In 1912, a three-story house on the corner of Washington and Lincoln streets in Winchester was adapted by the Visiting Nurse Association to use as a hospital.
On March 11, 2012, Winchester Hospital turns 100. This anniversary marks not only 100 years of medical care given to the community but also 100 years of community support and involvement – a tradition we honor in this annual report.
It was nearly 100 years ago that the roots of Winchester Hospital began to grow. It started when a group of dedicated women saw the need to make health care universally available to the Winchester community and beyond.

It was the nurses of the Visiting Nurse Association, or “the angels of the town” as they were affectionately known, who traveled by foot to care for the sick regardless of their class or ability to pay. This dedication to community health care and sense of unyielding compassion led to the building of a hospital which opened its doors on March 11, 1912.

This is a time to pause, reflect and celebrate this incredible story, a 100-year exchange of service to and from our community.

Throughout our 100-year history, Winchester Hospital has been supported by so many in countless ways. Community organizations and individuals supported the hospital with pennies and with millions of dollars, with a basket of peaches and with expensive and sophisticated equipment, with thousands of hours of volunteer service, and with an endless variety of entertainments and activities to help the hospital meet its goal of providing the best quality health care. This tremendous support continues.

We celebrate the founders, nurses, medical staff, administrators and all employees who helped the hospital survive and expand. We commemorate a century of Winchester Hospital’s being at the forefront of medical service, its commitment to safe and quality care, and its responsiveness to changing community needs, medical trends, and technological advances.

This year’s annual report recognizes 100 years of excellence and spotlights some of the great work being done currently throughout the organization across our five success factors: Quality and Safety, Employee Engagement, Physician Alignment, Patient Experience and Growth and Finance.

As Winchester Hospital begins its next century and continues to expand its facilities and advance its services, it will continue to build upon the principles with which it began and strive to provide the best care possible for the next 100 years and beyond.
For nearly 100 years, Winchester Hospital has been providing award-winning care. This year was no exception. We are honored to be consistently recognized at the national level for our high-quality care and nursing excellence, and as a top employer.

ACCOLADES

Winchester Hospital was recognized as one of the top acute care hospitals in the nation by Thomson Reuters when it received a 100 Top Hospitals award for providing safe, effective and patient-centered care.

Magnet® recognition is an honor bestowed on fewer than 7 percent of the nation’s hospitals. Of approximately 390 hospitals in the United States and abroad which have earned this recognition, only eight are in Massachusetts.

For the fourth year in a row, Winchester Hospital achieved the HealthGrades Outstanding Patient Experience Award™ from HealthGrades®, the leading independent health care ratings organization which recognizes hospitals performing in the top 16 percent nationally.

Winchester Hospital achieved the 2011 Patient Safety Excellence Award™ from HealthGrades®, the leading independent health care ratings organization which recognizes hospitals performing in the top 5 percent nationally.

Winchester Hospital continues to earn recognition as a best place to work based on employee feedback from the Boston Business Journal and the Boston Globe.

Winchester Hospital received accreditation from The Joint Commission and was awarded a Gold Seal of Approval.

Kevin F. Smith
President and Chief Executive Officer, Winchester Hospital
QUALITY AND SAFETY

A core focus for the past several years has been to reduce the incidence of selected preventable harm for our patients as measured by inpatient falls with serious injury, ventilator-associated pneumonia, serious medication errors, central line-associated bloodstream infections and surgical site infections. We are pleased to report that we have continued our successful journey and limited this number to seven for the past year.

While we continue to work hard to provide the safest environment for all of our patients, national rating organizations are taking note of our efforts and success.

In 2011, Winchester Hospital was recognized as one of the top acute care hospitals in the nation by Thomson Reuters when it received a 100 Top Hospitals award for providing safe, effective, and patient-centered care.

The hospital also achieved the Patient Safety Excellence Award from HealthGrades®, which recognizes hospitals performing in the top five percent nationally, in addition to the Outstanding Patient Experience Award. Winchester Hospital is one of only four hospitals statewide (along with Massachusetts General Hospital, Brigham and Women’s Hospital, and Cape Cod Hospital) and among 59 out of 5,000 hospitals nationwide to receive both awards from HealthGrades®.

The hospital’s pharmacy underwent extensive renovations in 2011. Dispensing more than 100,000 medication doses per month to patients, the pharmacy installed a new robotic device to process electronic prescriptions submitted through the hospital computer system to reduce the potential for serious medication errors. The medications are then automatically dispensed through medication stations located throughout inpatient areas. To avoid potential drug reactions, new and improved systems have also been put in place to continually monitor all medications that a patient may be taking.

The hospital continues to support and encourage performance improvement training for more than 200 leaders from throughout the organization and this year they were introduced to Lean Six Sigma. Used primarily to improve the quality of businesses processes by minimizing the risk of variability, the methodology has already helped to streamline hospital processes in the emergency and inpatient areas as well as operating rooms and central materials services. Several hospital leaders have chosen to move to the next level and become trained as Green Belts, who are expert in these methods.
EMPLOYEE ENGAGEMENT

Winchester Hospital was again named to the *Boston Business Journal*’s Best Places to Work—placing ninth and making the list for the ninth year in a row. We also placed fifth on the *Boston Globe*’s 100 Top Places to Work.

These designations are the result of a continued focus on creating the best work environment possible for employees. Each year, leaders work with staff to create action plans that are then executed faithfully. For example, this past year the radiology department wanted to improve its working relationship with the emergency department.

Some written comments on the employee partnership survey revealed an opportunity for improvement and as a result a team was formed. Through a series of collaborative meetings and the use of a “walk-in-my-shoes” program, where radiology employees spend time in the emergency department and vice versa to better understand each others roles, recent surveys have revealed an improvement in department relations.

Winchester Hospital’s tobacco-free initiative has been a major focus this past year. Launched by the Board of Directors as part of the Massachusetts Hospital Association’s campaign called “Healing Inside and Out—MA Tobacco-Free Hospitals,” the effort recognizes the role of the hospital as stewards of community health. Communications with all audiences have been extensive and employees who smoke have been supported with smoking cessation programs. The tobacco-free restriction on hospital and off-site locations became effective on November 17, the date of the Great American Smoke Out.
PATIENT EXPERIENCE

Members of the Winchester Hospital team take special pride in providing the best experience possible for every patient who walks through our doors. A comprehensive service excellence program launched several years ago has provided training to every employee. This focus, and our patient satisfaction results, has been recognized nationally.

In July, HealthGrades®, the leading independent health care rating organization, presented the 2011 Outstanding Patient Experience Award. This is the fourth year in a row that Winchester Hospital has received this prestigious award. The distinction recognizes hospitals performing in the top ten percent nationally based on patient satisfaction scores compiled by Medicare.

A performance improvement project, which utilized the Lean Six Sigma methodology, focused on improving patient throughput in the hospital has made amazing strides. Recognized as an opportunity to vastly improve the patient experience, the amount of time to move a patient from the emergency department to an inpatient bed has been reduced by more than half.

We also continue to look for ways to enhance our facilities so that patients and their families experience the least amount of inconvenience. We implemented a new policy whereby the majority of hospital employees are expected to park at off-site locations thereby freeing up more spaces for visitors. This was made possible with the opening of a new employee lot on Maple Street in Stoneham.

In addition, funding was approved and work began for a new elevator in the hospital parking garage. The elevator, expected to be operational this fall, is located adjacent to the entrance and was developed to accommodate individuals of all physical abilities.

Our patients’ feedback for “likelihood to recommend” placed us, on average, in the 94th percentile nationally for inpatient care and in the 95th percentile for outpatient areas including radiology, rehabilitation, oncology and the Breast Care Center.
Without a doubt, we are currently grappling with some of the most sweeping changes to the health care industry. Private health insurers are implementing payment models in which providers will be responsible for managing the health of a population and the different levels of care associated with the management of chronic diseases. We expect the federal and state governments to follow with similar payment systems.

These changes underscore the critical importance of working collaboratively with our physicians. Hospital administrators and physician leaders come together on a regular basis to strategize about how best to navigate the current environment and prepare for anticipated changes.

One example of how Winchester Hospital is preparing for health care reform is the opening of its new advanced primary care practice at 1021 Main Street in Winchester. The newly renovated facility offers a team-based model in patient care. The Winchester Primary Care Associates team includes physicians, a nurse practitioner, a nurse care manager and a number of medical and administrative staff members who work collaboratively and take a more integrated view of the care of the patient.

