Proceedings of the 46th Annual Education Conference "Nursing Nexus: Connecting Passion, Purpose and Progress"

University of the Philippines Nursing Alumni Association International, Inc. (UPNAAI)

Hilton San Diego Airport/ Harbor Island

1960 Harbor Island Dr, San Diego, CA 92101
August 1, 2025

CEU Accreditation
This program is approved for 3.9 contact hours of continuing education by the California Board of Nursing (CA BON), provider number CEP 6961.This activity was planned in accordance with the CA BON Accreditation Standards and Policies.

How to Evaluate and Claim Education Credit
Every attendee must provide an email address upon registration. You will receive an email notification on August, 2025 giving you instructions on how to complete your online podium and poster evaluations. For those who indicated CEU credits on their registration form, you will be able to print your certificates upon completion of both evaluation forms. You have until August 31, 2025 to complete your evaluation and obtain the certificate.

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Overall Conference Objectives

- Define home health care scope of services and skills which may be provided in the home setting
- Explain the different ways on how home health services interrelate with acute care and post-acute care in promoting optimal clinical outcomes, preventing rehospitalization and ER visits, and in providing cost-effective alternatives to care
- Describe how home health care may provide proactive strategies to prevent exacerbation of illness
- List and describe studies which provide evidence of how home health has provided cost savings for patients post-hospitalization and those who were redirected to home health after emergency department visit
- Identify barriers in providing dignity of death and dying among Chinese, Filipino, Indian and Vietnamese patients
- Create an individualized multidisciplinary end of life plan and goals of care
- Use cultural practices and beliefs to engage patients and family members in actively participating in end of life decision making
- Enhance understanding of health insurances and identify health challenges in health insurance coverage

Breakfast Education Conference
Friday, August 1, 2025

Manuela Castillo, MSN, BSN ’86, RN
President, UPNAAI 2023-2025

Moderator: Marilyn Cines, MSN, BSN ’79, RN
1st VP and Chair, UPNAAI Education and Research Committee 2023-2025

Celine Pico, RN, BSN, CAPA
Coordinator, Research Poster Presentation

7:00 AM Registration, Breakfast, Research Poster Presentations, Networking

7:45 AM Welcome Remarks
Manuela Castillo, MSN, BSN ’86, RN

President, UPNAAI 2023-2025

7:50 AM Introduction: 2025 JV Sotejo Medallion of Honor Award
Corazon Reyes, MSN, BSN ’79, RN-BC
Director and Chair, Awards and Citation Committee

8:00 AM Keynote Address
“Strengthening the Nexus of Passion, Purpose, and Progress with Nursing Collaboration”
2025 UPNAAI J. V. Sotejo Medallion of Honor Recipient
Monina Hernandez, PhD(C), MNur(Hons), PGDipHSc, PGCertTT
BSN'92, RN, RM, CGNC, FCNA(NZ), MACN

8:30 AM Introduction of Panel Speakers
Marilyn Cines, MSN, BSN ’79, RN
1st VP and Chair, UPNAAI Education and Research Committee 2023-2025

8:45 AM “Community-based Health Care: The Emerging Key to Cutting Cost and still Achieve Outcomes”
Jocelyn Lobrin Barlaan, MS, BSN'80, APRN
2025 UPNAAI Excellence in Nursing Administration Awardee

9:15 AM “Cancer Care Curiosities: End-of-Life-Care in Asian Communities”
Wendy Vaughn, MSN, BSN'88, RN, CCRN, OCN
2019-2023 1st VP & Chair, Education & Research Committee
President, UPNAA-CA

9:45 AM Break, Exhibits, Networking, Poster Presentations: Celine Pico, BSN’80, RN, CAPA, 2025 Sapphire Jubilarian, Coordinator, Poster Presentations; Rina Gangozo, BSN'92, RN, Director, Recording Secretary & Chair, Sustainability & Viability

10:00 AM “Understanding Health Insurances for Effective Patient Advocacy Leading to Policy and Practice Change”
Jose Abel Larrosa, MSN, PHN, RN-BC, ACM-RN

10:30 AM Panel Discussion and Audience Q&A

11:00 AM Summative Remarks
2025 JVSMOH AWARDEE
Monina Hernandez, PhD(C), MNur(Hons), PGDipHSc, PGCertTT
BSN'92, RN, CGNC,

11:15 AM Evaluation and Closing Remarks
Marilyn Cines, MSN, BSN ’79, RN
1st Vice President & Chair, ERC, Sapphire Jubilarian

11:20 AM UP Naming Mahal anthem

11:22- 1:00 PM Presentation of the certificates of appreciation (Minnie Castillo, MSN, BSN ’86, RN and Marilyn Cines, MSN, BSN ’79, RN) to the speakers and poster presenters and photo- taking occurs thereafter.

