

setting the foundation *for the future*

2017 Annual Report



a letter to our COMMUNITY



Jill Berry Bowen & Kevin Manahan

What an exceptional year of progress! One constant amidst the swirling changes in healthcare has been the shared commitment of the NMC staff, Medical Staff, Board, Volunteers, and entire NMC family to our mission of providing exceptional care for our community. Our team works tirelessly each day toward that mission in

pursuit of our vision for a healthier future which speaks of excellence, value, and wellbeing. It is our pleasure to share with you this annual reflection on our progress, highlighting some of the many achievements on that journey – including being named **one of the nation's Top 100 Rural & Community Hospitals!**

Facility enhancements to our healing environment have been an exciting visible focus for us this year and they are nearing completion! Our new private inpatient rooms are providing greater restfulness and privacy for our patients, facilitating healing, learning, and family support. The new addition for rotating medical clinics will soon host visiting specialists to expand access to necessary preventive care. Already practicing in that space are our Cardiology and Pulmonology clinics as well as Northwestern Women's Services, our OB/GYN practice. The Medical Office Building, opening in November, will bring Northwestern Primary Care, Urgent Care, Orthopaedics, and the Outpatient Laboratory into flexible, expanded, efficient new space. This was made affordable through our years of intentional savings and the amazing generosity of our community. Our sincere thanks go out to everyone who contributed to make these enhancements possible – and to all of you for your patience during our construction!

This past year has seen continued momentum in the RiseVT movement to embrace healthy lifestyles across Franklin and Grand Isle communities. Families, schools, businesses and municipalities are making positive changes for a healthier future. This is healthcare reform in action, as prevention is truly the path to a healthier and more affordable future for all of us. That progress has earned statewide interest and OneCare Vermont (the statewide Accountable Care Organization - ACO) has adopted RiseVT as their statewide strategy for improved community health through primary prevention! At the same time, NMC continues to be recognized as a leader in efforts to create a more sustainable healthcare system within Vermont, working to preserve access and quality while reducing costs within that system. We are actively working at the State level with our regulators and elected



On the cover:

"

The new Medical Office Building, on track to open in November, brings Primary Care, Northwestern Urgent Care, and Orthopaedics into flexible, expanded, efficient new space at the front of campus allowing us to better keep pace with growing community need."

officials to improve the system. We are an engaged partner in the local Unified Community Collaborative that brings together key healthcare providers and stakeholders to collaborate on the coordination of care. Together we are working through various aspects of reform, including integration opportunities and actively evolving from volume based 'fee-for-service' reimbursement for caring for the sick to Population Health payment to keep a community healthy. We are more than a traditional hospital treating illness; we are the catalyst to the population achieving optimal health. We are proud to say the 'big blue H' on the roadsigns now stands for a community centered on health!

Through it all, the focus of the entire NMC team on caring for our community has never wavered. We continue to achieve high quality marks and expand access while having among the lowest overall rate increases in recent years. On behalf of all of us at NMC on our main campus and across our many community locations, thank you for entrusting your care to us.

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Jill Berry Bowen, RN Chief Executive Officer

Kevin Manahan President, NMC Board of Directors



Partnering for a Healthy Future ...

NMC's vision calls on us to "partner to improve the wellness of our community" while living our vision of "providing exceptional healthcare for our community." Those fundamental passions are based upon the Community Health Needs Assessment, inform our strategic plan, and guide our community benefit investments. In doing so, NMC rises beyond being a vital healthcare provider and one of the region's largest employers and accepts our role as a driving force in improving the quality of life in our community.

Addressing Community Needs

As you can see in the report shared on the NMC website, the top priorities from the current Community Health Needs Assessment are:

- Mental Health & Substance Abuse;
- Obesity;
- Smoking;
- Cancer;
- Suicide; and
- Domestic & Sexual Assault.

These priorities are not unique to northwestern Vermont. We are very proud of the open and collaborative approach that our community takes in addressing these priorities. Each one is too big to be addressed on its own. True improvement comes through partnerships. NMC is pleased to work side-by-side with great community partners for a healthier future for all. Throughout this report are highlights of our work on these priorities, including the remarkable work of our Comprehensive Pain & Addiction practice and the engaging RiseVT movement that is inspiring so many in our community to embrace healthy lifestyles. This year, when the opening of BAART's new addiction treatment facility was delayed, NMC immediately stepped forward as a collaborative partner and provided temporary space so patients could get the care they needed. Within RiseVT, we are delighted to partner with the Vermont Department of Health and so many local businesses and municipalities on becoming more Breastfeeding Friendly. This collective work earned St. Albans City a Mayoral proclamation as a Breastfeeding Friendly City – a rare designation that truly speaks to a community commitment to healthier lifestyles!



RiseVT: Continuing Strides Toward a Healthier Community

The RiseVT movement to embrace healthy lifestyles in northwestern Vermont continues to gain momentum with growing awareness, increasing participation, and so many creative initiatives across our community.

What began as a partnership between NMC and the Vermont Department of Health is now taking hold in our schools, businesses, and municipalities as individuals and families join the fun of active play, eating well, and other healthy habits.



In keeping with evidence-based best practices, RiseVT developed 'scorecards' for individuals,

schools and classrooms, businesses, and municipalities to help celebrate existing strengths, identify opportunities, and track small and large wins on our collective journey to a healthier future. There have already been some wonderful improvements and achievements! In an excellent example of partnership and amplifying an existing resource, RiseVT partnered with Local Motion to bring bike training (and a trailer full of bikes to enjoy) to over 2050 school children and families in Franklin and Grand Isle counties.

