Debbie Burke, RN, named to top nurse position

A 36-YEAR MEMBER of the MGH community – and a familiar face of MGH Nursing – will soon be welcomed as the hospital’s new senior vice president for Patient Care Services and chief nurse.

Debra A. Burke, RN, DNP, MBA, NEA-BC – who joined the MGH in 1981 and has served in a variety of roles, most recently as associate chief nurse for women and children, mental health, the MGH Cancer Center and Community Health Nursing Practice – will take the helm Jan. 1, 2018.

“I’ve worked here for more than 30 years, and I embrace our four-pronged mission,” says Burke. “Every day at the MGH, I feel like I’m part of the mission, vision and values of our organization. This place really resonates with me, and it feels like exactly the right place.”

The announcement comes following a year-long nationwide search to find a successor for Jeanette Ives Erickson, RN, DNP, NEA-BC, FAAN, who has served as chief nurse for the past 21 years and who will remain active with several hospital initiatives.

“I’m coming into a job with really seasoned, outstanding leaders and staff,” Burke says. “In the beginning, I think it’s really about getting to know people better. I already have worked closely with so many of our talented nurses and health professionals, but I am looking forward to introducing myself to those I haven’t had the pleasure of meeting. I think relationship building, visibility and accessibility are extremely important and part of the key to success.”

Burke started her career as a staff nurse in MGH Thoracic Surgery, became a clinical teacher in the Surgery and Trauma Services, worked as a nurse manager in Vascular Surgery and Vascular Home Care and later as a clinical nurse for the Boston Red Sox. She has played a major role in a number of MGH initiatives – including the Autism Care Collaborative, the Unit Coordinator Role (Continued on page 3)
LAW RESTRICTING USE OF OFF-ROAD-VEHICLES BY YOUNG DRIVERS HELPS TO CURB INJURY RATES, RESEARCHERS SAY

In response to growing rates of injuries and hospitalizations among children riding off-road vehicles (ORVs), including all-terrain vehicles (ATVs), Massachusetts passed a law in 2010 banning ORV operation by anyone under the age of 14, except in rare cases with direct supervision by an adult, and requiring children 14-to-17-years old to take education and training classes and be supervised by an adult when riding an ORV.

To investigate whether rates of both emergency department visits and hospital admissions resulting from ORV injuries have gone down since the law’s implementation, while the 25-to-34-year comparison group had a drop of only 26 percent.

“The results of our study indicate that comprehensive laws that include age restrictions can in fact decrease the numbers of pediatric injuries that result from ATV crashes,” says senior author Peter Masiakos, MS, MD, of the MGHIC Department of Pediatric Surgery.

Given that this is the first law of its kind, the results provide important insight for the design of future legislation.

RESEARCHERS HELP SHED LIGHT ON A PERPLEXING CHRONIC PAIN DISORDER

Fibromyalgia is a common chronic pain disorder that impacts 5 to 10 million Americans.

It is thought that the widespread pain fibromyalgia patients experience is due to disturbances in the central nervous system that affect the way the brain processes pain signals. But why these disturbances occur remains a mystery.

In an effort to find answers, Marco Loggia, PhD, associate director of the Center for Integrative Pain Neuroimaging and a researcher in the Martinos Center for Biomedical Imaging, studies the brain mechanisms of pain in patients with fibromyalgia. His research suggests that some degree of brain inflammation may be at play, given that brain inflammation is common among chronic back pain sufferers and most fibromyalgia patients suffer from chronic back pain.

Because there are no diagnostic tests for fibromyalgia, patients are frequently met with skepticism, even by their own primary care team.

The MGH has numerous resources available for those who need support—whether it be financial, emotional or spiritual. Hospital leaders from Human Resources (HR), Global Health, Emergency Preparedness, and many other departments continue to monitor the situation, listen to staff concerns and identify ways to provide meaningful support.

“The hospital is paying close attention and we will continue to work to support staff as the situation evolves,” says Dave Reisman, associate director of the MGH Center for Disaster Medicine.

