

Community effort creates wellness center

By **Ava Betz**
The Goodland Star-News
 abetz@nwkansas.com

When the citizens of Sheridan County want something, they go after it.

Sheridan County, with a total population of 2,813 according to the 2000 census, and its county seat, Hoxie, with 1,244 members of that county population, will soon have a facility that many larger communities lack—a wellness center.

The Sheridan County Wellness Center hopes to open its doors “around May 1,” according to Yvette Hartzog, co-convenor of the project.

The precise opening date is uncertain pending the arrival of the exercise equipment, she explained.

Location of the Wellness Center will be at the east end of the Sheridan County Hospital in the basement. It will be handicap accessible and will be open to the public. The facility will be self-maintained, requiring no employees. A minimal fee will be charged, Hartzog explained, to help with maintenance and equipment

replacement, but it will be kept low “so that everyone can use it. We don’t want cost to be an issue.”

The facility will have a cushioned walking track planned to be easy on knee and hip joints, ellipticals, recumbent bike, and treadmills, some weight equipment—the stuff that helps keep people healthy—along with flat screen televisions to help keep people interested in keeping healthy. The facility will be monitored from the hospital’s nurses’ station and the hospital will be providing maintenance and security services in addition to providing room for the Wellness Center itself.

Hartzog had high praise for the hospital’s role in helping the center and high praise for the community enthusiasm which made the center a reality.

Here is how it happened:

Although there had been talk in the community for some time about the need for a wellness center, it never seemed to get going, Hartzog said. Then Working Together Sheridan County, a community action organiza-

tion, held a Town Square meeting to determine what the people of Sheridan County wanted in their community. The idea of a wellness center came to the front. Two “co-conveners” and a team were assembled to organize the project. The first meeting was held Aug. 18, 2008, and “We just got after it,” she said.

The project took some legwork, and the team was able to use information that had been gathered in prior efforts. A brochure and news articles to educate the public on the project helped build both enthusiasm and donations.

The group applied for and received a grant. What ultimately helped, Hartzog said, was the drive in the community to “make this happen.”

Although, she said, “we’ve got a lot to do,” success is in sight. The big question the community is being asked now is not, “Do you want a wellness center?” but, “What hours do you want it to be open?”

“It starts with one person wanting more for their community. Then gathering like interested people, with

a county or city vision to be more than what they are. By taking one step at a time, the goal will be achieved. What matters most, is working together and looking to the wants and needs of others. All things are possible!

“We’ve seen a great positive re-

sponse,” Hartzog said, noting positive reactions in small communities are a healthy sign in themselves. There are grants available to help communities make their dreams come true, she is encouraged, and they are not that difficult to obtain.

Public vote, new doctor help expand complex

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the title doesn’t include calling their art “A Big Mess”. Though the work produced is impressive, there is plenty of laughter mixed in with the paint, Moore noted.

Moore theorized that many of the residents did not have art in their schools when they were growing up, either because it was not part of the curriculum, or because there was no money for it during the years of the

Great Depression. She has found that the art program has been greeted with enthusiasm because the residents not only want to keep busy, but they are eager to learn.

Once a year the artists display their work at an art show. It is a catered event with live music and family, friends and the community at large are invited. If you are lucky enough to be in Hoxie for this event, prepare to be impressed.

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Cheyenne upgrading electronic documentation

By Karen Krien

The Saint Francis Herald
karen.k@nwkansas.com

In 2006, there were less than 10 percent of the hospitals in the United States using electronic medical records. Two years ago, the Cheyenne County Clinic implemented the electronic records and, at the present time, the hospital has implemented nursing documentation and assessments which is used by nurses for acute care and swing bed patients.

"We are upgrading our laboratory information system software to better meet patient and provider needs," said Les Lacy, hospital administrator. "We are also working to implement phase two of our electronic nursing documentation which includes surgery and outpatient services."

In the near future, the physical therapy component of electronic records will be implemented.

The administrator said the staff is working toward e-pharmacy solution. This is a way for pharmacists to check medication orders and make recommendations concurrent to the patient's stay.

