

*Employer of
Choice...*

*Employees of
Choice!*



2005-2006 Annual & Community Report

Our Vision

*To be the best community hospital
and health system in New England.*

Our Leaders

Business Leaders, Community Members and Our Employees

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Vice President

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Secretary/Treasurer

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Department of Surgery

Mark N. Messier, MD, Chairman
Department of Medicine

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Member at Large

Daniel M. Foley, MD
Member at Large

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J. Christian Higgins, MD
Cardiology

James N. Rademacher, MD
Diagnostic Imaging

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Emergency Medicine

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Family Practice

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General Surgery

David S. Tager, MD
Internal Medicine

Leon S. Mensch, MD
Laboratory Medicine and Pathology

Patrick F. Keenan, MD
Obstetrics and Gynecology

Melbourne D. Boynton, MD
Orthopaedics

Michael E. Scovner, MD
Pediatrics

Buddy Lile, MD
Psychiatry

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VP Medical Staff

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VP Corporate Development

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Associate VP/Chief Information Officer

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Hospital Director of Surgery

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VP Clinical Operations

Mary T. Nemeth
VP Corporate Support Services

Edward T. Ogorzalek
VP Fiscal Services/CFO

Domenic M. Serino
Associate VP, Rutland Health Foundation

Robert H. van Heiningen
Associate VP Human Resources

Dorie Ward, RN
Interim VP Hospital Services/CNO

2005-2006 RRHS/RRMC Board of Directors

Michael McCormack
RRHS Chair

Mary E. Moran
RRMC Chair/RRHS Vice Chair

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RRMC Vice Chair

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Ron J. Cioffi

John C. Collins

Therese M. Corsones, Esq.
Diane Davis

Joseph Giancola

Victor J. Pisanelli, Jr., MD

Stuart F. Silloway, Jr.

Roshan Siva, MD

Linda Stempek

Victoria P. Young

Advisory Staff Members

Nicole Duhamel, RN
Bruce Howard



Report to the Community

The fiscal year ended September 30, 2005 was a challenging one for Rutland Regional Medical Center as it was for health care institutions throughout the United States. Overall costs for hospitals continue to grow much faster than reimbursements, especially from government payors. This is putting pressure on institutions to eliminate unprofitable services and to compete more aggressively for patients requiring services that contribute more to the bottom line. We are pleased that we have not been forced to reduce services here at Rutland Regional, but our concern about the future is great.

Rutland Regional Medical Center has adopted four strategic goals to lead us to a successful future. They are:

- **Quality:** Rutland Regional Medical Center will demonstrate quality and outcome results which exceed available national benchmarks for the following dimensions of care – Safety, Effectiveness, Clinical and Satisfaction.
- **Growth:** Grow new programs our community and patients need. Grow current programs where potential exists.
- **Finance:** Maintain highly productive, financially stable organization with sufficient resources to meet the community's needs.
- **Employer of Choice:** Become a magnet employer for the best staff available.

This Annual Report is dedicated to, and focuses on, the many contributions of our staff toward achieving those objectives. Ultimately, our biggest asset, and frankly, our biggest investment, is our staff. Very early in this report you will find a list of staff members that were recognized this year for their years of service. I never cease to be humbled by the number of folks with many, many years of service to our organization and our community. These people have, year after year, overcome obstacles and demanding work schedules to be sure that everyone who comes to Rutland Regional Medical Center for care is treated with compassion, dignity and respect. We are also fortunate to have the generous help of over 350 volunteers who gave more than 50,000 hours of service to our patients during this past year. It is through this dedication that Rutland Regional is able to provide that “hometown touch” for which we are known.

I often receive letters from patients who have visited Rutland Regional Medical Center for one reason or another. Quite often these letters come from people who were visiting our area from other parts of the country and were amazed that we would deliver our services in such a friendly, caring way. They often remark they wish their hospital was like Rutland Regional.

This past year I received several letters that are still fresh in my mind. I received a letter from a woman with a rare respiratory disease. A physician with a national reputation, a friend of her family, reviewed the care she was given at Rutland Regional Medical Center. He was simply amazed at the quality of our physicians, our nurses, our respiratory therapists and our technology. The patient and the physician from away both know that we saved this woman's life. They both believe that, in many hospitals, this would not have been the case.

And there was another letter from a husband who thanked us for the simple things we do every day. We had cared for his wife as she gave birth to their new baby daughter. We did it, he said, with warmth, with tenderness and with compassion. These are simple, natural things from our point of view, but were extraordinary to him.

This year has been marked by our nation's military forces being deployed to several places around the globe. Rutland Regional Medical Center was deeply affected by this in 2005. Several of our staff members were called to active duty to serve their country. We are grateful for their service to our nation.

The Rutland Regional Medical Center staff was deeply saddened by the death of Christopher Chapin in Iraq on August 23, 2005. He was distributing voting information when he was struck down by a sniper. Chris was a Security Officer here at the hospital working much of the time on the third shift. Chris's wife, Paula, is a member of the Rutland Regional Medical Center staff as are several members of Chris's family. We will long remember his service to our hospital and to his country. He is deeply missed.

Our achievements toward our **QUALITY** goal this year are significant. One of our main efforts has been to try to improve the speed with which we deliver our services to the patients. Our overall objective is to make people well as quickly as possible so that they can be discharged safely to complete their recovery. To

accomplish this goal, it is vitally important to coordinate the various services the patient requires as closely as possible. This year we have examined that coordination of services quite carefully and are working to eliminate delays as much as possible. This process begins in the Emergency Department and continues through discharge. In hospital speak, we call this “patient flow”. What is important to the patient is that they receive care in a timely fashion. We measure our success in this effort by “average length of stay” or, how long between arrival and discharge. We are convinced that improvements in this statistic suggest we are making good progress with this program.

Although our objective is to improve the care for the patient, shortening the length of stay is also helpful to our financial success. Medicare reimburses us, for a particular diagnosis, the same amount of money, regardless of how long the patient is in the hospital. While some patients need to be in the hospital longer than the government allows, and some are actually in the hospital less time than the government allows, our history is that our average length of stay was actually longer than our peers. This patient flow improvement will bring us more in line with what is achieved elsewhere and nearer that which the government allows.

