Beyond a shadow of a doubt, the 15th annual MGH Job Shadow Day was a great success. More than 60 students from local schools and hosts from across the hospital participated in the Feb. 2 event, which was sponsored by the MGH Center for Community Health Improvement (CCHI) in partnership with the Boston Private Industry Council.

"Job Shadow Day exemplifies one of the four pillars of the hospital’s mission, ‘to improve the health and well-being of the diverse communities we serve,’” says Tracy Stanley, a senior program manager for CCHI. “We were thrilled to have had such a wonderful turnout at this year’s event.”

At the start of their day, the students and MGH hosts met in the O’Keeffe Auditorium. They then traveled to their hosts’ department, where students observed or participated in the MGHers’ daily activities, experiencing hands-on what working in health care is like.

“Job Shadow Day reminded me of shadowing a physician when I was in high school — an experience I’ve never forgotten,” says Jeffrey Greenwald, MD, of MGH Medicine, who hosted Kadejah Goslin, a student at the Edward M. Kennedy Academy for Health Careers. “Kadejah’s enthusiasm for being in the hospital environment, meeting patients and discussing interesting issues made the whole event worthwhile and enjoyable for me. More importantly, I hope it was memorable and useful for her.”

For more information about volunteer opportunities with MGH’s Youth Programs, contact Joan McCarthy at 617-724-3210 or jemccarthy@partners.org.

HANDS-ON LEARNING: From left, Goslin and Greenwald with patient Alexander Schettino

Thirteen years ago, approximately 51 percent of Revere high school youth reported drinking alcohol in the past 30 days, and 53 percent reported trying marijuana. To help address problems such as these and other issues related to youth health and development, Revere CARES, a community coalition supported by the MGH, was established in 1997.

Today, Revere CARES has documented a marked decrease in underage drinking and drug use since its establishment. For example, between 1999 and 2009, the number of young people who reported drinking decreased by 27 percent, and the number of teens who had ever used marijuana dropped 12 percent.

In honor of Revere CARES’ work in creating measurable reductions in teen substance abuse, the Community Anti-Drug Coalition of America (CADCA) presented the group with its Coalition of the Year Award at the CADCA 20th National Leadership Forum in Washington D.C.

“Over the last 13 years Revere CARES has worked to send strong messages to parents and teens about the dangers of underage drinking,” says Kitty Bowman, MEd, director of Revere CARES. “The Coalition of the Year Award recognizes Revere CARES’s success and demonstrates the important role of (Continued on page 3)
Diane Patrick featured at MLK celebration

HONORING REV. DR. MARTIN LUTHER KING JR., one of the nation’s illustrious civic leaders, Diane Patrick, JD, first lady of Massachusetts, lawyer and humanitarian, joined the MGH and Partners HealthCare community Feb. 12 as the featured speaker for a celebration of King sponsored by the MGH, Partners and the MGH Disparities Solutions Center.

In her address, Patrick compared the issue of racism in society to a child on a long car ride asking, “Are we there yet?” Her response was that while there has been progress, King’s dream has not yet been achieved. Through anecdotes, she shared her personal experiences with what she described as the more subtle forms of racism, racism that on the surface, may not appear as such; it is so deeply ingrained it may be hard to identify.

Patrick emphasized the danger of subtly racist words. Though these may not seem tangibly harmful, they have the power to educate the impressionable, such as children, and thus perpetuate a cycle of discrimination. She closed her speech by sharing her hope that in her lifetime, society might see the end of all racism.

Jeff Davis, senior vice president for MGH Human Resources, served as the event’s master of ceremonies, while Peter L. Slavin, MD, MGH president, offered introductory remarks, discussing some of the recent strides the MGH has made in eliminating health care disparities and supporting the local community.

Following Slavin’s remarks, Carlyene Prince-Erickson, director of MGH Employee Education and Leadership Development, recognized three of Partners’ six YMCA Achievers of the Greater Boston YMCA Achievers Program –Taree King, patient financial counselor at MGH Charlestown HealthCare Center; Kenneth Sutton, security officer for MGH Police and Security; and Suzette Chiong-Oglesby, RN, MSN, CRRN, a nurse at Spaulding Rehabilitation Hospital. Prince-Erickson described the awardees’ inspirational efforts in serving their communities.

Prior to Patrick’s keynote address, Joan Blue, of the Institute for Health Professions School of Nursing, the latest winner of the MGH Star Performer contest, sang powerful renditions of “His Eye is on the Sparrow” and “Made Up Mind.”

CELEBRATING MLK: From left, Slavin, Patrick, Prince-Erickson, Akin Demehin, administrative director of the MGH/MGPO Center for Quality and Safety and chair of the Association of Multicultural Members of Partners, and Davis

IN MEMORIAM

Nathan Hellman, MD, PhD

NATHAN HELLMAN, MD, PhD, a fellow in the Division of Nephrology, died Feb. 13 at the MGH following a short illness. He was 36 years old.

