

Jennifer Tavernier DNP, RN, CCM  
Lane Community College  
Sabbatical Report 2020

### **Sabbatical Project: Doctor of Nursing Practice Practicum**

As a Nurse Educator, I have made a commitment to myself, my profession, and my educational program to life-long learning and continuous professional development. The nursing profession requires members who possess the insight and skill needed to affect change in the healthcare system, advance nursing practice for improvement of healthcare delivery, and to prepare new nurses with the knowledge and skill necessary to carry on the important work required of the profession.

In August of 2018, I enrolled in the Doctor of Nursing Program (DNP) at Chamberlain University. Successful completion of a DNP program requires 1024 practicum hours as well as implementation of a DNP scholarly project. The purpose of my sabbatical project was to complete the first practicum course in its entirety, as well as the first one-half of the second practicum course, for a total of 384 practicum hours. The majority of practicum hours, while on sabbatical, were completed at Sacred Heart River Bend.

The development of the DNP scholarly project begins during the regular course work, where the DNP student identifies a practice problem in their healthcare organization, or site for project implementation. The student engages in rigorous research of all available evidence regarding the identified problem and identifies an evidenced based intervention with the potential of improving nursing practice as it relates to the identified problem. As I progressed through the DNP program, I became attuned to the high rates of opioid addiction and opioid prescribing practices in the community, which became the focus of my DNP scholarly project.

## **Practice Problem**

The opioid epidemic has contributed to substantial economic ramifications: nearly \$193 billion each year based on crime, violence, abuse, and associated health care costs (Leahy, 2017). The State of Oregon has not escaped the epidemic, but rather experiences one of the highest levels of opioid misuse in the country (National Institute on Drug Abuse [NIDA], 2019).

In 2015, the Oregon Health Authority designated Lane county as a “high burden” area because of its high rate of opioid overdose deaths and hospitalizations (Oregon Pain Guidance [OPG], 2017). In 2017, hospitalizations for non-heroin opioid overdose remained high in the county at 19.75 per 100,000 persons (Oregon Health Authority [OHA], n.d.).

Healthcare practitioners must realize their role in both contributing to and in addressing the opioid epidemic. According to Leahy (2017), on average, about 650,000 opioid drug prescriptions are dispensed each day. Oregon prescribers wrote more prescriptions (66.1 per 100,000 persons) for opioids than the national average (58.7) (NIDA, 2019).

Federal and non-federal agencies have established new guidelines to address the opioid epidemic. Among the new practice guidelines, was a recommendation to use multimodal analgesia (MMA) including non-opioids in the management of acute pain (Hsu et al, 2019). Using MMA in the hospitalized patient has been shown not only to improve pain and reduce opioid associated adverse events, but to also decrease hospital length of stay and opioid use beyond the hospital setting (Savarese & Tabler, 2017).

Though there is compelling evidence on the benefit of MMA in reducing opioid use in the acute care setting, and although newer guidelines have directed prescribers to adopt the opioid sparing strategy, bedside nurses have largely been left out of the picture. Many nurses continue to follow older pain management guidelines that called for opioids as first line

analgesics for acute pain. This gap in nursing practice led to the development of the DNP scholarly project: Implementation of the Michigan Opioid Safety Score (MOSS), with the goal of improving opioid stewardship among nurses at the implementation site.

The MOSS tool aims to assist nurses with conducting a safety assessment for opioid use as well as to increase their use of MMA as a basis for pain management. The tool advises nurses to ensure that patients never receive unimodal opioid analgesic therapy but to always receive non opioid analgesics on a continuous basis as long as opioids are being administered (Soto & Yaldou, 2015).

Though not all of my DNP practicum hours would be completed during my sabbatical, 384 hours focused on completing the DNP project proposal, including assessment and analysis of the implementation site, Institutional Review Board (IRB) exception or approval, and recruitment of stakeholders would lay the groundwork for implementation of the DNP scholarly project.

### **Practicum Activities**

Many of my practicum hours were spent with the Professional Practice Leaders at Sacred Heart Medical Center River Bend, where I studied current practice change projects in order to gain insight into the level of change burden on various nursing units as well as to the change culture. I attended various meetings with organizational leaders in order to better understand the strategic direction of the organization. I analyzed organizational strengths and weaknesses and developed a sense of the barriers and opportunities I would face while implementing my project. I met with the Chief Nursing Officer (CNO) and the Director of Medical Surgical Nursing (DNS) for approval and support of my proposed project.

Perhaps my biggest undertaking during my time on sabbatical was the IRB review of my DNP project. An application to both Chamberlain and Sacred Heart Medical Center IRBs was completed. The IRB process called for completion of a lengthy and detailed application of my proposed project and either an exception or approval would be necessary before the project could be implemented.

After careful analysis of the organization and while my IRB approval was pending, with permission of the Orthopedic Nurse Manager, I chose the Orthopedic unit as the site for MOSS tool implementation. I met with several stakeholders on the unit, including the Orthopedic Nurse Practitioner, Total Joint Coordinator, and Unit Educator. During these meetings, I was able to obtain support for my project, identify project champions, and gain further insight into potential barriers to successful implementation. I conducted an educational needs assessment for nurses on the Orthopedic unit, planned a number of educational sessions and began these sessions just prior to the end of my sabbatical.

### **Results**

IRB approvals marked the end of my sabbatical project and set me up for DNP project implementation in the final two project practicums of the DNP program. Clinical restrictions due to COVID 19, however, put a pause on any further student activities at the practicum site. My DNP project would evolve over the next two practicum courses, ending in a final integrative review in lieu of project implementation.

Through the various activities completed during my sabbatical, not only was I able to lay the groundwork of my DNP scholarly project, but was also able to collaborate with a number of healthcare professionals, enhance my leadership skills, engage in nursing research and evidence translation, and develop cost effective educational strategies for practice change.

## **Reflection**

One of the Strategic Directions of Lane Community College is our commitment to student learning and success. In order to meet the complex learning needs of our students, faculty must be able to facilitate change and innovation in the educational system. Students and faculty in the Nursing Program have an additional challenge in that the curriculum must be able to keep up with the vast changes occurring in the healthcare system as well as the unique healthcare needs of our community.

Through DNP course work and my practical learning experiences, I expanded my knowledge of the healthcare system, developed evidence translation skills, and enhanced my ability to lead an interprofessional team for practice improvement. Through my sabbatical project, DNP practicum courses, and now as a DNP graduate, I am better prepared to collaborate with the PhD professional in conducting research and generating new knowledge for nursing practice and education. By obtaining a terminal degree in nursing, I serve as role model for other faculty and for our students here at Lane Community College, so many of whom possess the potential to become strong leaders in the healthcare system.

# IMPLEMENTATION OF THE MOSS TOOL

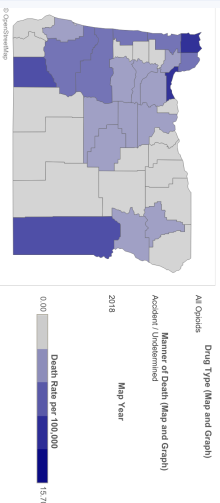
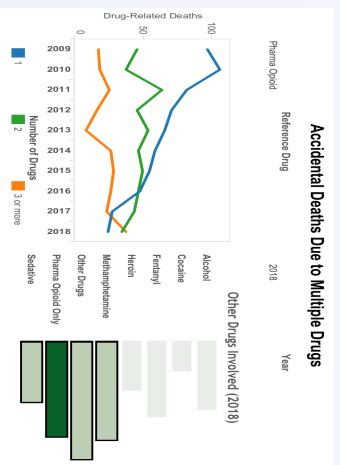
Jennifer Taverner MSN, RN, CCM

## PRACTICE PROBLEM

There are about 22 million people in the United States living with a drug abuse disorder (Olson, 2018). The opioid epidemic has contributed to substantial economic ramifications of about \$193 billion each year (Leahy, 2017).

The State of Oregon experiences one of the highest levels of opioid misuse in the country (National Institute on Drug Abuse [NIDA], 2019).

About 650,000 opioid drug prescriptions are dispensed each day (Leahy, 2017). Oregon prescribers wrote more prescriptions (66.1 per 100,000 persons) for opioids than the national average (58.7) (NIDA, 2019). Lane County is a “high burden” area with a high rate of opioid overdose deaths and hospitalizations (Oregon Pain Guidance [OPG], 2017). In 2017, hospitalizations for non-heroin opioid overdose were at 19.75 per 100,000 persons (Oregon Health Authority [OHA], n.d.).



The purpose of the Doctor of Nursing Practice quality improvement project is to implement the Michigan Opioid Safety Score (MOSS), an evidenced based tool that aims to improve patient safety with opioid use while also increasing the use of multimodal analgesia (MMA), thereby improving opioid stewardship and decreasing risk for misuse and addiction.

