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Alexia Baugniet
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Capstone Honors Paper:
**How Nonprofit Healthcare Organizations Differ and Compare based on Healthcare
Professional Responses**

Alexia Bagniet

CASH555- Honors CSDM Interdisciplinary Capstone

Dr. Nolfo-Clements and Professor Burke

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Introduction

As the demand for research increases over the years, healthcare will be in demand to improve. Currently, the effects of COVID-19 are bringing many questions to light in regards to the safety protocols in place in our various healthcare systems. In our world today, healthcare must be taken seriously, and programs should be put in place to help citizens better understand healthcare guidelines and safety protocols.

In attempting to discover my passion and motivation, Suffolk University provided me the resources and tools to pursue my education in relation to Healthcare Management. For this senior capstone class, the overall goal was to learn more about leaders within the oncology departments in hospitals. Originally, I wanted to learn more about leadership within the oncology departments in hopes of finding a centered career path in regards to oncology research. After contacting various professionals in the healthcare field, I adjusted my research to focus on a more generalized group of participants. The initial goal of my research was intended to detect similarities between the interviewee's professions. After conducting the interviews, it became apparent that those working for nonprofit organizations shared many opinions on healthcare as a whole. I will compare Kouzes and Posner's book "*The Leadership Challenge*" to the *interviewees responses*. The organizations mentioned in this research all relate in some way to the importance of the American healthcare system, most notably, the devotion of interviewees to their jobs and patients.

Background Information on Interviewees and Their Corresponding Healthcare Jobs

I had the privilege of interviewing four healthcare professionals. In this section you will learn about their educational backgrounds and experiences that led them to their current positions. When deciding who I wanted to interview, I first searched in the Boston area for

healthcare professionals with managerial roles. Due to COVID-19, this became difficult and these restrictions were lifted. The healthcare professionals that I interviewed all have different levels of experience, from very little to extensive amounts.

Joseph Jacobson, M. D., is a physician who trained in internal medicine and oncology hematology at Dana-Farber Cancer Institute. He received a bachelor's and master's degree in epidemiology and completed advanced training at the Intermountain Healthcare Institute for Healthcare Delivery Research. He then went on to medical school at Boston University, followed by a residency program at Boston Medical Center in Internal Medicine, finishing with a Fellowship at Massachusetts General Hospital in Medical Oncology and Hematology. After earning his degrees, he pursued a career in education and became an associate professor at Harvard Medical School, teaching resident students. Before becoming a professor in 1993, he became the quality improvement officer at Dana-Farber Cancer Institute and was promoted shortly after to Chairman of Medicine. Then he went back to school at Harvard University to obtain a Master Degree in Public Health. In 2003, he became the Medical Officer at the North Shore Medical Center. For about seven years he worked and created the hospice, critical care, palliative care program, and internal residency training program. In 2011, he was appointed the Chief Quality Officer at Dana-Farber, and recently retired from that position in February 2020. In addition, for eight years, he co-led a five-month project-based training program at Partners Healthcare that trained hundreds of clinicians in how to undertake quality improvement and patient safety projects. He currently mentors physicians and other clinicians in quality improvement, patient safety, system development measuring success in patient safety models to

standardize and improve care, and continues to create the needed capacity for broad training in quality improvement leadership locally and nationally.

Betty Harney is the Data Quality Enhancement Director at the Center for Health Information and Analytics (CHIA). Her education began at Bentley University in Waltham, MA, where she obtained an associate's degree in Accounting and finished with her bachelor's in Computer Information Systems. During her senior year she was placed into an internship at the Commonwealth of Massachusetts. She states that Bentley did not place many students in nonprofit agencies, but she was eager about this internship to gain knowledge in regards to "government-budget and funding coming from a tax revenue budget". That internship led her into a job as manager. Multiple years later at CHIA she decided that she wanted to pursue a graduate degree. After attempting to receive a fellowship from Harvard, Suffolk University was able to present her with a better opportunity that allowed her to start her Master's in Public Administration. About three years into the MPA, she had suffered a series of major medical incidents that prevented her from completing her MPA. Today she has recovered and works as a Peer Support Mentor at the Betsy Lehman Center helping patients find resources who had to experience medical errors. Today, she states she will return to finish those final classes in her MPA as her own personal goal before retiring.

