

# One Sharp Nursing: Everyday Excellence

Quarterly e-news published by the  
Terrence and Barbara Caster Institute for Nursing Excellence

**SPRING 2026**



“Nursing integrates the art and science of caring and focuses on the protection, promotion, and optimization of health and human functioning; prevention of illness and injury; facilitation of healing; and alleviation of suffering through compassionate presence. Nursing is the diagnosis and treatment of human responses and advocacy in the care of individuals, families, groups, communities, and populations in recognition of the connection of all humanity.”

American Nurses Association, 2021

## From Laurie Ecoff...



“I believe in process. I believe in four seasons. I believe that winter's tough, but spring's coming. I believe that there's a growing season. And I think that you realize that in life, you grow. You get better.”  
(Steve Southerland)

Spring is a season of renewal, growth, and fresh momentum—and at Caster Nursing Institute, that spirit is very much alive. As the days grow longer and new opportunities emerge, we’re excited to share updates that reflect our continued commitment to advancing nursing education, clinical excellence, and professional development.

In this Spring issue of Caster e-News, you’ll find highlights from across our programs, insights from our team members and partners, and updates that support nurses at every stage of their journey. From innovative learning initiatives to achievements worth celebrating, this edition is designed to inform, inspire, and connect our growing community.

We hope this issue energizes you for the season ahead and reinforces the vital impact you make every day—on patients, families, and the future of nursing.

Warm Regards,

Laurie

**SHARP**

## Nurse Residency Program Graduate Profiles

The Sharp HealthCare Nurse Residency Program was developed to provide a flexible, supportive environment to build confidence in new graduate nurse residents. Newly licensed nurses are hired into Sharp's 12-month, systemwide NRP, which recently earned its second Accreditation with Distinction by the American Nurses Credentialing Center (ANCC) Practice Transition Accreditation Program®. Nurses in the program experience curricula promoting the acquisition of knowledge, skills, and professional behaviors necessary to deliver safe, evidence-based care. The Nurse Residency Program offers challenging and inspiring opportunities and clinical experiences in all clinical specialties to cultivate skills that promote lifelong success in nursing. Here is what **Nicholas Schumacher, BSN, RN, CCRN, and Tyler McDonald, BSN, RN**, had to share about their Sharp journeys. We celebrate their ongoing achievements at Sharp!



**Nicholas Schumacher**

I have always been fascinated by healthcare, though I never imagined I would become an intensive care nurse (ICU). I began my educational journey studying biology while playing division II baseball in Los Angeles. During college, I joined several medical mission trips to Mexico, helping set up free community clinics and working alongside nurses, nurse practitioners, and physicians. Those experiences opened my eyes to the profound and lasting impact nurses have on patients and communities. Learning about the diverse paths within the profession, from public health to intensive care, ultimately inspired me to change my career direction. Two months after earning my biology degree, I moved to San Diego to pursue nursing through an accelerated program. While in school, I worked as a nursing assistant at Sharp Memorial Hospital, and soon after I was fortunate to begin my nursing career in the Medical ICU at Sharp Grossmont.

The Sharp HealthCare Nurse Residency Program played a pivotal role in helping me grow, mature, and truly value my new graduate nurse experience. My mentors and preceptors supported me every step of the way, encouraging me to succeed both clinically and professionally. I entered the ICU during the height of the pandemic – a time marked by overwhelming loss and emotion. While nothing could have fully prepared me for the challenges, the Sharp HealthCare Nurse Residency Program provided the tools, structure, and support I needed. Its thoughtful approach to learning, mentorship, and professional development was a major factor in my decision to build my career at Sharp, where leaders and peers alike have helped shape me into the nurse I am today.

Since completing the Nurse Residency Program, I have had the opportunity to give back in many ways. I have served as a nurse mentor, preceptor for new hires and students, and contributed as an educator for nursing students preparing for licensure. As an Advanced Clinician and relief charge nurse, I've grown as a leader on my unit. I have also been part of our Unit Practice Council, serving as Chair for the past two years. Through the council, we enhance unit workflow, implement evidence-based practice, collaborate with our clinical nurse specialist on educational initiatives, and foster a welcoming, inclusive environment for our team.

Outside of work, I turn to nature to recharge. I love camping, hiking, reading at the beach, and recently discovered how much fun pickleball can be, especially when playing with coworkers on our days off. Living in San Diego means great weather almost year-round, so I take advantage of it whenever I can, including cheering on the Padres at Petco Park.

