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**Winter 2008**

CATHOLIC HEALTH EAST

# HORIZONS

## Celebrating Ten Years of Catholic Health Care

**F**ounded on January 8, 1998 by the coming together of

*Eastern Mercy Health System, the Franciscan Sisters of Allegany Health System and the Sisters of Providence Health System, Catholic Health East is now one of the largest health systems in the United States, employing 50,000 people in its health care facilities located in eleven states stretching from Maine to Florida.*

Amid a festive atmosphere of balloons, glowing candles, and hundreds of colleagues and well-wishers, Catholic Health East commemorated the tenth anniversary of its "birth" as a health system at a January 8th Heritage Day celebration.

Michele Tan, CHE's manager of Claims Services and co-chairperson of Heritage Day 2008, welcomed all program attendees and introduced Bob Stanek, CHE's president and CEO, who acknowledged the significance of this anniversary and thanked all colleagues and guests for gathering to share this special day with each other. An opening reflection was then shared by Lisa Bond-Holland,

*Sr. Pat Wolf, R.S.M., president, Mercy Secondary Education, and former CHE Sponsors Council Coordinator, lights a candle at the January 8th ceremony.*

director, Governance Support and Rich Reynolds, director of Claims Management.

This year's celebration was highlighted by a panel of "story tellers" assembled to informally share some of their memories from the early days. Sr. Julie Casey, CHE's executive vice president of Mission Integration, moderated a panel that included Regina Benjamin, MD (a founding

Board Member); Sr. Margaret Mary Kimmins (former General Minister of the Franciscan Sisters of Allegany, NY); Sr. Ruth McGoldrick (former president of the Sisters of Providence); Sr. Kathleen Popko (former president and CEO of Sisters of Providence Health System); Dan Russell (former president and CEO of Eastern Mercy Health System, and CHE's first president); Howard Watts (former president and CEO of the Franciscan Sisters of Allegany Health System); and Sr. Pat Wolf (former president of the Sisters of Mercy of the Americas, Regional Community of New York).

The panel recalled "what it was like" in the mid-to-late 1990's, recounting some of the massive changes that were sweeping through the nation's health care landscape, and the forces that came together to urge Catholic health system leaders throughout the country to look to each other to consider affiliations and mergers.

Following this animated discussion, Martha Conroy, CHE's director, Sponsorship Education and Ministry Formation, led a poignant candle-lighting ceremony held in recognition of the Sponsors of Catholic Health East. "The founding Sponsors were women of hope...of vision...of courage," said Conroy. "When they came together

*continued on pages 6 & 7*

# Health Care for

*When we get climb into our warm beds at night, it's hard to imagine—and all too easy to forget—that thousands of homeless people sleep on the streets and struggle to find food, shelter, and medical care for themselves and their families.*

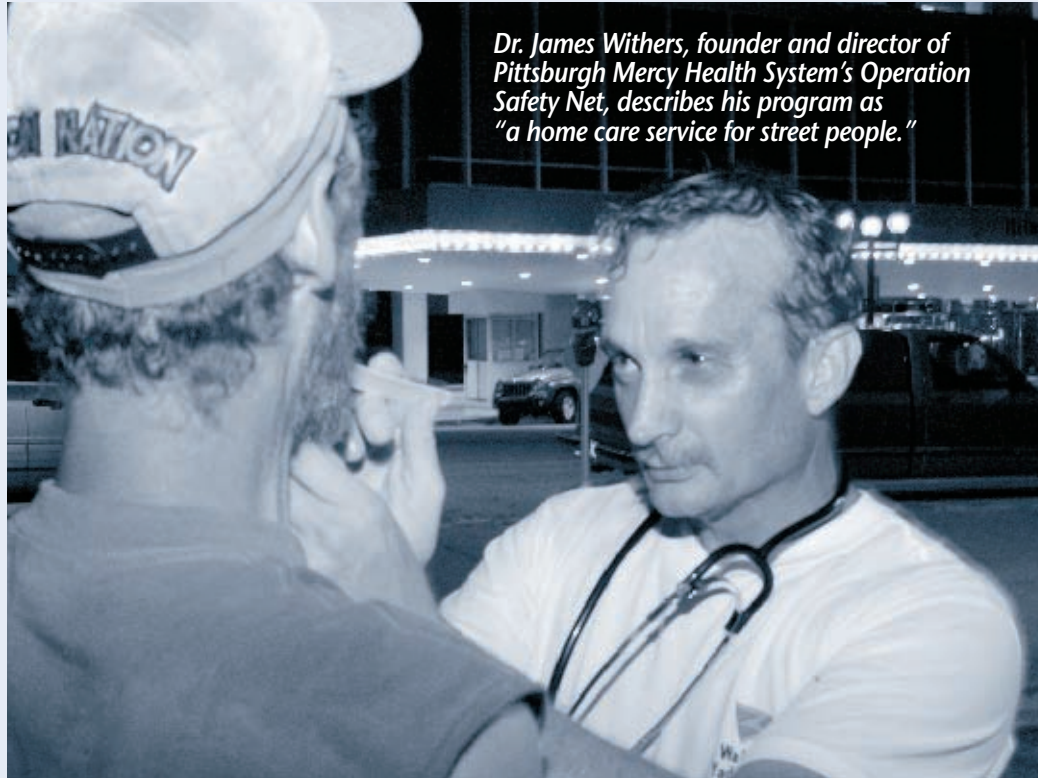
The National Health Care for the Homeless Council estimates that between 2.3 and 3.5 million people are homeless at some point during an average year. Most do not have health insurance and, for some, the symptoms of their illnesses or prior bad experiences cause them to actually avoid health care.

