Our Mission
to serve as a resource that enables Lehigh Valley Health Network
to be a superior regional hospital and improve the health
of the citizens of the region it serves.
Leonard Parker and Dorothy Rider Pool were constant and caring citizens of their adopted home, the Lehigh Valley. They devoted time and treasure to the arts, education, and health during Dorothy’s life and, upon her passing, Leonard dedicated the last years of his life to the creation of Lehigh Valley Health Network (LVHN). He was always concerned about the wellbeing of his Air Products employees, their families, and the residents of his community. During Dorothy’s illness, he sought treatment for her in New York and Philadelphia. This experience caused him to worry about access to health care for others in his home region. Leonard’s drive, energy, and passion led him to the conclusion that the region needed a “superior regional hospital” to provide “superior health care.” Upon his death, he provided for the creation of The Dorothy Rider Pool Health Care Trust. Since 1976, the Pool Trustees have been responsible for the stewardship of approximately $145 million dollars of investments “to or for the benefit” of LVHN. Today the Trust assets total approximately $85 million.

As Mr. Pool envisioned, LVHN is a “superior regional hospital,” and The Pool Trust has been part of that journey. The 40-year (and counting) compendium of Pool-funded work includes the creation of one of the first hospice programs in the U.S., one of the best trauma programs in the country, and excellent poison and burn care programs. The Trust enabled a sophisticated emergency medicine system, fluoridation of the regional water system, and establishment of the first Federally Qualified Health Center in eastern Pennsylvania. Numerous programs for the elderly, young, and those most significantly at risk of poor health have been successfully implemented over the decades. Pool Trust support for two legs of the clinical stool – research and education – have strengthened LVHN’s clinical services.

We reflect on the achievements to date while we enthusiastically consider advancement of Mr. Pool’s legacy going forward. Toward that end, we have increased our attention to the many factors that influence health and the challenges faced by LVHN in fulfillment of its mission. These challenges are widely known and documented as the social determinants of health. Broadly stated, they describe that social and environmental conditions (including educational attainment and income) account for 40 percent of a person’s health; the physical environment (including housing) accounts for 10 percent; and clinical services (hospitals and doctors) account for approximately 20 percent of an individual’s health. That leaves 30 percent of health that can be attributed to individual behavior and the choices people make. ¹ We move ahead considering how The Trust can support and enable LVHN to further advance the health of our community with these social determinants in mind.

Activities in 2017 uphold this statement. In this year, The Dorothy Rider Pool Health Care Trust was honored to host notable visitors to the Lehigh Valley to facilitate rich conversations and provide opportunities for learning. These visits attest to the appreciation and recognition of LVHN and Pool Trust, particularly with regard to our transformative view of health.

In October of 2017, The Pool Trust joined with LVHN to bring leadership from the Fannie E. Rippel Foundation to the Lehigh Valley to learn about Rippel’s national initiative, FORESIGHT, a cross-sector, cross-regional movement to reshape health and healthcare. Laura Landy, MBA, Rippel President and CEO, along with her team shared insight into their work. They in turn were introduced to the renaissance of the Lehigh Valley, strategies of transformation within LVHN, and activities within the Downtown Allentown Community Development Initiative.
In December, a similar meeting saw the arrival of Richard E. Besser, MD, Chief Executive Officer; Don Schwarz MD, MPH, Vice President, Program; and James S. Marks, MD MPH, Executive Vice President; from the Robert Wood Johnson Foundation. Allentown leaders who have completed The Rider-Pool Foundation Collective Impact Fellowship joined Pool Trust and LVHN Board members and senior management of LVHN in the day-long meeting. Activities included a walking tour of center city Allentown, discussions of rapid prototyping and capacity building, information from Robert Wood Johnson’s framework for a national health mission, and an introduction to the Purpose Built Community model out of Atlanta, Georgia.

