

UIC Donations Interview

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Jacque Berger, Director, Facility & Space Planning, UIC College of Medicine

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SPEAKERS

Cheryl Pinotti, Jessie Knoles, Jenna Courtade, Michael Wesbecher, Jacque Berger, Bethany Anderson

Cheryl Pinotti 00:00

All right.

Jessie Knoles 00:01

And I do think before we start talking, it'd be good to have you just state your name and your title.

Cheryl Pinotti 00:07

Okay. My name is Dr. Cheryl Pinotti and I'm the Senior Director for Patient and Guest Relations at the University of Illinois Hospital and Clinics.

Jessie Knoles 00:07

Great. Thank you. And...you are responsible for working with those in clinical positions on trying to work with them to get them the care that they needed? Could you talk about how you supported those working at UI Health during the pandemic?

Cheryl Pinotti 00:44

Right. My role, I guess, was to work with those outside organizations who wished to donate something to those inside—health care providers, doctors, and nurses, and the staff that were present. And it went on, I'm looking here, because I made a list, about a 12-page list. It started on the March 28. The first donation was from Cubs Charities and it was some 200 dinners they wanted to deliver. And it ended probably June 29. From an individual who wanted to send over 50 sandwiches and 10 salads. And in these 12 pages, there's just a variety of things that people donated. Organizations, businesses, and just private donors that came together. Students, different, you know, social organizations, community organizations, so the, our Taylor Street, our little our Little Italy people. So one of the most colorful things I think you might like, is the Croc Foundation. And I don't mean like Arthur crack, I mean, the shoes Crocs, C-R-O-C-S. They called, they had a relation through a nurse at the American Nurses Association, and they were doing this throughout the country. And I can't believe this, but they did deliver 1,750 pairs of Crocs. And just trying to kind of arrange those boxes were all over the place to arrange a warehouse. I mean, I couldn't put it in my office, there was no place to put it. But that took a

lot of phone calls and a lot of coordination. And then the day we worked out, you know, I mean, how do we do this here, say seven, eight, we were at a shoe store. You know, but it was very interesting. And the residents, the physicians, the nurses, the nurse tech, we really took care of all the people that were clinical. And the funny part is, you can't, you're not supposed to wear Crocs in the hospital. So we also had a tell them, look, you know, you got to take them home. Wear them at home, because you know, cause your feet really have to be covered and all that kind of good stuff. But that was a lot of shoes to put...1,700 pairs of Crocs. Yeah, they still had a couple left over in my office. So what I did with those is I gave them to the emergency room...some people come with nothing and they have to have something to go home with. I thought that was the most fun and probably challenging was the Crocs, because there was a hell of a lot of them.

Jenna Courtade 03:23

The logistics of that...[laughs]

Cheryl Pinotti 03:24

Yes, I had to work with the warehouse on East Campus, and then to deliver them here and set them up in huge conference rooms. And then people...we did, we sent notes to the floors and to the College of Medicine, you know, give us an idea. Because we didn't want people to come in and be able to get a size 10 or size 11 or size 13 for that matter. So it worked out, like I said, pretty well. We had a couple left over and then I gave those to the ED [emergency department] for those folks who were going to go home without any shoes. Now they have a brand-new pair of Crocs.

Jessie Knoles 03:54

Was there a campaign to get connected with these donors? Or did they just reach out?

Cheryl Pinotti 04:01

This was...voluntarily, they just reached out. And I was I was amazed. I was just amazed at some of the stuff. I mean, we had people making...I don't know what they were making...little knitting things. And then you have to be careful, because I can't give anything unless it's wrapped up. You know, people wanted to bake cookies. And I'd say not unless you're going to take each one and individually wrap them. So then I had people sending cookies that were already made that were just phenomenal. But no, it was all voluntary. We did not solicit these donations at all. So when they called, I tried to get to them right away and, you know, communicate our gratefulness and they felt really good about giving. You could see when they came here they really felt like, "man I'm at home watching this stuff on TV and there's nothing I can do, do what I can help the health care people," that really gave them a really good sense inside.

Jenna Courtade 04:53

And on the like, on the flip side, how you feel like it impacted everyone here?

