



APC Connection - January 2023



*Maureen Seckel, MSN,
APRN, ACNS-BC, CCNS,
CCRN-K, FCCM, FCNS,
FAAN*



Maureen Seckel Inducted as Fellow of American Academy of Nursing From <https://news.christianacare.org/2022/11/maureen-seckel-inducted-as-fellow-of-american-academy-of-nursing/> She is among 250 distinguished nursing leaders named to the 2022 Class of Fellows at the Academy's health policy conference on Oct. 29 in Washington, D.C. From <https://news.christianacare.org/2022/11/maureen-seckel-inducted-as-fellow-of-american-academy-of-nursing/>

Here are some photos from the Reception held for Maureen Seckel to celebrate her induction and becoming a recipient of the Lifetime DAISY Award. The event was held on November 4, 2022, at the Ammon Center Auditorium.





Presentations & Panel Participations by our peers



Adrienne E. Abrenica, DNP, MSN, AGACNP-BC, FNP-BC

Lead Nurse Practitioner, Cardiology Short Stay Unit & Wilmington Cardiology Care Unit

Center for Heart and Vascular Health

"Advanced Practice Providers on the Mission Field" presented at the Global Missions Health Conference, Louisville, KY Nov 10-12, 2022

Greg O'Neill MSN, APRN, AGCNS-BC, NPD-BC

Director, Patient & Family Health Education | Nursing Professional Development

Institute for Learning, Leadership & Development (iLEAD)

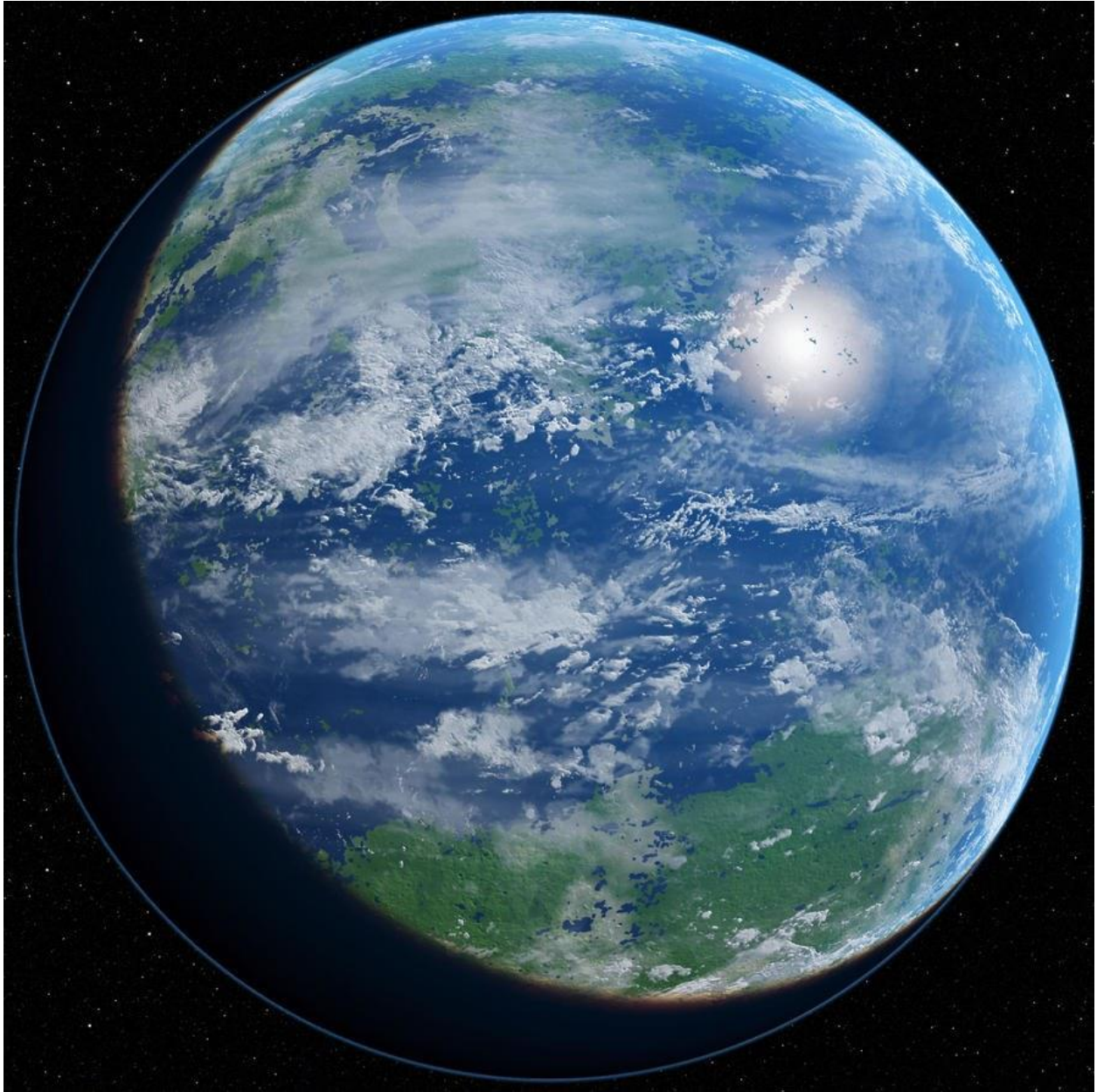
Participated in two virtual panels for Health Literacy Month and has been leading a statewide effort to launch a new state council for Health Literacy which kicked off in November 2022.

