



Annual Report 2010|2011

July 1, 2010 – December 31, 2011



Licensure. Accreditation. Certifications.

LICENSED BY

State of Wisconsin
Department of Health and Family Services
Division of Supportive Living

ACCREDITED BY

The Joint Commission
American College of Radiology

CERTIFIED BY OR MEMBER OF

American Hospital Association
Amerinet
Community Health System, LLC
Wisconsin Hospital Association
Western Wisconsin Hospital District
National Rural Health Association
Rural Wisconsin Health Cooperative
Center for Medicare and Medicaid Services
Wisconsin Department of Health and Family Services
American Association of Blood Banks
Shared Health Services, Incorporated
Health and Hospital Trade Organizations
Pink Ribbon Facility
Food and Drug Administration

Mission.

Prairie du Chien Memorial Hospital will deliver high quality, personalized healthcare and education, in a friendly safe environment, to people in every stage of life collaboratively with other regional health care providers.

Values.

Excellence
Integrity
Compassion
Unity
Joy

Vision.

Prairie du Chien Memorial Hospital achieves the best outcome for every patient every time. It is where:

- Patient expectations are exceeded
- Physicians want to practice
- Caring people want to work
- The community sees a source of pride
- The region associates our name with high quality

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“I never knew death could ever be a beautiful experience but through the hospice staff it was. They showed me God's presence and love as I have never before seen. These individuals are top of the line!”
~Hospice patient family member

President's Message. *Paul Ginkel* Hospital Board President

In September of 2011, the Board of Directors approved the building of a new hospital. Given today's uncertain economy, this might seem like a bold move; but the rationale behind our decision is solid: hospitals are dynamic places and modern healthcare facilities are designed to be flexible and adaptable as new technologies are adopted and patient care needs change. Incorporating evidence-based design features to improve patient safety, reduce the risk of infections and improve healing are all critical in the design of the modern patient care environment. Design that is flexible and easily adaptable to accommodate ever-changing medical technology is critical to the long-term success of a new hospital. Co-locating entire departments also has a positive effect; for example, placing the Emergency Department adjacent to Medical Imaging (formerly known as x-ray) allows trauma patients to be evaluated more quickly and safely.

Designing for safety and quality is a key priority. By incorporating evidence-based design, the process of making design decisions based on the best available information from credible research and evaluation of existing Lean projects is possible. Evidence-based design assists designers to create better hospitals to enhance quality of care, helps patients recover faster, reduces risk of staff injury and stress, and makes hospitals safer places for receiving care.

Evidence-based design also emphasizes the healing aspect of direct access to nature. Orienting a building so patient rooms have views of natural outdoor settings and exposure to direct natural light has been shown to improve recovery time and decrease requests for pain medication.



Clear wayfinding is another critical element in hospital design. Highly visible entrances and logical building layouts help give people who are coming to the hospital peace of mind during an al-

ready stressful experience. Having numerous landmarks along major hallways and windows to the outside allows people to navigate intuitively rather than relying solely on directional signage.

Board Members are pictured with members of the Senior Leadership Team. Front row from left: Julia Nelson, Chief Quality Officer; Ellen Zwirlein, Chief Nursing Officer; Lisa Esser Board Treasurer; Mattie Rademacher, Board Member; Dr. Gayette Grimm, Chief of Medical Staff. Standing: Rory Meisner, Board Member; Dave Breitbach, Chief Financial Officer; Roy C. George, Board Member; Sasha Dull, Chief Development Officer; Pat Mulhern, Board Secretary; William Sexton, Chief Executive Officer; Alice Staples, Board Member; Paul Ginkel, Board President; Pat Stockton, Owner's Representative, Stockton Facility Management; and Charlie Connell, Board Vice President.

This is an exciting time for the Board. A new hospital offers us a unique opportunity to become even better at providing our never-ending pursuit of excellence. Certainly, it will allow physicians and staff to do their jobs more efficiently. But most importantly, the design of a new, modern hospital will positively affect patient safety and quality, and improve the healthcare services throughout Southwest Wisconsin and Northeast Iowa.

I would like to thank Pat Mulhern for serving 12 years on the Board of Directors. Pat has held several key positions; currently Secretary of the Board of Directors, Chair of the Building and Grounds Committee, Chair of the By-Laws Committee and a member of the Personnel, Nomination and Hospital Compliance/HIPAA Committees. Thanks, Pat.

On behalf of the Board of Directors, I thank the Association Membership for their continued support over the last 54 years. Together, making our new hospital a reality is all about helping our healers do the best job they can. We owe it to them, and to those who need our services.

The Journey Continues. *William P. Sexton* Chief Executive Officer



In October of 2011, Prairie du Chien Memorial Hospital was named one of the Top 100 Critical Access Hospitals by iVantage Health Analytics in a national report. iVantage is a national resource on hospital performance and was created through the merger of four powerful research firms who are recognized as thought leaders in the industry. With over 1,300 Critical Access Hospitals in the nation, this puts Prairie du Chien Memorial in the top 8%, and is a testament to the performance and quality of an organization that is now 54 years young.

On March 14, 2012 another national firm “The Commonwealth Fund” concluded that where you live in the United States largely determines the kind of health care you receive; and again, the Upper Midwest and Wisconsin were in the top quartile using 43 indicators compiled from the Center for Medicare and Medicaid Services, U.S. Census, Centers for Disease Control and the National Vital Statistics System. This is not by accident.

Prairie du Chien Memorial has been working to achieve the best outcome for every patient every time. From purchasing state-of-the-art equipment for Surgery, a 64 slice CT scanner and 4D ultrasound, to alarm systems that prevent infant abduction, we are investing in technology that makes care safer and better. We are also investing in our staff and leadership and using new models of care that insure not only good clinical outcomes, but an outstanding patient experience.

Working with Southwest Wisconsin Technical College, we have provided training to managers to help them improve productivity, manage their departments and help them identify opportunities to improve patient satisfaction. Continuing the lean training, the Hospital has benefited from many projects that have eliminated waste while improving performance.

Patient loyalty and commitment are also important measures of our success, and we have employed the principles of at least two major authorities on improving patient satisfaction. The presidents of both The Studer Group and Custom Learning Systems have both visited Prairie, and many of the Senior Leadership, as well as the Board, have attended national training forums. Although we continue to see growth in our patient satisfaction scores, we need to learn new skills to be the very best. We will be pursuing a formal agreement with The Studer Group to help us do just that.

In my last report, I mentioned our first employee opinion survey and the actions that were anticipated as a result. This fall, we resurveyed our employees and the results showed significant improvement in many areas. We continue to work to make Prairie du Chien Memorial a great place to work, and will be again developing an action plan from the survey to help us achieve that goal.

With the decision of the Board to build a new hospital, we are well on the way to a new model of care for our community. We have purchased the property, hired the architect and now the construction management firm. This next year we will be moving utilities and designing a new hospital that will serve the community for the next half-century. The 100+ acre site will allow for expansion and be flexible to changes in healthcare technology. We are excited to be a part of this segment of Prairie du Chien’s history and look forward to growing with this region to serve the citizens and visitors from the surrounding communities of Wisconsin, Iowa and beyond.



Prairie du Chien Memorial Hospital and its medical staff have experienced growth and development over the past 18 months...

Active Medical Staff grew with the addition of two new Family Practice/Obstetrics providers, Melissa Simon, D.O. and Stacy Blackburn, D.O., and a new general surgeon, Tamara Blair, D.O. However, our Medical Staff also said good-bye to two providers, Nickolas Hanna, M.D. and Marilu Bintz, M.D. Although her leadership and medical care will be greatly missed, Dr. Bintz, general surgeon, retired from clinical practice at the end of 2011 after 20+ years of serving the area. The Medical Staff wish her well in her new endeavors!

To enhance patient care, the Medical Staff partnered with the Nursing Staff in Transforming Care at the Bedside (TCAB). In this process, nurses and doctors “round” together in the morning to enhance communication between doctors, nurses and patients, and provide more coordinated care. By changing utilization of our current facilities, Nursing Staff also try to provide patients with private rooms. Finally, several lean projects have helped improve behind the scenes efficiencies thus making the job of the Medical Staff easier and our patients happier.

