

Spring
2021

A publication for Hartford HealthCare colleagues

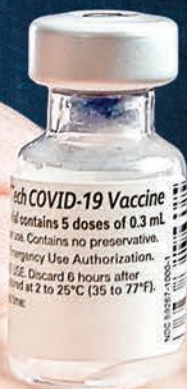
moments

Vaccine visionary

**This pharmacist leads the way
to win race against COVID-19**

Also in this issue:

- Chaplain offers pandemic perspective
- Walking the wellness walk
- Surgeons reveal their OR playlists

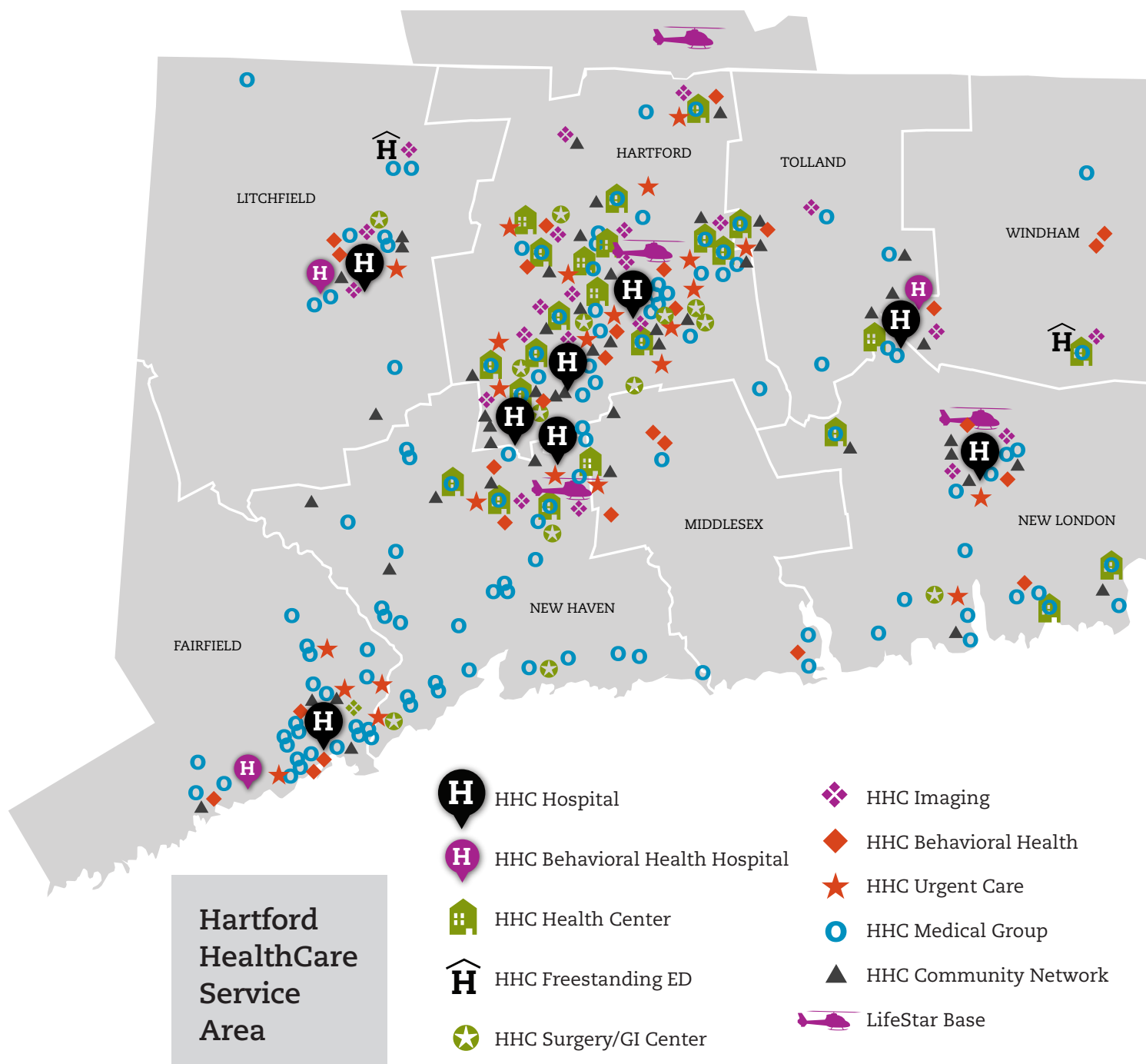


Hartford
HealthCare





Where's Hartford HealthCare? Everywhere



On the cover: Eric Arlia, system director of pharmacy, Hartford HealthCare, presents a vial of Pfizer COVID-19 vaccine.
Photo by: Chris Rakoczy



Lean but not-so-mean at the BHN

By Shawn Mawhiney

The Institute of Living Assessment Center became the first Behavioral Health Network (BHN) team and the second across Hartford HealthCare to achieve Lean Silver Certification.

The honor recognized the Center's work to transform culture, improve patient flow and engage staff in problem-solving, resulting in a dramatic improvement in patient experience in the Hartford Hospital Emergency Department's Purple Pod, the psychiatric unit.

"We went from being off everybody's radar to being a truly reliable community resource," said Dr. David Pepper, BHN psychiatrist in Hartford Hospital's ED. "A lot of heart went into this project. It was very positive."

At the center was the Purple Light Project led by Assessment Center Manager Erica Moura. She said the Lean model helped standardize processes, create efficiencies and implement many staff ideas. Patient experience success stories included:

- Sending Purple Pod patients handwritten cards after discharge. In six months, RSSs sent 537 cards.

- Creating the role of recovery support specialist (RSS) and adding two to the Purple Pod. RSSs guide patients to recovery based on shared experience and understanding challenges associated with recovery.
- Optimizing next-day appointments.
- Finding transportation to facilitate earlier discharge for patients.
- Raising more than \$23,000 to purchase comfort items including warm blankets and winter clothing.

"In an environment as uncertain as the emergency department, it was necessary to utilize the Lean model to standardize our processes to make things as streamlined and efficient as possible," Moura said. "The focus has always been on patient experience. Using Lean tools helped us improve patient experience and enhance employee engagement. It's a win-win situation for everyone."

The Lean certification process was two years in the making. Achieving Silver requires implementing HHC's Operating Model and sustaining outcomes. Over two years, the team utilized Lean tools on 51 Standard Work projects, held 15 A3 meetings and created 192 opportunity cards from staff ideas.



The Institute of Living Access Center team gathers, pre-pandemic. The team is the first from the Behavioral Health Network to earn Lean Silver Certification.

Submitted photo

Shining a purple light

Erica Moura, LCSW, MBA, manager of the Institute of Living (IOL) Assessment Center, found out exactly how behavioral healthcare resonates with people in the community when she started The Purple Light Project.

Her goal was to raise funds and collect needed items for emergency psychiatric patients in the Hartford Hospital Emergency Department Purple Pod to make it more patient centered. After several fundraisers and hundreds of donations, the Purple Light Project raised nearly \$23,000 in its first year.

—Robin Stanley

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What COVID-19 taught us about health equity in the U.S.

By Hilary Waldman

A conversation with Elisabeth Michel, health equity specialist, Hartford HealthCare (HHC) Department of Health Equity, Diversity and Inclusion (DEI). Michel, who grew up in Waterbury, earned her bachelor's degree at Duke



University, where she first learned about the social determinants of health, lighting her passion for health equity. She holds a Master of Public Health from the University of Michigan, where she studied the intersections of health behavior, innovation and health equity. She joined HHC in January 2021.

The COVID-19 pandemic cast a harsh glare on health inequities in the United States: Black and Hispanic people are three times more likely to die from the virus and significantly less likely to get vaccinated.

Elisabeth Michel is among a small army leading efforts at HHC to ensure the vaccine — and all aspects of high-quality healthcare — are available to everybody who wants and needs it.

What has COVID-19 taught us about health equity in the U.S.?

EM: People of color do not contract COVID-19 at higher rates, but they are more likely to die from it. COVID-19 brought to light vulnerabilities in every sphere of life. Think of people who can take time off or work remotely vs. people who must work in person. Think of kids who can learn at home vs. kids who don't have resources for homeschooling. Students who relied on getting breakfast and lunch from school are now facing greater food insecurity. And, of course, inequities

in healthcare. We can no longer ignore these dynamics and their impact on health outcomes.

Why might communities of color be hesitant to get the COVID-19 vaccine?

EM: The history of medical and systemic racism understandably bred mistrust. There's the Tuskegee experiments in the 1930s, when scientists denied Black men treatment for syphilis, and the case of Henrietta Lacks, a Black woman whose cells were used for cancer research without permission or compensation. Even today there remain countless examples of people of color being overlooked in healthcare settings, not being listened to, and experiencing bias which directly leads to preventable deaths. Addressing systemic racism and building trust is key for increasing confidence in the COVID-19 vaccines.

With this background, how might communities of color think about the vaccine?

EM: It's important to seek quality information from trusted sources. It's also important to be clear about risks. On one hand, communities of color are dying at three times the rate of white communities, a number we can't afford to ignore. On the other hand, uncertainty remains about the long-term effects of the vaccine. We don't know what will happen five years from now. But we do know these vaccines, developed from strong science, are slowing the spread of a deadly disease, and are the channel of return to a more normal life.

Are there any silver linings from the COVID-19 pandemic?

EM: The world shut down, and many people realized that health inequities and injustice must be addressed, so we all can achieve our best lives. Society is catching up to what public health has been saying for decades.



