СНЕСК

NOVEMBER 2003

Hear Ye, Hear Ye... Come Conquer the Quest!

Mark Paul, ortho tech at LVH–Muhlenberg's 4S, invites you to gather around on pages 6 & 7.

INSIDE

Imagine—A Motto to Live By
The Herbalist and the Surgeon
It's Not in Their Hearts (Heart Disease, That Is)

LEHIGH VALLEY HOSPITAL AND HEALTH NETWORK

Sugarophinaster

focus on PRIDE

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Involvement

Y'all Can Reverse Heart 8 Disease–Ya Hear! Caregivers do it and so can you

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"I'm Here for You. 10 I Have Time."

never stopped going for it

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Happy Anniversary! 16 Bernadette Kratzer, R.N., celebrates 35 years

Empathy



Survey Says...

Issues & Initiatives

More of you are reading *CheckUp!* It's one of many ways we're staying connected.

n our employee opinion survey two years ago, we heard again and again that honest and frequent communication is important to you. Today, we keep the lines open, provide venues for discussion and bring you the latest network news.

CheckUp is one way we stay connected, and in our quest to make it even better, we began an experiment in April by mailing a new more readable *CheckUp* to your homes. As promised, we listened to your feedback. More than 800 of you responded to our survey, and most of you told us you like the changes.

Seventy-six percent of you said you prefer receiving *CheckUp* at home. Many of you mentioned that you're regularly reading *CheckUp* for the first time ever. With at-work delivery, you said, you didn't receive a copy because either your department didn't receive enough, you work at a different site every day or you don't have a mailbox. Now, you're guaranteed to receive a copy, you said, and another added benefit: there's more time to peruse the issue at home. "*It doesn't get lost at work, and I am not interrupted a million times while trying to read the newsletter*," one reader said. "*It's nice to be able to read it leisurely. It allows me to study it more*," another reader said.

Some of you, however, prefer to receive *CheckUp* at work because you're concerned about cost. One reader commented, *"It bothers me to think about how expensive it is to send CheckUp to each bome of each employee. It should be placed in our mailboxes—in fact, 1 think I'll send that in for a Working Wonders idea."* There's no need for a Working Wonders idea. The additional cost is \$1.60 per employee per year (we aren't taking it out of your paycheck), and it's money well-spent because we're significantly expanding our readership. Not only are more of you reading *CheckUp*, but 47 percent of you said others in your household read *CheckUp*. We're telling our stories throughout our community, and that should make you feel great. In fact, some of the most encouraging comments came from people who rely on *CheckUp*—one person said *CheckUp* helps her learn about new programs to update her database for Medicare auditors; many said it puts a face on new doctors and other colleagues; and others love the service anniversaries—one person even congratulates those she knows celebrating time here.

We also know we can improve. Although 95 percent of you said you learn about the network through *CheckUp* and enjoy reading about your colleagues, we could better inform you about finances, and we'll do our best to give you more updates. You also mention that while you appreciate the wonderful job our nurses do, there are many other great people here to profile. You offered a treasure trove of story ideas, and a *CheckUp* colleague will follow up with many of you.

Our stories are now on the intranet, too.

Some of you said you're concerned the printed version will go away, but we assure you the intranet is another way to access *CheckUp* and not a replacement for the printed magazine. We make every effort to communicate through many other ways—employee forums, department head meetings, conversations with your supervisor and listening to you when we see you in the hallway.

We'll keep listening and asking your opinion. We'll survey you about *CheckUp* again next year, and soon we'll launch another employee satisfaction survey...because *your voice matters*. Thank you for your feedback!

Lou Liebhaber, Chief Operating Officer

He's the PANO MAN

When Ray Sullivan's fingers start walkin' ...everyone starts talkin'

His long, thin fingers tap the ivory keyboard, the notes resonating throughout the Jaindl Family Pavilion at LVH–Cedar Crest. Slowly, people gather around. Some smile. Some cry. But nobody leaves.

At the center is support partner Ray Sullivan, dressed in scrubs and playing the baby grand piano as if he's on stage at Allentown Symphony Hall. He sways, closes his eyes, sings soulfully. He is one with the music.

"The response stuns me every time," says Sullivan. "When I see smiles and tears, I know the music helps people let go of their problems, whether it's a family with an ill loved one or a colleague who just finished a rough day."

Sullivan, 51, has performed his own "music therapy" since his teenage years. He learned to play piano at age 14 by his grandmother's side, playing the gospel tune, "Oh, How I Love Jesus." He played for more than 20 years using only his right hand—until he joined some area rock-and-roll, top-40 and rhythm-and-blues bands in the early 1980s.

"My band members said, 'you have to learn to play the right way,' " Sullivan says. "I had taught myself, so I didn't know any other way. But I went to school and learned to play differently."

Today, Sullivan sounds as smooth as a concert pianist. Listen to his rendition of Billy Joel's "Just The Way You Are" and it sounds like you're listening to the original piano man.



When nursing staff donated a baby grand piano in honor of president and CEO Elliot J. Sussman, M.D., at the 2002 Friends of Nursing gala, Sullivan, the choir director at his church, saw a way to combine his passion for music and his work at LVHHN.

He first played the baby grand during a 9-11 remembrance last year, and he's since received special permission to play regularly. He's often there 2:30 - 3 p.m. weekdays (before his shift), playing gospel, classical, jazz and contemporary favorites.

"Sometimes people think I'm a doctor because I wear scrubs," Sullivan says. "I tell them, 'no—doctors heal people.' But I hope my music gives families and patients a little comfort. I'm blessed to do this. I can't imagine life without music."

