

MedicalMatters

NEWSLETTER FOR THE UM BALTIMORE WASHINGTON MEDICAL STAFF • FALL 2020



Stories from the Frontline

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COVID
Warrior
Nominees

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1000th
Patient
Discharge

Steve
Nicewarner

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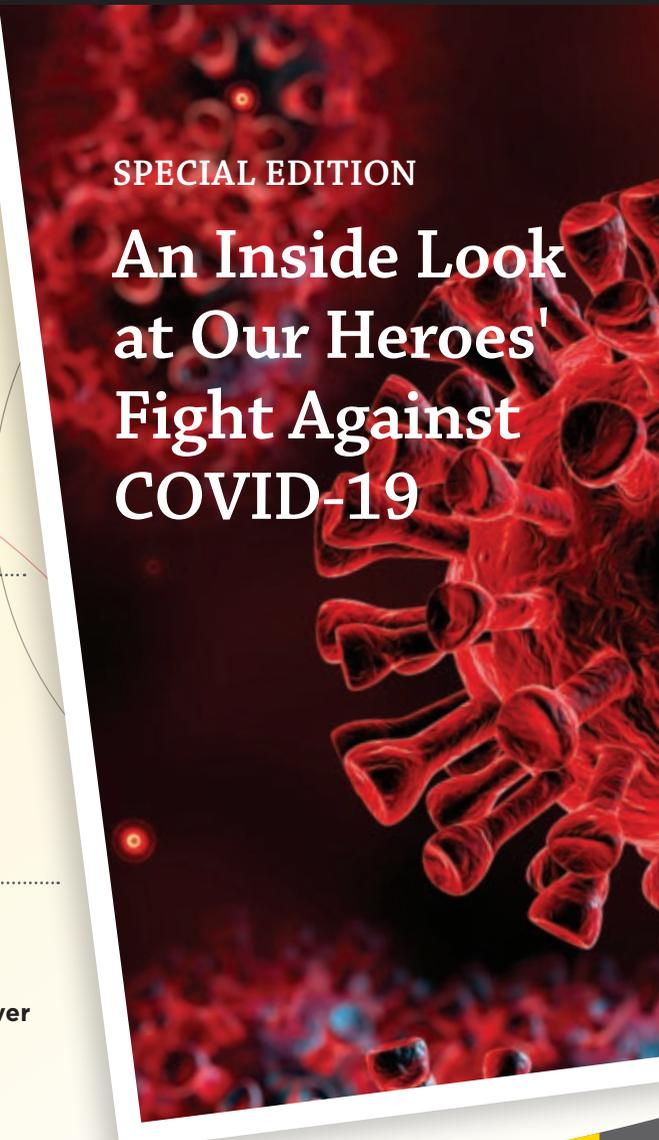
Physician
of the Year

Dr. David Lauver

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SPECIAL EDITION

An Inside Look at Our Heroes' Fight Against COVID-19



ALSO INSIDE

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CMO REPORT

I believe it is safe to say that the past 8 months have been like nothing we have ever seen in our professional career. As a result, we are dedicating the majority of this Medical Matters to the COVID-19 Response. I hope you take a few moments to read through this publication, as it is a tribute to the efforts of the Medical Staff, nursing, pharmacists, respiratory therapists, all of the employees at UM BWMC, and the communities we serve.

Not only will you see some of the amazing statistics with our COVID-19 response, but you will also see and read about personal stories, successes, innovation, resiliency, teamwork, and clinical expertise. I often describe UM Baltimore Washington Medical Center as a community hospital with tertiary care capabilities. There has been no better example of this description than our response to this pandemic. Our *community hospital* came together as a family to help each other out and the examples are endless. Our pediatricians helped make intubation drapes. Our emergency department became an annexed ICU. Our palliative care team continued to have the tough conversations in less than ideal circumstances. Our surgeons, anesthesiologists, and medicine subspecialists offered to help care for patients outside their specialty. And our hospitalists went into the Biocontainment Unit for hours in full PPE to care for COVID patients. As a *tertiary care hospital*, we have seen more COVID patients than any another hospital in the University of Maryland Medical System. We have survival rates second to none — an indication to the level of care that was provided in the ICU, the Emergency Department, and on the floors. The teams have been leaders in the clinical fight against a never-before-seen virus and have been active experts in the development and implementation of clinical guidelines such as proning, remdesivir administration, and airway management.

And as we recognize all of the efforts from these past 8 months, we are actively planning for what a potential winter surge may look like. A surge this fall and winter will look quite different from the first for several reasons — flu season will be running concurrently, the Operating Rooms are currently open, the community is more open now than it was, and the hospital will have the usual winter volume plus COVID patients. Based on our response the first time, I am confident we will answer the call and develop the necessary protocols and surge plans.

Finally, I ask that we remember what is most important — the safety of our ourselves, our families, our colleagues, and our community. A pandemic of this length can cause us to let our guard down, but as we enter the winter season, we must actually strengthen our efforts. Please remember the three W's: wear a mask, watch your distance, and wash your hands!

And once again, thank you for your tireless and extraordinary efforts in 2020!

Sincerely,

**Neel Vibhakar, MD,
MBA, FACEP**

Senior Vice President,
Chief Medical Officer

MedicalMatters

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Medical Matters is created by University of Maryland Baltimore Washington Medical Center's Marketing and Communications Department, in partnership with the office of the Senior Vice President, Chief Medical Officer.

Accomplishments & Accolades

Mission: Lifeline® STEMI Receiving Center Gold Quality Achievement Award

For an impressive seventh year in a row, UM BWMC received the Mission: Lifeline® STEMI Receiving Center Gold Quality Achievement Award for implementing quality improvement measures outlined by the American Heart Association for the treatment of patients who suffer severe heart attacks.

American Heart Association/American Stroke Association's Get With The Guidelines®-Stroke Gold Plus Quality and Target: Stroke Elite Achievement Awards

UM BWMC was recognized with the American Heart Association/American Stroke Association's Get With The Guidelines®-Stroke Gold Plus Quality and Target: Stroke Elite Achievement Awards. These awards recognize the hospital's commitment to ensuring stroke patients receive the most appropriate treatment according to the latest nationally recognized, research-based guidelines. **UM BWMC also received the association's inaugural Target: Type 2 Diabetes Honor Roll**, which aims to ensure patients with Type 2 diabetes receive the most up-to-date, evidence-based care when hospitalized with cardiovascular disease or stroke.

2020 U.S. News and World Report's "Best Hospitals"

UM BWMC was among three University of Maryland Medical System hospitals to have been recognized in the 2020 U.S. News and World Report's "Best Hospitals" rankings as being among the best hospitals in the state. UM BWMC was ranked #9 in the state of Maryland and #7 in the Baltimore Metro. We were also ranked as "High Performing" in COPD, Heart Failure, Lung Cancer Surgery and Colon Cancer Surgery.

