2019 Nursing Report
From left to right, Maria Diaz, RN, Elaine O’Hara, RN, Brittany Charron, RN, Grisel Miranda, RN, Andrew LeBlanc, RN, Christine Klucznik, DNP, RN, Brunella Keller, RN, Amy Szalony, RN, Erica Gayle, RN, Monique Cavanaugh, RN

Advancing Care. Enhancing Lives.
Dear Colleagues,

I am pleased to share the 2019 Baystate Medical Center Nursing Report which highlights the exceptional care given by our nursing team. Our nurses are committed to the Baystate Compass Points of Safety, Quality, Experience, and Value. We continue to work towards creating a workplace environment where nurses can thrive through communication, diversity, respect, inclusion, and shared purpose. The American Nurses Association celebrated the 2019 Nurses Week with the theme “4 million reasons to celebrate.” This year, Baystate celebrates our nurses as leaders, difference makers, advocates, innovators, volunteers, educators, mentors, and most of all, caregivers.

We continue on “the road to number four” as we seek to continue our prestigious Magnet designation from the American Nurses Credentialing Center (ANCC) for the fourth consecutive time. This report is structured to reflect our accomplishments in the Magnet pillars of Transformational Leadership, Structural Empowerment, Exemplary Professional Practice, New Knowledge, Innovation and Improvements. Threaded throughout, you will witness the stories of caring and commitment to making compassionate connections.

I am proud to work alongside our amazing team of nurses as we work to fulfill the Baystate promise – Advancing Care. Enhancing Lives.

Christine Klucznik, DNP, RN  
Chief Nursing Officer  
Vice President, Patient Care Services
2019
BMC NURSING AT A GLANCE

POPULATION

- Approximately 1,400 Full Time RNs at Baystate Medical Center
- 7% RN Turnover Rate
- 9% RN Vacancy Rate

EDUCATION & CERTIFICATION

Clinical Nurses (other than APNs)
- 45% Certified
- 68% Bachelor of Science in Nursing (BSN)
- 24% Associate Degree in Nursing (ADN)
- 4% Diploma

Leadership RNs
- 58% Certified
- 47% Bachelor of Science in Nursing (BSN)
- 49% Master of Science
- 4% Higher than Master's
Forbes Top Employer (BH)
Baystate Health was ranked 14th best employer in Massachusetts through a study conducted by Forbes and market research company, Statista. Statista surveyed 80,000 Americans working for businesses with at least 500 employees. Respondents rated, on a scale of zero to 10, how likely they'd be to recommend their employer to others.

ANCC - Magnet (BMC)
Baystate Medical Center has received Magnet® designation from the American Nurses Credentialing Center (ANCC) for three consecutive years, placing it among leaders nationally in nursing excellence and quality patient outcomes.

ANCC - Nurse Residency Accreditation (BMC)
The Baystate Health Nurse Residency Program was accredited with distinction as a Practice Transition Program by the American Nurses Credentialing Center’s Commission on Accreditation, one of only two in the state of Massachusetts.

AACN Beacon Award - Silver - HVCC & PCU (BMC)
For the second time in a row, Baystate Medical Center’s Heart & Vascular Critical Care (HVCC) and Progressive Care Units (PCU) were recognized by the American Association of Critical-Care Nurses with the silver Beacon Award for Excellence. The award honors individual units that distinguish themselves by improving every facet of patient care and serve as role models to others on their journey to excellent patient and family care.

AACN Beacon Award - Silver - Med-Surg ICU (BMC)
This is the eighth time Baystate Medical Center’s Medical & Surgical ICU has won this national award from the American Association of Critical Care Nurses and the third time it was won in a row. Recognized units must also meet national criteria consistent with Magnet Recognition, the Malcolm Baldrige National Quality Award, and the National Quality Healthcare Award.

Society of Thoracic Surgeons Three-Star Rating
Baystate Health’s Cardiac Surgery Program has earned a distinguished three-star rating from The Society of Thoracic Surgeons (STS) for its patient care and outcomes in aortic valve replacement (AVR), coronary artery bypass grafting (CABG), and mitral valve replacement and repair (MVRR) surgery. The three-star rating, which denotes the highest category of quality, places Baystate Health among the elite for AVR, CABG, and MVRR surgery in the United States and Canada.

The Institute For Healthcare Improvement - Age-Friendly Health Systems
The Institute for Healthcare Improvement recognized Baystate Medical Center and Baystate Health’s three Community Health Centers as the first age-friendly health care institutions in the nation.

# Transformational Leadership

- Nursing Ethics Enhances Healthcare Delivery
- Expansion of Holistic Nursing Program
- Spiritual Services Provides Tea for the Soul
- Nurses Present at Annual Magnet Conference
- Workplace Safety
- Baystate Medical Center Receives Age-Friendly Designation
- Ambulatory Nursing Innovations

## Structural Empowerment

- Recruitment, Retention, and Recognition Council Makes an Impact
- Baystate Health’s Nurse Residency Curriculum Redesigned
- Chaplains Caring for Staff
- Welcoming our International Nurses

## Exemplary Professional Practice

- AACN Acknowledges Massachusetts Nursing Delirium Collaborative at NTI
- HVCC & PCU Earn Silver AACN Beacon Award
- Supporting Mothers of Neonatal Abstinence Syndrome Infants
- Improving Patient Satisfaction in the ICU

## New Knowledge, Innovation, & Improvements

- Enhancing Quality at Baystate Children’s Hospital
- Bringing Behavioral Health Expertise to the Bedside
- Nurse-Pharmacy Collaborative Shows Results
- Eliminating Surgical Smoke in the Operating Room
- Neuroscience Receives Prestigious Grant

## Research, Awards, Advancements, & Certifications

- [Links to detailed content]
RITA BANKS, RN
EMERGENCY DEPARTMENT

Rita began her career as the first African American female paramedic registered in Massachusetts. She is described as the true definition of a compassionate nurse, inside and outside hospital walls. In 2019, Rita stopped at the scene of a car accident in Springfield and spoke by phone with the victim’s mother, who was in Tennessee. Rita reassured her until her daughter was transported away by ambulance. The mother took to social media to find Rita afterwards and thank her for her kindness, describing Rita as “a beautiful person.” Rita was voted number one out of 10 Nurse Heroes across the state on nurse.org and was celebrated at the Boston Red Sox Nurse Night game where she threw the first pitch.
Nursing Ethics Enhances Healthcare Delivery

This year was an exceptionally strong one for nursing ethics. Like turning on a few more lights in a room, ethics consultations help our nurses to see more clearly the moral pattern of the issues at stake in healthcare delivery, providing a lens through which to view the dilemma and a thought-partner in approaching its resolution, thereby enabling them to parse out what is often the “least bad” option between two conflicting choices.

