

Health Beat

Fall 2011 | The Newsletter of Speare Memorial Hospital

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Speare Named a Top 100 Critical Access Hospital

By Michelle McEwen, FACHE, President & CEO



I am pleased to announce that Speare Memorial Hospital was recently named one of the Top 100 Critical Access Hospitals (CAHs) in the country. This designation comes from the National Rural Health Association and is based on comparative scores from the iVantage Health Analytics' Hospital Strength Index™.

In this first-ever comprehensive rating of CAHs, the results were tabulated across 56 different performance metrics, including quality, outcomes, patient perspectives, affordability and efficiency. The aggregate scores across individual dashboards served as a basis for an overall ranking and placed Speare in the top 20. More information about the index can be found at www.HospitalStrengthIndex.com.

It is certainly rewarding to know that the efforts of our physicians, nurses, clinicians and staff have been recognized through the achievement of this designation. To be listed among the best of the best 1,327 Critical Access Hospitals across the country is an honor, but more importantly it is a verification for our community that Speare Memorial Hospital delivers more than you expect in regards to quality, patient satisfaction, cost-effective care and financial strength.

Throughout this issue of HealthBeat you will find examples of the services and programs behind the metrics of the The Hospital Strength Index™. November is Diabetes Month and Speare's Diabetes Education Program has been recertified by the American

Diabetes Association for providing our patients with the tools and support to successfully self-manage their disease and "live well."

Also changing lives are our Sleep Lab and RehabFIT Medical Fitness programs. Patients Eileen Malone and Denise Castonguay have achieved greater health outcomes as a result of these programs and share their stories on the pages that follow.

Promoting a preventative approach to care is demonstrated by our participation in the New Hampshire Colorectal Cancer Screening Program. This program, administered by Dartmouth Hitchcock Medical Center, helps expand access to a screening colonoscopy by reducing financial barriers to qualified individuals. Colon cancer is preventable, and treatable if found in the early stages.

Similarly, breast cancer can be treated if found in the early stages, and to help raise awareness we entered the national Pink Glove Dance

video competition. Thanks to all who viewed, voted and shared our video with friends, family and neighbors.

Finally, the cover story on our Patient and Family Centered Care initiative best exemplifies how we are working to enhance the care experience of our patients to meet their unique needs and ensure them the best clinical outcomes possible. Our Family Advisors have been our patients, they live in our neighborhoods and they volunteer their time and expertise to further advance Speare Memorial Hospital as the region's healthcare provider of choice.

At the end of the day it is your health. It is our mission to help you live a healthy and productive life, but we can't be successful without your participation. I encourage you to partner with your providers and be an active participant in your health care decisions.

Thank You!

Speare Memorial Hospital's Pink Glove Dance video received 2,799 votes, ranking us 43 out of 136 entries. Thanks to all who viewed and shared the video to raise awareness and help prevent breast cancer.



Centered Around You

No one aspires to be in the hospital. But when the need arises and you arrive at Speare Memorial Hospital, whether in an emergency situation or as an outpatient, you expect the experience to be centered around you . . . to be treated as a person not a procedure, for your time and privacy to be respected, and for you , and your family, to be involved in the decision-making about your care. This is patient and family centered care.

Over the last year and a half, Speare has been cultivating the patient and family centered care philosophy by recruiting Family Advisors, and through an employee grassroots effort, identifying Staff Champions. Together they have participated in discussions - listening and sharing stories to create a shared vision and find common ground.

“Listening to our patients’ stories, and learning from them, is the heart of the patient and family centered care philosophy,” explains Speare Memorial Hospital’s Director of Patient Care Management and coordinator of the Patient and Family Centered Care Committee, Kathy Wieliczko. “It is about collaboration, and understanding the unique perspectives of individual patients and their family, in order to achieve the best possible clinical outcome.”

