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Wellspring

Excellence *in* Nursing

Creating Connections with
Our Patients, the NorthBay Way



Work of Heart

The morning the call came is a morning that will be remembered for a very long time — maybe forever.

A conference room in Fairfield and one in Vacaville were filled. We had gathered to eavesdrop. Kathy Richerson, Chief Nursing Officer, was on one end of the call. On the other was the leader of a respected national organization that had scrutinized every step in our five-year journey.

It was epic news: We had earned the coveted and extremely difficult-to-achieve “Magnet” designation for quality patient care and nursing excellence.

We were told we could not cheer while the call was in progress, so we all silently celebrated. Once the call was completed, cheers erupted and tears flowed.

Our nurses were also cited for innovations in professional nursing practice, their advanced education and their community involvement.

Long from now, folks will look back and recognize it as a landmark day. It is also an exclamation point on a 43-year career in nursing for Kathy Richerson, who has been with NorthBay Healthcare for the past 15 years. An era ends when she officially retires July 31.

I have no doubt the legacy will continue as the next generation of nursing leaders steps up to take the reins. This national distinction for our nurses is embedded in the culture of our organization. It’s not a one-time triumph. You see, for our dedicated cadre of healthcare professionals, it is now the NorthBay Way.

We believe we are fundamentally different than other healthcare providers here in Solano County and beyond. When it comes to nursing, we use a professional model rather than what I call an industrial model. This great “Magnet” distinction for NorthBay Medical Center and NorthBay VacaValley Hospital is evidence of that.

I’m so proud of Kathy for culminating a career by adding this jewel to her crown. I’m just as honored to work with such a competent, dedicated, compassionate corps of dazzling professionals.

In this issue of *Wellspring*, we want to explain how 800 nurses are different and how they are making a difference. Enjoy!

Gary Passama
President and Chief Executive Officer



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Patti Stutte, R.N., tends to the needs of patient Elizabeth Benz of Vacaville in the Emergency Department at VacaValley Hospital this spring. Patti, a longtime NorthBay Healthcare Emergency Department nurse, joins colleagues Lisa Cann and Dominique Herndon in sharing a glimpse of the hectic, busy, crazy, hyper world of emergency care.



16 Comfort Amid Chaos

NorthBay Healthcare Hospice nurses are there to help patients live as comfortably and independently as possible in their final days.

Nursing

Compassionate Care Defined


Webster defines a nurse as someone who cares for the sick, injured or aged, but the job description of today’s nurse is a lot more complex.

They are master communicators, efficiently dispensing medication, advice and directions, following the orders of physicians and meeting the needs of patients, families and visitors. They are advocates at the bedside, giving the patient a voice when they cannot speak.

They may deliver a sandwich or fluff a pillow, but they are also computer whizzes, mastering and updating medical records as needed. Some of them direct hospital traffic, deciding what patient goes where and when. They know how to insert tubes, give vaccines, take your blood pressure and respond to an emergency. They’re the kind of people you’d want as a neighbor and have been known to stop on the freeway to give CPR to a stranger.

At NorthBay Healthcare, they may turn up in surprising places, with roles in human resources, technology and even licensing. They manage complex services such as neurology and cardiovascular. Others focus on helping patients with complex cases navigate the system. Still others see patients in our Specialty and Center for Primary Care facilities.

NorthBay Healthcare has more than 800 nurses who define compassionate care in a nonprofit organization that believes in delivering advanced medicine, close to home. We couldn’t do it without them.

In this issue of *Wellspring*, it’s our honor to share their stories, their mission, their dreams and accomplishments. 

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NorthBay has launched major projects at both of our hospital campuses. Check out the architect’s renderings on our up-and-coming Wellness Center in Vacaville and a three-story modernization project in Fairfield.

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The Journey to Magnet

It's Not Just a Designation, It's *the* Destination

The five-year journey to Magnet inspired many changes at NorthBay.

Magnet. To the general public, the word probably conjures images of a U-shaped children's toy. But to any R.N. worth her salt it means one thing: Nursing Excellence.

At NorthBay Healthcare, it has meant a five-year journey that involved hundreds of nurses and clinical colleagues all working together to earn the coveted Magnet designation from the American Nurses Credentialing Center (ANCC), something only 6.6 percent of hospitals in the United States can claim.

To do so, a facility must exhibit exemplary patient care, positive clinical outcomes and innovations in professional nursing practices.

The announcement that was made on Dec. 18, 2014, launched a months-long celebration at NorthBay, which will culminate in October when a contingent of nurses celebrates the awarding of the designation at the national Magnet conference in Atlanta.

And it's a nice punctuation mark on a 43-year career in nursing for Vice President and Chief Nursing Officer Kathy Richerson, who has been with NorthBay Healthcare for the past 15 years, and will officially retire July 31.

"When I started here, I had a vision of what we could accomplish," says Kathy.



NorthBay Healthcare President/CEO Gary Passama, center, joins the critical care nurses cheering the Magnet designation.

The long laundry list included creating a cardiovascular program, establishing NorthBay Medical Center as a trauma center, and elevating nursing services.

"I think we've done all those things and more," she says with pride.

The five-year journey to Magnet inspired many changes at NorthBay, from the creation of a Shared Governance structure made of nearly 100 nursing and clinical colleagues, to the establishment of an Evidence-Based Practice & Nursing Research Fellowship Program.

Shared Governance makes recommendations to management on all nursing-related issues and patient care policy, while the Evidence-Based Practice & Nursing Research Fellowship conducts nursing research and evidence-based practice projects to contribute

new knowledge and implement best practices in patient care.

Envisioning, empowering and documenting all along the way was Chris Stevenson, R.N., NorthBay's Magnet program director.

"It was truly a labor of love to help our organization become a Magnet organization," says Chris, who compiled the 13.75-inch-thick document that chronicled improvement and innovation in nursing practices at NorthBay for review by the ANNC.

She is already focused on new and exciting improvements to help NorthBay maintain the designation, as standards continue to rise.

"Magnet designation affirms the value of the work our nurses do every day, caring for members of the community who entrust us with their healthcare needs," says Chris. ✨

Chris Stevenson, R.N., NorthBay's Magnet program director, left, and Vice President and Chief Nursing Officer Kathy Richerson celebrate after receiving the coveted Magnet designation from the American Nurses Credentialing Center.

Problem-Solver Supreme

Administrative Coordinator Directs Hospital's Traffic

It's just past 5 p.m. on a Friday night and, as usual, the phone in Kyle Fowler's NorthBay Medical Center office is getting a robust workout. "There are a million things in my head right now," he says, before taking his 12th call in roughly 10 minutes. This one is from a fellow nurse at VacaValley Hospital. She informs him that Dr. Rehman has been tending to a patient suffering from spinal-cord compression and

wants the patient transferred to the Intensive Care Unit in Fairfield. "I will make it happen," Kyle replies in a Southern drawl that is as resonant as it is reassuring.

Making things happen is Kyle's specialty. He's an Administrative Coordinator, or AC—a supervisor assigned to communicate with doctors and nurses, and various departments, to make sure things are running smoothly throughout

his 4-to-midnight shift. He's one of 20-plus ACs for NorthBay Healthcare who manage the system's two hospitals 24/7, 365 days a year.

In some ways, the job can be likened to a traffic cop in that he's tasked with "keeping the flow going" while assigning beds and rooms to patients. In other ways, he's a "dad or mom of the hospital"—someone who mediates conflicts, deals with safety concerns and provides advice and feedback, while pitching in anywhere he's needed.

"This job is all about problem-solving," says Kyle. "We may not always know what the solutions are right off the bat, but we have to wade our way through them. And this is often the busiest time of the day. All the managers and directors are going home and everyone's leaning on you."

And Kyle, easygoing and cordial, doesn't mind being leaned on. A native of tiny Buckeye, La., he honed a solid work ethic as a travel nurse and a 20-year member of the U.S. Army Reserve. Before arriving in Fairfield two years ago, he performed AC-like duties at Barton Memorial Hospital in South Lake Tahoe.

As a member of the NorthBay team, he strives to lead by example.

"I'm a firm believer that, if there's work to be done, you do it—no matter who you are," he says. "None of us are too good to get our hands dirty. People around here know that I'll jump in if they need me."

Indeed, Kyle has been known to embrace problems both big and small. To wit: Recently, he scrubbed in to help ICU doctors and nurses with a complicated situation involving an open-heart patient. Then there was the night he made a crucial decision to lock down the hospital when a verbal altercation in the parking lot escalated to an ominous level. In doing so, he cited the safety of the patients and his fellow employees.

On the other hand, he has also delivered after-hours meals to patients, made late-night runs to the supply warehouse, pushed beds and even unclogged commodes. And now, he's taking a call from someone in the operating room who reports that the ice machine is on the fritz. "I'm on it. I'll get some ice to you," he promises.

In his role as administrative coordinator, Kyle Fowler, R.N., confers with Joan Phipps, R.N., during the night shift.

When the phone calls temporarily subside, Kyle goes on the move, patrolling the hospital and putting plenty of mileage on his Dansko shoes. He starts his rounds in the ICU, proceeds to Labor and Delivery, and the Neonatal Intensive Care Unit before winding up in the Emergency Department. He touches base with everyone within earshot, greeting them with a warm smile. "Y'all need anything?" he asks. "Call us if you do."

Kyle is a self-described "social animal" who loves to talk and spread cheer. His fellow staff members clearly appreciate that he's on duty.

"He's not a good AC, he's a great AC," says Cheryle Lacuata, an R.N. in NorthBay's Surgical Unit 1600. "He's open and easy to talk to. He keeps us informed. Plus, he treats everybody the way they want to be treated—how we all feel we should be treated. Having someone like him around makes even the worst day tolerable."

Leslee Fowler (no relation to Kyle), an Emergency Department nurse, echoes that sentiment.

"I know that I can tell him something and feel absolute confidence that it will get done," she says. "He's very helpful in the ED, especially if things become chaotic."

Desi Bray, a NorthBay security officer, cites Kyle's Southern charm as a key factor in his ability to successfully interact with the staff.

"He'd make a good cop. He knows how to talk to people in a way that they'll get the things done," he says. "In the business, we call it verbal judo. It's a skill in which you're able to talk to someone in a tone and manner that gets the job done without having to be abrasive or belligerent."

So far tonight, Kyle's verbal judo skills haven't been put to the test, and that's a good thing. After making his rounds, he returns to his office, where he plants himself in front of two computer screens filled with colorful icons that inform him which beds are being currently used and for what purpose. It's his command center—the system that allows him to stay in touch with the lead nurses and the hospital's minute-by-minute activities.

"I feel that 99.9 percent of problems in the workplace are caused by miscommunication," he says. "My focus is: Clear, concise communication."

To that end, Kyle has spoken personally with Dr. Rehman to get all the details right and ensure there was a smooth transition of care for his patient. In addition, he has had numerous conversations with the ED in order to keep things humming.

Oh, and, of course, he has jumped back on the phone to let the OR know that its minor problem has been resolved. "Hey, it's Kyle," he says. "Your ice is on the way." ❄️

"This job is all about problem-solving. We may not always know what the solutions are right off the bat, but we have to wade our way through them."

—Kyle Fowler, administrative coordinator



Kyle Fowler, R.N., stopped by the Intensive Care Unit to check on how Moira Nikaido and her husband Ronald were doing following his heart surgery.



A Busy Time for Those Working the Wee Hours

Still *of the* Night



Late-shift workers need to be mentally strong and confident, have good assessment skills, have a strong support system at home and be able to sleep in the daytime.

You could say that Shirelle Dickinson, R.N., lead nurse in the Acute Care Unit at NorthBay Medical Center, was born to work nights.

The oldest of six children, Shirelle is the only member of her family to have been delivered into the world while the stars were out. Apparently, that's her comfort zone. "My mom has told me all my life that I'm a night person—and I believe it," she says.

