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Boston University
Abercrombie: Some gains made, but 'keep forging on'

In light of an encouraging budgetary period ending February 11, Hospital President J. Scott Abercrombie Jr., M.D., told UH administrators and managers at a meeting on March 16 to "not let up and to keep forging ahead," to overcome its current financial woes and to continue to provide top-notch patient care into the 21st century.

For period five, the Hospital’s financial picture brightened in several key areas. Admissions came in on target with the budget, reported Senior Vice President and Chief Financial Officer Michael Blaszyk. In addition, the Hospital’s average length of stay decreased to 10.1 days from its unusually high LOS of 10.87 days in the first few periods of the new fiscal year. Other “substantial improvements,” Blaszyk added, were that contractual allowances came in under budget, and that for the last two periods, the Hospital has not had to borrow any funds to maintain operations.

“The encouraging news doesn’t mean we should let up: We have to continue to work at getting back to where we want to be. Not everything pays off, but we have to keep doing whatever we think might bear fruit,” Abercrombie said. "We intend to hold the course. And I think we have enough energy to do this.” At both the federal and state levels, hospitals have been devastated by severe cost-cutting, virtually having been left to continue providing top-quality care on shoestring budgets.

Blaszyk noted that as part of the Hospital’s operations review, one key effort to make the proposed cost reductions work, while attempting to minimize any adverse impact on Hospital operations, is being coordinated by the Change Project Committee (CPC), continued on page 2.

Connections named top employee publication in N.E. hospital contest

Connections, UH’s monthly employee newspaper, has won a top award in the New England Hospital Public Relations and Marketing Association (NEHPRMA) 1989 Lamplighter Awards Competition. The newspaper, published by the Office of Publication Services, was presented the award during the recent meeting of the New England Hospital Association.

Connections, which was launched in May 1988, won first place in the competition for the best hospital internal publication. NEHPRMA is an affiliated chapter of the American Society of Hospital Marketing and Public Relations (ASHMPR), which is composed of approximately 150 hospitals and health-care agencies in the region.

The Lamplighter Competition is held annually to recognize excellence in health-care public relations and marketing. Previous Lamplighter honors for UH publications include two first-place awards in 1986, for best external publication (UH Magazine) and excellence in writing (an op-ed article in the Boston Globe). The Lamplighter competition was judged this year by ASHMPR representatives from the Ohio region.

The following are some of the judge’s comments on Connections: "Good layout, easy reading, good balance of graphs, artwork and photography, gives off a good feeling. Nice publication, very attractive and desirable to read. I like the white space, easy reading. Good photos.”

Service recognition events set

Employees with five, 10, 15 or 20-plus years of service to the Hospital, and retirees—past and present—will be recognized at events in their honor from May 8 to 10.

On Monday, May 8, a luncheon for 10- and 15-year employees will be held from noon to 2 p.m. in the Hibbert Lounge in the School of Medicine. That evening, employees with 20 or more years of service and recent retirees will be honored at a dinner from 6 to 10 p.m. at the St. Botolph Club on Commonwealth Avenue.

Five-year employees will be recognized at a breakfast on Tuesday, May 9, from 8 to 10 a.m. in the SkyLight Dining Pavilion.

The next day, a luncheon for retirees will be held from noon to 2 p.m. in the SkyLight Dining Pavilion.

Hospital-wide effort launched to gain feedback on office systems

A steering committee of Hospital employees will make a recommendation to Administration in May on a new Hospital-wide approach to office automation and word processing.

The committee, under the leadership of the Computer Center’s Lynn Gruen and Maxie Tomlinson, has been meeting regularly since the beginning of the year, and will base its recommendation, in part, on a 4 1/2 page survey that was circulated to managers in mid-February. The survey polled general administrators, departmental administrators and operating managers on their interest in office automation and in buying

continued on page 2.
**Maintainance staff asks employees to treat their workplaces like their homes**

You’re leaving home for a few hours, do you turn off the lights? Probably. You’re leaving your office for a few hours, do you turn off the lights? Probably not.

