UNPRECEDENTED

HHC courageously confronts COVID-19
The concept behind Moments is to share information from across Hartford HealthCare. As a quarterly publication, a magazine like this can at best provide a snapshot of a point in time.

And this is a most unusual time. The moments we are experiencing are profoundly different, immensely challenging and incredibly moving. They are personal, professional, uplifting, painful — and powerful.

The COVID-19 crisis has convulsed our world like few other issues in recent history. Never has so much been demanded of healthcare workers and the systems of care that support our communities. At the same time, our nation is undergoing an overdue examination of racial equity, and specifically the effects and causes of systemic anti-black racism (read more on p. 6).

On both fronts — a raging global pandemic and a too-long-neglected national social illness — the people of Hartford HealthCare are willing to do the hard work that can lead to lasting change.

We are standing together for our all of our communities, all the people who look to us to live their healthiest lives. We’re bringing testing into underserved communities, dedicating ourselves to greater inclusion and diversity, and holding ourselves accountable to address health inequities in our communities, and implicit bias in our workplace.

Yes, we’re doing this important work while confronting a global health crisis.

The magazine you’re holding can’t reflect the entire scale and scope of all your work across our state and beyond. But it can, and I hope you’ll agree it does, capture the spirit and culture of our colleagues — and remind us that this is our moment to lead.

With gratitude,

Jeffrey A. Flaks
President and Chief Executive Officer

Welcome
Eight Commitments for Racial Equity
What Hartford HealthCare is committed to doing

CEO Jeffrey Flaks has outlined eight steps Hartford HealthCare is taking as part of our “Time Out” to support racial equity. We will:

1. Establish a new HHC Diversity, Equity and Inclusion Council and Affinity Groups; institute new required training; launch his CEO Roundtable.
2. Create affinity groups, bringing together people from common backgrounds, staffed by a member of executive leadership team with the CEO’s involvement, to ensure we are being as inclusive as possible.
3. Institute new required and implicit bias training for all colleagues.
4. Launch CEO Roundtables to listen, engage in discussion and hear of concerns and suggestions.
5. Expand our Health Equity department focus on health equities and disparities and leverage data to better understand the impacts on the people and communities we serve; use this data to drive significant improvement in health and well-being.
6. Engage an external firm to conduct a Diversity and Inclusion Assessment — an audit of our workforce programs and culture to provide additional information about the types of initiatives we need going forward.
7. Use a new search firm to recruit leaders from underrepresented backgrounds; build deeper relationships with professional organizations that promote the advancement of black healthcare leaders; provide increased support for programs and efforts to advance the perception of HHC as a great place to work; continue expanding our mid- and early-career recruiting and development programs.
8. Establish a Supplier Diversity Council to help us increase our purchasing from minority-owned business enterprises, and support local job creation.

Skill, compassion drive HHC response to COVID-19

By Susan McDonald

Elizabeth Joy, hospice manager with Hartford HealthCare at Home, was pumping gas when she heard applause. Glancing around, she realized it was for her. Someone had seen her HHC badge and started clapping to recognize the efforts of healthcare workers during the COVID-19 pandemic.

Meanwhile, Paulette Schwartz, director of human-centered care with Hartford HealthCare Community Network, brokered some of the first community donations, offering 140 masks from the flooring and façade materials company where her husband works.

It was the beginning of a long, still ongoing, confrontation with coronavirus.

Being ready for emergencies is nothing new for HHC. Each time we experience one — whether a mass casualty or natural disaster — we have strengthened our response plans. But there has never been anything like this pandemic. HHC’s first COVID-19 patient was confirmed March 13 at Hartford Hospital. By then the system had already swung into action, opening emergency command posts to serve as resources for managers and staff. Each day begins with goals set by various section chiefs and ends with them reporting out.

The system’s Emergency Operations Center, headed by Chief Operating Officer Mike Daglio and medically overseen by Executive Vice President and Chief Clinical Officer Dr Ajay Kumar, became the focal point for activity — coordinating response, addressing concerns and meeting patient and community needs across the state.

It was a time for rapid innovation. Staff at a 24-hour Clinical Command Center fielded calls from across the country; teams organized drive-through testing services; expanded telehealth capabilities in primary and specialty care practices; blitzed key information to staff, patients, the media and community through websites in English and Spanish; daily news conferences, staff and text alerts, coping information and hotlines provided information.

As the pandemic spread, forward triage trailers near emergency departments ensured safety and best care for COVID-19 patients. Screening and mask use was mandated.

“This is a time when our community needs us most,” HHC President and CEO Jeffrey Flaks told colleagues at the time. “Your strength, preparation, cooperation and discretionary effort are remarkable — it is the sort of teamwork we have relied on again and again. You define who we are and what we stand for!”

As the number of COVID-positive patients rose, HHC teams organized and opened alternate care sites with the state and National Guard, established emergency housing for staff, secured scarce equipment, and created spaces and materials for the care of our colleagues. HHC partnered with local, state and national organizations to ensure there was enough testing.

Flaks stressed that these and other actions demonstrate HHC’s system-wide capabilities.

“As this situation evolves, all of us will continue to demonstrate our agility and expertise,” he said. “We are, and will continue to be, leaders in this effort — countering panic through preparation, and uncertainty with safety.”

Your strength, preparation, cooperation and discretionary effort are remarkable — it is the sort of teamwork we have relied on again and again. You define who we are and what we stand for!
2. The team from the Backus Incident Command center and others toured the drive-through testing site before opening.
3. Staff at MidState Medical Center set up a drive-through testing site.
4. Jeff Cohen, Lt. Gov. Susan Bysiewicz and Bridgeport Mayor Joe Ganim at the test site in Bridgeport. The Lt. Gov. and Mayor were tested that day.
5. Karen Fasano, vice president of nursing for the Central Region, checks supplies for drive-through COVID-19 testing.
6. New security protocols in place direct staff and visitors in an effort to protect staff and patients at Hartford Hospital.
7. Staff at Backus Hospital’s Incident Command Center discuss and update plans for handling the COVID-19 situation.

Thankful hearts on display at St. Vincent’s

Hundreds of hearts were on display in the St. Vincent’s lobby showing notes of appreciation or simply the name of a colleague deserving special recognition. Thank you to Director of Human Centered Care, Ellen Harry, for launching this initiative and to Executive Office Printing for donating the printed hearts.