Jillian Grembowicz is currently a Liaison for Program Development and Innovation in Gaming at St. Jude's Children's Research Hospital. She began her education at Bryant University in Business Administration in Marketing and she later pursued a Master's in Public Administration at Suffolk University to focus on Nonprofit Management. She had a data driven

consulting job during her MPA, but did not enjoy it. Her first job out of college was with St. Jude's Children Research Hospital in Boston as the Event Marketing Representative, later to become the Regional Development Representative II. After, she became the Senior Regional Development Representative. Due to her success in fundraising, headquarters hired her as the Youth Development Programs Specialist, to increase fundraised dollars for the entire organization. She then became the Sr. Specialist in Program Strategy and Content Creation, and the Gaming & Content Creator Accelerator. Remarkably she is not a video gamer, but is learning more about it through this job each and every day.

Cameron Joseph Smith is an Emergency Medical Technician (EMT) at Mercy Flight in New York. He started his education at the Massachusetts College Pharmacy Health Sciences in a Biology Pre-Med track, and finished his degree at Harvard University Extension School. Previously he had experience working for Fallon Ambulance Service and Cataldo Ambulance Service (Smith, 2020).

Methods

To obtain valuable information, I asked each participant the following interview questions in order to learn more about their positions and how they got there. This was done to see if there were correlations between their responses.

Interview Questions:

1. How did you end up in your career?
 - a. Education?

- b. Other places of work?
 - c. Interest/passions founded along the way?
2. What does a day look like in your job?
 - a. What are typical long-term projects or goals that you are working towards?
 - b. What are some of the day-to-day rewards and challenges within the program?
 - c. Is there a lot of forward thinking in your job/ or more day to day basis of work?
 3. Is your program/office's mission stable over time or has it evolved over time?
 - a. If it is changing, why? If stable, what helps to keep it that way?
 4. Briefly explain the organizational structure that encompasses your role.
 - a. To whom do you report? Do you have any direct reports and if so how many?
 5. What is the toughest external issue to the long-term success of your job? This is focused on the hospital and focusing on nonprofit/for-profit.
 6. Can you describe some of your successes and areas of pride within your area of work throughout your career?

Method Responses

This section provides the responses from each healthcare professional, and discusses the importance of their statements. Responses to question one were relayed in the background information section.

Question 2: What does a day look like in your job? What are typical long-term projects or goals that you are working towards? What are some of the day to day rewards and challenges within the program? Is there a lot of forward thinking in your job/ or more day to day basis of work?

Joseph Jacobson M.D.:

There are many projects that align with Dr. Jacobson's daily duties. The projects are set each year when 60 executive leaders set goals that go through an approval and planning process for several weeks. On October 1st, the fiscal year begins, and they can determine what can be afforded in alignment with hospital goals. Generally, ten to twelve projects are selected, and he was selected to lead a project each year to conduct research. In addition, each day entails seeing patients and taking part in meetings every morning with the departmental staff. When assigned to certain projects, various obstacles can arise. Examples of these obstacles are doctors being called into another research study, doctors leaving the hospital, and doctors having an external pressure, such as the current COVID-19 pandemic taking up a majority of their research time.

Betty Harney:

Mrs. Harney is currently doing research with a large IT vendor and working on various projects. She also collects data every day that is used to study outcomes, such as the opioid crisis and the impact of the Affordable Care Act on health delivery. This data allows for tracking and analysis of healthcare trends within the system. She currently volunteers at the Betsy Lehman Center, where she directs patients where to go and provides information on details in regards to the website. She mentioned that, when working with data, privacy is of utmost importance. In the interview, Mrs. Harney also discussed how the blame for inaccurate treatment of patients is unintentionally shifted to the medical system as a whole, because doctors are not all trained in-patient care.