“Nathan was an exceptional scientist, a talented and insightful clinician and a remarkably kind and humble human being,” says M. Amin Arnaout, MD, chief of the MGH Division of Nephrology. “He was well known for his famous Renal Fellows Blog, a wonderful online resource he updated daily with the latest in nephrology news and research.”

Nathan was born in Houston, Texas, Dec. 8, 1973, and grew up in Duluth, Minnesota. He graduated magna cum laude from Yale University in 1996 with a bachelor’s degree in Molecular Biophysics and Biochemistry. He then attended Washington University, where he earned a medical degree and a doctorate in Molecular Cell Biology.

Hellman completed his residency training in Internal Medicine at the Hospital of the University of Pennsylvania in 2006 and spent the following year as a Fulbright research scholar at the Hôpital Necker-Enfants Malades in Paris, France. He joined the MGH in August 2007 as a clinical fellow in the Division of Nephrology. With a special interest in the study of cystic kidney diseases, Hellman was working toward the completion of his fellowship and was a member of the research group led by his mentor Iain Drummond, PhD. He was to be appointed a faculty member in the Division of Nephrology in July.

“She had a wonderful ease with his co-workers in the lab and a great sense of humor,” says Drummond. “His creative and demanding intellect challenged all of us to be our best.”

Adds Hellman’s colleague Anna Greka, MD, PhD, “Nathan touched all of our lives with his warm heart and spirit, great sense of humor and remarkable intellect.”

In addition to being a beloved colleague and friend, Nathan was a devoted husband, father, son and brother. He is survived by his wife, Claire; his two children, Sophie and Max; his parents, Patricia and Richard N. Hellman; and his two sisters, Susan and Catherine, and their families. A memorial service was held in the O’Keeffe Auditorium Feb. 17, followed by a reception in the East Garden Dining Room.
IV infusion devices move from “smart” to “intelligent”

IN THE LATE 1990s, the MGH transformed patient intravenous (IV) medication safety by conceptualizing and developing the “smart” drug infusion pump – an invention that was first deployed at the MGH and has since proven highly useful in clinical care worldwide.

Motivated by an awareness of continuing tragic events involving the complexity of drug dosing calculation errors and misprogrammed drug infusion pumps at hospitals, a multidisciplinary Partners HealthCare team, including five senior members from the MGH, has created a roadmap for further advancing IV medication safety. A highlight of this plan is a proposal to pilot closed-loop IV medication administration at the MGH using software that compares data from a patient’s drug infusion pump with the specific order in the pharmacy profile and generates alerts if necessary.

“The original smart pump technology was considered revolutionary because it housed customized clinical decision support within FDA-regulated patient care devices,” says Nathaniel Sims, MD, anesthesiologist and innovator at the MGH Department of Biomedical Engineering, who led the research that resulted in patented inventions owned by the MGH on the original smart pump prototype.

As the next step in smart pump enhancement, Sims and Margaret Clapp, MGH Pharmacy director; Rick Hampton, Partners Wireless Communications manager; M. Ellen Kinnealey, BSN, RN, Advanced Infusion Systems specialist; and Luis Melendez, assistant director of Partners Biomedical Engineering Medical Device Integration and Informatics, recently authored an in-depth report outlining the transition of technology from stand-alone smart infusion pumps to networked Intelligent Infusion Pumps (IIDs).

“The new IIDs are wirelessly networked and can be associated with a particular patient, based on a scan of the pump’s front-panel barcode by a bedside caregiver,” says Kinnealey. “Since all MGH drug pumps will soon have capable radios, they will be constantly ‘tweeting’ drug name, concentration and dose-rate settings to a pump server.”

With this in place, the team proposed that MGH-written software could provide a nearly-real-time comparison between what’s happening at the bedside and what should be happening, and look for variances.

“This is a critical next step,” says Gregg Meyer, MD, senior vice president of the MGH/MGPO Center for Quality and Safety. “It amounts to a second safety check of the pump’s programming against an actual medication order, augmenting our vision of ‘making the right thing easier to do.’”

The team considered multiple complex issues during the year-long effort, which included visits to hospitals piloting prototypes of automated pump programming directly from pharmacy information systems.

“We took a hard look at several tough requirement issues,” says Hampton. “These include Partners’ high standards for authentication and the security of medical devices on wireless networks.”

Adds Melendez, “The team realized that the new software module will likely permit closing the loop in a way that is consistent with proposed new regulations. It’ll take time and resources to move a successful software module from a controlled setting, such as a lab, to the bedside. Many challenging issues about medical device connectivity and interoperability will remain, as the all-electronic inpatient medical record – with numerous connected patient care devices – moves closer to reality at the MGH.”

For more information about the transition of smart pumps to intelligent pumps, access www2.massgeneral.org/anesthesia.

— Revere CARES

(Continued from page 1)

an academic medical center in prevention.”

Revere CARES is funded primarily by the MGH Center for Community Health Improvement and supported by the MGH Revere HealthCare Center, where the program is located. The coalition includes parents, school representatives, clinicians, city officials, police, young people, social service organizations and businesses. It takes a multifaceted approach to addressing drug and alcohol use in youth – conducting social marketing campaigns to change parental attitudes that drinking is a rite of passage; increasing the availability of after-school activities and summer jobs; improving access to substance abuse treatment and services; and working to create policy changes, including moving bar closing times from 2 am to 1 am.

