

Leaving A Lasting Legacy



By choosing to make a planned gift to Southcoast Health, you are leaving behind a legacy that will significantly benefit generations to come while providing financial and tax benefits for you and your family today.

There are numerous types of gifts that first pay income to you and your family and then ultimately benefit Southcoast Health. We would be delighted to work with you and your advisors in arranging planned gifts that best suit your family, financial and philanthropic objectives.

Some popular types of planned gifts include:

- Charitable Gift Annuities
- Charitable Remainder Trusts
- Bequests
- Gifts of Retirement Plan Assets and Life Insurance
- IRA Charitable Rollovers

We invite you to consider your philanthropic goals and how they can ensure the health and well-being of generations of South Coast residents to come. If you have any questions about planned giving or have already included Southcoast Health in your estate plans, please contact **Sarah Gonet, Senior Major Gifts Officer, at 508-973-5950 or gonets@southcoast.org.**



IRA Charitable Rollover

The IRA Charitable Rollover allows individuals over age 70½ to directly transfer up to \$100,000 per year from an IRA account to one or more charities. This transfer counts toward the minimum required distribution rule for IRA accounts, and such distributions are free of both income and estate taxes. Better yet, your gift makes an immediate impact – there is no need to wait until the end of the year!

The IRA Charitable Rollover was first passed in the Pension Protection Act of 2006 and was in effect, through various extensions. The law is now permanent.



**Southcoast Health Cares
for our Community**

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Message from Jack Dresser

Senior Vice President & Chief Philanthropy Officer



Welcome to the latest edition of *Pulse*, a special publication for members of the Southcoast Health philanthropic community.

As a not-for-profit healthcare provider, we take caring for all of our patients — regardless of ability to pay — very seriously and we are deeply humbled by the commitment of our donors. Never before has philanthropy been so important to the work we do and we look forward to everyone's help in advancing us toward our \$25 million goal in the Campaign for Southcoast Health and our \$500,000 goal for the Annual Fund.

We are pleased to report that the Campaign for Southcoast Health has raised more than \$22 million.

The Campaign, which is raising funds to elevate cardiac, maternity and emergency care across the region to new levels, is quickly approaching our goal of \$25 million. The Lash Heart and Vascular Center at Charlton and the Stoico/FIRSTFED Maternity Center at St. Luke's are complete. Every day, these facilities help Southcoast Health provide the best care for our patients. The third project of the Campaign, the Emergency Department expansion and renovation at Tobey Hospital, now becomes our primary focus. You will read much more about this project later in this edition of *Pulse*.

You will also be introduced to the concept of population health and how it is influencing South-

coast's delivery of care and to people whose generous support of Southcoast Health helps us to provide a high level of care to our community. As a proud resident of the South Coast, I am grateful for the opportunity to share these stories with you.

Thoracic Foundation

Bringing smoking cessation services to where they are needed most

When the late Galen L. Stone, II heard Southcoast President & CEO, Keith Hovan, speak about the high rates of smoking that plague the region at a donor appreciation event hosted at his family's Marion estate in 2015, he knew that he wanted to do something to help. Mr. Stone, a longtime Trustee of the Thoracic Foundation, approached Southcoast's Philanthropy Department and the Mobile Smoking Cessation Outreach Program was born.

For the past seven decades, the Thoracic Foundation has funded research in the areas of respiratory illnesses such as asthma and bronchitis, as well as smoking prevention and cessation efforts. In a region with a smoking rate close to double the state average, particularly in Fall River, New Bedford and Wareham, more clearly needed to be done to connect smokers with the tools and support needed to give up tobacco for good.

The program's primary focus is to bring consistent smoking cessation support services to local residents; particularly those living in public housing and economically disadvantaged neighborhoods. The fact that local public housing authorities began going smoke-free in 2014 made this program all that timelier.

Integral to the Mobile Smoking Cessation Outreach Program is the Community Health Worker (CHW) who facilitates the on-the-ground, grassroots outreach needed to provide smokers with the tools they

need to quit — and remain tobacco-free. In addition to participating community health fairs, cultural events and collaborative outreach efforts, the CHW conducts door-to-door outreach working to overcome the extensive socioeconomic and cultural barriers faced by many local residents. Smokers are often connected with QuitWorks, a free, evidence-based stop-smoking service developed by the Massachusetts Department of Public Health.

"As a CHW being able to speak to people in their language and meeting them where they feel safe and comfortable has been an invaluable resource," said Jamie Berberena, the CHW who oversees the program.

Jamie is continually looking for new venues to engage local residents. For example, she has begun working with Coastal Foodshed's Mobile Farm Stands, These markets "pop up" in targeted neighborhoods in New Bedford and Wareham that are considered "food deserts" (a geographic areas where affordable and nutritious food can be difficult to obtain, particularly for those without access to reliable transportation). Some research links food deserts to diet-related health problems and health disparities. The markets will provide Jamie with an opportunity to interact with individuals with higher risk factors for health disparities such as smoking.