As I look ahead, I feel grateful for the mentors who grounded and guided me through my early years in nursing. Their influence has shaped my growth, confidence, and relationships along the way. I hope to offer that same support to future generations of nurses. Our profession grows stronger when we remember where we started, share what we have learned, and lift up those beginning their journey. I am excited to see where my career with Sharp leads and hope to inspire new graduate nurses to believe that they can succeed, just as others believed in me.

## Nurse Residency Program Graduate Profiles (continued)

I am truly honored to be highlighted as a Sharp HealthCare Nurse Residency Program graduate. Looking back, I can say with confidence that the Nurse Residency Program laid the foundation for both my clinical development and my professional identity as a registered nurse.

I began my career as the first new graduate hired into the Post Anesthesia Care Unit at Sharp Memorial Hospital, a specialized and fast-paced environment that was both exhilarating and humbling. With the support of my preceptors and the structured learning provided through the Nurse Residency Program, I was able to build confidence in my clinical judgment and strengthen my critical thinking. Those early experiences helped me shift from the student mindset to the professional responsibility of caring for complex postoperative patients. During my time in the Post Anesthesia Care Unit, I also joined the Unit Practice Council, collaborating with colleagues on evidence-based projects to enhance patient care and optimize unit workflow. The Nurse Residency Program encouraged engagement beyond bedside care, helping me understand the importance of shared governance, professional accountability, and continuous process improvement.

As my skills grew, I felt called to broaden my experience and deepen my assessment abilities in more acute, rapidly evolving settings. This led me to transition to the Sharp Memorial Hospital's Emergency Department. In the emergency room and trauma environment, I had the privilege of working with an exceptional team that embodies collaboration, accountability, and unwavering dedication to person-centered care. I became an Advanced Clinician, mentoring colleagues as they developed their emergency and trauma skillsets, a role that strengthened my confidence and allowed me to pay forward the mentorship that shaped my early practice. Stepping into the Trauma Nurse Team Leader role further expanded my leadership capabilities, sharpening my ability to think critically under pressure and guide interprofessional teams during trauma activations and code scenarios. Being voted Night Shift Nurse of the Year in 2024 by my peers was incredibly meaningful, an acknowledgment not only of my growth, but of the supportive, high-trust culture we have built together.

Working in high-acuity environments has taught me that maintaining balance requires intention. Outside the hospital, I protect time with my wife and our dog, keeping family at the center of my life. In the clinical setting, I prioritize team debriefing, acknowledging the emotional weight of emergency and critical care and ensuring we support one another in processing those experiences. I also maintain a consistent fitness routine, using exercise as a healthy outlet to stay grounded, and ready to bring my best to each shift.

Reflecting on my path, the Sharp HealthCare Nurse Residency Program was the launch point for leadership, lifelong learning, and a meaningful, fulfilling trajectory in nursing. Beyond individual growth, Sharp's commitment to a strong new graduate program cultivates a culture of collaboration, curiosity, and continuous improvement across the organization. I am deeply grateful for the mentorship, encouragement, and opportunities I have received, and proud to continue my journey at Sharp HealthCare. Now, I am beginning a new chapter in the Surgical Intensive Care Unit at Sharp Memorial Hospital, where I look forward to caring for highly complex patients and continuing to refine my clinical expertise. I'm excited to contribute to team development, advance evidence-based practice, and continue growing within Sharp HealthCare.



**Tyler McDonald**



Anela Wu

## The Sharp Nursing Showcase Site: Celebrating Excellence Across Our Nursing Community

By Anela Wu, MS, Program Specialist  
Terrence and Barbara Caster Institute for Nursing Excellence

Nearly one year in the making, the Sharp Nursing Showcase highlights the excellence of the nurses who make Sharp HealthCare the best place to work, practice medicine, and receive care. Every day, meaningful and inspiring work takes place across our system, connecting nurses, patients, and the community while advancing professional

