



GOOD SHEPHERD
PENN PARTNERS

Official Therapy Provider for  Penn Medicine

2016

COMMUNITY REPORT





2016

COMMUNITY REPORT

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On behalf of the employees and patients of Good Shepherd Penn Partners –

THANK YOU

for your continued support and interest in the work we do.

We have been able to help patients reclaim their lives because of the compassionate care and innovative research employees do at Good Shepherd Penn Partners. Each day, our 735 employees put our mission into action by defining and implementing evidence based practice across the continuum of care. Our highly trained clinical team see beyond the disease or medical condition; creating each person with customized programs to help them achieve their goals.

Our Respiratory Therapists (page 8) help patients and their families breathe easy, literally, with the combination of compassion and quality care. In addition to treating patients at our organization, physical therapists like Colleen Chanler, PT, MHS and Carol Wamsley, PT, DPT, BS, NCS, CBIS (page 24) serve as leaders in clinical care on a state and national level. Our employees go beyond the walls of our organization to evolve as clinicians with the goal to be able to better treat patients at Good Shepherd Penn Partners. The unwavering dedication to being on the cutting-edge of research and innovation is what makes our employees special.

Good Shepherd Penn Partners is dedicated in prioritizing the people who take care of the patients, which has been crucial as we continue to expand our services to partner with more patients with the goal of helping them realize life's potential.

I want to thank the Good Shepherd Penn Partners Board of Directors, our partners at Penn Medicine and Good Shepherd, staff, donors, volunteers, patients and their families for all that they achieved in fiscal 2016.

We look forward to the continued success in 2017!

Sincerely,



LAURA PORTER

Executive Director, Good Shepherd Penn Partners



LAURA PORTER

APPOINTED EXECUTIVE DIRECTOR



Laura Porter was appointed Executive Director of Good Shepherd Penn Partners by the organization's Board of Directors in October 2015. After a national search was conducted for a forward-thinking leader who would be responsible for clinical care, daily operations, employee engagement and patient satisfaction, Laura was selected to serve in this crucial role.

As Interim Executive Director since March 2015, Laura demonstrated her ability to advance the mission of Good Shepherd Penn Partners with dedication and passion. Through her adept leadership, she continues to oversee the operational and financial performance of the organization and strengthen the partnership with Penn Medicine and Good Shepherd Rehabilitation Network (GSRN).

Prior to taking on the Interim Executive Director role, Laura served GSRN as a member of the senior leadership team for three years as Vice President, Human Resources. She has more than a dozen years of experience in the healthcare industry and more than ten years of experience in customer-centric industries, including telecommunications and insurance. Laura brings significant day-to-day operational experience to the Executive Director's position along with strong interpersonal skills.

The healthcare industry has changed during the past eight years since the partnership between Penn Medicine and GSRN formed. Value-based care and bundled payment models are redefining how all healthcare is delivered, and in recognizing this mandate, the Good Shepherd Penn Partners' Board of Directors embarked on a search for a new Executive Director who could

chart the course during an era demanding higher value (higher quality at a reasonable cost) from the post-acute health delivery system. Laura's experience as a senior executive, coupled with a keen understanding of the rehabilitation business and her diverse experience in the healthcare arena, continue to serve the partnership well as we move forward in this tumultuous healthcare market, with its many changes in the funding and provision of post-acute care.

The Executive Director of Good Shepherd Penn Partners plays a vital role in managing this highly-successful partnership in a changing environment, while maintaining the focus on the care of our patients and staff. Laura will continue to focus on patient satisfaction, nursing quality of care, employee engagement and finding new ways to align services to support Penn Medicine's strategies. She continues to build relationships with executive directors and clinicians at each Penn Medicine facility, including key leaders in case management, marketing, nursing and physician leadership.



JEAN ROMANO MSN, RN, NE-BC APPOINTED CHIEF NURSING OFFICER



On April 23, 2016, Jean Romano MSN, RN, NE-BC was appointed **Chief Nursing Officer (CNO)** of Good Shepherd Penn Partners. Brought on to Good Shepherd Penn Partners in 2015, she successfully helped with

implementing new methodology to enhance our nursing care delivery model, including developing success measurements to validate impact. Prior to joining Good Shepherd Penn Partners, Jean worked at the Hospital of the University of Pennsylvania (HUP). She possesses almost 30 years of experience with progressively increasing nursing responsibility at HUP. As Chief Nursing Officer, Jean oversees nursing and respiratory therapy services for The Specialty Hospital at Rittenhouse and Penn Institute for Rehabilitation Medicine (Penn Rehab).

FRANK CALDERA DO, MBA APPOINTED CHIEF MEDICAL OFFICER



On June 1st, 2016, Dr. Frank Caldera DO, MBA was appointed **Chief Medical officer (CMO)** for the Penn Institute for Rehabilitation Medicine (Penn Rehab) and the Department of Physical Medicine and Rehabilitation (PM&R). Dr. Caldera

began working at the Hospital of the University of Pennsylvania (HUP) in August 2010. Prior to this role, he served for the past year-and-a-half as the assistant CMO and as the associate director of the residency training program.

In this role, Frank works closely with the medical directors of the different services at the Penn Rehab, as well as the nursing and therapy leaders. In addition to the CMO role, he has assumed the role of physician quality and patient safety officer for Penn Rehab. In this role, Frank will direct Penn Medicine Consultative services to promote care for patients requiring rehabilitation services.

LEADERSHIP PROMOTIONS



On April 24, 2016 **Arley Johnson, MS, OTR/L**, was appointed the **Director of Therapy at Pennsylvania Hospital and Penn Presbyterian Medical Center**. Since joining the organization in 2006, Arley has been called upon to provide interim leadership within Good Shepherd Penn Partners in varying capacities, in addition to most recently the site manager for Pennsylvania Hospital. In this role, Arley manages the therapy operations and program development for the acute therapy at Pennsylvania Hospital and Penn Presbyterian Medical Center.



On April 24, 2016 **Colleen Chancler, PT, MS** was appointed the **Director of Therapy at the Hospital of the University of Pennsylvania**. Since joining the organization in 1997, Colleen has been a driving force for expanding acute rehabilitation services, most recently serving as the site manager at the Hospital of the University of Pennsylvania. Colleen has served as a Pennsylvania delegate in the American Physical Therapists Association House of Delegates and is currently serving as the

Pennsylvania Physical Therapist Association President Elect for 2016, after which she will assume the role of Chapter President in 2017. In this role, Colleen manages the therapy operations and program development for the acute therapy at The Hospital of the University of Pennsylvania.



On February 1, 2016 **Natalie Blanden, BSN, RN** was appointed the **Director of Nursing for Penn Institute for Rehabilitation Medicine (Penn Rehab)**. Since joining the organization in 2011, Natalie has held several roles—including clinical coordinator and the Specialty Hospital at Rittenhouse nurse manager. She has served as the interim director of nursing since May 2015, and has been instrumental in the growth of our nursing program, by helping to develop disease-team-specific nursing education, regulatory compliance and bedside nursing. In this role, Natalie oversees of the programmatic development and daily operations of nursing at Penn Rehab.



On April 24, 2016 **Joseph Muniak, OTR/L** was appointed the **Director of Inpatient Therapy Services for Penn Institute for Rehabilitation Medicine (Penn Rehab)**. Since joining the organization in 2005, Joseph has been a driving force behind the inpatient therapy program at Rittenhouse, including serving as Therapy Manager for Penn Institute for Rehabilitation Medicine (Penn Rehab). In this role, Joseph manages the therapy operations and program development for Penn Rehab and the Specialty Hospital at Rittenhouse.

THE JOURNEY TO CALM WATERS

GEOFFREY'S STORY

Known for sailing around the world as the captain of his own boat, Geoffrey Bennewith has navigated through rough waters during his 89 years. So when an unexpected event threatened to throw his life off course, Geoffrey was determined to return to calm waters—even if it meant traveling across the globe for life-saving medical care.

After a nasty fall led to a broken hip at his home in St. Croix, Geoffrey's needed more advance care. "They did the best they could with their resources in St. Croix," shares his wife and caregiver, Eleanor.

Knowing that her husband's condition was dire, Eleanor reached out to Penn Medicine Orthopaedic surgeon, Dr. Craig Israelite. Previously, the Bennewiths had traveled to Philadelphia for Geoffrey to undergo an elective knee replacement. In July 2015, Geoffrey and Eleanor were brought to Penn Presbyterian Medical Center by helicopter, where they would relocate to Philadelphia for more than ten months. When arriving in acute care, Geoffrey was completely deconditioned, unable to sit or stand up without assistance.

"It had not been too long ago that I was crossing the Atlantic in my own boat. Before all of this happened I had really been active," says Geoffrey. "Initially, I wondered if all of the exercises were worthwhile, and if it would really help me do anything."

On July 25, 2015, Geoffrey underwent hip surgery to address the pain and continued mobility issues he was experiencing since his fall. But due to the weakened state of his body, his post-operative course was complicated by a number of medical issues. The acute physical and occupational therapists, as well as speech language pathologists at Penn Presbyterian Medical Center, were the first line of therapy services to begin Geoffrey's long road to recovery.

The next step in Geoffrey's recovery brought him to subacute inpatient rehabilitation at Penn Center for Rehabilitation and Care where he received daily therapy with physical and occupational therapists, and speech language pathologists to build his strength and endurance. Bradley G. Tucker, MD Assistant Professor of Clinical Physical Medicine and Rehabilitation (PM&R), played a critical role in working with Geoffrey's physical rehabilitation team to prepare him to transition to acute inpatient rehabilitation at Penn Rehab.

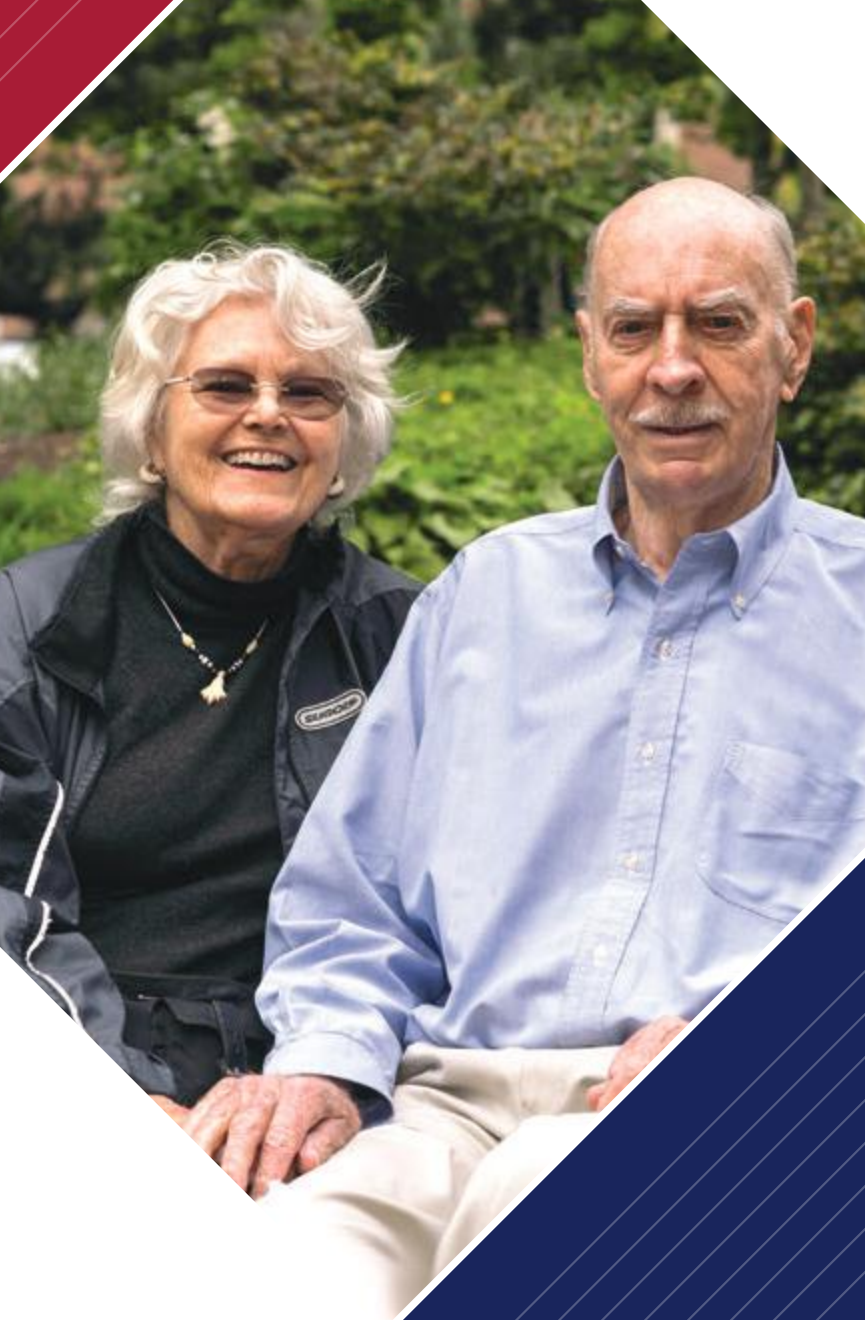
"Dr. Tucker was very hands on with Geoffrey's care, and came to participate in his scheduled therapy sessions," said Megan Link, MS, OTR/L, Therapy Site Manager at Penn Presbyterian Medical Center. After seven weeks of therapy at Penn Center for Rehabilitation and Care, Geoffrey's physical strength, mobility and tolerance for activity had significantly increased and he transitioned to acute inpatient rehabilitation at Penn Rehab.

