

2020 Envision Excellence

Window now open for Triennial Survey from The Joint Commission

THE WINDOW FOR the 2020 Triennial Survey from The Joint Commission is now open. During the visit, a team of surveyors will conduct an unannounced, comprehensive, hospitalwide review of the hospital's patient care practices. The Joint Commission is a nonprofit organization that accredits more than 22,000 health care organizations and programs in the United States.

"The weeklong survey – which will occur sometime within the next 10 months – provides us with an opportunity to share best practices and demonstrate at a national level our high standards for patient quality and safety," says John Belknap, chief compliance officer. "Every employee will need to be prepared to answer questions about quality standards appropriate for their department and how they relate to the hospital's overall goals."

The MGH is focused on achieving the following five quality and safety goals:

- Improve equity in patient experience and clinical care
- Improve institutional capacity: Ambulatory, Emergency Department, inpatient
- Help keep our patients safe
- Strengthen safety culture: Workforce, wellness, professionalism, culture
- Achieve excellent results on The Joint Commission Triennial Survey

"During a typical visit by The Joint Commission, surveyors review more than 40 patient care units, ambulatory practices, procedural locations and laboratories," Belknap says. "We appreciate everyone's diligence and dedication to maintaining the highest level of excellence, so we will once again successfully receive our accreditation following this important review process." ■

Monitoring coronavirus

CLINICIANS AT THE MGH have been closely monitoring the spread of a new coronavirus – first detected in China last month – which has sickened hundreds and killed at least 21 people. The U.S. this week confirmed a patient in Washington state was diagnosed with the pneumonia-like illness. Here, Erica Shenoy, MD, PhD, associate chief of the MGH Infection Control Unit, offers insight into what everyone should know about this virus.



What is a coronavirus?

Human coronaviruses are common throughout the world and are comprised of large groups of viruses. The illnesses – often transmitted from animals to humans – range from minor colds to more serious infections similar to Middle East respiratory syndrome (MERS) and severe acute respiratory syndrome (SARS). This newest strain of coronavirus appears to also be transmitted between humans.

What are the signs and symptoms of this coronavirus and how does it spread?

The most common symptoms of coronavirus infection range from mild – fever, general body aches, dry cough and breathing difficulties – to severe – a fever of 100.4 F or higher, pneumonia and kidney failure. Coronaviruses can be spread through respiratory droplets emitted from an infected person's coughs or sneezes, as well as by touching contaminated objects. To curb the spread of the virus, the World Health Organization has advised people to avoid close contact with people suffering from acute respiratory infections, to frequently wash their hands and to avoid contact with farm or wild animals in areas where the virus is spreading, such as China. Unlike the flu, there is no vaccine and no specific treatment for coronavirus beyond supportive treatment, such as resting and staying hydrated.

Where did this case of coronavirus originate from?

The virus was first identified in Wuhan, Hubei Province, China, and since then, more than 400 cases have been confirmed by Chinese authorities. Additionally, cases have been identified in several countries internationally, with the first U.S. case confirmed Jan. 21. The Centers for Disease Control and Prevention (CDC) continues to investigate reports to learn more about the virus' spread.

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My Giving Helps marks momentous milestones

ON JAN. 13, the My Giving Helps co-chairs and program champions, along with Peter L. Slavin, MD, MGH president, presented a check for \$1,120,000 to the MGH Fund and United Way of Massachusetts Bay and Merrimack Valley. The donation was made possible thanks to the almost 7,000 employees who continue to show a commitment to giving back through the My Giving Helps: The MGH Fund + United Way Employee Campaign.



Mass General Brigham branding update

COMING TOGETHER AS A SINGLE, integrated health care system focused on enhancing patient impact is the reason Partners HealthCare is changing its system name to Mass General Brigham. A systemwide, cross-functional team is involved in the branding efforts, and they are working on a process for how to best roll this out, always keeping patients and clinical care as the top priority. Here, Partners leadership addresses a few of the questions that have come up.

