area for Epic as well. Through collaboration, our teams made sure Epic worked to support the caregiver's workflow," says Melissa.

Moving forward, the focus is on realizing the vision for what this team could be, ensuring their time is well spent working on the priorities defined by the end user. A newly created governance model ensures that the right group of people are at the table to decide which optimizations move forward, which need to wait and which just don't make sense for our organization. Clinical informatics serves as the guardian of the mantra that just because we can, doesn't mean we should.

Through collaboration, these teams are finding the best ways to use technology as an additional arm of a provider, extending their reach to care for their patient in the best way possible.



**exemplary  
professional  
practice**

# Dayton Children's externship program

The summer nurse extern program at Dayton Children's gives nursing students nine weeks of on-the-job, clinical experience while being mentored by skilled nurses.

This combination of direct patient care and nursing academics helps prepare students for a career in nursing. About 75 percent of our externs end up staying on and working at Dayton Children's.

Two clinical nurses in Dayton Children's pediatric intensive care unit (PICU) began their nursing careers as externs, in two different areas.

For Amy Braden, RN, the extern program gave her clarity about her career path. "I did my externship in preop/PACU. I was able to learn about surgeries, surgery preparation and recovery," said Amy. "I feel it gave me great perspective on how the everyday operations and policies work at Dayton Children's - and afterward, I was certain that Dayton Children's was the place I wanted to work."

For Emily Thatcher, RN, the program built her confidence and proficiency. "My externship in the PICU and transitional care unit helped me to become more comfortable with my basic nursing skills and time management," said Emily. "I developed skills that some nurses may not perform very often, like working with intubated patients and tracheotomies. This allowed me to use my practicum to focus on critical thinking skills, while my peers were working on the building blocks I had established as an extern. I was able to enter the nursing field feeling more comfortable and confident than I think I would have been without the experience."

The summer nurse extern program is offered to nursing students at Wright State University and Cedarville University. The program includes:

- Nine weeks of mentored clinical experience at Dayton Children's
- Weekly seminar of didactic lecture and classroom experience at Dayton Children's
- 36-40 paid hours per week
- College credits awarded and tuition payment for associated courses

"Dayton Children's was wonderful by providing weekly classes to further build on our skills. I was also able to transition immediately after the program to become a house float patient care assistant. This allowed me to be flexible in my schedule with classes and exams, while continuing to get to know the hospital," said Emily.

Externs have the opportunity to work in several pediatric specialty areas across the hospital, including hematology/oncology, pediatric intensive care and perioperative services. Providing access to a variety of specialties can help nursing students make informed decisions about which practice area to pursue.

"I would definitely encourage anyone I know to apply to Dayton Children's nurse extern program. It gives students hands on experience that is so valuable," said Amy.

"Given the chance, I would complete the program 100 times over. I am very grateful for the opportunity and where it has taken me at Dayton Children's," said Emily.



**1 in 5 families  
will need help  
for a behavioral  
health issue**

# behavioral health

## special skills needed for behavioral health inpatient unit

On June 26, 2019, Dayton Children's Hospital unveiled its first inpatient behavioral health unit in its 50-year history as a free-standing, independent Children's Hospital. This unit's goal is to stabilize a child in crisis with a safe, comfortable and supportive environment. Patients are then provided with a connection to ongoing outpatient therapy. Their healing process begins with a combination of traditional talk therapy, art, music and movement therapy as well as the unique use of an interactive media board.

Our 24-bed unit is designed with safety as the highest priority. Each child is provided with a private bedroom and bathroom. Every feature and fixture in their rooms have been thoughtfully selected to maintain the highest levels of safety without feeling institutional. This includes ligature resistant ceilings, doorknobs and bathroom fixtures, thicker than average walls and ceilings, impact resistant windows with integrated blinds which allow for privacy while reducing the dangers of cords and slats. Our furniture is extremely heavy to prevent throwing or extremely light to reduce injury if thrown.

Staffing on the unit is as unique as the design. Nurses enhance their clinical skills with a hypervigilance towards the child's safety and state of mind.

"Nurses on our unit are expertly trained in crisis management, verbal de-escalation and trauma informed care. These skills are imperative to providing safe and therapeutic milieu to the patients we serve," Brandi Goldman, BSN, nurse manager.

