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7-2023

# Nursing News & Views - July 2023

Joanne Miller RN

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**Nursing News & Views** 

Transformational Leadership | Structural Empowerment | Exemplary Professional Practice New Knowledge, Innovations & Improvements | Empirical Outcomes

Volume 2, Issue 6 July 2023

# A Note From the CNO

Dear Colleagues,

Summer is my favorite season and I love July 4th! I rounded with Gina St. Jean on the units to recognize and show appreciation to our incredible caregivers. Much like the monthly Java with Joanne, all are free to share their ideas and dreams for the future. The pursuit of happiness is thriving at Baystate Medical Center.

Explore our July publication and find:

- Recognition of the tireless work of Karen Johnson, BSN, RN, CCMSCP, senior director, Patient Safety for Baystate Health. Karen's focus is on the Culture of Safety, and she supports providing safe, timely, effective, efficient, equitable and patient-centered care at Baystate Health. You will often see Karen on the units rounding!
- Cidalia Vital, PhD, RN, CNL, CCRN submitted a fascinating story in our "What Would Florence Do" section where you can learn more about domestic violence and bruise detecting in patients with dark skin tones.
- When you reach the Baystate Research and Education story, you will be able to click and read about the innovative work that our nurses are doing every day. You will be filled with pride and express a "major wow" as I did when I attended the event on June 15 and 16.
- The Holistic Corner represents the true essence of nursing. These dedicated nurses are translating new knowledge into practice every day. They are truly inspiring all of us to take better care of ourselves and rejuvenate the joy in nursing by practicing holistic modalities at the bedside.

Please keep up the great work as we continue to advance the science of safety and be inspired by the journey to eliminate preventable harm. Lastly, a huge thank you to our recruiters who are working tirelessly to recruit clinicians to the very best hospital! Enjoy these long hours of summer sunlight!

With gratitude for lighting the way with resilience,

Konne Mille

Joanne

### Java with Joanne

### Share what's on your mind. Ask questions in a comfortable space.

Please join in a chat with BMC's CNO Joanne Miller in your unit's breakroom and enjoy a coffee and sweet treat.

Below is a list of upcoming*Java ith Joanne* sessions. We hope to see you there!



UNIT	DATE/TIME
S1400/S1500	Monday, 8/7 at 1 p.m.
S2/Springfield 3 Onc/S3 Discharge	Monday, 9/11 at 2 p.m.

# **Transformational Leadership**



# Karen Johnson BSN, RN, CCMSCP Sr. Director, Patient Safety, Baystate Health

I have been lucky enough to spend my entire career at Baystate Health. I began my nursing career after graduating from Elms College in its second-ever nursing class in 1983. My first RN position was on nights on what is now Springfield 6400. Even as a new nurse I was interested in the processes of care and how to improve it. I volunteered to sit on unit-based and hospital-wide improvement teams and it was through exposure to this work that I began to think about a career in Quality/Patient Safety.

Though I have been away from the bedside for many (many!) years I still remember the frustration with processes that didn't support the bedside staff in the care of our patients, and it is still what drives me in my work today. I was lucky to



join the Quality department at Baystate Medical Center as the science of improvement was developing in the industry and have participated in the growth and refinement of this science over the years. I have been afforded multiple opportunities to learn and grow along the way here at Baystate Health.

Today I am truly blessed to work with the leadership team in the Division of Healthcare Quality. All are aligned in supporting safe, timely, effective, efficient, equitable, and patientcentered care at Baystate Health. The Patient Safety team is comprised of skilled nurse patient safety specialists – Mary Beth Collins, Jennifer Duquette, Becky Laramee, Amy Moore, and Deb Nichols – who, along with our medical director, Kirti Joshi, MD, focus everyday on improving the safety culture and the care provided to our patients. To us, learning from errors is paramount. Our patients deserve that.

