

Caring

Headlines

March 7, 2019



The MGH Pet Therapy Program

Nursing director, Melissa Jocelyn, RN (front left), and staff of the Ellison 12 Medical Unit were all too happy to pose with MGH pet therapy dog, Daisy, and her handler/owner, Phyllis Kassels (front right).
(See story on page 8)

Nursing & Patient Care Services
Massachusetts General Hospital

Workplace violence

a growing concern in healthcare settings across the country

It's counter-intuitive to think that violence can occur in a hospital—a place that exists for the sole purpose of helping people—but that's the reality in healthcare settings across the country, including, sadly, right here at MGH. This is a troubling trend, and one that weighs heavily on me as chief nurse.

Violence has been directed at all role groups, but studies show that 80% of nurses nationwide report experiencing some form of violence. This is even more unsettling when you consider that violence in hospitals is largely under-reported.

I want you to know that we take violence of any kind very seriously. Key departments throughout the hospital are working together to enable us to track, anticipate, and prevent incidents from occurring.

The Disruptive Patient Behavior Committee reviews safety reports and makes sure safety icons are

placed in the electronic record to alert staff to potential risks and guide them toward appropriate interventions.

Education on how to de-escalate volatile situations was recently disseminated via HealthStream, and we've added a tab to the EED portal page to provide staff with easy access to information related to disruptive patient behavior (www.mghpcs.org/EED).

In January, we began monitoring a new nursing sensitive indicator: Assaults on Nursing Personnel. We'll use this data to help identify and implement strategies to avert similar situations in the future.

I urge you to familiarize yourself with the many resources available here at the hospital (see article on page 4). If you should witness or encounter any kind of physical or sexual assault, first and foremost keep yourself safe, and please, file a safety report.



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

Those of you who provide direct patient care may have your own ideas about how to address these challenges. If so, I would love to hear from you. Caring for patients should never mean putting yourself in harm's way.

Debbie
Debbie Burke

For more information, visit the MGH Disruptive Patient Behavior and Staff Safety portal page at: www.MGHPCS.org/Disruptive-Behavior.

The Code Narrator Survey

have a voice in improving the functionality of the Code Narrator

—by Pat Grella, RN, and Kim Whalen, RN

Feedback from the recent Staff Perceptions of the Professional Practice Environment Survey and eCare rounds has revealed opportunities to improve clinical documentation, especially as it relates to codes and rapid-response scenarios. Though codes and rapid-response situations don't occur frequently, they tend to be highly stressful, and documentation is critical to our ability to assess the quality of our response.

The Pediatric ICU has a history of multi-disciplinary, simulation-based, team training for code documentation. In 2017, nursing practice specialist, Kim Whalen, RN, and chief of Pediatric Critical Care Medicine, Phoebe Yager, MD, began having nurses document codes in the eCare Code Narrator during weekly simu-

lations. It quickly became clear that this was a valuable practice, but frustration with the functionality of the Code Narrator was an issue.

Last year, Whalen, Yager, and Maureen Clark, pediatric research coordinator, conducted a survey of ICUs to glean staff's perceptions of the Code Narrator. Results pointed to a need for the program to be more user friendly and indicated that staff would benefit from simulation training.

Project manager, Pat Grella, and director of the PCS Office of Quality & Safety, Colleen Snyderman, RN, will join Whalen, Yager, and Clark in expanding the survey to include inpatient, perioperative, procedural areas, and the ED.

The survey is designed to collect data related to the Code Narrator to inform how we can:

- improve staff education related to the Code/Response Narrator
- improve the design of the Code/Response Narrator itself

Nurses on inpatient units, in perioperative areas, procedural areas, and the ED are encouraged to participate. The survey can be accessed by signing in using the link you received from unit leadership, or by scanning the code on posters in your area.

The survey should take less than five minutes to complete, and it is anonymous; it is accessible through March 20th. For more information, call Pat Grella at 617-643-5179.

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Workforce safety

numerous resources prioritize staff safety

—by Robin Lipkis-Orlando, RN, director, Office of Patient Advocacy

In 2011, the Disruptive Patient Behavior and Staff Safety (DPB) Committee was convened for the purpose of reducing the frequency and impact of disruptive behavior. Disruptive behavior is defined as:

- behavior that is intimidating, threatening, or dangerous and may pose a risk of harm to staff, patients, or visitors
- verbal abuse, such as name-calling, racial/ethnic epithets, profanity, sexual harassment
- physical abuse, inappropriate touching, unwanted approaches
- behavior that interferes with safe medical care
- behavior that creates fear and interferes with staffs' ability to perform their duties or achieve intended outcomes
- behavior that impedes normal operations (such as excessive calls, e-mails, etc.)

The DPB committee, which has broad inter-disciplinary representation, meets monthly and reviews all safety reports that fall within the disruptive patient behavior category. They assess risk factors, frequency and severity of episodes, the

likeliness of re-occurrence, and make a determination as to whether placement of a safety-risk flag in eCare is warranted. The flag links to a description of the specific behavior and suggests interventions. Acute care plans can be entered in eCare to provide additional information about care needs and plans to ensure safety.

Through safety reports, the DPB committee is continuously apprised of what's happening throughout the organization.

Insights gleaned from reviewing safety reports include:



This tile in the safety reporting system was designed specifically for disruptive events.