What are you most looking forward to once COVID-19 restrictions ease?

Taking a vacation

48%

Seeing family and friends

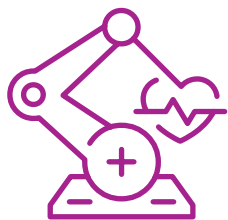
37%

Going to a concert or bar

9%

Eating in a restaurant

6%



Robots

Peer into a random operating room, in any hospital across Hartford HealthCare, and you might see the surgeon seated in a corner, peering into a device while hands maneuver levers. Nearby, arms descending from above conduct a procedure on a patient. Robotic technology — which was first used at Hartford Hospital 20 years ago by Dr. Joseph Wagner — advanced surgery greatly and our teams have embraced it. While the surgeon still makes the moves, the machines augment human abilities, moving in ways surgeon wrists and hands cannot, improving outcomes and reducing risk of infection and blood loss.

How many surgical robots are in use across Hartford HealthCare? Here's a quick look:

Backus Hospital:

- 1 Intuitive Surgical da Vinci robot
- 1 Stryker RIO/Mako robot
- 1 Globus Excelsius GPS robot

Charlotte Hungerford Hospital:

- 1 Globus Excelsius robot

Hartford Hospital:

- 6 Intuitive Surgical da Vinci robots
- 3 Mazor robots
- 4 Stryker RIO/Mako robots

Hospital of Central Connecticut:

- 1 Intuitive Surgical da Vinci robot
- 1 Stryker RIO/ Mako robot
- 1 Globus Excelsius robot

MidState Medical Center:

- 1 Intuitive Surgical da Vinci robots
- 4 Stryker RIO/Mako robots
- 1 Mazor robot

St. Vincent's Medical Center:

- 2 Intuitive Surgical da Vinci XI robots
- 1 Stryker RIO/Mako robot
- 1 Globus Excelsius GPS robot

Windham Hospital:

- 2 Stryker RIO/Mako robots
- 1 Globus Excelsius GPS robot



BY THE NUMBERS



Surgeons get their jam on

By Elissa Bass

**Musick has Charms to sooth a savage Breast,
To soften Rocks, or bend a knotted Oak.**
~ William Congreve, *The Mourning Bride*, 1697

The relationship between music and medicine dates back to 4000 BC, when “hallelujah to the healer” was played as partial payment for medicinal services. And, while these days no one is offering their Spotify playlist to their doctor to cover a bill, music is still prevalent, especially in the operating room.

In fact, a 2014 survey of surgeons at the University Hospital of Wales found that tunes are played 62 to 72 percent of the time in the OR, with the playlist most often chosen by the lead surgeon.

Around 80 percent of surgical teams reported

that music benefits communication among team members, reduces anxiety levels and improves efficiency. Music also appears to enhance surgical performance by increasing task focus, particularly among surgeons who listen to music regularly, the survey showed.

We were curious about Hartford HealthCare’s surgical playlists, so we asked doctors from around the system what they liked to listen to while operating.

Grooving

Research shows that listening to tunes you love releases all the right chemicals to fight off stress and depression. Help us create a feel-good playlist by emailing a favorite song to susan.mcdonald@hhchealth.org. We’ll share it in the next issue of *Moments*.

Dr. William McGeehin

General surgeon, Charlotte Hungerford Hospital

The right music at the right volume has a soothing, stabilizing and calming effect over the room. I prefer country music to be playing while I operate.

Dr. Miriam Zargar-Hakim

Orthopedic surgeon, Charlotte Hungerford Hospital

The OR staff know to put Michael Jackson on for me. I love to listen to Michael Jackson because of his immense God-given talent, and it keeps me calm.

Dr. David Coletti, right

General surgeon, president of the medical staff, Backus Hospital

Dave Matthews Band or U2 are my preferred performers, but I also take requests from the OR nursing staff.

Dr. Imran Siddiqui

Oncology surgeon, St. Vincent’s Medical Center

I rarely listen to stuff in the OR, but if I do it’s usually classical or opera – Indian classical or Andrea Bocelli and Luciano Pavarotti.





Dr. Chike Chukwumah, above

General and hernia surgeon, Hartford Hospital

I listen to Afrobeat, a genre that is a combination of West African musical styles like Fuji music and highlife with American funk and jazz influences. My favorite artists are Burna Boy, Wizkid, Davido and P-square.

Dr. Brian Coyle

Vascular surgeon, MidState Medical Center

I start every carotid surgery with David Gray's "Caroline," a tradition I carry on from my mentor who played it during my fellowship. Other artists on my playlist include: Crosby, Stills and Nash; Fleetwood Mac; Bruce Springsteen; Van Morrison; The Eagles; Dave Matthews Band; Jimmy Buffett; Journey; Tom Petty; and The Grateful Dead.

Dr. Tamara Myers

*Associate chief of surgery, East Region
General surgeon, Windham Hospital*

My playlist includes classic rock from the 70s, 80s and 90s. I like anything by Led Zeppelin, my favorite band; Queen; Guns N' Roses; Ozzy Osbourne; AC/DC; Aerosmith; Van Halen; and Deep Purple. For difficult cases, I add Metallica ("Enter Sandman"); Rage Against the Machine;

Scorpions ("Rock you Like A Hurricane"); Boston; Foreigner; Pink Floyd ("Wish You Were Here"); and Heart ("Crazy on You"). From the 80s, I listen to David Bowie, Duran Duran, U2 and George Michael. My 70s favorites are The Bee Gees, Elton John, Simon and Garfunkel and Linda Ronstadt. I also throw in some Fugees, Bob Marley and Run DMC.

Dr. Sergio Rafael Casillas-Romero

Chief, general surgery, Backus Hospital

The Bee Gees. No more needs be said.



Dr. Camelia Lawrence, above

*Director of breast surgery, The Hospital of
Central Connecticut and MidState Medical
Center*

I usually ask the patient before surgery, and then play their favorite song as they are drifting off during anesthesia. My personal playlist includes reggae, R&B soul, country and gospel, and Bob Marley, Kenny G, Aaron Neville, Frank Sinatra, Ann Nesby, Shirley Caesar, Patti LaBelle and the Dixie Chicks. Two favorite songs are "Even if My Heart Would Break" by Kenny G and "Fight Song" by Rachel Platten.



Backus nurse helps OR clear the smoke

After reading in professional journals about the need to reduce surgical smoke for staff and patient health, Backus Hospital operating room nurse Ann Hanson decided to take action.

The project she launched earned the Association of periOperative Registered Nurses' (AORN) highest rating through its Go Clear Award™ program.

Surgical smoke — a byproduct of energy-generating devices like electrosurgery units, lasers, ultrasonic devices, powered surgical instruments — can carry microscopic levels of toxic gases, viruses, cells and blood.

AORN's program recognizes facilities working to ensure a smoke-free environment. More than 500 surgical units nationwide participate.

"I'm so proud of the team for putting in the work to receive such an important recognition," said East Region Vice President of Patient Care Services Laura Currie. "Their ongoing commitment to quality and safety is what helps patients choose Backus for their care."

In 2019, Hanson brought the proposal to her supervisors, who embraced it. A volunteer group



Photo by Jeff Evans

Hanson's efforts, along with others in the OR including, back row left to right, Sheena Morgan, CST; Kerri Scarchilli, RN, and Maria Amaral, RN, helped the hospital receive the highest rating from the Association of periOperative Registered Nurses (AORN) in its Go Clear Award program.

coordinated presentations for nurses, physicians and surgical technologists on surgical smoke hazards and how to reduce it.

Equipment such as smoke evacuation units were purchased, and physicians tested different cauterizing tools to find the best for performance and low smoke. Cauterization, Hanson estimated, is used in 85 percent of procedures in Backus' 12 ORs and two C-section rooms.

"I'm very happy with the result," she said. "The system has been fully implemented, all the staff are educated and we've had buy-in from physicians. We are now at 90- to 100-percent levels of smoke evacuation."

—Elissa Bass

Winsted HealthCenter eyed as catalyst for growth

"New health center seen as driving a rebirth of Winsted's Main Street" read the local paper's headline on January 22, 2021, capturing a very exciting moment many years in the planning with the opening of Hartford HealthCare's (HHC) new, state-of-the-art, health center at the corner of routes 8 and 44.

Local officials hail the new facility as a psychological and tangible boost for Winsted's economy and patients quickly reacted to having expert care closer to home. Donna, the first to experience care at the new HHC Rehabilitation Network's outpatient clinic within the HealthCenter, called it "beautiful and spacious."

The nearly 30,000-square foot building is home to many of services formerly housed across town at Winsted Health Center, formerly Litchfield County Hospital. The new facility features seven-

day emergency department, mammography, physical and occupational therapy, blood draw, CT scan, cardiac rehabilitation, primary care and specialty care in podiatry, cardiology, surgery, GI and OB/GYN.

The three-level facility stands alongside the Northwestern Connecticut Community College Joyner Health Science Center and the proximity presents collaborative healthcare education opportunities with the college.

Construction proved unusually challenging for Avon-based CASLE Corporation. The site is located on a ridge with rising elevations so construction required extensive digging, screening and replacing fill, which was compacted and vibration tested to ensure the foundation remains safe and solid. Hundreds of truckloads of clean fill were also brought in to level the area and construct a 30-foot retaining wall for an adjacent LIFE STAR helipad.