Rutland Regional Medical Center is certified by the Joint Commission on Accreditation of Health Care Organizations (JCAHO). Our review went very well in 2005 with little of significance noted by the examiners. Nonetheless, the staff works very hard to maintain our

operations in accordance with the requirement of JCAHO and we are pleased that those efforts were recognized.

Patient Satisfaction is a very important indicator of our progress toward achieving our Quality Goal. We utilize the Press Ganey system to survey our patients about the quality of care they received. Patients are randomly surveyed on an ongoing basis and we review the results of those surveys online as they are received. The results are benchmarked against hospitals across the United States. We also review our scores compared to other hospitals in the Northeast and in New England. Our goal is to be in the top ten percent of hospitals in the United States. Several of our departments are already in this range. Others have some way to go and are working constantly to achieve this level of success. The Inpatient Rehabilitation Unit was recognized by Press Ganey this year with the Compass Award for outstanding improvement in patient satisfaction. This is the second such Award received here at Rutland Regional as the Diabetes and Endocrinology Center received the Award last year. We are developing a systematic approach to planning for improvements in Patient Satisfaction and for implementing necessary changes in our performance.

Training is important to our pursuit of Quality. Currently over 115 of our nurses hold specialty certifications for services offered at our hospital. This is beyond the usual training required for licensing in the profession. The number of nurses who qualified for these special designations increased by 32% this year.

We are committed to proper **GROWTH** in areas which will improve our bottom line or in areas that are underserved in our region. Careful planning is critical to identifying the areas where growth is needed. This past year we reviewed our planning process and made some significant changes. Notably, we increased the involvement of our Medical Staff in the planning process. We have instituted a strategic planning session to be held twice a year which, along with representation from the Medical Staff, is attended by all the members of the Board of Directors and the Leadership Council of senior managers. At this meeting we review the major elements of our direction with special emphasis on capital purchases and facility expansion.

At the planning retreat held this past January, we reviewed plans for a major expansion of the hospital. Proposed were a renovation of the Diagnostic Imaging Department and a new Medical and Oncology Inpatient unit. The current Medical and Oncology unit is part of the hospital that was opened in 1969. By the time the new unit is ready to open, the existing unit will be 40 years old. Changes in patterns of care have resulted in the average inpatient being much sicker than was the case when the unit was first opened. To efficiently care for these patients, much more square footage is required than was anticipated those many years ago. Our Diagnostic Imaging area is also among the oldest in the building. The demand for these important services requires us to expand the equipment and patient waiting areas. The addition of new procedures would significantly increase the number of patients utilizing these services. At first, we considered each of these projects individually and tried to “phase” their construction. In the process, it became apparent that this would add unnecessary cost to the overall project and





unacceptable delays. It was decided that these two projects should go forward simultaneously.

As you may well imagine, an expansion of this magnitude is not cheap. Our current estimate is that the total cost of the project will be just over \$50million. This project will require extensive permitting. We will have to obtain a Certificate of Need from the State of Vermont. In accordance with a recent change in the regulation, we will have to apply for a Certificate of Need to proceed with the work necessary to apply for a Certificate of Need. Given the time required to obtain the necessary permits and finish the planning, it is unlikely that any construction would begin before 2008.

In order to take on the additional debt that this project would create, we will need to build sustainable Annual Net Operating Income levels of at least 3.5% of Net Revenues. This is higher than we have recently achieved and represents a challenge for senior management. Management and the Board of Directors have agreed that we will need to demonstrate the ability to achieve these increased margin levels prior to beginning construction. Further, we are committed to raising \$5million dollars through the Rutland Health Foundation prior to the commencement of construction. To be successful, we will need the support of the entire community.

Rutland has been blessed with a fine, dedicated Medical Staff for many years. Many of these physicians were born in Rutland and came back here to practice medicine. They, and others, have made wonderful contributions to our region. Retirements in the past few years have robbed us of a number of great physicians. Several others plan to retire in the near future. Replacing these physicians, along with meeting the demand for additional medical services from an aging population, has made the recruitment of new physicians to our area a critical effort for our staff. Rutland Regional has made a commitment to aid in the recruitment of physicians for the community-at-large as well as for physicians within its employment. We offer potential candidates income guarantees, tuition repayment assistance, moving allowances, and payment of recruiter fees if they will come to our area. It may cost as much as several hundred thousand dollars to secure one physician for our region.

This year, we have been successful in recruiting a number of new providers. New physicians in the fields of Emergency Medicine, Psychiatry, Orthopedics, and a Hospitalist have agreed to come here. We are continuing to recruit in several specialties including Orthopaedics, Urology, Ophthalmology, and Primary Care.

Minimally Invasive Surgery is an area where strides are being made to change the way we deliver care to our patients. This year, Rutland Regional Medical Center approved the renovation of an operating room to better accommodate these technically advanced surgeries. With these techniques, the patient usually experiences a shorter hospital stay, a quicker recovery time, less pain, fewer complications, and a faster return to everyday activities. Procedures currently being performed at Rutland are in the areas of obstetrics/gynecology, general surgery, orthopaedics, otolaryngology, neurosurgery, urology, and radiology.

We expect the newly-renovated operating suite to be open by early fall 2006.



As the general population ages, new modalities of delivering health care will become important to our mission. This past year we began to introduce a Palliative Care program at Rutland Regional. This program is designed to help patients with chronic conditions improve their quality of life and to make long-term plans for their care and treatment. A full-time registered nurse is on staff to work with patients who are referred by their primary care physicians. This program is steadily growing and being utilized by several physicians in the area for their patients who qualify.

At first blush, it would appear that Rutland Regional Medical Center has no competition. A closer look, however, reveals a different picture. Patients for elective and non-emergency procedures have a wide range of choices for care, including Fletcher Allen Health Care and Dartmouth Hitchcock. Other choices include specialty centers in Boston, Albany and New York City. Certainly there are services, such as open heart surgery, which we do not perform here. We hope that we can offer a smooth transition for these patients from care at the local level to these highly specialized centers. However, there are those who choose to leave the area for services which we provide right here. We think that, where possible, it is better for people to

receive health care as close to home as possible. In this sense, it is important that the residents of the area receive complete and up-to-date information about the services we provide and the technology we possess. Our marketing programs are designed to deliver that message. We are pleased that our marketing efforts have been recognized by the New England Society for Health Care Communications with 20 awards for Excellence in the past four years. These include two top awards for our locally-produced television commercials. We compete against the largest and best health care institutions in New England for the awards and are among the most highly recognized.

