Quality

Cardiology Services Now Available at Mercy in Nampa

Mercy Medical Center, Nampa, Idaho, recently added interventional cardiology to its service offerings. A team of cardiologists who have moved their practices to Nampa will work closely with the hospital to provide the new service line, which was not previously available in Nampa. Mercy has made a significant investment in necessary equipment and staff, eliminating the need for local patients to travel to distant hospitals for interventional cardiology treatment. “Each minute lost in the critical early stages of a heart problem can mean lost heart muscle function,” said Maryann Reese, vice president of patient care services and operations at Mercy. “Mercy is serious about its commitment to helping Nampa deal with the lack of these services, and we’ve worked diligently to provide the solution.” For more information, contact Kevin Spainhower of Mercy at 208/463-5575.

Birthing Center at Central Kansas Medical Center Adds Centralized Fetal Monitoring

The Level II Birthing Center at Central Kansas Medical Center, Great Bend, Kan., has added a centralized electronic fetal monitoring system that allows nurses and doctors to monitor mothers and babies from any location in the center. Before the installation of the new system, unborn babies could be monitored only within each individual delivery room. The system also links to the offices and homes of patients’ doctors. When there is a change in patient condition, physicians can check the fetal status and, if needed, have an operating room ready by the time they get to the hospital.
Initiatives

Core Strategy: People Assessments Show Opportunities in Human Resources

Human resource assessments have produced actionable data to promote Catholic Health Initiatives’ effort to become a work community of choice in every market it serves. The surveys were not about trying to achieve a “good” score, but about identifying practices that will enable Catholic Health Initiatives to be seen, internally and externally, as a work community of choice.

Vallier Sees New Role for HR

Herb Vallier, senior vice president and chief human resource officer, envisions human resource teams across the system developing the skills needed to serve as change leaders, with a keen eye on driving organizational and system effectiveness. “The foundresses of Catholic Health Initiatives entrusted us with the responsibility to steward resources in a manner that leaves the ministry stronger than it was when we received it,” he said.

Career Development for Entry-level Employees

Entry-level employees at two of Catholic Health Initiatives’ market-based organizations have a new option for career development: a program called School at Work. “This program motivates entry-level employees to continue to learn, to earn degrees and to move into higher-skilled jobs right here at TriHealth,” said Jenny Skinner, director of corporate education for TriHealth, Cincinnati, Ohio.
Herb Vallier, senior vice president and chief human resource officer for Catholic Health Initiatives, anticipates change. At the same time, he envisions human resource teams across the system developing the skills needed to serve as change leaders, with a keen eye on driving organizational and system effectiveness.

“The compelling reason for our human resource function to change and evolve is the fact that the foundresses of Catholic Health Initiatives believed that responsibility for our healing ministry belongs to all of us,” said Vallier. “They entrusted us with the responsibility to steward its resources in a manner that leaves the ministry stronger than it was when we received it. The evolution of our People core strategy creates opportunities for human resource leaders to make operations more effective, to leverage the size of our system and to be good stewards, for the good of all the communities we serve.”

CHI Connect, the electronic system that will standardize processes in human resources and other operational areas within Catholic Health Initiatives, is an important factor in advancing effective service delivery and efficient processing of routine transactions. “The standardization of practices and key processes is what makes CHI Connect important to our ministry of healing,” said Vallier. “The results will deliver more time for us to focus on activities that benefit our ministry, greater employee satisfaction and resource savings worth as much as $50 million annually. Clearly, this kind of transformation in human resource processes will help us fulfill our stewardship responsibilities.”

The implementation of CHI Connect will also provide human resource leaders with an opportunity to develop a new role within their organizations as masters of change. “I am calling on our human resource leaders to more fully develop the core competency of change leadership within human resources and across their organizations,” Vallier said. “Because we carry out the mission and vision of Catholic Health Initiatives in a changing environment, our organization must change, and change is most effective when it is well managed.”

The experience of working with the human resource applications of CHI Connect is giving human resource staff across the system experience in leading change. “We have had to create a detailed approach to accelerating the change associated with CHI Connect that is both considerate of the people involved and mindful of the desired outcomes,” said Vallier. “Our human resource leaders are now in a position to lead change in a way that relies on and reinforces our distinctive culture.”

