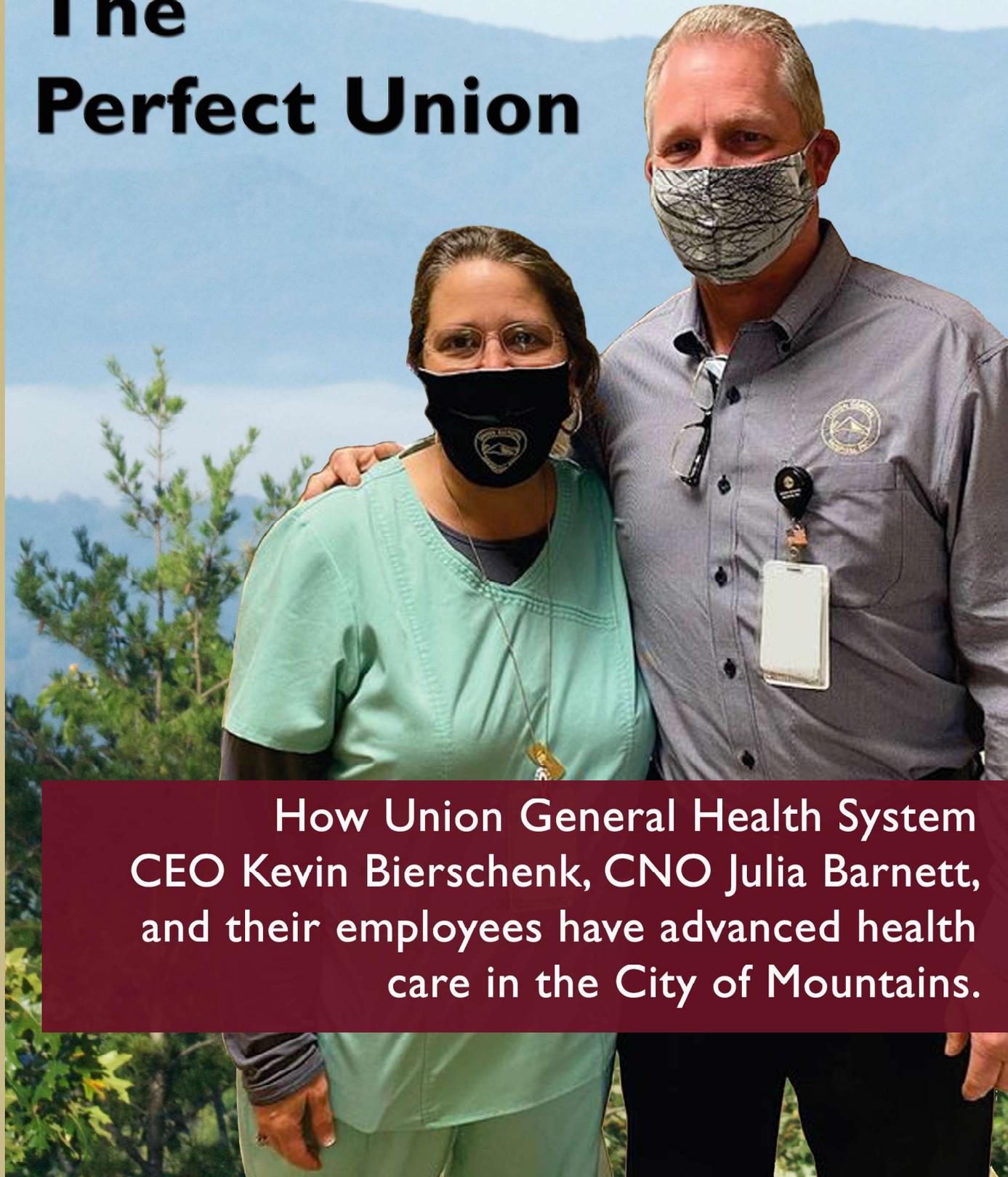


Fall 2020

twentyfourseven

A publication of the Georgia Hospital Association

The Perfect Union



How Union General Health System
CEO Kevin Bierschenk, CNO Julia Barnett,
and their employees have advanced health
care in the City of Mountains.



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2 Executive Corner

2 Letter from the President

4 Cover Story

4 Profile: GHA Chair Kevin Bierschenk

The CEO of Union General Health System has a distinct ability to enhance the longevity of rural hospitals.

8 Our Hospitals

8 The Doctor Will (Virtually) See You Now

The use of telehealth during the COVID-19 pandemic has helped keep the health care wheels turning.

8 Good Neighbors: A Priceless Treasure

How a rural hospital's community relationships proved to be mutually beneficial during COVID-19.

12 Names in the News

16 Features

16 Human Trafficking: Hospitals Often a First Line of Defense

Training, education, and resources can help everyone be vigilant.

33 GHA Now

33 Triple Threat: COVID-19, Flu, and Hurricane Season

Editorial by GHA President and CEO Earl Rogers

12 COVID-19 and Georgia's Hospital Heroes

Governor Issues Proclamation: THANK A HOSPITAL HERO DAY

Executive Corner



By now, it is practically a cliché to say that 2020 is an unprecedented year. When we all welcomed the new year in January, who among us could have predicted what was to come? The COVID-19 pandemic arrived with virtually no warning, turning our world upside down and changing our lives in ways we couldn't have imagined. No one knows this more than Georgia's hospital workers, who had to rapidly implement new protocols, fight an unknown virus, and stretched scarce supplies and equipment, all while working long hours outside their homes while most everyone else sheltered in place.

When COVID-19 first arrived, people were understandably hesitant to leave their houses and go about their day-to-day lives, much less go to routine doctors' appointments, for fear of contracting the coronavirus. But many patients have continued to need care for issues other than COVID-19. For example, heart

attacks, broken bones, surgeries, and other serious health issues don't stop just because COVID-19 is here. Additionally, it is not a good idea to postpone medically necessary treatments, such as knee replacements and important preventive health care. GHA and our hospitals emphasized the message that, even in the midst of COVID-19, hospitals remain safe, reliable sources of care, taking every precaution to keep patients safe. They are extremely diligent about practicing rigorous infection controls and following updated guidance from the Centers for Disease Control and Prevention and the Georgia Department of Public Health. Still, it was evident that certain types of care could be provided virtually and be just as effective as if providers conducted in-person visits. Enter telehealth, an extraordinary answer to the question of how to treat certain patients safely and effectively during this pandemic. You can read about how our hospitals are using telehealth and patients are reaping its benefits on page xx.

Although most of our attention has had to be focused on keeping COVID-19 and its effects at bay, that doesn't mean issues that existed before the pandemic are any less urgent. For example, human trafficking is a critical challenge that many hospitals, communities, and stakeholders have been focused on overcoming for a long time. These groups continue to work persistently to fight the problem and are now dealing with the effects of the coronavirus on the issue. You can read more about what is being done on page xx.

To find out more about your community hospitals, please visit us at www.gha.org.

As we witnessed the heroic work of our hospitals, GHA knew we wanted to do something special to thank them. We expanded our annual Hospital Heroes awards program to honor every hospital worker in Georgia. We established a campaign, #ThankAHospitalHero, to celebrate your hospital staff. We mailed thank you banners to every one of our member health care facilities (you can see pictures of some of these on page xx). We also garnered very special recognition from Gov. Brian Kemp, who issued a proclamation establishing Nov. 13, 2020 as "Thank A Hospital Hero Day." You can see this on page xx.

As of publication, COVID-19 is not letting up. We and our hospitals are tired, but the virus is not. Our hospitals will keep fighting to the end.

To our hospitals, thank you for your dedication, kindness, and determination. We truly appreciate the work of all Georgia's Hospital Heroes and express our sincere gratitude.

Earl Rogers
President and CEO
Georgia Hospital Association

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In September, Bank OZK executives presented a donation to Union General Health System through the Georgia HEART Hospital Program. From L to R: Bronson Lavender, Bank OZK; Lindsey Townsend, Lead, Georgia HEART Rural Hospital Tax Credit Program; Nick Townsend, Union General CFO; Jason Karnes, North Georgia Bank OZK market president, commercial banking; Kevin Bierschenk, Union General CEO; Michael Gay, Union General COO; Brian Reid, Bank OZK.

Profile: GHA Chair Kevin Bierschenk

The CEO of Union General Health System has a distinct ability to enhance the longevity of rural hospitals.

