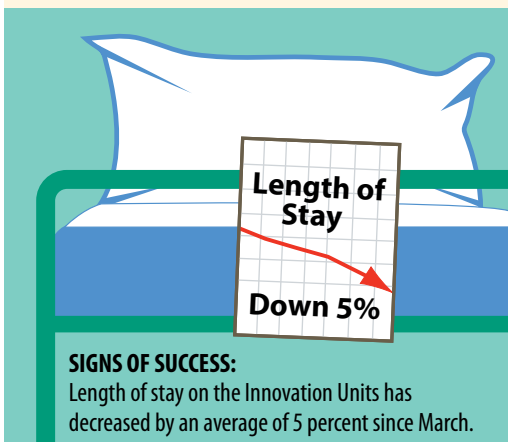


## Early data points to success of Innovation Units

**MORE THAN SIX MONTHS** after the launch of the Innovation Units – 12 inpatient units serving as testing grounds for strategies to improve patient outcomes, enhance patient, family and staff satisfaction, and reduce costs and length of stay – enough data are now available to start evaluating the success of the interventions tested (see sidebar on page 4).

“Early findings have been positive,” says Jeanette Ives Erickson, RN, DNP, FAAN, senior vice president for Patient Care and chief nurse. “Our creative thinking is making a difference. We’re encouraged by the impact the Innovation Unit interventions are having on interdisciplinary teamwork and communication, patient and family satisfaction, length of stay and readmission rates.”



An evaluation of the units is being conducted by staff in the Center for Innovations in Care Delivery and the Yvonne L. Munn Center for Nursing Research. Quantitative metrics being tracked include statistics about length of stay, readmissions, quality indicators, cost per case mix and staff retention, as well as the results of patient and staff satisfaction surveys such as the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) tool and the Revised Staff Perceptions of the Professional Practice Environment scale. Qualitative metrics (Continued on page 4)

## Honoring those who served



**SALUTING VETERANS:** From left, Wasserman, DeFelice and his daughter, Susan. Wasserman, also a veteran, helped bring DeFelice down to enjoy the appreciation breakfast.

**THE CROWD** beneath the Bulfinch Tent bowed their heads for a moment of silence to pay respect to the current and retired members of the military among them and to pay tribute to soldiers who died serving their country. The annual MGH Veterans Day Appreciation Breakfast on Nov. 12 was the start of a day full of activities to honor veterans and their families, including the many MGHers who have served or are currently serving.

“From the Revolutionary War to the Civil War, World War I and II to Vietnam – and now our nation’s longest wars in Iraq and Afghanistan – the hospital has been at the center of clinical care, education and research to improve medical care for wounded veterans through science and innovation,” said David F. Torchiana, MD, chairman and CEO of the MGPO.

Lt. Col. David King, MD, a trauma and acute care surgeon at the MGH, was the guest speaker. A member of the U.S. Army Reserves for the past 12 years, King served as a trauma surgeon in both Iraq and Afghanistan for the 7th and 10th Special Forces Group respectively. King discussed what he calls the “war dividend” – how trauma care has improved within the civilian medical community as a result of war. “We are using the valuable lessons that we learned while at war for those who come to us now for help and healing,” King said. “We are able to pay it forward with the wisdom and knowledge we gained on the battlefield.”

The appreciation breakfast was particularly special for retired Marine Corps Capt. Eugene DeFelice, a patient on Ellison 8, who for the past 30 years has not missed the Veterans Day (Continued on page 4)

## MGH emergency responders return from deployment

**THE EFFECTS OF HURRICANE SANDY** were particularly severe in New York City, its suburbs and Long Island, causing major flooding, structural damage and widespread power outages. Six MGH staff members who deployed Oct. 30 to help with relief efforts in New York as part of the Massachusetts (MA-1) Disaster Medical Assistance Team returned home Nov. 11.

The MGH team members – Jacquelyn Nally, RN, HAZMAT coordinator for Emergency Preparedness and disaster response manager for the MGH Center for Global Health; Paul Biddinger, MD, chief of the Emergency Department's division of Emergency Preparedness and medical director of operations for Emergency Services; Allison Durocher, RN, of the Burn Unit; Robert Droste, RN, also of the Burn Unit; Lisa Anahory, RN, Emergency Services; and Karen Ryle, RPh, of the Outpatient Pharmacy – were stationed at an evacuee shelter set up in an athletics building at York College in Queens. MGH staff focused on providing medical care to patients who were primarily older adults from nursing homes and behavioral health group homes. They also helped address urgent or emergent medical issues among the approximately 600 evacuees on campus.

