

BOUNDLESS HORIZONS



Our Mission, Vision and Values

MISSION

We are the heartbeat of our community, caring for our patients and their families with excellence, compassion and teamwork.

VISION

We will strengthen the health of our community with compassion, innovation and partnership.



VALUES

Teamwork

We are a team, a community, a family devoted to helping and healing every patient every time, together.

Trust

We have faith in our caring work and pledge our honesty, courage, respect and integrity to each other and every patient in every encounter.

Compassion

We care deeply about our patients and colleagues, treating each with empathy and respect, as if they were our own family.

Quality

We are accountable to our patients and each other to always deliver our very best, safest care, to strive for excellence and to consistently deliver on these promises.

Innovation

We seek new knowledge, competencies, techniques, technology and best practices to bring new hope and healing to our patients close to home.

Celebrating 65 Years of World-class Healthcare with a New Identity

The Board of Commissioners of St. Tammany Parish Hospital Service District No. 1 approved a new brand identity and defining statements around the organization’s mission, vision and values as a community healthcare resource.



The single strongest word that arose in the research leading to the new statements was compassion, which is used in each of the new statements.

To better convey its modern focus and responsibilities, St. Tammany Parish Hospital is now referred to as St. Tammany Health System, effective Dec. 1, 2019. The new name was introduced along with a fresh new corporate identity including logo, mission, vision and values statements at a 65th anniversary event Dec. 1, 2019, at the hospital.

“We celebrated 65 years in 2019,” explained Joan Coffman FACHE, president and CEO, “and that felt like a perfectly fitting time to update how we represent ourselves and convey the promises we have been making and keeping for residents of west St. Tammany and surrounding areas since 1954.”

The iconic double-hearts logo, well known and highly recognized among Northshore residents, has been updated in new art that retains elements of the former to make the connection between new and old.

“We selected a brighter shade of the same color and elected to keep interlocking hearts

as a central element in our artwork,” Melissa Hodgson, communication director, said. “The color is familiar and welcoming. The hearts convey our deep compassion, our commitment to caring. As we worked with Zehnder Communications to help us articulate our new look, we wanted to keep elements like that to connect the dots for our patients and to carry forward our long history of excellence, compassion and community connection.”

The two interlocking hearts include elements that connect with the former identity while also bringing to mind cardiovascular health, mother-baby bonding and family health of adult and child.

The updated mission, vision and values statements are designed to remain true to the principles the service district was founded upon, and yet speak in more current language to better articulate those long-held values. The single strongest word that arose in the research leading to the new statements was compassion, which is used in each of the new statements.

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Commitment to Our Community

From the moment it accepted its first patient at 7:30 a.m. on Dec. 1, 1954, the story of St. Tammany Health System has been firmly rooted in community – the same community that fought to have the Covington hospital built and the same community its healthcare team has served ever since. A lot has changed in the subsequent decades, but one thing hasn't: St. Tammany Health System's commitment to the health and wellness of its neighbors, the people of St. Tammany Parish.



+ 12.1%

**INCREASE IN HEALTHCARE JOBS
IN ST. TAMMANY PARISH**

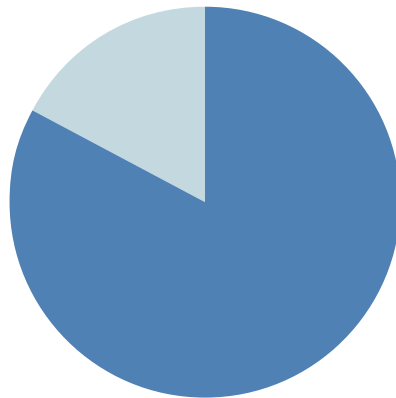
2,300


STHS COLLEAGUES

St. Tammany Health System is the largest employer in Covington and second largest in the parish.

17%

of all
healthcare jobs
in St. Tammany
Parish are
provided by
STHS



 **26%**

ENTRY LEVEL PAY INCREASE

introduced Jan. 20, 2019

\$57,708

**AVERAGE EARNINGS PER HEALTHCARE
JOB IN ST. TAMMANY PARISH**

NEARLY 10%
OF ST. TAMMANY
PARISH'S ECONOMY
IS COMPRISED
OF THE HEALTHCARE
INDUSTRY, A
\$1 BILLION INDUSTRY

We are the heartbeat of our community in so many ways.

CHARITIES ALIGNED WITH THE MISSION OF ST. TAMMANY HEALTH SYSTEM AND SUPPORTED PHILANTHROPICALLY IN 2019

- American Heart Association
- Boys & Girls Clubs
- Bras for a Cause
- Children's Museum of St. Tammany
- Christwood Foundation
- Coquille Parks and Recreation
- Council on Aging St. Tammany
- Exchange Club
- Northshore Food Bank
- Habitat for Humanity West St. Tammany
- Hospice Foundation of the South
- Kelly Kicking Cancer
- Kicking Parkinson's
- Liberto Memorial Fund
- Lions Club of Covington
- Mandeville Night Out Against Crime
- New Heights Therapy Center
- Northshore Humane Society
- Safe Harbor
- Safe Haven
- St. Tammany Parish Fair
- Washington Parish Fair
- YMCA West St. Tammany
- Youth Service Bureau





Collaboration with Our Partners

As St. Tammany Parish has continued to grow, so has its need for specialized hospital care. St. Tammany Health System is proud to provide it, with key contributions from its partner organizations. That includes its partnership with Ochsner Health, which has resulted in the Northshore's most comprehensive health system for children; and its alignment with both Ochsner and Mary Bird Perkins, who work hand-in-hand with STHS at St. Tammany Cancer Center on the main campus. Both are examples of the health system's dedication to maximizing its relationships and its influence to deliver on its promise of bringing local residents world-class healthcare, close to home.



St. Tammany Health System, Ochsner Health Partnership Brings World-class Pediatrics to the Northshore



Ochsner Hospital for Children at St. Tammany Parish Hospital

Ochsner Hospital for Children pediatric intensive care physicians coupled with the St. Tammany Health System inpatient pediatric unit and pediatric intensive care unit (PICU) are part of the partners' comprehensive array of pediatrics on the Northshore. In recognition of the excellence the partnership brings to the service district, St. Tammany Health System in 2019 renamed its pediatric section Ochsner Hospital for Children at St. Tammany Parish Hospital.

"For us, this name helps parents know they have the top ranked children's hospital staffing pediatrics inside their world-class community hospital," Joan Coffman, STHS President and CEO, said. "Five years into our partnership, we are excited to see this level of specialty care, closer to home than ever. It's only strengthened by Ochsner's recent recognition by U.S. News & World Report for the third year in a row."

Level II PICU

The June of 2019 opening of St. Tammany Health System's level II pediatric intensive care unit (PICU) capped a focused, years-long effort to complete world-class pediatric services for west St. Tammany families.

Staffed by Ochsner Hospital for Children pediatric intensivists, the new PICU delivers a team with specialized training in caring for patients age 18 and under in need of higher-acuity care. The same physicians will also care for patients in STHS's newly renovated inpatient pediatrics unit adjacent to the PICU.

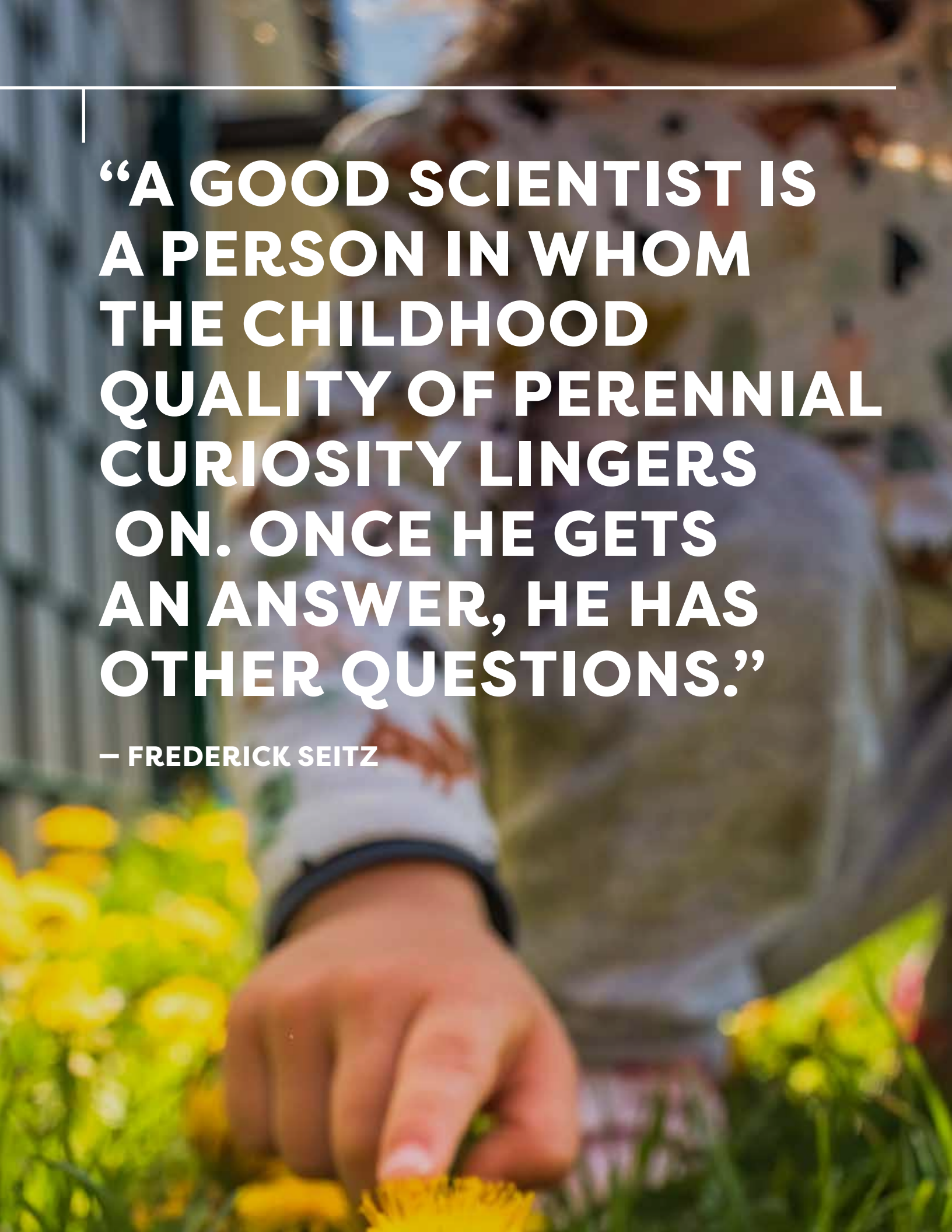
Ochsner Health provided specialized training for the STHS pediatrics team to prepare them for young patients with respiratory infections, diabetes, seizure disorders and other conditions that may require the use of a ventilator, continuous cardiac monitoring or other highly specialized pediatric care.

