



80 years of rebuilding lives

# 1941

LIVE • GROW • CARE • GIVE • SERVE

# 2021



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# 80 years of rebuilding lives

We were founded in 1941 to meet community health needs in a time when tuberculosis and then polio threatened the well-being of individuals and families. The most difficult times remind us to focus on the essentials:

## Live | Grow | Care | Give | Serve

These simple principals have served us well through 80 years of growth, change and innovation. The foresight of our founding families ensured that Hospital for Special Care would stand the test of time. The remarkable dedication of the generations of caregivers who have followed in their footsteps made certain we were equal to all of the challenges we would face, including the COVID-19 pandemic.

Our early leaders proudly secured what, at the time, was still considered state-of-the-art therapy for polio patients in the 1950s — the iron lung. Today we celebrate the highly effective and innovative approaches our multidisciplinary COVID-19 recovery unit developed to support patients severely impacted by the novel coronavirus. We celebrate the ways they have used lessons learned during the pandemic to enhance patient care throughout the hospital. The same high flow oxygen delivery system introduced for COVID-19 patients helped a little girl from our pediatric unit successfully discharge home to be with her family after 14 years in our care.

We have cherished each bright moment in the last two years, even when our fears seemed determine to overwhelm us. Adversity may have seemed insurmountable at times, and some days our steps may have faltered, fatigue may have given rise to doubts, yet together we have risen above each challenge. Our patients and their families have helped us maintain perspective. Our teams have supported one another in word and in deed. Our community has offered their protection and support — making personal protective equipment to keep us safe in the hospital and at home.

So we carry on and we learn to live with a new reality that requires a communal focus on public health and responsibility for our neighbors. We also continue to grow, advancing clinical research for ALS and autism, expanding access to health care through unique new services and emerging technology. We continue to care, exceeding benchmarks for clinical outcomes, patient safety and patient satisfaction measures. We continue to give, rallying philanthropic support for critically needed programs and establishing an employee financial assistance fund to get one another through the hard times. We continue to serve, choosing each day to invest in the greater good.

We thank each of you for choosing to serve with us. Your unique strengths and contributions make Hospital for Special Care a vibrant community that will thrive for decades to come, rebuilding lives in so very many ways.

**Lynn Ricci**, *President and Chief Executive Officer*  
**Diane R. Chace, Esq.**, *Board Chair*



*Diane R. Chace, Esq.*

# Live

## Founding Families

**M**ayor George J. Coyle and Dr. William J. Watson founded the New Britain Rest Home in 1941. The home served as a place of rest for patients with tuberculosis and later served as the primary facility for area victims of the polio epidemic.

The Daughters of Mary of the Immaculate Conception provided patient care at the facility, which became known as New Britain Memorial Hospital in 1943. Rehabilitation programs began in the 1950s, at a time when the iron lung was considered state of the art respiratory therapy. The organization continued to grow to meet community needs for specialized health care, becoming a long-term acute care hospital in 1980 and becoming known as Hospital for Special Care in 1993.

Advances in clinical research specialized care and technology have propelled our mission to rebuild lives through the decades. Today, the continuous involvement and commitment of our founding families, including the Coyles, Watsons, and Daughters of Mary of the Immaculate Conception continue to drive our mission.

Diane Chace, Hospital for Special Care Board chair, carries her grandfather's (Mayor Coyle's) dedication to community forward each day in her volunteer role at HFSC. Much like her mother, Judith Chace a former board member and current corporator, Diane has devoted a lifetime to the organization.