The staff of Maintenance would like employees to extend the same level of awareness to their business environments as they do to their homes. Taking "commonsense" measures can help reduce expenses and save the Hospital much-needed dollars and manpower.

*Conserve energy: UH's electric bill for the month of February was $94,000, which is low compared to other times of the year, according to technician Jim Muse. Some factors that contribute to wasted electricity dollars are lights that are left on, windows that are left open and air conditioners that are operated during cold days.*

Winter's electric bills, however, pale in comparison to summer's, when the constant use of air conditioning results in skyrocketing expenses. Phil Kennedy, director of finance, requests all employees leave their thermostats at 76 degrees during the summer months to further save on electric bills.

*During both seasons, people should use moderation, advises Luke Mulligan, heating, ventilating and air Conditioning. Rather than cranking the heat and/or air conditioning to full blast, try main- taining a room temperature by keeping the numbers at the thermostat. The same rule of thumb also applies to refrigerators. Keep the setting at a moderate temperature.*

**Office systems**

In a Hospital-wide ‘standard’ for word processing, Office Automation would allow users of computer terminals to send and receive messages via electronic mail, and would allow computer support for maintaining calendars and scheduling such resources as conference room. Office Automation should be available for use by all departments of the Hospital. Each department being given the freedom to choose when and if to adopt it.

Response to the surveys has been encouraging, particularly in the area of office automation, according to Tomlinson. Employees who ‘are caught up in telephone tag and unnecessary paperwork are excited about it,’ he noted. A person will be able to keyboard a memo, send it by electronic interoffice mail. The memo will be deposited into an electronic "mailbox" on the receiving end of the memo and left there, until it is accessed by the other person, using his or her own password.

How efficient is office automation? "It will work only for those people who turn to their computer to receive their messages and to respond to them. Also, the number of people receiving an automation, the more successful it will be," Crater said.

Other capabilities of office automation are the ability to send messages to groups or individuals through distribution lists, maintain individuals’ calendars on the computer, to facilitate scheduling meetings, schedule or check the availability of Hospital resources, such as conference rooms, send documents electronically to other individuals or departments as read, printed or updated, fill out preprinted forms electronically, such as a change of address for Human Resources, and even compose an e-mail message.

In developing a standard for word processing, the committee is looking for a solution that provides the function and variety of features needed by many departments. An important aspect of this development is in having a standard that is reasonably priced and easy to maintain. To Tomlinson, there are approximately 150 terminals and 1,000 different software methods being used in the Hospital, making support systems virtually impossible.

"If we are going to disrupt employees or make any more work for them, we just want to create a better, more efficient business environment," Crane said.

The members of the steering committee are Bob Frasier, Administrative Coordinator Nursing, Susan Mallard, Human Resources, Mike Tomlinson, Marketing Communications, Kathryn August, Purchasing, Andy Girard and Bill Bulger, Computer Center.

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**Nursing program shows one workplace, many cultures**

The University Hospital was the site of a two-hour conference on Cultural Diversity in the Workplace. Boston Mayor Ray Flynn has been invited to attend.

The daylong conference, the first of its kind to be held in the Boston health-care community, is for the administrators of Boston's 16 major teaching hospitals. It will be held in UH's FKetter Auditorium.

The program is being funded by the Hospital's Affirmative Action Committee through a grant from the Hyams Foundation. Its agenda features a long list of speakers, beginning with the head of the state's Office of Diversity, who will discuss such topics as "Women of Color at the Work Site" and "Why is Affirmative Action Necessary- Isn't it Reverse Discrimination?" A morning panel discussion by UH employees will debate "One Country, Different Hierarchy." Chisholm is scheduled to take the podium at 3 p.m., to address the issues of cultural diversity in the workplace.

Introductory remarks were given by Karen K. Kirby, R.N., UH’s senior vice president for Nursing. William D. Thompson, Jr., Ed.D., who is director of Roxbury Community College and a panel discussion by professionals of varied cultures from the Boston community.

