Blood Management & Transfusion Safety Initiative Brings Us One Step Closer to Providing Perfect Care

There’s no question that blood transfusions save lives. But every day, in hospitals across the United States, clinicians administer unnecessary transfusions, putting patients at risk of lung and renal injury, immunosuppression and other complications.

In our continued efforts to improve patient care, quality and hospital operations, St. Joseph Health is partnering with Strategic Healthcare Group LLC (SHG) to improve blood utilization and transfusion safety throughout our ministries.

Strategic Healthcare Group will complete a comprehensive audit of SJH’s blood use, focusing on areas for improvement. The team, working closely with Nancy Pratt, SJH chief quality and safety officer, and ministry leadership and clinicians, will assess our blood banks, nursing practices, and perioperative systems as well as look at utilization oversight and risk management concerns. The evaluation also includes comparing our blood use against a national data set.

Site visits, which include lectures and information sessions, are a crucial part of this process. After the evaluation, the team will present its findings to hospital and department leadership to discuss the clinical, operational, risk management and patient safety opportunities for improvement.

“It’s really a critical project,” Nancy said. “We want to make much more conservative decisions about administering blood.” Evidence in the literature suggests that blood is given twice as often as necessary, she said. With that comes increased risk to the patient.

“Potentially, we could reduce blood use by 25 to 50 percent. That could reduce a lot of morbidity for our patients,” Nancy said. “It’s a patient safety project.”

St. Joseph Hospital, Orange began its education phase in September. Mission Hospital, St. Jude Medical Center, St. Mary, Santa Rosa Memorial Hospital and Petaluma Valley Hospital all started or will start education this month. Other Northern California ministries will begin the initiative not long after the region goes live with our new standardized electronic health record (EHR) system, which is scheduled for February.

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Covenant Health was the first ministry to participate in the initiative and has already analyzed its blood usage and started introductory education.

“Historically, there has been a lack of evidence-based information on transfusion,” said Karin Whitten, transfusion safety coordinator at CH. “This initiative will give us the opportunity to educate our physicians and other health care professionals on the newest evidence available so that they can make better and safer decisions about transfusion for our patients.”

Click [here](#) to read frequently asked questions about this project.

If you have questions about this initiative, please email Nancy Pratt at [Nancy.Pratt@stjoe.org](mailto:Nancy.Pratt@stjoe.org).

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**In striving to achieve Perfect Care for every patient we serve, we focus on providing excellence in three areas:**

- **Clinical Quality**
  Ensuring the degree to which our health services increase the likelihood of desired health outcomes and are consistent with current professional knowledge.

- **Patient Safety**
  Ensuring the health care services we provide minimize both risk and harm to those receiving care.

- **Patient Satisfaction**
  Ensuring that our patients and their family members receive personal attention and exceptional care, and that every encounter is sacred.
CLINICAL EXCELLENCE REGIONAL DESIGN PROJECT LAUNCHED

Providing excellence in quality and patient safety across our comprehensive networks of care is a critical element of St. Joseph Health’s transformation and fiscal year 2014-18 strategic plan. Current clinical excellence functions and activities vary between ministries, which creates barriers to collaboration and limits our ability to dramatically improve clinical outcomes. To obtain the level of excellence we aspire to – Perfect Care – we need to evaluate what we do, identify best practices and optimize our resources.

SJH has launched a four-month project to understand the current clinical excellence functions and propose a future design and structure to support success of our hospital ministries in each region.

A project team led by Nancy Pratt, SJH chief quality and safety officer, is guiding this effort, working with leaders from each region. Kick-off meetings were held with senior and clinical excellence leaders in each region to understand needs and current structures. Teams of clinical excellence staff from across SJH are conducting functional assessments of the current state and identifying best practices as input to the design process. These assessments will be completed this month and will serve as the foundation for the future design. The functions involved in this assessment and design effort include: data analysis, patient safety, regulatory, risk management, infection prevention, clinical peer review support and performance improvement.

