

Caring

HEADLINES

September 6, 2001

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Johnson receives Cancer Nursing Career Development Award

On August 10, 2001, Liz Johnson, RN, Ellison 14 staff nurse and past recipient of the Stephanie Macaluso Expertise in Clinical Practice Award, received this year's Cancer Nursing Career Development Award. The award, funded by the Friends of the MGH Cancer Center, is given each year to recognize the merit-

orious practice of a staff nurse providing direct care to cancer patients.

Oncology clinical nurse specialist, Joan Gallagher, RN, chair of the award selection committee, thanked the Friends of the MGH Cancer Center for their continued support of this award and for continuing to recognize

and encourage exemplary cancer nursing over the years.

Associate chief nurse, Jackie Somerville, RN, introduced Johnson, saying, "Liz has worked on Ellison fourteen for seven years. She was nominated by her nurse manager, Carol Ghiloni, who wrote: 'Liz exemplifies the true meaning of professional

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Pictured (l-r) are: president of Friends of the MGH Cancer Center, Patti Jenkins; recipient, Liz Johnson, RN; nurse manager, Carol Ghiloni, RN; and associate chief nurse, Jackie Somerville, RN

(Photo by Paul Baliste of the MGH Photo Lab)

MGH Patient Care Services
 Working together to shape the future

When you love what you do, it's easy to be the best

As you may have heard, MGH has been recognized by *US News and World Report* as one of America's top three hospitals. This is an incredible honor and true validation of the excellent work you are all doing. I commend you!

I think everyone would agree that our continued high performance in the *US News and World Report* rankings has a great deal to do with our commitment to providing multi-disciplinary patient care. I recently received a letter from a physician applauding the interdisciplinary practice of a particular unit. He remarked that collaboration and teamwork were key to the success of that unit, and comments like this are common in every clinical setting. We are fortunate that this level of teamwork is so much a part of the fabric of our practice.

When I'm asked about the impending shortage of healthcare workers, I always go back to what brought us to national recognition in the first place: excellence in patient care. The real solution to the

shortage is to remain connected to our values. Treating clinicians with dignity and respect and giving them the tools and resources they need is the best retention strategy.

As far as long-term recruitment strategies, we need to convey to young men and women the richness and personal reward that comes with careers in health care. Just last month, we invited a group of Girls Scouts from across the country to visit MGH, and we introduced them to the vast opportunities awaiting them in health care. In Dr. Sylvia Rimm's book,

tunities to teach young people about careers in health care.

I am about to celebrate my 5th anniversary as senior vice president for Patient Care Services. At a recent retreat, I asked our leadership team to tell me what they thought about the following questions:

- Based on our outcomes of the past five years, when they write the history of MGH, what will they say about us?
- If we could go back five years, what would we do differently? Were we bold? And if not, why not?

When I'm asked about the impending shortage of healthcare workers, I always go back to what brought us to national recognition in the first place: excellence in patient care.

How Jane Won (in which I'm honored to be included), more than a third of the successful women profiled mentioned the impact of scouting on their lives. We will be doing more work with the Girl Scouts and other youth groups to create oppor-

- What is our vision for the next five years?

These are difficult questions, but without this level of self-exploration and critical examination, how would we approach the next five years when challenges will be even greater?



Jeanette Ives Erickson, RN, MS,
senior vice president for Patient Care
and chief nurse

Let me share with you some of the reasons your leadership team thinks we are a world-class institution, worthy of the ranking we received in *US News and World Report*:

- The launching of The Center for Clinical & Professional Development, which has responsibility for all educational activities and our nursing research program. In just a few short years, we have created a mechanism to fully fund all staff seeking specialty certification, full-funding for local and national conference attendance, funding for fellowships in leadership, spiritual caregiving, and diversity, and a number of research grants.
- Implementation of our eight-committee collaborative governance communication and decision-making

structure. More than 300 clinicians participate in collaborative governance and each committee is led by a clinical or non-clinical staff member.

- Our alignment with schools in the Boston area to create collaborative partnerships in developing tomorrow's caregivers.
- The creation of recognition and award programs to celebrate clinical practice. The Stephanie M. Macaluso Expertise in Clinical Practice Award is just one of eight new recognition programs we've launched in the past few years.
- The creation of a culture that supports a diverse patient population and workforce.

One of the most rewarding moments I've had as leader of Patient Care Services was when

continued on next page

Recruitment Initiatives ...and improved toothbrushes!

The Fielding the Issues section of Caring Headlines is an adjunct to Jeanette Ives Erickson's regular column. This section gives the senior vice president for Patient Care a forum in which to address current issues, questions, or concerns presented by staff at various meetings and venues throughout the hospital.

Question: The hospital is busier than ever; how are we doing with nurse recruitment?

Jeanette: The good news is that we have hired 342 nurses since October 1, 2000. And we want to hire an additional 100 nurses within the next few months. The best way to fill all our nursing positions, as well as respiratory therapists, physical therapists, and social workers, is for each employee to recruit another employee. I truly believe we can do this.

Question: Has the PCS Employee Referral Program been successful?