With vaping presenting itself as a rapidly growing epidemic, Jamie is expanding her outreach efforts to e-cigarette users, specifically youth, to inform them of the dangers and

"Being able to speak to people in their language and meeting them where they feel safe and comfortable has been an invaluable resource."

— Jamie Berberena

long-term health consequences. It is estimated that in 2018, more than 3.6 million U.S. youth, including 1 in 5 high school students and 1 in 20 middle school students, used e-cigarettes.

"The connections that we have to the community with this outreach program and our CHW are vital," said Susan Oliveira, RN, who oversees the Mobile Smoking Cessation Outreach Program. "People of all ages are faced with the everyday propaganda that touts alternatives to cigarettes, and these products are no better."

The Thoracic Foundation has provided an opportunity to educate residents of all ages on the harmful effects of smoking and make direct referrals to help smokers access the necessary tools at no cost to them. They receive nicotine replacement therapies and telephonic cessation counseling services that are crucial supports to aid their quit plan. Thus far, the Thoracic Foundation has invested over \$125,000 in this program, continuing to support Southcoast's efforts even after the passing of Mr. Stone's passing in 2018 at the age of 96.

Ways to Give



Online

www.southcoast.org/philanthropy/ for credit or debit card gifts



Call

508-973-5353 or fax 508-991-8711



Mail

Send your check to the address shown below

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Pulse

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Your privacy is important to us. If you would like your name removed from future fundraising communications, please contact us at 508-973-5353. You may also write to us at philanthropy@southcoast.org or Southcoast Health System, Philanthropy Dept., 101 Page Street, New Bedford, MA 02740.

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Community Benefits = Population Health

Rachel Davis shares how Southcoast Health stays involved in the community

For Rachel Davis, Director of the Southcoast Health Community Benefits program, the term community benefits is another way to say population health.

Rachel works with community-based organizations and civic leaders from across the region who focus on things like chronic disease prevention and detection and food security, in an effort to develop a health plan for the community; "I'm kind of a connector," Rachel says.

The health of a population depends not only on access to care, but also on access to other things like housing, education and employment.

"Southcoast is in the business of keeping people healthy and out of the hospital. For this to work, we have to remain focused on all the factors that affect the health of our community," Rachel says. "Community benefits is something that we are going to be talking about more and more."

Every three years, Rachel and her team, in conjunction with the Public Policy Center at the University of Massachusetts Dartmouth, publish a Community Health Needs Assessment that helps identify areas for improving public health and how to address them. Rachel and her team are excited for what

is to come. "We are trying to get more granular in how we look at our data," she says.

She wants to take a more targeted approach, which will include an increased effort to educate members of the community about population health while bringing community partners together to help make informed decisions. "We really want the people who have not traditionally had a voice to come out and partner with us in creating a community health improvement plan together," she says.

Rachel knows the importance of including the community in her work. "We are interpreting numbers. What we see as a priority might not be what the community sees as a priority," she says. "We need to make sure that we are on the right track; that we are allocating our resources responsibly and in a manner where they are going to make the biggest difference. We need to have our community partners working with us so that the process is more collaborative and less informative. I don't want to tell them what we are going to do. I want them to tell us what we need to do."

In addition to wearing the hat of connector, advocate and educator, Rachel also proudly wears another hat: that of Southcoast Health donor. Rachel appreciates

the role that Southcoast plays in the region, stating that, "the issues that I work on every day are of top concern to our administration. We at Southcoast are invested in this community because of the many ways that we are deeply involved in this community."

"At Southcoast, we strive to provide exceptional care, but this care really goes far beyond our walls and out into the community."

— Rachel Davis

Rachel's understanding of the important role that Southcoast Health plays in the region helps her put into perspective her own charitable giving: "At Southcoast, we strive to provide exceptional care, but this care really goes far beyond our walls and out into the community. I love that and I am proud to work at Southcoast Health. That is why I give back to this organization."



Grace Episcopal Church's Laundry Love program is just one of the many community programs that Rachel Davis' work supports.

On the cover: Rachel Davis, Director Community Benefits (on right) and Alison Bettencourt, Community Benefits Specialist.



Q&A

Ronnie Brownsworth, MD on Population Health

Q: How would you define Population Health?

A: As the name implies, Population Health is an approach to looking at populations of patients that we care for with the purpose of improving their health outcomes and improving the cost effectiveness of the care that is given.

Q: What type of investments go with this type of program?

A: It begins with informational systems that provide data on things like:

- Patients with specific disease states
- Clinical outcomes on those same patients
- Cost of delivering the services to those patients and the number and type of services we are delivering

Q: Why is this concept so important to Southcoast Health, given our patient population? What are the potential impacts on our community?

