Table of Contents

Introduction.............................................................................................................................. 03
Emergency Department.............................................................................................................. 05
Trauma Services........................................................................................................................ 06
Emergency Preparedness Program............................................................................................ 07
Infection Prevention and Control............................................................................................... 08
Women’s Services....................................................................................................................... 09
Intensive Care Unit.................................................................................................................... 14
Palliative Care Program............................................................................................................. 15
Cardiovascular Care .................................................................................................................. 15
Cardiac and Pulmonary Rehabilitation Program....................................................................... 17
Center for Orthopedics............................................................................................................... 18
Oncology Services...................................................................................................................... 19
Office of Research....................................................................................................................... 22
Medical Oncology and Renal .................................................................................................... 23
Stroke Program........................................................................................................................... 23
Diabetes and Nutrition Education Center ................................................................................ 25
Progressive Care Unit............................................................................................................... 26
Learning Resources.................................................................................................................... 27
Graduate Medical Education (GME) Program ......................................................................... 29
Continuing Medical Education / Medical Library .................................................................... 30
Medical Library........................................................................................................................ 32
Physician Liaisons ..................................................................................................................... 34
Physician Services.................................................................................................................... 34
Coordinated Care Department ................................................................................................ 35
Patient Representatives............................................................................................................. 37
Chaplaincy................................................................................................................................ 38
Gwinnett SportsRehab .............................................................................................................. 39
Center for Weight Management............................................................................................... 40
Nutrition Services ..................................................................................................................... 41
Faith Community Nursing......................................................................................................... 42
Faith Community Network....................................................................................................... 43
Sports Medicine Program.......................................................................................................... 45
Public Relations and Community Affairs.................................................................................... 46
Unmet Community Needs.......................................................................................................... 48
Implementation Strategies......................................................................................................... 49
FY 2017 Implementations Strategy  
Gwinnett Medical Center-Lawrenceville

Gwinnett Medical Center-Lawrenceville (GMC-Lawrenceville) strives to improve the health of our community by providing healthcare services and collaborating with community services organizations. Based on the results of the 2019 community health needs assessment, our greatest opportunities to meet health needs continue to lie in the following areas:

- Managing health conditions and chronic disease treatments
- Improving access to care
- Preventing chronic disease and increasing wellness

Our services are provided to vulnerable or underserved persons as well as those who have insurance. If these services were not provided the community would have reduced access to care. The following report describes how our health services support our community.

Community benefits programs or activities promote health and healing or provide treatment as a response to identified community needs or local public health priorities and meet at least one of these objectives: 1) enhances health of community, 2) improves access, 3) reduces burdens of government or 4) advances healthcare knowledge. Our Implementation Strategies go beyond specific community benefit programs to include additional treatment programs GMC provides to address identified community needs.

Approval Process

GMC’s purpose in developing and implementing the community benefit plan is to provide an executable document that demonstrates how our organization (including both hospitals and other facilities) plans, manages and measures the identified community health needs.

Community needs are analyzed year-over-year with trend comparisons of state and national data as well as Healthy People 2020 objectives included in the analysis. These identified needs are aligned with the organization’s strategic, operational, safety, quality and clinical service plans with community action plans created as needed. This year’s report provides a review of statistical data for fiscal year 2017 (July 1, 2016 through June 30, 2017) and the current events and programs with action plans for fiscal year 2019 (July 1, 2018 through June 30, 2019).

The community benefit plan and implementation strategies are developed by the Community Health and Wellness Council (CHW Council). The CHW Council’s goal is to continue to increase the cooperative alignment between inpatient programs and programs that have elements of community outreach. The CHW Council includes representatives from more than 30 departments from both hospitals who are patient care providers and managers. The departments include Diabetes & Nutrition Education Center, Cardiac and Pulmonary Rehabilitation, Center for Weight Management, Emergency Departments, Chest Pain Center, Trauma Services, Cardiovascular Services, Stroke Program, Center for Orthopedics, Renal Services, Women’s Services, Oncology Services, Quality Services, Respiratory Care, Coordinated Care, Patient Representatives, Office
of Research, SportsRehab Services, Sports Medicine Support, Concussion Institute, Learning Resources, Graduate Medical Education, Faith Community Nursing, Faith Community Network, Chaplaincy, Palliative Care, Health Education and Wellness Services, Glancy Rehabilitation Center, Physician Services, Medical Library and CME Physician Training, Community Benefit Planning, Gwinnett Medical Center Foundation and with support from the Public Relations and Community Affairs department.

After the CHW Council approves the updated plan it is presented to administrative leadership for approval.

The Board of Directors is charged with responsibilities regarding community health promotion including:

- Participating in the process of establishing priorities, plans and programs to enhance the health status of the community.
- Approving the implementation strategies and the annual community benefit report.
- Monitoring program impact through identified community health indicators.

After administrative leadership made recommendations, the plan was presented to the Board Community Benefit Subcommittee for approval on May 28, 2019 and then to the Board of Directors for approval on June 24, 2019. Having the support of this board integrates the community benefit plan with the strategic, operational, quality and clinical plans of the System.

**Gwinnett Medical Center-Lawrenceville**

In September 2009, GMC-Lawrenceville opened the eight-floor North Tower. GMC-Lawrenceville now has 304 acute-care licensed beds (excluding the Women's Pavilion). This was an increase of 129 beds for the facility. GMC-Lawrenceville offers care services in the following: cardiac, neuroscience and spine, orthopedics, surgical, endoscopy and cancer care. The 40,000 square-foot Strickland Heart Center opened January 2012. This $33 million investment ensures that the people of Gwinnett have access to a complete range of cardiac services. Gwinnett Women's Pavilion located adjacent to GMC-Lawrenceville, has 37 Mother/Baby Unit beds and 12 High-Risk Pregnancy Unit beds. The Gwinnett Women's Pavilion has delivered more than 100,000 babies and offers extensive classes and pregnancy education as well as a Level III neonatal intensive care unit (NICU). The Level II Trauma Center is one of 24 designated trauma programs of the state's 152 acute-care hospitals.

Other services offered at GMC-Lawrenceville include: Cardiac and Pulmonary Rehabilitation, Center for Sleep Disorders, Outpatient Treatment Center, DaySurgery, Children's Emergency Center, Diabetes & Nutrition Education Center, Wound Treatment Center, Gwinnett SportsRehab, Gwinnett Sports Medicine, Pain Management Center, Brain & Spine Institute, Faith Community Nursing, Gwinnett Breast Center, 575 Outpatient Imaging Center, and 631 Imaging Center (PET/CT and MRI). GMC has partnered with ChoiceOne Urgent Care opening two urgent care centers in Hamilton Mill and Sugar Hill.
The Gwinnett Extended Care Center (GECC) is located at GMC-Lawrenceville. This facility is licensed separately from GMC-Lawrenceville with 89 nursing home beds. GECC provides various levels of quality, cost-effective care for those individuals who need sub-acute or intermediate care. The primary goal of this facility is to help our patients achieve their highest level of functioning.

### Figure 1. GMC-Lawrenceville Service Volumes Fiscal Years 2015-2018

<table>
<thead>
<tr>
<th>Service Description</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admissions (GMC-L, GWP, excluding GECC &amp; newborns)</td>
<td>23,334</td>
<td>24,414</td>
<td>23,649</td>
<td>22,781</td>
</tr>
<tr>
<td>Emergency Departments visits</td>
<td>109,031</td>
<td>110,542</td>
<td>107,661</td>
<td>104,742</td>
</tr>
<tr>
<td>Care-a-Van screening mammograms</td>
<td>1,592</td>
<td>1,652</td>
<td>427</td>
<td>N/A</td>
</tr>
<tr>
<td>Surgical Cases (inpatient and outpatient)</td>
<td>17,711</td>
<td>18,396</td>
<td>18,425</td>
<td>17,208</td>
</tr>
<tr>
<td>High Risk Perinatal</td>
<td>157</td>
<td>158</td>
<td>116</td>
<td>113</td>
</tr>
<tr>
<td>Women's Pavilion deliveries</td>
<td>5,083</td>
<td>5,532</td>
<td>4,790</td>
<td>4,502</td>
</tr>
<tr>
<td>Neonatal Intensive Care Unit (NICU) admissions</td>
<td>523</td>
<td>603</td>
<td>521</td>
<td>511</td>
</tr>
<tr>
<td>Dialysis treatments</td>
<td>4,099</td>
<td>4,184</td>
<td>5,653</td>
<td>6,692</td>
</tr>
<tr>
<td>Wound Treatment Center visits</td>
<td>4,646</td>
<td>4,823</td>
<td>4,434</td>
<td>4,993</td>
</tr>
<tr>
<td>Faith Community Nursing contacts</td>
<td>32,216</td>
<td>32,518</td>
<td>35,814</td>
<td>39,756</td>
</tr>
<tr>
<td>Faith Community Network contacts</td>
<td>N/A</td>
<td>8,791</td>
<td>20,489</td>
<td>18,998</td>
</tr>
</tbody>
</table>

Source: GMC Operating Statistics and department reports FY 2015-2018  N/A = Not Available

### Emergency Department

The GMC-Lawrenceville Emergency Department (ED) is a Level II Trauma Center, stroke certified and accredited chest pain center that treats approximately 108,000 patients annually. This 65 bed department has implemented several best practices to ensure patients are treated timely. A nurse greets and completes an initial assessment on all patients. Based on the assessment and the assigned Emergency Severity Index (ESI), the patient is evaluated in one of five treatment areas for further care. Patients are consistently directly taken to an open treatment room in any of the five treatment areas.

- **POD 2**: This is a 10-bed unit dedicated for low acuity patients. It is staffed 24 hour a day with at minimum one nurse, an emergency care tech, and an Advanced Practice Provider. All lower acuity patients, including pediatric patients, are seen and treated in this area. An average of 2000 patients are treated and discharged from these 10 rooms. Average length of stay is 2 hours.

- **POD 1**: This is a 6-bed unit utilized when there are no longer treatment rooms available in the main department. Patients are fully triaged, will have an appropriate advanced nursing protocol initiated, and may be evaluated by an Advanced Practice Provider. The patient may then be moved back to the waiting room or sub waiting recliner to wait for further treatment, discharge, or placement in a room in the main department. Approximately 800 patients a month are discharged from this area. Length of stay in this area can range from minutes to hours.
Main Department: This unit provides overall care for a variety of patient types. The average length of stay for patients discharged from this area is four hours whereas the average length of stay for admitted patients is seven hours.

Trauma Services: This is a four-bed unit dedicated to the community’s trauma patients. On average, this unit services 100 traumas per month.

Children’s Emergency Center (CEC): This 9 bed pediatric center provides 24/7 pediatric services to the community. The CEC is staffed with pediatric trained nurses and physicians. The average length of stay in this unit is less than two hours.

The Behavioral Health Holding Unit (BHHU) is a recent addition to the emergency department. The BHHU is a 12 room unit for medical cleared emergency department at-risk behavioral health patients. Eight of the rooms have recliners, while 2 additional rooms have stretchers. Two rooms are seclusion rooms. There are two bathrooms with showers in the unit. All areas of the unit including patient rooms are under 360 degree video monitoring that is constantly being observed by a staff person. The physical build of the unit incorporates several best practices for patient safety such as piano hinges on door and anti-ligature hardware. The unit is staffed by emergency department and psychiatric nurses, behavioral health advocates, and sitters. Average length of staff in the unit is 33 hours.

The ED employs 300 staff including nurses, paramedics, emergency care techs, unit secretaries, monitor techs, and mental health advocates and works in cooperation with a board certified emergency physician group that also employs nurse practitioners and physician assistants. Staff training and development is a key initiative for the department. The 18-week Emergency Nursing Residency Program offers newly-graduated nurses a unique opportunity to be trained in all areas of the department and remain as newly-hired registered nurses. The department also offers a six-week Trauma Nurse Specialty course provided by the department’s clinical leaders and organization’s Trauma Program Manager.

The department’s primary goals for next year are to decrease door-to-provider time and increase the overall satisfaction of the patient to an outstanding score. Also included in the goals for next year are decreased wait times, improved quality measures, associate satisfaction and financial stability.

Trauma Services

As part of our Trauma Services program, GMC reports trauma patients to a state registry. The registry criteria include patients who were admitted to the hospital for at least 23 hours with certain ICD-10--CM diagnosis codes. Therefore, the registry is not inclusive of all patients who are treated by Trauma Services. In fiscal year 2018, the Trauma Services department reported 1,772 trauma patients in the registry.

Part of maintaining a Level II Trauma Center designation includes providing trauma-related education to physicians, nurses, pre-hospital providers and other ancillary personnel. GMC meets this requirement by providing the Trauma Nurses Core Course with four to five classes a year. GMC also provides Advanced Trauma Life Support class for physicians at least once a year as well as educational instruction for our prehospital partners.
Members of the Trauma Services department also participate in local and state activities that increase trauma awareness and support the need for a statewide trauma system. The Trauma Services department has 15 employees: Trauma Program Director, 3 registrars, Performance Improvement Coordinator, Practice Manager, medical assistant, 2 physician extenders and five trauma surgeons.

Goals for fiscal year 2019:

- Maintain Level II Trauma Center designation in accordance with the Georgia State Office of Emergency Medical Services and Trauma.
- Continued participation and support of the Georgia Trauma Care Network Commission for a statewide trauma system for Georgia.
- Continue to provide trauma education to physicians, nurses, pre-hospital providers and other ancillary personnel.
- Continued participation in local and state trauma awareness activities.
- Continue work with DirectCall as a transfer center to aid in receiving trauma patients from other hospitals.
- Complete business plan for Trauma Services and Program
- Add additional advanced practice providers.
- Prepare for American College of Surgeons verification visit.
- Addition of Emergency Management and Injury Prevention Coordinator
- Provide Bleeding Control education to community partners

Emergency Preparedness Program

Gwinnett Medical Center participates in Emergency Management/Preparedness in many ways. Joint Commission requires our facilities to conduct at least two exercises/drills per year. One must be a full-scale exercise (FSE) that involves an actual influx of patients and community involvement/participation with us and our other local emergency management partners. This could include Gwinnett County Emergency Management Agency, Department of Public Health, Fire, Police, Emergency Medical System and other metropolitan area hospitals including the Regional Coordinating Hospital (Grady), Georgia Hospital Association and many others. This Full Scale Exercise (FSE) must include an escalating situation that involves multiple injects and scenarios which involves full escalation of our response to hospital system Code Alert, Level II and III response.
The Hospital Incident Command Centers (HICC) is located at GMC-Lawrenceville, Gwinnett Medical Center-Duluth, Glancy Rehabilitation Center and the Gwinnett Extended Care Center. These centers are activated as needed and are assigned an Incident Commander and Command Staff including medical director, safety officer, liaison officer, public information officer, planning officer, operations officer and finance officer; each with responsibilities within the Incident Command structure for handling a disaster or mass casualty incident. This command structure is expandable within the National Incident Management System (NIMS) framework and can be as large or small as needed. That is determined by the nature of the disaster and the Incident Commander which is usually the administrator on-call, or the Patient Services Coordinator (PSC). Incident Command could also be relinquished to the most senior leader upon their arrival to the incident.

GMC has an emergency management section within the organization overseen by the VP of Operations that handles training, ordering and storage of surge capacity equipment and supplies, and conducting/critiquing “real world” events and/or exercises. GMC leadership participates in FEMA training for Healthcare leadership for Mass Casualty Incidents and implemented a system wide educational course in Emergency Management for Managers and Supervisors. GMC has also implemented “bucket drills”, a scenario based drill where associates participate in discussion about current Hazard Vulnerability Analysis priorities.

The Emergency Management Plan is delineated in our Emergency Operations Plan (EOP) which can be found on the GMC internal Intranet site. This plan is driven by our Hazard Vulnerability Analysis which details the different types of disasters that can occur, with the likelihood and impact of each possible type of disaster occurring within our geographical area. The organization falls under the All Hazard approach.

An Emergency Management Committee (EMC) meets monthly to discuss, plan and provide for the enhancement and improvement of our Emergency Operations Plan, exercise development and implementation. The EMC provides recommendations to the Environment of Care Committee and Leadership with respect to Emergency Planning and Operations.

The organization has two functional seats (Liaisons) at our local GEMA office located at 800 Hi Hope Rd, Lawrenceville, GA. The Liaisons operate out of the GEMA office during a declared disaster interfacing with various local and state officials facilitating communications from the county EOC (Emergency Operating Center) to the hospital incident command.

The hospital also has a seat (Liaison) on the Public Health and Region D Coalition located at Grady Health System.

