Dramatic “Change” is the pivotal reality we are facing today as we prepare for Health Care Reform. The healthcare industry is in the midst of a significant and swiftly moving evolution of our professional lifetime. In addition, the 1115 Waiver (DSRIP), has changed how we get paid for our services. It has introduced more accountability and significant performance expectations for the entire health system.

Our current hospital system will rapidly move away from cost based reimbursement to capitation. In this capitlated environment we will receive a set amount per patient to care for our member’s healthcare. Current patients now will become members through HWLA/LA Care and other health plans. More importantly, our members will have a choice of providers in our community. We want them to choose and stay with us!

Given the new reality, DHS is moving very rapidly in developing Medical Homes and building primary care capacity for our members. We too are charged to develop and redesign our ambulatory service system to meet these challenges. We are introducing ambulatory tools to help meet the demands of our members in a much more cost effective manner than in the past. Some of those tool include i2i Registry to help monitor a member’s chronic conditions and eConsult, a tool to reduce the inappropriate referrals and perhaps reduce the need for face to face specialty visits.

Excellent patient experience requires more than world-class clinical care. Patients are increasingly making health care decisions based on their perception of “quality.” For example, patients may interpret quality as how well their doctors and nurses communicated with them, how well their pain was managed and whether they had all the information they needed upon discharge.

In closing, I ask that we commit and embrace these positive changes. Let’s all do our part in improving our patient’s experience. It’s also the right thing to do for our patients and the right thing to do for our future.
Street to Home Outreach Program
By Cecil Clark
Administrator, Medicine/Psychiatric & Support Services

LAC+USC Medical Center is partnering with the First Supervisorial District and the Department of Mental Health to establish a Street to Home Project. The primary goal is to provide outreach, engagement and placement in supported, permanent housing for a target population of unsheltered, chronically homeless and vulnerable individuals living on and around the campus of the hospital.

Street to Home was initiated in October 2010 to address the homeless issues that are prevalent in our community. The program was designed to enhance and improve cost effective services previously delivered in LAC+USC Emergency Department by redirecting 40 homeless individuals to Exodus Urgent Care Center. Exodus would provide integrated treatment of physical health, mental health and substance abuse issues to the targeted homeless persons and link them to primary and mental health care. Team members would assist clients with housing and the development of essential community support systems intended to foster reintegration, improve housing retention and enhance recovery. Overall, the population of unsheltered homeless living on the LAC+USC campus has decreased and a culture of change has been introduced to this population and the hospital staff.

The Street to Home Outreach & Engagement Team, a multidisciplinary interagency engagement, was established with professionals selected for their capability and experience with varied aspects of the program design. The team included hospital physicians, nurses, social workers, DMH system navigators, community based mental health providers, homeless service providers, substance abuse providers and benefits acquisition specialists.

The Street to Home Outreach and Engagement Team rapidly discovered that the majority of the homeless surveyed were diagnosed with serious mental illness (SMI) and multiple co-morbidities. The benefit of the program to the community is just one of the many efforts to offer assistance and care coordination for the homeless population in Los Angeles County.

Department of Obstetrics & Gynecology Receives Consult of the Year Award
By Phillip L. Moore III, MPA
Director, Clinical Affairs & Program Development

The Department of Obstetrics & Gynecology received the 2011 Consult Service of the Year award from the Department of Emergency Medicine at LAC+USC Medical Center. The award is administered by the Emergency Department who grants a clinical department within the medical center who best exemplifies teamwork, professionalism, positive attitude, and patient advocacy.

In addition, the Best Individual Consulting Physician Award was presented to Dr. Shahed Ghanimati, a senior resident in the Department of Obstetrics & Gynecology. She was selected out of nearly 900 residents who work at the Center for her clinical acumen, professionalism, caring attitude, and excellent communication skills. Dr. Laila Muderspach, Chairman of the Department of Obstetrics & Gynecology indicated, “We are extremely proud as a department for this recognition from our colleagues, and plan to continue to perform to the standards worthy of receiving these awards.”

Community CPR Training
By Graciela Magana-Salas, NP, DEM and Michelle Mendez, RN, CPR Coordinator, DEM

The LAC+USC Department of Emergency Medicine (DEM) established a community partnership with Los Angeles Unified School District (LAUSD) during the summer of 2011 to address the importance of training community household members in lay rescue Cardiopulmonary Resuscitation (CPR).

The current literature supports that without CPR awareness and training, Latino family members are not likely to assist in CPR during an emergency, further decreasing the chance of survival in the home or the community.