Many Catholic Health East facilities are actively addressing the needs of this important and growing population, but there has never been a formal network within the system to share ideas and best practices. A recent meeting of CHE colleagues who minister to the homeless brought not only a helpful discussion but also collaboration and action.

Sister Julie Casey, executive vice president of Mission Integration at CHE, understands the challenges and the blessings of caring for those who find themselves without housing. She also understands the power and impact that CHE hospitals can make when working together.

"Our health care organizations are actively addressing the issue of caring for the medically underserved. We report our charity care numbers and community benefit activities, and we know our system had at least 36,000 contacts with the homeless last year. But we don't have a clear idea of the scope and depth of that service," says Sister Julie. "We need a way to formalize the data, as well as to leverage CHE's size and clout to grow programming and influence policy."

Sister Julie and Ken Becker, CHE's



*Dr. James Withers, founder and director of Pittsburgh Mercy Health System's Operation Safety Net, describes his program as "a home care service for street people."*

vice president, Advocacy and Government Relations, invited CHE facilities to send their designees to a two-day, CHE-sponsored symposium about caring for the homeless. Twenty-four representatives from nine CHE affiliates attended the first meeting. The results? Amazing. "These are the best of the best," says Sister Julie. "Kindred spirits. Within five minutes, the generosity, creativity, sensitivity, and ingenuity of these servant leaders filled the room."

"After learning and working with a number of homeless program directors over my more than seven year tenure at CHE, it was a rewarding experience to be able to help facilitate and be part of this gathering of dedicated advocates for the homeless," said Becker. "The stories, the education, and most importantly the energy generated by this gathering helped me to focus on what CHE as a system could do to help

these individuals continue to do the outstanding work facilitating care for this vulnerable population. It was truly an honor to be a part of this event."

*"...we know our system had at least 36,000 contacts with the homeless last year. We need a way to...leverage CHE's size and clout to grow programming and influence policy."*

*Sr. Julie Casey  
Executive Vice President,  
Mission Integration  
Catholic Health East*

One of those servant leaders is Dr. James Withers, founder and medical director of Operation Safety Net (OSN), a non-profit organization at Pittsburgh Mercy Health System. OSN is a Street Medicine program, founded when Dr. Withers and Mike Sallows, a staff member since 1993,

# the Homeless

began making “house calls” together at night under the bridges, along the river banks, and in the abandoned buildings of Pittsburgh. Most of OSN’s work force is comprised of volunteers, but a dedicated office/case management staff supports all the field work.

The work of OSN has evolved to include medical student education in the streets, housing, preventive health services, hospital consults, severe weather shelter and response, and extensive public education.

“Imagine us as a home care service for street people,” says Dr. Withers. “We have a 24 hour on-call system and make rounds four nights a week to visit people outdoors. Our staff helps people get into primary care and monitors their progress to ensure that their health improves.”

With a specialty in Internal Medicine, Dr. Withers could have chosen any number of different career paths. “Mercy’s roots in service were important to me. When a person has been discharged from the ER and is going home to recuperate—but that home is under a bridge—I feel particularly useful and fortunate to have a part in bringing care to people and meeting them where they are.”

He continues, “The paradox is that there are tremendous medical resources close by, but they might as well be on the other side of the planet. Access is not easy. Sometimes it is due to structure, or sometimes the folks on the street are dealing with multiple factors like confusion or addiction. It’s a complicated situation.”

Dr. Withers’ work has allowed him to meet and build alliances with other homeless outreach workers throughout the nation and the world. Operation Safety Net became a model for other cities such as Santa Barbara, San Diego, Atlanta, and Chicago. His

first visit overseas was to Calcutta, where he had the opportunity to talk with Mother Theresa. Through extensive global networking OSN, with key support from Glaxo Smith Kline, helped to create a street medicine collaborative that hosts the annual International Street Medicine Symposium. In 2007, 21 US cities and 11 international cities were represented at that gathering.



*Brenda Galloway (center) and Nesty Santiago (right), staff workers with Sisters of Providence Health System’s Health Care for the Homeless program, distribute winter survival backpacks at the health system’s Homeless Memorial Day observance. (Please see page nine for more examples of how other CHE facilities commemorated Homeless Memorial Day.)*

The different issues facing the homeless makes hospitals a logical leader in this arena. But why aren’t all hospitals engaged in this important work? The primary reason is lack of monetary resources.

In Springfield, Massachusetts, the business community and local government have been strong service partners. Doreen Fadus, executive director of Community Health at Mercy Medical Center in Springfield (part of Sisters of Providence Health System), says the combination has yielded success. “Hospitals represent the voice of the people in need, and the Mayor’s team and business community help provide the financial

resources and relationships that can drive policy. It’s been great education for leaders on both sides of the table.”

Last year, Mercy served 2300 individuals and facilitated over 13,000 encounters in its three-county service area in western Massachusetts. “We see everything from cuts and abrasions to rashes, hypertension, and diabetes. Seventy-eight percent of our population is covered by Medicaid insurance, so we sometimes help answer the same kinds of health insurance questions that you or I might have.”

Mercy obtained a \$100,000 McKinney grant for healthcare to the homeless. “Getting insurance is half the battle, and this grant opens up a whole new world for individuals,” said Fadus.

In August of 2007, Mercy participated in Project Homeless Connect, a nationwide day of action for the benefit of the homeless. “It’s a big day where people in need have access to many of the services they need,” said Fadus. “Sixty vendors provided opportunities to obtain everything from Social Security disability, to photo IDs, to haircuts, to eye exams, to assistance with mental health issues.”

