LVH–Hazleton Receives SightLife™ Vision Award

LVH–Hazleton is the first in Pennsylvania to receive the SightLife™ Vision Award, which recognizes our commitment to cornea donation and advocacy. LVH–Hazleton achieved a cornea donation conversion rate of more than 70 percent in 2016, according to SightLife, a global health organization focused on eliminating corneal blindness in the U.S. and around the world by 2040. Our nurses and other care providers work closely with SightLife liaisons to educate and offer as many families as possible the opportunity to donate and give the gift of sight. This collaboration ensures each wish to donate is fulfilled.

“We are proud that our partnership with Lehigh Valley Hospital–Hazleton has helped give the gift of sight to 31 individuals in 2016 through cornea donations made possible by their dedicated team of health care professionals,” says Monty Montoya, SightLife President and CEO. “This wouldn’t be possible without the selfless decision of donors and their families who give their support even in their darkest hour of losing a loved one.”

Millions of people around the world live in darkness due to corneal blindness, which is the loss of sight caused by disease or damage to the surface of the eye. Together, SightLife and its subsidiary, SightLife Surgical, are the largest providers of corneas for transplant in the world. In addition to meeting 100 percent of the demand in the U.S., SightLife works with global eye banks in more than 30 countries.

Changes at the Hilltop Café

Have you’ve seen the display of daily selections when you enter the Hilltop Café or tried a gluten-free special? They’re being offered daily. It’s part of the café’s effort to provide colleagues and guests with healthier food selections. Plus, the salad bar has been scaled up. Stop by the Hilltop Café to try the newest selections and make a move to a healthier you.

Colleague Safety Fair

The first Colleague Safety Fair will be held in LVH–Hazleton’s first floor lobby conference room (former Subway area) on Wednesday, April 19 from 7 a.m. to 4 p.m. Information on safe patient handling, body mechanics, needle safety, emergency management, decontamination practices, proper protective equipment, emergency codes, MRU safety, weather events and fire extinguisher use will be provided. There will also be door prizes and giveaways.
For years, when people talked about improvements in health care, they discussed the latest technologies, treatments and medications. As health care evolves, however, there is a call to action for health networks to do something more. To move health care forward we must pioneer smarter ways to care for our communities.

Delivering smarter care is more than the right thing to do. It’s something we must do to ensure people can attain optimal health now and in the future. Smarter care also will help us overcome one of the greatest challenges health care providers face — caring for an aging population.

The number of people in the Lehigh Valley age 65 and older will increase 65 percent by 2030. They are our parents, grandparents, aunts and uncles, and they deserve the best care when they’re sick. Unfortunately, our seniors are typically the sickest patients. They require the costliest care and are often facing financial challenges of their own.

As government programs such as Medicare and Medicaid tighten their belts, we must be resourceful in the way we care for our growing number of seniors and other vulnerable populations, including the poor and homeless. To deliver the care they and all members of our community expect and deserve, we must be inventive and creative. Smarter.

Lehigh Valley Health Network (LVHN) is among the health care organizations nationwide that are providing smarter care by focusing on the Triple Aim—a framework that helps create better health and better care at a better cost. Achieving the Triple Aim isn’t easy, but it is possible. It’s based on the belief that quality care costs less. If you receive the care you need to stay well, you’ll be healthier and avoid costly hospital stays, emergency room visits and tests.

At LVHN, smarter care also involves listening to our community and providing the health care services people need. Here are examples of how we’re addressing our community’s needs at LVHN and delivering smarter care for you.

- **Providing convenient access:** You’re busy and don’t have time to run from doctor to doctor, test to test. Our health centers provide the outpatient services you need under one roof. LVHN has 16 health centers with two more opening this summer in Northampton County, an area where there is great demand for outpatient care. Northampton County residents already account for more than 300,000 patient encounters in Lehigh Valley Physician Group practices each year.
- **Helping people who need care the most:** Five percent of the population accounts for 40-50 percent of health care spending. At LVHN, we’re identifying the people in that 5 percent, reaching out and giving them the care they need to avoid a serious illness, which is more costly to treat. To find them, we invested in advanced analytical and clinical technology that, for example, helps find patients who had a test or medication prescribed but didn’t follow through. By encouraging those patients to get that test or fill that prescription, we can diagnose conditions at an earlier, more treatable stage and give patients the medication they need to manage their condition.

- **Deploying Community Care Teams (CCTs):** Made up of a registered nurse care manager, pharmacist, behavioral health specialist and social worker, CCTs help patients with complex health issues manage their chronic diseases. In 2016, our CCTs cared for more than 17,000 unique patients. They also helped patients and caregivers gain food, shelter, transportation, insurance, and free or discounted medications. Their care resulted in a 36 percent reduction in ER visits and a 34 percent reduction in hospital admissions among these patients compared to their previous experience.

- **Partnering with community organizations:** Caring for an entire community takes a team, and the road to wellness involves more than medical care. That’s why LVHN partners with numerous community organizations. By working together to give people the services they need – whether it’s a ride to the pharmacy or a regular meal – we’re making a collective impact on our community’s health.

For decades, countless industries have been exploring ways to work smarter, not harder. It’s time the health care industry did the same. Smarter health care is what you and your family expect and deserve. My colleagues at LVHN are honored to provide it to you.