Maintaining our **FINANCIAL STRENGTH** is the third major goal for our organization. Rutland Regional Medical Center continues to produce small operating margins each year. This past year that amounted to 2.9% of revenues. We continue to see, however, increasing pressures on margins from reimbursements growing slower than costs. The largest single expense to our organization is for salaries and benefits. We systematically check our wage and benefit package against that being offered by other healthcare organizations in our state and region. We want to maintain a



package that is very competitive with the other community hospitals with which we compete for employees. We were very satisfied that we were where we needed to be relative to salaries, but we were quite a bit above the competition in our benefit offerings. In fact, our benefit package was the most expensive in Vermont. We were able to determine that much of this difference was due to a very generous retirement package.

When we began to plan for the fiscal 2006 budget, it became clear that we could no longer afford to support this package. After very careful analysis, we announced that we would change our defined benefit retirement plan to a defined contribution plan. After discussions with our staff members and negotiations with the nursing Union, we settled on a plan that would save the organization \$4.8million per year. We believe that this change was absolutely necessary to maintain the long-term viability of our hospital, and we recognize the contributions made by our staff members toward this savings. It was a most difficult decision and process, but something we had to do.

Given the changes in reimbursement and increasing costs, Rutland Regional Medical Center will need to involve the members of our community more actively in the accomplishment of our objectives. Three years ago, Rutland Regional Medical Center, along with the Rutland Area Visiting Nurse Association & Hospice and Rutland Mental Health, formed the Rutland Health Foundation to help our three organizations increase philanthropic fund raising and to pursue grants from local and national sources. The Foundation has completed a successful capital campaign for RAVNAH of nearly \$1million and has obtained numerous grants to support our efforts. The Foundation will soon turn its attention to raising the \$5million mentioned earlier for the expansion and renovation of our hospital. I ask all of you in our community to respond to this appeal when it begins. We will need people to help in all aspects of this work. We hope you will step forward when the call goes out.

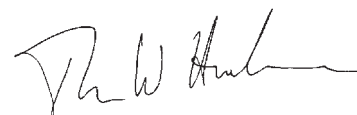
Being an **EMPLOYER OF CHOICE** remains one of our main goals. Rutland Regional Medical Center is in a very competitive market for employees. We know that our employees have a choice about where they work. We know that our salary and benefit package is competitive within our region. Replacing staff members who leave is very expensive and we pay special attention to the staff members we already have. Beyond our salary and benefits package, we offer a very extensive educational program, both at RRMCMC and at outside institutions for our staff members to pursue their educational objectives. Both Bachelors and Masters level programs are offered here at RRMCMC by Vermont colleges.

We continue to pursue the work toward improving the organization through systematic process review and modification. We are measuring our progress toward improvement by utilizing the Baldrige Award system. A major element of that process is to align the objectives of all our departments and individual staff members with the objectives of the overall organization. Our emphasis this past year was to align the plans for each department with the Corporate Action Plan. Leaders were incentivised to develop a strong plan and then to execute the plan in a successful manner. That plan will be extended to all staff members in the future.

Much has been written this past year about the efforts of the Vermont Legislature to solve a perceived "Health Care Crisis". We need to remember, first, that Vermont has one of the lowest cost health care systems, per capita, in the United States, one of the highest rates of its citizens being covered by health care insurance in the United States, and one of the healthiest populations in the United States. While it is important that the uninsured (*approximately 60,000 people*) have access to health care, we should not destroy one of the strongest systems in the country in the process. One of the biggest problems facing the Legislature is that people are working on two separate problems. Some are trying to guarantee access to health care for all. Some are trying to reduce the cost of health care to the society in total. Some people are trying to do both! The only result from increasing access and reducing cost is to drastically reduce the quality of health care within the system. With the dramatic increase in technology and pharmacology in our system, along with the aging of the baby boom generation, the reduction in the cost of health care to the system is just not a realistic goal. Neither is reducing the cost of health care per capita.

If the government wants to reduce the cost of health care quickly and dramatically to the people and employers who have insurance, it can begin to pay the true cost of the health care it purchases. If Medicare and Medicaid were to pay the cost of the health care purchases from Rutland Regional Medical Center, we could reduce our rates to all the other payors by 32%. This would not reduce the total cost of health care to the system, but it would fairly distribute the cost to those who are using the services. Additionally, allocating resources to deal with people with chronic disease has the potential to reduce the cost of health care to the system. Today, people with chronic conditions, such as diabetes, absorb as much as 80% of the total health care spending in the United States. In a similar vein, we need to encourage healthy life styles in all people, perhaps by offering lower health care premiums to those who meet certain criteria.

I would close by offering the gratitude of the organization and the entire community to the great folks who work or volunteer here at Rutland Regional Medical Center. With over 1,300 employees and more than 350 volunteers who donated more than 50,000 hours of work to our institution, we have a great group of people dedicated to providing the very best health care possible to the residents of this region. Our most sincere thanks to them all.



Thomas W. Huebner, *President*
Rutland Regional Medical Center and Rutland Regional Health Services



Service Anniversaries

Rutland Regional is Proud of Our Long-Term Employees of Choice!