After spending four weeks at Penn Rehab with three hour therapy sessions each day, Geoffrey had increased his independence to a level where he was able to join his wife at their hotel while completing his last phase of recovery.

"My opinion of the ability for my body to respond to therapy has changed. Particular spots that I had doubts of recovering have come right once again," says Geoffrey. "Continuing to keep at it in therapy, and all of the effort outside of sessions is the thing. If I did not come here for treatment, I would be underground."

After completing several months of outpatient physical therapy at Penn Therapy & Fitness University City, the Bennewiths were finally able to return home in May of 2016 after nearly a year of being away. Finally past the storm of uncertainty, Geoffrey and Eleanor are looking forward to the future on their horizon, which includes celebrating their 50-year wedding anniversary in 2017 with a party on the same dock in St. Croix where they met on a blind date.

"The team that treated Geoffrey through the Penn Medicine continuum is touted among the top ten in the nation," says Eleanor. "But for me, care here is number one."



Project SITUP

recognized by
Delaware Valley Healthcare Council



On November 6, 2015 at the Annual Meeting of the Delaware Valley Healthcare Council, The Hospital of the University of Pennsylvania (HUP) was honored with the second-place Patient Safety and Quality Award for developing and implementing *Project SITUP*, a protocol that cut in half the number of hospital patients with aspiration pneumonia. *Project SITUP* was selected from more than 40 patient safety initiatives in southeastern Pennsylvania. Forty-four clinical and patient safety leaders from the region's hospitals scored these submissions to determine the top ten projects and three award winners.

In January 2014, *Project SITUP* was developed and implemented by an interprofessional team of nurses, physicians, and speech/language pathologists (SLPs). Randy Dubin, MA, CCC-SLP, Speech Pathology team leader and Nadine Amsterdam, MA, CCC-SLP, Advanced Clinician II, were instrumental in the implementation of *Project SITUP* to decrease aspiration risk for patients.

SITUP stands for Screen, Identify, Test, Understand, Plan and is a quality improvement process utilizing an evidence-based system to guide clinical decision-making for aspiration pneumonia prevention. Aspiration pneumonia can lead to serious complications for hospitalized patients, including death but with proper precautions and observation it is easily preventable.

Based on the success of preventing aspiration pneumonia, It was determined that an annual competency and on-going education would be crucial to the sustainability of *Project SITUP*. As a result, the interprofessional team created an online learning module and in person education. *Project SITUP* was strongly aligned with strategic imperatives for quality and safety which focus on 'Engagement, Continuity, and Value to improve the health of our patients and assure safe care.'

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—ELEANOR BENNEWITH
Wife of Geoffrey Bennewith

BREATHING EASIER DURING REHABILITATION



Hospitalization can be daunting for both patients and families. But when a patient has to rely on assisted breathing devices the experience can be much more stressful. The respiratory therapy team at the Specialty Hospital at Rittenhouse understands that and does everything possible to help patients, along with their love ones, breathe a bit easier.

The respiratory therapists are part of the multidisciplinary care team providing treatment for medically complex patients requiring long term acute care in order to continue their recovery. With expertise in coronary and pulmonary medicine, respiratory therapists work to place and maintain advance airways in patients including trach tubes, breathing tubes, support system ventilators, and bipap machines. Additionally, the respiratory therapy team works to wean patients who are ventilator dependent, with the goal to regain the ability to breathe again.

“Our goal of treatment is to figure out how to get patients weaned off of a ventilator, or if that is not possible, ensuring a better quality of life while on the machines,” says respiratory therapist Brian Walters, RRT, MA. “We work with the multidisciplinary team to figure out what the hurdles are and try to get over them together.”

The Specialty Hospital at Rittenhouse continues to treat the most complex patients. In fiscal year 2015, our ventilator wean rates surpassed national averages by 11%, with ours at 73%.

While working towards the goal of weaning patients off of a ventilator at the Specialty Hospital at Rittenhouse, respiratory therapists also help patients improve their quality of life.

“Losing the ability to communicate is one of the hardest things. Maybe a patient is unable to come off a ventilator permanently, but for a short duration of time they can come off to speak to their loved ones or to address a need we are not meeting,” explains Brian. “As a team, we work together to figure out how to make that possible in a safe way. For a patient to be able to vocalize that they are okay and say ‘I love you’ to their families eases anxiety for both.”

Former Specialty Hospital at Rittenhouse patient Michael McGonigle knows firsthand the crucial role respiratory therapy plays in treating critically ill patients in long term acute care. At age 52, Mike found himself dependent on a ventilator after developing sepsis from a life-threatening case of pneumonia.

When he was ready to be transferred from acute care, the decision to come to the Specialty Hospital at Rittenhouse was influenced by the outstanding reputation of ventilator liberation.

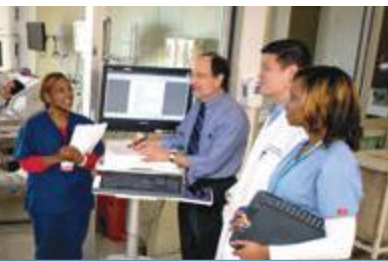
“One of the main reasons we came to the Specialty Hospital at Rittenhouse was because of their respiratory therapy treatment,” says Michael. “There was someone from respiratory therapy caring for me 24 hours a day, providing constant care.”

Within two and half weeks of recovering at the Specialty Hospital at Rittenhouse, respiratory therapy was able to liberate Michael allowing him to continue his recovery through inpatient physical rehabilitation at Penn Rehab.

Our respiratory therapists collaborate with physicians, physical therapists and caregivers, so that patients have an entire team working to return them to the highest quality of life possible.

“Everyone in this building cares about the patients, and is committed to providing the best possible medicine that we can,” shares Brian. “Be assured that if you or a loved one are at the Specialty Hospital at Rittenhouse, we are all-in to do whatever it takes to progress during your recovery.”





Integrating CPUP Physicians into LONG-TERM ACUTE CARE



Fiscal year 2016 marked the full integration of Clinical Practices of the University of Pennsylvania (CPUP) hospitalists into the Specialty Hospital. Over 1,500 nurses, nurse practitioners, physicians and other care providers make up the exceptional health care team of CPUP. The shift has provided enhancements to patient care, including a three-physician-lead team with staggered start times to accommodate work flow, admissions and discharges to the Specialty Hospital at Rittenhouse. In addition, the CPUP physicians began to rotate on a two-week cycle rather than one week.

In July 2015, Dr. Jerry Jacob, MD, began to work closely with Patient Safety Manager Laura Murphy, BSN, RN, along with the entire clinical team to enhance patient care and work flow.

"One of the most notable impacts of integrating CPUP hospitalists is the benefit to transitions in care. This integration in providers improves communication across the continuum of care and offers comfort to patients in knowing that the same group of physicians will be caring for them from their acute care admission through their discharge from The Specialty Hospital," says Jacob. "Having worked closely with these physicians, and having been a former hospitalist myself, I can also attest to the excellent quality of their work."

As part of the Division of Infectious Diseases at Penn Medicine, Dr. Jacob works alongside other infectious diseases physicians with expertise in a wide range of areas to provide consultations at The Specialty Hospital at Rittenhouse, The Hospital of the University of Pennsylvania (HUP), and other entities across the health system.

"This collaboration provides The Specialty Hospital at Rittenhouse Shepherd Penn Partners patients with access to the expertise of some of the brightest minds in the field of infectious diseases," says Jacob.

Through a collaborative effort led by Dr. Jacob, throughout the year multifaceted responses including additional education, additional decontamination technology and additional intervention implementations to strengthen prevention efforts impacted care provided on our long-term acute care service level.

"As a result of these efforts, our rate of catheter-acquired urinary tract infections dropped to zero

for the last quarter of the fiscal year, and improved overall from the prior year. Our rate of *C. difficile*

infections has remained exceptionally low after the implementation of the new interventions during the first two months," says Jacob. "Other efforts include a reformulation of the antibiotic approval process to improve stewardship of antibiotics, preparation for a successful regulatory visit by the Joint Commission, revision of our treatment guidelines for urinary tract infections, education of Penn Medicine Physical Medicine and Rehabilitation (PM&R) physicians-in-training, and a few others."

Currently, Dr. Jacob is working with staff to formally review all policies related to infection prevention and control, with one of the goals being to find areas where practices can be closer aligned to HUP. Another important project this year was to revamp the process for disinfection of our endoscopes. In recent years, other facilities across the US have noted transmission of highly drug-resistant bacteria associated with the use of these devices. Infection prevention colleagues at HUP have special expertise in this area, so Dr. Jacob invited them to review practices in person. As a result, revisions in protocol we are able to be made to assure that the highest standards of disinfection are being used to keep patients safe.

"While Good Shepherd Penn Partners is certainly distinct from HUP as a post-acute care facility, there are several areas where creating uniform practices across facilities will create smoother transitions for patients, facilitate better implementation by staff, and strengthen our efforts at preventing healthcare-acquired infections," says Jacob. "We are able to learn from the experiences of other providers within Penn Medicine and work together on infection prevention initiatives across the healthcare system."

With alignment and infection prevention initiatives continuing to develop through the efforts of the entire clinical team's collaboration with the health system, both patients and staff will be able to reap the benefits of progress.



BRINGING MOTIVATION TO THE FOREFRONT OF REHABILITATION

SAM'S STORY

Sam Karsch woke up during the night in late September and knew, almost immediately, that something wasn't right. Sam had been aware of his slightly-elevated blood pressure and cholesterol lately, but was in otherwise perfect health when he found himself in a less-than-perfect situation.

"I wanted to go to the bathroom and did not have support on my left side," recalls Sam. "And I said to my wife rather boldly, 'I am having a stroke.'"

His wife, Carole, who had seen him carry a 30-lb Torah in synagogue during High Holiday services earlier that evening, was in disbelief as she brought him to the emergency room. "He walked three miles that morning. To see him saying that he was having a stroke and bent over the bed like that was unbelievable."

But her husband's intuition was correct—Sam had suffered an ischemic, non-bleeding/clotting stroke on the right side of his brain, impacting the left side of his body. Sam was transferred to Penn Rehab to begin intensive inpatient physical and occupational therapy.

