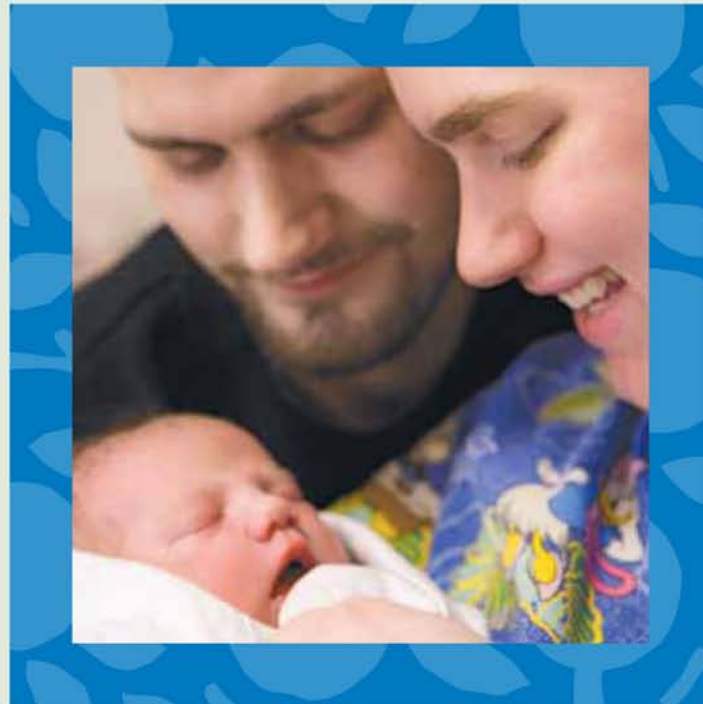


Alice Peck Day Health Systems  
2011 Annual Report



**The Quintessential Community Hospital...**

Dear Friends,

Since 1932, Alice Peck Day Memorial Hospital has been your community hospital. We are well known for the quality of our care, for the personal, lifelong care we give our patients. This is why so many generations return to APD. Citizens of the Upper Valley tell us again and again that at APD they are treated with respect, as “names, not numbers.” We listen to our patients and we respond with new treatments, new procedures, new expertise and now, new facilities.

As you’ll see throughout this 2011 Annual Report, we’ve expanded our orthopaedic staff, expanded our hours and our expertise in neurosurgery, geriatric care, gynecology, pregnancy and delivery services. We heard the cry for more pain management and for help improving your quality of life and we responded with increased preventative care, extended hours, and specific procedures.

We saw the need for more up-to-date facilities to improve efficiency and patient comfort and we responded with carefully researched plans for major renovations that began in October 2011. We know that our community cherishes our natural environment and cares about sustainable growth, so we are building to LEED (Leadership in Energy and Environmental Design) specifications, the highest standards available.

At APD, we honor the values that make us your hospital of choice. Americans are increasingly taking responsibility for their own wellness. They are better informed, which makes them better, more demanding customers. They know they deserve a choice in health care providers. Across the health care landscape, doctors, nurses, and educators are treating the whole patient. To do this, teams of caregivers must be able to communicate with their patients and each other. Trust is critical. Clear communication is not a luxury. It’s a matter of life and death.



The good news is that these vital changes depend on the core values and simple systems that make APD so appealing to the many professionals who choose APD over larger hospitals. It also explains why so many of our staff stay for decades. We hear again and again that at APD our health care professionals at all levels can do what they studied and worked so hard to do: care for people. We may be small, but in so many ways we represent the future of healthcare.

At APD, we are not immune to the turbulence in America’s health care systems. New Hampshire’s mismanagement of Medicaid payments requires cost shifting to our payers, and our designation as a Critical Access Care hospital is now, more than ever, targeted for Federal and State budget cuts. This means that now, more than ever, we need the help and expertise of our community. As you’ll see in these pages, good citizenship means supporting the institutions that help our community thrive. There is no question that Alice Peck Day Memorial Hospital is as close as any institution can get to the very pulse of life in the Upper Valley. This cannot be taken for granted.

A handwritten signature in black ink that reads "Harry G. Dorman, III".

Harry G. Dorman, III,  
FACHE, President and CEO

A handwritten signature in black ink that reads "Michael R. Harris".

Michael R. Harris, Chair,  
Hospital Board of Trustees



# Alice Would Be Proud: Another Great Year

## October 2010

APD submits Certificate of Need to the State of NH.

## November 2010

Beverly Rankin, RN, BSN, MSA, BC-NE, joins APD as Vice President of Patient Care Services and as APD's Chief Nursing Officer.

## December 2010

Leonard Rudolf, MD, orthopaedic surgeon, joins APD full time.

## January

Hand surgeon Diane C. Riley, MD, joins APD.

APD hosts New Hampshire Legislators' Breakfast.

## February

David Kroner, MD, FACS, earns recertification.

Shagun Saggar, MD, and Robin Rice-Voight, RN, CHPN, earn certifications in Palliative Care.

Nurses Lori Bracy, RN, and Kim Grover, RN, earn Wound Care Certification.

Woman's Care Center offers on-site ultrasounds.

Orthopaedic Clinic offers new extended hours on Mondays

Fiscal Services Team members Elizabeth Loudermilk and Lisa Cohen earn Healthcare Financial Management Certification

## March

APD Welcomes Geriatrician Lisa Furmanski, MD, to the staff of the Robert A. Mesrobian Center for Community Care (RAMCCC).

APD hosts 10th annual Upper Valley School Nurse Workshop.

APD Exhibits at Upper Valley Homelife Show.

APD Auxiliary hosts 38th Spring Antique Show.

Patient Safety Committee is implemented with significant progress in several areas.

APD celebrates National Doctors Day

## April

APD begins implementation of Electronic Medical Record System.

APD developing Smoke & Tobacco-Free policy.

APD elects Marty Candon as Trustee.

APD launches new website.

## May

State of NH approves APD's Certificate of Need

Recognition event shines light on APD Volunteers with guest speaker, journalist and writer, Christopher Wren.

Celebrates Employee Recognition Week.

Live summer radio broadcasts at APD.

