NURSING REPORT 2021

EXCELLENCE

INNOVATION

GROWTH

COMMUNITY

NURSING

AT CHESHIRE MEDICAL CENTER
I am pleased to share the 2021 Cheshire Medical Center Nursing Report with you. This publication celebrates Cheshire’s community of more than 500 nurses, diverse in the specialized practice of nursing, and continually evolving to improve care for our community.

Our community of nurses has come through the unexpected and unchartered experiences of 2020—the Year of the Nurse—with professionalism, courage, creativity, and compassion. The past year was not the celebration we planned for; however, it was a year in which nurses stood forth as leaders and partners in care across the globe. At Cheshire, nurses provided direct care for patients with COVID in our Emergency Department, Intensive Care Unit, and medical-surgical unit, adapting to unique constraints and frequent change. They were essential to developing ambulatory respiratory care alternatives, safe perioperative care, COVID testing, and vaccine support.

Nursing at Cheshire encompasses so much more than pandemic response. With their own rich history, Cheshire nurses focus on all areas of wellness, illness, health, cycles of life and death through their dedication to the timeless work of nursing. The practice of caring, teaching, comforting, healing, and even grieving touches the depths of human experience. The skill to make decisions and positively change patient outcomes is grounded in science and dedication to life-long learning.

Nursing practice to meet patient, community, and organizational needs is only achieved through specialized knowledge and service across diverse roles. RNs and LPNs provide care across all ambulatory practices, in surgical services, in the hospital, Emergency Department, inpatient rehabilitation, radiology, and many more. Advanced practice nurses—including CRNAs, RNFAs, CNMs, Family Medicine, and specialty APRNs—provide care in advanced and independently licensed roles. Nurses fill key positions in education, patient safety, risk, quality, utilization review,
care management, mental health, infection prevention, regulatory compliance, and leadership. Nurses provide support and supervision for LNAs, patient care technicians, CMAs, and ED technicians. The positive impact made by Cheshire nurses is not only through direct patient care; they are educators, coaches and champions. Nurses use their particular passions to make a difference. For example, by educating and raising awareness for organ and tissue donation, nurses help our region give the gift of life. Recognizing the financial challenges faced by some patients, nurses also set up a clothing depot at the hospital so that patients in need can access clothing, shoes, and warm coats. Nurses also provide service and leadership in our community as esteemed volunteers.

I am honored to serve and collaborate with Cheshire nurses. As the Chief Nursing Officer, it is my duty to promote excellence in practice characterized by compassion, respect, and the best possible outcomes for our patients, our community, and each other. Together we will realize the nursing excellence that nurses seek, enrich, and commit to for all Cheshire practice areas.

Amy Matthews, DNP, MS, RN, CENP
Vice President of Patient Care Services and Chief Nursing Officer, Cheshire Medical Center

A long history

Cheshire Medical Center’s nursing history goes back 129 years.

In 1892, John Henry Elliot gave his family’s estate to Keene for a public hospital. That same year, a Hospital Aid Society was formed. This organization assisted in furnishing the hospital. And through the donations and labors of the local citizens, the 18-bed hospital was formally opened September 21, 1892.

One year after the hospital opened, a training school for nurses was established.

Today, there are more than 530 nurses at Cheshire—across the main hospital and our satellite offices—from all different walks of life, with a vast array of specialties, passions, and experiences.

The goal of this Nursing Report is to highlight a few of the many amazing Cheshire nurses making history today, both in the hospital and in our community.
Twelve months ago, the COVID triage department did not exist. However, this team of nurses—answering calls and questions from patients about COVID-19—exemplifies the innovation and creativity needed to fight the pandemic.

Seven days a week, including holidays, the nurses who staff the COVID line answer all sorts of questions about the virus—from what counts as “exposure” to whether or not they should come in for their appointments—and everything in between.

The team triages symptomatic patients and refers them to Keene Ambulatory Respiratory Evaluation Service (KARES) or the Emergency Department (ED) if necessary. They also advise exposed asymptomatic patients to quarantine at home and monitor for symptoms instead of becoming potential viral vectors. If symptoms develop or worsen, patients can call back, and the nurses will reassess their care plan.

“People would call and ask for me by name,” recalls Georgette Vachon, RN, one of the full-time COVID triage nurses. “Sometimes people call every day as more people in their family test positive. They liked being able to reach out to the same person to ask questions.”

All patients with any questions related to COVID-19 are directed to this team of nurses. They spend a large part of their shifts educating and reassuring patients or notifying those who tested positive for COVID-19.

“I would spend 10 hours a day just calling patients to tell them their positive results (during the height of the January surge),” recalls Tonya Hansen, RN, another full-time COVID triage nurse.

Giving results was just the start of those conversations. They also review instructions on how to quarantine and for how long. They teach families how to keep their spaces clean, remind them to wipe down doorknobs and light switches. Equally as important, they would provide comfort and support.

“We ask them about their support systems. We want to make sure someone would be checking on them, and they were not alone,” says Tonya. “And we always tell them to call us with any questions.”

