

**CENTRE
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Marc P. Volavka, PHC4 Executive Director
Pennsylvania Health Care Cost Containment Council
Suite 400, 225 Market Street
Harrisburg, PA 17101

October 15, 2003

Dear Mr. Volavka:

Thank you for the opportunity to comment on the Hospital Performance Report. We at Centre Community Hospital support the use of reports, such as the Hospital Performance Report, in identifying potential opportunities for improvement. We use the same data to create similar reports on a regular basis throughout the year as one part of our internal Performance Improvement process.

Overall, our hospital compares favorably with other hospitals, however we would like to comment on one variance. Diagnosis Related Group (DRG) 403, Lymphoma and Non-Acute Leukemia, Complicated, shows a mortality rate greater than expected.

Of the nine patients in this DRG who died between October 1, 2001 to September 30, 2002, six had a Do Not Resuscitate (DNR) status designated. DNR means that measures such as cardiopulmonary resuscitation, and mechanical breathing support will not be used if the patient stops breathing or his heart stops beating. DNR status is determined through discussion with the patient or family, and in consideration of the patient's previous wishes as expressed in an advance directive. The majority were over age 80 and had several other illnesses.

Even with these findings, we reviewed each individual patient's medical record to look for opportunities for improvement. We believe that these deaths were not unexpected, given the severity of the patients' illnesses and the expressed wishes of the patients and family.

We welcome information that helps us improve our care to our patients and we thank the Council for providing regular comparative reports.

Sincerely,

Thomas J. Murrey, FACHE
President and Chief Executive Officer
Centre Community Hospital

affiliated by



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