A website that will give expecting parents a first-hand look at the hospital's amenities.

The virtual support group, moderated by internationally board certified lactation consultants Bernadette Flynn-Kelton, RN, and Carolyn Schindewolf, offers an open forum, and moms-to-be who are new to the group typically have a laundry list of questions.

“Why will I ever need to change a diaper? Am I going to be able to carry a baby? Can my partner stay with me?”

Unfortunately, maternity tours at Princeton Medical Center (PMC) have been canceled since COVID-19 hit New Jersey hard in early March, and they may not resume anytime soon.

“‘They’re the same kind of questions they would ask on a maternity tour,’” Flynn-Kelton said.

Meanwhile, the pregnancy and postpartum support group gives them an interactive outlet to air their questions and concerns.

Flynn-Kelton and Schindewolf are there to provide their expertise, as well as the latest information on PMC’s policies and safety precautions, and the postpartum moms on the video conference — most of whom gave birth at PMC — share the wealth of their experiences. “We originally created two separate support groups,” Schindewolf said, “but we merged them because it was clear that the groups would benefit from interacting with each other.”

The meetings typically last an hour. Babies make frequent appearances on screen. Partners are welcome as well. The discussion is not rigidly structured. If silence drags on, which rarely happens, Schindewolf or Flynn-Kelton will ask a question to kick-start the discussion.

Postpartum mothers talk to each other about anything and everything: sleep issues; breastfeeding; tending; the best carriages and cots; concerns about travel, returning to work, and allowing family and friends to visit during the pandemic. The support group now welcomes guest speakers to discuss topics suggested by participants. The first guest, in August, was an early childhood development specialist.

The group has helped to fill a void created not only by the lack of maternity tours but also by the loss of other popular in-person programs, such as Bright Beginnings, a weekly social and educational gathering for new moms, their babies, and their partners.

The support group features a core troupe of mothers who have become regular, dedicated attendees — so dedicated, in fact, that when one mom traveled to Europe, she continued to join the meetings.

One frequent attendee, Nabila Balfie, said she appreciates the virtual platform. "It allows us to feel connected even though we may not see each other frequently in person. It’s a great way to stay informed and support each other."
COMMUNITY SPONSORS UNITE IN SUPPORT of Lancaster’s Child Life Program

Kelly Hurley recalls the support her family received from Child Life Specialists when her son, Mason, was diagnosed with type 1 diabetes at the age of 7.

“When Mason’s hospitalization, my husband Graham and I needed to go to training sessions several times, and the Child Life support staff would come up to the room and play games with Mason,” Hurley said. Their companionship comforted Mason and helped him feel he was not alone.

“It really helped my anxiety level,” she said. “I feel grateful to be part of a community here in Lancaster that supports such an invaluable program.”

The Child Life program, which was introduced to pediatric inpatients in late 2018, is part of Lancaster General Health’s broader commitment to advancing pediatric care and one of the many features of its new Sarah-McKearney Pediatric Inpatient Center, which opened last fall.

“Child Life Specialists are experts in the developmental needs of kids of all ages. They are trained to help children and teens cope with the stress of being in a health-care setting,” said Michelle Arnts, one of four certified Child Life Specialists at Lancaster General Hospital. “This can help reduce their anxiety during procedures and make it easier to get them the care they need.”

As a nonbillable medical service, Child Life is made possible through philanthropic support, such as through the LG Health Foundation’s 18th Annual Jay R. Bucher Memorial United Fore Golf Tournament. Despite being canceled this year due to COVID-19, the event was successful in its efforts to raise money for the program. This year’s sponsors include title sponsor Benchmark Construction, Murray, Trustmark, Stoudt Advisors, and Fulton Financial Corporation, among others.

“I have a 9-year-old and a 10-year old, and knowing if anything ever happened to them, that there was that level of care to support their anxiety and their comfort … and make their experience through the process better, is very, very powerful,” said Robert A. Brandt, III, president of Benchmark Construction.

In a special video produced by LG Health Foundation, Jan L. Bergey, president and chief executive officer of LG Health, thanked the sponsors for “their support, year after year after year. It is critical to our organization and we really appreciate them.”

When communities across the nation began demanding justice for George Floyd, Breonna Taylor, and other Black Americans who have been killed and oppressed by systemic racism, Paris D. Butler, MD, MPH, of Plastic Surgery at Pennsylvania Hospital, immediately took action. Though he decided not to attend the demonstrations in the streets in order to be available for his patients and his trainees, he recognized that the pen could be just as powerful as the protest sign.

