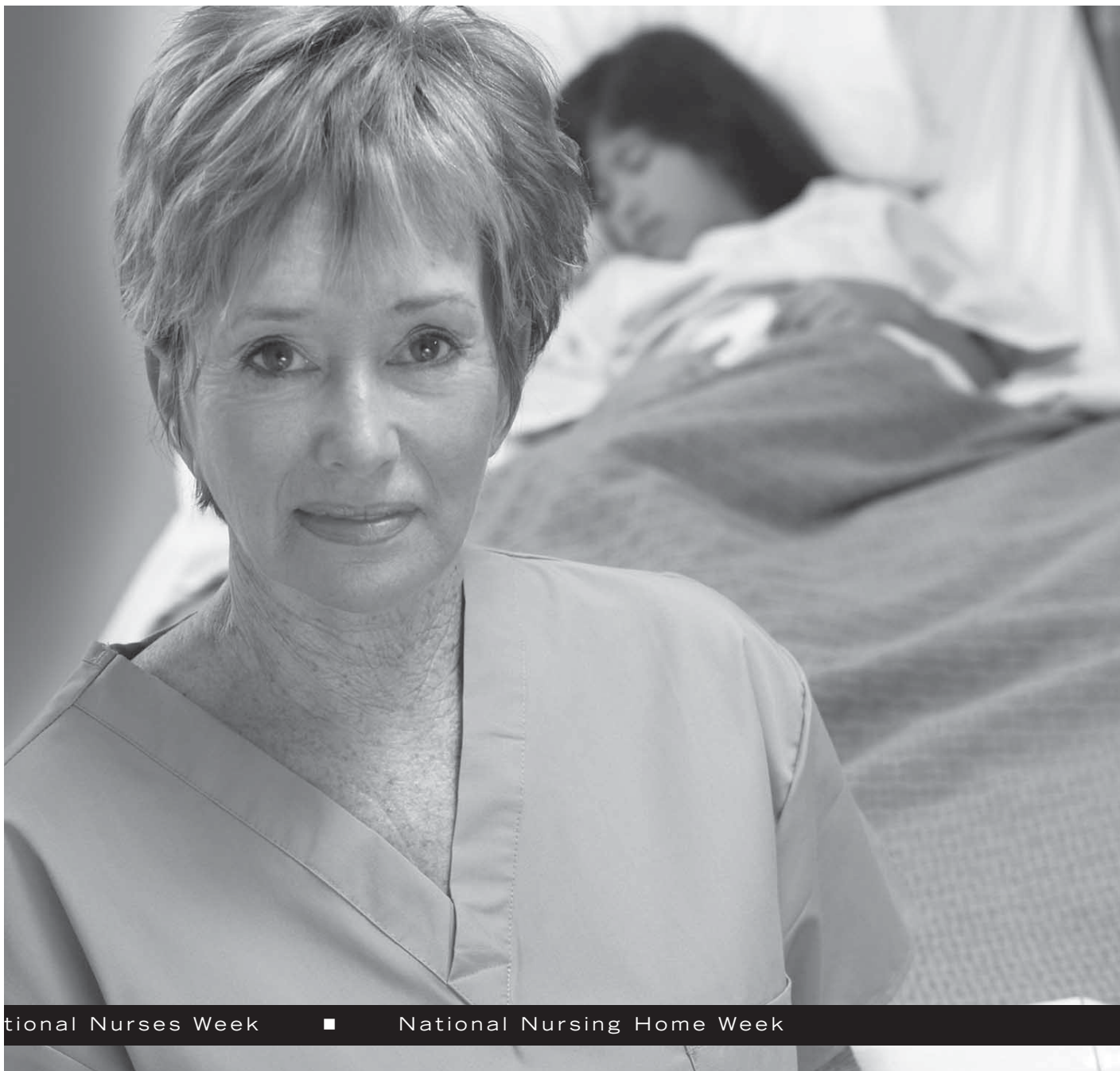


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National Nursing Home Week

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What do we all strive to maintain as we approach and enter the senior years of our lives? For many seniors, career success has been achieved, families have been raised, and lives have been full. Now it is time to relax and enjoy the fruits of a lifetime of labor. Most seniors want to enjoy this in the comfort of their homes; whether that is a home they've lived in most of their lives, an independent living facility, continuous care retirement community, or assisted living facility. Wherever they live, most seniors desire the peace of mind to maintain a dignified, quality life.

How can a senior remain in their home and age in place? For many, geriatric care managers, living assistance services, and home healthcare services provide the answer.

Geriatric Care Managers can provide the advocacy and care many seniors lose when family is displaced across the state, country or even world or grown children are busy with their own careers and small children. Geriatric Care Managers can assist seniors, their families, and their physicians as they confront the physical, emotional, and social dimensions of aging with services that include: assessment and evaluation of specific health and social needs and coordination of home healthcare, private-pay living assistance services and other resources. They can provide ongoing medical monitoring and medication management. Geriatric Care Managers can also provide education, advoca-

cacy, and counseling.

Living Assistance Services in the home can range from homemaking assistance and companionship to personal care services, and are often non-medical in nature. Private-pay Caregivers can run errands, shop, and prepare meals. They can provide transportation to and from appointments. From bathing and other personal care services to companionship, caregivers can assist in maintaining a quality and dignity of life that most seniors desire.

When medical conditions such as high blood pressure, diabetes, or congestive heart failure exacerbate, homecare nurses, physical or occupational therapists and other allied health professionals can be called in to coordinate care.

For those at the end stages of life, palliative care and hospice services provided in the home allow a person's dignity to remain until the very end while providing comfort, symptom management and pain control, as well as emotional support to the senior and their family.

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Ally Caldwell-Nassan and husband Eddie.

Return to Independence

with family members about post-acute care for Ally. Ally's family did not take the placement decision lightly. Enlisting the aid of other family members, Eddie and her son Johnny embarked on a quest to find a facility that would be able to provide quality care for Ally. They researched a number of skilled nursing centers on the Internet. The family also made phone calls and impromptu visits to several facilities. After careful consideration, the family selected ManorCare North Hills. According to Eddie, "It's important to see a facility to know what they do."

Ally arrived at ManorCare unable to walk on her own or complete her activities of daily living independently, such as dressing and grooming. She had difficulty swallowing and required a feeding tube for nutrition. Ally doesn't remember much about the beginning of her stay but she soon began to regain her strength. She realized what a challenge it would be to get stronger and back home. But with determination, the support of her loving husband Eddie, family and friends along with the expertise of ManorCare, she was soon on her way to recovery.

Clinical services, therapy staff and other disciplines assessed Ally's condition and determined the best treatment plan to get her up and moving again. Ally began rigorous sessions with physical and occupational therapies. As Ally gazed around the therapy gym at the other patients participating in their exercises, she remembered saying to herself, "I know I have a second chance." When she had started her physical therapy treatments, Ally was only walking about 30 feet with assistance. By the end of her rehabilitation course, Ally was walking more than 200 feet on her own and able to do all of her own dressing, grooming and bathing. She was no longer using the feeding tube and was eating regular foods. She was finally ready to return home to her family, friends and her three beloved cats. Ally credits her recovery to the tireless support of her family and the exceptional care provided by ManorCare North Hills. Ally summed up her feelings when she said, "I don't think I could have made it if it wasn't for ManorCare!"

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COMMENTARY: The Challenge of Eldercare Through 2034

Why 2034? It's actually the date that my actuarial has indicated that my individual involvement in this discussion should no longer have any viability. In other words it's the projected date of my passing, but, believe me, there will be tens of thousands of we boomers contributing to this discussion until then.

A few years ago, during a scientific mission to Boston for a conference at MIT, it was my privilege to participate in a conference directed toward the challenge of keeping our senior citizens viable, active and out of long term care for as long as possible. We met with several health care professionals, engineers, and



BY NICK JACOBS

scientists who had taken on the challenge of miniaturizing every known type of monitoring system for the human body.

They had begun the effort to successfully decrease the size of these devices to the diameter of a nickel, the relative thickness of a potato chip and a cost of about twenty five cents each. We saw demonstrations of some of these miniaturized devices in actual use. They were adapting systems for monitoring the

heart, blood pressure, brain function and respiratory system. With all of the flexibility that wireless communication can deliver, the uncumbered participants would be literally, wired for sound, as they

moved freely through the special apartment that had been constructed for this research.

Each and every movement could be monitored all day, every day. The signals generated from the participants various organs were sent directly to a computer that was housed at a physician's office where any missed beat could be reported through an alarm system that immediately notified the physician in charge.

Think of it. Pappy gets up from his chair, feels a little dizzy, sits back down, and the videophone rings with a healthcare professional checking to see if all is well.

Because of the 1984 feeling that some of we 1960's free spirits might feel from this "Big Brother" type monitoring, it was suggested that the grandparent might also like to have her sibling monitored as well, thus giving the affect that they are indeed checking on each other.

Think of it. This system could very well keep us out of some offensive, under staffed, insufficiently reimbursed nursing home for at least an additional year or two.

