FOUNDER MARK BAIADA SURPRISES EMPLOYEES WITH $20 MILLION

Mark Baiada announced his Gift of Gratitude to employees as part of his ‘Lasting Legacy’ Plan

Prior to BAYADA's transition to nonprofit and to show gratitude to BAYADA employees for the meaningful work they do, Founder Mark Baiada surprised employees with a $20 million gift to be distributed among all BAYADA employees in mid-December.

Coinciding with National Home Care & Hospice Month and Thanksgiving, Mark shocked employees with the surprise of a lifetime on November 20 with this announcement: he is divvying up $20 million of his personal funds, based on each employee's lifetime earnings with the company. Gift amounts will range from thousands of dollars for those who have been with BAYADA for many years, to $50 for employees who just started with the company.

"As I work to transition BAYADA into a nonprofit and take the next step in the evolution of our company, I have spent a lot of time reflecting on what has gotten us to this point, and what I am particularly thankful for, which is our dedicated team of home health professionals," said Mark. "This gift is a token of my appreciation, in hopes that it expresses to every BAYADA employee just how important they are to BAYADA and to our Lasting Legacy vision of being the world’s most compassionate and trusted team of home health care professionals."

As part of his Lasting Legacy succession plan, Mark became BAYADA Chairman in August 2017 to oversee the company's transition to nonprofit, and his son, then-Practice President David Baiada, was appointed as BAYADA's chief executive officer. Believed to be the first transition of its kind in the home health care industry, this move to nonprofit is designed to protect the company from sale and to help ensure that BAYADA's mission, vision, values, and beliefs, codified as The BAYADA Way, will endure for generations to come.

"Maintaining a truly impactful and lasting legacy for BAYADA starts with our great people, who embody our core values and contribute to and maintain our unique mission-driven culture," said Mark. "I am honored to be able to pass on my Gift of Gratitude to our deserving employees and am excited for what the future holds for all of us with the nonprofit transition."

As a nonprofit organization, BAYADA will continue to reinvest profits back into the company's mission and culture, which is a key differentiator in the marketplace. Examples of employee reinvestment include continuing education opportunities to help employees grow in their careers; clinical innovation and technology investments to help employees better do their jobs; recruitment efforts to hire the best and brightest in the industry; and resources to open new offices to serve more people.

BAYADA is a special company full of employees who are all bonded together in deep commitment to our clients like you.

To learn more about the company’s pending move to nonprofit, visit www.bayada.com/legacy.
Follow the story on social media with #BAYADAGratitude and #ThisIsBAYADA.
Michele cherishes the quiet moments at home with her son, Cole, 14 months. The simple gesture of rocking her baby to sleep and holding him close seemed like it would never be possible for this new mother.

Born with Down syndrome and a host of complex medical conditions that include pulmonary hypertension, congenital heart disease, and chronic respiratory failure, Cole spent eight months in the neonatal intensive care unit (NICU) at Children’s Hospital of Philadelphia (CHOP).

Bringing Cole Home
“Cole needed a continuous infusion of a heart medication called Remodulin to treat his pulmonary hypertension, which made it a challenge for him to be safely discharged from the hospital,” explained Pediatric Transitional Care Program (TCP) Director Susan Ecker-Sterner, RN.

Unequipped to handle the baby’s challenges, many home care agencies said no, but BAYADA’s Allentown, PA office said yes. Clinical Manager Lynn Fritzinger, RN learned all about Cole’s medication regimen and educated a team of hand-picked nurses.

Client Services Manager (CSM) Rebecca Boettger created a care schedule that worked best for the family and the nursing team.

Cole, who is on a feeding tube, tracheostomy, and ventilator, is thriving at home, and Susan gives due credit to his mom for the baby’s success. “Michele understands that the nurses need to feel comfortable in the home and work together with the family to ensure positive outcomes for the child,” she said.

Michele, in turn, expressed appreciation for her baby’s home care nurses, his Clinical Manager Jill Makovsky, RN and his CSM Linda Moffitt. “We thought we would miss out on all of his milestones and the things that babies do because he was in the hospital for so long,” she shared. “It’s really nice to have him home.”

From Hospital to Home Care: Coordinated Partnerships
Seeing a family’s joy as their child comes home is a feeling beyond words for Susan and the TCP team of transitional care managers (TCMs) and pediatric home care liaisons (PHCLs). Together, they partner with more than 100 children’s hospitals and facilities across the country to transition children and adolescents from the hospital to nursing care in the home.

“It’s often a lengthy process of coordination with the physician, discharge planners, durable medical equipment company, and BAYADA going on behind the scenes before a child is discharged,” explained Susan. “Having nurses in the home makes living together possible for these kids and their families, and that’s the greatest gift of all.”

Pediatric Home Care Liaison Rosie Jackson, RT, couldn’t agree more. She helps transition children home from North Carolina Children’s Hospital in Chapel Hill, NC and Wake Medical Center in Raleigh, NC. “It’s like a jigsaw puzzle, the child and their family, and BAYADA,” she said. “I am an intricate part of these dynamic moving pieces, and it is so fulfilling when they come together.”

A Measure of Comfort During Re-Hospitalizations
The TCP team members form a strong bond with these children and their families, both during their initial hospital stay, and during a re-hospitalization. “If a child has to come back to the hospital because of illness or surgery, we are there to provide a familiar face and an added level of comfort,” shared Susan. “We’ll bring snacks, provide parking vouchers, or simply play with the child while parents get some well-deserved rest.”

Even more importantly, the TCP team helps ensure that the nurses are in place and ready to resume care, giving parents peace of mind when their child is once again discharged to home.