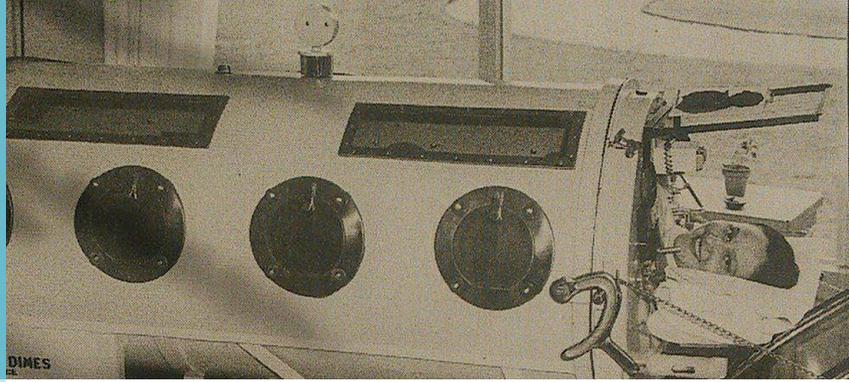


Mayor George J. Coyle



Dr. William J. Watson

1941



1951

Dr. Watson's legacy at Hospital for Special Care is also carried forward by multiple generations of the Watson family. Jim Watson, a long-standing Board member, has been joined by his son and fellow Board member, Mark Watson, MD, in leading HFSC's contributions to community health. Kevin Watson, MD, brings state of the art respiratory care to HFSC patients as Chief of Pulmonary Medicine. Each serves as a hospital corporator. Family members Meaghan Sengle, Christian Watson and William J. Watson, III also serve as corporators for Hospital for Special Care.

1961

The Daughters of Mary of the Immaculate Conception, once the first nurses on the New Britain campus, have become friends for generations. Mother M. Jennifer Carroll stewarded the relationship until her passing in 2020, providing a home for the hospital's growing programs at the former Mary Immaculate School, and providing critical moral and financial support in times of difficulty. Today, Mother Janice Zdunczyk continues the tradition as HFSC celebrates 80 years of rebuilding lives.

1971

2021



# Grow

**Joseph Duddy** is one of many Hospital for Special Care patients with amyotrophic lateral sclerosis (ALS) participating in the Healey ALS Platform Trial Open Label Extension. He has been receiving CNM-Au8 for the past year.



## Key Accomplishments:

Challenging times have never slowed the pace of innovation at Hospital for Special Care. Our pursuit of excellence continues to drive growth in both clinical care and research:

### Charles H. Kaman Foundation Neuromuscular Center

- Selected as the only Connecticut HEALEY ALS Platform trial location. Based at the Sean M. Healey & AMG Center for ALS at Massachusetts General Hospital, the nationwide HEALEY ALS Platform trial is accelerating the path to new ALS therapies by testing multiple treatments at once, reducing the cost of research, decreasing trial time and increasing patient participation.

- Chosen as one of only three sites nationally for a U.S. Food and Drug Administration expanded access program to provide ALS patients who are not eligible to enroll in the **HEALEY ALS Platform trial access to CNM-Au8**, an investigational cellular energetic catalyst that supports energy production.
- Received Laboratory Accreditation with Exemplary status from the American Association of Neuromuscular & Electrodiagnostic Medicine (AANEM).
- Designated by National Committee on Quality Assurance as the nation's only Patient-Centered Specialty Practice (PCSP) for Parkinson's Disease.
- Designated by National Committee on Quality Assurance as the nation's only Patient-Centered Specialty Practice (PCSP) for Autism. HFSC has achieved the highest level of PCSP recognition.
- Opened an expanded Autism Inpatient Unit, featuring 12 private rooms, and Connecticut's only Partial Hospital Program for children and youth impacted by ASD, creating a step-up or step-down level of care and significantly expanding statewide treatment capacity with support from donors and the State of Connecticut. The building opened ahead of schedule despite the pandemic.

## Autism Center of Excellence

- Selected by Autism Speaks for Autism Learning Health Network. The network convenes academic leaders in autism and other neurodevelopmental and intellectual disabilities nationwide to standardize and share clinical data collection and outcomes research to improve care for children and families affected by autism spectrum disorder.
- **Recognized by Stanford University Clinical Excellence Research Center as among the top four autism programs in the United States, specifically cited for excellence in coordination of care.**

## Patient-Centered Assistive Technology Program

- Selected by Voice for Joanie to carry on the non-profit's legacy of loaning assistive communication devices to patients with ALS, expanding the HFSC Patient-Centered Assistive Technology program significantly through a contribution of more than \$250,000 in equipment and technology.



