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Saint Raphael's 1989 Annual Report to the Community

Saint Raphael Healthcare System

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Saint Raphael's



1989 ANNUAL REPORT TO THE COMMUNITY



COUNT ON US TO CARE

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Philip I. Weisinger

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Janne Breadon
Colleen Brophy
Kent Brusett
William Burtis
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Seekook Park
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Charles Staub
Elly Trepman
Alan H. Wynn

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Rafi Tofig

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Robert Aaronson
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Robard Wogel
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Kenneth Kramer
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Kenneth Kramer
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Phillip Luchini
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Joseph Zelson

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1989 ANNUAL REPORT TO THE COMMUNITY

SPRING 1990



Dan Kissing Daniel J. Rissing

Shella Coonan, R.N., and Jackle Davis, R.N., review a patient's charts or recording data from bedside monitors.

Shella Coonan, R.N., and Jackle Davis, R.N., review a patient's chart from the new Cardio-Thoracic Intensive Care Unit.

Shella Coonan, R.N., and Jackle Davis, R.N., review a patient while reviewing patient the charts or recording data from bedside monitors.

As an affiliate of the Yale University School of Medicine, Saint Raphael's and a Cardiac Diagnostic Center of their patient while reviewing patients while a patients while reviewing patients while a patients while reviewing patients while reviewin



surgery or nas been moved to the past year con-ucting research bout the use of attent restraints, common practice common practice to the properties of the properties of the common practice of the properties of the properties of the common practice of the properties of the properties of the common practice of the properties of the properties of the properties of the common practice of the properties of th

Saintraphaet s, actording of the state's best nursing staffs, "Dr Shachane, chief of state's best nursing staffs, "Dr Khachane said. During the first four to eight hours in the CTICU after heart surgery, each patient is assigned an experienced, critical care nurse who provides continuous care. The nuft features single rooms arranged around a central core, equipped around a central core, equipped so nurses may remain with the patient while reviewing patient charts or recording data from bedside monitors.

Saint Raphael's is committed

emotional work. It's not for everyone," said Patricia Brown, R.N. "For example, I recall a Friday afternoon when I was scheduled to go home at 3:30. But a patient's wife was very anxious about what was hap-pening with her husband, and I wasn't about to tell her, 'I'm off wasn't about to tell her, 'Tm off duty now. Talk to some one else' A resident and I ended up talk-ing with her for quite a while until we could help her get composed." Brown said this episode is typical, and it is what



Since cancer is still mysteriThe oncology team includes, from left, R.N.s Vanna Dest and Patricia Brown, Resident John Yost, M.D., and Unit Service Aide

Treating cancer with teamwork

working here." they have things that they do outside of work to get personal satisfaction. But working in a hospital—especially one like Saint Raphael's—gives you the personal satisfaction of helping others in just about every aspect of the job. I don't have

"I just feel good about

about working a

me a sense of social responsi-bility. I just go to work in the morning, and the satisfaction of doing good things is there. We don't turn away anyone who needs care. We treat people based on need, not on ability to pay. I feel good about that policy. In fact, I just feel good being able to say I work at Saint Raphael's.

achieve both my professional and personal goals.

The fact that we value individual dignity has a fot to do with the programs we start, and I have found no barriers to The oncology team includes, from left, R.N.s Vanna Dest and Patricia Brown, Resident John Yost, M.D., and Unit Service Alde Datricia Brown, Resident John Yost, M.D., and Unit Service Alde With the programs we start, and the outcome we expect. Unfortunately, there is to the oncology unit and explain what will happen, and then interns and residents conduct full physical exams of every patient. "Usually the nurse will try to be with the patient during the physicals so we can help answer questions later," Brown said.

