Aurora Stories . . .

human...connected...striving
Dear Fellow Employee,

Each day, as we go about doing our jobs, stories surface about how we are making a positive impact, one person at a time, on our patients, the community, and each other. Most of these stories, however, are told to only a few people.

It’s important to share our stories and to celebrate who we are. This book holds a small sampling of hundreds of stories that have been written by employees throughout Aurora about their co-workers. We have collected them in an effort to demonstrate how all of you, on a daily basis, reflect Aurora’s values simply by being who you are.

No matter where you work or what your job is, you make a difference in the lives of the people you touch. I am proud of the work you do; and I sincerely thank you.

Ed
President, Aurora Health Care
This book is dedicated to all Aurora employees, who work together every day, demonstrating great acts of kindness, generosity of spirit, and wonderful service.
Human
in our interactions with others . . .

listening, caring, compassionate
**Big things from small packages**

After the Intensive Care Unit family waiting area desk is closed at 2000 hours, one group vulnerable and needing support are those whose loved ones are either in surgery beyond that time or are in a health crisis on hospital units. The on-call chaplain is typically a resource to assist these individuals with spiritual support. Often family members have simple needs such as finding an open cubicle for rest. An obvious given is the need for a clean and welcoming environment, as people end up sleeping on couches.

As on-call chaplains we frequently encounter one employee who routinely brings a great spirit to her contact with these individuals in a time of considerable stress and anxiety—Sunee Seefeld (Environmental Assistant). Her small stature belies the magnitude of her contribution. First of all, she thoroughly cleans this area, often littered with empty food and beverage containers and other materials. Her tasks are performed in a spirit of enthusiasm, mindfulness, and thoroughness. Rather than carrying a dour attitude toward her work, she always greets others with a smile that communicates loving care, respect, and eagerness to assist. These are certainly welcome qualities for this place where people struggle with uncertainty, fear, and distress.

In addition, it is not uncommon to see Sunee assisting family members to find a cubicle and to locate pillows and blankets for their comfort, or assisting the on-call chaplain in helping families get what they need for physical comfort or spiritual support. This uncommon joy and love that Sunee brings to common tasks is a real inspiration to us.

*Adapted from a story by Mary Feeley, Sandra Goodich, Lynn Coffin, Rita Marie Lustig, James Wake*
Holiday plans

We had a patient with considerable burns on his legs come into the clinic several days after it happened and right before a long holiday weekend. The initial treatment took quite a long time as two nurses cleaned, debrided, and dressed the wounds. To continue his detailed wound care until we could schedule him with his primary physician the following Tuesday, I told the patient to come to the walk-in clinic early on a daily basis and we would change the dressings. Donna Nelson (RN) was off that weekend but knew that the clinic would be very busy and the nursing staff would not have much time to care for the burns. Without saying a word she showed up on Saturday morning before we even opened and spent 90 minutes of her own time on a holiday weekend tending to this patient's burns.

Adapted from a story by Deborah Lemke, MD

Cool, calm, and collected

Linda Williamson (Patient Escort) was transporting a patient by wheelchair through our department, when the patient suddenly had a grand mal seizure. Linda calmly directed the receptionist to call a code as she helped the patient to gently slide out of the wheelchair, while protecting his head from hitting the chair or the floor. She stayed with the patient, talking to him and trying to comfort him, while others tended to the patient's medical needs. The patient did not speak English, so Linda's comforting was especially important to help minimize his fear. Her focus the entire time was on doing what she could to help this patient. She was calm and attentive, and her behavior had a calming effect on everyone involved in this chaotic situation. This patient had two more seizures before he could be transported to the emergency room, and Linda stayed with him for as long as she was needed.

Adapted from a story by Andrea Monicken
Unexpected day care

My father is hospitalized and his illness necessitated me to take a family leave. Due to my mother’s dementia, she cannot be left alone, and I had no one to care for her in the evenings. Charlotte Ware (Wound Care Assistant) quietly volunteered to watch my mother on her days off, including some vacation days, so that I could work some of my assigned hours.

Adapted from a story by Ricki Bruening

Two’s company

One day Stephanie Edel (Coordinator, Social Services) was notified that one of our clients had triggered his life line that calls 911. He was not in a life-threatening situation but was scared to be left alone. Stephanie dropped what she was doing to go to his aid. She sat with him until she was able to determine his condition. After talking with one of our nurses, Stephanie made this client breakfast, washed his dishes, dressed him, cleaned and placed his teeth in his mouth, and escorted him to our day center so he would not have to be left alone.

Adapted from a story by Brian Bangart

Living in the present

Mary Pulizos (RN) was the primary caregiver for a young woman diagnosed with breast cancer. The woman’s prognosis was poor and she had five young children who would soon need a home without her. Mary spent endless amounts of time helping her to review her options, discussing the pros and cons of each. Mary gave emotional support, provided physical comfort, and helped to meet spiritual needs. This is not always easy to accomplish in our busy work environment. Mary stayed late if needed to support family members, to comfort the patient, or to collaborate and advocate with the physicians to ensure the patient’s needs were met. When the patient grieved over her inability to buy her children gifts to celebrate their birthdays, Mary surprised her with wrapped gifts for each of the children. Only a special, giving, generous person would have done this. Mary is a nurse anyone would want to care for their loved one—I know I would.

Adapted from a story by Malea Rodziczak
**Seeing is believing**

We have a homeless female patient who has very bad cellulitis in her legs. She had been in the hospital but for some reason did not complete therapy and the condition worsened. We tried to talk her into going back to the hospital, which she refused. She did agree to come to the clinic for daily dressing changes. **Isa Cabrera-Ruck** (Clinic Assistant-Translator) has been working with this patient and has really made a difference in how the patient feels. Isa has made this patient feel welcome and has tried to ensure her comfort during this often uncomfortable procedure. She has taken the time to talk to the patient and encourage her to be good to herself. Isa has procured meals and personal care items for the patient, and has encouraged all of us to look in our closets for shoes or clothing items we would be willing to donate. She has helped to empower and engage this patient in her own health care, so that she will continue to follow through with the needed treatments. The patient knows that she now has a friend she can come to for help with her medical care.

Today the patient came in with her clothes changed and hair combed. Through her kindness, care, and attention, Isa has touched this woman’s spirit. You would have to see it to believe it. I am honored to work with this caliber of health care professional and I never cease to be amazed by a person’s ability to influence another in such a positive manner.

*Adapted from a story by Jose Avila*

**Someone to talk with**

A patient approached my desk looking distressed and told me that he wanted to be seen for depression. By looking at the gentleman I felt that he needed to talk with someone as soon as possible, that sitting in the waiting room was not the right thing for him. All of the doctors were busy, so I called **Mike Hert** (Business Development Manager) and asked if he would come down and talk to a patient. No questions asked, Mike was downstairs almost as soon as we got off the phone. He took the patient to his office and talked with him until we were ready to see him in the walk-in clinic. It’s not Mike’s responsibility to handle this type of patient, but he did an exceptional job. When the patient left the clinic he stopped by my desk and asked me to thank Mike and the clinic staff for being so thoughtful. It’s this type of compassionate customer service that makes me happy to work here.