Jeanette: I'm pleased to report that since implementation of the PCS Employee Referral Program in early July, 15 employees have been hired, including: 9 clinical nurses, 3 physical therapists, 1 speech pathologist, 1 respiratory therapist, and 1 sterile processing technologist. The program will be extended through October 28, and then reevaluated.

Question: I recently saw television cameras on one of the units. What was going on?

Jeanette: They were filming four two-minute interview segments for BostonWorks TV, which will air over a four-week period from September 9, to September 30, 2001. Each week a nurse will profile a different clinical specialty. Two of these interviews will air on NECN prior to the next Career Expo on September 16th. The Career Expo will be mentioned as added advertising for this recruitment event. In addition, we will have an ad featuring MGH nursing career opportunities and the Career Expo in

the Sunday Globe on September 9th.

Question: How were the interviewees prepared?

Jeanette: Each of the four nurses interviewed, Jen Carr, RN, Cardiac SICU; Tina Schipani, RN, Ellison 16 Medicine; Patty Hanson, RN, Blake 12 Neuro Intensive Care; and Eileen Comeau, RN, Blake 7 MICU, were given briefing materials and some pre-interview coaching. They did a superb job describing their work and why MGH is the best place to be a nurse.

In the fall, a media training program will be offered to clinicians and leadership interested in becoming part of the Patient Care Services media team. This effort

will be coordinated by Marianne Ditomassi, executive director of my office, in conjunction with The Center for Clinical & Professional Development. More details will follow on this program.

Question: At the last Staff Nurse Advisory Meeting concerns were raised about the quality of toothbrushes provided to our patients. Can you give us an update on this issue?

Jeanette: We are going to purchase new toothbrushes. Materials Management is exploring alternative options for a more robust toothbrush. They will bring samples forward for review by the Nursing Practice Committee at their next meeting on September 11th.

Ives Erickson

continued from page 2

a physician told me recently that he wished he was a member of the department of Nursing. He sited the wonderful work we are doing and added that it looked like we were having a good time, too.

When you love what you do, it's easy to be the best!

Updates

It is my pleasure to inform you about the following additions to our team:

- John Murphy, RN, MS, has accepted the position of nurse manager of the Blake 12 Neuro ICU. He comes to us from South Shore Hospital where he managed a critical care unit; he will start later this month.

- Chris Annese, RN, MS, nurse manager of the Central Resource Team and clinical supervisors, is taking on permanent leadership of the IV nursing team, effective immediately.
- White 8 and 10 welcome Marliese Palank as their new operations coordinator.

New program rewards PCS employees who recruit or refer clinical staff for hire within Patient Care Services

- PCS Referral Program rewards PCS employees who refer individuals for hire into specific roles between now and October 28, 2001 (New extended date)
- All current PCS employees are eligible (excluding directors, leadership and HR staff)
- \$1,000 will be given to employees whose referrals are hired into PCS clinical positions of 20 hours per week or more

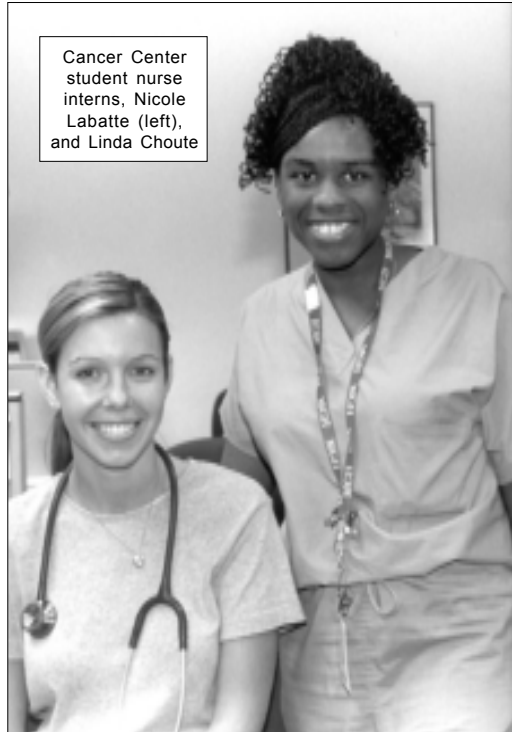
For more information, contact Steve Taranto at 724-2567

Cancer Center Student Nurse Internship Program

This summer for the first time, the MGH Cancer Center offered a pilot internship to two student nurses to allow them to explore various sub-specialty areas of cancer nursing. Nursing students, Linda Choute, of the University of Massachusetts, and Nicole Labatte, of the University of Connecticut, were the first candidates to participate in the Cancer Center Student Nurse Internship Program, an intensive, two-month, preceptored work experience.

Students rotated through a series of clinical oncology settings including the Infusion Unit, Radiation Oncology, and the Ellison 14 Oncology-Bone Marrow Transplant Unit.

Says Labatte, "I was able to observe many different nursing roles, such as staff nurse, nurse practitioner, clinical nurse specialist, and



nurse manager. I already knew I wanted to pursue my master's degree and become a nurse practitioner, but this experience just reinforced that desire. I thoroughly enjoyed my experience here; not only did I learn an incredible amount, I had the opportunity to work with

a phenomenal staff!"

