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Accolades accolades

Five VITAS Clinicians Hospice Certified

Four registered nurses and a home health aide at VITAS Innovative Hospice Care® of Greater Pittsburgh have passed the National Board for Certification of Hospice and Palliative Nurses, demonstrating their knowledge, skill, experience and general excellence in end-of-life care.

Adding CHPN (Certified Hospice and Palliative Nurse) to their professional credentials are:

- Evalisa McClure, RN, BSN, CHPN, of Pittsburgh, patient care administrator. She has worked for VITAS since 2003.
- Jayne Clements, RN, CHPN, of Murrysville, admissions manager. She has been with VITAS since 2001.
- Jan Blawas, RN, CHPN, of Trafford, manager of continuous care, which provides short-term, intensive palliative care for up to 24 hours a day to terminally ill patients who qualify for inpatient care but prefer to remain at home. Jan has been with VITAS since 2003.
- Karen Macaleer, RN, CHPN, of Harrison City, a VITAS field nurse who visits patients in their homes. She joined VITAS in 2004.

In addition, Olivia Morris, CNA, CHPNA, of Saltburg, has obtained hospice certification as a VITAS home health aide. She has been with VITAS since January of 2006.

Susan Jackson Wins Children's Hospital of Pittsburgh of UPMC's 2007 Frank LeMoine Award for Excellence in Nursing

Susan Jackson, R.N., took a momentary break from her job as a nurse at Children's Hospital of Pittsburgh of UPMC to attend the hospital's annual Frank LeMoine Awards Luncheon. Her mind still on her patients, she didn't immediately notice when her name was announced as the recipient of Children's 2007 LeMoine Award for Excellence in Nursing.

"I was in shock," Jackson said. "I didn't even realize it was me, until I looked over at my manager Diane Ankney and saw she had tears in her eyes."

Each year, the LeMoine Award recognizes a registered nurse at Children's who is distinguished for his or her clinical expertise, leadership, professionalism and advancement of pediatric nursing.

Jackson has been a nurse at Children's for 21 years, and says the best part of her job is the patients and their families. "I've met so many wonderful, strong people," Jackson said. "It's amazing what kids can bounce back from."

Jackson works on 10 North, which is where neurosurgery, orthopaedic and trauma patients receive care. She is a clinical leader whose responsibilities include, but are not limited to, taking care of patients, clinical oversight of the unit on a day to day basis and mentoring of new staff.

Colleen Hughes Named Gateway Rehab Center's 2007 "Thank You" Award Recipient

Colleen Hughes, executive director at Westmoreland Drug and Alcohol Commission, Inc. (WeDAC), was named the 2007 recipient of the Gateway Rehabilitation Center "Thank You Award."

Hughes, who holds a M.S. degree in business and industry counseling as well as being a Certified Addictions Counselor Diplomat, oversees the development and implementation of necessary operational activities involving the planning, organization direction, and administration of the drug and alcohol service delivery system. Additionally, she administers the use of all funds for the provision of services under the Single County Authority (SCA).



Susan Jackson



Show are employees who were honored for 25 or more years of service to Canonsburg General Hospital. Back row l-r: Mark Wilcox, 25 years; Cheryl Sickles, 25 years; and Mollie Metz, 30 years. Front row l-r: Alice Wright, 30 years; Anne Marie Dubich, 30 years; Shirley Vowcheck, 25 years; and Bonnie Thompson, 25 years. Missing from the photo are: Larry Perrine, 35 years; Janet Greene, 30 years; Nancy Chaney, 30 years; Sandra Greer, 25 years; Daneen Penn, 25 years; Jo Lynn Papak, 25 years and Mary Lou Fal, 25 years.

Canonsburg General Hospital Service Awards

Ninety-one employees of Canonsburg General Hospital were recently honored for their years of service. – 1,190 years total - to Canonsburg General Hospital.

The event was held at the Holiday Inn, Meadowlands. Remarks of appreciation were made by Jim Rosenberg, WPAHS Executive Vice President; Joseph Macerelli, Chairman/Board of Directors and William Thomeier, M.D., president/medical staff. Kim Malinky, President/CEO presented the awards.

Concordia President/CEO Awarded for Missions Work with LCMS



Keith Frndak

Concordia Lutheran Ministries President and CEO Keith Frndak was one of six recipients of the inaugural Common Chest award, given by the Lutheran Church Missouri Synod for demonstrating outstanding and faithful missions service.

Specifically, Concordia has funded three orphanages in Kenya, a medical clinic in Kibera, and a soup kitchen in Pittsburgh, among several other projects. The capital for this work comes from revenue generated by Providence Pharmacy, the in-house pharmacy of Concordia Lutheran Ministries. Frndak insists that Concordia's mission work is part of its responsibility as good stewards.

University of Pittsburgh Awarded Hartford Foundation Center of Excellence in Geriatric Medicine Renewal

The John A. Hartford Foundation has awarded a "Center of Excellence Renewal" to the University of Pittsburgh, School of Medicine, Division of Geriatric Medicine under the direction of Neil M. Resnick, M.D. This award provides up to \$750,000 to be expended over approximately a 60-month period. Founded in 1929, the John A. Hartford Foundation is a committed champion of training, research and service system innovations that promote the health and independence of America's older adults. Through its grantmaking, the Foundation seeks to strengthen the nation's capacity to provide effective, affordable care to this rapidly increasing older population by educating "aging-prepared" health professionals (physicians, nurses, social workers), and developing innovations that improve and better integrate health and supportive services.

Allegheny General Hospital Receives AHA Achievement Award for Excellence in Secondary Prevention of Cardiovascular Disease

Allegheny General Hospital (AGH) has been recognized by the American Heart Association (AHA) for excellence in the secondary prevention of cardiovascular disease. The AHA's Get With The Guidelines-Coronary Artery Disease (GWTG-CAD) Initial Performance Achievement Award is bestowed to hospitals that demonstrate commitment and success in implementing a higher standard of cardiac care that effectively improves treatment of patients hospitalized with coronary artery disease.

Heritage Valley Wins VHA Leadership Awards

The Sewickley and Beaver campuses of Heritage Valley Health System have been selected as winners of several Voluntary Hospital Association Leadership Awards for 2007 for Clinical Excellence.

These awards honor organizations that have differentiated themselves around national performance standards by achieving exceptionally high levels of performance. Heritage Valley has met this high standard through performing at the 90% or above level on clinical core measures. The Sewickley campus was recognized for surgical complications and infection prevention, the continued control and prevention of blood stream infection cases and the successful implementation and results of a rapid response team. The Beaver campus was recognized for performing at the 90% or above on clinical core measures for acute myocardial infarction.

Jameson Health System Receives VHA Pennsylvania APEX Award

Jameson Hospital has been awarded the VHA Pennsylvania APEX Award for excellence in cardiac care. Jameson first dedicated a team in 2003 to improve heart failure indicators in conjunction with VHA. In December 2005, Jameson received a Certificate of Excellence from VHA for successfully attaining Green Light Status for all four Congestive Heart Failure (CHF) Core Measure Indicators. The newest award is in recognition for efforts in achieving Green Light Status for Heart Failure Core Measure indicators for the third quarter of 2006.

Excela Health Reaccredited as Comprehensive Cancer Program

The Commission on Cancer (CoC) of the American College of Surgeons (ACoS) has granted three-year approval with commendation to the cancer program at Excela Health through Latrobe Hospital.

Approval by the CoC is given only to those facilities that have voluntarily committed to providing the highest level of quality cancer care and that undergo a rigorous evaluation process and review of their performance. To maintain approval, facilities with CoC-approved cancer programs must undergo an on-site review every three years.

Exela Health provides cancer care in concert with UPMC Cancer Centers at Arnold Palmer Pavilion, Mountain View Medical Park.

Tri-State Pediatrics Receives the Unison Health Plan of Pennsylvania Gold Star Award for Excellence

Tri-State Pediatrics, part of the Heritage Valley Health System, recently accepted Unison Health Plan's 2007 Gold Star Award.

Tri-State Pediatrics met or exceeded numerous benchmarks in categories such as quality of care, effective health care delivery and promotion of best practices, accessibility to patients and administrative efficiency.

"This award represents the highest level of professionalism and dedication to our patients and we are very pleased to be recognized for our achievements," said Jim Scibilia, M.D., of Tri-State Pediatrics.

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EDUCATION

Exciting Education Opportunities Offered to VAPHS Nurses

For over seven years, VA Pittsburgh Healthcare System (VAPHS) has offered programs for the advancement of nursing careers. A variety of tuition and salary support programs have already offered assistance to 240 VA Pittsburgh employees. Some of these are as follows:

Employee Incentive Scholarship Program (EISP) provides funding that is used as a tool to assist VA Pittsburgh in meeting its staffing needs by providing tuition support for employees entering accredited Licensed Practical Nurse (LPN) or Registered Nurse (RN) programs. Through the EISP, VA Pittsburgh has been able to sponsor employees who are interested in careers in nursing to fill this critical health care occupation.

VA Nursing Education for Employees Program (VANEPP) provides salary and benefit replacement dollars to facilities whose employees are enrolled in full-time LPN and RN programs. The employee is granted authorized absence to attend school full-time and works at the medical center during significant breaks in the academic calendar. The employee receives their full salary and benefits up to authorized limits while attending school. To be eligible for VANEPP, an employee must be within two years of completing their degree (one year for LPN programs). Applications are reviewed by a committee, and then by the

healthcare system director.

National Nursing Education Initiative (NNEI) provides funding for VA RNs to complete or expand their formal educations. It is primarily aimed at supporting associate degree and diploma RNs to obtain a bachelor's degree in nursing so that they may advance in their careers. It can also be used to fund advanced degrees which support the mission of VA Pittsburgh. NNEI helps ensure that VA nurses are educationally prepared to provide the highest quality of health care to veterans across the full range of clinical practice roles. In addition, NNEI prepares nurses for their evolving roles as VA continues its transformation from a hospital-based system to one that focuses on primary care and care management in outpatient, home, and community settings.