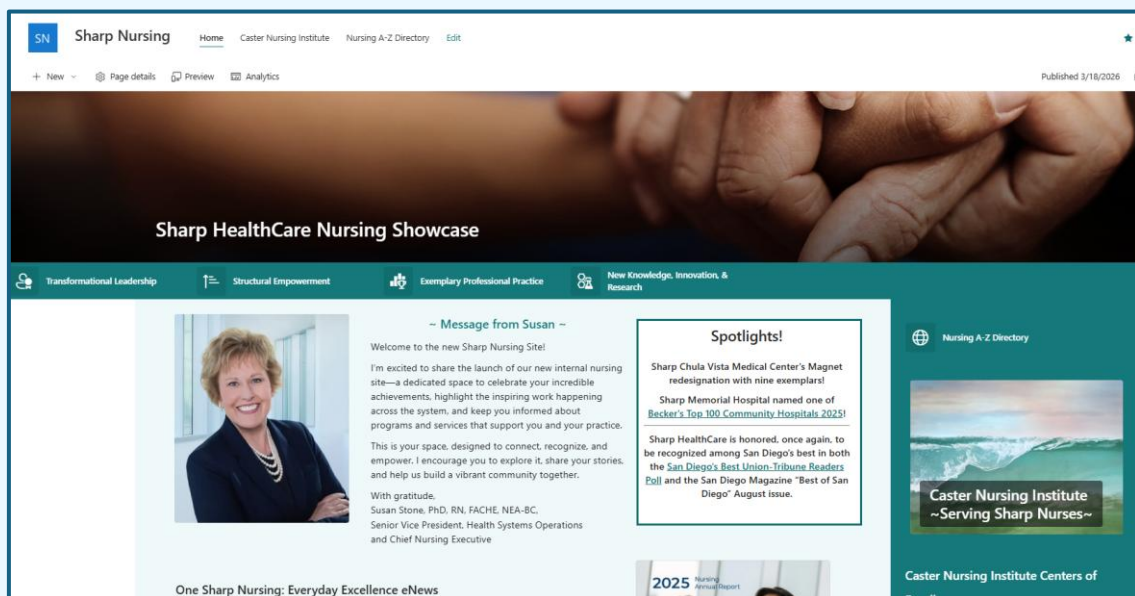
Practice and innovation. The Sharp Nursing Showcase brings these efforts together in one centralized, accessible digital space.

The Sharp HealthCare Nursing Showcase is a new online hub designed to celebrate nursing achievements while providing streamlined access to programs, resources, and initiatives for both current and aspiring nurses. The site serves as a central resource hub, offering easy navigation to tools that support professional growth, career development, and lifelong learning. By showcasing the breadth and depth of nursing excellence across the organization, the site reinforces Sharp’s commitment to recognizing the extraordinary impact nurses have throughout the system.

Prominently featured within the Sharp Nursing Showcase is the Terrence and Barbara Caster Institute for Nursing Excellence, Sharp’s organizational hub for advancing nursing practice. The Caster Nursing Institute elevates nursing excellence through its four centers: the Wiesler Center for Professional Growth, the Center for Inquiry and Innovation, the James S. Brown Center for Simulation and Innovative Learning, and the Center for Community Engagement. Together, these centers support professional development, research and evidence-based practice, simulation-based learning, and meaningful community partnerships.

In addition, the Sharp Nursing A–Z Directory mirrors a familiar tool for many Sharp leaders and staff, providing quick access to frequently used nursing resources and serving as a helpful bridge during the SharpNET transition. This digital space reflects Sharp’s ongoing commitment to supporting its nursing workforce while celebrating the vital role nurses play in delivering safe, high-quality, compassionate care.

For more information, please refer to the Sharp Communications distributed on March 3, 2026 titled, “Introducing the Sharp Nursing Showcase Site.”





**Grace Ullum**

## Impact of Sharp Memorial Hospital’s Intersocietal Accreditation Commission in Electrophysiology Accreditation

By Grace Ullum, MSN, RN, NEA-BC  
Director, Heart, Vascular, and Thoracic Service Lines  
Sharp Memorial Hospital Cardiovascular Administration

Sharp Memorial Hospital’s (SMH) recent accreditation by the Intersocietal Accreditation Commission in Electrophysiology (IAC EP) highlights the organization’s ongoing commitment to delivering exceptional cardiovascular care.

### IAC EP Accreditation Patient Benefits

Safer high-quality, evidence-based care	Ensures care meets rigorous national standards for electrophysiology procedures, follow-up, and outcomes, improving safety for patients with complex heart rhythm disorders
Timely access to advanced cardiac care close to home	Ensures patients have local access to advanced diagnostic and therapeutic electrophysiology services, reducing delays and travel burden
Reduced risk and fewer complications	Ensures continuous quality review that minimizes procedural risk, lowers complication rates, and supports early clinical improvement
Care delivered by qualified, accountable clinical teams	Ensures care is provided by qualified teams through external review of clinician credentials, staff competencies, and clinical protocols
Greater patient and family confidence in care quality	Ensures transparency and alignment with nationally recognized benchmarks, strengthening trust in cardiovascular services
Positive impact on population health	Ensures high-quality arrhythmia management that reduces emergency visits, readmissions, and long-term cardiovascular complications

A special thank you to Project Lead Danya Willms, Nurse Manager Donna Dasinger, and the many nurses whose dedication made this accreditation possible: Simon Brice, Brooke Filgo, Chloe Garrett, Carlen Hudnet, Gem Pulmano, Shari Ratner, Whitney Sitter, Libby Streeter, and Natalie Youngblood.