*Adapted from a story by Kimberly Meier*
Reggie Coleman (Collector-Patient Accounts) was on the telephone with a patient trying to walk her through our charity care application process. What Reggie didn’t know immediately was that this woman was contemplating suicide. It was apparent to Reggie that the woman had been drinking. When she told Reggie that she wasn’t going to live much longer, Reggie disregarded the real reason for his call and began talking about the woman’s life.

About an hour into the call, Reggie heard background noises that concerned him. He quickly got the attention of a colleague and wrote a note, explaining what was happening and asking the colleague to dial 911 and to call the woman’s brother. Soon both the police and brother arrived at the woman’s home. They found broken glass on the floor and discovered the woman had indeed attempted suicide.

Reggie received a call from the police who thanked him for his efforts. The woman also thanked him. Although she sustained injury, it was reported her health had improved. Reggie certainly reacted in a fashion that was compassionate and caring to help this person in distress.

Adapted from a story by Stephanie Herron-Robinson

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A nurse by any other name . . .

One patient on our unit was very challenging and often difficult to deal with. He needed continuous monitoring due to a head injury and a long history of alcohol abuse. This patient also had little family support and the only clothing he had was the soiled and tattered clothing he wore to the hospital. He was going to be discharged to a group home after being with us for a couple months. The day before his discharge to the group home, I saw him with a nice t-shirt, sweatpants, and sweatshirt. I commented on how nice he looked and then he showed me a bag of clothing, full of freshly washed and very “new” looking items. When I asked where the clothes came from he replied they were from “the nice waitress that takes care of me.” That “nice waitress” was Doris Lozano (RN) his nurse. Doris and Jeanne Acker (Patient Care Assistant) had brought in the clothes, so this patient would have something to wear when he was discharged, plus more clothes to wear in his new home.

Adapted from stories by Renee Solid Zager and Christine Monahan
Friendly Persuasion

We had a patient who was diagnosed with hepatitis. The patient’s anxiety level bordered on panic—to him, this diagnosis was terminal and he could not come to terms with it. The patient would stop at the office every day, call several times daily, and have numerous questions. Kathy Ramsay (Certified Medical Assistant) would always make time to see him, even if it meant giving up her personal time. She was patient and encouraging, giving him the reassurance that he was so desperately seeking. Often the patient would threaten to cancel his follow-up appointments or refuse to see a counselor. Kathy would redirect his negative feelings and show him why these appointments were necessary for his health. The patient has completed his appointments and now has a fully functional and happy life—all thanks to a CMA who would not let a patient say, “I don’t care.”

Adapted from a story by Jennifer Footit-Tank

In the company of angels

Since the Milwaukee Hospice opened, Kathleen Thicke (LPN), on her own time, has made a “memorial angel” for every patient that has come into the residence. These angels are displayed each year over the Christmas holiday, draped throughout the residence in blue, white, and pink, each color representing something different. They are precious to the families, many of whom come in each year to look for their loved one’s angel and to share a memory with the staff. The angels are also therapeutic for the staff as we see a name and share something special. For those of us who have not been working here as long as Kathy, it is wonderful to hear about residents who were here before our time.

Adapted from a story by Kimberly Gehrke

Friday Fish Fry

A patient was very upset because she could not get fish for supper on a Friday in Lent. She mentioned this to Tracy Allard (Secretary II), who then went to the cafeteria, bought a fish dinner, delivered it, and refused to take the patient’s money for it.

Adapted from a story by Kathy Gall
Father of the bride

One of Laura Regenauer's (Recreation Therapist) patients in the inpatient rehab program wanted to be able to walk his daughter down the aisle on her wedding day. Laura came in on her day off at 9:00 am and took her patient and his wife to the wedding. The patient and Laura agreed it would be best if he used the wheelchair to take his daughter down the aisle, and Laura was there to assist with transfers.

At the wedding, Laura became aware that the patient did not have his insulin with him. She drove back to the hospital and got insulin for the patient so he could stay for the dinner and reception. Laura stayed all day to help, and the entire outing took about 12 hours. What outstanding customer service.

Adapted from a story by Melissa Fry
**When all else fails . . .**

During a follow-up visit with a patient who had suffered a complicated illness, **Dr. Gian Daroach** explained to the patient the need for a CT scan. The patient said he could not have the scan because he did not have the money to pay for it. Even though the patient had limited financial resources, the local (non-Aurora) hospital would not provide the scan on a charity basis. Dr. Daroach felt that this CT scan was so important that he paid for it out of his own pocket! Talk about service and quality of care...

*Adapted from a story by Eliot Huxley, MD, and Bruce Deardorff*

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**Keeping her cool**

I was seeing one of **Doug Worth’s (Physical Therapist)** recurring patients on a day when Doug wasn’t here. This patient does not work due to a disability and is on a fixed income. Knowing this patient from previous visits, I knew that she lived in a two-story apartment without air conditioning. I asked her how she was tolerating the heat. She told me that Doug had purchased an air conditioner from a rummage sale and installed it in her apartment so she could better tolerate the heat. She was trying to pay him back in monthly installments, but Doug forgave her debt.

*Adapted from a story by Jill Johnston*

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**Random acts of kindness**

**Rayleen Schultz** (Clinical/Clerical Coordinator) continually goes out of her way to show kindness to fellow employees, such as bringing in gifts from her garden. Rayleen and her husband sometimes spend their time off picking up elderly patients for appointments at our clinic when no other alternatives exist for the patients. Often, when patients do not have family in town, **Rayleen and Kenny** will check on them as well. These are simply people she has met over the years as an employee with the clinic.

*Adapted from a story by JoAnn Schmitt*
"Spirit" of caring

A patient was not doing well, and the family feared that their loved one would not make it through the night. They had already spent most of the day and evening in the unit, and appeared worn out and badly in need of sleep. Charlene Williams (Nursing Assistant) spoke to this patient’s family members, assuring them that she would keep “an extra eye out” and would make frequent checks on their loved one. True to her word, Charlene did indeed take the time to go in and check on this patient frequently, repeatedly asking if there was anything she could do to make her more comfortable. At one point while I was in the room, the patient asked me where her “angel” was. I asked if she was referring to Charlene, and she said yes. The patient went on to say what an extraordinary young woman Charlene was and how she felt less frightened knowing Charlene was there to care for her that evening. This is only one of the many acts of kindness and compassion I have personally witnessed while working with Charlene.

Adapted from a story by (and included in memory of) Gail Cerrillo

Happy Mother’s Day

For Mother’s Day, Linda Barker (Respiratory Therapist) made a special gift for the mom of each baby in our unit. Every mom received an individualized coffee mug with her baby’s name and date of birth on it. The mug was filled with chocolate kisses and included the message, “My feet are small but my heart is big and full of love for you.” The gift package also included a pair of booties and matching hat. This exceptional service helped to brighten each mom’s first Mother’s Day with her special baby.

