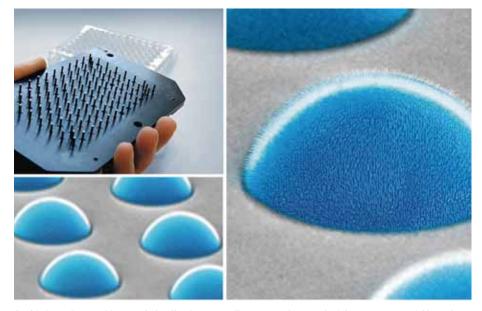
### August 2007



Published monthly for the employees, physicians and volunteers of Scripps

### **Genomic Medicine Program** The Gene Hunt By Josh Baxt



Sophisticated gene chips, made by Illumina, Inc., allow researchers to decipher genomes quickly and accurately. The spheres in this image are three microns (three millionths of a meter) in diameter.

ike certain families, some genes are a little dysfunctional. They can produce too much of a protein or not enough. They can leave us vulnerable to heart disease, diabetes, cystic fibrosis or other conditions. On the other hand, some parts of our genetic code may act as quality control, protecting us from disease. It's a puzzle, and organizations around the globe are working overtime to solve it. With a brand new genomics lab, a world-class team of researchers and a diverse patient base, Scripps is poised to be a major player.

The Genomic

Medicine

recruited

some of the best and brightest.

Program has

How do we define quality

and how do we improve it?

Chris Van Gorder

answers questions

about Mercy Chula

Vista and more

In the past six months, Scripps has built a stellar team of scientists, led by Chief Academic Officer Dr. Eric Topol, and equipped a lab with mind-blowing gene-reading machines (see the sidebar on page six) and other sophisticated instruments to determine what specific genes do, by themselves, and in relation to other genes, and how different parts of the genome function.

"The lab is functional, the genomics side is in high gear," says Dr. Topol. "We have full capabilities for ultra high-throughput genotyping."

In other words, Scripps has joined the hunt for the dysfunctional genes that cause disease. The ultimate prize is better health for all of us.

#### The Fruits of Genetic Research

As a cardiologist at the Cleveland Clinic, Dr. Topol headed enormous cardiovascular research trials. The trouble was, the research wasn't saving many lives.

"The problem with heart attack is, by the time you get to the emergency room, you're already two hours into it," says Dr. Topol. "I thought, this fire drill is the wrong way to work. We need to find the genetic basis so we can prevent heart attacks in the first place."

Dr. Topol restructured the research programs at Cleveland Clinic and developed the first cardiovascular gene bank. He was looking for families whose genetic codes made them susceptible to heart attacks. Armed with that knowledge, people could alter their lifestyles and perhaps avoid heart disease altogether.

Continued on page 6



#### Dear Mr. Van Gorder: Recently I heard you speak about improvements being made at Scripps Mercy Chula Vista. Can you give us some details?

Scripps continues to reinvest in all of our campuses, including Scripps Mercy Chula Vista. This past year, the management team at Chula Vista has focused on updating the clinical imaging equipment.

The hospital has added PACS, a 1.5T MRI machine and a 16 slice CT scanner. The hospital is also working on a new outpatient imaging center, a new state-of-the-art nuclear medicine camera and an interventional radiology suite.

Over the next several years, we will also focus on complying with the SB1953 seismic safety requirements. Current estimates for Chula Vista's seismic retrofit costs range from \$20-\$40 million—of an estimated \$350-\$400 million for the system. Assuming nothing unexpected takes place in San Diego during the next few years, we expect to be in compliance with the regulations by 2015, which will allow the hospital's licensure to be extended to 2030.

#### Dear Mr. Van Gorder: I just read about a class action suit against Scripps. Can you tell me a little more about it?

The lawsuit, filed in January 2006 against Scripps Health by former patient Phillip Franklin, who is uninsured, alleges that Scripps sets unfair charges for uninsured patients and does not provide enough charity care.

