We Love Our Nurses

Read more about amazing nurses who work at GBMC (PAGE 2)

Baltimore Magazine 2022 Excellence in Nursing honorees (from left) JoAnn Parr, MSN, MS-HCM, RN, C, Director of Care Management and Continuing Care Services; Evette H., MA, BSN, BS, RN, FNE A/P, Sexual Assault and Forensic Examination (SAFE) Nurse; Rosalyn B., BSN, RN, FNE-A, FNE-P, SAFE Nurse and Domestic Violence Strangulation Liaison; Anne Conrad, MS, RN, CCRN, RN Care Manager; Evelyn Bowmaster, MAS, BSN, RN, CPHQ, CPPS, Director Quality & Patient Safety, Ambulatory Services; Pam G., MSN, RN, FNE-A/P, SANE-A, SANE-P, SAFE Nurse
John B. Chessare, MD, MPH, Recognized with Baldrige Leadership Award

John B. Chessare, MD, MPH, President and CEO of GBMC HealthCare, received the 2022 Harry S. Hertz Leadership Award from the Baldrige Foundation.

The Baldrige Foundation supports organizational performance excellence in the United States and throughout the world. Awarded annually, the Hertz Award recognizes outstanding leaders who have inspired, encouraged, challenged, and empowered others to achieve performance excellence.

“This award is a further endorsement that, under Dr. Chessare’s leadership, our healthcare system has made a meaningful difference in the lives of those we have the privilege to serve, especially the most vulnerable members of our community. We are grateful for his direction, and we congratulate him on this prestigious honor,” Fred Hudson, Chair of the GBMC HealthCare Board of Directors, said.

The Baldrige Foundation considers nominees from across the nation for this significant award. The nominees’ leadership and achievements are thoroughly deliberated, including how they lead their organizations and encourage their teams to achieve high performance.

“John is a role-model leader deeply committed to the Baldrige framework and who embodies the Baldrige leadership principles,” Al Faber, President and CEO of the Foundation for the Malcolm Baldrige National Quality Award, Inc., said. “His unwavering servant leadership style has been instrumental in the success of GBMC HealthCare in navigating the unprecedented challenges during the COVID-19 pandemic.”

The Baldrige Foundation created the Harry S. Hertz leadership award in 2013, which is named after its first winner, because Harry personified the Baldrige core values and leadership behaviors: visionary leadership, customer-focused excellence, valuing people, organizational learning and agility, managing for innovation, management by fact, societal responsibility, ethics and transparency, delivering value and results, and a systems perspective.

“I am truly honored to receive this recognition. At GBMC HealthCare, we use the science of improvement supported by the Malcolm Baldrige Performance Excellence Program and the Baldrige Foundation to move faster toward our vision of becoming the community-based system of care that can deliver to every patient, every time, the care we would want for our own loved ones,” Dr. Chessare said. “I want to thank all of my colleagues for embracing continuous improvement and the Baldrige criteria.”

Photo: (from left) Kathryn Eggleston, Chair, Baldrige Foundation; Harry S. Hertz, inaugural recipient; John B. Chessare, MD, MPH; and Al Faber, President and CEO of the Baldrige Foundation
Inaugural Nightingale Award Winner: Zoe Ogden, BSN, RN

Even in the midst of an ever-evolving pandemic and staffing shortages, nurses at GBMC continue to show their unwavering dedication and commitment to their patients and providing the care we would want for our own loved ones.

We know the GBMC nursing team is exceptional, and it is important to us that we recognize those who exemplify and embody the fundamental elements of the art of nursing—science, knowledge, and caring.

Each year in May, we host an Art of Nursing event, an opportunity to celebrate with and recognize these amazing caregivers. This year, we have added a new award to our roster: the Nightingale Award. Named after Florence Nightingale, the “founder of modern nursing,” this award was voted on live at the Art of Nursing event on May 12.