Photos by Jeff Evans, Rusty Kimball and Chris Rakoczy

Photos by Danielle Swift
Streamlining testing with a drive-through approach

By Brenda Kestenbaum

As the COVID-19 pandemic enlarged its footprint in Connecticut, Hartford HealthCare teams mobilized quickly to open drive-through testing centers, starting with Hartford Hospital on March 16.

Armed with a referral from a provider at the Hartford HealthCare Medical Group, patients drove up in their cars at a steady pace. They were met by a team of nurses, medics, respiratory therapists and ancillary staff from the Center for Education, Simulation and Innovation (CESI) at Hartford Hospital. Steve Donahue, director of operations for CESI, was on the first team to meet them.

“Most people were appreciative of the service, but emotions were high, to be sure,” Donahue said. “It’s a unique time for all of us. Whatever we can do to stop this spread is important.”

The transaction took about three minutes from start to finish, and involved obtaining a sample swab from the patient’s nostril. The first step for team members — dressed in scrubs, gowns, N95 masks, face shields and gloves — was to have the patient put on their own facemask. They explained the testing process and took samples from the patients who reclined in their cars. Two samples were taken to test for COVID-19 and the flu.

The relatively short interactions in the drive-through testing site were made possible through extensive preparations and safety protocols put into place well before the first car arrived. “The city of Hartford Traffic Division jumped into action quickly and helped us with traffic flow,” said Peter Fraser, director of public safety for Hartford HealthCare. “Parking signs were in place and the traffic division was here before sunrise to help us set up traffic cones. They also helped facilitate assistance from the Hartford Parking Authority and Hartford Guides, who will be helping us on site every day.”

At the end of his shift, Donahue reflected on this incredibly unique situation with three main takeaways.

“1. Dismantling overflow tent at press conference, Hartford Hospital
2. Parishioners from the Get Wrapped Church in New London and the Castle Church in Norwich held a prayer service in front of Backus Hospital in Norwich one Friday to pray for all the employees and patients at the hospital who are there during this COVID-19 pandemic.
3. Backus Hospital nurse Larissa Tysack, RN, attends to a possible COVID-19 patient on A3 with the help of Rory Shaffer, PCT, and Amy Johnson, RN.”

“I am so glad Hartford HealthCare did this, for the good of the community,” he said. “This event solidified my belief that we are properly trained for this. And, I am so proud of my team.”

For more information on testing at HHC, go to www.hartfordhealthcare.org/communique or watch a video on how easy it is to be tested.
A disembodied voice, a sense of assurance from Community Care Center

By Susan McDonald

The phone cradled against her shoulder in a seat on the fringe of the Hartford HealthCare Community Care Center, Jessica Leroux asked questions, jotting down notes in a nurse’s quick, facts-only way. Leroux, who paused to nibble an almond while the caller—a man who flew from Mexico to Boston a few days earlier and felt short of breath—described his symptoms, nodded as she wrote.

"Are the symptoms new or do you think it’s your asthma?” she asked, later suggesting the man be tested for coronavirus (COVID-19) due to his recent international flight and condition.

Days off from her regular job in the Care Logistics Center (CLC) began to look very different for Leroux once she started volunteering in the Community Care Center as soon as the system set the phone bank up in Newington in early March to field COVID-19 questions from people as far away as Washington state.

“You can see how impossible it is,” Leroux said of the volume of phone calls in the Community Care Center, gesturing to the dozen sets of phones and computers tended by clinical and non-clinical staff. “I figured whatever I can do to help.”

The majority of volunteers were doctors or nurses like Leroux. They used an algorithm and predetermined questions to assess risk for worried callers. Others, like Medical Assistant Mark Costantiello, from occupational health, conducted screenings and referred callers to nurses or doctors for final recommendations.

“I thought this would be a great use of my time while my providers are on vacation,” Costantiello said. “I like helping people feel better by the end of the call. People are very happy to have an ear.”

"No, you’re not going to have a breakdown!” Leroux said gently to one caller. “Listen to me, you sound terrible. There’s no way your employer wants you in, coughing on customers!”

Later, she said, “She was hysterical. I felt so bad.”

Nearby, Jacqueline Vega, CLC manager, helped Anna Bil, a nurse from the System Support Office quality and safety team, connect a caller, an emergency medical services worker worried because a transported patient later tested positive for COVID-19, with the right services.

“Everyone is working so hard here,” said Vega, nodding to staff on the phones. “They’re doing long days at their regular job and then coming in here. But, everyone has a sense of community. This is helping us reconnect with the community, and it’s a way they could step up and help.”

Calls have come in from across the country, as have requests for help from healthcare facilities in other states wanting help setting up their command center, said Carolyn Bousquet, a bed manager with the CLC.

“We took 1,400 phone calls on Friday and we’re up to 800 so far today,” she said just after noon on March 16, the day the system added drive-through testing at Hartford Hospital and telehealth sessions for people needing the required referral for such testing. Drive-through testing was offered to people with referrals from Hartford HealthCare Medical Group providers or through telehealth sessions.

“The front line staff is stretched so thin. I feel like I’m making a difference,” said Bil of her decision to volunteer.

Call the Community Care Center at 844.621.0600.

Jacqueline Vega, manager of the Care Logistics Center, answers a telephone in the Community Care Center. Photo by Nick Dethlefsen

Colleagues answer the call

1. Backus Environmental Services Department aide Isolina Garcia Soto and numerous other employees in that department have been busy cleaning and disinfecting all areas of Backus.
2. Daily media briefings kept a steady flow of information to the community.
3. Theresa LaLonde, RN, MSN, Nurse Manager, A3, checks the temperature of Backus visitor Frank Smith at the screening station in the front lobby of Backus.
4. Staff at The Hospital of Central Connecticut tested all visitors for symptoms of COVID-19, including taking their temperatures.
5. Rebecca Putnam, left, Manager of Volunteer Services at Windham Hospital, explains to Denise Mitchell, site supervisor for the Windham laboratory, the computer program that will assist patients who may have hearing or language issues during the screening process.

Photos by Jeff Evans, Rusty Kimball and Chris Rakocy
First responders' tributes

By Brenda Kestenbaum

Hartford area police and fire departments provided a drive-by tribute in front of Hartford Hospital to recognize the combined efforts of the entire healthcare community in the face of the COVID-19 pandemic. Similar gestures were carried out at HHC facilities across the state.