By Erin Stewart

Note: The first part of this article reflects an interview that was conducted in February 2020, before Georgia began dealing with the COVID-19 pandemic. An update related to that can be found at the end of the article.

Born in the hills of South Dakota and growing up in Nebraska, Kevin Bierschenk was always a fan of mathematics; he knew he wanted a career in finance. However, health care finance was not at the top of his mind. In his small community, where he was in a graduating class of only 23 people, he says no one really went to the doctor's office.

"Basically, if you got sick, you got healthy," he said. "I never even went to a hospital until 1993, when my first daughter was born."

Since no one in his family worked in health care and keeping up with well visits wasn't a priority for many people, Bierschenk wasn't exposed to health care very much. After finishing his military career in 1986, he attended the University of South Carolina, earning degrees in

economics and finance and was slowly introduced to a whole new world.

One of his first jobs was with an Atlanta-based company that was one of the first in the nation to write radiology information software. That, he says, is what introduced him to health care and began a journey of building up significant and useful health care experience. From there, he worked as the chief financial officer at a psychiatric hospital with a few locations around Metro Atlanta before moving to St. Simons to work as the CFO for what is now St. Simon's By the Sea. Subsequent years led him to a hospital in Dahlonega, then one in Alabama.

When he reflects on his success, personally and professionally, Bierschenk credits a philosophy he put into practice that is stated in the movie "Remember the Titans," which is, "Attitude reflects leadership."



Kevin Bierschenk

In 2007, he accepted a chief executive officer position at a struggling rural hospital in Eastman, Ga., Dodge County Hospital. Just as today, in 2007, communities could not afford to lose their hospitals. The loss of yet another would have been a devastating blow to the local community. Bierschenk took the helm just in time.

"The hospital was struggling, and they didn't know what the future held," he said. "They had a few million dollars in debt, no cash on hand, and were struggling with volume."

Although Dodge County Hospital is a nonprofit facility, Bierschenk knew what many in health care understand, but the public often does not: Hospitals are a business. They must have enough volume to generate revenue and must work around difficult issues such as providing free and indigent care, which do not bring in revenue. His strategy was simple:

"I handled it as a for-profit hospital," he said. "A hospital, whether it is nonprofit or for-profit, must be run as a business making a profit. You must be able to buy equipment, invest in capital improvements and technology to make sure you have the most up-to-date services available for your community. And you need to be able to pay staff so there are people to take care of the community."

Bierschenk remained at Dodge County Hospital for 12 years. In that time, he created a stronger, more financially stable facility that became a staple in its community. The turnaround was due in part to gaining control of the finances and how they were handled and building up service line offerings, but a large part was due to simple relationships in the community.

"Physician relationships are crucial to a hospital's success."

-Kevin Bierschenk

“Physician relationships are crucial to a hospital’s success,” said Bierschenk. “My team and I made sure to foster these connections and worked on recruiting top doctors who could care for our patients. We wanted to be their hospital of choice in which to work. We made sure they were in a facility where they were satisfied with the work and culture around them.”

Bierschenk also helped the hospital focus on what it could do best, rather than trying to do too many services on limited resources. For procedures or service lines the hospital couldn’t offer, Bierschenk focused on relationships with neighboring hospitals that do fulfill those needs for the community. “We didn’t have to do everything,” he said. “But what we could do, we had to make sure we did well. Let’s be the best at what we can do.”

In his current role as the CEO of Union General Hospital in Blairsville, Georgia, Bierschenk has continued his goals of improving what the hospital can offer to the community. One of the first things he noticed was that the hospital, which has 22 affiliated facilities, including another hospital (Chatuge Regional) and two nursing homes, was not being run as a system. By changing the name to Union General Health System, the organization is branding itself as the premier health care organization of the North Georgia mountains and surrounding communities.

Additionally, Bierschenk is ensuring that the health system is catering to the needs of community residents.

“Because of the large retiree population up here, we’re looking at how we can best take care of those patients, like orthopedics and emergency medical services. “We’re in the process of building a 14,000-square-foot orthopedic office. We just hired a sports medicine fellowship-trained orthopedic surgeon out of Kentucky.”

He also points out the impressive services Union General offers, despite being in a rural area.

“We’re doing stuff here that they’re only doing a few places in the state of Georgia. We’re doing GPS-guided shoulder surgery and anterior hip procedures.”



In March, Union General Hospital celebrated the retirement of Doug Davenport, assistant administrator (second from left). Pictured L to R: Michael Gay, COO; Doug Davenport, former assistant administrator; Lisa Bonham, new assistant administrator; and Kevin Bierschenk, CEO.

“What we could do, we had to make sure we did well. Let’s be the best at what we can do.”

-Kevin Bierschenk

GPS-guided shoulder surgery allows surgeons to understand the anatomy of the shoulder prior to the procedure. They can plan a more accurate and precise surgery in real time, making any adjustments needed.

Additionally, both of Union General’s nursing homes are highly rated by the Centers for Medicare and Medicaid Services (CMS).

Being able to offer these types of services is one reason Bierschenk feels confident in the hospital’s efforts to expand into North Carolina, the state border of which is only a few miles up the road, through the building of a new clinic.

“We want to be a regional hospital,” he said.

Union General Hospital has expansion goals, but that doesn’t take away from the fact that it is a rural hospital in a small town. This, says Bierschenk, definitely has its advantages.

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“Care is more one-on-one,” he said. “We know pretty much all the patients who come through our doors. They feel comfortable calling us if they have a health issue; it’s like a bed-and-breakfast feeling. I think it’s a little harder in urban settings to do that.”

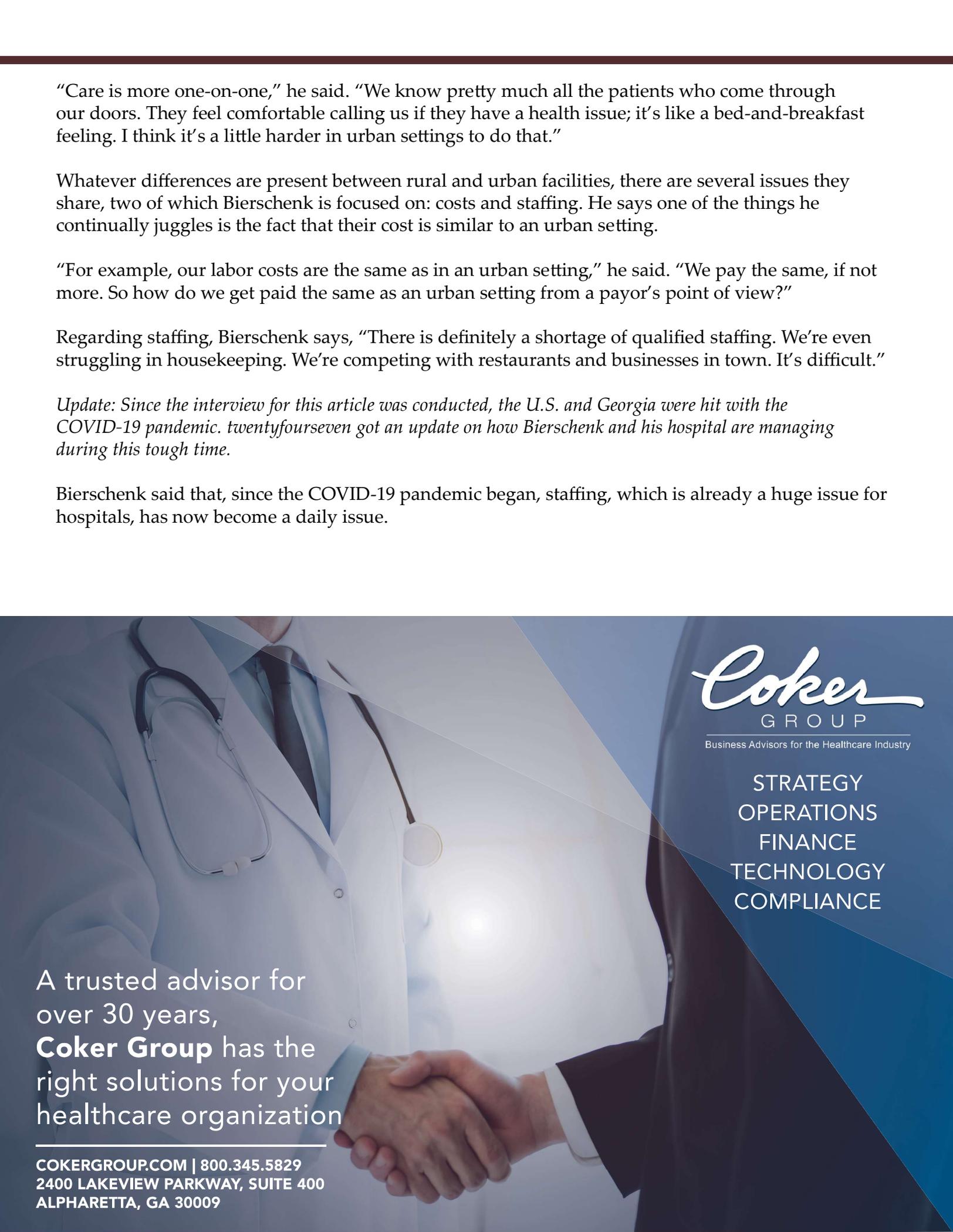
Whatever differences are present between rural and urban facilities, there are several issues they share, two of which Bierschenk is focused on: costs and staffing. He says one of the things he continually juggles is the fact that their cost is similar to an urban setting.

