

IN TOUCH



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A labor of love

Hospital-based obstetrics program: 20 years of meeting the community's needs

At its heart, Southeastern Regional Medical Center's hospital-based obstetrics program is about giving babies a healthy start and helping women get the quality care they need and deserve.

The program—created nearly 20 years ago to meet the obstetrical care needs of women in the community served by Medicaid—involved the efforts of many passionate people, says **Morris Bullock**, vice president of human resources and community relations.

Taking action

The story of the hospital-based obstetrics program began two decades ago with a growing concern among hospital administrators about limited access to obstetrical care for Medicaid recipients, who made up more than half of all hospital deliveries, Bullock says. Providers were retiring, changing practices or reducing Medicaid participation.

"This hospital would not think of abandoning that population," said Bullock. "So we began to address the need."

One of the first steps was to hire an obstetrician who would focus mainly on delivering babies at the hospital, often to moms with little or no prenatal care. As nurse-midwives were added to the mix, the program began to reach out to area health clinics to establish relationships with expectant mothers and begin their prenatal care. "We began to build patient files, so when many of the mothers came in, we knew who they were," said Bullock.

The program began to garner national and state awards for reducing infant-mortality and low-birth-weight rates.

A caring team

Today it has two certified obstetrician/gynecologists—**Kathleen Heer, D.O.**, and **Walter Neal, M.D.**—and three certified nurse-midwives—**Connie Canady, Loraine Collins** and **Michelle Cox**.

"Our mission is to provide outstanding obstetrical care to the women in the community regardless of ability to pay," said Dr. Heer.

Nurse-midwives provide routine obstetrical care and deliveries, with the exception of cesarean deliveries and other complicated births, which are performed by Drs. Heer and Neal.



Nearly 17,000 babies have been born under Southeastern Regional Medical Center's hospital-based obstetrics program which is celebrating its 20th anniversary this year.

Partnerships that provide

In addition to delivering babies at Southeastern, the hospital-based providers deliver obstetrical services in conjunction with Robeson Health Care Corporation and Robeson County Health Department.

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Quest for Excellence

From the president

Throughout the month of June, SRMC hosted its first employee forums as part of the *Quest for Excellence*. I would like to express my sincere appreciation to all employees who took time to attend the forums as well as provide valuable feedback in the form of evaluations.

Based on the evaluations, we learned that many employees have concerns or questions about benefits, including insurance after retirement, pay raises, and the possibility of combining vacation and sick leave; staffing; and equipment/supplies. Each of these issues will be addressed at the next forums which will be conducted throughout September. Other topics of concern will be addressed through written communication to employees.

We also received many positive, encouraging comments through completed evaluations:

- "I love this place and am proud to be a part of it!"
- "My director has kept staff well informed. I feel much of the staff present were able to get a great deal more understanding of our new expectations and goals!"
- "Everyone at SRMC has made me feel at home since I've started working here. I just wanted to say thanks."

Another change brought about by the *Quest for Excellence* has been rounding on employees and patients by department directors and nurse managers. As a result of these interviews, we have started to harvest wins or reap the benefits of taking time to make personal connections with employees while giving them opportunities to recognize co-workers and inform their managers about issues that need to be addressed or tools and equipment that are needed in order to best do their job.

Some examples of rounding wins or changes include:

- Skilled Nursing Unit Manager **Joyce Ransom** reported that suction machines were replaced throughout WoodHaven Nursing and Alzheimer's Care Center recently after staff expressed a concern that the older machines were not functioning properly. After being notified of the problem, Central Supply Unit Manager **Pat McRae** arranged to have new machines delivered to WoodHaven within an hour.
- 7th Tower Unit Manager **Sherry Edwards** reported that, as a result of patient rounding, a patient was identified as a missing person in another state. Arrangements were made, along with law enforcement, to return the patient to their home state once they were discharged from the Medical Center.
- Cardiopulmonary Services Director **Kelly McClure** reported that he gained approval to address a security issue in one of his areas as a result of concerns expressed by employees during rounding. Because he was able to report his findings to his employees quickly, they felt that their concerns had been taken seriously and that action would be taken.

These are only a few examples of the positive outcomes that our organization is experiencing as a result of rounding. As we continue this journey, we hope to improve experiences for not only our employees, but just as importantly, for our patients. Leadership development, rounding, thank you notes, forums and departmental communication boards are vehicles which will help us begin to move from a good organization to a great organization.



