



Bergen Regional Medical Center Progress and Prospective Report 2015



Table of Contents

Three Divisions of Care... One Commitment to Excellence.	3
Bergen Regional Medical Center at a Glance	4
Executive Overview	5
Executive Leadership	6
Physician Leadership	7
Profiles	8
Accomplishments/Achievements Highlights	9 – 11
Quality and Outcomes Management	12
Behavioral Health	13
Delivery System Reform Incentive Payment (DSRIP)	14
Acute/Nursing	15
Radiology Services	16
Department of Pharmacy	17 – 18
Department of Laboratory	18
Long Term Care	19
Information Technology	20 – 21
Security & Emergency Management Department, Telecommunications, Accreditation	22
Campus	23
Bergen Regional Driven Enhancements	24
The Foundation at Bergen Regional Medical Center	25
Volunteers	26
Bergen Regional Community Outreach	27
Employee Appreciation Activities	28
Marketing	29
Summary	30
Financial Report	31 – 32



Bergen Regional Medical Center

Three Divisions of Care . . . One Commitment to Excellence

Introduction

Bergen Regional Medical Center (Bergen Regional) continues to sustain and grow through the uncharted and challenging healthcare reform era. In the wake of a rapidly changing reimbursement environment, shrinking subsidies and the still unknown impacts of the Affordable Care Act, Bergen Regional continues to serve its fundamental mission: ***To provide quality health care services to the residents of Bergen County and serve as one of the foremost safety net hospitals in the state of New Jersey.***

Recognizing the challenges of operating a large and complex government-owned medical center, the County of Bergen (New Jersey) turned over the management of the hospital to Bergen Regional Medical Center, LP (BRMC, LP) in 1998, after almost 80 years under Bergen County government management. At that time, the hospital changed its name to Bergen Regional Medical Center and set off on a path to improve the quality of its services, expand its safety net mission and protect the County from future operating losses. BRMC, LP is pleased to present that it has accomplished this mission as evident in this 2015 Progress and Prospective Report.

Today, Bergen Regional provides the highest standard of care and continues to make significant quality improvements. Bergen Regional is in good standing with all state and federal regulatory licensing agencies and is fully accredited by The Joint Commission. Bergen Regional takes particular pride in the fact that its Long Term Care Division is fully certified by The Joint Commission since less than 6% of long term care facilities nationwide pursue and receive Joint Commission recognition.

Under BRMC, LP management the hospital has expanded its services in behavioral health, long term care, acute care and its unique Comprehensive Outpatient Clinic for those Bergen County residents on Charity Care, Medicaid, Medicare and a variety of Affordable Care Act plans. **Today, Bergen Regional serves the largest share of Charity Care patients of any hospital in the state of New Jersey, affirming its role as Bergen County's safety net provider for the mentally impaired, elderly and uninsured.**

During the past 18 years, BRMC, LP has shielded the County from negative financial exposure and successfully executed one of its primary financial objectives – avoiding significant losses by the former Bergen Pines County Hospital. In 1997, the year before BRMC, LP assumed responsibility for daily operations, the hospital lost \$5 million. Those losses have not only been eliminated, but BRMC, LP has provided more than \$135 million in payments to Bergen County/BCIA through the course of the Lease and Operating Agreement (see page 31, Financial Report).

Even with all these achievements, there are still critics of the County's decision to privatize the hospital 18 years ago. **However, the facts are indisputable.** Quality of care has improved drastically, services have expanded and the County has received significant financial benefit.

Bergen Regional
Medical Center
is a
safety net provider
for the state's
mentally impaired,
elderly,
uninsured
and underinsured.

Bergen Regional Medical Center at a Glance

Business Description

Established nearly 100 years ago, Bergen Regional is a full service, accredited medical center, which, through consistent growth and development, provides a scope of services far exceeding those found in a community medical center. Our highly trained and skilled staff embraces the mission of Bergen Regional Medical Center, which is to provide high quality, compassionate, and cost effective healthcare services to our community.

With 1,070 Total Beds, BRMC is the Largest Hospital in New Jersey and One of the Largest Public Hospitals in the Nation

- Three Major Service Areas of Care

Acute Care - Licensed for 173 Medical Surgical Beds

Long Term Care - Licensed for 574 Beds

Behavioral Health - Licensed for 323 Beds

232 Adult Acute Psych Beds

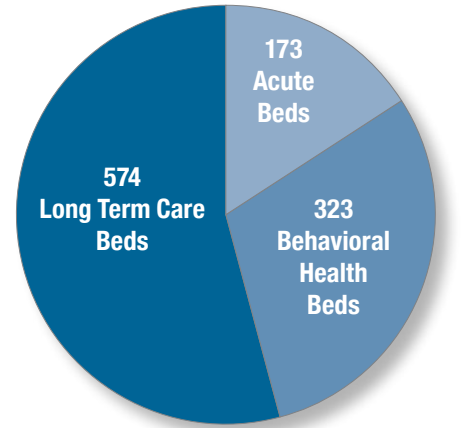
40 Adult Closed Acute Psych Beds

20 Adult Intermediate Specialized Psych Beds

17 Child/Adolescent Acute Beds

14 Child/Adolescent Intermediate Beds

- Access Center for Mental Health and Addiction Services
- Evergreen Substance Abuse Treatment Program
- Expanded Medical Detox Program for patients with complex medical conditions
- Psychiatry Residency Program
- Operating Room Suites
- Same Day Surgery Suites
- Acute Rehabilitation Services
- Critical Care Services
- Cystoscope
- General Diagnostic Radiography including fluoroscopy
- Low Dose Digital Mammography
- C.T. Scanning with 64 slice scanner
- Diagnostic Nuclear Medicine
- Diagnostic Ultrasound and Echocardiography
- Full Service Emergency Department providing care for medical and mental health emergencies
- Twenty plus Ambulatory Specialties available in the Comprehensive Outpatient Care Services medical clinic



Executive Overview

Accomplishments, Future Plans and Challenges

In this time of healthcare reform and challenge – including hospital closings and proposed state and federal cuts – Bergen Regional Medical Center continues to demonstrate a proactive and intuitive vision to ensure growth, stability and, most importantly, the delivery of the highest level patient care to the community it serves.

Therefore, Bergen Regional focuses on these goals:

- To continue our mission to provide quality health care to the residents of Bergen County, demonstrated by our very successful Joint Commission survey and increased quality indicators.
- To maintain our essential presence as the state's safety net provider, represented by the significant amount of documented charity care we deliver, and to position the Medical Center to provide comprehensive medical and mental healthcare services for the newly insured healthcare consumers on various Affordable Care Act plans.
- To fulfill our community niche offering the difficult to replicate services of behavioral health care, medical detoxification and specialty long term care services.
- To broaden access to the Medical Center's services by working collaboratively toward the provision of care to veterans and other traditionally insured consumers.
- To continue to be flexible and adaptable to challenging and ever changing healthcare trends.
- To enhance community awareness and perception through education programs, health fairs, focused customer service efforts, program marketing and public relations and campus improvements to ensure the current and future viability and stability of the hospital.



Bergen Regional Medical Center Leadership

The senior team comprises executives with the ability to think strategically, be adaptable and work cohesively. These experienced leaders are involved in professional and community organizations and understand the unique nuances and niches of Bergen Regional Medical Center. They are the first ones to stay on site for the duration of weather related events or any mitigating emergency. Each is vested in the success of the facility, its continued growth and, most importantly, to the essential care provided to the patients, long term care residents and community served by Bergen Regional Medical Center.



Susan Mendelowitz, RN, MPA, FACHE
President
Administrator
Chief Operating Officer



Ehud Fried, MPH, Esq.
Executive Vice President
Vice Chairman of the Board



Tom McCloskey
Vice President
Chief Financial Officer



Serge Dumay, MD, MBA, FACP
Chief Medical Officer
Vice President
Quality and Outcomes Management



John Regina
Senior Vice President
Human Resources



Thomas E. Amitrano, RN, MPA
Chief Nurse Executive
Vice President
Acute and Ambulatory



Kathryn Richardson, LNHA, MPA, CDP
Vice President
Administrator
Long Term Care



Thomas Rosamilia, MA, LPC
Vice President
Behavioral Health Services



Ron Li
Vice President
Chief Information Officer
Information Technologies



Herman Lindenbaum
Vice President
Facilities and Support Services



Donnalee Corrieri
Vice President
Marketing and Strategic Development

Our Physicians

Bergen Regional Medical & Dental Staff Chiefs and Directors

Bergen Regional Medical Center is proud to have the following physicians as Chiefs and Directors.