"This new Level II PICU is state-of-the-art, and our Ochsner physicians are excited to be providing the care. The children in west St. Tammany Parish deserve the best, and that's what they will get through this partnership," said Israel Temple MD, Ochsner pediatric intensivist.

Together, the partners provide the most comprehensive health system for children along the I-12 corridor. In addition to these pediatric inpatient resources, outpatient services range from primary pediatrics in Covington, Madisonville and Mandeville, the Parenting Center and pediatric certified rehabilitation, to pediatric orthopedics and a multispecialty clinic of pediatric subspecialists from Ochsner Hospital for Children providing a full schedule of appointments in pediatric cardiology, endocrinology, otolaryngology, nutrition, general surgery, gastroenterology, hematology/oncology, plastic surgery (including hand), orthopedics, pulmonology, urology and other specialties.

U.S. News & World Report ranks Ochsner Hospital for Children among the top 50 children's hospitals for pediatric gastroenterology and gastrointestinal surgery and pediatric cardiology and heart surgery, Louisiana's only ranked children's hospital.



A close-up photograph of a child's hand reaching towards a bright yellow flower in a field. The background is softly blurred, showing other flowers and greenery. The overall scene is bright and natural, suggesting a moment of discovery or curiosity in nature.

**“A GOOD SCIENTIST IS
A PERSON IN WHOM
THE CHILDHOOD
QUALITY OF PERENNIAL
CURIOSITY LINGERS
ON. ONCE HE GETS
AN ANSWER, HE HAS
OTHER QUESTIONS.”**

– FREDERICK SEITZ



St. Tammany Cancer Center

Early Detection Services for Lung Cancer

STCC continued to expand early detection services within our comprehensive lung cancer program, setting records for the number of patients participating (close to 400) in our Low Dose CT (LDCT) Lung Cancer Screening Program. Since the program's inception in 2015, 1.8% of the patients have had a positive diagnosis of cancer (published average from this screening 1.5%). The center also made strides to capture incidental lung nodule findings and ensure follow-up is completed when appropriate, committing time and resources to a full-time LDCT lung cancer screening navigator as well as purchasing software to assist in the identification, tracking and follow-up of patients in the lung cancer screening program and those with incidental lung nodule findings.

Molecular Testing

Members of the Lung Multidisciplinary Team also made great strides in approving protocols that allow pathology to initiate molecular testing for various cancers when the testing is evidence-based and included in national recommendations for care. For many cancers, molecular testing allows for more treatment options and the potential for treatment with targeted therapies. Pathologists having a standing protocol for testing reduces the time to results from 3-4 weeks to 2 weeks, allowing for a broader range of treatment discussions. This step can greatly reduce the amount of time from diagnosis to start of treatment as well as the side effects experienced from treatment.

Genetic Counseling

STCC determined an increasing need for genetic counseling services in our community and have worked to accomplish

that goal, now offering two options for risk assessment and counseling services to physicians and patients in our community. This includes in-person clinic visits with an onsite geneticist at STCC or telephone counseling through Informed DNA.

Minimizing Hair Loss

The infusion suite now has the availability of Digitana Ultra machines that use cold caps to minimize hair loss in patients undergoing chemotherapy.

“Cancer Rocks” Garden

The STCC employee-run Spirit Committee developed a well-received rock garden to contribute to the healing environment of our center.

Working with START to spread the word about cervical cancer screenings

Cervical cancer was once one of the most common causes of cancer death for American women. Cervical cancer death rates dropped significantly with the increased use of the Pap test for screening but that rate has not changed much over the last 15 years. According to the American Cancer Society, 13,800 new cervical cancer cases are expected, and 4,290 deaths related to cervical cancer, in 2020 (Cancer Facts and Figures 2020). Screening can prevent most cervical cancers by finding abnormal cervical cell changes (pre-cancers) so they can be treated before they have a chance to turn into a cervical cancer. STCC wanted to spread the word about the importance of cervical cancer prevention and screening and worked collaboratively with the START Community Health

The positives of the Therapeutic Food Pantry are endless—better patient outcomes, less sickness and fewer hospitalizations during cancer treatment.

Center. A community education program was offered and had close to 50 attendees. That was followed by a cervical cancer screening that had 21 women complete cervical cancer screening with no cancerous findings.

Therapeutic Food Pantry

The STCC Navigation Team identified food insecurity issues in patients undergoing active treatment. Through the assistance of the St. Tammany Hospital Foundation and collaboration with the Northshore Food Bank and local farmers, the center established a Therapeutic Food Pantry on site to meet the needs of our patients. The positives are endless — better patient outcomes, less sickness and fewer hospitalizations during cancer treatment.



St. Tammany Quality Network

St. Tammany Health System and the St. Tammany Quality Network are together dedicated to improve the lives and the community that we serve. 2019 was a year of expansion and great innovation for our patients, families and the community.



REDUCED THE OVERALL READMISSION RATE BY 1.35%

A care model was implemented to reduce the overall readmission rate to 13.37% (down 1.35% from 2018) by implementing an after-hours patient call center, expansion of Home Health services, and implementation of a discharge clinic and transition care management.

IMPLEMENTED A PREVENTATIVE CARE MODEL

This model resulted in six fewer hospital-acquired conditions. A few interventions instituted included the implementation of preventative measures such as daily reporting, surgical team rounding, nursing education, protocol development and safety huddles.

CREATED A CLINICAL CARE REDESIGN COMMITTEE

This committee was created to focus on proactive clinical improvement through delivering quality care, promoting health record interoperability and implementation of data analytic tools to assist with progress measurement.

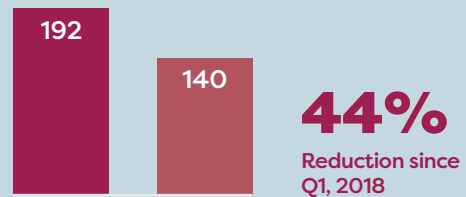
COMMITTED TO CREATING BETTER OUTCOMES

Targeted select patient populations to improve care throughout the continuum of care.

ACCOUNTABLE CARE ORGANIZATIONS

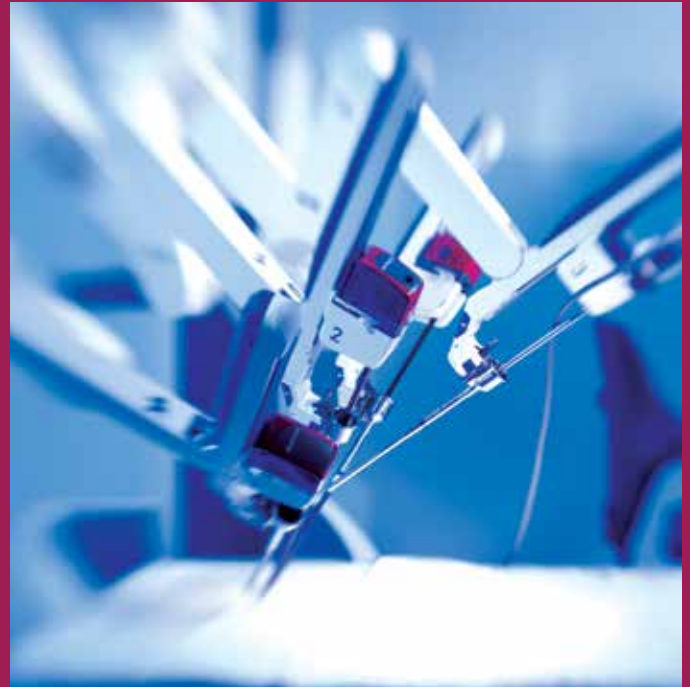
Accountable Care Organizations (ACOs) are groups of doctors, hospitals and other healthcare providers who collectively come together voluntarily to provide coordinated high-quality care to the Medicare patients they serve. Coordinated care helps ensure that patients, particularly the chronically ill, get the right care at the right time, with the goal of avoiding unnecessary duplication of services and preventing medical errors.

Readmission Rate Reduction



Expanding Capabilities

There are no two ways about it: St. Tammany Health System is proud of its place in the Northshore's history. At the same time, it knows the difference between honoring the past and becoming caught up in it. That's why it continues to keep its eyes forward, bringing to local residents new technologies and new capabilities from robotic surgeries to advancements in trauma care – and proving in the process that it is, indeed, possible to make history and to be a part of history all at once.



Modus V

St. Tammany Health System added Synaptive Medical's Modus V™ innovative robotic technology to its neuroscience program, enabling neurosurgeons at the Covington hospital to perform complex brain and spine surgery procedures, including some which may previously have been considered inoperable.

"We are excited to further elevate the neurosurgical care we provide at St. Tammany with purchase of the most powerful robotic microscope available today," said Joan M. Coffman, STHS President and CEO. "The combination of Synaptive's Modus V robotic technology, BrightMatter, and the renowned skill of Ochsner neurosurgeons, truly delivers on our promise of world-class healthcare, right here in Covington."

Synaptive's BrightMatter™ technology enables surgeons to tailor their surgical approaches for each patient at St. Tammany by using advanced algorithms that automate the processing of MRI data. The neurosurgeon uses BrightMatter™ to map the best possible approach to the tumor, attempting to avoid damaging structures responsible for critical functions such as speech, movement, vision and memory. This functionality gives surgeons a dynamic 3D visualization of the brain that may allow for less invasive surgery and potentially safer surgical routes. For patients, less invasive procedures may lead to reduced complications and faster recovery times.

"Every condition is different, making it imperative for today's surgeons to take a customized, patient-specific approach to surgical planning," said Sebastian Koga MD, medical director, Neuroscience Institute, and former Ochsner Health neurosurgeon. "But even the best surgeons in the world are only as good as the technology available to them, which is why we are excited about this investment in BrightMatter technology."