The first winner of this award is Zoe Ogden, BSN, RN.

Zoe arrived at GBMC as a new graduate nurse and worked on Unit 34 before making the transition to her current role in the Neonatal Intensive Care Unit (NICU). According to colleagues, she has thrived in this role, displaying empathy to parents navigating the uncertain and stressful experience of having a child in the NICU just as aptly as she does to her coworkers.

“When there was construction on Unit 47, the noise was deafening in the NICU,” recalled one nominator. “One of the staff members was visibly having trouble managing this noise. Zoe sat down with this employee to help him work through it and offered to cover his patient while he took time off the unit. This is just part of who she is. She speaks to everyone with such interest as to make them feel special.”

Zoe recently took on a role as the Chair of the NICU’s family-centered care committee, where she intends to seek new opportunities to bring families to the forefront in support of their needs, as well as incorporate them into the daily work of the unit as part of the care team.

Another nomination Zoe received stated, “Zoe always has a positive attitude, no matter how high the census or acuity in the unit is. She goes out of her way to assist the other nurses at every opportunity. She treats both the families and all the members of the NICU team with respect and warmth.

“Working with Zoe encourages me to be the best nurse I can. She genuinely cares for everyone and supports us in all we do. When I know she is working with us, I know that it will be a great day, no matter what comes our way. She is an amazing team player whose energy and positivity is contagious.”

Photo: Zoe Ogden, BSN, RN, Neonatal Intensive Care Unit
Grant Moves GBMC HealthCare Closer to Health Equity Goals

At GBMC HealthCare, we make our vision bold and clear. This means providing a safe, healing, culturally competent healthcare experience to every patient, every time, regardless of race, ethnicity, national origin, age, ability, gender identity or expression, demographic, or religion.

In 2019, GBMC partnered with Helping Up Mission (HUM) to ensure its growing number of clients received coordinated and comprehensive primary care services. What the team found was many residents in the surrounding area were without a reliable home for their healthcare as well.

In 2022, GBMC received a multi-year, $1.5 million grant from the Maryland Community Health Resources Commission (CHRC)*. This funding was awarded under the Maryland Health Equity Resource Act, legislation approved by the Maryland General Assembly. Under the program, GBMC will expand its Health Partners Primary Care—Jonestown location as well as provide in-home medical care through the Gilchrist Elder Medical Care (EMC) program to residents of zip codes 21202 and 21218.

“The Commission looks forward to working with GBMC and its community partners as they work to implement the program,” Mark Luckner, CHRC Executive Director, said. “This grant will bring much needed resources to address health disparities and improve health outcomes.”

With this funding and a talented team of medical experts, GBMC will work with community partners to:

- Expand primary care delivery and access
- Eliminate health disparities, specifically addressing high rates of chronic disease
- Reduce healthcare costs and Emergency Department utilization in the area
- Bring medical care into the homes of those who cannot leave home
- Partner with community organizations to address barriers that prevent people from reaching their health goals

“Having an advanced primary care patient-centered medical home, it’s mind and body, one stop. We will not only take care of you and your body, but also any social issues or behavioral issues,” Erlene Washington, CPA, Vice President and Chief Operating Officer of GBMC Health Partners, said. “At GBMC, you get everything you need in one place. Or, if you need the same service at home, you can have that, too, with the Gilchrist Elder Medical Care program.”

The terms advanced primary care and patient-centered medical home are often used interchangeably. Both reflect a commitment to being accountable for health with the patient. They focus on convenience, with extended hours, access to medical records and the ability to message providers directly with MyChart, as well as access to behavioral health services and a network of specialists, if needed.

Each primary care physician is a captain, leading a team focused on the unique needs of every individual patient and proactively following up with patients to practice preventive medicine and chronic disease management, which, in the neighborhoods this location serves, are vital.

Hospital admissions in the 21202 and 21218 zip codes are more than double the state averages, 52.4% of residents live below the poverty line, and 44.3% live in a food desert. And COVID-19 made the situation more dire.