'A' in the spring 2020 Leapfrog Hospital Safety Grades

For the second consecutive reporting period, UM BWMC was awarded an 'A' in the spring 2020 Leapfrog Hospital Safety Grades.

Certificate of Ongoing Performance

The Maryland Health Care Commission recently granted our Cardiac Cath Lab a Certificate of Ongoing Performance for another four years, enabling us to continue

performing diagnostic and lifesaving heart procedures in our medical center.

2020 Minogue Award for Patient Safety Innovation

The Maryland Patient Safety Center recently announced that UM BWMC is the Minogue Award winner for the 2020 Minogue Awards for Patient Safety Innovation. The award-winning program was entitled "Implementation of a Critical Care Outreach Program." Utilizing Lean Six Sigma methodology and a staffing model that included a partnership with a dedicated critical care nurse and a critical care physician, UM BWMC was able to decrease cardiac arrests by 86.2% per 1,000 patient days. In addition, we were able to decrease the number of cases requiring central line placements, successfully abolishing central line infections and reducing MRSA blood stream infections. Pulmonary related potentially preventable complications were decreased by 50% and respiratory patient safety indicator rates dropped by 74%.



Circle of Honor Award

The Maryland Patient Safety Center presented UM BWMC with a Circle of Honor Award for the Bay Area Transformation Partnership, which is an affiliation between us and Anne Arundel Medical Center. The award-winning program was entitled "Shared Care Alerts: Reducing Avoidable Utilization and Improving Care Coordination and Outcomes Across the Continuum of Care."



Thank You and Goodbye from the CEO



As I write this message, I am preparing to retire from a place I've called my home away from home for nearly 34 years. For the past 12 years, I have had the distinct honor and privilege of serving as the President and Chief Executive Officer of UM Baltimore Washington Medical Center.

Over the years, I have seen exceptionally positive change and a true transformation of our organization. None of that success would have been possible without the talent, expertise and dedication of the medical staff. The value of this partnership cannot be understated and because of it we have developed into a sophisticated regional medical center offering a multitude of health services, in partnership

with the University of Maryland Medical System.

While our organization has grown tremendously over the years, I am most proud of our collective and relentless pursuit of excellence. Your unshakeable commitment to our mission and compassion for our patients and colleagues alike has always served as a guiding light and source of inspiration. I am exceedingly grateful for the support, wisdom and in fact kindness that you have shown me over the many years. You also mentor and develop our frontline staff, work alongside nursing and hospital leaders on key initiatives, and support our relationship based care culture. Your partnership is invaluable, and we are incredibly fortunate to have such an amazing medical staff at UM BWMC.

The health of our community will always be the top priority at UM BWMC. With the dedication and collaboration of our medical staff, I am confident that our organization has a very bright future ahead. Thank you for your enduring support of our important mission.

A handwritten signature in black ink that reads "Karen E. Olscamp". The signature is fluid and cursive, with a long, sweeping tail on the final letter.

Karen E. Olscamp
President and CEO
UM Baltimore Washington Medical Center

A Reflection of UM BWMC Over the Past 12 Years



Dedicated People and Culture

UM BWMC's extraordinarily talented team is the driving force behind the organization's success. The dedication and teamwork of UM BWMC's workforce can be seen in every aspect and corner of the hospital. Its culture is engrained with relationship based care, focused on collaboration and compassion. As a 2019 *Baltimore Sun* Top Workplace and a Pathway to Excellence® designated organization for nursing excellence, UM BWMC's culture attracts the best and brightest to provide the highest quality of care.

Strong Development and Growth

Over the last 12 years, UM BWMC has significantly grown its obstetrics, cancer, critical care, behavioral health, and surgical programs, and is now one of the largest hospitals in central Maryland. In 2009, it opened the Pascal Women's Center, which brought obstetric care back to the hospital, and opened a new patient tower with 111 additional private rooms. Since then, UM BWMC has completed a \$31 million surgical suite expansion, opened new nursing units, upgraded technology, and added additional inpatient beds. Through the emergency department, hospital units and outpatient practices, UM BWMC treats over 265,000 patients annually.

With operating revenue of over half a billion dollars a year, UM BWMC employs over 3,500 employees, making it one of the largest private employers in Anne Arundel County. In addition to the medical center, UM Baltimore Washington Medical Group physician practices are located throughout Anne Arundel County and have grown to include over 300 providers in primary and specialty care.

University of Maryland Medical System (UMMS) Partnership

As a member of UMMS for 20 years, UM BWMC offers the highest quality health care in partnership with the University of Maryland Medical Center. For patients, this means local access to superior services, nationally renowned specialists and research discoveries.

High Quality Care

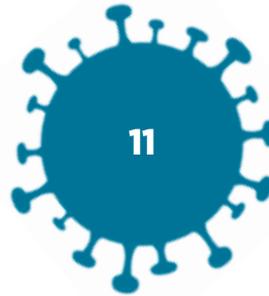
UM BWMC has been recognized year after year for its safe, high quality care by national organizations like American Heart Association, American Stroke Association and The Leapfrog Group. *U.S. News and World Report* ranked UM BWMC as one of the "Best Hospitals" in Maryland and the Baltimore Metro area, and the Tate Cancer Center is among only 13% of cancer programs in the nation that are accredited as an Academic Comprehensive Cancer Program.

From top to bottom: 1) Celebrating the opening of the renovated 4 South nursing unit. 2) Celebrating the Aiello Breast Center's 10th anniversary. 3) Celebrating the opening of the new 7 West nursing unit. 4) Celebrating Doctors' Day 2013 with a medical staff breakfast.

5) Maryland Governor Larry Hogan visits UM BWMC. 6) Celebrating Cancer Survivors Day 2016 with the Tate Cancer Center. 7) Dedication ceremony for the opening of Walker Way on the medical campus, in honor of former UM BWMC President and CEO James Walker.

UM BWMC COVID-19 Statistics

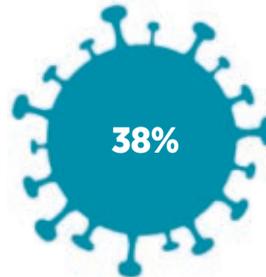
A **T THE TIME OF THIS WRITING IN SEPTEMBER 2020**, UM BWMC has cared for more than **600 patients** with COVID-19. Our team has done exceptionally well in rising to the challenge and providing the highest quality care to each of these patients. Here is a look at some of the statistics as it relates to COVID-19 patient care at UM BWMC.



Highest number of admissions in one day.



Saw our first COVID-19 patient.