**Infection Prevention and Control**

The goal of the Infection Prevention and Control department is to minimize the morbidity, mortality, and economic burden associated with healthcare associated infection (HAI) through prevention and control endeavors in patients, healthcare workers and visitors. Using epidemiological principles, pertinent data is collected and analyzed in order to determine risk factors associated with infection and to define mechanisms of transmission and prevention. The most current Centers for Disease Control/National Health and Safety Network (CDC/NHSN) surveillance definitions and a comparative database are utilized to evaluate our
prevention efforts. The Infection Preventionist uses this information to identify opportunities for improvement. Then they partner with other members of the healthcare team to plan, implement, and evaluate control strategies as part of a continuous performance improvement model. As a resource within GMC and the community, the Infection Preventionist educates other professionals as well as the public about infection risks and measures to minimize and/or eliminate risks and to enhance patient safety and quality.

Community Collaborations:

- Public Health Reporting and Case Management of communicable diseases works to identify inpatients and outpatients with communicable diseases and to assess adequacy of treatment and provide referrals to the public health department for further treatment as required. The predominant diseases requiring referral include: sexually transmitted diseases, HIV, rabies, hepatitis and tuberculosis.

- The emerging pathogens program is a voluntary State program which seeks to compile information about emerging pathogens through the collection and testing of clinical samples. The results provide current information about emerging pathogens in our local community and additional support for requested funds for education, prevention and treatment of the community.

- State Bioterrorism Task Force develops tools for use by the regional Emergency Preparedness Coalition. The State bioterrorism task force consists of three main groups: Laboratory, Epidemiology and Quality. The coalition has representation from public health, hospitals, first responders and the community.

Women’s Services

Women’s Services are provided in the Gwinnett Women’s Pavilion, located at GMC-Lawrenceville. This facility is a leading provider of obstetrical services in the county, with 4,792 deliveries in fiscal year 2018. Services provided at this facility include the High-Risk Pregnancy Unit, Labor and Delivery suites and the Level III Neonatal Intensive Care Unit (NICU). The NICU had 718 admissions in fiscal year 2018. Community education programs provided by Women’s Services include childbirth education, lactation support, infant and child safety. Several support groups are also provided at the Gwinnett Women’s Pavilion. We offer support groups for inpatients on the High-Risk Pregnancy Unit, parents of babies in the NICU, Breastfeeding Support, and a Perinatal Loss support group. Women Services staff includes 360 employees, ranging from RN’s, PCT’s, Unit Secretary’s, Surgical Tech’s, Breast milk Tech’s, Management Assistant’s, an Equipment Coordinator, Quality Coordinator and an Administrative Assistant.

Health Navigator:

A Health Navigator (HN) is a registered nurse who is dedicated to guiding you and your family through healthcare experiences—no matter what stage of life. The HN is an advocate for healthcare in the community. The HN will provide health information at community events, offer free health screenings and guidance for those seeking help with their health questions and needs.
Screenings - HN - Journey to Optimal Health Consult: The consult consists of a health screening and counseling. The screening includes the completion of a questionnaire, blood pressure/height/weight/body mass index measurements, and a lipid profile. Results are provided to patients immediately and follow-up counseling is provided during the consult. This screening is offered as a complementary service to all members of the community, including those who are underserved and in medically-indigent areas of Gwinnett County.

Health Fairs - HN: The Health Navigator will attend community health fairs to provide information, verbal and written, to the community about their health and wellness needs.

Counseling - HN: Phone Calls: The Health Navigator will provide direction, support and general counseling to clients that call into the office or visit a booth at a health fair or make contact at any other community event.

Community Building - HN: Speaking Presentations: The Health Navigator will provide education to the general public about healthcare issues and concerns through speaking presentations at community events, physician offices, etc.

Education - HN - Physician Office Education: The Health Navigator will provide education to physicians and their staff about the role of the HN and how the HN can assist their patients in knowing about and obtaining healthcare that is available within the Gwinnett County area. The HN will also collaborate with the Physician offices to act as a liaison and communicator as needs arise of Women Services.

Perinatal Education Programs:

Parent Review Weekly E-mail: A free weekly newsletter offered to our patients beginning at seven weeks of pregnancy and going through the first year of life. E-mails cover topics relevant to that week in pregnancy or age of child.

Classes:

- Healthy Childbirth: Labor and delivery is on your mind. They will learn the signs of true labor, influences on the length of labor, relaxation and breathing techniques, medications, medical interventions and much more. A full tour of the Women’s Pavilion is included with this class. This class is offered every other month as a four class series, a weekend series or as an online class.

- Newborn Care: The participants in this class will learn how to take care of their baby when they get home. Topics include basic infant care (diapering, swaddling, SIDS prevention, etc.), choosing a pediatrician, infant development and more.

- Big Brother & Big Sister To Be: Becoming a big brother or sister is a very special event. We offer a fun, educational and interactive class to help your children prepare for and welcome the new baby.
• Breastfeeding Basics: The participants in this class will learn tips to help them have a successful breastfeeding experience when the baby arrives. They learn different holds/techniques to use during breastfeeding, importance of skin to skin, and more.

• Car Seat Class: The participants in this class will learn about the different types of car seats, how to install/use them properly, and when to move to the next car seat. Everyone who attends this class has the opportunity to have their car seat installation checked by a Certified Car Seat Technician.

• OB Tours: Free tours of the Gwinnett Women’s Pavilion are offered weekly and one Saturday a month. Participants will start in the lobby with registration; see a Labor & Delivery room and a Post-Partum room. The NICU and OB Surgical Suites are discussed, but not entered during the tour.

• Infant CPR & Safety: The participants in this class will learn first aid, how to child-proof their home, basics of infant/child safety, and the AHA Friends & Family course on pediatric CPR and choking management.

• Babysitting Training: This class is an American Red Cross class taught by certified ARC instructors for children ages 11-15 who want to learn how to be prepared and responsible babysitters.

Perinatal Support Groups:

• Lactation Services Support: We offer around-the-clock trained nursing staff for hands-on assistance, the Breastfeeding Help Line consultations for questions once you’re at home, inpatient consultations if breastfeeding isn’t progressing as expected and referrals for excellent outpatient breastfeeding assistance.

• Lactation Services Helpline: Phone calls returned when messages are left on the Breastfeeding Helpline. These are usually moms who have questions about breastfeeding or need additional support while breastfeeding.

• Neonatal Intensive Care Unit (NICU) Support Group: All parents of our NICU babies are invited to attend this support group twice a month. The group is led by our NICU social worker, who is there for you not only during group meetings, but every day that your baby is in the NICU. The NICU has a committee and event called the Preemie Reunion to celebrate graduates of the NICU.

• Perinatal Loss Support Group: Parents who have lost their baby are invited to attend our Perinatal Loss Support Group. Our Perinatal Loss Support Group meets once a month in the Maple Room at the GMC Resource Center. This group serves patients of GMC and surrounding areas. The Bereavement Department of GWP holds two services every year for families who have lost a baby. In April, our families who have chosen hospital cremation, and have indicated they would like to be included, are invited to a Memorial Service to honor their baby lost due to an early pregnancy loss. In October, which is Pregnancy and Infant Loss Awareness Month, we hold a Remembrance Ceremony for families who have lost a baby at any gestation and have chosen private burial or cremation.
• High-Risk Pregnancy Support Group: Weekly on the High-Risk Pregnancy Unit, our chaplains offer a support group to our patients admitted to the High-Risk Pregnancy Unit.

• Breastfeeding Support Group: New moms are invited to come join other breastfeeding moms in the community to discuss the joys and challenges of breastfeeding and beyond. Our support group meets every Monday of every month from 11 a.m.-noon in the Azalea Room at the Gwinnett Women’s Pavilion, and is hosted by the Gwinnett, Newton & Rockdale Health Departments.

Baby-Friendly® Hospital Designation

As a Baby-Friendly® facility, we are committed to fostering and nurturing a positive breastfeeding environment and experience right from the start. Through education, support and assistance, staff works to ensure breastfeeding success for all. The intent of the Baby-Friendly Guideline is to patiently elicit specific information about real or perceived barriers to breastfeeding so that hospital staff may be able to help the mother achieve optimal infant feed outcomes and mother/baby bonding.

The World Health Organization and the United Nations Children’s Fund recognize hospitals that offer and support an optimal level of care for mother/baby bonding and infant feeding. To earn this special designation, hospitals must successfully implement Baby-Friendly criteria. This includes encouraging breastfeeding and rooming-in as a first choice for new moms because of the benefits both practices offer.

To achieve this designation, we successfully implemented and adhere to the Ten Steps to Successful Breastfeeding. These ten steps are:

1. Have a written breastfeeding policy that is routinely communicated to all health care staff.

2. Train all health care staff in the skills necessary to implement this policy.

3. Inform all pregnant women about the benefits and management of breastfeeding.

4. Help mothers initiate breastfeeding within one hour of birth.

5. Show mothers how to breastfeed and how to maintain lactation, even if they are separated from their infants.

6. Give infants no food or drink other than breast-milk, unless medically indicated.

7. Practice rooming in – allow mothers and infants to remain together 24 hours a day.

8. Encourage breastfeeding on demand.
9. Give no pacifiers or artificial nipples to breastfeeding infants.

10. Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from the hospital or birth center.

NOTE: Step 4. Help mothers initiate breastfeeding within one hour of birth, is interpreted as: Place babies in skin-to-skin contact with their mothers immediately following birth for at least an hour and encourage mothers to recognize when their babies are ready to breastfeed, offering help if needed. Although skin-to-skin contact will make breastfeeding easier, due to the many benefits from skin-to-skin contact, this step applies to ALL babies, regardless of feeding method.

Skin-to-skin means holding your unclothed baby next to your bare skin and will help:

- Babies adjust to life outside the womb.
- Calm, comfort and keep the baby warm.
- Steady the baby’s heartbeat, blood pressure, breathing, blood sugar levels and temperature.
- Mom and baby bond together. Skin-to-skin holding allows smelling, feeling, and getting to know each other.
- Make breastfeeding easier. The warmth, smell, and closeness to the breast lead to easier and longer breastfeeding.
- Make you feel more confident as a new parent.

Program goals for FY 2020

- Women Services goal for FY 2020 is continue to be a leading provider of obstetrical services in the county. Our neonatal intensive care unit will continue to provide exceptional healthcare for mothers and babies here in Gwinnett county and outlying areas with a state-of-the-art neonatal intensive care ambulance. Maintain our Baby Friendly Hospital Designation. Selected staff of Women Services will participate in establishing a Patient Family Advisory Council (PFAC).

- Health Navigator will continue to offer wellness screenings for men and women in the community. HN will continue to build a presence within GMC. This provides the employees with guidance regarding their health and reaching their HealthQuest wellness points. HN will maintain the position of being a point of contact for the Every Day Wellness.

- Women’s Advisory Council will continue to stay in action. This council provides and represents a resource and link to the views and needs of the women in the community.
Community outreach/education programs descriptions

- Health Navigator will continue to offer wellness screenings for men and women in the community. HN will continue to build a presence within Gwinnett County by way of the speaker's bureau, participate in local health fairs and educate physician offices.

Continue with the Women's Wellness Day at the Infinite Energy Center. This will provide free health screenings, community resources, giveaways and speakers are a part of this event. This event attracts women of all ages and demographics within Gwinnett County.

Collaborations with community organizations

- Women Services will continue to be a partner with March of Dimes, Gwinnett County and the Gwinnett Daily Post, GLOW, Cool Ray Field. Junior Achievement, Gwinnett, Newton & Rockdale Health Depts., Volunteer opportunities with local organizations such Obria, Helping Mamas, Feed My Starving Children, Hunger to Hope, Angles in Waiting, and Tacos for Life,

Action Plans

- Identify the most recent internal and external assessment information relevant to GHS Physicians. Outline strategies to create a sustainable and diversified patient- base through the use of ambulatory model to improve patient outcomes.

Changes from previous years.

- Childbirth classes have been modified and tweaked to increase enrolment.

**Intensive Care Unit**

The Intensive Care Unit provides care to patients with severe and life-threatening illnesses and injuries, which require constant, close monitoring and support from specialized equipment and medications in order to ensure normal bodily functions. The unit is staffed by highly trained physicians and nurses who specialize in caring for critically-ill patients.

The most frequent diagnoses in this 20-bed unit are: respiratory failure requiring ventilator support, acute myocardial infarction, heart failure, gastrointestinal hemorrhage, pneumonia, sepsis, pulmonary edema, renal failure, trauma, and complicated surgical and neurosurgical procedures.

Scope of Patient Care/Service: Scope includes delivery of nursing care to critically-ill adults and in some circumstances to adolescents, including those who require emergency intervention. Special services particular to this unit include: mechanical ventilation, transvenous pacing, Intra-aortic balloon pumping (IABP), hemodynamic monitoring, intra-cranial pressure monitoring, rapid trauma resuscitation, hemodialysis/CRRT, hypothermia for cardiac arrest patients, administering vasoactive drips, antiarrhythmic and thrombolytic therapy.
GMC-Lawrenceville ICU is a six-time Beacon Award Winner:

The American Association of Critical Care Nurses has recognized the GMC-Lawrenceville ICU with the Beacon Award for Critical Care Excellence. This prestigious award is given to ICUs that distinguish themselves by improving every facet of patient care. For our patients, the Beacon Award signifies exceptional care through improved outcomes and greater overall satisfaction. For critical care nurses, it means a positive, supportive work environment with greater collaboration between colleagues and leaders, higher morale and lower turnover. GMC-L is the only unit in the state to win six consecutive awards.

**Palliative Care Program**

Palliative Care Medicine at Gwinnett Medical Center provides comprehensive and individualized treatment to patients with chronic or serious illness. The Palliative Care team with the patient and family assist to establish individualized goals of care. These goals may include aggressive medical treatment along with relieving the discomfort, symptoms and stress of serious illness; it focuses on the whole person - mind, body, and spirit. It works together with the primary treatment the patient is receiving. The goal is to provide education on chronic diseases and assist patients and their loved ones in establishing Goals of Care, starting conversations about Advanced Directives, and providing symptom management to ease suffering, and improve the patient’s quality of life.

Palliative Care is available to a patient at any time during their illness. Its availability does not depend on whether or not the patient’s condition can be cured. It provides relief from symptoms including pain, shortness of breath, fatigue, constipation, nausea, problems with sleep, and other physical challenges. It also provides emotional and resource support for the patient and the patient’s family, and can improve communication between the patient and the patient’s healthcare providers, including open discussions about treatment options. We encourage the patient to invite family and friends involved in the patient’s care to the family conference.

A physician or nurse practitioner with specialized training in palliative care is available to all patients admitted to Gwinnett Medical Center or in the Outpatient Palliative Care Clinic located in the Cancer Support Center.

**Cardiovascular Care Unit**

Major diagnoses served: The most frequent types of patients include invasive heart procedures including but not limited to: coronary artery bypass graft, valve repair or replacement, intraaortic balloon pump, Impella assist device insertions, and percutaneous coronary intervention (PCI).

Scope of Patient Care/Service: The Cardiovascular Care unit is an 18-bed inpatient multi-level unit that provides specialized cardiovascular/thoracic surgical care at GMC. The focus of care delivery across the continuum may include: cardiovascular intensive care, cardiovascular stepdown and cardiovascular telemetry care. The multidisciplinary team will provide the appropriate level of care determined by the frequency of assessment and intensity of care.
needed as identified by the physician and the unit specific admission/discharge criteria. The unit will be supported by a main station for cardiac monitoring, bedside charting stations, nourishment areas, family waiting rooms, supply and equipment rooms, respiratory arterial blood gas lab, and a patient/family conference room.

Center for Cardiac Services

The most frequent diagnoses are: Acute myocardial infarction, Post PCI, heart failure, cardiac arrhythmia, coronary artery disease, chest pain, and care of patients on cardiac non-titrated drips.

Scope of Patient Care/Service: Scope of care includes nursing assessment, monitoring and care for acute care an intermediate care adult patient’s post PCI and with all other cardiac and medical diagnoses. Care includes telemetry monitoring, IV therapy, blood glucose monitoring, nutritional supplementation, and pain control. Special services particular to this unit include: antiarrhythmic and vasoactive drips, immediate care post PCI including ACTs, sheath removal, careful cardiac monitoring, interpretation and intervention. Post PCI/AMI classes are offered for patients and family members at least twice weekly or as needed.