As one of the surgeons, my favorite changes have occurred in the Operating Room (OR). Because surgical case numbers have been increasing with a second full-time general surgeon, increasing orthopedic needs and more outreach specialty surgeons, the second OR suite was remodeled and upgraded to become a fully functional OR. Now both operating rooms can be utilized for all case types in hopes of easing surgical scheduling. Also, to support the growth, additional personnel were hired to help cover surgery including scrub techs, nurses, and a unit clerk.

New technology in the Imaging Department has helped the Medical Staff improve patient care. A PET/CT scanner, via a mobile service, was contracted which allows for better staging of cancer patients to provide appropriate treatment. Two cardiac tests were also added, cardiac CT and dobutamine stress echo, which are tests that can help diagnose heart problems and determine risk of cardiac events. Previously, all of these tests required patients to travel an hour or more; now they can receive their care at PDCMH!

The Medical Staff is also looking forward to the changes coming in 2012 and beyond. Currently, the Medical Staff is training for Computerized Physician Order Entry (CPOE) in April. In preparation for this, remodeling of the Nurse’s Station will make more space for physician dictation and paper work. With a new hospital in planning and development, the Medical Staff is excited about the changes that it will bring to patient care and our medical practices.

Finally, the Medical Staff would like to thank the Board of Directors, Administration, and all of the hospital employees for their dedication and effort in making Prairie du Chien Memorial Hospital *One of the Nation’s Top 100 Critical Access Hospitals*—a proud accomplishment and well deserved honor!

Medical Staff.

Dr. Gayette Grimm, Chief of Staff

Dr. Michael Rogge, Secretary

ACTIVE MEDICAL STAFF

Khalid Ali, M.D. Emergency Medicine
Marilu Bintz, M.D. General Surgery
Stacy Blackburn, D.O. Family Practice
Tamara Blair, D.O. General Surgery
Walter Boisvert, M.D. Family Practice
Christopher Burrows, M.D. Emergency Medicine
David DeHart, M.D. Family Practice
R. Timothy Fitzner, M.D. Emergency Medicine
James Gariti, M.D. Emergency Medicine
Gayette Grimm, M.D. General Surgery
Ann Grunwald, M.D. Family Practice
Mark Grunwald, M.D. Family Practice
Kurt Jorgensen, M.D. Family Practice
Robert Key, M.D. Family Practice
Martin Oates, M.D. Family Practice
Mark Perpich, M.D. Orthopaedic Surgery
Michael Rogge, M.D. Family Practice
Thomas Rollie, M.D. Family Practice
Sara Rybarczyk, M.D. Internal Medicine
Melissa Simon, D.O. Family Practice

CONSULTING/COURTESY STAFF

Douglas Nelson, M.D. Allergy/Pediatrics
Paul Schoenfeld, M.D. Cardiology
Mark Fohey, D.D.S. Dentist
Kurt Mueller, M.D. Dermatology
Fadi Ghandour, M.D. Nephrology
Balaji Scrinivasan, M.D. Nephrology
Wilfrido Yutuc, M.D. Nephrology
Kumari Usha, M.D. Nephrology
Balaji Vishwanat, M.D. Nephrology
Alcee Jumonville, M.D. Oncology
Roger Kwong, M.D. Oncology
Leah Dietrich, M.D. Oncology
Michael Ojelabi, M.D. Oncology
Christopher Born, M.D. Ophthalmology
James Pearson, M.D. Orthopaedic Surgery
Michael Case, M.D. Otolaryngology
Jeffrey Degenhardt, M.D. Pathology
Anna Kemp, M.D. Pathology
Vinay Naik, M.D. Pathology
Stephen Bogue, D.P.M. Podiatry
William Chubb, D.P.M. Podiatry
Nicholas Lombardo, D.P.M. Podiatry
Michelle Schroeder, D.P.M. Podiatry
Craig Sullivan, D.P.M. Podiatry
Brooke Tappe, D.P.M. Podiatry
Gregory Valkosky, D.P.M. Podiatry
Larry Goodlund, M.D. Psychiatry

Carl Decker, M.D. Radiology
Barbara Knisely, M.D. Radiology
Paul Leehey III, M.D. Radiology
Brian Manske, M.D. Radiology
Anna Myklebust, M.D. Radiology
Mark Nigogosyan, M.D. Radiology
John Pape, M.D. Radiology
Ewa Plagman, M.D. Radiology
Cameron Roberts, M.D. Radiology
Jedadiah Schaller, D.O. Radiology
Lonnie Simmons, M.D. Radiology
Paul Stanton, M.D. Radiology
Daniel Wolbrink, M.D. Radiology
Chris Hugo, M.D. General Surgery
Thomas Londergan, M.D. Urology

ALLIED HEALTH PROFESSIONALS

CERTIFIED NURSE MIDWIFE

Charlotte Rollie, CNM

CERTIFIED REGISTERED NURSE ANESTHETIST

Dick Beinborn, CRNA
James Bradley, CRNA
Ronald Falch, CRNA
Georgia Govier, CRNA
Christine Hein, CRNA
Stephen Kordiyak, CRNA
Richard Kreiman, CRNA
Kimberly Kurtz, CRNA
Mark Odden, CRNA
Dennis Stalsberg, CRNA
Peter Strube, CRNA

CHIROPRACTOR

Gary Bowden, D.C.
Patrick Lorenz, D.C.
Paul Morovits, D.C.
Arnold Steele, D.C.
Craig Strutt, D.C.
Donald Strutt, D.C.
Alan Weber, D.C.

FAMILY NURSE PRACTITIONER

Peggy Barton, APNP
Rebecca Gesing, APNP
Heidi Hochhausen, APNP
Rochelle Neisius, APNP
Tammy Plondke, APNP

By the Numbers.

For the six months ended December 31, 2010 and the year ended December 31, 2011

Dave Breitbach
Chief Financial Officer



I am pleased to report Prairie du Chien Memorial Hospital had another financially strong year in 2011. Your Hospital continued to outperform our industry. 2011 was a year where we experienced uneven volumes. We looked to

lean to help take waste out of the process, while at the same time improving our processes and patient care. With revenue being 4% below budget; it was essential that we control expenses, which we did. Expenses were also at 4% below budget. That, along with contractual allowances being below budget, helped us to slightly exceed our budgeted operating margin. We had budgeted a 6% operating margin and were able to achieve a 6.2% operating margin. This enabled us to increase cash flow by \$1,469,000.

The metrics below show that our balance sheet remains strong.

- Our current ratio was 8.8 to 1 or \$8.80 of current assets to every \$1.00 of current liabilities. Rural Wisconsin Health Cooperative (RWHC) most recent average was 2.8 to 1.
- Our day's cash and investments on hand were 298 which indicates that as of 12/31/2011 we have enough cash and investments to pay our ongoing expenses for 298 days. RWHC most recent average was 139 days.
- The number that I believe shows the overall financial condition of the Hospital is called, appropriately, the Financial Strength index. It combines measurement of liquidity, profitability, capital structure and physical plant age. Our financial strength index for 2011 was 5.4 while the RWHC average for 2010 was 1.6.

One final metric that helps to indicate the need for a new facility is the average age of plant. Our average age of plant is 11.9 years or 13% greater the RWHC average. Some organizations believe the average age of plant should be 6-8 years. All this indicates that we are going into the process of building a new facility as a financially strong Hospital. I believe that plans for a new hospital will only improve the Hospital's financial viability.