Modus V, the newest system to be integrated at St. Tammany, is an automated robotic arm with high-powered digital microscope that provides an unprecedented view of patient anatomy. Using the most powerful optics available on the market today and robotic technology originally developed for the International Space Station, Modus V™ allows surgeons to perform less invasive procedures with more precision.



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In some cranial cases, it may allow surgeries that were previously deemed inoperable.

"Synaptive's BrightMatter works in concert with navigated surgical tools and Modus V to deliver the surgeon the best possible visualization and the most direct route to remove the tumor," explained STHS Director of Surgical Services Nancy Ledet RN.

For patients who are scheduled to have minimally invasive spine surgery at St. Tammany Parish Hospital, the neurosurgeon uses Modus V™ to visualize the soft tissue during decompression to ensure nerve roots are completely free from pressure. This results in very small incisions, exceptional outcomes and reduced recovery times.



5,000th Robotics Procedure

True to its mission to care for the community, St. Tammany Health System announced surpassing the 5,000th case in robotic surgery.

STHS introduced robotics to the Northshore with purchase of its first surgical robot in 2007, following up over the intervening 12 years with additional purchases, upgrades and replacements, enabling more STHS surgeons to use the revolutionary technology for their patients.

The da Vinci allows more surgeons to perform complex procedures using a minimally invasive approach—routinely

and with confidence. Its increased capability within the same look and feel of open surgery allows a range of procedures to be performed more quickly and easily through smaller incisions.

“We have a longstanding commitment to our neighbors on the Northshore,” Joan Coffman, president/CEO, said, “to deliver world-class healthcare close to home. Our latest acquisition of a third da Vinci places the very latest and most versatile technology in the hands of our caring, compassionate, highly skilled surgeons. That is a powerful combination for our patients.”

“The da Vinci robotic system combines superior 3D imaging with dexterity, precision and control to produce breakthrough capabilities for our surgeons. We are proud to add a third system to expand our surgeons’ access to this advanced level of technology.” - Nancy Ledet, director of surgical services

Richard Hodgson was St. Tammany Health System's first TAVR patient. After his Wednesday morning procedure, Hodgson recovered in the hospital and went home Thursday evening. He was back to his usual neighborhood walk Friday.

Life-changing Heart Procedure (TAVR)

St. Tammany Health System has developed a program for transcatheter aortic valve replacement (TAVR), the first hospital on the Northshore to launch such a program. The less invasive TAVR would not require a patient's chest to be opened, only small incisions similar to angioplasty (threading a catheter to unblock heart arteries).

In the procedure, the doctor threads a catheter through the arteries from a small incision in groin, neck or space between the ribs to place the mesh valve where the diseased valve exists. The entire procedure typically takes an hour or two, and patients typically go home in one to two days.

"This is a program, not a procedure," explained Shannon Holley, STHS department head of cardiovascular services. "We have developed an entire program with a care coordinator and heart team that follow our patients leading into TAVR, during the procedure to post-procedure recovery and follow-up. We are committed to delivering the safest, most innovative advances in cardiac care at St. Tammany."

The STHS TAVR program begins with Karolina Ruthner APRN, nurse practitioner and valve program coordinator. She helps patients navigate the experience before, during and after the procedure.

"We work with the cardiologists and surgeons to determine the best patients for this procedure," explained Ruthner, "and we follow each patient's case through a series of tests and diagnostics that determine the best care plan. Then through the procedure and onto recovery and beyond."

Once the patient is established to be a TAVR candidate, Ruthner arranges the heart team, including interventional cardiologist, cardiovascular surgeon and support team including nurses and technologists from the cath lab, along with the surgical team and anesthesia professionals to ensure both the minimally invasive and the open procedure

are prepped and available.

"Any TAVR case has some risk for needing to become an open case," explained Holley. "As part of our program, we have set up a cath lab with the equipment and personnel we need to perform the TAVR or to switch to an open heart surgery should that become necessary."

Dr. Salam from Covington Cardiovascular Clinic at STHS and Dr. George Isa from Ochsner Health are the TAVR interventional cardiologists, and they collaborate with Ochsner cardiothoracic surgeons Dr. Jose Mena, Dr. Greg Eckholdt and Dr. Charles Dicorte.



Capabilities in Nursing

Nursing on the go with Handheld Devices

In February 2019, St. Tammany Health System (STHS) launched the Rover application. Rover is an application used on a handheld mobile device designed to allow nurses and other clinicians to improve their productivity and efficiency. Rover allows the nursing staff and other clinicians to review pertinent patient data, document medication administrations and patient assessments on the go. This application also allows the nursing staff to communicate quickly and easily with their patient's care team. STHS nursing staff and other clinicians including nursing assistants, respiratory therapist, environmental services, and transportation staff also utilize the application to help improve patient care at the bedside and communication among the entire care team at St. Tammany Health System.

TeamSTEPPS

Improving trauma team performance as our trauma program grew was top priority. The team's performance has a great impact on patient care. During our process to obtain our Trauma Center verification from the American College of Surgeons (ACS) we learned more about the captured data and how it is used for our benchmarking. Our trauma care is benchmarked with many other trauma centers throughout the Nation. Our goal at St. Tammany Health System is to provide outstanding care to all patients and see this reflected in benchmarking. We used the Team Strategies and Tools to Enhance Performance and Patient Safety (TeamSTEPPS) model by the American Hospital Association to educate our staff members. With the leadership of a doctoral nurse practitioner student from Southeastern University and our trauma program manager, we provided multiple classes for nursing, respiratory, radiology, lab and physicians to teach team building and communication skills. Using these skills would improve our performance, and the skills taught can be adapted to any medical situation.

The structure of TeamSTEPPS is based on communication, situation monitoring, team leading and mutual support. Although these skills are used daily, code events, including trauma alerts, take a deeper dive into all of these structures,

helping staff understand the importance of each step. Being a trauma center shows the hospital is ready with multiple resources, committed to caring for all types of patients, has multiple policies in place specific to trauma care, and continually evaluates performance improvement. The TeamSTEPPS structure includes everyone on the patient care team: patients, families, direct caregivers and all individuals that play a supportive role. Research was done pre- and post-education to allow us to show improvement to the entire organization graphically. It was found that the length of stay (LOS) for trauma patients in the Emergency Department was much higher than the standard provided by the American College of Surgeons Trauma Quality Improvement Program (ACS TQIP) pre-education. The biggest fallout pre-education with data in our trauma registry was capturing important documentation within the time frame given by ACS TQIP. With education of using the TeamSTEPPS process our length of stay and documentation improved 35-40% in just two months. We continue to use TeamSTEPPS in our daily medical practices to improve care across the spectrum.

Surgical Services' PeriOperative Program

In November 2007, the St. Tammany Health System Surgery Department initiated the Peri-op Program. The program's curriculum was developed by the Association of periOperative Registered Nurses (AORN). This was developed to guide the education and orientation of registered nurses to the operating room environment. This became necessary as less surgical clinical experience was offered by nursing schools. The program consists of both classroom learning and clinical orientation. There is an exam that must be passed to complete the program. Since 2007, 28 nurses have successfully completed the program at St Tammany Health System. The program currently accepts four nurses per year.

Susan Nelson worked as a surgical scheduler for STHS. For six years, she worked closely with nurses from the operating room. This fueled her ambition to become an operating room nurse. After going back to nursing school, she fulfilled her dream of becoming an operating room nurse

Every health system colleague contributes unique skills and responsibilities to the ultimate goal of saving and improving lives. Innovation, compassion and skill combine to make STHS the world-class choice for healthcare, close to home.

at St. Tammany Health System. She completed the peri-op program in 2014. She continues to care for our community in surgery today.

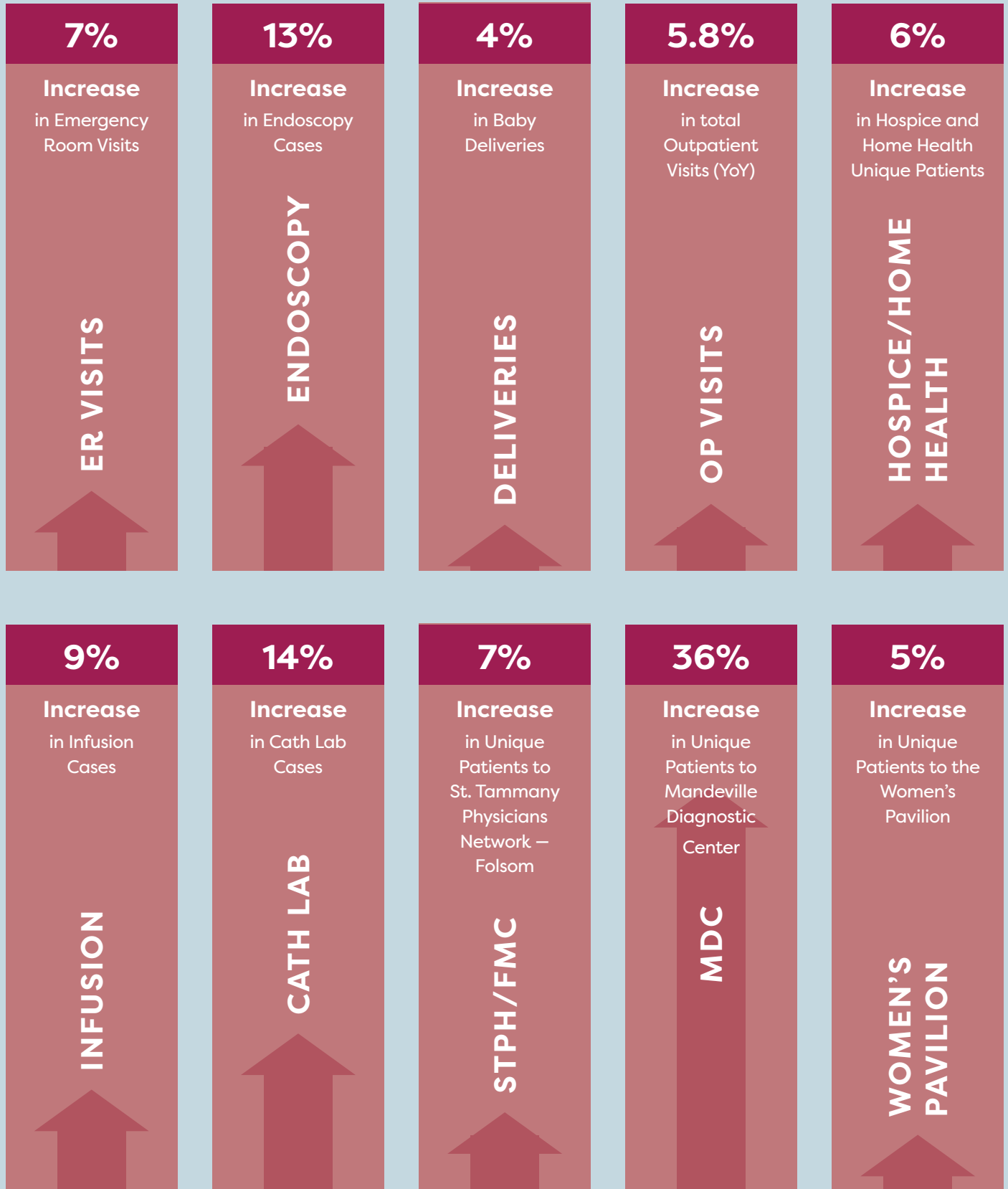
In September 2019, Susan's daughter was selected for the peri-op program. Ashley Toomer was certain that she wanted to work at St. Tammany Health System and care for patients in the operating room. She is learning from other nurses with operating room experience. From nurses like her mother, she will learn a valuable skillset to care for our community.