The March 3 conference, held in Ketter Auditorium, attracted 75 people and was sponsored by the UH Nursing Department as part of an institution-wide effort to foster a closer harmony among UH staff.

We feel that the program showed minority employees that the University Hospital is a place where there are valued, said Nancy McMaw, R.N., senior nursing director.

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**Breaking down the walls of addiction: ESN will help**

A network of ongoing support groups is being sponsored by the Hospital's Human Resources Department to provide assistance to employees who suffer from the use of alcohol, narcotics or other forms of addiction.

Establishment of the Employee Support Network (ESN) accom- plishes a new drug and alcohol policy that Hospital administrators will soon be implementing, according to Rev. Laurel Burton, the UH director for Pastoral Care and Education. The goal of the Network is to help employees with problems and to increase their awareness of the help available by providing an outlet at work for people who are affected.

"Our mission at the University Hospital is to deliver the highest quality patient care and that mission is affected adversely by addiction," Burton said. "But even more so, we care about the people who work here; they are our sets. When they are affected, we are affected."

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**UCP**

Even a person who is not abusing a substance but who works where substance abuse is, or was, an issue, can be 'ended up with negative effects of addiction. Addiction can touch us all. No one is free from it."

The groups—Alcoholics Anonymous (AA), Adult Children of Alcoholics (ACA), Narcotics Anonymous (NA) and Overeaters Anonymous (OA)—will meet at noon on different days of the week. The ACDA group, which is already under way, meets regularly on Wednesdays. AA will meet regularly on Thursdays, beginning in April. The other two groups are expected to begin soon.

Employees and their families can receive up to 10 free sessions of personal counseling through the Department of Pastoral Care. For more information on either service call 85050, and have your first name and telephone extension. All contacts are confidential.
UH cardiac surgery team brings its medical ‘know-how’ to the Dominican Republic

For one M.D., trip is a way to ‘share the bounty’ with his homeland

A team of University Hospital physicians recently spent a week in the Dominican Republic, sharing their surgical skills and academic expertise with the staff of that country’s largest teaching hospital.

The team, which was led by Richard Shenkin, M.D., UH chief of Cardiothoracic Surgery, consisted of cardioanesthesiologists Dusan Dobnik, M.D. and Rafael Ortega, M.D. The three physicians were accompanied by Patrick Travers, chief perfusionist and James McMonigal, F.A.C.C., chief physician assistant, of Cardiothoracic Surgery. Joining them mid-week was Marcelle Willock, M.D., chief of Anesthesiology.

The team brought to the Dominicans some $50,000 worth of medical equipment and drugs that had been donated by 10 American companies. The materials, as well as the expertise conveyed by the UH group, helped Dominican physicians to develop the newly formed cardiac surgery program at Hospital Gnatter of the Social Security System in Santo Domingo, the largest hospital in the Dominican Republic.

It was rewarding in many ways,” Shenkin said. “I received a great deal of personal gratification from visiting the Dominican Republic.”

IN THE MEDICAL NEWS—Dominican journalists interview patient Argentina Sanchez, M.D. Standing beside Argentina are Ortega, left, and Shenkin, right.

During its week stay in the Dominican Republic, the team worked alongside the Dominican physicians, performing open-heart surgery on three patients who were diagnosed as having either valvular heart disease or congenital heart defects. Although Dominican physicians already perform these operations, Shenkin—the first physician in New England to perform a human heart valve transplant—shared his special expertise with Dominican physicians and to serve as mentors.

“We wanted to provide them with a model system with which they could replace their existing one,” Ortega said. “Our goal, Shenkin said, “was to help the Dominican people become more self-sufficient in the delivery of health care.”

Medical care is deficient

In organizing the trip, Ortega—a native Dominican who came to the United States to do his postgraduate and fellowship work at RUMC—saw an opportunity to share with his homeland “the material and academic bounty” of his adopted country. “In my country, there is a great need for medical materials and education. Needless to say, the medical care there is deficient,” Ortega said.

“Our main objective in taking the trip was to start a relationship with Dominican physicians and to serve as mentors. We wanted to provide them with a model system with which they could replace their existing one,” Ortega said. “Our goal, Shenkin said, “was to help the Dominican people become more self-sufficient in the delivery of health care.”

