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In many respects, you could say that Ryan Clouser’s training and interests have led him to this position.

As a physician in our Medical Intensive Care Unit, Ryan Clouser’s experience has given him a front-row seat to the challenges and rewards of critical care. Working with nurses who are involved in critical care transport, he’s also seen firsthand both the successes and the areas for opportunity in our system of transporting patients around the region.

When the RTS Medical Officer position became available, he felt that it was a good fit for his interests and experience. “I saw it as a great opportunity to work with network hospitals, to help give patients great care close to home.”

He was also very interested in the centralized transfer center feature of the RTS, which he saw as an important way to streamline how we move patients who are critically ill to the closest facility that can help them. “Up until now, a critically ill patient might have to travel the better part of a day to get across the lake. With our new centralized system, patients will be transported more efficiently to the place that is best suited to help them – and is close to home.”

As he immerses himself in his new role, Ryan outlines the progress we’ve made with our Regional Transport System:

- We are working on completing the transfer guidelines for the health network.
- We are steadily ramping up the Regional Transfer Center. Elizabethtown, site of an RTS pilot program, will soon be joined by other Network partners in the Center.
- We are finalizing transfer protocols for the transport teams, standardizing how we manage patients with different conditions while they are being transported.

He also highlights the challenges: Continuing to build relationships, making sure collaboration and communication are going smoothly, and incorporating the new transfer center into the Network function are all important components of future success.

“My dream is that once we have established better coordination across the region, transporting patients more efficiently and with high quality, reducing transport times, we will be using the resources of our Network more efficiently. As a physician you only have an impact on the 20 or so patients on your unit. This is a way of making a huge impact.”

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**UVM Health Network and Dartmouth-Hitchcock Enter Air Transport Agreement**

Hospitalized patients who need lifesaving care available only at another hospital in the region will benefit from a new collaboration between the University of Vermont Health Network and Dartmouth-Hitchcock Health.

As part of an ongoing commitment to provide access to high-quality care for patients through stronger connections between the region’s hospitals, UVM Health Network has signed a contract to staff a helicopter provided by the Dartmouth-Hitchcock Advanced Response Team (DHART)’s air ambulance program. Dartmouth-Hitchcock will oversee the program, leveraging its over two decades of experience operating a premier air ambulance program in northern New England. This is the latest step in the development by UVM Health Network of a comprehensive Regional Transport System (RTS), and will allow medical experts to better respond when minutes matter.

Currently, hospitals in the region rely mainly on ground ambulance service for critical care transportation between facilities, which can mean hundreds of miles of travel and a prolonged time to lifesaving care.

“This approach is exciting because it values partnership over ownership,” said Eileen Whalen, MHA, RN, president and chief operating officer at the UVM Medical Center. “All of our region’s hospitals believe that our number one responsibility is to the patients and families we serve, and we are working together to create the best system to meet their needs.”

It is anticipated that the helicopter service will be operational as part of the Regional Transport System in July 2018.
Living with a Chronic Health Condition?

Join the Stress Management and Resiliency Training (SMART) research study — a mind body program for improved health and resiliency.

SMART is a free, confidential program consisting of eight weekly, two-hour group sessions for people living with a chronic health condition. Learn how to manage stress, regain a sense of control, reduce medical symptoms and enhance your quality of life.

As a SMART program participant, you'll learn a variety of mind body practices and self-care interventions:

- How to recognize personal patterns of response to stress
- Meditative techniques that help elicit the Relaxation Response, the body’s innate stress buffer
- How to change thought patterns and emotional outlook by shifting from stress-based to reliance-based thinking
- Techniques to improve eating, sleep and physical activity

Conducted under the direction of Jane Nathan, PhD, this training and research is funded through the UVM Medical Center Fund at no cost to participants (a $550 value each). SMART groups are confidential with research focusing on improving resilience and wellbeing for people living with chronic conditions.

PROGRAM DATES:
Every Tuesday
January 16 – March 6, 2018
Time: 5:30-7:30 pm

To apply for the program or learn more, call (802) 847-1089 or email: StressManagement@UVMHealth.org

One for All!