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Strengthen the Nexus of Passion, Purpose and Progress with Nursing Collaboration

Monina Hernandez, PhD(C), MNur(Hons), PGDipHSc, PGCertTT
BSN'92, RN, RM, CGNC, FCNA(NZ), MACN
2025 UPNAAI J. V. Sotejo Medallion of Honor Recipient & Keynote Speaker

Final slides_Monina H_Strengthen the nexus of passion, purpose and prog…

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Community-based Health Care: The Emerging Key to Cutting Cost and still Achieve Outcomes

Jocelyn Lobrin Barlaan, MS, BSN'80, APRN
Sapphire Jubilarian
2025 UPNAAI Excellence in Nursing Administration Awardee

ABSTRACT

Community-based Home Health Care:

At the intersection of Acute Care and Post-Acute Care

At the forefront of decreasing overall Healthcare Cost

A. What is HOME HEALTH CARE

1. Definition of home health services
   a. Service setting- in the patient's place of residence
   b. Provided by professional nurses, PT, OT ST, MSW Home health aides
   c. Recipients of care who qualify: homebound patients
   d. Type of services :

   (1) Nursing disease management, medication management, wound care, IV infusion, diabetes teachings, etc

   (2) Therapy: PT OT ST

   Therapeutic Training on balance, gait, strengthening and in safe transfers to assist in activities of daily living

   (3) Medical Social Work

   Assist in long term decision making and planning for alternative resources, setting or placement; assist in connecting with community resources

B. Home Health prevents costly acute hospitalizations and ER

1. Bridging the gap in transitioning from acute illness to recovery in the home
2. PreveProactive and preventive approach to disease management
4. Holistic care: body mind and spirit, all aspects of a patient's care plan
5. Multi-disciplinary care
6. Chronic Care Management with most common diagnoses for rehospitalizations (Heart Failure, COPD, Diabetes, COPD, Pneumonia, CVA)

C. Home Health provides a more cost-effective alternative to acute hospitalization

Hospital without walls

1. Allows for earlier discharge from acute hospitalization or inpatient stay
2. Telemonitoring and telehealth
3. Home health setting for certain interventions such as IV infusion, wound care, diabetes management and education, Physical and Occupational Therapy – rehabilitation at home

4. Sustainable and viable interventions provided in the home provide economic efficiency

5. Enhanced patient satisfaction and improved recovery as patients recover in the comfort and familiarity of “home”.

D. Studies which provide evidence that home health care lead to savings and lower overall cost in health care

1. List of studies which suggest that home health care may lead to substantial savings for patients following hospital discharge.

2. List of studies which suggest that home health care may provide cost savings to patients redirected from Emergency Dept to home health care in lieu of hospital admissions

E. Conclusion

1. Impact of home health care to the overall health care industry in terms of patient clinical outcomes

2. Cost savings and efficiency offered by home health care as alternative to hospitalization or in-patient stay.

Home Health Care.pdf

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Cancer Care Curiosities: End-of-Life-Care in Asian Communities

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Wendy Vaughn, MSN, BSN'88, RN, CCRN, OCN,

2019-2023 1st VP & Chair, Education & Research Committee,
President, UPNAA-CA

ABSTRACT

Objectives:
Learners will be able to:

1. Identify barriers in providing dignity of death and dying among Chinese, Filipino, Indian and Vietnamese patients.
2. Create an individualized multidisciplinary end of life plan and goals of care.
3. Use cultural practices and beliefs to engage patient and family members in actively participating in end of life decision making.

