



# Stories of Excellence



Stories of Excellence | 2019



**ENLOE**  
MEDICAL CENTER

## STORIES OF EXCELLENCE PROGRAM

At Enloe Medical Center, every employee, partner employee, physician and volunteer is a caregiver. Ultimately, we are here to care for patients and their families or care partners.

Our Stories of Excellence program recognizes and celebrates exceptional care, customer service, quality and simple acts of kindness. Quarterly, caregivers are invited to make a nomination, and Enloe's Planetree Leadership Team selects recipients for the Stories of Excellence Award. Recipients of the Stories of Excellence Awards can be found at [www.enloe.org/stories](http://www.enloe.org/stories).

We are proud of our caregivers and recognition program. This booklet shares and remembers each nomination story. We hope you enjoy these Stories of Excellence.

### Carla Dean, Vikram Reddy, Kellie Lyons and Stephanie Caine-Gnesda

Where to start? I have been a caregiver at Enloe for almost 15 years. My role is primarily to support the direct patient caregivers, so I rarely experience firsthand the work they do daily. As circumstances would have it, my dad was admitted to the hospital and moved to the Neuro-Trauma Surgical ICU. He had a history of health complications.

When I first heard he was there, I figured it was related to his medical history and that, in a few days, he would be discharged. This was not the case. Over the period of a week, my dad's health declined, and he passed away peacefully.

I want to share my story and recognize the amazing nurses, doctors and caregivers, that helped my dad and our family through this difficult time. Every day I received a call letting me know how he was doing, what was happening next and asking if I had any questions or needed anything. I don't recall all their names, but each person my sister and I spoke to were compassionate in their words and tone. It was very comforting knowing that these were the people caring for my dad.

There are four specific people that had the most impact on me and my family, through kindness, honesty, compassion, and such heartfelt words and actions. Hospitalist Vikram Reddy, M.D., was there when my dad was nearing his end of life. There were difficult decisions to make and discuss. His bedside manner was soft spoken and caring. He was informative and always open to any questions we had. Thank you, Dr. Reddy.

Carla Dean, RN, provided care to my dad while we were with him. She was exactly what we needed: caring, considerate and compassionate. Thank you, Carla. Kellie Lyons, RN, provided relief to Carla and checked on us to make sure we were comfortable and had everything we needed. She took good care of us. Thank you, Kellie.

Stephanie Caine-Gnesda, RN, was with my dad when he passed away. She let us know he passed away peacefully and without pain. She showed so much compassion in her words. Thank you, Stephanie.

I realize that I continue to use the word "compassion." It is very fitting and so clearly describes what I felt from everyone in this unit. My dad was so well taken care of, and this care extended to me and my family. My experience with these amazing people was beyond my expectation. Words cannot express enough how much I cherish all of you and the care you gave my dad in the last days of his life.



### **Ariel Hidalgo, Lauren Liedstrand, Linda Hunsinger, Jenny Humphries, Miguel Puig, Bob Hayes and Jennifer Suderman**

A 50-year-old man was admitted with the flu. He quickly became extremely unstable and required intubation with full ventilator support and prone position. The critical care team: Ariel Hidalgo, M.D., Critical Care Medicine; Lauren Liedstrand, RN, and Linda Hunsinger, charge RN, ICU/CCU; Jenny Humphries, RN, chief flight nurse, FlightCare; Miguel Puig, M.D., Cardiothoracic Surgery; Bob Hayes, chief perfusionist, Cardiovascular Services; and Jennifer Suderman, care coordinator, Case Management, quickly knew the patient would require Extracorporeal Membrane Oxygenation (ECMO), a treatment that uses a pump to circulate blood through an artificial lung back into the bloodstream, and transport to another center.

Dr. Hidalgo started the calls for transfer, the flight crew was notified and we were told they were unable to fly due to weather conditions. This patient absolutely needed ECMO to save his life. Typically, patients who are on ECMO are not transported via ground for safety reasons. Jenny made several calls in an attempt to get another facility to come and get the patient, either by ground or flight. This was unsuccessful.

The case was discussed with Bob Hayes, who agreed to transport via ground with the patient on ECMO as long as a physician was present. There was really no other choice. This patient was going to die. Dr. Puig and his team came to the bedside and placed the patient on ECMO. Now we needed a physician to accompany the patient to UC Davis. Dr. Hidalgo, who was not on call that night, volunteered to drive his car and follow the ambulance in the event of an emergency.

The patient was safely transported and had another chance at life. The coordination and amazing dedication of this entire team made that possible.

**Submitted by Cindy Llewellyn, RN, nurse manager, Critical Care**

### **Heidi Vander Velden**

I was placed on modified duty in September, and I have been accommodated to keep my full-time hours by working at Enloe Behavioral Health. Since I have been here, I have noted how exceptionally kind the staff is to all patients, regardless if they are in their care or not.

One person who continues to stand out is Heidi Vander Velden, mental health worker. No matter what the patients' situation or the reason they are in the facility, they are received warmly and welcomed. During the holidays it becomes more difficult for patients to be away from their home, family, loved ones and pets.

Last Christmas Heidi continued that welcoming feeling throughout the unit. She began preparations by tuning the TV to Christmas music, getting the tree and recruiting patients that were willing to help decorate it. When the tree was completed, the lights were bright and showed off the decorations that patients had made over the years. A week later was Christmas Eve, and we were getting toward the end of our shift when Heidi stated she would be right back -- she had "to get something from her car".

About 15 minutes later, I returned to the TV room and noticed Heidi had several bags with her and was placing items under the tree. When asked what she was doing, she replied, "just putting out a little something for them." During her time off she had taken the time to buy gifts for every patient, so they could still have the best possible Christmas.

I think that says a lot about Heidi and the caring attitude she displays toward all staff and patients.

**Submitted by Shawn McJunkin, RN, Cardiovascular Care Unit**

### **Yia "Paul" Xiong**

After working his shift, Yia "Paul" Xiong, surgical technologist, Surgery Services, was on his way to the parking garage when he ran in to a young woman, who was carrying an infant in a car seat and holding the hand of her 2- to 3-year-old son.

Her son was screaming and throwing himself on the ground. Paul offered to carry the car seat to the woman's car, so she could manage her young son. Paul is always helping in ways like this with co-workers and patients. I think he is always an example of excellence.

**Submitted by Shannon Peeler, RN, Perioperative, Surgical Services**

## Jennifer Cox

I have a story of an Enloe RN hero. One day in January, Jenni Cox, RN, clinical educator, Education Center, came upon a motorcycle accident while driving home from work. She saw a downed motorcycle and a man rolling around in the middle of a busy street.

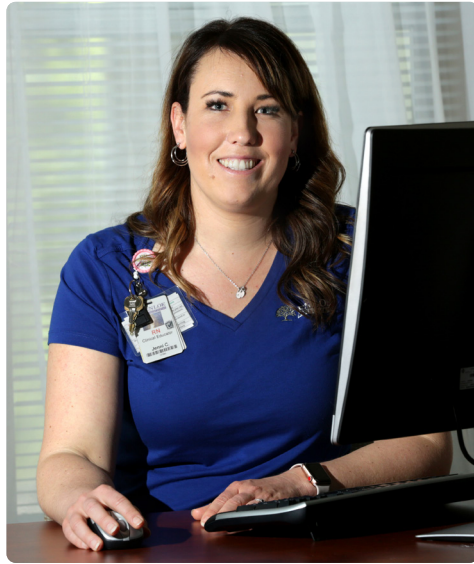
Jenni was the first person to stop, pull off the road, approach the man and offer assistance. She was extremely worried he might get hit by a car, as he was lying on the road in a busy area of Mangrove Avenue. Jenni began yelling at the man to stop moving while simultaneously trying to stop traffic and alert drivers to the hazard in the road. Cars did not stop. They swerved and continued to drive past Jenni and the injured man.

Soon Jenni realized the man was badly injured. She said, "I have never seen so much blood." She took a quick assessment of him and noted he was young, mid-20s, and that there were extreme injuries to his leg. She recognized there was significant bleeding coming from what she believed to be an almost-severed leg.

Jenni removed her sweater and began holding pressure to the area of his leg that seemed to be bleeding the most. Soon another driver stopped and a man jumped out to assist with traffic control. Others began arriving as well and emergency services were notified.

Jenni told one bystander she needed a tourniquet. The man removed his belt, and together they pulled it tight on the man's thigh. This seemed to slow the bleeding, but Jenni continued to hold pressure. A fire medic arrived soon after and assessed the situation. He told Jenni he was thankful for the makeshift tourniquet and stated he wanted to apply a proper one.

Jenni continued to hold pressure to the young man's wounds as the fire medic replaced the belt with a true tourniquet. Jenni felt a huge surge of warm fluid over her hands as the new tourniquet was placed. She yelled to the medic to hurry and tighten it, as she could feel an increase in bleeding. By this time, other emergency personnel and police officers arrived to secure the scene and take over the care of this victim.



Those who know Jenni know she is a caring, compassionate and extremely competent nurse. Jenni is a mentor to many in the hospital. I wanted to recognize her for not only being an amazing nurse in the hospital, but for taking her rapid assessment skills and using them to save a life in the community.

Jenni is a true hero. She is my hero! I am so proud of her.

**Submitted by Shannon Doyle, RN, nurse manager, Mother & Baby Care Center**

## Kevin Vander Velden and Bill Seguire

A re-organization required the shifting of specialty equipment in and around different exam rooms at the Wound/Ostomy & Hyperbaric Center. Engineering has been super busy taking care of multiple "quick needs" around the organization between the Camp Fire, new clinics and normal operational needs. Well, time came for a cabinet to be moved and installed urgently.

