ECMC invests $150 million in ‘Health Campus’

Great Lakes Health collaboration stimulates Centers of Excellence and expansion

Message from ECMC Corp. CEO Jody L. Lomeo - pg. 2

ECMC receives Joint Commission Gold Seal of Approval Award - pg. 6

Key Bank Living Skills Suite opens - pg. 7

New ADON in Behavioral Health - pg. 7

WNYRuns For Heroes Event - pgs. 8-9

The Center for Wound Care and Hyperbaric Medicine opens - pgs. 10-11

Originator of the DEU tours ECMC - pg. 12

Buffalo Fire Commissioner’s Award to ECMC’s Dr. Dietrich Jehle - pg. 13

ECMC Lifeline Foundation Executive Director Gia Coone named Outstanding Fundraising Executive - pg. 13

Chris VanVeghten is President of Headway of WNY - pg. 18

Thomas Flanagan Appointed Assistant in Behavioral Health - pg. 19

Comforting Quilt Program - pg. 19

Staff Members of the Months - pgs. 20-21

Important days to know - pg. 21

“...This is not the ECMC of yesterday, this is a new Health Campus growing to serve the needs of patients from every corner of Western New York—and not just emergency patients, but elective surgery patients, rehab patients, out-patients, orthopaedic patients, transplant patients and those selectively choosing ECMC for the care they need. These are historic initiatives not only for ECMC, but our community.”

Jody L. Lomeo ECMC Corp. CEO

continued on pages 3-5

Keep updated each issue with news and information on ECMC expansion and growth in our new feature section....

Progress and Plans for a World-Class, Integrated Health System! Pgs. 14-17

Visit us online to view our new Health Campus Expansion video! www.ecmc.edu
A Message from ECMC CEO
Jody L. Lomeo

During this holiday season, we have much to be thankful for and celebrate. I am especially thankful for the passion and compassion physicians, nurses, and staff bring to caring for our patients everyday.

One of the most significant accomplishments this year was the recent Joint Commission Accreditation. This is a rigorous process and our physicians, nurses, and staff shined as they demonstrated to this austere body that they put quality patient care and safety first in everything we do. It is a testament to the hard work and dedication of all employees at ECMC. We congratulate and thank them.

2010 was the year of much planning for growth. With our partners at Great Lakes Health System of WNY and Kaleida Health, we developed a new plan for ECMC’s clinical service line growth in Kidney Care and Transplant, Orthopedics and Bone Health, and Long-Term Care. This year we also saw the expansion of our Emergency Department and operating suites. This expansion focused on our continued efforts to expand our capabilities and improve our patients’ experience when visiting ECMC.

In 2011, we will begin the construction of new facilities, which we previewed with a video of the campus growth. If you have not had a chance to view this video, please go to www.ecmc.edu. There are also more details of this expansion included in this edition of Pulse.

As we reflect on 2010, we are also thankful for those that volunteer their time and talents to support the future of ECMC. All of these volunteers spend countless hours at ECMC helping to improve care for our patients, as well as represent and promote ECMC in the community. Our Board of Directors is driving the vision, providing financial stewardship, and ensuring quality care; our Foundation Board is helping to financially support needed services and the growth of our campus; our Volunteer Board and hospital volunteers are spending their valuable time with our patients and raising dollars for needed equipment; our physician leadership spends their precious time providing guidance on our physician-led governance processes at ECMC and Great Lakes Health System of WNY; and our Pastoral Care staff is providing comfort and hope to our patients. We thank everyone for their outstanding service to the patients of ECMC.

Happy Holidays to all and may God bless you and your families in the coming year.

Jody L. Lomeo
Chief Executive Officer
ECMC Corporation
Erie County Medical Center recently outlined a dramatic expansion of its ‘Health Campus,’ highlighting $150 million in work on a new long-term care facility, a 333-vehicle parking ramp, a transplant and kidney center of excellence, an orthopaedic expansion, a refurbishing of the adolescent psychiatric clinic, and other major projects to enhance patient care at the Medical Center.

Expansion work on the Health Campus commenced this fall on a $27 million Center of Excellence for Transplantation and Kidney Care Services that is part of a consolidation of the Transplant and Dialysis programs with Kaleida Health and Great Lakes Health System of WNY.

Work on the new state-of-the-art 390-bed long-term care facility on the Grider campus begins next spring.

When complete, ECMC’s Health Campus will provide good-paying jobs and health-focused economic development centered in a section of Buffalo that has seen too little of both. The project, which includes demolition of eight buildings on the 65-acre ECMC property, will also support hundreds of construction workers over the next 18 months.

The expansion around and beside the existing hospital and clinic buildings represents a strong commitment to Buffalo and ECMC, hospital officials said.

“This expansion of our Health Campus brings real economic development to the City of Buffalo. It will also bring much sought after jobs to the city and top-notch healthcare for our community,” said Jody L. Lomeo, ECMC Corporation CEO. “Our collaboration with...
Kaleida and Great Lakes Health and this expansion will mean we can attract new patients and more easily recruit doctors and nurses and staff to more modern facilities. Also, families of people we care for on our Health Campus will have the most convenient parking and visiting arrangements.”

The $150 million price tag for the work, financed in part by a bond issue and a capital improvements fund the hospital’s board set aside in 2009, is the largest investment in Buffalo’s East Side in many years. ECMC already supports nearly 2,500 jobs there.

“This is the type of project that turns a community around. Between the Medical Corridor and the expansion of the ECMC Health Campus, we are seeing a transformation of our city and healthcare system,” said Sharon L. Hanson, chair of the ECMC Corporation board. “Healthcare is a growing economic development sector here and nationally. We have not seen this kind of growth in healthcare for the residents of our community for decades.”