Cheryl Pinotti 04:59

They all gain weight! [Group laughs.] I think, you know, certainly it lifts people's spirits in any unit. I'm a nurse by trade, you know, in any unit when you have somebody thinking about you and sending over, whether it's, you know, cookie and coffee or whether it's, you know, some spaghetti dinners, it makes

you feel good. It really makes you feel good. You know, and there was a point there, in the middle of this—what was it, Little Caesars?—I think Little Caesars was sending us like eight or ten pizzas, like, Monday, Thursday and Friday. You know what I mean, and then, it became, some of the became, how can I be fair with this? Because that's the other thing. I didn't want to hear, "oh the emergency room get everything"—because the emergency room was very busy—"we didn't get anything." So then I had to kind of devise a plan where I kind of have a tick list. You know, this many here, this many that time, this many—so you try, we try to get everybody. Because you don't want anybody to feel left out. But the nurses and the docs felt really good and the support staff, you know, just to know people really wanted to help them. You know, like I said, some of them were cute cookies, some of them were spaghetti dinner, salads, the Crocs, masks that people sent and PPE, and I would check if it was okay to go ahead, because some of it we couldn't use.

Michael Wesbecher 06:22

And some, if I recall, frequently, we would have people from inside the organization, too, like whether it was Dr. [Robert] Barish, people from East Campus, even the Central President's Office sometimes would say like, "Hey, we want to buy dinner for everybody."

Cheryl Pinotti 06:38

Right, yes.

Michael Wesbecher 06:40

We had internal folks as well that were participating in that support—

Cheryl Pinotti 06:42

—Who wanted to get involved—And Little Caesars, just to be clear, on April 15 started ten pizzas at 11:30am and 5pm every day, except the 7th of April and the 24th. And this continued on Saturdays and Sundays. So then we had to cut it. So you know, and again, we have to take turns, who's getting what. But yes, there's internal donors, the White Sox, I believe the Hawks. I know the Cubs were the first ones. University Council. I mean, it's just very...employees, single employees. Very interesting. Breakfast bundles.

Jenna Courtade 07:29

Some of these are like big name.

Cheryl Pinotti 07:32

Yes, Gibson's restaurant, Sweet Green. Like I said, some are people, and some are organizations.

Michael Wesbecher 07:39

It arranged, I think, quite widely. And some of the—I'm just kind of reflected now—that, you know, Cheryl here talking, like, we were exchanging emails quite frequently. So it's nice to be in the same room with her for the first time in many years, I would say. But what came throughout the ebb and flow of the pandemic, actually, early on in like the PPE donations, we were receiving a lot of contact from Asian American organizations who were trying to combat—you guys were talking about misinformation before, too—trying to combat a lot of the like anti-Asian sentiments that were really risen by this

reference point of it being, you know, coming from China or whatever. So I think a lot of—some of the agencies that we've had were people trying to really showcase that it wasn't...we wanted to dispel any kind of poor communication or poor information that was out there, and showing that our, a lot of our Asian American communities were rallying around, trying to find solutions, much like everyone else was doing. So that was kind of a nice partnership that we all, we just tried to foster because we heard that loud and clear, and we wanted to make sure that we were, you know, being the champions for better health equity and not endorsing that type of perception that was out there as well, too.

Cheryl Pinotti 09:08

That was my—to Michael's point—my third donation was from [Xi'an?] Enterprises. And it's a business in Chinatown, and they delivered a pallet of coconut water. And I forget how many individual, but it quite a bit. That was quite a bit. Yeah, it was it was very interesting and then, you know, again, to try to spread it out as evenly as you can. It was very interesting. And people felt good. The givers felt good. And I think that, you know, the doctors and the nurses and the hospital staff felt good, as well.

Jenna Courtade 09:43

Yeah.

Jessie Knoles 09:45

So how did these donors figure out how to go about actually doing the donations? Was there...did they just randomly call someone and somehow find you, and get in contact with you?

Cheryl Pinotti 09:59

Usually it came to me, it didn't always come to me, it didn't come maybe from Michael's office, or somebody else. And how to set this up. You know, what they would ask me if they were from...we had Lenovo, the computer company, they wanted to do something. And they weren't familiar with this place. So their question to me was, where, what restaurant do you think I should use? So I would kind of help them set up, I'd give them a choice of a couple of restaurants, you know, in Little Italy, because that pretty much always went. And then they would just get it delivered. And then I'd be in touch with those delivery people. We bought some, my staff and I—I was also working closely with Mary Niewinski, and Mary Niewinski is the director of nutritional services at the hospital. And she had things to cut pizzas and all kinds of interesting things that I didn't have. And we would go out and meet them. Some people wanted to take pictures with us and post them in different places, and then we'd take the stuff inside and try to distribute it, say, "Okay, who's going to, you know, whose turn is it today? Or?" And we try to include everybody, because after a while there's so much food. I mean, we tried to, you know, to cast a bigger, wider net. We would give it to security, you know, people who didn't—you know what I'm saying— other people, other ancillary support people. Because they were important, too. Because when you think about it, it's not--the doctors and nurses in it, that's like your, that's like your meat and potatoes. But you also have to have your bread [sound notifying that Jacquie Berger joins via Zoom] and vegetables, your support [inaudible]. Otherwise, it doesn't really work.