## Celebrating Leadership in Nursing Education

Melodie Daniels, PhD, RN, CNS, NPD-BC, has made a strong impact as the Program Manager for Learning Programs at the Caster Nursing Institute. In her role, she has helped bring structure, clarity, and consistency to clinical education across Sharp HealthCare. Her team now supports thousands of student placements each year, maintains standardized databases, and improves communication between schools and clinical sites. Under her leadership, Learning Programs has strengthened partnerships, expanded opportunities for students, and created a more welcoming and well-organized experience for learners.

We are proud to share that Melodie Daniels has accepted the San Diego Consortium Agency Chairperson position, effective January 1, 2026. This new role positions her to represent Sharp across San Diego County and to help shape clinical education for the region. Her experience, leadership, and dedication to high-quality learning will make a positive difference for students, faculty, and healthcare partners.



**Melodie Daniels**

Congratulations, Melodie!



**Christina M. Kelley**

## Excellence Reaffirmed: Sharp Chula Vista Medical Center Achieves Second Magnet® Designation

By Christina M. Kelley, DNP, APRN, AGCNS-BC, NE-BC, NPD-BC, CNE, CCRN-K, Director of Education, Research and Professional Practice; Magnet Program, Planetree and Palliative Care Director; Sharp Chula Vista Medical Center

At Sharp Chula Vista Medical Center (SCVMC), excellence is a sustained practice grounded in teamwork and accountability. Over the past year, Magnet® Champions, leaders, and specialists collaborated to prepare a 900-page Magnet application highlighting interprofessional achievements from the 2021–2025 Magnet cycle. As a result, SCVMC advanced directly to site visit with no findings, requests for additional documentation, or deficiencies, an accomplishment achieved for only the second time in the organization’s history. This outcome reflected consistent focus on quality, safety, and collaboration across teams.

In preparation for the November 2025 Magnet site visit, SCVMC introduced the Magnet Museum—an interactive space designed to document the organization’s Magnet journey and highlight nursing and interprofessional contributions (see photos next page). The museum emphasized innovation, collaboration, and professional practice. In the weeks leading up to the visit, more than 800 clinical nurses, 200 nurse leaders, interprofessional partners, and community members participated, reinforcing organization-wide engagement and support for Magnet standards.

During the site visit, Magnet appraisers provided strong, consistent feedback. They identified community engagement as a defining strength, noting its alignment with patient outcomes and meaningful partnerships. Appraisers also recognized nurse retention and recognition practices, highlighting how consistently team members acknowledge and support one another.

Dissemination emerged as a key strength. Appraisers commended the volume and quality of publications, poster presentations, and podium presentations led by clinical nurses and nurse leaders and encouraged continued external sharing. Succession planning was identified as a distinguishing practice, with appraisers noting the breadth of clearly defined advancement pathways. Team longevity also stood out, reflecting a strong culture of engagement, stability, and professional fulfillment.

In January 2026, the Commission on Magnet recognized SCVMC as a two-time Magnet-designated organization, affirming the contributions of its nurses and interprofessional partners in advancing quality, safety, and innovation. The appraisal team highlighted exceptional strengths across Transformational Leadership, Structural Empowerment, Exemplary Professional Practice, and New Knowledge, Innovations, and Improvements.

Exemplars included:

1. Achieving a highly educated nursing workforce, with 85% of professional registered nurses holding a baccalaureate or higher degree in nursing.
2. Sustaining workforce stability with a nurse turnover rate of 7.7%.
3. Outperforming national benchmarks for hospital-acquired pressure injuries (stage 2 and above) across all inpatient units for the majority of eight consecutive quarters.
4. Exceeding national benchmarks for multi-drug resistant organism outcomes across all inpatient units for the majority of eight consecutive quarters.
5. Surpassing national benchmarks for falls with injury across all units across all measured quarters.
6. Accelerating emergency department throughput, outperforming national benchmarks for median minutes from arrival to departure for discharged patients across all measured quarters.

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## Excellence Reaffirmed: Sharp Chula Vista Medical Center Achieves Second Magnet® Designation (continued)

7. Outperforming national benchmarks for patient experience related to courtesy and respect across all ambulatory care settings for the majority of eight consecutive quarters.
8. Exceeding national benchmarks for patient experience related to safety across all ambulatory care settings for the majority of eight consecutive quarters.
9. Advancing nursing scholarship through 26 publications, multiple podium and poster presentations, and 31 nurses presenting IRB-approved evidence-based projects through regional collaborations.

