

HEALTH BEAT

YOUR GUIDE TO HEALTHY LIVING

SPRING 2009



10

WAYS SRHC
SUPPORTS
OUR COMMUNITY

PAGE 10

**SPIDER
VEINS?**

GET A FREE
CONSULTATION

PAGE 9

HOW **5 BEHAVIORS**
AFFECT YOUR CHANCES
OF GETTING CANCER PAGE 6

RISKY BUSINESS

BATTLING CANCER IS LIKE WAR.

You fight to win—and live.



Larry Henoch and wife Pam



Larry Henoch never thought it would happen to him.

But it did. With his strong allies—Salina Regional, the Tammy Walker Cancer Center and his family and friends—Larry began the fight for his life.

First, he had aggressive chemotherapy. Then leading-edge IMRT radiation therapy targeted the exact shape of his tumor and bombed it. Larry's army helped him win his war.

Don't go into battle alone. Rely on your allies at Salina Regional and the Tammy Walker Cancer Center.



Confidence for the Good Life

Tammy Walker
CANCER CENTER

www.srhc.com/services/cancer

Why Community Benefit?



This issue of *Health Beat* includes the Salina Regional Health Center annual report on community benefit. Why have we published such a report for the past few years?

At Salina Regional Health Center, we consider the counties of the Sunflower Health Network to be a part of the community we serve. The assets of Salina Regional are here for the purpose of serving the healthcare needs of this community. Because Salina Regional is not owned by private investors, its profits are not distributed as dividends to stockholders. Instead, they are reinvested in the organization to develop new programs, construct new facilities and acquire lifesaving technologies.

Additionally, unlike the vast majority of hospitals across the U.S., Salina Regional goes a step beyond the typical concept of community benefit. Since 1994, the hospital has invested a portion of its financial bottom line in the regional community by making a significant annual contribution to the Community Health Investment Program (CHIP) of the Salina Regional Health Foundation. The Foundation is separate from and not controlled by Salina Regional Health Center. It uses CHIP funds to support numerous health-improvement programs in north central Kansas, such as a school wellness initiative in Lindsborg, better child care services in Salina and development of a dental clinic in Minneapolis.

I hope our community benefit report gives you a better understanding of *why* we focus on the regional community. As a citizen of north central Kansas and a member of the CHIP committee, I see every day the investments that Salina Regional Health Center has made to improve community health. And I am proud to be involved in the effort.

Charlie Grimwood
Vice President, Regional Development

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FEATURES

6 WHAT ARE THE CHANCES?

Find out just how risky certain behaviors are when it comes to developing cancer.

8 A SCREENING SUCCESS

Everett Boyle took part in a free abdominal aortic aneurysm screening that may have saved his life. Should you?

10 COMMUNITY BENEFIT REPORT

Our annual report on how Salina Regional Health Center gives back to the regional community.

DEPARTMENTS

4 HEALTHY HAPPENINGS

15 SUNFLOWER HEALTH NETWORK NEWS



PLATELET CENTER ASTOUNDED BY SUPPORT

American Red Cross officials have been more than pleased with the success of the W.H. and Helen M. Graves Blood Platelet Center since it opened in 2007. Through the facility's first fiscal year, 1,061 productive donors contributed 1,552 platelet products, which helped the center meet 98 percent of an aggressive campaign goal. Through the first quarter of 2009, the center is already running at 107 percent of its budgeted goal.

"These numbers are astounding," says Janice Struble, director of Salina Regional's laboratory. "Salina has really embraced this project and made it a success."

"The success of the Salina center is allowing us to use our donor base much better," says David Young, with the American Red Cross in Wichita. "It's allowing donors to increase the time that goes by between donations."

Employee-Led United Way Campaign Surpasses Goal

Salina Regional Health Center employees set out to raise \$60,000 for the annual giving campaign to the Salina Area United Way. During a down economic time, that seems like a daunting task. Yet a well-coordinated effort and an extra incentive from the Salina Regional Health Foundation helped bring support to record levels. Hospital employees raised \$75,257 through payroll deductions and cash gifts. A 50 percent matching challenge grant from the Foundation



SRHC Live United employee ambassadors prepare to kick off the annual giving campaign.

brought the total to an impressive \$112,885. It was the highest employee-led contribution made to the campaign this year.

"I think people realized their dollars would go further with the Foundation match," says Mike Mattek, one of the campaign coordinators. "We had 55 ambassadors covering various departments. Having that peer-to-peer connection to get the pledge cards turned in made a big difference."

Continued Success Depends on You

Now in its second year of operation, the Blood Platelet Center is enjoying great success, but is always looking for new donors. Call the American Red Cross to schedule a donation toll-free at **866-206-0694**.