Transformation of the Health Campus, which now has 550 beds and had 60,000 ER patients in 2009, actually began in the last year. In June, ECMC announced its expanded $2.9 million Emergency Department, with eight new trauma exam rooms and two new trauma surgical suites. The hospital performed 9,831 surgeries in 2009 and projects that to grow to 11,381 in 2011.

ECMC is already home to the state’s top-rated Adult Regional Trauma Center and in May 2009 opened a refurbished 12th floor surgical wing with $725,000 worth of improvements. With an estimated overall economic impact on the region of $750 million, ECMC had total revenues of $440 million in 2009.
“Buffalo’s inner city residents need opportunity, and ECMC’s expansion offers it,” said the Rev. Jeff Carter, pastor of Ephesus Ministries at 341 Grider Street, across from the hospital. “Our congregation and our families understand the impact this project will have on their neighborhoods and this whole community.”

The orthopaedic center, including a Women’s Bone Health Center, will expand ECMC’s capabilities and further enhance the coordination of services between all of the Great Lakes Health centers. The orthopaedic center for the Health Campus is in the planning stages and is expected to file for a Certificate of Need with the New York State Department of Health in early 2011.

“This is not the ECMC of yesterday,” Jody Lomeo said. “This is a new Health Campus growing to serve the needs of patients from every corner of Western New York—and not just emergency patients, but elective surgery patients, rehab patients, out-patients, orthopaedic patients, transplant patients and those selectively choosing ECMC for the care they need. These are historic initiatives not only for ECMC, but our community.”

ECMC currently has 136 skilled nursing beds, and the Erie County Home has 550. The new $87 million long-term care facility will handle about 400 residents, incorporating both current operations into one new one. The existing home needs about $18 million in capital improvements and is losing more than $10 million a year in operations.

“ECMC’s decisions will make a real impact in our community, bringing jobs and economic development,” said the Rev. Dr. William Gillison, pastor of Mt. Olive Baptist Church, 701 E. Delavan Avenue. “We continue to work with ECMC’s leadership in ways that will aid the hospital and our neighborhood.”

The Great Lakes Health System of Western New York is the organization formed 18 months ago that is combining operations of ECMC and Kaleida Health in the most efficient and effective ways possible to enhance the region’s healthcare system.

“Great Lakes, ECMC and Kaleida are forming a healthcare system based on excellence that’s also designed to keep Western New Yorkers close to home for treatment. ECMC’s expansion is a major step toward that goal,” said James Kaskie, CEO of the Great Lakes Health System and Kaleida Health. “We know that people will come from all over to obtain care at our centers of excellence. Western New York is becoming a destination for healthcare and that has been our goal from the beginning.”
ECMC Earns Joint Commission’s Gold Seal of Approval™

Erie County Medical Center has earned The Joint Commission’s Gold Seal of Approval™ for accreditation by demonstrating compliance with The Joint Commission’s national standards for health care quality and safety in hospitals. The accreditation award recognizes ECMC’s dedication to continuous compliance with The Joint Commission’s state-of-the-art standards. ECMC underwent a rigorous unannounced on-site survey in August 2010. A team of Joint Commission expert surveyors evaluated ECMC for compliance with standards of care specific to the needs of patients, including infection prevention and control, leadership, and medication management.

"In achieving Joint Commission accreditation, ECMC has demonstrated its commitment to the highest level of care for its patients," says Mark Pelletier, R.N., M.S., executive director, Hospital Programs, Accreditation and Certification Services, The Joint Commission. “Accreditation is a voluntary process and I commend ECMC for successfully undertaking this challenge to elevate its standard of care and instill confidence in the community it serves.”

"While we are aware of the quality of care we provide for our patients, it is always gratifying to have an outside organization recognize our efforts,” says Jody Lomeo, CEO. “This accreditation is a testament to the hard work and dedication of our physicians, nurses and staff as they strive for excellence every day. Joint Commission accreditation provides us with a framework to take our organization to the next level and helps maintain this culture of excellence.”

The Joint Commission’s hospital standards address important functions relating to the care of patients and the management of hospitals. The standards are developed in consultation with health care experts, providers, measurement experts, and patients. Accreditation is a way of evaluating quality and safety at ECMC and other hospitals by auditing the delivery of critical services and patient care. The unannounced survey is a validation of ECMC’s continuous improvement efforts and underscores the dedication and professionalism of our staff since The Joint Commission’s methodology focuses on the direct care of the patients at the Medical Center.

"In achieving Joint Commission accreditation, ECMC has demonstrated its commitment to the highest level of care for its patients."

Mark Pelletier, R.N., M.S., Executive Director, Hospital Programs, Accreditation and Certification Services, The Joint Commission

Founded in 1951, The Joint Commission seeks to continuously improve health care for the public, in collaboration with other stakeholders, by evaluating health care organizations and inspiring them to excel in providing safe and effective care of the highest quality and value. The Joint Commission evaluates and accredits more than 18,000 health care organizations and programs in the United States. An independent, not-for-profit organization, The Joint Commission is the nation’s oldest and largest standards setting and accrediting body in health care.