I am most proud of our Culture of Safety work because without a strong Culture of Safety

where everyone on the team feels empowered to speak up with concerns, we will never achieve an environment where patients always receive safe, timely, effective, efficient, equitable, and patient-centered care. I have devoted my career to improvement work and feel so strongly that the goal is learning from errors and getting better – not the blaming and shaming of the past in healthcare.

In my free time I love spending time with my family – my husband George, our son George, and our daughter Abby. We are all big sports fans of all the New England teams, especially the Bruins. In the winter you can find me in a local hockey rink supporting our son who coaches the Springfield College hockey team – yes I am a "hockey mom!" My favorite activity is gardening – I love perennials and I take great joy in having fresh flower arrangements from my garden every summer!

I hope you all find the time to do something you love this season!

# CULTURE COUNTS We Appreciate and Value YOU



### **Congratulations to our June BMC DAISY Award Winner!**

Rachel Smith, RN was nominated for the DAISY Award by colleague Jessica Hicks, nurse coordinator for MICU/SICU/NCCU. Nurse manager Jeremy Kele asked staff to stay a few minutes after DMS huddle for a quick meeting. Rachel and Jessica were in the hall when leaders arrived with the DAISY banner. Rachel was surprised and overwhelmed when she learned she was the recipient and had been nominated by Jessica.



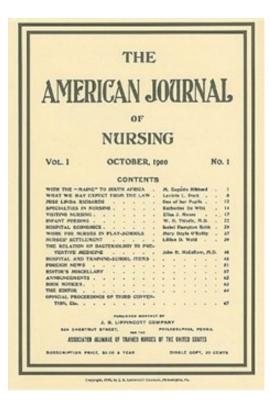
# **History of Nursing**

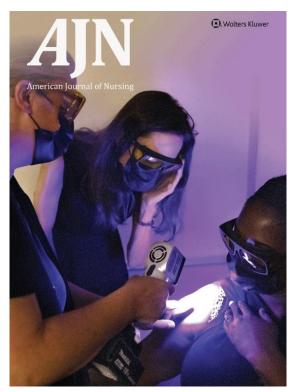


### What Would Florence Do?

In 1859, Florence Nightingale published her groundbreaking work, *Notes on Nursing.* It marked the transformation of nursing and set the foundation for the future of the profession. Florence helped to establish many metrics that set the wheels in motion for nursing to start thinking about research. In 1900, the *American Journal of Nursing* had its first publication (pictured below) with editor Sophia Palmer. The first publication included articles about expectations for the legal system for nurses, experiences of nurses working at the Henry Street Settlement House and special section on specialties in nursing. The first journal demonstrated the importance of interdisciplinary work and physicians also published research findings including infant feeding. It cost 20 cents to purchase the journal and \$2 for an annual subscription. *AJN* helped support nursing science and nurses began doing nursing research with a focus on nursing education.







AJN, 1900 (<u>Source</u>)

AJN, Today

*AJN* is the oldest and largest circulating nursing journal in the world. The journal continues to promote excellence in the profession and highlights cutting edge evidence-based information. In the most recent issue, nurse scientist Karen K. Giuliano PhD, RN, MBA, FAAN, along with her colleague, published a special section called "Innovators." The article describes a groundbreaking technology created by Katherine Scafide, a nurse who specializes in forensic nursing. The technology can improve bruise detecting in patients with dark skin tone. Actress and activist Angelina Jolie published an editorial in the same issue of *AJN* to share how this technology, created by a nurse, addresses health inequities in survivors of domestic violence. She emphasizes the importance of this innovation to ensure patients and domestic violence victims with dark skin tone have the appropriate forensic evidence and access to legal protection and physical and mental treatment.

As we reflect on the first publication of *AJN* in 1900 to the work of nursing today, it is clear nursing has a place in advancing science through innovation and technology. These advances support improving care and changing the research landscape. Please take a moment and access the recent *AJN* publication and learn more about how nurses are innovating and enhancing patient care.