# Hospital for Special Care

Recognized as a Hartford Courant Top Workplace since 2013, including 2020 and 2021.



Partnered with Bloom Energy to commission a 600 kilowatt fuel cell installation at the hospital's main campus, reducing the organization's environmental impact, CO2 emissions and water consumption.

Designated as one of **150 New Britain Gems** as the city celebrates its sesquicentennial.



# Financial Health

Ensuring the financial resources required to support our mission.

## Consolidated Statement of Operations and Changes in Net Assets

<b>Year Ended March 31</b>	<b>Audited 2021</b>	<b>Audited 2020</b>
Net revenues from services to patients	\$105,987,377	\$108,475,415
Bad debts	\$193,993	\$906,136
Other revenue	\$7,120,559	\$4,067,386
<b>Total Revenue</b>	<b>\$112,913,943</b>	<b>\$111,636,665</b>
Salaries, wages and employee benefits	\$82,645,846	\$80,387,613
Supplies and other	\$21,207,463	\$21,801,588
Interest	\$1,138,578	\$1,178,999
Depreciation and amortization	\$6,740,536	\$5,431,820
<b>Total Operating Expense</b>	<b>\$111,732,423</b>	<b>\$108,800,020</b>
Income from operations	\$1,181,520	\$2,836,645
Investments	\$6,541,668	\$4,580,316
<b>Increase in Unrestricted Net Assets</b>	<b>\$7,723,188</b>	<b>\$7,416,961</b>

## Consolidated Balance Sheet

<b>As of March 31</b>	<b>Audited 2021</b>	<b>Audited 2020</b>
Cash and cash equivalents	\$15,222,071	\$9,066,506
Investment securities	\$83,345,206	\$64,885,568
Accounts receivable	\$18,135,171	\$17,869,998
Property, plant and equipment	\$58,445,584	\$53,422,229
Other assets	\$8,024,854	\$8,665,497
<b>Total Assets</b>	<b>\$183,172,886</b>	<b>\$153,909,798</b>
Accounts payable	\$4,527,847	\$4,400,924
Salaries, wages and other accruals	\$8,573,875	\$7,320,795
Other	\$13,294,767	\$15,055,240
Long term debt	\$36,173,041	\$37,868,124
Net assets without donor restrictions	\$116,410,475	\$85,105,539
Net assets with donor restrictions	\$4,192,881	\$4,159,176
<b>Total Liabilities and Net Assets</b>	<b>\$183,172,886</b>	<b>\$153,909,798</b>

# Care

Rebuilding lives: COVID-19



Our doors opened in response to the savage toll tuberculosis had on the residents of central Connecticut. Our caregivers opened their arms to care for patients afflicted by polio.

Our mobilization in the face of the COVID-19 pandemic reflected the values we've shared for 80 years. Recognizing the unique vulnerabilities of the medically complex pediatric and adult patients in our care, Hospital for Special Care was the first facility to restrict visitors to reduce the spread of the novel coronavirus. Led in collaboration with a robust team of infectious disease prevention and control clinical experts, our Incident Command immediately took steps to ensure the safety of patients, employees and community program participants.

**We loaned ventilators to acute care hospitals across Connecticut to ensure intensive care units had the equipment they needed to treat patients in distress.** We launched telehealth services to provide continuity of care to patients with Autism Spectrum Disorder, amyotrophic lateral sclerosis (ALS), Parkinson's Disease and other disorders, who suddenly found themselves completely isolated. We reallocated staff resources to connect patients and their families through virtual and window visits. We operated at surge capacity for over a year, caring for more patients than ever before.