Balance Sheet ending December 31

	<u>Year ending Dec. 31, 2011</u>	<u>Six Months ending Dec. 31, 2010</u>
<u>Current Assets - What We Own</u>		
Cash and Investments	\$18,241,650	\$15,745,344
Accounts Receivable-net	6,364,181	6,011,337
Receivable-other	160,937	203,852
Inventory	980,311	975,179
Accrued Interest Receivable	17,301	19,917
Prepaid Expense	178,855	126,895
Current Portion of Note Receivable	<u>9,580</u>	<u>18,304</u>
Total Current Assets	<u>\$25,952,815</u>	<u>\$23,100,828</u>
<u>Other Assets</u>		
Cash Designated or Restricted	\$366,400	\$360,084
Investments	4,557,851	4,407,275
Note Receivable	<u>829,756</u>	<u>817,338</u>
Total Other Assets	<u>\$5,754,007</u>	<u>\$5,584,697</u>
<u>Property, Plant, & Equipment</u>		
(Net of Accumulated Depreciation)	<u>9,010,586</u>	<u>8,907,269</u>
Total Assets	<u>\$40,717,408</u>	<u>\$37,592,794</u>
<u>Current Liabilities - What We Owe</u>		
Accounts Payable & Accrued Expense	\$2,924,347	\$2,582,903
Security Deposits	<u>34,893</u>	<u>39,895</u>
Total Current Liabilities	<u>\$2,959,240</u>	<u>\$2,622,798</u>
Long Term Obligations	<u>401,613</u>	<u>584,490</u>
Total Liabilities	<u>\$3,360,853</u>	<u>\$3,207,288</u>
Temporarily Restricted Assets	182,732	161,819
Difference Between What We Own And What We Owe	<u>\$37,173,823</u>	<u>\$34,223,687</u>

Statement of Income/Expense

	<u>Year ending Dec 31, 2011</u>	<u>Six Months ending Dec 31, 2010</u>
<u>Hospital Revenue</u>		
Net Patient Service Revenue	\$31,370,296	\$16,848,060
Other Revenue	729,267	391,280
Net Assets Released from Restrictions	<u>2,958</u>	<u>7,420</u>
Total Unrestricted Revenue	<u>\$32,102,521</u>	<u>\$17,246,760</u>
<u>Operating Expense</u>		
Salaries and Wages	\$14,087,369	\$6,750,176
Employee Benefits	5,304,438	2,812,001
Supplies and Expenses	8,959,077	4,316,018
Depreciation and Amortization	1,235,202	592,605
Provision for Bad Debts	<u>535,954</u>	<u>598,116</u>
Total Expenses	<u>\$30,122,040</u>	<u>\$15,068,916</u>
Net Operating Income	<u>\$1,980,481</u>	<u>\$2,177,844</u>
Other Income	<u>929,179</u>	<u>337,959</u>
Revenue in Excess of Expenses	<u>\$2,909,660</u>	<u>\$2,515,803</u>
Transfer to State U.C. Reserve Fund	<u>(6,316)</u>	
Change in Unrealized Gain and Losses on Investments	<u>46,796</u>	<u>264,639</u>
Increase in Unrestricted Assets	<u>\$2,950,140</u>	<u>\$2,780,442</u>



The designation as one of the Top 100 Critical Access Hospitals by iVantage is a tribute to the quality care that our patients receive and the teamwork and caring of our staff. Our health care environment is changing rapidly. In order to provide the best care to our patients, we must keep current with best practices and new technology. A few of the technology advances include the security system in the OB Department, the renovations in OR, and radiology additions. Technology for the electronic medical record continues to be enhanced as we move toward Meaningful Use criteria, as required by the Federal Government. Patients and families are at the center of our health care initiatives. Our goal is excellence in patient care; always focusing on doing the best for patients and families and exceeding their expectations. We want to get to know the patient and family so we can care for them to meet their entire needs including physical, emotional, social, and spiritual (holistic care). Teamwork improves patient safety and clinical outcomes. Teamwork and collaboration has increased especially related to our Lean and Transforming Care at the Bedside (TCAB) initiatives. TCAB allows front-line staff, “at the bedside” of patient care, to make decisions when improvement in care is needed and make a difference in the lives of our patients. Education of staff is a priority to keep current with standards and changes. Our new graduate nurses attend a one year residency program which improves critical thinking skills and patient care. We believe education and lifelong learning is important for safe, effective patient care. Our journey to provide excellence in care and service will continue into the future and our new hospital. We are excited about beginning our journey with Service Excellence to provide our patients excellence in patient care and service.



State-of-the-Art Operating Rooms

The Surgery Department was able to bring its second Operating Room into the 21st century in 2011. The new suite was equipped with large equipment, anesthesia, and two small monitors on booms, laparoscopy equipment, two new LED lights, an in-line camera, and one large wall monitor. We are now able to move the monitors to the most convenient spot for the surgeon and scrub staff. The circulating nurse can control all of the laparoscopy equipment, and monitors from the control center called Sidne. For open procedures, the circulating nurse and students are able to observe exactly what the surgeon is doing throughout the procedure with the in-line camera focused on the incision site and seen on the large wall monitor.

The construction of our new integrated Operating Room Suite was complete in October. On November 10th, we hosted an open house to celebrate National Operating Room Nurse Week, and to demonstrate how the new suite works to all hospital staff. Everyone enjoyed the demonstration, and staff was given the opportunity to role play as the surgeon using the instruments themselves and observing their work on the new monitors.

~ Kathy Kurt, RN, CNOR, OR/SDS Clinical Coordinator

Updates in Medical Imaging

In the last 18 months, Medical Imaging has been concentrating on providing more advanced imaging services to the community. One of the new services is in cardiac CT. This exciting new procedure utilizes the Hospital's 64 slice CT scanner to view a patient's coronary arteries as well as cardiac anatomy. This is of great benefit to the Emergency Room patients that may come in with chest pain. Those patients, once the CT is done, can be safely discharged home if the study is negative or may be transferred on to a larger facility for treatment of their chest pain. This greatly improves Emergency Room efficiency and may potentially save a patient from a costly helicopter flight.

PET/CT was also started. PET/CT is a combination of a nuclear medicine procedure tied in with a CAT scan. Prior to our initiating this mobile service, patients would have to travel to a larger city for this study. Now it can be done here. PET/CT is used mostly for cancer patients and oncologists to either determine a best course of treatment or to follow up on how those treatments are affecting a patient's tumor.

The new AGFA digitizer replaces two older units that were at their end-of-life cycle. The digitizer converts an x-ray image stored on a cassette into a viewable image on a computer workstation. The unit can process an image in 13 seconds. This is quite an advance over our older units that would take up to 60 seconds and over old chemical processors that would need to process a film which would take 90 seconds.

~ Tim Clark, RDCS, Medical Imaging Director

Transforming Care at the Bedside.

TCAB

Bethany Schiefelbein TCAB Project Leader

PDC Memorial is one of 16 Wisconsin hospitals participating in the Transforming Care at the Bedside (TCAB) grant program. This nationwide program is funded by the Aligning Forces for Quality Initiative of the Robert Wood Johnson Foundation. The goal of TCAB is to encourage front-line staff to identify, plan, and implement changes to improve efficiency, patient care and satisfaction, and staff vitality on medical/surgical units.



Cheri Korywchak, RN; Bethany Schiefelbein, RN; Nursing Services, and Javier Alvarez, COTA, Occupational Therapy; care for a patient together.

Since beginning the program in March 2011, Prairie du Chien Memorial's TCAB team has implemented many improvement projects. Many of the projects extend beyond the Medical/Surgical/Pediatric unit. The TCAB team has also grown from its core members of Registered Nurses and Certified Nursing Assistants to include members of Physical Therapy, Occupational Therapy, Respiratory Therapy, Environmental Services, Patient/Family Services, and Nutrition Services Departments. This high level of interdisciplinary collaboration promotes positive teamwork throughout the hospital.



Dr. Thomas Rollie and Bethany Schiefelbein, RN, round together to see a patient.

One successful TCAB project is RN-Provider Rounding. Our Registered Nurses and medical providers began rounding together to see patients in May. RN-Provider Rounding improves communication among patients, nurses, and providers. We are better able to meet all patient needs. We have also reduced nonemergent phone calls to physicians, thereby reducing interruptions of patient clinic appointments. Gundersen Lutheran physician Dr. Martin Oates states, "I've always tried to talk to the nurse first, but now that we have an official program to round together, it's easier for us to communicate. Rounding increases communication, safety, and teamwork, which ultimately leads to better outcomes." Deb Smith, RN, comments, "I can let the doctor know about things the patient has forgotten to tell him or her. I also get to know what the doctor is thinking, such as the plan for the patient's future care, discharge, and other needs."

Another successful project, Quiet Time, began in September. Patients have an hour of undisturbed rest time from 12:30 to 1:30 p.m. every day. Patients are not scheduled for therapies, nursing interventions, tests, or other activities unless they are medically necessary. Follow-up surveys after Quiet Time was initiated have very positive results and numerous positive comments from patients and staff. Patients were surveyed before and after Quiet Time was implemented. Only 50% of patients stated they were able to get uninterrupted rest time during the day before the hospital had Quiet Time. Now 83% of patients say they get rest time.

