Over the past 20 years, Penn Medicine has led the way in mapping the transition of more and more patient care services into ambulatory settings. Starting with Penn Medicine Radnor, which opened in 1997, the Health System has been providing an increasing number of outpatient services throughout the region that were formerly only available in the hospital.

Over the course of the summer, Penn Medicine opened the doors of its latest state-of-the-art outpatient facility, a brand new Penn Medicine Radnor that brings all the lessons of the past two decades together in one location. “It’s all a person’s care in one convenient location, close to home, and with all the clinical excellence of Penn Medicine,” said Tracey Commack, associate executive director.

**DESIGNED WITH THE PATIENT IN MIND**
At 250,000 square feet — twice the size of the original Penn Medicine Radnor — the new facility offers state-of-the-art care not available elsewhere in the region. The building’s layout was designed along service lines that group clinicians by type of condition they treat, such as heart and vascular care, to encourage closer collaboration among specialists and easy access when patients need to see multiple providers in one visit. “It’s more of a center model, like the Perelman Center, treating the whole patient,” Commack said. And, although no one could have predicted the onset of COVID-19, Radnor was fortuitously designed with enough space to ensure proper social distancing. “Wide hallways and waiting rooms that aren’t spread out. Even with a high volume, it doesn’t feel crowded.”

Centralized registration means “patients only need to check in at one place, one time, no matter how many appointments that day,” she said. “One HIPAA form to sign, one place to pay their copays.” And staying open to 9 pm during the week — and Saturday hours — will ensure that patients can get great care whenever it’s most convenient to them.

Penn Medicine Radnor offers the first free-standing ambulatory surgical facility in the region. While no high-risk procedures can be performed since the facility is not connected to a hospital if higher level care were needed, the six ORs will support a variety of surgical procedures, including breast reconstruction and lumpectomies, hernia repairs, cystoscopies and cataract removal. Endoscopies — with a capacity for twice as many patients as the old facility — are already up and running, with all surgical services being available by March 2021.

The standards of the Radnor ORs are equal to those in hospitals. In fact, because the license for the new Radnor facility is under HUP’s name, “everything must be to the level of care provided there,” Commack said. “We are held to the highest standards for quality and safety and appreciate the hospital’s exceptional oversight of the facility.”

Radnor is also Penn Medicine’s first outpatient facility to have its own centralized instrument processing (IP) department. “This on-site center allows scopes and instruments to be cleaned and properly sterilized using the most up-to-date technology and increases the level of service provided to all of the outpatient practices,” Commack said.

To ensure high standards of cleaning and sterilization, the IP system will be managed by Penn Medicine’s Intervventional Support Center, a soon-to-open central instrument processing facility that will be the first in the tri-state area and the largest in the country. In addition to overseeing Radnor’s IP, the ISC will combine IP services from HUP and Pennsylvania Hospital, as well as their respective Philadelphia outpatient facilities: the Perelman Center and the Tuttleman Center. (Read more at https://bit.ly/37lRMg0).

The Radnor facility is also taking cancer care to a new level, with on-site radiation therapy. Each of the 24 chemotherapy infusion bays is large enough for patient comfort during long infusions and maintain safe physical distancing in this current COVID environment. They also feature plentiful natural light. Patients can receive infusions for cancer care as well as other IV drugs and fluids.

**FORGING NEW CONNECTIONS TO SUPPORT PUBLIC HEALTH IN OUR COMMUNITIES**

When Hahnemann University Hospital closed in the summer of 2019, many of Philadelphia’s most vulnerable residents were left with a void where they had once turned for health care. Almost overnight, the city lost one of its busiest emergency departments, in addition to obstetrical care and treatment for diseases ranging from HIV to hypertension.