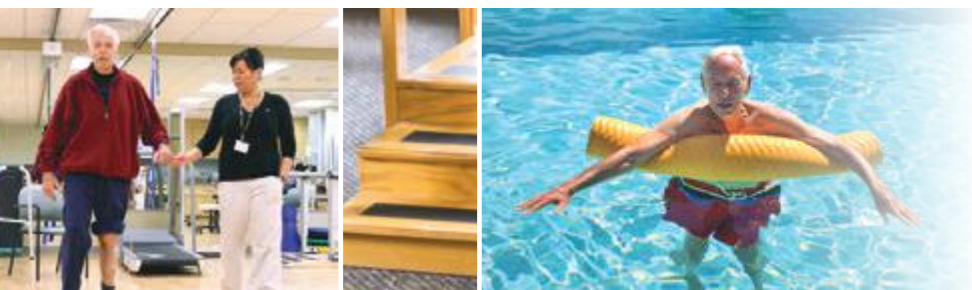
"From day one, I was motivated because of my pre-stroke condition," says Sam, who had been used to walking to work and back each day—a three-mile round-trip. "I said to myself, 'I've got to get back to where I was before this whole thing happened.'"

Although Sam was highly motivated, he was also frustrated by not being able to accomplish seemingly easy tasks.

"I would be given an assignment and I just couldn't do it," says Sam. "'Move something from here to there.' And I said, 'I can't do it.' And they would say, 'You CAN do it.' They were mentally and physically pushing me to make it happen."

Subsequently suffering additional stroke, Sam's therapy became even more challenging, but both he and Carole credit his therapy team for keeping him motivated. "When we got home, I said 'Hallelujah!'" laughs Sam. After having home therapy, Sam started the outpatient phase of his recovery at Penn Therapy & Fitness Rittenhouse. Sam has completed occupational therapy and physical therapy where he continued to increase his mobility and gain greater function throughout his body. Since celebrating his eighty-first birthday in late December, Sam has been focused on restoring his health so that he and Carole could revisit the plans they had made together before his stroke.

"My short term goal was that we have a shore house in New Jersey—it's on the boardwalk," says Sam. Although the two had planned to spend the winter in Florida last year, Carole is hopeful that, if anything, Sam will be able to do some swimming at the Shore this summer, and enjoy the ocean air closer to Philadelphia. "Will I be able to sit on a 3 wheeled bike on a boardwalk? Will I be able to take a walk on the boardwalk?" questions Sam. "I don't know. But I can get into a pool. And that's something!"



“ WILL I BE ABLE TO SIT ON
A 3-WHEELED BIKE ON A BOARDWALK?
WILL I BE ABLE TO TAKE A WALK ON
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BUT I CAN GET INTO
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—SAM KARSCH
Ischemic Stroke Patient



Commitment to Quality: CARF & TJC ACCREDITATION

In October 2015, the Penn Institute for Rehabilitation Medicine (Penn Rehab) and Penn Therapy and Fitness Rittenhouse formally received our three-year re-accreditation from the **Commission on Accreditation of Rehabilitation Facilities (CARF) International**. CARF is an independent, nonprofit organization that focuses on advancing the quality of services to meet the needs of patients for the best possible outcomes. CARF accreditation recognizes the highest commitment of an organization to continually enhancing the quality of services and programs, with a focus on the satisfaction of the persons served.

Surveyors evaluated our programs, and engaged with team members, current patients, former patients, payers and referral sources. The CARF teams and staff prepared for re-accreditation in comprehensive inpatient, stroke, brain injury and amputee rehabilitation programs, as well as our first-time accreditation in spinal cord system of care.

Our success is a result of the hard work and dedication of the entire team and quality of our programs. The programs that were part of our CARF Survey and for which we received accreditation for three years are as follows:

COMPREHENSIVE INPATIENT REHABILITATION

AMPUTEE SPECIALTY PROGRAM

BRAIN INJURY SPECIALTY PROGRAM

STROKE SPECIALTY PROGRAM

SPINAL CORD SYSTEM OF CARE

In April 2016, the acute therapy team at the Hospital of the University of Pennsylvania (HUP and The Penn Medicine Physical Medicine and Rehabilitation department participated in the tri-annual survey by the **Joint Commission (TJC)** for HUP. The Joint Commission is an independent, not-for-profit organization that accredits and certifies nearly 21,000 healthcare organizations and programs in the United States. Joint Commission accreditation and certification is recognized nationwide as a symbol of quality that reflects an organization's commitment to meeting certain performance standards.

Surveyors conducted a full survey of the facilities and clinical care. The feedback from the surveyors highlighted the skill level and compassionate care that our team provides for the patients they treat each day. The surveyors even commented that the clinical expertise should be highlighted on their web page. From the mobility of the patient, to the education for post-acute services, to the care given in extraordinary circumstances, TJC was complimentary and consistent in saying the quality and level of care provided was exceptional.

MAXIMIZING THE IMPACT OF NEWFOUND MOBILITY

CYNTHIA'S STORY

For Cynthia Falone, everyday life revolved around debilitating knee pain, stemming from osteoarthritis in both knees. At 53-years-old, the limitations of her mobility began to impact her health.

"My blood pressure was out of whack because of my lack of physical activity," shares Cynthia. "I was unable to do a lot of walking and exercises because of my knee pain."

In January 2016, Cynthia underwent a double knee replacement under the care of Penn Medicine's Dr. David Nazarian, MD, Knee and Hip Surgeon and Clinical Assistant Professor of Orthopaedic Surgery, in order to improve her quality of life and overall health. Two days after surgery, her recovery began in inpatient rehabilitation at Penn Rehab. During her week-long stay, Cynthia underwent daily physical and occupational therapy that would give her the ability to safely return home.

"At Penn Rehab, the therapists provided were proactive in anticipating what needed to be done," shares Cynthia. "Each session had activities tailored so that I could meet my goal to return home where there would be steps."

The next step of Cynthia's recovery from double knee replacement surgery was to continue outpatient physical therapy at Penn Therapy & Fitness with physical therapist Cheryl Cocca, PT, DPT, OCS.

After years of adapting everyday activity because of her bad knees, Cynthia was starting from scratch to learn how to properly move with her healthy knees. During outpatient physical therapy, a main focus of treatment was to relearn how to maintain balance and walk normally once again. To regain function and mobility, Cheryl created a customized therapeutic treatment plan that was targeted to increase range of motion, strength, balance and endurance for Cynthia's recovery.

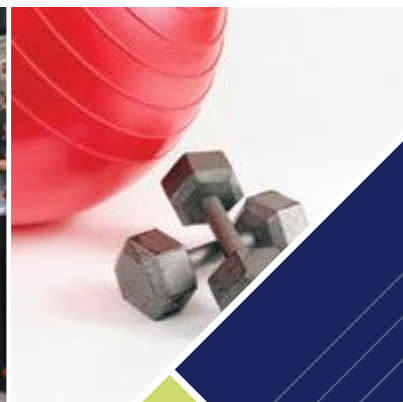
"For the first time in years, I was riding a stationary bicycle to build my endurance," shares Cynthia. "Within a month of going to outpatient physical therapy, I realized that my body was improving. Each week there improvements and less pain involved in moving my knees."

Patient education is a vital part of therapeutic recovery at Penn Therapy & Fitness, both to encourage patients to manage their symptoms, and to continue the progress of what was gained during their sessions.

"During our therapy sessions, Cheryl explained the purpose of each exercise and practiced with me to ensure that I was able to do each one properly," says Cynthia. "Her explanation of the benefit of improving balance or mobility kept me motivated in wanting to do each one. With the home exercises and stretches that I learned, I am empowered to continue my recovery and progress."

Now able to enjoy life without being sidelined from pain, Cynthia has been able to take part in an active lifestyle improving her happiness and health. Since the surgery, she has lost 20 pounds because of her ability to be active without debilitating pain, and no longer requires pain medication for her knees.

"I'm not sitting at home anymore, and am feeling the best I have felt physically in years because of my ability to increase my activity without pain. People who knew me before the surgery are amazed at how well my walking is now," shares Cynthia. For the first time in years, I can run errands, take long walks and go places without being worried about pain. For the first time ever, my husband and I can take a vacation without planning around my knee pain."





Welcome to the Family: PENN THERAPY & FITNESS LANSDALE



Penn Therapy & Fitness Lansdale became the 15th Penn Therapy & Fitness outpatient site in May 2016. Located in Lansdale, Pennsylvania, outpatient services are now more accessible to patients in the Lansdale, North Wales and Montgomery County areas. Kimberly Smith, PT, CHT, co-founder of North Wales Hand Rehabilitation, joined the organization to become site manager of Penn Therapy & Fitness Lansdale, bringing over 20 years of experience in addition to a roster of patients.

Along with Smith's specialties in hand, wrist and elbow care, Cheryl Cocca, PT, DPT, OCS also transferred to this location providing specialized care in orthopaedics, sports related injuries, and cancer-related fatigue rehabilitation.

"I am excited to be joining an organization that truly embraces the value of outpatient therapy," says Smith. "I could not be happier to become part of such a strong, mission-based group that will allow the therapists to focus on treatment and returning patients to the highest level of functional independence."

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BEING WORRIED ABOUT PAIN.”

—CYNTHIA FALONE
Double Knee Replacement Surgery Patient



A RETURN TO A LIFE IN MOTION

TOLY'S STORY

For skateboarder Toly Bitny, being able to move freely on wheels has become second nature. Bitny is a sponsored skater who has been skating for over 15 years, and he had become accustomed to working towards perfecting countless tricks, techniques and moves. But a freak accident during a standard trick led to a torn ACL, and articular cartilage injury, leading Toly to face a new goal: to return to skateboarding through physical therapy.

"This was the worst injury and the most painful one that I had ever experienced during my skating career," says Toly. "At the time, I had no idea what was exactly wrong but knew it was very bad. Prior to the injury, I was at the peak in my career, skating at my best."

Toly sought out the care of Penn Orthopaedic Doctor James Carey, MD, who diagnosed him with a torn ACL and cartilage injury that would require surgery and extensive physical rehabilitation. His main concern was focused on being able to once again skate at his peak performance.

"My main goals for physical therapy were to regain the ability to skate at 100 percent, to regain the same full range of motion and strength, and to feel comfortable with my knee again. I knew that it would be a long recovery process," says Toly.

Toly underwent ACL reconstruction and osteochondral autograft transfer, a procedure that involves borrowing a little piece of cartilage and bone from a less critical part of the knee and putting it in a more critical part. A week after his surgeries, Toly began physical rehabilitation at Penn Therapy & Fitness Weightman Hall, with physical therapist Gina Serago, PT, DPT, OCS. During his twice-a-week therapy sessions, Toly took part in a regimen created by Gina that included a combination of exercises that required proactive and dedicated time at both the gym and at home.

"Both my doctor and physical therapist had an open dialogue. Everyone was on the same page about my care. There were a lot of basic therapy exercises,

involving lifting my leg off the ground—which I never thought I would have to relearn how to do again, and it was a lot harder than I expected," shares Toly, "But what was such a key part in recovery was Gina teaching me the exercises I needed to do on my own at home, in addition to the routine we did at the gym. By taking responsibility at home, my actions allowed me to have control of my recovery, which felt great."

While regaining function and movement in his leg, Toly learned from Gina about the reasoning behind the series of exercises and stretches involved in his treatment.

"I learned a lot about how my exercises were building up strength, not just in my knee, but throughout my entire leg," says Toly. "Because of Gina I am more aware of my body, and have a much better understanding of how it works."

As he continued to commit himself to his recovery under the care of Gina, Toly began to realize that he was getting closer to his goals of returning to skating three months after surgery. However, he understood that his dedication and commitment to his therapy program outside of the sessions was crucial in continuing to accelerate his progress.

"Being able to incorporate riding a stationary bike into my therapy sessions was really inspiring. I was starting to regain feeling and could experience a normal walking motion again," says Toly.

Based on his progress, Gina continuously adapted Toly's therapy regimens in order to focus on movements needed for skateboarding.

"When I finally stepped on the board, at the 6-month mark, it was the best feeling in the world," says Toly. "I overcame an obstacle that didn't seem surmountable, not so long ago. Even with all of the encouragement and optimism I had throughout the whole recovery period, there was always a lingering doubt in my mind. Slowly I began relearning tricks and was able to get everything back. Now I am skating as well as I ever skated before, and it feels good to know that I made it."





Eight months post-surgery, Toly successfully reached his goal and has now resumed his full skating routine at the same level prior to his injury.

