# Quality Defined



ANNUAL REPORT 2008

EALTH SAFE **EFFECTIVE TIMELY EFFICIENT** 



# Quality Defined

In health care, "quality" can be surprisingly difficult to define.

For help in guiding our quality-improvement efforts, Grand View Hospital has turned to the renowned Institute of Medicine (IOM) of the National Academies. The National Academies is a non-governmental, non-profit organization created through congressional charter specifically to serve as adviser to the nation on scientific and technological matters. The IOM provides science-based advice on matters of biomedical science, medicine and health.

The IOM defines quality as "the degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge." In support of that definition, the IOM has established six aims for improving quality in health care, calling for care to be provided in ways that are:

- Safe: Avoiding injuries
- Effective: Providing care based on scientific knowledge to all who are likely to benefit and refraining from providing care to those who are not
- Efficient: Avoiding waste
- Timely: Reducing waits and delays
- Patient-Centered: Honoring the individual and respecting choice
- Equitable: Providing in ways that do not vary in quality because of gender, race or income

This annual report focuses on ways in which Grand View is working within the context of the IOM's aims for improving quality to ensure that your family's health care is provided in ways that are safe, effective, efficient, timely, patient-centered and equitable. We remain dedicated to Grand View's mission of charitable service, and sincerely thank you for your continuing support.

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Visit www.gvh.org to view the annual report online.

Front cover: Jane Ferry, MD, vice president of medical affairs, heads quality-ratings meeting. Her chart shows that in pneumonia care, Grand View Hospital exceeds quality ratings in comparison with averages of other hospitals in Pennsylvania and top-rated hospitals throughout the country.

Mary Anne Poatsy and Thomas Hipp, MD, on Grand View's new helipad, built this year

### Words from Our Trustees

Dear Friends,

As another year draws to a close, we have wonderful successes to report. Perhaps our most visible accomplishment in 2008 is the development of The Upper Bucks Health & Diagnostic Center in Quakertown. Developed in partnership with Lehigh Valley Hospital, the \$9 million facility is providing area residents with an impressive array of specialty health-care services.

Our hospital continues to earn recognition for quality and excellence. Grand View earned the Gold Seal of Approval™ from The Joint Commission for Primary Stroke Centers in 2008. HealthGrades® awarded Grand View the 2008 Distinguished Hospital Award for Patient Safety™. We are the only hospital in a seven-county region to earn this distinction, ranking Grand View in the top five percent of hospitals in the country for patient safety. For the third year in a row, HealthGrades awarded Grand View a five-star quality rating for providing superior maternity services.

This fiscal year, we are building five new labor, delivery and recovery rooms and expanding our Level II nursery. This is in addition to recently completed space enhancements—including a new entrance and elevator to the Medical/Surgical Short Stay Unit, a restructured Medical-Surgical/Oncology Unit and a newly constructed Joint Replacement Center and Orthopaedic Unit with all-private rooms.

Of course, none of these accomplishments could have been possible without our outstanding physicians and staff, who dedicate themselves to providing patients with high-quality, compassionate care. The people of Grand View make it happen.

Thank you for selecting Grand View Hospital as your health-care provider of choice.

May and Postsy

Mary Anne Poatsy Chair, Board of Trustees Grand View Health Foundation Thomas J. Hipp, MD Chair, Board of Trustees Grand View Hospital

# SAFE Avoiding injuries. Institute of Medicine



Darla Weaver, RN, vice president of quality

We are the *only*hospital in a sevencounty region—
comprising Bucks,
Montgomery, Chester,
Delaware, Lehigh,
Northampton and
Philadelphia—to
receive the National
Patient Safety Award.

# HealthGrades Ranks Grand View in Top 5% in the Nation for Patient Safety

The Grand View staff is committed to patient safety. We are proud to announce that our safety efforts have been recognized by HealthGrades®, the nation's leading health-care ratings company that awarded Grand View Hospital the 2008 Distinguished Hospital Award for Patient Safety™.

Grand View ranks in the top five percent in the country for patient safety, according to HealthGrades. In its Fifth Annual Patient Safety in American Hospitals Study, HealthGrades independently analyzed 41 million Medicare patient records. The study found that patients treated at top-performing hospitals had, on average, a 43 percent lower chance of experiencing one or more medical errors compared to the poorest-performing hospitals.

If all U.S. hospitals had performed at the level of Grand View and other HealthGrades 2008 Distinguished Hospitals for Patient Safety, approximately 220,106 patient-safety incidents and 37,214 Medicare deaths could have been avoided. HealthGrades reports that the U.S. would have saved \$2 billion during 2004 to 2006 by avoiding these deaths and incidents. The study applies methodology developed by the U.S. Department of Health and Human Services' Agency for Healthcare Research and Quality.