HFSC also opened a dedicated COVID-19 recovery unit to provide critically needed intensive rehabilitation, ventilator weaning and supportive care for the patients most severely impacted by COVID-19 infection. Patients admitted to the unit reflected the health disparities that COVID-19 helped bring into the national spotlight: patients of color and patients from poorly resourced communities came to us with a higher prevalence of comorbidities, complicating their recovery.

Working together, our experienced team of physicians, nurses, pharmacists, psychologists, respiratory, physical, occupational and speech therapists developed safe and highly effective treatment protocols for recovering COVID-19 patients. Every staff member, from pulmonologists to environmental service team members, followed extensive safety and personnel protective equipment regimens. These thoughtful efforts supported patients in reaching functional and clinical recovery goals, overcoming the disparities present upon **admission**.

HFSC also advocated successfully for patients to be included in the very first round of vaccinations. Our nurses, pharmacists and physicians, vaccinated patients, team members and our community.

# We rebuild families.

Hector Laureano



“The whole team worked together to give me my life back, they are all a part of my recovery.”

**Hector Laureano** was one of the patients who came to Hospital for Special Care's COVID-19 recovery unit following his discharge from the intensive care unit at an acute care hospital.

He'd been separated from his wife and children for weeks at that point, and would not see them again in person until his discharge from HFSC.

“We talked on the phone. I didn't want to video chat, I didn't want them to see me with all of the tubes and contraptions,” said Hector. Hector's family struggled with the separation as his wife Lisa and their two sons also recovered from COVID-19 infections at home.

Hector, a mental health worker for the Connecticut Department of Mental Health and Addiction Services, understands better than most that every person in a hospital is a part of the patient care experience. “I am so grateful to everyone at Hospital for Special Care, from the maintenance and food service staff, to the therapists, and nurses and doctors,” he said. “The whole team worked together to give me my life back, they are all a part of my recovery.”



[Click Here to See Hector's Story](#)



Sedaya Mayfield



We rebuild hope.

**Sedaya Mayfield** was six months old and weighed barely five pounds when she was admitted to Hospital for Special Care (HFSC) in New Britain. Born with Larsen's Syndrome, a disorder of the development of the bones caused by a genetic mutation, Sedaya was the smallest baby admitted to HFSC at the time. She has undergone more than 20 surgeries to address abnormal curvature of the spine and other challenges associated with the disorder, including multiple orthopedic deformities.

Sedaya's small chest and lungs, combined with her small stature and the curvature of her spine have resulted in respiratory challenges. She relies on a power wheelchair for mobility, has a tracheostomy (a hole in the front of her neck and into her windpipe created surgically to provide an air passage) and requires high flow oxygen therapy at night to improve her oxygenation.

Hospital for Special Care's pediatric unit, the only long-term acute care unit for children in Connecticut, had been her home since her 2007 admission. The physicians, nurses, respiratory therapists and staff on the unit provided 24/7 medical care for Sedaya and also nurtured her growth and development.

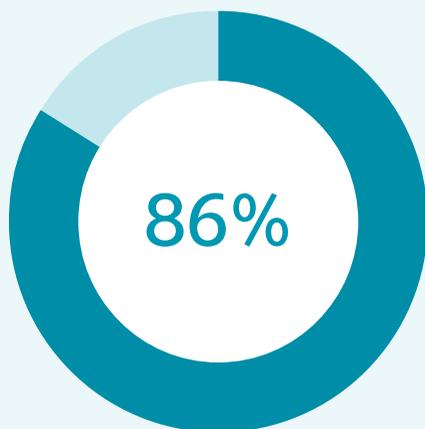


# Infinite Hope

Our community, our world, has lost so many bright lights throughout the COVID-19 pandemic. Each will live in our hearts always and to honor them we will look toward tomorrow with infinite hope.

Hospital for Special Care collects, assesses, analyzes, benchmarks, reports and responds to thousands of unique pieces of information every day, even every hour. Data informs our clinical decisions, our resource investments and our staffing configurations and has a direct impact on each patient's well-being and experience of care – and leads to outstanding functional outcomes.

Our patients achieve  
86% of functional goals  
prior to discharge.