A community health needs assessment conducted this past year revealed some opportunities for improved care of area residents. These opportunities include management of patients with chronic obstructive pulmonary disease, hypertension and congestive heart failure.

Effective management of these patients will be integral to health care reform as hospitals will be reimbursed based on their ability to keep these patients healthy. Leaders from the hospital’s Community Health Institute are working collaboratively with physicians to develop new ways of caring for these at risk patients.

Our physicians’ feedback placed Winchester Hospital in the 97th percentile nationwide for the question, “would you recommend Winchester Hospital to friends and family.”
It’s hard to believe that Winchester Hospital’s vision for 620 Washington St. in Winchester began as far back as 2005 when the hospital purchased the eleven-acre site. The former site of a watch-hand factory, 620 Washington St. was not built out for many years due to complicated regulations and appeals relating to its proximity to the Aberjona River and wetlands. We have recently made great progress and it is now time to celebrate.

In August, the new Center for Cancer Care was opened, bringing together all oncology services—radiation and chemotherapy treatment as well as all staff including doctors, nurses, a social worker, nurse navigator and support services—together under one roof to offer integrated care. In addition, the hospital broke ground on a new 31,000 square foot ambulatory surgery center scheduled to open next year.

The Center for Cancer Care also launched a multi-disciplinary team approach to diagnosing and treating head and neck cancers, the first of several such models expected to be developed. This leading-edge approach brings together head and neck diagnostic and cancer specialists on a regular basis to collaboratively review cases and discuss the best options for each patient to ensure optimal outcomes.

The hospital’s geriatric service has gained traction in 2011. Led by Wayne Saltsman, MD, PhD, vice president of geriatric services, a multi-disciplinary hospital team has been working collaboratively to develop an integrated model of care whereby geriatric specialists work closely with providers from all aspects of the health care continuum. New relationships have been developed with many area nursing homes and assisted living facilities to ensure that the provision of medical care is coordinated and seamless.

Our physician recruitment team had another outstanding year. There were a total of 93 physicians recruited from throughout the country. These new medical staff members include specialists and primary care physicians, several of whom are based in Medford where historically we have not had a strong primary care presence.

Despite a challenging economic environment, we were able to make a three percent operating margin due to outstanding expense management. In addition, we received more than $7 million in philanthropic contributions—the most ever in the hospital’s 100-year history.
In 1919, after the Town of Winchester and the hospital survived the epidemic of Spanish Influenza, the secretary of the Visiting Nurse Association, which founded the hospital, wrote, “We couldn’t have done it alone; the whole town did it with us.” This statement characterizes the whole of the hospital’s history. From the time the decision was made to found a hospital through all the years that it grew and expanded in facilities, services, equipment, staff, programs, and everything else related to hospital health care, we couldn’t have done it alone. The whole hospital community did it with us.

The hospital’s history is rooted in volunteerism. The hospital was begun by the Visiting Nurse Association, which was formed by a group of women who saw a need for home care and nursing in Winchester and set about in 1899 to remedy the situation. While one nurse and one woman doctor were associated with the group when it started, the women were otherwise not professional business or medical people but rather a group of volunteers who set out with determination and courage to help the poor and needy. First one, then two, and later three nurses traversed the town daily to care for those who needed help. Supporting them were groups of church women who sewed supplies for the nurses, many tradesmen offered discounts, and hundreds of townspeople joined the Association, paying annual dues which helped fund the work of the nurses.
Soon after the Visiting Nurse Association was formed, local doctors who had long wanted a hospital in Winchester encouraged the women to open one. And they did, once the community responded to their fund-raising campaigns. The first hospital was located in rented quarters on Washington Street. It quickly proved that Winchester needed a hospital but also that a rented house was inadequate. Again the community responded to fund-raising appeals, and a permanent building was built between Maple Road and Highland Avenue. At both locations, the community was integrated into the success of the hospital. During the early years, donations came in the form of money, endowments of free beds, furniture, clothing, towels, soap, teapots, dishes, an electric fan, a Bennet Inhaler, a sitz bath tub and other medical equipment, a basket of peaches, a barrel of potatoes, other fresh and canned fruits and vegetables, jellies, pickles, a planting garden, a ton of coal, as well as labor and credit or discounted bills.

Even youngsters helped out. A dollhouse was made and contributed by children of the Washington School. The Baseball Boys held benefit games and Flower Girls sold flowers to raise funds. Throughout the hospital’s first century, people of all ages have not only responded to its capital campaigns but also given thousands of hours of volunteer service to and within the hospital.

As the Rev. Henry Hodge said at the dedication of the cottage hospital in 1912, “All good things cost something, and the better they are, the more they cost. And in proportion as we give the best that we are and have to this hospital, in that proportion shall we have success. It costs life as well as money to make a hospital a success.”

The laying of the hospital’s cornerstone took place in 1916 and the hospital was first occupied by patients in 1917.
VALUED TRADITIONS

Over the past century, community support of the hospital has given rise to some community traditions. From 1902 until World War I broke out, about 2,000 people would gather annually in Town Hall on the first Saturday of June for a breakfast served by the willing hands of two hundred more as a benefit for the visiting nurses and hospital. Annual Pop Concerts were given from 1907 through the 1920s to raise money. For nineteen years during the 1920s and 1930s, horse shows drew thousands from the region, first to the Sanborn Estate on High Street and later to the Winchester Country Club, and raised even greater sums.

Other annual events rooted in the hospital’s history continue today. Over a century ago, the women of The Winton Club assumed the responsibility of supplying the hospital linens. The Winton Club Cabaret was also begun to benefit the hospital, which has always been the sole beneficiary of this popular entertainment. These shows have drawn onstage and backstage talent from many communities and afforded Winton Club husbands, who traditionally build the sets, and others the opportunity to support the Club in its assistance to the hospital. Even the doctors, nurses, and other personnel take to the stage to sing and dance in an annual hospital number. In 1935, the En Ka Society unanimously voted to assist in the upkeep of the Nurses’ Home, which had been neglected during the Depression. To raise money, it held a Street Fair behind Winchester Town Hall. The Fairs continue to the present day, its proceeds benefiting many local organizations.

Over the century, there have been other community activities—balls, golf tournaments, races, and more—all incorporating hospital support into the life of the community, just as the hospital has been integrated for a century into the health care of the communities it serves.
As Winchester Hospital embarks upon its second century of care, 620 Washington St. is in the spotlight. The new Center for Cancer Care is operational, while construction on the Ambulatory Surgery Center is well underway. It’s an exciting time for Winchester Hospital, patients, staff and the community.

According to Mary Sweeney, vice president of planning, business development and communications, “Our services are growing but we are over capacity at our main hospital campus. While a new hospital was out of the question, we realized that the development of a major outpatient facility could meet our immediate needs.” These new facilities support the hospital’s goal of providing integrated, coordinated care focused on patients’ needs.

COMPREHENSIVE CANCER CARE

“I was there in August of this year when the first patient arrived at the Center for Cancer Care,” recalled Robby Robertson, vice president of facilities and real estate. “The elevator doors opened, the gentleman and his wife looked out, and they both said, ‘Wow!’ It was an affirmation that we got it right.”

The two-year process of planning, architecture and design focused on the patient experience and employee satisfaction. The facilities at 620 Washington St. incorporate a design which emphasizes a patient-centered, welcoming environment.

Throughout the process, planners invited feedback from patients, as well as oncologists, clinicians and administrative staff. “It was, and continues to be, a collaborative effort,” Robertson said. “We used evidence-based design with the goal of providing compassionate, supportive patient care.”

The Center for Cancer Care is 43,250-square feet of natural lighting, warm tones and inviting places for patients, family members and friends. The center boasts a fireplace, skylights, artwork, comfortable chairs, a café and wi-fi. Volunteers greet patients as they enter, ensuring they receive a warm reception in every sense of the word.
In just two months’ time, oncology operations and staff from Baldwin Park and Montvale Avenue sites moved in. The old sites were originally business offices, Robby Robertson explained. “We had no chance to design them correctly in the first place. We didn’t own the buildings and we couldn’t expand. We needed a larger space to be able to function. Physicians’ offices were too small, examination rooms were old, and the technology was outdated.” That has all changed dramatically.

