Imagine you wake up in the middle of the night and as you walk to the bathroom, your right arm goes numb and you can’t remember your name.

The people of Partners HealthCare know what to do.
As we reflect on the past year and look to the future, we do with a sense of hope. We know each day we will improve the care that we provide to our patients and their families. And we believe that care must be affordable for society. Our mission will be our compass as we accept a leading role in helping to create solutions with political and business leaders, insurers, and the public.

The ideas for our solutions, some of which we share in this annual report, come from a strategic vision that Partners leadership developed in collaboration with teams from our remarkable institutions. We are dedicating ourselves to the delivery of safe, effective, and coordinated patient- and family-centered care that will be efficient, accessible, and transparent. As a health system blessed with many of the brightest minds in medicine, we will design a roadmap for success.

With health care a popular topic in public conversations, we also see this as a time to tell the story of the Partners mission. We have been relatively quiet in the past, but we believe our voice needs to be heard. We cannot shy away from sharing our research breakthroughs that are changing lives, voicing our commitment to medical education that will support a new generation of health care providers, and defining our steadfast dedication to the communities we serve.

As always, our values will guide us. Our constellation of talent, our depth, and diversity will help us to carve a path that will forge our position as leaders in health care today, tomorrow and for generations to come.

To find out more about Partners’ new Strategic Initiative, go to: Partners.org/newnoteworthy/StrategicInitiative.html
Not all hospitals provide you with the same quality of care.

When you arrive at the Massachusetts General Hospital Emergency Department with symptoms of a stroke, you are moved through triage in minutes and a nurse immediately alerts the stroke team that you need attention. You quickly are taken to a radiology center located in the same area, where you are given a brain CAT scan. As soon as a stroke is confirmed, you are given tissue plasminogen activator, tPA.

The tPA dissolves the clot and prevents you from being left with a lifetime of disability. To be most effective, it must be administered within three hours from the beginning of a stroke. Neurologists say that the longer the wait, the more likely irreversible brain damage will occur.

The four Partners hospitals that routinely handle stroke cases have achieved 96–100 percent performance in prompt administration of tPA. The statewide average was 61.7 percent. In June 2010, the Massachusetts Department of Public Health found “wide variation among hospitals in the use of [this] powerful stroke drug.”

Emergency care is continually improving throughout our system.

The Emergency Department at Brigham and Women’s Hospital (BWH) is committed to improving the patient and family experience while decreasing the door to doctor time. Patients are greeted, examined by a physician, and then a team – doctor, nurse, and support staff – is responsible for the patient, and decides whether to admit him or her to either BWH or Faulkner Hospital, a community teaching affiliate of the Brigham.

Newton-Wellesley Hospital leaders studied emergency visits to determine how to improve the patient experience. Dividing visits into discrete segments, they found ways to move patients smoothly through the emergency process. Improvements include eliminating the need for patients to provide information multiple times, gathering detailed information at the bedside, and posting wait times on the hospital’s web site and via smart phone applications.

Emergency patients on the North Shore with stroke symptoms receive immediate and exceptional care from North Shore Medical Center at its community hospitals in Salem and Lynn. Last year, both hospitals were recognized for superior compliance with nationally accepted standards of rapid diagnosis and treatment of stroke patients in their emergency departments.
Care redesign: focusing on people with common but expensive diseases.
Partners clinical teams are currently focused on working to find better, more cost-effective ways to treat four common diseases: diabetes, cardiovascular disease, colon cancer, and your condition: stroke. This new work builds on nearly a decade of quality improvement at Partners and will further advance the implementation of evidence-based, patient-centered care.

High costs are driven by a small fraction of patients.
Medicare patients can be sicker and have multiple conditions, which explains why 10 percent of Medicare patients in the U.S. are responsible for 70 percent of costs. Focusing on the four diseases mentioned above can help control costs.

A breakthrough against runaway Medicare costs.
Chronically ill, medically complex Medicare patients often need more care and support than can be given during a routine office visit. Massachusetts General Hospital (MGH) was selected by the federal Centers for Medicare and Medicaid to find a way to deliver a higher quality of care that would also reduce costs for Medicare patients in the study.

By using nurse case-managers to coordinate patient care during all phases of treatment, MGH saw a seven percent reduction in costs over three years, while admissions were reduced and deaths decreased measurably.