Adapted from a story by Renee Lapp
Bedside manner

*Dr. Kyle Mounts* transferred an infant to our hospital who was unstable with unknown cause. The infant’s condition remained unstable during the night and Dr. Mounts sat at the bedside for more than three hours to be available for the nurses and patient. During the next few days, he spent extra time with the infant’s parents, answering questions and providing support. On the day the infant was transferred to Children’s Hospital, he came in early and spent an extended period of time with the family to again answer questions and make them feel more comfortable with the care being provided for their infant. Dr. Mounts went beyond the expected standard; this is consistent with his approach to patient care.

Adapted from a story by Jacquelyn Hipke

The birthday gift

*Sandee Francis* (RN, Case Coordinator) planned a very special birthday for a 29-year-old terminally ill patient. She arranged for tickets and ambulance transportation to Miller Park, so this patient could enjoy a Brewer game with ten family members and friends.

*Adapted from a story by Nancy Bailey*

Lasting impressions

An elderly gentleman came to our site for a needed x-ray. He said that he had parking problems at another site in the past and ours was a more convenient location for him. As *Lisa Diaz* (Patient Account Specialist) was registering him, she noticed that we did not have a contract with his insurance company. The gentleman was confused and upset—he had recently lost his wife to cancer and, until her death, he did not have to handle this type of situation. Lisa called his insurance company, spoke to a representative, and obtained a list of locations at which the x-ray could be taken. She then called the closest facility and scheduled the gentleman’s appointment for him. Needless to say, he was very grateful. Lisa’s exceptional customer service gave a great impression of what Aurora is all about.

*Adapted from a story by Tanya Button*
Paying it forward

When Dr. Gavin Jacobson celebrated his daughter Lupe’s 5th birthday, each child that Lupe invited to her party brought a gift to be donated to children at the hospital. The gifts will be distributed through philanthropy services.

Adapted from a story by Leonard Wilk

Bridge over troubled waters

An infant in our unit was diagnosed with a very small brain and was bound to a ventilator. Luis Gonzalez (Medical Interpreter) was available to us throughout the entire stay of this baby. He helped the physicians discuss the diagnosis with the parents and, when the decision was made by the family to take the baby off the ventilator (to die), Luis stayed with the family and the nurses to help comfort them. He was readily available to us for a period of four days. Without being asked, he would call in to check on the family and find out if we needed help talking to them. On the day the baby was to be taken off the ventilator, Luis stayed with us for more than three hours, providing support to the family. Days after the baby died, Luis called back to follow up and see if the family had any other needs. His help was phenomenal.

Adapted from a story by Gabriela Frazer

Special delivery

One afternoon Dr. Daniel Miota left a meeting at the corporate offices. About 30 to 45 minutes later, I found him driving around the Aurora complex and asked what he was doing. He had found two non-English speaking individuals wandering the neighborhood looking to report to work. Dr. Miota took these people in his car and drove from site to site looking for the department where they worked. With the assistance of the security officers, it was finally discovered that the two individuals were to report to the AHC laundry department. Dr. Miota promptly delivered them to the right area.

Adapted from a story by Eliot Huxley, MD

A “great ambassador”

A Spanish-speaking gentleman, who did not read, speak, or write English, checked in to our clinic for a pre-placement physical. He needed many forms filled out, at several desks within the clinic. Isa Olvera left her busy desk to help this gentleman over a three-hour time period. I know that she had a lot of work to do in her area, but she never acted as if this was a bother. She is a great ambassador for our clinic, and she displays this philosophy with both patients and coworkers.

Adapted from a story by Jill M. Reseburg
LABOR OF LOVE

An OB patient came to our clinic in active labor and was transported to the hospital before her brother-in-law was able to arrive at the clinic to accompany her. Evelyn Quiles graciously accompanied the brother-in-law to the hospital and then went into the emergency department with the patient’s family to help interpret for the patient, who spoke no English. She stayed with the patient until the baby was born. The next day she made a gift bag for the new baby. We want to point out that Evelyn did all this during her own eighth month of pregnancy. She has set a perfect example of the service standards we are all trying to achieve.

Adapted from a story by Sylvia De La Garza and Veronica Espino

A long way from home

The stress testing schedule had been particularly busy, and the staff had been working long hours to cover the needs of physicians and patients. Julie Erickson (RN) was testing a patient from Ireland, who was here to be with family and ended up having symptoms that warranted a stress test. His results were abnormal, and the physician did not want him to leave the hospital. The patient was in a great deal of pain and very anxious about the catheterization being planned. Julie addressed not only medical needs, but also emotional needs of the patient and his wife, who was quite shaken with the news. Julie waited hours with both of them until an inpatient bed became available for the patient in the early evening. She escorted the patient and helped him settle into his room, answering his and his wife’s questions along the way. Once they were settled, she offered to drive the wife to her hotel and made sure she had the appropriate contact numbers. We’re proud of Julie and the extra service she provided to this patient and family.

Adapted from a story by Linda Marolt
Choreography in chaos

On occasion I have the good fortune of crossing paths with another professional who brings the highest levels of knowledge, skill, leadership, and human qualities to a complex problem. One weekend, while I was serving as on-call chaplain, I experienced such a person, Susan Nuccio (Clinical Nurse Specialist).

A young female patient was in a medical crisis after delivering a baby. Her case evolved into an extremely complicated series of issues related to religious beliefs, ethnic background, family dynamics, confidentiality protocols, and language barriers. Susan calmly and skillfully sorted out and addressed every facet of the case, working with the patient, family, friend, interpreter, chaplain, physicians, and nursing staff.

While I do not know the final outcome of Susan’s activities that day, the impression her professional interventions left upon me was one of the highest admiration. I would not be surprised that her calm, competent leadership in choreographing the activities of medical, nursing, interpreter, and chaplain professionals impacted positively on the crisis that this pregnancy brought to this family. Her skill contributed to a fundamental change for the health of the patient and the health of the family—physical, emotional, cultural, and spiritual. Her leadership cut across language, religious, cultural, and professional barriers. What I witnessed was nursing excellence that merits recognition.

Adapted from a story by James Wake
Connected

working together, sharing what we learn,

and coordinating our efforts
Have nurse will travel

A patient on my medical floor had an order to receive chemotherapy. When the patient was told she would be transferred to the oncology floor to receive the chemotherapy, she began to cry and pleaded that she not be transferred. I called the oncology floor and Patty Parker (RN) answered. She very graciously agreed to come to our floor, give the patient the chemotherapy and provide the necessary monitoring. Despite the fact that this would mean rearranging her own patient care schedule for that day, Patty simply stated, "This is what the patient needs, so this is what I will do."

The patient was beyond words when she met Patty and was told she could stay in her room to receive the chemotherapy. On subsequent admissions to our medical floor, Patty visited with the patient and even arranged to have an oncology nurse give the patient chemotherapy when it was needed on Patty’s off-shift.

Adapted from a story by Melissa Brickner

A matter of time

Word got out quickly when a business office employee had major surgery and did not have enough vacation and personal days to cover her absence until her long-term disability would kick in. Within four days, 82 employees donated 296 hours—seven weeks and two days—of their own vacation time to cover their coworker’s leave.