Initially, nurses from Family Medicine covered this department until three permanent staff were hired. During the busiest period, five nurses fielded calls.

“In the peak months, we would start our day with 200 new messages from patients in addition to all the incoming phone calls,” remembers Hillary Stickney, LPN, one of the many who work weekends to staff this department.

When asked how they manage the stress of answering calls, Tonya and Georgette describe their teamwork approach of divide and conquer. “One of us will answer the incoming calls, and the other one returns calls from the list of people who submitted questions electronically,” says Georgette.

Tracy Turcotte, RN, clinical leader for Cheshire’s COVID-19 screenings and testing, is grateful for the teamwork and support of this new department.

“Changing public health recommendations on isolation, quarantine, and testing require regular updates to the advice our team delivers and our nursing professionals take this in stride!”

Andrew Tremblay, MD, the department chair for Family Medicine, calls the COVID line “critical to delivering care to our community during a time of great stress and strife."

“The notion of expertise, standardization and consistency was at the core of this function and we would have been hard-pressed to operate effectively without the dedication and commitment of this group,” Dr. Tremblay says.

Tonya and Georgette are also grateful for the support of our Infection Prevention nurses, Mary Pierce, RN, and Erin Patnode, RN. “When patients have questions we can’t answer, we call Mary and Erin for support.”

Navigating the uncharted territory of COVID-19 relied on teamwork. The COVID triage department came together out of necessity and successfully became an integral part of the solution.
Inpatient units take a team approach to innovation

For the inpatient units’ staff and leadership at Cheshire, the challenges that came with the COVID crisis heightened the need for innovation and creativity with little notice and limited supplies. Day-to-day operations had to adapt quickly to be successful.

Some of these changes included adding HEPA filters to patient rooms, rearranging supply rooms to make room for more PPE, relocating essential equipment to align with the location of COVID patients, changing the laundry process to ensure clean gowns were available, creating clear signs for quick communication, and even marking the floors with dots to show proper social distancing.

In addition to the operation changes, nurses changed their workflow to use a team nursing approach to accommodate the increased number of patients.

When asked about the innovation on the inpatient units this past year, Lisa Kopcha, clinical leader of the Thompson Unit, gives all the credit to her staff.

“The nurses and LNAs recognized the needs of their patients and the benefits of standardized PPE use,” Lisa says. “They advocated for the team approach to help support each other and get through every shift. Efficiency was necessary to optimize the use of supplies and time.”

THE NURSING PRACTICE COUNCIL
Defining, promoting, and supporting evidence-based practices

Ten years ago, Margaret “Maggie” Bard, RN, CMSRN, started her nursing career in the Float Pool at Cheshire Medical Center. Even as a new nurse, she was passionate about following evidence-based practices to provide the best care.

Two years into her career, a colleague suggested she join the Nursing Practice Council. There are two nurse-lead shared governance councils: one for acute care and one for ambulatory care. Both councils focus on nursing practice, quality, and education/competency. Both include nurse representatives from each patient service area and meet monthly to discuss interdepartmental practice issues that impact patient care.

The Nursing Practice Council also meets monthly with nurses from all over the organization. It ensures that changes in nursing practice are carried forth across all areas of patient care—defining, promoting, and supporting evidence-based professional nursing practice. Maggie served as a member for a few years then accepted the position of co-leader.

“It’s important to have a representative from each nursing area on the Council,” Maggie says. “Having full capacity and representation makes the Council powerful. It broadens our work.”

That work includes reviewing new policies and procedures, which may sound straightforward but is far from it. “We do a lot of research,” Maggie says. “We want to know what the evidence shows is best practice, what other hospitals are doing, and what other nurses are doing.”

Maggie says the Council helps identify gaps in policy by reviewing documents word by word, line by line. “If we are concerned with the evidence, we stop the meeting and grab a trusted nursing resource and fact-check the policy for accuracy.”

A goal of the Council has been to empower non-managers as much as possible to do this work. And although Maggie holds no official leadership position, she is respected by her peers as one.

“She is an exceptional nurse who, through her many years of experience and leadership on the Nursing Practice Council, has helped to identify, investigate and advocate for vital practice changes within the organization,” says Michelle Langholf, RN, BSN, from Quality and Risk. “Maggie is always willing to lend a helping hand and give her expertise on patient safety projects.”

A quick example: In October of 2020, the Council had a suggestion for a new kind of equipment. After a literature review, discussions with Infection Prevention, coordinating with vendors for training, and talking with many organizations using it, the product will be pilot this May.

After many years on the Council, Maggie reflects upon her colleague’s suggestion to join and wants to encourage others to do the same.

“I have really enjoyed working on the Council,” says Maggie. “I have learned so much. I feel like I am a better nurse because I am on the Council. It is a great way to keep learning and have input on how my job is done. It is not a matter of having the most knowledge; it is a matter of having a great interest in doing your job in the best possible way and using evidence to better your practice.”

