2016 Nursing Report

Baystate Medical Center
Baystate Medical Center achieved Magnet® recognition from the American Nurses Credentialing Center (ANCC), a distinction that places the hospital’s nursing staff among the finest in the nation.

U.S. News & World Report ranked Baystate Medical Center third among Massachusetts hospitals. Baystate Medical Center was ranked nationally for its care in the areas of diabetes and endocrinology, and we were also designated as a high performer in four medical specialties.

Baystate Medical Center once again named a Truven® Healthcare Analytics “Top 50 Cardiovascular Hospitals” based upon measures of quality, safety, and experience.
Dear Colleagues,

Please accept my thanks and gratitude for your dedication and commitment to ensuring our patients and their families receive exemplary care—exceptional care celebrated nationally as evidenced by Baystate Medical Center’s current distinction as a Magnet Hospital by the American Nurses Credentialing Center (ANCC). You are part of an elite group to earn this honor three times in a row and ANCC surveyors recognized your exemplary leadership and for meeting national clinical benchmarks.

The report highlights many of your achievements from this past year, our alignment with the Baystate Health 2020 vision, and our commitment to deliver a higher state of caring. The report is structured to reflect our accomplishments with respect to the Magnet pillars of transformational leadership, structural empowerment, exemplary professional practice, and new knowledge, innovation, and improvements.

During the past year, health care organizations across the nation faced significant changes and challenges as they attempt to respond to health care reform. At Baystate Medical Center, we experienced reductions in revenue that were unplanned and unforeseen. We experienced significant volume in our Emergency Department that impacted our headway on our patient progress initiatives. We relocated two inpatient surgical units to the newly opened South Wing and two medical units to the renovated Daly units 6A and 6B. Through all this change, our nurses have maintained their focus on providing outstanding patient care.

I am proud of our nursing achievements. This year we re-designed our Shared Governance Model and the Nursing Clinical Ladder. We worked together to create the 2016-2020 Nursing Strategic Plan. I believe strongly that nursing is positioned to continue to deliver on its strategic plan and improve the health and well-being of all who we serve. Thank you to all my nursing colleagues for another successful year. Together we deliver a higher state of caring!

Christine Klucznik, DNP, RN
Chief Nursing Officer
Vice President, Patient Care Services
## 2016 BMC Nursing At a Glance

### POPULATION

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<th>%</th>
<th>Description</th>
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<tr>
<td>8</td>
<td>RN Turnover Rate</td>
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<td>9</td>
<td>RN Vacancy Rate</td>
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<tr>
<td>25</td>
<td>Nurses are the largest group, making up 25% of the total hospital employee population.</td>
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### EDUCATION AND CERTIFICATION

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<td>BSN or Higher</td>
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<td>Leadership RNs</td>
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### BAYSTATE CELEBRATES (Employee Recognition Program)

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<th>Total Recognitions for BMC RNs</th>
<th>BMC RNs Recognized for Milestone Years of Service</th>
<th>Teamwork &amp; Compassion Most Frequently Recognized Caring Values</th>
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<td>1. Nurses Lead in Unit Relocations</td>
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<td>1. Pain Management</td>
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<td>1. HVCC Award-Winning Care</td>
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<td>1. Acute Care for Elders</td>
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<td>New Knowledge, Innovation, and Improvements</td>
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<tr>
<td>1. Alarm Fatigue</td>
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<td>1. Art of Answering</td>
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<td>1. Collaborating with Child Life</td>
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<td>1. Behavioral Resources</td>
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<td>1. Certification</td>
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<td>Research, Awards, and Certifications</td>
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“Ariel, each day you gave me more than just my medications—you gave me what I could not give myself—dignity, respect, and support.”

— Patient
Transformational Leadership
Planning for the Future: The Nursing Strategic Plan

An important goal for nursing this year was to create the Nursing Strategic Plan 2016-2020. A nursing retreat was held in April 2016 and attended by clinical nurses and nursing leaders. Dr. Joan Vitello, Dean, UMass Worcester Graduate School of Nursing opened the day with an inspirational lecture about resilience. A “World Café” methodology provided the day’s framework as nurses gathered to use an appreciative inquiry focus and determine what “best care” in the four Baystate Medical Center Compass Points looks like. Baystate nurses can find the Nursing Strategic Plan on the Baystate Health intranet, eWorkplace, on the BMC Nursing page under the General Information tab. Staff were invigorated and energized to move the work of nursing forward and begin to move the dial on patient safety, quality, patient experience, and value.

Keeping our Neighborhoods Safe

A local law enforcement Safe Neighborhood Initiative Partnership Award was presented to Baystate Health and Karen Pohlman, MSN, APRN, FNP-BC, manager, Health Integration, at an appreciation dinner held Oct. 24. The event celebrated citizens and law enforcement agencies working together to make the neighborhoods of western Massachusetts safer. Pohlman created the Walking School Bus program which brings students, teachers, parents, and police officers together to ensure children have a safe walk to school. The committee selected Pohlman and Baystate: “In recognition of your outstanding dedication, support, and leadership towards public safety. You have demonstrated a selfless commitment and a continued role in the neighborhood work in the North End of Springfield.”

Nurses Lead Movement of Care in Unit Relocations

Daly 6A and Daly 6B Move to the New South Building

The journey to the new South Building began over three years ago. There were numerous planning meetings and educational in-servicing for staff. The RNs, Patient Care Technicians, Orderlies, and Operation Associates were all included in every aspect of the room design and layout of the units. A patient advisory group assisted with the design. Prior to the openings, staff on the units participated in a variety of simulations with all the members of the healthcare team including: surgical staff, medical staff, respiratory therapists, IV team, RRT, patient transport, Spiritual and Interpreter Services. These simulations allowed staff the time to work together as a team then debrief and revise plans as needed to ensure all were prepared for the move.

Springfield 1 and Springfield 3 Medicine Move to Daly 6A and Daly 6B

After six months of planning and renovation, Springfield 1 Medicine moved to Daly 6B, becoming a 34-bed unit with the capacity to care for intercare patients. Additionally renovations will be completed in April 2017, as more intercare beds are brought online. Springfield 3 Medicine moved to Daly 6A, a 39-bed unit that is certified as a NICHE unit – or Nurses Improving Care for Healthsystem Elders. The unit will also house five private rooms for patients designated as palliative care. Staff on both units underwent rigorous training for new competencies and new equipment. On top of the many logistical preparations by a large team, a blessing ceremony in celebration of the renovation of the Daly floors was held on Dec. 2.
Championing a Culture of Safety

In a culture of safety, team members learn to take action when they see a need and feel safe to do so. They are encouraged to make changes that can benefit the patient and the organization. In organizations that do not support these efforts, staff are frequently afraid to speak up and openly share concerns they may have about safety issues such as adverse events and unsafe conditions. Organizations can improve upon safety by demonstrating leadership commitment to support these initiatives.