Most patients undergo several days of testing, including x-rays and procedures in the Nuclear Medicine Department. Once back on the oncology unit, nurses and nurse's aides make sure patients and their simples, Vanna Dest, R.N., works with the cancer support group to help patients and families understand what is happening. "We involve the family right away so they know what to and I have found no barriers to new projects that respond to our mission. In Psychiatry, we try to serve people who might not have access locare, or those who are uncomfortable going to someone for help. The Sisters of Charity who started the hospital said they wanted to remark the mission will hospital said they wanted to

Hospital of Saint Raphael 1989 Financial Performance

to go outside my work to do things I believe in or that give

Rev. Robert L. Beloin Co-pastor Saint Barnabas Church

Romeo Vidone, M.D. Chairman Department of Pathology

Most Rev. John F. Whealon, D.

Honorary Board Members Sister Louise Anthony Louis Sidoli Atty, Walter W. Walsh

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People you can count on



Morris the Cat is

home at Saint Regis Residents of Saint Regis pastoral care program last year, ing new showers, and purchas-Health Center welcomed Mor-ris the Cat to their pet therapy resident services, said regular generator.

program in 1989. While this piece of news may not seem important at first, it reflects programs that draw out loving responses in almost every patient—and in a nursing home, that is important.

Morris is just one example of

Mossification of the programs that draw out loving responses in almost every patients in the hospital emergency room after a medical crisesponses in almost every patients in the hospital emergency room after a medical crisesponses in almost every patients in the hospital emergency room after a medical crisesponses in almost every patients in the hospital emergency room after a medical crisesponses in almost every patients in the hospital emergency room after a medical crisesponses in the hospital emergency room after a medical crisesponses in care can be vital to a disoriented elderly patient," she said.

Also in 1989, families of new large and nursing care. Executive Director Kim Czepiga said, "We're monitoring wersary of SPIFFY in 1989," said Dorothy Ventriglio, director of volunteers everes. Wethought is was a good idea when we launched the program, and now we know it works." SPIFFY odunteers every as laisons between nursing staff and wait-

Saint Regis resident Lillian Carbonella and Recreation Therapist Susan

Regis' philosophy and upcoming 'no restraint' policy was featured in the New York Imms.

Saint Regis' commitment to making agencies to fill staffing ages, a common practice in nursing agencies to fill staffing ages, a common practice in nursing appendence of to Pursing Supervisor Pauline Gagliardi, 'Seeing the same faces from day to day is evan measure the contunity of care.'' Saint Regis met this objective despite a tight labor market.

Saint Regis also enhanced its Susan

Regis' philosophy and upcoming 'no restraint' policy was featured in the New York Times.

Regis 'philosophy and upcoming 'no restraint' policy was featured in the New York Times.

Regis' philosophy and upcoming 'no restraint' policy was featured in the New York Times.

Saint Regis regis 'philosophy and upcoming 'no restraint' policy was featured in the New York Times.

Saint Regis registry philosophy and upcoming 'no restraint' policy was featured in the New York Times.

Saint Regis registry policy was featured in the Aclacanini, a self-described discisons we make have an ef
Wearing two hats

has advantages

Meads.'' Participation is important to dealcagnini, a self-described discisons we make have an ef
Wearing two hats

has advantages

Meating apolicy have the calcagnini and the calcagnini as self-described desions we make have an ef
Wearing two hats

has advantages

Meating 'about fit
pad was peatured in the According to the care and adapt it to the residents received more information and puddance in the admission process than previous desions we make have an ef
Wearing two hats

Maint Regis many important purposes. It seeds the calcagnini as self-described admission we restend the saint Regis to the care and adapt it to the residents and the popport with the special peads, single planting to the residents and the number of the board of the half care care and adapt it to the resident sees to his involvement with Saint Raphael's is uniquely capable to Calcagnini as a health care leader. His dual roles help's understand both entir Townsend with new friend Morts.

Saint Regis' commitment to residents received more informal fresharing the lives of its residents. Another example is a decrease in the use of nurses from nursing agencies to fill staffing gaps, a common practice in nursing homes. According to Nursing Supervisor Pauline Gagliardi, "Seeing the same faces from day to day is vital toourelderly residents and we can measure the continuity of care." Saint Regis met this ones.