As for Michele, she understands all too well how much parents like her need that peace of mind knowing that their child can live safely at home. “Thanks to his nurses,” she said, “we can enjoy spending time with Cole, just being a baby.”

To learn more about the Transitional Care Program, call 800-305-3000. View Cole’s Story >>

The Transitional Care Program Team
Susan Ecker-Sterner, RN, Pediatric Transitional Care Program Director
Lisette Alicea, RN, TCM – New Jersey / New York
Donna Buhosky, PHCL – Pennsylvania
Joyce Durst, RN, TCM – Pennsylvania
Mary Ann Hardin, RN, Senior TCM – Pennsylvania
Ezra Hill, PCHL – Central New Jersey
Mary Hill, RN, TCM – North Carolina
Brendetta Huffman, RN, TCM – North Carolina
Rosie Jackson, RT, PHCL – North Carolina
Candace Mellon, PHCL – Georgia
Kathleen Lenzmeier, RN, TCM, PHCL – Minnesota
Mary Simrell, RN, TCM – Southern New Jersey / Pennsylvania
Nicole Vittese, RN, TCM – Delaware
Tonya Watts, RN, Senior TCM – North Carolina
Helena Welsh, RN, TCM – North Carolina
Lori Wescott, RN, TCM – Pennsylvania
Elizabeth Wise, RN, TCM – New Jersey / New York
Yolaisy Sanchez, LPN, loves her job caring for a one-year-old boy with respiratory failure who relies on a ventilator to help him breathe. She chooses to work the overnight hours, giving the baby's parents a chance to get some well-deserved rest. “I am doing the right thing by taking care of this baby, but I was nearly ready to move on to another case,” said Yolaisy, who had received four parking tickets over two months while caring for her client. “Sometimes it takes me over an hour to find parking because of tight restrictions in his neighborhood. My client needs the care; I don’t want to have to spend my time looking for parking instead of caring for him.”

Parking Challenges Lead to Access Issues for Clients

Unfortunately, parking challenges and the subsequent fines that come with them have been an all-too-familiar story throughout New Jersey. Two-hour limits and resident-only permit parking are some of the reasons why many BAYADA field staff have returned to their cars after a long shift only to be greeted by a ticket on their windshield. In fact, some BAYADA offices have paid thousands of dollars to their local municipalities to cover the cost of parking tickets for their nurses and home health aides (HHAs).

Parking limitations cause far more than just inconveniences for caregiving staff. Vulnerable residents who are eligible to receive in-home care and who live in areas where parking is difficult or unsafe are often unable to get the care they need. In NJ's more urban areas, staff must chance being ticketed or towed, or request to be reassigned to a different area or case, leading to access to care issues for the client.

Clearly, something had to be done.

BAYADA reached out to NJ Assemblywoman Carol Murphy, who agreed to sponsor the Parking Placard Bill which allows home care agencies to purchase and distribute parking placards for direct care staff to use while they are caring for clients. The placard allows them to legally park close to the client's home without being ticketed or towed.

Advocacy in Action

BAYADA clients and their families, field staff, and office staff didn’t hesitate to throw their energy behind this bill. They sent emails, wrote letters to the editor, and attended legislative sessions to voice their support. Thanks to their efforts, the bill unanimously passed in the State Assembly and Senate and was recently signed into law by Governor Phil Murphy.

“This was a wonderful example of how client advocacy can lead to positive change,” said Government Affairs Director of Grassroots Advocacy Rick Hynick. “It can be as simple as visiting our Hearts for Home Care Advocacy Center, entering your zip code, and sending a pre-written email to your elected officials.”

Register for Hearts For Home Care Today

Rick encourages more people to get involved to advocate for themselves, their loved ones, and their community. “You can be a ‘Heart for Home Care’ today by visiting heartsforhomecare.com. You’ll receive email updates about relevant issues and opportunities to learn about the many ways you can get involved. Even if you have only a few minutes to spare, it’s a great way to make your voice heard!”

Imagine the following scenario. Your child isn’t feeling well, and you’re worried about his unusual cough and high fever. Fortunately, his home care nurse from BAYADA is there to perform an assessment. She uses a device called an otoscope to look in his ears, then uses a stethoscope to listen to his lungs.

At the same time, the physician, who is located several miles away, also can see into your child’s ears and listen to your child’s lungs. It’s all made possible through a sophisticated Nemours telehealth program that allows doctors to examine a patient remotely thanks to “smart” medical equipment with tiny cameras inside. When the nurse examines your child, the doctors sees what she sees, in real time!

“BAYADA is excited to partner with Nemours/Alfred I. duPont Hospital for Children in Delaware on this pilot program we co-developed to bring this exciting telehealth technology to our pediatric clients,” said BAYADA Transitional Care Program Director.
The pilot selected eight BAYADA clients with high-acuity needs based on pre-defined criteria. They each received a tablet that records the child’s vital signs and connects with the telehealth equipment. The child’s parents, clinical manager, nurses, and physicians from the hospital’s Rainbow Clinic all have access to the tablet’s data. Working as a team, they can determine within minutes if the doctor should examine the child “virtually” using the telehealth equipment, or if the child needs to go to the emergency room. It’s both a family-centered and technology-driven approach to care.

“... and strengthened our relationship with the nurses and physicians at the Rainbow Clinic,” said BAYADA Transitional Care Manager Nicole Vittese, RN, who helps to transition children from hospital discharge to care in their own homes. “... possible environment for these medically complex kids.”

Based on the success of the pilot, BAYADA hopes to partner with other hospitals across the country so that more pediatric clients can benefit from telehealth technology.

A special thank you to the clinical managers who trained their field nurses on the use of telehealth equipment.

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Stephanie Tripplett, RN
Tiffany Willis, RN

**Delaware Pediatrics North:**
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