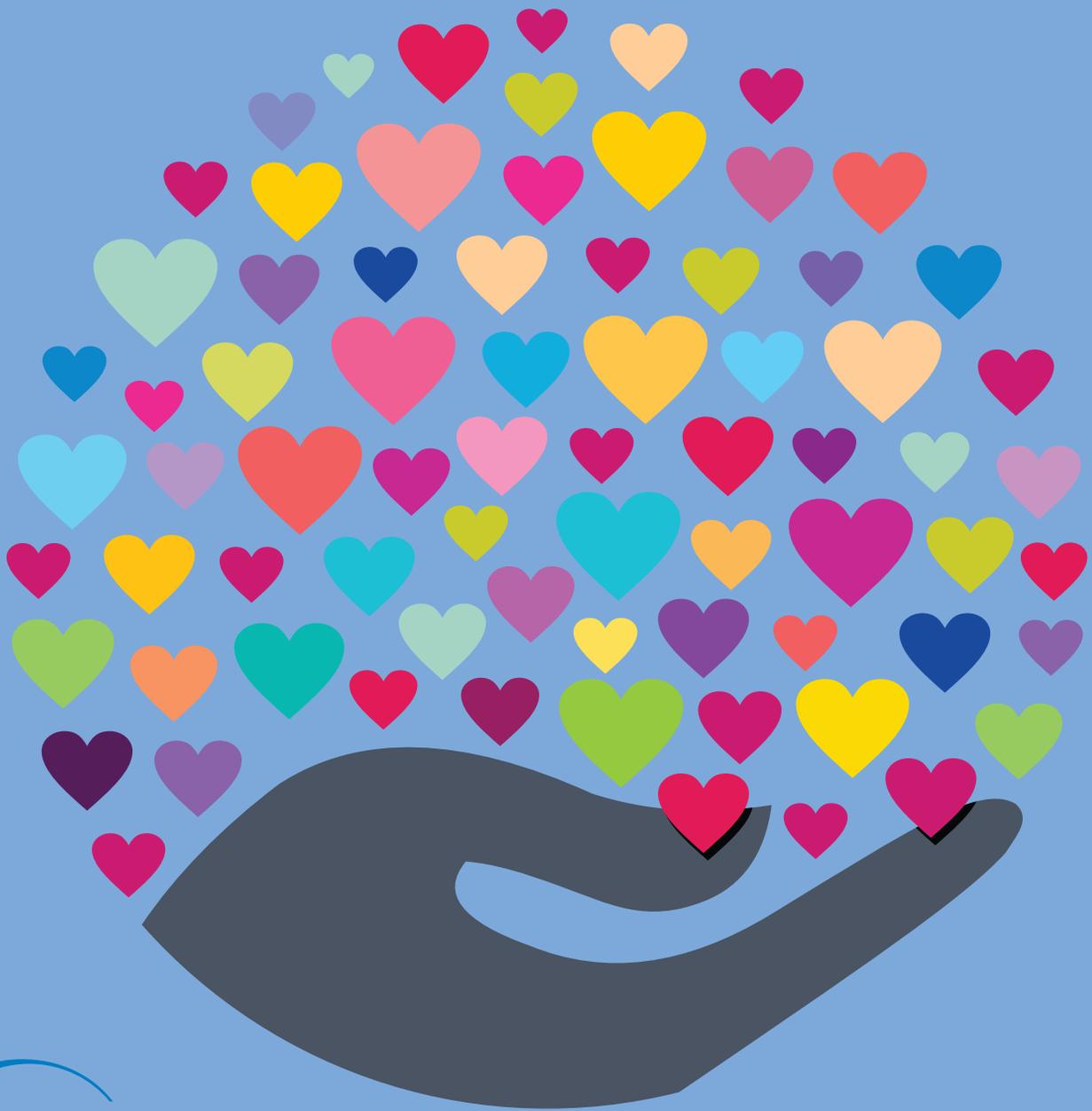


# 2015

## Annual Report & Community Benefit Summary



# What's Inside

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4



9



14



20

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Stay Connected



LBH Blog

# The Right Thing to Do

Dear Friends,

**T**here are a lot of reasons why LifeBridge Health places a priority on building a healthier community. I could talk about patient outcomes and benchmarks. I could delve into the complexities of the Affordable Care Act, and how Maryland hospitals are incentivized to deliver better care at lower costs.

But I think our community health improvement manager Terrie Dashiell says it best when she says that building a healthier community is simply “the right thing to do.”

Empowering young people to rise above the culture of violence that hangs over our city streets is the right thing to do. Being there for a new mom who is struggling with postpartum depression is the right thing to do. Helping an aging neighbor get in and out of her home safely is the right thing to do.

## Building a Better Tomorrow Together

You will see many stories like these in the pages of this publication. And if you work with us or receive care from us, you will see a passion for doing what’s right in every member of our team. Whether it’s a nurse teaching a diabetes patient how to test her glucose levels or one of our youth development specialists working with local eighth graders to help them stay in school, all of our doctors, nurses, employees and volunteers truly want to make a difference. We want to help our community realize all of its incredible potential.

We are not the only ones who want a better future; we are working with partners throughout Maryland to push for what’s right. And we need people like you to join us in our mission. Visit **www.lifebridgehealth.org** to learn how you can donate to the health care causes you care about or volunteer at one of our four hospitals.

Gandhi told us to be the change we want to see in the world. Let’s accept his call to action and together be the change we want to see in our communities. In our hearts, we know it’s the right thing to do.

Sincerely,  
Neil M. Meltzer  
President and CEO  
LifeBridge Health



Neil M. Meltzer  
President and CEO



# LifeBridge Health at a Glance

**L**ifeBridge Health consists of Sinai Hospital of Baltimore, Northwest Hospital, Carroll Hospital, Levindale Hebrew Geriatric Center and Hospital, LifeBridge Health & Fitness, and their subsidiaries and affiliates. As one of the largest, most comprehensive and most highly respected providers of health-related services to the people of the Maryland region, LifeBridge Health has the technology, skills and expertise of an academic system with the warmth and personal attention of a community hospital. Involving patients and their family members as partners in care, LifeBridge Health offers comprehensive treatment and preventive and wellness services. In addition, LifeBridge Health provides programs to educate and support our communities.



Researchers at the Alvin & Lois Lapidus Cancer Institute Translational Research Laboratory are developing new ways to target cancer.

