

Caring

Headlines

February 7, 2019



Ditomassi inaugural holder of MGH Trustees Endowed Chair in Nursing and Patient Care Professional Practice

(see story on page 4)

Marianne Ditomassi, RN, executive director for Patient Care Services Operations
and inaugural holder of the MGH Trustees Endowed Chair in Nursing
and Patient Care Professional Practice

Capacity management and bed re-allocation

As you may know, the hospital recently launched a bed re-allocation project as part of our on-going efforts to address capacity challenges. Stage 1 of the initiative began January 28th, when Vascular Surgery moved from Bigelow 14 to Ellison 19, allowing Bigelow 14 to become a much-needed general medicine unit.

Many changes are in the works to better align clinical services with the shift we're seeing in patient

populations and to help decompress over-crowding in the ED. Other bed re-allocations will occur over the course of the next year.

Leaders from all disciplines throughout the hospital are working to implement solutions to our capacity issues—it is our highest priority. As always, I encourage front-line staff to bring ideas forward to ensure we're hearing and addressing all concerns related to patient care.



Debbie Burke, RN
senior vice president for Nursing & Patient Care Services and chief nurse

I want to thank the staff of Bigelow 14 and Ellison 19 for the enthusiasm and resourcefulness you've shown during this transition. Your flexibility and willingness to learn new skills is truly appreciated.

I look forward to working with all of you as we continue to tackle our capacity challenges.

Debbie
Debbie Burke

Bed Re-allocation Timeline			
The implementation of this initiative will be a three-phased move over the next year			
Floor	Current	Proposed	
Ellison 16	Gen Med (20) / Oncology (16)	Gen Med (10) / Oncology (26)	First stage
Ellison 19	Thoracic (20) / Medicine (10)	Thoracic (15) / Vascular (15)	
Bigelow 14	Vascular (27)	Gen Med (27)	
Phillips 21	Gyn (20)	Gen Med (20)	Second stage
Phillips 22	Gen Surg (10) / Gen Med (7) / Ortho (2)	Gyn (11) / Flex Surgery (8)	
White 6	Ortho (30)	Ortho (26) / Neuro Spine (4)	Third stage
White 13	ED Obs (10)	Proc Short Stay (10)	
Bigelow 7	ED Obs (18)	Gen Med (18)	



Debbie's Photo Gallery



(Clockwise from top left): visiting Beacon House; MGH celebrates IV Nurse Day; a visit to Bigelow 14 Vascular Unit; and the Blake 12 ICU.

In this Issue

Trustees Endowed Chair in Nursing and Patient Care Professional Practice.....	1	Cardiac Nursing Visiting Scholar.....	8
Debbie Burke.....	2-3	A Generous Gift on White 6.....	9
• Bed Re-Allocation		Quality & Safety.....	10-11
Trustees Endowed Chair in Nursing and Patient Care Professional Practice.....	4	• A New Nurse-Sensitive Indicator	
Medical Nursing Educational Series.....	5	Global Health Nursing Fellowship.....	12
YMCA Achievers.....	6	Q&As.....	13
Clinical Research Nursing Forum.....	7	• Service Animals at MGH	
		Announcements.....	14-15
		Privacy Guidelines.....	16



Clockwise from bottom left: Marianne Ditomassi, RN; Jeanette Ives Erickson, RN; guest speaker, Rebecca Graystone, RN; Graystone, Ditomassi, Ives Erickson, and senior vice president for Patient Care, Debbie Burke, RN; and seated, MGH president, Peter Slavin, MD, Ditomassi between sons, Jack (left) and James, Burke, and Ives Erickson.

Ditomassi inaugural holder of MGH Trustees Endowed Chair in Nursing and Patient Care Professional Practice

On January 4, 2019, executive director for PCS Operations, Marianne Ditomassi, RN, became the inaugural holder of the MGH Endowed Chair in Nursing and Patient Care Professional Practice. At the ceremony in O’Keeffe Auditorium, guest speaker, Rebecca Graystone, RN, director of the Magnet Recognition Program, spoke about the “Hallmarks of Professional Practice.”

Ditomassi was introduced by chief nurse emerita, Jeanette Ives Erickson, RN, who noted, “Marianne is known across the country for her work as a Magnet appraiser, consultant, author, and go-to person. She always pushes us to differentiate ourselves, to be better, smarter clinicians, and to serve our community with integrity.”