The strings? To be eligible for participation in NNEI and EISP, an employee must be continuously employed with VA for a minimum of one year, must be accepted to, or enrolled in, an authorized education or training program, must not be obligated under any other Federal program to perform service after completion of the course of training, and must have a record of employment that demonstrates a high likelihood that the employee will be successful in completing the education and working in that field. In addition, all NNEI and EISP participants are required to perform a service obligation in a full-time VA health care position for a period of up to three years, at the completion of their academic programs.

VA has also initiated a program which provides financial assistance to nurses wishing to become Certified Registered Nurse Anesthetists (CRNA). The requests are considered on a case by case basis, based on the availability of funds and the number of CRNA positions needing to be filled; the applications are reviewed by a committee, and then by the healthcare system director. The applicant must have a BSN, recent critical care experience, and be fully accepted



Joseph Hanney, Ph.D., associate chief of staff for education, and the entire education department assist nurses at VA Pittsburgh Healthcare System with scholarship programs and other educational opportunities.

into an accredited CRNA program. Salary replacement may be available to enable the student to attend school on a full-time basis. Tuition support is available through the EISP.

These are just the scholarship programs! VAPHS has a long tradition of nursing leadership and teaching; we are currently pursuing MAGNET status, and we remain one of the most exciting places to pursue a career in nursing.

For more information on these programs, current VA nurses should contact Emily Klaczak at (412) 365-5723 or Emily.Klaczak@va.gov. For information on becoming a VA nurse, please contact Charlotte Foster at (412) 365-4815 or Charlotte.Foster@va.gov.



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LECOM Faculty Member's Research Published

The Journal of Applied Sciences Research recently published the results of a study conducted by Seher Kahn, Ph.D., of the Department of Pharmaceutical Sciences at the Lake Erie College of Osteopathic Medicine, along with former LECOM pharmacy school faculty member Reza Karimi, Ph.D.

The study sought to identify the elements of success for non-traditional students entering into a graduate pharmacy program. The authors looked for the keys to success for non-traditional students, who are identified in the study as students who are "at least 24 years old" or have been "out of the educational system for quite some time." Thirty-five non-traditional students from three different class years were surveyed for the study.

Drs. Kahn and Karimi concluded that non-traditional students are motivated self-learners with a strong educational background in the sciences. The authors noted the age of students was not a barrier for aptitude in an accelerated pharmacy program – in fact, life experience played a role in the students' success.

By acknowledging the keys to success for non-traditional students seeking to enter a pharmacy graduate program, the study's authors intend for the information to be used by pharmacy schools to advise these students as they prepare to enter the classroom.



Dr. Seher Kahn



EDUCATION

Summer Nursing Institute Helps Students Get a Glimpse of Future Career in Nursing, Health Sciences



During the last week of June, 9 students from several Pittsburgh area school districts experienced a taste of their futures in health care at the Summer Nursing Institute. The students, who came from 8th, 9th and 10th grade, all have an interest in a nursing career and took part in the program that was sponsored by La Roche College, UPMC Passavant and UPMC Passavant Cranberry, the Theta Mu Chapter of Sigma Theta Tau (Nursing Honor Society) and Johnson & Johnson's "The Campaign for Nursing's Future."

The institute, created to help introduce students with an interest in medical careers to the exciting, challenging and rewarding career of nursing, drew students from the following school districts: Mars Area, North Allegheny, North Hills, Quaker Valley, Seneca Valley and South Fayette.

Their week began at La Roche College with classroom preparation that focused on basic health care and background information about the nursing profession and other health careers. The students then moved on to CPR and First Aid training and certification, including instruction on how to apply bandages, tourniquets and slings. The next two days were spent at UPMC Passavant Hospital, learning about hands-on patient care.

To show that not all nursing care happens at the bedside, instructors arranged for students to tour a STAT Medivac Helicopter. During the presentation, the crew told students about the skills a flight nurse would be required to have and how essential nursing care is during a crisis. Students also spent time in the emergency department and learned about the process by which patients are seen according to the gravity of their medical conditions.

After their final day of training, each student received a certificate of completion and was recognized at a special ceremony at UPMC Passavant's Donor Hall. Parents and other family members were invited.

"We are so proud of our students," said La Roche College Department of Nursing Professor Lynette Beattie, R.N., M.S.N., who also serves the college as assistant director of nursing. "They were attentive and enthusiastic, and they really seemed to grasp that they will one day play a role in the care of people who truly rely on nurses to make a difference in health care."



Beattie reported that feedback on the Summer Nursing Institute was extremely positive, and organizers hope to repeat the experience during summer 2008.

"Nursing is the nation's largest health care profession, and nurses encounter many challenges – and rewards – in their daily experiences," Beattie said. "We want future nurses to see all that nursing offers."

First row (left to right): Ashley St. Jacques, Karen Applegate/La Roche B.S.N. Student, James Uhler. **Second row (left to right):** Julie Forbes, Sarah Zicardi/Passavant, Amanda Walasik, Sydney Fondi. **Third row (left to right):** Christa Lamendola, Ashley Wertz, Jill Larkin/Passavant. **Top row (left to right):** Connor Donoghue, Jillian Young, Lynette Beattie/La Roche College, Pam Chapman/La Roche College, Beth Waclawski/La Roche College.

For information about the program or to be put on a mailing list for future Institute programs, interested people may contact La Roche online at www.laroche.edu or e-mail Lynette Beattie at lynnette.beattie@larache.edu.

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EDUCATION

Public Health Supercourse A Global Health Online Library

BY SARA BARADA

Supercourse (<http://www.pitt.edu/~super1/>) is a global repository of lectures on public health and prevention targeting educators across the world. Supercourse has a network of over 41300 scientists in 171 countries who are sharing for free a library of over 3162 lectures in 26 languages. Using an open source model, faculty from around the world have access to up-to-date public health and prevention information that can be used to educate students in these fields of study.

The Supercourse program was initiated at the Graduate School of Public Health, University of Pittsburgh, by a number of faculty members including Ronald Laporte Ph.D., the current Co-director of WHO Collaborating Center, and Professor of Epidemiology at the university. The website currently has 18 developers with faculty from the University of Pittsburgh and other international universities in India, Russia, Pakistan, Iran, Mexico, China, and Korea.

The program was originally funded by NASA and the National Library of Medicine. It has the highest page ranks for Indian Health, Molecular Epidemiology, Russian Health, and is in the top 10 of many others. The website ranks 9th of 328,000,000 pages for Global Health in Google searches and receives 75 million hits a year.

Ayesha Aziz, a first year MPH student at the Department of Health Policy and Management, Graduate School of Public Health, University of Pittsburgh, got involved in the Supercourse project through her mentorship relationship with Dr. Laporte. She worked closely with other Supercourse developers at the University of Pittsburgh to develop a separate Supercourse webpage on global health systems.

Among Miss Aziz's tasks was to review the current lectures on the website and then select and gather the ones relevant to the issue of health systems. Also, she researched, along with the designated team of developers, articles on health systems

in journals such as Health Affairs and Health Policy and Planning. The authors of the articles were then contacted to send in their lectures and become members of the Supercourse network.

The newly developed Health System webpage has almost 191 articles discussing issues such as health care services, health policy, Human Resources Management in health care, and health care financing. Among the contributors to the Supercourse is Judith Lave Ph.D., the Chairman of the Health Policy and Management Department, who contributed lectures on health care financing. Other lectures were contributed by international faculty from Russia, Kazakhstan, India, Brazil, and Pakistan.

Contacting authors and faculty from around the world and adding their lectures on the Supercourse is an ongoing process. Moreover, members of the Supercourse are contacted regularly to keep them involved in the process and to provide them with feedback on the activity of the website. Progress reports are developed and shared with members of the Supercourse measuring the impact factor of the lectures using the Yahoo Rankings service.

In the future, more faculty from around the globe are expected to join the Supercourse Network. As for the Health Systems webpage, more faculty from the Department of Health Policy and Management will be soon contacted to contribute their lectures and become members of online library. The Supercourse is just another means by which the University of Pittsburgh, Graduate School of Public Health extends its reach to the world and follows its mission of making a difference in the world of public health.

For more information on the Department of Health Policy & Management or the MHA, MPH, or JD MPH academic programs, contact Donna Schultz at dschultz@pitt.edu or (412) 624-3123 or visit www.hpm.pitt.edu.

La Roche College Receives Grant from the Buhl Foundation

The Buhl Foundation has awarded La Roche College a grant for \$96,070 to be used for equipment needs within a multi-purpose medical simulator laboratory that will be housed in the College's Palumbo Science Center. The laboratory, open to students this fall, will be one of the first of its kind housed at a liberal arts institution. Currently, most simulator laboratories are in use only in university medical schools.

The funding will enable the College to create a mock surgical operating room for students in the Nurse Anesthesia Master's Degree Program. Specifically, the grant provides for the purchase of two software-controlled simulator mannequins, which serve as the students' patients. Each life-sized mannequin – one man and one baby, commonly referred to within the medical industry as "SimMan™ and SimBaby™ – is anatomically correct. This helps students perfect their technique of administering anesthesia under an extensive array of patient scenarios, according to Professor Don Fujito, Ph.D., program coordinator of undergraduate and graduate health science programs at the College.

Through the Buhl grant, the College plans to purchase additional mannequins that will be used for basic and advanced instruction in first aid/emergency medical technician, cardiopulmonary resuscitation and the use of automated external defibrillators. Eventually, training will be open to all students, faculty, staff and members of the community.



