

# REHAB ROUNDUP

Issue 20



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2007

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## Managed Unit Partnerships Strengthen Rehabilitation

By Amy Morse, CEO

Rehab Week celebrations revolve around our patients and our staff. The patient awards ceremony is my favorite event of the year. I listen proudly as our staff presents the patients' stories to a rapt audience. I'm equally inspired by the heroic journey the patients have traveled. In fact, I'm very proud of the care we deliver to our community and the role we play in the health care continuum in Maine.

Rehab Week is also a time to build awareness of our expertise. As a hospital (and the largest provider of acute rehabilitation in Maine), we are a resource for the entire state. As rehabilitation professionals and part of the HealthSouth family (the largest provider of acute rehabilitation hospitals in the country), the depth and breadth of clinical knowledge available to our partners in health care is extensive.

We take that role seriously and have been fortunate to have built relationships with some of the best acute hospitals in the region. Maine Medical Center (MMC), Southern Maine Medical

Center (SMMC) and MaineGeneral Medical Center have all found value in contracting with us to create "managed units" to share our expertise and the advantages of our HeathSouth network. The therapy departments at MMC and SMMC and the Rehabilitation Institute at Seton (part of MaineGeneral) have management ties to our hospital. The leaders of these managed units are supported by and report through New England Rehabilitation Hospital of Portland and HealthSouth.

I am very proud of Jean Childs (SMMC), Janice Siegel (MMC) and Kim DeMerchant (MaineGeneral) and their accomplishments in upholding the cause of rehabilitation in Maine. Their work is measured not only by the acute hospitals in which they work but also by the outstanding patient care that their therapists and nurses give to improve their patients' lives. As we celebrate the work of our own staff and patients here at New England Rehabilitation Hospital, we also thank our colleagues in our managed units for their partnership in rehabilitation.

## NERHP's Medical Staff Highlight

The *Rehab Roundup* is pleased to be featuring our medical staff over the next several months. We start by interviewing **Elissa Charbonneau, DO, Medical Director of New England Rehabilitation Hospital of Portland.**

**Why did you choose a career in medicine?** As a child, Dr. Charbonneau had a dream of becoming a veterinarian. "Of course, I grew up in New York City and had a dog," she chuckled. But a dream is meant to be followed and Dr. Charbonneau chose to attend Cornell University as it has one of the best veterinarian programs in the country. During her freshman year she learned 3 important things: she was allergic to cats, she was not "into" large animals and she became a vegetarian! As often happens after the first year of college, well meant plans changed for Dr. Charbonneau and she ended up getting her masters degree in Epidemiology. It was while doing cancer research at Roswell Park Cancer Institute, that she determined she would pursue a career as a physician. She was quite interested in the holistic approach to medicine that osteopathy embraces and at-



tended New York College of Osteopathic Medicine, where Dr. Charbonneau received her D.O. degree.

(Continued on Page 2 →)



## Ethics in the City

By Nancy Schuster, PT, MS, Education Coordinator

## The Four Principles that Guide Us Through an Ethical Dilemma

**Justice** joins **Autonomy**, **Beneficence**, and **Non-Maleficance** as the fourth basic ethical principle we use in ethical decision-making. Justice means that we need to be fair or equal in how we approach a dilemma. Justice may sound easy to apply to a decision, but in actuality, it can be nebulous. In working with medical ethics within an organization, not everyone is equal as resources may be limited and patient illnesses and needs vary so greatly. **Distributive Justice** is often a term used to justify the use of healthcare resources as we make provisions for all of our patients.

How do we use these ethical principles in decision-making? Look for the answer in the next issue!

### Interview with Dr. Charbonneau *(continued from Page 1)*

**What led you to choose a focus in rehabilitative medicine?** During her medical rotation, Dr. Charbonneau followed stroke patients when they were discharged to the rehab floor at Coney Island Hospital. She took electives in rehabilitation at the International Center for the Disabled and Rusk Institute, both in NYC. Her dad also had a brain tumor and had rehab in the home. She often witnessed how important the rehabilitation process is to maximize functionality and believed a more successful recovery could be attributed to rehabilitative therapy.

**Why did you choose to practice here at NERHP?** Dr. Charbonneau completed her residency in Physical Medicine and Rehabilitation (PM&R) at Temple University with Dr. Michael Totta who was her Chief Resident. Ultimately, Dr. Totta came to Maine where he began his practice at New England Rehabilitation Hospital. Dr. Hull, the first Medical Director at NERHP, recruited Dr. Charbonneau in 1992 directly following her residency.