In a similar case, Cheryl Tersen (Laboratory Technician) took it upon herself to investigate the policy on donating vacation time, when a coworker was scheduled for surgery and had no accrued time to cover her absence. Cheryl talked to management and human resources and sought the approval and donations of the employees in her department, who responded immediately. Cheryl’s effort helped someone in need and gave the whole department a boost.

Adapted from stories by Bob Mueller and Karin McCormick

Hold the phone

Ted Jetty (Telecommunications Coordinator) took it upon himself to start a campaign to collect unused cellular telephones from the communities to be donated to the National Coalition Against Domestic Violence. The donated equipment is used by victims of domestic violence when ordinary telephone service would not provide the privacy and freedom that they require. The program was a huge success—more than 125 telephones were donated. Ted created drop-off points at the medical centers, where community members and employees brought in their unwanted cell phones. Ted then shipped the telephones to the National Coalition. This was a program initiated with the community in mind and no real relationship to Ted’s job responsibilities. Aurora received very positive press in local newspapers for this project as well as national recognition for our support of the coalition.

Adapted from a story by John Holman
Moving Mountains

Milwaukee received 13 inches of snowfall at the start of the second week of shuttling for hospital employees to remote lots. At the end of first shift, Marty Schutte (Maintenance Supervisor) received a phone call telling him that the shuttle site had been plowed in by county workers, thereby stranding employees parked in the lot. Knowing that the grounds/painting crew had gone home from their long day of snow removal at the hospital, Marty asked for volunteers from the Maintenance Shop (who were also leaving for the day) to help shovel out the stranded employees. John Kinney, Jim Scalf, Scott Buraczynski (Maintenance Technicians), and Jerry Luedtke (Electrical Projects), all stepped forward. Along with Marty, they proceeded to the shuttle site with shovels and a snowplow to free employees so they could leave to go home. Nowhere in their job descriptions does it say anything about snow removal during working hours, much less after hours.

Adapted from a story by Mike Connor

Overtime with an attitude

After a very busy second shift in the emergency department, Jessica Kennew and Mila Labender (Admissions Representatives) clocked out and left to go home. As they walked out to their cars, they saw three ambulances arriving at the ambulance bay simultaneously. Without hesitation, they ran back into the building and reported to the nursing station to help out with these incoming patients. Their coworkers are grateful for their dedication and spirit.

Adapted from a story by Dawn Christman

Extracurricular activity

Urgent care was extremely busy, and there was only one physician working until midnight. Dr. Michael Byrne was passing through the department and graciously started seeing patients. He helped out for two hours on his day off.

Adapted from a story by Kristen Sobocinski
The attacks on the World Trade Center touched my life very personally—my niece, Andrea, is one of the missing, presumed dead. During this very difficult time I received incredible support and true service from a number of individuals at Aurora Health Care, and I wish to share their stories.

The hours immediately following the attacks were some of the most difficult moments my family and I ever experienced. All we could think of was that Andy was there in New York all alone. Andy, 25, who worked for a futures firm in Chicago, was in New York on her first business trip. She had arrived on Monday, September 10, at 11 p.m. and had reported for work Tuesday morning on the 97th floor of the north tower. We feared that if she was lucky enough to have made it out, chances were no one around would know who she was. Everyone who knew her and loved her was here in Wisconsin, 1100 miles away.

A critical task we faced was to create and disseminate a picture and description of Andy to the New York area, in particular the hospitals. In an attempt to capitalize on the resources of Aurora Health Care, I paged Diane De La Santos (Vice President, Public Affairs & Marketing Communications) from Andy’s parents’ house in West Bend. Not knowing who I was, and taking great pains to make sense of what I was requesting of her—I can only imagine the lack of coherency in my communication—Diane was able to e-mail Andy’s father a list of e-mail addresses of New York area hospitals and medical associations. This allowed us to quickly put an electronic flyer together and get Andy’s picture to New York, which gave us a bit of reassurance that at least we were doing something.

Because Andy’s parents live in West Bend and because the family needed to be together, we all piled into cars and literally camped out with them. This posed an unusual problem for me and my mom. We have two big dogs that required food, attention, and the ability to go outside and run around during the day. Our neighbors are elderly and neither of us felt comfortable asking them to take this on. I happened to call work to give them an update. It was during this conversation when Maggie Baudry (Human Resources Generalist) and Barbara Molthen (Director, ADCP Human Resources) both jumped in and volunteered to come and let the dogs out. Barb and Maggie performed this service on more than one occasion and at times even more than once a day.

In my unplanned absence, which grew to be rather lengthy, Maggie sought to keep the department running smoothly. She did her job and most of mine. Barb, as both a boss and a true friend, was a pillar of strength for me. She allowed me freedom to come and go at work, never knowing if I would be there the next day or not. She sheltered me from many of the day-to-day problems that would normally have ended up on my work plate. She experienced first hand my sometimes extreme mood swings. And she was there for me whether it was 7:30 in the morning or 10:00 at night.

The stress of the events affected all of us differently. While some of us needed to be near a television set in the hopes of catching a glimpse of Andy fleeing from ground zero, my sister and her husband, Andy’s parents, could not stand to have the television on. In those first few days after the attack we all became increasingly concerned for their emotional well being.
Their grief was indescribable. It was well into Tuesday evening before my sister was able to accept the fact that the north tower had collapsed. Our family had never experienced such feelings of helplessness. Although my sister was committed to getting to New York as soon as possible, I did not believe she was strong enough to witness the destruction and pain first hand.

Late Wednesday evening it dawned on me that I worked in behavioral health and that I had an inside track to some of the best in the field. With Barb’s help, I was able to schedule a phone session between Dr. Anthony Meyer and Andy’s parents for the following morning. Dr. Meyer willingly cleared his schedule at literally a moment’s notice. He took time to talk with me from his home at 10:30 Wednesday evening and to offer professional guidance to two individuals very much in need, imparting on them a small amount of courage and resolve for their difficult journey.

Julie Okoro (Director, VNA Human Resources) stopped in my office unexpectedly one afternoon shortly after the attack with an entire meal prepared for me and my family. She simply stated she had been thinking about us and knew that in difficult times even the simplest of tasks can seem overwhelming.

Each of these individuals gave of themselves, immediately and fully, as if they had nothing else demanding their time. This is a very difficult time for us, and there has been much good that has emerged, too. I know fully that I could not work with a finer group of people.

Adapted from a story by Terry Heun

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September 11, 2001

Sherry Sackrison (Manager, Medical Staff Services), Pat Naeser (Manager, Intake Services), Kate Connelly (Site Manager-ABHS) and Ardyce Peters (Site Manager-ABHS) were all instrumental in organizing staff and efforts in order to have the Aurora Helpline active within six hours of the September 11 tragedy. They were able to facilitate an organized approach for handling crisis calls both during and after work hours. Within 15 minutes of the line being made public through the media, calls began coming in at the rate of 15 per hour for the first ten hours. Without the quick involvement of people like Sherry, Pat, Kate, and Ardyce, we would not have been able to organize this extremely valuable community service.