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OVERVIEW

The University of Pittsburgh School of Nursing 2007 Pharmacology Update includes topics of interest for all health care professionals, including advanced practice nurses, pharmacists, physicians, and physician assistants. We emphasize a broad pharmacologic knowledge base through dynamic presentations of pharmacologic issues affecting patient care. Concurrent sessions address drug therapies for adult and child populations with content that enables clinicians to offer pharmacologic interventions that are evidence-based and support best practice. The objectives of this conference are to:

1. offer evidence-based pharmacologic management for specific illnesses.
2. discuss patient response to drug therapies.

CONTINUING EDUCATION CREDIT

The University of Pittsburgh School of Nursing will grant **8.0** contact hours of continuing nursing education (CNE). Attendees must remain for the full day to receive CNE credit. The University of Pittsburgh School of Nursing is an approved provider of CNE by the Pennsylvania State Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

UNIVERSITY OF PITTSBURGH

One of the oldest institutions of higher learning in the United States, the University of Pittsburgh is an internationally recognized center of learning and research, serving more than 32,000 students on the Pittsburgh campus and its four regional campuses. The University of Pittsburgh School of Nursing, since its founding 65 years ago, has been a leader in nursing education, ranking among the top 10 nursing schools in the nation. It educates nurses through a curriculum that integrates rigorous academic work with varied clinical experiences and exposure to a strong research program. Visit online at www.nursing.pitt.edu.

REGISTRATION INFORMATION

Conference Fee: \$125 (Lunch is included. Parking is not included.)

Payment must accompany registration. Conference attendees who use same-day registration will incur an additional \$20 charge.

Cancellation Policy: All cancellations must be made in writing. Cancellations received before August 10, 2007, will be refunded minus a \$35 administrative fee. No registration fee will be refunded after August 10, 2007. The University of Pittsburgh School of Nursing reserves the right to cancel this program if a sufficient number of advanced registrations is not received. In case of cancellation by the University of Pittsburgh School of Nursing, registration fees will be refunded in full.

Parking: Parking meters and garages are located throughout the campus. The School of Nursing is also accessible via public transportation. The Victoria Building is located one block north of Fifth Avenue, adjacent to UPMC Presbyterian.

Special Needs: Participation by all individuals is encouraged. Advance notification of any special needs will help us provide better service. Please notify us of your needs at least two weeks in advance of the conference by calling 412-624-3156.

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The University of Pittsburgh School of Nursing reserves the right to substitute qualified faculty for those listed.

2007 Pharmacology Update

Friday, August 24, 2007

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7–7:50 a.m.	REGISTRATION AND BREAKFAST	11:45 a.m.– LUNCH/POSTERS (30 minutes for posters) 12:45 p.m.
7:50–8 a.m.	WELCOME	12:45– 1:45 p.m. TRACK A
	<i>Lisa Marie Bernardo, PhD, RN, MPH, HFI, Associate Professor, Director of Continuing Education, University of Pittsburgh School of Nursing</i>	Adolescents and Contraception Choices <i>Lee Ann Elizabeth Conard, DO, RPh, MPH, Department of Pediatrics, University of Pittsburgh, University of Pittsburgh Physicians; Adolescent Medicine, Children's Hospital of Pittsburgh of UPMC</i>
8–9:15 a.m.	KEYNOTE ADDRESS	TRACK B
	The Enid Goldberg Endowed Visiting Lectureship	Nicotine Addictions: New Options for Treatment
	"Pharmacologic Management of Diabetes: State of the Science" <i>Linda Siminerio, PhD, RN, CDE, Nurse Manager, Assistant Professor of Medicine, Department of Endocrinology, University of Pittsburgh School of Medicine; Executive Director, Pittsburgh Diabetes Institute</i>	<i>Donna Caruthers, PhD, Assistant Professor and Coordinator, RN Options Program, Department of Health and Community Systems, University of Pittsburgh School of Nursing</i>
9:15– 10:15 a.m.	TRACK A	1:45–3 p.m. STD Treatments for Women: Best Practices
	Issues in Pediatric Sedation <i>Krista Bragg, MSN, CRNA, Senior Director, Project Management, Department of Acute and Tertiary Care, University of Pittsburgh School of Nursing</i>	<i>Mary Cothran, PhD, CRNP, Assistant Professor, Department of Health Promotion and Development, University of Pittsburgh School of Nursing</i>
10:15– 10:30 a.m.	TRACK B	3–3:15 p.m. BREAK
	Treatment Approaches with ADHD <i>Oscar Bukstein, MD, Faculty and Clinician, Department of Psychiatry, University of Pittsburgh; Child and Adolescent Psychiatric Services, University of Pittsburgh Physicians, UPMC</i>	CLOSING ADDRESS
10:30– 11:45 a.m.	BREAK/VENDORS	"Can We Improve Medication Adherence in the Elderly?"
	Management of Pediatric and Adult Asthma in the Emergency Setting <i>Mary Jo Cerepani, MSN, CRNP, CEN, Emergency Nurse Practitioner, Emergency Resource Management, Inc.</i>	<i>Elizabeth Schlenk, PhD, RN, Assistant Professor, Department of Health and Community Systems, University of Pittsburgh School of Nursing</i>
		<i>Linda Organist, Nurse Practitioner, Benedum Geriatrics Center, UPMC Montefiore</i>
		4:30–5 p.m. QUESTIONS AND ANSWERS/ EVALUATIONS



For more information please contact the University of Pittsburgh School of Nursing Office of Continuing Education.
Phone: 412-624-3156 • E-mail: chb30@pitt.edu
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Make Your Healthcare Presentations Come Alive!

BY MAUREEN MURRAY

Healthcare professionals face a double challenge when they speak at conferences, meetings, roundtables, and one-to-one. First, they need to get the message across in a concise way while keeping audience interest high. Second, they often present large amounts of data to support their points – and this increases the possibility of wandering minds.

We all know the telltale signs of AD – Audience Drift: Decreased eye contact, shifting positions, surreptitious time and text checks, and the ultimate giveaway – eyelids at half mast. But you can make your healthcare presentations come alive with concrete strategies to capture audience attention even while delivering data-rich content.

Remember that as a speaker you are a transmitter. Your listeners are receivers who are tuned to WII-FM – What's In It For Me – and they expect something for the time they spend listening to you. If you simply provide information, listeners quickly disengage because they can think – and read – four times faster than you can speak.

So convey your message in a way that prompts your audience to decide that listening to you is a productive use of scarce time in a busy day.

Start Strong.

You have about 30 seconds before the audience decides if you're worth their undivided attention, so it's important to hit the ground running, and grab attention fast. This is especially important for scientific speakers.

Put a face on your material. Open with a question such as "What if you could create a breakthrough in your most challenging case?" Try a compelling statement such as "One in three persons will get coronary artery disease, so if it's not the person to your right or left, then it's you."

Paint a picture to capture attention. "If we lined up all the children without health-care insurance, they would stretch from New York to Chicago." Promises – especially combined with numbers – are also strong openings: "I promise that at the end of our session, everyone will know three new ways to speak with confidence."

Relevant anecdotes always create impact. I once heard this: "I will never forget my 10th Christmas. That was the year I received my first microscope. When I looked through it, a magical new world opened up. Thirty years later, I still experience a thrill when I look through a microscope." We were rapt listeners as we grasped how the wonder of a child became the fuel for a career.

Manage Content.

The way you develop and manage your content impacts the attention level of your audience. As you prepare, it's essential to know three things: your goal—what you hope to accomplish; your message – the take home point; and your call to action – what you want listeners to do or think. Can you answer each in ten words before you prepare your content? If so, your material will be more tightly focused.

Keep your audience in mind as you prepare. Some groups will need more or less scientific background. You don't want to run the risk of losing audience interest at any time, so err on the side of less rather than more. People can ask questions if they need more information, but that can't ask you to be brief if they want less.

Learning Alerts help guide audiences through data-rich presentations. As you progress through your slides, make comments such as "The critical point here is bullet 2" or "The take home message here is...." This creates direction and enhances the learning process.

Use a template such as Chronological Order, Problem and Solution, or Benefits and Risks to organize the flow of your material. And use transitions to move listeners from one topic to the next. "We've covered the benefits and challenges of this initiative, so now let's look at costs." Continuous use of "The next slide shows" ... creates monotony. Transitions take your presentation up a notch and make you look well prepared.

Above all, remember that your PowerPoint is not a script – it is a reference point. Know your content well enough that you can glance at the slide, then face your audience and speak about it. Don't read your slides – the audience could them on their laptops – make them glad they're hearing you in person.



Engage Listeners.

As attention span becomes shorter, audiences need more variety and deliberate engagement to maintain interest, especially with complex material. Ask both real and rhetorical questions. Sprinkle "engage phrases" such as What if, Think of, and How many (show of hands) throughout your remarks. They elevate energy and re-capture attention.

The latest rule-of-thumb is "Do something different every seven minutes." Change positions, tell a story, ask a question. The reason? It's the length of time between TV commercials, and many of us have an unconscious expectation of a shift. You don't have to be precise about the interval – just be aware that listeners need frequent change.

When time permits, solicit input as you speak. "Let's hear about your experiences with this." Alternate periodically between an informational style – "These are the critical points" ... to a conversational style – "In my first job as a hospital administrator..... Each shift is a re-focus point for your listeners.

These are just a few of dozens of strategies to make your next healthcare presentation more concise, dynamic, and memorable. Apply these to create a win-win-win for the learning of your listeners, the image of your organization, and the growth of your career.

Maureen Murray is a professional speaker, trainer and executive coach with extensive experience teaching healthcare care professionals to speak with power, presence and poise. Contact her at (412) 561-1577, mmurrayha@aol.com or www.maureenmurrayassociates.com.

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Family Hospice & Palliative Care

How does an organization choose one image to reflect its mission, values, and services? Imagine trying to find a single graphic depiction of all that a company represents. The challenge and importance of developing an effective logo cannot be overstated. The success of an organization like a hospice, is not only dependant on the overall branding of the hospice but in how well a company's logo represents its commitment, quality, and uniqueness in a single image.