Interested in learning more about Cheshire’s Nursing Practice Council? Contact Maggie at mbard@cheshire-med.com.
Growing a career in nursing at Cheshire

Opportunities abound

At Cheshire Medical Center, our nurses are surrounded from the start with a variety of support and development opportunities. And as a nurse at Cheshire, your professional growth can continue throughout your career.

General orientation kicks off your education, followed by eD-H training customized to your nursing role. For six weeks, new nurses who have just graduated participate in the Nursing Residency Program. They are paired with a preceptor who is not only a skilled nurse, but has also completed specialized education designed to help them support a new nurse. New nurses will spend up to 10 weeks working alongside their preceptors on their units.

“There are many important things we do here at Cheshire Medical Center to care for the health of our region,” says Anthony McLean, DEL, RN, FACHE, NEA-BC, Cheshire’s director of inpatient services. “One of the most important things we do is developing our employees. Without that commitment to their growth, we would not be able to meet the health care needs of our community.”

The mission of our Education, Training, and Development department is to support and inspire improved performance through workplace learning. The department provides many services: management and supervision training, nursing continuing education, NetLearning, and Elsevier Learning. It also serves as an American Heart Association Training Center. In addition, employees can reach out to the department for career guidance at any point.

There are many examples of people who began their careers at Cheshire in an entry-level role then took advantage of our staff development, ongoing education, tuition reimbursement, and nursing scholarships to advance their nursing careers. You can read more about two people—Sherry Mattson, RN, and Elizabeth Duquette, RN—who did just that later in this publication.

The role of the nurse is not limited to the bedside. With experience and continued education, bedside nurses are moving into positions as nurse leaders, nursing informaticists, quality and risk nurses, care coordinators, and many more. We hope you’ll be inspired to grow your career too.
Nurse Residency Program

A longtime nurse enjoys helping newly licensed nurses into the workforce

Twenty-four years ago, Kathy Weiner, RN, BSN, chose to start her career at Cheshire Medical Center. As a Peterborough resident, she opted for a longer commute due to the superior shifts offered at Cheshire. As a working mom, Kathy quickly found the night shift provided a perfect way to balance her career and family.

Nearly three decades later, Cheshire continues to be the right choice. And it’s her co-workers at Cheshire that have made the decision to stay an easy one.

Kathy Weiner, RN, BSN, leads a nurse assistant training class at Cheshire Medical Center.

“The people I work with are amazing,” Kathy says. “Especially working nights, you have to be a cohesive group. It’s definitely the people — the people at Cheshire are unique unto themselves.”

With her children now all grown up, Kathy has moved on from the night shift to help run Cheshire’s Nurse Residency Program, which is designed for newly licensed nurses hired at Cheshire to transition from a classroom/textbook/simulation setting into a workforce setting.

“Nurse Residency helps the new grad transition from the textbook to the bedside,” Kathy says. “Evidence shows that this smoother transition increases the new grad’s satisfaction. They are happier in their new role, and they stay longer.”

Cheshire supports continued education throughout your career with tuition reimbursement and nursing scholarships. While raising her family and working nights, Kathy completed her Bachelor of Science in Nursing (BSN) — “and Cheshire paid for all of it,” she says.

Cheshire also offers programs for people in the community to begin a career in health care, including two Nurse Assistant Training Programs and a Medical Assistant Apprenticeship Training Program.

Nurse Assistant Training Program

One LNA’s story of finding her calling in nursing

Savannah Cavadini, LNA, has sold cars, worked at Planet Fitness, and even worked for The Children’s Learning Center at Cheshire—but nothing ever felt right. People would call her out of the blue with different job opportunities. That’s how Savannah first heard about the Nurse Assistant Training program at Cheshire Medical Center. “My cousin knew I needed a part-time job and sent me the link.” Little did she know, this program would change the course of her life and lead her to a career in nursing.

The Nurse Assistant Training program is a free, paid, part-time program at Cheshire designed to prepare you for a career as a nurse assistant. The training program is a combination of classroom, skill labs, and clinical training. Many candidates take advantage of this training to launch their career in health care because they can then continue their education and become a Registered Nurse (RN).

Savannah had intended the nursing assistant gig to be a part-time supplement to her other job in the dental field. However, once she started the program, she was hooked: She wanted to be a nurse.

Savannah wasn’t the only one who realized she finally found her calling. “While I was in the program,” she said, “my mom bought me a really expensive stethoscope and said, ‘This is for your next step.’ I remember my dad said, ‘You’re not stopping here!’”

Savannah, who now works on the inpatient Kingsbury Unit, describes her job as “crazy busy and a lot of work,” but one she loves. She recalls the best times are when patients ask for her to come back to care for them.

“It’s things like that that get me through the long nights. It is not about me when I go to work,” she says. “Meeting people at the most vulnerable times in their lives; you get to take care of people on their worst days and make them feel better. Making a difference in someone’s life is what makes me get up and go to work. It’s not about the money.”

But Savannah says the employee benefits are significant too. She’s particularly appreciative of the tuition reimbursement Cheshire provides, which she uses to pay for classes at River Valley Community College. She will earn her Licensed Practical Nurse (LPN) degree from River Valley in December of this year.