Goldman looks for a few key details when hiring her staff. These include experience in using important de-escalation techniques, teamwork and one's ability to focus on a patient's unique and often complex diagnosis.

Starting as the Nurse Educator on the unit, Goldman's job was to tailor the employee's education to fit the needs of each patient and their individual situations. Now as manager she ensures that the education of her team is focused on safety and structure which promotes a diverse and all-inclusive culture on the unit.

This culture extends to the roles played by each staff members on the unit. Nurses work in conjunction with Mental Health Technicians who

typically have degrees in areas such as social work, criminal justice, psychology or psychiatry while some are working towards licensure in their field. "Techs run groups and manage the milieu and the nurses conduct a thorough psych assessment and provide patients medication," says Brandi. "Together, the nurses and MHT's combined experience work to strengthen our team."

Because this particular unit accepts children with chronic conditions such as diabetes and asthma, nurses have to be on the lookout for warning signs of problems both physical and psychological. Since psychiatric medicines can cause side effects, nurses take vital signs and give valuable psychiatric assessments twice a day. Nurses also ask the patients a variety of questions which help assess the safety of the child.

As in any unit of the hospital, it is crucial that the nurses understand the importance of the role that family plays in the lives of the patients and how it relates to their care. How the staff reacts to dysfunction, generational behavioral health issues or attitudes created by group home or correctional environments will be crucial to the future success of each patient.



**suicide is now  
the second  
leading cause  
of death for  
ages 10-24**

# behavioral health

Dayton Children's is also the first pediatric hospital in North America to fully integrate media boards into the daily regimen of the patients. Created by Dutch company Reconnect, the media board acts as a giant iPad or tablet embedded into the wall of each bedroom and relaxation room. The patient can use it to view their schedule, look up their treatment plan, play games, draw or access relaxing music and images. They are built to withstand high levels of wear and tear making them perfectly suited for the behavioral health unit. They also allow these young people to engage in technology that is already so familiar to them.

Dayton Children's is the first pediatric hospital in North America to integrate media boards created by Reconnect, a Netherlands-based company. Like a giant iPad or computer tablet embedded in the wall of each bedroom and relaxation room, the child or teen can use it to see their schedule, view their treatment plan, play games, complete puzzles, draw or access relaxing images or music. They are perfectly suited to behavioral health units as they are virtually indestructible. They also allow teens to connect in a way that they are already comfortable and familiar with.

"Our teens and adolescents are digital natives. Technology is like air to them — they live it and breathe it," says Kelly Blankenship, DO, behavioral health inpatient manager at Dayton Children's. "These boards allow us a way to connect with them on a whole new level and give them tools and techniques to be good digital citizens — truly an innovative use of technology to better serve our children."





**continued  
enhancement  
of device  
integration**

# new knowledge, innovations and improvements

## **better patient safety, efficiency through technology**

Our first value at Dayton Children's is safety. In the never-ending quest to ensure each encounter is as safe and effective as possible, Dayton Children's transitioned from standard Alaris infusion pumps to Alaris interoperability in October 2018. These pumps have several benefits that not only increase safety, but make the administration of fluids or medications at a pre-determined pace easier and more efficient.

The process is simple. The provider enters an order into Epic. The pharmacy fills that order and sends it to the unit. The nurse then scans the medication or fluid on the Alaris pump. The pump reviews the chart in Epic to ensure that the item that was ordered is what is scanned. It considers type, concentration and volume along with many other variables including any possible drug interactions.

However, the integration was not easy or simple. An intense collaboration between nursing, pharmacy, IT and clinical information systems implemented the process over the course of nine months. Each drug and fluid —

literally thousands - had to be programmed into the system with a bar code. The system had to be configured to read those bar codes and share information with the pump and Epic. The staff then also had to be trained to use the pumps and hardwire new thinking, since they had been used

to doing calculations mentally and cross checks by hand.

The end result has been outstanding. From January to March of 2019, the Alaris pumps caught 74 medication errors before they were administered.

### **BPAM — more great safety**

The BPAM (blood product administration module) software is similar to what the Alaris Interceptor does, except for blood products. When a nurse scans the unique unit number on the blood bag, it checks to ensure that this is the blood ordered for this patient in this room. Software like this or a check by two nurses is required. Even with the implementation of the software, Dayton Children's chose to keep its two-nurse check in place for an added layer of safety.

