



Health Central Hospital

2014 Patient and Family Advisory Council Annual Report

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2014 Patient and Family Advisory Council Annual Report

Hospital Name: Health Central Hospital

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Year PFAC Established: 2013

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Summary

At Health Central Hospital, we believe that healthcare is about more than simply treating symptoms. To the entire Health Central Hospital Team, it is about building trusted relationships with patients in order to not only get momentarily healthy, but to keep patients healthy over the long term.

Placing the “Patient First” is not just a catch phrase. It is part of the culture being generated daily by the entire dedicated team of health care professionals, administrators, support personnel and the active members of our Patient and Family Advocate Council (PFAC).

2014 was highlighted by the Joint Commission’s triennial survey visit. Along with numerous laudatory comments throughout the facility, the Commission noted Health Central’s PFAC as a notable “Best Practice”. The inspection team reviewed the PFAC newsletters, organization, and their involvement in the health care process. The Joint Commission Team was extremely impressed and commented, “The Health Central Hospital Team has a strong and connected PFAC. A valuable asset to the quality of care provided to the hospital’s service community.”

Further, The American Hospital Association requested the Health Central team provide presentations on the “PFAC Process.” During their national annual conferences, the Florida Hospital Association and the VHA Southeast also recognized Health Central Hospital PFAC as one of the best practices in Central Florida.

The Health Central Hospital’s PFAC brings a positive added dimension to the hospital’s efforts toward improving the patient experience. Strengthening and further opening lines of communication between the patient, family members, health care professionals, hospital team members and the community. Daily we continue to place the “Patient First” in our journey to provide the highest of quality care to our service area.

Purpose

The Patient Family Advisory Council serves as an advisory resource to the leadership and team members of Health Central Hospital. This is an opportunity for patients and family members collaborate as partners with team members, physicians and leadership in the development of patient centered care initiatives and process improvements. Additionally, the council provides an opportunity for Health Central Hospital to listen to crucial feedback from the patient's perspective and community members.

The Patient Family Advisory Council provides for a safe venue for the patient and families to provide input into procedure and program development by providing an opportunity to review recommendations referred to the council by team members, physicians or leadership.

Structure

The Patient and Family Advisory Council at Health Central Hospital consist of 16 members.

- Eight Patient/Family Members
- President of Health Central Hospital
- Chief Operating Officer
- Board Quality Member
- Chief Quality Officer
- Hospitalist
- Chief Nursing Officer
- Patient Advocate Facilitator
- Health Central Hospital Team Member
- Recording Secretary

Additionally, certain other members may be invited to meetings depending on agenda items. This might include Clinical Directors, Doctors, Staff, Nurses, Department Heads, Team Leaders and/or Team Members.

Patient and Family Members are selected for membership to the council by recommendation of the Patient Advocate and Health Central Hospital Administration following an application and interview process and must be representative of the community at large.

Patient and Family Members must have also utilized services at Health Central Hospital within the last two years upon beginning the member's term on the council.

PFAC Goals

The goals and objectives of the Health Central Hospital Patient and Family Advisory Council are:

- To promote an effective mechanism for receiving and responding to patient and family input
- Supply a link between the hospital, and surrounding community and community groups
- To promote respectful, effective partnerships between patients, families and healthcare professionals
- To increase efficiencies in planning and programs to ensure that services meet patient and family needs and priorities
- Offer a forum for developing creative, cost-effective solutions to problems and challenges faced by the hospital
- To improve patient and family satisfaction with the health care experience

PFAC Participation

Number of Meetings	7
Meeting Hours	27.57
Patient Experience Visits Number of Patients Seen	4,404

In order to represent the patient's perspective and collaborate with team members on patient first initiatives, PFAC members are currently active in the following projects and committees:

- Falls Reduction Taskforce member: George Gruler
- Emergency Department Quality Initiative: Alan Face
- Central Florida Internal Medicine Hospitalist Satisfaction Program: George Gruler & Edward Grant
- PFAC Community Chair: Edward Beery

Orientation and Education

Orientation

All Patient and Family Advisory Council Members take part in an initial orientation provided by the Health Central Hospital Patient Advocate Facilitator or other Health Central Hospital Team Member appointed by the Health Central Hospital Administration. Along with an extensive facilities tour (appendix 2), each council member receives introductions of hospital administration, department heads, key team personnel, and other council members. In addition, council members are oriented in the organization's vision, goals, role of the council, how the council fits within the organization, individual member's roles and responsibilities, how to effectively collaborate with other hospital team members and council members, issue presentation, and how to effectively conduct observations, rounding procedures and the gathering and safe guard of information sessions within the facility.