- Medical conditions associated with high risk of disruptive behavior include delirium, neuropsychiatric conditions, traumatic brain injury, drug or alcohol intoxication or withdrawal, and pain management
- The most common trigger for disruptive patient behavior is denial of goals, such as: cancellation of procedures, poor outcomes, delayed discharge, a shortage of private rooms, long waits, or simply the word, 'No'
- Physical assaults occur most frequently during the provision of care with patients experiencing altered mental status
- Staff should never approach an agitated patient without appropriate support. It's best to delay or bundle care activities to minimize the risk of harm. Never give oral medication by placing your fingers near a patient's mouth

All employees should be aware of the resources on the opposite page. For more information, contact the Office of Patient Advocacy, at 617-726-3370.

Workforce Safety Resources

The Addiction Consult Team

The Addiction Consult Team (ACT) is a multi-disciplinary service that provides expert consultation and treatment recommendations for patients with substance use disorders (SUDs). See the EED Portal page for additional information.

Employee Assistance Program (EAP)

In response to disruptive patient behavior, the EAP supports staff emotionally and reinforces positive coping strategies, including peer support, management support, self-care outside of work, manager consultations, staff and physician support, and workgroup session. Call 617-726-6938, or toll free: 1-866-724-4EAP (327).

Navigator for Patients with Autism and Other Developmental Disorders

The navigator is a resource for patients with autism and developmental disorders, their families, and staff. The navigator collaborates with multi-disciplinary teams to maximize the patient's comfort and tolerance for care interventions. Contact: Karen Turner at 617 643-6627.

Occupational Health

Occupational Health Services (OHS) protects and promotes the health, safety, and well-being of all employees. Call 617-726-2217.

Office of Patient Advocacy

The Office of Patient Advocacy supports a safe and compassionate environment for all patients and staff and engages in treatment planning to optimize positive outcomes and support staff efforts. Advocates use a variety of strategies to diffuse escalating situations and are often involved in resolving conflict. Call 617-726-3370, or e-mail mghpatientadvocacy@partners.org.

Police & Security

Police, Security & Outside Services provides interventions to reduce risk, assess threats, and make recommendations for enhanced security. They participate in safety planning, serve as stand-bys and escorts, and provide staff training. The SMART team provides a multi-disciplinary response to complex workplace violence and conflict situations. Call 617-726-2111.

Trauma Informed Care

Connie Cruz, RN, at 617-726-7705

Debra Drumm, Social Service, at 617-726-7674

Miscellaneous

Practice Updates and Alerts are accessible on the EED Portal Page: Acute Care Plan, Safety Risk Flag and Care Resistant Behavior.

Policies and Procedures in Ellucid help guide practice, including: Delirium Care Guidelines, Patient Requests to Leave a Patient Care Unit, Search Policy, Visitor Policy, Weapons, and Restraint and Seclusion.

New: for more information visit the MGH Disruptive Patient Behavior and Staff Safety portal page at: www.MGHPCS.org/Disruptive-Behavior.

New STEMI response protocol

—by Meg McCleary, RN, nurse manager, Cardiac Catheterization Lab

MGH treats many patients who've experienced acute myocardial infarction, also known as a 'heart attack.' The most severe type of myocardial infarction is an ST elevation myocardial infarction, or STEMI, which refers to the ST segment of an electrocardiogram, indicating infarction or tissue death. This is often caused by a completely blocked coronary artery due to plaque rupture and clot formation, impeding blood flow and oxygen to the heart.

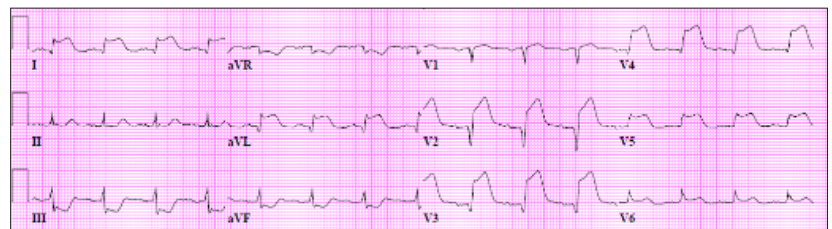
Treatment for this condition is immediate re-vascularization, or a re-opening of the artery via percutaneous coronary intervention in the Cardiac Catheterization Lab. Delaying treatment can lead to complications like cardiogenic shock or even death. Because the condition occurs suddenly, patients typically present to the Emergency Department and are immediately brought to the Cath Lab to have the lesion ballooned and stented, which usually takes about 70 minutes (door to balloon time.) The sooner the artery is re-opened, the higher the chances of survival and positive outcomes.

Recently, the STEMI Committee noted a difference in response time between inpatients who experience STEMI and those who arrive via the ED. Among inpatients, electrocardiogram to balloon time was 120 minutes versus 70 minutes for ED patients.