Nurse-initiated ethics consultation requests made up more than 25 percent of the more than 1,500 consults received this year. The departments from which nurse-initiated consults most frequently arose in 2019 were Medicine (41%), Pediatrics (22%), Surgery (14%), Behavioral Health (8%), OB/GYN (8%), Heart and Vascular (3%), Emergency Medicine (3%), Neurology (3%), and Anesthesiology (1%). Looking system-wide the entity from which nurse-initiated consults most frequently arose were Baystate Medical Center (83%), Baystate Wing Hospital (7%), Baystate Noble Hospital (4%), Baystate Franklin Medical Center (2%), and Baystate Medical Practices (2%).

The Most Common Reasons for Nurse-Initiated Ethics Consultation Requests in 2019

1. Moral distress in caring for patients and/or families who request for non-beneficial and/or harmful treatments.
2. Disagreements with the medical team about plans of care.
3. Refusals by patients and/or families of life-sustaining medical treatments.
4. Repeated self-harm by patients to secure hospital admission.
5. Providing adequate pain management while treating iatrogenic addiction.
6. Providing artificial nutrition and hydration to patients with eating disorders.
7. Requests by patients to leave against medical advice.
8. Caring for patients with treatment-resistant depression.
9. Caring for pregnant patients whose behaviors risk fetal life.
10. End-of-life decision-making for individuals with intellectual disabilities.

Ethics consultations were frequently reported to “relieve moral distress,” “provide a justification for [our] clinical actions or refusals to act,” “help nurses to find [their] moral voices,” “empower nurses to stand up for what [they know] is right,” and “help advocate for [our] patients above all else,”
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Expansion of Holistic Nursing Program

Last year, with support from the Baystate Health Foundation, BMC began its journey to train nurses in the science of holistic nursing practice. In May of 2019, again with Foundation support, 24 nurses were enrolled in the Integrative Healing Arts Academy™. The IHAA is a program designed to prepare nurses for pivotal roles in healthcare delivery of the future. Participants are engaged in creating caring cultures and healing environments within their organizations. Attendees are prepared for holistic practice in all healthcare settings across the continuum of care. Each participant completed written topic papers and participated in group projects. Three teams worked to create “rejuvenation, renewal rooms” and the fourth team piloted aromatherapy with the Flex Team nurses. These nurses can now sit for the certification exam.

Graduates of the Integrative Healing Arts Academy

Amanda Arsenault, ANM, SSU
Michelle Bechard, PNRP III
Andrea Bertheaud, RN, APTU
Diane Bogalhas, NM S6400
Betzaïda Caban, PNRP II
Stacy Cammisa-Reed, PNRP II
Hannah Coombs, PNRP III
Robin Cycz, PNRP III
Lauri Deary, Nurse Educator
Shellie Donner, PNRP II
Kimberly Dziel, NM OBS
Mia Jacintho, PNRP II

Jennifer Jackson, PNRP II
Michelle Keney, PNRP IV
Allison Kostrzewa, NM
Kimberly Kubosiak, PNRP I
Karen Marcoux, PNRP III
Anna Martins, PNRP II
Araksya Mcinerney, NM
Jody Peltier, NM
Catherine Powers, PNRP III
Christina Raco, PNRP III
Pamela Rivera, PNRP III
Spiritual Services Provides Tea for the Soul

In 2019, the Spiritual Services department offered “Tea for the Soul” to provide tangible spiritual care to staff during the workday - particularly when the unit has experienced a stressful or traumatic period. Tea for the Soul creates a moment of respite and a compassionate connection with a chaplain. It is an informal opportunity to receive care while caring constantly for others.

The Spiritual Services team prepares a cart with specialty teas and cookies and chaplains bring the cart to a nursing unit and walk around offering tea, cookies, and encouraging words. An important part of creating this moment of caring for the staff is bringing the cart to the staff members so they don’t have to leave their stations. More than once it has created an opportunity to interact with the chaplain in a more personal way and to connect with care.

Nurses Present at Annual Magnet Conference

Baystate Medical Center was proud to host 14 nurses to attend the annual ANCC National Magnet Conference held in Orlando. Two clinical nurses won the trip at last year’s nursing retreat. Other clinical nurses were chosen based on work they have completed with the Art of Innovation. Almost 10,000 nurses from all over the world were in attendance. Eric Griffin and Christine Klucznik presented a podium session on the work completed in 2017-2018 to improve staff nurse satisfaction. Our 2018 positive nurse satisfaction results were statistically significant. During that survey we were able to demonstrate excellence above the national benchmark in five of the seven nurse satisfaction domains. The theatre held over 1,000 seats and the presentation was extremely well received.

