



Sinai Health System

A national model of urban health care delivery

AN ILLINOIS HOSPITAL ASSOCIATION PUBLICATION

IHA is pleased to focus this Profile in Health Care Leadership and Innovation on Sinai Health System in Chicago.

Profiles in Health Care Leadership and Innovation showcases the extraordinary work that hospitals across Illinois are doing to provide excellence and innovation in health care as well as the critical role they are playing in the transformation of health care.

This is the third in the series of profiles highlighting Illinois hospitals and health systems as they make strides in caring for their communities and preparing for the future.



Since its founding in 1919, Sinai Health System has been the safety net for its community, caring for underserved populations living in the state's most challenged neighborhoods. During Alan Channing's tenure as President and CEO, the organization has focused on elevating quality while continuing to emphasize its connection to the communities it serves. Sinai is on the path to achieve its vision of "becoming the national model for the delivery of urban health care."

- 5% COMMERCIAL INSURANCE (covers 125% of cost)
- 20% MEDICARE (covers 94% of cost)
- 15% SELF PAY (covers 0% of cost)
- 60% MEDICAID (covers 74% of cost)



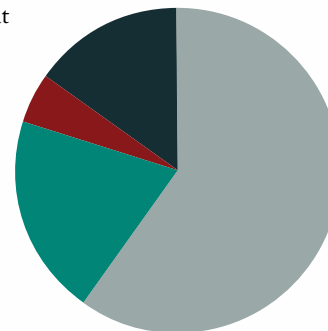
Alan Channing, President and CEO Sinai Health System

"It is an audacious vision, and I am pleased to report we are fulfilling it by providing quality patient care for our communities," says Channing. "As a recent example, last month we had a stellar visit from the Joint Commission which resulted in receipt of their Gold Seal of Approval."

Sinai has also been recognized for outstanding progress through the Surgical Care Improvement Project (SCIP)—a quality initiative sponsored by the Centers for Medicare and Medicaid Services in collaboration with the American Hospital Association, Centers for Disease Control and Prevention, the Institute for Healthcare Improvement, The Joint Commission and others. On the National Database of Nursing Quality Indicators (NDNQI)

survey, Sinai nurses scored significantly above the comparison group mean in their agreement about the organization making changes that support quality care. And that's just the beginning of the internal and external recognitions Sinai is earning for quality patient care.

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“These accomplishments are noteworthy for a safety-net provider on the west side of Chicago,” adds Channing.

“Our primary service area represents 15 zip codes in some of the most challenged communities with all the usual symptoms you would expect to see in an urban environment — high infant mortality, high unemployment, low high school graduation rates, high teenage pregnancy rates, and all the chronic diseases that come from poor socioeconomic conditions,” explains Channing. With roughly 75% of its funding coming from the State of Illinois, Sinai is one of the State’s largest partners. Its payer mix — 60% Medicaid, 20% Medicare, 5% commercial insurance, 15% self pay — tells the story of the individuals and families who rely on Sinai for care.

Despite these financial challenges, Sinai has achieved national recognition for its innovative approaches to improving community health.

In 2010, Sinai received the American Hospital Association’s prestigious NOVA Award for its hospital-led community effort to educate families and reduce the severity of pediatric asthma through a collaborative effort of the hospital, community leaders and organizations.

Sinai Ranks in the Top Decile Nationally on 94% of Core Measures

Central to its mission and vision is the health system’s focus on continually strengthening the quality of patient care — and the results have been significant.

“I can remember having a conversation with the Board about how important quality was going to be to us,” says Channing. “The Board said, ‘we’re not a wealthy hospital with a great payer mix, and we can’t buy all the kinds of things or have the facilities those places have.’ But, our response as management and the medical staff was, ‘That’s not what it’s about. It’s about how we take care of patients every day.’”

At Sinai, according to Channing, everybody has a quality indicator that he or she is accountable for, and quality measures and outcomes are an agenda item for every department meeting. “We are always raising the bar a bit higher by asking, ‘What have you added recently’ and ‘How are you progressing?’”

Sinai’s team focus on quality has led to remarkable results. Today, it ranks in the top decile nationally on 94% of the Centers for Medicare and Medicaid Services’ core measures.

“We’ve been able to demonstrate that we can achieve quality patient care even as a financially-challenged organization,” notes Channing.

Community-Based Health Care Begins with Pre-Primary Care

Integral to Sinai’s vision is a concept called “pre-primary care” — a community-based initiative that goes beyond health care services and the four walls of the hospital — to help prevent disease and keep the community healthy.

The two main components of the Sinai pre-primary care model include:

- **Sinai Community Institute**, a community outreach function begun in 1994; and
- **Sinai Urban Health Institute**, which identifies health disparities and develops programs to address these disparities.