In Improving America’s Hospitals - The Joint Commission’s Annual Report on Quality and Safety – 2010, the Commission reported a significant improvement in hospital accountability measures over time and concluded that “this improvement has greatly enhanced the quality of care provided in America’s hospitals and has resulted in better patient outcomes.” ECMC is proud to be a part of this continuing growth of excellence in healthcare for our patients and the WNY community and to have earned The Joint Commission’s Gold Seal of Approval™.
KeyBank Living Skills Suite on the Rehabilitation Unit

Physical and occupational rehabilitation patients are now utilizing the KeyBank Living Skills Suite. The purpose of the Living Skills Suite is to offer ECMC rehab patients a supervised stay in a home environment prior to discharge from the hospital to identify any safety or judgment issues that the patient may have prior to going home and a plan for addressing these issues. This tool assists patients with a more successful re-entry to their home and the community. The patient remains under hospital care. However, they are expected to manage activities for themselves such as meal preparation, bathing, dressing, grooming, and household management.

Seventy-five percent of the patients admitted to the Rehab Unit would benefit from a stay and evaluation in this newly created suite. The KeyBank Living Skills Suite is the only Rehab Unit in WNY offering this type of service for patients. Thank you to KeyBank for their most generous support of this project.

New ADON in Behavioral Health

I would like to announce that Charletta Roberts, Assistant Director of Nursing (ADON) Behavioral Health has retired. Charletta has been part of the ECMC family for over 30 years. We would like to thank her for many years of professional and dedicated service.

Barbara Kalinowski, Registered Nurse (RN), has been appointed the Assistant Director of Nursing (ADON) in Behavioral Health on an interim basis. Barb was previously the Assistant Director of Nursing (ADON) for Behavioral Health prior to her retirement. Barb has been part of the ECMC family since 1971 and most recently has been Inservice Instructor for Psychiatry. Barb holds a BSN from D’Youville College.

We thank Barb for taking on this “new challenge” and I ask for everyone to assist and support her on the transition back to her former responsibilities. Thank you.

Richard C. Cleland MPA, FACHE, NHA
Senior Vice President of Operations
October 16, 2010, the ECMC Lifeline Foundation held its 14th annual 5K Run and Healthwalk at Delaware Park at Parkside Lodge and Ring Road. The event “Western New York Runs for Heroes” honors Western New York’s firefighters, police officers, and ECMC physicians, nurses and emergency lifesavers.

This year’s event had a record-breaking number of participants which included runners, walkers and volunteers. All adult registrants received a t-shirt and enjoyed a catered lunch and party after the event with music and awards. Awards included overall female, male and corporate team winners, as well as the first three male and female winners in 16 age categories. Congratulations to Liz Zivis and Health Information Management as the ECMC department team that raised the most money!

Pictured (left to right) are: Dennis Richards, Chief of Detectives, Buffalo Police Department; Michael Gifford; Lawrence Eggert, Chief, Lockport Police Department; Garnell Whitfield, Jr., Commissioner, Buffalo Fire Department; Jody Lomeo, CEO, ECMC Corporation, with son Vinny; Officer Steven Richie; Firefighter Mark Reed; Gia Alessandra Coone, Executive Director, ECMC Lifeline Foundation; David Mitchell, Detective, Jamestown Police Department.

Honoree Officer Steven Ritchie crosses the finish line

Chip T. Bison won 1st place in the mascot category

Co-Chairs Michael Straeck and Aiden Bradley congratulate 1st place winners Jennifer Boerner and Lucas Metzger

Bonnie and Michael Gifford receive their award, “Nothing Short of a Miracle”
This family friendly event had something for every age group: face painting, ladder trucks displaying the American flag, the mounted police, and even an appearance by Chip T. Bison, the Buffalo Bison mascot!

Police and Firefighter event honorees included: Buffalo Firefighter Mark Reed; Buffalo Police Officers Patricia Parete and Carl Andolina; Lockport Police Officer Steven D. Ritchie; Lockport Police Chief Lawrence M. Eggert; and Jamestown Police Detective David Mitchell. A special award, “Nothing Short of A Miracle,” was given to Michael Gifford, a Youngstown teenager who was critically injured in a car accident and received emergency, trauma, medical/surgical and in-patient rehabilitation care at ECMC.

Co-chairs for this event were ECMC Lifeline Foundation Board Members Aiden Bradley, District Manager, Rural/Metro; and Mike Straeck, President and Chief Executive Officer of Buffalo Ultrasound. Planning committee members included Cliff Bergfeld, Patrick Casilio, Dr. Timothy DeZastro, Amy Goliszek, Bonnie Gifford, Sharon Mozeko, James O’Neill, Chad Sawicki, Michael Schmatz and Ann Swan.

The Lifeline Foundation is grateful for the generous support of our sponsors. Our Presenting Sponsor for the second year in a row was Saturn Radiology, PLLC. Our sincere thanks to Dr. Timothy DeZastro, Dr. Shantikumar Bedmutha, Dr. Harold Tanenbaum and Dr. Gregg Feld for their leadership, commitment and support of our event.

AT&T, the Exigence Group, Rural Metro and First Niagara were Event Day Sponsors. Picnic sponsors included Buffalo Ultrasound, Buffalo Firefighters Local 282, The Western New York Police Association and The Virmac Group.

Our thanks also to our ECMC Team Captains who helped to make WNY Runs for Heroes a success: Mike Abrams, Karen Brennan, Steven Chizuk, Debbie Clark, Katrina Karas, Joe Kabacinski, Barb Rosen, Shirley Stolarski, Jim Turner, Dawn Walters, Lynn Whitehead, Dave Winkler and Liz Zivis.