Moving into January of 2018, the Tamarack Institute and Ontario Trillium Foundation joined The Pool Trust and the United Way of the Greater Lehigh Valley in an exchange of ideas around Collective Impact as one of the means to build stronger, healthier communities. The two-day visit allowed more than 200 people in our region to interact with Sylvia Cheuy, Consulting Director of Collective Impact, Tamarack Learning Centre, and Jen Roynon, Director of Partnerships and Knowledge Mobilization with the Trillium Foundation. One group participated in a human-centered design workshop, and others gathered for a visit to the Penn State Lehigh Valley innovation center. This interaction spurred an ongoing relationship with Tamarack and Trillium that continues to gain momentum and national activity.

The Pool Trust has learned a great deal through grants distributed since 1976. We are pleased with LVHN’s wise use of these resources and the successes large and small that have led the learning process and point to the future. We greatly value and are committed to our strong partnership with the leadership at LVHN and our shared passion to improve the health of the Lehigh Valley. We remain grounded in theory, true to a tradition of seeking proper structure, design, intervention, and measures that lead to better outcomes in our community’s health.

Offering outtakes of 2017 in the following report, we see evidence that The Pool Trust is continuing to use funds in strategic ways to leverage, convene, and facilitate. That strategic direction was left, along with a culture of drive, passion, innovation, and tenacity, through the legacy of Leonard Parker Pool.


Edward F. Meehan  
Executive Director

John P. Jones III  
Chairman
The Dorothy Rider Pool Health Care Trust

The Dorothy Rider Pool Health Care Trust came into being upon the death of Leonard Parker Pool on December 27, 1975. Mr. Pool amassed a financial fortune as founder and long-time chief executive of Air Products and Chemicals, Inc. He directed that the Trust be named as a memorial for his first wife, Dorothy Rider Pool, who died of cancer in 1967.

The mission of The Dorothy Rider Pool Health Care Trust is to serve as a resource that enables Lehigh Valley Hospital to be a superior regional hospital and improve the health of the citizens of the region it serves.

The Trust operates as a public charitable trust. Led by a small and dedicated staff, the Trust, with the assistance of local, regional and national advisors, addresses the needs of the citizens of the Lehigh Valley and supports programs to meet those needs.

“During my lifetime I have had an intense interest concerning health care for my fellowman. This interest was first expressed as an active trustee of the Allentown Hospital Association and, more recently, as a founder, director, and president of the Allentown and Sacred Heart Hospital Center, Inc.

Because of this interest, upon my death, I wish to have the residue of my estate used for the continued provision of health care to the citizens of the Lehigh Valley and others served by the Allentown and Sacred Heart Hospital Center (now Lehigh Valley Health Network).

- Leonard Parker Pool
LVHN Office of Philanthropy  
Color Outside the Lines at Nite Lites Annual Gala  
$50,000 for one year

Lehigh Valley Health Network  
Physician Executive Development Planning Grant  
$25,000 for one year

LVHN Department of Community Health  
Data Sharing, Collaborative Work Using Community Commons as a Tool  
$356,110 for one year

LVHN Department of Family Medicine  
A Mixed-Methods Approach to Exploring Barriers to Mammography Completion (Rapid Prototyping)  
$29,029 for nine months

LVHN Department of Community Health  
Addressing Mental Health Concerns in Allentown by Increasing Community Capacity and Cross-Sector Partnerships  
$387,570 for one year

LVHN Department of Community Health  
Healthy and Affordable Housing in Allentown (Rapid Prototyping)  
$50,000 for nine months

LVHN Department of Community Health  
Improving Access to Safe and Affordable Housing  
$152,612 for 8 months
The Pool Trust Grant Highlights

Lehigh Valley Health Network
Department of Community Health Initiative: Using Better Data to Address Complex Social Issues

In 2018, the Centers for Disease Control’s (CDC) Vital Signs report on suicide rates in the United States highlighted the dramatic increase in the rates of suicide in nearly every state in the nation, including Pennsylvania, since 1999.

