

# Melissa Rouse, APRN, PhD, CNS-BC, NEA-BC, CENP, CPHQ

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## EXECUTIVE PROFILE

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Results oriented, dynamic, effective and highly visible Nurse Leader with a strategic mindset, proven to perform under pressure. Experienced in working collaboratively with organizational leaders, physicians, interdisciplinary partners and staff in fast-paced and high acuity academic healthcare organizations. Able to build and retain high performance teams by developing, mentoring and motivating skilled professionals. Focused on providing patient-centered care, advancing Professional Nursing Practice and building high reliability organizations. Adept at identifying and prioritizing, with successful implementation of projects and programs. Proven track record of organizational culture change, utilizing change management skills and emotional intelligence. Experienced in design, planning and opening of hospitals. Experienced in addressing workforce challenges. Experienced in academia at levels ranging from Refresher to Doctoral Degree.

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## SKILL HIGHLIGHTS

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- Leadership/Communication
- Operations/Budget Management
- Staff/Team Development
- Critical/Innovative Thinker
- Move and Transition Planning & Execution
- Quality/Performance Improvement
- Service Excellence
- Project Management
- Strategic Planning
- Culture Change Leadership
- Collaboration
- EHR Development
- Shared Governance
- Problem Solving
- Regulatory/Risk Management

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## LEADERSHIP EXPERIENCE

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### **NORTHEAST GEORGIA HEALTH SYSTEM Gainesville, GA** **Executive Director Nursing Excellence & Research**

**6/21 – Present**

Responsible for planning, directing and evaluating nursing, clinical and general education. Directs a team of managers and education specialists in the provision of continuous development and learning activities for staff and patients. Oversight of nursing professional practice, nursing research and innovation, nursing education, nurse residency program, professional governance and professional development. Ensures care is evidence based, cost effective and of the highest quality. Maintains excellent relationships with nursing affiliations and schools and represents the organization on advisory boards and commissions. Responsible for Pandemic Partner Program to support bedside staff during the Pandemic. Responsible for Clinical Pipeline Development to meet workforce needs now and in the future through implementation of Team Based Care model. Developed PCT Advancement program, LPN Advancement program, LPN Transition to Practice Residency Program, lowered hiring age to 16 and created Patient Care Tech Assistant role.

### **CHI ST. LUKE'S HEALTH**

**Houston, TX**

#### **Division Vice President Nursing Practice, Education & Research**

**8/16 to 7/20**

**Retitled: Division Director Nursing Clinical Practice**

**7/20 to 6/21**

#### **BAYLOR ST. LUKE'S MEDICAL CENTER Houston, TX**

#### **Vice President Patient Care Services– Critical Care (2<sup>nd</sup> role)**

**6/19 to 1/21**

Division VP Nursing Practice, Education & Research/Retitled – Division Director Nursing Clinical Practice:

Responsible for the oversight of nursing professional practice; nursing research and innovation; and nursing professional education and development across all (16) CHI Texas Division hospitals. Oversight of evidence-based nursing practice; promoted advancement of cost-effective, high quality patient care and services through utilization of a variety of research, analytical, and problem-solving technologies. Oversight of competency-based educational programming for nursing and patient education. Oversight of Division Education budget as well as Magnet Program, Nursing Research, Diabetes Program, Wound Care, Palliative Care, Center for Advanced Clinical Practice, Integrative Medicine and the American Heart Training Program. Responsible for academic affiliations, student externships, scholarships, the Simulation Lab, and the New Grad Residency Program.

VP of Patient Care Services- Critical Care: Serves at the executive level providing leadership in the delivery of

nursing care, treatment, and services. Has direct line authority for patient care units to include 9 critical care units with 9 direct reports. Has the primary responsibility for ensuring clinical patient care standards are achieved in a cost-effective manner. Has the responsibility and authority for meeting the bottom lines of quality and financial performance for the areas of accountability. Oversight of Respiratory Care, Sleep Lab and Auxiliary services department.