Over the past year, Culture of Safety surveys were given to the Operating Rooms, Emergency Department, Labor and Delivery, the Surgical Units, and the Intensive Care Unit. In the Daly OR, a Culture of Safety board has been designed with input from the staff. Team members are encouraged to post safety and operational concerns by using the board as a communication venue. The opportunity to resolve problems and communicate feedback daily is creating a stronger sense of trust and organizational alignment.

The Emergency Department began its journey in May 2015 with significant training of staff and leaders (both administration and physician). Over the past year, many initiatives were put into motion to instill psychological safety as well as a more transparent environment with a focus on improvement rather than blame:

- Safety coaches (nurses, physicians, and techs) were identified for their desire to champion the cause. They went through extensive training and through their efforts have been able to identify and take on some areas in need of improvement within the Emergency Department.
- A team was established to evaluate concerns around physical safety due to emerging behavioral health issues prevalent in many organizations today. Staff education around behavioral health management and the initiation of a “post event” huddle has been helpful in addressing concerns. In addition, there have been strong partnerships created with our Security Department to ensure their presence to create a controlled atmosphere in which to provide patient care. We now employ a Behavioral Health Clinical Coordinator to assist in managing the complex care of this population.

Our shared governance nurse committees encourage staff of all levels to identify and seek solutions to areas of concerns. Team members remind each other of the culture of safety by saying “that is not how we treat each other here” or “that behavior is not consistent with our Culture of Safety!”

Stories of Care

Recently, while in traffic on the Mass Pike, Jessica Moran, RN, Emergency Department, Baystate Medical Center noticed a car crashed by the median and there wasn’t any state trooper or emergency services present. She realized she was the first on the scene of an accident. Headed home after working at Baystate Medical Center, she stopped to help. The car had flipped over several times and she noticed there was glass everywhere. There were two adults and three young children. She soon learned one of the adults had a hurt neck. Moran helped her and kept her neck still. Soon two off-duty paramedics stopped to help and soon after the state trooper arrived. The state trooper was so impressed by Moran’s actions that he called her manager and said, “Your nurse exuded knowledge and professionalism in the care of these patients. I was in complete awe at how she took control of the situation.”
“Kim’s team supported our patient and his family, showing compassion and respect. I see them treat every patient the same. What an exemplary team.”

- Nursing colleague
Structural Empowerment
Shared Governance Model Supports the Voice of the Nurse

During last year’s report, we highlighted the work to enhance our nursing shared governance model where bedside nurses and leaders collaborate and share decision making. The model was rolled out in October 2015 and has been successful in engaging the nursing workforce. The nursing committees now meet monthly and are co-chaired by staff nurses with a leadership advisor. The committees have significant staff nurse presence which facilitates staff nurse engagement and partnership in decision making.

Clinical Ladder Redesigned to Reward and Enhance Performance

Throughout 2015 and 2016, a team of clinical nurses and nurse leaders worked to re-design the Baystate Medical Center clinical nurse recognition program. The goal was to create a program grounded in accountability and professional growth. Several drafts were presented and reviewed by the Clinical Nurse Ills and IVs. The team concluded that consistent, equitable practice by professional nurses must reflect the Baystate Health compass points of Safety, Quality, Patient Experience, and Value, the Magnet components of Transformational Leadership, Structural Empowerment, Exemplary Professional Practice, New Knowledge, Innovations, and Improvements and the Massachusetts Nurse of the Future Competencies©. The program is rooted in the principle that self-enrichment benefits nurses, patients, and the unit as a whole. The program supports life-long learning, competency, and performance-based rewards. The team shifted focus from clinical competency to professional practice and changed the name to Professional Nurse Recognition Program. This year, 147 nurses advanced within levels II, III, and IV. A celebration and awards ceremony was held in September.

A Focus on Nurse Retention

Despite boasting a turnover rate that is lower than the national average, Baystate Medical Center undertook an initiative to focus on improving the retention of newer staff. In January, Sue Sweeney, MSN, RNC, dedicated a portion of her weekly time to the role of Nurse Retention Coordinator. Hospitals nationwide are evaluating this role in an effort to understand the issues new hires are facing as they assimilate into their unit.

In her role, Sweeney conducts exit/transfer interviews, holds one-to-one discussions with nurses, and meets with nurse managers to review issues. She began this work by concentrating on selected units that have a higher nurse turnover rate and units with low engagement scores. This year alone, Sweeney has met with 152 nurses. Each new hire receives her card and employees are encouraged to reach out with issues. All conversations are confidential and the ultimate goal is to ensure nurse satisfaction and fulfillment in their professional career.

Hospital Shows Support of Nurses with Magnet Quilt

Recognizing that Baystate Medical Center’s third Magnet re-designation could not have been possible without the support of all departments within the organization, all team members were invited to submit a single fabric square that represented their department to create a beautiful collective Magnet Quilt. Over 40 quilt squares were received, each innovative and reflective of individual departments. For example, the Flex Team highlighted the new standard dress attire for their quilt square. Maureen Nomakeo, RN, clinical coordinator, Springfield 3 Oncology, stitched the squares together to produce a quilt which represents the teamwork and spirit behind the Magnet journey.

Nurse Residency Program Prepares New Grads for Practice

Baystate Medical Center continues to expand its highly regarded Nurse Residency Program. Since its inception in 2013, the program has grown to support three new graduate co-horts each year and has now expanded to support Baystate...
Health’s community hospitals. Baystate Medical Center participates in the Vizient (formerly UHC) and American Association of Colleges of Nursing residency program. All residents participate for a period of one year and are required to complete an evidence-based project. As of the fall of 2016, 226 nurses have entered the nurse residency program and produced 49 evidence-based projects. Baystate Health’s 12-month turnover rate of all new graduate nurses hired in 2015 was 8.0 percent as compared to the national 12-month turnover rate for new nurses of 17.2 percent.