Dates to Keep

SALINA REGIONAL HEALTH CENTER COMMUNITY CPR CLASSES

Friends and Family CPR

- + \$15
- + Adult, child and infant CPR. Basic class for people who want information, but don't want to have to pass a test or skill check.
- + July 7, 6:30 p.m.

Heartsaver CPR

- + \$20
- + Teaches adult, child and infant CPR and choking. No written test. Must pass skill check to receive card.
- + April 21, 6:30 p.m.
- + June 8, 6:30 p.m.
- + Aug. 18, 6:30 p.m.
- + Dec. 15, 6:30 p.m.

EMPLOYEES HELP SANTA SPREAD HOLIDAY CHEER

Salina Regional Health Center employees sponsored 31 less-fortunate families this holiday season—helping to make sure there were Christmas presents under the tree and special meals on the table. Heartland Programs and hospital employees identified the families assisted.

In all, 112 people, including 77 children, received gifts with the help of the Santa Helpers program.

Each year, a majority of Salina Regional's departments participate in the program, which anonymously matches them with families in need.



SRHC staff load out presents to be delivered to area families who sought assistance through the Santa Helpers program.

1/3 One medium tomato provides about 1/3 of your daily recommendation of vitamin C.

Each American eats more than 16 pounds of fresh tomatoes a year.

16 LB

Eating 10 or more servings of tomato products a week may reduce prostate cancer risk by 34 percent.

10



Source: American Dietetic Association

Get Certified in CPR



Each year, an estimated 250,000 Americans die from cardiac arrest before they even reach a hospital. Because 78 to 80 percent of all cardiac arrests occur in the home, learning cardiopulmonary resuscitation (CPR) could literally mean the difference between life and death for a friend or a loved one.

Salina Regional Health Center offers CPR certification training to the general public. (See schedule under "Dates to Keep" on this page.) Participants receive credentials after successfully completing the written examination and skills demonstrations.

BE A LIFESAVER

- ➔ All classes are held in the Braddock Building Recreation Room (basement) behind the hospital at the corner of 7th and South Streets. Preregistration is required. Call **785-452-7600** for more information or to register.

BY JILL SCHILDHOUSE
PHOTOGRAPHY BY
JEFF NEWTON

what are the CHANCES?

Smoking, tanning, grilling
your food—find out just
how risky these behaviors
are when it comes to cancer

As a child, you probably heard sayings that made you think twice before engaging in an activity: Step on a crack, break your mother's back. If you make a funny face, it will stick that way. Swallow your gum and it will sit in your stomach for seven years.

No matter how silly these statements sounded, you believed your parent/friend/sibling/teacher—until you slipped up one time and realized there were no dire consequences.

But what about all the health news we hear today? It's hard to know what to believe. And it seems the stakes are higher in throwing caution to the wind, especially when it comes to cancer.

Let's explore some common behaviors, and determine which ones are most closely tied to cancer.

BEHAVIOR: **EATING GRILLED FOOD**

RISK LEVEL:



REASON: “While grilling meats at high temperatures creates compounds that have been shown to increase cancer risk in animals, it's not clear the extent to which they do in humans,” says Colleen Doyle, M.S., R.D., director of nutrition and physical activity for the American Cancer Society.

“Some studies do suggest that people who eat a lot of grilled meats have higher rates of stomach, pancreatic, colorectal and breast cancer.”

RECOMMENDATION: While the American Cancer Society doesn't discourage grilling, it does offer the following tips:

- Clean your grill often to remove charred debris.
- Don't burn meats. If you do, don't eat those areas.

■ Precook meats in the microwave or oven so they don't need to be on the grill for very long.

Doyle also suggests cutting back on red meats in favor of seafood and poultry, as eating red meat has been shown to increase the risk of prostate and colon cancer.

BEHAVIOR:
SMOKING

RISK LEVEL:



REASON: "Smoking is the leading cause of preventable death worldwide," says Ted S. Gansler, M.D., director of medical content for the American Cancer Society. "It's responsible for one in five deaths in the U.S., 30 percent of all cancer deaths and 87 percent of all lung cancer deaths."

But you're not necessarily in the clear if you aren't a smoker. "Each year, about 3,000 non-smoking adults die of lung cancer due to the effects of secondhand smoke," Gansler warns.

RECOMMENDATION: If you're a smoker, now is the time to quit, as there are many tools to help you succeed. "Ask your physician for help," Gansler suggests. "Get medication and support. Only a small percentage of people are successful in quitting on their first attempt. So be persistent; it may take several attempts."

If you live with a smoker, ask him or her to smoke outside and never near children. Most hotels and restaurants offer smoke-free options.