Adapted from stories by Pete Carlson
Doctor in the house

Shortly after a patient arrived on our unit, we found that her unborn baby was in trouble and an emergency Cesarean section would be needed. Her physician was en route and, knowing of all the construction on the freeway at the time, we were concerned as to whether he would make it in time. We felt that the baby needed immediate attention, so we paged Dr. Timothy Zelko and told him we needed his help. He responded immediately and within six minutes delivered a severely compromised infant by Cesarean section.

It is an enormous comfort to us nurses working with someone like Dr. Zelko. He came to help without question, even though this was not his patient. The family called our unit specifically to express their gratitude to him. The baby is now on room air and taking a bottle. We are all grateful for people like Dr. Zelko who are not afraid to step in.

Adapted from stories by Sandra Kreier and Cathy Kotrba

A helping hand

My deceased sister was an employee of Family Health Plan (FHP). We were in the process of settling her affairs when Aurora acquired FHP. After six months of paperwork floating around somewhere in space, it was returned to me open and marked undeliverable. I called the carrier who held her 401K and was told I must go to the new employer who acquired FHP. I forwarded the documents returned to me to Aurora human resources with a note, “please help,” and received a call the next day from Chris Brown (Supervisor, Employee Benefits). She not only explained the situation to me, she personally called the carrier and arranged to forward my paperwork to them and facilitated resolution so I did not have to do a thing. It is my understanding that Aurora did not take on any responsibility for this part of the FHP affairs and the carriers were to process these claims. After nearly nine months of my running in circles trying to figure out where to go with this paperwork, Chris handled it and gave me a contact at the carrier who was now familiar with my case in the event I had any more concerns.

What I did not tell Chris was the story behind this claim. My sister was 44 years old and a single mother who died in a tragic accident and left behind two sons, not quite adults at the time. I have taken on the task of sorting out their affairs and have taken them into my home with my own children and stepchild. It was so nice to have someone help with the leg work, no matter what it was.

Adapted from a story by Pat Matusiak
An officer and a gentleman

I was on an assignment in the emergency department when I was approached by resident Dr. John Fingert. Dr. Fingert wanted to express his appreciation for the action and performance of Michael Hayes (Security Sergeant) with a combative, aggressive patient. The patient was extremely belligerent and refused to cooperate with the staff. Officer Hayes tried to reason with the patient, explaining to him what was happening, why it was happening, and that he needed to calm down. He continued to reassure the patient, even while the patient continued to yell and scream profanities. During the course of the patient’s stay, the patient actually relaxed and listened to Officer Hayes, allowing the treatment process to take place. He even explained why he had tried to commit suicide. (The staff could not get any response from the patient, other than yelling and screaming.) The amazing end result to this story is that when the patient was medically cleared for transport to the mental health center, he gave Officer Hayes a hug and repeatedly thanked him and the staff for the caring and kindness shown to him. Before he left the emergency department, I heard him state, “I guess I need to talk to someone out at Mental Health. Mike helped me realize that now.” Dr. Fingert and I both are extremely proud of the way Officer Hayes conducted himself and believe he was instrumental in the treatment of this patient.

“I guess I need to talk to someone out at Mental Health. Mike helped me realize that now.”

There’s no place like home

We had expected to be in our new home by the day we closed the sale of our old home, but at the last minute there were unexpected delays in getting occupancy. There we were with three children under age five, grandparents in town to help us move, and no place to go. I called Human Resources to see if there was an apartment we could rent and they transferred me to Doreen Wheaton (Property Management Coordinator). I told her our situation and she immediately went to work. She called me back to say that a three-bedroom, fully furnished and equipped apartment would be available the following Wednesday. She had made other arrangements for the medical students who were already lined up for this apartment. She had to reschedule furniture moving, carpet cleaning, and housekeeping services, but got it all done so that we would have a place to stay for a few weeks until our house was ready. Knowing how young our children are, she even equipped the kitchen with plastic bowls and cups. We are so grateful to Doreen—I don’t know where I would have found a place to live for only three weeks!

Adapted from a story by Lisa Pauley
Substitute teacher

When a CPR Instructor had to cancel a five-hour recognition class at the last minute due to an emergency, Karen Van Beek (Clinical Nurse Specialist) rearranged her schedule and certified the five participants who had already arrived for the class. The participants were very appreciative as they had already rearranged work and child care schedules to be at the class. Karen’s service created a positive outcome for a difficult situation.

Adapted from a story by Sandy Spangenberg

One step at a time

Several barriers prevented the health care team from moving ahead on a safe discharge plan for an 80 year-old patient. One such barrier was the steps outside the patient’s home, which, as they were constructed, would be difficult for the patient to use. A plan of action evolved through the collaborative efforts of clinical and facilities staff. After the facilities staff went to the patient’s home and assessed the situation, Jerry Burg and Bill Wendler (Maintenance Technicians) built an additional step so that the patient could easily enter and leave his home with a decreased risk of falling. The facilities staff topped off this special service by painting not only the step they built, but all the steps going into the house. The family was extremely satisfied with the assistance and courtesy offered by our facilities staff, who went beyond the walls of the hospital to ensure patient satisfaction.

Adapted from a story by Theresa Lange and Mary Kannenberg and Bobbie Westphal

A little “pampering” goes a long way

Roseann Reisweber, RN, collected “points” from the diaper packages used for the babies in our unit and sent away for the premiums offered by the diaper company, in order to help some needy families at Christmas time. Each year our unit chooses families from our patient population who are in need of certain items or who can’t afford to purchase gifts for their children. We have been able to give these families items such as quality education toys, “paid for” by our use of the diapers. Roseann continues to collect the points in hopes of ordering more items to be used in our family waiting area.
When one of our physicians was ill and unable to see her afternoon patients, Dr. Scott Johnson pitched right in and ended up seeing 45 patients that day. He never complained and he kept the staff upbeat and cheerful. As if that day weren’t crazy enough, the following day another physician was held up at the hospital with a sick baby. This would mean rescheduling all the patients who were to see her that morning. Dr. Johnson graciously told us that he would be happy to see any of her patients that didn’t mind seeing him, even her physicals! He ended up seeing 18 patients that morning. He has definitely been a positive addition to our pediatric team.

Adapted from a story by Heather Albright, Stacey Breister, Sarah Stinemates

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Quick change artists

I came out to my car after a meeting to find that I had a flat tire (I had rolled over a wood chip from a nearby pile and it punctured the tire). Terry Schmidt and Dan Murawski (Maintenance Technicians) were outside working on the landscaping and trees. As soon as they saw me looking at my tire, they immediately came over and changed the tire in 10 minutes. This helped me tremendously—considering that I’m not familiar with changing tires, it probably would have taken me at least an hour.

Adapted from a story by Jill M. Pilipuf

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Shining through

A therapist from our clinic became very ill and was off work for a long period of time. She was unable to clean her home and talked about hiring a cleaning service. When Cindi Hewitt (Administrative Assistant) and Kellie Kruszka (Secretary II) heard about this, they immediately called their coworker and made arrangements to go to her house after work and clean. This kind of action just comes naturally for these two people.

