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CHRISTIANA CARE  
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**NEW PUBLICATION  
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You didn't miss the July 2014 issue of Focus. To better serve our readers, we've shifted the publication schedule so that each month's issue publishes at the beginning of the month instead of the end. The July issue was delayed a week and became this August issue.

Learn more, including how to propose a news story or feature article for Focus, on the intranet portals at <http://inet/ExternalAffairs/proposals.html>



Renitia Pulliam, RN, provides blood-pressure screenings while Joceline Valentin translates at the New Castle Farmers Market.

## Making healthy connections, one shopper at a time

It's a busy Friday at New Castle Farmers Market, and shoppers are browsing for healthy fruits and vegetables, bargains on kids' clothes — and resources to keep themselves and their families healthy.

For the past five years, education and outreach workers from Christiana Care Health System have brought free health screenings and vital information directly to the people at the farmers market, offering "Health Info on the Go." On a typical day, 75 – 100 shoppers stop by the Christiana Care booth, where there are displays on topics such as colorectal cancer and breast health. Shoppers ask outreach workers questions and can take home educational brochures in English and Spanish.

Christiana Care has held 41 events at the market. In all, more than 1,300 people have received cardiovascular screenings. Many come from underserved communities and lack ready access to care. For example, of the more than 260 people screened at the market in 2011 and 2012, 52 percent were minorities, 28 percent had no insurance and 27 percent had not seen a doctor in a year or more.

"When you look at the farmers market, you see a diverse group of people that reflects our catchment area: Hispanics, Asians, young families and seniors, as well as people from downstate and Pennsylvania," said Nora Katurakes, MSN, RN, OCN, manager of the Community Health Outreach & Education Department at the Helen F. Graham Cancer Center & Research Institute.

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On one afternoon at the market, Alberto Aguilar Baca, 43, of New Castle, learned that he is at increased risk for heart attack. His blood pressure was in the borderline-high range. Blood tests showed his glucose levels were elevated and his body was not producing enough “good cholesterol,” the substance that protects against the bad cholesterol that clogs arteries and causes strokes and heart attacks.

Baca does not speak English. So Juan Navarro, a Christiana Care medical interpreter, worked with Renitia Pulliam, RN, a community outreach nurse, to explain his test results, interpreting from English to Spanish. She encouraged him to follow up with his doctor. Then she showed him a chart depicting various foods and talked about a heart-healthy diet, urging him to avoid fatty foods, including butter, egg yolks and processed meats such as hotdogs and sausages. Baca left the market armed with knowledge to take steps to improve his own health.

Christiana Care developed this creative farmers market model to connect underserved people with care and information, and to help eliminate disparities in care. A team of dedicated, culturally diverse, multilingual outreach workers engages shoppers through routine screenings for blood pressure, cholesterol and blood sugar, and education about health, cancer screenings, and prevention and early detection of disease.

Each farmers market event has a different health-related theme. On June 13, for Father’s Day, the theme was men’s health. Outreach and education workers wore blue T-shirts and educated men and their loved ones about prostate cancer, lung cancer and other topics. A total of 41 people received health screenings. Of those, 10 required followup for mammograms, colonoscopies or both.

Paul Coulby, Lee Seward and Ray Jones are friends who enjoy going to the farmers market to people-watch. Several years ago, they set up chairs by the Christiana Care booth. Soon, they found themselves watching outreach workers educating shoppers on such concerns as secondhand smoke, diabetes and skin cancer.

“We see the way the Christiana Care folks interact with people, and they do a fine job,” Coulby said. “So now we get our blood pressure checked.”

Raul Landa Ruiz and his 18-year-old son Jhonathan Landa Niebla recently arrived from Cuba and are staying with an aunt in Newark, who took them to the farmers market so they could receive free screenings and learn how to get access to primary care. Their aunt had heard about the event through the Latin American Community Center in Wilmington.

Joining forces to get the word out to neighbors is an important part of Christiana Care’s outreach. Christiana Care has partnered with the Alzheimer’s Association, Beautiful Gate, an HIV center, the Latin American Community Center, United Health Care and other organizations to come to the market and offer their

resources at the monthly events. The outreach team also encourages the market vendors to participate by encouraging shoppers to check out the free health information and screenings.

Greg Beecher, general manager of the farmers market, thoroughly supports the effort by providing free space, tables and chairs. He has donated items for events such as fruit, pretzels and balloons, and he helps to promote the events with fliers and announcements. “It’s good for the public, good for our shoppers and always a very positive experience,” Beecher said.



New Castle Farmers Market Manager Greg Beecher (center) poses with Christiana Care’s cancer outreach and education team after a successful day of health education and screenings.

Christiana Care has enlisted a variety of its services to participate in events at the farmers market. For example, Christiana Care providers in nuclear medicine and imaging have brought bone-density screenings to the market. Christiana Care’s Marketplace Guides help to connect uninsured people with health insurance.

Beatriz Velasquez, who moved to the U.S. from Colombia, works for a vendor at the market. She doesn’t have health insurance and wondered how she could afford preventive screenings. Luisa Ortiz-Aponte and Joceline Valentin, outreach and education workers, connected her with Christiana Care’s annual skin-cancer screening event. They also made arrangements for her to receive a free mammogram at the Christiana Care Breast Center through a grant from Susan G. Komen for the Cure — Philadelphia.

Velasquez had been concerned about getting a mammogram. But until she met the outreach workers, she didn’t know who to ask for help.

These connections flourish at the market, where shoppers know they can turn to Christiana Care for expert, respectful health education and screenings.

“The conversation is in a nonthreatening place, and people will ask us questions that they don’t have an opportunity to ask somewhere else,” Katurakes said. “That connection breaks down barriers so people can get the care they need.” ●



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— NORA KATURAKES, MSN, RN, OCN



Christiana Care’s monthly outreach at the farmers market has helped hundreds of people to take steps to improve their health.

*Photos clockwise from top:* Shoppers take advantage of free health information and screenings at a Father’s Day men’s health event; Screening and Survivorship Coordinator Renitia Pulliam, RN, reviews Raul Landa Ruiz’s screening results with him, as medical interpreter Juan Navarro translates; Healthy Families Program Manager Luisa Ortiz-Aponte and colleagues helped Beatriz Velasquez to get a free skin screening and mammogram; Paul Coulby, Lee Steward and Ray Jones like to people-watch at the farmers market, and now they also regularly get their blood pressure checked.

## U.S. News & World Report ranks Christiana Care among America's 'Best Hospitals'



Christiana Care Health System has been ranked one of the nation's best hospitals by U.S. News & World Report's annual Best Hospitals edition.

The publication ranks Christiana Care's Department of Obstetrics and Gynecology No. 24 in that specialty nationwide. The publication also ranks Christiana Care's Section of Endocrinology and Metabolic Diseases — under the Department of Medicine — as No. 33 nationwide.

U.S. News ranks Christiana Care No. 1 in Delaware. Among the 96 hospitals in the Philadelphia Region, U.S. News ranks Christiana Care No. 3, an improvement from No. 5 in 2013.

Christiana Care is one of just 144 hospitals — or 3 percent — of nearly 5,000 U.S. hospitals the publication evaluated this year for U.S. News' Best Hospital list.

"This honor recognizes our efforts to transform care and belongs to all Christiana Care employees and our physician partners," said Robert J. Laskowski, M.D.,MBA, Christiana Care president and CEO. "Such recognition fundamentally speaks to the value of The Christiana Care Way and our commitment to partner with our patients and their loved ones in their care."

U.S. News evaluates hospitals in 16 adult specialties. In most specialties, the publication ranks the nation's top 50 hospitals and recognizes other high-performing hospitals that provide care at nearly the level of their nationally ranked peers.

According to U.S. News, objective data — survival rates, patient safety, volume of procedures, nursing care and other information — stands behind the rankings in most specialties. The publication also uses a reputation score from a national physician survey. ●

U.S. News also rated Christiana Care as a high-performing hospital in 10 specialties:

Cancer

Cardiology & Heart Surgery

Ear, Nose & Throat

Gastroenterology & GI Surgery

Geriatrics

Nephrology

Neurology & Neurosurgery

Orthopaedics

Pulmonology

Urology

U.S. News ranks Christiana Care **No. 1** in Delaware and **No. 3** in the Philadelphia region.

### OUR NATIONAL RANKINGS:

The Department of  
Obstetrics & Gynecology  
**No. 24**

Endocrinology & Metabolic  
Diseases Section  
**No. 33**

## Making a great first impression in the ED

By Allison Steuber, MSN, RN III, CEN, ED Staff Nurse and Chair of the Professional Nurse Council and Karen Toulson, MSN, RN, MBA, CEN, NE-BC, Director of Clinical Operations in the ED and ED Observation



Allison Steuber



Karen Toulson

Every day, 150-290 patients come through the doors of the Emergency Department at Christiana Hospital.

Many patients are in pain. Some patients are frightened.

The ED is more than a place to receive expert urgent care. The ED also is an important gateway, the first impression many patients have of the health system. It is a tremendous opportunity for patients to experience The Christiana Care Way in action.

In the ED, we are embracing best practices and innovative strategies to build caring, respectful partnerships with patients in ways that patients value.

That, in turn, helps us to be better partners with our colleagues in the inpatient units. If we can set the bar high in the ED, it develops a foundation of trust for the patient throughout his or her care.

Each day, about 100 patients are admitted to Christiana Hospital through the ED. That represents 60 percent of the inpatient population. Our goal is for them to leave the ED with a positive impression of respectful partners who work together to provide them with high-quality care.

Conversely, if patients don't have a good experience in the ED, that impression can impact their relationships in the inpatient units. They might be less willing to trust the doctors and nurses who are caring for them in the hospital.

Our time with patients in a typical ED visit is limited, so we need to be especially mindful of opportunities to show respect and caring.

For patients who are treated and released, the entire process takes about five or six hours. For patients with bumps, bruises, toothaches, sore throats and similar problems, the time is even

less. We often can provide care and get them on their way in less than an hour. We want them to go home feeling great about the care they received.

Most people don't think an Emergency Department and a restaurant have anything in common. But they do. People choose a Christiana Care ED because they know the quality of care is excellent. They choose a restaurant because they know the food is great.

In both places, people want to know how long they will have to wait for service. They appreciate a warm smile from the person who is taking care of them. And if there is a problem they want someone to explain what happened and provide them with updates.

One way that we have helped to ensure that our patients get the open communication they expect is by adopting the No Pass Zone in the Emergency Department. As this initiative was rolled out to inpatient units at our hospitals, we worked together with our teams to create a comparable model for the ED.

In April, after a month of preparation, the No Pass Zone initiative was launched in the ED at Christiana Hospital. The first person to pass by answers a call bell, just as they do in inpatient units.

We had lots of help in developing ways to show patients caring and respect. The ED is very much a shared-decision-making unit. The staff at the bedside is concerned with how to make things better for patients and their loved ones. We are a team.

Six months ago, we rolled out a system to keep patients better informed about how much time they can expect to spend in the ED. Data on a screen tells patients the average door-to-doctor time in the past hour so they can gauge their wait.

Every day, the ED team works together to provide quality care that is both efficient and compassionate.

To determine how we are doing, we ask patients to evaluate us on four topics:

- The nurses' attention to your needs.
- Degree to which staff cared about you as a person.
- Overall rating of care during your visit.
- Likelihood of recommending our ED to others.

In the coming months, we will be looking at patient responses to learn what we are doing right and what we need to improve. Working together, our team can provide patients with expert, respectful care — and a great first impression. ●

## Christiana Care earns Joint Commission advanced certification in heart failure

The Joint Commission has recognized Christiana Care's Center for Heart & Vascular Health with Advanced Certification in Heart Failure.

Achievement of this certification signifies an organization's dedication to providing the highest quality care for patients with heart failure. It demonstrates that Christiana Care's services have met critical elements of performance to achieve long-term success in improving outcomes for patients diagnosed with and being treated for heart failure.

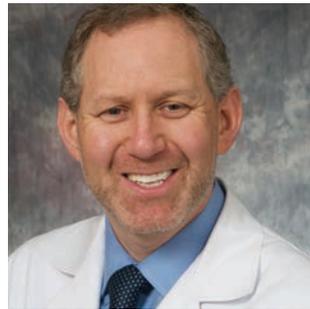
Christiana Care underwent a rigorous on-site review in April 2014. A Joint Commission expert evaluated all aspects of the Heart Failure Program and compliance with the requirements for The Joint Commission's Disease-Specific Care Certification program, as well as heart failure-specific requirements such as collecting Joint Commission core measure data and using it for performance-improvement activities.

"In achieving Joint Commission advanced certification, Christiana Care has demonstrated its commitment to the highest level of care for its patients with heart failure," said Jean Range, MS, RN, CPHQ, executive director, Disease-Specific Care Certification, The Joint Commission. "Certification is a voluntary process, and The Joint Commission commends Christiana Care for successfully undertaking this challenge to elevate its standard of care and instill confidence in the community it serves."