This is not a cost-savings initiative, but rather an endeavor to define how to organize existing resources and provide the needed support in each region to drive future success in achieving SJH goals and Perfect Care. Recommendations will be made to the SJH Executive Council and CEOs in January 2014.

*Please inform your staff about this project. Read these [Frequently Asked Questions (FAQs)] for more information about this project.*
EMPLEE ENGAGEMENT SURVEY RESULTS SHOW SJH EMPLOYEES VALUE RELATIONSHIPS

From focusing on helping people do their jobs better every day to being advocates for professional development, six St. Joseph Health leaders have been recognized as "employee engagement champions." These colleagues were chosen by their employees for displaying leadership skills and commitment to ensuring the satisfaction and engagement of their teams.

The six, two from each of our regions, were the highest-scoring leaders in this year's employee engagement survey. They have been honored as platinum winners in the Leadership Excellence Awards Program (L.E.A.P.). This program recognizes supervisors who have demonstrated commitment to people across the dimensions measured in the survey such as overall job satisfaction, organizational effectiveness, recognition and career advancement, co-worker performance and cooperation, and supervisory and management skills.

**This year's platinum winners are:**

**Northern California:**
- Michael Ball, Queen of the Valley Medical Center
- Cheryl Willett, St. Joseph Health dental programs

**Texas:**
- Rick Cary, Covenant Medical Center
- Teresa Weaver, Covenant Medical Group

**Southern California:**
- Patti Aube, St. Joseph Hospital, Orange
- Trish Cruz, St. Joseph Hospital, Orange

The platinum winners recently returned from a conference hosted by Human Capital Institute and will share their personal best practices as well as what they learned via a system-wide webcast for leaders later this year. Click [here](#) to learn about our platinum winners.

Highly engaged employees, aligned with our values, are crucial to the success of our ministries and affect the way we help the people we are called to serve. The employee engagement survey measures how effectively SJH leaders are at leading teams to be engaged, effective and satisfied.

The overall results of the survey place SJH in the 69th percentile. This means that only 31 percent of health care organizations that use the same survey scored higher. The goal is to achieve and sustain 75th percentile by or before fiscal year 2018.

One of the noticeable trends across our ministries is that our employees rate their relationships with their co-workers highly. Opportunities for improvement include leadership showing concern for employees, the ability of employees to contribute to ministry success, and a deeper climate of trust.

In setting goals for FY14, those ministries with scores in the bottom quartile for SJH are being asked to demonstrate a faster rate of improvement. Ministries that are considered best-in-class have goals aligned with a system-wide focus on employee engagement. It is recognized that maintaining this level of engagement is as challenging as incremental improvement for those who have not reached best-in-class.
Texas became the first St. Joseph Health region to go live with our new standardized electronic health record (EHR) system, a critical component of our Information Sophistication strategy, on Sept. 8. They also have the recognition of being the first ministry to build, test and implement the system in our new cloud data center.

“Overall the implementation has gone well,” said Bill Russell, CIO, SJH. “Whenever you bring this many modules and systems into play at one time, there will be glitches. Our goal has been to minimize these and to focus on patient safety.”

“This has been an incredible time, filled with everything from uneasiness to excitement, as we went ‘live’ with our new standardized EHR. As always, our staff and physicians have rallied to work through the challenges that come with a complex change,” said Troy Thibodeaux, CH CEO. “I am grateful for the education, technology and support teams that worked side-by-side with us; they are some of the best in the country and continue to be a tremendous help in our efforts to adopt this new technology.”

Nearly 500 people prepared for and supported Covenant Health in transitioning to this new EHR system. This includes: 200 nurse “super users,” 150 non-clinical “super users,” about 50 physician specialists, “command center” staff, technical specialists, analysts, vendor representatives, and communications and training specialists. There were also more than 100 people rounding the floors of the Covenant Health ministries to encourage staff and patients during this transition.