The course is certified and sanctioned by the USA Track & Field organization. Proceeds from WNY Runs for Heroes will benefit programs and patient centered care at ECMC.
The Center for Wound Care and Hyperbaric Medicine at ECMC

Growing Need

Non-healing wounds of the diabetic foot are considered one of the most significant complications of diabetes, representing a major worldwide medical, social, and economic burden that greatly affects patient quality of life. Almost 24 million Americans—one in every 12—are diabetic and the disease is causing widespread disability and death at an epidemic pace, according to the Centers for Disease Control and Prevention. Of those with diabetes, 6.5 million are estimated to suffer with chronic or non-healing wounds. Associated with inadequate circulation, poorly functioning veins, and immobility, non-healing wounds occur most frequently in the elderly and in people with diabetes—populations that are sharply rising as the nation ages and chronic diseases increase.

Although diabetes can ravage the body in many ways, non-healing ulcers on the feet and lower legs are common outward manifestations of the disease. Also, diabetics often suffer from nerve damage in their feet and legs, allowing small wounds or irritations to develop without their awareness. Given the abnormalities of the microvasculature and other side effects of diabetes, these wounds take a long time to heal and require a specialized treatment approach for proper healing.

As many as 25 percent of diabetic patients will eventually develop foot ulcers, and the condition reoccurs in 70 percent of these patients within five years. If not aggressively treated, these wounds can lead to amputations. It is estimated that every 30 seconds a lower limb is amputated somewhere in the world because of a diabetic wound. Amputation often triggers a downward spiral of declining quality of life, frequently leading to disability and death. In fact, only about one third of diabetic amputees will live more than five years, a survival rate equivalent to that of many cancers.

Many of these lower extremity amputations can be prevented through an interdisciplinary approach to treatment involving a variety of advanced therapies and techniques, as outlined on page 11.
Advanced Treatments

The Center employs the most technologically advanced wound care therapy, including debridement (the removal of foreign material and contaminated tissue), specialized topical wound care, local edema control, local and systemic antimicrobial therapy, revascularization or angioplasty (repair of blood vessels), recombinant growth factors therapy, bioengineered tissue grafts and dermal substitutes, negative pressure therapy, off loading and protection, patient education and HBOT. Patient nutritional and rehabilitation needs are also addressed. When wounds persist, a specialized and holistic approach is required for healing.

Additionally, the Center uses an interdisciplinary model of care, including infectious-disease management, physical therapy, occupational therapy, laboratory evaluation, nutritional management, pain management, diabetic education, radiology testing, and debridement. Patients are mostly referred by their primary care physician, and the program operates by appointment.

DCS-managed Wound Care Centers® effectively utilize HBOT therapy to heal more than 35,000 diabetic wounds each year, providing more HBOT therapy than any other wound care provider in the world. Systemic HBOT therapy has been used to assist wound healing for more than 40 years, and is used as an adjunctive treatment for problematic, non-healing wounds that meet specific criteria. It is expected that 10 to 20 percent of the wound care cases will meet those criteria.

HBOT therapy involves the systemic delivery of oxygen through pressurized chambers. These chambers will improve the already successful clinical results of the Center. Best known as an antidote for the “bends,” or decompression illness, HBOT therapy is a safe and evidence-based treatment proven to speed the healing process in certain types of wounds. During the treatments, the patient breathes 100 percent oxygen inside a pressurized chamber, quickly increasing the concentration of oxygen in the bloodstream, where it is delivered to a patient’s wound site for faster healing. Essentially, HBOT therapy helps heal the wound from the inside out. This therapy can help reduce swelling, fight infection, and build new blood vessels, ultimately producing healthy tissue. It is also effective in fighting certain types of infections, improving circulation, in stimulating growth of new blood vessels, and in treating crush injuries, radiation injury, osteoradionecrosis (unhealthy bone following irradiation), osteomyelitis, compromised skin grafts and flaps, brown recluse spider bites, and diabetic wounds of the lower extremities.

Conditions treated with HBOT include: diabetic wounds of the lower extremity; compromised skin grafts and flaps; delayed radiation injury; necrotizing soft tissue infection; osteomyelitis (refractory); crush injury; compartment syndrome and other acute traumatic ischemia (deficiency of blood); clostridial myonecrosis (gas gangrene); carbon monoxide poisoning; decompression sickness; air or gas embolism; and select problem wounds.

Specialized Staff:

Program Director: Beth Ciszak
Clinical Coordinator: Danielle Levesque, RN
Safety Director / Hyperbaric Technician: Christine LePard, LPN
Medical Director: James Lukan, MD
Center Physician: Raphael Blochle, MD
Center Physician: William Flynn, MD
Center Physician: Weidun Alan Guo, MD
Center Physician: Michael Chopko, MD
Center Podiatrist: John Hurley, DPM
Center Podiatrist: David Davidson, DPM
Center Podiatrist: Joseph Anain, DPM

Location, Hours of Operation and Contact Information:

The Center for Wound Care and Hyperbaric Medicine at Erie County Medical Center is located on the ground level of the hospital, adjacent to the Outpatient Occupational/Physical Therapy Department and Spine Center. The Center is open Monday through Friday from 8:00 A.M. to 5:00 P.M. The Wound Center office can be reached by phone at 716-898-4800, by fax at 716-898-5446 and additional information is available at www.ecmc.edu.
Originator of the DEU tours ECMC

On October 27th, Kay Edgecombe, MN, RN, visited and toured ECMC’s Dedicated Education Units (DEUs)

A Dedicated Education Unit (DEU) is an inpatient clinical unit that is developed into an optimal teaching/learning environment. Through the collaborative efforts of nurses, management, and faculty, the clinical setting is designed to provide students with a positive clinical learning environment that maximizes the achievement of student learning outcomes. It utilizes proven teaching/learning strategies, and capitalizes on the expertise of both clinicians and faculty. The objectives of the DEU are to: utilize staff nurses to assist in the clinical competence of undergraduate students; provide clinical education for an increased number of students; assist and support the professional development of staff nurses; and provide a prepared pool of potential resources for workforce recruitment.