Joann Anderson,
President/CEO



Joann Anderson, MSN, FACHE
President/CEO

WHAT'S *Right* IN HEALTH CARE™

A group of delegates from Southeastern attended the *What's Right in Health Care?* conference hosted by the Studer Group June 18-20 in Atlanta, Ga. Pictured, from left, are Vice President **Morris Bullock**, Senior Director of Clinical Services **Lori Dove**, Vice President **David Sumner**, Studer Group Founder and CEO Quint Studer, Medical Imaging Director **Jon Thorsten**, Vice President **Teresa Barnes** and Patient Financial Services Director **Mike Brown**. The annual conference is designed to bring individuals together to share ideas that have been proven to make health care better.



The Duke Endowment awards \$160,000 for home health monitoring program

In the news

Joann Anderson, president and CEO of Southeastern Regional Medical Center, announced an award of \$159,873 from The Duke Endowment. The grant will be used to assist in the development of a telehealth patient monitoring and communication system which will be administered by Southeastern Home Care Services, an affiliate of SRMC.

"The telehealth system will ensure the delivery of a safer, more effective home care treatment for all residents of Robeson County and the adjacent areas we serve," said **Vickie Atkinson**, director of Southeastern Home Care Services/Hospice/Hospice House. "The system will enhance the continuum of care, ensure better compliance with the prescribed care plan, and allow for better health care to occur in the safety and familiarity of a patient's own home."

A small electronic appliance will transmit important patient health information to the Southeastern Home Care Services office. The daily health care information received will guide the development of a disease management program for each patient. This ensures that every communication meets the patient's specific needs. This interaction will allow the patient to have an active part in his or her own care.

The patient monitoring and communication system also allows one nurse to oversee the health of many more people than is possible with traditional home visits, improving resource management and reducing the overall cost of care.

"Our hope is that these monitoring units will improve the lives of home care patients in the Robeson County area," said Mary



RN **Vickie Lambert**, at right, provides medical aid, physical guidance and emotional support to **Florence Floyd**, left, during her home care visits.

Piepenbring, director of health care for The Duke Endowment. "The goal is to help patients better manage chronic diseases, resulting in fewer trips to emergency rooms."

The Duke Endowment, in Charlotte, N.C., seeks to fulfill the legacy of James B. Duke by enriching lives and communities in the Carolinas through higher education, health care, rural churches and children's services. With assets of over \$3 billion, the Endowment has awarded more than \$2.4 billion in grants since its inception in 1924.

Since 1953, the Endowment has provided more than \$4 million in grants to Southeastern Regional Medical Center.

Partnership receives \$30,000 grant

The Kate B. Reynolds Charitable Trust of Winston-Salem recently awarded a \$30,000 grant to support the Healthy Carolinians Partnership in Robeson County.



Lekisha Hammonds

According to Southeastern's Community Health Services Manager and Partnership Coordinator **Lekisha Hammonds**, the partnership will benefit from the grant by exploring and developing the best organizational structure for the task force including the establishment of an executive steering committee.

"In addition, the group plans to use the funds to establish a marketing and communications committee to enhance community awareness of activities and ongoing health-related initiatives," said Hammonds. "Additional committees will also be established to design and implement action plans focused on improving a specific health care issue of concern identified as a priority."

The Partnership's mission is "to develop and implement countywide health initiatives in an effort to create an environment that supports good health among the citizens of the county." The group is made up of an alliance of local agencies and concerned individuals and plans to expand their membership to broaden county representation.

The Partnership was eligible for the grant, which will be received over a three year period, because of its good standing with the North Carolina Healthy Carolinians which includes maintaining certification and completing an extensive community needs assessment.

The Kate B. Reynolds Charitable Trust was created in 1947 by the will of Mrs. William N. Reynolds of Winston-Salem. Three-fourths of the income of the trust is designated for use for health-related programs and services across North Carolina and one-fourth for the poor and needy of Winston-Salem and Forsyth County.

Awards spotlight

Local physician wins state award



North Carolina Association for Home and Hospice Care President Devin Griffith, left, presents Dr. **Jamshed Kahn** with the Physician of the Year Award at a ceremony held in Durham, N.C.

Dr. **Jamshed K. Khan** was recently named Physician of the Year by the North Carolina Association for Home and Hospice Care for demonstrating a thoughtful commitment to assisting home care and hospice patients who wish to remain at home.

Dr. Khan was nominated for the award by Southeastern Hospice because of his efforts to enhance the care and quality of life for his patients as well as serving above and beyond the call of duty.

"Dr. Khan has enriched the lives of our hospice patients as well as the lives of our staff members," said **Vickie Atkinson**, director of Southeastern Hospice/Southeastern Home Care Services. "He has an extensive knowledge of palliative care which ensures that our patients receive the highest level of care."

~~Dr. Khan has practiced with Lumberton Medical Clinic located at 395 W. 27th Street since 2003. He~~ currently serves as medical director for three Southeastern Regional Medical Center affiliates: Southeastern Hospice, Southeastern Hospice House and Southeastern Home Care Services.