“I have been incredibly impressed with the attitude, willingness to learn, leadership’s involvement and overall supportive environment here at Covenant Health. Yes, there have been issues, but given the amount of new technology and process changes implemented across five hospitals, we are very pleased,” said Michelle Woodley, SJH vice president, clinical informatics and MEDITECH standardization sponsor. “The acceptance of the new standard EHR system is very validating for the project team who has worked tirelessly with the Covenant Health staff and physicians to bring this to fruition.”

The go live of the standardized MEDITECH 5.66 system and nearly 20 associated applications enabled Covenant Health to move from primarily paper to an electronic medical record, and includes:

- Clinical documentation in all inpatient areas
- Physician order entry and documentation with voice recognition capabilities

continued on next page
Hemodynamic monitoring interfaces for electronic transfer of vital signs for critical care units
Medication and lab phlebotomy bar-coding
Electronic discharge processing with electronic prescribing to area pharmacies
Online education information
Improved clinical dashboards
Wound management and access to electronic picture of wounds
Standardization of reports

The go live also includes picture archiving and communications system (PACS radiology) centralization, revenue cycle services (RCS), standard charge description master (CDM), standard general ledger (GL), integration engine, pathways material management (PMM) chart of accounts conversion, health information exchange (HIE), enterprise master patient index (EMPI) and impact to more than 90 third party applications.

Northern California is slated to go live with the standardized system on Feb. 1 and Southern California on June 1. The scope for each region will vary slightly depending on what is currently in place. What everyone will have in common is the move to a standardized MEDITECH system, giving SJH the ability to ensure consistent delivery of support while meeting the current Meaningful Use requirements.

Congratulations to everyone involved in this tremendous effort. This moves SJH one step closer to being an integrated, coordinated and connected system of care.

SJH Patient Portal Testing Coming Soon

To transition to population health management and create a connected system of care, we must empower our patients to collaborate and communicate more effectively with their health care providers, ultimately taking a more informed and active role in their care. That’s why SJH is developing a web-based patient portal and physician hub – and Texas will be the first region to begin testing the new technology in the coming months.

The portal will be built on an innovative open platform that integrates with various fitness apps. It will allow our health care providers and patients to access health data, regardless of the electronic device they’re using. Physicians will be able to enter notes from patient visits, testing facilities will be able to enter test results, and patients will be able to submit information from home medical devices and from health monitoring web applications.

The portal also allows clinicians to securely email colleagues and patients, make referrals and order medications, and for patients to schedule appointments, contact their care providers, and access health education.

Dātu is helping SJH develop the portal.
Click here to watch a video about the SJH portal.

Information Sophistication furthers our mission with technology that will ultimately improve the health and quality of life of people in the communities we serve, and pave the path to an integrated, coordinated and connected system of care.
A Message from Deborah Proctor

As health care leaders, we are all involved in dialogue pertaining to the Affordable Care Act. I would like to request that when we refer to health care reform, please refrain from using the informal term “Obamacare.” Although it has become part of the vernacular, this term can be misinterpreted as derogatory. Many of you are highly aware that St. Joseph Health rallied for health care reform as a means of increasing access to care. Let’s keep a positive outlook on the transformation ahead and respect the work being done. More acceptable terms are the Affordable Care Act (ACA) or simply health care reform when referring to this legislation in written materials and slide presentations to our internal and external audiences.

How to Access St. Joseph Health Under Covered California

Covered California is the state’s health insurance exchange implemented as part of the Affordable Care Act. The exchanges support our vision to increase health care and make it affordable to those we serve.

You may receive questions from patients, staff, friends or family regarding how they can access our network through the exchange. In Southern California, St. Joseph Health’s affiliated and medical group physicians and our hospitals are participating in Covered California through the Blue Shield of California PPO and in Northern California, participation is through Blue Shield of California PPO and the Western Health Advantage HMO. Patients must choose these plans to access our affiliated and medical group doctors, as well as our hospitals. Our affiliated and medical group physicians and hospitals do not accept any other health plans under Covered California.