Says Choute, "I had some incredible conversations with patients and really got to know their personal thoughts and feelings about their diagnosis and treatment. It was so beneficial to spend time in the different specialty areas. I could really appreciate the different roles of nurses in the inpatient and outpatient settings, and get a sense of the workload, pace and staffing needs."

For more information about this pilot program, contact Joan Agretelis, at 6-8267.

MGH Nursing Career Expo

**Sunday, September 16, 2001
12:00-4:00pm**

North and East Garden Dining Rooms

Meet with nursing leaders in Med-Surg, Women & Children's and Psych Services, Cardiac and Critical Care, and Perioperative Nursing

Two CEU offerings will be included

For more information, call 724-6052

Making a Difference Grant Program

*Your good ideas
at work!*

The MGH-MGPO Making a Difference Grant Program has received an increase in funding this year and is now accepting grant proposals for the year 2002.

The program provides grants to individuals or teams to help implement ideas that will improve the MGH patient, family and staff experience.

To learn more about the Making a Difference Grant Program or see poster presentations by past grant recipients, please attend the Customer Service Roundtable on Thursday, September 20, 2001, from 10:00-11:30am in the Wellman Conference Room. View posters, discuss ideas, or consult with Service Improvement representatives.

For more information about the grant program or the Customer Service Roundtable, please call Mary Cunningham at 4-1004, or Melanie Cassamas at 6-1816, or by e-mail.

POPPS Educational Fair and Photo Contest

**presented by
Police, Outside Services, Parking
and Photography**

Come and learn about crime prevention, community policing, photo ID badges, satellite security, commuter services, management of aggressive behavior, diversity, special investigations, and the many services offered by the MGH Photography Department.

Meet McGruff the Crime Dog, enjoy popcorn, and see if you're one of the winners of the Fourth Annual Photo Contest. For more information about the Photo Contest please call 6-2237.

Also participating in this year's fair will be the MGH Employee Assistance Program, HAVEN, the Safety Department, and representatives from The Office of Patient Advocacy.

**Friday, September 14, 2001
11:00am-4:00pm
under the Bulfinch Tent**

For more information, call 4-3030

Caring for Haitian Women



Nursing Grand Rounds presenters, Suzelle Saint-Eloi, RN, clinical educator (left), and Karen Hopcia, RN, occupational health nurse practitioner

On Thursday, August 2, 2001, Karen Hopcia, RN, occupational health nurse practitioner, and Suzelle Saint-Eloi, RN, clinical educator, presented, "Caring for Haitian Women," as part of Nursing Grand Rounds. Hopcia, speaking from her extensive research and her experience caring for Haitian women, stressed the importance of taking cultural beliefs and practices into consideration when caring for individuals of all cultures and backgrounds.

"Boston," said Hopcia, "has the third largest Haitian population in the country, second to Miami and New York, making it especially important that

healthcare providers be knowledgeable and culturally aware in caring for this patient population."

Hopcia provided information on Haitian culture including language (French and Creole), religion (Catholic, Protestant, Voodoo) and a sampling of commonly held health-related beliefs and practices. But some of the more powerful information came in the form of quotes from some of her Haitian patients:

"I don't drink anything cold, not even water. I don't feel good when I drink cold. I feel uncomfortable drinking or eating something cold. No ice."

"We do a lot of home remedies instead of going to the hospital. Even

here (in this country)... I will not go until the last minute."

"I don't believe that I have this sickness... God wants it to be that way, that's it. Nothing else. Nothing to do with good or bad. God wants me to be sick."

"Until you get sick, no one is going to think, well maybe I should go to the doctor."

Hopcia spoke of Haitians' belief in natural versus supernatural illnesses. Some illnesses may be caused by angry spirits or deceased relatives or voodoo practitioners. She observed that, "Many Haitians will ultimately visit a Western healthcare provider, but usually only after trying home remedies or visiting a Haitian folk healer."

Saint-Eloi, who is of Haitian descent, spoke from both a personal and professional perspective. She explained various folk and herbal remedies used by many Haitian families, and shed light on the kinds of treatments Haitians seek from "local" healers, including "Docte Zo" (bone doctor), "Fam Saj" (midwife), "Hougan" (a voodoo priest), or a "Pickirist" (a person who provides injections for different illnesses). She spoke about "mauvais san," or a "bad blood episode" attributed to a number of vague health complaints.

Saint-Eloi compared a number of Haitian health practices with Western practices, saying, "By understanding the beliefs and practices of Haitian families, we are better able to com-

bine the two for a complementary approach that will effectively improve health, control costs, and optimize utilization of medical services." For instance, where Western medicine uses castor oil primarily as a cathartic or laxative, Haitians use castor oil in a number of remedies, including massage to cleanse the body of illnesses and impurities.

Saint-Eloi offered the following guidelines when caring for Haitian families:

- Talk with your patients about their health beliefs and practices
- Gather information
- Develop a framework for planning care
- Negotiate the plan of care as necessary
- Follow up with patients and families to ensure compliance and understanding.

