



STAY healthy

SUMMER 2015

Sunny days are here again

Tips to help you enjoy a healthier and safer summer

Small town care

Rural patients enjoy advantages of UHS system

The Ideal Family

UHS Senior Living at Ideal marks its 25th anniversary



On the upswing

A place for patients not quite ready to leave the hospital

Any one of the 15 patient beds at UHS Delaware Valley Hospital can be filled by patients who have been discharged from the hospital but still need a level of care that can't be provided at home. Inpatient physical rehabilitation services at UHS



UHS Delaware Valley recently remodeled six private patient rooms featuring private baths and more room for visitors.

Delaware Valley, also referred to as "swing bed," provides patients with physical therapy, occupational therapy, intravenous drug therapy, wound care and/or skilled nursing while they continue to recover.

"Swing bed is short-term physical rehab for someone who had an illness, surgery or injury and is getting better but is not yet ready to go home," explains Lorraine Carrillo, Social Services

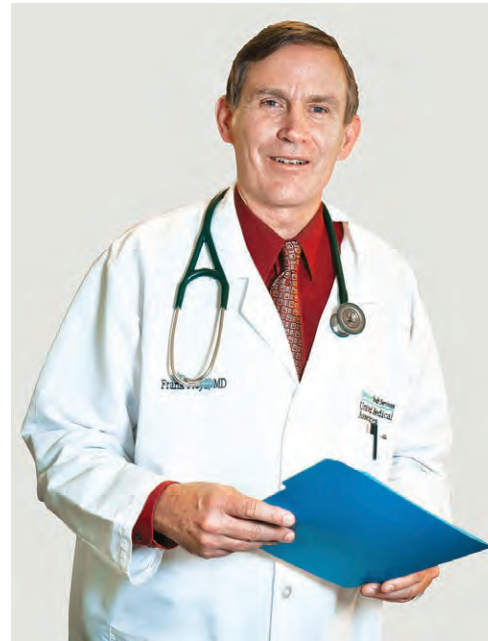
program manager at the Walton hospital. "It's a transition to get them ready to go back home.

Patients come to inpatient physical rehabilitation after discharge from hospitals throughout the region. They choose UHS Delaware Valley to be closer to home and stay for a few days to a few weeks. In addition to prescribed treatment and therapies, patients can participate in daily activities and benefit from nutrition counseling and discharge planning.

"Each patient is looked at individually and has their own plan of care. The goal is to get them to be as independent as possible and get them to their previous level of functioning," says Ms. Carrillo. "When they are ready to go home, we help them set up what they need for that next step, whether it's equipment or home care services."

Featured speakers

UHS experts present at White House-sponsored falls prevention symposium



Dr. Floyd spoke at the Falls Prevention Summit.

Frank Floyd, MD, Amy Roma, RN, and Bridget Talbut, RN, of UHS Primary Care Endwell, were featured speakers April 30 at the Falls Prevention Summit, a gathering in Arlington, Va., affiliated with the 2015 White House Conference on Aging and the National Council on Aging.

The team at UHS Primary Care Endwell piloted a national effort to prevent falls among the elderly beginning in 2012. UHS, the Broome County Health Department and the Broome County Office for Aging were recipients of a CDC-funded grant to use evidence-based fall intervention programs to reduce the rate of falls in older adults.

One of the programs is Stopping Elderly Accidents, Deaths and Injuries, also known as STEADI, which encourages primary care providers to conduct regular screenings with patients age 65 and older to determine their risk of falling. The team at Endwell used preliminary guidelines from the CDC to develop and implement an effective assessment test and data filing system for eligible patients. UHS became the alpha test site because of its fully established electronic medical record system, which facilitated data collection and reporting to the state Health Department and the CDC.

>> **ONLINE** Read more about STEADI at uhsstayhealthymag.com.

HEARTSafe

UHS mobilizes in-house team if someone has heart attack

UHS Wilson Medical Center has been recognized for its efforts to respond quickly to any heart attack that may occur in its facilities. Staff are specially trained and equipped to respond with a portable defibrillator, cardiopulmonary resuscitation and other approaches to save someone in cardiac arrest.