BEHAVIOR:
USING TANNING BEDS

RISK LEVEL:



REASON: Studies show that people who use indoor tanning beds have a 17 percent increase in developing melanoma (the most serious form of skin cancer) than those who don't, Gansler says. "And if you start using tanning beds before age 35, you face a 75 percent increased risk of melanoma."

RECOMMENDATION: "Whatever color you are, that's the color you're supposed to be," Gansler says. "Don't do something dangerous to change your appearance." He suggests avoiding indoor tanning facilities. "And when outside, wear sunscreen [with an SPF of 15 or greater], sunglasses and a wide-brimmed hat to avoid exposure to the sun's damaging ultraviolet rays."

BEHAVIOR:
USING ANTIPERSPIRANT

RISK LEVEL:



REASON: There are no strong studies reporting a statistical link between cancer risk and antiperspirant use, according to the American Cancer Society. "This myth began because people thought deodorant blocked the body's ability to eliminate toxins via perspiration ... and the toxins backed up into the armpit and caused cancer," Gansler says. "This is not true. In fact, a study that compared 813 women with breast cancer and 793 women without the disease found no relationship between breast cancer risk and antiperspirant use, deodorant use or underarm shaving."

RECOMMENDATION: Gansler maintains that the risk, if any, for the average person is low. But if you have specific concerns, many health food stores sell natural alternatives.

BEHAVIOR:
BEING OVERWEIGHT

RISK LEVEL:

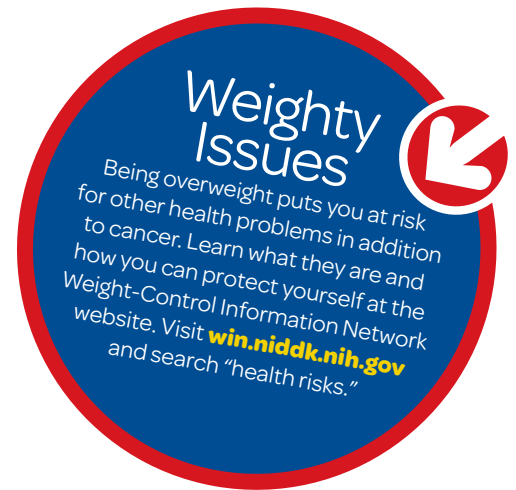


REASON: "If you don't smoke, weight is the next most important risk factor for cancer," Doyle says. "But you can eat healthy and exercise and still be overweight."

Doyle explains that a body mass index (BMI) of 25 or higher increases your risk for a variety of cancers, including breast cancer and colon cancer. "Current patterns of overweight and obesity in the United States could account for up to 14 percent of cancer deaths in men and 20 percent in women, and contribute to 90,000 cancer deaths each year," she says.

RECOMMENDATION: Doyle suggests calculating your BMI (visit nhlbisupport.com/bmi), and taking action if it's 25 or higher. "Reducing your weight by just 5 to 10 percent equates to good health benefits," she says. "You can do this by watching your portion sizes, getting 30 minutes of exercise five or more days per week and eating more fruits and vegetables to help fill you up." 🍌

36%
Percentage of adults who, according to an American Cancer Society survey, believe they have little or no control over reducing their personal risk of developing cancer.



TESTING 1, 2, 3

One of the riskiest behaviors for cancer is skipping screenings, says Ted S. Gansler, M.D., director of medical content for the American Cancer Society. "It's extremely important to find cancer early enough for it to be easily treatable."

Use this guide to make sure you're up-to-date on your cancer screenings. Be sure to discuss your health and family history with your doctor, as this may affect the frequency of your screenings and the age at which you start.

SCREENING	FREQUENCY
Pap test	Annually, three years after having intercourse or by age 21
Clinical breast exam	Every three years during 20s and 30s, annually after 40
Mammogram	Annually, after age 40
Colonoscopy	Beginning at age 50 and then every 10 years for average-risk individuals
Prostate exam	At age 50 (45 for black men), and then at doctor's recommendation based on health and family history

Source: American Cancer Society

Everett Boyle
took part in a **free
abdominal aortic
aneurysm screening**
that may have
saved his life

A SCREENING SUCCESS



BY JOHN BERGGREN




*John Kelemen, M.D.,
Salina Regional's Chief
Cardiovascular and
Thoracic Surgeon*

Everett Boyle, of Salina, has been more conscious about his health since having a heart attack and quadruple bypass surgery 11 years ago. The 71-year-old has been a loyal participant in Salina Regional Health Center's cardiac rehab program all these years—working out under the supervision of nurses a couple of times a week. He often takes walks outdoors on his own when the weather is nice. Heart disease just happens to run in his family.