Growing out of municipal conversations RiseVT helped support and energize, the Village and Town of Swanton incorporated bike lanes and sidewalks into their 'Complete Streets' design and added flashing beacons to support the Safe Routes to School initiative in their community.

As a step toward healthy starts for our youngest community members, RiseVT has amplified the work of the Vermont Department of Health around breastfeeding. There are now more than 47 breastfeeding friendly businesses in our area and St. Albans City has been officially proclaimed a Breastfeeding Friendly City —making it one of only a handful of municipalities across the United States with such a designation!

As part of our work to track improvements in our community's health, RiseVT partnered with local schools, under the shared leadership of Program Manager Denise Smith and VDH District Director Judy Ashley, to gather the height and weight of all of the 1st, 3rd, and 5th graders in Franklin and Grand Isle counties. Eighty-eight percent of the children —1,688 students—participated.

The results from our measurement project are now being analyzed by the UVM researchers. That data will become an important benchmark for us to measure progress against as RiseVT continues to engage northwestern Vermont in embracing healthy lifestyles.

Come join in the fun of RiseVT as we move towards a healthier future. Visit us at **RiseVT.com**, take the pledge, get some ideas from the scorecard, and explore all the great opportunities to embrace healthier habits. Connect with us on social media and join this movement! Let's rise together!





ST. ALBANS CITY IS NOW OFFICIALLY A BREASTFEEDING FRIENDLY CITY AND IS ONE OF ONLY A HANDFUL OF CITIES ACROSS THE USA WITH THIS DESIGNATION.

On the Rise Statewide

As the RiseVT movement has gained momentum locally, it has caught the eye of leaders from across the state in healthcare, business, government, and other sectors. They see the value in primary prevention – in changing our culture so the healthy choice is the easy choice and in all of Vermont coming together to embrace healthy lifestyles. There is growing understanding that this is the path towards a healthier future and lower overall healthcare costs.

From this, a group of statewide stakeholders reviewed RiseVT and found it aligns beautifully with healthcare reform and improved population health. With that, a Statewide Board of Directors was formed and RiseVT was adopted by OneCare Vermont as their statewide primary prevention strategy. **The State Board includes:**

- Chairperson Jill Berry Bowen, NMC
- Don George, BC/BS of Vermont
- Win Goodrich, FNWSU School Superintendent
- Steve Gordon, Brattleboro Memorial Hospital
- Deanne Haag, MD, Northwestern Pediatrics
- Chris Hickey, NMC
- Mark Levine, MD, Commissioner of Health
- Janet McCarthy, Franklin County Home Health
- Todd Moore, OneCare Vermont
- Beth Tanzman, Vermont Blueprint for Health
- Lisa Ventris, Vermont Business Roundtable
- Eileen Whalen, UVM Medical Center

That Board is working with RiseVT Medical Director Elisabeth Fontaine, MD, of Northwestern Lifestyle Medicine to put the structure and resources in place that will facilitate the expansion of RiseVT. It is an exciting time, as there are many promising initiatives happening in communities across our state that will benefit from RiseVT's approach of focusing on community need, amplifying existing resources, investing in grassroots initiatives, strengthening partnerships, and leveraging opportunities.

At the beginning, we named it RiseVT intentionally, as we believed all Vermonters would benefit from increased attention to primary prevention. We are so pleased to see partners around the state agree and work with us to bring the movement statewide.

Community Health Needs *Tobacco Cessation*

Primary Care Provider Sparks A Father of Three to Quit Smoking

Sometimes being a quitter is a good thing: Mike Royea quit smoking this year to make sure he'd be around to see his 8-year-old son graduate from high school. Royea works at NMC, and is a single parent of three kids.

He worked with his Primary Care Provider to come up with a plan to stop smoking. He started using a cessation medication, called Zyban, and created a 7-day quit plan. On day seven, he stopped.

This is Royea's third attempt in recent years, but he said that this time feels different: "I didn't find it hard," he said. "I chose to quit around Christmas because I knew that I would be going here and there and wouldn't have a place to smoke. I was really busy."

In addition to that strategy, Royea said that making sure he was thinking of his kids before himself helped him stay focused. The Franklin Grand Isle Tobacco Prevention Coalition is proud of Mike Royea.

Smoking makes heart disease, stroke, cancer emphysema, chronic bronchitis more likely and smoking is identified as one of the top health priorities in NMC's Community Health Needs Assessment.

I knew what smoking was doing to my body, but I started looking at my youngest and wondering if I'd be around to see him graduate."

— Mike Royea



CONSIDERING MAKING A QUIT ATTEMPT, WE'D LIKE TO HELP.

In addition to your primary care provider, there is free coaching, patches, gum and lozenges from NMC's VT Quit Partner, Chari Andersen, RN (524-8480 or candersen@nmcinc.org) or check out www.802Quits.org for additional free resources.

Community Health Needs Cancer Care



Teaming Up on Proactive Lymphedema Care

Editor's Note: This article was originally published in the St. Albans Messenger and written by Messenger Staff Writer Elaine Ezerins. This abbreviated and modified version is reprinted here with the permission of the Messenger.

ST. ALBANS — Alene Spiekermann, 65, a retired elementary school teacher at St. Albans City School for more than 30 years, is the first cancer patient to enroll in NMC's new lymphedema prevention program.

