



COMPASSIONATE giving

Biannual News from Good Samaritan Foundation | Fall 2019



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Elaine Ellis's Story



I See Courage

For Good Samaritan Hospital and the Foundation, supporting behavioral health is part of our mission—it's in our DNA. While many organizations and hospitals have retreated from addressing and funding these issues head-on, we continue to believe in our founding principles: that we don't just treat the body... we treat the body, mind, and soul. What a blessing it is to be part of an organization like that. I'm honored to stand side-by-side with our donors and clinicians who understand behavioral health isn't a simple case of someone not having the willpower to overcome self-infliction, but rather to see it for what it really is—a continuum of ailments that directly or indirectly touch us all.

This issue is dedicated to our compassionate donors and care providers who continue to have the courage to raise their hand and say, "If not us, then who?" This issue is also dedicated to our patients and their family members who must courageously navigate a baffling and debilitating set of scenarios that lack proper funding through traditional insurance.

I believe philanthropy is many things—it's a direct lifeline to our community, it's an opportunity to leave the world a better place than we found it, and, just as

importantly, philanthropy is about filling the gaps when no other solution exists. When the Good Samaritan Foundation seeded the Opioid Pilot Program in the fall of 2017, we weren't sure what the impact would be. At that time, an incredible group of Board Members here at the Foundation pushed to address the issues of addiction, depression, suicide, and mental illness. Through their efforts and generous individuals like you, we were able to fund a program to train physicians, diagnose symptoms, hire a full-time treatment coordinator to intervene with flagged patients, and establish a program that provides referrals and treatment.

We've come a long way, but there are more steps we must take. It's time we push this issue out from behind closed doors, remove remaining stigma, and act on our faith-based mission toward a true population health model of care. I know we will do it because we've proven we can.

Thank you,

Mary L. Rafferty
President and Chief Executive Officer
Good Samaritan Foundation



we don't just treat the body...we treat the body, mind, and soul.

Inside TriHealth

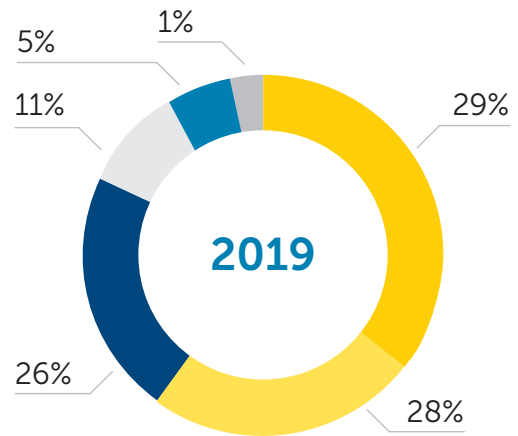
Each year we are eager to share the Annual Report with you, because in reality it is *your* annual report. These numbers are remarkable not only because they represent your generosity, but also because they represent your impact.

Each dollar positively affects a person and, by extension, their loved ones. With the nearly **\$4.2 million** invested in Good Samaritan and our community this year, your impact is exponential. Thank you.

Fiscal Year 2019 Annual Report

Contributions:

■ Foundations.....	\$1,123,985	29%
■ Individuals.....	\$1,082,725	28%
■ Not for Profit Organizations.....	\$1,020,602	26%
■ Business/Corporations.....	\$ 412,842	11%
■ Guild.....	\$ 190,393	5%
■ Trusts/Estates.....	\$ 32,029	1%
Total.....	\$3,862,576	100%



Areas of Impact

Culture/ People	Service	Quality/ Safety	Growth	Finance
Create an engaged workforce.	Create a consistently exceptional TriHealth patient experience.	Offer exceptional quality and safety to every patient, every time.	Expand the population we serve.	Strengthen our financial health to fund our future.
Educating the Caregivers of Tomorrow	Supporting Patients and Families	Caring for the Community	Innovating the Future of Care	Total
\$696,700 17%	\$813,845 19%	\$2,052,643 49%	\$271,161 6%	\$4,198,737 100%

Perspectives...