Kyle Hardner

CHECK

Imagine

The lessons never end in the learning lab of life for Ronald Swinfard, M.D., new physician leader and former high school chemistry teacher

If Ronald Swinfard, M.D., were to describe the perfect job, it would fit the one he's just stepped into as LVHHN's new chief medical officer (CMO).

"To work with an organization that truly cares about developing its people is a dream come true," says Swinfard, who started here mid-October. "What's so unique and attractive here is the strong emphasis on interpersonal skills and the chance to build collaborative relationships."

Swinfard, who replaces interim CMO Michael Weinstock, M.D., comes to LVHHN from the University of Missouri—Columbia, where he chaired the department of medicine and the division of dermatology at the school of medicine, and was an endowed professor. He also has been in private practice as a dermatologist.

Not only is he thrilled to be here, but LVHHN is thrilled to have him. "He is humble, but also driven, and it's hard to be in his presence and not get a sense of empathy, integrity and wisdom," says chief operating officer Lou Liebhaber, who chaired a committee that reviewed nearly 150 candidates nationwide. "While his principal focus will be on our physicians, he has high regard for the contribution every member of our hospital community brings to patient care and will engage people across the network."

From the jungles of Vietnam to classrooms and hospital boardrooms, Swinfard has made the most of every experience to hone his leadership skills. Here, he'll spend time in physician practices, seeking to understand the people, the concerns and how care is delivered. "I'm a coalition-builder, and I want to get to know our physicians and find out who the natural leaders are and what the dominant issues are," Swinfard says. "I am not a strong hierarchical manager. I'll assist, direct, nurture and empower people to express their ideas because everyone has a positive contribution."

You don't have to scratch the surface deeply to see a physician with a teacher's passion for people. His enthusiasm was there years ago as a high school chemistry and biology teacher and remains strong. "Teaching is continual, with friends, colleagues, patients, families," Swinfard says. "It's not a one-way street. It's communicates, and this organization communicates, communicates and communicates. This is going to be a wonderful growth opportunity for me, too."

Elizabeth McDonald



The Surgeon and The Herbalist

You could say they're opposites, but their traditional and not-so-traditional ways complement each other

When Karen Sciascia, D.O., was in sixth grade, she was thrilled to get an anatomy book for her birthday. Soon she was dissecting frogs and worms on the kitchen table and planning her life as a surgeon and family doctor.

When Helene Leonetti, M.D., was in high school, her guidance counselor told her: "You can be a teacher or nurse." Leonetti chose nursing—but at age 37, she took on medical school and defied traditionalists who told her she was "too old." Today, you'll find her prescribing herbs and meditation...and her famous hugs.

If you believe opposites attract, you won't be surprised to find these gynecologists in practice together. But if you visit Bethlehem Gynecology Associates, you'll learn how much caring they have in common. "We assure each woman, 'I'm going to take very good care of you,' " Sciascia says. "Healing means involving you as an equal partner and giving you our undivided attention."

Sciascia sees herself as a problem-solver, explaining both surgical and nonsurgical options. "I look at the person in front of me and try to understand her needs," she says. "Women feel like they are losing control if they need surgery. You have to make sure they are confident you'll do the right thing for them."

Leonetti sees herself as a holistic healer, connecting with the total woman. "If I stay present and focused on my patient, everything I need to do is done," she says. "My mantra is, 'Be here now.' I help women know how special they are."

Leonetti discovered just how special she was, particularly after her "eventful menopause." Now, she specializes in menopause and researches a natural transdermal progesterone cream. "Menopause forces us to consider ourselves first," she says. "It's a whole life change, and I'm here to be a guide."

Whether you're interested in traditional or not-so-traditional medicine, routine gynecologic care or more complex needs, or ways to live a healthier, less stressful life, you have choices with these women. "Helene and I are the odd couple, but we complement each other perfectly," Sciascia says. "After all, there's more than one right way for women to take care of themselves."

Brantley Claris

Want to know more? For a brochure about Bethlehem Gynecology Associates, call 610-402-CARE.



Helene Leonetti, M.D. (left), is the herbalist. Karen Sciascia, D.O., is the surgeon. And they're here for women.

Helene Leonetti is the author of Menopause: A Spiritual Renaissance, available at the Moravian Book Shop, Bethlehem.

CHECK

There's No Head at This Table!

This Quality Quest Award-winning team's roundtable forum improved staff satisfaction—and you can, too



(L - R) Rich Reitz, sterile processing technician, Fred Griesel, technical partner, Maria Kita, R.N., and Kristen Sohaney, R.N., gather around to feast on new ideas for the operating rooms.



new refrigerator in the operating room staff lounge, a vending machine and an equipment-repair logbook may not seem like big investments, but to the OR perioperative team at LVH–Cedar Crest, they were instruments of change.

They were just some of the ideas stemming from a roundtable group formed to reduce staff turnover and improve job satisfaction. The concept, borrowed from King Arthurian days of yore, was to create a forum for open discussion where every idea has merit and everyone is equal. "You need to have people committed to seeking resolutions," says Patricia Cressman, R.N., director of the OR (she will soon have a new job at LVH–Cedar Crest). "You can't just sit and complain."

Kristen Sohaney, R.N., a forum member since its inception, soon learned the roundtable was the right place to listen and be listened to. "At first, I was quiet," she says. "But now I'm very comfortable sharing ideas." The team's roundtable discussions were so successful, it won a 2003 Quality Quest Award for demonstrating "Serious Commitment."

With guidance and ground rules from organizational development, the group gathered ideas and created an "opportunity list." As ideas became reality, morale improved and turnover reduced from 18.1 percent in 2000 to 9.3 percent in 2002. The group meets monthly and routinely surveys staff about satisfaction.