A call was placed to Kevin VanderVelden, director, Plant Operations. He had a crew over to look at the need, assess the job, and come up with an immediate plan to shift everything, while keeping the clinic and the exam rooms operational to not disrupt patient care. The Engineering team completed the move and wall repair over a 2-hour period when the room could be freed. The crew worked like a well-timed orchestra: demo, move, replacement, wall repair, anchoring and they cleaned up the area to ensure it was spotless when done.

At the same time, a small extension piece was needed for the receptionist for this area of the clinic. Bill Seguire, director, Property Development and Facilities Management, was contacted, and knowing how important it was for operations, he found one of the extension pieces the same day. With everyone else on the Engineering crew busy, he brought it over himself, placed it, and made sure the desk equipment was put into place so the receptionist would not lift or be disrupted in her work. Everyone who helped during this time went above and beyond for our clinic.

**Submitted by Linda Reynolds, RN, nurse manager, Wound, Ostomy & Diabetes Services**

## Sandra Dailey, Kristina Karagianes, Terri Vandelune and Karen Irving

This is a Christmas story. Here on Behavioral Health, Sandra Dailey, RN, Kristina Karagianes, RN, Terri Vandelune, RN, and Karen Irving, occupational therapist, wanted to make sure the patients had a great Christmas, even though they were in the hospital.

They went out and bought gifts for all the patients. They filled Christmas stockings and gave Christmas-themed sweet treats. I want to thank them for their kindness and generosity. It made the patients feel special and cared for.

**Submitted by Debbie Strukan, nurse manager, Behavioral Health**



## Critical Incident Stress Management Team

In September, just a couple months before the Camp Fire, the International Critical Incident Stress Foundation completed training of 16 additional employees to provide critical incident stress management (CISM) support for a total of 23 trained professionals. This training expanded our social work only team to a true peer facilitator CISM team. The timing of this work was incredible. Some might say fortuitous, others might say a bit of a miracle. Little did they know they would be called upon for such great need after November 8.

We have our Employee Assistance Program, and we can — and did — call on them for debriefing support and one-on-one availability for Enloe caregivers. They did a great job. Our caregivers feel so much more comfortable with their peers who understand their work, the health care setting, and in this case, the horrific nature of the fire and evacuation.

We also had a local counselor, Steve Flowers, who called and asked where he could help. He volunteered providing one-on-one drop-in visits. When he arrived, I took a few minutes of his time for my own debrief, and it is what got me through the next few weeks. With Steve, I could speak out loud about my own evacuation experience. When I greeted one employee in the hall on her way to talk to Steve, she literally jumped up and down a little bit when she learned she could talk to someone she knew and respected. The relief in her face was evident.

Our Critical Incident Stress Management team aims to increase coping and stress management, reduce the risk of burnout, and promote resiliency. They are succeeding. They held 22 group debriefings from November 19 to 30. Kari Johnson, the department assistant for Case Management coordinated the calendar, reserved the space, and made sure there was a trained debriefer at each session. The coordination of this effort was a moving target and a logistical circus. Thank you, Kari!

It takes a lot of courage and strength for these 23 trained Enloe caregivers to

provide this service for their peers. In addition to the formal debrief sessions, they responded to innumerable one on one and small group defusings with their colleagues throughout the medical center almost every shift they have worked since the fire. They come from five different departments, Case Management, Emergency Department, Mother & Baby Care Center, Neuro Trauma, and Post Acute Care. Thank you all for your compassionate and selfless service to others.

Thank you to Amanda Wilkinson, assistant manager, Case Management, for providing leadership to this team. Thank you to the Enloe Senior Team for approving the investment in this much-needed resource in the health care setting. It is just one more reason I am proud to work with all of you.

Submitted by Linda Irvine, director, Human Resources

## Linda Reynolds and Andrew Knapp

We had an evacuee from the fire present to the Emergency Department. It was determined that he needed to be admitted. He declined due to a social situation from the fire. He and his wife were staying temporarily at a hotel in Red Bluff, and his wife was unable to care for herself while he was in the hospital. He was returning to the ED twice daily for antibiotics.

We discussed the case with Linda Reynolds, RN, nurse manager of Wound, Ostomy & Diabetes Services, and Andrew Knapp, D.O. They developed a treatment plan so he could be seen at the Wound/Ostomy & Hyperbaric Center and avoid an admission. With collaboration from Linda and Dr. Knapp, the patient could then be seen in the right setting to meet his complex medical needs, while also maintaining his ability to care for his wife.

The teamwork positively impacted the patient to receive care for a complex medical condition in the midst of the devastating social issue of being displaced by the fire.

Submitted by Michelle Evans, director, Case Management

## Kayla Johnson

We had a patient recently who had an early morning appointment. He was dropped off at 8:15 a.m. and completed his appointment by 9 a.m. He sat in the lobby patiently waiting for his daughter to pick him up. For reasons unknown, she was not able to pick him up in a timely manner.

When the lunch hour approached, Kayla Johnson, clinic registration rep, Ortho Joint Clinic, went to Russell's Sunrise Cafe and bought this sweet man lunch. She sat in the lobby and chatted with him, providing him company and helping pass the time. She kept an eye on him, making sure his needs were met while he waited. She went above and beyond to make this patient know he was cared about. I am very proud of the kindness she demonstrated.

Submitted by Angela Stevens, clinic coordinator, Ortho Joint Clinic

## Amber Ascherin and Kyle Kappenman

I arrived at the Chico Elks Lodge on Saturday morning, Nov. 10, to volunteer. I was greeted by Amber Ascherin, RN, Medical/Neurological Unit, who had been there all night for the last two nights. A friend had contacted her on Nov. 8, saying the Elks Lodge needed medical care for people in shelter there.



Amber immediately responded, and although she is a day shift nurse, she worked the night shift at the Elks, caring for the evacuees. She had her husband, a night shift nurse on Medical/Neurological, cover her shift at Enloe so she could continue to volunteer.

When I returned to the Elks Lodge the next morning, I was surprised to find Amber there, having done her third

night shift in a row. Kyle Kappenman, a paramedic, had been working with her all three nights as well. Amber and Kyle selflessly put their own needs aside to respond to the disaster and provide the compassionate care that the evacuees so desperately needed.

Amber also realized there would be many health care workers in our community who would have been evacuated and in need of scrubs to wear to work. She set up a scrubs drive through social media so people could drop off or pick up scrubs at her house. She made it open to the whole community because she knew it was not just the Enloe staff who would need the scrubs, but also nurses and nurse's aides from other facilities in the community.

Submitted by Sharon Kaplan, RN, Neuro Trauma ICU

## Reyes Nicholas and Dan Connell

I recently received a thank you card addressed to the Emergency Department from a 58-year-old woman seen here in mid-December. She was displaced from her Paradise home during the traumatic evacuation due to the Camp Fire and was on her way to a rental home in Magalia when she experienced disabling dizziness. She was treated with a brain attack protocol when she arrived.

Reyes Nicholas, RN, was her primary nurse, and she had lots of conversations

with this patient as she tried to ease her anxiety. She found out this patient was on her way to buy a heated blanket when the symptoms started and that she also had to drive by her burned house. The patient told Reyes about her two dogs and how grateful she was to have them.

When Reyes finished her nightshift, she went home and realized that she had an extra heated blanket that was brand new. Reyes decided to make a basket for the woman and asked Dan Connell, RN, if he would provide new dog collars. Dan has a family business of making leather dog collars. She put the basket together and delivered it to the patient in the ICU.

The patient writes, "This thank you is so late in getting to you during these incredible, trying times. But it is so heartfelt, to say the least. I received wonderful care during my stay at Enloe from the emergency nurses and staff, and the incredible nurses in ICU, who were so kind and caring. To top it all off, I was given that beautiful basket with handmade dog collars that were perfection.

"Please let Dan, who made them, know how awesome they are and fit my two girls just right. The picture frame, socks and electric blanket were so thoughtful. You all work so hard, and to take your time and do that for me and my girls was just priceless at such a hard time in our lives. I love the electric blanket and will treasure it always. I just can't thank you all enough. Our hearts are full! God bless each of you." She signed the letter with her and her dogs' names.

Submitted by Patty Arena, RN, nurse manager, Emergency Department

## Roxane Roberts

I would like to submit a Story of Excellence for Roxane Roberts. I thought this would be an appropriate story for April because it's National Donate Life Month, and Morgan, the patient and my daughter, will be recognized as an organ recipient in April as well. This example of human kindness and exceptional customer service fits in nicely.

Roxane works in the lab as a resource lab assistant and a phlebotomist. She has several special gifts, including listening, patience and caring. Roxane has displayed Enloe's core values and patient-centered care in many ways over the years, but I have personally watched her interpersonal skills and am very thankful for her and the difference she has made in my daughter's life.

My daughter Morgan had a liver transplant in 2011 and has had to have thousands of blood draws over the last seven years. After Morgan's liver transplant, she required blood draws every week and was so afraid. Roxane spent time gaining Morgan's trust, showing her how to relax and trust the process. Roxane helped Morgan transition from a scared little girl, who was traumatized with each poke, to a strong little warrior, who knew exactly what each step would be and who was empowered during the lab-draw process.

Now Morgan jumps up in the chair, puts her arm out and tells Roxane what to do, step by step, with a smile on her face. The trust Roxane develops with her patients is palpable, and I see it every day. Roxane has touched many patients' lives, and she deserves to be recognized for her excellent patient care and contribution to this organization. Thank you, Roxane. We appreciate you and your skills every day! You make a difference.