From New Board Members

Join us in welcoming our new members of the Foundation Board of Trustees. We asked each of them to reflect on their upcoming service, the impact they hope to make, and the role of behavioral health. As you can see, we are blessed with compassionate, talented leaders.



Seth Isaacs, MD; Christina Scalo; William Schnettler, MD; and Fred Brink. Not pictured: Bob Beuchner.

“ Behavioral health touches everyone in some fashion, from young to aging, poor to rich, and discussing it openly and honestly will lead to better outcomes for all of those families directly impacted. We need to have courage to compel society to take action, with the goal of being able to help every person and family touched by some type of behavioral health issue. ”

- Fred Brink, CFA, Managing Director, Johnson Asset Management

“ Behavioral health is what can make the difference between a productive, joyful life and one of depression, suicidal thoughts and drug addiction. Courage is needed in this area to develop new, creative approaches to how we deal with mental health issues. I want to help the Board be as impactful as possible in helping individuals move from despair to joy and a fulfilling life.”

- Bob Buechner, President, Buechner Haffer Meyers & Koenig Co., L.P.A.

“ As a physician, understanding behavioral health concerns is critical for the management of my patients. It allows me to establish and maintain rapport, select appropriate treatment, and counsel them about both medical and surgical interventions. I think that courage is medical staff that acknowledges and appropriately treats the mental health concerns of their patients.”

- Seth Isaacs, MD, Chair of Otolaryngology, Good Samaritan Hospital

“ Behavioral health care is important because it provides resources to people in need and gives them support and comfort on their journey to living their best life. Through my service on the Board I hope to raise awareness of all the wonderful offerings the Foundation provides to the community.”

-Christina Scalo, Tax Senior Manager, KPMG, LLP

“ Behaviors, attitudes, and perceptions of one's health are the key drivers of that individual's overall health. As moods change and initiatives shift throughout our lives, our emphasis on total health may wax and wane. However, if a mental or behavioral health disease plagues our minds, we certainly then struggle to embrace our total health and instead often make poor choices involving substances, bad eating habits, and lack of exercise.”

-William Schnettler, MD, FACOG, Perinatologist and Director, TriHealth Center for Maternal Cardiac Care & Critical Care Obstetric Task Force

Shattering Stereotypes and Stigmas

Healthcare has a long history of evolving terminology. Do you know the difference between mental health and behavioral health?



Dallas Auvil, MD and Judy Mitchell, MSN, RN, BC

Behavioral health impacts more people than is commonly thought:

For every 10 people in a doctor's office, **7** are there seeking care for reasons related to behavioral health.

Approximately **1 in 5 adults** in the U.S. experience a mental illness in a given year, and 1 in 25 experience a mental illness that interferes with their life activities.

Serious mental illness costs the U.S. economy approximately **\$193 billion** per year in lost earnings.

Sources:
NAMI, the National Alliance on Mental Illness
Maine Health Access Foundation

Most do not, but it is an important distinction. Put simply, mental illness falls within the wider spectrum of all ways our behaviors impact our overall health. "The physiology of the brain is complicated and people are complex," states Dallas Auvil, MD, Medical Director of Behavioral Health at Good Samaritan and TriHealth. "Behavioral health spans a wide array of illnesses, from mood disorders like depression, to neurocognitive diseases such as dementia, to substance use disorders, and mental illness. But more than that, it encompasses how our everyday actions affect our health."

According to Judy Mitchell, MSN, RN, BC, Director of Behavioral Health, "We've come a long way in identifying and treating behavioral health issues. However, we have a long way to go. A major stumbling block is the misconceptions or stereotypes that set up an 'us' vs. 'them' mentality. We need to have an 'us' understanding, because it impacts all of us." She continues, "Behavioral Health Services are a spectrum of care from inpatient to outpatient service, as well as support for patients receiving care in other areas such as bariatric surgery, cancer treatment, primary care offices, new parents in pediatric practices, and more."