Barbara Palmer, MD
President, Medical & Dental Staff

Ariff Admani, MD
Chief of Infectious Disease

Howard W. Baruch, MD
Chief of Orthopaedics

Salvatore Dangelo, MD
Chief of Allergy & Immunology

Serge Dumay, MD
Chief Medical Officer
VP for Quality & Outcomes Mgmt.,
Medical Director, LTC Division
Comprehensive Outpatient Care Services
Medical Clinic

Edward Ewald, MD
Chief of Rheumatology

Danielle Groves, MD
Director of Physical Medicine
and Rehabilitation

Edward G. Hall, MD
Chief of Child & Adolescent Psychiatry

Youssef Hannallah, MD
Director, Emergency Medicine

Anna Harutyunyan, MD
Chief of Hospital Medicine

Asghar Hossain, MD
Chief of Behavioral Health Geriatric Svcs.

Gabriel Kaplan, MD
Medical Director, Behavioral Health Svcs.

Scott D. Lippe, MD
Chief of Gastroenterology

Howard Maker, MD
Chief of Neurology

Joseph W. Montagnino, MD
Chief of Cardiology

Madanmohan Patel, MD
Chief of Pulmonology

Alexander M. Panossian, MD
Chief of Urology

Dmitry Primak, MD
Chief of Addiction

M. Hanif Ramay, MD
Chief of Behavioral Health Adult Acute
Specialty Services

Hayman Rambaran, MD
Director of Addiction Treatment Unit

Don Respler, MD
Chief of Otolaryngology

Adriana Ros, DO
Director of Dermatology

Susan Rubinoff, MD
Director of Radiology

David Schoenberg, DDS
Director of Dental Medicine

Michael Sears, DPM
Chief of Podiatry

Aiman Shilad, MD
Director of Gynecology

Nader Shakibai, MD
Chief of Nephrology

Indu Sharma, MD
Chief of Hematology & Oncology

Bennett Silver, MD
Director of Psychiatry Residency Training

Robert Sweeting, MD
Director, Department of Medicine

Charles Tsakrios, MD
Chief of Ophthalmology

Ronald A. White, MD
Director of Surgery

Joseph Vella, MD
Director of Laboratory and Pathology

Ravi Venkataraman, MD
Chief of Anesthesia

Dima Yeshou, MD
Chief of Endocrinology

Scott Zucker, MD
Chief of Pediatrics

Expert Care...Caring Experts



Sandra L. Sweetman, RN

Registered Nurse for the Bergen Regional Addiction Treatment Unit
Member, HPAE, Union for Health Professionals and Allied Employees

“ I have the opportunity to serve the community where I grew up. Each day I help a vulnerable and underserved population as a member of the largest medical detox team in the County. Knowing I work at a hospital that is dedicated to providing these unique services and offers complete and collaborative care all in one place is very rewarding. ”



Edward G. Hall, MD

Chief Psychiatrist, Child and Adolescent Behavioral Health Services
Member of the Doctors Council, a Physician Union

“ The most rewarding aspect of my work is seeing a child or teenager who has lost their desire to live, regain hope and rediscover their importance to family and friends. For 15 years, I have received consistent support from the Bergen Regional administrative team to provide whatever is needed to accomplish our goal to treat and support children and families who have no other resources in their time of need. ”



Louan Johns, RN

Registered Nurse in the Behavioral Health Division at Bergen Regional
Member, HPAE, Union for Health Professionals and Allied Employees

“ The most rewarding part of my job is seeing the strength, courage and humility our patients share with us on a daily basis as they work toward conquering their addiction. I am grateful to be a part of their journey, their recovery and their overall healing process. I am also grateful to work at a hospital that proudly serves as a safety net facility. At Bergen Regional, I can practice nursing with both autonomy and as an integral team member. Nurses are valued here. We receive support from administration and we know our voice matters. ”



Mokammel Pathan

Inpatient Pharmacist
Member, HPAE, Union for Health Professionals and Allied Employees

“ The variety of services offered by Bergen Regional and the size of the facility allows me to help so many patients and long term care residents. Every day I come to work, I know I make a difference as a part of an interdisciplinary team of doctors, nurses, and pharmacists working together to improve our patients' and residents' quality of life. ”

Accomplishments/Achievements Highlights

Significant accomplishments and capital investments (see page 38, Financial Report) have been made by BRMC, LP that shows dedicated efforts to achieve our goals and deliver care to our patients and long term care residents.

Below is a summary of some of the key achievements/accomplishments spearheaded by BRMC, LP:

Bergen County Benefit

- \$135 million in payments from BRMC, LP to Bergen County and BCIA
- Elimination of any potential annual operating losses
- Fiscally Responsible Facility Management
- Removal of Employee Benefits Cost from Bergen County payroll

Fiscal Strength

- 96% Occupancy Rate for Long Term Care
- Doubled Emergency Department, Clinic, Detox and BHS Patient Usage
- Financially Sound Facility Management
- Increased Patient Usage of Facility's Services

Technology

- Migration to Electronic Medical Record
- Successful Meaningful Use Attestation
- Information Technology Infrastructure Overhaul
- Telecom Recovery System

Clinical Advancements

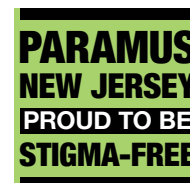
- State of the Art GE MRI Machine
- Philips Microdose Mammography Machine
- 64-Slice Bariatric CT Scanner
- Computerized Medication Carts
- Parata Pharmacy PASS500 Robotics
- Increased Infection Control and Quality Measures

Awards/Accreditations/Inspections

- ACR Mammography Accreditation
- CAP Accredited (Laboratory)
- FDA Mammography Inspections
- Hospital Newspaper Hospital of the Year
- Joint Commission Accreditation
- New Jersey Board of Pharmacy Inspection
- New Jersey Department of Health
- NICHE Hospital Designation
- NJ DEP Radiology Inspections
- NJ Healthcare Heroes Nursing Home of the Year

Hospital Affiliations/Collaborations/Support

- Alzheimer's Association
- Bergen County Collaborative
- Bergen Volunteer Medical Initiative (BVMI)
- CarePlus
- Community Blood Services



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Accomplishments/Achievements Highlights

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Community Health Improvement Partnership of Bergen County (CHIP) Mental Health Task Force
Foundation at Bergen Regional Medical Center
National Alliance for the Mentally Ill (NAMI)
New Jersey Association of Mental Health and Addiction (NJAMHA)
New Jersey Buddies
New Jersey Hospital Association (NJHA)
New Jersey Sharing Network
NJHA Behavioral Health Constituency Group
Northern New Jersey Maternal/Child Health Consortium
Paramus Stigma Free
Shelter Our Sisters
Vantage
West Bergen Mental Health

Facility Improvements

9/11 Memorial Site
ATU Detox Renovation
Auditorium Renovation
Café Renovation
Chapel Renovation
Comprehensive Outpatient Care Services Renovation
Emergency Department Renovation
Front Lobby Renovation
MICA Renovation
MRI Area Renovation
Screened Patios on Long Term Care Units

Service Enhancements

Addition of State of the Art Radiology Equipment
Creation of Access Center for Mental Health and Addiction Services
Expansion of Mental Health and Addiction Services
Increased Number of Outpatient Ambulatory Specialty Clinics Offered
Internal Call Center Development
Patient Medical Information Portal
Program to Enhance Behavioral Health Patient Outcomes
Shared Decision Making: Electronic Self-Assessment (DSRIP)
Strive for 5 Service Excellence Program

Specialty Services

Addiction Services
Child/Adolescent Behavioral Health Services
Complete Continuum of Behavioral Health Care
Comprehensive Long Term Care Program
Digital Mammography Machine Utilizing Lowest Dose Radiation Technology
Geriatric Behavioral Health
High Acuity Medical Detox
Korean Long Term Care Program
Medical Detox
Comprehensive Outpatient Care Services medical clinic with more than twenty subspecialties
Mental Health Emergency Services



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Accomplishments/Achievements Highlights

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Education

Development of a Leading and Competitive Psychiatry Residency Training Program
 Student intern supervision in the areas of social work and addiction counseling