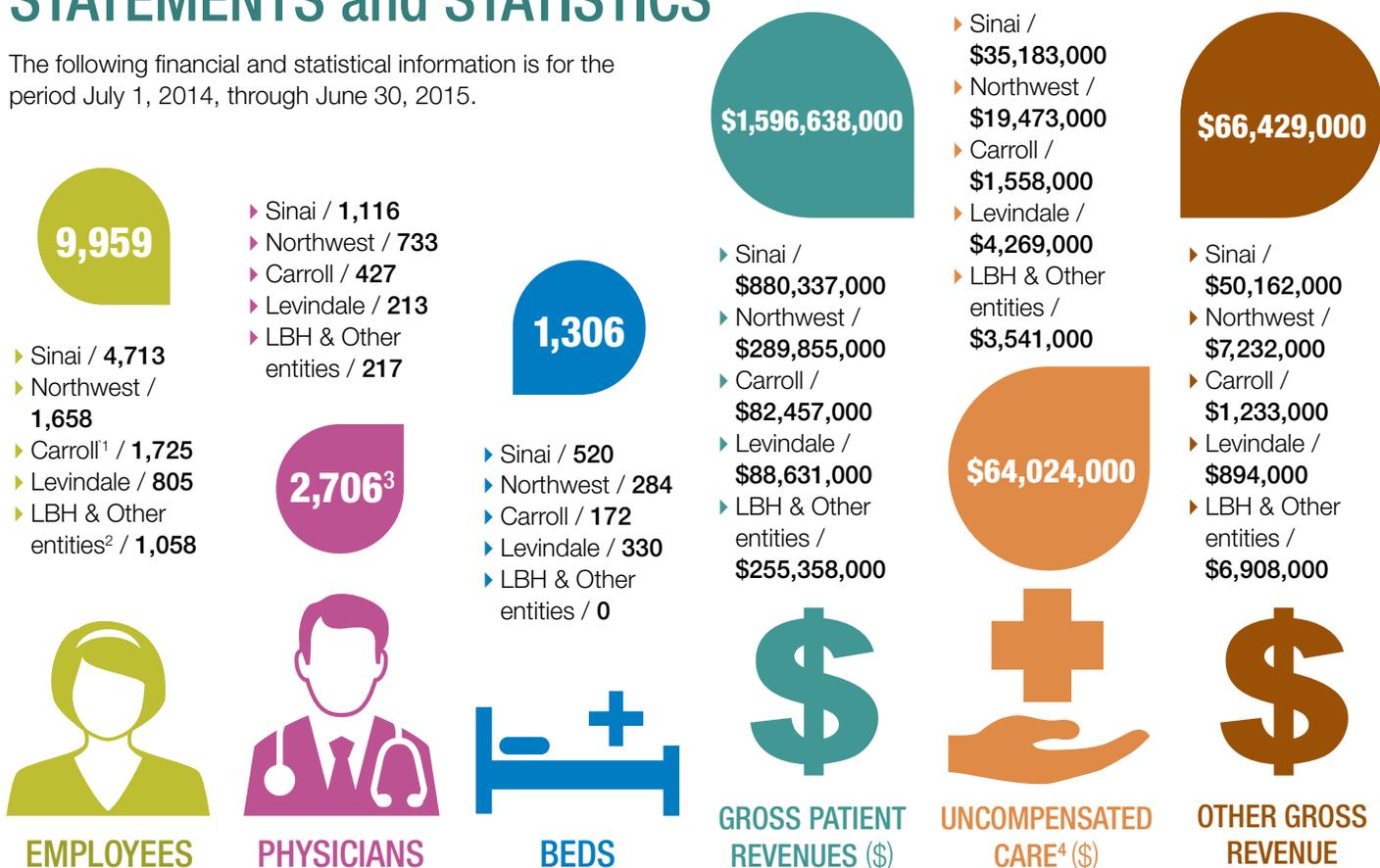
## Destination Programs at LifeBridge Health

While LifeBridge Health offers comprehensive services in nearly every area of medicine, five of its centers of excellence attract patients from every county in Maryland, all 50 states and many countries around the world:

- Alvin & Lois Lapidus Cancer Institute
- LifeBridge Health Cardiovascular Institute
- Rubin Institute for Advanced Orthopedics
- Sandra and Malcolm Berman Brain & Spine Institute
- William E. Kahlert Regional Cancer Center

## STATEMENTS and STATISTICS

The following financial and statistical information is for the period July 1, 2014, through June 30, 2015.



<sup>1</sup> Carroll became part of LifeBridge Health on April 1, 2015.  
<sup>2</sup> Includes Community Physicians, LBH&F, PDI, LB Anesthesia, LifeBridge Investments, etc.

<sup>3</sup> Total number of credentialed physicians.  
<sup>4</sup> Care provided for which compensation is not received, i.e., any combination of bad debts and charity care.

# Sinai Hospital

**C**elebrating its 150th anniversary this year, Sinai Hospital of Baltimore features renowned centers of excellence — some with national and international acclaim. As the largest community hospital and the third largest teaching hospital in Maryland, Sinai Hospital's mission is to provide quality patient care, educate medical students and residents, and engage in research to improve the lives of people all over the world.

## Select Medical Services

- Alvin & Lois Lapidus Cancer Institute
- Cardiovascular Institute
- Center for Joint Preservation and Replacement
- Cyberknife® Center
- ER-7 Emergency Center
- Geriatric Surgery
- Herman & Walter Samuelson Children's Hospital
- Krieger Eye Institute
- Sinai Rehabilitation Center
- Rubin Institute for Advanced Orthopedics
- Sandra and Malcolm Berman Brain & Spine Institute
- Sleep Center
- Stroke Center
- Women's Services

## Sinai's Teaching Hospital Mission

Education is a core mission at Sinai Hospital, the state's largest independent academic medical center. Its community-based teaching program combines the supportive environment of a community hospital with the academic and research capabilities of a university hospital.

Medical students and residents from programs all over the world participate in the education and training programs offered at Sinai Hospital, with nearly 500 receiving clinical training here each year.



John Herzenberg, M.D., director of the International Center for Limb Lengthening at the Rubin Institute of Advanced Orthopedics, explains the limb lengthening procedure.

An enthusiastic faculty, many with appointments at the Johns Hopkins University School of Medicine and the University of Maryland School of Medicine, are nationally and internationally recognized experts in their fields. They join Sinai Hospital attending physicians to give residents opportunities to work with patients from a broad range of socioeconomic and ethnic backgrounds in a variety of clinical settings. Sinai Hospital's state-of-the-art facilities help prepare our residents to be top physicians in modern health care settings. ■



The LifeBridge Health Cardiovascular Institute at Sinai's hybrid room facilitates minimally invasive cardiac procedures with the most advanced technology.