Workplace Safety

A team led by Bob Horton, MSN, RN, program director, Behavioral Health Nursing and the Security Department worked this year to establish and maintain a comprehensive program for the prevention, reporting, and management of all types of workplace violence. The ultimate goal will be that all care providers will be prepared in the prevention, assessment, and management of aggression in patients, visitors, and colleagues. Work was aligned to ensure a culture of respect through respectful communication, organizational policies, ensuring that the Safety Reporting System is efficient and blame-free, and the work of our Behavioral Resource Nurses is widespread.
Training programs include: Behavior De-Escalation, Situational Awareness, A.L.I.C.E. (Active Shooter Response), Baystate Healthy, and Threat Assessment Team. Enhancements were made to the Security Department with the addition of one security officer per shift to patrol the ED treatment pods to understand safety and risk concerns, increasing the digital footprint around the campus to track and monitor public corridors and entryways, and a second security officer added to create a Central Dispatch and Monitoring Center for the health system.

Baystate Medical Center Receives Age-Friendly Designation

In 2019, the Institute for Healthcare Improvement recognized Baystate Medical Center and three of its Community Health Centers as the first age-friendly health care institutions in the nation. The national age-friendly health system movement focuses on improving care by attending to what matters most to patients - medications, mental activity, and mobility. This honor comes in response to the efforts of the “Acute Care for Elders (ACE)” program team and the interprofessional “Geri-Pal” team serving high-need patients in the three Community Health Centers. The teams provide specialized treatment to aging patients and support for their care partners. The specially trained team members recognize the unique problems of older adults, focus on what is most important to patients, and emphasize keeping those in their care as independent and active as possible. They assist with care plans, choosing treatment options, recognizing drug side effects, and making difficult decisions. This approach allows the team to treat this patient population thoughtfully and respectfully while engaging individuals and their families so that they are comfortable with and confident about their care. On Daly 6A, the dedicated ACE unit nursing team adopted a “Nursing Safe Mobilization Assessment” to determine the patient’s capability for movement to maintain on-going documentation of the patient’s medical record. Physical Therapy is consulted only when appropriate. For patients with a mobility scale of 3, documentation of daily ambulation using the Johns Hopkins mobility assessment tool is used. Reports are run weekly to determine patient progress and the team huddles to create an individualized plan.

Ambulatory Nursing Innovations

This year, the Baystate Medical Practice (BMP) Quality Council launched the inaugural class of five learning collaboratives across multiple specialties. Applicants were asked to identify a challenge or problem related to patient experience, safety, or quality. Each team assembled a group of front-line staff and providers to work together on a quality improvement project of their choosing, under the guidance of an improvement specialist over six months. The teams defined the problem, made iterative changes, measured progress, and engaged the larger clinic teams in creating new standards of practice. All five teams were successful in learning, applying state-of-the-art quality improvement processes, and making progress on their established goals.

The Projects Were:

Primary Care:
Improving glycemic control in patients with diabetes using a team-based model of care.
**General Surgery:**
Improving the efficiency processes and communication for patients undergoing pre-operative assessment for elective procedures.

**Women’s Health:**
Establishing a method for communicating information about medical complications of pregnancy (hypertension and gestational diabetes) as patients return to primary care providers.

**Endocrinology:**
Enhancing access to new patient consultations by transitioning stable patients back to their primary care provider when specialty endocrinology care is no longer needed.

**Cardiology:**
Enhancing patient experience by improving communication between patients and the practice.

Other innovations during the year included South Hadley Adult Medicine implementing a new process for patients with an A1C of 9 or greater. Nurses meet with the patients to develop a patient care plan that includes diet management, meter teaching, insulin education, and care management. The Baystate Urogynecology nurse calls all post-operative patients to give support, answer questions, and concerns. Baystate Monson Primary Care, Baystate Palmer Primary Care, and Pioneer Valley Family Medicine piloted a new initiative from the American Heart Association’s Target BP Program. The program improves hypertension control by Measuring accurately, Acting rapidly, and Partnering with patients (MAP). Metrics have shown an increase in BP control using this technique.
For Nikki, helping people is instinctive, no questions asked. Along with her exceptional caregiving skills as a member of the Flex Team, in 2019, Nikki was called upon to use those skills in the air. During a flight to Barbados to celebrate her two-year wedding anniversary, a female passenger with type 1 diabetes, who had forgot her insulin, was showing hyperglycemic symptoms. Stepping up alongside an ICU nurse, she helped administer glucose monitoring medications. She implemented the “M technique,” a holistic relaxation technique taught throughout nursing at Baystate Health, to help the passenger focus and stay calm. By the end of the flight the passenger was in a stable state. Through that experience, Nikki formed a special friendship with the passenger and they still stay in touch through Facebook.
Recruitment, Retention and Recognition Council Makes an Impact

This year, Baystate Medical Center launched the Recruitment, Retention and Recognition Council or RRR as it’s called. The goal of the team is to look at strategies that will attract and retain nurses. Each unit is asked to recruit 1-2 members that are willing to be a part of the council. The co-chairs are Daniel Ferguson, ANM NIU, and Edyta Halastra, PNRP III, D3B.

One of the first tactics for Recognition was the initiation of the DAISY award. The DAISY Award is meaningful recognition of extraordinary, compassionate nursing care. The award has been used as a proxy in research studies to represent meaningful recognition. The American Association of Critical Care Nurses identified meaningful recognition as one of the six elements of a Healthy Work Environment. DAISY provides the opportunity, on a regular basis, to recognize and celebrate all the “right” that happens in the delivery of nursing care. Research demonstrated that through the DAISY Award, teamwork is nourished, enhancing a sense of trust within the unit and potentially the organization as a whole. Research also reveals that nurses who have been nominated report higher levels of Compassion Satisfaction and lower levels of Compassion Fatigue. The DAISY award was founded almost 20 years ago by the family of J. Patrick Barnes who died at a young age from complications of ITP. BMC is supporting twelve awards - one per month. The first awardee was Dan Tousignant, PNRP III, HVCC/PCU who was nominated by a patient’s family member. The second was Joe Forbes, PNRP II, Flex Team who was nominated by a pediatric patient. In December, Sallyann Fortini, PNRP IV, Pediatric Procedure Unit, was nominated by a pediatric patient. Congratulations to all of these outstanding nurses.