Many people dread the thought of toiling away in the wee morning hours, but fortunately, there are those who thrive when the skies go dark. For them, night time is the best time.

"It may sound weird to others, but I really love it," says Diane Reilly, an acute care nurse for NorthBay who works from 7 p.m. to 7:30 a.m. three nights a week.

It's a sentiment echoed by Melissa Kerry, a clinical nurse at VacaValley Hospital who has done the late shift off and on for 12 years. "It works for me because I can spend more time with my family and I'm able to attend my children's activities," she says.

The late shifts have their inherent downsides: Night nurses deal with many more trauma cases than their day-time counterparts. And the pain experienced by patients is often greater at night.

But the late shift also has its benefits. Among them is more alone time with patients and a greater chance to bond. "It's usually just you and the patient at night," Shirelle points out. "Sometimes you get an opportunity to listen to their story and you learn about them and their family."

And, adds Diane, "You're the one who is there to tuck them in for bed."

Another plus, the nocturnal nurses point out, is the tight-knit team spirit that exists during late shifts.

"You have less traffic with other professionals such as physicians, case workers, administrators and physical therapists," says Shirelle. "So the people you work with become like family. You really have to rely on each other, and your knowledge and experience."

"There are not as many distractions as there are during the day shift," Melissa adds.

What kind of qualities go into making a great late-shift worker? "You have to be mentally strong and confident. You need good assessment skills," Diane says. "And it helps to have a good support system at home."

Of course, it also helps to have the right kind of snooze patterns to cope with a hard day's night. "You have to have the ability to stay awake when everyone is sleeping," says Shirelle, "and the ability to sleep during the day so you can stay up all night." ❄



Shirelle Dickinson, R.N.

Nurse practitioners have a master's degree or higher in nursing or a related field as well as advanced clinical training.



Nurse Practitioner Amy Ziegler chats with one of her patients, Joaquin Madrigal of Rio Vista.

Bridging the Gap Between Doctors & Nurses

Most people know that an R.N. is a registered nurse, but what about the N.P.s that are starting to pop up on employee badges across NorthBay Healthcare's system?

It stands for Nurse Practitioner, and it means that a nurse has gone on to receive a master's degree or higher in nursing or a related field as well as advanced clinical training. At more and more hospitals across the country, they serve as a bridge between nurses and the physician, working to streamline the patient experience.

In the last four years at NorthBay, the number of N.P.s has more than doubled, says Amy Ziegler, director of Advanced Practice Nursing/Allied Health Professionals. There are N.P.s in oncology, palliative care, urology, neurology, the Neonatal Intensive Care Unit, orthopedics, diabetes and endocrinology and primary care.

Amy should know. She helped pave the way for many of them, according to Rhonda Martin, assistant vice president of Nursing Operations.

"Amy has established the great benefit of having the extended role in the hospital. That usefulness has become transparent and has been embraced by physicians," she notes. "Now every department wants one."

N.P.s can write prescriptions, adjust medications and even discharge a patient, explains Amy. "It can take some of the load off physicians, and make the process move a lot faster. In surgery, for example, I can keep an eye on the patient, monitor their blood pressure, and make adjustments if their heart rate is too high or too low. That allows the surgeon to concentrate on the surgery."

N.P.s come under the heading of "Advance Practice Nurses," a

title they share with Clinical Nurse Specialists or CNS.

"These are also highly educated nurses who build our programs in the hospitals," explains Rhonda. "We couldn't do it without them."

According to Amy, the CNS figures out the processes and equipment needed, they monitor safety guidelines and make sure teams are on track, educating and updating as needed. "They are key to how NorthBay operates," says Rhonda.

Advance Practice Nurses also played a key role in helping the organization secure its Magnet status, says Amy.

"We identified gaps in care and created the policies and procedures needed to address those gaps," she explains. "Magnet brought them into focus, and it was up to us to make sure our house was in order." ❄

The Evidence is In ▶

Elisa Jang, R.N., has a button that sums it all up. The words: “Because we’ve always done it that way!” have a red slash through them. Her message to NorthBay Healthcare nurses? Challenge the system.

No, Elisa is not spearheading an uprising, she’s following the path of Florence Nightingale, the founder of modern nursing, who is considered by many to be the pioneer of Evidence-Based Practice or EBP.

The practice encourages nurses and doctors to find ways to become more efficient and effective, using research to support change.

“EBP is a school of thought that rejects the ‘because we’ve always done it that way,’ argument,” Elisa explains. “Instead, you should be hearing people say ‘question your practice,’ or ‘challenge the status quo.’”

Why would an organization encourage its healthcare professionals to question their work practices?

“Because patients want their provider to use the best healing interventions, based on the highest quality research,” says Elisa, clinical practice manager for NorthBay’s EBP Program. “At NorthBay, we made a commitment to review current findings and incorporate them into our policies, procedures and, most importantly, into our bedside practices.”



When NorthBay decided in 2010 to work toward earning the Magnet designation of nursing excellence, nursing leadership created a formal EBP program.

“It’s not only good for patients,”

Elisa notes, “but studies show long-term benefits, such as improved patient outcomes, avoidance of unnecessary procedures and reduction of complications.”

The first step was to form a council with representatives from each department (roughly 20) who were charged with teaching front line staff about EBP concepts and explaining how nurses could conduct scholarly research to prove or disprove concepts. A critical component was the creation of a fellowship program, which Elisa spent six months developing.

Since the fellowship program launched in January 2011, 14 nurses have undertaken 11 projects or research studies, and their findings have inspired changes, including the way NorthBay Healthcare nurses give inoculations to babies and how critical care patients are weaned off ventilators.



“I love EBP because it is a natural parallel to nursing—the inclusion of good science, paired with a holistic approach to patient care.”

“Successes with our first several projects captured attention from professional organizations, and have fostered buy-in among our nursing staff,” Elisa says.

Each year, two to three nurses interested in scholarly and evidence-based practice research are recruited into the program. “Fellows bring an idea on how to improve quality and patient outcomes to their mentors,” explains Elisa. “The idea can either be an EBP project—which would provide already proven evidence for an intervention that could be incorporated into a work flow—or to conduct nursing research that would create new knowledge.”

Mentors offer advice, with the goal of developing the Fellows’ clinical, leadership, problem-solving and research skills.

Once completed, projects and research papers are submitted for presentation at professional conferences.

“One of the first projects to be completed through the NorthBay EBP program received ‘Best Research Award’ at a national conference, beating out 100 other competitors. It was a shining moment for us,” Elisa says.

It has also put the spotlight on Elisa, who has been asked to share her “EBP” Toolkit with other organizations such as the Mayo Clinic and Good Samaritan’s multi-hospital organization based in Cincinnati. NorthBay recently hosted a delegation from Hoag Orthopedic Institute in Southern California.

Elisa has been with NorthBay Healthcare since 2004, when she was hired as clinical practice manager for critical care services. Since then, she’s seen many changes

Nurses Who Challenge Status Quo Will Improve the Status Quo

implemented, based on EBP projects she’s undertaken. Among them, use of the simulation lab to help nurses improve their clinical competencies, creation of connection safety guidelines, and the creation of a Rapid Response Team. (see story on Page 18)

“I love EBP because it is a natural parallel to nursing—the inclusion of good science, paired with a holistic approach to patient care,” says Elisa. “I love nursing

research, because I am a bookworm at heart. I love science, and I love to read!”

Although she misses being at the bedside of patients, she loves the challenge of sharing her passions and mentoring others to success.

“My goal is to make NorthBay a recognized leader in EBP and nursing research,” she says, “in Solano County and in Northern California.” ✂

CHANGING OUR SYSTEM, ONE STUDY AT A TIME

Nearly a dozen NorthBay nurses have completed NorthBay’s Evidence-Based Practice Fellowships and their projects have already inspired changes in the system. Here are a couple of examples:

Mother’s Touch Eases Pain

NorthBay’s first original nursing research study, “The Impact of Kangaroo Care on Pain in Newborns,” was conducted by Labor & Delivery Nurses Autumn Thacker, R.N., and Barbara Abeling, R.N., in 2011. At the time, it



Barbara Abeling, R.N., left, and Autumn Thacker, R.N.

was common practice for nurses to give newborns their routine injections—such as vitamin K or Hepatitis B—while they lay in warming bassinets.

The NorthBay nurses pointed to the lack of research that indicated untreated pain in newborns could have long-lasting, detrimental effects, and they wondered if they could prove that infants could handle pain better if they were held skin-to-skin in their mothers’ arms during these injections.

“This may seem obvious, but we use evidence to prove a new practice works,” Barbara says, “and our research evidence proved that babies held skin-to-skin experienced less pain overall, and they also appeared to recover from painful stimuli more quickly.” The study received ‘Best Research Award’ at a national conference, beating out 100 other competitors, and has led to a major philosophic shift in mother-baby care at NorthBay.

Healing Power of Music

Can music help patients relax when they are being weaned from mechanical ventilation? That was the question Maureen Allain, R.N., sought to answer in her evidence-based project undertaken in 2014.

Mechanical ventilation is one of the most frequently used treatments in the ICU, but despite its lifesaving nature, it is stressful and patients often need to be sedated while they are intubated. When it’s time to wean them from the ventilator, they are asked to perform breathing exercises, which can cause the patient anxiety and increase their respiratory rate and blood pressure.

Maureen’s project was to introduce soothing music through headphones—already proven to have a calming effect—during the weaning process.

Data collected during the study showed a significant decrease in patient’s blood pressure, heart rate and respiration, and an increase in the number of successful extubations in a group that was able to listen to music during the process.

The outcomes, Maureen’s study suggested, can lead to decreased ICU days, a decrease in ventilator-acquired pneumonia, and decreased costs.

Maureen Allain, R.N. ▶





◀ Anita and Dan Ford, and their baby, Cate, are warmly welcomed by some of the Women's and Children's Services team, including, back row, left to right, Amy Ciraulo, R.N., Katie Lydon, R.N., and Melinda Kabahit, R.N.

Bonding, the Baby-Friendly Way

Each child is unique, so it makes sense that their arrivals would be different, too. Just ask Dan Ford, pharmacy manager at NorthBay Medical Center, and his wife, Anita. Their eldest son was born in 2009 at a large women's hospital in Pennsylvania, while the two youngest saw the world's first light in California.

But night and day were the differences between birth experiences the Fords say they had between the East Coast delivery, and the birthing experiences at NorthBay Medical Center in 2011 and 2015, Dan says.

"As a new parent, you don't know good experiences from bad," Dan says. "But, after our second son was born at NorthBay in 2011, we realized his experience was so much better than our first son's delivery."

When he learned that NorthBay Medical Center had earned a 'Baby-Friendly' designation in August 2014 just before the birth of their daughter, he laughed.

"I thought it was so odd. What we went through here in 2011 wasn't baby friendly? I thought NorthBay had already earned that designation!"

For the Fords, the NorthBay birthing experience—for both their son and daughter—meant lots and lots of caring support from their Labor and Delivery and Mother-Baby nurses and lactation consultants.

"For me, it started the moment we walked in to have our baby," Anita says. "From the nurses to the lab techs, everyone treats you so well, gives you so much emotional support when you're going through labor, and then gives you much positive support and time to bond with your baby after the delivery. They take time to answer all your questions. And then there are the follow-up visits with lactation consultants to assure everything goes well after you go home."

"Our firstborn was instantly bundled up after his birth and whisked right away," Dan recalls. "They brought him back to us maybe a half hour later. When my second son was born, he was wrapped up and handed to me, but when my daughter was born, she was immediately placed on my wife's chest. The nurses' focus was getting the baby into immediate contact with Anita."

"It was a wonderful birth experience," remembers Anita. "Dan was able to cut Cate's cord, and the nurses left us to bond with our daughter."