## By the NUMBERS

### BEDS

Medical/Surgical	334
Neonatal Intensive Care Unit (NICU)	21
Nursery Bassinets	35
Obstetric	23
Pediatric	20
Pediatric Intensive Care Unit (PICU)	6
Psychiatric	24
Rehabilitation	57
<b>TOTAL</b>	<b>520</b>

### ADMISSIONS/VISITS

Total Adult	21,989
Births	2,173
NICU	180
Emergency Department Visits	74,822
Total Outpatient Clinic Visits	96,118
Total Surgical Visits	19,500

# Northwest Hospital

**N**orthwest Hospital, located in Randallstown, Md., carries out its vision to be the recognized leader in clinical quality and customer care in the northwest Baltimore metropolitan region. Northwest Hospital's strong philosophy of patient-centered care is evident from its friendly employee culture to its facility design. The hospital leads in surgical innovation, has outpatient services that are highly acclaimed by patients and is home to a state-of-the-art Emergency Department that expertly handles heavy volumes.

### Select Medical Services

- Center for Diabetic Limb Preservation
- Center for Hand and Upper Extremity Surgery
- Cosmetic Surgery Center
- ER-7 Emergency Center
- Herman & Walter Samuelson Breast Care Center
- Krieger Eye Institute
- Psychiatric Services
- Sleep Disorders Center
- Spine Center
- SurgiCenter (Ambulatory Surgery)
- Vascular Institute
- Women's Wellness Center
- Wound Care and Hyperbaric Oxygen Therapy (HBOT)



Pharmacist Ciera Quash discusses medication with a patient.

## By the NUMBERS

### BEDS

Medical/Surgical	222
Subacute Care	39
Psychiatric	23
<b>TOTAL</b>	<b>284</b>

### ADMISSIONS/VISITS

Emergency Department Visits	55,185
Outpatient Visits	54,770
Total Surgical Cases	8,063
Subacute Admissions	805



Christina Li, M.D., performs robotically assisted, minimally invasive surgery using the da Vinci® surgical system.

# Levindale Hospital

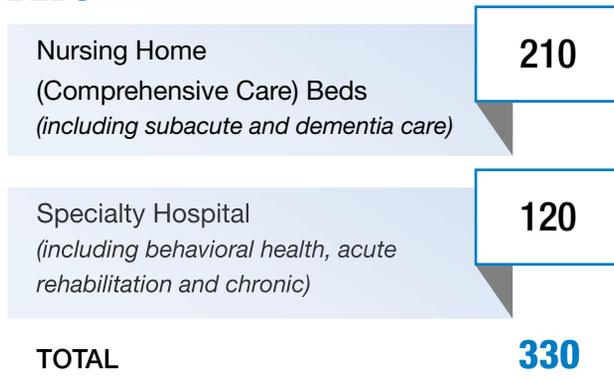
**L**evindale Hebrew Geriatric Center and Hospital has been carrying out its vision for nearly 125 years to provide quality health care and forward-looking programs for people who are elderly and disabled. It was the first facility in Maryland to implement the Eden Alternative program for elder care. This philosophy adds friendship, freedom and fun to the lives of residents and patients.

Gertrude Goldberg enjoys a visit with her son, Avrum Goldberg.



## By the NUMBERS

### BEDS

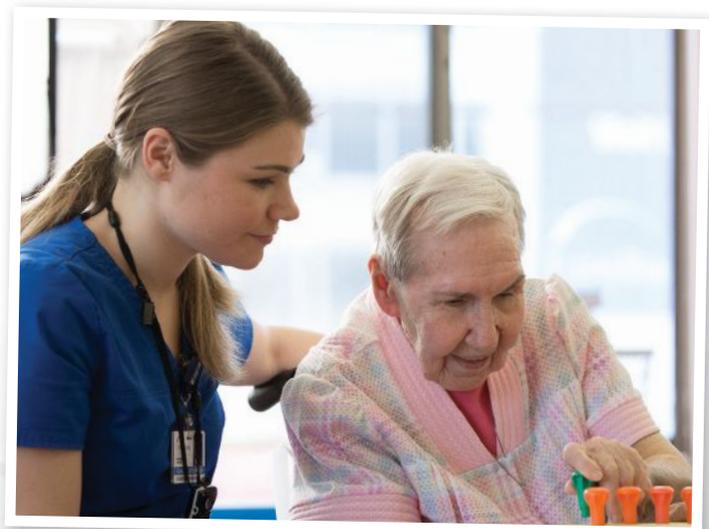


### OUTPATIENT BEHAVIORAL HEALTH SERVICES

Levindale Partial Hospitalization Program and Outpatient Services: Capacity



### ADMISSIONS



Sister Agnes McNally works with occupational therapist Claudia Stefanov.

# Carroll Hospital

**C**arroll Hospital is a nonprofit, acute care facility offering the latest in medical technology, experienced medical professionals in a variety of specialties, and a continuum of programs and services to meet the needs of the community. Over the past five decades, Carroll Hospital has evolved significantly from a community hospital to become a full-service medical center on par with larger urban hospitals. However, the hospital is still a tight-knit community where doctors, nurses and staff members care for their friends, neighbors and families.

### Select Medical Services

- Behavioral Health Services
- Cardiovascular Services
- Carroll Hospice
- Center for Breast Health
- Center for Wound Care and Hyperbaric Medicine
- Emergency Services
- Orthopedics & Sports Medicine
- Surgical Services
- Tevis Center for Wellness
- William E. Kahlert Regional Cancer Center
- Women's & Children's Services

Carroll Hospital's Community Nutrition Educator Melanie Berdyck gives cooking demonstrations using the mobile kitchen.



When Carroll Hospital's newly enhanced vascular lab opened in 2015, it was the first in Maryland and the mid-Atlantic to boast the Discovery IGS 740, a state-of-the-art imaging system that gives surgeons the ability to treat a much broader range of vascular diseases with far less invasive treatment options.



Cancer survivor Melissa Seabron and daughter Alyssia Harris share a smile at Carroll Hospital's fourth annual Cancer Survivors Day Celebration at the Carroll County Farm Museum.