“For example, our labor costs are the same as in an urban setting,” he said. “We pay the same, if not more. So how do we get paid the same as an urban setting from a payor’s point of view?”

Regarding staffing, Bierschenk says, “There is definitely a shortage of qualified staffing. We’re even struggling in housekeeping. We’re competing with restaurants and businesses in town. It’s difficult.”

Update: Since the interview for this article was conducted, the U.S. and Georgia were hit with the COVID-19 pandemic. twentyfourseven got an update on how Bierschenk and his hospital are managing during this tough time.

Bierschenk said that, since the COVID-19 pandemic began, staffing, which is already a huge issue for hospitals, has now become a daily issue.



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“My goal each day is to make sure we have enough staff just to get through the day,” he said. “Because of this pandemic, staff are retiring sooner and looking to get out of the health care field,” he said. “The toll this pandemic is taking on front line health workers is unlike anything we’ve ever seen.”

Adding to an already urgent staffing issue is the fact that overall, fewer people are choosing to enter the health care field. Bierschenk said this is also directly related to COVID-19 and is also yet another element contributing to the financial loss that hospitals have been facing.



Union General Health System staff take a moment to grab lunch in the hospital’s cafeteria. One way that CEO Kevin Bierschenk has boosted morale during the pandemic has been to offer free meals to the staff.

“People who do choose to pursue work in health care are going to want a higher pay,” he said. “Recruitment and retention will require a renewed focus in addition to money.”

The hospital’s expansion plans were also affected by the pandemic when they were put on hold; however, Bierschenk says they are examining them again.

“We’re still going to be here for our communities,” he said. “The pandemic has disrupted us, but people are still dealing with the same health issues they were before it was here.”

Bierschenk stated that the hospital struggles with what all hospitals are having to cope with – the fact that family members cannot visit loved ones. He says seeing the impact on patients when they can’t visit their family members is one of the biggest changes he has seen.

Looking ahead to the future, when COVID-19 has ended, Bierschenk said, “I’d definitely have a bigger stockpile of personal protective equipment. But I also look fondly back on the days when not wearing a mask was the norm.” 



The Doctor Will (Virtually) See You Now

The use of telehealth during the COVID-19 pandemic has helped keep the health care wheels turning.

By Erin Stewart

When the COVID-19 pandemic spread to Georgia in early 2020, hospitals knew immediately that they would have to be resourceful with the care and treatment of patients. With social-distancing guidelines in place that strongly urged people to stay 6 feet apart when in public, innovation was more important than ever. It was an ideal time to finally make the most of what telehealth had to offer.

Telehealth had already been at the forefront of the minds of many health care providers, as well as members of the Georgia General Assembly. During the 2019 legislative session, two important bills passed and brought needed modifications to the state's telehealth program. Senate Bill 118 revised the Georgia Telehealth Act to require every health benefit policy to include payment for telehealth services if the service was covered by the policy. Senate Bill 115 revised the "Medical Practice Act in the State of Georgia" to provide for telemedicine licenses for physicians licensed in other states to allow them to practice telemedicine in Georgia. Both pieces of legislation came at a time when policy makers and the health community knew telemedicine was a necessary and important part of providing care; however, no one could have predicted its necessity for what was to come: the COVID-19 pandemic.

Each bill was in effect well before the COVID-19 crisis hit, which initiated the immediate implementation of the use of telehealth by hospitals. A new wariness in the air regarding close and physical contact with others seemed to be what persuaded many patients to also take to its use very easily.

“Coronavirus absolutely catapulted the implementation of telemedicine,” said Dr. Rob Schreiner, president of Wellstar Medical Group and executive vice president of Wellstar Health System. “That includes telestroke, teleneurology and more.”

Schreiner said telemedicine is ideal for the management of chronic disease and that he has noticed patients using it with ease. While some might assume that the elderly population would be hesitant, the desire to be extra cautious seems to be a factor in the older population eagerly accepting telemedicine’s use.

However, Schreiner explains that an obstacle is presented for those who do not have broadband internet access. Ideally, these patients can go to a clinic that is equipped with telemedicine capabilities and can be treated that way. Most patients are very open to being treated with the use of telemedicine. Those who are not able to take advantage perhaps have the desire but not the capability.

“It really falls more on socioeconomic lines more than age in terms of who is embracing telemedicine and who isn’t,” said Dr. Schreiner.

The growth of telemedicine has been extremely beneficial for all types of hospitals and allows for the treatment of patients all over the United States. For Shepherd Center, an Atlanta-based neurorehabilitation facility, this feature is important. More than half of its patients come from outside Georgia to take advantage of its specialized medical treatment, research, and rehabilitation for people with spinal cord injury, brain injury, stroke, multiple sclerosis, spine and chronic pain, and other neuromuscular conditions.

“With telehealth, patients outside Georgia can now access specialty care,” said Shepherd Center President and CEO Sarah Morrison, PT, MBA, MHA. “We are able to treat these patients quickly, which we believe has helped reduce emergency room visits and resultant readmissions back to acute care. We’ve even seen a decrease in urinary tract infections. All these positive changes are in part due to telehealth.”

Morrison said the hospital has seen several improvements in patient care in terms of patient satisfaction. There has also been a sizeable reduction in time-consuming documentation on the part of the health care team, meaning they are able to see more patients in a day. Additionally, the pure convenience of telehealth is helpful to patients and leads to increased patient compliance.



Dr. Rob Schreiner



Sarah Morrison

Telehealth has also helped bring about significant cost savings. Because many Shepherd patients transition their care to be covered under Medicaid because they have a disability, they require Medicaid transportation. When these patients do not have to leave their home for treatment, Medicaid doesn't have to cover the cost of transportation.

"Those who usually have difficulties driving to appointments no longer need to go through the extra time and effort because they can receive treatment right in their home," Morrison said.

Shepherd Center has even been able to use telehealth for transitioning patients from the hospital to their new way of life at home. Caregivers are able to make sure patients have the proper equipment with the right fit, all through telehealth.



Wellstar Pulmonary Medicine Advanced Practice Provider Keren Beltran helps a patient in the ICU video chat with family.

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“It’s made for a much smoother and quicker transition,” Morrison said. “Overall, patients and caregivers are happier and more satisfied.”

Most agree that the telehealth preference is here to stay, for a couple of reasons. One is that people have seen the convenience of it and that, in many cases, they can receive timely and appropriate care in a much more efficient way. The other is that a vaccine for COVID-19 is still being developed, and the desire to remain cautious and safe is still strong among many people.

Certainly, hospitals in Georgia hope that the current easing of regulations regarding telehealth is here for the long term so that as many patients as possible can take advantage. The Centers for Medicare and Medicaid Services (CMS) expanded access to telehealth by paying for more than 80 additional telehealth services, including emergency department visits and home visits. Additionally, clinicians in inpatient rehabilitation facilities were now fulfilling face-to-face visit requirements via telehealth.