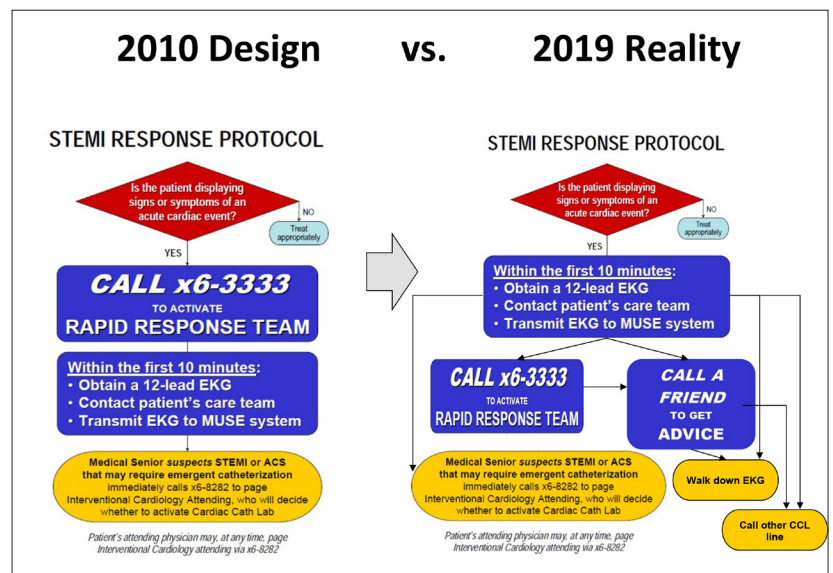
To rectify that discrepancy, Meg McCleary, RN, nurse manager of the Cath Lab, and Ken Rosenfield, MD, medical director of the STEMI Committee, led a process-improvement initiative along with Jordan Akselrad, senior project specialist, Gianna Wilkins, senior process improvement consultant, with input from nurses, advanced practice pro-

viders, and physicians to re-design the protocol. The new protocol (pictured below) is now live and will be monitored closely using the eCare smartphrase, 'Acute MI MGH,' and case review.

For more information, call nurse manager, Meg McCleary at 617-724-6691.



ST segment elevation showing anterior myocardial infarction ('anterior STEMI')





DO YOU SUSPECT STEMI OR ACUTE MI?

FIRST RESPONDER

OBTAIN
ECG

ALERT

TRIGGERS FOR STAT 12-LEAD ECG

- Chest discomfort, acute or worsening shortness of breath, unexplained diaphoresis or nausea
- Acute clinical deterioration (Gray skin-tone, hypotension, hypoxemia, and/or altered mental status)
- ST changes or arrhythmia on telemetry

WITHIN THE FIRST 10 MINUTES



STAT page
Responding Clinician:
"Suspect Acute MI"

AND



Call
Rapid Response*
x6-3333



Print ECG &
Transmit to
MUSE

**Non-Cardiac/ICU units*

RESPONDING CLINICIAN or MED SR

READ ECG

ESCALATE

STEMI CRITERIA

- ✓ **NEW** ST elevation:
 - ≥ 1 mm in at least two contiguous leads
 - ≥ 2 mm (men) or ≥ 1.5 mm (women) in V2-V3
- ✓ **NEW** ST depression in at least two leads V1-V4
- ✓ **NEW** Multi-lead ST depression with ST elevation in aVR
- ✓ **NEW** Left Bundle Branch Block with acute symptoms



Start **.AcuteMIMGH** SmartPhrase in Epic to provide relevant information to clinical team

ONE OR MORE STEMI CRITERIA MET?

YES

Call
Cath Emergency STEMI Line
x6-8282

UNCERTAIN

STAT page
General Cardiology Consult*:
"Suspect Acute MI"

**See Partners Phone Directory for on-call info*



A day in the life of an MGH pet- therapy dog

—by Phyllis Kassels

Meet Daisy, a 5-year-old, 12-pound, miniature poodle and proud member of the MGH Pet Therapy Team since August, 2016.

Every Thursday is a 'work' day for Daisy and her handler/owner, Phyllis Kassels. Even before Daisy officially logs in for her 10am–2:00pm shift, she's greeted by patients and visitors as they pass by—faces brighten, smiles widen, and hands reach out to pet her.

Often staff approach and speak directly to Daisy, asking if she'll come to their unit to visit. Once Daisy gets her assignments, she's off to visit anywhere from 15 to 50 patients in a variety of settings.

The first stop on every unit is always the nurses' station. (Nurses need pet therapy, too!) Daisy greets staff and selfies are taken as everyone wants a picture with 'Daisy the therapy dog.'

continued on next page

Volunteer Services (continued)



Opposite page: MGH pet therapy dog, Daisy, and handler/owner Phyllis Kassels (pink jacket), visit patient, Kelly McGlaughlin, on Ellison 12 Medical Unit; Below, they brighten the day of patient, Dawn Evans, and her family.

With list in hand, we head off to see our first patient.

Imagine you're in the hospital, alone, anxious, or just really missing your own pet. Your nurse asks if you'd like to be visited by a therapy dog. And soon, Daisy and I come to your room.

We're met with smiles, laughter, questions, and requests for selfies as patients snuggle up next to Daisy. They speak directly to her, sometimes in different languages—Spanish, Italian, Portuguese—they never want her to leave.

When we finally say good-bye, we often hear patients calling home to tell their family about the visit. Then it's on to the next room and the next unit.

Every patient is different, but the smiles, the laughter, those few minutes you spend with them really help patients forget their medical concerns for a little while.

There's no getting around how soothing the company of a dog can be. When we go into a patient's room, I can tell if they're not happy. But when they see Daisy, they just light up. Family and friends also look forward to Daisy's visits; they say it makes them feel better, too.

Sometimes, people are curious about how dogs become therapy dogs; they have to pass the Canine Good Citizen test given by the Pets and People Foundation and demonstrate that they're at ease and enjoy being touched and petted by unfamiliar people.

When people thank us for the visit, we always tell them we have the best 'job' in the world.