Previously, he said, this has been done on a once-a-week basis.

"This is a boon to patient safety and should help improve our drug utilization," Lacy said.

Cheyenne County Hospital

- Beds 16 .
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- County money 2008 \$527,587 from property and sales tax.
- Doctors Two physicians, two physician assistants and 15 visiting specialists.
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With the electronic records, the clinic staff is able to fax pharmacy orders from the physician's wireless computer, he said.

"This (electronic records) has really changed my work flow," said Dr. Mary Beth Miller. "I wouldn't consider going someplace that didn't have this."

"This is one of the reasons I like to practice here."

The clinic has been paperless for about 2 years, said Lacy.

The hospital, he said, is currently a "hybrid" system—part paper and part electronic—a transition step to being fully transitioned by 2011.

Ultrasound

The hospital will offer ultrasound by the

first of May. This is a great service to patients as they will not have to travel distances for the service.

Darrell Reed, MT has attended ultrasound training for over 2 years and will be certified to provide a variety of ultrasound exams including vascular studies and echocardiograms in addition to standard ultrasound exams.

Reed will be the only certified ultrasound technician between Denver and Hays when he completes his certification exams.

The hospital leases a state-of-the-art ultrasound machine and anticipates increased volume in the near future.

In addition the hospital anticipates being able to offer professional training for X-ray, lab and

ultrasound.

With Darrel being able to train in these areas, said Lacy, we are proactively dealing with the oncoming healthcare workforce shortages.

"The hospital has been a long-time supporter of the Kansas Nursing Scholarship Loan Program," Lacy said. "Most of the current nursing staff have benefitted from this program."

County health department

The Cheyenne County Hospital is one of the few hospitals in Kansas that operates a county health department. It is headed by Mila Bandel, R.N. and includes Amanda Jensen, who has recently completed Healthy Start Home Visitor training from KDHE.

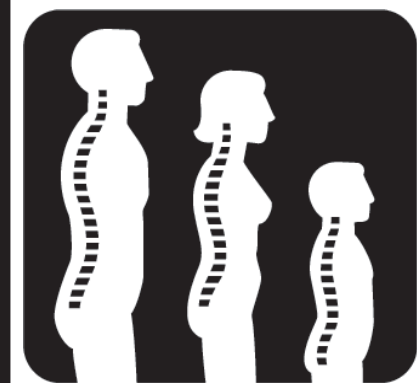
The department is open in St. Francis on Tuesdays from 8:30-4:30 p.m.; Wednesdays - 1 p.m.-4:30 p.m.; and on Thursdays from 8:30 a.m.-4:30 p.m. and is in Bird City Clinic Wednesdays from 9 a.m.-Noon.

Having the health department with the hospital has advantages including being able to better coordinate primary care services to the entire county. County Health is handled as a department of the hospital.

This, said Lacy, allows us an avenue to advance an agenda of wellness and prevention that will help reduce overall cost of care.

The disadvantage of having the health depart-

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ment under the hospital is fact that it loses money every year. The county appropriates \$10,600 each year and there are various grants which help offset the costs however, it costs approximately \$72,000 annually to keep it up and running.

Babies delivered

For a number of years, there were no babies delivered at the hospital. With the arrival of Dr. Rebecca Allard two years ago, and Kristle Raile, physician assistant, the number of pregnant women in the county and surrounding counties coming to have their babies at the hospital is growing.

A delivery room, the equipment needed, and training/staffing levels to provide a top notch program has been established. Future plans are to renovate as necessary to continue to serve these parents and their new babies with top notch care.

Last year, Lacy said, 14 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.

Building improvement plan

For several years, the hospital's kitchen remodel has been on the board's agenda. The kitchen is original to the building with a few updates. However, more work space and dining



USING THE ELECTRONIC MEDICAL RECORD computers at the Cheyenne County Hospital are (left) Tenille Lee, director of nursing; and Dr. Rebecca Allard.
Photo by Karen Krien/The Saint Francis Herald/Bird City Times

area are needed.