“Toly was an extremely motivated, driven and compliant patient. He was consistent with his home program and was very involved with his rehabilitation plan from the beginning of therapy. Participation is key with achieving designated timelines for recovery after such a complex surgery,” said Gina. “I guided him through the process with his ultimate goal of skateboarding in mind throughout his plan of care. He gave me a lot of credit for his success but he made my job easy. He did all the work from the start.”

Once again, he is able to trust his knee and enjoy his passion, pain-free. Toly is grateful for having Penn Therapy & Fitness for getting him there.

“I credit Penn Therapy & Fitness for returning me to skating so soon. Gina was incredible because not only did she know my goals, but she made it her goal to get me back to where I wanted to be.”

Improving Quality of Life for Individuals Living with HUNTINGTON’S DISEASE



The therapists at Penn Therapy & Fitness Pennsylvania Hospital are teaming up with the Penn Neuroscience Center to give patients with Huntington Disease a better quality of life. A genetic disease that causes the destruction of nerve cells in the brain, Huntington Disease impacts a person’s functional movement and cognitive abilities. While there is currently no cure for the disease, there are medical interventions that can prolong a patient’s independence and function.

The Huntington’s Disease Center at Pennsylvania Hospital provides individualized, multidisciplinary, and family-centered care to patients with Huntington’s Disease. The Huntington’s Disease Center, which is part of the Penn Medicine Neuroscience Center, is committed to exceptional patient care, social support services, research, professional and community education. Dr. Pedro Gonzalez-Alegre, MD, PhD, is the Director of the Huntington’s Disease Center at Pennsylvania Hospital, and is also an Associate Professor of Neurology at the University of Pennsylvania. In February 2016, the clinic received the distinction of a Level 3 Center of Excellence Distinction. This designation from the Huntington’s Disease Society of America (HDSA) will open the doors for collaborative partnerships, support and promotion of activities.

Twice a month during their clinic visit, patients meet with a genetic counselor, social worker, psychiatrist, movement disorder specialist, nurse coordinator, physical and occupational therapy, and speech language pathology staff—all located in one building. Penn Therapy & Fitness Pennsylvania Hospital therapists Adrianna Carey, PT, DPT, Julia Wood, MOT, OTR/L, and Meredith Pauly, MA, CCC-SLP/L perform evaluations during patient’s clinic visit. Together, they work to help patients and their caregivers maximize their quality of life in a safe way. Because of the complex mobility and sensory issues, a therapy session and evaluation for Huntington’s Disease patients differs from most.

Because of the complex mobility and sensory issues, a therapy session and evaluation for Huntington’s Disease patients differs from most.

“Having a low stimulus environment at the clinic decreases patient anxiety and agitation. This also allows patients and their caregivers the opportunity to open up & share more sensitive information in a protected and confidential environment,” explains Carey about the adaptive environment that is created during the day of clinic treatment.

Although the patients will continue to experience a decline in functionality, Adrianna and the entire clinical team are committed to providing comprehensive care that gives patients something that is priceless: hope.

“We’re helping patients continue to do what they want to do and what they need to do to maintain their quality of life,” says Carey. “And if they can’t do those activities fully, or how they used to perform them, maybe we can find an adapted way to do it. I believe therapy’s role is always to be a beacon of hope and provide the patients and caregivers a sense of control over HD when all else feels beyond their control.

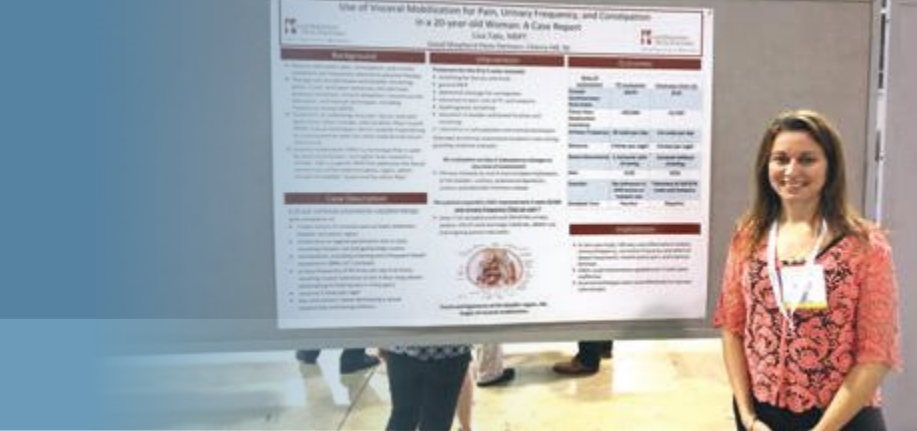
DIVISION OF THERAPY RESEARCH HIGHLIGHTS



THE FOLLOWING ACCOMPLISHMENTS OUTLINED showcase the work of our dedicated and talented therapist who strive on a daily basis to contribute new knowledge to the field of rehabilitation. In fiscal year 2016, research and educational presentations were presented by 56 therapists at 19 professional conferences at the state, national, and international levels. Our therapists contributed over 100 pages to nine manuscripts, books, other publications.

CONFERENCE PRESENTATIONS

PROJECT TITLE	STAFF INVOLVEMENT	TYPE OF PRESENTATION
Interprofessional Simulation Conference JULY 15-16, 2015 CHESTER, PA		
Description of a Collaborative Inter-Professional Model for Physical Therapy Students Using a Simulation Lab	Colleen Chancer PT, MHS Amy Miller PT, DPT, EdD Joe Adler PT, DPT, CCS	Platform Presentation
25th World Congress of Lymphology Patient Summit SEPTEMBER 7-11, 2015 SAN FRANCISCO, CA		
Risk Reduction Strategies for persons with Lymphedema	Jane Kepics, PT, DPT, CLT-LANA	Education session
The 5th Annual Mid-Atlantic Shoulder and Elbow Society Meeting SEPTEMBER 18, 2015 WASHINGTON, DC		
Panel Discussion: Total Shoulder Replacement: How to Hit a Homerun	Brian Leggin PT, DPT, OCS	Panel Discussion
American Society of Hand Therapists 38th Annual Meeting OCTOBER 8-11, 2015 DENVER, COLORADO		
Lateral Elbow Tendinopathy: What's Known? What's New?	John Bellace, PT, MPT, CHT Jane Fedorczyk, PT, PhD, CHT, ATC	Instructional Session
Pennsylvania Physical Therapy Association (PPTA) Conference OCTOBER 24-25TH SEVEN SPRINGS, PA		
Balancewear Weighted Vest Improves Outcomes in Individuals with Neurologic Disease: A Case Series	Marty J. Kelley, PT, DPT, OCS	Poster Presentation
Feasibility and Safety of Early Mobility of the Neurocritical Care Patient with an External Ventricular Device	Joseph Borst PT, DPT William Pino PT, DPT Derek Zaleski PT, DPT Marisa Hart MS, OTR/L Jesse LoBreglio OTR/L HUP Neuro Critical Care Team	Platform Presentation
Description and Outcomes of a Collaborative Inter-Professional Acute Care Simulation Lab for Physical Therapy Students	Colleen Chancer PT, MHS Amy Miller PT, DPT, EdD Joe Adler PT, DPT, CCS	Platform Presentation
Change Management: The Transition of the University of Pennsylvania Health System Level I Trauma Center	Jane K. Oeffner, PT, DPT, MBA Colleen Chanler, PT, MHS	Platform Presentation



American Congress of Rehabilitation Medicine's 92nd Annual Conference – Progress in Rehabilitation Research (PIRR)

OCTOBER 25-30, 2015 | DALLAS, TEXAS

High-force Haptic Rehabilitation Robot and Motor Outcomes in Chronic Stroke: A Case Study

Carol Wamsley, PT, DPT, NCS, CBIS

Poster

The 12th Annual Jean Feldman Memorial Rehab Conference

NOVEMBER 6, 2015 | PHILADELPHIA, PENNSYLVANIA

Putting the "Fun" in Functional

GSPP Dan Aaron Parkinson Therapy Team

Conference Hosts

The 12th Annual Jean Feldman Memorial Rehab Conference

AUGUST 28-30, 2014 | BRAZIL

1. Postoperative Rotator Cuff Rehabilitation
2. Rehabilitation After Shoulder Arthroplasty
3. Roundtable Discussion-Scapular Dyskinesis: Risk Factor or Result
4. Roundtable Discussion-Treatment of Partial Thickness Rotator Cuff Tears: Physiotherapy or Surgery

Marty J. Kelley, PT, DPT, OCS

Education and Roundtable Sessions for the Rehabilitation Section

Examination Algorithm for Scapular Muscle Dysfunction

Marty J. Kelley, PT, DPT, OCS

Education Session for the Surgeon Section

The Philadelphia Orthopaedic and Sports Rehab Foundation 2015 Lower Extremity Update

NOVEMBER 20-21, 2015 | PHILADELPHIA, PA

Current Concepts in the Prevention of ACL Injuries

Campbell McCormack, PT, MS, SFMA, CK-FMS

Education Session

Rehabilitation Following Arthroplasty of the Knee and Returning the Patient to Activities

Marty J. Kelley, PT, DPT, OCS

Education Sessions

Hamstring Injuries: Prevention and Rehabilitation

Pathogenesis and Rehabilitation of Ankle Instability

Marisa Pontillo PT, PhD, DPT, SCS

Education Session

Post-op Rehab Following Hip Arthroscopy

Michael Piercey, PT, DPT, OCS, CSCS

Education Session

Rehabilitation of Meniscus Lesions: Is Therapy Better than Surgery?
Practical Applications of Lower Extremity Outcome Measures

Brian Leggin PT, DPT, OCS

Education Sessions

Rehabilitation of the Arthritic Hip

Molly Dang, PT, DPT, OCS

Education Session

Clinical Examination of the Knee and Hip

Tiffany Prince, PT, DPT, OCS

Workshop

Clinical Examination of the Foot and Ankle

Holly Jo Harvey, PT, DPT, OCS
Molly Dang, PT, DPT, OCS
Martin Kelley, PT, DPT, OCS
John Kelly, MD

Workshop

Taping Techniques for the Lower Extremity

Marisa Pontillo, PT, PhD, DPT, OCS

Workshop

Functional Exercise Progression and Evaluation for Return to Activity

Cheryl Cocca, PT, DPT, OCS
Robert Maschi, PT, PhD, SCS
Brian Eckenrode, PT, DPT, OCS
John Vasudevan, MD

Workshop

21st Annual International Scientific Symposium on Improving the Quality and Value of Health Care

DECEMBER 7, 2015 | ORLANDO, FLORIDA

Reducing Intraventricular Hemorrhage in a Level III Neonatal Intensive Care Unit

Lori Christ MD and HUP NICU team
(Including Meredith McElroy MOT, OTR/L)

Presentation

American Physical Therapy Association's Combined Sections Meeting

FEBRUARY 18-20, 2016 | ANAHEIM, CALIFORNIA

Description and Outcomes of a Collaborative Inter professional Acute Care Simulation Lab for Physical Therapy Students	Amy Miller PT, DPT Colleen Chanler PT, MHS Joe Adler PT, DPT, CCS	Poster Presentation Education Section
A Comparison of Alternative Physical Therapy Outcome Measures to the Six Minute Walk Test Pre and Post-Lung Transplant	Laura Friedman PT Derek Zaleski PT, DPT Joe Adler PT, DPT, CCS Jennifer Dekerlegand MPT	Poster Presentation Cardiovascular and Pulmonary Section
Use of Visceral Mobilization for Pain, Urinary Frequency, and Constipation in a 20-year-old Woman	Lisa Tate MSPT	Poster Presentation Women's Health Section
Relationship Between Clinical and Biomechanical Testing of Core Stability in Athletes	Marisa Pontillo PT, PhD, DPT, SCS Dave Ebaugh PT, PhD Clare Milner, PhD Courtney Butowicz MS Brian Sennett MD Sheri Silfies PT, PhD	Platform Presentation Sports Section
Trunk Muscle Activation and Synergy Patterns During the Multifidus Lift and Prone Instability Test	Won Sung PT, DPT, PhD Sheri Silfies PT, PhD	Platform Presentation Orthopaedics Section
"One Day at a Time": Implementation of Patient and Caregiver Support Groups at an LTACH	Jay Watson-Mote	Poster Presentation Education Section
Improving the Quality of Exercise Prescription for Patients Readmitted Within 18 months after Lung Transplant	Claire Child, PT, DPT, MPH, CCS Gregory Carroll, SPT	Platform Presentation Cardiovascular and Pulmonary Section
Feasibility and Safety of Early Mobility of the Neurocritical Care Patient with an External Ventricular Device	William Pino, PT, DPT Joseph Borst, PT, DPT	Platform Presentation Acute Care Section
Comparison of Core Stability in Athletes with and without Shoulder Injuries	Marisa Pontillo, PT, DPT, SCS; David Ebaugh, PT, PhD Clare Milner, PhD Courtney Butowicz, MS Brian Sennett, MD Sheri Silfies, PT, PhD	Platform Presentation Sports Section
Oncology Section EDGE Task Force: Clinical Measures of Lower Extremity & Genital Lymphedema, Incontinence & Sexual Dysfunction	Meryl Alappattu, PT, DPT, PhD Joy Cohn, PT, CLT-LANA Lucinda A. Pfalzer, PT, PhD, FACS, FAPTA	Educational Presentation to the Oncology Section
Management of Upper Extremity Injuries in the Female Athlete	Todd Ellenbecker, DPT, PT, MS, SCS, OCS Wendy Hurd, PT, PhD, SCS Marisa Pontillo, PT, PhD, DPT, SCS Brian Tovin, PT, DPT, MMSc, SCS, ATC	Educational Presentation to the Sports Section