APD's Centering Pregnancy Program receives March of Dimes grant.

APD Earns a 2011 Professional Research Consultants (PRC) National Excellence in Healthcare Award.

APD celebrates National Nurses Week.

## June

APD receives OSHA's prestigious Safety and Health Achievement Recognition Program (SHARP) certification renewal.

Pediatrician Laura Greer, MD, joins APD.

Evalie Crosby earns HFMA Muncie Award.

Melanie N. Moore elected to Planned Giving Council of NH and VT Board of Directors.

APD moves forward with Hospital renovation.

APD incorporates locally grown vegetables into patient meals.





## July

Harvest Hill welcomes new Associate Administrator Kathleen Labbe, RN, MS.

Carol Williams-Suich, ARNP, earns Gerontology Certification.

## August

General Surgeon Timothy Siegel, MD, joins APD.

APD receives Oral Disease Prevention and Treatment grant.

Engaging Hospital Leaders to Advance Sustainability: APD, in cooperation with the Environmental Protection Agency (EPA) New England, hosts a sustainability webinar featuring APD's Alex Jaccaci, MA, CHEP, Associate Vice President of Organizational Improvement and Planning.

APD signs Healthy Food Pledge.

Pyxis medication dispensing cabinets are in all areas now (all nursing units, including anesthesia in the OR).

## September

Wall-breaking for the Closey and Whit Dickey Medical-Surgical Wing marks the Future of Care at APD.

APD's Robert A. Mesropian Center for Community Care welcomes Clinical Manager Renee Martin.

APD's Women's Care Center welcomes Clinical Supervisor Anita Boucher-Concilio RN, OCN.

APD completes the hospital's latest licensure and Medicare certification survey by the State of NH.

APD implements new IV pumps with "smart technology".





# Home Sweet Home

Ron Andrews, Administrator,  
Harvest Hill and the Woodlands at Harvest Hill

Ron Andrews loves her job. “Every day is different,” she tells a visitor, “every day presents a different opportunity to make a difference in the lives of our residents.” Ron has been in health care for twenty-five years. She’s a born listener, and her calm, direct demeanor puts everyone at ease. As she walks through the light-filled, homey rooms at the Woodlands, Alice Peck Day Memorial Hospital’s second senior community, which opened in 2010, she straightens piles of books and fluffs pillows, as if she were walking through her own home.

Ron is particularly proud of her staff. “They know how much we care about them at APD; that’s why they stay. How can we ask them to care about our residents if we don’t care about them?” A spirit of community, of family, prevails. “For example,” says Ron. “We have a resident who just returned from surgery. Her neighbor brings all her favorite meals up to her.

Harvest Hill, which now has seventy-five residents, began with fifty-two apartments for assisted living. In 2000, twenty-one apartments were added. The Woodlands has seventy-one residents and available apartments.

Ron understands transitions. As a young adult, she took vows at the Sisters of the Presentation of Mary convent in Hudson, New Hampshire, where she taught French in schools. Leaving the convent was not an easy decision but she has no regrets. She and her husband ran a bakery, an inn, and a general store before settling in Lebanon. Ron knows that the decision to leave one’s home to come to an assisted care facility can be difficult. “This can be a hard time in people’s lives,” she says. “But we know that once they become part of this community, the friendships they make, the warmth we have created here, and the quality of care will compensate for what they have left behind.” Ron played a large role



in the design, planning, and decoration of the Woodlands as well as the menu plans, which include delicious, varied, fresh meals using local ingredients. She was determined to avoid any taint of institutionalism and it shows. Residents can choose the colors in their apartments and are encouraged to bring things from home. They enjoy monthly visits and performances from Opera North, book clubs run by the Lebanon Library, and many other connections to the larger community.

“I’m proud of what we’ve done here, and of the care we offer,” she says with a wide smile. “This is home.”





“I’m proud of  
what we’ve done  
here, and of  
the care we offer.  
This is home.”





## Good Citizenship

Edward T. Kerrigan, APD Board of Trustees;  
Founder and C.E.O., Jake's

Ed Kerrigan moved to the Upper Valley because he wanted his kids to grow up with the same stability, the same sense of community that he enjoyed as a child in Connecticut, where his dad worked as an auto mechanic. He opened Jake's Market and Deli in 1996, followed by Jake's Coffee Co. and Car Wash. He now has eight convenience stores throughout the Upper Valley and beyond. He has strong ideas about what it means to be a good citizen, a member of a community and a good employer. "I understand that I have to take care of my customers or they will go elsewhere," he says. "It's good business and I love that part of my job—getting to know my customers. I also know what it's like for my employees to struggle to feed a family." It's important to Ed that the organizations he supports share his values and his empathy. "APD is my hospital; it's my family's hospital," he says.

Ed's office above Jake's Coffee Co. on Mechanic Street in Lebanon is cozy and elegant at the same time. His stores have the same light-filled, upscale, yet homey feel. Drawings and paintings by employees hang on the walls in the café. "Peter Mason was our family doctor," he says, explaining his first visits to APD, "and I figured any institution he was affiliated with was bound to be a good place." Like many people who love APD, Ed appreciates the personal care he has received there. Wait times and red tape, he says, can make bigger hospitals seem impersonal. "In recent years," he laughs, "I've been in and out of there faster than it would take me to register at a larger hospital!"

Ed Kerrigan feels that it is a profound honor to serve on APD's Board of Trustees. In that capacity, he has played a role in the renovation plans, selecting architects and builders and planning the various phases of the project. "APD is one of the best hospitals in the state. It provides the second lowest cost care in the state as well. We have to move



forward," he says, "and still provide the care we are known for in an efficient, professional manner. The renovation of the existing hospital will bring the physical facility up to today's standards. Improving efficiency is especially important in a place like APD, where patient comfort comes first. Every visitor to APD should feel from the moment they enter the buildings that the quality of care they are going to receive will be kind, professional, personal and state-of-the-art."

“One Christmas my mother had trouble breathing and we were able to check her into APD. Within a few hours she was feeling better and looking happier than she had in years, thanks to the quality of care she received.”