In closing, however, I did receive an e-mail the other day with this suggestion. If you like to cruise, it would be more fun to live on the Pacific Princess for the rest of your life than in the Sunset Valley Nursing Center. The cost is similar, and when you trip and break your hip, they will upgrade you to a suite and deliver meals to your room.

Nick Jacobs, currently president of Windber Medical Center and Windber Research Institute is currently writing a book, Who Put the Heal in Healthcare and will be a regular contributor to this publication. Nick can be reached at jacobsfn@aol.com or visit windbercare.com.

Stroke = Medical Emergency

Next month is National Stroke Awareness Month. A stroke or "brain attack" is a type of cardiovascular disease. A stroke occurs when a blood vessel that carries oxygen and nutrients to the brain is either blocked by a clot or bursts.

Stroke is our nation's third leading cause of death and the leading cause of adult disability. Every year more than 750,000 Americans have a stroke. Know the signs and symptoms of stroke and recognize a stroke as a medical emergency by calling 911. Time Loss Is Brain Loss.

Stroke recovery can continue throughout life. Health Hope Network (formerly Visiting Nurse Foundation), a Pittsburgh-based non-profit, provides free support for stroke survivors and their families. Each week, stroke survivors and caregivers meet with facilitators to strengthen the body, mind, and spirit. Health Hope

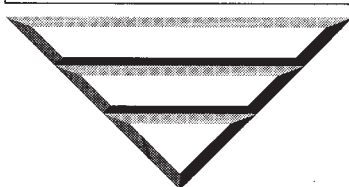
Network has 30 groups throughout Allegheny County and Western Pennsylvania. For more information, call (412) 937-8350, visit www.healthhopenetwork.org, or e-mail info@healthhopenetwork.org.

The Signs & Symptoms of Stroke

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ElderCare

Remembering Residents Needs In Transition Program

BY ED KLIK

It will come as no surprise to anybody that, in the "good old days" (10-15 years ago), the nursing home operating environment was significantly different than it is today. We enjoyed cost reimbursement, lower acuity levels, less receivable collection issues, a less litigious legal focus, etc.

However, one of the biggest luxuries that we enjoyed in the "good old days" was a census that was at, or close to, 100% occupancy. In terms of financial success, having a "healthy" census is one of the single most important factors. However, the census issue extends beyond financial success, and, as with everything else in nursing home operations, the resident's wellbeing is the number one priority.

However, a strange evolution has occurred in recent years. Demographics would indicate that the number of individuals who would be perceived as the most likely nursing home residents has been increasing at a rapid pace. The number of individuals 85 years of age and older in Pennsylvania has increased almost 10% since 2003. While the potential nursing home candidates have

increased substantially, the number of nursing facility beds has decreased over the same period, and overall nursing facility census levels have, at best, remained steady. At the same time, we are experiencing an influx of personal care facilities, assisted living facilities, and independent senior living facilities. The reasons for these trends are many, but mainly focus on a general shift toward home and community services by the government payors (mostly Medicare and Medicaid) and a perceived preference by the consumer. National trends show that nursing facilities maintain 74% of the elder population as opposed to 26% by the home and community based services sector. The shift toward home and community based services by government payors is evidenced by Pennsylvania's Nursing Home Transition Program.

The Nursing Home Transition Program is based on two major goals: 1) assisting people to transition from nursing homes into the community; and 2) learning about perceived or real barriers that nursing home residents face when considering home and community based alternatives. The Program identified significant barriers, i.e., consumers with multiple disabili-

ties, including dual diagnoses, or a disability that is not addressed by a waiver program, who were especially likely to experience delays in obtaining services. In 2006, the Program was strengthened with enhanced new policies, stepped up collaborative efforts, providing additional training, and more centralized data collection reporting. Area Agencies on Aging (AAA) are now being charged with providing extensive counseling on long term living options and home and community based services to newly admitted nursing home residents. AAAs receive new admission reports, generated from Minimum Data Set (MDS), twice a month, and are expected to make Long Term Living (LTL) counseling visits in a timely manner to prevent loss of community supports, housing, etc.

While certain individuals expressed significant success through the nursing home transition program, there are some challenges and obstacles that must be considered. How does a resident's condition fluctuate once transitioned out of a nursing home and back into the community? How many residents return to a nursing home once released back into the community? How soon? How does their standard of living outside the nursing home compare to

their standard of living inside the nursing home? Is there suitable housing available for low income residents being transferred out of a nursing home? These are all important questions that affect the ultimate wellbeing of the resident and these questions should be tracked on an individual basis to draw a conclusion as to the appropriateness of a nursing home transition.

Remember that the resident's wellbeing and choice is the top priority surrounding this transition process and should take precedence over any fiscal challenges that should arise. With this in mind, the progress of the "push" toward home and community based services should be measured, not only in terms of the financial implications, but, more importantly, based on the ultimate health and social wellbeing of the resident. We need to do what's in the best interests of the consumer and take care of our ever aging population in a timely and appropriate fashion. Only time will tell.

Ed Klik is a Manager in with the Carbis Walker Health Care Services Team. Ed can be reached at (724) 658-1565, or (800) 452-3003 (option 1), or at eklik@carbis.com.

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They Put the Care in Transitional Care Unit

With nearly 65 years of nursing experience between them, Nancy Reynolds and Stephanie Dubay, both RNs in Memorial Medical Center's Transitional Care Unit (TCU), are model caregivers who say each day brings a new challenge.

"I didn't want acute care anymore," says Reynolds, who has been working in the TCU for about a year and a half. "But here in this kind of nursing home setting, you're still seeing patients that are not as stable and require a lot of rehabilitative care, which sharpens my skills."

Patients admitted to the TCU usually stay seven to 10 days, with the expectation that they will be discharged to their home. "It can be difficult though, because as you work with the elderly and their families, some patients don't recuperate as quickly as they should," says Dubay. "Many patients also have chronic illnesses and that is tough on the family; they have to decide the best option for their family member, which can be very stressful."

In addition to the physical care, nurses in the TCU are also routinely helping to manage patients with disorders such as Alzheimer's Disease and dementia.

Kathy Veney, R.N., Director of Nursing, TCU, says, "Our nurses have a tough job—they not only help the patients with their physical and mental health, but they also serve as a strong emotional support for the patients and their families."

Reynolds attributes some of her nurturing ways to her own experiences. "I went through this last year with my mom. We had to decide what would be best for her at age 91. It was a very trying time for my fam-



Stephanie Dubay, R.N., (left) and Nancy Reynolds, R.N., comfort Betty Cameron, a patient in Memorial's TCU.

ily, so I think I'm a little more understanding."

Veney agrees. "Both Nancy and Stephanie have experienced this with their own parents at one point or another, so they empathize with these families and it shows. I get so many compliments from patients and family members about the amazing care these two nurses provide."

While you have to give a lot of yourself to be a nurse in the TCU, both Dubay and Reynolds agree, you also get a lot in return.

"This is a rewarding job," says Dubay. "You're able to watch the majority of these patients improve and go home. You spend a lot of time with them and really get to know them and their families. You can tell that they appreciate you."

It Takes a Special Person to Care for Seniors Who Suffer from Dementia

"Many people aren't gifted with the ability to work with older adults who have dementia," says Lucy Seger, an elder care professional. "They have the skills but might not have the insight and understanding to be effective."

Seger is a Franchise Owner of two Home Instead Senior Care offices in the Greater Pittsburgh area. Whenever Home Instead Senior Care hires a caregiver, they always ask the same basic question: "How do you feel about older people; do you enjoy spending time with them?"

"Sure I do," might be the response, "but to be honest, they can be frustrating, hard to deal with."

"That's not the answer I want," says Seger. So she keeps searching until she finds the right answer – and the right person." Joann Bendick is just such a person.

"Joann is ideal," says Seger. "She has all the qualities and gifts that we're looking for in a caregiver: compassion, patience, understanding, gentleness and dependability."

Bendick has a special affinity for the elderly. "I love helping them," she says. "For me, it's not a job. It's an honor and a pleasure." She spends a lot of time with each client, getting to know them as individuals. "They're special individuals," she says, "and each one is different, with different needs."

Bendick works with clients in their homes, a distinct advantage. "People suf-



Joann Bendick

fering with dementia have lost so much of their lives, pieces taken away one at a time, because of their condition. So whenever possible, it makes sense to give them touchstones to their past. And living in familiar surroundings does that; it helps a great deal with their well-being."

Bendick keeps looking for ways to connect with her clients. One elderly woman was almost com-

pletely disengaged, isolated in her own world. "Then her family told me she liked to bake," says Bendick, "so I got her involved in making blueberry muffins. I would break an egg in the bowl and cue her to beat the egg, get her involved in the process so she got satisfaction from that. She seemed to get so much pleasure from it and she was accomplishing something."

Bendick says that you have to be flexible. "Sometimes you go in with a plan," she says, "maybe it's bath day, but a person with dementia isn't on a task-oriented schedule. They might have other needs that day. They might be feeling particularly frustrated or anxious. So you identify what they need that specific day and adapt to the person."