Educational training site for:

- Bennington College
- Bergen Community College
- Berkeley College
- East Stroudsburg University
- Eastern International
- Eastwick College (HoHoKus)
- Fairleigh Dickinson University
- Felician College
- Holy Name Hospital School of Nursing
- Jersey College
- Kean University
- Lincoln Technical Institute
- Long Island University
- Merritt Technical School
- Monmouth University
- Montclair University
- New York University
- Nyack College
- Pace University
- Ramapo College
- Ross University
- Rutgers University
- Seton Hall University
- St. Peter's University
- St. Thomas Aquinas College
- Touro College
- William Paterson University



Community Relations and Marketing

- Community Education Programs on Addiction and Mental Health Topics
- Community Health Fairs
- Extensive Community Outreach and Integration
- Known for Niche Behavioral Health, Detox and Long Term Care Services
- Monthly Continuing Education Programs for Professionals
- Multiple Media Interviews with Various Bergen Regional Staff as Field Experts
- Print, Internet and Cable TV Spots Created and Aired Promoting Behavioral Health, Detox, Long Term Care, Medical Clinic Services, Radiology Services, Emergency Department

Quality and Outcomes Management

Achievements

- Oversaw the preparation and successful triennial Joint Commission accreditation survey
- Achieved NJHEN Mentor Status
- Selected to participate in CMS Webinar for Best Practices regarding patient safety scores and initiatives
- Participation in the New Jersey Partnership for Patients program successfully reducing post-surgical infections, adverse events from medication or falls, cases of pneumonia while on a ventilator, urinary tract infections, bloodstream infections and pressure ulcer development.
- Implemented successful hospital-wide noise reduction program

Improvements in the Quality and Safety of Patient and Resident Care

Polypharmacy Reduction in Long Term Care Residents

Led a multi-disciplinary team in the reduction of the average number of medications prescribed for long term care residents from 18 to 14 and reduced the number of residents receiving more than 25 meds from 86 to 26, thereby improving the quality of life, resident safety, resident/staff satisfaction and effecting more appropriate use of resources.

Foley Catheter Use Reduction

Improvement activities reduced long term care residents' Foley catheter days from a high of 1920 to 541. A decrease in catheter days reduces infection risk, improves resident mobility and reduces bladder stone development. Additionally, recent studies have shown that individuals with long-term Foley catheters are at a greater risk for bladder cancer.

Hydration Maintenance in LTC Residents

Performance improvement activity resulted in the reduction of objective signs of dehydration from 13.5 per 1,000 resident days to 4.5 per 1,000 resident days resulting in improved quality of life and reduced hospital admissions.

Patient Altercation Reduction in Behavioral Health

Reduced patient altercations from 4 per 1,000 patient days to 2 per 1,000 patient days. On the children's unit, the altercation rate was decreased from 33 per 1,000 patient days to less than 6 per 1,000 patient days. This was achieved through division-wide interventions and population specific improvement.

Patient Contraband Reduction

To prevent the possession of banned items (i.e., narcotics, other drug paraphernalia, tobacco, tobacco-related items, and sharp or heavy items with the potential to be weaponized) among our behavioral health population, attention was paid to the patient visitor process. Staff members were retrained on their roles in this process and furniture and video cameras were rearranged to permit better visualization of activities during visiting hours. Additionally, on the visitor sign-in sheet, a notation was added that stated the 'passing of substances to patients is prohibited and when an illegal substance is passed the police will be contacted and both parties will be prosecuted to the fullest extent of the law'. These actions resulted in a 50% reduction of contraband being found on patients.

Improving Patient Centered Care on ATU (Unit 11-3)

The treatment model used to provide care was revised, with more emphasis on the medical aspect of treatment and more registered nurses were added to the staffing matrix. Simultaneously, continuous Executive Rounds were conducted and cosmetic improvements completed on the unit. Also, the implementation of CPOE and the eMar was implemented to increase patient flow. A new clinical director was appointed, the medication administration process was changed and the RN now brings meds to the patient, which allows for better surveillance/assessment of patients. Additionally, medication administration times were revised to provide less patient interruptions and more time for RN/patient interactions. In recent months, patients with significant medical needs were housed on Unit 11-4 to provide more intense medical care. A unit specific nurse manager was appointed to oversee patient care on the unit. As a result of these changes the following improvements were noted:

- Overall patient occurrences decreased from 4 per 1,000 patient days to less than 2.
- Incidents of contraband decreased from 1.6 per 1,000 patient days to less than 0.1.
- Patient altercations decreased from 0.8 per 1,000 patient days to less than 0.2.
- AMA Rate decreased from 60 per 1,000 patient days to 36.
- Overall patient satisfaction increased from a mean of 67% to 71% and satisfaction with nursing increased from 67% to 75%.

Behavioral Health

Achievements

- Development and initial rollout of our DSRIP project, Shared Decision Making: Electronic Self-Assessment, within our Behavioral Health Outpatient Department.
- New programming, including:
Adolescent services in our Evergreen substance abuse treatment program. Initially offered as adolescent group therapy in 2012, this has expanded to an IOP as of September 2014. Program census is already exceeding 20 per day.

Modification of eight beds on the long term geriatric unit to float beds that can be used for acute admissions. Begun in April 2014, a total of 1,088 acute level patient days were delivered on the unit by the end of the year.

We have received initial State certification as a Drug Court program provider in our Evergreen Treatment Services, allowing us to treat referrals from the County and State judicial system, thereby broadening our referral base and gaining positive public perception as a provider of choice.

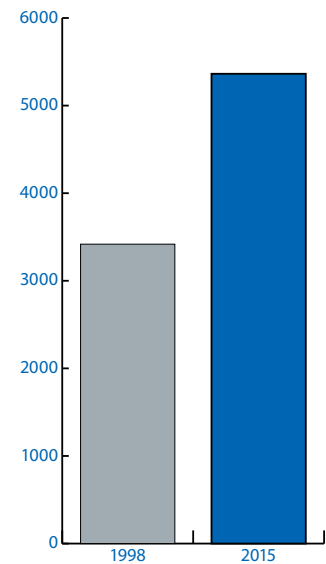
Accreditations

During this period we have successfully maintained all required accreditations and certifications, including our annual Short Term Care Facility (Units A-G/ B-G) and Children’s Crisis Intervention Services (Unit F-G) certifications; annual Partial Hospital Program Medicaid review; and our State program license review for the Evergreen outpatient services.

Improvements/Enhancements

- Established an electronic medical record system (EMR) in our Outpatient Behavioral Health program. This will be extended to our Partial Hospital Program in 2015.
- Further integration of system enhancements to our inpatient EMR. This relates to meeting Federal Meaningful Use Standards and keeps pace with the technological shifts in healthcare, positioning the programs to participate in health information exchanges and joint partnerships relating to Accountable Care Organization (ACO) type activity. Staff devoted considerable time to training and mastering such add-ons as computerized provider order entry, electronic medication administration records and medication reconciliation.

BHS Total Admissions 1998-2015
57% Increase



Visiting Professors

Bergen Regional is proud to offer an unparalleled educational program to our Psychiatry Residents delivered by the visiting professor faculty. Visiting professors are internationally recognized key opinion leaders who teach modules in their area of expertise. Unlike the brief, single Grand Rounds format, these modules consist of up to 12 hours of lectures and case conferences per faculty member. Thus, our psychiatrists-in-training have the unique opportunity of interacting closely with well known academicians from the best regarded US medical schools.

Delivery System Reform Incentive Payment (DSRIP) Program

In 2013, the Hospital Relief Subsidy Fund (HRSF) was transitioned to a performance-based, competitive DSRIP program. The Delivery System Reform Incentive Payment (DSRIP) Program is one component of the New Jersey Comprehensive Medicaid Waiver as approved by the Centers for Medicare & Medicaid Services (CMS). DSRIP is a demonstration program designed to result in better care for individuals (including access to care, quality of care, health outcomes), better health for the population, and lower costs by transitioning hospital funding to a model where payment is contingent on achieving health improvement goals.

Hospitals qualify to receive incentive payments for implementing quality initiatives within their community and achieving measurable, incremental clinical outcome results demonstrating the initiatives' impact on improving the New Jersey healthcare system. Bergen Regional's approved DSRIP project is the Electronic Self-Assessment and Shared Decision Making program that has been implemented in the BHS Outpatient department.