For those wanting to provide assistance, the best way to help continues to be with a monetary donation to an established organization. “It’s really challenging even now to get supplies and equipment to the areas most affected,” says Reisman. “We rely on these trusted organizations that have the logistical channels and processes in place to ensure donations reach their intended recipients.” The MGH Emergency Response Fund to provide support to employees and their families who have been affected. Visit the MGH Giving website to learn more.

The MGH has made financial contributions to the Massachusetts United for Puerto Rico/Massachusetts Unido por Puerto Rico (www.tbf.org/puertorico) or Direct Relief (www.directrelief.org).

MGH’s RESPONSE:

■ The MGH has created an employee grant program through the MGH Emergency Response Fund to provide support to employees and their families who have been affected. Visit the MGH Giving website to learn more.

■ The MGH has made financial contributions to the Massachusetts United for Puerto Rico/Massachusetts Unido por Puerto Rico Fund and to Direct Relief to help send supplies to hospitals.

■ Many MGH staff members have deployed, and continue to deploy, to Puerto Rico and other areas in the Caribbean with federal disaster response teams and teams from MGH Global Health to support the medical needs of hospitals and communities.

■ On Oct. 11, MGH leaders from HR, the Employee Assistance
THE MGH CHAPLAINCY DEPARTMENT is now the Spiritual Care Department, a name change that reflects the broad nature of the services offered by the department’s nearly three dozen professional chaplains. Working in collaboration with clinical care teams, chaplains respond to referrals and consults and visit patients and families throughout the hospital.

“Our chaplains sustain, support, guide and help people in their search for meaning in illness; for self-worth and belonging to community; and for reconciliation in relationships,” says Rev. Alice Cabotaje, MDiv, BCC, ACPE, interim director of Spiritual Care and Education. “They offer consultation and counsel regarding spiritual, emotional and ethical matters. Support is provided by listening without judging, sharing without preaching, and offering the resources of tradition, sacraments, scripture, ritual and personal presence.”

The work of chaplains extends far beyond the bedside, says Cabotaje. They also facilitate compassionate care rounds and resiliency rounds for staff; serve on committees within the hospital and in the greater Boston area; and serve as spiritual care providers, consultants, advisors and educators for national and local organizations. The range of services provided by the Spiritual Care Department was showcased throughout this week in recognition of National Spiritual Care Week (Oct. 22-27).

The department hosted healing prayer sessions, a Jewish new moon blessing, Buddhist meditation, Muslim prayer sessions, hand massages and educational opportunities.

“As a clinician, I have seen how providing spiritual care can help give meaning and a purpose to life, providing hope and offering a source of strength,” says Barbara Cashavelly, RN, nurse director on Lunder 9. “Time and again, I have called on my colleagues in the Spiritual Care Department to offer support to people coping with illness, loss or grief; to help them to heal emotionally and regain a sense of spiritual well-being.”

To learn more, or to request a visit with a chaplain, call the Spiritual Care Department at (617) 726-2220.

— Hurricane relief
(Continued from page 2)

Program (EAP), Spiritual Care and Emergency Preparedness hosted a town hall session to update staff on relief efforts and resources available and to provide an open forum for those affected to share their stories.

RESOURCES FOR MGHERS AND FAMILIES:  
- Employee grants are available to offer financial assistance to employees directly affected. The grant program is funded by Emergency Response Fund. To date, 50 $500 grants have been given to MGHers and their families. To apply for the grant, an employee must be able to show how he or she is directly impacted and demonstrate need for funds. Applications are available on Apollo.
- The EAP is always available for confidential and private support and offers continually updated resources. They can provide updated information about conditions, and details about how to reach family members and where to donate. Call (866) 724-4327.
- The Spiritual Care Department has a team of spiritual care providers who represent different faith traditions, available to staff 24/7. Call (617) 726-2220.
- The Employee Wage Advance Program through HR and EAP offer staff the opportunity to apply for a wage advance – under circumstances where someone has a specific financial need – which would then be paid back through payroll deduction.
- Earned Time donation/cash out: Speak with a HR business partner for more information about the program.

