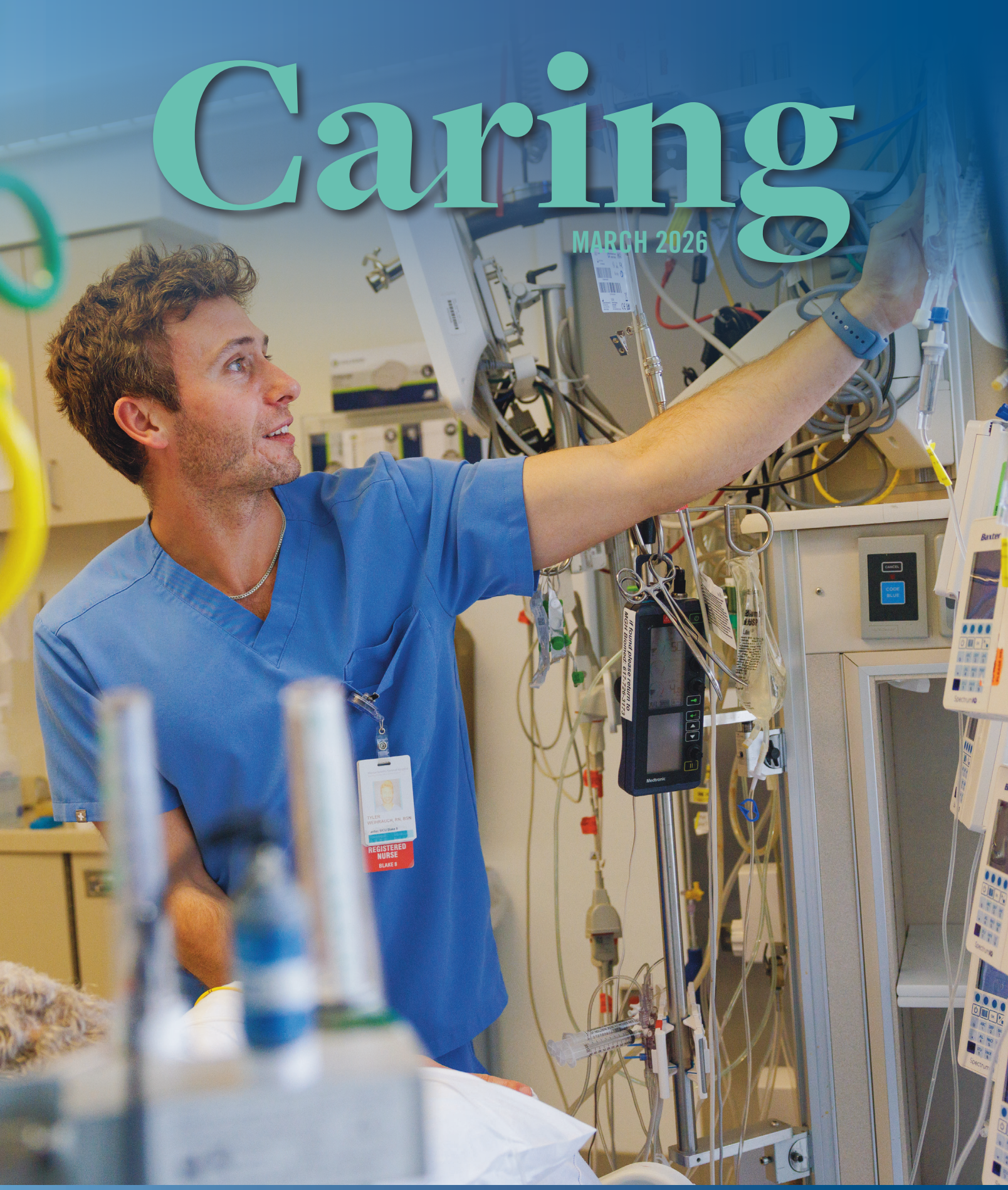
Caring

MARCH 2026



Debbie Burke, RN, DNP, MBA, NEA-BC, FAAN
Senior Vice President for Patient Care and Chief Nurse

Bright Beginnings Ahead

A letter from Debbie

As I prepare to step down from my role as Chief Nurse, closing the chapter on more than 44 years in nursing and nurse leadership, I am filled with gratitude. Looking back, my career has been shaped by countless collaborations with extraordinary colleagues, dedicated teams, and compassionate partners in patient care. Together, we have faced challenges, celebrated successes, and made a meaningful difference in the lives of those we serve.