—Tim Lebouthillier

IOL joins NIH schizophrenia in young adults study



Joining an international study to better understand schizophrenia in high-risk young adults puts the Institute of Living (IOL) “on the map regarding a critical area in psychiatry,” according to Dr. Godfrey Pearlson, top left, co-principal investigator of the IOL team.



He and Dr. Jimmy Choi, bottom left, assembled colleagues from the IOL's Olin Neuropsychiatry Research Center and Advanced Services for Adolescents with Psychosis

Program to join the \$52-million, five-year study funded by the National Institutes of Health (NIH) to develop a Psychosis Risk Outcomes Network (ProNET) while characterizing biomarkers associated with psychosis risk.

They will test whether variations in these biomarkers can predict those most likely to benefit from specific treatments.

“Similar to finding if people are at increased risk for heart disease, we want to identify and treat

these individuals successfully before they become manifestly sick. Identifying them when treatment is more straightforward and the condition less distressing is critical,” Dr. Pearlson said.

The IOL team includes co-investigators Dr. Michael Stevens; Patricia Graham, LMSW; and Dr. Jennifer Zajac.

Globally, 3.2 to 7 percent of youth have early symptoms of schizophrenia or psychosis. Some develop other mental health conditions like depression or bipolar disorder, while others manage symptoms alone or with professional help.

ProNet researchers will recruit more than 1,200 youth and mine existing patient data for schizophrenia biomarkers. They will also examine participants' cognitive ability, family history, education, psychological trauma, environmental exposure to toxins and social involvement.

The goals, Dr. Choi said, are to identify which biomarker or combination shows before a problem develops, and to determine if treating or eliminating it prevents schizophrenia.

“(We hope) to identify the biomarker for very early treatment — genetic therapy, reduction of family stress, normalization of abnormal brain electrophysiology, etc. — that may prevent schizophrenia,” he said.

Applying treatments will be studied after the five-year grant.

—Susan McDonald

Infusion Center brings care closer to home

With more than 3,000 square feet of space, a new patient center opened on the sixth floor of the main building at Charlotte Hungerford Hospital to provide infusion services under the direction of the Hartford HealthCare Cancer Institute.

The center is supported by the presence of three new medical oncology providers in the area who join with Charlotte Hungerford's longstanding radiation therapy program and the region's first certified breast surgeon to comprise the first phase of the Institute's plan to expand advanced and comprehensive cancer services in the area.

—Tim Leboutillier



Photo by Tim Leboutillier

Privacy and comfort are key in the new Cancer Institute Infusion Center in the Northwest Region.



Center turns spine care right side up



Dr. Khalid Abbed, with scissors, joined with Hartford HealthCare leadership to formally open the Spine Wellness Center in Westport. Photo by Amy Mortensen

In a system he called “upside down,” Dr. Khalid Abbed envisioned a holistic approach to treating spine and back pain, where surgery is a possibility but not the first or only consideration.

The medical director of the Spine Wellness Center, Westport, wants to “flip the pyramid” to treat the causes of back pain while addressing issues altering patients’ quality of life.

One of the most common reasons people go to the doctor, back pain affects 80 percent of Americans at some point, Dr. Abbed noted. Depending on location and severity, pain can af-

fect work and quality of life. For some, surgery is not an option due to other health issues.

“A lot of people would just give up on life,” he said. “There was no place to send them and no way to help them. I tell them, ‘We’re here to deal with it with you.’”

As pain affects the mind and spirit, the Spine Wellness Center draws together services aimed at improving the person’s physical fitness to relieve back pain, and those addressing depression, poor sleep or dietary habits that worsen pain and quality of life.

“These are people who will be back for surgery if they don’t address all of those things,” he said. “When you ignore the mind, you’re missing so much. We delve into aspects of consciousness, mentality and spirituality.”

Services are tailored to patient needs and can include yoga or meditation classes, lessons with a nutritionist in the Center’s teaching kitchen or supervised gym workouts to help with weight loss or core strengthening.

The wellness, health and lifestyle options seamlessly integrate with the clinical expertise of Ayer Neuroscience Institute neurologists, neurosurgeons, pain specialists, health psychologists and physical therapists from the Hartford HealthCare Rehabilitation Network.

“We put it all under one roof,” Dr. Abbed said. “I hope this will become the standard of care — to get people to care about their health.”

—Susan McDonald

Photo by Christine Sniadack

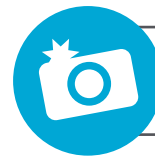


Neurology and urology services share new office space in Stamford, bringing the Ayer Neuroscience and Tallwood Urology & Kidney institutes together for patients in Fairfield County.

Fairfield broadens community presence

Residents of Fairfield County have access to an expanding array of specialty services with the opening of new space for neurology and urology providers at 623 Newfield Ave., Stamford. Seeing patients in this location are Ayer neurologists Drs. Leon Meytin, a movement disorders specialist; and Valeriya Klats, a headache specialist; and Drs. Jeffrey Ranta and Keith O’Brien, both new urologists with the Tallwood Urology & Kidney Institute. The urologists also see patients at 2260 Main St., Bridgeport.

—Anne Rondespierre-Riczu



Rehabilitation Network celebrates silver anniversary

Hartford HealthCare Rehabilitation Network was proud to celebrate its 25th anniversary in 2020. Starting in 1995 as the Eastern Rehabilitation Network, we have grown from a small organization with 10 locations to the present day where we operate, manage and provide consulting for more than 70 locations throughout Connecticut. Since we began, we have always strived to be the premier rehabilitation provider in the state and the network known for its commitment to high-quality, patient-focused outcomes. Today, the Network is comprised of more than 1,000 dedicated and compassionate professionals who are committed to providing the best care possible to everyone they see.

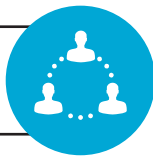
—Ken Harrison



Rehabilitation Network team members provide a variety of help. Above, left, Nicole Boudreau, OT, works with patient Josephine Poland in the Hartford Hospital ADL Skills Apartment to regain mobility and independence. Above, right, Allison Solis, PT, works with patient Charlene Tops on special therapy devices designed to strengthen her legs. Tops had been paralyzed from the waist down but has seen encouraging signs of improvement working with the staff in Mystic. Bottom right, David Brown, site supervisor in Cheshire, helps Alan Schwartz through several balance and gait exercises after neck surgery.

Photos by Chris Rakoczy





Hartford HealthCare might be where we work, but when we asked you where you find fun, relaxation or deeper meaning in your lives, we were astonished at the variety of hobbies and activities you pursue in your spare time. Here are a few of those stories, and we'll have more in upcoming issues of *Moments*. [To share your hobby, email susan.mcdonald@hhchealth.org](mailto:susan.mcdonald@hhchealth.org).

Nurse captures gold making sweet music

Laurel Strielkauskas

Obstetrics nurse, MidState Medical Center

For almost 40 years, Laurel Strielkauskas has been an obstetrics nurse at MidState Medical Center. Since 1990, she has been part of Sweet Adelines International (SAI), the largest musical educational platform for women in the world. In 2000, she helped found the Millennium Magic Chorus, one of 500 SAI choruses and 2020 Worldwide Small Chorus gold medalists.

How did you get your start singing?

I sang in school choirs and church from elementary school through college. Then I found barbershop. In the 1990s, Meriden-Wallingford Hospital (now MidState) put on a show called "Scandals" to raise money for the hospital. I joined the Sweet Adelines after seeing an article about them in our local paper. I went to their rehearsal, auditioned and have loved it ever since.

What is your favorite song to sing?

Early on, we did Queen's "Bohemian Rhapsody," our signature song. Currently, I enjoy singing "Nothing

Can Stop Us Now" from Broadway's "Roar of the Greasepaint - Smell of the Crowd." It really speaks to our chorus' drive and it's fun to sing.

Which musicians inspire you?

I have an eclectic love of music. The Carpenters were an early influence. I sing bass in chorus and Karen Carpenter's velvety bass voice always inspired me. The harmonies from the early days of The Beach Boys and The Osmonds also caught my ear. Today, I admire artists from many genres. For a capella, there's a group called Voctave. Check them out!

What do you like most about singing with Sweet Adelines?

The camaraderie and friendship is immeasurable. There are songs all Sweet Adelines know, so at any convention, you can sing familiar songs with singers from around the world. Being part of SAI is more than just a hobby ... it's a kinship of life and sharing the love of music.

Is it a family affair?

My two daughters have competed at events with me. The oldest, Stacy, who works at MidState as a delivery room tech, is currently part of the Millennium Magic Chorus.

—Christer Osterling



Obstetrics nurse Laurel Strielkauskas is a founding member of the award-winning Millennium Magic Chorus, part of Sweet Adelines International.
Photo submitted

Piano gives technologist ‘release’

Jordan Schweidenback
*Nuclear medicine technologist,
Hartford Hospital*

While in Hartford Hospital’s Education and Resource Center (ERC), photographer Chris Rakoczy heard live music emanating down the hall and discovered Jordan Schweidenback tickling the ivories on the piano. We had a chance to catch up with Jordan, a nuclear medicine technologist in radiology.

How long have you been playing the piano?

I did not begin playing the piano until I was 15 years old, so I’ve been playing for 14 years.

How did you get started?

Most musicians learn piano before moving onto another instrument. I was backwards. I began playing guitar at eight years old and fell in love. When I was 15, I was bored and decided to play piano since it is so versatile — you can play as an accompaniment to other instruments/vocals or solo.

Do you have a favorite genre or style?