**Would you share a couple of patient scenarios with us where the care you provided resulted in the most satisfactory accomplishments of your career?** While there are many patient scenarios to draw from, Dr. Charbonneau sited two patients who made extraordinary gains. One individual was a young stroke patient who had an abnormality that didn't make sense. A tumor was discovered and after removal, the patient regained a good deal of functionality of her left arm and the ability to walk. She has returned to leading a productive life. Another patient, an adolescent who had a brain injury while in high school, worked very hard with her nurses and therapists under Dr. Charbonneau. She not only finished high school, but college and is currently a pre-med student. An interesting note is that both of these patients are patient award winners, selected during National Rehab Week for "*overcoming barriers and exceeding expectations.*"

**What do you feel is the most important contribution you have made to your practice, community and hospital?** With respect to the community, Dr. Charbonneau is very involved with the extracurricular activities of her two teenage children, Abby and Stephen, and participates in their various parent organizations.

Dr. Charbonneau's contributions to NERHP and her practice are many. She is Medical Director for NERHP's neuro-day, orthopedic and brain injury programs, and Chairperson of the Medical Executive and Utilization Review Committees. She is a member of the Governor's Committee for Neuroscience at MMC and is on the neuro trauma team at MMC. She is president of the Maine Society of PM&R and selected as a member of the President's Council of the American Academy of PM&R. Dr. Charbonneau is also a member of the American Osteopathic Association, Maine Osteopathic Association, American Academy of Neurologic and Electrodiagnostic Medicine and the Maine Brain Injury Association.

**If I were to ask your children to describe you, what would they say?** "*That I am a pain in the bleep.*" (Lots of laughter on this question!) Dr. Charbonneau thinks Abby and Stephen would say she is very strict and she worries a lot. "*And I'm sure they would say I'm the greatest mom!*"

**What do you do for relaxation?** Dr. Charbonneau is an exercise enthusiast and enjoys tennis, skiing, working out and walking the family dog. She also loves to read and cook.

**What is your favorite author and book?** Speaking of reading, Dr. Charbonneau belongs to a book club and reads quite a bit. Her favorite author is F. Scott Fitzgerald and his famous novel "The Great Gatsby."

"tomorrow we will run faster, stretch out our arms farther.... And one fine morning-- So we beat on, boats against the current, borne back ceaselessly into the past."  
- F. Scott Fitzgerald, *The Great Gatsby*, Ch. 9

**Name your top three favorite movies?** Moonstruck, My Cousin Vinnie and Sophie's Choice, "*I'm eclectic.*"

**What is your favorite meal?** A vegetarian since veterinary days, and person who loves to cook, Dr. Charbonneau enjoys a good stir fry and brown rice. We're not sure how well that would go with a mint julep at Jay Gatsby's table.



## Nutrition News

By Jennifer Wilson, MS, RD, LD  
Senior Clinician Dietitian  
Maine Medical Center Brighton Campus

The *Rehab Roundup* is very excited to welcome another new contributor, Jen Wilson, Senior Clinician Dietitian, MMC/Brighton Campus. Many of us have already been fortunate enough to have worked with Jen either through patient care, committee involvement or health communication. Jen is extremely knowledgeable in her field and a wonderful resource for staff, patients and their families.

Many of you know that Brighton Nutrition Services is putting forth an effort to contribute positively to **environmental sustainability**, but what you may not know is:

- All of our fresh milk products are rBGH-free (recombinant bovine growth hormone).
- We use 100% organic Wolf's Neck Farm ground beef.
- We recycle 100% of our vegetable oil to be used for Bio-diesel.
- We use 100% recycled, mostly post-consumer waste, napkins.
- We recycle 100% of all corrugated cardboard, and most glass beverage bottles and cans.
- We strive to buy seasonal, Maine-grown produce whenever possible.

From a dietitian's perspective, fresh, local produce is an important part of a healthy diet. I always recommend fruits and vegetables in an form, but it's a plus when you can support your local growers and reduce the amount of toxins in your diet by buying organic.