“One of the most obvious differences is that it’s a beautiful space,” said Dr. Arlan Fuller, Jr., clinical vice president for cancer services and academic affiliation. “Patients aren’t subject to the hustle and bustle of a crowded space, and can talk to their doctor in confidence.”

There are 28 chemotherapy treatment chairs and amenities include a patient resource area, where individuals receive support and answers to questions and concerns, and conference rooms where doctors can confer with colleagues.

“We have a multi-disciplinary clinic with all the specialists under one roof. Instead of a patient having to see a surgeon here, a radiation therapist there, an oncologist somewhere else,” Dr. Fuller added, “he or she can see them all in one place. For me, the new Center means not practicing in isolation but in collaboration, communing with colleagues, which reduces the risk of error and improves safety.

“In addition, we now have a very different, comforting environment for patients. The delivery of patient care is better. The staff is happier and less stressed with more time to focus on people.”

Next Up: The Ambulatory Surgery Center

Every year at Winchester Hospital between 9,000-10,000 procedures are performed in seven operating suites. That may not mean much at first…until you learn that the industry standard is a capacity of 7,000, or 1,000 procedures per operating room. After surgery, patients are filtered into a small recovery room.

The new Ambulatory Surgery Center is just what the doctor – or in this case, doctors, nurses, staff, and patients – ordered. In July 2012, when three of the four new operating suites are available, it will greatly relieve the pressure on the current operating rooms at the hospital’s main campus at 41 Highland Avenue and will allow for faster, more convenient scheduling of outpatient procedures. The 31,000-square foot one-story building will offer outpatient surgery in five areas: orthopedics, ear/nose/throat, gynecology, podiatry, and urology. The design also allows for future growth and expansion as needed.

Like the Center for Cancer Care, the Ambulatory Surgery Center is being designed with the patient experience in mind. “It is really going to be beautiful,” said Dr. Rick Weiner, medical director of surgical services. “It will feel like going to a spa – attractive and patient friendly, not at all institutional – with wi-fi in the lobby and a café.

“Surgeons, nurses, and staff will work in a beautiful facility, which helps boost morale,” Dr. Weiner continued. “The new Ambulatory Surgery Center means we are continually investing in ourselves so that we are able to do the best we can do to serve our community.”
At Winchester Hospital, we are serious about leadership development and performance improvement as they equate to superior patient care. Two years ago, we deepened our commitment as our hospital leaders partnered with Covidien, a global health care products company with a division focused on operational excellence, to learn about Lean Six Sigma, a multi-disciplinary team approach to optimizing processes, reducing waste and minimizing variability.

Lean Six Sigma, a manufacturing industry program, was developed in the mid-1980s to affect positive change. The strategy has since been adapted to health care as a way to enhance patient care while remaining competitive in a complex and rapidly changing field. “Standard Work,” as applied to health care, is the best known Lean Six Sigma method for a given process to achieve efficient flow, high quality, balanced workload, elimination of waste and maximum benefit to the patient. A six sigma result is one in which 99.99966% of the products or services offered are expected to be free of defects; mathematically that would be 3.4 defects per million.

Nancy O’Hare, clinical services development manager and the primary liaison for Lean Six Sigma, explained that we are striving to create improved processes through teamwork for the delivery of patient care. “We’re talking about taking the way we used to do things and bringing it into modern times.”

The first step is a three-day Value Stream meeting that takes a broad, deep look at a process. Team members produce maps showing how systems work now (current state) and how they could work if improved (future state). Following the first successful Value Stream workshop, which focused on operating room systems, hospital leadership embraced Lean Six Sigma as an integral part of its mission of providing safe, high quality care.

This year, the Lean Six Sigma Steering Committee members identified three Value Stream projects. Value Stream One focused on inpatient access and throughput. Representatives from nursing, registration, the emergency department, housekeeping services, medicine, billing, and information systems were among those involved. Members thoroughly analyzed the process of inpatient access – from admission through discharge.

From that came a Kaizen event. Kaizen is Japanese for “improvement” or “change for the better.” A Kaizen, O’Hare explained, “is an area where we can improve, where we say, ‘Here’s something we can do quickly.’”
The Lean Six Sigma Value Stream process has given us the opportunity to address complex issues and improve organizational processes. The best part of the process is having staff closest to the issue and closest to the patient participate in designing more efficient and better ways to provide care.

– Director of Inpatient Nursing Services Marlene Williamson, RN

The “something,” was emergency department bed assignments to the inpatient floors. “It may sound simple,” she said, “but it’s a complicated process.”

The Kaizen event helped identify the problem: there were delays in gaining bed assignments resulting in patients waiting for admission to the inpatient floors. Kathy Schuler, vice president for patient care and chief nursing officer, is a Steering Committee member and executive sponsor of Value Stream One. “We developed a new position, bed assignment coordinator,” she explained. “Before, there were lots of phone calls being made [to find a bed]. Now, there is just one call — to the coordinator. This allowed us to streamline the process. It took ten to twelve minutes to get a bed; we reduced that to 5.4 minutes.” After more than six months of implementation, the bed assignment process is holding at times less than five minutes. This is a key feature of any Lean Six Sigma improvement — sustainability of the change.

In addition to the Kaizen, a Value Stream results in multiple in-depth projects, called Green Belt projects, which take from four to six months to complete. Over 20 employees are Green Belt trainees involved in an in-depth certification process. To become a certified Green Belt, a trainee must attend a one-day workshop, completing 25 hours of rigorous online training, and participate in a Value Stream workshop and Kaizen event. The final activity is the successful undertaking and completion of a Green Belt project.

Green Belt trainee Ilana Mogleso works in clinical services development. Her Green Belt project focuses on coordination with nursing homes, rehabilitation facilities and ambulance companies. Although being a Green Belt trainee translates into a lot more responsibility, she is enthusiastic about her new role.

“Learning about Lean Six Sigma has taught me to look at things differently. I love solving problems and working in a team environment,” she said. “Each Green Belt project has been designed to eliminate the non-valued, wasteful activities that can cause patient wait time or confusion, and ensure all steps are coordinated and informative for the patient. Now we are empowered as an organization to solve anything.”

Value Stream Two, Emergency Department (ED) Patient and Information Flow, focuses on patients who aren’t admitted to the hospital. The Kaizen event will involve a reorganization of the ED work areas, called a 5S: Sort (remove clutter), Straighten (make locations for everything), Shine (clean, polish, paint), Standardize (find the best way) and Sustain (make it work). Five additional Green Belt projects are underway.

Value Stream Three, Medication Administration Process, focuses on complex issues surrounding how medications are prescribed, administered, monitored, and reviewed. The team includes representatives from nursing, information systems, pharmacy, lab and involves physicians, hospitalists, technologists, management and support staff.

“Ultimately, all of us involved in the Lean Six Sigma effort are change agents,” O’Hare said. “Awareness, education and teamwork are key. There is a willingness to discuss ideas. We are a consensus-driven organization with a strong track record of performance improvement. Leadership is pro-innovation and wants to be on the cutting edge. Winchester Hospital is truly unique. We are building on our success!”

– Director of Inpatient Nursing Services Marlene Williamson, RN
Costs associated with our nation’s medical system are skyrocketing while state and federal funding is decreasing. An aging population strains already overtaxed systems. Physicians, seeing more patients in less time, are inundated with paperwork and regulations. Preventive, pro-active care takes a back seat to episodic treatment for acute care.

Driven by the dual realities of health care reform and rising medical costs, a new model of care – called patient-centered medical home (or advanced primary care) – will fundamentally change how primary care is delivered and financed. Winchester Hospital, through Winchester Primary Care Associates (WPCA) and its parent organization, Winchester Physicians Associates (WPA), is at the forefront of this effort.

“We are evolving into a far more integrated health care organization,” said Winchester Healthcare Management CEO Dale Lodge. “Systems have gotten very complicated and segregation of care can result in room for error.

This system ensures safe, high-quality, patient-centered, cost-effective care. A physician leads a team of professionals (nurse practitioner, nurses, care managers, social workers, dieticians, therapists, office administrators, medical assistants and medical secretaries), who collectively take responsibility for a patient’s ongoing care. Compassionate, personal care includes the use of evidence-based medicine, active participation by the patient and family in decision-making and feedback, as well as information technology to enhance care, track performance and outcomes, eliminate duplication, support education, and foster better communication.

