Maria Cielo Borrinaga, MSN, RN-BC, CNL, CCRN
Registered Nurse
VA Dallas Medical Center

I Have the CNL Power – CNL Category

After almost 28 years working at the bedside, I finally went back to school and became a certified Clinical Nurse Leader. When I first started on this role, it was quite different from what I am used to, it was like stepping out of my comfort zone as a regular nurse. But then I learned that I am now in the driver seat making clinical decisions and leading my team to evidence based practice and quality care. I feel I am more empowered than before and have a voice to advocate for our patients and be a catalyst for change.

On September 2019, before the height of the Covid-19 pandemic, I led a study in engaging nurses in providing oral care at least twice a day in the prevention of non-ventilator associated pneumonia on two of the busiest medical surgical units at the Dallas VA. This was a collaborative effort among nurses, physicians, educators, dental and infection control department and logistics. I also worked with vendors in customizing our oral care kits ensuring each product is approved by the American Dental Association. Some might think that a simple and basic oral care may not have a huge impact on patient care, but it surely does. Studies show that aspiration of oropharyngeal secretions is a significant pathological event preceding hospital associated pneumonia. Silent aspiration is more profound in our elderly and neurologically impaired patient population. For this reason, providing good oral hygiene at least twice a day prevents that pathological event leading to non-ventilator associated pneumonia.

Pre data shows three non-ventilator associated pneumonia (NVHAP) cases which equate to approximately 40,000 dollars in hospital expenses for each incidence and 6 days more in hospital stay. I did retrospective chart reviews of ICD Code 10 for Pneumonia and compare it with the CDC criteria for non-ventilator associated pneumonia. There was one case during the pilot study. In December 2019, after the 3-month pilot study, our data shows zero incidence up to one year even at the height of the Covid-19 pandemic. One of the two medical surgical units I am overseeing was even converted to a COVID-19 unit for overflows. This project proved its significance, positive outcomes, and sustainability during this challenging times. Early studies show the likelihood of having a secondary bacterial pneumonia following the initial phase of the Covid-19 infection or it can occur even during the recovery phase. I attribute the success of this program to the hard work and commitment of the nursing staff despite the risks of this novel virus. With this project alone it saved my two units at least $160,000 and 24 days less in hospital stays. This project has been spread out to other units and became hospital wide.

During this pandemic, I work closely with nursing staff to help them develop emotional intelligence and critical thinking to help them make good clinical decisions and also by helping them cope with stress during these challenges. I also helped our unit educators in providing education on preventing the spread of this novel virus and also to prevent fear and misconceptions.

As a CNL, we tend to think outside the box and have a natural flair for innovation. Between July to October 2020, I had the opportunity to participate in the Covid 19 Maker challenge. It is a series of five COVID-19 Maker Challenge events that brought innovators from across the country together for make-a-thons to develop solutions to the most pressing problems brought on by the pandemic. I participated in two events and my team won in both with Most Innovative Award and the Grand Prize. In collaboration with other highly skilled professionals such as software and hardware engineers, graphic artists and in healthcare, my team created a portable ventilator which has all the features of a full-scale ventilator at a fraction of the cost. I am looking forward in getting this project for the Veterans Affairs Shark tank to where it can be patented, and mass produced to be readily available to solve the ventilator shortage around the globe.