

adds wing to help seniors who want assistance

“off-the-wall towns,” Stewart added, and they try to learn something interesting about each, as they “travel” through Washington, Idaho and on across the country. He said this activity is well attended, and everyone looks forward to discovering towns with unique names, like Hungry Horse, Mont.

Stewart said last October the facility was licensed for Home and Community Based Services, a part of Medicaid, but the majority of the residents pay their own way.

He said the owners want to explore adding more assisted living if the demand is there, but they may stay with the independent-living apartments if it's not.



Story time at the assisted living quarters at Fairview Estates in Colby, led by Cheryl Brenn, attracts residents who love to come and listen to Brenn read or tell stories she has learned through the years. The facility has been open for nearly a year, filling a need for those wanting the freedom of the assisted living atmosphere and the convenience of meals and in-house services.

— Photo by Vera Sloan/Colby Free Press

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Dr. Allard doing a well child check on Andrew Andrist with mom Sharissa Andrist.



JoAnn Klie instructing a patient what to do during aquatic therapy.

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The Veterans Affairs Outreach Clinic, 1177 Rose Ave. in Burlington, offers primary medical care of military veterans. Hours are 7 a.m. to 5:30 p.m. (Mountain Time) Monday through Thursday. The phone number is (719) 346-5239 or toll free (866) 901-8194. The clinic is is staffed by a nurse practioner and a nurse.

— Photo by Pat Schiefen/The Goodland Star-News

Outreach clinic gives veterans' health care services

By Pat Schiefen

The Goodland Star-News
pjschiefen@nwkansas.com

Veterans in a nine-county area of western Kansas and eastern Colorado can get their government-paid primary medical care at the Veterans Outreach Clinic at Burlington.

The clinic, at 1177 Rose Ave., is staffed four days a week by a nurse practitioner and a nurse to help the thousands of veterans in the area.

Hours are 7 a.m. to 5:30 p.m. (Mountain Time) Monday through Thursday. The phone number is (719) 346-5239 or toll free (866) 901-8194.

The clinic is part of the VA Eastern Colorado Health Care System, run out of the Denver Veterans Affairs Medical Center. It opened Oct. 15, 2007, after years of lobbying by area veterans and members of Congress, including Rep. Jerry Moran.

Veterans can get flu shots, checkups, evaluations, diagnosis and treatment of conditions that do not require hospitalization or a specialist. Veterans can access other services, including extended care and rehabilitation, a "medical foster home", mental health, nutrition and food services, pharmacy, a polytrauma care, specialty care, social workers, remote imaging of eye problems and women's health care.

A medical foster home is a partnership of adult foster care and home based primary care, said the Department of Veterans Affairs. When a veteran has declined to a point where it is no longer safe to remain living alone even with assistive devices and home care services usually the next step is a nursing home. When the veteran refuses to go to a nursing home the department finds caregivers in the community who take the veteran into their home and provide 24-hour supervision as well as needed personal assistance.

Polytrauma care is for veterans and returning servicemen with injuries to more than one physical region or organ system, one of which may be life threatening. This results in physical, cognitive, psychological or psychosocial impairments and functional disabilities. Some examples may be traumatic brain injury, hearing loss, amputations, fractures, burns and visual impairment. Teams of professionals from the relevant fields set up an individually tailored rehabilitation plan.

The clinic received from the town of Burlington to locate there the building rent free, paid utilities for three years, free maintenance and cleaning.

The city spent about \$200,000 on remodeling and expanding the building old Medical Arts Building, City Administrator Bob Churchwell

See VA, Page 29



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Cheyenne County promotes preventive

By Karen Krien

The Saint Francis Herald
karen.k@nwkansan.com

Cheyenne County Hospital's staff and administrator say they're out to make people healthier by promoting preventive medicine — whether they can pay or not.

"We want to maintain what the county has, as well as improve the quality of care to our citizens," said longtime administrator Les Lacy.

The past two years, Lacy said, has applied for and received Primary Care Clinic grants from the Kansas Department of Health and Environment for \$161,153. This year, he asked for \$140,000.

