ONE TEAM
INSIDE
NATIONWIDE CHILDREN’S

20 YEARS
of Family Advisory Council

BREAKING
THE MENTAL HEALTH STIGMA

Celebrating
OUR Commuters
One Team Inside Nationwide Children’s Hospital celebrates our employees, medical staff and volunteers, together with their families, as one team achieving the best outcomes for children everywhere.

Greg Frueh, who works in information services, commutes from Dayton each day.
Is working in health care a second career for you? Did you work in another professional field?

We’re looking for stories about your career evolution for an upcoming issue of *Inside Nationwide Children’s*.

If you share your story, you’ll receive the gift of an exclusive Nationwide Children’s logo item.

Please send your stories to EverythingMatters@NationwideChildrens.org by May 11.
Nationwide Children's is a destination hospital not only for patients, but also for those of us who work here. Our education and training, life experiences and desire to help others, have led us to be members of the team.

This issue of Inside Nationwide Children's explores how we arrive at our destinations every day. That can be a short bike ride for some, or a round trip of more than 140 miles for others. As you’ll learn, one colleague has used her transportation challenges to help create a hospital ridesharing program for all of us.

You can read in these pages about other distances crossed for the good of our patients and colleagues: how the Marysville Close To HomeSM Center brings needed pediatric care to that community; how basic scientific research travels the road to patient therapy; and how the Family Advisory Council guides us toward better care.

Nationwide Children's has been my own professional destination for 12 years. While I recently announced my plans to retire as CEO in 2019, I look forward to continuing to serve the hospital as Emeritus Executive.

We still have much work to accomplish in the months and years ahead. The journeys at Nationwide Children's are not always easy, but those journeys improve lives.

Best,

Steve Allen, MD

“journeys improve lives”

Join the conversation on any of the Nationwide Children’s social media channels:
Keep Your Head Up
Reduce Distracted Walking Throughout the Hospital

In 2017, there were 112 employee falls at Nationwide Children’s Hospital. Yikes! Twenty-six percent of those 112 falls were considered “serious,” which means an employee loses time at work. Yikes again!

So how can we help reduce the number of slips, trips and falls? We’ve introduced the Heads Up campaign to encourage staff to combat distracted walking in and around the hospital.

Next time you’re responding to a text or checking an email while you are walking, you just might receive one of these Heads Up cards from a co-worker. Encourage others to refrain from distracted walking and pass the card on to the next employee who can help spread the word or needs the friendly reminder. Treat it like a game and pass it on as soon as possible.

Zero Hero™
Create a safe day. Every day.

Want some Heads Up cards to share?
Send your requests to EverythingMatters@NationwideChildrens.org

Not only does the Heads Up campaign impact safety, it helps create a friendly culture where we can assist patients, families and even other employees. And you never know… a smile could be just what someone needs to brighten their mood.

Practice the 15-5 idea. When you’re 15 feet from someone, make eye contact and smile. Then at 5 feet, say hello, good morning or have a nice day.
Jeff Bridge, PhD, took an interest in suicide prevention and research as a college student, when he volunteered at an organization called Services for Teens at Risk (STAR). He developed a passion to work with young people, and he’s been making a difference for the past 12 years at Nationwide Children’s. Dr. Bridge is the director of the Center for Suicide Prevention and Research (CSPR), a principal investigator in the Center for Innovation in Pediatric Practice and professor of Pediatrics, Psychiatry and Behavioral Health at The Ohio State University College of Medicine.

“I feel very fortunate to work with a talented, dedicated group of colleagues who share a common goal of preventing suicide and suicidal behavior in youth who often struggle with mental health challenges and other life stressors.”
If I’m not at my desk/unit, you can probably find me…
In search of coffee, a donut or chocolate (Justin, lock that drawer!).

Why did you choose to pursue your work at Nationwide Children’s?
I was immediately impressed with the people and leadership here at Nationwide Children’s and saw this as a great opportunity to join an organization committed to improving both the physical and behavioral health of children everywhere.

Are you involved in any community or volunteer work?
For years I coached recreational sports teams for both our kids, Kate and Noah. Kate is now a freshman at The Ohio State University and Noah has moved on to swimming and cross country, so my coaching days are over.

What virtue or trait do you appreciate the most in your colleagues?
I love a good sense of humor.

What is your greatest achievement/biggest accomplishment?
I’m hoping my greatest successes are yet to come.