HIPAA Training

In compliance with HIPAA, PFAC members are to keep confidential any health information regarding patients. Health information is not to be shared with anyone except to team members directly involved in the patient's care. A patient's personal health information must not be discussed in public areas. PFAC members must obtain the patient's permission before discussing a patient's care in the presence of family and visitors.

Infectious Control Procedures Training

PFAC members are to comply with the Health Central Hospital infection control policies. Instruction was provided on the hand washing protocol, room entry and exit procedures, and proper glove usage. Entry is prohibited into a hospital room with isolation precautions. PFAC team members are not to report for service if they are ill.

Patient Experience Training Program

New during the summer of 2014 was the introduction of the Patient Experience Training Program. This unique and innovative program provides all Health Central Hospital Team Members, along with all PFAC Members, specialized training focused on providing patient focused care through communication throughout the care, taking time to connect with the patient, and providing guidelines of quality care standards. Training was provided via video using team members as actors to display the bad, good and great examples of care for various clinical and nonclinical departments. At the end of the training, team members demonstrated their training through a simulation of a patient care scenario.

Impact, Input, and Accomplishments of PFAC

Way-Finding Program – First Impressions

PFAC team members addressed the first impressions the patient receives during their visit or stay within the Health Central Hospital complex. Team members felt that not only is the first impression a lasting one, but it also helps set the tone of the patient's experience. This program ensures the patient knows the value we place on their healthcare while improving the ease of mobility of the patient throughout the medical facility.

- Gateway Signage As Health Central Hospital became fully integrated in the Orlando Health Network of Hospitals, exterior signage was upgraded to ensure the community and patients could easily and clearly identify the healthcare complex.
- New Building Entry Signage has been added to assist patients and visitors in locating the best building entrances to use and better assist the patient with parking in the area most appropriate for their visit
- The Internal Way-Finding Signage program is a work in progress. Great progress has been made as PFAC members collaborate, via the administration, with the facilities management team. Better lighting, newly painted hallways and increased visibility of hallway directional signage have helped greatly in assisting patient and visitor movement around the medical complex.
- Color Coded Parking Signage Ease of patient parking and helping the patient locate their vehicle at the completion of their visit was addressed by the addition of parking lot and parking lane color code identification signage.
- Vendor/Delivery Drop-Off's were addressed by the PFAC team. The reduction of vendors, carts, deliveries and boxes in hallways has increased the ease of patients moving throughout the medical facility. All vendor drop-offs and deliveries are now being directed to the appropriate receiving areas.
- Patient/Guest Direction PFAC and Volunteer Services have worked diligently at improving the information locations and guidance provided to the patients and visitors. Volunteers provide a vital link to the friendly and caring atmosphere created for the patient.
- Relocation of Atrium Sales Improving the "First Impression" for the patient and to create an environment conducive to the professional health care atmosphere, all auxiliary sales are to be moved from the Atrium entrance to the Gleason room assembly area in 2015. These special events are vital to the various hospital support organizations and serve a very important role. With their movement to the new location, they are more secure and the main entrance lobby is easier for the patients and visitors to navigate.

Joint Commission Survey

Joint Commission surveyors conducted a thorough evaluation from March 11th-13th, 2014. According to the surveyors, everyone they interacted with during the survey process was engaged, focused on patients and producing the best outcomes. The surveyors reviewed the PFAC newsletter and were impressed that we have a strong, connected PFAC which is a valuable asset and strongly encouraged the team to share this best practice with VHA.

AHA Webinar

The American Hospital Association invited the Patient Advocate, Bibi Alley to present on July 30, 2014 during a webinar focused on patient family advisory board best practices.