It took a year of preparation and a similar team to implement this process in November 2018. While the biggest selling point is safety for the patient, it also saves nurses from jumping

between screens of different programs to check blood projects.

Another big improvement area was surgery. The Epic workflow was set up for nurses to deliver the blood products, but the anesthesiologist performs that role during surgery. This required a nurse to step away from her role in the OR to document for the anesthesiologist. With BPAM, they can do it themselves. This is another safety and time saving issue — as the person who is actually administering the blood is doing the documentation.

Another area it improved was documentation. There tended to be a lag in entering when a transfusion ended. Now the blood manager has all the tools to make sure that documentation is complete in a timely fashion.





**upgrades in  
technology  
are core to  
our practice**

# new knowledge, innovations and improvements

Care givers are also able to document more accurately.

“For a fluid bolus, when seconds and accuracy matter for a rapid infusion of fluids, a provider would have documented 500 ml, because that was what the container held,” says Greg Bader, MSN, RN, CCRN, clinical technology integration team. “In reality, the patient may or may not receive that entire amount. The Alaris pump documents exactly how much the patient actually received rather than just the amount that was in the bag and records that amount in the patient’s chart in Epic. It can also be programmed to deliver an exact amount in a given amount of time, eliminating variables that once might have impeded the best quality care.”

The Alaris pumps are a significant investment – 600 new pieces had a price tag of \$1.2 million. However the return on that investment is a safer, more effective patient experience and a more confident care delivery team.

## **Pyxis – more great safety**

In June 2019, Dayton Children’s rolled out new Pyxis automated medication dispensing systems – more than 70 machines across several locations. The new machines were an upgrade in safety, security and ease of use.

“We have all seen the national headlines discussing issues with drug diversion and overdosing at other hospitals that have resulted in patient harm or even death. It was important that here at Dayton Children’s we took a closer look at our practice and ‘tightened the reigns’ on Pyxis access and accountability,” says Sarah Begley, MSN, RN, CPN, clinical educator for seven specialty pediatrics.

One step was to remove all non-medication items from the Pyxis and to ensure that only those who administer medications within the organization have access to the machines. Another important upgrade of the system regarding drug

diversion issues was the tracking ability for narcotics with a new process. The system also includes a witness sign-off for wasting controlled substances.

Another feature that improved safety and ease of use was the ability to build a patient list. This allows a nurse to see just his or her patients, instead of scrolling through the entire list of inpatients. The new Pyxis system also had a better integration with Epic, adding due times of medications on the actual Pyxis screen.

For training, several stations were set up for 45 days straight, 24 hours a day, eight of those hours staffed by super user trainers. Two week blocks were allocated for each division prior to the rollout in their location. A white board kept track of questions. Answers were sent weekly.

“Maybe because we used candy in the machines to train with, but staff seemed to enjoy the training process and moved pretty quickly through it!” shares Begley.



One of only 509 hospitals across the country to earn Magnet-designation



13 nurses are designated as writers for the Magnet report



# Magnet

## Dayton Children's Hospital receives Magnet® re-designation

In July 2018, Dayton Children's achieved the second Magnet Redesignation. Magnet Designation continues to be the highest honor for a nursing and intraprofessional team and is the gold standard.

Magnet designation is nursing's highest honor, meaning Dayton Children's Hospital has been recognized nationally as the gold standard in patient care and the professional practice of nursing by the American Nurses Credentialing Center (ANCC).

The 503 Magnet-designated organizations represent approximately just eight percent of all U.S. health care organizations. Dayton Children's is one of 31 Magnet hospitals in Ohio. Magnet hospitals have lower patient mortality, fewer medical complications, improved patient and employee safety and higher patient and staff satisfaction.

"Receiving Magnet re-designation is a huge win not only for Dayton Children's nurses and staff, but also for our patient families and the community," says Jayne Gmeiner, MS, RN, NEA-BC, chief

nursing officer. "The kids we treat are truly the real winners here because this is just another reminder of the amazing care by the best nurses available to patient families throughout the region."