## By the NUMBERS

### BEDS

Medical/Surgical	100
Special Care Nursery	25
Obstetric	20
Pediatric	7
Psychiatric	20
<b>TOTAL</b>	<b>172</b>

### ADMISSIONS/VISITS

Total	14,813*
Births	1,079
Emergency Department Visits	53,302
Outpatient Center Visits	24,488
Total Surgical Cases	7,676

\*Includes outpatient observations

# 2015 Community Health Needs Assessment: Results Show Substance Abuse, Heart Disease Among Key Priorities

**T**he next time someone asks you to take a survey, pause for a moment. That survey just might change your life. That's the potential of the Community Health Needs Assessment, a survey conducted every three years by LifeBridge Health to determine what steps need to be taken to improve the health of the communities and people it serves.

## A Boost in Responses

The 2015 survey — which ran from July to September of last year — was the second time the health care system conducted such an operation.

“It's a major boots-on-the-ground undertaking,” says Jacquetta Robinson, health ambassador. “We took surveys to community associations, churches, business associations, clinics. We sent outreach people to farmers markets and festivals and back-to-school nights. We were there to reach people wherever they were.”

The outreach paid off: More than 1,500 surveys were completed, five times the number of surveys that poured in from the first assessment in 2012. In addition, seven open forums were held, giving community members the opportunity to speak up publicly about their concerns.

## Survey Says

The results revealed seven key community priorities: drug and alcohol abuse, cancer, diabetes, violence, HIV/AIDS, heart disease and mental health. Although some communities ranked certain concerns higher — Sinai-area communities placed a higher priority on substance abuse, for example — the same seven issues consistently bubbled to the surface in every community surveyed.

“The results were very similar to those from our 2012 assessment, so our plan is to take the initiatives that we created from that and build on them,” says Livia Kessler, population health operations manager. “For example, we created Changing Hearts, our heart disease prevention program (see [page 16](#)), after the 2012 assessment. Now we're looking at how we can enhance it with more educational opportunities, more

preventive screenings and more ways for people to participate.”

“We want people to know that we are listening to them — that their voices are being heard,” adds Terrie Dashiell, community health improvement manager. “The decisions that we are making can have a life-changing effect on people, so it's important that we're giving every community member a seat at the discussion table.” ■

Jacquetta Robinson, Terrie Dashiell and Livia Kessler use community input to plan new programs.



Ryan Spence, a community health worker with Sinai Hospital's Healthy Families America program, meets with client Tiffany McClellan.



## The Promise of Population Health: Right Care, Right Place, Right Time

**L**ifeBridge Health is not a health system that treats illnesses alone. It takes a broad approach when it comes to the treatment, health and overall wellness of its patients and the surrounding community.

“The kind of initiatives we are focusing on — violence intervention, nutritional counseling — 10 years ago, hospitals weren’t doing these kinds of things, but now we do them every day,” says Jonathan Ringo, M.D., chief medical information officer and vice president of clinical integration. “We are here to take care of you in every way we can.”

The shift in care revolves around a concept called population health — an approach to health care that focuses on proactively improving the health of the entire community, rather than just treating patients when they are sick (see sidebar). LifeBridge Health created a population health department in 2014 to formally implement and track the success of the approach across its four hospitals and the greater community.

“With population health, health care is proactive rather than reactive, and value is placed on the quality of care rather than volume. It’s about the right care at the right place at the right time,” says Amy Perry, president of Sinai Hospital and executive vice president of LifeBridge Health.

### Collaborating for Better Outcomes

Yet, as Darleen Won, director of population health, points out, better care is something that can’t be achieved by our health system alone. It literally takes a village: “There are so many environmental and social factors that play a role in someone’s health. When you’re dealing with neighborhood violence or having trouble paying your electric bill, it’s hard to make taking care of your health a top priority,” says Won. “We’re working with a network of community partners, from Health Care for the Homeless to Park Heights Renaissance, to help people overcome these types of obstacles and ultimately make Baltimore a healthier place to work and live.”

Collaboration and partnership beyond the hospital walls are key elements of population health. “The patient is always at the center of care, and we ensure that with a full complement of services, both hospital- and community-based. When we combine resources and work together, we create better health outcomes,” says Won.

### Harnessing the Power of Technology

Powering all of this collaboration is a state-of-the-art electronic medical record (EMR) system that allows providers across the LifeBridge Health network to view and share information about an individual patient’s care.

“Banks, airlines — they all use some form of customer relationship management software, so that when any of their representatives come in contact with you, they know everything they need to know to best serve you. We’re doing the same thing here,” says Ringo. “It’s taking the best practices from other industries and applying them to health care.”

Now, LifeBridge Health is piloting a new software platform that will take its EMR system to the next level by giving providers the tools they need to proactively address patient health risks before they escalate. “Many times patients will miss opportunities for preventive care such as mammograms,” says Ringo. “This program will highlight care gap opportunities and allow physicians to address such needs at the time they are seeing patients.”

### The Signs of Success

Population health is a long-term investment. In the two years since the population health department’s inception, there have already been a number of notable victories. “We know that our early interventions are making a difference, and we are seeing positive changes in people’s behaviors,” says Won. “Our Diabetes Home Extender Program has already reduced unnecessary hospitalizations for participants by 65 percent (see **page 16**). But our goal is better long-term outcomes. Can we increase lifespans by 10 or even 15 years?”

“It’s clear that the current model of reimbursement is not sustainable over the long haul. And so, as a system, we are investing in the future,” says Ringo. ■

## The Population Health Approach

LifeBridge Health is working to proactively improve your health, and the health of the entire community, in three key ways:

- Making sure you get the right care at the right time
- Improving your access to preventive care, primary care and chronic disease management
- Supporting your overall health and wellness through education, outreach and social services



Darleen Won and Jonathan Ringo, M.D., are improving community health with population health initiatives.

*The shift in care revolves around a concept called population health — an approach to health care that focuses on proactively improving the health of the entire community, rather than just treating patients when they are sick.*

# Maryland Faith Health Network: Building Healthier Congregations Together



**O**n a recent Sunday, worshippers at Westminster United Methodist Church listened as church leaders shared a simple — but powerful — message:

Together, we can heal. Every aspect of the day's services — the hymns, the scripture readings, the sermon, even the bulletin — carried the same themes of community, health and wellness.

The services were part of the church's efforts to enroll congregants in the Maryland Faith Health Network, a two-year pilot program created by LifeBridge Health and the Maryland Citizen's Health Initiative. Modeled after a similar program in Memphis, Tenn., the network establishes a formal partnership between LifeBridge Health hospitals, local places of worship and their congregants. The Memphis model has shown tremendous improvement in health outcomes for participating members as compared with other patients, results the Maryland network hopes to replicate.