# Fiscal Year in Review

The Fiscal Year ending September 30, 2011 was a strong one for Alice Peck Day Memorial Hospital while recognizing that significant challenges lie ahead. Significant factors leading to the positive fiscal performance for FY11 include the following:

- During the course of FY10 several new clinics were added to Alice Peck Day Memorial Hospital services including Pain Management, Orthopaedics, and Neurosurgery. All three of these clinics remained strong contributors in FY11, with Dr. Diane Riley's Hand and Upper Extremity Clinic added midway through the year. The addition of all of these clinics has resulted in increased activity in Surgical Services as well as many other clinical areas.
- The establishment of the Provider Based status for many of our provider clinics in January 2010 continued to yield enhanced reimbursement for the full year in FY2011.

- A number of our third party insurance contracts were re-negotiated during FY10 with the hospital achieving more favorable reimbursement terms from a number of these firms resulting in overall reductions in contractual allowances from commercial payors.
- The hospital's membership in the New England Alliance for Health (NEAH) continues to contribute to favorable financial performance with reductions in cost in general and professional liability insurance costs as well as significant cost savings through group purchasing arrangements and vendor rebate programs.

As a result of actions related to the American Jobs Act that are under consideration at the Federal level and actions taking place on the state level with respect to the Medicaid Enhancement Tax (MET) and Disproportionate Share Hospital (DSH) payments, there are significant concerns regarding fiscal impact to the hospital in the future. Concerns heading into FY2012 include:

- Whether or not the State of New Hampshire will be making payments under the DSH program, how those payments will be calculated and what the timing of payments will be.
- The threat to the hospital's critical access hospital designation due to provisions in the American Jobs Act,
- Continuing efforts to achieve full meaningful use of an Electronic Health Record (EHR) in both the inpatient and outpatient arenas,





- The selection of a vendor and development of a program for the State of New Hampshire Medicaid Managed Care program.
- Continued pressure from the insurance industry to reduce payments to providers and further expand Point of Service incentive programs that will direct increasing numbers of patients to seek services outside of the Hospital Outpatient setting, most notable for Laboratory, Radiology and Surgical services.

Certainly the landscape for healthcare has been a challenging one for some time, but there is a sense that the country and the industry will be pushed to a crisis point resulting in significant changes to the way health care services are provided and funded. We, as a health care service provider, remain vigilant in our scanning of the horizon and planning for the future.



## Statement of Operations

Fiscal Year Ending September 30, 2011

	Unaudited 2011	Audited 2010
<b>Unrestricted Revenue, gains and other support</b>		
Net Patient Service Revenue	\$49,962,376	\$42,123,672
Other Revenue	7,158,617	6,113,180
Net assets released from restrictions for operations	94,229	191,599
<b>Total Revenue</b>	<b>57,215,222</b>	<b>48,428,451</b>
<b>Expenses</b>		
Personnel Expenses	34,528,920	26,461,780
Supplies and other	15,089,646	13,954,540
Bad Debt Provision	2,596,394	1,931,752
Insurance	502,328	510,168
Interest	823,768	300,803
Depreciation and amortization	2,836,859	2,114,440
<b>Total Expenses</b>	<b>56,377,915</b>	<b>45,273,483</b>
<b>Subtotal</b>	<b>837,307</b>	<b>3,154,968</b>
Impact of interest rate swaps	(120,468)	(57,060)
Net unrealized gains (losses) on investments	(488,678)	146,777
Net assets released from restrictions used for purchase of property, plant and equipment	721,252	618,219
Other than temporary decline in investments	(46,076)	-
Loss on early extinguishment of debt	(482,297)	-
Loss from discontinued operations	-	(486,074)
<b>Increase (decrease) in unrestricted net assets</b>	<b>\$421,040</b>	<b>\$3,376,830</b>

## Condensed Balance Sheet

Fiscal Year Ending September 30, 2011

	2011	2010
Cash and short-term investments	\$17,959,664	\$15,288,147
Other current assets	9,236,987	19,847,385
Property, plant and equipment (net)	45,527,362	45,956,241
Other assets	1,427,776	2,921,408
<b>Total assets</b>	<b>74,151,789</b>	<b>84,013,181</b>
Current liabilities	8,369,246	18,837,462
Long-term debt	29,139,262	30,240,000
Other liabilities	20,296,674	18,887,590
<b>Total Liabilities</b>	<b>57,805,182</b>	<b>67,965,052</b>
Unrestricted net assets	14,851,772	14,430,732
Temporarily restricted net assets	1,468,994	1,589,332
Permanently restricted net assets	25,841	28,065
<b>Total net assets</b>	<b>16,346,607</b>	<b>16,048,129</b>
<b>Total liabilities and net assets</b>	<b>\$74,151,789</b>	<b>\$84,013,181</b>





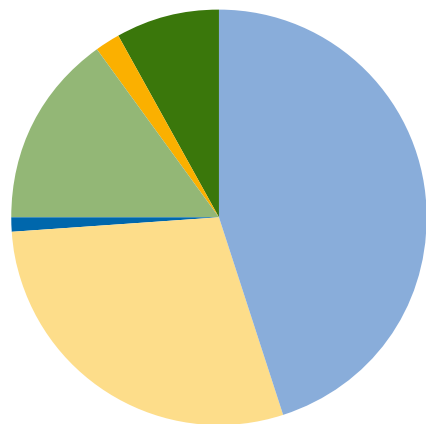
## Supporting Statistical Information

### Summary of Patient Service Utilization

	2011	2010
<b>Inpatient</b>		
Total Admissions	990	800
Births	276	279
CAH Patient Days	5,145	3,211
CAH average length of stay	5.2	4.0
CAH average daily census	17.0	8.8
<b>Extended Care Facility</b>		
Long term care resident days	-	1,269
Skilled level resident days	-	2,748
Skilled level average length of stay	-	17.7
Average Daily Census	-	11.0
<b>Other</b>		
Emergency Room/ICC visits	8,757	8,652
Clinic visits		
Robert A. Mesropian Primary Care Center	24,806	23,750
Women's Care Center	8,850	8,950
General Surgery Clinic	1,687	2,654
Occ Health	3,920	3,848
Orthopaedics	2,617	1,908
Pain Management	1,738	450
Surgical Procedures	3,078	2,098
Procedures	1,073	830
Lab procedures (excludes venipunctures)	80,097	86,233
PT/OT Visits	5,287	5,527
Radiology exams	18,295	18,638