With this money, he said, the hospital, clinic and county health staff are better able to serve patients with no insurance or not enough.

"The ... patients assisted by this program are identified through use of our charity care program," Lacy said. "They are also identified through our electronic medical records and by our providers, for those patients needing a little extra help managing their conditions."

A case manager contacts patients who agree to go under this program. The manager identifies health needs based on grant goals, community health measures and chronic disease issues, such as diabetes, hypertension and obstetrics. Some drugs may be covered.

Cheyenne County Hospital

- Beds — 16
- Budget 2010 — Revenue \$6,767,176.
- Loss 2008 — \$583,429 including county health clinic, depreciation and recruitment.
- Total Revenue — \$5,731,831 before adjustments, audit.
- County Money — \$465,680 from property and sales tax in 2009.
- Doctors — Two physicians, two physician assistants and visiting specialists.
- Phone — (785) 332-2104.

"We provide primary care visits, diagnostic testing and imaging and limited pharmaceutical support," Lacy said.

Often, he said, a patient can avoid medical problems if they're caught early enough.

"Preventive medicine can forestall use of the emergency room, acute care and other more expensive avenues of care," the administrator added. "As the old adage says, 'an ounce of prevention is worth a pound of cure....'"

The hospital is one of just two in the state that operate the county health department. Lacy said that allows the hospital a way to promote well-

ness and prevention, which should help reduce the overall cost for treating the uninsured.

Having the department help in identifying those eligible for charity care also helps tie the clinic, hospital and health department closer together to help patients.

The main disadvantage of having the department under the hospital, Lacy said, is the fact that it loses money every year. The county appropriates \$10,600 each year and grants help offset the costs, but it costs about \$72,000 annually to run the service.

On Aug. 1, outpatient lab, X-ray and diagnos-

tic imaging costs at the hospital were cut by the hospital administration, leaving an estimated \$500,000 deficit for the year. However, Lacy said, this cut helps patients and the community. It also helps the hospital improve reimbursements from the Medicare program by altering some of the effects of the formulas in the Medicare cost report.

Being involved with the primary-care clinic allows the clinic and hospital to provide services similar to a community health center, Lacy said. Being able to offer these services allows the hospital to look for grants as a federally qualified health center.

In February, in conjunction with the Primary Care Clinic Grant, Mila Bandel, county health nurse and case manager, reported that the staff helped 78 families and individuals, mostly with nutrition education. Each month, she said, more clients join the program. Clinical appointments and procedures are scheduled and followed up through county health.

Bandel said she is working on five grant applications to help the department offer more services.

Monthly meetings with the administrator, clinic manager and county health staff where focus on community health and the goals in primary care are held, Lacy said.

"We are always looking at ways we can get better results in helping people," he added.

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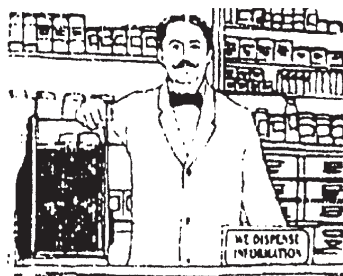


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medicine, health

Bandel is also the school nurse for the Cheylin Schools in Bird City and Lacy said he has been talking with the St. Francis school administration about taking over their service.

"We are actively looking at ways to have an impact in these areas and with the students," he said.

Bandel works with the Cheylin physical education teacher to assess students' body mass index, a measure of obesity. She also helps keep students' health files up to date.

The health department office is across the street from the hospital in the clinic basement, keeping all three together. Lacy said that's a convenience to patients, doctors and staff. The county has a clinic in Bird City and Bandel goes to the school in Bird City on Mondays.

The health department also offers Healthy Start Home Visitor training under of Amanda Jensen. Trained person help new mothers get used to life with a baby.

Bandel organizes and directs classes and meetings for the community. Speakers meet with the diabetes support group, which generally draw 18 to 20 people.

Babies delivered

For a number of years, no babies were delivered at the hospital. With the arrival of Dr. Rebecca Allard three years ago and physician assistant Kristle Raile, more women in the county and surrounding areas are coming to have their babies.

