

Community Commitment



Families find support for special needs children

For children born with disability and delay 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 three with 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, 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," said Tonya Gipe. Her twin brother Eli was born perfectly healthy.

Now, more than 17 months later, Abbey is making strides 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 Infant-Child Development when she was one month old and uses many of the services available which include physical, occupational and speech therapy, early childhood education, nursing, assistive technology and hearing and vision services.

"The service has been invaluable,"

"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."

– Tonya Gipe



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.

said Tonya Gipe, who works at Early Head Start. "My husband doesn't have the education background 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.

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Confidence for the Good Life

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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 like playgrounds, libraries, or McDonald's. The idea is to make treatment as applicable to real life as possible.

This summer staff worked with the Fruits and Hokett families of Delphos at their city park. Marcus Fruits, who turned two in December, was born with cerebral palsy. Shaylee Hokett, who turns one 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," said 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 depen-

dent on a feeding tube for needed nourishment for much of her life.

"We're looking forward to having her feeding tube removed this spring," Hokett said. "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," said Marcus's 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



Infant-Child Development staff traveled to Delphos in July to work with the Fruits and Hokett families.

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," said 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."

A community resource for health education and screening



Barb Gack, R.N., and Dr. John Kelemen, SRHC's Chief Cardiovascular and Thoracic Surgeon, discuss the importance of exercise at the Salina Senior Center.

Living healthy lifestyles and undergoing 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 of the leading forms of disease.

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

"The goal of these screenings is not only to find disease early, but also to improve public awareness," says Linda Hinnekamp, 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 also routinely provide educational programs to community groups and organizations. These events covered a wide range of topics including cardiovascular health, breast cancer, respiratory conditions, behavioral health, nutrition and fall prevention.

CHIP provides assistance to initiatives impacting community health



(Above) Salina Art Center's ARTbreak program for 3rd & 4th graders is sponsored in part by CHIP. (Right) Red Cross leaders assess efforts in the aftermath of the Chapman tornado.



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 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," said 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."

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 provides 24-7 sexual assault response care currently to 29 counties in north central and north western 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, county attorneys and 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," said Christina Trocheck, assistant Saline County attorney. "If we don't have this evidence or an admis-

sion 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."

A grant from the Salina Regional Health Foundation allowed for 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," said 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."



"It would be incredibly difficult to prosecute these cases without forensic evidence."

*— Christina Trocheck,
Assistant Saline Co. Attorney*

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 life.

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 do 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 failing to meet all of its indirect costs and professional salary compensation.

"Not treating mental health would be like not treating pneumonia," said 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."

Employees go above and beyond the call

Salina Regional Health Center employees are renowned for their willingness to give their time, talents and financial support to community projects.

Employees donated \$75,257 to the Salina Area United Way's 'Live United' campaign, which coupled with a 50 percent matching grant from the Salina Regional Health Foundation, raised more than \$112,886 for the cause making it the greatest employee-led contribution received this year.

Employees also volunteer to support projects for the Smoky Hill River Festival, Dream Night, Relay For Life, March of Dimes, Go Red for Women, Project Salina and Santa's Helpers programs. Whenever a call is put out for needed support employees quickly step forward to help.



"I think we're stepping up to the plate even more with the national economy so troubling," said Katie Fast, R.N., who volunteers annually for the River Festival and was the Emergency Department ambassador for the United Way campaign. "We recognize many of the people we're helping through these projects are our patients and it's a way to give back to them."



(Above) SRHC employees assisted guests at Rolling Hills Wildlife Adventure's Dream Night. (Left) Employees prepare to kick off this year's United Way campaign.



Hospital provides clinical training site for future professionals

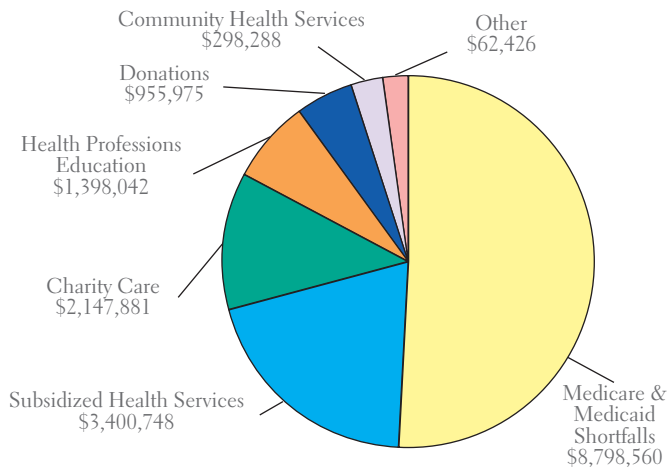
Area nursing, respiratory care, radiology, physical therapy and medical students gain a portion of their clinical education at Salina Regional Health Center. The hospital is also a training site for physicians specializing in family medicine at the Smoky Hill Family Medicine Residency Program.

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."

2008 Unreimbursed Community Benefit:

\$17,061,920



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.

The Mission

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

Hospital an asset for future economic growth

True to its name – 35 percent of Salina Regional Health Center's patients drive from outside Saline County to receive care. Equating to 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 last 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 makes a community strong and plays an important role in its ability

to grow in the future.

"Access to healthcare is critical to community growth," said 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



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

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.

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 they react to bring about the best possible outcome. These situations can be intimidating if they've never been encountered in real-life before.

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 hi-fidelity patient simulators that have pulses, 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, who gain clinical experience at Salina Regional, 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," said Kathy Pike, SRHC'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 said. "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.

"They didn't have this technology available when I was in school. I can see how great it can be for preparing nurses for practice."

– Wendy Gibson, RN

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 practiced

the spontaneous delivery of an obstetric patient.

"I've never seen an OB patient deliver in the Emergency Room," said 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



(Above) Emergency nurses practice the spontaneous delivery of a baby, while (Left) Cloud Co. nursing students practice resuscitating a 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, 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 said. "The possibility exists every day that patients won't allow students to learn on them."