Ditomassi focused her remarks on the mentors she’s had over the years who guided her career with their insightful questions—including our own Ed Coakley, Ives Erickson, and Dottie Jones. Said Ditomassi, “Through this chair and with the support of Debbie Burke, senior vice president for Patient Care Services, we’ll build on the work we’ve done to create innovative approaches to enhance the inter-professional practice environment.”

To quote Ives Erickson and on behalf of the entire MGH community, “Congratulations, Marianne. We’re proud to be your colleagues and friends.”

Medical nursing educational series focuses on geriatric certification

—by Kate Barba, RN, and Patti Fitzgerald, RN

Learning often begins with one individual then spreads to others, as was the case with the recent presentation by Bigelow 11 staff nurses, Lore Innamorati, RN, and Katherine Rooney, RN.

As part of the 65Plus program, MGH is a designated NICHE (Nurses Improving Care for Hospitalized Elders) hospital. One goal of 65Plus is to

increase the number of nurses certified in geriatric nursing (less than 1% of nurses in the United States currently hold geriatric certification).

Nursing leaders of the Bigelow 11 Medical Unit, in partnership with 65Plus coordinator, Jane Flanagan, RN, implemented an innovative program to encourage nurses to become certified in geriatric nursing.

The program consists of completion of a NICHE-sponsored, on-line Geriatric Resource Nurse course; participation in a study group; sitting for the certification exam; and undertaking a capstone project.

Innamorati and Rooney completed the program, and both have success-

fully obtained gerontology certification from the American Nurses Credentialing Center (ANCC).

As part of their capstone project, Innamorati and Rooney shared their specialized knowledge at January's Medical Nursing Educational session, presenting, "Care of the Hospitalized Adult," to nursing colleagues and others. The presentation led to a rich exchange of ideas around the care of this patient population.

For information about nursing certification, go to the Excellent Every Day portal at: https://www.mghpcs.org/eed_portal/EED_profdev.asp.

For information about the Medical Nursing Educational Series, contact Jennifer Mills, RN at 617-724-0559.



Staff nurses, Lore Innamorati, RN (left), and Katherine Rooney, RN, present as part of a Bigelow 11 program to encourage certification in geriatric nursing.



(Photos by Kate Tricky)

Recognition



Back row (l-r): Asha Abdullahi; Saheeda Mohammed-Kelly, RN; Evelyne Joseph-Noel, RN; and Matthew Heron.
Front row: Junie Joseph; Efen Flores, MD; Sonal Nagpal; Dominique Evans; and Pamela Cazeau.

Congratulations YMCA achievers

Congratulations to the 2019 YMCA Achiever Award recipients and nominees from Patient Care Services. Recipients were acknowledged at the recent MLK Breakfast sponsored by the Association of Multicultural Members of Partners (AMMP) on February 1, 2019.

YMCA Achiever Award recipients from Patient Care Services:

- Asha Abdullahi, surgical technician, Operating Rooms
- Junie Joseph, patient service coordinator, Yawkey Center for Outpatient Care
- Matthew Heron, support services team manager, PCS Clinical Support Services
- Saheeda Mohammed-Kelly, RN, Labor & Delivery

Honorable Mention:

- Awilda Lalande, operations manager, PCS Clinical Support Services
- Dominique Evans, patient service coordinator, Transplant Surgery
- Evelyne Joseph-Noel, RN, Emergency Medicine
- Melanie Andrade, RN, staff nurse

Patient Care Services is proud to recognize this year's YMCA achievers and appreciates their contributions in ensuring a positive experience for patients and families.

Munn Center hosts clinical research nurse reception

—by Mary Larkin, RN, clinical research manager, Diabetes Research Center; Catherine Griffith, RN, staff nurse; and Gaurdia Banister, RN, director, The Yvonne L. Munn Center for Nursing Research

On January 17, 2019, the Munn Center hosted its first Research Nurse Forum for clinical research nurses to share information with the greater MGH nursing and research communities.

Mary Larkin, RN, of the MGH Diabetes Research Center and president of the International Association of Clinical Research Nurses (IACRN), spoke about IACRN's philosophy of enhancing the quality

and safety of clinical research through specialized nursing practice. *Clinical Research Nursing Scope and Standards of Practice* was published in 2016, and certification for research nurses is expected to become available in the near future.