Adapted from a story by Linda Kruszka
King's justice

Chaplain Patrick Ann Clay-Joyner took the initiative to revive and re-invigorate the Dr. Martin Luther King Jr. Day committee at our hospital. Her work involved bringing together the departments of telecommunications, housekeeping, volunteer services, dietary, business and marketing, media relations, and pastoral care to plan and carry out a significant program that presented in word, music, and song the ideals of justice for which Dr. King stood.

Patrick skillfully involved diverse internal and external partners to help the medical center come together to celebrate this holiday that is especially important for a culturally diverse institution. Her efforts helped the medical center and community join in a remembrance and commitment to working at justice in our community.

Adapted from a story by Rev. Edwin R. Foster

Divine intervention

At the beginning of my shift, one of my patients, who was terminally ill with cancer, took a turn for the worse. When the family arrived to stay with the patient, Chaplain Dennis Duggan (Chaplain Resident) was at the bedside in a flash, reassuring the family and me that he would be here throughout the night. This eased my mind, as I was caring for 11 very ill patients. Dennis was a wonderful calming factor, praying with the family and interjecting at exactly the right moments. Without his help, I believe the dying and coping process for the patient and family would not have gone as smoothly as it did. The family and I were extremely grateful for the emotional support. I know my patient’s family left the hospital having had a good experience in a situation that was so grave. We as an institution couldn’t ask for anything more.

Adapted from a story by Pam Garski

"Peace and comfort"

Margie Ross, RN, arrived at our home within one hour after our call to Hospice to care for my mother. From the time she arrived, she focused on meeting the needs of my mother and family. Although it was Sunday, Margie arranged to have a hospital bed brought from Milwaukee to help make my mother comfortable. She even arranged to obtain pain medication from the hospital because all of the pharmacies were closed. Any obstacles confronted did not stop Margie from meeting my mother’s needs. She was compassionate in all that she did for us—the ordinary for her became the extraordinary for us. My mother died in peace and comfort in large part because of the service provided by Margie and the VNA.

Adapted from a story by a grateful family member
Diamonds are forever?

When I lost the diamond from my wedding ring set, the staff members in my department had their heads down all day looking for my little diamond. Unfortunately, the diamond was never found, but I was very touched by employees Susie Rubner and Michelle Szulczewski, (Environmental Assistants) who picked through trash containers and changed vacuum cleaner bags every day for several days in hopes they would find it. They were more upset by the loss than I was.

Adapted from a story by Mary Tobolski

The right care at the right time

Laura Latus (Occupational Therapist) went far beyond the normal realm of a home assessment for physical therapy, when she determined a patient was not appropriate for regular home care. She initiated a call to the patient’s physician, and through her assessment of the patient’s condition, as well as the patient’s and family’s needs, it was determined the patient should be in hospice care. Laura gathered all the necessary information and made the contacts for the patient’s family. The patient was transferred to the hospice residence the following day. His family was able to spend his remaining days at his bedside as family and not caretakers. He died a peaceful death a few days after admission to the hospice.

Adapted from a story by Kimberly Gehrke

FOR SAFETY'S SAKE

Nancy Simenz (Manager, Volunteer Services) and Harold Peterson (Volunteer) have been trained to provide car seat checks to families in our area. A young mother-to-be came in on her due date with a car seat she had bought at a garage sale. The seat was old and did not pass inspection. The mother-to-be began to sob, and our employees were concerned that she was too upset to drive carefully. After Nancy and Harold explained what she needed to provide adequate protection for her newborn, they drove her home. Later that week, Nancy and Harold drove a distance to a customer's home on Friday afternoon of a holiday weekend, in order to perform car seat checks on two vehicles for another young mother.

Adapted from a story by Gloria Peterson
Striving
to set the highest standards
and to find a better way
Say it with flowers

Our staff began noticing beautiful floral arrangements “popping up” in our patient waiting areas. It seemed as if they appeared overnight, without explanation. What was even more puzzling was that these are large silk arrangements, and they were placed in areas that are locked on the off-shifts. It turned out that these gorgeous arrangements were a hand-made, heart-felt gift from one of our employees, Jessica Foster (DVI Technician). I would like to share my sincere gratitude and resounding pride in the resourcefulness and thoughtfulness of our own secret angel.

Adapted from a story by Jean Schultz

Endurance training

Roger Schneider (Employee Assistance Program Account Executive) is constantly exceeding the expectations of both internal and external customers. During a recent three-day span, Roger worked his normal day, then provided onsite training to one of our customers from 10:30 p.m. to 12:30 a.m. The next day, he worked another complete shift, followed by emergency onsite work in Rockford, Illinois, at another client’s location, where he provided critical incident counseling services to employees well into the late evening hours. He then provided a half day of training the next morning for yet another client. Roger is a great guy, a wonderful mentor, and a true asset to our clients and their families.

Adapted from a story by Max Radcliffe

She’s got your number

One day my secretary, Karen Radtke, began receiving frequent phone calls from an inpatient who was trying to reach her husband. Karen asked the lady the number she was trying to reach so that she could contact the husband and have him call his wife. The number the lady gave her was incorrect. Karen took the time to find the correct number and call the husband. The husband was elderly and stated that he was tired and did not want to get up to get a pencil and take down the correct number. Karen then found out what room the patient was in and went up to the room and helped the patient dial her husband at home. The patient was very thankful—however, a short time later the calls to Karen’s extension from the patient began again. Karen creatively designed a large print sign for the patient with specific instructions on how to dial the phone to call her husband. She took this to the patient’s room and showed her how to use it, meeting everyone’s needs in the process.

Adapted from a story by Helen Mathews
The makeover

Jim Trowbridge (Residence Manager), Zona Tomasek (Maintenance Technician) and Kim Gehrke (Residence Coordinator) transformed the hospice residence by taking personal ownership of how the residence met the needs of families. They moved furniture, rearranged rooms, painted, hung pictures, stenciled, added a volunteer reception desk, moved staff functions upstairs, and hid computers. All of this was done with existing space, walls, and furniture, to create a welcoming, peaceful, comfortable setting for families and patients receiving hospice care. This is a wonderful example of taking personal responsibility to “find a better way.” We are proud to be your colleagues.

Adapted from a story by Sue Ela, Bob Walters, Mary Runge

Taking their act on the road

Sue Miller (RN) thought out of the box to support the Aurora vision of providing quality care to all patients. When one Aurora hospital was experiencing a period of low census, Sue suggested that some of the nurses could float to another Aurora hospital within the region, which was short staffed. She said it didn’t make sense for one facility to be overstaffed during a low census period when other facilities are in need of help. With full support of Nursing Management and Human Resources, Amy Brushwood (RN) investigated the existing needs and set up contacts for the nurse manager and staff. Both Amy and Sue talked to the other nurses and spearheaded this effort. (RNs) Julie Hess, Jackie Yech, Beth Wettstein, Dona Miotke, Bev Melius, Amy Wagner, Kristy Hager, and Angie Wartgow jumped right in to support their peers.