As a Personal Care Assistant, Bendick provides a variety of services such as bathing, dressing, grooming, cooking and meaningful activities. Important tasks, to be sure. "But my relationship with clients is based on one important principle," she says. "Focus on the person, not the task. The person always comes first. Always."



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salute to volunteers



In conjunction with National Volunteer Week, **Western Pennsylvania Hospital News** would like to salute the following individuals who have made a difference in our communities.

CHILDREN'S HOSPITAL OF PITTSBURGH OF UPMC

ADAM PERL

On the surface, Adam Perl is a typical 24-year-old college student. He attends classes, takes exams and worries about grades. But through volunteering at Children's Hospital of Pittsburgh of UPMC, he has gained experiences not taught in a classroom.

When Perl began classes at the University of Pittsburgh, he was unsure of what major to choose. At one point, he was a neuroscience major before finally deciding on a studio arts degree. When he graduates next May, he will enter dental hygiene school at Pitt, a 2-year program. While juggling his demanding college courses, Perl decided to volunteer at Children's. When he originally met with Laura Burns, manager of Volunteer Services, he requested to be assigned to the dental clinic. Volunteer dental positions are highly coveted at the hospital and Perl was put the waiting list.

Burns gave Perl an option to be called when a spot opened for him in dental, or stay around and be assigned to a different department. Perl opted to stay and began working in the Hematology/Oncology department, where he said the patients made an immediate impact on him.

"It may sound contrived, but volunteering in that department really changed my life," said Perl. "The spirit of the kids there is so great, it has given me an entirely different perspective. Volunteering in the oncology unit is a very important part of my life now."

So important, in fact, that Perl decided to continue volunteering in the unit one day a week even after he was assigned as a volunteer to the Intensive Care Units. When a position eventually opened in the dental clinic, one year after he had been put on the waiting list, Perl took on those duties, but remained loyal to his oncology patients.

"Adam is very special, especially for a college student," Burns said. "He was a full-time student and volunteering twice a week. It is a great testament to his character that he kept up with volunteering even while in school."

Once he begins dental hygiene school, Perl hopes to keep volunteering, despite the intensive curriculum of the hygiene program.

"A lot of high school and college kids begin volunteering because it looks good on their resume. It's not like that for me. I feel very lucky that I had the opportunity to volunteer with kids. It's something that I plan on doing for a long time to come," he said.



RUTH YAHR

Ruth Yahr may not remember every baby she has rocked, or teenager's hand she has held, or toddlers she has helped comfort as a volunteer in the recovery room at Children's Hospital of Pittsburgh of UPMC. But, one little girl still stands out in her memories.

"Kids wake up after surgery in a strange room and no family around," Yahr said. "This 5-year-old girl was crying, and none of the nurses could comfort her. I looked her in the eye and said, 'Honey, I'm not a nurse, I'm a teacher.' She stopped crying, threw her arms around my neck and hugged me like she would never let go. Kids like her are the reason that I've come to volunteer at Children's for the past 20 years."

Yahr, a Pittsburgh native, retired from teaching four years ago and began volunteering year round at the hospital. She visits twice a week and spends all day with children waking up from surgeries. While the nurses check temperatures, pulses and blood pressures, Yahr makes her way around the room distributing bottles, juice, popsicles and, most importantly, comfort to the patients.

"I had a traumatic hospital experience as a child and I wanted to make it different for the kids here," Yahr said. "The hospital is filled with such amazing nurses, physicians and other staff, I just wanted to do what I could to help."

Laura Burns, manager of Volunteer Services at Children's, knows what a special and helpful person Yahr is.

"Ruth has a peaceful demeanor that just puts the kids at ease. For her to dedicate the past 20 years of her life to the patients here at Children's is truly extraordinary," Burns said.

She began volunteering as a teenager at UPMC Montefiore in Oakland. Since then, she has dedicated her life to children. She volunteered at The Home for Crippled Children, now known as the Children's Institute. When she came to Children's in 1987, she was a special education teacher at the Allegheny Intermediate Unit.

Yahr has been unable to come to Children's since she underwent knee surgery in January of this year. For now, aggressive physical therapy takes up most of her days. But she is anxiously awaiting her return to the hospital.

"I miss the kids more than anything. I can't wait to get back to the hospital and be able to be there all day doing what I love to do, helping kids get better," Yahr said.

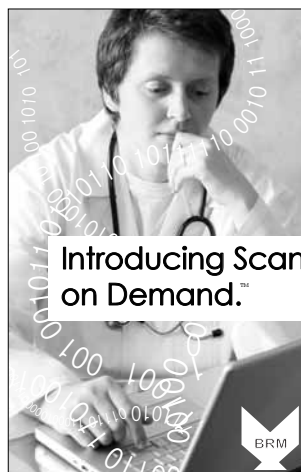


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BLIND & VISION REHABILITATION SERVICES OF PITTSBURGH

MARCIA SHERWIN

"I've learned how fragile vision is, and that it should not be taken for granted," said Marcia Sherwin, volunteer for six years at Blind & Vision Rehabilitation Services of Pittsburgh. "At any time it can be taken away through accidents or medical issues. I feel so grateful for my vision and I want to help others who don't have their sight anymore."

A tireless volunteer, for six years Sherwin has spent at least one day a week at BVRS, a private nonprofit that provides programs and services for people with vision loss. The agency offers computer training, vocational rehabilitation, and many other services. Marcia and her husband Mark had been financial donors to the agency for years. But about six years ago, after her sons were grown, Sherwin felt a strong desire to become involved with the people whom the agency serves and called Nancy Schepis, Volunteer Coordinator, to offer her time.

Sherwin provides clerical services to BVRS' Low Vision Clinic during the mornings. The Low Vision Clinic helps maximize the vision of people whose poor vision can't be helped with surgery, medicine or glasses. In the afternoon, she participates in the Leisure Time Activities, which is part of the agency's Personal Adjustment to Blindness Program. Sherwin, other volunteers and staff escort clients to Pittsburgh Pirate baseball games, River City Brass Band concerts, and movies and sometimes go for walks by the Riverfront.

Sherwin lives in Washington County, making her commute fairly easy when BVRS was located in Bridgeville. But in 2005 the agency moved to 1800 West Street, Homestead, making her round trip more than 40 miles. Even though the trip is not as convenient anymore, Sherwin could not stop volunteering.

"I get so much more than I give," she said. "I see the clients come in scared and apprehensive. I am privileged to witness their determination to overcome this obstacle and relearn how to manage the mundane things in their lives, such as how to do the laundry, how to cook without burning themselves, and tackle their attitudes. And when they finish the program, they are ready to tackle things they never thought possible when they first walked through our doors. I've seen it over and over again and it's a privilege to be a part of something so wonderful."



COLLEEN CWENAR

While most of her peers were hanging out last summer, Colleen Cwenar, 16, spent some of her time volunteering for at Blind & Vision Rehabilitation Services of Pittsburgh.

As a youth volunteer, Cwenar, who is from Point Breeze in Pittsburgh, accompanied her blind and vision impaired peers to plays, movies, shopping, and other fun events. BVRS' Youth Programs attracts vision-impaired teenagers mostly from Pennsylvania towns, but last summer a high school student from Hawaii attended. Students stay at BVRS' residential wing while they take classes in independence skill building, college prep, and vocational exploration. Cwenar assisted during the leisure time activities during the evenings and on weekends.

Cwenar, a junior at Oakland Catholic High School, is working to earn 100 volunteer hours that are required to receive the Joan of Arc Medallion that is presented at the annual Medallion Ball hosted by St. Lucy's Auxiliary to the Blind.

"We did so many different things last summer," Cwenar said. "Every week I went to the dance class. Kids were learning the Cha Cha Slide for the dance at the end of the summer. Some partially sighted kids could keep up, but those without vision needed one-on-one instruction. I would have to say things like 'You have to turn left after you stomp your right foot,' and do that over and over until they remembered."

"It was so fun to watch the kids grow. At the beginning, many of them couldn't dance at all, but by the end they had the steps down and were even improvising and doing their own steps," Cwenar said.

Some of the teenagers also amazed Cwenar at the talent show where students could display their talents. A piano player herself, Cwenar was impressed by the talent and skill some of the musical teenagers displayed. Their pieces were played totally from memory, and some of them could tell when the piano was only slightly out of tune, she said.

"I never thought blind people were much different, but after this experience I learned that they are exactly the same as other teenagers," she said. "They may have to concentrate a little more and put forth more effort, but we share the same kind of stories about boyfriends and classes at school. It was an enriching experience. I will do it again this summer."

After she graduates from high school, Cwenar plans to attend college. She is thinking about majoring in communications and studying journalism.



LESLIE J. SABO, JR.

Leslie J. Sabo, Jr. has been a volunteer most of his life, even when he was employed as a steel worker for the cold reduction department at U.S. Steel Irvin Works in West Mifflin.

He's bagged food for the homeless, helped with landscaping to beautify neglected areas, and still visits senior citizens in nursing homes. But when he retired in December 2003, Sabo felt a strong desire to become more involved in his community. After reading a small story about an agency that had just moved to 1800 West Street, Homestead, and needed volunteers, Sabo called Blind & Vision Rehabilitation Services of Pittsburgh and asked volunteer coordinator Nancy Schepis, "What can I do?"