## How the Network Works

Worshippers who enroll in the Maryland Faith Health Network are issued a network identification card. In the event of a hospitalization, the card alerts a hospital navigator to notify the patient's faith liaisons — volunteers from the patient's congregation who are specially trained. (The notifications are not automatic; the patient must consent and can specify how much information should be shared with the liaison.)

“With the network,” says the Rev. Domanic A. Smith, LifeBridge Health's coordinator of community pastoral outreach and network leader at Sinai Hospital, “both faith and health work in concert for the greater good of the patient. The liaisons from congregations assess the patient's needs and coordinate efforts with their congregation members, who might provide things like transportation, or prescription delivery or meals to their homes, and the community pastoral outreach and health navigators are always there to help.”

“Because of patient privacy laws, it's traditionally been very difficult to know when someone in our congregation is in the

LifeBridge Health's Rev. Domanic Smith and Pam Phillips, R.N., both work with the Maryland Faith Health Network.



Rev. Shari McCourt is the pastor of the Westminster United Methodist Church.



Rev. Dr. Cleveland Mason of Perkins Square Baptist Church and Rev. Domanic Smith discuss the new partnership.

hospital,” says Rev. Shari McCourt, pastor of Westminster United Methodist Church. “It’s heartbreaking to find out one of your parishioners has been through a health crisis and you weren’t there to provide support because you didn’t know. This network gives us the chance to be there when we’re needed.”

Beth Philipson, the congregational nurse for Pikesville’s Temple Oheb Shalom, agrees: “Oftentimes, members of our congregation don’t reach out to us until things get truly critical. They may not think to call or they worry that they’re bothering us. My hope is that now we’ll be able to help people sooner.”

Faith leaders also see the network as a way to touch more lives. “It gives us the opportunity to develop a relationship with the minimal attendees — the people who don’t show up every Sunday. Those are the people who fall through the cracks the most,” explains Rev. Dellyne Hinton, pastor at Gwynn Oak United Methodist Church. “It lets us move outside of the walls of our church and become a true community church.”

In turn, the network gives LifeBridge Health more opportunities to reach community members before they get to a hospital-worthy health crisis. “Once we form an alliance with a place of worship, it becomes another avenue for us to spread the message of prevention,” says Phillips. “We may be able to host a nutrition class in their community room, or offer blood pressure screenings at their festival. It becomes a win-win situation for everyone.”

“Oftentimes, members of our congregation don’t reach out to us until things get truly critical. They may not think to call or they worry that they’re bothering us. My hope is that now we’ll be able to help people sooner.”

— Beth Philipson, congregational nurse for Temple Oheb Shalom

### A Welcome Addition

It hasn’t taken long for local faith communities to embrace the fledgling network. Nearly 100 places of worship signed on within the first 30 days of the network’s launch. At Westminster United Methodist Church alone, one-third of its average Sunday attendance enrolled in the first three days of their church-wide launch. “People were really excited when we introduced it at Sunday service. They were saying, ‘This is exactly what we needed. Here’s my enrollment form. I filled it out during your sermon but I was still listening!’” McCourt says with a laugh.

Hospital leaders hope that this enthusiasm will inspire others. “The whole state of Maryland is observing our progress,” says Smith. “Our hope is that, after the two-year pilot period, this can go statewide. Other hospitals will see what we’re doing and it will take off.” ■

After suffering a gunshot wound to the head, Michael Holden is thriving. He is an environmental services intern with the Sinai Vocational Services Program.



## Breaking the Cycle of Violence: Programs Help Community Members Find a Way Out

**T**he survival rate of a gunshot wound to the head is just 5 percent. Of the few who do survive, only about half fully recover. So 23-year-old Michael Holden knows he's been doubly blessed. It's an opportunity he doesn't want to waste.

The Park Heights resident was shot in the head last December walking home from his neighborhood corner store — an innocent bystander caught in the crossfire of a street fight. Recovering at Sinai Hospital — a recovery that he admits “shocked” doctors — Holden was visited by a community outreach violence intervention specialist with the hospital's Kujichagulia (Kuji) Center. Holden was immediately intrigued by what was offered: free workforce readiness training with the

opportunity to earn a paid internship at the hospital. In January, he began his training at the Kuji Center. The center's name comes from the Swahili word for “self-determination.”

“I was there four hours a day, five days a week. We'd learn about things like how to go through an interview and how to act professionally when you're on the job,” says Holden. “It made me feel good to have something to do every day, knowing I was learning something that would move me forward.”

### Providing the 'How'

Dedicated to males ages 18 to 25 who live in the 21215 ZIP code, the Kuji Center provides participants with virtually whatever they need to move forward and break the cycle of violence,

whether it's assistance getting a GED, help setting up a checking account, drug counseling or even support at court appearances.

"For a lot of these guys, becoming a victim of street violence is a moment of clarity. They have to decide: Am I going to continue to do this? But they don't know how to get out of it," says Ademola Ekulona, program director of the Kuji Center. "We provide them the guidance — the 'how.' We have young men who could easily wind up in the morgue or in jail, but we give them something different to do. That's huge for them."

Sinai Hospital and the Kuji Center also

*Sinai Hospital has been a model for violence intervention and prevention since 1996, when it became one of just three Maryland hospitals to develop a pilot program for hospital-based domestic violence intervention.*



Ademola Ekulona and Garrick Williams, youth outreach specialists, work to break the cycle of violence for young men in the Park Heights community.

work in close partnership with the lower Park Heights branch of Safe Streets, a public health campaign whereby trusted community members work to directly intervene with street-level disputes before they escalate to violence.

"We maintain constant contact with our Safe Streets guys, finding out what's the latest dispute, who's involved and is there anything we can do to help," says Ekulona. "We hope to expand the program all the way up to Belvedere Avenue, because it's the best Safe Streets operation in the city."

## A Pioneer in Violence Intervention and Prevention

The success of the Safe Streets partnership is not surprising; Sinai Hospital has been a model for violence intervention and prevention since 1996, when it became one of just three Maryland hospitals to develop a pilot program for hospital-based domestic violence intervention. The program — now known as the Family Violence Program at Sinai and the Domestic Violence (DOVE) Program at Northwest — today provides 24/7 crisis intervention as well as ongoing support groups, education and services coordination for victims of domestic and intimate partner violence.

LifeBridge Health is also the first and only health care system to partner with CHANA's Stop Abuse of Elders (SAFE) Project. Under the partnership, Levindale provides free temporary shelter for victims of elder abuse in the event that they can't safely return home.