Other TCAB projects include Stocked Patient Room Closets, Parking Lots for Equipment Storage, RN-RN Report Sheet, Communication Whiteboards in Patient Rooms, Recycling in Patient Rooms, Discharge Healthcare Handbags, and Patient Room Service for Meals. More improvement projects are planned for the future.

In Pursuit of Quality.

Julia Nelson Chief Quality Officer



Prairie du Chien Memorial Hospital Board of Directors, Physicians, and staff have always taken great pride in the excellent care we provide to our patients and communities. As we move forward in this ever-changing uncertain health care environment, it is essential that we provide the best care possible to every patient every time. Over the past 17 months we have focused on actively engaging staff in quality patient care, improving clinical outcomes, patient safety and have built a culture of transparency by publicly reporting quality measures.

Patient Satisfaction is one of the quality standards that require public reporting. By publicly reporting our results from the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) surveys, we can be compared with other hospitals in our area and around the nation. The HCAHPS results will be a major player in the CMS's Value Based Purchasing Program (VBP) beginning in October 2012 affecting reimbursement from Medicare and Medicaid. The role this program will play in critical access hospitals is unclear at this point, but will be a factor for us. The VBP will incent hospitals to provide high quality care and reduce health care costs while taking money from the worst performing hospitals.

Our team is working hard to improve patient satisfaction by understanding the importance of patient centered care, and educating our staff to ensure every patient's expectations are exceeded.

We score very well with most areas exceeding the state and national average. Our goal is to have our care provided reflected in scores 95% or greater in the core questions that relate to the critical aspects of the patients' hospital experiences.

Our team takes every opportunity to improve the care we provide as demonstrated in our commitment to the lean principles of process improvement, the participation in Transforming Care at the Bedside (TCAB) and our designation as one of the Top 100 Critical Access Hospitals in America named by iVantage an affiliate organization of the National Rural Health Association. This award is based on financial strength, clinical outcomes, and patient satisfaction.

“ I was very impressed with the
Emergency Department in this small community
hospital-thank goodness the community has
such a fine medical facility.

We do need our small town hospitals! ”

~Anonymous

As we move into the next year we look forward to participating in the Wisconsin Hospital Association's Partnership for Patients Improvement Initiative.

This project will allow us to work not

only with Wisconsin hospitals, but many hospitals across the nation to implement best practices to improve care. The quality initiatives being considered for this project include initiatives related to fall reduction, safe medication administration, prevention of hospital-acquired infections, reduction in readmissions and wrong site surgery prevention.

These are very exciting times for Prairie du Chien Memorial Hospital. As we move forward with plans for our new hospital and our partnership with The Studer Group, our opportunity to be the best hospital in the nation is well within our reach.

Moving from Good to Great. *Ivar “Skip” Gjølberg*

Chief Administrative
Officer

Though I have only been here for eight months, I feel this hospital has gone through much in that short time. As noted in earlier reports by Mr. Ginkel and Mr. Sexton, we have made some landmark decisions and achieved some landmark recognition for the good work we do. When I look at Prairie du Chien Memorial Hospital, I see a very successful past, and an even more successful future being further solidified by the decisions the organization has recently made.

One of those decisions was to align Prairie du Chien Memorial Hospital with an organization that will help us move from being a very good hospital to being a great hospital in providing Service Excellence, consistently. This was not an easy choice as there are many quality organizations out there that claim they can help you break through to being the best: Disney, Baptist Healthcare, Custom Learning Systems, and The Studer Group to name a few. Prairie du Chien Memorial Hospital narrowed it down to two, and had visits from both organization’s CEO’s; Custom Learning Systems, Brian Lee, and The Studer Group, Quint Studer. We also spent time seeing both organizations in action, taking groups to Custom Learning System’s “Thriving on Healthcare Reform” in Dallas and to The Studer Group’s “Taking Your Organization to the Next Level” in Las Vegas. After much discussion with Hospital Staff, Senior Leadership, and Board Members, it became evident that The Studer Group was the clear choice. I truly believe The Studer Group will not only help improve Service Excellence, but will impact Prairie du Chien Memorial Hospital on a much grander scale improving our performance in all areas.



Quint Studer, Bill Sexton, Skip Gjølberg

Another significant change for Prairie du Chien happened in Human Resources; Gabriel Oosthuysen has taken over the helm of Human Resources as Director. Gabriel has some great ideas to improve the level of service and education his department can provide staff, as well as the evaluation and compensation systems we employ. The goal will be to make sure we hire and retain the best people: the right co-workers, the right supervisors, the right leaders; those who understand and exemplify our mission, our vision, our values, and our service excellence work ethic. Not getting and keeping the right people is a disservice to our staff, our physicians, and our patients.

Lastly, I must point out the significant improvement we saw in our Employee Engagement Survey scores comparing November 2009 to December 2011. Prairie du Chien Memorial Hospital saw its overall employee engagement score improve from 29% to 40 % while those disengaged dropped from 38% to 23%. The survey and comments show that employees of Prairie du Chien Memorial Hospital enjoy and have a pride in the work or role they perform. For the most part, staff enjoy working with their peers who provide a sense of community in and out of the workplace. Though engagement is better, we are not out of the woods. The experts tell me that it is normal to have some level of disengagement in any organization, but I find that unacceptable, especially in healthcare.

Prairie du Chien Memorial Hospital wants to make sure we deliver our Mission: delivering high quality, personalized health care and education in a friendly, safe environment to people in every stage of life collaboratively with other regional health care providers; and our Vision: to achieve the best outcome for every patient every time. It is where:

- Patient expectations are exceeded
- Physicians want to practice
- Caring people want to work
- The community sees a source of pride
- The region associates our name with high quality

To do that we need everyone engaged all the time, and that is what we will achieve.

Lean Transformation

Nicole Martin & Brian Fairbrother

Lean Manager & Lean Consultant

Lean, quite simply, is focusing improvements on key processes that will improve what is valuable to our patients and customers while minimizing things that were wasteful in those processes. The lean initiative at Prairie du Chien Memorial Hospital began in 2010, when the Hospital Board of Directors and Administration determined that the organization needed to embrace this philosophy.

The refinement of Hospital goals such as Quality, Safety and Patient Satisfaction would be key drivers in developing processes that focus on maximizing what is valuable to our patients and customers. By eliminating wasteful activities, staff will be able to spend more quality time with patients and identify process steps that do not add value to our customers.

By 2011, with the help of our Lean Consultant, Brian Fairbrother, Orchid Group LLC, a total of 55 Hospital staff completed Lean training. A portion of this was completed through a grant with Southwest Wisconsin Technical College as well as through the Lean Certificate Series (LCS). All staff participated in projects in addition to attending educational workshops. Through the LCS, thirteen different projects were completed. Examples of these projects include improving the patient's experience when they are admitted to the Swing Bed Program, decreasing the patient's time spent waiting to see a physician in the Emergency Department, and having necessary items at the patient's bedside. Decreasing inventory, streamlining hospital billing and being environmentally conscious are other focuses of Lean projects.

In 2012, we look forward to continuously improving key processes to focus on customer value while engaging more and more hospital staff in Lean training and application.



Lean Certificate Series participants are shown completing a flow exercise. Opportunities for improvements were identified (OFIs) and included possible bottlenecks, work load balancing, and benefits of pull vs. push processes.



Report Outs held during lunch breaks gave teams the opportunity to showcase their projects, their discoveries, the lean tools utilized and the improvements they made and the results they achieved.

