

Inaugural DAISY Award honorees...

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? ? ?

revealed

See story on pages 4-5

Getting back to the

This issue of Caring marks our return to normal — or the 'new normal,' as we continue to tread carefully during this recovery phase of the COVID pandemic. I know I speak for all of you when I say these past four months have been incredibly challenging. All of you found yourselves in situations you never expected to be in, and you rose to every challenge with courage and professionalism. I am so proud of each and every one of you.

As we look to the future, there are still many uncertainties. But some things will never change: we will always deliver the best possible care to patients and families and we will always look out for one another. We will do everything we can to make our environment safe.

As we navigate this new normal, it's comforting to know that we're in this together. Truthfully, there's no one I'd rather go through a pandemic with than every single one of you.

Stay safe and thank-you!



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

Debbie Burke

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(Debbie Burke's photo by Joshua Touster)

Debbie's Photo Gallery



A look back at Nursing & Patient Care Services during the COVID-19 pandemic

Recognition

Summer 2020

Inaugural DA



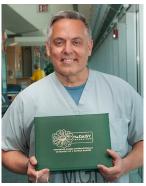
Richard Piccuito, RN. staff nurse, Ellison 14 Burns and Plastics Unit

From letters of nomination:

"Richard is incredibly hard-working, professional, and knowledgeable."

"Rich comes to work early every day, then spends each shift doing everything he can to improve the comfort and care of his patients."

"Richard always goes above and beyond to normalize his patients' hospital experience... He cares for them as humans. He is a gem, and we're so lucky to have him on our unit."



George Lillie, RN staff nurse, Yawkey 8 Oncology Infusion Unit

From letters of nomination:

"George is one amazing nurse and human. We were lucky and blessed to have him as our nurse. He became family to us."

"George has made all the difference during my 7+ years of cancer treatment... I could not do this without him. And I would not want to."

"George makes every patient feel like they're not even in a hospital. Getting them flowers, he goes all out for his patients."



Elyse Loving, RN staff nurse, Blake 8 Cardiac Surgical ICU

From letter of nomination:

"When one patient was faced with irreversible brain damage and a poor prognosis, the family made the difficult decision to withdraw care. The patient's wife wanted to be able to lie in bed with her husband who had several lines and breathing tubes. Elyse made it possible for the wife to lie close to her husband and get the closure she so desperately wanted. Watching this, I felt extremely lucky to work with such a wonderful colleague."

DAISY Awards

As announced by senior vice president for Patient Care and chief nurse, Debbie Burke, RN, during her 2018 Nurse Week address, the first DAISY Award presentations took place at MGH this summer. Established by Bonnie and Mark Barnes in 1999 in memory of their son Patrick, DAISY Awards recognize the clinical skills, caring, and compassion that nurses provide to patients and families every day. The idea, originally suggested to Burke by staff nurse, Trang Vo, RN, of the Blake 12 ICU, came to fruition under the project management of staff specialist, Lore Innamorati, RN. The awards are a complete surprise to recipients—their first inkling that something is afoot is when Burke and members of the DAISY Selection Committee arrive on their units with DAISY banner, cinnamon buns, and other goodies in tow.

For more information, or to nominate a nurse for the next round of DAISY Awards, go to: https://www.mghpcs.org/eed/daisy.









ISY honorees





Abigail Shaughnessy, RN staff nurse, Wang 8 Outpatient Epilepsy Service

The All Parks and The All Park

Becca Faulks, RN staff nurse, Ellison 8 Cardiac Step-Down Unit



Marysa Duffy, RN staff nurse, Blake 7 Medical ICU

From letters of nomination:

"Abby is a miracle worker. She has responded to countless messages of worry and fear with positivity, a sense of humor, and consistent encouragement and affirmation."

"From our very first encounter, Abby has been integral to my well-being. She can communicate with me in a way I understand. If she tells me she's going to do something—it gets done fast. My doctor's ability to treat me is much easier because of her."

From letter of nomination:

"When Becca is here, my husband looks better, feels better, and tries harder. She has restored some of his pride and dignity... When I enter his room and see Becca there, I look forward to a day of healing... We have many challenges ahead, but having Becca with us brings us hope and strength. She is not only a gifted and talented nurse, she has made our world a better place during this very upsetting time."

