Few events in life create the level of excitement and anticipation parents experience when preparing for the arrival of a new baby.

Parents commonly begin preparing weeks in advance to make sure the home nursery is stocked with the supplies they’ll need. They gather necessities for a hospital stay and work to get as many of their affairs in order as possible.

But no amount of preparation or planning readies parents for a premature birth or newborn complications that can arise. Newborns, especially those that are premature, might not survive without advanced care for many issues like respiratory distress, feeding problems or the ability to maintain an appropriate body temperature. That can extend hospital stays from a planned short couple days to exhausting weeks on end.

“As a parent you go through just about every emotion there is,” said Tia Burnett, whose youngest two of five children had extended stays at Salina Regional’s Neonatal Intensive Care Unit (NICU). “You blame yourself. You feel all the ups and downs that go along with your child’s condition. I remember feeling like I was floating, trying to work and take care of my other children. It’s all just a blur.”

‘Angels’ to the rescue

Tia’s son Jicory Wilson was born eight weeks early and had a rough delivery. He experienced a brain bleed and needed assistance breathing. Doctors also diagnosed a heart murmur and he required a blood transfusion to stabilize his condition.

In all, Jicory spent 23 days in Salina Regional’s NICU and Tia developed a high level of trust and friendship with many of the hospital’s staff members.

“Everyone was so into his wellbeing,” Tia said. “I swear they never took an eye off of him. Those women are angels, so supportive and very smart. I never questioned them. My doctor gave me the option of transferring to Wichita, but I felt so confident in his care and that of the nurses that I never really felt it was necessary.”

Tia’s fifth child, Jha’lii Wilson was born last summer five weeks early. She had trouble feeding and tired easily when trying to take a bottle. It took just over two weeks before Jha’lii was strong enough to handle all the feedings well enough to go home.

“With four children at home I couldn’t stay with her all the time,” Tia said. “When I couldn’t be there I’d call every two hours, even through the night, to see how she was doing and they were so atten...
Nurturing a healthy community is our privilege

Regional health initiatives & development

Salina Regional takes an active role in providing leadership for regional health initiatives and community development. The hospital provides support for health improvement initiatives such as the Alliance for a Healthy Community, Kansas Cancer Plan and the Salina Area United Way.

Many employees from Salina Regional volunteer to give health talks to community groups, participate in school to career events, and are involved in regional economic development efforts. The hospital is a leader in disaster preparedness. Staff conduct in-house disaster drills twice annually and participate in regional drills each year.

“After area disasters like the Greensboro tornado, Coffeyville flooding and to a lesser extent the flooding in and around Salina in the past year I think many recognize the importance of being prepared for when a disaster might strike,” said Sue Cooper, north central Kansas hospital disaster preparedness coordinator. “It’s not something we ever hope to have to face, but in the event that a disaster would occur we need to be prepared to execute the plans we have in place.”

Subsidized health services & discounts

As a not-for-profit community hospital, Salina Regional provides a number of services that meet community needs despite the fact that they have a negative impact on the organization’s bottom line. For example, Salina Regional is one of the few area providers for behavioral health services. Psychiatrists on staff take call for a wide region including north central and much of the northwestern part of Kansas. Patients experiencing depression, schizophrenia, suicidal thoughts, and sudden onset of a wide range of mental disorders are brought to Salina for care.

Often times these patients have no insurance or the insurance they do have doesn’t offer very good mental health coverage.

“Statistically one in five Americans will be touched by mental health disorders and two in three families will deal with crisis,” said Sally Leger-Schneider, Salina Regional’s behavioral health director. “We never turn anyone away based on whether or not we will get paid.”

Other services that are not profitable, but fulfill a need in the community include neonatal intensive care, sexual assault care, infant/child development, and certain other outpatient services. The hospital also offers patients who self-pay for their services a 10 percent discount. In 2007 more than $5.4 million were provided in subsidized health services and discounts.