She met with Wendy Lawrence, a certified lymphedema physical therapist at NMC and learned a daily routine to follow on her own before and after cancer treatment surgery. Since then, she has not experienced lymphedema symptoms since undergoing surgery in August.

Lymphedema is a build-up of fluid that can occur after cancer treatment, especially when lymph nodes are removed. The program came about as Breast Care Nurse Navigator Chelsea Mulheron spoke with patients during her work. "Just hearing from survivors inspired me," she said. She often heard women were surprised by unexpected swelling after surgery. Mulheron reached out to Kristy Cushing who Manages NMC's Rehabilitation Services Department and the two teams came together to develop a proactive approach to lymphedema care.

When a specific surgical procedure is recommended by a doctor, NMC's staff jump into action, and offer the patient

a chance to see a physical therapist certified in lymphedema prevention prior to surgery.

The goal of this up front education is to prevent the lymphedema from developing, as NMC provides resources to educate patients and monitor swelling pre-operatively and post-operatively.

I did the exercises, and I haven't experienced any lymphedema. So I'm feeling really good. This pre-operation information really helps. It was very informative."

— Alene Spiekermann, participant

The program partners NMC's breast cancer care team with physical therapists and the collaboration has been well received by patients who enjoy the wrap-around care and preventive focus.

Hope and Healing

Wraparound care supports recovery



Paige McCabe was 14 years old when she had her first experience smoking marijuana. As a freshman, she started a habit that began as a seemingly harmless pastime with friends, but which escalated. By the time she was 16, Paige found herself immersed in the world of opioids.

"I had emotional issues, so using helped me to cope with things and made me feel better," said Paige. Although she thought opioids could help, her life eventually started to unravel.

She spent high school being harassed by classmates, struggling with schoolwork, and running away from home to try to escape. In her early 20s, her opioid use contributed to the loss of her job, her apartment, her friends, and even her family. It took about 10 years for Paige to come to terms with her selfdestruction.

"When I woke up in the morning I didn't like the feeling of not being able to do anything," she said. "It's a miserable life when that's all you think about is being high and whether you will be able to function."

Now at 24, Paige is on the path to recovery. Even though Paige continues to feel the impact of her decisions from the previous

Being sober, I can wake up in the morning and actually want to do something instead of lying in bed all day."

— Paige McCabe (pictured, left)

10 years of her life, her three months in recovery have thus far been a success.

Paige is one of many who suffer from opioid use disorder in Franklin County and Vermont. Opioids are synthetic narcotics containing the compound opium and are typically prescribed by doctors to relieve pain. Some common examples of opioids include: Oxycodone, Morphine, Vicodin, Percocet, and the most notorious street version, Heroin. The state of Vermont has seen a drastic increase in the use of these drugs over the past ten years. In 2014, then- Governor Peter Shumlin declared that his home state faced an opioid epidemic.

According to a report of the Substance Abuse and Mental Health Administration, an estimated two million dollars' worth of heroin illegally was trafficked into the state weekly and Vermont saw an 80% increase in the number of opioid admissions to addiction treatment programs, making it clear that it was time to take action. At NMC, that action took the form of implementing additional services and support for individuals in need through a three-year Substance Abuse and Mental Health Services Administration (SAMHSA) grant. By 2016, the SAMHSA grant funded program got rolling to help people like Paige discover their path to recovery.



This program was designed to improve services and outcomes including access, engagement, retention, and equity. It seeks to improve the coordination and integration of services and improve patient-level outcomes including: reduction in substance abuse and symptoms, increase in recovery, and enhancement of patient care and satisfaction.

The state program just celebrated a successful first year and is on track to secure its goal of 375 participants in three crucial counties in the state: Franklin, Chittenden, and Rutland. It focuses on three specific populations: those involved with the Department of Corrections, the Department of Children and Families, or on the wait list for care. The total grant funding is approximately \$950,000 for all three counties, \$200,000 of which is used in our communities. The grant funding and management in Franklin County is directed by Northwestern Medical Center. RN Practice Coordinator Kelly Campbell helps oversee the fundamental objectives of the grant.

A key to the program's success is the hands-on role of the Medically Assisted Treatment (MAT) Coordinator. This coordinator works closely with ... (continued on next page)



\$3 million grant expands options for opioid treatment and prevention

In 2015, The Vermont Department of Health, Division of Alcohol and Drug Abuse Programs was awarded a 3 year, \$3 million grant to enhance treatment service systems to provide accessible, effective, comprehensive, coordinated care, and medication assisted treatment and recovery support services to individuals with opioid use disorders. Expanding the Options for Medicated-Assisted Recovery in Vermont project is targeted to people with opioid use disorders in one or more high-risk groups: those involved with the criminal justice system, parents involved in the child welfare system, and those motivated for MAT but waitlisted. Funded by the Substance Abuse and Mental Health Services Administration, Vermont's project has expanded capacity in Addison, Chittenden and Franklin counties. (continued from previous page) ... participants to track engagement and ensure retention. Melinda Lussier stepped into the role of MAT Coordinator six months ago. She works with the participants in Franklin County, including Paige McCabe. Recovering from addiction herself, Melinda brings an intense passion and commitment to her role. When Melinda tells her story of her personal journey to recovery, she felt "bankrupt in spirit" and hesitant to ask for help. On the outside she seemed fine, but on the inside, something was missing. Only after her third attempt at recovery did she realize helping others in recovery could give her a sense of fulfillment.