Adapted from stories by Laura John

Just do it

After a particularly busy weekend, Josephine Perkins (Environmental Assistant) came in to work and found our department in complete disarray. Many of the towel dispensers were empty, the IV room floor was sticky, garbage was overflowing. Josephine assessed the mess, gathered her supplies, and went to work. She did not complain or make excuses. Rather, she spent a few hours making sure everything was shipshape. This is typical of the type of service we receive on a daily basis from Josephine.

Adapted from a story by Chris Lodi
"Unfurnished" business

One of my former clients had been evicted from her home and couldn’t take any of her belongings. She finally managed to obtain an apartment several months later; however, she had nothing. Carmen Cunningham and Jay Swope (Case Managers) heard me talking about the situation and brought in dishes, utensils, clothing, bedding, and towels. I donated some of my furniture and asked if anyone could help me transport it to her. John Plageman (Case Manager) volunteered. The truck that I had arranged for transporting the furniture broke down at the last minute, and John then borrowed a truck from a friend. They even drove to Germantown, where I had found a bed, and hauled it back to my former client’s home. All of this was done beyond the realm of their jobs. This is true community service.

Adapted from a story by Alice Fuller
This is written as the parent of a handicapped child, as well as a fellow employee of Anne Thornton (Manager-Surgical Services). Our son, Michael, is 22 and had brain damage at birth. He hears but cannot speak, but was able to graduate high school with a regular diploma before we moved here from Massachusetts. Anne happened to meet Mike socially one evening several months ago. We mentioned that Mike would be looking for his first permanent job. Anne said she might have something he’d be qualified for and to have him stop in and volunteer for a couple of days while she taught him a few things to see what he could handle. The first day wasn’t quite a disaster, but close. Anne persevered and after another couple of days stated that she found a number of things Mike could do in the OR. She had him apply for employment and work with a job coach from the Division of Vocational Rehab to make sure he had the skills to perform the necessary tasks. He is now working two hours a day and working toward a half-day schedule. Anne has continually worked with Mike and has encouraged her staff to do the same. He truly believes he has the best job and best boss in Aurora, and, while he is stocking supply carts, he says that he’s “helping to save people’s lives.” Anne has put that wonderful thought into his mind and has given him an opportunity he never thought he’d have. Her dedication to working hard at finding a way for a handicapped young man to work in the OR was exceptional. With her love and concern, she has opened up a whole new world for Mike and, in the process, has demonstrated to others the true value of diversity in the workplace. She is an outstanding Aurora representative to the handicapped community, related state agencies, and, most of all, to the parents of a 22-year-old who has never been happier.

Adapted from a story by Bill Laffey

Timing is everything

An elderly Hmong lady had gotten off the bus and come into our building looking for her eye doctor. Laura Dennis (Customer Service Representative) tried calling the various eye doctors but it was lunch time and she could not reach the office staff directly. The lady finally found a piece of paper in her purse that told us her doctor’s name and her appointment time. Laura made sure the lady got to the right office in time for her appointment.

Adapted from a story by Jean Cox
Many ARC patients cannot afford medical care. Patients with financial constraints are offered charity care and asked to provide certain financial information to help determine their eligibility. The processing of charity care applications happens in the collection department. While we work hard to make the application easy to understand, patients still struggle. When patients call Customer Service with questions, our customer service representatives, who are not experts in charity care, also struggle to know how to correctly help or guide the patients.

Kelly Seebacher and Kellie Bartel (Business Office Representatives) are the two individuals responsible for processing hospital patient charity applications. These two clerks took it upon themselves to put together a presentation that they delivered to the hospital customer service staff. Without training or public speaking experience, they developed a program to help educate and better prepare their fellow employees. In turn, we know that this will help our patients.

Adapted from a story by Gail Buenger

The Milwaukee County Zoo had extended an invitation to AHC to offer zoo discounts to all AHC employees for the summer. In order to receive the discounts, employees were instructed to identify themselves using their photo ID badges. Unfortunately, the Aurora Pharmacies had not yet transitioned to the new photo IDs and employees were contacting the pharmacy leadership asking how they could benefit from this offering as well.

Mary Sue Senner (Administrative Assistant) offered to contact the zoo and explain the situation and its potential adverse impact on more than 700 employees. Mary Sue gained the zoo leadership’s approval for developing an alternative identification card for these employees. She used existing volunteer/visitor card stock and prepared labels with employee names, attached them to the cards, sorted them by pharmacy site (more than 80 locations), and forwarded them to me for distribution across all sites.

Mary Sue’s quick response avoided a significant employee relations issue and provided strong service recovery that was well received by employees and pharmacy leadership. Her approach was cost efficient and innovative. She has provided a valuable service to our employees and the zoo in making this solution easy for them to implement.

Adapted from a story by Mark Bruk

Many AHC patients cannot afford medical care. Patients with financial constraints are offered charity care and asked to provide certain financial information to help determine their eligibility. The processing of charity care applications happens in the collection department. While we work hard to make the application easy to understand, patients still struggle. When patients call Customer Service with questions, our customer service representatives, who are not experts in charity care, also struggle to know how to correctly help or guide the patients.
Together, Judy Beckwith (RN) and Patti Starrett (RN) put together and present the STABLE Program, which teaches nurses the basic principles of stabilizing and caring for newborn infants beyond the well baby scenarios. This project, which has received excellent feedback, is meeting the need in Women's Health to raise the comfort level of nurses to care for infants at risk, and is increasing the quality of patient care.

Adapted from a story by Theresa Lange

As client billing services relocated from one Aurora site to another, Mike Disch's (Data Network Engineering Lead) job was to help the service technician set up and install the new server for the billing department. The service technician could not complete his part in the setup because of other commitments. Without a word of complaint or a request for help, Mike went ahead and completed the setup and installation of the server along with the testing of all users and software. He made sure the job was completed on time and that the new server worked properly. He then spent additional time correcting problems that had never been fixed on the old server. The billing department said this was the best move they had ever had—the complete staff was working within 24 hours. Without Mike's work this would not have been possible.

Adapted from a story by Elijah O'Neal
Marshall Forbes (Chief Pharmacist) turned what could have been a very negative situation into a positive example of outstanding customer service. I had called my physician’s office to request a prescription refill and then left for the next four days to work at a facility in another region. Upon returning to my own facility one week later, I went to the pharmacy to find out my refill had never been called in. Marshall took my number and told me he would call me as soon as he received the call, but the call never came. The next day I spoke to my physician’s office twice and was assured both times that the refill would be called in by the end of the work day. But when I went to the pharmacy, I found out once again that the call had not come. Marshall and the pharmacy technician both stopped what they were doing and Marshall called my physician. He was told that my doctor was with a patient, but would return the call shortly. The call never came, and when Marshall tried to call back again, he found the office was closed for the day. He had already gone out of his way to help me, but the next morning I found a message on my voice mail letting me know that the prescription was waiting for me.