Inspired by the Cedar Crest team's success, the perioperative team at LVH–Muhlenberg formed its own roundtable (and so did the radiology department). Safer and more convenient parking for on-call night staff and a picnic table with easy access for meals on the fly have enhanced the work environment. "Sometimes little things make all the difference," says Aileen Pilarski, R.N. "That picnic table was a big deal."

A key driver of momentum has been management's support and involvement. "It's great to have a place to bring our issues and be heard by management," says perioperative administrative partner Nancy Schlener, a 23-year LVHHN veteran and LVH–Muhlenberg roundtable member. "This is a wonderful experience, and I would recommend it to any department."

Want to form your own roundtable?

- Recruit volunteers. You'll want a cross-section of people with different skills and experience who are solution-oriented and committed to representing their colleagues, not just themselves.
- Gather ideas from staff. If someone outside the roundtable feels
 passionately about an issue, invite him to present.
- Organize. Categorize ideas, i.e., safety, staffing, scheduling, and rank them from easiest to hardest.
- **Communicate.** Post roundtable minutes on a staff bulletin board, and share outcomes and achievements right away. This builds your group's credibility and shows positive change.
- Rotate membership. Give your colleagues a chance to serve, too. Fill one or two slots with someone new every six months.

Joe Candio and Elizabeth McDonald

They Conquer the Quest! How do you achieve quality? Just ask the Quality Quest award winners. Here's how they do it:

• Make a patient's stay great.

Units throughout LVH–Muhlenberg are sensitive to patient privacy and inconvenience, post Press Ganey results and reward colleagues.

• Start OR cases on time.

The LVH–Cedar Crest operating room improved the timely start of first cases scheduled each day, resulting in more patients able to undergo surgery that day.

· Eliminate unnecessary work.

The LVH–Cedar Crest clinical services team observed staff to get a feel for non-valueadded work and then reworked processes to help clinicians spend more time with patients.

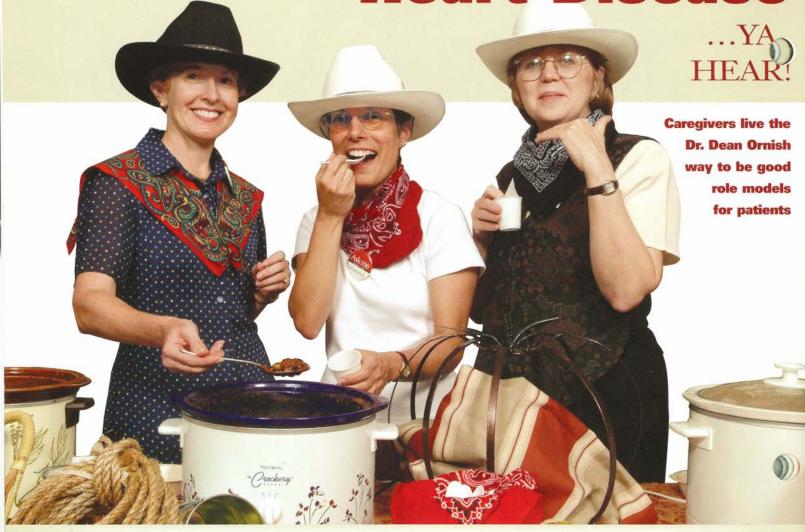
• Be empathetic during stressful situations.

The LVH–Muhlenberg behavioral health team empathetically communicates to calm patients and has reduced the use of restraints and medications.

• Create a smooth admission.

The ambulatory staging unit at LVH–Muhlenberg streamlined admissions and has pre-procedure medications on the unit.

Y'ALL CAN REVERSE Heart Disease



"It's hot, hot, hot," says Barb Carlson (right), as she tastes some chili at a cookoff in the Anderson Wing with Kim Sterk, R.N. (left), and Juanita Carrabudzek, yoga specialist.

Barb Carlson checks her voicemail. It's Kim Sterk, R.N: "Hi Barb. Please call me. And remember...*Be happy! Be Ornish!*"

That's how Sterk ends her voicemails these days, now that she, Carlson and their team are implementing and living the Dr. Dean Ornish Program for Reversing Heart Disease at LVHHN. You might recognize the name Dean Ornish—he's a best-selling author and California internist who has proved through 20 years of research that you can reverse heart disease through lifestyle changes.

People throughout the country have benefited from his program that combines aerobic exercise, stress management, group support and low-fat, vegetarian nutrition to decrease cholesterol, blood pressure and chest pain. "One man who needed transplant surgery couldn't walk or participate in activities he loved," says Carlson, LVHHN program director. "After three years on Ornish, he was playing golf and didn't need the transplant anymore."

Carlson, Sterk, dietitian Deb Maurer and yoga specialist Juanita Carrabudzek are adopting the Ornish lifestyle themselves to be great teachers for their patients. Consider a day in Carlson's life: She eats whole-grain cereal with soymilk for breakfast. She lunches on burritos (made with fat-free cheese, corn, beans and cilantro), fruit and fat-free yogurt. She checks in with her "support group," her colleagues and husband, to talk about stress and get encouragement. She learns from Sterk about a new yoga tape and restaurant that prepares heart-healthy pasta. She also walks her dog, lifts hand weights and makes time for fun. At first, Carlson was hesitant about giving up fish, chicken and chocolate, and finding time for exercise. Today, she's 10 pounds lighter and proudly says, "I'll do the Ornish program for life. It helps our patients believe they can, too."

Carlson and the team (also including chefs, exercise physiolgists, social workers and cardiologists Gerald Pytlewski, D.O., and Robert Biggs, D.O.) guide patients for four hours, twice a week during 12 weeks. They exercise together, dine, teach meal preparation, do yoga and discuss challenges and achievements.