To that end, staff and Family Advisors have worked together on a number of projects that have helped to shape the steering committee’s mission and vision. Activities include updating the visitors’ policy, improving way-finding signage throughout the hospital, shaping the Surgical Services mission statement and using patient stories to improve and/or enhance the



Family Advisors... Your Care Champions (L-R) Carolyn Piantadosi, Sandy Lehner, Janet Doner, Jane Clay, Dottie Reiss (back), Barbara Noyes (front), Victoria Lang and Kelley Schwaner

surgical care experience, attending a webinar on patient and family centered communication, and hosting lunch and learn education sessions for staff. The result is our:

Patient and Family Centered Care Pledge

At Speare Memorial Hospital we are committed to, and champions of, the Patient and Family Centered Care philosophy. We promise to value the insights of patients and families, and look for opportunities to share with one another what we know about the overall impact of patient and family centered care on the Speare experience.

We pledge:

- To acknowledge that patients and family members bring unique perspectives and expertise to the clinical relationship.
- To recognize that families are not visitors, but an integral part of the clinical team.
- To foster partnerships with patients and families that will help Speare provide an exceptional patient care experience.
- To promote the importance of patient and family perspectives by integrating them in planning and decision making at the program and policy level.
- To engage in open dialogue, sharing complete and unbiased information, with patients and families in ways that are affirming and helpful for everyone.

Need X-rays?

Please note that as of November 1st general radiology (x-ray) services will no longer be offered at our Boulder Point location. Instead patients should go to the Department of Radiology located just inside the main entrance of Speare Memorial Hospital and easily accessible from the Hospital Road parking lot.

Upon arrival, please check-in with Outpatient Registration before proceeding to Radiology. Call us at 238-2232 if you have questions about your procedure.

Speare offers comprehensive radiology (x-ray) services:

- General radiology
- Full-field, Direct Digital Mammography
- 3D Ultrasound
- Bone Density
- CAT Scan
- MRI
- Nuclear Medicine



Giving Matters

By Susan Durgy, MBA, CFRE

One thing I love about living in a smaller community is the closeness you feel with people you see regularly. The people at the grocery store, the Fed Ex lady who gives my dog treats, the friendly folks at the bank. The familiarity is reassuring. One of the “certainties” that makes our community so special is that there is trust...a sense of mutual responsibility. We know that neighbors can depend on one another.

Here at Speare Memorial Hospital, you can trust that we will be here when the unexpected happens. Illness, injuries, accidents...it's all part of life. Isn't it heartening to know that excellent care, well-trained professionals and staff caring enough to focus on the details will be our safety net when those bumps in life happen?

During this upcoming season when we give thanks for our blessings, please consider making a gift to Speare. Your

charitable contribution may make the difference for a co-worker, family member, friend or that community member you see every week. The size of the gift doesn't matter...a gift that is meaningful to you is significant to us! Thank you for your support!

If you are interested in discussing how you can make a lasting gift to Speare, one that will help make a difference for years to come, please contact me at 603-238-2211 or sdurgy@spearehospital.com

It is with sincere appreciation, the Board and Staff of Speare Memorial Hospital recognize gifts in the amount of \$33,076.68 from the following individuals, families, businesses and foundations. Each and every gift contributes to Speare Memorial's ability to provide excellent care when you, your friends and neighbors need us. Thank you for your generosity!

Janet K. Adams	Susan Durgy and Charles Barilla	Stanley and Hilda Miller	Dorothy A. Thompson	by Ruth Stone, Martha and Louis
David A. Adey	Gary, Sally and Liesl Filteau	Paul and Debbie Monteforte	TOSA Foundation	Dignazio, and daughters Brianne
Audrey Hillman Fisher Foundation	Katie Foley	Patrick and Linda Nestor	Town of Thornton	and Cassandra
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Linda M. Crawford, M.D.	Sam and Barb Laverack	Brenda Slesman	Beauregard	Jeffrey T. Reisert, DO
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Sara J. Dembiec	Joy Leda	Ruth Stone, Martha and Louis Dignazio, and daughters	by Paul O'Grady and Liz Berini	Speare Memorial Hospital
Anonymous	Audrey M. Lindgren	Brianne and Cassandra	by John and Kay Storti	Oncology staff
John and Anita Downing	Sue Lopes	John and Kay Storti	Ann B. Brawn	by Angie and Keith Harger
Bertha L. Duncklee	Ms. Mary Masland	Marvin Taub	by Robert and Barbara Carter	Speare Memorial Hospital
	Anonymous	Joan Thomas	by Stanley and Hilda Miller	Physicians and Nurses
				by Cynthia Woodman Carver

Living Well with Diabetes

A four-week series of classes to help you understand what it means to have diabetes and to learn the skills you need to reach your personal health goals. Call the Diabetes Education office at 238-6472 for more information.