Adapted from a story by Maureen Flynn

Where there’s a will there’s a way

Katherine Krueger (LPN) is consistently service-oriented while performing her duties, displaying a caring, compassionate nature to everyone she meets. What is exceptional is the hard work she put into setting up a medication assistance program for our clients who have difficulty paying for their medications. Katherine (Karlene) volunteered many extra hours setting up the program, which entailed calling other clinics, contacting drug companies, and developing tracking forms. All this was done on her own time because of her special interest in helping this needy population. This was a huge undertaking, and one that could not have been accomplished without her dedication, hard work, and compassion.

Adapted from a story by Cheryl Wolff
And the survey says...

In the process of planning for the 2002 strategic plan, it was determined that input from leaders across the system would enrich our collective knowledge and insight. In order to quickly and efficiently collect feedback from nearly 1200 people across eastern Wisconsin, Michael Jahnz (Web Software Developer) created two comprehensive and user-friendly intranet surveys in less than a week’s time. These surveys were each implemented for a one-week period throughout the system. As a result, hundreds of people, who would otherwise have been excluded from strategic planning, were able to help shape the future direction and priorities of the organization.

Within a few days, Michael had compiled and formatted all of the survey results so that the planning teams could easily discern key themes and incorporate the feedback into their final recommendations to senior leadership. He was exceptionally gracious throughout an intense time period and he accommodated some unanticipated and impossible deadlines. Most remarkably, he exceeded all of our expectations by taking the initiative in formatting data and creating graphs for easy interpretation. He provided the kind of service that made a meaningful difference in leadership engagement, strategic planning and, ultimately, the future of Aurora Health Care.

All in the family

Most parents of premature babies want to bring young siblings to meet and visit their new brother or sister in the NICU. Suzie Wong (RN) recognized that it’s often a challenge for parents to enjoy quality time with the baby while the younger children have nothing to do at the bedside. To meet this challenge, Suzie designed, organized, and put into service a “library cart” for parents and siblings to use while visiting. She personalized the cart to include storybooks, coloring books, crayons, and toys for young children, as well as notebooks, magazines, and reference materials for adults.

The cart adds a “touch of home” enabling younger siblings to play quietly by the bedside while their parents enjoy special moments focusing on their new baby. Families can now visit as a whole and are rewarded with memorable time spent together in the unit. Suzie has provided an important customer service for the NICU families and staff. She has optimized the ASMC Women’s Health philosophy of family centered care and has epitomized Aurora Health Care’s commitment to customer service.

Adapted from a story by Sharon Dziengel

Adapted from a story by Sue Buettner
Down to the last detail

My brother was a stroke victim and was living alone in Chicago at the time that he suffered the stroke. Once his condition was stable, the family was anxious to have him transferred to Milwaukee to receive his rehab care. I contacted Patti Nault, the intake coordinator, and she went right to work. By the time my brother was ready for discharge to rehab, Patti had made all of the necessary arrangements and obtained the insurance approvals. This alone would be worthy of recognition because of her quick work at getting my brother to the area where he could receive family support as well as excellent care—but the story doesn’t stop here.

Because of working with two separate insurance companies and having to deal with issues related to interstate transport, there were complications. There was even confusion over whether the original authorization was valid and whether the charges incurred would be covered (needless to say, these charges were substantial). Patti again took the initiative to work out all the issues, provide the family with regular updates, and obtain the documentation necessary to ensure payment of covered expenses. This allowed us to concentrate on supporting my brother in his efforts to rehabilitate. Patti went beyond the family’s expectations, arranging the initial transfer in an extremely efficient and timely manner, while also staying on top of all the “after-the-fact” insurance issues with great appreciation for my family’s priorities.

Adapted from a story by Mike Cummings

Going with the (over)flow

During second shift, Security Officer Nicholas Robel encountered a major problem at one of our extended care facilities. One of the main bathrooms had a defective pipe that allowed water to overflow and fill the floor area and the carpeted main hall. Officer Robel immediately recognized and solved the overflow/leak problem. In addition, realizing the potential for accidents and injuries that residents and visitors would encounter, he cordoned off the area with “wet floor” signs and then extracted all the water, thereby eliminating the hazard. Officer Robel’s actions saved the facility from extreme water property damage. He left a detailed message for the maintenance manager about what had happened and what steps would need to be taken the next morning. What is truly remarkable is that Nick accomplished all of this and returned to normal assigned duties within about 20 minutes.

Adapted from a story by John Dobrzynski
Financial finesse

In her role, Karen DeRath (Financial Counselor) is involved in many of the more complex patient financial situations. One such case was that of a patient who had no insurance, was over-qualified for GAMP or Medicaid benefits, and did not qualify for BadgerCare. As a result of his medical condition, this patient had lost his job just over a month prior to coming to Aurora for treatment. His unemployment made it impossible for the patient to make his COBRA insurance premium payments.

Karen proposed that Aurora make the COBRA premium payments for 90 days to cover the services we were providing. After reviewing the issues from every possible angle, including legal, we executed a Promissory Note repayment agreement with the patient and cut the check directly to his insurance company for the COBRA premium. In turn, we were able to submit all medical claims for the patient – over $85,000 in charges – which were recently paid at contract rates.

Karen showed her concern for the patient and his peace of mind, as well as her concern for our organization's financial well being. She operates in this fashion every day, and our organization is better for her contributions.

Adapted from a story by Gail Buenger

Payment plan

A patient called the cashier’s office and talked to Mary Ann Plevak (Business Office Representative). The patient was very hard to understand due to speech problems, and she was very upset. She had sent $200 to the business office and now had just received another bill that did not show her previous payment. She tried to communicate with the business office by phone and they had a hard time understanding her. She remembered talking with Mary Ann on an earlier occasion and asked for Mary Ann’s help with this problem. Mary Ann not only resolved the issue of the $200 payment, but made additional arrangements for the patient as well. The patient now sends all her payments directly to Mary Ann, and knows that she is welcome to call Mary Ann directly with any questions or problems. This is just one example of the patients Mary Ann has helped on a personal level.

Adapted from a story by Margaret Scopp
A keen eye for business

Tammy Janes (Pharmacist) noticed that the price field for select intravenous solutions was blank on the order review screen. She took the initiative to follow up with her supervisor to determine why this was occurring. It turned out to be a problem in the formulary that caused certain products to be identified as no-charge items. Because of her action, we were able to quickly correct a situation which, left unchecked, would have caused massive underbilling of certain products and consequently loss of revenue. Tammy’s quick action and follow-through saved Aurora Health Care thousands of dollars.

Lost and found

Kathie Foti (Administrative Assistant) was reading the newspaper on a Sunday and came across a special section in the Milwaukee Journal Sentinel listing unclaimed property. While reviewing the list, she noticed several Aurora Health Care hospitals named. Kathie took the initiative to bring this information to the attention of her administrator. She then called me to inquire about follow-up with the State Treasurer on behalf of the Aurora entities. This process has the potential to financially benefit Aurora Health Care. Kathie is to be commended for her outstanding service and her commitment to keeping Aurora’s best interest in mind at all times.

Adapted from a story by David Eager
Acknowledgement

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