As always, human resource leaders will remain accountable for the success of the workforce across Catholic Health Initiatives, in partnership with system and market-based leadership. “This is expressed through our recently revised national Human Resources Group charter: we will share accountability with leadership to deliver a workforce capable of executing our health ministry’s strategic priorities,” said Vallier. “We expect to be held accountable. It’s the responsibility of human resources to understand key business drivers, drill down with leaders to determine what’s required to create workforce success, and to work closely with leaders to implement solutions. It all comes back to what our foundresses expect of us as good stewards: that we build a healthy community within Catholic Health Initiatives, just as we do in the communities we serve.”

**National Human Resources Group Charter**

Share accountability with leadership for delivering a workforce capable of executing our health ministry’s strategic priorities. We will accomplish this by delivering the service, systems and infrastructure required to strengthen Catholic Health Initiatives’ distinctive culture to achieve balanced results.
Scanlon Elected to Board of the Catholic Health Association

Colleen Scanlon, RN, JD, senior vice president of advocacy for Catholic Health Initiatives, has been elected to the Board of Trustees of the Catholic Health Association of the United States (CHA). She will serve a three-year term. The election took place at the 90th Catholic Health Assembly in San Diego, Calif., June 5–8.

Karin Dufault, SP, RN, PhD, a former member of the Catholic Health Initiatives Board of Stewardship Trustees, is the new chair of the CHA Board for fiscal year 2005–2006. She is vice president of mission leadership for Providence Health System, Seattle, Wash.

Social Responsibility Update

The Direct Community Investment Program of Catholic Health Initiatives continues to be an important part of the organization’s Social Responsibility Investment Program. Catholic Health Initiatives has committed a total of $26 million in loans to community-based organizations through direct community investments. The program provides no-interest or low-interest loans to organizations in the United States and abroad that promote access to health care, jobs and housing to disadvantaged populations.

Recently, the Social Responsibility Investment Committee of the Board approved new direct community investments in three organizations:

**Low Income Housing Coalition of East Kentucky, Inc.**
Prestonburg, Ky.

**Loan Amount:** $100,000
The Low Income Housing Coalition of East Kentucky (LINKS) serves low income persons living in substandard housing in the coal counties of eastern Kentucky, which are among the poorest in the nation. To assist this population, LINKS offers four programs: a low-interest revolving loan fund, which enables homeowners to have repairs done by outside contractors; new home construction; repair work done primarily through a summer volunteer program; and home ownership and credit counseling. Since its inception in 2000, LINKS has built 20 new homes, completed 332 home repairs and served more than 400 individuals and families. The organization has also coordinated more than 1,000 volunteers.

**Micro Business Development Corporation**
Denver, Colo.

**Loan Amount:** $250,000
The Micro Business Development Corporation (MBD) addresses root causes of poverty through its mission of supporting microenterprise businesses by creating economic development opportunities through access to knowledge, resources and capital for underserved populations. MBD supports microentrepreneurs at every step, offering loans as well as skill building and technical assistance for each stage of business development. MBD targets low-income, disenfranchised members of society, including women, minorities, refugees, the disabled and others with limited access to financial services and little formal business education. Through MBD’s programs, clients move away from subsistence living and become partners in community growth. This direct community investment will be used to expand MBD’s revolving loan fund.

**ShoreBank**
Chicago, Ill.

**Certificate of Deposit Amount:** $2 million
ShoreBank, the country’s oldest and largest community development bank, is committed to a double bottom line: profitability and community development. Through its financial services, loans and other activities, ShoreBank works to improve the overall economic health of the communities its serves. ShoreBank provides services to consumers, businesses and religious and community organizations, and has established a Faith-based Institution Outreach Program specifically tailored to provide banking services to churches, religious orders, etc. ShoreBank provides more than $100 million in new development each year. The certificate of deposit will be used as capital to support the bank’s community development activities.
Human resource assessments conducted at all market-based organizations and national offices have produced actionable data to promote Catholic Health Initiatives’ effort to become a work community of choice in every market it serves.

The assessments, based on a 125-question Web-based survey completed by each market-based organization and national office, have produced extensive results.

“The surveys were really an inventory tool,” said Nancy Etzelmiller, vice president of human resources for Catholic Health Initiatives. “The surveys were not about trying to achieve a ‘good’ score, but about identifying practices that will enable us to be seen, internally and externally, as a work community of choice.

We now have a baseline of the human resource practices in place at every market-based organization, at our national offices, and on the system level.”