So, when his wife, Dorothy, saw an ad in October for a free abdominal aortic aneurysm (AAA) screening at Salina Regional's outpatient imaging center with consultation from John Kelemen, M.D., Salina Regional's chief cardiovascular and thoracic surgeon, it made sense to try to be a part of it. The clinic was offered in cooperation with United Radiology Group.

A SIMPLE TEST

An AAA is an enlargement or bulge in the descending aorta that can burst, causing internal bleeding that is often fatal. People at greatest risk include



Everett Boyle was quickly back to his regular workouts through Salina Regional's cardiac rehabilitation program after undergoing endovascular surgical repair for an abdominal aortic aneurysm.

past and present smokers, those with high blood pressure or a family history of AAA, and men age 65 and older.

To screen for the disease, a technologist using ultrasound places a wand on the abdomen to visualize the descending aorta and takes measurements at key places. The presence of a bulge in the aorta indicates a weak area that could rupture.

"It's a relatively simple test that doesn't subject a patient to X-rays or any risk, but can accurately tell us if something is wrong," says Arnold Cabrera, M.D., a Salina Regional radiologist.

On the day of the screening, Boyle remembers how simple the test seemed.

"People ahead of me were in and out in just a few seconds," Boyle says. "Then when it was my turn, they kept looking and looking ... and I knew it wasn't good."

What doctors saw made them suspicious of an AAA. Additional testing immediately ordered at the hospital confirmed it.

REPAIRING A SILENT KILLER

Boyle was scheduled to undergo an endovascular repair of his aorta a couple of days later. The minimally invasive technique used an incision in his leg to thread and deploy a new graft to the site of the aneurysm.

"Until recently this surgery was performed through an open incision in the abdomen and it was a major operation for the patient," Kelemen says. "In the past few years, the endovascular technique has become the new standard because it is much less traumatic."


Boyle spent three days in the hospital after surgery and was quickly back to his normal routine.

"I feel lucky," Boyle says. "They said if that aneurysm had burst, that would have been about all she wrote."


Boyle never had any symptoms of an AAA, which isn't uncommon. Symptoms can include a pulsating sensation coming from the abdomen, unexplained lower back or abdomen pain, and discoloration or unexplained sores on the legs and feet.

"Usually when we see these cases, they show up in the emergency department and it's an impending emergency," Kelemen says. "If it's a dissecting aneurysm, meaning bleeding internally, it's often fatal. The only way to prevent it from getting to that point is to screen for it."

Kelemen's services extend beyond vascular repair (which was required for Boyle's case) to include cardiac bypass and valve replacement surgery, as well as general thoracic surgery, including lung and esophageal surgery.

"I'm glad we have these services available in Salina today," Boyle says. "When I had my bypass surgery I had to go to Wichita because the heart program hadn't yet started here. It's 100 percent better to stay in town. My wife and kids were able to be close by, and they didn't have to hunt for a place to stay." 

LIFESAVING SCREENINGS



Watch for additional abdominal aortic aneurysm screening clinics to be held near you. In January another free screening was held in Ellsworth and more are planned in communities throughout the region.

SALINA REGIONAL VEIN CENTER TAKES AIM AT 'SPIDER VEINS'

Many people attribute varicose veins or "spider veins" to age. Women often find them embarrassing. But, they're more than that. They can be painful, and even lead to health risks if left untreated.

It's estimated that 40 percent of adult women have varicose veins and 20 percent of men also show symptoms of venous insufficiency. The cause of venous insufficiency is a degeneration of the valves in the veins that carry blood back to the heart and lungs for oxygen. When the valves fail to work properly, blood tends to pool in the veins and they become dilated or swollen. Genetics and age play a role in the condition, but so does gender. Females more commonly show signs of the disease than men, and pregnancy is thought to be a contributor.

Whether the condition is purely a cosmetic issue or a health risk must be determined by a physician. If there are additional symptoms such as numbness, swelling, pain or soreness, then the condition is more likely to necessitate medical attention and will likely be covered by insurance. If the condition proves to be only cosmetic in nature, insurance may not apply. The clinic offers a free initial consultation so patients can know if insurance will provide coverage.

There are several treatments available and the condition can often be treated in the doctor's office setting. For superficial "spider veins," sclerotherapy may be used, which involves injecting a solution into the vein that causes it to swell, stick together and seal shut. Once the vein is sealed, the flow of blood stops and the vein turns to scar tissue and shrinks. For larger veins, the clinic uses a microfiber laser, which is inserted into the vein (similar to having an IV placed) to seal it shut. After treatment, patients are able to resume normal activities immediately and most feel no pain or only minimal discomfort.

While many places offer variations of the treatment, few in the region have the breadth of vascular disease treatment experience of Salina Regional's chief cardiovascular and thoracic surgeon.