Among several regulation changes that CMS made are expanding COVID-19 diagnostic testing to Medicare and Medicaid beneficiaries; allowing hospitals and health systems to deliver care at locations other than their facilities to make more room for potential COVID-19 patients; and waiving certain requirements to allow hospitals to hire new or additional local physicians and providers to address potential patient surges.

The changes are many, but one thing is clear: Telemedicine is effective, and providers are open and excited for the new possibilities in patient care that the evolution of telehealth has provided. 



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Our Hospitals



Wayne Memorial Hospital in Jesup, Georgia.

Good Neighbors: A Priceless Treasure

How a rural hospital's community relationships proved to be mutually beneficial during COVID-19

By Lindsey Cason

When the rural community of Jesup, Georgia began to experience a surge of COVID-19 positive cases in late July, Wayne Memorial Hospital staff members calmly faced the challenge. They had been preparing for several months in anticipation of that surge. In addition, the hospital's location and services essentially allowed them to carry on, business as usual.

Wayne Memorial resides in a county of roughly 30,000 residents, but, due to the rural geography, the hospital serves more than 10 surrounding counties.

Angie Jones, director of quality and risk management and assistant chief nursing officer, said, "The fact that our hospital offers so many care and treatment options for a facility of our size has helped us maintain our census and continue the draw from other areas. Our leadership team continually works to bring in health care options that other areas just don't have."

Jones explained the hospital has a robotic arm to assist the orthopedic surgeons in the operating room; an oncology infusion center; neurovascular surgery services; eye surgery services, ENT services and a cardiologist – all services that are extremely necessary all over the state, even in rural areas.

Additionally, she says, “We recently went live with PET/CT services, which are offered in a mobile unit that will be here one day a week.”

Since March, the 84-bed rural hospital has seen 50 COVID-19 related hospitalizations while striving to continually innovate paths to provide other needed health services to community members. In the midst of a pandemic, this certainly proved to be a challenge.

But just when staff members began feeling the weight of COVID-19, the South Georgia community rallied to provide support back to the hospital that has always been a beacon of hope. With chalk drawings and messages of encouragement at the employee entrance; donations of meals and needed equipment; and inspiring words and prayers, Wayne County and surrounding counties showed up to ensure the front line heroes could visibly see the community’s appreciation.

Sondra Grantham, employee health and infection control nurse, stated, “Individual citizens and churches met up twice daily in the parking lot at the nursing shift change to pray for the patients and workers on that shift. Participants stayed in their vehicles, socially distanced from others. They placed homemade signs of support on the hoods of their cars, turned on their headlights, and faced their parked cars toward the front of the hospital in a very moving display. Our staff could see them, wave to them, and pray with them. It was an amazing and unexpected show of support.”

Being a rural hospital during a pandemic has required creative thinking and collaboration to discover unconventional solutions for varying challenges. Many hospitals across Georgia and the United States have, in some capacity, experienced shortages of personal protective equipment (PPE) and other important supplies. Stories have surfaced repeatedly of those needs being met through donations from outside organizations. Wayne Memorial Hospital’s rural roots provide a personal connection to people, businesses, churches, and community organizations. In ode to these connections, a unique partnership developed out of the hospital’s need for surgical gowns and a local manufacturer that needed projects to continue employing many staff members through the height of the pandemic.

Satilla Creek Manufacturing, located in the neighboring town of Screven, is normally known for manufacturing PGA caddy bibs. Like so many small businesses around the nation, it was not spared from facing struggles due to COVID-19. But owner Stephen Boyett saw an opportunity to help when he heard of Wayne Memorial’s need. Utilizing excess fabric from the manufacturer’s warehouse, Boyett offered to make the needed surgical gowns for Wayne Memorial at cost.



Wayne Memorial Hospital employees are grateful for businesses like Satilla Creek Manufacturing and Alene’s Fabric, whose owners orchestrated the manufacturing of surgical gowns when there was a shortage of them.



Alene's Fabric & Design Shop, Jesup, Georgia

Because of the partnership between Wayne Memorial Hospital and Satilla Creek Manufacturing, many employees of the manufacturer were able to continue working while providing a vitally needed resource to the hospital.

Stephen Boyett remarked, "As a life-long member of the Wayne County community and now having unique access to materials needed for our local hospital, I knew I wanted to help. Wayne Memorial consistently serves our community in so many ways, even outside of the daily health care provided to my neighbors. This project was a way I could work with my team members to serve our hometown in a time of true crisis."

When a second local business owner, Carolyn Owens of Alene's Fabric in Jesup, heard of the newly formed partnership, she immediately offered to assist in the efforts. Owens provided the additional fabric needed to complete the project for Wayne Memorial.

Boyett and Owens continued their work together for 21 days to ultimately provide roughly 700 gowns for the community hospital. Boyett and Satilla Creek Manufacturing have since gone on to produce thousands of surgical gowns for other South Georgia community hospitals, while Owens has now made more than four thousand masks for local businesses.

Joe Ierardi, CEO of Wayne Memorial Hospital for nearly 13 years, has long been an active and contributing community member of Wayne County, serving on numerous civic boards and volunteering for many causes. Understanding the necessity of having a good neighbor in both positive and challenging times, Ierardi is especially thankful to be surrounded by his rural community through the recent months. He recounts that the challenges presented by the COVID-19 pandemic have, of course, caused a strain on individuals and the staff of Wayne Memorial overall. But, he says, even more so, these difficult last few months have highlighted the heart, talent, and tenacity of his team.

"I've always known that the communities Wayne Memorial serves are comprised of the most wonderful people. While I am not shocked by the level of compassion and generosity that has been shown to our team members when we've needed it the most, I am ever grateful and even further encouraged through our sense of true community shown to our hospital."

COVID-19 canceled many things. But, as one of the signs made for the encouragement of Wayne Memorial Hospital employees reminds us, there is so much more that simply cannot be canceled. While this pandemic has strained numerous resources, it has, in many ways, allowed for relationships, collaborations, and innovation to strengthen and flourish in the face of adversity. 

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Our Hospitals

Names in the News

January

Northeast Georgia Health System President and CEO **Carroll Burrell**, Grady Health System CEO **John Hauptert**, Children's Healthcare of Atlanta President and CEO **Donna Hyland**, Emory Healthcare President, CEO and Chair **Dr. Jonathan Lewin**, Northside Hospital President and CEO **Robert Quattrocchi**, Wellstar Health System President and CEO **Candice Saunders**, Navicent Health Past President and CEO **Ninfa Saunders** were named to Georgia Trend Magazine's 100 Most Influential Georgians list for 2020.

Hamilton Medical Center announced the addition of an open-heart surgery program by the end of the year.

Northeast Georgia Medical Center marked a milestone in treating more than 10,000 patients with the da Vinci Surgical System.

St. Francis Hospital joined a joint venture created by **Emory Healthcare** and **LifePoint Health**.

Southwell Medical opened its new facility in Adel.

Wellstar Health System opened a new health park in Alpharetta.

East Georgia Regional Medical Center launched tele-stroke and tele-neurology services.

Memorial Health completed the build-out of its Heart and Vascular Institute.

Douglas Brewer, M.D. was named the chief medical officer of **Navicent Health Baldwin**.



February

Melody Trimble became the new chief executive officer of **St. Francis Hospital**.

Memorial Health opened its Intensive Outpatient Behavioral Health Program.

Walda Knight was named the director of the **Coffee Regional Medical Center Foundation**.

Elbert Memorial Hospital earned designation as a critical access hospital.

Luisa Gutman was named chief human resources officer of **Northeast Georgia Health System**.

March

AdventHealth Gordon opened its new Cardiac Catheterization Lab.

Hamilton Medical Center opened its Peoples Cancer Institute.



