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Saint Raphael Healthcare System, 1996 Annual Report

Saint Raphael Healthcare System

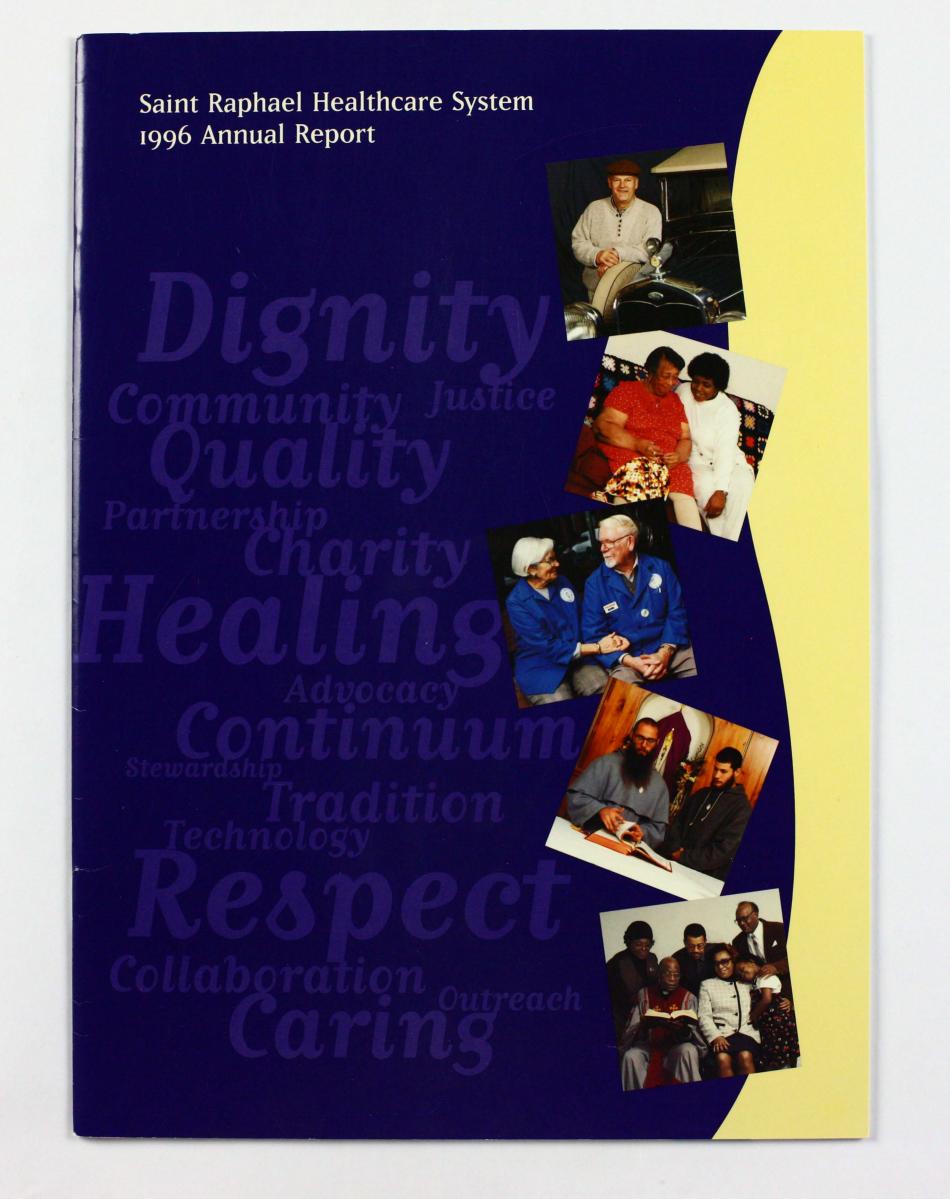
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Saint Raphael's caring mission is to improve the health status of our community by providing a comprehensive range of quality healthcare services.

As a Catholic healthcare system sponsored by the Sisters of Charity of Saint Elizabeth, we continue the healing ministry of Jesus Christ by stewarding our resources according to the principles of dignity, charity, and justice. We collaborate with all who share our values, our vision for better health for each individual, and our special concern for the underserved, the poor, and the elderly.

Dear Friends of Saint Raphael's:

At the Saint Raphael Healthcare System, we are proud to say we are not only preparing for the future of health care — we are helping to shape it.

In everything we do, our commitment remains the same: to improve the health status of our community. We seek to achieve this objective by working in partnership with physicians and other providers to establish an integrated network of comprehensive healthcare services for the Greater New Haven area.

During 1996, we strengthened this network by developing closer relationships with area physicians, by affiliating with the Regional Visiting Nurse Agency and by joining Hartford Health Care Corporation (the parent organization of Hartford Hospital) in a Regional Resource Partnership.

As one of the city's largest employers, we were an initiating member of the Greater New Haven Partnership for a Healthy Community.

In addition, we are constantly reaching out to those who are most in need. Our many health and wellness outreach programs continue to make a positive difference for numerous people throughout the community. We also remain committed to

providing the residents of our neighborhood with the support they need to better their lives.

Our strength continues to be based upon a foundation of excellence in clinical care. This excellence has made the Hospital of Saint Raphael a leader in the areas of cardiac care, cancer treatment and orthopedic services.

In all areas, we maintain our commitment to providing the high-quality care that respects the basic human dignity of each and every patient.

This commitment has carried us safely through the past 90 years. Let us trust that it will do the same in all the years to come.