(We are currently working toward health insurance exchange participation in our Texas region and will share information as it becomes available.)

For more information, including a list of our affiliated and medical group physicians, click here.
Through our Value Imperatives, we seek to sustain our mission by making our services more affordable to those we serve.

The new Value Imperative Budget Performance Report (VIBPR) was added to align with ministry operational budgets. The Financial Impact Template (FIT) continues to track each Value Imperative's cost benefit to date from the FY11 baseline toward the $500 million target. For the month of August, performance shows a favorable variance of $1.25 million to budget for in-scope cost centers for HR Function, Revenue Cycle and Surgical Services and $3.03 million year-to-date. When favorable, this means the Value Imperative is saving even more than the budgeted savings for FY14.

For August, Value Imperative achieved $3.72 million in financial impact template (FIT) cost benefit, including investment costs, against a planned savings of $9.61 million. Cumulative FIT cost benefit is $59.0 million including investment costs against a planned cost benefit of $108 million. The FIT keeps track of progress against the Value Imperative's portfolio's original baseline and SJH's stated goal of $500 million to be top quartile. Click here to read this month's Value Imperative performance report.

Recent Value Imperative progress:

- The **Supply Chain Operations** Value Imperative continued to move forward in implementing the creation of shared services for purchasing and accounts payable (AP). The purchasing phase is nearing completion, with Southern California ministries transitioning their purchasing and procurement services to the new model in August, joining the Northern California ministries, which transitioned in June. Texas transitioned on Oct. 7. The AP phase is now underway, with an initiative to centralize and automate AP processes through a shared service model that is expected to significantly improve efficiency, accuracy and cost-effectiveness of these functions system-wide. Texas will transition on Jan. 1, followed by Northern California and the system office on Feb. 3 and Southern California on June 2.

- Pharmacy Value Imperative continues with solution development in the following areas: pharmacy operational support, antibiotic stewardship, clinical services and decision support, and continuum of care. The initial progress has been presented to ministry COOs and the team will present to the CMOs and each region's EMT for additional feedback.
### UPDATE ON OUR STRATEGIC INITIATIVES

**COVENANT HEALTH**
- Operational improvement plan benefits
- Readmissions

**CMC**
- Readmissions
- Operational improvement plan benefits

**COVLL**
- Inpatient discharges
- Outpatient visits
- Operational improvement plan benefits
- EBIDA

**NORTHERN CALIFORNIA**
- Inpatient discharges
- Outpatient visits
- Medical group visits

**QUEEN OF THE VALLEY**
- Inpatient discharges
- Outpatient visits
- Readmissions
- HCAHPS composite score

**Southern California**
- Inpatient discharges
- Operational improvement plan benefits
- Hospital acquired infection score
- Readmissions
- EBIDA

**Mission**
- Inpatient discharges
- Outpatient visits
- Readmissions

**SMMC**
- Inpatient discharges
- Cost per adjusted discharge
- PVH
- Inpatient discharges
- Cost per adjusted discharge

**Sonoma County**
- Inpatient discharges
- Outpatient visits
- Readmissions

**Sr. Joseph Health**
- Inpatient discharges
- Outpatient visits
- Medical group visits

**SJO**
- Inpatient discharges
- Operational improvement plan benefits
- EBIDA
- Cost per adjusted discharge

**SJO**
- Inpatient discharges
- Operational improvement plan benefits
- EBIDA
- Cost per adjusted discharge

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If you have any questions, please contact Philipe Gomez at (949) 381-4763 or email Philipe.Gomez@stjoe.org.
David Zappa's health challenges didn’t end when he finished chemotherapy. The Brea man, treated for colon cancer, still struggled with pain and fatigue but didn’t know what to do about his symptoms.