This designation affirms the sustained contributions of nurses and interprofessional partners in advancing quality, safety, and innovation, and serves as validation of consistent performance. As SCVMC celebrates this achievement, it is important to recognize that the organization's journey is grounded in excellence validated across the Magnet Model. The passion, resilience, and dedication of the SCVMC workforce are the driving forces behind its success as a two-time Magnet-accredited organization. Magnet is not simply recognition; it reflects the strength built as a team, the lives touched, and the enduring legacy created for the San Diego South Bay community.

Together, Sharp Chula Vista Medical Center advances excellence. Together, Sharp Chula Vista Medical Center is Magnet strong.

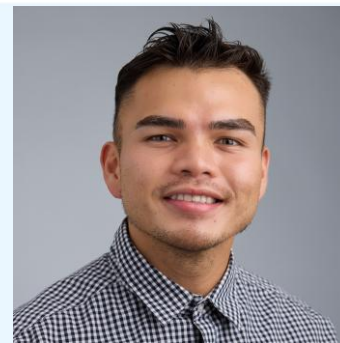


## Where leadership meets the work: Lessons from my first year as a nurse leader...

From MyAmericanNurse.com

January 21, 2026

By: Alexander Salinas CCRN-CMC



**Alexander Salinas**

When I stepped into my first nursing leadership role, I thought I understood what leadership meant—to coordinate, organize, and support. Yet within months, I discovered that leadership extends far beyond management. It demands humility, courage, and the ability to hold space for others while continuing to grow yourself. My first year as a nurse leader wasn't defined by perfection but by progress as I learned to navigate difficult conversations, foster accountability, and lead with both evidence and empathy. It was also a year of discovering the importance of mentorship—not just for emerging nurses, but for leaders themselves.

### **Going where the work happens**

Early in my journey, I came across the Japanese concept of Gemba, meaning “the real place” where the actual work takes place. In nursing, the Gemba is at bedside, in the hallway, at the nurses' station. It's wherever care is being delivered and teamwork unfolds.

In Gemba philosophy, problems are best understood and solved by the people who do the work every day. Those closest to the process hold the most insight into what's working and what's not. As a leader, that idea resonated deeply with me—the belief that lasting solutions come not from behind a desk, but from being present and engaging directly with those at the point of care.

Leading from the Gemba transformed my approach. Instead of observing from a distance, I began showing up where challenges were unfolding. I listened to staff frustrations, observed workflows, and experienced the team's pressures firsthand. Presence became my most powerful leadership tool. When my team saw me in the thick of things—troubleshooting a monitor alarm or helping transport a patient—they saw that leadership isn't about authority, but shared accountability.

### **Accountability with compassion**

Accountability was one of the hardest yet most meaningful lessons of my first year. True accountability isn't about blame; it's about ownership, and it starts with the leader.

After every challenging shift or conversation, I asked myself: What could I have done differently? How did my communication affect this situation? That self-reflection set the tone for my team. Accountability became less about pointing out mistakes and more about cultivating trust.

One of the most transformative parts of becoming a leader is learning to lean into difficult conversations, even when it's uncomfortable. That's where real growth happens—in the moments when you choose courage over avoidance. Leaning in with empathy and intention not only strengthens relationships but also builds the kind of trust that anchors a healthy work environment.

Creating psychological safety became a priority for me. I want staff to feel safe bringing forward their concerns, frustrations, or mistakes without fear of judgment. For me, psychological safety means being the kind of leader others can approach when problems arise and knowing that listening is sometimes more powerful than solving. One of the ways I promote this is by recognizing and celebrating vulnerability. During one of our huddles, I publicly acknowledged a nurse who had brought up a concern about a workflow issue. Instead of seeing it as criticism, I

(Continued on next page)

## Where leadership meets the work: Lessons from my first year as a nurse leader (continued)

framed it as courage and as someone speaking up for patient safety and team improvement. That moment reminded the whole team that raising issues isn't about blame; it's about progress. When people feel heard and supported, accountability transforms from correction into collaboration

Over time, I learned to approach these conversations with curiosity and composure. I focus on behaviors, not personalities, and I keep the goal anchored in growth rather than discipline.

### **Mentorship for nurses and for leaders**

Mentorship became the most meaningful part of my leadership journey. Early on, I realized that many emerging nurses simply need reassurance and guidance—someone to help them connect their passion to purpose.

