

Group Health Foundation Your Gift of Health report

● PRESIDENT'S PERSPECTIVE

I believe we can make the world a better place. I truly do. It propels me out of bed every morning and it keeps me up at night. How can we—as individuals and as a community—be forces for good? Not some-day but today.



Luckily, making the world a better place is in my job description. Every day, I get to see the many faces of

progress, the many facets of innovation, and the profound impact our 5,658 donors have on our community.

Snapping on a bike helmet, buckling a seatbelt, making a phone call. Daily tasks or life-changing gestures? From where I sit, these are shining examples of how innovation can be at once practical and profound. They epitomize what happens when donors, physicians, nurses, social workers, and researchers channel their energy and enthusiasm toward making the world a better place.

You. Me. Us. Together. We are a force for good creating a greater good. A common good. A better world.

Thanks for all you do,

Laura Rehrmann
President, Group Health Foundation



A proud Heidi Bruch laughs as Baby Caroline, now happy and healthy, takes in her world.

Whipping whooping cough

When you live in the Northwest, a cough isn't something you generally worry too much about. You stock up on throat lozenges and hope it goes away soon.

Heidi Bruch was no different. When she started coughing last summer, she was days away from giving birth to Caroline, her second child. She wanted to spend time with her toddler, not go to the doctor.

Fast forward four weeks: Caroline starts to cough. The coughing quickly worsens. She turns blue during one episode, meaning no oxygen is reaching her brain. This realization turns into an emergency trip to the ER, 6 days in infant ICU, and 17 days in Seattle Children's.

The reason? Pertussis, aka whooping cough.

"I thought I was up to date on all my shots. I couldn't figure out how this had happened," Heidi remembers. "Then I learned I needed a booster shot to stay current. I learned I had given my own baby a potentially deadly disease."

"I had given my own baby a potentially deadly disease."

—Heidi Bruch

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Innovation

What does innovation mean, anyway?! To us, innovation means successfully transforming an idea into something that affects individuals in ways that are both practical and profound. Following are two examples of innovation, Group Health style.

Caring coverage

Being pregnant is complicated. Joyful but complicated. The tests, the doctor's visits, the aches and pains. For families with little or no health coverage, these

basics can be huge hurdles. That's why many forego regular care during pregnancy and end up in urgent care when a crisis hits.

"I can be the mother I want to be."

—Melinda, new mom

The doctors and nurses at Group Health's Riverfront Medical Center in Spokane, Washington knew this. They knew it was costly for the Cooperative and risky for the mother and baby.

It begged the question: Is there a way to improve the quality of care for these families and bring down the cost of care for Group Health?



A tiny participant of the Healthy Options, Healthy Families program with his mom and his favorite Group Health nurse.

Their idea: Assign a team nurse to provide care for patients in the clinic and in the community. Group Health's Riverfront Medical Center, the Foundation, the Research Institute, and the community came together to see what was possible.

"I've never had care this good."

—Amy, mother of 3

Through the Healthy Options, Healthy Families program, we learned it was possible for a nurse to offer information and hope with one quick call. We saw a young mom come for her baby's check-up and come to realize she could go back to school. We discovered a practical way to deliver profound results for new families. That's innovation.

Through the Healthy Options, Healthy Families program, we learned it was possible for a nurse to offer information and hope with one quick call. We saw a young

Many pills. One pouch.

Gary Norton and his wife, Judy, know a lot about pills. Gary has had heart issues, and also has diabetes and a rare virus that eats away at the large muscle groups on his legs and arms.

Gary knows he'll stay healthier and live longer if he keeps up on his meds. But that's easier said than done when you have to take pills morning, noon, and night.

Lee Allen, a Group Health pharmacist, sees patients like Gary every day. He knew there must be a way to simplify medication management.

Allen and his team came up with a very exciting idea with a deceptively boring name: Medication Safety Packaging. They created a compliance packager



Gary Norton shows off his little pill packets and says goodbye to his armful of pill bottles!

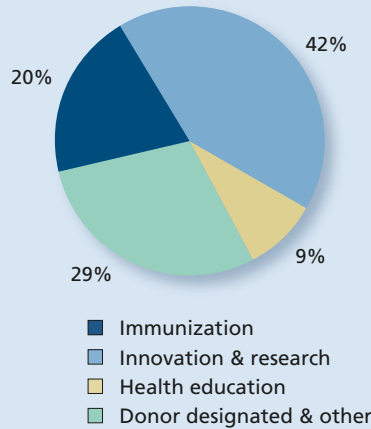
“It’s an honor to be a Group Health physician, and I feel an obligation to share well-being with others. By giving to the Foundation, I am supporting a model of care that can create better health for everyone.”

—Alan Wood, MD

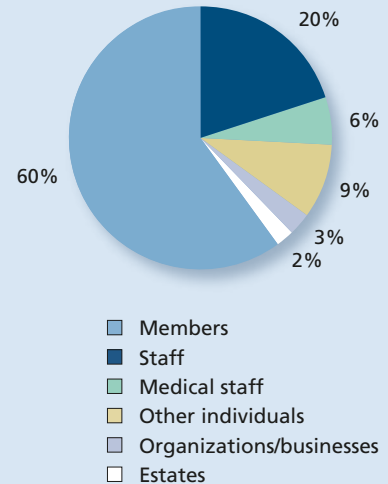
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What we can do thanks to you!

Where does the money go?



Who are our donors?



Everything a patient needs to easily manage meds—date, time, and contents.

that puts sets of bar-code verified pills into individual pouches. Each pouch shows the date, time, and contents. The patient receives one month’s worth of pills in one tidy roll.

For patients like Gary, who have complex medication regimens, these pouches are pure gold. “It’s so simple, he’s taken it over for himself.” Judy says. “Even a man can do it!” she jokes.

All joking aside, medication management is a serious issue. And although little pill pouches may not scream ‘innovation’ to some, to us Medication Safety Packaging is innovation in action. (Gary and Judy agree!)

Whooping cough

Continued from page 1

Heidi, like thousands of other Washington state residents, didn’t know she was putting herself, her family, and her community at risk. Missed booster shots mean chemotherapy patients, the elderly, and newborns like Caroline—who can’t get immunized until they are 8 weeks old—find themselves in a precarious situation. They can’t protect themselves. They count on others to keep them protected.

“We don’t see these diseases anymore because the immunizations have been so successful,” explains Group Health’s Dr. John Dunn. “But they still exist. And the unacceptably low rates of immunization in Washington, and other parts of the country, are alarming.”

“I don’t want other mothers to go through this,” says Heidi. “I want everyone to know how important booster shots are!”

Heidi’s big lesson: One little shot can make a big difference.



Heidi Bruch and Caroline—all smiles.

Getting boosted

With all the acronyms and medical-ese, an immunization schedule can be confusing. Here’s the deal:

- Infants and children get DTaP. It takes a series of 5 shots to be fully immunized. The first shot is given at 8 weeks.
- Pre-teens and adolescents should get a booster, called Tdap, at age 11 or 12.
- Adults who missed the booster should get one dose of Tdap as soon as possible.

For more information, visit www.cdc.gov/features/pertussis/.

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—Greg Bolin, Technical Specialist

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