Emergency Department Waiting Lobby

Providing a safe and secure emergency care environment and waiting area for their family and friends was a major concern of many facility visitors and PFAC members. Improvements implemented include:

- Security was re-evaluated and increased within the entire hospital facility
- A new metal detector was added to improve the safety and security of all patients, family members, and staff.
- Access control measures were increased with limits during late evening hours.
- An intake nurse has been strategically placed at the Emergency Department's registration front desk to minimize the wait times and to expedite the triage process
- Additional volunteer staffing has been added as a patient satisfaction measure. These volunteers are present in the Emergency waiting area to assist the family members as the patients wait to be seen.

Pre-Op Interview Area

Recommended improvements to the pre-op interview area were addressed during the past year. Included in these recommendations; increased privacy during the interview process, streamlining of the interview process and the comfort conditions of the patient and family members. These PFAC recommended issues are continuing to be evaluated by the hospital's staff with changes toward streamlining the current processes and procedures being addressed.

ICU Waiting Room Project

The ICU waiting room initiative is an ongoing program. The PFAC helped review plans to remodel, update and upgrade the ICU waiting area to help make area more inviting, private, and comforting for the family and friends of the patient.

Communications

Improving communication between the patient and health care team is a top priority of the PFAC team.

- Patient In-Room White Board Initiative Knowing who to contact is extremely important in the overall communication process. All patients have specially designed white boards in their room and in view of the patient from their bed. Team member names and contact numbers, plan of care, and important communication information for the patient is being updated throughout the day. In addition team members review with the patients and family members on a regular basis on how to operate the communication devices in the room.
- In Room Note Pads As a new addition to the redesigned in-room patient orientation folders, note pads and pencils were added to the packets. Communication with the physicians, nurses, and clinical team is very important. To ensure all questions get answered and not forgotten during those critical visits by the doctors, patients and family members are encouraged to write them down and to stay actively engaged with their health care.
- Newsletter New in 2014 was the development of the quarterly PFAC newsletter. The newsletter is currently being widely distributed throughout the facility and community and is available for review on-line. The newsletter provides for a recap of PFAC involvement and initiatives on going around the facility.
- Collaborative Purposeful Rounding This initiative was piloted in December 2013 in a response to patient feedback collected through PFAC patient experience rounding. It addresses the patient's desire for more interaction with their hospital physician, more communication between their clinical team and more information throughout the discharge process. Chief Nursing Officer and the CFIM inpatient hospitalists collaborated in creating this initiative in which rounding is conducted daily by a multidisciplinary team that includes inpatient physicians, nurses, social workers, and inpatient unit leadership.

Patient Touch-Point Process Improvements

The touch-point concept focuses on each of the numerous points of the health care process in which a health care provider or team member comes in contact with the patient. From entry of the patient into the facility, until the patient's final contact with the facility's business office, each patient comes in contact with hundreds of health care professional and team members. Strengthening and improving each contact with the patient and coordinated transitions between each of the many touch-points is key to top quality care. Touch-point adjustments made over the past year include

- Patient Registration The Registration Department has implemented a more streamlines registration process to help reduce patient wait times. These changes have been met with very positive comments from the patients served.
- Discharge Medication Education Chief Nursing Officer, Christina McGuirk has been working with the nursing team to improve discharge medication communication and education. This vital touch-point interaction between the health care provider team and patient has provided for a safer and more effective transition for the individual and their continuum of care.
- Emergency Department Health Central Hospital Emergency Room has implemented security improvements to ensure the safety of patients and staff. There is a new metal detector at the emergency room entrance and more security guards are on duty all day, every day. Additionally, access doors now have limited access after 9:00 p.m.
- Patient Privacy Bart Rodier, MD, Chief Quality Officer has been encouraging physicians to use the surgery physician consultation room and ICU conference room when giving patient updates to family members.
- Patient Orientation A special Health Central Hospital Task Force was established to develop and design a new and comprehensive patient orientation program in collaboration with PFAC member input. Included in the program is the newly designed Patient Orientation Folder – Patient Personal Care Book that incorporates:
 - New/Updated Patient Guides
 - Multi-Language 4-P’s Handout
 - Clean Hands Save Lives Handout
 - Introduction of the Patient Portal
 - New Guide to Roommate Etiquette
 - New Guide for Visitor Etiquette
 - The Addition of Note Pads for Tracking Communications/Questions
 - The addition of disposable writing devices for patient and family use in taking notes and recording questions for their health care providers