Submitted by Stacey Passalacqua, RN, nurse manager, Telemetry Care Unit

## Sarah Talley and Lorraine Chun

"It's a girl!"

In February, something extraordinary happened, something that has never happened before: a baby was born in Enloe's PACA (Perianesthesia) Unit in Surgical Services. Sarah Talley, RN, was working there the day the baby was born. She was tending to her patient when she heard yelling in the hallway. The yelling continued for about a minute, and Sarah knew someone needed help.

She opened the doors, and in the hallway, was a pregnant woman on a stretcher screaming. The patient was surrounded by registered nurses from the Emergency Department and labor and delivery, and a transport tech. The patient continued to yell, "The baby is coming!"

Sarah could see the nurses couldn't decide if they should take the patient up to the Mother & Baby Care Center or to the ER, but they knew there would be no time for either of those locations. The baby was coming! Sarah quickly told everyone to come into the PACA unit and that she would help with whatever they needed. Thankfully, an incubation cart came from labor and delivery just before the baby was born. Sarah helped the mother with anything she needed to make her comfortable for the delivery. About 3 minutes after seeing the patient in the hallway, a healthy baby girl was delivered by Lorraine Chun, M.D., Obstetrics & Gynecology.



Since the delivery happened on the PACA unit, the patients there could hear what was going on. After the baby was born, PACA patients and their family members started clapping and cheering for the mother and her new baby girl. Sarah showed quick thinking in helping this mother deliver her baby, and everyone on the unit is very proud of her!

This story is truly a moment of excellence that needs to be showcased for Sarah, Dr. Chun, and every employee who helped deliver this baby in a safe and healthy manner.

Submitted by David Henderson, RN, clinical educator, Education Center

## Rehab Therapies – Inpatient Rehab Employees

Evacuation morning — while packing my family and emergency files, and being one of the lucky ones to make it out of town into Chico in 2.5 hours — I was called into work at the Rehabilitation Center to help during the immediate crisis.

As it so happens, I was scheduled to work the next four days, so I could have Tuesday off for my daughter's birthday. But since plans changed, no birthday celebration was scheduled. My rehab family took it upon themselves to organize a birthday party with other co-workers' children and families as participants, presents, and a Trolls birthday cake!

You would have thought a 5-year-old won the lottery, as she received everything from clothes, a party dress, toys, school supplies with learning materials, books and candy. Here comes the excellence part: Many staff members also gave from their hearts in the much-needed capacity of gift cards and money, so the rest of my family could get needed supplies without stretching out our bank account.

My heart is so humbled, and with Thanksgiving around the corner, I have many blessings to count. Although every staff member has felt the stress of the crisis, and we are still surviving the aftermath, it really is the little things we do for each other that go the greatest distance.

Thank you to my rehab family for giving and caring. If I had a huge card to display, it still would not show the extent of my gratitude.

Submitted by Elizabeth Hower, RN, Rehabilitation Care Nursing

## Kate Mahoney and Cindy Barbo

Registered Nurses Kate Mahoney and Cindy Barbo, from Wound Ostomy Clinic went above and beyond to help provide specialty supplies for a patient in need. The patient has been seeing Kate and Cindy frequently throughout the past year in the outpatient setting and for inpatient visits during hospitalizations. The nurses were working diligently to find a solution and a pouching system that would work for this complex ostomy/fistula patient. They were make-shifting pouches until they found a specialty ostomy/fistula

containment system. The nurses ordered two samples for the patient to try. This pouching system could last one whole week on the patient's skin without leaking. It was a miracle!

The only problem is, with this specialty product comes specialty pricing. Originally the nurses and the patient received a quote of \$340 for 10 pouches. This would last two and a half months if the wear time remained consistent with the trial. The patient is financially unable to afford that cost.

The nurses took it upon themselves to call suppliers to see if there was a company offering the product at a cheaper rate. Cindy found a company that charges \$220 per box. Immediately, Kate and Cindy bought a box of pouches for the patient on their own dime. They knew the importance behind making sure this patient was in the proper pouching system. Kate and Cindy were the definition of patient-centered care and patient safety that day. I am grateful I have the opportunity to call them co-workers.

Submitted by **Janessa Mostow**, program assistant, **Wound Ostomy Clinic**

QUARTER 2 – Following are stories submitted during the second quarter of 2019.

## Engineering, Environmental Services, Infection Prevention & Reg. Compliance, Infusion Therapy, Information Services, Cancer Registry, Lymphedema Therapy, Nettleton Mother & Baby Care Center, Print Services and Volunteers

Many Enloe superheroes worked together and put patient care first in response to flooding that occurred at the Enloe Regional Cancer Center's Infusion Therapy clinic. On April 2, at about 10 p.m., Environmental Services employee Shane Washburn discovered water pouring into the clinic from the garden due to torrential rains. Shane elicited the help of co-worker Stephanie Hammett, and they quickly began responding to the situation. Shane notified both Security and Engineering.

Simultaneously, Brady Haynes, VP, Physician Enterprise, called Traci Hunt, director, Cancer Center, regarding the water backing up in the parking lot. Ehren Hawkins, manager, Cancer Center Operation & Radiation Therapy, was also notified and made it there first to assess any internal damage. Upon entering Infusion Therapy, Ehren saw Shane and Stephanie working to extract water using a carpet cleaner and blankets. Shortly after, Traci and Susan Hawes, nurse manager, Infusion Therapy, arrived. Engineering followed, delivering machines to extract the water. The team quickly got to work.

Together EVS, Engineering and the Cancer Center team evaluated options.



Knowing they had approximately 50 patients returning for care the following morning, the team agreed to work through the evening to tear out floorboards, cut out the damaged drywall, seal up the repaired work and clean the suite by 8 a.m. This was no small feat! Unbeknownst to the Cancer Center leadership team, many of the Engineering staff had previously responded to flooding in other Enloe departments.

Susan cranked up the music, Ehren got donuts and Engineering headed to their shop to gather tools. Within a few hours, the water-exposed sheetrock was removed. EVS cleaned the clinic, and Susie Benson, manager, Infection Prevention & Reg Compliance, gave the green light to proceed with treatment.



We were back in action to see patients at 8 a.m.

That same day, a plan for repairing the damage was established. Infusion Therapy would need to be relocated, temporarily, to the Fountain Medical Plaza's lobby, conference room and occupied offices. Departments using the Fountain Medical Conference Room rescheduled and moved their office items into alternate spaces. Printing created new wayfinding signage and installed it on the weekend. The Enloe Mother & Baby Education Center & Breastfeeding Supply Store graciously accommodated displaced classes and meetings. Within two days, Engineering converted a waiting area into a clinic space.

On Friday, staff began a coordinated effort to relocate existing services. By Saturday afternoon, Information Services had transferred and installed all the computers to the new locations. By end of day, Lymphedema Therapy and Infusion Therapy staff, with the assistance of Engineering and the Cancer Center leadership team, accomplished major feats to set up three infusion clinics, a nursing station, and a supply room in the new spaces.

To ensure that patients could find their way, volunteers and interns were scheduled from other departments to escort patients and families to their chairs in the temporary infusion clinics. Security also assisted by providing direction to the new areas.

Everything was ready on Monday morning, and not one day of patient care was lost. For cancer patients, keeping their treatment as scheduled is particularly critical, and they are so grateful. Hats off to Shane in EVS for his quick thinking and creative approach, which decreased the amount of damage to the infusion suite. Special kudos to Brady, Traci, Ehren, Susan and the other "all-nighters." Everyone involved has shown determination, flexibility and incredible attitudes in the face of adversity.

**Submitted by Rebecca Senoglu, cancer support program coordinator, Enloe Regional Cancer Center**

## Kathy Hayes

I have had the pleasure of working with Kathy Hayes, Enloe Volunteer, at the Volunteers' front desk in the main lobby for about one month. Kathy has consistently demonstrated her commitment to the Planetree philosophy of personalizing, humanizing and demystifying the health care experience. But yesterday, Kathy truly demonstrated the Planetree philosophy with the most gracious act of kindness and compassion.

A young man came to the front desk asking where he could pay his bill and where he could pick up a CD copy of his X-rays. Kathy told him bill payment was in Registration, and the CD would be in Radiology. She then asked which he wanted to do first.

Seeking to take care of his bill first, he said he would like to go to Registration but would need a wheelchair to get to Radiology. Kathy took him into Registration and got him settled. When Kathy came back to the front desk, she asked if we had a Bariatric wheelchair for use by Guest Services. She wanted to have the right size chair available when he needed it. Being told that we did not, Kathy immediately asked if it would be OK if she went up to the third floor, where she knew there was one, as she had used it for another patient earlier in the day. So off she went to get the chair ready before our guest was even finished paying his bill.

Kathy took him to Radiology with a big smile on her face, cheerily conversing with the man, who was obviously thrilled. Kathy later told me that he had told her that having to ask for help to get to Radiology was a true test of his own humility and thus difficult for him.

**Submitted by Peggy Jarolin, Enloe Volunteers**

## Roni Bennett

I want to tell you about how Roni Bennett, a CNA on the Telemetry Care Unit, went above and beyond her normal duties. We received a patient from one of our local skilled nursing facilities who was very ill and suffered from dementia. She was very scared being in new surroundings and with new people.