“In 2005, the health system reorganized to integrate the Institutes into the mainstream hospital activities,” explains Channing. “Encouraging the staff, the caregivers at Sinai, to make this a focal point has helped to build relationships outside the organization’s four walls and make a difference in our community.”

According to Channing, Sinai Community Institute started out as “kind of a social service function” but has grown to represent 25 unique community outreach programs. Patterned after the lifecycle of an individual, it starts with pregnant and parenting teens, and continues with after-school programs, workforce development, elder abuse programs, and senior citizen support. These programs engage the community and offers a full array of services.

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– Alan Channing

Sinai Community Partnerships

Making a Difference

Sinai Community Institute Programs

- Delayed/Subsequent Pregnancy Program
- Sinai Parenting Institute
- Women, Infants and Children (WIC)
- All Kids
- North Lawndale Immunization Project
- The Greater West Side of Chicago Early Childhood Network
- Illinois Poison Center Program
- Learn Together After School Program
- Juvenile Intervention Support Center
- Training and Employment
- Computer Resource Center
- SCI Hotline 21 – Community Health Program
- Sinai Women to Women
- Sinai Healthy Living Initiative
- Whole Foods Market Smart Shopper Initiative
- Chicago Family Case Management
- Family Development Initiative
- Sinai Health and Ministry Program
- Sinai Senior Services
- Sinai Senior Center

Sinai Community Institute's Women, Infants and Children's (WIC) program opened its doors to the surrounding communities in 1986, and because of the tremendous need of its underserved population, has grown into an essential resource for mothers and their young children. Currently, it provides nutrition education and access to nutrition services for more than 13,000 clients and has a location within the Chicago Mexican Consulate. Because Sinai's WIC program has become a recognized model of WIC services, the State of Illinois uses it as a training location for many of its new staff.

Another innovative program is the Sinai Urban Health Institute (SUHI). As the evaluation and research institute within Sinai Health System, its vision is to serve as a leading urban health research institute for eliminating health disparities and working toward health equity. Its mission is to develop and implement effective approaches that improve the health of urban communities through data-driven research, evaluation and community engagement. A major component of SUHI's work involves examining the impact of social issues such as poverty on health. Founded in 2000 as part of Sinai Health System, the SUHI team strongly believes that, if they collect data and do not use it to make things better, they have failed.

SUHI focuses its work on eliminating health disparities in five key areas: asthma, breast cancer, diabetes, obesity, and smoking prevention. In addition, SUHI evaluates projects regarding HIV prevention and access to care for Deaf and Hard of Hearing individuals.

"This is a group of epidemiologists who study what happens in the community," explains Channing. "They've done the largest door-to-door health status survey ever conducted in Chicago — and we've taken the information from that survey and started to create community-based interventions. We use basically the same technique as community organizing. Our perspective is that while we're the health care provider, the community is composed of people who know what they need more than we do. So, we say, 'Let's have a dialogue.' Let us tell you about what we know about your health care, and then you can help us figure out where we should focus."

"It's one of the interesting things we've done," says Channing. "We have created an entrepreneurial environment, social entrepreneurship, if you will."



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“One major lesson we’ve learned is that for every dollar we invest in one of these community outreach educators, we’ve been able to save acute-care spending of roughly \$13.47,” notes Channing.

Together, Sinai’s Urban Health and Community Institutes have established a model program for community interventions — Healthy Home, Healthy Child: The West Side Children’s Asthma Partnership. With funding from the Centers for Disease Control and Prevention, Sinai initiated this comprehensive program after seeing large numbers of children in the Emergency Room in acute distress and then being admitted to its children’s hospital. The program centers on an intensive house-to-house initiative led by community health educators hired by Sinai to address asthma medically, socially and environmentally. This program is targeted to communities on the West Side of Chicago because they have a significantly higher rate of asthma than the rest of the city. Trained to look for triggers within the homes that cause asthma symptoms, community health educators explain to the family the dangers of these conditions. If necessary, housing attorneys are engaged to provide pro-bono support to deal with landlords. Community educators follow up with their assigned families six times a year, reducing these families’ medical bills and preventing asthma symptoms in their children.



“We’ve learned a couple of really interesting things as a result of this program,” says Channing. “The first is that we — both our physicians and the health system — need to do a better job of educating parents about asthma triggers and, more importantly, how to use asthma medication. We also found that people don’t know about asthma triggers so we’re spending time in their homes to make sure they don’t have pets that are giving off dander, or plants, or their 1953 shag carpet — all of which could trigger asthma.”

This concept and model is now being deployed to tackle the issue of diabetes in the community through the Block by Block Diabetes Community Action Program, which combats diabetes in the community on an individual block basis. It uses community health educators to visit homes, coordinate cooking and exercise activities, and support residents in making the fight against diabetes a neighborhood priority.