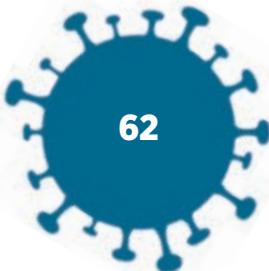
Percentage of patients requiring ICU level of care.



Number of COVID patients admitted to the hospital.



Percentage of patients that have survived when admitted to a general medical floor.



Highest number of COVID-19 patients we had in house at one time.



Percentage of patients that have survived when admitted to the ICU.

The UM BWMC Critical Care Team, 6 West, the Emergency Department, along with many other departments and support staff, have been serving on the front-line of the COVID-19 pandemic since the very first patient arrived in March. Our staff have shared inspiring stories of teamwork and resiliency since the beginning of the pandemic and through its peak. Here are a few stories highlighting the perseverance of our staff, our patients and the community we serve, in the words of Jason Heavner, MD, chair of critical care medicine at UM BWMC.

May 15, 2020

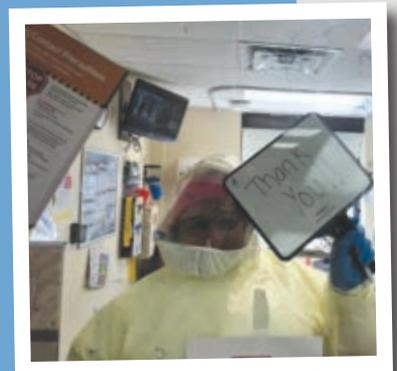
Our patient (mother of one of our staff members) presented to the ED a month ago with GI symptoms and shortness of breath. She was admitted to the hospitalist team, but decompensated prior to leaving the ED. She required 100% NRB and then intubation. She required proning and pharmacologic paralysis. She had a pneumothorax requiring chest tube placement (some case series suggested a 100% mortality with chest tube placement in COVID ARDS). She had septic shock, very severe cytokine storm treated with tocilizumab and plasma exchange. She required tracheostomy and g-tube placement on hospital day #10. Our ICU performed the first bedside percutaneous ultrasound gastrostomy (PUG) in the world back in December — and we performed the first non-aerosolizing apneic trach/pug in a COVID-19 patient last month). She has now been decannulated and g-tube removed today. She is on room air, eating a regular diet, and is up ambulating. She is slated for discharge. **She said to say "Thank you" to everyone who helped to take care of her. A Covid Warrior!**

Stories from the COVID-19 Frontline

April 8, 2020

Thank you to our intrepid commander, Kathy McCollum. When I am interacting with our colleagues throughout the organization, everyone is leaning in to this experience. Importantly, there is a high level of trust that the hospital is protecting the staff and keeping staff safety as a primary goal.

Our team has had difficulties communicating between the inside and outside of patient rooms during critical events because the doors must remain closed and PAPRs drown out people's voices. We reached out to Kathy for help, and, without hesitation, she found and delivered a solution to the ICU today — a handheld dry erase board for every room in 2W, 2N, and POD 2. Although a whiteboard is a simple thing, it represents something extremely powerful and critically important right now...our leaders are listening. Thank you!



Gina is one of our respiratory therapist extraordinaires!

April 7, 2020

As you know, at the end of last week, a third ICU was stood up in the ED POD 2. **The Emergency Medicine Nurses have had to transition into the ICU nurse role.** This group has been doing a fantastic job with this change. I can only imagine the transition for this crew from ED resuscitations to 4 hours of ICU rounds! We have already had the whole gamut of ICU patients and diagnoses in POD 2, and things have been going quite smoothly.

In critical care medicine, we have all sorts of fancy machines, monitors, devices, medications...and a common question asked of me is *"What has been the greatest innovation in critical care?"* My answer is always: **the ICU nurse.** No machine can replace the intuition and skills of our nurses. Our emergency medicine nurses have leaned into the experience, and have stood up a high functioning ICU that will undoubtedly deliver the same level of high quality care that we are accustomed to in CCW. Thank you!

April 3, 2020

Respiratory therapist Tim George and pulmonologist/critical care physician Peter Olivieri, MD completed our first tracheostomy in a recovering COVID ARDS patient. This patient will now be able to continue the next steps in the journey to ICU survivorship. Tracheostomies are potentially very aerosolizing procedures requiring a combination of bronchoscopy, extubation, intubation, and creating an opening directly into the trachea.

This dynamic duo developed and smoothly executed an APNEIC tracheostomy — the entire procedure was done with NO AIRFLOW.

No airflow = No aerosols.

Confidence, ingenuity, coordination, communication, and facile hands — amazing and unprecedented work!

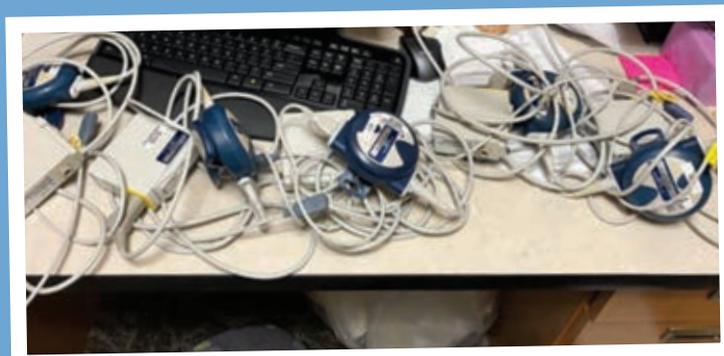
Dedication

March 27, 2020

Shout out to anesthesiologist Dr. Marc Azran, Francine (anesthesia tech), and the OR team.

We ran out of BIS monitors in the ICU this afternoon. We paralyze patients with bilateral pneumonia and ARDS to improve lung function. While paralyzed, we need to ensure that patients are adequately sedated so that they do not wake up while paralyzed — a horrifying thought. We measure the level of sedation with a device called a bispectral index monitor (BIS)

— which measures brain activity and thus level of consciousness/awareness. We reached out to the anesthesia team to see if they could help us out, and they were able to provide ample monitors **within five minutes**...no questions asked, no stipulations! Amazing! Community and Teamwork...these are not just catchy inspirational phrases...to me, these words mean a desk-full of monitors:



April 1, 2020

The ICU team wanted to explicitly thank pathologist **Dr. Sabrina Sopha, Terry Hunter, Tammy Hunt, and the entire lab team for their awesome work with the very quick go-live of our in-house testing.** These tests results give us the ability to efficiently target our resources to ensure we continue to provide the highest level of care to our patients while maintaining the safety of our staff at the highest level.