An abiding interest in the nexus between practice and learning has been Kay Edgecombe’s main focus as a lecturer in nursing at Flinders University. Her clinical specialties of wound management and infection control have driven her ongoing teaching and research agendas. Alongside her general teaching in the master’s and undergraduate practice-focused topics, she developed and maintains Australia’s longest running infection control course for nursing clinicians.

In 2009, Edgecombe was awarded the Australian Learning and Teaching Citation (ALTC) for her work titled “The Dedicated Education Units: An internationally-acknowledged, strategic, sustained collaboration utilizing the attributes of patients, nurses, academics and students to provide an optimal clinical learning environment for undergraduate students.” Her academic research focus has been on the transfer of learning from theory to practice, having developed and investigated a variety of different models to facilitate practice-based learning and teaching, including the conception and initial implementation of the Dedicated Education Units (DEU) in 1996. Edgecombe has presented numerous workshops on her DEU model internationally. Her most recent publication, “The Ongoing Search for Best Practice in Clinical Teaching and Learning: A Model of Nursing Students’ Evolution to Proficient Novice Registered Nurses,” appeared in Nurse Education in Practice in 2009.

Further development of the DEU is being explored via the current tour of a number of schools of nursing throughout the USA, culminating in this visit to the University at Buffalo and ECMC. ECMC nurses became the first in the region to serve as active mentors for UB undergraduate nursing students in order to immerse each student in a hands-on clinical experience. The initiative included the establishment of two DEUs at ECMC. Within ECMC’s DEUs, each designated Clinical Instructor/Teacher mentors two students for one clinical rotation and becomes the students’ main instructor with overall guidance from the University.
Buffalo Fire Commissioner’s Award for Meritorious Service to Dr. Dietrich Jehle

During the Buffalo Fire Department Beneficiary Association 120th Annual Ball held October 1st, 2010, Dietrich Jehle, MD, was recognized with the “Buffalo Fire Commissioner’s Award for Meritorious Service.”

As stated in the Annual Ball program…

“Location of incident: NYS Thruway Rt. 190 South; Date of Incident: September 3, 2009:

Dr. Jehle, after observing a chain reaction motor vehicle accident on the NYS Thruway, immediately stopped his car...to help victims of the crash. Dr. Jehle in short order, triaged the scene and went to work to try to save two little boys trapped in a burning vehicle. Through thick smoke and with the risk of fire consuming the auto, Dr. Jehle and other bystanders worked feverishly to save these children. Although their efforts fell short of saving one boy from the effects of the crash, Dr. Jehle is commended for his commitment to saving lives at anytime and anyplace. It is with great honor that we present the Buffalo Fire Commissioner’s Award for Meritorious Service to Dr. Dietrich Jehle.”

Dietrich Jehle, MD, FACEP, is currently Associate Medical Director and a Member of the Board of Directors for ECMC Corporation. Board Certified in Emergency Medicine (since 1988, recertified 1997) and Internal Medicine (since 1982), Dr. Jehle served 17 years (1990-2007) as Emergency Department Director for ECMC. Dr. Jehle is Professor and Vice Chairman of the Department of Emergency Medicine at the State University of New York (SUNY) at Buffalo (UB).

ECMC Lifeline Foundation Executive Director Gia Coone named 2010 Earle Hannel Outstanding Fundraising Executive by Association of Fundraising Professionals of Western New York

ECMC Lifeline Foundation Executive Director Gia Alessandra Coone is the recipient of the 2010 Earle Hannel Outstanding Fundraising Executive Award. Named in memory of Earle Hannel in 2005 for his profound commitment to the fundraising profession and who is ultimately regarded as a model to emulate, the award is presented annually and recognizes a fundraising executive with more than 15 years of successful fundraising experience.

“Gia has taken the Lifeline Foundation to a new level. I congratulate her on this well-deserved honor,” stated Jody L. Lomeo, CEO, ECMC Corporation.

Congratulations to all of the other 2010 Association of Fundraising Professionals honorees:

Patrick P. Lee
Outstanding Philanthropist

Doug and Beth Swift
Outstanding Volunteer Fundraiser

KeyBank
Outstanding Philanthropic Corporation

M&T Bank/M&T Foundation
Outstanding Philanthropic Foundation

Lexi Keller
Outstanding Young Philanthropist

Todd Brason, President, WILLCARE and Board Chair, ECMC Lifeline Foundation; Patrick Casilio, President, Casilio Companies and Immediate Past Board Chair, ECMC Lifeline Foundation; Gia A. Coone, Executive Director, ECMC Lifeline Foundation and her husband, James Coone
Emergency Department Renovations and Expansion Phase II

Description: This 9,084 square-foot renovation relocates the administrative areas to the Laboratory Building and creates an eight-bed expanded exam area, a new Alcohol Intervention Services Area, and a new Occupational Health Clinic. Vacated spaces will be modified into an expanded staff lounge, a third triage room, two registration/discharge rooms, and two quiet rooms.

Estimated Completion Date:
Phase 1: Complete
Phase 2: 3rd Quarter 2010
Phase 3A: 1st Quarter 2011
Phase 3B: 1st Quarter 2011
Ground Floor MRI Renovation

Description: The existing 1.5T MRI has been removed and the entire suite will be reconfigured to allow the installation of the new 3.0T MRI. Patient and worker zones are clarified and the circulation patterns for inpatients and outpatients are improved. An expanded entrance and connection to the hospital and DK Miller building are also included.