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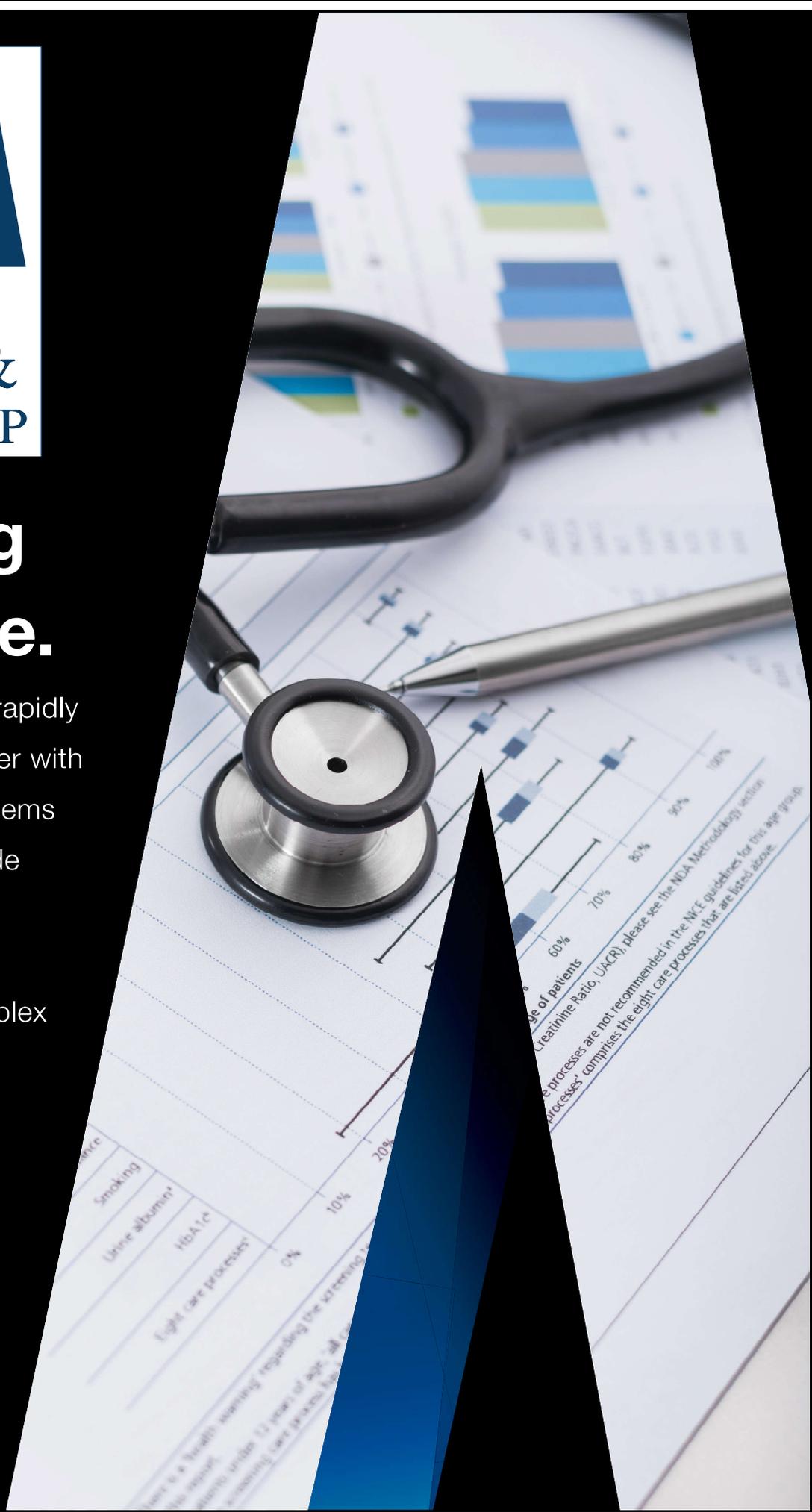
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April

AmerisBank donated \$2 million to the following rural hospitals through the Georgia HEART Hospital Program: **Brooks County Hospital, Coffee Regional Medical Center, Colquitt Regional Medical Center, Crisp Regional Hospital, Donalsonville Hospital, Effingham Health System, Irwin County Hospital, Jasper Memorial Hospital, John D. Archbold Memorial Hospital, Liberty Regional Medical Center, Meadows Regional Medical Center, Miller County Hospital, Phoebe Sumter Medical Center, South Georgia Medical Center – Berrien Campus, South Georgia Medical Center – Lakeland Campus, Southeast Georgia Health System, St. Mary’s Good Samaritan Hospital, Tift Regional Medical Center, and Wellstar Sylvan Grove Hospital.**

May

Northeast Georgia Health System became the first health system in Georgia to have its hospitals be designated Emergency Cardiac Care Centers. The system also opened its new Medical Park 2.

June

Memorial Health became the first health system in the state of Georgia to use a robotic machine that helps detect early signs of lung cancer. The health system also became the first in the state to use a very precise knee robotic surgical assistant, the ROSA.

Evans Memorial Hospital announced **Bill Lee** as chief executive officer.

**Arnall
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July

Howard Sepp retired from **Southeast Georgia Health System – Camden Campus** after 17 years of leadership service.

South Georgia Medical Center celebrated its 65th anniversary.

Cartersville Medical Center was named to Newsweek's Best Maternity Hospitals 2020 list.

Colquitt Regional Medical Center began construction on a new radiation oncology center.

South Georgia Medical Center announced **James S. Zacharias**, MBA, FACHE, CMPE, as the physician network vice president.

Emory Hillandale Hospital celebrated its 15th anniversary.

Wellstar Kennestone Hospital opened its new emergency room.

Montez Carter, president and chief executive officer of **St. Mary's Health Care System**, was elected to the Board of Trustees for the American Hospital Association.

Navicent Health earned its tenth straight "Get With the Guidelines – Stroke Gold Plus" Quality Achievement Award from the American Heart Association and American Stroke Association.

Coliseum Medical Centers received a Mission: Lifeline Gold Plus Receiving Quality Achievement Award and a Mission: Lifeline Silver NSTEMI Award from the American Heart Association.

Northside Hospital announced an expansion of the emergency room of **Northside Hospital Gwinnett**.

Emory University Hospital was ranked the No. 1 hospital in Georgia and metro Atlanta in the U.S. News & World Report 2020-2021 Best Hospital guide.

August

Monroe County Hospital completed its renovation project that began in February 2019 and included the renovation of 37,000 square feet of existing hospital space.

Redmond Regional Medical Center received the American Heart Association's Get With the Guidelines – Heart Failure Gold Plus Quality Achievement Award for the eighth consecutive year.

Tift Regional Medical Center received the American Heart Association/American Stroke Association's Get With the Guidelines – Stroke Silver Plus Quality Achievement Award.

Grady Health System named its new Advanced Surgery Center the Correll Pavilion to honor A.D. "Pete" Correll, the noted civic leader who helped Grady achieve financial stability.

Ed Moyer was named administrative director of operations for **Advent Health Murray**.

Redmond Regional Medical Center became the third hospital in Georgia to be designated a Level I Emergency Cardiac Care Center.

Cartersville Medical Center earned the Get With the Guidelines – Stroke Gold Plus Quality Achievement Award from the American Hospital Association and American Stroke Association.

Emanuel Medical Center received a 5-star rating from the Centers for Medicare and Medicaid Services.

Tift Regional Medical Center commemorated the midway point of construction for its new patient tower.

Southeast Georgia Health System Brunswick Campus was recognized as a High Performing Hospital for 2020-2021 by U.S. News & World Report.

September

Emory Healthcare promoted Dane Peterson to president of the health system.

Colquitt Regional Medical Center received a Pathways to Excellence designation from the American Nurses Credentialing Center.

Jeff Buda, vice president and chief information officer at **Floyd Medical Center**, was named a finalist for the 2020 Georgia CIO of the Year ORBIE Award.

Southeast Georgia Health System Brunswick Campus and **Southeast Georgia Health System Camden Campus** were designated Remote Treatment Stroke Centers by the Georgia Department of Public Health.

October

Ninfa Saunders retired from **Navicent Health** after an eight-year tenure.

Coffee Regional Medical Center became a quality collaborative member hospital in the **Emory Healthcare Affiliate Network**.

Northeast Georgia Medical Center was named one of the nation's 'Most Wired' hospitals by the College of Healthcare Information Management Executives.

Floyd Medical Center was designated a Level II Emergency Cardiac Care Center.

Emory Saint Joseph's Hospital was designated a Level I Emergency Cardiac Care Center.

AdventHealth Gordon announced its new cancer center will open in December 2020.

November

Wellstar West Georgia Medical Center opened its newly renovated Enoch Callaway Cancer Center.

Northeast Georgia Medical Center received accreditation as a Center of Excellence in Colorectal Surgery, Minimally Invasive Surgery, and Minimally Invasive Gynecology from the Surgical Review Corporation.