Sincerely,

Lete ane Virginie

Sister Anne Virgini

President, Saint Raphael Healthcare System

James I Cullen

James J. Cullen

President, Hospital of Saint Raphael

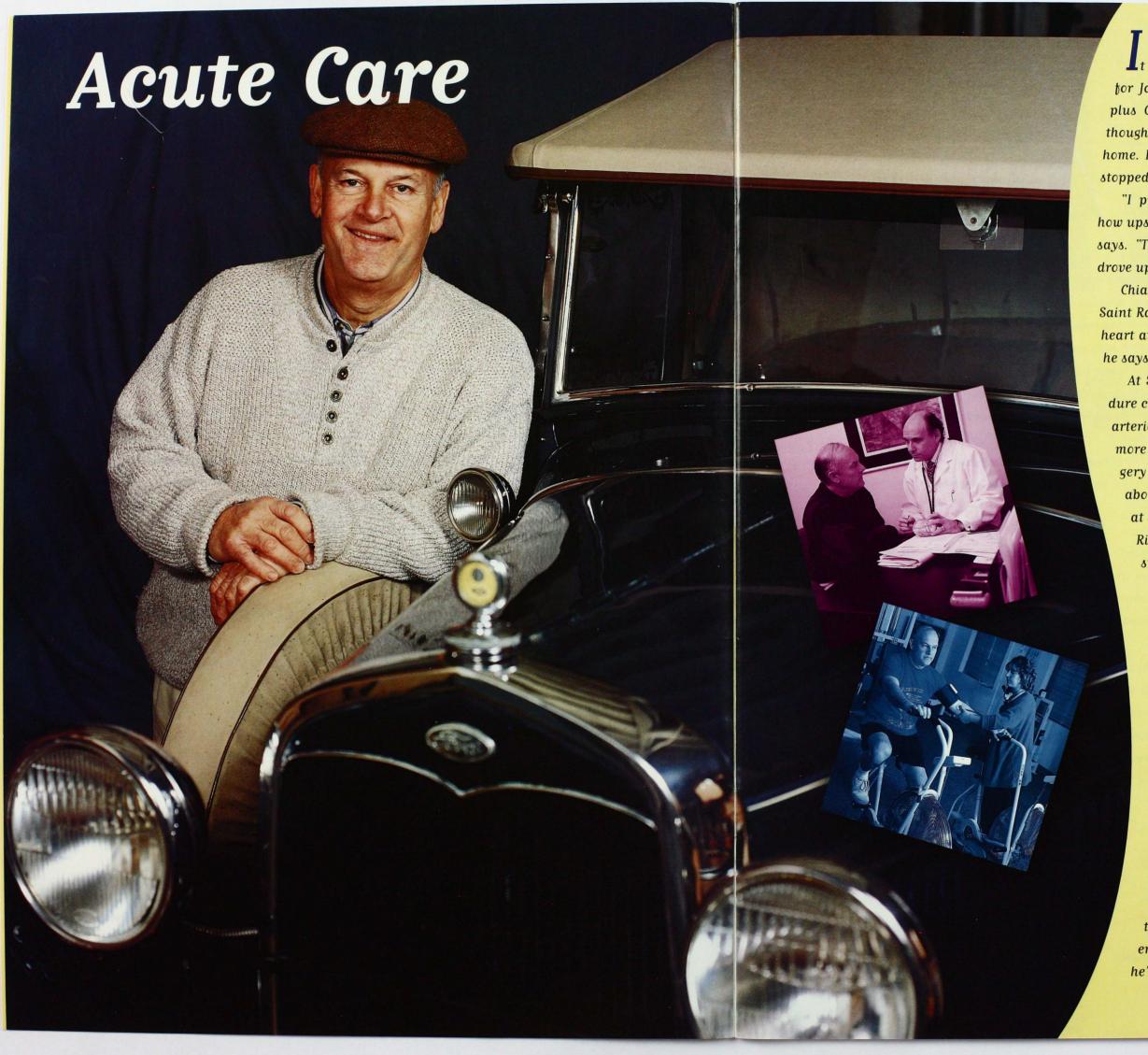
Chief Operating Officer, Saint Raphael Healthcare System



During 1997. Saint Raphael's commemorates the

goth anniversary of its founding in New Haven. Leading
Saint Raphael's into the next century are Sister Anne Virginie,

president, Saint Raphael Healthcare System, and James J. Cullen,
chief operating officer, Saint Raphael Healthcare System.



t started out as a typical Saturday at work for John Chiaro, manager of Connecticut Surplus Carpet in New Haven. Around noontime, though, he started to feel ill and decided to drive home. He didn't get far before strong chest pain stopped him in his tracks.

"I pulled off the road and started thinking how upset my wife and children would be," Chiaro says. "Then - all of a sudden - an ambulance drove up next to me."

Chiaro quickly found himself at the Hospital of Saint Raphael undergoing surgery after a massive heart attack. "I knew what had happened to me," he says, "but I wasn't afraid."

At Saint Raphael's, Chiaro first had a procedure called an angioplasty to open blocked heart arteries. But the severity of his case required more extensive care. Soon, he was back in surgery for a triple bypass operation, one of about 1,000 open-heart procedures performed at Saint Raphael's each year. This surgery, by Richard Salzano, M.D., was successful in restoring proper blood flow to the heart.

Afterward, Chiaro found he had plenty of people thinking about him. "The emergency room staff even called John's room to find out how he was doing," says Chiaro's wife, Kathy.

Once out of the hospital, Chiaro, age 55, benefitted from Saint Raphael's extensive and comprehensive cardiac services by enrolling in Saint Raphael's TakeHeart cardiac rehabilitation program. As part of TakeHeart, John and Kathy work out together at Saint Raphael's Adult Fitness Center in Branford. "I would recommend Saint Raphael's program to anyone in my situation," Chiaro says, "The people there really encourage you to get on with your life." And he's taking that positive attitude to heart.

Acute Care

our nation's healthcare system continues to evolve - with a general shift toward outpatient services - we recognize that providing acute care will always remain an integral part of the Saint Raphael Healthcare System. And during 1996, Saint Raphael's established new strength in its already sophisticated acute care.

In September, the Hospital of Saint Raphael announced a \$25 million project to expand the Emergency Department, renovate and enhance the Hospital's surgical facilities (both inpatient and outpatient) and create a new outpatient radiology suite. Driven by the increasing demand for shortterm surgery, this project will enable Saint Raphael's to maintain its position as one of the state's leading surgical facilities. Construction is expected to begin in mid-1997, with completion slated for the year 2000.

As a result of this project, space in the Emergency Department will be increased by 50 to 60 percent. In addition, the project calls for renovation of the Hospital's operating rooms - enabling them to physically accommodate technological advances in surgery.

These changes are critical as Saint Raphael's continues to pioneer new techniques. In 1996, several new procedures - including the VasoSeal® technique for cardiac catheterization and a minimally invasive vein harvesting procedure for openheart surgery - were introduced, highlighting Saint Raphael's as a statewide leader both in the areas of inpatient surgical procedures and cardiac care.

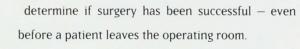
New techniques pioneered

In August, Saint Raphael's became the first hospital in Greater New Haven to use the VasoSeal® technique, which employs collagen - a naturally occurring substance — as a "plug" to stop bleeding after diagnostic procedures, such as cardiac catheterizations. This technique shortens recovery and provides greater comfort for patients.

> Saint Raphael's was also the first hospital in Connecticut to use a new vein harvesting procedure to reduce post-operative pain and promote speedier recovery for open-heart surgery patients.

In addition to these procedures, surgeons at the Hospital of Saint Raphael are using a new ultrasound device (known as a Duplex Scanner™) to





Just as Saint Raphael's is raising the level of care with leading-edge procedures, the Hospital is also developing a new series of integrated care models known as clinical pathways.

These pathways – at use in areas including OB/GYN, medicine, surgery and orthopedics represent a collaborative approach between physicians, other clinical staff and patients. Clinical pathways help patients receive more focused care during a shorter hospital stay.

> In 1996, the Hospital of Saint Raphael provided care to 21,265 inpatients. Of this total, the Hospital treated 3,457 cardiology patients; 1,487 orthopedics patients; 1,397 in thoracic surgery (including cardiac surgery) and 630 in oncology.

This patient volume underscores Saint Raphael's as one of the state's most expert facilities for cardiac, cancer, and orthopedic care.

As a community teaching hospital, Saint Raphael's employed 116 medical residents during 1996. While continuing their graduate medical education, these highly skilled residents ensure

During 1996, Saint Raphael's introduced several new surgical advances, such as the Vaso Seal® technique which uses the collagen in this syringe (held by Philip Fazzone, M.D.) as a natural "plug" to stop bleeding after certain diagnostic procedures, including cardiac catheterization

continuity of care between patients and their attending physicians. Saint Raphael's also cares for the spiritual needs of patients and families of all denominations. Through its pastoral care program, the Hospital provides clergy and counselors to assist in times of struggle, suffering and loss.

Pathways to better care

In 1996, Saint Raphael's staff and physicians focused on new ways to enhance the level of patient care in certain cardiac and orthopedic treatment areas.