Baystate Health’s Nurse Residency Curriculum Redesigned

Based on feedback from past and current nurse residents and nursing leadership from all participating hospitals, the Nurse Residency Program (NRP) curriculum was redesigned, effective with the NRP October 2019 cohort. The new curriculum includes skills and simulation, non-violent crisis intervention training, M technique training and Stop the Bleed training. The seminar topics have been designed to be inclusive of all settings and practices so that the content is applicable to all of the nurse residents regardless of where they practice. An NRP Advisory Council has been formed to provide oversight and feedback on the program. Membership includes nursing leadership, nursing education, and current and past nurse residents.
Baystate Health’s Nurse Residency Program
(2019 Facts)

163 NURSE RESIDENTS JOINED THE WORKFORCE
(hired to date 671)

EVIDENCE-BASED PRACTICE PROJECTS 33 COMPLETED
(to date 124)

TURNOVER RATE
3.7% YTD compared to National Average 7.3%
100% Enrolled in or have a BSN degree

TOTAL HIRED PER HOSPITAL
Baystate Medical Center: 151
Baystate Franklin Medical Center: 9
Baystate Wing Hospital: 3

Chaplains Caring for Staff
In addition to providing needed support to patients and their families, the Chaplains at BMC recognize the need to provide support to all levels of staff. Team members can experience a variety of sources of stress from work, family, loss, complicated patient situations, and personal or medical needs. The following graph shows how much time chaplains have spent in consultation with staff over the past year.
Welcoming our International Nurses

Baystate Health partnered with O’Grady Peyton International to expand our nurse recruitment into the global marketplace. This new relationship complements the local and regional efforts of our Talent Acquisition and Workforce Planning team to attract experienced nurses to Baystate Health.

The International Nurse Program strategically identifies and evaluates hard-to-fill and high-turnover nursing positions that pose challenges to our search efforts. Nurses chosen join Baystate Health for two years with the possible option of continuing permanently. This is part of our strategy to not only address the immediate effects of the nursing shortage, but is a strategy to improve candidate hires long-term. We recognize that western Massachusetts is experiencing a significant nursing shortage and are additionally concerned about the “experience complexity gap.” Our successful nurse residency program has on-boarded over 150 newly graduated nurses. The rate of our nurse retirements is increasing as is the complexity of the patients we serve. The international nurses bring with them more than 10 years of nursing experience on average, meeting the same standards and licensing requirements as domestic nurses. Their countries of origin, and countries they’ve practiced in, include Australia, Jamaica, Qatar, Philippines, Kuwait, Ireland, India, and United Arab Emirates (UAE). O’Grady Peyton has reported that the enculturation of these nurses and their families has been outstanding at Baystate Health.
Robbin, an experienced nurse who has worked for Baystate Medical Center for over 30 years, would say it was “meant to be” that she would stop at a local town hall during errands that day in May of 2019. As she turned to leave, she saw an elderly gentleman, who was sitting in one of the chairs, slumped over. She called out, but got no response. He was not breathing and had no pulse. Robbin alerted the clerk to call 911. She placed the man on the floor and used AED to provide a shock to his heart. She then did CPR until paramedics arrived to take over. Two days later Robbin was able to visit the man at Baystate Medical Center where he was happy and grateful to see her. A few months later, the patient invited Robbin to breakfast so that his family could meet her. Robbin is thankful she was there that day and was able to use her skills to save a life. The patient nominated Robbin for a Western Massachusetts Hometown Hero Award from the American Red Cross which she accepted at the event in 2020.
AACN Acknowledges Massachusetts Nursing Delirium Collaborative at NTI

The Massachusetts Nursing Delirium Collaborative (MCNDC) was initiated in October 2015 as part of the AACN CSI (Clinical Scene Investigator) Academy that was established in November 2012. The goals of the academy were to empower frontline nurses to become architects and builders of clinical safety and leaders of change to transform healthcare, create meaningful and lasting change at the bedside, sustain improvements over time, and spread the change process to other units and organizations.

Member hospitals include Baystate Medical Center, Beth Israel Deaconess, Brigham and Women’s, South Shore Hospital, and Newton-Wellesley Hospital. The major goal of the collaborative is to improve outcomes related to delirium and to improve patients and family satisfaction and experiences related to delirium. Over the past six years, this team contributed to more than 10 projects, talks, poster presentations, and publications. A number of Baystate Medical Center RNs from critical care units were members of this group. MICU/SICU RNs Catherine Manning, PNRP IV and Linda Pellegrino, RN were the leaders representing Baystate Medical Center.

HVCC & PCU Earn Silver AACN Beacon Award

Baystate Medical Center’s Heart & Vascular Critical Care (HVCC) and Progressive Care Units (PCU) have been recognized by the American Association of Critical-Care Nurses with the silver Beacon Award for Excellence. This is the second time in a row they have won this national three-year award. The Beacon award is given to units who meet defined criteria in: Leadership Structures and Systems, Appropriate Staffing and Staff Engagement, Effective Communication, Knowledge Management and Learning Development, Evidence-Based Practice and Processes, and Outcome Measurements. The award is based on sustained unit performance and patient outcomes that exceed national benchmarks. The process is typically driven by nursing staff and nurtures empowerment and leadership.

The Beacon Award signifies a positive and supportive work environment with collaboration between colleagues and leaders, higher morale, and lower turnover. Qualities such as compassion, positivity, and teamwork are traits that the HVCC looks for in their new hires. These qualities have contributed to attaining the silver Beacon Award.
Supporting Mothers of Neonatal Abstinence Syndrome Infants

In 2019, Donna Stafilarakis, MSN, RNC-MNN, Pam Zaranek-Kuhn, Amy Moore, PNRP III and Angela Rodriguez, PNRP IV presented their work on care and treatment of Neonatal Abstinence Syndrome (NAS) infants who have motivated mothers at the Association of Women’s Health, Obstetric and Neonatal Nurses Convention in Atlanta, Georgia. The premise is that rewarding mothers who have remained in treatment in a medically assisted treatment (MAT) during pregnancy instills feelings of self-worth and reinforces infant recovery. This work has been ongoing with efforts to keep mother and baby together on the same unit. The results include shorter length of treatment and length of stay which also resulted in decreased cost.