Fadus and her team also participate in a national event called Homeless Memorial Day. Held on December 21st, the longest night of the year, advocates and concerned citizens honor the memory of those homeless who have died in the past year. In the past, Mercy celebrated this event in-house but in 2007, a citywide event was held on the steps of Springfield’s city hall.

“It helps all of us to acknowledge and remember those we have lost, as well as to reflect on our work and honor the impact that we are able to make,” says Fadus.

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# Compliance: *The Key*

*Imagine inviting nineteen family members to join you for an evening out in your city. Then have them agree on a restaurant, select menu items that are suitable for the entire party, and settle on a reasonable and acceptable cost for all.*

*Sound next to impossible? Essentially, that's what CHE Supply Chain envisions in its transition to HealthTrust, its new Group Purchasing Organization.*

## **Why Group Purchasing?**

In 2005, CHE joined Consorta, a Catholic Group Purchasing Organization. It was perceived that our transition to Consorta would provide not only improved pricing on goods and services but more importantly this transition would also provide the opportunity for CHE colleague input into contracting decisions including the opportunity for clinical discussions and evaluations.

In April 2005, the CHE Task Forces were formed. CHE created a structure and a process that would provide for direct feedback to Supply Chain. Current CHE Task Forces include Nursing, Advanced Wound Care, Surgical Services, Cardiology, Radiology, Laboratory, Food Services and Pharmacy. CHE Task Force members represent their local facilities on the CHE Task Force conference calls.

The purpose of the Task Forces is to foster collaboration and participation of stakeholders (physicians, clinicians, non-clinicians and Supply Chain management) throughout CHE in product selection, standardization, utilization, evaluation and conversion. The guiding principles include ensuring that contracting decisions are based on a combination of safety, clinical/technical specifications, performance, service and financial impact.

How do facilities of various sizes, with different strengths and areas of excellence, agree on solutions that work for everyone? Here comes that family concept again. The common thread is that each Task Force



*George (Georgiana) Riley, CHE's clinical resource manager, emphasizes that open, frequent, two-way communication is key to the success of Supply Chain's Task Forces in Nursing, Advanced Wound Care, Surgical Services, Cardiology, Radiology, Laboratory, Food Services, and Pharmacy.*

member understands their local environment and can represent their individual facility. It's their responsibility to take the information from the conference calls and communicate that information effectively at the local level. Open, frequent and two-way communication drives the success of the CHE Task Forces.

"Gaining input on the front end from stakeholders familiar with patient care and clinical needs provides Group Purchasing contracting staff with the information they need to begin meaningful contract discussions with vendors," according to George (Georgiana) Riley, R.N., clinical resource manager for Catholic Health East. The end result is that CHE colleagues can provide their patients with goods and services that meet needs in a cost effective manner while achieving contract compliance.

## **And then Came HealthTrust...**

In an environment where group purchasing is becoming increasingly more competitive and difficult, Consorta determined that partnering with another large GPO would achieve "bottom of the market" pricing.

In 2007, Consorta became the sixth equity partner within the HealthTrust Purchasing Group (HPG). Established in May 1999, HealthTrust now supports

approximately two thousand not-for-profit and for-profit acute care hospitals, ambulatory surgery centers and alternate care sites. Today, HealthTrust's annual purchasing volume approaches \$14 billion.

Both organizations embrace similar codes of conduct and purchasing philosophy. CHE's primary interest is that HPG supports our commitment of ensuring that product discussions are focused on quality, safety and service, and not driven primarily by financial impact.

## **How does the process work?**

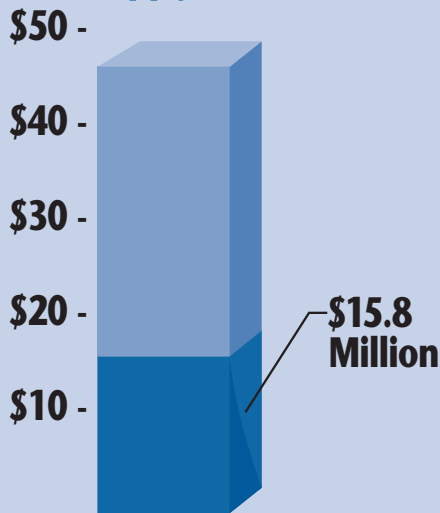
Presently, through its Task Forces, CHE provides feedback to the Consorta Committees and the HealthTrust Advisory Boards.

Riley has witnessed first-hand the robust clinical process in place at HPG. The CHE Task Forces mirror the recently restructured Consorta Clinical Committees and the HealthTrust Clinical Advisory Boards. Members of the Consorta Clinical Committees and the HPG Clinical Advisory Boards are "front line" clinicians who understand patient, staff and physician needs. Each participant has the clinical expertise and the product knowledge to ensure that the products and services for

# to Supply Chain Success

## 2007-2009 Goal:

**\$45-\$50 Million Reduction  
in Supply Chain Cost**



\*As of 11.30.07



*"Although finances are definitely a consideration, the process always places quality above finances. I'm thrilled to have a voice in the process."*

**Kathy Marsch,  
St. Peter's Health Care  
Services, Albany, NY**

Colleagues throughout CHE have multiple opportunities for input throughout the process. "If CHE colleagues do not participate on the conference calls and don't respond to the electronic surveys, they're sending a "clear" message that they will be comfortable with whatever decisions are made by their CHE/Consorta/HealthTrust colleagues," says Riley.