Fortunately, his oncologist referred him to an innovative program at St. Jude Medical Center, where a multidisciplinary team of therapists, pain specialists, nutritionists and psychologists use the latest evidence-based cancer rehabilitation practices to provide a remarkable new standard of care for patients undergoing cancer treatments or living with the disease's aftermaths.

"At the end of the conference, St. Jude was synonymous with excellence."

"This is something where so many people can be helped," Zappa told The Orange County Register when the program was featured in the Southern California newspaper. He was one of the first patients. "The program came at the perfect time. It’s a huge blessing."

Problems with fatigue, weakness, pain, insomnia and depression are common among cancer survivors, yet programs designed to help are rare. But St. Joseph Health recognizes the importance of helping patients after cancer treatment ends. SJM’s program is showing that focusing on issues such as pain and depression helps patients recover more quickly and more completely, whether they are in active cancer treatment or remission.

At the recent STAR Program Connection national conference of cancer rehabilitation programs, where experts from Harvard, Mass General, Johns Hopkins and other nationally known institutions presented their findings, SJMC stood out for its remarkable patient outcomes.

“Our numbers definitely created some excitement – and more than a little envy,” said Sue Potts, PT, manager, outpatient neurology programs. “At the end of the conference, St. Jude was synonymous with excellence.”

At the conference, SJMC presented discharge data that was gathered over eight months; individual patient programs lasted an average of six weeks. Discharge outcomes were obtained on 24 of the 90 patients who were referred to the program. Some of SJMC’s outcomes presented at the conference include:

- Patients’ ability to fully participate in daily activities increased by 45 percent
- Pain levels decreased 22 to 42 percent
- Fatigue levels decreased 23 to 43 percent

Lea Powell, RN, MSN, OCN, director of cancer services at SJMC and St. Jude Heritage Healthcare, said at too many hospitals, care ends with the last cancer treatment. “Patients suffering from side effects are expected to return to work and family routines and told to get used to their new ‘normal’ of fatigue and weakness,” she said.

At St. Jude, a very different scenario is taking place, as cancer survivors receive help from experts specially trained to meet their needs.

“We’re committed to helping patients recover more completely and more quickly, whether they are living with cancer, in remission or cured," said Lea. “No matter what the prognosis, cancer stage, or phase of recovery, we’re here to help.”
MINISTRY ACHIEVEMENTS

NORTHERN CALIFORNIA AND SOUTHERN CALIFORNIA

- Santa Rosa Memorial Hospital and St. Joseph Hospital, Orange have been recognized among the top hospitals in the nation in reducing readmissions of heart attack patients 30 days after discharge. This is the second time SRMH has been ranked third on this metric of quality care, based on publicly reported data submitted to the federal Centers for Medicare and Medicaid Services (CMS) July 2008 to June 2011. SJO was ranked fifth in the country. To view the complete list, click here.

NORTHERN CALIFORNIA

- Santa Rosa Memorial Hospital opened phase one of its expanded emergency department on Sept. 24. The 4,228-square-foot expansion significantly enlarges the 19-bay, 9,280-square-foot ER, which will house 26 private treatment rooms when the overall $15 million construction project is complete in June 2014. As of September, the ED capacity had increased to 23 beds, including the six private walled-in rooms that are part of the newly opened space. "We're excited to open this state-of-the-art facility," said Todd Salnas, president of St. Joseph Health in Sonoma County. "It means more personalized, private care for our patients and greater comfort. And the expanded space will enable us to reduce patients' wait times." Bay Area Consumers' Checkbook, in a review of Bay Area emergency departments published in the San Francisco Chronicle, recently rated SRMH as Sonoma County's top provider of emergency care for complex cases. Click here to read more. Queen of the Valley Medical Center in Napa County was also among the top-rated ERs in the Bay Area by Consumers' Checkbook, recognized for both complex and simpler cases.

