Nearly three years had lapsed since Beverly Jewell, of Claflin, had gotten a mammogram in 2010. The now retired medical office worker didn’t have any significant concerns. She hadn’t detected any lumps and didn’t have a family history of breast cancer.

But as the test concluded, she sensed something may be amiss. There seemed to be something subtle in the way the radiology technologist spoke—something only a fellow healthcare worker in the tight-knit community of Ellsworth might notice. Maybe it was simply paranoia?

It wasn’t until the radiologist reports were complete and her doctor pulled her into an office that she knew for sure. The mammogram had detected a small mass that had all the classic indications of cancer.

“The unknown is always scary,” Jewell recalls. “You’re in shock when you first find out.”

Further tests in Salina would confirm that Jewell had a localized cancer. She was referred to Lynn Marshall, patient navigator at the Tammy Walker Cancer Center, who helped coordinate a plan for care.

“She gave us some literature and we visited about the prognosis and what, where and how we would be going forward with treatment,” Jewell says. “It was a very helpful meeting. She then went with me to my appointment to see the surgeon and was there on the day of my surgery. It was just unbelievable that she’d be so compassionate. She has access to an amazing amount of resources for both patients and family members so they understand the good and bad about a situation. Throughout the process, my family and I began to feel less fearful and that the choices we were making were good ones.”

Jewell underwent a successful lumpectomy followed by radiation treatment. She has follow-up visits with a doctor every three months but has remained cancer-free ever since.

Marshall says her role is primarily to educate patients about the circumstances surrounding their disease and help ensure they understand what’s taking place.

“Unfortunately I’m not able to make it to every patient’s surgery or doctor’s appointment, but I’m always available as a resource,” Marshall says. “Many patients feel empowered just having the information in a way that’s easy for them to understand. Through the process I learn what’s most important to patients, and I can help them communicate that to doctors involved on the care team.”

A COORDINATED APPROACH

While every cancer diagnosis is unique, there are often multiple specialists involved in forming a treatment plan. That can mean numerous doctor’s appointments and tests.

“Many patients are rattled and feel lost after a diagnosis,” Marshall says. “Some patients have up to five doctors or more involved in their care. It’s a lot for anyone to process, let alone someone who is having a tough time.”

Marshall gets referrals to assist patients from doctors in Salina and throughout north central Kansas. Patients themselves are also welcome to contact her directly. She can help patients schedule all of their care, get second opinions and access other resources.

Community resources like Meals on Wheels, transportation to and from medical appointments, hospice services or a program through Big Brothers
Hospital Tithe to Foundation
Supports Education, Health Initiatives

Each year, Salina Regional Health Center tithes a portion of its operating margin to the Salina Regional Health Foundation. In 2012, the hospital tithed 10 percent of its operating margin to assist efforts such as scholarship funding for the KU School of Medicine site in Salina, expansion of the Smoky Hill Family Medicine Residency Program and community initiatives such as the Foundation’s Community Health Investment Program (CHIP).

The KU School of Medicine site in Salina welcomed its second class of eight students in 2012. A $400,000 grant through the Foundation supports future students accepted into the four-year program.

Students link to the main campus in Kansas City via interactive television for much of the initial curriculum, but an anatomy lab and clinical training are provided at Salina Regional with assistance from physicians in the community.

Significant funding also was designated to the Smoky Hill Family Medicine Residency Program in Salina to help it add more residency positions and faculty. For more than 25 years, the program has trained physicians who are interested in one day practicing in rural communities. However, as medical school campuses have expanded class sizes to offset physician shortages around the country, graduate medical education opportunities have not kept pace.

“Today, graduates of American medical schools are unable to find continuing education opportunities,” says Rob Freelove, MD, residency director at Smoky Hill. “Growth in residency programs has not kept up with the increasing number of medical students. The hospital and Foundation’s support allows us to expand and help meet some of these increasing demands.”

About $270,000 was directed to CHIP, which primarily supports initiatives impacting the health of children. Community organizations have the ability to apply for CHIP support. A Foundation committee reviews and approves applications.

One CHIP grant in 2012 awarded $35,850 to assist the Salina Family Healthcare Center’s efforts to expand dental services for underserved children in the region. Outreach efforts by the clinic showed that about one in five area children has an unmet dental need.

Another CHIP grant awarded Child Care Aware of Kansas $25,000 to help implement a rating system for child care providers. The effort aims to improve the quality of child care and allows providers to receive technical assistance, education and financial help to make improvements.
Partnership Helps Substance Abuse Patients Get Appropriate Care

Nationally, substance abuse is a major driver of healthcare costs. A local partnership that began more than two years ago between Salina Regional Health Center and the Central Kansas Foundation is helping reduce costs, alleviate hospitalizations and get patients more effective care.

