

Patient Experience
Awards



Congratulations to all the teams and individuals recognized by this year's Patient Experience Awards, including the MGH Spiritual Care Department (team award) and staff chaplain Kate Gerne (insert, individual recognition). Pictured above (I-r, front-to-back) are: Gerne; Donna Blagdan; Julie Supple; Wendy Tabb; and director, Alice Cabotaje. Not pictured: Diana Donahue; Shulamit Izen; Ben Lanckton; Erica Long; Uchenna Awa; Rebecca Doverspike; Wilson Hood; Elam Jones; Eunjoo 'Christine' Park; Elsir Sanousi; Sam Seicol; Tom Powers; Mikael Bassale; Matthias Wamala; Ron Golini; Jim Doran; and Van Loc Doran.

COVID-19: planning for a second wave

Whether, or when, there will be a second wave of the coronavirus is uncertain, but to ensure we're ready for whatever the future may hold, planning and preparing for a second wave is a top priority. Associate chief nurse, Sue Algeri, RN, is coordinating COVID planning efforts for Patient Care Services and is working closely with other leaders and members of the Hospital Incident Command structure.

We're fortunate that our work is informed by knowledge gained during the first wave. More than a hundred informational sessions have been conducted with staff to allow us to tap into the lessons and insights they took away from their experiences caring for COVID patients. We know that two-way communication—providing information to staff and receiving feedback from staff— will be key in any potential second wave.

We've organized our planning efforts into the work groups listed below, including a partial list of each group's membership:

- Communication:
 - representatives from Staff Nurse Advisory
 - representatives from Health Professions Advisory Groups
 - Collaborative Governance Committee leaders
 - Vanessa Zottola, Blake 12 ICU
 - Elzbieta Gilbride, White 10 Medicine

- Staffing:
 - Jessica Millholland, Blake 7 MICU
 - Briana Costello, Blake 12 ICU
 - Noreen McCarthy, White 3 PACU
 - Laura Cameron, Ellison 3 PACU
 - Jesse MacKinnon, Lunder 9 Oncology
 - Meghan Costello, Bigelow 9 Medicine
 - Manami Hamada, Bigelow 9 Medicine
 - Kris Cote, Bigelow 14 Medicine
 - Marlisa Larkin, White 10 Medicine
 - Erin Iandoli, Blake 8 Cardiac SICU
 - Kim Murphy, Bigelow 6 PICU
- Maria Lavadinho-Lemos, Yawkey 8 Infusion
- Amanda Flynn, Blake 14 Labor
 & Delivery
- Jenna Delgado, Ellison 16 Oncology/Medicine
- Unit Conversion:
- Devon MacKinnon Ford, Blake
 12 ICU
- Talor Miller, Ellison 4 SICU
- Elena Ream-Rodriguez, Ellison
 4 SICU
- Angela Reddington, Lunder 6 Neuro ICU
- Jared Jordan, Lunder 7 Neurology
- Anne Marie Dewey, Blake 7 MICU
- Kerin Erickson, Blake 7 MICU
- Information Technology:
 - Meghan Roche (Collaborative Governance Informatics)
- Molly Higgins, Lunder 10 Oncology



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

- Sophia Mooney, Blake 14, Labor
 & Delivery
- Christina Lynn Burke, Lunder 10 Oncology
- Emily Doyle (Collaborative Governance Informatics)
- Patient Care Services Clinical Informatics
- Training and Education:
 - Advanced clinicians
 - Clinical scholars
 - Brian Curry Krieger, Ellison 19 Thoracic/Vascular
- Employee Experience:
 - Briana Costello, Blake 12 ICU
 - Briana Buckley, Bigelow 13 RACU
 - Virginia Clarke, CRP, Neurology
 - Catherine Welder, Blake 7 MICU
 - Pamela Griffin, Ellison 4 SICU
 - Genevieve Claire Bradley, case manager
- RN/MD Focus Group:
 - Kimberly Cheevers, Bigelow 6 PICU
 - Allie O'Hara, Lunder 9 Oncology
 - James Bradley, White 7 Surgery
 - Kathy Goins, White 10 Medicine

Debbie's Photo Gallery

- Julie Heislein, Ellison 4 SICU
- Elena Ream-Rodriguez, Ellison 4 SICU
- Samantha Ahle, Blake 8 Cardiac SICU
- Susana Silva Guevara, Ellison 12 Medicine
- Kim Flynn, PACU
- Jessica Hulton, Blake 8 Cardiac SICU

Input from clinical nurses and front-line staff will be vital for all work groups. The more we hear from clinicians who worked 'in the trenches,' the better prepared we'll be to deal with a surge, if and when it comes.