Laser advances offer hope for children with portwine stains

Research advances in the treatment of portwine stains that were reported recently in the New England Journal of Medicine received widespread media interest and were the subject of a press briefing held at the Medical Center. The briefing centered on results of a Boston University School of Medicine (BUSM) study in NEDM that shows children with the reddish-purple birthmarks can be successfully treated using a tunable dye laser.

“The study’s lead researcher, Orn Tuan Tan, M.D., a UH dermatologist and an associate professor of Dermatology at BUSM, was joined at the press briefing by three of her patients. Six-year-old Sarah Pease of Cohasset, Aimee Bonvini, 45, of Wallingford, Conn., recounted her stories of the emotional trauma and social stigma that the disfiguring marks have caused them.

“I remember coming home from school crying. The other children would call me ‘Indians’ or ask me ‘What’s that on your face?’” Lucas recalled. Reminds said he had made the trek from Connecticut to Boston for two years to be treated by Tan, and will continue with her treatments until the stains are gone.

Portwine stains are caused by congenital abnormalities as a result of a malformation of the blood vessels near the surface of the skin. They occur most frequently on the head and neck, affecting three out of 1,500 children.

During the clinical study, physicians using the tunable dye laser treated 35 children between the ages of three months and 14 years who had portwine stains in the head and neck region. In 94.6 percent of the cases, the treatments resulted in normal skin color and texture.

Although two children experienced some scarring, the tunable dye laser is considered a major improvement over theargon laser used to treat portwine stains. The argon laser, the first major advancement in the treatment of portwine stains, has been in use for about 20 years. Though it has proven successful in adults, it is not as well regarded for use in infants. The laser is intended for children under 16 years, depending on its tendency to cause scarring.

“T he results of the study are impressive because portwine stains can be truly devastating,” Tan said. “By treating children at a very early age, we hopefully can have them free from emotional suffering and really alter the outcome of their lives.”

The children who participated in the study received an average of 6.5 treatments in each portion of their portwine stains. Children require fewer treatments than adults, although the number of treatments required in both children and adults depends on the size of the area that is treated. Each portion of a portwine stain is treated once every six to eight weeks.

This work with the dye laser is a beautiful example of the application of a fundamental principle,” said Barbara Gilchrest, M.D., chief of Dermatology and one of the researchers involved in the study. “By engineering light that can do what medicine and surgery alone have been unable to accomplish for hundreds of years.”
Single parents must juggle work and responsibilities on the homfront

By P. Kociubes

For some, single parenting is a choice; however, for others, the role is thrust upon them. Whatever the situation, one thing is certain: A single parent has to devote more time and energy to both work and home than most people in two-parent families. Some of the drawbacks of being a single-parent—two—little time, too little energy, too little funds and too little help—are not restricted to single parents and can be associated with two-parent families. However, some advantages of single parenting should be kept in mind. A single parent does not have to negotiate every single child care decision with another parent whose children are in the picture as well as with theirs. Fewer people in the home are determining priorities. A single parent generally is free of the anger and dissention that typically can be associated with unhappy households. For the children too, there are advantages to a single-parent home. In the case of divorce, children often spend more quality time with each parent than they did prior to the separation. Children are the single parents’ families can become “junior partners,” in that their opinions and preferences carry a lot of weight. The youngsters also can carry personal and household responsibilities that can build their sense of control and self-esteem.


- Ask for help. Call Parents Without Partners, 759-7324, or join a single-parent group or gain insight through your religious congregation.
- Take an interest in your child’s life. Get to know your child’s teacher, for example. Tell him or her that you are a single working parent and assure the teacher of your interest in your child’s progress. It can be an integral part of your work.
- Start a hobby outside of the family relationship for your child. If your child’s non-custodial parent is in the picture, you may want to establish for your child a relationship with an adult of the same sex, who can act as a role model in place of the absent parent.
- Take care of yourself. If you can’t afford baby-sitters, join a babysitting swap group. Further, remember to exercise, eat well, get enough sleep and pursue a hobby.