Although there is value in looking at a social issue like suicide at a state and national level, causal factors can be very locally focused. Because the impact of suicide is devastating for the entire community, it is important that a deeper understanding of cause, prevention strategies, and support is influenced by and remains rooted in our local communities. Toward that end, The Dorothy Rider Pool Health Care Trust provided support to LVHN’s Department of Community Health to gather and analyze data which will help us better understand this issue through a local perspective.

Specifically, a task force representing several organizations assembled to find ways to reduce the number of suicides in Lehigh County. The task force is made up of: David Zimmerman, Health Care Data Analyst, Lehigh Valley Health Network Department of Community Health; Scott M. Grim, Lehigh County Coroner; Vicky Kistler, Director of Health, Allentown Health Bureau; Richard Orlemann, Deputy Mental Health Administrator, Lehigh County MH/ID Program; Bill Vogler, CEO-Executive Director, Pinebrook Family Answers; Jim Presto, Chairman, Greater Lehigh Valley Chapter of the American Foundation for Suicide Prevention (AFSP); and Ron Dendas, Program Officer, The Rider-Pool Foundation and Dorothy Rider Pool Health Care Trust.

Zimmerman and other members of the Department of Community Health were able to use state of the art technology to review and map data regarding suicides in the County. Similar to the national trend, the data showed an increase in suicides in Lehigh County and can identify “clusters” of suicides - those geographic areas in the County where most of the people who died by suicide resided between 2011 and 2017. Those numbers and areas are currently being confirmed.

What’s more important than organizing the numbers is a two-fold question: What should be done with the data, and how can it be used to lessen the burden of deaths by suicide? That data is now being mapped at a municipality level and prepared for next steps which will include a series of community discussions in those areas. These will be open to families, community leaders, schools, social service agencies, health care providers, and anyone else interested in reducing suicide in the Lehigh Valley.

The task force will share the findings from the trend analysis, but more importantly, will listen to the people and communities who are closest to the pain caused by suicide to gather substantive responses and conversation that will offer more information than the numbers alone provide. Joining the data and the public narrative together, this program will address the local tragedy of suicide deaths at its root. The outcomes intend to improve the type of treatment and interventions that are provided, adjust the geographic locations where interventions are available, and update our collective understanding of mental health preventive and emergency care. Toward that end, the outcomes from this completed study will be made available as quickly as possible to any agency involved in suicide prevention.

This grant and the work of LVHN and the task force are focused on using data to help the community develop strategies needed to address this complex, critical public health issue and position support systems to better meet the needs of residents most at risk of a suicide attempt.
Lehigh Valley Health Network

Department of Family Medicine:
A Mixed-Methods Approach to Exploring Barriers to Mammography Completion (Rapid Prototyping)

Despite quality improvement efforts designed to increase access to mammography and screening rates ordered at Lehigh Valley Health Network, completion rates in the Department of Family Medicine remained at 67 percent in 2017, which is below national numbers. In response, the department recognized the need to understand factors affecting mammography rates from a broader perspective, including individual and system level barriers. With funding from The Dorothy Rider Pool Health Care Trust, a team led by Grant M. Greenberg, M.D., M.H.S.A., M.A, the Leonard Parker Pool Endowed Chair in the Department of Family Medicine, prepared a research project to conduct six health system setting focus groups with unscreened women identified through an electronic medical records query in the Lehigh Valley service area.

“Human nature is to jump to solutions as quickly as possible. But when we do that, we are working on assumptions and may not fix the root of the problem,” Greenberg says. “Instead, we must address a more fundamental barrier by asking the people why they didn’t get a mammogram. Then we can look for common themes in responses.”

Focus group participants were identified as female, aged 50 to 74 years, active patients at an LVPG Family Medicine of General Internal Medicine practice, having been seen at least once in the last 24 months, English speaking, and no documented or reported mammography in the last 24 months.