"Many people find comfort in knowing I treat the whole spectrum of cardiovascular disease," says John Kelemen, M.D. "I'm not limited in the magnitude of intervention I can use. I treat everything from the superficial to life-threatening conditions."



GET A FREE CONSULTATION

Call the Salina Regional Vein Center at **785-493-VEIN** for a free consultation.

Families Find Support for Special Needs Children

For children born with disability and developmental delays, the first three years of life are widely regarded as the most critical to their development.

Salina Regional Health Center's Infant-Child Development program provides support for special needs children, from birth to age 3, who have a wide range of congenital abnormalities including cerebral palsy, spina bifida, Down syndrome and many other diagnoses. The program primarily works with children from Saline, Ottawa and Ellsworth counties.

Chad and Tonya Gipe of Tescott found out early during their second pregnancy that something was wrong with one of their twins. At 17 weeks gestation, doctors recognized that Abbey had an abnormal head size. At 22 weeks they doubted that she'd live long past delivery.

"Fortunately, Abbey didn't get the memo," Tonya says. Abbey's twin brother, Eli, was born perfectly healthy.

Now, more than 17 months later, Abbey is making strides such as sitting on her own and standing with help from adaptive equipment, though she lives with hydrocephalus, hypotonic cerebral palsy and visual impairment. She says words like "mamma" and "drink," and loves to play with her brothers.

Abbey began working with the Infant-Child Development program when she was 1 month old and uses many of its services, which include physical, occupational and speech therapy, early childhood education, nursing, assistive technology, and hearing and vision services.

"The service has been invaluable," says Tonya, who works at Early Head Start. "My husband doesn't have the background in education that I do, but I know he's been impressed with the progress she's made. She will have a better outlook when she is old enough to go to school.

"They've never put a limit on what she might be able to accomplish. They only say if she wants to do something, she will."

WORKING IN A NATURAL SETTING

Therapists and early childhood educators often find it more useful to work with kids in the natural setting of their home or in public places such as playgrounds, libraries or McDonald's. The idea is to make treatment as applicable to real life as possible.



Joyce Trower, Infant-Child Development director (right), and Denise Catania, para-educator (left), work with Abbey Gipe at Salina Child Care Center using a computer and standing device.

This summer, Infant-Child Development staff from Salina Regional worked with the Fruits and Hokett families of Delphos at their city park. Marcus Fruits, who turned 2 in December, was born with cerebral palsy. Shaylee Hokett, who turned 1 in February, was born with a cleft lip and palate and a chromosomal disorder similar to Down syndrome.

"We work with therapists and teachers at least once a week, and most of the time they come to our home to work with Shaylee," says Dani Hokett, Shaylee's mom.

Shaylee is now sitting well and beginning to stand with help from adaptive devices. She is gaining weight and eating all of her food orally after being dependent on a feeding tube for nourishment for much of her life.

"We're looking forward to having her feeding tube removed this spring," Dani says. "It seems like she's really starting to take off."

Marcus Fruits is also making great strides. He is now beginning to stand up to things on his own and can walk with his toy shopping cart. He's also talking more and more and beginning to develop a nice vocabulary.

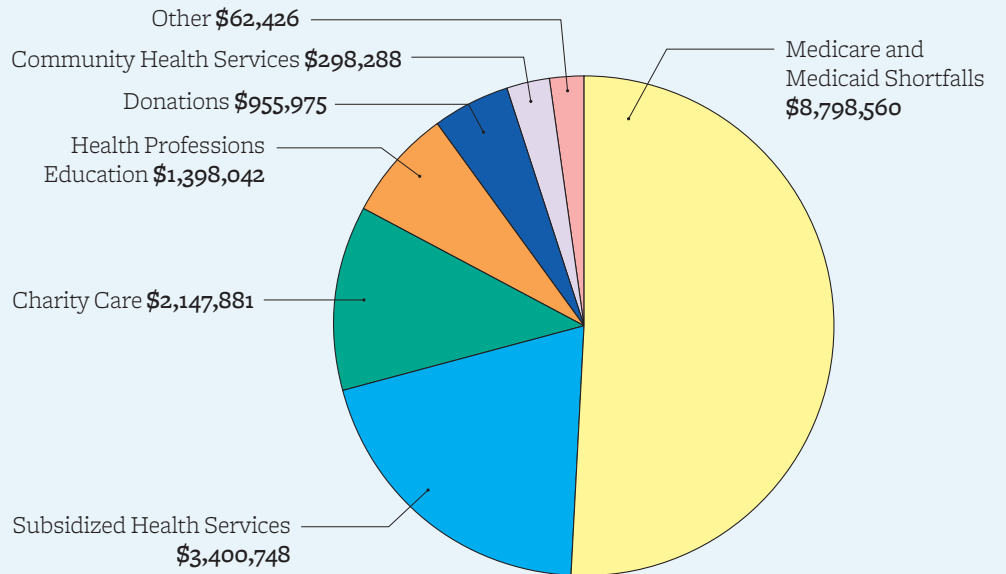
“We didn’t have a clue how to care for a developmentally disabled child, but our pediatrician recommended working with Infant-Child Development soon after Marcus was born,” says Marcus’ mom, Ashley. “The therapists and early child educators have shown us so many ways to help Marcus learn to do things on his own.”