The Joint Commission's Advanced Certification in Heart Failure program, launched in 2011, targets methods of providing safe, successful transitions of care as the patient

moves from the inpatient setting to an outpatient setting. The requirements were developed in consultation with an external task force of experts and organizations with expertise in heart failure care, including representatives from the American Heart Association, Heart Failure Society of America and American Association of Heart Failure Nurses. These groups also provided feedback on how to evaluate heart failure programs that provide care in both inpatient and post-acute care settings.

"Christiana Care is thoroughly committed to providing our patients the highest quality heart failure care centered on current scientific research to ensure continued improvement in treatment," said Mitchell T. Saltzberg, M.D., FAHA, FACC, medical director of Christiana Care's Heart Failure Program. "In addition to our accreditation by The Joint Commission, Advanced Certification in Heart Failure gives us an opportunity to highlight the exceptional heart failure care we provide for our patients and helps us improve care overall for our community." ●



**"Christiana Care is thoroughly committed to providing our patients the highest quality heart failure care centered on current scientific research to ensure continued improvement in treatment."**

— MITCHELL T. SALTZBERG, M.D., FAHA, FACC



## Center for Advanced Joint Replacement earns Joint Commission Gold Seal of Approval

Christiana Care's Center for Advanced Joint Replacement has earned The Joint Commission's Gold Seal of Approval for its Hip and Knee Replacement Programs by demonstrating compliance with The Joint Commission's national standards for health care quality and safety in disease-specific care. The certification award recognizes Christiana Care's dedication to continuous compliance with The Joint Commission's high standards.

Christiana Care underwent a rigorous on-site review in order to receive the certification and Gold Seal of Approval.

A Joint Commission expert evaluated Christiana Care for compliance with standards of care specific to the needs of patients and families, including infection prevention and control, leadership and medication management.

"With Joint Commission certification, we are making a significant investment in quality on a day-to-day basis from the top down. Joint Commission accreditation provides us a framework to take our organization to the next level and helps create a culture of excellence," said Brian J. Galinat, M.D., MBA, chair of Christiana Care's Department of Orthopaedic Surgery. "Achieving Joint Commission certification for our hip and knee replacement programs, for our organization, is a major step toward maintaining excellence and continually improving the care we provide."

The Joint Commission's Disease-Specific Care Certification Program, launched in 2002, evaluates clinical programs across the continuum of care. Certification requirements address three core areas: compliance with consensus-based national standards; effective use of evidence-based clinical practice guidelines to manage and optimize care; and an organized approach to performance measurement and improvement activities.

"In achieving Joint Commission certification, Christiana Care has demonstrated its commitment to the highest level of care for its patients requiring joint replacement of the hip and knee," said Jean Range, MS, RN, CPHQ, executive director, Disease-Specific Care Certification, The Joint Commission. "Certification is a voluntary process, and I commend Christiana Care for successfully undertaking this challenge to elevate its standard of care and instill confidence in the community it serves." ●



**"With Joint Commission certification, we are making a significant investment in quality on a day-to-day basis from the top down. Joint Commission accreditation provides us a framework to take our organization to the next level and helps create a culture of excellence."**

— BRIAN J. GALINAT, M.D., MBA



## Christiana Hospital earns Comprehensive Stroke Center certification

Christiana Hospital has earned Comprehensive Stroke Center Certification from The Joint Commission and the American Heart Association/American Stroke Association, joining fewer than 80 hospitals nationwide who have earned this recognition. The designation affirms that Christiana Hospital offers the medical expertise and state-of-the-art infrastructure that is necessary to successfully treat the most complex stroke cases. The designation also recognizes that Christiana Hospital's stroke program helps patients beyond the walls of the hospital through coordination of follow-up care and community outreach on stroke prevention.



Jonathan Raser-Schramm, M.D., Ph.D.

"At Christiana Care, we partner with our patients to provide them with the most effective stroke care," said Jonathan Raser-Schramm, M.D., Ph.D., medical director of Christiana Care's Stroke Program. "The Comprehensive Stroke Certification recognizes that we're capable of treating patients in the first minutes and hours after stroke symptoms with a full range of emergency stroke treatments."

Christiana Hospital held Primary Stroke Center Certification until applying for the higher-level certification, which was developed only recently. It is one of only four hospitals in the Philadelphia region with the more advanced certification.

"This certification acknowledges that our patients are receiving care at one of the top stroke institutions in the country," said Melissa Bollinger, RN, BSN, MBA, administrative director for neurosciences. "Being certified at this level recognizes not just the medical expertise and technology we offer, but also that we do provide these services using a model that focuses on the patient's experience. Comprehensive programs recognize the importance of providing high-quality care that is individualized to the patient and their family."

Christiana Hospital's medical team comprises physicians with expertise in multiple areas of stroke and cerebrovascular disease, including stroke neurologists, neurosurgeons, neurocritical care specialists and interventional neuroradiologists, who perform advanced procedures and treatments. The comprehensive certification acknowledges that Christiana Hospital has that specialized expertise available 24/7.

Surveyors who visited the hospital were particularly impressed by the facilities in Christiana Hospital's 18-bed Lanny Edelsohn, M.D., Neuro Critical Care Unit, a patient care unit solely devoted to patients with immediate life-threatening problems affecting the brain, spinal cord or peripheral nerves. The unit provides patients their greatest chance of survival through the expert care that is critical to treating serious neurovascular illnesses and injuries.

The Joint Commission also looks at a hospital's focus on community health to prevent stroke and the follow-up care it provides.

Near the end of a patient's stay at Christiana Hospital, a multidisciplinary team that includes social workers, case managers and rehab specialists helps the patient set up for the next step in recovery based on individual needs.

"Sometimes, patients and families don't have resources to go to acute rehab, or they are very interested in taking their family member home with them," Dr. Raser-Schramm said. "We teach them about the day-to-day care that they will need to take that person home: They stay overnight, learn therapy exercises, and the basics of medications and other skills they'll need to help their loved one."

### Christiana Care ranks in the top 10 nationwide in the number of stroke cases it handles, treating more than 1,100 cases annually.

Related to follow-up care and stroke education, Raser-Schramm said the surveyors were impressed by Christiana Care's stroke-education book, "Stroke Treatment and Prevention: Managing Your Recovery," and will be sharing it with other institutions to provide to their patients because of its high quality.

"By achieving this advanced certification, Christiana Care has thoroughly demonstrated the greatest level of commitment to the care of its patients with a complex stroke condition," said Mark R. Chassin, M.D., FACP, MPP, MPH, president, The Joint Commission. "Certification is a voluntary process and The Joint Commission commends Christiana Care for successfully undertaking this challenge to elevate the standard of its care for the community it serves."

Christiana Care ranks in the top 10 nationwide in the number of stroke cases it handles, treating more than 1,100 cases annually.

## STROKE CENTER CERTIFICATION CONTINUED

Each year, almost 800,000 people nationwide experience new or recurrent strokes, which are the nation's fourth-leading cause of death and a major cause of disability. On average, someone suffers a stroke every 40 seconds and someone dies of a stroke every 4 minutes.

The Joint Commission developed Comprehensive Stroke Center Certification in collaboration with the American Heart Association/American Stroke Association, based on

recommendations for comprehensive stroke centers published by the Brain Attack Coalition and recommendations from a multidisciplinary advisory panel of experts in complex stroke care.

Christiana Hospital partners with Wilmington Hospital, which currently holds a Primary Stroke Center Certification, to provide resources and expertise to treat complex strokes. ●

## Fighting back after a stroke

**K**arlyn Grant is a fighter. In December 2012 she had a stroke that knocked out all mobility on her right side. Today she is still battling to regain her strength and independence. But with hard work and the help of physical and occupational therapists at Christiana Care Rehabilitation Services, she was able to take her first unaided steps in more than a year.

Grant woke up in the middle of the night on Dec. 4, 2012, unable to move her right arm or right leg. "I knew it was a stroke right away," she said.

An ambulance took her to Christiana Hospital, where she stayed for several days until moving to the rehabilitation floor at Wilmington Hospital. There she received speech therapy, occupational therapy and physical therapy.

"My therapists at Wilmington were lovely people," said Grant. "It was a tough time for me, and they were so kind. They started me on my way."

Her specialist, Kelly Heath, M.D., counseled her to be patient, that recovery from a stroke was no small task and it would require a tremendous effort. Grant was up to the challenge.

Since March, Grant's greatest ally has been Michele Brill, her physical therapist at Christiana Care Rehabilitation Services in Middletown. When Grant talks about her "girl," as she affectionately calls Brill, her voice turns as soft as butter. The two work together twice a week on balance, strength, coordination and confidence.

"When I started, I didn't think I could do much," Grant said. "Michele encouraged me and walked me through the exercises. Then, when I tried, I discovered I could do more than I realized." Whether it's laps around the Rehabilitation Services office, riding the NuStep or working on the parallel bars, Brill's presence is a constant — reaffirming her every effort.

With Brill's help and Grant's hard work, a year of ups and downs is culminating in a success story. "Michele and I have done so much together," Grant said. "There is a lot more work to be done, but I'm feeling better about my recovery. Slow and steady wins the race." ●



"My therapists at Wilmington were lovely people. It was a tough time for me, and they were so kind. They started me on my way."

Karlyn Grant is battling back to recover her mobility after a stroke.

## Genetics testing provides new ways to protect people from heart disease



A family history of heart disease and death during middle age led Gerry Snavely and her family to seek help and treatment through the Familial Cardiovascular Risk Assessment program at Christiana Care. She attests to the power of knowing your risk so that you can take steps to protect yourself from heart disease.

**F**amily members are close to our hearts, sharing bonds of love, loyalty — and sometimes genetic risk for heart disease.

Up to 15 percent of heart disease is hereditary, meaning that a risk for heart conditions is passed from one generation to the next. For example, cardiomyopathy, or an enlarged heart, might have a genetic component. Several inherited arrhythmia disorders that cause sudden cardiac arrest have a genetic link.

The Familial Cardiovascular Risk Assessment program at Christiana Care's Center for Heart & Vascular Health offers a comprehensive cardiovascular risk assessment that focuses on family history and genetics, along with personal and environmental factors such as diet, exercise, smoking and stress.

"If there is a history of heart disease in the family, we determine if there is a pattern to that disease," said Zohra Ali-Kahn Catts, MS, LCGC, director, Cancer Genetic Counseling at the Helen F. Graham Cancer Center & Research Institute. "We go back at least three generations, including brothers and sisters, cousins, aunts and uncles, grandparents

and, if available, great aunts and uncles. We look for family history of sudden cardiac death, including people who weren't diagnosed with cardiac arrest. For example, did someone who was a good swimmer drown unexpectedly?"

Gerry Snavely's father died of a heart attack when he was 44. Her maternal grandmother died of heart disease at 36. So when she was planning a knee replacement at 62 she had a cardiac catheterization to determine if she had heart problems.

"As it turns out, I needed a quadruple bypass," she recalled.

Edward Goldenberg, M.D., FACC, director, Preventive Cardiology, recommended that her four children be tested. Three required bypass surgery before they were 40. The fourth child declined testing.

"It's better to know if there is a problem in the family so you can take action," she said. "We are cooking with less fat. My grandchildren are growing up eating steamed vegetables."

Genetic tests for various cancers have been available for years. Tests for heart disease are relatively new. They also are complex.



Edward Goldenberg, M.D., FACC, director, Preventive Cardiology, recommended that Gerry's four children be tested. Three required bypass surgery before they were 40.

"We may be looking at six genes to 79 genes, depending on what cardiac syndrome we are looking at," Ali-Khan Catts said.

This year, Christiana Care became the first health system in Delaware to offer LDL apheresis, a treatment for familial hypercholesterolemia (FH), a rare genetic disorder characterized by high levels of low-density lipoproteins (LDL), commonly known as bad cholesterol. If not treated, 50 percent of people with FH develop cardiovascular disease by age 55. Many suffer a stroke or heart attack at an even younger age.

Apheresis is a procedure much like dialysis, in which the patient's blood is removed from the body, separated so that the LDL can be removed, and then returned.

Christiana Care also is the only center in Delaware certified for Kynamro and Juxtapid, two new drugs that lower LDL levels in patients with FH.

"These drugs mean that patients won't have to have apheresis as often, perhaps once a month instead of once every two weeks," said Dr. Goldenberg, who has a special interest in lipid management.

Kynamro and Juxtapid also may be used in conjunction with statins to manage hyperlipidemia without apheresis, Dr. Goldenberg said.

About 20 percent of people with thoracic aortic aneurysm and dissection have a genetic predisposition to the condition in which the main blood vessel that carries blood away from the heart is enlarged. Patients who learn they are at risk can be closely monitored to prevent a life-threatening aortic rupture.

People with a genetic predisposition to cerebral aneurysms can be screened with a CT scan.

"One of the benefits of knowing our genetic risk is the ability to medically manage a condition," Ali-Khan Catts said. "It also provides an opportunity for preventive care."