"Grand View is among those hospitals leading the way to reduce these costly errors and improve patient care in America," said Dr. Samantha Collier, HealthGrades' chief medical officer and primary author of the study.



Beth Dobbs, RPh, pharmacy assistant manager and Brian Plajer, RPh, pharmacy manager



# **Pharmacy Adds Robot for Safety**

Medications can benefit patients in many ways, such as attacking infection, relieving pain and reducing swelling. However, the incorrect use of medications can cause dangerous consequences. To enhance medication safety, Grand View has adopted a system that features a robot for dispensing medications.

"The key to this project is the safety of our patients," said Brian Plajer, RPh, pharmacy manager. "This sophisticated automation system helps to ensure the accuracy of each dose of medication for every patient. It reduces the opportunity for error."

Ultimately, the new system will help with bedside verification of medications. Nurses scan the bar code on a patient's ID bracelet and compare it with that on the medication. Information will be verified through a patient's electronic medical record. Known as bar code medication verification, the process is expected to be operational within a year. Future plans include computerized physician order entry within two years.

The system also relieves pharmacists from dispensing medications by hand, reducing the opportunity for error. This frees them to more fully participate in the hospital's quality-improvement efforts. Their education and experience equip them for high-level clinical responsibilities, such as serving on medication-

related committees that affect hospital policies and procedures. "Whenever we can eliminate a manual task and use the time to perform clinical activities, which ultimately affect patient safety, it benefits the hospital, pharmacy staff and, most importantly, the patient," said Plajer.

To accommodate the new robotics system, the pharmacy moved from an 1,800-square-foot space to a completely renovated 4,000-square-foot wing. The system consists of three components working together:

- A processor that produces packages at a speed of up to 60 doses per minute
- A carousel that stores medications and delivers superior dispensing precision, thus reducing pharmacist checking time and accurately managing medication inventory
- A robot that dispenses medications in prepackaged doses using patient-specific cassettes or envelopes

"I commend the pharmacy staff for its diligence in evaluating options, developing the plan and managing the implementation of our new system," Plajer said. "They should take pride in knowing they have improved the safety of every patient who receives medication at Grand View Hospital."

## **Stroke Program Nationally Recognized**

A stroke occurs when a blood clot blocks a blood vessel in the brain or when a blood vessel in the brain ruptures. Due to loss in blood flow, brain cells in the surrounding area die usually within minutes to a few hours after the stroke begins. When brain cells die, an individual suffers a loss of body function, such as speech, movement and memory. Specific abilities affected depend on the location within the brain where the stroke occurs and on the extent of the stroke.

In 2008, Grand View decided to raise the Stroke Program to a higher level. We dedicated a full-time nurse to enhance the program and established a Stroke Team—consisting of nurses, physicians and other health-care professionals trained in stroke care, emergency services, neurology and radiology. Efforts paid off. The Joint Commission for Primary Stroke Centers awarded Grand View the Gold Seal of Approval™ following an onsite review in December.

"The hospital demonstrated that its Stroke Care Program follows national standards and guidelines that can significantly improve outcomes for stroke patients," said Jean Range, MS, RN, CPHQ, executive director, Disease-Specific Care Certification, Joint Commission.

Grand View is one of a select number of hospitals in America recognized in *U.S. News & World Report* (July 21, 2008, issue) by the American Stroke Association's *Get with the Guidelines™* (GWTG) program for an Annual Performance Achievement Award. GWTG is the premier hospital-based, quality-improvement program for the American Stroke Association empowering hospitals to consistently treat stroke patients according to the most up-to-date guidelines and recommendations.

# Stroke Team to the Rescue

Stroke Coordinator Denise Kistler, RN, will never forget the despair she saw in eyes of 83-year-old Walter Brems as he struggled to talk to her in the Emergency Department. When asked his name, he could not form the words to answer. Tears streamed down his face as he feared what this might mean.

Walter's morning began like most others. He drove to the gym for his daily workout. As he pulled his car into the parking lot, everything suddenly went wrong. He found himself unable to speak or move the right side of his body. A passerby noticed Walter behind the wheel, staring blankly ahead. The stranger called 911, and the medic contacted Grand View's Emergency Department, where staff immediately set Grand View's stroke care protocol into motion.