I was classically trained in piano so my favorite genre is classical. I enjoy the Romantic period so composers such as Tchaikovsky and Chopin.

How often do you play?

I go through phases — sometimes I play every day for months, sometimes I do not play for months. Playing more often is certainly a goal. The picture was taken when I went to get fit tested (for personal protective equipment). I played in the ERC during orientation and decided it was a good time to take a moment to step back, rebalance and share some light.

What do you enjoy about playing piano?

It is transformative, cathartic and releasing. At the end of a stressful day, I will sometimes go home and play for hours, getting lost in it.

Are there parallels between your job and hobby?

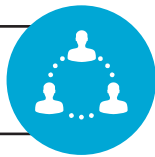
There are many parallels between my job as a healthcare clinician and playing piano. The first is the hard work and training it takes to perfect the practice, but also how the practice is never complete and you are always learning. Secondly, piano requires patience and hard work, similar to caring for others; discipline and dedication are required to care for others at the highest level.

—Brenda Kestenbaum



Jordan Schweidenback takes a moment to lighten spirits before Christmas by playing a seasonal tune on the piano in the Education and Resources Center at Hartford Hospital.

Photo by Chris Rakoczy



Off-duty, nurse enjoys fiddlin' around

MJ Pharmer

Surgical nurse, Windham Hospital

MJ Pharmer spends her work days working as a surgical nurse in the Windham Hospital operating rooms. The work can be stressful and precise, but Pharmer found a way to let loose in her off time with a fiddle in one hand and a bow in the other.

How long have you been playing?

I started playing fiddle in 2013. I was driving and saw a sign for a six-week, free class and thought why not. I love all kinds of music but never played any instrument before. I decided I had nothing to lose.

The class was given by the Old Fiddlers Club of Rhode Island, America's longest continuously running fiddle club. I was probably the only one who never played a musical instrument before. Not only did I have to learn about the fiddle and bow, I also had to learn to read sheet music.

And after the class?

I found a fiddle teacher and started weekly lessons. I also found weekly jam sessions to join. This one class ended up changing my life. I made a new circle of friends and have new appreciation for all that goes into making music. Practicing becomes a welcome escape from the day-to-day routine. When I fiddle, that's the only thing on my mind.

Where do you play the fiddle?

Weekly lessons gave way to Monday night jams and I joined The Quiet Corner Fiddlers. Before COVID-19 we played at local restaurants and at farmers markets, private parties and other community events in Connecticut and Rhode Island, including the Woodstock and Brooklyn fairs with the Old Fiddlers Club of Rhode Island.

What are your favorite types of music to play?

We play all types of fiddle music including waltzes, Yiddish fiddle, Irish, Finnish, as well as traditional American. My favorites are tunes in off keys as found in Klezmer.

—Emily Perkins

MJ Pharmer, a surgical nurse at Windham Hospital, plays with her group at a hospital fundraiser.

Photo by Jeff Evans



Two-wheeling across Big Sky country — and elsewhere

The Rev. Mary Horan

Director of spiritual care, East Region

As East Region director of spiritual care, the Rev. Mary C. Horan, MDiv/BCC, spends her days bringing comfort to patients, families and employees. She finds personal release on two wheels, peddling her bicycle alone or with friends. We asked her what she loves about cycling.

Would you describe yourself as an avid cyclist?

Given the circles I ride in, where plenty of people do a lot more than I do, no. But, if I tell you I have three road bikes and two mountain bikes and that sometimes I ride 250 miles a week — 3,000 miles a year — then yes.

What's the attraction?

I love going places on my bike. It's a way to be out in the world and really see the country. When you're on your bike, you're up close to where you are and where you are going. It's very meditative in a way, because you're out in nature. And, you meet the most interesting people on cycling adventures.

Where have you traveled?

My first trip 25 years ago, I wanted to see Oregon, so I signed up for Cycle Oregon and rode from the

Idaho border to the coast. I did the first AIDS ride in Texas, 750 miles. Last year for my 60th birthday, I cycled in Montana — 400 miles in five days — to benefit Yellowstone National Park. I've ridden in France and Belgium where they have the classic races. I was at the World Championships in Ontario and riding the circuit one day before the race started. We were climbing this hill and there were all these photographers with giant cameras taking pictures. They thought we were racers!

Any spectacular crashes?

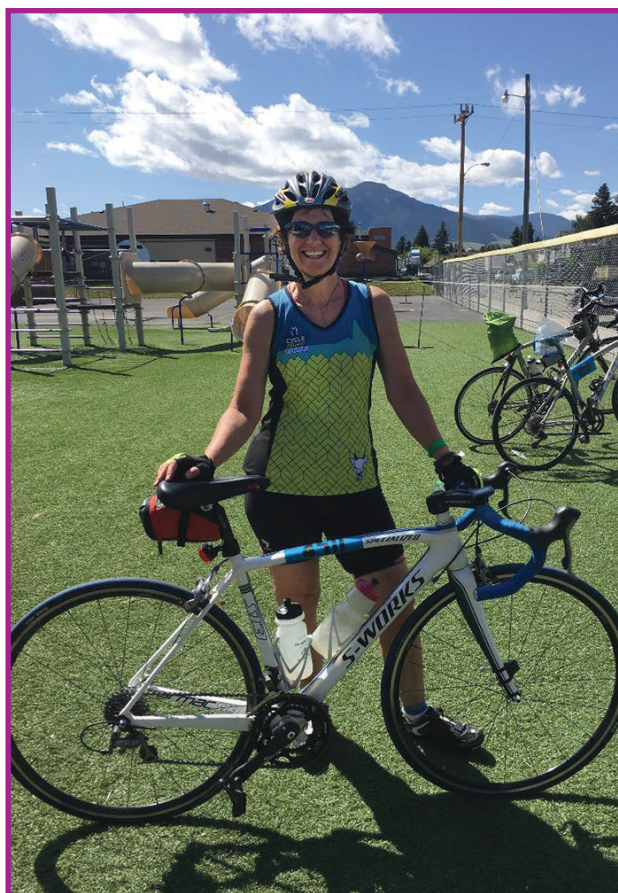
No, but I have an embarrassing one. I was training for the AIDS ride and a friend invited me to join his Sunday morning ride. It's all men and they ride fast. We'd gone about 10 miles, came to an intersection and stopped. All of a sudden, I forgot how to clip out of my pedals and I fell over in the middle of the road. They were all racers and I was lying there thinking, "Oh my God. This is so embarrassing." Many of them became dear friends and training partners, but, what a start!

—Elissa Bass



The Rev. Mary Horan takes a break from her bicycling trip through parts of Montana.

Submitted photos





The arrival of the Johnson & Johnson COVID-19 vaccine at the loading dock of Hartford Hospital.

Photo by Chris Rakoczy

Giving the state its shot in the arm

By Susan McDonald

With Hartford HealthCare's team of experts figuring out the multi-layered logistics behind the statewide COVID-19 vaccine rollout, Eric Arlia said, "I feel like we could tackle the world!"

Arlia, senior director of pharmacy for Hartford HealthCare (HHC) and one of the operations leads behind vaccine distribution, drew heavily on the space planners, information technology specialists and physicians to plan one of the nation's most effective vaccine distribution plans. But, a master's in business administration and penchant for "seeing things that might need to be addressed in the future" hasn't hurt either.


have vaccine ready by the end of the year.

"We started planning and ordering more freezers," he said, referring to the specialty freezers needed to store vaccine at extremely low temperatures. "We have a big group of people working on this."


The self-proclaimed "press secretary" due to regular appearances before local media to discuss vaccine, Arlia said his role is heavily focused on logistics.

"My strength has always been in operations. I think I'm a good planner," he noted, adding that the team drew heavily on colleagues with Lean and project management skills to "get organized around processes and create standard work."

Keenly focused on safety, the team hosts two



Don't miss your shot!
To schedule a COVID-19 shot, go to
HartfordHealthCare.org/Vaccine.



"I find this tremendously fulfilling," Arlia said two months into the rollout. "Yes, I'm working a lot — all of us are — but it's about doing what's needed now. When you have skills that are needed, you dig down deep and push through so we can return to normal."

"This is the most important job I'll do in my career. I'm proud of the whole team and it's a tremendous honor to represent the vaccine program."

At age 50, the veteran pharmacy leader — senior system director for three years after working for two years at the helm of Hartford Hospital's pharmacy and 11 years leading the pharmacy at Backus Hospital — said vaccine planning and execution consumes 80 to 90 percent of his time.

It started last summer in the quiet between waves one and two of the pandemic, when it became clear pharmaceutical companies would

daily huddles to touch base and share information on staff training and other logistics, as things moved quickly and plans swelled to meet objectives, Arlia said.

"Things have been growing so fast. We've become very agile to handle developments like launching mobile vaccine units. We continue to improve process and move forward," he said, referring to the opening of community mega clinics to offer mass vaccinations.

Even President Joseph Biden's aggressive plan to vaccinate millions of Americans or the potential need for a vaccine booster to protect against new virus variants didn't cause him stress.

"We can work through all the logistics if the vaccine is available," he said. "I have the confidence that this team could figure out any logistics other than manufacturing the vaccine!"



Hartford HealthCare teams vaccinated residents across the state. Right photo: Jim Koplik, regional president of Live Nation, speaks at a press conference announcing Hartford HealthCare's opening of a COVID-19 vaccine mega-clinic at XFINITY Theatre to vaccinate teachers first few days.