Living with Diabetes Education and Support

First Thursday of each month, 9-10 am and 5-6 pm. SMH Cafeteria Annex. Share ideas and strategies with others living with diabetes. Free and open to everyone.

Tuesdays, December 6-27: 9-11 am and January 3-24: 9-11 am

Coming in the New Year

Free monthly nutrition education sessions that will offer advice and resources to help you meet your 2012 health goals. Meets first Tuesday of each month at 5 pm. Call 238-6472 for more information.



Diabetes: True or False?

By Jean Baker, Registered Dietitian and Diabetes Education Coordinator

The signs and symptoms of diabetes may include fatigue, thirst, and blurred vision, or there may be no warning signs at all. The answer is “true.” The American Diabetes Association estimates that as many as 7 million Americans are unaware that they have diabetes. In fact, people with type 2 diabetes—the most common type—may have the disease for up to five years before it’s diagnosed, which delays treatment and increases the risk of complications like heart disease, kidney disease, and stroke.

There are some risk factors for type 2 diabetes that can’t be changed; it seems to be more common in some families, and the chance of developing it increases with age. But the rising rate of type 2 diabetes in the United States is tied mainly to lifestyle factors that can be changed—risk

goes up markedly in people who are overweight and sedentary.

Clearly, the best time to beat this disease is early, at the first sign that blood sugar is creeping up to an unhealthy “pre-diabetes” level. Pre-diabetes doesn’t always develop into diabetes, but it should be considered a compelling wake-up call in overweight individuals to assess and address needed behavior changes. That means taking a close look at eating and exercise habits, keeping in mind that even small changes can have a big effect. Doctors say that losing 5% to 10% of current body weight through cutting back on calories and increasing physical activity is a good start toward preventing or delaying the disease. In a person who weighs 200 pounds, for instance, that would mean losing about 15 pounds. In many cases this is enough to decrease

unhealthy levels of blood glucose, as well as lower cholesterol and improve blood pressure.

The move to stop diabetes starts with information. A booklet available online from the National Diabetes Education Program called *Small Steps, Big Rewards: Your Game Plan to Prevent Type 2 Diabetes* has some practical advice on simple steps that everyone can take to improve their eating and exercise habits. It is available online at http://ndep.nih.gov/media/GP_Booklet.pdf or by phone at 1-800-438-5383. Get in touch with your healthcare provider if you think you might be at risk for developing diabetes, or contact the Speare Memorial Hospital diabetes educator Jean Baker, RD, at 238-6472 for additional information and resources.

Diabetes Education Program Awarded Continued Certification



The Speare Memorial Hospital Diabetes Education Program has been awarded continued recognition from the American Diabetes Association (ADA) as a certified, diabetes self-management program. Certification by the ADA is a voluntary process which assures the approved program has met the national standards for evidence-based, diabetes self-management education.

“As a certified program we are able to use the considerable tools and resources that the ADA makes available to provide education to clients during the program, and support after the program to help them maintain positive behavior changes,” says Jean Baker, Registered Dietitian and Diabetes Education Coordinator.

Baker says 95 percent of patients with diabetes are type 2, stressing, “It is important to know the primary risk factors—overweight, over 40, family history of the disease and an impaired fasting glucose (100 – 126 mg/dl)—so people can take the right actions in the right amount of time, while they are symptomless.”

That’s where education comes in and the purpose of Speare’s Diabetes Education Program: to bridge the gap between a doctor’s diagnosis and a patient’s treatment/self-management of diabetes or pre-diabetes. Based on physician referrals, patients have an initial consultation for general instruction on diabetes and its potential complications, and then are scheduled for nutrition counseling for

diet and lifestyle changes. Next, patients complete nine hours of diabetes education classes. Once patients have completed the required coursework, a follow-up plan is developed. Additionally, patients are encouraged to participate in Speare’s Diabetes Support Group which meets the first Thursday of each month at 9 am and 5 pm in the Cafeteria Annex.