Patient Experience Program Building on the “Patient First” mantra

- Patient Experience Rounding PFAC and specially trained hospital volunteer conducted rounding with patients on various inpatient floors and throughout many of the areas of the hospital complex to include the emergency department in order to obtain feedback from patients and family members on the attentiveness of hospital team members, comfort, cleanliness of the facilities, use of the whiteboards in the patient rooms, and over satisfaction with the consistency and quality of care delivered. Patient Satisfaction issues discovered during rounding are addressed and resolved quickly and efficiently by hospital personnel.

- Purposeful Hourly Rounding, Bedside Shift Reports, Collaborative Care Team Rounding These added programs provide the patient with direct avenues of communication at regular intervals during their in-patient stay. These programs help to tie the patient directly into their plan of care and overall health care process.
- Central Florida Internal Medicine Hospitalist Satisfaction Program This is a pilot program taken on by the PFAC in collaboration with the CFIM physician group. It is aimed at improving the inpatient experience through better interaction with the physician. Through this program, rounding is conducted on patients that are scheduled to be discharged to obtain feedback on their experience with the CFIM physicians. As issues are discussed, real time follow-up with the physicians to resolve the patient concerns can be accomplished.

Emergency Department Quality Initiative

PFAC Team member Alan Face has been vital to the Emergency Department Quality Initiative. Throughout the year, he has worked closely with the department to address issues concerning wait times, specialty department interaction, physician/ patient communications, waiting area comfort, ease of access, transitional admittance to in-patient status, and general patient experience concerns. The Emergency Department Director and staff have worked closely to improve the overall patient experience during this critical time in the patient's life.

PFAC Bylaws

As the PFAC moved into 2014, completion of the PFAC organization administratively was a primary goal. Team members worked hand in hand with administrative personnel to establish official PFAC Bylaws for the council

PFAC Goals for 2015

The Health Central Hospital's PFAC is excited about the many positive inputs, projects, and impacts in the year ahead. The opportunity for patients, family members and the local community to maintain open communication between hospital administration and the outstanding team of health care professionals and staff is paramount to continuing the highest of quality care for the hospital's serviced area.

In 2015 the PFAC plans to:

- Continue to collect and provide real-time anecdotal feedback of the patients' experiences through continued In-Patient Experience Rounding.
- Provide for a continuation of the Hospitalist Satisfaction Program initiative.
- Strive for improved and open communication between the patient and the health care professionals.
- Further examine the patient touch-point processes to find additional ways of streamlining and easing the patient experience.
- Work to assist in the development of "smooth flowing" the patient transition between the various departments within the medical facility
- Develop a local web based access to the PFAC organization with access to the latest information on PFAC initiatives, processes, activities, and projects. Additionally providing links to the PFAC current and historical newsletters, annual reports, application and recruiting process and key documents associated with the hospital's PFAC team.
- Provide for additional community outreach activities. The Health Central Hospital facility continues to introduce new quality health care programs and services for the local community and central Florida region.

The PFAC and entire Health Central Hospital Team are truly dedicated to ensuring the voices of the patient and families are represented. "Patient First" is our standard and the cornerstone for the patient to receive the highest quality care available within our service community.

Appendix 1

Health Central Hospital
Patient and Family Advisory Council
Bi-Laws

ARTICLE I

Section 1: Name

The name of the committee shall be Health Central Hospital Patient and Family Advisory Council.

Section 2: Purpose

The council will serve as an advisory resource to leadership and team members of the organization. This is an opportunity for patients and families to actively participate in the development of new programs and collaborate as partners with team members, physicians and leadership. Additionally, the council provides an opportunity for Health Central Hospital to listen to their “customers” and community members.

This council will provide a safe venue for patients and families to provide input into procedure and program development by providing them an opportunity to review recommendations referred to the council by team members, physicians or leadership. This council will report to the Quality Committee of the Health Central Board of Directors.