In Her Own Words

By Nikki Ayala, RN, Emergency Department, Baystate Medical Center

“On the morning of March 3, 2016 at 3:30 a.m., I met Joe, a 55-year-old patient who had just arrived via EMS. I was told he was coming in with a gastrointestinal bleed. I saw a frail, thin man who looked many years older than he was. We needed to get a CT scan as soon as possible to find the source of this bleeding. The CT showed that Joe had a leaking abdominal aortic aneurysm. I stayed with Joe while he got the news. He had two options. Immediate surgery or he would only have 12 hours to live.

Joe was incredibly knowledgeable about his condition and was very realistic when the surgeon spoke of his poor ejection fraction and how that posed a major risk factor for surgery. Joe did not have much of a chance of making it out of surgery. He said, “Nikki, my risk assessment tells me it’s my time. I don’t want to live on tubes. If I can’t get in my truck and go get a cup of coffee and watch the sunset; I don’t want to be here.”

Joe’s bravery touched all of us.

It was a sad time of silence waiting for Joe to let go. I asked his sister and his friend what his favorite song was and she told me Guns N’ Roses "Patience." I put Joe’s favorite hat on his head, we put a phone by Joe’s ear and we all listened to his favorite song. Joe passed before the song was over. Joe’s sister thanked me, hugged me, and told me I made a difference in her brother’s last moments. I told her I was honored to be his nurse.”
“Cheryl, you are an angel in scrubs. Thank goodness for people like you who are fully there for people in times of need and go above and beyond the call of duty to help them and their families.”

– Patient’s wife
Exemplary Professional Practice
CAUTI Champions
Improving Care of Patients

The CAUTI Champion group was formed in December 2013 to seek a solution to decrease the use of foley catheter and reduce the incidence of catheter-associated urinary tract infections.

Over the past several years, the team has used evidenced-based research to help guide and develop standardized education, a nursing policy, nurse driven Foley removal protocol, and a streamlined multidisciplinary approach on how indwelling catheters are audited and CAUTIs reported. The team included RNs and PCTs and continues to review monthly data, discuss unit infections on a case by case basis, and brainstorm on challenges they face.

Since the inception of the CAUTI Champion group Baystate Medical Center has seen a:
- 24% decline in catheter utilization
- 48% decrease in overall CAUTIs

In the most recent quarter (July – Sept. 2016)
- 16 units (62%) had no CAUTIs, and eight of those 16 had no CAUTIs for two or more consecutive quarters
- More than three quarters of units (76%) were also below the NHSN benchmark for Foley utilization

Nurse Champions Help Ease the Pain

Units at Baystate Medical Center now have the support and expertise of Nurse Pain Champions. The role of the pain champions is to provide unit-based clinical support to caregivers through pain management education and initiatives supported by evidence-based practice, leading to improved patient pain outcomes and increased pain satisfaction scores.

As an organization, one of our strategic goals includes improving the patient experience in which pain management is a key component. Last year, an oversight committee began meeting with an interdisciplinary team of nurses, physicians, and pharmacists and identified a need for a unit-based Pain Nurse Champion Role. All nursing units were represented and led by Cidalia Vital, RN, and Sue Castanera, RN.

Neonatal ICU Pain Resource Nurse Anna Liza Kilcoyne, BSN, RN, helped celebrate National Pain Awareness Month by promoting education to the NICU clinical nurses and families. Using a poster format, Anna informed parents how neonatal pain is managed in the unit and how staff work together to keep babies comfortable. The poster also educated parents on their role in assisting with pain management.

HVCC Wins the Gold Beacon Award

The Beacon Award for Excellence honors individual patient care units that distinguish themselves by improving every facet of patient care. Units that achieve this award set the standard for patient care excellence through the use of evidence-based practices that improve patient outcomes, patient and staff satisfaction, and credibility with consumers. It signifies a supportive work environment and high levels of collaboration. It is typically driven by the clinical nursing staff on a unit.

In Baystate Medical Center’s Heart & Vascular Critical Care Unit, the leadership has been working to improve their culture by coaching staff through change. One significant change was the hiring practice on the unit. In prior years, only clinical staff with critical care experience were hired. Recruitment changed to hire for “attitude” and “fit.” Educators work to teach and train the skills required to achieve clinical competency. Evidence-based practice became the framework for all practice changes. Staff embraced the literature to support
Clinical staff worked together to write the application for the award, an intensive, time-consuming task. The entire process promoted staff unity and increased collaboration. On June 30, the unit received notification that they were chosen to receive the award awarded through June 2018. They are one of only three units to earn gold in the state. The Medical/Surgical ICU earned a Silver Beacon Award with designation through June 2017.

The ACE Unit Achieves Recognition for Innovative Care

Baystate Medical Center’s Acute Care for Elders (ACE) Pilot won the top award for the PRC (Professional Research Consultants) Achievement Awards–platinum. ACE is improving the lives of older adults by reducing falls, delirium, and improving their ability to function self-sufficiently when discharged. Several Baystate Medical Practice providers and practices received 4 and 5 star ratings from the PRC Achievement Awards. Winners were recognized for achieving excellence throughout the year by improving patient experiences, employee engagement and physician alignment, and engagement based on surveys of patients, employees, and/or physicians.

How the ACE team improved quality and patient care among the elderly

- **Reduced falls:** ACE patients fall less than half as often as adult inpatients of all ages.
- **Deliurium reduction:** ACE patient rates declined by 30%.
- **More discharges to home:** 13% more ACE patients were discharged to the community compared to national averages for elders.
- **Less restraint use:** Only one ACE patient was restrained, a nearly 50-fold lower rate than other adult medical patients.

In Her Own Words

*By Zelia Almeida, RN IV, Pediatric Intensive Care Unit*

“Christmas was approaching and during report I was told that my patient really wanted a Hatchimal, one of the hardest gifts to get during the 2016 holiday season. The patient’s dad had told the day nurse that he has been unable to get one. I called Target and spoke to the manager and explained the situation. While he couldn’t hold a Hatchimal for me, he did tell me that they had twelve on hand for one day later in the week and that they would be handing out tickets to customers starting that day at 7:30 a.m. I was working that day so I called Katie Ley, PCT, PICU, and told her the situation. Katie was off and told me she’d go to Target and get in line. Katie and her cousin, Stephanie Fournier, got to Target by 6:30 a.m. so when doors opened at 8 a.m. she had a ticket and was able to get Carlos his Hatchimal.