To learn more about the Familial Cardiovascular Risk Program, call 302-623-4630. ●



**"One of the benefits of knowing our genetic risk is the ability to medically manage a condition. It also provides an opportunity for preventive care."**

— ZOHRA ALI-KAHN CATTs, MS, LCGC

## Healing Garden dedicated at Wilmington Hospital

The Healing Garden is in bloom at Wilmington Hospital, a tranquil oasis in the heart of the city for patients, their loved ones and health care providers.

Dedicated on June 24, the garden is the gift of the Junior Board, which donated \$1 million to design and develop the space, sited in a large, open courtyard formed by the hospital's four interconnected buildings.

"The Junior Board has a rich history, dating back to 1888 to build Wilmington's first hospital," said Robert J. Laskowski, M.D., MBA, president and CEO of Christiana Care Health System, thanking the board for the gift and its legacy of service.

*"This is a very special hospital. We knew we wanted to be part of this important initiative."*

— DIANE THOMAS



*"It was exciting to think that we could provide a garden that is relaxing and also can be utilized to help patients."*

— BARBARA BURD

Dr. Laskowski said the garden is a symbol of a larger transformation. Wilmington Hospital is blossoming, too, through a \$210 million transformation that includes a new Emergency Department, 120 private patient rooms, a new surgical suite with 13 operating rooms and four procedure rooms, and a state-of-the-art medical office building.

"This is a very special hospital," said Diane Thomas, Junior Board immediate past president. "We knew we wanted to be part of this important initiative."

Edmondo J. Robinson, M.D., MBA, physician-in-chief at Wilmington Hospital, said board members are valued partners in promoting the health system. Volunteers in pink jackets log thousands of hours each year.

"I can always count on a friendly, smiling face when I walk into the hospital," he said. "This Healing Garden is an example of that community support."

Barbara Burd was Junior Board president in 2008 when the group committed to funding the garden. The project evolved through her presidency, followed by Ann Kappel and then Thomas.

"We had never made a contribution that large, and it was exciting to think that we could provide a garden that is relaxing and also can be utilized to help patients," Burd said.



*"I can always count on a friendly, smiling face when I walk into the hospital. This Healing Garden is an example of that community support."*

— EDMONDO J. ROBINSON, M.D., MBA



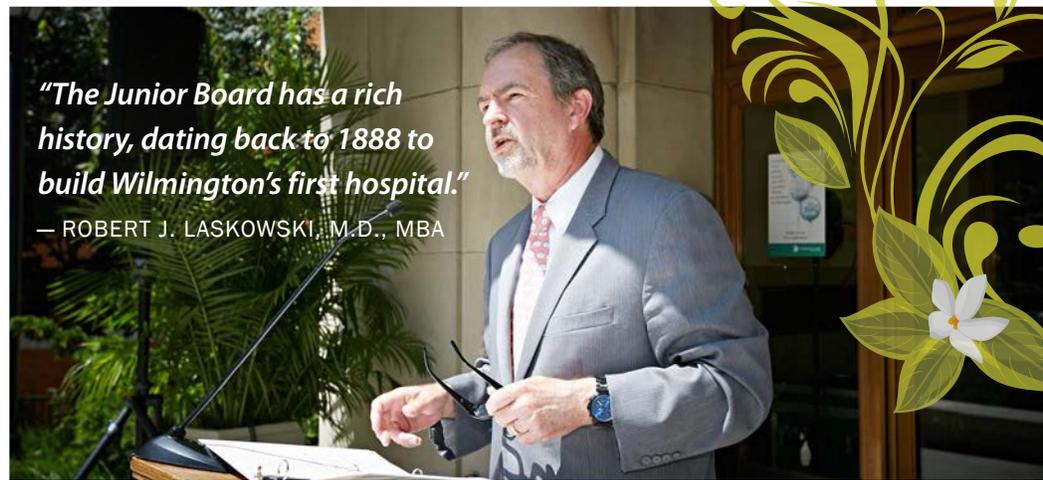
Patients at the Center for Rehabilitation focus on regaining skills lost to brain injury on various walkways in the garden that represent surfaces they will have to navigate after they leave the hospital. The pathway curves and slopes, and includes expanses of cobblestones, brick, slate, concrete and cement embedded with pebbles.

"You go to church and there are the stone steps, very much like the ones in the garden," said Sharon Kurfuerst, vice president, Rehabilitation and Orthopaedic Services. "You go to Walmart and there is a parking lot you have to go through to get to the store."

Patients also build their cognitive skills, planning how they will get from the Center for Rehabilitation on the sixth floor to the garden at ground level.

***"The Junior Board has a rich history, dating back to 1888 to build Wilmington's first hospital."***

— ROBERT J. LASKOWSKI, M.D., MBA



"It requires checking the weather and then deciding how you will dress to go outdoors," Kurfuerst said. "You have to think about the route you will take to get back to the sixth floor."

The garden encompasses a pond and fountain, plantings of azaleas, rhododendrons and other shrubs, and peaceful seating areas outfitted with benches.

Anne Hume, 91, is a longtime member of the Junior Board. While she was being cared for at the Center for Rehabilitation for a broken leg, she worked with her recreational therapist, Monica Foy, learning to navigate the garden in her wheelchair.

"Being outdoors is something that is part of my life," she said. "I come to this beautiful garden every day and I feel restored." ●

## Medical school club inspires students with hands-on health care experiences



Vinay Maheshwari, M.D., director of medical critical care at Christiana Care, uses a robotic mannequin in Christiana Care's Virtual Education and Simulation Training Center to teach students of Prestige Academy Charter School about how to assess a patient's vital signs.

Students at Prestige Academy Charter School in Wilmington toured Christiana Hospital in May as part of their involvement in the Prestige Medical School Club.

Vinay Maheshwari, M.D., director of medical critical care at Christiana Care, started the extracurricular club as a way to educate students at Prestige Academy, which is a college preparatory charter school for middle school-aged boys in inner-city Wilmington.

Each month, Dr. Maheshwari met with about 15 students at the school to discuss medical topics.

"For me, the inspiration to create this program was my hope that I could spark some interest in a young man to pursue further education and possibly a career in science and health care," Dr. Maheshwari said. "Providing inspiration to our young men is one way we will improve our community as a whole. The program also has greatly benefited me in my work as a doctor, since the students ask some very insightful questions. Those questions have compelled me to speak in a

way that they understand and subsequently have enabled me to explain health-related issues more clearly to the patients I care for each day at Christiana Care."

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**"Providing inspiration to our young men is one way we will improve our community as a whole. The program also has greatly benefited me in my work as a doctor, since the students ask some very insightful questions."**

— VINAY MAHESHWARI, M.D.

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Prestige 5th grade teacher Bethlehem Yirga said the club has helped students realize there are a wide variety of health care careers that students can explore and pursue outside of the widely-known occupations of physician and nurse.

“Dr. Maheshwari has helped the students expand their horizons,” Yirga said. “He’s also created a great forum for health care concerns they have, whether it is a relative of theirs who has diabetes or a sports injury that they have sustained. Through the club, Dr. Maheshwari helped alleviate their personal stresses and concerns involving health, and his down-to-earth and hands-on approach has helped them to grasp an understanding of the complex topic of health care.”

The field trip to Christiana Hospital included a tour of the Emergency Department, helipad, heart-failure unit and the Virtual Education and Simulation Training Center. At the simulation center, the students learned how to glove and gown before entering an operating room and performed vital tests on robotic mannequins. A news crew from 6ABC was on hand to capture the tour.

“I liked that I learned how to shock a patient’s heart to start it and how to do CPR,” said Neki Gibbs, an 8th grader at Prestige. “I liked that this club is fun and educational.” ●



Students of Prestige Academy Charter School’s Medical School Club learn the proper way to disinfect their hands at the Christiana Care Virtual Education and Simulation Training Center.



Beth Fitzgerald, MSN, RN, CNOR, perioperative simulation specialist, teaches students how to “gown and glove” during a Prestige Academy Charter School tour of Christiana Hospital.

## The Junior Board of Christiana Care announces Board of Directors for 2014-2015

The Board now includes:

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**Ex Officio**

Diane Thomas

### New Junior Board president Nancy Rich brings wide range of experience to her new post

**N**ew Junior Board of Christiana Care Inc. President Nancy Rich began a two-year term July 1.

Rich takes over as president after serving a two-year term as second vice president, Hospital Services. She joined the Junior Board in 2009.

Rich was chair of the Junior Board's Information Desk Committee at Christiana Hospital from 2011 to 2012, and she regularly volunteers at the information desk and surgical waiting lounge.

She retired in 2008 and has a professional background as a teacher, technical writer and travel consultant.

Rich has held positions on the Newark Senior Center and Friends of Newark Symphony boards and has taught English as a second language. ●



## 2014 Medicine Ball supports Swank Memory Care Center

Proceeds from the Junior Board's 2014 Medicine Ball will benefit Christiana Care's Swank Memory Care Center, Delaware's first and only comprehensive outpatient program to support patients and their families dealing with memory disorders, including Alzheimer's disease. This year the Swank Memory Care Center team raised \$71,859.87 to support more than 1,500 patient and caregiver visits. The Medicine Ball supports Swank's commitment to grow caregiver programs through respite care and social services, in addition to enhanced educational support.

Each year, Junior Board Medicine Ball funds provide significant financial support for Christiana Care needs, including services and programs, equipment, and nursing and allied health scholarships. ●



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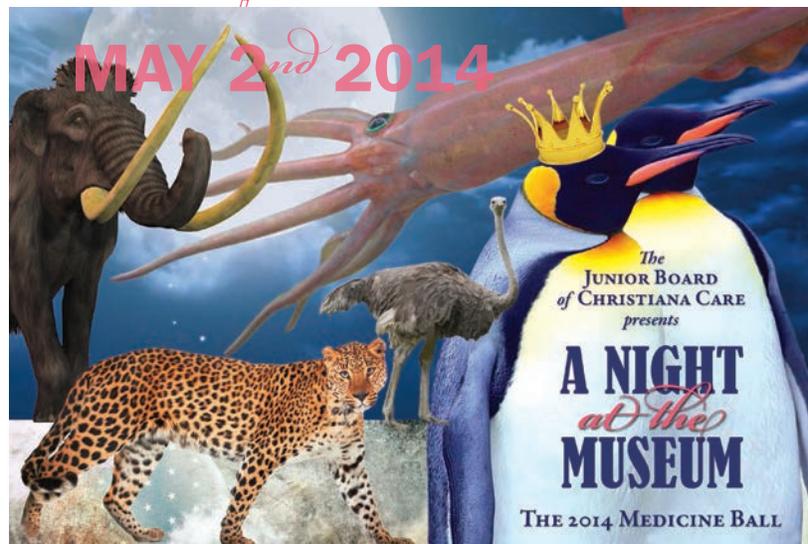
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## Volunteers find joy and inspiration as they lend a helping hand

Since Enoch Lee first began as a summer high-school volunteer at Christiana Care Health System, he has found many opportunities to learn and gain insights about his own life. During the past five years at Delaware's largest hospital, the University of Delaware senior has helped families by escorting patients to their cars, playing a violin in the hospital lobby and working on meal preparation in nutrition services.

Lee has known for a long time that he wants to be a doctor. His volunteering at Christiana Care has affirmed his career path, but, more importantly, he says, the experience has enriched his life.

An unforgettable experience occurred recently when a young woman diagnosed with liver cancer decided to marry her fiancé in her hospital room. "She wanted to get married before anything bad happened, and I got a call four days before the wedding asking if I would help with the music," he said.

perseverance. And who would have thought this would happen all because I volunteered?"

Summer is a season when volunteering peaks at Christiana Care, as high-school and college students join the ranks of more experienced volunteers. This summer, 210 high-school students and 112 college students are lending a hand, alongside the more than 600 adult volunteers who serve year-round.



From left: Volunteer Alan Balu, Volunteer Ashley Cooke and Mary Julian of the Junior Board, and Volunteer Spencer McDowell with volunteer Lisa Robinson.

One highlight of his volunteering was cutting up ham and eggs for an elderly blind woman who came into the hospital depressed and withdrawn.

"As I fed her and we talked, I learned about vulnerability and meeting another person right where they are," Lee said. "I tell younger kids who volunteer to keep their eyes and ears open, because you never know what's going to touch you. The world needs more people to empathize with others."

As the ceremony began, and friends and relatives gathered around the bride's hospital bed, he played background music on the guitar.

"It was so emotional — with an intense feeling of love and community," he said.

After the exchange of vows, he played John Legend's "All of Me," singing the lyrics with the bride's cousin. "I consider that the biggest performance of my life, and I was so grateful that I was asked to be a part of things," he said. "I learned a lot that day about family and love and

Many students are like Ashley Cook of New Castle, a junior at Padua Academy, and Saba Ali of Newark, a junior at the University of Maryland. Both are looking forward to careers in medicine and are volunteering at the advice of friends and relatives, who thought the experience would offer valuable insight into medicine as a profession.