Improving Patient Satisfaction in the ICU

A few years ago, the Society of Critical Care Medicine (SCCM) led a Patient Centered Outcome Research Institute Collaborative involving ICUs in 63 hospitals nationwide. The Medical and Surgical ICUs at Baystate Medical Center were among those who participated. The purpose of this collaborative was to improve the care of critically ill patients and their families through institution-specific interventions. After numerous multi-disciplinary meetings involving representatives from the medical, nursing, social work, and palliative care teams, the decision was made to design an intervention to improve communication with families of ICU patients with a focus on improving the timing and quality of family meetings with the ICU team.

The project entailed collecting data from families pre and post intervention utilizing the Family Satisfaction (FS-ICU) Survey which addresses four themes: the treatment of the patient, the treatment of the family, satisfaction with care, and family involvement in decision-making.

The Intervention Entailed:

- Educating and training critical care fellows and ICU nurses on leading and participating in family meetings as well as employing communication strategies to help engage families during the decision-making process.
  - Members completed the Center to Advance Palliative Care online modules on Communication Skills and took part in simulated family meetings facilitated by colleagues from palliative care, bioethics, and social work.
- Establishing criteria for prioritizing the need for family meetings.
- Establishing a standardized process to document family meetings including their content, decisions made, and plan for follow-up.
Review of the FS-ICU Survey data led the ICU PI Committee to adopt the FS-ICU Survey as the mechanism for collecting feedback on patient and family experience in the Baystate Medical Center and Surgical ICUs. This data is now included in a section of the ICU Dashboard submitted biyearly to the Performance Improvement Coordinating Council (PICC) called “Family Experience.”
The importance of teamwork and listening with compassion is vital in nursing. In 2019, a woman was admitted to the Medical Intensive Care Unit (MICU) for hypoxic respiratory failure which ultimately required her placement on a ventilator. She was over 32 weeks pregnant and was receiving close fetal monitoring in the ICU by Obstetrics. Eventually she was able to be off the ventilator but her oxygen levels were still at a level to be closely watched to ensure the safety of the mother and her unborn baby. The patient was insistent that she wanted to go home, which would have put both mom and baby at risk. The MICU team worked to dig further to find out the mother’s reasons and they learned she was determined to care for her 2-year old child, as her significant other and her mother were not able to care for the child that morning. As a team, they developed a plan to provide the support that met the patient’s need and allowed her to remain in the hospital. The exceptional effort of this team to convince this pregnant mother to stay was recognized in 2019 for an award by the Patient and Family Advisory Council.
Enhancing Quality at Baystate Children’s Hospital

Baystate Children’s Hospital (BCH) is a member of Solutions for Patient Safety (SPS), a national pediatric harm reduction collaborative of over 135 children’s hospitals in North America. This network of hospitals actively shares data and best practices to reduce harm to children during hospitalization. Baystate Children’s Hospital is actively engaged in nine bundles of hospital-acquired conditions (HACS). All inpatient units have physician safety champions and team safety huddles.

Baystate is also one of the 32 network hospitals that chose to join the Peripheral Intravenous Infiltration and Extravasation (PIVIE) cohort and have since implemented nearly one year of this work within the inpatient children’s hospital. BCH has an active SPS PIVIE committee that meets monthly to view up-to-date webinars from children’s hospitals all across the nation. The Peripheral Intravenous Infiltration and Extravasation guideline was officially implemented in all inpatient pediatric areas of the Neonatal Intensive Care Unit, the Pediatric Intensive Care Unit, and Children’s and Adolescents’ Units in October of 2018. In 2019, education was provided by the leaders of these three teams to the remaining areas within BCH who care for children. BMC education and development has also done extensive work to replicate this process within the adult population.

Bringing Behavioral Health Expertise to the Bedside

At Baystate Medical Center, a Behavior Resource Team was created to meet the needs of the hospital in managing behaviorally challenged and at-risk patients. This team consists of Behavior Resource Technicians and Behavior Resource Nurses. Since the team was created, there has been a focus on bringing behavioral health expertise to the bedside. This has been accomplished by making Resource Nurse consults available, along with patient-specific behavior plans to assist both patients and staff in managing needs. The expertise of these caregivers include: suicide precautions, environmental safety, monitoring and observing patient behavior, de-escalating agitated patients, and providing personal care. The Behavior Resource Technicians receive specific behavioral health education and training, including CPI/de-escalation training, and help implement patient-specific behavior plans created by the treatment team, in conjunction with their supervisor and the Behavioral Resource Nurses. Team members have also received training in motivational interviewing, deep breathing techniques, mindfulness, and beginning cognitive behavioral therapy skills.
Nurse-Pharmacy Collaborative Team Shows Results

The Baystate Health Medication Safety Committee is a multidisciplinary team that collaborates to understand and evaluate medication management processes impacting the quality, efficiency, and safety of patient care. Safety reporting data is regularly reviewed by the committee to identify focus areas for process improvement opportunities. This data highlighted numerous requests for missing medications which interrupt nursing and pharmacy workflows, resulting in delays in patient care. In an effort to focus work on this identified issue, the Nurse-Pharmacy Collaborative team was formed. This group is responsible for creating efficient workflows for both professions by establishing a chemistry of trust and open communication.