“COVID-19 really drove home the need to be more engaged about health disparities in our community,” Cathy Hamel, President of Gilchrist and Executive Vice President of Continuing Care at GBMC, said. “It became obvious during COVID there are substantive differences in the way healthcare is delivered so we felt now is the right time to expand our health equity work. The difference in access and outcomes became too obvious to ignore.”

The pandemic engaged healthcare institutions at all levels, from hospitals like GBMC to payers like CareFirst and Amerigroup. Even GBMC’s patient survey partner, Press Ganey, is looking at how to capture patient experience feedback from a more diverse perspective to provide detailed, data-driven feedback on how GBMC can serve minority communities better.
“We are doing a disservice to patients when we don’t truly understand what the needs are,” Washington said. “Some would say we are treating everyone the same when it comes to healthcare, but should we? We need to tailor our approach based on the needs of the diverse communities we serve.”

GBMC has experience and expertise in providing advanced primary care and is committed to bringing that level of care to all communities. Part of that work recognizes resources and services need to be tailored to individual and community needs. GBMC is working toward equity by recognizing barriers to good health do not reside solely in primary care.

“There is a triad of barriers that exist and prevent community members from getting the care they need. And we heard about these barriers directly from residents in the community,” Wayman Scott, Associate Director of Diversity, Equity, Inclusion, and Community Relations at Gilchrist and Baltimore City resident, said. “We are serious about this work and learning from the community about their challenges. Across three community needs assessments and multiple listening sessions, we identified misinformation, mistrust, and confusion about insurance as top concerns.”

Being visible at community events—B’more Healthy Expo, Healthy Kids Baltimore, the Healing City Baltimore summit—as well as events, such as Walk with a Doc and working with more than 12 community partners in the areas of transportation, food access, legal assistance, and behavioral health services, GBMC can ensure residents have the wraparound services they need, but also gain the trust of residents as a healthcare resource that is here to stay.

Charles Wheeler, a HUM graduate, who visited the Jonestown practice during his time at HUM, appreciated the accessibility and care he received with GBMC.

“I get anxiety ... I felt more at home when I went to GBMC,” Wheeler said. “It was the way the ladies treated you. I [received] the utmost empathy because they could feel what I felt coming into the doctor’s office. She did not just say, ‘He’s another patient.’”

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GBMC Extends Primary Care Services with Padonia Plus

When you have a healthcare need that isn’t an emergency, but your primary care doctor is unavailable for an appointment right away, it can be a challenge to figure out where to turn. For patients who get their care at a GBMC Health Partners advanced primary care practice, another solution is now available with Padonia Plus.

A standalone urgent care facility won’t have your medical records at their fingertips and a trip to the Emergency Department (ED) could result in long wait times, especially during COVID-19 surges that overwhelm the system. Padonia Plus allows patients to see a GBMC provider who can access their medical record, message their regular provider, and even make follow-up appointments, if needed.

“The ED is not a great place for patients if they don’t really need to be there because the wait can be long and it’s expensive,” said Jon Hennessee, DO, lead provider at Padonia Plus and primary care physician at GBMC Health Partners Primary Care—Padonia. “The downside in going to an urgent care facility is those providers don’t know you or your primary care doctor or have access to your information. We feel like patients are better served coming to Padonia Plus if they have an acute need but cannot get in to see their primary doctor.”

GBMC’s vision is to treat every patient, every time as we would our own loved ones. Providers at GBMC want patients to experience a full continuum of care tailored to their needs.

Certified nurse practitioners Florence Gichaiya, CRNP, and LaShanda Roberts, FNP-BC, see patients at Padonia Plus from 11 a.m. to 8:30 p.m. on weekdays, except on Wednesdays, when the office opens from 9 a.m. to 5 p.m. Padonia Plus is in the same building as GBMC Health Partners Primary Care—Padonia at 63 E. Padonia Road in Lutherville.