The development of community CPR training has been able to bridge the gap by providing free classes at various school sites in LAUSD. The goal is to increase CPR awareness that will lead to an increase in survival for Latinos and other community members who do not know the basic principles of CPR. The class uses the American Heart Association (AHA) curriculum - Family and Friends CPR. The training includes identifying foreign object obstruction and CPR resuscitation skills for adult, children and infants. Every participant receives a free AHA booklet with step by step illustrations that they may keep handy in the house.

School sites that have benefited from this training so far include Brooklyn, Eastman, Washington, Kennedy, West Vernon, Logan, Garfield and Santee elementary & high schools. The DEM’s CPR Training Team continues to see an increase in request from the community to take advantage of this free training. The DEM recently purchased more equipment that allows them to accommodate more sites for training.

“CPR is a basic skill that every household should have.”

Dr. Sean Henderson, Chair, Department of Emergency Medicine & Chair, CPR Committee

Graciela Magana conducting CPR demonstration.
Miss California Junior National Teen: The Courage Within to Survive
By Phillip L. Moore III, MPA
Director, Clinical Affairs & Program Development

Samantha Palumbo, an accomplished 16 year old scholar, athlete, church volunteer and pageant beauty queen collided into an equestrian fence in her car on April 8, 2005. Six wooden logs pierced through the car but one log went through the windshield and struck the left side of her head. Traumatic brain injury limited her chances of survival but she reigned supreme anyway!

Diana Palumbo, Samantha’s mother, wrote a letter to Dr. Demetrios Demetriades, Director of Trauma and SICU, to thank his team for not giving up on her daughter. Here is what she had to say...

Dear Dr. Demetriades,

I read a report on trauma survival this morning that concluded that ALL of the patients included in that particular study died from their injuries. The gripping part was that the two prognostic coma severity indicators used to compare these 175 patients all had the same GCS and FOUR score as Samantha. The study also compares GCS and Pupil Reactivity at admission as possible mortality indicators. The interesting part for me was that it didn’t conclude that the deaths were solely due to the severity of damage, but the severity of damage AND the fact that clinicians often don’t "aggressively" treat patients arriving in their trauma centers with a GSC of 3 AND bilateral fixed dilated pupils.

I re-read Samantha’s medical records this morning just to confirm my memory of her scores and fill in some missing details. What powerful evidence of the astronomical odds she overcame. By the grace of God she survived, not only due to her strength, but because LAC+USC Trauma Center continued to provide aggressive medical treatment in spite of those standardized scales and your own experience indicating death was actually only a matter of time.

Your amazing doctors and nurses gave my daughter a chance and didn’t let statistics influence their interventions. Every minute of her time someone was watching, reacting, adjusting, speculating, measuring, monitoring, treating - doing something to help her as she lay there so completely helpless.

Prior to arriving at the hospital, there were people at the accident site that did everything humanly possible to keep her breathing and thank God called for that crucial life flight even though it was noted that they didn’t think she would live until the helicopter arrived.

How does a mother ever express her gratitude to these exceptional people for their actions back then? They saved Samantha’s life, giving us a chance to give her a life back!

Truly, finding the words are so difficult to explain this deep appreciation. I thought you might enjoy reading Samantha’s reaction to this study . . .

. . .at the breakfast table this morning, I tell her once again how proud I am of her and read her a brief summary of the study, telling her that she matched those indicators exactly, and before I could finish she started typing on her speech device . . . “And I am alive - Woot Woot!” with a huge smile and raising her left arm in the air, palm up doing the “raise the roof” gesture.

So here’s a big “WOOT WOOT” to you and your incredible team that were there for us when we needed you the most. Wishing you a “Woot Woot” kind of day!

Eternally grateful,
Diana Palumbo

Avon Awards $125,000 Grant for Cancer Clinic
By Dr. Heather R. Macdonald, Medical Director

The LAC+USC Familial Breast and Ovarian Cancer Prevention (FBOPC) Clinic provides a medical home to patients whose personal and family histories put them at extraordinary risk for breast or ovarian cancers. Our goal is to both ensure early detection of cancer in this high risk population and to offer prophylaxis strategies to decrease their risk. Education and empowerment are key guiding principles in helping patients manage their cancer risks in the clinic.

The program coordinates genetic counseling, testing, surveillance strategies including mammograms, breast MRI & pelvic ultrasounds, and prophylactic measures like chemoprevention and surgical prophylaxis. Our patients are primarily identified through our Breast and Gynecologic Oncology programs, Gynecology service and Women’s Diagnostic Breast Center in addition to referrals coming from the medical center. Patients with either a personal or family history of breast or ovarian cancer at a young age or with multiple first and second degree relatives with breast or ovarian cancers are eligible for referral to the FBOPC. Once referred our patients receive individualized cancer risk assessment by Charite Ricker MS, a genetic counselor with extensive experience in cancer genetics. Those at increased risk are enrolled and managed by Dr. Heather Macdonald, a board certified obstetrician/ gynecologist and fellowship trained breast surgeon with expertise in evaluation and diagnosis of breast and gynecologic disorders. Specialty clinics such as this one exist commonly in Comprehensive Cancer Centers like USC Norris. Our FBOPC clinic is the first in Southern California to offer comprehensive services in a public hospital to an underserved primarily minority population.