### Walter Brems' Acute Stroke Timeline

July 2

**7:15** AM

Patient Has Not Yet Experienced Stroke Symptoms 7:43 AM

Ambulance Personnel Notifies Emergency Department **7:56** AM

Stroke Team Meets Patient upon His Arrival to the Emergency Department 8:05 AM

CT Scan Performed and Blood Drawn 8:20 AM

Stroke Team Receives Lab and CT Scan Results

9:28 AM

tPA Administered

4



Stroke is the nation's THIRD leading cause of death. Every 45 SECONDS, someone suffers a stroke. Every 3.1 MINUTES, someone dies of a stroke. Each year, nearly 700,000 Americans experience a new or recurrent stroke. Stroke is also a leading cause of serious, long-term disability in the U.S., with about 4.7 MILLION stroke survivors alive today.

Left to right: Jacki Howenstein, RN, emergency department manager; Kathryn Connelly, RN, emergency department nurse; Walter Brems, stroke survivor; Pamela Ridings, Walter's friend and housemate; and Denise Kistler, RN, stroke coordinator

The Stroke Team assembled prior to Walter's arrival at Grand View. "Our staff is skilled in recognizing the symptoms of a stroke and reacting quickly," said Richard Buckler, MD, medical director of the Stroke Program. "We often provide patients with Tissue Plasminogen Activator (tPA), a drug that can dissolve blockages in the blood vessels when administered within three hours after the start of a stroke."

Every second counts. At the start of one's treatment, the Stroke Team is already planning for the hospital stage of a

patient's recovery. We educate patients and their families and watch patients closely for changes in their condition so we can prevent further problems. Patients receive testing to determine the cause of the stroke or transient ischemic attack (TIA or "mini stroke"). This allows us to provide treatment to reduce the chance a stroke will happen again. Our physical, occupational and speech therapists evaluate patients to create a rehabilitation plan.

The fact is each person's ability to recover from stroke is unique. The sooner

rehabilitation begins, the more likely an individual will benefit. Before sending patients home, we help them align services they need to continue recovery, such as outpatient physical therapy. Walter, for example, received speech therapy through Grand View's Home Care Department.

Walter was fortunate. He has completely recovered from his stroke neurologically. "Grand View Hospital is my favorite," Walter said. "I liked this hospital even before I had the stroke. I came back to tell everyone 'thank you."

11:00 AM

Stabilized Patient Transferred to the Intensive Coronary Care Unit (ICCU) July 3 **9:28** PM

Clot-Prevention Medication Initiated\* July 4

**11:00** AM

Blood Pressure Medication Treatment Initiated\* **12:42** PM

Patient Transferred from ICCU to Stroke Unit

**5:00** PM

Cholesterol Medication Treatment Initiated\* July 9 **4:03** рм

Patient Discharged

Evaluation for Rehabilitation Services: Physical, Occupational and Speech Therapy Provided as Needed — Medical Management and Intervention to Improve Health and Reduce the Likelihood of Stroke Recurrence

<sup>\*</sup>Guidelines by the National Institute of Neurological Disorders and Stroke and the American Stroke Association. On July 3, clot-prevention medication was initiated in accordance with the time frames as indicated by the guidelines. Additional diagnostic testing was conducted to determine the cause of the stroke and prevent recurrence. Results revealed that Walter had elevated blood pressure and cholesterol levels. To manage these conditions, medication was prescribed and administered prior to discharge.

# **Grand View Improves Quality and Efficiency** through Comparison among Top Performers

Successful coaches provide their teams with the opportunity to play with the best opponents. Being challenged by top competitors, they adopt what their rivals do well, identify their own shortcomings and, consequently, improve.

Hospitals take a similar approach to quality improvement. Health-care organizations, including Grand View, participate in benchmarking—a tool hospitals use to compare results of the care they provide. The goal of this effort is to improve quality. Hospitals with the best results for specific types of care are identified so that their work processes, often referred to as best practices, can be studied. If appropriate, these best practices are adopted by other hospitals. Several state and national organizations—many of which are affiliated with government agencies—lead these quality-improvement efforts through the collection and sharing of data that measures actual results of care. Through studying this data, experts have determined that certain steps taken within a specific period of time can result in better outcomes for patients.

Among the national quality initiatives are Core Measures, care standards derived from a set of quality indicators defined by the Centers for Medicare and Medicaid Services (CMS). Core Measures aim to improve the quality of health care by implementing a national, standardized performance measurement system. Core Measures are scientifically proven interventions provided within a specific period of time within the course of the patient's care. For example, did a patient admitted with pneumonia receive an antibiotic within six hours of admission? Compliance with the Core Measures has been shown to reduce the risk of complications, prevent recurrences and improve treatment for the majority of patients who receive hospital care. The Core Measures relate to treatment provided for heart attack, pneumonia, congestive heart failure and surgical care.