Despite the startling realities noted above, stereotypes and stigmas unfairly change the narrative. Judy and Dr. Auvil note the most common ones they encounter center around the idea that the person is lacking in a certain value or character trait, such as a lack of morality, a lack of willpower, or a lack of moral fortitude. Each of these false beliefs perpetuates a debilitating sense of shame—resulting in delayed identification and lifesaving treatment.

But hope remains. According to Judy, "We've seen really positive changes in the past five years. Through the generous support of the Foundation, we designed system-wide behavioral health programs. We are now able to get on the 'right' side of things...the preventative side that increases access, which is critical."

Shattering stereotypes and stigmas requires courage and support. We are grateful to you, our philanthropic partners, who have the courage to invest in a continuum of compassionate care for a better tomorrow.

3 Faces of Behavioral Health


As behavioral health has increasingly come out of the shadows, the need for access to quality care has evolved with a speed and tenacity that has outpaced our ability to effectively treat it. However, it has also outpaced lifesaving care because of society's tendency to reduce or ignore the direct link between behavioral health and physical health.

While behavioral health has many faces, there are three faces that deserve special spotlight. The hope is that we work together to better understand behavioral health so we can improve how we identify, treat, and philanthropically support a continuum of illnesses that impact so many. In doing so, we won't just change behavioral health—we will change healthcare.




Imagine it's after midnight and you're wondering if it will be your phone or doorbell that rings first. One, that call from a loved one letting you know they're safely back home, or the other, the worst kind of news from a uniformed police officer. Or imagine that look on a loved one's face when you know they're lying to you. A dread that they haven't gone to rehab like they're telling you. You know what kind of a beautiful person they are inside but somehow that person is disappearing. This is one of the many faces of substance abuse. A face where the victims are those with addictions as well as their loved ones.

But what if there was someone looking out for you and your loved ones? A person who didn't just point you in a better direction but was there to hold your hand throughout your new journey?

 Substance abuse can simply be defined as a pattern of harmful use of any substance for mood-altering purposes. Many of us cannot help but look for shortcuts as to the causes of this disease, but they often lead to blanket assumptions that rarely serve as solutions. According to Dr. Auvil, "The first step in combatting substance abuse is education. We must recognize that addiction is a disease, not a lapse in character." He continues by saying, "This stigma exists even among some providers and we are working hard to eliminate it."

An estimated **20.8 million people in Hamilton County** suffer from a substance use disorder.¹ Deaths in our county have risen from **113 in 2008 to 444 in 2018**. Ohio is ranked second in the country for overdose deaths. However, there is some positive news: national trends indicate that tobacco, underaged drinking, and alcohol abuse have all been on a slow decline since 2013.² This trend is a good reminder that education, combined with community partnerships, does work.

 What can philanthropy dollars do? Substance abuse is perhaps one of the most underfunded areas of healthcare. As you will see on pages 10 and 11, donors have enabled Good Sam to be a leader in the fight against substance abuse. While we wait for insurance and reimbursement to catch up, philanthropy is the linchpin that is making the difference.

OUTPATIENT MENTAL ILLNESS



Think of the lowest time you've had—a moment when you couldn't imagine the world ever getting right-side up again. Or think of the time you couldn't sleep for days. You paced, you imagined a terrible outcome, and you couldn't shake the thoughts. The hole is dark, cold, and so deep that no light makes its way to you anymore. This is the face of mental illness, of depression and anxiety.



But what if...what if there was someone there to catch you before it was too late? What if you could slowly build back trust, confidence, and were treated with compassion and respect? What if you could feel the floor become firm again and begin to rediscover hope?



Mental illness in an outpatient setting is critical to preventing suicide, hospitalization, or chronic deterioration of the mind, body, and spirit. When you consider the latest statistics—1 in 5 children ages 13-18 have, or will have, a serious mental illness,³ 11% have a mood disorder, and 8% have an anxiety disorder—we quickly realize that mental illness is affecting our most vulnerable population, which is our youth. The early outcomes of this trend can be seen with suicide now climbing to 3rd on the list for leading cause of death for children aged 10-24.