Peggy Kociubes is the child care coordinator for the University Hospital’s Employee Health Office.

**Don’t miss your Connection**

The deadline for Connections is at noon on the second Monday of each month. If you have a story or photo suggestion, send it to Connections editor Cynthia Paradis, 901 S., or call 640-3183.

**CAREER CONNECTIONS**

*All work and no play can make a work stressfull.*

By Lynn Gaertner

The fact that health-care workers are under a lot of stress is no news to any of us. The profession of care-giver always has had personal costs along with its great satisfactions. Now the tough picture of what health-care institutions have only compounded this stress by forcing us to do even more with fewer resources.

The solution to this added stress? The prescription we’re hearing is to “Work smarter, not harder,” but that’s only part of the answer. We have to play smarter too.

- Play as you say. Play. Studies have shown that at work reduces stress, diffuses tension, increases creativity, and makes the ‘players’ feel more motivated and more satisfied with their work. Play enhances teamwork, work becomes more enjoyable, stress and anxiety is reduced. Researchers also have found that people learn and retain more information when it is intermixed with fun and humor rather than boredom or monotony.
- Play interferes with our getting our jobs done well. It can be an integral part of our work. Try, for example, beginning each workday with a work-related game or dance. One game is a competition for the “Worst Event of the Work,” with anyone who has had a bad work taking a minute to talk out their worst event. Or the competition could be for the “Hero of the Week.” Everyone has acted heroically in any way can be recognized with a small token, a certificate or a trophy, and be dated to the department’s ‘Hall of Fame.’
- The <i>Staff of the Spiritual Consultation Unit</i> organizes an event called the Staff Laughter. They bring in a silly hat or stuffed animals to intrigue them, or they may play with a game-show theme. Last month they sent press release Susan Biener-Bouman, M.D., of her maturity, leave a funny rendering of "This Is Your Life."
- See a joy Committee, which Ben and Jerry’s Homemade Ice- Cream Company has initiated, or a Fun Committee to decide ways to increase morale within your department’s work schedule. Your committee can decide on contests, silly challenge teams, parties, cartoon-posting or awards that will provide fun for the group. Last summer Susan Malik of Human Resources received the “Cutting the Red Tape Award,” a pair of children’s scissors slicing a piece of red wax seal. Of the Coordinator of Nursing Employment Gary Hill, for simplifying the use of Action Programs. The fun committee might choose to post photos of employees and provide captions for them, or post a sentence for humor and entertainment. Of your child, I don’t want to tell Colleen when she’s old enough to understand, how everyone helped her in her time of need. The people at UH were wonderful. Frank and I are very grateful to anyone who had anything to do with this,” said Terri McCaffrey.

The UHs help raise $10,000 for daughter of former employee

**UH nurses to be honored at special events**

UH nurses will celebrate this year’s National Nurses Week observance with a week of activities from a Recognition Day on May 3, and culminating with a lecture given by the national nurse lecturer Marie Manthey, R.N., on May 9. The Hospital will host its Second Annual Nurse Recognition Program, “Professional Achievement: A Nursing Reality,” on Wednesday, May 9, from 7:30 a.m. to 2:30 p.m. at the SkyLight Dining Pavilion. The nurses will be honored in a recognition ceremony, a celebration of the nurse’s commitment to the healing profession. For free information regarding the ceremony, call Dr. D. Basel, 731-0873.

Nursing staffs sweep Blood Bank raffle

Three Nursing Department staffs were the lucky winners of a Blood Bank Valentine’s Day drawing. First-prize winner Susan Duford, R.N., won two passes to see the show *Dreams Come True* at Durgin Park, while Amy Langille, R.N., won four passes to the Showcase Cinemas.
Changes in the works for UH SkyLight Dining Pavilion

Since UH's new SkyLight Dining Pavilion opened at the beginning of the year, Medical Center employees who frequent the facility have grown accustomed to waiting in long lines at the food-service areas and at the registers. Although employees say they welcome the new facility, several persons have asked Connections to report on what might be expected to improve the situation.