"Having my addiction skyrocket was what made me realize I need to be of service to other people in the way that others were of service to me," she said. She knows these struggles because she lived them. Melinda said she provides support and accountability that the program participants need and struggle to find.

Melinda works side by side with Northwestern Medical Center and RN Practice Manager Kelly Campbell to put systems into place that are sustainable and effective statewide. While Melinda focuses on the daily tasks involved with the the learning collaboratives are a key reason.

Kelly said that this grant program has created a lot of opportunity and promise saying that "One of the biggest bonuses of us getting this grant, is having these organizations come together and work together towards these common goals." As these organizations work diligently towards improvement, it is evident the state is on its way to a brighter future.

She says other states are looking to Vermont for guidance as they start their own programs for opioid treatment. In fact, a group of people from North Dakota made a trip to

"Having my addiction skyrocket was what made me realize I need to be of service to other people in the way that others were of service to me."

Melinda Lussier, stepped into the role of Medically Assisted Treatment (MAT) Coordinator six months ago. She works closely with participants to track engagement and ensure retention. Recovering from addiction herself, Melinda brings an intense passion and commitment to her role. Northwestern Medical Center this year, including representatives from corrections, healthcare, and addiction treatment, who sought to learn from NMC as they begin work on new programs in their state

As the SAMHSA grant program enters its second year, Melinda and Kelly both say that there is still a lot of work to be done. But both are proud of the progress.

In one quarter alone there were nine successes for patients enrolled in this program, with participants overcoming addiction and even more importantly, making life transformations.

grant operation, Kelly supervises the grant on a larger scale focusing on areas like building structure and resources for participants. One of the structured elements of the program are regular urine tests to monitor for substance abuse during treatment. Another important aspect of Kelly's job is attending "neighborhood" meetings where she connects with representatives from different organizations such as The Department of Children and Families, the Howard Center, Northwestern Counseling and Support Services, law enforcement, and others. These meetings are one of the three-part quarterly learning collaboratives that are part of the grant. Along with the neighborhood meetings, there are also collaboratives for the behavioral staff and the medical staff involved in the program. Vermont is leading the way for other states in regard to opioid treatment, Kelly said, and Paige McCabe said that she struggles to be around other people and in groups and to form relationships. Now, though, she is stepping outside her comfort zone, planning to attend her first group support meeting with Melinda by her side. Paige is also working to mend the relationships that she damaged while she was in the midst of her addiction.

This program has been a saving grace for many participants like Paige who struggle to beat addiction. The strength of the initiative, though, lies in the commitment of staff, participants and the "neighbors" who come together to build a framework of support for recovery.

The peer connections and compassionate community caring are what turn a grant program into a meaningful and lasting solution.

Real-Time Results Means Quicker Access for Patients

This year, the innovative Information Technology team at NMC created a brand new interface system for cardiac testing. Electrocardiogram (EKG), Holter Monitor and Stress Tests are now being imported directly from our MUSE cardiology data system into our Meditech Electronic Medical Record (EMR) for accurate results in real-time.

What does this mean for the patient? With real-time resulting, patients can log into their EMR to see important test results much earlier than ever before – no more waiting to complete manual processes. The potential for human error is eliminated with this new automation.

What does this mean for the hospital? The introduction of this streamlined process creates numerous efficiencies. As a LEAN initiative, this automation has increased quality, reliability and accuracy – a valuable process improvement that impacts many groups in the organization.

The new system eliminates the need for staff to look up each patient, manually scan paper image strips, and verify their work afterward. The time savings of scanning alone is approximately three to four hours a week.

What does this mean for providers? Exact copies of the original test are now directly inserted into the EMR. This replaces the scanned images previously used, resulting in vast improvements in image quality. In addition, the image results are immediately available to clinical staff for review.

The organization thanks the hardworking individuals behind this major process improvement. This innovation is just one example of how NMC continuously strives to provide exceptional care.





Pictured above: Desarae Gabree, RN, monitors a patient during a stress test at NMC.

I could not have had a better experience. Honestly, I wasn't expecting it. My EKG experience that day was just as stellar. Good for all of you—and me too."

— An NMC patient

setting the foundation for the future

2017 was a year of milestones on the NMC campus as the hospital's Master Facility Plan construction celebrated many key moments in the transformation of our infrastructure to meet future community need. The work that began with a spring 2016 groundbreaking continued apace throughout 2017 and will culminate with final touches to the renovated inpatient unit in early 2018. The new buildings provide efficient and accessible spaces with the newest technology and specialized designs. **Here are some of the defining moments of the past year and special construction features**.



MAY 24, 2016 Groundbreaking ceremony for the NMC Master Facility Plan

> **JULY 25, 2016** NMC's loading dock temporarily relocates to back of the main hospital building.



OCTOBER 30, 2016

The lattice work boom crane starts to swings steel into place for the Medical Office Building, the largest structure in the Master Facility Plan construction.

JUL NMC² for rei begin throw

JULY 11, 2016 NMC's front entrance closes for renovations. The public begins accessing the hospital through the Conference Center entrance.

AUGUST 23, 2016 First steel is erected for the

First steel is erected for the project at the back of campus for the inpatient unit expansion.



The new Progressive Care Unit has two Airborne Infectious Isolation rooms. These are designed to more easily make the room negatively pressured for isolation purposes, provide an anteroom for gown donning and doffing, and to be more easily cleaned.

60,000

SQ. FT ADDED

17,700

SQ. FT RENOVATED

BETTER **LIGHTING!**

Exterior lighting was replaced around campus where construction occurred with LEDs, which are energy efficient and provide warmer, more natural light.