Although only one component in an organization's branding, a logo is the single most visible element. A logo should portray trustworthiness, stability, and quality. It needs to differentiate each business from that of the competition. Finally, a logo portrays the institution's commitment to the customer.

In the most successful cases, the company is "known" by their logo. For the customers, a logo represents the reputation of the company and its products or services. A logo must not only create the initial first image, but in the best cases, remain a recognizable image.

A logo can also work as an inspiration to those who work within an institution. It can remind the employees of the mission and values of the organization. Having the logo appear across all mediums, such as printed materials, website, and advertising, will reinforce the feeling that the hospice provides consistent and well-coordinated services.

In order to reflect many of the changes at Family Hospice and Palliative Care, we



BY RAFAEL J. SCIULLO,
MA, LCSW, MS

The Journey to Improve Hospice Care in America

recently decided to revise our logo. The logo that we had, although wonderfully representative of our services for many years, no longer represented the breadth and scope of our services or our position in the market place. Even though many felt a strong loyalty to our old logo we recognized that the logo no longer adequately represented the organization.

The existing logo was refreshed and modernized by graphically examining the concepts of care, compassion, support, extended reach of services and professionalism. The new design communicates these qualities to the viewer. The hand holding the heart represents support, care and a human touch. This modern treatment of the hand leads the eye up to the heart.

In addition, the new Family Hospice and Palliative Care logo is open, without the confining structure of a house/roof line. This reflects Family Hospice and Palliative Care's expanded services and various settings where care is offered. The openness of the hand supporting the heart offers relief to the eye and leads the reader to the right side of the logo, providing a smooth transition to the name.

A picture is worth a thousand words. This certainly rings true for a logo — a single image that portrays an organization's essence, services, and commitment. One of the single most important components in an organization's branding is this unique image. The right logo will instill recognition, customer loyalty, and consumer confidence. Companies need to invest the time and the money to make sure that their logo is reflective of their values, mission, and commitment.

Rafael J. Sciullo, MA, LCSW, MS is the President and CEO of Family Hospice and Palliative Care and Past Chairperson of the National Hospice and Palliative Care Organization. He may be reached at rsciullo@familyhospice.com or (412) 572-8800.

COVER STORY: Substance Abuse in the Elderly is a Growing and Under-Diagnosed Problem

Continued from page 1

become less so, as the older body loses resilience and metabolism slows.

The second group at risk for alcoholism is those older adults who have never had a problem before but find their new post-retirement leisure time contains a number of pitfalls that lead to increased use of alcohol. Retirement, for many people, is a mixed blessing, and the down side of it is boredom, loss of identity and absence of a social network. "We have the image of the relaxed retirees, going to happy hour and enjoying themselves, but in fact, they may be quite unhappy," says Capretto. "Some go too far and before long they have a drinking problem. There's a popular myth that says Grandma's daily cocktails are doing no harm; accepting it and leaving it alone, however, means that both the drinking and underlying problems are not being addressed."

While it may not be a problem, concern about drinking in an older adult needs to

be explored. Older adults have a strong sense of pride and are unlikely to report their drinking to their families or physicians; physicians in turn are unlikely to ask about it or consider it, even when there are presenting symptoms that could indicate alcoholism. Symptoms of alcoholism, including memory loss, impaired cognition, falling, disordered sleep and loss of balance, can also suggest dementia, depression and other disorders. Untreated alcoholism puts the person at risk for accidents, complicates existing medical conditions, interferes with medications and has numerous health consequences.

Those consequences to physical health include liver disease; gastrointestinal disorders such as ulcers, gastritis and pancreatitis; malnutrition; increased risk of cancer of the liver, colon, esophagus and pharynx and hypertension. Alcoholism can exacerbate diabetes, interfere with blood coagulation and cause arrhythmias such as atrial fibrillation. Capretto says

that in many cases, the alcoholism finally gets diagnosed when a medical condition is worsening or failing to respond to treatment. "This is what brings it to the attention of the physician, but it should be recognized before things get to that point," he emphasizes.

Capretto, who is certified in psychiatry and addiction medicine, says that when he was the director of a geriatric psychiatry unit, he found that 50% of those admitted needed to undergo detoxification from alcohol or drugs. "The substance abuse problems had not been identified at admission; these patients were admitted primarily for depression, but half had underlying, undiagnosed alcoholism or drug problems."

While alcoholism accounts for 80% of substance abuse in the elderly, they are also at risk for abusing prescription drugs, especially pain medications and sedatives such as Xanax. Capretto says that some older adults want to return to the illicit

drugs of their younger years, such as marijuana, to ease pain or anxiety, but those drugs are much different today. "Marijuana is 5-10 times stronger than it was in the 1960's and the aging brain can't handle it," he says.

Capretto and other experts are concerned that the aging of the 78 million Baby Boomers will bring about an increased incidence of substance abuse in the elderly in the years to come. He encourages physicians to make a greater effort to identify substance abuse in their older patients so that treatment can be provided. Older adults respond well to treatment and can continue to live their senior years with good health and a higher quality of life.

For information about the range of substance abuse treatment services and prevention programs available at Gateway Rehabilitation Center, visit www.gatewayrehab.org or call 1-800-472-1177.

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(l-r) Dick Skrinjar, City of Pittsburgh Parks and Recreation Dept.; Frank Battafarano, President, Hospital Division, Kindred Healthcare; Brenda Frazier, Allegheny County Councilwoman; Lou Condrasky, CEO, Kindred Hospital Pittsburgh North Shore; Tonya D. Payne, Pittsburgh City Councilwoman, District 6; Darlene Harris, Pittsburgh City Councilwoman, District 1; Art Rooney, Jr., Pittsburgh Steelers Organization; Paul Diaz, CEO and President, Kindred Healthcare.

Kindred Healthcare Opens New Pittsburgh Hospital

The new Kindred Hospital Pittsburgh - North Shore recently held its formal dedication ceremony at the hospital. The ceremony included the dedication of a commemorative plaque honoring Art Rooney, Sr. to his son Art Rooney, Jr., that was salvaged in the renovation.

Kindred Hospital Pittsburgh - North Shore will provide two levels of post acute care: 72 long-term acute care ("LTAC") beds designed for medically complex patients who require specialized treatment and prolonged recovery time and a 39-bed skilled subacute unit for patients undergoing short-term rehabilitation and other medical services.

The hospital is located on the site of the former Mercy Divine Providence Hospital. The six-floor facility, which has undergone significant renovations and improvements, has recently passed and received all necessary certifications.

Canonsburg General Hospital TWIG 14 Makes Donation

TWIG 14 of Canonsburg General Hospital recently donated \$3,000 to the hospital. The group raises money through raffles and donations.

Shown accepting the donation is Kim Malinky (left), president and chief executive officer of Canonsburg General Hospital and Laura Spadaro, president of TWIG 14.



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(l-r) Gregory Scott, Architect, RLPS; Joseph Wenger, Presbyterian SeniorCare VP Finance; David Lowe, Presbyterian SeniorCare Board Chair; Janet Barlett, Presbyterian SeniorCare VP Foundation; Robert Mistick, Mistick Construction; Paul Winkler, Presbyterian SeniorCare President and CEO; Dr. Dwight Hanna, Campaign Chair; Helen James, Longwood Resident Council President; James Pieffer, Presbyterian SeniorCare Senior VP; Michael Haye, Longwood Executive Director.

Longwood at Oakmont Moves Into the Next Generation of Care

Longwood at Oakmont recently hosted a groundbreaking ceremony for its new health care center. This is the first major renovation at Longwood at Oakmont. The new center will replace the current health care center as a state-of-the-art nursing facility. It will optimize the number of private rooms in a warm, residential setting.

This philosophy is part of a national movement called Culture Change that is transforming the decades-old institutional model of nursing homes into home-like, flexible and inviting environments. The new center will be spacious, comfortable and homey. Care will be person-centered, giving residents as much choice in their daily life as possible.

The new health care center will be a two-story structure with 61 beds and will be located behind the current health care center. Construction will take approximately a year and a half to complete. It will serve primarily residents of the Longwood community and is being partially funded by a \$3 million capital campaign, under the leadership of Dr. Dwight "Pete" Hanna and a 41-member volunteer committee of Longwood Residents.

In addition to the new health care center, the current health care center will be renovated into assisted living apartments. Planning has also started for the addition of a new apartment building at Longwood.

Physician's Book Eases Surgery Fears

Dr. Johannes "Joop" Schokker, general and trauma surgeon at Altoona Regional Health System, has written a book entitled **The Compassionate Surgeon**, as both a memoir of his experiences as a surgeon and a guide for patients and their families during the surgery process.

In the book, Dr. Schokker stresses the importance of communication between the surgeon and the patient.

"Patients need to trust the stranger cutting into them," Dr. Schokker says. "Many surgeons don't take the time to talk with their patients."

The surgeon must develop a skill in determining what patients know, what they want to know and how detailed they want to be in the process of what is going on in their body, he said.

"Patients heal better if they understand what is going on and trust their surgeons," he adds. "Healing is a process that starts with the mind."

Dr. Schokker wrote his book over the period of a year and is considering writing another book to inform patients about the issues surrounding cancer surgery.

Dr. Schokker graduated from the Medical School of the University of Michigan in 1966 and spent the next five years in a surgical internship and residency at the University of Missouri Medical Center in Columbia. By July 1970, he was chief resident.

In July 1971, he started a solo practice in surgery in Jefferson City, MO, and in July 2000 he started his current position as general and trauma surgeon at Altoona Regional Trauma Center.

The **Compassionate Surgeon** is available at www.dandelionbooks.net and at www.amazon.com





L-R: W. Allen Hogge, M.D., chairman of the department of obstetrics, gynecology and reproductive sciences, University of Pittsburgh School of Medicine; Magee-Womens Hospital of UPMC President Leslie C. Davis; University of Pittsburgh Chancellor Mark Nordenberg; Magee-Womens Research Institute founding Director James M. Roberts, M.D.; Secretary JudyAnn Bigby, M.D., Massachusetts Department of Health and Human Services; Arthur S. Levine, M.D., senior vice chancellor, health sciences, and dean, University of Pittsburgh School of Medicine; and Margaret Joy, chairwoman of the board, Magee-Womens Research Institute & Foundation.