Work groups are still being finalized; staff from all disciplines and role groups are encouraged to participate. If there's a particular work group you'd like to contribute to, speak to your manager or supervisor, or reach out directly to the work group leader.

I'm confident we're well-positioned to meet whatever challenges the second wave may bring. In the words of legendary quarterback, Joe Namath, "First, I prepare. Then, I have faith."

We are prepared. And I have faith in each and every one of you.

Debbie Burke



At left: Mass General Disaster Response Team deployed to Baton Rouge General Medical Center in Louisiana in the aftermath of Humicane Laura.

Below: Mass General nurses, Kim Cheevers, Aileen Patel, Asen Jamir, George Lillie, and Lisa Flynn spoke with Vanessa Welch of Boston 25 News about what it was like to work on the front lines during the surge.



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(Debbie Burke's photo by Joshua Touster')

Volunteer Opportunities

Disaster response teams offer professional growth and excitement

—by Jacky Nally, RN, and Stefanie Lane, MGH Center for Disaster Medicine

Want to add some excitement to your life? Have you considered volunteering for a hospital-based response team? The MGH Center for Disaster Medicine's Biothreat Response Team, comprised of more than 100 employees, is continuously ready to care for patients with Ebola and other high-consequence infectious diseases (HCID). Volunteers for this team are recruited from ICUs, the Emergency Department, and Bigelow 9.

The MGH HAZMAT Response Team is comprised of more than 70 volunteers from throughout the hospital. The team uses a rotating availability structure to facilitate a 24/7 rapid initial response. The team is trained to provide largescale screening and decontamination for patients and visitors during mass-casualty events that involve chemical, biological, or radiation contamination.

HAZMAT team members participate in at least four trainings a year. They train in the necessary personal protective equipment (PPE) and gain insight into hospital operations during disaster response episodes.

The HAZMAT team encompasses multiple role groups and departments; no clinical or prior disaster experience is necessary to volunteer.

HAZMAT team members train with medical and technical specialists, including the Special Operations Unit at the Boston Fire Department and the Center for Domestic Preparedness in Alabama. It's a great opportunity to work with a diverse

team of individuals in a unique and exciting way.

For more information or to volunteer for the MGH HAZMAT Disaster Response Team, contact Jacky Nally (jnally@mgh. harvard.edu) or Stefanie Lane (slane18@mgh.harvard.edu).





Some scenes from MGH disaster response teams' field exercises and training drills.

COVID Re-Deployment Narrative

Pandemic a 'blessing in disguise' for IV nurse

—by Jeanmarie Fallon, RN, IV nurse

Life as I knew it as an IV nurse changed dramatically when the COVID-19 pandemic hit. The coronavirus had infiltrated our hospital, and our Mass General Command Center was responding.

On Thursday, April 9, 2020, I received an e-mail from PCS Management Systems asking if I'd help care for patients and support my colleagues working in general care and/or intensive care units. As an IV nurse for the past 15 years and an MGH nurse for 25 years, all I could think was, Holy cow, what will I be doing?

I arrived on Bigelow 7, a general medical unit, and was greeted by nursing director, Marie Borgella. The unit was full, busy, and many of the regular staff had been called away to serve on COVID units. Marie provided me with a surgical cap, just as she had for her regular staff. Attending nurse, Jenna Cole, set me up on a computer and helped me update my eCare skills. She paired me with Billie Jo, a seasoned nurse, to precept me the first day, and we dove right in. Billie Jo was patient and encouraging. "Don't worry," she said, "you'll pick it up quickly."

The next day I was paired with Karli Kazanovicz, a new nurse of two years. She was smart, kind, and



Jeanmarie Fallon, RN, IV nurse

took the time to explain everything to me. Thinking back on it now, it's amazing that I was placing a Foley catheter on my second day on the unit. The first few days are always the worst in terms of anticipation and anxiety. After that, I'd go home every night thinking, "How can I do it better tomorrow!"