- Labor/Productivity Management of 7 departments (with 28 direct reports) and \$6M budget as Division VP and 9 ICUs, 1 IMU and 1 PCU, Respiratory Care, Sleep Lab and Auxiliary services (with 13 direct reports) as VP of Patient Care.
- Chair of Commonspirit Health Nursing Clinical Education Council working to standardize education across the 140 hospital enterprise. Chair of National Competency Workgroup.
- Developed Doctoral scholarship program in collaboration with Foundation (2021).
- Implemented Student Nurse Intern Program (2021).
- Redesigned and implemented an ICU mobility program (2020).
- Launched Critical Care Fellowship Program for Baylor St. Luke's Medical Center (2020).
- Opened 5 COVID ICUs and a COVID IMU (2020).
- Upskilled procedural nurses and implemented team based nursing in IMU and ICU to care for COVID surge (2020).
- Implemented team-based nursing model for ICU and IMU to address COVID surge (2020).
- Reduced Agency Nurse Utilization and Incremental Overtime (2020).
- Improved ICU Patient Experience scores to 95% composite in Press Ganey (2020).
- Implemented standardized processes and simulation event to increase bundle compliance for CAUTI and CLABSI Prevention (2020).
- Established division wide Academic Affiliations to support Nursing Clinicals at all levels within the Texas Division (2019).
- Standardized Multidisciplinary Rounds for the ICUs with focus on reducing Length of Stay and readmissions (2019).
- Integral to Regulatory Readiness, Action Planning and Implementation for DNV, CMS and CLIA surveys, working hand-in-hand with BSLMC SVP/CNO and VPs of Patient Care (2019).
- Oversight of shared governance, Magnet and Pathways to Excellence for the division. Successfully achieved 5<sup>th</sup> Magnet Designation for Baylor St. Luke's Medical Center (2019).
- Designed and Opened a State-of-the-Art Simulation lab with \$1.5 M endowment from donors (2019).
- Proven track record for cost saving initiatives – Transitioned BSLMC Integrative Medicine Program from hourly contractors to unpaid contractors; providing needed patient services at a cost savings to the organization of \$130K/year & Identified and discontinued a monthly stipend being auto paid for a service no longer provided to BSLMC at a cost savings of \$420K/year (2019).
- Integral in the development of the Texas Division Nursing Strategic Plan FY2019-2021.
- Spearheaded a Leadership Development Program for Nursing Leaders in the CHI Texas Division (2018).
- Worked collaboratively with BSLMC leadership and Academic leaders at Baylor College of Medicine to prepare for the CLER program survey (2018).
- Developed and implemented a Differentiated Nursing Practice Model and Professional Enhancement Program across the Texas Division (2018).
- Executive Operational Leader for successful Epic Version 2015 Upgrade and 2018 Upgrade. Oversight of super user program with 460 super users (2018).
- Executive sponsor of EMR downtime readiness and recovery process (2018).
- Launched workforce initiative between CHI and United Way THRIVE to train the local underserved as Certified Nursing Assistants with a goal of hiring them as PCAs across the division (2018).
- Achieved Practice Transition Accreditation Program (PTAP) through ANCC for BSLMC New Grad Residency Program (2018).
- Created a 1-year Nurse Residency Program and standardized across 18 hospitals (2017).
- Standardized nursing orientation and nursing assistant content across 18 hospitals (2017).
- Launched a Standardized Charge Nurse and Preceptor Development Program across 17 hospitals (2017).
- Implemented standardized assessment testing and competency model across the division (2017)
- Nurse Scientist for Nursing Research Fellowship and RN voting member on National CHI IRB (2016 to present).

- Involved in design and planning of McNair campus with focus on Education and Simulation space (2016 to present).

**NORTHSIDE HOSPITAL**                      **St. Petersburg, FL**                      **2015 - 2016**  
**Assistant Chief Nursing Officer**                      **(4/15 to 8/16)**  
**Interim Chief Nursing Officer**                      **(7/15 to 10/15)**  
**Interim Director NICU and Neurosurgery Unit (5/15 to 10/15)**

Organization wide operational oversight of standards of nursing practice, nursing policies and procedures in an Academic Medical Center. In collaboration with the Chief Nursing Officer and Chief Executive Officer, developed and implemented systems, and program plans to provide integrated services.