35 Years

Florence Williams	Laboratory
Kathleen Ledo	PACU
Dianne Joyce	Patient Accounting
Linda McElhinney	Risk Management
Alice Choiniere	Women & Children's

30 Years

Donna Thurston	Case Management
Patricia Popovitch	Case Management
Betty Wos	Emergency Services
Nancy Snow	Emergency Services
Katherine Lamontagne	Intensive Care
Marlene Pearson	Laboratory
Pamela Roberts	Women & Children's

25 Years

Lorraine Chrystal	Breast Care Clinic
Anne Ruby	Case Management
Susan Haviland	Case Management
Cynthia Senecal	Definitive Care
Pamela Jackson	Diagnostic Imaging
Claudia Courcelle	Education
Steven Hazelton	Education
Kathryn Hennessey	Emergency Services
William Bruce	Environmental Services
Alicia Smith	Fifth Floor
Barbara Woodard	Fifth Floor
Ivy Dixon	Fifth Floor
Lydia Cannon	Human Resources
Katherine Smith	Intensive Care
Susan Hiers	Intensive Care
Nancy Meszaros	Nursing Support
Denise Taylor	Operating Room
Nancy Wiles	PACU
Sheila O'Hara	PACU
Ramona Mayhew	Performance Improvement
Mary Ruth	Registration
Dale Bardin	Surgical Care
Mary Kay Cavanaugh	Transcription

20 Years

Suzanne Woodbury	Case Management
Kelly Carter	Diagnostic Imaging
Sandra Scott	Diagnostic Imaging
Shirley Bowen	Diagnostic Imaging
Michael Brown	Emergency Services
Joanne Holler	Fifth Floor
William Hammond	Fifth Floor
Rita Hansen	Intensive Care
Marcia Bassett	Materials Management
Jennifer Hollander	Occupational Therapy
Thelecia Molaski	Operating Room
Ann Williams	Registration
Rosamond Raycraft	Registration
Diane Euber	Rehab Nursing
Marilyn Trapeni	Rehab Nursing
Catherine Shull	Sterile Processing
Barbara Blanchard	Surgical Care
Lynn Brooks-Miner	The Meadows
Constance Morgan	Women & Children's

15 Years

Thomas Huebner	Administration
Annamarie Fiske	Ambulatory Care
Mary Ellen Mullen	Ambulatory Care
May Connolly	Cardiopulmonary Services
Michele Weeks	Diagnostic Imaging
Susan Sebasky	Diagnostic Imaging
Tracy Bellomo	Diagnostic Imaging
Catherine Schneider	Emergency Services
Linda Hampton	Emergency Services
Wenda Mattison	Emergency Services
Cynthia Tracey	Environmental Services
Judi Fox	Finance
Carol Gorruso	Intensive Care

Barbara Robinson	Laboratory
Gladys Notte	Laboratory
Suzanne Lanzillo	Laboratory
Lawrence Corbett	Materials Management
Mary Nadler	Oncology Services
Deborah Hough	Operating Room
Michele Diekel-Bruce	Operating Room
Tisa Farrow	Operating Room
Linda Hillary	Physical Therapy
Barbara Hurlula	Rehab Nursing
Deborah Hutchins	Rehab Nursing
Dianne Hubbard	Rehab Nursing
Connie Stone	Sterile Processing
Barbara Havelka	Surgical Care
Carol Egan	Surgical Care
Delores Start	Surgical Care
Sarah Laderoute	Surgical Care
Joy Maclauren	Transcription

10 Years

Deborah Cimonetti	Cardiopulmonary Services
Deborah Weaver	Definitive Care
Kenneth Mar	Pulmonary Services
Philip Lapp	Diabetes Clinic
Crystal Lamarche	Diagnostic Imaging
James Callan	Diagnostic Imaging
Stephanie Catterton	Diagnostic Imaging
Colleen King	Emergency Services
Janice Austin	Emergency Services
Stephanie Briggs	Emergency Services
Vera Power	Emergency Services
Linda Albertazzi	Endoscopy
Mary Canfield	Endoscopy
Kevin Wood	Engineering & Maintenance
Helen Wagner	Fifth Floor
Holly Wescott	Fifth Floor
Carol Soulia	Health Information
Lisa Mancini	Health Information
Jolana Washburn	Intensive Care
Rene Greene	Killington Clinic
Brian Cameron	Laboratory
Karen Bell	Laboratory
Jill Jesso-White	Marketing/Public Relations
Darren Childs	Materials Management
Lorna Davis	Materials Management
Kimberly Johnson	Nursing Support
Laurie Perry	Oncology Services
Marci Matson	Operating Room
Michele Lapp	PACU
Sarah Pulcer	Physical Therapy
Thelma Satayavinit	Rehab Nursing
Timothy Barrett	Security
Darlene Taylor	Surgical Care
Donna Callahan	Surgical Care
Sally Netsch	Surgical Care
Bruce Bodemer	The Meadows
Lesla Teer	Transcription
Amy Pfenning	Women & Children's

5 Years

Nancy Canfield	Ambulatory Care
Pamela Williams	Cardiac Rehab
Lori Tarmy	Cardiopulmonary Services
Mary White	Cardiopulmonary Services
Robert Knox	Cardiopulmonary Services
Stephen White	Cardiopulmonary Services
Lori Pawlaczky	Case Management
Jason Kerson	Definitive Care
Mary Marchinkoski	Definitive Care
Robert Maranville	Definitive Care
Roxanne Ebbighausen	Definitive Care
Jeannie Stimpfel	Diabetes Clinic
Barbara Monson	Diagnostic Imaging
Kymerly Wentz	Diagnostic Imaging
Lynn Vardy	Diagnostic Imaging
Michael Nagar, Jr.	Diagnostic Imaging

