

OCMH: THE BEAT

Osborne County Memorial Hospital Newsletter

Spring 2019



OCMH Recognized as 2019 Top 100 Critical Access Hospital



Osborne County Memorial Hospital (OCMH) in Osborne, KS, has been named one of the Top 100 Critical Access Hospitals in the United States by The Chartis Center for Rural Health. Regarded as one of the industry's most significant designations of performance excellence, the annual Top 100 Critical Access Hospitals award is based upon the results of the Hospital Strength INDEX® from iVantage Health Analytics.

"It is exciting for our hospital and staff to receive this award for the second straight year in a row," said Marianna Harris, OCMH CEO. "We have set objectives and goals in our strategic plan in the areas of service, people, quality, finance and growth and everyone from the employees, medical staff and board have been working hard as a team to meet or exceed these objectives."

Hospitals recognized as a Top 100 facility scored in the top 100 among all Critical Access Hospitals nationally. Now in its ninth year, the INDEX leverages 50 rural-relevant indicators across eight pillars of hospital strength (i.e. Inpatient Market Share, Outpatient Market Share, Cost, Charge, Quality, Outcomes, Patient Perspective and Financial Stability) to determine an overall score for each hospital. Each of the INDEX's 50 indicators is culled from publicly-available data sources.

"In an era of increased complexity and uncertainty, Top 100 hospitals have established themselves as a bellwether for rural provider performance," said Michael Topchik, National Leader of The Chartis Center for Rural Health. "Top 100 status is a real indicator of how proactive these hospitals are when it comes to pushing for performance improvement in areas such as quality, outcomes, patient safety, market share and finance."

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A Word from our CEO...

We experienced a cold and wet winter compared to last year; however, the construction project continued to move forward. According to Hutton Construction, we are only two weeks behind schedule due to the inclement weather but this does not affect the completion date of January 2020. As a matter of fact, if you have been watching the progress the past two weeks it is exciting to see the daily changes. Hutton Construction is doing an excellent job with planning, coordinating and supervising the project.

Since the community is not able to drive up close to keep up with the progress of the project, we have several ways you can view the project. If you go to our website under the New Construction tab, you have the opportunity to view the live webcam, drone footage or progress photos. If you follow us on our Facebook page, we also try to post photos and the drone footage. Current action at the jobsite includes the beginning of framing of the exterior and interior walls, metal roof decking, setting of structural beams and cement being poured. Thanks to OCMH Board member John Girard for conducting the drone "flyover" last week. We will continue to update these sites as construction progresses.

Other exciting news is both Alison Begay, FNP-C, and Joshua Choate, PA-C, are able to perform CDL/DOT physicals at the Goad Clinic. All three providers at the Goad Clinic are accepting new patients and with the clinic fully staffed you should not have a long wait for an appointment time. If you were not able to attend the Meet and Greet last month you will also have an opportunity to meet Alison and Joshua at our "Coffee Shop Talks" in April and May.

Marianna Harris



**NEED A DOT/CDL
PHYSICAL EXAM?**

**MAKE AN APPOINTMENT WITH JOSH OR ALISON
AT GOAD MEDICAL CLINIC TODAY!**

785-346-2510

CLINIC HOURS:

8:30 AM - 5:00 PM Monday - Friday



to OCMH!



Venus joined OCMH's nursing staff as an RN. She will be working night shift once her orientation is complete. Venus lives in Cawker City with her family which includes husband Jeff and children Rihanna, Kylia, Treyton and Dane. They also have 4 dogs, 4 goats, 3 turtles, 30 fish and 1 snake! Venus enjoys spending her time planning her annual haunted house.



STRAWBERRY SPINACH SALAD



- 2 tablespoons sesame seeds
- 1 tablespoon poppy seeds
- 1/2 cup white sugar
- 1/2 cup olive oil
- 1/4 cup distilled white vinegar
- 1/4 teaspoon paprika
- 1/4 teaspoon Worcestershire sauce
- 1 tablespoon minced onion
- 10 ounces fresh spinach (rinsed, dried and torn into pieces)
- 1 quart strawberries (cleaned, hulled and sliced)
- 1/4 cup almonds (blanched and slivered)

In a medium bowl, whisk together the sesame seeds, poppy seeds, sugar, olive oil, vinegar, paprika, Worcestershire sauce and onion. Cover, and chill for one hour.