ENTIRE July AJN issue (must access from Baystate Health network) Jolie article Benjamin & Giuliano article

#### References

- Jolie, Angelina. (2023). Addressing Health Inequities in Survivors of Domestic Violence. AJN, American Journal of Nursing, 123, 5. https://doi.org/10.1097/01.NAJ.0000944848.82638.8d
- Benjamin, Ellen, PhD, RN, Giuliano, Karen, PhD, MBA & RN, FAAN. (2023). Improving Bruise Detection in Patients with Dark Skin Tone. *AJN, American Journal of Nursing*, *123*, 46-47. <u>https://doi.org/10.1097/01.NAJ.0000944928.99103.45</u>

Written by Cidalia J. Vital, PhD, RN, CNL, CRRN

# New Knowledge, Innovation and Improvements



# Lighting the Way to Advancing Nursing Science: Baystate Research and Education Celebration 2023

On June 15 and 16, our Nursing Research Program celebrated the many successes over the past year during the Baystate Research and Education Celebration. With a hybrid event, there were over 100 nurses, physicians, therapists, and support staff in attendance. In collaboration with Dr. Paul Visintainer and Dr. Peter Friedmann, the event focused on Nursing Research was led by program director of Nursing Research, Dr. Cidalia Vital and nurse scientists Dr. Karen Giuliano and Dr. Ellen Smithline. A special thanks to support from Caitlyn O'Connor for organizing the many details. Additionally, UMass Amherst's Elaine Marieb College of Nursing and the Elaine Marieb Center for Nursing and Engineering Innovation attended and presented on the various nurse and engineering research projects conducted at Baystate Medical Center. You can view the presented posters below:





Baystate Midwifery Education Program faculty Donna Jackson-Kohlin, CNM; Carly Detterman, CNM; and Liza Winston, CNM were presenters at the International Confederation of Midwives (ICM) conference held in Bali, Indonesia, last month. ICM is an international group that meets every three years, bringing midwives from around the world together in one place for a weeklong gathering of education and celebration.

This conference had been postponed from 2020 due to the pandemic, but was finally held June 21-25. Carly and Liza presented on "Providing Pre-Release Contraception for Incarcerated Women," sharing their experience implementing such a program at the Western Mass Women's Correctional Facility in Chicopee, MA. Donna Jackson-Kohlin, CNM, who also holds certification as a Correction Health Professional, presented on the work of a sexual assault nurse examiner. A great time was had by all and they recommend putting Bali on your travel bucket list.

Baystate Midwifery and Women's Health CNMs are the providers of all the gynecologic and obstetric care at the Western Mass Women's Correctional Facility. Students of the Midwifery Education Program have curriculum related to vulnerable populations and care of incarcerated women and have the opportunity for clinical experience at the facility during their second and fourth semesters. A history of trauma is very high among incarcerated women and a trauma-informed approach to care is critical. During the Advanced Health Assessment course, students are taught a trauma-informed approach as the expected norm for all intimate exams. Pelvic models from the UMass Chan Medical School are utilized in the education of students before they start their clinical experience in the ambulatory setting.

The Midwifery Education Program is committed to Social Justice work and has worked hard to enhance curriculum that addresses racial disparities and health equity. We honor midwifery's long history caring for diverse and marginalized populations and strive to educate midwives who will continue this commitment. We recognize diversity and inclusion in midwifery education is necessary for effectively addressing the needs all communities.

### **Holistic Corner**

# Congratulations to our newly certified Holistic Nurses!

- Carter Schoenborn (pictured at left, wearing his holistic RN badge proudly!)
- Megan Thompson
- Araksya McInerney
- Lindsey Duby
- Matt Coppellotti
- Neomi Seidell



- Louisa Antonio
- Alyssa Reardon
- Heather Stamm
- Heidi Davis



### **Integrative Healing Arts Council**

Magdalena "Leny" Barranda, RN, Wesson 2, created this amazing board (pictured at left) that highlights the wonderful work from our Integrative Healing Arts Council. Thank you Leny for your dedication to holistic nursing and for sharing the importance of commitment to the employees on your unit!