If change becomes a challenge, each caregiver living Ornish can share a personal story. Take Sterk—in just two-and-a-half weeks, she lost 5 pounds and reduced her cholesterol from 220 to 170. "It's difficult to change your life," Sterk says. "But we don't do it alone, and our patients won't either."

A Woman Ahead of Her Time Nothing stopped Nancy Crane-Roberts,

R.N., Ph.D., from going for it.

Today, she is a Spirit of Women award winner.

On the farm where she grew up, Nancy Crane-Roberts, R.N., Ph.D., was a natural nurse. "I took care of everybody-cats, dogs, kids," says Crane-Roberts, Spirit of Women's health care provider award winner.

But a nurturing career wasn't in the cards right after high school. Though she received a college scholarship, her family couldn't afford the room and board. Instead, Crane-Roberts worked, got married and had two children. Six years later, she divorcedand to provide for her children and find fulfillment, she pursued her dream of nursing school.

There, Crane-Roberts fell in love with a creative writing professor named Len. They married and had a son. "He'd do the laundry and make scrambled eggs for the kids," she says. "I'd listen to taped lectures in the car and study after the children went to sleep."

Crane-Roberts didn't stop there. She earned a master's degree and became one of the first nurse practitioners in the Lehigh Valley, mentoring other advanced-level nurses. Inspired by teaching, she worked seven more years to achieve her doctorate. "She still found time to shuttle us to school, attend our activities, and remodel our farmhouse," says her daughter, Tammy Masiado, senior researcher in health studies.

In the 1980s, Crane-Roberts broke new ground researching the value of home care for low-income

mothers. "My mom would visit neighborhoods where she sometimes needed a police escort," Masiado says. "Often, she'd buy diapers and formula with her own money."

Twenty-five years later, Crane-Roberts still has passion for people. As director of health services for Cedar Crest College, she's created programs to educate college girls about depression and anxiety, nutrition, date rape and more. Crane-Roberts also teaches at Temple University, conducts research here and cares for children at ABC Family Pediatricians.

You could say Crane-Roberts is the first lady of "doing it all." In fact, she's much like another empowered first lady, Hillary Clinton. "Like Hillary, my mom is an inspiration to all women who balance work, family and public service," her daughter says. "I want to tell everyone how proud I am of her."

Nancy Crane-Roberts, R.N., Ph.D. (far right) of Hellertown, Spirit of Women award winner in the health care provider category, marches ahead of her time with Spirit of Women community recipients Doris Dzienis (left) and Claire Baran, both of Bethlehem.

Want to Know More? Read their full stories at www.lvh.org.

Pamela Maurer



"I'm Here for YOU. , I Have Time."

It's a slogan Kathie Keim, R.N., lived every day of her life, even as she battled a deadly disease

"and when I pick up one of those pens, Megan says, 'That's mine! Kathie gave it to me.' "

When she was diagnosed with cancer, Keim was told she had only three months to live. But, driven by the desire to see her son, William, graduate from high school and attend college (he's now a junior at Penn State), she thrived for two-and-a-half more years, using

humor to get through. "She loved to laugh and volunteered as a clown to cheer up children in pediatric units," Forstburg says. "She made others laugh on days most people would've been feeling sorry for themselves."

Throughout the years, Keim's colleagues rallied around her. When she was first diagnosed, they brought her gifts-home-cooked meals and a huge bouquet of flowers with personal notes attached. "Then she told us politely, 'I'll be okay; you don't need to keep doing this,' " Hoferica says. "That was classic Kathie. She was the first to help others but never asked for anything in return."

On her last day, friends gathered at her bedside on the open heart unit. "(Thoracic surgery chief) Raymond Singer, M.D., spoke about her strength," remembers transitional skilled unit nurse Terry Hilliard, R.N. "Kathie would've been overwhelmed at the outpouring of support."

After her death, Keim's colleagues found a letter Keim penned. "When you work for one network for so many years," she wrote, "you are touched by and touch so many lives, it's truly amazing ... I want you all to know how much I've appreciated everything."

Whether dressed as a clown, working at LVHHN or relaxing at home, Kathie Keim's cheerful grin put patients at ease and made colleagues smile

> er dry sense of humor put patients at ease. Her warmth brought smiles to ailing children. Her strength valiantly carried her through a personal battle with cancer, allowing her to live far longer than most thought possible.

On Sept. 5, Kathie Keim, R.N., lost her battle with cancer at age 50, but not before earning the respect and admiration of everyone around her.

A 29-year employee, Keim cared for patients in pediatrics, post-surgery and home care. But it was as a case manager in cardiac care, where she, her colleagues and patients forged the deepest bonds. "We were like one big extended family," says fellow case manager Cindy Hoferica.

Open heart unit nurse Lisa Forstburg, R.N., remembers how her 5-year-old daughter, Megan, adored Keim. "Kathie always brought Megan pens and notepads," Forstburg says,

SERVICE STARS of the MONTH

She was a friend, confidante and colleague. Nurses on the open heart unit (OHU) watched her bravely fight cancer for more than two years. So when Kathie Keim, R.N., arrived in the emergency department on Sept. 5 in full code status, Keim's OHU friends responded.

Carolyn Davidson, R.N., in the progressive coronary care unit (PCCU), and Marie Kelly, R.N., OHU director, met with OHU colleagues. They offered to bring Keim to OHU, where her hospital family cared for her. They also tracked down her son, a Penn State University student, so he could say his last goodbye.

Davidson and Cindy Meeker, R.N., stayed at her bedside and took care of her every need. They spoke to her, joked with her, cried and prayed. "Kathie may have lost her battle for life that night," says Patti Kopko, case manager, "but she left this world surrounded by family and friends."



(L-R) Cindy Meeker, R.N., Carolyn Davidson, R.N., and Marie Kelly, R.N.