Susan Nelson and her daughter, Ashley Toomer, STHS nurses



Trauma Program Team



A photograph of two young children sitting on a grassy field, reading books. The child on the left is a boy with short brown hair, wearing a red and white striped shirt. The child on the right is a girl with long brown hair, wearing a black and white striped shirt. They are both looking down at their books. The background is a soft-focus outdoor setting with green grass and a warm, golden light. A white horizontal line is at the top of the page, and a vertical line is on the right side.

**AROUND HERE,
HOWEVER, WE DON'T
LOOK BACKWARDS FOR
VERY LONG. WE KEEP
MOVING FORWARD,
OPENING UP NEW
DOORS, AND DOING
NEW THINGS, BECAUSE
WE'RE CURIOUS AND
CURIOSITY KEEPS
LEADING US DOWN
NEW PATHS.**

— WALT DISNEY

Endless Innovations

In south Louisiana, we don't just treasure tradition. We live it every day. And while that's fine for tailgating and Jazzfesting and king caking, St. Tammany Health System knows that when it comes to healthcare, the best way to do something just might be a way that has yet to be dreamed up. It's that innovation-embracing mentality that keeps it perpetually at the front of the field, always looking for new ground to break, new ways to keep St. Tammany Parish healthy – and, OK, we admit it: for new king cakes to eat.



Groundbreaking Alternatives to Opioids For Pain

A pain-management approach that combines reduced use of opioids with pain-relief methods such as heat and ice packs has made St. Tammany Health System a U.S. leader in combatting the national opioid crisis at the local level.

The Society of Hospital Medicine describes aspects of the approach developed by the hospital's Opioid Stewardship Committee over the past three years as "groundbreaking."

The committee's work earned a 2018 Brilliance Award from national healthcare-quality firm Vizient.

In use system-wide, the committee approach uses a go-slow approach to pain medication.

Rather than receiving opioids at the outset, STHS patients first experience non-prescription options including heat, cold, electrical stimulation, acetaminophen or anti-inflammatory drugs. Patients who do not experience adequate pain relief may be prescribed opioids for a limited time.

Limiting patient exposure to opioids is crucial because some patients can develop dependency on the drugs in as little as five days, noted committee co-chair and STHS clinical pharmacist Ashley Wilson.

"The idea is to start small to see if the pain can be relieved," Wilson said.

Non-pharmacological treatments such as moist heat, ice-cup massage, cold packs and electrical stimulation are clinically proven pain-management methods.

Such hands-on practices increasingly fell by the wayside as opioid prescriptions for pain accelerated, explained physical therapist Bert Lindsey, the committee's co-chair and head of STHS inpatient rehabilitation services.

"This is proven technology. Interest in it is coming full circle as people look for alternatives to opioids," Lindsey said of the techniques he learned more than 20 years ago while training to become a physical therapist.

The STHS approach includes dry needling and kinesiology tape, alternative modalities for pain management that other U.S. hospitals have yet to migrate into acute-care settings, Lindsey noted.

The committee's formation in 2016 seems prophetic, with Vizient that year calling on healthcare providers to develop alternatives to opioids. The Joint Commission in 2017 directed hospitals to develop non-opioid alternatives to pain

management, and the U.S. government declared opioid misuse a public health emergency.

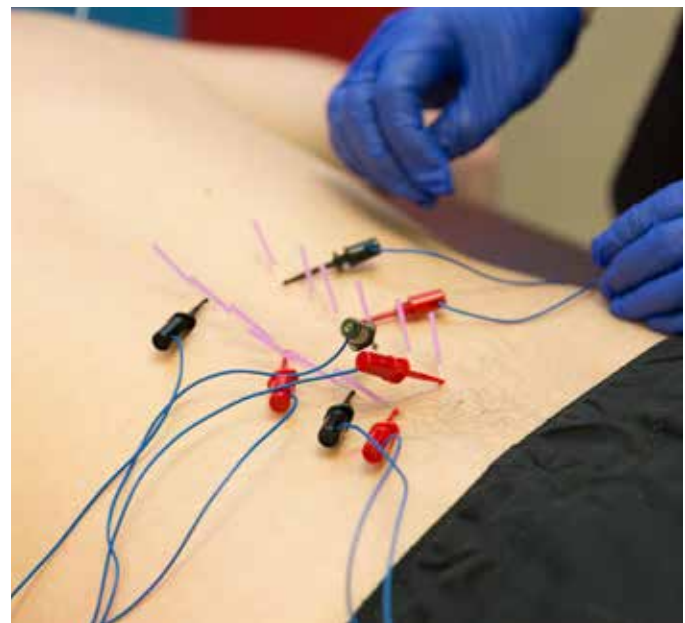
In late 2016, just months after the committee's formation, STHS was chosen for an 18-month mentorship with the Society for Hospital Medicine's Reducing Adverse Drug Events related to Opioids (RADEO) program, one of just 10 U.S. hospitals chosen for the program.

RADEO participation proved promising when participants in a pilot program reported significant reductions in pain.

The experience of individual STHS patients further stoked interest in the committee's work. A 22-year-old woman who was admitted to STHS with severe pain after a boating accident offers a case in point.

After three days of treatment with soft-tissue manipulation, moist heat and Tylenol, the patient's pain rating dropped to three from nine, and she was confident enough to leave the health system upon discharge without opioids.

Limiting patient exposure to opioids is crucial because some patients can develop dependency on the drugs in as little as five days.





Laboratory Technology Makes Antibiotic Care Safer for Patients

St. Tammany Health System has added two new technologies to its microbiology laboratory that reduce the time needed to identify causes of blood stream infections, enabling caregivers to improve the appropriate use of antibiotics for patients in the hospital, reducing their time to heal.

“Polymerase Chain Reaction and Fluorescent In Situ Hybridization enable us in the lab to reduce the time to organism identification and subsequent antibiotic therapy to three-to-seven hours once the blood culture has become positive,” Pam Pound, retired laboratory department head, explained. “Prior to our introduction of these technologies, it could take 48 to 72 hours to identify the organism causing the infection and which antibiotic would be the most effective treatment.”

The hospital’s investment in technology enables the lab staff to more quickly provide the clinician the information needed to place the patient on appropriate treatment, thereby making antibiotic use more efficient and more accurate in the patient’s progress toward recovery, while also decreasing production of resistant organisms, sometimes called “superbugs.”

Reducing the time to treatment is exceedingly important in the case of patients with sepsis, a life-threatening condition. According to the Centers for Disease Control and Prevention (CDC), sepsis happens when an infection already present in a person triggers a chain reaction in their body. Without timely treatment, sepsis can rapidly lead to tissue damage, organ failure and death.

Innovations in Nursing

Innovation through the Accountable Care Unit

In 2019 the division of nursing at St. Tammany Health System began its journey toward high reliability through an effort to transform care at the bedside. Our goal was to empower and engage our workforce to deliver the best possible care. Our challenge was to eliminate the barriers to that goal and deliver on the promise that each patient deserves the very best from us.

To achieve our success, we knew that we needed a proven model that could give us a framework for the transformational change we were looking for. Much great work was happening within our clinical nursing units, but the work did not have an effective impact across other divisions. So many people touch our patients, yet our communication is often inconsistent.

A number of hospitals in the United States have implemented a version of the Accountable Care Unit (ACU) model with varying success. We chose to use the ACU model as designed by Dr. Jason Stein so that we could ensure success and sustainability, since his implementation track record has been in over 100 hospitals. “The ACU ... is a collaborative care model that provides a team-based approach to patient care and actively involves all members of a unit-based team, including the patient and family in structured interdisciplinary bedside rounding,” Stein said.

Central to the implementation of this ACU model is the hospitalist - nurse manager leadership dyad and structured interdisciplinary bedside rounds (SIBR). Shift-to-shift team huddle and nurse-to-nurse bedside handover augment the information the nurse delivers in the SIBR. The SIBR rounds are completed at 10:30 a.m. with the patient and family present. We also Facetime family members or put them on speaker phone so they can participate. Each team member

has a defined sequence and script of pertinent information that is to be delivered in the round. The hospitalist leads off the round with the patient’s primary nurse, RN case manager or social worker, and pharmacist each taking their turn to address the patient. The patient, family, and team members hear the details for the diagnosis, current status, plan of care, discharge plan, medications and medication reconciliation so communication is clear and consistent. The patient and family have an opportunity to add to the information and ask questions. Each round is a short 3-5 minutes. If the need arises for more lengthy discussion, those conversations occur after the rounds on all patients are completed. Team members come to the round prepared so that much is accomplished.

Our first units to go live with the model have had a number of positive outcomes. When hospitalist are assigned to a specific unit, they develop relationships with the nursing staff that just are not possible when seeing patients on every floor. Mutual respect and collegiality are the fruits of those relationships. The hospitalists have become keenly aware of the talent imbedded in our nursing workforce. People feel like they are part of a team.