**Beth Huber**  
Manager of M. Peter Moser Community Initiatives, Sinai Hospital

"It's important to pay attention to violence — all forms of violence — as a health issue," says Beth Huber, manager of the M. Peter Moser Community Initiatives at Sinai. "The trauma of violence has a huge impact on a person's overall well-being. We know that people exposed to violence have an increased likelihood for a number of conditions, from hypertension to ulcers to lung disease. You can connect the dots back to violence."

Holden, for one, is eager to prove he will not be a statistic. After graduating from the Kuji Center's workforce readiness program, he was accepted into the Sinai Vocational Services Program as an environmental services intern, a move that he hopes will turn into a career in health care. "I had always thought about working in the hospital before this," Holden reflects, "because whenever they save somebody, I think that's an awesome thing." As it turns out, there are many ways to be saved. ■

# Taking Control of Your Health:

## New Programs Help Participants Fight Back Against Chronic Conditions



The Changing Hearts program taught Rev. Marlon Tilghman a lot of healthy eating tips, such as how to grocery shop smarter.

**W**hen Rev. Marlon Tilghman goes to the grocery store, he walks in with a clear plan of attack: “Shop only around the periphery of the store,” he explains. “That’s where you find the healthy foods — and how you avoid all the processed foods.”

Smarter grocery shopping is one of the many life-changing lessons the 50-year-old Gwynn Oak resident learned after enrolling in Changing Hearts, a free, six-month LifeBridge Health program aimed at helping community members prevent heart disease. The program includes quarterly home visits with a registered nurse or community health associate and monthly educational workshops on topics like heart-healthy eating and exercise habits. Detailed health assessments and lab work are performed at the start and end of the program to track each participant’s progress.

“The goal is to plant the seeds for change,” says Changing Hearts community health worker Marsha Green. “If you’ve been used to eating a certain way for 20 years, it’s hard to switch that off cold turkey. The program is designed to help you slowly adjust.”

Working with Terrie Dashiell, R.N., LifeBridge Health’s community health improvement manager, also helped clear up many health misconceptions for Tilghman. “I always thought frozen

For more information on Changing Hearts, call **410-701-4497**. To learn more about the Diabetes Medical Home Extender Program, call **410-601-9376**.

Healthy Choice meals were good for you because of how they're marketed. But Terrie showed me how much sodium is really in them," he says. "I learned how to really read food labels, which has become vital to me."



**Michelle Gourdine, M.D.**  
*Medical Director,  
Sinai Community  
Care*

### A Growing Need

Since its 2013 launch, Changing Hearts has graduated 76 participants, including Tilghman, who saw a healthy drop in his cholesterol levels in his final assessment. Now, LifeBridge Health is growing its roster of programs to

help more community members like Tilghman reduce their risk for chronic disease or, in many cases, manage the chronic diseases they already have.

"Chronic diseases are now the leading cause of death in the U.S.," says Michelle Gourdine, M.D., medical director of Sinai Community Care, a community-based primary care clinic located at Sinai that provides internal medicine, pediatric and OB/GYN services. "But we know now that there are many things we can do to change course. For example, if we can identify people who are prediabetic and help them take steps to a healthier weight and a more nutritious diet, we may be able to prevent them from ever progressing to diabetes."

### Hands-On Support

One of the newest additions to LifeBridge Health's roster is LifeLink, a 24/7 clinical call center where trained nurses connect with chronic disease patients (and vice versa) to make sure they receive proper follow-up care after a hospital stay.

"We want to make sure: Do you understand your discharge instructions? Do you have a primary care physician? Are you taking your prescriptions?" explains Livia Kessler, population health operations manager. "The goal is to continually communicate and collaborate with these patients to keep them on the healthy track."

LifeLink was inspired, in part, by the success of the Diabetes Medical Home Extender Program, another recent addition that provides home-based support to patients living with diabetes-related health complications. Community health workers and nurses make regular home visits to participants to help them develop personalized plans



**Marsha Green** teaches community members how to prevent heart disease with exercise and nutrition.

## What Is a Chronic Condition?

Chronic conditions are diseases that last one year or more and require ongoing medical attention or that limit activities of daily living. They include type 2 diabetes, heart disease and stroke, and chronic obstructive pulmonary disease (COPD). Obesity, tobacco use and poor nutrition are common risk factors for these conditions.

of care, educate them about self-care basics like performing glucose checks, and make sure they have the resources they need — such as transportation and insurance — to stick to their treatment plan. Early data shows that hospitalizations have decreased and overall health and well-being are improving among participants.

Tilghman attributes the success of these chronic disease programs to LifeBridge Health's focus on meeting community members where they are, whether it's in their homes, at community centers or even at work.

"Terrie would often meet me at church for our Changing Hearts sessions," says Tilghman, who served as head pastor of Milford Mill United Methodist Church, before moving to Ames United Methodist Church this summer. "On any given day, something could happen to a parishioner that would alter my schedule. But she was always flexible to make sure I succeeded. The education she gave me was priceless. It will take me a long way." ■



Paulette Turner, R.N., helped Renee Brown Smith avoid continuing visits to the ED by coordinating her care.

# Emergency Department Navigation: Helping Familiar Faces Stay Healthy and Out of the Hospital



**David Baker, Dr.P.H.**  
*Director of  
Ambulatory Quality,  
LifeBridge Health*

**N**o one wants to go to the Emergency Department (ED). It is, by definition, the destination for the sickest of the sick, the place where frightening life-or-death scenarios, like heart attacks and car accident injuries, play out with an all-hands-on-deck urgency.

But for some, the ED is an all-too-familiar place. Classified by the health care industry as “frequent users,” these patients visit the ED many times a month. Some may check in two or three

times in the same week. Often, they are struggling with social issues that impact the quality of their health.

“If you’re homeless or don’t have the money for prescriptions or don’t have transportation to a doctor, you can’t stay on top of your diabetes, congestive heart failure or other problems,” explains David Baker, Dr.P.H., director of ambulatory quality at LifeBridge Health. “Your health issues escalate, so you have to keep coming back to the ED. But the ED isn’t designed to

deliver the sustained, long-term care you really need.”

### Embedding Care Coordinators in the ED

In 2014, Baker and his team partnered with HealthCare Access Maryland (HCAM) — a nonprofit agency that specializes in addressing the social challenges that affect our health — to discover if there was a better way to care for these patients. Together, they created the ED Navigation program at Sinai Hospital, a free service that partnered frequent ED users with an HCAM care coordinator who was embedded in the ER-7 at Sinai.