Winchester Hospital is focusing on three key aspects of care: early detection/prevention; disease management of individuals with high-risk chronic care diagnoses; and management of patients who are transitioning their care setting.

“The delivery of medical care has become episodic,” said Ted Sullivan, director of Winchester Physician Associates. “To remedy that, the idea is to have a physician direct the comprehensive care of each patient by leading a medical team.” A key resource and liaison is the nurse care manager, who may oversee between 150-200 patients. The nurse care manager is often the first point of contact, reaching out to patients and families.

“We need to be proactive, monitoring those patients who need extra resources to help keep them well, and knowing when to step in. It has been proven that it can work and I believe it can be achieved. This is the right idea,” Sullivan emphasized. “It will be a better system.

“We want to improve the patient experience, take better care of the population, and reduce costs. Our vision is to connect all the practices to easily share information and resources. There will be less duplicative testing and more communication. We want to be cohesive and collaborative, which will allow us to thrive in a changing payment environment.”
Three new physicians and a nurse care manager have been hired at Winchester Primary Care Associates, which moved into a new building at 1021 Main Street in Winchester in June, with plans underway to hire more doctors and a nurse practitioner. The staff holds team meetings to review operations and answer questions such as: How are we meeting our goals? Who are our highest need patients? What is the best next step for interventions?

Dr. Russell Zide, WPCA medical director and member of the newly formed WPA Physicians Leadership Council, focuses on care innovation and physician development. The Leadership Council focuses on quality/safety, technology, payment reimbursement, and physician development/care innovation. “We need to manage people with chronic diseases and do a better job of keeping them out of the emergency room and the hospital because that places a huge burden on the system,” Dr. Zide said.

“Improving the quality of care and keeping costs down is a challenge,” he admitted, “but the medical system is fracturing. This is a long-term project to bring medicine back to where the patient is at the center. We’ve moved away from that.”

Dr. Joel Solomon, WPA board member and Leadership Council member, focuses on payment reimbursement. “We are on a path of increased health care expenditures that is not sustainable. We spend much more per capita than other countries. We are seriously committed to the question of how can we do this better,” he said.

An important step is moving from fee-for-service to a global payment model, which rewards the quality, not quantity of care. This approach, which incentivizes doctors and hospitals for keeping patients healthy and better managing chronic illnesses, will eventually result in improved patient care while slowing rising costs.

“It’s a start,” Dr. Solomon explained. “The real problem is how to do a better job with fewer resources. It’s been done in manufacturing and we can do it, too. We are trying.”

Winchester Hospital’s leadership is committed to this change. “As community providers, we take care of family and friends all the time,” said Dale Lodge. “That raises the bar significantly.

“We are passionate about health care. We have to be. We’re not dealing with cars; we are taking care of people.”
This was a momentous year for the Winchester Hospital Foundation and those we serve. We raised more than $7 million dollars, the largest amount ever in the hospital’s 100-year history. Our many loyal community members generously gave to the Foundation and we are most grateful for their steadfast support. Our 2nd Century Campaign has engaged countless individuals and businesses who understand the benefits of having a community-based Center for Cancer Care and Ambulatory Surgery Center that are state-of-the-art and welcoming in every respect. Thanks to this generosity, our Center for Cancer Care has opened and cancer patients now can be treated with family and friends at their side to ease the journey. The tremendous response from our own employees, physicians, and volunteers underscores the hospital community’s deep and abiding commitment to our projects and, above all, to our patients.

Similarly, once our Ambulatory Surgery Center opens its doors in 2012, our surgery patients will experience faster, more convenient scheduling of outpatient procedures. The construction of the Ambulatory Surgery Center, with new operating rooms, has the same guiding principles and patient-centered approach that informed every aspect of the building of the Center for Cancer Care: ease of access, comfortable surroundings designed with the patient’s needs first and foremost, and streamlined processes.

We are honored to be the recipient of many awards, including high patient satisfaction scores, employer rankings, and quality measures. Yet, we see firsthand that expertise and the latest technologies are the most powerful healing forces only when delivered by compassionate caregivers. Our ability to bring comfort and ease suffering is, in large measure, due to the philanthropic support and humanity of so many. We hope that you too will continue to be inspired by the impact of these gifts.
We had been looking for something big to do for Winchester Hospital. When we heard about the hospital’s expansion, a light went on.

Philanthropists of the Year John and Suzanne Reno gave an extraordinary donation of $1 million to Our 2nd Century Campaign. The Winchester residents made this generous gift as a tribute to the dedicated, compassionate care provided by two Winchester Hospital physicians: Dr. Arlan F. Fuller, Jr., clinical vice president for the integration of oncology services and academic affiliations; and, Dr. Jonathan Adler, an internist who has been on the hospital’s active medical staff for over 30 years.

“Seeing how intelligently the hospital is operated, and how it continually wins top clinical and employer awards, speaks well. They attract great physicians and provide an excellent experience for patients,” John Reno said. “We had been looking for something big to do for Winchester Hospital. When we heard about the hospital’s expansion, a light went on.”

The Renos have also donated their time and talents to the hospital and other deserving institutions. John served as a member of the Winchester Hospital Board of Directors and Suzie began volunteering in the early 1990s, when her unwavering efforts helped the hospital establish a program to support expectant and new parents. More recently she has been involved with establishing a link between Carleton-Willard At Home, a program for local seniors, and Winchester Hospital.

The Renos continue to be impressed by Winchester Hospital’s superb leadership and high quality medical care. “They are forward-thinking, continually asking, ‘What can we do better?’” Suzie said. “Jon [Adler] has been my doctor forever. He is a very good physician and always interested in my overall well-being. Arlan [Fuller] is a fabulous surgeon and a great human being. He was simply perfect when he cared for our daughter. What I love about Winchester Hospital is that they think about what’s best for the patient. We are lucky to have them in our town.”

John Reno, who also sees Dr. Adler, acknowledged the important role the hospital plays in maintaining a strong, vibrant community. “It is one of the essentials,” he said, “right behind the fire and police departments and the school system. We look at this gift as not just for the hospital, but in a larger sense it is a gift for the benefit of the whole community.”

To honor and thank the Renos, the medical oncology floor at the newly opened Center for Cancer Care at 620 Washington St. has been named the Reno Center for Medical Oncology. It is a fitting tribute to this generous and caring couple and we are extremely grateful.
PHILANTHROPIST OF THE YEAR:
Shields Health Care Group – Business Partner

For five years, Winchester Hospital and Quincy-based Shields Health Care Group have provided radiation treatment to thousands of area cancer patients through a joint venture at 620 Washington St. in Winchester. A recent gift of $100,000 from Shields to Our 2nd Century Campaign is further testament to this strong community health partnership.

The generous donation helps fund Winchester Hospital’s new Center for Cancer Care which combines medical oncology, radiation oncology and all support services under one roof at the 620 Washington St. location.

As founder, chief executive officer and chairman of Shields Health Care Group, Thomas F. Shields is selective when making charitable giving decisions. He chose to support Winchester Hospital because he believes his family-run business and the community hospital share so many qualities.

“It’s important to us that each patient is treated the way we’d want our own mother treated,” said Shields, a longtime supporter of education and children’s charities. “The great people at Winchester Hospital share our values and our common vision of patient-centric, quality-driven care. It feels like family.”

Through their donation, the Shields family chose to name the Center for Cancer Care’s second floor skylight area where sunlight pours down, highlighting a vine sculpture with multicolored, stained glass leaves suspended along the ceiling.

Thomas A. Shields, president of Shields Health Care Group, noted that radiation oncology services were traditionally delivered to patients in basements of buildings. For this reason, he especially appreciates the healing environment within the Winchester Hospital Center for Cancer Care, which is enhanced by airy spaciousness, light and other natural elements.

“We are grateful for the generous gift from Shields Health Care Group, which will allow us to continue to invest in the most advanced technologies and facilities for our patients,” said Kevin Smith, president and chief executive officer of Winchester Hospital.

Thomas F. Shields said he is proud of the “blossoming relationship” between his family business and Winchester Hospital. “We enjoy the opportunity to extend a helping hand when it’s needed,” he added, “and we look forward to growing together.”
Three years ago, Richard Heidbreder, MD, was diagnosed with amyotrophic lateral sclerosis (ALS, or Lou Gehrig’s disease). A year later weakness in his arms forced him to retire from his role as medical director of Winchester Hospital’s radiation oncology service. In tribute to Dr. Heidbreder and his 25 years of service, Our 2nd Century Campaign received a $2 million donation from Winchester Laboratory Associates, PC, the physician group that provides laboratory and pathology services at Winchester Hospital, and Strata Pathology Services, Inc., a Lexington-based company that provides pathology services to area medical providers.