Marie and Jenna set up a Zoom meeting with social worker, Brie Haseotes, and spiritual care resident, Christine Park, to give staff an opportunity to de-stress as we dealt with the very stressful COVID-19 pandemic. Some nurses called in from home, others gathered in a little prayer room on the unit.

Christine was lovely. She asked us to open our hands (since we were physically distancing and couldn't hold hands). She led with a prayer, then invited the group to share our feelings about our deployments, the pandemic, and personal struggles. I didn't feel comfortable sharing because this was a new environment for me, and I wasn't accustomed to feeling so anxious.

The team on Bigelow 7 was so compassionate; they had soft-spoken words of kindness that allowed me to open up and share my feelings. It felt like a kind of 'divine protection.' Here I was on a medical unit with co-workers side-by-side helping one another, and a nursing director motivating staff and lifting morale during a crisis. Bigelow 7 felt like the calm in the storm.

As the days went on, Marie would frequently say, 'Don't drown alone.' It became a kind of mantra on the unit as this team functioned so well together, everyone helping one another and learning together.

This is a very brief account of what it felt like taking care of new patients on a new unit during our response to this unprecedented pandemic. My deployment to Bigelow 7 was a blessing in disguise. I have accepted a permanent position on Bigelow 7 and will be staying on for continued growth.

I look forward to sharing my IV skills with Bigelow 7 nurses and continuing to learn from this impressive team. We have a lot to learn and a lot to share.

Patient menus available in multiple languages

-by Susan Doyle, RD, Patient Food Services



Clinical Pastoral Education Graduation

—by Rabbi Shulamit Izen, certified educator

"Your visit was like medicine," a patient in the Emergency Department told one clinical pastoral education resident. "My heart was racing. Now I feel calm. The way you listened to me let me feel safe."

On August 28, 2020, five residents graduated from the MGH Clinical Pastoral Education (CPE) program. Accredited by the Association of Clinical Pastoral Education, the program prepares students to become board-certified professional spiritual care providers.

Throughout their year-long training, residents accompanied thousands of patients and families as

they learned of new diagnoses, said good-bye to loved ones, or tried to make sense of their new circumstances.

Residents sat with patients wrestling with spiritual questions and learned how to lean in to the meaning behind the questions, join patients in the uncertainty of the unknown, and help them draw on their own strength, resiliency, and hope.

The CPE residency concluded during the COVID-19 pandemic, so residents had an opportunity to provide connection and consolation through both on-site and virtual interactions.

In collaboration with colleagues from Social Work, the Employee Assistance Program, and Spiritual Care, residents facilitated process groups for unit staff.

"In the midst of this chaos you've given me a moment to breathe," said one nurse to a CPE resident.

Throughout this eventful year, residents showed up to every encounter with spacious hearts, ready to meet life in all its complexities.

The Spiritual Care Department offers an intensive summer CPE program and a year-long CPE residency. Clinicians from all disciplines who'd like to integrate spirituality into their professional practice are encouraged to apply.

For more information, contact Rabbi Shulamit Izen, at 617-726-2226.

2019-2020 clinical pastoral education residents (I-r): Uchenna Awa, Rebecca Doverspike, Wilson Hood, Christine Park, and Elam Jones.

Research to support your practice

You may recall seeing a link to the Munn Center website in issues of the COVID-19 newsletter that was published during the height of the pandemic. The Munn Center website features articles, guidelines, standards, and evidence that may be helpful to clinicians caring for COVID patients, family members, and one another.

Caring for COVID-positive patients is highly complex, and the science driving best practice is constantly evolving. But in reality, all patients who come to Mass General require complex, individualized care. And best practices in specialty-care and general-care areas are always evolving, as well.

To ensure clinicians have access to the latest research and information, the Munn Center will continue to provide and curate materials on their website that are pertinent to your practice. Starting with this issue of Caring Headlines (see next page), the Munn Center will include references to select articles and abstracts chosen specifically to support current practice. Each entry will include a link to the Munn Center website where you can go to learn more.

This information is for educational purposes only; it should not be re-produced or sold without the express permission of the authors.