In a large bowl, combine the spinach, strawberries and almonds. Pour dressing over salad, and toss. Refrigerate 10 to 15 minutes before serving.

NUTRITION FACTS Per Serving: 491 calories; 35.2 g fat; 42.9 g carbohydrates; 6 g protein; 0 mg cholesterol; 63 mg sodium

OCMH EXCELS IN ACHIEVING NATIONAL GOALS IN PATIENT SAFETY



Osborne County Memorial Hospital received a congratulatory notification in February 2019 from Kansas Healthcare Collaborative that our hospital was recognized for our achievement of Milestone 10 in the Hospital Improvement Innovation Network (HIIN); and, that we ranked in the top tier of Milestone 10! They are our state partner in this national Centers for Medicare and Medicaid Services (CMS) Partnership for Patients Initiative as we work toward achieving goals in patient safety, making advancements in patient and family engagement and health equity.

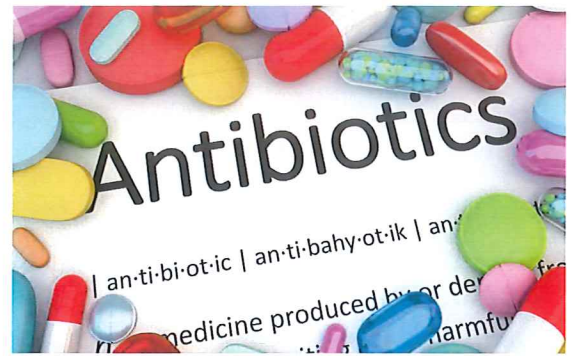
OCMH SELECTED FOR PATIENT SATISFACTION INITIATIVE

OCMH was one of five facilities in the state of Kansas selected to participate in the Patient Satisfaction Learning Community Initiative. The initiative focuses on implementing bedside shift reporting in which nurses will perform shift report in each patient room. Bedside shift reporting started on March 1st and patients and their families now have the opportunity to be more informed during their hospital stay. The initiative will span over the next 9 months providing educational tools to our staff so that the transition is a smooth one. To help facilitate the change OCMH Employee Fundraising purchased 2 Microsoft Surface Go's for the nursing staff to use for the bedside shift report. "We are excited to offer our patients and their families the ability to have a voice in their care." stated Director of Nursing Monica Mullender, RN.

Did you know you can support OCMH while shopping with Amazon? Simply go to smile.amazon.com and choose Osborne County Memorial Hospital as your charitable organization. OCMH will receive 0.5% of the purchase price if the item is AmazonSmile eligible!

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WHEN AND WHEN NOT TO USE ANTIBIOTICS



Antibiotics are medicines that fight infections caused by bacteria. Different antibiotics are required depending on the type of infection and the bacteria involved. This decision is best left to your healthcare provider.

When we're sick, we just want to get better fast, and we want medicine that will work as fast as possible. If your doctor suggests an antibiotic, ask questions and learn if you have a bacterial infection or a viral infection. Ask if the antibiotic is safe to take with your other medications, or health conditions (including pregnancy). Ask what side effects you should expect. And ask if there are other things that you can do to help you get better.

When antibiotics are prescribed by your healthcare provider, take them as directed and do not share them with other people as this would risk side effects and promote resistance.



**with Josh Choate PA-C
and Alison Begay FNP**

April 9th	Alton	Progressive Care	10:00 AM
April 16th	Downs	Downs Senior Center	11:00 AM
April 18th	Osborne	The Hideout	9:00 AM
May 7th	Natoma	French Press	9:00 AM

Come meet Josh and Alison, learn more about
Women's and Men's health issues and
have a cup of coffee on OCMH!

Spring Wordsearch



- BUNNY
- CANDY
- CHICKS
- CHOCOLATE
- EASTER
- EGGS
- FLOWERS
- GREEN
- RAIN
- SPRING

I	D	V	B	F	M	A	N	I	A	R	C	C	S	W
S	A	D	Q	V	R	K	I	L	E	H	X	S	K	W
Y	S	R	E	W	O	L	F	T	O	G	M	D	C	D
P	E	D	E	M	V	R	S	C	N	R	Z	Z	I	O
X	Z	S	I	B	I	A	O	M	C	E	Z	E	H	L
U	E	Z	D	P	E	L	E	K	O	E	Z	R	C	N
H	N	C	S	X	A	G	M	Z	S	N	C	O	C	P
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U	L	L	H	C	X	I	F	X	E	R	B	S	B	X
I	V	Y	W	U	M	A	T	V	K	L	I	C	D	V



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Colon Cancer Screening

Mark Banker, M.D.