The program was such a success that Sinai’s population health department spearheaded an initiative to expand it to Northwest Hospital, where Northwest nurse Paulette Turner, R.N., became its sole ED care coordinator. Soon, a three-way collaboration among HCAM and the population health and ambulatory quality departments served to expand the program, which continues to flourish, supported by ongoing partnerships.

“As an ED care coordinator, my job is to connect my clients to resources that are applicable to them in their community,” says Turner. “I can set a patient up with a primary care physician and schedule his follow-up appointments before he is out the door.”

Turner also helps clients get insurance. She assists with obtaining medication. If transportation is an issue, she can provide bus tokens or even cab fare. She makes reminder calls in the morning and follow-up calls at night. Through a partnership with Chase Brexton, she can even help her clients get dental care or visit an OB/GYN, as well as see counselors for family practice, behavioral health and substance abuse. She also educates patients and families about diseases such as congestive heart failure, diabetes and hypertension.

“It’s a voluntary program,” Baker says. “It’s up to patients if they want to take part. The key is to have ‘warm handoffs’ to build a trusted relationship between patients and care coordinators — to

“The key is to have ‘warm handoffs’ to build a trusted relationship between patients and care coordinators — to know that they have someone looking out for them in the ED and after.”

— David Baker, Dr.P.H., director of ambulatory quality

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### Success Stories

To date, the ED Navigation program has enrolled 450 clients. Of these, 25 percent have signed up for insurance. Half have been connected to a primary care provider. Estimates show a 64 percent reduction in ED visits among at-risk clients and the avoidance of nearly \$632,000 in health care costs. But the greatest successes are the personal, one-on-one victories the care coordinators share with their clients.

“I have a client who was diagnosed with sickle cell anemia. I worked with him, the emergency room physician, a care manager and a social worker to create a care plan that he could follow,” says Turner. “Before that, he was in the ED every week. He’s now gone six weeks without a trip to the ED.”

For client Renee Brown Smith, victory has been a family affair. Diagnosed with a neurogenic bladder, Smith was living with an indwelling

catheter that left her prone to infection. Between multiple urinary tract infections and a two-time battle with septic shock, she was making weekly trips to the Northwest ER-7. When Turner saw this, she acted quickly, calling Smith’s urologist to discuss Smith’s situation. She then made an appointment for Smith to see her doctor to discuss the possibility of surgery to prevent further infections.

“Paulette became our voice, navigating between all the doctors and surgeons we were dealing with,” says Andrea Brown, Smith’s daughter. “She also put us in contact with people who could help my mom find an assisted living home and home care nurses — options we didn’t have before, but do now, thanks to Paulette.”

“These are all people who, without this program, would have continued on in poor health,” adds Baker. “But, step-by-step, they are achieving a better quality of life. They are proof that this approach is really valuable, and needed.” ■



The ED navigation program at LifeBridge Health is a free service that partners frequent ED users with a care coordinator who is embedded in the ER-7 at Sinai or Northwest hospitals.

# Supporting New Moms:

## Sinai Hospital's Perinatal Services Help Families Get Off to a Healthy Start

**F**or new mom Erica Chesnik, postpartum depression was not something she was prepared for. "Things are so much more challenging and difficult with a newborn than I ever anticipated," she says.

Chesnik turned to Sinai Hospital's Perinatal Depression and Anxiety Outreach program, a free service that offers mental health screenings, referrals, support groups and more to new moms.

### You're Not the Only One

"About one in seven mothers will experience some kind of mood or anxiety disorder during or after pregnancy," explains social worker Sara Daly, who leads the program. "That number jumps significantly when you add in risk factors like poverty, NICU admission and lack of access to mental health and prenatal care. This program is the only one of its kind in the Baltimore area that's free, so people come from all over." Daly adds that the program served an estimated 500 mothers last year alone.

"From my first support group meeting, I felt a world of relief," Chesnik says. "I was able to connect with moms going through the same challenges. It makes you realize you're not alone."

### Teaching Positive Parenting

Reassuring moms that they're not alone is also the mission of Healthy Families America, a perinatal home visiting service offered by Sinai Hospital in



New mom Erica Chesnik found supportive connections through the Perinatal Depression and Anxiety Outreach program.

partnership with the Family League of Baltimore. The program works one-on-one with new moms for the first three years of their child's life to teach positive parenting skills and to connect participants to the resources they need to best care for their little ones.

"Much of the program is about education," says Beth Huber, manager of M. Peter Moser Community Initiatives at Sinai Hospital. "A mom might think, 'My baby is going to be potty-trained by his first birthday,' and then have a very negative reaction when that doesn't happen. We get rid of all the misinformation in a very supportive way."

"We want new moms to understand that this life they are raising hears everything that they say, learns from everything that they do and needs



Stephanie Cockrell of Healthy Families America and Sara Daly of the Perinatal Depression and Anxiety Outreach Program provide new moms with support and education.

everything that they provide," says Stephanie Cockrell, the program's supervisor.

"It's worth more than money to watch a mom and baby grow together." ■

For more information on Healthy Families America, call 410-601-5047. To learn more about the Perinatal Depression and Anxiety Outreach program, call 410-601-7832.



Keri Bennett of the Aging in Place program at Sinai Hospital helped Frances Epps stay in her home with necessary improvements.

of home life, from getting out of the bathtub to walking up stairs.

### Assistance with Improvements

She found help in the form of LifeBridge Health's Aging in Place program, a collaboration between Sinai Hospital, Comprehensive Housing Assistance, Inc., and the Housing Upgrades to Benefit Seniors initiative that helps eligible seniors get the home improvements they need to stay in their homes as long — and as safely — as possible.

The program serves the entire northwest sector of Baltimore, an area that brings a diverse set of challenges. "We know that life expectancy north of Northern Parkway is 75 to 83. Yet south of Northern Parkway, it's only 62 to 66," explains Israel Patoka, LifeBridge Health's director of community development. "We are working to identify what's working in the northern region of our community in terms of housing, so that we can replicate it south."

### Making an Impact

The team has zeroed in on three factors that are making a difference — home safety and rehabilitation, energy efficiency, and weatherization — and has tailored its services as such. "We're helping clients get critical improvements — a new roof, new floors, a wheelchair ramp — big projects," says social worker Keri Bennett. "We're also looking at ways to get their bills down while keeping their homes warm in the winter and cool in the summer."