As a result, UHS has received two-year accreditation as a HEARTSafe workplace as part of a nationwide

initiative to help more people survive sudden cardiac arrest. The accreditation is based on several factors, including the number of staff trained in using an automated external defibrillator (AED) and the number trained in advanced cardiovascular life support, pediatric advanced life support and CPR.

In addition, accredited hospitals have well-tested emergency response plans in the event a patient, visitor or

employee has a heart attack, and they offer prevention and education programs to staff and the public.

Brandon Azoulai, systems analyst in Nursing Administration, is also an emergency medical technician on Harpur's Ferry, the student ambulance at Binghamton University, and helped launch the HEARTSafe



program on that campus. He has been instrumental in helping UHS gain accreditation for its program.

"When a cardiac arrest happens, it's a matter of every second counting," Mr. Azoulai says. "When there are more bystanders who know CPR, the safer our community becomes."



Be a locavore

6 reasons to eat locally this summer

“There is nothing like eating something fresh from the earth, whether you buy it at a local farmer’s market or grow it yourself,” says Cathy McLachlan, dietician at UHS Delaware Valley Hospital. “Local food is more delicious, healthier and more sustainable over the long term.”

With summer here, local food is bountiful. Mrs. McLachlan explains that there are many benefits to eating locally:

1. It makes a smaller environmental footprint.
2. It supports local farmers.
3. The nutrients in local food are better preserved because it takes less time to get the produce from the field to the consumer.
4. Unique varieties of foods are available, encouraging people to try new things.
5. Produce that is sold locally is picked at the peak of its freshness for the best taste.
6. It helps steer people’s diet toward whole foods and away from processed foods.

>> **FIND A FARMER'S MARKET** See the Cornell University Cooperative Extension website at cce.cornell.edu for information on farmer’s markets throughout the region, including convenient locations at UHS hospitals.

Delaware Bounty

Delaware Bounty is a new local retail food store offering meat, eggs, cheese, honey and seasonal produce produced in Delaware County. Delaware Bounty is located at 5½ Main Street in Delhi and is open Tuesday through Friday, 11 a.m.– 5:30 p.m. and Saturday, 10 a.m.–2 p.m. Weekly online ordering from delawarebounty.com with Friday afternoon pickup is also available.

Staying the course for quality care

A few weeks ago I delivered my yearly progress report to the combined Boards of Directors of UHS at our 2015 annual meeting. In my remarks, I outlined the many challenges facing not-for-profit hospitals and healthcare organizations today.

We are all grappling with the accelerating pace of change, a slow-growing local economy and the unpredictable consequences of the Affordable Care Act. Hospitals are facing chronically declining payments as they migrate to a new reimbursement system based on the value vs. volume. Moreover, our region’s population is aging and technology is creating ever-greater pressure on providers to offer the latest and greatest — and sometimes the costliest — treatments.

But also in my remarks, I noted that truly great healthcare organizations rise to challenges like these and continue to furnish the best possible care. I emphasized that outstanding organizations forecast storms before they hit, even if they might be described as “perfect storms.” They move forward. They do not waiver in their mission, and always stay the course in pursuit of their goals.

Along the way, I outlined the many positive actions UHS has taken over the past year or so to enhance our care, service and quality at every level. By way of just a few examples: We have combined all of our cardiac services under the umbrella of the UHS Heart Institute, unveiled plans for a UHS Comprehensive Orthopedic Center, continued to invest in recruiting top physicians and expanded our capabilities in primary care, cancer care and cardiology.

We introduced private rooms at UHS Delaware Valley and, at UHS Chenango Memorial, a new ablation procedure for back pain. UHS Home Care marked its first anniversary at its centrally located headquarters in Johnson City, and UHS Senior Living at Ideal made plans to celebrate a quarter-century of caring for the elderly.

As I reflect on all that UHS has accomplished in the past few years and months, I am most proud of our people, the men and women of healthcare, who give of themselves every day to create a meaningfully better experience for you. The cards and letters of thanks they often receive from patients remind us just how serious and important our mission is, and how it motivates us, in these challenging times, to accomplish more and to live our brand promise: “We listen. We show respect. We give hope.”