March was colon cancer awareness month, so with that in mind we are going to review the reasons and options for colon cancer screening available. Each year there is approximately 150,000 new cases of colon and rectal cancer with about 50,000 Americans dying from colon cancer every year. The colon and rectum (last part of colon) are also known as the large intestine whose function is to take the fluid / food remaining from digestion in the small intestine and change it into stool. It does this by absorbing water and some vitamins as waste (stool) moves from the right side of the colon where it is liquid to the left colon / rectum where it becomes solid stool. On average it is about 5 feet long. Colon cancer screening is where a doctor looks for growths (polyps) that might one day become cancer. The goal is to find and remove polyps before they can become cancer and identify cancer early enough that it might be cured. There are multiple options for screening for colon cancer. Your doctor can help you choose the right screening option for you, but the most important thing is that you pick one of these options and be screened at regular intervals.

Colonoscopy: Test allows a doctor to directly look at the inside of the colon where polyps and cancers develop. Prior to the test, you must have a bowel prep to clean out the stool from the colon so the doctor can see the inside the colon to navigate and find polyps. The bowel prep involves drinking liquid that makes you have multiple bowel movements until stool is liquid the day prior to the procedure. The day of the procedure you are given medicine to help you relax and sleep through the procedure. A doctor then advances a thin tube with a camera and light through the entire colon. During this time polyps can be removed and biopsies / photos taken as needed. Tissue removed (biopsied) is sent to a lab to be evaluated for cancer or precancerous lesions. Colonoscopy typically takes 25 - 45 minutes to complete. After the procedure you can eat and drink and allowed to go return home. The next day you can return to work / activity without restrictions. Advantage of this test is that polyps can be identified and removed so they do not grow into a cancer. Colonoscopy represents the most advanced way to monitor and treat the colon for possible cancer growths unlike the other options that are discussed below for colon cancer screening. The other tests evaluating for colon cancer usually lead to a colonoscopy. Disadvantages of colonoscopy are it is invasive test requiring a procedure and sedation. Colonoscopy does have small risks of bleeding or causing a tear/injury in the colon, though these are infrequent as it estimated to occur in about 1 out of 1000 procedures. The bowel prep to clean the colon out is often reported to be the worst part of the procedure.

Fecal occult blood testing: Test involves sampling stool (bowel movements) for blood because cancers and polyps tend to bleed small amounts that you may not be able to see in the stool. Blood in the stool is not specific and can be from multiple causes and multiple sites in the digestion tract (i.e. stomach / small intestine / colon). This test involves no colon prep or invasive procedures. Disadvantage of the test is that it does not identify all precancerous polyps. If the test is positive (blood present), then typically a colonoscopy is recommended to evaluate for cause of bleeding. Test is recommended to be done yearly.

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Stool DNA test: A stool DNA test takes a sample of stool (bowel movement) and checks for genetic markers (genes) of cancer. This involves a special kit ordered and collection of stool to be sent in for analysis. This test is a new way to evaluate for colon cancer / polyps. Currently approved stool DNA test that you may have heard of is Cologuard. Advantages of this test are it is not invasive and does not require a bowel preparation. The disadvantage is that it may be unpleasant to collect and ship an entire bowel movement. If the test shows an abnormality then a colonoscopy will be needed. Test is recommended to be done every 3 years.

Who should be screened:

1. Age 50 (everyone). Screening may begin earlier age if significant family history of colon cancer.
2. Inflammatory bowel disease (Crohns / Ulcerative colitis) start screening 8 years after diagnosis.
3. Most people can stop screening colonoscopies between age 75 - 85.