I am grateful to look back at 2025 as another year full of milestones and highlights for staff across the health professions. We have gathered some of those highlights in this edition to celebrate the commitment and dedication to our patients and their families.

As I reflect on 2025, I am especially grateful for the mentorship, friendship, and unwavering support from hospital administration, community leaders, and fellow nurse leaders. Our shared vision and collaboration have not only advanced patient care but also elevated our professions. As I turn the page, I am confident that the next generation of health professionals will continue to build on this legacy, guided by compassion, innovation, and professionalism. As you turn these pages of Caring, I hope you see the community and compassion visible across the hospital reflected.

Caring

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Mass General
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To submit story ideas to *Caring, the Mass General Nursing and Patient Care Services* newsletter, please contact Mae Driscoll, at mdriscoll0@partners.org

MAGNET RECOGNIZED
AMERICAN NURSES CREDENTIALING CENTER

CELEBRATE with Caring

On the cover: Tyler Weihrauch, BSN, RN, Blake 8 Cardiac Surgical ICU.

Celebrate with Caring
November: Volunteer Week
February: Burn Awareness Week
March: Certified Nurses Day

Honoring Volunteers During Annual Pin Week

PINNED WITH PRIDE: Above, Matthew Keating receives his pin. Keating serves in the Emergency Department and the Volunteer Office.

The Mass General Volunteer Department hosted its annual Pin Week celebration on the week of November 3rd to honor its dedicated volunteers.

Pin Week was established in the early days of World War I to recognize volunteers who served in the hospital instead of on the battlefield. As time went on, Mass General continued to recognize volunteers by awarding yearly service pins.

Pins are awarded to volunteers who completed 100, 500, 1,000 or 10,000-plus hours of service. This year, 176 volunteers were honored, with four MGHers - Peggy Scott, Lois Cheston, Elaine Kwiecien and Karen MacDuffie - each receiving special recognition for logging more than 10,000 hours.

“The volunteers are an incredible resource to Mass General, and they offer an invaluable service to us,” says Jackie Nolan, director, MGH Volunteer Department.

Fostering the Future

Brigham and Women’s Hospital (BWH) and Massachusetts General Hospital (MGH) leaders and staff welcomed 250 ninth and tenth graders from the Edward M. Kennedy (EMK) Academy for Health Careers for immersive, interactive learning experiences in November and December.

During the program, students rotated through hands-on sessions to learn more about careers in emergency medical services, medical imaging and nursing. Students also practiced their clinical skills with high-fidelity simulation manikins at the MGH Learning Lab. These rotations helped students build practical skills, engage with professionals in the field and begin to develop their own sense of professional identity.

The opportunity was part of a partnership between EMK, Mass General Brigham and Bloomberg Philanthropies to prepare more young people for careers in healthcare.

Supported by a $37.8 million grant — the largest philanthropic investment in the Boston Public School system’s history — Mass General Brigham and Bloomberg Philanthropies have partnered with EMK Academy to double in size; add new health career pathways, college courses and work-based learning; and offer graduates access to careers at Mass General Brigham.

Clinical Narrative:
Barbara Tobin, OT, OTR/L, Occupational Therapist

One of the most valuable aspects of being an occupational therapist at Massachusetts General Hospital (MGH) is the opportunity to continually challenge and refine my therapeutic use of self, especially in areas such as rapport-building, communication, cultural competence, self assessment, clinical reasoning, and movement. A recent case that profoundly tested all of these skills was my work with an 18-year-old patient referred for treatment of genital lymphedema.