Huge shout out to the **OB Team who maintained a diligent presence in the ICU** while assisting with the stabilization of a young woman with ARDS. In the pregnant patient, time is critically important because of the risk of fetal hypoxemia, inducing pre-term labor, etc. The recent work with obtaining a new glidescope for the ICU, pre-filled RSI syringes from pharmacy in our

new emergency pyxis, and the respiratory therapists' precision with vent support all contributed to very smooth interventions.

Thank you to this team for hearing the concerns about staff exposure risk with CPR. Our new Lucas devices (automated chest compression CPR devices) have been purchased, arrived, education finished, and clinical implementation has been completed with only about a 1 week turnaround time. These devices protect our staff during a very high-risk procedure. We are deeply grateful for your prioritization of our team's safety and well-being. Thank you everyone!



UM BWMC nurse holds the Lucas device.

Bravery

Go Inside the COVID-19 Unit

Given the unprecedented circumstances, we thought that it was important to capture the thoughts of a few of our colleagues on what it's like to serve on the front lines of a global pandemic. In this powerful video, you'll hear directly from our team members and see images from inside UM BWMC as they reflect on their experiences. Most importantly, you will feel their dedication and bravery.



Listen to the incredible stories of our colleagues who are serving with courage at umbwmc.org/kudo.



COVID-19 Reflections *from our* Medical Staff

Mind-boggling? Heartbreaking? Earth shattering? No. There are no words, simply no words to adequately describe the full impact that COVID-19 has had on us emotionally, professionally, and sometimes even physically. We initially watched with disbelief as the novel coronavirus gripped our nation, our families and our friends; it transformed our everyday lives and occupied many of our thoughts each waking hour, and even kept some of us up late at night.

The initial shock gradually morphed into an acceptance of our new life, a life filled with uncertainty and potential danger on a level we could have never imagined. Yet, with the assurance of a steady supply of lifesaving PPE, and after numerous patient encounters

were particularly instrumental in ensuring a great outcome for many of the patients on the COVID-19 ward, and we are deeply appreciative of their personal commitment, as well as the sacrifices they made.

Now we have moved away from a dedicated COVID-19 ward, and patients can be found on various floors, providers continue to step up to the plate to take over the care of these patients when a colleague has health issues that make a potential exposure more concerning.

So, as we move forward, not knowing what tomorrow will bring, we are taxed, but not broken; stressed, yet determined. While some of us have struggled with headaches, breathing problems and other physical



in rooms teeming with COVID-19 with not a single provider becoming ill, this horrific pandemic has entered a new phase — a phase of acceptance, perseverance and commitment.

Our commitment to one another grows as we fight COVID-19. It has been beautiful to see team members volunteer to work extra shifts on the 6W COVID-19 ward or even switch services with other providers whom they felt needed a break from that ward. Ray Zarate, NP, Samir Jain, MD, Margaret Delgado, NP, Wonderfew Berhie, MD, Denny Mathew, MD and Aman Gebremehdin, MD

ailments related to using N95 masks, we stand no less committed to working as a team to provide excellent care to our patients throughout the duration of this horrible pandemic. Finally, I would be incredibly remiss if I did not acknowledge the tremendous impact leadership has had in providing us with the emotional support and



physical protection we need to accomplish the formidable task with which we are faced.

Ann Maria Hester, MD,
Inpatient Team

This year has been nothing short of spectacular. A virus brought the world to a crawl, impaired global economies, devastated families and businesses, and of course changed healthcare forever in many ways. We hunkered down in our homes in fear and many of us did not return to our families for weeks and months. We made dramatic and burdensome changes to our daily routines out of the necessity to stay safe ourselves and to keep our patients and their families safe. This came at a cost. The cost of lives of loved ones, of our front-line heroes, and of course, our collective mental health. Some of us saw our coworkers become patients. Some of us saw our coworkers leave

come. They were afraid and are still afraid of coming into a setting where there may be “sick” people. This has improved with education and public facing messaging, but we all continue to bear witness to the consequences of delays in obtaining care that COVID has brought.

I could not be prouder of us as an institution, our ED team, and the entirety of the hospital staff for the job we have done in tackling this situation head on and persevering. Our response has been amazing and total. From PPE supplies, to constant open communication, to the resiliency center, to everyone’s can do attitude, I am humbled. The community response and outpouring of



medicine entirely or change where they practiced. Whether we showed it or not, we wept.

But we had a mission; we had a purpose. The response of our hospital and its leadership team, our system incident command, and our State was tremendous. It gave us all the strength and support to forge through this unprecedented time. We were forced to think outside the box and develop new and innovative processes for ensuring patient and staff safety. We were ready to serve double our normal ED volume — to potentially care for over 400 visits a day through the ED. Many departments were offering to help, and there was a plan for abdominal pain visits to be seen by our surgery team in the Tate Center. We put up tents as additional care space for patients and had increased staffing to be able to care for these patients. Alas, they did not

love to all those who care here deeply every day for all our patients was nothing many of us had ever experienced and may never experience again. That was enough to fill my cup for the entirety of my career. Thank you, each and every one, for what you do every day. I am honored to have you as colleagues. While our work is not finished, I am happy to be shoulder to shoulder with you as we all march forward as COVID Warriors.



Chirag Chaudhari, MD,
Chair of Emergency Medicine
and Vice President of the
Medical Staff

On March 12, 2020 the WHO declared COVID-19 a global pandemic. Countries around the world were consistent in their reports that the patients most likely to require hospitalization would be the chronically ill. Palliative Care teams across the country braced themselves for what was coming.

Palliative Care is a specialty dedicated to relieving suffering. We live in a time when our country has an aging population with a large chronic disease burden yet Palliative Care teams are generally small. Under normal circumstances Palliative Care is a limited resource. Add a pandemic to the mix, one that preys on the frail, and we knew

be patients too sick to survive COVID-19, the Palliative Care team knew we would need to support our dying patients in decision making. Our team would be the messenger between families and patients when they couldn't be together.

The UM BWMC Palliative Care team is lucky to be part of a Hospital that supports and values its mission. We created a hotline phone available to staff in need of urgent advice. COVID-19 symptom management tools and hospice enrollment guidelines were created for patients wanting to go home with comfort care. Weekly meetings between our team and local hospices were



it would require new ways of practicing if we were going to make an impact.

As we watched our colleagues around the hospital prepare for the anticipated COVID-19 surge we saw well laid plans for ventilator machines, medications, etc. The Palliative team asked ourselves: What do we need? How can our team reach the high numbers of seriously ill patients coming? How can we teach our colleagues to lead Palliative conversations when we can't get there? How can we help families of the dying grieve if they say goodbye by phone instead of in person?