Jillian Grembowicz:

Ms. Grembowicz is currently organizing an annual summit to livestream a gaming programming software with 350 online famous gamers. While she is not participating in the games herself, a gaming platform called 'twitch', will have a donation link prompted while influencers play against one another. While that seems out of the ordinary, it is known that people generally follow what they are interested in, and if they see their favorite gamers donating to a cause, they will tend to do the same. She described it as being similar to a domino effect. Every day they are adding new gamers and introducing new ideas on how to fundraise.

Cameron Smith:

Mr. Smith's job is similar each day, with the exception of different patients and different scenarios. Each morning, they do the same daily preparation of their stations and check to ensure that the equipment is up to date, however, the differences in patient calls vary each day. These various scenarios could potentially include saving someone's life on the spot, dealing with mental health emergencies, and taking someone from one facility to another for a higher level of specialty care. He mentioned that the pace was a lot faster while working in Boston as opposed to his current placement in New York.

Question 3: Is your program/office's mission stable over time or has it evolved over time? If it is changing, why? If it is stable, what helps to keep it that way?

Joseph Jacobson M.D.:

According to Dr. Jacobson, the mission has indeed changed. The current Dana-Farber Cancer Institute mission is

“To provide expert, compassionate care to children and adults with cancer while advancing the understanding, diagnosis, treatment, cure, and prevention of cancer and related diseases. As an affiliate of Harvard Medical School and a Comprehensive Cancer Center designated by the National Cancer Institute, the Institute also provides training for new generations of physicians and scientists, designs programs that promote public health particularly among high-risk and underserved populations, and disseminates innovative patient therapies and scientific discoveries to our target community across the United States and throughout the world” (Dana-Farber Cancer Institute, 2020).

Dr. Jacobson stated, “patient safety remains Dana-Farber’s main priority”, due to a major accident in the previous years. Previously, cancer research was the primary focal point in Dana-Farber’s mission. Then the notorious patient death, Betsy Lehman’s case, impacted Dana-Farber and forced a change in focus towards patient safety. He mentioned that this change enlisted international attention and almost shut the hospital down, leading to resignations of the CEO. He remarked that overall, “nothing stays still in healthcare”, inferring that new research and ways of performing patient safety will continue to develop.

Betty Harney:

The mission for CHIA is, “to be the agency of record for Massachusetts health care information, to responsibly steward sensitive and confidential data, and to objectively report reliable and meaningful information about the quality, affordability, utilization, access, and

outcomes of the Massachusetts health care system” (Center for Health Information and Analysis, n.d.).

Betty’s work crosses two organizations, with two different missions. The mission for Betsy Lehman Center (BCL) is to, “improve the safety of health care in Massachusetts” (Betsy Lehman Center for Patient Safety, 2020).

The mission of CHIA is changing due to alterations in regards to the overall vision, budget reasons and politics. In addition, external pressures play a huge role in CHIA such as adapting to President Obama's Affordable Care Act (ACA) and how it is paying for healthcare. The BCL mission is staying the same, but the ways to deal with scenarios are changing due to the ACA. The Affordable Care Act was to be able to allow associated American people on the federal poverty line to be able to purchase health care. The goal was to ensure that healthcare pricing can be lowered.

Jillian Grembowicz:

The mission for St. Jude Children’s Research Hospital is “to advance cures, and means of prevention, for pediatric catastrophic diseases through research and treatment. Consistent with the vision of our founder Danny Thomas, no child is denied treatment based on race, religion or a family's ability to pay” (St. Jude Children's Research Hospital, 2020).

St. Jude’s Children’s Research Hospital mission is to constantly adapt to new ways of fundraising for the children, in order to ensure that they do not have to pay for their treatments. Ms. Grembowicz then went on to confirm that 70 percent of the costs are being covered through donors and fundraisers. Her job particularly focuses on new innovative ways to fundraise. In the last three years they were able to fundraiser over \$3 million for the patients.