From letter of nomination:

"Marysa was amazing. My mom loved her and so did my family... It felt as if we had known her longer than a week... When my mom was intubated, Marysa told us that the last thing she said was, 'I got this.' It gave us so much comfort... Marysa was her nurse the day we ended life support, and I will forever be grateful for that... I will never forget you or your kindness. 'Thank-you' isn't enough."















MGH Structural Equity Plan

MGH has developed a plan to address racism within and outside our organization. On Tuesday, June 30, 2020, Joe Betancourt, MD, vice president for Equity and Inclusion, shared that plan with Patient Care Services via a virtual town hall meeting. Below are the key initiatives of the plan:

Initiative 1: Conduct a policy and practice review to identify and reconcile structural racism

 The goal is to create a process to identify policies and practices that have a disproportionate impact on minority patients and employees and reconcile them.

Initiative 2: Create a reporting and reconciliation plan for incidents of discrimination/racism

 The goal is to develop a reporting system for discriminatory behavior and enact the policies, practices, and processes to effectively reconcile them.

Initiative 3: Establish a training pathway on racism and associated factors

 The goal is to develop a comprehensive learning pathway around implicit bias; bystander involvement; micro-aggression; cross-cultural care; and the impact of racism on health, well-being, and health care.

Initiative 4: Ensure equity in access to, and delivery of, all clinical care

The goal is to improve access and identify and eliminate long-standing racial and ethnic disparities.

Initiative 5: Eliminate racialized science and medicine

• The goal is to identify and eliminate all forms of racialized science and medicine built on racism or faulty or inaccurate data and assumptions.

Initiative 6: Ensure a living wage, educational development, and access to care

• The goal is to address income, education, and healthcare inequalities among our employees by (1) creating a living-wage indexed to the cost of living in Boston; (2) expanding funding for educational development; and (3) ensuring affordable insurance coverage so employees can receive medical care at MGH if they desire.

Initiative 7: Commit to diversity and equal representation in governance, leadership, clinical care, research, and community health

• The goal is to increase the representation of minorities in all areas throughout MGH.

Initiative 8: Partner with MGH Police & Security to ensure an environment of safety, equity, and trust in security

• The goal is to ensure an environment of safety, equity, trust and transparency in security.

Initiative 9: Launch an equity, anti-racism, and inclusion campaign

 The goal is to develop a multi-modal campaign to demonstrate our commitment to equity, equality, and anti-racism.

Initiative 10: Engage and invest in an anti-racism advocacy agenda

 The goal is to work in partnership with MGB and local and national organizations to leverage our thought-leadership in an advocacy agenda against racism everywhere.

Follow-up questions from the town hall on Equity and Inclusion

Joe Betancourt, MD, vice president for Equity and Inclusion, was joined by colleagues, Jovita Thomas-Williams, senior vice president for Human Resources, and Gaurdia Banister, RN, executive director, PCS Institute for Patient Care, for a question-and-answer session following the town hall. Below are some of the questions that were raised.

Question: What is our plan to be involved in marginalized communities like Roxbury, Mattapan, and others?

Betancourt: One major initiative is focusing on how to increase our presence in these neighborhoods with direct services and greater engagement with black/ African American communities. We're hoping that the MGB Ambulatory Care Strategy, which already has a presence in selected areas, will consider adding a site in one of these neighborhoods.

Question: I'm concerned that black patients may not be receiving evidenced-based care. Can you speak to our efforts to overcome racialized medicine?

Betancourt: Our approach to overcoming racialized medicine is multi-faceted. First, we want to eliminate any clinical guidelines or lab corrections that may be based on racialized or faulty science. We want to improve cross-cultural communication so we can appropriately assess pain among diverse populations. And we want to eliminate implicit bias, which leads to assumptions, which leads to poor or disparate clinical care. Two initiatives in our plan address these key areas.

Question: What efforts are underway to recruit and retain clinicians and researchers from minority backgrounds?