Annual Professional Services Statistical Report January 1 - December 31

	2011	2010
Total Occupancy	45.8%	55.8%
Patient Days of Care		
Acute Care	2,748	2,838
Newborn	249	279
Skilled Care	1,196	1,148
Intermediate Care	375	1,479
Respite	507	495
Medicare % Total Days	72%	70%
Length of Stay Acute	2.9	3.0
Length of Stay Medicare	3.4	3.4
Admissions	1,116	1,136
Births	120	125
Surgery Inpatient	178	791
Surgery Same Day	774	791
ED Visits	6,133	5,676
Urgent Care Visits	2,919	2,761
Outpatient Visits	17,117	16,648
Medical Imaging Procedures	10,743	11,567
Rehab Service Procedures	44,025	36,420
Home Health Visits	4,381	4,983
Visits per Admission	20.76	19.46
Personal Home Services	1597	2021
Hospice Visits	2,848	2,545
Community Meals	24,401	31,953

Average Daily Units of Health Services – DUHS 2011/2010

	2011	2010
DUHS All Services	394.0	458.2
Acute Care/Med Surg	7.53	7.75
Newborn	.68	.76
Skilled Care	3.28	3.15
Intermediate Care	1.03	4.06
Hospice Acute	.52	.62
Respite	1.39	1.36
ER/Urgent/OP Visits	71.70	68.73
Consulting Visits	2.91	4.04
Companion Call	4.39	4.88
Home Hospice	17.24	15.90
Home Health Visits	12.00	13.65
Home Med Equipment	23.65	23.01
Personal Home Services	4.37	5.54
Assisted Living	20.92	25.01
Community Meals	66.85	86.56
Prisoner Meals	75.69	85.16
C.A.R.E.	9.55	11.31
Family Resource Center	31.35	50.42
WEE Care Child Care	31.60	28.35
Community Education	2.33	2.66

To benefit our healthcare team and their families



Prairie du Chien Memorial Hospital has committed to the health and well-being of employees by purchasing family memberships to the Hoffman Hall Athletic Complex. The contribution of \$300,000 is contingent upon the project reaching their fundraising goal and moving forward to the renovation phase of Hoffman Hall.

PDCMH impacts the region

Since 1957, the Hospital has been committed to meeting the healthcare needs of the citizens of Southwest Wisconsin and Northeast Iowa. A study released in November 2011 by UW-Extension and Wisconsin Hospital Association, "Healthy Hospitals. Healthy Communities." showed the significant impact hospitals have on the local, regional and state economies.

The Hospital provides access to vital health care services 24 hours a day, seven days a week, 365 days a year, serving more than 16,735 outpatients each year. In addition to providing quality health care, the hospital also contributes to the local economy in many ways, namely through the people we directly employ and the goods and services we purchase.

The reports states that PDCMH supports other local businesses through "multiplier effects" that are generated in three ways: the hospital's purchases create industry revenues for local businesses, indirect jobs and income for their employees; employee purchases which generate "induced" income and jobs for other businesses in the community; and wages and salaries which are subject to federal, state and local taxes.

According to the report, the Hospital provides jobs for 304 hospital workers and supports an additional 155 jobs created indirectly through hospital purchases and employee economic activity for a total of 455 jobs. Each year the hospital accounts for nearly \$41,034,557 in economic activity. The direct effect of PDCMH is \$28,877,239 and includes revenues from services provided by the hospital.

Grateful Patients. Inspiring Stories.



Little Hospital, big city care

When Mary Konichuk visited her doctor due to weakness in her leg, he quickly referred her to Prairie du Chien Memorial Hospital for testing. “I didn’t even think twice,” said Mary, about the decision to seek testing and care at her hometown hospital. An MRI, followed by a CT and bone scan, helped radiologists quickly determine the weakness in her thigh was due to a tumor. Orthopaedic Surgeon, Dr. Mark Perpich, quickly worked Mary into his schedule to surgically insert a metal rod into her right femur for reinforcement. “He’s very good,” Mary said of Dr. Perpich. “His assistant, Breanna, is also very skilled. She did a great job when she took out my staples.”

Mary noted that she went in for surgery on a Wednesday and, to her delight, she was home by that Saturday. “While I was in the hospital I received constant care. The nursing staff was excellent. My nurse, Janice, was right by my side the entire time,” Mary shared.

Mary continues to take a chemotherapy pill and will have regular follow-up care visits. She noted that the strength in her leg came back quickly and her scars from the surgery are minimal. The excellent outcome and care she experienced at Prairie du Chien Memorial Hospital motivates her to share her story with others. She said, “I tell everyone about my experience here. I’ve been to the larger facilities in places like Dubuque, Rochester and LaCrosse, when we were seeking care for my husband. They have all of the equipment here that they have in the bigger places.”

Delivering the *right* care



Ann and Stephen Farone and their four children had lived in Prairie du Chien for a relatively short time, when they found out they were expecting the seventh member of their family. The Farone’s were faced with the decision to have their baby at the familiar hospital where they had their first four children, a large hospital in the Twin Cities, or at PdCMH. “I have to laugh, thinking back to our uncertainty about coming to Prairie du Chien Memorial. We actually considered scheduling an induction and traveling to the Twin Cities to have Rocco, because it was what we were familiar with,” Ann said.

Ann shared that the birthing experience at Prairie du Chien Memorial Hospital exceeded her expectations, and the level of care was superb. She said, “I received much more personalized attention. The staff let me be involved in the decisions and direct my own care. They were supportive of what I wanted.” Stephen said, “She received the right care, not the convenient care. It was nice to know they respected me as part of the equation too. Here, you’re not just a number; they genuinely care for you.” The Farone’s shared that they were extremely impressed with the family-friendly atmosphere in the Obstetrics Department. “They supported our whole family and our needs while we were here. Our nurse, Mandy (Pettit), even stayed an hour past her shift to meet our children,” Stephen exclaimed. Ann and Stephen agreed that the level of care provided was above and beyond what they expected. Ann said, “I would recommend this hospital to anyone. It was definitely the right decision to come here.”



These Levi’s are made for walkin’

“I was so big I couldn’t wear jeans, I had to ride a scooter when I went shopping, I was an insulin-dependent diabetic and struggled with Sleep Apnea,” said Bill Dalton of Seneca, as he marched briskly on the treadmill. Bill shared the short-list of challenges and health conditions he worked to manage, before losing nearly 125 lbs. as a participant in PDCMH’s Healthy Hearts program.

While in his forties, Bill suffered a heart attack. He underwent triple bypass surgery and had four stents placed. “Bill was referred to Cardiac Rehab by his cardiologist three times. The fourth time he was compelled and determined to make a lifestyle change,” said Tammy Thompson, Exercise Physiologist.

Bill explained that the sudden loss of his wife, Mary, was his motivation to take control of his health. “At first, exercise wasn’t easy. I started out only being able to work out for one minute or less. I worked my way up to three and eventually five minutes. Tammy and Karen kept urging me to do more. I put my mind to it and I did it,” said Bill. He added a bit of advice for others, “Keep trying and success will come!”

Karen Fritsche, Cardiac Rehabilitation Director, also worked with Bill through his journey. “When we’re working with our patients through a transformative journey, like Bill’s, we tend to find ourselves supporting more than just their physical progress,” said Karen. “In many cases, our patients need someone to share their personal frustrations and concerns with. We listen and lend support to them, which seems to help them feel better emotionally, and focus better on their exercise program.”

In October of 2010 Bill graduated from the Cardiac Rehab program and transitioned into the Healthy Hearts program. Exercise is now a regular part of his life, as are the friends he has made through his regular workout visits to Cardiac Rehab.

Bill now walks three miles at least four days per week. He proudly wears Levi’s, no longer needs insulin and is down from two pills to one pill, to help manage his diabetes. When asked what motivates him to work out every week Bill answered, “I enjoy exercise now. And, I want to see my grandchildren grow up.”

Leading our Healthcare Team.

SENIOR LEADERSHIP TEAM

William P. Sexton, FACHE
CHIEF EXECUTIVE OFFICER

Dave Breitbach, CPA
CHIEF FINANCIAL OFFICER

Ellen Zwirlein, RNC
DIRECTOR OF PATIENT SERVICES/
CHIEF NURSING OFFICER

Sasha Dull, BA
CHIEF DEVELOPMENT OFFICER/
EXTERNAL RELATIONS COORDINATOR

Julia Nelson, RN
CHIEF QUALITY OFFICER/EDUCATION DIRECTOR

Ivar (Skip) Gjolberg, FACHE
CHIEF ADMINISTRATIVE OFFICER

DEPARTMENT SUPERVISORS AND MANAGERS as of December 31, 2011

ADMINISTRATION

William P. Sexton, Chief Executive Officer
Skip Gjolberg, Chief Administrative Officer
Laurie Hampton, Human Resources Director

BUSINESS ADMINISTRATION

Dave Breitbach, Chief Financial Officer
Denise Thornton, Business Officer Manager
Zita Balk, Patient Registration Director

C.A.R.E.