What interested you most in pursuing a career in health care?
The idea that, through research, I might be able to contribute to preventing suicide or suicidal behavior in young people.

Three words that best describe me would be…?
Easy-going, driven, resourceful

Favorite Cafeteria meal?
Made-to-order omelet with mushrooms, bacon and American cheese - delicious!

Favorite animal friend?
Frog

At Clementine’s, I most often order…?
Latte

Favorite band/music?
It’s a tie: Van Morrison and The Avett Brothers

What talent would you most like to have?
I would love to have a 40-inch vertical leap so that I could throw down a windmill dunk in the 50-and-over league!

Thanks to the hard work of Dr. Bridge and John Ackerman, PhD, Nationwide Children’s is helping teens through the Signs of Suicide (SOS) Prevention Program. Dr. Bridge, Dr. Ackerman and their team work to decrease suicide attempts and increase education and awareness about suicide in the teen population. SOS is offered in many schools in central and southeast Ohio.

Suicide prevention and research is just one facet of behavioral health. Learn more about mental health and how you can help break the stigma on page 22.
Family Advisory Council: 20 Years of Impact

The Family Advisory Council strives to ensure positive patient experiences at Nationwide Children’s.

Thanks to our technology-driven world, you’ve probably used one of the cell phone charging stations throughout the hospital and in our off-sites. But did you know Nationwide Children’s Family Advisory Council (FAC) helped create the stations?

This is just one of the many improvements the FAC put into place since its inception 20 years ago. The hospital committee began in February 1998 as a way to ensure patient and family-centered care and improved customer service are always present between families and staff.
Currently, FAC has 49 members: 41 parents and eight Nationwide Children’s staff. Meeting monthly, the group provides input on hospital initiatives, develops projects for program enhancements and advocates in the community.

"THE FAC HAS BEEN INSTRUMENTAL TO PATIENT EXPERIENCE THROUGH THE DEVELOPMENT OF FAMILY-CENTERED ROUNDS AND SPREADING THE IMPORTANCE OF FAMILY-CENTERED CARE BY PROVIDING THE PARTNERS IN CARE, PARTNERS IN HOPE AWARD.

Linda Stoverock, Chief Nursing Officer"

As the FAC celebrates its 20th anniversary, we’re sharing some of the other ways the group has positively impacted the hospital.

• **Covered handicap parking:** The FAC was instrumental in sharing their want for covered handicap parking. With kids in tow for appointments and oftentimes having wheelchairs or strollers, covered parking made life easier in the rain and snow!

• **Design of the 2012 hospital addition:** As the new hospital tower was being built, the FAC was consulted for patient and family input. The members were shown mock-ups, and former members even provided ideas and thoughts.

• **Partners in Care, Partners in Hope Award:** It was the FAC that came up with this annual award, which is presented to a Nationwide Children’s staff member who goes above and beyond with family-centered care. Each year, employees are nominated by families, and the FAC votes on the award recipient.

• **Cookies & Conversation:** FAC parents and other parent advisors will talk to current parents, answer their questions and share important hospital information through this initiative, where they’ll go room to room… with cookies, of course!

• **Gift cards:** Did you know the hospital has family gift cards? Another FAC-created project, the gift cards can be loaded by anyone and given to patients and families. They can be used for food in the cafeteria, gift shop and more.

Want to learn more about the Family Advisory Council? Or, do you know a parent who should apply? Visit NationwideChildrens.org/Family-Advisory-Council.
Did you know Nationwide Children’s Hospital has employees and volunteers traveling to work from more than 400 zip codes? This means our reach expands beyond our hospital, surrounding buildings and off-site locations. Staff are embodying the Nationwide Children’s mission, vision and values all over the state and beyond.

Nationwide Children’s reputation is known around the country and even around the world, and people want to work at a hospital providing best outcomes to children. The more than 12,000 hospital employees have a passion and dedication you can’t find anywhere else.

Take Greg Frueh, pictured right, for example. He drives 150 miles each day to work. You’ll learn more about Greg and other employees who are committed to helping kids everywhere, whether their commute is long or short.

Greg Frueh has a round-trip commute of 150 miles per day. That’s more than 30,000 miles per year!
Tales from the Road

It’s no surprise that since Nationwide Children’s Hospital is in Franklin County, that’s where most of our staff members live. But did you know we have employees residing in 74 of the 88 Ohio counties? What a reach! The map below shows just how far we go for Best Outcomes. Read about the five employees marked on the map in the next few pages.