> **30%** LARGER

MEDICAL-SURGICAL PATIENT

ROOMS IN THE NEW BUILDING

Bigger, private rooms

for a patient-family

centered approach

え EASIER ACCESS

The new *Porte Cochere* is bigger and wider than the old one. The term comes from the French word for "coach door" & dates back to the 1690s when it referenced gateways for horse-drawn carriages that provided arriving and departing occupants protection from the elements.

WIDER ROADWAYS

The new roadway around the front entrance to the Emergency Department will be about 40 feet wide, 10 feet wider than the old road.



DECEMBER 21, 2016

The new main entrance and renovated lobby re-open to the public. The lobby is reconfigured to provide easy access, central registration, and convenient financial assistance.



MAY 2017

The Medical Clinics Building opens, bringing Northwestern Cardiology, Pulmonology, Women's Services and Northwestern OB/GYN under one roof, in a new building directly adjacent to the main entrance.

APRIL 2017 The new Progressive Care Unit opens, providing private rooms for each and every patient.



GRAND OPENING! NOVEMBER 2017

The two story Medical Clinics Building opens. This busy structure houses NMC's Outpatient Lab, Northwestern Primary Care, Northwestern Urgent Care and the Northwestern Orthopaedic & Rehabilitation Center.

hi-tech, high quality individual care new patient care units



A new patient unit ...

full of light, personal touches, and highly efficient design, with technology at the heart of what we do.

The room was large and I was surprised that there were no visitor chairs, then a nurse pulled one from the closet—brilliant idea, that way you only take out what you need."

— An NMC patient



Color coded areas to help family find their way around

Nursing work areas are right outside patient __ rooms - close by yet offering privacy

Convenient handwashing stations

-

Making access easier: NMC and Vets kick off valet services

As you approach the main hospital entrance at Northwestern Medical Center you now see a man wearing a bright blue vest with yellow trim, a veteran's baseball cap, and a smile on his face stretching from ear to ear.

You may wonder who is this gentleman greeting you as you enter the hospital or asking you if you need a ride as you wander aimlessly around the parking lot.

This program sprang into action on April 5 of this year on a volunteer basis, providing patients with an easier source of transportation between the three separate buildings that comprise NMC's campus.

"Everybody loves the service," states Bill Bronson, one of the veterans who devotes his time twice a week to driving



PICTURED: The six-passenger electric vehicle that is used to transport patients and visitors around the hospital campus.

for the Valet Program. "In the first month, we had 69 riders, in the next two, we had over 400 riders!"

These men that are the first friendly faces to greet you as you walk through the hospital doors are volunteers for NMC's newest asset, the Veteran's Valet Program.

It's no surprise that the program recently gained some recognition after hearing comments from some of the riders. Mike Brouillette of Saint Albans is at NMC on a regular basis for his wife's hip appointments. He stated on his ride that it was "a really nice service because it is a long walk," from building to building, especially for the elderly. "I hope they keep this service."

Another woman that jumped into the vehicle was very enthusiastic about the service as well. "We were here two weeks ago and my mother who is 84 really struggles to walk," she said. She raved about how great it was that NMC was so accommodating for their patients even stating how much she "loves this hospital".



The patients aren't the only ones who are happy about the service, the veterans are happy to be of service to their community.

Veteran Roger Spaulding, of St. Albans, said he likes the program because it "gets him out of the house" and gives him something to do.

Roger is a long time member of the Saint Albans community and it showed on his ride along when the first rider he picked up, he happened to know very well.

Approaching the Cobblestone Health Commons, a young man with two metal canes crutched out the door. Roger immediately jumped out of the vehicle to provide the man with assistance getting in. The young man named Bradley Bard, also a long time resident of the area, stated how "it's nice to have a ride instead of having to walk" as it really saves him some time. The two made small talk during the travel back to the main hospital entrance—an example of how NMC's strength is built on relationships.

Once back at the main entrance Bradley revealed that Roger was actually his neighbor and said "I'm walking because of him". When Bradley was just six years old, Roger had helped him get admitted into the Shriners Hospital for Children in Montreal. The hospital specialized in providing care for children with orthopedic conditions like Bradley's. Nearly 35 years later, Bradley is now mobile on his own.

The convenience and gratitude for this new valet service is evident from the enthusiastic feedback from the patients. Having a service run by men who fought for our country and continue to volunteer their time to NMC, shows how important it is to our hospital to provide care and to create the best patient experience with a genuine commitment to the community.

Exceptional Campaign Surpasses Goals

Exceptional ... the Campaign for Northwestern Medical center was a tremendous success, surpassing all goals and raising nearly \$2.8 million in support of NMC's Master Facility Plan construction projects.

The generosity of our community has been overwhelming," said Leon Berthiaume, the Campaign Cabinet Chair and Vice President of NMC's Board of Directors. "Thank you to everyone who contributed time, talent and treasure toward the advancement of our local healthcare as this support truly made all the difference in exceeding our goal and expectations."