Matthew J. Salanger
PRESIDENT & CEO OF UHS



>> TIPS TO HELP YOU ENJOY A HEALTHIER AND SAFER SUMMER

sunny days

are
here
again!

MOTHER NATURE smacked New York's Southern Tier with a mighty wallop last winter, but now it's time to get up, get out, and enjoy the warm summer days. Backyard barbecues, bike rides and lazy afternoons at the pool are calling!

What you don't want is to spend even one glorious afternoon in the emergency department (ED) due to injury or illness. Yet hazards loom when outdoor temperatures soar. According to the Centers for Disease Control and Prevention, 27 percent of all ED visits occur during summer – edging out the other three seasons.

To ensure a healthier, safer summer, here are several common warm-weather hazards and tips to help avoid them.



>> **SUMMER GOT YOU DOWN?** UHS has Walk-in Centers in Vestal, Endicott and Chenango Bridge, where a provider can see you for minor injuries or illnesses without an appointment. Visit [uhs.net](https://www.uhs.net) to get addresses, directions and waiting times at each location.



TAKE THE PLUNGE

For kids, cannonball contests, swimming laps, tag and water slides are synonyms for a great day in the pool — especially when temperatures soar. However, ignoring water safety rules introduces risk for serious accidents, including drowning or near-drowning.

Before letting a youngster take the plunge, note the numbers painted around the pool. These water depth markers tell you if the water is too shallow for diving off the side.

As for those brightly-colored water toys that kids love, Robert Auerbach, MD, of UHS Pediatrics at Vestal and Binghamton, offers a potentially life-saving message: “These toys help a child float and may help relieve water fears. However, these toys cannot save a life. They can drift away or unexpectedly deflate, and must never replace proper adult supervision. Instead, the rule is to never let a child swim without an adult present — or for adolescents, a swim buddy.”

Once in the water and fun has begun, the American Red Cross recommends that parents watch out for the “terrible too’s” — too tired, too cold, too far from safety, too much sun and too much strenuous activity. All these scenarios increase risk for accidents and call for an immediate rest on dry land.

Drowning is the leading cause of injury-related death among children between 1 and 4 years old. It's the third-leading cause of injury-related death among children 19 and under.

SLOW AND EASY WINS THE RACE

Come summer, one characteristic that bridges the generation gap, from Millennials to Baby Boomers, is the urge to race outdoors and jump back into fresh air activities — be it biking, hiking, swimming, tennis, jogging, team sports or whatever gets your heart pumping. However, if you've been hibernating all winter, take it slow and easy. “When you're out of shape, you're more prone to pulled muscles, sprains, strains, broken bones and tumbles — with the latter due to lost core strength,” says Micah Lissy, MD, a sports medicine specialist at UHS Orthopedics.

You want to gradually improve your range of motion, strength and endurance. The 10-percent rule is generally the way to go: increase your training program, pace or mileage no more than 10 percent per week. And if a medical condition kept you indoors all winter, consult your doctor or physical therapist before hitting the tennis courts or bike paths.

Dr. Lissy also stresses the importance of a dynamic warm-up, which after a long winter's nap, is more important than ever. A proper warm-up prepares your body for exercise by gradually increasing your heart rate and loosening your muscles and joints. You also want to add balance and agility exercises to your routine to regain core strength, stability and coordination.

Finally, remember to check protective sports gear for wear and tear — especially your bike helmet. The Bicycle Helmet Safety Institute recommends replacing your helmet every five years. Pollution, UV light and weather can weaken a helmet over time.



In New York City, 97 percent of all bicyclists who suffer fatal accidents are not wearing a helmet.

FOOD, GLORIOUS FOOD

Summer abounds with opportunities for dining al fresco, backyard barbecues and cookouts around the campfire. But it's no picnic when these happy occasions result in food-related illnesses, which can trigger diarrhea, vomiting and dehydration. Unfortunately, food-borne illness escalates during hot, humid summer months. This happens for two reasons:

1. Bacteria, present in soil, air and water, as well as humans and animals, grow faster when temperatures hit 90° to 110°F and the humidity soars.
2. Safety controls in the kitchen, such as thermostat-controlled cooking, refrigeration and washing facilities, aren't part of outdoor dining adventures.