Photos by Jeff Evans, Rusty Kimball, Chris Rakoczy and Alan Grant
Giving back after testing positive for COVID-19

In the beginning of March, as the coronavirus bore down on the state, the Center for Education, Simulation and Innovation (CESI) at Hartford Hospital was busy creating and implementing a plan to facilitate drive through COVID-19 testing at the hospital. Chris Madison, a programmer at CESI, saw colleagues shifting roles to staff the drive-through and provide fit testing for N95 masks. Just days later, he started feeling the same symptoms he had earlier in January when he had the flu — fever, chills, cough and muscle fatigue.

Within three days, Chris felt better, and was tested to rule out COVID-19 as the cause of his illness. Instead, the results were positive. Chris quarantined for two weeks, recuperated and is back to work, primarily working from home these days.

A third generation employee of Hartford Hospital, Chris’s ties to the hospital go way back in time. His grandparents worked at Hartford Hospital and currently serve as volunteers. Chris’s mother is a nurse in the ICU and his father is the administrative director of the transplant program. As he recuperated, Sue Donahue, a friend and nurse at Hartford Hospital, told Chris about a new convalescent plasma donation program that was underway.

After identifying suitable donors, Hartford HealthCare started scheduling donations of plasma from people who recovered from COVID-19 to treat those who are still critically ill with the virus. The plan, announced by Dr. Ajay Kumar, Hartford HealthCare’s chief clinical officer, follows national efforts by the federal Food and Drug Administration and a consortium of 50 hospitals and universities called the National COVID-19 Convalescent Plasma Project.

The donations are rich with antibodies created by the body’s robust immune response to the virus. These antibodies are believed to help others fight COVID-19. Similar work was done during the SARS and Ebola outbreaks.

“We fully expect to see more efficacy data (on this treatment) as time goes on. As of today, I believe this is our best treatment option,” he said.

On Wednesday, April 15, Chris became Hartford HealthCare’s first patient to donate plasma to treat COVID-19 positive patients. He donated at the Rhode Island Blood Center facility in Westerly, Rhode Island, which is currently the closest location doing this work. It is expected that the American Red Cross in Farmington will start performing the procedure in the coming days.

Convalescent plasma donation is similar to a typical blood donation. Blood drawn from the arm is sent through a machine that collects plasma before returning red cells and platelets. It takes only a few minutes longer than a standard blood donation. For Chris, the procedure took just over an hour.

To be eligible, it must be 28 days since a person’s COVID-19 symptoms have subsided, or a test yields a negative result after 14 days. In Chris’s case, he met the criteria, made a phone call to express interest, answered some screening questions and provided a copy of his test results.

Getting to the Rhode Island Blood Center in Westerly was no problem. "The National Guard checkpoint was past the area of the exit, so I didn’t have to deal with that,” reported Chris. "It was an easy commute and not a bad drive.”

The morning of his donation, Chris received a phone call that he will remember for a long time.

"Bimal (Patel, President of the Hartford Region) called me to show his support and thank me. It really meant a lot and showed how everyone has been really supportive and helping me through this process,” he reflected.

“Chris is a true healthcare hero. Making a donation truly demonstrates his compassion and empathy for others who are fighting this terrible virus like he did," said Patel. "I am so grateful for his generosity and that he’s on the mend."

After the donation, Chris felt well, with no negative side effects from the procedure. He is eager to donate again when he is eligible, perhaps as soon as four weeks from now. Four patients have received plasma therapy, thanks to Chris’s donation. Madison has a message for those like him, who have tested positive for COVID-19 and recovered.

“I would really recommend it to anyone who meets the criteria,” he says. “I encourage anyone who has recovered to consider donating and call the help line.

He also has messages of encouragement to his thousands of colleagues at Hartford HealthCare.

“Thank you to all of our staff and healthcare workers throughout the state who are on the front lines. They are the real heroes here. I am just happy that I could help in any small way.”
Boosting spirits at Senior Services

By Ken Harrison

Hartford HealthCare Senior Services colleagues went above and beyond during the COVID-19 crisis, coming up with numerous ways to help the people and families they serve stay upbeat and connected to their loved ones.

Here are some ways residents at Jerome Home and The Orchards were helped when visitors were restricted.

Volunteer Chris Ward played the bagpipes for residents in the courtyard of Jerome Home on St. Patrick’s Day.

Jerome Home residents made and held signs with messages to their loved ones, letting them know they are OK. Staff then posted photos onto social media.

Jerome Home staff members helped residents stay connected to their families through Skype and FaceTime calls. Maura Ciccotti, recreation assistant at Jerome Home, helps a resident talk with a loved one online.

Great grandchildren held up a sign they made for their relatives at The Orchards in Southington.

How HHC recognized heroes

Join Hartford HealthCare in recognizing healthcare heroes everywhere

HealthCare Heroes Month - May 2020

May 6–12
National Nurses Week
Concluding on the 200th birthday of Florence Nightingale, designated by the World Health Organization as “The Year of the Nurse.”

May 10–16
National Hospital Week
Designated by the American Hospital Association to honor the nation’s hospitals, health systems and healthcare providers.

May 17–23
National Emergency Medical Services Week
Designated by the American Association of Emergency Medical Technicians and the American College of Emergency Physicians to honor all EMS practitioners.

The past few months have been extraordinary. We believe that special times warrant special recognition.

In addition to the commemorative days or weeks traditionally dedicated to healthcare workers, Hartford HealthCare is proclaiming the entire month of May as HealthCare Heroes Month.

HealthCare Heroes share their dedication and skill with us — in our hospitals, in nursing homes, in laboratories and health centers. They work at bedsides, in cafeterias, rehab centers and residents’ homes. They provide support services, comfort, clean, care and cure. For every familiar face, there are many more serving behind the scenes. They are brave, courageous, and selfless. Every day, in every setting. We stand with them.

Please join us in recognizing these amazing women and men everywhere during the month of May. And every single day.

HartfordHealthCare.org/thanks

Jeffrey Flaks
President and Chief Executive Officer

Moments | Summer 2020
**BY THE NUMBERS**

**Water, water everywhere**

In fiscal year 2019 (October 1, 2018 to September 30, 2019), Hartford HealthCare ordered enough five-gallon water jugs to fill more than 14 swimming pools.

These jugs fill water coolers in employee and patient areas across our system. It does not include water coolers that are connected directly to building water lines. By filling our reusable containers at water coolers, we kept more than one million plastic water bottles out of landfills.