Hospital-based Palliative Care facilitates challenging discussions about some of the most important decisions a person may make in their lifetime. Knowing there would

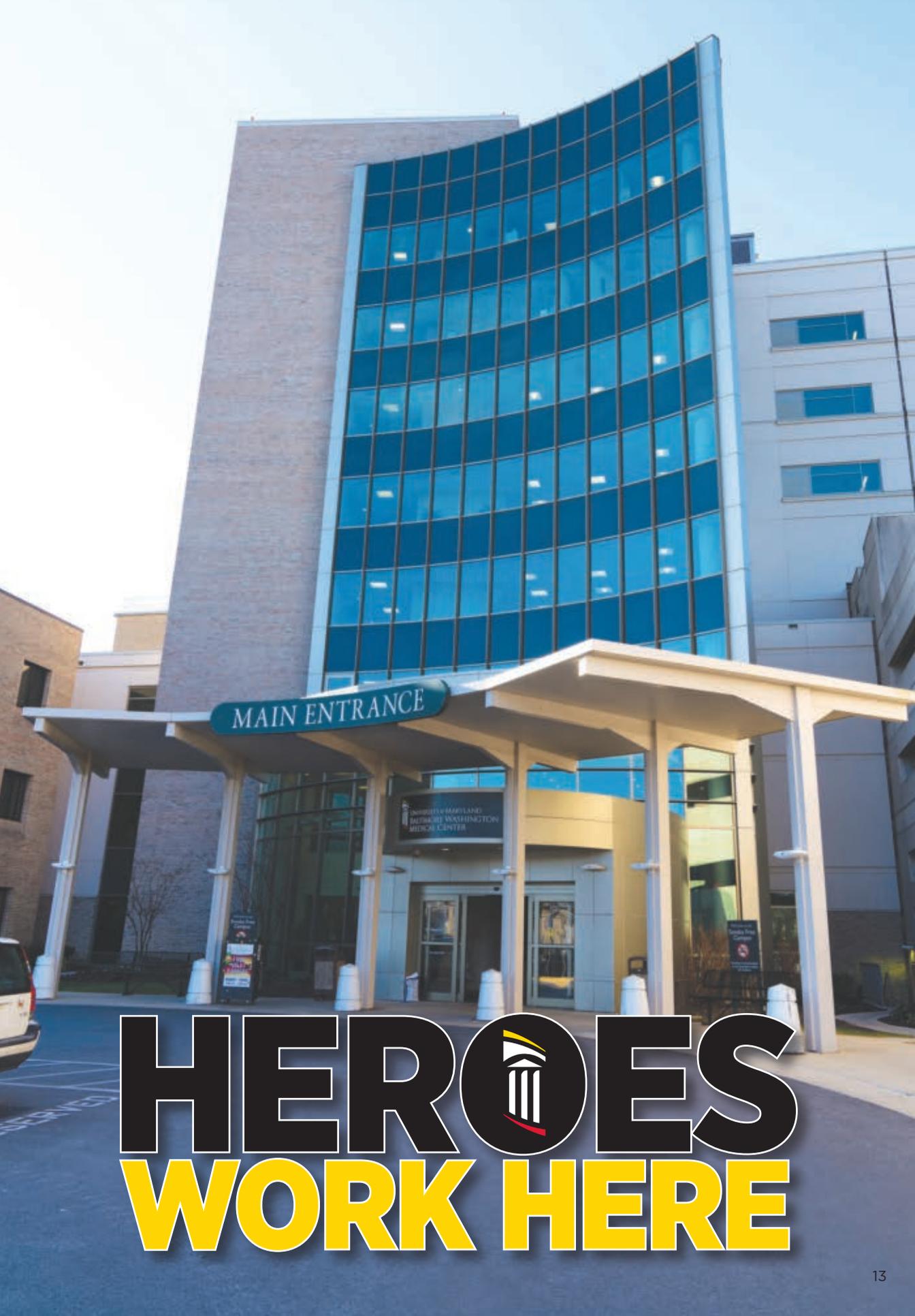
started and the system created a Palliative Care Incident Command Group giving us a voice on a system level.

As we reflect on the past few months there were lessons learned and experiences gained which led to new ways of practicing. We cannot thank our leadership and colleagues enough for their collaboration and support of our Palliative Care team. The UM BWMC Palliative Care team wants it known that our sickest patients benefited from your



teamwork and we are grateful.

Elizabeth Grady, DO,
Palliative Care Team



MAIN ENTRANCE

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HEROES WORK HERE



In April, UM BWMC launched the COVID Warrior Program to provide an avenue for employees and medical staff to recognize their peers for their dedication and support during the COVID-19 response.

Below are just a few of the COVID Warrior nominations we've received throughout the last few months.

Nicholas Kaufman, PA-C and Tiffany Matonak, PA-C, Thoracic Surgery

They have repeatedly volunteered to see COVID-positive and rule-out patients to help ensure that their care is optimal and checking on them in-person to provide great teamwork by helping the floor nurses who needed help even when they could have taken an option to avoid the tasks.

Kathy MacArthur, OR Scheduling Manager

Kathy has been an amazing team player all throughout this crisis. During redeployment, Kathy and her team offered critical support for the management of our PPE supplies which were vital to keeping our patients and staff safe. As we ramp the ORs back up Kathy and her team have sprung back into action and have been scheduling patients non-stop to work through our backlog. Thank you!

The 6 West Team

I would like to recognize the 6W nurses, PCTs, clinical pharmacist, ancillary services, consultants, inpatient team providers etc. This team has stepped up in caring for our COVID patients and keeping such great and caring attitude and team work. I am grateful for this team!

Devonne Hurst, RN, Rapid Response/ Critical Care Nurse

There were 7 patients on the floor that required intubation and transfer to critical care. Devonne identified these patients, assisted the medical team in administering critical care, and transferred them to CCW. Without her proactive

intervention, I am sure most of this patients would have decompensated. She did this all with a great attitude and is an amazing team player.

Kristen Hargett, Nurse Manager, Surgery Center

When you look up COVID Warrior in the dictionary, there is a picture of Kristen. She has spent timeless hours away from her family to ensure the safety and wellbeing of her "work family." She cares for us, motivates us and appreciates us like no other. There isn't anything we wouldn't do for her. She is great at her job, an asset to this hospital and a hero to her staff!

Dahlia Joseph, CRNP, Dianne London, CRNP & Sridevi Praveen, CRNP

These 3 amazing NPs were thrust into Employee Health to help with the pandemic. Not knowing our department, they jumped in with team spirit and true professionalism. They have been amazingly helpful during this very trying time. We could not have managed without them!

The PACU Staff

Many of the PACU Nurses, Techs and ATs have been deployed to other areas of the hospital such as CCW, PCU, ED, and the floors almost daily and nightly. Some of these staff members have not worked in those areas of the hospital for many years. The PACU Nurses and Techs have worked tirelessly with the staff to help support them and the take care of the patients' needs during this difficult COVID nightmare. Hats off to them for providing special care to both the nurses and patients! They are true COVID Warriors!