More than 8,000 employees live in Franklin County, where Nationwide Children's Hospital is located!
CELEBRATING OUR COMMUTERS

Tess Cunningham
Epic Application Coordinator, Information Services

Means of Transportation: Bike
Round-trip Commute: 5 miles

Tess pairs her hobby with her commute to work – she bikes from her home in nearby Victorian Village. “Being in a car makes me so anxious,” Tess says.

“I GET THE ENDORPHINS RUNNING [BY BIKING] AND FEELING THE FRESH AIR PUTS ME IN A ZEN MOOD. TO ELIMINATE THAT 30 MINUTES OF NERVOUSNESS MAKES MY DAY A LOT BETTER.”

In her spare time, Tess partakes in cyclocross – bicycle racing that includes going through barriers and getting off a bike and carrying it. She’s even qualified for pro nationals. “At work, I have a desk job, so to have the extra physical stimulation really helps,” Tess says. “It’s convenient. Biking takes the same time as driving, thanks to the bike lanes. And I know shortcuts that help too. So why waste the gas? I just opt for the bike.”

Hannah Lange
Grants Coordinator, Adolescent Medicine

Means of Transportation: Bus
Round-trip Commute: 8 miles

Using Columbus’ public transportation, the COTA bus, became an obvious commute choice for Hannah, who only lives about four miles from the hospital. Hannah works in the Livingston Ambulatory Center, and moving into that building made her distance to work even shorter. “I realized how short my commute was and how much of a headache driving was for such little distance,” says Hannah.

“I SPENT MORE TIME IN THE PARKING GARAGE THAN ON THE ROAD.”

Now, the COTA bus picks her up less than a half a mile from her home. “It’s normally about a 30-minute ride,” she says. “For me - and everyone is different - a half hour of not driving is a much more pleasant way to spend my time. It goes faster for me than 10 minutes in the car. And it’s good for the environment to have less cars on the road and good for the city.”

ALONG FOR THE RIDE

Looking to find a carpool to Nationwide Children’s? Check out the Carpool and Ride Sharing site, found by searching “Carpool” on ANCHOR. There, you’ll find a list of employees either looking for a ride or willing to give a ride to work. Entries are listed by location, so you can easily see if someone in your area is offering a carpool.
Ashley Johnson
Administrative Assistant III, Center for Innovation in Pediatric Practice

Means of Transportation: Car
Round-trip Commute: 140 miles

“On a good day, my ride one-way is an hour and 15 minutes,” says Ashley, who drives to Nationwide Children’s from Waverly, which is located south of Columbus past Chillicothe. Ashley tells her co-workers that she has made the commute for five years because of the people. “They are so passionate about what they do, and the fact that I can help support them in the grants and publications and day-to-day operations, that’s where there’s pride in how I can help them,” Ashley says.

“I never thought about carpooling because I didn’t think it was something employers did. I just assumed it was a family or friends thing. But there are people in my hospital that want to do it.”

Ashley has also connected with families she knows coming from her area to Columbus. It’s intimidating to come from southern Ohio to a large hospital in Columbus, she explains. “There are little things I can do like helping with transportation or just meeting for coffee in the Magic Bean. That can mean the world when you are in a hospital and don’t know anyone.”

Laura Dattner
Research Writer

Means of Transportation: Car
Round-trip Commute: 40 miles

Laura has a unique commute situation – a medical condition means she can’t drive to work, so she had to find a way to get from Dublin to downtown Columbus each day. She knew public transportation would be one to two hours and an Uber would be a costly $35 a ride, so she looked into the idea of carpooling. When Laura realized the hospital didn’t have a way to connect with a carpool community, she put her idea into action through a hospital IMPACT project. The Nationwide Children’s Carpool and Ride Sharing site was born (learn more about the site on page 13), and there she found a carpool buddy in Kathy Crawford, an Employee Health nurse who lives just a mile from Laura. “We started carpooling in early September 2017,” Laura explains.

