A routine drive to work at Cameron International's turbocharger repair shop in Salina on the morning of October 28, 2010, was unfolding like any other day for Don Griest of Minneapolis. He had checked in with his wife Roberta about half way to work as he often does when they drive to town separately. He’d promised to let her know when he had made the trip safely. But, Don never got the chance to make that call.

Just after crossing the I-70 interchange while driving south on I-135, Don’s truck veered to the right going through a ditch, hitting a fence and post before crashing to a stop against a tree. Authorities estimated his speed between 60 and 70 miles per hour, but Don remembers nothing about the accident. Doctors would later guess that he had suffered a seizure – a relapse from a disorder that had been controlled for nearly 20 years.

“I don’t remember anything about the accident, or going to the hospital or the only helicopter flight I’ve ever been on,” Don said. “I don’t have any memories until I woke up in a hospital bed weeks later.”

Salina EMS responded to the call and once on scene found Don kneeling outside his truck. They quickly recognized he had suffered a head injury with possible other internal injuries and sent out a trauma call to emergency workers at Salina Regional Health Center.

A new level of trauma care

Salina Regional had implemented a new level of response for traumatically injured patients only months earlier. A specially designated team of professionals with highly defined roles now stands...Continued Inside
by on call around the clock to report to the emergency department whenever a trauma call is received.

When the call came in a cascade of alerts went out to notify the team of Don’s pending arrival. Members include a trauma surgeon, emergency department physician, trauma control nurse, intensive care nurse, surgical nurse and staff from radiology, laboratory, blood bank, respiratory care, security and chaplaincy.

Chest X-rays quickly revealed both of Don’s lungs were collapsed and he was sedated and intubated and chest tubes were placed to gain control of his breathing. CT scans of the head, abdomen and pelvis also showed other critical injuries. Don suffered a bleed in his brain and a torn aorta.

Doctors gave Don blood and used medicine to stabilize his blood pressure so that he could be safely flown by helicopter to a Level I trauma center in Wichita.

A state-wide initiative
Salina Regional implemented specialized trauma care in effort to earn a Level III trauma verification from the American College of Surgeons and join a state-wide effort to have at least a Level III trauma center in each geographical region of the state.

While there are Level I trauma centers available in Kansas City and Wichita and Level II trauma centers in other largely populated communities, there is only one currently verified trauma center west of a line from Topeka to Wichita.

The main difference between levels of trauma care is the type of services available. Level I and Level II trauma centers offer a complete line of services including 24/7 neurosurgery. While Salina Regional does offer neurosurgery, it’s not available 24/7.

“Our efforts are to become part of a state-wide trauma system, improve access to trauma care in north central Kansas and save lives,” said Jake Breeding, M.D., director of Salina Regional’s trauma service. “Patients needing a higher level of care will still be stabilized and transferred.”

A miracle recovery
Once Don’s brain bleed stabilized doctors in Wichita used a stent to repair his torn aorta. He spent nearly a month there in recovery and rehab to gain independence from a ventilator. Then he was transferred back to the inpatient rehabilitation unit at his hometown hospital in Minneapolis. There he spent a couple more weeks gaining his strength and stamina and finally returned home on December 9. He continued outpatient physical therapy in Minneapolis, and his determination and the support of his wife, family, friends and co-workers helped him make nearly a complete recovery.

“I had a lot of people praying for me,” Don said. “You don’t realize how much the support of others gets you through things like this mentally.”

He still has numbness in two fingers on his left hand and some control deficit with his left wrist and slight balance issues from time to time, but those things may still heal.

Don’s determination, and stubbornness as Roberta may call it, shown through when he made his first outing after returning home. With Christmas just around the corner, Don utilized a Minneapolis bus service to go to a Salina jewelry store to buy his wife a necklace.

“I don’t think that was doctor approved,” Roberta said. “He was supposed to be home taking it easy. But that’s just the kind of caring guy he is.”

Don went back to work in February enjoying his job as a turbocharger inspector. Since that time he and his wife have stopped to walk through the scene of his accident – a spot they pass every day on their way to work. He’s also seen pictures of his truck after the incident.

“It’s hard to believe anyone could ever live through it,” Don humbly admits. “There’s a lot of people I need to thank, from EMS to the doctors and staff in Salina and Wichita to the rehab folks here at home.

“Having teams ready and standing by to take care of cases like this is incredible. I’m sure it’s going to save lives – even more than in the past.”
Hospital partnership with KU brings medical school to Salina

A critical shortage of physicians serving rural communities around the state has helped forge a unique partnership between Salina Regional Health Center and the University of Kansas School of Medicine. This fall KU will open a four-year satellite campus in Salina accepting its first class of eight students.