In addition to the MA-1 DMAT, Kira Provost, RN, of Emergency Services, recently returned from deployment with the Rhode Island (RI-1) DMAT to a medical needs shelter at the Brooklyn Armory. Although the official International Medical Surgical Response Team (IMSuRT) did not deploy, two of its MGH members, Nick Merry, RN, of the Post Anesthesia Care Unit, and Anthony Forgione, LPN, of the Operating Room Nursing Service, deployed to a supply warehouse in Frederick, Md., to provide medical logistical support for the relief effort. While Forgione returned Nov. 15, Merry will stay for two more weeks.

"We are incredibly humbled by the selflessness and bravery of our MGH volunteers," says Peter L. Slavin, MD, MGH president. "Our hearts go out to all those who are still dealing with the damage and destruction caused by this powerful storm."



**TEAM EFFORT:** From left, Biddinger, Anahory, Droste, Durocher, Nally and Ryle at the medical shelter



**HAPPY DIWALI:** Bhere, left, and Vishnu Priya Pulipati, of Radiology

## Celebrating a festival of lights

**WHILE MANY STAFF** headed home in the early autumn darkness on the evening of Nov. 13, other MGHers were gathered inside the brightly lit, colorfully decorated East Garden Room to celebrate Diwali, a five-day festival celebrated by Hindus, Jains and Sikhs. Also known as the festival of lights, Diwali is the largest and most important holiday in India and is celebrated all over the world.

Employees of all faiths and beliefs gathered to enjoy the event, which was sponsored by Human Resources. This is the second year the MGH has hosted a reception in honor of Diwali.

"Celebrating the festival of lights with fellow MGHers has indeed been a delightful experience," said Deepak Bhere, a research associate in Radiology. "I would like to thank MGH for hosting this wonderful event to mark the occasion of Diwali."

Jeff Davis, senior vice president of Human Resources, welcomed attendees. Rev. John Polk, director of the Chaplaincy, read a blessing, and Dinesh Patel, MD, chief of Arthroscopic Surgery, who played a key role in bringing the celebration to the MGH, shared a message from Peter L. Slavin, MD, MGH president.

"I am pleased to send my greetings for the health, happiness, wealth and peace of all those attending today," Slavin said in the note. "This festival of lights is another opportunity for MGH to acknowledge our many diverse employees and their important and meaningful celebrations. I wish you all a very happy Diwali." ■

## McGovern Award nominations

**NOMINATIONS FOR** the Brian A. McGovern, MD Award for Clinical Excellence are due Dec. 1. All MGH staff, volunteers, students or patients can nominate a physician for consideration. Ideal nominees are those who spend much of their time focused on patient care; are viewed by colleagues as the "go-to" person in their area of practice; make compassion and kindness the cornerstone of their practice; make an extra effort to ensure patient needs are met; and are often the "unsung hero" whose contributions make the MGH a better place to work and receive care.

The MGPO created the award to honor the memory of McGovern, a superb clinical role model who was dedicated, compassionate and considerate of patients, staff and colleagues. Submit nominations online at <http://mgpo.partners.org/mcgovern>. The award will be presented at the MGPO physician recognition dinner on March 23, 2013.

## Blood Donor Center honors top employee donors

**MARY BROWN** and her husband of 36 years have a standing lunch date. For the past 10 years, the administrative assistant in the Case Management Support Unit has joined her husband at the MGH Blood Donor Center to make their quarterly blood donation before sharing a lunch of crackers and juice – all they need, knowing that they have done something to help someone else.

“It’s so easy, and there are just so many reasons to give,” Brown says of her family’s commitment, which extends to their two daughters who also are regular donors. “Many years ago my father was in the hospital after having major surgery, and he lost a lot of blood. The donations he received from someone made it possible for him to be here today, and this is my little way of doing the same for someone else.”

Brown was one of 115 MGHers honored for donating at least four times during the past year at the 2012 Employee Blood Donor Recognition Breakfast on Nov. 6. “This is a great group that is really near and dear to my heart,” says Kim Cronin, manager of MGH Donor Services. “You have all made the time and effort on a regular basis to help all of our patients, and it’s because of you that we see true miracles happen here at the MGH every single day.”