One of the largest gifts in the hospital’s 100-year history, the donation brings us closer to the $10 million capital campaign that is helping to fund the Center for Cancer Care and Ambulatory Surgery Center, both located at 620 Washington St., and renovations at the 41 Highland Ave. main campus. According to pathologist Mark Zuckerman, MD, president of Strata and chair of Winchester Hospital’s pathology department, the organizations made the gift as a tribute to their friend and colleague. The funds have been designated for the new Dr. Richard Heidbreder Center for Radiation Oncology, located at the Center for Cancer Care, and the Healing Garden which will be located behind the Center for Cancer Care when completed. A special ceremony was held for the naming of the Center and Dr. Heidbreder was in attendance with his family. Dr. Heidbreder passed away on November 14, 2011.

Dr. Heidbreder joined Winchester Hospital’s medical staff in 1985; in 2007 he founded its radiation oncology program. Under his guidance, the formerly named Winchester Hospital Radiation Oncology Center became a premier facility, offering state-of-the-art treatment for cancer patients. He also established the Dr. Richard Heidbreder Comfort Fund to assist cancer patients with medical and related costs not covered by insurance.

“Dr. Heidbreder was an outstanding clinician and a wonderful human being. He represents everything that a physician should provide to patients and the community: clinical excellence, compassionate care and a vision for the future, all with a great deal of class,” said Dr. Zuckerman. “This is an opportunity for my colleagues and I to give back to Winchester Hospital, and at the same time recognize Dr. Heidbreder for his incredible contributions to the hospital and its patients.”

“The naming of the radiation oncology center for Dr. Heidbreder is so fitting,” said Kevin Smith, president and chief executive officer of Winchester Hospital. “No one has done more to advance cancer care at Winchester Hospital. This is a perfect tribute to a great man.”
WE GRATEFULLY ACKNOWLEDGE OUR LEADERSHIP LIFETIME DONORS

Lifetime donors exemplify a loyal group of community members who have generously supported the hospital through annual giving, tribute giving, capital giving, planned giving or through event support through September 30, 2011.

$2,000,000+
Mrs. Elaclaire Gosselin and the late Raymond J. Gosselin
Winchester Laboratory Associates, PC
and Strata Pathology Services, Inc.
The Winton Club

$1,000,000 - $1,999,999
Mrs. Muriel B. Dawes*
Mr. and Mrs. John F. Reno
Mrs. Phyllis M. Stearns

$500,000 - $999,999
Abbott Laboratories
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Salter HealthCare
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Armstrong Ambulance Service
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Winchester Emergency Medical Associates, PC
Winchester Savings Bank
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Mr. and Mrs. Joseph R. Tarby, III
Mr. Kevin Smith and Ms. Molly Jenks
Dr. and Mrs.* Barry C. Dorn

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Mr. and Mrs. William A. Doe
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Dr.*, and Mrs. Richard C. Heidbreder
Howland Development Company
Dr. Mohammed Jaleel
Mr. and Mrs. Clarence A. Kemper
Dr. Chitra Y. King and Mr. Christopher King
Dr. and Mrs. Richard A. Kingsbury
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Mr. and Mrs. Robert R. Williams
Woburn Host Lions Club
Woburn Pediatric Associates
Dr. Dana I. Zitkovsky and Mr. Ivan Zitkovsky
Dr. and Mrs. Mark Zuckerman

*deceased
Winchester Hospital's legacy of support was first established in 1916 when Sophronia A. Harrington made the first planned gift - a bequest - the simplest of all planned gifts.

The Heritage Society recognizes those who have continued Mrs. Harrington’s tradition. Gift planning is more than a link to our past; it is the source of our current strength and the promise of a healthy future. It also provides our donors with a way to leave a legacy that perpetuates their most deeply held values.

Those listed below have provided for the hospital in their estate plans through a life income gift such as a charitable gift annuity or a remainder trust.

Mrs. Celena D. Bradlee                       Dr. and Mrs. Thomas J. Mulvaney
Dr. and Mrs. Albert Chien                     Mrs. Barbara B. O’Connell
Mrs. Muriel B. Dawes*                        Ms. Janet Pavliska*
Mrs. Margaret Duca*                          Mr. and Mrs. Salvador F. Porras
Mrs. Virginia B. Gay                         Mrs. Kay L. Shubrooks
Mrs. Elaclaire Gosselin                      Mr. Kevin F. Smith and Ms. Molly Jenks
Mr. George S. Hebb                           Ms. Elizabeth Spiller
Mr. and Mrs. Clarence A. Kemper              Professor Emeritus Dr. John C. Wells
The Lodge Family                             *deceased
Mr. and Mrs. John C. Martini

The individuals listed below included Winchester Hospital in their estate plans through a bequest or trust prior to their passing. We remain grateful for their generosity in leaving a legacy to benefit the patients of Winchester Hospital.

Mr. Frank O. Adams                           Mrs. Marguerite Diorio
Mrs. Evelyn Akeson                           Mrs. Elsie E.C. Ferguson
Mr. and Mrs. George Aligas                   Mary Alice Fitch
Dr. William Daniel Barone                    Mrs. Pauline Griffin
Mr. George Blackwood                         Mrs. Virginia Hackett
Mrs. Deborah L. Broadhurst                   Mrs. George A. Haskins
Mr. Harrison Chadwick                        Mrs. Harry P. Hood
Mrs. Helen M. Coakley                        Mr. and Mrs. Reese James
Mrs. Dorothy S. Coleman                      Mrs. Marion A. Littlefield
Mr. Arthur J. Connell                        Mr. Donald Manzelli
Mrs. Ruth Dietz                               Mr. Eugene J. McCarthy
                                                Dr. James F. McDonough
                                                Dr. and Mrs. Donald McLean
                                                Mrs. Constance Morrill
                                                Mr. Charles C. Parkhurst
                                                Mr. Leo M. Pistorino
                                                Mr. Gregory Rodes
                                                Mrs. Sandra Shepard Rodgers
                                                Mrs. Margaret J. Shaw
                                                Mrs. Florence Jope Smith
                                                Kathryn Wholley
                                                Mr. and Mrs. Walworth B. Williams

Our dear friend and esteemed volunteer Muriel Dawes passed away at her Winchester home on August 24, 2011 at the age of 98 years old. A member of the Heritage Society, Muriel was a steadfast donor and recipient of the hospital’s Philanthropist of the Year Award in 1997.

Many can attest to Muriel’s dedication to Winchester Hospital. Not only was she a donor, she also began volunteering in 1977 and logged nearly 5,300 volunteer hours – a value of more than $100,000 in today’s workplace. Muriel was also a longtime member of the Friends of Winchester Hospital’s Board of Directors. She enjoyed her annual birthday celebration at the hospital and she loved Amigo, one of the dogs that visits patients through the hospital’s Caring Canines program.

In Muriel’s true wisdom, she left her home to Winchester Hospital through a retained life estate, in which she donated her home while retaining the right to live in it for the rest of her life. We are truly grateful to Muriel for the legacy she left us.
We are proud to report that the community has enthusiastically rallied in support of the capital projects which will be the beneficiaries of **Our 2nd Century Campaign**. As of this printing, with the help of more than 150 volunteers, we have raised more than $8 million toward our goal of $10 million since the inception of this campaign. With the exception of the Healing Garden, construction of the new Center for Cancer Care is complete and patients are now enjoying this state-of-the-art facility. Uniting our oncologists from three facilities into one location places less stress on our patients and enables our talented physicians to seamlessly integrate their patients’ treatment plans. How rewarding it is to see our vision realized!

The construction of the Ambulatory Surgery Center is well underway as we watch the determined pace and progress of John Moriarty and Associates’ construction crew. We anticipate that the steel beams will be fully enclosed by the end of fall so that the interior work can continue throughout the winter months. When the surgery center is complete with new operating rooms, it will dramatically improve our ability to serve the community’s demand for surgical procedures. Once this facility is complete in the spring, we will turn our attention to the operating rooms and recovery suite of the hospital.