ARTICLE II

Section 1: Goals and Objectives

The goals and objectives of the Health Central Hospital Patient and Family Advisory Council are:

- a. To provide an effective mechanism for receiving and responding to patients and families input.
- b. Supply a link between the hospital, the surrounding community and community groups.
- c. To promote respectful, effective partnerships between patients, families and healthcare professionals.
- d. To increase efficiency in planning to ensure that services meet patient and family needs and priorities.
- e. Offer a forum for developing creative, cost-effective solutions to problems and challenges faced by the hospital.
- f. To improve patient and family satisfaction with the health care experience.
- g. To have consistent participation of council members

ARTICLE III

Section 1: Membership Structure

- a. The Patient and Family Advisory Council at Health Central will consist of 15 members:
 - Eight patient/family members
 - President of Health Central Hospital
 - Board Quality Member
 - Chief Quality Officer
 - Hospitalist/Physician
 - Chief Nursing Officer
 - Patient Advocate Facilitator
 - Health Central Hospital Team Member
- b. Additionally, certain other members may be invited to meetings depending on agenda items. This may include Directors, Doctors, Staff Nurses, Department Managers, Team Leaders and/or Team Members.
- c. Patient and Family Advisory members are selected for membership to the council by recommendation of the Patient Advocate and Health Central Hospital Administration and are able to vote at all meetings present.
- d. Patients and Family Advisory members who participate must be representative of the community at large.

Section 2: Membership Qualifications

- a. Member must have been a Patient or family member of a patient who utilized services at Health Central Hospital within the last two years upon beginning of the member's term on the council or be an employee, Board member, of Health Central member of the medical staff.

Section 3: Member Roles and Responsibilities

- a. Members will serve a three year term on the council.
- b. Members will attend at least 3 out of the 4 quarterly meetings and 3 out of the 6 bi-monthly meetings each year of their term.
- c. Members will participate in a Patient and Family Advisory Council Orientation.
- d. Members must be willing to share insight and information about experiences in a manner benefiting a learning environment.
- e. Members will offer feedback in a constructive and professional manner.
- f. Members will listen and respect the perspective of others.
- g. Members must interact well with all individuals regardless of race, color, national origin, religion, sex, sexual orientation, gender identity, socioeconomic status, or disability.

- h. Members will work to solicit and identify patient and family needs/concerns and must work easily in partnership with other team members to address issues identified. Solutions and/or recommendations shall be provided in a timely manner.
- i. Members will support the expansion of patient and family-centered care.
- j. Members must have a commitment to quality care at Health Central.
- k. Members must respect the confidentiality of patient information.

Section 4: **Orientation of new council members**

- a. All Patient and Family Advisory Council members will take part in an initial orientation provided by the Health Central Hospital Patient Advocate Facilitator or other Health Central Hospital Team member as appointed by the Health Central Hospital Administration.
- b. New Member Orientation should include but not be limited to:
 - i. Introductions of administration and council members.
 - ii. Facilities tour and key team member introductions.
 - iii. The sharing of personal and family stories at the council meeting.
 - iv. The vision and goals of the organization.
 - v. The role of the council, how it fits into the organization's structure, and how it can assist the organization in achieving its vision and goals.
 - vi. Meeting attendance expectations of members.
 - vii. The roles and responsibilities of council members.
 - viii. The roles and responsibilities of staff members on the council.
 - ix. How to be an effective council member.
 - x. How to effectively conduct observations, rounding's, and information gathering sessions within the facility.
 - xi. How to present issues effectively.
 - xii. How to be most effective in collaborating with hospital team members.
 - xiii. HIPPA training.

ARTICLE IV

Section 1: **Key Council Positions**

- a. The Patient Advocate or their designated representative will facilitate meetings. This is a non-elected position for the council.
- b. The proceedings of the of Patient and Family Advisory Council will be recorded of minutes
- c. The Community Chair will be elected by the membership of the Patient and Family Advisory Council community members.
 - i. The Community Chair will serve a one year term.
 - ii. The Community Chair may serve multiple terms if so elected. Not to exceed three total terms.
 - iii. Election of the Community Chair requires a majority vote (51%) of the council's active community members in attendance.

- d. Committees and task forces for the Patient and Family Advisory Council may be appointed or established at any time to address issues or projects of the council. All committees and task forces, once established, shall report to the Council until resolution of the issue or project has been deemed to be complete by the Council or the Board Quality Committee.