This year, many in the Philadelphia community grew worried about history repeating itself with the financially strapped Mercy Philadelphia Hospital, just a few short miles from the Hospital of the University of Pennsylvania and Penn Presbyterian Medical Center. Mercy has been a hub of close-to-home care for the community and jobs in West Philadelphia for more than a century. But this time, the health care community — and those who live in the neighborhoods nearby — are banding together to chart a different path for the future of the hospital campus.

I’m proud to say that Penn Medicine and our partners from leading health care organizations, Public Health Management Corporation (PHMC), Trinity Health Mid-Atlantic (Mercy Philadelphia’s owner) and Independence Blue Cross, have come to the table with bold ideas and an inspiring commitment to do something different — something better — than merely saving an endangered hospital. Together, we will transform the campus to one centered on promoting public health through preventive care and an array of supportive services to boost wellness in more foundational ways.

The closure of Hahnemann and, this year, the COVID-19 pandemic have been seminal events that have reinforced the vital importance of addressing health at the level of social determinants like education and economic factors that drive disparities, particularly those along racial lines. When the Mercy campus transformation is complete, Penn Medicine will run the facility’s emergency department and accompanying inpatient medical and behavioral health beds as a remote location of...
A COMFORTING GIFT FROM the Highland Quilters

The new mom looked at the beautiful, handstitched baby quilt in disbelief. The gift was an expression of love that touched the young woman who had received the quilt when her baby was born. It was also appreciated by the nurse who proudly handed it to her at a home visit.

Earlier this year, the Highland Quilters of Highland Presbyterian Church in Lancaster presented church member Jennifer Walker, LCSW, of Penn Medicine Lancaster General Health, with 15 colorful, handmade baby quilts to be given to new mothers through the Nurse-Family Partnership program. Walker is a social worker with the program, which provides first-time, low-income mothers with in-home health-care services, parenting education, emotional support and guidance to ensure mothers are taking care of themselves and giving their babies a healthy start.

“Our moms light up when they see these works of art,” said Meggin Santiago, MSN, nurse supervisor of Nurse-Family Partnership. “We encourage families to do ‘tummy time’ with their babies to promote their growth and development. One mom was uncomfortable putting her baby directly on the hardwood floor, so I suggested she use her quilt. Every time I visited her after that, the mom had her quilt laid out with toys for the baby to play with. On one visit, her baby was not feeling well, and the mom was cuddling with her daughter under the quilt, reading a book.”

In the Nurse-Family Partnership, each mother is connected to her own personal registered nurse, who offers home visits throughout the pregnancy and until the baby is two years old. New moms are also provided referrals for health care, child care, job training and other available community services.

COMMITMENT TO THE ENVIRONMENT

The 11-acre campus of Penn Medicine Radnor was designed to enhance the connection with nature. Instead of the mower lawns typically found on suburban campuses, patients will see more than 250 trees and a meadow with tall wildflowers, attracting both bees and birds. In addition, many of the windows have “bird safety glass,” which has small dots imprinted on the glass to help birds see the glass and prevent them from flying into it.

Rain gardens on the campus allow storm water to slowly seep back into the soil rather than running off pavements. Three underground cisterns manage all storm water on site, helping to keep the native plants — for all four seasons — well watered without the use of an irrigation system. “It’s much more calming than a person’s typical health care experience,” said architect Jason Cole, project designer at Ballinger. Designed for LEED certification, “the facility adheres to Penn Medicine’s commitment to sustainability.”

Because being outside in nature can increase feelings of well-being, a 2.4-mile trail runs through the campus and will connect to a future township trail network. “It’s well lit and easily accessible,” he said.

But this soothing environment continues on the inside as well, with sunlight streaming in through large windows throughout the facility. “When patients walk through the door, we want them to breathe a sigh of relief that they will be taken care of,” Commack said. “There’s so much anxiety for patients — navigating their care, a list of things to follow up on. We want to give them everything they need so they have a plan. They will never leave not knowing what to do.”