Magee-Womens Research Institute Building Expansion Boosts Science of Women's Health

Officials and faculty members representing the Magee-Womens Research Institute (MWRI) and the University of Pittsburgh recently celebrated the grand opening of a \$31 million expansion project that will benefit women worldwide through increased scientific investigations that target gender-based health concerns.

"The building expansion is a testament to the commitment of many people – in government and the university and individual philanthropy communities – to the support of vital women's health research in Pittsburgh," said James M. Roberts, M.D., MWRI's founding director and professor and vice chair of research in the department of obstetrics, gynecology and reproductive sciences at the University of Pittsburgh School of Medicine. The expansion should enable the Institute to recruit more than 100 additional scientists, researchers, clinicians and other health care professionals, he added.

The project adds 70,000 square feet of office, laboratory and support-services space, more than doubling the size of the Institute. This new wing connects to the older building on all seven levels. In addition to the research that will benefit women and infants, the work of these professionals also will strengthen the Pittsburgh economy by creating new jobs in medicine and technology.

In addition, the expansion was designed to support environmental sustainability, with extensive use of natural light, recycled materials in flooring, wall coverings and ceiling materials, and low-chemical emission sealants, paints, coatings and carpets. Special equipment also reduces the building's energy load for heating and cooling year-round. The project was designed by the Astorino architectural firm and built by Massaro Construction Co.

PRHI Unveils Pittsburgh Prescription

The Pittsburgh Regional Health Initiative recently proposed a "Pittsburgh Prescription" for healthcare reform in Southwestern Pennsylvania.

The Pittsburgh Prescription is intended to bring regional stakeholders together to build on state and national reform agendas in ways that promote quality-driven cost containment.

The plan is a direct outgrowth of PRHI's designation last month as Southwestern Pennsylvania's Community Leader to advance U.S. Health and Human Services Secretary Michael Leavitt's four cornerstone principles for bringing greater value to health care.

"Not only did the designation give us an obligation to promote purchaser engagement in healthcare reform, employers evidenced such unprecedented support for the HHS agenda, we felt we should offer opportunities quickly," said PRHI President and Chief Executive Officer Karen Wolk Feinstein, PhD. "The turnout really underscored discontent with the status quo."

When HHS sought support for its reform package here last month, nearly 90 employers endorsed the cornerstones, which include transparency of quality, transparency of cost, payment incentives for superior quality and interoperable health information systems. The turnout set a national record, surpassing the closest total elsewhere by 30 employers.

Among the opportunities the Pittsburgh Prescription offers are participation in payment reform demonstrations, training programs to which business could lend experts in continuous quality improvement, workplace initiatives to help employees with diabetes keep their illness under control and projects for upgrading healthcare information systems.

MED3000 and Highlands Physicians, Inc., IPA to Deliver Technology and Practice Services Throughout Tennessee

MED3000 Group, Inc. (MED3000), a privately held national healthcare management and technology company, has entered into an agreement with Highlands Physicians, Inc. (HPI), to provide access to a wide range of information technology including Electronic Medical Record systems, medical practice services, including billing and collection services to HPI's more than 700 participating physician members throughout Northeast Tennessee and Southwest Virginia. HPI's endorsement of MED3000 as a preferred provider for physician practice services will help improve the operational efficiencies and profitability of HPI member physician practices and provide a platform for advancements in clinical quality and performance.

Under the terms of the agreement, HPI will offer member physicians access to MED3000 ASP Information Technology (Practice Management, Electronic Medical Record, and Communication Systems), and management services including Billing and Collections.

Mercy Hospital is 'Clearing the Air'

On July 1, Mercy Hospital's campus became smoke and tobacco-free. No tobacco use of any kind - cigarettes, cigars, pipes, chewing tobacco or pouches – are permitted inside or outside any of Mercy Hospital's facilities.

Smoking indoors on the hospital's campus has been prohibited since the early 1990s after the hospital adopted a city ordinance banning smoking inside office buildings within the city limits.

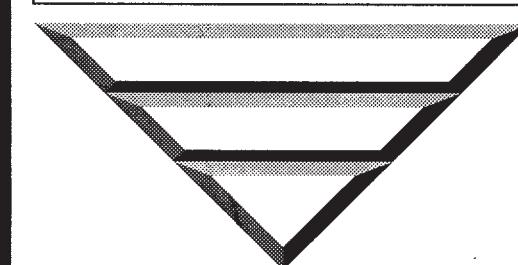
Smoking and the inhalation of second-hand smoke have been proven to increase the risk of cancer. Moreover, smoking not only affects the health of the individual exposed to tobacco use, but also jeopardizes the safety, security and financial well-being of family members. Mercy's decision to go smoke and tobacco-free is consistent with the practices of many other health care organizations nationwide.

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OUTSOURCING

Paris Healthcare Linen Services Changes the Paradigm to Outsourcing Laundry

BY VANESSA ORR

For many years, hospitals have washed their own laundry, thinking that it would save them money to keep this task in-house. Yet many hospitals today are finding that outsourcing this job can actually add to their bottom line.

"Most hospitals that have their own laundries have started looking for a better alternative," explained David Stern, president and CEO of Paris Healthcare Linen Services. "Often they are driven by the fact that their laundry area needs major capital improvements, or because they need that valuable space for something else. They may even call us because the person who has always run their laundry has decided to retire."

"From a purely financial standpoint, it makes a lot of sense to outsource in this area," he added. "To build an efficient



David Stern

laundry costs about \$15 million and it makes much more sense for us to build one that can serve many hospitals, than for each hospital to spend millions updating their facilities with less efficient equipment."

By creating a state-of-the-art laundry facility to serve many different healthcare entities, Paris Healthcare is able to save on energy, water, sewerage, and labor costs. "We can still make a

dollar and pass these savings on to our customers," said Stern, who adds that clients have seen savings ranging from 10 percent to 50 percent over their previous laundry costs.

According to Stern, educating the customer is key to helping them save money. "We work in partnership with healthcare facilities to determine what it actually costs to do their laundry," he explained. "The savings to our customers comes not

only from us doing their laundry at a lower cost, but from acting as a consultant in determining how much of each item they use and helping them manage against industry benchmarks."

While most hospitals measure and benchmark their cost per pound, Paris Healthcare believes a hospital's linen cost is what it costs to serve each patient. "There is a big difference. You would never see a nurse go into a patient's room and give them three trays of food, but that's often what happens with linens," said Stern. "Linen usage per patient should be measured, and nurses should know the cost."

"The result is that hospitals use less linen, which drives costs down," said Stern. "In no way does this shortchange the patient; linens are just used more effectively."

By knowing how much of every item is distributed to each hospital department, Paris Healthcare can also help hospitals cut down on loss. "Hospital administrators don't like to see a \$40,000 bill for lost scrubs," said Stern. "But if you can show where that loss is coming from, and can hold a department accountable, it often makes that loss go away."

On the face of it, it would seem that by reducing scrub loss and decreasing the pieces that need to be laundered, Paris Healthcare is actually taking work away from itself. "Most linen suppliers don't mind when hospitals lose items, because they can then replace them. The more items they use, the more revenue for the laundry," said Stern. "But we believe that it is our job to work in partnership with each hospital to help them manage their laundry requirements so that a department is never short of product, while putting controls on utilization. Customers will stay with you longer when they feel



that you are partnering with them."

To this end, Paris Healthcare provides each customer with its own Account Manager, and a very sophisticated web-enabled information system. "We're very proactive about educating our clients and providing them with current, real-time information about what each of their departments is using," said Stern.

Paris Healthcare also takes a proactive stance on quality. "Most laundries take a reactive approach, measuring their quality by the number of rejects returned by the customer," said Stern. "We pull a statistically valid sampling of pieces while they're still in our system and check them against our rigid quality standards." Paris' plants are also all accredited by the Healthcare Laundry Accreditation Council

(HLAC), the accrediting body for laundries that serve hospitals, which means that they meet or exceed the standards required.

"Our job is to help healthcare facilities save money while not sacrificing customer satisfaction," said Stern. "And we've done this by changing the paradigm of how laundry outsourcing is done."

For more information, visit www.parisco.com, call (800) 832-2306, or email Randy Rosetti at rrosetti@parisco.com.

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OUTSOURCING

How Healthcare Providers are Reducing Costs Through Contracted Services



BY PAULA E. MUIR, RHIT

It is no secret to anyone, all industries are looking for creative ways to reduce costs and improve their bottom line of the budget, without compromising quality. Healthcare is no different. As a 30-year Health Information Management professional and previous Director of HIM services, I have been challenged with reducing costs in my areas of responsibility many times. During my tenure, the facilities I worked for had gone through downsizing, rightsizing, reorganizing, mergers and acquisitions, etc. Each time department heads were given the direction to reduce their budget. How many supply costs can one reduce in a department budget, even if it is across the organization? So we look to re-engineering processes and creative budgeting, working smarter, not harder. While keeping up with the increasing volumes, timelines and less reimbursement for patient care.

Over the years, I have learned to measure the cost of processing a medical record, from admission to discharge, which includes assembly, analysis, diagnostic coding, transcribing a report, physician com-

pletion, release of information and permanently filing it. Therefore, I have enlisted the assistance of "outsourcing companies". During my earlier years as a HIM Director, Release of Information services was the most common to outsource. These companies would provide the human element for retrieving the medical record, copying it, sending it, billing for the copies, filing the record and collecting the monies owed. This service reduced my budget by \$40,000 per year. The contract with the outsourcing company can be negotiated to fit the need of the facility. Today, every position and process within HIM can be outsourced through contracted services.