Saint Regis' Saint Regis' waiting list grew in 1989 from 100 to 411. The average year-end occupancy ratewas 99.35%. According to Czepiga, with Cheryl Byerlee, care plan coordinator. A monthly newsletter, I geislation that cut \$225,000 from the Saint Regis budget, most the Saint Regis budget most province the Saint Regis budg

Help for heart patients

Families count on volunteers

use of traints, and traints and traints and traints and traints. Corinne Falella, left, and Erna VanBruinisse.

Corinne Falella, left, and Erna VanBruinisse.

Corinne Falella, left, and Erna VanBruinisse.

SPIFFY volunteers receive special training beyond the regus philosophy, while medicine is program because it keeps the program because it keeps the said.

Corinne Falella, left, and Erna VanBruinisse.

SPIFFY volunteers receive special training beyond the regus special training beyond the regus but there's no way to measure the contribution they make to the lives of our patients."

Saint Raphael Boards volunteer time and leadership

Jonald Calcagnini says the fost on human lives."

Donald Calcagnini says the sissues that challenge Saint Rapael's make his role as chair person of the hospital boards or rewarding. "Health care is in swake aprogrestle pandelimite restraints for jority of our ents." Saint is provide the right kind of leadership. It's tough. We have to allocate limited resources for a great many important purposes. It's very compelling to know the aint' policy.

Though Calcagnini and other community leaders volunteer their time and leadership to selend of knowledge and experition and management. In fact, the members of the board have a blend of knowledge and experition is a variety of fields, and we all attempt to apply what we know to help lead Saint Rapael's several boards of trustees and directors, they take their work shown to help lead Saint Rapael's several boards of trustees and directors, they take their work shown to help lead Saint Rapael's several boards of trustees and directors, they take their work shown to help lead Saint Raphael's several boards of trustees and directors, they take their work shown to help lead Saint Raphael's several boards of trustees and directors, they take their work shown to help lead Saint Raphael's several boards of trustees and directors, they take their work shown to help lead Saint Raphael's several boards of trustees and directors, they take their work shown to help lead Saint Raphael's several boards of trustees and directors, they take their work shown to help lead Saint Raphael's several boards of trustees and directors, they take their work shown to help lead Saint Raphael's several boards of trustees and directors, they take their work shown to help lead Saint Raphael's several boards of trustees and directors, they take their work shown to help lead Saint Raphael's several boards of trustees and directors, they take their work served work in the dedership. It says the seven their time and leadership to some their time and leadership to some their time and leadership to some thei

to medical education

teer," Ventriglio said. "He or she must be able to work with a variety of people and anxiety levels."

sadors. Through SPIFFY they

teer programs at Saint Raphael's More than 500 women and mer

Foundation thrives on

community support The Saint Raphael Founda-tion received nearly \$1 million during 1989 through donations, new capital pledges, and de-ferred gifts. This brings the total



Henley-Cohn, and Dr. Arthur Knowlton.

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Another special event—the Winner's Choice car raffle—raised \$52,000. This fundraiser was chaired by Board members of the Saint Raphael Healthcare System.

According to Richard H. Fitzpatrick, Jr., chairman of the Foundation Board, charitable gifts to the Foundation are an investment in quality healthcare for the entire community.

These funds have built new cancer center, and it was a pitch the event's success, specially the generous sponsorship of the Knights of Coundation are an equipment, made programs and expectations and the volunteer leaders and the volunteer leaders and the volunteer leadership of Richard C. Lee, Betsy and equipment, made programs and expectation of the foundation are an expectation of the production of the foundation in 1989 also continued to receive gifts through trusts, bequests, and endowments. "Anothony and expectation of the production of the produc