A delivery room, the necessary equipment and trained staff allow the hospital to offer a top-notch program. Lacy said plans are to renovate as needed to continue to serve these parents and their babies.

Last year, Lacy said, 23 babies were delivered and babies are being scheduled with increasing frequency.

"This service benefits from the same quality-improvement process we use throughout the rest of the facility," he said.

Improvement plans

"What do you think the county's demographics will be in 10 years," Lacy asked the hospital board at the March meeting.

One member said he worried that the ever-shrinking population would reduce the need for the hospital. Another disagreed, saying that she thought that economic development and the hospital needed to continue to move forward looking for new jobs. The hospital, she said, has grown in services. Cheyenne County is an area where grain and land prices are good and people are making a living.

We need forward thinking instead of living in fear and woe, she said.

The board must have agreed, because it decided to move forward with its facility improvement plans.

The board and staff met with architect Kent Carmichael to see the plan he had developed for remodeling and renovations. Lacy said he wanted to make sure that any planning would still fit the community's needs in 10 to 15 years.

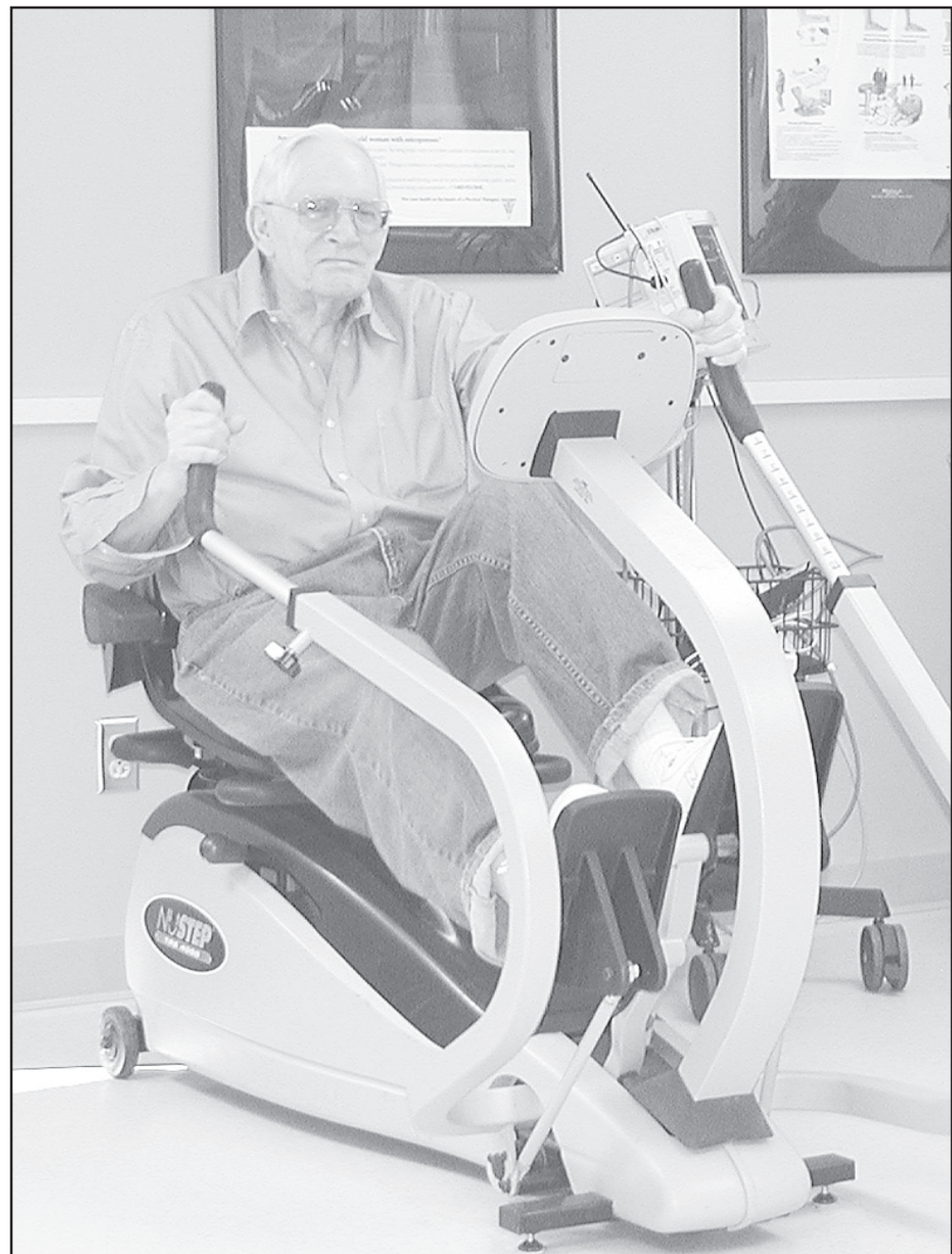
The last renovation, he noted, allowed no provision for the specialty doctors who visit and bypassed the obstetrics room, the kitchen and dining room. The last facility improvement plan began in 1996.