The assessment survey, which was developed by human resource leaders from across Catholic Health Initiatives, also identified areas for improvement. “The assessment measured performance on ten factors that are critical to fulfilling our covenant with employees and creating a work community of choice,” said Dan Clark, vice president of human resources for Catholic Health Initiatives.

The ten factors range from employee selection to the use of metrics.

“Overall, we found the greatest opportunity for improvement in four areas: development, retention rewards and pay practices, employee involvement and leadership practices,” said Clark. “These are priority areas for system-wide human resource initiatives.”

Each market-based organization received its own survey results, which identified areas of priority for their own human resource programs.

“We created an action planning template that the market-based organizations used to determine their next steps,” said Etzelmiller. “We’ll be able to take all of those market-based plans and roll them up into a system-level plan that will reflect the greatest human resource needs of our system and our local
organizations. That information will be valuable in determining how to allocate our resources.” Implementing the action plans will also help market-based human resource leaders develop change management skills.

Clark and EtzelMiller have found that market-based human resource leaders have been enthusiastic about the assessment effort and eager to share results with their management teams. “One great benefit of this entire process is that it helped us create a true human resource community across our system,” said Clark. “We’ve been working closely with local human resource teams, helping them interpret the assessment results and share those results with their executive teams. We’ve forged very good, very collaborative relationships.”

To ensure that the human resource initiatives that result from the assessments are tied to Catholic Health Initiatives’ business results, the national human resource team has also developed a performance scorecard that will tally key metrics. “It’s important to note that the assessments and the initiatives that come from them represent just one step on our human resource journey,” said Clark. “We’re using several techniques to look at what we need to do to create work communities of choice in all of our markets and national offices. At this point, I think Catholic Health Initiatives has done more than most organizations in America to understand its human resource infrastructure and what it takes to be a work community of choice.”

The following individuals were involved in construction of the survey used in the human resource assessments:

**John Dumonceaux**
Vice President, Human Resources and Mission
Saint Elizabeth Health System
Lincoln, Neb.

**Denise Dwight**
Vice President, People
Mercy Healthcare
Roseburg, Ore.

**Robyn Wilkinson**
Vice President, Human Resources
Mercy Health Network
Des Moines, Iowa

**Lisa Whaley**
Vice President, Human Resources
Memorial Health Care System
Chattanooga, Tenn.

**Walter McLarty**
Vice President, Human Resources
TriHealth
Cincinnati, Ohio

**Audra Pratt**
Chief Administrative Officer
Mercy Medical Center
Nampa, Idaho

**Dan Clark**
Vice President, Human Resources
Catholic Health Initiatives

**Nancy EtzelMiller**
Vice President, Human Resources
Catholic Health Initiatives

**Kathy Van Zant**
President
Van Zant Resource Group
Duluth, Ga.
The technique of “scripting” is helping human resource and financial leaders across Catholic Health Initiatives communicate the benefits of CHI Connect to their employees and leadership teams. CHI Connect is Catholic Health Initiatives’ system-wide program for managing key business processes in human resources, payroll and finance as well as supply chain.

In conjunction with Catholic Health Initiatives’ National Conference for Human Resource and Payroll Leaders, held May 16–18 in Chicago, a group of market-based human resource leaders and chief financial officers met to learn about scripting. “Within organizations that have successfully launched large-scale change processes, scripting has emerged as a technique to equip individuals with change management skills,” said David Black, vice president of leadership development for Catholic Health Initiatives. “There are many questions and issues surrounding the implementation of CHI Connect. While scripting doesn’t provide all the answers, it does help leaders address questions by first presenting the benefits of the program.”

A scripting exercise involves writing out a way to begin to respond to questions while in the process of initiating change. “It’s not about rote answers, but about getting the discussion started in a positive manner,” said Black. “For example, a department supervisor might ask a human resources leader, ‘Why can’t human resources continue to process the paperwork for promotions? Why do I have to do it through CHI Connect?’”

The human resource leader can start with a scripted response, such as, ‘I’m glad you asked. CHI Connect is going to do for us what ATMs did for banking — giving easy access to the information you need to complete a process, such as a promotion, with a much lower error rate than paper-based systems. If you like, I would be happy to demonstrate how convenient CHI Connect is by helping you process a promotion on your computer.’ That gets the conversation off on the right foot. Scripting the response beforehand enables leaders to deliver it naturally. It also helps all of the leaders within an organization deliver a consistent, service-oriented response.”