Schepis had some ideas and soon Sabo was taking clients to medical appointments and dropping them off at the bus station to go home for weekends. BVRS offers a variety of programs for people with vision impairments. Clients live in the agency's residential wing while attending some of them, such as Personal Adjustment to Blindness Training, where people learn independence skills, or Computer Access Technology Center, where they learn how to use adapted equipment. He enjoyed getting to know the clients and soon Sabo was volunteering for the Leisure Time Activities Program, escorting clients to the bowling alley, walks along the Riverfront, and other fun places. He began to call the agency on weekends to see if any clients wanted to go to church – any denomination – or out to dinner with him and his wife.

The involvement has opened a new world to Sabo.

"There's all this technology out there and clients are utilizing it all," he said. "I had no idea there were such things like talking microwaves until I started volunteering here."

A very popular volunteer among clients, Sabo has gotten to know many of them and keeps in touch with some after they leave the program. He talks easily about those he has gotten to know – a teenager who traveled from Hawaii, a college graduate from Oklahoma, and a former basketball player living on his own for the first time since losing his vision who Sabo plans to visit on the weekend.

"These men and women, some of them blind from birth, have such positive attitudes," Sabo said. "They amaze me. Being with them has made me more appreciative. It's greatly enriched my life."





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JOHN J. KANE REGIONAL CENTERS

RAY COVAL

FORMER RESIDENT NOW A VOLUNTEER

Our story of an extraordinary volunteer at the John J. Kane Regional Center in McKeesport would be Ray Coval. Ray's story is unique as he was a former resident at Kane McKeesport in 2004. He became ill at home, his mailman noticed his mail piling up and called the police. He was taken to McKeesport Hospital and moved to Kane for therapy. He was admitted in February of 2004 and returned home in August of 2004.

Ray returned as a volunteer at Kane McKeesport and will receive his 1,000 hour pin in April. He visits Kane McKeesport every day, Monday through Friday, serving as a Eucharistic Minister in the chapel, serves Mass, escorts residents to and from the service and also is in charge of the elevator to get the residents to their proper floors for lunch. He is a quiet man, yet his kindness and pleasant personality reaches out to all those he encounters.



CLARENCE WILSON

FORMER MAILMAN DELIVERING CARE AT KANE

In the rain, sleet, hail and snow, the mail must still go through. Retired from U.S. postal service after 35 years, Clarence Wilson has taken that same oath as a John J. Kane Regional Centers Glen Hazel volunteer. No matter what the weather conditions are, Clarence is at Glen Hazel volunteering.

Generally, he volunteers twice a week and whenever he is needed for special events. On Fridays, he is the BINGO caller at another facility. His assignments are many including escorting to Catholic Mass on Thursdays and escorting to Protestant service on Sundays.

The assignment that is closest to his heart is the Buddy System Program. He develops a one-on-one interaction with a certain resident while that resident resides at the center. He spends at least an hour with that individual at each visit. It is reminiscent of the era when you sat on your porch, front steps or the street corner conversing with your buddies. In good weather they go outside, otherwise they sit and chat in front of the fireplace. His present buddy is Johnnie, who prefers to stay in bed or in his room most of the time. But come Thursday, he is out front or in the lobby by 9:30am eagerly awaiting Clarence's arrival at 11:00. Johnnie is partially blind. Clarence, with much encouragement and consistency, has gotten Johnnie to venture out of his room. Via ACCESS transportation they go shopping once a month.



ELI AT THE UNIVERSITY OF PITTSBURGH

INTERNATIONAL STUDENTS GIVING AT KANE

John J. Kane Regional Center Glen Hazel has happily become acquainted with a youthful group of volunteers who are students in the English Language Institute (ELI) at the University of Pittsburgh.

Students come to the ELI from all over the world to study English. Recently, the ELI has begun to emphasize "community outreach" in addition to its usual extra-curricular activities. The goal of community outreach is for students to interact and participate with the native English speaking community in Pittsburgh.

Volunteering has allowed ELI students to practice English, learn about American culture and make friends. That is how the conversational buddies program was started at Kane Regional Center Glen Hazel. We have had students from Japan, Saudi Arabia and several students from Taiwan. The group meets every Wednesday from 1:00-2:15 with three residents and me.

We discuss various topics and customs. At the end of each semester we out together a journal and everyone receives a copy as a keepsake. This semester we have explored foods from Chinese culture and American cuisine, discussed holiday celebrations and current events. Having this opportunity for inter-generation and multi-culture experience has proven to be a very rewarding. Without hesitation, an international friendship has been born.



(l-r) Ling Cheng, Basmah Alzamil, Misa Nagano



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VA PITTSBURGH HEALTHCARE SYSTEM

PATRICK LUNNEY

Patrick Lunney has been a volunteer at the VA Pittsburgh Healthcare System since 2004. His first assignment was at the Highland Drive Division, assisting Recreation Therapy working with mental health patients. He provided assistance supporting activities such as table games, arts and crafts, and coffee hour. In 2006 he transferred to the Heinz Division and continued to support Recreation Therapy programs with the Hospice/Palliative care patients. He helps to escort patients to and from activities, assists with bedside and on-ward programs. He also assists Rehabilitation Medicine with a Tai Chi Exercise Class.

His favorite experience as a volunteer is seeing the patients' enthusiasm when he walks into their room, knowing they are looking forward to the activities he will help them with. Patrick spent four years as a Radioman in the Navy. After discharge, he spent some time as an accountant.

Patrick was involved in an accident a few years ago and while recuperating, appreciated what several volunteers did to help his recovery. At that time, he said to himself that "some time in my life, I would return the favor and give back what was given to me."

A message he would like to send to other veterans, especially the young veterans from Iraq or Afghanistan, is to volunteer. "It's a great thing to do, helping others, until your life settles down."

Patrick has over 500 hours of volunteer time and truly helps to brighten the lives of the veterans at the VA Pittsburgh Healthcare System.



GLORIA SMITH

RETIRED ARMY VETERAN
UNIVERSITY DRIVE DIVISION

Sometimes You Get More Than You Give

When I wake up on a snowy February morning and look out to see ice covering my windshield, I am conscious of the good fortune I have to be able to get out and visit with veterans at VA Pittsburgh Healthcare System. So many vets are physically limited because of injuries sustained during their military duty, yet many of them volunteer to help others. I've been encouraged by many patients, even though I came to encourage them. Today is the big day. Valentine's Day is a day for sweethearts and also The Salute to Hospitalized Veterans. It's great to see the broad smiles on the thankful faces of those who are lying in their hospital beds and reading the handmade cards from the hosts of great organizations such as the Scouts, local school children, and church and veterans groups. I frequently stop to chat and maybe read a card or two to a veteran who needs an extra hand. More often than not, well wishes are reciprocated by words like "Tell the kids I said thanks and it sure is swell of them to think of me and I love them." With a twinkle in their eye and a grin that says, "I'm glad I'm not forgotten" they let me know just how appreciative they really are.

I realize how lucky I am to be a volunteer. I meet people every day that have volunteered for many years faithfully and I understand why. The stories are being preserved on tape for future generations to view, but right now is history. We are learning from those who have "been there and done that" we need to care for each other in times of war and in times of peace. I only hope that as many of our comrades who have taken up the challenge of volunteering pass the scepter along, there is someone to grab it and keep the momentum that they have so gloriously upheld.

This day, I only have a few hundred hours in my belt as a volunteer, while many of those I've met have thousands. I admire the steadfastness of those who come in daily to meet the needs of fellow veterans.



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**U.S. AIR FORCE
CROSS INTO THE BLUE**

VOLUNTEERS FOLLOW IN THE FOOTSTEPS OF MERCY'S FIRST SEVEN

BY SISTER JOANNE MADDEN, IHM

Over 160 years ago, The Mercy Hospital of Pittsburgh opened its doors to the sick and suffering through the pioneering efforts of seven very special women, the Sisters of Mercy, who founded the hospital in 1847. These seven sisters were our first volunteers, reaching out, giving their lives generously to serve the needs of others in Christ's name.

Through the years, Mercy has continued to be blessed with many volunteers who follow in the footsteps of these pioneering sisters.

Today, Volunteer Services salutes seven wonderful people in Mercy Hospital's Pre-Admission/Outpatient Testing Area. Every week these dedicated seven men and women bring a variety of experience from their professional fields of education, nursing, accounting, sales, business management, and homemaking to volunteering. Each of these volunteers comes one or two days a week, some arriving as early as 6 a.m., while others come later and continue their service into the late afternoon. Together they have an accumulated total of close to 53 years of service as Mercy volunteers.

These generous volunteers are noted for their friendly, welcoming and hospitable spirit. They give witness to the mission of compassionate care so characteristic at Mercy, by their presence to everyone they meet. They perform a variety of services such as escorting patients and families to Same Day Surgery, Radiology, Cardiology, and various other hospital departments; assisting with deliveries such as lab work, medical records and wheelchairs; and providing various clerical and reception area assistance as well. Although these seven volunteers are assigned to the Pre-Admissions area, they frequently are seen offering hospitable, friendly smiles while responding to particular on-the-spot needs of people whom they meet on their rounds.