Roni and the nursing staff tried to reassure her, letting her know she was safe and that we would be caring for her while she was ill. The patient was in obvious distress and kept asking for her puppy. Roni stayed with her to make her more comfortable and asked her who puppy was. Roni found out her puppy was her stuffed animal that gave her comfort when she was scared. Roni came to me saying she wanted to go down to the Gift Shop to buy the patient a stuffed animal and see if that would help ease her anxiety. She went to the Gift Shop, bought a stuffed bear, gave it to the patient and stayed with her until she started to feel better.

Roni is an amazing CNA to all her patients, but this touched me and showed me how much she cares for them. I am so proud to work with her and nominate her for her amazing work.

**Submitted by Teresa Roberts, RN charge, Telemetry Care Unit**



## Matt Rosendin

I would like to nominate Telemetry Care Unit RN Matt Rosendin for a Moment of Excellence. We were discharging our patient on the second floor, and right before he left, the patient came to the desk and asked us to let Matt know just how much he appreciated the care he received from him.



The patient stated that without the superb care he received from Matt on the hardest night of his life, he would have left against medical advice and continued down the path of addiction he had been on. He stated that he now has a strong desire to stay clean for himself, as well as his family. He also told us that he was impressed with the care his wife and young daughter received from Matt. Matt went out of his way to make sure they were comfortable and had everything they needed to stay the night with the patient. I believe that this attention

and the care Matt demonstrated is a perfect example of how nurses at Enloe go above and beyond to help their patients.

The patient and his wife filled out a Moment of Excellence card that said, “Thank you for keeping me alive and my head straight and caring for my family. I’m calling for a raise for you immediately, my friend.”

His wife wrote, “Thank you so much for taking care of my husband. You really went out of your way to make sure he was as comfortable as he possibly could be, and you have no idea how much that means to our family. Hugest love.”

**Submitted by Angela Caspary, monitor tech, Telemetry Care Unit**

## Amanda Moore and Kelsey Norton

In April we had a situation occur that was remedied by two of our nurses. A patient was admitted for a possible heart attack with other components involved. She was not to eat or drink (NPO) anything the night before because she had to go to Cardiac Catheterization for a possible intervention the next day.

She came back from Catheterization Lab around 1700 and her husband brought her food from The Italian Cottage as a treat for having to be NPO. The bag

with this patient’s dinner was sitting on the bedside table near the neighboring bed in a semi-private room. Her neighbor was recently discharged, and a housekeeper was cleaning that patient’s area. Not realizing the bag on the table belonged to the patient in the other bed, it was accidentally thrown away. When our housekeeper realized what she had done, she apologized profusely.

Amanda Moore, RN, Telemetry Care Unit, and bedside nurse, heard of it and came to the room immediately to assess the situation, then remedied it without haste. Amanda ordered the exact same dinner that the patient’s husband brought in, paid for it and came to me asking if Kelsey Norton, RN, Telemetry Care Unit, could go pick it up. Kelsey was more than happy to complete this task for Amanda, and more so for our patient. Kelsey drove to The Italian Cottage and picked up the order. When she came back, the patient was very thankful for the treat.

I was very proud of our nurses going above and beyond to make our patient feel better about the situation that had transpired.

Thank you, Amanda and Kelsey, for continually putting our patients first and foremost when delivering care. I am proud to work with such kind and caring individuals.

**Submitted by Roberta Gamache, RN charge, Telemetry Care Unit**

## Kaycie Cushman

In my position as the stroke program coordinator, I travel all around the hospital and often see acts of kindness. One afternoon I was walking in one of the main hallways on the first floor. This is when I saw Kaycie Cushman, patient access representative, Admitting department, with her arm wrapped around an elderly gentlemen's arm as she escorted him down the hallway.

It was clear he was not able to see well. I see acts of kindness pretty regularly, but this one stood out merely because of the smile on this gentlemen's face. Kaycie walked arm in arm with him to his destination. We often forget or overlook that it is the little acts of kindness that can create the most powerful impact.

One of my favorite quotes is “People will forget what you've said, people will forget what you did, but they will never forget the way you made them feel.” It was evident that this simple act of kindness made this patient feel safe, dignified and well cared for.

**Submitted by Holly Abrams, coordinator, Enloe Stroke Program**

## Rachael Thomason and Sandra Smith

Rachael Thomason, a physical therapist for Outpatient Therapy Services at the Rehabilitation Center, and Sandra Smith, an occupational therapist in the Acute Care department at the Rehabilitation Center, deserve special

recognition for going out of their way to help a patient within their community. Today, Rachael had a 68-year-old female patient come in to her appointment noticeably short of breath from having walked to the Rehabilitation Center from her home.

This patient has been on medications for various illnesses and had a lack of transportation because she was one of the thousands of people affected and displaced by the Camp Fire. She had been walking to and from her appointments.

Rachael realized the patient would not be able to realistically participate in her therapy appointment, so decided not to proceed with treatment for that day. Knowing that her patient would have to walk miles back to her place of residence, Rachael decided to take time during her lunch break to personally drive this patient back to where she lived. Rachael said she was worried if this patient would make it home safely and had to help her.

This is not the only Enloe employee who has helped this patient. Sandra had also driven her to her outpatient therapy appointments, taking time out of her day to make sure this patient got the care she needed. Sandra had known of the patient, and her transportation difficulties, from interactions in the community with her own family. Understanding how important her therapy appointments would be, Sandra took it upon herself to take time out of her day and busy home life to ensure this patient arrived to some of her appointments.

For these reasons, I believe that Rachael and Sandra both deserve special recognition for their willingness to help a member of the community beyond what is required of them as Enloe employees.

**Submitted by Matthew Thomason, clinical education coordinator, Post-Acute Care Administration**

## Charissa Fitzgerald

Charissa Fitzgerald, CNA, Surgical Care Unit, received this Moment of Excellence card from Jessie Alling, RN, Surgical Care Unit: “Thank you for being awesome! For bringing in clothes and shoes for a patient. That was very kind and generous. And the clothes fit perfectly!”

Some people have it in their heart to give although they have lost everything. Charissa is that kind of person. She treats everyone she meets with kindness and respect. Charissa lost everything in the Paradise Camp Fire and still gives to others.

**Submitted by Pat Paddock, RN, assistant nurse manager, and Jessie Alling, RN, Surgical Care Unit**

## Kimie Kaps

I have worked at Enloe for six years and have been in my current role for seven weeks. I have never met an employee at Enloe who I so quickly thought to myself, “Someone has to have done a Story of Excellence on her.”

Many of us who are not in frontline patient care try to remember that, at Enloe, we all are part of patient care, no matter our job title. At times, I have even felt frustrated that I cannot find more things to do in order to make a difference for patients and instead just try to do the best I can at supporting those who are on the front lines every day. There is definitely joy in this, however, I have been reminded by a new friend here in the Critical Care cluster, who has been such an example to me, of how much we can make a difference even in the small things.

Most Stories of Excellence that I have read are about an instance where an employee went above and beyond. However, I have yet to meet someone who embodied our core values and care for patients on a daily basis, until I met Kimie Kaps from Environmental Services.

My office is located on the second floor, and Kimie is one of our housekeepers. There are two patient rooms right across from me, and I can't tell you the number of times I have sat at my desk and gotten tears in my eyes listening to Kimie interact with our patients and families. She shows so much love, care, empathy, and compassion that she has really modeled what it means to go way above and beyond.

Kimie does not just clean hospital rooms. She introduces herself to patients and their families, she talks to patients who are lonely and have no family visiting them, and she does all she can to encourage them. She offers and shares her lunch from home with tired visitors who do not want to leave their loved ones. She always tells patients how the nurses and doctors at Enloe really do care for them and that they will support them anyway they can.

She brings families coffee, which I call “Kimie Coffee,” when they are tired and weary from their experience. She has brought patients balloons and baked them things when she finds out they will be here over their birthdays. She offers



herself in any way she can to the families, and I'm talking every day.

I have not even touched on how she is with the staff here. She knows all our names, knows what we need individually in our daily jobs and offers to do anything she can to make our jobs easier. She makes breakfast for everyone on a shift and brings it to work. Every day she cares for this unit and every day we are touched by her spirit of service.

Kimie is someone who doesn't "try" to care for people. It is just who she is, from the bottom of her heart.

She has been at Enloe over nine years and is so grateful that she is a part of this hospital. She has been such an encouragement to me and renews my hope that people like Kimie still exist. Please honor Kimie with a Story of Excellence. She truly is not a moment of excellence, a day or even a week. She is a story that plays out for all of us each day we see her.

**Submitted by Laura Thompson, program assistant, Education Center**

## **Kaleena Hans, Shannon Delles, Kira Cuneo**

My 2-year-old son, Owen, had a difficult winter with RSV, multiple ear infections and multiple Emergency Department visits. One day in March, my husband brought our son to the ED for being lethargic and not being able to catch his breath. I was working that day and was at the very end of my shift. My team lead and charge nurse sent me to the ED to be with my son and husband.

The ED was very busy, as usual. After giving my son a breathing treatment, IV steroids, antibiotics and fluids, he was not turning a corner. Kaleena Hans,

respiratory care practitioner II, Respiratory Therapy, was not primarily assigned to Owen. She was just checking on us to help her co-worker, who was occupied in another patient room. Kaleena immediately noticed the severity of Owen's case and took quick action. She spoke with the ED provider, initiated high-flow oxygen and never left our side.

Once we were admitted to the floor, she advocated for transfer to a higher level of care. She called the house supervisor, her charge and the floor charge, and was in frequent communication with everyone. At one point she saw FlightCare's Shannon D. Delles, RN, and Kira Cuneo, flight paramedic, in the hallway and asked them to assess Owen. They saw we would be needing to be flown to UC Davis, so they were getting everything prepared and ready to leave once we got a room assigned.