We love our patients very much and this young patient comes to us often for his chemotherapy. Christmas is about sharing and love. We wanted to do this for him. Katie and her cousin are amazing women and the fact that they stood in the cold for 1.5 hours shows that.”
“The Wesson 4 nurses who took care of our father the last days of his life were amazing. They care for hundreds of patients every week, but made us feel like it was all about us, all about our Dad.”

– Patient’s Son
New Knowledge, Innovation, and Improvements
An Eye on Alarm Fatigue

Nurses Carol Lynn, MSN, RN-BC, and Gina St. Jean, MSN, RN-CCRN, CSC, lead an alarm management project with the goal to make improvements to ensure that monitor alarms are heard and responded to on time to improve patient safety. The strategies of default parameter customization, patient-specific alarm settings, daily cardiac monitor lead changes, and a standardized monitored transport policy have been implemented across all monitored inpatient units. Using alarm data collection software, alarm data is analyzed monthly. Alarm volume and fatigue has been reduced by 40-70 percent in the Heart & Vascular Critical Care Unit and the Heart & Vascular Telemetry areas. The reduction in the number of no-actionable or nuisance alarms allows staff to be alert for and respond to actionable and significant alarms. The staff is less distracted and is able to respond to actionable events. Customizing parameters to the patient and their condition allows nursing to provide more patient-centered, safe, and cost-effective care across the organization.

The Art of Answering

In an effort to create a spirit of nursing inquiry, Cidalia Vital, MSN, RN, spearheaded the Baystate Medical Center “Art of Questioning” Campaign for the past two years. Clinical nurses were asked to create questions about nursing practice issues and concerns that would generate the development of solutions. Over 160 clinical questions were asked in 2014 and 2015. These questions resulted in the submission of 80 posters by clinical nurses.

This year, Baystate Medical Center held its first-ever “Art of Answering” event on March 23, an event that was the culmination of answering those original questions focused on advancing nursing practice at the bedside through inquiry. The theme of the campaign was “Climbing PICOT Mountain.” There were 34 entries to the Art of Answering. Coaches worked with the nurse investigators with project development, guide the research process, create a professional poster, and teach presenting skills. The Campaign ended with a celebration of the work and professional presentations by 20 teams.

Collaboration with Children’s Specialty Center on the Child Life Specialist Program

Child life specialists are trained professionals with expertise in helping children and their families overcome life’s most challenging events. Armed with a strong background in child development and family systems, they promote effective coping through plan, preparation, and self-expression activities. They play a vital role in educating caregivers, administrators, and the general public about the needs of children under stress. In an effort to improve patient experience scores, the Baystate Orthopedic Surgery Center (BOSC) partnered with Jenna Cosimini from Child Life to collaborate on an educational initiative for the surgeons, anesthesiologists, and nursing staff. Jenna spent time in the Pre-Admission Evaluation Unit and determined an opportunity for standardizing the pre-operative interview with parents. Providers now realize that the role of the child life specialist is essential in allaying anxiety for the parents as well as the children. Because of their presence, we have seen a smoother continuum of care for our pediatric population which has resulted in increased staff satisfaction and patient/family satisfaction as well.

Preventing Falls in an Outpatient Setting
Nursing staff at the Baystate Orthopedic Surgical Center took the initiative to develop outpatient specific strategies to prevent falls within the facility and within the patient’s home. To collect accurate data, fall assessment criteria were added to the post-operative phone call. This initiative soon spread to other outpatient clinics such as the D’Amour Center for Cancer Care and the Chestnut Daystay Center. An Ambulatory Falls Committee was developed to report strategies, ideas, comments and outcomes to the hospital-wide falls committee. A future goal will be to continue to reach out to other outpatient settings with the ultimate outcome of implementing the best falls prevention ideas inside the facilities and in homes.

**Behavioral Resource Team**

In response to increasingly complex, behaviorally challenging patients and increased in sitter utilization, the role of the Behavioral Resource Nurse (BRN) was created in early 2016.

This important new role assists care teams with patients with behavioral concerns being treated in non-behavioral health settings. From time to time patients may become agitated, and staff must possess attitudes and skills to de-escalate these situations. The number of violent incidents can be reduced by the appropriate, therapeutic and effective use of a full range of interventions.

The Behavioral Resource Nurse proactively works with unit care teams to build their skills and confidence in these situations, formulating care plans with targeted interventions. In addition, the BRN responds to Code Yellow calls, modeling and teaching staff facing a violent patient to present themselves as someone who can solve the problem, as a listener, and not as a threat to the patient. The BRN models non-coercive methods to manage violent behavior with the aim to engage the patient in calming down and dealing with anger or frustration in a non-violent way.

In addition to providing a clinical teaching and direct care resource to the nursing care team, the BRN has an important role as a steward promoting efficiency and value. This involves close daily monitoring of Constant Companion use, making sure that these resources are deployed when needed, as well as performing a daily assessment to recognize and coordinate opportunities to open closed/blocked beds.

According to Vernette Townsend RN, MSN, director of Medical/Surgical Nursing, “This transformational care initiative has improved the safety of our patients and staff outside psychiatric units.”

**Advancing Education and Care through Certification**

On March 16, a special event was held to celebrate Certified Nurses Day. Over 200 nurses attended the event. Christine Klucznik, CNO, thanked nurses currently certified and offered encouragement to those thinking about becoming certified. Nursing certification improves the care delivered to our patients and also increases nursing professional satisfaction.

A panel of staff nurses discussed the importance of taking the journey to certification by partnering with other colleagues to form study groups. Various nurses from different specialties presented their unique nursing specialty certification.

*See one Baystate Medical Center nurse’s certification story below.*

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**A Nurse’s Certification Story**

Jennifer Zollo, RN III, Pediatric Procedure Unit, Baystate Medical Center, received her certification in 2016 as a pediatric nurse by the Pediatric Nursing Certification Board. “I decided to get my certification because it was a career goal and a step in the process to advance to a clinical nurse IV. Certification validates a nurse’s knowledge and expertise and enhances learning in their specialty. I am proud to wear my certified Pediatric Nurse pin to work every day.”
“Caroline was my labor and delivery nurse for both my children. I was blessed to have her. She was so kind and the best nurse I’ve ever had.”