“IT’S BEEN GREAT, AND I THINK SHE WOULD SAY THE SAME THING. SHE REALLY WANTS TO HELP OTHERS IN ANY SMALL WAY SHE CAN. IT’S ENABLED ME TO KEEP MY JOB AND KEEP IT RELATIVELY NORMAL.”
Greg Frueh  
Senior Systems Analyst, Information Services

Means of Transportation: Car  
Round-trip Commute: 150 miles

For the last four and a half years, Greg has been driving to Nationwide Children’s from Dayton. But Greg doesn’t just drive alone – he’s in a carpool with three other people who live in Dayton but work in various spots in downtown Columbus. “Over the years we’ve had seven or eight people come into the carpool,” Greg says. “We take turns driving, and go a week at a time. I drive every fourth week.” Greg says he commutes 75 miles each way because he likes working in the technology field for a hospital that continues to grow. Plus, the added benefits of carpooling aren’t too bad, either.

“On a week I’m not driving, I may get some extra sleep. I’ve finished papers and had conference calls. It would be 30,000 miles a year on a car if I drove all the time. We’re not all parking and taking up four parking spots.”

We want to know!

Ashley Johnson likes to use her commute to make phone calls or listen to music. And Hannah Lange often spends her time on the bus responding to texts or reading a book. What do you do on your commute to work?

We’d love to know! Send your favorite commute activity – whether it’s listening to a podcast or telling us your favorite Sirius XM radio channel – and we’ll do a round up in the next issue of Inside Nationwide Children’s. Email answers to EverythingMatters@NationwideChildrens.org.
Constructing the Future
An Update on Campus Expansion

Each year, Nationwide Children’s Hospital continues to grow not just in staff size… but in buildings, parking lots and more. Curious about the status of some of the projects you’ve seen around the hospital? Okey Eneli, vice president of Engineering Services and Scott Reifeis, engineering director of design and construction, shared the latest.

ADVANCING BEST OUTCOMES FOR CHILDREN EVERYWHERE
MASTER FACILITIES II

• Near East Office Building: Going up on 18th Street, this office building will have four stories. Initially, two will be occupied and the other two floors will be shelled out for future use. Next to the office space will be a 1,100 car parking garage. Completion date for both the building and the garage is Q4 2018.
• **Big Lots Behavioral Health Pavilion** – Currently scheduled for a go-live in March 2020, the Big Lots Behavioral Health Pavilion, will house inpatient beds, outpatient clinics, a youth crisis center and more. Mock-ups of essential parts of the building have been placed in the lower level of the Livingston Ambulatory Center (LAC) to see how things will look and feel. “Not all of our Behavioral Health services will consolidate into this building,” says Scott. “We’ll maintain a wide footprint in many of our other buildings, like the Schrock Road Autism Center.” Another fun fact? There will be extensive tunneling to connect the LAC and the Yellow Parking garage.

• **Central Energy Plant**: “It provides all cooling, heating and energy support to the buildings,” explains Okey. “It will be completed ahead of the behavioral health pavilion, so that it can provide to that building.”

• **Childcare Center**: The 18th Street Childcare Center is getting an expansion, with construction starting in June. It will be built in two phases – the first will be built in the parking lot adjacent to the center, and then the existing building will be knocked down and rebuilt. First phase is expected to be completed in March 2019 and the second in November 2019.

• **Former Africentric School Lot**: Located on Livingston Avenue near the LAC, Okey shares that the plan is to knock the building down and build a surface parking lot by the end of 2018.

• **Backfill**: Even when staff move into new spaces, work is done on their former digs to renovate and make room. “We’re not just building new, we’re renovating old,” says Scott. “Sometimes we’re even creating empty spaces so areas can grow.”

• **City and State Construction Projects**: The Ohio Department of Transportation and the city of Columbus are continually working on projects to enhance the area, including the rebuild of the Grant Avenue bridge. In the future, we’ll also see a new exit ramp onto Parsons Avenue by Mooberry Street and a widening of Mooberry and its shift to the north.

Looking for more updates? Visit ANCHOR and search “Campus and Facilities” for additional information about what’s happening around our campus.
“Choo-choo! Choo-choo!”

**Kendall Frissora**, a patient access rep at Marysville *Close To Home* Center, was sitting in her chair at the front desk of the center when she heard a strange noise filtering out of the back hallways of the clinic. As the clinic closed down for the night, she couldn’t imagine from where the sound was coming.

All of a sudden, from around the corner, came a train. It was an imaginary train, dreamt up and driven by a cute patient conductor, powered by a nurse pushing the child’s wheelchair down the tracks and out the front door after her visit… complete with a chorus of “choo-choo” sound effects.