Millennials are rapidly becoming our largest population of newly hired nurses. These young nurses want to practice in an environment that supports them as bedside leaders in the care of patients. The rounding experience is perfect for this group by enabling our young nurses to be empowered quickly — to use critical thinking skills at the bedside every day and be recognized as an expert on their patients. We embrace the development of our millennial nurses by placing them on ACUs. The unit culture and care team enables them to do their best work.

Our dedication to SIBR impacts patient safety. Issues discussed in SIBR are addressed in real time with team input such as medication changes, home medications that are identified, validating the history and reason for admission, family dynamics and home environment for post discharge care and much more. Out of our work with the ACUs, we implemented a “good catch” program. We found that our nursing staff were catching and fixing numerous issues related to safety or coordination of care, but we never heard about these wonderful actions. Our nurses just took care of these issues without looking at the potential bigger picture of system issues. In the last months we have had good catches reported that range from high safety issues that needed

“The Accountable Care Unit ... is a collaborative care model that provides a team-based approach to patient care and actively involves all members of a unit-based team, including the patient and family in structured interdisciplinary bedside rounding” - Jason Stein MD.



“I have never seen anything like this before in any other hospital. I just feel so informed about my mother’s care and the communication happening with the entire team.” -Patient Family Member

addressing stat to lower-level issues.

Here is what our patients are telling us how they feel about this new approach to care:

“I have been coming to STHS for all my life. The added morning routine of going over what has happened so far and what to do, recap session, has been much appreciated. Good Job STHS!”

“I have never seen anything like this before in any other hospital. I just feel so informed about my mother’s care and the communication happening with the entire team.”

“I am just so impressed that St. Tammany is doing this.”

“We have been here multiple times, but this time is different. The rounds are a very welcomed change. We get information.”

Another area that has become a huge win for us is length of stay, since as a team we are better able to prepare for and predict discharge. Our nurses are no longer calling and texting physicians to clarify orders or address incomplete orders. With the hospitalist present on the units, those questions are easily addressed during and after the rounds.

Since the implementation, we have seen our length of stay

drop by one day. The communication between team members in the round contributes to the efficient delivery of the medical treatment plan, as well as planning for discharge early in the stay. As a result we are better able to turn over the bed for a new admission.

With the ACU model requires Physician-Nurse Dyad leadership accountability. Our hospitalist and nurse manager for the unit are equally engaged in assessing unit metrics and acting on issues. The dyad delivers a quarterly operational review of the unit and discusses outcomes with our executive team. This activity keeps the dyad invested in their success and allows them to receive feedback and support from not just the CNO but the other executive team members as well. They have the ability to tell their story and gain credibility for their work.

This year we successfully implemented ACUs. We anticipate going live with three additional units in 2020. We see the transformation that is occurring with this change. Our nurses tell us they love the model. Physicians working on an ACU do not want to work in the old model. With any change there will be challenges and success. That success has continued to fuel our desire to keep embedding the model in our nursing workforce and reaching forward to spread this success throughout the hospital.

Supporting Local Nursing Students

St. Tammany Health System (STHS) is a supporter of southeastern Louisiana nursing programs. Throughout 2019, STHS has been a clinical site for five nursing schools: Southeastern Louisiana University, Louisiana State University, Delgado-Charity School of Nursing, Northshore Technical College (Sullivan and Hammond campuses), and Delta College. STHS hosted 140 students in spring 2019, 65 students in summer 2019, and 120 students in fall 2019. Nursing students are placed on our medical/surgical/telemetry floors, Emergency Department, critical care units, New Family Center, as well as our specialty areas such as pre-op, CVO, endoscopy and infusion. Students are also placed in the Mandeville ED and Home Health.

St. Tammany Health System worked in conjunction with Southeastern Louisiana University’s senior preceptorship program research study: Perceptions of Preparedness for Nursing Practice Using a Preceptorship Model. This study found that change to a preceptorship model across multiple healthcare agencies is feasible and possible with positive results from the agencies’ and the students’ perspective.



This preceptorship model was unique in implementation in that the assignment of the preceptor/student pair and faculty involvement was decentralized at the faculty level. Each faculty coordinated the assignments, supervision of the experience and evaluations for a team of eight students. This decentralized preceptorship model allowed the faculty to develop close relationships with the healthcare facility, preceptors and nursing students, which allowed for quick identification and addressment of any issues or concerns.

The students and faculty perceptions both indicated consistently higher positive scores on preparedness for those who were precepted. These findings could be considered clinically significant as nursing students who feel more confident and prepared for the professional role they will be

assuming will likely feel less anxiety and less role fatigue.

Authors have shown that nursing students who were precepted in their senior clinical experience had more opportunities to perform skills and procedures (Henricks et al., 2013; Mamhidir et al., 2014; Shepard, 2014). The findings of this study reinforce previous literature as nursing students' perceptions of their ability to care for the dying patient, delegate tasks, communicate with the healthcare team, and perform clinical skills and procedures all increased. Additionally, nursing students felt overall more prepared and ready for the professional role of registered nurse.

The findings of this study have been used to improve teaching practices and have enhanced recruitment opportunities of

these new nurses by the healthcare facility partners who supported the change to the preceptorship model. This study indicates that moving from a traditional to a preceptorship model for senior nursing students is feasible and has positive outcomes with faculty and healthcare agencies' collaboration and support. Anecdotal narratives from students, preceptors, and faculty all indicated positive experiences with the preceptorship model. As a result of this preceptorship, STHS hired 10 Southeastern nursing students for the RN Residency Program; these nurses were able to commit to several med surg floors, ED, critical care and new family center.

St. Tammany Health System supported nursing students during different phases of their education. We provided a leadership rotation to three RN to BSN students and one MSN student. One of our NP students is working with our Emergency Department to complete her DNP research project. The STHS Education Department precepted two students, both working on her Masters of Science in Nursing with a concentration in Nursing Education. One LSU clinical group was able to attend a shared governance meeting in the spring 2019.

St. Tammany Health System worked closely to aid nurse practitioner students with placement in our hospital and off-site clinical areas. In 2019, 25 nurse practitioner students from the following universities completed their clinical rotations at STHS and its clinical sites: Southeastern Louisiana University, Louisiana State University, Loyola University, University of South Alabama, Herzing University, Graceland University, University of Alabama-Birmingham, and University of Louisiana-Lafayette. St. Tammany Parish Hospital and its offsite clinics are a popular clinical site for the Northshore area.

Throughout 2019, we had several high school and college students reach out to the STHS Education Department with an interest in the nursing profession. In collaboration with the high school "School to Work" program, we had 23 high school students shadow in the following nursing areas: critical care, endo, pre-op, emergency department, NICU, and the Mandeville ED. These students attend Mandeville High School, Fontainebleau High School, Lakeshore High School and Northlake Christian. STHS hosted students in the summer for the "Collegiate Shadow Program." Three of those participants had a high interest in the nursing profession and shadowed in pediatrics and off-site clinical areas.

"STHS preceptorship program has allowed me to grow as a nursing student by providing hands-on skill training, continuous education and demonstrating the importance of teamwork in patient care. It is a great learning experience and foundation for nursing students before graduating into the career itself!" – Kayley P.

NURSE STRATEGY DAY 2019

In August 2019, St. Tammany Health System (STHS) held its inaugural Nurse Strategy Day. It was a day dedicated to nursing staff who wished to increase their knowledge and efficiency in the tools and resources currently available. This was in an effort to optimize patient care and outcomes. This day gave nurses the opportunity to make suggestions on which topics and processes they wanted additional education on. Therefore, in collaboration with nursing staff, the agenda consisted of various presentations across multiple disciplines. Topics included medication administration safety, electronic health record (EHR) downtime processes, patient discharge instructions, various EHR tips and tricks, as well as 1:1 hands-on time with EHR analysts. The response for this event was held in such high regard that this day will be offered on a quarterly basis in the future.

Accreditations and Awards

St. Tammany Health System consistently earns local, regional and national recognition for safety, quality and patient experience. While no other Northshore health system rivals these achievements, awards pale in comparison to the endorsement of our own patients, neighbors, colleagues and physicians. Overwhelmingly, these groups say they would recommend St. Tammany Health System to their loved ones. That is our true reward.







ADDITIONAL ACCREDITATIONS

American Academy of Sleep Medicine

American Association of Blood Banks (AABB)

American Association of Cardiovascular and Pulmonary Rehabilitation (AACVPR)

American College of Radiology (ACR)

*All imaging modalities
at all locations
Breast Imaging Center
of Excellence*

American College of Surgeons

*Commission on Cancer Accredited
Community
Program (CoC)
National Accreditation Program
for Breast Centers (NAPBC) Verified
Trauma Center, Level 3*

American Diabetes Association (ADA)

American Heart/Stroke Association (AHA or AHA/ASA)

*Advanced Certification for Primary
Stroke Center (AHA and Joint
Commission)
Fit Friendly Workplace
Stroke Quality Achievement Award
Get with the Guidelines Stroke Gold*

Baby Friendly Birth Facility

Gift Shining Star

Infectious Diseases Society of
America Antimicrobial Stewardship
Center of Excellence

Joint Commission

NICHE (Nurses Improving Care
for Healthsystem Elders)

Society of Cardiovascular Patient
Care Chest Pain Center

Expanding Facilities

Throughout 2019, St. Tammany Health System progressed in its largest expansion project in almost 20 years. The project is designed to support the hospital's growth during the next five to 15 years. Its highest-profile element is a 160,000-square-foot building that will require 18 months for contractor Milton J. Womack of Baton Rouge to complete. Its first phase was to develop sufficient parking at the periphery of the main campus to allow for the new building construction.



The four-story addition to the main hospital building will include 30 critical-care beds on the second floor, 40 medical-surgical care rooms on the third floor, administrative operations on the first floor and unfinished shell space to accommodate future expansion for the growing hospital on the fourth floor.

Master Facility Expansion

The four-story addition to the main hospital building will include 30 critical-care beds on the second floor, 40 medical-surgical care rooms on the third floor, administrative operations on the first floor and unfinished shell space to accommodate future expansion for the growing hospital on the fourth floor.

Renovation in the existing hospital will follow the new building construction. This third phase of the project will improve space and introduce new technology for obstetrics and the hospital's Level III neonatal intensive care unit (NICU).

The overall project is scheduled for completion in 2020.