Key milestones in the end of life journey:
1.Receiving the diagnosis
2. Family conference to determine in designating/ Identifying hierarchy of stakeholders in the steps of decision making

UPNAAI End of Life Among Asian Community - Read-Only.pdf

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Understanding Health Insurances for Effective Patient Advocacy Leading to Policy and Practice Change

Jose Abel Larrosa, MSN, PHN, RN-BC, ACM-RN

ABSTRACT

There are 25.3 million people ages 0 to 64 who are uninsured in 2023. The number of uninsured children increased from 3.8 million in 2022 to 4.0 million in 2023. Most uninsured people are in low-income families. Racial and ethnic disparities in coverage persist.
-Tolbert, J. Cervantes, S. Bell, C and Damico A. (2024)

Purpose: Explores the relationship between health insurances and patient advocacy, emphasizing the importance of informed advocacy to drive policy and practice changes in healthcare.
Significance: Effective patient advocacy rooted in a deep understanding of health insurance systems can lead to improved patient outcomes and influence policies that better serve the population.

Objectives:

1. Enhance understanding of health insurances and identify key challenges in health insurance coverage.
2. Empower nurses as patient advocates to promote effective advocacy strategies.
3. Raise awareness of the role of insurance in health equity to drive policy and practice change

2025 Jul LARROSA Understanding Health Insurances copy.pdf

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POSTER PRESENTATIONS

Poster 1

Understanding Health Insurances for Effective Patient Advocacy Leading to Policy and Practice Change

Jose Abel Larrosa, MSN, PHN, RN-BC, ACM-RN
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ABSTRACT

There are 25.3 million people ages 0 to 64 who are uninsured in 2023. The number of uninsured children increased from 3.8 million in 2022 to 4.0 million in 2023. Most uninsured people are in low-income families. Racial and ethnic disparities in coverage persist.
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Poster 2

Training Nurse Supervisors for High-Impact Emergency Support

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ABSTRACT

Nurse Supervisors play a critical role in coordinating emergency responses, yet many receive limited training beyond initial ACLS certification. To strengthen their preparedness, we conducted a focused training initiative aimed at improving their knowledge, confidence, and role clarity during high-stakes events. A focus group of 11 Nurse Supervisors was held during regularly scheduled meetings to identify key gaps and guide curriculum development. Pre- and post-training surveys and descriptive analysis were used to assess progress. So far, 7 of 11 supervisors have completed the training, with full completion anticipated by August. Preliminary feedback indicates improved understanding and readiness. Learning objectives include: (1) describing gaps in emergency response preparedness among Nurse Supervisors, (2) explaining the impact of targeted training on role clarity and confidence, and (3) identifying strategies to sustain and scale the training. Future implications include sharing results with leadership, integrating training biannually, and embedding it into ongoing leadership development.

Learning Objectives:

Participants will be able to:

1. Describe the gaps in emergency response preparation among Nurse Supervisors identified through focus group discussions.
2. Explain the impact of targeted training on Nurse Supervisors' confidence and role clarity during high-stakes emergencies.

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Poster 3

Enhancing Emergency Response: Launching a STAT RN Program for Rapid Clinical Support

Maria Bentain-Melanson, DNP, CCRN
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ABSTRACT

Learning Objectives:

Participants will be able to:

1. Describe the rationale for implementing a STAT RN role to support hospital-wide emergency response and clinical deterioration.

2. Identify operational challenges in existing Code Team structures, including impacts on ICU staffing and hospital growth.

3. Outline the key components of the STAT RN program, including role definition, staffing model, and mock code training.

4. Discuss metrics used to evaluate the effectiveness of the STAT RN program in improving response times, outcomes, and staff support.

5. Apply lessons learned to consider how similar rapid response enhancements could be adapted in other healthcare settings.

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Poster 4

A Culturally Congruent Education Group for Prenatal Care Utilization Among Pacific Islanders: Improving Entry in Prenatal Care and Strengthening Partnerships Among Stakeholders

Jenneth B. Doria, DNP MS RN
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ABSTRACT

An evidence-based intervention to improve prenatal care utilization and birth outcomes among Pacific Islanders was proposed over 10 years ago as a DNP practice change project. The intervention aligned the components of the education group with Pacific Islander values, cultural norms, and practices. These include 1) providing an informal group setting driven by a common faith-based affiliation where women can socialize and learn, 2) providing food and small incentives during learning activities; and 3) inviting Pacific Islander healthcare professionals that the group can relate with and ask questions in a safe and physically and socially comfortable space. It was concluded that a culturally congruent education group could improve birth outcomes for this population that has consistently shown unsatisfactory prenatal care, low birth weights, and pre-term births. However, a recent follow up study revealed that although some data showed increased prenatal care utilization in this group, statistics still indicate that Native Hawaiian/Pacific Islander women entered prenatal care much later or did not even participate at all. The data show that the problem has not significantly improved, thus resulting in unsatisfactory maternal and birth outcomes.