SERVICE STARS

Congratulations to Award Nominees Nicole Reimer, R.N., progressive coronary care unit 7C LVH-Cedar Crest Nominated by Tina Dalessandro, R.N., clinical process development

Greg Lansberry, R.N. Nominated by Tina Dalessandro, R.N., clinical process development

Debra Peter, R.N., PCS Nominated by Tina Dalessandro, R.N., clinical process development

Donna Carty, case manager, care management Nominated by Tina Dalessandro, R.N., clinical process development

Barbara Weidman, R.N. Nominated by Tina Dalessandro, R.N., clinical process development

Dr. Bradford Young, D.M.D., Dental Clinic Nominated by Patricia Atno, dental LVH–17

Lisa Durkin and Sharyn Rappaport

WORKING WONDERS



Bridesmaid Sharyn Rappaport (*left of bride*) used some of her Working Wonders reward money to buy a wedding gift for bride and fellow idea-owner Lisa Durkin.

On her wedding day in early August, Lisa Durkin had everything—the dress, the flowers and the hotel. Her hotel accomodations were paid for courtesy of, believe it or not, Working Wonders. Durkin's friend, Sharyn Rappaport, gave her the "gift" with reward money from an idea they shared.

Durkin's and Rappaport's idea focused on inhalers for patients. "Because an LVHHN patient's stay is typically five days, and the inhalers we purchased were able to last a month, we thought it was wise to find smaller inhalers," Durkin says.

Rappaport, a former retail pharmacist, knew such a product was available. So the two put their heads together and found an inhaler containing 60 doses as opposed to the former that contained twice as many doses.

Joe Candio

How It Adds Up

IDEA Giving patients a smaller inhaler so dosage isn't wasted BY Lisa Durkin and Sharyn Rappaport, inpatient pharmacists

ESTIMATED ANNUAL SAVINGS \$9,452 AWARD AMOUNT \$709

Submit an idea via e-mail's bulletin board at Forms_/LVH or by clicking "Working Wonders submission form" on the intranet (www.lvh.com).

CHECK

What's Happening at LVHHN NOV. 4

Take The "Gooey" Out Of GUI E-mail 1 - 3 p.m.

Tue., Nov. 4

Wed., Nov. 5

LVH-Cedar Crest

Anderson Wing Lobby and

Classrooms 1, 2 and 3

LVH-Cedar Crest training room To register, go to Forms_/LVH. Right-click on Intermediate GUI for CC Site.

NOV. 5

NOV.

6

NOV.

Blood Drive 6:30 a.m. - 4:30 p.m.

For an appointment, call 610-402-8999. For information, call Karen Harrison at 610-402-1123

Your Last Chance to Contribute!

Thu., Nov. 6 Pledges eligible for the 2003 United Way community campaign prizes must be turned in at this deadline. Pick up a form from your department's United Way chairperson, or access the new "United E-way" pledge form (on your work computer's SSO Toolbar). For more information, call Betty Anton at 610-402-8897.

Kick Up Your Heart Rate With Boost your energy and burn up fat

in 30 minutes by increasing your heart rate and muscle mass during this fun circuit-training workout. Classes also meet at Lower Macungie Township Community Center and the



Banko Center, LVH-Muhlenberg. For details and to register, call 610-402-CAR

STARTING Oct. 20

Get Your Flu Shots Here!

(L-R) Employee health nurses Janice Kiefer, R.N., Carol Guanowsky, R.N. (both of LVH-Cedar Crest), and Beverly Wasko, R.N. (LVH-Muhlenberg), pilot the "Flumobile," LVHHN's rolling influenza vaccination destination. Vaccinations for colleagues during employee health walk-in office hours begin Monday, Oct. 20, while the "Flumobile" will visit all three hospital sites, department by department, from Nov. 3 - 14. All health care personnel are strongly encouraged to get vaccinated, and remember...the flu vaccine cannot give you the flu!

Walk-in hours at **EMPLOYEE HEALTH** during flu season:

LVH-Cedar Crest

Mon., 7 - 8 a.m. and 1:30 - 4 pm. Tue., 1 - 3 p.m. Wed., 7:30 - 8:30 a.m. Thu., 1:30 - 4 p.m. Fri., 7 - 8 a.m.

LVH-Muhlenberg

Mon., 1:30 - 4 pm. Tue., 9 - 11 a.m. Wed., 2 - 4 p.m. Thu., 8 - 10 a.m. Fri., 8 - 10 a.m.

LVH-17th and Chew Tue. and Thu., 7 - 8:30 a.m.

Vaccinations will be offered at the following days and times outside **LVHHN CAFETERIAS:**

LVH-Cedar Crest Mon., Oct. 27 and

Wed., Oct. 29 11 a.m. - 1 p.m. Thu., Oct. 30 4 - 5:30 p.m.

LVH-Muhlenberg

Mon., Oct. 20 and Mon., Oct. 27 4 - 5 p.m. Tue., Oct. 21 and Thu., Oct. 23 11 a.m. - 1 p.m.

LVH-17th and Chew

Tue., Oct. 28 and Thu., Oct. 30 11:30 a.m. - 1 p.m. Mon., Nov. 3 4 - 5:30 p.m.



Old-fashioned Lancaster Shopping Tour* For details, call Missy Cope at 610-402-5702.

Tue., Nov. 11

Thu. and Fri.

Nov. 13 - 14

| 100 | 101 | 17 |
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| | 111 | 1 |
| | 1.0 | Sec. 14 |
| 19 | | 1.1 |
| 1.0 | 1.0 | 144 |

NOV.

20 & 25

LVH–Cedar Crest Craft Bazaar* Anderson Wing Lobby

For details, call Nikki Maranki at 610-402-8525.