Pennsylvania Physical Therapy Association's Southeast District (SED) – Fourth Annual Combined Sections Meeting

MARCH 21, 2015 | PHILADELPHIA, PA

Managing Cardiovascular and Pulmonary Disorders in Home Care and Outpatient Settings	Claire Child, PT, DPT, MPH, CCS	Education Session
Cervical and Thoracic Spine Differentiation	Matthew Conoscenti, PT, DPT, OCS, COMT, CEEAA	Education Session

2016 Philadelphia Meeting: Surgery and Rehabilitation of the Hand 20/20: A Vision for Quality in Hand Care

MARCH 12-15, 2016 | PHILADELPHIA, PA

Sagittal Band Injuries and Management-Conservative and Operative	Gayle Severance MS, OT/L, CHT	Education Session
Clinical Examination of the Elbow	Laura Walsh MS, OT/L, CHT	Education Session
Clinical Examination of the Wrist	Gayle Severance MS, OT/L, CHT	Education Session
Rehabilitation for Elbow Fractures and Dislocations	Laura Walsh MS, OT/L, CHT	Education Session
Rotator Cuff Tears: Non-Operative Management and Outcomes	Marty Kelley, PT, DPT, OCS	Education Session
Elbow Instability-Diagnosis and Management	Brian Leggin PT, DPT, OCS	Moderator

Penn Medicine 2016 Advances in Throwing Symposium: Latest on Injury Treatment and Performance Optimization

MARCH 19, 2016 | PHILADELPHIA, PA

Kinetic Chain: Importance and Evaluation Elbow, Prevention and Treatment of UCL Injuries (Panel Discussion)	Brian Leggin PT, DPT, OCS	Education Session
Debate/Case Presentation: Scapula Dyskinesia – Does it exist? How I do my shoulder evaluation? Case Based Approaches to Rotator Cuff and Labral Injuries: Surgery and Rehab (Panel Discussion)	Marty J. Kelley, PT, DPT, OCS	Education Session
Metrics to Assess Readiness to Play	Marisa Pontillo PT, PhD, DPT, SCS	Education Session

American Occupational Therapy Association's Annual Conference

APRIL 7-10, 2016 | CHICAGO, ILLINOIS

Treatment of the Post-Stroke Patient Within the Acute Care Environment	Malachy Clancy MOT, OTR/L Marisa Hart MS, OTR/L Laura Schaffner MS, OTR/L	Education Session
Student to Therapist: Recommendations to Maximize the Transition Experience	Meredith McElroy MOT, OTR/L	Poster Presentation
Assessing Wellness Through a Quality of Life Self-Reported Scale on a Medical Oncology Unit	Meredith McElroy MOT, OTR/L	Poster Presentation
An Interdisciplinary Parent Education Group in a Level III Neonatal Intensive Care Unit	Meredith McElroy MOT, OTR/L	Poster Presentation
An Interdisciplinary Parent Education Group in a Level III Neonatal Intensive Care Unit	Sheena Navidi, OTR/L	Poster Presentation
The Power of Sleep: Sleep Hygiene for the Critically-III Population	Sheena Navidi, OTR/L	Poster Presentation

6th Annual NANT Conference – All In!

APRIL 15-16, 2016 | ORLANDO, FLORIDA

Lessons Learned: A Trial Implementation of a New Positioning Aide in Two Critically III Infants	Robin Elican-Madeja, MOT, OTR/L Tiffany Hogan, MA, CCC-SLP Alexandria Reo BSN, RN Jenna Rogers, PT, DPT Anastasiya Ruiz, PT, MSPT, CCI	Poster Presentation
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APTA Annual Orthopedic Section Meeting

MAY 5-7, 2016 | ATLANTA, GEORGIA

Lumbar Spine Movement Coordination Impairments	Ejona Jeblonski, PT, DPT, COMT Won Sung PT, DPT, PhD	Education Session
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PMR GSPP 2nd Annual Research Day

MAY 12, 2016 | PHILADELPHIA, PENNSYLVANIA

Improving the Quality of Exercise Prescription for Patients Readmitted within 18 Months after Lung Transplant	Claire Child, PT, DPT, MPH, CCS	Podium Presentation
Outcome Following Non-Operative Management of Rotator Cuff Tears	Brian Leggin, PT, DPT, OCS	Podium Presentation
Feasibility and Safety of Early Mobility of the Neurocritical Care Patient with an External Ventricular Device	William Pino PT, DPT Joseph Borst PT, DPT Derek Zaleski PT, DPT Marisa Hart, MS, OTR/L Jesse LoBreglio MOT, OTR/L HUP Neuro Critical Care Team	Poster Presentation



PMR GSPP 2nd Annual Research Day (continued)

MAY 12, 2016 | PHILADELPHIA, PENNSYLVANIA

BalanceWear Weighted Vest Improves Outcomes in Individuals with Neurologic Disease: A Case Series	Helena Esmonde, PT, DPT	Poster Presentation
Lessons Learned: A Trial Implementation of a New Positioning Aide in Two Critically Ill Infants	Tiffany Hogan MA, CCC-SLP Jenna Rogers PT, DPT Robin Elican-Madeja MOT, OTR/L Anastasiya Ruiz PT, MSPT	Poster Presentation
Peri-partum Pubic Symphysis Separation: A Case Study, Review of Current Literature and Evidence Based Treatment Recommendations	Lisa Sator PT, DPT, CLT Rosaleen Gnoffo PT Kate Temme MD	Poster Presentation
Use of Visceral Mobilization for Pain, Urinary Frequency, and Constipation in a 20-Year-Old Woman	Lisa Tate, MSPT Lucinda Hayburn PT, DPT, WCS	Poster Presentation
Gap Analysis: A Strategy to Improve the Quality of Care of Head and Neck Cancer Patients at a Cancer Center	Meredith Pauly, MA, CCC-SLP/ Clara Granda-Cameron NP Adjoa Mante Debra DeMille RD	Poster Presentation
Safety of Early Mobilization for Patients with Femoral Catheters: A Collaborative and Ongoing Project between Physical Therapy and Critical Care Nursing	Kyle Cunningham SPT Derek Zaleski PT, DPT Joe Adler PT, DPT	Poster Presentation
Paradoxical Vocal Fold Motion – Importance of Proper Diagnosis and Clinical Communication: A Case Report	Timothy J. Bayruns, PT, DPT, OCS, CSCS Patricia Scapellati MA, CCC/SLP	Poster Presentation
Change in Students' Prioritized Professional Values After an 8-Week Clinical Experience	Michelle Lewis PT, DPT Eric Folkins, PT, DPT, OCS KD Ward, PT, DPT, PCS, MPH, CHES	Poster Presentation
Normative Values for the King-Devick Test for Persons 18-40 Without Recent Concussion	Heather Anderson PT, NCS K Angelucci C Bush P Byrne G Carroll J Schreppel Scott Biely	Poster Presentation
Effectiveness of High Velocity Low Amplitude Thrust Manipulation on the Treatment of Symptoms Related to Temporomandibular Disorder: A Systematic Literature Review	Philip Adelizzi, PT, DPT Timothy Bayruns PT, OCS, CSCS James Casler PT, DPT Melissa DeFelice, PT, DPT Michael Drusedum PT, DPT	Poster Presentation
Evaluation of Physical and Occupational Services from Acute Hospitalization to Specialty Hospital at Rittenhouse (LTACH): Frequency and Duration of Therapy Services	Aaron Thrush, PT, DPT, MPH, CCS	Poster Presentation

American College of Sports Medicine's Annual Meeting

MAY 31-JUNE 4, 2016 | BOSTON, MASSACHUSETTS

Differences in Core Stability between Collegiate Football Players with and without Shoulder Pain	Marisa Pontillo, PT, PhD, DPT, SCS	Poster Presentation
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Focus on Progressive Supranuclear Palsy		
JUNE 2, 2016 PHILADELPHIA, PENNSYLVANIA		
Medical Professionals Question and Answer Panel	Heather Cianci, PT, MS, GCS Joellyn Fox, PT, DPT Julia Wood, OTR/L Meredith Pauly, MA CCC-SLP	Panel Discussion

AWARDS, HONORS & RECOGNITION

2015 Delaware Valley Patient Safety and Quality Award: Project Sit Up: An Interprofessional Quality Improvement Initiative to Reduce Aspiration Pneumonia

Vivek Ahya MD

Nadine Amsterdam MA, CCC-SLP

Randy Dubin MA, CCC-SLP

Marybeth O'Malley MSN, RN, ACNS-BC

The Delaware Valley Patient Safety and Quality award program recognizes hospitals and other providers for their achievements in advancing exceptional care and is provided at the Annual Meeting of the Delaware Valley Healthcare Council of HAP.

Awarded the APTA Acute Care Physical Therapy Writing Scholarship

Deb Akers, PT

This award is provided to assist therapists with the publication of a research project. This award was provided for the project for their project titled "Use of the Postural Assessment Scale for Stroke Patients in Determining Acute Care Discharge Recommendations."

Received American Board of Physical Therapy (ABPT) Clinical Specialization

Gina Serago PT, DPT, OCS – Orthopaedic

William Moore PT, DPT, OCS – Orthopaedic

Aaron Thrush PT, DPT, MPH, CCS – Cardiovascular and Pulmonary

Julie Skrzat PT, CCS – Cardiovascular and Pulmonary

Pia Leone PT, DPT, WCS – Women's Health

Francesca Savage PT, WCS – Women's Health

Lucinda Christian PT, DPT, WCS – Women's Health

Donna Schmidt PT, DPT, NCS – Neurologic

Honorees receive board specialization at the American Physical Therapy Association's (APTA) Combined Sections Meeting on February 4, 2016, in Anaheim, California.

Inducted into the Academy of Certified Brain Injury Specialists

Megan Watson, PT, DPT

The Pennsylvania Physical Therapy Association's Student Leadership Award is provided to a student therapist who demonstrates APTA involvement, community service and leadership.

PUBLICATIONS

Peer Reviewed

Bayruns TJ, Scapellati P. **Paradoxical Vocal Fold Motion— Importance of Proper Diagnosis and Clinical Communication: A Case Report.** Orthopaedic Practice Vol. (2015) 27;3:15, 168-170.

Sung W, Abraham M, Plastaras C, Silfies SP. **Trunk motor control deficits in acute and subacute low back pain are not associated with pain or fear of movement.** Spine J. 2015 Aug 1;15(8): 1722-82.

Silfies SP, Ebaugh D, Pontillo M, Butowicz CM. **Critical review of the impact of core stability on upper extremity athletic injury and performance.** Braz J Phys Ther. 2015 Sep-Oct;19(5):360-8.

Plastaras, C, Tsay T, Schran S, Zhang Y, Becker S, Pukenas B. **Vertebral Benign Notochordal Cell Tumor (BNCT) as an Incidental Finding in Cervical Radiculitis.** PMR 7(2015). 1198-1200.