Chris Cornelius	Emergency Services
Christine Stage	Emergency Services
Dauna Jo Ferguson	Emergency Services
Holly Dunn	Emergency Services
Kimberly Pitts	Emergency Services
Laurie Gilligan	Emergency Services
Wendy Loomis	Emergency Services
Lois Curtiss	Endoscopy
Corey Stiles	Environmental Services
Kara Ducharme	Environmental Services
Nancy Grieder	Fifth Floor
Bruce Howard	Finance
Carol Munger	Finance
Jodie Keith	Finance
Kathleen Clark	Finance
Mark Duhamel	Finance
Michael Brochu	Finance
Susan Delancey	Finance
James Greenough, Jr.	Food & Nutrition Services
James Nabozny	Food & Nutrition Services
Jessica Barrows	Food & Nutrition Services
Mary Hodgdon	Food & Nutrition Services
Patricia Clark	Food & Nutrition Services
Rebecca Cioffi	Food & Nutrition Services
Seth Savageau	Food & Nutrition Services
Shirley Lee	Food & Nutrition Services
Darcy Berry	Health Information
Kathleen McVey	Health Information
Lorraine Davies	Health Information
Mandy Rigler	Health Information
Maureen Vitagliano	Health Information
Susanne Blanchard	Health Information
Susan Blish	Hospitalists
Rick Twigg	Information Systems
Robert McGinness	Information Systems
Scott Mullins	Information Systems
Chanda Kerber	Intensive Care
Kimberly Cotto-Shea	Intensive Care
Marcia Bergen	Intensive Care
Pamela Brooks	Intensive Care
Allison Panagini	Laboratory
Barbara Gammon	Laboratory
Eric Handley	Laboratory
Mary Ellen Decelles	Laboratory
Roxanne Tresch	Laboratory
David Churchill	Materials Management
Bonnie Lucas	Nursing Support
Lauren Bailey	Occupational Therapy
Colombe Colvin	Oncology Services
Sheela Martel	Oncology Services
Joann Flis	Operating Room
Mary Ellen Rudolph	Patient Accounting
Paula Beaudry	Patient Accounting
Cori Southwick	Pharmacy
Dennis Wilberg	Pharmacy
Carla Therriault	Physiatry
Susan Barton	Physiatry
Dana Carroll	Project Management
Susan Pickering	Psychiatric Services
Brenna Jepson	Registration
Janice Coolidge	Registration
Lisa Spooner	Rehab Nursing
Tracy Kapusta	Risk Management
William Colton	Security
Lisa Juckett	Surgical Care
Elinor Patch	Telecommunications
Terese Woodward	Transcription
Bonnie Parker	Vermont Orthopaedic Clinic
Donnaleen Farwell	Vermont Orthopaedic Clinic
Heather Hunter	Vermont Orthopaedic Clinic
Mary Costa	Vermont Orthopaedic Clinic
Suzanne Look	Vermont Orthopaedic Clinic





New Medical Staff Appointments

February 2005 – February 2006

Brandon H. Ayre, MD
Emergency Medicine

Anthony J. Febles, MD
Internal Medicine/Hospitalist

Julie A. Foster, MD
Family Practice

Steven W. Gordon, MD
Family Practice

Stefanie Ann Huff, MD
Emergency Medicine

Janet M. Kirwan, MD
Cardiology

Michael A. Kolinsky, MD
Emergency Medicine

William L. Kraus, MD
Internal Medicine/Pulmonology/Critical Care

Allison Lindman, MD
Emergency Medicine

Mark Logan, MD
Psychiatry

Daniel J. O'Rourke, MD
Cardiology

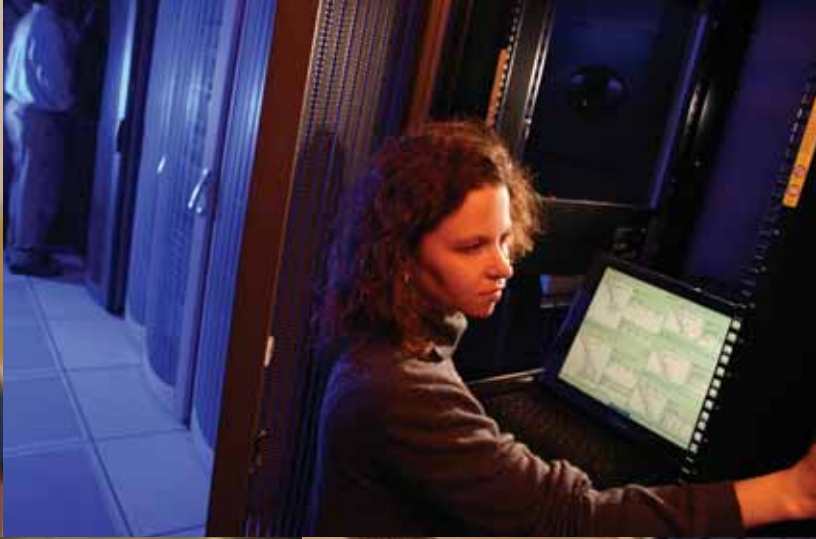
James W. Roberts, MD
Internal Medicine/Hospitalist

Timothy F. Rockcross, MD
Psychiatry

Emmanuel N. Soultanakis, MD
GYN Oncology/Gynecology

Jonathan Weker, MD
Psychiatry

Cheung Wong, MD
GYN Oncology/Gynecology







Rutland Regional Volunteers

During 2005, 368 Volunteers Donated 50,458 Hours of Service to RRHS & RRMC

- 118 area teens were introduced to healthcare career opportunities through volunteer service
- 53 adults and 47 teens started volunteering at RRHS this year
- In April, 32 adult volunteers and 40 teen volunteers will receive recognition pins commemorating milestones of service
- Volunteers completed 116,436 errands, allowing our staff to spend more time with our patients
- Several new volunteer positions directly impacting patient satisfaction were created
- Community volunteers maintained the hospital Memorial Gardens while the Rutland Garden Club and the Northeast Elementary School planted hundreds of bulbs
- Trauma Support Team volunteers provided compassionate assistance to families at times it was needed most

Adult Volunteers

Phyllis Abatiell
Lori Abelman
Donna Abramov
Peter Abramov
Ardena Ackerman
Dick Adams
Bobbi Adams
Terry Adams
Jane Altobell
Phyllis Aronson
Cairle Ault
Barbara Austin
Pauline Austin
Wayne Bacon
Pat Baird
Charlie Baker
Gail Baker
Pat Baker
Ruth Baker
Bill Bannerman
David Baril
Joanne Barrett
Kathy Barrett
Lorna Battles
Janet Beanland
Florence Beatty
Susannah Bell
Faith Berg
Anne Bergen
Chris Beriau
Dick Beriau
Kay Blanchard
Donna Blight
Bill Boden
Nancy Boden
Ned Bogar
Jim Bogdanovitch
Paul Bove
Jim Britt
Arlene Brown
Lorraine Brown
Terry Bruce
Pat Burns
Gladys Burris
Jean Butcher
Mike Butto
Pat Callahan-Smith
Lorraine Cauty
Red Carboneau
Rich Carlson
Colleen Carson
Maureen Casella
Marion Chapman
Sophia Chrusciel
Eleanor Cioffi
Lise Cioffi
Edith Clark
Kurt Clarkson
June Coburn
Margaret Conboy
Marie Connolly
Irene Cook
Julie Cooper
George Costello
Shirley Cota
Diane Courcelle
Helena Culver
Evie Davis
Mary Davis
Gladys DiGangi
Leo DiGangi
Rene Doiron*
Kathleen Doon
Tom Doon
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RRMC Commitment to Excellence