The goal of the project is to encourage our consumers to be more actively involved in their treatment and the direction/focus of their care. The belief is that a better informed and participating person will be more engaged in their treatment and therefore more likely to stay with it by coming to sessions and carrying out their portion of the treatment "contract."


To achieve this engagement, Bergen Regional is using an electronic self-assessment tool that each outpatient is able to access online. We are providing the ability to access the survey tool through computer kiosks installed in our outpatient services department for behavioral health. The completed assessments are readily available to the clinicians to review in advance of the session and serve as the foundation for the patient-provider meeting. Peer Specialists have been hired and trained to work with consumers in understanding and navigating the software.

Ultimately, we hope the end result of this critically important endeavor will show a decrease in missed sessions and less reliance on the Emergency Department, also resulting in a decrease in readmissions to the hospital and an overall increase in patient satisfaction and treatment success.

The commitment made to the DSRIP program preserved vital hospital funding for Bergen Regional Medical Center to ensure that it's mission could be continued.

Shared Decision Making
A great new way to take control of your care at Bergen Regional Medical Center

You are the most valuable member of your BRMC wellness team.



Patients will soon have the ability to show clinicians how they are feeling and how things are going using BRMC's new integrated software self-assessment program, CommonGround™.


CommonGround™ helps the patient and the clinician develop a treatment plan, guiding the patient with a personal medicine approach.

Using BRMC's new integrated self-assessment software promotes a faster and more direct approach to a patient's overall wellbeing.

Feel. Share. Heal.
No one has more power than you when it comes to your treatment and recovery.


The shared decision making portal is part of a secure network. Your information can only be accessed by you and your clinical team.

Ask your clinician about shared decision making.



Shared Decision Making
A great new way to take control of your care at Bergen Regional Medical Center

Your personal medicine helps obtain your goals.



Personal medicine is an activity such as exercising, reading, and listening to music that gives your life meaning and helps you on your path to wellness.


Using BRMC's new integrated software program, CommonGround™, a patient has tremendous opportunity to really take charge of his/her treatment.

By sharing their knowledge of their personal medicine, patients work hand-in-hand with their clinician and have the power to create better treatment plans to support positive outcomes.

Feel. Share. Heal.
No one has more power than you when it comes to your treatment and recovery.


The shared decision making portal is part of a secure network. Your information can only be accessed by you and your clinical team.

Ask your clinician about shared decision making.



Shared Decision Making
A great new way to take control of your care at Bergen Regional Medical Center

What's your Power Statement?



A Power Statement is the map and compass that keeps you heading toward your recovery goals.


Your doctor can't decide what your recovery goals are, only you can do that. Your Power Statement and recovery goals will help your doctor know where you want to go and how to best get there.

These tools are stepping stones in the recovery journey, bringing you to the life you want.

Feel. Share. Heal.
No one has more power than you when it comes to your treatment and recovery.

The shared decision making portal is part of a secure network. Your information can only be accessed by you and your clinical team.

Ask your clinician about shared decision making.

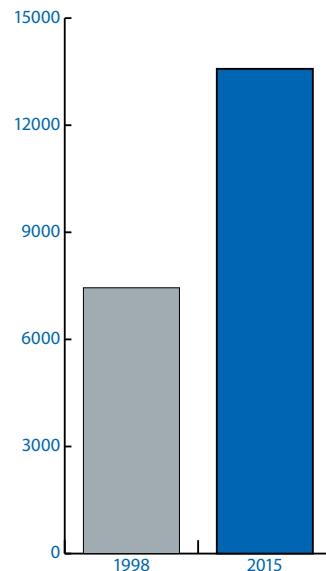


Acute / Nursing

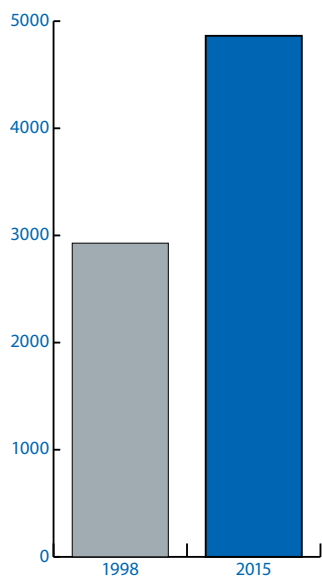
Achievements

- The Department of Nursing is a designated NICHE facility with NICHE practices expanded from the Acute Division to the LTC Division.
- New telemetry monitoring system installed in 2014. This system allows for remote monitoring of patients in the ITCU as well as on the Medical Surgical unit.
- The ICU was equipped with five (5) brand new Hill-Rom P1170 beds. The beds are equipped with special mattresses to decrease the risk of pressure ulcers, as well as a built in scale allowing us to assess patients' weight status.
- The Education Department offers nurses over a two-year period the required 30 CEUs needed for licensure at no cost. Educational programs are given throughout the year allowing nurses to obtain educational credits without paying outside education providers.
- The Operating Room was equipped with three (3) new Mindray A3 anesthesia machines. These machines enhance the delivery of anesthesia to patients.
- Significant facility enhancements made to the Comprehensive Outpatient Care Services medical clinic.

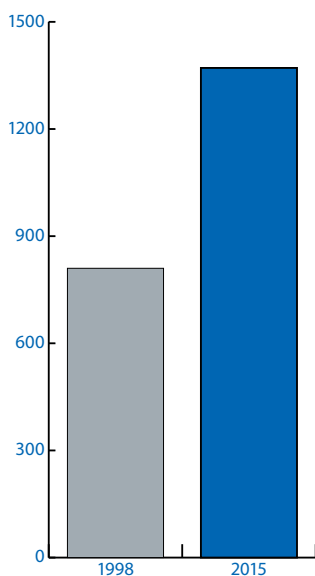
ER Visits 1998-2015
82% Increase



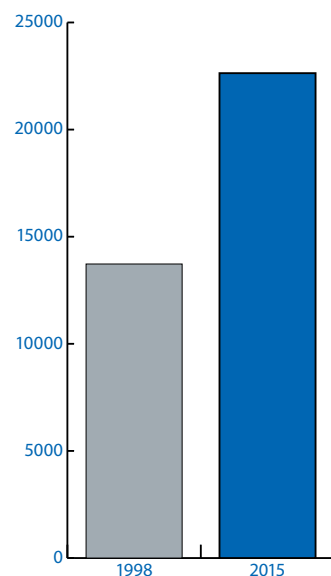
11-3 Detox Admissions 1998-2015
66% Increase



Operating Room 1998-2015
69% Increase



Medical Clinic Visits 1998-2015
65% Increase

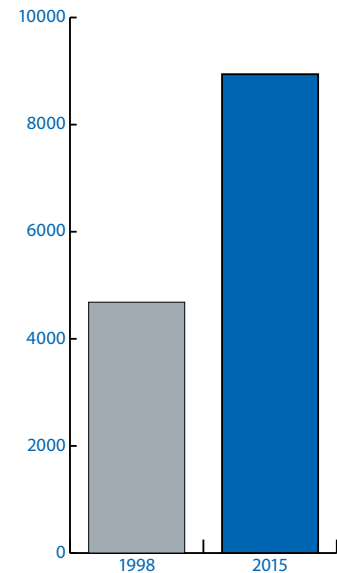


Radiology Services

Achievements

- Digital Mammography purchase and accreditation achieved with ACR. Researched and acquired new Philips Microdose Mammography unit to provide highest quality mammograms with the absolute lowest dose (one third the dose of other digital mammography units).
- Purchased state of the art GE MRI scanner to replace former mobile MRI service which only provided lower grade MRI two days per week. This better serves patients by increasing availability of both scheduled and urgent outpatient and Emergency Department MRI scans.
- Contracted with a service to bring stereotactic breast biopsy ability to Bergen Regional. This allows a minor outpatient procedure of a breast biopsy instead of an open surgical procedure.
- New PACS installation to reduce monthly operating costs and expansion to allow use and storage of mammography and digital x-ray.
- Conversion of x-ray exam on film to a digital x-ray stored on PACS and available for viewing throughout the facility.
- Voice Recognition Dictation now allows almost immediate final reports to be available throughout the facility. Previous dictation and transcription had significantly longer turnaround times, including additional wait for radiologist approval.

Radiology Visits 1998-2015
91% Increase



Accreditations

- Successful FDA Mammography Inspections
- Successful NJ DEP Radiology Inspections
- ACR Mammography Accreditation.