Our commitment to data did not change during COVID-19, however our appreciation for different kinds of measures and their impact on patient outcomes grew immensely.

**1,000,000**  
missing smiles for each  
year of the pandemic



Hiding smiles and other facial expressions behind surgical masks threatened to impact healthy development for pediatric patients. Determined staff learned to be even more expressive with their eyes, hand gestures and body language to support continued development of non-verbal communication skills.

**100:1**  
the value ratio of virtual  
visits to in-person contact

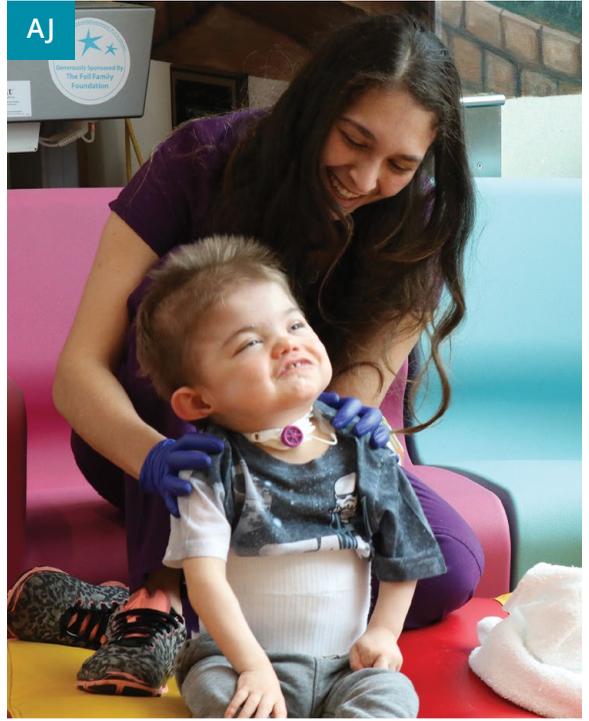


Patients and families exercised immense patience and understanding when in-person visits were suspended to keep patients safe from COVID-19. Virtual visits helped — and there were thousands of them — but all agree: one hundred virtual visits cannot replace one hug from someone you love.

# Going Home

It can take several years for a baby's lungs to grow strong enough for successful ventilator weaning and some children stay on the pediatric unit through their toddler years.

COVID-19 infection prevention requirements made the separation even more difficult for many families in 2020 as virtual and window visits temporarily replaced the hugs and cuddles families usually enjoyed. Families have now been reunited on the pediatric unit and many have welcomed their children home this year.



# Patient Safety

The U.S. Centers for Medicare & Medicaid Services (CMS) track key quality measures for Long-Term Acute Care Hospitals (LTCH) to ensure patient safety. Many of these measures are also endorsed by the National Quality Forum, an organization dedicated to the selection of performance measures for federal health programs. Hospital for Special Care reports data directly to CMS and also to the U.S. Centers for Disease Control and Prevention National Healthcare Safety Network.

Hospital for Special Care meets or exceeds national benchmarks for 11 of 12 CMS standards for the most recent reporting periods (quarters one and two of calendar year 2021), including:

**Hospital for Special Care's 30-day post-discharge unplanned readmission rate is more than 15% lower than the National Observed Readmission rate.**

## **What does this mean for patients?**

Inpatient care and effective discharge planning ensure that our patients have achieved functional goals and have the supportive services they need in the community on discharge. This means they are less likely to have to go to the hospital or emergency room for an unplanned admission after they leave our care.

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**Hospital for Special Care exceeds national benchmarks in keeping patients free from infections that are common complicating issues for patients at our level of care. This includes Catheter-Associated Urinary Tract Infection (CAUTI), Central Line-Associated Bloodstream Infection (CLABSI) and Clostridium Difficile Infection (CDI).**

## **What does this mean for patients?**

Our comprehensive infectious disease prevention strategies keep our patients safe from infections that can prolong their recovery and decrease quality of life. The expertise of our infectious disease prevention specialists also helped Hospital for Special Care keep highly vulnerable patients safe throughout the COVID-19 pandemic.