Dealing With Change NOV. 19

Wed., Nov. 19 2166 S. 12th St. 1st floor conference room

9 - 10:30 a.m. Register for this Preferred EAP workshop by calling 610-433-8550.

Escape the Computer Blahs!

Learn Word, Access, Excel, GUI E-mail, PowerPoint and Windows NT at these classes.

Thu., Nov. 20 noon - 4 p.m. LVH–Muhlenberg training room Tue., Nov 25 8 a.m. - noon LVH-Cedar Crest training room To register, go to Forms_/LVH or Forms_/MHC on the bulletin board. Right-click on I/S Computer Education Request.



LVH–Cedar Crest Sock Sale* For details, call Nikki Maranki at 610-402-8525

Tue., Nov. 25 Anderson Wing Lobby

Sat., Nov. 29



New York City on Your Own*

For details, call Nancy Schmoyer at 610-402-8519 or Fran Sajkowicz at 610-402-3430.



Meet Lehigh Valley Hospital and Health Network's New Physicians



James Daley, M.D.

DEPARTMENT Medicine

DIVISION Physical Medicine—Rehabilitation

PRACTICE Good Shepherd Physician Group

EDUCATION Western New England College; UMDNJ/Robert Wood Johnson Medical School

RESIDENCY UMDNJ/Robert Wood Johnson Medical School–Johnson Rehabilitation Institute



Helene Leonetti, M.D.

DEPARTMENT Obstetrics and Gynecology

Gynecology PRACTICE Bethlehem Gynecology Associates

EDUCATION Columbia University; Universidad del Noreste Escuela de Medicina; Rutgers Medical School College of Medicine and Dentistry

RESIDENCY Jersey City Medical Center



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Muhlenberg Behavioral Health EDUCATION

St. Petersburg State IP Pavlov Medical University

RESIDENCY Maimonides Medical Center



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DEPARTMENT Family Practice PRACTICE Orthopaedic Associates of Allentown

EDUCATION

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Critical Care Medicine

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West Virginia University School

Texas Tech University Health

Primary Children's Medical Center

Shawn Weigel, D.O.

Pediatrics

DIVISION

PRACTICE

EDUCATION

of Medicine

RESIDENCY

Sciences Center

FELLOWSHIP Ohio State University

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Najma Khanani, M.D.

DEPARTMENT

Psychiatry DIVISION Consultation-Liaison Psychiatry

PRACTICE LVPG–Psychiatry

EDUCATION

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RESIDENCY SUNY Downstate/Kings County Hospital Medical Center

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Gynecology

PRACTICE Bethlehem Gynecology Associates

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RESIDENCY St. Luke's Hospital

Timothy Yeager, D.O.

DEPARTMENT Pediatrics DIVISION General Pediatrics

PRACTICE LVH Pediatric Inpatient Care

EDUCATION Albright College; Philadelphia College of Osteopathic Medicine

RESIDENCY Children's Hospital of San Francisco



DEPARTMENT Surgery DIVISION Ophthalmology

PRACTICE Lehigh Valley Eye Physicians

EDUCATION University of Delaware; Kirksville College of Osteopathic Medicine

RESIDENCY Philadelphia College of Osteopathic Medicine



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1 Hey, Baby!

New at Health Spectrum Pharmacy are pharmacists' baby pictures, as displayed here by LVH–Cedar Crest pharmacy tech Rex Parker. It's a contest that's part of National Pharmacy Week (Oct. 19-25). Each Health Spectrum location will have a poster with baby pictures and current pictures. Turn in your match and be eligible to win a gift basket.

2 Oh My Gosh, They Dunked Kenny!

Dozens of Kenny Carrington's environmental services colleagues lined up for a good-natured shot at "dunking the operations manager" during the group's picnic celebrating National Environmental Services Week. A movie night, awards and plenty of prizes were also doled out, paying tribute to those who keep LVHHN squeaky-clean.



3 Nite Lites—Kelly and a Million Bucks

Television star Kelly Ripa (far right) was one of more than 1,500 guests attending Setting The Pace at Nite Lites, held at Nazareth Speedway. The headlinemaking event, which surpassed \$1 million for the first time, benefits LVHHN cardiac care. Shown with Ripa here are (I-r) her husband, Mark Consuelos; Katherine Harris, M.D.; Christopher Morabito, M.D.; Kelly Costello, M.D.; and Ripa's brother-in-law Michael Consuelos, M.D.

4 Putting Along

Sixteen Health Network Lab colleagues took on the miniature golf course at Putt U for a big tournament. Jeannie Butler, immunology, along with her husband Keith (second row, seated second and third from right) stole the game with the best scores.

5 Happy Birthday EAU

One year and more than 2,000 patients later, the express admit unit (EAU) team at LVH–Cedar Crest threw a birthday party to celebrate its achievements. The EAU, a more efficient way to admit patients with physician orders, was opened as part of the Growing Organizational Capacity project to improve patient flow.

6 In Memory of Dr. Oliver

Kim Heller, surgical technician at LVH–Muhlenberg, competed in the Duke Blue Devil Ironman Triathlon on Oct. 11 in memory of her best friend and running partner, Glenn Oliver, M.D., who passed away with lung cancer. The swimming, biking and running event took place at Duke University and is the only triathlon in the nation in which all the proceeds benefit cancer research. Heller was sponsored by Kumar Pendurthi, M.D., and Ravindra Kandula, M.D.

7 Rev That Engine

Director of security Jerry Kresge and facility services manager Mike Mauser created six new motorcycle-parking spaces at LVH–Cedar Crest to make more car spaces available for patients. Parking their hogs are (from left to right) Lou Gabrielle, engineer, James Wagner, engineer, and David Rice, coordinator, microsurgery lab.