Looking Ahead

- Proposal to add bone density services to diagnostic imaging services.



Department of Pharmacy

Core Statistics

- Long Term Care 2014 – 102,305 prescriptions filled, approximately 5% increase since 2012. 2014 – Drug expense \$4.1 million.
- Outpatient Pharmacy 2013 – 201,394 prescriptions filled at an average rate of 811/day. 2014 – 162,602 filled for an average of 654/day drug expense of \$4.95 million. *Drop in prescriptions secondary to impact of ACA.
- Inpatient pharmacy medication orders processed 2013 – 292,959. 2014 – 275,486. 2014 – Drug expense \$2.67 million
- The pharmacy dispenses medication types including chemotherapy, patient controlled analgesia, parenteral nutrition, all non-sterile compounding, and all critical care sterile products.
- The pharmacy is structured as a centralized unit-dose fill model supported by six (6) automated dispensing cabinets (i.e., Acudose) and robotics for repackaging. The outpatient pharmacy is supported by robotics to aid in prescription filling.



Pharmacy Performance Improvement/Quality

- LTC Polypharmacy reduction of average number of meds per LTC resident from 18 to 14; average number of non-PRN standing orders is 11.
- PRN med orders with indication rapid cycle reduction from 1.2% PRN med orders to 0.2% by mid-Sept 2014.
- Abilify® drug use/expense reduction.
- 24/7 coverage with pharmacist available at all times, consistent with support of patient care and Meaningful Use initiative.
- Increased Outpatient Rx, Patient Throughput – Feb 2013 – Feb 2014 average line size reduced by 50%. Initiatives included customer service training and use of security staff in the wait area, added video monitor to announce completed prescriptions, implement both robotics and software management of prescriptions, increase use of e-prescribing in the clinic.
- Robotics for Outpatient Pharmacy (Innovation) – live mid-Feb 2013 – as much an operational improvement as a significant quality enhancement. Supports over 80% of Bergen Regional, the most common tablets and capsules dispensed; creates the ability to track and prioritize each prescription, without paper. Essential when workload ranges from 700-800 Rx/day.
- ePrescribing in the Ambulatory Clinic quality enhancement for processing outpatient prescriptions.
- eMAR went live – Sept 2013 – medication profiles in the pharmacy module supports eMAR and use of bedside barcode verification. Several procedure changes were required for pharmacist medication order-entry process.
- CPOE began prior to 2012 – several enhancements adopted as noted in P&T Committee minutes over this timeframe. For example, Clozaril reports, pneumonia order set, addiction treatment order set.
- Medication Safety Subcommittee – charter updated Sept 2012 – particular attention on preventing future med occurrences and action steps after reviewing ISMPs Quarterly.
- Action Agenda (ISMP = Institute of Safe Medication Practices).
- RiskPlus implemented – Jan 2012 – hospital-wide computerized documentation of med occurrences and other risk management occurrences.
- Anticoagulation (Warfarin) dosing/monitoring – assess Warfarin dosing compliance and INR time in therapeutic range; last full year of data, 2013, shows dosing compliance of 91.4% and INR within range 85% of time, both above national benchmarking data.

Department of Pharmacy

Accreditations

- The pharmacy underwent visits by the NJ Board of Pharmacy twice, Department of Health twice (LTC), and The Joint Commission resulting in full accreditation.
- Successfully passed NJDOH Blood Bank inspections.
- 2014 CAP accreditation renewed successfully.

Operational Improvements

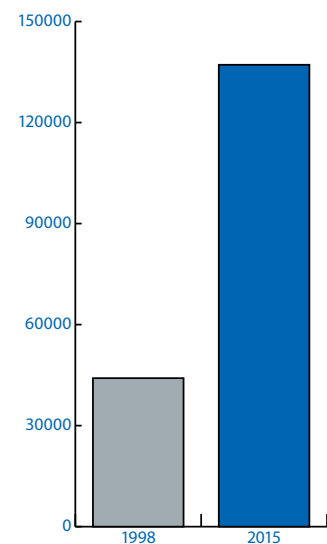
- Robotics (Parata) for inpatient pharmacy – Nov 2014 – repackaging machine to assist in filling both Long Term Care (LTC) and Inpatient medication orders. Automated and interfaced with both software platforms. Presently only LTC is active. Improved labeling/readability for nursing staff.
- Outsourcing agreement for complex parenteral nutrition solutions – Dec 2014 – agreement approved by the Board of Pharmacy that provides Bergen Regional patients with very complex parenteral nutrition admixtures.
- Drug Wholesaler and Reverse Distributor changes – 2013 & Apr 2014 – cost reduction strategies; significant impact on pharmacy operations.
- Use of Split-Billing Software (Talyst) – Apr 2013 – key software that allows for comingled drug inventory, i.e., 340B and GPO/WAC purchasing. Designed to work with both inpatient and outpatient pharmacy computer systems.
- Installation of two new Acudose Med Cabinets – SDS Jan 2014 & 11-3 Apr 2014 – enhanced quality med turnaround time/med access; ease of controlled substance accountability.

Laboratory

Achievements

- Continues successful Laboratory proficiency testing, which is required for accreditation.
- Meaningful Use – all lab tests updated with MIS support in 2013.
- Reduced excessive/unnecessary lab testing with Administration support:
 - » Reduced “NO STOP DATE” lab orders in all divisions to minimum
 - » Monitor and cancel duplicate/out of protocol testing with Med Dir/CMO support.
- Continuing Education – organize in-house education events for lab staff
 - » Maintain all management lab staff to current topics in laboratory science through seminar
 - » Maintain all lab staff compliance to mandatory training/competencies
 - » Organize one-day educational events for NJNY-PA laboratory community through NJCLMA.
- Renovated ambulatory blood draw room/waiting areas in 2012-2013 to promote employee wellness.
- ACT Elite – Coagulation analyzers replaced older refurbished ACL 3000 and ACL 1000 (not interfaced).
- DXH 600 – Hematology analyzer replaced older refurbished ACT8 –manual/ No interface.
- Converted manual Reticulocytes to automation on DXH600 in 2014.

Lab Tests 1998-2015
211% Increase



Long Term Care

Bergen Regional is one of two New Jersey long term care facilities participating in an 18-month project funded through a CMS grant called 'More Than Meds'. 'More Than Meds' is a quality improvement grant project focusing on the reduction of antipsychotic medication through a person-centered care approach for those living with dementia in a long term care facility. Bergen Regional Medical Center is participating in this project with assistance from Rutgers University School of Management and Labor Relations, along with person-centered care consultants. Residents, family members, and staff will participate in various parts of the project – from educational programs to focus groups. The 'More Than Meds' program helps us identify what is important to our residents, and review our systems to support them and those working closest with them, to enhance our person-centered care approach.

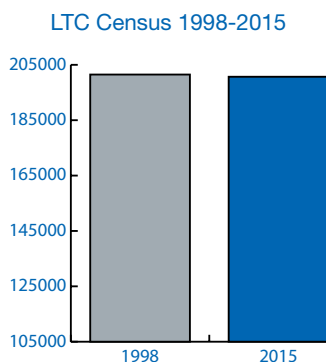
A key component of 'More Than Meds' is focusing on reducing antipsychotic usage for individuals with dementia living at Bergen Regional by using a person-centered care approach. Antipsychotics are medications that are primarily used to manage psychosis, but are sometimes used to manage behaviors of people with dementia. One way to reduce dependence on antipsychotics is to develop a person-centered culture that focuses on the person, not the task at hand. In addition to helping our residents, we will also be part of an effort at the end of the project to create a toolkit based on our experiences. The toolkit will be used to train and support other nursing homes in the state, and the nation, on the person-centered care approach. Bergen Regional hopes to inspire other long term care facilities throughout the United States to adopt this approach.

Achievements

- 2012 NJBIZ Healthcare Heroes Nursing Home of the Year Award
- Facility Leadership Award via American College of Health Care Administrators May 6, 2012
- Administrator received 40 Under 40 Award - November 2013
- Adoption of the 'Person-Centered Care' concept increasing the interactive process between residents, caregivers and others that honors a resident's dignity and choices in directing their daily life.
- One of two facilities in NJ chosen for a grant, 'More Than Meds', focused on reducing antipsychotic use through a person centered care approach
- Wound care certification achieved for multiple staff members



one of only **6%**
Long Term Care facilities
nationwide to pursue and
receive Joint Commission
accreditation.