Oversight of nursing department - 300 RNs and 100 CNAs, 10 Nursing Directors and 6 Administrative Nursing Supervisors.

- Collaborated with medical staff and senior leadership to implement key growth strategies resulting in 13% EBITDA growth 2015 YTD.
- HCAHPS score improvement from 1Q15 56.8 to 4Q15 70.1. Achieved improvement by 11% in ED patient experience scores, by 21% in inpatient and 10% in Outpatient through establishing Hospital mission statement, core values, non-negotiables and implementation of a variety of customer service driven services such as valet parking, front lobby coffee shop and room service. Implemented nurse leader rounding, hourly rounding and employee rounding.
- Employee engagement scores improved by 7% overall to a total score of 74%. Improved 13% in 'Senior leaders are available and approachable', 9% in 'Senior leaders give a clear picture of the future', 15% in 'Our facility has an inspiring vision', 12% in 'Senior leaders follow through and do what they say they will do', 8% in 'Employees are treated with respect' and 16% in "My facility is a place where differences are valued".
- Worked collaboratively with CEO, CFO and CMO to develop and present Nursing material for monthly MORs with National Corporate Office.
- Developed and presented Nursing reports to the Medical Executive Committee and Board of Directors.
- Executive Champion for multidisciplinary team to implement Level 4 Hospice Program and Palliative Care.
- Developed and launched staffing grids and every 4-hour flex plan for nursing improving productivity.
- Improved throughput out of the ED by implementing dedicated ED transporter, lab specimen notification for suspected isolation patients, bed board accountability, and house-wide ED surge protocol.
- Initiated shared governance council structure to improve clinical practice issues and reduce C-Diff and CLABSI rates and improve core measure compliance.
- Implemented evidence based practices to reduce falls with injury to zero for 4 months YTD.
- Dyad partner with GME Medical Director to improve RN/Resident communication and collaboration by implementing monthly newsletter, weekly huddles and bedside rounds.
- Implemented multidisciplinary rounds (MDRs) on each unit biweekly to improve throughput, reduce LOS and reduce readmissions.
- Successfully led nursing through DNV and Florida Department of Health Survey.
- Led recovery efforts after extended Meditech EMR downtime.
- Implemented "Healing comes from the HEART" model to influence organizational culture change.

**PALOMAR HEALTH**                      **Escondido, CA**                      **2003 - 2015**  
**Director of Nursing Practice and Research (2014 – 2015)**

Responsible for 18 FTEs, budget of \$3.5 million, peer review, Nursing Collaborative Leadership/Shared Governance Structure, research, evidence-based practice (EBP), grants, nursing competencies and education and New Grad RN Residency Program.

- Led multidisciplinary team to create processes and strategies to increase Value Based Purchasing Core Measure scores resulting in 200% increase.
- Oversight of 100% concurrent audits followed by education highlighting alternatives to restraint use resulting in 50% decrease in restraint use at Pomerado Hospital.

- Developed process and supervised staff to identify and overcome barriers related to medication scanning resulting in increased scanning compliance rate of 96.2%.
- Oversight of 27 research studies and 39 EBP/QI projects.
- Nursing Strategic Initiative owner focused on recertification of TJC Diabetes Center of Excellence, Stroke Center of Excellence and Trauma - Recertified in Diabetes Care 12/14.
- Executive oversight of operations during 2014 California Wildfires.
- Created a culture of accountability around mandatory education.

### ***Director of Nursing and Interprofessional Education (2013 - 2014)***

Responsible for 10 FTEs, budget of \$3 million, academics, nursing orientation, American Heart Association Training Center, New Grad RN Residency Program, research and evidence-based practice, policies and procedures, supply utilization oversight. Member of the Nurse Executive Team and peer to Chief Nursing Officers; reporting to the System Chief Nurse Executive.