Betancourt: Our Center for Diversity & Inclusion has a broad portfolio of programs dedicated to recruiting and retaining physicians and scientists who've been underrepresented in medicine. In fact, this year's class of trainees is the most diverse in its 20-year history. While we've made progress, it has been slow and uneven. One of the initiatives in our plan calls for goals and accountability around diversity, which we believe will help accelerate our success in this area.

Question: If someone disrespects you at work, what is the best way to handle it?

Thomas-Williams: There are a number of options, but hopefully it could be handled in a way that leads to greater understanding rather than hurt feelings or tension.

Obviously, you could report it to your manager or supervisor, but often it's better to deal with the issue in the moment if you can handle it in a way that would de-escalate the situation and educate the offender as to why their actions or comments were disrespectful.

Part of our 10-point plan includes training on how to have these conversations with colleagues.

Question: What educational opportunities are planned to help us increase our diversity and inclusion?

Banister: For more than 20 vears Nursing and PCS has provided educational programming related to diversity and inclusion. From being a major presence in the Centralized Onboarding program; to inter-disciplinary courses like, "Enhancing Teamwork and Communication: a Focus on Diversity and Inclusion," that brings residents, fellows, physicians, and nurses together; to a number of Health-Stream offerings. Currently the modules, "MGH Stands Against Racism" and "MGH Social Determinants of Health," can be accessed through HealthStream as part of our New Employee Orientation.

With the development of the MGH Structural Equity Plan shared by Joe Betancourt at our recent town hall, Patient Care Services and the Norman Knight Nursing Center have a great opportunity to renew our partnership with Joe to advance education and training around these important issues.

Student Outreach Pre-COVID

Students teaching students the importance of diversity

—by John Shaw, associate director of communications, IHP

As a young girl growing up in Dorchester, Inricka Liburd looked forward to nighttime when she could look up at the stars. "I was always interested in the constellations," says the second-year nurse-practitioner student at the MGH Institute of Health Professions. "I loved all that stuff."

So it was fitting that during a recent Cultural Science Day event at Harvard-Kent Elementary School in

Charlestown, Liburd donned a NASA jumpsuit and appeared as Mae Jemison, physician, and the country's first female African American astronaut.

More than a dozen Institute students took on the personae of real-life historical figures to illustrate the contributions that women and people of color have made in various fields of scientific endeavor.

Second-year occupational therapy student, JP Bonadonna, who played Brazilian neuroscientist, Miguel Nicolelis, created Cultural Science Day last year as a way of providing students with role models in the sciences.

Says Bonadonna, "Studies show that when asked to draw a scientist, most kids draw males, and that idea becomes even more entrenched as they get older. Cultural Science Day is a fun and interactive way to show students that scientists come from diverse backgrounds, and that they can aspire to become scientists, as well."

When Alyssa Torchon enrolled in the Institute as a speech-language pathology student, she quickly saw that the profession was predominately white. So she chose to play Ianessa Humbert, an African American speech-language pathologist at the University of Iowa. "We never had anything like this when I was in school," says Torchon. "It's important for kids to see that people from all backgrounds contribute to science."

That message was heard loud and clear by African American fourth-grader, Larissa, who was captivated by occupational therapy student, Arial Lontoc's portrayal of Tsu-Hsin Howe, a Filipino-American occupational therapist.

Said Larissa, "I think I want to become a scientist, because I want to do things like that, too."

(Above): IHP student, JP Bonadonna, as Brazilian neuroscientist Miguel Nicolelis, speaks to students during Cultural Science Day.

(Below): IHP student, Inricka Liburd, as African American astronaut, Mae Jemison, engages students in thoughts about the universe.



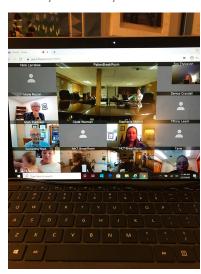
Educating healthcare teams during COVID

—by Labrini Nelligan, executive director, Lunder-Dineen

One obstacle when introducing new information to busy healthcare providers is getting teams invested in the content. Time to Ask, one of Lunder-Dineen's signature educational programs, is doing just that in complex practice settings throughout Maine. Time to Ask provides education to healthcare teams on how to address substance use as part of their daily practice.