Larkin, with the help of Martha Stone, Treadwell librarian, provided a brief history of research nursing. MGH has played a significant role in the advancement of research nursing since the opening of Ward 4, a 10-bed, dedicated clinical research unit, in 1925.

A panel led by Linda Pitler, RN, medical navigation nurse, and Courtney Balliro, RN, project manager, Diabetes Research Center, spoke about the changes in clinical research nursing over the past 20

years. As with other specialties, nurses are the constant at the bedside, entrusted with the research participants' safety and quality of care.

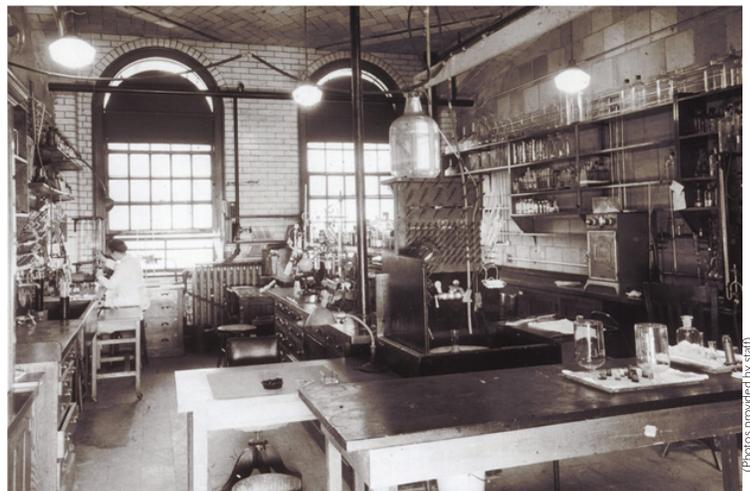
Gaurdia Banister, RN, director of the Munn Center for Nursing Research, invited attendees to have a voice in establishing goals for this new forum. Said Banister, "We look forward to working together to advance research nursing at MGH."

For more information about the MGH Research Nurse Forum call Stacianne Goodridge at 617-643-0431. For information about IACRN, go to: www.iacrn.org/, or call Larkin at 617-724-8695.

The next meeting of the Boston IACRN will be held March 7, 2019.



Above: panelists, Linda Pitler, RN (left) and Courtney Balliro, RN. At right: Alison Hoffnagle, program director, MGH Research Institute. Far right: Ward 4 opened at MGH in 1925 on the first floor of the Bulfinch Building. It was a 10-bed unit with adjoining lab.



(Photos provided by staff)

Cardiac Nursing Visiting Scholar Program

—by clinical nurse specialist, Sioban Haldeman, RN

Every year, the Cardiac Nursing Visiting Scholar Program invites a renowned nurse researcher to MGH to celebrate the specialty of cardiac nursing, showcase cardiac nursing practice, and strengthen the linkage between clinicians throughout the MGH Heart Center.

On Wednesday, December 5, 2018, the 13th annual Cardiac Nursing Visiting Scholar Program welcomed Christopher Lee, RN, professor and associate dean for Research at the Boston College Connell School of Nursing. Lee presented three separate sessions on, “Caregiver Dyads in Cardiac Illness Trajectories,” “Patients with Mechanical Circu-

latory Support,” and “Biomarkers in Heart Failure.”

Dozens of nurses and members of the MGH Heart Center Patient & Family Advisory Council turned out to hear Lee’s ground-breaking research and strategies for empowering nurses to better care for patients with heart failure.

A staff-nurse panel discussion focused on, “Patients with Heart Failure and their Care Partners.” Nurses Jasmine Gonzalez Duston, RN, Meredith Kimball, RN, Annie Leahy, RN, and Shawn McEntee, RN, shared narratives highlighting the complex specialization, care co-

ordination, and compassion that drives their practice. Stories shed light on the severity of the challenges faced by patients and families as they grapple with their disease and the life-altering treatments that can be physically, mentally, emotionally, and financially demanding.

Narratives revealed the degree to which nurses, inspired by patients and families, continuously strive to innovate, collaborate, and share best practices to improve patient care.