- Created a competency based education process to ensure 100% staff compliance.
- Designed and implemented over 30 online education/competency modules in FY14.
- Expanded the American Heart Association Program, which increased departmental revenue by \$29,000 in FY14 and \$13,000 in FY15.
- Saved organization \$165,000 by changing supply vendors and renegotiating contracts.
- Recruited and retained 25 new grads through a New Grad RN Residency Program.

### ***Clinical Nurse Specialist - Quality and Patient Safety (2011 – 2013)***

Accountable for core measure and regulatory readiness and compliance, Root Cause Analyses, Failure Mode and Effects Analyses and Electronic Health Record enhancements to support core measures. Created and implemented Electronic Health Record processes for tracking Emergency Department throughput times, stroke compliance and DVT prevention protocols. Assisted with many successful unannounced regulatory surveys.

- Involved in design and planning for new hospital.
- Designed and implemented readiness testing scenarios to test and ensure functionality of new equipment, workflows and processes prior to moving existing hospital into new 288 bed acute care facility.
- Safely transferred 100 patients 10 miles away, into the new facility.
- Reduced IV needle sticks due to improper use by 100% after implementing product change and in-service rounds.
- Led multidisciplinary team focused on core measure compliance and decreasing 30-day readmissions for patients with Heart Failure.
- Created an influenza and pneumonia vaccination process that improved compliance by 15%.
- Obtained CPHQ and HACP certifications.

### ***Clinical Nurse Specialist, Emergency Department (2008 – 2011)***

Responsible for the quality of patient care in the Emergency Department, policies and procedures, evidence-based practice, performance improvement, disaster preparedness, mentor program, ED New Grad RN Program and regulatory readiness.

- Wrote sections for Magnet application documentation packet, which led to Magnet designation in 2009.
- Co-investigator for Prediabetes research study, which led providers to change their practice for informing and referring patients with elevated blood glucose levels.
- Co-Chair of Cardiac Best Practice Team with 100% core measure compliance for Acute MI, and 93% compliance for Heart Failure.
- Developed orientation programs, didactic presentations and clinical mentoring for novice to expert practitioners with recruitment and retention of 20 ED new grad RNs.

### ***Scholar-In-Residence, Emergency Department - Clinical Nurse Specialist (2005 – 2008)***

### ***Nursing Supervisor, Emergency Department and Trauma Center (2003 – 2005)***

**SHARP GROSSMONT HOSPITAL**      **La Mesa, CA**      **2002 - 2003**  
*Lead Clinical Nurse, Emergency Department*

**SHARP MEMORIAL HOSPITAL**      **San Diego, CA**      **1996 – 2002**  
*Lead Clinical Nurse, Emergency Department and Trauma Center (2000 - 2002)*

*Clinical Nurse, Emergency Department and Trauma Center (1996 – 2000)*

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## **ACADEMIA**

**University of North Georgia**      **Dahlonega, GA**      **2022-**  
Adjunct Faculty DNP program  
Dissertation committee (Chair and Member)

**Walden University**  
**Contributing Faculty**      **Minneapolis, MN**      **2018 - Present**  
Faculty for Online Nursing Doctoral Program (PhD & DNP)  
Dissertation committee (Chair, Member and University Research Reviewer)  
Online teaching via Blackboard

**California State University, San Marcos**  
**Lecturer – School of Nursing**      **San Marcos, CA**      **2009 - 2022**  
Faculty for online RN to BSN program  
Online teaching via Moodle and Canvas  
Lead Faculty for Nurse Refresher program (Didactic and Clinical)

**Penn State World Campus**  
**Faculty – School of Nursing**      **University Park, PA**      **2015 - 2016**  
Faculty for online MSN program  
Online teaching via Angel

**University of San Diego**      **San Diego, CA**      **2012 - 2015**  
**Adjunct Faculty – Medical Surgical Course Lead**  
Lead faculty for Medical Surgical Clinical coursework and Instructors  
Didactic instructor - Medical Surgical 1 and 2 courses  
Oversight of 6 clinical instructors