Jessie Knoles 10:18

Right.

Michael Wesbecher 10:31

The other—and I think you mentioned that we had like some other additional folks who were bringing things, and I know that we had the mayor's wife that showed up, and like, Rahm Emanuel had showed up—were you there when—

Cheryl Pinotti 11:48

—no, I was not—

Michael Wesbecher 11:48

—I know it's kind of, it was a tricky situation anyway, because we're like, this is happening. Can someone take a picture when it happened? Because that was kind of the—I know that you are archivists who are looking for some, you know, how can we represent this as well, too—and that was part of the challenge, you know, and being able to communicate back to people that we were thankful for them. We really had to make sure that we were doing that as best as possible. And when we saw that people were starting to come to us, we stood up, you know, VCHA [Vice Chancellor of Health Affairs] was asked to make a site that was like, if you're interested in giving us PPE, this is the type of stuff that we're looking for. Because we did have a criteria, we weren't just accepting anything, there was a certain amount of criteria that we could accept. And we had to be able to make sure that we could use it, that we can distribute it. So we created an intake form, kind of a survey, so that people knew what we were looking for. And we knew what to expect. We didn't have that at first. At first, it was just fielding balls that were flying to us at first, then we started in what Margaret referenced earlier is like, at our 8am meetings every day, we were starting to say like, what do we need, and one of those things was like, hey, we need a quick landing place for information that people who want to outreach for meals, for PPE, for other things, they have a channel to do that. So that was what VCHA helped to stand up as well. Which is a great segue...and Cheryl, please stick around because I think that you and Jackie might be able to kind of bounce off of each other a little bit if you wish. But please feel free to pop out if you need to if you have another appointment. But Jackie, this is Jackie Berger. Jackie, this is our COVID archiving team from Urbana. We have Jessie, Jenna, and Bethany here. And I'll...if you guys have some, you know precursor information, we're recording! All of this is on record, just so that you know, but, it might be helpful if you give us your—or, I'll let you guys take it away.

Jenna Courtade 12:41

[to Jessie] Go ahead...

Jessie Knoles 13:28

Jacquie, if you could please just introduce yourself and your title just before we start talking about your contributions to COVID-19 response.

Jacquie Berger 14:03

Sure, I'm Jacquie Berger, Director of Facility and Space Planning in the College of Medicine.

Jessie Knoles 14:08

Thank you.

Jenna Courtade 14:11

So, we've been over here just talking about all these wonderful donations. What was it 17 thousand or [17] hundred?

Cheryl Pinotti 14:22

17 hundred.

Jenna Courtade 14:24

1,700 Crocs...17,000 would be...

Cheryl Pinotti 14:26

That would be...I don't think I could handle 17,000 pairs of shoes.

Jenna Courtade 14:26

[Group laughs.] And just like this, this wonderful outpouring from the community and even beyond. Yeah, so would you, do you want to add to your interactions with, or like your part in, these donations and making it work?

Jacquie Berger 14:29

I mean, are you asking for information about specific donations that we got like some of the bigger groups?

Jenna Courtade 15:03

Just like in general like how, like your relationship in, in receiving these donations or like the logistics of working? Getting them—it doesn't have to be a specific one, it could just be in general PPE donations—

Jacquie Berger 15:24

Yeah, I mean, I was primarily involved in two different areas. One was, you know, procurement of PPE and finding vendors that could provide it to us. So that was for purchase. But then also working with community organizations that wanted to donate. And we had a couple of major groups that you know, donated along the way, you know, and heard about us, you know, whether it was masks, like from the Vietnamese community, primarily from their nail salons, we got a lot of PPE from them. We got a lot of PPE from—and I can't remember the name of the organization, it was...I think it's a Buddhist organization in the western suburbs—but they donated to us regularly. So they—and I could find their name—but they were hugely helpful. But yeah, so coordinate a lot of that with, you know, we use College of Dentistry as the drop off point. So a lot of community partners as well as individuals would drop off to the College of Dentistry and the College of Dentistry would then inventor—sort and inventory—the items so that we could then distribute them on campus as needed.