Some of the key issues the new facility improvement plan is to deal with, he said, are crowding of patients on surgery day, confidentiality, lack of space for outpatient services, a specialty consult area, obstetrics and kitchen and dining room improvements.

In addition, diagnostic imaging is cramped and scattered through the building, Lacy said.

Some minor improvements have been made to meet the state fire safety regulations, mostly bringing the kitchen up to date.

Improvements will continue, Lacy said, but the long-range plan is to grow the hospital to better handle future needs. How the plan will be financed is still a question.



Exercise equipment is available in the physical therapy department at the Cheyenne County Hospital. Floyd Jensen of St. Francis, were spending time on the NuStep equipment.

— Photo by Karen Krien/The Saint Francis Herald

Preventive medicine can mean many things to people

By Marian Ballard

Colby Free Press
mballard@nwkanas.com

Mention prevention medicine to any five people you meet, and you may get five answers.

To a parent, vegetables and tooth-brushing might come to mind. To a college student, prevention may mean exercise, sleeping right and staying away from alcohol, drugs and tobacco.

To Mike Larmer, a pharmacist at Palace Drug in Colby, prevention means the very best management of your health care regimen so that everything you do to maintain your health and combat illness works together.

Medication therapy management is one way a pharmacist can help with that, he explained. A patient schedules an appointment with their pharmacist to bring in all those bottles of pills

at once for a professional assessment. This can include prescriptions, sometimes from several different doctors, and over-the-counter remedies, along with vitamins and herbs.

Looking at everything together, you can learn about the best way to benefit from what you take, he said, as well as be alerted to any potential problems or drug interactions. Topics can include timing doses so they do the most good and factors such as whether a particular item should be taken with food, possible side effects, cautions related to age and existing health conditions, and other issues.

While there is a charge for these session, Larmer said, their benefit can be invaluable.

The pharmacist, who has trained as a self-care consultant, said he helps people work to choose the best over-the-counter remedies for preventive care.

Randy Smith, co-owner of Palace Drug with his wife Linda, mentioned that pharmacists can now be certified to administer vaccines, an important role when medications such as the H1N1 influenza shots need to be given to as many people as possible. While they do not give vaccinations to anyone under 6, they are now part of the team as the health professionals many people actually see most often.

Vaccinations are an important preventive-medicine item provided by the Thomas County Health Department. The department gives vaccinations from normal childhood immunizations to travel vaccinations for those going to other countries.

In addition, they investigate diseases identified in the county in order to prevent larger outbreaks, including sexually transmitted diseases, communicable diseases, vaccine-preventable

diseases and food-borne illness. Registered nurses Amy Knipp and Kathy Ryan explained that some lab reports must be sent to the Kansas Department of Health and Environment, which then notifies them which ones to follow up.

The department sees reducing chronic disease as an important part of its work, through education and developing programs to help people stopping smoking and improving nutrition and fitness.

Administrator Kasiah Rothchild said knowing the resources of the community is an important part of their job, so they can help people find an exercise program, hook them up with the community garden, and do everything they can to encourage everyone to make healthy choices in life.