Cardiac Services

The Strickland Heart Center is a 40,000-square-foot, state-of-the-art facility at GMC-Lawrenceville. This facility features the most advanced open heart surgery operating rooms and cardiac catheterization laboratories and electrophysiology laboratories in the Atlanta area. One of the many advanced programs we offer is our percutaneous coronary intervention (PCI) program. This program allows physicians to perform life-saving coronary angioplasty and stenting procedures within our cath lab. It also allows for advanced techniques for extracting blockages in patients’ blood vessels during these procedures. These advanced techniques mean faster response times to cardiac situations—and time saved is heart muscle saved. An additional program to our services is the electrophysiology laboratories (EP) which enables the electrophysiologists the ability to provide diagnosis and treatment of irregular heart rhythms using radiofrequency and/or cryoablation techniques. Our structural heart program offers a variety of advanced technologies to percutaneously treat problems related to the chambers and valves of the heart.

Programs:

- Chest Pain Program: In October 2017, GMC-Lawrenceville achieved Disease-Specific Care Certification for Chest Pain from The Joint Commission. This is a new certification that combines a review of Acute Myocardial Infarction and Acute Coronary Syndrome programs. Achieving certification and following the suggested guidelines significantly reduces the mortality rate of heart disease patients by teaching the public to recognize and react to the early symptoms of a possible heart attack, reduce the time it takes to receive treatment, increase the accuracy and effectiveness of treatment and provide quality care during inpatient stay. These goals are accomplished by GMC through specialized cardiac emergency care teams and inpatient teams that use advanced diagnostic techniques to provide rapid diagnoses and treatment, collaborate with community resources and follow best practice guidelines regarding inpatient care.
Heart Failure Program: The goal is to improve the outcome of heart failure patient population and coordinate resources to support patients to manage their symptoms better. Multidisciplinary team led by the HF Program Coordinator meets regularly to establish a comprehensive, systematic approach to quality heart failure care that incorporates the knowledge and expertise of physicians, clinical staff, and administration. The program is also supported by transition coordinator and community liaison to ensure the patients have appropriate follow up and resources to manage their condition post-discharge. We offer HF education in both campuses for patients and families. GMC is also participating with American Heart Association’s Get With the Guideline quality improvement program to ensure our patients are receiving the evidence based care. The team also participates in community events to increase the awareness of risk factors and prevention strategies of heart failure condition.

Community Collaborations:

- Free and discounted medications: Collaboration with medication providers to help patients pay for normally expensive medications at a reduced cost. Multiple free and discounted medication cards are distributed to patients on discharge to help patients receive the most advanced medications.

- Multiple Community education offerings are presented every year to increase community awareness of cardiovascular disease and in Gwinnett County and therefore increase prevention.

Cardiac and Pulmonary Rehabilitation Programs

The Cardiac and Pulmonary Rehabilitation programs are located at GMC-Lawrenceville. The philosophy of the programs is to deliver services that enable the participant to achieve a personal level of optimal physical, psychological, vocational and social health and to equip the participant and family to make wise decisions concerning the participant’s future health. The programs focus on the participant's cardiovascular fitness without exceeding the safe limits of exercise, as well as educating the participant about their disease and its management. Other benefits include: aid in risk factor modification, assistance in returning to work (as applicable) and a healthy psychological readjustment for both the participant and family.

Both Cardiac and Pulmonary Rehabilitation are divided into three phases. Phase I includes an education program for hospitalized patients while Phase II is much more involved with intense education and several exercise visits as an outpatient. Phase III is a maintenance exercise program available to graduates of Phase II (However, the Cardiac Phase III program was restructured allowing only 3 consecutive months of Phase III as opposed to an unlimited program). For fiscal year 2018, this rehabilitation department admitted 257 with cardiac associated diagnoses for a total of 6,855 patient sessions. For the same time period, 81 patients with chronic pulmonary conditions participated in 4,031 sessions.
Center for Orthopedics

The Center for Orthopedics provides specialized care to patients who have had joint replacement (Hip/Knee/Shoulder), hip fracture, acute multiple fractures secondary to trauma, continuous pulse oximetry/telemetry monitoring post-op, urological surgery, and general medical-surgical problems.

Scope of Patient Care/Service: Includes nursing assessment, monitoring and care for adult and geriatric patients requiring management and care of fractures including physical therapy on the unit, IV therapy, pain management, patient education, and discharge or transition planning.

The Center for Orthopedics achieved Disease Specific Care Certification for both their Total Knee Replacement and Total Hip Replacement programs from The Joint Commission for both the GMC-Lawrenceville and GMC-Duluth campuses. To achieve this certification, an organization is evaluated during an on-site review on their clinical outcomes and performance metrics, the organization’s commitment to improvement of care and validate that clinical care is provided according to evidence-based guidelines. To maintain the certification, we are surveyed on-site every two years. We have maintained our certification through a two-day recertification survey conducted by the Joint Commission in both 2015 and 2017. In addition, we also submit performance data monthly.

We provide education at several community events such as:

- Senior Provider Network meetings
- Lawrenceville Senior Center
- Ashton Senior Living
- Parc at Duluth Retirement Community
- Healthy Aging Expo
- Bethesda Park Senior Health Fair
- Atlanta Family Hospice & Palliative Care Training Conference for Healthcare Professionals
- Featured articles in Vim & Vigor on topics such as Back in the Swing; Stop Living with Joint Pain, Start Living Again; 3 Easy Ways to Reduce Joint Pain Before Considering a Total Joint Replacement.

Action Plan:

- Maintain Joint Commission Disease Specific Care Certification for both campuses.
- Increase bone health education in the community and marketing initiatives.
Oncology Services

Oncology Services’ mission is to offer the citizens of our community compassionate cancer care in partnership with our patients and physicians through a network of integrated services and programs promoting the delivery of health and wellness. In 2016, our last complete year of data, GMC saw a total of 1,907 new cancer cases.

The Oncology Services department is comprised of 12 FTEs and one PRN positions for a dietitian. The positions for Oncology Services are: Director of Oncology Services, Advance Practice Genetics/Cancer Risk Specialist, two Breast Health Navigators, a Thoracic Oncology Navigator, two Oncology Social Workers, an Oncology Dietitian, an Oncology Support Clinic Manager, an Oncology Community Outreach Navigator and an Administrative Assistant. In addition, GMC contracts with the American Cancer Society for the services of an American Cancer Society Patient Navigator. The American Cancer Society Patient Resource Navigator (in place since 2007) is a collaborative agreement with shared cost between GMC and the American Cancer Society, and our ACSPRN served 887 patients in FY 2018. The Breast Health Navigators (in place since 2005) saw 2,186 patients in FY 2018. The Hereditary Cancer Risk Assessment program had 460 new patients in FY 2018. In FY 2018, the Thoracic Oncology Program conducted 694 lung screenings. There were 247 biopsy breast clinic visits in FY 2018 between Lawrenceville and Duluth.

In FY 2018, there were several achievements met to further the development of our Cancer Institute system of care:

- Provided a number of community outreach to promote education, early detection, screening and prevention throughout the community.
- We opened up a new Center for Cancer Care in Hamilton Mill to serve our patients in that area in March 2018.
- Eight Colon Cancer Awareness Events were held March –April 2018 that involved the community and associates. There were 807 Colocare kits given out during FY 2018 with 3 being identified as having a positive result.
- We had our second annual Paint Gwinnett Pink 5K to raise money for our breast program and patients at Gwinnett Medical Center. We had over 1,000 in attendance and raised over 85,000 dollars.
- Developed a metastatic breast cancer program in January 2018.
- Added 2 new medical oncologists Dr. Debra Miller and Dr. Ramandeep Bambrah to our physician team in FY2018.

The goal for the Oncology program for 2017-2018 is to support the 16 continuum goals identified in the Georgia Comprehensive Cancer Control Plan 2008-2012 by:

- Maintaining our accreditation through the Commission on Cancer (CoC) of the American College of Surgeons (ACoS). Accreditation achieved in June 2018.
• Maintaining our accreditation of our breast program through the National Accreditation Program for Breast Centers. Full three-year accreditation was achieved on June 2016.

• Continuing to promote Breast Cancer Awareness through an annual 5K event.

• Continuing to promote Colon Cancer awareness.

• Continuing to promote Skin Cancer awareness.

• Continuing to offer cancer support groups.

• Continuing to offer monthly Freshstart classes.

• Continuing to promote Lung Cancer Awareness through educational offerings.

• Continuing to offer the Breast Health Navigator and the American Cancer Society Patient Resource Navigator services.

• Continuing to increase accrual of Georgia residents to cancer clinical trials.

• Continuing to expand and enhance cancer data collection from existing and new sources and implement improved information management tools and technologies.

• The Breast Cancer Fund was developed that is used for women needing mammograms, diagnostics and biopsies, garments for breast cancer patients, and for equipment.

• Expand nutrition services and social work to Hamilton Mill.

• Increase lung cancer screenings.

• Continue to grow the outpatient palliative care clinic services.

• Establish a safety program to ensure medication adherence and safety for patients prescribed oral chemotherapy with Center for Cancer Care pharmacy, nurse staff and leadership.

• Continue to establish the Patient Care Fund used to provide financial assistance to cancer patients receiving treatment at GMC.

Programs:

• Breast Health Navigators and a Thoracic Nurse Navigator assist patients in securing services throughout the System.

• Oncology social work services assist patients with dealing with the emotional stress that a cancer diagnosis can bring and connecting them to needed resources.
• Thoracic Oncology Program including a multidisciplinary steering committee, lung cancer screening program and Thoracic Oncology Nurse Navigation services.

• Women’s Cancer Support Group and Hispanic Women’s Support Group

• Twisted Sisters Yoga for Breast Cancer Survivors

• Patient Care Fund established to provide assistance to patients struggling to afford basic necessities such as food, gas and housing expenses. A steering committee has been developed to oversee the fund in collaboration with the GMC Foundation.

• Outpatient Palliative Care Clinic provides symptom management, emotional and resources support for cancer patients and their families to improve communication between the patient and the healthcare team including open discussions and treatment options.

• Lymphedema Therapy, offered by appointment for excessive edema as a result of cancer treatment through Gwinnett SportsRehab.

• Speech Language Pathology services offered by appointment for voice and swallowing deficits as a result of head and neck cancer.

• Freshstart is an outpatient smoking cessation program created by the American Cancer Society. The program consists of four classes taught by trained facilitators. The goal of the program is to help participants stop smoking by giving them the information and strategies needed to create a personal plan for quitting while in a supportive group environment.

• Smoking cessation information and counseling is offered to hospitalized patients who have expressed a desire to quit smoking. Post discharge follow-up calls are also offered for continuous support and counseling.

• Cancer Rehabilitation, offered by Gwinnett SportsRehab for strengthening range of motion and return to activities of daily living.

• Voluntary participation in the Association of Community Care Centers (ACCC), which is a national program that provides oncology professionals with information and education about clinical trials, reimbursement hotlines and professional organizations through their Website.

Accreditations:

• Voluntary accreditation through American College of Surgeons/Commission on Cancer (ACoS/CoC) provides a best practice programmatic framework and measures our compliance with several standards that represent the full scope of the cancer program – cancer committee leadership, cancer data management, clinical services, research, quality improvement and community outreach.
• Voluntary accreditation through The National Accreditation Program for Breast Centers represents participation in a consortium of national, professional organizations dedicated to the improvement of the quality of care and monitoring of outcomes of patients with diseases of the breast. This mission is pursued through standard-setting, scientific validation, and patient and professional education.

Collaborations:

• American Cancer Society Patient Resource Navigator offered through Oncology Services

• Hudgens Center for the Arts program “The Healing Arts Initiative” designed specifically for cancer patients and their caregiver/support persons

• Women’s Cancer Support Group, Hispanic Women’s Cancer Support Group, offered (monthly) through Oncology Services.

• Lung Cancer Alliance for Center of Excellence

• Cancer Resource Volunteer Program with the American Cancer Society

Programs under Development:

• Increasing the number of clinical trials available to cancer patients and the number of patients enrolled in clinical trials.

• Increasing the number of patients that are placed on Palliative Care while receiving treatment.

• Expanding services in Duluth to accommodate the increasing patient needs.

Office of Research

Mission: The Gwinnett Hospital System (GHS) Office of Research (OOR) works with hospital leadership to provide input and direction for clinical research programs conducted within GHS. The OOR is charged with (1) helping to create and sustain a compliant research culture within the health system in order to enhance the medical options for the community that the hospital serves; (2) to help provide generalizable knowledge to improve the health of the community through research; (3) to oversee the potential risks to patients associated with research conducted within the hospital system; (4) to provide a forum for the resolution of areas of conflict for administration, research teams and hospital service lines; and (5) to assess the clinical and non-clinical capabilities of the organization and its ability to assume specific research projects.

Description of Services: The Office of Research (OOR) provides research administrative and operations services to Gwinnett Medical Center-Lawrenceville, and Gwinnett Medical Center-Duluth. The OOR was formed in December of 2012 and currently oversees research in oncology and graduate medical education (GME). The OOR is staffed with five Full-Time Equivalents
(FTEs) with positions represented in research nursing and research coordination. Functions covered by these positions include clinical management, research operations, regulatory affairs, quality assurance, and financial coordination.

Current Research: Currently, the Office of Research (OOR) oversees government-sponsored, non-profit, academic and industry-sponsored clinical research. Since fiscal year 2016, the OOR has been involved in National Cancer Institute (NCI) research through its affiliation with the Duke Cancer Network. Access to these research opportunities result in improved health outcomes otherwise not available to patients through standard of care or routine options in their own community.

Community Engagement through Research: Through our research programs, the Office of Research (OOR) offers the Gwinnett community, which supports a highly diverse ethnic population, access to innovative medical options. In addition to these research options, the OOR also engages the local Gwinnett medical community with educational opportunities geared towards the advancement of research knowledge and practice. Through these educational programs, local physicians and their staff are able to bring back to their patients options for medical treatment beyond what would routinely be available.

Goals for Fiscal Year 2020: The primary goal of the Office of Research (OOR) for fiscal year 2020 is to expand our offering of oncology therapeutic treatment trials. Augmenting our current menu of clinical research offerings will allow our providers more viable treatment options to discuss with their patients diagnosed with cancer. We are currently expanding our clinical research sponsorship pool by joining additional cooperative groups beyond the National Cancer Institute (NCI) ALLIANCE cooperative group in order to gain access to more phase 2 – 3 industry-sponsored treatment trials in a variety of cancer types, such as breast, lung, colon, head and neck, etc.

**Medical Oncology and Renal Unit**

The Medical Oncology Renal Unit is a challenging 30-bed unit specializing in the care of medical oncology and renal patients, while also providing care for patients with a wide variety of acute and chronic illnesses including asthma, pneumonia, COPD, AIDS, diabetes mellitus, acute and chronic liver failure, diseases of addiction, cellulitis, and diagnoses requiring telemetry/continuous pulse oximetry monitoring. Oncology patients include those with newly diagnosed cancer receiving chemotherapy, neutropenic fever, treatment of chemotherapy/radiation induced side effects, and end stage disease with end of life care/comfort care. Renal patients include newly diagnosed disease and end stage disease requiring hemodialysis or peritoneal dialysis. Nurses on this unit are trained to administer chemotherapy and perform peritoneal dialysis. The unit provides a professional and stimulating environment in which critical thinking and attaining new knowledge and nursing skills are promoted among a very supportive staff.

**Stroke Program**

The Emergency Departments in GMC-Lawrenceville and Duluth, the Center for Neuroscience in Lawrenceville, GMC-Duluth 4th floor telemetry and Glancy Rehabilitation Center comprise the areas for specialized stroke care within our system. These areas are supported by imaging and laboratory services, coordinated care, nutrition, and inpatient rehabilitation therapy.
Since February 2005, both the GMC-Lawrenceville and GMC-Duluth campuses have been certified as Primary Stroke Centers. The Center for Neuroscience leads our System’s efforts in maintaining our voluntary Advanced Primary Stroke Center certification by Joint Commission. The Joint Commission’s Primary Stroke Center Certification program is based on the “Recommendations for Primary Stroke Centers,” published by the Brain Attack Coalition and American Stroke Association statements to evaluate hospitals functioning as Primary Stroke Centers. The elements are surveyed on-site every two years. In addition, interim data is submitted annually, which includes leadership support, processes for timely and appropriate treatment, guideline updates and education to providers, patients and the community as well as performance improvement efforts. Community education is supported through the efforts of the nursing and stroke team members who provide presentations and screenings for at-risk groups.

Programs:

- Advanced Primary Stroke Center certification by Joint Commission.