It was a far cry from her first experience. "I have a vivid memory of the first night after our eldest was born. He had been so fussy, screaming, and having difficulty latching on to nurse. I needed help, but the nurses only wanted to know if they could take him to the nursery. When he finally settled down and fell asleep, it was 4 a.m. At 4:10 a.m., a nurse came in and said she had to take his vitals.

I begged her to wait because he had just fallen asleep, but she insisted. I was in tears."

NorthBay Mother-Baby nurses work around the baby's sleep schedules. "My nurses made note of when Cate fell asleep, and came back four hours later to check her vitals. That meant I was able to get a good stretch of sleep, too. And, they were very good at working with me to help the baby learn to latch on. Even though this was my third time, you forget things," Anita says.

Breastfeeding support is an important part of the Baby-Friendly Designation, says Katie Lydon, director of Women's and Children's Services, who points out that NorthBay's lactation team educates staff and encourages and supports breastfeeding moms. It enables mothers to stay with their healthy babies 24 hours a day after delivery, in addition to that full hour of skin-to-skin contact immediately after birth.

"We've learned that skin-to-skin contact is so important," explains Katie. "We know breastfeeding is one of the best things a new mom can do for her baby. So we've trained our staff to provide support and education to make the effort successful."

NorthBay Medical Center has four certified lactation consultants who are available for one-on-one sessions with new moms. The support doesn't stop there; outpatient support groups and consultations are available after mother and baby leave the hospital.

The idea is to make the entire birthing process a positive experience. "You've been waiting to meet this little person for nine months, and you're almost in shock," says Anita. "But the bonding time means so much and it was such a beautiful moment. We're so happy with our birth experience at NorthBay." ❧

Education at the Heart of Everything

From the time Laura McGuire, R.N., was 3, she knew she wanted to be a nurse. She was only 15 when she became a certified nursing assistant, helping her mother manage a home for the elderly, and later for developmentally disabled adults. By 18, she was living on her own when she met a nurse practitioner who inspired her.

"She really went out of her way to look out for me, and I knew that was what I wanted to do for others."

So she followed that dream, and spent years helping patients in the hospital.

But now, a change of role for a change of heart: She spends her time educating people on how to stay out of the hospital — by staying heart healthy.

"You learn a lot in nursing, but they don't really train you to be an educator," she says.

Yet in her role as the cardiovascular patient care program manager, she often finds herself educating classes of 30 to 40 students on how to perform hands-only CPR, for example.

Last year, Laura and a team from NorthBay Healthcare, including Simulation Center Coordinator Lacy DeQuattro, took that training to the student body of the Fairfield-Suisun Public Safety Academy. In addition to teaching hands-only CPR, they offered a thorough four-hour class to upperclassmen in CPR.

This year, she invited Solano County's STEER (STEMI, Stroke, Trauma, Emergency Education and Readiness) group to join NorthBay in the presentations. "We are ever thankful for your service and providing this life-saving instruction to our cadets as it instills and reiterates confidence, respect and a sense of community with our cadets," Jonathan Randles, instructor at the school, wrote in a letter of thanks to NorthBay.

In the future, Laura hopes to reach out to other schools, community groups and church communities to spread the word and education about heart health. "Heart disease is the No. 1 killer of people across all genders and ages," she notes. "If you could make a difference and stop that, why wouldn't you?"

To that end, she's created a space on NorthBay.org to provide information about heart health, and offer her services as an instructor. She's also created a booklet for NorthBay Healthcare patients to help them recognize the signs and symptoms of a heart attack.

When she's not teaching, she's focused on maintaining NorthBay's accreditation as a Chest Pain Center with Percutaneous Coronary Intervention. "It's very different than bedside nursing," she admits, "but I love the idea that I'm saving lives in a whole new way." ❧



Laura McGuire, R.N.



George Mary is thankful that Karen Loewe, R.N., had his back on Oct. 22, 2014.

Where is George?

Call Saves Life of Cardiac Rehab Patient



You can set your clock by George Mary. The retired U.S. Air Force colonel and dentist keeps a rigid schedule that includes arriving at the NorthBay Cardiac and Pulmonary Rehabilitation department three days a week, promptly at 6:30 a.m.

So when he didn't arrive for his exercise session last Oct. 22, Karen Loewe, R.N., knew something was wrong. George had first been prescribed cardiac rehab following heart surgery in 2002 and he found the program so beneficial that he decided to stay for life.

For 13 years, George had never missed his appointment without calling and he had become part of the cardiac rehab family.

Karen called his home and got no answer. She called David Grant Medical Center to ask if he'd been admitted. He hadn't. She waited, and then called his home again. No answer. The people in his exercise class were also growing concerned.

Time passed and George was still missing. Karen couldn't shake the feeling that something was terribly wrong. She wanted to

George has no memory of what actually happened before he awoke face down on his bathroom floor.

drive to his house but couldn't leave her other patients. So she did the next best thing—she called the Fairfield police and asked them to make a welfare check.

That phone call saved George's life.

"I was never as happy as I was when I heard someone breaking down my front door," George remembers. The 81-year-old Fairfield resident had collapsed on his bathroom floor and was too weak to move.

"All I could see was the policeman's shoes," George says. "He asked if he could help me and I said, 'A glass of water, please.'"

He was taken by ambulance to David Grant, where he spent nine days on antibiotics before being transferred to a rehab facility in Vacaville.

George has no memory of what actually happened before he awoke face down on his bathroom floor.

"I would doze, wake up, and doze some more, but I was too weak to move and very thirsty. I don't know how long I was down," he says. "I owe my life to Karen, because without her call I would still be on that floor."

Karen was overjoyed when she heard that her patient and friend had been found. Her next concern was for his home, probably left open with a broken front door. On her lunch hour she stopped at George's house, only to find his neighbor, Fairfield Mayor Harry Price, busy replacing his lock. After work, she helped Mayor Price further clean the house.

A few days later she was able to visit George in the hospital.

For Karen, it's all a part of taking care of people, something she has loved to do since childhood. "My Dad and brother were ill when I was young, and I always wanted to be a nurse," she says. "I would do it again in a heart-beat and certainly not for the money! Who knew that nurses would be paid so well—when I began nursing that wasn't the case."

Karen earned her bachelor's degree in nursing at Samuel Merritt/St. Mary's College

and began her career there in 1987. (The hospital is now Alta Bates Summit Hospital.)

For 20 years, Karen worked at both Summit and NorthBay Medical Center, mainly to ensure that she kept up her skills as a critical care nurse. She left the Bay Area hospital in 2012 to work full time as the clinical manager of NorthBay Cardiac and Pulmonary Rehabilitation.

George had a long road to recovery, and his doctor is still not sure exactly what caused his collapse. During his stay in a Vacaville rehabilitation facility, he learned to walk again and practice the skills he needed to return home.

Today he's back to his routine working out in NorthBay Medical Center's cardio-pulmonary rehabilitation program, grateful to be under Karen's watchful eye again. ☘

What is

Cardiac & Pulmonary Rehabilitation?

NorthBay Cardiac and Pulmonary Rehabilitation is a medically supervised program that helps improve the health and well-being of patients diagnosed with heart or lung disease.

It is particularly beneficial for patients recovering from heart attacks, the placement of stents, congestive heart failure or heart surgery. Patients with chronic lung or heart disease may find that the program increases their stamina and helps them breathe easier.

The program includes exercise training monitored by specially trained nurses, health education and support to help the patient return to an active life.

The program is nationally certified by the American Association of Cardiovascular and Pulmonary Rehabilitation.

Located within NorthBay Medical Center, the service is available Monday through Friday, from 6:30 a.m. to 3:30 p.m. For more information, please call (707) 646-5072.

NorthBay Joint Replacement Program Coaches Patients Through the Journey

Since 2007, the NorthBay Joint Replacement Program at NorthBay VacaValley Hospital has offered an innovative system of care for patients seeking hip or knee joint replacement. The program focuses on education and preparation prior to surgery followed by comprehensive inpatient care designed to get patients back into the activities they enjoy as quickly as possible.

Prior to surgery, patients attend a class, tour the facility and meet other people who will have replacement procedures on the same day. After surgery, the focus is on getting them up and walking, with friends or family members serving as “coaches.” The camaraderie of the small group of patients helps each of them on their road to recovery. Studies show that patients who recover as a team reach their goals faster with fewer complications.

The NorthBay Joint Replacement Program is nationally accredited by The Joint Commission. It is also a member of the American Joint Replacement Registry—an independent, nonprofit database designed to store comprehensive data about joint replacement procedures to help physicians and artificial joint manufacturers improve the experiences of patients who undergo joint replacement surgery.

For more information about the NorthBay Joint Replacement Program, call Cynthia Giaquinto, R.N., program manager for Orthopedics, at (707) 624-7600.

◀ Susan Anderson-Seibert, R.N., center, celebrates her new hip with Orthopedic Surgeon Andrew Brooks and Cynthia Giaquinto, R.N., program manager of the NorthBay Joint Replacement Program.

taught by Jennifer Larson, R.N. Jennifer became her pre-surgery nurse and prepared her for what was to come.

“I want my patients to be as calm, relaxed and comfortable as possible when they go into surgery,” says Jennifer, a nurse for 20 years. “I remember Susan was very nervous, but I tried to be as thorough as I could when explaining the surgery and what she could expect.”

“Jennifer spent so much time with me,” Susan says. “She answered all my questions and was supportive throughout my stay. I may be a nurse, but it’s very different when you’re a patient.”

Susan had her hip replaced on Jan. 6 and the very next day the staff got her up on her feet and walking again. She shared the recovery experience with two other joint replacement patients. “Going through this experience with other patients who shared the same concerns was wonderful,” she remembers. “We really did cheer each other on.”

Following her hospital stay, Susan spent two weeks at an inpatient rehabilitation center in Vacaville before returning home. At home, she had regular visits from a physical therapist to help her make a smooth recovery.

“I did everything I was told to do because I wanted good results,” Susan says. “I feel so much better now; I would do it again in a minute.”

“I know readers will say ‘Oh, she works at the hospital, it’s no wonder she recommends the program,’ Susan adds. “But that’s not the case at all. Every patient is made to feel special and is treated with dignity and respect. I had an insider’s look, so I know that it is true.”

Cynthia Giaquinto, R.N., left, joins Susan Anderson-Seibert, R.N., and Joint Replacement staff members Nekisha Smith, restorative nursing assistant; and Elline Silva-Netto, R.N., to hear about Susan’s experience.



Insider Information Nurse Sees Action—As a Patient

“Every patient is made to feel special and is treated with dignity and respect. I had an insider’s look, so I know it’s true.”

~Susan Anderson-Seibert, R.N.

When Susan Anderson-Seibert, R.N., of Vacaville, needed a hip replacement earlier this year, there was no question about where she would turn for surgery—the Joint Replacement Program at NorthBay VacaValley Hospital. A nurse at VacaValley herself, she knew first-hand the program’s reputation for excellent care and outcomes.

“I chose our joint replacement program because I know the nurses specialize in caring for joint replacement patients,” Susan says. “I knew that I would be in good hands.”

Susan’s journey to hip replacement began with groin pain. As treatment, she underwent a series of cortisone shots, but the pain was never gone for long.

The turning point came one day at the end of her nursing shift. She sat down to rest, but got an urgent summons to a patient’s room. And she couldn’t get out of her chair.

“That was it. When you need a nurse to get you on your feet, you have a problem,” she says.

She consulted orthopedic surgeon Andrew Brooks, M.D., who diagnosed arthritis in her right hip joint. Then came the surprise: Dr. Brooks recommended that Susan have a hip replacement, but he wouldn’t do the surgery until she lost 50 pounds.

