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FALL 2010

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The Hospitalist
Advantage

Where to
Turn When
Seconds
Count

**Charrette
Effect*

The Future of Health
Care in Richmond
and the East End



History of Richmond Community Hospital



The roots of Richmond Community Hospital run deep, originating in the vision of Dr. Sarah Garland Jones, the first woman and African-American to be licensed as a physician in the Commonwealth of Virginia. Dr. Jones and other area physicians opened the first facility in Richmond designed to serve African-American patients in historic Jackson Ward in 1895.

Meanwhile, across the Atlantic, 12 young women in 1824 formed the congregation of the Sisters of Bon Secours — French for “Good Help” — to nurse the sick and dying in their homes. In 1881, the Sisters arrived in the U.S. to continue their work, and in 1966 they established their presence in Richmond, Virginia, with the opening of St. Mary’s Hospital.

In 1995, the stories of Richmond Community Hospital and Bon Secours became intertwined when Bon Secours Health System acquired the hospital, which by then had moved to the present location of 1500 N. 28th Street in historic Church Hill. Today, Bon Secours Richmond Community Hospital continues the legacy of its founders by providing “good help to those in need.”

by Ardith Barrow, Director of Project Management, Bon Secours Health System

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FALL 2010

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ON THE COVER: Immediate stroke response at Bon Secours Richmond Community Hospital meant faster recovery for Beatrice Daughtery.

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Richmond.



For those of us who love this town, the name “Richmond” evokes images of friends, family, grace and comfort. It seems obvious that a hospital named Richmond Community would naturally exude hospitality and compassion. Our hospital has operated in Richmond for more than 100 years and is a proud member of the Bon Secours Richmond Health System family, which includes St. Mary’s Hospital, Memorial Regional Medical Center and St. Francis Medical Center. “Good help to those in need” is our mission statement, and we take it very seriously. We are here to serve you and your loved ones in a community where hope and faith flourish.

As your neighborhood hospital, we are anxious to get to know you and offer ways to help prevent illness and injury. With this inaugural issue of *Your Good Help*, we bring you the latest information on health and wellness. Our employees and physicians live in your neighborhood and deliver

world-class personal service blanketed in respect, justice and quality.

Just in case, we offer a “no wait” Emergency Department. You never know when the unexpected will occur, but know that Richmond Community is here for you. We also are a certified stroke center and are ready to treat patients with stroke symptoms. Remember — when a stroke occurs, minutes can mean the difference between life and death. Certain treatments can be effective if they are administered within three hours of the onset of stroke.

Breast cancer is the second most commonly diagnosed cancer in women in the United States. Richmond Community has invested in advanced technology for early detection and diagnosis. Same-day appointments are available. And why wait to get a doctor when you have an emergency? Choose a doctor now when you have the time. At Bon Secours Richmond, we want to be your medical home.

Enjoy this magazine and please share it with family and friends. As sure as the leaves will turn scarlet and adorn the streets of Church Hill, Richmond Community is here for you.

Sincerely,

Michael D. Robinson
CEO, Bon Secours
Richmond Community Hospital



Bon Secours Richmond Health System is committed to the community. One example of that dedication in action is the hospital's sponsorship and participation in the East End Charrette this past June.



Designed With Health in Mind

Spearheaded by key local officials and organizations and attended by Richmond Mayor Dwight C. Jones, Councilwoman Cynthia Newbille and other city officials, the charrette consisted of a series of public meetings, presentations and events held to involve the whole community in planning the revitalization of the East End and Nine Mile Road corridor. Weeklong planning sessions sparked conversation and input among community members, small business owners, public housing residents and other stakeholders.

The goal of a charrette is to identify specific designs, housing and business opportunities, and policy and management recommendations for a revitalization effort to create a more desirable place to live and work. The East End Charrette is expected to support grant applications for two federal initiatives that could bring extensive financial support to the community transformation.

A NEW VISION

During various planning sessions, residents provided input on ways to create more livable spaces, which included designs for new homes, green spaces, neighborhood walking paths, multi-use areas and other improvements. Events stimulated discussions on the following topics:

- community health and faith
- emergency and police services
- families and seniors
- housing and retail development
- philanthropy and foundations
- transportation and infrastructure

“Research has identified ways environment can promote health and healing in communities as well as in hospitals,” said Derek A. Battle, Director of Operations and Outreach at Richmond Community Hospital. “Through this initiative, Bon Secours Richmond aims to contribute to the growth and restoration of our neighborhood and also promote improvements to our community’s health, education and social environment.”

To learn more about the East End Charrette, visit www.eastendvision.org.