Why is it important to rename the system?

The new name builds on the reputations of the world-class academic medical centers who founded the system and fosters a greater sense of the connectivity for all our institutions. The name has meaning to people. We can create a clearer sense of how all parts of our system work together for our patients.

Many employees took the brand survey. Patients did as well. What did you learn?

While we tested several options for names, the clear favorite was Mass General Brigham. In fact, the two hospital names are so strong that when placed together there's no need for what we'd call a "qualifier," like system or health.

What has been the focus since the Partners Board voted in late November to change the name?

There's been a tremendous amount of work happening since the Board vote. One important focus is linking the new name to the systemwide strategy created by leaders across the system. We are developing a graphic identity, or logo, to accompany our new name, and we are completing a comprehensive inventory of all areas where our names appear – such as buildings and web properties. This early work is the foundation of planning for how we will bring the new name and identity to our patients locally, across the country and globally.

Should we start using the new name now?

It is great to see the enthusiasm for the new name, and some have already begun to use Mass General Brigham. It's fine to show pride in the new name by using it internally, but we are still working out details for its use externally. Expect lots of excitement for the formal name change later this spring.

There has been a lot of talk about cost. What should we know about that issue?

Branding the system will require investment, but that is all part of the planning that is being thoughtfully discussed. It is worth noting that branding is an important component of how we relate with our patients and our communities. That is why you are seeing and hearing so much more from other health care systems around the country. ■

Important 2019 W2 information

PAYROLL IS PREPARING the 2019 W2 forms and they will be mailed out before Jan. 31.

Staff also can view their W2 via PeopleSoft Employee Self Service and print the information and use it to file taxes. The W2s will be available in PeopleSoft by Jan. 31.

After logging on to PeopleSoft, choose "myPay" and then select the "View W2/W2C Forms" menu option on the left side of the page.





Know the Line

Commit to a safe and respectful workplace

LAST FALL, THE MGH LAUNCHED the *Know the Line Program*, designed to address and prevent harassment, sexual harassment and abusive conduct – commonly known as workplace bullying. The *Know the Line Program*, supported by strong leadership commitment, will provide education and training, strengthened and unified policies at the MGH and other Partners affiliates, clear reporting and resolution procedures, expanded resources and support, and ongoing monitoring. A lot of work has been happening behind the scenes since the October launch, and Jovita Thomas-Williams, senior vice president of Human Resources, shares more about the program and its timeline.

MGH employees haven't heard much about *Know the Line* since the program was announced in October. What is happening?

We are nearing completion the ground-laying phase of this campaign. During this time, a number of dedicated individuals from Human Resources, legal, communications and administration staff – with the help of other teams throughout the hospital – have been putting the foundation of the *Know the Line Program* in place, ensuring its components help us address and prevent undesirable and inappropriate workplace behavior.

During this time, we have reviewed all policies that cover these topics at the MGH, Brigham and Women's Hospital, and Partners HealthCare. There were 67 policies between these three affiliates, and we have narrowed them down to six. These six policies will be the same at MGH, BWH, Partners HealthCare and eventually every other Partners affiliate, taking the confusion out and adding clarity to what is acceptable and not allowed in our workplaces.

At the same time, we have been piloting our industry-leading, groundbreaking prevention and training program with a variety of employee communities across MGH. The feedback received from participants has been invaluable, and we are using it to ensure that this important training is a best practice experience for everyone.

What is the training like?

The training is called Common Ground Healthcare, and it was designed specifically for the hospital environment. It uses storytelling and interactive quizzes to educate viewers on what is acceptable and not acceptable in the workplace. This isn't just any other training video. I think MGH employees will find these real-life scenarios engaging and educational. As the viewer, staff get to decide how the characters react to certain workplace situations. This is unlike any other training they've ever experienced.

Training will take about one hour and will be mandatory for all MGH employees. Those with manager/supervisor responsibilities will be asked to complete one additional hour of training.

