



FALL 2014

Ahead of the Curve: Collaboration for Better Patient Care

Protect Yourself from PVD

Fast-Track Recovery After Joint Replacement Surgery PAGE 6 >> ASK THE DOCTOR! YOUR HEALTHCARE QUESTIONS ANSWERED SEE PAGE 5

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### share their thoughts about why volunteering

### **OUR BOARD MEMBERS**

# MAKING Positive Progress

s 2014 comes to a close, we reflect on both the successes and challenges of HealthAlliance to determine how we can continue to develop and improve our organization in the coming year. Through the ever-changing healthcare environment, our positive progress is irrefutable.

The community's input—your input—is important to us. That's why our Board of Directors is a team of diverse and highly recognized community members. They come from a multitude of backgrounds and occupations, including a jeweler, professor, physicians, real estate agents, attorneys and more. These volunteers are your local business owners, neighbors and friends, and they invest significant time to ensure HealthAlliance continues to fulfill our mission of providing the highest quality healthcare services to all people in our community.

When it comes to the healthcare needs of the community, HealthAlliance board members work hard to assess what you need and then integrate those priorities into the HealthAlliance system to ensure we can deliver. They are dedicated to advancing our services and shaping our future by governing HealthAlliance strategies that go above and beyond day-to-day operations. Our board members work closely with our medical staff and administrators to continuously improve access to HealthAlliance services.

We are fortunate to have such an impassioned, quality group to serve as our Board of Directors. Their insight and leadership are invaluable and help to make us the community landmark that we are today.

Community engagement continues to be a top priority at HealthAlliance. As part of our redesign endeavors, we're joining with organizations, other healthcare providers and physicians in efforts to help keep the community healthy and, when appropriate, out of the hospital. You can read more about HealthAlliance's new and established partnerships on Page 8.

Please join us, our board, our physicians and our community partners as we work to lower costs and improve the patient experience and quality of care. Our number one priority is you. Sincerely,

David Scorp

David Scarpino President and CEO





### Martin Cascio, M.D.

President of the HealthAlliance medical staff Physician, American Anesthesiology of New York

"As President of the medical staff, I am proud to serve on the HAHV Board and allow the feelings and ideas of the medical staff to be heard by the board while providing outstanding medical care in the community."

**Richard B. Mathews** Chairman, Ulster County Legislature (1981-86) Ulster County Commissioner of Jurors (1997-2010) Port Ewen

"I want to help make sure the people of the region have quality healthcare."

#### Thomas Jacobi

Owner, Schneider's Jewelers Kingston

"I feel healthcare is vital to the needs, growth and success of our area."



Howard Berliner, Sc.D. Professor, State University of New York (SUNY) Halcottsville

"Every town needs a source of healthcare and Margaretville Hospital has been mine for the 25 years I have had a home in Halcottsville. It was an honor and a privilege to be selected to join the board and lend my expertise in health policy to its decision making. I am just as pleased to work with the management and board of HealthAlliance to continue to bring high quality healthcare to the larger Hudson Valley community."



Mark Josefski, M.D. Vice President, HealthAlliance medical staff President, New York State Academy of Family Physicians Physician, The Institute for Family Health

"Input from the medical staff is essential to the seamless delivery of healthcare, and as the Vice President of medical staff I'm happy to provide that perspective to the Board of Directors to make HealthAlliance the best it can be."



**Thomas Collins** President, Commercial Associates Realty Inc. Woodstock

"Every community deserves quality healthcare with citizen involvement to ensure that outcome."

> Certified Public Accountant (retired) Kingston

"Quality healthcare is important to the physical health of a community as well as its economic health. I want to be a part of making our community better from both perspectives."

### on the HAHV Board is important to them.

#### Ellis Lader, M.D. Physician, Mid-Valley Cardiology

Hurley "HealthAlliance is a wonderful community asset

-we need to keep healthcare local and at its best."

#### Kevin M. Ryan

President/CEO, The Valley Group Inc. Kingston

"It is an honor and privilege to be part of shaping the delivery of healthcare in the communities we serve. I am continuing a commitment my family made 100 years ago to ensure that there is the highest quality of healthcare provided to the community for generations to follow. As our system seeks an affiliate relationship with a larger partner, it is more important than ever to be vigilant and thoughtful as we deliberate and decide what the next 100 years will look like."

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#### **Stephanie Murphy**

Certified Public Accountant Accounting Professor, Culinary Institute of America Highland

"As part of the human race, each of us has a responsibility to care for ourselves, families and communities. Our emotional, physical and spiritual health is essential to our well-being. It is imperative that access to affordable healthcare is available to all individuals, and I'm willing to donate my time, talents and energy to an organization that consistently endeavors to provide quality healthcare to our community."

#### **Craig Sickler**

Certified Public Accountant/Partner Sickler, Torchia, Allen and Churchill Kingston

"As a life-long member of this community, and with a family to care for as the father of three small children, it is extremely important to me that local, quality healthcare is available in the Hudson Valley now, and to my children's children. I want our community to have easy access to healthcare providers who can respond effectively and efficiently to whatever health problems may arise."

> Eugene Heslin, M.D. Physician, Bridge Street Medical Assoc. Kingston

"As a physician, I work throughout New York state on healthcare delivery projects. I am proud to volunteer on the HAHV Board to use all my skills to improve local healthcare delivery."