Current Issues in Pain Management

presented by MGH Cares About Pain Relief, and Purdue Pharma L.P.

This conference will address current issues in pain management including legal issues, end-of-life care, patient advocacy, the future of pain management and addiction.

All interested healthcare professionals are welcome.

This conference is dedicated to the memory of Jean Guveyan, RN

**Wednesday, October 3, 2001
8:00am-3:30pm
Shriners Hospital Auditorium**

To register, or for more information, call Amy Prasol at 1-800-745-7445 (ex. 1030810)

6 contact hours

Phillips 20 nurse steps in to bring comfort and advocacy to dying patient

My name is Kimberly Charette, and I am a staff nurse on the Phillips 20 General Medical Unit. Mr. V was a gentleman in his 60s who came to MGH to be treated for worsening shortness of breath. When he arrived, he was able to communicate and was being maintained on 3-4 liters of nasal cannula oxygen, with nebulizer treatments as necessary. He was diagnosed with end-stage pulmonary fibrosis, which he had acquired after working in a factory for many years. The plan of care for Mr. V was medical management and a thoracic/surgical consult. Prior to the surgical consult, Mr. V started to deteriorate. His oxygen requirements became significant, his breathing was greatly labored, and his blood pressure was elevated. Mr. V was well aware of his worsening medical status, and was becoming increasingly anxious. He had two children and a long-time girlfriend whom he was planning to wed.

I had assisted other nurses in caring for Mr. V, but realized that he

had not yet been assigned a primary nurse. I felt that Mr. V needed more continuity of care and a strong advocate, so I asked to become his primary nurse. I made it my number one priority to bring him some comfort and relief.

On my first day as Mr. V's primary nurse, I found him on 70% high-flow oxygen, and 7 liters of nasal cannula oxygen. His oxygen saturation was 88%; respiratory rate in the high 30s-40s; blood pressure 150/90; heart rate 110, and rhonchus breath sounds bilaterally. I quickly introduced myself and explained what I was going to do. I gave him a nebulizer treatment, called Respiratory Care Services and the intern.

I told Mr. V I was going to suction him, and got him some medicine to make him feel better. He told me to go away and leave him alone. He said a lot of people had told him they would "make him feel better," and they hadn't. He was very reluctant to let me suction him due to unsuccessful and painful prior attempts. I talked him through the nasal suc-

tioning, and was able to remove a significant amount of thick mucus. He was amazed and felt better afterward. His oxygen saturation was now in the low 90s, which made him a little more comfortable. Mr. V had become very fixated on the oxygen numbers on the monitor. When the respiratory therapist arrived we increased his high-flow oxygen to 100%, which also helped slightly. I talked with the intern about Mr. V's breathing. He had been using his accessory muscles to help him breathe for days now, and was quickly tiring from the labor of breathing. I suggested morphine to ease his breathing rate, but the intern didn't feel comfortable with this for fear of suppressing his respirations.

It was determined that Mr. V was not a good candidate for surgery; his only option was medical management. The medical interns wanted to try steroids and ativan, which were unsuccessful. I suggested a positive-pressure breathing machine (CPAP) to assist Mr. V in his

breathing efforts, and I moved him closer to the nurse's station, for better visualization. After many conversations with the intern about trying morphine, I agreed to monitor Mr. V closely myself if we tried a small dose. A small dosage of morphine was administered and I checked his vital signs frequently. I monitored his mental status and placed Mr. V on our continuous monitoring system.

Within a short time Mr. V was much more relaxed; his respiratory rate decreased to 28; blood pressure 134/80; heart rate 100; and his oxygen saturation was 92-94%. He was able to sleep for the first time in what Mr. V said was "days." I documented his progress and discussed it again with the intern. Mr. V was put on a small dose of morphine every 6 hours for

comfort. At the end of my 12-hour shift when I said good-bye to Mr. V, he put his hand on my cheek, mumbled, "Thank-you," through his CPAP mask and started to cry.

Over the next week, Mr. V came to terms with the fact that he was dying quickly from his pulmonary fibrosis. Eventually, he was placed on a continuous morphine drip, which made him just comfortable enough to perform small tasks, such as brushing his teeth and using a commode instead of the bedpan. This gave him back some independence and modesty, which Mr. V liked. Arrangements were made with the help of our whole team for Mr. V to transfer to a hospice unit and carry out his last wish of marrying his long-time girlfriend the following weekend.

continued on next page



Kimberly Charette, RN
staff nurse, Phillips House 20

New teen resource in PFLC

The Blum Patient and Family Learning Center (PFLC) is pleased to announce the addition of a teen resource section. Mindful of the many grave issues confronting adolescents today, more than two dozen volunteers spearheaded an effort to make meaningful, non-judgmental information available to young people in a timely manner on the web. The teen resource section is located within the Consumer Health Web Links on the PFLC website.

The group began by defining the scope of issues that teenagers deal with in their day-



to-day lives. In addition to general health-related issues, areas of focus included school violence, drug and alcohol use, driving, relation-

ship issues, suicide and safety, among others.