(Above) Hannah Lazo, RN receives her pin from Veda Andrus. (Below) Jessica Hannington, RN receives her pin from Marie Shanahan.

## Integrative Healing Arts Academy Graduation Held on May 19

The Integrative Healing Arts Academy from the Birch Tree Center graduated its fifth Cohort this May. Fourteen nurses throughout Baystate Health demonstrated the ongoing commitment to integrate our holistic model of care.

Families, friends, coworkers, and nurse leaders were present to witness the graduation and ceremony.

Joanne Miller, DNP, RN, NEA-BC provided a commencement address and inspired attendees to continue our mission to promote holistic care.

The emotional journey each graduate undertook, transformed, and reenergized their love for nursing and healing our patients and themselves.





### **IHAA Cohort 5 Graduates**

Madeline Carroll Beth Ann Dawson Kelly Famiglietti Pamela Fisk Kimberly Frazier Kimberly Godin Bridget Hamill Jessica Hannington Lorettajo Kapinos Hannah Lazo Gretchen Loucka Sylkia Paine Caitlyn Waddell Madison Yurgaitis



Take some time and TUNE IN! Scan the above QR code with your phone to listen to the podcast. Please send a message to the group and let them know what you think!



(Above) Madison, Hannah, Gretchen and Caitlyn. (At right) M7 Team celebrating Sylkia Paine and Caitlyn Waddell's projects from the IHAA.

### **The Restoration Project Podcast**

Each IHAA Cohort group created a project to demonstrate how holistic nursing practices can transform both our patients and employees. The Restoration Project Group was led by Caitlyn Waddell, Hannah Lazo, Gretchen Loucka, and Madison Yurgaitis.

From *The Restoration Project Podcast* Team: We invite you to tune into our new podcast "The Restoration Project," written and recorded by yours truly. This podcast shares ways to take care of **YOU**! Our intentions are to help staff here at Baystate take better care of themselves and take the "taboo" out of taking care of ourselves. The podcast episodes include an introduction to our project sponsored by: *The Integrative Healing Arts Academy offered by The BirchTree Center for Healthcare Transformation*.

Our episodes discuss: Breathing exercises, aromatherapy, guided meditation, and more!



### American Holistic Nurses Association Conference Reflection

I attended the American Holistic Nurses Association's Annual Conference in June in Orlando, Florida. The Baystate Health Foundation sponsored my attendance. This was the first time I have ever attended a nursing conference in my professional career.

As I took my first step onto the airplane, I was proud of the work that Baystate Health was doing to integrate holistic nursing to the care of both patients and employees. At the conference, I was expecting to learn about new modalities and strengthen my foundation as a holistic nurse. What I got out of the conference was much more than that. During my time listening to nurses



from around the country explain the barriers to integrative arts within their organizations, I gained a deeper appreciation for our hospital and our leaders, who fully support our journey. Being present while our organization received an award for Institutional Excellence in Holistic Nursing Practice gave me such pride.

Reflecting on the time spent at the conference, I have acknowledged that holistic nursing is instrumental in supporting Baystate Health's mission. We are advancing care for our patients by giving them more tools to aid in comfort and well-being. We are enhancing the lives of our patients by guiding them to use methods to care for the mind and soul, not just their bodies. We are also enhancing the lives of our health care workers. The techniques and modalities that we can offer and teach to our patients can be used on the frail and ill to the strong and healthy. It allows us to care for the caregivers. It gives our team members the chance to show up and be present for our patients. In creating a healing environment for our patients, we are creating a healing environment for ourselves.

I am grateful to not only be present for, but to aide in the growth and development of integrative healing at Baystate Health. Together we are advancing care and enhancing lives!

Written by Megan Meyers BSN, RN, HNB-BC



# Baystate Medical Center Art Dedication

The Seven Chakra Earth Mandala, created by artist Natalie Blake, stands at the entrance of our Daly Lobby. It is dedicated to Baystate Health employees for their heroic efforts through the COVID-19 pandemic. Our proud holistic nurses were asked to be a part of the unveiling of the



rendering during the live broadcasted art dedication. Megan Meyers, Karen Marcoux, Pam Rivera, and Sylkia Paine were the four holistic nurses who participated in the unveiling (pictured here). Joanne Miller and some of our incredible holistic nurses aattended this historic event.