Architect Kent Carmichael, Garden City, has been working on an improvement plan and Lacy has been working toward securing funds for the remodel. Over the past two years, there have been several estimates on what the project would cost.

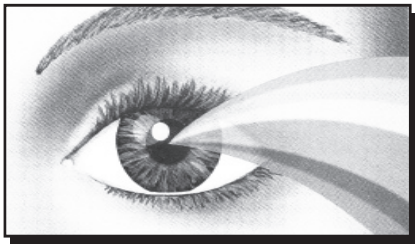
The board has budgeted \$300,000 for the project. Plans would include moving the dish-washing area, office and dining room. New cabinets, counters, flooring and appliances would be installed.

The Kansas Department of Health and Environment has indicated that improvements need to be made. The Board is working to have renovation underway prior to the next survey to prevent redundant expense with potential requirements to make stop-gap repairs that would have to be replaced in a renovation. If this happens, it will be even more expensive for the board as part of it will need to be done when the remodeling is done.

"Spending dollars for replacement of floors, countertops and other services to pass inspection is the short term so we can pass inspection," said Lacy, "may be redundant expenses as this would need to be done anyway in a remodel."

The kitchen remodeling project is a poten-

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Cheyenne County clinic remodeled, expands

By Karen Krien

The Saint Francis Herald
karen.k@nwkansas.com

The Cheyenne County Clinic at 221 W. First, and the hospital at 210 W. First, St. Francis, have been remodeled with an addition to the west of the old facility. There is also a clinic in Bird City at 221 W. Bressler.

The hospital is a Critical Access Hospital, meeting the primary hospital care needs of the community. The hospital is prepared to handle a variety of emergency issues from medical emergencies, to traumatic injuries, and delivering a baby.

Medical staff

Mary Beth Miller, medical doctor, joined the hospital staff in 1999; and Rebecca Allard, medical doctor, began in August 2007. Other providers include Kristle Railen and Tyler Raile, physician assistants; and Jenny Niblock, ARNP. Patrick Delano retired last year.

The doctors and physician assistants work out of the clinics in St. Francis and Bird City seeing patients in St. Francis six days a week, and in Bird City, five days a week. They also care for hospitalized patients and share call responsibilities after hours and on weekends.

Surgeons/ specialists

The hospital is working with surgeon Dr.



DARREL REED, diagnostics manager, is checking out the baby being carried by Blanca Espino, St. Francis. Reed, when certified, will be the only certified ultrasound technician between Denver and Hays.

Photo by Karen Krien/The Saint Francis Herald/Bird City Times

Charles Frankum. Dr. Frankum comes to the hospital every other week where he sees patients and performs surgeries. He specializes in colon and rectal surgery, advanced laparoscopic and general surgery. He also works in other hospitals in the area.

Kim Zwegygart, certified registered nurse anesthetist, lives in St. Francis and works at the hospital as well as other area hospitals.

Other specialists at the hospital include:

- Dr. James Warren, cardiologist.
- Dr. Karen Johnson, dermatology.
- Dr. Mekki El-Saba, Orthopedist
- Dr. Martin Rubinowitz, oncology.

Pathology physicians are: Dr. Byron Barksdale, Dr. Lyle Barksdale, Dr. Delane Wycoff and Dr. Dorothy Wycoff.

Dr. James Reeves, podiatrist.

Radiologists include: Dr. Daniel L. Fuerst, Dr. Robert Hyde, Dr. Jeffrey Lee, Dr. Richard Jerde, and Dr. Rodney Johnson.

At the present time, the Cheyenne County Hospital administrator is seeking another urologist.

Dentists

Cheyenne County has two dentists, both located in St. Francis.

Dr. Tim Poling is located at 200 W. Washington in downtown St. Francis.

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to the west, a clinic open in Bird City

Dr. Melvin Dunn's office is at 300 N. College Street, just north of the high school.

Chiropractors

Dr. Patrick Stuart is at 115 S. Quincy, St. Francis.

Dr. Ryan Unger took over the Fair Chiropractic business from Dr. Doug Fair. The office is located at 120 N. Scott, St. Francis.