Volunteer Nick Vrcic says, "Helping patients feel at home, putting them at ease, cheering them up—this is what we do, so each one comes to know he or she is in good hands!"

"Teamwork is so important to providing excellent service for our patients and visitors," says Dawn Blount, a front-line staff person, "and these seven are very valuable members of our team."

The volunteers agree that the folks in Pre-Admissions are pretty special, too, and that volunteers receive more than they give. Henri Nouwen, a contemporary Christian writer, notes that this mutuality of giving and receiving is a beautiful characteristic of the compassionate life.

Sister Joanne Madden, IHM, is Manager, Volunteer Services, at The Mercy Hospital of Pittsburgh.

For more information about volunteer opportunities at The Mercy Hospital of Pittsburgh, call (412) 232-8081 or visit www.mercylink.org/pages/support_our_mission/volunteer.cfm.



Mercy Hospital volunteers Jean A. Owens-Grate and Nick Vrcic.

**Mercy Hospital
volunteers (l-r)
Dan Farrell,
Dolores Covic,
and Debbie
Maaghul.**



**Mercy
Hospital
volunteers
Marcia
Harenski and
Gregory
Vanucci.**



FAMILY HOSPICE AND PALLIATIVE CARE

For over 21 years this group of volunteers have given great comfort to complete strangers. Over the many years, they have organized and run Family Hospice and Palliative Care's many community bereavement support groups. In some locations the group has met every month for over 20 years – talking, sharing, and caring. The bereavement support groups help individuals cope with the many feelings that accompany the devastating loss of a loved one. These women have helped individuals who thought they couldn't get up in the morning, couldn't make it through the holiday season, or could never talk about their anger, sadness or guilt. Their knowledge, patience, and compassion has supported many during this very difficult time. Kitty McKnight Pawloski started the first group over 20 years ago. A few years after that Peggy Polito joined her and they created Family Hospice and Palliative Care's first Growing Through Grief, a six week educational program about grief. This unique program continues, 19 years later, to be offered twice a year throughout the area. Over the last decade, Betty Zawatski and Mary Kay Walsh have given generously of their time to run additional bereavement support groups. Geri Barbosky, June Murray, and Lorie Fuller have also extended their expertise and caring in helping to run area support groups. All Family Hospice and Palliative Care bereavement groups are free of charge and open to all community members. These women understand that even though feelings associated with grief are often individual, grief is also a shared human experience. Sharing stories, feelings, and experiences can provide great comfort and assurance. Although the participants of the group change over time, the same caring volunteers continue to stand at the helm and accompany individuals on this intense and personal journey. Their strong commitment to caring and healing has helped many to find peace and comfort during a very difficult time.



Kitty McKnight Pawloski



Peggy Polito



Mary K. Walsh



Betty Zawatski



Geri Barbosky



June Murray

*Special thanks to our volunteers at
Trinity Hospice.
We couldn't do it without you!*

*"In the time we have it is
surely our duty to do all the good we can to all
the people we can in all the ways we can."*

– William Barclay, British Theologian

Submitted by Deborah A. Scott,
Director of Volunteers

ACMH HOSPITAL CHARLES AND JEANNE WRAY

Volunteering is a Family Thing

ACMH Hospital in Kittanning, PA takes pride in the accomplishments of every one of its 125 adult and 30 junior volunteers who give their time and efforts to serve the community through their involvement with the hospital. Unique is the fact that there are currently ten husband and wife couples, three sets of siblings, and one mother-son combination among the volunteers.

With over 10,000 combined hours of volunteer service, Mr. and Mrs. Charles Wray, one of the volunteer couples, typify the dedication shown by the entire staff to helping patients and visitors. Charles (Chick) Wray has been a "red coat" since 1984 when he retired after a 25-year career as a high school business teacher. Prior to teaching, Chick had served in the US Navy stationed in the Pacific during World War II as a radio operator. He and his wife Jeanne also owned and operated Wray's Dairy Store, a very popular local spot for high school students to gather after school in the 50s and 60s.

Chick and Jeanne were asked to share their business acumen with a local health center to bring their snack bar back from a negative financial position. Through their careful management over a three-year period they were able to turn the business around and show a successful financial standing.

After joining the hospital auxiliary Chick served on the board of directors, holding the office of assistant treasurer and chairman of the finance and personnel committees. He is currently a patient escort in the ambulatory surgery department, helping patients to and from the operating room and taking them by wheelchair for discharge.

Jeanne Wray has been volunteering for over 35 years beginning when the hospital was located in downtown Kittanning. Now she can be found two mornings a week at the gift shop cash register, always with a friendly smile and "good morning" for the customers. She brings with her a wealth of knowledge in customer service and marketing through her years of dealing with the public and through her work in retail sales. Jeanne has helped with many special projects, including auxiliary fundraising activities, helping at health fairs, and

working at the various health screenings sponsored by the hospital.

They share a love of crafts and have displayed their work at the Armstrong Folk Festival and at various craft shows in the Kittanning area. Jeanne and Chick have been married for 68 years, with two children and four grandchildren. They enjoy traveling, and visiting with their family is very important to them.

ACMH Hospital is very grateful to Chick and Jeanne and all of the volunteers who contribute to such a vital element to the healthcare community.



Charles and Jeanne Wray



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Paris Healthcare Linen Services team - Williamsport, PA



Paris Healthcare Linen Services, DuBois plant

Paris Healthcare Linen Services – DuBois & Williamsport, PA Plants Receive Industry Accreditation

Paris Healthcare Linen Services, DuBois & Williamsport, PA plants, have received accreditation – the industry's highest rating on quality and safety – from the Healthcare Laundry Accreditation Council (HLAC). In addition, Paris Companies recently received accreditation of its Ravenna, OH plant. Thus, all three Paris plants are now accredited.

HLAC is a non-profit organization that inspects and accredits laundries processing healthcare textiles for hospitals, nursing homes and other healthcare facilities.

HLAC's mission is to publish high standards for processing healthcare textiles in laundries, and to provide an accreditation process that recognizes those laundries that meet these high standards. The decision to become accredited is completely voluntary.

"Becoming accredited makes us a better company. Plus, it gives our customers peace of mind to know that their provider is meeting the highest standards in processing healthcare textiles," says David Stern, President & CEO, Paris Companies.

"The customers we serve, predominately acute-care hospitals, are used to dealing with agencies, vendors and people who have accreditation," Stern said. "It's the right thing to do if you are in the business of processing and providing healthcare textiles."

The primary benefit of accreditation is that an independent third party has inspected the laundry facility and found that it meets or exceeds the highest standards for processing healthcare textiles. A laundry cannot inspect and accredit itself, and its customers generally do not have the time or expertise to do so.

For more information on Paris Companies and Paris Healthcare Linen Services, visit www.parisco.com.

Allegheny General Hospital Inpatient Pediatrics Program Opens at Suburban Campus

Allegheny General Hospital (AGH) Suburban Campus in Bellevue recently admitted its first pediatric patients following the transition of the program from AGH's main campus. The program at Suburban offers families, particularly those living in neighborhoods north of the city, access to high level inpatient pediatric care right in their own community.



Back row l-r: Monica Maghrak, a chaplain at Torrance State Hospital; Rev. Sherry Miller, a Lutheran pastor from Mt. Pleasant; Sr. Christina Janusek, a Catholic nun at Marian Manor; Front row l-r: Dave Wierzbowski, Spiritual Care Coordinator, Family Hospice and Palliative Care; Ed Penhanich, Spiritual Care Specialist and Director of the CPE Program at Family Hospice and Palliative Care

Hospice to Offer Clinical Pastoral Education Program

In all communities clergy are called upon for many things – to guide people in their spiritual life, to counsel couples about marriage, and to assist individuals and families at the final stage of life. Although many clergy have years of experience to depend on, they are often not explicitly trained in all these areas. For the first time in this area, a hospice, Family Hospice and Palliative Care has initiated a new Clinical Pastoral Education Program (CPE) accredited by the College of Pastoral Supervision & Psychotherapy (CPSP).

The program provides individuals involved in ministry or spiritual care with a greater understanding of end-of-life issues. Interns with the program partake in a full year of classroom work as well as visiting with hospice patients and families. They approach issues such as death and dying, examining their own feelings about dying, and become comfortable with visiting a patient at home. They develop an understanding of the integral part the pastoral/spiritual team member plays on the hospice team and in the care of the patient and family.

This year four interns are participating in this unique program. They will invest a minimum of 12 hours a week in classroom discussions and to caring for Family Hospice and Palliative Care patients and families. The interns rotate through the inpatient unit, Family Hospice Manor, as well as visiting with patients in hospitals, long term care facilities, and at home.

For many, this is the first time they have been formally trained in caring for those with a life limiting illness. They review questions such as – "What could I have said differently?" "How can I help this patient find spiritual peace at the end of his life?" and "How can I help support a spouse and children through this devastating loss?"