Cameron Smith:

The Mercy Flight mission statement is, “to be an independent not-for-profit provider of air medical transport and supporting services, ensuring rapid, safe, and cost-effective delivery of expert emergency response teams” (Mercy Flight, 2020).

According to Mr. Smith, the mission of Mercy Flight is to ensure that patient safety comes first and that patients are being responded to in a timely manner. As a nonprofit they host events to ensure they are reaching out and educating the community. They do this by hosting galas to fundraise and engage donors. Mr. Smith also went on to describe his volunteer experience, saying that the EMT’s frequently donate their time to teach kindergarten students about the EMS role.

Question Four: Briefly explain the organizational structure that encompasses your role? To whom do you report? Do you have any direct reports and if so how many?

Joseph Jacobson M.D.:

At Dana-Farber, the organizational structure is composed of leadership within departments who report to the CEO. Even though the CEO generally sets the tone of the organization, leadership also comes from his boss, who is on the Board of Directors. Dr. Jacobson noted that market forces play a vital role in the decisions that the Board of Directors make in regards to enforcing expansions and making hospitals become more competitive and stronger. An example that he highlighted was the Affordable Care Act, which helps to ensure that people can have a reduction in the price of healthcare.

Betty Harney:

Mrs. Harney as a director reports to the agency's senior team director, who reports to the CHIA's head director.

Jillian Grembowicz:

Ms. Grembowicz reports to her boss who is in charge of the Gaming Influencer Program. Overall there are thirty-seven regional officers implanting programs like hers consisting of events such as dinners and galas. These field officers are supported by the headquarters in Memphis, Tennessee, which include groupings such as the one she is in, called the Major Gift and Gift Planning. There is a National Executive Office which oversees those staffing organizations.

Cameron Smith:

As a member of emergency personnel, Mr. Smith reports to 911-dispatch or the fire department in the Village Springville, New York. He mentioned that in Boston, firefighters were obligated to go on a call, but in New York for this nonprofit they are not obligated.

Question 5: What is the toughest external issue to the long-term success of your job? This is focused on the hospital and focusing on nonprofit/for-profit.

Joseph Jacobson M.D.:

Dr. Jacobson mentioned that creating a goal and teams to do research could lead to 1/3 of the professionals moving, retiring or transferring to different hospitals. In relation to his profession, he stated that, when he was working for a for-profit, it was a “very different world”. He stated that he had to know the value of everything and that ruined the way he had to think about his goals, which then led him to pursue a job in a nonprofit organization.

Betty Harney:

Working with large IT vendors and having lots of data, can lead to obstacles in regards to funding, and may take longer to meet certain milestones. She mentioned “the lesson learned is that big, complex changes take time and sometimes multiple iterations of work”. In addition, she is able to help patients a couple days a week directing them to resources to help with their scenarios that they may have come across in a medical visit.

Jillian Grembowicz:

She stated that the competitors are the toughest external pressure on the organization, and highlighted Children’s Miracle Network Hospital as one of them. Overall, she mentioned Children’s Miracle Network Hospital and St. Jude are both amazing organizations, however, she prefers St. Jude’s mission, which ensures children and their families do not have to worry about costs and can get treatments. She mentioned that COVID-19 could break ongoing partnerships with new and old businesses who donate to the organization. This is due to donors not having the usual in-person events and meetings, to determine if St. Jude’s is the organization they would like to invest their money into. It could affect the hospitals monetary donations which affects the money the organization has to offer its patients.

Cameron Smith:

For the nonprofit he currently works in, donations are able to pay for the expenses if insurance was not to cover. He mentioned that if the funds do not come in, then the patients will have more loans and more debt to pay while simultaneously not being able to afford the care which saved their lives.

Question Six: Can you describe some of your successes and areas of pride within your area of work throughout your career?

