**Take Our Children to Work Day**

*Young MGHers-in-training visit the hospital during annual spring event*

“I LIKED LEARNING about how medical things work, like the cow heart and the surgery demonstration where you could see your veins,” said Jenelyse Moyet, daughter of Leslie Gonzalez, of MGH Imaging. Jenelyse was one of 200 children of employees who participated in the April 30 Take Our Children to Work Day, which included a stop at the MassGeneral Hospital for Children Health Fair in the Bulfinch Tents. Jenelyse ended her visit at the MGH by enjoying ice cream sundaes in the Thier Conference Room with all of the children, including her cousin, Erin Burgess, and her aunt, Donna Burgess, of MGH Imaging.

Each year, Take Our Children to Work Day features a daylong itinerary of educational activities, such as an MGH history tour, presented by Shelly Riley, manager of the Visitor Education Program; a demonstration by Mad Science® of Greater Boston, sponsored by the MGH Center for Community Health Improvement’s Youth Programs; and a tour of the Building for the Third Century, which is currently under construction, given by Partners Planning and Construction. Participants also visited their parent’s or sponsor’s work area and learned what it is like to be an MGH employee.

For Danielle Brackett, daughter of Troy Brackett, of MGH Research Computing, seeing the Ether Dome was a highlight, as well as the health fair. “I loved them,” said Danielle. “I liked seeing the Ether Dome and watching the baby demonstration at the fair.”

Carly Becker, daughter of Dina Hirshfield-Becker, PhD, of MGH Psychiatry, thought Mad Science® was great, but said Take Our Children to Work Day saved the best for last. “The ice cream was my favorite part of the day,” she said.

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**The MGH calmly avoids deep water during citywide emergency**

**THE MASSIVE** May 1 water main break in Weston forced two million Boston-area consumers — including more than 23,000 MGH staff and the hospital’s hundreds of patients — to rethink how they obtain, use and consume water.

Moments following the announcement of the boil water order by the Massachusetts Water Resources Authority (MWRA), the MGH deployed its Hospital Incident Command System Saturday afternoon to assess the emergency’s impact on patient care and hospital operations. More than a dozen MGH leaders convened to coordinate the many hospital operations that involved the use of tap water, including water needed for disinfection, food preparation, hand washing, drinking and bathing.

“It is with the swift, effective and collaborative response of many individuals from across the hospital that we were able to attend to the water situation (Continued on page 2)
Admitting and Registration Services offer first impression

**THERE IS ONLY** one chance to make a good first impression. When patients and their families arrive at the MGH, their first contact is often with one of the 200 staff members comprising MGH Admitting and Registration Services. This department ensures the administrative and financial processes run smoothly for the MGH’s approximately 48,000 inpatient admissions, 19,000 ambulatory surgeries and 1.3 million outpatient visits each year.

“Our staff members are at the front line of the hospital,” says Nancy Connery, director of Admitting and Registration Services. “But we also do a lot of work behind the scenes. Many staff members in the department perform ‘patient-invisible’ functions that help support a smooth entry into the MGH.”

During MGH Admitting Week, celebrated May 10 through 14, Connery and her staff hope to educate the MGH community about the variety of services the department offers. Many different units and teams within MGH Admitting and Registration Services coordinate a patient’s experience:

- The Bed Management Team places approximately 167 patients on a clinically appropriate care unit each day.
- Members of the Operating Room Scheduling Team schedule more than 12,000 procedures a year and 2,000 inpatient admissions per month.
- The Financial Access Unit serves as a liaison between patients, physicians and payors to validate insurance eligibility and secure approximately 325 appropriate authorizations daily.
- A team of patient interviewers helps orient patients to the hospital and provides information relevant to their care.
- Patient Financial Services provides financial counseling for more than 1,100 patients a month.
- At the Registration and Referral Center, staff register patients, update their demographics and secure more than 420,000 managed care referrals each year.
- The Appeals Coordination Unit supported inpatient and outpatient revenue recovery efforts totaling $5 million in two quarters during the last fiscal year.
- The Business Services Team leads initiatives in the areas of process improvement, systems management, data and capacity analysis, quality assurance and training.

For more information on MGH Admitting and Registration Services, visit their information table in the Main Lobby May 13 from 10 am to 3 pm.

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**Water**

(Continued from page 1)

to ensure our patients’ and employees’ safety and the hospital’s smooth and safe operations,” says Jeanette Ives Erickson, RN, MS, senior vice president for Patient Care, chief nursing officer and the administrator designated as incident commander during the emergency.