Photos by Chris Rakoczy



Hartford HealthCare's mobile vaccination efforts included a stop at the Open Hearth Vaccine Clinic, 150 Charter Oak Ave., Hartford.

Photo by Chris Rakoczy



At the Windham Hospital vaccine clinic, third-grade teacher Curt Hayes, top photo, gets his first vaccine from Michelle San Pedro, RN. Middle school teachers Zita Bodonyi, bottom left, and Kristen Tracy, were happy to get their vaccines.

Photos by Jeff Evans



Right photo: Keith Grant, APRN, senior system director for infection prevention, speaks at a press conference about the first batch of Moderna COVID-19 vaccine second doses.

Photos by Chris Rakoczy



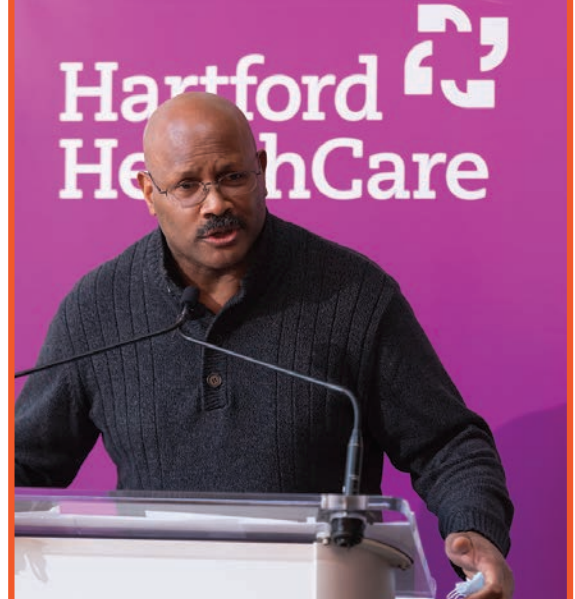
Local clergy gather to receive their first dose of COVID-19 vaccine at St. Vincent's Medical Center in Bridgeport, offering a show of faith and facts to combat vaccine hesitancy.

Photos by Rusty Kimball



Partnering with faith-based organizations such as the First Cathedral Church in Bloomfield, with representatives seen in the top and left photos, is key to getting the vaccine to all residents.

Photos by Rusty Kimball



Roberto Calcao, a Hartford resident, speaks about receiving the vaccine at a press conference announcing Hartford HealthCare's COVID-19 vaccination clinics at the Hispanic Health Council in Hartford.

Photo by Chris Rakoczy



Top left photo: The arrival of the Johnson & Johnson COVID-19 vaccine at the loading dock of Hartford Hospital. Bottom left photo: Hartford HealthCare Pharmacist Madeline Acquilano administers a dose of the Johnson & Johnson COVID-19 vaccine to Victor Rodriguez, School Safety Officer at Environmental Sciences Magnet School. Right photo: Eric Arlia, director of pharmacy, Hartford HealthCare, speaks at a press conference about the arrival of the Johnson & Johnson COVID-19 vaccine.

Photos by Chris Rakoczy


One of the state's first mega vaccine clinics opened in February at the Toyota Oakdale Theatre with Hartford HealthCare teams at the ready, right and below.

Photos by Rusty Kimball



Hartford HealthCare has partnered with the Mashantucket Pequot Tribal Nation to launch a COVID-19 mega vaccine site at the Foxwoods Resort Casino, where they expect to vaccinate more than 1,000 people a day. Left photo: East Region President Donna Handley speaking at the event. Right photo: Rush Hambleton, a math and coding teacher at the Pine Point School in Stonington, is one of a thousand teachers from the region who were able to get their first COVID-19 vaccine.

Photos by Jeff Evans



Kelli Odenwaelder, left, clinical manager of maternity at Charlotte Hungerford Hospital, chats with Laurie Talbot, PCT, center, and Carey Hock, RN, as part of her weekly check-ins with colleagues.

Photo by Tim Lebouthillier

Walking the walk on colleague wellness

By Susan McDonald

Last summer, as the frenzy of COVID-19's first wave waned but anxiety remained, Teresa Fuller focused on her colleagues.

Fuller, vice president of patient care services in Hartford HealthCare's (HHC) Northwest Region and co-leader of the Culture of Wellness Subcommittee, realized frontline teams, reeling from the spring, "needed extra support."

"We want to be there for people," Fuller said of the Nursing Peer Support program she helped develop with Gail Nelson, director of nursing quality for Hartford Hospital, connecting people in need with understanding colleagues.

Although launched mid-pandemic, it represents broader efforts to cultivate an environment that supports wellness, based on the system's commitment to its colleagues. HHC launched its Wellness Department in October 2019 with the hiring of Vice President and Chief Wellness Officer Dr. Sharon Kiely, one of the few nationwide.

The inaugural Wellness Council meeting convened days before the COVID-19 lockdown and members quickly collaborated to support colleagues.

"Today, more than 120 volunteers across the system are actively involved in colleague wellness," Dr. Kiely said. "Our vision is to create an exceptional healthcare workplace by advancing

Continued on page 26

Tools help build a culture of wellness

In response to the unprecedented needs of our colleagues, Hartford HealthCare (HHC) and its Wellness Department launched many initiatives focused on leadership, teamwork and support to foster a culture of wellness and well-being.

SUPPORT

1. Colleague Support Center (860.972.2400). Available 24/7, this line addresses emotional support and such practical needs as childcare, housing and financial help through the Colleague Assistance Fund.

“The needs of our colleagues inform what the Support Center provides,” explained Vice President and Chief Wellness Officer Dr. Sharon Kiely.

2. Health and wellness intranet resource page containing tips, tools, strategies and resources for mind, body and spirit.
<https://intranet.hartfordhealthcare.org/coronavirus>

3. Peer support. HHC launched a Physician and Advanced Practitioner Peer Support Program in October 2019 to encourage providers to reach out to each other for support and reduce the stigma surrounding mental health. In August 2020, efforts expanded with Nursing Peer Support. More than 40 nursing leaders and 65 nurses were initially trained through this effort, which the Wellness Department hopes to expand to all colleagues in 2021.

4. Support tools. Wellness champions identified needs in the colleague engagement survey and day-to-day huddle conversations to create tools. The End of Day Checklist, for example, helps colleagues decompress when leaving work.

LEADERSHIP

5. Wellness Resiliency pilot. This pilot trains leaders in personal and organizational resilience based on the tenets of psychological first aid. The four-hour training is available to anyone on HealthStream.

“The goal is to drive empathy and listening skills, framed in our H3W behaviors,” Dr. Kiely said. “You can’t be in the moment if you yourself are hanging on for dear life.”

Kelli Odenwaelder — a 23-year nurse and clinical manager of maternity at Charlotte Hungerford Hospital, one pilot site — welcomes the culture change.

She reaches out to three colleagues weekly, asking how they’re doing. Other efforts – a weight loss challenge and resilience journaling – came from her team.

“It’s awesome for me as a manager. It’s opened my eyes to someone’s needs. They’re juggling so much with work, childcare, distance learning. We talk about these things every day at huddle,” Odenwaelder said, adding that happy staff translates into improved patient care.

6. Consultation. Help is available to leaders having trouble at work or personally.

TEAMWORK

7. Wellness Wednesday webinars. Addressing such topics as nutrition, exercise and stress relief, these are free to colleagues. Virtual concerts demonstrate the soothing power of music. At the height of the pandemic, webinars ran three times a week. All are available at any time on the intranet.

8. Social Media #SelfcareSundays. These bring reminders, tips and tools for colleagues to practice self-care. Follow @hartford_healthcare on Instagram and @HartfordHealthCare on Facebook.

Walking the walk on colleague wellness *Continued from page 24*

the well-being of all who care for others.”

That vision served the system well during the pandemic.

“We had to be agile and meet constantly changing needs that we couldn’t have imagined before COVID-19,” Dr. Kiely said, giving such examples as identifying alternative housing, supporting childcare needs and providing emotional support.

“Healthcare workers provide care for everyone else,” explained Wellness Director Dr. Jennifer Ferrand. “COVID-19 gave us an opportunity to emphasize the importance of decompression and the benefits of self-care in order to promote safety, resilience and optimal mental health.”

The Wellness Department is focused on building resilience as a critical strategy both during the pandemic and beyond.

“Resilience is the ability to experience stress, recharge and come back perhaps stronger than before. It is an active process, like building muscle,” Dr. Kiely said. “We focused on how to keep our colleagues strong, providing unparalleled services in the industry.”

This was no small feat. At the height of the pandemic’s first wave, a team led by Dr. Kevin

Young surveyed HHC colleagues about their psychological experiences.

“Of the almost 8,500 survey participants, most were concerned about work-life balance and well-being, reporting symptoms like stress, insomnia and depression,” Dr. Kiely noted.

It also became clear that there was an opportunity to create an environment where colleagues feel safe asking for help. Wellness Manager Hillary Landry said many of the group’s efforts promote the idea that asking for help is a sign of strength.

“We are creating the feeling that, in order to provide for others, you have to take care of yourself,” she explained.

It seems to be working, as Fuller found.

“We’re trying to change the culture. They are all people who put others’ needs before their own and don’t think they need support,” she said. “We’ll get there. It will take continuing to talk about it. It’s about what you need to get through it.”



Dr. Sharon Kiely

Know yourself and your needs

Healthcare workers know the ways to uncover and soothe fear, stress and anxiety in patients, families and customers.