To help safeguard your outdoor banquets, step one is to keep cold foods cold in an ice-filled, well-insulated cooler. Full coolers stay cold longer, so replenish ice as it melts, and keep the cooler lid closed. If the afternoon gets away from you, pitch perishable foods left in the hot summer sun for more than two hours or for one hour if the temperature exceeds 90 degrees. Raw meats should never be left under the hot sun.

It's also important to remember that outdoor cooking increases risk for cross-contamination between foods because there are few, if any, resources to wash utensils, dishes and work surfaces with hot, soapy water as you prep food. This is particularly pertinent for meats, says Desirée Outlaw, a family nurse practitioner at UHS Delaware Valley Hospital. “When you transfer raw meat from its container and onto the grill, never put the cooked meat back into its original container. The raw juices in the container contaminate your meat. So you'll want plenty of extra, clean serving platters on hand.”



Cold food should be stored at 40°F or lower to prevent bacterial growth.

TOO HOT TO HANDLE

Dehydration is a chronic issue for the elderly — particularly as temps soar and sweat glands work overtime.

Mild dehydration can cause:

- Dryness of mouth
- Deep yellow or strong-smelling urine
- Cramping in limbs
- Headaches
- Sluggishness or sleepiness

Serious dehydration can cause:

- Low blood pressure
- Convulsions
- Severe cramping and muscle contractions
- Rapid, weak pulse
- Heat exhaustion or heat stroke

“At about 50, the body's ability to recognize thirst decreases and our kidneys lose some of their ability to regulate the body's water supply. After 60, the proportion of body fluid to body weight naturally drops,” says Valentina Davydov, DO, a family medicine physician at UHS Delaware Valley Hospital. In addition, Dr. Davydov adds, some medications that elderly persons commonly take can increase risk for dehydration, such as diuretics for high blood pressure, antihistamines and certain psychiatric drugs. Some diseases, such as diabetes, can also increase risk for dehydration.

To stay hydrated under normal circumstances, begin with this formula: Take one-half of your body weight in pounds and drink the equivalent number of ounces of water daily. So a 150-pound woman needs 75 ounces of water daily, or at least nine 8-ounce glasses of water. On a hot day, even more water is called for.

Water is the preferred hydrator, and you want to avoid alcohol or caffeinated beverages, both of which act as a diuretic and cause the kidneys to flush out more water. If you suspect mild-to-moderate dehydration, a sports drink will help replenish water and electrolytes. Severe dehydration, however, requires immediate medical attention.

Finally, here's a free at-home test to tell if you're properly hydrated. Just look at your urine. It should be clear or a pale yellow.



40 percent of heat-related fatalities in the U.S. are among those over 65.

WEB EXCLUSIVE! Get more summer safety tips on avoiding bug-borne infections and sunburns at uhsstayhealthymag.com



John Giannone, MD, sees patients of all ages as a family practice physician in rural Deposit.

BIG-CITY CARE,

>>RURAL PATIENTS ENJOY ADVANTAGES OF UHS SYSTEM

small-town doctors

“Patients come to us for everything.”
—John Giannone, MD, FAAFP

Over the course of 30 years practicing medicine in a primary care office, John Giannone, MD, FAAFP, has seen and treated just about everything. As a family practitioner, Dr. Giannone sees patients from newborns to elders. And even though he is chief medical officer at UHS Delaware Valley Hospital and associate medical director of UHS Medical Group, he also sees patients at a clinic in rural Deposit — and his office is the first stop for area residents for any sort of ailment or emergency, from a sore throat to an infected splinter to a coronary event.

Residents of the rural areas of the Southern Tier can truly claim their UHS clinics and physician offices are providing “primary” care. “Patients come to us for everything,” confirms Dr. Giannone, who says that the care providers in his office and the offices around the system must have broad medical knowledge along with some specific, more specialized skill sets. “For instance, Dr. Luis Rodriguez-Betancourt in Walton can set a broken arm right in the office,” says Dr. Giannone.