“Our job is to help our patients understand the disease, how it is affecting them and what the tools for successful self-management are,” says Baker. For more information about Speare Memorial Hospital’s Diabetes Education program or nutrition counseling call Jean Baker at (603) 238-6472 or Janette Gaumer at (603) 238-2244.



No More Counting Sheep

“I thought my doctor was insane when he suggested I have a sleep study done,” says Eileen Malone, 66, of Alexandria. “I was having trouble breathing, and yes it was taking me an hour and a half or more to fall asleep at night, but I didn’t want to go.” Then her doctor asked her about her energy level. Her reply, “What energy level?”

That was Eileen’s frame of mind last summer when she was referred to Dr. Michele Gaier at the Speare Memorial Hospital Sleep Lab. She had seen stories on television about sleep studies and the “mask you had to be hooked up to all the time,” but decided because it wasn’t far from home she would go to the appointment. And, she admits, “I was so tired all the time it was starting to impact my desire to do the things I love—garden, cook and quilt.”

Fast forward to the present and Eileen shares a whole different view on having a sleep study. “It was not nearly as bad as I expected and I couldn’t

believe how many times they told me I was waking up during the night.” Eileen came back for a second sleep study to use and be fitted for a CPAP (continuous positive airway pressure) mask. “They took the time to make sure I had a mask that fit properly and a machine that worked,” notes Eileen. “Darcy (the sleep technologist) worked to find just the right mask for me, not one that was almost right.”

Eileen says she went home after her follow-up sleep study armed with knowledge and confidence. She received several follow-up phone calls from Dr. Gaier’s office to see how things were going with her new CPAP mask.

“This little machine is giving me my energy back,” Eileen exclaims. “Now I sleep seven hours a night and I’m taking less time to fall asleep. Last weekend I cleaned the windows and built a rock garden . . . I have energy I haven’t had in a long time. My husband,



Eileen Malone, in her quilt room, is back doing the things she loves thanks to better sleep.

Bill, couldn’t believe it. I’m turning out quilts and cooking for my neighbors. Last week I made soup—18 pints of soup.”

Speaking of Bill, he is scheduled for his own sleep consultation and Eileen is anxious for her husband’s sleep evaluation saying, “He stops breathing for long periods of time and I have to poke him to get him going again. I know Dr. Gaier and her staff will take care of him. I used to have a closed mind, but I don’t anymore.”

As Dr. Gaier says, “When you give someone back the gift of sleep it is a wonderful thing.”



They say life happens when you are making other plans. That’s why we’re here 24/7, 365 days of the year.

The entrance to, and parking for, the Emergency Department at Speare Memorial Hospital is accessible from Avery St. Here’s what to expect once you arrive:

- Upon arrival you will be triaged —assessed— by a registered nurse (RN).
- The RN sorts patients based on the severity of illness/injury.
- Those with the most serious injuries and/or illnesses are seen first.
- Fast Track Process: During the hours of 10 am – 6 pm, and depending on the severity of your condition, you may be seen by a nurse practitioner.
- All visits will be considered and billed as an Emergency Department visit.



"They Have Changed My Life!"

By Ms. Denise Castonguay, Choice Physical Therapy at Boulder Point and RehabFIT patient



Denise Castonguay with her Occupational Therapist Dan Dougherty and Exercise Specialist Kendra Gilpatric.

"When my orthopedist recommended physical therapy after a torn bicep, I chose Choice Physical Therapy because of recommendations from two trusted friends. I was impressed with the depth and details of their initial exam and their dedication to help me obtain the best possible results. I returned twice more for therapy after knee surgery and after an injury to my hip.

These joint problems led me to investigate weight loss surgery. With the support of my primary care provider and her recommendation to investigate RehabFIT, I was able to coordinate my existing physical therapy and a new fitness routine to best prepare for surgery and avoid further injury. I had never made a lasting commitment to regular physical activity and was intimidated by the thought of joining a gym.

Every provider at Choice PT and RehabFIT has taken the time to know

my name, support my program and encourage me to continue. They are a team of dedicated professionals, who are kind, sincere, extremely knowledgeable and fun. I never leave without a smile on my face.