Born at Cheshire and now pursuing a career here, Savannah is following a passion she did not even know she had until she started the Nursing Assistant Training program. Now, she’s looking forward to continuing her education and nursing career. Once she becomes an LPN, she plans to start a bridge program to become a Registered Nurse right away.
We salute our nurses’ commitment to community

After a tireless year where we have all faced so much adversity caused by COVID, the theme for nurses week—“Nursing Our World to Health”—is incredibly poignant and accurate.

Cheshire Medical Center has talented, caring, and compassionate nurses who work in a variety of roles across many departments, from the Emergency Department, Acute Inpatient Services, Ambulatory, Radiology, Care Management, and so many more. These nurses help provide exceptional care for our patients, 24 hours a day, 365 days a year. During the past year, our nurses have continued to work together to meet our community’s needs. They spend their time at work dedicated to providing the highest quality care.

For many of our nurses, however, their work is not done when their shift ends. Many Cheshire nurses support the community by volunteering—expanding their care and compassion beyond the bedside and into the community—during their free time. They serve as active fire and rescue volunteers, community board membership, food pantry volunteers and support, and—most recently—in our community’s COVID-19 vaccination efforts.

Thank you, nurses, for your efforts to “Nurse Our Community to Health.”

Building an international workforce

A special collaboration is paying off for everyone

In 2019, we entered into an agreement with Avant Healthcare Professionals to help establish an international nursing workforce opportunity for Cheshire and global RNs. International nursing programs address the needs of recruiting health care organizations and international nurses.

Here at Cheshire, we appreciate the opportunity for a wider recruitment of nurses and the benefits of a more diverse workforce. We are also committed to creating opportunities for international nurses to achieve their personal goals and dreams. Most importantly, our patients benefit from skilled and compassionate care from this group of professional nurses.

Two years into the collaboration, we are pleased to announce that for the first time, an RN from an Avant-sponsored placement—Irene Gachoki, who is from Kenya—will join us as a full-time Cheshire RN in the ICU.

You can read about two more international nurses — Ann Ihekoronye, RN, and Felecsha Cohall-Johnson, RN—who are currently working at Cheshire through Avant on page 16.

Our international nurses have embraced the challenges and joys of nursing practice in a new country. They have become valued partners in care. They inspire us!

Cheshire nurses step up to help with COVID-19 vaccinations

It takes a complete team effort to vaccinate a region. Just ask Tricia Zahn and Jane Parayil, who spearheaded the COVID-19 rollout for the Monadnock Region.

Through their efforts with the Greater Monadnock Public Health Network (GMPHN)—one of 13 public health networks statewide, serving Cheshire County and the 10 western-most towns in Hillsborough County—they’ve organized the vaccine rollout of our region along with the support from the National Guard and countless selfless volunteers.

“We have amazing partners who are part of the National Guard, as well as both state and local partners,” Zahn said. “Whenever it feels like too much, we know we have community partners to lean on and pull in to help us over the more challenging waves of this pandemic.”

Some of these partners include Cheshire staff that have donated their time to volunteer at the state-run fixed site. Many of those volunteers were nurses from Cheshire.

“Our volunteers have all been amazing, especially all of our nurses who have donated their time. We have had many who came out retirement, and obtained an Emergency License to help the vaccination efforts,” says Parayil. “We wouldn’t be able to vaccinate everyone in our community without the continued support from all our volunteers.”
Justin Lyons knew from a young age that he wanted to work in emergency services. Now at 32 years old, the list of credentials that follow his name—RN, BSN, CEN, TCRN, and AEMT—makes it clear he's followed his dreams.

While attending Monadnock Regional High School in nearby Swanzey, Justin completed the EMT—I—now referred to as AEMT—curriculum, test, and state registry exam with the aspiration to become a paramedic. However, after completing his EMT observation in the Emergency Department (ED) at Cheshire Medical Center, his passion for emergency nursing was born, and his plans changed.

"After my EMT observation experience, I knew my dream of being an ER nurse would be here, at Cheshire," Justin says. Aside for a year spent in Nashua, Justin has lived and worked in this area all his life. "I am in this building and this community for a reason. I want to work and serve in the community where I live."

His dedication to this community brought Justin and his husband, Michael, back to Walpole. Both volunteer for the Walpole Firefighters Auxiliary, a branch of the town’s fire department that supports the community of Walpole by putting on CPR classes as well as community events such as Old Home Days and the Children’s Firefighter Challenge.

While working in the ED during COVID, Justin had an opportunity to support some emergency management initiatives, including participating in training on the use of Powered Air-Purifying Respirators (PAPRs), the PPE needed to care for patients with COVID. When the Walpole Fire Department starting using PAPRs, Justin used this knowledge to educate and train his colleagues in the department.

"Cheshire’s Emergency Department benefits from Justin’s role in the community. He serves as a resource for pre-hospital processes and procedures," says Jessica Lussier, MSN, director of critical care and emergency services. “Together we can provide coordinated care for our patients. "Cheshire is the right-sized hospital," Justin says. "We are big enough to support our local communities but have the support of the tertiary hospital and trauma center at Dartmouth-Hitchcock Memorial Hospital. There is always something going on to make the patient experience better, to make the work better.”

