Residents' Coalition, Inc. Foundation to Save Woman's Medical / MCP Association 2801 Chalmers Street Philadelphia, PA 19132

April 17, 2006

PEOPLE ACTION ALERT! FREQUENTLY ASKED QUESTIONS FEATURES BENEFITS WMCHPa Community Health Cooperative

Reason: Community Health Cooperative Woman's Medical College Hospital of Pennsylvania (WMCHPa) AKA Tenet/MCP (facility located at 3300 Henry Avenue, Philadelphia, PA,) Questions and Answers!

What is our **Community Health Cooperative**?

Our Community Health Cooperative is a hospital patient-consumer, doctor, nurse, and support staff governed, nonprofit health care system that is to be centrally located at the hospital facility known as Woman's Medical College Hospital of Pennsylvania (WMCHPa) AKA Tenet/MCP located at 3300 Henry Avenue, Philadelphia, Pennsylvania.

What is our Purpose and Mission?

Purpose. Community Health Cooperative exists to transform health care, working together with patient/consumers and medical practitioners every day to improve the care and well-being of our patient/consumers and communities through the operation of a full service hospital facility.

Mission. Our Community Health Cooperative is a **patient-consumer**, **doctor**, **nurse**, **and support staff governed**, *hospital organization* whose mission is to design, finance, and deliver high-quality community health care programs.

What are our values?

Values. In carrying out our purpose and mission, we demonstrate these core values: respect, integrity, wholistic wellness for our membership community, scientific discipline, justice based management, pioneering spirit, the dignity and development of every member of our hospital community health cooperative organization, to economically empower each person as an owner, patient and/or worker, and stewardship.

Our Community Health Cooperative shall:

In the spirit of WMCHPa, which has always been of economic and social justice, the Community

Health Cooperative follows Justice-Based ManagementSM (JBMSM) protocols to create, promote and sustain our cooperative hospital ownership culture that enhances the wellness, dignity and development of every member of our hospital organization, and to economically empower each person as an owner, patient and/or worker. The hospital is to operate as a healthcare organization that promotes wellness in a framework of patient, doctor and staff management of the health services delivery enterprise! The hospital is to operate a Wholistic Wellness Care Organization Plan Program (WWCROPP) Community Health Cooperative, featuring state of the art conventional and alternative medicine health wellness care and management technology. Healthcare is a need common to all members of our community/society and its hospital, healthcare institutions and physical facilities should be owned, operated and managed in common by all to achieve the highest good for all.

What are some of the advantages of cooperative ownership and operation of the hospital?

Because the hospital facility is owned and operated by its **hospital patient-consumer**, **doctor**, **nurse**, **and support staff there is no requirement to send money and resources to and outside group thus the costs to operate the facility shall be lower to its hospital patient-consumers**, while its doctor, nurse, and support staff shall be able to be compensated at competitive market rates.

What is our Community Health Cooperative organizational structure?

Our Community Health Cooperative is part of a subsidiary organization structure that the Residents' Coalition, Inc. - Foundation to Save Woman's Medical / MCP Association formulated for the hospital to operate and conduct its affairs under as follows:

A Hospital Cooperative that is a subsidiary organization to a community healthcare umbrella association that consists of the cooperative, a land trust holding company and a fund raising foundation.

The Hospital Cooperative is to feature patient and employee ownership of the reorganized hospital facility and as such we are forming Hospital ownership subsidiary associations as follows:

- Patients/Community Hospital Ownership Association
- Doctors Hospital Ownership Association
- Nurses Hospital Ownership Association and
- Support Staff Hospital Ownership Association.

What are some of the program innovations that the **Community Health Cooperative will feature?** The service summary includes:

- 1. **Public Private Endowment Funding of hospital operating programs** with Payment of Staff Doctors' liability insurance on a group basis thus relieving Staff Doctors of too high insurance premium payments as a barrier to their practice of medicine.
- 2. Comprehensive Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) accredited in-patient service with specialized units.
- 3. A consortium of out patient clinics that follow the guidelines of Section 330, Health Center Bureau of Primary Health Care. Section 330 is a Federal program that provides financial incentives for primary care access in under-served populations.
- 4. To market and develop a private coverage program for individuals that require and can afford a comprehensive annual care for service fee.
- 5. To develop an extensive community education program for disease and violence prevention and emergency preparations.
- 6. To assist the business community with a basic medical knowledge education program. A certificate will be presented upon completion.
- 7. To maintain and encourage primary care medical education.
- 8. Expand the financial base with appropriate grants and subsidies for specialized programs.
- 9 Review the emergency room utilization patterns with referrals to the proper ambulatory care clinic as appropriate.
- 10 Provide a nursing home, hospice, in-patient hybrid for the final year of life expenses.
- 11 A medical day care center for children with physical and mental impairments. This will allow the caretakers to have a regular rest, and the children to have a more normalized life.
- 12 The comprehensive cost containment and hospital error program will decrease morbidly and mortality while containing costs.