As part of a care network, Partners member hospitals and doctors can effectively adopt successful, cost-saving strategies. In February of last year, Brigham and Women’s Hospital joined MGH in its collaboration with Medicare and enrolled more than 3,000 Medicare patients under the care of their primary care physician practices, including several at Brigham’s community teaching affiliate Faulkner Hospital. A nurse care coordinator works with the patient’s primary care team to identify and overcome any gaps in care.

North Shore Medical Center has also adopted the type of case management program that showed success at MGH. In 2010, North Shore Physicians Group, the medical center’s network of primary and specialty care physicians, enrolled 1,500 patients who are being followed by nurse case-managers.
Shorter stays benefit knee replacement patients and save money.
A team of Brigham and Women’s orthopedic surgeons has improved knee replacements for patients and produced significant cost savings for the hospital. By working with patients and caregivers, changing medications, and altering post-operative activity, the team found that patients reported less pain, had better outcomes, and spent less time in the hospital. Stays went from an average of 3.2 days to 2.4 days.

Serving more patients, reducing the cost per patient.
Newton-Wellesley Hospital (NWH) is responding to the growing needs of its community without adding personnel or space by making better use of existing resources. Changes include starting surgeries 10 minutes earlier in the day and moving patients expeditiously from post-anesthesia to either a hospital bed or a coordinated discharge. By serving more patients without adding staff or space, NWH is noticeably reducing its cost per patient.

Using technology to promote patient safety.
At Partners, 90 percent of prescriptions written by our doctors are done at a computer, which dramatically improves medication safety and saves money by encouraging use of generic drugs. According to Reuters, only 57 percent of Massachusetts doctors e-prescribe; The New York Times reported that only 17 percent of hospitals nationwide prescribe this way. Partners hospitals also use smart intravenous infusion pumps, the electronic medication administration record (eMAR), and bar code technology to help ensure that the right patient gets the right drug at the right dose at the right time.

A Journal of the American Medical Association study by Brigham and Women’s Hospital researchers showed that prescribing by computer reduced serious inpatient medication-related errors by 55 percent, and a New England Journal of Medicine study showed that bar coding/eMAR lowered serious medication errors by 51 percent.
Reducing 30-day readmissions.

Once you leave the hospital, the last thing you want is to be readmitted. A survey of Massachusetts hospitals showed more than 10 percent of patients were readmitted for the same or unrelated complaints within 30 days.

For the hospital, this is also expensive. A congressional study found that three-quarters of readmissions are likely avoidable, often traced to transitions from caregiver to caregiver, and from inpatient to outpatient care. Partners is working to reduce preventable readmissions by improving training; focusing on communication with patients and their family members; identifying patients at higher risk of readmission and working closely with them, and improving hand-offs to sites where discharged patients will receive the next round of care.

Find your strength at Spaulding or at home.

If you are recovering from stroke, rehabilitation can be the longest stretch on your road to recovery. Spaulding Rehabilitation Network, ranked fourth nationally by U.S. News & World Report, operates six inpatient facilities and 23 outpatient clinics in eastern Massachusetts, allowing patients to receive expert therapy without having to travel long distances.

The caregivers at Partners HealthCare at Home use advanced medical tools and technologies to provide in-home care through highly trained nurses, therapists, home health aides, and other professionals. They work closely with one another and with you and your family to make sure that you regain your strength as soon as possible.

Following patients home.

Patients enrolled in North Shore Medical Center’s Heart Failure Program benefit from very personal, intensive disease management and are less likely to be readmitted to the hospital. The program is an example of a wellness approach that makes caregivers responsible for the health of certain high-cost patients outside the walls of the hospital, in a way that can help reduce costs.

You’re back home, but your care continues.
Your house is not your only home.
Your care may be delivered or coordinated through a “medical home,” an innovative model for ensuring efficient, comprehensive care. Your primary care physician leads a medical team that takes responsibility for all of your care, and helps you navigate the health care system. For a stroke patient, your medical home physician assesses you, provides care, coordinates with specialists such as neurologists and rehabilitation experts, and also arranges mental health services for emotional issues that can arise after stroke.

Creative ways to improve the doctor-patient relationship.
The Massachusetts General Hospital Ambulatory Practice of the Future, a primary care practice for MGH employees and their spouses that brings new technology to medicine, opened its doors in July 2010. In this new approach, patients are more involved in their care and are followed by a highly collaborative, interdisciplinary team. The physical spaces of the medical office and exam rooms have been altered to benefit both patient and caregiver. The goal is to keep patients healthy by delivering customized, continuous care to patients, with better outcomes at lower costs.