For more information about the Pet Therapy Program at MGH, call Jackie Nolan, director of Volunteer Services, at 617-724-1753.

Professional Achievements

Appointments

Mary Guanci, RN

Director at Large
American Association of
Neuroscience Nurses

Member, Guideline Committee
Neurocritical Care Society

Virginia Heikkinen, RN

Member, Board of Directors
Co-chair, Massachusetts
extension
Case Management Society of
New England

Elyse Levin-Russman, LICSW

President
Association of Pediatric
Oncology Social Workers

Gayle Peterson, RN

Board of Trustees
Leadership Society
American Nurses Association

Safe Patient Handling
Stakeholders Workgroup
The Massachusetts Health &
Hospital Association

Awards

Laura Dickman, LICSW

2018 Rookie of the Year
Association of Pediatric
Oncology Social Workers

Ellen Robinson, RN

Certificate of Honor for a
Lifetime of Leadership and
Dedication to Patient Care
and the Nursing Profession
American Nurses Foundation

Presidential Citation for
service to the American
Society for Bioethics and
Humanities
American Society for Bioethics
and Humanities

Poster Presentations

Sylvie Render, SLP
Kristina Wilson, SLP

Adriane Baylis, SLP
Kristen DeLuca,
Lynn Marty Grames, SLP
Cheryl Hersh, SLP
Amy Linde, SLP
Kerry Callahan Mandulak, SLP
Kazlin Mason, SLP
Dennis Ruscello, SLP
Alison Scheer-Cohen, SLP
Amy Shollenbarger, SLP
"Overview on feeding an
infant with a cleft palate"
American Speech-Language
Hearing Association National
Convention
Boston

Amy Shollenbarger, SLP
Chelsea Sommer, SLP
Adriane Baylis, SLP

Kristen DeLuca
Lynn Marty Grames, SLP
Cheryl Hersh, SLP
Amy Linde, SLP
Kerry Callahan Mandulak, SLP
Kazlin Mason, SLP
Dennis Ruscello, SLP
Alison Scheer-Cohen, SLP
Kristina Wilson, SLP

"Therapy: techniques for speech
sound disorders associated
with cleft palate"
American Speech-Language
Hearing Association National
Convention
Boston

Cheryl Hersh, SLP
Kaylee Paulsgrove, SLP
Adriane Baylis, SLP
Kristen DeLuca
Amy Linde, SLP
Kerry Callahan Mandulak, SLP
Lynn Marty Grames, SLP
Kazlin Mason, SLP
Dennis Ruscello, SLP
Alison Scheer-Cohen, SLP
Kristina Wilson, SLP

"Evaluation of speech
disorders associated with cleft
palate and velopharyngeal
dysfunction"
American Speech-Language
Hearing Association National
Convention
Boston

Cheryl Hersh, SLP
Sarah Sally, SLP
Lara Hirner, SLP
Rebecca Baars, SLP
Melissa Woythaler, DO
Jill Israelite, RD
Lauren Fiechtner, MD
Christopher Hartnick, MD
"Alexa, will my baby drink
this? Reducing thickener
through half-strength liquid
consistencies"
American Speech-Language
Hearing Association National
Convention
Boston

Jen Maietta, SLP

"Exploring dose frequency
for articulation therapy in the
outpatient setting"
American Speech-Language
Hearing Association National
Convention
Boston

Mary McAdams, RN

Sheila Golden-Baker, RN
"Achieving desired outcomes
that meet strategic
organizational goals"
Association of Nursing
Professional Development
Convention
Lake Buena Vista, Florida

Kathleen Miller, RN

"Acute pulmonary insufficiency
following surgery"
Association of Clinical
Documentation Improvement
Specialists Conference
San Antonio, Texas

Emilia Motroni, SLP

Amy Izen, SLP
Maria Sylvia, SLP
"Los pollitos: a caregiver-
centered curriculum in speech/
language group therapy"
American Speech-Language
Hearing Association National
Convention
Boston

April Moura, RN
Alyssa Hotes, RN
Maura McMahon, RN
Susan Mullany, RN
Charlene O'Connor, RN
"Intraoperative pressure injury
presentation"
AORN Global Surgical
Conference and Expo
New Orleans

Ashley Paula, RN

"Tracheal resection and
reconstruction: a collaborative
approach"
AORN Global Surgical
Conference and Expo
New Orleans

Jason Santoro, RN

Dale Spracklin, RN
Lauren Wheeler, CST
Jane Ouellette, RN
"Embracing change"
AORN Global Surgical
Conference and Expo
New Orleans

Zfania Tom Korach, MD

Sarah Collins, RN
Kenrick Cato
Min Jeoung Kang, RN
Kumiko Schnock, RN
Brittany Couture
Christopher Knaplund
Kimberly Whalen, RN
Jennifer Thate, RN
Patricia Dykes, RN
Li Zhou, MD
"Active learning for the
identification of nurses'
concerns from nursing notes"
American Medical Informatics
Association Conference
San Francisco

Min Kang

Patricia Dykes
Tom Korach
Li Zhou
Jennifer Thate
Kimberly Whalen, RN
Kumiko Schnock
Christopher Knaplund
Brittany Couture
Kenrick Cato
Sarah Collins
"Identifying and Rating
Concepts of Nurses' Concerns
Using a Standard Nursing
Terminology"
American Medical Informatics
Association Conference
San Francisco

Professional Achievements (continued)

