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Lehigh Valley Health Network

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Neighbors Working Together



Lehigh Valley
Health Network
Community Service
1997
Building a healthier
community

A Neighbor to

“Our goal is not only to care for the sick, but to improve the health of the community.”

Photos (from top to bottom)
Kathryn P. Taylor, chairman,
board of trustees, LVHN

Shehnaz Hirji, technical partner,
won a Walking on Water Award at
the 1997 LVHN “Star Celebration”
for her exceptional caregiving

Elliot J. Sussman, M.D., president
and chief executive officer, LVHN



What makes a great neighbor? On a personal level, the answer is easy: someone who takes an interest in others, reaches out to those in need and makes the neighborhood a better place to live. Shehnaz Hirji, an employee of Lehigh Valley Health Network, is a classic example.

Last summer, a couple from India was seriously injured in a car accident and taken to Lehigh Valley Hospital. Far from home, friends and family, they were frantic about their two young daughters, who were uninjured. Hirji, a technical partner, was called in to translate, but she did far more than that for this family she didn't even know. She took the girls, ages 2 and 3, into her home for several weeks while their parents recovered, feeding and caring for them, bringing them to the hospital almost daily and even celebrating their birthdays.

This kind of personal caring is something Lehigh Valley Hospital has always been known for. A hospital is, in many ways, the heart of its neighborhood. Lehigh Valley Hospital was founded nearly 100 years ago by and for the community; our roots as a community hospital are deep and strong.

We still treat the sick, comfort bereaved families and perform all the other functions of a community hospital. But we have become something more: a specialized referral center for people throughout the

region in such areas as trauma, cancer, high-risk child-birth and cardiac care. We are evolving to meet the needs of our larger "neighborhood."

Today, we have moved beyond the four walls of the traditional hospital to become a network. Like all health providers today, LVHN faces great challenges: on the one hand, keeping abreast of the stream of new knowledge and technology that enables us to care for people in ways unknown a generation ago; on the other hand, improving our operations to provide maximum value for the health care dollar while continually improving the quality of care. The

best way to ensure success is through partnership—through the kind of *connectedness* that a great neighborhood is all about.

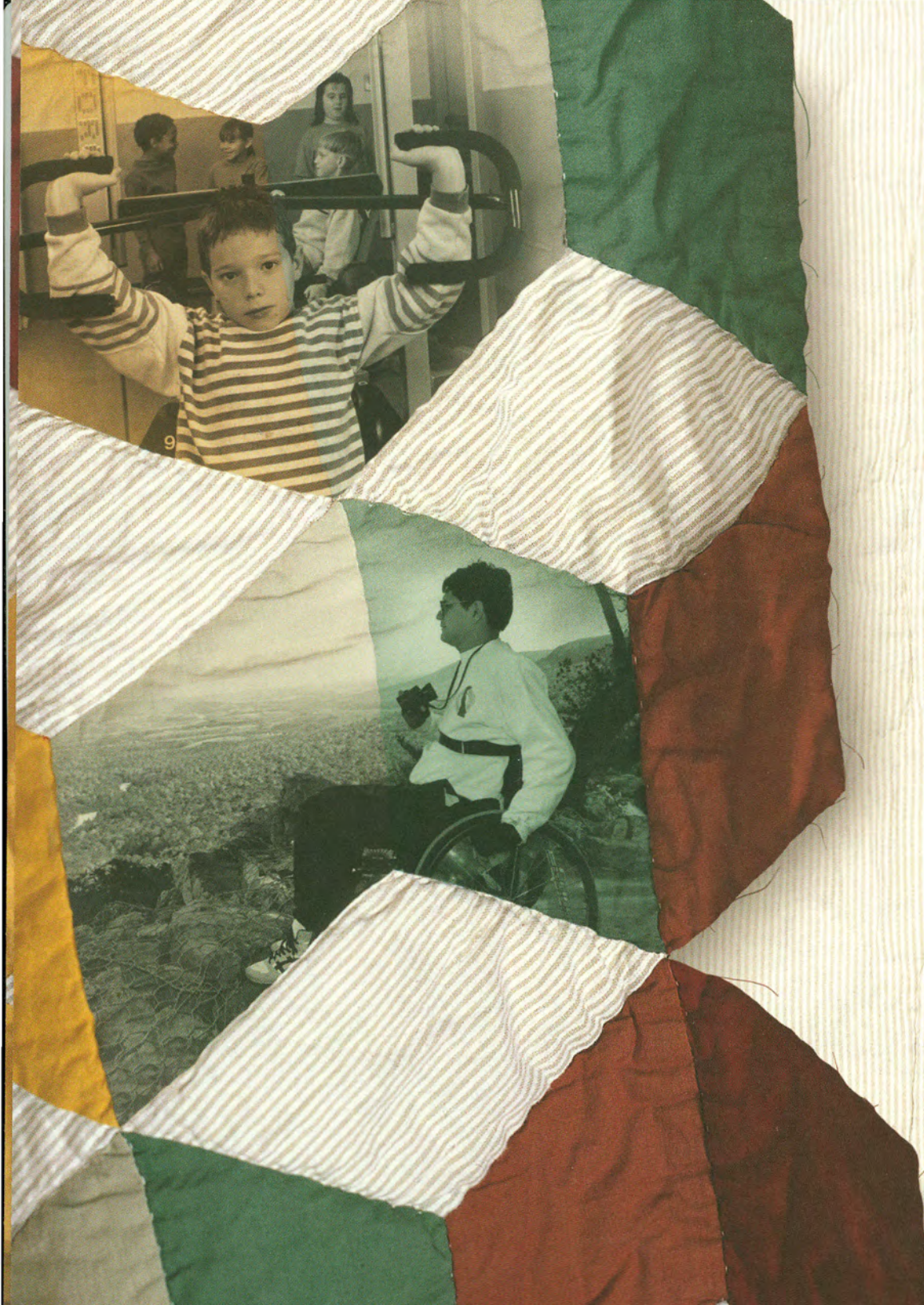
The old concept of "neighborhood" is changing today in step with a changing society, encompassing more distance and diversity and calling on people to find new ways to connect with each other. So, too, is the role of a health care organization changing and broadening. Our goal now is not only to care for the sick, but to improve the health of the community. As you will see in the following pages, we are reaching out to new groups, delivering care in new settings, and adding our unique strengths to those of other hospitals and organizations in the pursuit of that goal.