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**Hospital for Special Care exceeds national standards for protecting patients from skin integrity changes that can result in pressure ulcers or other injury, a common problem in post-acute care for patients with limited mobility.**

## **What does this mean for patients?**

Extensive clinical attention to wound care, and an ongoing commitment to professional development for all patient care staff focused on keeping skin healthy, mean our patients are 10% less likely to suffer new pressure ulcers or other skin injuries than patients at other LTCHS across the country.

# Give

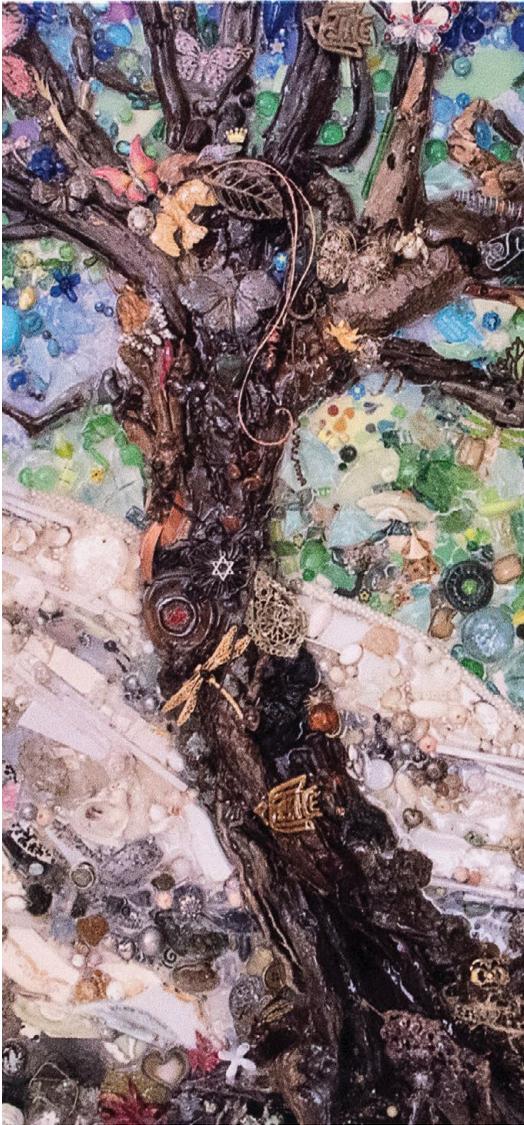
## Special Thanks

Sincere gratitude to the countless hands and hearts who made and donated thousands of face masks, face shields, ear protectors, bonnets, headwraps and more to protect our patients and staff throughout the COVID-19 pandemic.

Heartfelt thanks to the individuals, restaurants, grocery stores, delicatessens, community groups and so many others who nourished our bodies and souls through the most challenging days... and nights... weekends... and holidays.



# In a Still Moment... Imagine



Dedication November 1, 2020  
Art installation by Diana Lyn Coté

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**For even a moment, in the stillness of a quiet mind, and with an open heart, Nature can inspire the imagination to create, and to heal.**

Ephemeral murals painted in brilliant colors across the sky by the sun, the source of warmth, the source of life.

Firm roots clutch the earth silently reaching with determination, and with resilience, over obstacles, and over time.

As water flows without resistance, surrender to a personal journey of ease.

Nature's spirit is within us all exuberant joy, love, energy, propelling us forward, connecting us all.

Commissioned by Elliot and Lorna Ginsberg for Hospital for Special Care's Neuromuscular Center, this original art installation by Diana Lyn Cote brings a still moment, a moment of beauty and reflection to our patients, their families and our team members. Elliot's spirit lives on in each individual who is touched by the installation.