96%
2015 Occupancy Rate
 In New Jersey the average
 occupancy rate for long
 term care facilities is 90%.

Information Technology

Never has there been a more dynamic time regarding healthcare information technology (HIT). Since the onset of the HITECH Act, Bergen Regional has improved delivery of healthcare and patient healthcare outcomes through the implementation and use of technology, creating a secure electronic healthcare exchange. Bergen Regional has invested a great deal of finances, time, additional staff and effort to make sure the hospital is in compliance with HITECH's Meaningful Use program, which associates financial incentives with obtaining key electronic medical record (EMR) goals. There are three stages to meaningful use implementation and if compliance is not met, financial exposure ensues. The migration to the EMR and the successful attestation for Meaningful Use has cost Bergen Regional millions, and will continue to be a daunting financial investment throughout the process.

Achievements

- Keane LTC system - Electronic User Defined Assessments (UDAs)
- Keane LTC system - Full adaptation of Care Plan
- Talyst 340B split application for inpatient
- Talyst 340B split application for outpatient
- Innovation Robotix for Retail Pharmacy
- Paragon Medication Administration with new medication carts
- Meaningful Use Attestation Stage 1 Year 1 for Medicaid
- Paragon Request for Information module
- Paragon Referrals & Authorization module
- WiFi Network for guests and patients
- MPF eHealth Record System upgrade with total hardware replacement
- Triactive Problem Management Application
- Migrate to Paragon version 10 with total hardware replacement (servers and SAN)
- Voicent for Retail Pharmacy (auto dialing for refills)
- Intrusion Protection System (IPS) implementation
- Paragon Medication Reconciliation
- Paragon Physician Documentation for Emergency Department
- Meaningful Use Attestation Stage 1 Year 1 for Medicare
- Meaningful Use Attestation Stage 1 Year 2 for Medicaid
- Migrate 250 user workstations with new hardware and Microsoft OS platforms
- ADS Practice Management for Ambulatory Medical Clinics
- Novarad PACS replacement of existing PACS
- Novarad Mammography
- Replacement/addition of EKG machines and interface into Novarad
- Replacement of 250+ printers
- Paragon Clinical Portal for CDAs upon discharges
- Paragon interface to the State for infectious disease reporting
- Paragon Rule Engine for critical measurements

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Information Technology

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- Parata Robotic for main pharmacy - LTC Division
- Meaningful Use Attestation Stage 1 Year 3 for Medicaid
- Meaningful Use Attestation Stage 1 Year 2 for Medicare
- Migrate 500 user workstations with new hardware and Microsoft OS platforms
- ADS Practice Management for BH Clinics except Partial and Evergreen units
- ADS Practice Management enhancement for DSRIP
- Kronos enhanced scheduler and employee self-service
- Gap Analysis for eHealth Record environment
- Relay Health - Relay Assurance
- Relay Health - Relay Accounts
- Relay Health - Relay Clearance
- Relay Health - Relay Acuity and Reporting

Looking Ahead

- UltiPro HR and Payroll - Onboarding
- Parata Robotic for main Pharmacy - Acute and BH Division
- Revise Local Area Network with additional connections and triangulation for reliability improvement
- Establish additional Computer Hub in Building 5
- Disaster Recovery Contingency Planning and Setup
- Paragon Physician Documentation for BH Inpatient units
- Migration to ICD-10
- Annual Gap Analysis required by Meaningful Use Attestation
- Meaningful Use Attestation for Stage 2, 3 and beyond
- DSRIP continuous implementation, reporting and expansion
- Mobile device implementation with Paragon
- ADS Practice Management for Partial and Evergreen Clinics
- Bring Your Own Device (BYOD) policy, implementation and adaptation
- Keane CPOE and e-Prescription
- Keane interface with HPF eHealth Record application
- Paragon Explorer - Clinical Analytics
- Migrate 350 user workstations with new hardware and Microsoft OS platforms
- Migrate to Paragon version 13 with total hardware replacement
- Migrate to Paragon version 14

Security & Emergency Management Department

Achievements

- At the request of Nursing, the Security Department began responding to Team 20s. Through that effort we have seen a 50% increase of this activity. Security responding at onset of a patient outburst has improved safe patient handling and staff safety as the presence of the uniformed guard has helped to deescalate situations.
- From 2012 -2014 overall altercations (patient to patient and patient to staff) were reduced from 4 per 1,000 patient days to less than 2 per 1,000 patient days.
- Card Access along with video surveillance continues to be enhanced year after year.
- We have enhanced the security of the Medical Center's points of entry. With the added feature of card access on the doors, we have established a more secure environment for the staff, residents and patients.
- Active Shooter protocols were implemented and training for staff was conducted facility wide.
- Frequent emergency drills are conducted to be prepared for any emergent event at the Medical Center.
- New and robust water purification system was added.
- Patient property has had improvements both in storage location, documentation and overall security features such as card access and video surveillance. With this system we have virtually eliminated any missing items that have been identified on patient valuables and claims against the Medical Center.

Telecommunications

Achievements

Two new call centers for the highest volume of activity in the Medical Center - The Access Center for Behavioral Health Services and the Patient Access Line for Outpatient Services - were successfully installed. Volumes for these areas are approximately 350 and 125 calls per day, respectively.

- 2014 installation of a Telecom Recovery System that serves as a seamless relay for continuation of telephone operations in the event of an external system/carrier failure.
- 2014 investment in new postal equipment to better serve the high volume of mail handled by the facility.
- Detailed facility maps created in both English and Spanish.
- Enhanced signage throughout the hospital created.

Accreditation

All of the hospital's service areas are in good standing with the regulatory licensing entities such as the Department of Health and Senior Services, and the Department of Human Services. The Joint Commission completed its unannounced and thorough re-accreditation survey of the entire Bergen Regional Medical Center facility in June 2014. The Commission is an independent organization that accredits and certifies more than 19,000 healthcare organizations and programs in the United States.

Bergen Regional was noted for its "outstanding" performance for a hospital and long term care facility of its size, diversity and complexity. Nationwide, only six percent of long term care facilities pursue accreditation with The Joint Commission.

The Joint Commission survey consisted of a seven-member team that spent one week at Bergen Regional. Surveyors met with staff and reviewed the inpatient units, operating rooms, emergency rooms, ambulatory care programs, behavioral health division, pharmacy, laboratory and long term care division. The full survey includes assessments of the hospital's process of care, documentation, physical plant, quality management, emergency preparedness and several other facets of the hospital.

Campus

Bergen Regional Medical Center is located on a 65-acre campus consisting of 10 buildings , 8 of which are managed by Bergen Regional. The majority of the physical plant systems is from the original infrastructure and these systems have exceeded their life expectancy. Bergen Regional continues to experience ongoing and ever increasing service disruptions such as water leaks, heating/cooling breakdowns and electrical disruptions due to the age of the equipment. Frequent repairs to the roof, wall finishes, paint, tiles, ceilings, elevators, boilers, chillers, HVAC equipment, emergency generator, casework and other items are all results of the aging infrastructure.

Bergen Regional has generated proposals and requests for upgrades to the BCIA beginning in 1998 and continuing through present day, including a six-year capital improvement plan totaling more than \$80 million. **Exclusive of those requests, BRMC, LP has invested \$30 million in a broad array of campus improvements.**

Yearly Operating Expenses for the Physical Plant

In accordance to its contract with the BCIA, Bergen Regional has been providing ongoing maintenance, repairs and even enhancements to the facilities.

Bergen Regional secures yearly maintenance contracts with various providers. Yearly expenses for the upkeep of the Bergen Regional physical plant ranges from \$1.5 - \$2.5 million for maintenance and staff salaries and \$1.9 - \$2.6 million for maintenance contracts, repairs and supplies for the past eight years. Enhancements and upgrades to the buildings range from \$348,000 to just under \$1.5 million.



Bergen Regional Driven Enhancements

A new team was created, called 'First Impressions', whose members round the facility reviewing areas that are in need of physical/environmental/aesthetic improvements. This is part of the Bergen Regional Service Excellence initiative to provide the best environment and experience for our patients, long term care residents and the visiting community. A dedicated and continued financial investment has been made to fund the initiative. Below is a summary of activity.