## CLINICAL QUESTION

For nurses working on an Orthopedic Unit at a regional medical center in the United States, does the implementation of the Michigan Opioid Safety Score increase the use of multimodal analgesia compared with current practice in 8-10 weeks?

## METHODOLOGY

- An integrative review was conducted to:
- provide evidence-based information regarding the opioid sparing benefit of MMA
  - demonstrate the value of the MOSS tool in improving nurse use of MMA
  - 16 quantitative and qualitative studies extracted through electronic databases
  - Inclusion criteria MMA:
    - Surgical patients 18 and older
    - Exploring benefit of MMA on reducing opioid use
  - Exclusion MMA:
    - Surgeries or pain related to cancer
    - Surgeries or pain related to childbirth
    - Patients undergoing treatment for opioid addiction
  - Inclusion criteria MOSS tool:
    - Studies related to use of the MOSS tool
    - Studies related to nurse perception of pain management
    - Studies related to clinical decision tools and adherence to evidence-based guidelines
  - Exclusion criteria for MOSS tool:
    - Studies focused on prescribing practice
    - Studies focused on sedation tools other than the MOSS
- An Integrative Review of 16 studies showed that MMA in the hospital setting:
- Improves pain scores
  - Decreases opioid use
  - Decreases hospital length of stay
- Use of the MOSS tool:
- May improve nurse use of MMA
  - May empower nurses in the use of nonopioid analgesics

## RESULTS

An Integrative Review of 16 studies showed that MMA in the hospital setting:

- Improves pain scores
- Decreases opioid use
- Decreases hospital length of stay

Use of the MOSS tool:

- May improve nurse use of MMA
- May empower nurses in the use of nonopioid analgesics

## IMPLICATIONS

- Improve patient safety with opioid use
- Promote opioid stewardship
- Improve pain management
- Empower nurses to utilize non opioid alternatives
- Prevent opioid dependency and addiction

## CONCLUSIONS

Multiple studies show that the use of MMA can reduce opioid dependency and the MOSS tool may aid and empower nurses to use MMA in the acute care setting, thereby decreasing patient risk for opioid misuse and addiction.

## REFERENCES

- Leahy, L. (2017). The opioid epidemic: what does it mean for nurses? *Journal of Psychosocial Nursing*, 55(1), 18-23. <https://doi.org/10.3928/02793689-20170119-03>
- National Institute on Drug Abuse (2019). *Oregon Opioid Summary*. <https://www.drugabuse.gov/opioid-summaries-by-state/oregon-opioid-summary>
- Olson, M. (2018). *National practice problem identification: Burden of disease*. Chamberlain University. [https://chamberlainuniversity.com/courses/34071/pages/week-1-the-practice-problem-national-issues-and-nonresearch-evidence/module\\_item\\_id=43984455](https://chamberlainuniversity.com/courses/34071/pages/week-1-the-practice-problem-national-issues-and-nonresearch-evidence/module_item_id=43984455)
- Oregon Health Authority. (n.d.). *Opioid overdose and misuse: Prescribing and overdose data for Oregon*. <https://www.oregon.gov/oha/HPREVENTION/OWELLNESS/SUBSTANANCE/OP/IDS/Pages/data.aspx>
- ANCEUSE/OP/IDS/. *Pages/data.aspx*
- Oregon Pain Guidance (2017). *Oregon's regional approach to opioid prevention work*. <https://www.oregonpainguidance.org/regions/>.

# Student Activities Log Report



## Chamberlain - Doctor of Nursing Practice

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**Report Date/Time: 9/10/2020 2:29:29 PM**
**Report Filters:**
**Calendar Year:** 2020

**Selected User(s):** Tavernier, Jen

**Selected Course(s):** NR702C: DNP Project & Practicum I(10086); NR705C: DNP Project & Practicum II(60238)

**Selected Session(s):** January 2020; March 2020

**Selected Status:** Accepted

Student Name	Course Name	CRN	Session	Instructor Name	Log Date	Submit Date	Essential	Activity	Time Spent	Notes
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	01/08/2020	01/08/2020	DNP Essential I. Scientific Underpinnings for Practice	Ess.1: Review/Evaluate EBP material (e.g.,web,print)	20:00	NR700. Week 6: Methods of Inquiry 3 part assessment. In this activity I explored the methods of inquiry in nursing: quality improvement, research, and evidenced based practice. I critically appraised three articles, one of each method of inquiry. This is where I first started researching the problem of substance abuse in my own community and healthcare organization. Through this activity, I explored practice gaps within my own organization that contribute to or fail to address the substance abuse problem in the community. I began my own research and idealizing how other quality improvement projects across the nation may work within my own community and healthcare setting. These essential first steps would eventually pave the way for my own quality improvement project to address opioid use and prescribing in my organization.
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	01/08/2020	01/08/2020	DNP Essential III. Clinical Scholarship and Analytical Methods	Ess.3: Complete core measure training	10:00	NR701. Week 3: CITI Human Subjects Training. Prior to implementing my evidenced based

										<p>project, it will be essential for me to seek IRB approval. My organization has its own IRB. The IRB exists to protect the rights and welfare of human subjects during the research process. The CITI Human Subjects Training provided a foundational education on the history of human subject protections, ethical issues that may arise during the research process, and common rules and regulatory information. Having an understanding of the history of human subjects research and actions that may violate the rights of others is essential when designing a project that may put human rights at risk. Through this activity, I have gained insight into the IRB process that I will undertake in my next practicum course and have already taken steps to safeguard the rights of the nurses and patients I will be working with.</p>
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	01/08/2020	01/08/2020	DNP Essential II. Organizational and Systems Leadership for Quality	Ess.2: Evaluate rapid cycle improvement project	10:00	NR701: Week 5: Articulate a Practice Problem paper. In this first paper, I explored the healthcare problem of opioid addiction. I analyzed statistics on addiction at the national, state, and local levels as well as the economic and quality of life ramifications of addiction within my own community. This first practice problem paper instilled a passion for and laid the groundwork for implementing a practice change project that seeks to ameliorate the opioid addiction problem in my own community.
Tavernier,	NR702C:	10086	January	Landry,	01/08/2020	01/08/2020	DNP Essential I.	Ess.1:	20:00	NR714. Week 6:



Jen	DNP Project & Practicum I		2020	Heidi			Scientific Underpinnings for Practice	Synthesize literature (review)		Evidence Synthesis and Tables paper. The DNP scholarly project includes a manuscript. This manuscript must be written in a clear, concise, and professional level as well as at a level that not only demonstrates critical thinking but the ability to critically analyze evidence and utilize the evidence to address a practice problem. This initial paper in evidence synthesis laid the groundwork for the critical appraisal and organization of evidence to be used in my DNP project.
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	01/08/2020	01/08/2020	DNP Essential II. Organizational and Systems Leadership for Quality	Ess.2: Conduct assessment of practice setting	10:00	NR703. Curriculum Vitae and Strengths to Strategies Plan. While developing the strengths to strategies plan, I identified essential areas for growth in my own practice. A strong leader is able to recognize their weaknesses and strengths and seeks activities that allow for the development of those strengths. Furthermore, when developing an interdisciplinary team in the project planning phase, it is important to delegate activities to each member that allows them to utilize and build upon their strengths. In identifying my own strengths and weaknesses, I have engaged in activities that have allowed me to grow. I also understand the strengths that I bring to the table. Both will allow for me to take on the leadership role and plan my team's activities for project implementation.
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	01/08/2020	01/08/2020	DNP Essential VI. Interpersonal Collaboration for Improving Patient	Ess.6: Participate in an interprofessional team in consultant role	10:00	NR705. Executive Proposal. This activity required the formulation of an executive proposal for

										creating and mobilizing an interprofessional team to lead the healthcare organizational change from volume-based to value-based healthcare. Formulation of an executive proposal encompasses leadership skills, interprofessional collaboration, healthcare innovation, and strategies to overcome anticipated barriers. The construction of an executive proposal supports the professional formation of the DNP practice scholar and is an expectation of the DNP project proposal.
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	01/08/2020	01/08/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Identify gaps in care in individuals, communities and populations	20:00	NR704. Week 6: Health Interventions and Outcomes Presentation. In this project, I further explored opioid addiction on a local and national level. I developed and presented clear and concise information on opioid addiction in my community. It was through this project that I began analyzing gaps in my organization in regard to opioid prescribing and started researching ways to address the issue. I explored Alternatives to Opioids (ALTO) which led me to the evidence that supports multimodal analgesia use, which has become the focus of my DNP project.
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	01/09/2020	01/09/2020	DNP Essential IV. Information Systems/Technology and Patient Care Technology	Ess.4: Design a mobile application for healthcare	15:00	NR706: Week 4: Information Systems Translation Science Project. This assignment called for exploration into the use of health information technology to improve opioid administration safety in my project implementation site. In this assignment, I worked on developing a