But I also learned something equally vital: leaders need mentors, too. I was fortunate to have senior leaders who supported me, offered perspective, and reminded me that I wasn't alone in navigating challenges. Their experience helped me make sense of difficult moments, encouraged self-reflection, and modeled the calm confidence I aspire to pass on to others.

At my organization, Sharp Memorial Hospital, I was able to participate in the Leaders4Leaders program, which pairs developing leaders with experienced mentors across the system. Through this program, I found guidance and clarity during times of uncertainty. Having a senior leader to discuss real-world challenges with—from communication struggles to decision-making pressures—helped me grow in confidence and emotional intelligence. It reminded me that leadership doesn't have to be lonely; it can be collaborative, connected, and shared.

Mentorship is cyclical. As I counsel nurses who find their voice, I'm mentored by those who are paving the leadership road before me. Mentorship isn't just about developing future nurses; it's about supporting current leaders so they can remain grounded, capable, and compassionate.

### **Looking ahead**

As I move beyond my first year in leadership, I carry forward these lessons with purpose. Leadership isn't about perfection; it's about persistence, meeting people where they are, leading with evidence and empathy, and holding space for growth, both our own and others'.

The work of a nurse leader is demanding and deeply human. We lead not just policies and practices, but people with their hopes, fears, and stories. And if there's one truth I've learned, it's that leadership happens not from behind a desk, but in the Gemba—where the real work, and the real heart of nursing, lives.

*Alexander Salinas CCRN-CMC is a Clinical Nurse Lead at a Stepdown ICU in a LVAD Transplant Unit at Sharp Memorial Hospital.*

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**Hillary Lindberg**

## Leading Change in Surgical Safety: Our Journey to a Smoke-Free OR at Sharp Coronado Hospital

By Hillary Lindberg, MSN, RN  
Director of Perioperative Services, Sharp Coronado Hospital

When I joined the Surgery Department at Sharp Coronado Hospital in April 2025, I was immediately struck by the team's passion, unity, and strong sense of connection. During onboarding, I had the opportunity to shadow several experienced nurses, including Jun Barry, RN. As we worked together caring for orthopedic cases, I gained early insight into the efficient, compassionate care that defines our Operating Room (OR) team.

That first week, Jun shared a vision that would shape the future of our department: making our operating rooms completely smoke free. Surgical smoke—produced during electrocautery and laser procedures poses well-documented health risks to both patients and surgical staff. With my background as a perioperative nurse, I immediately recognized the importance of this initiative. Jun's passion for environmental safety and staff well-being resonated deeply, and I knew I wanted to support her in bringing this vision to life.

### Building the Foundation: Evidence-Based Partnership

To ensure our efforts were grounded in evidence and aligned with national best practices, we partnered with the Association of periOperative Registered Nurses (AORN) and Stryker to implement the AORN Go Clear™ program. AORN, representing more than 200,000 perioperative nurses, advances safe surgical care through evidence-based standards, education, and advocacy. The AORN Go Clear™ initiative provides a comprehensive framework for eliminating surgical smoke through education, workflow integration, compliance strategies, and adoption of proven technologies.

After receiving approval to begin implementation in July 2025, we formed an interprofessional team of nurses, scrub techs, surgeons, administrators, and supply chain leaders. The team met weekly to review progress, address barriers, and refine workflows. We identified physician champions, evaluated sterile pack configurations, and integrated smoke evacuation equipment into daily practice in a sustainable way.

### Collaboration, Education, and Culture Change

Successful implementation required more than new equipment – it required a cultural shift. Our weekly meetings became a forum for education, engagement, and shared problem-solving. We presented evidence-based research to physicians, conducted targeted in-services for staff, and adapted workflows based on frontline feedback. As compliance improved, supply chain partners updated sterile packs to permanently support smoke evacuation. Ongoing audits confirmed consistent adoption, enabling submission of final documentation to AORN.

### Achieving Excellence: Recognition and Impact

In February 2026, Sharp Coronado Hospital received the AORN Go Clear™ Award, becoming the first acute care hospital in San Diego County to earn this distinction. This milestone reflects our commitment to patient, staff, and surgeon safety and aligns with Sharp Coronado's Planetree model of person-centered care. Eliminating surgical smoke is more than a compliance effort. It reflects our values and our promise to protect every person in the operating room. Heartfelt thanks go to Jun Barry, RN, and to our entire surgical team, whose collaboration and dedication made this achievement possible.

Together, we proved that teamwork, evidence-based practice, and a shared mission can transform our ORs and elevate the standard of care for all.

## Sharp Nurses in the Media (Presentations)

**Balestrieri-Martinez, B., Johnson, H., & Yascheshyn, K. (2026, March 9).** Clinical practice changes resulting from disaster: CNSs collaborate with partners during the IV solution crisis, National Association of Clinical Nurse Specialists, San Diego, California.