Improving the

“MESH’s vision:
a neighborhood in
which all citizens
can achieve their
fullest potential
and contribute to
the overall
well-being of the
community.”

Youngsters enjoy the smaller,
lighter-weight equipment the
Allentown YMCA/YWCA installed
for its Fit Kids program.

Sig Novak Jr. of Bethlehem—whose
wheelchair doesn’t stop him from
being an avid athlete—enjoys
the newly-accessible
view from Hawk
Mountain.



Health of the Neighborhood

The MESH Program

To improve the health and well-being of the community in ways that can be measured: that is the goal of a new program called MESH (Measurable Enhancement of the Status of Health). It is a project of LVHN's department of community health and health studies, with substantial funding from the Dorothy Rider Pool Health Care Trust.

Over the past year, 29 agencies and organizations have used MESH grants (up to \$15,000 each) in creative ways in partnership with LVHN. The results have been heartening, sometimes in unexpected ways.

Here are two examples:

The Allentown

YMCA/YWCA

created the Fit Kids

program to enhance physical fitness, self-esteem and well-being in a group of 7- to 12-year-olds who needed extra attention: the selected children were at risk of obesity and lacked the healthy outlet of after-school activities. In nine months, the physical results were striking: the boys and girls showed much improved muscular endurance, cardiovascular conditioning, flexibility and percentage of body fat. Self-esteem and character development also are expected to show improvement.

Fit Kids was a worthwhile investment for the children involved, but it has yielded unexpected benefits for two other groups as well. The smaller, lighter-weight apparatus acquired for the program is uniquely well-suited for the elderly and for women recovering from breast

cancer surgery. Both are enthusiastically taking advantage of it.

Hawk Mountain Sanctuary (Kempton, Pa.) used a MESH grant to construct a wheelchair-accessible platform at its South Lookout, one of the sanctuary's best hawk-watching and scenic areas. The funds also were used to improve the trail leading to the lookout and to make an outdoor amphitheater more accessible. Thanks to MESH, over 50 people who are wheelchair bound have taken part in the outdoor learning opportunities—and the enriching natural beauty—

of Hawk Mountain since the improvements were completed in August.