For more information, call the Munn Center at 617-643-0431.



Look for this image to find summaries and referrals to the latest research articles and abstracts.

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Submissions

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

For more information, call: 617-724-1746

Next Publication October, 2020

This month's featured topic

Reflections on immunization use: research and evidence

—by Dorothy A. Jones, RN

The following is an overview of the revised position statement on immunizations, adopted by the ANA Board of Directors, in July, 2020.

Introduction: The COVID-19 pandemic has heightened our awareness of the importance of immunizations and the emerging standards and guidelines being advanced that may influence attitudes, use, access, and demand for immunizations in the future. As the flu season approaches and efforts to develop a COVID vaccine continue, nurses are in a key position to educate, inform, and promote the use of vaccinations for flu-prevention and other diseases and conditions. This article offers information that may be useful in helping patients and families make informed decisions about immunization.

Summary:

Historically, the American Nurses Association (ANA) has strongly supported immunizations to protect the public from highly communicable and deadly diseases such as measles, mumps, diphtheria, pertussis, and influenza (ANA, 2019; ANA, 2015; ANA, 2006), and has supported mandatory vaccination policies for registered nurses and health care workers under certain circumstances. Considering several recent and significant measles outbreaks in the United States, as well as the global pandemic of COVID-19, the ANA has reviewed its current position statement for clarity and intent and examined present best practices and recommendations from the broader health care community. Based on that review and the recommendation of the ANA's 2019 Membership Assembly, a revised and updated position statement was developed.

Go to: https://www.mghpcs.org/ MunnCenter/research-update.asp, to read more about this position statement and other articles pertaining to immunizations. For more information, call the Munn Center at 617-643-0431.



Look for this image to find summaries and referrals to the latest research articles and abstracts. Go to: https://www.mghpcs.org/MunnCenter/research-update.asp, to read more about this position statement and other articles related to immunization.

Support

Tools and advice for staying optimistic

Work and life resources provided by the Employee Assistance Program

Life in the age of COVID presents many challenges, not the least of which is staying optimistic about the future. The Employee Assistance Program has developed a series of tips to help staff maintain a positive outlook as we navigate the difficulties of this pandemic together:

- Be aware of your negative thoughts. Stop and listen to the messages you're sending yourself. If you have negative thoughts about a situation, try replacing them with positive ones. You could say something like, "I can handle this." You have control over how you view a situation. Try replacing negative thoughts with positive ones
- Engage in positive self-talk. Create alternate responses to negative thoughts. For example, if you're thinking, "I'll never be able finish this project," try replacing it with, "I can break it down into smaller steps." If you're thinking, "I don't know how to do that," try, "It'll be good to learn something new."
- Bring more humor into your life. Tap into the power of laughter. Rent funny movies, hang cartoons on your refrigerator, enjoy humorous songs and stories with friends
- Spend time with optimistic people. Research shows that moods and ideas are contagious. Chronic
 complainers can bring you down even if you aren't aware of it. Spend as much time as you can with
 optimistic people who lift your spirits
- Practice gratitude. A pessimistic outlook can cause you to lose sight of the things you're thankful for; practicing gratitude can help restore the balance. Spend a few minutes each day thinking about the good things in your life. Try keeping a 'gratitude journal,' writing down the things you're grateful for
- Recognize what you can and can't control. You can feel pessimistic when you dwell on the things you can't control. Do what you can to improve the things you can control
- Develop or maintain healthy routines. Optimism is easier to maintain when you feel good physically and mentally. Maintain a healthy diet and get plenty of sleep and exercise
- Get help if you have unwanted negative thoughts that won't go away. The Employee Assistance
 Program can provide guidance if you're experiencing persistent negative thoughts that interfere with
 your work, relationships, or enjoyment of life

For more information, employees and their household members can contact the Employee Assistance Program by calling 866-724-4327.