Wellstar Health System announced that five of its hospitals earned Emergency Cardiac Care Center designations: **Wellstar Kennestone Hospital** (Level I), **Wellstar North Fulton Hospital** (Level II), **Wellstar Cobb Hospital** (Level II), **Wellstar Douglas Hospital** (Level II), and **Wellstar Paulding Hospital** (Level II).

Tift Regional Medical Center received the American Heart Association's Get With The Guidelines – Heart Failure Silver Plus Quality Achievement Award.

The Georgia Academy of Family Physicians selected **Phoebe Sumter's Dr. Michael Busman** as a co-recipient of its 2020 Community & Volunteer Service Award.

Lissa Shirley, blood bank supervisor at **Northeast Georgia Medical Center Gainesville**, was awarded The Nathan Deal Governor's Award for Trauma Excellence. 



Anna Franklin, MD

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Ninfa Saunders, past president and chief executive officer of Navicent Health, speaks at the health system's Conference to End Human Trafficking. Photo credit: Ken Krakow

Human Trafficking: Hospitals Often a First Line of Defense

Training, education, and resources can help everyone be vigilant.

By Patty Gregory

Rob Stevens, a 23-year veteran of law enforcement in Fulton County and Sandy Springs, has extensive experience with human trafficking victims through his assignments in everything from narcotics to vice to street level prostitution. As a supervisor to the FBI's Metro Atlanta Child Exploitation and Human Trafficking (MATCH) task force, Stevens targeted underage prostitution in metro Atlanta. He spent nights on Cleveland Avenue counseling underage victims of prostitution and helped kids as young as 14 who were living on the streets.

In July 2017, Stevens made the move to Wellstar Health System because of his extensive experience with human trafficking victims.

“You know it when you see it. You almost can’t describe it, but once you’ve seen it over and over again, you just know it,” says Stevens.

After coming to Wellstar, Stevens put together a training module to help clinicians spot the signs of human trafficking, particularly in the emergency department. The FBI helped teach the class initially, and Stevens has taken it over with requests from hospitals around the state.

Wellstar launched a human trafficking committee where trauma staff and emergency department team members researched best practices at other hospitals. They developed checklists to increase awareness and education for emergency department staff and others.

“My goal has always been to increase awareness in a concise, simple way,” says Stevens, who presents at health care conferences and provides two- to three-hour seminars by request. “Nurses are not going to want a 100-page training pamphlet. It must be simple, quick and something that shows a nexus. For example, they might be triggered to say, “We might be onto something” if they hit six of seven items on a checklist.”

They were certainly on to something at Wellstar. “We identified eight girls in a year and a half through our emergency departments,” said Stevens. “About 90 percent of human trafficking victims come through an emergency department at some point in their underage adult life for anything from STDs to bruising to pregnancies or miscarriages. They are coming through, and we had been just not recognizing them. We’ve got maybe 10-15 minutes to identify, isolate, and try to get some corrective action, so it’s very quick.”

After hearing Stevens’ speak, Wellstar’s patient access, triage and emergency department nurses realized they had seen those signs before but not recognized it as human trafficking. “Being in the emergency department is a great chance to have these girls separated from their pimp and really start going down the checklist,” says Stevens noting, however, that they have seen a recent decline in human trafficking cases at both Atlanta Medical Center (AMC) and AMC South due to the visitation restrictions in place for the emergency departments during the COVID-19 pandemic. “We are currently not allowing visitors to sit in the emergency departments while patients are being seen. Traffickers/pimps are less likely to give away control of their girls, so not being able to sit in the emergency department lobby while they are being cared for makes it less likely for them to come in.”

According to Stevens, medical professionals should follow a three-step protocol for human trafficking: identify, treat, and report.

- Recognize the signs of human trafficking (see Human Trafficking Checklist sidebar on page 21).
- Separate the victim from the trafficker.
- Keep the victim safe.
- Establish a rapport with the victim.
- Treat the victim.
- Report human trafficking.
- Maintain confidentiality. (This could mean life or death for the victim, plus, it’s the law.)

Wellstar helped Stevens open the human trafficking course to the community, including fire, police, EMS, nursing, churches, and others. “This is not a Wellstar thing, it’s a thing for all of us. Whatever we can do to help other hospitals or other agencies, we’re willing to help.”

Enriching partnerships

Earlier this year, Navicent Health hosted the inaugural Conference to End Human Trafficking — a calculated move to strengthen community partnerships that was inspired by the hospital's President's Leadership Council.

"It was a confluence of several groups already working on initiatives to end human trafficking and support trafficking victims," said Cyndey Busbee, vice president of public affairs and consumer advocacy at Navicent Health.

The audience heard from human trafficking advocate organizations, law enforcement and a survivor who shared her story of growing up in a home where her father exploited her sexually. Macon's First Lady Dele Reichert spoke about her work to end human trafficking, and the event was also supported by a proclamation from elected officials.

"It was important to have support from a wide variety of groups, especially community leaders already working in this space," said Busbee, noting they wanted the event to be as inclusive as possible. "Partnerships really are the key to reducing trafficking in our community."

Along with the planning of the conference, Navicent Health also began a concerted effort to train Sexual Assault Nurse Examiners (SANE) nurses in their adult and pediatric emergency departments. The hospital system also began developing a sex trafficking education module for clinical staff to take annually. The module is currently being designed and will serve as a complement to the conference to gain continuing education credits.

For those considering a similar event, Busbee advises scanning the horizon for partners already working in this space — from the local District Attorney's office to law enforcement to clinical partners to nonprofits, child advocacy groups and others. Busbee attributes their high attendance rate of 300-350 attendees (more than three times what they expected!) to the many conference partners who extended the invitation to their audiences and made this a robust first-time event, which Busbee says Navicent Health now plans to host annually.



A panel of speakers at Navicent's Conference to End Human Trafficking to discuss the measures necessary to address and reduce instances of trafficking in Georgia. Photo credit: Ken Krakow

One nonprofit partner and keynote speaker who helped make the event a success was Street Grace.

Mobilizing community resources

Street Grace is one of the pioneers in the human trafficking “space” — estimated to be a \$290 million illegal industry Georgia alone. Utilizing evidence-based demand reduction strategies, Street Grace’s mission is to eradicate the Commercial Sexual Exploitation of Children (CSEC) through prevention/protection, policy, and pursuit.

Among their initiatives to end the sex trafficking of children, Street Grace leads training sessions for first responders, health care, community, and law enforcement organizations to properly identify and support those victimized by sexual exploitation. These trainings ensure that a victim-centered approach is used from the very start and that perpetrators are identified and prosecuted.

“We will never end CSEC and sex trafficking without strategically addressing demand,” said Bob Rodgers, president and CEO of Street Grace, noting the underground commercial sex economy is a multi-billion-dollar illegal industry in the U.S. It is the fastest-growing and second-largest illegal business on the planet, second only to drug trafficking. “Our initiatives are intensely focused on prevention and the protection of all those who are vulnerable, as well as the pursuit of buyers with a focus on eliminating demand by removing the cloak of anonymity.”

Street Grace’s purpose is to intervene before a child can be victimized by predatory practices. The organization has a Georgia network of approximately 100 churches, 75 community partners and more than 2,500 volunteers.

“Street Grace is taking every measure to remain focused on our mission to eradicate the commercial sexual exploitation of children/sex trafficking and help those who are vulnerable – perhaps now more than ever,” said Rodgers. “The horrors of child sex trafficking are still occurring despite the COVID-19 pandemic, so we are pressing on. With new and innovative methods that continue our critical work in this changing environment, we will continue to fight and advance freedom for all who are impacted by this horrific issue.”

Human Trafficking Checklist: What Should Emergency Department Personnel Look for When it Comes to a Child Victim?

Human trafficking identifiers include:

- Bruises in various stages of healing
- Scars, mutilations, skin infections
- Tattoos, brands, and burns
- Tattoo of a man’s name or nickname
- Urinary difficulties, pelvic pain, rectal trauma, bleeding from the vagina
- Malnourished
- Poor hygiene
- Alcohol/drug abuse
- Lack of sleep
- Excess amount of cash
- Multiple hotel keys
- Lying about age, false ID or no ID
- Inconsistencies in story
- Refers to employer/boyfriend as “Daddy”
- Accompanied by an adult other than their parent.
- Older male who seems controlling, insists on speaking for the patient.
- Has multiple sexually transmitted diseases/infections
- Reports multiple pregnancies, abortions or miscarriages
- Will not look at males in the eye
- Looks for others to answer
- Resists help
- Resistant and defensive
- Hyper vigilant
- Shows signs of depression and anxiety

CASE STUDY:

Within a few days of one of Stevens' presentations at WellStar, he got a call from the House Supervisor asking him to connect with the charge nurse in the emergency department. The charge nurse said she was contacted by patient access and they think they have a girl who might be trafficked. After discussing with patient access, Stevens learned the girl is "under 16, malnourished, can't tell me where her parents are, doesn't know their phone number, said the two women who brought her in were her aunts, but they only knew her by nickname."