It has long been argued that organic, and perhaps local, produce is too expensive for the average consumer, but let's look at the facts:

- One can of processed green beans: **about \$1.29**
- One lb of fresh green beans (in season): **about \$1.29\***
- Supporting local grows & improving your health: **Priceless**

\*Priced from Shaw's Westgate weekly circular

## In-Pharmation ~ Are Fish Oil Supplements Right for YOU?

By Doreen Tompkins, RPH

Current literature suggests there may be benefits to including more fish oils in our diet. Fish oil supplements contain omega-3 fatty acids. Omega-3 fatty acids are polyunsaturated fatty acids. They are also called essential fatty acids because the body requires them but cannot synthesize them on its own. We must rely on diet or supplements to receive the benefit of omega-3 fatty acids. Omega-3 fatty acids include eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA), found in fatty fish like salmon or halibut, and alpha-linoleic acid, found in soy, canola oil, flaxseed and walnuts. The body can only convert small amounts of alpha-linoleic acid to EPA and DHA, so **the majority of omega-3 intake should be from fish or fish oil supplements.**



EPA and DHA supplements are sometimes called fish oils. Patients are asking whether fish oil supplements are safe. Some fish contain mercury, PCBs, or dioxin. Most fish oil supplements are mercury-free since mercury accumulates in the meat more than the oils. A large amount of other toxins are removed during manufacturing. For people needing higher doses of omega-3, fish oils may be a safer alternative than fish. Also look for fish oil products that are "USP" Verified" as they are guaranteed to be low in contaminants.

**There is good evidence that omega-3 fatty acids help prevent heart disease.** In people who already have heart disease, they can help prevent death, heart attack and stroke. They also may help to reduce triglycerides. Some other health conditions that are being studied for a possible benefit from omega-3 fatty acids are rheumatoid arthritis, high blood pressure, depression, bipolar disorder, menstrual pain and certain kidney problems.

Ideally, we could consume enough omega-3 fatty acids through diet. For healthy eating habits, 2-3 servings of fatty fish per week would be good. For those with heart conditions or high triglycerides, larger amounts are recommended. In order to meet the recommended therapeutic intake of up to 4 grams per day, many rely on supplements. Unfortunately, as doses reach 4 grams per day there is a small increased risk of bleeding or bruising. People with a seafood allergy should be careful with fish oil supplements. While the allergen is usually found in the meat, not the oil, some people may still be allergic. High doses of alpha-linoleic acid may increase the risk of prostate cancer. It is always a good idea to consult with your physician before starting any new medications or supplements to ensure there are no unintended side-effects.



# National Rehabilitation Week 2007 Celebrated by New England Rehabilitation Hospital of Portland



## First-Ever Rehab Olympics!

Competitions representing the skills of physical therapy, occupational therapy, speech language pathology and nursing.



Go Sue!



103 seconds for Rhoda to dress. Too long!!



Staff from all departments competed in wheelchair assembly, hemiparetic dressing, taste testing and pill sorting.

See back page for winning department!



Amy is lovin' that pureed chicken!



Prism glasses don't hinder the rivalry between Dale and Kristie as they sort "pills".



September 19, 2007

Dear Friends,

Welcome to all attending the National Rehabilitation Week Awards Ceremony. My thoughts and support are with you as New England Rehabilitation Hospital and the community recognizes the importance of the work undertaken at the hospital. New England Rehabilitation Hospital plays an important role in Maine, enabling people with disabilities to reach their full potential.

Today it's appropriate that not only are caregivers recognized for their dedication but that patients, too, are celebrated for their courage and their work to overcome significant barriers to lead full productive lives.

This year, four local citizens are being honored for their personal triumphs and for their positive influence on their caregivers and other patients. I congratulate Carol Rohl, Edward Hatfield, Stephanie Ruel and Charles "Chuck" Mills for being selected as the patient award winners. You have all completed your therapy and served as role models for those around you. Throughout difficult times, you have persevered. You should be proud of your accomplishments and the impact your achievements have had on the lives of those around you.

Again, thank you to all who are here today to support rehabilitation—those who provide the high quality services offered at New England Rehabilitation Hospital, and those who rely on your valuable work. I wish you good health and future success.

Sincerely,  
John E. Baldacci  
Governor

State of Maine  
Office of the Governor  
1 State House Station  
Augusta, Maine 04333-0001

## *Patient Awards Ceremony*

Selected by staff, these patients are honored for having overcome barriers and exceeded expectations.