Charrette Lingo

Urban designers and developers have created a language specific to revitalization projects like the East End Charrette. Understanding the following terms is useful when discussing the planning process:

- **Civic use** — sites set aside to support the common good of the area that should be included in every new urban neighborhood
- **Pedestrian shed** — the distance (equivalent to one-quarter of a mile) most people will walk rather than drive, if the area is pedestrian-friendly
- **Mixed-use** — a building or area that provides multiple functions and benefits a community by attracting pedestrian activity and capturing traffic
- **Infrastructure** — physical public service projects, including utilities, streetscapes and thoroughfares, but excluding buildings and community amenities



What Is a Charrette?

A charrette is a community planning process involving a range of participants, typically residents, designers, business owners and other stakeholders. These leaders meet and collaborate to develop a plan unique to the community.

When Minutes Matter Most

A stroke can happen at any time, anywhere. Beatrice Daughtery, 64, a retired private duty nurse, could not have been in a better place than the Emergency Department (ED) at Bon Secours Richmond Community Hospital when she realized she was having a stroke.

Quick action and appropriate treatment are needed to minimize or reverse the effects of stroke, which, according to the National Stroke Association, will affect approximately 795,000 men and women in the United States — with a six percent fatality rate — this year. Because Beatrice was already in the ED, she received exactly the right type of care immediately.

“I was experiencing chest pain symptoms I had initially written off as indigestion or heartburn,” said Beatrice. “When my symptoms hadn’t resolved several hours later, my niece came to take me

to the hospital. About 30 minutes after arriving at the ED, I was sitting on the examination table and realized I was having a stroke. I couldn’t have been at a better place.”

Beatrice has been diagnosed with congestive heart failure and had suffered two previous strokes, so she was very familiar with the signs. She describes the left side of her body as suddenly

feeling heavy and her attempts to move her left arm and leg as unsuccessful. Beatrice asked her niece to call the nurses back to the room, which resulted in quick action.

RAPID ASSESSMENT, RAPID TREATMENT

Minutes later, tests were conducted to determine the type of stroke Beatrice was experiencing. Results were sent via Internet and fax to a neurologist who could help determine whether Beatrice might be a candidate for the clot-busting drug, tissue plasminogen activator (tPA). The specialist communicated via real-time video link with Beatrice, her nurses and physicians. The evaluation determined that Beatrice could benefit from the clot-busting drug for her ischemic stroke.

“The faster a stroke patient arrives, the more options we have for reversing the stroke,” said Stacy J. Williams, DO, Richmond Community

ED Physician. “Because Beatrice was already in the hospital when her symptoms began, we were able to care for her within the ideal window for receiving the clot-busting drug.”

A SUCCESSFUL RECOVERY

Beatrice remained in the hospital for seven days after her stroke. Following discharge, she underwent four weeks of rehabilitation with sessions occurring twice per week. Before she started therapy, her walk dragged on one side. By the time rehabilitation was completed, her stride had improved. She was also able to walk without a cane.

“The hospital staff members were so helpful and there for me through the whole process,” said Beatrice. “I had such a good support system thanks to my church and the hospital, and I felt so grateful the whole time.”

Today, Beatrice lives in a retirement community with many other residents who have been through a stroke as well. She is the president of the events committee and enjoys dancing in addition to organizing parties for fellow residents.

“I helped organize the New Year’s Eve party and an ‘Oldies, but Goldies’ dance,” said Beatrice. “My community is so wonderful. I have such a good time here. The other residents said they didn’t do these kinds of things until I got here, so I’m glad I was able to bring some more excitement into their lives.”

Take a stroke risk assessment and qualify to win a \$200 VISA card. Please visit richmond.bonsecours.com/yourgoodhelp by midnight on September 30, 2010. One winner’s name will be drawn for this grand prize. If you are at high risk for stroke, Bon Secours Richmond nurses will contact you for a personal consultation.

Time to Quit

People who smoke are at higher risk for stroke as well as coronary heart disease. If you’re ready to quit, join a smoking cessation class at Bon Secours. Call 804-359-WELL (9355) to learn more.

Free Stroke Screening and Stroke Counseling

Richmond Community Hospital

1500 N. 28th Street, Richmond, VA 23223
Medical Office Building, Richmond
Community Hospital Conference Room

Screening includes blood pressure, body mass index, glucose and cholesterol measurements. Stroke counseling with stroke-trained nurses will be available. Healthy snacks and giveaways are included. Walk-ins only. No reservations are required or taken.

For more information, call 804-764-6711.