"When I began, I wasn't sure if I wanted to emphasize medical research," said Ali. "One thing I've learned is that I like patient care, and I'd like to focus on that in my education."

There are more ways than ever to make a difference in the lives of patients and families at Christiana Care. Volunteers cuddle new babies in maternity. They provide support for patients at mealtime through the SPOONS Program. They record non-medical patient histories to share with patients and staff through the Life History Program, serve as greeters in the lobby to welcome and escort guests to their destinations, and act as Patient Relations Ambassadors to ensure every newly admitted patient is visited within 48 hours.

Christiana Care is fortunate to have so many people in the community who want to contribute.

"The impact on patients is seen throughout the hospital," said Rose Wessells, manager of Volunteer Services. She has observed that many volunteers are looking for ways to give back to others out of gratitude for what they have received. They want to be engaged in service that is meaningful and provides comfort to others at a time of stress.

As a volunteer for more than 14 years, Christy regularly experiences what bioethicist Stephen G. Post, author of "It's Good to be Good," has called a "helper's high." "It feels great," said Christy. "I wish everybody knew about it."

Fran Tebbutt of Wilmington says that volunteering has a way of putting things in perspective and reminding people of how fortunate they are. In her case, if something is upsetting at home, it melts away on Wednesdays and Fridays when she staffs the hospitality cart. In this role, she takes the cart into waiting rooms where she offers beverages to family members.



Above: Volunteer Saba Ali of Newark, Del., a junior at the University of Maryland, welcomes a new mother and baby at Christiana Hospital. Because of her experiences as a hospital volunteer, Ali has shifted her focus from research to patient care as she pursues her medical education. Above right: Volunteer Dennis Christy works with students at First State School.

"For me, the volunteer program is really an extension of The Christiana Care Way," said Margarita Rodriguez-Duffy, MSW, CAVS, director of Visitor & Volunteer Services. "As we serve our neighbors as respectful, expert, caring partners in health, our neighbors appreciate these efforts and give back to others, extending our mission in the community. From our youngest Volunteers to the most seasoned volunteers, they understand what we're about and happily partner with us. Great ideas for helping patients and families surface as a result of this partnership."

That's certainly true of Dennis Christy of Warwick, Md., a retired General Motors auto worker who makes the 66-mile round trip from his home to Wilmington Hospital each week so he can assist teachers at the First State School. The school offers education to children with serious, chronic illnesses that make it difficult to attend a regular public school.

"It's very rewarding — but this is not a monetary reward," Christy said. "There's an overwhelming spiritual blessing that comes from volunteering."

Tebbutt remembers one man in the Emergency Department calling her "his angel." It was a husband who had brought his wife in during a snowstorm in the middle of the night. He'd been sitting there wishing he could have a cup of coffee when Tebbutt appeared, offering one.

"You meet a lot of nice people under difficult circumstances, and sometimes you can offer a bit of comfort," Tebbutt said. ●

To learn more about opportunities to volunteer at Christiana Care Health System, visit online at <http://www.christianacare.org/volunteer>.

## Mark Garcia, M.D., leads national deep vein thrombosis study

**M**ark J. Garcia, M.D., FSIR, medical director of the Center for Comprehensive Venous Health at Christiana Care, is lead investigator of a nationwide research study evaluating the use of guided ultrasound and medication for patients suffering from post-thrombotic syndrome, the most common complication that can result from chronic deep vein thrombosis. The project, called the ACCESS PTS (ACCelerated ThrombolySiS for Post-Thrombotic Syndrome) study, is designed to evaluate the safety and efficacy of treatment consisting of ultrasound using the EKOS Corporation's EkoSonic® Endovascular System along with a clot-busting drug called recombinant tissue plasminogen activator or r-tPA or Alteplase (Genentech).

Christiana Care's Center for Heart & Vascular Health is one of approximately 30 participating study sites from across the United States.

The study aims to enroll up to 200 patients over a period of 12 months. Patients receive follow-up care for 12 months.

"We are always looking for innovative treatments that can lead to better outcomes and improve the quality of lives of our patients," said Dr. Garcia. "This is truly a landmark trial that may not only alter the way physicians treat patients with chronic deep vein thrombosis, but also give hope to all those suffering from post-thrombotic syndrome while significantly improving their quality of life."

Post-thrombotic syndrome is the most common complication following deep vein thrombosis. Deep vein thrombosis is the formation of a blood clot, known as a thrombus, in the deep leg vein, affecting 600,000 people annually in the United States.

Post-thrombotic syndrome causes damage to the veins from the blood clot. The damage reduces blood flow out of the affected areas that can lead to abnormal pooling of blood in the leg, which can cause leg swelling, chronic leg pain, fatigue, skin discoloration and even venous ulcers. Symptoms may not occur until a few years after the deep vein thrombosis.

Currently, treatment options are limited to medication, such as blood thinners, aspirin or diuretics, as well as the use of elastic compression stockings. Even with the use of blood thinners and compression stockings, a significant number of patients with deep vein thrombosis suffer from the syndrome, which can significantly impact quality of life.

The study aims to determine the effectiveness of using catheter-guided ultrasound energy and clot-busting medication with the EkoSonic Endovascular System to treat the affected area, restore blood flow in the previously blocked vein and reduce the degree of post-thrombotic symptoms. Researchers will evaluate the clinical effectiveness of the treatment using the Villalta score (measurement of the severity of post-thrombotic syndrome) at baseline compared to 30 days following treatment as well as increments out to one year. Success will be defined by 50 percent or more of the subjects achieving at least a four-point reduction in the Villalta score, which represents a significant improvement in the symptoms of post-thrombotic syndrome.

"We hope this study will demonstrate that new and innovative technologies like the EkoSonic Endovascular System can effectively treat these patients in cases where traditional exercise, anticoagulation drugs and compression stockings have been deemed inadequate," said Matt Stupfel, general manager at EKOS Corporation. Patients eligible to participate must be between 18 and 75 years of age with lower extremity deep vein thrombosis who have:

- Been diagnosed as having persistent deep vein thrombosis for at least six months.
- Have a Villalta score  $\geq 8$ .
- Failed three months of conservative treatment including compression stockings and blood thinning drugs.

Patients who would like an evaluation for possible participation in the study should call Christiana Care's Cardiovascular Clinical Trials Program at 302-733-2658. ●



**"This is truly a landmark trial that may not only alter the way physicians treat patients with chronic deep vein thrombosis, but also give hope to all those suffering from post-thrombotic syndrome while significantly improving their quality of life."**

— MARK J. GARCIA, M.D., FSIR

## Study measures cost effectiveness of cancer screening reminders

To encourage patients to get colorectal cancer screenings, the cost of reminder mailings may be less expensive, but the personal touch of a reminder from a nurse navigator is more effective, according to research at Christiana Care Health System. Colorectal cancer screenings save lives, and finding the disease at an early stage



**“It’s not surprising that the standard intervention increased the rate of patients receiving screenings, and that the warm touch of a nurse navigator increased those rates even more.”**

— HEATHER BITTNER FAGAN, M.D., MPH, FAAFP

means that treatment can lead to a cure. Yet, many people do not receive regular screenings such as a colonoscopy, typically performed every 10 years starting at age 50.

Christiana Care’s Heather Bittner Fagan, M.D., MPH, FAAFP, and Nora C. Katurakes, MSN, RN, OCN, are focused on ensuring that more patients receive screenings. Their research paper studying the cost effectiveness of interventions to encourage colorectal cancer screenings — a follow-up to an earlier study evaluating the impact of the interventions — was published in the April 2014 edition of the medical journal *Cancer*.

The research measured the cost of a standard intervention that involved reminder mailings to patients and a tailored navigation intervention, which combined mailings with personal follow-up calls by nurse navigators. The standard intervention cost \$167 per patient, and the tailored navigation intervention cost \$289 per patient. The tailored navigation intervention was significantly more effective in prompting patients to undergo colorectal cancer screenings.

“It’s not surprising that the standard intervention increased the rate of patients receiving screenings, and that the warm touch of a nurse navigator increased those rates even more,” said Dr. Fagan, associate vice chair of research in Family & Community Medicine and a scholar at Christiana Care’s Value Institute. “There are no

simple yes or no answers to the cost-effectiveness of an intervention. Once it is determined that an intervention has benefit, the question becomes: How valuable is that benefit to the health care system, to the doctors and most importantly to the patients?”

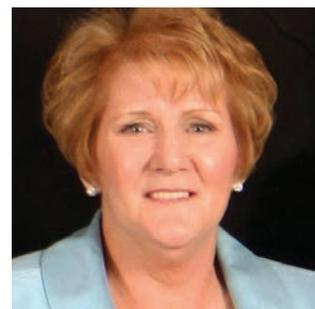
She said that once the initial planning, personnel hiring and training are complete, the cost will decrease. Also, an intervention such as the tailored navigation intervention could be adapted to address other patient care needs. In addition, she said, nurse navigators in primary care settings may provide additional, less quantifiable benefits to patients.

“For instance, the patient may come away with greater confidence and ability to make health decisions and take actions to improve their health,” said Dr. Fagan. “Certain populations may need more intense interventions, and part of the next step is discovering who those groups are.”

Also, new or complicated testing may require an extra layer of support from a nurse navigator. “In lung cancer screening, which is newly recommended, the

process of getting patients tested and helping them deal with the results is complicated and somewhat uncharted territory for patients and their doctors,” she said.

As a primary care physician, Dr. Fagan regularly calls upon nurse navigators at Christiana Care’s Helen F. Graham Cancer Center & Research Institute to intervene when she has patients who are not following through with necessary screenings. The Graham Cancer Center is one of the most advanced in the U.S. and among a select group invited to participate in the National Cancer Institute Community Cancer Centers Program, helping to shape cancer care delivery, offering outstanding community outreach, and advocating for prevention and treatment in our region.



**“Ensuring that patients receive the proper screenings is critical to preventive care.”**

— NORA C. KATURAKES, MSN, RN, OCN

“At Christiana Care, we’ve been focusing on nurse navigation for several years, beginning in oncology,” said Katurakes, who serves as manager of Community Health Outreach and Education at the Graham Cancer Center. “More recently, our focus has shifted to population health — helping patients to stay healthy by navigating the health care system when they are well rather than sick. Ensuring that patients receive the proper screenings is critical to preventive care.” ●



## Symposium spotlights Value Institute innovation, success

At Christiana Care's spring 2014 Value Institute Symposium: Jennifer Goldsack, MChem, MA (Oxon), MS, Value Institute research associate; William S. Weintraub, M.D., MACC, FAHA, FESC, John H. Ammon, Chair of Cardiology and director of the Center for Outcomes Research; Seema S. Sonnad, Ph.D., director of Health Services Research for the Value Institute; John S. Emberger, BS, RRT-ACCS, FAARC, Value Institute scholar and critical care coordinator of Respiratory Care; Susan Mascioli, MS, BSN, RN, CPHQ, NEA-BC, director of nursing quality and safety; Eric V. Jackson Jr., M.D., MBA, director of the Center for Health Care Delivery Science and associate director of the Value Institute; Robert J. Laskowski, M.D., MBA, president and CEO of Christiana Care Health System; Sharon Anderson, MS, BSN, RN, FACHE, senior vice president, Quality, Patient Safety and Population Health Management, and director, Center for Quality and Safety, Christiana Care Value Institute; Marci L. Drees, M.D., MS, FACP, DTMH, infection prevention officer and hospital epidemiologist; Vernon Alders, MBA, MSW, MHCDS, director of the Center for Organizational Excellence; Timothy J. Gardner, M.D., executive director of the Value Institute and medical director of the Center for Heart and Vascular Health.

The word "value" is bandied about a lot in discussions of health care these days.

But what is value in health care, really? And, if you find answers to that fundamental question, how do you deliver on what you've learned even as you continue to drive innovative improvement?

At Christiana Care Health System, President and CEO Robert J. Laskowski, M.D., MBA, established the Value Institute in 2011 to explore these questions.

"We have a very specific and more nuanced approach to value," said Dr. Laskowski. "It is listening to the people that we're privileged to serve and asking them 'what's good for you?' and then bringing our caring, our compassion and our expertise to fuse the science and the humanity, which is the very core of medicine, to help people live the lives that they want."

The Value Institute's mission is to develop, deliver and evaluate innovative solutions that improve the care of sick patients and enhance the health of our community at an affordable and sustainable cost.

The Value Institute Spring Symposium "Bridging the Gap: Connecting Data to Decisions," May 22, was an update on the first three years of progress toward fulfilling that mission.

Presentations from clinical innovators at Christiana Care included:

- A program to reduce patient falls.
- An initiative to reduce contact isolation for patients at risk of methicillin-resistant *Staphylococcus aureus* (MRSA).
- How the electronic health record might create more cost-effective and flexible staffing models.
- Efforts to improve care of patients on ventilators.

Preventing falls and improving ventilator care are excellent examples of how the Value Institute is supporting efforts to deliver better value in care at Christiana Care and beyond, said Timothy J. Gardner, M.D., executive director of the Value Institute and medical director of the Center for Heart & Vascular Health.