As a certified lymphedema therapist, I specialize in areas often underserved in our field, including head and neck and genital lymphedema. While referrals for genital lymphedema are less frequent, I believe the condition is more common than reported, largely due to stigma and lack of provider comfort or expertise. It's incredibly important to me that, no matter where in the body the fluid is accumulating, patients receive evidence-based care that empowers them to take control of their own management.

The patient's story began with a traumatic injury sustained at age 16, when a baseball struck his scrotum during a high school baseball game. Over time, the swelling worsened, but he remained silent out of fear and embarrassment. Eventually he was evaluated by an MGH plastic surgeon and underwent a "SMILE" procedure, which is a surgical technique involving a U-shaped incision to reduce lymphedematous tissue while minimizing scar formation.

Following surgery, the patient was referred to me for lymphedema management, scar management, and to return to function. In preparing for his first visit, I reviewed his chart carefully and knew I would need to create a respectful, safe, and supportive environment. I learned that due to this diagnosis, the patient had experienced a significant mental health decline and was diagnosed with depression. I learned that he no longer was socializing with friends, was not playing baseball (his true passion), was not working, and was isolating himself from friends and family. I tried to put myself in the patient's shoes and understand how emotionally traumatic genital lymphedema and pain must have been. Upon evaluation day to ensure both patient comfort and professional boundaries, I asked a male aide to be present during the evaluation behind a privacy curtain and communicated every step of the process to both him and his mother in advance.

Building trust was essential. Our first session focused entirely on education, helping the patient understand what lymphedema is, how the lymphatic system functions, and what might be causing his swelling. I used diagrams, metaphors, and simple language to explain the condition. As I spoke, I could see both him and his mother begin to relax, nodding in understanding and asking thoughtful questions. I could already sense a sign of relief in their facial and body language, and I could tell that they knew they were in the right place to receive the help he needed.

I explained that our treatment would involve several core strategies: manual lymph drainage, compression garments, therapeutic exercise, skin care, deep breathing, and ongoing education. The patient's goals were clear: to return to exercise, find employment, and most of all feel "normal" again.

As we continued our work together, our trust deepened. We discussed not only physical symptoms but also his concerns about body image, intimacy, and future independence.

I researched and shared a study on a specific compression garment shown to be effective for genital lymphedema. His mother, deeply involved and clearly overwhelmed, expressed relief in having evidence-based tools to support her son. Together, we worked as a team, with the patient at the center, leading his own recovery. Over four months, we met monthly, giving him space for self-exploration and time to test out our strategies. Each session became a check-in on what was working, what wasn't, and what could be adapted. We incorporated strengthening exercises to improve core activation, knowing that better abdominal function would aid lymphatic drainage from the pelvis and scrotum.

As a therapist specializing in complex conditions like genital lymphedema, I strive to create a space where patients feel seen, safe, and supported. In this

case, that meant addressing years of pain, isolation, and uncertainty through education, trust-building, and personalized care.

At discharge, the patient proudly shared that he had secured a job as a mover, physically demanding, but a goal he had set and achieved. He reported daily adherence to his compression and self-massage routines, and he had embraced kinesiotaping as a helpful technique with my guidance. Both he and his mother gave me a heartfelt hug, thanking me for providing him with the tools to care for himself. The tools and interventions that were taught during our short time together were extremely impactful and his scrotal lymphedema significantly reduced. His pain was minimal to none, he was walking/exercising regularly, managing the ups and downs a chronic condition can present, and felt empowered in his own care.

The patient's journey reminded me why I do this work. As occupational therapists, we don't just treat symptoms, we meet people in some of their most vulnerable moments and help them find their way back to themselves. Working with him challenged me to integrate clinical expertise, emotional sensitivity, and whole-person care. It deepened my understanding of how healing is not just physical, it's also mental, emotional, and deeply personal. His progress was a testament to the power of education, trust, collaboration, and individualized care. Hearing him say, "I feel normal again," affirmed that when we empower patients with knowledge, compassion, and tools, we don't just help them recover, we help them reclaim their identity and independence.