Thigpen CA, Shaffer MA, Gaunt BW, Leggin BG, Williams GR, Wilcox RB. **The American Society of Shoulder and Elbow Therapists' consensus statement on rehabilitation following arthroscopic rotator cuff repair.** J Shoulder Elbow Surg (2016) 25, 521-535.

Adelizzi P, Casler J, DeFelice M, Drusedum M, Bayruns TJ. **Effectiveness of Thrust Manipulation of the Cervical Spine for Temporomandibular Disorder: A Systematic Literature Review.** Orthopaedic Practice (2016) Vol. 28;2:16, 110-17.

Elkassabany NM, Antosh S, Ahmed M, Nelson C, Israelite C, Badiola I, Cai LF, Williams R, Hughes C, Mariano ER, Liu J. **The Risk of Falls After Total Knee Arthroplasty with the Use of a Femoral Nerve Block Versus an Adductor Canal Block: A Double-Blinded Randomized Controlled Study.** Anesth Analg. 2016 May;122(5):1696-703.

Book Chapters

Fazzari E. **A collaborative approach to wound care and lymphedema therapy: Part II.** Wound Care Advisor. Sept/Oct 2015; 4(3):30-2.

Erin Fazzari, MPT, CLT, CWS, DWC, published Part II of "A Collaborative Approach to Lymphedema Therapy and Wound Care" in the September/October 2015; 4(3); 30-2, Wound Care Advisor Journal.

McElroy ME, Schaffner (Bowie) L. **The Role of OT in an Interdisciplinary Oncology Group for Hospitalized Patients.** OT Practice. Feb 2016; 21(2):18-20.

Other Publications

Betsy Grace Georgelos PT, DPT contributed a chapter titled "Vestibular Rehabilitation" in the book *Otology, Neurotology, and Skull Base Surgery: Clinical Reference Guide* edited by Doctors Theodore R. McRackan and Derald E. Brackmann.

Sarah Martyn, PT, DPT, contributed a chapter titled, "Hemophilia" in the book *Case Files in Physical Therapy Pediatrics*, edited by Eric Pelletier and published by McGraw-Hill (2015).

Anastasiya Ruiz PT, MSPT contributed a chapter "Extreme Prematurity and the Neonatal Intensive Care Unit" in the book *Case Files in Physical Therapy Pediatrics*, edited by Eric Pelletier and published by McGraw-Hill (2015).

Brian Leggin PT, DPT, OCS and Marisa Pontillo, PT, PhD, DPT, SCS, co-authored a chapter "Maximizing Return to Activity Post Cuff and Instability Surgery" in the book *Elite Techniques in Shoulder Arthroscopy: New Frontiers in Shoulder Preservation*, 1st Edition. published by Springer in 2016.

COLLABORATIVE PROJECTS

PROJECT TITLE	STAFF INVOLVED	ROLE IN PROJECT
Lung Transplant Body Composition Study	Derek Zaleski PT, DPT	Assisting with data collection with the Penn Medicine Lung Transplant Team
LABAT	Joy Cohn, PT, CLT-LANA Bryan Spinelli PT, MS, OCS, CLT	Collaborative project with Katie Schmitz (Principal Investigator), Associate Professor in the Department of Biostatistics and Epidemiology, University of Pennsylvania
Identifying Isolation of multifidus activation with NMES using near infrared spectroscopy	Won Sung PT, DPT, PhD	Collaborative study with Drexel University
The Relationship Between Core Stability and Shoulder Injuries in Athletes	Marisa Pontillo PT, PhD, DPT, SCS	Collaborative study with Drexel University
Identifying Isolation of multifidus activation with NMES using RUSI	Won Sung PT, DPT, PhD	Collaborative study with Drexel University
Pain Outcomes With an Elliptical Regimen (POWER)	Scott Becker PT	Collaborative study with Dr. Tim Dillingham MD, Department of Physical Medicine and Rehabilitation
Analysis of muscle activation patterns in patients with aberrant movement patterns who fit a diagnosis of movement control impairments of the spine	Won Sung PT, DPT, PhD	Collaborative study with Drexel University
Movement precision and control in patients with low back pain	Won Sung PT, DPT, PhD	Collaborative study with Drexel University
Kinematic Analysis of the forward bend characteristics to predict patients with movement coordination impairments of the trunk	Won Sung PT, DPT, PhD	Collaborative study with Drexel University
Mechanistic validation of current clinical prediction rules for predicting success with trunk stabilization exercises	Won Sung PT, DPT, PhD	Collaborative study with Drexel University
Thera-Drive	Carol Wamsley, PT, DPT, NCS, CBIS	Collaborative study with Dr. Michelle Johnson, Associate Professor in the Department of Rehab Medicine at the University of Pennsylvania
Neural and Motor Functional Changes in HIV and Stroke before and after Robot-Assisted Neurorehabilitation	Carol Wamsley, PT, DPT, NCS, CBIS	Collaborative study with Dr. Michelle Johnson, Associate Professor in the Department of Rehab Medicine at the University of Pennsylvania
Design of an affordable gym for post stroke rehabilitation	Carol Wamsley, PT, DPT, NCS, CBIS	Collaborative study with Dr. Michelle Johnson, Associate Professor in the Department of Rehab Medicine at the University of Pennsylvania
A Phase 2 Randomized, Double-Blind, Placebo-Controlled Efficacy and Safety Study of a RAR -Specific Agonist (Palovarotene) in the Treatment of Preosseous Flare-ups in Subjects with Fibrodysplasia Ossificans Progressiva (FOP) are assessing joint range of motion as one of the outcome measures to determine the drug's efficacy in this rare patient population.	Elsa Amaral PT Sarah Martyn PT, DPT Carolyn Haggerty PT, DPT Joe Borst PT, DPT	Collaborative study with Dr. Kaplan, Penn Medicine's Department of Orthopedics.
ASPIRE Study	Elsa Amaral, PT Sarah Martyn PT, DPT	Assisting the Hemophilia Team collect functional outcomes data
Functional Outcome Measures for Head and Neck Patients	Meredith Pauly MA, CCC-SLP Tiffany Hogan MA, CCC-SLP	Collaborative study with Dr. Steven Cannady from the Department of Otorhinolaryngology

RESEARCH DAY

ON MAY 12TH, 2016, members of Good Shepherd Penn Partners and Penn Medicine's Physical Medicine and Rehabilitation united for the second annual Research Day. **Professor Douglas H. Smith, MD**, Director of the Center for Brain Injury and Repair (CBIR), Robert A. Groff Endowed Professor and Vice Chairman for Research and Education in Neurosurgery at the University of Pennsylvania delivered the keynote address, *How the Brain Breaks in Concussion*.



Moderated by **Michael A. Grippi MD**, Chief Medical Officer, Specialty Hospital at Rittenhouse the four podium presenters were **Claire Child, PT, DPT, MPH, CCS, Yejia Zhang, MD, PhD, Brian Leggin, PT, DPT, OCS** and **Denise Y. Harvey, PhD**.

Over 125 attendees participated in the event, which showcased an interactive poster session that included 23 posters from clinicians from both organizations.

Good Shepherd Penn Partners is proud to be an organization known for having a culture of scholarly excellence. With our staff of clinical specialists, adjunct faculty, advanced degrees and staff presence at many national conferences, a commitment to education and research is fundamental to our practitioners and a promise to our patients. This event was organized by the Good Shepherd Penn Partners Research Committee, an interdisciplinary committee charged with not only promotion of research endeavors, but also establishing and enforcing policies and procedures for any research involving Good Shepherd Penn Partners patients, staff, or facilities.

DOUGLAS H. SMITH, MD 2016 KEYNOTE SPEAKER

Director of the Center for Brain Injury and Repair (CBIR)

Robert A. Groff Endowed Professor

Vice Chairman for Research and Education in Neurosurgery at the University of Pennsylvania

FY16 RESEARCH & EDUCATIONAL PRESENTATIONS

BY THE NUMBERS



56

**THERAPISTS GAVE
POSTER PRESENTATIONS**



19

**PROFESSIONAL CONFERENCES
WERE PRESENTED AT**



7

**ARTICLES WERE PUBLISHED
IN PEER-REVIEWED JOURNALS**

PPTA APPOINTMENTS: COLLEEN CHANCLER AND CAROL WAMSLEY



Colleen Chancler, PT, MHS



Carol Wamsley, PT, DPT, BS, NCS, CBIS

In late 2015, two of our clinicians were elected to prestigious leadership positions with the Pennsylvania Physical Therapy Association (PPTA), which is a chapter of The American Physical Therapy Association. Colleen Chancler, PT, MHS, Director of Therapy Services at Hospital of the University of Pennsylvania (HUP) has been elected to the position of President Elect of the PPTA and Carol Wamsley, PT, DPT, BS, NCS, CBIS at Penn Rehab has been elected to the Vice Chair of the Neurology Special Interest Group of the PPTA.

“It is a great opportunity to connect with professionals in a broader network. This is really a community that comes together to share information,” says Carol about her involvement with the organization.

Carol will serve in her new position for three years, starting in January 2016, and will focus on working with practice, research and education related to neurologic practice. As President Elect, Colleen will spend 2016 working with the current President of the PPTA to integrate herself into the Board role. Then in January 2017, she will serve as President of the PPTA for a two year term.

“It’s a very humbling experience,” says Colleen about her new position. “As President Elect, I will be working on getting more professionals engaged in the PPTA.” The PPTA is made up of

more the 3,117 physical therapists and physical therapy assistants, and represents 7 districts in the Commonwealth of Pennsylvania.

For the past thirty years, Carol has spent her career as a physical therapist focusing on bringing movement back to patients. “Being able to make an impact on a patient’s movement is my favorite part of treatment,” she shares. “Taking the understanding of timing and characteristics associated with movement, then using that to place

your hands on another person’s body to teach them how to move again is special. It really is rewarding to be able to make an impact on someone’s life by teaching a patient how to move their body again.”

Similarly, Colleen has been an active member of the PPTA for the past 30 years with her focus on clinical care driving her commitment to quality care.

“Everything I do as a physical therapist is driven by clinical care,” says Colleen. “From making sure my staff has the ability to provide the best care for their patients, to working on research that will impact future treatments. There is something so gratifying about helping people get to a different level—either the same level as before or helping them realize that they can still have a productive, meaningful part of society in a different way. A lot of people may not be able to return to their prior level of function, but helping them return to integral parts of their lives in an adaptive way is rewarding.”





NURSING RECOGNITION

This year, five Good Shepherd Penn Partners nurses were recognized with awards at the 2016 Penn Medicine Clinical Excellence event, a part of the Clinical Advancement Recognition Program (CARP). CARP is designed to recognize all clinical nurses for their contributions to quality patient care, as well as their clinical knowledge and professional achievements.

Eunjoo Kim, BSN, PCCN, RN received the Lillian Brunner Award. This award is given to nurses who demonstrate the highest quality of patient care and exhibit excellent clinical judgment that is based on critical priorities and evaluating the patient's response to care. These nurses re-frame clinical situations and actively include other healthcare team members in the development of an appropriate plan.

Michele Lockett, BSN, RN received the Rosalyn J. Watts Award. This award acknowledges nurses who consistently establish therapeutic relationships with patients and their families that are characterized by individualized care. These nurses know their patients in a way that incorporates religious, spiritual, ethnic, and cultural beliefs into the delivery of care.

Michele Kusterbeck, BSN, RN received the Victoria L. Rich Award for Transformational Leadership Entity Nomination. This award acknowledges nurses in leadership positions who lead people, programs, or processes and have a broad scope of impact were eligible to be nominated.

Bernard (Bill) McAndrew, BSN, CCRN, RN received the Helen McClelland Award. This award is given to nurses who exhibit an attitude of clinical inquiry that integrates evaluation and utilize research and/or evidence into the delivery of care to patients. These nurses are committed to a spirit of life-long learning that draws on reflective practice as a way of building expertise.