465 TOTAL NUMBER OF DONORS

THE FIRST CAMPAIGN COMMITMENT: \$100,000 FROM NMC'S AUXILIARY

NEW GIFT GALLERY THANKS TO \$100,000 FROM THE GARIBAY FAMILY

40 GIFTS BETWEEN \$25,000-\$50,000 LARGEST SINGLE GIFT \$500,000 DONATED BY PEERLESS



20 GLASS PANELS INSTALLED RECOGNIZING **GIFTS OF \$1,000**

300 DONATIONS

THAT CAME FROM THE NMC FAMILY (MEDICAL STAFF, DIRECTORS, EMPLOYEES, AND VOLUNTEERS)

Gifts from Our Community: NMC's Capital Campaign

Northwestern Medical Center would like to recognize the following individuals and organizations who have supported NMC's Exceptional Capital Campaign. Our heartfelt thanks to all of you for your support.

Individuals

- Anonymous (7)
- Robert and Sheila Abair
- Edith and Kevin Allard
- Marjorie Allard
- Chari and Richard Andersen
 Rosanne Arnett
- Darryl and Candice Arnold
- Judy A. Ashley
- Judy A. Asiney
 Jacob Ashline
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- Anonymous
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- Judy A. Ashley
- Stephanie Bates
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- St. Albans Musuem, Inc.
- In Memory of Marcy Hancox In Memory of Corporal Daniel
- C. Marcellus
- In Honor of Don McCaughey
- In Memory of Bernard L. Moreau

Please Note: This list reflects donations given during the 2017 Fiscal Year.

K New reception area and entrance is beautiful! Serene! A nice gentleman escorted me right to where I needed to go."





Artwork by Caroline Parent is installed in the entrance to the new Medical Clinics Building. Her fused glass piece is made up of 20 panels depicting the Vermont landscape in all four seasons, and is inscribed with the names of donors who contributed \$1,000 or more.

Financial Report	Actual 2016	Projected Actual 2017	Budget 2018
Patient Services Revenue	183,964,101	186,289,018	200,056,322
Less Subsidies to MCR and MCD	59,925,743	60,674,333	64,499,210
Less Other Contractuals	21,319,582	20,895,177	25,556,675
Less Free Care	1,292,667	667,528	1,316,726
Less Provision for Bad Debt	3,031,340	4,999,919	5,404,532
Net Patient Revenue	98,394,769	99,052,061	103,279,179
Other Operating Revenue	5,853,874	5,183,451	5,598,376
Total Revenue and Other Support	104,248,643	104,235,512	108,877,555
Salary and Wages	47,999,821	51,474,302	51,198,031
Employee Benefits	11,047,525	13,242,117	11,946,614
Supplies	12,829,619	11,722,205	12,347,409
Contracted Services	13,216,226	13,642,464	14,066,005
Other Operating Expense	6,224,872	5,935,212	6,438,330
Medicaid Tax	4,316,651	4,233,592	4,725,004
Depreciation	4,511,043	4,807,283	6,030,059
Interest & Amortization	607,965	592,570	1,157,186
Total Expenses	100,753,722	105,649,745	107,908,638
Income from Operations	3,494,921	(1,414,233)	968,917
Net Investment Income	4,080,429	6,617,158	296,590
Other	(843,600)	1,728,155	168,025
Total Non-Operating Income	3,236,829	8,345,313	464,615
Excess of Revenue and Other Support Over Expenses	6,731,750	6,931,080	1,433,531
Admissions	2,581	2,554	2,603
Total Patient Days	7,558	7,819	8,068
Average Length of Stay	2.93	3.06	3.00
Emergency Department Visits	27,245	25,919	26,903
Births	369	383	387
Surgeries	2,905	2,868	2,993
Outpatient Diagnostic Imaging Procedures	46,218	46,733	45,622
Outpatient Laboratory Tests	321,210	335,292	315,444
Medicare/Medicaid % of Patient Revenue	59.60%	58.60%	59.20%
Days in Accounts Payable	51.5	51.5	45.9
Days in Accounts Receivable	36.6	40.5	47.4
Age of Plant (Years)	10.6	10.7	12.5

The staff seemed to work together intuitively. Inspired my confidence in my care. They were very honest and sensitive to my fears." — An NMC patient

Reflecting on *our year* ...

NMC always has a lot going on - both on our campus and out in the community. Here you can see us connecting with the community at Cardiac Capers, at the Little Lake Monsters Community All Stars game, at walks and runs around the state and when we invite students in for a closer look in our lab. We're also happy to connect with our amazing volunteers, our staff, and with the youngest community members at events like Healthy Hearts on the Move.



























Diabetes prevention When Losing Means Winning

Editor's Note: This article was originally published in the St. Albans Messenger and written by Messenger Staff Writer Elaine Ezerins. This abbreviated version is reprinted here with the permission of the Messenger.

In four months, the 10 community members participating in YMCA's Diabetes Prevention Program lost a collective 127.4 pounds, according to Debbie Robertson, an NMC Health Educator and a certified wellness coach.

Facilitated through Northwestern Medical Center's (NMC) Lifestyle Medicine clinic, the program is designed to help those at risk of developing Type 2 diabetes adopt and maintain healthy lifestyles by eating healthier, increasing physical activity and losing enough weight to reduce their chances of developing the disease.



Collectively, the ten participants enrolled in the latest diabetes prevention program class have lost more than 125 pounds over a four-month period. Pictured here are eight of the ten participants. Front row: Dianne Claire Beyor, Lise Dexter, Judy Wechsler; Back row: Marlene Brown, Karen St. Lawrence, Lee Tillotson, Sue Tillotson, BJ Paquin, Debbie Robertson.

The March class at NMC met weekly for one-hour sessions focusing on healthier eating and other behavior changes. The goals of the program are for participants to reduce their body weight by seven percent and increase physical activity to 150 minutes per week.