A native of Pakistan, Dr. Khan earned his medical degree from King Edward Medical College in Lahore, Pakistan in 1996. He completed residency

training in internal medicine at Southern Illinois University School of Medicine in Springfield, Ill. in 2001. Dr. Khan also completed a geriatrics fellowship at Case Western Reserve University and University Hospitals in Cleveland, Ohio, in 2002 and an internal medicine fellowship at the University of Iowa in Iowa City in 2003.

In 2006, he became certified as a diplomat of the American Board of Hospice and Palliative Medicine. He is also certified by the American Board of Internal Medicine in both internal medicine and geriatrics.

For more information, call Southeastern Hospice, 671-5655; Southeastern Home Care Services, 671-5600; or Southeastern Hospice House, 671-4803.

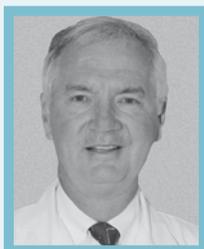
Southeastern nationally recognized in medical marketing

Honored for advertising excellence in the 2008 Aster Awards, Southeastern Regional Medical Center received two bronze recognitions in this year's competition.

The Aster Awards, one of the largest competitions of its kind, is hosted by *Marketing Healthcare Today* and Creative Images, Inc. This elite national program recognizes outstanding health care professionals for excellence in their advertising/marketing efforts.

Southeastern's awards included an overall marketing campaign for the Southeastern Heart Center managed by Duke University Health System. The campaign was coordinated by Marketing Director **Ann McLean** and produced by SMITH Advertising of Fayetteville, N.C. Pictured, at right, are McLean, and Cardiothoracic Surgeon Dr. **Terry Lowry**.

The second award was presented for the Medical Center's 30-minute television program, *Picture of Health*, which was coordinated by Public Relations Director **Amanda Crabtree** and produced by Moonlight Communications of Fayetteville, N.C. The program can be seen on Saturday mornings at 10 a.m. on the Ion Media Network (Local Channel 62, Cable Channel 8, Digital Channels 36.6 and 62.1).



Samuel Britt II, M.D.

Britt wins Collaborative Physician award

Dr. **Samuel Britt II** (Lumberton Surgical Associates) was presented with Risk Management's Collaborative Physician Award on July 15. Dr. Britt was nominated by the Gibson Cancer Center for his service since 2004 as the Cancer Liaison Physician and his efforts in the Center's pursuit of accreditation by the American College of Surgeons as a community cancer program.



Lab technologist honored for 50 years of service

Employee profile

Senior medical technologist **Jessie Stephens** was recently honored for 50 years of service to Southeastern Regional Medical Center.

At a reception held in her honor at the Medical Center on July 9, Drs. **Bob Andrews** and **Marvin Thompson**, both retired pathologists, reminisced about her time and service to Southeastern.

Stephens' career began July 1, 1958, at the age of 20 when she was hired by Dr. Andrews as a laboratory technician while enrolled in a two-year lab training program. She has worked in the laboratory throughout her entire career and currently processes all chemistry tests.

"One of the most important things to do in life is to enjoy your job," Stephens said. "I have enjoyed working in the laboratory for the last 50 years. Southeastern is like a second home to me."

During her five decades of service, she has witnessed the transformation of Southeastern from a hometown hospital to a state-of-the-art facility. A native and current resident of Orrum, Stephens has served under all four chief executives of the Medical Center: **James DeVane**, **Donald Hiscott**,

Luckey Welsh and currently, **Joann Anderson**.

Stephens said that current Medical Center employees would not believe all the changes that have occurred in the laboratory and the Medical Center since 1958.

"Through the years there have been so many technological changes to the extent it has felt like having a new job each time," she said. "The hospital in itself has changed drastically to care for the increase in population in this area."

In addition to working full-time at Southeastern, Stephens earned a bachelor's degree in psychology from UNC Pembroke in 1988.

Only two Southeastern employees before Jessie Stephens have completed 50 years of service. Beatrice Leggett, cafeteria supervisor, retired in 2004 and Hal Stephens, director of plant engineering, celebrated his 50th anniversary in 2005.

Stephens has begun to look into retirement but has no immediate plans. She hopes to continue to work in the laboratory part time after retirement but hopes to focus her energy on learning to play the piano and spending more time with her three grandchildren.



Jessie Stephens

Edwards retires after 24 years of service



Director **Miriam Edwards** (Southeastern Hospice House), center, retired on June 30 after more than 24 years of service. Unit Manager **Cathy Hardee**, left, and Director **Vickie Atkinson** (Southeastern Home Care Services/ Hospice/Hospice House) joined Edwards' colleagues at a luncheon held in her honor on June 25. Edwards led efforts to establish the Medical Center's first home care and hospice programs. She was also instrumental in establishing Robeson County's first inpatient hospice facility, Southeastern Hospice House, in early 2007.