Marsha Baron-Berg, a UH vice president for Clinical Operations, has promised that better dining days are ahead. Within the next two months, she said, changes in the food-service and register areas will be made. Currently under way is a redesign of the three cashier stations. The register by the hot-food service area is slated to be dismantled and relocated near the other two registers, to better facilitate customer flow throughout the facility.

"We want to make it so that our customers can get to the different food locations without the frustration of bumping into each other," she said. "Further, we want our customers to be able to purchase their food without waiting in long lines," Baron-Berg said. With three registers in place and only two staffed, interviews are under way for a third cashier, she added. Baron-Berg's ultimate goal is to acquire and operate a fourth register, she said.

Along with the redesign of the cashier stations, a consolidation of several of the food-service stations is planned. Soup and frozen yogurt, currently served at two locations each, will be served at one area apiece. "Consolidating these areas will reduce a lot of the movement that has to happen in order for a customer to complete his or her meal tray," Baron-Berg said. The menu directory located outside the facility will be improved so that "customers will know what and where each food is, before entering the serving area," she added.

Customers who dine at the facility are urged to use non-disposable trays, when their use is implemented. Although disposable trays will be provided for customers to take out, reusable trays represent a major saving over disposable trays. With the funds saved, two additional staff will be hired: Their principal duties will be transporting food from the kitchen to the facility and washing trays. "A good amount of their time will be spent constantly resupplying the food-service areas so that customers won't have to wait," Baron-Berg said.

"Our goal is to improve service," she added, "in the meantime, we want to thank the Hospital and Medical Center community for being so patient."

Former UH chaplain dies

The senior chaplain at UH and Boston City Hospital from 1948 to 1968, Rev. L.M. Brock, 85, died on February 16 at the Campion Center in Weston.

Ordained in 1935, Brock was an Army chaplain in the Pacific during World War II and was the command chaplain for the 4th Army from 1945 to 1947. While a chaplain at UH and BCH, Brock held a variety of positions throughout Massachusetts. He was the chaplain of the state's Army National Guard and State Police and of the Ancient and Honorable Artillery Company of Massachusetts. Brock also was deputy state chaplain of the Elks from 1954 to 1973.

Spotlighter Jed Doherty is a 'clown for all seasons'

April Spotlight Award winner Jed Doherty was "burnt out" from social work in 1985 when he auditioned for, but subsequently lost, a seat in the Ringling Brothers and Barnum Bailey Circus Clown College. His dream of life under the Big Top dashed, he transferred that dream to everyday life.

The "Fun-tabulous Jeddie," as his act is called, since then has performed at schools and charitable events in the Boston area. Doherty, community liaison for the Hospital's ISEC School [Intervention and Stimulation for Exceptional Children] in the South End, makes an occasional appearance at affairs thrown by the School, including last summer's one-year anniversary of its Integration Program. The ISEC School is a program for severely handicapped children between the ages of three and 22.

Those who know Doherty might say that clowning is a natural extension of his outgoing, no-holds-barred personality. "Clowning gives me an opportunity to be outrageous, it cuts through all boundaries. A clown can touch the child in anyone," he said.

As "Jeddie" last summer, Doherty met a group of youngsters who are the patients in a sexual-abuse program at Boston City Hospital. Since then, he has formed a relationship with the youngsters, visiting them once a week. "I don't really do anything with them, I just hang out and be their friend," he said.

In his spare time, Doherty is on the board of directors of the Rett Syndrome Education Center of New England, an organization that he helped to found after working with several ISEC School students who suffer from the degenerative neurological disorder. A reception honoring Doherty will be held on Tuesday, April 25 at 1 p.m. in the Solomon Carter Fuller Mental Health Center library, seventh floor.

If you would like to nominate a fellow employee for the Spotlight Award, call Gloria Shapiro, R.N., at x6500. All nominees must have been employed by UH for at least one year. Look for the Spotlight Award nomination forms in boxes throughout the Hospital.