## Fiscal Year 2011 Cash Charitable Contributions \$421,961



- 45% ■ Annual Giving Program \$191,323.00
- 29% ■ Planned Gifts \$121,916.00
- 1% ■ Memorial Giving \$2,770.00
- 15% ■ Special Gifts \$63,505.00
- 2% ■ 2004 Capital Campaign Pledge Payments \$7,277.00
- 8% ■ 2011 Capital Campaign Gifts \$35,170.00

# At APD, You Remember Why You Chose a Career in Nursing.

Beverley Rankin R.N., MSA, BC-NE, V.P. Patient Care

After many years working in large hospitals, Beverley Rankin came to APD. Beverley has a gentle, take-charge manner. “I knew I was in the right place when, after several weeks,” she laughs, “one of the other nurses turned to me and said, ‘it seems as though you’ve always been here!’ In large hospitals, nursing can get siloed. You feel disconnected from the patients; you can’t spend enough time with them and get to know them. Here, I know the entire staff and I know all of the patients. From lab work to social work, I know exactly what’s going on!” Beverley is also in awe of the pioneering work that is done at APD.


She names a few examples: orthopaedic surgery and hip replacements involving faster recovery and less pain, and fewer mobility problems; ophthalmology procedures that rival big city hospitals; APD’s state-of-the-art birthing center; the Pain Management Clinic; the Sleep Health Center; neurological surgery, including procedures to alleviate back pain; and an emergency department on call 24/7. “That’s a lot for a small community hospital!” she says with obvious pride. “Our lives aren’t Monday to Friday, nine to five anymore,” she says. “The care at APD,” she explains, “really is cradle to grave—supportive, progressive birth experiences and excellent gerontology that allows for graceful aging.

“You get to a certain point when you are comfortable in your career and you want to get back to basics—here, you can do that. At smaller hospitals, you can also get things done faster.” Beverley appreciates the way staff at APD are encouraged to get involved in decisions about patient care and are also encouraged to grow professionally, through special training opportunities. “We have to pull together—there is a great willingness here to pitch in.

“The goal of the renovations,” says Beverley, “is increased patient comfort and efficiency: more space, more natural light, better noise control, better palliative care, and more space for family visitors. More space will mean greater ease of movement for staff and patients.”

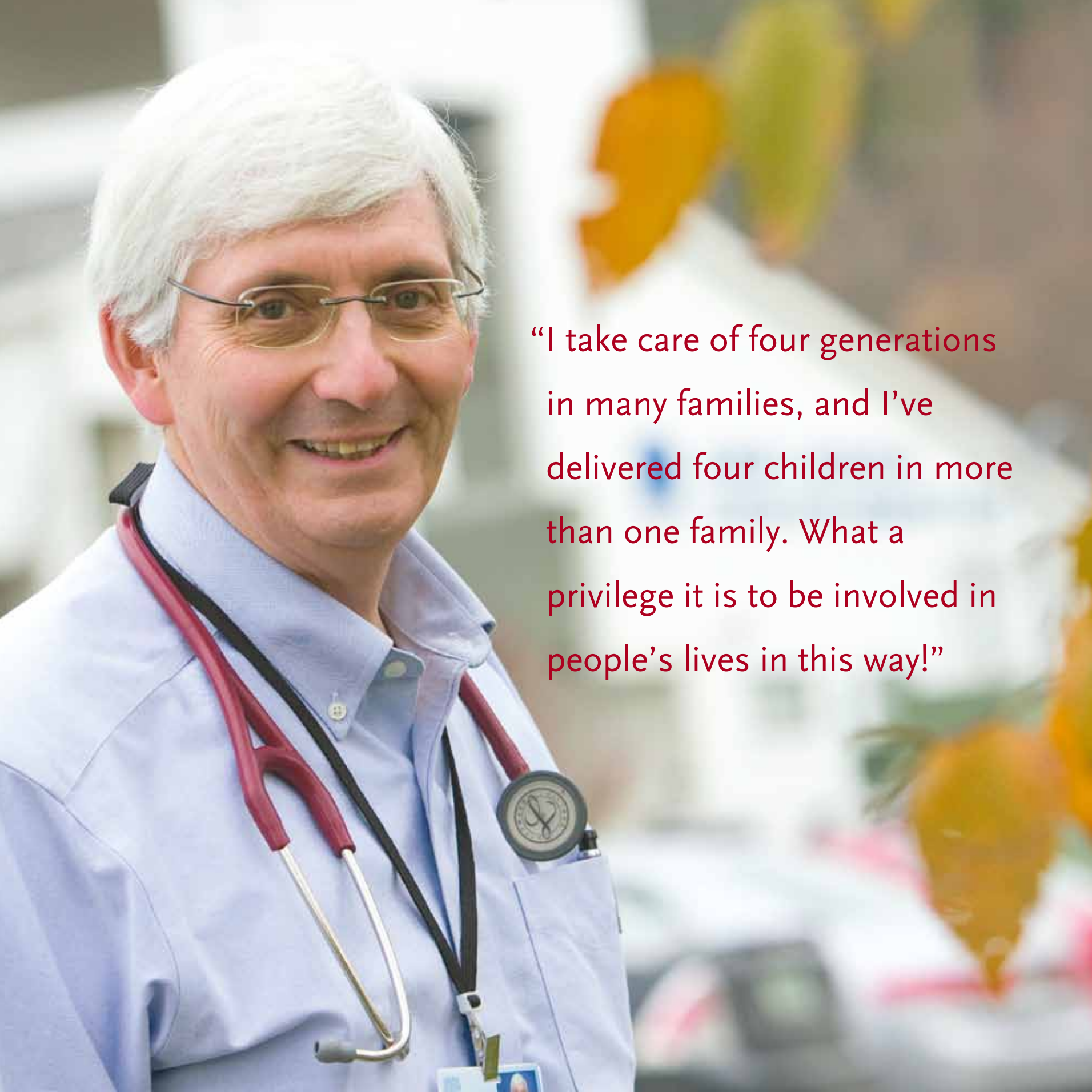
Beverley shows her visitor around the hospital. A nurse strolls down a hall, arm in arm with an elderly patient. Together they are singing... “silent night, holy night, all is calm, all is bright....”