Estimated Completion Date: 2nd Quarter 2011

Status: Under construction
Surgical Department Renovations

Description: A 9,078 square-foot, multi-phased renovation of the existing Surgery Department includes two new operating rooms (Phase 1), and will include new men's and women’s locker rooms, a staff lounge and an Anesthesia work space.

Estimated Completion Date:
- Phase 1: Complete
- Phase 2: 4th Quarter 2010
- Phase 3: 3rd Quarter 2011
Acute Geriatric Renovations (6th & 8th Floors, Zone 2)

**Description:** The program is being relocated from the 10th floor, Zone 2 to accommodate the new transplantation center on the 10th floor. The patient wing will be renovated with a new nurse station, medication room, galley and charting area. Patient rooms will be updated and a patient lounge added.

**Estimated Completion Date:**
1st Quarter 2011

**Status:** In Progress
Chris VanVeghten is President of Headway of WNY

Chris VanVeghten, Rehabilitation Counselor on 8-North for 27 years, is the President of Headway of WNY. In 1985 Headway came about as a small group of survivors of brain injury and their families in WNY banded together to form a support and advocacy agency. With few local long-term services and facilities for people with severe brain injuries to turn to for information on assistance, therapy, and support, Headway was formed. Headway of WNY is a support and advocacy agency for survivors of brain injury and other disabilities and was created to provide more services at a local level to brain injured individuals aged 18 to 64.

Celebrating 25 years as a support and advocacy agency for survivors of brain injury and other disabilities, Headway runs various support groups for survivors and their caregivers, serves as a resource for phone inquiries, provides speakers to increase community awareness, gives educational presentations, and more. Headway has recently been reappointed by the NYS Department of Health to coordinate the Western New York region for two major Medicaid waiver programs: the Traumatic Brain Injury Medicaid Waiver; and the Nursing Home Transition and Diversion Medicaid Waiver. Both of these programs are designed to help participants live in their community, rather than in nursing homes.

Dr. Thomas Polisoto at Headway’s Annual Meeting

At Headway’s Annual Meeting this past October, Dr. Thomas Polisoto, M.D. was a featured speaker. Dr. Polisoto is a rehabilitation medicine physician, and assistant professor at the University at Buffalo School of Medicine. Dr. Polisoto has worked at ECMC, Mercy Hospital, and Children’s Hospital, among other facilities, and has spent a number of years working in the brain injury unit at ECMC. At Headway’s Annual Meeting, Dr. Polisoto spoke of “The Use of Medication in Brain Injury Recovery,” and discussed what results might be obtained from different types of medication, stating many of the medications used by physicians to treat brain injury were originally formulated to help with other types of diagnoses, such as depression, seizures, and attention deficit disorder. Dr. Polisoto also discussed how and why these other drugs have been found to help some survivors of brain injury, which medications might be appropriate under different circumstances, and what benefits and side effects are possible.

For more information about Headway of WNY, call 716-629-3633, or visit the website at www.headwayofwny.org.
Thomas Flanagan, LCSW, has joined Rob McCartney, Vice President of Behavioral Health. Tom will assist Rob in the day-to-day operations of the Behavioral Health programs.

Tom brings with him over 25 years of experience in management and clinical experience in the behavioral healthcare industry. He has significant expertise in behavioral health management and administration. His strengths include implementing change, improving quality and maximizing efficiency. Tom’s office is located in Room 1178. He can be reached at extension 5367.

Tom’s education includes a Bachelor’s and a Master’s of Social Work from the University of Kansas. Please join me in welcoming Tom Flanagan to the ECMC Behavioral Health team.

Richard C. Cleland, MPA, NHA, FACHE
Senior Vice President of Operations

Comforting Quilts

As an area leader in best practices for organ donation, ECMC is committed to setting the pace in establishing standards for the care of organ donors and their families. Our most recent initiative focuses on honoring donor families. In March 2010, we partnered with our colleagues from family support at Upstate New York Transplant Services (UNYTS) and began the Comforting Quilt Program.

With permission from a donor’s family, a quilt is placed on the loved one’s bed where it remains until the donor is transported out of the Intensive Care Unit (ICU) to the Operating Room (OR) for organ recovery. At that time, the family is presented with the quilt. It is meant to serve as a tangible remembrance of their loved one.

The time and talent to make the quilts has been provided by Susan Kiener, one of our Trauma Intensive Care Unit (TICU) nurses who is a donor wife, and her sister, Carole DeRade. Their generosity made it possible to start this program and their undying dedication makes it possible to continue. Members of the Grand Island Quilting Guild have also volunteered to assist us with this program during the upcoming year.

Involvement is completely voluntary. The ability of the program to function without funding from the hospital can be attributed to the benevolence of our ECMC staff and members of the community who have donated gift cards and made monetary contributions to the ECMC Lifeline Foundation Comforting Quilt Program.

Thank you to everyone who has helped to honor EMC’s donor families. For more information about this program, please contact the ECMC Lifeline Foundation at 716-898-5800.
Scott Comstock – December

Scott Comstock, Registered Nurse (RN) is a Charge Nurse in Behavioral Health on the 4th Floor, Zone 1. Scott is dependable and works well with the patients and staff. He is a good facilitator with pertinent information. Scott has made several suggestions to improve the unit’s operation. He is definitely a team player and goes the extra mile when required. Thanks to Scott Comstock for his good work!