Identifying appropriate links required a great deal of time and patience, as the group

reviewed countless potential links in their research of each topic on the web. The Patient Education Committee approves all materials

provided by the PFLC, so all of the links identified by the volunteer group were evaluated and approved by the Patient Education Committee before being posted on the website. Now that the site is up and running, the group will continue to search for links to enhance this valuable resource, and in the near future they will research links appropriate for a kids' resource section. The site can be accessed at: www.mgh.harvard.edu/depts/pflc/teenlinks.htm.

For more information, call the Patient Family Learning Center at 4-7352.

Exemplar

continued from page 6

Comments by Jeanette Ives Erickson, RN, MS, senior vice president for Patient Care and chief nurse

Kimberly was introduced to Mr. V as she assisted other nurses with his care. Through these episodic interactions she saw a patient whose physical and emotional condition was very fragile. So she stepped up. It's challenging enough to care for a patient who is exhausted and frustrated by his illness. But

when compounded by the realization that the illness is terminal, the situation becomes that much more delicate. Kimberly's clinical knowledge, her compassion, and her ability to be present for Mr. V, even as he tried to dismiss her, are the signs of a true professional. Kimberly's advocacy for her patient never wavered; she did everything possible to make Mr. V comfortable and facilitate relief of his respiratory distress.

I think Mr. V's muffled, "Thank-you," spoke volumes. Indeed, thank-you, Kimberly.

Cancer Nursing Career Development Award

continued from front cover

nursing—she is warm and caring, a teacher and a mentor.' Among Liz's many accomplishments, she completed the MGH Spiritual Caregiver Fellowship Program, she is a member of the HOPES Seminar Committee (and a frequent presenter), she volunteers in the Cancer Resource Room, and participates in the Ellison fourteen staff nurse time-planning committee. It is with great pleasure that I introduce and congratulate our distinguished recipient, Liz Johnson!"

The monetary award is intended to be used for continuing education for the recipient, but Johnson plans to use the money to establish a program that helps support and retain newer oncology nurses.

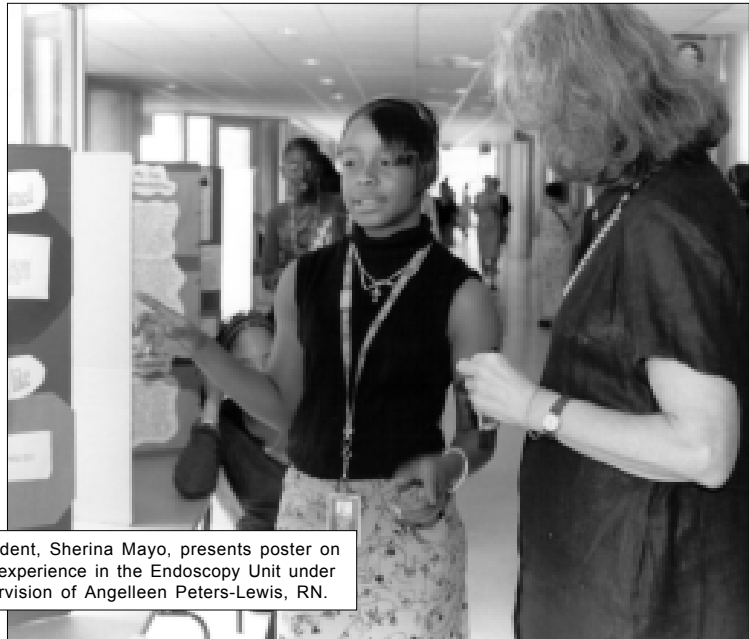
Four other nurses were nominated for the Oncology Nursing Career Development Award; they are: Susan Finn, RN, Blake 2 Infusion Unit; Kara Olivier, RN, staff nurse, Bigelow 12 Infusion Unit; Emily Horey, RN, staff nurse, Bigelow 12 Infusion Unit; and Agnes Froio, RN, staff nurse, Radiation Oncology.

Showcasing MGH-Timilty Partnership's Summerworks Program

An important part of our strategic plan involves attracting, preparing and recruiting bright young men and women for future positions at MGH. And one of the most promising programs we have in place to support that effort is our educational partnership with the James P. Timilty Middle School in Roxbury.

On Wednesday, August 8, 2001, ten Timilty students who participated in this year's Summerworks Program, presented posters in the Central Lobby, showcasing their work experiences in various settings and departments

throughout the hospital, including Nursing, Police & Security, Patient Transport, the Office of the President, and others. The seven-week, part-time, internship program combined interactive workshops and discussions with real-life work situations to provide students with a realistic look at career opportunities soon to be available to them. And if these poster presentations were any indication, it won't be long before some of these young people are right back here putting their experience to good use at MGH!



Timilty student, Sherina Mayo, presents poster on her work experience in the Endoscopy Unit under the supervision of Angelleen Peters-Lewis, RN.

Negotiation Skills for Those Not Born to the Table

presented by Phyllis Kritek, RN, PhD, FAAN, internationally recognized author and scholar

Working in today's complex healthcare environment, negotiation skills are essential for our ability to manage conflict between individuals of different ages, cultures, disciplines and departments.