> These efforts have enabled Saint Raphael's to help patients get well sooner and return home in a more timely manner.

For example, the average length of hospital stay for a total knee replacement patient was reduced from 10.1 days in 1994 to 4.5 days in 1996 virtually at the national benchmark level of 4.3 days for this procedure.

It is this combination of outstanding professionals, sophisticated technology and dedication to patient care that makes Saint Raphael's one of the state's foremost healthcare providers.

By using integrated care models, known as clinical

pathways, Saint Raphael's has been able to significantly reduce the length of hospital stay for many procedures -

including the orthopedic surgery performed here by John Adeniyi, M.D. (left) and John Irving, M.D.



leanor Black was ready to give up. The 75-year-old retiree was in the Restorative Care Program at Saint Regis Health Center, the Saint Raphael Healthcare System's 125-bed skilled nursing facility, trying to recover from lingering knee and ankle injuries. But she had reached the breaking point.

"When Wally Ostroski, my physical therapist, wanted me to move my knee one day, I told him I didn't care if I ever walked again," Black says. Then she apologized for saying something she didn't really mean.

Under Ostroski's care, Black was able to regain a reasonable amount of mobility, although she still relies on a walker to help maintain her balance. "When I first started at Saint Regis, I was afraid of everything. I thought I was going to fall all the time," she says. "But the staff there made the difference for me; I can't say enough good things about them."

Before her retirement a decade ago, Black was a 25-year employee at the Hospital of Saint Raphael. "I was a familiar face to lots of people at Saint Regis," she says.

That same familiarity enables Saint Regis to provide Saint Raphaet patients with a strong bridge of care between hospitalization and returning home or transferring to a less specialized setting. The quality of this care is shown by Saint Regis Health Center's ranking among the nation's top 10 percent of skilled nursing facilities.

An independent person, Black was happy to return home — which is one of the main goals in the Restorative Care Program. "It's good to be at Saint Regis when you need it, but it's better to be on your own," she says. And that's just where Black is today — living in her own apartment in Westville.

Restoring Health

Healthcare System is dedicated to restoring good health in every way. This dedication can be seen clearly in the wide variety of services provided by Saint Raphael's and its affiliates.

For many area residents, the road to wellness begins at Saint Regis Health Center. As New Haven's only Catholic skilled nursing facility, Saint Regis is an essential element of the Saint Raphael Healthcare System's continuum of care. This skilled nursing facility provides patients with a vital link between hospital care and return home.

> The superior care provided by Saint Regis has often been recognized by the nation's experts. In 1996, Saint Regis earned the healthcare industry's highest accreditation - after only its first review. Saint Regis was awarded full three-year accreditation with commendation by the Joint Commission on Accreditation of Healthcare Organizations.

Joining with community partners

In addition to offering restorative care at its New Haven facilities, the Saint Raphael Healthcare System has formed a network of providers to bring

high-quality homecare services to residents throughout the region. This partnership enables Saint Raphael's to offer patients a seamless pro-

Saint Raphael's network includes the Regional Visiting Nurse Agency, VNA of South Central Connecticut, Omni Home Health Services, Priority Care, Orange VNA, Community Health Care, Madison VNA, and Visiting Nurse Services of Connecticut, as well as Connecticut Hospice.

> Through a new agreement with St. Vincent's Medical Center in Bridgeport, Norwalk Hospital and Professional Home Care Services, Inc., Saint Raphael's is able to offer infusion therapy services for at-home intravenous nutrition, antibiotic therapy, pain management and chemotherapy.

In addition to homecare services, Saint Raphael's brings the latest health and wellness information directly to area residents' homes through Better Health magazine. Published six times a year, the magazine is mailed free to 150,000 homes in 16 communities - for a total audience of 500,000 readers in south central Connecticut.

gression of services from hospital treatment to

Information you can use

businesses and highlights of Better Health magazine. The address for Saint Raphael's Web site is: http://www.srhs.org.

For those who wanted to put information into action, Saint Raphael's Community Health and Outreach Department provided a full range of health promotion activities in 1996. These activities were targeted to the Greater New Haven community and area employers. To reach the community, Saint Raphael's held 15 health fairs in 1996 with total

During 1996, Saint Raphael's Occupational Health

Plus™ (OHP) increased its range of workplace services to meet the growing needs of regional employers. Here, Saint Raphael's physical therapist Bruce Jacobsen (right) treats an employee from one of OHP's many client companies

Saint Raphael's also introduced a monthly, 30minute cable television show in 1996 which is featured on Citizen's Television/Comcast Cable and TCI Cable. Called "Saint Raphael's Better Health Today," the show offers more information about key topics covered in Better Health magazine.

Saint Raphael's is also keeping up with the latest communications technology by hosting a new site on the Internet global network. By tapping into this site, computer users can get detailed information about the Saint Raphael Healthcare System, as well as health and wellness activities, services for

As part of this initiative, Saint Raphael's Adult Fitness Program (located in Branford) helped 110 participants restore their health and maintain fitness in 1996 - while over 200 people have benefited since the program's start in 1995.

attendance of about 3,000 people. Also in 1996,

Saint Raphael's worked with 13 area employers to

provide a variety of health and wellness services to

Reaching out for health

nearly 1,300 individual employees.

In addition to other workplace programs, Saint Raphael's Occupational Health Plus™ is designed to focus specifically on the needs of employers and their employees. In 1996, Occupational Health Plus™ provided coverage for 57,000 employees from 426 client companies. The program continues to grow, with surveys showing a 97 percent satisfaction rate among employees at client companies.

The journey to good health can be long and difficult. The archangel Saint Raphael served as a guide for travelers and a consoler of the afflicted. The Saint Raphael Healthcare System seeks to continue this same mission in every way it can.

Through an affiliation with the Regional Visiting Nurse

Agency (RVNA), and other providers, Saint Raphael's ensures a smooth transition from hospital to home care. In 1996, RVNA nurses, including Barbara Goodwin, R.N., made over 64,000 visits to 1,531 patients in Greater New Haven.



hey say it's better to give than to receive.

But for Ed and Marge Hartigan of Westville,

Saint Raphael's commitment to older adults
offers them a rare opportunity to do both.

Saint Raphael's is the New Haven area's foremost provider of healthcare services to adults over age 65. This complete array of services for seniors ranges from health and wellness programs to outpatient treatment, acute hospital care, home care and long-term care.

To ward off Old Man Winter, the Hartigans (who are each 77) had flu shots provided by Saint Raphael's CareCard, Greater New Haven's leading membership program for seniors. In addition, the Hartigans also enjoy bus trips and other activities with this program. CareCard offers a wide variety of services and benefits to more than 15,000 members age 55 and over.

But Marge isn't just a member — she also volunteers in the CareCard office. "I've been learning quite a bit about computers, which always tended to frighten me before I had this job," she says.

Following his wife's lead, Ed volunteers to help transport patients in wheelchairs around the Hospital of Saint Raphael. "I look forward to my job because I get to meet so many interesting people," he says. "You definitely get more out of volunteering than you put into it."

The Hartigans' close connection to Saint Raphael's goes back many years. Ed's sister, Mary, graduated from Saint Raphael's nursing school in 1943 and served as an Army nurse during World War II. More recently, Ed and Marge both received successful treatment for cancer at Saint Raphael's. "Saint Raphael's has done so much for us," Marge says. "By volunteering, we're able to do something to help other people."