Jenna Courtade 16:36

Thank you.

Jessie Knoles 16:39

So if someone wanted to donate PPE, how would they have gotten in contact with you? And how did you work with them to establish like dropping off donations? And then how did you also work with the College of Dentistry there?

Jacquie Berger 16:54

So it was, I believe we had a website that people could register on saying that they were interested in donating, and we would reach back to them and let them know. College of Dentistry was used because they did have some people on site, you know, most of the campus had gone home. And we needed a site away from the hospital, where people could safely donate. So since they had staff on site, and they had the space available, we made that our primary drop off point. It's also adjacent to the hospital, so it worked really well in terms of then taking those supplies, moving them over to the hospital, you know. We worked with materials management with Mike Fitzgerald in the hospital to move those supplies over to him.

Jenna Courtade 17:38

Um, and so Cheryl was mentioning, like, she has here a big list of all these donations. And it kind of has a timespan. And you also mentioned that while you got donations, you also were making purchases for PPE. So was there ever, was it kind of like, always concurrently taking in donations and purchasing or...were the donations enough for a while, but then they like kind of fell off, so then you needed to start just purchasing and...yeah, just like—

Jacquie Berger 18:16

—We were doing both simultaneously because certain things would become in short supply. So you know, the dental the—I think it's the Chicago area, like dental professionals—donated. We took all the PPE from the simulation labs in nursing and health medicine, etc. and were able to use that so we were using, you know, the primary concern was finding good quality PPE for the first responders and a lot of that was purchased. You wanted to make sure that it met quality control. But then we also needed I think, when I joined the call, you guys were talking about the masks that were donated, I think by the theater or...not don—I think we paid for them. But you know, so we were trying to get cloth masks and things like that for volunteers, but make sure that we had, you know, face shields and N-95 and K-95s and surgical masks and gloves etc. for the hospital staff.

Michael Wesbecher 19:12

Thank you. Jackie, can you talk a little bit about the variety of PPE that you were receiving and accepting, I should say, and how you negotiated what we were really accepting. I know part of it was we had the intake form that was something we worked through. But we had to get that list from Mike Fitzgerald. I think that's a great point. But I think, once you got it, you know, can you talk to...sometimes you were there receiving it, sometimes you weren't. And maybe what your daily experience was when you were expecting, you know, material to be arriving on campus when you may or may not have been on campus yourself?

Jacque Berger 20:16

Well, I for the most part was not receiving because I was not for the most part on campus. But it was all done at the College of Dentistry, as I stated, because they have staff on site. So their inventory clerk was, and their security guard would receive it and then catalog it.

Michael Wesbecher 20:33

But you would set up that process with them. Right? Was that you?

Jacque Berger 20:35

I did, yeah. Yeah, I sent that up with them. So I mean, I was there for some of it, but you know, I mean, we accepted anything—it was during business hours, so people could drop things off. If it was bigger—a lot, the bigger donations I went and picked up myself. And then, I mean, we were taking, you know, gloves, masks, Tyvek suits, thermometers, face shields—trying to think some of the other things—respirators, so it went to some of our labs to get equipment that can be used in the hospital.

Jenna Courtade 21:20

So Cheryl, and Jackie, I had a question. Were there any supplies or PPE that you felt, or you found, were really difficult to obtain? And if so, were there...you know, did you have to find some sort of creative means of getting a hold of them? Or did somebody else have to?

Cheryl Pinotti 21:42

Yeah, basically, you know, I was just dealing with food. So it wasn't, you know, certainly the cafeteria was open, so if we weren't getting [inaudible] as people do, they'd bring their lunch. So I really didn't have to seek—and most days, I really felt, I will tell you from, you know, March through the beginning of July, we had too much food. I had nurses coming up to me saying, you know, "I'm gaining 12 pounds, you gotta stop this." So, you know, it was none of that—and again, trying to equitably share it amongst all of us was the goal.

Jacque Berger 22:16

I mean, in terms of the types of PPE, it kind of ebbed and flowed. I mean, Mike Fitzgerald, who's the—[coughs], excuse me—the director of materials management at the hospital, would really let us know what he needed. And he had sort of daily status reports as to where supplies were for various types of PPE. You know, obviously, you know, we got face shield donations from community members, you know, that were created—my son's high school, Lane Tech, you know, their maker's lab made face masks—not face masks, face shields—so there were a lot of community partners that were doing things like that.