When Stevens arrived at the patient's room, he immediately noticed her tattoos. A young girl with tattoos is not normal. He asked, "What does your tattoo mean?" She replied, "Nothing." Stevens knew from experience it was likely a brand from a pimp. A common brand tattoo is a pimp's name or nickname and the money sign.

He asked, "Can I see your phone?" He saw pictures of her in lingerie. The patient has bruises up and down her arms, but none on her face. "They don't bruise their face, because that's taking away money. They're a commodity." She also has stomach issues and pelvic pain.

"It's very atypical for them to talk to a man. In the pimp world, a female doesn't talk to another man without a pimp involved. So my first priority is to develop a rapport and build trust."

After a while, the patient confesses to committing armed robberies and selling drugs for her boyfriend. She gave Stevens her grandmother's name and phone number. She has a felony warrant for her arrest. The East Point Police Department came out. They may call in DFCS. Unfortunately, a lot of the patrol officers don't have this education.

Identify, Treat and Report

Overwhelmingly, the data shows hospitals are often the first line of defense when it comes to identifying human trafficking victims. According to the American Hospital Association "human trafficking is an issue in nearly every corner of the country." A 2014 study found that 88% of U.S.-born, female sex trafficked victims had seen a healthcare professional while being trafficked. The most common treatment site was a hospital emergency department.

"I have seen quite a few underage prostitution operations even during the COVID-19 pandemic in metro Atlanta netting dozens of offenders, so it's alive and thriving," laments Stevens. "I would suspect with all the hospital restrictions that the victims are less likely to seek treatment in a hospital environment."

Learning to identify, treat, and report are key steps health care providers can take to combat this pervasive problem when victims do come through the emergency department doors. Coordination among local and statewide partners amplifies the impact and, ultimately, can help prevent and protect the children and young adults who are often targeted. Now, more than ever before, it is important to be vigilant. 

Resources

- If a patient is over the age of 18, offer help through the number to the National Human Trafficking Hotline, 1-888-373-7888.
- To report human trafficking call 1-800-CALL-FBI

Other resources for victims include:

- **National Human Trafficking Hotline** 1-888-373-7888
- **Georgia Cares** 1-844-8GA-DMST
- **Covenant House** 404-589-0163
- **Out of Darkness** 404-941-6024
- **NCMEC** 1-800-THE-LOST

Triple Threat: COVID-19, Flu, and Hurricane Season

Editorial by GHA President and CEO Earl Rogers



When the state of Georgia began feeling the effects of COVID-19 in early March, the only certainty was uncertainty. Our hospitals quickly became laser focused on treating patients with therapeutics and available care with the hope that cases would gradually decrease, eventually reaching zero. But spring brought virus surges, hot spots, too many new cases, and a spike after Memorial Day when people let their guard down.

Yet, we still had hope that, going into late summer, we'd see a sharp decline in the COVID-19 numbers. While the number of cases is, fortunately, holding steady, we never saw the plummet in numbers we so desperately sought. As we press onward, more knowledgeable, and better equipped to battle COVID-19, we now face two additional threats entering the fall: influenza outbreaks and peak hurricane season.

Each year, we see public service announcements about the importance of getting your flu vaccination. But for 2020, there is an added layer. Getting your flu shot not only helps prevent the flu, it also helps avoid serious flu complications that could result in hospitalization. Why is this important now more than ever? During this once-in-a-hundred-years pandemic, hospitals cannot afford to be overwhelmed with something as preventable as the flu. Hospitals and our front line health care providers are working tirelessly 24/7 to ensure adequate bed capacity for the treatment of current and potential COVID-19 patients. We still can't predict exactly what will happen with COVID-19, but we know we can protect ourselves from the flu. So, add that to the list of ways we can do our part to stay healthy: Wear a mask, watch your distance, wash your hands, limit the size of your gatherings, and get a flu shot - a high dose if you are age 65 or over.

Adding to the perfect storm of 2020 challenges, hurricanes are another danger we know awaits us this time of year. With emergency preparedness plans looking very different in the wake of COVID-19, we must all take the necessary extra time to prepare emergency food, water, and other supplies. For example, with in-person shopping at a minimum, consider that it could become necessary to order many crucial staples and medications through delivery, which could take a little longer. Additionally, hand sanitizer, disinfectant wipes, and masks have become essential items in emergency kits.

While staying home is the best way to protect yourself and others from COVID-19, keep in mind it may become necessary to evacuate when fully protecting yourself and others becomes especially important.

By adding just a few steps to the list of simple behaviors that help us all remain safe, we can keep Georgians healthy:

1. Wear a mask. #MaskUpGA
2. Watch your distance. Social distance at least six feet from those not from your household and limit the size of gatherings.
3. Wash your hands frequently. Avoid touching your eyes, nose, and mouth.
4. Get a flu shot.
5. Build emergency preparedness kits and allow ample time to obtain medications and supplies, including those essential for COVID-19 protection, such as masks, disinfectant wipes and hand sanitizer.

The triple threat of COVID-19, influenza, and hurricane season is upon us. I have faith that Georgia's citizens, our hospitals, and our communities are wise enough and strong enough to face and overcome what comes our way.

Stay safe and well for your and others' sake. 



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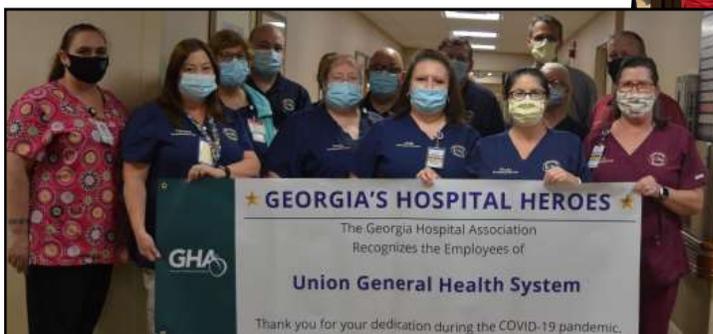
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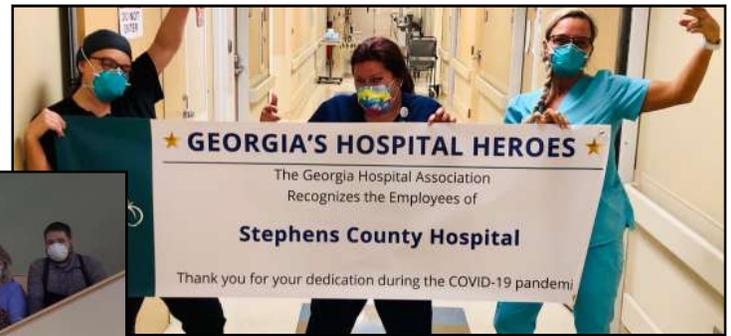
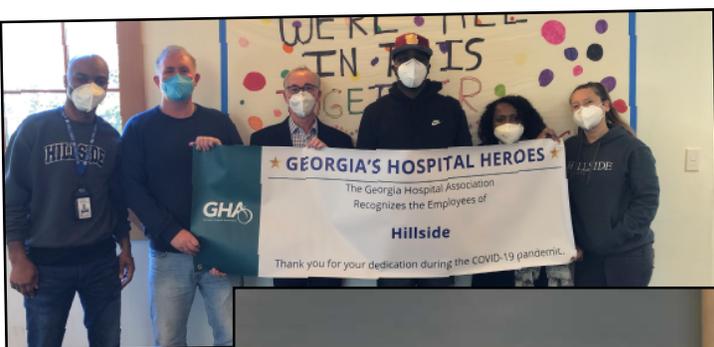
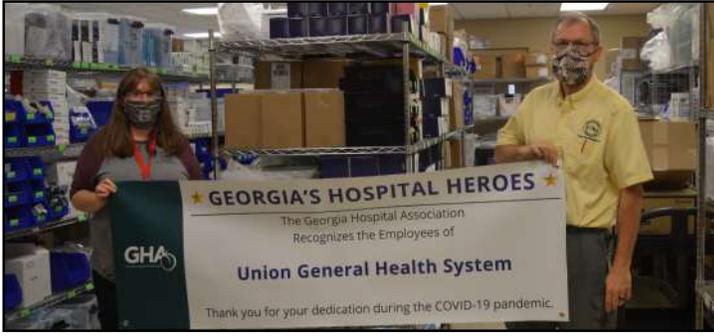
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COVID-19 and Georgia's Hospital Heroes

The Georgia Hospital Association is proud to represent more than 160 hospitals and health systems across our great state. On behalf of our Board of Trustees, we were honored to present Hospital Heroes banners to our member hospitals to recognize, celebrate and thank them for their selfless and unwavering support of Georgia's patients, especially during the trying times of this global pandemic.