In the spotlight

continued
from page 1

On Tuesdays, the nurse-midwives see patients at Southeastern's Johnson Medical Clinic in Red Springs. On Thursdays, they see patients at Julian T. Pierce Health Center in Pembroke and South Robeson Health Center in Fairmont, both of which are Robeson Health Care Corporation facilities.

On Mondays and Wednesdays at the Robeson County Health Department, Drs. Neal and Heer see high-risk obstetrical patients—women with potentially complicating conditions such as diabetes or high blood pressure.

Women seen at the clinics receive a range of care throughout their pregnancy and the postpartum period, including healthy pregnancy checkups, education, and referrals for ultrasound exams and specialty care.

According to Dr. Heer, without such services, many women might go without prenatal care, increasing the risks for problems that could affect the health and safety of moms and babies. However, she also notes that the clinic services aren't strictly limited to the underserved but are open to all women, including those with private insurance.

An expanding mission

The hospital-based obstetrics program may continue to expand to provide gynecological services by Dr. Heer.

Such services have the potential to save lives, since regular pelvic exams can help detect or even prevent cervical cancer. "There are a lot of women out there who have not had a Pap smear in years because they don't have the ability to have access to care," said Dr. Heer. "Those are the women we hope to reach and, in doing so, possibly reduce our cervical cancer rates."

In praise of passion

Bullock praises the passion that Drs. Heer and Neal and nurse-midwives Canady, Collins and Cox have. "We're really just fortunate to have them."

"The biggest thing is, we're a team," said Dr. Heer of her colleagues. "They're really wonderful people who are very caring, and they provide excellent care."

Nearly 17,000 babies have been born under the program. "It's truly a community benefit that our mission has been alive and affected the lives of thousands of people," said Bullock.

"We've always had within our hospital a great sensitivity to the unique diversity of people that we serve," he says. "So it is really a shining moment that this program has existed for 20 years, that we've been there for that population."

To learn more about Southeastern, visit www.srmc.org.

Southeastern's Hospital-based OB Team



Kathleen Heer, D.O.



Walter Neal, M.D.



Connie Canady, CNM



Michelle Cox, CNM



Loraine Collins, CNM

Intensivists celebrate one-year anniversary



On Mon., July 28, physicians, nurses, administrators and employees from throughout the Medical Center gathered in the cafeteria to celebrate the one-year anniversary of the intensivist program.

Joining the celebration were, from left, Drs. **John Hoyt**, **Adi Miro** and **Richard Woerndle**, former ICU/IMU/CVICU Unit Manager **Donna Kinlaw**, Drs. **Milt McPherson** and **Charles Beasley**, ICU/IMU Unit Manager **Renae Hester**, President/CEO **Joann Anderson** and Critical Care Director **Eva Meekins**.

In July 2007, Southeastern Regional Medical Center became the first medical center in the region to assign physicians who are trained and certified in critical care medicine to the intensive care unit.

Between January and May of this year, the intensive care unit's length of stay decreased by 27 percent, resulting in considerable savings for the Medical Center as well as satisfaction for patients that is beyond measure in the reduction of their pain and suffering.

New back surgery offered at Southeastern

Severe back pain had prevented 39-year-old Kimberly Emanuel from being able to support her teenage son during sporting events. Numbness and weakness in her left leg was causing her problems with day-to-day living.

"I had a herniated disc which was pressing on a nerve through my hip and left leg," said Emanuel.



Charles Haworth, M.D.

After her diagnosis, Emanuel's neurosurgeon, Dr. **Charles Haworth** of Duke Neurosurgical Associates of Lumberton, recommended a new procedure known as Annular Disc Repair.

"He said that if I wanted to be pain free and go back to my normal activities, this was the option and that it was a new procedure," said Emanuel.

On Tues., July 15, Emanuel returned to her job as a medical office assistant at Allen Orthopedics with a new outlook on life. Pain free and excited about her plans for the weekend, she was eager to tell others about the success of her recent back surgery, only two weeks prior.

Standard treatment

Spine surgery can be very beneficial for many people suffering from radiating pain caused by a herniated disc. The standard of care is to remove the portion of the disc that is applying pressure to the nerves. This procedure is referred to as a discectomy and typically requires the surgeon to make an incision in the outer layer of the disc which is called the annulus fibrosus. Previously, there has been no easy method to close the annulus following the removal of the tissue. Therefore, surgeons commonly leave the annulus to heal on its own.

Many patients find relief with this procedure, but for many others, the disc could re-herniate through this opening in the annulus resulting in continuing pain and potentially requiring additional surgery. Statistics show that approximately 30 percent of patients have pain following a lumbar discectomy and an estimated 15 percent of patients require a re-operation.