Senior Services

rom health and wellness programs to outpatient treatment, acute hospital care, home care and long-term care. Saint Raphael's is making a real difference in the lives of older adults. And, in 1996, our commitment earned the Saint Raphael Healthcare System a national ranking for Geriatric Services from US News and World Report.

Reaching out for change

To help seniors meet the challenges of aging, Saint Raphael's offers a Senior Assessment Center that reviews older patients' health and functioning levels. The Center developed care plans for nearly 300 participants and their families in 1996.

> Saint Raphael's commitment to improving the quality of life for older adults extends well beyond the Hospital and into the community itself. Saint Raphael's provides an Outreach to Older Adults program offering general information and community agency referrals to seniors and caregivers. In 1996, this program answered 450 requests for assistance - a 20 percent rise over the prior year.

Our partnership with the Regional Visiting Nurse Agency (RVNA) helps to provide continuity

of care and enhanced services for older patients after discharge from the Hospital of Saint Raphael or Saint Regis Health Center, the Saint Raphael Healthcare System's 125-bed skilled nursing facility.

To maintain seamless delivery of care from hospital to home, the RVNA has developed a range of care maps to best meet patients' specific needs. The plans (which coordinate with the Hospital of Saint Raphael's clinical guidelines) detail a progression of care for patients with heart disease, diabetes and other medical conditions. In 1996, the RVNA made over 64,000 visits to 1,531 patients in Greater New Haven.

> In addition to providing top-rated care, Saint free program's membership in less than two years.

health screenings and tests provided by Saint Raphael's. More than 1,240 members participated

Raphael's continually strives to enhance and expand its range of health and support services for seniors. These services include CareCard, the state's leading health and fitness membership program. In 1996, CareCard membership increased to 15,000 adults over age 55 - more than tripling the

Program members are invited to a variety of



Saint Raphael's Senior Assessment Center helps olde adults successfully meet the many challenges of aging. The Center, directed by John Merritt, M.D., develops individualized care plans that address the specific needs

in these screenings during 1996. CareCard's offerings are rounded out by many wellness and fitness activities. In 1996, nearly 700 members participated in such programs.

More than 950 members also participated in educational programs, while nearly 400 took advantage of services such as insurance counseling, utility bill assistance and legal aid.

Providing practical protection

For seniors seeking added protection and peace of mind at home, Saint Raphael's provides the Lifeline® 24-hour personal security program to 600 area subscribers, making this the state's largest Lifeline program. Saint Raphael's also sponsors the American Parkinson Disease Association Information and Referral Center - the only facility of its kind in Connecticut - which handled about 500 requests for services in 1996.

While directly providing many needed services, Saint Raphael's also works as a partner with leading health insurers to bring seniors a vital measure of protection. In 1996, Saint Raphael's introduced a special Medicare supplemental

insurance plan in conjunction with Bankers Life and Casualty Company. Available to Medicare-eligible recipients age 65 and older, the plan provides benefits when policyholders use the Hospital of Saint Raphael.

Saint Raphael's also instituted a new Medicare managed risk contract with Blue Cross & Blue Shield of Connecticut. Agreed to in June 1996, the plan was approved by federal regulators for marketing as of March 1, 1997, with member enrollment beginning on April 1, 1997. This contract provides a significant opportunity to medically manage patient care through a combination of high-quality healthcare services and cost-effective operations.

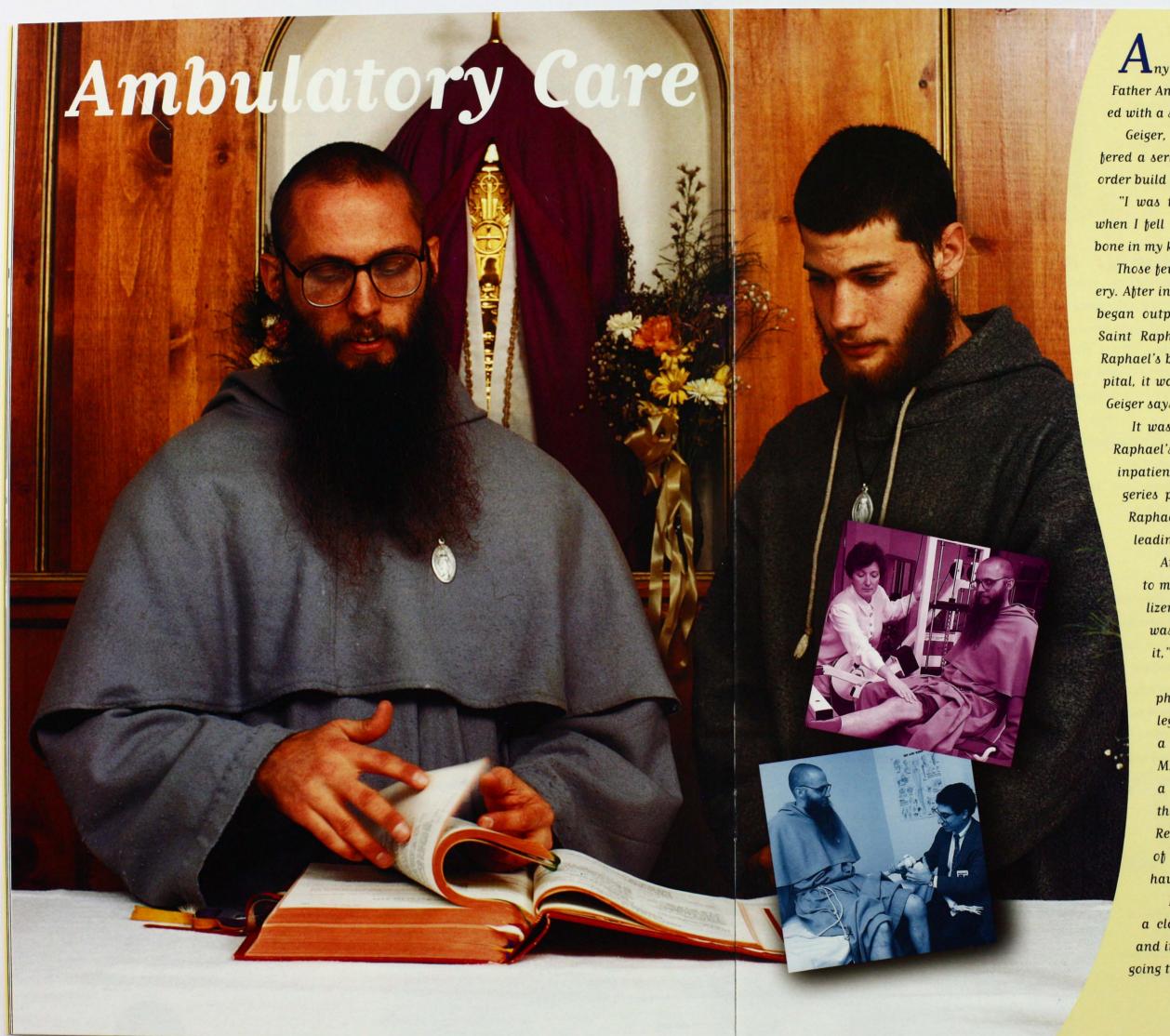
> Saint Raphael's also invested \$1 million in 1996 to secure 6 percent ownership of MedSpan, a statewide, provider-owned health plan.