That night, just after midnight, we were flown to the UC Davis Pediatric Intensive Care Unit. Owen was still declining. When we got to UC Davis, the provider made the comment that we got Owen there just in time to not have to intubate him.

I strongly believe that if it was not for Kaleena's exceptional care, kindness, intelligence and patient-centered care, we would have had a much different outcome for our son. We are so lucky to have someone such as Kaleena on our staff, and I am thankful she was on that night.

**Submitted by Amanda Lefor, RN, clinical educator, Enloe Education Center**

## **Roxane Roberts**

Roxane Roberts, resource lab assistant, Laboratory Services, was doing sweat testing with a child patient who was crying and having a difficult time cooperating with the very long procedure that requires two staff to perform. Roxane pulled out her phone, put some games on it and let the child play with it during the procedure. It made the rest of the procedure very easy for the patient and the staff.

From that experience Roxane realized it would be a great help to the staff working with children who are not that happy if they had something that would divert their attention. She purchased and donated an iPod to the outpatient draw station. Tiffanie Shelton, outpatient phlebotomist, installed child-appropriate games on the iPod, and now we have equipment ready to help us during kids' draws and testing.

Roxane is an embodiment of the Planetree spirit that she continues to live out every day.

**Submitted by Alma Calzado-Knudson, assistant manager, Laboratory Services**



## Chris Banks

I was working my shift in the Emergency Department and got a call from my oldest son that he and his brother were in a car accident. He told me his brother was unconscious and bleeding. FlightCare was sent to pick up my son, and the next couple hours were kind of a blur.

The ED staff and management rallied around me. Within minutes of my son being in the trauma room, Chris Banks, physician assistant, Trauma Surgery, had taken my husband and I under his wing. He shared his life experience, related to our fear and calmed us with his presence. He was this way our entire stay at Enloe. He kept talking to us, checking in with us and provided excellent care to our son.

I am so grateful that my son will be OK, and when I look back on this experience Chris stands out to me as someone who went far above his duties and cared for our entire family. The entire ED staff and Neuro Trauma ICU staff also provided outstanding care. I could not have asked for a better experience from start to finish. My family will be forever grateful.

Submitted by Natalie Wren, RN, Emergency Department



When it looked as though the patient was going to die and the family was beside themselves with grief, the decision was made to take the patient outside to the Rose Garden. The patient was transferred to a neuro chair and moved outside with Brian, Alex, and Jamie Holmes, the spiritual support volunteer, along for support. Once outside, while it was better than the hospital room, the family was distracted by the noise from the construction of the cardiac cath lab. Denise Atkinson, RN, nursing supervisor, called Engineering, and, putting patient care first, they temporarily stopped construction. The family could then have some quiet time with their loved one.

When the patient required repositioning, Chris Coats and Cody Roosa, lift technicians, Team Lift, came to the Rose Garden to help. The family really wanted to take the patient home.

David Hahn, D.O., hospitalist medicine, and Alex, worked tirelessly to complete all of the required aspects to get the patient home and fulfill the patient's and family's wishes. Hospice outreach coordinator Sandy Koshell-Galka came to the Rose Garden, met with the family, set up hospice care and provided education to the wife.

The last piece was the ambulance ride home. When Alex couldn't secure one, Denise called Marty Marshall, director, Emergency Services, explained the situation, and they secured an ambulance to take the patient home. The ambulance crew came to the Rose Garden and transferred the patient home. When the family left, they shared how amazing everyone had been.

While I have mentioned several key individuals in the story, it truly took an entire organization and a patient-centered culture to make this story possible.

Submitted by Jennifer Jeffries, RN charge, ICU/CCU

QUARTER 3 – Following are stories submitted during the third quarter of 2019.

## Brian Larson, Alex Albarran, Denise Atkinson, David Hahn, Sandy Koshell-Galka, Jamie Holmes, Engineering department, Chris Coats and Cody Roosa

After working at Enloe for over a decade, I should not be surprised by how far the staff is willing to go to honor patients and their families. Nonetheless, today I was amazed at how an entire organization came together to make a dying patient's request happen.

A man in his 30s was put on comfort care in the ICU after it was determined that further medical treatment would be futile. After Brian Larson, RN, ICU/CCU, the bedside nurse, had turned off the medication that was maintaining his blood pressure, the patient's wife, daughter and family expressed that they were under the impression that they would be able to take him home. The patient's blood pressure was low, and no plans had been initiated to be able to transfer the patient home safely. The family was adamant that they had promised him he would not die in the hospital. They told the nurse how he never went to the doctor or hospital, that they lived on a farm, and wanted him to die outside, at home.

Alex Albarran, social worker, Supportive & Palliative Care, was trying to rapidly put into place a way to get the patient home, but everything takes time.

## Medical Staff, Neuro Trauma-Surgical ICU, Telemetry Care Unit, Emergency department, Pharmacy and Surgical Care Unit

*The person who submitted this story wishes to thank many people. Among the names she could recall are hospitalist medicine specialists Komal Patel, M.D., Daniel Tismal, M.D., Kevin Brown, M.D., and Brian Courtney, M.D., nephrologists Nasrin Ashouian, M.D., Mona Sarbu, M.D., and Jon Ferguson, D.O., hematologist/oncologist Prathima Prodduturi, M.D., critical care medicine specialist Ariel Hidalgo, M.D., Tyler Logan, RN, Ellen Noble, RN charge, Athena McGowan, RN, Jerry Calbert, clinical services pharmacist Kristapor Thomassian, Manny Salinas, CNA, and Katie Vann, RN.*

One day in May, I returned home from my job at Enloe Medical Center to find my husband, Roy, very ill. Thinking it might be the flu, we went to Cohasset Prompt Care but were quickly referred to the Emergency department. Once there, they got Roy registered and into a wheelchair. While waiting in the lobby to be seen, Roy passed out. Staff immediately hurried to help and took him straight back to the doctor. They quickly figured out that he was really sick, started an IV, ran lots of tests and admitted him to the fifth floor.

By the next morning, Roy's condition had deteriorated rapidly to sepsis and DIC (disseminated intravascular coagulation, a complicated condition that can occur when someone has severe sepsis or septic shock), and he was transferred to Neuro-Trauma-Surgical Intensive Care Unit. Doctors and staff worked very hard, running all sorts of tests to try to determine the cause of Roy's symptoms, while simultaneously, aggressively treating those symptoms to save his life.

It wasn't until the very end of his stay, three weeks later, that they were able to determine the cause was a rare bacteria Roy was infected with after receiving a scratch from playing with his dog the week before he was admitted. The bacteria the dog picked up from soil is very rare and life threatening. Only two of the doctors working on Roy's case had any experience with this particular bacteria, and in both cases, the patients did not survive.

If I hadn't brought Roy to the emergency room that day at the recommendation of Prompt Care, and if the ER had treated him for the flu, and if doctors had not aggressively treated him and sought the cause, Roy would have likely died. My family and I are extremely grateful for all the doctors and staff who worked so hard to save Roy's life. Some of them are named here, but so many are responsible for the great care we received.

**Submitted by Valerie Parsons, RN charge, Gastro Intestinal Lab**

## Kathy Wright

In an effort to raise the spirits of an 11-year-old accident victim, Kathy Wright, case manager social worker, Case Management, went above and beyond. The patient saved his 4-year-old sister from a vicious dog attack.

Kathy contacted the local police and fire departments to come visit the patient. The Chico Fire Department offered to give the patient a ride home on the fire truck. Kathy discovered the 11-year-old's favorite sport is football. She also found out that the New York Giants have a kicker on their team who lives locally. The kicker was out of town when she attempted to make contact, however, she was able to reach someone with the team, and they are sending the patient some New York Giants team memorabilia. Her effort brought the Pediatrics department to tears.

**Submitted by Laurie Gardner, unit secretary, Pediatrics**



## Sara Tapia, Brittany Preston and Cody Stevener

Tonight, Chico Police Department brought a 22-year-old man to the Emergency department who was found in the community. This young man had Down syndrome, was minimally verbal and difficult to understand. He was able to state his first name and said he was 21 years old (actual age, we later found out, was 22). I contacted Far Northern Regional Center to see if they had him in their database, however, their computer system was down. Chico PD contacted Adult Protective Services, which said there was nothing they could do.

Sara Tapia, patient access team lead, Admitting, worked to review medical records, looking for a patient who had been seen at Enloe Medical Center with a similar name and age.

Brittany Preston, RN, Cardiovascular Unit, was in the ED and recognized the young man as a visitor to one of her recent patients, and she was able to recall the patient's first name.

Cody Stevener, security officer, also saw the young man and recognized him as a past visitor. Cody recalled the young man giving him a big hug because he

thought he was a police officer. Cody was able to determine what day that was, based on his schedule.

Cody and Brittany both reviewed records and were able to find the name of the patient he had visited. I was able to find contact info for a relative and contacted that person. Not 5 minutes later, he was there picking the young man up.

What a team who came together to get this sweet man home. If it was not for the time and energy these folks put into all the patients they see, this visitor would have otherwise been forgotten and I would still be looking for a family member.

Grateful,

Ali Robertson, social worker, Case Management

Submitted by Amanda Wilkinson, assistant manager, Case Management

### **Trista Harvey, Lynda Sezon, Susan Salinthon, Nichole Ventura, Allie Scott-Jeltsch and Ralph Torres**

In Early June, Enloe admitted a patient who had a stroke. He was visiting from Laos and consequently did not have insurance coverage, and, at the time, did not have family or friends to assist with a discharge plan. Once he was medically stable, he transitioned to North Wing to continue working on his recovery.