											PICOt question, and explored the role of the DNP scholar in evidence translation in the clinical area. Development of the paper required evidence synthesis and appraisal. The activities required of this project allowed for development of scholarly writing and preliminary development of the final DNP project.
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	01/09/2020	01/09/2020	DNP Essential IV. Information Systems/Technology and Patient Care Technology	Ess.4: Participate as team leader in Health Information Technology arena	05:00	NR706: Week 6: Practice Problem Analysis. In this project, I critically evaluated a practice problem to develop a deeper understanding of the practice issue of unsafe opioid prescribing using continuous quality improvement tools: a failure mode effect analysis and an Ishikawa diagram. This exercise assisted in the development of my understanding of how clinical problems are analyzed. I was able to use this exercise when analyzing the clinical problem of opioid use behaviors in the management of acute pain for my DNP scholarly project.	
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	01/09/2020	01/09/2020	DNP Essential V. Healthcare Policy for Advocacy in Healthcare	Ess.5: Analyze health policy proposal	05:00	NR706. Week 2. Political Strengths to Strategies. In this self-reflection assignment I identified my own strengths that support translation of skills as an RN to DNP Practice Scholar to gain collaborative support and enhance advocacy. I also identified weaknesses and activities to improve upon weaknesses and build my own political capital to enhance advocacy at the local, state, and national level.	
Tavernier, Jen	NR702C: DNP Project &	10086	January 2020	Landry, Heidi	01/09/2020	01/09/2020	DNP Essential V. Healthcare Policy for Advocacy in	Ess.5: Construct health policy proposal	15:00	NR708. Week 5. Political Competency Development Plan. In	

	Practicum I						Healthcare				this assignment I met the Essential V outcome by developing a plan for improving my ability to translate skills that I have acquired through education, professional nursing experience, and life experiences into political action to improve healthcare outcomes. Social determinants of health were explored in relation to health policy as well as the importance of the DNP scholar in shaping healthcare policy. ?
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	01/09/2020	01/09/2020	DNP Essential VI. Interpersonal Collaboration for Improving Patient	Ess.6: Participate in an interprofessional team in leader role	10:00	NR711. Week Organizational Assessment for Project Planning. In this assignment I was able to gain insight into the steps of the process of developing and implementing a DNP Practice Project in Practicum. In this assignment, I began my initial assessment and framework of for my DNP scholarly project.	
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	01/09/2020	01/09/2020	DNP Essential VI. Interpersonal Collaboration for Improving Patient	Ess.6: Participate in an interprofessional team in leader role	10:00	NR711. Week 6: Project Planning and Preparation. In this assignment I was able to further explore the project planning process and prepare for my DNP project. As an extension of the Week 3 Assignment, I elaborated on my PICOT, intervention, plan for implementation, budget for the project, resources needed, and anticipated outcomes. I was able to utilize much of this work to build the initial four parts of my final DNP project application.	
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	01/09/2020	01/09/2020	DNP Essential II. Organizational and Systems Leadership for Quality	Ess.2: Meet with stakeholders	04:00	NR711. I met with the Director of Nursing for the Medical Surgical Units as well as the Professional Practice Leader (PPL) for those units. I also met with the unit manager of the	

										orthopedic unit. I discussed my project and gained approval from the NP of the orthopedic unit. In my stakeholder meetings this week, I was able to obtain approval and support for my project. I collaborated with organizational leaders in how to implement my project and address barriers of cost and education time with staff. This work will impact the success of my project implementation in that I will have support from various levels of leadership.
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	01/09/2020	01/09/2020	DNP Essential VI. Interersonal Collaboration for Improving Patient	Ess.6: Consult with mentor/preceptor: in person, by phone or by email	06:00	NR711. Week 6: Project Planning and Preparation. I worked with my project navigator on refining my PICOT question and completing the first 4 sections of the DNP project form. We discussed the evidenced based tool, the Michigan Opioid Safety Score, that I would use for my project. I identified more than 10 studies that had used the MOSS tool. This work layed the foundation for my first practicum course.
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	01/09/2020	01/09/2020	DNP Essential III. Clinical Scholarship and Analytical Methods	Ess.3: Develop DNP project proposal	06:00	NR702. Week 1. I completed the Introduction, Background, and Problem sections of my project proposal. I used grammerly and tutor.com as well as recommendations from colleagues to further refine my work. In these proposal sections, I identified a practice problem (opioid addiction and overprescribing) and offered current and reliable data to support the need for practice change at the implementation site.
Tavernier, Jen	NR702C: DNP	10086	January 2020	Landry, Heidi	01/09/2020	01/09/2020	DNP Essential III. Clinical Scholarship	Ess.3: Consult with statistician:	06:00	NR702. Week 1. Activities included 2

	Project & Practicum I						and Analytical Methods	in person, by phone or by email		hours of consultation with a statistician for methodologies for my DNP scholarly project. I also spent 3 hours with the Professional Practice Leader of the Orthopedic Unit, discussing current practice issues and potential barriers I may face with project implementation. I also met with the Clinical Nurse Educator over the Orthopedic Unit and discussed my project and was able to gain her approval and support for the project.
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	01/16/2020	01/16/2020	DNP Essential I. Scientific Underpinnings for Practice	Ess.1: Construct/Refine literature search	06:00	NR702. Worksheet 3. I engaged in research and conceptualization of the middle range theory of acute pain management. For worksheet 3, I described how the implementation of the MOSS tool could be described on three premises of the theory of acute pain management. I also researched Lippitt's change model and have begun the process of describing the practice change encountered in the implementation of my project through each of Lippitt's seven steps.
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	01/16/2020	01/16/2020	DNP Essential II. Organizational and Systems Leadership for Quality	Ess.2: Attend quality improvement meeting	04:00	NR702. 2 hrs. DNP Essential II Organizational and Systems Leadership for Quality. I attended the medical/surgical "Link" meeting, which is a bi-monthly meeting for all managers of the medical and surgical units, the Professional Practice Leaders and Clinical Educators over those units, and the Director of Nursing. In this meeting, changes occurring at the organizational level were discussed, as well as current metrics in nursing excellence. Discussions regarding actions being taken for

										<p>improvement in such metrics were discussed. This meeting will be important for me to attend throughout my practicum courses as it will keep me apprised of competing rollouts and other barriers I will need to plan for.</p> <p>NR702. 1hr. DNP Essential VI. Meeting with mentor and professor. My project was discussed between myself, my mentor, and my professor. We discussed inclusion/exclusion criteria. We discussed the role of the mentor. Following the phone call, my mentor and I discussed the organizational IRB review. She shared some resources with me on how to identify the type of review I will need.</p> <p>NR702. 1 hr. DNP Essential II. Meet with Stakeholders. I met with the nurse manager of the orthopedic unit and discussed real estate for poster board I will create for project information as well as allotted time at the staff meeting for education.</p>
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	01/16/2020	01/16/2020	DNP Essential III. Clinical Scholarship and Analytical Methods	Ess.3: Develop DNP project proposal	04:00	<p>NR702: Worksheet 2: I further developed the PICOT, Project Purpose, and Evidenced-Based Intervention sections of my DNP project proposal. The PICOT outlines the clinical question to be answered. The project purpose describes why the project must be implemented as well as what I hope to achieve. Describing the MOSS tool, my evidenced-based intervention, allowed me to really break down the tool, analyze it, and conceptualize how it fits in with the nurses' workflow.</p>

Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	01/26/2020	01/26/2020	DNP Essential III. Clinical Scholarship and Analytical Methods	Ess.3: Develop DNP project proposal	06:00	NR702: I developed the outcomes portion of my project proposal and adapted Drs. Yaldou, Cooper, and Soto tool (with their permission) to meet the needs of my project. I also developed a plan to address anticipated and unanticipated barriers to project implementation. I consulted with the PPL over the Orthopedic Unit regarding barriers he experiences with staff on this unit. I also attended a meeting regarding organizational strategic plans, accomplishments, and potentials for improvement. The activities this week helped me to see my project more clearly, in terms of how I will prepare staff, materials required, barriers I may face, and how I will collect and maintain data.
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	01/26/2020	01/26/2020	DNP Essential III. Clinical Scholarship and Analytical Methods	Ess.3: Consult with statistician: in person, by phone or by email	04:00	NR702: I spent time independently researching which type of statistical methods I will use for my project. I consulted with my statistician by phone and by email. We discussed my data collection methods and statistical tests that we will use. From our communications and my own research, I developed the outcomes portion of the DNP Project Proposal and started addressing the data management section.
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	02/04/2020	02/04/2020	DNP Essential III. Clinical Scholarship and Analytical Methods	Ess.3: Construct IRB proposal	06:00	NR702. My preceptor recommended that I get ahead of the IRB process as it can be very laborious and getting behind could set back the time frame of my project. I registered for IRBnet through PeaceHealth and obtained all of the potentially required



										documents. I worked through the process of determining whether or not I would require full or expedited approval or even an exemption. Although the decision trees were informative, I was still confused regarding where my project fell as far as human subjects research. Through IRBnet, I learned that my organization offers an application for determination of the type of IRB review needed. I completed the application (7 pages), drew up an informed consent document, utilizing the PeaceHealth template, and wrote my abstract, per their request. Though working through this process was extremely time consuming, I feel that I am one step ahead with the IRB process. I should know in 1-2 weeks the type of IRB review I will need.
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	02/09/2020	02/09/2020	DNP Essential III. Clinical Scholarship and Analytical Methods	Ess.3: Create presentation safety/quality	10:00	NR702: Developed an educational plan and materials for my project. Because my educational time is limited, I developed 4 case studies for the Orthopedic nurses. To evaluate their understanding of how to use the MOSS tool, nurses will use the MOSS tool to calculate a safety score and identify appropriate interventions for each of the fictitious patients. I will have to ask nurses to complete the case studies on their own time so I will offer a chance to win a prize (hydroflask water bottle) by completing all of the case studies. Upon completing the case studies, nurses will submit them to the charge nurse on their shift, collect a treat (granola bar) and put

										their names on a small piece of paper for a drawing. I also developed a very short powerpoint presentation for the mandatory staff meetings in March.
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	02/09/2020	02/09/2020	DNP Essential III. Clinical Scholarship and Analytical Methods	Ess.3: Develop DNP project proposal	06:00	NR702: Appendices. I developed appendices for the following: data collection instruments, letter of support from CNO, permission to use data collection instruments, Gantt chart, consent form, and schedule of educational offerings. The development of these appendices is an instrumental part of my DNP project proposal.
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	02/16/2020	02/16/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Identify gaps in care in individuals, communities and populations	06:00	NR702. Care Management. In my role as an RN Care Manager, this week I worked directly with patients with addiction. I completed thorough assessments including self health management and need/desire for community resources. I linked patients who desired rehabilitation with appropriate resources. I collaborated with bedside nurses and prescribers in the management of pain for patients with a history and/or current opioid addiction. These activities relate to my DNP project as this is where the need for a nurse tool that empowers nurses to use non opioid pain management strategies to prevent addiction and/or provide safe pain management for patients with histories of opioid addiction.
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	02/16/2020	02/16/2020	DNP Essential III. Clinical Scholarship and Analytical Methods	Ess.3: Develop DNP project proposal	06:00	NR702: DNP Project Proposal. This week I finalized my project proposal, focusing on appendices and a plan for education and dissemination. My

										<p>greatest challenge and fear I've encountered is a lack of education time with the staff nurses. As a former hospital clinical educator, I am well acquainted with the number of quality improvement rollouts and lack of budget to support nurse education. I have worked on a very short initial presentation and case studies for nurses to complete on their own time. As an incentive, for each nurse who completes the 4 case studies, they will get an entry into a drawing for a nurse hydroflask water bottle. For nurses who do not complete the case studies, my plan will include face to face education.</p>
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	02/21/2020	02/21/2020	DNP Essential VI. Interpersonal Collaboration for Improving Patient	Ess.6: Participate in an interprofessional team in member role	04:00	<p>NR702. Essential VII. Implement and evaluate health promotion and disease prevention. 2 hours. I worked with (assessment) patients with history of opioid addiction in continuing suboxone treatment in the community. Without engaged community providers with MAT training, patients who are started on suboxone in the acute care setting are at risk for relapsing. Essential VI. Interpersonal collaboration for improving patient outcomes. 2 hours. In working with patients with addiction and seeking treatment, I collaborated with interdisciplinary team as well as with community providers in the continued treatment of patients experiencing opioid addiction. These activities are directly related to my DNP project as it is from this work that I assessed the need for</p>

										the intervention.
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	02/23/2020	02/23/2020	DNP Essential III. Clinical Scholarship and Analytical Methods	Ess.3: Submit and/or revise IRB proposal	04:00	NR702: IRB. I worked with the IRB coordinator on revising my informed consent document. I was asked to use the PeaceHealth template which uses words such as "research" "principal investigator," and "study" throughout. Though I had gone through and changed such verbiage to "project" and "project manager." I had missed a few. The IRB coordinator was very helpful in the drafting of an appropriate document. The informed consent document is essential for all participants in my project and outlines their rights to privacy and their right to discontinue their participation at any time, as well as an overview of their role in the project.
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	02/23/2020	02/23/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Identify gaps in care in individuals, communities and populations	06:00	NR702. Care Management. I worked with patients experiencing addiction in identifying barriers to health and wellness, as well as identifying ways to overcome those barriers. We worked on plans of care involving the appropriate utilization of community resources for their addiction. This work is important to my DNP project in that it is from this work that it keeps me informed of the continued need for my project as well as barriers nurses may experience when utilizing the MOSS tool.
Tavernier, Jen	NR702C: DNP Project & Practicum I	10086	January 2020	Landry, Heidi	02/23/2020	02/23/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Implement and evaluate health promotio/disease prevention interventions	06:00	NR702. Care Management. I worked with patients experiencing addiction in identifying barriers to health and wellness, as well as identifying ways to overcome those barriers. We worked on

										plans of care involving the appropriate utilization of community resources for their addiction. This work is important to my DNP project in that it is from this work that it keeps me informed of the continued need for my project as well as barriers nurses may experience when utilizing the MOSS tool.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/25/2020	03/25/2020	DNP Essential II. Organizational and Systems Leadership for Quality	Ess.2: Meet with stakeholders	04:00	NR705. Meetings with Stakeholders. I attended Orthopedic staff meetings this week. We discussed opioid addiction and the concerns nurses have with providing pain management for patients demanding opioids. We discussed drug-seeking behavior. We also discussed the challenge of using nonopioid alternatives in a community of patients who have received opioids as a mainstay of their pain management for the past couple of decades. Orthopedic nurses were very engaged, and I learned a lot about the challenges they face. This information will help me when implementing my DNP Project
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/25/2020	03/25/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Implement and evaluate health promotio/disease prevention interventions	04:00	NR705. Care Management. In my role as an RN Care Manager, this week I worked directly with patients with addiction. I completed thorough assessments including self-health management and need/desire for community resources. I linked patients who desired rehabilitation with appropriate resources. I collaborated with bedside nurses and prescribers in the management of pain for patients with a history and/or current opioid

											addiction. These activities relate to my DNP project as this is where the need for a nurse tool that empowers nurses to use nonopioid pain management strategies to prevent addiction and/or provide safe pain management for patients with histories of opioid addiction.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/25/2020	03/25/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Implement and evaluate health promotio/disease prevention interventions	04:00	NR705. Care Management. I worked with patients experiencing addiction in identifying barriers to health and wellness, as well as identifying ways to overcome those barriers. We worked on plans of care involving the appropriate utilization of community resources for their addiction. This work is important to my DNP project in that it is from this work that it keeps me informed of the continued need for my project as well as barriers nurses may experience when utilizing the MOSS tool.	
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/25/2020	03/25/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Implement and evaluate health promotio/disease prevention interventions	04:00	NR705. Care Management. I worked as member of a multidisciplinary team in planning ongoing community care for a patient with a very grim prognosis and ongoing diagnosis of opioid addiction. The patient had many barriers to access as he was in a remote area, had limited resources, and limited access to methadone treatment. The Medical Director and I agreed that we would not send the patient out with Methadone as it was too dangerous. The patient refused suboxone treatment, which resulted in further barriers to home health providers not willing to enlist due to the level of patient needs. This	

										work is directly related to my project as it continues to inform our practice about the barriers to access and treatment and what we can do in the inpatient setting.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/25/2020	03/25/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Implement and evaluate health promotio/disease prevention interventions	04:00	NR705. Care Management. I continued my work as a member of the multidisciplinary care team in developing a safe discharge plan for a patient with a heavily damaged heart and ongoing addiction. My work involved identifying providers in his area for addiction treatment, education to patient and family regarding what to do in the event of overdose, as well as the dangers of leaving with intravenous access for the several needed weeks of intravenous antibiotic infusions. This work is directly related to my project as it continues to inform our practice about the barriers to access and treatment and what we can do in the inpatient setting.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/25/2020	03/25/2020	DNP Essential III. Clinical Scholarship and Analytical Methods	Ess.3: Develop DNP project proposal	04:00	NR705 DNP Practicum Form. The DNP practicum form is to serve as my application to the Chamberlain IRB. The form must carefully detail how I plan to implement my project as well as how I will protect human subjects throughout the implementation period and beyond. I worked on the final two pages and spent time making revisions recommended by faculty, including my educational plan and ensuring that all parts of the form were congruent.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/25/2020	03/25/2020	DNP Essential III. Clinical Scholarship and Analytical Methods	Ess.3: Construct IRB proposal	04:00	NR705. IRB preparation. After making revisions to my DNP practicum form, I collected all other documents needed for