Maureen Schneider – November

Maureen Schneider, Licensed Practical Nurse (LPN), has been with ECMC for about 20 years. Maureen is a hard worker and very caring with her patients. She is the preferred nurse for the outpatient clinic. If her patients have any questions or concerns about their care, they can call Maureen and she is more than happy to talk to them. If she is too busy, she will take a message and call the patient back. She will even call patients to remind them of how important it is to keep their scheduled appointments. She is always available to help assist the clinic physician with dressings for the patients or with questions about patient medications. She also does patient discharges and orders medical supplies for the clinic. Maureen is always willing to lend a hand wherever needed. It is a pleasure to work with Maureen Schneider. Thank you, Maureen, for your follow-through and dedication!

Tammy Wulf – November

Tammy Wulf, Principal Clerk for the Department of Laboratory Medicine, is a self-starter who has made the Lab Billing and Registration area more efficient. She is innovative and finds novel solutions to problems as they arise and thinks outside the box to find the solutions. Tammy readily accepts any task delegated to her. She is a smart and hard working, conscientious employee who works well with others and uses her time wisely. ECMC is very fortunate to have an employee like Tammy Wulf. Congratulations Tammy!

Courtney Parazymieso – October

Courtney Parazymieso, RN, sets a high standard of care for her patients at ECMC. She works enthusiastically among surgical residents and nurses. She is an advocate for each of her patients, keeping their best interests in mind. Courtney is an invaluable resource to all who come in contact with her. Her positive attitude makes her an asset to the Trauma Intensive Care Unit (TICU) team. Thanks, Courtney, for your good work and your proper focus on our patients.
Nancy Polanski – December

After retiring from the ECMC Lab, Nancy Polanski joined the ranks of Volunteering in the fall of 2009. She gives of her time by assisting the blood drives as well as running the Operation Christmas Child Shoebox program. Every November, Nancy gives a week of her time to buy, fill, wrap, and to transport donations of shoeboxes filled with toys and gifts for underprivileged children in Third World countries. Before she retired she would always use her own vacation time to do the job. The Volunteers are happy to have her as a member and thought it fitting for her to be honored in December. Congratulations, Nancy, for all your great work!

Mickey Cappella – November

Mickey Cappella currently serves as Vice President of the Volunteer Board. She has served on the Board since 1986. She has been involved in many ways including buying for the Gift Shop, Gift Shop Coordinator, Treasurer, Gift Shop Assistant, Publicity Chairperson, Ways and Means Chairperson, Workshops, Nominating Committee, Trauma Room Attendant, the Skilled Nursing Facility and even helping to redecorate the lobby. Some of Mickey’s current duties include planning speakers and activities for Volunteer Board general meetings. She also coordinates an annual social outing for those who put in a required amount of hours within a calendar year. Thanks, Mickey, for all you have done and are doing to keep our Board running smoothly!

Important Days to Know

December

<table>
<thead>
<tr>
<th>Date</th>
<th>Recognition Days/Events</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-7</td>
<td>Urology Nurses and Associates Week</td>
</tr>
<tr>
<td>7-13</td>
<td>Allied Health Professionals Week (National)</td>
</tr>
<tr>
<td>7-13</td>
<td>Aspiring Nurse Leader Week</td>
</tr>
<tr>
<td>7-13</td>
<td>Health Information and Technology Week</td>
</tr>
<tr>
<td>7-13</td>
<td>Mental Health Wellness Week</td>
</tr>
<tr>
<td>7-13</td>
<td>Patient Transport Week (National)</td>
</tr>
<tr>
<td>7-13</td>
<td>Radiological Technology Week (National)</td>
</tr>
<tr>
<td>14-21</td>
<td>Perioperative Nurse Week</td>
</tr>
<tr>
<td>18</td>
<td>Great American Smokeout</td>
</tr>
<tr>
<td>20</td>
<td>Family Volunteer Day</td>
</tr>
</tbody>
</table>

November

<table>
<thead>
<tr>
<th>Date</th>
<th>Recognition Days/Events</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-30</td>
<td>Diabetes Month (American)</td>
</tr>
<tr>
<td>1-30</td>
<td>Family Caregivers Month (National)</td>
</tr>
<tr>
<td>1-30</td>
<td>Sexual Health Month (National)</td>
</tr>
<tr>
<td>10/31–11/6</td>
<td>Medical Staff Services Awareness Week (National)</td>
</tr>
<tr>
<td>1-7</td>
<td>Diabetes Education Week (National)</td>
</tr>
<tr>
<td>1-7</td>
<td>Medical-Surgical Nurses Week</td>
</tr>
<tr>
<td>1-7</td>
<td>Urology Nurses and Associates Week</td>
</tr>
<tr>
<td>7-13</td>
<td>Allied Health Professionals Week (National)</td>
</tr>
<tr>
<td>7-13</td>
<td>Aspiring Nurse Leader Week</td>
</tr>
<tr>
<td>7-13</td>
<td>Health Information and Technology Week</td>
</tr>
<tr>
<td>7-13</td>
<td>Mental Health Wellness Week</td>
</tr>
<tr>
<td>7-13</td>
<td>Patient Transport Week (National)</td>
</tr>
<tr>
<td>7-13</td>
<td>Radiological Technology Week (National)</td>
</tr>
<tr>
<td>8-14</td>
<td>Perioperative Nurse Week</td>
</tr>
<tr>
<td>14-21</td>
<td>Bladder Health Week</td>
</tr>
<tr>
<td>18</td>
<td>Great American Smokeout</td>
</tr>
<tr>
<td>20</td>
<td>Family Volunteer Day</td>
</tr>
</tbody>
</table>
ECMC nurse Nancy Benz is back at work after the fight of her life.

by Brianna K. Baugh

Nancy Benz, a Senior Licensed Practical Nurse (Sr. LPN) at ECMC, (formerly on ECMC’s Inpatient Rehab Unit and now an IV nurse) experienced a life-changing event that caused her to set a mission for life to “pay it forward” to anyone in need, as so many did for her this past year. The expression “pay it forward” refers to the concept of doing a good deed for someone else in need to repay the good deed done by another for you.