Trista Harvey, physical therapy assistant, Rehab Therapies, called me a week later after working with this patient for a couple of days. She reported that the patient was highly motivated to participate and was progressing well in his stroke rehab process with the ability to initiate walking. She asked me about

what the possibility would be to bring this patient to the Enloe Rehabilitation Center for inpatient rehabilitation since, other than the complicated discharge plan, he was an excellent rehab candidate and she thought he would greatly benefit from intensive therapy.

It took some time, however, by the end of June, the patient was admitted to the Enloe Rehabilitation Center. He was placed on a team with a therapist who speaks a similar language, and we soon noticed a marked change in his affect.

During his stay, Lynda Sezon, rehab therapy supervisor, Rehab Therapies, obtained clothing for the patient and helped provide activities he could participate in during his non-therapy times. Susan Salinthon, physical therapist, Rehab Therapies, worked on progressing his mobility since he would need to be able to tolerate a plane ride over 30 hours back to Laos, including transferring multiple times in and out of vehicles and wheelchairs at the airports. Nichole Ventura, occupational therapist, Rehab Therapies, diligently worked with the patient to improve his ability to perform toileting by himself since this was the only criteria his friend had to take him on the flight back to Laos.

Allie Scott-Jeltsch, speech therapist, Rehab Therapies, assisted the patient in returning to eating a normal diet texture and improving his cognitive and language skills, using the CyraCom to assist with translating. Ralph Torres, social worker, Post-Acute Care, spent a significant amount of time working with the patient's friend to create a plan to get him back to Laos. Ralph coordinated flights, pickup times, rides and the overall plan with the patient's friend who was going to accompany him back.

The patient discharged from the Enloe Rehabilitation Center in the middle of July with his friend, with plans to board a plane that evening and fly back home. Under the care of the therapy and nursing team, he progressed to walking with a cane, being able to perform bathing and toileting with supervision, and his language skills and voice quality improved. He entered our building quiet, reserved and with his head down, and he left smiling at people in the dining room and hallways.

This patient excelled physically and emotionally with the exceptional care he received and was able to reach a functioning level of mobility to return to his family and home. Due to the advocacy of the therapists and the generosity of the organization, this patient received the intensive therapy he needed during an acute window of time we have for stroke recovery to maximize his functional potential.

I am grateful for the team that I work with, their immense capacity for caring that I see every day, as well as the amazing organization we work for to provide support to individuals during their greatest time of need. We did what was best for this patient, and, thanks to everyone, he had a successful discharge back to his home country and will be able to see his family again.

Submitted by Maki Peterson, therapy supervisor, Rehab Therapies – Inpatient Rehab, Enloe Rehabilitation Center

## Lori Nieman, Mouang Saechao and Raleigh Unterseher

We went in to the office of obstetrician/gynecologist Raleigh Unterseher, M.D., for my 38-week appointment. From there, we were sent over to Enloe to be admitted for the birth of our baby boy. This was our fourth pregnancy. With two previous losses and multiple surgeries, I was a little nervous but always knew I had the best team possible. I just wasn't aware at the time that they would be saving my life later that day.

Lori Nieman, RN, Mother & Baby Care Center, was our first nurse. She was amazing! She got my IV started on the first try, and that says a lot! I had an epidural with my daughter's delivery and didn't think twice about having one with my son. After the epidural was placed, I started to feel short of breath. I tried to relax. I didn't have any complications with my previous epidural, and I could tell that something wasn't right.

My heart rate had spiked, my blood pressure started to trend down, I couldn't take a deep breath or cough, and was growing concerned. Lori called the anesthesiologist and had her back in the room in no time. After some medications to correct my heart rate, things began to normalize. I was so thankful for Lori. She listened and took action. I tried my hardest to have my baby boy while Lori was on shift, but it wasn't in the cards.

My next nurse was Mouang Saechao, RN, Mother & Baby Care Center. She was equally as amazing. Mouang didn't have much time to get her shift started before Jaxson was on his way. She was so reassuring and did her best to keep me calm. Dr. Unterseher was there throughout the delivery and was an amazing coach. I was so thankful to have these two by my side. Jaxson's delivery was pretty uneventful, aside from him being very tangled up in the cord.

Post-delivery is when things got exciting – I'm not sure if "exciting" is the right word. Dr. Unterseher performed an ultrasound immediately after delivery due to previous complications. He was able to see some retained placenta and removed it. We thought that was the end of it. Dr. Unterseher left the room and Mouang, along with a few others, began to clean up.

Minutes later I began to bleed a lot. Mouang was on it every step of the way. She got orders for medications to attempt to stop the bleeding and when that didn't work, she got more, and when that didn't work, Dr. Unterseher came back in and performed surgery at the bedside. It was intense.

Being a nurse, myself, you know when there are 15 nurses in one room that things aren't good. I'm not sure if it was 15, but it felt like it. I ended up losing half of my blood volume. I am so thankful that Mouang was on top of what was happening and kept Dr. Unterseher updated. I'm thankful that Dr. Unterseher was prepared for whatever happened and was ready at a moment's notice.

Together they saved my life. Lori, Mouang, and Dr. Unterseher never stopped listening to me and my concerns, and they were always one step ahead. They are amazing assets to Enloe!

Submitted by Michelle Knipe, patient and RN, Cardiovascular Unit

## Allie Scott-Jeltsch

Allie Scott-Jeltsch, speech therapist, Rehab Therapies, was driving home from her mother's house in the morning, when she noticed a young gentleman who looked familiar crossing the street. Although she couldn't immediately place him, her instincts told her that something didn't seem quite right. She turned her car around to follow the gentleman.

Seeing him again triggered the thought that he was a current patient's son with Down syndrome whom she had seen at Rehab earlier in the week. She pulled her car over and called the charge nurse that day, Holly Pool, RN, Rehabilitation Care Nursing.



Allie explained to Holly that she had just seen a young gentleman cross the street who she thought was the son of one of the current patients. Holly seemed a little skeptical at first, however, said that she would go speak to the patient. Come to find out the gentleman was indeed the son of the patient and he had been missing all morning. Holly called Allie back and relayed this information. Allie found the gentleman again and was about to assist him into her car to take him to the rehab site when his sister showed up to pick him up.



Thanks to Allie's intuition and attentiveness, this situation had a great outcome. It is employees like Allie who represent what it means to be an Enloe caregiver. She not only goes out of her way to help those in need during her workday, she also goes out of her way to help those in need in her everyday life. I am proud to work alongside Allie and that she is part of our amazing team!

**Submitted by Maki Peterson, supervisor, Rehab Therapies – Inpatient Rehab, Enloe Rehabilitation Center**

## **Susy Peppas, Erin Parisio, Maurice Valcarengi, Matt Sheller, Alan Adams and Aisha Kamala**

One Sunday morning, Susy Peppas, RN, Mother & Baby Care Center, was caring for one of her postpartum patients who was recovering from an emergency C-section. The patient's baby was premature, required a higher level of care and was transferred to a hospital in Sacramento right after birth. With over 100 miles separating mom and baby, we knew we needed to do everything we could to bring them together as soon as possible.



Susy was in the room when a nurse from Sacramento called to give her patient an update about her baby. The news was every parent's worst nightmare. Knowing that this sweet baby only had hours to live and that the mother hadn't even gotten to hold her baby yet, we had to get that mom to her baby.

Susy quickly alerted her charge nurse, Erin Parisio, RN, of the mom's devastating news. Erin called Maurice Valcarengi, M.D., the obstetrician/gynecologist overseeing her care, to see if he would discharge the patient. Unfortunately, the mother was not medically stable enough to be cleared for discharge. He said we could transfer the patient if we found an accepting physician.

Erin called the hospital in Sacramento where the patient's baby was and spoke with the charge nurse in mother-baby unit. That charge nurse was more than

understanding and gave Erin the number of the physician on call. Erin called the OB physician and since there was no medical reason for the mother to be transferred out of Enloe, the physician in Sacramento was not willing to accept the mother as a patient.

Knowing the gravity of the situation, Erin called FlightCare and shared the information with them. Even though we did not have an admitting physician on the Sacramento side, Jenny Humphries, RN, chief flight nurse, sent FlightCare RN Matt Sheller, to the unit to assess the patient and he had FlightCare paramedic Alan Adams on standby.

Aisha Kamala, case manager social worker, Case Management, stayed with the mom, keeping her updated and supporting her through this difficult time, ensuring her that we were doing everything possible to make this happen.

Just when things were starting to look like they were not going to happen, the phone rang. A maternal and fetal medicine specialist in Sacramento said he would accept the mom as his patient. Within minutes of receiving that call, Matt and his teammate were wheeling the mother up to the helicopter. As the patient left, we were all praying she would make it there on time.

That afternoon, Matt came back letting us know that she made it there and was able to hold her sweet baby. Had Erin taken "no" for an answer, had the FlightCare team waited to see the patient until the patient was actually accepted, or had that kind physician in Sacramento not accepted this mom as a patient, she would have probably never gotten the opportunity to meet and hold her newborn baby girl.

I am humbled and proud to work with such amazing, dedicated people.

**Submitted by Jamie Bracewell, RN, Mother & Baby Care**

## **Stephanie Sicke**

Today a 72-year-old male patient came into the Emergency department altered with a possible stroke. The patient was only able to give a one-word answer of "yeah." He was unable to communicate his name, but a piece of mail was found in his backpack. We had no record of the patient being at our facility in the past.