Both these programs reflect MESH's emphasis on

building a healthy community in the broadest sense. In the coming year, the MESH member organizations will work closely together to define exactly what a "healthy community" means. "We are considering individual health factors such as birth weight and good nutrition; community-wide factors such as diversity, safe streets and adequate education; and public health issues like immunization and asthma care," says MESH director Lynn Blanchard. "Then, we will choose specific areas for attention, setting targets to measure our progress." The vision: a neighborhood "in which all citizens can achieve their fullest potential and contribute to the overall well-being of the community."

Strengthening the

“A vital part of
our mission is
community
service.”

Rejuvenating its park was the first project of the Franklin Park Civic Association, which is now working on other projects with the ALERT Partnership for a Drug-Free Valley. Shown here (left to right) are Pamela Clark and Al Sparrow of ALERT and Lisa Poslock, founding president of the civic association.



Neighborhood

The Role of Community Service

A vital part of LVHN's not-for-profit mission is community service. In fiscal 1997, we contributed more than \$22 million in free care for the poor, education, community partnerships and in-kind services. (See page 13 for a detailed breakdown.)

What does this mean at the neighborhood level? The ALERT Partnership for a Drug-Free Valley offers a vivid example. ALERT is a 160-member coalition representing education, law enforcement, health care and business in Lehigh and Northampton counties. Its goal is to help build safe, drug-free communities by supporting local initiatives.

With ALERT's help, a number of neighborhoods have reduced drug activity, cleaned up parks, created innovative programs and opened doors to bring neighbors together. This year, Bethlehem's Pawnee Street Blockwatch—in the belief that "everyone has something to contribute to the neighborhood"—created The Pawnee Street Yellow Pages. "Whether you need someone to repair a computer, wash a car or cater a party, you can find help across the street or around the corner," says Diana Heckman, ALERT executive director.

The project is based on a process called "asset mapping," designed to help a neighborhood gauge its

strengths and use its many resources to solve problems. Now, ALERT is working on asset mapping with the Franklin Park Civic Association in Allentown, a group it has supported for many years. "We modify the process to suit the individual neighborhood," Heckman says. "The people of Franklin Park will find ways to use asset mapping to create strategies that are effective for them."

Lehigh Valley Hospital was one of the founders of ALERT 10 years ago. We continue to provide administrative support, staffing, funds and in-kind contributions. We look forward to an exciting future in partnership with the coalition, which is now involved in a new regional community policing initiative funded by the U.S. Department of Justice.

Community partnerships of a distinctly different nature have a similar potential for high impact on the health of our "larger" neighborhood. A series of endowed chairs—last year in pediatrics and community health and this year in surgery—provide permanent funds to support a distinguished physician's teaching and research activities. By raising the level of medical practice in the Lehigh Valley, these gifts from major donors will strengthen the health of our community.

Responding

“We have a history of
working together
as partners in
mutual respect, trust
and admiration.”

Dorothy Jirliano of Bethlehem maintains
her independence with the help of
Betsy Kozlowski, R.N., a member of the
Muhlenberg Home Health staff.

The lower photo shows the historic
Moravian Church in the heart of
downtown Bethlehem



to an Evolving Neighborhood

The Muhlenberg Merger

After three years of affiliation, Muhlenberg Hospital Center (MHC) and Lehigh Valley Hospital announced the decision to merge, thereby dedicating more resources to create a stronger, more vibrant neighborhood across the Lehigh Valley. "We have a history of working together as partners in mutual respect, trust and admiration, and that will continue as we merge our efforts to care for the Lehigh Valley," says Louis Liebhaber, LVHN chief operating officer.

The affiliation has had a positive impact on Muhlenberg's historically strong service to its community. Joint efforts have produced Women's Health at Muhlenberg Hospital Center and a coordinated community health education program. MHC is also a partner with LVH in Vitality Plus, a new program for people 50 and over.

The most fully realized example of teamwork between our organizations is Muhlenberg Home Health. In two years, the program has grown from four nurses to 10. They work with physical and occupational therapists, social service workers, home health aides and others, caring for 115 patients and their families.

"Home care is far more cost-effective than hospitalization, and the vast majority of patients would rather be at home," says MHC patient care manager Beverly Wasko. "As people live longer with chronic conditions, there will be a growing need for this service.

And new technologies will allow us to care for more and more conditions in the home."

Muhlenberg Home Health has a strong local focus: it drew its nursing staff from the hospital and is deeply involved in community events. Lehigh Valley Home Care helped start the program by providing staff mentoring, program design and referrals, and continues to supply specialized staffing and administrative support. "It would be difficult if not impossible to launch such a program alone; working with LVHN streamlines our operations and lowers our costs significantly," Wasko says.