The expansion is driven by growing market demand from several sources, including a continuing influx of young families to St. Tammany Parish and STHS's partnership with Ochsner Health, which elevates the level of care available in the parish's largest hospital.

STH President/CEO Joan Coffman noted that a chief objective of the hospital's 2014 partnership with Ochsner—improving access to medical specialists in west St. Tammany Parish—has increased the number of patients receiving that level of care close to home.

“We’ve seen tremendous growth as a result of the partnership,” Coffman said. “The expansion will accommodate the additional demand created by improved access to specialists.”

Market analysis also shows that more community physicians on the Northshore are using STHS, which already runs at 85 percent capacity most of the time, noted Sharon Toups, chief operating officer.

“The need to grow is well established,” Toups said.

Finishing the transition to all private rooms is an important milestone in the history of the hospital, which opened in 1954 with 15 beds in wards. On the Northshore as elsewhere, a general shift to outpatient facilities for more procedures means patients who need to be admitted to the hospital tend to be sicker than in the past, Coffman said.

“We see a higher level of acuity when patients are admitted,” Coffman said.

The move to all-private rooms is especially significant in view of that shift because studies show private rooms promote healing, shorten lengths of stay and reduce the risk of infection.

Enhancing Care through World-class Technology

St. Tammany Hospital Foundation kicked off a two-year, \$300,000 initiative to help equip the 160,000-square-foot addition now under construction with next-level technology to enhance patient care, comfort and safety. STH Foundation's Expansion Initiative aims to outfit the new building with technology for use by both care providers and patients once the project is complete in 2020.

"This technology is in step with the need to provide world-class care in our growing community," said Greg Pellegrini, chairman of the STH Foundation Board of Trustees. "These are important investments for quality of care."

Technology planned for the new building includes devices that seem out of the future, such as cleaning robots that reduce the risk of infection by zapping bacteria from the air and solid surfaces.

Specific funding priorities for the expansion include handheld devices that permit nurses to quickly send and receive information related to patient care, from treatment plans to updates on availability of patient rooms. The devices also enhance patient safety by allowing nurses to administer medication with the help of barcodes and easily share

information about patient fall risks and allergies, explained Sharon Toups, STHS chief operating officer.

"This technology both enhances care and aids efficiency," Toups said.

Devices to more fully involve patients in their own care are another priority of the fundraising effort and include bedside computer tablets to give patients easier access to their treatment plans, laboratory results and other information, Toups said.

Patients also can use the iPad-based technology to see what is planned for their care that day and for online education modules to learn more about their health condition and how to care for themselves after discharge, said Nicole Suhre, STHF executive director. "This is a good way to expand patients' understanding of their care and more fully involve them in their own care," Suhre said.

Light-based disinfecting technology is another funding priority. Continuously cleaning robot-like devices use visible light to safely, automatically and continuously kill bacteria in the air as well as on hard and soft surfaces.

Technology planned for the new building includes devices that seem out of the future, such as cleaning robots that reduce the risk of infection by zapping bacteria from the air and solid surfaces.



**THE FUTURE IS IN THE
HANDS OF THOSE
WHO EXPLORE ... AND
FROM ALL THE BEAUTY
THEY DISCOVER
WHILE CROSSING
PERPETUALLY RECEDING
FRONTIERS, THEY
DEVELOP FOR NATURE
AND FOR HUMANKIND
AN INFINITE LOVE.**

— JACQUES YVES COUSTEAU

A person wearing a bright blue jacket is looking through binoculars. The background is a blurred natural scene with green and brown tones, suggesting a forest or a rocky landscape. The text is overlaid on the left side of the image.

Our People

Our colleagues, physicians, volunteers and leaders are the heart and soul of our health system. In 2019, St. Tammany Health System achieved considerable honors for quality, safety and the patient experience, thanks to the personal connection we feel with our patients. At the heart of it, we believe it's the relationships among physicians, staff and patients that makes our exceptional results possible.



STHS Executive Team

Back row left to right: Mike Hill MD; Sandra Dipietro MBA, SVP/chief financial officer; Patrick J. Torcson MD MMM, SVP/chief medical officer; Craig Doyle, VP/chief information officer; Margaret Collett RN JD, VP/chief compliance officer; Jack Khashou M.Ed MS, VP/St. Tammany Quality Network; Front row left to right: Carolyn Adema SPHR, SVP/human resources; Sharon Toups FACHE, SVP/chief operating officer; Joan M. Coffman FACHE, president and CEO; and Kerry Milton BSN RN MSHA, SVP/chief nursing officer.



STHS Board of Commissioners

Back row left to right: Thomas D. Davis, secretary – treasurer; Wilson D. Bulloch III; Pat Brister; Merrill Laurent MD; Front row left to right: Sue Osbon PhD; John A. Evans, chairman; James L. Core, vice chairman; Mimi Goodyear Dossett.



Pat Brister



St. Tammany Health System gained and then lost an exceptional resource on the Board of Commissioners in 2019.

St. Tammany Parish President Pat Brister began participating on the board in January 2019 in her capacity as parish president, after her designee Pizzie Romano passed away in December

2018. She became ill in December 2019 and died Feb. 3, 2020, leaving a long legacy of service to St. Tammany Health System, our parish, community, state, nation and the world.

Brister served eight years as parish president and eight on the parish council; volunteered on the boards of St. Tammany Children's Advocacy Center, Commission on Families and Habitat for Humanity East and West chapters; and headed the Delegation to the UN Commission on the Status of Women. She will be greatly missed in our community and our health system.

Kerry Milton

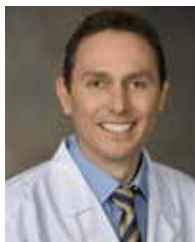


With innovation as a central focus of her leadership, Kerry Milton, senior vice president and chief nursing officer at St. Tammany Health System, assumed chairmanship of Vizient Southern States Nursing Executive Network with an emphasis on recruitment and retention of nursing staff. Under Milton's

chairmanship, the Nursing Executive Network earned recognition as Vizient Network of the Year for 2018 with the innovative idea of using a virtual book club to build cohesion and participation.

The group's most innovative action was a virtual book club in which each of the member CNOs worked in pairs to lead Webex chapter discussions for the larger group of nurse executives. The success of it has inspired Milton to host a local book club for her nurse managers at St. Tammany Health System, with a curriculum built around the book "Nurse Leader As Coach."

Daniel Ilie



As chairman of the Medical Services Committee, Daniel Ilie MD FACP guides the quality agenda for St. Tammany's clinical service lines. In this capacity, he has led projects that have, among other achievements, reduced readmissions for high-risk patients from 13.2% in 2017

to 10.9% today. In addition, Dr. Ilie is a champion of the hospital's electronic record and physician order entry, which improves accuracy of prescriptions.

Ilie was the physician champion for St. Tammany's launch of Accountable Care Units (ACUs), a style of inpatient hospital care that improves efficiency, accuracy and overall patient and staff experience in acute care settings through adherence to structured interdisciplinary bedside rounds (SIBR).

"It represents a change in culture regarding the way inpatient rounds are done," Ilie explained of SIBR. "Different disciplines act as one, encouraging the patient's involvement in their care at the time that rounds are made at the bedside."

George Bensabat



Dr. George Bensabat was named STHS Medical Director for Informatics (MDI) in 2019, continuing clinical practice as a hospitalist and serving as the champion for the clinical application of information technology to improve quality and efficiency at STHS. He works with the onsite clinical analysts and

collaborates with Ochsner Health for ongoing optimization and development of the Epic electronic health record toward the following objectives:

- Engagement with physicians, nursing, ancillary personnel and medical records professionals to contribute to the optimization and use of clinical information systems at STHS.
- Serve as a bridge between the STHS medical staff and Ochsner to provide bi-directional communication related to utilization and optimization of clinical information systems.
- Participate as an active member on the STHS Medical Informatics Sub-Committee and Ochsner system meetings.

Our Foundation

**KEEPING ST. TAMMANY HEALTH SYSTEM HEALTHY
KEEPS OUR COMMUNITY HEALTHY**

The foundation raises funds through a comprehensive development program including corporate partnerships and major gifts, planned giving, bequests and charitable gift annuities, tribute gifts, an annual support program and special events. In doing so, the foundation impacts the healthcare and well-being of the entire Northshore community.





A Community that Cares

Dear friends,

Thank you for all that you did in 2019 to support St. Tammany Health System through St. Tammany Hospital Foundation.

We are proud to recognize the 1,738 individuals, STHS colleagues, businesses, organizations and foundations who made contributions totaling over \$1.1 million. The generosity of our community brought the total amount donated in support of the health system's world-class healthcare to more than \$19.8 million since inception.

Community support enabled the foundation to transfer \$682,163 to St. Tammany Health System in 2019, funding equipment purchases, employee training opportunities, department programs, health system initiatives and more.

The foundation had so much to celebrate in 2019 including the unveiling of the new Honor Red White and Blue Veteran Display, the largest Healing Arts Initiative exhibition to date, featuring more than 100 pieces of healing work from 23 regional artists, recognition of Northshore Media Group as the 2019 "Adrian" Spotlight Award recipient, exceeding the Expansion Initiative goal with contributions totaling more than \$380,000, collaborating with partner Mary Bird Perkins in the launch of the Investor Collective fundraising group, the dedication of the Pizzie Romano inpatient Infusion Suite and the addition of a new member to the Board of Trustees, Mimi Dossett.

Our STHS family wowed us again with 851 employees and physicians raising \$115,218 through the WE Care Employee Campaign and St. Tammany Hospital Guild's gift of more than \$65,000.

Corporate sponsors, individual supporters and community volunteers turned out to support a wide variety of events this year including Gurney Games and the Get Lucky! Golf Tournament benefitting the Expansion Initiative, THE Gala benefitting St. Tammany Cancer Center, Monster Mash benefitting the STHS Parenting Center and Angels of Light, which was dedicated this year to the memory of John "Pizzie" Romano and benefited Hospice. Revenue from these signature special events brought in more than \$333,600. Additional and third-party events benefitting our foundation raised more than \$33,700, including the St. Tammany Women's Council of Realtors' Bras for a Cause, Helping Hands Gallery, Ruby's Kids and new Survivors, Thrivers and Drivers Car Show.