Stephanie Sicke, case manager social worker, Case Management, was consulted to see if she could help verify that we had the right patient. Using a health care medical record exchange, Stephanie was able to look in past records from another facility. She sifted through the records and found a note that mentioned that the patient's family member was notified that he had been discharged from that facility. Using that name, Stephanie continued to look through the records and found a demographic that listed a phone number.

Stephanie called the number, and the patient's family member actually answered the phone. Stephanie was told that the family had been looking for

the patient for over two years. They had even hired a private investigator and listed him as a missing person. The patient had a complicated history, but the family was relieved to know he had been located.

Stephanie went above and beyond to help find a contact for this patient. Not only does she do this for all her patients, she also does this for patients of her fellow staff members as well. Way to go, Stephanie! We love you!

**Submitted by Jade Vernau, RN, Emergency department**

## Taylor Graham and Nicole Mahoney

We had a patient on our unit who had a traumatic illness, was ventilator dependent, paralyzed and living in a special skilled nursing facility in another town. This patient had a lot of anxiety and fears and was refusing to be turned and touched by nursing staff. Her spouse spent much time at her bedside during the day watching staff walk in and out caring for his wife.

One day, I received a call from him. He had left his wife's bedside at the hospital and felt like he needed to call and talk to me. In paraphrasing his words, this is what he said:

He had left his wife's room earlier that afternoon to go down to the cafeteria and get some food for himself. He knew that his wife had been anxious, scared, and occasionally refused bedside care (bathing) and turns. When he returned, he was very surprised. He saw that Taylor Graham, CNA, Cardiovascular Unit, and fellow CNA, Nicole Mahoney, had started giving his wife a bed bath and turning her side to side, changing her sheets.

A big smile was brought to his face when he saw that his wife was actually smiling, happily interacting and joking with Taylor as Taylor engaged her in conversation. He had not seen this smile and happiness on his wife's face in long time. He felt that Taylor and Nicole had some special teamwork going, being able to make this happen. They had something.

He stated that this made him feel so good. When he left to go home for the evening, it was with a very positive feeling that his wife was in good hands, and really felt like she was cared for. He was impressed with Nicole and Taylor's positive interaction and influence with his wife. He wanted us to know how special they were to him and he wanted them to be recognized.

I feel that all of our CNAs are special and work together as a team, giving great, quality, patient-centered care. I feel that they all deserve to be recognized. The fact that Taylor and Nicole not only made this patient feel special, safe and smiling, but they made her husband be able to go home for the evening feeling his wife was in great care, makes me think this deserves special recognition of Taylor and Nicole's performance.

**Submitted by Ines Corriea, RN charge, Cardiovascular Unit**

## Lynda Sezon

Birthdays are special to most people, and as such are not the happiest when spent in the hospital. At the Enloe Rehabilitation Center, Recreation Therapy staff decorate the door of a patient's room for their birthday, so that all staff and patients can wish them well. One of our patients was unexpectedly transferred back to the acute hospital at the Esplanade Campus the day of their birthday.

Lynda Sezon, rehab therapy supervisor, Rehab Therapies, learned of the patient's transfer just as she was about to decorate her door. A card arrived at Rehab from the patient's daughter, so Lynda arranged some flowers, grabbed her decorations, and delivered the card and birthday cheer to the patient in her room at the hospital. We appreciate Lynda for going above and beyond to improve this patient's experience.

**Submitted by Brenda Logan, manager, Inpatient Rehab Services, Enloe Rehab Therapies Acute**

## Nicole Whitlatch

I have been a patient of Nicole Whitlatch, M.D., for over three years. Thank you for this opportunity to share our (my family and my) highest regards for this incredible woman, who practices hematology/oncology at Enloe Comprehensive Breast Care. She has literally saved my life more than once with treatment options she recommended. Her grasp of current oncology research and practice, and ability to network with other professionals is impressive. Her kind, patient, professional manner and her listening ability are amazing. Her assessments and answers to questions are clear and understandable. Her follow through is excellent.

Two years into my journey with cancer, following a mastectomy of both breasts and chemotherapy, five months went by without evidence of any recurrence. We thought the cancer was gone. I was receiving infusions every three weeks,



but no chemotherapy. Then, out of the blue, blood tests revealed that my tumor marker numbers were high (off the chart), and a scan confirmed that a very aggressive cancer had metastasized to my liver.

At 8 a.m., I was admitted to Enloe's fourth floor, where nurses watched me closely for hours while I was receiving chemo. Meanwhile, Dr. Whitlatch was consulting and weighing options with fellow researchers and colleagues, near and far, to decide the optimum dosage of chemo to give me, so that I would have the best chance of survival.

Over the last year, my tumor markers receded to a normal range, and the masses in my liver continued to shrink. I currently receive infusion therapy (now without chemo) and routine tests. At my last appointment with Dr. Whitlatch, my tumor markers were within normal range, and there were no visible masses in my liver!

Even though I started out not knowing anything about cancer treatments, I felt empowered by Dr. Whitlatch. I can't recommend her highly enough. Enloe is very fortunate to have her on their team of physicians, as am I.

Submitted by Joy Todd, manager, Patient Service Excellence, on behalf of a patient

## Enloe's Nettleton Mother & Baby Care Center



We received a telephone call from a family member of a pregnant patient who told us the patient was on her way to the hospital from their home in Willows, and that she was scheduled for a cesarean section in the morning. They told us her water had broken and the umbilical cord was hanging out. Recognizing

that this is a medical emergency, the entire floor of nurses and doctors flew into action. The patient arrived 10 minutes after the initial call from family.

Every person working that night had a specific job to do to perform a crash cesarean section on this patient in a timely manner. The anesthesiologist was ready as well as the obstetrician and pediatrician. All nurses had specific jobs. The labor nurses ran to the Emergency Department with a wheelchair to meet the patient. Someone held the elevator open for them. The patient was rushed to the OB operating room where she had a Foley catheter and IV placed quickly. Then she was prepped and put to sleep.

The entire process from the time the labor nurses first intercepted this patient in the Emergency department until the baby was born was 7 minutes total. We all thought we were rushing to deliver a dead baby. When that baby was born, the obstetrician stimulated it and it cried. The overwhelming expulsion of joy at hearing that baby cry from all the staff could have probably been heard throughout the hospital. It truly was an amazing feat to deliver that baby so fast and in such good condition. There is no way to single out one person as it was an incredible team effort by all. Such a happy outcome. The drills we practice at skills lab really paid off that night.

Submitted by Mari Dailey, RN, NICU, Couplet Care, Mother & Baby Care Center

## Joevic Gascon

Joevic Gascon, respiratory care practitioner, Respiratory Therapy, has gone above and beyond since my grandpa has been in the hospital. You can tell he truly cares. Not only does he get along with absolutely everyone, his presence is enjoyable, he is wonderful at his job and he really pushes my grandpa to do his best during physical therapy. He fully embraces patient-centered care, and it really shows. He is an outstanding person and very knowledgeable. My family is very grateful for how much he has helped, and will continue to help, my grandpa during his stay here at Enloe. If anyone deserves recognition for patient-centered care, it is definitely Joevic.

Submitted by Lexie Mason, clinic registration representative II, Cardiology Services

## Dmitry Leongardt

Dmitry Leongardt, M.D., hospitalist medicine, has developed an amazing rapport with the nursing staff as well as our patients at Enloe. Dr. Leongardt has kept a very approachable demeanor throughout his tenure here. He consistently collaborates with all members of the patient care team. I have so many stories of his exemplary leadership that I cannot begin to pick just one instance. When called upon, Dr. Leongardt will come to the floor to see a patient in distress, as well as a patient that the nurse is "just worried about."

There are more nights than not that Dr. Leongardt is swamped with Emergency department admissions, rapid responses and code blues. However, he still maintains his composure and professionalism whilst exemplifying true patient-centered care.

It is a pleasure every shift that I am able to collaborate with Dr. Leongardt.

Submitted by **Melissa Coulter, RN, ICU/CCU**

## Joe Ryan

On October 21st, Enloe FlightCare pilot Joe Ryan was flying his crew back from Sacramento after transferring a patient to a hospital there. It was 2 a.m. and a dead leg (flight home without a patient). This was like any other dead leg at 2 a.m., with the crew and pilot talking amongst each other to pass the time and keep everyone alert. Without warning, traveling 150 mph, the aircraft struck a flock of geese with one of them exploding through the windshield right into Joe's face.



The impact shattered Joe's night vision goggles, leaving them partially dangling from his head, showering him with broken plexiglass and cutting his face. The bird continued back into the aircraft cabin with enough force to strike flight paramedic Troy Keenan in the face and shoulder, breaking his visor. Another goose impacted the helicopter's right rear stabilizer.

After sustaining a direct hit with such force, Joe battled 150 mph winds unprotected, pain, disorientation and darkness, all while maintaining control of the aircraft. Joe was able to slow the helicopter down and kick it out of trim

(basically flying semi-sideways) to prevent any other birds from striking him unprotected. He did this all in the matter of seconds, despite pure chaos. With the remains of Joe's night vision goggles dangling from his head impeding his vision, and wind roaring through the cabin, Troy came out of his restraints to remove Joe's goggles, while Matt Sheller, RN, FlightCare, made emergency radio communication. Joe immediately selected Oroville Municipal Airport as the closest safe landing zone and piloted the craft without a windscreen for an additional 10 minutes, landing 922RJ and its crew safely at the airport.