I found the most cost effective contracted service to be transcription. Think of it this way. For a Healthcare Provider to provide an in-house transcription service, there must be a Dictation/Transcription system, supported by the manufacturer and/or internal Information Technology services. Usually this type of system has a life span of 6 years. Staff to perform the service, depending on the turn around time of each

report transcribed, usually a 24/7 operation. Keep in mind that the Healthcare Provider may physically accommodate the staff on site or at home, either way costs are incurred. In order to realize the in house transcription cost per line, add all the costs for providing the service, human resources including staff turn-over and training, space, equipment, supplies, etc. and divide that cost by the number of lines of transcription performed by the in house staff annually. My cost per line at the last facility I worked for was 25 cents. We produced 5.3 million lines of transcription per year and still had back-logs at times. Internal costs were \$1.3 million per year. By outsourcing we realized an annual cost savings of \$480,000 the first year over 5 years our savings were \$2.1 million.

Obviously, when contemplating the use of contracted services, one should research the companies who provide such. I found it helpful to select and contact at least 5 companies. Provide the contracted service with an overview of what services you want to purchase, and as much information for them to provide you with an assurance that they can accommodate your needs. Because employees' positions are going to be eliminated, I have always included in my overview, the requirement for the contracted company to offer the displaced staff posi-

tions. (This is a win-win situation for all parties involved.) I would review the company's responses and narrow the choices to 3 for onsite presentations. I guarantee that all the contracted organizations have protocol for requesting additional data from you, especially when they are one of those selected to do a on site presentation.

Using contracted services is no longer a taboo, however, for the departments and staff within the Healthcare setting that are affected it is traumatic. Sometimes there is denial and/or a mass exodus. I believe the reaction the news creates is all in the way the decision to outsource, is presented to those involved as well as the procedure for transitioning from in house to outsourcing.

After 30 years of working in the Acute Care HIM setting, I am now working on the other side, the contracting service side of the business. I consider myself fortunate to be afforded the opportunity to experience both worlds. I also believe that my Acute Care HIM Director expertise provides me with an in-depth understanding of the needs of our clients. We speak the same language and I know what they deal with on a daily basis when the needs of the physicians and other customers are not met.

Paula E. Muir, RHIT, Transcription Services Director at Diskriter, can be reached at paula.muir@diskriter.com

HPI

Health Policy Institute Governance Briefings Fall 2007 - Save the dates

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Friday
September 7
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Current Attempts at Healthcare Reform: Prescription for Pennsylvania and Stay Healthy California

Tom Priselac, President & CEO, Cedars-Sinai Health System, L.A.
Ann Torregrossa, PA Governor's Office of Health Care Reform

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Friday
October 12
8-9:30 AM
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Responding to "Redefining Health Care: Creating Value-Based Competition on Results" by Porter and Teisberg

Jerry Fedele, Former President & CEO, WPAHS
John Mayer, MD, Boston Children's Hospital
Timothy Merrill, Chair, Heritage Valley Health System

Friday
November 2
8-9:30 AM
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Building an Exceptional Board: Effective Practices for Health Care Governance -- Report on the Blue Ribbon Panel on Health Care Governance

John Combes, President & COO
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Registration is required and available through these options: Telephone Samuel A. Friede, FACHE, Director, HPI Governance Initiative, 412-624-6104; email friedie@pitt.edu; or online: www.healthpolicyinstitute.pitt.edu. View HPI's live webcast using Windows Media Player 9 or newer, at <http://mediaside.cidde.pitt.edu> and click on the "Live Webcasts" link. Past briefings are always available for viewing at www.healthpolicyinstitute.pitt.edu. Ample parking is available across the street at Soldiers & Sailors parking garage and nearby meters. Briefings are free.

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UPMC HEALTH BRIEFS

Brain Holds Clues to Bipolar Disorder

Looking into the brain is yielding vital clues to understanding, diagnosing and treating bipolar disorder, according to findings presented at the Seventh International Conference on Bipolar Disorder.

The first study, presented by Husseini K. Manji, M.D., chief of the Laboratory of Molecular Pathophysiology at the National Institute of Mental Health (NIMH), suggests that bipolar disorder arises from abnormalities in neuronal plasticity cascades – the complex machinery inside of nerve cells that regulates numerous processes inside the body. Using animal and cellular models, Dr. Manji and colleagues at NIMH showed that disruptions in these pathways resulted in many of the core symptoms of bipolar disorder and explained many other observations about the disease. The findings suggest a new avenue for treating the underlying cause of bipolar, rather than treating flare-ups of depression or mania, and also provide new targets, for improved medications many of which are being tested in clinical trials.

Type 1 Diabetes and Heart Disease: Heavier May Mean Healthier

Researchers at the University of Pittsburgh Schools of the Health Sciences studying links between an early sign of heart disease called coronary artery calcification and body fat have found that, paradoxically, more fat may have some advantages, at least for people – particularly women – who have type 1 diabetes.

"Gaining weight may reflect good or better treatment with insulin therapy, which may partly explain why participants who gained weight over time had lower mortality rates," said Trevor Orchard, M.D., professor of epidemiology at the University of Pittsburgh Graduate School of Public Health (GSPH).

University of Pittsburgh Researchers Culture Blood-forming Stem Cells from Human Fat Tissue

Researchers at the University of Pittsburgh School of Medicine have successfully isolated and cultured human hematopoietic stem cells from fat, or adipose, tissue, suggesting that they have found another important source of cells for reconstituting the bone marrow of patients undergoing intensive radiation therapy for blood cancers.

University of Pittsburgh Researchers Detect Small Set of Cancer Stem Cells that are Similar to Normal Stem Cells and Appear to Thwart Anti-cancer Agents

Current cancer therapies often succeed at initially eliminating the bulk of the disease, including all rapidly proliferating cells, but are eventually thwarted because they cannot eliminate a small reservoir of multiple-drug-resistant tumor cells, called cancer stem cells, which ultimately become the source of disease recurrence and eventual metastasis. Now, research by scientists at the University of Pittsburgh School of Medicine suggests that for chemotherapy to be truly effective in treating lung cancers, for example, it must be able to target a small subset of cancer stem cells, which they have shown share the same protective mechanisms as normal lung stem cells.

UPMC NEWS

UPMC Announces Development of Disabilities Resource Center to Enrich Health Care Options for People with Physical Challenges

A specialist with extensive expertise in coordinating resources for people with disabilities has joined UPMC as part of a comprehensive program to enrich health care services for disabled patients, their families and caregivers at facilities throughout the health system. Susan V. Schaeffer, Ph.D., director of UPMC's new Disabilities Resource Center, formerly worked as director of a similar program at Washington State University in Pullman, Wash.

Considerable expertise in serving patients with disabilities already exists at UPMC, including the Center for Assistive Technology (CAT), a joint program with the University of Pittsburgh, and the Center for Women with Disabilities at Magee-Womens Hospital. The professionals who staff these programs also will apply their knowledge to the challenge of making UPMC's Disabilities Resource Center a program upon which patients and their families can rely for first-class health care services.



University of Pittsburgh Tops in Funding by the American Heart Association

For the first time, the University of Pittsburgh ranked first among U.S. academic medical centers and hospitals for heart disease and stroke research funding from the American Heart Association (AHA). The total amount of AHA funding for 2006 was \$8,949,945.

"The University of Pittsburgh prides itself on recruiting prolific researchers, scientists and clinicians who are dedicated to elucidating the fundamental causes of heart disease. I am most proud of Dr. Barry London, chief of cardiology and director of the UPMC Cardiovascular Institute (CVI) and his team of cardiologists and scientists who advance our mission at both the laboratory bench and patient's bedside, ultimately helping patients lead better, healthier lives," says Arthur S. Levine, M.D., senior vice chancellor for the health sciences and dean, University of Pittsburgh School of Medicine.

Pitt Diabetes Institute and Air Force Partnership Yields Greater Opportunity to Prevent the Onset of Diabetes

Congressman John P. Murtha recently announced at his annual Showcase for Commerce event, that the University of Pittsburgh Diabetes Institute (UPDI) has partnered with the Air Force Surgeon General (AF/SGR) to develop diabetes prevention tools that may become a standard method of care for AF medical beneficiaries.

"We have a diabetes epidemic in Western Pennsylvania and in military families," said Murtha. "I have made it my priority to ensure that joint programs like the one between the UPDI and the AF have the resources they need to produce the tools necessary to promote healthy life-style changes."

UPDI, in partnership with the AF/SGR, has developed practical tools that will allow almost anyone with diabetes or anyone at risk of developing diabetes access to lifestyle intervention tools and techniques.

Western Psychiatric Institute and Clinic Honored by National Alliance on Mental Illness

Western Psychiatric Institute and Clinic of UPMC (WPIC) received the Research Award from The National Alliance on Mental Illness, Pennsylvania (NAMI PA), and the Peace of Mind Project (POMP).

Also honored at the event were Rep. Patrick Kennedy and Sen. Edward Kennedy, who received the Legislative Leadership Award for political leadership in sponsoring the Parity Bill, which would require insurance companies to cover treatment for mental illness on a par with coverage for other illnesses.

UPMC Builds First-of-its Kind Research Lab at Fort Campbell Aimed at Reducing Injuries and Enhancing Performance

In the first facility of its kind, advances in sports medicine science made for the athletic field are being applied to the battlefield and used to protect the nation's elite soldiers from injury.

Officials at Fort Campbell, KY recently hosted the grand opening of the military base's new Injury Prevention and Performance Enhancement (IPPE) Laboratory. The lab was designed and built by University of Pittsburgh sports injury researchers to scientifically identify injury risk factors for more than 900 air assault soldiers of the U.S. Army's 101st Airborne Division. The lab, potentially the first in a network of similar facilities proposed throughout the military, will use its data to develop training and conditioning programs for injury prevention and performance enhancement.