ART of QUESTIONING and INNOVATION

Click on the flyer below to enlarge.



## Welcome to This Month's Mindset Reset

The Nursing Practice and Quality Outcomes Dept. will use this medium to dispel practice myths and validate inquiries. The goal is improved nursing and patient outcomes through knowledge sharing. Scan the QR code each month to discover a new practice fun fact, myth buster, or pearl of wisdom. The topic will change on the first of every month.

If anyone has ideas or questions they want answered related to best practice, contact <u>Lisa.Mayo@baystatehealth.org</u> or <u>Arlene.Kruzel@baystatehealth.org</u>. Pin

Yourd

Yourd</td

Click on the flyer at right to enlarge.

# Educate. Innovate. Celebrate!



# Welcome to GetWell Network!

Baystate Health has invested in a top-rated, interactive patient care platform. It connects

patients, families, and healthcare providers of all specialties to engage together in our patients' medical journeys while in our hospitals.

With integration from our registration system (Cerner), pharmacy, and Clairvia, we have real time patient-specific information available on the platform. At Baystate Medical Center, on the units that have Get Well Network (GWN), this means that each inpatient that is registered is also registered to their TV in their room. This connects their information, such as medications to their GWN platform, on their TV.

There are close to 1,500 patient education videos available to watch, which are short and easy to listen to. Imagine doing medication education right in the room without printing anything! Not only can the GetWell network augment patient education and increase engagement, but it can also be used to save time and improve the patient experience. This helps expedite our discharge process and decrease length of stay when patients and families have this right at their fingertips! The GWN is also available to them as an app on their smart phone. This means they can take this information with them and continue to refer to it.

We will be highlighting a different feature on the platform here each month for you to learn about! There is so much you can use in your everyday practice, right now, that will have such a positive impact on patient care and help you save time and paper (trees)!



on Nursing Practice

# JOINT COMMISSION READINESS

Recently we had a team of consultants here to evaluate our Joint Commission Readiness. During their survey they founds several opportunities for us to make improvements. Please see the findings below:

### **Pain Management**

Many patients were found to not have their pain level reassessed after being given pain medication. Please remember that we are required to reassess pain levels to ensure adequate pain relief.

Many patients were found to have been given medication for "mild" pain such as Tylenol, despite them reporting pain as "moderate" or "severe." This was felt to be undertreating a patient. When we described the situation of a patient not wanting the stronger medication such as a narcotic, that was acceptable if it was documented. Please make sure you document that in a comment or note.

Therapeutic duplication is when two medications are listed for the same indication, such as Tylenol for mild pain and Motrin for mild pain. This leaves the decision about which medication is appropriate up to the nurse which is out of their scope.

Providers are required to put a goal or indication for any PRN medication that a nurse may need to decide to give or not.

#### Certifications

Some employees' files were missing current copies of up-to-date certification such as BLS, ACLS, PALs or their specialty certification that is required for an RN III or RN IV. Please make sure your leadership has the most current copy of your certifications. These are required per your job description.

#### **Disinfecting of equipment**

Several employees were asked if they knew how long something needed to stay wet after being disinfected. If the disinfectant says it has a two-minute dry time, that means it must be wet for two minutes. If it dries prior to the two minutes, it should be reapplied.

### **Care Plans**

Many care plans were found to not be individualized to the patient or updated. This is a regulatory requirement. Please ensure that there is a care plan for any patient issue that currently being treated. If the patient is a high fall risk, they should have a care plan that identifies what interventions the nurse will put in place to keep them safe. When a problem is resolved, please resolve the care plan. You can always reopen it if the problem comes back. For example, if the patient comes in with pain and the pain is resolved, then you can resolve the care plan.

Also, the care plan must have a target date to resolve. Typically, our goal is to resolve all active issues prior to discharge.