Revere CARES is currently seeking to expand its positive influence on community health through obesity and violence prevention. For more information about the coalition, access www2.massgeneral.org/reverecares.
CMS completes nine-day hospitalwide validation survey

THE MGH MOTTO “EXCELLENCE EVERY DAY” was especially important the morning of Feb. 2 when 16 Centers for Medicare and Medicaid Services (CMS) representatives arrived unannounced at the MGH to conduct a validation survey of all inpatient units and hospital-licensed practices. Each year, about 5 percent of U.S. hospitals are randomly selected for this survey, which is conducted to validate results from Joint Commission accreditation surveys. The last time CMS visited the MGH for this purpose was approximately 35 years ago.

The CMS team evaluated the MGH over nine days, leaving Feb. 12. Throughout the visit, surveyors assessed the hospital’s compliance with CMS regulations in a wide range of ways, including medical record reviews, staff and patient interviews, examination of policies and procedures, and inspections of the environment of care.

“The CMS visit is quite similar to the Joint Commission survey activities, but the inspection is more comprehensive,” says John Belknap, director of MGH Corporate Compliance. “In total, CMS spent 129 surveyor days here, which is the number of surveyors times the number of days at the MGH. By comparison, the Joint Commission spent 40 surveyor days here.”

To manage survey activities, the MGH activated the Joint Commission “bullpen,” a group of quality, compliance, nursing and policy experts from across the hospital. The team coordinated all survey activities and provided assistance and documentation requested by surveyors. MGH escorts also were on duty to accompany CMS representatives throughout their visit and help as needed.

CMS will provide a final report in the next several weeks, and MGH leaders already have begun to address some areas surveyors flagged as needing improvement during the exit conference. After receiving the report, the MGH will have approximately 10 days to respond with plans of correction that outline what will be done, who will be responsible, how the work will be done and completion dates.

“I would like to extend my thanks to all staff for continuing to care for our patients and their families during this rigorous survey process,” says Peter L. Slavin, MD, MGH president. “People all across this organization were involved in the survey, and I am especially grateful to the staff and managers who spent significant time with the survey team. I know that our community stands ready to respond to the findings of the survey, as we continue providing extraordinary care to the patients and families who rely on us.”

MGH Hotline

02.19.10

Submit news tips and story ideas to MGH Hotline

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Boston Conservatory Cabaret
MGH Senior HealthWISE is offering a special event, “Boston Conservatory Cabaret,” March 1 from 1 to 2 pm in the O’Keeffe Auditorium. All are invited to enjoy a performance by Boston Conservatory musical theater students, who will perform songs from several Broadway musicals. Registration is required by calling 617-724-6756.

The MGH is now on Twitter

Rejuvenating Workouts
information session
The Clubs at Charles River Park is hosting an information session, “Rejuvenating Workouts,” Feb. 25 from noon to 1 pm in the Haber Auditorium. Mike Bento, an advanced personal trainer at The Clubs, will highlight specialized techniques to improve muscle function and ensure participants are getting the most out of their workouts. For more information, contact mbento@partners.org.

Educational Resource
Information Day
MGH Training and Workforce Development will host an information table to highlight upcoming events March 3 from noon to 1:30 pm at the East Garden Room entrance. Employees are encouraged to stop by and learn about training and educational opportunities, including: the Steps to Success Series, Career Development Series, citizenship classes, College Fair, Spanish classes, Support Service Employee Grant, Tuition Assistance and college preparation services.

Quit Smoking Groups at MGH
The MGH Tobacco Treatment Service is offering two smoking cessation programs this March. The programs will start March 3 at 5:30 pm and March 11 at noon. This seven-session, one-hour-per-week group program includes information about preparing to quit, coping with stress without cigarettes, preventing weight gain and staying smoke-free. With written approval from a primary care physician, low-cost nicotine patches and/or nicotine gum will be available to participants. Advanced registration is required along with a registration fee, which is on a sliding scale. For more information, call 617-726-7443.

About Working Behind the Data in Human Subjects Research,
March 10 from noon to 1 pm in the Simches Research Center, Room 3.110. Vanessa Y. McClintchy, MEd, will explore challenges working with human subjects in an increasingly global population. While the course is intended for research nurses, all are welcome to attend. To register, access http://hub.partners.org/catalog/one-section?section_id=3026183. For more information, contact Lauren Michaels at lmmichaels@partners.org or 617-726-5010.

CRP luncheon seminar series
The MGH Clinical Research Program is sponsoring “Working Behind the Data in Human Subjects Research,” March 10 from noon to 1 pm in the Simches Research Center, Room 3.110. Vanessa Y. McClintchy, MEd, will explore challenges working with human subjects in an increasingly global population. While the course is intended for research nurses, all are welcome to attend. To register, access http://hub.partners.org/catalog/one-section?section_id=3026183. For more information, contact Lauren Michaels at lmmichaels@partners.org or 617-726-5010.