We are proud of how Grand View measures up and invite you to visit the quality section of our web site, www.qvh.org, for graphs and information on how we compare with hospitals across the state.



The Upper Bucks Health & Diagnostic Center



## Partnerships with Premiere Health-Care Organizations Assist Grand View in Bringing Cost-Effective Specialty Services to Our Area

Grand View is committed to bringing comprehensive, quality health care to our community in an efficient manner. We accomplish this by employing health-care professionals, working with private-practice physicians and developing relationships with other premiere health-care organizations.

Medical specialists affiliated with Grand View Hospital and Lehigh Valley Hospital and Health Network began providing services in Quakertown this August. This partnership formed The Upper Bucks Health & Diagnostic Center. The 38,000-square-foot outpatient center offers primary and specialty care and diagnostic testing provided by Grand View.

"We are pleased to be able to respond in such a positive way to the many, many requests that we've received from Quakertownarea residents to make our services more readily available to residents of Upper Bucks," said Stuart H. Fine, president and CEO of Grand View.

Our affiliations with organizations, such as the Children's Hospital of Philadelphia and Fox Chase Cancer Center, have enabled Grand View to provide specialty services in a more cost-effective way than if we were to provide them alone. Through the CHOP Connection, Children's Hospital physicians are present at Grand View 24/7 to assist hospital staff and local pediatricians. They care for newborns needing intensive neonatal care, seriously ill or injured children arriving in our Emergency Department, and youngsters admitted to our Pediatrics Unit.

The quality and depth of our cancer program is the reason Fox Chase selected Grand View as a community hospital partner. This partnership gives our patients access to state-of-the-art studies; second opinions by Fox Chase physicians at our High Point Cancer Center in Chalfont and the Fox Chase Cancer Center; and programs designed for those at high risk for certain cancers.

## Services at The Upper Bucks Health & Diagnostic Center

- Adult and pediatric physical and occupational therapy
- Bone densitometry (DEXA)
- Cardio-thoracic surgery consultations
- Digital radiology (X-ray)
- EKG
- Endocrinology
- Family medicine
- General surgery consultations
- Gynecological oncology
- Laboratory services
- Obstetrics and gynecology services
- Pediatrics
- Pediatric speech therapy
- Pediatric surgery consultations
- Spine, brain and orthopaedic care
- Surgical oncology consultations
- Ultrasound

Digital mammography coming soon.



Laura Braslow, certified physician assistant

From its inception in November through the end of July, 97% of patients who went through **FAST TRACK** have been treated and released within 90 MINUTES of arrival.

# **Fast Track Improves Patient Satisfaction** by Reducing Waiting Time

Fast Track, a new program of our Emergency Department (ED), offers an alternative to patients with less-serious injuries or illnesses—enabling the ED staff to focus on patients with more severe conditions. The result is shorter wait times and improved patient satisfaction.

Emergency departments prioritize the order patients are treated based on need," said Jacki" Howenstein, RN, emergency department manager. "Anyone with a life-threatening situation is seen immediately. Previously, people with less-serious needs had to wait. Now, by caring for patients who do not require emergency-level care in Fast Track, all patients receive the appropriate level of care sooner."

Fast Track resulted from a quality initiative to treat a significantly increasing number of patients in our ED while continuing timely service. An emergency-medicine trained nurse evaluates patients arriving in the ED to determine whether they are appropriate for

Fast Track. Eligible patients may opt for Fast Track or wait to be seen in the ED. As always, we give a patient's family physician a report on the care we provided. We arrange follow-up care, if required.

James Rembicz of Pennsburg was treated in Fast Track for a sprain. "I want to thank many individuals, from the dear lady who signed me in to those who X-rayed and treated my injury, for discharging me within one hour. I still cannot believe the quickness, yet thoroughness, of my stay. I want you to realize how comfortable and at ease you all made me feel. Congratulations to those who brought this idea to fruition."



Left to right: Peggy Ziegler, respiratory therapist; Sandra Corrado, MD, hospitalist at GVH; Sue Sheaffer, RN, nursing supervisor; and Terri Michniewicz, RN, ICCU, in rapid-response mode

# Rapid Response Team Brings Intensive Care to Patients' Bedsides

Hospitalized patients can experience a sudden, even life-threatening, event. Identifying subtle changes in a patient's health and taking immediate action can mean the difference between recovery and disability...or life and death.