Joseph Jacobson M.D.:

Dr. Jacobson, who has had plenty of experience and excellent career success, says that this is related to building something from nothing. As previously mentioned, while he was at North Shore Medical Center as the Medical Officer in 2003, he started the hospice and critical palliative care program, and an internal residency training program. He is very proud of these accomplishments, because he was able to make impactful changes in regards to safer practice techniques. Nine years later these changes are still in place.

In addition to this, he was funded by a donor at Dana-Farber to create a program called the “Dana-Farber Pathways”. This program allows for a tool to keep doctors updated in regard to the best treatments for each type of cancer and the various stages.

Betty Harney:

Mrs. Harney takes pride in her research being recognized at the national level, and is currently working on an even bigger project that can help tame the opioid crisis. In addition, she takes pride in her personal strength to apply to graduate school at her age, and still seeks to complete a masters even when retirement is around the corner for her.

Jillian Grembowicz:

Ms. Grembowicz takes pride in the organization that she works for by highlighting, “no family receives a bill and no family is turned away”. She loves working for this hospital and also takes pride in her ability to co-create this gaming fundraiser.

Cameron Smith:

Mr. Smith stated that he loves going to work and takes pride in knowing that he can be there for someone. He made the remark, “being a complete stranger and having patients excited to see you, because you're there to help, makes you feel good”.

Take Away from Responses

Overall, I noticed similarities pertaining to leadership styles in nonprofit organizations versus for-profit organizations, especially when it comes to the importance of healthcare and external pressures. When interviewing these individuals, trends between the interviews became apparent. The amount of education they had allowed them to access more opportunities such as managerial roles. In addition, Mrs. Harney and Ms. Grembowicz had similarities with regard to their work being impacted due to external factors. All interviewees mentioned the importance of working for a nonprofit organization, and stated how money is not the key to their motivation.

They are there because of their devotion to their jobs and their patients. All of them displayed passion for their careers, which were brought on through their previous education and experiences.

In Kouzes and Posner's textbook, "The Leadership Challenge", there are multiple discussions of the leadership obstacles in nonprofits and for-profits. As mentioned by the interviewees, they prefer to work within a nonprofit because they are able to feel good about what they are doing and are aware that the money is going to a charitable cause with which they have a passion for. In chapter thirteen of this textbook, *Leadership is Everyone's Business*, it strongly expresses there is a need for passion in the job with which you associate yourself with. The first quote stated from Tara Church in this chapter remarks, "Don't ever let anyone tell you that you can't make a difference" (Kouzes & Posner, 2007). In relation to the interviewee's responses, Cameron Smith says it well himself, "Nonprofit is better because no one is out to get one another and better comradery. Having a goal. No one is becoming a millionaire of this company. We are in it together".

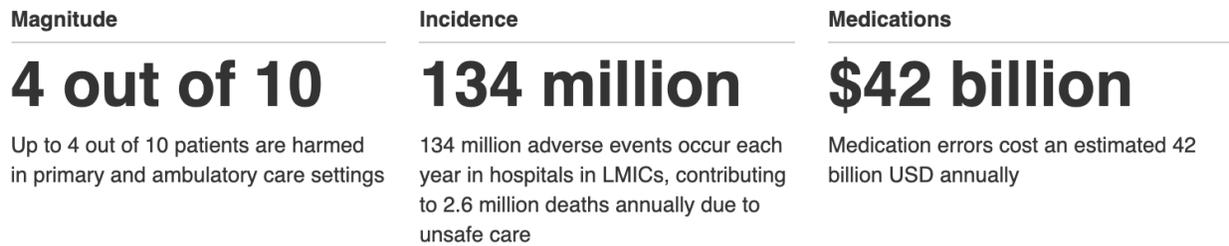
Healthcare importance and the deviations of the interviewees reflected on all of their healthcare organizations mission statements. According to the World Health Organization, patient safety is defined as

"Patient safety is the absence of preventable harm to a patient during the process of healthcare and reduction of risk of unnecessary harm associated with healthcare to an acceptable minimum... Clear policies, organizational leadership capacity, data to drive safety improvements, skilled health care professionals and effective involvement of patients in their care, are all needed to ensure sustainable and significant improvements in the safety of health care" (World Health Organization, 2020).