The year-end appeal mailing, penned by STHS President and CEO Joan Coffman raised more than \$31,700 for barriers to care, including transportation grants, St. Tammany Cancer Center therapeutic food pantry and forensic pediatrics.

The St. Tammany Hospital Foundation believes that *Keeping St. Tammany Health System Healthy Keeps Our Community Healthy*. On behalf of the board and staff of the foundation, we thank those who supported our mission in 2019, positively impacting the health and wellbeing of the entire Northshore community with every gift.

In gratitude,



Greg Pellegrini
2019 Chairman, STHF Board of Trustees



Nicole Suhre, CFRE
Executive Director, STHF



2019 WE CARE CAMPAIGN EXCEEDS TARGET

The WE Care Employee Campaign provides an annual opportunity for STHS colleagues to support hospital programs and projects they care about through monetary gifts including payroll deductions.

St. Tammany Health System colleagues gave generously to the 2019 WE Care Employee Campaign. Some 850 employee donors pledged \$115,218 to support hospital programs, surpassing St. Tammany Hospital Foundation's stretch goal of \$110,000 for the campaign.

The foundation's expansion initiative is among the projects employee donors choose to support. Funds donated will augment technology for the new patient addition now

under construction. The fund's focus will be to improve patient care with technology such as cleaning robots that reduce infection risk and handheld mobile devices that simplify continuity of care.

Colleagues may also select other programs such as the longstanding Employee Benevolent Fund, for fellow colleagues in crisis, the Healing Arts Initiative and the new therapeutic food pantry.

"The campaign is a true testament to the dedication and compassion of everyone who works at St. Tammany Health System," said Doug Walker, foundation specialist.

We are proud to recognize more than 1,700 individuals, STHS colleagues, businesses, organizations and foundations who made contributions totaling over \$1.1 million. The generosity of our community brought the total amount donated in support of the health system's world-class healthcare to more than \$19.8 million since inception.

STHS Board of Trustees

Back row, left to right: Rock Kendrick; Paul Davis; Joan Coffman; Greg Pellegrini, 2019 chairman; Will Trist, 2020 Chairman; Kevin Gardner; Jim Woodard MD; Nicole Suhre, executive director; Mary Lee; Front row, left to right: Renee Maloney; Darci Senner, secretary/treasurer; Becky Parks; Liz Healy, vice chairman; Norma Richard; Mimi Dossett; Not pictured: Nancy Baldwin; Carlos Sanchez; David Toups MD.



2019 Highlights

RAISING THE BEAM ON EXCELLENCE

In October, the foundation invited supporters, employees and friends of St. Tammany Health System to join us as we raised the final beam on Expansion 2020. Guests had the opportunity to sign their name on the final beam of the expansion and watch live as it was raised into place, forever memorializing their gift. The expansion, expected to be complete at the end of 2020, will include a new bed tower featuring three additional operating rooms, 30-bed critical care unit, 40-bed inpatient unit and fourth-floor shell space allowing STHS to be ready for the future when our community needs us.

LAUNCH OF THE THERAPEUTIC FOOD PANTRY

Mid-year, concerned colleagues in St. Tammany Cancer Center contacted the foundation office to see if any assistance could be given to cancer patients who were experiencing food insecurity during their course of treatment. Financial upheaval that can follow cancer diagnosis means some patients lack access to food, especially food optimal for their well-being. Discussions began that eventually birthed a first-of-its-kind partnership among St. Tammany Cancer Center, Northshore Food Bank and St. Tammany Hospital Foundation to address patient needs through a new therapeutic food pantry at the cancer center. Since opening in early November, the program has already changed the healthcare journey of more than 40 patients in our community in 2019.



LITTLE GRANT... BIG IMPACT

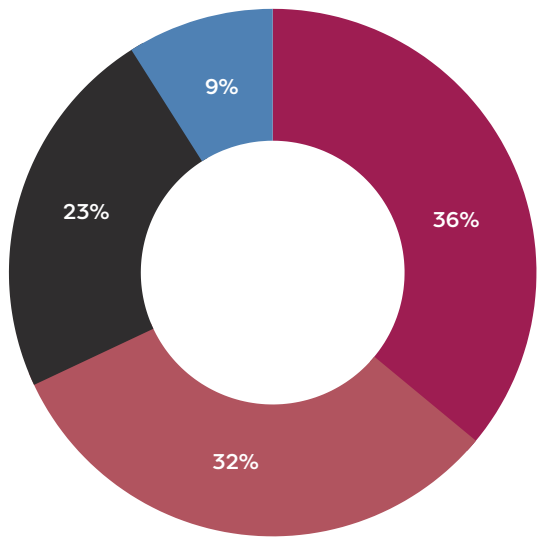
Every time a donor makes an unrestricted gift to St. Tammany Hospital Foundation, 25% of that gift goes into Endowment and 75% goes into the Unrestricted Caring for St. Tammany fund. When the unrestricted fund reaches a certain threshold, the foundation puts out a call for funding to the departments of STHS through the Little Grant, BIG Impact grant program. In 2019, the foundation proudly funded 31 projects impacting 23 departments in the amount of \$204,045. We couldn't do this without the generous support of our donor community!

THE GUILD THAT GIVES: TURNING PROFITS INTO PHILANTHROPY

The St. Tammany Hospital Guild donated an unprecedented \$65,120 for projects and patient care improvements at St. Tammany Health System that include development of groundbreaking alternatives to opioids for pain management, a telestroke cart, iPads for the hospital's pediatric unit, additional rocking chairs for the New Family Center and an infant loss memory kit. More than \$51,000 of the guild's annual contribution, which comes from monies generated by gift shop sales, will support staff training related to nationally acclaimed modalities developed by the hospital's multidisciplinary Opioid Stewardship Committee as safe, effective alternatives to opioids. This landmark gift brought the volunteer group's total cumulative giving to more than \$330,000.

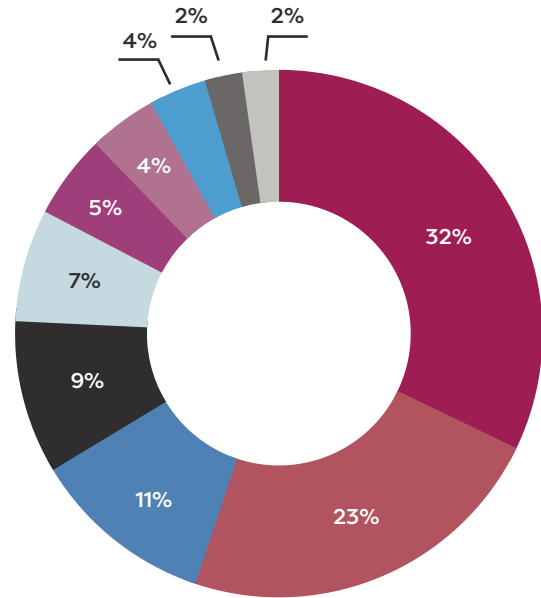


SOURCES OF FUNDING \$1,136,381



- Individuals and Employees
- Companies
- Other
- Foundations/Organizations

STEWARDSHIP OF GIFTS \$1,136,381



- St. Tammany Cancer Center / Mary Bird Perkins / Oncology
- Other
- Endowment / Additional Donor Restricted
- Expansion Initiative
- Employee Benevolent Fund
- Parenting Center
- Women & Child Services
- Hospice
- Unrestricted Caring for St. Tammany
- Healing Arts Initiative

OUR MISSION

The St. Tammany Hospital Foundation, a 501 (c) (3) non-profit organization, was established to sustain the healing work of the physicians and staff of St. Tammany Health System. Through the development of philanthropic support, the foundation seeks to fortify the promise to provide world-class healthcare ... close to home, now and for generations to come.