For more information, contact Sioban Haldeman, RN, clinical nurse specialist, at 617-724-1375.



At left, cardiac nursing visiting scholar, Christopher Lee, RN. Above (l-r): staff-nurse panelists, Meredith Kimball, RN; Anne Leahy, RN; Jasmine Gonzalez Dustin, RN; and Shawn McEntee, RN.

(Photo by Michèle Rose)

A Generous Gift

New blanket warmer on White 6

—by Kathie Myers, RN, nursing director

The White 6 Orthopaedics Unit recently had the pleasure of caring for patient, John Granara, who frequently throughout his stay asked for a warm blanket. Staff took many measures to ensure Granara kept warm, but he thought it was odd that the unit didn't possess a blanket warmer.

Said Granara, "When I'm discharged, I'm going to arrange for the Skerry-Granara Fund [a Medford-based fund-raising organization] to get you a blanket warmer." True to his word, on December 13, 2018, Granara showed up on the unit, check in hand, and presented it to staff so they could purchase a blanket-warmer.

The warmer arrived January 7th much to the delight of patients on the unit at the time.

Nursing director, Kathie Myers, RN, notes that according to studies, patients' perceived quality of sleep, noise level, and overall satisfaction can be improved with simple interventions such as earplugs, soft music, and warm blankets. White 6 nurses have already received positive feedback.

"I gave my patient a warm blanket and he was immediately so happy." (Courtney)

"The combination of medication and a warm blanket allowed my patient to sleep soundly all night." (Jenny)

"My patient said it was such a treat to have a warm blanket." (Beth Anne)

The blanket warmer was a timely gift as White 6 will soon embark on a quality-improvement project in

conjunction with the American Association of Critical Care Nurses. The year-long study will assess the impact of certain interventions on patients' comfort, rest, and healing. The blanket warmer will be an integral part of the study.

And, says Myers, "The best part is there's already a place in eCare to document warm blankets!"



Above, staff of White 6 with patient James Snyder, as he enjoys the cozy comfort of a freshly warmed blanket. Left (l-r): benefactor, John Granara, with nurse practitioner Kayla Quinn, RN; nursing director, Kathie Myers, RN; and Granara's son, John Granara, Jr.



Assault on Nursing Personnel *a new nurse-sensitive indicator for 2019*

—by Karen Miguel, RN, staff specialist, PCS Office of Quality & Safety

“We cannot improve what we do not measure.”

—Peter Drucker, educator, author

Despite the best efforts of hospitals across the country, assaults on nursing personnel occur with alarming frequency and are largely under-reported. Our own MGH nursing staff tell us:

“I was repeatedly punched, slapped, and pinched while attempting to care for my patient.”

“The patient kicked the nurse in the head.”

“While trying to get my patient back to bed, he took a swing and hit a nurse on the side of the head.”

These are just some of the incidents where violence has been reported against nursing personnel. Workplace violence is becoming widespread in the healthcare setting, in some cases reaching epidemic levels and ranging from verbal assault to unwanted physical or sexual contact.

‘Assault on Nursing Personnel’ was made a nurse-sensitive indicator in 2017 by the National Database for Nursing Quality Indicators (NDNQI) to promote safety in the workplace.

This underscores our understanding that a safe work environment is crucial to the delivery of high-quality care.

Patient Care Services is committed to improving workplace safety. It is a top quality and safety goal for 2019. This past year employees were assigned training in Health-Stream on ways to manage disruptive behavior.

On January 1st, we began tracking information related to assaults on nursing personnel using safety reports filed in the electronic safety reporting system—specifically, assaults on direct-care nurses and as-

sistive personnel who experienced unwanted physical or sexual contact.

In the coming months, that information will be used to identify actions we can take to minimize the risk of similar events in the future.

If you should witness or encounter physical or sexual assault in the workplace, keep yourself safe, use your resources and training, and Speak up for Safety—file a safety report.

For more information, contact Karen Miguel, RN, at 617-726-7627; or Colleen Snyderman, RN, at 617-643-0435.

25% of nurses report being physically assaulted by patient/family member

(ANA Health Risk Appraisal 2013016)

80% of nurses reported some form of violence within the past year

(Scientific American, Dec 2014)

Practice UPDATE



Assault on Nursing Personnel

NEW Nurse Sensitive Indicator

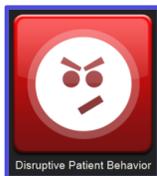
PCS is committed to improving workforce safety for our staff. Despite best efforts, assaults on nursing personnel occur in every U.S. hospital. These events are under-reported.