Providing care to the uninsured is imbedded in the values that allow us to live our mission every day. So, it is extremely difficult for any of us to read news reports that call into question our commitment to that mission. We strongly object to the representations made in the court documents and in the media by Mr. Franklin and his legal counsel.

Mr. Franklin's attorneys asked the court to grant the case class-action status to allow them to potentially represent other uninsured patients and a judge granted that request. This is the initial step in a class-action lawsuit and it is important to keep in mind that, in this ruling, the court has not determined that any of the Scripps charges were inappropriate.

As a non-profit health care provider, Scripps provided more than \$215 million in community benefits in fiscal year 2006, including \$195 million in uncompensated care—of which \$26 million was direct charity care.

Scripps has financial assistance programs and policies in place to offer discounts and payment plans to uninsured patients who may have difficulty paying their medical bills. Our patient access teams provide this information to patients who may be eligible for these programs. And of course, we fully comply with AB774, a state law that establishes set criteria for assisting low income uninsured patients with discounted hospital charges, charity care, billing and debt collection policies.

As this case progresses through the court system, we may see more media reports that include comments attacking our commitment to the community. We will keep you informed of the facts and, if you have questions or concerns, please share them with a member of your site's executive team.

#### **How it Works**

Chris Van Gorder, President and CEO

## **Transportation Benefits**

With gas prices climbing and more public transportation options available, now is a good time to check out the employee transportation benefit. Created in response to staff feedback, this benefit is open to all Scripps employees and is a great way to save money, time and stress.

#### How it Works

The transportation benefit lets you purchase monthly passes for the San Diego trolley, bus and Coaster at 30 percent off the regular price. Plus, you get to pay with pretax dollars for even greater savings.

Participation is easy. Simply order passes in human resources by the 15th of the month prior to the month of the pass. For example, July passes must be ordered by June 15. All payments are done through payroll deductions, so you will have to fill out an Employee Payroll Deduction Form. For routes, prices for monthly passes and more, visit sdcommute.com or call the Regional Transit Office at 619-233-3004 (Southern San Diego County) or 1-800-266-6883 (Northern San Diego County). You can find other commuting resources at keepsandiegomoving.com.

#### For More Information

To order a transportation pass or learn more about the Scripps Employee Transportation Benefit, visit your human resources office.

Item	Regular Cost	Discount	Employee Cost
1 Month Bus/Trolley Pass	\$60.00	\$18.00	\$42.00
1 Month Bus/Trolley - Ready	\$64.00	\$19.20	\$44.80
1 Month B/T Comm Express	\$84.00	\$25.20	\$58.80
1 Month B/T Senior/Disabled	\$15.00	\$4.50	\$10.50
1 Month Coaster Pass/ Zone 1	\$115.00	\$34.50	\$80.50
1 Month Coaster Pass/ Zone 2	\$126.00	\$37.80	\$88.20
1 Month Coaster Pass/ Zone 3	\$142.00	\$42.60	\$99.40
1 Month Coaster Pass/Zone 4	\$154.00	\$46.20	\$107.80
1 Month Coaster Pass/Senior	\$38.50	\$11.55	\$26.95
1 Month Breeze Pass	\$54.00	\$16.20	\$37.80

These prices are subject to change. For more information, contact your human resources office.

# Defining Quality

**B** ecause the term quality has so many subjective interpretations, it can be difficult to define. For example, a clinician might view quality care as performing all necessary procedures without any clinical errors. On the other hand, a patient might feel that quality care is the clinician fully explaining everything that's being done and why. Of course, each answer is correct, and we can rely on both definitions as we go through our daily routines. But as a system, it's important for us to know exactly what we mean by quality.

#### The Big Picture

When Scripps looks at quality, we measure it three ways: patient satisfaction and service; patient care and outcomes and patient safety. We have a number of goals that go along with those measurements. Over the next three years, we want to achieve strong patient satisfaction and be ranked in the top 10 percent nationally on clinical measures. These are lofty goals, and we're going to have to raise our game as a system to achieve them, but we're already making good progress in some areas.