# Superheroes for Autism



## You are all heroes in our eyes.

We extend our sincere appreciation to the State of Connecticut and to all of the superheroes who came together to expand access to critically needed, high quality care for children and families impacted by Autism Spectrum Disorder. Your generosity makes it possible for our one of a kind inpatient and partial hospital programs to achieve outstanding outcomes for children and families across Connecticut.



# Serve

## Servant Leadership

Servant leadership, a leadership philosophy originating with Robert Greenleaf's 1970 essay, "The Servant Leader," emphasizes service to individuals and teams and puts people ahead of power. It's a leadership philosophy adopted within many nursing teams and one that reflects Hospital for Special Care's values. We've come to appreciate these principals even more throughout the COVID-19 pandemic and have been fortunate to find volunteers, advocates and friends who ascribe to them as well.

1. Listening
2. Empathy
3. Healing
4. Self-awareness
5. Persuasion
6. Conceptualization
7. Foresight
8. Stewardship
9. Commitment to the growth of people
10. Building community



# Our Board 2020–2021

## Center of Special Care, Inc.

**Diane R. Chace, Esq.,**  
Chairman

**Brian Tevnan, CPA,**  
Vice Chairman

**Ronald Buccilli, Psy.D.**

**Michael Genovesi, M.D.**

**Thomas Goetter**

**David Kelly,**  
Immediate Past Chairman

**John C. King, Esq.**

**Angelo Messina, CPA, Esq.**

**Lynn Ricci, FACHE**

**William Schuch**

## Hospital for Special Care

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**Ashley Calabrese**

**Mother Mary Jennifer Carroll†**

**Alfred DiVincentis, Esq.**

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**Mark D. Watson, M.D**

† – Deceased

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**Charles W. Boos**

**Diane R. Chace, Esq.**

**Jennifer DiBella, Esq.**

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Vice Chairman

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Chairman

**Barbara Kirecczyk,**  
Vice Chairman

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**James Massi, M.D.**

**Steve Parker**

**Lynn Ricci, FACHE**

**Marion Sgroi-Varano**

## CSI Residential, Inc.

**Diane R. Chace, Esq.,**  
Chairman

**Richard E. Feitel**

**Elizabeth K. Fumiatti, RN**

**John C. King, Esq.**

**Lynn Ricci, FACHE**

**William Schuch**

**Brian Tevnan, CPA**

# Our Leadership

**Lynn Ricci, FACHE**  
President and CEO

**William J. Pesce, DO**  
Senior Vice President,  
Chief Medical Officer

**Felicia DeDominicis, JD**  
Senior Vice President, Legal Affairs  
Corporate Compliance Officer

**Laurie Rudman**  
Senior Vice President, Finance  
Chief Financial Officer

**Denise A. Anderson, EdD, RN-BC**  
Vice President, Chief Nursing Officer

**Stanislaw Jankowski, MBA**  
Vice President, Chief Information Officer

**Nancy M. Martone, MS, SPHR, SHRM-SCP**  
Vice President, Chief Administrative Officer

**Wendy DeAngelo, FACHE**  
Vice President, Development and Communications

**Jennifer Farley, RT (R)(M), MBA**  
Vice President, Quality Patient Safety Officer

**Jeff Lawton**  
Vice President, Facilities and Hospitality Services

# Our Medical Leadership

**Kevin J. Felice, DO**  
Chief of Neuromuscular Medicine

**Marcy L. Goldstein, MD, FCCP**  
Interim Chief of Medicine  
Medical Director, Cardiac Medical Unit  
and Hartford Satellite Unit

**Lauren Herlihy, PhD**  
Director of Autism Psychology

**Dennis Johnston, PhD\***  
Director of Neuropsychological Services

**Hassan M. Minhas, MD**  
Chief of Autism Services

**Saboo Mubbashar, MD**  
Medical Director, Autism Inpatient Unit

**Brenda Nurse, MD, CWS,  
FACCWS, FACP, FIDSA, FSHCA\***  
Chief of Infectious Diseases and Infection Prevention  
and Control, and Director, Medical Education and  
Graduate Medical Education