To mobilize resources quickly, Grand View established a Rapid Response Team (RRT) that brings intensive-care services to a patient's bedside within minutes. The core team consists of an Intensive Coronary Care Unit (ICCU) nurse, nursing supervisor, respiratory therapist and

hospitalist (a physician who cares for hospital patients).

Often referred to as Medical Emergency Teams, RRTs aim to reduce unnecessary adverse outcomes, such as patient decline or death, through early and effective intervention. Studies suggest that as the number of rapid-response calls increases, the number of cardiac arrests and mortality rates decreases. Beginning in 2006, Grand View was among the first hospitals in the nation to have an RRT.

Polly James, an RN who has initiated several RRTs, recalls a recent incident. "I was transferring my patient from her bed to a wheelchair. As we were talking, she wasn't responding appropriately. I signaled a colleague to call the RRT. In minutes, they determined she was having a stroke. They transferred her to the ICCU, where the Stroke Team began immediate intervention to minimize the effects."

The RRT helps to identify early stages of heart attack, stroke and respiratory distress. In such cases, patients are quickly transferred to the ICCU. In less-serious cases, patients can remain in their unit. A nurse, therapist or other health-care staff member may call an RRT in the event of a seizure or a change in:

- Respiratory rate
- Oxygenation (the amount of oxygen in the blood)
- Heart rate
- Blood pressure
- Mental status (agitation, confusion or unresponsiveness)
- Breathing (labored or uncontrolled)

"We empower any hospital member to signal a rapid response," said Carol Knauff, RN, chair of the Rapid Response Team Committee. "The member calls the operator, who notifies our team through the overhead paging system. It's like our own 911."

The establishment of Rapid Response Teams was encouraged by the Institute for Healthcare Improvement (IHI), an independent not-for-profit organization helping to lead the improvement of health care throughout the world. The IHI launched the 100,000 LIVES CAMPAIGN, which called for hospitals to implement six quality initiatives, including RRTs, and save 100,000 lives. Since then, the IHI has expanded the effort to the 5 MILLION LIVES CAMPAIGN, adding another six initiatives anticipated to save 5 million lives by December 2008.



# CENTERED

# Fighting with an Angel at Her Side

Cancer survivor Nancy Phillips exudes strength. Over a period of three years, she has been treated with eight chemotherapeutic drugs. Her love of life bolsters her resolve to fight cancer. The little things comfort Nancy—like the kitten she recently found meowing outside her door. She named it "Angel" because it reminded her of Thanksgiving 2005, when she noticed an ornamental angel hanging from a tree on her property. She still has no idea how it got there.

More than anyone, Nancy knows that acts of kindness fortify a patient's fight against illness, including those by health-care professionals. For 36 years, she witnessed such magic while working at Grand View Hospital as an RN.

All the wiser, when diagnosed with ovarian cancer, Nancy refused her family's urging to "go to the city" for chemotherapy. She was well aware of the excellent quality of Grand View's cancer program and liked the convenience of driving 10 minutes from home.

Nancy firmly believed Grand View's staff would treat her respectfully as an individual.

Throughout her chemotherapy visits, she has developed a close friendship with Medical Oncology Unit nurses. "Grand View has been on the cutting edge of cancer care," Nancy said. "What makes the staff special is their compassion and commitment to fill each patient's basic needs. They're always willing to go the extra mile."

Using her knowledge and assistance from people like Susan Tisdale Lezoche, Grand View's referral coordinator, Nancy assembled her own treatment team, including oncologist Thomas Siesholtz, MD, gynecologist Mary Pagan, MD (both members of the Grand View Medical Staff), and gynecological oncologist Michael Bookman, MD, of Fox Chase Cancer Center.

The team aggressively treated Nancy's cancer with surgery, followed by chemotherapy, and continually adjusted medication so it would have the greatest effect. As a result, Nancy was able to work at her job throughout most of her treatment.



Sue Tisdale Lezoch referral coordinator

#### **Second Opinions**

People with cancer can often benefit from a second opinion. For the convenience of our patients, we offer a second-opinion service through Fox Chase Cancer Center, either at its Philadelphia campus or Grand View's High Point Cancer Center in Chalfont.

Sometimes patients don't know where to begin. Fortunately, Sue Tisdale Lezoche, referral coordinator, works on behalf of the individual to make an appointment, send Fox Chase results of tests such as CT scans and pathology slides, and provide patients with pertinent information, such as driving directions. "Knowing someone is there to help can go a long way in reducing stress for patients and their families," said Sue.