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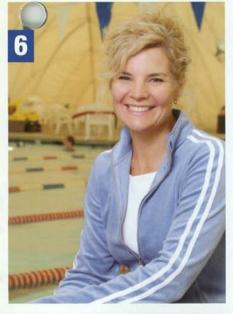
IN OUR

6

-











View from the top

Joe Ossiander, R.N., of the cardiac catheterization lab, puts his signature on the final steel beam for the new LVH–Muhlenberg building. Minutes later, the 28-footlong beam was hoisted into place, marking an important milestone in the project. "To have the entire steel structure completed in only eight weeks is extraordinary," said LVHHN president and CEO Elliot J. Sussman at the Sept. 29 "topping off" ceremony. Construction work continued on schedule despite 18 inches of rain that fell from June through August. Completion is slated for Spring 2005.



NOVEMBER 2003



Celebrating 35 years!

Bernadette Kratzer, R.N.

Infection control practitioner

Most Memorable Moment Here

My "capping" ceremony as a student nurse at the Allentown Hospital School of Nursing

Other Areas Where I Worked LVH—17th and LVH—Cedar Crest

operating rooms

My Inspiration at LVHHN

The late Takeo Yamashita (a general surgeon who practiced here for many years). He was the personification of a man who brought honor to his profession and cared unselfishly for this community.

Best Virtue

I consider myself to be the "average joe."

Favorite Vice

I do like to "stimulate the economy."

Favorite Cafeteria Food The soup-and-salad bar

Intranet: www.lvh.com • Internet: www.lvh.org

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Happy Anniversary! NOVEMBER 2003

YEARS

Anita Beekman

David Brown

Respiratory Therapy

Clinical Engineering

Info Services Operations

OR Centralized Scheduling

Beverly Dillman

Kim Dreisbach

Gerald Lawrence

Suzanne Micek

Susan Nevada

PGMF—Pediatrics

Nursing Float Pool

Francis Paulson

Mary Frost

Obstetrics

Security

PACU

AiJee Na

Security

35 YEARS

Bernadette Kratzer Infection Control

YEARS

Fave Kulhamer Patient Accounting

YEARS

Terry Bogunovich Medical Records Vicki Girodo 4C Medical/Surgical Unit **Debra Jones**

Sleep Disorders John Kiriposki

Courier Services Dorothy Pfeiffer Info Services Development Sally Zemlansky

Transitional Skill Unit

YEARS

Anita Breitfeld **Obstetrics Nancy Fahler Operating Room Mary Green** AMB Surg Unit **Janet Peck Obstetrics**

Lynn Roth Neonatal

Agnes Schwartz Partial Hospitalization

Special Care Unit

YEARS

Marketing/Public Affairs

Larue Gellock

Gina Leiby

Janet Murray

Clinical Trials Office Aileen Pilarski **Operating Room Phyllis Smith**

Admissions **Barbara Thomas**

Hospice Unit

YEARS

Tammy Abraham LVPBS—Muhlenberg Primary Care

Catherine Akelaitis Operating Room

Lisa Bates Nursing Float Pool

Linda Berardine Group Health Claims G&A

Jacqueline Bortz Trexlertown Medical Center

Joycemol Chacko Nursing Float Pool

Mark Chesterton Radiology-Diagnostic

Kelly DeAngelo Pediatric Intensive Care Unit

Joanne Deeney Pain Management **Nicholas DiMartino**

Hamburg Family Practice Center **George Dwinell**

Plant Engineering Erika Farleigh

Operating Room **Regina Filipovits** Case Management

Jennifer Gazdick Transitional Trauma Unit

Michele Grietzer Nursing Float Pool

Kathie Homyak Medical Practice

service to LVHHN.

Thank you for your continuing

Lisa Kresge LVPG Billina

Lewis Kunkle Patient Accounting

Brenda Kuntz Transitional Trauma Unit

Monica Lazarus Nuclear Medicine

Jeri Lemanek Hemodialysis Center **Roxanne Masino**

ER Billing **Robin Montgomery**

Managed Care-Provider Relation

Tricia Moyer Hamburg Family Practice Center

Jennifer Nytz Perinatal Telemedicine **Beth Oudin**

College Health Services **Pamela Repetz**

Gynecologic Oncology **Irene Rock**

LVPG Collections Wendy Sheetz

College Health Servic

Joyce Speakman LVPBS-MPC West Broad Street

Gail Stern Dept. of Psychiatry

Charles Stivala Spec Pharmacy—CC Infusion

Patti Watson Hamburg Family Practice Center

Kristie Williams Special Procedure

Rosanne Yost Housekeepina

> Non-Profit Org. Postage PAID Allentown, PA Permit #1922

Ann Pierre Partial Hosp Adult Psych **Judith Post** Emergency Service—17th **Constance Seidel**

Pediatric Intensive Care Unit Michelle Trzesniowski

Donna Bobo

Deborah Gaston Crisis Intervention

Housekeepina Lucinda Koch

Home Care MSO Central Intake

Sleep Disorders

LEHIGH VALLEY

HOSPITA

NOVEMBER 2003

Bridge-Building to the Future

Growing Organizational

like a good bridge.

The best ones are well-designed, have a solid foundation, and a dedicated team of architects and builders with a shared vision. And so it is with LVHHN's Growing Organizational Capacity project.

It's been 16 months since GOC began, and the project is being extended through 2004. The mission: expand our capacity to care for patients by improving processes from admitting through discharge. The dilemma is not unique to LVHHN, but because all hospitals are not alike, we looked within our ranks and found talent to start solving the problem.

"I am amazed by the imagination, energy, enthusiasm and skill of our people," says GOC leader Rick Mackenzie, M.D., vice chairman, emergency medicine. "We make the solution real."