Source: Hartford HealthCare Business Intelligence

Here’s how many water jugs we ordered from WB Mason, by the numbers:

- Total five-gallon jugs ordered **31,064**
- Total gallons of water consumed **155,320**
- Total ounces **19.8 million**

That’s the equivalent of **1.2 million 16-oz. water bottles**

If placed end to end, that number of water bottles we did not use because we refilled at water coolers would stretch further than the distance from St. Vincent’s Medical Center to The Hospital of Central Connecticut to Charlotte Hungerford Hospital and then to Backus Hospital.

Deanna Bencivengo, regional coordinator for Rushford locations in Meriden and Wallingford, left, and Stacy Bouchard, participate annually in the Point in Time (PIT) Count, the census of homeless or “unsheltered” people as a way to ensure that appropriate services are available to them. PIT is organized nationwide under a federal Department of Housing and Urban Development (HUD) mandate. HUD requires the count every two years but the Rushford team does it annually as part of their Continuum of Care.

Bencivengo and her small team worked from 7 to 11 p.m., fanning out across the community, using predetermined maps of known places the homeless sleep, including Walmart, highway rest stops, abandoned buildings, secluded parking areas, train stations (above) and local parks.

“We walk those areas and look for people who we can identify as being literally homeless by approaching vehicles and/or encampments and asking people if they need help, engaging with them and asking if they will participate in the survey,” she said.

The teams also offer services to anyone not already receiving them, help them find stable housing and fulfill other needs. The count itself funnels key information to HUD, so they can track trends and pinpoint areas of need in the population.

Photo by Rusty Kimball
Mystic tract remains green and natural

In the past, when a developer took a parcel of land and turned it into offices and residences, grass was planted and holes for ornamental bushes dug. These days, developers and landscape architects work to replicate the flora and fauna of the original land as they complete a project.

Such is the case with David Lattizori’s development of the former Perkins Farm in Mystic. When Lattizori first proposed a combination of residential and healthcare buildings on 70 acres between Jerry Brown Road and Interstate 95, he laid out his conservation vision:

• Preserve more than half of the land as dedicated open space.
• Create a walking trail system that connects to adjacent open space on each side of the property, creating one of the town’s largest greenway corridors.
• Replant with native meadow plantings and indigenous trees, designed to encourage pollinators and wildlife, and needing no chemical fertilizers or herbicides.

Michael A. Cegan, ASLA, APA, principal in Richter & Cegan Inc. Landscape Architects and Urban Designers in Avon, was fully on board, noting that landscape architecture in the 21st century focuses on sustainability.

“It’s very typical in what we do now to preserve natural areas and remove invasive species,” he added, saying that the project saved as much of the historic stonewalls and hedgerows from the old farm as possible.

The walking trails were “designed to connect internally to all the different destination points on the site, and also connect you to the offsite trail systems of the Avalonia Land Trust and Denison Pequotsepos Nature Center,” Cegan said. —Elissa Bass

POINTS OF PRIDE
Hartford HealthCare

New help for unresponsive depression

Often, people seek professional help for depression, but what if that doesn’t work?

While antidepressant medication helps many with Major Depressive Disorder (MDD), there are a substantial number who do not respond. Patients with Treatment Resistant Depression continue to suffer MDD symptoms despite trying two or more different antidepressant medications. For them, a new option is available at the Institute of Living (IOL).

“The Center for Interventional Psychiatry is designed as an option for people who cannot find relief for the symptoms of depression with antidepressant medications,” explained Dr. Benjamin Anderson, medical director of the clinic. Last year, the U.S. Food and Drug Administration approved use of Esketamine nasal spray, in conjunction with an oral antidepressant, for patients with Treatment Resistant Depression or MDD that doesn’t respond over time to other treatments.

“We can offer this nasal spray treatment to adults currently taking an antidepressant medication but still experiencing symptoms of MDD that are disrupting their lives,” Dr. Anderson said.

MDD symptoms include:

• Persistent depressed mood or loss of interest in regular activities
• Changes in sleep
• Changes in appetite
• Low energy
• Difficulty concentrating
• Low self-esteem
• Feelings of guilt
• Thoughts of suicide

At the IOL, Esketamine is self-administered under supervision of a mental health professional. Appointments take about two hours so staff can monitor patients for any side effects.

“We start patients out coming twice a week for four weeks. In weeks five through eight, appointments are weekly. After week nine, patients can come in every other week for treatment,” Dr. Anderson said.

Referrals to the Center for Interventional Psychiatry should be made by a psychiatric provider (psychiatrist or psychiatric APRN). Forms can be found on the clinic’s website (instituteofliving.esketamine).

—Susan McDonald

A woman of distinction

Hartford Magazine used words like “exceptional” and “significant” to describe the 30 Women of Distinction profiled in a recent issue. And, right there on page 49 is Dr. Antonelle DeMarcia, medical director of the Hartford HealthCare Ayer Neuroscience Institute’s Chase Family Movement Disorders Center.

A neurologist who founded the Chase Center, she is also on the board of the American Parkinson’s Disease Association’s Connecticut chapter and director of its referral center.

“A limitation in medicine is that we are very good at treating disease, but with a chronic, lifelong, neurodegenerative condition, such as Parkinson’s, we need to be there to provide care and support robust wellness programs,” she said.

With a staff of 30, including eight movement disorder specialists, the Chase Family Movement Disorders Center team sees patients with Parkinson’s, Huntington’s, Tourette’s syndrome and dystonia, offering diagnostic and therapeutic treatment to help improve patients’ quality of life. Dr. DeMarcia coordinates care based on a multidisciplinary approach that incorporates therapies like botulin toxin (Botox) injections, oral medications, deep brain stimulation to prod parts of the brain, much like a pacemaker for the heart, and an intrathecal pump to administer medication. She is an active researcher, part of the body of scientists and physicians working to find a cure or a way to slow the progression of neurodegenerative disorders.

The Chase Family Movement Disorders Center has three locations, with a fourth opening in Westport this year.

—Susan McDonald

Talking TED

What do an organizational behaviorist, real estate marketer and anti-trafficking activist have in common with a behavioral health researcher from the Institute of Living (IOL)?

For four hours in December, the answer was the attention of those attending TEDxFairHartford, where they shared innovative and inspiring ideas.

Dr. Godfrey Pearlson, founding director of the IOL’s Olin Neuropsychiatry Research Center, was tapped to present his research into the effects of marijuana on driving.