– Patient
Exemplary Professional Practice
Research, Awards, and Certifications
Nursing Forgivable Loans
Hope Baker, RN
Karrian Benejan, RN
Constance Blake, RN
Christina Bushey, RN
Maureen Callahan, RN
Chrispina Chitemerere, RN
Tracy Clapp, RN
Heather Clark, RN
Jamie Coffin, RN
Alison Colburn, RN
Tina Cole, RN
Gina Collins, RN
Michelle Cooper, RN
Christopher Cowan, RN
Kara Culloo
Molly Czaplicki, RN
Natalya Deven, RN
Tanya Dwyer, RN
Kimberly Dziel, RN
Jenna Fairlie, RN
Jennifer Germain, RN
Marybeth Hayes, RN
Jennifer Houle, RN
Elizabeth Jarry, RN
Ashley Kelley
Richard Kendra, RN
Anna Liza Kilcoyne, RN
Karen LaFrance, RN
Jenni Lanoue, RN
Graciette Lavoie, RN
Connie Leung, RN
Wendy Lucas, RN
Oksana Lukomsky, RN
Laura Mazur, RN
Dorothy Monteiro, RN
Melene Mullings, RN
Mary Murdock, RN
Maureen Nomakeo, RN
Amanda Nugent, RN
Karin Patingre, RN
Shannon Ramos, RN
Sandra Salmeron
Jill Scibelli, RN
Christine Scibelli, RN
Jacqueline Scott, RN
Beth Stadnicki, RN
Karen Stefanik, RN
Erica Teles, RN
Khadijah Tuitt, RN
Karen Westbrook-Vega, RN
Massachusetts Department of Public Health 2016 Breastfeeding Achievement Award – Baystate Medical Center, Neonatal Intensive Care Unit
Professional Research Consultants (PRC) Platinum Award – Springfield 3 Medicine Acute Care for the Elderly program
Schwartz Center National Compassionate Care Giver Award nominee – Mary Foster
Baystate Medical Center
Sharon A. Smith Compassionate Caregiver Award – Molly Pulchtopek, RN, M7
Grace O’Neil Ambulatory Excellence Award – Alicia Gordon, RN, Mason Square Neighborhood Health Center
Structural Empowerment Award – Dorothy Jacques, RN, ED
Exemplary Professional Practice Award – Elizabeth Jarry, RN, Flex Team
Transformational Leadership Award – Cynthia Svec, Daly 5A
New Knowledge, Innovation, and Improvement Award – Jennifer Marion, RN, NICU
Empirical Outcomes Award – Nancy Greco, RN, LDRP

Awards
Cardinal Health Nursing Award RN Inspire – Diane Betti, MSN, RN, Director, Daly OR
Life Choice/Donate Life Recognition and Appreciation Award 2016 – Pamela Fisk, MSN, RN
Mary B. Conceison Award for Excellence in Nursing Leadership, ONL MA/RI/NH/CT – Christine Klucznik, DNP, RN, CNO, VP Patient Care Services
A Valentine’s Day to Remember
(Excerpt from letter from Sean Robinson, RN, on the care his grandparents received at Baystate Medical Center.)

On Thursday, February 11, my grandfather John Polopek was admitted to M7 with chest pain/CHF/COPD exacerbation. The following day, my grandmother Bernie Polopek was admitted with a stroke. She spent a day in the ICU and then was transferred to Daly 5A. The overall care was exceptional, but there are two people that went above and beyond during this heartbreaking time—Molly Pulchtopek, RN, and Maria Tanon, PCT, on M7.

The following Sunday after they were admitted was Valentine’s Day, and I was hoping they could see each other. Molly and Maria were huge advocates to make this happen. Molly volunteered to sit and monitor my grandfather and worked with his hospitalist to make the visit happen. Maria did an exceptional job of providing personal care to my grandfather (shaved him and made him feel special). They made a formal tie out of paper chucks and colored hearts and XOXOXO with red markers. They went around collecting flowers and made an arrangement for my grandfather to bring to my grandmother.

Prior to leaving with my grandfather to meet his date, Molly announced overhead Room 16 is off of tele for his big date. All of the staff acknowledged and congratulated my grandfather as he passed by in his wheelchair. My grandparents were able to share some chocolate ice cream together and this was exceptionally special to them. This was one of the last times my grandfather was able to see my grandmother before she passed away on February 23.

What these caregivers did for my family and me cannot even be described in words in this letter.
Certifications 2016
Sheila Agosto, RN
Joshua Aliengena, RN
Kayla Aliengena, RN
Laurie Bannish, RN
Susan Barnard, RN
Karli Barrett, RN
Laura Barrows, RN
Linda Belkas, RN
Susanne Benson, RN
Jeremiah Berlin, RN
Constance Blake, RN
Heather Breveleri, RN
Melissa Buxton, RN
Erlyne Camilleri, RN
Alisha Canoa, RN
Jennifer Caraballo, RN
Jaime Caron, RN
Nancy Cebula, RN
Maria Christina, RN
Donna Cipriani, RN
Patricia Coffelt, RN
Robin Cooney, RN
Nichole Coppez, RN
Patricia Daviau, RN
Megan Davis, RN
Diane DelRosario, RN
Deborah DiCarlo, RN
Kelly Donahue, RN
Margaret Dwight, RN
Felicia Easton, RN
Katelyn Farrell, RN
John Fleury, RN
Sallyann Fortini, RN
Ann Garbecki, RN
Michelle George, RN
Gina Grabowski, RN
Nancy Greco, RN
Eric Grenier, RN
Amy Haas, RN
Shirley Hamill, RN
Michele Harrington, RN
Jane Hartmann, RN
Marybeth Hayes, RN
Gayle Hellyar, RN
Mary Hudock, RN
Ann Humphries, RN
Kaitlyn Hurst, RN
Rebecca Hutchins, RN
Shannon Jackson, RN
Michelle Johansson, RN
Cynthia Killian, RN
Sarah Kinnaman, RN
Yelena Koroleva, RN
Jennifer LaBonte, RN
Karen Ladd, RN
Sharon LaFond, RN
Christina LaTorra, RN
Elise Lennon, RN
Carol Lynn, RN
Gabrielle Maclure, RN
Karen Marcoux, RN
Barbra-Michele Maryanski, RN
Joan McGirr, RN
Sandra Mohr, RN
Khrisine Morin, RN
Patricia Newman, RN
Paula Nein-Large, RN
Jane O’Brien, RN
Patti-Lu Ouimette, RN
Taryn Pandolfi, RN
Tara Pappas, RN
Dale Parenteau, RN
Kirsten Pasterczyk, RN
Elizabeh Peloquin, RN
Thomas Pioggi, RN
Laura Pratt, RN
Nancy Price, RN
Carla Provost, RN
Joanne Punderson, RN
Victoria Roberts, RN
Wendy Savarese, RN
Mary Ellen Scales, RN
Tricia Sedelow, RN
Neomi Seidell, RN
Patrick Shinoda, RN
Kristin Smith, RN
June St. Georges, RN
Janice M. Sullivan, RN
Angela Tauer, RN
Joan Treiber, RN
Cheryl Truehart, RN
Khadijah Tuitt, RN
Melissa Tuomi, RN
Brittany Twohig, RN
Sheryl Vieira, RN
Magdalene Wamburu, RN
Melane Wheeler, RN
Lisa Whitehead, RN
Michelle Whitney, RN
Genia Yelinek, RN
Elizabeth Zabielski, RN
Jennifer Zuidema, RN
Patient-Centered Outcomes Research in the ICU