PPMC Cardiology Shows Their Usual Generosity During an Unusual School Year

This year, students across the country have had to adapt to an academic year unlike any other, with some returning to socially distanced schools and others logging online for remote courses. But whether they’re learning in the classroom or from their couch, students need access to their daily essentials. To set West Philadelphia students up for success, Bridget Abdalla, CMA, the administrative assistant for Penn Presbyterian Medical Center’s Cardiology team, teamed up with the Jarell Christopher Seay Love and Laughter Foundation last month to distribute much-needed school supplies.

The foundation was established to honor the memory of Jarell Seay, a victim of gun violence who tragically passed away in 2011. Abdalla recently connected with Cheryl Seay, Jarell’s mother and the foundation’s founder/CEO, and learned about the wide range of fundraisers, giveaways, and community events Seay hosts throughout the year. Ever the enthusiastic and compassionate volunteer, Abdalla brought back news of the foundation’s October Clean and Safe Community Giveaway Event to her colleagues and began crafting a detailed back-to-school wish list on Amazon. The Cardiology team showed a groundswell of support.

In addition to cleaning products, hygiene products, gift cards, mental health resources, and healthy lunches distributed by other local organizations, Presby provided 90 backpacks, six boxes of composition books, four boxes of folders, case after case of pens, pencils, highlighters, and crayons, and small notebooks filled with inspirational quotes that kids can use for school or as personal journals to express themselves during this challenging time. Abdalla also volunteered her time at the event, helping to connect over 100 community members with the resources they needed.

“This was our first time working with the foundation, and I’m really excited to maintain our new relationship. It was a touching, awesome event, and it allowed us to serve Presby’s community,” she said. “This kind of work is essential, not just because it feels good to give back, but because it’s critical to help others feel seen — to help them know that they and their needs are important.”

Penn Medicine Radnor: Raising the Bar on Clinical Care in the Community

Commitment to the Environment

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In 2019, the UPHS Benefits team thought outside the “benefits box” to bring employees UPHS Benefit Extras. With Benefit Extras, employees have access to specially negotiated group rates on valuable benefits that extend beyond the traditional medical and retirement benefits, including accident insurance, critical illness insurance, pet insurance and auto and home insurance.

“We had a really great response to the roll out of the program last year. Employees have elected over 1,600 voluntary benefit plans to date!” said Jen Brady, MA, RD, associate director of Employee Benefits and Wellness. “Our employees appreciate that we brought in additional programs to help support them and save them money.”

According to Brady, UPHS Benefits Extras also means purchasing power. “Employees can shop an extensive network of carefully curated local and national vendors through the Deals and Discounts portal. They’ll find great discounts on apparel, cars, electronics, live entertainment, gifts, and travel.”

Managing UPHS Benefits Extras is easy. Employees can access them from anywhere they have an Internet connection and any smart phone because they’re mobile friendly. And with automatic payroll deductions, employees won’t miss a premium payment.

Please note: the enrollment period for critical illness and accident insurances runs through November 16 for coverage beginning Jan. 1, 2021. Employees can apply for any of the other UPHS Benefit Extras any time during the year.

PennOpen Pass, a daily symptom tracker, helps to reduce the risk of COVID-19 to the Penn community, throughout both the Health System and University. It is required for anyone engaged with on-campus academic, research, or clinical activities. Performing a daily symptom check — before arriving at work — is key. Anyone with no new symptoms and no recent contact with a known COVID-19 case receives a “Green Pass,” which must be shown to enter buildings on campus. Those who report recent exposures to known cases or who themselves have new COVID-19-specific symptoms or a combination of nonspecific potentially COVID-related symptoms receive a “Red Pass,” along with appropriate guidance on next steps.

“PennOpen Pass helps assure you are safe to be on campus, provides you with Penn Medicine clinical expertise to help facilitate the steps to take if you have symptoms or exposure, and monitors trends related to COVID-19 to enable timely allocation of resources for campus safety,” said PJ Brennan, MD, the Health System’s chief medical officer. “This is the entry point and is part of a set of practices that are done together: facial covering, social distancing, and good hand hygiene.”