RRMC Receives Recognition from the Vermont Council for Quality

On its "Quest to be the Best", RRMC remains committed to utilizing the Baldrige framework as its roadmap. In February 2005, Governor Jim Douglas presented Rutland Regional with a "Commitment to Excellence" Award at the Vermont Council for Quality's 2005 Annual Recognition and Award Ceremony. The Award, which recognizes Vermont organizations on the journey to excellence, came after RRHS' second organizational assessment using the Baldrige Criteria for Performance Excellence. A team of 10 RRHS employees and an internationally-recognized external examiner conducted the assessment. The team included Sue Barton, Maureen Chamberlain, Richard Dungan, Thomas Hartigan, Mary Ellen Kilgallen, Kathy Letendre, Linda McKenna, Scott Richards, Barbara Robinson, Caroline Schneider and David Hutton (*external*). In order to conduct a thorough assessment, the team interviewed and gathered information from over 180 members of RRHS, including members of the Board of Directors, physicians, leaders and staff.



In addition, three members of Rutland Regional's assessment team (*Barbara Robinson, Scott Richards and Kathy Letendre*) attended training to retain their certification in 2005 as Vermont Baldrige examiners. These individuals may now be called upon to conduct organizational examinations around the State. Additionally, Barbara Robinson was selected by the Department Of Veteran's Affairs to serve as one of their national examiners for the Carey Award program, which utilizes the Baldrige criteria. She traveled to Washington, DC in April 2005 to serve on a team conducting an examination of an organization under consideration for the prestigious Carey Award.

Rutland Regional Recieves Second Press Ganey Patient Satisfaction Award



The Inpatient Rehabilitation Unit was recognized in October by Press Ganey this year with the Compass Award for outstanding improvement in patient satisfaction. This is the second such Award received here at Rutland Regional as the Diabetes and Endocrinology Center received the Award last year. We are developing a systematic approach to planning for improvements in Patient Satisfaction and

for implementing necessary changes in our performance.

Asthma Clinic

In August 2005, Rutland Regional's Asthma Clinic received national listing from the Asthma Health Outcomes Project (AHOP) at the University of Michigan School of Public Health. The RRMC program was the first Asthma Clinic in Vermont to be recognized and has been included in the review of asthma programs for the US EPA.

Centers of Excellence

As part of our continued efforts to promote unsurpassed quality and patient satisfaction within our hospital, Rutland Regional Medical Center established a goal to have 12 programs receive national certification by 2007. Below are the 10 centers of excellence that are held to the highest levels of accountability.

Cardiac Rehabilitation

Cardio and Pulmonary Lab

Community Cancer Center

Diagnostic Imaging – Mammography

Diagnostic Imaging – MRI

Diagnostic Imaging – Ultrasound

Laboratory Medicine

Respiratory Care Services

Rutland Region Diabetes & Endocrinology Center

The Sleep Center



RRMC Auxiliary

Supporting Health in the Rutland Community



The most significant portion of funds raised by the Auxiliary comes from its thriving Gift Shop. Located at the North entrance of the Hospital, the Gift Shop is stocked with an impressive array of framed prints, jewelry, plush toys, home accessories, candles, magazines, cards and more. While it is professionally managed, the Gift Shop relies on 20-30 volunteers who run the cash register, display and arrange merchandise, and take inventory. It is an attractive and inviting place to shop for a special gift or to pick up the daily newspaper. Come shop with us, knowing that your purchases help support the Hospital as well!

In addition to operating the Gift Shop, the Auxiliary holds seasonal fundraising sales offering wreaths and poinsettias for the holidays, roses on Valentine's Day, geraniums in the spring, and chrysanthemums in early autumn. Interspersed with these are sales at the Hospital by outside vendors who donate a portion of their proceeds. As well, the Auxiliary receives an important measure of support from individual members, community members and businesses who make contributions each year. These combined efforts have enabled the Auxiliary to cumulatively award \$30,000 to \$40,000 annually to Hospital departments and scholarship recipients.

2005 Scholarship Recipients

- \$2,000: Erin Sienkiewicz, Otter Valley, Physician, Bates, Me
- \$1,500: Alyson Mahar, MSJ, NSG, York College, PA
- \$1,500: Lynsay Felkl, RHS, Radiologist, Clemson, SC
- \$1,000: Lisa Martin, RHS, NSG, UVM
- \$1,000: Kayla Toher, Proctor, Science Research, Gettysburg College

2005 Auxiliary Program Funding:

- \$1,500 to the Tobacco Cessation Program for supplies
 - \$5,000 for the Children's Health & Safety Fair
 - \$1,000 to the Emergency Department for a rocking chair, DVDs, videos and toys
 - \$400 to ET Nursing to convert slides to CDs
 - \$500 to Psychiatric Services for patient services
 - \$2,009 for artwork for Medical/Oncology Unit patient rooms
 - \$1,500 to Social Work for patient services
 - \$800 to Social Work for the Trauma Support Team
 - \$800 to Social Work for the Advance Directives Fund
 - \$1,000 to the Rehab Lymphedema Clinic for un/underinsured patients for compression garments
 - \$2,000 to the Comprehensive Care Clinic for patient services
 - \$5,000 to the Breast Care Program for prosthetic camisoles and breast cancer treatment handbooks
 - \$500 to Physiatry for new spine and shoulder mannequins
 - \$1,600 to PACU for a patient care cart
 - \$1,009 to Kids on the Move for a weighted blanket and Merry-Go-Round
 - \$5,000 for ongoing improvements and expansion of memorial gardens
 - \$2,340 for a power-assisted door from Main Street to the Community Cancer Center and the Testing Center
- Total Funding presented \$31,958**



The Auxiliary Memorial Christmas Tree is a focal point of Rutland Regional's Main Street during the holidays. The Memorial Tree, dedicated to those who have passed away, raised more than \$1,200 this past year to help fund programs and services throughout the RRHS community.