Kevin R. Bryant, Esq. Attorney, Law Office of Kevin Bryant Kingston

"Our access to quality healthcare for our community is extremely important. Serving on the HAHV Board has allowed me the opportunity to gain a better understanding of the issues we face. It allows me to observe and contribute with committed, intelligent and respected communityminded individuals. It is an honor."

### Albert Spada (retired) Kingston

"Health services are very important to the community and state."

Nancy S. Davenport, Esq. Vice President, Government Relations, MetLife Kingston

"It is important to give back to the community, which has given so much to my family. Also critical is that we not shy away from volunteering in a challenging and rapidly changing healthcare environment."

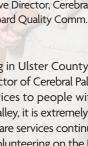
**Carol G. Crews** Medical Practice Manager (retired) Port Ewen

"Healthcare is vital to every individual in our community and certainly important to me, personally and professionally. I have devoted over 20 years of volunteer service to this end."

#### Pamela Carroad

Former Executive Director, Cerebral Palsy, Ulster County Chair, HAHV Board Quality Comm. Walden

"After working in Ulster County for many years as Executive Director of Cerebral Palsy of Ulster County providing services to people with disabilities in the Hudson Valley, it is extremely important to me to ensure healthcare services continue to be available to ALL people. Volunteering on the HAHV Board has been an extremely rewarding and challenging experience. It has continued to provide me with an opportunity to 'give back' to the community and continue to improve the quality of life for everyone in the community."



# Protect Yourself from PVD

therosclerosis—narrowed or clogged arteries—is typically associated with coronary artery disease. But the condition can affect any of the arteries in your body, not just the arteries that feed your heart. When the blood vessels in your neck, brain, arms, abdomen or legs become blocked or narrowed from plaque buildup, the disease is known as peripheral vascular disease (PVD), which affects 8 million Americans.

"PVD is an underdiagnosed problem in the U.S.," says Jeffrey Hnath, M.D., a board-certified vascular surgeon with HealthAlliance of the Hudson Valley. Pain in your calves when you're walking is a common symptom. "It hurts because the muscles in your legs can't get the blood they need to function," Dr. Hnath says. The pain may stop as soon as you sit down. But over time, as the arterial blockage worsens, it may linger after you've stopped exercising. "You may also notice pain or numbness in your feet when you're trying to sleep," Dr. Hnath says.

If left untreated, PVD can cause foot ulcers and gangrene and eventually lead to amputation. People with PVD are also at increased risk for heart problems. "There's a correlation between PVD and coronary artery disease," Dr. Hnath says.

#### **DIAGNOSING PVD**

It's common to blame PVD symptoms on spine problems or even old age, Dr. Hnath says, but it's best to heed symptoms and seek prompt medical care. The Center for Vascular Excellence at HealthAlliance offers a wide range of leadingedge, minimally invasive diagnostic tests and treatment approaches for PVD, including:

**Pulse volume recording (PVR).** A PVR study uses blood-pressure cuffs and a hand-held ultrasound device to obtain information about blood flow in the arteries of the arms and legs, to determine if or where vessels may be blocked.

**Vascular and venous ultrasound**, which uses high-frequency sound waves to create an image of blood vessels, including arteries and veins.

**CT scans and diagnostic angiography**, which use X-rays and computers to create detailed images of the arteries, vessels and the blood flow within them.

The simplest and most effective way to test for PVD is a physical exam of your feet, to check for any wounds that aren't healing promptly or for gangrene. "A lot of people don't look at their feet or can't see or feel the bottoms of their feet to know if they have a wound, especially if they have diabetes," Dr. Hnath says. "Taking a sock off can save a leg."

### SAME-DAY TREATMENT

PVD may be treated with balloon angioplasty, in which a small balloon is placed and inflated inside a narrowed blood vessel. The balloon helps to widen the vessel to improve blood flow. After widening the vessel with angioplasty, your vascular surgeon may insert a stent—tiny metal mesh tubes that support your artery walls to keep your vessels wide open. Atherectomy, a procedure to remove plaque from inside a blood vessel, is another alternative. "Treatment typically provides instantaneous relief, and patients go home the same day," Dr. Hnath says.

### Jeffrey Hnath, M.D. Could You Have PVD?

Smokers or people with diabetes, hypertension and high cholesterol are at risk for PVD. To prevent PVD, stop smoking, monitor your cholesterol and blood pressure and manage your diabetes appropriately. For more information about PVD or to make an appointment, call **845-334-4709**.

### Zoe Weinstein, M.D.

**General Surgery, Board Certified** 



### Q: Are all lumps or suspicious spots on a mammogram cancer?

**A:** If you have felt a breast mass or lump or been notified that a mammogram found a suspicious area or calcifications in your breast, you are not alone. Many women can have these scary experiences during annual screenings by a healthcare provider, breast self-exam or mammogram. Most of these changes are benign—meaning they aren't cancer.

The most common benign findings are associated with fibrocystic change, which can cause breast lumps or abnormalities on a mammogram associated with nodules and calcifications.

After a mammogram, your physician may be able to determine with other tests, such as breast ultrasound or magnetic resonance imaging, if a mass or abnormality is benign. Occasionally, a biopsy or tissue sample has to be taken from the breast to make a definite diagnosis.

Some benign changes seen under the microscope are associated with an increased risk of breast cancer. Examples are lobular carcinoma in situ and atypical ductal hyperplasia.

