

Caring

Headlines

December, 2020

Neonatal ECMO simulation training



See story on
page 6

Members of the inter-disciplinary Neonatal ECMO Team confirm placement of cannula during recent simulation training.

Nursing & Patient Care Services
Massachusetts General Hospital

Debbie Burke

2020: a year like no other in recent memory

I want to start by saying it was an absolute privilege to work with you this past year. In the face of unexpected, unprecedented circumstances, you came together like the world-class team I've always known you to be. You put the well-being of our patients ahead of all else, delivering the best possible care to each and every patient and family.

Every member of our workforce contributed, whether on the front lines or working from home. Every employee's efforts supported our ability to respond to the COVID pandemic quickly, professionally, and successfully.

Many of you were asked to practice in unfamiliar settings for the greater good. It was heartening to hear stories of how new staff were welcomed with open arms and precepted by experienced clinicians, proving once again that adversity doesn't build character—it reveals it.

Your actions helped not only the patients who came through our doors, but countless others who will benefit from the knowledge and expertise we gained and will share through publications, presentations, and all the other ways we influence practice and drive the pursuit of excellence.

Every member of our workforce contributed, whether on the front lines or working from home. Every employee's efforts supported our ability to respond to the COVID pandemic quickly, professionally, and successfully.

As we prepare for the next phase of COVID, I know we're ready, informed by the work you all did in phase I and by the incredible suggestions and ideas you shared to improve care and operations.

And in those moments when you pause to reflect, remember: you're part of the greatest healthcare team in the world. You are the first line of



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

defense against this virus. You're the reason so many of our patients and families left the hospital having survived this pandemic. And, make no mistake about it, you are heroes in the truest sense of the word.

Wishing you all health and happiness in the new year.

Debbie
Debbie Burke

Debbie's Photo Gallery



Scenes from our recent DAISY Award presentations.

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(Debbie Burke's photo by Joshua Iouster)

Winter
2020

DAISY honorees



Brianna Meade, RN
Blake 12 CU



Kate Anastasi, RN
Plastics and Burn ICU

From letter of nomination:

"My 84-year-old father was transferred to MGH. I found out that he has one of the fastest growing cancers. Even though so much information was flooding in, staff made sure I understood everything that was happening. But one nurse in particular stands out—and that's Brianna. Her sense of compassion is unmatched.

"We had been planning my wedding, which was scheduled for May of next year. Every little girl needs her dad at her wedding. Brianna reached out to the chaplain and social worker, and together they put together the most heartfelt wedding ceremony so that my dad could be there. There aren't enough words to describe how grateful I am to Brianna and the whole Blake 12 team. She helped me create wonderful memories during such a difficult time. I'm so thankful Brianna was one of the nurses caring for my dad. Thank-you, Brianna. You are a superhero!"

From letter of nomination:

"My arrival in the ER was filled with so many memories. I had taken my husband there a year and a half ago, and he died from a brain bleed and seizures. Now, very sick myself, I remembered the anxiety and outcome of my husband's battle and feared for myself. Kate listened when I told her of my fear and of missing my husband after 50 years of marriage. She reassured me that I wasn't going to die. Katie was clear about all aspects of my care, explaining things clearly and inviting me to ask questions and share my feelings. When my anxiety rose, she was very observant and slowed down to acknowledge my concern and give me a straight answer that made sense and brought my breath back to normal. She seemed like a long-time professional.

"Every morning when the 'rounding team' arrived at my bed, she was always there, off to the side, listening, and absorbing information. This is an outstanding nurse who has learned well and is a terrific role model for other nurses. Thank-you, Kate!"

DAISY Awards

Established by Bonnie and Mark Barnes in 1999 in memory of their son Patrick, DAISY Awards recognize the clinical skill, compassion, and care provided by nurses to patients and families every day. The awards are a surprise to recipients—the first inkling of a celebration is when senior vice president for Patient Care, Debbie Burke, RN; Lore Innamorati, RN, DAISY coordinator; and members of the DAISY Selection Committee arrive on their unit with DAISY banner, cinnamon buns, and other goodies.

DAISY nominations are ongoing. For more information, or to nominate a nurse, go to: <https://www.mghpcs.org/eed/daisy>, or scan the QR code at right.