Patient safety is so important because we need to ensure there is a way to avoid medical errors.

According to Figure 1, it shows that “2.6 million deaths annually are due to unsafe care” (World Health Organization, 2020).

Figure 1: *Magnitude, Incidence, and Medications Effect on Patient Safety* (World Health Organization, 2020).



In reflection, Dr. Jacobson talks about Dana-Farber’s patient safety accident that could have almost closed the doors down for the hospital. The Betsy Lehman Center describes the incident stating,

“Nearly 25 years ago, Betsy Lehman, a reporter and mother of two young girls, was battling breast cancer. While in the hospital, her care team made a series of fatal mistakes, giving her four times the intended dose of a powerful chemotherapy drug. Her death at age 39 catalyzed a national movement to improve patient safety” (Betsy Lehman Center for Patient Safety, 2020).

This organization is the one in which Betty Harney works on behalf of those who are in medical errors cases. Overall, it is important to acknowledge healthcare organizations' missions stress the importance of decision making. Kouzes and Posner state, “Without trust you cannot get extraordinary things done” (pp. 224, 2007). Trust is so valuable in a company or any organization you become a part of. If no one can trust each other, how can patients trust that their healthcare data and their lives are safe when seeking healthcare expertise? Ms. Grembowicz

additionally discusses how she does not work directly with patients but is doing her work to ensure that patients are able to receive the best care while not having to worry about the cost at St. Jude.

Conclusion

Now that I have performed this research and written this capstone, I learned about leadership from Kouzes and Posner book and its importance and connections to the interviewees leadership. The book proved to have value to my conclusion drawn from this research in regards to focusing on clients and patients instead of the amounts of money they could make.

It can be concluded from this research that nonprofits are preferred by the interviewees. COVID-19 is causing uncertainty within the healthcare departments and safety protocols. Moving forward, we can only hope the number of cases decreases in the coming weeks. The future will most likely put new protocols in place, due to this virus and the sanitary and safety protocols are most likely going to change from here on out. Alterations to the number of visitors, temperature screening, and use of disinfectant before going inside the healthcare facilities will have to be implemented, and should have been implemented prior to this pandemic. Overall, everyone learns from mistakes, and still has many lessons to be learned. The four interviewees were able to prove that between the various areas of patient care, there are many similarities in regards to working together to ensure that America's health performance only enhances over time.

It is appropriate to include information in regards to the COVID-19 pandemic and how this will change healthcare moving forward. Mrs. Harney brought up in the interview how COVID-19 may lead to another research opportunity in regards to data collection, but she could

not speak further on it. In regards to Dr. Jacobson's interview, near the end of our meeting he mentioned how COVID-19 has put a hold on the research and switched roles for a lot of the physicians to assist with the number of patients in the hospital. For the future he could not mention much because he said the focus is on now and how to control the virus. Ms.

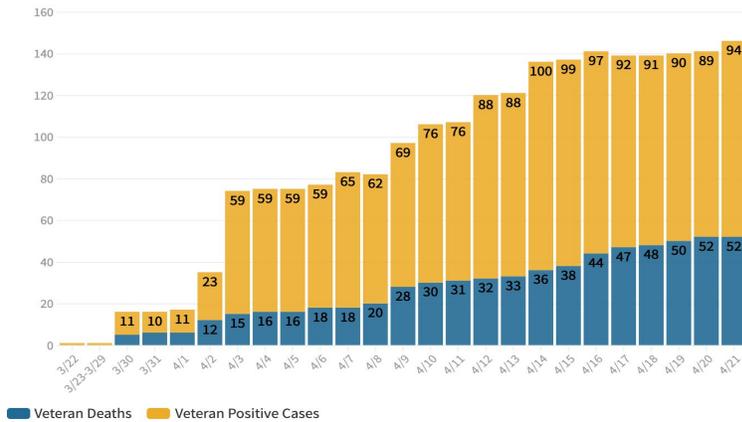
Grembowicz external pressure response remarked how COVID-19 could affect monetary donations. Unfortunately for Mr. Smith he was diagnosed with the coronavirus, but with his passion for work he was able to recover, test negative and head back to work to help more patients.