Melissa Anderson (Lattanzio), BSN, CCRN, RN received the Diane Lanham Award. This award is given to nurses who exhibit excellent professional interpersonal relations, and create an environment for the professional development of others through mentoring, serve as a change agent through committee membership, project and/or initiative involvement and recognize implications of healthcare costs in the delivery of their daily practice.



EMPLOYEES OF THE MONTH

Each month, employees on the Rewards and Recognition Committee gather to review nominations for Good Shepherd Penn Partners' Employees of the Month Program. The program recognizes staff members who consistently go above and beyond what is expected of them in their position. The goal is to thank them for what they do and encourage them and their co-workers to continue to strive for excellence.

JULY.....	Kelly Butler, AC II PT Hospital of the University of Pennsylvania Nominated by Colleen Chancellor
AUGUST.....	Anne Wholey-Bisesi Good Shepherd Penn Partners Nominated by Joe Muniak
SEPTEMBER	Jayea Watson, PT, DPT The Specialty Hospital at Rittenhouse Nominated by Brian Foley
OCTOBER	Bernard Franklin Hospital of the University of Pennsylvania Nominated by Colleen Chancellor
NOVEMBER	Kelly Ann Jeffery, PT Penn Therapy & Fitness Radnor Nominated by Jeffery O'Neil
DECEMBER	William Moore, PT, DPT Penn Therapy & Fitness Weightman Hall Nominated by Helena Esmonde
JANUARY.....	Tim Bayruns, PT Penn Therapy & Fitness Cherry Hill Nominated by Rebecca Golden and Alli Soowal
FEBRUARY	Desiree Best (Walker) Penn Rehab Nominated by Joe Muniak and Natalie Blanden
MARCH.....	Carolyn Haggerty, PT, DPT Hospital of the University of Pennsylvania Nominated by Colleen Chancellor
APRIL	Deneen Stokes, BSN, RN The Specialty Hospital at Rittenhouse Nominated by Chelsea Flick
MAY	Tiffany Weaver, BS, PTA Penn Therapy & Fitness Yardley Nominated by Katharine Blumenthal
JUNE.....	Carolyn Brant, BSN, RN The Specialty Hospital at Rittenhouse Nominated by Anita Bell

DEDICATED SERVICE AWARDS

EMPLOYEES

At our annual **Dedicated Service Awards** in January 2016, we honored 85 employees reaching 35, 25, 15, 10 and 5 years of service milestones in calendar year 2015.

40 YEARS

Randy Meadows

Hospital Aide II
Hospital of the University of Pennsylvania
Inpatient Therapy



25 YEARS

Jennifer Pomykacz

Site Manager, Rasansky Outpatient

20 YEARS

Heather Cianci

Physical Therapist, Pennsylvania Hospital Outpatient

Denise Hartzell-Leggin

Physical Therapist, Radnor Outpatient

15 YEARS

Dana Bautista, Certified Nursing Assistant, Penn Institute for Rehabilitation Medicine

Laura Becker, Physical Therapist, Pennsylvania Hospital Inpatient

Robert Campbell Jr., Physical Therapist, Rasansky Outpatient

Ivra Davis, Phlebotomist, Penn Institute for Rehabilitation Medicine

Carolyn Eberhardt

Clinical Nurse II, Penn Institute for Rehabilitation Medicine

Diana Hearn, Physical Therapist, Radnor Outpatient

Michelle Kusterbeck, Wound Care Nurse,
Specialty Hospital at Rittenhouse

Sean Loughlin, Site Manager, Radnor Outpatient

Jennifer Muntz, Physical Therapist,
Pennsylvania Hospital Inpatient

Bonnie Neloms, Patient Care Unit Clerk, Penn Institute for Rehabilitation Medicine

Sheila Rineer, Physical Therapy Assistant,
Pennsylvania Hospital Inpatient

Rochelle Rose, Patient Service Representative, The Hospital of the University of Pennsylvania

Jacinta Williams, Patient Service Representative, Cherry Hill Outpatient

10 YEARS

Crystal Clarke, Hospital Aide, Penn Institute for Rehabilitation Medicine

Alison Downey, Physical Therapist, Penn Presbyterian Medical Center

Kerry Durst, Physical Therapist, Penn Institute for Rehabilitation Medicine

Joellyn Fox, Physical Therapist, Pennsylvania Hospital Outpatient

Asha George, Physical Therapist, Pennsylvania Hospital Inpatient

Michele Horowski, Physical Therapist, Rittenhouse Outpatient

Christine Huntzinger, Physical Therapist, Pennsylvania Hospital Inpatient

John Kallarakka, Physical Therapist, Pennsylvania Hospital Inpatient

Megan Link, Occupational Therapist, Penn Presbyterian Medical Center

Wendy McCoy, Physical Therapy, Radnor Outpatient

Isabella Mercado, Physical Therapist, Jenkintown Outpatient

Joseph Muniak, Site Manager, Penn Institute for Rehabilitation Medicine

Merisa Palovack Alle, Speech Language Pathologist,
Pennsylvania Hospital Outpatient

Marisa Pontillo, Physical Therapist, Sports Team Leader, Weightman Hall

Gayle Severance, Occupational Therapist, University City Outpatient

Pamela Webb, Physical Therapy Assistant, Pennsylvania Hospital Inpatient



5 YEARS

Malika Azzouzi, Respiratory Therapist,
Specialty Hospital at Rittenhouse

Sean Barker, Occupational Therapist,
Pennsylvania Hospital Inpatient

Anita Bell, Certified Nursing Assistant,
Specialty Hospital at Rittenhouse

Russell Bennett, Certified Nursing Assistant,
Specialty Hospital at Rittenhouse

Julie Blanchard, Physical Therapist, Penn
Presbyterian Medical Center Inpatient Therapy

Angel Boldt, Certified Nurse Assistant,
Specialty Hospital at Rittenhouse

Christine Cheatham, Physical Therapist,
Penn Institute for Rehabilitation Medicine

Brittany Chervino, Physical Therapist,
University City Outpatient

Malachy Clancy, Occupational Therapist,
Hospital of the University of Pennsylvania
Inpatient Therapy

Keith Creagh, Physical Therapist,
Pennsylvania Hospital Inpatient

Dennis DeAquino, Physical Therapy Assistant,
Specialty Hospital at Rittenhouse

Lianne DiMarco, Speech Language
Pathologist, Hospital of the University of
Pennsylvania Inpatient Therapy

Hani Dressler, Speech Language Pathologist,
Penn Presbyterian Medical Center
Inpatient Therapy

Chelsea Flick, Clinical Nurse II, Specialty
Hospital at Rittenhouse

Frances Flood, Certified Nursing Assistant,
Penn Institute for Rehabilitation Medicine

Sarah Fromal, Physical Therapist, Hospital of
the University of Pennsylvania Inpatient Therapy

Jennifer Fuller, Respiratory Therapist,
Specialty Hospital at Rittenhouse

Douglas Gabel, Physical Therapist, Penn
Presbyterian Medical Center Inpatient Therapy

Samika Glenn, Certified Nursing Assistant,
Penn Institute for Rehabilitation Medicine

Christopher Gorrell, Physical Therapist,
Penn Institute for Rehabilitation Medicine

Paul Grous, Physical Therapist,
Woodbury Heights Outpatient

Marisa Hart Occupational Therapist,
Hospital of the University of Pennsylvania
Inpatient Therapy

Robert Hodge, Hospital Aide,
Penn Institute for Rehabilitation Medicine

Tiffany Hogan, Speech Language Pathologist,
Hospital of the University of Pennsylvania
Inpatient Therapy

Elizabeth Jacobson, Speech Language
Pathologist, Penn Presbyterian Medical Center
Inpatient Therapy

Charletta Jennings, Patient Unit Clerk,
Penn Institute for Rehabilitation Medicine

Michael Karl, Physical Therapist,
Penn Institute for Rehabilitation Medicine

Lauren Kerstetter, Physical Therapist,
Penn Institute for Rehabilitation Medicine

Stan Kumiega, Clinical Nurse, Specialty
Hospital at Rittenhouse

Melissa Lesser, Physical Therapist,
Hospital of the University of Pennsylvania
Inpatient Therapy

Susana Mallari, Clinical Nurse II,
Penn Institute for Rehabilitation Medicine

Sarah Martyn, Physical Therapist, Penn
Presbyterian Medical Center Inpatient Therapy

Allison McDowell, Occupational Therapist,
Penn Presbyterian Medical Center
Inpatient Therapy

Brian McFarland, Nurse Liaison, Penn
Institute for Rehabilitation Medicine

Oluwatobi Menawonu, Clinical Nurse II,
Specialty Hospital at Rittenhouse

Karen Moring, Clinical Nurse II,
Penn Institute for Rehabilitation Medicine

Karen Olverson, Certified Nursing Assistant,
Penn Institute for Rehabilitation Medicine

Larissa Peale, Clinical Nurse II,
Penn Institute for Rehabilitation Medicine

Jane Peterson, Respiratory Therapist,
Specialty Hospital at Rittenhouse

Barbara Powell, Office Supervisor,
Radnor Outpatient

Bryant Reddy, Certified Nursing Assistant,
Specialty Hospital at Rittenhouse

Tiffany Reid, Clinical Nurse II,
Penn Institute for Rehabilitation Medicine

Kjisten Robin, Occupational Therapist,
Penn Institute for Rehabilitation Medicine

Allison Roth, Physical Therapist,
University City Outpatient

Junize Saint-Sulne, Certified Nurse Assistant,
Specialty Hospital at Rittenhouse

Lisa Sator, Physical Therapist,
Pennsylvania Hospital Outpatient

Francesca Savage, Physical Therapist,
University City Outpatient

Laura Schaffner, Occupational Therapist,
Hospital of the University of Pennsylvania
Inpatient Therapy

Martina Shields, Occupational Therapist,
Penn Institute for Rehabilitation Medicine

Jemima Simon, Patient Service
Representative, Rasansky Outpatient

William Spinello, Patient Service
Representative, Arcadia Outpatient

Crystal St. Fort, Clinical Nurse II,
Penn Institute for Rehabilitation Medicine

Linda Stevenson, Nursing Professional
Development Specialist, Penn Institute for
Rehabilitation Medicine

Lisa Tate, Physical Therapist, Cherry Hill

William Trinidad, Certified Nursing Assistant,
Specialty Hospital at Rittenhouse

Jayea Watson, Physical Therapist,
Specialty Hospital at Rittenhouse

VOLUNTEER PROGRAM AT GOOD SHEPHERD PENN PARTNERS

Good Shepherd Penn Partners volunteers provide service to patients from all over the world in the region's most comprehensive post-acute care continuum. Volunteers play an important role in patient satisfaction and add an extra dimension of personal service to our patients. Every volunteer's generous gift of time and talent is valued. Through the joint venture between Good Shepherd Rehabilitation Network and Penn Medicine, a wide variety of unique volunteer opportunities are available because of the partnership structure.

Volunteers provide enrichment to the patient experience throughout Good Shepherd Penn Partners, including long-term acute care, inpatient rehabilitation and outpatient rehabilitation. Volunteer assignments may exist in clinical and non-clinical locations of the hospital, including nursing units, administrative offices and other hospitality locations.

After graduating from West Chester University's MSW program in spring 2016, Angela Cucchi aspired to begin her career in a health care setting.

"It is difficult to enter this field of practice without experience," said Cucchi. "I thought that volunteering for this organization would be an excellent way to network and familiarize myself with medical social work in a rehabilitative setting."

Cucchi has been able to provide support for the Case Management department by collecting community resources for both inpatient and outpatient clinics to use when necessary during patient care. Volunteering in a physical rehabilitation setting has been important for Cucchi, who has been undergoing outpatient therapy at Penn Therapy & Fitness over the past two years.

"I have been where the patients are through my own experience, and this was good way to give back. I understand some of the barriers and needs this population may encounter throughout their recovery process," said Cucchi. "I honestly can't think of a better way to utilize the skills that I have learned during my transition from student to professional."

Liz Van Horn is currently volunteering at Good Shepherd Penn Partners while she is attending school to become an occupational therapist. In addition to the hands-on experience being received through volunteering, she also feels that the opportunity is a chance to give back to the organization that helped her recover as a patient when dealing with chronic neck pain in high school.