- Stroke Response Team for the Emergency Department and inpatient care areas in the GMC stroke program includes collaboration with Emergency Medical Services (EMS) in stroke recognition and notification. The Stroke Alert process is initiated in the Emergency Department with the stroke team’s assessment, diagnosis and determination of a patient’s eligibility for thrombolytics. In addition, the MRT Team, Stroke Clinical Nurse Specialist or Neuroscience Supervisor/Charge Nurse responds to in-hospital stroke alerts.

- Stroke Risk Screenings at community health fairs

- Stroke Awareness presentations in the community

- Annual CME Conference: Advances in Neuroscience & Stroke Care

- CME Neuroscience Talks for physicians and clinical professional staff associated with Gwinnett Medical Center.

Community Collaborations:

- We partner with Genentech to provide community education materials such as “FAST” cards and magnets, table tents, and posters.

- GMC has partnered with Gwinnett Emergency Medical Services (EMS) and Eastside Medical Center to have EMS activate a stroke alert page when the patient is within six hours of symptom onset or wake-up stroke, draw labs in the field and take the patient directly to CT after quick registration and physician assessment.

- GMC has provided regional PACs access to Grady and WellStar for patients we transfer for neuro-interventional procedures.
Action Plan:

- Maintain Primary Stroke Center certification for both campuses.
- Increase community awareness of stroke symptoms and calling 911 through presentations, stroke booths, stroke screenings, B/P checks, and marketing initiatives.
- Partner with Gwinnett County Emergency Medical Services and Genentech for community awareness FAST magnet campaign.
- Explore Comprehensive Stroke Center capabilities on Lawrenceville campus.

**Diabetes & Nutrition Education Center**

As a hospital subsidized program, the Diabetes & Nutrition Education Center (DNEC) provides outpatient and inpatient services at both the GMC-Lawrenceville and GMC-Duluth campuses.

The DNEC's staff includes Nurses and Registered Dietitians (RD) who are Certified Diabetes Educators. The RDs hold additional certifications in weight management. Staff rotates between facilities to provide inpatient and outpatient services as need dictates. We currently do not track patient contacts by facility due to lack of access to a system tailored to accurately capture our different patient situations and types. The numbers below reflect combined campuses. Outpatient services include diabetes education through an American Diabetes Association accredited diabetes education program, medical nutrition therapy, weight management, bariatric nutrition, and community classes to promote health in our community. The DNEC also provides the nutrition programming and clinic coverage for the Center for Weight Management. In fiscal year 2018, 7894 community members were provided outpatient diabetes and nutrition education through classes, consultations or community programs.

The DNEC inpatient services support the glycemic management of hospitalized patients through diabetes assessment and education. Our diabetes educators serve as a resource to physicians and nursing staff. In fiscal year 2018, there were two full-time staff assigned to cover inpatients at GMC-Lawrenceville and one full-time staff assigned to cover the inpatient side at GMC-Duluth. Staff assessed and provided diabetes education to 2956 hospitalized patients. The DNEC Director and Diabetes Education Coordinator facilitate the Diabetes Best Practice Team. This ongoing collaboration of physicians and clinicians drives initiatives for optimal inpatient glycemic control, patient outcomes, patient safety and reduced hospital readmissions.

As a resource to the community, the DNEC strives to provide adequate access to and excellence in diabetes and nutrition education that positively impacts lives. The DNEC maintains collaborations with physicians, community groups (e.g., churches, businesses, senior centers, indigent care clinics) and other hospital departments in this pursuit.
Programs:

- Diabetes Self-Management Education: Diabetes education provided by Certified Diabetes Educators in class settings or individual consultations. Program is a recognized American Diabetes Association Diabetes Self-Management Education Program. The program has received over $250,000 in grant money to support education for the underserved.

- Gestational Diabetes Self-Management Education: Education provided by Certified Diabetes Educators in class settings or individual consultations. Program is a recognized American Diabetes Association Diabetes Self-Management Education Program.

- Pre-Diabetes Community Classes offered monthly. Facilitated by a Registered Dietitian/Diabetes Educator

- Insulin pump training: Provided by staff who are Certified Insulin Pump Trainers.

- Medical Nutrition Therapy: Consultations for chronic disease management, and nutrition-related disorders. A registered dietitian tailors a nutrition plan to meet the needs of individuals with high blood pressure, high cholesterol, pregnancy nutrition, eating disorders, obesity, healthy eating and metabolic syndrome.

- Bariatric Nutrition consultations: Nutrition assessments and intervention for pre and post op bariatric surgery patients.

- Weight Management: Individual counseling, with registered dietitians; DNEC Registered Dietitians provide nutrition programming for Center for Weight Management's bariatric, adolescent and Medical Weight loss with consults, nutrition and cooking classes.

Community Collaborations:

- Intern Program: Provide dietetic internships for UGA and GSU students.

- Participate in annual GMC Primary Care Summit

- Provide resources to members of our community for information on diabetes management, access to diabetes medications, and supplies.

Progressive Care Unit

The Progressive Care Unit provides two levels of care, acute and intermediate. While there are 31 beds in the unit, 10 of those beds are earmarked for acute care and the other 21 are for intermediate level of care patients. The unit cares for a broad range of patients. The most common diagnoses are sepsis, respiratory failure, congestive heart failure, alcohol withdrawal, gastrointestinal bleeding, and diabetic ketoacidosis. The unit also provides care for trauma and post-operative patients.
The unit has admission and exclusion criteria that serve as guideline for patients coming in to the unit. The focus for all PCU patients is to provide more frequent critical assessments, early interventions and treatments. Patients requiring intervention and assessment every 2 hours with continuous pulse oximetry and cardiac monitoring are accepted.

Scope of Patient Care/Service: Includes nursing assessment, monitoring and care for adult and geriatric patients requiring wound management, hemodialysis, intravenous therapy, blood glucose monitoring, nutritional supplementation (enteric and IV), pain control, patient education and discharge or transition planning.

Learning Resources

The Learning Resources (LR) department coordinates the majority of health professional educational training for both the Lawrenceville and Duluth hospitals and its facilities, while physician education is managed by the Graduate Medical Education Office.

LR’s mission is to grow excellence in our associates and future healthcare workforce, which we refer to as our healthcare pipeline. This year 1,475 students participated in professional training. On the Lawrenceville campus 1,251 students were trained and 224 students trained on the Duluth campus in fiscal year 2018. In addition we placed 312 student observations, 264 in Lawrenceville and 48 in Duluth.

The healthcare specialty areas trained on the Lawrenceville campus in fiscal year 2018 were: corporate counsel, dietitians, emergency medical technicians, exercise and health science, health administration, health information management, invasive and non-invasive cardiology technicians, pharmacists, radiology technicians, ultrasound technologists, nuclear medicine technologists, advanced practice practitioner students, rehabilitation therapists (including cardiac, physical therapy, occupational therapy and speech therapy), respiratory therapists, neurodiagnostics, surgical technicians, and registered nursing: (undergraduate and graduate), doctorate nurse practitioner and nursing specialty areas including nursing informatics and wound ostomy. Both a high school and college certified nursing assistant program were trained. Also trained were high school students in sports medicine and in county gifted programs.

Our organization is presently affiliated with many academic institutions for both undergraduate and graduate level students. The following lists many of the affiliations in place: Augusta University, Philadelphia College of Osteopathic Medicine, Gwinnett Technical College, Georgia Gwinnett College, Georgia College and State University, Emory University, Mercer University, Brenau University, Georgia State University and Georgia State University – Perimeter College, University of Georgia, Kennesaw State University, University of North Georgia, Valdosta State University, University of West Georgia, University of South Alabama, University of Alabama – Birmingham and Tuscaloosa, Piedmont College, Athens Technical College, Lanier Technical College, Chattahoochee State, Georgia Southern University, DeVry University, University of Indiana, South University, Georgia Northwestern Technical College, Georgia Southwestern State University, Gonzaga University, Gordon State University, Gwinnett County Fire Academy, Georgia Perimeter College, Cambridge Institute of Allied Health Professions, Truett-McConnell College, Chamberlain College of Nursing, Benedictine University, Iowa State, LaGrange College, Nova Southeastern University, Vanderbilt University, Walden University, Gwinnett
County Public Schools - Quest Intern program and Grayson High School Sports Medicine, and Maxwell High School of Technology, and in Fulton County, the Fulton County Public Schools’ gifted program.

Learning Resources supports a number of healthcare academy high schools. These are high schools that configure their curriculum to help students explore a variety of college and career options within healthcare. Lawrenceville supports four high school programs on site including Maxwell High School of Technology which places their students for their Certified Nursing Assistant program with our Patient Care Technicians for their training; gifted student programs for high school students interested in observing healthcare workers in action; a sports medicine program, and the Medical Explorers Program which introduces students to healthcare experts who speak to them on their specific healthcare career and provide a tour of the careers healthcare area within the hospital. These programs are also conducted on the Duluth campus with the exception of the Maxwell Certified Nursing Assistant Program as distance and time to travel to Duluth limits the Maxwell Program location to Lawrenceville. In addition, Learning Resources also provides high school healthcare career support as a contact point for guest speakers, host to an annual teacher job shadowing event, and participate as mock interviewers and representation at the annual Career Connections event for middle schoolers at the Infinite Energy Center.

Our system also provided numerous observation experiences for students and lay people to observe in their area of healthcare interest as noted previously. Over 300 post-secondary individual observations were facilitated for those adults exploring future healthcare careers and those in programs requiring observational hours on our Lawrenceville campus. The Duluth campus provided 48 such observations and Lawrenceville campus 264 observations. These observations embrace both pre-nursing and nursing students; students who must observe as a requirement to apply to a particular healthcare program such as radiology, physical therapy, or anesthesiology assistant school; pre-med students; persons pondering a healthcare career; and students participating in our high school programs.

The Learning Resources department is the gatekeeper for all students, with the exception of medical students, promoting quality patient care and safety while affording the student excellence in learning experiences. Within this endeavor, LR assures all the academic institutions’ students interacting with our patients and customers have a current affiliation agreement in place between their academic institution and GMC as appropriate. LR also assures the student has a clear background check and drug screen, flu shot documentation or waiver, completes a comprehensive online orientation to Gwinnett Medical Center, and receives a GMC Student ID badge. LR manages GMC required documentation, tracking and data management of the paperwork, credentialing of nursing instructors who will supervise students on-site and any instructors who will visit their students on-site. In addition, individuals who observe/shadow complete a thorough online orientation to confidentiality and privacy requirements, provide validation they are free of a communicable disease (for the aforementioned students this is covered in the affiliation agreement), sign an agreement to do no hands-on care, and wear a badge identifying them as an observer with their name and date(s) of observation they are to be on-site. An annual affiliation meeting is held in spring for our affiliates to review and update them on our processes and requirements and offers a collaborative dialogue exchange.
Additional contributions to our student affiliations are ongoing. LR is a member of the Brenau Nursing Advisory Board, Gwinnett Technical College Advisory Board (for both Nursing and EMS), Gwinnett County Fire Advisory Committee, Georgia Gwinnett College Advisory Board, University of North Georgia Advisory Board, Georgia Baptist of Mercer University Advisory Committee (Community of Interest), Georgia State University-Perimeter College Advisory Board and the following high school healthcare advisory boards: Maxwell High School, Central Gwinnett High School and Shiloh High School. This day-to-day ongoing interaction with the affiliates’ representatives and students supports a quality and dynamic nurturing of our healthcare pipeline.

In alignment with our mission of excellence in education, our goal is to continue the oversight, facilitation, implementation and evaluation of student experiences. We exist to be the resource and support of quality student experiences, diligently protecting our patients and customers through our processes.

**Graduate Medical Education (GME) Program**

GMC has residency training programs in Family Medicine, Internal Medicine, Transitional year and a Sports Medicine Fellowship Training Program. These programs are accredited by the Accreditation Council for Graduate Medical Education (ACGME) and or Family Medicine Program holds additional Osteopathic Recognition accreditation endorsed by the American Osteopathic Association (AOA). Our institution and all of our residency programs have received Continued Accreditation from the ACGME. Our Family Medicine Program, a three year training program, started in 2013 and has graduated five residents per year since June of 2017. The Strickland Family Medicine Center (SFMC) serves as the major outpatient training site for these Family Medicine residents and is the main outpatient care setting for them and their patients. Our Internal Medicine Program recruited its first class in July of 2015 and has now expanded to fifteen residents per year. They have graduated eleven residents since their inception. The internal medicine office practice, Academic Internal Medicine Partners or AIMP is next door to the SFMC and serves Preoperative Internal Medicine and Transitional care patients as well as primary care Internal Medicine. The Transitional Year program is a one year program that began in 2016 and it prepares learners for their future residency programs, ophthalmology, dermatology, radiology, and anesthesia, to name a few.

GMC-Duluth serves as the major Family Medicine teaching site and GMC-Lawrenceville serves as the major Internal Medicine inpatient teaching site. The Transitional Year Residency Program trainees rotate to both sites over the course of their year of training.

GMC’s goal is to train primary care providers in our community setting; it is a well-known fact that many studies have shown success in keeping physicians who train in a community setting in or near the communities in which they have trained. Once established, there will likely be further opportunities to add more specialties and subspecialties as time progresses. We are proud to say that over 80% of ALL of our graduates have been retained in the state of GA and or have committed to returning after their fellowship training, the ultimate goal of our programs.
Further, development of a formal physician educational section and teaching structure in the GMC system has greatly assisted current teaching faculty, as well as those interested in participating with resident and student teaching, by providing oversight of curriculum and predictability of student and resident rotations.

The continued effort of building graduate residency programs will require all of us, at all levels of experience, and all areas of expertise to be actively involved. The newest requirements for teaching programs put forward by the ACGME include multidisciplinary educational teams, the introduction and use of research techniques, and the presentation and use of quality and patient safety data and indicators. They also rely heavily on nursing, allied health and administration for participation in the process.

Since many issues and needs have already been given and continue to need to be given attention. GMC administration and the GME section have addressed and will continue to be focusing in the following major issues:

- Efforts to add further faculty and personnel needs to address staffing the GME clinical space and future faculty needs in both specialties are ongoing. Work continues to secure community offices and potential practice sites for both primary care and required specialty rotation.

- Work continues with the GMG Physicians Group to develop and secure inpatient rotations as required for both training specialties.

- Partner with local and regional medical schools and other educational institutions to develop these programs and layer in student rotations.

- Explore the possibilities and potential of adding other residency Training Programs and Fellowship Programs.

- Enlist the support and teaching expertise in our community in ALL other healthcare and allied healthcare professionals as most all of the new training curricula include a requirement of a multidisciplinary approach and the incorporation of research technique and quality indicator usage.

**Continuing Medical Education/Medical Library**

The Continuing Medical Education/Medical Library department provides accredited continuing medical education (CME) conferences and library services and resources for our physicians, residents, advanced practice providers, hospital associates and the community.

Gwinnett Medical Center is accredited to provide Category 1 CME credit through the Medical Association of Georgia. We have been an accredited CME provider since 1994 and most recently were awarded CME Accreditation “with Commendation” as a provider of continuing medical education. This recognition confirms GMC’s commitment to excellence in its CME programming.
Our mission is to provide relevance in CME program development – “Education that matters to patients.” We are dedicated to delivering quality, balanced and evidence-based educational opportunities that stimulate and empower physicians and other providers to improve patient care.

The Gwinnett Medical Center Continuing Medical Education Program provides lifelong learning opportunities for physicians to enhance their competence, practice performance and improve the health status and outcomes of patients in the Gwinnett community.

Emphasis is placed on:

- Assisting physicians to identify their professional practice gaps and designing appropriate and effective educational interventions to meet these gaps, promote changes and improvement in clinical practices.
- Collaborating with Quality Improvement and other departments in designing, planning and implementing learning opportunities to address quality or safety issues within the hospital system.
- Providing up-to-date, evidence-based, clinically-relevant and scientifically-rigorous educational opportunities for physicians.

CME conferences at Gwinnett Medical Center address a wide range of topics related to clinical practice, current research and professional development. Each medical department provides conferences in its respective field/therapeutic area. Content is also influenced by best practice recommendations, key strategic plan initiatives, new clinical services and our hospital mission. Conferences are planned based on the identified needs of the target audience and may occur in multiple formats to address the practice gap.

The primary target audience is practicing Gwinnett Medical Center physicians. Other physicians in the Gwinnett community as well as advanced practice providers and healthcare professionals at Gwinnett Medical Center are also invited to attend the CME conferences. Some of our conferences may target local or regional physicians and healthcare professionals with whom we wish to share our expertise or clinical information.