Black noted that scripting must be a collaborative process among those who will use the script. “Scripts can’t be imposed,” he said. “An individual must have ownership of a script and truly believe it in order to deliver it with sincerity. That’s why our local management teams are developing scripts related to CHI Connect that will work for them.”

“Within organizations that have successfully launched large-scale change processes, scripting has emerged as a technique to equip individuals with change management skills.”

David Black, Vice President of Leadership Development for Catholic Health Initiatives

Scripting Helps Leaders Communicate About CHI Connect
Entry-level employees at two of Catholic Health Initiatives’ market-based organizations have a new option for career development: a program called School at Work.

“We already provided plenty of professional development opportunities for managers and supervisors, and School at Work enables us to provide the same type of opportunity to our entry-level employees,” said Jenny Skinner, director of corporate education for TriHealth, Cincinnati, Ohio. “The program motivates them to continue to learn, to earn degrees and to move into higher-skilled jobs right here at TriHealth.”

Six employees graduated from the first School at Work program at TriHealth and Saint Joseph HealthCare in Lexington, Ky., had an initial graduating class of 12. Both market-based organizations are now offering their second School at Work programs. Several other market-based organizations plan to add the program, developed by Catalyst Learning, to their employee development initiatives.

School at Work is an eight-month program specifically designed for entry-level employees in health care. Participants often come from environmental services, food services and scheduling departments and have high school or equivalent diplomas.

During the eight months of School at Work, participants complete two courses in two to four hours of class time each week. In the first course, students develop or re-develop basic skills in reading, writing, communications and math. The second course teaches medical terminology, anatomy and physiology, ethics, privacy, interpersonal skills and organizational skills.

“Even if the participants already have some of these skills, School at Work refreshes their knowledge and builds their confidence,” said Skinner. “Their enthusiasm spreads to their co-workers, too. I’ve seen the morale of entire departments rise because they are proud of the employees involved in School at Work and of Tri-Health for offering the program.”

According to Carol Keenan, director of human resources for Catholic Health Initiatives, School at Work can serve as a tool for retaining entry-level employees; developing career ladders for those employees; and “growing your own” workforce for harder-to-fill positions. “It’s a great program to promote employee engagement, and clearly supports efforts to create a work community of choice,” she said.

Of the 18 students who completed the first School at Work programs at Saint Joseph and TriHealth, 14 quickly moved on to continuing education in health care, including programs in nursing, radiology, coding, medical stenography and information systems. This includes five of the six graduates from TriHealth, where Skinner was able to secure grant funds to cover college tuition and supply costs.

In addition, several School at Work participants have already achieved job advancement as a direct result of their School at Work participation. “Of all the career development programs I’ve implemented and observed, this is one of the most rewarding and satisfying, both for the students and for TriHealth,” said Skinner.

To find out more about School at Work, contact Carol Keenan at carolkeenan@catholichealth.net.
Minimizing employee turnover is a critical success factor for any organization, and Catholic Health Initiatives is no exception. Recently, human resource leaders from across the system participated in a teleconference to discuss tactics that have proven to be effective in reducing turnover at market-based organizations. Following is a summary of practices for employee retention within Catholic Health Initiatives:

**Paying Attention to the Basics**
- Ensure that compensation structures are competitive in the market.
- Hire for fit, ensuring that candidates fit the workplace culture as well as skill requirements.
- Fill vacancies to prevent employee stress as a result of understaffing.
- Provide “safety net” benefits for employees, such as Employee Assistance Programs that can help them deal with work/life balance issues.
- Develop the future workforce, perhaps by working with schools in the community.

**Engaging Employees**
- Have supervisors meet regularly with employees to discuss employee development needs and any barriers to development.
- Focus on new employees through a structured assimilation process.
- Use employee recognition programs to recognize as many employees as possible, even those with less tenure.
- Involve employees in the development of policies and procedures, as well as their consistent application.
- Use patient satisfaction programs to engage employees and model desired behaviors.
- Establish a Workplace Improvement Fund that provides each department with a modest amount of money that employees can use as they like to improve their work environment.
- Provide diversity training as a way to improve overall engagement and relationship building.

**Developing Employees**
- Provide managers with training in basic management skills, coaching techniques and team building skills.
- Conduct quarterly meetings with managers whose departments exceed targeted turnover levels to identify causes and action plans for improvement.
- Conduct exit interviews with departing employees to identify issues and areas for improvement.
- Provide development and career advancement opportunities for front-line employees.