										Chamberlain IRB review: consent form, organizational letter of support, and letter from my organization's IRB. I had prepared my consent form utilizing the PeaceHealth template, so it was necessary to transfer my information over to Chamberlain's template. All of my documents will be reviewed by the faculty and must be approved prior to implementing my project.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/25/2020	03/25/2020	DNP Essential I. Scientific Underpinnings for Practice	Ess.1: Synthesize literature (review)	04:00	NR(705) DNP project proposal. Literature Synthesis, Evidence table. I have a goal for myself to read at least two studies, record the data on my evidence table, and make notes for my literature synthesis, daily. My current struggle is that the opioid epidemic and interventions in ameliorating the epidemic are fairly new. I find the evidence table to be of value when sitting down to synthesize my information. This is a critical element of the DNP project as it is the supporting evidence for my project intervention.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/25/2020	03/25/2020	DNP Essential I. Scientific Underpinnings for Practice	Ess.1: Synthesize literature (review)	04:00	NR(705) Literature Synthesis, Evidence table. I have a goal for myself to read at least two studies, record the data on my evidence table, and make notes for my literature synthesis, daily. My current struggle is that the opioid epidemic and interventions in ameliorating the epidemic are fairly new. I find the evidence table to be of value when sitting down to synthesize my information. This is a critical element of the DNP project as it is the supporting evidence for my project intervention.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/25/2020	03/25/2020	DNP Essential I. Scientific Underpinnings for Practice	Ess.1: Appraise literature (review)	04:00	NR705. Literature



Jen	DNP Project & Practicum II		2020	Joyce			Scientific Underpinnings for Practice	literature for inclusion		Search. Synthesis of literature. I worked on refining my literature search process. I worked with a Chamberlain librarian and made several requests for literature that was not readily available through the Chamberlain library. I wanted to make sure that I was reviewing anything and everything available that either supports or contradicts my intervention. I believe I have an abundance of support and have not located anything that contradicts MMA use in the acute care setting. The biggest challenge is the type of evidence. I have multiple systematic reviews but very limited individual RCTs, which makes perfect sense as randomizing who receives certain types of pain intervention possess a huge ethical dilemma. This is a critical element of the DNP project as it is the supporting evidence for my project intervention.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/25/2020	03/25/2020	DNP Essential I. Scientific Underpinnings for Practice	Ess.1: Appraise literature for inclusion	04:00	NR705. Literature Search. Synthesis of literature. I worked on refining my literature search process. I worked with a Chamberlain librarian and made several requests for literature that was not readily available through the Chamberlain library. I wanted to make sure that I was reviewing anything and everything available that either supports or contradicts my intervention. I believe I have an abundance of support and have not located anything that contradicts MMA use in the acute care setting. The biggest challenge is the type of evidence. I have multiple systematic reviews but

										very limited individual RCTs, which makes perfect sense as randomizing who receives certain types of pain intervention possess a huge ethical dilemma. This is a critical element of the DNP project as it is the supporting evidence for my project intervention.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/25/2020	03/25/2020	DNP Essential I. Scientific Underpinnings for Practice	Ess.1: Appraise literature for inclusion	04:00	NR705. Literature Search. Synthesis of literature. I continued my search for literature, making sure that I have read anything and everything either supporting or contradicting my intervention. I believe I have an abundance of support and have not located anything that contradicts MMA use in the acute care setting. The biggest challenge is the type of evidence. I have multiple systematic reviews and have located a few RCTs. This is a critical element of the DNP project as it is the supporting evidence for my project intervention.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/25/2020	03/25/2020	DNP Essential I. Scientific Underpinnings for Practice	Ess.1: Construct/Refine literature search	04:00	NR705. Literature Search. Synthesis of literature. I worked on refining my literature search process. I worked with a Chamberlain librarian and made several requests for literature that was not readily available through the Chamberlain library. I wanted to make sure that I was reviewing anything and everything available that either supports or contradicts my intervention. I have an abundance of expert opinions, practice guidelines, and cohort studies. My goal is to have several randomized controlled trials and systematic reviews. This is a critical element of the DNP project as it is the

										supporting evidence for my project intervention.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/25/2020	03/25/2020	DNP Essential I. Scientific Underpinnings for Practice	Ess.1: Appraise literature for inclusion	04:00	NR705. Appraisal of literature. I reviewed my articles and studies and made notes on my John Hopkins Evidence Table. I began idealizing how my synthesis would be organized. As I made notes, I went back to the library multiple times, ensuring that I have covered my bases. I believe I have an abundance of support for the use of multimodal analgesia but want to leave no stone unturned. This is a critical element of the DNP project as it is the supporting evidence for my project intervention.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/25/2020	03/25/2020	DNP Essential I. Scientific Underpinnings for Practice	Ess.1: Construct/Refine literature search	04:00	NR705. Literature Search. I worked on refining my literature search process. I changed my search term from "multimodal analgesia" to "opioid adjuncts," and was able to uncover quite a lot more experimental studies on pain. I have located only a couple of articles that are not supportive of MMA, and not they totally contradict but rather do not support that MMA reduces hospital length of stay or is opioid-sparing. This is a critical element of the DNP project as it is the supporting evidence for my project intervention.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/25/2020	03/25/2020	DNP Essential I. Scientific Underpinnings for Practice	Ess.1: Appraise literature for inclusion	04:00	NR705. Appraisal of literature. Synthesis of literature. I worked on appraising the studies I found that support or contradict my intervention. I used my John Hopkins table and then used a tool provided by Dr. Johnston to organize my draft. I have organized my synthesis into four different subsections which have also helped to stay organized. My

										synthesis of literature is a critical component of my manuscript as it is where I will discuss the strength of evidence that supports the need for my intervention.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/25/2020	03/25/2020	DNP Essential I. Scientific Underpinnings for Practice	Ess.1: Synthesize literature (review)	04:00	NR705. Synthesis of literature. I worked on synthesizing my literature. In using my John Hopkins table and Dr. Johnston's tool, I organized my synthesis into four different subsections. Today I worked on organizing the literature for improved pain management and reduction of opioid use. I have multiple studies that demonstrate the benefit of multimodal analgesia combinations in reducing pain scores and the numbers of opioids used in the acute care setting. This is a critical element of the DNP project as it is the supporting evidence for my project intervention.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/25/2020	03/25/2020	DNP Essential VI. Interpersonal Collaboration for Improving Patient	Ess.6: Participate in an interprofessional team in member role	04:00	NR705. Interprofessional team meetings. I attended leadership meetings this week to discuss how we will maintain our community supports for our unhoused patients as well as those patients who are suffering from addiction in this current climate with COVID 19. We also discussed how would discharge patients with pending tests as well as where we could house them while tests are pending. This relates to my DNP project as it is a current barrier to implementation that could carry on into the time I plan to implement my project.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/28/2020	03/28/2020	DNP Essential I. Scientific Underpinnings for Practice	Ess.1: Synthesize literature (review)	04:00	NR705. Synthesis of literature. I worked on synthesizing my literature. In using my John Hopkins table and