**EXCEPTIONAL WOMEN:** From left, Elrick, O’Terry and Hoyle Weber

## Women in Leadership event highlights secrets to success

“**THERE IS A POWER** in being authentic. Go for the life you want, and do it intentionally,” Sharon Hoyle Weber told MGHers attending the annual Women in Leadership event on Nov. 8. Through humorous stories and anecdotes, Hoyle Weber shared her personal experiences during the fifth annual MGH forum, “The Power of Authenticity: Discovering the Exceptional Woman in You.” The forum was developed to foster personal and professional development among MGH women in management roles.

During the event at the Holiday Inn Boston at Beacon Hill, Hoyle Weber discussed how she interviewed 30 successful people in the corporate world about their secrets, beliefs and attitudes and discovered “12 secrets of thrivers,” which she features in her book, *Hot in the Pot – A Survival Guide for the Real You in the Corporate World*.

Radio personality Candy O’Terry, a 22-year veteran of Magic 106.7 and the recipient of 35 area and national awards for excellence in women’s programming, served as the evening’s moderator and also shared her personal experiences – noting her path to success was neither smooth nor easy, and it did not come early in life. O’Terry went on, however, to create “Magic 106.7’s Exceptional Women” radio show, which has profiled nearly 500 women in the past 21 years, and become co-founder of Boston Women in Media & Entertainment. “My mantra and what I believe in very deeply is ‘obstacles are opportunities.’ And passion – I believe the secret to success all comes down to being passionate about what you do,” O’Terry said.

The evening also featured comments from Jean Elrick, MD, senior vice president for Administration, who announced the start of a new MGH Women in Leadership quarterly luncheon series, which is slated to begin in 2013. “I am truly honored to announce the start of these seminars that will feature MGH leaders and up-and-coming MGH leaders sharing information about how they are the exceptional women that they are today.”

The Women in Leadership Committee is a volunteer committee of MGH managers focused on professional development of women at the MGH. For more information, email [womeninleadership@partners.org](mailto:womeninleadership@partners.org). ■



**REASONS TO GIVE:** From left, Meredith Wentworth, marketing specialist in the MGH Blood Donor Center, with Delaney and Sogolow

Family also plays a key role for Andrew Sogolow, senior generalist in Partners Human Resources at the Charlestown Navy Yard, who was honored as this year’s top employee whole blood donor. “My father and my uncle gave over 10 gallons each,” Sogolow says. “It’s in their honor that I carry on the tradition and donate. It’s far easier than you can even imagine, and I feel great afterward.”

In addition, Paul Delaney, a technician in the Radiation Safety Department, received special recognition during the ceremony for being the top employee platelet donor. For Delaney, donating has simply become part of his routine since first hearing about the MGH Blood Donor Center at the new employee orientation in 2005. “I’d only donated once or twice before – but I thought, ‘Why not? I think I can give that much,’” says Delaney, who after his first whole blood donation began to donate platelets. “It’s just such an easy process.”

For more information about the MGH Blood Donor Center, visit the center’s Facebook page at [www.facebook.com/MGHBloodDonor](http://www.facebook.com/MGHBloodDonor) or call 617-726-8177.

**WHAT'S HAPPENING****Announcements available online**

To read this week's "What's Happening" items, visit <http://intranet.massgeneral.org>.

**Change in Hotline schedule**

MGH Hotline will not publish Nov. 23 due to the Thanksgiving holiday. The regular publication schedule will resume Nov. 30.



Submit news tips  
and story ideas  
to MGH Hotline

**EDITOR**

Emily Lemiska  
617-724-2753

**ASSISTANT EDITOR**

Colleen Marshall  
617-726-0275

**EMAIL**

[Hotline@partners.org](mailto:Hotline@partners.org)

**MAIL**

Public Affairs Office  
50 Staniford Street, Suite 830  
Boston, MA 02114

MGH Hotline is published weekly  
by the MGH Public Affairs Office.

Photos by MGH Photography  
unless otherwise noted.

MGH Hotline is printed  
on recycled paper.



Find MGH Hotline on the web at  
[www.massgeneral.org/news/hotline](http://www.massgeneral.org/news/hotline) or  
by scanning the QR code above.