For more information on these practices and the market-based organizations that have used them successfully, contact Dan Clark, vice president of human resources for Catholic Health Initiatives, at danclark@catholichealth.net.
Medical Staff at St. Anthony in Pendleton Awards College Scholarships
The medical staff at St. Anthony Hospital, Pendleton, Ore., awarded seven $500 scholarships for college to local high school seniors and a college freshman. The award funds were contributed by medical staff members and the hospital to encourage local youth to pursue health care-related professions and to return to the Pendleton community to serve the needs of others. The scholarship winners and their career plans are:

- Jessica Burns, sports medicine
- Matt Gundlach, physical therapy
- Alina Haberstroh, pharmacy
- Barbara Holland, radiology technology
- Shanna Rietmann, surgical nursing
- Angelina Ruiz, pediatrics
- Richard Wick, general surgery

TriHealth Unites with Physician Group
TriHealth, Cincinnati, Ohio, and Group Health Associates (GHA), a multi-specialty physician group practice, have agreed that GHA will become part of the TriHealth family of health care providers. The result will be a more unified system of care between GHA and TriHealth hospitals, including Good Samaritan Hospital in Cincinnati. “TriHealth has a stated goal of developing deeper integration with physicians as a way of improving clinical quality, community health and the overall patient experience,” said John Prout, president and chief executive officer of TriHealth. “Aligning with GHA is the most significant example yet in our plan to partner with physicians in a way that benefits their patients and the community as a whole.” For more information, contact Joe Kelley of TriHealth at 513/569-5702.

Growth
Flaget in Bardstown Dedicates and Opens New Facility
Flaget Memorial Hospital, Bardstown, Ky., held a dedication ceremony for its new, $38 million campus on June 9, followed by the official opening of the new hospital on June 27. The new, 120,000 square-foot hospital is nearly twice as large as the old hospital and sits on a 32-acre campus. The hospital’s 52 beds are all in private rooms, and the new hospital has expanded facilities for emergency treatment, surgery and ambulatory care as well as obstetrics and gynecology. The events leading up to the official opening included an event for employees and their families, auxiliary members, hospice volunteers and emergency services personnel; a tour for members of the media; and an open house following the formal dedication ceremony. Highlights of the dedication included remarks by Kevin Lofton, president and chief executive officer of Catholic Health Initiatives, and Bruce Klockars, president and chief executive officer of Flaget, as well as music from the Sisters of Charity of Nazareth Choir.

(From left) Jason Bowlds, MD, chief of the medical staff at Flaget Memorial Hospital; Bruce Klockars, president and chief executive officer of Flaget; Norma Rapier, chair of the Flaget Board of Directors; and Kevin Lofton, president and chief executive officer of Catholic Health Initiatives; cut the ribbon at the dedication ceremony for Flaget’s new campus and facility.
Intensive Care Unit Designed by Nurses Opens at Mercy in Roseburg

The new intensive care unit at Mercy Medical Center, Roseburg, Ore., was entirely designed by a committee of nurses who traveled the state to gather ideas for new technologies and design elements. The Betty Long Unruh Intensive Care Unit is the first department in Mercy’s $40 million expansion project to be completed. A blessing ceremony held in early June was attended by more than 100 people, including staff members, donors and community leaders. The 12,500 square-foot unit has 16 patient rooms, with sliding glass doors that allow better patient visibility and mobility. New monitoring equipment enables the staff to treat patients more effectively. The unit is named for Betty Long Unruh, who was an intensive care unit nurse at Mercy. Her husband, John Unruh, MD, donated $1 million to the unit in the name of his late wife.

St. Mary-Corwin in Pueblo Observes National Cancer Survivors Day

St. Mary-Corwin Medical Center, Pueblo, Colo., and the City of Pueblo observed National Cancer Survivors Day, June 5, 2005. Bob Schilling, a city council member and five-year cancer survivor, attended an event at St. Mary-Corwin’s Cancer Center on June 3 to read and present a proclamation to the center’s staff. National Cancer Survivors Day, annually held on the first Sunday in June, is intended to honor survivors who are living with and beyond cancer as well as health care professionals who help fight the battle against cancer. For more information, contact Jillian Osleson of St. Mary-Corwin at 719/560-5556.