If patients think they need to see a doctor, the first step, according to Dr. Hennessee, is to call your primary care office. “People don’t need to go to the ED for a broken arm, for instance,” Dr. Hennessee said. “You can come to GBMC Health Partners Padonia, or Padonia Plus, get an X-ray, and we can help you get an appointment with orthopedics, if needed.”

There are no specialty services available at Padonia Plus currently, but adding certain ones is a long-term goal for the practice. For now, in addition to traditional primary care services, patients have access to X-rays or labs, if needed.

“We want to get patients the best, efficient care,” Dr. Hennessee said. “At GBMC, we want this to feel like an extension of primary care. Just like your regular doctor, a provider at Padonia Plus will speak to you about options and decide with you what the best course of action is.”

Photo: GBMC Health Partners—Padonia Plus staff (from left): Ronnie Goode, LaShanda Roberts, FNP-BC, Florence Gichaiya, CRNP, Jonathan Hennessee, DO, Michelle Severance
Grant Moves GBMC HealthCare Closer to Health Equity Goals

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Accessibility was important for HUM residents. Many had lived on the streets for long periods of time, and most had not had consistent healthcare. HUM clients often have numerous health-related issues, and GBMC was able to be next door to provide clients direct access.

Seeing how important that access was led GBMC to ensure services were also available for home-bound residents.

Gilchrist’s EMC program is for individuals who have trouble getting to office appointments with multiple specialists and no one to guide overall care. Gilchrist’s team of physicians, nurse practitioners, and social workers are experts in providing coordinated geriatric care and guidance to improve quality of life. As a result, the team ensures those who would otherwise fall through the cracks of the healthcare system receive the care and attention they need.

“There’s a lot of elderly people in this community that I’ve noticed that can’t get on a bus, but they got access to GBMC. That’s beautiful to bring a big firm like GBMC to a community like this,” Wheeler said.

“We do primary care so well and our metrics prove it,” Ericka Easley, MHA, GBMC Jonestown Practice Manager, Service Line Administrator for Primary Care, and Baltimore City resident, said. “If we can prolong our patients’ lives for another 20 years, that’s amazing. Hope is not lost, and situations can be turned around.”

Photo: GBMC Health Partners Primary Care—Jonestown

GBMC Health Partners Advanced Primary Care Offices

- Family Care Associates
- Hunt Manor
- Hunt Valley
- Jarrettsville
- Jonestown
- Joppa Road
- Owings Mills
- Padonia
- Perry Hall
- Texas Station
Lucy Muffoletto was intensely independent her entire life. But in her late 60s, her health began to decline. She was diagnosed with COPD (chronic obstructive pulmonary disease) and chronic heart failure.

Lucy experienced shortness of breath and trouble breathing, which in turn caused anxiety. Because getting out of the house was difficult, she put off medical care until a crisis occurred, resulting in multiple ER visits and hospitalizations.

Each time, Lucy had to be intubated, an invasive and painful procedure to help with breathing. After her last hospital visit, she transferred to a nursing home for short-term rehabilitation while the pandemic was in full force. Lucy spent a miserable two weeks in quarantine before returning home. She was tired of the unending cycle.

“Lucy decided she never wanted to go back to the hospital,” Amber Palewicz, her niece, said. Amber is an administrative coordinator for Gilchrist’s Elder Medical Care program, so she knew the benefits of home-based medical care and suggested it to Lucy, who agreed.

Comprehensive Care at Home

With Elder Medical Care, a nurse practitioner visits the patient at home and provides medical care, medications, and any testing needed, such as X-rays. Patients also have access to a nurse helpline 24 hours a day when concerns arise, and a social worker for emotional support.