Making a healthy difference

As people over age 65 make up an ever-larger portion of the population, Saint Raphael's is working to provide a complete range of healthcare services to meet the varied needs of these older adults in

Saint Raphael's CareCard has become the area's most CareCard provides a wide variety of health and fitness strated here by instructor Joy Antonino.





Any journey starts with a single step. But Father Angelo Mary Geiger's long journey started with a step the wrong way.

Geiger, a 34-year-old Franciscan friar, suffered a serious injury while helping his religious order build a shrine on its property in Griswold.

"I was trying to start a roto-tiller machine, when I fell over and broke the end of the femur bone in my knee," he says.

Those few seconds led to many weeks of recovery. After initial surgery closer to his home, Geiger began outpatient treatment at the Hospital of Saint Raphael. "I was glad to come to Saint Raphael's because I knew that, as a Catholic hospital, it would share my values and my beliefs," Geiger says.

It was also a good choice because of Saint Raphael's experience in orthopedics, with 1,443 inpatient surgeries and 1,257 outpatient surgeries performed in 1996. As a result, Saint Raphael's has become one of Connecticut's leading providers of orthopedic care.

At his first visit, Geiger was hardly able to move his leg. "I had been in an immobilizer for three weeks and my knee joint was so swollen that I could barely move it," Geiger says.

But after four months of outpatient physical therapy, he regained a sturdy leg to stand on. In addition, Geiger had a Saint Raphael physician, Alan Reznik, M.D., provide further treatment during a surgical procedure. "By manipulating the knee joint during this procedure, Dr. Reznik helped me regain more freedom of movement than I otherwise would have had," he says.

During his recovery, Geiger developed a close relationship with Saint Raphael's and its staff. "I'm glad to get better, but I'm going to miss these people," he says.

Ambulatory Care

the emergence of new technologies, many forms of medical and surgical treatment are being provided in new outpatient or ambulatory care settings rather than inpatient hospital locations. For patients, this change means a more appropriate level of care, less time away from home and a speedier recovery.

At the Saint Raphael Healthcare System, our commitment to the highest quality care includes the announcement in 1996 of a \$25 million project to expand the Hospital of Saint Raphael's Emergency Department and improve patient access to a wide variety of ambulatory services.

Growing to meet change

The Department, with almost 43,000 patient visits in 1996, will be expanded to include a second trauma room and two new entrances (one for ambulance use and one for other patients), plus space for a nonurgent care area and two X-ray rooms.

Our high level of commitment was recognized by the Connecticut Department of Health in 1996, as Saint Raphael's was one of nine hospitals to become a state-designated Trauma Center.

The designation underscores Saint Raphael's

determination in providing the best possible lifesaving trauma care to serve the needs and expectations of our community.

While the Hospital's range of trauma care benefits patients foremost, it is also important to area physicians and other hospitals that do not have these capabilities — many of which rely on Saint Raphael's to provide services for their patients.

Targeting community needs

Saint Raphael's outpatient health clinics have experienced significant growth in the demand for their services.

In keeping with the Saint Raphael Healthcare System's caring mission, these clinics specifically target the needs of the poor and underserved in our community. The outpatient clinics provide services in four main areas: pediatrics, women's health, adult primary care and HIV/AIDS treatment.

The clinics had a positive impact on about 54,000 patients in 1996 — about 5,000 more than the previous year. Compared to 1995 numbers, the pediatric clinic had the largest growth, with an

increase of about 3,500 patients. Much of this growth can be attributed to the clinic's expanded service hours. In fact, Saint Raphael's is now the only New Haven pediatric clinic open each weeknight and on weekends.

While the pediatric clinic had the biggest 1996 increase in patient volume, the women's health clinic served about 400 more patients; the adult primary care clinic reached over 1,000 more patients; and the Haelen Center helped 250 more patients with HIV/AIDS.

Saint Raphael's continued to respond to the community's growing needs by also introducing an outpatient neurology clinic. The facility, which opened in March 1996, is designed to provide additional medical services for inner-city patients being treated at Saint Raphael's adult primary care clinic. At the neurology clinic, patients receive medical treatment for seizures, headaches, degenerative diseases and brain tumors. This new clinic enhances the already high level of ambulatory care provided at Saint Raphael's.

While continuing to meet the growing need for outpatient and ambulatory services, Saint

Saint Raphael's announced a \$25 million project in 1996

to expand the Emergency Department and improve ambulatory services. Examining the model are (left to right) Diane

Rescigno-Greene, R.N., Emergency Department; Joan Wnek, R.N.,
Short-Term Surgery; Humbert Sacco, Jr., chair of the

Hospital board Building & Grounds Committee; and Kenneth
A. Ciardiello, M.D., chair of the 1996 Hospital board

Planning Committee and 1997 chair of the board of trustees.

Raphael's has also sought to develop a primary care network involving area physicians — who provide the very basis for our care. In 1996, the Saint Raphael Healthcare System partnered with Family Practice and Internal Medicine, P.C., a growing primary care practice with six offices in five towns throughout the Greater New Haven area.

Partners in success

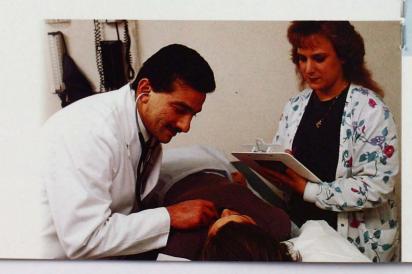
Through this partnership and others, Saint
Raphael's will be able to more directly meet the
healthcare needs of people throughout its main
service area. Partnerships such as these are vital
to Saint Raphael's ongoing success, especially as
primary care physicians gain greater responsibility
for directing patient treatment under managed care
ic. insurance plans.

As our community's healthcare needs continue to grow and evolve — and as medicine makes further advances — Saint Raphael's will always be ready to embrace these changes and take active measures to make care as efficient, effective and convenient as possible for people throughout the Greater New Haven area.

Saint Raphael's is fully committed to developing a primary

care network involving area physicians. To further this
objective, Saint Raphael's partnered in 1996 with Family

Practice and Internal Medicine, P.C. Renzo Renzi, M.D., shown
here examining a patient, is one of the practice's managing partners.





Willie Mabel Butler didn't know the lump in her breast was benign. And, until she had a mammogram at the Hospital of Saint Raphael, Butler didn't even know there was a lump.

It all started at a neighborhood pharmacy. While shopping in Walgreen's, Butler met Zipporah Sealy (a Saint Raphael community outreach worker) who was recruiting participants for the hospital's Sister to Sister Program. Through this program, Saint Raphael's has provided free breast cancer screening to more than 100 low-income women in the New Haven area. After talking with Sealy, Butler decided to have an exam.

With a family history of breast cancer, Butler, a 52-year-old New Haven resident, knew she was at risk. "I thought I'd have the exam just to be safe — especially since I couldn't pay for it on my own," says Butler, who works as a home health aide.

That's when she got the surprise of her life. Although she regularly does a self-exam, Butler hadn't detected the tiny lump in her breast. "I was so scared that I almost ran out the door," Butler says. Fortunately, a biopsy showed that the suspicious lump wasn't cancerous.