Patient Award Winners (L-R):  
Chuck Mills, Carol Rohl,  
Stephanie Ruel and Ned Hatfield.



NERHP staff members, Jana, Brianna, Susie, Jen M., Jen B., Dr. Charbonneau and Dave pay tribute to the courage shown by Ned, Stephanie, Chuck and Carol through stories that made us laugh and cry. We ended with a surprise serenade written and sung by Carol and her husband's friend, David.



*TechnoDemo*

Opened to invited guests as well as all NERHP staff, the TechnoDemo featured points of interest and demonstrations by presenters Tom McOsker, SLP, Alissa Towle, PT, Brianna Page, SLP, and Hilary Hayner, OT on the Interactive Metronome, Autoambulator, Vital-Stim Voice Therapy and the Saeboflex.



*Artist Tea*

We have all enjoyed the beautiful art work that has been displayed throughout the halls of NERHP. Paintings, photographs, jewelry, quilts, rugs and cross stitch, done by staff, patients and friends, have made our walls and sitting areas a pleasure to see. The Artist Tea closes National Rehab Week to show appreciation to all the contributors who shared their wonderful art work with us. Pam Marshall from Medical Records, our flutist, added to the elegance of the celebration.



Thanks to Kathy Kroll, CTRS, for her hard work in orchestrating the NERHP art show held throughout the summer.



Art show winners John Knox and Don Hunter.



## OPEN ENROLLMENT FOR 2008 TO START IN NOVEMBER!!

We will provide more information as we receive it.

Watch this column in future issues for Human Resources updates on open enrollment, policies and procedures and much more!

### RESNA Certified Physical Therapist Provides Wheelchair Quality Assurance

In the U.S. an estimated 2.2 million people currently use wheelchairs for their daily mobility. In order to make wheelchairs safer and more effective, research has identified the importance of practitioner credentials, accreditation, device evaluation, device user training, patient education, clinical prescribing criteria and access to new technology. New England Rehabilitation Hospital of Portland has one of Maine's few certified Assistive Technology Practitioners (ATP) to ensure wheelchair dependent patients are evaluated by a specialist to maximize their ability to function within their environment.

New England Rehab's Karen McLaughlin, PT, ATP, has been a physical therapist with NERHP for 15 years. She received her certification as an Assistive Technology Practitioner in 2002 through the Rehabilitation Engineering & Assistive Technology Society of North America (RESNA). RESNA certification aims to enhance services in the field of assistive technology allowing people with disabilities to maximize their ability to function within their environment.

*"Karen's skill and expertise make her a valuable asset to both coworkers and patients, states Alissa Towle, PT, Clinical Leader. She is able to identify problems and effective solutions in regards to assistive technology. Additionally she provides mentoring and education to her peers."*

Karen can be found conducting wheelchair evaluations for her patients both on the inpatient units and at the outpatient wheel-



**A thorough seating and mobility assessment always includes a mat evaluation, as demonstrated by Karen McLaughlin, PT, ATP (r), and Jen Villacci, OT (l) with patient Margaret Dupont.**

chair clinic. The clinic, managed by physiatrist Mary Macy, MD, evaluates individuals for seating needs (special cushions, posture devices, etc.) and for mobility needs (special wheelchairs, scooters, and other mobility aids).

Dr. Macy does a physical evaluation of the patient and Karen or one of her colleagues completes his or her own assessment with the patient. Evaluations include factors such as home accessibility, mobility, physical impairment, and issues with the current wheelchair. Dr. Macy, the patient, family members, rehabilitation technology supplier and therapists all work as a team, assessing the findings of the evaluation and making recommendations as to the appropriate care method to take. Karen's "assistive technology" training and certification allow her to fully evaluate individuals with disabilities, assist in the selection of appropriate assistive technology and provide training in the use of the device.

Last year approximately 100 patients, including both adults and children, were seen for an evaluation in the New England Rehab Hospital's outpatient wheelchair clinic. Karen also does two to five wheelchair evaluations per month for our inpatient population. Having a hands-on expert at New England Rehab Hospital ensures that the patient's wheelchair is properly suited to the individual needs of the patient and that he or she will ultimately remain safely independent at home.