The CME Program offers both traditional and innovative conferences including live CME conferences based on current, relevant topics and annual seminars. Online access is available to a large number of our CME conferences via WebEx connections. This allows remote physicians and other providers access to live CME conferences. Types of conferences include departmental conferences, primary care grand rounds, multidisciplinary case conferences, journal clubs, interactive, hands-on workshops and computer-based learning. Live teleconferences may also be transmitted to our second facility at Gwinnett Medical Center-Duluth, allowing additional physicians and healthcare professionals to participate in the conferences. Joint providership of conferences with local healthcare organizations are occasionally undertaken to provide quality continuing medical education for other local entities. For calendar year 2018, a total of 251 CME conferences were provided which included 469.5 hours of instruction and total attendance of 5,789 participants.
Medical Library

The Gwinnett Medical Center’s Medical Library is located on the Ground Floor of GMC-Lawrenceville and provides medical resources, access to computers and a variety of library services.

The mission of the Gwinnett Medical Center Medical Library is to provide the highest quality medical information services and resources to support excellence in patient care, clinical and management decision-making, research, community wellness and the educational needs of our customers. Our library provides a diverse collection of medical resources and a wide range of library services available to physicians, other providers, healthcare professionals and the community. For calendar year 2018, the “brick and mortar” Medical Library was utilized by 16,232 physicians, associates, students and community members.

While offering onsite collections of current and relevant materials, the library staff is able to provide reference services that stretch beyond the walls of the physical library.

The on-site collection includes:

- Medical online databases for physicians, advanced practice providers, nurses, allied health professionals, patients and the community
- Medical textbooks and DVDs
- Electronic medical journals and textbooks covering all specialties
- Ten-year collection of 25+ paper journals
- Extensive drug information
- Evidence-based practice guidelines, patient information and much more

The Electronic Medical Library provides access to an extensive electronic library collection including:

- 20,000+ full-text medical and surgical journals
- 2,000+ full-text electronic medical and surgical reference textbooks
- 16+ electronic medical databases
- Seamless retrieval of information from these resources
- Electronic journals and e-books are organized by our A to Z list – A searchable tool which allows users to alphabetically search through our entire electronic journal and e-book collections
- Article Linker – A link resolver product that easily and directly links users to the full-text of requested journals when conducting a literature search
Online Database Resources Include:

- **UpToDate** – A point of care clinical Information database that provides concise, peer-reviewed, practical answers to the physician/provider’s clinical questions from any device or location

- **ClinicalKey** – A comprehensive medical database providing access to an expansive collection of medical journals, e-books, videos of procedures, practice guidelines, drug information and patient education handouts - all in one resource

- **PubMed** – The National Library of Medicine’s Medline, the world’s premier index to medical literature (1950 – Present)

- **VisualDx** – A visually presenting diagnostic decision-support database providing access to over 40,000 clinical images to help the physician/provider determine the definitive diagnosis and aid in identifying the differential diagnoses

- **AccessMedicine** – An innovative online reference and practice resource for clinicians, faculty and residents providing access to 120 core medical textbooks, procedural videos, an integrated drug database, diagnostic tools, medical calculators and more

- **Ovid** – Another medical database that provides access to Medline and the latest peer-reviewed articles in 300+ premier full text journals

- **EbscoHost Database** – A comprehensive collection of multiple databases including the following:
  - CINAHL Plus with full-text and Nursing and Allied Health Collection - Expanded
  - Nursing Reference Center Plus
  - Medline Complete
  - Health Business Elite
  - Psychology and Behavioral Sciences Collection
  - Cochran Evidence-Based Databases

- **Lexicomp** – A pharmacology database that provides comprehensive drug and clinical information including detailed monographs of drugs, drug interactions, calculators, IV compatibility, toxicology information, patient care handouts and information related to lab and diagnostic procedures

- **Rittenhouse Full-Text e-Books Collection** – A web-based, fully integrated, searchable medical, nursing and allied health electronic book database of content from key health-science publishers

- **STAT!Ref eBook Collection** – Another full-text e-book database which includes access to many medical, nursing and pharmacology textbooks

- **Neofax** – A neonatal drug database providing drug monographs, enteral formulas and calculators for the neonate population
• MedlinePlus – The National Library of Medicine’s free index to consumer health information in over 40 languages. It provides links to full-text medical information from reputable organizations, clinical trial and drug information as well as a medical dictionary and medical encyclopedia

• Krames On-Demand – A comprehensive, customizable patient education database available in twenty-one different languages

• oneSOURCE – A document management service that provides access to current manufacturer’s Instructions for Use (IFU) and Preventative Maintenance (PM) documents

Physician Liaison

Physician Liaisons are responsible for developing and executing strategies and tactics to achieve business objectives, as well as providing feedback on physician requests by establishing relationships with physicians and their office staff. They are also responsible for the overall hospital and maintenance of effective relationships between hospital services and physicians and physician office staff in the community. They gather and disseminate information and perform growth and retention activities such as site visits, presentations, exhibit staffing, networking, one-on-one meetings and attending special functions. Finally, they report back concerns, issues and compliments to the appropriate operational personnel for the purposes of recognition or service improvement to the physician and physician office.

Physician Services

Physician Services department conducts a triennial physician community needs assessment to identify physician shortages in primary and specialty care areas. GMC recruits community physicians through income guarantees, employment, relocation assistance, signing bonuses and recruiter fee assistance.

The Physician Informatics team is based out of the Medical Staff Office and is designed to focus on the information technology education and support for our credentialed medical staff. The team works closely with the IT system analyst teams and individual medical staff members to design and document provider workflows within the electronic environment.

The team is responsible for new medical staff orientation including hands-on training for provider related IT systems insuring access to the systems is accurate, complete and functional (including remote access from office, home or mobile device). The team provides “at the elbow” support during new system implementations as well as on-going assistance to use the hospital’s computerized provider order entry, secure email and texting application, the emergency department’s electronic medical record and voice recognition system, the electronic cardiac monitoring system, and other clinical documentation systems utilized by various hospital departments that interface with providers.

GMC conducted it over a three month period with final report out March 2018. Our Service Area is the 31 zip codes that surround Lawrenceville, Georgia.
We looked at the Physician supply:

- Physician Ages in the service area
- GHS Physician Ages

We conducted interviews with physicians in primary care and specialty areas:

- Questioned what are their thoughts on top recruitment priorities
- Where they refer to
- What specialties are strong
- What specialties are weak
- Are they actively recruiting in their practice?

And we conducted Focus Groups:

- Associate leadership
- Women’s Advisory Council
- Community Coalition Members

We defined the Physician needs based on the above information and data. We then calculated the physician surplus and deficit and set recruitment Priorities & Plan.

**Coordinated Care Department**

The mission and vision of the Coordinated Care department is to provide services to improve the effectiveness and efficiency of healthcare delivery in order to facilitate optimal patient outcomes. Associates facilitate the coordination of patient services in order to provide quality healthcare within a reasonable time frame and with efficient and appropriate utilization of resources. Services include case management/utilization management and social work services. In fiscal year 2019, the Coordinated Care department had 54 associates including: registered nurse case managers (CM) and social workers (SW) who hold either a BSW, MSW or licensed masters (LMSW) and some maintain certification as a certified case manager (CCM) or an Accredited Case Manager (ACM). The associates interacted with 105,439 cases at GMC-Lawrenceville and 13,429 cases at Gwinnett Women’s Pavilion.

Case managers and social workers assess patients based on a high-risk screening tool and complete clinical reviews on all patients for better continuity of patient care.

Case managers provide education for physicians and guidance to the multi-disciplinary team caring for patients. Case managers review for medical necessity, certify admissions, evaluate patient progress and length of stay issues as well as facilitate transition planning.
Social workers assess for psychological and financial patient needs and implement transition planning, including nursing home placement, hospice, homeless shelters and personal care homes. They are also involved with complex patient transitions whereby they provide counseling; resources for transportation (domestic and international); and referrals for rent, housing, food, clothing, medication assistance programs and vocational rehabilitation. Social workers provide conflict resolution, grief and bereavement support, domestic violence support and assist patients in locating appropriate resources through referrals and community contacts. Social workers and case managers also provide community support through referrals to resources and information to those that are not patients.

The department provides patient’s access to a case manager and social worker at GMC-Lawrenceville Monday through Friday, from 8:30AM-5:00PM and provides on-call staff from 5:00PM-10:00PM. Saturday and Sunday; we have discharge coverage from 8:00AM-8:00PM, and provide on-call staff from 8:00PM-10:00PM.

Coordinated Care and the Emergency Department offer a collaborative outreach resource to those customers who frequently utilize the emergency room. ED/POC-“plan of care“ offers monitoring by social workers to assist patients with connecting to a PCP, community clinics and/or neighboring resources.

Upon request, our department provides information sessions regarding hospital admissions to independent, assisted living and other senior organizations. The information sessions provide an overview on how our department interfaces with patient and families to plan for their discharge. It also provides information on Medicare inpatient versus observation status and nursing home information.

Goals for fiscal year 2019:

- Continue to provide in-home IV infusion services through various providers in the community
- Continue to provide home health services via provider rotation
- Maintain education provision for difficult end stage renal disease (ESRD) placements via our new relationship with Fresenius Medical Care’s (FMC) Renal In-patient Case Manager (RICM).
- Continue providing utilization management and discharge planning to inpatient customers
- Continue outreach into the community via ED/POCs and information sessions
- Provide continuum of care via GMC’s “Care Transition Coordinator”
- Provide specialized supportive CM/SW service for the Open Heart Center
- Collaborative support to Gwinnett Medical Center’s Physician-driven Palliative Program
- Continue partnership with local nursing homes, hospice companies and personal care home providers to assist in addressing readmissions
- Maintain monthly Round Table discussions with community partners to enhance the continuum of care.
Programs:

- FMC/RICM Education: provide education and outpatient placement for patients with End Stage Renal Disease (ESRD)
- Prescription Assistance program: provides assistance to indigent patients in need of medications at discharge
- Transportation program: arranges transportation for patients at discharge for patients via taxi or bus vouchers
- Supportive Community Care: provide arrangements for indigent or underinsured patients, no longer requiring hospitalization, but has a need for continued medical monitoring (i.e. Personal Care Home Placement or Extended Hotel Accommodations)

Community Collaborations:

- Medication Management: via agreements with IV Infusions Companies
- GMC’s Care Transition Coordinators (CTC) work collaboratively with population health clinicians to provide outreach to congestive heart failure and chronic obstructive pulmonary disease patients at risk for re-admission.
- Community Clinic referrals: contact information is provided for community clinics for uninsured and underinsured patients
- Complex/Team Lead Social Work role was established in October 2015 to manage complex length of stay patients, with a focus of minimizing length of stay.

Patient Representatives

The Patient Representatives department plays an important role as a liaison between the patient, family members and our healthcare team. The services provided include assistance with foreign and sign language interpretation, adaptive equipment and a system-wide grievance complaint process, allowing the clinical staff to devote their time to patient care. The Patient Representatives staff also provides information and education to patients who wish to complete an Advance Directive or update an existing one.

Patient Representatives have a dual role as a healthcare interpreter which is an important part of the services we provide to our non-English-speaking patients and their families to ensure accurate and effective communication between our patients and staff. The Patient Representatives department has many representatives who are bilingual (Spanish and Korean). Below are some additional duties provided by the Patient Representatives department:

- Ensure compliance with regulatory standards and hospital services
- Perform a variety of interpretation and minor translations to ensure non-English-speaking patients receive appropriate care within the hospital system
FY 2019 Implementations Strategy
Gwinnett Medical Center-Lawrenceville

• Maintain accurate daily records on all requests for service
• Promote patient’s satisfaction related to GMC services; notify department manager of problematic issues
• Provide patients and families with Advance Directive information
• Document patient concern information into the Risk Pro database
• Encourage communication between the patient and the healthcare team
• Inform patients of their rights and responsibilities
• Promote patient privacy and confidentiality
• Address and resolve patient/visitor concerns in a timely manner
• Document information and forward to the appropriate department head
• Visit all admitted patients
• Communicate with the Medical Examiner Office and Organ procurement agency, as required
• Provide and assist patients in using Adaptive equipment
• Notify family of trauma or critical patients when appropriate

Chaplaincy

Departmental Values:

• All persons are of ultimate worth
• Being human has many expressions, and each expression deserves attention
• Health changes and choices impact the whole fabric of life

Growing out of its values, the GMC Chaplaincy department’s mission is to provide and coordinate quality spiritual care to promote patient care excellence, to foster sensitivity to the diverse needs of GMC customers and to integrate spiritual values and health decisions. The Chaplaincy department staffs 24 hours a day, seven days a week with five staff chaplains, four clinical pastoral education residents (with a one-year commitment) and shorter term clinical pastoral education interns.

Chaplaincy is well-integrated into the life of the hospital as part of various clinical teams, especially in crisis response. Chaplaincy also serves on the Community Health and Wellness Council, Ethics Committee, Associate Benevolence Committee, Cancer Committee, Donation Committee and Palliative Care Committee. In addition, the Chaplaincy Department acts as consultant and assists in the development of policies and procedures in many aspects of the
care of GMC’s patients and families. A large part of the Chaplaincy department’s role is also staff support in the stressful healthcare environment, providing a listening ear, counsel and referral, bereavement support and memorial services for associates and families of associates.

In addition to in-house services, the Chaplaincy department has also tried to take to heart the organizational value of service to the community. Chaplains often speak at churches and community organizations on topics including grief, men and grief, end of life issues and crisis management/counseling. Chaplaincy is also sometimes called on by the Gwinnett County Fire Department to assist in Critical Incident Stress debriefings.

**Gwinnett SportsRehab**

Gwinnett SportsRehab provides cost-effective care that will restore strength, mobility and function in order to facilitate a safe return to daily activities. The highly-qualified staff of physical and occupational therapists offers comprehensive assessment and treatment of all types of physical injuries and diagnoses. Specialty programs include orthopedic/sports medicine, lymphedema therapy, amputee rehabilitation, hand therapy, arthritis management and oncology rehabilitation. Patients receive an evaluation and customized treatment plan that are designed to address the specific needs of the individual.

Outpatient services at GMC-Lawrenceville are located at 500 Medical Center Boulevard, Suite 130, and are staffed by occupational therapists (OT) – one is Lymphedema Certified and the other is a CHT (certified hand therapist), physical therapists (PT), a physical therapy assistant (PTA), administrative assistants, a speech language pathologist (SLP), and a rehabilitation aide.

Lymphedema Therapy is available in our Lawrenceville location of Gwinnett SportsRehab. Services are provided by an occupational therapist with a specialty certification in lymphedema therapy. The highly qualified therapist offers comprehensive assessment and treatment for patients with abnormal swelling in the arms, legs, face, neck or torso. This abnormality is typically due to congenital malformation of the lymphatic system or damage to lymph nodes or vessels from surgery, radiation, trauma, or infection.

The comprehensive assessment and customized treatment plan are designed to address the specific needs of the individual in order to facilitate independent return to daily activities.

Speech Language Pathology Services is available at Gwinnett SportsRehab in our Lawrenceville location. The program provides specialty speech language pathology services for adults. The speech language pathologist provides cost-effective care that includes assessment and treatment for voice disorders, swallowing deficits, and cognitive and speech/language disorders.

The comprehensive assessment and customized treatment plans are designed to address the specific needs of the individual in order to facilitate independent return to daily activities. FEES and Videostrobes are also available on both campuses.

Programs:

- Lymphedema Therapy, is provided by an occupational therapist, treatment for excessive edema as a result of cancer treatment or impairment to the lymphatic system.
• Voice and Swallowing Rehabilitation provided by a Speech Language Pathologist, treatment for voice and swallowing deficits as a result of head and neck cancer.

• Cancer Rehabilitation for strengthening, range of motion and return to activities of daily living.

• Amputee Rehabilitation for those who have lost a limb as a result of diabetes, vascular disease, trauma, tumors, or congenital conditions.

• Physical and Occupational Therapy for functional deficits resulting from an injury, postsurgical or chronic disease.

Community Collaborations:

• Lymphedema Lighthouse is a non-profit education and awareness organization about lymphedema and related disorders. It provides assistance and support to those affected by the disorder and their friends and family.

Amputee Support Group meets monthly at Gwinnett SportsRehab-Lawrenceville. It is conducted collaboratively by a physical therapist and a local prosthetic/orthotic company.