**John Pelegano, MD\***  
Chief of Pediatrics

**William J. Pesce, DO**  
Senior Vice President, Chief Medical Officer  
Chief of Physical Medicine and Rehabilitation

**Dennis L. Rosati, MD\***  
Medical Director, Brain Injury Service  
and Neurobehavioral Units

**Colette Seter Elliott, PhD**  
Program Director, Neurobehavioral

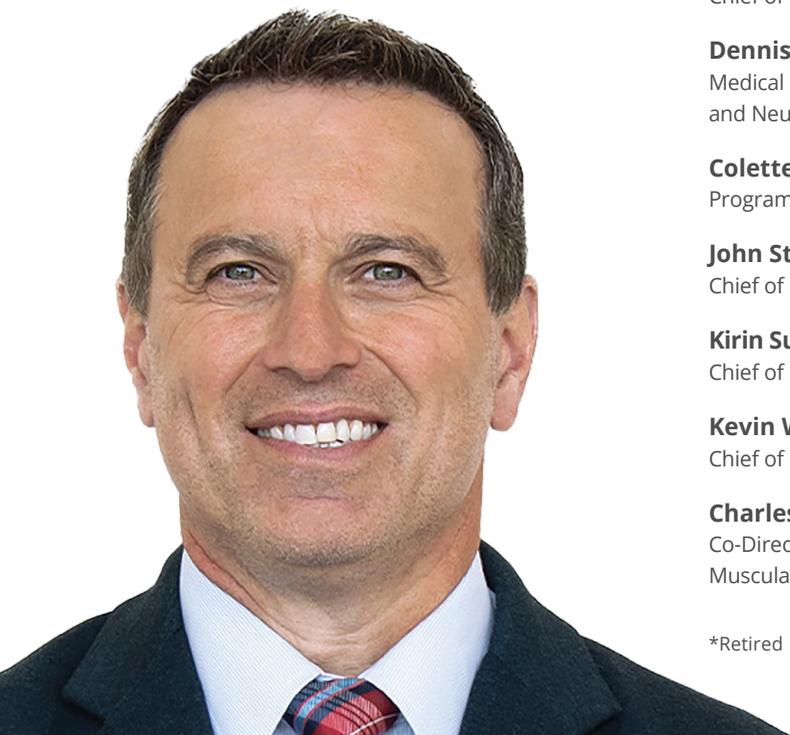
**John Stanwood, PhD**  
Chief of Psychology

**Kirin Suri, MD MPH**  
Chief of Pediatrics

**Kevin Watson, MD**  
Chief of Pulmonary Medicine

**Charles Whitaker, MD**  
Co-Director, Neuromuscular Center Medical Director,  
Muscular Dystrophy Clinic for Children

\*Retired



# Welcome

**Alina R. Alfirii, MD**

Infectious Diseases Specialist,  
Internal Medicine

**Scott Leopold, MD**

Pediatrician

**Leanne P. Price, PsyD**

Clinical Psychologist

**Anthony Rinaldi, PhD**

Co-Director, Center for Cognitive  
Health, Neuropsychologist

**Natalie Sajkowicz, MD**

Medical Director, Brain Injury  
Service and Neurobehavioral Units

**Perry Staltaro, PsyD, JD**

Neuropsychologist



## Nightingale Award for Nursing Excellence

Congratulations to our six Nightingale Awardees, an award for nurses who have gone beyond the call to provide excellent care to patients, to mentor other nurses, and who have a strong sense of community.



**Danielle Dombkowski,**  
MSN, RN, CNL



**Karina Slattery,**  
RN



**Jeanne Thomas,**  
EdD, MSN, RN, NPD-BC



**Alyssa Hammond,**  
RN, BSN, MSN



**Angel Preece,**  
RN, ADN



**Lurine Mack,**  
LPN



Hospital for  
Special Care

We rebuild lives.

2150 Corbin Ave, New Britain, CT 06053

[www.hfsc.org](http://www.hfsc.org)