A woman with glasses and a bright green blazer is smiling warmly at the camera. She is sitting at a desk in what appears to be a hospital or clinic setting. On the desk in front of her is a large binder with a yellow cover and a green folder. To her right, there is a potted plant and a bottle of hand sanitizer. In the background, other people in blue scrubs are visible, slightly out of focus. The overall atmosphere is professional and friendly.

“Here, I know the  
entire staff and I know  
all of the patients.”





“I take care of four generations in many families, and I’ve delivered four children in more than one family. What a privilege it is to be involved in people’s lives in this way!”

# Primary Care for Four Generations

Dr. Peter Mason, Family Practice, the Robert A. Mesropian Center for Community Care (RAMCCC)

Peter Mason has practiced at APD since 1981, when he moved to the Upper Valley to take a job in Community and Family Medicine at Dartmouth Medical School. “I take care of four generations in many families, and I’ve delivered four children in more than one family. What a privilege it is to be involved in people’s lives in this way!” Peter is also grateful for the face-to-face communication and the accessibility of his colleagues at APD.

“When I had a patient with a spinal cord injury who was in a lot of pain and required multiple surgeries, I had rapid access to top quality neurosurgical treatment and superb general surgery to correct the problem and restore him to a functional level. That kind of rapid team-building requires good communication and access to many kinds of expertise. I have that at APD.”

Peter runs into his patients everywhere—at the Co-op, at the hardware store, and at community events. Some doctors prefer to remain anonymous, but Peter loves the feeling



of connection with his patients and with the community. Sometimes it seems as though everyone has been a patient at one time—his plumber, his contractor, the people who service his car. “There’s a kind of trust and mutual respect that develops in a small community, and in a small hospital, that makes diagnosis and care-giving easier.”

Peter endorses the principle of “slow medicine,” a kind of care that involves reflective listening, understanding the whole person, and solving problems over time. Over the years he has watched the local population age. He sees more chronic disease than he used to—diabetes, heart disease, arthritis, and memory loss, for example. “These are not the kinds of problems with immediate solutions. It takes time and many visits to develop long-term management plans in cooperation with patients and, often, their family members.”

Peter makes annual trips with a team of caregivers to a clinic they run in a mountain village in Honduras, where he applies the techniques he is known for at home to a different population. “The future of medicine is not in high-tech,” he says, recalling the image of a family doctor with a black bag making house calls. “It’s in better prevention, better primary care, self-care for chronic problems, and in helping patients become better advocates for themselves.”

“At APD, we are small enough to be nimble and flexible, but large enough to offer a wide range of specialty services. We are very much a part of our community and we have a track record of responsiveness that patients can trust. Members of the hospital community are active on local non-profit boards and in other civic organizations.”

“We may be modernizing,” Peter says, “but we still emphasize high-touch health care. Programs, personnel, and problem-solving. That’s what we do best.”



# More Than a Transaction

Curt Jacques, Owner, West Lebanon Feed and Supply

At West Lebanon Feed and Supply, there's a Passion Statement instead of a Mission Statement. "We heartily believe in being good stewards in this community," says owner Curt Jacques as he walks through the spotless, spacious, beautifully designed store. "Passion and compassion! Good business is about so much more than dollars—it's not just about transactions, it's about relationships. You have to help people to feel comfortable with their decisions." Curt is so happy it's contagious. "I truly feel that people with animals are easier to talk to," he says conspiratorily.

Curt and his wife Sharon have both had major surgery at APD. "I didn't want to be used as a training patient for someone just learning how to do procedures for the specialist," he says, explaining their decision not to have their surgeries performed at a teaching hospital. "I wanted experience and compassion. I wanted to see familiar faces along the way. I wanted my caregivers to know my name. I got all that and more at APD."

Curt sees many parallels between the kind of care he received at APD and the way he runs his own business. He knows that the staff at APD is well-treated and well respected, just like his own staff. He knows that APD has many programs in local schools and community service and outreach organizations. This kind of community outreach is encouraged and rewarded at West Lebanon Feed and Supply as well, including school learning gardens and animal

husbandry education programs. "How can we take our happiness out into the world and nurture others?" he asks. "It's all about cultivating relationships. It's all about working as a team. It's all about patience and compassion."

It's hard not to smile. It's hard not to believe, listening to Curt Jacques, that the future might just, contrary to popular opinion, be brighter than the past.



**"I wanted experience and compassion. I wanted to see familiar faces along the way. I wanted my caregivers to know my name. I got all that at APD."**







## A Living Legacy

At Alice Peck Day Memorial Hospital, our staff—nurses, doctors, technicians and many others—give deeply of themselves when caring for patients and each other. This is the legacy of compassionate care that is at the very heart of APD.

Another legacy endures at APD: the great generosity of our community. Philanthropy started the hospital when Alice Peck Day donated her Lebanon home to found a “cottage” hospital in the early 1930s. Through the years, members of the community, patients, and employees have given generously of their resources to help the hospital flourish and evolve. This support is the lifeblood that nourishes APD and ties us ever more closely to those we serve.



“We are honored to recognize those who sustain and improve the hospital’s care with their contributions of financial support. Though this is a challenging time to be asking people to support charitable causes, our community continued to show their commitment to the very personal and exceptional care APD provides by contributing more than \$420,000 this past year. We thank each and every one of our supporters for their gifts and the spirit of generosity that motivated them.”

— *Melanie N. Moore, Associate Vice President of Philanthropy and Community Relations*





## Annual Giving Program

As the foundation of all philanthropy at Alice Peck Day Memorial Hospital, annual giving has been steadily growing over the years. Individuals, businesses, and private foundations continue to select Alice Peck Day as a beneficiary of their giving. This year 374 donors contributed more than \$191,000—an increase of nearly 45% over the previous year. We are gratified by this strong gesture of support and the vote of confidence in APD that it represents.