Even though most abnormalities detected with mammography are not cancerous, that does not mean you don't need a yearly mammogram. Mammography is still the most important tool for picking up breast cancer early. Early breast cancer diagnosis can make treatment easier and possibly eliminate the need for additional treatment, such as chemotherapy.

The benefits and limitations of mammography vary from patient to patient and are based on factors like age, breast and other cancers among close family members, hormone exposure and obesity after menopause. The American Cancer Society and the American College of Radiology recommend yearly screening for all women 40 and older.

Women can talk with their doctors about their personal risk of breast cancer. This will help guide decisions about when to start mammography and how often this very important tool should be used.

HAHV's Fern Feldman Anolick Center for Breast Health is the first in New York state to receive the Gold Seal of Approval from The Joint Commission for our Breast Cancer Care Program. Find out more at www.hahv.org/service/ oncology-fern-feldman-anolick-breast-center.

Help us improve the way we deliver healthcare in the Hudson Valley

We want to improve the way we deliver healthcare, but first we need your feedback. Help us make it better by taking this quick survey!

#### visit: tiny.cc/make-it-better Or scan the QR code below

This survey is being administered by the Center for Regional Healthcare Innovation at Westchester Medical Center, Montefiore Medical Center, Refuah Health Center, and the HealthAlliance of the Hudson Valley

Contact us: crhi@wcmc.com

You can use your smart phone's QR reader app to scan the QR code (right) to be taken directly to the survey. Don't have a QR reader app? Go to the App Store or Google Play and download a QR reader app. It's easy and fun.



### **NEW Patient Portal**

- Access health information from your hospital stay.
- Available 24 hours a day, 7 days a week from any device with internet access.
- All records are safe and secure, accessible only by a special password protected website.
- View and maintain a list of your current medications and allergies.

LEARN MORE: hahv.org/patient-portal



# Get on the FAST TRACK to Recovery After Joint Replacement

oint replacement—when an arthritic or damaged joint is removed or replaced with an artificial one—can provide welcome pain relief and get you back on your feet again, doing the things you love, such as playing golf or tennis, skiing or bicycling—even running mini-marathons. Recovery used to require a four-day hospital stay followed by up to eight weeks of recovery and physical therapy. But not anymore.

"We're now using a technique called multimodal pain management that helps prevent pain before it occurs," says Frank Lombardo, M.D., a joint-replacement specialist at The Center for Orthopedic Specialties at HealthAlliance Hospital: Mary's Avenue Campus, whose special interests include hip and knee replacements. By preventing the pain cascade from developing, jointreplacement patients can recover sooner.

Instead of spending four days in the hospital, many joint-replacement patients can safely go home after only a day or two. Instead of taking eight weeks to make a full recovery, many resume their normal activities after only four weeks. In short, by using new pain-management methods, which incorporate evidence-based painprevention protocols during each phase of the operative process, "some joint-replacement patients are recovering 50 percent faster," Dr. Lombardo says.

### GETTING AHEAD OF PAIN

"Some jointreplacement patients

are recovering 50 PERCENT FASTER."

The new fast-track joint-replacement recovery program acts centrally and locally to proactively prevent and manage pain. Before surgery, for example, patients receive medications to reduce inflammation and prevent postoperative nausea, to smooth their postsurgical recovery. During surgery, they receive pain medication that blocks pain signals from reaching the brain, but preserves motor function. "This newer medication allows patients to function much earlier without weakness," Dr. Lombardo says. As a result, many postoperative patients are able to safely get out of bed the day of surgery, instead of waiting until the next day. Many patients can also walk several hundred feet, even climb stairs. In the past, this was something most patients couldn't do until a week or so after surgery, Dr. Lombardo says.

By preventing pain before it starts, patients require less narcotic pain medication after surgery too. After being discharged to a rehabilitation facility or sent home to have physical therapy as an outpatient, they also need less physical therapy to regain their strength. "Within three to four weeks, they feel much better and can do most activity without significant pain," Dr. Lombardo says.

The new fast-track joint-replacement recovery program is part of an effort to improve jointreplacement patient outcomes while continuing to focus on safety. "We're trying to take away anything that's holding patients back from experiencing a better recovery," Dr. Lombardo says.



Frank Lombardo, M.D.

**To learn more** about the new fast-track joint-replacement recovery program, you're encouraged to attend an hour-long Total Joint Replacement Class at HealthAlliance Hospital: Mary's Avenue Campus. During the class, HAHV's orthopedic coordinator will discuss the surgery and explain the knee or hip prosthesis, the new pain-management methods and what to expect during your hospital stay and afterward. To reserve your spot or to make an appointment at HAHV Orthopedic Specialties, call **845-334-3130**.

HEALTHALLIANCE&YOU FALL 2014

### Mountainside

Mountainside Residential Care Center in Margaretville has received a 5-star quality rating—the best possible—from the U.S. Centers for Medicare and Medicaid Services for the sixth straight time. Only a fifth of the more than 15,000 nursing homes nationwide have a 5-star Medicare rating. Mountainside's rating came after inspectors from the New York state health department completed a rigorous recertification survey. Information from that survey was used to determine the Medicare rating. "We're very pleased we've once again received a 5-star rating," Mountainside Administrator Philip Mehl says. "The repeated top ranking reflects the hard work and vision this team of professionals brings to work each and every day in every aspect of care." The inspectors conducted their rigorous four-day review in July and issued a report in August. "The report found one minor, non-clinical issue that we've already resolved," Mehl says. The department, on average, cites nursing homes for eight to nine deficiencies, he says.