A SUBSIDIZED HOSPITAL SERVICE

Infant-Child Development receives most of its funding from government-sponsored health insurance and state government health and education sources. However, the hospital covers many of the indirect costs, such as travel, associated with maintaining the program.

“We’re very fortunate to have the hospital’s support in maintaining this program,” says Joyce Trower, P.T., director of the service. “There are very few programs in the state that have the number of services in place that we have.”

2008 Unreimbursed Community Benefit: \$17,061,920



HOSPITAL AN ASSET FOR FUTURE ECONOMIC GROWTH

True to “Regional” in the hospital’s name, 35 percent of Salina Regional Health Center’s patients drive from outside Saline County to receive care. With more than 20,000 patient visits each year, it’s easy to see the positive economic impact the hospital has on the community.

As one of the area’s largest employers with nearly 1,300 employees, the hospital carries an annual payroll of about \$50 million. Additionally, Salina Regional Health Center and its subsidiary businesses held through Salina Regional Health Center, Inc., pay more than \$700,000 in property taxes each year.

Through the years, the organization has remained financially strong, allowing it to grow to meet area healthcare needs. In the past five years alone, the hospital has reinvested more than \$91 million in new medical technology and facilities to stay on the leading edge of service. All of these advancements have been made without added expense to local taxpayers.

Healthcare is one of the building blocks that make a community strong and plays an important role in its ability to grow in the future.

“Access to healthcare is critical to community growth,” explains Dennis Lauver, president/CEO of the Salina Area Chamber of Commerce. “It’s important to future employers and employees alike. A recent survey of working adults in the region who said they would be willing to move to Salina for the right job said access to healthcare was the second most important criteria considered in making the move. Only access to housing ranked higher.”

Salina Regional is actively engaged in recruiting physicians to meet the region’s future demands. The region’s current physician needs assessment shows the need to bring 58 physicians into the community by 2014 to offset expected retirements and meet future growth. In 2008, the hospital invested more than \$500,000 in efforts to sign nine new physicians to contracts of service in the community.



The main lobby and entry to Salina Regional’s new patient tower opened to the public in January. Services will be relocating to the \$70 million building project over the course of this year.

A Community Resource for Health Education and Screening

A healthy lifestyle and regular screenings are the best methods to prevent and fight disease. Salina Regional Health Center offers numerous free educational programs and screening opportunities to the public to increase awareness about many common diseases.

In 2008, the hospital sponsored screenings for prostate, colon and skin cancers and abdominal aortic aneurysm.



Barb Gack, R.N., and John Kelemen, M.D., SRHC's chief cardiovascular and thoracic surgeon, discuss the importance of exercise at the Salina Senior Center.

"The goal of these screenings is not only to find disease early, but also to improve public awareness," says Linda Hinnenkamp, R.N., Salina Regional's cancer outreach coordinator. "For every person we see at our screenings, we hope 10 more go and see their primary care doctor for routine care. Our medical staff and the Smoky Hill Family Medicine Residency Program have been instrumental in our ability to provide these screenings."

Hospital staff members also routinely provide educational programs to community groups and organizations. Last year, these events covered a wide range of topics including cardiovascular health, breast cancer, respiratory conditions, behavioral health, nutrition and fall prevention.



Third-year family practice resident Brad Garner, M.D., evaluates a newborn while on his pediatrics rotation.

Hospital Provides Clinical Training Site for Future Professionals

Area nursing, respiratory care, radiology, physical therapy and medical students gain a portion of their clinical education at Salina Regional Health Center. The hospital is also a training site for physicians specializing in family medicine at the Smoky Hill Family Medicine Residency Program.

The residency's mission is to train doctors for medicine in rural Kansas. At Salina Regional they gain a wide range of experience following volunteer faculty from many specialties including obstetrics, pediatrics, general surgery, critical care and emergency care.

"I've always felt that if you want to someday work in a rural area, then it's best to train in a rural area," says Bonnie Cramer, M.D., who will finish residency this summer before beginning practice in Concordia. "The faculty at Smoky Hill and volunteer faculty in the community are great to work with and learn from."

CHIP Provides Assistance to Initiatives Impacting Community Health

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 community health.