New technique

Today, there is a new approach called Annular Disc Repair. Dr. Haworth has been performing this innovative treatment at Southeastern Regional Medical Center since April 2008.

The disc is approached using a minimally-invasive technique and the entire surgery is performed under a microscope. After removing the offending portion of the disc, Dr. Haworth is able to re-approximate the soft tissue in most patients to facilitate the healing process of the annulus fibrosus. The device designed to re-approximate the soft tissue is the Xclose™ Tissue Repair System developed by Anulex Technologies, Inc.

"This procedure provides a unique new method for treating the compromised tissue of the annulus fibrosus following a discectomy procedure," said Dr. Haworth. "Previously, we have not had a reliable method of closing the

New technology



Kimberly Emanuel, right, of Lumberton, returned to work as a medical office assistant only two weeks after having a new surgical procedure for the spine, Annular Disc Repair, which is now being performed at Southeastern Regional Medical Center by Neurosurgeon Dr. **Charles Haworth**.

annulus of the disc and when it is not repaired, the material inside may re-extrude, compress the nerve root, and result in recurrent pain and re-operation"

According to Dr. Haworth, this Annular Disc Repair procedure adds minimal time to the overall procedure and is easily completed. The procedure is often performed as outpatient surgery and patients are usually walking the same day. They commonly begin physical therapy and exercise within 10 days to two weeks.

First to offer procedure

Dr. Haworth was the first surgeon to introduce this procedure in this area. Patients would otherwise have to travel to Wilmington, Raleigh or Charlotte for this type of procedure. He is the only physician performing it in Bladen, Robeson, Columbus and Cumberland counties.

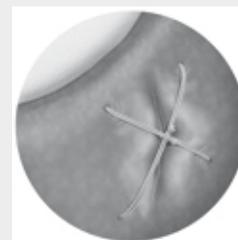
For Lumberton native and resident Emanuel, having this procedure available locally made all the difference.

"I don't like to leave home, so when I found out this procedure was available here, I decided to proceed with the surgery," said Emanuel. "I was scared at first, but everything went great. Everybody is amazed with my recovery."

For more information about this procedure, call Duke Neurosurgical Associates of Lumberton at (910) 671-4415.

Annular Disc Repair

Tension bands seal incision much like a band-aid.



In the spotlight

Understanding health information can be a complicated and frustrating process for anyone. Imagine trying to understand medical terms or listen to an explanation of a medical procedure that is spoken in a different language. Not understanding directions for medications and follow-up care can greatly affect a patient's outcome and could cause life-threatening results.

Establishing good communication between hospital staff and patients is important in the health care industry. Every day patients who speak other languages, primarily Spanish, are admitted to Southeastern Regional Medical Center, seeking medical attention, whether for an emergency or the delivery of a child. Southeastern has a variety of resources to aid patients who speak other languages and can provide them with quality patient care through its interpreter program.

"The interpreter program is in place to provide good communication outlets and ease interpretation between patients who speak other languages and the staff at Southeastern," said **Linda Jones**, the interpreter supervisor at Southeastern.

Southeastern's interpreter program began in January 1999 because of an increase in admissions and treatments for the Spanish speaking population in this area. The Medical Center wanted to remove the language barriers and establish strong communication between the hospital staff and Limited English Proficiency (LEP) patients that seek medical care.

According to Jones, Southeastern is the only medical center within the surrounding counties with an established interpreter program. She said many hospitals in the area hire employees that are bilingual but do not have employees whose sole responsibility is to provide interpreter services for patients and their families.

"Being able to communicate with our patients is one of the most basic needs we have," said



Interpreters remove barriers at Southeastern

Ayers, director of Patient Relations. "As our Hispanic population continues to grow, we need to be attentive to them and respond to this basic need."

~~The continued growth of the Spanish population in this area has required the program to expand.~~ Southeastern currently employs three full-time and three part-time interpreters that are available to serve patients upon request 24 hours a day, seven days a week. On

any given day, the program provides assistance for up to 20 LEP patients and countless visitors throughout the entire Medical Center from the main lobby to the operating room. Jones said that emergency services and obstetrics are two of the busiest areas at Southeastern for interpreters.

"The interpreter program doesn't just address the Hispanic population," Ayers said.

"We have the ability to provide communication in a variety of languages via the telephone system, as well as a variety of resources available for our hard-of-hearing patients."

Southeastern currently offers multi-lingual telephones, or Cyacom phones, to LEP patients that are admitted. The phones are specially designed with two handsets which allow both patients and staff to listen while an interpreter translates medical information. Southeastern currently uses 10 of these special medical interpretation phones throughout the facility.