Rutland Health Foundation Highlights

Building Resources for a Healthy Community



We are grateful for the generosity of the many individuals, corporations and organizations that help support the mission of Rutland Regional Medical Center. The following events helped to make a difference in sustaining and enriching the delivery of health care in Rutland County.

- **The Wobbly Barn** Bachelor Auction raises \$7,500 to benefit the educational efforts and community outreach of the Breast Care Program at the Community Cancer Center.
- Rutland Regional Medical Center celebrated its successes and toasted physician of the year, Dr. Peter Upton and Employee of the Year, Gina Vitagliano at the third annual Rutland Health Foundation Grand Parada.
- The Community Cancer Center is a big winner at the **Killington Chamber of Commerce** Poker Tournament. The event raises \$4,000 to benefit the patient assistance fund.
- A very special evening at **Wilson Castle** raises nearly \$600 in vital support for the Community Cancer Center.
- **The Fraternal Order of Eagles Art Ehrman Cancer Fund** through the Rutland Aerie 1001 donates \$5,000 to benefit the educational efforts and community outreach of the Breast Care Program at the Community Cancer Center.
- More than 170 golfers enjoyed a magnificent day at the **Rutland Country Club** with net proceeds from the Rutland Health Foundation Golf Invitational totaling over \$30,000. These funds provide valuable support for the programs and services that enhance the quality and scope of healthcare in our community, and specifically benefited Kids on the Move, pediatric rehabilitation program, the Maternal Child Health education program, and Bridges and Beyond, a volunteer training program.
- For a second year, **Waldron & Rhodes Fine Jewelers** of Rutland donates the proceeds of their raffle of a diamond and sapphire pin to benefit the Breast Care Program.
- **Citizens Bank** spreads holiday cheer by delivering limited edition teddy bears to be distributed to children in the Woman and Children's Unit.



RRMC Employee of the Year Gina Vitagliano (center) celebrates with family at the 2005 Grand Parada



Limited edition teddy bears from Citizens Bank bring holiday cheer to patients on the Women's & Children's Unit



Orthopaedic Health Services team and 31 other teams enjoyed a day of golf.

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A Special Thanks to All Our Benefactors

Gifts from \$5,000 and above

Rutland Aerie 1001 Fraternal
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Wobbly Barn

Gifts from \$1,000

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We have made every effort to recognize our donors and honor their wishes. Occasionally a name is unintentionally omitted from this list. If we have missed you, please accept our apologies and kindly notify the Rutland Health Foundation at 802.747.3634 so we can make it right.

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How You May Give

You may designate your gift to support any of our programs or you may make your gift "unrestricted," allowing the hospital to apply your funds where they are most needed.

Gifts can be made as cash or in one of the following planned gifts: charitable gift annuity, charitable remainder trust, estate bequest, life insurance policy, living trust or will.

For more information, or to make a gift, contact Dom Serino, VP & Executive Director at 802.747.6598.

Special Event Sponsors:

The key to our special events' success is the individual and corporate sponsors who generously donate their time and resources to the Rutland Health Foundation. It is their generosity that makes a difference to the lives of thousands of Rutland County residents each year.

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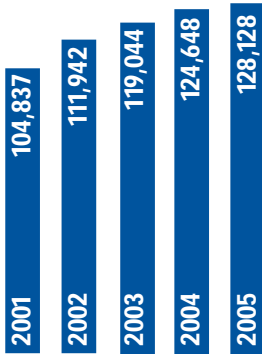
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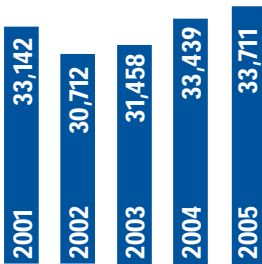
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Financial Strength



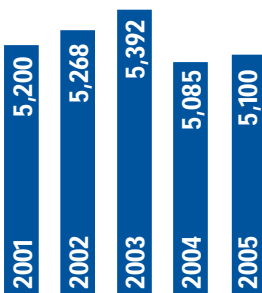
Outpatient

RRMC's outpatient encounters per year have increased substantially in comparison to 2003.



Inpatient

Inpatient days at RRMC numbered more than 33,000 at the close of fiscal year 2005.



Surgical Procedures

During Fiscal Year 2005, RRMC provided \$2,059,264 in free care to patients in financial need.

Rutland Regional Medical Center

Balance Sheet

	2005	2004
Assets		
Current Assets	24,780,200	34,104,388
Property Plant & Equipment, net	49,926,980	49,588,984
Other Assets	10,565,523	9,185,236
Assets Whose Use is Limited	63,026,912	51,509,814
Total Assets	\$148,299,115	\$144,388,422

Liabilities & Net Assets

Current Liabilities	16,418,930	21,386,874
Pension Liabilities	14,220,213	11,433,135
Other Liabilities	4,802,980	4,825,710
Long-term Debt, net current portion	30,110,286	31,180,348
Net Assets	82,746,706	75,562,355
Total Liabilities & Net Assets	\$148,299,115	\$144,388,422

Statement of Revenue & Expenses of General Fund

	2005	2004
Gross Revenue	212,353,174	198,504,454
Less: Contractual Allowances <i>(primarily Medicare & Medicaid)</i>	77,847,601	72,319,944
Net Revenue	134,505,573	126,184,510
Other Revenue	2,441,729	1,983,042
Total Revenue	136,947,302	128,167,552
Expenses	133,008,982	123,067,917
Income (Loss) from Operations	\$3,938,320	\$5,099,635

Non-operating Gains (losses)	1,543,443	5,426,432
Excess of Revenues and Net Gains over Expenses	\$5,481,763	\$10,526,432