SOUTHERN CALIFORNIA

- To keep pace with the growing number and complexity of chronic wounds treated at St. Jude Medical Center, an important new therapy option is expected to debut this fall: two state-of-the-art hyperbaric chambers. SJMC's new Advanced Wound Care and Hyperbaric Center will open in the former ED location, now beautifully remodeled. One of only a handful of hospitals in Southern California to offer the benefits of hyperbaric therapy, the new site will offer improved patient convenience, eight private wound care and lymphedema treatment rooms, two hyperbaric rooms, and a spacious waiting area. "For wounds that haven't responded to traditional forms of treatment, hyperbaric therapy can be very effective at accelerating healing and returning patients to their lives," says SJMC’s Jana del Rosario, PT, CWS, manager, wound care and lymphedema.

- St. Joseph Heritage Medical Group was recognized as a 2012 "Top Overall Performing Physician Organization" by the non-profit Integrated Healthcare Association (IHA) for the fifth consecutive year. Out of nearly 200 physician organizations, St. Joseph Heritage Medical Group was among the top 25 percent of those achieving the highest overall marks in three domains: patient experience, meaningful use of health IT, and clinical quality measures.

Submit your ministry's accomplishments to sjh.minute@stjoe.org for consideration in next month's edition.
LEADERSHIP NEWS

Please join us in welcoming new leaders to the St. Joseph Health family:

NORTHERN CALIFORNIA

Dr. David O’Brien, President, Humboldt County

David O’Brien has become the permanent president for St. Joseph and Redwood Memorial hospitals. He was previously serving in the interim role.

David began his clinical career as a family practice physician in Eureka in 1988. In 2000, he completed his master’s degree in administrative medicine from the University of Wisconsin. He has held numerous positions over the years, most recently as COO at St. Mary, where his roles included vice president of medical Affairs and chief medical officer, and interim president and CEO.

David is a proven leader who keeps SJH’s Mission, Vision and Values at the forefront of his actions and decisions.

Robert Eisen, Regional Vice President, Human Resources, Northern California

Robert A. Eisen has been appointed regional vice president of human resources for Northern California, encompassing Napa, Humboldt and Sonoma counties. For the past year and a half, Bob served as vice president of human resources at Queen of the Valley Medical Center.

Bob will be responsible for developing workforce strategies that ensure the region achieves and maintains health care’s highest standards of care and service, while improving efficiencies and controlling costs. He will identify opportunities for innovation and sharing of best practices, with a focus on employee engagement, performance improvement, regulatory compliance, and helping to advance the local, regional and system-wide strategic goals.

Bob has more than 23 years of experience in HR and employee relations. Before joining SJH in February 2012, he worked for Hospital Corporation of America (HCA) in multiple HR roles, including vice president of HR at HCA’s Sunrise Hospital and Medical Center, in Las Vegas. Prior to his time at HCA, Robert served as director of HR for Quest Diagnostics in Las Vegas for 10 years.

SOUTHERN CALIFORNIA

David Zembik, Senior Vice President of Affiliate Physicians, St. Joseph Heritage Healthcare

David Zembik has joined St. Joseph Heritage Healthcare (SJHH) as the senior vice president for the affiliate physicians. David comes to SJHH from Providence Medical Institute (PMI) where he served as chief operating officer. During David’s tenure as COO, he led the implementation of the Epic electronic health record and practice management system across 35 clinics.

During the same time period, PMI experienced significant growth, which required David’s leadership in the development of a more robust operational and administrative infrastructure. Prior to PMI, David led the development and expansion of Heritage Victor Valley Medical Group in Victorville and with CIGNA, where he was responsible for 15 clinics that provided services to 135,000 members.

Pat Brydges, Regional Vice President of Care Integration, SJHH

Pat Brydges, former executive director for case management and social services at St. Joseph Hospital, Orange, has transitioned to the role of regional vice president of care integration at St. Joseph Heritage Healthcare.