Butler thanks Paul Levesque, M.D., a Saint Raphael radiologist, for his kindness and compassion in helping her handle a difficult situation. "I don't ever forget anyone nice," she says. Along with Levesque, physicians such as Andrea Silber, M.D., who founded the Sister to Sister Program, have helped make Saint Raphael's one of the state's premier cancer care providers.

Still, Butler thinks about other women who fear breast cancer. "There's a lot of scared people who just don't want to hear bad news," she says. But in this instance, Butler knows the truth doesn't always hurt.

Reaching Out

he Saint Raphael Healthcare System's caring mission includes a direct responsibility to advocate for and better the lives of the underserved, the poor and the elderly. In achieving this mission, Saint Raphael's provides a wide array of programs designed to reach out and make a positive difference for those most in need.

In order to make that difference, we sometimes must break with tradition and move health care directly into the community.

To provide seniors with greater access to health care, Saint Raphael's opened its sixth Project ElderCare clinic in 1996 at Fair Haven's Atwater Senior Center. Services include geriatric primary care, on-site follow-up visits and routine medical screenings. In 1996, Project ElderCare staff welcomed a total of 1,800 patients - an increase of 555 patients over the previous year.

Changing the lives of children

While the old are often in need, so too are the youngest in our community. To make a healthy impact on the needs of children - and their mothers - Saint Raphael's continues bringing Project

sites in New Haven and West Haven. In 1996, Project MotherCare recorded almost 3,460 patient visits, while performing 12,422 services - including 2,035 immunizations.

In addition, Saint Raphael's continues to operate several school-based health clinics for children in New Haven and a Neighborhood Reading Room for local students and other residents. The Reading Room is supervised by community and Saint Raphael employee volunteers. Beyond their support of this program, Saint Raphael employees provided 11,472 hours of volunteer service to the community during 1996.

> Saint Raphael's also reaches into the community through the Parish Nurse Program – a health and wellness initiative jointly sponsored by the Hospital of Saint Raphael and area religious congregations. In 1996, five new congregations joined the program for a total of 21 churches and synagogues representing more than 24,000 members.

Saint Raphael's also works to enhance the health status of area residents by playing an important role in community organizations. In

MotherCare, a mobile clinic, to six neighborhood

1996. Saint Raphael's was an initiating member of the Greater New Haven Partnership for a Healthy Community. This partnership is seeking to implement a collaborative, community-based approach to addressing health and quality of life issues in the New Haven area

Partners in positive change

In addition, the Hospital of Saint Raphael is a partner in the Consortium for Substance Abusing Women and Their Children. Since 1994, Saint Raphael's has helped to provide funding and other services to encourage the program's success. The Consortium works toward promoting awareness about substance abuse and treatment resources, improving care for substance-abusing women and enhancing collaboration among service providers.

One of the most effective ways to change people's lives for the better is to help them find meaningful employment. In 1996, the Saint Raphael Healthcare System established the H.O.P.E. Program (Having an Opportunity to Prepare for Employment). This program provides parents receiving state AFDC (Aid to Families with Depend-

Saint Raphael's reaches into the community through the Parish Nurse Program — a health and wellness initiative jointly sponsored by the Hospital of Saint Raphael and area religious congregations. Here, program coordinator Sister Ann Matthew (left) and Ann Marie Connelly, R.N. (second from left) meet parish representatives at St. Lawrence's Church in West Haven.

ent Children) benefits with job skills instruction. volunteer assignments for experience and training. and the support of Saint Raphael employees as career mentors.

During 1996, the Auxiliary of the Hospital o Saint Raphael presented four area healthcare stud ents with \$1,000 Geraldine Michaels Memorial Scholarships. The Hospital of Saint Raphael's Nursing Department presented two Community Nursing Scholarships for Minorities. And the Saint Raphael Healthcare System awarded its annual Neighborhood Resident Scholarship to a local high school graduate beginning college studies. In addition, Saint Raphael's offers career counseling services to neighborhood residents.

> Saint Raphael's is also focusing on making our community a safer place for all. During 1996, we presented a three-part series called "Violence In Our Communities," which brought local and national experts together to seek solutions to the public health threat of violence.

By supporting many worthwhile endeavors, Saint Raphael's is proving that a healthy community relies on more than just good health care.

Saint Raphael's established the H.O.P.E. Program

in 1996, to provide parents receiving state AFDC benefits with job skills instruction, volunteer assignments, and

employee mentors. Here, Saint Raphael employee Marion Whittle (right) works with program participant Lisa Watts



1996 Board Leaders

Chairpersons and Presidents



Lucy Ahern Hospital of Saint Raphael Auxiliary



Sister Barbara Aires Sisters of Charity of the Incarnate Word Chairperson, Caritas Insurance Company, Ltd.



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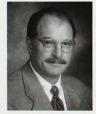
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George Wilson **General Surgery** John P. Amodeo Paul A. Barcewicz Vicente Batiancila Robert Boltax John A. Bonadies

Alphonse Gencarell Angelo Gentile Shukrulla K. Ghofrany Andrew I. Graham Charles A. Guglin Arvind K. Gupta Aron Rose Nina R Horowitz Hugh L. Sauer Raymond J. Ippolito Marvin Sears Karen A Johnson David S. Katz Enrico Khu Walter Kwass Gilbert Manheim Vazrick Mansourian Craig A. Sklar William B. McCullough Christopher M. McLaughlin Sherwin Nuland Amy Y. Tso Michael K. O'Brien Anthony J. Parisi James F. Passarelli Nicholas M. Passarelli Oral and Melissa F. Perkal Theresa A. Ponn Karen Ablow Viswanadham Pothula lames D. Affenito Randolph B. Reinhold leffrey Berkley Stephen Rush Victor E. Chiarelli Anthony Scialla Philip I. Conforti Robert B. Schlessel John Conte Bernard Shapiro Albert M. D'Onofrio Venkatachala I. Sreeniyas Stanley Deitz Stephen A Stein Edward M. Drescher Thomas F. Sweeney Stanley M. Einbinder Jaroslav Turkalo Stanton B. Fater George A. Yavorek John D. Zelem Harold Horton Neurosurgery Philip Hutt Thomas Arkins lames lanuska Issam A. Awad Richard B. Kaplan Gary M. Bloomgarder Andrew Keene Gregory R. Criscuolo Donald W. Kohn Lycurgus M. Davey Kurt Koral Phillip Dickey Andrew I Kressley Charles C. Duncan Bernard Levine Saul Frankel Harvey Lichter Isaac Goodrich Michael Longo Alvin Greenberg Roger A. Lowlicht Patrick P. Mastroiann Michael Matzkin Robert McDonnell Thomas C. McKeon George V. Montano Joseph M. Piepmeier Ronald Montano Franklin Robinson Richard Niego James K. Sabshin Robert Parker Kenneth M. Patrician oseph V. Petrelli, Jr Mark Previtt Arthur Quatrano Kenneth S. Roll Stephen Rozen

Dennis D. Spencer Ophthalmology

Kenneth A. Ciardiello

Mario G. Conte

Ralph DeNatale

Antoine M. Fernein

Eugene J. Fitzpatrick

John F Fenn

Jose C Flores

Abdulrahm A. Alghadyan David M. Brothers Stephen Castracane Iuli M. Dean Howard Distelman Joseph S. Elman Philip M. Falcone Rocco M. Fasanella Robert Fenton Andrew Fezza Michael Fezza Jerome K. Freedmar Paul Guida Peter H. Haffner Jason Horowitz