“Leveraging this innate caring skill to support our own growth is our opportunity during the COVID-19 pandemic,” said Dr. Sharon Kiley, Hartford HealthCare’s chief wellness officer. “Our HHC Leadership Behaviors make this much easier — be in the moment, be authentic and be humanistic.”

Everyone experiences stress differently, added Dr. Jennifer Ferrand, wellness director, but for most, it is physically and mentally draining.

“We can redefine self-care so it doesn’t feel selfish or frivolous, so we are more inclined to seek help and use resources available right here,” Dr. Ferrand explained. “It’s about knowing yourself.”

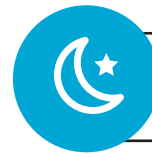
Essential ingredients for self-care include recovery and repair when we’re not working, and improving our ability to separate work and home

lives. The End of Day Checklist can help by making us aware of our thoughts and feelings at the end of the work day, helping us reflect on the day’s accomplishments and choose what to do next.

The Wellness Department also offers training and consult options to support leaders as they optimize the performance and resilience of their teams. Hoping to ultimately develop a Wellness Center of Excellence would include focusing on culture, workplace safety and efficiency, personal resilience and mental health.

“We have all the components here,” Dr. Ferrand said. “We can be a model for the country.”





Personal experience equals support for RSS

By Robin Stanley

When the world screeched to a halt in March 2020 due to the pandemic, Jonathan Steinen was starting a new job as a second-shift Recovery Support Specialist (RSS) in the Hartford Hospital Emergency Department Purple Pod.

He had just graduated from the Behavioral Health Network's (BHN) Recovery Leadership Academy, augmenting personal experience with depression and substance use disorder to help others seeking help.

His job is to assist patients in their recovery from psychiatric or substance use disorders, a struggle he understands well.

"I tell people many pivotal moments of my recovery where I changed behaviors were almost always because somebody else in recovery took the time to show me what they did," Steinen said.

Many are surprised to learn he was once a Purple Pod patient.

"We can have a conversation that's more meaningful because I get what it's like to be in their shoes. I think the patients very much respect it," Steinen said.

Working second shift has pros and cons. It is often difficult to quickly get patients placed in programs or connected to services after regular business hours.

"A lot of effort goes into coaching patients on how to follow up and connect with care after discharge," he said. "The pandemic has resulted in long waitlists for shelters and rehousing services."

He's also seen a steady flow of patients coming for substance abuse and intoxication, including those using the department often.

"It is a challenging population to work with, and failure to connect patients with adequate services is frustrating and heartbreaking, especially when the patient isn't willing to engage in helping themselves," Steinen said. "I try not to give up on anybody because there was a period in my life when I wasn't catching on to the whole recovery thing and was in and out of programs,"

Despite being a newcomer, Steinen formed incredible bonds with colleagues.

"It's a smaller staff on second shift, so it's more intimate and I think there's that need to have each other's back to keep it a safe environment for everybody," he said.



Even in the middle of the night, people coming into the Hartford Hospital Emergency Department wanting help for substance use disorders can find a friendly, supportive ally in Jonathan Steinen.

Photo by Chris Rakoczy



Nurse navigators

Guiding patients — Magellan-like — through unfamiliar waters

By Elissa Bass

Patient care is like plotting intricate voyages — twists, turns, experts with opinions and paperwork needed to successfully complete the journey.

Patient navigators were created by Harlem Hospital's oncology team in the 1990s to steer the ship and reduce barriers to screening. In five years, they increased access and boosted survival rates. Navigation expanded to the entire cancer journey — screening, diagnosis, treatment and survivorship — and is now common practice in healthcare, including at Hartford HealthCare (HHC).

Other specialties adopted the approach. Here, nurse navigators are in place across the cancer treatment spectrum, and in digestive health, orthopedics and palliative care. Wherever the practice is implemented, better patient outcomes and improved satisfaction are reported.

"Healthcare too often forgets to have patients at the center of care," said Dr. Edward Hannoush with HHC's Digestive Health Center.

"We see patients, provide care and advice, and it is for the patient to reconcile the management of recommendations of different providers. Navigators provide the coordination necessary to put patients in the center," Dr. Hannoush said. "They are the glue that brings different providers together to make sure there is a smooth transition between tests and providers. Navigators reduce patient anxiety and improve compliance and quality of care. This is how care should be delivered when multidisciplinary approaches are necessary."

Kristen Papanos, RN, is clinical program manager and swallowing and reflux nurse navigator at the Digestive Health Center.

“A lot of patients come to us from a surgeon. They need tests and consults through multiple departments at multiple sites. They get all this information and it can quickly become overwhelming,” she said. “I follow up, make their appointments, make sure they understand prep instructions, get them their results and make sure they understand them.”

“They don’t feel well and have a lot of anxiety already. I am an extra layer of support.”

Jessica Brayman of Oakdale understands the anxiety. After suffering with sciatic pain from a discectomy, she was referred to the Hartford HealthCare Acute Spine Program, and nurse navigator Linda Brozyna, RN.

“Once I got the referral, it was like, boom, boom, boom,” she said. “Linda got me in to see (pain specialist Dr. Adrian) Hamburger within days, and I got a treatment plan and physical therapy. She is very responsive, well organized and follows up with me regularly.”

The palliative care journey can also benefit from guidance and Heather Massicotte, RN, MSN, is the East Region’s first palliative care nurse navigator.

“Heather can identify patients who can benefit from our service, and then keeps track of them when they go home or if they come back to the hospital. She helps identify support systems, and works with us to identify decisions for future care,” said Dr. Jennifer Telford of the palliative care program.

Talking about “goals of care” with patients is one of the harder parts, Massicotte noted, saying, “Patients and families do better when they know what to expect, and talking through how they want to be cared for as things get worse is imperative.”

This is why the nurse navigator concept migrated to oncology to other specialties, said Amy Beer, Cancer Institute director of access and navigation.

“When you learn a diagnosis, everything can seem so overwhelming,” she said. “Patients find themselves in a vulnerable place where they need to move forward but are overwhelmed. The navigator has a high level of clinical and organizational knowledge. They know the doctors, services and community resources. They take the burden off the patient, and help keep them focused on next steps.”



Heather Massicotte, RN, MSN, a palliative care nurse navigator, can often be found at a patient’s bedside discussing options of care with the patient and their family members.



Photos by Jeff Evans



The Soul of Rushford: Tim Washington

By John Tejada

If you ask Tim Washington how he got to Rushford, he'll tell you it was on a whim.

"I started out working in a group home affiliated with Rushford, taking care of kids. A gentleman said I should try Rushford," said the recovery support specialist (RSS). "He said, 'You would be good at it because you are real good with the kids.' So I filled out an application, and, after the interview, they said 'Mr. Washington, we would like to accept you to do transportation.' This was 16 years ago."

Washington stayed in transportation for two years before moving to a position helping clients find jobs, look for apartments and manage their lives. He eventually was promoted to manager of transportation before he finally found his true calling, homeless outreach.

"I was in the woods, in abandoned buildings, the back of buildings, all over the place looking for clients. Most of the time, I was making sure clients had a place to sleep," he said

He flourished, making a name for himself in the community and organization.

"Tim does whatever he can to keep Rushford going in the right direction through individual connections with staff and patients," says Patricia Rehmer, the senior vice president of the Behavioral Health Network.

For Washington, making connections with patients is easy. In recovery, he's used to being on the other side. After abusing alcohol in the early 80s, he graduated to cocaine and eventually a crack addiction.

"I stole, I climbed through windows of homes to get high, I lied to my kids. I stole my son's video games, stealing one game seven times and buying it back every payday. I went to work every single day. Had to make sure I paid for my

habit. That's what addicts do," he said.

The initial trip to rehab didn't work. After 28 days, Washington returned to the streets and got high that very night. A second stint didn't yield much better results.

"When I went into rehab for the third time, I weighed 140 pounds," he remembered. "I had to learn. I gained 65 pounds when I got out. Me and my wife got a place with our kids, and that was it. I wasn't playing that game no more. I started going to meetings, telling on myself when I felt that way. I started doing what I needed to do to get myself from that stinking thinking."

Washington has been sober 30 years, and shares his story to help clients in recovery. It's a tool Rehmer called invaluable.

"We have proven the outcomes are better when we have people with lived experience involved in care. What is more powerful than having someone with lived experience say, 'Yeah, I actually have been there, let me tell you what it's like, what it's not like. Look where I am now - I am working,'" she said.

"He is the epitome of the soul of Rushford — you come in, it doesn't matter who you are, we accept you whether you have substance use disorder or serious psychiatric disorder, and we will meet you where you're at."

For Rushford clients, Washington is a symbol of hope that things can get better and lives can change. Clients give him the same hope in return.

"The clients are the most important thing here at Rushford. They teach me to stay sober, teach me that there is life on the outside," he said. "So I don't stop. I continue to reach out. It keeps me fresh every day, talking to people, reaching out, saying what I have to say. That helps me stay sober. That's why I'm still here."



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Rushford

A Hartford HealthCare Partner

Behavioral Health Service

Main Entrance

Caption.

Photo by Jeff Evans



These premises are
smoke and tobacco free



Meet Mandy Richards, HHC's first Chief Nursing Officer

By Hilary Waldman

Throughout her personal and professional pursuits, Amanda “Mandy” Richards is driven by one question: “How do I make a difference in people’s lives?”

She brought the question to the bedside when she started as a critical care nurse in her native Australia.

She packs it when she travels to Russia, where she and her husband help forgotten children in orphanages.

She thinks about it daily as she settles into her new role as Hartford HealthCare’s first chief nursing officer.