Conflict-management can also be a catalyst for change. Negotiation skills are key for those working in management or administrative positions.

**November 2-3, 2001
8:30am-5:00pm
O'Keeffe Auditorium**

For more information, contact Brian French at 724-7843, or Deborah Washington at 724-7469

The Emergency Department Ethics Forum, in an effort to increase knowledge and awareness about the homeless community, invited nurses from community practices who care for homeless individuals to attend an ED Ethics Forum in December of 2000.

As a result of that meeting, a special ED Nursing Grand Rounds is being presented, entitled, "Preparing for the Winter: What We Need to Know to Help the Homeless Survive." The goal of the program is to increase knowledge about the medical and

social needs of the homeless, learn how to identify patients at risk and how to access appropriate services. PCS staff

from throughout the hospital are invited to attend.

ED Nursing Grand Rounds

"Preparing for the Winter: What We Need to Know to Help the Homeless Survive"

Panel Members:

Caroline Melia, RN, BSN,
MGH Healthcare for the Homeless
Sue Warchal, RN, BSN, MGH ED

Laura Delaney, RN, MSN, NP,
nurse manager, Pine Street Inn Shelter

Randy Bailey, RN, MSN, NP,
Pine Street Inn Shelter

Facilitator:
Mary Jo Cappuccilli, RN, MSN, CS,
MGH ED Psychiatric CNS

**Walcott Conference Rooms, WACC
Monday, October 1, 2001**

3:00-5:00pm

CEUs pending

Pharmacist-Nurse Medication System Satisfaction Survey

Tell us what you think!

The second annual Pharmacist and Registered Nurse Satisfaction with the Medication System Survey was distributed to patient care units and to the Pharmacy on September 4, 2001. It is the hope of the Pharmacy-Nursing Performance Improvement Committee that staff will take this opportunity to give needed feedback on this important system.

The multi-disciplinary committee, comprised of nurses, pharmacists, operations co-

ordinators, operations associates, and pharmacy technicians, has implemented a number of changes to improve systems for medication distribution. The team is committed to supporting staff in preparing, delivering, and administering medications safely and efficiently.

Last year more than 500 staff nurses and 30 pharmacists responded to this survey. Because so many took the time

to respond, we had a good indication of how the changes were working and where additional efforts needed to be focused. Once again, your feedback will be invaluable as improvement efforts continue to be implemented.

All responses are confidential. Results of the survey will be shared in future issues of *Caring Headlines* and other mechanisms. For more information, please call Joan Fitzmaurice (6-9282) or Lois Parker (6-2503).

—by Janet Duffy, RN,
project manager

Call for Nominations

The Stephanie M. Macaluso, RN, Expertise in Clinical Practice Award

Nominations are now being accepted for the winter *Stephanie M. Macaluso, RN, Expertise in Clinical Practice Award*. The purpose of the award is to recognize clinicians within Patient Care Services whose practice exemplifies the expert application of the values reflected in our vision. Nurses, occupational therapists, physical therapists, respiratory therapists, speech-language pathologists, social workers and chaplains are eligible.

The nomination process is as follows:

- Direct-care providers can nominate one another. Nurse managers, directors, clinical leadership, health professionals, patients and families can nominate a direct-care provider.

- Those nominating can do so by completing a brief form which will be located in each patient care area, in department offices, and at the Gray Lobby information desk.
- Nominations are due by October 5, 2001.
- Nominees will receive a letter informing them of their nomination and requesting that they submit a professional portfolio. Information on writing clinical narratives, endorsement letters, and resumés will be enclosed.
- A review board chaired by associate chief nurse, Trish Gibbons, RN, and comprised of previous award recipients, administrators and MGH volunteers will review portfolios and select recipients.
- The award presentation will be held on Thursday, December, 13, 2001.

Awards and award-related activities:

Recipients will receive \$1,500 to be used toward a professional conference, seminar or course of their choosing. They will be acknowledged at a reception with peers, family and friends, and their names will be added to the plaque honoring Stephanie M. Macaluso, RN, Expertise in Clinical Practice Award recipients. Recipients also receive a crystal award from Jeanette Ives Erickson, RN, MS, senior vice president for Patient Care and chief nurse.

For more information or assistance with the nomination process, please contact Mary Ellin Smith, RN, MS, professional development coordinator, at 4-5801.

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Please contact Ursula Hoehl at 726-9057 for all issues related to distribution

Submission of Articles

Written contributions should be submitted directly to Susan Sabia **as far in advance as possible**. *Caring Headlines* cannot guarantee the inclusion of any article.