Rick Peterson, Director

EDUCATION

Julia Nelson, RN, Chief Quality Officer/Education Director

ENVIRONMENTAL SERVICES

Sandy White, Director
Randy Williams, Assistant Director

FACILITIES/MAINTENANCE

Ken Pankow, Facilities Director
Jeff Mink, Maintenance Assistant Director

FAMILY RESOURCE CENTER

Tonya Millard, Project Director

FOUNDATION/EXTERNAL RELATIONS

Sasha Dull, Chief Development Officer

HEALTH INFORMATION MANAGEMENT

Sue Schultz, RHIA, Director

HOME HEALTH

Twila Dettman, RN, Director
Lynn Groom, RN, Clinical Coordinator

HOSPICE

Marsha Konichek, RN, Director
Sharon Berns, RN, Assistant Coordinator

INFECTION CONTROL

Rose Cantu, RN

INFORMATION MANAGEMENT SYSTEMS

John Daane, Information Systems Officer
Monica Shedivy, Director
Jill Morovits, Assistant Director

LABORATORY

Barb Welsch, MT (ASCP), Manager

LEAN

Nicole Martin, SLP, Manager

MATERIALS MANAGEMENT

Brad Nicholson, Director

MEDICAL IMAGING

Tim Clark, RDMS (RVT), Director

NURSING ADMINISTRATION

Ellen Zwirlein, RNC, Director of Patient Services/ Chief Nursing Officer

NURSING

Heidi Kirschbaum, ER/Outpatient Clinical Coordinator
Vicki Miller, ICCU Clinical Coordinator
Linda Schoulte, Med/Surg/Peds Clinical Coordinator
Chris Schroeder, OB Clinical Coordinator
Jan Weisensale, Geriatric Clinical Coordinator

NUTRITION SERVICES

Romi Pattison, Registered Dietitian/Director
Rita Kazda, Food Service Supervisor

PATIENT/FAMILY SERVICES

Diane Koth, CSW, Director

PHARMACY

Mark Hall, R.Ph, Director

PHYSICIANS

R. Timothy Fitzner, MD, Emergency Department Medical Director

REHABILITATION SERVICES

Tom Wilkes, PT, Rehab Services Director
Nicole Martin, SLP, Rehab Svcs Asst Director/Speech Therapy Director
Angela Wagner, OTR, Occupational Therapy Director
Karen Fritsche, RN, Cardiac Rehab Director

RESPIRATORY THERAPY/HME

Laurie Fritz, CRT, Director

SURGERY

Kathy Kurt, RN, CNOR, OR/SDS Clinical Coordinator
Cheri Everson, RN, OR/SDS Supervisor

WALTER SCHMIDT ASSISTED LIVING

Sara Peterson, RN, Manager

WEE CARE CHILD CARE

Mari Beth Valley, Director

ADMINISTRATION

Kim Krogan
Kris Lawrence
Gabe Oosthuisen
Linda Thompson

AUDIOLOGY

Cathy Goetz, MS*

BUSINESS ADMINISTRATION

Chelsea Beinborn
Mary Bell
Terry Buettel
•Gloria Bunders
Shannon Frazier
Brenda Jones
Shannon Junk
Jeanne Moris
Brenda Nugent
Jane Page
Jacque Simmons
•Peggy Sklenar
Chris Trentin
Paula Wagner
Becky Winkler
Amy Young

C.A.R.E.

Rick Peterson
Emily Wetter

EDUCATION

Ruth Klang, RN
Ruth Graewin

ENVIRONMENTAL SERVICES

–HOUSEKEEPING

Diana Alderson
Wendy Ferguson
Delose Goodrich
Abby Jacobs
Pam Kauffman
Ruth Peters
Martin Schmitt
Mary Shipley
Lance Wetter
–LAUNDRY
Jayne Dressler
Karen Miene
Diane Parkins
Chris Schwartzhoff

FACILITIES/MAINTENANCE

Terri Achenbach
•Tom Hemmer
Floyd Wilder

FAMILY RESOURCE CENTER

Deb Mason
Amanda Nagel

HEALTH INFORMATION MANAGEMENT

•Cindy Jones
Kandi Gillitzer, RHIT
Sue Gillitzer, RHIT
Jeanne Aspenson
Suzy Atkinson
Lynn Larson
Mary Mara
Kelli McKee
Haley Schroeder

HOME HEALTH

Sherry Ariss
Becky Bohnenkamp
•Mary Ball, RN
Jill Henry, RN
Lora Knott, RN
Stephanie Koenig, RN
Karol Nelson, RN
Dianne Sudol, RN
Loretta Weipert, RN
•Sandi Konichek, CNA
Dee O'Connell, CNA
Illene Olson, CNA

As a team, we deliver Healthcare Excellence. As of December 31, 2011

Julie Saddler, CNA
•Maria Titlbach, CNA

HOSPICE

•Diane Glassmaker
Fonda Dickman, CNA
Melodie Deutsch, RN
Julie Fagner, RN
Kay Day, RN
Meg Peterson, RN
Sophie Rose, RN
Ashley Sommer, RN
Joan Walz, RN
Maria Wegmann, RN
Donna Lund, CSW
Barb Stagman, CSW

INFORMATION MANAGEMENT SYSTEMS

Debbie Morovits
Shelly Rider
Ansa Thomas, RN

LABORATORY

April Laufenberg, MLS (ASCP)
Brian Simmons, MLS (ASCP)
Brandi Ballard, MLT (ASCP)
Katie Eglseder, MLT (ASCP)
Holly Gilberts, MLT (ASCP)
Vicki Knudtson, CLT (NCA)
Joan Pulda, MLT (ASCP)
Trina Springsteen, MLT (ASCP)
Gericke Thomas, MLT (ASCP)

MATERIALS MANAGEMENT

Leanne Lessard
Pam Kiesau
Krista Zimmerman

MEDICAL IMAGING

Jean Blake, RTR(M)
Kathy Ihde, RTR (CT)(M)
Nicole Corlett, RDMS (RVT) (RTR)M
Crystal Eckstrom, DMS
Luke Hoffman, RTR
Amber Jones, RTR(M)
Allison Riter, RTR(M)
Mary Sadewasser, RTR(M)
Teesha Smethurst, RTR
Becky Willems, RTR(M)
Amanda Youngblut, RTR(M)

NURSING ADMINISTRATION

Ellen Winkleski

NURSING

Peggy Barton, APNP
Heidi Hochhausen, APNP
Rochelle Neisius, APNP
Tammy Plondke, APNP
Alisha Abel, RN
Sara Breuer, RN
Stacey Colsch, RN
Ruth Colson, RN
Peggy Corlett, RN
Amy Donlon, RN
Rose Eglseder, RN
Laurie Ellefson, RN
Shirley Feuerhelm, RN
Mary Fisher, RN
•Mona Fisher, RN
Terra Fleshner, RN
Rachael George, RN
Beth Henkes, RN
Amy Hird, RN
Anne Marie Hoeger, RN
Annette Kast, RN
Kristin Kazynski, RN
Cheri Korywachak, RN
Janice Kramer, RN
Cheryl McCune, RN
Amy Moses, RN

Carrie Nagel, RN
•Kathleen Novey, RN
Kila Nuehring, RN
Sarah Nuehring, RN
Emily O'Brien, RN
Suzi Okey, RN
Wanda Osolkowski, RN
Justine Peloch, RN
Amanda Pettit, RN
Monica Preston, RN
Sue Rider, RN
Karen Ries, RN
•Becky Rooney, RN
Bethany Schiefelbein, RN
Dawn Schultz, RN
Vicki Schutte, RN
Katie Simmons, RN
Deb Smith, RN
Miranda Sparrgrove, RN
Meghan Stannard, RN
Kurtis Stram, RN
Kelsey Stuckey, RN
Danielle Swiggum, RN
Janice Tank, RN
Betsy Thorson, RN
Stephanie Wagner, RN
Angie Woods, RN
Ben Harris, ER Tech
Ashley Kussmaul, ER Tech
Hollie Waterman, ER HUC/CNA
Katy Bouzek, HUC
Melissa Dickman, HUC/CNA
Sue Mara, HUC
Darlene McKee, HUC
•Jan Steiner, HUC
Cathy Aspenson, CNA
Karen Bucheit, CNA
Lauren Colson, CNA
Laura Delarm, CNA
Mary Gibbs, CNA
Natasha Hauser, CNA
Judy Hebel, CNA
Sue Kielley, CNA
Peggy Kricke, CNA
Ben Lange, CNA
Cathy Leahy, CNA
Amber Louah, CNA
Angie Manning, CNA
•Sandy Nagle, CNA
•Mary Neis, CNA
Rachel Pruett, CNA
Diane Reger, CNA
Cheryl Trentin, CNA