**Laura Stammer, Practice Manager,
UM BWMG Adult and Senior Care**

In three days, this office was converted to our COVID Acute Clinic. Laura has arranged for scarce PPE, staffing, reporting, and drive-up COVID testing. She has juggled multiple priorities with grace and good cheer. She is a true leader, and a COVID Warrior!



Felicia Kelly, RRT, Respiratory Therapy

Felicia, you and your new found Facebook friends, have literally made hundreds of caps for the hospital staff through donated material that you have driven to pick up. You have had children earn their community service hours by cutting out the material. The example of serving that you set for those children is exceptional. This act of kindness has provided a bright new stylish look to the otherwise drab COVID apparel. The countless smiles you have brought to your UM BWMC co-workers is truly inspiring. Thank you! Yet another inspiring COVID Warrior.



Central Pharmacy Department

The Central Pharmacy Team has been working tirelessly to ensure that our patients and staff are safe. This team disinfects and decontaminates products returned from floors to avoid waste, compounds medications, ensures proper medication use, and keeps our pyxis machines stocked. Thank you CPT!



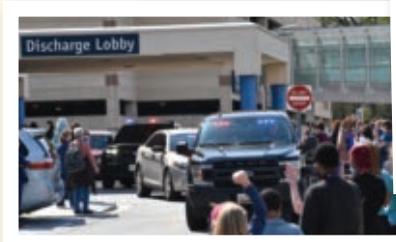
Tammy Hunt, Microbiology Supervisor

Tammy has done an amazing job getting our laboratory COVID-19 testing up and running. She has spent countless hours writing procedures, training staff, performing validations all while managing PPE for COVID response for the laboratory. Because of her drive and dedication to providing the best care to our patients, UM BWMC was able to get in house COVID-19 testing operational quickly. Wonderful job Tammy!



Yash Patel, Respiratory Therapy

In the ICU today, he has been in 5 intubations, multiple proning events, a bronchoscopy and all of his other responsibilities. This is a significant amount of work in general, donning and doffing his PAPR, and maintaining extreme diligence while working around high-risk airways and procedures. And, he has done this with a smile throughout. He makes our unit a better place.



UM BWMC Discharges the University of Maryland Medical System's 1000th COVID-19 Patient

In mid-May, Steve Nicewarner, 57-year-old from Elkridge, felt sick for about a week. He spiked a high fever and tested positive for COVID-19 the next day. When his condition worsened within the following week, he was brought to UM BWMC for care. He spent 31 days in the hospital and ten days on a ventilator.

In addition to being on a ventilator, Mr. Nicewarner had to be prone, which is a medical procedure that flipped him onto his stomach to help his lungs get more oxygen.

Peter Olivieri, MD, a pulmonary and critical care physician at UM BWMC, was a member of Mr. Nicewarner's multidisciplinary care team. "Mr. Nicewarner was critically ill for several weeks, and our interdisciplinary care team utilized advanced care therapies in his treatment," Dr. Olivieri said. "It was a wonderful feeling to see him recover and be discharged after a long and, at times, challenging hospital stay."

Mr. Nicewarner was the 1,000th patient to be discharged to home after receiving care at a University of Maryland Medical System facility, a testament to our healthcare team's skill and experience treating patients with COVID-19. "We are deeply honored to have helped more than one thousand patients across the state recover from COVID," said Mohan Suntha, MD, MBA, President and Chief Executive Officer of the University of Maryland Medical System.

A different kind of advanced therapy — communication devices — also offered much-needed support by keeping the family in touch. "The hardest part for us was knowing he was in the hospital, going through some very scary things and was feeling all alone," said Cindy, his wife.

The family utilized the hospital's Virtual Patient Connect service to communicate via a tablet in Steve's room, with the assistance of a nurse. Steve could only mouth words and use hand motions. Before he was put on a ventilator, the family was able to text and talk via cell phone.

Two other family members tested positive for COVID-19 — Johnna Nicewarner, 25, the family's youngest child, who



Steve Nicewarner with his wife and daughter.

is an Emergency Department nurse at UM BWMC and her 31-year-old sister, Jenny Nicewarner, a third-grade teacher in Anne Arundel County. Neither of Mr. Nicewarner's daughters had to be hospitalized. The family's middle child, 28-year-old Rob Nicewarner, is working on his doctorate in West Virginia.

While he did not get the disease, he was also impacted, as his May 9th wedding was postponed due to COVID-19. Cindy did not get the virus.

"These discharges are an acknowledgement of the selfless work and continuing commitment and dedication of our heroic staff across the System," said Dr. Suntha, "those who work on the frontlines providing outstanding care as well as those

who work behind the scenes. We also think about, and keep in our collective memory, those who COVID took from us."

The Nicewarner family credits the University of Maryland Baltimore Washington Medical Center (UM BWMC) care team, friends and family, and their faith community at Lighthouse Church in Glen Burnie for their support.

"These discharges are an acknowledgement of the selfless work and continuing commitment and dedication of our heroic staff across the System..."

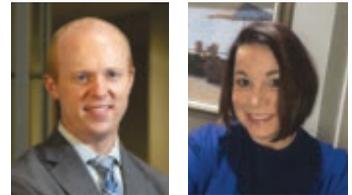
—DR. SUNTHA



IN THIS
TOGETHER

Jason Heavner, MD and Michele Mullen, RRT Recognized by the *Daily Record* as **Health Care Heroes**

Each year, the *Daily Record* presents Health Care Heroes Awards to recognize extraordinary health care providers throughout the state of Maryland. Two of UM BWMC's staff members were recognized this year: Dr. Jason Heavner, Chair of Pulmonary & Critical Care Medicine, and Michele Mullen, RRT, respiratory therapist.



Dr. Heavner was recognized for his work with our Critical Care Outreach Program, which was created two years ago. Dr. Heavner said while critical care teams often have the expertise to diagnosis, prognosis and treat conditions with a high risk of organ failure or even death, in the current paradigm across the country the expertise is not able to be fully leveraged. The primary goal of the program was to expand the traditional role of the team to care for critical illness from prevention through survivorship.

When the COVID-19 pandemic hit, Dr. Heavner said at times UM BWMC has had to increase its intensive care unit capacity by nearly 200%. But having established the infrastructure with the outreach program, the team was able to handle the rapid increase in needs.

"By building a strong, patient-centered, interdisciplinary critical care program that treats the entire spectrum of critical illness from prevention and early recognition through post-ICU survivorship, we have been able to tackle COVID-19 with vigor and resiliency to provide the highest level of evidence-based care to our patients despite the unprecedented and ever-developing landscape of the pandemic," Dr. Heavner said.