### **Medication Education**

It was found that there was no documentation during the hospital stay that patients were educated about new medications. In the Patient Education Task there is a "Teach Back" section that lists medication as one of the items that was educated on. Please use this to document your education. In the future, we will have that revised to say "New and Current Medication" specifically.

#### **Fall Prevention Education**

If a patient is a high fall risk, please ensure they have an active care plan addressing interventions to keep that patient safe.

#### **Columbia Suicide Education**

Please ensure that all patients admitted for behavioral health issues (including substance abuse) are assessed via the Columbia Suicide Screening.

#### Task List

Tasks not completed looks as though patient care was not done. Please document against all tasks during your shift.

#### **Glucometer cleaning**

Please clean the glucometer to ensure there is no visible blood on it with one wipe and then use a second wipe to disinfect it with a dry time of two minutes. This is an OSHA requirement and a patient safety priority.

### Trophon/HLD-

For those areas with Trophons, please ensure the policy and procedure that was shared is posted and followed.

#### Thank you for all your incredible work!

Please know that while we have several opportunities to make some improvements, the surveyors were very impressed with the care you provide. -Gina

**Empirical Outcomes** 



### Nursing Outcomes Improvement Monthly Highlights July 2023

**CAUTI:** Great work! BMC has seen a decrease in CAUTIs in Q1 of 2023 (9) compared to quarter 1 of 2022 (13) and only two for the month of April. We continue to monitor common trends amongst the identified CAUTIs. Although our CAUTI rates have decreased, our Standard Utilization Rate has increased (SUR). This leads us to believe that IUCs are being left in longer than expected. In order to try and combat this issue, we have created a Nurse-Driven Urinary Catheter Removal Protocol Resource for all units to display near their morning huddle boards. This resource provides information regarding nurse's autonomy to remove unnecessary IUCs when they no longer meet the clinical indication. We have heard that obtaining the post IUC removal protocol can be difficult, so a QR code is located on the bottom of the resource in which displays the correct documentation steps when the IUC is removed to trigger the post removal protocol. Our goal is to initiate the collaborative discussions needed to remove unnecessary IUCs during morning huddles.

We continue to meet regularly with the inpatient units and Deep Dive Team to identify opportunities for improvement with both nursing and providers. Our APRN and hospitalist team champions along with our infection disease physicians help make our deep dive process more informative and robust. We will continue to focus on utilizing our DMS boards to improve consistency of nursing documentation, insertion practice, and preventative maintenance of the Foley catheters as well as providers appropriate urine culturing with a suspected CAUTI. Our customized IUC insertion trays have been out on the floors for a couple months. Our new trays now contain three (3) peri-care wipes. We are hopeful that this may be playing a factor in our overall decreased infection rates. From April 26 to May 4, the Sage Stryker Reps were in-house and assisted with the implementation of the Primo/a Fit External Urinary Device and we are excited to have had the opportunity for BMC to support the cost and the transition plan for our patient's safety and comfort.

**CLABSI:** Deep Dives and CUSP Reports continue to assist us in identifying the things we are doing well as well as identify our areas for improvement. We continue to recognize that care and maintenance of central lines are challenging; CHG baths, the labeling of tubing/dressings and shift documentation are the areas we continue to focus on. The monthly K Card Observations of Central Lines continue and we have collected over 800 observation since November 2022 (wow!). The Operations Excellence Department is collaborating with the CLABSI Task Force to create some analyzation of the data to determine our next steps. Thank you to the employees who are working hard to do their best to provide safe and evidence-based care to their patients. BMC has had a total of 14 CLABSIs in Q1&Q2 (in 2022 we had 17 at this time). We are thrilled to report that there

were no CLABSI's in June—congratulations to all team members!