NUTRITION SERVICES

Sue Bahls
•Mary Ann Boland
Bev Cornford
Yvonne Gillitzer
Barb Lane
Renee Martin
Donna McKinney
Nancy Morgan
Nick Morgan
Dawn Mumm
Sheri Ott
Wanda Peters
Brooke Tesar
Vickie Young

PARISH NURSING

•Jean Bacon, RNC
•Rose Bauer, RN
•Shirley Cipra, RN

PATIENT/FAMILY SERVICES

Rogena Andrus, MSSW
Karen Ulrich, CTRS

PHARMACY

•Joanne Prew
Todd Burkle, R.Ph

Larry Brummel, R.Ph*
Jim Boldt, R.Ph*
Jade Halvorsen, Pharm.D*

PHYSICIANS

Khalid Ali, MD
Christopher Burrows, MD
James Gariti, MD

REHABILITATION SERVICES

–CARDIAC REHABILITATION

Pat Stovey, EP
Tammy Thompson, MS, RCEP

–OCCUPATIONAL THERAPY

Lisa Neitge, OTR
Nathan Rickertsen, OTR
Javier Alvarez, COTA
Jill Koehn, COTA
Laura Konichek, LMT
Heidi Krachey, LMT

–PHYSICAL THERAPY

•Dawn Ehlinger
•Janet Wagner
Nancy Key, PT
Angie Kramer, PT
Melanie Schneider, PT
Emily Yoshino, PT
Paul Johnston, PTA
Bobbie Jo Mallat, PTA
Mark Seeley, MS, LAT
Penny Grassel, LAT
Dan Reger, CNA

–SPEECH THERAPY

Traci Konichek
Kim MacEachern, SLP
Juli Smith, SLP

RESPIRATORY THERAPY

Rich Scott, CRT
Sheila Schuety, RRT
Catie Dean, RRT
Richard Hesseling, RRT
Eric Broussard, CRT
Stacie Ruckdaschel, CRT
Cheryl Scheffert, CRT
Sue Vorwald, CRT
Denice Patterson, HME Tech

SURGERY

Katy Kruger, RN
Cheryl Kube, RN
Tammy Mezera, RN
•Jayne Prew, RN
Tisha Earle, CORT
Rachel Huber, CST
•Nancy Mumm, CORT
Sharon Mumm, CORT

WALTER SCHMIDT

ASSISTED LIVING

Judy Cowell, CNA
Patricia Dickens
Doreen Fish, CNA
Kyna Johnson
Candace Kazynski
Maggie Payne
Carrie Seeley
Kathy Slama, CNA

WEE CARE CHILD CARE

Brianne Collins
Donna Gilberts
Theresa Heal
Theresa Looney
Vickie Mundt
Kim Radloff
Kristi Rickard
Diane Steger
Nola Suetmeyer
Jessie Udelhoven
Brent Waller

* 25 or more Years of Service

* Contracted Staff

Highlights in Review. July 1, 2010 - December 31, 2011

July 2010

- P.A.L.S. 4 Good Day Camps, sponsored by C.A.R.E. and Crawford County Mentoring Program, provided education and recreation for 150 2nd-5th graders from Prairie du Chien, Seneca, Wauzeka and North Crawford Schools.
- The commitment to Lean Concepts and Principles continued as 18 employees completed the first Lean Certification Training provided by Southwest Wisconsin Technical College.
- Remodeling was completed in the Acute Care Wing's bath and shower room. The new door and a half allows staff to assist bariatric patients with ease. The project also included the construction of a new office for the Med/Surg Coordinator and Geriatric Clinical Coordinator.
- Accutech's Cuddles Infant Security System was installed in Obstetrics.
- Grant funds of nearly \$7,000 from the Wisconsin Emergency Preparedness Program helped purchase a bariatric med sled and 10 additional 3M air mate papr's (power air purifying respirator) and replacement parts.
- InterQual Level of Care Criteria software was installed to assist physicians and nurses in determining if a patient's specific presentation and prescribed services are appropriate for given level of care.
- Erdman, Cogdell Spencer began preliminary stages of a master facility planning project.
- New orthopedic fracture table was purchased to help position patients for fractured hip procedures.
- Installation of new flooring in the patient rooms began on the Long-Term Wing.



Mary Fisher

August 2010

- Installed Direct Emergency phone from ER to 911 Dispatch.

September 2010

- PDCMH received national recognition and nearly \$61,000 symbolizing a Focus on Energy Cash Back Reward for new environmentally friendly features reducing energy demand.
- Heavy rains produced water levels above flood stage on the Mississippi River cancelling events and forcing emergency personnel to assist with special arrangements to complete home visits.

October 2010

- Medical Imaging hosted a community education program in recognition of Breast Cancer Awareness Month.
- PDCMH Association Inc. held its 53rd Annual Membership Meeting. Joe Faust was recognized for 12 years of service on the Board. The election of officers returned Alice Staples and Rory Meisner for another three year term. Roy C. George was named as new Board Member. The By-Laws were changed for the corporation's fiscal year to work in conjunction with the calendar year. Tim Size, Executive Director of Rural Wisconsin Health Cooperative, shared information on the Rural Cooperative and the strengths and challenges of rural healthcare. He praised PDCMH for their outreach. He said, "Prairie du Chien Memorial Hospital reaches out into the community probably more than any other hospital in Wisconsin."
- Sasha Dull, Foundation Chief Development Officer/External Relations Coordinator, and Brad Nicholson, Materials Management Director, were welcomed to the team.
- Patricia Modjeski, dedicated and loyal employee for nearly 32 years, died of cancer.
- Stacy Blackburn, D.O., affiliated with Franciscan Skemp, and Melissa Simon, D.O. affiliated with Gundersen Lutheran, joined the Medical Staff.
- C.A.R.E. held their 21st annual Youth Leadership Training Conference at the Wisconsin Lions Camp in Rosholt. Seventy-four students and 12 adult advisors, representing five school districts, participated in experiential, ropes course activities focused on team building, decision making and positive risks. Training included the "U Take It Back – Your Future" program. Students also worked on laying the groundwork for a Crawford County Teen Court program which became a reality in the Spring of 2011.
- Cheryl Trentin, CNA, Nursing Services, was named Employee of the Month.
- An emergency call system was installed from the Obstetrics LDR Rooms to the East Nurses Station.



Pat Modjeski



Stacy Blackburn, D.O.



Melissa Simon, D.O.

November 2010

- Kathy Buenzli, Materials Management Director, retired after 37 years of dedicated service.
- The Board of Directors approved a new vision statement: Prairie du Chien Memorial Hospital achieves the best outcome for every patient, every time. It is where: patients want to go when they need health care services, physicians want to practice, people who are passionate about healthcare want to work, the community feels it has an invaluable resource, and the region knows high quality patient-focused health care is provided.
- Recalled IV pumps were replaced with Smart Technology Pumps.
- Danielle Swiggum, RN, Nursing Services, was named Employee of the Month.
- Laboratory survey conducted by The Joint Commission went well with no direct findings and few indirect impact findings.



Kathy Buenzli Retirement Celebration

December 2010

- Partners and PDCMH hosted a successful Preview, "A Candy Land Christmas."
- The annual Christmas Tea included the naming of Employees of the Year: Barb Welsch, MT (ASCP), Laboratory Manager, and Mary Ball, RN, Home Health. Years of Service Awards were presented to 41 employees.
- Lauren Colson, CNA, Nursing Services, was named Employee of the Month.
- A new pager system was installed.