**Center for Weight Management**

The Center for Weight Management at Gwinnett Medical Center-Lawrenceville and Duluth provides outpatient and inpatient services to those suffering from the disease of obesity. We currently perform weight loss operations to include, sleeve gastrectomy, gastric bypass, Duodenal Switch, and revisions. Additionally, we have added a non-surgical weight loss option using the FDA approved ORBERA Gastric Balloon. In 2015, the Center added an adolescent bariatric surgery program and received its accreditation as a Comprehensive Center with Adolescent Qualification through the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program. The Adolescent program is one of three in the state of Georgia.

The Adolescent surgery program has oversight by Dr. James Lin, a Pediatric Medical advisor; Drs. Richard and del Mazo, bariatric surgeons; Dr. Megan Ratcliff, Ph.D., a Pediatric/Adolescent Behavioral Health Advisor; Rajalakshmi Nelluva Parameswaran, LPC., a Behavioral Health Coordinator; and Debra Proulx, RN, BHS, MBA, is the Director of Bariatric Services. Additional team members consist of dietitians, exercise specialists, financial coordinators, nurses and office coordinators.

For those patients who do not qualify for surgery or would like to pursue a non-surgical weight loss option, we offer a physician supervised medical weight loss program with board certified bariatrician, Neelima Dachuri, M.D. Recognizing that weight loss/maintenance is a lifelong journey, we offer a comprehensive support program called the Aftercare Success Program™ which helps patients change behaviors and develop lifestyle habits that promote long-term weight loss. As a result of our commitment to patient success, we have witnessed outstanding patient outcomes.

In October of 2018, we became the second program in Northeast Georgia to offer an adolescent/teen medical weight loss program for children age 11-17. This multidisciplinary program is led by a board certified pediatrician Dr. James Lin. Children and families participate in the Wellness180 program monthly for 6 months to learn healthier behaviors and nutrition habits.
The Center employs 13 full-time employees, 3 part-time employees and 2 prn employees to assist with the management of the surgical and medical weight loss clinic, insurance process and the aftercare program. The Center has also expanded its practice location to the Lawrenceville campus of Gwinnett Medical Center, offering clinic hours two afternoons per week. In fiscal year 2018, the program assisted 380 patients improve their health through surgical intervention. The program consistently manages an average of 195 patients through different phases of the surgical preparation process. The adult medical weight management program averages 100 patients in a 16 week plus program and 16 patient “crew” visits monthly in the Wellness180 program. The demand for this program is significant. As a resource to the community, the Center for Weight Management strives to promote the highest quality of pre- and post-op services and offers a uniquely comprehensive support program for patients seeking weight loss.

The Center maintains partnerships with physicians, businesses, community groups (e.g., churches) and other hospital departments in this pursuit. The Center maintains national accreditation with the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program. Additionally, we have been granted the following quality designations: Aetna Institute of Quality, Cigna Center of Excellence for Bariatric Surgery, Blue Distinction Center for Bariatric Surgery (BC/BS), and Optum Center of Excellence (quality program through United Healthcare). The Center has been voted “Best of Gwinnett” four years in a row.

Goals first quarter of 2020 would include the expansion of adult medical weight loss program to the Lawrenceville campus and launching of the new Telehealth program. Goal for second quarter of 2020 is to launch the Corporate Medical Weight Loss Program delivered onsite at the corporate location. The Center also plans to expand their support services by adding Webinars to deliver additional educational opportunities for patients in all the weight loss programs.

Scope of Patient Care/Service: The scope of care for this program includes the surgical and non-surgical care of adolescents and adults who suffer from obesity or morbid obesity. The program serves adolescents 11 to 17 and adults, ages 18 to 65 plus. Surgical care provided consists of gastric bypass, sleeve gastrectomy, Duodenal Switch, revisional surgery or other surgical options that result in long term weight loss. Inpatient or outpatient hospital care is provided by highly qualified staff on the fifth floor of GMC-Duluth. Pre-op and post-op care is also provided in the clinic setting on an outpatient basis. Post-operative classes are performed by the Registered Nurse prior to discharge from the hospital. The program offers a comprehensive support program which consists of life coaching classes, cooking classes, therapeutic group classes, and support group meetings. These classes/groups occur on select evenings and weekends.

**Nutrition Services**

GMC’s Nutrition Services provides basic food service to all hospitalized patients, according to their dietary and medical needs. The department provides services to GMC-Lawrenceville as well as GECC. Medical nutrition therapy is provided to certain individuals as deemed appropriate by a registered dietitian. The dietitian monitors patients’ intake, analyzes the intake and other conditions and then adds appropriate supplements or therapy to maximize nutrition. Nutrition education is provided for disease management on an individualized, personalized basis for hospitalized patients. Education is also provided for drug/nutrient interactions. There are 4.5 FTE Registered Dietitians’ for GMC-Lawrenceville, including GECC.
Faith Community Nursing

Faith Community Nursing has contributed to the health of Gwinnett County communities for 20 years. Research has shown that people who are healthy in their spiritual and emotional life are better able to cope and become healthier in their physical bodies. Gwinnett Medical Center’s (GMC) Faith Community Nursing program encourages faith communities to implement health and wellness ministries within their congregations through training, supervising and supporting faith community nurses to promote whole person health. Faith Community Nursing is a recognized by the American Nurses Association as a specialty practice of nursing and GMC administers the Westberg Institute Foundations in Faith Community Nursing course biannually. The Foundations course is an important component of educational preparation for registered nurses in this field of specialized nursing practice.

Faith community nurses function as advocates, case managers, personal health counselors, educators and volunteer coordinators for creative programs to improve the health of community members. Programming varies because each faith community site assesses their population health needs and develops programming tailored to address the identified needs.

During the past year, the Faith Community Nursing sites associated with Gwinnett Medical Center-Lawrenceville made more than 39,756 contacts in the community. Examples of these services include education and awareness programs, support groups, and hospital, home and nursing home visitation. Relationships with area faith communities are a key link in providing health outreach and last year the Faith Community Nurses collaborated with more than 250 service agencies.

The Faith Community Nursing department includes a manager, a half-time registered nurse education coordinator, a half-time administrative assistant, and 14 registered nurses, whose positions are affiliated with GMC. The department is also home for the precedent-setting Faith Community Network Nurse Navigator.

Goals for fiscal year 2019:

- To integrate the work of the faith community nurses with the Healthy People 2020 goals and the hospital strategic goals for improving the health of our community
- To grow our cohort of faith community nurses in order to serve the larger diverse community
- To assist nurses in planning ways to address the current health problems in our community
- To provide training to additional registered nurses through the Westberg Institute Foundations in Faith Community Nursing curriculum to enable them to provide a health ministry in their faith communities
- To provide outreach community-based education to clergy and faith communities to raise awareness of the power of the health system/faith community partnership in impacting the health of our community.
- To support the continued growth of the GMC Faith Community Network in both faith communities as well as faith-based community organizations
Programs:

- Cancer Support Groups: support groups for victims of cancer and their families
- Emotional and Mental Health Programs: provide education and support for persons with conditions such as depression and abuse
- Grief and Bereavement Support Groups: groups for persons suffering grief from bereavement or other losses
- Additional Support programs for individuals and families: these groups are for persons needing support from situations of substance abuse, family violence, divorce, etc.
- Healthy Living: education and support programs which teach healthy eating, nutrition, and exercise such as Believercise, Tai Chi, and First Place Health.
- Parenting Skills & Issues: an educational program to assist parents in developing new or better skills in caring for their children.
- Healthy Aging: programs designed to help aging adults and their caregivers maintain safe and healthy practices, such as protecting against falls and other safety tips.
- Health Screenings: such as blood pressure screening, cholesterol, cancer, etc. are provided to persons in the faith community and during special events called health fairs.
- Cancer Awareness: in partnership with the GMC Cancer Institute, bring educational programs, screenings and exhibits designed to alert persons to the warning signs of cancer such as skin cancer, colo-rectal, etc.

Community Collaboration:

- Partnering with the Gwinnett, Rockdale & Newton County Health Department and faith communities through a grant to bring exercise programming to vulnerable faith communities through the Fit-For-Us program.

- Gwinnett County Emergency Management: working with Gwinnett County Functional Need Support Services Resources Committee to facilitate the cultivation of relationships between the county and the faith community as related to emergency preparedness.

**Faith Community Network**

Gwinnett Medical Center (GMC) developed the Faith Community Network, which consists of a covenant partnership between Gwinnett Medical Center and faith communities in the Gwinnett County area, with the goal to build a healthier community. Through this Network a human bridge is created to connect the healthcare system with the community. The primary connection is between a hospital-based Faith Community nurse navigator [GMC] and a designated Network liaison [within the faith community].
Through the partnership covenant, roles and responsibilities of both Gwinnett Medical Center and senior clergy of the faith communities are defined. The Network liaisons are trained by the GMC Faith Community nurse Network Navigator to establish a health and wellness ministry in their respective faith communities as a part of the covenant agreement. A connection is established between the GMC Navigator and the Network liaison as well as the faith community. Membership in the Faith Community Network is voluntary and each faith community member may choose to enroll. Enrollment in the Network allows the Navigator to be informed whenever a member accesses hospital services. This in turn allows the nurse Navigator to become part of the member’s care team while hospitalized as well as activates the coordination of the hospital and faith community resources (through the Network liaison) to facilitate the return of the member to optimal health.

The Faith Community Network benefits the members of the faith community through access to health and wellness support such as educational and preventative medicine programs addressing nutrition, physical activity, tobacco use, chronic disease prevention, health fairs, guest speakers, advocacy and a network of aftercare support following an illness or treatment of a medical condition. The Faith Community Network benefits the individual by facilitating the provision of efficient and appropriate care progressing toward a return to optimal health. Members of vulnerable populations and diverse cultures (languages) benefit by being connected to a program that will help them navigate the complexities of the healthcare system and increase their participation in healthy living practices. The healthcare system as a whole and society in general benefit from the decreased utilization of resources and costs associated with healthcare and hospital admissions.

Implementation Update: Since last year’s report, GMC has established covenant partnerships with sixteen faith communities. These churches are Christ the Lord Lutheran Church, Lawrenceville First United Methodist Church, Lawrenceville First Baptist Church, Hamilton Mill United Methodist Church, Holy Cross Anglican Church, Presbyterian Church of the Redeemer, Hopewell Missionary Baptist, Berean Christian Church, Salem Missionary Baptist Church, Faith Community Church, Amazing Grace Lutheran Church, Lawrenceville First Christian Church, Bethesda International and Missionary Church, New Jerusalem Baptist Church, McKendree United Methodist and Perimeter Church-Duluth/Lawrenceville parish. There are four churches that we are in the process of discussing the Network program with the possibility of adding them as members. These churches are St. Lawrence Catholic Church, Snellville First Baptist Church, Simpsonwood United Methodist Church and Good Shepherd Presbyterian Church. We are also networking with the pastor in charge of Presbyterian churches in the Gwinnett area through the Greater Presbytery of Atlanta to disseminate information about the Faith Community Network. In addition, we are working to bring the Faith Community Network to faith-based businesses such as Brookdale Independent Living and Peachtree Christian Health Adult Day Program.

There are presently over 2,000 members of the Network from our community. Network liaisons from each of the faith communities have been trained and have established wellness ministries and have implemented wellness programming at their places of worship. Examples of programs that have been started are a class on Advance Directives and on-going grief and caregiver support groups. There have been 277 member encounters (actual hospitalizations) since the Network inception and each has received follow-up care through the Network liaisons and appropriate care teams from their respective faith communities. The mean age of hospitalized Network members is 75.5 and all are a part of a vulnerable population. In July 2014, the Network liaisons began reporting member contacts monthly, which include hospital visits, home visits, phone contacts, meals delivered and transportation provided. They also report the number of contacts made
through health promotion programming and health screenings. The combined total contacts were 17,229 for all Network churches, July 1, 2017 through June 30th, 2018 [FY 2018]. The Faith Community Network nurse navigator collects data on hospital visits, in-patient counseling, pastoral care, patient education, community building, community support, professional education and referrals to hospital and community resources. The combined total number of contacts made by the nurse navigator was 1,773 July 1, 2017-June 30th, 2018 [FY 2018].

**Sports Medicine Program**

GMC’s Sports Medicine Program was established with the goal of improving the level of care and access to care provided to athletes in Gwinnett County. The program has implemented a county-wide concussion testing program called ImPACT. This initiative provided neuro-cognitive baseline testing for 21 county high schools, three private schools, one local college, 27 county middle school basketball and cheerleading teams, local recreational soccer leagues, local recreational ice and roller hockey leagues the local youth football association, local police/fire departments and adult recreation leagues. This concussion program touched every high school football, basketball and soccer player as well as a large quantity of youth athletes in the county. More than 50,000 baseline tests were provided since 2010.

Through the program, GMC collaborates with all of the county high schools in Gwinnett County and provides full-time certified athletic trainers to 16 high schools in Gwinnett County (13 public and three private) in addition to one high school in a surrounding county. To ensure comprehensive and quality care of our community, 14 of those 17 high schools are provided two athletic trainers due to the large and continuously growing population of athletes. This ensures comprehensive and quality care.

In fiscal year 2018, our certified athletic trainers provided direct on-site care in approximately 62,000 encounters, resulting in more than 1.4 million contacts for the year. The program has over seven million program contacts since 2005.

GMC’s Sports Medicine Support department includes approximately 66 certified athletic trainers (38 full-time and the remaining staff are provided as needed). Under the direction of the Sports Medicine Committee physicians, the athletic trainers are responsible for the care of local injured athletes, from adolescents to geriatrics, at community sporting events. The athletic trainers assess, educate, instruct and treat athletes with movement dysfunction, emergency injuries or physical disabilities, both acute and chronic. The athletic trainers administer immediate, on-site medical care and are developing an on-going plan of care based on the nature of the injury, including but not limited to: complete on-site injury rehabilitation, post-surgical care, strength and conditioning and individualized at home exercise programs.

**Goals for fiscal year 2019:**

- Continue providing coverage in 17 local high schools with a goal of adding at least one Certified Athletic Trainer to each of the six county high schools we currently do not provide coverage.

- Promote SAFE schools as selected by our athletic training governing Board of Certification

- Monitor/Improve use of the county-wide concussion program.
• Successfully maintain a county-wide heat illness prevention program/policy.

• Maintain and improve an injury tracking surveillance program to improve delivery of services.

• Provide a High School Symposium to educate local high school students.

• Provide Gwinnett Football League parent education events.

• Provide physician education and grow needed awareness through CME offerings.

• Provide one large CPR and education clinic to local high school coaches.

• Provide community awareness about concussions through scholastic offerings and career fairs.

• Provide community awareness about injury prevention through educational offerings and marketing booths.

• Increase access and levels of specialized medical care to athletic populations in Gwinnett County and metro Atlanta by use of Telemedicine service.

• Extend services to surrounding counties and organizations that have a recognized need.

• Implemented new standards for the Gwinnett Football League by adding Safety Coaches and new educations for coaches, parents, and athletes.

• Added quality indicators for our SM program that includes patient satisfaction, athlete safety, and injury prevention measurements.

• Implement Process Improvements across all GMC schools which leads to a standardized continuity of care across all GMC schools and locations.

• Yearly Interval training for staff.

Public Relations and Community Affairs

The Gwinnett Medical Center Public Relations and Community Affairs department’s tactical plans for community involvement are outlined below. This department’s goal is to accurately reflect GMC’s strategic system identity of transforming healthcare to the community. This plan is executed through community sponsorships and speaking engagements.

The goals of speaking engagements and forums are to:

• Encourage proactive healthcare among consumers in the primary service area in an effort to avoid prolonged hospital stays.

• Use representatives and experts that offer a personal educational link between the community and our System by providing relevant content.
Inform the community of available services and facility locations.

Introduce physicians and professionals practicing at GMC facilities to the community.

Programs:

Community education programs and speaking engagements are presented by experts on various health education, wellness and prevention topics. Speakers include physicians and other members of the clinical staff.