Lija Gireesh, DNP, MBA, FNP-BC, NEA-BC, COHN-S

Manager, HR Caregiver Services

Presented at the national convention of National Indian Nurse Practitioners of America (NINPA) affiliated with AANP on November 12, 2022 and won the Luminary Award for her presentation entitled "Research. EBP and QI and how does it help with innovations in HealthCare.

One Planet



Health Professionals Are Called Upon to Help Save the World, Again

By Deanna Benner, NP

Every time we turn on the news, it seems that there is a new environmental disaster occurring, from devastating superstorms and record wildfires to profound droughts and most recently the treacherous flooding of California. This bizarre and extreme weather is attributed to the persistent trend of the

heating of our planet. Most of this warming has occurred in the past 40 years, with the last eight years being the hottest on record since temperatures were measured in 1886.<1> We can all see and feel that there is a definite trend that our planet is warming, and over 97% of scientists who study our climate believe that this trend is related to the burning of fossil fuels, causing the release of greenhouse gases into the environment.<2>

The fundamental tenet of health care is to “Do no harm.” However, the current practice of health care delivery in the United States is producing direct harm to our environment, and indirect harm to the health of our community members.<3> The health care industry in the United States has a large ecological footprint contributing 8.5% of our total carbon emissions gases.<4> These gases directly contribute to climate change which then affects health, exacerbates health disparities, and causes premature deaths. It is now estimated that the deaths related to health care pollution are comparable to the magnitude of deaths due to medical errors.<5>

The fundamental tenet of health care is to “Do no harm.”

The World Health Organization has declared that climate change is the biggest health threat facing humanity, and we are already seeing the health harms caused by global warming.<6> The good news is that there is still time to mitigate the effects of climate change and improve the health of our community going forward. Climate scientists have found a range of possible future changes in Earth’s temperature, but it will depend largely on how quickly we reduce greenhouse gas emissions. This scientific data was released by the 5th Intergovernmental Panel on Climate Change (IPCC) in 2014 which led the way for the creation of the Paris Agreement, an international treaty which set the goal of limiting global warming to 1.5°C compared to preindustrial levels. 1.5°C is significant because it is the known threshold for the prevention of further catastrophic weather events.<7>

Unfortunately, many countries that pledged reductions in emissions under the Paris Agreement have not taken the necessary steps to achieve those goals. Politics, power relationships, and climate disinformation campaigns are responsible for blocking the necessary climate policies. In addition, scientists underestimated the effects of warming on our eco-system, so we are seeing faster and more significant environmental consequences than ever predicted. As a result, it is **Now or Never** to limit global warming. We are at a crossroads, and we all need to take actions now to make a secure, livable future for all people.<8>

To be trusted voices, health professionals must seek the knowledge to fully understand the relationship between climate and health.

Right now, there is a lot of conflicting information in the media regarding climate change, leading to confusion as to who people can turn to for facts. Health professionals need to be the ones communicating to the public climate information because according to Gallup polling, we are the most trusted voices in America. For the past 20 years in a row, nurses have been voted the #1 most trusted

profession, while physicians are close behind in second place. Health professionals are the trusted voices that have the unique opportunity to communicate to the public the importance of supporting global efforts to decrease greenhouse emissions to protect the health of all people and the health of the planet<9>

To be trusted voices, health professionals must seek the knowledge to fully understand the relationship between climate and health. We must then put that environmental wisdom into action by modeling and speaking up for sustainability at work and in our communities so everyone can understand how our health is connected to the way we interact with our environment. May we always be mindful of the way we deliver care and never lose sight of the connection between health care pollution and the increased burden of disease on public health. Lastly, as health professionals, we have the responsibility to use our trusted voices to advocate to leadership in our departments, hospitals, communities, and governments for policies that protect public health from climate change.