Our Generous Donors

INDIVIDUALS

Anonymous (112)	Ms. Rebecca Baradell	Ms. Janice M. Bickham	Mr. Harold L. Branch
Mr. Arthur G. Abram	Ms. Rachel B. Barbay	Ms. Robin W. Bickham	Mr. Terry Branton
Mr. Wedad Abrusley	Ms. Linda Bard	Ms. Anna Bienvenu	Mr. James Brassier
Ms. Pamela L. Adams	Ms. Andrea D. Barfield	Ms. Lynn Bigner	Ms. Brittany Breaux
Ms. Doreen Adams	Mrs. Tonia Barker	Ms. Christy B. Billiot	Ms. Pam B. Brechtel
Ms. Megan Adams	Ms. Casey Barnes	Ms. Heather Billiot	Mr. Richard E. Breland
Ms. Jane Adams	Ms. Jean Barousse	Ms. Kerri R. Billiot	Mr. Kenneth P. Brewer
Ms. Carolyn Adema	Mr. and Mrs. Joseph	Mr. and Mrs. Michael Binnings	Mr. Eric Brewster and
Ms. Crystal A. Adkins	A. Barousse	Mr. and Mrs. Mark E. Blanchard	Dr. Sally Brewster
Ms. Eireann Affleje	Ms. Chandra S. Barre	Mr. and Mrs. David Blasini	Ms. Tanya Bridges
Ms. Cheraine M. Agoff	Ms. Cheryl E. Barre	Mr. Brent Blazeovich	Ms. Tracey Bridges
Ms. Heidi Alcorn	Mrs. Joan W. Barre	Mr. John Bloemer	Mrs. Pat Brister
Mr. Julius L. Aldana	Ms. Ashtynn Barrett	Ms. Jennifer Blucas	Ms. Alicia Britton
Ms. Whitney Alexander	Mr. and Mrs. Peter P. Barsczeski	Ms. Sandy L. Bodin	Ms. Mary L. Bronson
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 Mr. and Mrs. Todd Richard
 Ms. Shanon G. Richardson
 Ms. Tish Richardson
 Ms. Suzanne Richoux
 Ms. Catherine A. Richoux
 Ms. Renee Ridgley
 Mr. and Mrs. Scott A. Riecke
 Mr. Zachary Ritchie
 Ms. Bobbi L. Ritz
 Ms. Lisa Rivera
 Ms. Sydney Rob
 Ms. Cynthia Robert
 Ms. Juleah Roberts
 Ms. Molly Roberts
 Ms. Irene E. Robicheaux
 Ms. Andrea R. Robinson
 Mr. and Mrs. James C. Roddy
 Ms. Janine Rodriguez
 Ms. Kelly S. Rogers
 Mr. Brad Rogers
 Ms. Ashia M. Rogers
 Ms. Yvonne Rogers
 Mr. Charles Rohr
 Ms. Penny B. Rojas
 Ms. Jamie O. Romage
 Ms. Lisa M. Romano
 Miss Grace Romano
 Ms. Carol L. Rongstad
 Ms. Laura B. Ronzello
 Ms. Laura Rosamond
 Dr. Arthur L. Rosenkrantz
 Mr. and Mrs. Louis D. Ross Jr.
 Mr. and Mrs. Dennis Rousseau
 Mr. Steve Rowbatham
 Ms. Agabita L. Rowe
 Ms. Pamela O. Rowe
 Ms. Janine Rowell
 Ms. Marleen Roy
 Ms. Kay Royen
 Ms. Leslie Rozycki
 Ms. Lee Anna Ruberts
 Ms. Helen T. Ruberts
 Mrs. Melanie B. Rudolph
 Mr. Ryan Runnels
 Ms. Celeste Rupert
 Mr. David J. Russo
 Ms. Donna Ryan
 Ms. Margaret Saari
 Ms. Lisa H. Sacks
 Ms. Christie Saladino
 Mr. Jeffery Salsiccia
 Mr. Ramon J. Sam
 Ms. Laura Samson
 Mr. Tim San Fillippo
 Ms. Shannon C. Sanchez
 Mr. Michael R. Sanchez
 Ms. Mindy Sanders
 Mrs. Danny Sanders
 Mr. John Sandidge
 Ms. Abby Sandrock
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 Ms. Tonya Santos
 Ms. Lori Sapia
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 Ms. Deborah Saucier
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 Ms. Karen Savage
 Ms. Teresa L. Savoie
 Mr. George Schaefer
 Mr. Jerry Schaefer
 Ms. Stephanie Schehr
 Mr. Robert L. Schellhaas
 Ms. Lisa Schero
 Ms. Chantelle Scheuermann
 Ms. Joni Schexnaydre
 Ms. Chasidy C. Schilling
 The Honorable Scott Schlegel
 Ms. Linh H. Schmelling
 Ms. Rebecca Schmidt
 Mr. Bennett Schmidt
 Ms. Deborah M. Schmidt
 Mr. and Mrs. Gary Schoen Jr.
 Mr. Robert J. Schoendorf
 Ms. Dorothy Scholl
 Ms. Judy Schott
 Ms. Mandy Sciple
 Ms. Amy Scobel
 Mr. and Mrs. Steve Scoggin
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 Mr. Joseph F. Scuderi
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 Ms. Michelle L. Seibert
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 Ms. Lisa Sendra
 Mr. Richard Senette
 Mr. and Mrs. Michael K. Senner
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 Ms. Hollie Serpas
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 Ms. Delindy J. Sharp
 Mr. Karson Sharp
 Ms. Lisa S. Sharp
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 Ms. Linda Shelton
 Mr. Allan Shields
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 Kathe Watson
 Ms. Kim W. Shockley
 Ms. Jennie Sibley
 Ms. Lola Simpson
 Mr. William Sims
 Ms. Ann C. Sinclair
 Ms. Charlene Sinclair
 Ms. Keri Skeins
 Efeditha B. Slater
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 Ms. Challis Smith
 Ms. Brenda V. Smith
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 Mr. Wojciech Sobolewski
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 Mr. Avril Sons
 Mr. Salvador J. Sparacello

Every effort has been made to ensure the accuracy of this list. We sincerely apologize for any omissions or errors.

Ms. Kelly Spencer	Ms. Yolanda Thomas	Mr. and Mrs. Ernest Verges	Ms. Joanna Wilbanks
Ms. Colleen Sprague	Mr. Mathew P. Thomas	Ms. Hilary Verlenden	Ms. Shelli Wilcox
Ms. Melissa Sproles	Ms. Stephanie Thomas	Mr. James Viberg	Ms. Angela M. Wilkes
Ms. Dixie A. St. Germain	Ms. Alene Thompson	Mr. Matthew Vidrine	Ms. Monica Wilkins
Mr. Joseph St. Philip	Mr. Delos Thompson	Mr. Hugo Villanueva	Ms. Dionne M. Williams
Mr. Brett W. Stafford	Ms. Makayla Thompson	Ms. Winn Vinson	Ms. Melanie M. Williams
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Mr. and Mrs. Henry Stanga	Ms. Sharon Tohline	Ms. Kristin M. Vogt	Ms. Bethany I. Williams
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Mr. Christopher Stant	Ms. Margaret Tonti	Mr. L. S. Vuillemont	Ms. Wendi Williams
Ms. Connie Staven	Ms. Layonda Toomer	Ms. Jan Waddell	Ms. Elizabeth P. Williams
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Mr. Jesse Stringer	Mr. Leon G. Touns	Mr. Matthew Walker	Ms. Shelia W. Wirt
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Ms. Martha Swint	Ms. Jordan Tucker	Mr. Wilton Warren	Mrs. Sue Zaunbrecher
Ms. Kristen Sylvest	Ms. Melissa Tumbleston	Mr. and Mrs. Joseph Warren	
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Mr. Mattie Thomas	Mr. and Mrs. Robert Verdin	Mr. Joseph Whittington	Bevolo Gas & Electric Lights

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Bienville Capital Group	Home Bank	Nielsen's City Drug Store	Voya Financial
Billiot Photography & Video	Home Bank Slidell	Nodier Law Firm	Zehnder Communications
Bisso Towboat Co., Inc.	Home Instead Senior Care	North American Insurance	
Bliss Clothing & Home	Horne LLP	Agency of LA., Inc.	FOUNDATIONS
Blossman Oil Co., Inc.	Hospice of St. Tammany	Northshore Swim Lessons LLC	AND ORGANIZATIONS
Blue Cross and Blue Shield of Louisiana	HUB International Gulf South	Nothing Bundt Cakes, Northshore	AA/Al-Anon
Bradley Murchison Kelly & Shea LLC	Humana	Ochsner Health	Baptist Community Ministries
Braswell's Drugs	Inside Northside Magazine	Olive Patch	Blackwater United Methodist Church
Bristol-Myers Squibb Co.	Jefferson Financial Federal Credit Union	Ox Lot 9	Ella West Freeman Foundation
Bush Shell 2, LLC	JFK Martial Arts	P&W Industries, LLC	ExxonMobil Foundation
C.J. Ladner Insurance Agency, Inc.	Jones Concession	Painting with a Twist Mandeville	Greater New Orleans Foundation
Camp Bow Wow	Jones Fussell, L.L.P.	PAM Speciality Hospital of Covington	Helping Hands Gallery
Capital One Bank	Kendra Scott New Orleans	Papa John's Pizza	Hosanna Lutheran Church
Carreta's Grill	Kent Design Build, Inc.	Parish Concrete, LLC	Hunter Whealdon Foundation
Cigna Health and Life Insurance Company	Konica Minolta	POOLCORP	J.B. Levert Foundation, Inc.
Circle D Lawn Equipment Inc.	Krewe of Eve	Principal Financial Group	Kelly Gibson Foundation
Citizens Bank & Trust Co.	KV Workspace, LLC	Professional Emergency Medicine Management	Kiwanis Club of Northshore
CLECO Power LLC	Kyle Associates LLC	Rapid Urgent Care	Louisiana Healthcare
Coldwell Banker TEC Realtors	LAMMICO	Refreshment Solutions, LLC	Mandeville Ladies Club
Colonial Life	LANEY & CO. LLC	Regional Radiology, LLC	Mary E. Peters and Robert W. Polchow Foundation
Columbia Street Mercantile	Latter & Blum- Houma Office	Resource Bank	Northlake Pulmonary Associates, APMC
Community Care Solutions, Inc.	Latter & Blum Insurance Services	Ritz Carlton New Orleans	Northshore Community Foundation
Copal Inc.	Lavigne Oil Company of BR, LLC	Rob's Rockin Dogs	Robert L. Pierce Foundation
Covenant Building Services	Layton Pharmacy	Rocket Restorations	Shell Oil Company Foundation Matching Gifts
D&G Tire and Automotive	Lee Financial Partners	Rug Chic Home Decor	St. Margaret Catholic Church
Daigle Fisse & Kessenich, PLC	Liberty Self-Storage	Smile Doctors Braces by DN Orthodontics	St. Tammany Deputy Sheriff's Association
Deep South Cruisers Car CLB	Lopez Custom Apparel	Smoothie King Franchises, Inc.	St. Tammany Hospital Guild, Inc.
Dependable Glass	Louisiana Tours and Adventures	Sombreros LLC	St. Tammany Health System Medical Staff
Dipnotiq Detailing & Surface Concepts, LLC	LouLa's Snowballs	Southern Avenue	St. Tammany Women's Council of Realtors
Donahue Favret Contractors, Inc.	Majestic Medical Solutions, Inc.	Spirit Professionals	The Bank of America Charitable Foundation, Inc.
E.J. Fielding Funeral Home, Inc.	Manfre & Ringen Home Team at RE/MAX Alliance	St. Tammany Health System	The U.S. Charitable Gift Trust
Egan Hospice Services of Northshore LLC	Mary A. Beilman, D.D.S.	Stone Creek Club and Spa	Trinity Counseling Center LLC
Eustis Engineering	Mary Bird Perkins Cancer Center	Sun Life Financial	Woman's Foundation
fl+WB Architects	Mele Printing Company	Taco Jerks	
Full Throttle Water Slides	Metairie Bank & Trust Company	Talley, Anthony, Hughes & Knight, LLC Attorneys and Notaries	
Gallagher's 527	MetLife	Tchefuncte Ace Hardware	
Gallagher's Front Street LLC	Michele Cooper, M.D.	The Dakota Restaurant	
Gallagher's Grill	Milton J. Womack Inc.	The Hanover Insurance Group	
Gilsbar Specialty Insurance LLC	Money Hill Plantation, L.L.C.	The Iroquois Group	
Globalstar, LLC	Morris & Dickson Co., L.L.C.	The Southern Hotel	
Gulf Coast Bank and Trust	Movement Science Center	Tiny Angel Gowns	
Gulf Coast Classic Cruisers	Multitech Office Machines	Uniforms By Bayou	
Hancock Whitney	Netchex	United Healthcare Services, Inc.	
Hilltop Shoppe	New Orleans Polo Club	UNUM	

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