How do RHCs feel about the HealthTrust clinical process? "In these challenging times when we are all stretched financially, it's a tremendous advantage to work together" says Marsch.

RHCs are advised immediately when a contract is awarded. If a contract requires a conversion the CHE "conversion process" is initiated. Vendors first meet with the System Office staff to discuss conversion strategy and process. The local Materials director quarterback the conversion activity. System Office meets with the National Accounts representative every two weeks to monitor the conversion process through completion. Conversion is required within 90 days of the contract effective date.

Because HealthTrust achieves consensus prior to contract negotiations, the HealthTrust contracting team can successfully achieve excellent pricing with vendors. The vendor expectation for this "bottom of the market" pricing is contract compliance.

Contract compliance is the "price tag" for aggressive pricing.

The CHE Task Force members, as part of the CHE family, are encouraged to continue their support of Supply Chain activities through their consistent participation on the CHE Task Forces. According to Riley, "The CHE Task Force members are and will continue to be an integral component of the "path of communication" between HealthTrust, Consorta, the System Office and their colleagues at the local facilities."

The collaboration of the CHE Task Force members with their colleagues throughout CHE, Consorta and HealthTrust is and will continue to be the foundation for the successful achievement of contract compliance.



our patients are clinically acceptable and will provide positive patient outcomes.

Through the activity of its Task Forces, CHE has developed a "circle of communication" to the Consorta Committees and the HPG Advisory Boards. At least two CHE Task Force members participate on each of the Consorta Committees. In addition, CHE represents Consorta on the HPG Nursing Advisory Board (Kathy Marsch, St. Peter's Health Care Services, Albany), Surgical Advisory Board (Melanie Nash, St. Mary's Health Care System, Athens), and Food Advisory Board (George Cranmer, Lourdes Health System, Camden).

CHE as a System is extremely indebted to our clinical and non-clinical colleagues who share their time and talent on the CHE Task Forces, Consorta Committees and the HPG Advisory Boards.

According to Kathy Marsch, R.N., M.S., C.N.A.A., B.C., director, Women's and Children's Services at St. Peter's Health Care Services, Albany, NY, who currently participates on the HPG Nursing Advisory Board, "The process is placed

heavily in the hands of clinical people and, although finances are definitely a consideration, the process always places quality above finances. I'm thrilled to have a voice in the process."

"When the Task Force members have a product category to discuss, I share which vendors are currently on contract and the annual spend," says Riley. "Task Force members are very participative because they know this is their opportunity to provide their input. Task Force participation is critical since CHE as a System and/or a local facility is not permitted to contract for a product category that has been awarded by HealthTrust."

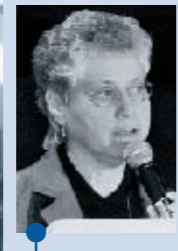
In addition to the discussions, HPG has initiated an electronic survey tool. These surveys, developed for specific product categories, are comprised of 10-12 questions. Task Force and Supply Chain Management Council members are encouraged to forward these questionnaires to all CHE colleagues whom they believe could provide valuable input.



# Celebrating Ten Years of Catholic Health Care



Sr. Kathleen Popko, CHE's executive vice president, Strategy and Ministry Development, was among hundreds of CHE colleagues and attendees who memorialized the festive occasion by signing a celebratory banner.



CHE Sponsors Council Coordinator Sr. Mary Persico, IHM



CHE Board Chair Jacquelyn Kinder



Bob Stanek, CHE's president and CEO, congratulates Mary Thibodeau, accounting manager, Finance Department at St. Francis Hospital, Wilmington, Delaware, who was one of the "Sharing the Heritage" contest winners recognized at the 10th Anniversary celebration.

A very special part of the ceremony involved the recognition of CHE's *Sharing the Heritage* contest winners. Initiated in November 2007, the contest invited colleagues from throughout the System to share their personal expressions and thoughts on how they lived out the Catholic health care mission and ministry in their daily lives.

Colleagues at each RHC/JOA then submitted their creative expressions in the form of essays, poems, artwork, and video productions. Each RHC/JOA reviewed the submissions they received at the local level and selected one "winner" to represent their organization.

The twenty selected colleagues were then invited to attend a January 7th reception held in Philadelphia, PA in their honor and, on the following day, a welcoming breakfast reception at CHE's System Office in Newtown Square, PA, which led right up to the ceremony. Each colleague's submission was placed on display at the ceremony, as well as reprinted in programs distributed to all attendees. Marian Schaner, CHE's director of Strategy Development and co-chair of Heritage Day 2008, then called upon each winning colleague to accept his/her award from Bob Stanek; while the winners individually ascended to the stage, a short

excerpt from each winning entry was read. The videos of two winning colleagues were played for the benefit of those assembled.

Irene Pilarz, administrative assistant in Information Services, then led those in attendance in reading the "recommitment" to CHE's Mission, a ritual at all previous Heritage Day celebrations. Messages from Sr. Mary Persico, IHM, CHE Sponsors Council Coordinator, and Jacquelyn Kinder, chairperson of CHE's Board of Directors, brought the ceremony to a conclusion. Sr. Mary said, "On behalf of the Sponsors of Catholic Health East, our congregation leaders and the members of Hope Ministries, I wish to thank the senior management team of CHE, the Board of Directors, the members of the staff here in any capacity and the nearly 50,000 employees you

represent for keeping the sacred trust that is yours, for dreaming new dreams, for reverencing the deep history that is the foundation for all we do, and for giving us so many reasons to believe in a future full of hope."