The design of the PennOpen Pass program incorporates currently known clinical information about the epidemiology of COVID-19. It strikes a balance between identifying possible cases and triggering false positives. “When we identify potential cases, expedite self-isolation, testing, and contact tracing, we intervene and prevent single cases from seeding outbreaks,” said Kevin Volpp, MD, PhD, director of the Penn Center for Health Incentives and Behavioral Economics.

So far, more than 30,000 Health System faculty, staff, and students have enrolled in the program. Learn more about PennOpen Pass at https://pennopen.med.upenn.edu/.

Tracking COVID Symptoms to Reduce Risk

PennOpen helps you stay up to date with new COVID-19-related information. PennOpen Pass has been helping employees track their symptoms. If you have new symptoms, you can report them on PennOpen to help determine if you should seek care.

If the symptoms are not severe, you can use PennOpen to identify potential cases, so Penn Medicine can take the appropriate steps to prevent outbreaks. This ensures that employees who may have COVID-19 are identified and can take the necessary precautions to protect themselves and others.

If you have a fever or other COVID-19 symptoms, you can use PennOpen to escalate your care. PennOpen will connect you with Penn Medicine’s COVID-19 experts to help you determine if you need to seek care.

If you are asymptomatic, you can use PennOpen to ensure you are safe to be on campus.

PennOpen Pass helps you to reduce the risk of COVID-19. It provides you with Penn Medicine clinical expertise to help facilitate the steps to take if you have symptoms or exposure, and monitors trends related to COVID-19.

No Obstacle Too Big to Get Patient the Care He Needed

Thanks to the collaboration, creativity, and dedication of the PCCU team at Chestnut County Hospital, patients have been able to receive optimal care, even during challenging pandemic times. PCCU nurse Kristin Fogelman, BSN, knows this first hand.

Earlier this year, a patient was brought to CCH after a close neighbor and friend realized they hadn’t heard from him in a while and called 9-1-1. He had a poor prognosis and unsteady mental state. Upon arrival he said he did not have any family members or a point of care representative.

“We determined the patient should be transferred to the inpatient hospital unit to receive the proper care, but he was unable to sign the necessary consent form due to his disoriented mental state,” Fogelman said. “Without a contact to make medical decisions, our hands were tied.”

During hospitalization, the patient became confused and began calling out the name of his sister. Fortunately, the nurse and palliative care team were able to speak with him and he was able to confirm that his sister would be a good point of care representative.

Julie Mackay, BSN, was finally able to get contact information for the patient’s sister, but since she wasn’t listed as the point of care person, “we weren’t able to give her much information about his brother’s health,” Fogelman said. In addition, his sister lived in Maryland and was unable to travel. Nor did she have access to a fax machine.

Hospice liaison Barbara Pierce suggested contacting the police barracks in Maryland that was closest to the sister’s residence. The paperwork was then faxed to the station and the patient’s sister was able to sign the forms and fax them back.

“It took a couple days, but we were able to get the patient to the inpatient hospital unit in a timely manner,” Fogelman said. “We work so well as a team that we were able to overcome the additional obstacles while remaining calm and finding a solution to provide the patient with the best possible care.

“We will always do what’s best for our patients, no matter what’s going on around us.”

PAH Focuses on the First 100 Feet

One hundred feet is a short distance, but a lot can happen in those steps, for example, the Philadelphia Eagles can get a third of the way to the end zone. At Pennsylvania Hospital, resident improvement advisors Bobby Goodacre, MBA, and Kate DiMedio, BSN, recognized that the 100-foot distance from the hospital’s main entrance at 8th Street — through which almost all patients, visitors, vendors, etc, normally pass — to the Preston elevator, which leads to many patient floors, was of significant importance when developing the hospital’s plan to return to full clinical care capacity after the spring surge of COVID-19.