### Leaders (\$5,000 +)

Anonymous (2)	The Joe and Hellen Darion Foundation
The Jack and Dorothy Byrne Foundation	The Whit and Closey Dickey Fund of the NH Charitable Foundation, Upper Valley Region
The Dosis Fund of the NH Charitable Foundation, Upper Valley Region (Mr. and Mrs. Romer Holleran)	Mr. and Mrs. Conrad F. Frey
Geokon, Inc.	Dr. Claudia and Mr. Ralph Gibson
Kleen, Inc.	Lake Sunapee Bank
Mr. and Mrs. David M. Roby	Ms. Kathleen A. Maloy, JD, PhD
Mr. and Mrs. Roger P. Smith	Peter J. McLaughlin and Jane Kitchel McLaughlin Family Fund
Vermont Community Foundation (Mr. Edmund Coffin)	Mrs. Marie Anne Mesropian
Dr. and Mrs. Douglas Williamson	Mr. and Mrs. J. Todd Miller

### Innovators (\$2,500 +)

Anonymous (2)	Mr. and Mrs. Charles F. Nettleship, III
Mr. and Mrs. Harry G. Dorman, III	New England Industries, Inc.

### Pacesetters (\$1,000.00 +)

Ms. Susan Baker	Mr. and Mrs. Michael Paine
Mrs. Harriette S. Barnes	Mr. and Mrs. Jeremy B. Rutter
The Barrette Family Fund of the NH Charitable Foundation, Upper Valley Region	Mr. and Mrs. William A. Silverman
Mrs. Barbara H. Brown	<b>Associates (\$500 +)</b>
Ms. Barbara A. Callahan, CRNA	Anonymous (1)
Carroll Concrete Company	Ms. Susan W. Almy
	Ms. Patricia Bazilchuk
	Ms. Susan Cohen
	Mrs. Mary S. Cunningham

Mr. and Mrs. Frederick Cushing, Jr.
Mr. and Mrs. William T. Doyle
Dr. Sheila and Mr. Jim Feyrer
Mr. and Mrs. Owen R. Hamilton
Mr. John Jackson, CRNA and Ms. Kelly Burke
Mr. Bruce N. Johnstone, Sr.
Mr. and Mrs. Ronald Kobylenski
Mr. and Mrs. Richard L. Lewin
Dr. Bruce Lewis and Ms. Abby Tassel
Mr. and Mrs. Jeffery K. Loudermilk
Mr. and Mrs. Robert E. Middleton
Ms. Melanie N. Moore
Ms. Madeleine K. Olsen and Mr. Tyler C. Brown
Ms. Anna M. Romano
Mr. and Mrs. David Ruedig
Vermont Community Foundation (Ms. Anne S. Segal)
Ms. Ella S. Tobelman
Mr. William D. Wedgwood
Dr. Andrea Williams and Mr. Clayton E. Goss
Prof. and Mrs. J. Peter Williamson
Ms. Sharon H. Young

### Samaritans (\$250 +)

Anonymous (3)
Mr. and Mrs. James Adler
Alcoholics Anonymous Rule 62 Group
Mr. Peter H. Armstrong
Blaktop, Inc.
Mrs. Jane S. Brandt
Mrs. Marguerite Collier
Dr. Charles Cunningham
Mr. and Mrs. Jere R. Daniell

Mr. Charles T. Depuy, Jr. and Ms. Mary Ann Haagen
Mr. Robert J. Dion
Mrs. Priscilla P. Eusden
Mr. and Mrs. Charles S. Faulkner, II
Gerrish Honda
Mr. and Mrs. Clark A. Griffiths
Ms. Anne B. Harms
Mr. and Mrs. Charles M. Harrington
Mr. and Mrs. Michael Harris
Mr. and Mrs. John A. Hochreiter
Mr. and Mrs. John R. Hoffman
Mr. Richard Jennings and Ms. Elizabeth P. Hanlon
Mr. and Mrs. Edward T. Kerrigan
Mr. and Mrs. Austin Kovacs
Mr. and Mrs. William F. Luebbert
Dr. and Mrs. Leon Mann
Mrs. Dorothy J. Matthews
Mr. Mark Melendy
Mr. and Mrs. Richard M. Miller
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## The Campaign for APD *Continuing the Commitment*

The following people completed their pledges to the 2004 capital campaign for the renovation and expansion of the Robert A. Mesropian Center for Community Care.

Dr. and Mrs. Eric Bronstein	Ms. Barbara Ricker RRT, RPSGT
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## building a new Day *the campaign for Alice Peck Day Memorial Hospital*

The following people have made “early” gifts to the capital campaign for the hospital renovation project.

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#### Ron Andrews and all

#### Harvest Hill staff members

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## Special Gifts

These gifts were restricted to specific purposes, including children's oral health, the trail project at Harvest Hill and The Woodlands, and rehabilitation services.

Mrs. Janet Canillas	The Lorraine Simon Memorial
Dartmouth Hitchcock	Fund of the NH Charitable
Medical Center	Foundation, Upper Valley
Mr. and Mrs. Rogers Elliott	Region
Foundation for Healthy	Ms. Norma Jean Guthrie
Communities	Ms. Kathleen MacKay and
Granite United Way, Upper	Mr. William G. Vandervliet
Valley Region	Mr. and Mrs. John S. North
	Norwich Congregational Church
	The Page Hill Foundation

## Homestead Society Members Who Passed Away This Year

We are saddened by the loss of Homestead Society member **Francis W. Field**, but deeply gratified by the legacy she left to the Harvest Hill Residents' Subsidy Fund.



## Living Members of the Homestead Society

We thank the following people who have made plans to support Alice Peck Day through their estates.

Mrs. Patricia B. Brown	Mr. and Mrs. Robert E.
Mr. and Mrs. S. Whitney Dickey	Middleton
Mr. and Mrs. Conrad F. Frey	Mrs. Leonard Morrissey
Mr. George B. Halperin	Mr. Stephen L. Pike
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Ms. Michelle Marceau, Ph.D.	