With the feedback and insight from leaders across the MGH, a set of recommendations quickly was distributed to all MGH staff and employees — including those at the main campus and health centers — following Gov. Deval Patrick’s announcement of the water emergency. Among the MGH set of recommendations were those on hand-washing; the avoidance of the use of tap water from all hospital faucets, spigots and ice machines; and special instructions for bathing immunocompromised patients.

Although the boil water order was lifted May 4, the MGH continued its hospitalwide water restrictions until all systems that involved the use of water were thoroughly checked, flushed, cleaned and tested.

“It was important that we remained vigilant about the quality of water used for clinical care and consumption even after the city lifted its water restrictions,” says Jean Elrick, MD, senior vice president of Administration, who led the Systems Recovery Plan.

Ives Erickson adds, “Our priority always is to err on the side of caution and to be absolutely confident that all of our patients, their families and staff receive the utmost in care and safety.”

For information about the Boston water emergency, access the MWRA website at www.mwra.com.
MGH implements LabExpress

THREE MILLION LAB TESTS are ordered for MGH inpatients every year. Originally, the laboratory testing process was highly manual, requiring the transcription of provider orders to paper requisitions, the determination of which tubes should be drawn, the creation of tube labels and the entry of test requests into the laboratory system. These manual processes could lead to error and delay.

With the recent implementation of LabExpress, however, all of this has changed. LabExpress replaces manual processes with a system of bar-coded labels which are printed on the care unit and indicate which type of tube to use for each specimen. In the laboratory, the bar-coded labels allow the staff to scan the tubes and immediately move forward with the analysis of the specimen. In addition to increased efficiency, the system has resulted in a decrease in the number of blood draws and drawing errors.

The implementation of LabExpress was a multiyear collaborative effort by the Department of Pathology, Patient Care Services and Partners Information Systems, with input from physician groups. The final phase of the implementation is slated to be completed this summer. The team recently celebrated the success of the project – launched on 34 nursing units – with a gathering April 16 in the Trustees Room.

“The project touches hundreds of patients each day and is a wonderful example of multiple departments working together to improve patient safety and quality,” says Jean Elrick, MD, senior vice president of Administration.

The LabExpress project is an important part of the Department of Pathology’s strategy to automate all aspects of its operations to dramatically improve quality, turnaround times and customer service. “This project is one example of multiple departments working together to improve quality, efficiency and customer service,” says Anand Dighe, MD, PhD, director of the Core Laboratory, at asdighe@partners.org or Irina Kamis, senior project specialist for Clinical Systems Management, at ikamis@partners.org.

“THE PROJECT TOUCHES HUNDREDS OF PATIENTS EACH DAY AND IS A WONDERFUL EXAMPLE OF MULTIPLE DEPARTMENTS WORKING TOGETHER TO IMPROVE PATIENT SAFETY AND QUALITY.”

JEAN ELRICK, MD

MGH Leadership Meeting highlights CMS survey, MGH budget and health care reform

THE HOSPITALWIDE SURVEY by the Centers for Medicare and Medicaid Services (CMS), the MGH budget and U.S. health care reform were featured topics of the April 28 leadership meeting for managers and supervisors.

John Belknap, director of Corporate Compliance, discussed the MGH response and next steps following the CMS validation survey that took place in February. CMS provided the MGH a survey report March 5, and the hospital – 10 days following its receipt of the report – provided a plan of correction that addressed the issues CMS identified while on-site. CMS accepted this plan April 2. (A summary of the CMS report and a redacted version of the full report are posted at http://qualityandsafety.massgeneral.org/cms/CMSSummary2010.aspx.) The MGH is now prepared for CMS to return to the hospital to confirm that the plan of correction has been implemented. Belknap closed by thanking the many staff and employees who have worked tirelessly over the past weeks to demonstrate compliance with the CMS Conditions of Participation.

Sally Mason Boemer, senior vice president for Finance, provided an overview of the first six months of fiscal year (FY) 2010 and the budget framework for FY 2011. The MGH today is $4.2 million ahead of budget. Although volume has been softening and likely will continue to decline, there is strong performance from indirect research revenue and the management of hospital expenses. The forecast for year-end from hospital operations is expected to be approximately $3.5 million behind budget because of such issues as supplies and purchased services, spending in research and renovation projects, and interest expense.

The initial FY 2011 budget request would leave the MGH with a significant budget gap, as revenue is expected to grow 2.3 percent, and expense requests came in significantly higher than revenue and prior year request levels.