At Mountainside Residential Care Center, quality care comes first. Visit us online at www.hahv.org/mountainside/why-mount.

### WOODLAND POND It's Party Time!

Anniversary party time, that is! Woodland Pond at New Paltz, HealthAlliance's own continuing care retirement community, will be celebrating its 5-year anniversary in October. 2014 has been a milestone year for the community, which has welcomed more than 30 new residents, achieved a 5-star rating from the U.S. Centers for Medicare and Medicaid Services, and assisted more than 100 local residents with their sub-acute rehabilitation needs, among many other activities. The amazing residents and staff of this community have taken such pride in making this a banner year. Quite the celebration is being planned to mark five years of incredible service. The monthlong celebration includes live musical performances, cocktail parties, special events and the release of floating lanterns to remember the loved ones of the residents.



To learn more about the Woodland Pond community, please visit the website at wpatnp.org. You're always welcome for a tour!



# Ahead of the Curve:

t is often said that it takes a village to raise a child. The same can be said of providing healthcare and keeping the community healthy. Our plans are well under way for building on established relationships and starting new collaborative efforts with other community physicians and healthcare providers. Here's a look at some of our initiatives and how they help provide you with better access to healthcare.

### DSRIP: System Reform to Transform Patient Care

HealthAlliance started its participation in the state Delivery System Reform Incentive Payment (DSRIP) program this year. Coordinated by the state Department of Health and U.S. Centers for Medicare and Medicaid Services, the overarching goals of DSRIP are to transform the healthcare delivery system in New York, reduce avoidable hospital use, improve other healthcare services and reduce Medicaid spending. The program promotes community-level collaborations and provides financial support to healthcare providers to implement programs to better meet the needs of their communities, with a focus on behavioral health.

The DSRIP project will span several years and begins with a planning phase, which we are in now. Over the next few months, HealthAlliance will partner with Westchester Medical Center, Montefiore Medical Center and the Ulster County health department to complete a Community Needs Assessment, a critical component of the program used to identify the most pressing needs of Ulster County's population, and select DSRIP projects that address those needs.

The Ulster County DSRIP project consists of dozens of healthcare providers, including all HealthAlliance facilities, the Institute for Family Health, Ellenville Regional Hospital, Ulster County Department of Health and Mental Health, Mobile Life Support Services, Hudson Valley Mental Health, local physicians and many others. All these organizations are working in collaboration to plan, design and implement the requirements and projects for DSRIP.

### CPOE: Centralized Patient Information to Minimize Errors

After successfully installing a systemwide Electronic Health Record system, we are now implementing computerized physician order entry (CPOE), a system that will make patient records more readily accessible. CPOE allows licensed healthcare professionals to enter medication orders or other instructions electronically instead of on paper charts. It brings data from the pharmacy, laboratory, radiology and patient monitoring systems together in one place so all providers have access to diagnostic plans, patient allergies and medical history. We implemented our CPOE system last year, but it became mandatory for all medical staff to use in June.

Studies show that this system reduces duplicate testing, reduces avoidable costs and improves timeliness. The use of a CPOE system can also help reduce errors related to poor handwriting or transcription of medication orders.

"CPOE will benefit our medical staff, as well as our patients, by helping prevent medical errors, increasing patient safety and providing better continuity of care," says Frank Ehrlich, M.D., Chief Medical Officer for HealthAlliance of the Hudson Valley. "It's a valuable and necessary asset that will improve quality, efficiency and patient safety at all HealthAlliance hospitals."

### CLINICAL INTEGRATION NETWORK: Removing Barriers to Patient Care

In response to changes in the healthcare industry, area physicians, with the support of HealthAlliance of the Hudson Valley, are collaborating to improve healthcare delivery. Otherwise known as "clinical integration," coordinating care across distinct entities has become the new standard for delivering effective and efficient patient care. Our program, the HealthAlliance Physician Network, seeks to lead healthcare



# **Collaboration for Better Patient Care**

transformation in our community by improving quality, lowering costs and improving the patient experience.

"It's no doubt that healthcare is changing—much faster than we can keep up with on our own," says Paul Llobet, M.D., Medical Director at Margaretville Hospital and chair of the HealthAlliance Physician Network Steering Committee. "Clinical integration gives us a vehicle to offer our patients the highest quality care and remain practicing as independent physicians."

### "Whether it's primary care or specialty care, we can all come together for the benefit of our patients, our community and our practices."—Paul Llobet, M.D.

Clinically integrated physician networks foster cooperation and communication among physicians and hospitals, thereby removing barriers to coordination of patient care. Patients receive greater consistency of high quality care delivered from a trusted source—their physician—through better and more efficient communication between doctors, colleagues and patients.

"Whether it's primary care or specialty care, we can all come together for the benefit of our patients, our community and our practices," says Dr. Llobet.

### RESIDENCY PROGRAM: Bringing More Primary Care Physicians to the Hudson Valley

To help bring more primary care physicians to the Hudson Valley, HealthAlliance of the Hudson Valley partners with the Institute for Family Health to support the Mid-Hudson Family Practice Residency Program. The program, established in 1979, educates and provides family medicine residents with training and patient care experiences necessary to become competent, independent, board-certified family physicians. Residents work at the institute's federally qualified health centers, HealthAlliance facilities and other healthcare entities. While

HealthAlliance physicians are guiding and teaching, they receive benefits as well.