Presentations

Amanda Copeland, SLP
Melissa Ghiringhelli, SLP
Jeana Kaplan, SLP
Kay Seligsohn
Michelle Pollard, SLP
Anya Maloney, SLP

"Improving patient care through interdisciplinary collaboration and caregiver involvement"
American Speech-Language Hearing Association Convention
Boston

Adriana Doyle, SLP
Alison Rhodes, RN
Erin Scott, MD
Erin Stevens, DO
April Zehm, MD

"Navigating difficult decisions in serious illness: conversations tough to swallow!"
American Speech-Language Hearing Association Convention
Boston

Mary Guanci, RN

"When errors occur: communicating with patients and families"
Neurocritical Care Society
Boca Raton, Florida

Jennifer Freeburn, SLP
Amy Maguire, SLP

"SLP care models for adults with primary brain tumor"
American Speech-Language Hearing Association Convention
Boston

Mary Shannon Fracchia, MD
Cheryl Hersh, SLP
Stephen C. Hardy, MD
Christopher Hartnick, MD
"What's new in the pediatric aerodigestive center?"
MGH Pediatrics Conference

Allison Holman, SLP
Rachel Kammer, SLP
Jeremy Richmon, MD
Tessa Goldsmith, SLP
"The robot and the swallow: current practices of TORS and dysphagia management"
American Speech-Language Hearing Association Convention
Boston

Rebecca Inzana, SLP
Carmen Vega-Barachowitz, SLP
Mary Knab, PT
Trisha Zeytoonjian, RN
Maureen Schnider, RN
"Preparing clinicians to be effective interprofessional clinical instructors: a faculty development workshop"
American Speech-Language Hearing Association Convention
Boston

Rachael Kammer, SLP
Francesca Carducci
Carol Sullivan, RD
Annie Chan, MD

"It takes a village: transitioning to a reactive G-tube policy for patients with oropharynx cancer"
American Speech-Language Hearing Association Convention
Boston

Elyse Levin-Russman, LICSW
Laura Dickman, LICSW
"Clinical challenges and ethical dilemmas in allocating financial resources to pediatric oncology families"
Association of Pediatric Oncology Social Workers
Austin, Texas

Elyse Levin-Russman, LICSW
Stacy Stickney Ferguson, LICSW
Wendy Shama, RSW
"Becoming a leader in pediatric oncology social work: possibilities and opportunities"
Association of Pediatric Oncology Social Workers
Austin, Texas

Katie Lynch, RN
Samantha Soldani, RN
Michelle Specht, MD
Connie Leehman, MD
"Advances in caring for patients with breast cancer"
AORN Global Surgical Conference and Expo
New Orleans

Amy Maguire, SLP
SLPS in the OR: do we have a role?"
American Speech-Language Hearing Association Convention
Boston

Paige Nalipinski, SLP
Sarah Luppino, RN
Mary Knab, PT
"Pearls of wisdom for clinicians who rarely see ALS patients: unique and critical management considerations"
American Speech-Language Hearing Association Convention
Boston

Jill Taylor Pedro, RN

"Evaluation of discharge education: an educational intervention to improve patient safety with opioid medications"
Sigma Theta Tau International Leadership Connection
Indianapolis

Ellen Robinson, RN
Rabbi Ben Lanckton

James Doran
Erica Long, MDiv
"Ethical conflict in patient care: the contribution of chaplaincy in achieving resolution"
Spirituality and Patient Care Conference, MGH
Boston

Ellen Robinson, RN
Laura Lux, RN
Caitlin Laidlaw, LICSW
Samantha Sullivan, RN,
Cornelia Cremens, MD
"Clinicians' and ethics consultants' experiences in caring for a patient at end of life in the setting of family persistent request for life sustaining treatment"
Spirituality and Patient Care Conference, MGH
Boston

Ellen Robinson, RN
James Hynds
Daniel Davis
Joseph Raho
"Back to the future: revitalizing the concept of 'tradition' in the teaching of medical ethics"
American Association of Bioethics Conference
Anaheim, California

Ellen Robinson, RN
Barbara Chanko, RN
Mark Swope
Mary Beth Benner
George Hardart, MD
"Health care ethics certification practice session"
American Association of Bioethics Conference
Anaheim, California

Ellen Robinson, RN
Elizabeth Epstein, RN
Pamela Grace, RN
Christine Mitchell, RN
"What does nursing have to offer bioethics?"
Annual American Association of Bioethics Conference
Anaheim, California

Ellen Robinson, RN
Carol Pavlish, RN
Katherine Brown-Saltzman, RN
Joan Henriksen
"Co-advocate: a program to prevent ethical conflicts and moral distress"
National Teaching Institute for Critical Care Nurses
Boston

Ellen Robinson, RN
"Looking inward and amongst colleagues as a strategy to enhance professional caregiving"
National Nursing Ethics Conference
Los Angeles

Ellen Robinson, RN
Thomas McCoy, MD
Julia Bandini
"MGH Optimum Care Committee Research Program: it takes a village"
Harvard Medical School Center for Bioethics
Boston

Stephanie Scibilia, SLP
Julie MacPherson, RRT
"Interprofessional care for adults with tracheostomy tubes and ventilators: conversations with respiratory therapy"
American Speech-Language Hearing Association Convention
Boston

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Professional Achievements (continued)