Justin’s childhood dream of working in emergency services has been realized, but no one would be surprised if the list of credentials after his name gets longer. We’re so thankful for his commitment to Cheshire and the community.

“I want to work and serve in the community where I live”

Cheshire nurse’s selflessness doesn’t stop when his ED shift is over

“After my EMT observation experience, I knew my dream of being an ER nurse would be here, at Cheshire. I am in this building and this community for a reason. I want to work and serve in the community where I live.”

–Justin Lyons, RN, BSN, CEN, TCRN, AEMT
COVID-19 took something from all of us. It took children out of schools, employees out of offices. It took us out of each other’s homes, out of each other’s arms, and—in many ways—out of each other’s lives.

In the Intensive Care Unit (ICU) and across Cheshire Medical Center, employees had to follow rigorous protocols to protect against COVID-19. “I’d compare it somewhat to going to war,” says Miles Harris, RN, an ICU nurse. “It’s kind of how it felt. You really were on the front lines of the war against this invisible virus. All of a sudden, the job became a lot harder. It’s already hard enough.”

For Miles, the pandemic’s assault was even more personal. It also stole time with his father, Henry Harris, who passed away in early 2021 due to glioblastoma (brain cancer) at the age of 67. Henry was on hospice service at home toward the end of his life, surrounded by loved ones. However, before he went into hospice care, the strict COVID-19 protocols during 2020 limited how often Miles could visit his father while he was in the hospital.

“It certainly made this year more difficult, not being able to do a lot of things we’d like to do,” Miles says. “I couldn’t have dreamed up a worse year. The bad situations were stacking up against us.”

At home in Marlborough, his wife has an autoimmune disorder, so Miles says he spent a few nights sleeping in the basement.

“A lot of people spent time away from loved ones in the beginning,” Miles says.

As he was struggling with the thought of possibly losing his father, Miles was also making sure he and his colleagues were doing their best to keep COVID-19 at bay by following the strict protocols for donning, doffing, and use of personal protective equipment (PPE). When COVID-19 first struck, the ICU staff were provided all of the necessary PPE and precise instructions on how to correctly put it on and take it off to eliminate
exposure to the virus. While the information and equipment made the staff feel safe, so much was still unknown about the novel coronavirus that the uncertainty was overwhelming at times.

“At the onset, it was pretty terrifying that we didn’t have any idea how virulent the virus really was,” Miles says. “We wanted to protect ourselves. We were very cautious and using equipment that we hadn’t really used, rarely, if ever.”

That’s where Miles stepped in—and stepped up.

Sensing some uneasiness from some of his colleagues, he became the ICU’s “PPE champion.” If someone was unsure about how to put on a piece of PPE, Miles was there. If someone took off the items in the incorrect order—there’s an intricate and specific protocol, almost like steps in a dance, for properly removing PPE after leaving a COVID-positive room—Miles was there. Not as an overbearing presence, but rather as a guiding hand, making sure everything was done correctly to ensure the unit’s safety.

“I felt it was imperative to protect us all,” says Miles, who would even stay late to give extra instruction to the night staff. “If we have one missing link in the chain, then the virus could spread.”

Jen Clark, RN, the clinical leader of the ICU, says Miles was a calming influence for the unit and remained composed through everything 2020 threw at him.

“I considered Miles our champion of PPE, as he went above and beyond to make sure his team never went into a room without feeling prepared and safe,” Jen says. “He was proactive in keeping up with new recommendations. He provided suggestions, and he used humor to decrease our team’s anxieties.”

During the pandemic, one thing that has endured and even strengthened is the camaraderie among the ICU staff. Keeping that chain strong to fight COVID-19 fortified the staff’s bond and galvanized them, Miles says.

“I think we have a really tight-knit family, and the whole thing brought us closer,” he says. “I thank all our co-workers for all of their support. You never have to wonder if someone’s got your back.”

Now more than a year after COVID’s opening salvo, like many of us, Miles is cautiously optimistic that we’re closer to an end of this harrowing chapter.

“I hope one day we can put it all behind us, and it will be a distant memory,” Miles says.

And while memories may be all he has left of his father, Miles says there’s absolutely no doubt how he’d feel if he were still here today.

“He would be proud,” Miles said. “He was proud of my work as a nurse in the ICU, and he’d be proud to see me getting some recognition.”

Miles Harris, RN
Intensive Care Unit

“...really tight-knit family, and the whole thing brought us closer. I thank all our co-workers for all of their support. You never have to wonder if someone’s got your back.”
Sometimes life is pretty straightforward. You go to school, decide what you want to be, and embark on your career.

Elizabeth Duquette thought she had it all figured out. A graduate of Keene High’s early childhood education program, Duquette worked full-time as an associate teacher at The Children’s Learning Center at Cheshire Medical Center. She was on her path.