With a two-year, \$2.75 million grant from the Department of Defense (DOD) awarded to the University of Pittsburgh Medical Center (UPMC), the IPPE Lab is operated by researchers from the University of Pittsburgh/UPMC's Neuromuscular Research Laboratory (NMRL). In fact, the new lab is modeled after the NMRL, a world-renowned laboratory for sports injury prevention and performance enhancement, located in the UPMC Center for Sports Medicine in Pittsburgh. Since 1990, the center's scientists have been studying and publishing research data involving athletes' body positioning and neuromuscular control as it relates to injury.



Investors' Lab

Three Questions About Retirement Planning

For most people, getting ready for retirement is about answering 3 simple questions:

- How much will I need?
- How much do I need to save?
- How do I allocate my savings?

How Much Will I Need?

Longevity risk, inflation risk and healthcare costs can make answering this question a little tricky, and that makes people anxious. Breaking it down into a few easy questions may begin to allay the anxiety:

- What will your income be in the immediate years preceding retirement?
- How much of that will you need?
- How much of that will come from your portfolio?

It seems a little obvious but most people become accustomed to a standard of living commensurate to their pre-retirement wages. I've never met anyone who made \$100,000 a year at age 64 and planned on living on just \$25,000 at age 65. So, estimating your pre-retirement income is a great place to begin.

The U.S. Census Bureau estimates that real wages increase about 1.5% per year.



BY PAUL BRAHIM, CFP®
AIFA®

This makes it easy to estimate our income at retirement. A 45-year-old earning \$100,000 would be projected to earn \$136,706 at age 67. You, or your advisor, should do your math.

Knowing this number isn't quite enough. You also need to know how much you'll actually need. The Fidelity Research Institute estimates that most Americans will require about 85% of their pre-retirement income. Your

replacement rate might vary, but 85% is good starting point.

Next, you should estimate how much of that income will come from sources like Social Security, pensions and wages after retirement. The "gap" must come from savings and investments. Once you estimate the "gap" you can apply the "Rule of 25" to determine how much money we need at retirement.

If your pre-retirement wages are \$100,000, you might need \$85,000 in retirement. Assuming \$25,000 comes from Social Security, your gap is \$60,000. Using the Rule of 25, you then need \$1,500,000 in savings to bridge the gap. Why use 25? It's the number that illustrates how much you should have to maintain an inflation-adjusted 4% with-

drawal rate through retirement. Studies have shown that a balanced portfolio of 50% equity and 50% fixed income, with a 4% withdrawal rate, has a 90% probability of lasting 27 years. These calculations are approximate; your values may vary. You should work with a qualified advisor to determine your actual requirements.

How Much Do I Need to Save?

The answer to this question, or better your response to this answer, ultimately determines whether you retire and fulfill your priorities and passions or, simply survive. Let's assume that you're 45 years old, have \$100,000 saved and need \$1,500,000 at retirement. Let's also assume that you have a balanced portfolio that returns 8% annually on average. Based on these assumptions, you need to save approximately \$20,000 annually to make your number.

I believe that most don't ask, "How much do I need?" because they know the answer means spending less and saving more. For example, think about your 480 cable channels of news, sports and entertainment, plus high speed Internet that costs you \$150 per month and rarely gets watched except during Steelers broadcasts that are otherwise free. Using the Rule of 25, you learn that you need to have \$45,000 in assets at retirement to pay for this expense. Conversely, investing the \$150 per month, at 8%, would provide our hypothetical 45 year old with over \$90,000 at age 67. This illustration should

put current spending and saving into perspective.

How Do I Allocate My Savings?

Knowing how much you need and how much you should save is very important. It is equally important, however, to establish the appropriate mix of cash, bonds and stocks necessary to meet your return assumptions.

Decades of historic performance data statistically make it possible to design an appropriate asset mix for your goals. For example, we know that a portfolio constructed of 5% short-term investments, 25% bonds, 60% stocks and 10% foreign stocks has averaged 9.20% from 1925 through 2005.

We also know that same portfolio's best 12-month return was over 100% and its worst 12-month return was almost -53%. What rate of return do you need? How much downside risk can you tolerate? Knowing your number and how much you can save will assist a competent advisor in establishing and maintaining the correct asset mix for you.

By answering these 3 questions, Americans can dramatically improve their chances of attaining a secure and comfortable retirement.

Paul Brahim, CFP® AIFA®, Managing Director, BPU Investment Management, Inc, can be reached at pbrahim@bpuinvestments.com.

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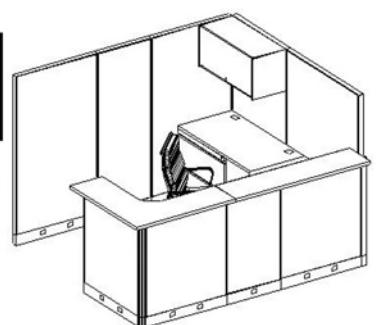
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Living Independently For Elders
Community LIFE is a non-profit program that offers all-inclusive care that goes beyond the traditional boundaries of elder care. It allows seniors to remain in the community, maintain their independence, and allows them to enjoy their golden years at home. Community LIFE provides older adults with fully integrated and coordinated health and social service, usually at no cost to qualified individuals. Participants in the program are transported to our day health center on an as-needed basis, to receive healthcare and social services, meals, and participate in various activities.

The LIFE Center is staffed by a geriatric physician, RN's, physical and occupational therapists, dietitian, social worker, and aides, and includes a medical suite for routine exams and minor treatments, some emergency care, therapy areas, dining/activity space, personal care area and adult day services. Community LIFE offers complete, coordinated healthcare for the participant, including all medical care, full prescription drug coverage, rehab therapies, transportation and in-home care. If you or someone you care about is having difficulty living in the community, then call Community LIFE at 412-464-2143.

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The Kane Regional Centers, located in Glen Hazel, McKeesport, Ross and Scott, provide 24-hour skilled nursing care, rehabilitation services, specialty medical clinics and dedicated units for dementia care to the residents of Allegheny County. Admission to the Kane Regional Centers is based on medical needs and can occur within 24 hours, including weekends and holidays. Kane accepts a number of insurance plans as well as private pay. To apply for admission to the Kane Regional Centers call (412) 422-6800.

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St. Barnabas Health System offers a continuum of care at its two campuses in the North Hills. Skilled nursing care is offered at the 172-bed St. Barnabas Nursing Home in Richland Township, Allegheny County, and the 47-bed Valencia Woods at St. Barnabas in Valencia, Butler County. The Arbors at St. Barnabas offers assisted living for up to 182 persons. All three facilities offer staff-run, on-site rehabilitative services, extensive recreational opportunities, and beautiful, warm decor. Home care is available at the St. Barnabas Communities, a group of three independent-living facilities: The Village at St. Barnabas, The Woodlands at St. Barnabas and The Washington Place at St. Barnabas. The Washington Place, a 23-unit apartment building, has hospitality hostesses on duty to offer residents support as needed. St. Barnabas Health System, a non-denominational, faith-based organization, has a 106-year tradition of providing quality care regardless of one's ability to pay. For admissions information, call:

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Interim HealthCare is a national comprehensive provider of health care personnel and service. Interim HealthCare has provided home nursing care to patients since 1966 and has grown to over 300 locations throughout North America. Interim HealthCare of Pittsburgh began operations in 1972 to serve patient home health needs throughout southwestern Pennsylvania and northern West Virginia. IHC of Pittsburgh has been a certified Medicare and Medicaid home health agency since 1982. IHC provides a broad range of home health services to meet the individual patient's needs - from simple companionship to specialty IV care - from a single home visit to 24 hour a day care. IHC has extensive experience in working with facility discharge planners and health insurance case manager to effect the safe and successful discharge and maintenance of patients in their home. For more information or patient referral, call 800-447-2030.
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TRINITY HOSPICE

Trinity Hospice offers comprehensive care focused on easing the physical, emotional and spiritual pain that often accompanies terminal illness. Trinity Hospice provides an alternative to routine home care and repeated hospitalizations. Offering outstanding care, the hospice team members are dedicated professionals and trained volunteers who specialize in meeting the individualized needs of terminally ill patients and families. For more information or to schedule an assessment, please call 1-888-937-8088.
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PUBLIC HEALTH SERVICES

ALLEGHENY COUNTY HEALTH DEPARTMENT
The Allegheny County Health Department serves the 1.3 million residents of Allegheny County and is dedicated to promoting individual and community wellness; preventing injury, illness, disability and premature death; and protecting the public from the harmful effects of biological, chemical and physical hazards within the environment. Services are available through the following programs: Air Quality; Childhood Lead Poisoning Prevention; Chronic Disease Prevention; Environmental Toxins/Pollution Prevention; Food Safety; Housing/Community Environment; Infectious Disease Control; Injury Prevention; Maternal and Child Health; Women, Infants and Children (WIC) Nutrition; Plumbing; Public Drinking Water; Recycling; Sexually Transmitted Diseases/AIDS/HIV; Three Rivers Wet Weather Demonstration Project; Tobacco Free Allegheny; Traffic Safety; Tuberculosis; and Waste Management. Bruce W. Dixon, MD, Director
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July 16

Helicopter Ball Drop at Jameson Classic

Jameson Memorial Hospital will hold its 15th annual Jameson Golf Classic on Monday, July 16th at the New Castle Country Club. Tickets are now being sold for the Helicopter Ball Drop which will take place immediately following the golf event. Numbered golf balls will be dropped over a selected hole on the course and the ball that rolls into the hole or is the closest to the hole determines the winner.

All proceeds will again benefit the Children's Advocacy Center.

To purchase a Ball Drop ticket for the Jameson Golf Classic to benefit the Children's Advocacy Center, call (724) 656-6111.

August 10-12

POFPS 32nd Annual Convention

The Pennsylvania Osteopathic Family Physicians Society's 32nd Annual Convention will be held at the Hershey Lodge and Convention Center in Hershey. For more information, visit www.poma.org or contact Mario E.J. Lanni at (717) 939-9318.