Recent reports from the FDA and CDC indicate that **“Outpatient care represents the largest share of mental health treatment expenditures, and it continues to get larger.”**


According to Dr. Auvil, “The behavioral health system is broken—there is decreased insurance reimbursement, leading to a significant gap in outpatient care. But, when you put boots on the ground, you see changes. At Good Sam we take an integrated approach to provide services across the spectrum. Every day our clinicians are motivated to improve care and remove gaps.”




What can philanthropy dollars do? At Good Sam, our courageous donors have stepped up. According to Judy Mitchell, **“Ongoing donor investment in mental health is a game-changer. It provides the education and support needed to identify and intervene with mental health at an early stage in an outpatient setting and change the entire timeline for patients and their families.”**

7 INPATIENT MENTAL ILLNESS

Consider if everyone you met today was a stranger. Certain strangers seem like someone you might have known—but can't quite place. Another, a middle-aged woman who always calls you "mom," cries, talks to your doctor, and always holds your hand. A nice older man sometimes brings you flowers, looks at pictures with you, and then leaves. You're left behind, in a strange room looking out the window, wondering. This is the face of age-related dementia.

 ***But what if there was someone there who didn't just listen to you, but listened with their eyes and their heart? Someone who made that strange middle-aged woman who called you "mom" smile, that nice older man laugh, and whose hugs now give you a sense of peace?***

 The elderly population (those aged 65 years or older) in the U.S. is expected to double from approximately 35 million today to more than 70 million by 2030.⁴ As we enter into this new era, we have an obligation to impact quality of life. Dementia, Alzheimer's, and other age-related mental health issues put a direct strain on the patient, their families, our health systems, and our communities. This is especially true when such an illness progresses to a point where inpatient treatment is necessary, such as Good Samaritan's Senior Unit. Patients who suffer from these diseases lose their ability to



perform routine tasks, have moods that don't match the situation, experience balance issues and other related physical health problems, forget loved ones, and slowly deteriorate into fragments of their true selves.

A proactive, modern approach to medicine has arrived just in time. An enhanced focus on psychiatric evaluation can prepare the patient and their family, medications can boost levels of a chemical messenger involved in memory, and occupational therapies can make life safer and more rewarding. Dr. Auvil maintains that "Dementia is exacerbated by chronic health problems such as hypertension and diabetes.

A healthy lifestyle and keeping socially connected can decrease hospitalizations, delay progression of the disease, and even prevent it. Neurocognitive diseases are being aided by new research and treatment options. There is so much that must be done and so little time to do it."

 What can philanthropy dollars do? Dr. Auvil best states the impact philanthropy can have. **"It says a lot about the mission, values and character of the people at Good Sam when you consider that many hospitals are decreasing the amount of inpatient beds, and we are choosing the opposite. Philanthropy can support prevention initiatives, medications, therapies, and improve quality of life for our community."**

Be sure to read pages 10 and 11 to learn what philanthropy has accomplished so far and how we can continue to make an impact together.

¹ TriHealth Presentation on Opioid Initiative
² CDC – Centers for Disease Control and Prevention

³ National Institute of Mental Health
⁴ Federal Interagency Forum on Aging Related Statistics

You Make a Difference!

Oftentimes, when we learn more about causes such as behavioral health, we feel overwhelmed by the problem and helpless to affect any change. You may be thinking this after getting to know the countless people behind the 3 faces of behavioral health.

But there is something you can do. As part of our Foundation Family, you understand that we change lives and our community by working together. Below are just a few ways you can join us as we challenge the stigma and give hope to those suffering in silence.

Volunteer With Your Pet



Thanks to generous donors, the Paws for Patients program supports volunteers with dogs who are certified or would like to become certified in pet therapy. Interacting with a friendly pet has positive effects on patients and caregivers alike.

Join the Good Samaritan Hospital Guild



The Guild, an affiliated volunteer organization of the Foundation, is a group of compassionate individuals dedicated to supporting Good Sam. Through their efforts, the Guild distributes approximately \$150,000 annually to support various initiatives. This past year, the Guild made grants to the Behavioral Health Department for bus tokens, a specialized bed, and two geriatric chairs.

