

A

**2018 Spirit of Caring Award**

Nomination Form — Please Type

---

**Deadline for Submission:** Friday, March 09, 2018

I nominate the following candidate for this award; I believe he/she exemplifies the characteristics for the Spirit of Caring Award.

Szymaszek	Sarah	B
Last Name	First Name	Middle Initial
RN – Home Health Care	Henry Ford Home Health Care	
Title	Organization Name/Place of Employment	
20300 Superior Road	Taylor	48180
Street Address	City	Zip
(734) 285-6853	N/A	
Work Telephone	Home Telephone	

<i>Education</i>			
School	Course of Study	Degree or Certificate	Year
Henry Ford Community College	Nursing	Associates	2005

<i>Home Care Employment Experience</i>		
Position Title	Organization	Years of Employment
Registered Nurse	Henry Ford Home Health Care	9 years

Nominated by: Marc Marry Agency: Henry Ford Health System

*The information provided above is for MHHA use only; the Award Committee will not see this information.*

***Important Directions***

Utilizing the criteria outlined on the previous page, describe why you think the nominee qualifies for the Spirit of Caring Award (*give at least three examples which demonstrate these characteristics*). **Using a separate sheet, please type your recommendation.** All nominees will remain anonymous to Award Committee members in the selection process. Please adhere to the following guidelines:

1. Do not submit on company letterhead.
2. Do not mention your agency's name in the body of the letter or the name of the individual; any nomination containing agency- specific information will be disqualified.

**Remember the nomination *must* remain anonymous.**

Please return this form by March 09, 2018 to: MHHA, 2140 University Park Dr., Ste. 220, Okemos, MI 48864

Phone: 517/349-8089

Fax: 517/349-8090

A

This nominee for the 2018 Spirit of Caring Award serves as a beacon of motivation for our home health care team, our patients, and our community. The following patient accounts shared by her peers demonstrate her passion for her patients and illustrate both the commitment and role we as home health providers hope to play in today's health care continuum.

Recently, an 80 year-old gentleman living alone came to us with a diagnosis of advanced lung cancer well beyond the point of additional aggressive treatment, chronic lower extremity wounds, and multiple cardiac and related co-morbidities. This nominee was providing pleural catheter drain management and wound care.

In spite of a nearly 50 year age gap, this nominee was able to find a common dialogue with the patient, a well-educated, well-travelled, but somewhat angry, man who was very used to having things his way. His health diagnosis was not part of how he envisioned his life's path. In spite of these challenges, the nurse was able to break through his rough exterior to have several very meaningful conversations regarding his wishes and the consequences of his choices. For possibly the first time in his life, the patient found a safe place where he could be vulnerable and comfortable with his choices.

For eight months, the nurse maintained the patient at home and, remarkably, kept him from readmitting to the hospital. She also recognized that he was at severe risk of isolation due to his condition, so she adeptly set up several team members over the course of his care for precepting on the care of his plural catheter. In all, six nurses learned this important skill, while allowing the patient an opportunity to regale them with the "better days" of world travels, food, and friends; a pastime that clearly brought him joy in the midst of his pain.

As expected, the disease and the physical complications progressed. The pleural cavity became difficult to drain and eventually became infected. Upon removal, it became evident that reinsertion of the catheter was not an option. The patient was essentially facing slow drowning in his cancerous fluid. He emphatically and repeatedly turned down hospice. Undaunted, this nominee took a palliative and holistic approach to his care. She gained buy in from the thoracic surgeon, and using great ingenuity and only her car supplies, successfully pieced together an ostomy system over the old chest tube site to catch the copious fluid drainage. Now, rather than living with wet dressings that would require several changes a day with assistance, the patient had an avenue to maintain his independence and dignity by learning to drain the bag on his own.

Eventually, his decompensation became too great and he succumbed to his illness, but thanks to this nurse's skills, advocacy, and compassion, she met the patient where he was, and creatively helped him walk his final journey the way he lived his life; his way, his time, and his terms.

This nominee was also taking care of a patient who had a plethora of issues and was doing everything she could to prevent the patient from being readmitted to the hospital. The patient had been hospitalized for over a year related to complications of an elective back surgery that had resulted in bilateral nephrostomy tubes, an ostomy, stage 4 pressure ulcer, DVT, and an above the knee amputation of his leg. The patient did not have a prosthesis yet, lived alone and had a challenging payer source that was limiting his ability to receive appropriate care. Additionally, his primary care physician had not seen him in some time and there were multiple medication discrepancies that required attention. The goal the patient identified was to remain at home and this nominee was determined to assist him in meeting this goal safely. This nurse was able to rally the support of a few distant family members to assist in portions of his care. She communicated with a physician who was willing to accept the patient's insurance, obtained orders and organized supplies for treatments the patient could afford. She worked with the DME company who was delayed in obtaining the prosthesis, battled with the insurance company for home visits and ultimately kept this patient in his home for over six weeks.

Shortly thereafter, this nominee was instrumental in expediting an expert appointment in identifying a colorectal fistula. She did a remarkable job pulling so much together and coordinated the team to help this patient get his life and direction back. When I spoke with her about it, she told me she missed seeing him and really missed the bright outlook he had developed. No doubt she had a lot to do with that! This nominee did more than care for this patient, she empowered him to reclaim his life.

From a young age, this nominee has always been an active volunteer in her community and serving the community is a vital part of her spirit of caring. When she started a family, she became increasingly involved in her children's school and church activities to teach them the importance of volunteering. Her interest in her community also led to a position on the Board for the Historical Society of that community, assisting with education and fundraising for the organization. Her life exemplifies not only a commitment to her profession, but also to her family, friends, faith and community.

She is determined to make a difference and improve every life she touches every day. She puts her best foot forward in all that she does. She truly exemplifies that "spirit of caring," and is most deserving of the 2018 Michigan Home Health and Hospice award.