"Many physicians grow in their role as teachers," says Ephraim Back, M.D., Program Director of the Mid-Hudson Family Practice Residency Program. "Teaching has proven to increase job satisfaction, and keeps doctors up to date on current medical research."

The Mid-Hudson Residency Program has trained many outstanding physicians who have gone on to rewarding careers often right here in our community. The residency is a rigorous three-year program, which graduates 10 physicians each year. Since it began, more than 130 family physicians have graduated from the program. "Many of our graduates stay in the area to practice," says Dr. Back. "So the program is a great means for training residents and for recruiting them to stay and serve our community as primary care physicians." This also opens up associated jobs for members of the community.

During residency, resident physicians learn the comprehensiveness of family practice, with an emphasis on the particular needs of medically underserved communities. At the completion of the program, the family medicine physicians have been well-trained to provide fullspectrum primary care, including outpatient, emergency, obstetric, mental health and inpatient care for individuals from birth through old age, within the context of their families and communities.

The HealthAlliance Physician Network. From left to right: Walter Woodley, M.D., Paul Llobet, M.D., Michael Keller, M.D., Debra Karnasiewicz, M.D., Matthias Von Reusner, M.D., Mark Josefski, M.D., Martin Cascio, M.D., Eugene Heslin, M.D., Christopher Palmeiro, M.D., Michael Steckman, M.D.



# Help Veterans Cope with Problems

variety of psychiatric and behavioral issues afflicts veterans returning from overseas conflicts. You can help by learning the signs and symptoms of service-related conditions.

Men and women in the armed services face danger on the battlefields of Iraq and Afghanistan. Regrettably, many returning service members are in for a different kind of fight when they get home.

For example:
Thirty percent to 40 percent of Iraq veterans experience depression, anxiety or post-traumatic stress disorder (PTSD).

- Forty thousand service members who served in Afghanistan or Iraq have been treated for substance abuse at Veterans Administration hospitals.
- The suicide rate among Iraq war veterans is an estimated 35 percent higher than that of the general population.

Learning the risks and challenges service members face after returning home can help you guide them toward treatment if they need it.

### PTSD

Anyone who has gone through a traumatic experience such as combat is at risk for PTSD. One in five Iraq and Afghanistan veterans shows signs and symptoms of the disorder. Young soldiers are three times more likely to be diagnosed with PTSD or another mental health disorder than service members older than age 40. Signs of PTSD include:

- Flashbacks and bad memories
- Avoiding reminders of the traumatic event
- Feeling numb
- Anger and trouble sleeping
- Being startled easily

#### DEPRESSION

Depression feels similar to a down or sad mood, but it's longer-lasting, deeper and

more severe. Signs of depression include:

- Feeling that things will never get better
- Feeling sad most days
- Losing interest in enjoyable activities
- Fatigue and low energy

### SUICIDE

Veterans have an increased risk for suicide. Specific factors that can raise the risk include:

- Frequent or long deployments
- Deployments to hostile areas
- Extreme stress
- Physical or sexual assault while in the service
- Service-related injury

Warning signs of suicide include:

- Threatening to hurt or kill oneself
- Seeking ways of killing oneself
- Talking about death, dying or suicide
- Uncontrolled rage, anger or hopelessness
- Worsening alcohol or drug abuse
- Withdrawal from family or friends
- Seeing no purpose in life or no reason to live

If you're with someone who exhibits any of these symptoms, call a mental health professional, **911** or the National Suicide Prevention Lifeline at **800-273-TALK (800-273-8255)**.

### SEEK HELP

Even if service members and returning vets know they have mental health problems, they're often unwilling to get help. Reasons for reluctance include:

- Concern that admitting they have a mental health problem means they're weak
- Fear that receiving treatment for a mental health problem could harm their military career
- Concerns about side effects of medicine prescribed for mental health conditions
- Doubts that treatment will work Despite these concerns, proper treatment for mental health issues can prevent more serious problems.



### Mental Health Services

The HealthAlliance of the Hudson Valley's Mental Health Services offers evaluation and treatment of a wide range of psychiatric disorders through inpatient hospitalization, adult and adolescent partial hospitalization or psychiatric emergency services. Our board-certified psychiatrists, psychiatric nurse practitioners, nurses, activity therapists, art and music therapists, and social workers are compassionate professionals committed to helping you improve your emotional health, whether you need short-term care or ongoing outpatient services.

### Don't Wait to Get Help

Ulster County Suicide Prevention Hotline: 845-338-2370 or 845-679-2485

National Suicide Prevention Hotline: 800-273-8255 or 800-784-2433 (800-Suicide)

> Veterans Crisis Line: 800-273-8255 (press 1 when connected)

Veterans Crisis Text Messages: text to 838255

Family of Woodstock Crisis Hotline: 845-338-2370

### Letters to HealthAlliance: Improved Quality of Care

We regularly receive letters from patients and their families commending us on our service. Some indicate the service is a welcome change from their experience of years earlier. Here are two recent letters:

Marie Dunne of Bearsville, N.Y., wrote she'd seen the old Kingston and Benedictine hospitals' reputations "ebb and flow" over the years, but any misgivings about HealthAlliance vanished when she called at 4:40 p.m. one Tuesday, hoping to get an appointment Friday, when she could get off work.