Dr. Brett Poling opened his business in the building which once belonged to his grandpa Joe Winston at 709 S. Benton.

Pharmacies

Krien Pharmacy, owned by Kody and Penny Krien, is located at 105 W. Washington. Mr. Krien carries a full line of pharmaceutical needs, cards and gift items along with the recent addition of handicap equipment.

Massage therapists

Cheyenne County has two massage therapists at this time. Bruce Roelfs has an office at 315 South Scott Street in St. Francis.

Raedell Winston sees patients at Poling Chiropractic, 709 S. Benton, St. Francis.

Nursing home

Good Samaritan Village is located on U.S. 36.

A portion of the facility was remodeled and residents were settled in their new rooms with bay windows. Seven new rest rooms were added.

The nursing home is equipped to handle 50 residents and has a staff adequate to provide for them. A sun room filled with plants was added two years ago and the grounds have been renovated for the enjoyment and use of the residents. Residents have the opportunities for outings in town and

out-of-town, shopping trips, fishing and picnics, just to name a few of the activities.

The staff offers Meals on Wheels several days during the week when the senior center is not delivering.

The Village also has 14 independent living apartments.

Home Health Care

The Good Samaritan Home Society - Northwest Kansas Home Health

Care facility serves clients in Cheyenne, Sherman and Rawlins counties.

The staff plans to expand to Thomas County as soon as additional staff is available. The home health office offers physical and speech therapy along with skilled nursing, certified nursing aides and homemaker services. The homemaker services is especially nice for the home-bound people as the staff will perform small housekeeping du-

ties, run errands, do grocery shopping and even fix a meal.

Cheryl Lee, R.N., is the director. She assumed the position at the first of the year, having been in nursing for 26 years.

The home health care facility contracts with the Northwest Kansas Area Agency on Aging to provide homemaker and personal care assistance.

Cheyenne hospital upgrading electronic software

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tial Kansas Tax Credit project. The hospital has had three prior tax credit projects which have benefitted the hospital by a total of \$780,000.

Lacy said the application for tax credits is very similar to a grant application. The due date is not yet been announced pending approval of the program by the state. "There may be some point where tax credits will be cut from the state's budget," he said.

Utilization review process

In the last year, Susan Roelfs, R.N.,

took over the utilization review process at the hospital. She consults with physicians to make sure patients are cared for under the proper admission status.

Having Roelfs in the position insures the hospital will get paid and helps patients benefit from insurance products they have already paid for. "This is a win-win for patients and the hospital," Lacy said.

Roelfs reviews the patient's hospital records daily (except for weekends). She compares the criteria of the condition and the treatments, documenting

to assure the hospital and staff are meeting the various standards set by the review organizations.

Lacy said that when the physician believes a level of care is needed but has not been able to document that standard, the utilization review process helps to define the gaps in service or documentation that will permit medicine to be practiced as it should be.

Historically, Lacy said, this process has been done after the fact.

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Tina Jallow, ARNP

'Not a band-aid station'

Three highways insure hospital sees lots of action

By Ava Betz
The Goodland Star-News
abetz@nwks.com

Three highways insure plenty of action for Logan County Hospital, located at Oakley. Though Oakley itself has a population of 2,173 in Logan County, with a total population of 3,046, according to the 2000 census, I-70, U.S. 40 and K-83 all carry their share of traffic – and potential patients.

Some are involved in accidents, some may have medical emergencies while traveling, but they find their way to the hospital, notes Darcy Howard, chief executive officer of Logan County Hospital since February. Previously chief financial officer for the hospital for six years, Howard has had the opportunity to see a lot of traffic come and go.

But that is only part of the health care picture in Logan County.

Howard works with a management team comprised of Marcia Kruse, director of Nursing; Aimee Zimmerman, director of Risk Management, Quality Assurance and Corporate Compliance; Carol Boyd, director of Nursing at Logan County Manor; Gerry Baalman, director of Ancillary Services and Physical Therapy director; and Jerry Acton, Maintenance director.