"We have some of the best Medicare mortality rates in the nation," says Mikele Bunce, Ph.D., director of quality project management. "For example, each of our hospitals has statistically better acute myocardial infarction mortality rates than the national average. Unfortunately, patient satisfaction scores are not as consistent across the system."

We already know that patient satisfaction is a huge priority, as we check our Success Shares updates frequently. Those numbers are improving, but for Scripps to lead the region in quality, we need to continuously refocus on these goals.

#### We Can Make Improvements

We are always working to improve quality at Scripps because it's part of our basic value system. But there's another good reason. People are watching. Consumers have new tools to check out hospital quality and make their health care decisions accordingly, but that's only part of the picture. Insurance companies and even banks are taking an interest in quality measurements. So, while we work on quality simply because it's the right thing to do, we must also recognize that the hospitals that offer measurably superior

quality will be the hospitals people trust with their care.

But what happens if you see something in your area that needs improvement? What do you do? Your first step should be to talk to your supervisor, but

you can also contact one of your site quality leaders (see list at bottom).

Once a problem is identified, there are a number of tools to determine its causes and fix it. Let's say a location is having trouble with delayed test results. What could be causing the problem? In a case like this, the causes could be complicated. A tool called the fishbone diagram examines materials, methods, equipment, environment, people and other factors that can contribute to the problem.

Another tool is called Failure Modes and Effects Analysis (FMEA), which looks at the ways something might fail and the consequences of those failures. It was a FMEA study that eventually led to Scripps' adopting the Alaris pumps.

#### **Other Steps**

Dr. Bunce points out that one of Scripps' goals is to standardize care more widely across the system. This

#### **Quality Leaders**

Campus Point	Mikele Bunce, Ph.D., Brent Eastman, M.D.
Green	Lynn Fiorica, Maida Soghikian, M.D.
Encinitas	Brenda Flores, Jim LaBelle, M.D.
Home Health	Lynelle Posner
La Jolla	Paul Green, Sunil Rayan, M.D.
Mercy	Gayle Sandhu, Davis Cracroft, M.D., Ed Chaplin, M.D.
Scripps Clinic	Dan Dworsky, M.D.

## Scripps Health Quality Awards

The time has come to submit your application for the annual Scripps Health Quality Awards. Who should apply? Any team that has improved care for our patients.

#### Award Criteria

The awards will be presented to teams that have implemented an evidencebased, multidisciplinary practice. A winner will be selected for each site by the leadership team at that site. Judges will be looking for a multidisciplinary, team effort; collaboration with a medical staff champion; evidencebased support; enthusiasm, focus and follow-through. The initiative must have been implemented within the past year.

#### **More Details**

Applications and deadline information are on ScrippsNet. Winning teams will be recognized at the inaugural Quality Patient Safety Summit in November, and a summary of best practices will be shared across the system.

brings a number of benefits, as consistent procedures will allow clinicians to float more between sites. The Centricity Project, led by the chief nursing executives, will help move us in that direction.

It's also important to recognize that making quality improvements is not easy. People often resist change, especially when that change may require more work on their part.

"We need to do a better job of rewarding people for excellent quality care," says Dr. Bunce. "We created the Scripps Quality Award (*see sidebar*) because we realized there's more that we can do to recognize people. Quality is important enough that it deserves its own reward."

The award is only one of many ways Scripps is addressing quality. The system's quality leaders are working with the Center for Learning to develop a training program to address performance improvement, team facilitation and change management.

"We have the right resources," says Dr. Bunce. "We've got great physicians, nurses and management. We don't yet have our arms around quality the way we do finance, but we will."

#### Scripps Awards \$300,000 in Community Benefit Grants

The Scripps Health Community Benefit Fund makes grants to local organizations that offer critical health care services. Since its creation in 2003, the fund has provided \$1.2 million to improve care in San Diego.

In 2007, Scripps awarded \$300,000 in Community Benefit Fund grants to eight organizations throughout San Diego County to improve access to vital health care services for the elderly, homeless, economically disadvantaged, mentally ill and others.