We have been encouraged by the community’s outpouring of generosity, which has grown dramatically from its initial phases when we invited those closest to Winchester Hospital to endorse the effort. In just over one year, we have engaged many community members and businesses to join us in this endeavor. The emphasis of the campaign now is to share the story with each and every individual in our service area and urge others to join us to ensure that the very best care remains close to home.

**“With the help of more than 150 volunteers, we have raised more than $8 million toward our goal of $10 million since the inception of this campaign.”**

– Peggy and Jack Roll

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Campaign Cabinet Members (standing left to right): Maribeth Canning, Richard Iseke, MD, Jack Roll, Kathy Schuler, RN, Arian Fuller, MD, John Sullivan, Esq., John Looney, and Patricia Thompson

(Seated left to right): Kelley Cornell, MD, Deborah McDonough, Ann Blackham, Peggy Roll, Dale Lodge, Jane Walsh, Patricia Annino, Esq., Donna Sherrill, RN, and Gerry O’Neill (not pictured: Rich Salter and Dick Sayre)
CAPITAL GIVING

The Capital Campaign’s listings recognize donors who have made leadership gifts from the campaign’s inception through September 30, 2011.

Several members of the Winchester Hospital medical staff at the Ambulatory Surgery Center groundbreaking ceremony

$2,000,000+
Elaclaire Gosselin and the late Raymond Joseph Gosselin
Winchester Hospital Laboratory Associates, PC

$1,000,000 - $1,999,999
Mr. and Mrs. John F. Reno

$500,000 - $999,999
Telemachus and Irene Demoulas
Family Foundation
The Winton Club

$100,000 - $499,999
Jean and Bill McCall
New England Inpatient Specialists, Inc.
North Shore Radiological Associates, Inc.
Joan and Gerald O’Neil
Peggy and Jack Roll
Salter HealthCare

$25,000 - $49,999
Dr. Darius Ameri
Armstrong Ambulance Service
Brian and Laura Carr
The Cedar Street Foundation
Dr. Kelley Cornelli
Marion G. Crandall
Sara Delano and Bill Zink
The Duffy and Conway Families of Woburn

$50,000 - $99,999
Affiliates in Footcare, PC
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The Lodge Family
Anthony and Anita Martignetti Foundation
The Martin Family
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Middlesex Surgical Associates
Northmark Bank
Stoneham Bank
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$10,000 - $24,999
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Richard H. and Elizabeth N. Sayre
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Jane and Michael Walsh
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Janice T. Houghton
Alice J. Kuhne and Dennis W. Manning
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Norma and Salvador Porras
Reading Cardiology Associates
Robby and Catharine Robertson
Dr. Wayne Saltzman
Kathy and Frank Schuler
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Dr. David J. Carroll
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Patricia and Michael Thompson
Glen and Anne Welch
Dr. Robert and Marlene Williamson

$1,000 - $2,499
A&M Roofing Services, Inc.
The Ockerbloom Family
Dr. Chitra Y. King
Dr. Katherine Kim
Cathie and Dean Jackson
and Margaret Pothier

For a full list of all campaign donors, please visit www.winchesterhospital.org.
The Giving Circles program recognizes the generous commitment of individuals and businesses who contributed annual gifts of $100 or more between October 1, 2010 and September 30, 2011. Over the years, philanthropy has been the cornerstone of our efforts to enhance patient care initiatives, secure state-of-the-art technology and equipment, and fund renovation projects. Unrestricted gifts received through our Giving Circles program provide the hospital with the flexibility to use these resources where needed most.

**GIVING CIRCLES**

**$25,000+**
- Dr.* and Mrs. Richard C. Heidbreder
- Professor Emeritus Dr. John C. Wells
- Winchester Mount Vernon House
- Yankee Alliance

**$10,000 - $24,999**
- Ms. Katherine K. Allen
- Mr. and Mrs. Craig B. Gibson

**$5,000 - $9,999**
- Dr. and Mrs. David A. Alessandro
- Choate, Hall & Stewart
- Dr.* and Mrs. David E. Nash

**$2,500 - $4,999**
- Sunny and Jon Adler
- Mr. and Mrs. Paul F. Kelly

**$500 - $999**
- Andrew Abela, DDS
- Anonymous
- Ms. Martha A. Bullard

*deceased*
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Medicity  
Rep. and Mrs. James R. Miceli  
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Judi Bucci  
Kathy Butler  
Dr. and Mrs. Teriggi Ciccone  
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John and Nicole Clark  
Ted and Nancy Cleary  
Stephen Conrad  
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Miss Janessa DeCota  
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Winchester Hospital employees raised more than $340,000 through the hospital’s 2011 employee appeal to support the care of the patients they serve every day.
I have seen firsthand the wonderful care and compassion the hospital staff provides. I am so happy to be a part of the Winchester Hospital family.

— David Portman, president, Action Ambulance Service, Inc.
The Grateful Patient program began in 2011 to recognize gifts from patients in honor of physicians, nurses, caregivers and departments. Recipients of the award receive a silver pin commemorating the honor. Patients have made donations to the Annual Fund or Our 2nd Century Campaign between October 1, 2010 and September 30, 2011.

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Kaitlyn Arriel, RN received her Grateful Patient pin from Nurse Manager Chrissie Quill. RN. Kaitlyn was recognized by Mr. and Mrs. Robert J. Ferullo for the outstanding care she provided during Mrs. Ferullo’s stay at Winchester Hospital.
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Tribute gifts allow donors to honor or remember loved ones and friends and support the hospital. Listed are honor and memorial gifts made between October 1, 2010 and September 30, 2011.

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Through a gift to Our 2nd Century Campaign, Ron and Lynne Martignetti recognized Janet Gallant Wood and Dr. Arlan Fuller, Jr. for the extraordinary care they provide to cancer patients.
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Mr. and Mrs. Richard S. Casalinuovo
Centers for Disease
Control and Prevention
Dr. and Mrs. Alan Cherney
Mr. Nicholas Croft, Jr.
Mr. and Mrs. Donald H. Cohen
Mrs. Jennifer Coplan
Dr. and Mrs. Richard Cushman
Philip D. Cutter, MD
Mr. and Mrs. Carroll Dolan
Mr. and Mrs. John Donovan, Jr.
Mr. and Mrs. Christopher Dooley
Mr. and Mrs. Steve Effron
Mr. David English
Mr. and Mrs. Gary Fallick
Mr. and Mrs. William H. Fallon
Dr. Helene E. Feiler
Mr. and Mrs. Alan S. Fields

Ms. Genevieve Stevenson
Mr. and Mrs. John F. Sullivan
Ms. Karen L. Vars
Mr. and Mrs. Lawrence Worthen

IN MEMORIAM

The Winchester Hospital family would like to acknowledge Dr. Gary Goldfarb and Deanne Dorn who passed away in the past year.

Dr. Gary Goldfarb

Dr. Goldfarb was a beloved pediatrician who practiced medicine for more than 30 years. He was a valued member of the hospital’s medical staff who loved his profession and adored his patients. He will always be remembered for his warmth and caring for hundreds of Winchester Hospital’s youngest patients.

Deanne Dorn

Pictured with her grandson Charlie Jones, Deanne Dorn was involved with the hospital for more than 30 years. She touched the lives of many within the hospital family. Her dedication and commitment in her service as a corporator and director of the Winchester Hospital Foundation was unwavering.
The James F. McDonough, MD Fund for Nurse Education and Development provides educational scholarships to qualified nurses seeking to expand their knowledge and advance in their field. The late Dr. McDonough, a Winchester Hospital physician, was known for his deep appreciation of and respect for the nursing profession. The fund was established as a way for grateful community members to memorialize this much-admired doctor.

Since its inception, the McDonough Fund has raised more than $2 million and provided financial support for 35 Winchester Hospital employees who have earned nursing degrees and four employees currently enrolled in the program who will graduate by 2013. The fund has contributed to the Winchester Hospital-based Simmons College BSN and MSN programs, benefiting more than 20 nurses. It also has provided reimbursement to more than 150 registered nurses who have achieved certification in their specialty areas.

For the past ten years, the James F. McDonough, MD Golf Classic has been the fund’s main fundraising event. This year’s friendly competition was held at the Winchester Country Club and raised more than $190,000, bringing the running total to nearly $2.2 million. We are grateful to everyone who supported the 2011 Golf Classic and to our nursing staff.