Recognition

2019 Patient Experience Awards

Score-Based Awards

Outpatient Awards

Got Urgent Care Appointment

- Dermatology Surgery
- Obstetrics
- Revere Family Care
- Thoracic Surgery

Provider Communication

- General Neurology
- Interventional Cardiac Associates
- Weight Center

Staff Courteous

- Movement Disorders
- Neurobehavioral
- Physical Medicine & Rehabilitation Spine
- Physical Therapy: Sports

Inpatient Awards

Doctor Communication

- Blake 6, Transplant
- Phillips 22, GYN / Surgical
- White 7, Surgical
- White 9, Medical
- White 10, Medical

Room Cleanliness

- Lunder 8, Neuroscience
- Lunder 9, Oncology

Quiet at Night

- Lunder 9, Oncology
- Phillips 22, GYN / Surgical

Staff Responsiveness

- Lunder 8, Neurosciences
- Lunder 9, Oncology

Other Awards

Ambulatory Surgery: Response to Concerns/Complaints

- MGH West, Orthopaedic Surgery
- North Shore, Orthopaedics

Ambulatory Surgery: Information About Delays

- North Shore, Gastroenterology
- North Shore, General Surgery
- North Shore, Orthopaedics

Nomination-Based Awards

Individual Awards

Kate Gerne Pediatric Chaplain, Spiritual Care

Ahcene Gherbi Information Desk Associate, Information Desks

Leah Giunta, NP Nurse Practitioner, Bulfinch Medical Group

Lori Hooley, RN Charlestown HealthCare Center

Jennifer O'Malley Simoes, RN Nurse, Blake 8 ICU

Olympia Price Scheduling Assistant, Medicine

Dean Russell Resource Unit Service Associate Eileen Rogers Technologist, Imaging

Jennifer Shin, MD Oncologist, Cancer Center

Theresa Stephens Patient Service Coordinator, IMA

Josep Vicente Community Health Worker Chelsea Health Center

Leadership Awards

Jennifer Bronsdon Program Coordinator, Revere Health Center

Diane Foley Operations Manager, Musculoskeletal Imaging

Meghan Manley Technical Manager, Imaging – MRI Triffin Psyhojos, MD Chief of General Surgery Anesthesia

Erica Shenoy, MD Associate Chief, Infection Control Unit

Cheryl Tierno, RN Nurse Director, Blood Transfusion Service

Team Awards

Division of Obstetric Anesthesia

Emergency Department, Physician Assistants

Inpatient PACU Leadership Team

Medical Walk-In Unit

MGH Psychiatry Academy

Patient Food Service Managers

Spiritual Care Department

Special thanks to General Patient and Family Advisory Council (PFAC) members who selected this year's recipients.

Recognition

Knight Center's TTP program accredited with distinction

—by Gino Chisari, RN; Jennifer Curran, RN; and Brian French, RN

On April 2, 2020, representatives from the American Nurses Credentialing Center (ANCC), the same organization that bestows Magnethospital designation, informed the Knight Nursing Center for Clinical & Professional Development that its Transition to Practice Program had been accredited with distinction. Our Transition to Practice Program is the first nurse residency in the city of Boston to achieve accreditation and the first in the nation to receive distinction under the new, more stringent, 2020 standards.

The Transition to Practice Program (TPP) is our highly successful nurse residency program that grew out of the success of our critical-care and oncology nurse residencies.

When the decision was made to seek ANCC accreditation, critical-care and oncology nurse leaders came together with Jen Curran, RN, TPP program director, to begin the process.

Earlier this year, just as COVID-19 was making the news, ANCC appraisers conducted a virtual site visit, hosted by Debbie Burke, RN, senior vice president for Patient

Care; Gino Chisari, RN, director of the Knight Center; and Curran. Past and current nurse residents, preceptors, and critical-care and oncology nursing leaders participated in the four-hour conference call.

Many individuals worked hard to transform this 'home-grown' nurse residency into a successful model for transitioning new nurses into highly complex clinical settings. The Knight Center would like to acknowledge the invaluable contributions of our associate chief nurses; nursing directors; clinical nurse specialists; and nursing practice specialists; as well as Michelle Doran, RN; Brian French, RN; Marianne Ditomassi, RN; John Co, MD; James Gordon, MD; and Gaurdia Banister, RN.

Upon hearing the news, Burke said, "This honor provides much-deserved recognition of our program to transition new-graduate nurses safely into practice."



The Transition to Practice Program Team

COVID19 Update



NEW - Universal Mask & Eye Protection Policy

Effective July 31, 2020, eye protection and a mask are required for *all clinical encounters* regardless of COVID-19 status.