Block by Block encourages everyone to know his or her diabetes status. Community members receive education on what they need to do if they are diabetic. Also, community members are encouraged to talk with their friends and neighbors about diabetes and work together to improve access to quality foods and to become communities where it is safe to exercise outside.

“If one thinks about this as an investment and a rate of return, there’s no place that I know of where you can get this kind of payback — with the ability to put people to work at the same time. At Sinai, we’re giving jobs to the community, as well as improving the health status in the community. This is how the cost curve really gets bent and is the way to think about the future of health care.”

Sinai Health System

Mission Statement

To improve the health of the individuals and communities we serve

Vision Statement

Sinai Health System will become the national model for the delivery of urban health care



At a Glance

Mount Sinai Hospital

- 319-bed, major teaching hospital
- Trains more than 700 health care professionals every year
- Level I Trauma Center providing emergency care to nearly 60,000 patients annually
- Welcomed more than 3,100 newborns in 2010

Sinai Children’s Hospital

- Level III neonatal intensive care unit
- Pediatric intensive care unit
- Pediatric trauma care
- Pediatric surgery and anesthesiology

Schwab Rehabilitation Hospital

- Traumatic brain injury
- Stroke
- Spinal cord injuries
- Recreational therapy
- Therapeutic rooftop garden
- Subacute care
- Top 10% nationwide for Functional Independent Measure Gains

Sinai Medical Group

Sinai Community Institute

Sinai Urban Health Institute

What's Next for Sinai

The Sinai Tomorrow Project

Looking ahead, Sinai plans to advance its unique legacy of healing and community engagement through The Sinai Tomorrow Project — an innovative plan for health care and neighborhood revitalization. Scheduled for completion in 2016, the Project includes new outpatient and inpatient pavilions, as well as modernized existing campus facilities.

Sinai and the Chicago Housing Authority finalized a historic land transfer agreement that will enable the construction of up to 300 new units of mixed-income housing in North Lawndale, with the first 137 rental housing units scheduled for completion in fall 2011.

Channing acknowledges that Sinai's financial situation is challenging since it is underwriting the cost of care provided by specialty physicians and the uninsured because of low Medicaid rates. However, he points out that it is the first time in a generation that Sinai has considered building a facility. "In the meantime, we still have to have the infrastructure to provide high quality health care services to this important community. So, our job is to continue to be an economic engine, a health care provider, a catalyst for community development, and, frankly, a home for our community."

"This is how the cost curve really gets bent, and is the way to think about the future of health care."

– Alan Channing

Listen to the podcast with Alan Channing, President and CEO, Sinai Health System, by going to IHA's website — www.ihatoday.org. Podcasts are under *News and Reports*.

**PROJECT
PLANNING
AND DESIGN**
2010-2014

**NEW
CONSTRUCTION
AND RENOVATION**
2014-2016

**NEW AND
RENOVATED
FACILITIES OPEN***
2016

* Project is subject to City, State and Federal reviews and approvals

By the Numbers: SINAI Health System

| | Mount Sinai Hospital | Schwab Rehabilitation Hospital |
|----------------------------|-----------------------------|---------------------------------------|
| Authorized (licensed) beds | 319 | 102 |
| Inpatient admissions | 18,074 | 1,561 |
| Outpatient visits | 15,473 | 43,954 |
| Emergency | 55,809 | |
| Births | 3,143 | |
| Physicians | 417 | 132* |

Data as submitted to IDPH 3/31/2011

*As reported to AHA on 2010 survey

Community Commitment: Chairman of the Board



Sinai Board Chair Steve Koch cycled across the southern United States to heighten awareness and raise money for Sinai Health System and The Sinai Tomorrow Project.

With his son Jacob, Koch completed a 3,100-mile cross-country bicycle ride that began on September 6, 2010, in San Diego, California, and ended on October 31, 2010, in St. Augustine, Florida. Together, they raised \$500,000.

SINAI DEMONSTRATES TIKKUN OLAM

“Since our founding, Sinai has demonstrated Tikkun olam,” explains Channing. “This Hebrew phrase, taken from the Old Testament, can be translated a couple of different ways, but my favorite is repairing the universe. It also gets translated as making the world a better place for your sisters and brothers, and caring for your neighbors.”

Caring and Commitment at Sinai

Among the anecdotes told by Alan Channing is the story of the caregiver’s commitment to Sinai and its patients during the February 2011 blizzard – Chicago’s third largest recorded snowstorm.

“Late that night as I was making rounds, I heard a story about one of the housekeepers who had walked through the worst of the snowstorm to come to work. I ran into him and stopped and thanked him. He said, ‘Mr. Channing, I want you to know that’s it not about you, it’s not about the paycheck.’ He turned and pointed to a patient’s room and said, ‘It’s about the patients.’”

“That’s what it’s all about, we are here to take care of patients – it’s a personal commitment and a passion for what we do.”