Kinder added "The members of the CHE Board of Directors join me in expressing both congratulations and appreciation to all who are gathered here today to recognize the significance of this 10th year anniversary celebration. As we look forward to the next decade, the Board has full confidence that by working together as one to implement the 2017 Strategic Plan, while staying focused on our Mission and Core Values, ten years from now we will find our Catholic health care ministry to be stronger than ever, and even more individuals in our various communities experiencing a healing, transforming presence."



The twenty CHE colleagues who represented their RHC, JOA or System Office as "Sharing the Heritage" contest winners gathered for a group photo at the January 8th event.

## Sharing the Heritage Contest Winners

**Eileen Aguiar**  
Chaplain, Spiritual Care Department  
Marian Community Hospital  
(Maxis Health System)  
Carbondale, PA

**Sharon Bagalio, RN, BSN**  
Director of Risk and  
Emergency Management  
Mercy Hospital of Maine  
Portland, ME

**Graciela Vanessa Cardona**  
Administrative Secretary, Financial Services  
Mercy Hospital  
Miami, FL

**Anne Condor**  
Director, Managed Care Division  
St. Joseph's Hospital  
(BayCare Health System)  
Tampa, FL

**Marilyn Crowther, RN, MS**  
Supervisor, Community Education,  
Women's and Children's Services  
St. Peter's Health Care Services  
Albany, NY

**Majorie Dyson, RN, BS**  
Administrator on Duty  
St. Anthony's Health Care  
(BayCare Health System)  
St. Petersburg, FL

**David Flaks, PsyD**  
Director of Employee Assistance and VIP  
St. Francis Medical Center  
Trenton, NJ

**Barbara Hawkins**  
Unit Secretary  
St. James Mercy Health System  
Hornell, NY

**Kimberly Hiner**  
Assistant Administrator,  
Health Center Administration  
St. Joseph of the Pines  
Southern Pines, NC

**Sister Madeleine Joy, SP**  
Chaplain/Spiritual Services  
Mercy Medical Center/Farren Care Center  
(Sisters of Providence Health System)  
Springfield, MA

**Monica Lozaga, RN, MSN-Ed**  
Director, Staff Development and  
Patient Standards of Care  
Lourdes Medical Center of Burlington County  
(Lourdes Health System)  
Willingboro, NJ

**Cecilia Mace**  
Marketing/Communications Project Manager  
Mercy Medical  
Daphne, Alabama

**Maureen G. Mann**  
Executive Director,  
Michael & Diane Bienes Cancer Center  
Holy Cross Hospital  
Ft. Lauderdale, FL

**Ginny Marchetti**  
Manager of Program Advancement  
Global Health Ministry  
Catholic Health East

**Deborah Mondon, RN**  
Nurse, S East  
Saint Joseph's Health System  
Atlanta, Georgia

**Darlene Morocco, RN, BSN**  
IMCU & 4th Floor Medical Manager  
St. Mary's Health Care System  
Athens, GA

**Marty Peahota**  
Director of Procurement  
St. Mary Medical Center  
Langhorne, PA

**Stephen Surprenant**  
Senior Vice President/Chief Operating Officer  
Mercy Community Health  
West Hartford, CT

**Mary Thibodeau**  
Finance, Accounting Manager  
St. Francis Hospital  
Wilmington, DE

**Yashima White**  
Vice President, Corporate Marketing Communications  
Mercy Health System  
Conshohocken, PA

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on January 8, 1998, the founding ceremony involved the lighting of a single candle. This candle represented the unity of our new ministry, the bright flame of our single Mission. Today, we remember the sacred trust that our founding Sponsors placed in our hands ten years ago, and we honor our current Sponsors with the symbolic lighting of a candle for each one of them."

CHE President Bob Stanek then lit the first candle, representing the unity of all of our Sponsors within one entity, Catholic Health East. Next, the names of all eleven Sponsors were called out, and eleven individuals—including original CHE Sponsors Council members, original CHE Steering Committee members, and colleagues who have been working at the CHE System Office since 1998—came up, one by one, to light a candle in honor of each of CHE's current Sponsors.

## Current Catholic Health East Sponsors

Franciscan Sisters of Allegany, NY

Franciscan Sisters of  
St. Joseph of Hamburg, NY

Hope Ministries

Sisters of Charity of Seton Hill

Sisters of Mercy,  
Regional Community of Baltimore

Sisters of Mercy –  
New York, Pennsylvania, Pacific West

Sisters of Mercy – Mid-Atlantic Community

Sisters of Mercy – Northeast Community

Sisters of Providence, Holyoke, MA

Sisters of St. Joseph of St. Augustine, Florida

Sisters, Servants of the Immaculate Heart of Mary, Scranton, Pennsylvania



Sr. Julie Casey (far left), CHE's executive vice president, Mission Integration, moderated the entertaining and informative "Story Teller" segment of the celebration. Panelists included (from 2nd to left) Sr. Ruth McGoldrick, Sr. Kathleen Popko, Sr. Margaret Mary Kimmins, Regina Benjamin, M.D., Sr. Pat Wolf, Dan Russell, and Howard Watts.

Coinciding with CHE's 10th Anniversary, a book chronicling the history of Catholic Health East made its debut on January 8th. *Together We Are So Much More: A Living History of Catholic Health East* shares details of how and why the system was formed, and how the system has evolved over the years, with first-hand accounts from founding Sponsors, Board Members, RHC/JOA leaders, and colleagues throughout CHE.