In an effort to continue this essential programming during the COVID pandemic, Lunder-Dineen nimbly transitioned to a virtual format. To date, the Time to Ask program has been introduced in more than eight primary-care practices in the state, potentially impacting as many as 20,000 patients.

Lunder-Dineen has developed an on-line interview series addressing many of the challenges faced by the recovery community. The series is



hosted by senior program manager, Denise O'Connell, LCSW, and features Time to Ask advisory team member, Pat Kimball. To see the series, go to: https://lunderdineen.org/support-during-covid-19-pandemic.

The virtual workshop, Medication Treatment for Alcohol Use Disorders, was led by Time to Ask advisory team members, Mark Publicker, MD, and Stephanie Nichols, PharmD.

For more information, contact executive director of Lunder-Dineen, Labrini Nelligan, at 617-724-6435.



Patient Experience

New patient-experience feedback program

-submitted by the Office of Patient Experience

Mass General has partnered with NRC Health to launch a new patient-experience feedback program. The program will enhance our efforts to understand and improve the patient experience. NRC Health will serve as the patient-experience survey vendor for all of Mass General Brigham.

Through this new approach, Mass General will collect feedback across most inpatient and ambulatory settings effective immediately. The brief survey will take place soon after patient visits and ask about communications with care team members, access to care, and open ended questions about patient experiences. Responses will provide actionable information that will allow staff and providers to implement improvements and follow up on service-related issues in a timely manner.

What are the benefits of this new approach?

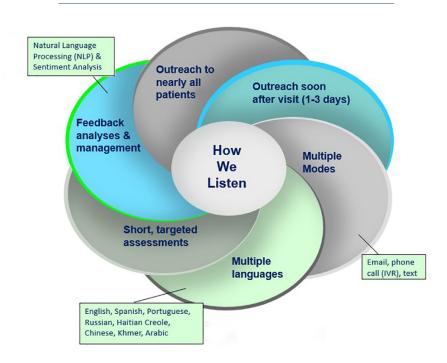
- A high volume of responses at local levels across services and settings
- Enhanced understanding of themes from the survey data as well as patient comments

- The ability to manage and follow up on feedback facilitated by service alerts
- The ability to engage in rapidcycle improvements
- The ability to compare data and share best practices across the hospital and throughout the system
- The opportunity to highlight the many positive comments about experiences
- Support for continued Magnet recognition

In the words of one patient, "From the moment I arrived, *every single* person I encountered was so very kind and compassionate. I never felt alone. The entire staff was amazing!"

In accordance with our mission, data and comments collected via the new program will enhance our ability to be, "guided by the words of our patients and families."

For more information, contact Liza Nyeko, program director, Office of Patient Experience, at 617-643-5484.



Safety during COVID

Physical Distance and Working Together Safely While Masked

Masks and physical distancing are essential elements of our Safe Care Commitment. All employees must wear a hospital-issued surgical or procedural mask at all times while on the facility premises, with the exception of private individual offices or in locations where employees are reliably separated more than 6 feet from others. When walking through any common areas masks must be worn. When wearing our masks correctly, covering both nose and mouth, we can work together safely within 6 feet as needed. Remember to use hand hygiene frequently, including before and after applying your mask, and anytime you inadvertently touch your mask.



ELEVATORS

Employees can safely be within 6 feet in elevators when properly masked. Be sure to use hand hygiene frequently. You can also take the stairs, which is great for exercise!



SHARED WORKSPACES

Employees can work safely within 6 feet of each other when properly masked. Since many of us may have snacks or drinks at our desk, be sure that when drinking or eating you maintain a 6 foot distance from others.



EATING AND DRINKING IN A BREAKROOM OR THE CAFETERIA

When eating or drinking, a 6 foot distance must be maintained.



WORKING TOGETHER

Employees can work safely together within 6 feet when properly masked.