“We know marijuana alters behavior, but we needed to study how much it affects people, for how long and whether or not that should keep them from getting behind the wheel,” he said.

With states, including nearby Massachusetts, legalizing recreational marijuana, this research has become more imperative than ever before,” he said.

Dr. Pearlson started investigating the impact of marijuana use on driving several years ago using federal grants to launch two studies. The first, a five-year project funded by the National Institute on Drug Abuse, is focused on the impact marijuana has on the brain’s cognitive and motor functions when driving a motor vehicle. Specifically, the re-search is tying changes in brain function based on doses of THC, a psychoactive chemical in marijuana, while subjects “drive” inside an MRI scanner.

The second study, requested by the National Highway and Traffic Administration, aims to...
**POINTS OF PRIDE**

Hartford HealthCare

The push for a system-wide approach to manage burnout and create a space for health and wellness. A team of physicians and advanced practitioners volunteered their time to lead a group that will continue to focus on physician wellness, a national issue.

The winner and finalists were chosen from 36 nominations of teams that completed initiatives in fiscal 2019. Choosing one winner from such an impressive pool was a challenge. Thank you to each nominee and finalist for commitment and discretionary efforts that make every moment matter for those who depend on Hartford HealthCare.

**Finalists:**

- **The Opioid Stewardship Council** researched, arranged and implemented a method that allows prescribers to quickly check Connecticut’s controlled substance database before prescribing controlled substances. The solution drastically reduced the number of opioids prescribed, reducing the risk of potential misuse.

- **The Care Coordination team** created standard work for the patient discharge process by introducing a green pocket folder containing customized resources based on anticipated needs of patients leaving the hospital. This project improved patient satisfaction during transitions.

- **Read more about these extraordinary projects on the Making a Difference Together page of HHC Connect.**

—*Hilary Waldman*

**Celebrating making a difference**

The Making a Difference Together award is presented annually to a team that worked together across boundaries to turn innovative thinking into measurable change and help Hartford HealthCare deliver an unparalleled customer experience.

**Congratulations to the winning team**

The Physician and Provider Health and Wellness Initiative came together after a member of the Hartford HealthCare community took their own life. This tragedy spearheaded the push for a system-wide approach to manage burnout and create a space for health and wellness.

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—*Hilary Waldman*

**Matching felines to their forever homes**

**Karen Davis**

Surgical clinical reviewer

Hartford Hospital

Saving lives is just what Karen Davis does, whether it’s in the hospital or at her volunteer position.

**Who do you volunteer for and what do you do for them?** Dakin Humane Society (dakinhumane.org) is a community-supported animal welfare organization in Springfield, Mass., that provides a myriad of services for more than 30,000 animals and people every year. Many Connecticut folks use Dakin’s services. I provide animal care, matchmaking for successful adoptions, fostering of sick kittens and care in the kitten ICU, the only one in New England!

**Why do you volunteer?** I volunteer at Dakin because I love animals and I love the organization.

**How should others volunteer?** Volunteering is a way to live one of your passions — whether it’s animals, children, the arts, etc. — while helping those around you. It’s a wonderful way to indulge your interest and contribute to the greater good.

**How does employee volunteering support Hartford HealthCare’s mission of providing quality patient care?** HHC’s mission is “to improve the health and healing of the people and communities we serve.” Volunteering is how we can do our part for our communities and also fulfill our own needs. Research clearly demonstrates the positive impact companion animals have on owners’ mental and physical health and that reinforces the satisfaction I get from volunteering. It is my contribution to the greater community. It doesn’t get any better than that.

**How do you match pets with families?** Matchmaking is an art and a science that requires knowledge of people, situations and animal behavior patterns. I learn as much as possible about the potential adopter, their home/work life, current pets and dream pet. Then, I can try to lead them to their perfect match. Often, people have different ideas of what they think they want and need in a pet. People who like to sleep late should probably not get that adorable border collie pup. Adopters with toddlers should reconsider that cute, frisky kitten who likely will scratch their precious baby, a mellow adult cat is probably better for them. We also consider the needs of any current pets. Let’s not pair an elderly cat with a kitten or place an alpha female cat with a resident alpha female cat.

—*Gary Kleeblatt*

Karen Davis poses with a furry friend.

Submitted photo

Moments | Summer 2020

Moments | Summer 2020
Whoa! Pitching in with draft horses

Dyanne Chace
Bed manager
Hartford Hospital

For more than 30 years, Dyanne Chace has been helping people as a nurse in Hartford Hospital’s Emergency Department and in her current role as a bed manager for the Care Logistics Center. Outside of work, she helps by rehabilitating horses at the Connecticut Draft Horse Rescue in East Hampton, an organization dedicated to saving draft horses bound for slaughter, neglected, abused or whose owners cannot care for them.

How did you get involved? I have always loved horses and have been riding them my whole life, but I have never had room for one of my own. When I saw an ad in the local paper about the need for volunteers here, I knew it was the perfect opportunity and now I’ve been here for eight years.

What is your role? This is an all-volunteer organization, so we all have to help with everything, from feeding and grooming the horses to mucking out their stalls to stacking hay and even fundraising.

What do you like best about the work? I love everything about it. All of the volunteers are so passionate about the mission. For us, it’s all about these amazing horses. This is a place of peace and somewhere you can give all the love you have to give. The biggest reward is knowing that all the horses here are loved. It’s an incredible place.

—Ken Harrison

Laura Brilla
Medical staff coordinator
MidState Medical Center

When she’s in the kitchen, Laura Brilla is part chef, part mad scientist, creating delicious and healthy spice rubs for a variety of meats.

What got you started making spice rubs? I was never happy with store blends - they are weighed down with fillers like wheat, sugar and/or salt, and they lack “pops” of flavor. I started with chicken and pork blends. When a friend had a major heart operation, he had a hard time finding flavorful meals that were low in salt, so I made up a nice mild spice blend to add to meatballs and he absolutely loved it!

How long have you been making your own spice combinations? I started making my own blends about 20 years ago, but began to really get into it the past three or four years.

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How long have you been making your own spice combinations? I started making my own blends about 20 years ago, but began to really get into it the past three or four years.