Stay in closer touch by computer.
Through online portals like Patient Gateway, you have an efficient way to stay in touch with your physician or care team. Partners is using technology to connect you to your doctor through the internet so you can ask questions, access your medical records, check lab results, and make appointments. This will allow doctors and nurses to handle routine matters quickly, leaving time to focus on patients with more complicated conditions. The portal virtually pays for itself in efficiency.

As you return to your routine, you have new ways to stay in touch with your primary care team to assure your continued recovery.
Some of the many ways Partners makes a difference.

We are the single biggest private employer in the state, providing 54,000 jobs.

We bring millions in NIH dollars to the state. Massachusetts General and Brigham and Women's Hospitals are the top two independent hospitals receiving National Institutes of Health research funds; much of this supports work in life sciences, genetics, and personalized medicine.

We provide and support mental health and substance abuse services, despite losses of nearly $60 million; we have added capacity while many others have closed beds for financial reasons.

We support 21 community health centers with capital investments of $83 million since 1994; they care for 325,000 low-income patients.

We've committed $40 million to the state to reduce health premiums for small businesses.

We deliver free and reduced-rate care for 120,000 patients without the means to pay; the value of this care is more than $330 million annually.

The Kraft family gift of $20 million will improve access to and quality of care for the neediest people in Massachusetts, across New England, and throughout the U.S. The Kraft Family National Center for Leadership and Training in Community Health will create a fellowship program to train a new generation of community-based physician leaders. The funds, given by Robert and Myra Kraft and their family, will also support community cancer treatment programs.

Massachusetts General Hospital this year celebrates its bicentennial, marking a storied tradition of compassionate caregiving, groundbreaking research, educational excellence, and improvements to the health of local communities. The third-oldest general hospital in the country and the oldest teaching hospital of Harvard Medical School, the MGH was chartered in 1811 as a general hospital that would care for the city’s sick and poor while providing a place for physicians to learn the art of medicine. Today, the MGH continues to uphold and fulfill this important mission.

McLean Hospital is also commemorating its 200th anniversary, founded at the same time as MGH in 1811; it is today the top-rated independent psychiatric hospital in the nation.

Nantucket Cottage Hospital is celebrating its 100th birthday in 2011, honoring its past while looking forward to its future as a member of the Partners HealthCare family. It is the island’s only year-round hospital serving a resident population of 10,000, which swells to 50,000 in the summer.

Martha’s Vineyard Hospital welcomed over 2,300 supporters and community members to their new hospital at an opening ceremony on April 11, 2010. In a remarkable five-year grassroots campaign to rebuild the hospital, every dollar was generously donated by the island community.

Eleven Nobel Laureates are numbered among our nationally-respected physicians, as well as 87 members of the prestigious Institute of Medicine, and three winners of the Lasker Prize, called “the American Nobel Prize.”

Well over a century after MGH harnessed the power of ether, shown in this landmark painting of the hospital’s Ether Dome operating theatre, today’s faculty continues to unlock the mechanisms of anesthesia, and trains leading anesthesiologists, medical students, and practicing clinicians. Emery Brown, M.D., Ph.D. (inset), of the MGH Department of Anesthesia, Critical Care, and Pain Medicine, was interviewed recently by The New York Times on his research into how anesthesia works and how to administer it safely.

In 1954, Joseph Murray, M.D., a Brigham surgeon, won a Nobel Prize for leading a team that performed the world’s first successful human organ transplant (inset). In 2011, a Brigham team of 20 specialists led by Bohdan Pomahac, M.D., built on the tradition of Dr. Murray and performed the first successful full face transplant in the U.S., continuing the hospital’s national leadership in transplantation.
Partners HealthCare is an integrated health system founded in 1994 by Brigham and Women's Hospital and Massachusetts General Hospital. In addition to its two academic medical centers, the Partners system also includes community and specialty hospitals, community health centers, a physician network, home health and long-term care services, and other health-related entities. Partners is one of the nation's leading biomedical research organizations and a principal teaching affiliate of Harvard Medical School. Partners HealthCare is a non-profit organization.