"Missy [Melissa Iannucci] answered the phone with a cheerful and professionally friendly manner (even that late in the day!)," Marie's letter said. "[She] took the time to check with colleagues and squeeze me into the schedule, showing compassion and understanding for the everyday challenges of taking time off from work."

Missy took "ownership" of the call and represented HealthAlliance "to the very best of her ability," Marie said.

"Through her actions, Missy is spreading the word that your facility is kind, friendly, compassionate and professional—just the kind of place I would want to visit for all my medical needs," Marie concluded. Sharon Brown of Kingston, N.Y., wrote to praise "the exceptional care" that her husband recently received at the Broadway campus. Contrasting it to the experience her mother had six years ago, "the difference in the overall feeling is simply amazing," Sharon said.

"Everyone seemed to actually enjoy their jobs!" she said. "Just the fact that they smile and acknowledge you speaks volumes."

She gave "a huge heartfelt thank-you to Sean [Gates], Badran [Aboshar], Ben [Cimino], Alaina [D'Anaire], Susie [Helton] and Beverly [Flynn]" for the exceptional care they gave her husband. "They made his hospital stay much less stressful and went above and beyond to assure all of our comfort levels."

"I could go on and on, but I will close by saying GREAT JOB!!!" Sharon said. "I know that you have gained back our family's faith in the hospital."

### **Pumpkin Curry Soup**

Preparation time: 45 minutes

Ingredients:

1 tablespoon butter 2 garlic cloves, finely chopped 1 teaspoon curry powder 1/8 teaspoon crushed red pepper 1 cup low-sodium chicken broth 1 cup fat-free half-and-half 1 cup finely chopped onion 1 cup diced celery 1/8 teaspoon ground coriander 3 cups water 32 ounces of pumpkin puree

Melt butter in large saucepan over medium-high heat. Add onion, celery and garlic; cook for three to five minutes, or until tender. Stir in curry powder, coriander and crushed red pepper; cook for one minute. Add water and broth; bring to a boil. Reduce heat to low; cook, stirring occasionally, for 15 to 20 minutes to develop flavors. Stir in pumpkin and half-and-half; cook for five minutes or until heated through. Transfer mixture to food processor or blender (in batches, if necessary); cover. Blend until creamy. Serve warm or reheat to desired temperature. Garnish with dollop of sour cream and chives.

Preparation tip: Soup may be prepared a day ahead. Cool to room temperature after adding pumpkin and half-and-half. Cover and refrigerate. Just before serving, blend and then reheat to serving temperature, but do not boil.

**Yield: four servings** Serving size: 1/4 recipe

Amount Per Serving/% Daily Value Calories 180; Calories from Fat 45; Total Fat 5 g (8%); Saturated Fat 1 g (3%); Cholesterol 0 mg (0%); Sodium 105 mg (4%); Total Carbohydrate 30 g (10%); Dietary Fiber 11 g (44%); Sugars 14 g; Protein 8 g; Vitamin A 680%; Vitamin C 6%; Calcium 15%; Iron 10%

\* Percent Daily Values are based on a 2,000-calorie diet. Source: Centers for Disease Control and Prevention, "Fruits and Veggies: More Matters"

PEEDBACK

**We'd Love to Hear from You.** To submit feedback about the care you have received at one of our facilities, email HealthAlliance of the Hudson Valley at **YOU@hahv.org**.

# BUILDING A Strong FOUNDATION Our Foundations build lifelong relationships with members

Our Foundations build lifelong relationships with members of the community, raise funds and dedicate their resources to support the needs of each facility and the community we serve.



### **MORE THAN \$121,000 RAISED THIS FALL** Thank you for your support!

### **CDPHP Golf Classic**



This annual tournament at Apple Greens raised \$53,000

**Tonner Vampire Ball** 



Our Halloween party is always a frighteningly good time ...for a good cause!

Cruisin' for the Cure



A beautiful night aboard the Rip Van Winkle to benefit HealthAlliance Cancer Services



Funds are used to improve quality of life for residents

Save the Date! Tulip Ball April 25, 2015 The Lazy Swan Golf & Country Club Village, Saugerties, NY.

The HealthAlliance Foundation is a 501(c)3 organization supporting HealthAlliance of the Hudson Valley's mission, healthcare programs, services and facilities, including the hospitals on Broadway and Mary's Avenue and the Woodland Pond Continuing Care Retirement Community in New Paltz. For more information about The HealthAlliance Foundation, please visit **FoundationUpdate.org**, **Facebook.com/TheHealthAllianceFoundation** or call **845-334-2760**.

### >> YOUR GIFTS MAKE THE DIFFERENCE

When you contribute to one of our Foundations, your gift is more than a donation. It is a way for you to advance healthcare for you, your family and the community. Learn about the many ways you can give at www.hahv.org/our-foundations. Thank you for your support!



### The Spirit of Giving

s the holiday season quickly approaches, the Benedictine Health Foundation would like to thank our donors for their spirit of giving! Your generous contributions have made a direct and significant impact, improving people's lives and healthcare services in Ulster County.

You have helped us to provide more than 1,000 local cancer patients with nutritious food, along with fuel to access treatment. You have helped to enhance the care and treatment of mental health patients at HealthAlliance and in the community with transitional housing. You have helped to purchase life-saving, advanced medical technology.