Tell us about the process. Is there a lot of trial and error? There was a lot of trial and error with the blends. I tried different concoctions for about two years. I started by researching different bulk spice companies and ordering the same spice (mustard powder, ground sage, thyme) and testing the flavor, packaging and freshness. I would think about a meat and what I thought would match the meat. I stayed with what I thought were New England/American flavors. I love blackened fish and right now I am trying to create a good blackened rub. Usually a blackened rub is 50 percent salt, and that will not do. I will find an answer!

Do you prepare a lot at one time? I prepare the blends one batch at a time, to avoid any mistakes or flavor cross-contamination. I have to measure precisely and constantly clean the utensils.

Do you have a favorite spice? Yes! I call it “Prime Eveil.” It has a little horseradish in it, so it’s great on prime rib.

Any tips or advice for someone who thinks this is a hobby they can try? Anyone can try anything! As long as you love what you do, and it’s relaxing, you will do a good job. The challenge is just making time for yourself.

—Brenda Kestenbaum

Laura’s Quick Italian Blend

This blend is perfect for making a quick tomato sauce for pizza or giving a little extra “punch” to your favorite prepackaged marinara. The marjoram, oregano and basil mixture can be tossed into your favorite green salad or pasta primavera.

1/3 cup marjoram leaves
2 Tbsp. oregano leaves
2 Tbsp. basil leaves
2 tsp. onion powder
1 tsp. garlic powder

Gently toss marjoram, oregano and basil together. Add onion and garlic powders. Store in air-tight container.

Dinner always tastes extra special with spice blends created by Laura Brilla.

Photo by Rusty Kimball
Filling the right prescription for learning

By Amanda Nappi

Jose Scarpa always seems to be moving in three directions in Natchaug Hospital’s one-room pharmacy. The long-time director reviews a policy, before entering one of more than 100 daily medication orders and consulting with a psychiatrist on a challenging case.

With up to 70 inpatient psychiatric and residential patients each day and a staff of just one other pharmacist and several technicians, Scarpa stays busy year-round.

Still, each summer he spends a few of his days off volunteering with other doctors, pharmacists and students to offer free healthcare consultations and medication to migrant farmers.

“They arrive here with papers to work but no medical coverage, so getting even the most basic and medication to migrant farmers. It’s a very rewarding experience to help people who need help and education.”

It’s a cause that he is passionate about as an immigrant himself. A native of Uruguay, he moved to the United States at 18.

When a military coup in Uruguay temporarily closed schools and colleges, family members encouraged Scarpa to come to America, where he met his wife of 42 years, Eny, after just six months. With her support, Scarpa returned to school to graduate from UConn School of Pharmacy.

He worked in retail pharmacy before finding a position at Manchester Hospital and discovered his passion for mental health.

“I’ve always liked the daily connection with people - being able to sit with a patient, go over their medication, hear their story,” Scarpa says. “With mental health patients, that opportunity comes up a lot. They ask questions and you’re constantly using your knowledge to try to help them and the doctors and nurses.”

Arriving at Natchaug in 2005, Scarpa wanted to find a way to share his passion with future pharmacists.

“With the support of Natchaug executive leadership, Scarpa started a program to bring UConn pharmacy students in for month-long rotations. Every year, six to 10 students rotate through, assisting with day-to-day operations, researching medications, helping run groups, and more.”

“The experience here is very unique,” Scarpa admits. “Many students tell me they didn’t know what to expect and some are even intimidated. But once they spend some time here, they realize these people are like you and I. Some students, by the time they leave, want to work in a hospital setting.

“The fact that this experience makes them reflect and opens their eyes and their minds makes me feel proud.”

Jose Scarpa stands for a minute in the Natchaug Hospital pharmacy.

Photo by Jeff Evans

The leading listener

By Christi Osterling

On a quiet January evening in the Backus Hospital Emergency Department, 28-year-old night nursing supervisor Dana Zordan prepares for the shift. He changes his clothes, ties his shoes then steps out on to the ED floor where his real preparation for the night begins — his listening tour.

Zordan spends the first few hours of every night conferring with his colleagues. He listens to the daytime nursing supervisor’s update about patientcomings and goings; he listens to the night hospitalist who updates him on admissions and patient movement among units; and he listens to the charge nurses, who seem to know everything that’s happening in the hospital.

This listening ensures there is an organized awareness of what is happening at the hospital at all times.

“It’s all about keeping the communication open and having an understanding of my colleagues, which builds trust and makes things run smoother,” Zordan says. “I’m here to meet their needs so they can do their jobs.”

In the job barely three months, Dana started his career in an emergency department at age 18 while working on his nursing degree at the University of Hartford. Despite his short tenure at Backus, he is known for being a listener, which has helped him build strong relationships with the staff around him.

“I always get their opinion,” he says. “I appreciate their backgrounds and perspectives.”

Zordan’s shift is over at 7 a.m., but he is usually at the hospital for a few more hours — this is where the listening stops and the talking begins. He doesn’t like to leave loose ends, so he takes the extra time to brief the daytime managers of developments and notable floor activity, or to recognize a staff person whose work deserves recognition.

Across Hartford HealthCare, on any given night, nursing supervisors like Zordan deal with a wide range of issues, from weather emergencies to hands-on patient care. From the emergency department to inpatient floors, they are the go-to people and relied upon by night staff for their leadership.

Zordan credits listening, respect, communication and relationships for being able to effectively keep the ED humming at night.

“I know from my experience as a nurse that the assignments can be overwhelming,” he says. “I don’t want others to feel that they don’t have the support they need.”

Photos by Jeff Evans
St. Vincent’s nurses prove to be magnetic

By Anne Rondepierre-Riczu

Inspired, committed, driven are just a few sentiments offered to describe nurses at St. Vincent’s Medical Center (SVMC), the first Hartford HealthCare hospital to achieve Magnet® status.

In 2012, SVMC became the first hospital in Fairfield County to earn the recognition from the American Nurses Credentialing Center (ANCC), considered the highest and most prestigious distinction a healthcare organization can receive for nursing excellence and high-quality patient care. Six years later, in 2018, SVMC achieved Magnet recognition again.

“We’re a better organization today because of the Magnet recognition,” said Dale Danowski, Fairfield Region vice president, Patient Care Services at SVMC. “Magnet recognition raised the bar for patient care and inspired every member of our team to achieve excellence every day. It is this commitment to providing high-quality care that helped us become a Magnet-recognized organization, and why we continue to pursue and maintain Magnet recognition.”