Operating highlights (Tho	usumus of m	иштэ)			
			Increase (Decrease)		
	1989	1988	Dollars	%	
Patient revenues	\$157,340	\$126,673	\$30,667	249	
Other operating revenues	3,509	2,680	829	31	
Operating expenses	159,523	128,845	30,678	.24	
Income from operations	1,326	508	818	161	
Non-operating revenues	1,384	1,433	(49)	(3)	
Funds available for new technology	5 2,710	S 1,941	s 769	409	

Operating highlights (Thousands of dollars)

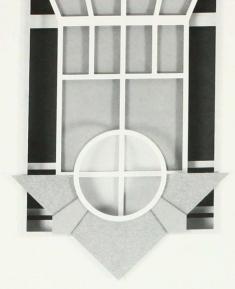
	1989	1988	Increase (D Units	ecrease) %
Patient days, excluding newborns	153,445	141,538	11,907	89
Average length of stay,				
excluding newborns	8.7	8.2	.5	6
ercentage occupancy,				
excluding newborns	97.6	96.5	1.1	- 1
ase mix index	1.30	1.30		-
Discharges:				
Medicare adult	7,082	6,791	291	4
Non-medicare adult	10,533	10,438	95	1.
Total adult	17,615	17,229	386	2
Newborns	1,501	1,449	52	4
Total discharges	19,116	18,678	438	2
R visits	38,834	38,126	708	2
ancillary services:				
Operating room (Minutes)	4,902,250	4,965,540	(63,290)	(1)
Laboratory (Tests)	1,394,377	1,176,282	218,095	19
Short term surgery (Cases)	6,814	5,588	1,226	22
full time equivalent employees	2,241	2,123	118	6
Operating Margin	.9	.4	.5	125

John A. Figurelli President Sargent Manufacturing

William J. LaVelle, Jr. President

Atty: Stephen Saltzman Brenner Saltzman Wallman & Golde

INSTITUTE FOR BETTER HEAUTH President/Chief Executive Officer Paul J. Taylor Vice President Saint Raphael Healthcare System



TO THE COMMUNITY 1989 ANNUAL REPORT

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1989 AT A GLANCE



geopatric assessments for people like Yolanda Fortini are conducted by Dr. Jack Merrit, seated, and standing from left Kathy Heard, R.N., M.S.N., and Patty Laucks, M.S.W.

Cardiovascular Technology Supervisor Raul Alcebo, left, and Dr. Phillip Fazzone use a state-of-the-art heart/lung machine during heart surgery.



Saint Raphael kitchen staff in July prepared more than 1,000 meals for tornado victims. From left: Angelo Giannopoulos, William Ostrowski, and Michael



Graduates of the Take Heart cardiac rehabilitation program reunited to celebrate their renewed good health.



- Saint Raphael Healthcare System is streamlinedcorporate restructuring better prepares Saint Raphael's for the
- Saint Raphael's is one of 120 hospitals nation-wide to get newest high tech heart/lung machine
- Saint Raphael's again accreditation by Joint Accreditation of Healthcare Organiza tions (JCAHO).
- Saint Raphael employees pledge more than \$60,000 in donations to community agencies.
- Hospital launches national drug trial for stroke victims
- · Saint Raphael's Senior Assessment Center opens, providing overall assessments of elderly people and offering help to remain independent and healthy.
- Pregnancy Health Line launched to curb newborn deaths— Saint Raphael's and others in community offer help.
- CareCard senior membership roster grows to more than 1,500. Programs and services enhanced to help seniors live healthier lifestyles.
- Saint Raphael's goes smoke free. Cleaner indoor air benefits patients, visitors, employees, physicians, volunteers, and all who enter our facili-
- Hospital kitchen makes 1,200 dinners for area tornado victims.
- Optifast opens at Saint Raphael's. Hundreds of area residents lose thousands of pounds and begin healthier lives and lifestyles.
- · New Haven Medical Hotel breaks groundcompletion date set for November 1990.
- Saint Raphael Healthcare System and Capone Development, Inc., continue to market Halecroft of Chesire, a secure, independent, and gracious option for seniors seeking a continuing care retirement community