At around the same time, her chiropractor approached her about a new weight loss program called Ideal Protein. She agreed to try it and in the following six months lost the 50 pounds.

“I was driven! I wanted to get healthy and the diet taught me to eat better,” she says. “It also got me off sugar—I had no idea how much sugar everything contains.”

By the end of last year, Susan was ready for surgery. Her first step in the Joint Replacement Program was taking an educational class

Comfort Amid Chaos



Hospice Nurses Honored to Spend Final Days with Patients and Families

“One of the most important parts of my job includes helping patients and their families feel more comfortable about death and providing them with the emotional support they need.”

~Traci Reese, R.N.

Hospice nurses care for patients at the end of their lives. Their goal is to help people live as comfortably and independently as possible and with the least amount of pain, in their final days.

NorthBay Hospice nurses care for patients in their homes, where they can be close to their families and loved ones. “One of the important parts of my job is helping patients and their families feel more comfortable about death and providing them with the emotional support they need,” says Traci Reese, R.N.

Traci, a nurse for five years, and Cindy Desimone, R.N., a nurse with 30 years of experience, are among the eight registered nurses at NorthBay Hospice who feel privileged to care for patients as their journey through life ends.

Both women knew they were destined to be nurses. “I was a little girl with a nurse’s kit, setting out pills for all of my dolls,” Cindy recalls. “My aunt was a nurse too, so I had a good role model.”

Traci decided to become a hospice nurse after her stepdad died of cancer while being cared for by hospice. “Our hospice nurse was an angel,” she remembers. “I wanted to be just like her. I entered nursing school planning to become a hospice nurse.”

NorthBay Hospice nurses are part of a team that cares for each patient and their family. The team consists of medical director Dr. Terry Van Aken, registered nurses, nurse case managers, licensed vocational nurses, a social worker, home health aides and a chaplain, if the family wishes.

Hospice is available to patients whose prognosis is six months or less, although no one can predict how long someone will live. The family provides the patient’s care and the hospice team is available 24/7 to support them.

“When I have a new family, my approach is to start my job as a social visit,” Traci explains. “A lot of our job is education—helping the family understand what will happen, how to give medications, and learn what is normal. We respect each patient’s journey. They are in charge, and we are just there to help. Every person is different and every family is different. Each patient changes you.”

In a profession dedicated to healing, the hospice nurse has a job that can take an emotional toll.

“You know that with each new case you will lose your patient,” Cindy explains. “It can get very emotional for us. We have a weekly meeting of all the hospice nurses and team members and we share our feelings, get ideas and find support.”

Cindy has a case load of eight to 12 families and sees four patients a day. She finds this

schedule gives her enough time to give each patient the attention they need.

“It’s important to me that I’ve done all that I need to do,” she says. “And I have the flexibility and support to stay as long as I’m needed.”

Both nurses find that their profession is often misunderstood. “When you tell someone you’re a hospice nurse, the response is often ‘Oh! How sad!’” Cindy says. “But it’s very fulfilling to make people comfortable. We provide comfort and peace during a time that can be chaotic.”

The nurses have come to believe that life is a never-ending journey. “Things happen that make you a believer,” says Traci. “Things that just can’t be explained.”

Cindy remembers caring for a woman whose muscles had become so tight she couldn’t bend her arms, her legs or even her fingers. One day, Cindy entered her room and saw a light glowing around her patient. “She was beautiful. I touched her arms and

the muscles were no longer tight. I had to sit down to take it all in. She passed shortly after that moment.”

Another time, Traci visited a patient’s home to find the husband singing “Swing low, sweet chariot” at his wife’s bedside. Two doors were open at the end of the room and someone closed them. A short time later, everyone felt a wind blow through the room and the doors opened on their own. The patient had died. “I guess that was the chariot taking her away,” the husband remarked.

“It’s beautiful to be there when someone passes. I’m not afraid of death because it is a passage to another realm,” Cindy says. “We witness people talking to loved ones who have passed and see the peace that comes over them.”

“Being with a family when a loved one dies is the most intimate experience,” Traci adds. “It is a privilege for me as a nurse, and I hope my presence is a comfort to the family.” ❄



▲ During a home visit, Cindy Desimone, R.N., checks to make sure Bhajan Kaur of Fairfield is comfortable and documents her vital statistics.



Cindy Desimone, R.N., left, and Traci Reese, R.N., are part of the NorthBay Hospice team that cares for patients at the end of their lives.

Rapid Response Teams and Nurse Rounders Are Available 24/7

In 2008, NorthBay established its Rapid Response Team (RRT), comprised of an intensive care registered nurse and a respiratory care practitioner. The teams are available to evaluate a patient's condition immediately upon request, 24/7.

One of the teams' main goals is to prevent Code Blues, or cardiac arrests. Since inception, the top three reasons the RRT has been called include cardiac-related chest pain/low blood pressure, respiratory compromise and mental status change.

The RRT teams proved so successful that by 2012 Clinical Practice Manager Elisa Jang, R.N., and Nursing Director Judy Kornell, R.N., collaboratively began to wonder if patient care could rise to another level, where calling the RRT could be avoided.

The result was a pilot program of RRT Rounder Nurses. The hand-selected nurses, chosen for their leadership skills as well as critical care knowledge and expertise, began the trial. When the outcomes were measured, the rounders had not only decreased calls to the Rapid Response Team, but prevented several cases from moving to a higher level of care, and saved the hospital close to \$1 million. The successful trial has led to a permanent program that has resulted in a savings of more than \$3 million a year. "It's a win-win program," Elisa says. "Our nurses rate the program with high satisfaction, our patients approve, and we lower the costs of health care."



Josh Mefford, R.N., visits with Angel Preciado of Vallejo during his daily rounds.

Rapid Responders Ready

Intensive Care Nurse Josh Mefford, R.N., spends one or two shifts a week visiting nursing units throughout NorthBay Medical Center. His goal is to put another pair of eyes and expertise where it is most needed—with patients who are not in the intensive care unit but who are not flourishing as well as they should following a procedure, illness or injury.

He is one of 15 Rapid Response Team "Rounder Nurses" who rotate shifts in the hospital around the clock. Each rounder is a highly trained intensive care registered nurse, who otherwise continues to practice in the ICU.

"Hospitalized patients are often seriously ill, which makes them vulnerable to develop other sudden conditions," Josh explains. And with 120 to 130 patients in the hospital at any one time, he uses his advanced skills to identify the "hot spots"—patients with conditions that could compromise their recovery.

He attends nursing department huddles and shift changes where nurses pass patient information from one to the next. He reviews charts and helps nurses identify what extra care a patient may need to make a safe recovery. And he makes rounds throughout the hospital, visiting the nursing floors, labor and delivery and the emergency room. If a Code Blue is called, he's there to help.

"Early identification of problems and immediate intervention can prevent patients from having longer hospital stays or needing a transfer to the intensive care unit," says Clinical Practice Manager Elisa Jang, R.N., a co-founder of the rounder program.

She explains that the nurse rounders work as clinical consultants with the patient's floor nurse and physician, providing a safety net for both staff and patients. They also serve as mentors to the floor nurses, coaching them through problems and improving their critical thinking skills.

For Josh, a second generation nurse, it's the precision and collaboration of advanced care that challenges him. He joined the Rapid Response Team at the first opportunity and was then hand-selected to participate in the individual nurse rounder trial program.

"My dad is a recovery room nurse in Vallejo, and my mom works at NorthBay. I basically grew up visiting the hospital," Josh says.

It was an even deeper family connection that drew him in to nursing. "When I was about 14, I helped my Dad take care of my grandfather," he explains. "We kept him at home, and it had a profound influence on my career choice. It was a very rewarding and fulfilling experience."

When the Going Gets Tough, Nurse Navigators Step In

A cancer diagnosis can bring mind-numbing disbelief, anxiety and a barrage of questions, usually starting with, "Now what?" Ready to help steer patients through the medical and emotional maze that ensues are NorthBay Cancer Center nurse navigators.

Becky Haywood, R.N., helps breast cancer patients get through the system of diagnostic imaging, diagnosis, and surgery, and coordinates post-surgical referrals to physical therapy and to medical oncology if needed.

"Being a navigator means being an advocate, teacher, listening ear, nurse, resource and coordinator," Becky says.

Keni Horiuchi, R.N., is a breast care and oncology certified clinical nurse specialist and nurse navigator. She provides navigation services to any patient who has a cancer diagnosis and is receiving care through a Cancer Center oncologist.

The operative word in her title, "navigator," says it all. "Our patients are overwhelmed at first, but I am here to help guide them through the process. I also help coordinate care from different providers, different departments and sometimes even outside the NorthBay system," Keni says.

She can answer most questions patients and their families have related to a cancer diagnosis, and keeps an open and ongoing communication with the physicians, social workers, and other members of the healthcare team about the patient's needs.

"While a navigation program is required for certification by the American Commission on Cancer, services to help patients and their families through the cancer diagnosis, treatment and recovery process have been important to NorthBay all along," says Keni. "And it's really helpful to have one contact person who is familiar with your needs and knows what you may be going through."

Although she is not a navigator, Nurse Practitioner Maricel Roblez supports patients with symptom management during the treatment process and guides them into recovery as part of NorthBay's STAR Program (Survivorship, Training and Rehabilitation).

Patients are referred to the program by their oncologists following treatment, and with Maricel's guidance, they journey to their "new normal," where recovery and survivorship begins. Maricel makes

sure her STAR patients see physical therapists to increase strength or endurance, social workers or mental health counselors if they are dealing with stress and depression, and, if they have had head or neck cancer surgery, speech and language pathologists to help regain voice or swallowing abilities.

"My patients are already seeing the side effects of their cancer treatments and my focus is on symptom and pain management," Maricel explains.

Everyone's needs are different, and navigators and nurses have to be flexible and resourceful. "I try to walk in their shoes and spend time listening and answering questions. It's an overwhelming amount of information to process. We're here to make it as easy as possible."

"Being a navigator means being an advocate, teacher, listening ear, nurse, resource and coordinator." ~Becky Haywood, R.N.



Keni Horiuchi, R.N., left, and Becky Haywood, R.N., guide patients through their cancer treatment.

Hectic, Crazy, Busy, Hyper World of Emergency Care

A go-getter attitude is essential when it comes to a job that demands rapid, on-your-feet thinking and the need to make informed, critical assessments in an often frenetic environment.

You might think you have an idea of what life in an emergency room is like from watching the smash-hit TV drama that made George Clooney famous. But step into the shoes of an Emergency Department (ED) nurse and you'd get a much more complete and compelling picture.

"Looking from the outside, people think they have an idea, but it truly is a different world," says Dominique Herndon, R.N., an ED nurse at VacaValley Hospital. "It's crazy, hectic, busy, scary, exciting, fun, terrifying, and stressful all at the same time."

And Dominique wouldn't want to be anywhere else. "The ER is in my blood," she says. "It's the place for me."

Lisa Cann and Patti Stutte can relate. Both nurses have found a home in the ED. It's where they absolutely excel.

"There have been so many days where I go home and feel like I fulfilled my purpose, of helping someone change the outcome of what

could have been the worst day of their life," says Patti, who has 20-plus years of experience at VacaValley. "I can't imagine any other job that could give me that same fulfillment."

"I love the fact that you're not just taking care of the patient, but also helping to take care of the family by putting them at ease and educating them about the situation," adds Lisa, who has spent seven of her 16 years as a nurse in the NorthBay ED. "And I love how so much is coming at you all at once and knowing that I have the energy to deal with it."

Energy is a key trait in the makeup of any stellar ED nurse. Lisa describes herself as "a super hyper, peppy, constantly-on-the-go kind of person who has natural caffeine flowing through my veins." Dominique says she comes from a family of "adrenaline junkies," many of whom have been involved with law enforcement or emergency medical services.