The Magnet Recognition Program, administered by ANCC, identifies healthcare organizations that provide the best in nursing care and professionalism in nursing practice. The program serves as the gold standard for nursing excellence and provides consumers with the ultimate benchmark for measuring quality of care.

To achieve Magnet recognition, organizations must pass a rigorous and lengthy process of preparation, self-examination and improvement that demands widespread participation from leadership and staff. This process includes an electronic application, written patient care documentation, on-site visit and review by the Commission on Magnet Recognition.

“Magnet recognition is a tremendous honor and reflects our commitment to delivering the highest quality of care to this community,” said Linda Plecity, SVMC Magnet Program director. “To earn Magnet recognition the first time was a great accomplishment and incredible source of pride for our nurses. Repeated achievement of this credential underscores the foundation of excellence and values that drive our entire staff to strive harder each day to meet the healthcare needs of the people we serve.”

Magnet recognition is the gold standard for nursing excellence and a factor when the public judges healthcare organizations. U.S. News & World Report’s annual showcase of “America’s Best Hospitals” includes Magnet recognition in its ranking criteria for quality of in-patient care.

“For our nurses, it’s another validation of their unwavering commitment to our patients and families,” Danowski added. “As we strive towards fulfilling the promise of providing enhanced experience for patients and providers and lowering the cost of healthcare delivery, our nurses’ commitment to our mission and living our core values is what makes our organization special.”

St. Vincent’s nurses prove to be magnetic

COMMUNITY CARE

A group of St. Vincent’s nurses pose as part of the annual “Wear White Day” tradition during National Nurses’ Week.

Photo by Danielle Swift

Magnet Award facts

- SVMC employs about 900 nurses, caring for patients in hospital and outpatient settings.
- SVMC was first recognized by Magnet in 2012 and recognized again in 2018.
- SVMC is the first hospital in Fairfield County to achieve Magnet recognition, and the only in Hartford HealthCare.
- Organizations must reapply for Magnet recognition every four years and provide evidence demonstrating how staff sustained and improved Magnet concepts, performance and quality over the previous four years.
- The Magnet® Recognition Program focuses on advancing three goals: promoting quality of care, identifying excellence in the delivery of nursing services to patients, and disseminating nursing care best practices.

What’s your favorite summer activity?

Before the COVID-19 pandemic, we asked and you told us. Look for future polls in our weekly employee newsletters and join the fun!

Beach 332
Mountains/Lakes 129
World travel 43
Staycation 42
City 3

Photo by Danielle Swift

Moments | Summer 2020

THE POLL

Moments | Summer 2020

COMMUNITY CARE
Each year, nurses from around Hartford HealthCare are nominated for the prestigious Nightingale Award for going above and beyond the call of duty. We salute the 2020 nominees featured here. Find out more about each at URL.
A simulation of the Left Ventricular Assist Device (LVAD) — an ingenious device to help hearts pump — was born in a garage when the son of a “pool guy” tinkered with lengths of dishwasher hosing and pool PVC pipe.

Dr. Jason Gluck, whose wending path to medicine equipped him with practical skills he uses to keep patients alive, said the simulator was important for the ECMO team.

“I recognized there was nothing out there similar, so I created it. I knew the basic function of a pump and how it needed to work,” he said. “I’ve always been a tinkerer — it’s a link between my past experiences and my present needs.”

He’s proud of the revitalization of ECMO and creation of ECMO on the Go, which sends experts by helicopter to critically ill patients at New England hospitals to initiate ECMO, stabilizing them for transport and advanced care. The work earned the Healthcare Hero award for “Corporate Achievement - Innovation.”

ECMO, he explained, supports patients in acute situations, not just cardiac distress. Most recently, it’s helped patients with “overwhelming” cases of flu and sepsis.

“ECMO is being used earlier and earlier,” Dr. Gluck said. “(ECMO) gives the body a rest and machines enable the body to heal. It allows us to treat underlying causes and give treatment time to be effective.”

“Every day, our team does amazing things to benefit patients and the community. Email your moments that matter to susan.mcdonald@hhchealth.org.

Heroes among us

Two Hartford HealthCare professionals — Jason Gluck, DO, head of Hartford Hospital’s Extracorporeal Membrane Oxygenation (ECMO) team, and Shawnna Scirpo, RN, BSN, director of nursing for emergency services at The Hospital of Central Connecticut — were honored with 2019 Hartford Business Journal Healthcare Hero awards. Here are their amazing stories.

Lifelong ‘tinkerer’ constructs life-saving answers

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Buying time, like ECMO, has been a career theme for Dr. Gluck who, after helping in his dad’s pool business, became a New York paramedic and firefighter. Later, in medical school, he was intrigued by the heart, which pumps blood like fire trucks pumped water onto burning buildings. Hired at Hartford Hospital in 2010 as director of emergency cardiac care, he spearheaded the ECMO program. He saw a chance to help more people both here and in the field.
Shawnna Scirpo, nurse manager, The Hospital of Central Connecticut, Emergency Department

Photo by Rusty Kimball

Nurse’s advocate for staff and patients

Shawnna Scirpo is a nurse first, most comfortable on the frontlines supporting her colleagues and treating patients with the care they need. Honored as a Healthcare Hero for her intuitive expertise, leadership qualities, and nurturing contributions to the community, her management style is simple.

"Lead by example — I never ask anyone to do something I wouldn’t do myself," Scirpo explained. "My core values consist of fair and equitable decision-making, kindness, authentic behavior, positive work ethic and family."

She has derived great satisfaction doing the work she loves with a team she loves. Recognizing one time that her staff was emotionally impacted by the passing of a patient, Scirpo arrived at the hospital in the overnight hours to support them and provided a social worker as well.

"At the end of the day, these patients can survive and thrive. That’s the point," he said.

With ECMO and ECMO on the Go helping about 60 patients a year and a survival rate almost 20 percent higher than the national average, Dr. Gluck is looking at his next challenge. He enrolled in the Massachusetts Institute of Technology’s executive MBA program to better grasp the business side of medicine.

"For a lot of things I want to do, including developing novel and innovative patient care strategies, partnership with administration is imperative," Dr. Gluck explained. "Often, their question is, 'Can we do it?' I don’t speak the business language of ROI (return on investment) or cost analysis. However, I think the MBA skill set will help me more easily present my visions."

—Susan McDonald

“I wanted to help the masses and provide the care we give so well here to anyone in need, no matter where we are,” he explained. “Ten years ago, people either didn’t know what ECMO was or they ran when I brought it up! Now, the word is synonymous with innovative and cutting-edge care.”