- August 2018: Gwinnett Chamber Button Down Dash and Gwinnett County Community Health Fair.
- September 2018: Case Management Association Meeting at The Shepherd Center, Suwanee Festival, Duluth Fall Festival and Johns Creek Chamber Annual Meeting.
- October 2018: Norcross Art Splash & Wine Festival, Fall into Health Senior Wellness Fair, Breathe Better Gwinnett, Great Days of Service, Paint Gwinnett Pink, GMC Day at the Junior Achievement Discovery Center in Gwinnett, Gwinnett County Community Health Fair, Gwinnett County Senior Provider Network, Korean American Association of Greater Atlanta.
- November 2018: Gwinnett Medical Center Annual Stroke Conference, Gwinnett County Community Health Fair, Peach State Chili Cook Off, Faith, Healing and Opioids: A Holistic View of the Opioid Crisis, GMC Day at the Junior Achievement Discovery Center in Gwinnett, Suwanee Classic Car Show.
- December 2018: Peachtree Corners Business Association End of Year Celebration.
- January 2019: Leadership Gwinnett, Gwinnett Senior Provider Networking Meeting, GMC Day at the Junior Achievement Discovery Center in Gwinnett.
- February 2019-: Suwanee Sweetheart Sprint.
- March 2019: Colon Cancer Awareness “Ask Me Why I’m Blue” Day, Global Partnership for Telehealth Conference, Parkview High School, Johns Creek Chamber Breakfast.
- April 2019: Mitsubishi Classic Golf tournament and Johns Creek Chamber Golf Tournament, City of Sugar Hill Health Fair, “Strollin’ 4 the Colon” at Sugarloaf Mills, March of Dimes.
- May 2019: Trauma Awareness Month, Gwinnett County Community Health Fair, Suwanee Jazz Fest, Gwinnett Chamber of Commerce’s Gwinnett leadership Organization for Women.

The GMC Speaker’s Bureau presents seminars on various health education and prevention topics. Speakers include physicians and other members of the clinical staff.
Unmet Community Needs

When gathering input from community members through focus groups, community service organizations representatives and key informant interviews, our community identified needs in areas affecting quality of life, community relations and engagement, economic and financial stability, education, safety, youth, as well as health and wellness. The leading concerns were transportation and road congestion; community communication and engagement; increasing homelessness and affordable housing; jobs that don’t cover the cost of living; lack of diversity in community leadership; residents without adequate health insurance. These community needs are not being addressed directly by the hospital because these needs are outside the hospital’s scope of practice and the hospital does not have resources to address them. However, as a member organization of the Gwinnett Coalition for Health and Human Services we participate in Coalition initiatives that strive to improve these issues in collaboration with others in our community.

From a health perspective, lack of adequate dental care for residents without insurance, lack of access to medical care for individuals with Medicaid or some other types of insurance and lack of mental health services were identified needs by community representatives. While hospital leadership agrees that adequate dental care for residents without insurance is an issue, addressing this issue is outside the hospital’s scope of practice. The Coalition’s Health and Wellness Committee is aware of this problem and dental care is being provided on a sliding-scale at Good Samarian Community Clinic. The American Dental Association’s Gwinnett chapter is also addressing this issue. Physicians determine their participation in insurance practices.

There are identified community health needs in which our hospitals only provide minimal support because we do not have designated treatment units or outreach programs for these conditions. Although we triage patients with behavioral and mental health conditions and substance abuse problems in our emergency departments, our organization does not have treatment units for these conditions. In 2017 a mental health holding unit was opened near the emergency department. This holding unit is not intended to provide treatment but is intended to provide patients with a place to wait for placement in an appropriate facility. However, for medically indigent patients who meet certain criteria, GMC has a program to assist these patients in receiving care at a nearby psychiatric facility. Our Faith Community Nursing program interfaces with a number of community churches and other outreach agencies to provide education and support groups for many of these conditions. SummitRidge Hospital in Lawrenceville and Lakeview Behavioral Health are private for-profit psychiatry and additional medicine facilities. Additionally, the state of Georgia provides mental health services through ViewPoint Health (formerly known as Gwinnett Rockdale Newton Community Service Board).

GMC-Lawrenceville has a Level III Neonatal Intensive Care Unit and a 12-bed pediatric emergency department; however, the hospital does not have a primary focus on inpatient pediatrics. Gwinnett County has a wide range of pediatric healthcare services available through Children’s Healthcare of Atlanta. The Sport’s Medicine program is a community outreach program that provides sports medicine trainers for youth in local high schools and community sports organizations.
Implementation Strategy

A team of department leaders and healthcare specialists completed a series of meetings that discussed, developed and evaluated implementation strategies for our identified community health needs. The outcome of those meetings was the compilation of a table of implementation strategies. The table identifies programs, community collaborations and programs under development for the following areas:

Manage Health Conditions and Chronic Disease Treatments

- Provide Emergency and Trauma services for acute conditions and injuries
- Provide Women's Services associated with pregnancy and childbirth
- Provide services to treat and manage chronic diseases and acute conditions
- Provide services to the non-English speaking population

Improve Access to Care

- Provide diagnostic services for the community
- Collaborate with community healthcare providers to improve access to care
- Collaborate with community organizations for access to treatment of behavioral health and mental disorders
- Collaborate with community organizations for access to services for persons with disabilities

Prevent Chronic Diseases and Increase Wellness

- Collaborate with community organizations to increase physical activities and healthy eating
- Collaborate with community organizations to raise healthy kids
- Collaborate with community organizations to promote healthy aging
- Collaborate with community organizations to prevent and detect chronic disease
**Need: 1. Manage Health Conditions and Chronic Disease Treatment**  
1.1. Provide Emergency and Trauma services for acute conditions and injuries

Reporters: Mary Cooper, Becky Weidler, Gina Solomon, Dwayne Moran, Anita Parks and Cheryl Wunsch

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life Net program (Gwinnett and Barrow Counties)</td>
<td>One Call program</td>
<td></td>
</tr>
<tr>
<td>Trauma Nurse Core Course (community)</td>
<td>Emergency Preparedness</td>
<td></td>
</tr>
<tr>
<td>CME: Department of Emergency Medicine</td>
<td>FCN: Blood Drives (American Red Cross and Life South)</td>
<td></td>
</tr>
<tr>
<td>CME: Trauma Rounds</td>
<td>FCN: Network Church Liaison Outreach</td>
<td></td>
</tr>
<tr>
<td>CME: Complex Facial Trauma</td>
<td>Stop the Bleed program</td>
<td></td>
</tr>
<tr>
<td>FCN: CPR/AED training (faith communities)</td>
<td>Regional Trauma Plan</td>
<td></td>
</tr>
<tr>
<td>FCN: Basic First Aid course</td>
<td>ATLS Program, Gwinnett Tech</td>
<td></td>
</tr>
<tr>
<td>FCN: Mental Health First Aid training course</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trauma Ortho Clinic</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ATCN Program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fall Prevention Classes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Need: 1. Manage Health Conditions and Chronic Disease Treatment**

1.2. Provide Women’s Services associated with pregnancy and childbirth

Reporters: Sheila Warren, Anita Parks and Cheryl Wunsch

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
</table>
| - Parent Review Weekly Email  
- Classes  
  - Healthy Childbirth  
  - Newborn Care  
  - Big Brothers & Big Sisters To Be  
  - Breastfeeding Basics  
  - Car Seat Class  
  - Infant CPR & Safety  
  - Babysitter Training  
  - Car Seat Safety Checks  
  - Facility Tours and Information Sessions  
- Lactation Support and Lactation Help line  
- NICU Parents Support Group  
- Perinatal Loss Support Group  
- Breastfeeding Support Group  
- Health Navigator to develop and provide educational programs to extend to interests of all life stages of women.  
- CME: OB/GYN  
- Perinatal Loss Bereavement Coordinator  
- Designated Baby-Friendly Hospital | - Women’s Advisory Council to provide advice to the hospital regarding the special needs of women in our community.  
- Georgia Hospital Association and March of Dimes programs to reduce and ultimately eliminate elective deliveries prior to 39 weeks.  
- FCN: Lactation Support Policies for Individual Faith Communities | - Plan and construct a state of the art facility to provide services for Obstetrical and Neonatal patients |
**Need: 1. Manage Health Conditions and Chronic Disease Treatment**

**1.3. Provide services to treat and manage chronic diseases and acute conditions**

**1.3.1. Heart Disease**

Reporters: Mary Cooper, Jayne Kulp, Leslie Holcomb, Mary Hudgins, Sloan Stephens, Jolly Parayil, Kimberly Joens, Beth Hardy, Sharde Carter, Anita Parks, Cris Hartley and Nancy McCormick

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>• STEMI alert preparedness coordinated with EMS</td>
<td>• Freshstart: Outpatient Smoking Cessation Program (American Cancer Society and Georgia Department of Public Health)</td>
<td>• Heart Failure</td>
</tr>
<tr>
<td>• Cardiac Catheterization Lab</td>
<td>• Door to Balloon Time for all patients with called ST-elevation MI (STEMI)</td>
<td></td>
</tr>
<tr>
<td>• Cardiac Cath</td>
<td>• Free and discounted medication program with medication providers</td>
<td></td>
</tr>
<tr>
<td>• PCI</td>
<td>• Community Round Table (Home Health and Skilled Nursing)</td>
<td></td>
</tr>
<tr>
<td>• Cardiac Device implantation</td>
<td>• United Way Americorps</td>
<td></td>
</tr>
<tr>
<td>• TAVR - Transcatheter Aortic Valve Replacement</td>
<td>• FCN: Network Church Liaison Outreach</td>
<td></td>
</tr>
<tr>
<td>• Dedicated Electrophysiology Services</td>
<td>• Community Health Fairs</td>
<td></td>
</tr>
<tr>
<td>• Heart Failure Class</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Cardiac Patient Education Library-GHS Web Site</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Cardiac Rehabilitation Phase I, II and III</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Medical Nutrition Therapy for Lipid, High Blood Pressure, Weight Management</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Care Transition Coordinators</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• CME: Department of Medicine/Cardiology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Chest Pain Certification</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Need: 1. Manage Health Conditions and Chronic Disease Treatment
   1.3. Provide services to treat and manage chronic diseases and acute conditions
   1.3.2. Cancer

Reporters: Domingo Valpuesta, Amy McEachin, Brad Humphrey, Angel Roussie, Anita Parks, Beth Hardy, Sharde Carter, Zach Houpaugh, Mary Cooper and Cheryl Wunsch

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Low Dose CT Lung Cancer Screening</td>
<td>• Freshstart: Outpatient Smoking Cessation Program (American Cancer Society and Georgia Department of Public Health)</td>
<td></td>
</tr>
<tr>
<td>• Oncology Research (including Duke Affiliation)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Oncology Rehab</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Palliative Care Program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• High Risk Assessment Genetic Counseling</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• CME: Tumor Conference</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• CME: Interdisciplinary Breast Cancer Pre-Treatment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• CME: Multi-disciplinary Lung Cancer Screening</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• CME: Oncology Lecture Series</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• CME: Neuro Oncology Tumor Conference</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• FCN: Cancer Support Groups</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Prostate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Breast</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Colorectal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Women’s Support Group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Hispanic Support Group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Cancer Survivorship Plan</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• NAPBC Certification</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• COC Certification</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Lung Screening Center of Excellence</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Need: 1. Manage Health Conditions and Chronic Disease Treatment
1.3. Provide services to treat and manage chronic diseases and acute conditions
1.3.3. Stroke

Reporters: Mary Cooper, Susan Gaunt, Kim Smirh, Anita Parks, Sharde Carter, Tracy Azar, Mary Cooper and Cheryl Wunsch

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Advanced Primary Stroke Center Certification</td>
<td>• Professional Education</td>
<td>• Neuro Intervention</td>
</tr>
<tr>
<td>• Stroke Response Teams</td>
<td>• Stroke Conference</td>
<td>• Brain Path-Technology</td>
</tr>
<tr>
<td>• Stroke Awareness</td>
<td>• CME offerings</td>
<td></td>
</tr>
<tr>
<td>• Education and Presentations</td>
<td>• Professional Organization Presentations</td>
<td></td>
</tr>
<tr>
<td>• Screenings</td>
<td>• Genentech Education Programs</td>
<td></td>
</tr>
<tr>
<td>• Stroke Peer Visitors</td>
<td>• Georgia Stroke Professional Alliance</td>
<td></td>
</tr>
<tr>
<td>• CME: Medicare Neurology</td>
<td>• Interventional Stroke Care (Grady, Emory and Wellstar collaboration)</td>
<td></td>
</tr>
<tr>
<td>• FCN: Stroke Awareness FAST Program</td>
<td>• Door-to-Needle Time for Stroke Care (Community EMS, Eastside and Johns Creek Collaboration)</td>
<td></td>
</tr>
<tr>
<td>• FCN: Stroke Awareness presentations</td>
<td>• CME: Annual Neuro (includes Stroke) Conference</td>
<td></td>
</tr>
<tr>
<td>• Neuroscience Patient Reunion</td>
<td>• FCN: Network Church Liaison Outreach</td>
<td></td>
</tr>
<tr>
<td>• Neuro Intervention</td>
<td>• Women’s Advisory Council</td>
<td></td>
</tr>
<tr>
<td>• Brain Path-Technology</td>
<td>• Stroke Net Research Network</td>
<td></td>
</tr>
<tr>
<td>• Minimally invasive brain surgery technology</td>
<td>• Community health fairs</td>
<td></td>
</tr>
<tr>
<td>• Community health fairs</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Need: 1. Manage Health Conditions and Chronic Disease Treatment
   1.3. Provide services to treat and manage chronic diseases and acute conditions
   1.3.4. Diabetes

Reporters: Mary Cooper, Cris Hartley, Debra Proulx and Anita Parks

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Diabetes Self-Management Education</td>
<td>• Gwinnett Takes on Diabetes – November</td>
<td></td>
</tr>
<tr>
<td>• Spanish Diabetes Self-Management Education Class</td>
<td>• Diabetes Education Grant Program</td>
<td></td>
</tr>
<tr>
<td>• Gestational Diabetes Management Class and Individual Consultations</td>
<td>• University of Georgia</td>
<td></td>
</tr>
<tr>
<td>• Insulin Pump Training</td>
<td>• FCN: Network Church Liaison Outreach</td>
<td></td>
</tr>
<tr>
<td>• Pre Diabetes Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• CME: Diabetes/Endocrinology (Primary Care Grand Rounds)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Center for Weight Management – Supervised Medical Weight Loss</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Amputee Support Group</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Need: 1. Manage Health Conditions and Chronic Disease Treatment
   1.3. Provide services to treat and manage chronic diseases and acute conditions
       1.3.5. Respiratory Conditions

Reporters: Sheryl Stephens, Paige Hull, Anita Parks, Pam Garrett, Mary Cooper, Cheryl Wunsch and Nancy McCormick

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Pulmonary Rehabilitation Phase I, II and III</td>
<td>• FCN: Tobacco-Free Campus Policies (Church-Based)</td>
<td></td>
</tr>
<tr>
<td>• Smoking Cessation Counseling</td>
<td>• Freshstart: Outpatient Smoking Cessation Program (American Cancer Society and Georgia Department of Public Health)</td>
<td></td>
</tr>
<tr>
<td>• Obstructive Sleep Apnea Education</td>
<td>• FCN: Network Church Liaison Outreach</td>
<td></td>
</tr>
<tr>
<td>• CME: Intensivists (Pulmonary)</td>
<td>• Breathe Better Gwinnett</td>
<td></td>
</tr>
<tr>
<td>• Pulmonary Health Program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Transitions coordination for pulmonary patients</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Need: 1. Manage Health Conditions and Chronic Disease Treatment
   1.3. Provide services to treat and manage chronic diseases and acute conditions
       1.3.6. Orthopedic Conditions

Reporters: Nadirah Burgess, Cindy Kennedy, Linda Barberi and Traci Dowdall

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>• JK Disease Specific Care Certified Total Knee Replacement Program</td>
<td>• Professional Education</td>
<td></td>
</tr>
<tr>
<td>• JK Disease Specific Care Certified Total Hip Replacement Program</td>
<td>• Professional Organization Presentations</td>
<td></td>
</tr>
<tr>
<td>• Joint Class</td>
<td>• CME Offerings</td>
<td></td>
</tr>
<tr>
<td>• Preoperative Patient Education Presentation</td>
<td>• Orthopedic Certified Nurse Review Course</td>
<td></td>
</tr>
</tbody>
</table>
**Need: 2. Improve Access to Care**

2.1. Provide professional education

Reporters: Linda Horst, Dr. Mark Darrow and Anne Kramer

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Graduate Medical Education Program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Academic Internal Medicine Partners</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Professional Training</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Chaplaincy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Dietitians</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Diabetes Nursing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Cardiology Technicians</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Corporate Counsel</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Emergency Medical Technicians</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Exercise and Health Science</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Health Information Management</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Laboratory Technologists and Phlebotomists</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Nuclear Medicine Technologists</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Nursing Informatics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Oncology Nursing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Pharmacists</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Radiology Technicians</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Rehabilitation Physical Therapists (Including Occupational and Speech)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Respiratory Therapists</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Registered Nursing (Undergraduate and Graduate)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Social Workers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Surgical Technicians</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Ultrasound Technologists</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Midlevel Students</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Sports Medicine</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- CME: Primary Care Grand Rounds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Graduate Medical Education Program (Specialties)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Need: 2. Improve Access to Care