At one of the last sessions,

participants discussed their journeys thus far and the success they've seen with this program, in comparison to others tried.

"I just lost my husband a year and a half ago, so the stress ..." Lise Dexter, 65, of Highgate Springs trailed off.

"I wasn't really taking care of myself like I should have."

The effects of this came to light during a doctor's visit in January. There, Dexter weighed in at 171 pounds, had high blood pressure and was diagnosed pre-diabetic.

Both Dexter and her doctor agreed she needed to make some lifestyle changes. She re-joined Weight Watchers immediately, a program she had participated in over the years off and on with limited success, and signed up for the diabetes prevention program at the recommendation of her doctor. It is free to participate.

"From January on, I went from 171 to 146 [pounds] and I feel better."

— Lise Dexter of Highgate Springs

Her blood pressure followed the same downward trajectory

as well as her blood sugar, measured through an A1C test. The A1C test is a blood test that measures a person's average levels of blood glucose over the past 3 months, according to the National Institute of Health. It is the primary test used for diabetes management and diabetes research.

"This is what was really important for me because my brother is diabetic," she said. "He's been diabetic for a long time and right now, he's really sick. He's in the hospital."

"I don't want to be like that," said Dexter. "I don't want to be diabetic."

"I've got two grand children," she said. "I've got a son, daughter-in-law, my brother, my family... I want to be here for them. When you lose your spouse of 45 years, at first you say, 'Oh, god what am I going to do?' You know? So I kind of let myself go a little bit, but I'm back on track."

"It's a great program. It works and there's a need for it in Franklin County."

- Judy Wechsler of St. Albans Town

Judy Wechsler said the program was an interesting juxtaposition on a personal and professional level because of her job at the Champlain Valley Area Health Education Center, working to create awareness about the diabetes prevention program.

"In the course of doing that work, it came time for my annual physical exam with a local physician and I learned that I was at risk myself for diabetes," she said.

Wechsler said her doctor's first instinct was to take the 'wait and see' approach because pre-diabetic only signifies potential, but she wouldn't have any of that. "I said 'No. Let's prevent diabetes," she recalled.

Robertson, the program's facilitator, said the class went exceptionally well. Participants motivated one another and no one dropped out.

She said the main challenge she faces is getting people to commit to the one-year program, but when they do, "it works; it really does work."

NMC NAMED ONE OF THE TOP 100 RURAL AND COMMUNITY HOSPITALS

This year, Northwestern Medical Center was named one of the Top 100 Rural & Community Hospitals in the United States by iVantage Health Analytics and The Chartis Center for Rural Health.

"This achievement is very gratifying and validates our daily commitment to providing the best health care possible to our community, while maintaining an efficient and effective facility," said Jill Berry Bowen, NMC's CEO.

NMC scored in the top 100 of rural and community hospitals on iVantage Health Analytics' Hospital Strength INDEX[®]. The INDEX is the industry's most comprehensive rating of rural providers. It provides the data foundation for the annual Rural Relevance Study and its results are the basis for many of rural healthcare's most prominent awards, advocacy efforts and legislative initiatives.

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Incorporators

The NMC Incorporators is a group of up to 150 local residents from throughout northwestern Vermont who serve as a formal connection between the hospital and the community we serve. The Incorporators meet twice a year, in May and November, to conduct their business. Below is a list of the 2017 Incorporators.

Janis Appel Judy Ashley Lorne Babb, MD Michael Barnum, MD Mary Bates Robert Beattie, MD **Reg Beliveau** Leon Berthiaume **Bob Bessette** George Bilodeau Bernie Boudreau Steve Broer, Psy.D Greg Brophey, MD Jacqueline Brosseau Cyr Lawrence Bruce Dawn Bugbee Peter Burke, MD John Casavant Jane Catton Sandra Chagnon David Charbonneau Paul Clark

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Shirley Jacobs

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Everyone who cared for me seemed like he or she had nothing else to do-each one was completely focused on me, they never seemed rushed or stressed, they were all very peaceful."

— An NMC patient



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Albans Raid or providing quiet support to

26

Charlie Moore Jeff Moreau Margaret Moreau Joe Nasca, MD William Nihan William O'Connor **Corey Parent** Pamela Parsons Stephen Payne, MD Peter Perley Albert Perry Marcia Perry Keith Ploof Sylvia Ploof Susie Posner Jones Peter Rath **Bryant Reynolds** William Roberts, MD Donna Roby Karyn Rocheleau Samuel Ruggiano Kevin Scheffler Marietta Scholten, MD

Sally Severy Heather Skilling, VMD Tim Smith Stephen Stata Molly Stata Comeau Sarah Sterling Kathy Tabor Patrick Talcott Albert Tetreault Thomas Traber Paula Tremblay Edward Tyler III Lynn Vallee Howard Van Benthuysen Daniel Vanslette Albin Voegele James Walsh Penny Wright Frank Zsoldos, MD Judy Zsoldos, RN

John Schreindorfer

Albert Severy



Pictured above: The 2017 Board of Directors

NMC's Board of Directors

President: Kevin Manahan, of St. Albans. Mr. Manahan is a CPA with A.M. Peisch & Company, LLP.

Vice President: Leon Berthiaume, of Swanton. Mr Berthiaume is the CEO of the St. Albans Cooperative Creamery.

Treasurer: Dawn Bugbee, of South Hero. Mrs. Bugbee is a Vice President and the Chief Financial Officer of Green Mountain Power Corporation.