Beginning January 2019 PCS will be measuring and reporting assaults on nursing personnel. This new measure:

- Aligns with MGH/MGPO 2019 Q&S Goal:
 - Improve patient and workforce safety and advance safety culture.
- Helps us to better understand the frequency of assaults and the impact of improvements to assure staff safety.

Anyone who experiences any form of physical or sexual assault should submit a Safety Report, *even if* the event is already reported to Police & Security or Occupational Health.

The “General Event Types” to report an assault can be accessed by using any one of these 3 icons



Attachment Open Add Modify Remove	non physical - invasion of personal space non physical - threatening gesture or posture non physical - threats of violence non physical - vicious/sexual/racist remarks
FileName Not Specified	physical - focused effort to cause harm physical - property damage, thrown objects physical and sexual assault physical assault sexual assault verbal - abuse/assault(victim)
Specific Event Details	
Specific Event Type	*

For more information:
PCS Office of Quality and Safety
(617) 643-0140



MASSACHUSETTS
GENERAL HOSPITAL

PCS QUALITY & SAFETY

January 7, 2018

Global nursing fellow shares stories of working in Ugandan ICU

—by James Cook, MGH Center for Global Health and Disaster Response

Jennifer Duran, RN, knew she wanted to care for sick children after witnessing compassionate care of her sick brother as a child. Now a nurse in the Neonatal ICU at MGH, Duran is living her dream and recently had an opportunity to share her practice with nurses halfway around the world.

A recipient of an MGH Global Nursing Fellowship through the Center for Global Health, Duran spent 18 days teaching and training nurses, students, midwives, and residents in the NICU at Mbarara Regional Referral Hospital in Uganda.

Duran and her students joined medical rounds, which quickly became a valuable learning opportunity with lively discussions at the bedside.



Jennifer Duran, RN, in the Neonatal ICU at MGH (right) and working with nurse at Mbarara Regional Referral Hospital in Uganda.

Duran credits Pat Daoust, RN, director of Nursing for Global Health and Mary Sebert, RN, international nurse program manager, for providing her with the essential preparation she needed for her trip.

Since 2016, the Global Health Nursing Fellowship has offered opportunities for MGH nurses to provide education and mentorship to nurses in under-served areas around the world. The fellowship has sent more than 20 nurses with experience in oncology, pediatrics, substance-use disorders, and other specialties to resource-limited locations to help improve patient care.

A highlight of Duran's trip was witnessing the survival of an infant born at just 26 weeks gestation—a rare event in Uganda where support for premature babies is limited. Said

Duran, “That little warrior was a fighter. It gave me hope to see what else was possible.”

Duran has kept in touch with her colleagues at Mbarara and plans monthly video conferences with a member of the staff there to discuss the projects they implemented, ongoing educational needs, and any other issues that may arise. Duran is preparing educational lectures that Mbarara nurses can present to one another.

Says Duran, “I hope this is the beginning of a long collaboration with Mbarara Hospital. I loved every minute of it.”

For more information about the Global Health Nursing Fellowship, contact James Cook at 617-724-0284.



(Photos provided by staff)

Service animals at MGH

—by Zary Amirhosseini, disability program manager

Question: What animals are considered service animals?

Zary: Any animal trained to perform tasks for an individual with a disability is considered a service animal. Under current law, only dogs, and in limited circumstances, miniature horses, are legally considered service animals.

Question: What kind of dogs are allowed at MGH?

Zary: Service dogs and dogs that are part of our MGH Pet Therapy Program.

Question: What does a service dog do?

Zary: Service dogs guide people who are blind, alert people who are deaf, assist individuals with mobility issues by carrying bags or pulling wheelchairs, or remind people with mental illness to take prescribed medications. Some animals are trained to calm individuals with PTSD or traumatic brain injury or autistic individuals.

Question: Where in the hospital can my dog accompany me?