										Dr. Johnston's tool, I organized my synthesis into four different subsections. Today, I spent more time organizing the literature for improved pain management and reduction of opioid use. In doing so, I realized that I really have an abundance of support for the benefit of MMA use in surgical pain but have very little in the way of benefit in the non-surgical patient. This finding led me back to the Chamberlain library as I believe it would be beneficial to address the non-surgical patient as many of the patients my nurses will be using the MOSS tool with will be non- surgical.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/28/2020	03/28/2020	DNP Essential III. Clinical Scholarship and Analytical Methods	Ess.3: Develop DNP project proposal	04:00	NR705 DNP Practicum Form. The DNP practicum form is to serve as my application to the Chamberlain IRB. The form must carefully detail how I plan to implement my project as well as how I will protect human subjects throughout the implementation period and beyond. I worked on recommended revisions to my form: moving the education to the first week rather than the week before and on the educational offerings grid. Providing education in the first week makes sense to me as the education may be enough to move some nurses to practice change.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/28/2020	03/28/2020	DNP Essential III. Clinical Scholarship and Analytical Methods	Ess.3: Develop DNP project proposal	04:00	NR705 DNP Practicum Form. The DNP practicum form is to serve as my application to the Chamberlain IRB. My form was returned to me again as the course lead noted that I had stated I would make changes to the nurse opinion survey, which would take from it's validity

										and reliability. I revised my survey to reflect only the questions that Dr. Soto and Dr. Yaldou used and went back through the form to make sure that I addressed this in every area
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/28/2020	03/28/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Identify gaps in care in individuals, communities and populations	04:00	NR705. Care Management. I continued my work as a member of the multidisciplinary care team in developing a safe discharge plans for a patient with ongoing opioid addiction. My work involved identifying providers in his area for addiction treatment, education to patient and family regarding what to do in the event of overdose. This work is directly related to my project as it continues to inform our practice about the barriers to access and treatment and what we can do in the inpatient setting.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/28/2020	03/28/2020	DNP Essential I. Scientific Underpinnings for Practice	Ess.1: Synthesize literature (review)	04:00	NR705. Synthesis of literature. I continue to work on synthesizing my literature. In using my John Hopkins table and Dr. Johnston's tool, I organized my synthesis into four different subsections. Today I worked on organizing the literature around the benefits of MMA in reducing resource utilization for the hospitalized patient. I have studies demonstrate the reduction of complications of unimodal opioid use that thereby decrease hospital length of stay
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/28/2020	03/28/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Identify gaps in care in individuals, communities and populations	04:00	NR705. Care Management. I worked as a member of the multidisciplinary care team in addressing issues with methadone treatment in our community with current social distancing requirements posed by

										the COVID 19 pandemic. We have many community members who attend methadone clinics. While the clinics can remain open as they meet the criteria of an essential business, their hours must change, which may pose a barrier to many community members dependent on the clinic as a part of their recovery. This work is directly related to my project as it continues to inform our practice about the barriers to access and treatment and what we can do in the inpatient setting.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/28/2020	03/28/2020	DNP Essential I. Scientific Underpinnings for Practice	Ess.1: Synthesize literature (review)	04:00	NR705. Synthesis of literature. I continue to work on synthesizing my literature. Today I worked on organizing the literature around the benefits of MMA in reducing resource utilization for the hospitalized patient. I have numerous studies that demonstrate a significant reduction of complications associated with unimodal opioid use, which help to keep the patient within their goal of length of stay. In writing this section, I recalled the ERAS pathway and will now search for a current article on ERAS. I believe that the ERAS pathway was one of the first that promoted the use of MMA.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/28/2020	03/28/2020	DNP Essential IV. Information Systems/Technology and Patient Care Technology	Ess.4: Perform data extraction activities from large data sets	04:00	NR705. Work with IT analyst. I worked with an IT analyst this week on developing a report for data collection pre and post project implementation. I learned to set parameters for my inclusion and exclusion criteria. This work will simplify data collection and help to ensure consistency.

Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/28/2020	03/28/2020	DNP Essential VI. Interersonal Collaboration for Improving Patient	Ess.6: Participate in an interprofessional team in member role	04:00	NR705. Care management. Interdisciplinary member. My work this week centered around preparations in both the inpatient and outpatient settings for COVID 19. We worked on establishing protocols, algorithms, and guidelines for the movement of patients between facilities and back to the community. We worked on partnering with various organizations in the community to ensure that our homeless populations, as well as those experiencing addiction, have a safe place to go during the quarantine. This work impacts my project as it keeps me apprised as to the barriers for our patients experiencing opioid addiction, as well as to potential barriers to project implementation with stakeholders: culture, attitude, and fatigue.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/28/2020	03/28/2020	DNP Essential VI. Interersonal Collaboration for Improving Patient	Ess.6: Participate in an interprofessional team in leader role	04:00	NR705. Care management. Interdisciplinary member. My work this week centered around preparations in both the inpatient and outpatient settings for COVID 19. We worked on establishing protocols, algorithms, and guidelines for the movement of patients between facilities and back to the community. We worked on partnering with various organizations in the community to ensure that our homeless populations, as well as those experiencing addiction, have a safe place to go during the quarantine. This work impacts my project as it keeps me apprised as to the barriers for our patients experiencing opioid addiction, as well as to potential barriers to project



										implementation with stakeholders: culture, attitude, and fatigue.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/28/2020	03/28/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Implement and evaluate health promotio/disease prevention interventions	04:00	NR705. Care management. Interdisciplinary member. My work this week centered around preparations in both the inpatient and outpatient settings for COVID 19. We worked on establishing protocols, algorithms, and guidelines for the movement of patients between facilities and back to the community. We worked on partnering with various organizations in the community to ensure that our homeless populations, as well as those experiencing addiction, have a safe place to go during the quarantine. This work impacts my project as it keeps me apprised as to the barriers for our patients experiencing opioid addiction, as well as to potential barriers to project implementation with stakeholders: culture, attitude, and fatigue.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/28/2020	03/28/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Identify gaps in care in individuals, communities and populations	04:00	NR705. Care management. Interdisciplinary member. My work this week centered around preparations in both the inpatient and outpatient settings for COVID 19. We worked on establishing protocols, algorithms, and guidelines for the movement of patients between facilities and back to the community. We worked on partnering with various organizations in the community to ensure that our homeless populations, as well as those experiencing addiction, have a safe place to go during the quarantine. This work impacts my project as it keeps me apprised as to the barriers for our

										patients experiencing opioid addiction, as well as to potential barriers to project implementation with stakeholders: culture, attitude, and fatigue.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/28/2020	03/28/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Identify gaps in care in individuals, communities and populations	04:00	NR705. Care management. Interdisciplinary member. My work this week centered around preparations in both the inpatient and outpatient settings for COVID 19. We worked on establishing protocols, algorithms, and guidelines for the movement of patients between facilities and back to the community. We worked on partnering with various organizations in the community to ensure that our homeless populations, as well as those experiencing addiction, have a safe place to go during the quarantine. This work impacts my project as it keeps me apprised as to the barriers for our patients experiencing opioid addiction, as well as to potential barriers to project implementation with stakeholders: culture, attitude, and fatigue.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/28/2020	03/28/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Identify gaps in care in individuals, communities and populations	04:00	NR705. Care management. Interdisciplinary member. My work this week centered around preparations in both the inpatient and outpatient settings for COVID 19. We worked on establishing protocols, algorithms, and guidelines for the movement of patients between facilities and back to the community. We worked on partnering with various organizations in the community to ensure that our homeless populations, as well as those experiencing addiction, have a safe place to go during the

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Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/28/2020	03/28/2020	DNP Essential I. Scientific Underpinnings for Practice	Ess.1: Synthesize literature (review)	04:00	NR705. Evidence synthesis. This week I worked on my evidence synthesis draft. This work involved many revisions. With each revision, I noted gaps and returned to the electronic library for further evidence. I continue to build my evidence summary tool. This work adds support for my DNP project intervention.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/28/2020	03/28/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Identify gaps in care in individuals, communities and populations	04:00	NR705. Care management. Interdisciplinary member. My work this week centered around preparations in both the inpatient and outpatient settings for COVID 19. We worked on establishing protocols, algorithms, and guidelines for the movement of patients between facilities and back to the community. We worked on partnering with various organizations in the community to ensure that our homeless populations, as well as those experiencing addiction, have a safe place to go during the quarantine. This work impacts my project as it keeps me apprised as to the barriers for our patients experiencing opioid addiction, as well as to potential barriers to project implementation with stakeholders: culture, attitude, and fatigue.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/28/2020	03/28/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Identify gaps in care in individuals, communities and populations	04:00	NR705. Care management. Interdisciplinary member. My work this week centered around

											preparations in both the inpatient and outpatient settings for COVID 19. We worked on establishing protocols, algorithms, and guidelines for the movement of patients between facilities and back to the community. We worked on partnering with various organizations in the community to ensure that our homeless populations, as well as those experiencing addiction, have a safe place to go during the quarantine. This work impacts my project as it keeps me apprised as to the barriers for our patients experiencing opioid addiction, as well as to potential barriers to project implementation with stakeholders: culture, attitude, and fatigue.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/28/2020	03/28/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Implement and evaluate health promotio/disease prevention interventions	04:00	NR705. Care management. Interdisciplinary member. My work this week centered around preparations in both the inpatient and outpatient settings for COVID 19. We worked on establishing protocols, algorithms, and guidelines for the movement of patients between facilities and back to the community. We worked on partnering with various organizations in the community to ensure that our homeless populations, as well as those experiencing addiction, have a safe place to go during the quarantine. This work impacts my project as it keeps me apprised as to the barriers for our patients experiencing opioid addiction, as well as to potential barriers to project implementation with stakeholders: culture, attitude, and fatigue.	
Tavernier,	NR705C:	60238	March	Johnston,	03/28/2020	03/28/2020	DNP Essential VII.	Ess.7: Identify	04:00	NR705. Care	