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**Leadership Rounds Continue**

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<th>Location</th>
<th>Date and Time</th>
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<tr>
<td>7th floor</td>
<td>April 19 at 6 a.m.</td>
<td>Anthony Valente, MD</td>
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<td>6th floor</td>
<td>April 20 at 6 a.m.</td>
<td>Michael Golden</td>
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<td>5th floor</td>
<td>April 17 at 6 a.m.</td>
<td>Michele Konitzer</td>
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<td>Melissa Curto</td>
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<td>Michael Evans, MD</td>
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ADOPTING NEW HEART CARE TECHNOLOGY: FIRST, DO NO HARM

As the U.S. population lives longer, the need for more specialized heart care technology continues to grow. It’s an exciting and challenging time to be a cardiologist, as the number and kinds of tools in our medical toolbox keep growing.

But patients should be good consumers, and beware of the hype of the “first,” “only,” “latest and greatest” claims by medical manufacturers and eager providers. Not all tools are suitable for all patients, and some even may cause harm.

It’s a lesson we were reminded of two weeks ago when the Food and Drug Administration sent a “warning” to heart specialists cautioning us about risks in the use of new dissolving heart stents that were approved just months ago.

The heart team at Lehigh Valley Health Network has been following the development of this new technology for more than five years. We and other experts in the field found the science behind these devices quite appealing, but had concerns about some of the data related to the benefits and possible harm of this new stent. We delayed adding the device to our treatment arsenal until we learned more and were satisfied with the science behind this device.

This FDA advisory warned us that, while this non-metal scaffold – which holds open heart arteries after fatty plaque has been pushed aside – has been approved by the agency, there are questions about the long-term risks of its use by physicians when not closely adhering to specified guidelines. The FDA specifically stated that skirting these recommendations could increase the risks of heart attacks or death in patients, rather than improving their cardiac health.

At LVHN, we take a cautious approach to early adoption of new technology just for the sake of bragging rights. We follow and are often involved in the research to bring new technology and drugs to patients. We zero in on the questions: Will this new device or medicine improve symptoms or outcomes significantly over the current standard of care? Will it burden our patients with an excessive financial cost?

You see, it often takes a long time between clinical testing and FDA approval of a new technology, and government or insurance approval to pay for it. The payers, rightfully so, want to be sure that the device or medication is as effective as has been hoped or promised and therefore worth the financial burden on patients, taxpayers, employers and insurers.

And we, the medical providers, need to not only provide a beneficial treatment to our patients, but also one that is cost-effective. Not all goals are always aligned and that can create problems for patients.

What consumers can do is become informed participants in their care, question their doctors about the risks, benefits and cost of treatments, and, if necessary, seek second opinions.

Patients and their loved ones who educate themselves stand a better chance of getting the right care, when they need it and at a cost they can afford.

That’s a strategy our heart team takes when reviewing the virtues and shortfalls of adopting new technology. And by doing this, we hopefully protect our patients from treatments that don’t deliver on all that’s promised or advertised, or that might even cause harm.

This column was written by Ronald Freudenberger, MD, the medical director of LVHN’s Chrin Heart and Vascular Center and Chief of the Division of Cardiology. The column, which discusses risks associated with the use of new dissolving heart stents, appeared in The Morning Call and Lehigh Valley Live.

Gaining Access to the Network
Beginning Wednesday, April 19, all Hazleton colleagues must use their LVHN credentials to gain access into the network.

• Onsite users should go to citrix.lvh.com.
• When offsite, visit intranet.lvh.com.

You will be prompted to enter your system user identification (SUI) and network password. Once logged in, you can begin your daily tasks.

Weight-loss Competition Update
First place in March
No Excess Luggage Allowed, 21 pounds lost
All teams achieved a weight loss of 111.6 pounds. Great job!
COLLEAGUES ENGAGE THE COMMUNITY
This week, many colleagues seized the opportunity to educate and interact with the people of our community.

Director of Cardiac Services Barbara Hunsinger, RN, promotes the LVHN 5K Run/Walk on SSPTV News.

LVHN 5K Run/Walk Chairperson Corinne Stone promotes the event on WYLN TV 35’s Community & You.

LVH–Hazleton President John Fletcher speaks to 220 members of the Senior Choice program about the plans for the future of health care in Hazleton and the surrounding region.

Sponsors for the 5K Run/Walk meet at the Health & Wellness Center at Hazleton for a media photo.

A patient receives age-appropriate toys in a Jared Box from a Vital Health student.

Nicole Mahon (center), 13, presents Administrator of Patient Care Services Michele Kohnzer, RN, and seventh floor Nurse Manager Diane Bissol, RN, with stuffed animals to give pediatric patients comfort during their stay.

LVPG Family Medicine–Mountain Top providers Mark Radziewicz, DO, and Laura Horbauer, CRNP, participate in various community events held at the Health Center at Mountain Top in celebration of its first anniversary.

Senior Medical Director Anthony Valente, MD, Division of Critical Care Medicine at LVH–Cedar Crest Jennifer Roella, DO (on the monitor screen), Sarah Reed, RN, and Nurse Manager of Critical Care Services Charles Grove promote our Tele-ICU technology on WYLN TV 35.