A: It is important to all the patients we care for; however, it is more important for certain subsets of patients. For all patients, the program identifies preventive care that hasn't yet been delivered, how well we are doing at treating certain disease states (and feeding that information back to their physician), as well as trying to eliminate waste or cost of services that do not provide value in treating or diagnosing the patient's condition. There are subsets of patients that receive closer attention.

Those subsets can be identified by either a disease state or type of medical condition. Disease states could be diabetes, congestive heart failure, cancer, etc. In the case of medical conditions, it might mean working on surgical infection rates.

Another area of focused work can be around the social determinants of health. That includes identifying homelessness, food instability and transportation and lack of a physician or behavioral health treatment. These populations require us to approach delivery at a level that general medicine has not traditionally done. It can include providing transportation to a visit or sending someone to the home of a patient. It can include helping them get medications or housing assistance, helping them into a job development program or in applying for assistance programs, just to name a few.

Q: Is this something that we at Southcoast Health do alone?

A: No. We must have relationships with other community partners. These partners may be focused on treating drug or alcohol addiction or behavioral health conditions, or organizing support groups, to provide a few examples.

Q: What initiatives have Southcoast Health implemented to move towards a population health model of delivering care?

A: • Patient stability upon discharge from the hospital. Today anywhere from 10 to 20



percent of patients with significant diseases are readmitted to the hospital within 30 days. We are working to reduce the number of individuals that need to be readmitted by helping them to remain stable at home.

- Diabetes care improvement. Improving the percentage of individuals whose Hemoglobin A1c is less than seven, meaning more patients are optimally controlled. Also reducing the percent of individuals who are greater than nine, meaning reducing the number that are out of control.
- Identification of homelessness.
- Identification of obesity. While this is a condition and not a disease, it contributes to heart attacks, strokes, vascular disease and even memory loss in later life. It is one of the conditions our country wants to avoid talking about because so many of us fit into it.

- Immunizations. We need to increase the number of our patients receiving key immunizations to prevent infections.
- Preventive screenings for cancer.

Q: What is next for Southcoast in the area of population health?

A: We have traditionally been focused on the health aspects of care to our patients. We are now beginning to really focus on the cost of care to treat individuals. This is linked to approaches to clinical best practices that focus on the value of treatment.

Examples are:

- The number of patients with classic migraine who undergo head imaging when diagnosed. The American Headache Society has said it is not cost effective to do imaging in these situations and treatment should just be started.

“We are now beginning to really focus on the cost of care to treat individuals. This is linked to approaches to clinical best practices that focus on the value of treatment.”

— Ronnie Brownsworth, MD

- Emergency room use for conditions that could be treated at a less costly place of service.
- Reducing the number of readmissions, and finding avoidable admissions (doing what is necessary to take care of the patient from home or an office).

The list goes on and on as this is a new area of focus, but it is important to our society that we become more fiscally responsible for the services we provide.



The Campaign for Southcoast Health: Tobey Hospital Emergency Department

Plans to renovate and expand the ED include:

- An additional 17,500 sq. ft. of space for a total of 25,000 sq. ft. which is more than triple the size of the current ED.
- Approximately 30 treatment rooms including dedicated rooms for bariatric patients, behavioral health patients and patients in need of advanced life saving and isolation/decontamination.
- Increased capacity to accommodate the growing needs of the community.
- Larger, private rooms with access to the latest treatment technologies at the bedside.
- Enhanced areas for greater patient comfort, safety, privacy and infection control.
- Improved workspaces for staff and sight lines from a centralized nursing station.
- Improved triage and hospital throughput, resulting in shorter wait times for everyone needing care.

This year, The Campaign for Southcoast Health surpassed \$22 million raised. The focus of this Campaign is to raise funds to support three projects, one at each of our hospitals. With the Lash Heart and Vascular Center project at Charlton and the Stoico/FIRSTFED Maternity Center at St. Luke's already completed and providing exemplary care to our patients, our focus now turns to the expansion of the Emergency Department at Tobey Hospital.

The communities served by Tobey Hospital need an Emergency Department that meets the high standards upheld by the hospital and Southcoast Health. Full-time and seasonal residents already receive outstanding care and service from Tobey, but they need to know that in an emergency, the hospital's highly qualified emergency doctors and medical staff will treat them in the finest facilities, with the latest technology.