Community health education & outreach

The greatest weapons against disease are prevention and early detection. That’s why Salina Regional goes to extensive efforts to offer education and health screenings in the community. Salina Regional’s cancer outreach programming includes community screening and educational forums for leading forms of the disease including skin, breast, colon and prostate cancer. Those that have been touched by cancer also have access to numerous support groups that meet on a monthly basis. An appearance center also helps victims, who have been impacted by the side effects of treatment, gain the self-confidence it takes to fight the disease and continue to be active in the community.

In the spring of 2007 Salina Regional was a major sponsor for a community-wide health fair and offered screening for sleep disorders, vascular health, cholesterol, blood pressure and risk of falling. A wide variety of educational information was also provided on topics ranging from diabetes and mental health to newborn care.

Salina Regional also operates a transportation service so that patients from in and around Salina can maintain their appointments. In 2007, the hospital provided 5,436 rides so that patients could attend their medical appointments.

In all, $375,666 were invested in community health education and outreach efforts for the region.

Health professions education

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

The hospital also operates a transportation service so that patients from in and around Salina in the past year I think many recognize the importance of being prepared for when a disaster might strike,” said Sue Cooper, north central Kansas hospital disaster preparedness coordinator. “It’s not something we ever hope to have to face, but in the event that a disaster would occur we need to be prepared to execute the plans we have in place.”

Donations

Each year Salina Regional 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 2007 Salina Regional tithed 10 percent of its operating margin to CHIP, which awarded 17 grants totaling a total of $419,435. Major gifts included $120,000 offered as a community challenge grant to the American Red Cross for a new facility in Salina, a $50,000 grant to the Greater Salina Community Foundation to address youth development needs, and a $50,000 grant to the Ottawa County Health Planning Commission to purchase equipment for a future dental clinic in Minneapolis.

One grant helped Salina Public Schools purchase nebulizers and pulse oximeters to treat students experiencing respiratory problems at school. School district officials estimate that as many as 20 percent of the student population show signs of respiratory problems and require care. A standing order from a local pediatrician and physician at the hospital to administer medicines as needed, in hopes of averting the need to call an ambulance for assistance.

“Most of the feedback I get from parents is how wonderful it is to have these machines in school, otherwise, they would have to take off work to come and give a breathing treatment,” said Mary Erker, R.N., school nurse at Coronado Elementary. “I use the oximeters on students who are complaining of shortness of breath and on asthmatics that have the same complaints. I love having the oximeter as an added tool to assess the students.”

Charity Care

The U.S. Census Bureau estimates that more than 300,000 Kansans or about 12 percent of the population is uninsured. Many cannot afford the high cost of private health insurance, but make too much money to be eligible for government-sponsored programs. Those that are self-employed, or employed by small businesses, are least likely to have access to insurance.

When unexpected health issues arise, the costs associated with treatment can sometimes be simply unmanageable for those already struggling to make ends meet. In these instances patients can apply for assistance from Salina Regional and may have the cost of their care covered through insurance in some cases completely eliminated.

The hospital uses national poverty levels as a guideline for acceptance into its charity care program at a cost of $1.88 million. In 2007, 57 percent of Salina Regional’s services were provided to patients with Medicare or Medicaid coverage. All patients are given access to the latest technology and treatment options available in order to assure the best chances for survival – no matter what their method of payment is.

Medicare & Medicaid shortfalls

In most cases government sponsored health insurance does not cover a hospital’s cost to provide care for the services patients need. These “shortfalls” in coverage are absorbed by hospitals nationwide. In 2007, 37 percent of Salina Regional’s services were provided to patients with Medicare or Medicaid coverage. All patients are given access to the latest technology and treatment options available in order to assure the best chances for survival – no matter what their method of payment is.
A safety net for the uninsured

When Hurricane Katrina struck New Orleans it wiped out Joseph Hill’s home, neighborhood and entire lifestyle. So, when a friend in Salina offered Joseph and his wife a place to stay and a new start in life it looked like the best option available to them.