Discussing the various components of the recently passed U.S. health care reform law, Peter L. Slavin, MD, MGH president, noted that the law is similar to the health care reform measure passed in Massachusetts. Among the significant impacts of the U.S. law are: an increased Medicare payroll tax for high-income individuals; the development of a CMS Innovation Center; penalties for hospital-acquired infections and excess readmissions; and the establishment of an Independent Payment Advisory Board. Slavin also described several important concerns affecting the MGH and Partners HealthCare – including the current challenging economy – that could affect volume and pricing. He provided several scenarios that could result under different pressures and circumstances and offered insight into each – from no major reform and moderate cost pressure to a scenario of rate setting with significant caps on reimbursement. He concluded by saying that following a Partnerswide retreat of key leaders, which would address these likely market settings, appropriate initiatives would follow this year and in the coming years to advance the MGH mission.

INCREASING EFFICIENCY: LabExpress team members at the April 16 celebration
**What's Happening**

Clinical pastoral education fellowships available
The Kenneth B. Schwartz Center and the Department of Nursing are offering fellowships for the fall 2010 MGH Clinical Pastoral Education Program for Healthcare Providers. The program is open to clinicians from any discipline who work directly with patients, family or staff and wish to integrate spiritual caregiving into their professional practice. The program includes group sessions on Mondays from 8:30 am to 5 pm. The deadline for application is May 20. For more information, call the MGH Chaplaincy at 617-726-4774.

MGH Senior HealthWISE is offering a free lecture, “The Evolving Vision Rehabilitation Model of Care: Addressing the Whole Patient,” for seniors ages 60 and older May 13 from 11 am to noon in the Harber Conference Room. Lynn Bushee, LCSW, MS, of the Massachusetts Eye and Ear Infirmary, will present. For more information, call 617-724-6756.

**Stress reduction program for teenagers**
The Benson-Henry Institute for Mind Body Medicine at MGH is hosting a stress reduction program for teens Aug. 5, 12 and 19 from 1:30 to 3 pm at the institute. Participants will learn how to cope with stress through relaxation, visualization and other techniques. Research studies suggest that youth who learn skills in coping with stress have improved academic performance, better work habits, improved memory and increased self-esteem. The cost of the program is $150. For more information or to register, contact Rana Chudnofsky, MEd, at 617-643-6068 or rchudnofsky@partners.org.

Zervas lecture
The MGH Neuroendocrine Unit will host the 11th Annual Nicholas T. Zervas, MD, Lecture May 18 at noon in the Ether Dome. Márta Korbonits, MD, PhD, of the Department of Endocrinology at Barts and the London School of Medicine, will present “Familial Pituitary Adenomas.” For more information, call Crystal Huggins-Robinson at 617-726-3870.

Support Service Employee Grant applications available
The MGH Training and Workforce Development Office is now accepting applications for Support Service Employee Grants. The grant is open to eligible nonexempt employees working in clinical, technical, service and clerical positions who have been employed by the MGH for a minimum of two years as of Sept. 30, 2010. The application deadline is June 11. For more information or to download an application, visit http://is.partners.org/hr/New_Web/mgh/mgh_training.htm or call John Coco at 617-724-3368.

**In General**

MGH Cancer Center members Daniel Haber, MD, PhD; Jeffrey Engelman, MD, PhD; Eunice Kwak, MD, PhD; Shyamala Maheswaran, PhD; Lecia Sequist, MD, MPH; Jeffrey Settleman, PhD; and Mehmet Toner, PhD, were among the members of a collaborative thoracic oncology research team comprising the MGH, Dana Farber Cancer Institute, BWH, Beth Israel Deaconess Medical Center and Harvard Medical School honored by the American Association for Cancer Research (AACR). The group received the AACR Team Science award at the organization’s annual meeting in Washington, D.C., April 18 for their work on the impact of genetics in tumors of lung cancer patients. The team receives a $50,000 prize, which will be used to further their research.

Greg Low, RPh, PhD, senior pharmacy project manager for Performance Analysis and Improvement, has been appointed to the Academy of Managed Care Pharmacy’s Health Care Information Technology Advisory Council. The council’s role is to identify, evaluate and recommend academy action to address emerging health information technology issues that affect managed care pharmacy.

John Levinson, MD, PhD, of the MGH Division of Cardiology, will be awarded the American Heart Association’s Heart of Gold at the Boston Heart Ball May 8 at the Park Plaza Hotel. The Heart of Gold is presented annually to a member of the community who has enhanced the quality of life in the region. Levinson is being recognized for exemplifying the organization’s mission of building healthier lifestyles, free of cardiovascular disease and stroke.