Joel Wernick is a man who believes in taking health care beyond the hospital walls. He has good reason. "We have some challenging demographics," Wernick says, referring to the fact that his rural Georgia hospital is located in one of the 10 poorest congressional districts in the country. Here's a sample of what president and CEO Wernick faces: One-third of the population receives Medicaid, births by teens are 37 percent higher than the state average, and one third of the students don't complete high school. There's also a shortage of health care professionals. But perhaps the most damaging factor: One-third of all families have incomes below poverty level.

Many of the health conditions treated at Phoebe Putney Memorial Hospital are related to that poverty, Wernick says. Years ago, Phoebe's management realized if it didn't prevent some of these health problems, the hospital wouldn't be able to afford the results. "It was a combination of doing the right thing and doing the smart thing," says Wernick, whose 450-bed hospital has prospered with a 5 percent margin.

But any observer would say the Albany, Ga., institution has taken enlightened self-interest to new heights. The hospital typically provides at least $50 million in charity care annually. In fiscal 2003, it donated nearly $3 million to dozens of community service programs helping the young, the elderly, the disabled and the poor. These included car seat giveaways, counseling and support for teen parents, sponsorship of a residency program that trains doctors in rural areas, and a cancer coalition aimed at improving access and getting cutting-edge care to the region's patients.

In recognition of its efforts, Phoebe Putney recently won the Foster G. McGaw Prize for excellence in community service. The $100,000 award is sponsored by the American Hospital Association, the Baxter International Foundation, Deerfield, Ill., and Cardinal Health Foundation, Dublin, Ohio.
RIDING REHABILITATION: A therapeutic program uses equine-oriented activities to help children with physical, emotional, mental and social problems. It links and uses the resources of the school system, parents, volunteers and a number of organizations.

OUT OF NECESSITY
Many of the programs that Phoebe supports developed organically in answer to patients’ needs. Shortly after Wernick arrived in 1988, a pediatrician was frustrated that babies leaving the hospital were not put into car seats, and their parents were violating state law. The problem, says Wernick, traces back to poverty. The hospital researched running a “loaner” program, but its attorneys advised against it because of liability concerns with secondhand seats. Giving the seats away was an option the attorneys liked, Wernick says. Plus, it had a bigger impact.

“If you do it for everyone, you know you are affecting the entire population, rich, poor, white, black,” Wernick says. “They are all leaving the hospital trained in the proper use of infant restraint.” More than 40,000 free car seats have cradled babies on the way home in the last 15 years. Then, research found another problem linked to poverty: The seats were used far beyond their recommendations for size. Kids weighing up to 45 pounds were in seats intended for 14- to 16-pound infants. The hospital and its partners began giving away toddlers seats in 1999, using Phoebe’s money and corporate donations. The giveaways are credited for the fact that virtually no young children or infants are killed in car accidents in the county, according to CDC data.
FINDING PROBLEMS

Rather than waiting for a health crisis to arise, the hospital is able to find areas in need of intervention thanks largely to its own research arm, the Community Health Institute. Created in the 1990s to do health planning in the region, the institute was funded by a private foundation. When the funding ended, Phoebe Putney brought the institute in-house in 1998. “This was an accumulation of very smart people who know a lot about the health of our region,” Wernick says. “We didn’t want to lose that resource.”

The CHI is often where programming starts, says Sandra Handwerk, executive director of the institute. She uses hospital data, but also conducts surveys, focus groups and on-the-street interviews. “We can find the barriers to care access—is it financial, is it transportation, or a lack of how to navigate the system? Do people have a lack of knowledge about health conditions?” With further measurements, the hospital can assess a program’s impact and adapt the program as needed.

Because Phoebe Putney pays for the institute’s staff and space, it makes the group attractive to grant givers; all the money can be used for research, none has to go for overhead. This results in a bigger bang for the buck.

For instance, the institute in 2001 was able to focus resources on one of Southwest Georgia’s biggest health problems—cancer. The area’s rate of incidence is 35 percent higher than the state average. Surveying nearly 15,000 households by telephone, the institute wanted to assess what residents knew about cancer, and their attitudes toward the health system. The findings were disturbing. Nearly one-third of those polled did not know where to go for cancer screenings. The same percentage didn’t know any of the risk factors associated with cancer.
"That told me that offering medical services wasn't enough," Handwerk says. "We need to give people the tools to become partners in their care."

This survey was part of a 33-county cancer coalition started four years ago. Although Phoebe Putney has donated more than $500,000 in cash and in-kind contributions, it didn't want to monopolize the organization, Wernick says. "We realized Phoebe Putney alone could not impact the entire region, and providers couldn't maximize capability by themselves, either," he says. If all the health care providers collaborated, the chance that patients anywhere in the region would get the best care locally improved. This was no easy task, says Jim Hotz, M.D., vice president of the coalition, who convened the first cancer summit in 2001. "There was hefty competition between the hospitals," he says. "Five years ago, a doctor would refer a patient four hours away, rather than 40 minutes, to avoid helping the enemy," he says. Now coalition members are referring patients for gamma knife surgery at one regional hospital and a stem cell program at Phoebe.