“I babysat a lot,” she said. “I nannied for families here at the hospital, and thought ‘This is what I want to do. I want to work with kids.’” Elizabeth, who’s known as “Bizza” to her friends and co-workers, says with a laugh. “It’s always been who I am.”

After about a year at The Children’s Learning Center that Elizabeth says “shaped me as a young adult,” she started thinking about a career in health care—specifically nursing. She decided to enroll in the LNA program through the Red Cross in Keene (a program that is now available at Cheshire).

She started at Cheshire as an LNA in 2014 and never looked back. “Once I got my LNA, I decided this is definitely what I want to be doing. It was a very easy decision.”

“I love helping people,” says Elizabeth, who earned her Associate in Science in Nursing (ASN) degree from River Valley Community College in 2018. She later became licensed as a Registered Nurse (RN) after passing the National Council Licensing Examination for Registered Nurses (NCLEX-RN).

Seven years later, she’s an RN in the Post Anesthesia Care Unit (PACU) and just earned her Bachelor of Science in Nursing (BSN) from Southern New Hampshire University, the hard-earned result of taking night classes over the past two years.

While the careers are different—there’s considerably less finger-painting and story-time on the PACU—Elizabeth says there is some overlap, which made the transition easier.

“At the end of the day, you’re helping people,” she says. “You are a caregiver to another person. And that’s always felt very natural to me.”

Pam Switzer, RN, clinical leader of the PACU, calls Elizabeth a “tremendous asset.”

“For those looking to continue their education, Cheshire offers plenty of programs and scholarships to help you reach your goal. Elizabeth used Cheshire’s tuition reimbursement program to help pay for her bachelor’s degree. Coupled with a scholarship, this financial assistance resulted in very few out-of-pocket expenses.

For more information about tuition reimbursement, email Human Resources at humanresources@cheshire-med.com or call 603-354-6520.

For information about available scholarships, email bpenniman@cheshire-med.com or call 603-354-5454 x2410.
“If you think you want to get into health care, get that LNA and try it out—see how it goes for you. It solidified in my mind that I wanted to continue to become a nurse.”
When she’s not helping save lives as a nurse at Cheshire Medical Center, Sherry Mattson, RN, spends her free time—well—helping to save lives.

Sherry is a full-time overnight charge nurse in Cheshire’s Emergency Department (ED). When she’s not wearing one of her many hats to keep the patient flow going there, she often dons a helmet as a volunteer on-call firefighter with the Swanzey Fire Department.

“We average a little over 1,000 calls per year, between fire and EMS,” says Sherry, who lives in Swanzey with her husband, Eric, the deputy fire chief. “It is busy. I may get four or five calls per month, sometimes more. It depends on what I’m able to do. I try and fit it into my schedule.”

That schedule includes being a mom to four—including two fellow Cheshire LNAs: Gabrielle Davis in the ICU and Kate Guyette in Podiatry—and a grandmother to six children who she’s overjoyed to spend time with again. In 2020, she was sidelined by neck surgery for three months and then COVID-19 in December, so she was limited to family driveway visits from the tailgate of her truck.

But now she’s vaccinated and back to doing what she does best: helping people. She’s been volunteering at the state-fixed vaccination site this spring, where people’s appreciation has helped renew her “faith in society.” “By giving these vaccines, I’m hoping we can keep people out of the ER,” she says.

When she is on-site at a fire, she spends most of her time outside the burning buildings. Certified as an Advanced Emergency Medical Technician (AEMT) since 1998 and as a firefighter since 2000, she supports her fellow firefighters by filling oxygen bottles, making sure they’re drinking enough fluids, and performing medical rehabilitation as needed.

“Every person who has been inside the building has to do rehab before they go back inside,” Sherry says. “I make sure they’re OK to go back inside. Some guys won’t even tell you that they’re not.”
Helping people and saving lives—in a variety of ways

Whether it’s in the ED, the fire station, or the vaccination tent, nursing is a true vocation for one RN

Caring for people is nothing new for Sherry, who's taken the road less traveled to her position in the ED. After several years doing telephone troubleshooting for an insurance company, she started her Cheshire journey in housekeeping in 1998. She also worked in registration in the ED, medical records, and in the EKG department. After a nine-year stint as an ED tech, Sherry completed her RN certification in 2008 through New England Community Technical College and started working in the Emergency Department. That’s when it all changed: The moment she first experienced the energy and adrenaline that came with working in the ED, she knew she had found her place.

“That’s something you can’t get on the inpatient floors,” she says. “That first contact with the patient, either in the field or in the ED, just being able to help them immediately. I really do enjoy that part of it.”

Kelly Chamberlain-Warner, RN, BSN, the clinical leader in the ED, says Sherry is invaluable.

“Sherry has a wealth of knowledge,” Kelly says. “Not only does she train the nurses and techs she works with, but when she is in charge, she does teach-and-learn sessions with the staff, where everyone has to teach something. Sherry is an advocate for her patients, other staff members, and our department.”

Sherry also discovered she excels at a vital procedure: starting intravenous (IV) administrations. She’s known throughout Cheshire as the go-to person if someone encounters a particularly elusive vein. It’s not uncommon for her to get several calls per shift requesting her assistance.