#### This year, Scripps made grants to:

\* <u>Consumer Center for Health Education</u> and <u>Advocacy</u> in downtown San Diego for its work helping low-income, uninsured patients at Scripps Mercy San Diego and Scripps Mercy Chula Vista get access to health care benefits and services.

\* Family Health Centers of San Diego for its Hillcrest Counseling Center, which provides psychiatric evaluation, medication management, case management and therapy services to patients who have been recently discharged from Scripps Mercy's behavioral health unit and people with mental health needs who visited Scripps Mercy's emergency department.

\* <u>San Ysidro Health Center</u> to implement disease management/patient tracking software. The goal is to improve case management of established health center patients with chronic conditions; new unassigned hospital-referred patients who need continuing primary care or walk-in patients who need episodic or acute care.

\* <u>Catholic Charities</u> to provide shortterm emergency shelter for medically fragile homeless patients being discharged from Scripps Mercy.

\* <u>Norman Park Senior Center in Chula</u> <u>Vista</u> for its physical activity and fitness program for seniors.

\* <u>The Whittier Institute for Diabetes</u> to provide access to retinal screenings, glaucoma testing and diabetic vision education for disadvantaged San Diegans with diabetes.

\* <u>INFO LINE/2-1-1 San Diego</u> to operate its telephone dialing code, which provides information about community, health and disaster services.

\* <u>The Trilateral Partnership</u>, a collaboration of local health care providers, for its Partnership for Smoke-Free Families program, which provides services to reduce tobacco smoke exposure among pregnant women and small children.

#### In the News: Scripps People in the Media

\* Scripps La Jolla hand surgeon Dr. Richard Brown was quoted an article on ABCNews.com on July 10 about the increase in ha injuries from overusing hand-held devices.

\* Scripps Mercy's Dr. Michael Sise spoke at the County Health and Human Services news conference on July 3, announcing th start of the Get off Meth campaign at Scripps Mercy. The even was covered by KUSI, FOX 6, NBC 7/39 and the San Diego Unio Tribune.

\* Scripps Mercy Hospital's new advanced da Vinci Surgical Syst was featured in the San Diego Daily Transcript on July 4. Dr Can Salem was interviewed about the new surgical system by KBNT in a report that aired June 27 and 28.

\* Chief Medical Officer Dr. Brent Eastman and administrative director of disaster preparedness Patty Skoglund were interview for "Disastrous Expenses," an article in Modern Healthcare on June 25 about budgeting for disaster preparedness.

\* Mike Bardin, senior director of public and government affairs, participated in a discussion about the health care industry hoste by the San Diego Daily Transcript and was quoted and pictured in the June 22 article about the roundtable.

\* Dr. E. Victor Ross, medical director, Scripps Clinic Laser & Cosmetic Center, was interviewed by NBC 7/39 for a story abou new laser treatments for spider veins.

\* The Healing Hearts program at Scripps Center for Integrative Medicine was mentioned in a Bottom Line/Health article, "What most people don't know about heart disease" on July 4.

## submit Your Hot seat Questions

Each year, employees can ask senior vice president Vic Buzachero tough questions for our in the Hot seat feature. since its inception hundreds of employees have submitted questions and shared candia comments on salary, benefits, retirement and other workplace issue While not every response is published, each question receives a person ized answer. Due to the large number of questions, please allow two three months for a written reply.

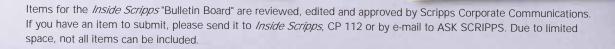
Please send your Hot seat questions by interoffice mail to CP2 or by e-mail to scrippsHumanResources@scrippshealth.org.

#### P( Shortcuts

To control the order in which files appear, name the file with a number in front. For example, 1 January, 2 February, etc.

Got a good shortcut? Send it to Ask Scripps. If we use it, you'll get a massage coupon.

Introductory Microsoft dasses teach valuable tips: scrippsnet2/is/98.htm.