Becky Tate was working on the new online medication administration records at the Decatur County Hospital. — Photo by Kimberly Davis/The Oberlin Herald

2010 looking better

By Kimberly Davis

k.davis@nwkansas.com
The Oberlin Herald

The Decatur County Hospital lost money in 2009, but so far, the administrator says, 2010 is looking better.

It has affected the hospital, said Administrator Lynn Doeden. People aren't doing as many elective surgeries as they have in the past.

In some cases, people aren't able to afford their co-payments, she said, and are waiting for better times. Some aren't being proactive about health problems, said Mrs. Doeden, so they wait to save money and come in sicker.

She said the hospital is also seeing more self-pay patients.

The hospital's revenue last year was \$6,739,931 with the expenses at \$7,127,776, for a loss of \$387,845. These are audited numbers.

The hospital employs 122 part-time, full-time and fill-in workers, said Mrs. Doeden. While no one has been laid off, she said, all of the full-time workers did agree to go to 38 hours a week this year to help save money.

In September, said Mrs. Doeden, the hospital only had eight patients. Despite the swine flu scare, the hospital didn't have as many flu patients as it has in the past.

With President Obama's health-care bill to bring major changes, she said, the hospital is trying to freeze costs until they see what happens.

With the bill, said Mrs. Doeden, there will be a decrease in Medicare and Medicaid payments, which will mean less revenue for the hospital. With that, she said, they have had to look at expenses.

One way to get a little more money back, she said, is to get all of the medical records in an electronic form. That would mean the hospital would be "paperless," with everything kept on computers.

The government, said Mrs. Doeden, has strict standards for becoming a paperless facility. It's hard to meet all those rules.

The biggest problem is sharing the information from one facility to another and not having to mail anything. Hospitals need to have a network and someone who will be in charge of making sure that information is safe and remains private.

The hospital would then get 1 percent of the gross revenue on Medicare patients back in 2011 and the percentage would grow. Of the patients seen at the hospital today, she said, 79 percent — nearly four-fifths — are on Medicare.

The American Hospital Association, said Mrs. Doeden, is talking to Medicare to get the hospitals more time before all of the electronic-

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for Decatur County Hospital finances



- Beds — 24 as Critical Access Hospital, 37 long-term nursing care.
- Revenue 2009 — \$6,739,931, expenses of \$7,127,776.
- Loss 2009 — \$387,845.
- County Money — \$217,964.
- Doctors — Two physicians, one physician assistant, one nurse practitioner.
- Administrator Lynn Doeden.
- Phone — (785) 475-2208.

care and the importance of keeping it and the jobs here.

While former Kansas Gov. Kathleen Sebelius is secretary of health and human services on the national level, Mrs. Doeden said she doesn't think she's going to help hospitals out here much.

A specialty clinic was added onto the hospital in 2008 and now offers services by specialists in bone, heart, urinary tract, cancer and foot problems and outpatient surgery.

Mrs. Doeden said the hospital is providing more chemotherapy for cancer patients, and microbiology service, which identifies the organism causing a disease and provides the doctors with a treatment plan earlier. This gives the doctors the information in 48 hours, said Mrs. Doeden, instead of having to wait a week for a lab in Hays.

Last year, said Mrs. Doeden, the hospital has had 348 patients in acute care, 95 in the "swing" beds, 378 in observation and 1,060 in the specialty clinic.

The lab did 75,179 units of lab work, an increase over the previous year, she said. The hospital served 52,513 meals and did 131,240 pounds of laundry.

The hospital also operates Cedar Living Center, a 37-bed nursing home in a wing to the south of the patient rooms. She said it was 97 percent full last year. While the center doesn't operate with the same staff as the hospital, said Mrs.

Doeden, some of the employees have been going home in the afternoons if there isn't anything for them to do, to help cut back on spending.

The hospital also manages Wheat Ridge Ter-

aces, a 12-room independent living apartment complex near the Decatur County Fairground. Mrs. Doeden said there is only one empty apartment.

County has many options for health care of residents

Decatur County has a wide range of health care options for its residents and those around the area.