**Cypher, M., Herrera, E., Phiukhao, M. Delgadillo, T., & Harter, A. (2026, March 9).** Striving for excellence through the creation of a neuroscience nursing core concepts education program (Podium), National Association of Clinical Nurse Specialists, San Diego, California.

**Failla, K., Chou, F., Fangonil-Gagalang, E., Kim, H., Timple, V., Kavar, L., Merkle, S., & Loos, N. (2026, February 10).** Nurse well-being: Strategies and resources used by nurse leaders (Poster), Association of California Nurse Leaders 48<sup>th</sup> Annual Program Conference, Rancho Mirage, California.

**Failla, K., & Ecoff, L., (2026, February 10).** Blueprint for success: Unlocking effective succession planning (Poster), Association of California Nurse Leaders 48<sup>th</sup> Annual Program Conference, Rancho Mirage, California.

Gregg, H., Peachey, C., **Cypher, M., & Herrera, E. (2026, March 21).** Elevating neuroscience nursing: Two hospitals, one mission – connecting insight to impact through collaboration (Podium), Neuroscience Nursing Annual Conference, Dallas, Texas.

**Harter, A., Brown, L., & Carlson, J. B. (2026, March 9).** Standardizing small-bore feeding tub insertion: CNS and multidisciplinary collaboration for safer enteral nutrition, National Association of Clinical Nurse Specialists, San Diego, California.

**Jones, T. & McGough, N. (2026, February 10).** Professional governance and leadership inspired volunteerism (Poster), Association of California Nurse Leaders 48<sup>th</sup> Annual Program Conference, Rancho Mirage, California.

**Marinelli, D., Toole, B., Granados, E., Johnson, H., Lam, J., Thomason, T., Wynn, T., & Sitzer, V. (2026, March 9).** Frontline nurse identification of research priorities: A Delphi study (Poster), National Association of Clinical Nurse Specialists, San Diego, California.

**Palladeno, A. (2026, January 28).** *4 signs of addiction* [Video]. TikTok. 4 signs of addiction. Anthony Palladeno, a registered nurse from Sharp... | TikTok

**Romero, E. (2026, February 10).** Assess, Address, Act: Effectively Manage Conflict with Triple AAA (Poster), Association of California Nurse Leaders 48<sup>th</sup> Annual Program Conference, Rancho Mirage, California.

**Sitzer, V., Leader, K., Marek, S., Misha, M., Park, L., & Thao, A. (2026, February 10).** Empowering frontline nurses to lead change: Nurse-Led research on thermal comfort (Poster), Association of California Nurse Leaders 48<sup>th</sup> Annual Program Conference, Rancho Mirage, California.

**Turney, J., Ecoff, L., & Mendoza, K. (2026, March 9).** Leaders 4 Leaders: A mentorship structure for developing CNSs and transforming healthcare leadership (Poster), National Association of Clinical Nurse Specialists, San Diego, California.

**Wynn, T., & Park, L. (2026, March 9).** Closing the education gap: Best practices for skin assessment in people with dark skin tones (Podium), National Association of Clinical Nurse Specialists, San Diego, California.

## Sharp Nurses in the Media (Publications)

Abraham, H., Liuson, O., **Kelley, C.**, & Holman, A. (2025). Racism and the well-being of nurses of color: A scoping review. *Nursing Outlook*, 73(2). <https://doi.org/10.1016/j.outlook.2025.102351>

This scoping review investigated associations between experiences of racism and the well-being of racial/ethnic minority nurses in the US, identifying existing evidence and literature gaps.

Culver, D., **Sitzer, V.**, & Bickford, C.J., (2025). Diffusion and adoption of the ANA nursing scope and standards of practice document: Part 2 qualitative findings of the national survey. *OJIN: The Online Journal of Issues in Nursing*, 31(1). <https://doi.org/10.3912/OJIN.Vol31No01PPT61>

This mixed-methods study examined how registered nurses from the US understand and use the American Nurses Association's Nursing Scope and Standards of Practice (NSSP). Using Rogers' diffusion of innovation model, analysis of comments from 1,679 participants revealed barriers including limited awareness, usability challenges, and cultural resistance. Findings underscore the complexity of NSSP adoption across practice settings and the need for continued refinement, dissemination, and leadership support.

**Gomez, L., LeClair, K., Jenkins, D., David, M. A., Downing, J., & Graham, J.** (2025). ED nurse-led code sepsis to reduce time to antibiotics. *Advanced Emergency Nursing*, 47(1), 64–74.