In July of 2016, the Society of Critical Care Medicine (SCCM) selected the Adult Intensive Care Unit (ICU) at Baystate Medical Center to participate in a new collaborative aimed at helping hospitals implement patient and family engagement programs. This collaborative mirrors other successful initiatives facilitated by SCCM, in which ICU teams nationwide are pulled together to implement patient care initiatives by sharing resources, collecting data, and learning from the experiences of others.

Baystate Medical Center’s ICU is one of the 63 ICU teams participating in the Patient-Centered Outcomes Research Institute (PCOR-ICU) Collaborative: Improving Care for Critically Ill Patients and Families through Research Dissemination and Implementation. Our initiative focuses on integrating structured patient and family care conferences with evidence-based processes that facilitate active participation of patients, families, and members of the interdisciplinary team in care planning and establishment of mutually agreed goals of care.

Valid Clinician and Family Patient Care Conference Surveys are being utilized to measure the impact of this initiative on families and ICU staff experiences and satisfaction.

Pamela Trench, NM-ICU, and Bogdan Tiru, MD-Division of Pulmonary and Critical Care Medicine are leading the ICU’s interdisciplinary team of physicians, social workers, nurses from multiple levels, and respiratory therapists towards achieving the goals and outcomes of this initiative.

Publications


Presentations

AACN Region 1 Horizons 2016 Critical Care Symposium. Don’t Get Delirious – Take Sleep Serious: Real Life Lessons for CSI’s. Cathie Manning, BS, RN, CCRN & Linda Pellegrino, BSN, RN, CCRN.

AACN Region 1 Horizons 2016 Critical Care Symposium. Improving Communication: The Key to Providing the Safest and Highest Quality Critical Care. Pamela Trench, BSN, RN, CCRN, Kate Walles, MSN, RN, CCRN, Karen Shea, AND, RN, Kayla Slessler, BSN, RN, Kathy Radiscic, BSN, RN, CCRN, Kathy Nash, RN, Cindy Killian, BSN, RN, CCRN, Denise Gallant, BSN, RN, Colby Gallagher, BSN, RN & Jessica Broulette, MSN, RN, CCRN.

AACN Chapter at UCLA. The Essence of Courageous Care. Deb Baker, BSN, RN, CCRN, Cathie Manning, BSN, RN, CCRN, Linda Pellegrino, BSN, RN, CCRN & Kimberly Connly, BSN, RN, CCRN.

Academy of Medical Surgical Nurses, 25th Annual Convention. Interprofessional Patient Care Rounds.

Laura Bolella, MSN, RN, Eric Griffin, MSN, RN, CEN, & Debra Meyer, MHA, BSN, RN, NE-BC.

American Association of Neuroscience Nurses. Navigating Neurosurgical Pain. Allison Kostrzewa, MSN, RN, CNRN, Karen Marcoux, BSN, RN, Amber Monson, MSN, RN, CNL & Narvis Handford, RN-BC.

American Association of Peri-Anesthesia Nurses (ASPAN). NPO Status and Post-Operative Nausea and Vomiting in Daystay Patients Undergoing GYN Surgery. Nancy Falvey, BSN, RN, CAPA, Lori Clarke, BSN, RN, CAPA, Ann Marie Culver, RN, CAPA, Alison Colburn, RN, CAPA & Jennifer Friderici, MS.

American Association of Peri-Anesthesia Nurses (ASPAN). Colles Fractures and the Elderly: Make a Difference in the Care. Meg Beturne, MSN, RN, CPAN, CAPA.

Massachusetts Action Coalition Summit 2016: Transforming Nursing Orientation: Meeting the Needs of the Contemporary Healthcare Professional. Elizabeth Goncalves, MSN, RN-BC, Arlene Kruzel, MSN, RN-BC, CNRN & Eric Griffin, MSN, RN, CEN.

National AORN Conference Poster Presentation: A Medication; Safety Performance Improvement Project. Diane Betti, MSN, RN, CNOR, CSPDT, ST & Catherine Dutton, MSN, RN, CNOR.

National Association of Psychiatric Health Systems 2016 Leadership Forum. Hospital-Based and Community-Based Integrated Behavioral Health Services in Primary Care. Matthew Haas, LICSW, LADC-I & Barry Sarvet, MD, DFAPA, FAACAP.
The Benefit of a Dedicated Comfort Care Unit. Maura C. Ford, RN.

Managing Infusion Reactions in an Outpatient Infusion Suite. Robin Plesha, MSN, RN-BC & Renee Tompkins, RN, CAPA.

Preoperative Pregnancy Testing: To Test or Not to Test? Jill Scibelli, BS, RN, CNOR.

Capnography: The Ventilation Vital Sign. Eric Griffin, RN, Anna Ankiewicz, RN, Heather Armstrong, RN, Laura Boella, RN, Cristina Ferreira, RN, Renea Fortini, RN, Lynn Guidi, RN, Melissa Hathaway, RN, Linda Latham, RN, Deanna Potorski, RN, Iris Rivera, RN, Donna Slora, RN, & Nathan Zyla, RN.