For Lucy, this care made all the difference. Her Gilchrist nurse practitioner, Amy Wenz, helped control Lucy’s shortness of breath and anxiety, and managed her medications. Knowing Amy was only a phone call away brought Lucy comfort. Most importantly, it kept her out of the hospital and allowed her to spend more time with her precious granddaughter, Dakota, who was the “light of her life,” according to her family.

“Elder Medical Care helped her keep her independence and dignity,” Amber said. “Being able to stay at home helped her feel in control. She wasn’t in a nursing home or hospital being told what to do—she made her own decisions.”

Seamless Transition to More Intensive Services

As Lucy’s illness progressed, she needed more intensive services. Gilchrist’s integrated continuum of care allowed her to seamlessly transition to hospice care while remaining at home. Hospice care provided an additional layer of support. Lucy and her family had access to a hospice nurse, social worker, aide, chaplain, and volunteer as well as all the medical equipment she needed.

When the time came, the nurse sat down with the family and explained Lucy had little time left. The family was able to spend precious time with Lucy, telling her how much they loved her. Because of Gilchrist and its compassionate team, the final months of Lucy’s life were full of joy and tender moments with loved ones. The family will cherish these precious memories for the rest of their lives.

Amber said her family will be forever grateful. “This is a gift that our family will never be able to repay.”

Learn more at gilchristcares.org.
Seeking Nominations for GBMC Health Partners Patient Family Advisory Council

In order to move closer toward a vision of serving every patient, every time as we would our own loved ones, GBMC felt the best way to truly understand the patient experience was going straight to the source.

Patient and Family Advisory Councils (PFAC) help GBMC focus on creating the ideal patient experience, improve patient and family satisfaction, and ensure care is patient and family centered.

Volunteer advisors represent the collective voice of all patients and families, collaborating with GBMC to achieve its goal of providing comprehensive and compassionate care of the highest quality. Advisors are integral to the decision-making process, providing valuable feedback on issues such as parking, design of the patient portal, MyChart, as well as complaints and grievances.

There is a hospital-based PFAC as well as PFACs focused specifically on the Sandra and Malcolm Berman Cancer Institute and Gilchrist. A PFAC for Health Partners is currently seeking nominations from patients and family members looking for a formal way to continuously improve on the advanced primary care experience.

GBMC is here for the patient, which is why it is important to ensure their voice is heard.

Those interested in applying may visit www.gbmc.org/pfac.

Dr. Randy Capone Dedication

Marisa Capone and sons, Enzo and Leo, admire a plaque honoring their late husband/father. On April 6, the Randolph B. Capone Cleft Lip and Palate Program officially received its new name. Colleagues shared heartfelt words:

“He considered the face to be sacred, the seat of each person’s identity and he strove to make it the best he could. He thought all kids were special and they felt that.”
— Antonie Kline, MD, Co-Medical Director of the Cleft Lip and Palate Team and Director of Clinical Genetics

“He led and cared for his patients with love and compassion. He was a citizen surgeon who cared for his community. While we can’t all be here forever, if we are lucky, we can be part of something that will live beyond us. Randy did that with his family, patients, and team.”
— John Caccamese, DMD, MD, Co-Medical Director of the Cleft Lip and Palate Team

“Randy’s broad professional skillset is what drove the formation, sustenance, and creation of the Cleft Lip and Palate Team. That’s the key to our foundation. By naming our team after him, we are orienting ourselves to his personal attributes. He treated everyone with such a sense of dignity. He was the real deal.”
— Patrick Byrne, MD, Co-founder, Greater Baltimore Cleft Lip & Palate Team at GBMC
The clinical engineering team at GBMC performs annual inspections and repairs on medical devices, both life support and non-life support equipment. The eight members of the team have been working at GBMC from four months to 17 years. They come from different personal and professional backgrounds but are bonded by the work. And now, also, by giving back.

The closeness of the team in work and philanthropy starts with their leader.

“We work as a team with everything that we accomplish and everything that we do,” Michelle Moore, Biomedical Engineering Manager, said. “The Promise Project is something that’s near and dear to our hearts, so we wanted to make a contribution together. We thought, why not contribute to something that we maintain and repair?”