Justin Vallas, RN, who works in Winchester Hospital’s emergency room, wanted to give back to the James F. McDonough, MD Fund for Nurse Education and Development, which provided the financial support that allowed him to earn a nursing degree. Justin decided that volunteering at this year’s McDonough Fund Golf Classic would be an ideal way to show his appreciation.

Justin, who holds a bachelor’s degree in health education, had been working as an EMT in Winchester Hospital’s Emergency Department for several years, doing “hands-on clinical stuff,” he said. He loved the work and when he learned of the McDonough Fund, he applied.

“It changed my life,” Justin said. “I couldn’t have gone through school without the Fund’s support. I know I wouldn’t have been able to retain as much if I was going to school and working full time. You have to keep your grades up to receive full reimbursement and the financial assistance allowed me to work part-time, which helped me stay focused on my studies.”

Justin graduated from Salem State College in May, passed the boards in July, and started working as an emergency department nurse the next week. “I jumped right in,” he said.

“The doctors, nurses and technicians are like my second family. Everyone is so nice; there are no big egos. I am so lucky because I love my job.”

Justin is now focused on his next goal – to play in the 2012 McDonough Golf Classic. “I’m starting to raise money so I can participate and contribute to a great cause.”
NURSES HELPING NURSES — LOCALLY AND GLOBALLY

Thanks to $2,100 from the Magnet Nurses’ Charitable Fund, last May Winchester Hospital IV Therapy nurse Tracy Nadolny-Burton was able to lead fifteen pre-med students from Boston University to Punta Gorda, Belize. This would be the students’ first clinical experience and Tracy’s role was clinical instructor, leader and unofficial mom/nurse for the students whose ages ranged from 20-24.

It was a busy week. They visited seven schools, performing health screenings and nutrition education for 1,200 children. They even built a playground. In the village, the group tended to wounds and minor health issues, and screened residents for hypertension and diabetes, the number one killer in the country. “We can’t pin down why diabetes is such a problem,” Tracy said. “The people aren’t overweight. They don’t have cars and they walk everywhere.” To help with research, she plans to write a paper through Boston University, based on data the group collected.

They also identified needed equipment, supplies and medicines. “The hospitals and clinics were in deplorable condition with nothing in them. Back home I can grab any piece of equipment, anything I need. It made me realize how fortunate we are.

“The people were poor but happy and very welcoming. The children would climb into your lap and hug you. And this was the greatest bunch of students!”

“I am grateful to the Magnet Nurses’ Charitable Fund for allowing this amazing trip to happen,” Tracy said. “I could never have done it on my own.”

Winchester Hospital nurses created the Magnet Nurses’ Charitable Fund in 2005 to support the hospital’s strong tradition of nurses helping nurses while providing a philanthropic platform to support the Magnet mission. The Fund, which has raised more than $83,000 since its inception, allows donors to give in a meaningful way, directly impacting the health of people at home and around the world. In addition to mission trips to less developed countries, funds have provided for education through conferences and mobile libraries, and money for medicine, equipment and supplies.
THE WINTON CLUB SUPPORT

In May 2010, The Winton Club donated $110,000 to Winchester Hospital. At the time, Club president Gail Canzano said, “Despite this challenging economy, we always hope for the best…” Well, the economy wasn’t less challenging this year but The Winton Club was undaunted. In May 2011 they donated $125,000 — $15,000 more than the year before. Canzano credits the hard work of club members and strong support of hospital employees. “We pushed hard,” she said, “and it paid off.”

The money was earmarked for two sites at the new Center for Cancer Care at 620 Washington Street: $115,000 was donated to help with the creation of a healing garden, scheduled for completion next summer, and the remaining $10,000 was donated to A Caring Place, the hospital’s resource for wigs and head coverings, prosthesis, intimate apparel and other items for oncology patients.

The Winton Club raised money through Winton Gift Shop sales, the holiday fair and the annual Cabaret. Members worked to increase Cabaret sponsorships and acquire more ads for the program book. In addition, the volunteers continued in their efforts to increase gift shop sales by offering diverse selections, new items and reasonable prices.

“Our members are highly motivated to work as hard as they can,” Canzano explained. “What comes through loud and clear for all of us is that Winchester Hospital always thinks in terms of treating the whole person, not just the ‘patient.’ That makes such a big difference. That concern extends not only for the person being treated but to the entire family. We are so lucky to have a community hospital of this caliber.”
Winchester Hospital’s annual Gala, One Shining Night, was held on December 3, 2011 at the Westin Waterfront Hotel in Boston. The success of this event would not be possible without our loyal sponsors and guests who join us each year in support of Winchester Hospital’s Center for Cancer Care. This year’s Gala was especially memorable and festive as the Center for Cancer Care has opened and is providing a peaceful and pleasing environment with state-of-the-art therapies, technologies, and care, all housed in one location. Gala guests celebrated the Center’s opening and the season with flair and good cheer.

We acknowledge with sincere thanks the generosity of our Gala sponsors, the auction donors whose unique live and silent auction donations resulted in spirited bidding, and the hard work of our energetic Gala Committee. The enduring support of our many friends directly benefits Winchester Hospital and helps us to remain the provider of award-winning care, close to home.

Our steadfast supporters and treasured partners for the 2011 Gala are listed below (as of September 30, 2011). With their help, the Gala raised more than $350,000 for the Center for Cancer Care and our cancer patients.
Throughout the years, volunteers have been a driving force at Winchester Hospital. This year alone, 780 volunteers donated more than 60,000 hours at the hospital. Pictured here is one of our many dedicated volunteers, Marion Nee, a former Winchester Hospital employee who began volunteering at the hospital in 1962.
2011 MEDICAL STAFF LEADERSHIP

OFFICERS

President
Arthur Little, MD

President-Elect
Richard Toran, MD

Secretary-Treasurer
William Breckwoldt, MD

Assistant Secretary-Treasurer
Dana Zitkovsky, MD

CHAIRPERSON OF DEPARTMENTS

Anesthesiology
John Hutcheson, MD

Anesthesiology Associate Chair
Keith Long, MD

Emergency Medicine
Gregory Weisz, MD

Emergency Medicine Associate Chair
Dana Zitkovsky, MD

Medicine
David Dohan, MD

Family Medicine
Andrew Escoll, MD

Obstetrics & Gynecology
Franklin Waddell, MD

Orthopedics
William Walsh, MD

Pathology
Mark Zuckerman, MD

Pediatrics
Martha McCarty, MD

Radiology
Robert Fortunato, MD

Radiology Associate Chair
Haldon Bryer, MD

Surgery
Dennis Begos, MD

CHIEFS OF SERVICE

Breast Surgery
Kelley Cornell, MD

Cardiology
Paul Radvany, MD

Dermatology
Suzanne Grevelink, MD

Gastroenterology
Robert Muggia, MD

General Surgery
Dennis Begos, MD

Gynecology
Franklin Waddell, MD

Hand Surgery
David Alessandro, MD

Hematology-Oncology
Chitra King, MD

Neonatology
Karen McAlmon, MD

Neurology
Paul Chervin, MD

Obstetrics
Franklin Waddell, MD

Ophthalmology
Phillip Gendelman, MD

Oral Surgery
Andrew Abela, DDS

Otorhinolaryngology
Holly Gailivan, MD

Plastic Surgery
Jonathan Hall, MD

Podiatry
Peter Paicos, DPM

Psychiatry
Monte Kaufman, MD

Pulmonary Medicine
Najmuddin Patwa, MD

Radiation Oncology
Richard Heidbreder, MD*

Rheumatology
Sharon Stotsky, MD

Thoracic Surgery
Shalini Reddy, MD

Urology
Jerry Rittenhouse, MD

Vascular Surgery
William Breckwoldt, MD

Anesthesiology
Director of Hospitalist Program
Mohammed Jaleel, MD

Chairperson of Quality Assurance & Peer Review Committee
Richard Iseke, MD

Medical Director of ICU Program
Joseph Taylor, MD

MEMBERS AT LARGE

2nd Year of 2nd Term – Dennis Markovitz, MD
2nd Year of 2nd Term – Luis Valles, MD
1st Year of 2nd Term – Helene Feiler, MD