Interpreter assistance expands beyond Southeastern's main campus, providing outreach interpreters to affiliates including Gibson Cancer Center and Southeastern Lifestyle Center for Fitness and Rehabilitation upon request.

"We want to meet the holistic needs of our patients," Ayers said. "Communication is one of the most fundamental ways we fulfill our mission. Without effective communication, we would not be able to provide safe, compassionate or efficient care."

Southeastern's patients, staff and visitors can contact the interpreter program at anytime to receive communication assistance. For more information about the interpreter program or to contact an interpreter at Southeastern Regional Medical Center, call 671-5111 Monday through Friday from 8 a.m. until 5:30 p.m. During weekends or evening hours, call 1-800-578-7243.



Pediatric resident Dr. **Jes Sloan**, at left, discusses the plan of care for 3-month-old Favy Rayon Tolentino, with her mother, Maria Rayon, through Interpreter **Rosa Locklear**, far right, in the pediatric unit at Southeastern.

Tax Deferred Savings Plan

As an employee of Southeastern Regional Medical Center, are you taking full advantage of the Tax Deferred Savings Plan? It's an easy way to save for retirement. The plan allows you to contribute a percentage of your pay before taxes into a variety of investments and SRMC will match a portion of what you put into the plan. Contributions you make to the 403(b) plan are considered pretax contributions and will reduce your taxable income. Start participating as soon as you can! Take advantage of the pretax savings and receive the company match by participating in the plan.

Even though the Tax Deferred Savings Plan is a retirement plan, one question often asked by plan participants is "Can I access money in my 403(b) account while I am still employed?" There are two options available that allow you to withdraw funds from your account while you are still working – plan loans and hardship withdrawals.

Plan Loans

If you are a plan participant and have the required minimum balance in your account, you may apply for a loan. In other words, you can borrow money from your account and then pay back your account. In general, loans under the plan are governed by the following rules:

- Loans will be made available to all participants and will be made in accordance with specific plan provisions.
- The total of all loans you make from the plan may not exceed the lesser of \$50,000 or one half (1/2) of your vested interest in the plan.
- The minimum loan amount is \$1,000.
- Loans made to help purchase a participant's principal residence must be repaid within 10 years. All other loans must be repaid over a period of five years or less.

Hardship Withdrawals

Under the terms of the plan, a participant may elect to withdraw funds from his/her employee account in the event of hardship. Only employee contributions (not interest or earnings) may be withdrawn. A hardship is defined as an immediate and heavy financial need for which you lack other reasonably available resources.

Benefit news

by Bob Borbet

You may receive a hardship withdrawal for the following reasons:

- Medical expenses for you, your spouse or your dependents.
- Expenses directly related to the purchase of your principal residence, excluding mortgage payments.
- Tuition related educational fees and room and board for post secondary or college education for the next twelve months for you, your spouse and your children.
- Amounts required to prevent eviction from, or foreclosure on, your principal residence.
- Funeral expenses of a family member.

A hardship withdrawal may not exceed the amount necessary to meet the financial need, may be made only if other resources are not reasonably available to you and you have obtained all other distributions and loans which are available to you from all employer plans.

If you receive a hardship withdrawal, you may not make employee contributions to the plan for six months.

If you qualify for both a loan and a hardship, you must elect the loan first per the terms of the plan.

To apply for a loan or to request a hardship withdrawal, you must complete a Loan Agreement or a Hardship Distribution Form. The documents can be obtained from AIG Retirement by calling 1-800-448-2542. Your completed and signed document must be sent to the SRMC Human Resources Department and approved by the 403(b) plan administrator.

You can obtain additional information on plan loans and hardship withdrawals by reading your SRMC Tax Deferred Savings Plan benefit booklet (copies available in Human Resources). You can also contact your AIG Representatives David Haden 800-892-5558 ext 89953 and Rick Hartney 910-223-7283 or **Melissa Kinlaw** (ext 5609) and **Bob Borbet** (ext 5811) in the Human Resources Department.

Bob Borbet is the manager of compensation and benefits for SRMC.

Promotions



Annette Dial
(Operating Room)
Unit Manager



Pattie Ramsaur
(Food Services)
Chief clinical dietitian

Christy Ammons (Medical Imaging) - Certified radiographer

Tonya Bratcher (Physician Practice) - Insurance processor

John Brisson (Community Alternative Program) - Lead case manager

David Burden (Food Services) - Cook

Sheila Carter (Emergency Services) - Clerical coordinator

Lamont Collins (Cardiopulmonary) - Equipment technician

Michael Jacobs (Food Services) - Assistant food services supervisor

Patricia Klingensmith (Health Information Services) - Documentation specialist

Junie Locklear (Administration) - Administrative assistant

Stephanie Smith (Care Management) - Lead social worker

Octavia Taylor (Patient Care Services) - Registered nurse

Employee assistance

by Jack Crain

"Why in the #&!*# did you send this patient to my floor before you had completed all of the proper procedures for transferring him!" Margo screamed into the telephone. "And don't ever do it again, especially on MY shift change, or you will regret it!"*

Taken aback by the verbal and emotional onslaught, Veronica bellowed back, "Listen sister, you don't understand who you're talking to. You come down here and we'll settle this thing right now!"