Through their First 100 Feet project, Goodacre, DiMedio, and a collaborative team of Facilities, Security, Patient & Guest Relations, and Radiology staff worked together to identify process improvements that could create smooth traffic flow and reduce risks of exposure as more patients and limited visitors returned after the initial COVID-19 surge.

“By examining the different metrics that we’ve been monitoring throughout the pandemic — available PPE, patient volume, the number of staff needed in certain areas — we were able to get a sense of who was coming in at any given time, what issues could come up, and what solutions we could prioritize to foster a safe resurgence,” Goodacre said.

In addition to the recommendations borne from their own findings — such as increasing the number of staff members taking temperatures — the team was also inspired by the approaches rolled out by local businesses, and particularly the clear signage, social distancing measures, and plexiglass barriers employed by Whole Foods. “Nearly every patient comes through this corridor, and it’s the first experience they have. Just because there are several — available PPE, patient volume, the number of staff needed in certain areas — we were able to get a sense of who was coming in at any given time, what issues could come up, and what solutions we could prioritize to foster a safe resurgence,” Goodacre said.

Colleagues across the Health System have expressed interest in learning more about PAH’s approach, and the team has been happy to oblige. Last month, DiMedio co-hosted an ECRI webinar with Goodacre and PAH’s chief nursing officer Elizabeth Craig, DNP, RN, explaining how other hospitals can also translate approaches from “big businesses to the bedside” in an effort to improve patient flow and safety.
AWARDS AND ACCOLADES

BYPASS SURGERY NETS TOP RATING

Four years ago an interdisciplinary team from HUP, in collaboration with the Health System, set a goal to reduce the mortality rate for coronary artery bypass graft (CABG) surgery. Their combined efforts have led to the lowest mortality rate in five years and the achievement of a 3-Star rating for CABG surgery at HUP for 2019 from the Society of Thoracic Surgery, the society’s highest category of quality.

The team included members of cardiovascular surgery, anesthesia critical care, advanced practice providers, nursing, pharmacy, case management, social work, and physical therapy. Their approach included developing a post-surgical pathway and 25 protocols, establishing a committee to review and discuss patients at high-risk for surgery, and implementing advanced operating room technology. More broadly it also involved a cultural shift in communication and teamwork strategies. Many of these methods have now been applied across the Health System.

“We are excited to see the impact of the changes on patient care and outcomes,” said Michael Acker, MD, chief of Cardiovascular Surgery. “We are confident that we will be able to sustain these gains and continue to deliver the highest quality of care for our patients.”

TWO RESEARCHERS RECOGNIZED WITH NIH DIRECTOR’S AWARDS

Two researchers have received the prestigious Director’s Awards from the National Institutes of Health (NIH), part of the NIH Common Fund’s High-Risk, High-Reward Research Program honoring exceptionally creative scientists. Brian Litt, MD, of Neurology, was honored with a Pioneer Award for $5.6 million, supporting novel neuroscience research. Gregory Cordei, PhD, of Psychiatry and Neuroscience, was selected as a New Innovator Award winner, receiving $2.4 million for research investigating the mechanisms of chronic pain.

The NIH program is designed to fuel research endeavors that are more open-ended and have a potentially broader effect on scientific understanding compared to more traditional research. The NIH program is designed to fuel research endeavors that are more open-ended and have a potentially broader effect on scientific understanding compared to more traditional research. The NIH program is designed to fuel research endeavors that are more open-ended and have a potentially broader effect on scientific understanding compared to more traditional research.

SOCIAL WORKER HELPS CANCER PATIENTS IN MYRIAD WAYS

Christina Bach, MBE, MSW, has been selected to receive the 2021 Association of Oncology Social Work’s Quality of Life in Cancer Care Award, sponsored by the American Cancer Society. The prestigious award was established to highlight oncology social works commitment to improving the lives of people with cancer and those who care for them.