The county has two retirement homes, an independent-living apartment facility, a clinic, county health department, chiropractic care, a dentist, optometry, a pharmacy and a home medical supply business.

The Oberlin Medical Arts Clinic, or the Oberlin Clinic, as most call it, has two doctors, a nurse practitioner and a physician assistant to care for patients of all ages.

The independent rural health clinic, said Administrator Barb Whitney, is owned and operated by Dr. Stelian N. Andrecu and Dr. Elizabeth A. Sliter.

The clinic offers total family care, including general and wellness exams, excisions, cryosurgery (freezing lesions), help for cuts and broken bones, serving children and seniors. Providers

cover the emergency care and offer botox and laser treatments, allergy injections and blood-pressure checks.

Whitney said the clinic has its own lab and X-ray. They can do bone-density tests and electrocardiograms to help make it more convenient and less costly for patients needing tests.

The lab is staffed with Norman Wendelin, who's worked there for 14 years, and Jeannie Gawith, who's been there for 19 years. Wendelin said they do blood counts, hemoglobin, X-rays, getting results out of the 24-hour heart monitors and more. Jeannie Martin works in the lab once a week and a few others fill in.

It's nice to have the lab, said Wendelin, because the doctors can see the results when they see the patients. The lab runs a little longer hours than the clinic, he said, normally staying open

See OPTIONS, Page 34

records rules have to be met.

That 1 percent would mean \$25,000 for the hospital in 2011, she added.

Mrs. Doeden said she has talked with the area's state legislators, Rep. John Faber and Sen. Ralph Ostmeyer, about the coming cuts. She said the hospital will have to cut jobs or services. She said she encourages people to write Congressman Jerry Moran about health

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Norton County adds equipment, facilities,



- Beds — 25, critical access hospital.
- Budget 2009 Revenue \$12,259,466.
- Profit 2009 — \$443,972.
- County money — \$85,000.
- Doctors — Three physicians, two physician assistants and one nurse practitioner.
- Administrator — Rich Miller.
- Phone — (785) 877-3351.

By Erica Bradley

The Norton Telegram
ebradley@kansas.com

In an effort to provide better service to patients, Norton County Hospital is adding equipment and facilities with the construction of a \$2.5 million clinic, plus more staff and services.

Administrator Rich Miller said they will take bids in May, with construction planned to start

in June. The new clinic is expected to be about 9,000 square feet with 17 exam rooms, eight offices and storage space. Miller said a covered walkway will connect the main entrance and a parking lot. New features will improve compliance with federal privacy requirements.

"We're out of space at the current clinic," Miller said.

Miller said the new clinic will be on the southwest side of the hospital, while the old one is a few blocks away.

"It will be directly adjacent," Miller said. "We'll have direct access to the hospital."

Miller said \$1.2 million of the cost will come from a U.S. Department of Agriculture Rural Development long-term loan, and the rest from operating reserves.

The new clinic will allow the hospital to have more doctors and expand its facilities.

Miller said Dr. Marty Griffy will join the staff in August. A Norton native, he is completing a residency in internal medicine in Wichita.

Gary Hembd, a certified registered nurse anesthetist, joined the staff April 12 from Minneapolis. The hospital and clinic have three doctors, two physician assistants and a nurse practitioner.

Hospital services include surgery, delivering, radiology and imaging, physical therapy, a lab, respiratory therapy, cardiac rehabilitation, electrocardiograph testing, ultrasound, magnetic



Norton County Hospital Director of Radiology Mitch Bartels ran a diagnostic scan on the new General Electric CT scanner. The high-resolution machine allows doctors to see better images.
— Photo by Erica Bradley/The Norton Telegram

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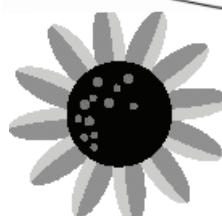
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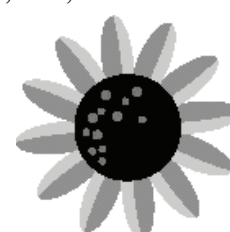


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