### PET/CT Scanner Coming Soon to the Sellersville Outpatient Center

A highly advanced imaging tool, PET/CT combines positron emission tomography (PET) and computerized tomography (CT) in a single test. PET/CT images show how cancer is responding to treatment and help physicians in determining the best treatment for patients. The highly sensitive PET scan detects actively growing cancer cells while the CT scan provides a detailed picture that reveals the location, size and shape of abnormal cancerous growths.

# **PATIENT-CENTERED**

# Safe and Sound in our 5-Star Maternity Department

As everyone gushes over the newborns in our Maternity Department, we're celebrating for another reason. The nursing staff in Grand View's maternity suite has been trained in STABLE—a program designed to provide neonatal resuscitation and stabilization to critically ill newborns. Since 1996, the program has been taught to more than 50,000 nursing, respiratory therapy and physician participants in more than 20 countries.

"Our nurses are trained to make appropriate and accurate intervention and are prepared to stabilize neonates for their stay at Grand View or for transport to another facility, such as Children's Hospital of Philadelphia," noted Nicholas Lindberg, MD, chairman of the Department of Obstetrics and Gynecology.

"New parents should feel comforted knowing that nurses here are armed with the right tools to handle the unexpected, as quickly as possible," said Joanna Horst, RN, manager of Maternal Child Nursing. "We are all about having our quality of care set us apart."

Surely, it does. Grand View Hospital was awarded a five-star quality rating in maternity care for 2007, 2008 and again for 2009 by HealthGrades®—the nation's leading provider of objective, clinical quality ratings for hospitals throughout the country.

#### Ask Questions for Your Health

It is good

Patients need to fully understand what is happening to ensure they receive the best possible care in accordance with their preferences. As a result, we're turning the tables by encouraging patients to ask us questions. "Fully informed individuals can take charge of their health," said Cathy Hurley, RRT, quality management manager. "At Grand View, we regularly ask questions to confirm patients are receiving the care and treatment intended. Identifiers like name and date of birth prevent confusion and ensure safety."

Patients who BENEFIT from TRANSLATION RESOURCES Are not fluent in English Have a neurological or developmental impairment Are confused due to illness, injury or medication Have hearing loss Are on a ventilator

Sign language interpretation in action

# 

Institute of Medicine

# **Translating Health Care**

The right to make decisions about one's own health care is fundamental. Informed decisions can occur only if available options are clearly understood. Considering the complexity of medical and surgical procedures and treatments, this can be downright daunting for patients facing communication challenges. Therefore, as one of our many quality initiatives, we have aligned numerous resources to provide interpretation and translation services.

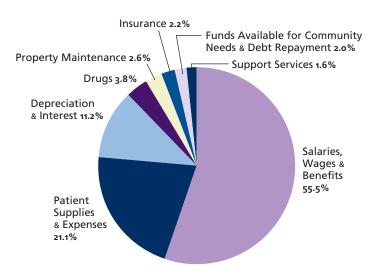
- Language Interpretation in nearly every language is available through a special communication line. Using telephone sets with two receivers, a health-care professional and patient communicate with an interpreter simultaneously overcoming any language barriers to ensure medical information is accurately conveyed.
- Sign Language Interpretation is possible through a video monitor positioned in the patient's room. A sign interpreter visible on the screen sees and hears both the patient and health-care professional. The doctor speaks as the interpreter signs information to the patient, who, in turn, responds in sign, which the interpreter relays back into English.
- Language Boards with small pictures representing common needs enable patients with limited speech to use visual cues to communicate.
- Translated Documents, such as our Patients Rights and Responsibilities brochure and some patient consent forms, are available in Spanish and Vietnamese. After English, these are the two most commonly spoken languages among our patient population.

We educate our staff to be sensitive in identifying patient needs and in offering assistance. Often, people with language challenges do not expect help or may be embarrassed to request it. In the past, family members were often counted on to interpret—from simple tasks like ordering meals to translating complicated medical information. "As a health-care provider, we're responsible for making sure information is conveyed accurately and completely to ensure a patient's safety and wellbeing," said Darla Weaver, RN, vice president of quality.

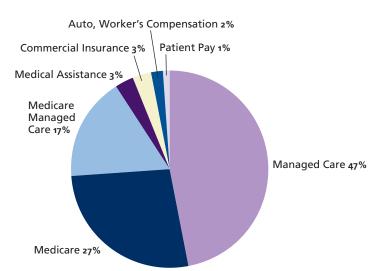
### Healthy Beginnings Plus for Moms-to-Be

Every patient deserves quality care, regardless of financial situation. To ensure a fresh beginning for each newborn, Healthy Beginnings Plus offers prenatal care at no cost to women with low income. Our team of board-certified OB/GYNs, specially trained nurses, social workers, dietitians and educators work together to offer individualized care to expectant mothers.