This practice change project aims to improve the original education group intervention by adding components that can drive early entry to prenatal care and reduce poor birth outcomes by using a pre-conceptional approach. This includes women who are thinking of pregnancy and those who are already pregnant. It would also harness the population's preference for group settings by including spouses, mothers, grandmothers, and community leaders. This approach continues to utilize Dr. Leininger's Theory of Culture Care Diversity and Universality by adding on to the original components of the education group with Pacific Islander values, cultural norms and practices. A 15-item self-report questionnaire was used to measure two outcomes: increased knowledge of prenatal care concepts and improved motivation to utilize prenatal care. A pretest and posttest were conducted to measure the knowledge and motivation levels before and after the intervention program. Findings indicated that the education group met the intended outcomes and confirmed certain areas influenced by cultural values.

Inadequate prenatal care reduces opportunities to monitor maternal and child health complications and could lead to poor birth outcomes. It drains the emotional, social and financial capitals of various stakeholders comprised of individuals, families,

communities, healthcare providers & the state as they all deal with the negative outcomes of deficient prenatal care. Enhancing the power of a culturally congruent education group by adding two significant components can improve population-based nursing practice to promote health and mediate healthcare disparities.

Key words: Pacific Islanders, Theory of Culture Care Theory and Universality, prenatal care utilization, birth outcomes

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Poster 5

Addressing the Academic Nurse Educators Shortage:: An Action Plan for Educational Institutions to Promote Health and Equity

Jenneth B. Doria, DNP MS RN
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ABSTRACT

With the nursing shortage plaguing healthcare systems locally and globally, it is critical to identify the reasons why the problem exists and address it strategically from various sectors. Nursing educational institutions represent a critical cluster of stakeholders that play a major role in preparing the future nursing workforce. This goal cannot be met with the steady outflow of academic nurse educators (ANEs). This research aims to explore the reasons that drive the shortage of ANEs and determine how nursing educational institutions can mitigate and strategically resolve such a crisis. The ANE shortage has been cited as a major reason for the markedly decreased capacity to enroll potential students who are capable of joining the nursing workforce. The shortage is attributed to various factors, including the insufficient number of available ANEs to teach a growing scale of students desiring a nursing career, and inadequate

nursing school and clinical resources to meet such demands. The increase in the number of nursing schools as an attempt to meet the demands for a larger nursing workforce has complicated the problem due to the increased competition for available ANEs and clinical practice sites. Hence, the ANE shortage impacts health outcomes and equitable access to healthcare across populations. Nursing educational institutions are at the crux of this burgeoning problem. Using a qualitative paradigm, specifically the nominal group technique, 25 nurse educators recruited from various regions in the U.S. participated in discussion forums to brainstorm the reasons for the ANE shortage. Data were generated to address two research questions, namely, 1) what is the current state of nursing education, and 2) what are the barriers to recruiting and retaining academic nurse educators (ANE)? Responses were organized into various categories or themes, and further discussed and prioritized until the participants arrived at a consensus of recurring themes in response to the research questions. The findings of the research include 1) recognizing the specialized education, skills, and knowledge required of ANE within the realm of advanced nursing; 2) standardization of benefits and compensation aligned with those in clinical practice; 3) consistent provision of formal orientation and mentorship for newly hired ANE; 4) promoting awareness and dissemination of available funding to students in nurse educator programs; 5) targeting pedagogically-trained ANEs for faculty positions; 6) motivating faculty to participate in recruitment efforts; 7) nurturing faculty confidence; and 8) valuing the Doctorate in Nursing Education. Myriad findings from this study reveal that the shortage of ANEs can be mediated by educational institutions themselves through a solid action plan that leverages the role of ANEs as equal partners in preparing a competent nursing workforce. The initiatives generated from this research can bolster the capacity to meet the demands of healthcare systems and the needs of various patient populations requiring a

diversified nursing workforce as more students get admitted in nursing programs because of increased ANE availability. Promotion of health and equity is a natural outcome of an increased nursing workforce that can bridge healthcare gaps across populations.