Special Centers-Cost Containment Program

DATA	TRENDS	INNOVATION
Heart Disease	Billions in cost	Woman's Cardiac Center
Musculoskeletal Injuries	>20% Costs	Violence Prevention
Cancer	Early Diagnosis	Screening & Community Education
Obesity	1/5 Americans 2.5 X More Days	Women's Cardiac Center Exercise Program Community Services
Psychosis	Major In-Patient	Treatment Referred Drug Use Prevention Program
Infectious Disease	Sepsis \$16.7 Million	Technology & Prevention
Adverse Events	Medication Errors	Severance & Pharmacists
Last Year Of Life	27%	Medicare Attached Nursing Home PCP Hospice
Disaster Preparedness	Establish Protocol	Federal Participation
Uncompensated Care	ER Over Utilization	Consortium Clinic Care

Who are some of our Community Health Cooperative key executive committee members?

Ralph Wynder	Interim Chairman President, Residents Coalition	
To-Be-Determined	Board Representative of the Foundation to Save Woman's Medical / MCP	
A'V' Hankins MD FACP	Acting Hospital Program Manager	
John P. Walker, PhD, CPA InterimCFO/Treasurer		
Jasper Jones, MBA	Interim CTO, Executive Director UBCA Community Trust	
Minister James Royal	Director Community Outreach and Owner Community Relations	
Gene Hatten	Coordinator of Federally Qualified Health Plan Centers	
Irwin Shannon	Interim Deputy Community Outreach Coordinator	
John Brickhouse	Interim Deputy Director of Community Outreach, President of the North Penn	
	Community Association	
To-Be-Determined	Chief Administrator Office (CAO) is to be determined by a search committee of	
	the Community Health Cooperative consisting of representative members from	
	each of the subsidiary ownership associations Patients/Community , Doctors ,	
	Nurses, and Support Staff.	

Who are our Association **Community Health Cooperative** Hospital Reograniztion, reopen procedure and finance lead negotiation committee members?

Chair - Ralph Wynder, his Alternate is James H. Royal Acting Hospital Chief Executive Officer Administrator – to be determined Acting Hospital Program Manager – Dr. A. V. Hankins, MD, FACP Acting Hospital Chief Financial Officer and Treasurer – Dr. John P. Walker, CPA Acting Hospital Chief Technology Officer – Jasper Jones, MBA Hospital *lead cooperative finance acquisition representative, Norman Kurland Legal Counsel – representatives being negotiated.*

WHAT ARE WE NOW DOING?

Having Town Meetings to Provide Information on the Status of WMCHPa at which Community Members who have been patients or who are potential patients are asked to subscribe to the *WMCHPa* **Community Health Cooperative.**

We are forming hospital ownership subsidiary associations as follows:

- Patients/Community Hospital Ownership Association
- Doctors Hospital Ownership Association
- Nurses Hospital Ownership Association
- Support Staff Hospital Ownership Association

The collective hospital ownership subsidiary organizations are known as and divided into two groups:

- **Employee** Co-chaired by employee representative [employee ownership plan (EOP)]
- **Patient/Community** Co-chaired by the patient (i.e. customer/consumer) representative [client/customer/consumer/community ownership plan/program (COP)]

WHAT ARE YOUR TASKS TO HELP REOPEN WMCHPa NOW?

- Take out and complete forms for one dollar or more as an employee or patient ownership subscriber to *WMCHPa Healthcare Cooperative*.
- **Recruit your employee and patient friends and family to t**ake out and complete forms for one dollar or more as an employee or patient ownership subscriber to the *WMCHPa* Healthcare Cooperative.
- Call and send emails and faxes to the Governor telling him not to sell your hospital you want to own it and operate it now as a Community Healthcare Cooperative.
- Come out to organization meetings and support demonstrations for WMCHPa.
- As a <u>Subscription-Taker</u> you must collect paid subscriptions from community members atlarge or former/current/potential employees of the WMCHPa Facility by having to complete the subscription forms and to pay (\$1.00) one dollar or more.

The subscription taking process requires that you as the subscription-taker record sequence numbers on the subscription forms and the subscription ledger document forms and that the subscriber signs both the subscription form and the subscription ledger documents. The data items that are required to be completed by cooperative members are as follows:

Subscriber Printed Name, Date, Subscriber Signature, Subscriber Phone No., Fax, Subscriber E-mail, Mailing Address.

Please note the category of subscriber as employee or patient on the subscription ledger form as "Service Provider Employees _____ or Patient/Customer/Users of the services provided by WMCHPa ____".

Use each individual subscription ledger form exclusively/only for "Service Provider Employees _____ or Patient/Customer/Users of the services provided by WMCHPa ____.

For more forms, subscription sequence number blocks and to turn in registration forms and payments: Please contact the Residents' Coalition Taskforce Association Director of Subscriptions for the Community Health Cooperative James H. Royal at 267.237.5064 or 215.763.3678. Via emails send to James H. Royal care of Jasper Jones at crop gospel@yahoo.com

Thanking you in advance for your cooperation and assistance in these important Woman's Medical College Hospital of Pennsylvania (WMCHPa) financial and organization structure matters.