When can employees expect to participate in the training?

We are planning a *Know the Line* Leadership Conference for senior leadership in March. They will be the first to complete the training. After that, it will be assigned to managers and supervisors, and eventually, all MGH employees via HealthStream.

Why focus on leadership?

Our leaders shape the work environment and the culture we experience at the MGH every day. They are the ones who set the example and encourage civility and respect among all team members. This is an incredibly important component of the *Know the Line Program*, and by having leaders be the first individuals trained, we set the expectation that they are responsible for championing a safe and respectable workplace for all.

When will we hear more?

You'll hear a lot more about the *Know the Line Program* in the coming months. We will have a website, educational forums and other events to keep the conversation about a safe and respectable MGH workplace long after training is completed. The *Know the Line Program* isn't about a one-time training – it's a shift in culture that will happen across several months, or even years. ■

First-of-its-kind heart transplant performed in New England

A TEAM OF MGH TRANSPLANT SURGEONS

and specialists recently performed the largest number of adult heart transplants in the country using what are known as Donation after Circulatory Death (DCD) donor hearts. The five transplants also include the first surgery of this kind for the New England region.

For decades, heart transplant cases in the U.S. have been dependent solely upon organs donated after brain death or irreversible loss of brain function. A DCD donor has brain function incompatible with life, but doesn't meet all criteria for brain death. Life support is removed and if the donor's heart stops beating within a certain window of time, death is declared and the organ is removed. Outside the body, blood circulation is re-established in the heart using a machine pump while it is being transferred to the recipient.

"This is a significant moment not only for MGH, but hopefully for transplant centers around the country," said David D'Alessandro, MD, surgical director for MGH Heart Transplantation. "Patients die each day while waiting for transplants, due to a major shortage of suitable organs. This is one way we can work toward addressing that gap."

The first adult DCD heart transplant in the U.S. was performed at Duke University Hospital in December 2019. Duke and MGH are among five centers taking part in a clinical trial for DCD heart transplants, involving the use of the Organ Care System (OCS) designed by Massachusetts-based Transmedics. The portable OCS, often referred to as "heart in a box," restores the donor organ with warm, oxygenated blood, re-animating it until it can be safely transplanted. OCS was also used during the world's first DCD heart transplant in Australia in 2014 and in England's first DCD heart transplant in 2015.

"Recent studies have shown outcomes among DCD heart transplant patients overseas have been favorable," said James Markmann, MD, PhD, chief of the MGH Division of Transplant Surgery. "I'm confident we will continue to see this program grow at MGH."

The DCD heart transplant trial is expected to run through August of 2021.

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What else should people know?

It is important to note that while this virus is concerning, we are also amid flu season. The CDC estimates there have been at least 13 million flu illnesses, 120,000 hospitalizations and 6,600 deaths from flu this season. It is imperative everyone gets their flu vaccine which is the best protection against flu. ■

“Mass General has a long history of robust planning for all kinds of threats, including emerging infections. As one of 10 Regional Ebola and other Special Pathogens Centers in the country, we fortunately have developed teams of clinical staff who are trained to provide safe care to patients in exactly this kind of outbreak.”

—Paul Biddinger, MD, chief, MGH Division of Emergency Preparedness

Flashback Friday: A Brief Review

IN THIS WEEK'S FLASHBACK FRIDAY – an installment highlighting stories from the *MGH Hotline* archive – we took a look at *MGH: A Brief Review*, an annual publication created by the MGH Office of Resources and Development from the early 1950s to late 1960s. A precursor to today's fundraising capital campaign materials, the *Brief Review* provided an opportunity to pair reports and figures from the official MGH annual report with a direct appeal for funds. The illustrations below provided a chance to highlight innovations and changes around the hospital, including a White Lobby renovation, a new X-Ray Unit and “an integral part of the Hospital, the new Coffee Shop.” ■