### **BENEDICTINE HEALTH FOUNDATION**

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Friday, December 12, 2014 Diamond Mills Hotel & Tavern \$195 / person | 6pm – Midnight Black Tie Preferred



We are pleased to announce the 2014 Honorees:

St. Benedict Award for Community Spirit Scott Dutton & Terese Fantasia



St. Benedict Award for Medical Excellence The Center for Orthopedic Specialties at HealthAlliance of the Hudson Valley Accepted by Stephen G. Maurer, M.D. Department Chair



Bottom Row, L to R: Martin Cascio, MD, Kate Hefferon, RPA-C, Char Cohen, RN, Stephen Maurer, MD, Department Chair, John Ioia, MD, Lynn Kelly, RN, Discharge Planner, and Charles Alsdorf, RN. Top Row, L to R:Mark D. Aierstok, MD, Frank Lombardo, MD, Richard Moscowitz, MD, and Robert Rogan, PA-C

### St. Benedict Award for Community Partnership Ulster Savings Bank and Charitable Foundation



Accepted by

*Lisa Cathie President and CEO* Ulster Savings Bank

### MaryRose Wareholak

Foundation Executive Director Ulster Savings Charitable Foundation



For further information, please contact Barbara Klassen, Executive Director at (845) 334-3186 or visit us online: Benedictinehealthfoundation.org/events

## **Faces of HAHV:**

## Debbie Barton

t's not every day you hear about someone following in her younger sibling's footsteps. But that's how Debbie Barton began her career.

After dreaming of becoming a veterinarian throughout childhood and then watching her younger sister, Stacey Devine (who worked at Benedictine Hospital), become a nurse, Debbie decided nursing was the right career path for her too.

Since 1992, Debbie has held various nursing positions throughout HealthAlliance and worked as a nurse at the Fern Feldman Anolick Center for Breast Health beginning in 2004. She took her current position as Breast Patient Navigator in 2013.

As the Breast Patient Navigator, Debbie guides, supports and assists patients in receiving the care they need. She helps patients understand their diagnosis and options, follow physician-prescribed treatments, find needed support services and schedule appointments.

But Debbie has a powerful characteristic that other nurses may not. Debbie is a breast cancer survivor herself. She has been cancerfree for 10 years. Her experiences help her to connect with her patients and make their journey easier.

"Debbie is a very compassionate, dedicated professional," says Gail Muench, Manager of the Center for Breast Health. "She works hard to make sure each patient has all their needs met, whether that is help getting an appointment, a shoulder to lean upon or help getting the necessities of living."

"I don't care only for the patient; I care for the patient and their support system . . . I like to make them feel like they are being cared for also."

> — Debbie Barton Breast Patient Navigator

#### Q: WHY DID YOU DECIDE TO TAKE ON THE ROLE OF BREAST PATIENT NAVIGATOR?

A: As a nurse at the Center for Breast Health, I was already doing some work in the role of "navigating" patients, especially with imaging and biopsy patients. So when I went to a National Consortium of Breast Centers Conference, I took the course for certification in Breast Care Navigation. Eventually I transitioned into that position full-time.

### Q: DO YOU THINK YOUR OWN EXPERIENCE WITH CANCER HAS IMPACTED HOW YOU WORK WITH YOUR PATIENTS?

A: Yes, I feel like I can empathize better. When patients come in for a biopsy, they may feel frightened—sometimes it's the unknown that is the worst part. So there are things that I can tell them from a professional and personal standpoint, which help reach them on a deeper level.

One thing that is important to me is that I don't care only for the patient; I care for the patient and their support system, which may be family, friends or significant others. I like to make them feel like they are being cared for also. This enhances the total patient experience.

#### Q: WHAT DO YOU ENJOY ABOUT WORKING AT HEALTHALLIANCE?

A: It may sound corny, but I really enjoy coming to work every day. It is not just a job; it is a calling, a passion for our patients and the care that we give. I really enjoy working with my fellow coworkers here at the Center also. We have a very dedicated team that is focused on taking care of patients and providing them with the highest quality care. My patients, who are very appreciative of everything we do, give me great satisfaction. They make coming to work easy.

#### Q: WHAT MESSAGE WOULD YOU TELL PEOPLE IN HONOR OF OCTOBER BEING BREAST CANCER AWARENESS MONTH?

A: Mammograms can detect very early stages of breast cancer, and if we identify it early, we can cure breast cancer. Women should get a yearly mammogram starting at age 40. If you're uninsured or underinsured, the New York State Cancer Services Program may pay for your mammogram. The program makes it easier for those who qualify to get screened.

For more information about the Cancer Services Program, call Debbie at 845-334-8927 or visit health.ny.gov/diseases/cancer/services.



# Wellness, Education & Support Programs

### Oncology Support Program: Caring for Those with Cancer

HealthAlliance is dedicated to ensuring that no one faces cancer alone. Our Oncology Support Program consists of compassionate professionals and volunteers offering support to those affected by cancer, plus their families and friends.

Our creative programs promote prevention, wellness and healthy survivorship. They include exercise classes, cancer education and workshops on nutrition, integrative medicine and the healing arts.

Programs take place in the homelike setting of the Herbert H. and Sofia P. Reuner Cancer Support House, 8D Mary's Ave., across the street from HealthAlliance Hospital: Mary's Avenue Campus. The Linda Young Healing Garden offers a quiet sanctuary for meditation and reflection. For more information or to join a support group, please call **845-339-2071**.