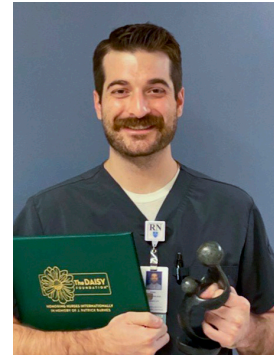
Recognition (continued)



Amanda Norton, RN
Bulfinch Medical Group



Emily Lloyd, RN
Pediatric ICU



Ryan Keogh, RN
Blake II Psychiatric Unit

From letters of nomination:

“Amanda is a remarkable nurse and human being. She is brilliant, compassionate, dedicated, a true asset to our practice... The COVID pandemic created so many new tasks. Amanda took the lead, working long hours on the front lines and keeping us all updated on the latest information... Patients who’ve had any interaction with Amanda always tell me how helpful and wonderful she is. It’s my absolute privilege to work with Amanda.”

“Amanda is an amazing, kind, caring nurse. She has the ability to empathize with patients from all walks of life. One day when we were short-staffed for a Spanish interpreter, the patient became anxious. Amanda stayed calm and positive. “Don’t worry,” she said, “I speak Spanish. Everything is going to be fine.” It was reassuring to both me and the patient... Amanda is a wonderful nurse. We’re very fortunate to have her in our department. She truly exemplifies what a nurse should be and strives to be the best every single day.”

From letter of nomination:

“My son was born three months early. We were told to prepare for the worst. After a brief stay in the PICU, he was discharged, but six months later, he landed back in the PICU. Emily remembered him and his history. My wife is a high-strung mother who needs immediate answers. Emily listened, showed compassion, and gave my wife thoughtful answers that put her mind at ease.

“My son had a hard time coming off pain medication after surgery. Emily saw to his medical needs, but also treated his emotional needs. She held his hand, spoke gently to him, and did everything humanly possible to keep him calm. After five days, Emily was the first to get a smile from him. I became emotional knowing that at the worst time in my son’s life, he was able to feel love and happiness from someone he’d only known a few days.

“Staff in the PICU are the best I’ve ever come across. For Emily to stand out shows the kind of nurse she is. The care she gave my son will have a life-long effect on our family. We are forever grateful for Emily.”

From letter of nomination:

“Ryan was recently assigned to an 85-year-old gentleman who had transferred to our unit following surgery and pacemaker placement. The patient was depressed and voicing thoughts of suicide following a recent cancer diagnosis.

“Ryan was vigilant about monitoring this patient. He took the initiative to designate a sitter and increase the frequency of assessments. When Ryan detected a change in the patient’s mental status, he wasted no time paging the appropriate parties and activating the Rapid Response Team. Ryan remained at the bedside during the entire event providing clear, consistent reports and advocating for his patient.

“Ryan continued to advocate for the patient even after he was taken urgently to the OR. Events like this happen often and are handled well by many. But Ryan is a new graduate nurse. The skills he demonstrated were well beyond that of a new grad. We’re truly lucky to have Ryan on our unit.”

Neonatal ECMO Simulation

—by Katie Delack, NP, neonatal nurse practitioner

Caring for critically ill newborns who require life-sustaining treatment such as extracorporeal membrane oxygenation (ECMO) is a high-stress situation that requires the coordination of highly trained specialists working together as a unified team. In the Neonatal Intensive Care Unit (NICU), the multi-disciplinary team providing ECMO to our most vulnerable patients includes ECMO perfusionists, respiratory therapists, pharmacists, the NICU and pediatric surgical teams, representatives from the Blood Center, and an OR team.

On October 22, 2020, following months of planning, this team came

together to conduct a large-scale, ECMO training simulation focused on enhancing communication and clinical skills. Simulation is an incredibly effective tool for rehearsing high-risk/low-frequency situations such as neonatal ECMO. It gives clinicians an opportunity to practice clinical and technical skills without risk to an actual patient.

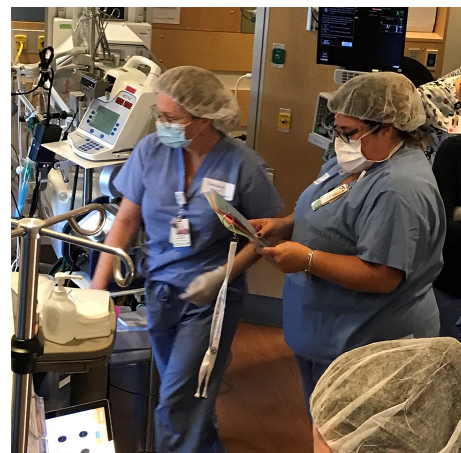
Simulation also gives the team a chance to identify opportunities for improvement and builds trust between disciplines that carries over to real-life, non-ECMO situations.