"We're a bunch of go-getters," she says. "We go 100 miles per hour all the time." That go-getter attitude is essential when it comes to a job that demands rapid, on-your-feet thinking and the need to make informed, critical assessments in an often frenetic environment.

Versatility is also an important quality, say the multi-tasking ED nurses who, on any given night, might be required to tend to someone experiencing dental pain one moment, and then swiftly shift focus to a gunshot victim or a cardiac arrest case.

"There's a lot of juggling," Lisa says. "You do your best to help one person and then you move on to the next one. I feed off that."

"We thrive on change and enjoy the rapid response needed to do our job to the best of our abilities, while working as a team," Patti adds.

Dominique, a relative newcomer to the ED, admits that it took some time to adjust to a job that often presents a series of heart wrenching life-or-death situations.

Dominique Herndon, R.N.



"In the beginning, there were nights I would go home feeling sad, numb, and confused all at the same time — trying to wrap my mind around 'just another day in the ED,'" she recalls. "I soon realized what an impact a team of people can have on someone and I really knew then that this is where I need to be."

Lisa began developing the kind of compassion an ED nurse needs while watching her mother struggle with cancer. "I was only 16 and I watched hospice nurses come and go," she says. "I saw how happy the good nurses could make her—how her whole countenance

would be light when they were around. But I also saw how the bad ones put her on edge and made her apprehensive. That triggered something in me: I told myself that I want to be the kind of nurse who makes my patients happy and comfortable."

And that's what these and other ED nurses constantly strive to do—amid some of the most stressful situations one can imagine.

"There is something truly humbling about being there for people when they most need you," Dominique says. "If you appreciate life, you appreciate being able to help a life." ❄️

▲ Emergency Department Nurse Lisa Cann, R.N., checks in on patient Shirley Williams of Fairfield.

Nurse Tackles Toughest Wounds



The NorthBay Center for Wound Care in Vacaville is an outpatient center committed to the treatment of difficult, non-healing wounds.

For more information, call (707) 624-7979.

Kathy Moore, R.N., and Randall Thatcher ►

When it comes to wounds, Kathy Moore, R.N., has seen it all. For more than 10 years, she has been part of the NorthBay Center for Wound Care team, helping patients heal wounds they may have nursed for years. “I’ve been a nurse since 1986 and wound care is a specialty that I find fascinating,” Kathy says. “I even tried to retire once, but I came back—I just love this job.”

The Wound Center specializes in treating difficult, non-healing wounds. Using the latest techniques medical science has to offer, they are able to heal more than 98 percent of the wounds they treat within seven to eight weeks. This may include the careful use of hyperbaric oxygen therapy, wound-cleaning techniques, medicines, dressings, minor procedures and other support services. “I love the continuity of care here,” she explains. “In the hospital we care for patients for a short period of time. Here, we have the time to build relationships with our patients.”

Dealing with a chronic wound at home can be lifestyle changing. A foot wound can be painful enough to prevent walking, and soon a person is housebound. Others find their ability to get around hampered by the amount of wound dressings and bandages they need to have with them.

“We’ve had patients with wounds that are two- and three-years-old,” Kathy says. “They come in so worried and we say ‘Now you’re part of our family, we’re going to take care of you.’ And we do! We get so excited when a wound gets smaller because we’re all in this together, like a family.”

That “family” includes a team of professionals, including physicians with advanced training in wound management and nurses trained in the treatment of chronic wounds who perform non-invasive studies and various therapies.

One patient who is grateful for their care is Randall Thatcher of Vacaville. He first damaged his foot in a 1987 accident that also left him with poor circulation. Years later he developed a diabetic ulcer on the same foot. “I was warned to be careful with foot ulcers, because I could lose my foot,” Randall says.

When a motorcycle accident reopened his foot wound, he came to the Wound Center for help. He spent every Tuesday for six months at the center, receiving treatment until the wound closed. “The staff was so encouraging and supportive,” he remembers. “They are very sweet people who helped in every way they could.” ❧



A Talent for Complex Cases

Team Helps Heart Failure Patients Stay Out of the Hospital

It was 1996 and Amy Bragg’s toddler Timothy was gravely ill, battling a parasite that caused four bleeding ulcers. It took two years and numerous trips to the doctor’s office, hospital and emergency room before Amy, a licensed vocational nurse at the time, was able to make sense of it all and get him the treatment he needed to heal.

She was at times furious with the system, and remembers seeing a copy of his medical records later where she was described as “hysterical.” But in the true spirit of being an advocate, she kept her focus on the patient who today is a healthy young man.

It was her first brush with complex case management, but by no means her last.

Amy, now a registered nurse, has partnered with Allison Short, R.N., to help NorthBay Healthcare’s heart failure patients with complex problems navigate an equally complex system to get the care they need, when they need it.

The program was developed out of a pilot project launched in 2014 by Shelley Stelzner, director of Case Management.

“The goal was to provide assistance maneuvering within the healthcare system, for diagnosed heart failure patients,” explained Shelley. “We know they are among the patients most likely to return to the hospital for a variety of reasons.”

Shelley’s pilot identified 22 high-risk patients and connected them with Amy.

The trial proved successful: Recidivism dropped 13 percent over a four-month period. The pilot ended in August and the program went live in November of 2014. “We could see we were making a big difference,” says Shelley.

Some of the tools developed during the program are still being used, including a heart failure workbook created by a NorthBay team including Case Management, Pharmacy, Nutrition, Social Services, Home Health and Cardiac Rehabilitation. It



covers the basics and offers insights to people who may have never worried about diet and exercise before.

“We developed a vision with this program that we needed to be proactive, not reactive,” explains Amy.

Sometimes that means connecting a patient with a cardiologist, other times it means teaching them about the importance of exercise and good nutrition.

In a recent case, one of Amy’s patients needed help getting healthy food, so she introduced him to Meals on Wheels. She even found a financial counselor who managed to establish insurance for him.

“We keep track of these folks, and so far he’s managed to stay out of the hospital for 90 days,” says Amy. “That’s a success.”

Patient issues are many, and varied. “Sometimes they are addicted to drugs, alcohol or cigarettes, and it’s a real challenge to keep them on track,” she says. “It’s not just following heart healthy guidelines, but staying sober or giving up a longtime habit.”

And sometimes, it’s living conditions. Amy has helped patients who are homeless and some who are leaning on family members for support.

“It’s not always the best situation,” she says. “We try to take their needs into account and do what we can. Sometimes, we have to be flexible.” ❧

▲ Amy Bragg, R.N., left, and Allison Short, R.N., keep track of high-risk patients, making sure they get the services they need to remain healthy enough to stay out of the hospital.



NorthBay Healthcare nurses who have found non-traditional, career-fulfilling opportunities include, left to right, Sandy Stockey, R.N., Mary Dickey, R.N., Ed Ballerini, R.N., and Becky Lessler, R.N.

Beyond the Bedside

Nurses Find Fulfillment in Surprising Places

You would expect to find most nurses at the bedside of patients, but at NorthBay Healthcare, they turn up in some surprising places. From internet technology and education to licensing and accreditation, these R.N.s have found new ways to put their nursing know-how to work. Their love affair with patients has not diminished as the job has morphed into new and exciting areas where they've learned they can have an even larger impact.

Neonatal Expert to Accreditation Detective

Mary Dickey, R.N., knew at a young age she wanted to be a nurse. She earned her bachelor's degree in New Hampshire and worked in rehab hospitals before joining the Air Force.

While stationed at Travis, she had her first experience with neonatal nursing, and became something of an expert. When she joined NorthBay in the 1980s, she helped design the Neonatal Intensive Care Unit.

She eventually oversaw the Women's and Children's Services Unit for 23 years, until she decided to take on a new and exciting challenge, as director of accreditation and licensure. "I saw an opportunity to make a difference in a different way," she explains. "Instead of affecting a patient in a single unit, now I'm making a difference on a global scale."

Her job involves maintaining current knowledge of all state, federal and Joint Commission standards and regulation that dictate how hospitals should operate.

To that end, she sets up processes and observational studies on a regular basis to monitor how NorthBay is doing. And when standards change, as they sometimes do, she's ready to train employees so they'll be up to speed.

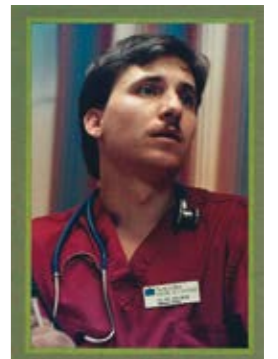
And if anything is amiss, she's on it. "I do miss working one-on-one with patients, but I love the challenge of figuring out problems," she says. "It's like being a detective. What could we have done differently? What can we do to make sure we're meeting all the standards, every time?"



Big Interactions Then, Big Picture Now

Since his father was a nurse, it only made sense to Ed Ballerini, R.N., at age 17, to follow in his footsteps. "I felt like I had the right traits to be a good nurse. I'm very caring, open, honest and trustworthy," he says earnestly. "It feels like I was born to be a nurse."

He originally planned to go into his father's field as a nurse anesthetist, but realized emergency medicine was a better fit. "I worked a couple of years as an emergency medical technician, and I realized I touched more people's lives than if I was in surgery taking care of people who were asleep," he says.



He came to NorthBay Healthcare — then Intercommunity Hospital — in 1985 and eventually managed Emergency Departments at both NorthBay Medical Center and NorthBay VacaValley Hospital and Fairfield's Intensive Care Unit before making a big switch in 2007.

He left the bedside behind to take a role in clinical informatics. Today his title is chief clinical informatics officer and senior director, and he's responsible for how NorthBay uses technology in the clinical setting. "It's incorporating the science of nursing with technology and computers," he explains. "I deal with the technology advances that are continually coming out in the industry, select the right tools for our institution, and make sure we have the right processes in place to make them work."

Does he miss nursing at the bedside? Sometimes, he admits, but his new position gives him a new perspective. "Every day I do things that impact the care that is provided to the patient," he says. "The impact I have now is not just in the ICU or in the Emergency Department, it's across the entire system."

From Babies to Megabytes

Sandy Stockey, R.N. and senior systems analyst, still has nightmares about dropping a baby, she chuckles. And she



hasn't worked in the Neonatal Intensive Care Unit for 14 years. But her days of working in pediatrics and later in the NICU are still vivid for the nurse-turned-analyst who now juggles electronic files and apps instead.

When she decided to go back to school, she wanted to focus on something new. So she earned a bachelor's in business/information

systems from University of Phoenix, and was pleased to land a job in NorthBay Healthcare's Information Technology Department. At the time, she was the only nurse on the team, and offered quality input. "I knew what the nurses needed to communicate and quickly, so I was able to make solid suggestions," she remembers.

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The leadership skills they learned in the military still serve Shelley Johnson, R.N., and Kim Novoa Villicana, R.N., well.

A Salute to our Veterans

Gunshot wounds, stabbings, car accidents—little fazes those battle-tested nurses who got a head start on their careers while serving in the military.

NorthBay Healthcare is home to a cadre of military veterans, some having seen action in Vietnam, Afghanistan, Iraq, and other war zones. Others have faced the toughest Mother Nature can deliver, weathering Category 5 hurricanes and all manner of emergencies.

Representing every branch of the military, nurses who come to work at NorthBay bring invaluable experience from their service, according to Rhonda Martin, assistant vice president, Nursing Operations. “Military nurses bring discipline, high work ethics, and leadership skills with them when they join our team. I see it in action every day,” Rhonda says.

From Air Force to NorthBay Mentor

KIM NOVOA VILICANA, R.N., originally set her sights on a career as an elementary school teacher. Instead, she joined the U.S. Air Force in 1994 as a medic, stationed at David Grant Medical Center, and later aboard the U.S. Navy’s USS Mt. Hood ammunition supply ship. Throughout her service she gravitated toward mentoring roles, a natural offshoot of her interest in education.