Mother of two teenagers, Richards was chief nursing officer at Allina Health, a not-for-profit system with 12 hospitals in Minnesota and western Wisconsin, when she received a message from a recruiter. Hartford HealthCare was looking for its first system-wide executive vice president and chief nursing officer.

She experienced the growing pains of creating a coordinated healthcare system from a collection of autonomous entities, and it was not the first time she would jump off the cliff for an opportunity, willing to confront uncertainty.

Richards joined Allina 15 years earlier after she, her husband, Anthony, and their then-2-year-old daughter, Emma, left Australia. After retaking certification exams, she was hired as a critical care clinical nurse specialist at an Allina hospital. Within months, she was elevated to manager.

“I’ve always been willing to step into new roles that initially make you uncomfortable, in order to continue to learn and grow,” Richards said. She was drawn to HHC by our commitment to innovation and the challenge of elevating the importance of nurses in our organization.

Among parallels between Allina and HHC, she said, is a culture of continuous improvement, which we call Lean.

She recalled an Allina hospitals grappling with a backlog of psychiatric patients in its Emergency Department (ED). To address the problem, psychiatrists, ED physicians, directors, nurses and others participated in a process improvement meeting similar to our Kaizen. They developed a solution, which spread organically to other hospitals as leaders involved in the process adopted the standard work, creating a more uniform patient experience.

Richards said that’s how she envisions spreading best practices across HHC.

“You’re trying to create a best practice to improve the quality of care we provide to patients, so why should it be different at Hartford Hospital than it is at HOCC?” she asked.

When not thinking about improving patient outcomes, Richards enjoys traveling with her family, which includes 13-year-old George. Her husband, a corporate executive, traded his suit for a clerical collar in Minnesota as an ordained Christian minister. Much of their travel involves mission work, including running summer camps where Russian orphans learn life skills and that someone cares about them.

Richard also continues to challenge herself to make a difference.

“I want to make sure in my lifetime I make the biggest impact I can on not only patients, but on the nursing profession,” she said.



CNO Mandy Richards often travels to Russia to bring light and smiles to orphans.

Photo submitted



St. Vincent's Monthly Food Distribution

In 2019, in partnership with the Connecticut Food Bank, St. Vincent's Medical Center (SVMC) launched its first Mobile Food Pantry, a monthly distribution providing free, essential and healthy food to our neighbors most in need.

When the coronavirus prompted widespread shutdowns of all but essential services in March 2020, the Mission Services team knew the most vulnerable people in our communities would be disproportionately affected by the health crisis. Many food pantries closed and the mobile pantries were greatly reduced. St. Vincent's monthly Mobile Food Pantry was also in jeopardy. The team needed to solve two problems:

- How to continue sourcing food for distribution
- How to distribute food safely during the pandemic

With funding from the SVMC Foundation, the Mobile Food Pantry was reimaged in June 2020 as a COVID-19 safe drive-through/walk-up monthly food distribution. Each family received a bag of healthy, shelf-stable food items, milk, eggs and fresh bread. Staff volunteers helped with preparation and distribution of at least 300 bags of food.

On the one-year anniversary of our partnership with Hartford HealthCare, HHC President and

CEO Jeffrey Flaks further demonstrated our health system's support of our community by making a \$50,000 donation to the Bishop Jean Williams Food Pantry. This helped fund the purchase of 120,000 pounds of food to provide more than 100,000 nutritious meals to those served by the pantry.

—Edna M. Borchetta, mission services and community outreach specialist, Fairfield Region



St. Vincent's food distribution volunteers — representing multiple departments and levels of the organization — are all smiles under their masks after safely distributing 400 bags of groceries to neighbors in need.

Photo by Laura Davidson

HHCAH team taps technology to help patients

Hartford HealthCare at Home's (HHCAH) team was among those challenged by the COVID-19 pandemic, but technology helped ensure patients received the best care possible even when the number of staff allowed to enter their homes became limited.

Efforts include:

- **Virtual visits.** HHCAH staff - nurses, nutritionists, social workers and wound specialists — utilize this format to provide needed services virtually, helping to improve outcomes and, most importantly, the patient experience.

- **Telemonitoring.** During the pandemic, the team increased patient use of telemonitoring at home. Units help them monitor vital signs and ongoing treatment plans, allowing them to continue case management care when patients have either tested positive or are suspected to be positive with COVID-19.
- **Streamlining transition from hospital to home.** In partnering with Hartford HealthCare's Care Logistics Center (CLC), HHCAH has helped dramatically reduce barriers in transitioning patients through the continuum of care. The effort began with a pilot at one acute care hospital. Within a few months, it produced a 50-percent increase in successful transitions.

—Ken Harrison



Prescribing health for diabetics

More than 400,000 Connecticut residents struggle with hunger and many must choose between food and other necessities such as housing, utilities and healthcare.

For diabetics, the struggle can be even more acute, but through a collaboration between Wholesome Wave and Hartford Hospital, healthcare providers are writing prescriptions for produce for patients with diabetes. Wholesome Communities Connecticut was implemented through work by Wholesome Wave teams and the hospital's Adult Primary Care and Diabetes Life Care clinicians. The cost of the program and produce is covered by the hospital.

Registered patients facing food insecurity and unmanaged diabetes can receive \$60 in Wholesome Rx vouchers monthly to buy fresh fruits and vegetables at C-Town and Hartford Mobile Market Stops.

Monthly vouchers can be refilled by meeting with clinicians or attending nutrition education classes. Data from all activities is collected and evaluated as part of the initiative's effort to inform, activate and measure. This, organizers believe, helps increase the diabetic patient's consumption of fruits and vegetables, which can help reduce healthcare costs and use.



Hartford Hospital and Wholesome Wave joined forces in a collaboration designed to improve the affordability of fruits and vegetables for hundreds of low-income diabetic patients.

Photo by Chris Rakoczy

This initiative builds upon Wholesome Wave's successful three-year produce incentive program, funded by the USDA in Hartford and Vermont.

About 330 people with diabetes participate, and Wholesome Wave Director of Program Partnerships David Juros hopes to expand program reach to up to 350 women and families through the Women's Ambulatory Clinic.

—Brenda Kestenbaum

Mystic rehab leads state in technology investment

The Hartford Healthcare Rehabilitation Network (HHCRN) outpatient clinic in Mystic boasts the most cutting-edge equipment in Connecticut.

Including the latest state-of-the-art rehabilitation equipment available was part of the plan to support development of strong neurologic services in the region, according to HHCRN Regional Director Anthony Falcigno.

"Having the right tools and equipment, along with highly-specialized and trained staff passionate about these types of conditions, makes for a top experience for patients," Falcigno said. "Offering PT, OT and speech patients such advanced treatment in the same location as many of their healthcare providers makes for a more coordinated, multidisciplinary team approach to their care."

The LiteGait® training device, for example, simultaneously controls patient weight bearing, posture and balance over a treadmill or ground to facilitate lower extremity movement training.

In addition, Mystic offers the region's only:

- Functional electrical stimulation bicycle, which applies small electrical pulses to paralyzed muscles to restore or improve function.
- Bioness Wireless Hand Rehabilitation System, which delivers low-level electrical stimulation to activate nerves controlling muscles in hands and forearms.
- Parkinson Voice Project's "Speak Out" program, which offers intensive speech, voice and cognitive exercises.



Kaitlyn O'Gara, PT, right, works on a balance device with patient Clayton Rogers Shaw at the Inpatient Rehabilitation Unit at Hartford Hospital.

"My first day, I actually became emotional looking at all the equipment we have here. Hartford HealthCare is so invested in this population, and provides so many amazing opportunities for people to make real gains," said Occupational Therapist Mandy Lacey.

—Elissa Bass

Night nurse turned VP reflects on career of caring

Community hospitals thrive when leaders understand the importance of strong, meaningful relationships with staff, community and partners. John Capobianco, regional vice president of operations at Charlotte Hungerford Hospital (CHH), could write a book on it.

Capobianco recently celebrated 35 years of service at CHH, beginning as a nurse working nights and weekends. He also served as nursing unit manager, director of nursing operations and



director of projects and systems for patient operations before joining the senior

John Capobianco has changed jobs but not commitment to Charlotte Hungerford Hospital.

Photo by Tim Lebouthillier

administrative team in 1998.

Over the years, he managed multiple priorities focused on his main goal — ensuring the best patient care. Priorities include maintaining CHH's financial stability, enhancing technology, improving diagnostics and expanding services. When asked, he credited others — administrators, providers and staff — with keeping CHH on track through the years.

Personally, Capobianco is most proud of developing and expanding CHH's ambulatory footprint and developing deep connections in the community, including as a founding board member of Torrington's first federal qualified health center. Whether it's repurposing a former hospital in Winsted, creating a cancer center from scratch or transforming a bank branch to a behavioral health center for children and families, he has a unique and respected talent for bringing ideas to fruition. He has also enjoyed being an active contributor and supporter of numerous non-profit community and healthcare organizations in northwest Connecticut.

What Capobianco enjoys most about his position, though, is the people.

"My best memories, past and present, all revolve around the staff and the wonderful culture we have at Charlotte. I have been privileged to work with so many dedicated caregivers and staff, who put each other, the patients and our community first," he said.

Looking back, he and CHH colleagues weathered many challenges while administering through lengthy economic downturns, unexpected natural disasters and, most recently, the COVID-19 pandemic. Through it all, Capobianco said the uncertainty of COVID stands out.