Jen	DNP Project & Practicum II		2020	Joyce			Clinical Prevention and Population Health for Improving	gaps in care in individuals, communities and populations		management. Interdisciplinary member. My work this week centered around preparations in both the inpatient and outpatient settings for COVID 19. We worked on establishing protocols, algorithms, and guidelines for the movement of patients between facilities and back to the community. We worked on partnering with various organizations in the community to ensure that our homeless populations, as well as those experiencing addiction, have a safe place to go during the quarantine. This work impacts my project as it keeps me apprised as to the barriers for our patients experiencing opioid addiction, as well as to potential barriers to project implementation with stakeholders: culture, attitude, and fatigue.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	03/31/2020	03/31/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Identify gaps in care in individuals, communities and populations	04:00	NR705. Collaboration and prevention. I worked with a team of nurses in identifying risk for COVID 19 and instituting measures for prevention of spread amongst homeless individuals in our community. This population resides in a tent community where many persons sleep within one tent. Additionally, drug use and the sharing of instruments is common. While cots spaced six feet apart have been set up in a building at our local fairgrounds, one of the requirements is the abstinence of drug abuse. This work informs my DNP project as this is the population of patients that originally informed the development of my project and the population our nurses experience the most challenges with

										preventing and treating pain and opioid addiction.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/01/2020	04/01/2020	DNP Essential I. Scientific Underpinnings for Practice	Ess. 1: Review/Evaluate EBP material (e.g., web, print)	04:00	NR705. Evaluate EBP material. I was consulted by a UBC member to assist with research for the development of a "practice pause," and I agreed to assist with their research. Today, I spent some time searching the literature for "practice pause," but will need to refine my search for evidence that might support their cause. I also spent some time reviewing studies on different sedation scales for my chapter on my evidenced-based intervention. I will compare the MOSS tool with the Pasero and the Richmond. I found numerous studies of the Richmond for use in critical care patients, but only one on its use in patients in medical-surgical areas, which was a driving force behind my project.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/02/2020	04/02/2020	DNP Essential I. Scientific Underpinnings for Practice	Ess. 1: Synthesize literature (review)	04:00	NR705. Literature synthesis for evidenced-based intervention. Today I worked on the synthesis of the literature for my intervention, the Michigan Opioid Safety Score. I compared and contrasted two other sedation scales, the Richmond and the Pasero and discussed the evidence behind the need for the added assessment measures and interventions with MOSS.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/03/2020	04/03/2020	DNP Essential I. Scientific Underpinnings for Practice	Ess. 1: Synthesize literature (review)	04:00	NR705. Synthesis of literature for evidence-based intervention. Today I finished the chapter of my manuscript that focuses on my evidenced-based intervention, the Michigan Opioid Safety

										Score (MOSS). I compared to other highly rated and utilized sedation scales with the MOSS and provided rationale for its for use in my practice setting. The MOSS has the potential to not only improve patient safety but with its recommended intervention calling for multimodal analgesia, also has the potential to reduce opioid use.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/04/2020	04/04/2020	DNP Essential III. Clinical Scholarship and Analytical Methods	Ess.3: Develop DNP project proposal	04:00	NR705. DNP Project Proposal. I spent time working on the chapters of my DNP project manuscript, updating the evidence synthesis and evidenced-based intervention sections. Since I had made substantial revisions to these chapters, I needed to go through and make changes to other areas. I copied and pasted my IRB letter into the document and updated my appendices. I'm not sure whether or not will get to implement my project in the traditional way due to the pandemic, but working on my manuscript will undoubtedly be important however I proceed.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/05/2020	04/05/2020	DNP Essential III. Clinical Scholarship and Analytical Methods	Ess.3: Develop professional portfolio	04:00	NR705. Develop a professional portfolio. Today I worked on organizing the pages in my electronic professional portfolio. Some of my documents were not uploaded to the appropriate pages in the appropriate sections. I still have some remaining sections to work on. I also need to create a backdrop for my welcome page. Maintaining a portfolio is something that is expected of the professional nurse. It demonstrates organization,

										achievement, skill, and academic accomplishments.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/07/2020	04/07/2020	DNP Essential VI. Interersonal Collaboration for Improving Patient	Ess.6: Participate in an interprofessional team in member role	04:00	NR705. Development of new policies and procedures in a pandemic. I worked amongst a group of nurse leaders to develop new policies for care management practices that minimize exposure and the use of PPE in the clinical setting. Prior to the pandemic, the practice was to assess every patient for care management needs within 24 hours admission. In order to minimize exposure and the use of PPE in contact, airborne, and droplet precautions, we chose to change this practice. The new and temporary practice requires the RNCM to review the patient chart and collaborate with the multidisciplinary care team for discharge needs. For patients who need to be further assessed, the RNCM will call into the patient's room and speak with the patient. If the patient is unable to communicate, the RNCM is to call the family.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/07/2020	04/07/2020	DNP Essential IV. Information Systems/Technology and Patient Care Technology	Ess.5: Participate on committee at institutional level	04:00	NR705. Implementation of technology for multidisciplinary rounding. To facilitate patient throughput and collaborate with intra and inter professional care teams, each unit holds intradisciplinary care team rounds each day. In order to maintain social distancing recommendations and reduce exposures, we have implemented a new process whereby team members may choose to join by skype. For some team members, this isn't feasible, but by reducing the number of



										people who physically attend, social distancing of 6 feet is maintained. We have also implemented the use of Zoom when documents and other technologies must be shared by a group of people.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/09/2020	04/09/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Identify gaps in care in individuals, communities and populations	04:00	NR705. I have taken on a new project this week. One of our local Neurosurgeons reached out to some nurse leaders to help address an issue with isolation of COVID 19 patients in our community. We have 3 hospitals in our area, one which sits almost completely empty. Neither of the other hospitals have addressed this hospital as a possible site for isolating COVID 19 pending or positive patients. In order to reduce exposure to other patient populations and caregivers, using this site may be ideal. I have spent my time this week researching CDC recommendations as well as what it takes to become an ICAR facility. Though my research and action may not be timely in terms of the present pandemic, as we look forward to another potential peak in the fall, the use of this facility may be ideal. This research and collaboration with Dr. Keiper as well as other healthcare leaders in my community is essential to my development as a DNP.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/11/2020	04/11/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Implement and evaluate health promotio/disease prevention interventions	04:00	NR705. Care Management. In my role as an RN Care Manager, this week I worked directly with patients with addiction. I completed thorough assessments including self-health

										management and need/desire for community resources. I linked patients who desired rehabilitation with appropriate resources. With social distancing measures, support groups like AA and NA are holding virtual meetings. These activities relate to my DNP project as my project idea came from my community assessment of addiction.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/11/2020	04/11/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Identify gaps in care in individuals, communities and populations	04:00	NR705. Care Management. In my role as an RN Care Manager, this week I worked directly with patients with addiction. I completed thorough assessments including self-health management and need/desire for community resources. I linked patients who desired rehabilitation with appropriate resources. With social distancing measures, support groups like AA and NA are holding virtual meetings. I collaborated with our social workers on how we can make these meetings accessible to our patients. For patients, without electronic access, these meetings are nearly impossible for them access at this time. More work will need to be done with our community agencies to improve accessibility for certain populations of people in our community.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/11/2020	04/11/2020	DNP Essential VI. Interpersonal Collaboration for Improving Patient	Ess.6: Participate in an interprofessional team in leader role	04:00	NR705. Care Management. In my role as an RN Care Manager, this week I worked as lead amongst a group of care managers and social workers in planning for safe discharge for patients with pending covid 19 tests or with positive

										results. We collaborated with transport companies for safe transport home. For homeless patients, we have collaborated with community agencies for safe shelter so that we can avoid discharging to the street. We have set up a process for notifying patients of their test results, including for those without phone access. This work enhances my leadership abilities as a DNP scholar.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/11/2020	04/11/2020	DNP Essential VI. Interersonal Collaboration for Improving Patient	Ess.6: Participate in an interprofessional team in leader role	04:00	NR705. Care Management. In my role as an RN Care Manager, this week I worked as lead amongst a group of care managers and social workers in planning for safe discharge for patients with pending covid 19 tests or with positive results. We collaborated with transport companies for safe transport home. For homeless patients, we have collaborated with community agencies for safe shelter so that we can avoid discharging to the street. We have set up a process for notifying patients of their test results, including for those without phone access. This work enhances my leadership abilities as a DNP scholar.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/15/2020	04/15/2020	DNP Essential VI. Interersonal Collaboration for Improving Patient	Ess.6: Participate in an interprofessional team in consultant role	04:00	NR705. I was asked to assist a safe practice committee with research on a "practice pause" whereby nurses can call a time out when they receive an assignment that they do not feel they are safe to take. The committee was formed prior to COVID 19 changes, but with the pandemic, a lot of changes that staff consider unsafe have