Michele Mullen was recognized for her instrumental respiratory work on our COVID-19 patients. Michele said she became a respiratory therapist because she wanted to make a difference in the lives of others. She said the COVID-19 pandemic has been a challenging, but rewarding time in her career.

She's been involved in intubations, assisted with tracheostomies and various other therapies to support fragile patients across different areas of UM BWMC. She said the emotional toll can be the toughest part as many patients want to call or video chat their family, potentially for the last time.

"It is a privilege to care for others at their darkest moments and most magical times, may we always remember the passion that led us to our chosen careers and find joy even during the toughest of times," Mullen said.

Last year, after Mullen's grandson died, she started a nonprofit foundation Tucker's Teddies. On Good Friday, she delivered a Tucker Teddy bear to every patient at the hospital. She said it was an inspiring day full of tears, smiles and joy for both the staff and patients.

"I received the biggest reward that day being able to see the shining smiles on faces in these dark times," Mullen said.



COVID-19 RESOURCES

for Medical Staff Members

The COVID-19 response has brought rapid changes to our policies and procedures within UM BWMC and across the University of Maryland Medical System. In an effort to keep you informed of the latest hospital news, please use the following resources available to you:

COVID-19 Response Site for UMMS Providers

- The website **covid.umms.org**, provides staff with access to UMMS clinical policies and procedures both on and off the medical campus.
- The COVID-19 response site is available to anyone with an Active Directory login for any UMMS clinical or business system, including Epic/MyPortfolio. Login will require the same Symantec VIP Access security code that is used to access webmail and VPN applications.
- To access the site, visit covid.umms.org and enter your credentials.
- For help logging in, please visit “How To Access the COVID-19 Response Website” at **umms.org/covid-response-site**.

PortfolioMD

- PortfolioMD allows providers to receive real-time notifications when a patient under your care is treated at a participating UMMS-affiliated hospital or ambulatory care location.
- You can access patient information and clinical data in real time including lab, imaging and test results;

hospital admissions; discharge summaries; consultation notes and emergency department encounter notes.

- You can also use the platform to communicate securely with other UMMS providers.
- To request access to PortfolioMD, visit **umbwmc.org/healthcare-professionals/portfoliomd** or contact our physician relations manager, Nicole Revis, at Nicole.Revis@umm.edu or 410-382-6956.

Operating Room Procedures

The Operating Room at UM BWMC is functioning at full capacity. Please note the following changes to our normal procedures:

- Surgical patients must complete a COVID test at UM BWMC’s Drive Thru Testing (at the discharge lobby) at least 48 hours prior to their day of surgery.
- Patients are being asked to come in one hour earlier than before to ensure preparation is complete.
- Patients must wear a mask throughout their preparation for surgery on the surgical day.
- The patient is only allowed one visitor in a 24-hour period. Swapping is not allowed unless special

circumstances are approved. If the one visitor leaves they cannot return and no one else is allowed to return in their spot.

Visitor Policy

UMMS has put in place comprehensive, system-wide strict patient safety measures. As the COVID-19 crisis has evolved, we have continually updated our policies to better protect staff members, patients, visitors and our surrounding communities. This policy will continue to evolve as needed for everyone's safety.

- UM BWMC's current visitor policy requires everyone to wear masks and limits the number of visitors in our facilities.
- The policy allows limited visitors to inpatients who are not suspected or confirmed to have COVID-19.
- For the latest visitor policy restrictions, visit umbwmc.org/safe.

Resources for Your Patients

- UMMS has a Nurse Call Line which is a free phone service available 24 hours a day/7 days a week to answer questions from the community about COVID-19. The phone number is **1-888-713-0711**.
- UM BWMC posts the latest COVID-19 news, visitor policies, safety tips, telehealth services, and more on its website at umbwmc.org/safe.

Reminders

- Masks must be worn at all times in any UMMS facility by all persons. The mask must cover both your

nose and mouth, and make sure it fits snugly but comfortably against the sides of the face.

- When you are on campus, please review signage posted in the lobbies, in the nursing units and outside patient rooms. We must all remain vigilant about isolation precautions, personal protective equipment requirements, and the latest procedures as we are in the hospital or providing care to patients.
- Hand hygiene is of the utmost importance, especially as we enter flu season. UM BWMC has hand hygiene champions on every nursing unit who complete and report upon their observations so we can monitor our organizational compliance. Thank you for doing your part.
- If you have any questions or need to reach our Infection Prevention Department, call 410-787-4597 during business hours (8 am – 4 pm), and 240-755-9353 after hours.

COVID-19 Resources for Medical Staff Members QUICK REFERENCE

UMMS Clinical Policies and Procedures	covid.umms.org
COVID-19 Response Site	umms.org/covid-response-site
PortfolioMD	umbwmc.org/healthcare-professionals/portfolio.md
Visitor Policy Restrictions	umbwmc.org/safe
Nurse Call Line	1-888-713-0711 • 24/7
Prevention Department	410-787-4597 • Business Hours (8 AM – 4 PM) 240-755-9353 • After Hours



The Power of Caring

Something special is woven into the fabric of UM Baltimore Washington Medical Center. You can see it and feel it through our team’s exceptional clinical expertise, and daily acts of kindness and compassion: the warmth of a comforting touch, the appreciation of an attentive ear, the relief found with a caring word. Our health care team continues to rise to challenges of COVID-19 with a focus on teamwork, innovation, and resiliency and a steadfast commitment to deliver the highest quality healthcare to our community.

We like to call this The Power of Caring.

Over the next few years, we are investing in The Power of Caring to meet the changing needs of our community. In addition to expanding programs and services in the hospital, we’re constructing a brand new, state-of-the-art Outpatient Care Building on the campus of UM BWMC. This will allow greater, more convenient access to health services and other programs that promote wellness across the community every day — so you can continue to receive the care and support you need when, where, and how you need it.

The new 101,451 square foot Outpatient Care Building will offer:

- Expanded UM Center for Diabetes and Endocrinology
- Expanded Courtney Conference Center

- Convenient, modern space for Vascular, Neurosciences, and Orthopaedic outpatient services
- Retail pharmacy providing faster, easier access to medications
- Wellness Center for community programs and initiatives to foster health and well-being
- Employee Learning Center, featuring an innovative simulation lab, to enhance our focus on workforce development and to enhance clinical training opportunities

To learn more about The Power of Caring and our plans, and to find out how you can help make a difference, please visit: umbwmc.org/giving

Thank You to Our Community Partners for Your Support during COVID-19

UM BWMC continues to be on the front-line, rising to the health care challenges created by COVID-19, and carrying out our critical mission of providing the highest quality care to our community.