2.2. Collaborate with community physicians to improve access to care

Reporters: Angel Roussie, Kelly Dunham, Beth Hardy, Janet Schwalbe, Joanna Phillips, Mary Cooper, Cathie Brazell, Anita Parks, Domingo Valpuesta, Cheryl Wunsch and Sheila Warren

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physician Liaisons</td>
<td>Physician Community Needs Assessment</td>
<td></td>
</tr>
<tr>
<td>Women’s Health Navigator</td>
<td>Recruiting Community Physicians through income guarantees, employment, relocation assistance, signing bonuses and recruiter fee assistance</td>
<td></td>
</tr>
<tr>
<td>Cancer Navigators</td>
<td>Neonatal Transport Services to outlying community hospitals promoting access to our advanced technology and neonatal specialists.</td>
<td></td>
</tr>
<tr>
<td>Continue to recruit and assist OB/GYN physicians to recruit members to their groups in order to ensure that there are an adequate number of physicians to care for patients in Gwinnett County.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Graduate Medical Education Program (Strickland Family Medicine Center)</td>
<td>Relay for Life (American Cancer Society)</td>
<td></td>
</tr>
<tr>
<td>Graduate Medical Education Program (Academic Internal Medicine Partners)</td>
<td>GMC Health Talks</td>
<td></td>
</tr>
<tr>
<td>CME: Primary Care Summit</td>
<td>One Call transfer system established to assist with regional trauma and STEMI transfers</td>
<td></td>
</tr>
<tr>
<td>FCN: Network Navigator</td>
<td>Oncology Community Outreach Navigator</td>
<td></td>
</tr>
<tr>
<td>Back Pain Center</td>
<td>ChoiceOne Urgent Care Centers</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Norcross Cooperative Ministries (Good Samaritan)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Breathe Better Gwinnett</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Strollin’ 4 the Colon</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Women's Wellness Fair</td>
<td></td>
</tr>
<tr>
<td></td>
<td>EMS/Air Transport</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Paint Gwinnett Pink</td>
<td></td>
</tr>
</tbody>
</table>
Need: 2. Improve Access to Care

2.3. Collaborate with community organizations for access to treatment of behavioral health and mental disorders

Reporters: Becky Weidler, Kelly Levine, Nancy McCormick, Mary Cooper and Cheryl Wunsch

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Mental Health professionals assess medically-cleared patients in the ED for further treatment and disposition.</td>
<td>• For medically indigent patients who meet certain criteria, GMC has a program to assist these patients in receiving care at a psychiatric facility.</td>
<td></td>
</tr>
<tr>
<td>• Psychiatric CNS evaluation of mental health patients that are in the ED more than 24 hours</td>
<td>• Freshstart: Outpatient Smoking Cessation Program (American Cancer Society and Georgia Department of Public Health)</td>
<td></td>
</tr>
<tr>
<td>• Smoking Cessation Counseling</td>
<td>• FCN: Faith Community Nurse Navigator</td>
<td></td>
</tr>
<tr>
<td>• FCN: Emotional and Mental Health programs</td>
<td>• FCN: Network Church Liaison Outreach</td>
<td></td>
</tr>
<tr>
<td>• FCN: Grief and Bereavement support groups</td>
<td>• Navigate Recovery Peer Support (ED)</td>
<td></td>
</tr>
</tbody>
</table>
**Need: 2. Improve Access to Care**

2.4. Collaborate with community organizations for access to services for persons with disabilities

Reporters: Brad Humphrey, Angel Roussie, Kristin Crea, Michelle Graves and Mary Cooper

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Occupational Therapy, Speech Pathology and Physical Therapy</td>
<td>• Amputee Support Group (Procare)</td>
<td>• Amputee Support Group (Procare)</td>
</tr>
<tr>
<td>• Lymphedema Therapy</td>
<td>• Orthotist/prosthetist</td>
<td>• Orthotist/prosthetist</td>
</tr>
<tr>
<td>• Oncology Rehab</td>
<td>• Athletic Trainers at high schools for school athletes for injury prevention and concussion</td>
<td>• Athletic Trainers at high schools for school athletes for injury prevention and concussion</td>
</tr>
<tr>
<td>• Amputee Rehab</td>
<td>• FCN: Network Church Liaison Outreach</td>
<td>• FCN: Network Church Liaison Outreach</td>
</tr>
<tr>
<td>• Vestibular Rehab</td>
<td>• Stroke Support Group</td>
<td>• Stroke Support Group</td>
</tr>
<tr>
<td>• Survivorship Training and Rehab (STAR) Certifications</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Concussion Institute</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Stroke Peer Visitor Program</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Need: 3. Prevent Chronic Diseases and Increase Wellness
   3.1. Collaborate with community organizations to increase physical activities and healthy eating

Reporters: Mary Cooper, Cris Hartley, Beth Hardy, Emily Frost, Kristin Crea, Cheryl Wunsch, Mary Hudgins, Jolly Parayil, Pam Garrett, Sheila Warren and Debra Proulx

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vim and Vigor Articles</td>
<td>FCN: Network Church Liaison Outreach</td>
<td></td>
</tr>
<tr>
<td>Medical Nutrition Therapy</td>
<td>Oh Baby Fitness</td>
<td></td>
</tr>
<tr>
<td>for obesity management</td>
<td>Paint Gwinnett Pink</td>
<td></td>
</tr>
<tr>
<td>Metabolic Testing</td>
<td>Strollin’ 4 the Colon</td>
<td></td>
</tr>
<tr>
<td>FCN: First Place Health, Weight Watchers and Made to Crave</td>
<td>Hearth Health Education</td>
<td></td>
</tr>
<tr>
<td>FCN: Healthy Cooking/Living/Eating groups</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FCN: Exercise</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fall Prevention</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Joint Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pulmonary Health Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heart Health Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stroke Awareness Talks</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bone Health</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Need: 3. Prevent Chronic Diseases and Increase Wellness

3.2. Collaborate with community organizations to raise healthy kids

Reporters: Kristin Crea, Sharde Carter, Beth Hardy, Cris Hartley, Anita Parks, Dera Proalx, Cheryl Wunsch, Mary Cooper and Sheila Warren

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Sports Trainers in area schools and parks</td>
<td>• CPR certification for coaches and student training (HS &amp; college)</td>
<td>• Junior Achievement</td>
</tr>
<tr>
<td>• Pre-participation physicals</td>
<td>• Medical Explorers</td>
<td>• FCN: Stewards of Children Training</td>
</tr>
<tr>
<td>• Injury evaluations</td>
<td>• ImPACT (Concussion Testing program)</td>
<td></td>
</tr>
<tr>
<td>• Injury treatment and rehabilitation</td>
<td>• CME: Department of Pediatrics</td>
<td></td>
</tr>
<tr>
<td>• Injury clinic</td>
<td>• FCN: Divorce Care for Kids</td>
<td></td>
</tr>
<tr>
<td>• Educational Seminars</td>
<td>• FCN: Back to School Health Fair/Backpack Ministry</td>
<td></td>
</tr>
<tr>
<td>• Concussions</td>
<td>• FCN: Safe Sanctuaries</td>
<td></td>
</tr>
<tr>
<td>• Heat Illness</td>
<td>• Babysitter Training</td>
<td></td>
</tr>
<tr>
<td>• Nutrition</td>
<td>• Carseat Class</td>
<td></td>
</tr>
<tr>
<td>• Medical Explorers</td>
<td>• Medical Weight Management for Kids</td>
<td></td>
</tr>
<tr>
<td>• ImPACT (Concussion Testing program)</td>
<td>• CPR certification for coaches and student training (HS &amp; college)</td>
<td></td>
</tr>
<tr>
<td>• CME: Department of Pediatrics</td>
<td>• Junior Achievement</td>
<td></td>
</tr>
<tr>
<td>• FCN: Divorce Care for Kids</td>
<td>• FCN: Stewards of Children Training</td>
<td></td>
</tr>
<tr>
<td>• FCN: Back to School Health Fair/Backpack Ministry</td>
<td>• Babysitter Training</td>
<td></td>
</tr>
<tr>
<td>• FCN: Safe Sanctuaries</td>
<td>• Carseat Class</td>
<td></td>
</tr>
<tr>
<td>• Babysitter Training</td>
<td>• Medical Weight Management for Kids</td>
<td></td>
</tr>
<tr>
<td>• Carseat Class</td>
<td>• FCN: Stewards of Children Training</td>
<td></td>
</tr>
<tr>
<td>• Medical Weight Management for Kids</td>
<td>• Junior Achievement</td>
<td></td>
</tr>
</tbody>
</table>
Need: 3. Prevent Chronic Diseases and Increase Wellness

3.3. Collaborate with community organizations to promote healthy aging

Reporters: Mary Cooper, Beth Hardy, Nadirah Burgess, Susan Gaunt, Pam Garrett, Jolly Parayil, Mary Hudgins, Domingo Valpuesta, Amy McEachin, Emily Frost, Gina Solomon, Cheryl Wunsch, Tim Gustavson and Sharde Carter

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>• PrimeTime Health Membership</td>
<td>• Annual Senior Fall Health Fair at Bethesda Senior Center – providing hospital information on various services</td>
<td>• A Matter of Balance</td>
</tr>
<tr>
<td>• Vim and Vigor Articles</td>
<td>• Senior Centers</td>
<td>• Car Fit</td>
</tr>
<tr>
<td>• AARP: Senior Driver Safety</td>
<td>• Assisted Living Facilities</td>
<td></td>
</tr>
<tr>
<td>Course</td>
<td>• Independent Living Facilities</td>
<td></td>
</tr>
<tr>
<td>• FCN: Caregiver Classes</td>
<td>• Speakers Bureau</td>
<td></td>
</tr>
<tr>
<td>• FCN: Protecting yourself from</td>
<td>• Colorectal Cancer Screening Event kits</td>
<td></td>
</tr>
<tr>
<td>Falls &amp; other Safety Tips</td>
<td>• FCN: Network Church Liaison Outreach</td>
<td></td>
</tr>
<tr>
<td>• FCN: Alzheimer’s Support Group/Respite Care</td>
<td>• Community Health Fairs</td>
<td></td>
</tr>
<tr>
<td>• Fall Prevention</td>
<td>• FCN: Navigator – Fall Prevention Education (Brenau University collaboration)</td>
<td></td>
</tr>
<tr>
<td>• Joint Classes</td>
<td>•</td>
<td></td>
</tr>
<tr>
<td>• Pulmonary Health</td>
<td>•</td>
<td></td>
</tr>
<tr>
<td>• Stroke Health</td>
<td>•</td>
<td></td>
</tr>
<tr>
<td>• Bone Health</td>
<td>•</td>
<td></td>
</tr>
<tr>
<td>• Heart Health</td>
<td>•</td>
<td></td>
</tr>
</tbody>
</table>
Need: 3. Prevent Chronic Diseases and Increase Wellness  
3.4. Collaborate with community organizations to prevent and detect chronic disease  
3.4.1. Heart Disease

Reporters: Sloan Stephens, Mary Hudgins, Nancy McCormick, Nancy McCormick, Sheila Warren, Mary Cooper, Cheryl Wunsch, Sharde Carter and Jolly Parayil

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Health Risk Assessments</td>
<td>• Community Day with EMS (CPR training and B/P Screenings)</td>
<td>• Heart Failure Support Group</td>
</tr>
<tr>
<td>• Cardiac Rehab: Phase I, II and III</td>
<td>• Senior Health Fair – Bethesda Park, cardiac risk factors and healthy living</td>
<td>• Heart Failure Clinic</td>
</tr>
<tr>
<td>• Smoking Cessation Counseling</td>
<td>• Freshstart: Outpatient Smoking Cessation Program (American Cancer Society and Georgia Department of Public Health)</td>
<td></td>
</tr>
<tr>
<td>• Teaching Early Heart Attack Care (EHAC)</td>
<td>• FCN: Network Church Liaison Outreach</td>
<td></td>
</tr>
<tr>
<td>• FCN: AED/CPR</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• FCN: B/P Screening</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• FCN: Health Fairs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• GMC Health Talks</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Heart Health Education</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Need: 3. Prevent Chronic Diseases and Increase Wellness

#### 3.4. Collaborate with community organizations to prevent and detect chronic disease

#### 3.4.2. Cancer

Reporters: Nancy McCormick, Sloan Stephens, Sharde Carter, Beth Hardy, Angel Roussie, Amy McEachin, Cheryl Wunsch and Mary Cooper

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Colorectal Cancer Prevention programs</td>
<td>• Freshstart: Outpatient Smoking Cessation Program (American Cancer Society and Georgia Department of Public Health)</td>
<td></td>
</tr>
<tr>
<td>• Health Risk Assessments</td>
<td>• Relay for Life Education (American Cancer Society)</td>
<td></td>
</tr>
<tr>
<td>• Cancer Survivorship Class</td>
<td>• Atlanta Legal Aid</td>
<td></td>
</tr>
<tr>
<td>• Healthy Eating</td>
<td>• Health Fairs</td>
<td></td>
</tr>
<tr>
<td>• Smoking Cessation Counseling</td>
<td>• Colorectal Cancer Screening kits</td>
<td></td>
</tr>
<tr>
<td>• Oncology Rehab</td>
<td>• Paint Gwinnett Pink</td>
<td></td>
</tr>
<tr>
<td>• FCN: Colon Cancer &amp; Prevention</td>
<td>• Skin Cancer screening events</td>
<td></td>
</tr>
<tr>
<td>• FCN: Cancer Awareness</td>
<td>• FCN: Network Church Liaison Outreach</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Community Health Fairs</td>
<td></td>
</tr>
</tbody>
</table>

### Need: 3. Prevent Chronic Diseases and Increase Wellness

#### 3.4. Collaborate with community organizations to prevent and detect chronic disease

#### 3.4.3. Stroke

Reporters: Susan Gaunt, Mary Cooper and Cheryl Wunsch

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Stroke Awareness</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Presentations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Stroke Booths</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Stroke Screenings</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Speakers Bureau</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• FCN: Stroke Awareness</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Health Fairs</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Community Education Materials (Genentech)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• FCN: Network Church Liaison Outreach</td>
<td></td>
</tr>
</tbody>
</table>
Need: 3. Prevent Chronic Diseases and Increase Wellness
3.5. Collaborate with community organizations to prevent and detect chronic disease

3.5.4. Diabetes

Reporters: Mary Cooper, Cris Hartley and Cheryl Wunsch

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Medical Nutrition Therapy for obesity management</td>
<td>• FCN: Network Church Liaison Outreach</td>
<td></td>
</tr>
<tr>
<td>• Metabolic Testing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Pre-Diabetes Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• FCN: Diabetes Prevention Class</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Need: 3. Prevent Chronic Diseases and Increase Wellness
3.5. Collaborate with community organizations to prevent and detect chronic disease

3.5.5. Respiratory Conditions

Reporters: Mary Cooper, Sloan Stephens, Pam Garrett, Nancy McCormick and Cheryl Wunsch

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Smoking Cessation Counseling</td>
<td>• Freshstart: Outpatient Smoking Cessation Program (American Cancer Society and Georgia Department of Public Health)</td>
<td></td>
</tr>
<tr>
<td>• Smoking Cessation Counseling Follow Up Phone Calls</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Pulmonary Rehab I, II, and III</td>
<td>• FCN: Network Church Liaison Outreach</td>
<td></td>
</tr>
<tr>
<td>• Pulmonary Health Programs</td>
<td>• Breathe Better Gwinnett</td>
<td></td>
</tr>
</tbody>
</table>

Need: 3. Prevent Chronic Diseases and Increase Wellness
3.5. Collaborate with community organizations to prevent and detect chronic disease

3.5.6. Othopedic Conditions

Reporters: Nadirah Burgess and Traci Dowdall

<table>
<thead>
<tr>
<th>Programs</th>
<th>Community Collaborations</th>
<th>Programs Under Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Bone Health Awareness</td>
<td>• Health Fairs</td>
<td></td>
</tr>
<tr>
<td>• Presentations</td>
<td>• Senior Health Fairs</td>
<td></td>
</tr>
<tr>
<td>• Bone health booths</td>
<td>• Senior Centers</td>
<td></td>
</tr>
<tr>
<td>• Portable bone density screening</td>
<td>• Assisted/Independent Living Facilities</td>
<td></td>
</tr>
</tbody>
</table>