“It’s what I’m good at,” Sherry says. “I will go anywhere in the hospital and start an IV in anyone. I feel good when people feel good that I’m there to help them.”

It’s probably no surprise that she loves to "learn something new every day." Sherry is also only five courses away from finishing her Bachelor of Science in Nursing.

Of course, achieving that goal will not put an end to her thirst for learning and doing more.

“Someday, I’d like to retire and open a bakery,” she says. “My retirement plan is to have a bakery. I’ll be ready by then.”

Once she’s done saving lives, that is.
Embracing a new home in New Hampshire

Two international nurses navigate their way with the help of a welcoming community—and each other.

Ann Ihekoronye, RN, traveled over 5,000 miles to start a new job—along with a new life in a different climate, in an unfamiliar landscape that held different people belonging to a different culture.

Quite frankly, it was a lot to process. But on her first day at Cheshire Medical Center, she was comforted by the smiling face of Felecsha Cohall-Johnson, RN.

“She said, ‘Relax your mind. Things are going to work out,’” says Ann, who was working as a nurse on the Progressive Care Unit (PCU) at the time. “Because initially, I was already feeling lonely. I know that. That was a good one to welcome.”

“That was your first day?” says Felecsha, sitting nearby, beaming at her friend.

“Yeah, that was my first day,” Ann says back to her. “Oh my god, I didn’t know that,” Felecsha, bursting out into a laugh.

“I brought her home. She didn’t have a ride.”

Upon Ann’s first day at work, her car still wasn’t quite ready yet. So Felecsha drove her home, and they’ve been close ever since.

That was one in a series of obstacles and hurdles that both women have adapted to and overcome with the help of Cheshire staff and community members—and each other—since they arrived in the United States nearly two years ago.

Felicsha — or “Fel” as she’s known to friends and fellow staff — relocated in July of 2019 from Jamaica. Ann arrived a few months later from her native Nigeria. Both women had been nurses in their home countries and came to America in search of better opportunities for themselves and their families through Avant Healthcare Professionals, a staffing specialist agency for internationally educated registered nurses, physical therapists, and occupational therapists. (Read more about Cheshire’s relationship with Avant on page 8.)

When they found out they would be living in New Hampshire, both women had identical reactions: Wait, where?

“I had to Google the state because I didn’t hear of New Hampshire before,” Fel says. “Everyone was saying, ‘Where in the world is that?’ And I was like, ‘It’s in America!’”

Ann relied on Google, too. Every day after work in Nigeria, she’d head straight to her phone. She Googled “New Hampshire.” She Googled “Keene.” She Googled “Cheshire Medical Center” and all of its various departments.

“So when I came [to America], it was like, I’m used to the environment because I keep looking at them every day,” Ann says. “I was used to the hospital environment, so to say. But some of the streets I actually Googled while I was still in Nigeria. So whenever I drive through them [now], I’m like, ‘Yeah, I saw this when I was going through the Google.’”

Both women have since acclimated to Keene. They’ve settled into their roles on the Thompson unit. They’ve also adjusted to the climate, although Fel says some of the staff did laugh at her “bundling in my bundles” as the temperatures dipped low and lower during her first New England autumn.

While the Granite State, the Monadnock Region, and Cheshire strive to increase diversity, they are still home to a predominantly white population. Fel noted this during her Google searches, and she had to overcome her anxiety about becoming a new minority member of our community.

“I kind of felt like, ‘Oh my God, I don’t think I’m going to function here, or I’m not sure how welcoming it’s going to be as a Black person,” Fel says. “I wanted to tell my company that I wasn’t coming. But we’re from more God-fearing populations, so I prayed about it and was like, ‘OK God, is this what you want for me? If it’s not what you want for me, you will remove it.’ And then I came.”

When Fel arrived, the staff on the Progressive Care Unit (PCU) greeted her with open minds—and open search engines. It turns out Fel and Ann weren’t the only Internet sleuths. The staff had done some Googling of their own, researching Jamaican culture, food, news, popular slang—anything to help Fel feel like she wasn’t so far from home.

“It was welcoming,” says Fel, who remembers people going out of their way to support her. “They always tried to help me when I was on duty, asking me if I needed anything. So when I get people helping me in that way, I’m like ‘OK, I feel at home already.’”

Now nearly two years later, both Fel and Ann are on the verge of completing their Bachelor of Science in Nursing (BSN) degrees online from Grand Canyon University. Earning their degrees within two years in America was on both of their to-do lists.
Their families have settled in, too. Fel’s husband, Kirk Johnson, is a licensed nursing assistant (LNA), and their two young sons attend school in Swanzey. Ann’s husband, Kolawole Oke, works at The Home Depot in Keene.

But that doesn’t mean they don’t get homesick. Fel, who wears a small Jamaican flag and palm tree on the lanyard that holds her Cheshire ID badge, has a brother in New York and a sister in New Jersey; everyone else is still in Jamaica. She talks to them every day.

There is one thing, try as they might, they both miss. “The food!” Fel exclaims.