In 2008, Salina Regional tithed 10 percent of its operating margin to CHIP, which awarded 18 grants for a total of \$367,416. Major gifts included a \$50,000 grant to the Greater Salina Community Foundation to address youth development needs, \$25,000 to the American Red



Red Cross leaders assess relief efforts in the aftermath of the Chapman tornado.

Cross in response to the June 11 tornado that hit Chapman and rural areas south of Salina, and \$16,500 to the Salina Art Center to provide alternative learning opportunities for kids who struggle in the traditional school setting.

"As a former teacher, I know when I had students who had trouble in school, many times there were other ways that they could express themselves," says Wendy Moshier, director of the Salina Art Center. "The three art programs we have developed help a number of children experience the feeling of success and often times that feeling drives them to become successful in other areas as well."



Salina Art Center's ARTbreak program for third- and fourth-graders is sponsored in part by Salina Regional Health Foundation's Community Health Investment Program (CHIP).

SPECIALLY TRAINED NURSES HELP VICTIMS OF SEX CRIME

National statistics estimate one in three females and one in six males are sexually assaulted during their lifetime. Only 12 percent of these crimes are ever reported to authorities.

The ones that are reported in the region often seek consultation with Salina Regional's Sexual Assault Nurse Examiner/Sexual Assault Response Team (SANE/SART) service. Salina Regional currently provides 24/7 sexual assault response care to 29 counties in north central and northwestern Kansas.

Nurses are specially certified in adult, adolescent and pediatric examination and gathering of forensic evidence. These nurses also provide education to community groups, area law enforcement and county attorneys and give trial testimony essential for conviction.

In 2008, the program received 244 consults and conducted 104 actual forensic examinations.

"It would be incredibly difficult to prosecute these cases without forensic evidence," says Christina Trocheck, assistant Saline County attorney. "If we don't have this evidence or an admission of guilt, then it becomes the victim's word against the defendant's word.

"These nurses also provide testimony to juries so that they can comprehend what is a very complex subject. They make my job prosecuting crime a lot easier," Trocheck says.

A grant from the Salina Regional Health Foundation made possible the purchase of a high-tech Scientific Digital Forensic Imaging system this year that allows the team to collect high-resolution photos with military-level encryption so they can be sent electronically to area law enforcement.

"We work closely with Child and Parenting Services, the Domestic Violence Association of Central Kansas, Social and Rehabilitation Services and local law enforcement to provide the support these victims need in the least threatening manner possible," explains Karen Groot, R.N., SANE/SART co-coordinator. "The level of service we're able to provide is incredible and usually only found in more urban areas."



BEHAVIORAL HEALTH PROGRAMS SERVE WIDE REGION

Mental illness is a major aspect of overall health. It's estimated that as many as 50 percent of people will experience some form of mental illness over the course of their lifetime.

Salina Regional provides services to treat the entire spectrum of behavioral health illness ranging from depression and anxiety to schizophrenia and post-traumatic stress disorder. The program is the only one that provides 24/7 psychiatric services across a wide region ranging from Lincoln, Neb., and Topeka to the north and east to Newton and Denver, Colo., to the south and west.

In 2008, staff provided more than 35,000 hours of patient care through its outpatient programs and treated 616 patients who spent a combined 3,764 days in the inpatient unit. Often patients have no insurance or the insurance they have doesn't provide very good mental health coverage. No one is ever turned away based on the ability to pay. In light of this, portions of the program have a negative impact on the hospital's bottom line by failing to meet all of its indirect costs and professional salary compensation.

"Not treating mental health would be like not treating pneumonia," says George Jerkovich, M.D., medical director for the department. "Treating mental health is vital to the health of the individual, the health of the family and the health of the community."



SIMULATION LAB HELPS SHARPEN SKILLS

Staff and students gain experience managing real-life scenarios without the pressure of life at stake

During the response to a critical patient event, a healthcare worker's training takes over and he or she reacts to bring about the best possible outcome. These situations can be intimidating if they've never been encountered in real life.

Under this premise, Salina Regional Health Center began pursuing some of the latest technology available to train staff and students so that they might react to situations with greater confidence and effectiveness. In May 2007, the hospital's new simulation lab became operational with three high-fidelity patient simulators that have pulses and heart tones, can speak and can be programmed to carry out an infinite number of critical patient scenarios. These, along with other specialized training mannequins and simulation equipment, are used by regional nursing schools and hospital patient care staff for rapid response training and annual competency exams.

"We're on the cutting edge in terms of using this technology for competency development," says Kathy Pike, Salina Regional's Organizational Development director. "Other hospitals in larger communities are coming to us to learn how to implement a program of this nature."

In fact, the Kansas Board of Regents and Kansas Board of Nursing are monitoring Salina's program to see how it could be replicated in other ways around the state.