#### **HOW THE REVENUE IS USED**



#### WHERE THE REVENUE COMES FROM



#### **Charity Care Policy**

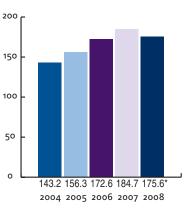
Grand View Hospital is committed to treating patients who lack financial resources with the same dignity and consideration that is extended to all of our patients. We provide charity care to those who have an inability to pay. For the fiscal year ended June 30, 2008, Grand View provided charity care in excess of \$20 million.

## OPERATING REVENUE Millions of Dollars

150 -100 -50 -

#### COMMUNITY OWNERSHIP

Millions of Dollars

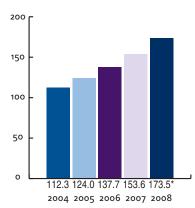


#### **OPERATING EXPENSES**

116.3 128.7 142.3 157.9 175.5\*

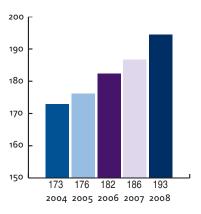
2004 2005 2006 2007 2008

Millions of Dollars



## INPATIENT ADMISSIONS AND OUTPATIENT VISITS

Thousands of Visits



\*Preliminary unaudited numbers

# **HUMAN RESOURCES**

#### Best Places to Work in PA

Grand View was selected as one of the Best Places to Work in PA for 2007 in the large business category. This recognition program is a public/private partnership of Team Pennsylvania Foundation, the Pennsylvania Department of Community and Economic Development, the Pennsylvania Chamber of Business and Industry,

Employee benefits, including our subsidized onsite childcare center, weekend-only work schedules and numerous free options for employee health and fitness programs—some available onsite—contributed to Grand View's recognition as an exceptional employer.

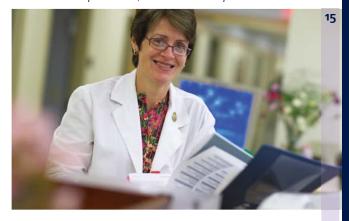
and the *Central Penn Business Journal*. Designed to identify, recognize and honor the best places of employment in Pennsylvania, the list consists of 100 companies.

# Making the Honor Roll of Companies That Care (a Third Time)

We were one of 41 companies in the nation listed on the 2008 Center for Companies That Care Honor Roll. Selected organizations are committed

to elevating the quality of the work environment for their employees and quality of life for people in the community. Selected companies sustain a work environment founded on dignity and respect for all employees, develop great leaders and communicate standards of ethics and integrity—among other outstanding attributes. Grand View also received this award in 2006 and 2007. Center for Companies That Care is a national, not-for-profit organization based in Chicago.

Janice Hunsberger, RN, in the newly constructed Joint Replacement Center and Orthopaedic Unit, located on the hospital's fourth floor



#### **Outstanding Nurse**

Joint Replacement Center Coordinator Janice Hunsberger, RN, recently received the Outstanding Orthopaedic Nurse Practice Award. The national award, established in 1982, is presented to a National Association of Orthopaedic Nurses (NAON) member who has provided high-quality health care to orthopaedic patients and has made outstanding contributions over her career to the field of orthopaedic nursing.

#### New Faces, Added Talent





















**Top, left to right:** Kathy Burkey, vice president of nursing; Arthur Flatau III, MD, vascular surgeon; Miroslawa Jablonski-Cohen, MD, cardiologist; Julien Sanon, MD, hospitalist; and Keren Hancock, MD, obstetrician/gynecologist



Bottom, left to right: David Held, MD, hospitalist; Tina Heuchert, CRNP, nurse practitioner; Maricarol Morley, division manager, planning & marketing; Jennifer Dupre, MD, family medicine practitioner; Kelly O'Driscoll, MD, family medicine practitioner; and Thomas Peacock, MD, oncologist

# The Charles J. Manderfield Society Recognizing Donors for a Lifetime of Giving

Charles J. Manderfield was a quiet man whose simple lifestyle gave little hint of his true means or generosity to Grand View Hospital. This society, named in his honor, recognizes donors whose lifetime of giving reflects Mr. Manderfield's commitment to charity. Outright gifts to Grand View Hospital and the Grand View Health Foundation or payments on pledges received through June 30, 2008, and totaling \$25,000 or more are honored and recognized here. Members are invited to special programs during the year, and their names are included on a Manderfield Society plaque in the main lobby of the hospital.