“I spent time in the OB/GYN/Oncology/Endocrinology unit, where everyone was always a leader to new enlisted medics,” she says. Throughout those rotations, she taught classes to expectant mothers and assisted oncology and endocrinology physicians. “In turn, I had an opportunity to teach these roles and turn them over to the next candidate who had been selected for their leadership abilities.”

After leaving the service, Kim went on to obtain her bachelor’s degree in nursing from California State University, Sacramento.

“My military experience was so diverse and pleasurable, so full of growth and maturity, that I decided to pursue my education in nursing with the idea of one day translating my interest in teaching and became a preceptor.”

It’s a role she takes on now at NorthBay Medical Center, as a mentor to NorthBay’s next generation of nurses.

Bringing the Espirit de Corps

BRIAN JIMENEZ, R.N., perioperative services at NorthBay Medical Center (*on the left in photo with Chief Petty Officer Gumba*), agrees that the discipline he learned a corpsman in the U.S. Navy serves him still.

“The military prepared me by giving me the tools to stay calm under pressure, to always have a plan and a contingency plan,” he says. “As a corpsman you are expected to know everyone’s job and how to perform it. I see that as a nurse here at NorthBay; we do the same.”



Brian joined the Navy in 2000 and was stationed at Naval medical centers in San Diego and Bethesda, Maryland. He also served on the USNS Comfort, where he and his team received injured soldiers arriving via helicopters.

“We would triage them and send them off to the appropriate areas for treatment, such as CT scan or surgery. The trauma program we have here at NorthBay operates like a well-oiled machine, much like it was when I was active duty,” Brian says.

‘Army Brat’ Brought Aid to Honduras

Military life has always been a way of life for **SHELLEY JOHNSON, R.N.**, director of Medical/Surgical Services for NorthBay Healthcare. “I’m actually an Army brat,” she says. “I had already been considering a nursing career while in high school, and was encouraged to consider ROTC by my father, an ROTC instructor.” His advice paid off: she received a scholarship to USF, where she earned her nursing degree.

The new nurse graduate and second lieutenant in the U.S. Army was then assigned to Tripler Army Medical Center on Oahu, where she spent just six weeks with a preceptor. “As an officer in the Army, you’re expected to be a leader and within two months on the floor on my own, I was regularly assigned the charge nurse role. It was a great experience,” Shelley recalls.

Two years later, Shelley was offered a six-month deployment to Honduras. Shortly after she arrived, however, the area was ravaged by Hurricane Mitch. “It was extremely scary,” she recalls. “The country was devastated, and most bridges, roads and many buildings were destroyed.”

Pressed into emergency service, Shelley and fellow military nurses, engineers, helicopter pilots, additional doctors, nurse anesthetists, and medics spent four months helping rebuild the country, and providing medical care to the local Hondurans.

“We had a small, five-bed inpatient unit, one operating room, an emergency room, and a clinic. A handful of Army nurses worked it all, seeing quadruple the patients we normally had. We also started running medical relief missions throughout the country,” she recalled.

“Since most of the roads and bridges were destroyed, we flew in UH-60 helicopters to the villages. We set up clinics in churches, schools, barns, or wherever, working eight to 10 hours straight, for four solid months.”

It gives her perspective as she calmly faces her challenges as director of medical and surgical services for NorthBay Medical Center and NorthBay VacaValley Hospital. “I’ve appreciated all the opportunities provided to me and the confidence NorthBay has placed in me,” she says. “I know it was my military experience that helped get me in the door initially, as a leader.”



Beyond the Bedside

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Soon, another nurse was added to the team. “We used our expertise as nurses to know what needed to be communicated and how to set up the documentation,” she says.

Though she admits she misses the babies at times, she loves her new role. “It’s a very different perspective, but it’s still caring for the patients,” she says.

Nurse, Mom, Manager, Teacher

Becky Lessler, R.N., cut her teeth on critical care in Bay Area hospitals for eight years, and another five years at NorthBay before she decided to make a switch to education and training.

Working side by side with clinicians through the years, she realized that training is the answer to performance issues about 30 percent of the time.

“This prompted me to go back to school for a master’s in Human Resources, to learn about the other 70 percent: What motivates people, how systems affect performance, the role of conflict, the management of risk,” she explains.

Just as she finished, an HR director position opened. In her current role, she is responsible for staff development and performance support. “A lot of my time is spent on delivering training, supporting the subject matter experts who train and coach,” she says. “It is a very special time for me to be in the classroom, working with staff, because I get back to the joy of seeing eyes light up.”

She is grateful that NorthBay has allowed varied paths to providing service: At the bedside, direct training, managing training, overseeing HR processes—in all kinds of formats—part time, part time flex, full-time, so she could be nurse, mom, manager and teacher.

“I am thankful for years of bedside care that taught me the point-of-touch is the heart of the business. So I never forget what our mission really is: serving the patient with compassionate care, advanced medicine, close to home.”

All in the Family

If nursing runs in one's blood, it's easy to see why it spreads like wildfire through so many families. Meet a few of NorthBay Healthcare's multi-generational co-workers:



Mary Hempen, R.N., center, is surrounded by family: from left, granddaughters Brittney and Alyssa, and daughters Amy and Denice.

A Long and Lasting Legacy

You could say that Mary Hempen of Vacaville has given birth to generations of nurses. Not only has the now-retired co-founder of NorthBay Healthcare's popular Nurse Camp influenced scores of students during the camp's first decade, she also brought her infectious love of nursing home.

Both of her daughters followed her into the profession. Amy Ciraulo went first, knowing from a very early age that she wanted to be a nurse like her mama. She's worked in a burn unit, the intensive care unit, the recovery room, and in emergency rooms before moving on to Labor & Delivery at NorthBay Medical Center, where she's been since 2008.

It took her older sister, Denice Haddox, a little longer to figure it out. She taught first- and second-grade for a few years before going back to school. She earned her nursing credential at 39, one year older than her mother was when she got hers. (Mary married and had a family before going to back to school. She worked 22 years in NorthBay Medical Center's ICU before retiring in 2012.)

Denice's first stop as a nurse was in Labor & Delivery at NorthBay Medical Center. Now these sisters and co-workers have daughters who are following in their footsteps.

Amy's daughter, Brittney, is a Vacaville High School grad who plans to attend Grand Canyon University School of Nursing in the fall. Her cousin, Alyssa, 21, is a Will C. Wood grad who is taking pre-nursing classes at Sacramento State. She'll apply to nursing schools next. Mary couldn't be more proud of her brood. "I loved having a job where I could make a difference, and I know they'll love it, too."

Mother/Daughter on Mother-Baby Unit

Abbie Hoag knew from an early age that she wanted to be a nurse, but she wasn't so sure about her daughter, Sarah. "Right up until the end of high school, I thought she might go for interior decorating," she confides. "She does have a knack for it."

Even Sarah wasn't sure at first. "When the time came to decide, I realized it made a lot of sense," she says. "I grew up with nursing. It was what my mom and her friends talked about all the time. It was our dinner table conversation. I went to health fairs with my mom, and decorated posters for her and volunteered at the hospital. It was a big part of my growing up."

So it only made sense for the Will C. Wood grad to pursue nursing, becoming a certified nursing assistant in 2006, and earning her associate's degree in 2013. By then she had accepted her first job as an R.N. on

the Mother-Baby Unit at NorthBay Medical Center, where her mother has worked since 1987 as a floor nurse and lactation consultant.

Sarah worked full time and wrapped up her bachelor's degree in 2014, a stretch when she felt "I practically lived on the second floor (Mother-Baby Unit)."

She arrived at an excellent time, when the unit was actively pursuing designation as a Baby-Friendly Hospital (which NorthBay Medical Center earned in August 2014.)

That meant the entire staff needed a minimum of 20 hours of lactation education, which Sarah happily doubled. Of course her mom, the expert, received 90 hours of training and is one of four lactation consultants on the floor, teaching and empowering new moms to breastfeed.

Although the pair's work schedules don't always overlap, it happens on occasion, like a sunny day in April when Sarah was assisting a new mom with twins. "I don't always tell patients that it's my mom I'm bringing in to consult, but sometimes they guess. Maybe they see the resemblance, or hear it in the way we talk," says Sarah. "Or I might say something about what we're having for dinner," smiles Abbie.

The pair shares more than living quarters; they also have teamed up to adopt the Nurse Ambassador program for Will C. Wood, and actively support NorthBay's Nurse Camp. "We even carpool when schedules allow," says Abbie. "It's a real pleasure."



Sarah Hoag, R.N., left, holds twin Abigail Sinclair, while Sarah's mother, Abbie Hoag, R.N., holds Jacqueline.



Jenielyn Dinoso Lopez, R.N., and her mother, Josie Dinoso, R.N., meet at Unit 1800 in Fairfield.

Mom is Also Her Mentor

To say Jenielyn Dinoso Lopez, R.N., comes from a nursing family seems a bit of an understatement. Not only is her mother a nurse, but so are three aunts, one uncle, nine cousins and two cousin-in-laws. And to top it off, she married one.

Her siblings have also pursued medical careers. Her sister is about to graduate as a respiratory therapist, and her brother—after participating in NorthBay's popular Nurse Camp—is considering a career in nursing.

Jenielyn, a nurse on 1-West at NorthBay VacaValley Hospital in Vacaville, says she grew up seeing her mom in scrubs. "She always encouraged the career but said it was up to me. I like the variability that nursing has to offer."

Jenielyn's specialty is acute care. In 2010, she worked on VacaValley's 2-West unit, then left for a few years before returning in 2013 to NorthBay Medical Center. She transferred back to VacaValley 1-West in 2014 and cares for medical/surgical telemetry patients.

Her mother, Josie Dinoso, R.N., has spent the bulk of her 20 years on a medical/surgical unit at NorthBay Medical Center in Fairfield.

"I'm really proud of her," says Josie. "She knew she wanted to be a nurse, and she was very motivated about going for it." Jenielyn says she wasn't pushed, but realized a career in nursing made sense. "My mom always influenced me," she says. "I knew she was there to guide me through my career. When I have questions, I know she's wise with good experience. She's not just my mom, she's my mentor."

Now mom and daughter team up to be NorthBay's Nurse Ambassadors, reaching out to Jenielyn's alma mater, St. Patrick's-St. Vincent's High School in Vallejo. "It's a lot of fun to be able to do this with my mom. She really helps me out," says Jenielyn.

As for her choice to be a nurse, Jenielyn has no regrets. "I really love it. Nursing is a very physically and mentally challenging career. But, when I see patients getting better and they're so grateful, I realize that this is what I love to do." ❧



Nurse Camp Grad Lands NorthBay Job One Happy Camper

“When I saw that NorthBay was advertising for an emergency department nurse, I was ready.”

~James Parmer, R.N.

James Parmer, R.N., is right where he wants to be — working as a nurse in the Emergency Department at NorthBay Medical Center. He is the first Nurse Camp graduate to work in one of NorthBay Healthcare’s hospitals.

His job is the culmination of a goal set in childhood when his gravely ill grandparents were hospitalized. “I was fascinated by the hospital setting and the nurses,” he remembers.

The Buckingham High School graduate sought out every opportunity to spend time in the hospital. He worked as a teen volunteer in the NorthBay Medical Center Emergency Department throughout high school and in 2006 he participated in Nurse Camp.

Already hooked on a career in the hospital, James wasn’t sure what to expect from Nurse Camp. “I knew from volunteering that I wanted to be an emergency nurse,” James says. “But it was Nurse Camp that gave me the overall picture of what a career in nursing could be. The personal attention the nurses gave us was incredible and they obviously loved their profession.”

James earned his bachelor’s degree in nursing from Simpson University in Redding. The newly minted nurse wanted to work at NorthBay Medical Center but he didn’t want to apply until he had some professional experience on his resume.