It is essential that we work together and engage in this important issue because time is running out to limit global warming to ensure a stable, livable planet for all people. Each of us has the power and the responsibility to help direct our organization towards a more environmentally responsible health care. As the 2nd largest employer in Delaware, improving our environmental footprint at ChristianaCare would serve as a catalyst for other organizations to do the same. We can meet the moment and be the stewards of a healthier planet for today, and for the generations to come. We can be the superheroes to help save the world, again, and the time to start is now.

For more information on Climate and Health:

- Join the Christiana Care's Team Site: One Planet
- Mid-Atlantic Alliance for Climate and Health: 2022 Climate and Health Conference. Available at no charge at: [2022 Climate and Health Conference - Mid-Atlantic Alliance for Climate and Health \(maach.org\)](https://maach.org)

Alliance of Nurses for Healthy Environment [ANHE \(envirn.org\)](https://anhe.org)

- Health Care Without Harm: [Health Care Without Harm \(noharm.org\)](https://noharm.org)

<1> [Evidence | Facts – Climate Change: Vital Signs of the Planet \(nasa.gov\)](https://climate.nasa.gov/evidence/)

<2> <https://climate.nasa.gov/faq/17/do-scientists-agree-on-climate-change/#:~:text=Yes%2C%20the%20vast%20majority%20of,global%20warming%20and%20climate%20change.>

<3> *Environmental Impacts of the U.S. Health Care System and Effects on Public Health.* *PLoSOne*.2016;11(6):e 0157014.z

<4> *Eckelman, M.J. et al. (2020) 'Health care pollution and public health in the united states: An update', Health Affairs, 39(12), pp. 2071–2079. Available at: https://doi.org/10.1377/hlthaff.2020.01247.h dam*

<5> *Eckelman, M.J. et al. (2020) 'Health care pollution and public health in the united states: An update', Health Affairs, 39(12), pp. 2071–2079. Available at: https://doi.org/10.1377/hlthaff.2020.01247.h dam*

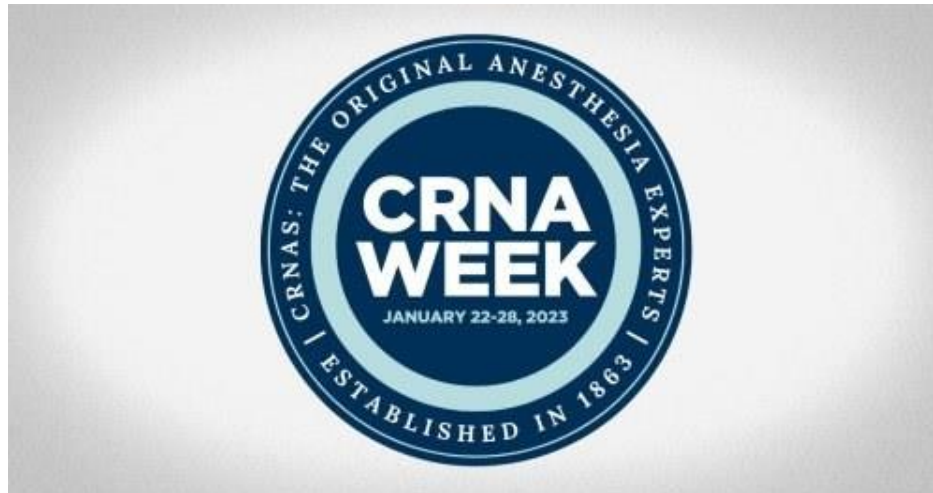
<6> <https://www.who.int/news-room/fact-sheets/detail/climate-change-and-health>

<7> <https://www.ipcc.ch/assessment-report/ar5/>

<8> [Climate Change 2022: Mitigation of Climate Change \(ipcc.ch\)](#)

<9> [https://www.thelancet.com/journals/lanplh/article/PIIS2542-5196\(21\)00053-X/fulltext](https://www.thelancet.com/journals/lanplh/article/PIIS2542-5196(21)00053-X/fulltext)

HAPPY CRNA WEEK!