Before coming to SJHH, Pat was responsible for the development of top performance case management and patient access programs, and the clinical documentation integrity program, in addition to providing organizational leadership for the Next Generation Ethics Program. At SJHH, Pat has been responsible for the strategic design and development of a care management program in an integrated delivery network for the Southern California region. This includes: inpatient care management, ambulatory care management, care transitions, Care Connect, nurse advice line and the call center.

continued on next page
LEADERSHIP NEWS

SOUTHERN CALIFORNIA (CONTINUED)

Paul Kaminski, Vice President, St. Mary Foundation

Paul Kaminski recently joined St. Mary as the new vice president for the foundation. Paul has worked in fundraising for nearly a decade and has a strong history of achieving goals, team building, staff development and public relations, all while advancing the mission and vision of an organization.

He previously served as the director of advancement for Providence High School in Burbank where he successfully increased the fundraising by more than 100 percent, completed a capital campaign for a new science center and increased the number of donors giving to the school by 200. Prior to his time at Providence High School, Paul held the same position at St. John Bosco High School in Bellflower.

Paul will play a key role in sharing our vision and mission with the community and engaging the High Desert’s continued support as St. Mary builds a new campus.

He holds a bachelor’s degree in writing and marketing from Loyola Marymount University in Los Angeles.

Linda Sieglen, MD, Chief Medical Officer, Mission Hospital

Dr. Linda Sieglen has been named chief medical officer at Mission Hospital. She will join MH in this new role this month.

Linda began her medical career with the Princeton Healthcare System in 1987, where she most recently served as the senior vice president of medical affairs. She earned her bachelor’s degree in biology from Boston University, her MD from the University of Medicine of New Jersey, and her master’s in medical management from the University of Southern California.

Submit a Story

Do you have an article that you would like to see in Management Minute? Send your news to sjh.minute@stjoe.org.
COVENANT HEALTH

Whooping Cough Still on the Rise in Texas; Health Officials Recommend Vaccine
Everything Lubbock – Sept. 25

Second Phase of Cancer Study Kicks Off in Lubbock
Lubbock Avalanche Journal – Sept. 2

Covenant's Hybrid OR Helping Doctors Save Lives
Lubbock Avalanche Journal – Aug. 24

NORTHERN CALIFORNIA

Memorial Hospital Unveils New Emergency Room
Press Democrat – Sept. 26

St. Joseph’s Employees Send Hundreds of Backpacks to Kids
News Channel 3 - Sept. 10

‘Obamacare’ Will Reward Queen for Preventive Health Programs
Napa Valley Register – Sept. 6

Advancements at Queen of the Valley Benefit Region
Napa Valley Register – Aug. 31

Doctor Returns Home as CEO of St. Joseph Hospital in Eureka
News Channel 3 – Aug. 6

Dr. James DeVore Voted “Best Doc” in Sonoma County
Press Democrat – August

SOUTHERN CALIFORNIA

New Procedure Shows Promise for Patients With High Blood Pressure
Orange County Register – Sept. 27

Q&A on Healthcare Industry With St. Jude's Lee Penrose
OC Business Journal – Aug. 17

New Infant Heart Screening Saves a Life at Mission Hospital
CBS News – Aug. 15

United Healthcare Presents $700,000 Donation to SJO
KCAL 9 – Aug. 9

$375,000 Raised at Mission Hospital Golf Classic
Mission Viejo Patch – Aug. 7

 SYSTEM OFFICE

A Prescription for the Future – Deborah Proctor
Orange County Register Metro – Sept. 23

St. Joseph’s System: Local Partnership With Hoag Part of Larger Strategy That Stretches to Northern California, Texas
OC Business Journal – Sept. 9

SJH Fund Lends Helping Hand to Community Care
OC Business Journal – Sept. 9

Why Health Care Needs the Cloud - Among Other Things
Imaging Business – September

Population Health Drives St. Joseph Health Investment
OC Business Journal – Aug. 19