Pilot Joe Ryan demonstrated tremendous skill, composure and presence of mind in the face of a terrifying event. Joe's exemplary performance that night is the definition of what makes a Story of Excellence. Joe is FlightCare's newest pilot but is by no means a new pilot. He has flown for over 15 years, including search and rescue, tours, and utility. Joe is a tremendous asset to FlightCare, Enloe, our community and has earned my trust forever.

Submitted by **Matthew Sheller, RN, CCRN, CFRN, Enloe FlightCare**

## Russell Beeny

For many weeks I have been having physical therapy twice a week at Enloe Outpatient Therapy on East Avenue because of a shoulder surgery that is not recovering well nor as fast as I would like it to recover. One Monday in late October, my husband dropped me off for a usual therapy session, and he waited in the parking lot. He wanted to take care of some paper work and listen to the radio at the same time. Unfortunately, he had the car in accessory mode and kept the radio on the whole time I was in therapy. By the time I was done with my physical therapy at 6 p.m. he tried to start the car, and it would not start.

While I was calling a friend hoping he could come and help us get the car started, Russell Beeny, physical therapist assistant, Rehab Therapies Outpatient, walked by our car at the same time I was saying, "Abel, I need help." Russell heard this and looked me in the eye and asked, "Do you need help?" I said, "I am calling a friend." He kept walking to his car, parked next to ours and asked again if we needed a jumper cable because he has one. I gratefully said, "Yes." He hooked up the jumper cables, and in no time, we were able to leave for home.

Thank you, Russell, for being there at the right time, but most importantly, for asking if I needed help. He cared enough to ask the second time if we needed help and offer his jumper cables and jump start our car. Sometimes angels come in different forms and shapes. This day ours was a physical therapist assistant who carries a set of car jumper cables.

Submitted by **Alma Calzado-Knudson, assistant manager, Laboratory**

## Cerissa Bear

Cerissa Bear, RN, Women's Services – North, has been passionate about improving the lives of mothers and babies in her work to educate staff, providers, and mothers about the benefits of breastfeeding. Cerissa is our Baby-Friendly champion for our three Women's Services clinics. Not only is she a role model, personally, she has contributed to improving the way we document education in Epic, developed posters for our exam and waiting rooms, developed tip cards for staff and patients, presented in grand rounds, and developed a live 2-hour staff class and OAK module. She performs audits, supports and encourages staff to deliver consistent, evidence-based information, and is a general all-around joy to work with!

Cerissa exemplifies all of Enloe's core values and goes above and beyond on a regular basis. The story of her career here at Enloe is one of excellent care.

Submitted by Tracy Weeber, RN, manager, Women's Services

## Neena Kaur, Cindy De La Cruz and Cathie Gunther

My beloved mother-in-law was a patient at the Enloe Regional Cancer Center for five years. She would always say the staff there was amazing. She considered them friends and family. She was stubborn and courageous. She fought with a smile on her face. She knew what she wanted, and when her disease began to rapidly progress, I promised her I would take care of her at home.

When the time came to get help, I knew I could count on the staff at the Cancer Center. The transition to comfort care/hospice was not a smooth transition. There were issues with her VA insurance. During the four days from when I first called saying we needed help, to the day hospice came, RNs Neena Kaur, Cathie Gunther and Cindy De La Cruz, from Hematology/Oncology were my angels. They took many (way too many) phone calls from me and spent hours working



behind the scenes to get me equipment and medications that I needed to be able to care for her. They prayed with and for me, listened to me, encouraged me, and fought for what was right.

If it was not for their endless commitment to their patients, I would not have been able to fulfill my mother-in-law's last wish. These three along with the support of the Cancer Center put logistics aside and did what was right for their patient and our family. I cannot express my sincere gratitude for all of their love and support.

Submitted by Krista Rooks, RN, clinical educator, Enloe Education Center

## Kyle Carrington, Justin Hemje, Analy Nava, Alecia Williams, Kristapor Thomassian, Peter Wolk, Ariel Hidalgo, Ashley Isaacs, Stephanie Blakely, Loretta Steinke, Megan Kressin, Carmen Rasmussen, Dave Loomba and James Yhip

It was the day before my scheduled cesarean section. While in line at Target, I answered a phone call from my dad, his voice sounding very different. My world instantly shifted and became very small as he told me, "Early this morning your mom had a heart attack. We are at Enloe. She's in surgery right now. I had to do CPR, Gina. It's not good. She started responding, but it isn't looking good."

Kyle Carrington, EMS communications specialist II, Dispatch, talked Dad through the CPR, counting with him until the ambulance showed up. Justin Hemje, paramedic, and Analy Nava, EMT, Enloe Ambulance, brought the ambulance, immediately taking over with the greatest speed and deliberation you can imagine.

I immediately drove to Enloe with thousands of thoughts running through my head. How can I lose my mother while giving birth to my daughter? How will I be able to help Dad? What will he do without Mom? Will I be able to smile and feel joy, meeting my daughter for the first time? What will I tell my kids? I finally arrived at Enloe. My mother coded while I was there, but she made it through. My dad and I went up to ICU with her. She was unrecognizable.

I had an appointment at Enloe's Nettleton Mother & Baby Care Center. Alecia Williams, RN, Labor and Delivery, sat with me, let me cry and waited with me. My dad came in crying, saying, "I think this is it, Gina."

One of Dad's friends, KT (Kristapor Thomassian, clinical services pharmacist, Enloe Pharmacy), came in on his day off and stayed with us. KT listened to Dad and explained timelines, processes, medications, etc. My dad shared concerns with him about possibly having to "pull the plug," and KT advised Dad to wait at least 72 hours before making any decisions. Thank goodness.

Peter Wolk, M.D., cardiovascular disease, took great care of Mom as he replaced an external pacemaker with a temporary internal pacemaker. Ariel Hidalgo, M.D., critical care medicine, was very compassionate, caring, and thorough, and we knew Mom was in good hands. He delivered a prognosis that didn't sound favorable to my dad and me.



After going home, I spent a very emotional, tear-filled, sleepless night imagining every scenario possible. What if Mom passed before the delivery or right after, and how would I deal with it? How would I share my daughter's birthday with the anniversary of my mother's passing? Would I be planning a memorial? Would I be able to shower my baby in love through my grief? How do I help my husband navigate this insanity when he is about to be a father for the first time, cut an umbilical cord, hear her first cry? The cycle of thoughts wouldn't stop.

Feeling totally exhausted, in the morning my husband and I walked into the Labor and Delivery unit to give birth to our daughter. Labor and Delivery RNs Ashley Isaacs and Stephanie Blakely were doing my pre-op checks and let me cry and share my contradictory thoughts and fears. They assured me that they were there for me and would take care of me. Spiritual Support Volunteer Loretta Steinke spoke a blessing over us before I was taken into surgery. Megan Kressin, RN, Labor and Delivery, a good friend, was in the operating room with me. Carmen Rasmussen, RN, Labor and Delivery, somehow had the perfect balance of compassion, humor, and wit. Dave Loomba, M.D., the best anesthesiologist in the world, talked me through every detail of the procedure and stayed with me while my husband stepped out to be with our newborn daughter. She was four weeks preterm and struggling to breathe, possibly needing oxygen. After being examined, my daughter was put skin to skin with me, we cuddled and she began breathing normally, not needing the oxygen after all.

My dad came to visit us at 9 a.m. and let me know Mom had responded to the

pacemaker, was off life-support, and breathing on her own. I asked him what time that happened, and he told me 8 a.m. My baby was delivered at 7:50 a.m. That meant my mother was reborn 10 minutes after my daughter came into this world. Mom had a permanent pacemaker placed the next day by James Yhip, M.D., cardiovascular disease.

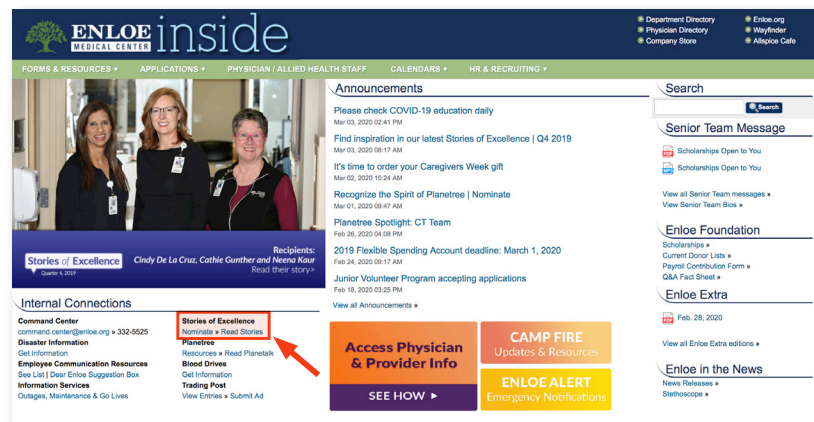
There were so many people who contributed to our entire family's care – mind, body and spirit. I love this hospital. I love that everyone is part of the care team across departments, going out of their way or "just doing their job," but their job is simply being extraordinary in the medical care that they provide, and the compassion and love that they extend. My brother-in-law refers to Enloe as the "happy hospital," and my father-in-law says he will drive up from San Jose if he needs any medical care.

Thank you, Enloe staff and volunteers, for all you did and continue to do. It has been 10 months since this crazy time. My mom is doing great and made it a point to meet and thank everyone involved in her care. Dad is grateful for the care and compassion he and everyone received. My baby girl is an endless gift of joy and love. I am proud to be an employee here.

Submitted by Gina Cuneo, Gift Shop and volunteer coordinator, Volunteer Services

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