NOMINATING COMMITTEE CHAIRPERSON
Dana Zitkovsky, MD

2011 WINCHESTER HEALTHCARE MANAGEMENT, INC. AND WINCHESTER HOSPITAL BOARD OF DIRECTORS

Chairman
Paul Andrews

Vice Chairman
Jane Walsh

President
Dale Lodge

Vice President
Kevin Smith

Treasurer
Matthew Woods

Clerk
Joseph R. Tarby, III

Ex-officio Members
Arthur Little, MD, president of medical and allied healthcare professional staff
Gail Canzano, Winton Club president
Jeannine Barrett, Friends of Winchester Hospital president

Non-voting Members
Eric Hayden
Richard Sayre

Members
Jonathan Adler, MD
James Conway
James Ficociello, DDS
Robert Fortunato, MD
Janice Houghton
John Martini
Deborah McDonough
Richard Ockerbloom
Peter Rotoio, MD
Joseph Taylor, MD
Michael Travaglini
James Young

*deceased
## Combined Balance Sheets

### Assets

<table>
<thead>
<tr>
<th>Description</th>
<th>9/30/11</th>
<th>9/30/10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and cash equivalents</td>
<td>$23,795,000</td>
<td>24,310,000</td>
</tr>
<tr>
<td>Investments at market value</td>
<td>141,876,000</td>
<td>147,495,000</td>
</tr>
<tr>
<td>Accounts receivable, net</td>
<td>25,548,000</td>
<td>24,884,000</td>
</tr>
<tr>
<td>Other assets</td>
<td>26,362,000</td>
<td>27,087,000</td>
</tr>
<tr>
<td>Investments in property and equipment, net</td>
<td>128,178,000</td>
<td>101,332,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$345,759,000</td>
<td>325,108,000</td>
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</tbody>
</table>

### Liabilities and Net Assets

<table>
<thead>
<tr>
<th>Description</th>
<th>9/30/11</th>
<th>9/30/10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounts payable and accrued expenses</td>
<td>$39,820,000</td>
<td>32,706,000</td>
</tr>
<tr>
<td>Amounts set aside for settlements with third party payors</td>
<td>7,482,000</td>
<td>6,835,000</td>
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<tr>
<td>Long-term debt</td>
<td>109,069,000</td>
<td>110,157,000</td>
</tr>
<tr>
<td>Other liabilities</td>
<td>16,326,000</td>
<td>14,273,000</td>
</tr>
<tr>
<td>Total net assets</td>
<td>173,062,000</td>
<td>161,137,000</td>
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<tr>
<td><strong>Total</strong></td>
<td>$345,759,000</td>
<td>325,108,000</td>
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</tbody>
</table>

## Combined Statements of Operations

### Revenue

<table>
<thead>
<tr>
<th>Description</th>
<th>9/30/11</th>
<th>9/30/10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Net patient service revenue</td>
<td>$283,146,000</td>
<td>280,680,000</td>
</tr>
<tr>
<td>Other operating revenue</td>
<td>16,590,000</td>
<td>13,680,000</td>
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<tr>
<td><strong>Total Operating Revenue</strong></td>
<td>299,736,000</td>
<td>294,360,000</td>
</tr>
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</table>

### Operating Expenses

<table>
<thead>
<tr>
<th>Description</th>
<th>9/30/11</th>
<th>9/30/10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries, wages and benefits</td>
<td>175,020,000</td>
<td>170,261,000</td>
</tr>
<tr>
<td>Supplies and other expenses</td>
<td>95,059,000</td>
<td>93,135,000</td>
</tr>
<tr>
<td>Health Safety Net</td>
<td>1,967,000</td>
<td>2,270,000</td>
</tr>
<tr>
<td>Depreciation, amortization and interest</td>
<td>14,921,000</td>
<td>15,980,000</td>
</tr>
<tr>
<td>Provision for bad debt</td>
<td>7,095,000</td>
<td>6,896,000</td>
</tr>
<tr>
<td><strong>Total Operating Expenses</strong></td>
<td>294,062,000</td>
<td>288,542,000</td>
</tr>
</tbody>
</table>

### Gain (loss) from Patient Care Operations

<table>
<thead>
<tr>
<th>Description</th>
<th>9/30/11</th>
<th>9/30/10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gain (loss) from Patient Care Operations</td>
<td>5,674,000</td>
<td>5,818,000</td>
</tr>
</tbody>
</table>

### Nonoperating revenue, net

<table>
<thead>
<tr>
<th>Description</th>
<th>9/30/11</th>
<th>9/30/10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nonoperating revenue, net</td>
<td>1,725,000</td>
<td>(752,000)</td>
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</tbody>
</table>

### Excess (deficiency) of Revenue Over Expenses

<table>
<thead>
<tr>
<th>Description</th>
<th>9/30/11</th>
<th>9/30/10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excess (deficiency) of Revenue Over Expenses</td>
<td>$7,399,000</td>
<td>5,066,000</td>
</tr>
</tbody>
</table>
## Balance Sheets

**Assets**

<table>
<thead>
<tr>
<th></th>
<th>9/30/11</th>
<th>9/30/10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and cash equivalents</td>
<td>$21,222,000</td>
<td>$21,627,000</td>
</tr>
<tr>
<td>Investments at market value</td>
<td>123,918,000</td>
<td>139,948,000</td>
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<tr>
<td>Accounts receivable, net</td>
<td>24,140,000</td>
<td>23,610,000</td>
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<tr>
<td>Other assets</td>
<td>29,994,000</td>
<td>22,944,000</td>
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<tr>
<td>Investments in property and equipment, net</td>
<td>125,139,000</td>
<td>99,675,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$324,413,000</strong></td>
<td><strong>307,804,000</strong></td>
</tr>
</tbody>
</table>

**Liabilities and Net Assets**

<table>
<thead>
<tr>
<th></th>
<th>9/30/11</th>
<th>9/30/10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounts payable and accrued expenses</td>
<td>$36,171,000</td>
<td>$28,754,000</td>
</tr>
<tr>
<td>Amounts set aside for settlements with third party payors</td>
<td>5,884,000</td>
<td>6,518,000</td>
</tr>
<tr>
<td>Long-term debt</td>
<td>109,069,000</td>
<td>110,157,000</td>
</tr>
<tr>
<td>Other liabilities</td>
<td>6,666,000</td>
<td>6,578,000</td>
</tr>
<tr>
<td><strong>Total net assets</strong></td>
<td><strong>166,623,000</strong></td>
<td><strong>155,797,000</strong></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$324,413,000</strong></td>
<td><strong>307,804,000</strong></td>
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</tbody>
</table>

## Statements of Operations

**Revenue**

<table>
<thead>
<tr>
<th></th>
<th>9/30/11</th>
<th>9/30/10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Net patient service revenue</td>
<td>$258,486,000</td>
<td>$258,888,000</td>
</tr>
<tr>
<td>Other operating revenue</td>
<td>9,605,000</td>
<td>7,293,000</td>
</tr>
<tr>
<td><strong>Total Operating Revenue</strong></td>
<td><strong>268,091,000</strong></td>
<td><strong>266,181,000</strong></td>
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</table>

**Operating Expenses**

<table>
<thead>
<tr>
<th></th>
<th>9/30/11</th>
<th>9/30/10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries, wages and benefits</td>
<td>149,369,000</td>
<td>147,590,000</td>
</tr>
<tr>
<td>Supplies and other expenses</td>
<td>87,626,000</td>
<td>86,283,000</td>
</tr>
<tr>
<td>Health Safety Net</td>
<td>1,967,000</td>
<td>2,270,000</td>
</tr>
<tr>
<td>Depreciation, amortization and interest</td>
<td>14,422,000</td>
<td>15,524,000</td>
</tr>
<tr>
<td>Provision for bad debt</td>
<td>6,559,000</td>
<td>6,498,000</td>
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<tr>
<td><strong>Total Operating Expenses</strong></td>
<td><strong>259,943,000</strong></td>
<td><strong>258,165,000</strong></td>
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</table>

<table>
<thead>
<tr>
<th></th>
<th>9/30/11</th>
<th>9/30/10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gain (loss) from Patient Care Operations</td>
<td>$8,148,000</td>
<td>8,016,000</td>
</tr>
<tr>
<td>Nonoperating revenue, net</td>
<td>2,476,000</td>
<td>284,000</td>
</tr>
<tr>
<td><strong>Excess (deficiency) of Revenue Over Expenses</strong></td>
<td><strong>$10,624,000</strong></td>
<td><strong>8,300,000</strong></td>
</tr>
</tbody>
</table>