Mark Schpero

James P. Scialabba

Leonard W. Skope

Robert R. Sorrentine

Thomas Tabachnick

David Topazian

Fedele N. Volpe

Arthur E. Wilk

Paul L. Wineland

Milton B. Wallack

Bertrand S. Weisbart

Ali A. Khodadoust Wayne I. Larrison Andrew J. Levada Peter E. Liggett Harry H. Mark Paul F Masi Mark S. Milner Frederick Mott Charles J. Oestrich Eligio A. Petrelli Richard L. Petrelli Carlton C. Phillips Martin R. Shapiro Douglas Shore Joel P. Silverman David E. Silverstone Scott Soloway Samuel P. Sprotzer Stephanie Sugin Robert A. Wiznia Andrew S. Wong Bernard D. Zuckerman

Ionas V. Lieponis Michael A. Luchini Phillip Luchini Carl B. Lundborg **Maxillofacial Surgery** I. Kevin Lynch Rowland B. Mayor John D. McCallum Thomas P. Moran Michael I. Murphy Peter T. Naiman Robert W. Nolan Alan M. Reznik Earl Rhoades Patrick A Ruwe Enzo I Sella John I. Shine leffrey M. Sumner Raymond Gambardella Martin I Sumne Gregory A. Taggart Tedd I Weisman Scott W. Wolfe Joseph Wu

Otolaryngology Paul W. Alberti David Astrachan Mark S. Bianchi Howard P. Boey Kenneth B. Briskin Maria Byrne Eaton Chen James M. Dowaliby, II. Paul Fortgang Craig S. Hecht Iulian Henley Juan R Hernandez Ronald H. Hirokawa John Kirchner Keat-Jin Lee John R Loeffler Charles Petrillo Clarence T. Sasak John F. Schmidt **Howard Smith** Gordon Strothers Eugenia M. Vining J. Michael Willett Eiji Yanagisawa Ken Yanagisawa

Plastic Surgery

Stephan Ariyan

Jeffrey A. Arons

Orthopedic Surgery John Aversa

Michael P. Connair

Peter A. DeLuca

Ralph Deponte

Richard Diana

David H. Gibson

Alan H. Goodman

Regina O. Hillsman

Michael J. Kaplan

Norman R. Kaplan

John D. Kelley

Robert Kerin

John F. Irving

Peter lokl

Marvin S Arons Zeno N. Chicarilli Alfredo L. Axtmaver Charles Cuono Michael R. Baumgaertner Paul D. Fischer Richard A. Bernstein Stephen V. Flagg Hubert B. Bradburn Stefano Fusi Leon A. Goldstein David Goodkind Danuta Jaworska-Bzymek James R. Lyons Eugene J. Frechette Gary E. Mombello Gary E. Friedlaender John A. Persing Joseph M. Gagliard Irving M. Polaves Gary Price Ricardo F. Gaudinez Richard J. Restifo Jeffrey C. Salomon Henry M. Spinelli Richard S. Stahl J.Grant Thomson Robert Tross Mark H. Weinstein **Podiatry** Anthony R. Aceto Katherine E. Black-Lee Kenneth M. Kramer Peter A. Blume Karen Borsos Carol A. Callahar David S. Caminear John T. Carroll John F. D'Amico Mark I. Daddio

Richard B. Feldman Alan H. Feldman Brian W. Fullem Paul T. Gambardella Edward S. Gensicki Gary Grippo Lee Hurney James G. Krantz Sean W. Lazarus Francis R. Lynch David Novicki Robert P. Novicki Sanjay V. Patel Martin M. Pressmar Danuta M. Reczek Joseph P. Rogers Nancy Silverstein Steven B. Silverstein Glenn Vitale So Wong Abraham C. Yale Neal B. Zomback

Urology Arnold M. Baskin Thomas M. Buckley Joseph Camilleri Joseph A. Camilleri, Jr Alan Davidsor Richard J. Dear Peter Demir Ralph J. DeVito Dilmer L. Diaz David Hesse Mark K. Hirschhorn Stanton C. Honig Richard Lena Alan Malitz Thomas V. Martin Harry Newman Marianne Passarelli Ralph Stroup Frank Tortora

Robert Weiss

The Saint Raphael Foundation Building For A Strong Future

For over 20 years, the Saint Raphael Foundation has secured vital philanthropic support for the Saint Raphael Healthcare System's not-for-profit affiliates, including the Hospital of Saint Raphael and, more recently, Saint Regis Health Center.

Now, as we mark the 90th anniversary of Saint Raphael's presence in New Haven, the Foundation is clearly focused on building an endowment for the decades to come. A growing endowment will help to ensure Saint Raphael's continued financial stability into the year 2000 and beyond.

During 1996, many Foundation donors chose to support the Hospital of Saint Raphael's need for upgraded facilities and enhanced medical technology. Their generous contributions have helped us strengthen our position as one of Connecticut's leading providers of cardiac care, orthopedic treatment and cancer services.

While most donors help meet current needs at the Hospital of Saint Raphael and Saint Regis Health Center (Saint Raphael's skilled nursing facility), others take a longer-term view by building the Foundation's general endowment. Still other donors follow a more targeted approach by creating named endowment funds to support a specific objective or purpose.

For example, the Mrs. C. T. Lee Fund was established several years ago to promote the healing ministry of Christ. During 1996, this Fund sponsored a Saint Raphael physician's medical mission to Ecuador. During this two-week trip, Barry Wu, M.D., a medical director in the hospital's Department of Medicine, joined a team of healthcare professionals from the U.S. and Canada to deliver care to more than 1,900 people. The Mrs. C. T. Lee Fund later sponsored a symposium for caregivers, during which Wu discussed his journey to South America.

In the past year, the Saint Raphael Foundation received donations creating two additional named endowment funds: the Edith Lynn Sachs Fund and the Bill and Violet Young Fund. The Edith Lynn Sachs Fund supports the Father Michael J. McGivney

In 1979, Joseph Cimerol's life ran into a roadblock—a blocked artery to the heart, that is. But surgeons at the Hospital of Saint Raphael were able to perform a coronary artery bypass to avoid the blockage and restore proper blood flow.

During the years since then, Cimerol has continued to rely on Saint Raphael's expertise in cardiac care. In addition to the bypass operation, he has required several other heart-related procedures at Saint Raphael's — such as cardiac catheterization and angioplasty. "My health is in good shape now, thanks in large part to the care I received at Saint Raphael's. I feel that I owe the hospital quite a lot," he says.

That feeling led Cimerol to look for a way to show his gratitude. As a result, the 61-year-old Hamden resident began donating to the Saint Raphael Foundation. "It seemed like the best way to say thanks," he says.

Cimerol and his wife, Angela, have joined in many fundraising events and — through Annual Fund giving — have become members of the Presidents' Circle, which recognizes donors giving \$1,000 or more yearly to the Saint Raphael Foundation. In addition, the Cimerols are thinking about starting a named endowment fund.

"Without Saint Raphael's and its people, I'm not sure I'd still be here today," says Cimerol, who has worked at Olin Corporation for 30 years.

"I received competent and compassionate care from everyone — my cardiologist, Dr. John

Chandler; my surgeon, Dr. Vasant Khachane; and especially the nursing staff," he points out.