New recommendations from the Center for Disease Control (CDC) and Massachusetts Department of Public Health (MDPH) state that wearing eye protection during all clinical encounters:

- Provides additional protection in the event a patient is not wearing a mask, takes the mask off or the clinician needs to remove the mask.
- Establishes a reliable standard of practice.
- Should be used *even if* a patient has tested negative for COVID-19.

<u>Patient encounter</u>: Staff who have sustained (> 10 minutes) face to face interactions with patients within 6 feet require Massachusetts General Brigham (MGB)-approved eye protection.

Eye protection: Wear only MGB-approved, hospital-issued safety glasses, goggles or face shields.







Consideration should be given to the risk of splash with blood or body fluids to determine the best eye protection needed.

Personal glasses are never considered eye protection.

Refer to Apollo's Coronavirus Information page for COVID-19 related information and resources.

REMEMBER:

- Extended use and reuse are required if the face shield or goggles have not been soiled, contaminated or damaged.
- All eye protection must be used <u>without time limit</u> and cleaned and stored as long as they
 are not damaged and retain their structural integrity.

Review Updated Policy here.



August 5, 2020

PCS QUALITY, SAFETY & PRACTICE

Professional Achievements

Poster Presentations

Lundquist, D Berry, D Boltz, M

DeSanto-Madeya, S

Grace, P

"I'm still Mom": young mothers living with advanced breast cancer'

Eastern Nursing Research Society Scientific Sessions, Boston

Lundquist, D Capasso, V Nipp, R Jimenez, R

McIntyre, C Juric, D

"Describing the Phase I Oncology Clinical Trial Population: a Retrospective Chart Review'

Oncology Nursing Society Congress San Antonio, Texas

Alpha Chi Research Program Boston

Nursing Research Day, Massachusetts

Melonas, D Capasso, V Lundquist, D

"Telehealth as an Additional Nursing Resource to Monitor Patients in an Ambulatory Oncology Phase I Clinical Trial Unit"

Nursing Research Day, Massachusetts General

Awards

Chris Shaw, RN

Exceptional Advanced Practice Clinician/ Mentor Award MGH Institute of Health Professions School

of Nursing

The MGH Transition to Practice Program

Accredited with distinction

American Nurses Credentialing Center

Presentations

C. Snydeman, PhD, RN; K. Miguel, RN, MM-H; V. Capasso, APRN, PhD, CWS

"Proning: Face Down, O2 Saturations Up! Balancing Lung Function and Pressure Injury Risk''

Webinar sponsored by Office of Nursing Services,

US Department of Veterans Affairs, Washington, DC

P. Hilton; J. Earwood; V. Capasso; M. Martin; and M. Hutchinson

"Proning using Safe Patient-Handling Mobility Approach"

Webinar sponsored by Office of Nursing Services,

US Department of Veterans Affairs, Washington, DC

Appointments

Sarah Byrne-Martelli, DMin, BCC

Member, Board of Directors, Association of Professional Chaplains

Publications

Lundquist, D Berry, D

Boltz, M DeSanto-Madeya, S

Grace, P

"Wearing the Mask of Wellness: the experience of young women living with advanced breast cancer" Oncology Nursing Forum

Lundquist, D Berry, D

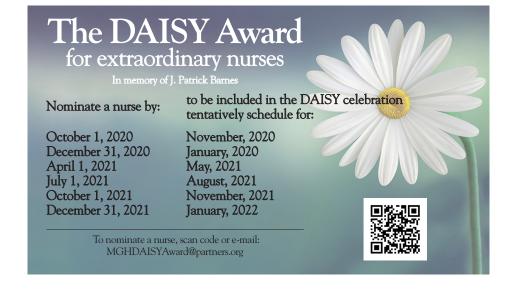
"Experiences of adolescents and young adults living with advanced cancer: an integrative review" Oncology Nursing Forum

Lundquist, D Berry, D Boltz, M DeSanto-Madeya, S Grace, P

I'm Still Mom: Young Mothers Living With Advanced Breast Cancer Oncology Nursing Forum

Padden, S Abraham, E Viscosi, E Habin, K Lundquist, D

"Cutaneous metastases: a case study on clinical care for patients Clinical Journal of Oncology Nursing



Announcements

Virtual Conversations with Caregivers

An educational series for clinicians, hospital staff, and community members, sponsored by the Dementia Caregiver Support Program

Thursday, September 24, 2020 I:00–2:00pm

"Caregiver rescue: skills to create moments of relief and rest"

Join Zoom: Meeting ID: 923 4868 7779 Passcode: 638417 Or dial 1-646-876-9923

RSVP to nmozzone@mgh. harvard.edu.