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\* Beginning in fiscal year 2008, Scripps will replace its standard Press Ganey patient satisfaction survey with a patient survey compiled by the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS). Though both surveys are similar in what they measure, the HCAHPS survey allows us to expand the number of hospitals we are compared to from 28 facilities in Southern California to 99 percent of hospitals nationwide. Also, the HCAHPS survey results will soon be publicly reported on hospitalcompare.hhs.gov, along with clinical quality measures. Participation will be required to receive full Medicare payment increases in 2008.

\* Scripps Mercy Hospital has joined forces with the San Diego County Health and Human Services Agency to launch a new "Get off Meth" campaign to educate the public on the dangers of crystal methamphetamine.

\* A record-breaking \$1.38 million was raised at the 16th Annual Spinoff Auction on May 24 at the Hyatt Regency La Jolla at Aventine. During the silent and live auctions, more than 540 guests bid on a variety of items to support Scripps Cancer Center, Stevens Division.

\* It's time to sign up for the American Heart Association's 16th Annual San Diego Heart Walk Saturday, Sept.15, in Balboa Park. Join your co-workers and friends at this fun event, as we help raise money to fight heart disease and stroke in San Diego County. For more information, or to register, contact one of the team captains on your campus.

\* Scripps La Jolla has been recognized as a top hospital for heart care and gynecology by U.S. News & World Report. The magazine devoted a recent edition to outstanding health care across the nation and selected Scripps La Jolla as one of "America's Best Hospitals."

\* On July 2, Dr Carol Salem performed Scripps' first robotic radical prostatectomy, using the da Vinci Surgical System, at Scripps Mercy San Diego. The surgery went well, and the patient recuperated as expected.

### Protecting Confidential Information

Does hitting delete or emptying the recycle bin on a desktop computer permanently erase data? Is it okay to dispose of a CD/DVD containing confidential information in the regular trash? Can you donate computers and other electronic equipment you no longer need? If you answered yes to any of these questions, you could be putting Scripps confidential information at risk.

Scripps' new policy on Equipment and Electronic Media Disposal, Transfer, Reuse and Data Sanitization shows employees, physicians and business partners how to properly disposing of items with stored electronic information. Call the Scripps Help Desk at 858-678-7500 or the biomedical engineering department at 858-626-5082 to dispose of any equipment that is obsolete, loaned, transferred or marked for donation.

858-678-7500

858-626-508

858-626-508;

### Disaster Planning

When creating a home disaster kit for your family, don't forget to create a smaller version for each car, which should include comfortable clothing and shoes for each member of your family. Don't throw out those old sneakers, recycle them in the car kits.



Dr. Topol presents at a recent news conference.

"We can have a two year-old who has this gene and is hardwired for heart attacks, and we can intervene early in life," says Dr. Topol. "Now that we've accomplished that, why not apply this work to cancer, neurogenerative diseases like Alzheimer's and other vascular diseases." our large hospital system. Many labs have the technical expertise but lack access to patients. Also, notes Dr. Topol, while many genomic studies have already been done, the vast majority have focused on people of European descent. The ethnic diversity of our patient pool will help us learn more about gene variations and how they impact health. The voluntary program has already begun collecting patient DNA at Scripps Green and Scripps Clinic and will soon expand to hospitals throughout the system.

"The clinical arm is the priority. We need to be enrolling patients everywhere and to have a presence at all the Scripps sites," says Dr. Topol.

#### **Beyond Disease to Wellness**

Studying the genome is similar to studying astronomy—the more we learn about it, the more questions we have. For example, only a small portion of our DNA creates proteins, which do much of the heavy lifting on the cellular level. We know the rest of the genome is hard at work, but what is it doing? Also, some individuals have

"We can have a two year-old who has this gene and is hardwired for heart attacks, and we can intervene early in life," says Dr. Topol. "Now that we've accomplished that, why not apply this work to cancer, neurogenerative diseases like Alzheimer's and other vascular diseases."