So how are we doing? Look inside at how we bridge our capacity to the future! 127

GOC Bridge Builders (L-R) Steve Bogar, senior management engineer, management engineering; Marlene Ritter, clinical information analyst, care management; and Karen Marchetto, subject matter expert, information services, are key GOC data researchers and analysts.

If We Build It, *They Will Co*

It was a benchmark year at LVHHN. There were 831 more admissions than projected and a record-setting 3,062 admissions in June 2003. We formed new physician partnerships, expanded outreach, created effective marketing strategies, and further strengthened our solid reputation based on positive patient experiences.

"We had the largest growth in volume this year than the last six years and a 5.9 percent increase over the year prior," says GOC leader Jim Burke, vice president, operations. "Thanks to people working on that every day, we had the capacity to accommodate those admissions."

The last 16 months has brought significant achievements (see below) and an honest assessment. But nobody's resting on his laurels. There's more work to be done in reducing ambulance

The Bedrock

- Installed tele-tracking system, improving patient transport efficiency.
- Formed patient transport team for discharges, adding 6.5 FTE (full-time equivalent) positions to the LVHHN team.
- Formed D'BST bed cleaning teams. (Bed cleaning turnaround at LVH–Cedar Crest reduced from 210 minutes to 60 minutes; LVH–Muhlenberg reduced from 210 minutes to 35 minutes; LVH–17 reduced from 210 minutes to 44 minutes.)
 - Created three patient flow coordinator positions.
 - Set up electronic bed-tracking system at all three sites.
- Created express admit unit (EAU), meeting physician demand for direct admits of patients with orders.



"Growing capacity isn't just about bricks and mortar. It's about human capacity, too." —Beth Karoly

diversions and wait times in the emergency department, and in getting patients in beds sooner. The GOC team is reviewing its goals and making adjustments accordingly. "We increased our capacity, but demand also rose," GOC leader Rick Mackenzie, M.D., says. "Imagine what it would have been like without GOC."

Making GOC a success is in everyone's interest. Satisfied patients build our reputation, bringing more people to our doors. "Admissions drive revenue," Burke says. "Along with careful cost management, that drives our Shared Success Plan benefiting our employees, too."

of Our Success

- Opened Short Stay Hospital at LVH–17th Street to help alleviate OR demand at Cedar Crest.
- Formed "Find a Bed" team. Twenty-seven new beds were added in FY'03, with an additional 40 beds projected by year's end.
- Transfer Center requests increased 82 percent in June '03 vs. June '02, going from 97 to 177. The number of patients turned away declined from 11 to 9.
- OR holds, measured in hours the OR is shut down because of backlog, have held relatively steady despite record admissions. Bed availability was not a factor, but rather other issues currently being addressed.

She Drives Data

As a senior clinical information analyst immersed in gathering and interpreting GOC data, Beth Karoly is growing her own capacity for learning. She's forging new partnerships, gaining a broader understanding of marketing, finance and information systems, and developing new skills.

"I've learned as much from GOC as I've given to it," Karoly says.

An education graduate of Bloomsburg State College, Karoly came to LVHHN 24 years ago. She began as a medical-surgical unit clerk but soon moved into respiratory therapy, becoming a registered therapist and department supervisor.

After 15 years, a hunger for new challenges led her to the clinical information side of care management. The work appealed to her strong analytical mind. "I like seeing if a change in practice influences patient outcomes," Karoly says.

It was an exciting time to explore unchartered territory, much like GOC. "Challenges are good, and I like what we're doing," she says. "It all comes down to better serving our patients and strengthening our organization."

In Search Of

New patient flow coordinators work with colleagues finding beds

Anticipating the Demand for Beds

When you're in customer service and we are—you can either react to consumer (patient) demand or be pro-active. Now, a manufacturing principle addressing the dynamics of patient demand is being considered by the GOC team as a way of working more efficiently.

Like most hospitals, LVHHN's patient flow is driven by a "push" system: units like the emergency department and the express admit unit (EAU) provide the impetus to "push" patients to receiving units. The "pull system," however, anticipates demand by building strategies to automatically and uniformly meet that demand.

"The transition to a pull system requires less resources and will streamline processes," says Tami Lee, R.N., director, 4C and the EAU, who is leading the GOC Pull Team.

It's a system that increasingly is being adopted by hospitals, says Terry Capuano, R.N., senior vice president, clinical services. "The result is a smoother operation that's better for staff and patients."

Watch for more details in future GOC updates in CheckUp!

Patient flow coordinator Lisa Bates, R.N.

The elderly lady looked forlorn. It had been hours since she came in to the emergency department. But with no open bed on a floor, and the ED backing up with more patients, she had to wait.

It's a scenario that touches the heart of every caregiver, and patient flow coordinator (PFC) Lisa Bates, R.N., is no exception. When she saw the woman's distress, she stepped in. A few phone calls later, the woman was transferred to a bed and the ED could accommodate one more patient. "We turned it into a good day," Bates says with a smile.

For Bates, it's all about the patients. Which is why, after years as a bedside nurse, she became a PFC, one of three newly created positions to open bottlenecks from admission to discharge and in between. "The bottom line is making our patients more comfortable in a timely manner," Bates says.

Bates and her colleague, Margaret Stoudt, R.N., start their day checking in with patient logistics. From there, they round and assess bed availability by talking to staff nurses, case managers and physicians. They pitch in where needed. "The other day, I took a trauma patient from the ED to get a CAT scan so he could be admitted to trauma-neuro," Bates says. "That freed up the ED nurses to help waiting patients."

Bates credits her years as a float nurse as good experience. "I learned how to be more adaptable and think independently," she says. "I've built working relationships with many physicians and staff. I believe in our mission and like seeing the progress."