Keywords: Nursing shortage, educational institutions, action plan, nursing workforce

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Poster 6

Organizational Interventions to Prevent Nurse Burnout

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ABSTRACT

Nurse burnout is a well-studied syndrome. There is evidence supporting the negative impact of burnout on the quality of patient care and the QOL of nurses. Inadequate nurse-to-patient ratios, bullying, and perceived lack of support from leadership are risk factors for burnout. Burnout is characterized by emotional exhaustion, depersonalization, and lack of personal achievement. It is implicated in the increased number of nurses abandoning the medical field thereby exacerbating the nursing global shortage. The CoVid-19 pandemic has further exacerbated stressors within healthcare environments. Psychological capital is a multidimensional construct that includes the psychological resources of hope, efficacy, resilience, and optimism. After the pandemic, efforts from health care organizations acknowledging the importance of mental health and the concept of resilience among frontline health care workers became palpable. Continued systems-level support and investment on these psychological resources and organizational changes may be more effective in mitigating nurse burnout than focusing on nurses' individual coping strategies alone.

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Poster 7

A Literature Review on Culinary Medicine Education on Nurses

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ABSTRACT

Culinary medicine has been identified as an effective intervention to manage chronic diseases that can be managed through lifestyle and dietary interventions. It is being taught in schools and communities, both virtually and in-person. However, there is limited evidence regarding its impact and penetration in the nursing sector. This literature review seeks to assess the current evidence and impact of culinary medicine education in nurses to aid in creating an open-access online platform that will deliver a culinary medicine immersive experience specifically designed for nurses, with nurses, and by nurses.

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Poster 8

Hi! I'm Your Consolidation Buddy

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ABSTRACT

The Post Anesthesia Care Unit (PACU) at Cedars-Sinai Medical Center (Los Angeles, California) consists of five separate PACUs, four of which combine into a 24-hour PACU in the evening. The consolidation process was identified as a source of stress for nursing staff, leading to decreased staff satisfaction which can potentially impact patient care. Developing an effective consolidation strategy is essential to enhance both patient and staff experience.
Staff survey feedback was developed to identify the cause of stress and dissatisfaction.
Based on survey results, the role of the consolidation buddy was developed. The consolidation buddies were trained to collaborate with Triage RN and Charge RN as well as assist with admissions, discharges and transfers of patients.
Post- implementation survey results showed an increase in staff satisfaction regarding the team approach to nursing care from 55% to 80%. Anecdotal evidence from staff further supports these findings

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Poster 9

Preventing Self-Harm and Suicide in Patients with Borderline Personality Disorder

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ABSTRACT

Borderline personality disorder (BPD) presents a critical global mental health concern due to its strong association with self-harm and suicide. Despite its high risk, evidence-based interventions like dialectical behavior therapy (DBT) remain underutilized, especially in emergency and low-resource settings. This project proposes a multi-site randomized trial comparing DBT and cognitive behavioral therapy (CBT) across diverse U.S. populations. DBT is expected to significantly reduce self-harm behaviors, suicide attempts, and hospitalizations while improving emotional regulation and patient outcomes. Grounded in the values of compassionate, evidence-based nursing care, this initiative advocates for DBT training among nurses to enhance trauma-informed psychiatric response, reduce systemic burden, and empower nurse leaders globally. Aligned with the mission of UP alumni to lead transformative healthcare initiatives, this project demonstrates how Filipino nursing leadership can champion mental health equity and innovation in clinical practice worldwide.

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Poster 10

The Importance of Nurse-Provided Education in Preventing Postpartum Depression

Mariel Erissa Medina Alba, BS Biology

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ABSTRACT

Background

Postpartum Depression (PPD) is the most common mental health issue negatively affecting mothers after childbirth, her partner and child as well. (Wang et al., 2021)

According to a 2023 Centers for Disease Control and Prevention (CDC) study, 1 in 8 women in the United States reported symptoms of PPD, and 1 in 10 women had a major depressive episode within a year of giving birth. Globally, about 17.2% of mothers experience PPD.

Objective

PPD has long been a critical clinical concern, and numerous evidence-based research highlights how targeted education can help prevent it. This project aims to reduce the risk of PPD with the help of nurses providing education to their patients and support person.

Many mothers leave the hospital without the knowledge they need to identify PPD, which makes it difficult for them to gain early access to resources.

Methodology

Within 24 hours of newborn delivery and prior to discharge, nurses will provide standardized education on PPD – including early signs and symptoms, prevention strategies, and referral options – to 100% of postpartum mothers and their designated support persons, with the goal of reducing PPD onset.