Guild Officers Candy Hart, Vice President; Tom Laverty, President; and Pat Stetter, Recording Secretary

Go Digital



Sign up for digital communications on our website at gshfoundation.com. While you're there, check out our videos, cases for support, areas of impact, donor recognition, and more.

Is there another cause close to your heart?

With \$4.2 million in total impact last year, there are many ways to make a difference where it matters most to you.



Contact us today! 513 862 3786 or gshfoundation@trihealth.com



Walking in COURAGE

A brown-haired woman with a warm smile, kind eyes, and gentle voice pops up from behind a computer screen in Good Sam's Day Treatment reception area. "Hi, I'm Elaine," she says. "Welcome, it's so wonderful to have you here."

Although this warm greeting is commonplace from the people at Good Sam, Elaine Ellis's welcome to the outpatient Day Treatment Program is somewhat different. Her words have that extra feeling of gratitude and empathy that can only come from someone who knows the experience of those she is serving.

As a volunteer, former Day Treatment patient, widow, and self-described "functional person with depression and anxiety," Elaine is on a mission to raise awareness about behavioral health. "There is not enough attention in this area," she states. "There is unnecessary judgment and stigma, and it needs to go away. I hope my story will help do that in some way."


Sadly, the beginning of Elaine's story is all too familiar for some. Bill, her husband of 25 years, began complaining of headaches. Elaine brought him to their primary care physician, who ordered an MRI.

The results confirmed their worst fear: Bill had lung cancer, which had also spread to his brain. Elaine's voice wavers when she speaks. "When he got sick, it brought back a lot of turmoil and trauma that I experienced as a child...and I just fell apart." As a young girl, Elaine watched her mother's health deteriorate until her passing when Elaine was just 12 years old, also of a brain tumor. Bill's diagnosis was too much to handle.

Fortunately, Bill and Elaine had access to the psychosocial oncology program at the TriHealth Cancer Institute. Bill began outpatient treatment at TriHealth Kenwood, which is where Elaine met Ann Faber, a clinical social worker who counsels cancer patients and their families. "It's not just a single person who is diagnosed, it's the entire family," says Ann. "I can't take away the fear, the grief, or the anger. What I can do is walk alongside a person who is moving through those emotions, and try to help clear their path." She tears up as she continues, "One of my favorite quotes is from Ram Dass: 'We're all just walking each other home.' That is what I try to do for our patients."

And that is exactly what she did for Elaine throughout the nine months of Bill's outpatient treatment, inpatient treatment at Good Samaritan Hospital, and ultimately his death on Christmas Eve of 2016. Ann continued to work with Elaine after Bill's passing, and eventually urged Elaine to attend the Day Treatment Program at Good Sam. Having previously worked in Good Sam's Behavioral Health Department, Ann knew that the full day, three week program of art therapy, cognitive therapy, and medication management would help Elaine—but only if she had the courage to take that leap.

"I was apprehensive about going, because I was afraid I wouldn't follow through," Elaine recalls. "For me, it took a lot of courage to look beyond my fears and just go ahead and do it. And I'm so glad I did. I feel more confident, stronger, and willing to accept what I cannot change. Bill is gone, and it hurts. It's never going to go away, but it will get better."



“
**I want people
to know this is
an illness just
like any other,
and that they can
talk about it and
ask for help.”**

– Elaine Ellis

When Ann thinks of Elaine, she immediately thinks of courage. "Facing emotion and pain requires so much courage. As people, we often work so hard not to feel things. Elaine had tremendous courage because her grief process was also connected to previous losses—and she was willing to look at it, struggle with it, and move forward with it." Ann is grateful to TriHealth for providing a holistic model of care and understanding that we cannot separate the body from our emotions in order to truly heal.

For the past year, Elaine has volunteered two days per week in the Day Treatment Program providing receptionist and office support. She smiles as she says, "It is a way for me to see that I am not alone, and a very special way to give back." When asked what she wants people to know about behavioral health and mental illness, Elaine is steadfast: "I want people to know this is an illness just like any other, and that they can talk about it and ask for help." Now, in her own way, Elaine is helping walk others home, as Ann continues to do for her.