"We do offer a lot of outpatient services locally," Howard says, noting the hospital offers laparoscopic surgery, has a brand new CT machine and the radiology department has been totally computerized. "We have a fully staffed lab – we can provide all outpatient lab work. I think that is important for people to know. No

matter what health care provider they go to, whether it is a local provider or they see a doctor in Denver, they can have all their lab work and x-ray work done locally."

Having a multi-service local hospital becomes especially important in hard economic times. Because Logan County Hospital has a rehabilitation department, area residents who have medical procedures which require either pre-or post-operative rehabilitation can begin preparation or continue their recovery close to home. This includes cardiac patients, patients recovering from strokes, and patients having total hip or knee joint replacement surgeries.

The department started 15 years ago "from the ground up," according

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GLEN DAVIS OF OAKLEY, foreground, uses equipment in the Fit for Life program at Logan County Hospital under the watchful eye of Jeannie Rehmer. In the background, Richard Kvasnicka of Oakley also logs a few treadmill miles. The Fit for Life program is an extension of cardiac rehabilitation and has proved popular with patients, according to Physical Therapy Director Gerry Baalman.

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to Gerry Baalman, director of physical therapy services and ancillary services at the hospital. Since then it has expanded three times and now could use even a little more elbow room. A factor that allows the hospital to offer such good local care is its state-of-the-art equipment. One such machine is a Hivamat, which helps with a variety of medical issues, including pain and swelling. Logan County Hospital was the first hospital in Kansas to have this machine, Baalman said, adding, "That machine has the capability of being used on a lot of different diagnoses." A new model of the machine has come out, and the Hivamat has proved to be so popular with the doctors and so useful in treating patients, the newer version has already been ordered, she said.

Another machine in physical therapy is a Biodex Balance System which, again, serves a variety of patients with differing diagnoses. It can be used for post-surgical strengthening, fall assessment and sports training.

Two major benefits of having therapy close to home is being able to heal where you have familiar faces and where you can receive continuity of care, Baalman said. Having physical therapy several times a week would be an impossible commute unless the service is provided locally.

The hospital also serves the community by bringing in medical specialists several times a month so that local residents have access to



MEMBERS OF THE LOGAN COUNTY Hospital management team are: CEO Darcy Howard; Marcia Kruse, director of Nursing; Amy Zimmerman, director of Risk Management/Quality Assurance/Corporate Compliance; Carol Boyd, director of Nursing at Logan County Manor; Gerry Baalman, director of Ancillary Services and Physical Therapy; and Jerry Acton, Maintenance director.

Photos by Ava Betz/The Goodland Star-News

ophthalmologists, cardiologists, orthopedic and other health care professionals without having to drive long distances.

When cardiac patients have completed their recovery they can benefit from another service offered at the hospital called "Fit for Life." The Fit for Life program helps provide guidance and encouragement for patients to live a healthy lifestyle and, hopefully, prevent problems from recurring. "It caters to a different segment of the population" than other maintenance services

available in the community, Baalman said, and has become quite popular. It is a place to exercise together and be encouraged to maintain a healthy lifestyle.

The Logan County Hospital building is 33 years old and credit for its polished appearance and functioning systems must be given to Maintenance Director Jerry Acton. Because of the skills of Acton and his staff, all maintenance and repairs, which in the past had to be hired out, can now be handled in house. The hospital


is "Very lucky, very, very lucky" to have Acton on staff, Howard said.

The responsibilities of Acton's staff are constant "because we never close," he said. Keeping systems running and facilities maintained in a building that is in use 24 hours a day, seven days a week keeps his staff of five on their toes.

Carol Boyd is director of nursing at Logan County Manor, located across town. The nursing home facility is a 46-bed unit which is 45 years old and which has been added to and upgraded over the years. Currently, and unlike the norm in nursing homes, the Manor has a preponderance of male residents, according to Boyd, who said she is not recommending opening a dating service there — yet. There are foot care and grooming sessions with nail care and salon services available. A nurse-practitioner comes in to do foot care. "That's very nice to have," she said.