Nursing students find value using the simulation lab because it guarantees they get to see patient scenarios critical to their training while allowing them to provide nursing care in a safe environment.

"Depending on when a student is on site for their training, they may not have the opportunity to see all of the types of cases they need to prepare them for practice," Pike says. "Other times, the floors may be too busy

for staff to take the time to provide teaching instruction. This ensures students get a consistent message."

Each year, hospital patient care staff undergo competency exams to ensure they are current on the latest protocols. This time also allows for the opportunity to go over scenarios rarely seen by staff.

Recently, emergency department staff used the simulation lab to practice

interventions on a trauma patient, manage care for a pediatric patient whose blood sugar was critically high, and practice the spontaneous delivery of an obstetric patient.

"I've never seen an OB patient deliver in the emergency room," says Wendy Gibson, R.N. "I've seen the other scenarios many times, but I've never been working when we've delivered a baby in the ER. It does happen though. Sometimes there isn't time to get the patient up to labor and delivery.

"I feel more confident now if this scenario should arise. The hands-on experience makes it very realistic, but the simulation allows you to ask questions and you don't feel nearly as tense as you would if it were real. They didn't have this technology when I was in school. I can see how great it can be for preparing nurses for practice."

To date, more than \$250,000 has been invested to make the simulation lab operational, and the Salina Regional Health Foundation has been a major source of funding for the project. It has the potential for future use by many agencies including emergency first responders and disaster preparedness and is being sought for use by area Sunflower Health Network hospitals to train their patient care staff.

"This is costly education, but so is making a mistake on a patient," Pike says. "The possibility exists every day that patients won't allow students to learn on them." ❏



Cloud County Community College nursing students practice resuscitating a patient.



Emergency nurses practice the spontaneous delivery of a baby.

Kids Fitness Program Receives Recognition from AHA

An after-school program geared toward teaching elementary students how to set personal fitness goals, exercise and maintain a healthier lifestyle has earned Impact Sports & Fitness, of Memorial Health System in Abilene, recognition from the American Hospital Association.

The Impact Kids Fitness Clinic, offered the past two years during September and October, is featured in the *2009 Community Connections: Ideas and Innovations for Hospital Leaders* publication as an example of innovative ways healthcare organizations can implement programs to meet community health needs.

The clinic had a total of 167 students enrolled in the program. A grant from the Community Foundation of Dickinson County offered in cooperation with USD 435 and St. Andrew's School helped cover the program's cost.



RaeLyn Whitehair, Impact Sports & Fitness director, shows a group of McKinley Elementary School students how to properly stretch before they begin exercising.



A crane was used to hoist Clay County Medical Center's new MRI unit through the main entry of the hospital in January.

CCMC INSTALLS IN-HOUSE MRI

Clay County Medical Center installed a new in-house MRI scanner in January. Previously, MRI studies had been conducted with the use of a mobile unit, which was only available three days a week.

The new Siemens Essenza MRI offers some of the latest technology available on the market today. Patients will have access to the equipment 24/7 and will no longer have to go outside into the elements to receive a study as was required with the mobile unit.

The Clay County Hospital Foundation assisted funding for the project. If you'd like to support the Foundation's efforts, contact Marcia Newell at mnewell@ccmcks.org or **785-632-2144, Ext. 489**.

WANT TO BECOME A CNA?

If you've considered beginning a career in healthcare, this may be the chance for you. Lindsborg Community Hospital and Bethany Home in Lindsborg are the host sites for a free Certified Nursing Assistant (CNA) training program offered through Hutchinson Community College.

The 14-day training program is completely underwritten by an anonymous organization. There are no strings attached to the program and no pressure is placed on those enrolled to work for a particular facility.

Courses will be offered this summer. Contact Julie Olson, Lindsborg Community Hospital, by calling **785-227-3308, Ext. 121**, to see if space is still available.



HAVING CANCER GIVES A UNIQUE PERSPECTIVE.

Pay attention. Be proactive.



*Dee Satterlee
and husband Don*

Dee Satterlee missed her annual mammogram one year.

The next year, cancer was found. The team at Salina Regional and the Tammy Walker Cancer Center got to work with an aggressive treatment plan of chemotherapy and leading-edge IMRT radiation therapy. Today, Dee is cancer-free. Was missing one mammogram just a cruel twist of fate? No, Dee thinks it gives her a unique perspective. It proved the importance of paying attention, being proactive and having regular screenings and check-ups. With the team of Salina Regional and the Tammy Walker Cancer Center, there's no reason to go anywhere else.



 **Salina Regional
Health Center**
Confidence for the Good Life

Tammy Walker
CANCER CENTER
www.srhc.com/services/cancer