The appropriate study design for this project is to assess the effectiveness of nurses providing education to both patients and support persons.

To do this, a Plan-Do-Study-Act (PDSA) method can be used. In this method, the plan is to design an intervention consisting of a printed information sheet detailing early signs of PPD, steps to take in case symptoms appear, and emergency resources to be delivered by nurses during discharge education. In the “do” stage, the intervention is to be implemented by including the information sheet in discharge folders and having the nurses educate the patient and support person during the discharge. The nurses are to complete a post-intervention survey about their experience, the content of the sheet and how prepared they feel for the patients and their support persons. In the “study” stages, the post-intervention data is collected using a survey that includes both qualitative and quantitative questions. This survey measures the effectiveness of the intervention,

including its ease in implementation, how frequently it was used, and how useful it was expected. The “act” stage involves the nurses being trained to use the sheet. The study will rely on pre-intervention interviews by nurses to assess any existing discharge education practices and knowledge gaps regarding PPD, and post-intervention surveys to evaluate the effectiveness of the tool.

Expected Outcomes and Implications

The expected outcome for this project is for nurses to deliver the discharge education on PPD effectively and determine the patient’s readiness and satisfaction with the education to prevent, recognize PPD onset, and know what to do in the event it starts.

Conclusion

This project highlights a targeted, evidence-based approach to improve maternal mental health outcomes through enhanced nurse-led education at hospital discharge that can significantly impact patient’s preparedness, safety, and long-term outcomes integrating into practice.

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Poster 11

Phenomenological Study of the Lived Experience of New Graduate Nurses Caring for Hospitalized Patients Living with Dementia.

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ABSTRACT

Purpose. This study explored new graduate nurses’ lived experiences in caring for hospitalized patients living with dementia.

Background. The first twelve months of transitioning from student to professional nurse in acute care settings are the most stressful, emotionally challenging, and mentally exhausting for new nurses striving to apply newly acquired skills into practice. Some of the most challenging patients for nurses to care for are hospitalized patients living with dementia (PtLWD). With the projected increase in the number of patients with dementia in hospitals, it is imperative to understand the challenges nurses face when providing safe and effective care to PtLWD.

Methods. Using the hermeneutic phenomenology approach, as influenced by Heidegger and Gadamer, eleven new graduate nurses were recruited from a hospital in southern California. The lived experience of each participant was collected through remotely conducted semi-structured interviews and by using open-ended questions. Transcribed interviews were read and analyzed using the Braun and Clarke's (2006) linear, 6-phased method, to interpret meanings and arrive at an understanding of the essence of the participants' lived experiences.

Findings. The thematic analysis yielded nine overall themes addressing two lines of inquiry. The themes discovered in the first line of inquiry included protecting patient's universal rights, ensuring patient safety and well-being, complex care delivery experience, fostering therapeutic nurse-patient relationship, nurse's positive adaptation and role transition. In the second line of inquiry, the themes included preservation of human connections, feeling inadequate and experiencing personal distress. The themes were analyzed over time and articulated into a cogent phenomenological lived experience.

Implications for Research. Study findings suggest that further research is needed to establish a better onboarding process among new graduate nurses caring for hospitalized PtLWD and support the need to initiate advanced care planning as soon as the diagnosis of dementia is identified. This study contributes to the body of knowledge by providing deeper meaning and purpose, enhancing understanding of the new graduate nurses' roles, and recognizing their feeling as they provide care to hospitalized PtLWD.

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Poster 12

Impact of Hypertension in Chronic Kidney Disease Among Adult Veterans.

Judy Enriquez Santelices, RN, BSN

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ABSTRACT

Objectives:

1.To discuss the effect and management of high blood pressure (BP) in chronic kidney disease (CKD).
2. To discuss recommendations of standardizing office BP measurement and targeting a Systolic BP of less than 120 mm Hg of CKD patients not receiving dialysis.
De Bhailis, Á. M., & Kalra, P. A. (2022).