GATHERINGS OF MORE THAN 10 EMPLOYEES

Online platforms for meetings should continue to be used to the greatest extent possible. When in-person meetings are necessary, organizers must ensure that attendance is compliant with the room's posted occupancy limit. During in-person meetings, masks must be worn unless the organizers and attendees can be spaced 6 feet apart for the entire meeting. When meetings occur in rooms where all individuals cannot be spaced by at least 6 feet apart for the entire meeting, masks must be worn continuously, and no food or drink is permitted in the room. Masks must be worn correctly and hand hygiene should be readily available and used frequently.



06/18/2020

Professional Achievements

Awards

Kim Francis, PhD, RN, PHCNS-BC

Excellence in Nursing Research Award American Nurses Association

American Nurses Association of Massachusetts

Theresa Gallivan, RN, MS, NEA-BC

MGH Department of Medicine Award for Leadership in Nursing

Kate Traynor, RN, MS, FAACVPR letBlue HealthCare Hero



Gaurdia Banister, RN, PhD, NEA-BC, FAAN

Member, Institute for Nursing Leadership National Advisory Council

American Academy of Nursing

Amy Corveleyn, MSW, LICSW

Member, Oncology Social Work CORE (Competencies, Opportunities, Roles and Expectations) Advisory Committee

University of Michigan School of Social Work in collaboration with the Association of Oncology Social Work

Linda Kelly, CNP, DNP Elected chair BORN

Elyse Levin-Russman, LICSW, OSW-C

Elected president Association of Pediatric Oncology Social Workers

Jeff Richards, MBA, RCIS, FACVP

inaugural fellow of the Alliance of Cardiovascular Professionals

Stephanie Scibilia, MS, CCC-SLP

Interim instructor IHP



Traynor: a hero

Kate Traynor, RN, MS, FAACVPR, director, MGH Cardiovascular Disease Prevention Center, was named a JetBlue HealthCare Hero during this spring's JetBlue HealthCare Hero Sweepstakes Campaign, honoring healthcare workers across the country. Traynor was nominated by her niece for volunteering to do COVID-19 testing in the ED at Mass General and at the MGH Chelsea Health Care Center on weekends. Traynor received two roundtrip tickets, which she can use to go anywhere JetBlue flies

Poster Presentations

Katelyn Bushey, MSN, RN, ACNS-BC

Katelyn Sparks, BSN, RN

"Rhabdomyolysis associated with meningitis: a case report and literature review" AANN National Meeting Orlando, Florida

Virginia Capasso, PhD, ANP-BC, ACNS-BC, CWS, FACCWS

"The Support Surfaces Standard Initiative (S3I) Updated Terms and Definitions" National Pressure Injury Advisory Panel Houston, Texas

Virginia Capasso, PhD, ANP-BC, ACNS-BC, CWS, FACCWS

Delmore, B Thurman, K Cox, J Tescher, A Cuddigan, J

"Offloading Heels Effectively in Adults to Prevent Pressure

"Proper Side Lying Positioning in Adults to Prevent Pressure Injuries"

"Proper Supine Positioning in Adults to Prevent Pressure Injuries" On-line

Kirsten Dickins, PhD, AM, MSN, FNP-C Sara Looby, PhD, ANP-BC, FAAN

"Health Equity in Income Disparate Women: Makings of a Midlife Crisis" Eastern Nursing Research Society Annual Scientific Sessions Virtual conference

Sandra Silvestri, MS, RN, CNOR Maureen Hemingway, DNP, RN CNOR Laura Meleis, PharmD, MS,BCPS

MS, BCPS
Jevon Oliver, PharmD, MS
"Implementing a Hazardous
Drug Protocol in the
Perioperative Environment"
AORN Global Surgical
Conference and Expo
Virtual conference

Presentations

Katelyn Bushey, MSN, RN, ACNS-BC

"Is inclusion a delusion: challenging ourselves to lead" AANN National Meeting Orlando, Florida

Virginia Capasso, PhD, ANP-BC, ACNS-BC, CWS, FACCWS

"ICU Prevention: Looking through the Magnifying Glass" National Pressure Injury Advisory Panel Houston, Texas

Virginia Capasso, PhD, ANP-BC, ACNS-BC, CWS, FACCWS Black, J Ruotsi, L "COVID-19 Re-entry"