So he spent a year working at Vibra Hospital of Northern California, a rehabilitation and long-term acute care hospital in Redding.

“When I saw that NorthBay was advertising for an emergency department nurse, I was ready,” James says.

NorthBay Medical Center routinely gets between 75 and 100 applications for each available nursing position. He thinks his previous experience, as well as his connection with NorthBay through volunteering and Nurse Camp, made his application stand out.

“I’ve found my career in the emergency department,” James says. “I love the fast pace and opportunity to make a difference in someone’s life. My patients are often in delicate situations and I feel privileged to share in the journey to restore their health.”

NURSE CAMP

Building Bridges to Careers

From a hands-on simulated labor and delivery to mock surgery, this year’s 11th annual NorthBay Nurse Camp again offered 30 teens an up-close and personal view of nursing.

Four full days of activities and workshops were held in hospital settings — at NorthBay Medical Center in Fairfield and NorthBay VacaValley Hospital in Vacaville — coordinated and facilitated by a dedicated cadre of nurses, many of whom volunteer as nurse ambassadors at local schools.

Since the first Nurse Camp was held in 2005, 337 students have completed the program. Of those, a handful have made the decision to become nurses, including James Parmer, R.N. Here’s a quick look at the other five:

Meredith Oates, R.N., attended Nurse Camp in 2006, and earned her nursing degree from Point Loma Nazarene University in San Diego in 2010. She became a school nurse for El Dorado County in Placerville. She added a second job about a year later doing in-home/respite nursing for medically fragile children that she continues to do even now. In the summer of 2013,



“NorthBay’s Nurse Camp had a positive impact and influenced my education and career choices. It was a wonderful experience.” ~Jennifer Corbett, R.N.

she left school nursing and began work at Shriners Hospital for Children in Sacramento where she works in their Transitional Care Unit. “I have enjoyed all my nursing jobs and am thankful for the role that Nurse Camp had in beginning my career,” Meredith says.

Jennifer Corbett, R.N., a Rodriguez High School graduate, attended Nurse Camp in 2006. She graduated from UC Davis with a bachelor’s degree in neurobiology, physiology and behavior. The following year she moved to Rochester, N.Y., and completed an accelerated program at the University of Rochester to obtain her bachelor’s

in nursing. She is currently a nurse at Golisano Children’s Hospital on a pediatric unit, and working on her Master’s degree. She plans to graduate in 2016 as a pediatric nurse practitioner.

Jaclyn Nielson, R.N., an Armijo High School graduate, earned her bachelor’s in nursing this year from Brigham Young University. She attended Nurse Camp in 2008. She is now a nurse at Primary Children’s Hospital. “Nurse Camp was great in that it was the first time I was able to really get inside the hospital and experience what it actually looked like to be a nurse,” she says.

Katy Stoltz, R.N., attended the first Nurse Camp in 2005 and went on to graduate from college in San Diego and take a job in the pediatric intensive care unit at Children’s Hospital in Los Angeles.

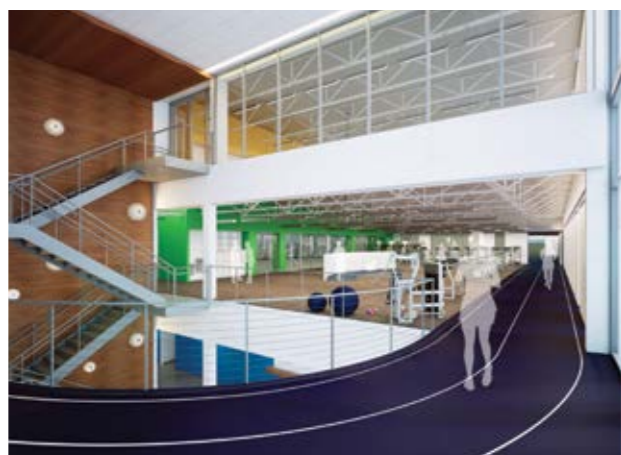
Elizabeth Allard, R.N., a Vacaville High School graduate, also attended the 2005 Nurse Camp. She has earned her master’s degree in nursing from the University of San Francisco. She is currently in a new graduate internship program in the emergency department of Sutter Delta Medical Center in Antioch. “Nurse Camp gave me that passion and desire to pursue my career in nursing, even at such a young age,” Elizabeth says. “During nurse camp, I remember thinking ‘Yes, this is what I want to do!’ And the rest is history.”



Breaking Ground on New Path to Health



WELLNESS CENTER COMING TO VacaValley Hospital Campus



A running track will circle exercise equipment and pool from a second-story vantage point.



One of four pools that will be part of the Wellness Center.

This time next year, NorthBay Healthcare will open the doors to a unique, state-of-the-art wellness facility in Vacaville. The 110,000-square-foot building on the NorthBay VacaValley Hospital campus will feature a medical fitness center and become the new home of the NorthBay Cancer Center, currently located in Fairfield. The three-story structure will also include an out-patient diagnostic imaging center, diabetes and endocrinology, orthopedics, rehabilitation services and cardiac rehabilitation.

Design and functionality put the patient first, according to Elnora Cameron, vice president of Strategic Development, a NorthBay division that oversees facilities construction. “How we construct these buildings is all about changing the way we deliver care to our patients,” Cameron said. “It’s about giving patients an experience we’ve all been asking for in healthcare: less waiting, promptly returned phone calls, expedited pharmacy refills and lots of comforting and healing sunlight in the public spaces and in the clinical treatment areas.”

The west end of the building will be dedicated to the county’s first medical fitness center. In 56,000 square feet it features a natatorium (aquatic center) with a lap pool, general purpose pool, warm water therapy pool, and a whirlpool.

Creating a facility dedicated to medical fitness is a new idea in health care. There are only six such facilities in the state.

It will have many of the features of a health club—exercise equipment, indoor running track, pools and spas—and also will have specialized therapy equipment for patients. The staff

will be highly trained and work collaboratively with physicians and specialists.


The fitness center also includes two group exercise rooms, a Queenax fitness system, dedicated Pilates and cycling rooms, a large cardio area, and strength training and personal training areas.

While physicians can prescribe therapy and exercise at the medical fitness center, membership plans will also be available to the general community.

The new imaging department in this building will house the first permanent PET imaging machine in Solano County.

Cameron noted, “Cancer patients will no longer wait days for a mobile machine to roll in from Sacramento. With a new MRI added adjacent to VacaValley Hospital later this year, this campus will have a full-fledged imaging center. Every type of image you or your doctor need will be here.”

The building is a partnership between NexCore Group and NorthBay Healthcare. Swinerton Builders of Sacramento is the general contractor.

The construction site formerly held the NorthBay Adult Day Center, which moved to a modern facility on VacaValley Parkway earlier this year. 



Hard Hat Report Tracks Construction

With the frenzy of construction activity occurring at both NorthBay Medical Center and NorthBay VacaValley Hospital campuses, a new section has been created on NorthBay.org to help visitors navigate quickly and safely.

The Hard Hat Report offers construction and traffic updates, as well as background about the projects, details on the architects, builders and renderings of the final designs.

An introductory video features NorthBay Healthcare President and CEO Gary Passama, as well as Facilities Development project managers Heidi Goldstone and Lisa Thomas.

Northbay.org/hardhat will feature links to a live web cam at both sites, so progress can be easily monitored.



“It’s about giving patients an experience we’ve all been asking for in healthcare: less waiting, promptly returned phone calls, expedited pharmacy refills and lots of comforting and healing sunlight in the public spaces and in the clinical treatment areas.”

~Elnora Cameron, vice president of Strategic Development



MODERNIZATION AHEAD FOR NorthBay Medical Center

With the Vacaville expansion project under way, next on the construction agenda is the first phase of a \$150 million modernization of NorthBay Medical Center in Fairfield.

Site work and new utilities started in June and will be followed by creation of a new lobby and visitor welcome pavilion. Concurrently, the existing hospital lobby will become an expanded Emergency Department.

The first phase is being partially funded with the successful sale of \$35 million in tax-exempt bonds.

Once the new pavilion opens and emergency services gain 31 new beds, the modernization project moves forward with construction of a new three-story wing that will replace existing surgical suites, hospital cafeteria, nutrition services, diagnostic imaging and supply rooms.

Also included are 22 new “patient rooms of the future” featuring the latest technology in health care, and 16 more post-acute care beds.

The entire Fairfield modernization project could take up to five years to complete.



Oncology Service Line Director Named

Teresa Langley joins NorthBay Healthcare as the new Oncology Service Line Director, overseeing medical and radiation oncology, breast oncology and support services. Teresa has more than 20 years of experience as a healthcare administrator.

"Teresa is passionate about oncology and has dedicated her career to the field," says Aimee Brewer, president of the Ambulatory Division of NorthBay Healthcare Group. Teresa started her journey as a radiation therapist before becoming the director of Radiation Oncology for St. Joseph Regional Medical Center.

As her career progressed, she has held multiple, impressive leadership positions at Oklahoma University Medical Center, UC San Diego, GE Healthcare and, most recently, Porter Regional Healthcare System outside Chicago. Her most recent position was serving as the oncology service line executive and Loyola University Medical Center liaison for Community Healthcare Systems in Valparaiso, Ind.

Teresa holds a bachelor's degree from the University of Louisville, Ky. She continues to maintain her licensure as a radiographer and radiation therapist.

Welcome New Physicians



Amanda Davis, M.D., an internal medicine physician, has joined the NorthBay Center for Primary Care in Fairfield. Dr. Davis earned her medical degree from the University of Louisville in Kentucky. She completed her internship and residency in internal medicine at St. Vincent Hospital in Indianapolis, Indiana.

Dr. Davis is board-certified in internal medicine. To make an appointment with Dr. Davis, call (707) 646-5500.



Madhav Goyal, M.D., an internal medicine physician, has returned to the NorthBay Center for Primary Care in Vacaville. Dr. Goyal earned his medical degree at the University of California, San Diego School of Medicine in La Jolla, where he also completed his residency in internal medicine. He completed a fellowship in internal medicine at The Johns Hopkins University School of Medicine in Baltimore, where he was most recently an assistant professor of medicine.

Dr. Goyal is board-certified in internal medicine and also holds a master's in public health degree from the Harvard School of Public Health in Boston. To make an appointment with Dr. Goyal, call (707) 624-5500.



Yolanta Petrofsky, M.D., M.P.H., is the medical director for NorthBay Occupational Health and Employee Health. Dr. Petrofsky earned her medical degree from Loyola University Stritch School of Medicine in Chicago. She completed her residency in occupational and environmental medicine, as well as a master's in public health, at Harvard University School of Public Health in Boston.

Dr. Petrofsky is board-certified in occupational and environmental medicine.

 To see all of our NorthBay physicians, visit NorthBay.org.



Jubilant Crowds Pack the House

Hundreds attended the 28th Annual Solano Wine & Food Jubilee, a gala fundraising event for NorthBay Hospice & Bereavement. In addition to sampling wines, beers, an array of foods and non-alcoholic beverages, ticketholders browsed Silent Auction items and danced to The Time Bandits. Jubilee Raffle winner Tamara Fletcher (*inset*) celebrated the news she had won a brand new car as she accepted the keys from Rami Yanni, owner of Vacaville Nissan, who as a Presenting Sponsor donated the car. Other 2015 Presenting Sponsors were Al and Patt Shaw, Freeman Family & Cosmetic Dentistry, Gold's Gym, Luminous Marketing & Media, and Theatre DeVille. In all, more than \$350,000 was raised through the event.