Over the last few months, Butler has authored six manuscripts published in journals including the American Journal of Surgery and Plastic and Reconstructive Surgery discussing the urgent need to dismantle barriers faced by Black and brown physicians and surgeons and laying out steps to create an antiracist culture within health systems. He also worked with 127 physicians of color across Penn Medicine to write a “bold, but optimistic” letter that has guided many of the actions taken across the organization, such as the rollout of mandatory unconscious bias training, the requirement that all departments create vice chair roles centered of diversity, inclusion, and equity, and the designation of Martin Luther King, Jr. Day as an institutional holiday.

Whether researching pervasive health disparities, sharing his voice during PAHS’s racial justice town hall, organizing community outreach events focused on improving patients’ health literacy around breast care (read more in Who’s News), or mentoring students and residents who are underrepresented minorities in medicine, Butler is committed to using his position as a Black surgeon at an elite academic medical center to drive progress.

“Our administrators have been receptive and have taken swift action, but the only way to make substantial, sustainable change is if we all leverage our privileges and platforms,” Butler said. “Everyone has the capacity to make a difference, and it’s incumbent upon all of us to embrace antiracism and to honor and value diversity, inclusion, and equity.”

FROM MARCH THROUGH MID-AUGUST, COMMUNITY WELLNESS PROVIDED 286 VIRTUAL PROGRAMS, REACHING MORE THAN 5,500 VIEWERS.

PMX sets a consistent standard across all of our entities and work locations to make every touchpoint an opportunity to build enduring connections with patients, families, visitors, and colleagues, which is a foundational part of the UPHS Success Share program.

From March through mid-August, Community Wellness provided 286 virtual programs, reaching more than 5,500 viewers.

Princeton Health GOES VIRTUAL

To Support for New Moms and Moms to Be

because, although she gave birth at PMC, she lives an hour’s drive away and might be unable to make in-person meetings. Baille and her husband, Christian, had moved from Princeton to the Toons River, N.J. area in early 2020, both to be closer to their families and to add space for their soon-to-be-growing household. Despite the move, they stuck with the plan to give birth at PMC, where Baille’s OB/GYN was affiliated.

The Baille’s daughter, Avery, was born seven weeks premature on March 28 and spent the first two and a half weeks of her life in PMC’s neonatal intensive care unit (NICU).

Baille felt unprepared for parenthood — “I thought I was going to have seven more weeks to read the baby books” — but the nurses in the NICU were very helpful. They gave her instruction on bathing and feeding Avery, and they also connected her to Schindewolf for breastfeeding support. At some point, Schindewolf mentioned the new support group. Baille has attended regularly ever since.

“I like to hear what other moms do,” Baille said. “I believe there is no one right way to parent. You simply need to make the right choice for you and your family.”

She also enjoys sharing her experiences with the moms-to-be. “I got advice and help from so many people. It’s nice to be able to give back.”

Another regular attendee, Kimberly Gladden, and her husband, Kevin Davis, welcomed their daughter Olivia on March 30. Gladden caught on with the Princeton Health support group thanks to her relationship with Flynn-Kelton.

Gladden lost her first baby a few years ago and attended Community Wellness’ perinatal loss bereavement support group, a monthly meeting for parents who lost babies due to miscarriage, stillbirth, or early infant death.

Flynn-Kelton moderated the group, and she and Gladden have remained in touch. (Flynn-Kelton still moderates that support group, which also has been provided virtually during the COVID-19 pandemic.)

Gladden joined the support group early on, when it was still a separate group for postpartum moms and the discussion seemed to focus on questions about breastfeeding, sleep issues, and developmental milestones. Since the groups merged, the topics have broadened and Gladden feels the conversation between moms and the moms-to-be is very helpful.

“It’s good to hear their concerns and be able to share the benefit of our experiences.”

Davis, Gladden’s husband, also has gotten involved with Community Wellness, appearing in June with Olivia on a virtual version of Daddy Boot Camp, a unique educational program for first-time fathers. The class, led by “drill sergeant” Greg Barron, features discussions and demonstrations involving experienced dads and real babies.