The merger will be the culmination of this supportive relationship, joining Muhlenberg's Bethlehem site to LVH's locations at 17th & Chew, Allentown, and Cedar Crest & I-78, Salisbury Township. Redesign plans for the two latter sites are moving forward. Outpatient, diagnostic and wellness services are being concentrated at 17th & Chew. Inpatient services for the more seriously ill or injured will be consolidated at Cedar Crest once the new East Building opens in early 2000. These plans aim to provide the highest quality care in the most appropriate setting, achieving an estimated \$4 million savings in operating costs yearly. Developed in response to the evolving needs of the Lehigh Valley, our plans position us well to care for our community's health into the 21st century.

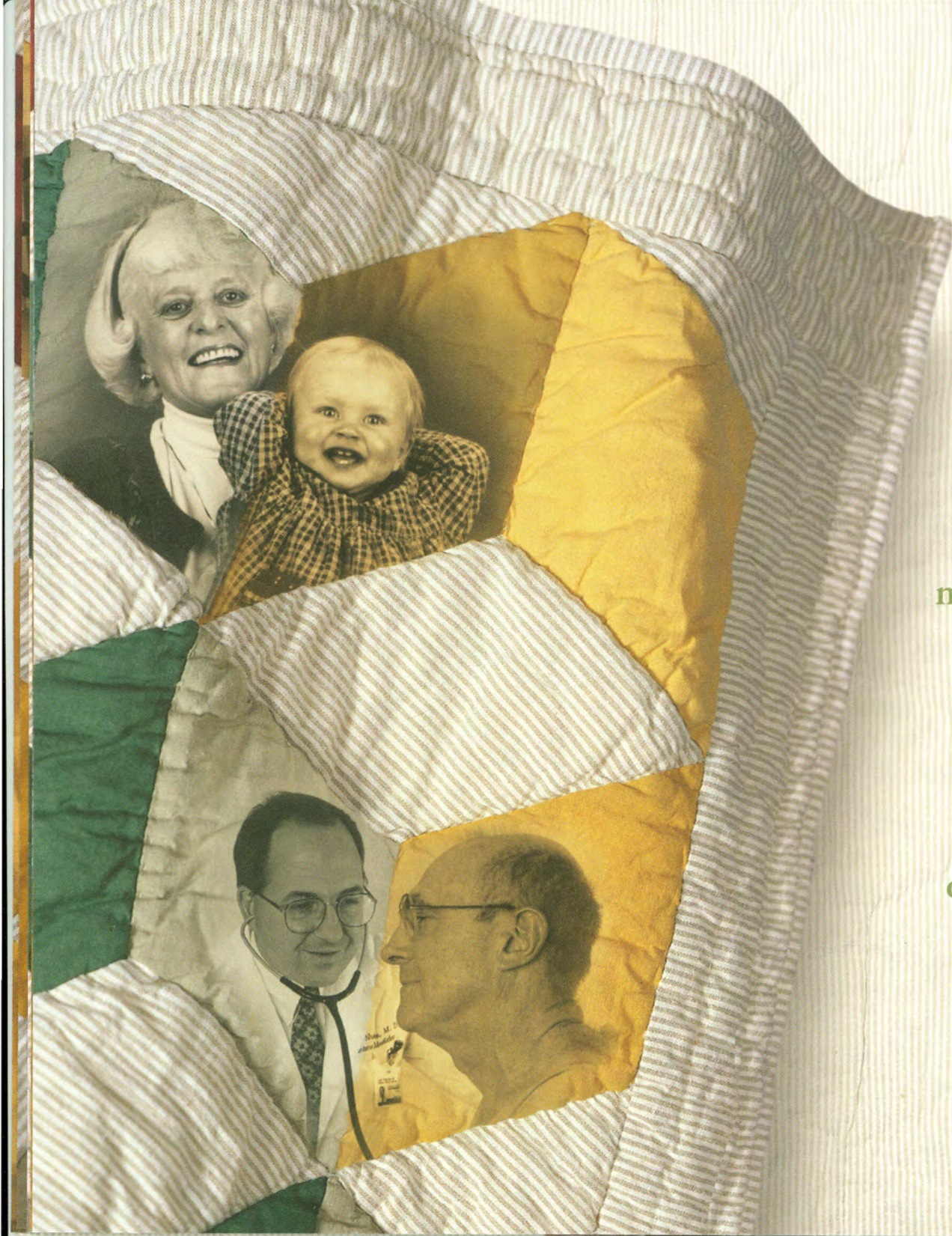
Welcoming

“Just as good neighbors do, the PennCARE hospitals share experiences and learn from each other’s strengths.”