Bach, a clinical oncology social worker,hoerchrist and social work educator, is currently the psychosocial oncology content editor at Oncolink.org. In this role, she develops educational content for cancer patients and families.

NEW CHEA WILL FIGHT FOOD INSECURITY

Earlier this year, Penn Medicine’s Center for Health Equity Advancement (CHEA) created a Social Needs Response Team which worked with local small catering businesses and a community-based food access organization to deliver over 2,700 boxes of food to vulnerable households. Building on this success — and thanks to a generous contribution from the TD Charitable Foundation — CHEA will launch a Food Access Support Technology (FAST) platform early next year to help facilitate a coordinated city-wide response to food insecurity in effort to track and improve health outcomes for vulnerable patients.

CHEA was created in 2019 to help ensure high quality patient and family-centered care for all populations, promote workforce diversity; and cultivate safe and inclusive learning and clinical environments.

FORGING NEW CONNECTIONS TO SUPPORT PUBLIC HEALTH IN OUR COMMUNITIES

HUP, Children’s Hospital of Philadelphia (CHOP), is also exploring the option to offer pediatric behavioral health services on the campus.

The bigger part of the story is how our coalition will work in partnership with the community to address many health conditions, like heart disease, diabetes, and depression, before they become emergencies. All too often, people with the fewest resources rely on visits to emergency departments for their care, many of which could be avoided with better access to community care.

As part of our coalition to transform Mercy, we will look to our community partners — local leaders and residents alike — to help us understand where help is needed most to influence the development of programs to address issues such as food insecurity and health and wellness education. Our aim is to equip the community with the resources and education needed to support wellness and manage chronic conditions — and even prevent them from developing in the first place.

Research has proven that primary care provides the foundation for good health. Penn Medicine’s own primary care practices serve as the medical home to over 120,000 patients. Our system has worked to reimagine our delivery of primary care through innovative programs like Penn Integrated Care, pre- and post-operative behavioral health to patients by providing support and care. And across the health system, when our patients have more complex health needs, we are working to bring advanced ambulatory services closer to the neighborhoods in which they live and work — including those just opened in recent months, our multispecialty site in Mount Laurel, N.J. and the new state-of-the-art Penn Medicine Radnor facility.

Our commitment to the region we serve is universal and unerring, and we have to stand up and be there for everyone, no matter their zip code. As an organization, we’re focused on the bigger picture, beyond the patients who walk in our doors. We must continue to own our care for the health of our community. With the transformation of the Mercy campus, we are building on our own expertise, working past the walls of individual institutions, learning from our partners and becoming a stronger force for better health together.

A HIGH FLYING TRIBUTE FOR A PRINCETON THERAPIST

Patients showing appreciation to their therapists is not uncommon, said Katherine Lee, MA/EDS, a primary therapist with Princeton House Behavioral Health’s outpatient center in Moorestown, NJ. It usually takes the form of small, heartfelt gestures such as an evening out, or recognition through Penn Medicine Princeton Health’s Special Thanks and Recognition (STAR) program. But others — including… and grander, for example, when one of Lee’s patients flew a flag in her honor aboard a U.S. Air Force plane. The patient, a military veteran, arranged the tribute this past September 11.

“It’s a huge honor,” said Lee, who provides treatment for patients in the Adult Program at Moorestown. “This is a sacred tradition reserved for occasions like funerals, memorials, and special commemorations. I was very grateful.”

The flag was later delivered to Lee, along with a certificate noting that it was flown in “Honor of Katherine Lee and her dedication to all the lives of people she touches every day.”

These days, due to precautions related to the COVID-19 pandemic, outpatient programs are held virtually via videoconference. This was the case for Lee’s patient. “I thought it would be difficult to create a strong bond between patient and therapist during virtual treatment,” she said. “But in this case, it worked.”