Employees Extend a Helping Hand at Home and Abroad

2017

We hope you will enjoy One for All, a publication that celebrates some of the work of your colleagues, who help others beyond work, both home and abroad. You can flip through the publication at the link below, or, if you’d like a copy, please email: Eleanor.osborne@uvmhealth.org

FAYE STRAIGHT, RN
Care Coordinator, Cardiology

“My passion is to be there for my patients in their journey of learning about their disease — to help them make educated health decisions that are right for them and their families.”
Empowered to Learn

Larry Sharbonneau’s nursing career was sparked by his encounter with a nurse in the Emergency Department.

Lying on an exam table with an injured foot, Larry squirmed every time the physician tried to examine him because it tickled. Finally, a nurse came forward. “Mr. Sharbonneau,” she said, “how can you help us help you?”

That simple question – reflecting the essential role patients play in the care we provide – not only turned the encounter around: it started Larry thinking about becoming a nurse.

Eventually he turned thought into action, earning his LPN at the Fanny Allen Memorial School for Practical Nursing (now Vermont Technical College). After graduating, he worked in a series of nursing homes, where, as he says today, “I learned a lot about history by stepping into the worlds of these people and hearing their stories.”

That ability to connect with his patients has been a common thread throughout Larry’s nursing career.

Later, working at Gifford Memorial Hospital, Larry took the advice of his colleagues and decided to go back to school to earn his RN. One year later, he landed on McClure 5.

It’s been home ever since.

“I love the energy,” he says. “Every day you’re learning something. You see such a wide range of patients from diverse backgrounds, and it’s our job to address their concerns and support their decisions.”

Larry is now on the brink of earning his Bachelors in Nursing (BSN) – a four-year degree. His RN to BSN journey has provided him with a broader understanding of his patients on McClure 5, and greater confidence in his training and skills.

And while he’s been working full-time and studying, he’s been an integral part of our efforts to improve patient care and create more opportunities for our nurses. He’s working as part of a team on our efforts to create a culture of practice excellence through the evidence-based ANCC Magnet program. Magnet designation is given by the American Nurses’ Credentialing Center to hospitals that satisfy a set of criteria designed to measure the strength and outcomes. Larry has been part of a task force to develop patient-centered reporting, and he’s co-chaired the Cardiovascular Service Line in our new nursing professional governance structure.

“The Institute for Healthcare Improvement now includes ‘joy in the workplace’ as an essential component of high-quality health care. Over the past two years, our focus has been on nursing quality and safety outcomes to create structures in which nurses have a greater voice in decision-making. By putting in place a shared governance structure and encouraging advancements in nurse education, we are building a culture in which every aspect of our nurses’ careers are a key element in our success.”

KATE FITZPATRICK, CHIEF NURSING OFFICER

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KATE FITZPATRICK, CHIEF NURSING OFFICER
Decking the Halls
Staff on Baird 1 took advantage of the season to provide doorway inspiration.

Facilities Dresses Badly, Does Good
Facilities staff took advantage of the season to wear their ugliest sweaters while supporting the Chittenden Emergency Food Shelf. In all, they donated 688 pounds of food to the local non-profit.

Transplant & Nephrology Share in the Spirit of Ugly Sweaters
A Conversation with Mary Cushman, MD

Mary Cushman, MD, is a hematologist at the UVM Medical Center and a professor of Medicine and Pathology at the Larner College of Medicine. Dr. Cushman also serves as the Medical Director of the Thrombosis and Hemostasis Program.

Q: What made you choose hematology?
A: It was almost by accident. I started out interested in Oncology. At the time I was thinking about being a breast cancer researcher, but during my first year of my hem/onc fellowship here I became interested in hematology. What intrigued me was the tremendous variety to the field of hematology - there’s a lot of detective work, being creative, solving problems - it’s all about putting together little pieces of information to come up with a solution for the patient. You really have to know everything going on with the patient; you have to tailor the treatment for each patient. In the end, it’s really a deeply rewarding partnership with the patient.