The existing ED has become outdated and inadequate. Built to accommodate 15,000 patients annually, the ED treated nearly 32,000 patients last year alone. At these levels, overcrowding and congestion occur and our clinicians are forced to treat patients in shared spaces, including hallways and other public areas. Industry benchmarking has determined that hospitals should have one bed for every 1,500 emergency room visits. With approximately 32,000 visits annually, Tobey's ED should have

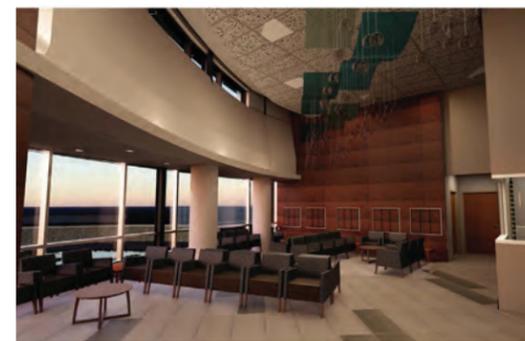
at least 23 dedicated beds to accommodate its current patient volume. With only 10 beds and 5 hallway beds, the existing ED falls below industry standards and cannot keep pace with increasing patient volume.

For our patients, the effects of overcrowding can negatively impact wait times, privacy and the delivery of patient-centered care. In order to maintain the highest standards of care, Southcoast has committed to renovating and expanding Tobey's ED. The new space will be designed to deliver efficient, personalized, high-quality care; improve patient satisfaction; and accommodate increasing patient volume and highly-acute patients.

Because you cannot close a busy ED during renovations, the Tobey project will be completed in three stages. The first stage, preparing the site for construction, began last month. Stage two will be new construction, with services being provided as normal in the current ED space. The final stage will see ED operations moved into the new space and renovations done to the old (current) ED to integrate the space with the new construction. The completed Tobey Emergency Department will be open in late 2021.

Close to \$2 million has already been raised in support of the project. With your help, we will raise the remaining funds needed to make this important project a reality for everyone who receives care at Tobey Hospital.

Renderings of the proposed new Emergency Department at Tobey Hospital in Wareham.



The new Tobey Emergency Department space will be designed to deliver efficient, personalized, high-quality care; improve patient satisfaction; and accommodate increasing patient volume and highly-acute patients.



Annual Fund



southcoast.org/annual-fund

The Southcoast Health Annual Fund promotes wellness for every individual, family, and population in the region, focusing not only on acute medical care, but preventive care and health education.

Annual Fund gifts provide for the most current and urgent needs of our health system and support an array of initiatives and priorities designed to provide the best healthcare experience for our patients and their families.

A gift to the Southcoast Health Annual Fund — no matter how large or small — is an investment in the health of our community.

Visit southcoast.org/annual-fund to donate or learn more.

Donations to the Annual Fund have been used to:

- + Acquire leading-edge technology and support technological enhancements
- + Recruit the very best clinicians and offer specialized training for our clinical staff
- + Support critical preventative and wellness care programs for cardiac care, breast health and diabetes management
- + Promote new healthcare initiatives
- + Provide accessible healthcare in our communities

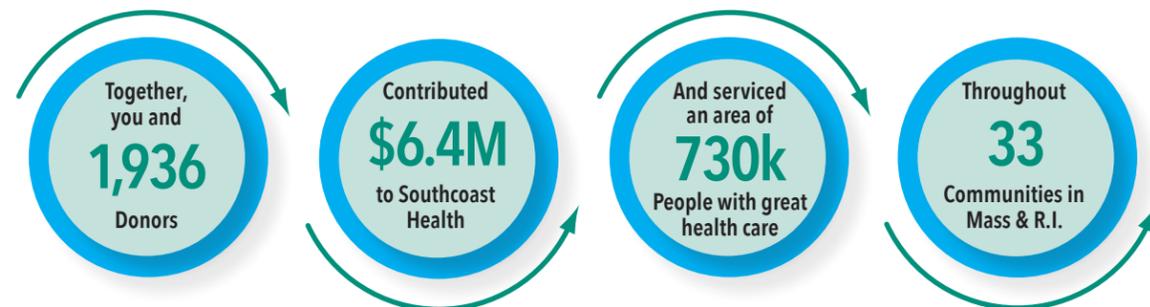
Why is the Annual Fund so important?

A robust Annual Fund is the cornerstone to meeting the immediate needs of our patients, their families, and the community at large.

To achieve this, Southcoast depends on the community's generous support. Your gift, no matter the size, makes a big difference in maintaining a healthier community for every person living on the South Coast and East Bay, RI.

The power of your giving

No matter the size or type of your donation, or the reason you decide to contribute, you can be sure that your gift will be invested in the health of your community. **THANK YOU!**



THE Gala for Southcoast Health

The Gala for Southcoast Health, held in May at the Belle Mer in Newport, RI, raised nearly \$200,000 in support of Southcoast Health. Thank you to everyone who made this night so special.



Doug and Stephanie Glassman, Tony Sapienza, Anne Broholm



Dr. Victor and Heide Pricolo



James Herbert and Sharon Jones



Dr. Rayford and Tracey Kruger



Thyra Matias and Katie Gallagher



Dr. Preeti Gupta and Dr. Tushar Kumar

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