Many participants met regularly to plan the event. Cheryl Dowd, NP, lead neonatal nurse practitioner, crafted a specialized mannequin that could be can-

nulated and placed in the ECMO circuit. ECMO coordinator, Jeliene LaRocque, worked with pediatric surgeons to create a pressurized, closed circuit to replicate the vascular system of a newborn. Pharmacy and Blood Center colleagues ensured we had products that could be used as medications and blood for the simulation.

Following the simulation, a debriefing was held for the team to share feedback about the experience and identify areas for improvement. The next simulation is scheduled for January, 2021, with the hope of conducting simulation training quarterly to ensure staff are prepared to provide the best possible care to neonatal patients and their families.

For more information, e-mail Katie Delack, NP, at kdelack@mgh.harvard.edu.



(Left): NICU nurse, Emily Peacock, RN, prepares for ECMO simulation. (Right): respiratory therapists/ECMO specialists, Kathleen Figurido, RRT (left), and Danielle Doucette, RRT, prepare ECMO circuit.

Transgender Day of Remembrance

—by Josue Espinoza, Rabbi Shulamit Izen, and Mitchell Kellaway

On November 20, 2020, more than 80 MGH employees gathered via Zoom to observe Transgender Day of Remembrance, honoring the more than 350 transgender, non-binary, and gender-diverse people around the world who were targeted and killed this past year—36 in the United States alone.

The first Transgender Day of Remembrance was observed in 1999 as a way to honor and raise awareness about murdered transgender, non-binary, and gender-diverse people. Now an international observance, the day was first observed locally in 1998 when Rita Hester, a black transgender woman, was killed in Allston, Massachusetts.

Hester's murder led to candlelight vigils, resistance marches, and the beginning of efforts to track fatalities so that no life or death would go unmarked.

This year's service featured trans healers, Féi Hernandez and Malachi Lily, whose poetry and art inspire resilience and hope.

The service featured the following blessing by trans poet, jay dodd.

Imprecatory Prayer to the Transestors

To the Trans Ancestors and Elders who have guided us here, we honor your legacy with new celebrations.

May our bodies persist, let them shine whole and well.

May our minds calibrate to the call of the universe.
Let our protest songs transfigure to peace hymns.
Let our cultural knowledge produce nourishment.
May our homes bustle warm with abundant love.
May our communities flourish despite borders.
Let our love quake open any lingering shackle.
Let our joy obliterate any festering contempt.
As we bind each other closer, we manifest futures more possible.

For more information, or to support the trans community at MGH, contact the Transgender Action Group at: TransActionGroup@mgh.harvard.edu.



Art work shared by trans artists, Féi Hernandez (left) and Malachi Lily (right).

Social Work, Knight Nursing Center collaborate on innovative approach to self-care

In response to feedback provided by staff during the first phase of the COVID pandemic, The Knight Nursing Center for Clinical & Professional Development in collaboration with Social Service, developed a poster on mindfulness and breath-awareness as a form of stress-management. The poster can be found on the Nursing & PCS Apollo page (<https://apollo.massgeneral.org/coronavirus/pcs-resources/>) under both the Education and Resources for Staff (Resiliency) tabs.

MINDFULNESS – Another Type of PPE

PSYCHOLOGICALLY PREPARED ENGAGEMENT

Begin your shift with Breath Awareness

Try beginning your workday by taking a moment to pause for a ‘Mini’. Minis are quick and easy exercises designed to release tension, deepen relaxation, and increases clarity of thought.

A start of shift Mini: While breathing in and out, repeat to yourself....

“I know I am breathing in” --- “I know that I am breathing out”

“Breathing in makes me calm” --- “breathing out I am relaxed”

“Breathing in I smile” --- “breathing out I am grounded”

During the Day Reminders: Stop!

#1. Self-awareness and positive self-talk are calming and helps to reduce anxiety.

- “I am bringing my best to this day”
- “We know more about COVID than we did 9 months ago”
- “I can ask for support and help when I need it”

During the Day Reminder: Reflect!

#2. Schedule ‘pauses’ to refocus during the day.

- When you sit at the computer to begin documentation use the breathing Minis to rebalance and refresh
- when Calstatting, pause and take 4 long, slow breaths

During the Day Reminder: Breath!

#3. Physical sensation Minis combine breath awareness with a **physical focus**, such as:

- Self-massage your hand
- Stretch and yawn periodically
- When walking, count four paces as you breathe in and four paces as you breathe out

During the Day Reminder: Refresh!

#4. Check in with your colleagues ...remind each other to ‘**stop, breath, reflect, refresh**’

- Share humor and laugh together
- Share appreciations with each other and words of encouragement
- Encourage each other to take breaks, eat lunch or dinner
- Reminded one another to drink more water

End of day: Establish a habit or create a ritual to close the workday

As you collect your things at the end of your shift, bring an awareness that the workday is ending. Recall something that you did that was skillful, brought relief or comfort to patient or family members, or brought you satisfaction or joy

Remember that moment and allow yourself to **feel** and **relive that positive moment**.