The text also contains information about each of our Sponsors, and many vignettes and photographs of some of the many local programs and services that help tell the story of our health system's past, present, and future. **For more information, contact Scott Share, VP, System Communications at [sshare@che.org](mailto:sshare@che.org).**



# Across the Country and Across Continents: CHE, CHW Partner to Serve Guatemala Mission

*A near perfect triangle can be drawn from Guatemala to the East Coast to the West Coast and back to Guatemala to depict a recent encounter in Chanmagua, Guatemala when Caridad Dresell, Gloria Miller, and Mary Jo McGinley, three Sisters of Mercy from three regions joined together to minister with the poor in the Prelature of Esquipulas in Eastern Guatemala. Sr. Caridad, who has served with the Guatemalan people nearly forty years, delightfully welcomed Sr. Gloria and 18 colleagues from Catholic Healthcare West (CHW) who pioneered CHW's first international medical mission.*

Sr. Mary Jo McGinley, executive director of CHE's Global Health Ministry, (which has been bringing volunteer teams to Esquipulas for ten years), served as technical advisor to introduce CHW's team to the Esquipulas communities and share Global Health Ministry's processes and resources to facilitate this inaugural effort.

The call to create this triangular encounter sharing in the service of the poor emanated from community leaders asking Global Health Ministry, which has been sending a medical team each Spring, to send volunteer medical teams twice a year...a request beyond the current capacities of the program. At the same time, CHW began to explore initiating an international volunteer healthcare program. Sr. Mary Jo had the opportunity to dialogue with Susan Whitten, the leader of the CHW advisory group. Sr. Mary Jo invited Susan to consider Esquipulas as CHW's first mission site. The fact that the Sisters of Charity of the Incarnate Word as well as the Sisters of Mercy, two of CHW's Sponsors, lived and ministered in the Esquipulas area created a triangular relationship that helped CHW accept the invitation.

Under the guidance of Global Health Ministry, CHW communicated information across its system seeking volunteers for its pioneer team.



*Sandra Ramos, RN, a volunteer from Catholic Healthcare West's Chandler Hospital, Chandler, AZ, conducted health seminars in each town during CHW's initial mission to Guatemala. This is in accord with Global Health Ministry's commitment to health education for long-term impact.*

*Left to right: Sisters Caridad, Mary Jo and Gloria celebrate ministry together with the people of Chanmagua, Guatemala.*



Nineteen volunteers, seven from CHW's International Health Services Advisory Group and 12 medical colleagues from 11 of their facilities (CA, NV and AZ), traveled to Esquipulas, Guatemala on November 9, 2007 and provided clinics, homecare and community health education in five remote and impoverished villages where most residents live in adobe homes without electricity or running water. The local community was astounded at the organization and ability of the group to perform so well on its first mission, and after a very successful week, the team returned to the West Coast to begin to evaluate the experience and plan their next steps.

Global Health Ministry offered its 20 years of experience and the resources of a well-developed program to assist CHW. These resources included templates for team formation, site-specific supply list, orientation materials, and a point-of-service electronic medical record. The medical record data enabled CHW to have instantaneous patient information to give the local health teams and to create an epidemiological profile of all patients served and produce comprehensive data on medications and

supplies used. GHM staff participated in the pre-mission orientation meeting via conference call and was available as a resource throughout the pre-mission and post-mission period.

The collaboration with CHW was Global Health Ministry's second experience in expanding services to communities without overextending its internal resources and capabilities. In 2005, it introduced Loyola University Medical School (Chicago) to inner-city Kingston, Jamaica assisting the work of Franciscan Ministries, a sponsored work of the Franciscan Sisters of Allegany, NY, also a CHE Sponsor. Sister Mary Jo and John Davanzo of Catholic Health System (Buffalo), accompanied the first Loyola volunteer team to Kingston. Loyola continues to serve there each summer, while Global Health Ministry continues each winter. Both Loyola and Global Health Ministry communicate frequently, sharing information and resources. This same pattern of continued communication is envisioned between Global Health Ministry and CHW, with the hopes of mutually strengthening all involved in the healing ministry in Esquipulas, Guatemala.



# Health Care for the Homeless

*...continued from page 3*


Thanks to the collaboration launched at the CHE symposium held in 2007, and the connections that many of Catholic Health East facilities have with national homeless networks, CHE launched its first system-wide effort for all hospitals with homeless outreach programs to acknowledge Homeless Memorial Day in a special way. Courtney Mengel, Esq., CHE's manager, Government Affairs and Public Policy, and Philip Boyle, CHE's vice president, Mission and Ethics, helped to coordinate these system-

wide efforts, as well as the CHE System Office's participation in the region-wide Homeless Memorial Day observance held at Philadelphia's City Hall on December 20th.

### **What does the future hold?**

"We're at an important crossroads in America where healthcare access is getting more and more difficult to obtain," says Dr. Withers. "Through CHE, the individual health care facilities that have been so individually true to the poor can make a statement about health care as a commitment to all persons. Our leadership can impact

other systems and areas of society that are looking for leadership."

Sister Julie says, "The Homeless Memorial Day event is just the beginning of raising awareness and consciousness, and leveraging our system strengths. We have already launched an internal portal chock full of amazing resources for the leaders of our homeless programs, and we plan to use our technology capabilities to cull survey data and other information. I am very proud of the work our people have done, and I know they will continue to find innovative, impactful ways to reach this important community." 

## Homeless Memorial Day Commemorations Around CHE



During its Homeless Memorial Day observance, staff at BayCare's St. Joseph's Hospital took turns in reading the names of the 60 homeless individuals who died in Hillsborough County in 2007.