“We are focused on creating safe and effective health care programs through pragmatic, innovative research,” Dr. Gardner said. “For example, despite years of effort at hospitals across the nation to reduce the number of patient falls and the resulting injuries, the problem persists.”

A multidisciplinary team of nurses, researchers from the Value Institute and experts from its Center for Organizational Excellence led a data-driven initiative to reduce falls in the hospital that included patients and their families in the process. In her presentation “A Deep Dive into Reducing Patient Falls,” Susan Mascioli, MS, BSN, RN, CPHQ, NEA-BC, director of nursing quality and safety, explained that patients — even patients who should know they are at risk of falling while in the hospital — often do not perceive themselves to be at risk. That sense of personal invulnerability was itself a significant risk factor.

The falls prevention initiative focused on engaging patients and involved mobility assessments, increased caregiver accountability, more frequent patient-centered hourly rounds and verbal communication of fall risk at every hand-off of care. The effort resulted in a significant reduction of preventable falls to below national benchmarks.

Similarly, ventilator-related problems have been a persistent quality issue in hospitals across the country, driven at least in part by the challenge of timing extubation correctly. It is unsafe for a patient who needs to be on a ventilator to be removed prematurely, yet it is also unsafe for a patient who no longer needs ventilator assistance to remain on one.

“Unfortunately, even when the patient was ready, we might wait hours until the staff was ready,” said John S. Emberger, BS, RRT-ACCS, FAARC, a Value Institute

scholar and critical care coordinator of Respiratory Care. To address that delicate balance, Emberger said his team established a rapid process improvement project to implement around-the-clock surveillance for ventilator patients ready for extubation.

Before the project, most patients on ventilators at Christiana Care were extubated during the day shift. The project increased the proportion of patients extubated during other shifts to between 40 and 60 percent. As a result “we reduced the number of days patients spent on a ventilator and in the intensive care unit,” Emberger explained. And through the use of ongoing feedback and dashboards, the project team is working to maintain those gains.

Other presenters, demonstrating the scope of Value Institute supported projects, included:

- Edmondo J. Robinson, M.D., MBA, FACP, physician-in-chief, Christiana Care — Wilmington, associate chief medical officer and a Value Institute scholar.
- Marci L. Drees, M.D., MS, FACP, DTMH, infection prevention officer and hospital epidemiologist.
- Jennifer Goldsack, MChem, MA (Oxon), MS, Value Institute research associate.

Seema S. Sonnad, Ph.D., director of Health Services Research for the Value Institute, explained that these examples of innovative quality improvements highlight how collaboration among researchers and frontline staff is critically important to drive innovation.

“When you’re trying to do research to improve how we treat patients, it’s important that the research happens collaboratively with those who understand the care processes the best.

CONTINUED P. 24



**TIMOTHY J. GARDNER, M.D.**

*“We are focused on creating safe and effective health care programs through pragmatic, innovative research.”*

CONTINUED



**EDMONDO J. ROBINSON, M.D., MBA, FACP**

**“Value is service and care that make a measurable difference in people’s lives in ways they appreciate and society can afford.”**

— ROBERT J. LASKOWSKI, M.D., MBA



**SHARON ANDERSON, MS, BSN, RN, FACHE**

That real-world settings for research use rigorous academic standards to develop and disseminate real solutions is important for external audiences,” Dr. Sonnad said.

Updates on the work of the four centers of the Value Institute were provided by Vernon Alders, MBA, MSW, MHCDS, director of the Center for Organizational Excellence; William S. Weintraub, M.D., MACC, FAHA, FESC, John H. Ammon Chair of Cardiology and director of the Center for Outcomes Research; Sharon Anderson, MS, BSN, RN, FACHE, senior vice president, Quality, Patient Safety and Population Health Management, and director of the Center for Quality and Patient Safety; and Eric V. Jackson, Jr., M.D., MBA, director of the Center for Health Care Delivery Science and associate director of the Value Institute.

For Dr. Jackson, the overriding principles of an equation that yields value in health care are population health, patient-centeredness and affordable high-quality care.

It’s estimated that more than 200,000 preventable deaths occur each year in the U.S. health care system. That’s greater than a 747 crashing every day of the year, Dr. Jackson said. The problem requires a systems solution.

“We need to look at how we are delivering and coordinating care,” he said. Data drives decision making based on evidence and best practices, with the patient at the center, to produce policies and protocols to deliver high-reliability medicine. “The goal is to make sure each care policy represents best evidence and is informed by science. Data drives everything — recognizing that data doesn’t tell the whole story, but the data positions us to be closer to the source of the truth.”

Dr. Laskowski explained that at Christiana Care, value is the core principle.

“Value is our strategy. It is the fundamental strategy we have for service. Value is service and care that make a measurable difference in people’s lives in ways they appreciate and society can afford.” ●



Christiana Care's Middletown Emergency Department is the first LEED Certified health care building in Delaware.



## Middletown Emergency Department achieves LEED Certification

**C**hristiana Care's Middletown Emergency Department has been awarded LEED certification by the U.S. Green Building Council. The Green Building Council gave LEED certification to the facility under the council's new-construction rating system.

The Middletown Emergency Department, which opened in April 2013, has several environmentally friendly features, including an energy recovery unit on the building's air-conditioning equipment and LED lighting illuminating some interior and exterior spaces, including in the parking lot. The Middletown Emergency Department is the only health care facility in Delaware to receive this certification.

LEED is a third-party certification program and the nationally accepted benchmark for the design, construction and operation of high-performance "green buildings," which are structures

that are designed, constructed and operated through environmentally responsible and resource-efficient processes.

"LEED is the world's premiere certification program, and this recognition demonstrates Christiana Care's commitment to be a responsible neighbor in our community and to reduce our overall environmental footprint," said Bob Mulrooney, vice president of facilities and services for Christiana Care.

Efforts to curb resource consumption can pose complicated challenges for health care facilities, many of which generate an inordinate amount of heat from medical equipment that needs to be offset by cooling systems. In addition, patient rooms may require specific airflow rates to prevent the spread of infectious diseases, which require more energy to condition the space.

The Middletown Emergency Department, unlike an office building, also needs to be open 24 hours a day, which makes conservation of resources all the more crucial.

"The LEED certification is a tribute to our comprehensive commitment to our neighbors in the Middletown area," said Heather Farley, M.D., FACEP, medical director of the Middletown Emergency Department and assistant chair of Christiana Care's Department of Emergency Medicine. "We strive to provide expert clinical care when our neighbors seek help, and we strive to ensure that we are responsible stewards of the environment in which they live." ●

## Imagine Delaware forum highlights community need to tackle heroin addiction



**JANICE NEVIN, M.D., MPH**

*“At Christiana Care, we exist to improve the health and quality of life of our neighbors in our community ... Each month, 12 to 14 heroin deaths occur in Delaware. We must solve it together as a community.”*

The panelists at the Imagine Delaware forum were (left to right) Michael Marcus, M.D., interim psychiatry chair at Christiana Care; Stephanie King, a 24-year-old recovering heroin addict from Pike Creek; Don Keister, co-founder of atTack Addiction; James Harrison, operations director at Brandywine Counseling and a recovering heroin addict; Delaware Health and Social Services Secretary Rita Landgraf; New Castle County Police Chief Col. Elmer M. Setting; Michael DellaCorte, special agent in charge of the Drug Enforcement Agency for Delaware and Pennsylvania.

Inside a John Dickinson High school’s jam-packed auditorium, Christiana Care leaders highlighted the value of community partnerships in solving the heroin crisis in Delaware.

“At Christiana Care, we exist to improve the health and quality of life of our neighbors in our community, whom we are privileged to serve, and we do that in partnership with our community,” said Janice Nevin, M.D., MPH, chief medical officer at Christiana Care, who was introduced by Susan D. Leath, president and publisher of The News Journal. “Each month, 12 to 14 heroin deaths occur in Delaware. We must solve it together as a community.”

Sponsored by Christiana Care, the Imagine Delaware forum on Tuesday in Pike Creek gave the public an opportunity to build new relationships and learn about helpful services available to treat people addicted to heroin. The forum featured Michael Marcus, M.D., Christiana Care’s interim chair of psychiatry, who spoke about Project Engage, an innovative program created in 2008 by Terry Horton, M.D., Christiana Care’s chief of addictive medicine.

Project Engage collaborates with Brandywine Counseling & Addiction Services to save lives. The program — highlighted as a solution to addiction in The News Journal’s series — uses employees known as engagement specialists who meet with patients and families at a teachable moment, often during a period of withdrawal from drugs. The engagement specialists offer support and share their own struggles with addiction and how they were able to overcome it.

“That empathy and that support from an engagement specialist is often the pivotal action that can motivate a patient to finally believe they can break free of their addiction, even if they have struggled with it for years or decades,” Dr. Marcus said.



News Journal Executive Editor David Ledford referred to Project Engage as a “very successful program because it recognizes what patients need.” Thirty percent of patients who meet with engagement specialists enter a drug treatment program, compared to a success rate of less than 10 percent for most hospital programs.

“Project Engage reflects our commitment to patient- and family-centered care,” Dr. Marcus said. “We want to engage people when they are at rock bottom. We meet them where they are and sow the seeds of recovery.”

During the symposium, Dr. Marcus advocated for the state to pass legislation that would allow Naloxone, an overdose-reversal medication, to be available with a prescription. Naloxone takes seconds to administer and can be used to reverse the effects of a heroin overdose.

Dr. Marcus also emphasized that families need to recognize their own vulnerabilities to addiction.

“Knowing your family’s vulnerabilities to addictions is similar and just as important as knowing your own medical history,” he said. “When families are able to recognize their vulnerabilities, they are more likely to avoid drug use.”

Christiana Care employees also were on hand to connect families to resources at the Herman Rosenblum, M.D., Child & Adolescent Center and the Center for Comprehensive Behavioral Health.

Other panelists at the forum included: Delaware Health and Social Services Secretary Rita Landgraf; Stephanie King, a 24-year-old recovering heroin addict from Pike Creek; James Harrison, operations director at Brandywine Counseling and a recovering heroin addict; New Castle County Police Chief Col. Elmer M. Setting; Don Keister, co-founder of atTack Addiction; and Michael DellaCorte, special agent in charge of the Drug Enforcement Agency for Delaware and Pennsylvania. ●



**MICHAEL MARCUS, M.D.**

*“Project Engage reflects our commitment to patient- and family-centered care. We want to engage people when they are at rock bottom. We meet them where they are and sow the seeds of recovery.”*



More than 700 people filled the auditorium at Dickinson High School near Pike Creek for the Imagine Delaware forum on the state’s heroin crisis, sponsored by Christiana Care.

## Michael J. Axe, M.D., honored by American Physical Therapy Association



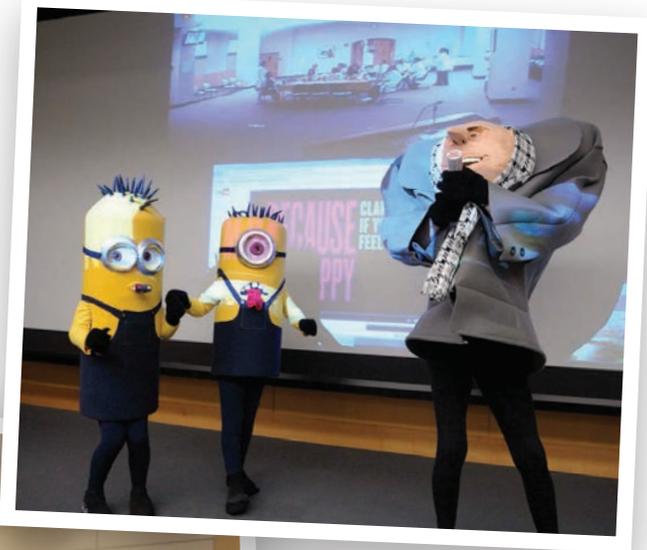
**M**ichael J. Axe, M.D., of First State Orthopaedics and the University of Delaware Physical Therapy Department, has been inducted as a member of the American Physical Therapy Association as an honorary member. The Association's 404 voting members unanimously approved inviting Dr. Axe to join a very exclusive group of only 41 people so honored since 1936.

Only 18 physicians have been awarded honorary membership. Listed among them are polio scientists Albert Sabin, M.D., and Jonas Salk, M.D.; A.I. du Pont Children's Hospital's Albert Shands Jr., M.D., and Dr. Jacqueline Perry, one of the first women to be certified by the American Board of Orthopaedic Surgery and a groundbreaking researcher in gait analysis; and President John F. Kennedy's physician Janet Travell, M.D.