Moments like these are the reason I am honored to be an occupational therapist and why I am committed to continuing to grow in my field as an occupational therapist.

RECOGNIZING BURN AWARENESS WEEK

The American Burn Association's, Burn Awareness Week is the first week in February every year. This year's theme is to spread awareness for burn prevention activities in the workplace. On February 3, the staff of Ellison 14 Sumner M. Redstone Burn Unit and the Frasier Outpatient Burn Clinic hosted an information table in the main lobby. Also in attendance were Burn Survivors of New England, Shriner's Hospital, and members of the Boston Firefighter Burn Foundation. This is an important event as staff share safety tips, spread knowledge of burn prevention and continue to look for ways to get involved in the burn survivor community and support our burn patients and families at MGH.

YEAR IN REVIIEW

Nursing and Patient Care Services: Year in Review 2025

NURSING RESEARCH DAY

Miriam Khan, RN-BC, BSN, MPH, Bigelow 7 Medicine; pictured center, received the Yvonne L. Munn Research Grant Award.

With more than 50 posters lining the hallways of the hospital, the Yvonne L. Munn Center for Nursing Research kicked off the annual Nursing Research Day in May by inviting colleagues to network with authors of nurse-led inquiry projects and celebrate grant recipients.

Pamela Kelly, DNP, MS, RN, CPNP, CHIM, left; Molly Tower, MSN, PNP, right; Elyse Levin-Russman, MSW, LICSW, OSW-C; and Kerry Chen, FNP-C, RN, not pictured; all of the Yawkey 8 Pediatric Infusion Clinic; received the MGH Nurses' Alumni Association Grant.

CELEBRATING MEDICAL INTERPRETERS

In 2025, the MGH Medical Interpreters provided 423,561 interpreted encounters for patients who speak languages other than English. Interpreters are a vital resource. In the photo above, the department recognizes Annual Medical Interpreter Week by celebrating Dr. Emily Kung with the Language Access Champion Award.

RESPIRATORY EDUCATION

In 2024, members of the Respiratory Department formed a scholarship committee in the name of Bob Kacmarek, former director and education advocate who died in 2021. After organizing and fundraising, in 2025, the first Bob Kacmarek Education Day hosted lectures and breakout sessions for students across Massachusetts.

LOOKING AND LEADING FORWARD

Nursing directors and nurse managers joined nursing leadership for a retreat at Assembly Row on October 30. Colleagues from across patient care settings were invited to engage in panel discussions about career trajectory, best practices in leadership addressing a multigenerational workforce, and a keynote presented by Beverly Malone, PhD, RN, FAAN, chief executive officer of the National League for Nursing in the United States.

QUALITY AND SAFETY CHAMPIONS

On September 29, quality and safety champions from MGH Perioperative and Procedural Services staff joined together for a retreat focused on leveraging metrics, improvement projects, and staff and patient safety. The day included presentations from Mass General Brigham senior quality leaders, education on the new safety report filing process, the results of a recent staff safety survey and discussion of quality improvement initiatives led by their colleagues.

SPREADING THE WORD ABOUT FND

In November, MGH Physical and Occupational Therapy invited 175 attendees, including physical therapists, occupational therapists, speech-language pathologists, social workers, nurses and physicians, to a conference designed to educate the MGB clinical community on caring for patients with Functional Neurological Disorder (FND). The department partnered with David Perez, MD, MSC, Chief, Division of Behavioral Neurology, Mass General Brigham and Founding Director, Functional Neurological Disorder Unit, a leading researcher in FND, whose collaboration has helped MGH become a leader in managing this complex patient population.

SHARED DECISION-MAKING MILESTONES

The end of 2025 marked the one year anniversary of the new Shared Decision-Making model launch. The goal of the model is to create a consistent, connected framework where frontline staff, in partnership with leadership, drive practice, quality, and outcomes through engagement. To date, 60 units have launched partnership councils with more than 30 sets of minutes being published monthly driving bi-directional communication.