**FALLS:** Way to go BMC! We continue to see reductions in patient falls each month.Our Falls Reduction Committee continues to meet monthly to discuss our hospitals current fall rates and what is existing in our fall prevention practices. We have made great strides in implementing strategic interventions in order to keep our patients safe. Several units have gone live with utilizing the Fall Prevention Tool Kit called TIPS. TIPS is a nurse-led, evidence-based fall prevention intervention that uses bedside tools to communicate patient-specific risk factors for falls. We have also gone live with our Cerner Patient Observer. This has allowed BMCs to improve our staffing and hospital coverage by freeing up BRTs and PCTs by utilizing patient cameras with two-way communication to redirect patients before a fall may occur. Lastly, we have hired new team members on several units into a new job role "Patient Ambulation Technicians." These technicians continually round on our patients and assist them with ambulation and activities of daily living. Since these new interventions have been implemented, we have seen an overall a decrease in the patient fall rate here at BMC.

Congratulations to the following units who had falls in the previous months to having "zero" falls for the month of April: D6B, S64, M6, SW5, and SW6.

**HAPI:** The Skin Integrity Committee and WOCN Nursing Team continue to support employees with evaluations of skin conditions and wounds.

The next Skin Prevalence Day will be on Tuesday, Sept. 12 and we appreciate the flexibility and accommodations the inpatient units make for each Prevalence Day. We have some wonderful "Skin Champion Nurses & PCTs" who work hard ensure the success of this very productive day! Our previous quarterly reports have demonstrated a rate in June 5.56% HAPI 2+ rate with 29 reportable wounds. (retrospectively: March 2023 4.79%, Dec 2022 4.86%, Sept 2022 7.40%, June 2022 5.46%,). We continue to work together in our quarterly HAPI rates this year and congratulate the following units who had no reportable 2+ HAPIs in June: NCCU, STICU, PICU, NIU, NICU, CHAD, S2, MM5, MM7, W3.

Written by: Lisa Mayo MSN, RN, NPD-BC & Connie BlakeEdD, MSN, HNB-BC, RNC-OB

# Voices of our Caregivers and Patients



### **The Patient Perspective**

*Our mission is to improve the health of the people in our communities every day, with quality and compassion.* 

Please enjoy this note from a family member regarding the outstanding care their loved one received on D6A

Hi there,

I wanted to reach out on behalf of my family who were recently telling me about the incredible care they received on D6A. My sister in law's dad was recently there for a feeding tube placement and aspiration pneumonia. While out to lunch with my brother, he went on and on about a LPN named Caitlin who was absolutely amazing. He described how patient and kind she was despite his wife being frustrated and difficult at times. He described how much time you spent educating and explaining things to the family multiple times and in multiple different ways when it was hard for them to understand. Caitlin, I hope you know

how incredibly special you are and how important it is that you are here for our patients. I cannot thank you enough and am so grateful for you being part of the Baystate Health team.

# Please enjoy this note from a patient that is very grateful for the amazing care he received while a patient on SW6.

My name is David, and I am writing this card to express my sincere gratitude for the high level of nursing care. They were compassionate, caring, respectful, and friendly to myself and my wife. To those that advocated for me immediately following my surgery when I was not with it, THANK YOU & BLESS YOU! To the nutrition ambassadors, thank you for your kindness and keeping me fed! To Josephine in housekeeping, thanks for starting my day with a pleasant "good morning" and keeping my room clean. In other words, "thank you" does not express my gratitude and appreciation enough. Though my stay was longer than expected, ALL OF YOU made it bearable. This team of individuals exemplifies what patient care and ursing is all about. You really made a difference!



# **Nursing Recruitment**

Click <u>here</u> to visit Baystate Health's job site.

### **Nursing Recruitment Newsletter**

Throughout the year, the Baystate Health Nurse Recruitment team uses data, events, relationship building, and advertising to build candidate pipelines and attract nursing talent to organization. Learn more about our efforts in this special edition of our Recruitment Update.



To submit an item for Nursing News & Views, please make your request <u>here</u>. Please have your copy and any graphic/photo you'd like to include ready to add to the email. The deadline for submissions to Nursing News & Views is before 3 p.m. on the first Friday of each month.

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