Dr. Axe's other recent national recognitions include: American Orthopaedic Society for Sports Medicine's Mr. Sports Medicine 2012, the Jack C. Hughston Award for Contributions in Sports Physical Therapy, the James R. Andrews Award for Excellence in Baseball Research and the Stephen J. Rose Award for Excellence in Orthopaedic Research. ●

## Quality & Safety celebrates success

Capping a year of success that included a 12 percent reduction in preventable harm over last year, the Quality and Safety team annual meeting featured some surprise special guests: Stars of the movie "Despicable Me 2" performed the hit song "Happy" for a team that had plenty of reasons to celebrate. Sharon Anderson, MS, BSN, RN, FACHE, senior vice president, Quality, Patient Safety and Population Health Management, thanked the team for partnering to ensure the safety of all of our patients, and challenged them to build on their success in the coming fiscal year. ●



## David A. Paul, M.D., FAAP, appointed chair of Department of Pediatrics

**D**avid A. Paul, M.D., has been appointed chair of the Department of Pediatrics. Dr. Paul, a neonatologist, previously served as vice chair and then interim chair of Pediatrics after the retirement of Louis Bartoshesky, M.D., who retired Dec. 31.

Dr. Paul is a professor of pediatrics at Jefferson Medical College, Thomas Jefferson University, Philadelphia.

A native of Pittsburgh, he received his bachelor's degree in environmental population and organismic biology from the University of Colorado, Boulder, in 1984, and his medical degree from Hahnemann University, Philadelphia, in 1988, with induction to the Alpha Omega Alpha Medical Honor Society.

He completed his medical internship and residency training in pediatrics at St. Christopher's Hospital for Children, Temple University School of Medicine, Philadelphia, finishing in 1991; and fellowship training in neonatal-perinatal medicine at St. Christopher's Hospital for Children, finishing in 1994.

Dr. Paul has been an attending neonatologist at Christiana Care since 1994. He has served as director of neonatal research since 1999 and was associate director of neonatology from 2010 to 2013.

Dr. Paul was appointed chair of the Delaware Healthy Mother and Infant Consortium by Gov. Ruth Ann Minner in 2005 and has served as the consortium's Data and Scientific Committee chair since 2006. His many other distinguished appointments included membership on the Child Death Review Commission, Infant Mortality Task Force and the Delaware Children's Campaign Platform Committee.

He is a fellow of the American Academy of Pediatrics and served as a board member and officer of the Academy's Delaware Chapter, including a two-year term as chapter vice president through 2010.

He is a diplomate of the National Board of Medical Examiners and the American Board of Pediatrics.

A prolific publisher, Dr. Paul is currently credited with authorship of:

- 66 peer-reviewed publications since 1993, with four forthcoming in 2014.



- Several book chapters, including a chapter on multiple gestations in the text *Neonatology*, seventh edition, 2013.
- 150 peer-reviewed abstracts.
- 160 paper presentations at national and international scientific meetings.
- Contributions to several collaborative study publications.

In addition, he is editor of the neonatology section of *BMC Pediatrics*, and an ad hoc reviewer for 18 other professional publications. Dr. Paul has also been selected as a member of the Society for Pediatric Research.

Dr. Paul has received numerous awards, including a Physician Ambassador Award in 2006 for his collaborative and communication skills in working with Christiana Care nursing colleagues; a Katherine Esterly Health Care Award, Presented by Delaware Chapter March of Dimes; and two special achievement awards from the American Academy of Pediatrics, Delaware Chapter. ●



## Christiana Care partners to present 2014 Delaware Trauma Symposium



Christiana Care's trauma team helped present the 2014 Delaware Trauma Symposium, which took place May 1 at the Chase Center on the Riverfront in Wilmington. Christiana Care's Christiana Hospital is the only Level 1 trauma center for both adults and children in Delaware.

The symposium featured several Christiana Care speakers, including:

- Michael Rhodes, M.D., FACS, senior consultant with the Value Institute, who spoke about trends in trauma care.
- Vijay Jayaraman, M.D., trauma fellow, and Deborah Hassler, MSN, ACNP-BC, trauma nurse practitioner, who participated in a panel on providing optimal care.
- Linda Laskowski Jones, MS, RN, ACN-BC, CEN, FAWM, vice president of emergency and trauma services at Christiana Care, whose presentation "Practicing on the Wild Side," was about responding to emergencies outdoors.

During the symposium, Christiana Care trauma surgeon Kevin Bradley, M.D., FACS, was officially welcomed home by his colleagues after serving in Afghanistan for the past four months. Bradley is a member of the association of Military Surgeons of the United States.

The symposium was jointly sponsored by the Medical Society of Delaware, the American Trauma Society, Delaware Division, and the Delaware Trauma Consortium, whose committee chair is Christiana Care trauma program manager Joan Pirrung, APRN, BC, and also includes Christiana Care trauma program coordinator Coleen Dever, RN, CED-BC. ●

At the 2014 Delaware Trauma Symposium, Kevin Bradley, M.D., FACS, trauma surgeon with Christiana Care (center), is welcomed home by his colleagues after a four-month tour in Afghanistan.



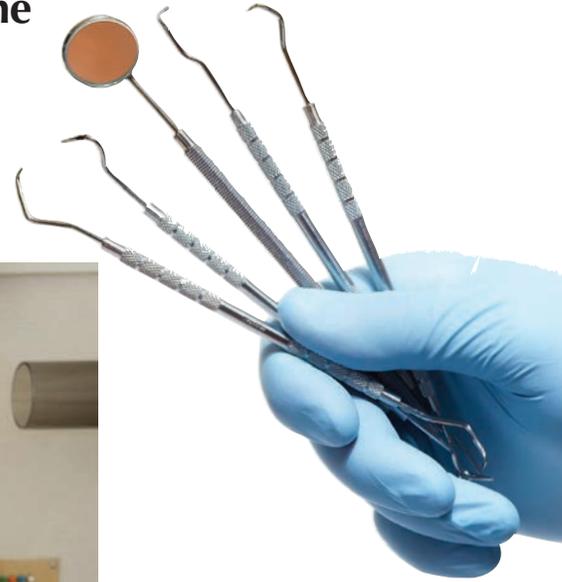
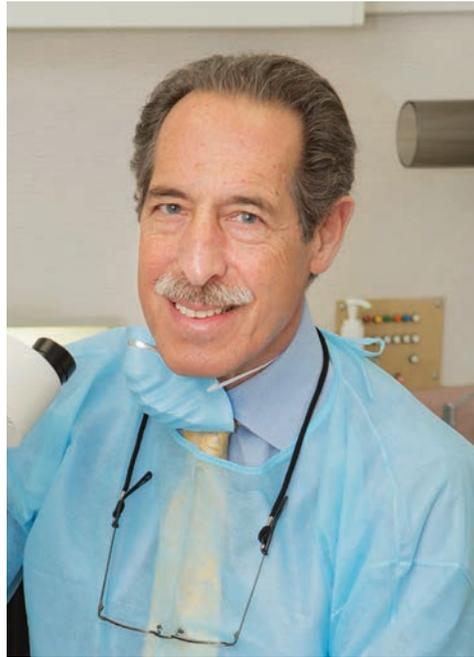
MICHAEL RHODES, M.D., FACS



LINDA LASKOWSKI JONES, MS, RN, ACN-BC, CEN, FAWM

## 19 named Top Dentists by Delaware Today magazine

**N**ineteen dentists from Christiana Care's Medical-Dental Staff were named to Delaware Today magazine's 2014 Top Dentist List. To make the list, dentists had to be nominated by their peers.



The magazine includes articles on two dentists from our staff: Peter F. Subach, D.M.D., and Robert C. Director, D.D.S. Photos courtesy of Delaware Today.

### DELAWARE TODAY 2014 TOP DENTISTS

#### **Endodontics**

Robert C. Director, D.D.S.  
Daniel R. Kreshtool, D.D.S.  
Debra J. Pace, D.M.D.

#### **General Dentistry**

David L. Isaacs, D.M.D.  
Philip L. Pike, D.D.S.

#### **Maxillofacial Surgery**

Louis K. Rafetto, D.M.D.  
Peter F. Subach, D.M.D.

#### **Oral Pathology**

Robert N. Arm, D.M.D.  
Thomas P. Dougherty, D.M.D.

#### **Orthodontics**

Mark R. Fiss, D.M.D.  
Ali Husain, D.M.D.  
Robert A. Penna, D.M.D.  
Ray S. Rafetto, D.M.D.

#### **Pediatric**

Robert M. Collins, D.D.S.  
Rachel A. Maher, D.M.D.  
Mary K. Matthews, D.M.D.

#### **Periodontics**

Michele Broder, D.M.D.  
G. William Keller, D.D.S.

#### **Prosthodontics**

Christopher D. Burns, D.D.S. ●

## Hand Hygiene Task Force demonstrates success

The Hand Hygiene/Transmission Prevention Task Force presented an update on its first year of progress at a luncheon in June. About 40 Christiana Care nurses, doctors and others involved in patient care attended the meeting led by Infection Preventionists Michelle Power and Cindy Taylor, Marci Drees, M.D., MS, hospital epidemiologist and medical director of infection prevention, and Anand Panwalker, M.D., associate vice president of medical affairs and assistant infection prevention officer.

The Hand Hygiene/Transmission Prevention Task Force is devoted to achieving a culture change in hand hygiene and transmission prevention. “We want hand hygiene to be as automatic when you walk into a patient’s room as seat belts are when you get into your car,” said Dr. Drees. “You don’t even have to think about it.”

Dr. Drees reported that Christiana Care Health System exceeded its goal to achieve at least a 90 percent compliance rate in hand hygiene, based on observation results across all patient care units. Twenty-two units scored 90 or above in the May 2014 data. The health system as a whole achieved a 93 percent compliance rate, as did Wilmington Hospital. Christiana Hospital reported 92 percent handwashing compliance, and Middletown Emergency Department observers reported the highest compliance of 97 percent.

Each month more than 5,000 hand hygiene observations have been submitted by staff throughout the institution.

The Medical ICU at Christiana Hospital reported specifically on their experience engaging staff both in performing observations and being monitored for compliance. They were able to involve their Value Improvement Team members and multidisciplinary staff to participate in the observation program. Targeted feedback to those not performing hand hygiene optimally has been helpful in improving their rates.

Overall compliance statistics by role were also reported at the lunch and learn session. Physician assistants achieved 100 percent compliance, while nine other roles, including nurses (RNs, LPNs), patient care technicians, student nurses, therapists (PTs, OTs, Speech & Hearing), respiratory therapy and dietary-nutrition staff, achieved the 90 percent goal. Other roles ranged from 76 percent to 89 percent.



The goals of the program included:

- Increasing both number and representativeness of hand hygiene observations, including nights and weekends.
- Increasing the validity and accuracy of observations reported, as well as the transparency of results.
- Creating accountability for hand hygiene and transmission prevention.
- Focusing on unit-based monitoring and feedback to achieve more success.

The meeting concluded with a discussion about ways to further improve the program and increase participation.

The hand-hygiene observations provide valuable information to help Christiana Care’s continued march toward 100 percent compliance and optimum infection prevention. ●

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**“We want hand hygiene to be as automatic when you walk into a patient’s room as seat belts are when you get into your car. You don’t even have to think about it.”**

— MARCI DREES, M.D., MS

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## Quality Partners Update

### Customer service for Christiana Care employees

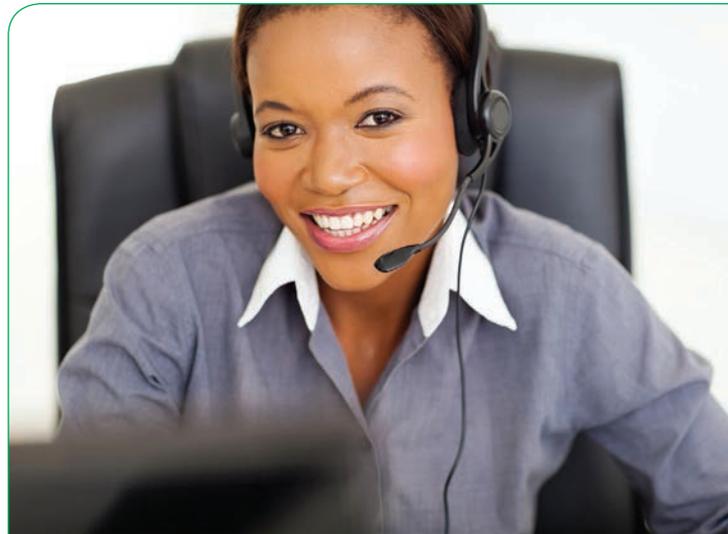
**G**eisinger Health Options provides comprehensive service to Christiana Care employees living in Delaware. The staff is specially trained in your benefits plan. Representatives are available weekdays from 8 a.m. to 5 p.m. to answer any questions about your benefits, the provider network and care management programs available to you.

Use the dedicated toll-free number, 844-568-5229, to reach a representative during business hours. Or use the automated phone service any time to get information on your eligibility dates and recent claims, as well as deductibles, copayments and coinsurance amounts.

The staff has a customized database to record all questions and concerns voiced by members. That data is used to monitor trends and take appropriate action such as outreach and education to employees and dependents.