										come to light. Nurses who have been out of bedside practice and may have disabilities that preclude them from being able to take on a patient team are being asked to accept new roles. For many, the change is acceptable. The committee would like to ensure that staff has the right and the voice to speak up in the event a nurse feels that taking an assignment is unsafe for either them or the patients. I was able to find a number of articles that address this very issue and have directed them to the OSBN and ANA Nurse Code of Ethics. I have sent them to the team with a message that I am happy to continue to help.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/15/2020	04/15/2020	DNP Essential I. Scientific Underpinnings for Practice	Ess.1: Review/Evaluate EBP material (e.g.,web,print)	04:00	NR705. Review/evaluate EBP material and synthesis of evidence. I finalized my chapter on my evidenced-based intervention and evidence synthesis. Since I will not be able to implement my project, I will be asked to write an integrative review. I have researched (read) a few integrative reviews to enhance my understanding of the format and requirements. I have worked on my evidence table to align more with an integrative review.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/16/2020	04/16/2020	DNP Essential VIII. Advanced Nursing Practice	Ess.8: Mentor other healthcare providers (not to include precepting nursing students/teaching a class for nursing students)	04:00	NR705. DNP Essential III, Ess 3-today I worked on organizing the pages and adding documents to my professional portfolio. NR705. DNP Essential VIII, Ess 8-I served as a consultant to a relatively new RN on professional development activities that may help her build confidence in interviewing for jobs. She has applied for a

										few jobs but has not been yet chosen. She is shy and young and has a fairly short resume. I advised her as to the type of interview questions she will be asked by prospective employers as well as she can prepare to answer them.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/17/2020	04/17/2020	DNP Essential VIII. Advanced Nursing Practice	Ess.8: Disseminates knowledge to patients, families, and communities	04:00	NR705. Care Management. Today I worked with patients and families in the ICU, facilitating throughput and discharge plans. Families at this time are unable to see their loved ones so the RNCM facilitates care conferences goals of care discussions and advanced care planning. Due to COVID 19 restrictions from facilities, those patients requiring transfer post acute care must have a rapid COVID test. I facilitated this testing as well as coordinated community resources for safe patient transfer.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/17/2020	04/17/2020	DNP Essential VIII. Advanced Nursing Practice	Ess.8: Implement therapeutic interventions in practice setting	04:00	NR705. Care management. Today in the ICU I worked with a patient who had suffered a traumatic brain injury and would be in need of advanced care planning beyond his hospital stay. Due to COVID 19 restrictions, his significant other is not able to visit. I counseled her over the phone and provided resources for her emotional and spiritual well being. The case involves addiction in the patient as well as domestic violence so providing emotional support for the abused and a therapeutic environment for the patient was essential. This work today relates my work as a DNP in that I worked at an advanced level with a special population,

										assessed needs and identified barriers, and connected patient and family the appropriate resources.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/18/2020	04/18/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Implement and evaluate health promotio/disease prevention interventions	04:00	NR705. My work in care management today was centered around vulnerable populations to infection with COVID 19. We have, and continue to work with community agencies to ensure safe discharge plans for homeless patients who have pending COVID 19 tests. The goal is to ensure that patients do not discharge to the streets but to a safe place where symptoms can be monitored and a care manager can reach out to them with test results. If test results are positive, the care manager will facilitate getting the patient to safe housing for isolation. This work is not directly to my project topic, but it does help me to build relationships, leadership skills, and helps me to keep on a pulse on issues the nurses I work with will face.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/18/2020	04/18/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Identify gaps in care in individuals, communities and populations	04:00	NR705. My work in care management today was centered around vulnerable populations to infection with COVID 19. We have, and continue to work with community agencies to ensure safe discharge plans for homeless patients who have pending COVID 19 tests. The goal is to ensure that patients do not discharge to the streets but to a safe place where symptoms can be monitored and a care manager can reach out to them with test results. If test results are positive, the care manager will facilitate getting the

											patient to safe housing for isolation. This work is not directly to my project topic, but it does help me to build relationships, leadership skills, and helps me to keep on a pulse on issues the nurses I work with will face.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/21/2020	04/21/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Implement and evaluate health promotio/disease prevention interventions	04:00	NR705. Interdisciplinary member. My work this week centered around preparations in both the inpatient and outpatient settings for COVID 19. We continue our work on improving protocols, algorithms, and guidelines for movement of patients between facilities and back to the community. We continue to partner with various organizations in the community to ensure that our homeless populations, as well as those experiencing addiction, have a safe place to go during the quarantine. This work impacts my project as it keeps me apprised as to the barriers for our patients experiencing opioid addiction, as well as to potential barriers to project implementation with stakeholders: culture, attitude, and fatigue.	
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/21/2020	04/21/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Implement and evaluate health promotio/disease prevention interventions	04:00	NR705. Interdisciplinary member. My work this week centered around preparations in both the inpatient and outpatient settings for COVID 19. We continue our work on improving protocols, algorithms, and guidelines for the movement of patients between facilities and back to the community. We continue to partner with various organizations in the community to ensure that our homeless populations, as well as those experiencing addiction, have a safe place to go during the	

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Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/22/2020	04/22/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Implement and evaluate health promotio/disease prevention interventions	04:00	NR705. Interdisciplinary member. My work this week centered around preparations in both the inpatient and outpatient settings for COVID 19, specifically for vulverable populations. We worked on establishing protocols, algorithms, and guidelines for movement of patients between new homeless facilities and back to the community. We worked on partnering with various organizations in the community to ensure that our homeless populations have a safe place to go during quarantine, as well as to minimize their risk for exposing others. This work impacts my role as a DNP as it improves my understanding of population health as well as my role as leader in the community.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/22/2020	04/22/2020	DNP Essential VII. Clinical Prevention and Population Health for Improving	Ess.7: Implement and evaluate health promotio/disease prevention interventions	04:00	NR705. Interdisciplinary member. My work this week centered around preparations in both the inpatient and outpatient settings for COVID 19, specifically for vulnerable populations. We worked on establishing protocols, algorithms, and guidelines for the movement of patients between new homeless facilities and back to the community. We worked on partnering with various organizations in the community to ensure that our homeless



										populations have a safe place to go during quarantine, as well as to minimize their risk for exposing others. This work impacts my role as a DNP as it improves my understanding of population health as well as my role as a leader in the community.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/24/2020	04/24/2020	DNP Essential VIII. Advanced Nursing Practice	Ess.8: Assess clients, popluations or organizations in practice setting	04:00	NR705. Care management. I assessed patients for readiness for movement from higher level of care to lower level of care. I assessed patient needs for ongoing dialysis and made community arrangements with COVID 19. I assessed goals of care and coordinated care for patient readiness for hospice with special planning and arrangements due to COVID 19 restrictions. I worked with the multidisciplinary care team on arrangements of hospital throughput for patient transitioning from one level of care to another in setting of COVID 19.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/24/2020	04/24/2020	DNP Essential VIII. Advanced Nursing Practice	Ess.8: Assess clients, popluations or organizations in practice setting	04:00	NR705. Care management. I assessed patients for readiness for movement from higher level of care to lower level of care. I assessed patient needs for ongoing dialysis and made community arrangements with COVID 19. I assessed goals of care and coordinated care for patient readiness for hospice with special planning and arrangements due to COVID 19 restrictions. I worked with the multidisciplinary care team on arrangements of hospital throughput for patient transitioning from one level of care to another in setting of COVID 19.

										COVID 19.
Tavernier, Jen	NR705C: DNP Project & Practicum II	60238	March 2020	Johnston, Joyce	04/24/2020	04/24/2020	DNP Essential VI. Interersonal Collaboration for Improving Patient	Ess.6: Participate in an interprofessional team in leader role	04:00	NR705. Care managment. I worked with the Environmental Services team and plan for bringing non emergent, elective surgery patients back to the hospital May 1. It was necessary to review isolation plans and patient throughput in order to prevent exposure as well as identify areas that needed to be sterilized and prepped for patient return. This work compliments my development as a DNP and a leader as it has broadened my understanding of work roles and relationships in crisis planning and prevention.
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<b>Total:</b>									<b>516:00</b>	

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