The Role of Early Education in Decreasing Anxiety in Patients Receiving Fecal Microbiota Transplants. Laura Barrows, RN, Monica Cuccovia, RN, Kimberly Dziel, RN, Carla French, RN, Sarah Haessler, MD, Thomas Panaccione, RN, & Jorge Sotelo, MD.

Shhh...Healing in Progress: Daytime Quiet Hours. Carly Kimball, BSN, RN.

Evaluating the Effects of Positive Patient Comments on Nursing Satisfaction. Chris Skawinski, BSN, RN, CAPA & Liz Simao, RN.

Examining the Effect of Providing Education and Raising Awareness of Certification in Specialty Nursing Certification Rates. Darlene Jackson, RN, & Heather Clark, BSN, RN-BC.

The Influence of Quiet Kits on Reducing Night Noise and Improving the Patient Experience. Robin Pelletier, BSN, RN, Michael Brun, MS, Brigid Gildea, BSN, RN, Therese Leab, PCT, & Kimberly Dziel, RN.

Improving Patient Safety by Reducing Alarm Fatigue. Carol Lynn, MSN, RN-BC & Gina St. Jean, MSN, RN, CCRN-CSC.

Improving Pediatric Handover in a Pediatric Daystay Surgery. Michelle Whitney, MSN/Ed, RN, CPN, CLNC, Dusti Wells, RN & Kim Reed, RN.

Intentional Hand Hygiene: A Practice of Self-Care Phase II: Using a mindfulness strategy to reduce perceived stress in the patient care team. Lauri Deary, BSN, RN.

Navigating Neurosurgical Pain. Karen Marcoux, BSN, RN, Allison Kostrzewa, MSN, RN, CNRN, Narvis Handford, RN-BC, & Amber Monson, MSN, RN, CNL.

The Use of SBAR Communication on a Heart Failure Unit. Jodi Kashouh, MS, RN-BC, CNL, Diane Kostdito, MSN, RN, Araksya Mcinerney, BSN, RN, MA, & Marta Sokolowski, RN.

Using a Decision-Tree Tool to Improve Breastfeeding Support. Kimberly Congden, MSN, RN, IBCLC.

NPO Status and Post-Operative Nausea and Vomiting in Daystay Patients Undergoing GYN Surgery. Nancy Falvey, BSN, RN, CAPA, Lori Clarke, BSN, RN, CAPA, Ann Marie Culver, RN, CAPA, Alison Colburn, RN, CAPA & Jennifer Friderici, MS.

Effectiveness of Pre-Surgery Video in Reducing Anxiety in Daystay Surgical Patients. Kathleen Frodema, RN, Stella D’Ascoli, RN, Sandra Fidalgo, RN, Linda Haraty, RN, Laurie Hurley, RN & Jane Garb, MS.

Organization of Nurse Leaders MA/RI/NH/CT Quarterly Meeting: The Journey to ACE: Acute Care for Elders - A Performance Improvement Initiative to Improve Care and Reduce Delirium. Patricia Coffelt, MSN, RN-C.


Sigma Theta Tau International. The Journey to ACE – A Performance Improvement to Improve Care and Reduce Delirium. Patricia Coffelt, MSN, RN-C.

UMass Amherst and BH Collaborative Webinar. Interprofessional Collaborative Best Practice: What is the Role of the Patient and Family. Denise Schoen, MSN, RN-BC.

The Art of Answering Campaign for Nurses 2016

Early Progressive Mobility in the ICU. Marisa Pease, RN, Betty Shaheen, RN, Daryl Mucci, RN, Kathy Austin-France, RN, Tom Piogga, RN, Kate Conklin, RN & Karen Shea, RN.

Decreasing the Incidence of Intraoperative Hypothermia. Karin Patingre, BSN, RN, CNOR.

Feasibility of Using a 3 or 5 ml Syringe for Medication Administration via the Continu-flo Solution Set Connected to a Peripherally Inserted Central Catheter Line. Darlene Brunelle, BSN, RN-BC, Lynn Morris, MSN, RN-BC, & Crystal Wilson, BSN, RN-BC.

Research, Awards, and Certifications

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Professional Nurse Advancements