#### A Few Words on "SNPs"

Genetic studies identify specific genes, often referred to as markers, by locating them on their chromosomes and comparing the variations between genes in different people. Researchers analyze the genetic make-ups of thousands of people to find these variations, called SNPs (single nucleotide polymorphisms or "snips"). The breakthroughs come when a genetic variation can be linked to a specific disease.

Researchers collect thousands of samples from people who are susceptible to a particular disease. They also look at samples from people who have shown no susceptibility. By mapping specific "points of interest" on these genomes, researchers can figure out which gene (or genes) puts the first group at risk.

While labs around the world are conducting similar research, Scripps has a distinct advantage because we integrate our genomics research facilities with genetic variations that should make them susceptible to disease—but they don't get sick. The Scripps Genomic Medicine Program intends to study the "healthy elderly" to determine why they are doing so well.

"We need to find the mechanisms that keep them healthy," says Dr. Topol. "We know these are lurking in the genome. We've found modifier genes in mice, but no one has found them in people. We're looking for a modifier that's a housekeeping gene that keeps the DNA intact; perhaps it works for heart disease, cancer and other diseases."

Getting DNA samples from the healthy elderly is an interesting challenge, since they don't spend much time in hospitals, nursing homes or other care facilities.

"The logistics are tricky, but we have to find them. They don't walk into the clinic every day because they're so healthy. We're going to have to go out to them."

#### A Big Circle

While patients will provide the raw materials for these genetic studies, they will also benefit from the clinical trials Scripps genomic research will help produce. The vision goes like this: Once important gene variations are discovered, Dr. Topol's team will work closely with researchers at The Scripps Research Institute, which has a sophisticated drug discovery program. From there, Scripps will partner with other organizations to conduct clinical trials and ultimately gain FDA approval.

"It's a circle," says Dr. Topol, "from the patient, back to the patient."

Do you have questions or comments about this article? Contact us by e-mail at Ask Scripps or send us a note at CP112.

### Tools of the Trade

R eadChips, built by local biotech Illumina, are microarrays that use three micron (a micron is one millionth of a meter) silica beads to capture, examine and decipher specific parts of a genome. Each bead is covered with hundreds of thousands of copies of a specific oligonucleotide, a piece of DNA that captures complementary segments of DNA. Tests are then carried out on the captured segments of DNA to determine which DNA basepair occurs at a specific site in the genome. By analyzing which beads have captured specific DNA nucleotides in many samples, researchers can survey the majority of the genome and determine if there are any variations or other parts of the genome associated with disease.



# The Genomics Dream Team



Chris Van Gorder joins Drs. Kelly Frazer, Sarah Shaw Murray, Nicholas Schork and Eric Topol.

r. Eric Topol came to Scripps with the goal of deciphering key areas of the genome. To make this happen, he recruited some of the world's premier genomic researchers. For Drs. Nicholas Schork, Sarah Shaw Murray and Kelly Frazer, this is more than a new job; it's the opportunity of a lifetime.

#### **Statistical Analysis**

Nicholas Schork, Ph.D., has the innate ability to place his talents at the right place at the right time. He was a graduate student at the University of Michigan in the late 80's when the science of genomics was being born. Genetic researchers soon learned that analyzing the genome produced reams of data that had to be carefully analyzed. Dr. Schork was working at Michigan's medical school when the need became apparent. While earning his Ph.D. in epidemiology, he helped provide statistical support for these early studies.

In 2001, Dr. Schork was appointed to the faculty at UCSD. While this new position offered him access to excellent research facilities, what he needed most was a large genetic sample to study. When he heard of Scripps' plans to bring genetic studies together with a large patient base, Dr. Schork was ready.

"Blockbuster drugs work in very few people," says Dr. Schork. "There's enough benefit to justify their use, but we need to identify the people they're most useful for. How can we improve the use of those existing drugs? We need to find markers that distinguish the people who will respond and won't respond. If you're looking at millions of spots on the genome that may be associated with particular diseases, how do you separate the ones that are associated from the ones that aren't? It's either a statistical nightmare or a lot of fun."