**Karen measures Margaret's thigh length to assess for the appropriate seat depth.**

# Center of Excellence

## Congratulations to All!

New England Rehabilitation Hospital of Portland has just attained two outstanding achievements:

- ☆ Joint Commission Stroke Certification
- ☆ HealthSouth Stroke Center of Excellence



## Keeping PHI Private

By Mary Ellen White, RHIT, Director of Clinical Information

Sometimes during our busy work schedule we fail to remember the simple tasks that protect PHI (protected health information). It is the responsibility of **ALL** healthcare providers to follow the requirements of the HIPAA privacy rule as well as the State of Maine and Joint Commission regulations. One of these requirements is that we should never leave PHI unattended in public areas or in a vacated unlocked room. Please remember that when a team meeting is completed the last individual with the records must return them to the nursing station. All members of the team are responsible for protecting the confidentiality of PHI.

## Education Earmark

By Nancy Schuster, PT, MS, Education Coordinator

I am pleased to announce that effective August 1, 2007 we went to on-line training in *Health Stream* through the HealthSouth Intranet Learning Center for our annual education requirements throughout NERHP. This represents a major turning point and I want to thank all the staff for their cooperation in learning the computer system and in sharing access to our limited number of computers. On-line training also means easier tracking of the mandatory requirements for managers and less pieces of paper to be lost or recreated.

In September, we will start our Rehab Tech I class with 10 participants. This is an opportunity for the CNA to learn more about and participate in the rehabilitation process.

To further promote excellence in quality patient care and provide a career ladder for the CNA, we will start our first Rehab Tech II Class in October with an anticipated 10 participants. This class will build on the skills learned in RT I and allow them to be more involved in the areas of teaching, service and mentoring.

## Infection Control Focus ~ Flu Season Nearly Upon Us ... Again

By Dennis Nasto, RN, Infection Control Coordinator

I recently received notification from our hospital's Pharmacy Director that NERHP has received all of the influenza vaccine (flu shots) that had been ordered for the 2007-08 influenza season.

Flu season generally runs from October to May. The Centers for Disease Control and Prevention (CDC) and the Joint Commission are pressing all healthcare facilities to increase the percentage of their workers who are vaccinated. The national percentage of healthcare workers vaccinated annually remains below 50%. Last year, approximately 55% of NERHP employees received a flu shot. Although we best the national average, there is much room to improve.

Many healthcare workers believe that whether or not to obtain a flu shot is a decision regarding their personal health. However, there is ample evidence that influenza outbreaks in hospitals and long-term care facilities have been associated with low

rates of employee vaccination. Conversely, higher vaccination levels of staff have been associated with lower incidence of healthcare associated spread of influenza. Patient safety considerations as opposed to a personal health decision should weigh most heavily in the decision-making process regarding immunization. An infected healthcare worker can spread the flu virus for 1 to 2 days before symptoms appear. The facts remain that annually an estimated 220,000 people are hospitalized and 36,000 people die from the seasonal flu or associated complications.

As in the past, the vaccine will be made available around the beginning of October at no charge to all NERHP employees as well as our physicians. **Flu shot clinic times will be posted and employees on all three shifts will be accommodated.** Please seriously consider getting a flu shot for your safety and the safety of your patients and families.



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Portland Patrolman Tyler Mathewson “cuffs” Roland McFarland, Medical Records, in the spirit of goodwill. The M.D.A. hosted a fund raising event by “arresting” many business representatives from the community and held them in jail (at a local restaurant) until they were bailed out. Roland raised over \$1,000 for the M.D.A. Great job, Roland!

**Tie-Dye is Back!**

OK, so maybe that’s not a great thing, but it sure was fun for those who participated in the NERHP Retention Committee’s July event. T-shirts, pillow cases, towels, baby clothes and even socks were brought in by staff to tie-dye. This was a new event and well attended. As the picture shows, some very clever designs materialized.



## August Employee of the Month Joliene Collier, RN



**Nomination comment: “A great person to work with. Very committed to her job and patient satisfaction. Great job knowledge!”**

## Physical Therapy Department Takes Olympics by Storm!!

Competition was stiff, but the inpatient Physical Therapy department had the lowest overall score time of 192 seconds in all 4 events of NERHP’s *first-ever* Rehab Olympics. Speech Therapy placed second with 198 seconds and Nursing was in third place with 214 seconds. Nine teams competed, representing all departments within the hospital. As the winning team, the PTs were treated to a pizza party .



**Scott Peterson (r) congratulates Jim Byrne, PT Clinical Leader (l), for heading up the winning team.**