ARTICLE V

Section 1: Meetings

- a. Meetings will be held bi-monthly.
- b. Meeting dates, time, and location will be tentatively announced 3 months in advance. All meeting will be subject to change due to meeting location and Health Central Hospital key personnel availability. When meetings are rescheduled, every effort will be made to maximize attendance by as many council members as possible.
- c. The council realizes that a council member may not be able to attend every meeting. Therefore, special consideration can be made, on a limited basis, for a member to attend utilizing technology such as telephone conference call attendance. This method of meeting attendance may only be done if arrangements have been made prior to the scheduled meeting. If technology contact is lost, the meeting will not be suspended or delayed until further contact is established.
- d. No Quorum is required for a regularly scheduled meeting. However, if an agenda item or an amendment item requires a vote by the council, a majority vote (51%) will be required to pass or support the issue and 50% of the council's active members must be in attendance.
- e. The agenda for each meeting will be developed by the Patient Advocate or Facilitator. Any council member may submit agenda recommendations to the Patient Advocate Supervisor or Facilitator no later than 5 business days prior to the scheduled meeting for inclusion in the meeting agenda.
- f. All meetings will be facilitated by the Patient Advocate or their designated representative.

Section 2: Voting Procedures

- a. When voting is mandated by the Patient and Family Advisory Council, a majority vote (51%) is required for passage of the item requiring a vote.
- b. For the election of the Community Chair, a majority vote (51%) of 50% of the council's active community members in attendance is required.
- c. The By-Laws may be recommended for amendment by a majority vote (51%) provided 50% of the council's active members are in attendance. By-Laws amendments are not final until approved by the Quality Committee of the Health Central Board of Directors.

Section 3: **Meeting Minutes**

- a. Meeting minutes with action plans (if applicable) will be sent to members of the council as soon as possible after the conclusion of the meeting.
- b. The Community Chair along with the Patient Advocate shall approve and present each minutes to each meeting and forward to the Health Central Quality Committee or the Board of Directors.
- c. A member of the council will present meeting minutes to the hospital Board Quality for review and approval.
- d. Council members are responsible for reviewing meeting minutes prior to the next meeting to prepare for meeting discussion.
- e.

ARTICLE VI

Section 1: **Guidelines of authority**

- a. The Patient and Family Advisory Council members will review issues related to education, quality, safety, policies, procedures or other concerns. The members have direct communication with Senior Leadership at Health Central and can make recommendations accordingly.
- b. Events organized and/or issues addressed and undertaken by the Patient and Family Advisory Council are done so with prior approval of the Health Central Hospital Administration or the Quality Committee of the Board.
- c. No public statements will be issued by the Patient and Family Advisory Council or its members without prior approval of the Health Central Hospital Administration.

ARTICLE VII

Section 1: **Confidentiality**

- a. To maintain appropriate and confidential handling of personal information, patient and/or family names or identifying information shall not be discussed during Patient and Family Advisory Council meetings.
- b. Strict compliance with all state and national laws regarding confidentiality, including HIPAA, shall be enforced.