On October 11th, 2009, Nancy Benz was alone in her home when she collapsed to the floor and was paralyzed from the chest down. With no one around to help, Nancy dragged herself to a phone and called her sister. “Here I’m a nurse and instead of calling 911, I called my sister,” Nancy laughs. Waiting for about 30 minutes, Nancy recalled “it was a really long half hour sitting there pinching myself and not feeling anything.” In the hospital for nine weeks, Nancy was informed she had transverse myelitis.

Transverse myelitis is a disorder caused by inflammation across both sides of one level or segment of the spinal cord. Transverse myelitis may be acute, developing over hours to several days, or subacute, developing over one to two weeks. Symptoms usually include lower back pain, sudden abnormal sensations such as burning, tickling, pricking, or tingling in the legs, sensory loss, and partial paralysis of the legs. Anyone can get transverse myelitis—adults, children of both genders, and all ethnicities and races. Researchers are not sure what causes transverse myelitis but it often develops after viral infections. No effective cure currently exists for people with transverse myelitis, but therapy generally begins when the patient first experiences symptoms.

Nancy stayed at Buffalo General Hospital for the beginning of her care and recovery. The decision to go to Buffalo General came about because her prognosis leaned more towards transverse myelitis and possibly multiple sclerosis (if Nancy
has any more symptoms) and Buffalo General is one of the best in the nation for hospital treatment of MS.

MS is an autoimmune disease wherein the body attacks the central nervous system, which is made up of the brain and spinal cord. The cause of MS is unknown but is at least two to three times more common among women than men. While most are diagnosed between the ages of 20 and 50 years old, MS can appear in young children and teens as well as much older adults. MS occurs in most ethnic groups but is more common in Caucasians of northern European decent. Symptoms of MS include fatigue, numbness, coordination problems, visual problems, depression, vertigo and much more. There is no cure for MS but rehabilitation is an important component for better health for someone with MS.

From this life changing experience, Nancy has learned a lot and achieved what many might consider the impossible. Starting rehab, it was not certain that Nancy would ever walk again. “It has made me a better nurse,” said Nancy. Being on the same level as a patient, Nancy realized what a patient goes through every day. “Even as a patient, I had deep-seated feelings that I would never show,” she says. Never having been in the hospital before as a patient, Nancy said “it was very humbling.” To be the one lying in that bed or sitting in that chair, knowing you are not the only one the nurse has to take care of enabled Nancy to see things from a different perspective. As a patient, Nancy would make rounds every night at seven o’clock to see what patients around her needed. “Some just want a cup of water or a blanket, and others are just lonely. Going from being a nurse to a patient is quite a different experience. In nursing school, they should put the students into a wheel chair and have them rely on one nurse,” says Nancy. “Being a patient makes you appreciate nurses and patients.”

Nancy had just bought a new car and had begun putting her son through his first year of college when she had to be hospitalized for her illness. She was unable to work to support the needs of her family. Nancy comes from a very small family but her big family from ECMC really came out to support and help her get through this difficult time in her life. Karen Gowen, an occupational therapist at ECMC, called Nancy in the hospital and informed her that she was throwing a benefit to raise money to help Nancy pay her expenses while she was out of work in recovery. Out of nowhere, a person Nancy only knew through her work environment wanted to throw her a benefit. “She’s my angel,” Nancy says of Karen Gowen, whose concern was that all Nancy should worry about was focusing on getting better. With 238 baskets donated to the benefit, just about every ECMC department donated a basket. Nancy said she could not believe it when she showed up at the benefit. About 97 percent of the people there were ECMC employees, the people she worked with. “All these faces I knew,” Nancy said, “and for them to care like that!” The money from the benefit helped Nancy with all of her expenses until she came back to work in September 2010.

“When you’re down and out, there are people here for you. After a couple months of being back to work, I still can’t take the smile off my face. I would like to thank each and every one at ECMC for the love, the caring and the support during my difficult journey. Thanks to all of you, I felt like I had angels all around me.” -- Nancy Benz, Sr. LPN
Published by the ECMC Corporation Public Relations/Communications Department, Med-Center Pulse is now published every other month (bimonthly as a two-month issue) available at the end of the second month of each bimonthly issue. Therefore, the article/photo submission schedule is revised accordingly. All submissions must be received by the end of the first month of the issue as follows:

<table>
<thead>
<tr>
<th>ISSUES</th>
<th>SUBMISSION DUE DATES</th>
</tr>
</thead>
<tbody>
<tr>
<td>January-February</td>
<td>End of January</td>
</tr>
<tr>
<td>March-April</td>
<td>End of March</td>
</tr>
<tr>
<td>May-June</td>
<td>End of May</td>
</tr>
<tr>
<td>July-August</td>
<td>End of July</td>
</tr>
<tr>
<td>September-October</td>
<td>End of September</td>
</tr>
<tr>
<td>November-December</td>
<td>Mid-November</td>
</tr>
</tbody>
</table>

ALL SUBMISSIONS ARE REQUIRED IN ELECTRONIC FORM (either as text in e-mail or as Microsoft Word files/attachments). Photographs must be forwarded as digital files/scans and attached to e-mail or submitted on CD, DVD, or USB devices.

Keep updated each issue with news and information on ECMC expansion and growth in our new feature section....

Progress and Plans for a World-Class, Integrated Health System!

Visit us online to view our new Health Campus Expansion video! www.ecmc.edu