**FOUNDING MEMBERS:**
Brigham and Women's Hospital
Massachusetts General Hospital

**MEMBERS:**
Brigham and Women's Physicians Organization
Faulkner Hospital
Martha's Vineyard Hospital
Massachusetts General Physicians Organization
McLean Hospital
MGH Institute of Health Professions
Nantucket Cottage Hospital
Newton-Wellesley Hospital
North Shore Health System
North Shore Medical Center:
  - Salem Hospital
  - Union Hospital
  - MassGeneral for Children at North Shore Medical Center
  - North Shore Physicians Group
Partners Community HealthCare, Inc.
Partners Community Health Centers
  - BWH Health Centers:
    - Brookside Community Health Center
    - Southern Jamaica Plain Health Center
  - MGH Health Centers:
    - Charlestown HealthCare Center
    - Chelsea HealthCare Center
    - Revere HealthCare Center
  - Independently Licensed Health Centers:
    - (relationship with MGH)*
    - North End Community Health Center
In addition, Partners is affiliated with 15 community health centers which are operated independently or under license from other hospitals.

Partners Continuing Care:
Spaulding Rehabilitation Network
  - Spaulding Rehabilitation Hospital
  - Spaulding Hospital Cambridge
  - Spaulding Hospital North Shore
  - Spaulding Rehabilitation Hospital Cape Cod
  - Spaulding Nursing & Therapy Center North End
  - Spaulding Nursing & Therapy Center West Roxbury
  - Clark House
Partners HealthCare at Home

**MAJOR TEACHING AFFILIATE OF:**
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*The NECHC has a unique governance structure and affiliation arrangement with MGH that recently evolved in 2007 reflecting the health center's historic independence.

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Chief of Pediatric Surgery
Newton-Wellesley Hospital

David Slovik, M.D.
Chief of Endocrinology/Diabetes
Newton-Wellesley Hospital

Jill Smith, M.D.
Acting Chief of Ophthalmology
Newton-Wellesley Hospital

Richard E. Wilker, M.D.
Chief of Neumatology
Newton-Wellesley Hospital

Henry M. Yager, M.D.
Chief of Neumatology
Newton-Wellesley Hospital

Speciality Hospitals

Scott L. Rausch, M.D.
Psychiatrist in Chief
McLean Hospital

Ross D. Zafonte, D.O.
Chief of Physical Medicine and Rehabilitation, Vice President of Medical Affairs, Research, and Education
Spaulding Rehabilitation Network

Richard L. Zaniewski, D.O.
Chief of Rehabilitation Medicine
Spaulding Hospital North Shore
# Partners HealthCare Leadership

## Partners Senior Management

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## Chief Nursing Officers

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<tr>
<td>Jacqueline G. Somerville, R.N., Ph.D.</td>
<td>Senior Vice President, Patient Care Services and Chief Nursing Officer Brigham and Women’s Hospital (from January, 2011)</td>
</tr>
<tr>
<td>Mairead Hickey, Ph.D., R.N., F.A.H.A.</td>
<td>Chief Nursing Officer and Senior Vice President, Patient Care Services (through August, 2010) Brigham and Women’s Hospital</td>
</tr>
<tr>
<td>Judy Hayes, R.N., M.S.N.</td>
<td>Vice President of Nursing, Chief Nursing Officer Faulkner Hospital</td>
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<tr>
<td>Carol Bardwell, R.N., B.S.N., M.S.N.</td>
<td>Chief Nurse Executive Martha’s Vineyard Hospital</td>
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<tr>
<td>Jeanette Ives Erickson, R.N., M.S.</td>
<td>Senior Vice President for Patient Care Services and Chief Nurse Massachusetts General Hospital</td>
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<td>Linda M. Flaherty, R.N., P.C.</td>
<td>Senior Vice President for Patient Care Services McLean Hospital</td>
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<tr>
<td>Jane Bonvini, R.N., B.S.N.</td>
<td>Patient Care Services Officer Nantucket Cottage Hospital</td>
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<tr>
<td>Elaine Bridge, R.N., M.B.A.</td>
<td>Senior Vice President for Patient Services and Chief Nurse Newton-Wellesley Hospital</td>
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<tr>
<td>Beatrice Thibeau, R.N.</td>
<td>Senior Vice President, Patient Care Services and Chief Nursing Officer North Shore Medical Center</td>
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<tr>
<td>Joanne Fucile, M.S.N., C.R.R.N., O.C.N.</td>
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Imagine you wake up in the middle of the night and as you walk to the bathroom, your right arm goes numb and you can't remember your name. You can't imagine how to do.