Jenna Courtade 23:00

Do you all feel like the connection with the community has, like, always been something that the hospital has had? Or has it, like gotten stronger through this? Yeah. Because to me, it would seem like there is like a good connection that they would want to come and like, support you. But maybe that's just because of all the great work that's happening during the pandemic...yeah, so was there a relationship there before, or?

Cheryl Pinotti 23:38

I think with most of these places, and people, for example, there are internal people. There's Dr. Barish's team, University Council donated, there were physicians and their families who donated, there were outsiders. There were some vendors. But I mean, I think those relationships were always there. But I just think this was a way to say—because I was thinking sitting here—and I'd forgotten how really tough it was, for the nurses and doctors every day, people were dying in the beginning. It was tough. But you know, we would see signs out there, you know, we love you, we thank you, blah, blah, it'd really lift people's spirits. But I certainly think that people come together greater in a crisis, and that's an unfortunate fact. And I think we've seen it through history. People will really come and stick together when something really goes bad to bolster each other. So, I want to answer. They were there before, but not to this degree. Because they knew that it was, it really was rough. When I think about going up there as a nurse, and I would, the ED [emergency department] and some of the real critical care areas and, you know, lots of deaths. My office deals with people and their families when they lose something or something's gone wrong, so we'd be trying to support them. And it was just nice, you know, and even though..."God, oh my God, another pizza?" That's what part of my brain was saying. The other part was saying, you know what, bless these people. Bless these people for reaching out. So I would say those relationships were always there, but it was a boost that we needed, you know, and it was a welcomed boost. And I certainly, it strengthened the relationship.

Jenna Courtade 25:10

Yeah.

Jacquie Berger 25:12

I would actually say the opposite. At least from my experiences, these were not relationships that existed before in terms of these PPE donations. These relationships were ones that came in, you know, thanks to news stories and other things. Like I said, the Vietnamese community, I mean, they were huge. They gave us so many gloves and masks. We had companies reach out to donate, and a lot of that was from people at UIC, who knew the shortage and say, oh, you know, my daughter, or my neighbor or whatever, you know, works here. Let me see if I can make a contact with you, with this company. So, for us, a lot of these, I think were new—I mean, a few of them were sort of established business relationships, not in the PPE field, but we work with these companies on different things and they look to us to donate things, often construction companies things, but a lot of them are brand new relationships, which I mean, I hope, I don't know, but I mean, I hope that we've kept up.

Jenna Courtade 26:13

Yeah. Hopefully, that these relationships can...yeah, because, I don't know.

Michael Wesbecher 26:24

Yeah, I mean, I would say, from my perspective, I think I agree with both of them, I think we're probably slightly surprised that we remained top of mind. I mean, we're a large health care organization in the city. So maybe we shouldn't have been surprised. But I think our ethos at UI Health and at UIC is often not to toot our own horn. So when people give us the recognition that we sometimes feel that we deserve, we're a little taken aback by that. So I think when we saw so many people in the community, local or across the suburbs, wherever, we were a little surprised that more people found us top of mind

than maybe we gave ourselves credit for. So I think that was a little bit of the additional boost of morale that we continue to see was that, you know, more people are thinking about us, and typically than we have thought, and people are recognizing the work that we're doing in discovery and news stories to do the hard work at the time or showing up for work at the time. And I think that was so very well needed. Especially at that moment.

Jenna Courtade 26:24

Yeah. Right.

Cheryl Pinotti 26:31

And you remember hearing about heroes, your "healthcare heroes." So people, too, wanted to tell the heroes, "Hey, this is this is what we can do. We can send you 10 pizzas, we can do this. But we want to say thank you to our heroes." And I think, again, that was just another boost to the providers and the support staff as well.

Michael Wesbecher 27:48

And a lot of that, sometimes was just channeling the energy. And that's why we stood up that webpage, it was like, how can you help. And there are ways you can just, you can give a financial contribution. If you'd like to sew a mask at home, here are the instructions and here's how you deliver it. If you'd like to make a contribution to like, bring in sandwiches or cookies, or lotion, or whatever that might be, here's a person you can get in touch to do it. But again, we still needed to have some certain criteria. Or, if you approach us and say this is all I can do, I think Cheryl was always willing to say how can we collapse people, and to still not turn anybody away who's really feeling good about contributing to the class.

Cheryl Pinotti 27:53

And we didn't. We didn't. You know, we finagled a few things, but we didn't. We didn't, we wanted for them to be able to say or to say to them, thank you for your help and thank you for thinking about us.

Jessie Knoles 28:54

Just curious. Cheryl, you mentioned that the first donation was March 28. Michael, is that do you recall when VCHA established that webpage?