Good preventive care is key in reducing the incidence of pneumonia (subject of a recent PennCARE study) in those over 65.

Photos (from top to bottom) Healthy grandmother Meredith Palmer of Breinigsville laughs with granddaughter Belle.

LVHN internist John Nuschke, M.D., examines Tom Reinsmith of Allentown.



New Neighbors

The PennCARE Relationship

The 11 hospitals in PennCARE function just as great neighbors do: independent entities who do not live under the same roof, they still share a deep concern for the neighborhood as a whole—and know the value of teamwork in improving the life of each of its members.

Now two years old, PennCARE is a network of partnering hospitals and physicians working to create a socially responsible integrated health system for our region. Two things distinguish us from most other systems: member hospitals remain independent, and physicians have a prominent leadership role.

The past year has been a highly successful one for PennCARE: the addition of Abington Memorial Hospital and Pocono Medical Center makes ours the largest health care network in Pennsylvania in terms of beds (2,528), annual inpatient admissions (112,000) and annual emergency visits (315,000). We employ 13,000, have combined medical staffs of 3,000 and serve an area of more than 3.7 million people over 5,400 square miles. This kind of "critical mass" gives us important leverage in managed care contracting, and the ability to better care for the uninsured, the working poor and other groups.

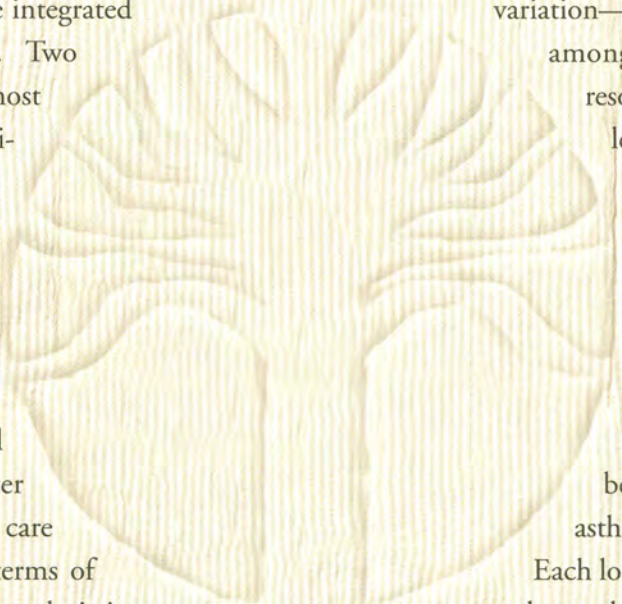
Like good neighbors, the PennCARE hospitals share experiences and learn from each other's strengths

and best practices. This year we conducted the first in a series of studies of specific diagnoses. We wanted to see what we could learn, in this case about community-acquired pneumonia (CAP), that would help us improve our cost effectiveness and quality of care.

CAP is a common admitting diagnosis in all the PennCARE hospitals, but we found significant variation—from national benchmarks and among our hospitals—in the resources used to treat it and the length of time patients stay in the hospital. "Clearly, we have opportunities to improve quality and cost-effectiveness in treating CAP," says Louis Hochheiser, M.D., PennCARE executive medical director.

Other common diagnoses will be similarly studied, including asthma and congestive heart failure.

Each local PennCARE system can then use the results to devise interventions appropriate for its own community. PennCARE members believe our approach offers the best of both worlds: the advantages of a large network, with local community health care planning and decisions. It is an unusual concept, and health networks and policy analysts around the country are watching us closely. We are convinced that, by keeping our focus firmly on the community, we will succeed in achieving significant improvements in our residents' health.



Expanding Our

“Caring for people has always been our focus, but we are finding innovative ways to provide that care.”

Pictures of a healthy community
(from top to bottom)

Susan Jones, R.N., with a young patient
in Outpatient Pediatrics at LVH.

Center photo is the site of LVHN's new
East Building at Cedar Crest & I-78, due
to open in early 2000.

Mr. and Mrs. Fred Heller Jr. and family
enjoy a walk in an Allentown park.