I am currently meeting with Dan Dougherty, OT for Occupational Therapy. Dan has explained every step of my treatment and it continues to evolve as the combination of his treatment and exercise recommendations produce results. His concern and dedication to my recovery is evident whether I am there for my RehabFIT workout or a session of therapy. Knowing that the fitness team and the occupational and physical therapists work side by side is a huge comfort; I can be confident that everyone is on the same page when it comes to me and my health.

RehabFIT has supported my journey through a 135 lb. weight loss this year. They monitor my program, help develop new goals as I make progress and encourage me to continue with a life style I never could have imagined. Their computerized "key" program takes the guess work out of what's next on my session and I love the way it tracks the extra five minutes I might add to a routine when I'm feeling extra ambitious. It also allows the trainers to keep me current with upcoming classes with a message when I check in.

I highly recommend Choice Physical Therapy @ Boulder Point and RehabFIT. They have changed my life!"

Coming Out of the Dark

If you are 50 – 64 years of age, and have not yet had a colonoscopy, you may be eligible to participate in the New Hampshire Colorectal Cancer Screening Program. The purpose of the program is to increase colorectal cancer screenings statewide, and for qualified individuals, the colonoscopy is provided at no charge.

This program is being offered at Spear Memorial Hospital under the direction of Dartmouth-Hitchcock Medical Center and the Norris Cotton Cancer Center. Once scheduled, colonoscopies are performed by Dr. Joseph Casey or Dr. Jim Koren of Plymouth General Surgery. For more information about the program and your eligibility, please contact Spear's Clinical Coordinator Miriah Greenwood at (603) 238-2361.

To qualify you must meet all of the following criteria:

- 50-64 years of age
- Resident of New Hampshire
- At or below 250% of federal income guidelines
- Uninsured or underinsured. Underinsured is defined as having at least a \$1,000 deductible, co-pay or co-insurance for the reimbursement of a colonoscopy.
- Average risk for colon cancer

Colon Cancer... Preventable. Treatable. Beatable.



How Doctors Think

How Doctors Think—that was the discussion at a Holderness Library Book Group meeting over the summer hosted by Speare Memorial Hospital Board Director Alison Ritz, and facilitated by fellow Board Director Dr. Linda Crawford and Dr. Joe Ebner, Speare’s chief medical officer. The book, written by Jerome Groopman, M.D., provides insight on physicians’ thought processes and the decisions they make against the backdrop of the relationship between doctor and patient.

Dr. Ebner begins at the end saying, “I liked the last line of the book best as it demonstrates the art and science of medicine.”

But after writing this book, I realized that I can have another vital partner who helps improve my thinking, a partner who may, with a few pertinent and focused questions, protect me from the cascade of cognitive pitfalls that cause misguided care. That partner is present in the moment when flesh-and-blood decision-making occurs. That partner is my patient or her family member or friend who seeks to know what is in my mind, how I am thinking.

- Jerome Groopman, M.D.



Dr. Ebner responds to a question about doctor/patient relationships as (l-r) Alison Ritz, Sandy Lehner and Kay Hanson listen.

For book group member Betsy Whittemore, the book drew her in immediately. She said she sent a message to her son who is a resident at the Penn State College of Medicine to read the book, noting, “I was amazed at all the latitude that comes into play with a doctor’s decision making... it scared me a little bit.”

Dr. Crawford acknowledged the art and science of medicine, the application of instinct versus statistic and that the balance fluctuates from patient to patient. Again, as Dr. Groopman points out in his book, “While modern medicine is aided by a dazzling array of technologies... language is still the bedrock of clinical practice.”

And as fellow group member Amanda Loud insisted, “As a patient, I need to

be the one in charge of my body, and as the book recommends, you need to find a doctor that fits you—that you can communicate with.” Groopman reinforces this in sharing the thoughts of his colleague Dr. Myron Falchuk, gastroenterologist, “...if you listen to the patient... the patient’s story... he is telling you the diagnosis.”

“And that,” say Kathy Wieliczko, director of patient care management and coordinator of the hospital’s patient and family centered care committee, “is the heart of patient and family centered care. By having this book as one of the Holderness Library’s monthly selections, this was an opportunity to really bring the patient-family care discussion outside of the hospital and into our community.”