More than 150 NorthBay employees wearing special navy blue "Celebrating Excellence" T-shirts joined hundreds of others and braved a brisk morning wind to run, race, and walk in the first Cinco K Fiesta Run on Saturday, May 2. The event kicked off at the Anheuser-Busch Visitors Center in Fairfield. A Cinco de Mayo theme was prominent throughout the venue, as Ballet Folklorico dancers and a Mariachi Band entertained the crowds before and after the race. Runners were treated to tacos and an energy drink after crossing the finish line, and those ages 21 and up were invited to sample beer and margaritas in the Anheuser-Busch Tap Room. The 5K run/walk and 1-mile walk, sponsored by NorthBay Healthcare, is a fundraiser to benefit the Fairfield Police Activities League.

Free Valet Parking at NorthBay Medical Center

NorthBay Medical Center in Fairfield is now offering free valet parking for hospital patients and visitors. HealthPark Valet will staff the service from 7:30 a.m. to 5:30 p.m. Monday through Friday.

"They specialize in training their teams to take good care of patients, who need a little extra TLC," says Rich Cinfio, director of Security and Environmental Services at NorthBay Healthcare. "That's just what we're looking for to maximize the patient experience."

Patients will be able to call on their cell phone to have their car retrieved. There will be no charge for the service, although tipping is optional.

Due to the construction taking place at NorthBay Medical Center, the traffic situation is fluid. Please watch for signage in case of temporary changes as you drive around the campus.

"The program has shown significant growth since going live in April," says Rich. "Early feedback indicates that not only are patients pleasantly surprised at the offering, they really appreciate the convenience and the professionalism of staff."

NICU Turns 30

You've Come a Long Way, Baby!



Dr. Richard Bell checks up on Sharon Brown and 5-day-old baby Teagan in the NICU.

It's hard to imagine a time when Solano County didn't have its bustling Interstate 80, and even harder to envision how and how far critically ill babies were transported before NorthBay Medical Center opened its Neonatal Intensive Care Unit in 1985.

In the early '70s, Solano County's sickest infants were kept warm with heated water bottles, loaded into an incubator and then driven over back roads to a hospital in Woodland.

It was a story shared during a special gathering this spring of NorthBay's NICU pioneers and current leadership. The group compared notes over just how much has changed since the NICU opened its doors 30 years ago. At that time, it only had three beds on the first floor. Today it has 16 beds on the second floor and serves an average of eight babies a day.

As many as 180 infants a year spend their first days in the NorthBay NICU. They receive care from specially trained nurses who have learned how to resuscitate NorthBay's smallest patients with special equipment, explained Jenny Quinn, R.N. and NICU nurse practitioner.

Barbara Lum, a registered nurse and retired director of Maternity Services for what was then Intercommunity Memorial Hospital was there to tell her stories and share her passion for babies, despite faltering health. She died from congestive heart failure, just days after the meeting.

During the round table discussion, Barbara recalled how she coordinated the earliest parenting courses and helped establish NorthBay's mission to provide better care for critically ill infants by working to keep them close to home and to their families.

Mary Dickey, R.N., now NorthBay's director of accreditation and licensure, was hired by NorthBay Medical Center in 1985 to help design the original NICU, partly because of her experience with the NICU at David Grant Medical Center.

Mary later took the reins from Barbara to lead Maternity Services for many years, and remembers developing a transport system, not just to take babies out of Solano County for more critical care, but to bring them to NorthBay for specialized care. "We created the NICU so we could keep sicker babies here, babies who had low birth weight or respiratory problems," she recalled. "We wanted to keep them close to home so their families could be more involved."

That was a sentiment echoed by Richard Bell, M.D., neonatologist and medical director of the NICU. "When babies are born 12 weeks early, even if everything goes well with that baby... you're looking at 45 to 60 days in the hospital. With the stress of that hospital stay, if you've got to cross two bridges and find parking, it's even worse," he said. "To be able to have those children close to home makes a huge difference for families. This isn't about medicine, it's about families and children. It's about having services available in our community to provide excellent care. That care extends beyond what the baby receives. We take care of the entire family. Everyone around this table is absolutely committed to that."

It's all worth it when the children return, as many have for the past 30 years, to the annual reunion for "NICU grads." This year's party in May drew the families of nearly 85 children — including several now in their 20s.

Dr. Bell agreed, as he pulled an envelope out of his shirt pocket and shared it with the group. It was a wedding invitation from one of his NICU graduates, whom he cared for some 20-plus years earlier.

"I see those babies that were so small my wedding ring could fit on their wrist. ...and now they're taller than me, they weigh more than me, and they have more hair than me," he smiled. "It makes it all worth it."

NorthBay Family Stunned by Loss of 'Mother of Maternity Services'

Her mission was providing compassionate care and advanced medicine for the tiniest, most vulnerable members of our community and their parents.



NorthBay Healthcare lost its "Mother of Maternity Services" with the death of Barbara Lum on May 8, 2015, at David Grant Medical Center where she was being treated for severe congestive heart failure. She was 87.

Mrs. Lum retired from NorthBay Healthcare in 2006 after 40 years of service. She was a registered nurse, long-time manager of maternity services and is credited with laying the groundwork for the creation of NorthBay's Neonatal Intensive Care Unit 30 years ago. Even before her retirement, she was an active member of the NorthBay Guild.

"We are saddened and stunned by this incredible loss," said Gary Passama, CEO and President of NorthBay Healthcare. "During and after her tenure heading up our Mother-Baby Unit, she was the heart of our organization. She was a kind and caring person, a real nurse."

Mrs. Lum joined Intercommunity Memorial Hospital in 1966, and became director of maternity services in 1973.

After her retirement, she continued to serve NorthBay as an instructor for NorthBay's Human Resources Department and a NorthBay Guild volunteer. In this capacity, she was able to combine her love of nursing with her love for tennis, by serving as chair of the Golf & Tennis Classic's tennis tournament for many years.

Just a few days before her death, Mrs. Lum joined a team of NorthBay colleagues in a roundtable discussion with local press to celebrate the NICU's upcoming 30th anniversary. She shared with the group her early memories and observations regarding the many changes seen in the last three decades.

She was passionate about her mission of providing compassionate care and advanced medicine for the tiniest, most vulnerable members of our community and their parents. "Babies are my business," she said plainly.

After reading stories in the local press, Mrs. Lum wrote: "Thanks to the visions of all our great CEOs and the Boards of Directors throughout these many years, who gave us (the doctors, nurses and entire hospital staff) the support and freedom to do our 'thing' and to always move forward in medicine and technology for the benefit of all and even the tiniest of our patients."

A memorial service was held in her honor May 30 at NorthBay Healthcare's Green Valley Administration Center. She is survived by her daughter, Cindy Lederer (Mark); sons Bruce Lum (Grace) and Tony Lum (Dede); four grandchildren and three great-grandchildren. She was preceded in

▲ Barbara Lum poses with a photo of herself from 1973 showcasing what was then a state-of-the-art incubator.

death by her husband Bob and sons Michael and Russell.

Mrs. Lum was so passionate about maternal care at NorthBay that she endorsed the creation of a special endowment fund to benefit families of NICU babies. The Robert and Barbara Lum Endowment fund was established when her husband, Robert, passed away in December 2014.

Contributions came from friends, employees and physicians throughout the organization, as well as through a successful March of Dimes' "March for Babies" walk at Lagoon Valley Park. The fund reached its minimum investment threshold of \$10,000 in the days just before Barbara's death, and will continue to serve NICU families through perpetuity.

Anyone wishing to contribute to the fund in her memory can do so by sending a check to NorthBay Healthcare Foundation, and putting "Lum Endowment Fund" on the memo line, or making an online donation at NorthBay.org, selecting the "Support NorthBay" tab, then the "Donate Online" buttons. Choose the Lum Endowment Fund from the designations menu.

Community Health Education Classes

Healthier Living • A six-week class offered several times during the year, taught in conjunction with Solano Public Health and the Area Agency on Aging. Classes are free but space is limited. For information or to register, call (707) 646-5469 or visit NorthBay.org/healthierliving.

Caregivers' Support Group • For anyone involved in caring for a loved one with Alzheimer's disease or a dementia-related illness. Meets second Wednesday of month, 7 to 9 p.m. at the Adult Day Center. Cost: Free. Call (707) 624-7971.

Grief and Bereavement Support Groups • Adult support groups meet every other Wednesday in Fairfield. Cost: Free. Please call (707) 646-3517.

SAND (Support After Neonatal Death) • Friendship and understanding for parents experiencing grief for the loss of a pregnancy or infant. Cost: Free. Call (707) 646-5433.

Widows Grief Support Group • A grief support group for widows meets every other Tuesday. Cost: Free. Call (707) 646-3517.

Teen & Children's Bereavement Support Groups • Teen support group meets every other Monday for eight weeks. Children's support group meets every Wednesday evening for eight weeks. Parent/Guardian approval required for participation. Cost: Free. Call (707) 646-3517.

Adult Grief Support Class, Journey Through Grief • Class meets weekly for eight sessions. Limited to 12 people per group. Participants follow a step-by-step approach using a book and journal. Cost: Free. For schedule and to register, call (707) 646-3517.

Loss Due to Suicide Support Group • Meets every other Monday from 6 to 7:30 p.m. Cost: Free. Call (707) 646-3517.

New Beginnings Support Group • For stroke survivors, care-givers and family members. Third Tuesday of the month, 10 to 11:30 a.m. in the NorthBay Medical Center Annex, Fairfield. Cost: Free. Call (707) 432-5710.

Nutrition Class for Cancer Patients • Join NorthBay Dietitian Devin Robinette, R.D., to learn what to eat before, during and after cancer treatment and how to eat to enhance your response to treatment. Cost: Free. Limited seating. Call (707) 646-4014.

Look Good, Feel Better • A program to help women currently undergoing cancer treatment cope with appearance-related side effects of treatment. To register, call the American Cancer Society, (800) 227-2345. Cost: Free.

Journey to Health • A seven-week class offered several times during the year. Taught by physicians, registered dietitians, a physical therapist, a psychologist and nurses. Cost: \$40 per person. Teens are welcome to attend with a responsible adult. Call (707) 646-5489.

Laugh Out Loud • A class on urinary incontinence. Do you control your bladder or does your bladder control you? Learn the latest treatment options, including pelvic floor exercises. Cost: Free. Call (707) 646-4150 for class dates and to reserve your seat.

Maternal/Child Health Classes

All prenatal and maternal child health classes are free if you are delivering at NorthBay Medical Center. Visit NorthBay.org or call (707) 646-4162.

Brothers & Sisters To Be

Prepare children ages 3–9 for the arrival of a new baby.

Labor of Love

A four-week prepared childbirth class for moms and dads or coaches; register in fourth month of pregnancy or earlier.

Labor of Love—Saturday Class

A prepared childbirth class for moms and dads or coaches. Held second Saturdays of the month.

Prenatal Care

Expectant mothers learn important information about pregnancy. Topics include nutrition, exercise, fetal growth and development, “pregnancy do’s and don’ts,” and much more. It is recommended this class be taken as early in pregnancy as possible.

Newborn Care

Expectant parents are instructed on daily care, nutrition, safety and development for the first few months of life. One-session course.

Maternity Orientation and Tour

A tour of NorthBay Medical Center’s maternity unit. Information about hospital registration, birth certificates, and other pertinent information is provided.

Breastfeeding the Baby-Friendly Way

Babies are born to breastfeed. Learn normal newborn behavior and what to expect from a lactation expert. Support persons are encouraged and welcomed.

Breastfeeding Support Group

A postpartum support group for moms meets Wednesdays from noon to 1 p.m. in Fairfield.



Pulmonary Education Series • Three-session course meets on Tuesdays from 12:30 to 2 p.m. at NorthBay Medical Center in Fairfield. A new course begins each month. Cost: Free. Call (707) 646-5072.

Congestive Heart Failure Class • Class meets every Wednesday from 12:30 to 1:30 p.m. at NorthBay Medical Center. Cost: Free. Call (707) 646-5072.