Cimerol says that he and his wife, a first-grade teacher, try to do all they can to support Saint Raphael's. "We get a tremendous sense of satisfaction from our giving," he says. In 1996, the Mrs. C. T. Lee Fund sponsored a Saint Raphael physician's

medical mission to Ecuador. Barry Wu, M.D., (center) joined a team of health care professionals from the U.S. and Canada during this two-week program.

Center for Cancer Care at the Hospital of Saint Raphael. The fund, initiated with a \$25,000 donation in August 1996, was established by Deborah L. Sachs, Jeffrey M. Sachs and Judith Sachs Sullivan in memory of their mother.

The Bill and Violet Young Fund supports the growth and development of pediatrics at the Hospital of Saint Raphael. The fund was initiated in October 1996 with a \$15,000 donation by Dr. Richard and Dorothy Young.

Other highlights of 1996 included a Mardis Gras party to benefit Saint Regis Health Center, an ongoing Annual Appeal campaign to support the Hospital of Saint Raphael and Saint Regis Health Center, and our year-end Presidents' Circle membership drive.

During fiscal year 1996, the Saint Raphael Foundation realized overall revenues, gains and other support totaling close to \$2.2 million — which surpassed our goal by over \$560,000. Transfers to the Hospital of Saint Raphael amounted to more than \$1.3 million, while an additional \$100,000 designated by donors was transferred to Saint Regis Health Center. These total transfers of nearly \$1.4 million far exceeded our planned objectives.

Thanks to the generosity of all donors, 1996 was a truly outstanding year for the Saint Raphael Foundation. We look forward to continuing this success in 1997 with exciting new plans to further the Foundation's endowment.

Endowment Funds

Donors wishing to perpetuate their charitable giving to Saint Raphael's may direct donations of any size to the Saint Raphael Foundation Endowment. In addition, they may establish named funds for the general purposes of the Saint Raphael Foundation or to support specific areas of interest. Donors wishing to establish named funds should contact the Foundation at 789-3242.

Named Endowment Funds (New)

Edith Lynn Sachs Fund: Established in 1996 to support the Father Michael J. McGivney Center for Cancer Care at the Hospital of Saint Raphael, with a donation of \$25,000 in memory of their mother by Deborah L. Sachs, Jeffrey M. Sachs and Judith Sachs Sullivan.

Bill and Violet Young Fund for Pediatrics: Established in 1996 to support the growth and development of pediatrics at the Hospital of Saint Raphael, with a \$15,000 donation from Dr. Richard and Dorothy Young.

Named Endowment Funds (Established)

Florence & Biagio Anthony Abbatello Fund: Established in 1992 for the benefit of children who are patients of the Hospital, by a \$20,000 bequest of Florence Abbatello.

Clinical Pastoral Care Fund: Established in 1987 for the Hospital's pastoral care training program, with gifts of \$5.330 from various donors.

Employees Tuberculosis Relief Association of New Haven, Connecticut, Inc. Fund: Established in 1979 for the purchase of equipment to treat pulmonary disease and for pulmonary research and education, with a \$116,000 gift.

First Union Bank Sponsorship Fund: Established in 1995 to support the philanthropic commitments of the Foundation to the not-for-profit entities of the Saint Raphael Healthcare System, with \$109,190 in funds raised through special event sponsorship.

Hendrick Charitable Trust: Established in 1978 for coronary care, respiratory care, and alcohol treatment, by a \$2,965 bequest of Hobart and Mary Hendrick.

Irving Orthopedic Fund: Established in 1991 to improve operating conditions for orthopedic surgery at the Hospital, with a \$5,000 gift from Dr. John F. Irving.

Mrs. C. T. Lee Fund: Established in 1989 for education to encourage a better understanding of the healing ministry of Christ, with a \$25,000 gift from Dr. Keat-Jin Lee in memory of his mother.

Catherine Casagrande Peterson Fund: Established in 1995 to support education to further the skills of the Registered Nursing staff at the Hospital, with gifts and pledges of \$5,000 from Thomas Michael Peterson and other family members.

Santa Maria Assunta Fund: Established in 1983 for the unrestricted purposes of the Foundation, with a \$40,000 gift from the Santa Maria Assunta Society of Woodbridge, Inc.

Joseph A. Weibel Fund: Established in 1978 for the general purpose of the Hospital, by a \$25,000 bequest of Joseph A. Weibel.

Clarence & Lillian Westerberg Fund: Established in 1990 for indigent care, by a \$100,000 bequest of Clarence Westerberg.

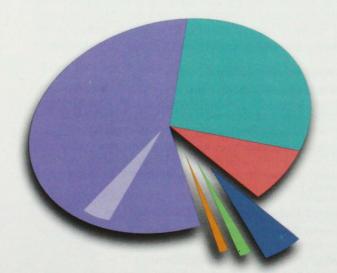
Sharon White Memorial Fund: Established in 1985 for pediatric cardiac care, with a gift of \$5,000 from the Sharon White Foundation.

Financial Performance for the Saint Raphael Healthcare System, Inc.

1996 Operating Highlights

	Net Revenues	Net Expenses	Net Income (loss)
Hospital of Saint Raphael	\$ 249,248,000	\$ 244,606,000	\$ 4,642,000
Saint Regis Health Center ⁽¹⁾	7,079,000	7,544,000	(465,000)
Saint Raphael Foundation (2)	2,122,000	719,000	1,403,000
Others (3)	5,895,000	5,703,000	192,000
1996 Total	\$264,344,000	\$ 258,572,000	\$ 5,772,000 ⁽⁴
1995 Total	\$ 274,809,000	\$ 271,032,000	\$ 3,777,000

- (1) The Saint Raphael Healthcare System's 125-bed skilled nursing facility, which provides priority services to the Hospital of Saint Raphael.
- (2) The organization which secures philanthropic support for the Hospital of Saint Raphael, Saint Regis Health Center and other Saint Raphael Healthcare System not-for-profit caregiving applicates.
- (3) Includes Seton Real Estate (which primarily operates on-site parking facilities at Saint Raphael's), Xavier Services Corporation (Saint Raphael Healthcare System's for-profit affiliate) and DePaul Health Services Corporation (an affiliate which manages Saint Raphael's Magnetic Resonance Imaging Center and renal
- (4) Represents funds available for debt service, capital purchases and working capital. In 1996, the Saint Raphael Healthcare System made more than \$6 million in principal payments to reduce outstanding debt.



1996 Uses of Revenue

- Operating Expenses \$240,038,000 56%
 - Social Accountability Activities \$13,990,261 Initiatives to achieve mission effectiveness and Uncompensated Care \$6,084,000 2% provide community benefit programming.
- Medicare/Medicaid Shortfalls \$126,830,000 29%
- Other Payor Shortfalls \$34,043,000 8%
 - Medical Education \$18,534,000 4%
 - Net Income \$5,772,000 1%

Thank You

The Saint Raphael Foundation wishes to extend its sincere thanks to all who contributed so generously to Saint Raphael's in 1996.

> Should you wish to perpetuate your support through a bequest or planned gift, we would be pleased to discuss various ways to help you meet your objectives while also providing future financial support for our institution.

> > Saint Raphael Foundation 1450 Chapel Street New Haven, Connecticut 06511 (203) 789-3242

The Saint Raphael Healthcare System 1996 Annual Report is produced by the Saint Raphael Public Relations Division. For additional copies, call (203) 789-3509.



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