From December 20 through December 21, a single candle was lit in the Marian Community Hospital Emergency Department's Waiting Area to increase awareness of Maxis Health System's staff, patients and visitors to the plight of the homeless and to memorialize those who died while living on the streets.



Monita Bonczek, an employee of the Diocese of St. Petersburg, lights a candle at the Memorial Service for the homeless, a collaboration of St. Anthony's Healthcare, Catholic Charities and the City of St. Petersburg, Florida.



Sr. Maureen M. Reardon (second from left), senior vice president and chief mission and compliance officer, Mercy Community Health (West Hartford, CT), Bettie Jackson, receptionist for Saint Mary Home (far right), and a few of the residents of Saint Mary Home take a peek at just a sampling of the items gathered by Mercy Community Health residents, visitors and associates. "Mercy Giving Trees" encouraged people to give to those less fortunate during the holiday season.



Hundreds of advocates—housing, health care and service providers; homeless and formerly homeless individuals, and other supporters—participated in the December 20th Homeless Memorial Day candlelight service at Philadelphia's City Hall. Attendees held placards bearing the names of each of the 70 homeless men, women and children who died in the Philadelphia area in 2007.



Saint Joseph's Mercy Care Services, Atlanta, Georgia, hosted a Homeless Vigil to honor and say farewell to those who died homeless during 2007. The event was attended by individuals from local agencies, churches, Saint Joseph's Health System, the legislature and city government and by members of the community at large, including many people who are currently experiencing homelessness.



# Battle of the Hospital Chefs

## St. Mary Health Care System Team Finishes 2nd in Nation!

St. Mary's Nutrition Services General Manager Mark Abbott, right, and his sous chef for the competition, St. Mary's Melvin Lowe, display the Silver Medal trophy they brought home from the first-ever Consorta Battle of the Hospital Chefs September 25th in Chicago.



chefs competed in an "iron chef" style competition to prepare healthy, innovative and reasonably priced foods for their customers. Celebrity and local judges chose the winners based on originality and creativity, taste, nutritional balance, quality plate presentation, ease of production, cost effectiveness, and appropriateness for a hospital setting. *The final result:* the St. Mary Health Care System team finished second in the nation!

The event benefited the American Heart Association and the Juvenile Diabetes Research Foundation. Catholic Charities received all the new cooking equipment used at the event. The Battle of the Hospital Chefs received national media attention including ABC World News with Charles Gibson, Fox News, Wall Street Journal, and was also part of the November 11 cover story in PARADE Magazine highlighting the trend of gourmet and room-service food in hospitals.

The gourmet food selections continue in Georgia, where Abbott may serve a char grilled salmon filet with a lemon dill sauce, a hand cut rib eye steak with a demi glaze, or butterfly shrimp as part of the Sodexo "At Your Request" Room Service Dining® program at St. Mary's Hospital.

Sodexo's room service system allows patients to order what they want to eat when they want to eat it. One of the many features of the program is the ability to identify each patient and his/her particular diet; the staff can suggest healthier options to the patients when necessary to ensure compliance with dietary restrictions.

A celebrity in his own right and giving back to the community, Abbott was recently "auctioned off" at St. Mary's Chocolate Lovers Auction as the personal chef for the lucky bidder, where he prepared a gourmet meal for 10 in their home. Proceeds benefited the St. Mary's Hospice House.

As far as next year's competition, Chef Abbott is already thinking about the menu. *He is going for the gold!*



At St. Mary's, patients order their meals from the hospital's restaurant-style "At Your Request" room service menu. Ordering is easy: the meals are delivered within 45 minutes; a nutritionist is available if the patient has special nutritional needs or physician orders. Here, Nutrition Services General Manager Mark Abbott delivers a meal to Ernestine Harris in her room.

**G**rilled honey lime grouper and shrimp with watermelon salsa, Mediterranean green bean m $\acute{e}$ lange with caramelized balsamic onions, a garden risotto Italia, and cranberry mint tea to drink.

This was the award winning menu prepared by Chef Mark Abbott, general manager and chef at St Mary's Health Care System in Athens, Georgia, at the first annual Battle of the Hospital Chefs contest.

The contest was sponsored by Consorta, a healthcare resource management and group purchasing organization for faith-based or non-profit health systems, at its recent national conference in Chicago, IL. Consorta initiated the contest to help promote the

culinary talent available at member hospitals, and how healthy eating can also be delicious. "Giving patients more options, tastier choices, and, in many hospitals, control over what and when they choose to eat is an important trend in healthcare," said John Strong, president and CEO of Consorta.

"Our goal at St. Mary's is to exceed our customers expectations; having a great meal can be one of the few chances for enjoyment and comfort for patients and their family members when in a hospital setting," said Mark Abbott ,

The St. Mary Health Care System team, consisting of Mark Abbott and Executive Chef Melvin Lowe, Jr., competed against culinary teams from 200 hospitals. The



CATHOLIC HEALTH EAST

# Across the System



## Patient Navigator Program Funded by Congress

The Patient Navigator Program, created in 2005 by U.S. Senator Robert Menendez (D-NJ), was designed to help patients overcome the barriers they often face in obtaining early health screenings and appropriate follow-up treatment. Patient navigators are individuals who can help patients navigate through the complexities of health care by improving access to treatment, referrals, clinical trials, and health insurance.