SEPT. **29**
Wednesday
11 am to 2 pm

Certified Stroke Center

Bon Secours Richmond Community Hospital is certified as a Primary Stroke Center by The Joint Commission. It is part of the Bon Secours Virginia Stroke Network, the largest certified stroke network in Virginia. From assessment and treatment to rehabilitation and prevention, we're able to reach our goal of providing the highest level of stroke care possible at Richmond Community, St. Mary's Hospital, Memorial Regional Medical Center and St. Francis Medical Center.

To be certified as a Stroke Center, a hospital must demonstrate a commitment to excellence. This process requires an interdisciplinary coordination of services to recognize, diagnose and treat ischemic and hemorrhagic stroke — often within a very small window of time.

Richmond Community received a perfect review by The Joint Commission. We are the first hospital in Virginia to be certified by The Joint Commission utilizing tele-neurology services.

Stroke Prevention

Paying attention to medical risk factors, getting regular check-ups and making lifestyle changes can reduce your risk for stroke. Here are some factors you can change or treat:

- **High blood pressure** — Check blood pressure regularly and talk with your physician if it consistently measures 140/90 or higher. High blood pressure is the chief cause of stroke.
- **Tobacco products** — Use of cigarettes and other forms of tobacco damages blood vessels and causes other health problems.
- **Diabetes** — Diabetes mellitus can harm blood vessels in the brain, increasing risk of stroke.
- **Carotid artery disease** — Blood flows to your brain through the carotid arteries in your neck. When plaque builds inside the artery wall, a clot can block that flow, causing a stroke.
- **Transient ischemic attacks (TIAs)** — Mini-strokes can occur with similar symptoms but no lasting effects. Identifying and treating TIAs can lower risk for a major stroke, so seek emergency medical care right away.
- **Heart disease** — Irregular heartbeats (atrial fibrillation) can indicate blood is not being pumped efficiently, which can lead to stroke.
- **Some blood disorders** — High red cell count can lead to clotting, while sickle cell anemia may increase the risk for blocked arteries.
- **Additional risk factors** — High blood cholesterol, physical inactivity, obesity, excessive alcohol consumption and illegal drug use also raise your risk for stroke.





Hospitalists: IMPROVING CARE AND ACCESS FOR PATIENTS

One of the fastest-growing new developments in medicine is not a new surgical specialty — instead, it's the widespread use of a hospitalist. At Bon Secours Richmond Community Hospital, three hospitalists care for inpatients who may not have a primary care physician or who could benefit from special attention and care while they are in the hospital.

Meet the Hospitalist

Originally from Marlton, New Jersey, Philip Varner, DO, Director of the Hospitalist Program at Bon Secours Richmond Community Hospital, is a graduate of the University of Medicine and Dentistry at the New Jersey School of Osteopathic Medicine. After practicing a blend of hospital-based medicine and working as a primary care physician, Dr. Varner moved to strictly hospital-based medicine — and to Richmond Community.

“The intensity of caring for patients at their sickest point and helping to make them better is the biggest reward of being a hospitalist,” Dr. Varner said.

In addition to his medical practice, Dr. Varner is the father of a daughter, 10, and a son, 8. He loves eating Italian food, listening to Dave Matthews Band, and watching the Philadelphia Eagles, Flyers and Phillies.

After being interviewed for this article, Philip Varner, DO, was named Vice President of Medical Affairs for Richmond Community Hospital, and Leigh Bernard, MSHA, became Assistant to the CEO of Bon Secours Richmond Health System.

Leigh Bernard, MSHA, Administrative Director of Medical Affairs, and Philip Varner, DO, Director of the Hospitalist Program, both at Richmond Community, answer patient questions about the role of a hospitalist.

Q: I don't have a doctor. What happens if I need to be admitted to the hospital?

Dr. Varner: This concern is one of the primary reasons the hospitalist specialty came to be. The climate of medicine is changing, and outpatient physicians are spending more time in the office and less time at the hospital. This paved the way for the hospitalist specialty, which allows a physician to coordinate a patient's care in the hospital throughout his or her stay — regardless of whether or not the patient has a primary care physician (PCP).

Q: I already have a primary care physician — do I still need a hospitalist?

Bernard: This can depend on your physician's preference. Many PCPs only maintain an outpatient practice. Utilizing a hospitalist to receive care while in the hospital has several advantages. Hospitalists take steps to ensure

a patient's physician is informed at all times. Because both Bon Secours Richmond and Richmond Community utilize an electronic medical records system, we are able to help PCPs access patient medical records. This allows your physician to know in real time of changes in your condition and the treatments you receive while hospitalized.

Q: In addition to supplementing the duties of my physician, what advantages do hospitalists offer?

Dr. Varner: By concentrating on caring only for hospitalized patients, hospitalists are able to become well-versed in the conditions and concerns that can arise in these circumstances. Additionally, patients have access to competent, caring physicians at all times during a hospital stay, which is a tremendous advantage when you or a loved one has a question or needs immediate assistance.