Q: Can you talk about the research you’ve been involved in?
A: Our team in hematology and pathology has been working on defining risk factors for venous thrombosis (VTE). We’ve participated in many large national studies, following thousands of people nationally over many years. Our research lab at UVM does the central lab work for these studies. We relate baseline characteristics such as exercise, diet, health habits, medical information and lab parameters to outcomes in order to determine risk factors for people developing a blood clot. We’ve published nearly 100 papers on risk factors for VTE over the years. One of the more recent ones was connecting the genetics of taller height to thrombosis risk. We also published papers on why people with obesity or with longer legs have a higher risk of developing blood clots. So, as a team, we’re really on the cutting edge of what’s out there, and this benefits our patients.

Recently I was named editor-in-chief of Research and Practice in Thrombosis and Haemostasis, an online journal available to all that provides a platform for science and discourse among researchers, clinicians and patients through a broad array of articles in thrombosis, hemostasis and related areas. We are using Twitter to promote discussion and build on the open style of this publication (@RPTHJournal). I hope that this approach to research and science news can help physicians, and allow patients access to better care.

Q: What is some of the new thinking about blood clots?
A: For many years, there wasn’t that much awareness among people about how blood clots form. Then, in the 90s, there was some publicity around young women on birth control who were developing pulmonary embolism (PE); and around the risks of flying and developing a deep vein thrombosis (DVT) in the leg. This helped to put the disease on the public’s radar, but awareness is still lower than many other diseases, with only about half of people knowing about it. I am fortunate to work with the American Heart Association on this issue. When I explain how clots form to my patients, I use the analogy of a pipe. Blood has to travel up against gravity through the pipes, which in and of itself is a challenge. If you are immobilized for any reason, whether it’s sitting...
on a long flight or being bedridden, this increases the risks of a clot forming, blocking the flow of blood. And, because all blood travels from the veins ultimately to the lungs to get oxygen put back in, a life-threatening pulmonary embolism occurs if the clot breaks free from the leg vein.

One of the big shifts in our understanding of VTE is the recognition that it is a chronic disease. People who have developed a blood clot often need to stay on anticoagulation medicine long-term. And this is manageable, because now there are several lower-dose medications that are safe and effective to take long-term. This is one of the many reasons it’s important, if you have developed a VTE, to work with a physician who is current on the latest treatments.

Another shift in the care of people with blood clots is the fact that we are able to treat patients on an outpatient basis, which is not only more convenient for the patient, but reduces the risks associated with a hospital stay. Again, the role of newer medications is important here – as is our work with the Emergency Department and primary care providers, establishing a network of care so that a blood clot is recognized early on, and care is handled through the appropriate providers. We at the UVM Medical Center are really ahead of the curve in this area.

Q: What do you want patients to know about blood clots and how we treat them here at the UVM Medical Center?

A: First of all, patients should know the symptoms to look out for – unexplained swelling/redness in the legs, chest pain or shortness of breath. It’s very important to be seen as soon as possible to rule out a blood clot in the leg (DVT) or pulmonary embolism. I also want our community to know about the excellent care the UVM Medical Center provides in the treatment of blood clots. We are really leading the nation in a lot of this work. Our long-term participation in national studies has given us a deep and broad knowledge of the latest thinking in the field. It’s why I went into hematology, and why I continue to be both challenged and rewarded by my work. But most importantly, it’s great for our patients.

Annual Pie Toss Once Again Brings out the Kid in All of Us

A brave collection of souls once again stepped up for kids, for the annual Pie Toss. Enjoy some of the fun in the slideshow below:

Click to open.

CHRISTOPHER TREVINO, MD
Resident, Neurology

“I am humbled daily to work with patients with neurologic disease; their courage and perseverance motivate me. As a teacher and guide, we navigate together the most difficult challenges they face.”
HOLLY VANWINKLE
Primary Care Practice Supervisor,
Family Medicine Milton

“My job is to ensure patients receive the care and services they need. I am appreciative of the opportunity to focus on quality and safety while meeting the needs of patients, families, staff and providers.”
Celebrating Our Younger Selves

“I am fulfilled when my patients understand their treatment plan and can make informed health care decisions.”

Michelle Gorman, RN
Nurse Educator, Inpatient Cardiology

“Educating patients is my passion.”