As in all hospice care, the hospice team members are invited into the lives of patients. Those offering spiritual support develop a sensitivity of how to approach all patients – some of whom have a long history of spiritual comfort and others who have not approached a spiritual counselor in years. "We have to allow the patient and family to show us the way. We are merely accompanying them on this important journey. On our part, we need to make sure that we are well versed in the many issues that arise at the end of life – both with the patient and the family," said Ed Penhanich, Spiritual Care Specialist with Family Hospice and Palliative Care and the Director of the CPE Program.

As a community based hospice, Family Hospice and Palliative Care, not only cares for patients and families, but it is also committed to educating the public and professionals about end-of-life issues. The Clinical Pastoral Education Program is one example of reaching out to those in the community who provide comfort to others and training them to better serve those in need.

For more information about the Clinical Pastoral Education Program contact Ed Penhanich at Family Hospice and Palliative Care, (412) 578-2899 or epenhanich@familyhospice.com.

Interactive Web Site Offers New Approach to Educating Cancer Patients About Clinical Trials

Given that only a small percentage of adult cancer patients participate in clinical trials, UPMC Cancer Centers and a Pittsburgh-based health care technology company are launching an interactive Web site that will help patients and their families learn about clinical trials. The site simulates a conversation by allowing visitors to type in their own unique questions and receive video-based answers in real time from other cancer patients, medical experts and educational guides.

"Clinical trials are extremely important as more and more cancer drugs are developed that need to be tested," said Samuel Jacobs, M.D., associate director of clinical investigations at UPMC Cancer Centers. "Unfortunately, many cancer patients do not learn about participating in clinical trials or have fears and misconceptions about them. Our hope is that this site will allay those fears and provide helpful information by allowing patients to ask questions openly from the privacy of their own homes."

The Web site can be accessed by clicking on the "Meet, Ask, Understand" icon at <http://www.upmccancercenters.com/trials/>.

Where You Invest Depends on Style

An often-asked question of many investors is: "Where should I put my money now?" There are really two parts to this answer. First, investors should determine the most appropriate asset allocation given their time horizon, tolerance for risk, asset class preferences and required rate of return. We generally accept that greater return comes from larger allocations to stocks and those higher returns bring higher risk. In the graph below, we illustrate this concept of increasing return and higher risk consistent with an increased allocation to stocks. You should determine where you fit in this spectrum.

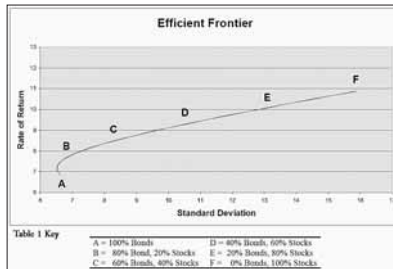
Beyond the decision of bond and stock weightings, investors should consider fur-

and, both growth and value styles.

Almost every asset class is best at one time and worst at another and past performance doesn't help us predict the future best and worst classes. By owning multiple asset classes in a single portfolio, you can manage the risk of large loss that might come from over-reliance on just one or two asset classes.

Once the asset allocation decision has been finalized, the second decision focuses on implementation. How does one select appropriate investments for each selected asset class?

Both professional advisors and individual investors would be well served by applying the due diligence, i.e., investment research process outlined by the Foundation for Fiduciary Studies. The foundation operates in association with the Center for Fiduciary Studies, which is located at the University of Pittsburgh Katz Graduate School of Business, Center for Executive Education. The "Foundation" is an independent, non-profit organization established to develop and advance investment practice standards of care for investment fiduciaries. It is independent of any ties to the investment community. The process represents an appropriate, baseline research protocol that can be followed by investors in selecting money managers. It attempts to identify those money managers that consistently provide better performance with less risk and lower expenses than their peers. The process can be used for both the initial investment selection and ongoing, quarterly portfolio monitoring.



ther diversifying their portfolio to include a broad array of investments that behave differently given the same economic and market conditions. As examples, consider not just bonds, but also high quality, high yield and international bonds. With respect to stocks, consider not just domestic but also international; large and small capitalization;

ing money managers. It attempts to identify those money managers that consistently provide better performance with less risk and lower expenses than their peers. The process can be used for both the initial investment selection and ongoing, quarterly portfolio monitoring.

1. Performance

Examine the manager's rolling one-, three- and five-year performance. You should compare performance against the median return of the manager's peer group to identify those investment products that have outperformed their peers, preferably, in all three periods.

2. Three-year, risk-adjusted performance

Investors should examine the manager's Alpha and Sharpe Ratios. Comparing a manager's risk-adjusted performance to the median of the manager's peer group helps identify better performing funds that, historically, have taken less risk than their peers.

3. Inception date

The investment product should have at least three years of history to warrant consideration.

4. Style Drift

Does the money manager maintain style consistency? If the stated style is large-cap growth, the portfolio should hold large company growth stocks ... all the time. To determine this, compare the manager's current investment style to its trailing 3-year style category as determined by Morningstar®.

5. Portfolio Size

An appropriate minimum size is \$75 million. There should be sufficient assets to permit adequate diversification, within the style, as well as cost-effective, efficient trading.

6. Holdings consistent with asset class

At least 80% of the holdings should be from the broad asset class associated with the product.

7. Cost

You should screen for money managers



BY PAUL BRAHIM, CFP® AIFA®

whose fees are less expensive than the peer group median, based on the total expense ratio.

8. Organizational Stability

This screen examines manager tenure. The same investment team should be in place for at least two years. You might also consider qualitative information such as any pending litigation against the money management firm; internal management struggles; change in ownership; or even a rapid growth or loss of assets under management. In this screen, common sense should prevail – organizational instability, as with any business, may result in underperformance.

On the surface, this due diligence process might appear to be relatively easy. However, according to the Center for Fiduciary Studies, only an average of 6% of managers are able to pass all of the screens every quarter. That is not to say that the remaining 94% have failed. Instead, the due diligence shortfalls should define your agenda for ongoing review.

Remember, asset allocation based first, manager selection second and review continuously.

Paul Brahim, CFP® AIFA®,
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UNIVERSITY OF PITTSBURGH	Friday, May 18, 2007 7:30 a.m. - 3:30 p.m. Victoria Building Oakland Campus
WWW.NURSING.PITT.EDU <small>Conference sponsored by the University of Pittsburgh Medical Center</small>	Keynote Speaker: Renee S. Holleran, PhD, RN, FAEN "A Day in the Life of a Nurse: The Use of Evidence-Based Nursing Practice" Maryann F. Fralic Distinguished Lectureship 5.2 CNE contact hours will be awarded. Cost: \$125 For more information visit www.nursing.pitt.edu or call 412-624-3156.
CONTINUING EDUCATION	

Western PA HIMSS and ACHE of Western PA Joint Meeting Highlights

BY DAN MATTSON

Consumer Directed Healthcare and Transparency: What Is It and Why Do We Care



Deborah A. McGivern

The Western Pennsylvania chapter of HIMSS along with ACHE of Western Pennsylvania co-sponsored an informative program at the McKesson Automation facility in Warrendale. The night started with a tour of the McKesson manufacturing facility highlighting the self contained work cells along with lean manufacturing processes utilized to achieve a flexible and quality production environment. Attendees were able to see first-hand how equipment, such as dispensing cabinets and 4th generation robots, are assembled and tested.

Following the tour, Deborah A. McGivern, Vice President Product Management, HIS & Revenue Cycle Solutions from McKesson Provider Technologies spoke on "Consumer Directed Healthcare and Transparency: What Is It and Why Do We Care." McGivern started by defining Consumer Directed Healthcare (CDHC) as a benefit plan intended to promote increased consumer responsibility and accountability while providing a more affordable medical insurance option.



Dan Mattson

Several factors are driving this new model. They include increased national health expenditures as a percentage of the gross domestic product (GDP), Medicare enrollment, number of uninsured Americans across all economic classes and the responsibility of the employer to cover increasing premiums that have an annual compounded growth rate of 10% over the last 7 years.

Employers view collective purchasing, consumerism and care management as significant healthcare cost management strategies. Employers further manage healthcare costs by providing higher deductible CDHC options and increasing the use of care management programs. The goal of CDHC is that engaged consumers make better decisions. Although the benefits are compelling, adoption has been slow.

One of the key enablers is providing consumers with easy access to price and quality information so that they can make more informed healthcare decisions. Consumers are increasingly supplementing information provided by their physician with information derived from other sources such as insurance plan and government websites. However, the information is in various formats and the challenge is to extract and compare information from these sources. Consumers also use these online resources to research physicians, hospitals, new procedures and techniques. Employers are pushing for widespread transparency of healthcare providers and facilities to publicly disclose in a user friendly format the relative price, quality, safety, and efficiency of healthcare.

Initiatives by the government, providers and payors are in various phases of providing and/or mandating CDHC information. The government has issued an executive order that directs federal agencies to share information about prices paid to providers and quality of provider services with beneficiaries. Currently 38 states require hospital reporting of quality data and 32 states report charges for selected procedures. One hurdle is that the state provided information is in various formats and can be difficult for a consumer to review and compare.