Hartford HealthCare has one of a few mobile ECMO programs in the country, but Dr. Gluck said he’d like to teach other systems.

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Interestingly enough, being a manager was a role she initially turned down. With her husband’s encouragement, she eventually accepted the challenge.

“This role has allowed me to do what I love,” Scirpo remarked. “But, it has also given me the opportunity to grow as a leader, with the ability to be a change agent for the good of our patients.” Scirpo enjoys coaching and mentoring other leaders in the organization and working on initiatives that improve the patient experience.

Some initiatives include development of an Emergency Department brochure designed to explain the often frightening experience for patients. She also helped develop and foster a partnership with local emergency medical services to build a more collaborative relationship.

As if life in the Emergency Department isn’t busy enough, she has found time to pursue an MBA and mother 11 children. She and her husband are the parents of six biological children, four adopted children and one foster child.

As a foster parent, Scirpo said she is fiercely committed to social justice.

“I continuously fight to make sure my kids are treated fairly, making sure their needs come first and foremost,” she said. “We treat them as our own until our time with them ends. We also have reunified a daughter to her biological mom and transitioned a son and daughter to their forever home.”

Meanwhile, back at the hospital, it’s not hard for her to picture a perfect day at work — Wearing scrubs and helping my staff on the floor take care of the patients we serve.”

—Brenda Kestenbaum

Very professional all around — and you can tell they enjoy working together, too. While I don’t ever want to have surgery, this group made it a breeze.

—Endoscopy patient at Windham Hospital

The receptionist in radiology was very efficient. I was escorted to the x-ray room by Clay, who took my back x-rays. He was very kind and answered all my questions in a very nice, competent, reassuring manner. I was very impressed with his concern and competence.

—X-ray patient at Windham Hospital

Dr. (Ahmad) Daher is one of the best doctors I’ve ever known. He is VERY accessible. He always listens and provides thoughtful answers to my questions. He is AMAZING when it comes to remembering my wife’s medical history. I trust him implicitly.

—Husband of patient at Hartford neuro- oncology practice

Your loving guidance and suggestions were an important part of our saying goodbye and I can’t thank you enough for that. There was a feeling of peace and serenity that helped me accept that call on Saturday morning and be grateful that we had said our loving goodbyes the night before.

—Daughter of Southington Care Center patient

I have completed my outpatient rehab, but I cannot say enough kind words to Geoff and Sarah for all their hard work, perseverance and knowledge, but most of all their compassion shown towards me. They are truly the reason why I have been so successful with my knee mobility.

—Rehab patient, Colchester site

This program has been amazing. To meet other people like me, that have physical illnesses, has helped me so much. I always felt so alone, but now I know there are other people like me.

—Client, Young Adult Medical Track at the Institute of Living
Trailblazing through heart surgery

By Chris Wojcik

Arthur Chester sat atop Cadillac Mountain in Acadia National Park in Maine with his wife Kathryn, reflecting on his journey over the past year. The 1,529-foot Cadillac peak wasn’t the tallest the 64-year-old hiker had climbed, but it was the first after double bypass heart surgery eight months earlier.

On January 26, 2019, Chester awoke to extreme chest pain. He had a 25-year history of heart problems, including angioplasty at 39, and had become completely run down. He told Kathryn it was time to go to the emergency room.

After a series of tests at Hartford Hospital, it was only a slight surprise that he needed double bypass surgery, a procedure scheduled a few days later with Dr. David Yaffee.

“I figured I was in for bypass surgery that morning, but I had no idea how much,” Chester explains.

Following a successful surgery, he spent 13 days in the hospital for monitoring and testing.

“The first few days were really rough,” he recalls. “You’re just existing — nothing more than that. I was dying to get out of there right at the end.”

But, not even the pleasure of sleeping in his own bed after discharge could minimize the physical challenges Chester still faced and it remained very difficult to move around freely without pain. He still wasn’t eating regularly and he found himself sleeping a lot, even falling asleep at the table when visiting with family.

“I just kept thinking ‘Wow, this is the new normal ,'” Kathryn Chester recalls. “He went through a lot of things and had a lot of problems with different medications. It was pretty scary.”

It wasn’t until nearly a month later that he began to show signs of improvement. His energy and appetite returned, he slept less and he marked small physical victories. From walking to his mailbox to walking down his hilly street, he made progress every day.

Six weeks after surgery, Chester began rehabilitation in Middletown with a clinical goal of completing 36 hours. For eight weeks, he made three visits per week, splitting time between the stationary bike and treadmill, and gaining strength and confidence each day.

As summer arrived, providers encouraged him to be more active outside. His wife bought him a Fitbit and he soon reached his personal goal of 10,000 steps per day. When he wasn’t walking, he tended to household chores and yard work, helped his wife in their garden and tackled small home repair projects. He even worked with his son to cut down four trees and load the logs onto a log splitter.

“The key to Arthur’s successful recovery was his active lifestyle,” Dr. Yaffee explains. “Now that he has improved blood flow to his heart muscle, he will not only do the activities he was able to doing before surgery, but will have even more energy because his heart is stronger and healthier than ever.”

For the past five years, the Chesters traveled to Acadia National Park to hike the scenic ledges and Cadillac Mountain. By his own account, he had been “dragging” through the lakes the last few years. He’s not anymore.

When they made their way down the mountain last summer, the couple discovered they finished nearly 1.5 hours faster than in years past! He felt thankful for the January emergency room trip.

“I’m a guy, so we don’t go to the doctor for any reason if we can help it,” Chester jokes.

His surgeon praises the decision.

“It is important not to ignore the early warning signs of heart disease, despite how innocuous they may seem,” Dr. Yaffee warns.

Early warning signs, such as increased fatigue and decreased exercise tolerance and energy levels, are often dismissed as signs of aging, he explains. Anyone experiencing these signs should talk to their primary care provider or cardiologist to be certain they are unrelated to the heart.

“Now I’ll tell people that, as far as I’m concerned, someone turned the clock back 20 years,” Chester says.

More than a year after surgery, he’s not showing signs of slowing down and continues to stay active daily, including a friendly steps competition with his wife. This winter, he made two trips to Colorado for skiing with his family.

He’ll need to maintain that level of strength and energy to achieve his next personal goal — to hike the 6,288-foot peak of Mt. Washington in New Hampshire this summer.
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