**SDSU School of Nursing**      **San Diego, CA**      **2009 - 2015**  
**Clinical Instructor – Clinical Nurse Specialist Program**  
Responsible for clinical oversight of students pursuing a Master of Science in Nursing as a  
Clinical Nurse Specialist.  
Online teaching via Blackboard

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## **EDUCATION**

**Doctor of Philosophy in Nursing**      **2010 - 2013**  
*University of San Diego, Hahn School of Nursing, San Diego, CA*

**Master of Science in Nursing**      **2005 - 2008**  
*University of San Diego, Hahn School of Nursing, San Diego, CA*

**Bachelor of Science in Nursing**      **1992 - 1996**  
*San Diego State University, School of Nursing, San Diego, CA*  
Melissa D. Rouse APRN, PhD, CNS-BC, NEA-BC, CENP, CPHQ

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## CREDENTIALS

- Georgia Registered Nurse, #RN307266
- Florida APRN, #9397983
- California Registered Nurse, #522935
- California Clinical Nurse Specialist, #2994
- Basic Life Support – C (**BLS-C**)

## ORGANIZATIONAL MEMBERSHIPS

- WomenSource Member

## CERTIFICATIONS/AWARDS

- Nurse Executive Advanced (**NEA-BC**)
- Certified Executive of Nursing Practice (**CENP**)
- Clinical Nurse Specialist Core (**CNS-BC**)
- Certified Professional in Healthcare Quality (**CPHQ**)
- Friends of Nursing Foundation – Baylor St. Luke’s - Grant funding \$1.5 M (2019)
- Texas Nurses Association – District 9 - Outstanding Performance in Nursing Award (2017)
- Sigma Theta Tau New Researcher – Award Recipient (2012)
- American Association of Critical Care Nurses Research Grant (2010)
- Sigma Theta Tau Nursing Honor Society, Zeta-Mu Chapter, (Inducted 2007)

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## PUBLICATIONS

Rouse, M.D., Shoemaker, L.K., Kyle, P., Tenold, C, Anthony, W., & White, J. (2022). Caring for the caregiver during COVID-19 suspended visitation. *Patient Experience Journal*.

Rouse, M. & Christy, L. (pending). Meeting the environmental and staffing demands of the COVID-19 pandemic. *Journal for Nurses in Professional Development*.

Rouse, M., Fischer, M., Jordan, J., Britt, J., Pipkins, T., Bundage, D., Bordelon, J, & Al Mohajer, M., (pending). Implementing immediate hospital-wide personal protective equipment training & validation – A multidisciplinary approach to quality improvement. *Journal of Nursing Professional Development*.

Gecomo, J.G. & Rouse, M. (2020). Implementation of an evidence-based electronic health record (EHR) downtime readiness and recovery plan. *Online Journal of Nursing Informatics Contributors*. 24(1). Retrieved from <https://www.himss.org/resources/implementation-evidence-based-edelectronic-health-record-ehr-downtime-readiness-and>.

## PROFESSIONAL ORGANIZATIONS

- Association of Nursing Professional Development (ANPD) National and Houston Affiliate
  - President Elect 2021
  - Community Outreach Director 2018-2020
- Association of Nursing Professional Development (ANPD) Northeast Georgia Affiliate
  - Outreach Director 2022
- Georgia Nurses Association
- American Nurses Association
- American Organization of Nurse Leaders

Rouse, M.D., Close, J., Prante, C., & Boyd, S. (2014). Implementation of the Humpty Dumpty Falls Scale. A Quality Improvement Project. *Journal of Emergency Nursing*. 40(2), 181-186.

Rouse, M.D. & Shoukry, C. (2014). Elevated Blood Glucose Levels in the Emergency Department: Missed Opportunities. *Journal of Emergency Nursing*. 40(4), 311-316.

Barnett, J., Dennis-Rouse, M., & Martinez, V. (2008). Wildfire Disaster Leads to Facilities Evacuation. *Orthopaedic Nursing Journal*. 28(1), 17-20.

Dennis-Rouse, M.D. & Davidson, J.E. (2008). An Evidence-Based Evaluation of Tracheostomy Care Practices. *Critical Care Nursing Quarterly*. 31(2), 150-160.