Michael Wesbecher 29:06

Established the web page...let me see. Let me see if I can get an answer for you. Like, precisely.

Jessie Knoles 29:12

That donation was without the webpage's help, correct? That was just someone just calling you and saying "how can we help"?

Cheryl Pinotti 29:18

Right, because remember, I think the announcement kind of went out right around St. Patrick's Day. It was the 17th of March that we've got this COVID, this is going to be bad, the EDs are getting crowded. So the 17th, and this really kind of started in earnest. Anyway, on the 28th, there were three different...you know, and the Crocs came in on the 28th, so.

Jessie Knoles 29:44

And I know you said you have about 12 pages there, front and back of donations, do you have like a good—you don't have to count them all—but do you have like a good idea of how many donations you roughly did receive?

Cheryl Pinotti 29:54

113 different. Some of them are individual people, families, organizations, internal and external.

Jessie Knoles 30:04

That's great.

Michael Wesbecher 30:06

And I, I had written...I'm trying to find...I had written a story that was published on UIC Today, and this was—it probably doesn't capture some of the tail end of stuff—but it was kind of a summative, like, here's a total kind of approximate amount of like, the materials and things that we receive, just to kind of distill it a little bit more summatively. I'm just looking for that reference point, unless you came across that.

Jenna Courtade 30:39

We might have captured that because from UIC, the COVID, like specific pages where I was grabbing the announcements and like articles to represent the announcements and like going ons here. So it might be, it might already be in our, in our database. Your legacy lives on.

Cheryl Pinotti 31:08

The other thing I wanted to mention—

Jacquie Berger 31:09

—Michael, did you share with them the list—I mean, I know Cheryl's got a list of all the food donations—but did you share with them the spreadsheet we had of all of the donations?

Michael Wesbecher 31:17

Yeah so I, so I did not share the spreadsheet of donations, because I think some of those that are on there represent some people that wanted to remain confidential. So the purpose of...I didn't share that with you, because I know that a lot of this is publicly archived available stuff. So that's why I was calling out that story because it was distilled to kind of capture and account for the people that gave XYZ but wanted to remain anonymous. But it still accounts for like the collective numbers that people have contributed to.

Cheryl Pinotti 31:55

Another thing I wanted to mention, through the Cubs organization—not that that I'm blowing their horn—but, with one of our physicians in the ED—I forget the number of pads—iPads they donated. Because at was time as well, there were no visitors. So the thing was to be able to have enough iPads to share with patients and then the whole thing about from an infection control. "Well, I don't want to

give mine to him, because how do I clean it?" And so we had to go through all those hoops. So there was quite a few iPads. So people could communicate face to face. And then I had another nurse donated over 400 chargers and plugs. Because that was the other thing, people weren't bringing their charger stuff with them. And so this was the last way to try to get in touch. So that communication piece.

Jenna Courtade 32:44

I may ask one other question. I know we're almost at a time, but— I know this is a very emotional and you know, traumatic time, you know, of course, and...but I wondered if you could both maybe share like what, like, maybe one memory that kind of sticks with you from this time and working with the community and getting these donations. Is there something that, yeah, that just kind of stayed with you?

Cheryl Pinotti 33:21

I will say just meeting these people outside of the hospital, when they're bringing this stuff. They were just, joyful givers, you know, and the joy that they felt being able to help. I mean, it was just really heartwarming. And like I said, we didn't want to turn anyone away, but you could just see it. And whether it was 200 meals that was costing somebody a couple of thousand dollars, or whether it was a box of cookies, you know, just the joy they felt would be in a part in supporting their healthcare heroes. And as a nurse, that means the world.

Jenna Courtade 33:51

Yeah. Thank you.

Jenna Courtade 34:00

Jacque, I don't know if you've heard the question, or wanted to...

Jacque Berger 34:07

Yeah, can you repeat the question?

Jenna Courtade 34:08

Sure, yeah. Hopefully I can remember what I said. Yeah, so I guess just, you know, thinking back to this time of community donations, like what, what kind of stays with you? Or like, what kind of what memory would you, you know, keeps coming back to you about at this time?

Jacque Berger 34:25

I think the fact that everybody just wanted to help, you know, they wanted to do what they could without any need for recognition or anything like they were just so grateful to the work that the hospital was doing, that they wanted to do whatever they could to help keep those people that are on the frontlines safe. Yeah.

Jenna Courtade 34:53

[Group agrees] Okay, I'll stop.