**— Veterans**

*(Continued from page 1)*

ceremony near his home on Martha's Vineyard. The World War II and Korean War veteran said he was honored to attend the reception – thanks to the help of MGH physician's assistant and fellow veteran Stan Wasserman, PA, who escorted him. "I thought it was very good," said DeFelice, who wore his Marine Corps uniform to the event. "I was very happy – couldn't ask for anything better."

The 2012 Veterans Day events were presented by the Red Sox Foundation and MGH Home Base Program in collaboration with Human Resources, the Chaplaincy, the Employee Assistance Program, the MGPO, Police and Security, and Patient Care Services. The day also included a lecture, panel discussion and prayer service.

"Veterans Day is a time to recommit ourselves to our veterans and their families," said retired Brig. Gen. Jack Hammond, executive director of the Home Base Program. "It's a time to sit back and say we can do more as a country. We can do more as individuals. Most important, it's our job not to forget our veterans and their families and the sacrifices they have made." ■

**— Innovation Units**

*(Continued from page 1)*

include focus groups comprised of staff, patients and families, as well as observations and narrative reports.

Early data for what may be two of the most significant interventions – introducing the new role of attending nurse and hardwiring into practice the philosophy of relationship-based care, which emphasizes the connection between patients and providers – point to success.

"Staff consistently describe the 'importance of embracing the philosophy of relationship-based care to guide care delivery,'" says Jeff Adams, RN, PhD, director of the Center for Innovations in Care Delivery. "In addition, the attending nurse role was embraced by all role groups and disciplines and was described by many as 'a significant innovation.'"

Jean Stewart, RN, attending nurse on the White 6 Orthopaedics Unit, describes her role as the "constant" nurse. "I'm the one who'll be there every day assisting patients, families and staff with whatever is on their minds. I help keep the patient's hospitalization cohesive and moving forward."

In addition, at a recent Innovation Units retreat, Dorothy Jones, EdD, RNC, FAAN, director of the Munn Center, reported that hand-held devices to facilitate communication were especially well-received, although other technologies posed challenges and warrant additional study. Jones also noted that length of stay – which decreased on the Innovation Units by 5 percent as of early November – and HCAHPS data demonstrate a "statistically significant positive response to changes on Innovation Units."

Rick Evans, senior director of Service Excellence, – whose department coordinates efforts to improve the patient experience and the hospital's HCAHPS scores – explains that HCAHPS is a tool used to regularly survey patients about their perceptions of care. "This year, the scores on the Innovation Units have risen at a rate exceeding the already impressive overall hospital rate," Evans says.

All of this information is being tracked via the recently developed Innovation Units Dashboard, which provides an at-a-glance view of trends in data compared to benchmarks. The dashboard includes quality and safety

data – fall rates, pressure ulcer statistics and restraint utilization – as well as infection control, length of stay, readmissions, patient satisfaction, staff satisfaction, patient volume and financial statistics.

"The Innovation Units Dashboard demonstrates unit performance for key metrics for a baseline measurement period," says Amy Giuliano, senior project manager in the Patient Care Services Office of Quality and Safety. "Measures and benchmarks are updated quarterly, reflecting outcomes and performance during the period when each intervention is rolled out."

The most recent Innovation Units Dashboard, along with other details and resources about the units, is available at [www.mghpcs.org/innovation\\_units](http://www.mghpcs.org/innovation_units).

"Looking ahead, we plan to roll out to all inpatient units those Innovation Units interventions that are proving successful," says Ives Erickson. "By sharing best practices and standardizing whenever possible, we'll continue to improve systems, refine care delivery, and mine the creativity and innovative thinking that has brought us so far." ■

**Innovation Units interventions include:**

- Incorporating the philosophy of relationship-based care into practice
- Introducing the new role of attending nurse
- Improving hand-over communication
- Enhancing preadmission data collection
- Encouraging dialogue through a new "Welcome Packet," including the Patient and Family Notebook and Discharge Envelope/Checklist
- Building awareness of domains of practice
- Implementing regular interdisciplinary rounds
- Increasing use of cutting-edge electronic devices
- Introducing whiteboards in patient rooms and electronic whiteboards at nurses stations
- Developing a standardized discharge checklist
- Implementing a Discharge Follow-up Phone Call Program
- Creating strategies to reduce noise