PNRP II

Christina Petrucci, RN, Daly 5A
Molly Gove, RN, HVCC
Tricia Sedelow, RN, D3B Observation
Ariana Cappelli, RN, Daly 5A
Deborah Tully, RN, Daly 5A
Maurice Turner, RN, Daly 5A
Naomi Valle, RN, Daly 5A
Catherine Fish, RN, Daly OR
Keith Fisher, RN, Daly OR
Brandi Garris, RN, Daly OR
Sara Gibby, RN, Daly OR
Michelle Angell, RN, ED
Nicole Ayala, RN, ED
Ellen Benjamin, RN, ED
Brett Costa, RN, ED
Whitney Cronin, RN, ED
Kelly Donahue, RN, ED
Michele Johansson, RN, ED
Eric Johnson, RN, ED
Sarah Kinnaman, RN, ED
Amanda MacRae, RN, ED
Celia Maysles, RN, ED
Lauren McFarlane, RN, ED
Caitlin Millet, RN, ED
Melanie Neece, RN, ED
Aimee Perrault, RN, ED
Madeline Ramos, RN, ED
Lauren Rusczek, RN, ED
Jacquelyn Sprofera, RN, ED
Colleen Thibault, RN, ED
Emily Walsh, RN, ED
Mike Yu, RN, ED
Vyacheslav Verbetsky, RN, Flex Team
Heather Aloisi, RN, HV OR
Melissa Arena (Gilooly), RN, HV OR
Tina Cole, RN, HV OR
Kristen Marcotte, RN, HV OR
Jonathan Varnet, RN, HV OR
Alina Capatina, RN, HVCC / PCU
Lauren Capobianco, RN, HVCC / PCU
Kaitlyn Dorval, RN, HVCC / PCU
Laurel Hootstein, RN, HVCC / PCU
Jillian Sipperly, RN, HVCC / PCU
Courtney Sullivan, RN, HVCC / PCU
Brianna Dieni, RN, Infants & Children
Carly Kimball, RN, Infants & Children
Stacey Peters, RN, Infants & Children
Victoria Mitchell, RN, LDRP
Sara Thomas, RN, LDRP
Larissa Vargas, RN, LDRP
Joanna Sykula, RN, M6
Lauryn Miller, RN, HVCC
Bryce Donovan (Jones), RN, M7
Shannon Griffin, RN, NICU
Erika Trombly, RN, NICU
Cynthia St. John, RN, NICU
Erica Benoit, RN, S2
Kayla Boucher, RN, S2
Caitlin Daley, RN, S2
Lauren Derouin, RN, S2
Breanna Spradley-James, RN, S2
Eva Marie Sullivan, RN, S2
Cathleen Bridges, RN, S3 Oncology
Jennifer Farrell, RN, S3 Oncology
Melinda Grant, RN, S3 Oncology
Michelle Manser, RN, South Wing 5
Amanda Bryant, RN, South Wing 7
Ines Burek, RN, South Wing 7
Andrew Clark, RN, South Wing 7
Nicole Libiszewski, RN, South Wing 7
Sean Martin, RN, South Wing 7
Brianna Perry, RN, South Wing 7
Allegro Bergeron, RN, Springfield 1 - Respiratory
Danat English, RN, Springfield 1 - Respiratory
Doris Haber, RN, Springfield 1 - Respiratory
Megan Harris, RN, Springfield 1 - Respiratory
Patricia Perkins, RN, Springfield 1 - Respiratory
Deanna Potorski, RN, Springfield 1 - Respiratory
Margaret Kuntz, RN, Wesson 2
Amanda Duffy, RN, Wesson 3
Jose Ferreira, RN, Wesson 3
Shayna Bronstein, RN, Wesson 4
Krystyna Bystrzynski, RN, Wesson 4
Angela Figueirado, RN, Wesson 4
Jennessa Johnson, RN, Wesson 4
Caitlin Lamoureux, RN, Wesson 4
Kelsey Methe, RN, Wesson 4
Zachary Czaplicki, RN, Wesson 4
Mariya Demyanchuk, RN M5
Kelly Durand, RN M5
Alisha Spano, RN M5
Katelyn Conklin, RN MICU / SICU
Julie Cuhna, RN, MICU / SICU
Zulfiya Radcliff, RN, MICU / SICU
April Tremblay, RN, MICU / SICU
Natalya Deven, RN, Springfield 3 Med
Erika Gayle, RN, Springfield 3 Med
Kim Starr, RN, MICU / SICU
Eulogio Valdes, RN, Daly 5A
PNRP III
Kristine Methot, RN, ADOL / INCH
Lisa D’Angelo, RN, Care Unit
Mary Misiaszek, RN, Care Unit
Karen Rahilly, RN, Chestnut OR
Catia Pires, RN, Daly 5A
Stefani Ruane, RN, Daly 5A
Marie Barthelette, RN, Daly OR
Yelena Koroleva, RN, Daly OR
Judi Searle, RN, Daly OR
Jennie Do Carmo, RN, ED - Pediatric
Danielle Hilliard, RN, ED - Pediatric
Sara Lamontagne, RN, ED - Pediatric
Randyll Robidoux, RN, ED - Pediatric
Kelsey Battige, RN, Emergency Services
Benjamin Duffy, RN, Emergency Services
Jason French, RN, Emergency Services
Lee Jay Thompson, RN, Emergency Services
Shauna Castillo, RN, INCH
Megan Davis, RN, INCH
Jackie Nicholson, RN, INCH
Jessica Tanguay, RN, INCH
Sara Missildine, RN, LDRP
Christine Kaleta, RN, M5
Christina Bushey, RN, M6
Maureen Callahan, RN, M6
Robin Cycz, RN, M6
Rachel Downey, RN, M6
Leah Grippo-Beck, RN, M6
Ember Johnson, RN, M6
Kathryn Sullivan, RN, M6
Caitlin Adams, RN, MICU / SICU
Jessie Hawley, RN, MICU / SICU
Karen Shea, RN, MICU / SICU
Michelle Fortune, RN, NIU
Kelley Haberman, RN, NIU
Laura Barrows, RN, Observation & Infusion D3B
Sheila Johnston, RN, Observation & Infusion D3B
Brenda Breches (Lugo), RN, Springfield 1- Respiratory
Jennifer Duquette, RN, Springfield 1- Respiratory
Patti Lu Ouimette, RN, Springfield 1- Respiratory
Cristina Prazek, RN, Springfield 1- Respiratory
Nathan Zyla, RN, Springfield 1- Respiratory
Ouedeli Joseph-Payer, RN, South Wing 5
Angela Rodriguez, RN, Wesson 2
Deborah Nichols, RN, Wesson 3
Aneta Temple, RN, Wesson 3
Sharon Paterwic, RN, WETU
Lisa Whitehead, RN, WETU
Nicole Hoffman, RN, Cardiac Cath Lab

PNRP IV
Lori Clarke, RN, Chestnut Surgical Suites
Magdalene Wamburu, RN, Daly OR
Heather Forbes Breveleri, RN, Emergency Services
Jessica Rodriguez, RN, Flex Team
Marsha Chappel-Callahan, RN, HVCC
Sharon Dynek, RN, HVCC
Marisa Pease, RN, ICU
Heather Clark, RN, Observation & Infusion - D3B
Carla French, RN, Observation & Infusion - D3B
Jennifer Zollo, RN, BCH Procedures Unit
Crystal Kruszyn, RN, Wesson 4
Make An Impact By Investing In Baystate Health Nurses

Charitable gifts play an important role in supporting nursing education and the development of our nursing leaders at Baystate Health. Last year, thanks to the generosity of our donors, Baystate Health Foundation helped fund scholarships and education programs for our nurses.

This year, we hope you will select Baystate Health Foundation as your charity of choice and make a gift in support of our nurses by visiting baystatehealth.org/bhf or calling 413-794-5444. Together, you help us deliver a higher state of caring.

Baystate Health Foundation
Together, you help us deliver a higher state of caring.

A Great Day at the 1st Annual Nurses Week 5K Run/Walk Event

Over 60 participants were part of the Nurses Week 5K Run/Walk held May 14, 2016. Nurses and volunteers, including families of nurses, joined to celebrate nurses and their commitment to providing compassionate and quality care. Cinnamon Desgres, RN, nurse educator, proudly wore the bib number 1820 to signify the year Florence Nightingale was born. The event was a fund raiser for the Baystate Health Foundation’s Nursing Scholarship Fund which promotes nursing professional development. Another Run/Walk event is planned for 2017.
Baystate Medical Center

Together we deliver a higher state of caring.®