Staff can explore the Shared Decision Making Vitals site for more information. Scan the QR code at right to access the site.

Clinical Practice Council: 90 policies reviewed/approved and 9 new policies this year.

Quality, Safety, and Patient Experience Council: Educating and empowering members to apply high reliability principles (HRO) into their every practice through toolkits, presentations and education sessions.

Recruitment, Retention, and Recognition Council: Providing best practices for ensuring lunch breaks, creating a welcoming environment, and promoting belonging (posted on Vitals page); launched call for Wellbeing Grants 2.0

STEP Together: Advancing Falls Prevention Across Peri-Operative and Peri-Procedural Care

Patients who receive anesthesia or sedation become a fall risk — regardless of their baseline health. That core insight, grounded in evidence-based practice and frontline experience, sits at the heart of a new falls prevention initiative developed by a multidisciplinary nursing workgroup across peri-operative and peri-procedural areas within Patient Care Services.

In January 2026, nurses from Endoscopy, the Central Procedural Center (CPC), and the Post-Anesthesia Care Unit (PACU) came together to present the culmination of an extensive Evidence-Based Practice (EBP) collaborative review. Their goal was to standardize falls prevention practices across peri-procedural settings to better protect patients while empowering staff with clear roles, tools, and language. This evidence-based practice initiative was supported by a grant from the MGH Nurses Alumnae Association.

A COLLABORATIVE, EVIDENCE-BASED FOUNDATION

The Falls Prevention Workgroup represented a broad cross-section of peri-procedural care, including bedside nurses, professional practice leaders, quality and safety specialists, informatics experts, and nursing leadership. The project was supported by EBP mentors and clinical leaders who provided structure, sponsorship, and guidance throughout the process.

As part of the initiative, the workgroup reviewed 60 research articles and closely analyzed 24 that met criteria specific to falls prevention in Endoscopy, CPC, and PACU settings. The literature reinforced a consistent message: standardized tools, targeted education, proactive communication, and multidisciplinary collaboration are essential drivers of reduced falls, improved compliance, and higher patient and staff satisfaction.

Importantly, many of these evidence-based strategies already exist at MGH through programs such as TIPS (Tailoring Interventions to Patient Safety). The workgroup's focus was not on reinventing falls prevention, but on adapting proven approaches to the unique risks of peri-procedural care.

FROM EVIDENCE TO ACTION: KEY RECOMMENDATIONS

The workgroup's recommendations center on six interconnected strategies designed to strengthen falls prevention across peri-procedural areas.

One major focus is inviting Patient Care Associates (PCAs) to participate more in the problem solving of falls. The group identified underutilization and inconsistent expectations for PCAs across units. By clearly defining PCA responsibilities, particularly around accompanying patients who are out of bed after sedation, PCAs can play a more active, empowered role in fall prevention.

To support this shift, the workgroup will be establishing "Falls Prevention Champions," including both registered nurses and PCAs. These champions will model best practices, reinforce safety messaging, and serve as unit-based resources for staff education and compliance.

STEP
TOGETHER
FOR PATIENT SAFETY

Massachusetts General Hospital
Founding Member, Mass General Brigham

Another cornerstone of the initiative is "STEP Together," a patient safety acronym and practice framework that emphasizes active partnership between staff and patients during the peri-procedural experience.

STEP Together stands for:

- **Scan the environment**
- **Talk with patients about anesthesia-related fall risks**
- **Evaluate mobility needs**
- **Prepare for safe transfers**

This approach ensures that patients are never left unsupported after sedation and that expectations are set clearly before procedures begin.

THE POWER OF LANGUAGE: SCRIPTING FOR SAFETY

One of the most impactful findings from the literature review was the value of scripting in patient and family interactions. The workgroup developed standardized language for RNs and PCAs to explain fall risk in clear, consistent, and reassuring terms.