# Living Life to the Fullest

From the beginning, Alice Peck Day Memorial Hospital has considered the lifelong needs of its patients. We are particularly proud of our senior care facilities, which have expanded steadily since Harvest Hill opened its doors in 1996. With the elegant addition of The Woodlands in June, 2010, we can now accommodate more than 140 residents. All have access to the Elizabeth S. Hughes Care Unit, with its 24-hour nursing, which enables residents at Harvest Hill and the Woodlands who need a higher level of care to stay close to familiar faces and surroundings. In July, 2011 we welcomed the addition of our new Associate Administrator, Kathleen Labbe, RN, MS.

“Working at Harvest Hill and The Woodlands at Harvest Hill is more than a job for us. It’s a way of life.”

— Ron Andrews, Administrator, Harvest Hill and The Woodlands at Harvest Hill

“We chose The Woodlands for many reasons. We wanted to be close to our families, be near top-flight medical facilities, be close to the ILEAD classes associated with Dartmouth College, and have access to the full range of cultural events that make this area special. We wanted to maintain our community involvement and connections.”

— Chartotte Quimby

“The Woodlands appealed to us as soon as we went to the first meeting—it would give us the freedom and control we sought, allowed us to make the decisions on our future for ourselves and didn’t delay the process so that our children would have to do it for us.”

— Connie and Jack Skewes



## Employee Service Awards

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Zanda Ball  
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Jacqueline Simpson  
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Charles Surat

Alphonse Thibodeau  
Janet Vielguth  
Cynthia Welker  
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James Winny

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Lynette Albano  
Deborah Baker  
Lanette Baker  
James Burnham  
Karen Connolly-Butler  
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Gayle Duquette  
Kate Holmes  
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Lois Lavie  
Janet Maloney  
Gregory Moore  
Arlene Patten  
Brian Pike  
Joanne Quinn  
Lisa Stebbins  
Patricia Tremblay

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James Ewald  
Linda Harper  
Dolores Laraway  
Rebecca Diane McGonis  
Barbara Parker  
Patricia Schumacher  
Amy Stephens  
Mardrey Swenson  
Linda Zoller-McKibbin

### 20 years

Rhonda Fenton  
Aaron Martin  
Sherry Lynn Merrick  
Carol Williams Suich

### 25 years

Elaine Lundberg


### 35 years

Leigh Davis  
Kathryn Sirois

## Employees of the Quarter

First Quarter	Stacy Brown, RN at the RAMCCC
Second Quarter	Suzanne Rafus, LPN at the Midwifery Clinic
Third Quarter	Dana Dean, IS Analyst
Fourth Quarter	Janet Tibbits, Central Supply Technician



A photograph of two women in a clinical setting. The woman on the right, Patricia R. Simon, RN, is smiling warmly at the woman on the left. She is wearing a blue and green patterned top and a name tag that identifies her as Patricia R. Simon, RN, FAAP, Registered Nurse, Pediatric Care, Massage Therapy. The background shows a room with pink chairs and a whiteboard.

“We are also able to guide parents through the birth process and through the early weeks after the baby is born. We stick with them.”

# Deep Roots in the Community

Patsy Sirois, RNC-OB, LMT, OCE, Head Nurse, Alice Peck Day Birthing Center



Patsy Sirois grew up in Sharon, Vermont. She has been at APD, the first hospital in New Hampshire to have a birthing room, since 1982. Today, prospective parents come from as far away as Maine to have their babies at APD. Why? Because APD offers a wide range of traditional and progressive birthing options: water births, no intervention, low-tech births, and a significantly lower rate of cesarean sections than the national average, which is thirty-three percent (at APD, it's between eight and fourteen percent). "We are not a high-risk institution, but we are well-prepared," says Sirois, "for the higher-risk births. It's unique for a hospital to have both the high-tech capability and the low-intervention skills."

"It's where I'd have a baby," says Patsy, a strong, warm presence in the birthing room she helped to create. "APD is small enough that we can offer options. Our nurses and doctors are open to new things, for example, using aromatherapy for relaxation, massage, or birthing stools. We are also able to guide parents through the birth process and through the early weeks after the baby is born. We stick with them." Like Dr. Mason, Patsy often runs into former patients. "The other day," she says in disbelief, "I ran into a woman in a department store whose two children I helped deliver. I was stunned when she said they were almost thirty!"

In 2000, Patsy started the massage therapy program at APD. The hospital administration was supportive of her decision to get training and certification for postpartum and other massage techniques. "Our overall philosophy in the Birthing Center is that innately a woman has the wisdom to give birth to her baby. We help her tap into that inner wisdom. Relaxation and trust are key."

"Across the board," says Patsy, "nurses stay here because there is the freedom to give people the kind of care we went into nursing to give." For Patsy and others, this means personal, individualized care. The Wellness Program, a smoking cessation program, a healthcare reimbursement fund and discounts on insurance premiums for non-smokers are just a few of the benefits offered to the staff. "Nurses don't come here to get rich. They come here because the work is fulfilling!"

At the reception desk, a nurse, in a quiet moment, knits one of the baby hats that APD babies wear on the first trip out into the world. "This is a community hospital," says Patsy. "It's important that people have a choice of hospitals. Our roots in this community are very, very deep."





# People Deserve a Choice of Health Care Options.

Barrie Sellers, President, GEOKON Inc., Lebanon

Barrie Sellers has a “soft spot” for APD. Born in Sheffield, Yorkshire, Barrie moved to the Upper Valley in 1975. He’s an engineer by training, and his company, Geokon, makes sensors that are used in large geotechnical projects around the world. He’s had a few procedures at APD, and each time he has felt not only that he’s in kind, caring hands, but also that he’s getting the benefit of cutting-edge medical expertise. Barrie’s wife was a nurse, so he appreciates all the more the personal care nurses at APD are known for. “It’s so easy to get your questions answered at APD,” he says, “it’s just easier to get through to someone who is familiar with your situation.”