Articles/ideas may be submitted by telephone: 617.724.1746
by fax: 617.726.4133
or by e-mail: ssabia @partners.org

Next Publication Date:

September 20, 2001



When/Where	Description	Contact Hours
Beginning September 11 Tuesdays from 4:00-6:00pm Spaulding Rehab Hospital 125 Nashua Street	Rehabilitation Nursing: Process and Principles This 13-week course will cover trends, research and clinical practice in a variety of rehab nursing situations including caring for patients post-stroke, with cardio-pulmonary issues, brain injury, and spinal cord injury. Course will also cover elimination patterns, legislative and economic concerns, sexuality and reproductive patterns, and more. For more information, call 617-573-2390.	28.8
September 13 10:00–11:30am O’Keeffe Auditorium	Social Services Grand Rounds “Motivational Interviewing,” presented by Martha Kane, PhD, clinical director, MGH West End Clinic Addiction Services. All staff are welcome. For more information, call 724-9115.	CEUs for social workers only
September 17 7:30–11:30am, 12:00–4:00pm VBK 401	CPR—American Heart Association BLS Re-Certification for Healthcare Providers Successful completion of this program re-certifies staff in AHA Basic Life Support. Priority will be given to staff required to have AHA BLS for their job. Others are encouraged to complete unit-based, age-specific mannequin demonstration to meet requirements. Participants must review the new AHA Health Care Provider Manual, which may be borrowed from the CCPD for a returnable \$10 deposit. (Note: class has been extended to 4 hours due to changes in AHA requirements.) Pre-registration is required, as is proof of AHA Healthcare Provider certification within the last two years. For information, or to register, call The Center for Clinical & Professional Development at 726-3111.	---
September 17 (8:00–4:15) O’Keeffe Auditorium and September 19 8:00am–4:15pm Training Department Charles River Plaza	Neuroscience Nursing Review 2001 This 2-day review is designed for experienced nurses who care for neuroscience patients or who are preparing for the neuroscience nursing examination. Participants may attend one or both days. Limited to 25. See Educational Offerings Calendar for fees. For more information, call The Center for Clinical & Professional Development at 726-3111.	TBA
September 18 8:00am–4:30pm VBK 601	Introduction to Culturally Competent Care: Understanding Our Patients, Ourselves and Each Other Program will provide a forum for staff to learn about the impact of culture in our lives and interactions with patients, families and co-workers. Topics include understanding and defining the importance of culture; the principles of cultural competency; understanding the dynamics of difference; the culture of Western bio-medicine; and the appropriate use of language services. A variety of interactive exercises will help to illustrate the concepts presented. For more information, call The Center for Clinical & Professional Development at 726-3111.	7.2
September 20 8:00am–4:30pm Training Department Charles River Plaza	Operations Associate Preceptor Development Program This new program is offered to operations associates to help them develop skills in precepting new OA staff. For more information, call The Center for Clinical & Professional Development at 726-3111.	---
September 20 8:00am–4:30pm Training Department Charles River Plaza	Conversations at the End of Life This program is designed to enhance nurses’ ability to care for patients and families during this most difficult time. Topics will include: pain- and symptom-management, ethical issues, struggles and choices, patient-advocacy, and cultural considerations. For more information, call The Center for Clinical & Professional Development at 726-3111.	8.4
September 20 1:30–2:30pm O’Keeffe Auditorium	Nursing Grand Rounds This Nursing Grand Rounds will focus on research with a presentation by Anne Marie Barron. For more information, call The Center for Clinical & Professional Development at 726-3111.	1.2
September 24 and 27 8:00am–5:00pm Wellman Conference Room	Advanced Cardiac Life Support (ACLS)—Provider Course Provider course sponsored by MGH Department of Emergency Services. \$120 for MGH/HMS-affiliated employees; \$170 for all others. Registration information and applications are available in Founders 135, or by calling 726-3905. For course information, call Inez McGillivray at 724-4100.	16.8 for completing both days
September 25 and 26 8:00am–4:30pm VBK601	BLS Instructor Program A 2-day training program that prepares participants to teach CPR courses. Pre-requisite: current health-care provider card and commitment to teach at least 2 CPR courses per year. Pre-registration is required, and participants must pick up instructor textbooks and teaching assignment in the Center for Clinical & Professional Development (Founders 6) two weeks prior to course. For more information, or to register, call Roberta Raskin at 726-7572	13.2 for completing both days