CKF provides inpatient and outpatient programs for those struggling with substance abuse. A CKF counselor, available at the hospital, talks with patients about their addictions and treatment options. If care can be appropriately provided by CKF’s inpatient facility, patients are given the option to go there instead.

“Many of these patients are uninsured, which costs the hospital a great deal of money,” says Les Sperling, CEO of CKF. “We have better resources to help them get the assistance they need at a much lower cost.”

CKF has seen a 238 percent increase in the number of inpatients treated at its center since the program began. The hospital also has seen a decrease in the number of recurring patients in its emergency department for substance abuse.

“Doctors, nurses and all of the staff members at the hospital have gained a heightened awareness of substance abuse and its impact on overall health,” Sperling says. “Hospital care is usually better suited to meet the medical needs of a patient. We’re able to take a more holistic approach and provide therapy to help patients change unhealthy behaviors that adversely impact their health.”

The success of the effort is being looked at by other hospitals in the region and as a possible model that could be re-created on a much larger scale.

“This has really been a great collaboration,” Sperling says. “I think Salina Regional has shown some visionary qualities in helping bring this effort forward.”

Mission

Entrusted with people’s lives, we are privileged to provide quality health care service in a healing and spiritual environment.

Vision

To always focus on the patient in a culture of health care excellence.

Goals

Quality: Achieve excellent clinical outcomes and patient satisfaction through outstanding people consistently using best practices.

Access: Simplify access to comprehensive health care services through unified efforts with health care professionals and hospitals throughout the Sunflower Health Network.

Stewardship: Manage resources effectively to keep the organization financially sound.

Hospitalist Service Facilitates Patient Transfers, Inpatient Recoveries

Salina Regional maintains a staff of physician hospitalists who specialize in caring for patients in the hospital. Many primary care physicians both inside Salina and from hospitals around the region refer patients to hospitalists to manage care when hospitalization is necessary.

Hospitalists receive information about patients’ medical histories from their referring physicians and work with them to develop a plan for care during a hospital stay. Hospitalists also may consult a wide array of other specialty physicians available locally, including surgeons, cardiologists, radiologists and neurologists, to coordinate the entire spectrum of care needed during a patient’s hospital stay.

Hospitalists are on duty around the clock, and because they only work in the hospital, they are able to attend to patient needs whenever they arise. Hospitalists are more readily available to meet with patients and family members to discuss the recovery progress. Many times, this level of availability also equates to shorter hospital stays.

Referring physicians throughout the region have a dedicated phone line they can call to consult a hospitalist about an admission in Salina. “Being able to make one call to a hospitalist really improves the speed of a transfer and gets our patients the care they need quicker,” says Shawn McGowan, a physician assistant who works in the emergency department and clinic in Ellsworth. “They also call and let us know when the patient is ready to be discharged from Salina so we can continue to monitor their progress when they return home.”
Screening, Education Key to Cancer Prevention

Living healthy lifestyles and undergoing regular screenings are the best methods to prevent and fight cancer. Each year, the Tammy Walker Cancer Center at Salina Regional Health Center offers numerous educational programs and free screening opportunities for prostate, colorectal and skin cancers.

Specialty physicians in the community, family practice faculty and residents at the Smoky Hill Family Medicine Residency Program, and doctors from the Midwest Cancer Alliance routinely donate their time to provide patient examinations for the screenings.

“Events like these are important to the overall health of the community,” says Salina urologist Ryan Payne, MD, who provided education and examinations at the prostate cancer screening clinic in September 2012. “Our goal is to increase awareness about the importance of screening, whether they come to our events or go to their primary care doctors to discuss options at their next visit.”

A grant from the Avon Foundation Breast Care Fund also helps support breast cancer outreach efforts at the Cancer Center. In 2012, the program provided educational programs to more than 5,000 people in the region and worked with nurses in 12 clinics in surrounding communities who performed 800 breast exams and referred nearly 1,500 women for free or low-cost mammograms.

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 healthcare services and adding value to the area.

Program Helps Educate Critical Care Nurses, Facilitate ICU Expansion

Salina Regional’s efforts to construct a new, expanded Intensive Care Unit (ICU) mean there will be a need for additional critical care nurses to staff the extra beds. A new capstone program developed for Kansas Wesleyan University nursing students is aimed at addressing future staffing needs.

Nurses can take a 10-week critical care elective during their senior year to help earn exposure to work inside the ICU. Nurses schedule their hours to work alongside a Salina Regional nurse to gain a unique one-on-one educational experience.