The couple found employment locally, but soon Joseph’s knees began giving him trouble and he couldn’t keep working. His knees were the least of his health problems however. Joseph’s unregulated diabetes was taking a huge toll.

Without a job or insurance, Joseph turned to the Salina Family Healthcare Center, Salina’s Federally Qualified Community Health Center. The clinic charges patients who are economically disadvantaged on a sliding scale and offers assistance to those who have no health insurance.

“Without them I wouldn’t have been able to get the care I needed,” Joseph said. “I’ve gotten better care here than I ever did in New Orleans. We’ve gotten my diabetes under control and now we’re looking at options for my knees.”

Patients that meet certain guidelines of the clinic’s financial screening process are then also automatically eligible for free services at Salina Regional Health Center. These services include inpatient and outpatient care and laboratory and diagnostic imaging services.

More than 1,500 patients at the clinic are eligible for free services at Salina Regional. In 2007 the hospital wrote off costs for $894,604 to Salina Family Healthcare Center patients and nearly an additional $1 million to others who qualified for free or reduced charges in accordance with the hospital’s charity care policy. The hospital’s criteria for giving services at free or reduced fees use national poverty levels as a guideline for acceptance.

“We provide high quality primary care and the hospital offers free services to economically disadvantaged patients in hopes that we can decrease emergency room utilization and hospitalization rates, which can be so costly,” said Robert Freelove, M.D., chief medical officer for the Salina Family Healthcare Center. “The uninsured population is growing and it’s nice for our patients to not have to go through a separate screening process at the hospital to receive the care that they need.”

More than 90 percent of Salina’s specialty physicians also write off charges for uninsured patients at the Salina Family Healthcare Center.

“They will do the best they can for the uninsured,” Freelove said. “Salina is very unique and it’s something the medical community should be very proud of.”

The patients who benefit from these services are genuinely grateful.

“I hope Salina will continue to offer these services,” Joseph said. “For people who don’t work or have insurance there aren’t many places you can turn to.”

NICU keeps families close to home

Continued from Page 1

Keeping families close to home

Nationwide, the March of Dimes estimates that one in eight births are preterm or born before the 37th week of pregnancy. Although those aren’t large percentages, babies that are born full term sometimes also require advanced care.

“In a town like Salina where we have such strong obstetrical care you have to have an ability to care for newborns experiencing complications,” said Alisa Bridge, M.D., a Salina pediatrician. “We wouldn’t be able to deliver nearly as many high risk patients without a NICU here and it decreases the stress on the families when they can stay close to home.”

In severe circumstances, like the births of Jicy and Jha’lili, spending weeks in the hospital are commonplace. Many parents don’t enjoy enough flexibility in their jobs to miss extended amounts of time at work. And, travel to a larger city like Kansas City or Wichita often takes young families away from their support networks of grandparents, friends, co-workers and church groups.

“In instances where we’ve had to transfer patients to Wichita and they’ve been transferred back to Salina to receive additional inpatient care after their condition has stabilized we’ve had many families remark how grateful they are for the service,” Bridge said. “It makes a big difference for families who can be home with loved ones and then spend part of the day in the NICU with their newborn.”

A subsidized hospital service

Although some services within Salina Regional’s Family Birthing Center are profitable, the service line as a whole creates a negative impact on the organization’s bottom line. Government sponsored insurance and many third-party insurers reimburse the hospital for services by diagnosis and not the level or length of care needed to treat a condition.

In 2007, 232 newborns were cared for in the NICU for a total of 1,193 patient days. Nursery services as a whole resulted in a net loss of $377,628 and the majority of that loss is a product of advanced NICU care.

“For a city like Salina to have the NICU services it has is a huge benefit to the community,” Bridge said. “Parents seem to develop a real bond with the staff and that makes it a home-like family atmosphere. We have several families that send us Christmas cards every year with updates on their little ones because there is such a bond here.”
2007 REPORT

Total Unreimbursed Community Benefit:
$22,472,801

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. Since becoming established in 1995 our focus has been on increasing access to quality health care services and adding value to the area.