How often should you be screened:

1. Low risk patient (No family history colon cancer and no history of colon polyps)
 - Every 10 years
2. High risk patient (Family history of colon cancer or history of colon polyps)
 - Every 3 - 5 years

What are primary risk factors for colon cancer:

1. Family history of colon cancer
2. Inflammatory bowel disease (Crohns disease & Ulcerative colitis)
3. Personal history of colon polyps
4. Tobacco use
5. Alcohol excess
6. Obesity / Diabetes

What you can do to prevent colon cancer:

1. Physical activity
2. Diet high in fruits / vegetables
3. Fiber

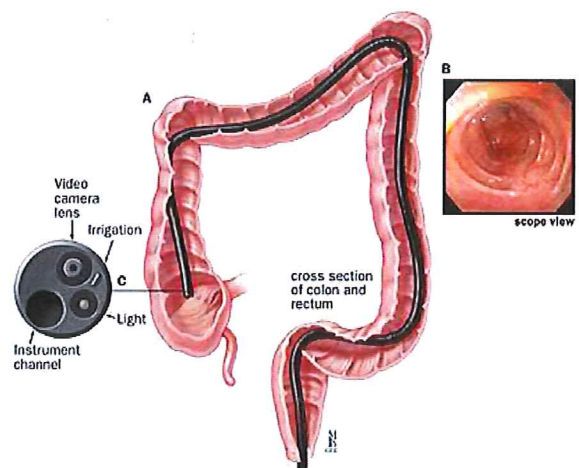
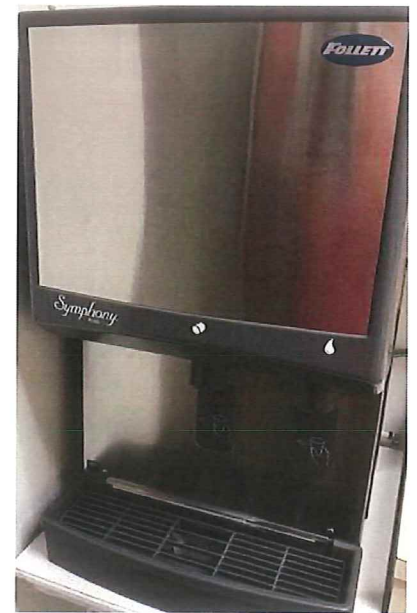
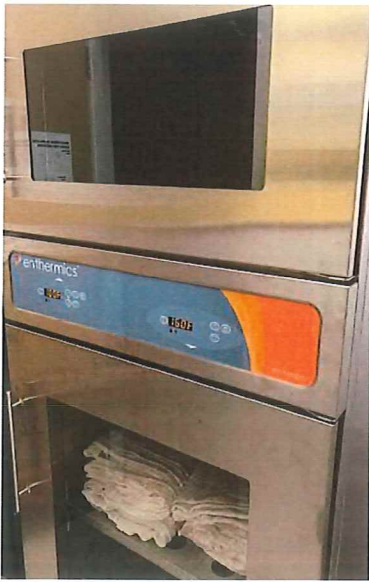


Diagram: Left picture shows end of colonoscope with camera and light. Middle picture represents colonoscope advanced through a colon on colonoscopy. Right picture shows view during colonoscopy.

BUILDING PROJECT PROGRESS





Thank You!

Sar ver Charitable Trust
McFadden Charitable Trust



JOB OPPORTUNITIES

Do you enjoy being a part of a team?

Have you always wanted to work at OCMH?

These opportunities are available now:

Occupational Therapy and Speech Therapy

For more information please call 785-346-2121



Would you like to receive a copy of the Newsletter electronically? Please contact the hospital (785-346-2121) and ask for Keri to be put on the list!

Specialty Services at OCMH

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Bone Density

Pain Management

Cardiology

General Surgery

Nuclear Medicine

MRI

*Bringing the specialty healthcare
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**Contact your provider if you are needing or wanting to
schedule an appointment for any of these specialty clinics!**



Erin Baxa, MD



Josh Choate, PA-C



Alison Begay, MSN FNP



Barbara Brown, DO

OCMH Active Medical Staff

Goad Medical Clinic

431 W. New Hampshire

Osborne, KS 67473

785-346-2510

Hours: Monday - Friday 8:30 AM - 5:00 PM



Osborne County Memorial Hospital

424 W. New Hampshire

Osborne, KS 67473

785-346-2121

www.ocmh.org

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