The coalition was able to recruit a surgical oncologist to the area for the first time. "In rural areas, you can't afford to be in conflict," Hotz says, who is medical services director at the Albany Area Primary Health Care, a federally funded clinic. The group has created a map with all cancer screening and treatment assets; it wants to start a mobile mammography program. "We now have a unified strategic approach, with priorities and goals," Hotz says.

HEALTHY LIVING

But Phoebe Putney doesn't want just to treat illnesses; it strives to improve people's lives. In 1999, the local council on aging asked the hospital to participate in a program to build ramps at the homes of disabled people. Ninety percent of ramp requests were coming from Phoebe discharges. The council on aging needed more volunteers to keep up with volume, according to Lacy Lee, Phoebe Putney's director of volunteer services. A group of 10 men, ages 60 to 85, gather at 7 a.m. Tuesday and Thursday mornings to build the ramps. Donations from Phoebe and other organizations help buy supplies. Since becoming a partner in January 2000, Phoebe Putney and its volunteers have contributed $80,000. The building teams have constructed more than 400 ramps.

When they finish building a ramp, the disabled resident tries it out. "What keeps [the volunteers] coming back is the joy and excitement in the recipient's face," Lee says. "One of them hadn't been outside in four years," Wernick agrees. "It's hard to tell who benefits the most," he says, the volunteers or those receiving ramps. Wernick himself has labored on the ramps with other senior managers during an annual project.

But the hospital benefits, too. Patients whose discharge has been delayed because they need a ramp receive priority, so their length of stay is reduced. The program, Lee says, has already been successfully copied in another county.

Phoebe Putney also brought joy to Devon Wallace, a former welfare mom and now a staffer at New Foundations, a center where breast cancer surgery patients can be fitted with prostheses. Wallace gave birth to twin girls her junior year of high school. Through Phoebe's Work Experience Program, Wallace worked as a volunteer while receiving government assistance. In 2002, she was hired at the hospital's Carlton Breast Center. One of 59 former welfare recipients Phoebe has hired through the program, she's working toward becoming a doctor, taking pre-med courses at the community college and learning on the job. Wallace recently was certified as a prosthesis fitter.

"I'm doing parts of my dream already," she says. "I'm interacting with patients; it's a good, hands-on experience." She wants to be an inspiration to her daughters, now 4 years old. "If I did it, you can do it," she says she'll tell her children.
AWARD NEWS: Joel Wernick, Phoebe Putney's president and CEO, announces the Foster G. McGaw Prize at a press conference in the hospital's lobby in January.

EDUCATING TEENS
Wallace is just one of many teen mothers in Phoebe Putney's market area—Dougherty County's rate of births by teens is 37 percent higher than the state average. To address the problem, the hospital and local schools in 1994 started Network of Trust, a program for pregnant teens providing prenatal care and education. It then targets the girls to avoid second pregnancies and help them stay in school. The results are good: only 4 percent of the Network of Trust participants have second pregnancies within two years, compared with 23 percent of teen moms statewide.

Originally the program was open only to teen mothers. Darren Saabs, a health planner at Phoebe's Community Health Institute, felt that fathers needed to be included, and Teen Dads was born. Ignoring the male left the impression that he didn't bear an equal amount of responsibility.

"We have to involve him in the life of the child," Saabs says. "I came from a fatherless household, so that made me care. But in order to be a man, you have to see a man." Saabs created a curriculum of weekly classes held at high schools, including information on legal obligations, child care, and building relationships. The classes also become support groups, he says. "The young men need to cathartic, to talk about what is happening." In place since 1996, Teen Dads now has a group of alumni ready to serve. When Saabs speaks to middle school students about abstinence, one of his teen dads will come along. "They're no better deterrent than someone who's been there, saying, 'If you really want to mess up your life, here's how,'" he says.

But Saabs offers hope as well, getting these young men to see higher education as a part of their future. By scheduling events for teen dads at three local colleges, he exposes them to the campuses and their resources.

"Phoebe doesn't come into its partnerships as a missionary," Saabs says. "It recognized and respected existing community resources. That's what makes it successful, and that's what will make the programs last."

PICKING PROJECTS
Providing successful community benefit programs doesn't happen effortlessly. Wernick wants to be very deliberate in the initiatives Phoebe funds. Five years ago, the hospital was deluged with funding requests and needed to get organized. "When we invest in the community, we want to improve health care status," he says. Phoebe created a Community Benefits Board to evaluate these requests. No worthy program goes unconsidered, Wernick adds.

For example, after floods in 1994 and 1998 cut off a number of area residents from hospitals, Phoebe and the American Heart Association teamed up to place automatic defibrillators in fire departments, police stations and ambulances throughout a seven-county region. "We know people whose lives were saved by that equipment because they didn't have to drive to an emergency department," Wernick says. "If you have solid programs that are making a difference, you are in a position to attract funding from nontraditional sources." Partners important to keep service programs viable as health care budgets are squeezed, he says. That's one more example of Wernick's "right and smart" philosophy that is at work, improving lives. The evidence is tangible.

Handwerk frequently pulls up at a stoplight and sees a baby or a toddler in one of Phoebe's distinctive car seats. She waves and the baby waves back. "We do amazing things at the hospital to save lives—bypass surgery and bone marrow transplants," Handwerk says. "But it's the everyday miracles that happen in the community that this award is about."