In addition, the dedicated webpage for Christiana Care employees and dependents at [www.thehealthplan.com/CCHS](http://www.thehealthplan.com/CCHS) can be a big help. The online provider search is updated nightly; you can search for providers at any time. The list of covered drugs and participating pharmacies is available, as well as forms you may need and other useful info as well.

If you have a question about your benefits, be sure to take advantage of the many resources available to you. ●



*Representatives specially trained in your benefits plan are available weekdays from 8 a.m. to 5 p.m. to answer any questions about your benefits, the provider network and care management programs available to you. Call toll free at 844-568-5229.*

### CORD:USE and Christiana Care leaders mark a year of successful cord blood banking

More than 1,000 mothers who have delivered babies have made use of the option to donate umbilical cord blood since Christiana Care partnered with CORD:USE, the world's leading cord blood banking organization, one year ago. John Wagner, M.D., chief clinical scientific adviser for CORD:USE and the world's most active cord blood transplanter, and CORD:USE President and CEO Edward Guindi, M.D., visited Christiana Care in July to mark the anniversary. Dr. Wagner met with clinical staff of the Department of Obstetrics and Gynecology to present a talk, "Umbilical Cord Blood, Revolutionizing the Practice of Transplant Medicine." ●



Marking a year of successful partnership between Christiana Care and CORD:USE, the country's leading program for banking umbilical cord blood: Richard J. Derman, M.D., MPH, FACOG, Marie E. Pinizzotto, M.D., Endowed Chair of Obstetrics and Gynecology; Kim Petrella, RN; Edward Guindi, M.D., president and CEO, CORD:USE; John Wagner, M.D., chief clinical scientific adviser, CORD:USE; Sherry A. Monson, MSN, RN, MBA, vice president of Women's, Infants' and Children's Health; and Mark Gooss, maternal-fetal research assistant.

## Publications

**Michael Z. Caposole, D.O., Jehovah-Nissi Kim, Nancy A. Stewad, MSN, RN, OCN, CRNI, Thomas L. Bauer, M.D., et al.** "Elimination of Socioeconomic and Racial Disparities Related to Lung Cancer: Closing the Gap at a High Volume Community Cancer Center." *Surgical Oncology*. June 2014.

**Steven Eppes, M.D., et al.** "Prescriber Perceptions of a Pediatric Antimicrobial Stewardship Program." *Clinical Pediatrics*. March 2014.

**Jennifer Goldsack, MChem, MA (Oxon), MS, et al.** "The Impact of Injectable Oncology Drug Shortages on Patient Care in the United States." *American Journal of Health-System Pharmacy*. April 2014.

**Jennifer Goldsack, MChem, MA (Oxon), MS, Janet C. Cunningham, MHA, RN, NEA-BC, CENP, and Susan M. Mascioli, MS, BSN, RN, CPHQ, NEA-BC.** "Patient Falls: The Search for the Elusive Silver Bullet." *Nursing* 2014. July 2014.

**John E. Jesus, M.D., et al.** "Headache, Hand Clumsiness, and 'Involuntary Serial Sevens' in a Young Person." *Journal of Emergency Medicine*. July 2014.

**Ellen Justice, MLIS, AHIP,** "Conducting a Successful Systematic Review of the Literature, Part 1 and Part 2." *Nursing* 2014. June 2014.

**Anthony C. Sciscione, D.O.,** "Methods of Cervical Ripening and Labor Induction: Mechanical." *Clinical Obstetrics Gynecology*. June 2014.

**Deborah J. Tuttle, M.D., Robert G. Locke, D.O., MPH, Amy Mackley, CNS, David A. Paul, M.D., et al.** "Prolonged Early Antibiotic Use and Bronchopulmonary Dysplasia in Very Low Birth Weight Infants." *American Journal of Perinatology*. May 2014.

## Presentations

**Richard Derman, M.D., MPH, FACOG,** "International Partnerships for Global Health Research," Delaware BioBreakfast, at the John H. Ammon Center Medical Education Center. July 2014.

**Carlos Duran, M.D., FAAP,** "Combined AABR and OAE for Universal Newborn Screening," at the Annual Early Hearing Detection and Intervention meeting, Jacksonville, Fla. April 2014.

**Daniel J. Elliott, M.D., MCSE, Paul Kolm, Ph.D., and William Weintraub, M.D.,** "Predicting Readmission Risk Following Coronary Revascularization at the Time of Admission," at the Quality of Care and Outcomes Research Scientific Sessions, Baltimore, Md. June 2014.

At the Society for Academic Emergency Medicine Annual Meeting, Dallas, Texas, May 2014:

- **John E. Jesus, M.D., et al.** "Actual Treatment Choices of Patients with Do-not-resuscitate/Do-not-intubate Orders: A Two-year Follow-up Study."

- **Barbara Davis, BSN, RN, Charles Reese, M.D., FACEP, John E. Jesus, M.D., et al.** "Urgencies and Emergencies: The Differential Impact of Urgent Care Centers on Emergency Department Visits from Low-severity, Privately-insured Patients."

- **Jamie M. Rosini, Pharm.D., BCPS, Shawn Fellows, RPh., Suraj Rajasimhan, Pharm. D., Connie Yu, Pharm.D., BCPS, Debra Marco, RN, Brian J. Levine, M.D., FACEP, Ryan Arnold, M.D., John Jesus, M.D., et al.** "Impact of Clinical Pharmacists on Time to Antibiotic Administration for Septic Patients in the Emergency Department."

**David A. Paul, M.D.,** "Race and Antenatal Corticosteroid Administration," at the Time for ACTION Conference, Dulles, Va. June 2014.

**Nancy Sloan, DrPH, and Richard Derman, M.D., MPH,** "How Do I Get Involved in Maternal/Child Health Work, Here and Abroad?" at the 3rd Annual DHSA Global Health Symposium at the John H. Ammon Medical Education Center. June 2014.

**Robert L. Witt, M.D.,** presented "Thyroid Surgical Care: Impact of Molecular Testing," at Thomas Jefferson University, Philadelphia. June 2014.

At the Pennsylvania Academy of Otolaryngology-Head & Neck Surgery

in Hershey, Pa. June 2014, **Robert L. Witt, M.D.,** presented a lecture, "Thyroid Nodule Molecular Genetic Testing," and an abstract, "Contemporary Diagnosis and Management of Parotid Warthin's Tumor," and served on a panel on thyroid surgery.

At the Delaware Academy of Family Physician's 2014 Annual Scientific Assembly, Newark, June 2014:

- **Erin Kavanaugh, M.D., Lindsey Szymaszek, D.O., and Novneet Sahu, M.D.,** "Breaking Barriers, Building Teams: An Interprofessional Approach to Rapid Response Team Training."

- **Erin Kavanaugh, M.D., and Elise Attardo, D.O.,** "Putting Patients at the Center of the Handoff."

- **Novneet Sahu, M.D.,** "Death by Aortic Aneurysm or Dissection in Delaware."

- **Elise Attardo, D.O., and Beth Greenwood, M.D.,** "Teaching Physicians in the 21st Century: The Role of Hosting Podcasts in Medical Education."

- **Elise Hogan, M.D., Lindsay Ashkenase, M.D., Nicole Srivastava, Pharm.D., Jennifer Lukaszewicz, Pharm.D., and David Cohen, M.D.,** "Improving Antimicrobial Stewardship for Inpatient Treatment of UTI."

- **Mary Stephens, M.D., MPH, FAAFP, Teresa L. Insetta, MS, RD, Mary T. Williams, RD, Karen Anthony, MS, CHES,** "Nutrition Coaching As an Effective Strategy to Promote Behavioral Change in the Treatment of Adolescent Obesity."

- **Mary Stephens, M.D., MPH, FAAFP, Kay McLean-Grant, RN, CPNP, Martha Coppage-Lawrence, RN, CPNP, Julie Chiquoine, FNP-BC, Jennifer Barbieri, FNP-BC, Kathy Cannatelli, MS, BS, and Kate Leckel, LPCMH,** "Utilizing Motivational Interviewing in School-based Health Centers to Promote Healthy Behaviors in Adolescents."

- **Ina Li, M.D., Claudine Jurkowitz, M.D., James T. Laughery, Zugui Zhang, Gale Bucher, MSN, RN, COS-C, Valerie Hughes, RN, and Heather Bittner Fagan, M.D.,** "A Collaborative Model for Physician Practices and Home Care Agencies."

- **Julie Hammond, D.O., and Matthew Paoli, D.O.**, “Primary Care Updates: Hypertension.”
- **David Krasner, D.O.**, “Medical Weight Management.”

**Margaret Keenan, Ph.D.**, “A Behavioral Science Needs Assessment: Establishing the Foundation for a Curriculum Update,” at them STFM Annual Meeting. San Antonio. May 2014.

**Michele Savin, MSN, NNP-BC**, a lecture, “Using Nursing Knowledge to Improve Healthcare Literacy,” at the Association of Women’s Health, Obstetrics and Neonatal Nurses (AWHONN) Annual National Conference in Orlando. June 2014.

## Appointments

**Brenda Ewen, MS, RN CPHRM**, has been appointed by Delaware Gov. Jack Markell to serve on the Child Placement Review Board for a three-year term.

**Kristin Livingston, MBA, RHIA**, is the new director for Data Acquisition and Measurement.

**Donna Mahoney, MHCDS**, is now program manager for Population Health Applied Analytics, responsible for the development of data analytics for population health management.

**Karen McDonald, DNP, NNP-BC, CPLC**, and **Nancy Lowinski, BSN, RNC-NIC, CPLC**, have received certification in

perinatal loss from the National Association of Hospice and Palliative Nurses.

The Professional Advancement Council announces the following nurses are promoted to RN III:

**Kenya Andrews, 7E; Adrienne Bartoline, 6C; Kathleen Booker, 4E; Christine Brown, 6B; Stacey Byam, Transitional Care Unit; Debbie Guinan, Joint Center, Wilmington Hospital; Sarah Hinkle, MICU; Rita Kimani, 4C; Linda Louie, 3B/3C/4B; Jacqueline Minor, Wilmington Hospital ACE; Pamela Owen, 7E; Marsy Russell, 7E; David Salati, Middletown ED; Cheryl Scott, 3B/3C/4B; Amy Stubblebine, 3B/3C/4B; Michele Tjaden, Wilmington Hospital 4W; Katie Torrente, 7E. ●**



## Welcome, new providers!

Christiana Care Chief Medical Officer Janice Nevin, M.D., MPH, welcomed new health care providers — including some former Christiana Care residents — at orientation in July: Christopher Karam, M.D.; Peter Burke, D.O., MBA; Gina Capitoni, D.O.; Jessica Steiger, MSN, RN, ACNP-C; Sneha Daya, M.D.; Jessica Stirpe, M.D.; Janice Nevin, M.D., MPH; Krista Davis, RN, FNP-C; Lauren Foy, D.O.; Jennifer Goldstein, M.D., MSc; Brenda Nardozzi MSN, RN, CEN, FNP-BC; Michael Giunta, M.D.; Lauren Douglas, M.D. ●

august

**Value Institute Academy  
Best-in-Class Case Management**

Tuesday, Aug. 12, 9 a.m.-5:30 p.m.  
Wednesday, Aug. 13, 8:30 a.m.-5 p.m.

John H. Ammon Medical Education Center

This two-day workshop is designed to provide Best-in-Class Case Management training for members of the health care team with responsibility for patient care across the continuum with an emphasis on effective transitions in care. The curriculum reviews best practices and tools that support learners' application of the essentials of effective care management methods in their work environments. The workshop is offered through Mullahy & Associates, LLC, a health care case management training and consulting firm dedicated to Advancing Best in Class Case Management by developing patient-centered clinicians/case managers to serve as advocates for their patients.

Limited seats remain. Christiana Care employees and Medical-Dental Staff who wish to attend may contact Theresa Fields, 302-733-2066 or tfields@christianacare.org. All others should call 302-623-7172 to register.

**Coping as a Family:  
Helping Children When an  
Adult They Love Has Cancer**

Thursday, Aug. 21, 4-7 p.m.

Helen F. Graham Cancer Center & Research Institute, East Building, Large & Small Conference Rooms

Coping with cancer is a family affair. Christiana Care's Helen F. Graham Cancer Center & Research Institute invites your entire family to "Coping as a Family" on Thursday, Aug. 21. A full evening of activity, this free event will provide resources for the whole family, including story time and art activities for children ages 5-16 and an educational seminar for adults. Refreshments will be served.

Register online at [www.christianacare.org/events](http://www.christianacare.org/events) or call 302-623-4477.

september

**American Heart Walk**

Sunday, Sept. 7, 8 a.m.  
Wilmington Riverfront

The 23rd American Heart Association Annual Heart Walk promotes awareness about heart disease and stroke while raising funds to fight the diseases. You can register a walking team at [www.heartwalk.kintera.org/wilmingtonde](http://www.heartwalk.kintera.org/wilmingtonde). Register today and make this our biggest walk ever. Individuals can join one of the several teams from Christiana Care already listed on the site. Or call your co-workers, friends and family and start your own team. Each year, many Christiana Care employees, families and friends turn out to support this great event.