During this time, we have seen local businesses, restaurants, national companies, neighborhood associations, churches, schools, nail salons, social leagues, grocery stores, and dozens more provide meaningful donations and messages to our health care heroes. Many of these donations have also come directly from you — our medical staff members.

To date, we have received over **14,000 meal donations** — some **16,000 face masks**, more than **5,000 face shields**, **56,000 gloves**, over **100 new pajamas**, **3,500 candy bars**, **1,100 Easter lilies**, **2,500 snack bags**, and so many other incredible donations to provide our health care heroes the care and sustenance during these trying times.

This support has allowed us to continue to deliver meals and PPE to our front-line, provide resources to our Employee Resiliency Center, and distribute safety Discharge Kits for higher-risk patients, among other COVID-19 initiatives.

We are filled with gratitude to know that while we have always been here for our community, our community is here for us, as well. Thank you for your support!

BWMC Foundation Thanks Our Corporate Partners

M&T Bank

Strategic Factory

Sandy Spring Bank

Hospice of the Chesapeake

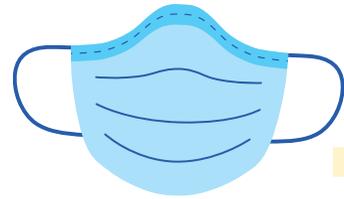
Baltimore Washington Emergency Physicians

First National Bank



14,000+

16,000



5,000+

56,000



Thank you!

To learn more about the BWMC Foundation and how you can support our mission, please visit: umbwmc.org/giving.



Culture of Safety

AT UM BWMC

Earlier this year, UM BWMC completed the Culture of Safety Survey, which is a bi-annual survey conducted to query hospital staff about the culture of safety within UM BWMC. The survey was conducted across the University of Maryland Medical System. The survey measures staff’s opinions about our safety culture to identify strengths and areas for improvement, to evaluate the impact of patient safety initiatives, to raise awareness about patient safety, and to fulfill Leapfrog and Joint Commission requirements.

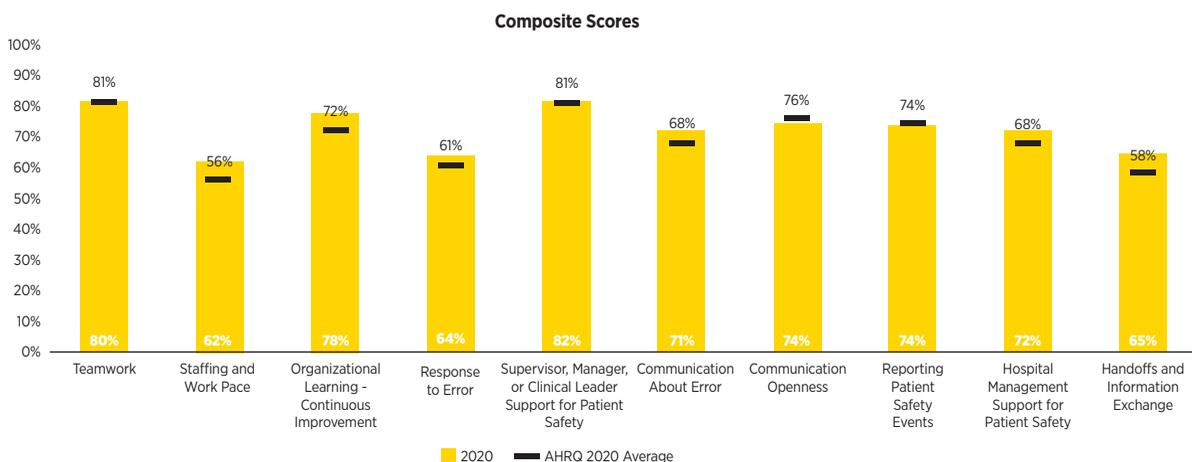
This year UM BWMC had a 52% response rate, which is impressive considering this survey was conducted during the initial COVID-19 response. All but three of the survey question responses were at or above the Agency for Healthcare Research and Quality (AHRQ) average for 2020. Below are some highlights from the survey results:

Highest Scoring Questions:

- “During busy times, staff in this unit help each other.” **88%**
- “In this unit, we work together as an effective team.” **87%**
- “My supervisor, manager, or clinical leader takes action to address patient safety concerns that are brought to their attention.” **87%**

Our Areas of Focus Moving Forward:

- Teamwork
- Communication openness
- Reporting patient safety events



This graph shows the composite scores for the question categories. UM BWMC’s favorable response rate is shown in white at the bottom of each bar, and the AHRQ 2020 average is shown in black at the top of each bar.

UM BWMC leadership will review the survey results in detail, distribute results to front-line staff, and develop action plans based on our areas of opportunity. We strive for patient safety to be engrained in a “Just Culture” at UM BWMC, and it is a top priority for team members across the organization. Safety is not just a check of the box — it is who we are and what we do in every patient encounter. If you have any questions about the survey results or would like to share ideas, please contact our patient safety officer Julie Blackburn, RN, MSN at 410-553-8046 or juliablackburn@umm.edu.



Dr. David Lauver Receives Larry Linder UM BWMC Physician of the Year Award

Congratulations to this year's Larry Linder UM BWMC Physician of the Year Award, David Lauver, MD. Dr. Lauver has been a tremendous asset to our organization since he joined the medical staff in 2017. As the Medical Director of the Adfinitas inpatient team, he very quickly gained the respect of his colleagues as well as the nursing staff. He was nominated by multiple teammates who had wonderful things to say about his character and work ethic.

A few excerpts:



"Dr. Lauver is a level-headed leader, excellent clinical doctor, and superb team member!"



"He is very attentive to details and is truly a change agent for UM BWMC. He supports nursing and partners to make sustainable change in our areas."



"He is an excellent teacher and shares best practices, and is always respectful to colleagues and team members. The patients he cares for get outstanding medical care."



"Dr. Lauver epitomizes what every practitioner should strive for day in and day out. He always remains calm and understanding with all hospital employees."



"Dr. Lauver is engaged and present. He is thoughtful about improving the quality and care we provide to our patients, reflecting on his knowledge and past experience to influence our work here."



Please join us in congratulating Dr. Lauver on this well-deserved honor.

THANK YOU

to the front line

It takes teamwork to keep Maryland running and our communities safe. Thank you to all of you who continue to show up, despite the uncertainty that each day brings. Being on the front line takes bravery and your commitment has not gone unnoticed. **We are grateful to you all.**



UNIVERSITY of MARYLAND
BALTIMORE WASHINGTON
MEDICAL CENTER

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Do you have an announcement, update or news to share with your medical staff colleagues?

Contact **Luci Gens** in the marketing and communications department to have your news included in the next issue of **Medical Matters** at luci.gens@umm.edu or **410-787-4237**.