“I miss my African food a lot,” Ann says, shaking her head with commiseration.

While Fel uses her Jamaican spices to liven up the food she cooks at home, and Ann can usually find her preferred selection of vegetables, they say it’s just not the same. Especially the cucumbers, which are vastly different here than in their home countries.

“They’re tough,” Fel says. “They’re bitter!”

“I started going for the baby cucumbers,” Ann says. “They taste better.”

“I’ll have to try those,” Fel says.

Fel and Ann are embracing their new lives—from cars to cucumbers and everything in between.

“I had to Google the state because I hadn’t heard of New Hampshire before. Everyone was saying, ‘Where in the world is that?’ And I was like, ‘It’s in America!’”
Circle of Gratitude Honorees

It comes as no surprise that nurses are often honored by the Circle of Gratitude program for outstanding care. Below are the Cheshire nurses who have been recognized since January of 2020.

Katelyn Ahern, APRN
Family Medicine

Sunshine Ainsworth, LNA
Thompson Unit

Liz Barry, RN
Float Pool

Betty Bass-Gray, RN
Kingsbury Unit

Maggie Butts, RN
Emergency Department

Laurie Carr, RN
Thompson Unit

Brittany Croatti, RN
Emergency Department

Lindsey Cushing, APRN
Women's Health

Jennifer Delano, RN
Endoscopy

Diana Dresser, RN
Women’s Health

Amanda Durling, LPN
Family Medicine

Kama Ellnor, LPN
Family Medicine

Laura Eno-Kennell, LPN
Cardiology

Lavonne Esterman, RN
Intensive Care Unit

Nick Gangel, RN
Thompson Unit

Brooke Garger, APRN
Cardiology

Melanie Gorecki, RN
Thompson Unit

Krys Hamilton, RN
Thompson Unit

Kevin Hannon, APRN
Family Medicine

Tonya Hansen, RN
COVID Hotline

Kate Ingram, APRN
General Surgery

Erin Jablonski, APRN
Gastroenterology

Deb Jacques, RN
Intensive Care Unit

Katy Jones, LPN
Family Medicine

Margaret Kelly, APRN
Family Medicine

Colleen Lauer, RN
Emergency Department

Karen Morris, RN
Post Anesthesia Care Unit

Celeste Ponce, RN
Urology

Alison Poulin, RN
Cardiology

Jenna Poulin, APRN
Urgent Care

Jennifer Rivera, RN
Ophthalmology

Kathy Schnyer, LNA
Thompson Unit

Calvin Seppala, RN
Thompson Unit

Adrienne Simpson, RN
Family Medicine

Ellen Slocum, LPN
Podiatry

Alaina Snide, RN
Emergency Department

Briana Thompson, RN
Women's Health

Georgette Vachon, RN
COVID hotline

Kim Whitaker, RN
Cancer Center Unit

President’s Service Excellence Award (PSEA) and Leadership Recognition Award (LRA)

Nurses are always well represented in our quarterly awards. Here are the nurses who have taken home the honors since FY2020 Q1.

FY2020 - Q1

PSEA
Simone Fyffe, RN
Emergency Department

Kendra Severance, LPN
Family Medicine, Team B

LRA
Jessica Lussier, MSN
Director of Emergency Services, Emergency Department

FY2020 - Q2

PSEA
Kimberly Whitaker, RN
Breast Care Coordinator, Hematology-Oncology

LRA
Angela LeFebvre, RN
Accreditation & Regulatory Compliance Leader, Quality Assurance and Safety

Michelle Beatrice, RN
Administrative Clinical Supervisor, Nursing Management Systems

FY2020 - Q3

PSEA
Tanya LeBlanc, RN
Hematology/Oncology

LRA
Audrey Trudelle, RN
Family Medicine, Team D

FY2020 - Q4

LRA
Kimberly Farris, RN, BSN
Clinical Leader, Nursing Management Systems

FY2021 Q1

PSEA
Becky Myott, RN, ADN
Post Anesthesia Care Unit

LRA
Kimberly Farris, RN, BSN
Clinical Leader, Nursing Management Systems

FY2021 Q2

PSEA
Erin Patnode, RN, BSN
Infection Preventionist, Infection Prevention

Jeannine Lucius, RN
Cardiac Rehab, Cardiology and per diem ICU

Scott Aldrich, RN
Clinical Supervisor, Nursing Management Systems

LRA
Scott Aldrich, RN
Clinical Supervisor, Nursing Management Systems

Ella Loughney, RN, BSN
Director, Quality and Patient Safety

LRA
Ella Loughney, RN, BSN
Director, Quality and Patient Safety

Jeannine Lucius, RN
Cardiac Rehab, Cardiology and per diem ICU

LRA
Ellen Loughney, RN, BSN
Director, Quality and Patient Safety

LRA
Jessica Gifford, RN, BSN
Administrative Clinical Supervisor, Float Pool/ACS

Jeannine Lucius, RN
Cardiac Rehab, Cardiology and per diem ICU
THANK YOU

to all our nurses, who show up each day to provide quality care with compassion and professionalism.