St. Vincent in Little Rock Plans $4 Million Emergency Department Expansion

St. Vincent Infirmary Medical Center, Little Rock, Ark., is planning a $4 million expansion of its emergency department. New features will include a “fast track” system to speed up wait times for non-critical care patients. The new, 17,000-square-foot department will be 60 percent bigger than the current department. Construction is expected to be completed by the summer of 2007. For more information, contact Shawn Smith of St. Vincent at ssmith@stvincenthealth.com.

Saint Joseph Executive Kisses a Pig to Promote Diabetes Awareness

Dorothy Zimmerman, director of the business office at Saint Joseph HealthCare, Lexington, Ky., kissed a pig on June 2 to promote awareness of diabetes. Employees and physicians donated $1 each to cast a vote for any of more than 10 candidates to kiss the pig, with Zimmerman emerging as the winner. “This contest was an exciting, lighthearted and fun way to let people know about this terrible disease,” said Karen McKnight, director of the Saint Joseph Diabetes Treatment Center. “Our goal was to raise money for diabetes research while having fun voting for the best candidate to kiss the 90-pound, pot-bellied pig.” Insulin, a substance that sustains the lives of those who suffer from diabetes, was once derived from pigs, though it is now produced synthetically. For more information, contact Jeff Murphy of Saint Joseph at jmurphy@sjhlex.org.
Memorial in Chattanooga Opens New Home Health Branch

Memorial Hospital Home Health, Chattanooga, Tenn., opened a new branch office in Lookout Valley, with a blessing and dedication of the new office held June 14. Memorial Hospital Home Health, operated by Memorial Health Care System, provides home health care in 11 counties in Tennessee. For more information, contact Karen Sloan of Memorial at karen_sloan@memorial.org.

Alegent Health in Omaha Awards Second Round of Community Grants

Alegent Health, Omaha, Neb., awarded a total of $2.3 million to 16 non-profit organizations in a second round of grants announced by the Alegent Health Community Benefit Trust Fund. The organizations receiving the grants are working to provide health and wellness to vulnerable populations in the area, including children and adolescents, low-income families, refugees, seniors, behavioral health patients, underserved minorities and the uninsured. For more information, contact Christa Hines at chines1@alegent.org.

Announcements

Dannenhoffer of Mercy in Roseburg is President of State Medical Association

Bob Dannenhoffer, MD, a pediatrician and vice president for clinical effectiveness at Mercy Medical Center, Roseburg, Ore., is the new president of the Oregon Medical Association. He will serve a one-year term.

Smith Announces Retirement from Carrington and Mercy in North Dakota

Johnson Smith, president and chief executive officer of Carrington Health Center, Carrington, N.D., and Mercy Hospital, Valley City, N.D., has announced his retirement effective July 31. The Board of Directors at each facility will work with Catholic Health Initiatives to identify interim leadership and conduct a national search for a new chief executive.

Board Member and Employee at Bishop Drumm in Johnston Recognized by State Association

The Iowa Association of Homes and Services for the Aging recently honored two people associated with Bishop Drumm Retirement Center, Johnston, Iowa. John Cortesio Jr., a longtime board member and supporter of Bishop Drumm and Mercy Medical Center of Des Moines, received the Excellence in Leadership Award, while Nisveta Alibasic, a certified nursing assistant, received the Caregiver of the Year Award.

Stoecklein Named Baldrige Examiner

Michael Stoecklein, senior operations consultant in performance management for Catholic Health Initiatives, has been appointed to the 2005 Board of Examiners of the Malcolm Baldrige National Quality Award. The Baldrige Award is the highest level of national recognition for performance excellence that a U.S. organization can receive. As one of approximately 500 experts on the Board of Examiners, Stoecklein is responsible for reviewing and evaluating applications submitted for the award.

Home Health Services at St. Joseph’s in Dickinson Honored

Home Health Services at St. Joseph’s Hospital and Health Center, Dickinson, N.D., recently received the Above and Beyond Award for Collaboration from North Dakota Health Care Review, Inc. (NDHCRI). “Home Health Services from St. Joseph’s embraced the spirit of collaboration by participating in more than 75 percent of NDHCRI-sponsored activities,” said Lori Halvorson, project coordinator for NDHCRI. The award also recognized St. Joseph’s Home Health Services’ plan of action for improvement of dyspnea, or shortness of breath, in home health patients, which achieved statistically significant improvement. For more information, contact Dina Maas of St. Joseph’s at 701/456-4285.