The research followed a path of “rapid prototyping” which gathers data quickly and prompts fast response. “This type of study allows us to explore the problem and set a course of next steps,” Greenberg explains. “We aren’t going to spend five years finding out why women don’t get mammograms – rather, we want data and information that can direct us to improvements that will get more women in for the screening now.”

Greenberg and partner in the study, Melanie Johnson, MPA, Supervisor, Quality and Research, Department of Family Medicine, reference using a pareto analysis that is in line with rapid prototyping to direct action steps to the areas of greatest need that will, in turn, have the greatest overall impact.

With the focus groups completed and initial findings reviewed, Greenberg says they have noted a few surprises. “There was a thought bias going in to this study that perhaps location of screening sites was one of the barriers to screenings,” he says. “In fact, not a lot of patients talked about proximity to services and all of the participants were able to commute to the focus groups. The data does not validate that geography is an issue.”

In context, these participants were able to attend the focus groups that were conducted at LVHN sites that had mammography services, so this finding may not be generalizable to the larger population. Preliminary survey data is showing that proximity to services may be barrier for approximately one-third of the survey respondents.

Cost did not appear to be as much of a factor as was confusion over insurance coverage. Many insured women were unaware that the screening is covered. However, the financial barrier was clarified as not always being about paying for the screening. Rather, women said if there was a finding on a mammogram, the related tests and biopsies are subject to deductible and fees that they cannot cover.

In addition, the cost factors of taking time off of work, using gas money, and paying a babysitter to get to the appointment are issues.
Misconceptions about a mammogram were also noted including women who cited breast size as a reason to not get screened because they felt they were not at risk. Others thought they should only get a screening if they had symptoms, not realizing that a screening looks for abnormalities in the absence of symptoms.

Finally, a theme in one focus group indicated that women are often delaying or disregarding their own needs while in a caregiving role to children, parents, or other family. Altruism as a barrier to mammograms and the other reasons discovered are useful to how LVHN develops reactions.

“We are following a philosophy of responding,” Johnson says. “After an honest dialogue, we can let the community know their voices are important to us.” She explains that with data in hand and additional trends assembled through the survey results, the team will design a multi-pronged response that will include workflow, patient education, operational leadership, and other aspects of the patient experience to improve outcomes.

The results, while intended to explain low mammography rates, will ultimately have greater reach, Greenberg adds, noting that some of the barriers found in this study are likely to be the same barriers to other medical screening. Alterations to service delivery and approach can be applied across the network.

With initial reactions already in motion, mammography rates have moved up 2 percent, which indicates 200 more mammograms have been achieved. Greenberg reminds that there are people behind those numbers. “Every mammogram that doesn’t happen is a potential later diagnosis and leads to a more invasive treatment. This incremental change means we could have identified 200 cases of breast cancer in early diagnosis. This is how meaningful this research and the outcomes can be.”

The Paul Bosanac Research and Publication Award

The Bosanac Award is dedicated to the memory of the late Paul Bosanac, MD, who was Chief of the Renal Section of Surgery at The Allentown Hospital-Lehigh Valley Hospital Center. Dr. Bosanac was instrumental in establishing the Research and Publication Support Service at Lehigh Valley Hospital Center (now Lehigh Valley Health Network). The award in his honor is supported by the Pool Trust to encourage and recognize residents at Lehigh Valley Health Network who engage in scientific investigation and research.

In 2017, The Bosanac Award was presented to Jalaj Garg, MD, Cardiovascular Disease, PGY 6, as the principal author of the paper titled “Cryoballoon versus Radiofrequency Ablation for Atrial Fibrillation: A Meta-Analysis of 16 Clinical Trials.”

Photo courtesy of Lehigh Valley Health Network
The Pool Trust Pool Trust Statement of Financial Position

December 31, 2017 - with comparative totals for 2016

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|                                     | **$87,002,102** | **$81,820,984** |

The financial statements for the Trust for the year ended December 31, 2017 have been examined by the accounting firm of BBD, LLP.

A detailed financial report, as examined by BBD, LLP, is available at the Trust office upon request.
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