Acute Outpatient Areas

A bright new color scheme, blinds, flooring and coordinating furniture tie our Pharmacy and Comprehensive Outpatient Care Services medical clinic areas together for a clean, streamlined look. Water coolers were added to the area to better serve our patients.

MICA/APH

Our MICA/APH area has undergone a facelift with a fresh coat of paint and new furniture. Our reception desk was given a new laminate top and painted front to complete the look. Warm artwork and framed informational documentation was added to the area.



Emergency Department – Geri Rooms

Three rooms in our ED were identified as geriatric friendly rooms and were outfitted with new, higher hip chairs, artwork and soft yellow paint. New curtains on all exam rooms ties in the color scheme.

Waiting Area – Lab

Our large waiting area on the second floor needed attention. New paint, inclusive of an accent wall, artwork, window treatments and beautiful new furniture gives the area a professional yet welcoming feel for our clients.

Coffee Shop

Our main lobby coffee shop received a fresh coat of paint, some warming accent walls and coordinating tile work to give it a friendly and appealing look to our residents and guests who frequent the area.



Medical Detox (ATU)

Fresh paint and new signage were installed to update the unit. Doors were painted to coordinate the look.

Auditorium Corridor

To complement the renovation of the Auditorium, a new color scheme, paint and new signage were completed for the 6-1 hallway.

Main Lobby

The Medical Center's main lobby was redesigned with a warm and inviting color scheme, new furniture, artwork, planters with plants and literature rack.

The Foundation at Bergen Regional Medical Center

The Foundation at Bergen Regional works closely with Administration, and has been very supportive of projects for our patients and long term care residents. Funding from the Foundation has helped renovate the Auditorium and the Chapel. The Foundation is also sponsoring the Long Term Care 'Welcome Home' project to enhance 10 rooms on Unit 8-7 to give them a more homelike look.

The Foundation and the Hospital co-sponsor ongoing continuing education programs for healthcare professionals. In addition, community programs are also held, including an annual free summer concert.

To fund these projects and more, the Foundation holds several fundraising events that are planned, staffed and managed by hospital personnel. These include the Taste of Bergen and the Annual Golf Classic. Additional fundraising events are being planned for 2015 and 2016 to coincide with the Hospital's 100-year anniversary celebration. BRMC, LP has donated more than \$700,000 to support the Foundation.



Patient/Long Term Care Comforts

- Pastoral Care: Services, Supplies, Events
- Yoga Classes in Long Term Care (LTC)
- Hair Salon Services to Long Term Care Residents
- Wall Photos in Halls and Dayrooms (LTC)
- Electronics, Entertainment Systems and Computers (LTC)
- Long Term Care Residents "Days Away" Summer Camp

Departmental Areas

Behavioral Health:

- Holiday Gifts - Child/Adolescent Unit
- Holiday Gifts - Alzheimer's/Dementia Unit
- "Relaxation-DeStressing" - MediCalm Sensory Program
- Equipment

Addiction Recovery:

- "Evergreen" Outpatient Recovery 25-Year Program
- Celebration
- AA/NA Literature for 52-bed Detoxification Unit

Horticultural-Greenhouse:

- Renovation and Planting Supplies

Hospital-Wide Support

- Professional Continuing Education Symposiums
- Newspapers: Daily Delivery of 'The Record' for Patients, Long Term Care Residents, Families and Visitors
- Computer/Software for Graphics & Large Scale In-House Printing of Posters and Materials for Community, Foundation and Long Term Care Events

Community Events

- Outdoor Summer Concerts at the Bergen Regional Gazebo
- Support for Annual 9/11 Service
- Public Seminars - Educational Outreach
- Public CPR Personal Training Community Classes and Kits (over 400 participants)

Facility Improvements

- Lobby & Coffee Shop Renovation/Fixtures and Design
- Chapel Renovation
- Auditorium Renovation

THE FOUNDATION AT



MEDICAL CENTER

Volunteers

With more than 280 active volunteers and growing, the mission of the Volunteer Services Department at Bergen Regional is to provide support services to the patients, long term care residents, visitors and staff throughout Bergen Regional Medical Center.

Bergen Regional offers a unique variety of Volunteer opportunities spanning the wealth of services provided to our patients and residents throughout the Long Term Care, Acute/Ambulatory Services and Behavioral Health divisions.

Volunteer Assignments

A few of the volunteer assignments available to individuals as well as groups at Bergen Regional Medical Center:

Recreational Therapy

Horticulture

Pastoral Care

Pet Therapy

Friendly Visitor Program

Concierge

Microsoft Office Computer Projects

Clerical Projects

Special Events

280+

Volunteers

more than 13,000

Hours Donated

over 23

Departments Served



Bergen Regional Community Outreach

Bergen Regional has invested considerable time and effort to create free community programs, workshops, health fairs and events as well as professional education seminars and networking programs to encourage the community we serve to feel comfortable coming to our campus. To change perception of the facility and have the Medical Center be viewed as the valuable resource it is, we have worked to open our doors to the community which, of course, included referring healthcare providers.

Achievements

- Free community workshops on various mental health, addiction and long term care topics
- Community and employee health fairs
- Multiple monthly professional continuing education programs offered at no cost for nurses, social workers, counselors and other professionals
- Mental Health Networking events to encourage collaboration and support of the limited mental health resources that exist
- Monthly health tips provided to various media outlets to help educate and inform the community
- Frequent appearances on News 12 TV's 'To Your Health' segment and WMBC, by Bergen Regional physicians, to provide expert interviews on varied behavioral health topics
- Speakers bureau offering free professional speakers on varied healthcare topics to schools, senior centers and all groups who request
- Expansion and redesign of the Bergen Regional website to provide transit information, health tips and interactivity to register for free programs and seminars as well as pertinent services and health information
- Annual 9/11 Remembrance Ceremony
- Membership and/or support for community organizations and partners such as Paramus Stigma Free, Bergen County CHIP/Mental Health/Substance Abuse Task Force, NJAMHA, NAMI Bergen County, Bergen Collaborative, Northern NJ Maternal/Child Health Consortium, NJ Sharing Network, Community Blood Services, Alzheimer's Association, Shelter Our Sisters, Bergen LEADS, BVMI, Native Plant Association, Vantage, West Bergen Mental Healthcare, CarePlus
- Provide meeting space for outside community groups

In addition, monthly press releases focusing on community programs or clinical achievements/improvements/services are generated. While it is true that good news is never as exciting or receives the media exposure as more sensational events, the increase in the positive exposure of the facility is still undeniable.



Employee Appreciation Activities

Keeping talented and dedicated employees engaged and on staff at Bergen Regional during these next few years will be more challenging than ever. Bergen Regional offers several employee events to show staff appreciation.

- The Employee of the Quarter Program continues rewarding a staff-nominated employee who has excelled in service excellence with a cash award, a gift basket, a certificate of appreciation and personal letter from Bergen Regional President Susan Mendelowitz, and a designated parking spot for the quarter of their award.
- The Annual Merit and Service Award Dinner is held at Seasons in Washington Township each October and honors employee longevity and outstanding service excellence. All invited honorees attend for free and receive an award pin and, depending upon longevity, gifts. President's Merit Award winners for service excellence receive recognition and appreciation gifts. The event attendance fills the room to capacity every year.
- Doctors Day is celebrated every March 30th with a breakfast reception for Bergen Regional physicians, and an appreciation gift and certificate.
- Each May, in celebration of Hospital Week, Nursing Home Week and Nurses Week, Bergen Regional sponsors the Employee BBQ. The event begins with breakfast for the night shift and continues with a picnic, BBQ-style lunch and dinner for the day and evening shifts outside by our gazebo. Thousands of employees are fed in a festive atmosphere of appreciation and camaraderie with food being served by management staff.
- Nurse's Week and CNA, MHA and MA Week acknowledgement and celebration activities are also held.
- Employee health fairs are held for staff multiple times per year featuring health education, nutritional guidance, massages, yoga, stress reduction, fitness tips, gym discounts and a healthy giveaway such as a pedometer.
- Employee Lunch and Learn sessions are held monthly on different health related topics to help with weight and stress management and other pertinent topics affecting our staff.
- Inclement weather appreciation events are scheduled to thank staff for their presence and dedication to our patients and long term care residents after a significant weather related episode.
- Thanksgiving Pie distribution happens annually on the three days prior to Thanksgiving. All employees are given their choice of a pumpkin or apple pie with a card expressing gratitude from Administration.
- Holiday Party occurs each December at Seasons in Washington Township and is mostly subsidized by Administration.