Medical students in Salina will be able to link up with their peers in Kansas City via interactive television and podcasts and many of the curriculum’s laboratory components will be supported by web-based systems.

The hope is that many students will see the advantages of living life in a smaller community while in school and ultimately many will choose to one day practice in a rural, underserved area of the state.

With more than 100 students enrolled per class at the KU-Kansas City campus, the Salina school will offer a unique opportunity for students.

“The smaller class size will begin to teach how important teamwork is at an earlier stage than we’re able to provide in Kansas City,” said Heidi Chumley, senior associate dean for medical education at KU. “It will also be much easier to monitor each student’s progress in their education and there will be more opportunities to learn live anatomy. For example, after a lecture on blood flow to the heart, students might be able to go over to the cath lab at the hospital to see it live. We’re not currently able to do that with our larger class sizes in Kansas City.”

Salina Regional administration and Board of Trustees have authorized a $1 million investment over a 4-year period to help defray initial faculty and operating costs and also have spent several hundred thousand dollars to renovate the Braddock Building, which will house the program rent-free for as long as the program exists. The Salina Regional Health Foundation has also pledged $225,000 over four years to help the school become established, is offering scholarship support for students and has set up an endowment to give additional scholarship support in the future.

“We are investing significantly to create a model that has never been done before in rural Kansas,” said Mike Terry, CEO of Salina Regional Health Center. “We feel this project has the potential to become a model for other rural areas around the country.”

Becoming affiliated with an educational institution also raises the bar to improve quality patient care and quickly adapt to more advanced practice systems as they become available. That in turn helps support the professional development of current medical staff and will likely attract new talent in the form of ancillary health care professionals and physicians who want to practice on the leading edge of medicine.

“I believe having KU Medical School in Salina will affect health care for all of north central Kansas,” Terry said. “It will be a major recruiting tool for everyone.”

United Way giving unparalleled in the community

Salina Regional employees and volunteers, with the incentive of Foundation matching funds, once again led community giving for the annual Salina Area United Way campaign in 2010. Employees and volunteers raised $62,389.71 through payroll deduction and cash gifts coupled with 50 percent matching funds from the Community Health Investment Program to make a total gift of $93,584.57.

The hospital gift made up nearly 10 percent of the funds raised by the campaign.

“Once again we are grateful for the leadership shown by the hospital employees and the Foundation,” says Andy Martin, executive director of the Salina Area United Way. “Their support and advocacy is unparalleled in the Salina area and their efforts make Salina a better community.”
CHIP supports initiatives to improve youth development

Each year Salina Regional Health Center tithes a portion of its operating margin to the Salina Regional Health Foundation's Community Health Investment Program (CHIP). The Foundation in turn offers grants to a wide range of initiatives that impact youth development.

In 2010 Salina Regional tithed 10 percent of its operating margin to CHIP, which awarded 14 grants for a total of $734,709.

One grant gave $100,000 to the Greater Salina Community Foundation, which acts as fiscal agent for four community foundations in the region that are participating in the Kansas Health Foundation Grow II initiative. Grow II offers a 50 percent match to endow gifts to public health. As participants in the program, Smith, Cloud, Republic and Dickinson counties each received $25,000 from CHIP and then an additional $12,500 from Grow II to establish public health endowments for their respective communities.

A $18,784 grant to the Saline County Sheriff’s Department allowed it to purchase a driving cart that simulates the effects of alcohol or drugs on a motorist’s driving skills. Officers use the cart for demonstrations at area schools, fairs and youth activities to teach the dangers of driving while impaired.

Another grant gave $10,000 to the Bennington Link Club for a climbing apparatus at a new playground constructed at the Bennington Grade School/Bennington Junior High School. The school had gone three years without a playground after new construction required the previous one to be removed.

Employees build Habitat for Humanity House to assist co-worker

Salina Regional employees are renowned for stepping forward to assist with all types of community projects. You see them working at local events, health fairs, serving on community boards and donating their time, talent and resources to help those in need.

So, when Michelle Bunch, a food services worker at Salina Regional, learned that she had qualified for a new house through Habitat for Humanity, it was only natural for them to trade in their syringes and stethoscopes for tool belts and ladders.

To assist in making the project come together quickly hospital administrators worked out a policy to allow employees to receive their regular pay for the hours they worked on the house.

Stacie Maes, executive assistant, coordinated the staffing needs for the project to ensure that full staffing needs were met at the hospital, while at the same time making sure there were enough workers at the construction site. In all 1,525 employee hours went into the project, helping to complete the home in just under two months.

“The work was often hard, strenuous, dirty and frustrating, but it was also great fun and extremely rewarding,” Maes said.