In healthcare philanthropy, we often focus on the tangible cures and outcomes as the measures of our impact. These are important, but so too are those that are difficult to measure. As Elaine shows us, the immeasurable acts are perhaps the most courageous of all.

PHILANTHROPY'S IMPACT

"The last 5 years have really been the turning point in terms of access to care and improved outcomes...and philanthropy was the catalyst," says Judy Mitchell. **In that time, donors have generously invested \$1,025,718 in Behavioral Health Services at Good Sam.**

Each of these dollars has made a difference not only in someone's life today, but also in creating the infrastructure for sustainable, effective care into the future.

\$517,800: Good Samaritan Hospital Opioid Pilot Program

2018 Gala Beneficiary
\$346,500

Foundation Board of Trustees 2018 Spending Policy
\$171,300

Foundation donors were the primary funder of this program, the first major initiative of the TriHealth Opioid Task Force. The program is a pioneer for TriHealth and the region, with accomplishments in four major areas:

Prevention

- **Narcan**, a medication used to reverse an overdose, is now available in all TriHealth Emergency Departments.
- **Provided** education to all Good Sam nurses, Pharmacy, and Emergency Department team members.

Screening and Treatment

- **Hired** a Substance Use Treatment Coordinator (SUTC) fully dedicated to screening patients and connecting them to treatment, regardless of where they are receiving services throughout Good Sam. In 2018, the SUTC saw **1,145 patients** and successfully engaged 65% of them in treatment within 24 hours.
- **Implemented** Medication Assisted Treatment at Good Samaritan Hospital.



Guy Vollrath, Substance Use Treatment Coordinator, seated next to thank you notes from his patients who entered treatment.

Community Partnerships

The Behavioral Health leadership team has created partnerships with treatment centers and policy/advocacy groups, participating in community-wide efforts to combat the epidemic.



Nicole Crump, Nurse Manager, Adult and Senior Behavioral Health Units

Team Member Support and Education

- **3,500 nurses** were trained on the Opioid Crisis and Substance Use Disorders (SUDs), including the benefits of Medication Assisted Treatment and addiction as a brain disease.
- **Training** provided team members with tools to recognize SUDs and make referrals to the Substance Use Treatment Coordinator.

Dr. Dallas Auvil couldn't agree more. "These illnesses are treatable, and treatment has impact. It saves lives, reduces suffering, and brings people hope. As an investment, donations not only save lives now, but also are saving lives in the future."

Insurance and payment models have not yet broken through the stereotypes, which makes each gift an act of courage. Thank you to all of the courageous individuals who have made these accomplishments possible.

\$507,918: Comprehensive Behavioral Health Care

Corporations	Foundations	Individuals
\$250,055	\$202,650	\$55,213

- **Provided** support for the **1,477** people served in Good Sam's three Behavioral Health Units as well as physical renovations.
 - **Two inpatient units** that serve the adult and senior populations. The robust, interdisciplinary treatment team consists of psychiatrists, nurses, social workers, occupational therapists, therapeutic recreation specialists, and art therapists.
 - **Day Treatment Program**, a partial hospital program serving adults as a transition from inpatient care or serving as an alternative to inpatient care.
- **Assistance** to more than **130** patients in FY19 for prescriptions and other medical-related needs, as well as transportation so they can adhere to their treatment plans.



Members of the Behavioral Health Team: Michael Grossi, Supervisor of Social Work and Intake; Judy Mitchell; Nicole Crump; Pam Larkins, Clinical Nurse Leader; Ismail Badran, MD, Medical Director of Alcohol and Drug Treatment Program and Inpatient Psychiatrist; Ken Barker, Occupational, Recreational, and Art Therapy Supervisor; Steven Winans, Assistant Nurse Manager, Inpatient Behavioral Health; and Paul Scherer, Day Treatment Program Supervisor

“...treatment has impact. It saves lives, reduces suffering, and brings people hope. As an investment, donations not only save lives now, but also are saving lives in the future.”

Much has been accomplished, but much work remains.