August 13

Cancer Awareness Golf Scramble

Registration is under way for the UPMC Northwest Cancer Awareness Golf Scramble. UPMC Northwest Foundation will sponsor this benefit event at 10 a.m. on Monday, August 13, at Wanango Country Club. The event will feature a scramble format with four-player teams in men's, women's, and mixed (two women, two men) divisions. Proceeds will go to the UPMC Northwest Foundation Oncology Fund, which supports projects that benefit UPMC Northwest's cancer care services.

For more information, call Nancy Beichner in the UPMC Northwest Foundation office at (814) 676-7141.

August 20

13th Annual Ladies Golf Classic

The Washington Hospital Foundation's 13th annual Ladies Golf Classic is set for Monday, August 20 at St. Clair Country Club. Proceeds will benefit women's health care at The Washington Hospital.

The event will feature an 18-hole scramble (\$225), as well as an afternoon of bridge (\$65) for the non-golfers. The event will conclude with dinner and

Chinese and silent auctions.

For more information or to register, call The Washington Hospital Foundation at (724) 223-3875.

August 23

American Liver Foundation Inaugural Recognition Award Dinner

On Thursday August 23rd, The American Liver Foundation, Western PA Chapter, will honor Dr. Thomas E. Starzl at their Inaugural Recognition Award Dinner, Tribute to Excellence. The event will be at the Longue Vue Club in Verona, PA. Marilyn Brooks, medical editor for WTAE TV will be the guest emcee.

This exclusive Tribute event supports the ongoing efforts of the American Liver Foundation which promotes liver health and disease prevention through research, education and advocacy.

For more information, call (412) 434-7077 or visit www.liverfoundation.org.

October 2-4

Healthcare Facilities Symposium & Expo

The Healthcare Facilities Symposium

& Expo is returning to the Windy City, Chicago, IL, for its 20th anniversary event! Don't miss the longest-running conference and exhibition focused on master planning, design & construction, evidence based design, sustainability, technology, guest services and operations in healthcare facilities. For more information, visit www.hcarefacilities.com or call (203) 371-6322.

October 26

2007 Annual Educational Symposium

Pennsylvania's Association for Long-Term Care Medicine presents the 2007 Annual Educational Symposium on Friday, October 26, at the Wyndham Gettysburg Hotel, 95 Presidential Circle, Gettysburg, PA. This is for long-term care health professionals including Geriatricians, Psychiatrists, Internists, Family Physicians, Nursing Home Administrators, Advanced Practitioners, Registered Nurses, Consultant Pharmacists, Therapists, Physical Medicine and Rehabilitation Professionals, and Social Workers.

For more information, visit www.pamda.org.

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Pine Township **\$469,900**



Quiet cul-de-sac colonial nestled in idyllic Treesdale Golf Community! Incredible floor plan feels open with 4 BR & 3.5 BA. Hardwood floors lie on main level and a cathedral breakfast room highlights a large kitchen with Corian counters. Built-ins are found throughout the family room featuring fireplace and the wainscoted den with dentil crown molding. The upper level presents a luxurious master suite, while the lower level boasts full bath and extra 12x12 bonus room. Gorgeous home on a private street...perfect! #679863

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Cranberry Township **\$272,500**



Compatible home situated in a prime location! A terrific floor plan feels incredibly spacious in this 4 BR residence. Bright, 2 story entry leads into a living room with Palladian windows & graceful dining room with chair rail. From the island kitchen walk-out onto a tremendous deck overlooking the level, fenced yard! Special features include a 1st floor den, vaulted master and finished game room with kitchenette! Just minutes from everything yet in a world of its own! #681805

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Adams Township **\$825,000**



Exceptional private home in Treesdale Golf Community! Residence boasts a stunning two story family room, gourmet island kitchen with large breakfast area and pass-thru fireplace! Multi-functional finished basement features a second kitchen, full bathroom with whirlpool, another pass-thru fireplace and huge wine room! Enjoy a first floor master and den. The rear deck overlooks the picturesque backyard! #663614

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Bradford Woods **\$395,000**



Wooded paradise! Peaceful contemporary sits in serene surroundings with a well-planned layout. Hardwood dining room, large den with built-ins and incredible 2 story kitchen with pine ceiling plus a stone fireplace highlights a vaulted family room with cherry tongue & groove ceiling. Just recently built, the master bedroom suite addition provides vaulted ceiling, skylights, walk-in closet. A see-thru fireplace goes into the master bath offering Cherry cabinets and granite counters. Outdoors, a double deck has its own fireplace and overlooks 1.3 acres of quiet woods. #682035

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Marshall Township **\$449,500**



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Adams Township **\$549,900**



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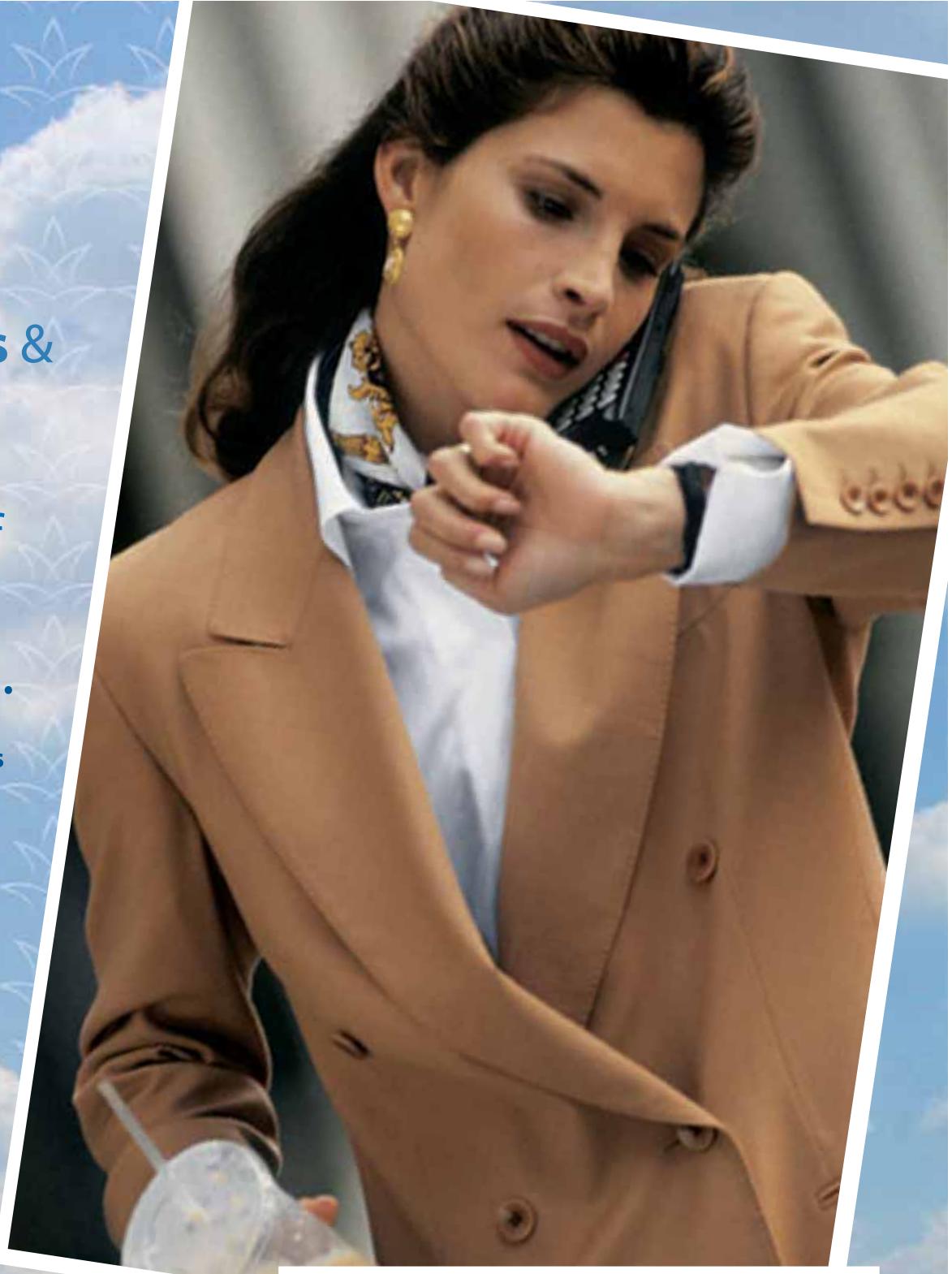
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"I don't think I could have made it if it wasn't for ManorCare."

Ally had struggled with several medical issues, including pneumonia, in January 2007, which left her confused and deconditioned. Clinical services, therapy staff and other disciplines assessed Ally's condition and determined the best treatment plan to get her up and moving again. Ally began rigorous sessions with physical and occupational therapies. As Ally gazed around the therapy gym at the other patients participating in their exercises, she remembered saying to herself, "I know I have a second chance." When she had started her physical therapy treatments, Ally was only walking about 30 feet with assistance. By the end of her rehabilitation course, Ally was walking more than 200 feet on her own and able to do all of her own dressing, grooming and bathing. She was no longer using the feeding tube and was eating regular foods. She was finally ready to return home to her family, friends and her three beloved cats. Ally credits her recovery to the tireless support of her family and the exceptional care provided by ManorCare North Hills. Ally summed up her feelings when she said, "I don't think I could have made it if it wasn't for ManorCare!"



Rachelle Arnold, Speech Therapist
Eddie Nassan and Ally Caldwell-Nassan
Diane O'Reilly, Physical Therapist

HCR Manor Care specializes in providing post-acute nursing and rehabilitation services including physical, occupational and speech therapies, bridging the gap between hospital and home for patients.

Discharge planning home begins on the day of admission for our patients. The interdisciplinary team works with our patients and families to transition them home as safely and quickly as possible.

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