“We are deeply grateful for the support that Avon has provided to our patients”
-Dr. Stephanie Hall, Chief Medical Officer

In July 2011 we received an AVON Foundation Safety Net Grant for $125,000 to support our patient navigation services and expand our clinic population. This grant has allowed us to double the number of patients evaluated and followed. More importantly, we have also hired a bilingual patient navigator and data manager to assist our patients with the myriad of appointments required and to assist with increased surveillance. Support from the AVON Safety Net Grant has both increased the number of patients with access to our services and ensured our current patients get timely and frequent screening and personalized care that they need for a successful recovery.
OB/GYN Doctors Giving Back: Scarves for Life!
By Dr. Nathan Blue, Resident Physician

The nature of residency training in OB/GYN at the Center is unique, not because of clinical experience, surgical numbers, or research opportunities—it is the commitment of the residents. The care they provide to our patients goes beyond clinical expertise and compassionate care. The residents frequently venture outside of hospital walls and into deeper connections with the challenges our patients, as well as what sustains them.

In the fall of 2011, three OB/GYN residents envisioned a more tangible expression of caring for patients undergoing treatment for gynecologic cancer—scarves! In association with the Keck School of Medicine’s OB/GYN Student Interest Group and American Medical Women’s Association, USC Chapter, they conducted a month-long scarf drive. This one of a kind community outreach culminated in the collection, wrapping and delivery of more than 120 head and neck scarves to patients undergoing chemotherapy for GYN-related cancers.

“Sometimes it’s the little things we can do for people that can make the biggest difference,” states Dr. Andrew Thomas, one of the three resident physicians who organized the drive. “We want them to know that their day-to-day concerns don’t go unnoticed.” This go-the-extra-mile attitude isn’t restricted to just the hospital campus. In addition to participating in HIV and cancer walks, the residents also regularly volunteer at the Downtown Women’s Center, a Los Angeles shelter dedicated to “ending homelessness for women.”

As the LAC+USC OB/GYN residents continue to move forward in their training, they continue to look for ways to make a difference in their community. In the midst of 80 hour work-weeks and demanding academic regimens, they continue to reach out, hoping that with each outward venture, the women of Los Angeles move slightly closer to becoming whole.

Announcements and Upcoming Events

- Irene Recendez, RN, Chief Nursing Officer, receives the Woman of the Year Award from the LAC Commission for Women!
- National Volunteer Week — April 15 - 21, 2012
- County Sidewalk CPR Day — June 7, 2012
- March is National Colorectal Cancer Awareness Month: Dr. Anthony Senagore discussed the topic on CBS HealthWatch

Security: Keeping You Safe
By Luis Fonseca, Administrator, Facilities Management
Lt. Margarita Velazquez, Sheriff’s Department

The Los Angeles County Sheriff’s Department (LASD) is proud to be responsible for the public safety of the most diverse hospital in the nation. LASD provides the highest quality police services to ensure the safety and security of everyone at the Center. Over the past year, LASD has made it a priority to address security concerns brought to their attention along with providing a proactive approach to patrolling the USC Campus. From 2010 to 2011, there has been an average 70% reduction in burglary, grand theft, grand theft auto, vehicle law violations and thefts from vehicles reported to LASD on campus. To ensure this downward trend in crime continues, LASD is an active member of the LAC+USC Security Concerns Committee. The purpose of the committee is to immediately investigate, address and implement security recommendations made by the employees and management to maintain a safe campus environment.

LASD provides increased visibility throughout the campus & parking structures and responds timely to calls for service which helps ensure a safe environment. Sheriff’s personnel walk the campus and conduct daily directed patrol checks, speaking with patients, visitors and employees to hear and address all safety concerns.

By continuing to work together to strengthen our strong partnership with the LAC+USC Medical Center, LASD looks forward to further expanding on the shared successes and striving to continue their goal of ensuring the safety and security of all patients and staff.

“Patients, Staff & Visitor Safety is our #1 priority at the Medical Center”
- Henry Ornelas, Chief Operations Officer & Co-Chair Security Concerns Committee

To submit stories, please email Phillip Moore at phmoore@dhs.lacounty.gov

Drs. Judy Chen, Nicole Bender & Jenny Jaque present a scarf to a patient.