Each member of the clinical engineering team signed up for payroll deduction, which will collectively donate funds to name a recliner in one of the patient rooms in the new inpatient facility. When Moore was approached to donate to the project, she wanted to give the same way she works—as a team.

“Our livelihood is down here,” Biomedical Equipment Technician Albert Casas said. “To give back to the hospital, to the organization, is a big deal. Even though it’s a small amount, it feels good.”

“There’s a saying,” Biomedical Equipment Technician Irvin Peradilla added, “‘It’s better to give than to receive’ and it’s a blessing that we can share to the organization even a small amount. We are here to help.”

When asked questions about giving back and the work at GBMC, the resounding request to “copy/paste” an answer from their team member was comical, but indicative of a true spirit of collaboration and shared vision. It is clear each member of the team genuinely loves coming to work every day.

“I love what we do and GBMC has been nice to me,” Donta Batts, a Biomedical Engineer who has been with GBMC four months, said. “My coworkers have been nice to me, very genuine and I look forward to growing with them.”

“When I came here, I remember the respect of each other,” Romeo Noceja, a Biomedical Engineer who has been with GBMC for seven years, said. “Even though I didn’t know anyone, they greet me even though they don’t know me yet, and also the teamwork that everyone can attest to. We are of the same mind to help other people, to make sure all the equipment is safe for patient use and that really made me stay here.”

“The work environment. That is one of the reasons I went out from the other job that I had before,” Casas, who has been at GBMC four years, said. “It’s a nice environment to come into every day. If it wasn’t, I wouldn’t keep coming back.”

The longest-tenured employee at 17 years, Radiological Engineer Keith Simpler, said, “If you like the people you’re working with and
you like what you’re doing, there’s really nothing else. That’s the best you can do right there.”

“Every day is a blessing,” Rolando Cabanlit, Biomedical Engineer, who has been at GBMC for six years, said. “Even though we are not the direct people helping the patient, we are still doing so on the back side. The achievement of fixing the unit is our happiness.”

Peradilla, who has been at GBMC for two years, added, “I always look for the people. It’s good to grow in an environment, especially if the people surrounding you are open, and they are there to encourage you and they will give and are passionate for what you are doing. It is easy to find a job but it’s really hard to find coworkers like this or this kind of organization. There is an impact for me to work here at GBMC.”

Biomedical Engineer Rodney Holt, who has been at GBMC a little more than a year, added, “Everybody is team oriented and friendly. Since I’ve been here, my experience has been excellent. We have no problems communicating, everyone is helpful, there is no negativity in the department. I really just enjoy working with these guys. This is the best team I’ve ever worked with in the biomedical field. Couldn’t ask for anything better.”

The team looks forward to serving patients in The Promise Project space. They have been engaged by leadership in conversations about the new equipment that will be added in the space and look forward to seeing the rest of the hospital transform. They are encouraged by the organization’s growth and forward progress.

“Seeing that progress, it means we’re doing good for the community,” Noceja said. “As a group, since we are having the same things in mind which is to help the patients and make sure the machines are safe for patient use, it’s why we are all here and looking forward to it.”

It has been a tough two years for all who work in healthcare. Even those who work behind the scenes have felt the strain. But Moore’s team has weathered the challenge the same way they tackle everything else—by keeping GBMC’s vision at the forefront of their mind and leaning on each other for support.

“We can accomplish much more together, as a cohesive team, helping each other,” Moore said. “It’s evident. It’s radiant. And that’s what we love. And we love what we do. Days are challenging, but together we can accomplish anything.”

Photo: From left: (top) Grant Hendricksen, Rolando Cabanlit, Keith Simpler, Michelle Moore, Donta Batts, Rodney Holt, Albert Casas; (bottom) Romeo Noceja and Irvin Peradilla