Financial Strength

Rutland Regional Health Services

Combined Balance Sheet

(RRHS, RPMC, HEI, RPPG, VOC & JTBCHT)

	2005	2004
Assets		
Current Assets	26,760,400	34,219,166
Property Plant & Equipment, net	59,020,016	59,260,048
Other Assets	5,373,776	5,425,734
Assets Whose Use is Limited	78,150,755	65,663,501
Total Assets	\$169,304,947	\$164,568,449

Liabilities & Net Assets

Current Liabilities	17,903,619	21,374,731
Pension Liabilities	14,220,213	11,433,135
Other Liabilities	4,802,980	4,825,710
Long-term Debt, net current portion	33,703,365	35,032,848
Net Assets	98,674,770	91,902,025
Total Liabilities & Net Assets	\$169,304,947	\$164,568,449

Combined Statement of Revenue & Expenses of General Fund

(RRHS, RPMC, HEI, RPPG, VOC & JTBCHT)

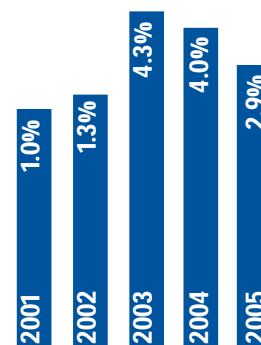
	2005	2004
Gross Revenue	220,714,940	212,530,969
Less: Contractual Allowances <i>(primarily Medicare & Medicaid)</i>	82,114,290	78,366,000
Net Revenue	138,600,650	134,164,969
Other Revenue	3,943,304	2,604,084
Total Revenue	142,543,954	136,769,053
Expenses	142,234,090	134,699,397
Income (Loss) from Operations	\$309,864	\$2,069,656

Non-operating Gains (losses)	3,536,336	8,508,307
Excess of Revenues and Net Gains over Expenses	\$3,846,200	\$10,577,693



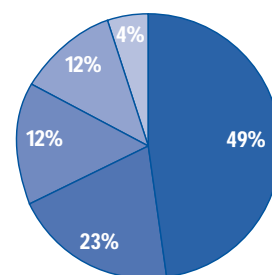
Cash on Hand

The number of days RPMC could meet its average daily cash expenses without collection of any payments. Our 2007 goal is 220 days.



Operating Margin

We must develop sufficient resources to purchase necessary equipment and build facilities.



- Medicare
- BC/BS
- Commercial
- Medicaid
- Other

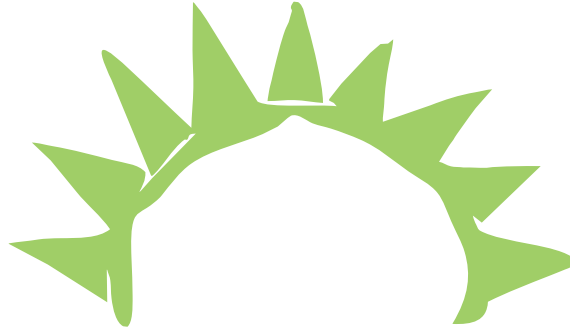
Payment Sources

Medicare accounts for nearly 50% of the payments RPMC receives.

Rutland Regional Medical Center's Fiscal Year 2005 accounting records were audited by BKD, Certified Public Accountants. Complete reports are on file and available for inspection. On request, this publication is available in an alternate format. Rutland Regional Health Services provides convenient physical access to all of its facilities.

James T. Bowse Community Health Trust

Creating a Healthier Community



The James T. Bowse Community Health Trust has been funding community-based programs for nine years. The 31 programs funded are projects that meet an identified health-related need in the community. Over \$2.2million has been awarded in an effort to improve access and affordability of health and human services, increase prevention efforts to promote healthier lifestyles, and to reduce substance abuse.

This year the Bowse Health Trust awarded three programs a total of \$165,000 over the next three years. The three projects that were chosen include:



Triple Play Program

hosted by the Boys and Girls Club of Rutland County (\$60,000)

Triple Play will teach youth how to make healthier choices and live healthier lives. The components of the program target the mind, body and soul. The goal is to increase physical activity levels, improve nutrition habits and promote positive self-esteem.

Quest for Wellness

hosted by Rutland Southwest Supervisory Union (\$60,000)

This program will promote healthy eating behaviors and increase physical activity for students in this rural supervisory union. Elementary students will participate in the SPARK (*Sports, Play & Active Recreation for Kids*) Program. A registered dietitian will assess nutritional services and assist in implementing improvements. Also, a district-wide nutrition policy will be developed.



Strengthening Families

hosted by Prevent Child Abuse Vermont (\$45,000)

This program will provide parenting programs throughout the year to provide education and support to high-risk families. The goal is to strengthen the families by giving them the tools they need to create safe, healthy, and nurturing environments for their children.



The James T. Bowse Health Trust was developed in 1996 by the Rutland Regional Health Services, the parent company of Rutland Regional Medical Center. The Health Trust provides seed money to fund projects in the Rutland region that are aimed at improving the health status.

Grants are awarded on an annual basis. The cycle starts with a technical assistance program for planning grants. These applications for funds of up to \$1,500 are due on May 1, 2006. Letters of Intent are due on July 1, 2006 and full proposals are due on October 1, 2006. For a copy of the Request for Proposal, call Sarah Narkewicz, Health Trust Director at 747-3770.

Members of the 2005 Health Trust Board of Directors are James Pollock, Ph.D., Chair, Mary Lou Bolt, Vice Chair, Tom Huebner, President, Richard Lovett, MD, Secretary, Ed Ogorzalek, Treasurer, John Mitchell, Lyle Jepson, Martha Coulter, Sandy Cohen, Kevin Loso, and Stuart Silloway.



Rutland Regional Medical Center

AN AFFILIATE OF RUTLAND REGIONAL HEALTH SERVICES

Rutland Regional Medical Center

A Rutland Regional Health Services Affiliate

160 Allen Street
Rutland, Vermont 05701
802.775.7111
www.rrmc.org

Rutland Regional Medical Center Clinics

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8 Albert Cree Drive
Rutland, Vermont 05701
802.775.7844

Pulmonology Services

160 Allen Street
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3902 Killington Road
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