Thank you to our CRNAs for all of your dedicated hard work and the care you provide to our patients each and every day.

With nearly 59,000 nurse anesthetists in the US, CRNAs have been providing anesthesia care to patients for more than 150 years. The Certified Registered Nurse Anesthetist (CRNA) credential came into existence in 1956 and, in 1986, CRNAs became the first nursing specialty accorded direct reimbursement rights from Medicare. CRNAs are anesthesia professionals who safely administer more than 50 million anesthetics to patients each year.

On behalf of ChristianaCare, **THANK YOU!** You are deeply valued and appreciated.

Mentorship Program GO LIVE - January 31st!



The ChristianaCare Mentorship program will go live on Tuesday, January 31st. If you have not already, please go to the site and sign up to be a mentor or a mentee. [Christiana Care Mentorship](#)

Back in September 2022, we introduced a new APC Mentoring program using *Teams* and *DELVE* that was created with the help of IT. After that introduction, ChristianaCare purchased a new platform called **MentorLead**. ILead then approached the Mentoring Committee and asked if we would be interested in trying the new platform. The committee met with **MentorLead** and liked the platform and the program's capabilities. Since we had already done a lot of the leg work for program development and implementation of the matching process, the transition was easy for **MentorLead** to make. Now with the transition completed, we would like to launch the new program within **MentorLead**.

Christiana Care APCs will be the first group to utilize the new platform!

Thank you from the APC Mentoring Committee,

Jonathan Miller, MBA, MHS, PA-C

Emily Link, MSN, AGACNP-BC, FNP-BC

Juliana Rahmer, MSN, AGACNP-BC, FNP-BC

Donna Mower-Wade, DNP, ACNS-BC

Stacy Lourie, DNP, FNP, APRN-C

Denise Lyons DNP, APRN, AGCNS-BC, CPHQ

**SHARE YOUR PASSION
for Advanced Practice
Clinician Development**
**Join the APC Mentor to Mentee
(M2M) e-Program**

Why make time for mentoring:

- Professionally develop your skills
- Connect with other APC professionals throughout ChristianaCare
- Improve your confidence as an APC
- Exchange wisdom with other passionate APCs
- Create meaningful relationships
- Increase APC retention and job satisfaction

Who should join?

- **Mentees:** APCs who are new to practice or transitioning to a new role, eager to expand their professional network, obtain tools to advance in their profession, gain a wealth of insight and experience
- **Mentors:** APCs who are eager to share their passion for their career, who want to give back to their profession, and who want to help shape the future of the APC role

Program Structure:

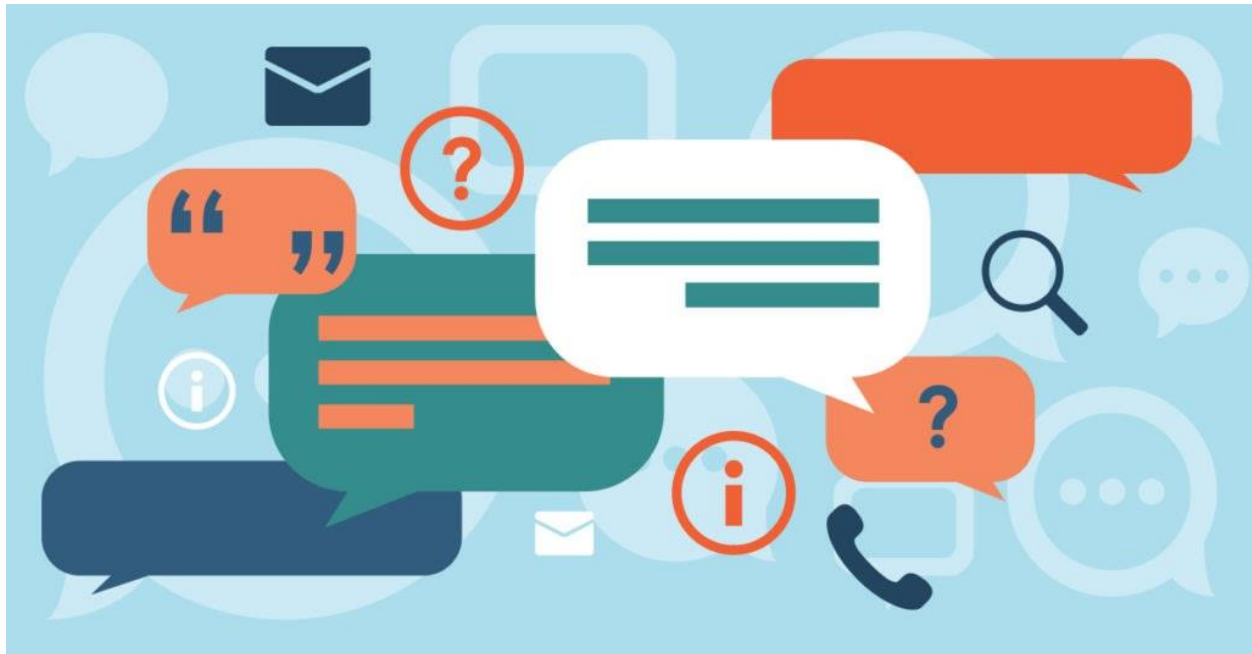
- Self-matching based on professional goals
- Self-paced meetings
- Resources, Quick Guides, Webinars, and Conversation Guides
- Mentor and Mentee trainings live and on-demand