Some of the key initiatives identified include:

- Implementation of Pharmacy Patient Monitor/Advance Medication Request Tool to improve communication between nursing and pharmacy
- Medication transport technician to standardize medication delivery from the pharmacy to the nursing unit
- Nurse/Pharmacy shadowing experience
- Medication “Tip of the Month” for nursing
- CIS Missing Medication Report created to target missing medication and develop sustainable interventions to reduce missing meds
- Pyxis refrigerator standardization
- Global Pyxis grazing awareness and reporting
- Pharmacy Service Line Agreement to set expectations of timely medication delivery

Baystate Medical Center has seen a 44 percent reduction in requests for missing medications since January of 2018 (see graph). Reducing medication requests allows more time for nursing at the patient bedside. Additionally, pharmacy staff can work at the “top of their license,” maximizing their capabilities and expertise for higher quality care due to reductions in workflow interruptions.
Eliminating Surgical Smoke in the Operating Room

To address the exposure of surgical smoke in the operating room, Betty Casey, VP Surgical Services, coordinated an effort to implement the Stryker Neptune surgical smoke removal system in the Chestnut Surgery Center making the operating room smoke free. Evidence shows that smoke can consist of toxic gases, pathogens and particulate matter that can be a hazard. Chemical, viral, bacterial, and blood particles can live in surgical smoke for up to 72 hours. Literature indicates that strong support from management and the implementation of regular staff education and smoke removal systems can improve practices in the management of surgical smoke in the operating theatre.

Neuroscience Receives Prestigious Grant

Baystate Health earned one of the coveted 2019 monetary awards from American Excess Insurance Exchange, RRG (AEIX) for demonstrating excellence in the improvement of patient care outcomes. The application entitled Reducing Brain Injury-Associated Aggression on an Inpatient Neuroscience Unit was a grant winner of $12,000.

As our professional liability insurance carrier, AEIX supports members to develop and share ways to improve the quality of care and reduce costs related to adverse events. The AEIX Awards and Grants program annually provides grants to AEIX member hospitals and healthcare systems as an incentive to share innovations which have successfully reduced risk and improved patient safety. The program also awards innovative ideas for grant projects to develop future best practices.
In 2019, Dan was named the first Baystate Medical Center winner of the DAISY Award, an international recognition program that honors and celebrates the skillful and compassionate care nurses provide every day. Dan was nominated for the award by the daughter-in-law of a patient on his unit who had a mitral valve replacement and double bypass surgery. She noted how he communicated everything in a way they could understand. She wrote about his compassion in his interactions, his experience and knowledge, and his humor in putting them at ease. She ended by writing “His passion for caring for critically ill patients was evident. His expertise in this specialty is the reason she survived.”
Professional Nurse Advancements

The BMC Professional Nurse Recognition Program (PNRP) is designed to promote the development of nurses’ professional nursing practice. We do this through engagement in a variety of existing and self-defined activities that support a nurse’s autonomy and individual goals. Our program advances not only clinical practice but provides opportunities for development as a professional. We reward and recognize our nurses’ excellence in nursing practice. This year we celebrated annual advancement on October 2. Nurses advancing were recognized with a certificate of advancement and the return of their portfolios. The quality of the work achieved is to be commended. The stories told by nurses are meaningful and speak to their commitment to our patients and to their growth. A total of 151 RNs advanced on the ladders.

**PNRP II**
Brittney Allen
Kristin Alpiarca
Ashley Anderson
Duriya Ayubali
Janae Barrett
Branden Bertelli
Kathryn Blanchard
Renata Borkowski
Danielle Bozik
Tara Budrewicz
Cara Butcher
Taryn Choquette
Justine Ciufrreda
Andrew Clark
Peter Collins
Maylynn Colon
Ryan Corbett
Kara Culloo
Marissa Deady
Nicole Dean
Kimberly Diaz
Carly Dion
Matti Dorval
Kelley Douglass
Samantha Dubner
Emily Dudley
Kassandra Eady
Sarah Fields
Adam Foster
Shelby Franco
Laura Gibb
Amanda Gibbs
Lauren Gifford
Jennifer Gonzalez
Autumn Guyer
Charles Hansen
Crystina Hayden
Aaron Hayes
Nicole Hayes
Veronica Hull
Allyson Janoz
Daniel Jaworowski
Tara Johnson
Alesya Kravchenko
Nicole Ladeau
Meghan Leahy
Hannah Lefebvre
Kayla Levreault
Ariana Liquori
Shaina Mackey
Brittany Maffei
Nadia Mateo
Honora McDonough
Justin Melbourne
Mary Miemiec
Danielle Monet
Tanairie Montijo
Kyna Morgan
Erin Murphy
Michele Niejadlik
Norma Nunez-Vazquez
Emily Petit
Ashley Putnam
Sara Quesnel
Amanda Rachilla
Sheridan Reed
Elizabeth Riccillo
Meghan Ross
Taylor Seelen
Jooyun Shin
Michael Shvetsov
Ryan Spencer
Colleen Sullivan
Kera Tanguay
Anna Tavares
Terekah Thaxton
Marissa Tinnemeyer
William Tobin
Willmary Vega
Maritzabel Vidal
Amber Wassmuth
Taylor Whelihan
Lauren Woytowicz
Siwanee Darsch
Elaine Della Ripa
Ruth Dillensneider
Caitlin Dunn
Tracy Dzialo
Lauren Garcia
Jillian Goodwin
Jennifer Hackett
Cyndal Hartgraves
Jessica Hicks
Carly Kimball
Kelcie Knowles
Stephanie Lafield
Kelly Lakota
Mayur Lalka
Beth Martin
Rebecca Martin
Allison Masi
Stephanie Mason
Heather McCarthy
Julie-Ann Montalvo
Nicole Morin
Jean Peretti
Stacey Peters
Catherine Powers
Laurie Provost
Tabitha Provost
Lyndsey Santanello
Patrick Shinoda
Angel Soto
Fawne St. Pierre
Dorothy Stewart
Erica Summers
Tiffany Tranghese

**PNRP III**
Tracey Abbey
Mariely Alindato
John Barrett
Marie Barthelette
Cory Bellucci
Marie Bienvenue
Andrea Billig
Kristin Boyle
Jamie Bradshaw
Caitlin Browne
Lisa Cabibbo
Myra Camilleri
Amy Cianfaglione
Hannah Coombs
Sandra Crochetiere
Helen Dansereau

24 Research, Awards, Advancements, & Certifications
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<th>Name</th>
<th>Status</th>
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<td>Deborah Tully</td>
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Awards
Jennifer Silvestri, Nurse Manager SW7, Pamela Vecchiarino Award for Excellence in Nursing Leadership, ONL Annual Meeting, June, 2019.
Patty Samra, MSN, RN, Sr. Direction Compensation and Total Rewards, Inducted as President of ONL, June 2019.