The first 1,000 Christiana Care employees and their team members to register will receive free a Christiana Care Heart Walk T-shirt.

**Dr. Margaret I. Handy Memorial Lectureship**

Tuesday, Sept. 16, 8 a.m. -3 p.m.

John H. Ammon Medical Education Center

Registration Deadline: Sept. 8. Pre-registration is required. There is no charge to attend. Registration must be made online at <https://cchs.cloud-cme.com/Handy2014>.

**Delaware Donor Dash 5K**

Sept. 17, check-in at 5:30 p.m.,  
start time at 6:30 p.m.

Rockford Park, Wilmington

For more information, visit <http://www.races2run.com/events/delaware-donor-dash/>.



**Concepts in Respiratory Neonatal Care****Friday, Sept. 19, 9:30 a.m. - 12:30 p.m.****John H. Ammon Medical Education Center**

This conference will provide respiratory care practitioners and other health care professionals continuing education on cutting edge critical care neonatal topics. Registration is free and begins at 8:30.

For more information or to register, contact conference chair John Emberger, BS, RRT-ACCS, FAARC at 302-733-3565.

**21st Annual E.G. Scott Microbiology Symposium****Tuesday, Sept. 23, 7 a.m.-4 p.m.****John H. Ammon Medical Education Center**

Registration Deadline: Sept. 12. Pre-registration is required. Registration Fee: \$60. Make checks payable to: E.G. Scott Education Fund. Credit card payment or for more information, call Erica Wilson, 302-733-3730.

**Value Institute Symposium****Monday, Sept. 29****John H. Ammon Medical Education Center**

Patrick Conway, M.D., MSc, deputy administrator for Innovation and Quality and chief medical officer at the Centers for Medicare and Medicaid Services (CMS) is scheduled to lecture. He leads the CMS Center for Clinical Standards and Quality (CCSQ) and its Center for Medicare and Medicaid Innovation. CCSQ is responsible for all quality measures for CMS, value-based purchasing programs, quality improvement programs in all 50 states, clinical standards and survey and certification of Medicare and Medicaid health care providers across the nation and all Medicare coverage decisions for treatments and services. Registration will open soon.

**october****save the date****7th Annual Renal Symposium****Saturday, Oct. 11, Christiana Hospital, Room 1100****2014 Annual Cancer Symposium****Thursday, Oct. 2****John H. Ammon Medical Education Center**

This year's symposium and dinner program focuses on the status of lung cancer screenings. Health care professionals will gain greater insights into the evidence for lung cancer screenings. A panel discussion will review the State of Delaware's screening initiative and insurance issues. Posters on research underway at the Center for Translational Cancer Research will be available for viewing. E-mail invitations will be sent soon.

**An Evening of Hope****Thursday, Oct. 9, 6-8:30 p.m.****Wilmington Country Club**

Join Delaware First Lady Carla Markell, along with the Friends of the Helen F. Graham Cancer Center and others in our community who support the fight against cancer at this upcoming event.

Learn more at <http://www.christianacare.org/friendshfgcc>.

**Wilmington Kidney Walk****Sunday, Oct. 12, check-in at 8:30 a.m., start time at 10 a.m. Wilmington Riverfront**

Kidney Walk is the nation's largest walk to fight kidney disease. Held in nearly 100 communities, the event raises awareness and funds lifesaving programs that educate and support patients, their families and those at risk. Register online at <http://donate.kidney.org>. For more information, contact Mary Elizabeth Sullivan, [mary.sullivan@kidney.org](mailto:mary.sullivan@kidney.org); 215-923-8611.

**5th Annual Kidney Transplant Symposium for Nurses and Dialysis Technicians****Wednesday, Oct. 22****Executive Banquet and Conference Center, 205 Executive Drive, Newark.**

The symposium will offer factual information about the present and future of transplant and provide nurses and dialysis technicians who care for current or potential kidney transplant patients with a valuable learning opportunity and resources. Registration begins at 8 a.m., symposium at 8:30 a.m. Registration is free, register by Oct. 8 at [www.christianacare.org/kidneysymposium2014](http://www.christianacare.org/kidneysymposium2014). ●

## Lidocaine: Not the answer to infusion pain with potassium riders

Christine Skrzypiec, Pharm.D.

Hypokalemia, a serum potassium  $< 3.5$  mmol/L, is a significant electrolyte imbalance that if left untreated could result in morbidity and mortality. While oral potassium chloride supplementation is the preferred treatment, due to the better side effect profile, rapid repletion with intravenous potassium infusions is at times clinically warranted in patients. Unfortunately, at infusion rates greater than 40 mEq/h cardiac side effects and pain at the infusion site have been reported. Therefore, it has been recommended that infusions rates less than 40 mEq/h and concentrations less than 80 – 100 mEq/L be used in patients who need rapid correction of their serum potassium. However, even with these lowered infusion rates and concentrations, pain during infusion and phlebitis reportedly occur in 60% of patients with supplemental potassium infusions.

While not a common practice, the addition of a local anesthetic, such as lidocaine, has been used to limit infusion pain when giving intravenous supplementation. The evidence supporting this practice is scarce; there have been no studies regarding the ideal concentration or administration rate since 1992 on this topic. While these older and smaller studies did show reduced infusion pain associated with concurrent lidocaine administration during potassium infusions, some patients experienced undue systemic side effects from the lidocaine. Additionally, studies have shown that lidocaine administered to a vein that already has phlebitis can add further vascular injury.

More recently in 2008, The Institute for Safe Medication Practices (ISMP) stated that the addition of lidocaine to potassium infusions as another opportunity within in the medication administration process that can lead to medication errors due to the wrong drug or dose selection. One example includes a nursing supervisor selecting the wrong strength of lidocaine and giving it to a staff nurse to add to an IV bag, causing a 10 fold higher dose of lidocaine to be given. Another case report included regular insulin being added instead of lidocaine, causing recurrent hypoglycemia and another example was the addition of potassium chloride to a bag of lidocaine versus adding lidocaine to a potassium chloride bag. Based on these previous case reports and greater risk versus

benefit observed, the ISMP has discouraged the addition of lidocaine to intravenous potassium infusions.

To understand how common the practice of adding lidocaine to potassium infusions was, a voluntary national survey was conducted by the regional clinical director of Comprehensive Pharmacy Services (CPS) and shared with American College of Clinical Pharmacy (ACCP) – Critical Care listserv in October 2013. This survey revealed that of the 173 hospitals that responded, 124 of them do not use lidocaine with their potassium chloride piggybacks. The survey revealed that several hospitals allow it, but have programs in place to discourage the practice. Alternative options for rapid repletion that limit the risk of pain on infusion that have been cited in literature include the use of oral potassium chloride, slowing the infusion rate, and/or increasing the volume the potassium chloride is delivered in if possible.

In conclusion, the addition of lidocaine is not recommended based on the paucity of strong data to support efficacy, availability of alternatives to lessen the incidence of pain on infusion, and the increased risks associated with use. Therefore, supported by both the Medication Safety Committee and the Pharmacy and Therapeutics Committee, the addition of lidocaine to potassium riders is not approved at Christiana Care Health System. ●

### Reference:

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2. Morrill GB, Katz MD. The use of lidocaine to reduce the pain induced by potassium chloride infusion. *J Intraven Nurs.* 1988 Mar-Apr;11(2):105-8.
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5. ISMP. Safety with issues with adding lidocaine to IV Potassium infusions from February 12, 2004 ISMP Medication Safety Alert. Available from: [www.ismp.org/newsletters/acutecare/articles/20040212\\_2.asp](http://www.ismp.org/newsletters/acutecare/articles/20040212_2.asp)
6. Rapp RP. Use of lidocaine to reduce pain associated with potassium chloride infusions. *Clin Pharm.* 1987 Feb;6(2):98.

## CHRISTIANA CARE COMPLIANCE HOTLINE



Christiana Care's Compliance Hotline can be used to report a violation of any regulation, law or legal requirement as it relates to billing or documentation, 24 hours a day, 7 days a week. All reports go directly to Compliance Officer Ronald B. Sherman. Callers may remain anonymous. The toll-free number is: 877-REPORT-0 (877-737-6780).

✓ To learn more about Corporate Compliance, review the Corporate Compliance Policy online or contact Ron Sherman at 302-623-2873.

## FORMULARY UPDATE—JUNE-JULY 2014

## FORMULARY ADDITIONS

Medication – Generic/Brand Name	Strength / Size	Use / Indication	Comment
Cyclopentolate 0.2%/ Phenylephrine 1% ophthalmic solution	2-mL bottle	Production of mydriasis	Line-item extension

## NEW CHRISTIANA CARE MEDICATION POLICIES

<b>Colistin and polymyxin injections</b>	Only infectious disease-trained physicians can prescribe intravenous colistin methanesulfonate injection and intravenous polymyxin B injection.
<b>Oral antipsychotic medications-Correction</b>	Initiation of treatment with aripiprazole, clozapine, fluphenazine, loxapine, lurasidone, perphenazine, trifluoperazine, thioridazine, thiothixene and trifluoperazine restricted to psychiatrists. Initiation of treatment with oral olanzapine is not restricted to psychiatrists.

## FORMULARY DELETIONS

<b>0.63 mg albuterol solution for nebulization</b>	Lack of need. Other strengths remain available.
<b>Sulfanilamide vaginal cream</b>	Lack of need. Alternatives available for the indication for which it is used.

## Protect your skin outdoors, wherever you go

When you head to the beach, sunblock is probably the first thing you pack. But you need to protect your skin from the sun even when you aren't on a summer vacation. Preventing skin cancer is a year-round priority.

Skin cancer is the most common of all cancers, accounting for 3.5 million cases in the United States each year, according to the American Cancer Society.

Who is at risk? The American Cancer Society says:

- ✓ Anyone who has had unprotected or excessive exposure to ultraviolet (UV) radiation, including tanning booths.
- ✓ People with fair skin who are easily burned. That includes natural blondes and redheads.
- ✓ Anyone with a family history of skin cancer.
- ✓ Anyone with unusual moles or multiple moles.
- ✓ People who have suffered severe sunburns in the past, including childhood burns.

It makes sense for everyone to protect themselves from harmful UV rays. Cover up with loose-fitting clothes made from tightly woven fabric. Wear a hat. Avoid direct exposure to the sun between 10 a.m. and 4 p.m.

Don't be stingy with the sunscreen. About one ounce (the amount it takes to fill your palm) will cover the arms, legs, neck and face of the average adult. Apply at least every two hours — or more often if you are swimming or sweating a lot. And don't forget to put sunblock on your ears and the top of your feet.

Your skin is not the only part of your body that can be harmed by the UV rays. Sun also can damage the cornea, lens and other parts of the eye. UV exposure increases your risk of cataracts, too.

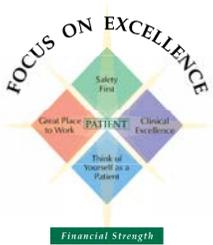
When you're buying sunglasses, choose shades that block 99 to 100 percent of both UVA and UVB rays. If there's no information about UV protection on the label, move on to another brand.



The darkness of the lens is not a reflection of the sunglasses' ability to block UV rays. But the frames do matter. Wraparound sunglasses do a better job of protecting your eyes than thin, metal frames.

Keeping safe in the sun is a family matter. Get the next generation on the right track by making certain children wear sunscreen — and sunglasses.

If you detect a change in your skin, such as a sore that doesn't heal, a new growth or a mole with an irregular border, see your doctor right away. Skin cancer is highly curable when it is detected early. ●



*Christiana Care is a private, not-for-profit regional health care system that relies in part on the generosity of individuals, foundations and corporations to fulfill its mission. To learn more about our mission, please visit [christianacare.org/donors](http://christianacare.org/donors).*

## Christiana Care team rescues feathered family in need

Christiana Care Health System is dedicated to partnering with patients and their families — even when those families have feathers! A mother duck and her six ducklings were nesting near the Christiana Surgicenter, and the brood of ducklings became trapped after they fell into a storm drain. Staff from Christiana Care’s Maintenance and Fire Protection departments were alerted and raced to the rescue, carefully entering the storm drain and moving the baby birds to safety. Unfortunately, the ducklings didn’t learn from their mistake and had to be rescued again the following week. The Christiana Care team rescued them again and then moved the entire family to the pond behind the Helen F. Graham Cancer Center & Research Institute, where they seem happy and healthy.

Special thanks to staff members Buck Brownlee, Todd Toulson, Mike DiFrancesco, Mark Fafalios, Richard McDowell, Jeff Benyo, Richard Domyan, Lewis Fanny, Jeff Ceban, Mike Hallman, Matt Jolley, Richard Allen, Jeff Cooper, Tom Messick and Katie Duonnolo, who demonstrated that The Christiana Care Way is to provide respectful, expert care to all of our neighbors — no matter who they are. ●