For more information about medical specialties at Richmond Community, visit <http://richmond.bonsecours.com>.



UTE COLEMAN

Ute Coleman, a registered nurse at Bon Secours Richmond Community Hospital, was selected as the Dedicated Service Award winner for 2009 and 2010. This award is given annually to an employee who personifies Bon Secours Richmond Health System values, demonstrates stellar work performance and has an outstanding presence in the community.

Coleman began her nursing career in Germany, where she worked through school as a nurses' aide. She arrived in the U.S. with years of nursing experience, but was unable to transfer her nursing education records from Germany during wartime. Despite her disappointment, Coleman re-enrolled in nursing school in the United States and graduated after a swift and challenging five years.

Coleman works in the Endoscopy Department as a full-time registered nurse. In addition to being highly dedicated to her career, she assists in coordinating Neighborhood Night Out programs in her community, a program aimed at keeping all neighborhoods safe.



“I’m thankful that Bon Secours is a Catholic-affiliated health system. I feel more at home in their facilities than in others. Being faith-based does make a positive difference.”—Mary Jo Anger, via Twitter, May 22, 12:02 am

MyBonSecours.com

MyBonSecours.com is your own personal health care website, brought to you by Bon Secours Richmond Community Hospital. On the site, you can search for physicians in your area, schedule a medical appointment, participate in online health assessments or surveys, and request prescription refills. On Twitter®, you can even “Tweet” your very own health tip for everyone to read.



Multi-Bean Chili

Chili is the perfect food to welcome in the cooler days of fall. Using beans instead of meat is a great way to reduce fat and add fiber.

INGREDIENTS

- 1 tablespoon canola oil
- 1 large onion, diced
- 4 cloves garlic, minced
- 3 tablespoons chili powder
- 1 tablespoon ground cumin
- ¼-½ teaspoon ground chipotle chile, or cayenne pepper, or to taste
- 1 28-ounce can crushed tomatoes
- 3 medium tomatoes, chopped
- 1 15-ounce can dark red kidney beans, rinsed
- 1 15-ounce can black beans, rinsed
- 3 cups water
- ½ teaspoon freshly ground pepper

DIRECTIONS

Heat oil in a Dutch oven over medium heat. Add onion and cook, stirring, until beginning to soften, 2 to 3 minutes. Reduce heat to medium-low and cook, stirring often, until very soft and just beginning to brown, 3 to 4 minutes. Add garlic, chili powder, cumin and chipotle to taste and cook, stirring constantly, until fragrant, 30 seconds to 1 minute. Stir in canned and fresh tomatoes, kidney, white and black beans, water, and pepper. Increase heat to high and bring to a boil, stirring often. Reduce heat to a simmer and cook, stirring occasionally, until the chili has reduced slightly, 10 to 15 minutes.

NUTRITIONAL INFORMATION

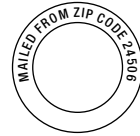
Calories: 294
Fat: 4g
Protein: 16g
Sodium: 806mg
Carbohydrate: 55g
Fiber: 16g
Source: www.eatingwell.com





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A Commitment to *Women*

Next to skin cancer, breast cancer is the most frequently diagnosed cancer in women in the United States. Bon Secours Richmond Community Hospital is dedicated to providing convenient, advanced mammography services.

When women turn to Richmond Community for their screening or diagnostic mammograms, they can expect convenience and comfort in addition to quality imaging services. Convenience at Richmond Community starts in the parking lot. With valet parking available at the hospital entrance, patients do not have to hunt for a parking space. The hospital can also often accommodate patients who have time available, but did not make an appointment for a mammogram.

“For some women, scheduling a mammogram is not at the top of the list of things to do,” said Lisa Bowles, Manager of Radiology and Transport Services. “If a woman is already at her physician’s office at Richmond Community, she can walk in without having to remember to schedule a time.”

In addition, located less than five miles from Richmond Community is Bon Secours Richmond’s Laburnum Diagnostic Imaging Center, which provides “same-day reads” as well as walk-in service. At Laburnum Diagnostic Imaging Center and Richmond Community Hospital, patients can request the technologist use a MammoPad™, a foam pad cushion between the breast and the imaging plate, to enhance comfort.

The American Cancer Society recommends that most women get a baseline mammogram between ages 35 and 40 and an annual screening mammogram thereafter. Be sure to talk to your physician about your health history and risk factors.

To schedule your mammogram, call 804-627-5660. If transportation for a mammogram is an issue, courtesy van services can be scheduled 48 hours in advance to and from either facility by calling 804-225-1700.