Department of Nursing Annual Awards
Sharon A. Smith Compassionate Caregiver Award
Erica Trombley, NICU
Grace O’Niel Ambulatory Nursing Excellence Award
Sandra Mohr, Adult PHP
Julie Shea Life-Giver Award
Shellie Downes, PCT, D6A
Nursing Leadership Award
Anthony Shamoun, Nurse Educator, NCCN/NIU
Beyond Baystate Volunteerism Award
Dianna Martin, RN, BCP Infusion Services
Compassionate Connections Award
Elizabeth Ginepro, RN, ICU

New Knowledge, Innovations & Improvement
Cathy Manning, RN, ICU
Transformational Leadership Award
Sharon Nivar Flores, RN, Ambulatory HIV/AIDS
Exemplary Professional Practice Award
Janice Fruwirth, RN, Ambulatory Med Geriatric
Structural Empowerment Award
Kelsey Battige, RN, Emergency Services
Empirical Outcomes Award
Martha Emond, RN, MM6
BMC Collaboration Award
Maria White, Medical Interpreter
PCT Excellence Award
Vincent Ortiz, PCT, HVCC
Orderly Excellence Award
Alasia Lawson, Orderly, MM6
Mobility Tech Excellence Award
Katlin Trant, Patient Mobility Tech, D6A
Surgical Tech Excellence Award
Zhanna Kot, Surgical Tech, BCH Procedures

Baystate Medical Center Adult Psychiatric Treatment Unit (APTU) Receives the Department of Mental Health License Accreditation issued by the Joint Commission Deemed Status
In the opening meeting of the biannual DMH survey, the surveyors were clearly impressed as the team listed the many clinical innovations and performance improvement projects they have done on the unit since the last survey, and they were especially impressed with how many of these innovations were initiated and/or executed by the clinical staff. They were also impressed with all the work that has been done to extend behavioral health expertise and care to the full hospital, as well as the work the behavioral health team has done as a service line to mutually support all of the psych units in the Baystate system. In the closing meeting, they made it clear that their high expectations for APTU were fully met. They found the unit to be clean and orderly; the documentation of care was thorough and clear; and the staff they spoke to were knowledgeable, professional, and devoted to patient care. The overall result was an extremely positive survey of a unit they said they consider to be one of the best in the state.

Nurse Residency Program Projects: NRP Co-hort
Nurse Placed Intraosseous Access Devices, Amelia Coles, ED, Calvin McKemnie, ED, Brianna LoManto, Pedi ED, Sonia Little, ED

Barriers Faced by Nurses When Implementing the Sepsis Bundle, Jessica Lancia, Wing, Denise Martinez, Ch OR, Tara Cabral, D6B, Alyssa Grumoli, SW6, Amina Asvandiyeva, SW5, Karen Melendez, SW6

Maximizing Patient Safety through Inter-Unit Patient Handoff, Christian Gray, D5A, Meghan Cole, D3B, Ellen Shaw, D5A, Stasia Dowalski, D5A

In-Situ Mock Codes to Improve Efficacy and Patient Outcomes, Elizabeth Hesketh, HVCC, Kelly Schatz, MM7, Kathryn Sutherland, HVCC, Kerilyn Barrios, M5

Best Practices for Providing Discharge Instruction to Patients With Limited English Proficiency, Brianna Richardson, W2, Katarzyna Letowska, Pedi ED, Brianna Lertora, INCH, Dana Alhaffar, NICU, Gillian Cannon, OB, Colleen Kent, INCH, Caroline Dziel, INCH

Eat, Sleep, Console, Amy Jacques, NICU, Nicole Eaton Bagge, NICU, Lindsey Whitacre, NICU Emily Couture, L&D, Brenda Jones, CCN

Therapeutic Temperature Control in the Post Cardiac Arrest Patient, Stefanie Trowbridge, HVCC, Jeanette Peretti, HVCC, Dante Raggio, HVCC
**Pediatric De-escalation Training for Nurses**, Alyssa Anderson, INCH, Sandra Salmeron, PICU, Taylor Coopee, INCH, Anna Norman, INCH, DJ Sherman, INCH

**Universal Cultural Competence in Healthcare**, Barbara Ortiz, BOSC, Olivia Cegelka, CSC, Scott Catlin, CSC, Haley George, BF OR

**Recognizing Hypercapnic Respiratory Failure in the ED**, Jessica Topper, BMC ED, Allison Falcetti, BMC Pedi ED, Phoebe Wilkinson, BMC ED, Chelsi Derrig, BMC ED, Cierra Yorke, BMC ED

**Intravenous Tubing Hang Times**, Kelsey Lyons, SW5, Hannah Migeed-Washburn, SW6, Shannon McKenna, SW6, Kiley Maguire, SW6, Mackenzie Anderson, SW5

**Telemetry Alarm Etiquette**, Kelley Ann Riddle, M5, Kelsy Prats, M6, Lindsey Dury, M7, Deb McNaughton, M5

**Preventing Alarm Fatigue**, Meghan Ginley, D6B, Samantha Deprey-Beaudette, D6B, Maddie Valle, D6B, Anita Patrie, D6B, Alyssa Aresco, SW6, Ryon Gates, SW5

**Alternative Pain Management**, Molly Sullivan, ONC, Haley Lassiter, D6A, Heather Mullen, M6, Stephanie Feliciano, D5A, Rachel Fournier, M6, Madison King, M6

**Reducing Delirium in the Acute Care Setting**, Rebecca Williams, S6400, Caroline Fallon, S2, Cassandra Frageau, S2, Jenna Gaudette, W3, Alyson Bruneault, W3