FACES of The University of Vermont Medical Center

Allison Oskar
Bruce Leavitt, MD
Steve & Nina Warren
Elizabeth Cannizzaro
Angelique Temple

Michelle Gorman, RN
Nurse Educator, Inpatient Cardiology

“Educating patients is my passion. I am fulfilled when my patients understand their treatment plan and can make informed health care decisions.”
Celebrating Our Younger Selves  continued
Celebrating Our Younger Selves continued

Joshua Nickerson

Sue Victory

Christina McCaffrey

Hayley Contois

Penrose Jackson

Lyndsie Shover (left) and Miranda Wick

Heather Sheppard
Celebrating Our Younger Selves continued

FACES
of The University of Vermont Medical Center

RICK VINCENT
SVP/Chief Financial Officer
“My children were born here. My wife, parents, and grandparents have all been treated here. It is because of them and the needs of our community that behind every decision and action, is the drive to ensure this organization is here for many generations to come.”

Mindful Eating
Read this in-depth blog post about how to change your relationship with food through mindful eating.
Berry Receives Madison-Deane Award for Excellence in End-of-Life Care

The Madison-Deane Education Fund presented the inaugural Madison-Deane Award for Excellence in End-of-Life Care to Zail Berry, MD, MPH, at the program’s “Evening of Gratitude” event held October 24, 2017 at Burlington Country Club.

The VNA Madison-Deane Award for Excellence in End-of-Life Care recognizes a Vermont individual, group or organization that exemplifies the original mission and vision of MDI, thereby continuing the legacy of the program’s namesakes, James Madison, MD and Robert Deane, MD and their intent.

“Since 1997, Dr. Berry has been an integral part of the Madison-Deane Initiative, a friend and tireless ambassador,” said Madison and Deane. “In addition to her active role in our annual presentations, she has provided the faculty support for the Madison Deane Initiative’s educational palliative care series for UVM medical students for the past 10 years.”

Vermont Adaptive Ski & Sports Names Maggie Holt 2017 Volunteer of the Year

Maggie Holt, PT, pictured right, center, has received the Vermont Adaptive Ski and Sports 2017 Volunteer of the Year Award. Maggie was nominated for her immeasurable dedication and efforts to help people with disabilities and special needs enjoy sports and recreation throughout Vermont.

“Her skills as a physical therapist reflect in her ability to assess and teach participants with a variety of physical disabilities,” said Maggie Burke, managing director at Vermont Adaptive.

Over the past two years, Holt has raised more than $2,000 through her participation in the Long Trail Century Ride to benefit Vermont Adaptive. She also volunteers her time throughout the year. She has helped Vermont Adaptive start and implement a new program, making it possible for the organization to serve more athletes and continue to fulfill its mission.
Working Together,
We Improve People’s Lives

“Dr. Garrison is superb! He has been my doctor in a number of different circumstances, including inpatient care, outpatient care, back-up care and more. I have a very rare condition that requires medical intervention, but more than anything it requires medical care from doctors who know my condition. Dr. Garrison is kind, caring, extremely knowledgeable and intelligent; he’s taken the time to get to know my medical requirements, he always seems to have time for my care. He’s laid back, a team player and works with me to get the best health care and outcomes. He fought hard for me when I had a health problem the other doctors simply didn’t believe and he advocated and pushed until he was able to get the problem surgically addressed. I cannot speak more highly of him…”

—Rachel Phillips

INTEGRITY & COMPLIANCE INFORMATION
The University of Vermont Medical Center has established a confidential disclosure mechanism through its Integrity and Compliance Hot Line, a toll-free telephone line, to enable employees, residents, staff and patients to report instances of noncompliance and/or make inquiries on compliance issues. The Compliance Hot Line can be reached at: (800) 466-7131 or (802) 847-9430.

Fanny Allen Campus Celebrates the Season
The Fanny Allen Campus celebrated the beginning of the holiday season with the annual tree lighting ceremony on December 6. Dawn LeBaron, vice president, Hospital Services, and Sister Karen Posniak of Spiritual Care reflected upon the symbolism of light and the Christmas Season – a sign of hope, healing and generosity for all. The Green Mountain Chorus added to the festive gathering by leading the group in Christmas Carols.