Like many aspects of Nationwide Children’s Hospital, from the Magic Forest to animal friends to caring staff, a little bit of magic on a visit - like a choo-choo train - can go a long way to providing best outcomes for kids.
Marysville Close To HomeSM Center with Urgent Care opened in May 2014 and was the first dedicated pediatric urgent care in the Marysville area. In 2013 alone, Nationwide Children’s saw more than 12,000 visits from Union County – so the opening of the center in that area brought a convenient location closer to those who needed it.

“We’re 30 miles from the main hospital,” shares Tia Wise, a radiographer at Marysville. “Our site understands that we have this opportunity to help families in the northwest corner of central Ohio and give them the same caliber of care they would receive at main campus. We take that role seriously.”

Marysville prides themselves on being One Team. Whether Marysville staff are helping each other to complete X-rays, hold a patient or comfort a sibling, they know “we rely on each other with limited staff in close proximity.” And the teamwork shows through a recent parent comment about the site.

“I VISITED THIS LOCATION WITH MY VERY ILL SPECIAL NEEDS DAUGHTER. FROM THE TIME WE ARRIVED WE RECEIVED EXCELLENT CARE AND CUSTOMER SERVICE. THE REGISTRATION CLERK LISTENED TO MY CONCERNS REGARDING MY DAUGHTER AND QUICKLY CALLED A NURSE TO THE LOBBY TO TRIAGE HER. WE WERE PROMPTLY TAKEN TO A ROOM FOR EVALUATION. EACH AND EVERY ENCOUNTER WITH STAFF FROM THE NURSES, RADIOLOGY TECH AND DOCTORS WERE PROFESSIONAL AND THOUGHTFUL.”

Besides collaborative clinical teamwork, the staff at Marysville know how to work together to throw a great potluck – one of their standing traditions. “Given that Marysville is open 12 hours on the weekend, from 9 a.m. to 9 p.m., we have regular potlucks for all disciplines,” share Jessica Wagner. “We try and find ways to connect with each other outside of our respective clinical areas, which has added to the effectiveness of the team-based care we provide.”

One of the most unique aspects of their site is the community involvement. “We are such a tight knit community and many staff are from the surrounding area,” shares Josh Green, a radiographer. “We might run into patients at our center or at one of our community outreach locations like the Union County Fair or the All-Ohio Balloon Festival, but no matter what it truly is like seeing an old friend.”

Quick Facts:

- Location: 100 Coleman’s Crossing Blvd, Marysville, OH 43040
- Opened: May 2014
- No. of Employees: 40+
- Services Offered: Urgent Care, Audiology, ENT, Laboratory Services, Radiology, EKG, Speech and Language Pathology, Sports and Orthopedic Physical Therapy, Sports Medicine
It took 15 years of discoveries and testing in the lab, and the recent launch of a start-up company to advance the work and federal approval for a clinical trial. But later this year, a gene therapy designed to help children with a severe version of limb-girdle muscular dystrophy, LGMD2E, will be tested in the first patient. Fifteen years may sound long, but a decade or more to develop new treatments is common, as are contributions by many.

“WE BUILT UPON THE SCIENTIFIC LITERATURE AND WORKS OF OTHERS HERE,” SAYS LOUISE RODINO-KLAPAC, PHD, A PRINCIPAL INVESTIGATOR IN THE CENTER FOR GENE THERAPY IN THE RESEARCH INSTITUTE AND A LEAD RESEARCHER BEHIND THE LGMD2E THERAPY. “IT TAKES A VILLAGE TO BRING THERAPIES TO CLINICAL TRIAL.”

LGMD2E is caused by a mutation to one gene. The result is the disease weakens hip and shoulder muscles, hampering a youth’s ability to move. As the disease progresses, it can weaken heart muscles and those needed to breathe. There is no cure and little effective treatment.
As is often the case in research, the initial discovery on this path to therapy wasn’t what investigators intended.

Two former Nationwide Children’s researchers, Philip Johnson and K. Reed Clark, were searching for a virus to help them study and treat human immunodeficiency virus, HIV. They identified a virus they labeled AAVrh74 but it didn’t work for them.

Dr. Rodino-Klapac began studying it and other viruses in 2006.

Dr. Rodino-Klapac had been fascinated when her middle school science teacher introduced the class to genetics. “We also had a close family friend with Huntington’s Disease and the causal relationship between defective genes and disease intrigued me,” she says. “I have been passionate about studying and treating genetic diseases ever since.”