For example, staff are encouraged to say:
"After you receive sedation or anesthesia, you have a higher risk of falling, regardless of your overall health. For this reason, a staff member will be with you any time you are out of bed, including when changing and using the bathroom."
This scripting helps normalize safety practices, reduces patient resistance, and increases staff confidence when reinforcing fall prevention behaviors. Education on scripting will be incorporated into both RN and PCA training and reinforced by PCA champions on the units.

ENGAGING PATIENTS BEYOND THE BEDSIDE

Recognizing that falls risk does not end at discharge, the workgroup also focused on patient education before and after procedures. Enhancements to the After Visit Summary, which is a document shared with the patient and available in their electronic medical record, provide clear guidance on managing dizziness, fatigue, and balance issues at home, along with practical tips to reduce fall risk.

To further strengthen patient understanding, the team proposed a short falls prevention video to be shown in pre-operative waiting areas. The video reinforces the STEP Together campaign and explains why anesthesia increases fall risk, helping patients and families understand the rationale behind staff accompaniment and mobility restrictions. Plans include making the video accessible through QR codes, websites, and patient portals.

PILOTING, MEASURING, AND SUSTAINING CHANGE

Implementation of the recommendations will follow a pilot-based approach starting small on just a few of the peri-operative units. Audits, chart reviews, patient interviews, and visual checks for signage will be used to monitor compliance and sustainability.

Early anecdotal experiences shared by the workgroup highlight the promise of this approach. Patients who were educated about fall risk before sedation demonstrated greater understanding, cooperation, and safer mobility during recovery.

While falls in peri-procedural areas may be relatively infrequent, their consequences can be serious. Through evidence-based practice, interdisciplinary collaboration, and a shared commitment to patient safety, this initiative sets a new standard for how peri-operative and peri-procedural teams prevent falls.

Familiar Faces: Welcoming Recently Named Associate Chief Nurses

MGH Nursing and Patient Care Services recently named three new associate chief nurses. Here, leaders share with Caring what they look forward to most about their new roles.

VIVIAN DONAHUE, MSN, RN, NE-BC, ACNS-BC, CCRN

Vivian E. Donahue, MSN, RN, NE-BC, ACNS-BC, CCRN, was appointed Associate Chief Nurse for the Heart Vascular Institute effective March 9, 2026. She has served at Mass General Hospital since 2001 and most recently as Nursing Director of the Cardiac Surgery Intensive Care Unit since 2010. Vivian is widely recognized for her clinical expertise and transformative leadership, including spearheading Mass General Brigham's inaugural High Reliability Organization (HRO) Quality Huddles and advancing system-wide HRO rounds. Her accomplishments include emergency preparedness leadership, advocacy for a unit-based CT scanner to improve patient outcomes, expansion of lung transplant services, and integration of cardiac ICUs into the Heart Center Intensive Care Unit. A dedicated mentor and advocate for patient- and family-centered care, Vivian holds nursing degrees from St. Elizabeth's Hospital School of Nursing and the University of Massachusetts Boston and has contributed nationally and internationally through research, publications, and presentations.

"I am excited to partner with such exceptional nurse leaders as we collaborate with the interdisciplinary team to support the Heart Vascular Institute (HVI). Nursing is an integral partner in the successful integration of the HVI which will provide efficient, high-quality care to all patients."

MICHAEL FARRELL, RN, MS, CNOR

Michael Farrell, RN, MS, CNOR, was appointed Associate Chief Nurse for Perioperative and Procedural Services effective January 5, 2026. With 20 years at Mass General, Mike has progressed from staff nurse to Senior Nurse Director, most recently leading perioperative services for the past eight years. He is known for building strong, flexible teams; promoting a culture of safety; and advancing interdisciplinary collaboration, quality improvement, and leadership development. Mike takes pride in his team's adaptability and excellence—from navigating the COVID-19 pandemic to managing new procedures, supply challenges, and disaster response—and looks forward to partnering with nursing leaders to advance MGB's shared goals of Integration, People, Quality, Research, and Sustainability.