Payor initiatives include developing a standardized format similar to a nutrition label. Some payors also provide health plan rates that they offer. Provider initiatives are generally accepted by the consumers but most physicians feel that the information would not be useful for their patients. Despite this discrepancy, providers are embracing transparency initiatives.

CDHC is also adapting various information technology solutions. Enabling patients to pre-register, allowing physicians to easily access and share information regarding patients and procedures, enabling patients to review price estimates, allowing patients to receive post procedure education, and financial management are just some of the features that being employed.

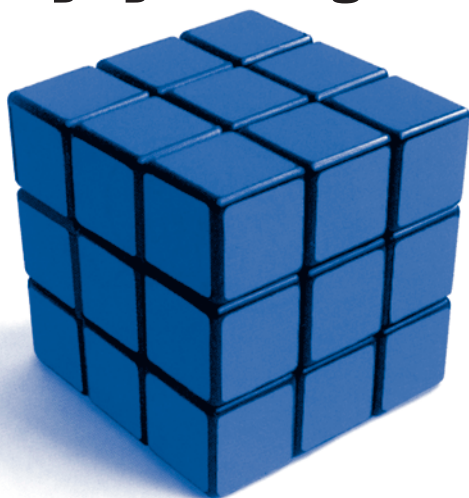
Regardless of barriers, the magnitude of healthcare spending and growth will mandate greater consumer engagement and accountability in healthcare decisions. If employers and consumers are required to continue to pay more for their healthcare, they will demand more financial and data visibility.

Information about HIMSS can be found at www.himss.org and WPHIMSS information can be found at: www.wphimss.org.

Information about ACHE of Western PA can be found at <http://westpa.ache.org>.

Dan Mattson is on the WPHIMSS Communication Committee and VP-Business Development for Aegis Communications Inc. concentrating on global healthcare solutions. He can be reached at (412) 680-6360.

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May

Western Psychiatric Institute and Clinic to Host Training Programs

During May, the Office of Education and Regional Programming at Western Psychiatric Institute and Clinic (WPIC) will host several training programs.

Friday, May 4

"Creative Problem Solving" will be held from 9 a.m. to 12 p.m. in Classroom 151 of the UPMC Quantum Building in the South Side Works, located at 2 Hot Metal Street. Designed for learning how to enhance their problem-solving skills, this program will teach how to solve problems more creatively.

"Public Relations for Non-Profits" will be held from 1 to 4 p.m. in Classroom 151 of the UPMC Quantum Building. Presented by Jocelyn Uhl Duffy, assistant director of the News Bureau for UPMC and the University of Pittsburgh Schools of the Health Sciences, this is for members of non-profits who are looking for ways to promote their programs.

Thursday, May 10 and

Friday, May 11

"Motivational Interviewing for Behavior Change," a two-day workshop, will take place daily from 9 a.m. to 5 p.m. in the assembly room of UPMC Passavant, located at 9100 Babcock Blvd. This is an introductory workshop in Motivational Interviewing.

Thursday, May 24

"Assessment and Treatment of Eating Disorders" will be held from 9 a.m. to 12 p.m. at the Fayette County Mental Health/Mental Retardation Program in Uniontown. This program will address the assessment of eating disorders and discuss the various treatment strategies for these disorders.

"Redirecting Bullying Behaviors: Engaging Victims and Empowering On-Lookers" will be held from 1 to 4 p.m. also at the Fayette County Mental

Health/Mental Retardation Program. This program will review the research behind aggressive behaviors among youth in schools and discuss strategies for preventing and intervening with these behaviors. For more information, contact Nancy Mundy at (412) 802-6910 or mundynl@upmc.edu or visit www.wpic.pitt.edu/oerp.

May 9

ACHE of Western Pennsylvania Offers Category I ACHE Continuing Education Credits for Healthcare Leaders

"Medical Staff Relations: The Involvement of Leadership in Strategies and Operational Decision-Making" will be held on Wednesday, May 9, hosted by Jameson Health System and moderated by Thomas White, CEO, Jameson Health System. Registration and hors d'oeuvres begin at 5:30 p.m., session at 6:15 p.m. This educational session features a panel of hospital executives. Visit <http://west-pa.ache.org> to register and for more information.

May 15-16

Heart Hospital Symposium

Join Ohio State University Medical Center, Corazon, Inc., and DesignGroup, May 15-16 as they host another Heart Hospital Symposium, "The Next Chapter of the OSU Ross Heart Hospital Story: Validating the Delivery Model of the Future," in Columbus, OH at The Blackwell Center on the OSU Campus. The Symposium agenda includes presentations on strategies for sustaining growth, lessons learned in operations, evidence-based design principles, building a center of excellence, implementing cutting-edge care delivery, and sustaining a reputation of excellence. For more information, call (412) 364-8200.

May 19

Walk for a Healthy Community Presented by Highmark Blue Cross Blue Shield

The fifth annual Walk for a Healthy Community presented by Highmark Blue Cross Blue Shield will take place on Saturday, May 19 at Heinz Field. The proceeds generated from the Walk for a Healthy Community will directly benefit 33 local nonprofit organizations. Walkers can register for the event by requesting a registration brochure from 866-620-WALK or by visiting www.walkfora-healthycommunity.org.

May 20

Three Rivers Liver Walk

The American Liver Foundation 4th Annual Three Rivers Liver Walk will take place on May 20. This annual fundraising walk will begin at the Millvale Riverfront Park in Pittsburgh, PA. Registration begins at 8:30 a.m. For more information, contact Suzanna Masartis at SMasartis@liverfoundation.org or (412) 434-7044.

May 23-25

Society of Hospital Medicine to Hold Tenth Annual Meeting in Dallas

More than 1,100 hospitalists and healthcare providers from around the country will gather in Dallas May 23-25, 2007 for the tenth annual meeting of the Society of Hospital Medicine (SHM).

This year's meeting, to be held at the Gaylord Texan Resort and Convention Center, will mark SHM's first decade as an organization, and will celebrate the many achievements of hospitalists over the last ten years. For more information, visit www.hospitalmedicine.org/hospitalmedicine2007.

June 7

8 Over 80 Event

The Jewish Association on Aging will be holding its 7th annual 8 over 80 event on Thursday June 7 at 6:00 p.m. on the grounds of Weinberg Village, 200 JHF Drive, Pittsburgh. This annual event celebrates the lives and accomplishments of 8 Pittsburgh Jewish Leaders who are 80 years of age and older. For more information, contact Susan Fenster at (412) 521-8986 or sfenster@jaapgh.org.

June 8

The Charlie Batch Celebrity Golf Classic

Attention golfers: Get ready to tee up at the Charlie Batch Celebrity Golf Classic. The event, sponsored by the Pittsburgh Mercy Foundation, will be held Friday, June 8 at Nevillewood in Collier Township. The scramble format tournament will begin with a buffet lunch at 11 a.m., followed by a 1 p.m. shotgun start.

Proceeds from the event will benefit Mercy's Operation Safety Net® and the Best of the Batch Foundation. For more information, call the Pittsburgh Mercy Foundation at (412) 232-7504.

October 2-4

Healthcare Facilities Symposium & Expo

The Healthcare Facilities Symposium & Expo is returning to the Windy City, Chicago, IL, for its 20th anniversary event! Don't miss the longest-running conference and exhibition focused on master planning, design & construction, evidence based design, sustainability, technology, guest services and operations in healthcare facilities. For more information, visit www.hcarefacilities.com or call (203) 371-6322.

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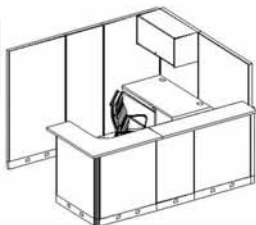


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St. Barnabas Health System is comprised of a 172-bed skilled nursing facility in Gibsonia, a 91-bed skilled nursing facility and 59-bed assisted living facility in Valencia, an outpatient Medical Center and three retirement communities. RN and LPN positions available to assist our Retirement Village and community clients with daily living and personal care needs. Earn great pay and benefits now. Fantastic country setting, convenient drive from Pa. Turnpike, Rts. 8 & 19, Interstates 79 & 279.

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Baptist Homes has been serving older adults of all faiths on its campus in Mt. Lebanon since 1910. Our mission is to offer a full continuum of enriched living, compassionate care, and benevolence to a broad spectrum of individuals. We are accredited by the Continuing Care Accreditation Commission (CCAC), and serve almost 300 adults with skilled and intermediate nursing care, Alzheimer's care, assisted living/personal care and HUD independent living. In addition, our residents have access to a full range of rehabilitative therapies and hospice care. Baptist Homes is a licensed Continuing Care Retirement Community (CCRC) and is Medicare and Medicaid certified. For more information, visit our website at www.baptisthomes.org or arrange for a personal tour by calling Pam Tomczak, Admissions Coordinator, at 412-572-8247. Baptist Homes is conveniently located at 489 Castle Shannon Boulevard, Pittsburgh, PA 15234-1482.