#### Chairman's Circle (\$100,000.00+)

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The Visionary Society recognizes individuals who believe in the mission of the Grand View Health Foundation and Grand View Hospital, and have planned a bequest, created a gift annuity, established a charitable remainder trust, or in some way provided for a gift that will live on in perpetuity. We think those who have had the foresight to generously plan a gift to the Foundation should be thanked now, while they can enjoy the recognition. It also provides our donors the opportunity to direct their gifts to programs of greatest interest to them. Visionaries are invited to special programs during the year, and their names are included on a Visionary Society plague in the hospital's main lobby. Anyone making a planned gift may choose to remain anonymous.

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...Continued on page 18



Mrs. Grace Clemmer Void on her front porch



# **COMMUNITY SUPPORT**

# Giving Since Age Seven

It would be difficult to find someone with deeper roots in our community than Grace Clemmer Void. Born at home in Sellersville in 1916, Grace has never lived anywhere else. She has seen the community change in many ways—including Grand View Hospital, founded just three years before she was born.

One of her earliest memories of the hospital was walking with her father, Clayton Clemmer, up the steps of the original white-framed house and knocking on the front door. Grace was just seven years old, but she remembers her father, a barber, volunteering to shave the gentlemen patients. This and other gestures, such as giving jam and canned goods to the hospital, were common occurrences in the Clemmer home.

Grace Clemmer met Les Void at Sell-Perk High School. They married in 1940 and settled down in Les' home town of Perkasie. On January 1, 1943, there was great joy and New Year's cheer as they welcomed Drucille, their first-born child. The delivery was in every other way uneventful. However, five years later, it would be a different story.

A miscarriage and a still birth had saddened the young family. However, even this had not prepared them for the life-threatening situation they would face on September 11, 1948. At that time, the medical community was still learning about Rh factors in the blood and complications that can arise for pregnant women and their newborns when the mother is Rh negative and the father is Rh

positive. Few people know this better than Grace Void and her daughter, Jewel Rufe, who was born on that day.

Fortunately, William Bonney, MD, a close family friend, recognized the gravity of the situation. Dr. Bonney contacted Horst A. Agerty, MD, from Hahnemann Hospital, who traveled to Sellersville. Within hours of her birth, Jewel had undergone a complete blood transfusion with the help of Dr. Agerty, the Grand View medical staff, and Grace's brother, Arthur, who turned out to be the perfect match as a blood donor. "They saved Jewel's life," Grace explained. "Babies with her condition were dying at other hospitals."

To show their gratitude to Grand View Hospital, Grace and Les continued to support the hospital throughout their lives. "During his 30 years on the hospital Board of Trustees, Les was always one to embrace new technology," Grace said. "Although Grand View was a small community hospital, he wanted it to be high quality." As donors to the hospital, Les and Grace Void are part of the reason Grand View has been able to pursue the latest technologies and keep quality care close to home.

Les passed away on August 15, 2003; however, Grace has continued to support the hospital she first visited at age seven. "I will always be grateful for the incredible care Jewel received, and Dr. Hansen and Dr. Godshall saved my life after a head-on car crash in 1968. Most of all, I give to Grand View because the community needs this hospital," Grace said.

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The generous planned gifts we have received from these farsighted individuals are helping to make compassionate health care available to all in our community.

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Grand View Health Foundation	215-513-3935
Grand View Health Line Physician referral	215-453-9676
Human Resources	215-453-4874
Operator	215-453-4000
Patient Relations Coordinator	215-453-4975
Volunteer Services	215-453-4619

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Grand View Hospital raised the roof in 2008 to add new patient units.

Grand View is a progressive community hospital dedicated to providing patients with quality services through our talented staff. Our reputation is built on compassionate caring and the effectiveness of our team. We are always seeking individuals with energy and experience to join us. For opportunities, call Human Resources at 215-453-4874 or visit www.gvh.org.

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#### Mission

Grand View Hospital endeavors to provide and coordinate the appropriate utilization of quality, cost-effective health care and related services for the Upper Bucks and Northeastern Montgomery County communities that we serve. While maintaining our traditional commitment to personalized, compassionate care that respects the dignity of the individual, Grand View Hospital strives to make quality programs and services available to and accessible by our community. Consistent with our technological, financial and human resources, the organization works to address the changing health-care needs, wants and preferences of those we serve.