Stacey Sullivan, SLP
Jeremy Schmahmann, MD
 "Beyond the balancing act: SLP role management of patients with cerebellar disorders"
 American Speech-Language Hearing Association Convention
 Boston

Maria Sylvia, SLP
Emilia Motroni, SLP
 "Can videos increase attendance and patient preparedness for speech-language evaluations?"
 American Speech-Language Hearing Association Convention
 Boston

Beth West, RN
Rebecca Minehart, MD
Erik Clinton, MD
 "Using simulation to improve safety on Labor and Delivery"
 Northern New England Perinatal Quality Improvement Network Meeting
 Dartmouth, New Hampshire

Carmen Vega-Barachowitz, SLP
Rebecca Inzana, SLP
Alex Johnson, SLP
Lynne Brady Wagner, SLP
Marjorie Nicholas, SLP
Mary W. Hildebrand, OTR/L
Peter Cahn
Regina Doherty, OTR/L
Patricia Reidy, RN
 "Neuro interprofessional education: linking pedagogy and practice"
 American Speech-Language Hearing Association Convention
 Boston

Carmen Vega-Barachowitz, SLP
Alex Johnson, SLP
Patricia Prelock, SLP
Elizabeth Adams
Mary Knab, PT
 "Leading innovation in IPE/IPP in audiology and speech-language pathology graduate programs"
 American Speech-Language Hearing Association Convention
 Boston

Mary Zwirner, LICSW
 "What about quality of life: a reality check"
 Mass. General Survivorship in Patients with Malignant Glioma Conference
 Boston

Publications

Carol Pavlish, RN
Ellen Robinson, RN
Katherine Brown-Saltzman, RN
Joan Henriksen
 Chapter: "Moral distress research agenda"
Moral Distress in the Health Professions

Cornelia Cremens, MD
Ellen Robinson, RN
Keri O. Brenner, MD
Thomas H. McCoy, MD
Rebecca W. Brendel, MD
 Chapter: "Care at the end of life"
Handbook of General Hospital Psychiatry

Barbara St. Marie, RN
Paul Arnstein, RN
Phyllis Arn Zimmer, RN
 "Pain and opioids: call for policy action"
The Journal for Nurse Practitioners

Joseph Zenga, MD
Tessa Goldsmith, SLP
Glenn Bunting, SLP
Daniel Deschler, MD
 "State of the art: rehabilitation of speech and swallowing after total laryngectomy"
Oral Oncology

Tessa Goldsmith, SLP
Marlene Jacobson
 "Managing the late effects of chemoradiation on swallowing: bolstering the beginning, minding the middle, and co-creating the end"
Current Opinion in Otolaryngology and Head and Neck Surgery

Leslie Hamilton, RPh
Mary Guanci, RN
Michelle Hill
Patricia Blissett, RN
 "Clinical Q&A: translating therapeutic temperature management from theory to practice"
Therapeutic Hypothermia and Temperature Management

Maureen Hemingway, RN
Patrice Osgood, RN
Mildred Mannion, RN
 "Implementing a cardiac skills orientation and simulation program"
AORN Journal

Einav Nachman
Peter Clemensen
Katheryn Santos
Alexis Cole
Brian Polizzotti
Grace Hofmann, RRT
Kristen Leeman, MD
Sarah Van Den Bosch
John Kheir, MD
 "A device for the quantification of oxygen consumption and caloric expenditure in the neonatal range"
Anesthesia & Analgesia

Allison Holman, SLP
Gemma Clunie
Justin Roe
Tessa Goldsmith, SLP
 "Management of swallowing in adults undergoing laryngo-tracheal resection and reconstruction"
Perspectives of the ASHA Special Interest Groups

Elliana Kirsh
Matthew Naunheim
Allison Holman, SLP
Rachael Kammer, SLP
Mark Varvares, MD
Tessa Goldsmith, SLP
 "Patient-reported versus physiologic swallowing outcomes in patients with head and neck cancer after chemoradiation"
Laryngoscope

Chanu Rhee, MD
Michael Filbin, MD
Anthony Massaro, MD
Amy L. Bulger, RN
Donna McEachern, RN
Kathleen Tobin, RN
Barrett Kitch, MD
Bert Thurlo-Walsh, RN
Aran Kadar, MD
Alexandra Koffman, RN
Anupam Pande, MD
Yasir Hamad, MD
David Warren, MD
Travis Jones, RPh
Cara O'Brien, MD
Deverick Anderson, MD
Rui Wang
Michael Klompas, MD
 "Compliance with the national SEP-I quality measure and association with sepsis outcomes: a multi-center retrospective cohort study"
Critical Care Medicine

Andrew Courtwright, MD
Emily Rubin, MD
Ellen Robinson, RN
Souheil El-Chemaly, MD
Daniela Lamas, MD
Joshua Diamond, MD
Hilary Goldberg, MD
 "An ethical framework for the care of patients with prolonged hospitalization following lung transplantation"
HEC Forum

Andrew Courtwright, MD
Emily Rubin, MD
Ellen Robinson, RN
Arwin Thomasson, MD
Souheil El-Chemaly, MD
Joshua Diamond, MD
Hilary Goldberg, MD
 "In-hospital and subsequent mortality among lung transplant recipients with a prolonged initial hospitalization."
American Journal of Transplantation

Courtenay Bruce

Professional Achievements (continued)