Community Wellness began providing in-person programs again in July, notably the breastfeeding support group and various childbirth and family education classes. Some programs, such as birthing classes and Baby Care, are now provided both in person and virtually. Others, including Daddy Boot Camp and the pregnancy and postpartum support group, will be provided virtually for the foreseeable future.
People often look to their leaders for inspiration and reassurance, especially during uncertain and difficult times. This holds true for Penn Medicine employees and that’s where Lead Strong comes into play. Designed by Penn Medicine Academy, this leadership development series provides new ideas and best practices around leading during challenging times.

One Lead Strong initiative that has gained traction is Lunch with Leaders. These one-hour livestream conversations, facilitated by Cindy Morgan, VP of Organizational Development and Learning, showcase leaders from around the Health System who share their experiences and tips on a variety of topics. “Lunch with Leaders is a safe space where we can come together in dialogue with fellow leaders,” Morgan said. “Being a leader is not for the faint of heart. Support for leadership is critical as they guide their teams in this unique time in history.”

Christopher Miller, MD, director of the Penn Dermatology Oncology Center, finds it “validating to learn that I struggle with the same challenges as the speakers and other participants. And it’s empowering to brainstorm solutions in the chat rooms with hundreds of Penn’s leaders.”

Past Lunch with Leaders topics have included engaging remote teams, developing leaders, creative strategies to increase productivity, and leading during stressful times and a community dialogue on confronting systemic injustice. Along with past recordings and materials from Lunch with Leaders, the Lead Strong website contains curated leadership articles, resources and weekly tips to help our leaders navigate these unprecedented times and confidently guide their teams.

“I truly believe we all want to be the best leaders we can, and these sessions are not only helpful but inspiring,” remarked Tamara Montrey, associate director of Central Fee Abstraction. “They help motivate me to continue our department’s work and hopefully I am bringing that energy to my team.”

Throughout the fall’s Lunch with Leaders topics will include becoming a more effective, resonant leader and strategic planning for future success.

At Penn Medicine Academy, this fall’s Lunch with Leaders topics will include becoming a more effective, resonant leader and strategic planning for future success.

Chris Kopp, director of Development, Major Gifts and Donor Relations, said: “Within days we had over 500 sewers sign up and many of them were part of the CCH knitting club. Overall, we probably had 500 sewers or more who contributed to our project.”

Although the CCH Knitters club hasn’t been able to meet in the same way they have in the past, that hasn’t stopped their dedication to the cause. They continue to make baby hats, blankets, chemo caps and scarves while at home. “They contact me when they have things to drop off,” said Carol Dunigan, the hospital’s volunteer coordinator.

“Hopefully one day soon we can return and get together to knit in person.”

The Chester County Hospital Knitters club has been a cornerstone of the hospital’s volunteer outreach to patients and families. Formed in 2006 with six members, the club now has at least 30 to 40 participants. In 2018 alone, the club crafted 650 beanies for hospital patients undergoing chemotherapy (known as ‘chemo caps’), and another 1,900 for newborns (with seasonal themes), along with about 450 baby blankets, and countless red and pink scarves. The club recently fielded a request from the NICU nurses for booties, so they’ll soon be added to the mix.

A couple of the women also sew. Last year, they made 424 Chester Bears, a small stuffed animal that’s handed out to children in the emergency department to help them feel more comfortable. The Women’s Auxiliary to Chester County Hospital helps offset some of the cost of the stuffing and yarn, but the materials and labor are otherwise donated by the volunteer members of the club.

When the COVID-19 pandemic hit the hospital this past March, the club shifted gears and put their skills to the test. “By the time the virus hit our region there wasn’t a mask to be found anywhere,” said Andy Gordon, director of Business Development and Strategy at CCH. “At first, we were resistant to the idea of using homemade masks within the hospital — we wanted to be sure they would keep our staff and patients safe.”

The Centers for Disease Control issued guidance supporting the use of homemade masks in certain areas of the hospital. “We put out the call to action and the community responded,” said Ashley Kopp, director of Development, Major Gifts and Donor Relations. “Within days we had over 200 sewers sign up and many of them were part of the CCH knitting club. Overall, we probably had 500 sewers or more who contributed to our project.”

The masks were made of a medical grade fabric that can be sterilized in an autoclave. Chester County Hospital was fortunate to have enough material on hand to distribute to sewers. The mask pattern was vetted by the hospital’s frontline health care team with prototypes and masks quickly made before sewers began. “In total the hospital received over 600,000 completed masks,” Kopp said.