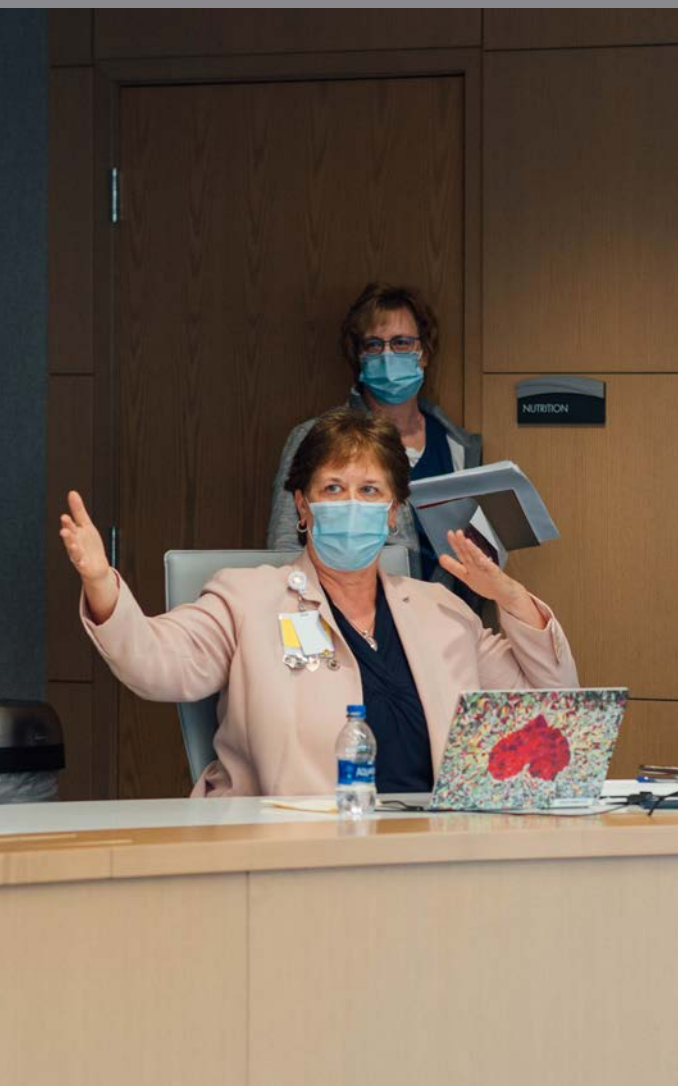
In order to achieve Magnet designation, Dayton Children's achieved a comprehensive set of criteria measuring the strength and quality of nursing. To nurses, Magnet recognition means education and development through every career stage, which leads to greater autonomy at the bedside. To patients, it means the very best care delivered by nurses who are supported to be the very best that they can be.

Currently, we are on our journey for 2022 redesignation.





## 1st confirmed MIS-C patient in Ohio was treated at Dayton Children's



# COVID/MIS-C

While COVID-19 appeared to predominantly affect adults, there was another, more dangerous condition affecting children: Multisystem Inflammatory Syndrome in Children (MIS-C), a rare, but serious complication associated with COVID-19. Symptoms included high fever, rash, fatigue and inflammation of the heart, lungs and kidneys.

The first confirmed MIS-C patient was admitted to Dayton Children's in May 2020 and since then, 38 children have been hospitalized.

Jayne Gmeiner, chief nursing officer, said a panel of medical specialists formed to stay on top of the treatment protocols for patients and to offer support and guidance to nursing staff.

"We had to lean into one another and figure out what was the best way to care for patients while keeping our medical teams safe. We were constantly learning and communicating what we knew while at the same time checking in with our staff to make sure they were okay and supported."

Given the severity of symptoms, many of the MIS-C patients were admitted to the pediatric intensive care unit (PICU).

Emily Thatcher, RN, recalled one case where a young pre-teen boy had symptoms so severe that he needed dialysis to help his kidneys. "He was in the PICU for several months, including Christmas Day. We decorated his room and tried to make life a bit more fun while he was with us."

"This past year has been a time of uncertainty, but I am so proud of how, as a team, we rallied together, cared for patients and their families and supported one another," Emily says. "I'm thankful to be a nurse at Dayton Children's."

"From the very beginning, everyone was very clear on how we operated," Emily said. "There was transparency and open communications from the leadership team all the way down to our direct supervisors. We did everything we needed to do to make this a safe and caring environment for all."

For Jayne, she could not be more proud of the nursing staff at Dayton Children's.

"The nurses did a fantastic job," Jayne said. "They were agile, stood up to the challenges and did whatever was needed to care for patients. They went above and beyond, and I am grateful to each and every one of our nurses."



dayton  
children's

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above and beyond