Idea of "Neighborhood"

Many people recall nostalgically the image of the old-fashioned neighborhood. But malls and superstores have replaced the corner market; more children spend the evening on the computer than playing hide-and-seek with their friends; and grandma is as likely to be a career woman across the country as a cookie baker across the street. Health care, too, has come a long way since the days of lengthy hospital stays and doctors who made house calls.

But these changes are not losses; they are just changes. And a lot has been gained. Technology has made a near-miraculous difference in our ability to diagnose and treat health problems. Research is teaching us how to prevent disease and live healthier lives. Today's communications link us in dramatic new ways and make us the most well-informed health care consumers in history. People have not lost their connections to each other; they never will. They simply make those connections in different ways.

At LVHN, we too are pursuing new ways to connect with the people we serve. Caring for people has always been, and will always be, our focus. But we are finding innovative ways to provide care: sending teams of caregivers into people's homes, making nurses accessible on the telephone, publishing on the world wide web,

and encouraging retirees to improve their health while enjoying social activities.

One of our primary avenues is partnership. No hospital can "do it alone" today; managed care all but prohibits it, and medicine itself is too complex, fast-changing and costly. Through initiatives like MESH and PennCARE, we are collaborating to discover our community's health needs, devise creative ways to meet them and measure how well we are doing the job.

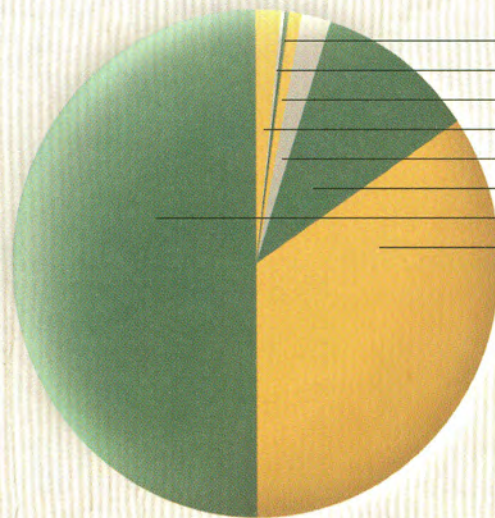
The common thread in all these activities is a growing sense of responsibility for the well-being of the community. This does not mean taking control; we believe strongly in personal accountability. It does mean giving people the education, resources and support they need to lead healthier lives, and caring for them with skill and humanity when they are ill or injured. It also means defining

exactly what we mean by a "healthy community," pinpointing strengths and areas for improvement, and thinking strategically about the best way to provide trauma care, reduce breast cancer or help people quit smoking.

The neighbors of yesterday gathered to build a barn; today, we gather to build a healthier community.

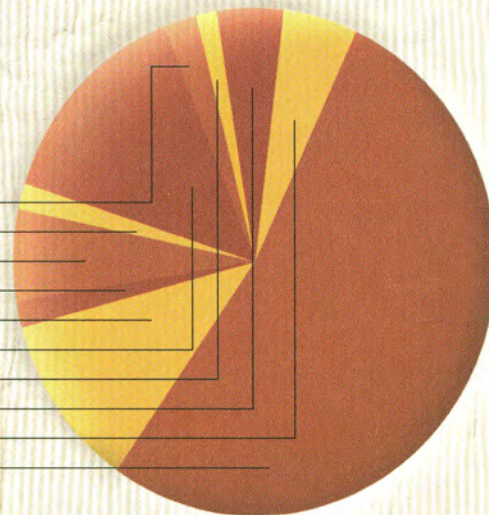
Sharing with our Neighbors

Direct Patient Care \$9,706,909



- Transitional care \$12,152
- Patient representation and interpreting services \$25,490
- Mental health/mental retardation programs \$94,867
- Medicare shortfall \$159,000
- Families in Transition \$187,562
- Clinic subsidy \$1,025,125
- Medical Assistance shortfall \$4,868,601
- Uncompensated charity care \$3,334,112