"This has really stretched us all and tested our healthcare systems and society as a whole. But to see our staff work so tirelessly and our community come together, day after day, keeps us all going. It's still a marathon, but we have quite a team of runners!" he laughed.

—Tim Lebouthillier



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

Getting a colleague back on the road

Vincent Campbell enjoys riding his bike into work — it's a chance for some exercise, to get some fresh air and enjoy his surroundings before he starts his job as an environmental services floor technician for the Inpatient Rehabilitation Unit (IRU) at Hartford Hospital.

This serene daily routine came to an abrupt end last summer, however, when he got off work one day only to discover that his bike had been stolen from the hospital grounds. On that particular day, Campbell had agreed to pick up a second shift to help cover for a colleague and was shocked to find his bike missing when it was finally time to head home.

Campbell immediately sought the help of the Safety & Security team who reviewed security footage with him to see if they could identify the culprit. But, to their chagrin, security cameras did not catch the thief in action despite showing Campbell pedaling into work and parking his bike that morning.

When Campbell told Renee Fevrier, one of the nurses he works with at the IRU, what had happened, she knew she and her team needed to come together to help one of their own. Without Campbell's knowledge, Fevrier organized a fund-raising effort and, within a few days, had collected \$900, more than enough to help purchase a new bike.

The team wanted to keep this incredible act of camaraderie a surprise for Campbell, so they

asked his supervisor to call him into an important "meeting" at which they announced the good news.

"I had no idea what the meeting was about and remember thinking 'Uh-oh, I hope I'm not in trouble,'" Campbell recalled. "I really couldn't believe that my coworkers did this for me. I was in shock!"

"It feels like we are a family here and I am so grateful to everyone who pulled together to help me. I appreciate the people I work with so much and I know that they appreciate me, too."

—Ken Harrison



After his bike was stolen, Vincent Campbell, center, was surprised by colleagues on the Hartford Hospital Inpatient Rehabilitation Unit with a special gift.

Photo submitted

Win-Win: Helping the Homeless and the Environment

A little ingenuity and a lot of compassion is all it took to turn packing material that is typically thrown away into shelter for homeless people.

It started when Melissa "Missy" White, RN, and Dianne Urban, CST — colleagues in the St. Vincent's Medical Center Operating Room and members of an OR social media page where

members share personal experiences, stories and ideas — saw a post giving instructions for turning large instrument tray wrappers used in the OR into sleeping sacks.

These wrappers are normally discarded. However, they are water resistant and, therefore, can help users retain body heat and add an extra

A little ingenuity and a lot of compassion is all it took to turn packing material that is typically thrown away into shelter for homeless people.

It started when Melissa “Missy” White, RN, and Dianne Urban, CST — colleagues in the St. Vincent’s Medical Center Operating Room and members of an OR social media page where members share personal experiences, stories and ideas — saw a post giving instructions for turning large instrument tray wrappers used in the OR into sleeping sacks.

With the DIY project in mind, White and Urban took several of the wrappers home and got right to work on their sewing machines, creating sacks that can be distributed through local community shelters or given to patients in need when they are discharged from the hospital.

Both women found this to be a wonderful way to give back to the community while helping to reduce the hospital’s carbon footprint by repurposing the instrument tray wrappers..

—Anne Rondespierre-Riczu



Melissa White sews sleepsacks for the homeless out of instrument tray wrappers that are ordinarily thrown away in the operating room.

Photo submitted

Food fuels recovery

When a client faced quarantine after being discharged from Natchaug Hospital, Mansfield, and had no way to get food, Angellina Martinez and Michele Kelly knew they needed to do something.

From that need grew the Natchaug Client Pantry, which offers bags of food and toiletries to people returning home after an inpatient unable to care for themselves immediately.

“Imagine coming home from a 10-day stay at a psychiatric inpatient unit and everything in your fridge is bad, and you don’t have anything in the cabinets,” said Kelly, clinical supervisor of Natchaug’s Adult Psychiatric Inpatient Unit. “We hope we can alleviate a little bit of those stressors.”

The pair initially paid for items by themselves but fundraising efforts have kicked in to help.

“Many people are struggling to get basic needs met, whether it’s food, healthcare or connecting to programs,” Martinez said. “If we can at least fulfill the food insecurity aspect for a few days, that might help clients feel more secure in connecting with programs.”

Food isn’t the only item in the bags. Kelly and Martinez curated recipes using the donated ingredients. From chicken cacciatore to tuna patties, they are helping clients live a healthy lifestyle even when they are no longer in their care.

They hope to expand the pantry to include children, adolescents and Backus Hospital’s inpatient unit. The goal is to create a partnership with Foodshare to sustain the pantry, allowing it to open to the public.

To donate, you can:

- Visit Amazon (<https://www.amazon.com/registries/custom/W8INAX1T5ZDN/guest-view>).
- Go to www.natchaug.org/giving and indicate the donation is for the Client Pantry.
- Drop items in the box in Natchaug’s main lobby, 189 Storrs Road, Mansfield.
- Contact Kate McNulty at Katherine.McNulty@hhchealth.org, 860.465.5909, or Sherry Smardon at Sherry.Smardon@hhchealth.org, 860.465.5910.

—Elissa Bass

Perspective on a pandemic

By Brenda Kestenbaum



During the pandemic, many struggled to understand the sickness and upheaval of everyday life that it caused. In search of perspective, I turned to Rabbi Philip Lazowski, Hartford Hospital's retired chaplain.

A survivor of the Holocaust, Lazowski is uniquely qualified to offer clarity after enduring unthinkable adversity, seeing the worst of humankind and emerging to live a meaningful life with wisdom and grace. His story delivers a message of hope and determination.

Born in Poland, Lazowski was the eldest of five. Life was comfortable until the onset of World War II in 1939 when Poland was divided between Russian and Germany and his beloved village was ravaged by war.

"1941 brought fierce fighting between Germany and Russia. In a search for Russians, the Germans burned our house to the ground," Lazowski recalled. "They took all our things of value. If we didn't comply, we would be shot."

The family fled and the 11-year-old's life changed forever. Violence, fire and cold-blooded executions permeated his life. Once, Lazowski became separated from his family and faced sure death. In a gathering of Jews, lined up to live or die, he needed to find someone to "adopt" him to be spared.

"I noticed a woman with two little girls. She had a nurse certificate [for work] and I approached her. She complied, saying, 'Well, maybe they'll let me in with three children,'" he related of the woman — he later learned her name was Miriam Rabinowitz — who saved his life.

Lazowski's mother, sister and two young brothers didn't escape. He, his father and another brother survived by living in the woods for two and a half years until the Russians liberated them in 1944.

After the war, family in America brought them over. Lazowski was 17. A random conversation led him to reconnect with Rabinowitz, who was living

in Hartford. Soon after, Lazowski and her daughter, Ruth, fell in love, marking the beginning of a marriage that endures to this day.

With such a personal history, Lazowski offers a unique viewpoint on the pandemic. While noting there is no comparison between the Holocaust and the pandemic, he said lessons from one can teach us about the other. He feels little sympathy for those inconvenienced by mask wearing or limited activities.

"People have to get used to a different kind of life. I lived in the woods without food," he shared. "I had to go to a village to beg for food. Big deal — you have to eat at home."

If he were still sermonizing at synagogue, he said his message would be unifying.

"We have to be good to one another, thankful we can be helpful to one another. Certain things happen that are beyond our control, and we have to take care of ourselves," Lazowski said. "Life is holy, life is precious and we have to make the best of it and make a better world."

"Life is indeed a journey. Some moments are sublime and some are excruciating."



Rabbi Philip Lazowski survived the Holocaust, giving him a unique perspective on the recent pandemic. Here is seen registering for his COVID-19 vaccine.

Photo by Chris Rakoczy

thank you



THANK YOU NOTES

"(I) felt very safe and secure in each therapist's hands. (The staff) challenged me to become more confident in myself. As soon as I had a question or issue, it was tended to. I felt I spent so much more time (on the IRU) than I did because of the progress that I made. It is truly amazing, I can't thank my care team enough!"

—IRU patient, through Press Ganey

"I'm hoping she can keep this going in the right direction. You and your staff have been instrumental in setting her on that course. Thank you for being in touch at all hours. Thank you for helping us explore a way to communicate better. Thank you for feeding her with positivity and healthy skills. Thank you for everything. We are happy to have our girl back."

—Parent of patient on child/adolescent unit at the Institute of Living

"I'm writing to let you know how incredibly grateful our family is for the amazing care our son received at Hartford Hospital. He was admitted with a severe lung injury...during his seven-day stay, he was on Bliss ICU11, ICU10 and finally the step-down unit on Bliss 9. He was treated by the most incredible team of caring doctors, providers, nurses and staff. He was in critical condition for most of the time, and we truly believe that without the care of your outstanding team, he would not be alive today. Absolutely everyone treated us with such care and compassion every minute we were there. We knew they were all praying for him to survive as much as we were. Words can never express the joy we are feeling having him alive. His recovery is truly a miracle."

—Parents of Hartford Hospital patient

"I had surgery with Dr. Sandhu. The team of nurses and residents and the kind woman at registration were so helpful to keeping me calm and ready for my procedure. After the surgery, I was up on the fifth floor. I was in a lot of pain and really leaned on the staff a great deal. Everyone was so patient and so kind. It was a long, hard day but nobody made me feel like I was tasking them too much. I felt well cared for and I am forever grateful."

—St. Vincent's Medical Center patient



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