In the Deposit office, Dr. Giannone is aided by one other physician, a nurse practitioner and a physician assistant, and they, in turn, are ably supported by an administrative staff. As part of UHS Medical Group, the small office and others like it effectively have the resources of a much larger hospital system at their fingertips. And because all patient records are now kept in the UHS electronic medical record (EMR) system, communication among practitioners about patient care is more accurate and more efficient than ever.

A BIG GROUP IN SMALL TOWNS

“We operate as one large medical group,” says Dr. Giannone. He details how primary care physicians in the rural offices can confer with one another on the phone and conference in specialists when they are needed — all while looking at the same patient record.



Help at home, wherever that is

UHS Home Care is available to bring needed services to rural residents right in their homes. Whether the need is for short-term care, long-term care, skilled nursing, pharmacy or therapeutic services, or durable medical equipment, UHS Home Care can assist residents with a wide variety of needs.

According to Greg Rittenhouse, vice president and chief operating officer for UHS Home Care, one call to UHS Home Care opens the door to this array of services, no matter how far the resident might be from one of the UHS hospitals.

UHS Home Care has offices in Johnson City, Norwich and Ithaca that serve residents in Broome, Chenango, Delaware and Tioga counties. For more information, call **763-5600** or visit **uhs.net**.

If someone needs the services of a specialist, doctors have two options. “If I am seeing someone with a routine problem for, let’s say, an endocrinologist, I can get that scheduled within a few days,” says Dr. Giannone. “But if the problem is emergent — like someone with elevated blood glucose — I can call the endocrinologist to see the patient on the same or next day, or he or she can advise me about what needs to happen.”

Of course, the system also works in reverse: Patients who are seen at the UHS hospitals or by specialists can have their electronic medical records updated so that when they return to their primary care provider, all treatments and orders are accurate and up-to-date. This works well when, for instance, a patient has had lab work or other diagnostics done at one of the hospitals.

“The lab results are integrated with the EMR,” says Dr. Giannone. “And the PACS system is an X-ray software that transmits digital X-rays from our office to UHS hospitals where radiologists can read them.” Then the primary care physician can receive a digital copy of the radiologist’s notes while the patient is in the room. “A patient used to have to go to one of the larger hospitals to get an X-ray,” he continues. “But now many of our clinics have this capability to send a digital X-ray to radiologists in Binghamton or Johnson City.”

Welcome to our newest rural providers

The following primary care providers have joined UHS within the last 12 months.

UHS Primary Care Walton

865-2400

- Vadim Davydov, DO: family medicine and addiction treatment
- Valentina Davydov, DO: family medicine
- Desirée Outlaw, FNP: family medicine
- Stefanie Berg, RPA-C: family medicine, allergies, sports medicine and wound care
- Luis Rodriguez-Betancourt, MD: family medicine, sports medicine and wound care
- Cindy Cantwell, FNP: family medicine and women’s health

UHS Primary Care Roscoe

498-4800

- Linda Jordan, MD: internal medicine

UHS Primary Care Norwich

337-4040

- James Wood, MD: internal medicine

UHS Pediatrics Norwich

337-4139

- Judith Glover, MS, RN, FNP-C: pediatrics

MEMBERSHIP HAS ITS BENEFITS

Area residents can also expect the other perks of UHS membership where their office visits are concerned. Dr. Giannone maintains that he and the other providers in the rural areas take pride in delivering on the UHS promise regarding same-day visits. “We have about 20 visits a day that are same-day call-ins,” he says. “If I see a patient for pre-operative exam clearance who then needs clearance from a cardiologist, we can get that scheduled within the next day or two. The patient doesn’t have to wait another week to get taken care of.”

The integration of comprehensive services works well for patients and for the doctors’ offices. For example, the Nurse Direct call system will contact many patients discharged from the hospital within two days, to check on their condition and schedule a follow-up appointment with the primary care physician within seven to 14 days.

“We have a very good provider group that provides excellent care in all of our clinics,” says Dr. Giannone. “It’s not like the old days of Doc Jones with his bag, who would treat the horses and cows and the people, too. Now I have virtually instant communication, so if you do have a broken arm, I can make arrangements for you, and we know that you’re not going to have a wasted trip to Binghamton.” **SH**

“We have a very good provider group that provides excellent care in all of our clinics.”