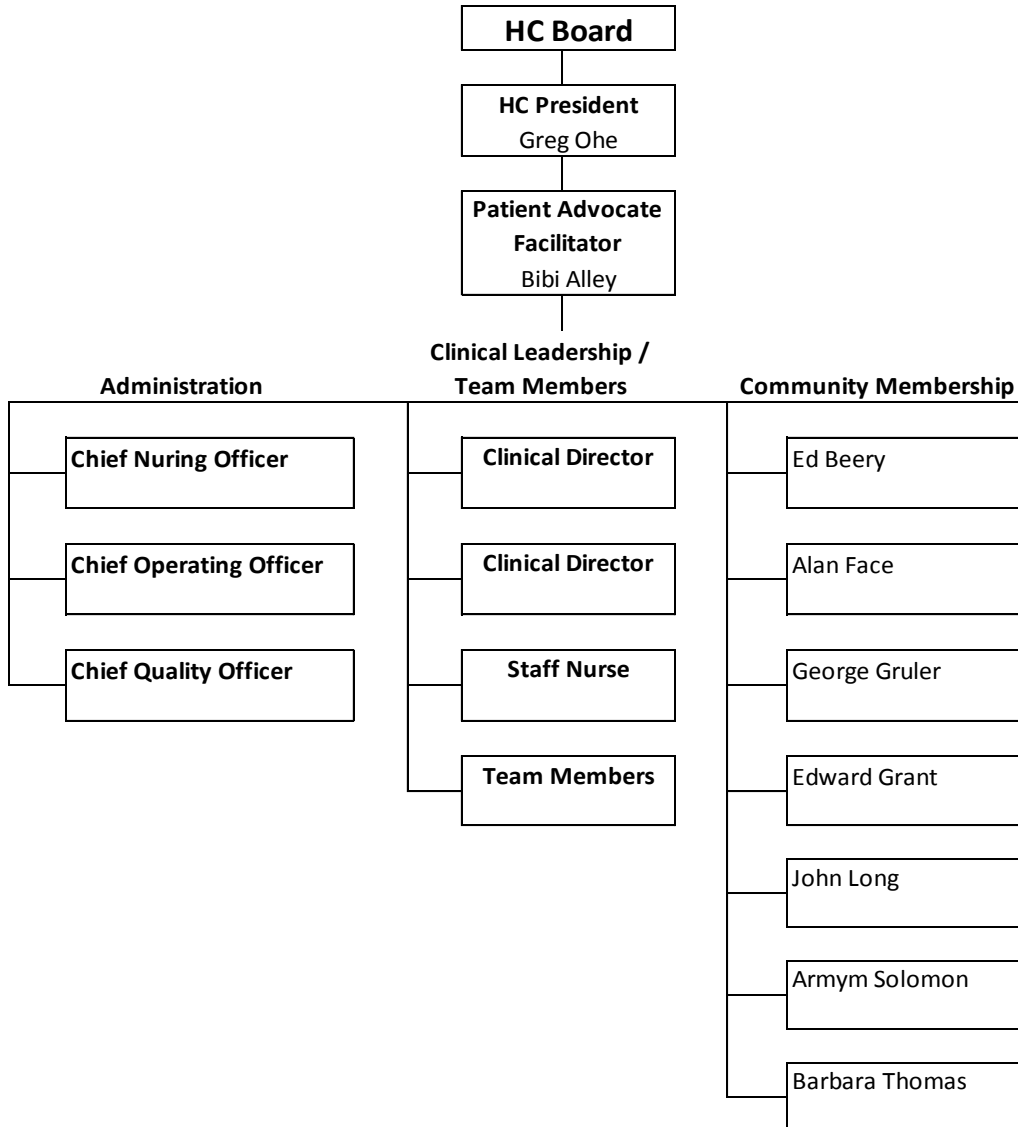
ARTICLE VIII

Section 1: **Amendment Procedures**

- a. Amendments to the Patient and Family Council By-Laws will be presented during one of the council's regular meetings and voted on at the following regularly scheduled meeting.
- b. The By-Laws may be amended by a majority vote (51%) provided 50% of the council's active members are in attendance.
- c. All By-Law amendments are subject to the approval of the Quality Committee of the Board of Directors.

Appendix 2

**Health Central Hospital
Patient and Family Advisory Council**



The PFAC is serious about getting true input on how patients and families feel about their visits, the processes experience, and access to care. Council members are selected based on their willingness to contribute ideas about providing compassionate patient care.

Appendix 3

Health Central Hospital Patient and Family Advisory Council

Cardio Pulmonary – Respiratory Care
Surgical Care Unit – SCU
Medical Surgical Care Unit – MSU
Telemetry Unit – TMU
Orthospine Unit – OSU
Dialysis
Obstetrics
Physical Therapy
Intermediate Critical Care -ICC
Critical Care Unit – CCU
CVICU – Waiting Room
Ambulatory Surgery
Ambulatory Surgery – Waiting Lobby
Endoscopy
Laboratory Department
Radiology Department
Emergency Department
Emergency Department – Fast Track
Emergency Department – Waiting Lobby
Diabetes Education Center
Registration
Chapel
Administration
Board Room
Executive Conference Room
Volunteer Services
Support Facilities Departments
Atrium Pharmacy
Outpatient Surgical Center
Wound Care Center
Express Care Center
Medical Office Building