“The program is awesome,” says Rhea Andrews, a senior nursing student at Kansas Wesleyan. “I feel like I’ve learned more during this rotation than I have during my entire time in school. ICU nurses are very skilled and perform more interventions and advanced care than a nurse on a medical/surgical unit. They use equipment we’ve never even seen in school.”

“Following one nurse is also a plus,” Andrews says. “You develop more of a relationship and they know what’s already been covered and come up with more new things to teach.”

Community Building Activities/Research $380,344
Donations $1,432,409
Health Professions Education $2,312,653
Charity Care $2,874,741
Medicaid & Medicare Shortfalls $8,227,922
Subsidized Health Services $10,237,337
Community Health Services $151,120

2012 Unreimbursed Community Benefit: $25,616,526

(Above left) Many attended the Cancer Center’s Ladies Spa Night breast cancer awareness event in October 2012. (Above right) Urologist Ryan Payne, MD, discusses treatment options at the annual prostate cancer screening clinic in September 2012.

(Above) Kansas Wesleyan nursing student Rhea Andrews (left) followed ICU nurse Levi Kinderknecht on her critical care capstone rotation.

2012 Unreimbursed Community Benefit: $25,616,526

(Above) Kansas Wesleyan nursing student Rhea Andrews (left) followed ICU nurse Levi Kinderknecht on her critical care capstone rotation.
Pharmacy Residency Increases Education Opportunities

NEW PROGRAM ACCEPTS TWO POSTGRADUATE PHARMACY RESIDENTS EACH YEAR WHO ARE INTERESTED IN SPECIALIZING IN HOSPITAL CARE

When the best and brightest leave to pursue additional training, odds are they may never come back. Salina Regional Health Center initiated a new residency program for pharmacy graduates in 2012 to help attract and retain pharmacists who might one day enter practice in Salina or other parts of the state.

Today, many pharmacy graduates pursue postgraduate training to gain specialized skills. Some jobs require this additional training. “One year of residency is often considered equivalent to three to five years of practice experience,” says Steven Blanner, PharmD, BCPS, Salina Regional’s pharmacy residency director.

Last year 31.5 percent of applicants for residency positions nationwide did not match with a program because not enough positions were available. Salina is one of eight Kansas hospitals to offer a postgraduate pharmacy training program.

A WELL-ROUNDED EXPERIENCE
Salina Regional’s program accepts two residents a year for one year of training. Residents gain a wide range of skills in general hospital practice, internal medicine, critical care, postsurgical care, trauma/emergency medicine, practice management, ambulatory care and medication safety. The program also allows the flexibility to customize training to meet residents’ interests by developing electives as needs arise.

“To be an accredited residency program, there are core standards required by the American Society of Health-System Pharmacists,” Blanner says. “In this first year, we’ve developed electives in nephrology, advanced critical care, hospital quality initiatives and behavioral health.”

Salina Regional’s size as a rural regional referral hospital has advantages. Most hospital-based residency programs are associated with large health systems in urban areas.

“This is a small enough facility that you get to know the people you’re working with,” says Kalie Heideman, pharmacy resident. “The wide array of patients who come through Salina gives a balanced and comprehensive exposure to what hospital-based pharmacy practice is all about. I feel the program has prepared me to be a successful pharmacist at any institution I apply for.”

Heideman, who is originally from Arizona, is strongly considering employment in Kansas after residency.

“The people I’ve met have made me consider staying,” Heideman says. “It was interesting for me to see real snow. I found I liked this new season I had never experienced before.”

RESEARCH MAKES AN IMPACT
Residents are required to perform research as part of their training. Heideman took on a project that implemented the use of medication education groups for inpatient behavioral health patients. The project shows promise in reducing the number of repeat emergency department visits for psychiatric patients.

Pharmacy resident Chris Zielenski looked for ways to help reduce the number of hospital readmissions for patients with congestive heart failure (CHF). His efforts helped implement a process where follow-up phone calls are given to CHF patients to assess their compliance with medication usage after they’ve returned home from the hospital. During the call, pharmacists answer questions and work to resolve any issues that may be present. Patients with symptoms indicating they are getting worse are referred to their primary care physicians before conditions decline to the point of needing to be readmitted to the hospital. In a limited sample of patients who received the follow-up phone call after discharge, none was readmitted for CHF.

“Other hospitals and care facilities in the region are looking at our model to see if they can implement it,” Zielenski says. “Doctors at Salina Regional are requesting the protocol for their patients upon discharge. That’s the greatest compliment in my eyes.”

(Above right) Pharmacy residency director Steven Blanner welcomed the program’s first class of residents, Kalie Heideman and Chris Zielenski (left) in 2012.