"Nursing will always be about caring for the patient, and I am excited for our new generations of nurses and how they will impact care going forward through merging past generations and current trends and technology. Nursing is such a dynamic profession with so many opportunities, but when it comes down to it, the ability to help others in a time of need or distress is still what drives me about nursing."

COLLEEN GONZALEZ, DNP, RN, NE-BC

Colleen Gonzalez, DNP, RN, NE BC, was appointed Associate Chief Nurse for Medicine, Women and Children's Services effective March 9, 2026. A nurse leader with more than 30 years of experience at Massachusetts General Hospital, her clinical and leadership background spans neurology, cardiology, medicine, and neuroscience, including roles as Clinical Nurse Specialist and Nurse Director. Colleen is widely recognized for her strategic, collaborative leadership and her commitment to patient and family centered care, quality improvement, and staff safety. She has co led major system wide initiatives in delirium prevention, workplace safety, and mobility, and is a champion for interdisciplinary collaboration and nurse empowerment. She holds bachelor's and master's degrees in nursing from Salem State University and a Doctor of Nursing Practice from Northeastern University.

"I am excited to step into the Associate Chief Nurse role, which allows me to influence nursing practice across multiple units at Mass General. In this role, I am committed to supporting nurses in their professional growth and fostering clinical environments where excellence in nursing practice flourishes."

Celebrating Certified Nurses

Certified Nurses Day is celebrated annually on March 19, the birthday of Dr. Margretta "Gretta" Madden Styles, RN, EdD, FAAN; one of the greatest leaders in the field of nursing certification. It is an annual day of recognition to honor nurses worldwide who contribute to better patient outcomes through national board certification in their specialty. The MGH and Mass Eye and Ear Professional Development departments recognize and celebrate our certified nurses and offer certification resources to nurses who are interested in certification annually. MGH is proud to celebrate Certified Nurses Day, acknowledging the invaluable contributions and unwavering passion of certified nurses who set the highest standards in healthcare.

Interested in becoming certified?
Check out the MGH Norman Knight Center's certification Vitals site. Staff can scan the QR code above to access.

Keeping our Garden Growing!

New TULIP award being rolled out!

To recognize a clinical support staff member:

Kicking off in 2026, Mass General will be adding to our bouquet of patient care recognition programs the TULIP Award. The hospital rolled out the DAISY Award for clinical nurses in 2020. Keeping with the flower theme, the TULIP award will celebrate the impact of Medical Assistants, Patient Care Associates, Operating Room Assistants and Equipment Technicians, Case Management and Social Work Resource Specialists, Physical Therapy and Occupational Therapy Aides, Human Milk Specialists, Mental Health Workers, IV Therapy Technicians, Clinical Research Coordinators, and Patient Observers. Nomination period is now open!

TULIP AWARD

In the meantime, to recognize a clinical nurse:

Mass General collaborates with the DAISY Foundation to provide recognition of the clinical skill and the compassion nurses provide to patients and families. The international award was established by Bonnie and Mark Barnes in honor of their son, Patrick, who died of the auto-immune disease Idiopathic Thrombocytopenia Purpura (ITP) at age 33. DAISY Nurse nomination brochures are available in MGH lobbies and on most units, or staff can be nominated online.

The DAISY FOUNDATION™

HONORING NURSES INTERNATIONALLY IN MEMORY OF J. PATRICK BARNES

PHILANTHROPIC SUPPORT IS CRUCIAL TO NURSING AND PATIENT CARE SERVICES as it allows us to seed innovative ideas, provide opportunities for career development and advancement and improve the way we deliver care. If you are interested in learning more please visit: giving.massgeneral.org/where-to-give/nursing-and-patient-care-services or contact or contact Madeline Burns in the Mass General Development Office, mkburns@mgh.harvard.edu.

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HEADLINES FROM MASS GENERAL NURSING AND PATIENT CARE SERVICES

Massachusetts General Hospital
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