### Women's Cancer Support Group

First and third Thursdays, 11 a.m.–12:30 p.m. Second and fourth Saturdays, 10–11:30 a.m.

Linda Young Ovarian Cancer Support Group Last Wednesday of the month, 7–8:30 p.m.

Family and Caregiver Cancer Support Group Third Monday of the month, 7–8:30 p.m.

Men's Cancer Support Group Second Monday of the month, 5:30–7 p.m.

Metastatic Cancer Support Group First and third Tuesdays of the month, 2-3:30 p.m.

### Support Group for Youth (ages 8-13) Facing Cancer in the Family

Third Monday of the month, 4:30-6 p.m. (Support group for parents takes place concurrently.)

Nurturing Neighborhood Network Program Connects people diagnosed with cancer to trained peer volunteers for individual support.

### 'Consider The Conversation!'

Wednesday, Nov. 12, 5:30–7:30 p.m. Mary's Avenue Campus Auditorium Screening of the documentary, "Consider the Conversation," which features interviews with patients, family members, healthcare professionals and leaders in end-of-life care. Following will be a panel-facilitated discussion. Refreshments will be served. To register, call **845-339-2071** or email **doris.blaha@hahv.org**.



To be notified about upcoming events and seminars, send your name and email address to YOU@hahv.org.

### **Exercise and Wellness Classes**

For more information, call us at **845-339-2071**. (Suggested donation of \$8 for most exercise classes)

### Gentle Yoga, with Deb Albright

Wednesdays, 9:30–10:45 a.m. HealthAlliance Hospital: Mary's Avenue Campus Auditorium Stretch and strengthen the body; calm and focus the mind. Mats provided.

### Jazzercise Class, with Cathy Shaw

Tuesdays, 5:30-6:30 p.m. HealthAlliance Hospital: Mary's Avenue Campus Auditorium This fun and effective class combines elements of dance, resistance training, Pilates, yoga and kickboxing to get and stay in shape.

### **Qigong, with Jeff Bartfeld**

Tuesdays, 7–8 p.m. HealthAlliance Hospital: Mary's Avenue Campus Auditorium Gentle exercises increase stability and strengthen the constitution.

### SmartBells® Class, with Angel Ortloff

Thursdays, 9:30–10:45 a.m. HealthAlliance Hospital: Mary's Avenue Campus Auditorium Use sculptured weights and gentle movement to increase flexibility, strength and balance.

### Tai Chi, with Annie LaBarge

Mondays, ID–II a.m. Reuner Cancer Support House Moving meditation and slow martial art to increase strength, balance and flexibility and to enhance the immune system and well-being.

### Miso Happy Cooking Club,

with Kathy Sheldon and guest presenters Fourth Tuesday of each month Reuner Cancer Support House Nutrition education and cooking classes integrating principles of macrobiotics. Advance registration required. Call OSP at 845-339-2071 or email doris.blaba@hahv.org.

### Smoking Cessation

The BUTT Stops Here Facilitated by Larry McGrath, Director of Respiratory Therapy Dec. 1, 8, 10, 15, 6–7 p.m. Administrative Lobby Conference Room To register, call **845-339-2071**, ext. 100 or email **doris.blaha@hahv.org**.

### Support Groups

Childbirth, Breast Feeding, CPR, New Moms Group Contact The Family Birth Place. 845-331-3131

Dementia Support Group Contact Yvette Drake. 845-334-2813

### **Diabetes Support Group**

Third Wednesday of the month, 4:30–5:30 p.m. Contact Beth Warhola at the Diabetes Education Center. **845-334-4249, ext. 1** 

Ostomy Support Group Contact Barbara Peterson at the Wound Care Center. 845-334-3125

Stroke Support Group Contact Yvette Drake. 845-334-2813

### Weight Management Program

Contact Beth Warhola at the Diabetes Education Center. 845-334-4249, ext. 1

### Art & Healing Programs of the Oncoloov Support Group

For more information, please call **845-339-2071** or email **doris.blaha@hahv.org**. Reuner Cancer Support House, 80 Mary's Ave.

### **OSP Memoir Group**

Thursdays, 3–5:30 p.m. with Abigail Thomas (wait list) Fridays, 2–3:30 p.m. with guest writers A memoir writing group for cancer patients.

### Watercolor and Words, with

Alexandra Geiger Mondays, 1:30–3 p.m. An art workshop inspired by nature.

### How to Have Fun as a Poet, with

Anique Taylor and Blaze Ardman Tuesdays, 4–6 p.m. Discover poetry through exploratory exercises in reading and writing that will enable you to express your deepest thoughts and feelings.

**Words of Wonder, with Ajamu Ayinde** Fridays, 11 a.m.–1 p.m. Guided imagery for getting well.

# Hypnosis for Smoking Cessation Join Frayda Kafka, Certified Hypnotist Nov. 5 & Dec. 3, 5:30–7 p.m. \$25 per session—hypnosis sessions are FREE to employees of HealthAlliance® Reuner Cancer Support House. To register, call 845-339-2071, ext. 100 or email doris.blaha@hahv.org.



HealthAlliance of the Hudson Valley 741 Grant Avenue Lake Katrine, NY 12449

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By aligning with local physicians, we're working to improve the patient experience and level of care for a healthier community, and a happier tomorrow because our greatest priority...is you.

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