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## RESEARCH PROJECTS

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Williamson, B., Rouse, M., & Carrega, J. Morse Fall Scale (MFS) Score Most Predictive of High Fall Risk: A Retrospective Review (2022)

Study In Progress

Role: Co-PI

DeSandre, C., & Rouse, M. *The Impact of Participation in Designated Education Unit Model of Clinical Education on Nursing Transition to Practice, Confidence, and Job Retention* (2022)

Study In Progress

Role: Co-PI

Rouse, M. & Herman, C. *An exploratory study of the relationship between emotional intelligence and transformational leadership in Texas division Nursing Leaders* (2019).

Role: Co-PI

Coakley, K., Jones, G., & Rouse, M. *A place for mobile device applications: Investigating use in healthcare* (2017).

Study compared traditional in-servicing to use of a mobile application for education about use of lift equipment.

Role: Co-PI

Haseeb, C., Dawson, S. Grami, P., Reddy, D., Jones, G., & Rouse, M. *The role of an exercise physiologist in an interdisciplinary critical care team* (2017).

Study introduced an exercise physiologist into the care team to help mobilize patients and improve outcomes.

Role: Co-PI

Rouse, M.D., Shoemaker, S., & Hanson, A. *Uncovering the barriers to informing and referring nondiabetic hyperglycemic emergency department patients* (2015).

Study explored the barriers that prevent ED Physicians from informing and referring patients with elevated blood glucose levels, for follow up.

Role: PI

Rouse, M.D. & Shoukry, C. *Elevated blood glucose levels in the emergency department: Missed opportunities* (2014).

Study examined Emergency Department patients with elevated blood glucose levels to see if there were missed opportunities for referral and follow-up of possible Prediabetes.

Role: PI

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## SELECT PRESENTATIONS

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- Poster Presentation – Implementing immediate hospital-wide personal protective equipment training & validation – A multidisciplinary approach to quality improvement (SHEA conference 2020 – on hold due to COVID).
- Podium Presentation – Building an Inpatient Simulation Center (Laerdal National Simulation Conference - abstract accepted 10/20 – on hold due to Covid).

- Podium Presentation – Star Search! Best Practices for Interviewing and Hiring New Grads (ANPD Conference 4/20).
  - Poster Presentation - Implementing a Massive Personal Protective Equipment Education- A Multidisciplinary Team Approach (SHEA conference 3/20).
  - Podium & Poster Presentation – Star Search! Best Practices for Interviewing and Hiring New Grads (ANCC-PTAP Symposium 10/19).
  - Podium Presentation – Improving Outcomes Through Interprofessional Collaboration (Houston Regional Shared Governance Conference, 10/18).
  - Panel Presentation – Training for the Underserved – CHI/United Way/Thrive (Houston Jr. Women’s League – Houston, 9/18).
  - Panel presentation – Nursing Professional Development Standards of Practice (Association of Nursing Professional Development – Houston, 9/18).
  - Poster Presentation – Coming Together – Standardized Orientation for 17 Hospitals (Association of Nursing Professional Development, 7/18).
  - Keynote Speaker – Unveiling the Myth about Nursing Research (CHI Nursing Research Conference 6/18).
  - Poster Presentation – The Why’s and How-To’s of Creating Unit Practice Councils (ANCC Pathways Conference, 5/18).
  - Live Abstract: The Whys and How-To's of Creating Unit Practice Councils (2018 National Teaching Institute (NTI) and Critical Care Exposition 5/18).
  - Podium Presentations - Elevated Non-fasting Blood Glucose Levels in the ED: Missed Opportunity for Referral and Treatment (Association of Critical Care Nurses Conference, 10/14).
  - Poster Presentation — Elevated Non-fasting Blood Glucose Levels in the ED: Missed Opportunity for Referral and Treatment (American Association of Clinical Nurse Leader Conference, 1/13).
  - Poster Presentation — Elevated Non-fasting Blood Glucose Levels in the ED: Missed Opportunity for Referral and Treatment (National Association of Clinical Nurse Specialists Conference, 2/13)
-