Zary Amirhosseini
disability program manager

Zary: Service animals are allowed to accompany individuals with disabilities to admission and discharge offices, inpatient and outpatient rooms, clinics, and cafeterias. Service animals may not be able to accompany handlers to restricted areas such as ICUs, operating rooms, recovery rooms, or labor and birthing rooms.

Question: Are staff allowed to question me about my dog?

Zary: Yes. Under the law, staff may ask you two questions: “Does your dog provide a service?” and “What is your service animal trained to do?” They may not ask about your disability.

Question: Can I bring my emotional-support or comfort dog to MGH?

Zary: No. Only service dogs and therapy dogs that are part of our Pet Therapy Program are allowed at MGH. And remember, service animals are working and should not be petted. Distracting them could put their handlers at risk.

Question: Are they required to wear identifying clothing?

Zary: No. Service animals are not required to any wear special vests or badges. If individuals misrepresent their dogs as service animals, that is punishable by law.

Question: Do service animals have to be leashed?

Zary: Yes, unless being restrained interferes with tasks they're trained to perform.

For more information about the Service Animal Policy at MGH, contact disability program manager, Zary Amirhosseini at 617-643-7148. For questions about the Pet Therapy Program, contact Jackie Nolan at 617-724-1753.

Announcements

Streamlined documentation for Evaluation and Management services in 2019

Consistent with the 2019 Physician Fee Schedule Final Rule, the Centers for Medicare & Medicaid (CMS) have introduced several changes intended to streamline the documentation process for Evaluation and Management services in 2019.

These changes include a reduction in medical necessity documentation required for home visits and a change in who's allowed to document the required history component for E/M services. These changes represent a significant improvement in the documentation process, and we're eager to implement them.

Please continue to document consistent with existing E/M guidelines as we work with key stakeholders to craft a thoughtful plan to implement these changes.

For more information, call Lindsey Reilly, director of Billing Compliance, at 617-643-5711.

ACLS Classes

Certification:
(Two-day program)

Day one:
February 11, 2019
8:00am–3:00pm

Day two:
February 25th
8:00am–1:00pm

Re-certification (one-day class):
March 13th
5:30–10:30pm

CPR Training (\$100):
February 11th
2:00– 6:00pm

Locations to be announced. Some fees apply. For information, contact Jeff Chambers at acls@partners.org.

To register, go to: http://www.mgh.harvard.edu/emergencymedicine/assets/Library/ACLS_registration%20form.pdf.

Conversations with Caregivers

for families, caregivers, patients, and staff

an educational series sponsored by the Dementia Caregiver Support Program

Tuesday, February 19, 2019
5:30-7:00pm
O'Keefe Auditorium

"The Healing Power of Music Therapy for People with Dementia and Their Caregivers," presented by, Suzanne Hanser, professor, Music Therapy, chair emerita, Berklee College of Music

Admission is free; seating is limited.

RSVP to: 617-724-0406.

For more information, call 617-643-8809.

Nursing research funding available

The Yvonne L. Munn Center for Nursing Research is currently offering the following nursing-research funding opportunities:

- The Jeanette Ives Erickson Research Institute Grant (new eligibility criteria)
- The Munn Predoctoral Research Grant for PhD Nursing Students (new grant)

For eligibility guidelines and applications, go to: www.mghpcs.org/MunnCenter/ and select Funding Opportunities.

Applications for both grants are due by March 15, 2019.

For more information, contact Stacianne Goodridge at 617-643-0431.

Office Ergonomic Champion Program

Are you interested in learning how to make yourself or your co-workers more comfortable at the computer? Is working on a laptop challenging?

Friday, March 1, 2019
1:30–4:30pm
Yawkey 4-810

Come for yourself or to learn how to evaluate your co-workers' workstations.

Presented by Arron Ross, ergonomics specialist, PHS Occupational Health Ergonomics Program

Register for sessions on HealthStream, accessible through Partners Applications.

For more information, call Mario Dashi at 857-282-2411.

Blum Center Events

Friday, February 8, 2019

"Heart Disease in Women: not just a Man's Disease"

Join Emily Lau, MD, for a discussion about heart disease among women.

Monday, February 11th

"Food Allergy Management Boot Camp"

Join Michael Pistiner, MD, for an interactive session to understand more about living confidently and safely with food allergies.

Tuesday, February 26th

"Your Weight Matters: 5 Key Steps to a Healthy Weight"

Join Angela Fitch, MD, to learn some practical tools for achieving and maintaining a healthy weight.