The program—the first of its kind in the nation—has just received \$2.9 million in initial federal funding. Senator Menendez announced this federal funding during a recent visit to Lourdes Medical Center of Burlington County, where he toured the hospital and met patient Victoria Brown (left) and Denise Cortland, administrator of the hospital's cancer program. Menendez also used his visit to announce more than \$718,000 in grants awarded to Lourdes for its Outreach and Chronic Disease Prevention programs.



## BayCare's St. Joseph's Children's Hospital Rolls Out the Red Carpet for Tampa Bay's Youngest Heroes

More than 100 boys and girls and their families converged at St. Joseph's Children's Hospital, Tampa, FL, in December for the 11th Annual Kids Are Heroes awards ceremony. This program recognizes children ages 5-18 who have performed heroic deeds, or displayed acts of selflessness and demonstrated good citizenship through its Kids Are Heroes program. Examples include children who have rescued others from drowning, donated time or money to a charitable organization, befriended a special needs student in their classroom, donated hair to make wigs for cancer patients, and called 911 to help a relative suffering from a heart attack. Winners from the recent ceremony are photographed above, along with Tampa Bay Lightning Defenseman and Kids are Heroes Spokeschampion Paul Ranger and St. Joseph's Children's Hospital Administrator Michael Aubin.



## Kenmore Mercy Hospital Goes Smoke-Free

(From left) Judy Tucker, contracts and systems manager for CHS Purchasing; Gretchen Lefler, regional vice president of the WNY Chapter of the American Cancer Society; Mary Hoffman, Kenmore Mercy Hospital president; and Richard Allard, environmental services aide at Kenmore Mercy Hospital; get ready to "take a whack" at the hospital's smoking hut in preparation for Kenmore Mercy's transition to a smoke-free campus. Kenmore Mercy Hospital, part of the Buffalo-based Catholic Health System, joins many other CHE facilities that have committed to maintaining a smoke-free environment.



## Conroy Honored by Portland Diocese

Congratulations to CHE's Martha Conroy, director, sponsorship education and ministry formation, who was recently awarded The Immaculate Conception Award by Bishop J. Malone. This award, sponsored by the Diocese of Portland, Maine, honors individuals for extraordinary service to the people of God in Maine. Conroy, who joined CHE in 2006, is a Maine native who previously served as director of the Office of Worship in the Portland Diocese. Subsequently, she served as chairperson of the Diocese Committee for Evangelization and Reorganization.

Pictured above left to right: Madelyn Conroy (Martha's brother's wife), Martha Conroy, John Conroy (brother), and Bishop Richard Malone of Portland, ME at the Dec. 8 Immaculate Conception Award Ceremony in Portland, ME.



**10 Minutes with... John Capasso**

**I**n just a couple of years, America's first baby boomers will celebrate their 65th birthdays. Their next phase of life, formerly known as "the Golden Years", now offers housing, health care, and alternative living opportunities that were unavailable to their parents. John Capasso, president & CEO of Catholic Health East's Continuing Care Management Services Network, provides an overview of the System's vision for the future of this important segment of the population.



John Capasso

**What was the impetus for creating your position?**

CHE wanted to organize the expertise we have within our system to strengthen clinical quality and financial performance of long term, post-acute, residential, and other continuing care ministries throughout our RHCs. We also believe that participating in continuing care services—in particular, community based services—represents a growth opportunity for CHE.

**You have spent 20 years as an administrator in acute care and 10 years in senior living services. What value does that experience bring?**

As both a hospital executive on the acute care side and a Licensed Nursing Home Administrator, I have seen first-hand the issues and challenges that patients and their families face when making health care decisions. My personal values align with CHE's Core Values, and I want to use my talents to ensure that people receive the best possible health care while maintaining their dignity.

**What changes have you noticed over the last 10-15 years?**

Because of rising incomes and overall affluence, seniors are better positioned than ever before to make decisions that best suit their lifestyles. Thanks to the Internet, people come equipped with facts, comparisons, and pricing information. They know what they want and how much they are willing to pay for it.

On the converse side, there is an increasing number of seniors who cannot afford to pay from their own pockets. CHE will continue to serve people at every point in that spectrum.

**Any other trends?**

Ten years ago, national occupancy rates in skilled nursing communities were in excess of 90%. More than 1.5 million Americans still live in these communities, but the occupancy rates have declined because of alternative options.

Continuing care retirement communities offer value to seniors who find a senior living community appealing, but still expect a certain level of health care service if and

when they need it. Socialization, spiritual, and emotional support are additional factors that make this option attractive.

There is a nationwide movement to enhance the way in which community-based health services are being provided. Another option that is gaining popularity is for seniors to receive care while remaining in their existing homes. A practical example of this is CHE's PACE (Program for All Inclusive Care for the Elderly). The primary function of this program is to provide home-based services.

**Why are we calling it a Continuing Care Management Services Network rather than long-term care or senior care network?**

Continuing care provides the most accurate description for what our RHCs/JOAs offer. CHE has five continuing care retirement communities, 12 assisted living facilities, 36 skilled nursing facilities, and performs more home care visits annually than any other not-for-profit health care provider in the country. We provide about \$500 million in services for seniors that cannot be classified as either hospital or acute care.

The purpose of the Continuing Care Management Services Network is to organize our current resources and expertise to make them available and accessible.

**CHE has so much to offer in this area. What are your hopes and goals for the RHC/JOAs and CHE?**

Working together, we have real opportunities to impact the lives of millions of Americans. These services are important to the community, and we're now organizing in a way that will enhance delivery of service and achieve our strategic goals. We are blessed to have expertise across the system, and we can build further alliances to maximize our collective value to our patients, communities, and each other.



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Workforce: Approx. 50,000 employees.

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