<https://doi.org/10.1097/TME.0000000000000551>

This article describes the creation of a nurse-led Emergency Department Code Sepsis team to accelerate antibiotic administration. A new electronic screening tool, a Code Sepsis activation process, and ongoing RN-led task force meetings, the initiative significantly strengthened multidisciplinary response and engagement with decreased mortality and patient readmissions.

**Graham, J., Richardson, L., Maldoon, L., Durrant, J., & Kelley, C.** (2025). Limitations to end of life care planning for patients on high flow nasal cannula. *Professional Case Management*, 31(3), 122–124.

<https://doi.org/10.1097/NCM.0000000000000800>

The purpose of this article was to examine how dependence on high-flow nasal cannula affects patients' ability to participate in end-of-life planning.

**Graham, J., Westcott, A., Smith, S., Mann, E., Daniels, R., Quillin-McEwan, M., Bahena, A., Bello, D., & Kelley, C.** (2025). Metabolic profiles of critical care patients to confirm sepsis and further understand the metabolic phenotype of sepsis. *Critical Care Nursing Quarterly*, 48(1), 8–14. <https://doi.org/10.1097/CNQ.0000000000000540>

This study investigated the underlying metabolic profile of patients with sepsis, to determine the value of continuous metabolic monitoring technology. This study also provides important further support for the emerging understanding of the dysregulated host response in sepsis.

**Graham, J., Quillin-McEwan, M., & Kelley, C.** (2025). Acute-on-chronic inflammation and patients' risk for renal support in critically ill patients. *Critical Care Nursing Quarterly*, 48(1), 52–58.

<https://doi.org/10.1097/CNQ.0000000000000536>

This retrospective study of adult SARS-CoV-2 patients in an intensive care unit setting sought to examine the relationship of C-reactive protein, D-dimer, and the need for eventual renal support in patients with heart failure and hypertension.

Mann, E., **Kelley, C.**, Gray, L., Westcott, A., & **Graham, J. K.** (2025). Transcutaneous monitoring of carbon dioxide to optimize ventilator weaning in at-risk adults after cardiopulmonary bypass. *Clinical Nurse Specialist*, 39(4), 180–184. <https://doi.org/10.1097/NUR.0000000000000904>

The purpose of this article was to evaluate whether continuous transcutaneous carbon dioxide monitoring can improve ventilator weaning for patients with pulmonary comorbidities following cardiopulmonary bypass surgery. By reviewing current evidence, the authors sought to determine whether adopting this technology could enhance clinical decision-making, promote earlier identification of weaning readiness, and ultimately optimize postoperative outcomes for at-risk surgical patients.

## Sharp Nurses in the Media (Publications) – continued

**Salinas, A.** (2026, January 21). Where leadership meets the work: Lessons from my first year as a nurse leader. *American Nurse*. <https://www.myamericannurse.com/where-leadership-meets-the-work-lessons-from-my-first-year-as-a-nurse-leader/>

The purpose of this article is to illustrate how authentic, presence-based leadership, rooted in humility, accountability, and psychological safety, shapes effective nursing leadership beyond traditional management tasks. It aims to highlight how leading from the “Gemba,” engaging in difficult conversations, and fostering trust strengthen team culture and elevate patient care. Additionally, the article underscores the essential role of mentorship in developing both emerging nurses and new leaders as they grow in confidence and capability.

Westhoff, K., **Balestrieri-Martinez, B., Graham, J. K., & Kelley, C.** (2025). Safeguarding the future: Ethical artificial intelligence in healthcare documentation. *Clinical Nurse Specialist*, 39(1), 3–6.

<https://doi.org/10.1097/NUR.0000000000000866>

This article explored the need to ensure that the use of artificial intelligence in healthcare documentation complies with ethical and regulatory guidelines and does not compromise patient privacy or safety.

Zipp, J., Bochner, B., Bowles, W., **Failla, K.**, Joswiak, M.E., Lavender, J., Nelson, D., Shea, D., Smith, S., & Casey, K. Newly licensed RN competency: An analysis of practice setting expectations and perceptions. *Journal for Nurses in Professional Development*. <https://doi.org/10.1097/NND.0000000000001236>

The purpose of this article was to review practices across six US healthcare organizations to identify common approaches to assess clinical competence. The analysis revealed four themes: reliance on national competency frameworks, inconsistent assessment frequency, structured preceptor preparation, and varied validation tools. The findings show variability in assessment processes and underscore the need for standardized frameworks and robust preceptor training to strengthen transition to practice programs and improve newly licensed nurse practice-readiness.

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