3. To advocate that health literacy has a direct influence on outcomes in CKD.

Summary of evidence:

Hypertension is a common finding in individuals with chronic kidney disease (CKD), afflicting 65% to 85% of patients and increasing as kidney function declines **(Hebert et al., 2022).**

Hypertension and CKD are closely intertwined conditions as hypertension can lead to deteriorating renal function and progressive CKD can contribute to worsening hypertension **(De Bhailis et al., 2022).**

Description of practice or protocol

Management of BP in CKD in non-dialysis patients recommends systematically using standardized office BP measurement and targeting an SBP of less than 120 mm Hg **(Tomson et al., 2021).**

The **National Institute for Health and Care Excellence (2022)** draft CKD guidelines suggest a more conservative BP target of <140/90 mmHg provided the urine albumin: creatinine ratio is <70 mg/mol. In those with CKD and urine albumin: creatinine >70 mg/mol they suggest a target BP of <130/80 mmHg. **(Pugh et al., 2019).**

Advocating health literacy among nurses and Primary Care Providers (PCPs) in VA with the current recommended BP target may prevent the worsening of kidney function.

Validation of Evidence / Method of Evaluation

Finding evidence-based sources to answer the PICOT question, Medline, PubMed databases, clinical trials, meta-analyses, practice guidelines, and systematic reviews with search terms including CKD, chronic renal failure, hypertension, and non-pharmacological for 5 years with initial search resulted in 11,426 articles, were used in investigating the impact of HTN in CKD.

Control of hypertension is important in those with CKD as it leads to slowing of disease progression as well as reduced Cardiovascular Disease (CVD) risk.
Non-pharmacological interventions are useful in reducing BP in CKD but are rarely sufficient to control BP adequately. A personalized and evidence-based management plan remains key to achieving BP targets, reducing CVD risk, and slowing progression of CKD **(Pugh et al., 2019).**

Pre and post questionnaires for VA nurses and PCPs will be provided during the implementation to validate the effectives of non-pharmacological interventions to determine the changes in blood pressure readings.

Relevance to Nursing

There is a growing body of evidence to suggest that health literacy has a direct influence on outcomes in CKD. Encouraging shared decision-making and patient involvement wherever possible might be a useful first step **(Pugh et al., 2019).**

An understanding of lowering BP in CKD may slow the disease progression and reduces incident in CVD.

One size does not fit all, therefore, and an appreciation of what is achievable with BP reduction in CKD is key to making informed, individualized decisions **(Pugh et al., 2019).**

Future implications

Hypertension is an equally significant global problem and remains one of the most important preventable causes of mortality worldwide with the prevalence expected to rise to 1.56 billion by 2025 (Law et al., 2023).

Management and treatment of HTN in CKD aimed for preservation of existing kidney function, reduction of CKD risks, prevention of complications, and promotion of the patient's comfort.

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Poster 13

Falling Behind: Why Our Precautions Aren't Enough in Emergency Department

JORDANNA CULVER, RN
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ABSTRACT

In reviewing fall data from the UCSD La Jolla Emergency Department, I noticed that even with standard fall precautions being in place, patients were still falling at a rate higher than similar hospitals. More than half of the falls in Q4 2024 happened while patients were going to or using the toilet. After analyzing this pattern, I created recommendations focused on toileting-related fall prevention, like offering bedside commodes or urinary diversion devices depending on the patient's needs/age. Although I wasn't able to implement these changes as a student, I shared my findings with management and the fall prevention committee so they can decide how best to move forward. This project highlights the importance of looking deeper into patterns to find a solution, even when precautions appear to be followed.

Learning Objective: Identify toileting-related activities as a high-risk factor for patient falls in the Emergency Department and identify interventions that can be tried to reduce those falls, even when standard fall precautions are already being used.

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Poster 14

Falling Behind: Why Our Precautions Aren't Enough in Emergency Department

Franco Jay Bernardo Gabriel, ADN, SN
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ABSTRACT

The National Early Warning Score 2 (NEWS2) is an early warning system (EWS) meant to detect early manifestations of clinical deterioration to prompt a timely response. An implementation project was planned, but not carried out, on a unit caring for cancer, transplant, and palliative care patients who, due to the nature of their illnesses and treatments, are at high risk of sepsis. The combination of their risk of sepsis and complex medical history had deemed an implementation project revolving around early detection of deterioration as one that can improve care provided to this population, with NEWS2 chosen for this project.

Learning Objectives:

- Describe the purpose and importance of an EWS
- Explain what a NEWS2 score is and how it can be used to guide teams in patient care
- Identify the components used by NEWS2 to calculate NEWS2 scores
- Identify different pros and cons regarding the utilization of N