Bennett worked directly with Epps to evaluate her home and create a plan of action. Within eight weeks, Epps had new safety rails at the entrance to her home and a new grab bar in her bathtub. Epps, who is an active volunteer at her church, was immediately grateful. "Keri handled everything — all the paperwork — for me. She was so caring and understanding of how much this place means to me," says Epps. "I want to stay here until God calls me home." ■

## Aging in Place: Helping Seniors Stay Safely in Their Homes



**Israel Patoka**  
Director of  
Community  
Development,  
LifeBridge Health

**F**rances Epps' parents bought the Park Heights house she calls home when she was just 18. Now it's hers — and it's something she holds close to her heart. "I really want to keep it in the family," the 67-year-old says. "I have grandchildren and great-grandchildren I want to pass it on to."

But a degenerative disc disease diagnosis in 2008 threatened to derail Epps' dream. Living alone and forced to walk with a cane, she began having increasing trouble with the simple realities

# Meet Our Partners

**Safe Streets** seeks to reduce violence by addressing the needs of at-risk youth. By linking participants and their families to educational opportunities, employment training and assistance, mental health services and substance abuse treatment, outreach workers help to provide individuals with options besides a life of crime and violence. <http://health.baltimorecity.gov/safestreets>

**Park Heights Renaissance** is working to shape a better future in Park Heights. Its community-based plan seeks to create a thriving and sustainable community with land, economic and human development, including a massive redevelopment in the Park Heights community. [www.boldnewheights.org](http://www.boldnewheights.org)

**HealthCare Access Maryland** is making Maryland healthier by connecting residents to insurance and care, educating the community about healthier living, and advocating a more equitable health care system. [www.healthcareaccessmaryland.org](http://www.healthcareaccessmaryland.org)

The **Associated Jewish Community Federation of Baltimore** is Baltimore's central Jewish communal organization that effectively convenes and supports a network of people and programs to respond to the present and build for the future, inspired by Jewish values. [www.associated.org/home](http://www.associated.org/home)



**CHAI (Comprehensive Housing Assistance, Inc.)** works to develop and support thriving, stable communities in neighborhoods with a substantial Jewish population through housing services and loans, community development and senior services. [www.chaibaltimore.org](http://www.chaibaltimore.org)



## Baltimore Child Abuse Center

The mission of the **Baltimore Child Abuse Center** is to provide victims of child sexual abuse, trauma and other adverse childhood experiences in Baltimore and their non-offending caretakers with comprehensive forensic interviews, medical treatment and mental health treatment with a goal of preventing future trauma. [www.bcaci.org](http://www.bcaci.org)



**The Partnership for a Healthier Carroll County Inc.** strives to build the capacity of individuals and organizations to improve the health and quality of life in Carroll County, Md. Its community health improvement areas are prevention and intervention, behavioral health, access to health care and elder health. [www.healthycarroll.org](http://www.healthycarroll.org)

**The Park Heights Community Health Alliance (PHCHA)** seeks to collaborate in the improvement of the health of Baltimore's Park Heights community through health and wellness initiatives, environmentalism, community education and service. [www.phcha.org](http://www.phcha.org)



Chase Brexton has partnered with Northwest Hospital to offer primary care and other services to prevent future hospital stays.

**Chase Brexton Health Service**, founded in 1978, has been committed to providing individualized care that respects and empowers patients of all ages, races, gender identities, religions, sexual orientations, ethnicities and socioeconomic statuses. [www.chasebrexton.org](http://www.chasebrexton.org)



## MARYLAND CITIZENS' HEALTH INITIATIVE

Established in 1999, the **Maryland Health Care for All!** Coalition seeks to educate Marylanders about feasible and effective ways to expand access to quality affordable health insurance for all residents of our state. [www.healthcareforall.com/about](http://www.healthcareforall.com/about)

For a full list of our community partners, visit [www.lifebridgehealth.org/main/communitypartners.aspx](http://www.lifebridgehealth.org/main/communitypartners.aspx)



# Calendar of Events

**T**he LifeBridge Health online community calendar has lots of information about upcoming events, screenings and support group meetings. Most of them are free and feature LifeBridge Health community health advocates, physicians and other experts. Come learn something new about health and wellness. Here are a few highlights from our calendar. Visit [www.lifebridgehealth.org/communityevents](http://www.lifebridgehealth.org/communityevents) for event descriptions, dates, times and locations.

## Life Happens Series in Howard County

Are you prepared for the future? It can be hard to discuss what happens when you or a family member needs skilled nursing care or passes away, but taking time to explore and make decisions about these issues now will make it easier for you and your loved ones. Join us for Life Happens, a free four-week series to be held from 7 - 8:30 p.m. on Sept. 6, 13, 20 and 27 in Howard County. Call **410-601-WELL (9355)** to register.

## JUST TRYAN IT's Inaugural Baltimore Kids' Triathlon

JUST **TRYAN** IT will host its first ever kids' triathlon in Baltimore at Park School on Sept. 11 at 9 a.m. Kids ages six to 14 can swim, bike and run in a real triathlon. JUST **TRYAN** IT supports families who are fighting childhood cancer. Funds raised will benefit families served by the Herman & Walter Samuelson Children's Hospital at Sinai. Register at [www.justtryanit.com](http://www.justtryanit.com).

## Race for Our Kids

Join us on Sunday, Sept. 18 for the 12th annual Race for Our Kids, to benefit the Herman & Walter Samuelson Children's Hospital at Sinai. This family-friendly event includes a 5K, 10K and 1 Mile Family Fun Walk. Register at [www.raceforourkids.org](http://www.raceforourkids.org).

## Save-a-Limb Fund Fest

The 11th Annual Save-A-Limb Fund Fest will take place on Saturday, Sept. 24 at Oregon Ridge in Hunt Valley. There will be three different bike routes and a one-mile walk, along with a picnic and festival. All proceeds benefit the Save-A-Limb Fund, which supports patients at the Rubin Institute for Advanced Orthopedics with complex limb and joint disorders. For more information, visit [www.savealimb.org](http://www.savealimb.org).

## Outpatient Pharmacy Services at LifeBridge Health



### Sinai Hospital

Free 30-minute parking!

410-601-7100

### Northwest Hospital

Free parking!

410-701-4455

[www.lifebridgehealth.org/outpatientpharmacy](http://www.lifebridgehealth.org/outpatientpharmacy)

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*Medications conveniently delivered to your home*

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Pharmacy at Sinai Hospital and Northwest Hospital



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ABOUT LONG-TERM CARE