Jane Jankowski
Barbara Chanko, RN
Ann Cordes
Barrie Huberman
Liza-Marie Johnson, MD
Deborah Kasman, MD
Aviva Katz MD
Ellen Robinson, RN
Katie Wasson
George Hardart, MD
"The work of ASBH's clinical ethics consultation affairs committee: development processes behind our educational materials"
The Journal of Clinical Ethics

Sunah Hwang, MD
Patrice Melvin
Hafsatou Diop, MD
Margaret Settle, RN
Jack Mourad, MD
Munish Gupta, MD
"Implementation of safe sleep practices in Massachusetts NICUs: a state-wide QI collaborative"
Journal of Perinatology

Mary Colleen Simonelli, RN
Louise Doyle, RN
MaryAnn Columbia, RN
Phoebe Wells, RN
Kelly Benson, RN
Christopher Lee, RN
"Effects of connective tissue massage on pain in primiparous women after Cesarean birth"
Journal of Obstetric Gynecologic & Neonatal Nursing

Paige Nalipinski, SLP
Stacey Sullivan, SLP
Chapter: "Management of a patient with amyotrophic lateral sclerosis: focus on patient autonomy and quality of life"
Clinical Cases in Dysphagia

Certification

Terry Doherty RN
Critical Care Registered Nurse
American Association of Critical Care Nurses

Harriette Green, RN
Medical Surgical Nursing Magnet Certification
American Nurses Credentialing Center

Laura Marmion, RN
Medical Surgical Nursing Certification
American Nurses Credentialing Center

Donna McEachern, RN
Nurse Executive Advanced-Board Certification
American Nurses Credentialing Center

Emily Menart, LICSW
Certified Clinical Transplant Social Worker
Society of Transplant Social Workers

Michael Sills, RN
Reiki II Practitioner Certification
Open Doors Healing

Kimberly Walker, RN
Certified Operating Room Nurse
Association of PeriOperative Registered Nurses

Clinical Recognition Program

Clinicians recognized December 1, 2018–February 1, 2019

Advanced Clinicians:
Anne Borden, RN
General Surgery

Laura Dickman, LICSW
Social Work

Stephanie Fiandaca, RN
Emergency Department

Margaret Ford, RN
Psychiatry

Naomi Harmon, RN
Oncology/Bone Marrow Transplant Unit

Christine Jelenik, OTR/L
Occupational Therapy

Kathryn Kirkland, RN
Oncology

Todd Mover, RRT
Respiratory Therapy

Emily Rumble, RN
Neurosciences

Brandon Sutton, RN
Thoracic/Vascular Surgery

Clinical Scholar:
Erin Graves, RN
Emergency Department

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

For more information, call: 617-724-1746

Next Publication

March 21, 2019

(Submit professional achievements to Georgia Peirce at gwpeirce@partners.org)

Anyone for a spot of tea and some relaxation?

—by Kate Gerne, pediatric spiritual care provider; and Jean Gardner-Amore, RN, staff nurse

On Wednesdays, the scent of lavender wafts through the halls of the Blake 10 Neonatal ICU as tea is brewed for staff. Pediatric spiritual care provider, Kate Gerne, transforms the NICU conference room into a calming space for Resiliency Rounds, giving clinicians a chance to pause and renew.

Gerne sets a table with a small tea pot, teacups, and baked goods and ushers the bouquet of lavender-scented oils into the air.

Says Gerne, “It’s impossible to drink hot tea quickly from a china cup. Using teacups requires you to slow down and pay attention.”

As staff enter, Gerne serves each person a cup of tea. “This is a time when they don’t have to take care of anyone else. They only have to show up and be willing to be present in this community.”

Gerne invites staff to form a circle and leads them in guided meditation or a body relaxation scan. Asking, “What is the emotional temperature of the unit?” she creates a space for staff to reflect on their work and their day.

Staff nurse, Jean Gardner-Amore, RN, says, “I’ve sensed an increase in morale since Kate started doing Resiliency Rounds, even among those who don’t participate. I think it’s the increased resilience of those around them. It’s important to carry that centered intention into our daily practice.”

Gardner-Amore provides ‘take-away’ practices that staff can use during the day, such as reminding them to take a deep breath, release tension, and center themselves as they perform minor tasks.

Says Gardner-Amore, “Being centered in the moment makes every caring action we take, every word we speak, every healing touch we provide, more authentic and effective.”

For information about Resiliency Rounds, call the Spiritual Care Department, at 617-726-2220.



Announcements

Celebrate Certified Nurses Day

**Thursday, March 14, 2019
10:00am – 1:00pm**

Certified Nurse information
table in the Main Corridor

**Thursday March 14th
1:30pm–2:30pm
O’Keeffe Auditorium**

Special Nursing Grand
Rounds, “Finding Joy in
Work,” presented by Peg
Baim, RN, and presentation
of the Jean Ridgway Tienken
MGH School of Nursing
Class of 1945 Certification
Scholarships.

All certified nurses will
receive a 2019 Certified
Nurses Day pin, and any
nurse seen wearing one
will be eligible to receive
a coupon for a free coffee
at Coffee Central.

For more information,
call Tricia Crispi, RN, at
617-643-8613.

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 Pre-Doctoral
Research Grant for
Nursing Students (new
grant)

For eligibility guidelines and
applications, go to: [www.
mghpcs.org/MunnCenter/](http://www.mghpcs.org/MunnCenter/)
and select Funding Opportun-
ities.