Barrie’s company, Geokon, employs ninety-nine people; several have been with the company for over twenty years. “I like to be a good neighbor in my community,” says Barrie, clearly proud of Geokon’s annual fund drives and donations to local charities, some of them chosen by the employees. Much of the work at Geokon requires good team work to ensure customer satisfaction. Success depends on good communication and Sellers feels a resonance with the way staff work and communicate at APD. Several times a year, Geokon employees are encouraged to give blood at Red Cross blood drives. “This has gone a long way to alleviating the perennial blood shortages in the region.”



Healthcare isn’t getting any easier, says Barrie. He sees APD as an essential regional asset. “It’s important for citizens of the Upper Valley to have choices in health care and hospitals,” he says. “It’s good to have alternatives.”

“It’s so easy to get your questions answered at APD,  
it’s just easier to get through to someone who is familiar  
with your situation.”









# The Importance of Good Primary Care...

Claudia Gibson, President, Alice Peck Day Memorial Auxiliary

Claudia Gibson went to college at the University of New Hampshire and medical school at Dartmouth. She trained as a pediatric neurologist, came to APD in 1990, and now works in cognitive behavioral neurology. Her work takes her to schools throughout the Upper Valley. Claudia believes that medicine has changed a great deal in her lifetime. The emphasis has shifted to prevention, and patients take more responsibility for their own healthcare decisions. As for physicians and other healthcare professionals, she says, “We work more and more in teams, looking at the whole patient. Physicians are expected to teach the clinical staff nurses

what they do. People talk to each other. Doctors are heavily involved in the quality of care. Gibson believes that academic hospitals labor under the weight of top-heavy hierarchical infrastructures. At APD, there’s more teamwork. As a small community hospital, APD better captures and reflects the flavor of life in the Upper Valley.”

“As citizens of this community,” Claudia explains, “we have to be ready to respond to changes in our environment, from climate change to health issues. We are all affected by changes in temperature and air quality.” As President of the APD Auxiliary, Claudia organizes many events that raise funds for the hospital. APD has had an active volunteer corps since 1932. “Back then, the auxiliary corps might put food in the larder for patients; hold linen drives, donate potatoes! These days, we do all kinds of things, including work to make the hospital feel more welcoming, raising funds for landscaping, scholarships, picnics on the green and other community events.”

“APD is the prototypical community hospital. It responds to the needs of its community. We all pitch in to make it work.”



“We all pitch in to make it work.”



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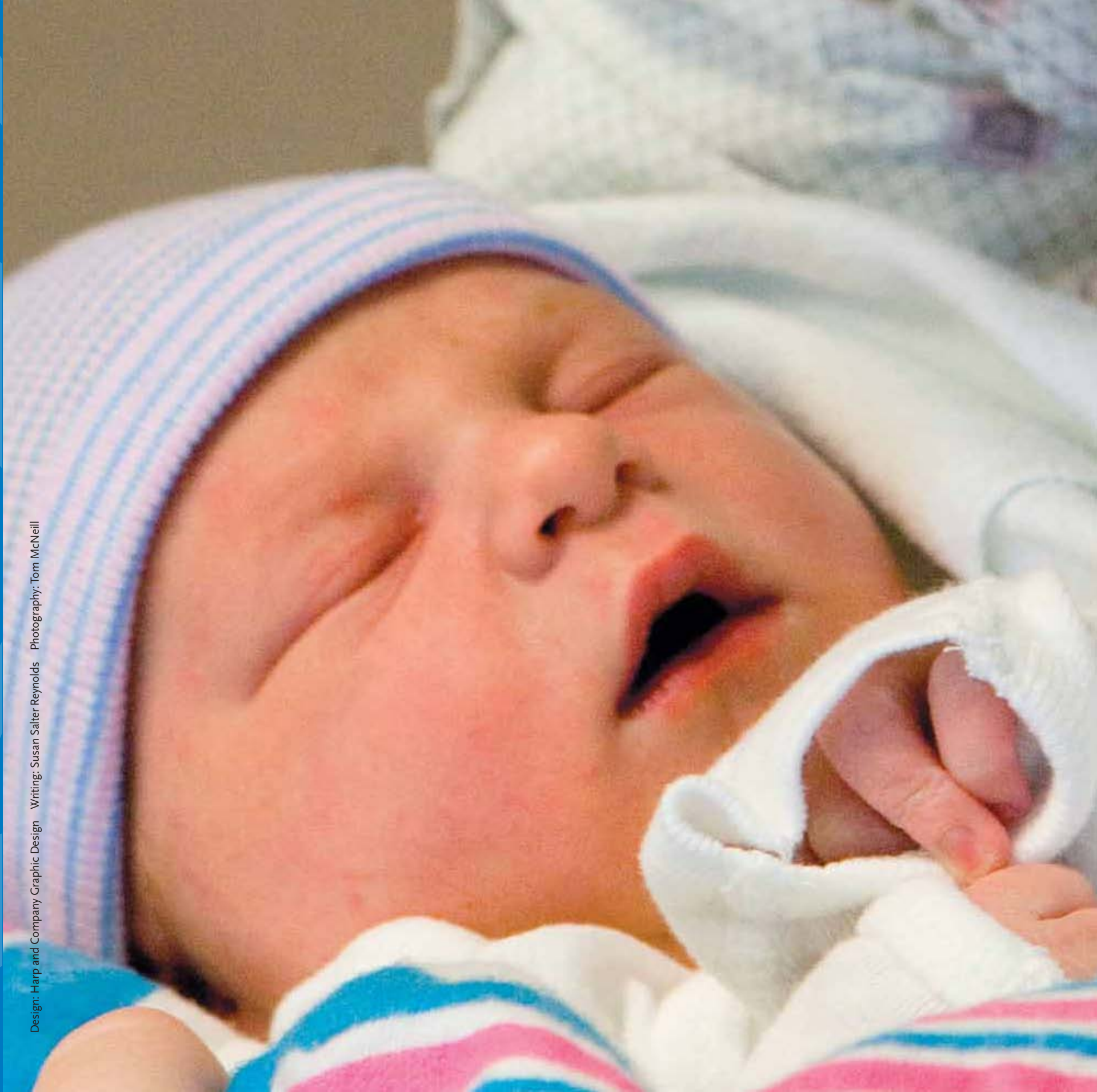
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