—John Giannone, MD, FAAFP

>> NEED A NEW PROVIDER?

UHS has primary care offices all over the Southern Tier, so you can find a provider near you no matter where you live. Use the Find a Provider feature at **uhs.net** or call Nurse Direct at **763-5555**.



Marcia Eckerson, left, a resident's daughter, has high praise for Ideal nurse Shannon Michaletz and her colleagues.

THE IDEAL family

>> UHS SENIOR LIVING AT IDEAL
MARKS ITS 25TH ANNIVERSARY

When she talks about UHS Senior Living at Ideal, administrator Michele Gordon is justifiably proud. She glowingly describes the often-honored physical campus, which includes facilities dedicated to full nursing care, assisted living and independent-living apartments. And she lists Ideal's many distinguished national awards for excellence. But what really puts a gleam in her eye are the people of the "Ideal family": the 250 residents and their loved ones, plus the staff members who are so dedicated to making each resident feel at home.

As she and others at Ideal plan to celebrate the geriatric campus's 25th anniversary this summer, Ms. Gordon reflects on the many qualities that make the facility special. "One of the reasons I love what I do is because our residents have so much life experience," she notes. "They teach me something new about the past every day."

Regarding the staff, she is quick to recognize these highly qualified professionals for their far-reaching compassion. "When a resident joins our community, we're dedicated to their comfort, health and well-being," she says. "But we also realize that the move

to Ideal can affect family members. So we feel it's important to extend compassionate, personalized care to our residents' loved ones as well."

The Ideal Way of Life

UHS Senior Living at Ideal offers a level of care to meet everyone's personal and medical needs, including full nursing care, assisted living and private apartments. To most effectively and affordably suit individual needs, the Ideal staff can also help residents put together a combination of accommodations and services.

"Many residents initially live in an Ideal independent-living apartment because they see their future with us as needs change," explains Michele Gordon, UHS Senior Living at Ideal nursing home administrator. "They like the fact that we offer multiple levels of care, which means they can transition fluidly and stay within their own neighborhood."

WEB EXCLUSIVE!

Read the letter from the Chmielewski daughters at uhsstayhealthymag.com.

FAMILY MATTERS

The nurturing, family environment that Ideal fosters is difficult to put into words because the commitment comes from the heart rather than a rulebook. However, one family eloquently captured the spirit as they recalled their mother's Ideal experience.

Irene Chmielewski was 93 when she was admitted to the Rehabilitation Unit at UHS Senior Living at Ideal. She later transitioned to Ideal's Nursing Center, where she lived until her passing at age 94. With heartfelt gratitude, Ms. Chmielewski's five daughters penned a letter of thanks to Ideal, recognizing more than 20 staff members by name and recalling how "everyone treated Mom and all of us with such respect, patience and courtesy. They answered all our questions and reassured us at every turn. How grateful we are to them all."

The letter described Ms. Chmielewski's compassionate care, which went far beyond medical needs and routine assistance, and how much she treasured warm, impromptu visits and gentle hugs from caring nurses — which made Ms. Chmielewski feel loved by her Ideal family. "After all that medicine can do, what really matters

most is that beautiful touch of one heart to another," the daughters wrote. "That's the face of Ideal."

CELEBRATING TOGETHER

This family spirit will drive Ideal's 25th anniversary campus party on August 2, which will welcome Ideal residents, their loved ones and the entire Endicott and Southern Tier community. The event will bring everyone together under shade-providing tents for a festive lunch and live music, from strolling musicians to a local jazz band. There will also be a special celebration honoring Ideal's centenarians.

"That's a phenomenal milestone — reaching age 100," Ms. Gordon stresses. "We have several centenarian residents, as well as so many healthy, active residents in their 80s and 90s. That says something about the care we provide. Our residents thrive here at Ideal." **SH**

>> **LEARN MORE.** Find out more about Ideal, including viewing photos of the facility, at uhs.net. To get more information, call the front desk at **786-7300**.