Offerings —

September 6, 2001

When/Where	Description	Contact Hours
September 26 8:00am–2:30pm Training Department Charles River Plaza	New Graduate Nurse Development Seminar II This seminar assists new graduate nurses (with the guidance of their mentors) to transition into the role of professional nurse. Seminars focus of skill acquisition, organization and priority-setting, communication and conflict-management, caring practices, and ethical issues. For more information, call The Center for Clinical & Professional Development at 726-3111.	5.4 (contact hours for mentors only)
September 27 1:30–2:30pm O’Keeffe Auditorium	Nursing Grand Rounds This presentation will focus on, “Managing Depression and Anxiety in Patients with Cancer,” presented by Nancy Lovejoy. For more information, call The Center for Clinical & Professional Development at 726-3111.	1.2
September 28 8:00am–4:30pm O’Keeffe Auditorium	Nursing: a Clinical Update This annual program is sponsored by the MGH School of Nursing Alumnae Association, and will contain a variety of topics related to clinical and professional development. To register, or for more information, call the Alumnae Office at 726-3144.	TBA
October 1 8:00–11:15am VBK 601	Intermediate Arrhythmias This 4-hour program is designed for the nurse who wants to expand his/her knowledge of arrhythmias. The program focuses on atrial arrhythmias junctional arrhythmias and heart blocks, and prepares staff to take the level B arrhythmia exam. For more information, call The Center for Clinical & Professional Development at 726-3111.	3.9
October 1 12:00–4:00pm VBK 601	Pacing and Beyond This exciting workshop will discuss indications for initiating therapy, fundamentals of the pacemaker system, pacer implantation, international codes/modes of pacing and nursing care. Rhythm-strip analysis will focus on normal functioning and basic trouble-shooting. The session will conclude with a discussion of current and future technology. For more information, call The Center for Clinical & Professional Development at 726-3111.	5.1
October 3 8:00am–3:30pm Shriners Auditorium	Current Issues in Pain Management Presented by MGH Cares About Pain Relief, and Purdue Pharma L.P., this conference will address current issues in pain management including legal issues, end-of-life care, patient advocacy, the future of pain management and addiction. All interested healthcare professionals are welcome. To register, or for more information, call Amy Prasol at 1-800-745-7445 (ex. 1030810).	6
October 4 7:30–11:30am, 12:00–4:00pm VBK 401	CPR—American Heart Association BLS Re-Certification for Healthcare Providers Successful completion of this program re-certifies staff in AHA Basic Life Support. Priority will be given to staff required to have AHA BLS for their job. Others are encouraged to complete unit-based, age-specific mannequin demonstration to meet requirements. Participants must review the new AHA Health Care Provider Manual, which may be borrowed from the CCPD for a returnable \$10 deposit. (Note: class has been extended to 4 hours due to changes in AHA requirements.) Pre-registration is required, as is proof of AHA Healthcare Provider certification within the last two years. For information, or to register, call The Center for Clinical & Professional Development at 726-3111.	---
October 4 1:30–2:30pm O’Keeffe Auditorium	Nursing Grand Rounds This presentation will focus on, “Beyond Language Barriers: Communicating Effectively with Deaf and Hard-of-Hearing Patients,” presented by Ruth Moore, communication access training specialist. For more information, call The Center for Clinical & Professional Development at 726-3111.	1.2
October 5 8:00am–4:30pm Training Department Charles River Plaza	Psychological Type & Personal Style: Maximizing Your Effectiveness In this dynamic workshop, participants will engage in a journey of self-discovery using the Myers-Briggs Type Indicator (MBTI). Participants will learn about their: psychological type and leadership style; preferred methods of communication; preferred work environment; effectiveness as a team member. Following, participants will learn about: the impact of ‘psychological type’ in problem-solving and decision-making; how to work with opposite types; the implications of type in managing conflict. Registered nurses at all levels of experience are welcome. For more information or to register, call The Center for Clinical & Professional Development at 726-3111.	8.1
October 5 8:00am–4:00pm O’Keeffe Auditorium	2001: A Brain Odyssey Sponsored by the ICU Consortium, this program will cover topics such as: assessment, seizures, head trauma, migraines, embolization, movement disorders and stroke care. Pre-registration is required. For more information, call The Center for Clinical & Professional Development at 726-3111.	TBA

MGH media guidelines: *in the interest of our patients*

As an internationally recognized leader in health care, education and research, MGH attracts a good deal of attention from various print and television media. The MGH Public Affairs Office is officially responsible for handling media relations, however, every member of the MGH community plays an important part in managing our interactions with the press. Public Affairs asks staff and employees to adhere to the following guidelines when fielding requests from the media:

- Refer all media calls to the Public Affairs Office (726-2206) at the earliest opportunity. A representative of Public Affairs is available 24 hours a day (pager # 2-8383) through the hospital page operator (726-2066). Georgia Peirce, director of Media Relations, carries pager # 2-2345, and Peggy Slasman, chief public affairs officer, has pager # 2-8385. Public Affairs staff is experienced in handling a vast range of media situations and is available to assist any MGH employee.
- All patient information released to the media should come from the Public Affairs Office. Patient confidentiality is the highest priority. Generally, Public Affairs releases a one-word description (good, fair, serious or critical) in accordance with the American Hospital Association guidelines. No other information is released without the consent of the patient and/or family members.
- If any employee has an existing relationship with a reporter and agrees to an interview, he/she is encouraged to inform Public Affairs as soon as possible. Knowing about media activity enables Public Affairs to track and report subsequent news coverage.
- To ensure patient confidentiality and privacy, any film crew, photographer, or member of the media entering the hospital with a camera of any kind (still or video) must be accompanied by a Public Affairs staff member. The Public Affairs representative will obtain the necessary clearances and consents. Public Affairs must be informed and involved, even if the

film crew is shooting a training or promotional video. Early notification of such requests facilitates scheduling.

- Researchers who learn that a paper has been accepted by a journal should contact the Public Affairs Office as soon as possible to discuss appropriate strategies for communicating this information. Inclusion in scientific publications often presents opportunities for media coverage. Embargoes are always honored.

For more information about the hospital's media program, contact the Public Affairs Office at 726-2206, Peirce at 724-6423, or Slasman at 724-2750.

Caring

HEADLINES

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