Over several years of experimenting, first with the virus and muscle samples in petri dishes and then in mouse models that mimic the disease in people, she found that AAVrh74 was good at penetrating muscle cells.

To correct the mutated gene, she wanted to deliver a healthy gene that would help muscle cells express a missing protein that protects muscle fibers from wear and tear. Rodino-Klapac used a technique developed by another former Nationwide Children’s researcher, Douglas McCarty, PhD, which boosts the spread of the correcting gene and protein production.

After her lab tried the therapy on animal models, more than 95 percent of their muscle fibers were expressing the gene. The therapy proved safe and appeared to repair and protect muscle.

Based on this work and Dr. Rodino-Klapac’s related effort to develop therapies for four other versions of LGMD, the start-up company Myonexus Therapeutics was launched last year.

Myonexus is the financial sponsor of the upcoming clinical trial. The Food and Drug Administration recently approved testing with a handful of patients. Drs. Rodino-Klapac and Jerry Mendell, MD, will lead the continued research.

Read more about gene therapy in the latest issue of Pediatrics Nationwide. Read online at PediatricsNationwide.org.
Your Role in **BREAKING**
the Mental Health Stigma

With one in five children having a mental health disorder in their lifetime, it’s more important than ever that we work to break the mental health stigma. Sometimes, it’s as easy as knowing the right thing to say – not just to patients but even family members, friends and neighbors.

“One of the major recommendations is person-first language,” says Nikki Powell, Behavioral Health program manager of Inpatient Psychiatry. “We don’t like to talk about autistic kids because it implies that [autism] is the type of kid they are. There are many types of kids and having autism might be one part. Instead, the person comes first in your language as opposed to using a diagnosis as the adjective.”

**WHAT CAN WE DO TO HELP BREAK THE STIGMA?**

#starttheconvo

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<th>Use non-stigmatizing language. We see people first and disorders second.</th>
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<td>For example, instead of saying:</td>
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<td>“She’s depressed” say, “She has depression.”</td>
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<tr>
<td>“He’s bipolar” say, “He has bipolar disorder.”</td>
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<td>“She committed suicide” say, “She died by suicide.”</td>
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Using language such as, “He has a mental health disorder” (if this is known) conveys acceptance.

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<th>Avoid labeling words:</th>
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<tr>
<td>Crazy</td>
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Avoid playing amateur detective and speculating about whether or not someone has a mental health disorder and what his or her diagnosis might be.

Nikki shares that another piece of the stigma is that once you get people to stop blaming the kids, they begin to blame the parents. But a mental health disorder affects the entire family.

“These families are scared and in their own crisis,” she says. “As you figure out how to help your depressed child, you still have two other kids to get to soccer practice… the family is in crisis too. Remember and empathize. If you see something that looks like a parent is struggling with a child that has mental health issues, it’s not contagious. Don’t walk away – stop and offer to help.”

Tell us how you are starting mental health conversations with the hashtag #starttheconvo on your social media channels. And, you can visit our Nationwide Children’s YouTube channel and search “The Butterfly Effect” to learn more about pediatric mental illness.
“I discovered my passion for pediatric palliative care during my Master’s program – it had a sub-specialty that taught the importance of better understanding families of children who have a life-threatening or chronic illness and what that means for them. So many of them have a story to tell and their experiences not only shape how they make decisions but also how they care for their children. It’s important for families to get the opportunity to share that with providers here. If we can help relieve some of the burden on families and act as a liaison… to help with decision-making with respect to what’s important to a family, then I feel like we’ve done our job. That’s the heart of palliative care for me. The hospital can offer so many positive benefits for children with serious illness, but unfortunately a few die too soon. Regardless of where their journey takes them or where it ends, all of our patients can benefit from the support that palliative care can provide.”

Alice, APRN, Advanced Illness Management (AIM)
A day in the life of Charlene Smith, an environmental and patient support assistant at Riverside NICU, can vary, but no matter the task, she’s known for being a ray of sunshine. She monitors and assists with the cleanliness of the unit, supports the unit clerks and lends a hand with patient care. “I really like working on the NICU unit,” she shares. “Because everyone shares the same vision. This truly is a family environment where we are there for each other.” Charlene’s greatest joy is getting to see the babies on the unit make progress, get well and go home.

To nominate someone for “On the Spot,” email EverythingMatters@NationwideChildrens.org