Thursday, February 28th

Shared Decision Making
"Help for Anxiety: Treatments that Work"

Join Susan Sprich, MD, for a discussion on ways to treat symptoms of anxiety.

Programs are free and open to MGH staff and patients. No registration required. All sessions held in the Blum Patient & Family Learning Center from 12:00-1:00pm

For more information, call 4-3823.

THURSDAY, APRIL 25, 2019

ANNUAL PATIENT EXPERIENCE AWARDS NOMINATIONS

At MGH, our commitment to Excellence Every Day has always included the promise of an experience for our patients and families that is compassionate and responsive. Service excellence has always gone hand in hand with clinical excellence.

We are pleased to announce that the sixth annual awards program for MGH employees will be focused on achievement in the patient experience.

Nominations are now being accepted for three categories of awards:

- Individuals who put the needs of our patients and their families first
- Leaders who inspire their teams to provide outstanding service
- Departments/Programs/Teams whose work contributes to the patient experience

Note: Employees on corrective action are not eligible

This is a great opportunity to recognize individuals, leaders and departments, programs, and teams that go above and beyond as well as for the great service they provide each and every day.

Online nomination forms can be completed by accessing the following link:

www.surveymoz.com/s3/4783945/Patient-Experience-Award-Nominations-2018

Nominations are being accepted through Friday, February 15.

Award winners will be recognized at a ceremony led by senior leaders on April 25, 2019.

If you have any questions regarding the forms, please email Cindy Sprogis at csprogis@partners.org.

OFFICE OF PATIENT EXPERIENCE



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Submissions

All stories should be submitted to: ssabia@partners.org

For more information, call:
617-724-1746

Next Publication

February 21, 2019

Privacy Guidelines for Clinicians

	Health Care Agent	Guardian	Family Member	Caregiver	Emergency Contact
Role Definition	An individual appointed by a competent adult patient, in a legally binding document (Health Care Proxy - HCP), to make medical decisions if he or she becomes incapable of doing so.	A court-appointed individual that makes medical decisions for a person. Conservators and Limited Guardians have different legal authority.	Any individual identified by the patient as being involved in their care.	An individual identified or designated by the patient to provide them aftercare assistance at home following discharge.	An individual the patient names to be contacted in the event of a medical emergency.
When can I share information?	No information can be shared until the HCP is invoked. Once a patient regains capacity, the HCP is no longer invoked. The patient has the authority to revoke the Agent's authority at any time.	With evidence of a valid guardianship (e.g., court order).	With patient consent: <ul style="list-style-type: none"> • verbal, • implicit • patient is given an opportunity but does not object. 	As soon as practical upon the issuance of a discharge or transfer order.	In an emergency.
What information can I share?	You may share relevant information about the patient's condition to allow the Health Care Agent to make informed medical decisions, subject to any limitations set by the patient in the HCP. A patient may limit the Agent's authority or information they may receive within the HCP.	The Guardian is entitled to the same information as the patient would be to make medical decisions, unless the guardianship is Limited.	Only share what the patient allows. If the patient cannot consent, only share information, if in your professional judgement, you feel given the circumstances sharing is in the patient's best interest.	If patient consents, you may: <ul style="list-style-type: none"> • notify the Caregiver of the patient's discharge or transfer, • discuss the patient's aftercare needs, • give a copy of the patient's discharge instructions if patient signs the section authorizing the release. 	Only share minimal information to notify the person of the nature of the emergency, such as the patient's location and general condition.

Sharing protected health information with patients' families and others involved in their care

MGH is committed to involving patients and families in care-planning and decision-making while at the same time respecting patients' right to privacy regarding their health information. Protected health information includes any information about a person's physical or mental health including medical histories, appointments, and test results—it's any information that can be used to identify a patient or secure health services or insurance coverage. Patients need to provide consent for their information to be shared with family members and others. (See grid at left for guidance around when and how much information can be shared with various interested parties regarding a patient's care.)

Information about each role in the grid, frequently asked questions, and other information can be found at: apollo.massgeneral.org/hipaa/policies/ under Additional Guidance Documents.

For more information, call Brian French, RN, director of the Blum Center, at 617-724-7843.

Caring
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