# Spotlight Nursing Story: Dr. Mary Ellen Dellefield, PhD, RN, FAAN

*Higher RN staffing levels are associated with better clinical outcomes for Veterans living in federal nursing home program facilities. Pressure injury prevention provides a marker of facility quality and the nursing care processes associated with this outcome*.

**Dr. Mary Ellen Dellefield**

Institutional long-term care facilities continue to play an important role in the healthcare continuum. Although having appropriately shifted its focus to community care, the Veterans Health Administration remains committed to provide care to Veterans in State Veteran homes, community nursing homes, and Community Living Centers (CLCs). These settings comprise the federal nursing home program. Such care environments require the strong leadership and clinical competence of registered nurses (RNs) to improve resident outcomes.

**Mary Ellen Dellefield, PhD, RN, FAAN**

**Research Nurse Scientist, VA San Diego**

**American Academy of Nursing Fellow**

Dr. Mary Ellen Dellefield is a VHA nurse who has spent her career within the Office of Nursing Services (ONS) focused on the advancement of RN practice and leadership within the VHA’s federal nursing home program. RN practice has been studied, not as an end, but as a means of better to gain a better understanding how care structures and processes are related to outcomes of importance to Veterans.

Pressure injury prevention has long been is used as a marker of organizational quality by health services researchers. Dr. Dellefield has used pressure injury prevention practice to conduct research and engage in scholarship on the relationship between nurse staffing levels, implementation of evidence based practice guidelines, care plans and care planning, quality assessment and performance improvement, management practices, the Resident Assessment Instrument (RAI)/Minimum Data Set (MDS), safety practices and Veteran outcomes such as prevention of pressure injuries. These injuries are costly to treat, contribute to Veteran morbidity, and are often painful to treat.

She pursued these areas of RN practice with the generous support of VHA. Dr. Dellefield worked as the Clinical Program Manager of VA San Diego Health System CLC from 1999 to 2004. She maintained her VASDHS employment while participating in the John A. Hartford Foundation’s Building Academic Geriatric Nursing Capacity post-doctoral program at University of California, San Francisco. Dr. Dellefield used direct observation of RNs and certified nursing assistants to describe their real-time implementation of pressured injury prevention guidelines. In 2008-2012, Dr. Dellefield was selected as a VHA Health Services Research and Development (HSR&D) Career Development Awardee and studied the integration of clinical supervisory practices and pressure injury prevention.

Dr. Dellefield is nationally recognized as a subject matter expert on nurse staffing levels, RAI/MDS and care planning, as well as the organizational practices associated with pressure injury prevention. She is currently using secondary data analysis to describe RN and nursing practice patterns associated with adverse events and deficiency citations in governmental and non-governmental nursing homes. She has piloted an intervention that seeks to balance resident safety and autonomy or resident choice. The focus of the intervention has been on assessment of decision-making capacity and the nursing staff’s competence in achieving this balance. She is a recent member of the Field Advisory Committee of the CLC. In 2019, Dr. Dellefield was inducted as a Fellow of the American Academy of Nursing, the highest recognition in the discipline of Nursing based on her leadership and accomplishments.