Partnerships with Local Government, School Districts and Others \$774,012

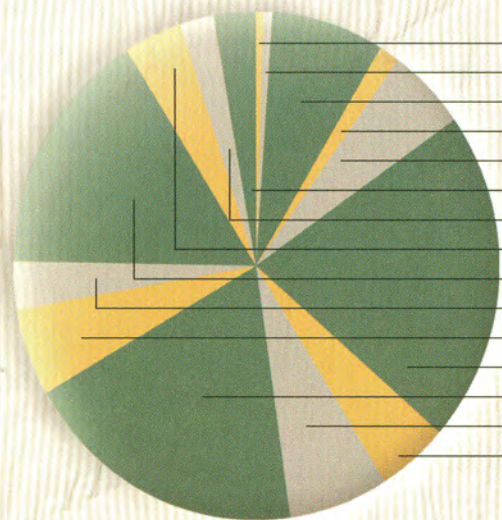


- HIV Antibody tests, Hepatitis B tests and laboratory consultative services - City of Allentown \$18,037
- Contribution to Western Salisbury Volunteer Fire Co. \$12,500
- Physical examinations - municipal firefighters \$45,236
- Free dental care - Allentown School District students \$13,573
- Contributions \$84,946
- Provision of drugs and services Lehigh County Prison \$106,718
- Free pap tests and mammograms - City of Allentown \$9,386
- Stipend to City of Allentown \$35,000
- Stipend to Salisbury Township \$38,989
- Salisbury Township School District agreement \$409,627

Community service has been part of LVHN's mission since our founding in 1899. Our goal is to enhance the health and well-being of the community, with particular efforts to help those who need special assistance. In fiscal year 1997 (July 1, 1996 through June 30, 1997), we contributed a total of \$22.3 million, including \$774,012 for partnerships with local government, schools and others; \$9,706,909 for the

direct care of patients; \$2,647,016 for community education and prevention; and \$9,123,809 for professional and patient education. In addition to these financial commitments, we donated space in our buildings, equipment, and the time and expertise of our physicians and staff. These "in-kind" contributions include involvement in dozens of health-related events and activities by community groups.

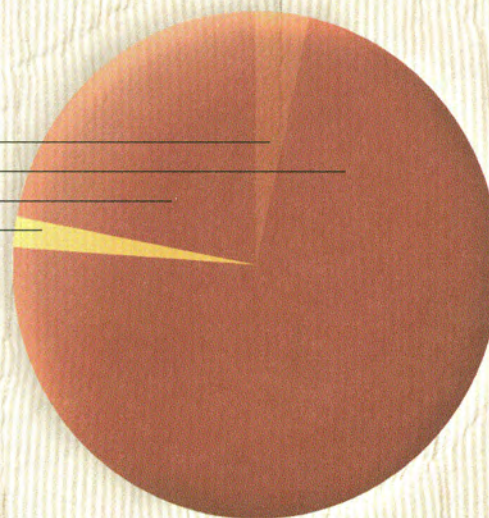
Community Education and Prevention \$2,647,016



Library services to the community	\$8,717
Contribution to Partnership for Community Health	\$15,000
Pastoral care	\$200,825
Physician referral and health information line	\$35,121
Materials to promote health-related activities	\$138,300
AIDS Activities Office	\$79,408
ALERT Partnership	\$54,852
Burn Prevention Foundation	\$103,089
Center for Health Promotion and Disease Prevention	\$418,145
Coalition for a Smoke-Free Valley	\$85,336
School health	\$146,798
Community health education publications	\$564,000
Office of Community Health	\$497,760
John and Dorothy Morgan Cancer Center	\$177,985
Womens health education	\$121,680

Professional and Patient Education \$9,123,809

Emergency medicine	\$333,352
Medical education	\$6,592,927
Nursing education	\$1,997,989
Patient education and publications	\$199,541



In-Kind Services

- Perinatal Partnership
- Support for AIDSNET
- Provision of space and equipment for clinics
 - Easter Seal Society - orthopedic clinic*
 - Easter Seal Society - cleft lip and palate clinic*
- Donation of space and assistance in developing the Northeast Pennsylvania Lions Eye Bank eye processing laboratory

- Speakers bureau
- Tours
- Voluntarism
- Recovered medical supplies program
- Operating room outreach - "Bike Safety/When Accidents Happen"
- Clinical social work - support groups & in-services
- Infection control community service

- Pediatrics - community service programs (includes children and health care week, child health month, preoperative teaching program and hospital tours)
- Pharmacy educational programs & drug information services
- Emergency room outreach - (includes First Aid For The Community and Supersitters)
- Cardiac rehabilitation education series

- Geriatric interest network
- Center for educational development and support community service
- Nursing services - community service (includes Time Is Muscle Program, AICD Support Group, and Professional Nurse Council/ Friends of Nursing activities)
- Uncompensated care & educational activities provided by private staff physicians 47,000 hours

<http://www.lvhhn.org>



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