COMMUNITY LIFE

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Community LIFE is a non-profit program that offers all-inclusive care that goes beyond the traditional boundaries of elder care. It allows seniors to remain in the community, maintain their independence, and allows them to enjoy their golden years at home. Community LIFE provides older adults with fully integrated and coordinated health and social service, usually at no cost to qualified individuals. Participant in the program are transported to our day health center on an as-needed basis, to receive healthcare and social services, meals, and participate in various activities.

The LIFE Center is staffed by a geriatric physician, RN's, physical and occupational therapists, dietitian, social worker, and aides, and includes a medical suite for routine exams and minor treatments, some emergency care, therapy areas, dining/activity space, personal care area and adult day services. Community LIFE offers complete, coordinated healthcare for the participant, including all medical care, full prescription drug coverage, rehab therapies, transportation and in home care. If you or someone you care about is having difficulty living in the community, then call Community LIFE at 412-464-2143.

KANE REGIONAL CENTERS

The Kane Regional Centers, located in Glen Hazel, McKeesport, Ross and Scott, provide 24-hour skilled nursing care, rehabilitation services, specialty medical clinics and dedicated units for dementia care to the residents of Allegheny County. Admission to the Kane Regional Centers is based on medical needs and can occur within 24 hours, including weekends and holidays. Kane accepts a number of insurance plans as well as private pay. To apply for admission to the Kane Regional Centers call (412) 422-6800.

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- St. Barnabas Nursing Home
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- Valencia Woods at St. Barnabas/The Arbors at St. Barnabas
85 Charity Place, Valencia, PA 16059, (724) 625-4000 Ext. 258
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PUBLIC HEALTH SERVICES

ALLEGHENY COUNTY HEALTH DEPARTMENT

The Allegheny County Health Department serves the 1.3 million residents of Allegheny County and is dedicated to promoting individual and community wellness; preventing injury, illness, disability and premature death; and protecting the public from the harmful effects of biological, chemical and physical hazards within the environment. Services are available through the following programs: Air Quality; Childhood Lead Poisoning Prevention; Chronic Disease Prevention; Environmental Toxins/Pollution Prevention; Food Safety; Housing/Community Environment; Infectious Disease Control; Injury Prevention; Maternal and Child Health; Women, Infants and Children (WIC) Nutrition; Plumbing; Public Drinking Water; Recycling; Sexually Transmitted Diseases/AIDS/HIV; Three Rivers Wet Weather Demonstration Project; Tobacco Free Allegheny; Traffic Safety; Tuberculosis; and Waste Management. Bruce W. Dixon, MD, Director
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PEDIATRIC REHABILITATION PROGRAM

THE CHILDREN'S INSTITUTE

The Children's Institute (CI), located in Squirrel Hill, provides inpatient and outpatient rehabilitation services for children and young adults. Outpatient services are also provided through satellite facilities in Green Tree, Monroeville and Wexford. In addition, The Children's Institute offers educational services at The Day School to children, ages 2-21, who are challenged by autism, cerebral palsy or neurological impairment. Project STAR, CI's social services component, coordinates adoptions, foster care and intensive family support for children with special needs.

For more information, please call 412-420-2400.

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Harrison City - 724-527-3999
Irwin - 724-863-0139
Jeannette - 724-523-0441
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Deborah Flowers Chief Clinical Officer
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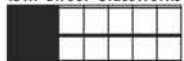
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\$548,900

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Olga Dubrovsky
 Coldwell Banker Real Estate Inc.
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olga.dubrovsky@pittsburghmoves.com



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PINE TOWNSHIP MLS# 627432 \$584,900

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PINE TOWNSHIP MLS# 655469 \$439,000

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Beautiful 4 BR, 2.5 BA w/ 2 car int/grg that overlooks Beaver Lakes Country Club. Relax on the country porch or private deck off eat-in kitchen. Elegant DR w/ tray ceiling and French doors to LR are made for entertaining. FR w/ gas fireplace and MBR w/ cathedral ceiling are just some of the amenities to enjoy. Neutral decor, move in condition and home warranty make this a buyers delight.



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Call Linda Honeywill 412-367-8000 x237



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Franklin Park \$415,000

Set in the heart of Franklin Park, this gorgeous provincial has so much to offer! Incredible d'cor and stunning hardwood floors! The interior features custom upgrades including a granite kitchen, dentil crown moldings and fresh paint! A finished game room is highlighted by large storage areas and walk-out to fenced rear yard. Take pleasure in professional landscaping & close proximity to community pool! #663904

Visual Tours at www.HoneywillTeam.com
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Adams Township \$825,000

Exceptional private home in Treaddale Golf Community! The incredible floor boasts a stunning two story family room, gourmet island kitchen with large breakfast area and pass-thru fireplace! The multi-functional finished basement features a second kitchen, full bathroom with whirlpool, another pass-thru fireplace and wine room! Beautiful first floor master suite! #663614

Visual Tours at www.HoneywillTeam.com
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Adams Township \$759,900

Exquisite former festival of homes model!! This 2 story provincial offers an open floor plan and plenty of extras! Formal living room, elegant dining room and spacious family room highlighted by a fantastic 2 story stone fireplace! Additional features include a huge mud/laundry room, roomy kitchen with breakfast bar and oversized den with personal deck. Enjoy spectacular golf course views from one of the three rear decks! #661432

Visual Tours at www.HoneywillTeam.com
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Richland Township \$525,000

Matchless colonial with beautiful floor plan! Exceptional floor plan offers graceful living room, formal dining room with a wet bar, eat-in kitchen with bay window and vaulted family room with fireplace. The first floor also boasts the master suite and laundry/mudroom. A stunning second floor library features hardwood floors and overlooks the family room. A magnificent home on a half acre wooded lot! #661985

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1.3 Acres in Sewickley Heights

2 Audubon Drive - \$469,900

This unique renovated school house is the perfect place to relax. It offers 9' ceilings, plank flooring, French doors, den/ floor to ceiling bookcases, living area / gas fireplace, equipped kitchen, familyroom encased in windows plus 1st floor bedroom with bath. This open floor plan has an open staircase to the loft master bedroom with full bath, sitting area, skylights and bell tower. An additional feature is the newer double garage with finished studio /exercise room or den. Call for an appointment.



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Moon Township
\$899,900

Cherrington Pointe, a gated community. Nearly 6,000 sq. ft. of beautiful detail! Four bedrooms, 4.5 baths, 1st floor master suite, fabulous gourmet kitchen, study with judge's paneling, delightful 21x16 sun room, finished walk-out lower level, walnut bar, gracious patios, 3-car attached garage. View! JoAnn Robb 412-833-7700 ext. 201

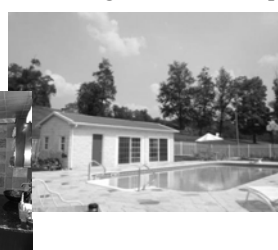
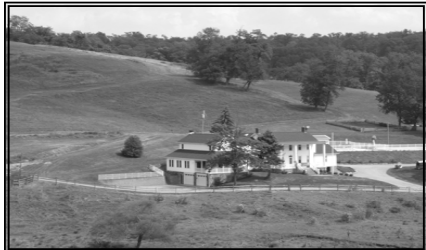


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Welcome to Perfection! ~ South Strabane ~ \$1,249,900

Historic & charm w/contemporary amenities. Key entrance to adjacent property! incl gourmet kitchen w/stainless appliances, sensational beamed great rm w/French drs to cvrd porch, gorgeous wd fls, formal parlor & dining rm, 5 fireplaces, updated throughout incling mechanics, windows & more, baths w/custom tile finishes, stamped concrete, incredible pool & pool house, huge barn, stream & pondn prop.



For More information contact: Karen Marshall, Limited Partner Keller Williams Realty Office: 412-831-3800 ext. 126 or Email: karnmarshall@realtor.com

SEDWICK HEIGHTS - EAST FRANKLIN TWP.
\$659,000

MLS#656041

Distinguished brick ranch with cement tile roof, lovely .613 acre with exceptional view of the Allegheny. Gourmet kitchen with all built-ins, formal livingroom, banquet-sized diningroom, 3 luxury bedrooms, 3 superb baths, huge familyroom with fireplace. Omni stone driveway, walkway and patio. Professionally shrubbed and landscaped grounds. Large attached 2 car garage. Call Olga for more details.



FORD CITY BOROUGH
\$169,000

MLS#638420

2 story cedar designed for light industry - 3 phase electric. Potential for business on 1st floor and living qtrs on 2nd floor with a complete kitchen and full bath. Parking on side of bldg with entire front available for parking. Handicap accessible. Call Olga for more details.



NORTH BUFFALO TWP. / ARMSTRONG COUNTY
\$299,000

MLS#647715

Unique brick ranch on 6.63 acre with cathedral ceilings, plank floors, wormy chestnut kitchen, 5-stall barn, invisible dog fence, pool and pool house, rear deck, attached 2 car garage plus integral garage. 40 minutes to downtown. Include home warranty. Call Olga at 724-859-3546.



Olga Panchik, GRI
Northwood Realty Services

724-548-4157 or 724-859-3546



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