Mindfully change clothes or put on coat.

Now leave the hospital with the day behind you.

Content developed by Mary Susan Convery, LICSW, clinical social work specialist

Reflections on nurse-led research strategies in a virtual world

—by Sara Looby RN, nurse researcher

The following is an overview of, “Eliciting perspectives of the key study population: an effective strategy to inform advertisement, content, and usability of an on-line survey for a national investigation,” from *Contemporary Clinical Trials Communications*

Introduction: Virtual research and educational activities have become paramount during the COVID-19 pandemic. Research strategies, including the use of on-line study methods, social media, and virtual advertising are helpful for research participant engagement and recruitment, though effectiveness may vary based on specific study populations. Utilizing focus-groups to seek perspectives and feedback from representative members of a proposed study population—prior to launching a research study—could be a valuable strategy to inform the development of appropriate/effective recruitment materials and usability of virtual investigational tools.

Summary:

People with HIV were recruited to participate in a focus group to elicit feedback on the content and design of an on-line survey on the knowledge of added sweetener and consumption (intended for adults with HIV); and usability of the survey, which was launched nationally in the United States. Ten participants attended the focus group (age 55; 60% male; 70% from diverse racial and ethnic backgrounds; 60% annual income less than \$25,000).

Participants rotated through three stations to complete questionnaires evaluating survey content, advertisement imagery and taglines, and ease in accessing and navigating the

survey via computer or device. Participants engaged in open dialogue to discuss potential community and web-based recruitment strategies familiar to people with HIV.



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 on this subject.

Findings from the focus group helped investigators identify and select advertising and recruitment strategies that were appealing to people with HIV, refine and improve clarity/layout of survey content, and enhance usability of the survey.

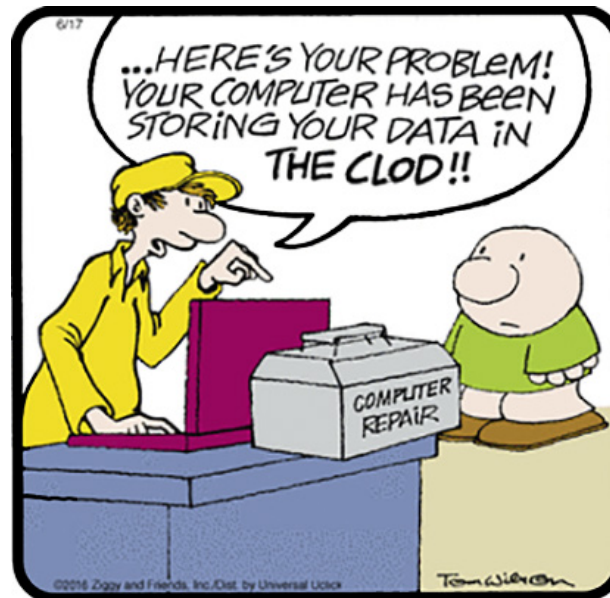
Ultimately, 900 participants enrolled in the national on-line survey study. Prospectively engaging individuals from a key study population in the early phase of study development may be an effective strategy in developing virtual study methods and recruitment/advertisement materials designed for a specific population.

Don't have time for that? Solve your 'stupid stuff'

Sponsored by the MGPO Frigoletto Committee on Physician Well-Being and Mass General Springboard Studio, the new We Solve Stupid Stuff campaign was launched to help clinicians rid their practice environment of annoying distractions or unnecessary problems that inhibit their ability to deliver quality care.

The on-line We Solve Stupid Stuff portal offers clinicians a platform to share poorly designed systems, ongoing issues that interfere with smooth operations, or just plain 'stupid stuff' that adds stress to their daily work. The goal is to provide help in addressing these issues so clinicians can focus their attention on caring for patients.

Piloted last year, the We Solve Stupid Stuff campaign received more than 450 reports of problems ranging from broken equipment to issues with eCare, the physical environment, prior authorization, and tracking CME credits for re-credentialing.



If you identify something that frustrates you or hinders your daily work, go to the We Solve Stupid Stuff portal (<https://wesolvestupidstuff.massgeneral.org/>) to report it or to weight in on ideas already reported by others.

The We Solve Stupid Stuff collective is planning a series of problem-solving events starting in early 2021.