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The uncertainties of COVID-19 have introduced many “what-ifs” to the patient experience. For example, what if an elderly patient is admitted to the hospital with his wife at his bedside, but his medically savvy daughter is the one who usually serves as his caregiver and advocate? Not wanting to violate the one-visitor policy, she stays home, anxiously wondering if her parents are going to understand the care team’s instruction or ask the right questions. For many families navigating hospital changes during the pandemic, these types of scenarios are not just “what ifs.”

At Penn Presbyterian Medical Center, they have a valuable ally on their side: the Patient & Guest Relations (PGR) team.

“Our job is to reassure our patients and connect them with the resources they need,” said patient coordinator Janine Riley. “That being said, the pandemic and limited visitation policies have underscored just how significant loved ones are when it comes to patient advocacy.”

As is the case for staff across the Health System, PPMC’s PGR team has quickly learned to juggle both COVID-related changes — Riley’s temporary redeployment as a temperature scanner, for example — with pre-COVID responsibilities, like resolving complaints and rounding on floors to proactively connect with patients.

In addition to explaining evolving policies, offering a listening ear, and even distributing snack bags to loved ones who cannot leave the bedside, the PGR staff have taken on the role of advocates and mediators with renewed motivation. Whether they’re connecting providers and caregivers over the phone, or intervening directly on a patient’s behalf, the team is committed to making sure patients get the care that they deserve, families get the answers they need, and staff members feel supported throughout the process.

“People often come to us when there isn’t a clear-cut answer. We try to find the information they need as quickly as we can so their experience is as seamless as possible,” Riley said. “We understand how challenging a hospitalization can be, so our goal is to meet patients and their families with empathy and help them regain a sense of control in a complex, overwhelming time.”
The connections between research and clinical care for our cancer patients are among the closest that exist anywhere. In our translational centers of excellence (TCEs), where we’ve invested to support the brightest ideas for new treatments and cures, we have research-oriented nurse practitioners, social workers, and physicians who work together, daily, to understand and address what our patients experience when we do it together. This commitment to innovation is our unique connection to helping patients wherever they are — in our treatment rooms, across the parking lot, and around the world. That’s the true meaning of exceptional.

Abramson Cancer Center Earns ‘Exceptional’ Rating Via Virtual NC Review

As doctors get used to the reality of examining patients via telemedicine, they’ve also had to learn to pass their own examinations virtually. The Abramson Cancer Center (ACC) passed its most recent test with flying colors, as the National Cancer Institute (NCI) once again rated it as “exceptional,” the highest possible rating for an NCI-designated comprehensive cancer center. This is the third straight “exceptional” rating for the ACC, following similar recognition in each of the last two years. It’s an ambitious charge that simply wouldn’t be possible without the incredible collaboration that defines us as an institution.

These connections matter because we believe the people here have what it takes to make a difference, when we do it together. This spirit of collaboration fuels this work, with multidisciplinary teams of experts working in multiple Translational Centers of Excellence (TCE) to drive discovery and translation to the clinic. In each active TCE, basic discovery has led to active clinical trials that are moving to the national stage.

The ACC also has a particular focus on addressing disparities in cancer care — specifically within the ACC’s Community Outreach and Engagement program, an effort that has reached tens of thousands of residents and health care providers. A major accomplishment has been increasing access to cancer prevention, screening, care, and enrollment in clinical trials, particularly among Black patients in the community.

Just as the NCI evaluation went ahead in the midst of the pandemic, ACC’s world-class cancer care for all patients has likewise continued unabated. Since March, the ACC has kept almost every appointment for patients receiving radiation therapy, including at the Roberts Proton Therapy Center. Chemotherapy infusions have continued, and in April, the first full month of the Philadelphia region’s shutdown, which also included facilities, scientific leadership, and the level of collaboration and translation of science to innovative cancer care.

Members of the ACC have led or co-led studies that resulted in 11 U.S. Food and Drug Administration (FDA) approvals of cancer therapies since 2017, ranging from immunotherapy to targeted drugs to robotic surgery. A spirit of collaboration fuels this work, with multidisciplinary teams of scientists and clinicians working in multiple Translational Centers of Excellence (TCE) to drive discovery and translation to the clinic. In each active TCE, basic discovery has led to active clinical trials that are moving to the national stage.

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