Margo and Veronica are not headed for a productive evening. As rising costs, job uncertainty or overwhelming debt escalate, making it difficult for Americans to cope, these two usually pleasant and competent health workers are among the growing trend of employees and employers who are grumpy, insulting, short-tempered or worse.

A recent Reuters news article revealed that:

- Anger in the workplace runs the gamut from just rudeness up to pretty extreme abusive behaviors.
- Nearly half of workers in America report yelling and verbal abuse on the job, with roughly a quarter saying it has driven them to tears.
- "Rudeness, impatience, and people being angry was typical behavior at home but at work we were professional. Now it's almost becoming trendy to do it at work."
(Anna Maravelas - *How To Reduce Workplace Conflict and Stress*)
- Research by Professor Paul Spector of the University of South Florida, indicates that two to three percent of people admit to pushing, slapping or hitting someone at work. That's as many as three million people.
- Desk rage extends across industry and class lines, from top white-collar jobs to gritty blue-collar work, costing companies lost productivity, sagging morale and higher absenteeism.
(Spector)
- "Somebody didn't just come in to work one day and shoot somebody. There's probably been a pattern of less extreme behaviors leading up to it." (Spector)
- Studies show that the average person becomes angry 15 times per day, usually the result of an unmet expectation.
- Unresolved anger sows the seeds of disease and illness, including the nation's number one killer, coronary heart disease. Research by the psychologist R. L. Seaward also indicates that there is a link with some forms of cancer as well.

Anger is not "bad;" it is a feeling. Anger is not the same thing as aggression. Aggression is a behavior. To feel angry can be normal and healthy. The key issue is how often and how much we get angry and what we then do with our anger. A constant state of uncertainty and insecurity means the mind and body's fight-or-flight response is too easily triggered and is rarely useful.

Get out of the way road rage, here comes desk rage

We overreact. We make mountains out of molehills and enlarge insignificant events as though they were emergencies or serious threats. We generalize and see everything as "black or white."

Fortunately, there is hope. We are not held captive to anger and hostility. We can realize that the world is experiencing an especially difficult period of time and decide to act in a way that will solve our frustration instead of increasing it with inappropriate behavior.

David S. Sobel, M.D., and Robert Ornstein, Ph.D., in *The Healthy Mind, Healthy Body Handbook*, offer a useful and practical approach to effectively managing anger and hostility. They suggest at the first sign of anger, count to three and ask yourself the following questions:

1. Is this really important enough to get angry about?
 - What's really going on?
 - What's the worst thing that can happen?
 - Is this incident serious enough to merit the time and energy I'm giving it?
 - Will this issue make a difference in my life in an hour? Next week? In a year?
 - Is it an isolated incident, in which case I can probably forget it, or is this a recurring problem that I need to deal with?
2. Am I justified in getting angry? Again, looking at the evidence, ask:
 - Do I have just cause to be angry?
 - Are my expectations realistic?
 - Am I confusing my feelings now with something that happened in the past?
 - Am I jumping to conclusions?
 - Could this person have a reasonable explanation for his or her behavior?
 - Am I misinterpreting?
3. Will getting angry make a difference?
 - If a co-worker is repeatedly late for meetings and this disrupts your work, should you act on your anger? That depends on whether you think your anger can change the situation. It may make a real difference to let your co-worker know (in an appropriate way) how much you are upset, and the consequences of his or her action.
(Sobel & Ornstein - *The Health Mind, Health Body Handbook*)

More often than not, getting angry and losing your cool is ineffective and counterproductive. Exploding and venting merely increase your angry feelings, put a strain on your relationships, and potentially damage your health.

Remember! When something occurs: Is it really important enough to get angry about? Am I justified in getting angry? Will getting angry make a difference?

For assistance in working through difficult situations which sometimes result in unresolved anger, or for other issues, call EAP at 671-5067 for a listening ear in a safe environment.

Jack Crain is the employee assistance program coordinator for SRMC.

Our people

Southeastern appoints new directors

Southeastern recently promoted **Kay Allen** to director of surgical services and **Kim Shilling** to director of maternal child health.

As director of surgical services, Allen is responsible for the operating room, pre/post anesthesia care, endoscopy, bariatric program and surgical/clinical nurse review. Allen was named to the directorship after working as assistant director for the department.