Visit the We Solve Stupid Stuff portal at:
<https://wesolvestupidstuff.massgeneral.org/>

Announcements

On-line Blum Center programs

**Friday, January 8, 2021
12:00–1:00pm**

"Cancer Genetic Testing: Strategies to Manage Stress and Increase Resilience," presented by April Malia Hirschberg, MD
Link to attend: <https://partners.zoom.us/j/84869010667>

**Monday, January 11th
12:00–1:00pm**

MGHfC Parenting Series
"Coping During a Pandemic: Tools for Promoting Mental Health in Children," presented by Eugene Beresin, MD
Link to attend: <https://partners.zoom.us/j/87827588620>

**Friday, January 15th
12:00–1:00pm**

"Osteoporosis," presented by Megan Lockwood, MD
Link to attend: <https://partners.zoom.us/j/86927375205>

**Tuesday, January 26th
12:00–1:00pm**

Dermatology Series
"Updates on Atopic Dermatitis: from Sunflower Oil to Dupilumab," presented by JiaDe Yu, MD
Link to attend: <https://partners.zoom.us/j/85160638090>

**Tuesday, February 23rd
12:00–1:00pm**

"Direct-to-Consumer Genetic Testing" presented by Matt Thomas, MD
Link to attend: <https://partners.zoom.us/j/81296743061>

For more information, call 617-724-3823.

ACLS certification classes

Registration times will be staggered to allow for COVID safety.

**February 10, 2021
4:00–9:00pm**

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

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

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Submissions

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

For more information, call: 617-724-1746

Next Publication
January 21, 2021



PERSONAL SAFETY TRAINING COURSES
presented live by leaders from Police and Security

GIVING BAD NEWS:
A WORKSHOP DESIGNED TO HELP MANAGERS OPTIMIZE GOOD OUTCOMES
Tuesday, January 12, 2021 – 1pm-2pm

IDENTITY THEFT
Tuesday, February 23, 2021 – 1pm-2pm

MANAGING AGGRESSION
Tuesday, March 30, 2021 – 1pm-2pm

ALL COURSES WILL BE VIA MICROSOFT TEAMS
PLEASE EMAIL TRAINING SPECIALIST MATT THOMAS AT MTTHOMAS@PARTNERS.ORG TO REQUEST ENROLLMENT

Police & Security training sessions

**Tuesday, January 12, 2021
1:00 – 2:00pm**

"Giving Bad News: a workshop designed to help managers optimize good outcomes," presented by executive director of Police, Security & Outside Services, Bonnie Michelman, via Microsoft Teams

**Tuesday, February 23rd
1:00 – 2:00pm**

"Identify Theft," presented by senior investigator, Dan Coleman, via Microsoft Teams

**Tuesday, March 30th
1:00 – 2:00pm**

"Managing Aggression," presented by training and development specialist, Matt Thomas, via Microsoft Teams

To enroll in any of the above sessions, e-mail mdthomas@partners.org.

Partner with Police & Security to keep MGH safe

—by John Driscoll, associate director, Police, Security & Outside Services

“Patient and staff safety depend on open communication,” says John Driscoll, associate director of Police, Security & Outside Services. If you’re the victim of theft, assault, threats, or are fearful of someone for any reason, contact Police & Security immediately (6-2121). Members of the Police & Security department will respond, ensure you’re physically safe, resolve any issues, and investigate and document instances of wrongdoing. While it’s important to file an RL safety report for any workplace violence incident, that’s only part of the process.

If your personal safety is in jeopardy, contact Police & Security immediately. Distance yourself from anyone who poses a risk, and notify someone in the surrounding area to call for help. Utilizing the ‘Dr. Johnson’ code,

hitting the panic button in your area, or calling Police & Security and saying you need assistance STAT will get an instantaneous response. It’s important to give your name and specific location to the dispatcher.

Personal items should be secured whenever you’re not using them. MGH does not have a significant number of thefts, but when they do occur, they’re usually ‘crimes of opportunity,’ not premeditated acts. Lockers and locked closets are great places to safeguard personal belongings. If you are a victim of theft, you should report it to Police & Security as soon as possible. Our rate of recovery is significantly higher the sooner we can investigate.

The best way to keep MGH safe is to partner with Police & Security in preventing and responding to crime.

The best way to keep MGH safe is to partner with Police & Security in preventing and responding to crime.

Key contact numbers for Police & Security

Main Campus:
617-726-2121

Charlestown Navy Yard:
617-726-5400

Charlestown Health Center:
617-724-8151

Chelsea Health Center:
617-887-4300

MGH Danvers:
978-882-6177

Revere Health Center:
781-485-6464

Waltham Health Center:
781-487-6999



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