In addition to Bingo three days a week, a new sound system which makes participating in activities easier for the hearing impaired, community coffees, and other community and school activities at the Manor, the residents of Logan County Manor participate in an activity called "Alley Cats." The Alley Cats board a handicap accessible bus and tour the streets and alleys of Oakley. "It's fun," Boyd said, and has proven to be a popular activity. "Some that never get out will go on that," she added. "We try to keep them busy." Another activity which

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Recruiting staff an on-going effort for Logan hospital

By Ava Betz
The Goodland Star-News
 abetz@nwkansas.com

None of the health care services at Logan County Hospital would be possible without trained and dedicated staff.

"We are constantly on the lookout for good staff," Darcy Howard, chief executive officer, said. "Right now we are looking hardest for frontline staff: housekeeping, dietary, CNA..."

Director of Nursing Marcia Kruse agrees. "You are always looking for good people to be a part of your organization," she said. It is a job situation that benefits both employer and employee. "Any small critical access hospital is the best place for any nurse to start a career," Kruse said. "It teaches you everything in every field. So you have to be proficient and efficient in your skills in critical access because you're going to be working in every area."

Young nurses who want to start their careers working in a large city "don't realize they are a number and they are going to get lost in the system," Kruse noted. "The best nurses

will be developed in critical access hospitals because of the education they are going to be getting in every area of nursing." She explained that in a larger system a nurse will be placed in one area and may find it difficult or impossible to move into a different area of nursing for lack of experience. "They don't realize that if they start out their careers in a small hospital they will be a much better nurse in the end," Kruse said, adding, "I've had a great career in nursing and I started in a small hospital." Without that multiple-skills experience, she said, she could not have done flight team and trauma one emergency work.

Aimme Zimmerman director of Risk Management, Quality Assurance and Corporate Compliance agreed. "People underestimate how much you have to know as a nurse here and what goes on in a small hospital. People hear 'critical access' and they automatically associate it with 'Band-Aid station'.

"But if they saw on an everyday basis the things that go on inside these buildings, I think they would be amazed, not only at the critical access

hospital level, but at the long term level. People underestimate what the nurses at the long term care level do every single day. It's hard to get people to step in the door and take a look and see how exciting and how rewarding and how cool it can be to work in a rural area.

"Once they are here, it's different. You have the excitement and you have the reward of getting to know your patients, getting to know the residents and being able to touch them

personally. You don't have that in a big city because they are in and out so much."

"And being able to see them after they've left the hospital," Kruse added. "That's awesome." The personal care extends beyond hospital walls. She recalled a former patient who had to go to another hospital calling to ask her what she should take with her. "It's great to help them and good to see them and see what you've done for them," she said.

Another benefit of hospital work in a small town is the camaraderie that develops among the staff. Kruse said, "In the city you don't become as good friends with your teammates because you don't see them. You don't work with them every day." In a smaller work environment, "you develop that relationship and you bond," she said. It's an experience "that you don't get anywhere else."

Logan County hospital sees lots of action

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brings the community and residents together is a mail-in of cards and letters to residents called, "You've Got Mail." A reminder is placed in the local newspaper before holidays asking people and organizations to send cards to residents.

The hospital also has 20 independent living apartments and the residents of those apartments sometimes share

activities at the Manor. On Howard's wish list is an assisted living facility for the community. "We have a lot of elderly in our community," Howard said. As the population ages, there will be increasing demands made on medical facilities everywhere, including small communities.

In addition to the medical treatment challenges of an aging population, there are many changes in medical technology as well, she said. One of the

changes, which for the Logan County Hospital will start this summer, is the change to electronic medical records. This change will be phased in over the next few years. "We're excited to see how the stimulus money will help us with that," she said, referring to the Federal stimulus package recently authorized by Congress. "We don't have clear-cut answers at this point, but I feel confident there will be some reimbursement there."

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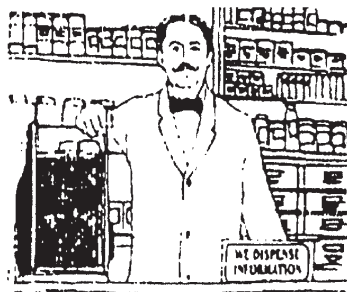
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