Secretary: Janet McCarthy, of Georgia. Mrs. McCarthy is the Executive Director of the Franklin County Home Health Agency.

President of the Medical Staff: Michael Kennedy, MD, of St. Albans. Dr. Kennedy is a general surgeon with Northwestern Medical Surgical Associates.

Lorne Babb, MD, of Enosburg. Dr. Babb is a physician with Cold Hollow Family Practice in Enosburg Falls. John Casavant, of St. Albans. Mr. Casavant is a Risk Management and Insurance professional with NFP.

Nick Hadden, of Fairfax. Mr. Hadden is a private practice attorney.

Jake Holzscheiter, of Westford. Mr. Holzscheiter is the President and CEO of A.N. Deringer, Inc.

Paula Kane, Esq, of St. Albans. Ms. Kane is a private practice attorney.

William O'Connor, Jr, of Swanton. Mr. O'Connor is the former Chief Operation Officer for the Food Science Corporation, now retired. He is a volunteer at Northwestern Medical Center.

Marietta Scholten, MD, of St. Albans. Dr. Scholten is a practicing family medicine physician, the Medical Director for the Vermont Chronic Care Initiative and the Medical Director of the Franklin County Hospice Program.



Pictured above: The 2017 Medical Executive Committee

2017 Medical Executive Committee

Michael Kennedy, MD, President of the Medical Staff Thomas Harrison, MD, Vice President R. Donny Khela, MD, Secretary John Minadeo, MD, Immediate Past President / Chief of Emergency Service Julian Ferris, MD, Chief of Inpatient Medicine Service Stephen Mason, MD, Chief of Surgical Service Toby Sadkin, MD, Chief of Outpatient Medicine Service Stacy Strouse, MD, Chief of Pediatric Service Michael Barnum, MD, Member at Large



Pictured above: The 2017 Leadership Team

2017 Leadership Team

Jill Berry Bowen, RN, Chief Executive Officer

Chris Hickey, Senior Vice President, Chief Financial Officer

Lowrey Sullivan, MD, Chief Medical / Quality Officer

Jane Catton, RN, Senior Vice President, Chief Operating Officer / Chief Nursing Officer

Jonathan Billings, Vice President, Planning, Community Relations, and RiseVT

Tom Conley, Vice President, Human Resources and Organizational Development

Joel Benware, Chief Information, Innovation and Compliance Officer

Amy Putnam, Vice President, Physician Services



The 2017 Management Team

Pictured above: The 2017 Leadership Team at a retreat

Investing in Community Benefit:

Within the traditional structures of the American Healthcare system, much of the preventive work which is the foundation of healthy communities and healthy lifestyles is not reimbursed. Hospitals are among those organizations called upon to fund such endeavors as 'community benefit.' For NMC, this includes investing more than \$2 million a year into primary prevention to reduce the need for medical care - in addition to approximately \$1 million a year in Free Care for those who are uninsured or underinsured. NMC's work here includes maintaining the crucial work of RiseVT despite the ending of the State's innovation grant which helped fund its start up. It also includes collaborative community care management and related community wellness programming. For example, the community's Healthy Hearts on the Move Health Fair is funded in large part by NMC to ensure access to free health screenings, engaging health education, and referral to needed care and service - and more than 400 people participated in 2017! Our involvement goes beyond programming as well. NMC is a major funder of the United Way of Northwestern Vermont to support their focus on health, income, and education - all of which aligns with a healthier future for all. We are active

in and supportive of other important community organizations and initiatives,



Pictured: Participants in a Girls on the Run event

including the Rotary, the Franklin County Regional Chamber of Commerce, the Community Partnership, and more. This year, we invested tens of thousands of dollars into supporting initiatives and events in our community, including:

- the Jim Bashaw Cancer & Catastrophic Illness fund
- Voices Against Violence
- Girls on the Run
- the American Heart Association
- the Women We Can Expo
- Make A Wish

- Relay for Life and the American Cancer Society
- Franklin County Home Health Agency
- Tim's House
- Martha's Kitchen
- Prevent Child Abuse
- and many more.

In this way, NMC extends its reach and impact beyond the walls of the hospital and helps our highly skilled partners do important work to address social determinants which impact health – and long term, contribute to a healthier community with lower healthcare costs.

Proud to Partner in Caring for Our Community:

NMC's focus on community need and community benefit are interwoven throughout our strategic plan. In alignment with our organizational value of "partnerships", NMC is working collaboratively with numerous partners on strategic priorities including mental health and addiction, primary care, specialty and surgical care, and population health. Strengthening access, quality, and integration in these areas will strategically position NMC to continue to care for our community within whatever changes healthcare reform at the national or state level may bring.

National Recognition *we do that here.*



INVESTERN MEDICAL CENT

At NMC, we take the phrase "exceptional" very seriously.

We are passionate in our care for our community, and we strive to provide top-notch service for every patient at every encounter. Once again this year, our hospital was recognized nationally for excellence, including being named one of the Top 100 Rural & Community Hospitals in the United States. Our innovative use of technology earned us "Most Wired" hospital status for the second year in a row and our quality, reliability and personalization of care earned us an Avatar Award for Exceeding Expectations. We're also proud to note that our nursing program received the Hurst Gold Standard of Nursing Care award for excellence in healthcare and patient satisfaction. NMC also garnered a LEAP award for high-performing use of strategic financial planning software to drive efficiencies. These accolades spotlight NMC's incredible team, and we offer our deepest thanks for their commitment, their passion and their drive. You are truly exceptional.





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