Increased internal communications is an important employee relations priority for Bergen Regional. Our monthly newsletter, Bergen Beat, has become an essential means of internal communication. The President's message carries the focus of what needs to be addressed and discussed with staff and there is also a customer service article in every addition. Color pictures of staff and activities make the publication fun for staff to review. We have also added multiple screens throughout the facility containing an informational slideshow that showcases all of our services and events for both staff and the visiting public.

Marketing

Bergen Regional is a charity care and safety net facility. Prior to the Affordable Care Act, Bergen Regional services used by insured patients other than Charity Care, Medicaid and Medicare were primarily limited to long term care and the Emergency Department. Ads to promote these services, since a more universal audience was applicable, have been running for years. Additional advertising emphasis was placed on Comprehensive Outpatient Care Services medical clinic and addiction services because of the evident community need and niche Bergen Regional has in this area that supersedes insurance limitations. In 2014, other Bergen Regional services, such as radiology and the Comprehensive Outpatient Care Services medical clinic, were included in advertising. All services have always been represented by the external marketing liaisons traveling throughout the County promoting and networking Bergen Regional.

Bergen Regional ads are featured on Cablevision, North Jersey Media, aol.com, patch.com, mybergen.com, as well as Verizon online. Print directories were written, designed and placed by Bergen Regional in-house staff to promote the services offered by Bergen Regional.

Achievements

- Affordable Care Act print and cable ad created and placed
- Comprehensive Outpatient Care Services medical clinic direct mail, ad and brochure created and distributed
- Mental Health Emergency Department print and cable ad created and placed
- Mammography, MRI and Radiology Services ad created and placed
- General Bergen Regional hospital brochure updated and distributed
- Long Term Care ads updated and placed
- Behavioral Health and Addiction ad updated and placed
- Emergency Department ad updated and placed
- 2015 Community Report
- Long Term Care video brochure
- Behavioral Health networking and community events
- Stigma free networking and community events
- Long Term Care networking events
- Social media utilization
- Redesigned Long Term Care newsletter

Looking Ahead

- Increased digital advertising presence and new ads
- Enhanced social media presence
- Redesigned website including mobile friendly version
- Pod casts

The screenshot shows the Bergen Regional Medical Center website. At the top, the logo for Bergen Regional Medical Center is displayed alongside the slogan "Three Divisions of Care: One Commitment to Excellence". Below this, a navigation bar lists various services and departments. The main content area features a prominent advertisement for an "Expanded Medical Detox Program" with a photograph of three people. To the right, a vertical sidebar contains several interactive buttons and links, including "Patient Page", "Online Bill Pay", and "Affordable Care Act". At the bottom of the page, there is a banner for "Ebola Virus Awareness and Information from the CDC".

In Summary

Bergen Regional Medical Center has long been the safety net hospital for Bergen County. In addition to providing ambulatory services and emergency care, the facility is best known for its expertise in behavioral healthcare, including mental health and drug addiction treatment. Bergen Regional is also unique within Bergen County for having long term care as part of its facility, enabling residents who need acute medical treatment to be a simple elevator ride, as opposed to an ambulance ride, away from that essential care.

Since taking over management in 1998, BRMC, LP has moved the hospital far from the old “Bergen Pines” perception and transformed the facility into one that is constantly advancing the quality of care given to patients and long term care residents.

Gone are the pre-privatization days of poor survey results, low quality indicators and costly burdens imposed upon Bergen County tax payers. This report, and previous reports, clearly demonstrate the positive changes and significant financial investment made by BRMC, LP since 1998. As we near the end of the contract, it is time to accurately reflect upon the impact of these changes under BRMC, LP’s stewardship and make a plan for continued success for the future.

This plan, the key points of which are mentioned below, includes addressing the realities of healthcare reform; a dedicated focus on patient care generating positive quality outcomes; the ever present challenges of a changing IT environment, an aging infrastructure and managing a diverse work force.

Reform Realities

- Embracing new delivery methodologies and best practices
- Pay-for-performance system means hospitals and health systems will be held more accountable than ever. Sustained compliance with vital regulatory programs such as DSRIP as reporting mandates expand beyond the scope of the project
- Impact of the Affordable Care Act (ACA) and State Medicaid waiver on the ability to maintain critical funding sources, such as Charity Care and other subsidies, for “safety net” hospitals

Focused Care Realities

- Patient centered, integrated care models
- Appropriate care delivery venues, hospital, skilled nursing care and community
- Minimizing readmissions, shifting the focus to wellness

IT, Facility and Human Resources Realities

- Offering patient technology that supports and improves the delivery of care
- Master facility planning for an aging physical plant and infrastructure
- Continued ability to recruit and retain talented, committed staff, including physicians during a time of uncertainty and transition

Bergen Regional Medical Center has existed and thrived through changing and challenging times and is well situated to successfully navigate the unknown of healthcare reform and shrinking subsidies and reimbursements. This adaptability, firmly demonstrated in our progress report, will ensure the continued viability of Bergen Regional. We will continue to focus on patient safety and design our programming to reflect our quest for increased excellence in our delivery of quality patient care and service excellence. We will maintain managerial experience and insight of the very complicated and unique structure of this facility to lead it through the unknown looming on the horizon. Our programs and efforts, as well as our successful surveys and essential and niche services will undoubtedly continue to show that Bergen Regional is a valued community asset to Bergen County and the State of New Jersey.

Bergen Regional management remains committed to the optimal operation of the hospital and remains keenly aware of the ongoing challenges presented by changing healthcare landscape realities.

Financial Report

Bergen Regional Medical Center, L.P. Payments to and on behalf of Bergen County and the BCIA

<u>Year</u>	<u>Rent</u>	<u>Admin Fee</u>	<u>Cty Adjuster Fee</u>	<u>Annual Total</u>
1998	\$5,200,000	\$79,999		\$5,279,999
1999	5,237,092	100,000		5,337,092
2000	5,292,557	100,000		5,392,557
2001	5,376,873	299,990		5,676,863
2002	5,438,645	302,583		5,741,228
2003	5,522,392	309,673	\$1,440,000 (1)	7,272,065
2004	5,595,968	314,473	240,000	6,150,441
2005	7,126,198	319,588	240,000	7,685,786
2006	5,957,388	316,678	240,000	6,514,066
2007	6,206,330	325,639	240,000	6,771,969
2008	6,432,868	336,462	240,000	7,009,330
2009	5,028,619	337,037	240,000	5,605,656
2010	6,690,528	335,037	240,000	7,265,565
2011	7,390,359	363,324	240,000	7,993,683
2012	7,465,630	354,028	240,000	8,059,658
2013	7,764,255	357,113	240,000	8,361,368
2014	8,074,826	360,117	240,000	8,674,943
2015	8,397,818	360,694	240,000	8,998,513
2016 (as of May)	3,597,902	150,387	100,000	3,848,289
Payments to Date	\$117,796,249	\$5,422,823	\$4,420,000	\$127,639,071
2016 (June - December)	5,135,829	211,976	140,000	5,487,805
2017 (Jan.1- March 14)	1,834,225	73,795	50,000	1,958,020
Future Payments	\$6,970,054	\$285,771	\$190,000	\$7,445,825
Total	\$124,766,302	\$5,708,594	\$4,610,000	\$135,084,896

(1) Based on LOA amount due December 2003 for the previous years

Financial Report

Bergen Regional Medical Center, L.P. Campus Investments By Year

Year	Total Cost	Cumulative Cost
1998	\$493,898	\$493,898
1999	3,398,972	3,892,870
2000	891,730	4,784,600
2001	1,797,594	6,582,194
2002	1,611,333	8,193,527
2003	76,006	8,269,533
2004	832,733	9,102,266
2005	1,666,908	10,769,174
2006	1,288,047	12,057,221
2007	2,300,151	14,357,372
2008	3,552,150	17,909,522
2009	2,238,935	20,148,457
2010	2,160,309	22,308,766
2011	1,757,581	24,066,347
2012	2,685,738	26,752,085
2013	1,823,725	28,575,810
2014	2,349,539	30,925,349
2015	1,450,517	32,375,866
as of May, 2016	453,714	32,829,580
Total to Date	\$32,829,580	





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Progress and Prospective Report 2015

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