Kay Allen

Allen served as coordinator for the bariatric program, which began in November 2007 as part of the surgical services department.

Allen holds an associate degree in nursing from Robeson Community College. She earned a bachelor's degree in nursing from UNC Pembroke in 2001 and a master's degree in nursing from Duke University School of Nursing in 2007.

Allen currently lives in Lumberton with her husband, Tim, and their three daughters, Meghan, 13, Madison, 9, and Mallori, 4.

As director of maternal child health, Shilling is responsible for three units including the nursery, labor/delivery and obstetrics. Some of her daily duties include overseeing care and staffing needs. Shilling was named to the directorship following her service as interim director of the department.



Kim Shilling

Shilling, born in Wichita, Kan., but raised in Bladenboro, N.C., joined Southeastern in 1984 as a registered nurse in labor/delivery and obstetrics. She has worked on various units at Southeastern and has served as assistant director of surgical services, but her first love in nursing has always been maternal child health.

Shilling earned an associate degree in nursing from Southeastern Community College in 1984 and is currently pursuing a bachelor's degree in nursing from the University of Phoenix. She plans to enroll in a master's degree program following the completion of her undergraduate degree.

Shilling currently lives in Bladenboro with her husband, Robert, and two children, Blake Davis, 18, and Lauren Davis, 16.

Conferences

Education and Research Shared Governance Council members recently attended a **From Bedside Nursing to Research** conference in Chapel Hill, N.C. Attendees learned the importance of conducting nursing research in the clinical setting that is evidence-based and outcome driven. Following the conference, they presented their findings to Southeastern's Nurse Managers.

In memoriam



Mary F. Atkinson
(Intensive Care Unit)
1927 - 2008

Dr. Frank Carballo
(Lumberton Medical Clinic)
1963 - 2008

Frank Carballo, M.D.

Joining our team

Southeastern welcomes new provider



Barry Graham, PA

Physician Assistant **Barry Graham** recently joined the staff of Southeastern Urgent Care of Pembroke, which is located at 812 Candy Park Lane in the FoxGlove Medical Park in Pembroke.

A native of Prospect, N.C., Graham earned an undergraduate degree in biology with a biomedical emphasis from UNC Pembroke in 2001 and completed physician assistant training from East Carolina University in Greenville, N.C. in 2004.

Graham currently lives in Prospect and has a seven-year-old daughter, Lauren.

Awards

The following were selected as ~~2008~~ Bear Team Customer Service Excellence winners:

June Golden Bear Winner

Lisa Donovan
(Occupational Therapy)

July Golden Bear Winner

Amanda McDougald
(Float Pool)



Lisa Donovan



Amanda McDougald

Social Worker **Shereta Jenkins** received the June Shining Star Award at the Gibson Cancer Center. Employees at the Center nominated Jenkins for the award.

Speakers Bureau

Lekisha Hammonds (Community Health Services) was a guest on "From the Chairman's Desk," a television program of the Lumbee Tribe which aired on Channel 47 on Sunday, June 15. Hammonds discussed a health screen which was sponsored by the Lumbee Tribe and SRMC on June 27 at Soaring Eagle Community Building in Lumberton.

Recruitment/Retention Nurse **Natalie Russ** and Assistant Director of Nursing for Infection Control **Dale Gifford** presented programs for children of Little Hands Day Care of Bladenboro, N.C., on July 17 on *Becoming a nurse and Hand hygiene*.

Jon Thorsten (Medical Imaging), **Carol McDonald** (Laboratory), **Karen Whitmore** (Pharmacy), **Elaine Pate** (Marketing), and **Kelli Borbet** and **Amanda Crabtree** (Public Relations) hosted tours of the Medical Center for students of Southern Regional Area Health Education Center's Health Academy on June 24.

Jack Crain (Employee Assistance Program) spoke to the staff of Child Care Directions on June 23 on *Laughter is the best medicine*.

Vickie Atkinson (Southeastern Home Care Services/Hospice/Hospice House) spoke to Lumberton Rotary Club on July 8 on *Services provided by Southeastern Hospice*.

IN TOUCH

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Kelli Borbet PR SPECIALIST



In the community

Southeastern sponsors
"Snakes Alive" program

Southeastern Regional Medical Center sponsored a "Snakes Alive" program at the Robeson County Public Library on July 11. Emergency Services RNs **Donna Davis** and **Amy Williamson** presented a brief program on snake and spider bites before Herpetology Specialist Ron Cromer presented a program on reptiles as part of the library's annual summer reading program. More than 300 children and adults, shown above, attended and participated in the interactive program that showcased a variety of snakes and reptiles. Pictured at right, Cromer, left, hands Williamson a non-poisonous snake during the program.