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

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

Conversations with Caregivers

for families, caregivers,
patients, and staff

an educational series
sponsored by the Dementia
Caregiver Support Program

**Tuesday, March 19, 2019
5:30–7:00pm
O’Keeffe Auditorium**

“Solving the Driving
Dilemma: DriveWise®
Driver Evaluation Program,”
presented by Ann Hollis,
OTR/L DriveWise®
occupational therapist,
Cognitive Neurology Unit,
Beth Israel Deaconess
Medical Center

Admission is free; seating is
limited.

RSVP to: 617-724-0406.

For more information,
call 617-643-8809.

Blum Center Events

Monday, March 11, 2019

“Overcoming Substance
Use Stigma in Healthcare
Settings”

Join Dan Johnson, MD, to
learn about the negative
impact of substance use
stigma and the painful
emotions and behaviors that
occur in response.

Wednesday, March 13th

“Understanding Lymphedema”
Join Catherine Holley, RN,
to learn about primary and
secondary lymphedema
and how to manage this
condition.

Wednesday, March 20th

“Understanding Optimal
Weight and Nutrition in
Children and Adolescents”
Join Fatima Cody Stanford,
MD, to learn about the
importance of weight and
nutrition, and get tips on
how to practice healthy habits.

(This session will be
streamed live and recorded
on the MGH Facebook
page at: [facebook.com/
massgeneral](https://facebook.com/massgeneral).)

Monday, March 25th

“Food Allergy Management
Boot Camp: Creating
Communities of Support
for Students with Food
Allergies”

Join Michael Pistiner, MD, to
learn strategies for dealing
with food allergies.

Blum Center Events (continued)

Wednesday, March 27th

“Mass General Cancer
Center Genetic Series:
Hereditary Colon Cancer”
Join Devanshi Patel to learn
more about colon-cancer-
causing genes and what to
do if colon cancer runs in
your family.

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.

ACLS Classes

Certification:
(Two-day program)

Day one:
**June 10, 2019
8:00am–3:00pm**

Day two:
**June 11th
8:00am–1:00pm**

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

CPR Training (\$100):
**June 10th
2:00– 6:00pm**

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

To register, go to:
[http://www.mgh.harvard.
edu/emergencymedicine/
assets/Library/ACLS_
registration%20form.pdf](http://www.mgh.harvard.edu/emergencymedicine/assets/Library/ACLS_registration%20form.pdf).

National Patient Safety Awareness Week

"Speak up for safety" Calendar of Events

Tuesday, March 12th

8:00–9:00am, O'Keefe Auditorium

Pediatric Grand Rounds: "Patient Safety, Quality and Experience... where do they intersect?"

Presented by: Fiona Levy, MD, Executive Director, Sala Institute for Child and Family-Centered Care, Vice Chair for Clinical Affairs, Department of Pediatrics, Hassenfeld Children's Hospital, NYU Langone Health (Sponsored by MGHFC)

10:00–11:00am, O'Keefe Auditorium

"Evidence-Based Fall Prevention: Translating More Than a Decade of Research into Practice"

Presented by: Patricia Dykes, RN, Program Director, Center for Patient Safety Research and Practice, Brigham and Women's Hospital

10:30am–2:00pm, White Lobby

"Speak Up for Safety" Education Table

Thursday, March 14th

7:30–9:00am, Thier Conference Room

Anesthesia/Surgery Grand Rounds: "10% Happier Healthcare Teams: a Patient Safety Strategy"

Presented by: Dan Harris, Correspondent, ABC News and Co-Author, Weekend Edition, *Good Morning America*

Sponsored by Anesthesia, Surgery, and Perioperative Nursing

(Live streaming available in Bigelow Amphitheater and Shriners Auditorium)

12:00–1:00pm, O'Keefe Auditorium

"Organizational Grit"

Presented by: Thomas Lee, MD, Chief Medical Officer, Press Ganey (Sponsored by the Edward P. Lawrence Center for Quality & Safety)

MASSACHUSETTS
GENERAL HOSPITAL
PATIENT CARE SERVICES

MASSACHUSETTS
GENERAL HOSPITAL
PCS QUALITY & SAFETY

Patient Safety Awareness Week Featuring



Patricia C. Dykes, PhD, MA, RN, FAAN, FACMI
Program Director, Nursing Research
Lead Investigator, Falls TIPS Studies at Brigham and Women's Hospital
Associate Professor, Harvard Medical School

Use of a fall prevention tool kit in hospitals compared with usual care significantly reduced rate of falls (Dykes, Carroll et al, JAMA 2010)

*Evidence-Based
Fall Prevention:
"Translating over
a Decade of
Research into Practice"*



[Register by clicking here](#)
Contact hours
will be awarded



Tuesday March 12th, 2019, 10-11am, O'Keefe Auditorium, Blake 1

Norman Knight Nursing Center for Clinical & Professional Development at Massachusetts General Hospital is an approved provider by the Ohio Nurses Association as an accredited provider of continuing nursing education by the American Nurses Credentialing Center's Commission of Accreditation (0001-001-910) (04-239, 10/1/2020)
Criteria for successful completion include attendance at the entire event and submission of a completed evaluation form.
There is no conflict of interest for anyone in a position to control the content of this activity.

Friday, March 15th

11:00am–2:00pm, White Lobby

"Speak Up for Safety" Education Table

Thursday, March 21st

1:30–2:30pm, O'Keefe Auditorium

"Speak Up for Staff Safety" Panel Discussion



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