Our mission is to provide our APCs with all the tools needed to perform at the highest level. Through mentorship, we strive to offer the support, clinical resources and assistance needed in the transition to the provider role, thereby increasing both job satisfaction and retention of all APCs.



To join go to www.ChristianaCareMentoring.org/apc
Questions? Email admin@ChristianaCareMentoring.org

Changes to Addiction Medicine Contact Information



The Addiction Medicine Service is committed to providing consultations in an efficient manner.

Beginning **Wednesday, 1/4/2023**, The Addiction Medicine Service will no longer receive consultations by telephone. The Addiction Line, 302-320-7099, will be retired.

Moving forward, Addiction Medicine consultations must be communicated through the Addiction Medicine Consult Vocera template. [Attached is a Job Aid to help you navigate this process.](#)

The Addiction Medicine team is available for consultation Monday through Friday from 8 AM to 6 PM and Saturday/Sunday from 9 AM to 5 PM. Outside of these hours, our team will continue to provide treatment advice and will follow-up using the number you provided on the new Vocera template. A full consultation will be completed the following day.

MAGNET: What is the Association to APCs?



Magnet: What is the association to APCs?

A Magnet® Overview

Magnet® designation is awarded by the American Nurses Credentialing Center (ANCC), an affiliate of the American Nurses Association, to hospitals and health systems that satisfy criteria on the strength and quality of care outcomes, patient satisfaction and nurse engagement. Approximately 9% of hospitals and health systems in the United States are Magnet® designated. Magnet® is an evidence-based blueprint for achieving excellence related to collaboration, improved outcomes, and leadership. Specific outcomes achieved in Magnet designated organizations include lower mortality rates, higher nurse satisfaction, and shorter length of stay.

ChristianaCare achieved its third designation in September 2020. This designation includes acute care (Christiana & Wilmington Hospitals), ambulatory services, and home health. Magnet-designation denotes a focus on the provision of high-quality patient care, consistent ambition to outperform, and maintenance in excellent outcomes for both patients and caregivers. This positively impacts our patients throughout the care continuum and improves interdisciplinary communication. Lastly, we support and promote nursing excellence by maintaining a culture of governance, promoting educational advancement, and affording professional development opportunities.

Redesignation cycles occur every four years. Our fourth Magnet document will be due in July 2024. As we progress toward the next redesignation, writing the document has become a priority focus and Advanced Practice Clinicians (APCs) play a crucial role in the improvement examples we submit.

APC Involvement

There are approximately Magnet® Model standards that specifically involve APCs by nature of their role or as a member of an interdisciplinary team. For instance, we include specific examples of how an APRN was involved in a mentoring relationship as well as succession-planning activities. The ANCC defines a clinical nurse as a nurse “who spends the majority (>50%) of their time providing direct patient care, including APRNs.” Therefore, APRN participation in various projects are also considered for the Magnet® document.

Other examples of APC involvement, which includes APRNs and PAs, focus on involvement as interdisciplinary team members. This could be participation in an ethical issue related to clinical practice, leading an educational activity that improves patient outcomes, or improving outcomes in a specific patient population by partaking in an interprofessional plan of care. The work of APCs is crucial and pertinent to a successful Magnet® designation. We look forward to partnering with you on this important work. If there are any projects you have been working on since August 1, 2020 to present, please submit them [here](#) to be considered for inclusion in our next designation.