— Top nurse
(Continued from page 1)

Redesign team and the Partners Nursing Agency Tiger Team. Burke received her bachelor’s and doctorate degrees from Northeastern University – where she now is an affiliate associate professor – and a master’s degree in Nursing/Business Administration from Salem State College.

“The MGH is the premier health care organization in the country, and the care that all disciplines and support staff provide gives me great pride,” says Burke. “Our staff are highly skilled and passionate about what they do. And I love that the MGH is always pushing to be better. That’s the type of organization that I’m passionate about and am excited to work in every single day.”
“IN YOUR CAREER, if you wait for someone to pull you along, you will wait forever,” said Redonda Miller, MD, president of The Johns Hopkins Hospital. “You have to create your own opportunities.”

The MGH Office for Women’s Careers in the Center for Faculty Development celebrated September as Women in Medicine Month with Miller’s “Pushing Ourselves to Succeed” lecture. At the start of the event, Nancy Rigotti, MD, director of the MGH Office for Women’s Careers, asked every woman in the audience who has recently been promoted within the MGH or Harvard Medical School to stand and be recognized by their colleagues. “That is no easy feat,” she said.

During her talk, Miller shared how she rose to become the first female president of Johns Hopkins and how she managed to balance professional and academic pursuits with motherhood. Miller spoke of her life as a college student, medical student and internist and stressed the importance of finding a mentor. It was her mentor who pushed Miller to apply for new positions and take on more challenging projects that ultimately prepared her for her current position as president. She shared her success in receiving her master’s degree and even her disappointment when she did not receive a job she had wanted.

Then Miller asked the age-old question, “Can women really have it all?” Her response? “Not all at one time.” She explained that dinner with her husband and two daughters takes place at 9 pm while the families of her daughter’s friends often have dinner at 6 pm. She also recalled having to leave meetings at the hospital to ensure she would be home in time for her daughter’s recital. “Sometimes you have to choose,” she said.

After a question-and-answer session with audience members, Miller offered a final piece of advice. “Don't wait to be pulled. Push yourself. If you don't have a nervous pit in your stomach, you're not reaching high enough.”

Home Base hosts annual telethon
THE THIRD ANNUAL Home Base Veterans Day Special – a 90-minute, commercial-free event – will highlight clinical and support services that Home Base, a Red Sox Foundation and MGH Program, provides to help heal post-traumatic stress and traumatic brain injury.

The telethon will air Nov. 10 from 7:30 – 9 pm on ABC affiliates WCVB-TV Channel 5 in Massachusetts, WMUR-TV Channel 9 in New Hampshire and WMTW Channel 8 in Maine. The event will also be live-streamed on each station’s website. The broadcast aims to educate the community about the invisible wounds of war, and focuses on patients who share their stories in hopes of reducing stigma.

The telethon will be hosted by WCVB-TV NewsCenter 5 news anchor and U.S. Air Force veteran Randy Price and WMUR-TV news anchor and military spouse Amy Coveno. Viewers can make a donation by calling toll-free at 866-615-8387, by texting “Veterans” to 91999, or by contributing online.

2018 Open Enrollment
BETWEEN OCT. 30 AND NOV. 21, Partners HealthCare employees will have the opportunity to select their benefits for 2018.

Open Enrollment is the one time per year when staff can enroll or change their elections for medical, dental, vision, flexible spending accounts and life insurance, unless they have a “qualified change in status.”

Prior to enrolling, employees are encouraged to review all materials about 2018 benefits. Any elections employees make during the enrollment period will take effect on Jan. 1, 2018.

QUESTIONS ABOUT 2018 BENEFITS
This year, it is easier than ever to find information about benefit options. In addition to the annual Open Enrollment newsletter – which will be sent to employees’ home mailbox by Oct. 27 – staff will have access to Ask myHR, a Human Resources and benefits portal that will provide videos, webcasts and digital documents.

ENROLL EARLY
Staff who use Ask myHR to enroll in their 2018 benefits before 5 pm on Nov. 10 will be entered into a drawing for two tickets to watch the New England Patriots play the New York Jets on Dec. 31 at Gillette Stadium.