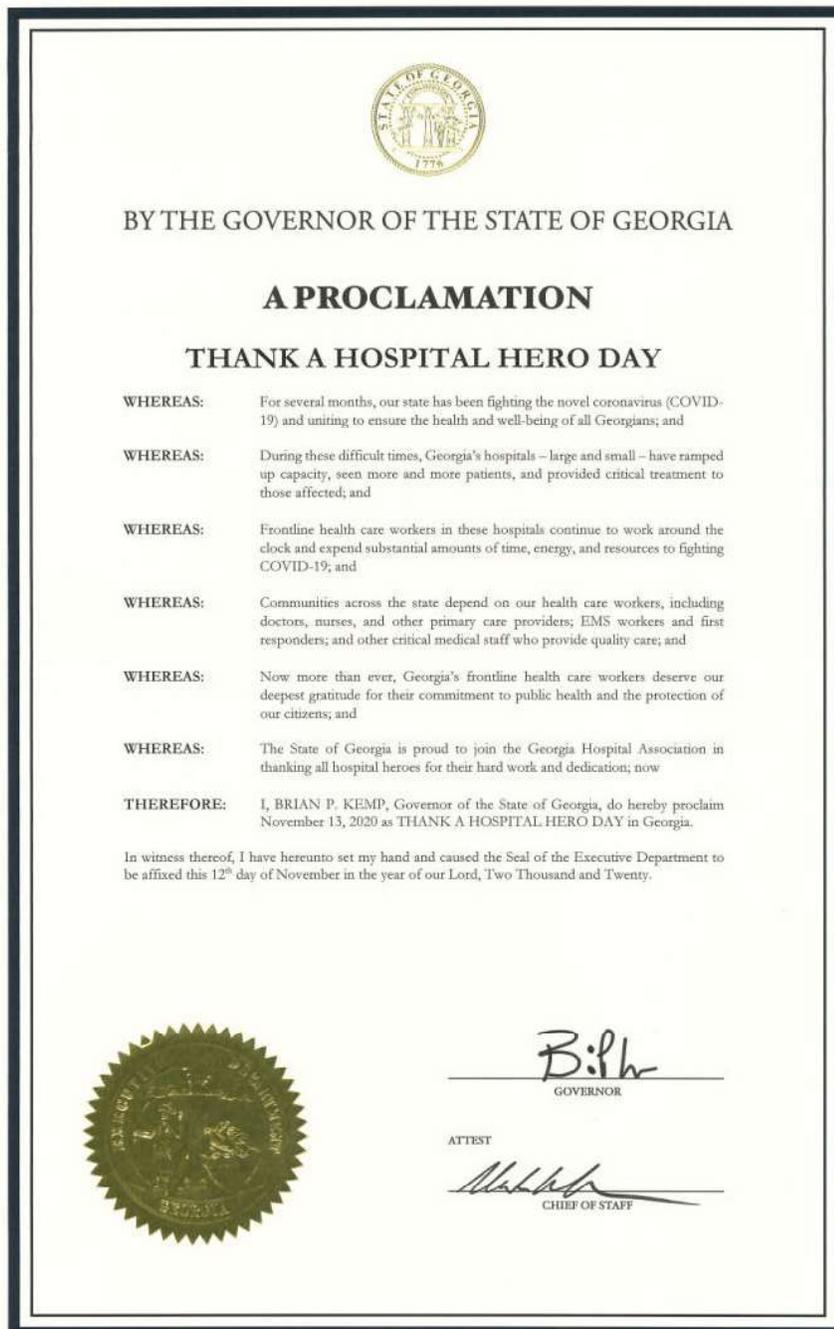
While our hospitals are vital to the health and well-being of their communities, the importance of these health care facilities and their stalwart employees is magnified in historic times like these. With the COVID-19 pandemic affecting millions of lives, hospitals and their health care providers are on our minds constantly. With the utmost gratitude and respect for our member hospitals' commitment and dedication, GHA is proud to offer our eternal thanks.

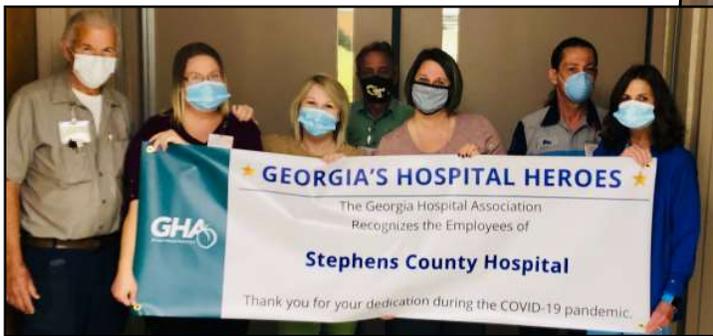
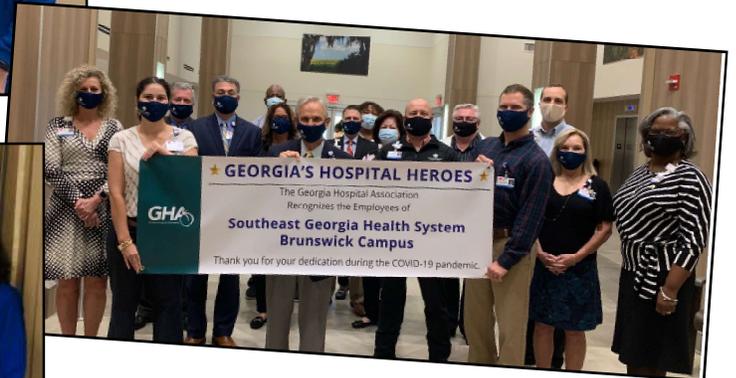
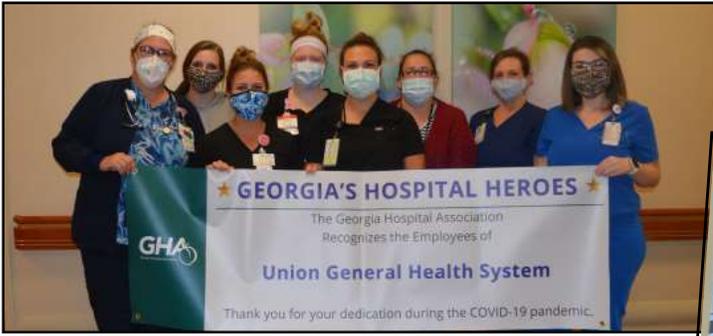




Governor Issues Proclamation: THANK A HOSPITAL HERO DAY

In support of Georgia's Hospital Heroes, Gov. Brian P. Kemp proclaimed Nov. 13, 2020 "Thank a Hospital Hero Day." The Georgia Hospital Association sincerely appreciates the Governor's support of our heroic front line health care workers throughout the trying time of the COVID-19 pandemic.





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2020 has been a demanding year, to say the least, for Georgia Hospital Association members. That is why GHA is grateful to every sponsor for their support of our hospitals this year. Thank you all for your insight and guidance as you have helped our members navigate the most challenging year in recent history. Each one of you has provided critical expertise, support, and leadership that have benefited our members and the health care industry as a whole. We can't say enough about how much we appreciate all you have done for us. On behalf of the GHA Board of Trustees and our 160+ member hospitals, we thank you.

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