"I wanted to be a part of the positive and beneficial community that helped both me and my mom with our pain issues," said Van Horn. "I have not volunteered somewhere like this before so it is exciting to have the most hands-on experience I could have at this point in my life."

Although she is not able to physically assist with the patients, Van Horn plays a vital part in the patient experience by providing personal interaction during their rehabilitation journey. This can include greeting patients, updating boards with times of each therapy session, providing ice packs and water. Van Horn plans to continue her volunteer work throughout the school year as a way to continue to build her clinical foundation as a future occupational therapist.

"I am now more confident in my decision to pursue a career in occupational therapy. I had thought about taking a year off before graduate school to work, but now I can't wait to start school," said Van Horn. "While it is such a great opportunity to see therapists at work, talking to patients and their families is what I look forward to the most. Their positive attitudes and persistence motivate and inspire me. I hope my presence can be good company for them while enduring some of their tougher therapies."





MULTIPLE COMMUNITY ACTIVITIES

Good Shepherd Penn Partners is committed to being an active member in the communities that we treat throughout the Delaware Valley region. Our employees voluntarily donate their time to provide education and support during various events throughout the year. They are able to provide education, resources and service information, but most importantly represent the excellence in quality care associated with GSPP. As an organization, our employees provided 13,290 hours of service through community benefit outreach.

In FY 2016, we were involved with community events such as:

AMERICAN HEART ASSOCIATION WALK

MIND YOUR BRAIN CONFERENCE

PENN MEDICINE'S MIND YOUR BRAIN SYMPOSIUM

PENN RELAYS

THE JEAN FELDMAN CONFERENCE

THE RADNOR RUN

“MY FAVORITE PART
ABOUT VOLUNTEERING HERE IS
FEELING THAT I AM
A PART OF A TEAM AND
KNOWING THAT I AM
GIVING BACK.”

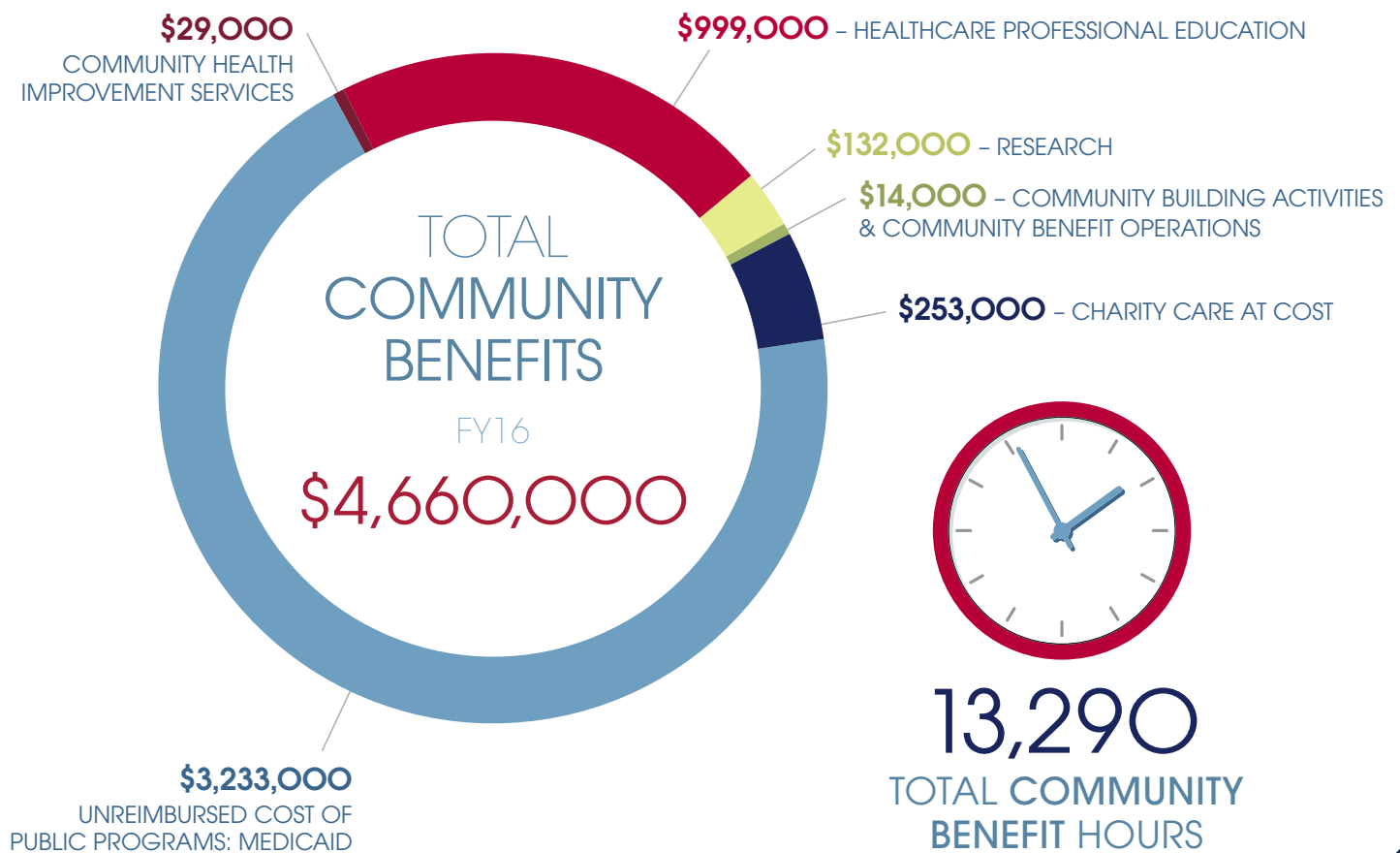
—ANGELA CUCCHI,
Good Shepherd Penn Partners Volunteer



GOOD SHEPHERD PENN PARTNERS

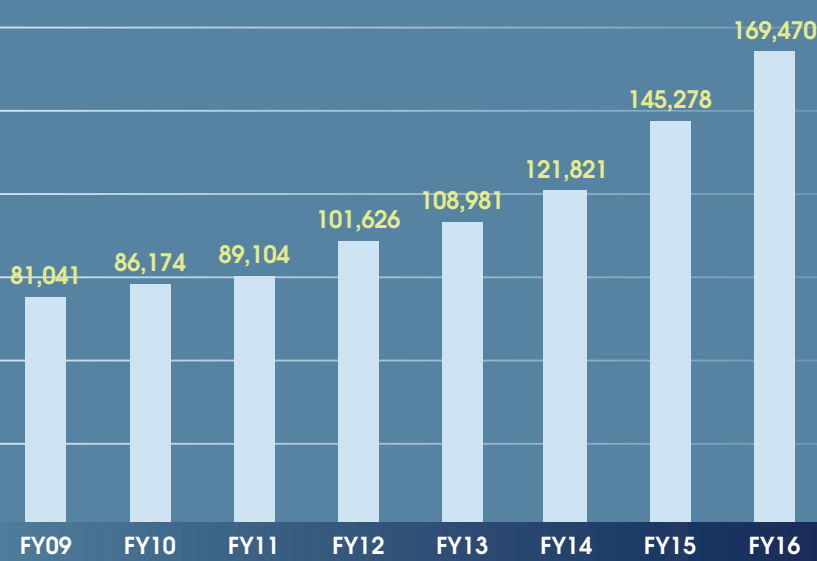
BY THE NUMBERS

We are proud of our nurses, therapists, administration and support staff who volunteer their time to those in need at our locations and beyond. These activities include providing care top patients who are unable to afford their care (Charity Care) and activities to support the broader community including as research, health professions education and community health improvement services. This past year, these components represented over xxx million dollars of the value provided to and for the community.





OUTPATIENT VISITS



FINANCIALS

Good Shepherd Penn Partners continues to see growth and a strong financial outlook.

TOTAL UNRESTRICTED REVENUES AND OTHER SUPPORT

FY14.....	\$79,881,593
FY15.....	\$84,666,499
FY16.....	\$85,325,364

TOTAL EXPENSES

FY14	\$70,359,094
FY15	\$73,030,682
FY16	\$76,776,846



NUMBER OF EMPLOYEES IN FY16: 735



INPATIENT REHABILITATION



PENN INSTITUTE FOR REHABILITATION MEDICINE

1800 Lombard Street
Philadelphia, PA 19146
☎ 877.969.7342

SPECIALTY HOSPITAL AT RITTENHOUSE

1800 Lombard Street
Philadelphia, PA 19146
☎ 877.969.7342



ACUTE THERAPY LOCATIONS

Hospital of the University of Pennsylvania

3400 Spruce Street
Philadelphia PA 19104
☎ Hospital Operator: 215.662.4000

Penn Presbyterian Medical Center

51 N. 39th Street
Philadelphia, PA 19104
☎ Hospital Operator: 215.662.8000

Pennsylvania Hospital

800 Spruce Street
Philadelphia PA 19107
☎ Hospital Operator: 215.829.3000

SKILLED/SUB ACUTE THERAPY LOCATIONS

Penn Center for Continuing Care

51 N. 39th Street
Philadelphia, PA 19104
☎ 215.662.9403

Penn Center for Rehabilitation and Care

3609 Chestnut Street
Philadelphia, PA 19104
☎ 215.386.2942

OUTPATIENT REHABILITATION



PHILADELPHIA

Penn Therapy & Fitness Pennsylvania Hospital

330 S. 9th Street, First Floor
Philadelphia, PA 19107
☎ 215.829.7275

Penn Therapy & Fitness Perelman Center

3400 Civic Center Blvd
Philadelphia, PA 19104
☎ 215.662.4242

Penn Therapy & Fitness Rittenhouse

1800 Lombard Street, First Floor
Philadelphia, PA 19146
☎ 215.893.2500

Penn Therapy & Fitness University City

3737 Market Street, Suite 200
Philadelphia, PA 19104
☎ 215.349.5585

Penn Therapy & Fitness Weightman Hall

235 S. 33rd Street (Franklin Field complex)
Philadelphia, PA 19104
☎ 215.615.4402

Penn Therapy & Fitness University City

3737 Market Street, Suite 200
Philadelphia, PA 19104
☎ 215.349.5585

PENNSYLVANIA SUBURBS

Rasansky Physical Therapy (Bala Cynwyd)

2 Bala Plaza, Suite IL 47
Bala Cynwyd, PA 19004
☎ 610.668.1048

Penn Therapy & Fitness Conshohocken

20 East 11th Avenue
Conshohocken, PA 19428
☎ 610.828.7595

Penn Therapy & Fitness Glenside (Arcadia University)

Health Science Center, Suite 102
450 South Easton Road
Glenside, PA 19038
☎ 215.572.4060

Penn Therapy & Fitness Jenkintown

500 Old York Road, Suite 230
Jenkintown, PA 19046
☎ 215.886.0414

Penn Therapy & Fitness Lansdale

1800 Pennbrook Parkway
Lansdale, PA 19446
☎ 215.661.8660

Penn Therapy & Fitness Media

605 W. State Street, Suite 101
Media, PA 19063
☎ 610.565.1041

Penn Therapy & Fitness Radnor

250 King of Prussia Road, Suite 2C
Radnor, PA 19087
☎ 610.902.2300

Penn Therapy & Fitness Valley Forge

1210 West Swedesford Road, 3rd Floor
Berwyn, PA 19312
☎ 610.644.4645

Penn Therapy & Fitness Yardley

777 Township Line Road, Suite 180
Yardley, PA 19067
☎ 215.968.0145

NEW JERSEY SUBURBS

Penn Therapy & Fitness Cherry Hill

1865 Route 70 East, Suite 110
Cherry Hill, NJ 08034
☎ 856.216.0047

Penn Therapy & Fitness Woodbury Heights

1006 Mantua Pike, Suite B
Woodbury Heights, NJ 08097
☎ 856.686.8270





OUR MISSION

Create world-class, patient-centered rehabilitation and post-acute care services by defining evidence-based practice and fully integrating care throughout the continuum.

OUR VISION

Our vision is **PARTNERING TO REALIZE LIFE'S POTENTIAL.**





Official Therapy Provider for  Penn Medicine

1800 Lombard Street | Philadelphia, PA 19104 | 877.969.7342

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