Contact us at 513 862 3786 or gshfoundation@trihealth.com to learn how you can help us move into the future to expand access to compassionate care and evidence-based treatment that changes lives.

Your Philanthropy Update

The Good Samaritans

The impact keeps growing! In April, The Good Samaritans and their guests celebrated the success of the 2019 Gala at the Queen City Club. Chair Joyce Lehmann and Co-Chair Melody Weil made the following check presentations:



\$303,000

TriHealth Cancer Institute
Personalized Medicine Program



\$107,000

Good Samaritan Free Health Center



\$35,000

Medical Education Research Fund



2020 Gala Chair Pam Rossmann with Co-Chair Angie Conners

With a 35 year total of **\$9.3** million raised to improve the health of our community, The Good Samaritans show no signs of slowing down. Save the date for the 2020 Gala, which will take place on February 8 at the Hyatt Regency, downtown Cincinnati. Join Chair Pam Rossmann and Co-Chair Angie Conners for Roaring into the Twenties! Proceeds will benefit the TriHealth Neuroscience Institute at Good Samaritan Hospital.



Event information and registration available
at gshfoundation.com/gala.

Honoring our Heroes: Doctors' Day 2019



National Doctors' Day

In celebration of National Doctors' Day on March 30, donors recognized more than 185 Good Samaritan and TriHealth physicians by making a gift in their honor. These grateful patients and families also shared notes of thanks expressing how the physicians have impacted their lives. The Foundation delivered the notes, along with a special acknowledgement pin, to the honored physicians.

For the full list of honorees, please visit the Doctors' Day page on gshfoundation.com under Ways to Give.

Is there a doctor you would like to recognize? Check our website and your email in the coming months for information on Doctors' Day 2020! Or, you can recognize a caregiver anytime throughout the year through the Grateful Patients and Families Program.

Your Philanthropy Update

Good Samaritan College Scholarship Reception

Investing in students means investing in our collective future. This academic year, we are thrilled to share that our generous family of donors are providing more than \$230,000 in scholarships to 120 students, their families, and countless people they will care for in the future.



120
students



More than
\$230,000
in scholarships



For the full list of scholarships and recipients, as well as event photos, visit gshfoundation.com and click on Donor Recognition.



Scholarship donor Judith Johnson
and recipient Kaylie Panko

“ I am honored to be a scholarship recipient. Your generous support is helping me to fulfill my dream of becoming a nurse and dedicating my work to helping others. ”

-Kaylie Panko,
Andrew Bowling Memorial
Scholarship Recipient

Tribute Gifts

Thank you to those who made gifts in honor or memory of someone special. Please visit gshfoundation.com and click on Donor Recognition to see the most recent Tribute Gifts.

Sneak Peek!

The TriHealth Neuroscience Institute is pioneering the future of stroke and neurological care. Want to learn how? Stay tuned for our Spring 2020 issue.

If you do not wish to receive future issues of Compassionate Giving magazine or other communications from Good Samaritan Foundation, you may opt out by calling 513 862 3786 or emailing gshfoundation@trihealth.com.

Two Powerful Words

THANK YOU

“Thank you.” These two words have a big impact! The Grateful Patients and Families Program gives patients and their loved ones the opportunity to support Good Samaritan Hospital while saying “thank you” to caregivers who made a difference during their stay. Your gratitude and generosity is felt by each recipient and makes a difference to the patients we serve. Please take the time to show your appreciation by making a gift in honor of a physician, nurse, or team member who has shown compassion and provided quality, competent care.

To honor your caregiver and share your story, visit the Grateful Patients and Families page on gshfoundation.com.

More Than a Diagnosis

Words unspoken, as I lay here broken
Looker a little closer, will you please
See me, not my disease
Open my book cover, explore what's inside
You just might uncover an amazing surprise
I am that diamond in the rough
The eye of the tiger when challenges are tough
The reflection in your eyes is sometimes unkind
Judge me not as our interactions intertwine
I am not contagious, nor am I blind
I am intelligent, I am kind
Look a little closer, will you please
See me, I am not my disease

By: Dr. Pamela Larkins, DNP, RN, CNL