To our newest APCs



Aisha Addison, Nurse Practitioner

Merve Akbay, Physician Assistant, Hospitalist

Jada Allen, Nurse Practitioner

Brittany Anderson, Clinical Nurse Specialist, Perioperative Services

Margaret Bielic, Physician Assistant, NICU Fellowship

Emily Blaszkow, Physician Assistant, Hospitalist

Fatimah Boone, Nurse Practitioner

Thomas Byrnes, Nurse Practitioner, Primary Care Fellowship

Katie Christinzio, Physician Assistant

Kalia Cole-Avery, Nurse Practitioner, OB/GYN Women's Health

Meghan Condon, Physician Assistant

Meghan Elliott, Nurse Practitioner, Primary Care

Debby Frazier, Nurse Practitioner, Cardiology

Christine Gasparo, Physician Assistant, Special Needs - Complex Care

Kaila Glenn, Physician Assistant, Women's Health

Cindy Gomes Garcia, Physician Assistant, NICU Fellowship

Kristen Green, Nurse Practitioner, Primary Care Fellow

Kelly Harrison, Physician Assistant, Behavioral Health

Jill Henry, Nurse Practitioner, Neonatal ICU

Nicole Holland, Nurse Practitioner, ED Observation

Erin Joyce, Physician Assistant, ILEAD, Critical Care Fellowship

Muriel Jurasevich, Nurse Practitioner, Hospitalist

Ramanpreet Kaur, Nurse Practitioner, Primary Care Fellow

Janette Kroenke, Nurse Practitioner, Primary Care, Perryville

Kathleen Luckner, Clinical Nurse Specialist, MICU

Christina Lynch, Certified Nurse Midwife

Angela Madariaga, Certified Nurse Midwife/ Obstetrics and Gynecology

Daniel McGregor, Physician Assistant, Surgical

Brittany Mertz Bergamo, Physician Assistant

Holly Miller, Physician Assistant

Sara O'Brien, Nurse Practitioner, ChristianaCare/GoHealth

Katherine Peisochenske, Physician Assistant, Neurology

Meagan Prime, Nurse Practitioner, Springside Primary Care

Lindsay Robinson, Certified Nurse Midwife

Arddhy Rodriguez, Nurse Practitioner, Hospitalist

Kamryn Sandidge, Physician Assistant, Neurology

Joshua Schmidt, Physician Assistant, Hospitalist

Aashka Shah, Physician Assistant, Behavioral Health

Lauren Sietsma, Nurse Practitioner, NICU

Trishanna Singh, Physician Assistant, Middletown West Primary Care

Emily Smith, Physician Assistant, Surgical Services

Ryan Spadin, Physician Assistant, Cardiac Surgery

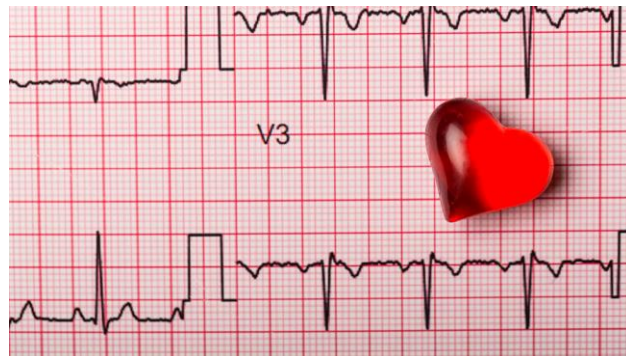
Tatiana Stauffer, Physician Assistant, Behavioral Health Fellowship

Jessica Tansey, Nurse Practitioner, Primary Care Fellow

Jonathan Welch, Physician Assistant, Behavioral Health Fellowship

Cassandra Wilson, Nurse Practitioner, ChristianaCare/GoHealth

Lindsay Windley, Physician Assistant



APC Grand Rounds

When: Wednesday, 3/8/23 at Noon

Where: Conference room 1100 or via Teams

Topic: Arrhythmia Identification

Speaker: Dr Lewis

1CME credit will be available

Sign - up via Learning Space coming soon



Pharmacology Conference to be held on April 21, 2023 It will be offered Hybrid!



Come ONE Come ALL!

Join your APRN Council meetings - on the second Wednesday of each month from 1-2 PM via TEAMS. Come and learn how the council works. Look for meeting invitations to be sent out each month.