"COVID-19 Re-entry" Corporate Advisory Council, NPIAP Webinar

Kathleen Souza, BSN, RN Robin Gallant, MHA, BSN, RN

"Emergency preparedness in an off-site setting" OR Manager Conference New Orleans

Professional Achievements (continued)

Publications

Katelyn Bushey, MSN, RN, ACNS-BC Stephanie Qualls, BSN, RN "CAR T-cell-associated neurotoxicity: current management and emerging treatment strategies" Critical Care Nursing Quarterly

Virginia Capasso, PhD, ANP-BC, ACNS-BC, CWS, FACCWS Wierenga, A "Carotid stenosis"

Primary Care

Virginia Capasso, PhD, ANP-BC, ACNS-BC, CWS, FACCWS Cuddigan, J Black, JM Cox, J Delmore, B Munoz, N Pittman, J

"Unavoidable Pressure Injury during COVID-19 Pandemic: a Position Paper from the National Pressure Injury Advisory Panel"

Virginia Capasso, PhD, ANP-BC, ACNS-BC, CWS, FACCWS

Cox, J Cuddigan, J Delmore, B Tescher, A Solmos, S

"Pressure Injury Prevention PIP Tips For Prone Positioning"

Filbin, MR Thorsen, JE Zachary, TM Lynch, JC Matsushima, M Belsky, JB Heldt, T Reisner, AT

"Antibiotic delays and feasibility of a I-hour-from-triage antibiotic requirement: analysis of an Emergency Department sepsis quality improvement database" Annals of Emergency Medicine Debra Frost, RN, DNP Colleen Snydeman, PhD, RN Martin Lantieri, RN, MSN Janet Wozniak, MD Suzanne Bird, MD Theodore Stern, MD

"Development and implementation of a suicide prevention checklist to create a safe environment" *Psychosomatics*

Maureen Hemingway, DNP, RN, CNOR Laura Meleis, PharmD, MS, BCPS Jevon Oliver, PharmD, MS Sandra Silvestri, RN, MS, CNOR

"Implementing Protocol for use of Hazardous Medications in the OR" AORN Journal

Mary Larkin, MS, RN Michelle Marcella, BA Sarah Alger, BA Susan Fisher BA, RN Marianne Ditomassi, RN, DNP, MBA, NEA-BC, FAAN

"Voices Echoing Forward: One Institution's Efforts to Preserve Nursing History" Online Journal of Issues in Nursing

Melissa Mullen, MSNEd, RN

"Emotional Rollercoaster of Providing COVID-19 Care" American Nurse

Mullen, M Zachary, T Foley, R Irani, Z

"Thrombolysis for frostbite: a case study and clinical considerations" Journal of Radiology Nursing

Stephanie Scibilia, MS, CCC-SLP

"Enabling ICU Communication During COVID-19" ASHA Leader Live Christopher Shaw, ANP, PMHNP

"Impact of Inpatient Addiction Consultation on Hospital Readmission" Journal of General Internal Medicine

Kathleen Souza, BSN, RN Robin Gallant, MHA, BSN, RN

"How prepared is your ASC to handle a surgical emergency OR Manager Magazine

Phoebe Yager, MD Kimberly Whalen, RN Brian Cummings, MD

"Repurposing a Pediatric ICU for Adults" New England Journal of Medicine

Certification

Kristin Beauparlant, RN Oncology nurse ONCC

Sarajane Hall, RN Critical care nurse AACN

Paula Knotts, RN Nurse executive-advanced ANCC

Abigail Shaughnessy, BSN, RN-BC

Ambulatory care nurse ANCC

Trang Vo, RN Critical care nurse AACN

Shushanik Yegoyan, MSN, APRN, FNP-c

Family nurse practitioner American Association of Nurse Practitioners

Advanced Degrees

Shushanik Yegoyan, MSN Master's degree in Nursing Endicott College

Clinical Recognition Program

Clinicians recognized March–April 2020

Advanced Clinicians: Jennifer Calkins, RN Surgery

Bonnie Chang, LICSW Social Work

Ann Haring, PT Physical Therapy

Daniel Kelleher, PT Physical Therapy

Mary Madden, RN Medicine

Katie Newman, RN Cardiac

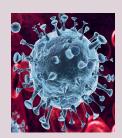
Grace Zebertavage, RN Cardiac

Announcements

COVID-19 Research

Go to the Munn Center portal page to:

- access COVID-19related research (Research for Review: Weekly Update)
- find opportunities to participate in COVID-19 research studies (COVID-19 Study Recruitment)



Blum Center programs are now on-line

The Mass General Cancer Center Genetic Series, presented by the Center for Cancer Risk Assessment

Friday, July 24, 2020 12:00-1:00pm

"Hereditary Colon Cancer," presented by Chandrika Kurpad, LCGC.

Link to attend: https://partners.zoom. us/j/9890507703 |

Monday, August 3rd 12:00–1:00pm

"Ovarian Cancer and your Family: what you Need to Know," presented by, Kathleen Steinberg, LCGC.

Link to attend: https://partners.zoom. us/j/93125177891

All programs are offered via Zoom; programs are free and open to MGH staff, patients, and the general public.

For more information, call 617-724-3823.

Virtual Conversations with Caregivers

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

August 18, 2020 5:30–7:00pm A virtual presentation

"What you REALLY need to know about caring for a person with dementia: how habilitation therapy can help," presented by Paul Raia of Ross/Raia Design.

RSVP to nmozzone@mgh. harvard.edu.

Join by Zoom at: https://partners.zoom.us/j/9 9122874235?pwd=WSt0aj BneXRKN1IHN1BOU2Zqd 2117z09.

Or dial 1-646-876-9923; Meeting ID: 991 2287 4235. Password: 768712

For more information, call 617-643-8809.

ACLS Classes

Certification: (Two-day program)

Day one: September 11, 2020

8:00am–3:00pmDay two:

September 16th 8:00am-12:00pm

Re-certification: August 17th 5:30–10:30pm

August 19th 8:00am-12:00pm

CPR Training (\$100) September 11th 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.

The Apollo retirement site

The Apollo retirement site was created to give staff a centralized place to go to celebrate colleagues who've recently retired. The site allows employees to leave written messages and notes of appreciation, share memories, or wish their colleagues well.

Email Apollo to request a retirement announcement on this site, or go to: https://apollo.massgeneral.org/retirements/ to celebrate a colleague who's recently retired



Personal Enrichment and Life-Long Learning

The Caring Book Club

Read Think Discuss THE NEW YORK TIMES BESTSELLER want to talk about race Ijeoma Oluo

"ljeoma Oluo gives us—both white people and people of color—that language to engage in clear, constructive, and confident dialogue with each other about how to deal with racial prejudices and biases."

—The National Book Review

Published by

Caring Headlines is published once a month by Patient Care Services.

Debbie Burke, RN, senior vice president for Patient Care

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Spiritual Care Carmen Vega-Barachowitz, SLP

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Submissions

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

For more information, call:

Next Publication August 20, 2020

Patient Safety

MGH/MGPO Survey on Patient Safety Culture

wrap-up and next steps

—submitted by the Lawrence Center for Quality & Safety

Mass General conducted its biennial Survey on Our Patient Safety Culture just prior to the COVID-19 pandemic. The unprecedented challenges we faced over the past three months underscore the need for a strong culture of safety—one in which every team member feels empowered to speak up, report mistakes, and voice ideas for improvement, thereby ensuring the safety of patients, staff, and the community.

Thank-you to the approximately 7,700 staff members, including more than

2,100 from Nursing & Patient Care Services, who took the time to share their views. Your honest feedback is greatly appreciated. We heard you and look forward to working with you to advance our safety culture. The responses, which included more than 1,400 individual comments, provided meaningful data that will help drive improvements across the institution.

The Lawrence Center has been analyzing the results and will communicate findings to department leaders in the coming weeks.

This summer, Mass General will conduct a brief 'pulse survey' to gain understanding of inpatient caregivers' perceptions of the patient safety culture during the COVID-19 pandemic. Results will be used to evaluate the impact of operational changes made during the surge and to prepare for future emergencies.

For more information, contact Jesse Russell, program manager, at 617-724-1194.





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