**Battling Compassion Fatigue and Burnout With Self-Care Practices**, Brooke Logan, SW5, Caitlin Kenefick, SW7, Shayla Olson, SW7, Emily Rines, S1400, Carly Pioggia, SW6

**Infection Control & Personal Protective Equipment (PPE)**, Catie Laraway, Daly OR, Viktoria Stepchuk, Daly OR, Lee Figueroa, BOSC

**Therapeutic Touch in Pediatrics, Infants and L&D**, Vera Gobrial, INCH, Alyssa Falvo, LDRP, Nicole DiDomenico, LDRP, Jacqueline Santos, Pedi


**Fluid Restriction Communication**, Michelle Dawicki, HVCC, Amanda Plasse, OBS, Lauren Bennett, W4, Taylor Hoffman, M5, Samantha Mariani, S2, Kirsten Carr, M6, Sandra Jacques, M7, Brandon Montalvo, OBS

**Suicide Ideation**, Kayla Therrien, Pedi ED, Danielle Brouillette, HVCC, John Graziano, APTU, Mila Domingues, FMC ED, Cecelia Thomas, BFMC, MS

**Patient & Family Experience With Codes; Respectful Moments of Silence**, Brendan McKee, ICU, Bridget Wheble, Wing ED, Matt Muka, ICU, Molly Glazer, ICU

**Aromatherapy**, Sheneece Velazquez, D5A, Megan Murray, D5A

**Publications**


Ruth Kleinpell, PhD, RN, ACNP, FCCM, Jerry Zimmerman, MD, PhD, FCCM, Kathleen L. Vermoch, MPH, MT(ASCP), Lori A. Harmon, RRT, MBA, CPHQ 4; Hugh Vondracek, MSc, Rebekah Hamilton, PhD, RNII; Bruce Hanson, BS, David Y. Hwang, MD, FAAN, FCCM. Promoting Family Engagement in the ICU: Experience From a National Collaborative of 63 ICUs. (2019). Society of Critical Care Medicine.


**Posters**

Presentations


Costello, Gena, BSN, RN, CPEN. Pediatric Disaster Considerations and Blast Injuries. Connecticut Children’s Hospital, Building Brighter Futures. October, 2019.

Sarah Haessler MD, MS1, Elise M. Martin MD, MS2, Mary Ellen Scales RN, MSN, CIC FAPIC3, Le Kang PhD4, Michelle Doll MD, MPH5, Michael P. Stevens MD MPH5, Daniel Z. Uslan MD MBA FIDSA FSHEA6, Rachel Pryor RN, MPH5, Michael B. Edmond, MD, MPH, MPA, MBA7, Emily Godbout DO, MPH8, Salma Abbas MBBS, MPH9 , Gonzalo Bearman MD, MPH5. Stopping the Routine use of Contact Precautions for Management of MRSA and VRE at Three Academic Medical Centers: An Interrupted Time Series Analysis. Presented at:

1. Department of Medicine, Division of Infectious Diseases, University of Massachusetts Medical School-Baystate, Springfield, MA
2. Division of Infectious Diseases, University of Pittsburgh Medical Center-Presbyterian Hospital, Pittsburgh, PA
3. Division of Healthcare Quality, Baystate Medical Center, Springfield, MA
4. Department of Biostatistics, Virginia Commonwealth University, Richmond, VA
5. Division of Infectious Diseases, Virginia Commonwealth University, Richmond, VA
6. Division of Infectious Diseases, Department of Medicine, David Geffen School of Medicine at UCLA, Los Angeles, CA
7. Division of Infectious Diseases, University of Iowa Carver College of Medicine, Iowa City, IA
8. Division of Pediatric Infectious Diseases Children’s Hospital of Richmond at Virginia Commonwealth University, Richmond, VA
9. Department of Internal Medicine, Shaukat Khanum Memorial Cancer Hospital and Research Centre, Lahore, Pakistan


Johansson, Michelle, BSN, RN. Competent Care of the Transgender Patient. Mercy Medical Center ED Symposium, 2019.


Klucznik, Christine, DNP, RN & Griffin, Eric, MSN, RN, CEN. Let’s Get Visible! How the CNO Drives Engagement. Podium presentation. AONE Annual Meeting, San Diego, CA0, April, 2019.


Rines, Nancy, MSN, RN, NE-BC. Start with Your Heart: Leading with Emotional Intelligence. Beta Zeta At Large Chapter, Westfield State University, October, 2019.

After a long battle with heart disease, a patient with end-stage heart failure decided she wanted to stop all medical management and transition to comfort care only on the MassMutual 7 unit at Baystate Medical Center. The patient had one last wish - to have a living memorial service. She wanted to be surrounded by the team on the unit because, as she said, over the 16 years of her illness, the MM7, heart failure, and palliative care teams had become her family who had cared for her and supported her during the most devastating times of her life. Caregivers on the unit arranged for the service which was held in the presence of the patient’s husband and daughter. Everyone gathered around the patient in her room. As beautiful music played in the background each person spoke about their favorite memories of her, the special moments, and expressed how much she was going to be missed. A special gift of a bracelet representing love and flowers were given to the patient. It was an emotional and fulfilling event for those that were able to honor her last wish. She passed away peacefully the following day surrounded by her immediate family and her MM7 family.

From left to right, Kirsten Pasterczyk, RN, Araksya McInerney, Emily Martin, NP, Heather Lopardo, RN, Gabrielle DeVivo, RN, Marta Sokolowski, RN, Anna Ankiewicz, RN, Matthew Coppellotti, RN, Sandra Fickert, Roseline Chiuwa, RN, Cavel Antoine, PCT, Jody Bihler, Silquia Brenes, Sheila Shoemaker, NP, Shelley Albano, William Krach, RN, Larry Leon, Shannan Hudgins, Jacqueline Andrews, PCT, David Bennett, RN
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