#### **Databases and Data**

For Sarah Shaw Murray, Ph.D., going full circle has been an incredible trip. When Dr. Murray first started in the field, there were 400 known gene markers. Now there are close to a million. Knowing more markers is especially important when trying to define the genetic causes of complex traits like diabetes, heart disease or schizophrenia. Because multiple genes play a cumulative role in each of these diseases, the effect of any one gene is small. Researchers needed new tools to analyze the genetic makeups of many people—quickly.

As director of the Genotyping Science Group at Illumina, Dr. Murray played a large role in developing that technology. Now, with microarrays that can rapidly analyze as many as a million pieces of the genome, researchers can get better information on individual genes and determine how gene variations lead to complex diseases.

Though Dr. Murray had an important role in developing superior gene arrays, she was a bit wistful for lab work. The Scripps Genomic Medicine Program was the perfect opportunity. "I was making all these tools and looking at all these people doing such exciting work with these tools, and I wanted to be a part of it," says Dr. Murray. "Our end game is taking this information and really helping to identify populations that will respond to specific drugs. But even that's just the tip of the iceberg. We need to understand the metabolic pathways and enzyme pathways of disease and how to disrupt them."

#### In the Lab

Kelly Frazer, Ph.D., can hardly contain her excitement; she gets so passionate about human genetics. Her hands weave complex geometric patterns as she talks about genes and how they function.

Dr. Frazer has been studying human genetics for more than 20 years and is only getting started. Her first studies used a technique called radiation hybrid mapping, a method that combines living and dead cells to observe how DNA pieces combine. Compared to current technology, the technique was crude, but it taught us a lot about the human genome.

Later, Dr. Frazer worked at the Lawrence Berkeley National Laboratory, which sequenced chromosome five for the Human Genome Project. Like the rest of the Scripps Genomics Medicine team, Dr. Frazer is interested in learning how the genome functions. She notes that only about one percent of the genome codes for proteins. So what does the rest do? Theories abound. For example, the DNA double helix is so tightly wound that it can only do its job if it opens up.

"In making it compact, you shut if off sometimes," says Dr. Frazer. "You can imagine that knowing when and where to open up involves function."

Dr. Frazer acknowledges that there's a great deal we do not understand about human genetics, which is one reason for her excitement. After years in the lab, she now has the opportunity to apply her vast knowledge to helping patients.

"For the last 20 years, I've been working in human genetics and barely interfacing with doctors," says Dr. Frazer. "To start translating this information, we really need to couple scientists with medical doctors so you can transit your findings into medicine. This is where we are headed. Scripps is just ahead of the game."

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#### Values in Action

### Performance Improvement

The Values in Action winners were just announced and, as part of an ongoing series, we're going to focus on these individuals and teams and how they have made such strong contributions to Scripps' success.

Let's start with the **Performance Improvement (PI) team at Home Health: Jennifer Wolff, Cindy Teysko, Charmaine Robles, Betty Lyons, Sandra Hnizdo and Lynn Braverman.** They support clinicians by assisting them with documentation; making sure everything is coded properly and ensuring that all JCAHO, Medicare and Medi-Cal rules are followed.

You might assume that the Scripps value most cited in their award was quality, but in fact it was respect. Though working with clinicians to make sure all T's are crossed and I's dotted could generate tension, the PI staff has adopted a collegial culture to assure respect in all interactions."It's a team effort," says Wolff. "We're all here for the

same thing, quality patient care."

Education is also a priority, as regulations shift frequently and clinicians need to be informed of these changes. But it's a two-way street. The PI staff often joins clinicians in the field to better understand the challenges they face.

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of our community.

A World of Healing

"You see how difficult their jobs are," says Lyons. "They're doing a lot of things in the home that we didn't do years ago."

Going out into the field gives the PI staff a better perspective on the paperwork; and gives clinicians someone to share ideas with. After these joint visits, each clinician and PI staffer separately completes the required paperwork. This drill helps both sides understand the others' point of view to keep them better aligned.

Congratulations to the Home Health PI staff and all Values in Action winners and nominees.

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