For more information, call 617-643-8809.

ACLS Classes

Registration times will be staggered to allow for COVID safety.

Certification: (Two-day program)

Day one: October 5, 2020 8:00am-3:00pm

Day two: October 21st 8:00am-12:00pm

CPR Training (\$100) November 6th 2:00– 5:30pm

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.

MGH Central Flu Shot Clinic

The MGH Central Flu Shot Clinic will run from September 22nd through December 12th. Clinic is open to patients 9 years old and older.

Times: Monday through Friday 7:00am–6:00pm Saturday 8:00am–12:00pm

Exceptions: Columbus Day Monday, October 12th 7:00am-1:00pm

The day before Thanksgiving Wednesday, November 25th, 7:00am-1:00pm

Thanksgiving weekend Thursday, November 26th through Saturday, November 28th Closed

Location: Russell Museum of Medical History and Innovation 2 North Grove Street

Parking: Visitors to the Flu Shot Clinic may park at any MGH garage for up to one hour at no charge.

Important Information About COVID-19

All patients and visitors are screened for possible symptoms of COVID-19 and given a mask to wear. If you have upper respiratory symptoms including fever, sore throat, or cough, please postpone your visit. The flu clinic is often busiest during the early morning and late afternoon. To minimize crowding and promote physical distancing, patients are encouraged to plan their visit outside of these times. The flu shot does not protect against COVID-19.

On-line Blum Center programs

Wednesday, September 23rd 12:00–1:00pm

"Alcohol and older adults: a complicated and concerning relationship" Link to attend: https://partners.zoom. us/j/94614620041

Tuesday, September 29th 12:00–1:00pm

"Midwifery Care for Women in Recovery" Link to attend: https:// partners.zoom. us/j/91285068907

Wednesday, October 14th 12:00–1:00pm

"Down syndrome across the lifespan: addressing medical and psychosocial needs in the healthcare setting" Link to attend: https://partners.zoom. us/j/94506996409

Friday, October 16, 2020 12:00–1:00pm

"Your family health portrait: how and why to learn about your family history of cancer and other health conditions" Link to attend: https://partners.zoom. us/j/92486845997

Tuesday, October 20th 12:00–1:00pm

"Beyond BRCA: hereditary breast cancer genes" Link to attend: https:// partners.zoom. us/j/91478991086

Friday, October 23rd 12:00–1:00pm

"Setting the stage for healthy eating habits" Link to attend: https:// partners.zoom. us/j/98 | 44885698

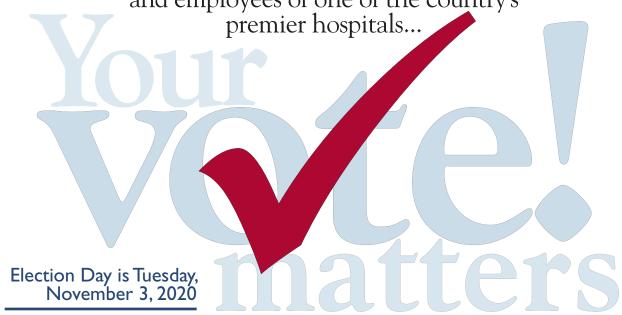
Monday, October 26th 12:00–1:00pm

"The family dinner project: creating meaningful connections through conversation"
Link to attend: https://partners.zoom.
us/j/99069712521

For more information, call 617-724-3823.

Civic Responsibility

As citizens, parents, brothers, sisters, aunts, uncles, and employees of one of the country's premier hospitals...



All Massachusetts voters can apply to vote by mail. Massachusetts also offers early voting in person before Election Day and on Election Day. Polling places will be open from 7:00am to 8:00pm.



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