“IT’s all about touching lives and seeing people smile.”

Bunch moved into her new home with her three children in November overwhelmed with the response she received in helping build it.

“It was amazing to me how so many people came together to help me,” she said. “Many didn’t even know me, but they wanted to help. It wasn’t something they had to do. They were all just happy to be there.”
Providing not-for-profit care

As a 501(c)(3) not-for-profit organization Salina Regional Health Center is held in trust to benefit the community. Salina Regional has an obligation to provide vital services to the north central Kansas region. Our focus is on increasing access to quality health care services and adding value to the area.

Electronic medical records enhance patient care

Salina Regional Health Center was recently recognized for achieving Stage 6 Electronic Medical Record Adoption from the national Health Information Management Systems Society. The designation places SRHC in the top 4.2 percent of hospitals of any size nationally for utilization of computer information systems to help streamline and improve patient care.

Since investing nearly $4.1 million in software and hardware to launch the MEDITECH system in 2007, Salina Regional has reduced its overall operating costs by 1.6 percent allowing the organization to pursue other cutting edge medical advancements.

Today, almost every aspect of patient care is chronicled with computer technology to reduce redundancies and allow for a real-time view of a patient’s recovery. Everything from emergency department care, lab and x-ray findings to bedside verification utilizing bar code readers and physician documentation is captured by the system and accessible to clinicians wherever they need to access it. This helps reduce medical errors, enhances the decision making process and helps ensure patients receive the education they need about their specific conditions.

“We didn’t implement this system to achieve Stage 6 recognition,” said Larry Barnes, chief information officer at Salina Regional. “We did this for the benefit

Nurses enter information into an electronic chart that gives clinicians real-time information about a patient’s progress that is easily accessible.

of our patients by supporting clinicians to enhance the patient care process. It’s taken support from all of the departments and physicians to achieve the level of integration we have today.”
If it’s true that children hold our future, then the future of Salina and surrounding communities surely stands to be brighter with the addition of the new Donna L. Vanier Children’s Center.

In October 2009 the Salina Regional Health Foundation announced the $6 million project with a groundbreaking ceremony and kick-off of the “Every Child Matters” capital campaign for the facility, which will become the new home for three separate, but interrelated children’s programs.

Child Advocacy and Parenting Services (CAPS), Salina Child Care Association and Salina Regional Health Center’s Infant-Child Development Program will all be housed under the same roof serving thousands of families each year in the Salina and immediate region.

CAPS provides a variety of education programs and services designed to strengthen families and quality of life for children, including Chris’s Place for child abuse victims. Salina Child Care provides quality child care for children ages 2 weeks to 5 years, many of whom live at or near the poverty level. Infant-Child Development serves children from birth to 3 years of age who have developmental delays or disabilities.

The entire project aims to improve early childhood learning and development for children at critical times during their life. Research shows that 90 percent of brain development occurs during a child’s first three years.

The facility will bear the name of Donna Vanier, a longtime community volunteer who has had a lifetime commitment of service to helping children, the community hospital and other charitable causes. She served on the Asbury-Salina Regional Health Foundation board of trustees for nine years and was chair of the Foundation Board when the concept of a children’s center first originated.

A lead gift from Jack and Donna Vanier, commitments from the Foundation and its Community Health Investment Program, a donation of land from the hospital and an $800,000 challenge grant from the J.E. and L.E. Mabee Foundation of Tulsa, Okla., helped jump-start the fundraising efforts for the project. Salina Regional employees and volunteers pledged more than $91,000 through cash gifts and payroll deductions and the Salina Regional Service Auxiliary made a $100,000 commitment.

Outside participation in the project included individuals, businesses, churches, foundations and others. Children even helped by hosting lemonade stands throughout the community. By September 2010 the Foundation announced it had reached and even exceeded its $6 million campaign goal.

“Once again our community has shown its generosity,” said Dave Sellers, Foundation board chair at the time of the announcement. “This is what makes our community special. We come together to help others.”

Actual construction for the project began last fall. The single-story, 27,000-square-foot facility will be located at 155 N. Oakdale with completion scheduled for late 2011.

“We’ve been in tiny quarters donated to us for 30 years,” says Carolee Jones, executive director of CAPS. “To have offices of this nature, in a setting where we can provide services more seamlessly with the Salina Child Care Association and Infant-Child Development will be a dream we’ve all longed for.”

“This has been a dream of our Association’s for years,” adds Elaine Edwards, executive director of the Salina Child Care Association. “Some of our parents have struggled dropping off different aged kids at different places. Now much of that strain will be alleviated. It’s nice to know there’s so much support for projects like this in the community.”