I have learned what happens when we are not devoted to patient care, due to the tragic lack of care during this pandemic, at the Soldier's Home in Holyoke. However, my interviewees are not like that and discuss patient care, concerns and how to perform smart healthcare. One worker, at the Soldiers' Home in Holyoke, Mr. Ablordeppey, recently stated, "It's sad and empty. Emotionally, it's not a place where I want to be ... We're losing veterans every day because it spread all over the building" (Wasser, 2020). The overarching theme seems to be that widespread death is occurring within the facility. Figure 2, published by WBUR research, shows the amount of veterans' deaths and cases tested positives for the veterans in the Holyoke shelter as of April 21, 2020. The tragic number of deaths is still on the rise at Holyoke.

Figure 2: *Coronavirus Cases at the Holyoke Soldiers' Home* (Wasser, 2020)

Coronavirus Cases At The Holyoke Soldiers' Home

On March 22, the Holyoke Soldiers' Home reported its first veteran resident tested positive. Since then, the number of cases and deaths have continued to grow.

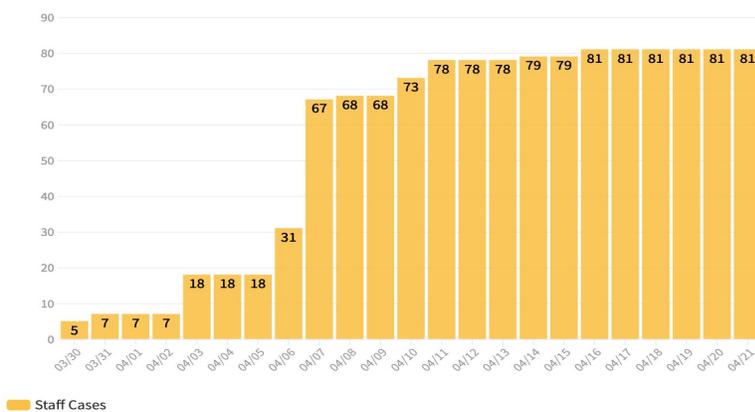


While there are hundreds of veterans dying around the country, it questions what precautions could have been in place to avoid this earlier, rather than later. As of now, Holyoke has assistance from the National Guard, and announced on April 22, 2020 they were hiring Certified Nurse Assistants and Licensed Practical Nurses to assist (Soldiers' Home in Holyoke, n.d). They most likely needed this support due to the large percentage of staff that have been diagnosed, as seen in Figure 3 (Wasser, 2020).

Figure 3: *Coronavirus Cases Among Staff at the Holyoke Soldiers' Home* (Wasser, 2020)

Coronavirus Cases Among Staff At The Holyoke Soldiers' Home

The Soldiers' Home in Holyoke began reporting how many staff had tested positive for the coronavirus on March 30.



This data questions the amount of personal protective equipment that the staff has available to them. A staff member stated, “Quarantine zones for COVID-19 positive residents, enforcing use of PPE and monitoring supply, and ensuring increased disinfection protocols” (Wasser, 2020). This quote infers the amount of supplies provided to the Holyoke shelter need to increase, due to the vast amount of healthcare professionals getting sick. As seen in the previous figures, the number of cases are starting to plateau. This is most likely due to the enforcement of the National Guard assistance and the Holyoke Medical Center, which takes in patients that have been tested positive for COVID-19.

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