Barb Welsch; Bill Sexton, CEO; Mary Ball

January 2011

- Oliver Joseph Ludvik, first baby of the year, was born on New Year's Day at 3:06 p.m. The baby boy is the first child of Miranda and Joe Ludvik of Marquette, Iowa.
- Partners conducted their Annual Meeting. Iva Mulhern and Sue Meisner, were elected to serve as Co-Presidents.
- Stacie Ruckdaschel, CRT, Respiratory Therapy, was named Employee of the Month.
- Louis Wenzlow, Rural Wisconsin Health Coop's Director of Health Information Technology, shared a series of Electronic Health Record-Meaningful Use Assessment Meetings to Department Heads, Board Members, Physicians and staff members.

February 2011

- Results of surveys conducted of Home Health Care Agency and WEE Care Child Care reveal excellent results.
- Bev Cornford, Nutrition Services Assistant, was named Employee of the Month.
- Nutrition Services and Patient Family Services held a Soup Kitchen to benefit area Food Pantries.

March 2011

- An Employee Bright Idea Program was launched with success; 42 ideas were submitted.
- The Pink Glove Dance Team made their debut performance at the Prairie du Chien St. Patrick's Day Parade raising awareness of breast cancer and the importance of early detection.
- Annual Employee Inservices takes on new format. The Swank HealthCare technology provides efficient online education.
- PDCMH Foundation hosted PDC Chamber's Business After Five showcasing technology in Medical Imaging, OB, ICU and Rehab Departments; attendees were given a sneak preview of the Dr. Clifford C. Smith bronze statuette.
- PDCMH was selected as one of 16 Wisconsin Hospitals to participate in the TCAB (Transforming Care at the Bedside) Grant Program. The national program is funded by the Robert Wood Johnson Foundation's Aligning Forces for Quality Initiative. TCAB began in 2003 with the goals to improve the quality and safety of patient care and reduce disparities in care, increase the vitality and retention of nurses and front-line staff, engage and improve the patient's and family members' experience of care and improve the effectiveness of the entire care team.
- Brenda Nugent, Patient Registration Associate, Business Administration, was named Employee of the Month.



Pink Glove Dance Team in their first performance

April 2011

- Autism Support Group joins efforts to "Light It Up Blue" by decorating the trees at the front entrance with blue lights.
- Three long-time employees retire. Connie Achenbach, Chief Operations Officer, commented that she spent her career of lifework, 38 years, doing something that was so fulfilling, working in a place that helps people. Faye Wiethorn, RN, retired after 44 years of nursing at PDCMH, the last 23 years as Manager at Walter Schmidt Independent Living and Utilization Review Data Analyst. Duane Nagle, Maintenance Assistance Director retired after enjoying 22 years at PDCMH.
- Sara Peterson, RN, joins PDCMH as Walter Schmidt Assisted Living Manager, and Jeff Mink, Maintenance Assistant Director.
- Sheila Schuety, RRT, Respiratory Therapy, was named Employee of the Month.
- C.A.R.E. launched a Parents Who Host, Lose the Most: Don't be a party to teenage drinking campaign county-wide, a public awareness campaign educating communities and parents about health and safety risks of serving alcohol at teen parties. The campaign concentrates on celebratory times for youth, such as homecoming, holidays, prom, graduation and other times when underage drinking parties are prevalent.



Connie Achenbach and President Paul Ginkel



Duane Nagle and his wife Sandra



Faye Wiethorn with Assisted Living Staff

May 2011

- PDCMH Foundation Scholarships were awarded to area high school graduates, Prairie du Chien: Brandon Bird, Nursing - \$4,000 deferred; Jessica Mara, Nursing - \$8,000 deferred, Jessica Swiggum, Speech Therapy - \$8,000 deferred. Clayton Ridge: Taylor Fassbinder, Nursing - \$8,000 deferred. DeSoto: Courtney Stilwell, Nursing - \$8,000 deferred. North Crawford: Samantha Brown, Nursing - \$8,000 deferred. Nursing Scholarship: Terry Van Loo, Nursing - \$2,000.
- The recognition of National Hospital Week included the Foundation hosting the unveiling of the Dr. Clifford D. Smith bronze statuette by artist Florence Bird.
- PDCMH was well represented at Advocacy Day in Madison asking legislators to preserve the Medicaid safety net for the most vulnerable populations in Wisconsin and minimize cost shifting to employers and employees from unreimbursed Medicaid costs and uncompensated care.
- PDCMH establishes the Friend of the Family Fund through the Employee Assistance Program to help employees in a situation requiring urgent financial help.
- Mandy Pettit, RN, Nursing Services, was named Employee of the Month.
- The hospital participated in a Vigilant Guard WHEPP (Wisconsin Hospital Emergency Preparedness Program) Exercise. The drill utilized the Evacuation Plan, Send Word Now, and WI Trac to find available hospital beds.
- Maintenance increased energy efficiency by replacing pumps and the air handler controls.



June 2011

- The annual HAZ-MAT Decontamination Training was held on-site.
- Julie Metcalf Cull, Registered Dietitian relocates and leaves hospital employment.
- Brian Simmons, MLS (ASCP), Laboratory, was named Employee of the Month.



July 2011

- Family Resource Center received \$500 from Sutton Insurance to help update its education and resource lending program.
- Partners received \$1,775 grant dollars from the George Family Foundation for Baby's 1st Books.
- Skip Gjolberg, FACHE, joined the Senior Leadership Team as Chief Administrative Officer.
- Nicole Martin, SLP, was named Lean Manager to lead the Lean initiative, and Brian Fairbrother, Orchid Group LLP, as Lean Consultant.
- Paula Wagner, Patient Registration Associate, Business Administration, was named Employee of the Month.

August 2011

- Mark Hall accepted the position as Pharmacy Director.
- Athletic Trainers partner with Prairie du Chien, River Ridge and Wauzeka High Schools to utilize an innovative program, IMPACT (Immediate Post Concussion Assessment and Cognitive Testing), for evaluating and treating head injuries.
- TCAB Kickoff is a huge success with over 80 attending. The event brought awareness to TCAB efforts through displays, a banner, and on a billboard on Highway 18 west of Marquette, Iowa.
- Tamara Blair, D.O., General Surgeon, joined the staff at Gundersen Lutheran and our Medical Staff.
- Deb Smith, RN, Nursing Services, was named Employee of the Month.
- PDCMH commits to the health and well-being of employees by purchasing family memberships to the Hoffman Hall Athletic Complex. The contribution of \$300,000 is contingent upon the project reaching their fundraising goal and moving forward to the renovation phase of Hoffman Hall.



Tamara Blair, DO

In the National Spotlight

Prairie du Chien Memorial Hospital was named one of the top 100 critical access hospitals in the country. The announcement was made as part of the National Rural Health Association's annual Critical Access Hospital Conference in Kansas City, Missouri. Prairie du Chien Memorial Hospital scored best on the iVantage Health Analytics' Hospital Strength Index. In this first-ever comprehensive rating of CAHs, the results recognize the top hospitals that are the safety net to communities across America – measuring them across 56 different performance metrics, including quality, outcomes, patient perspective, affordability and efficiency.

September 2011

- Lance Wetter, Floor Maintenance in Environmental Services, was named Employee of the Month.
- Remodeling in the room previously used for Hemodialysis provided a room for the Hip Hop Pre-Op orientation, a project completed through Lean. Remodeling in Materials Management gives the office space a well-needed update.
- RN's learn to utilize E-Forms for initial interview, initial physical assessment and medication list. Information gathered upon admission will carry over from stay-to-stay only requiring RN review.
- The National Rural Health Association announced a study completed by iVantage, one of its affiliate organizations, naming PDCMH is one of the top 100 Critical Access Hospitals in America.
- The Hospital Board of Directors made a bold and visionary decision to engage an architect in anticipation of building a new hospital.
- Quiet Time was implemented as one of the TCAB projects and a Bright Idea. Patient surveys show the program is a success.
- Romi Pattison, RD, accepted the position of Registered Dietitian and Nutrition Services Director.
- A PB&J Drive and a Coat Drive was held to benefit area Food Pantries and those in need.



Kristin Kazynski

A Bold and Visionary Decision

After more than one year of careful consideration and extensive research, the Board of Directors voted unanimously to engage an architect in anticipation of building a new hospital. "This is a bold and visionary decision and we want to take the time to do it right," said Bill Sexton, Chief Executive Officer. "We will release more information as it becomes available, but what we know for certain is that we're focused on patient-centered care for the future. Ultimately, our goals include providing the communities we serve with a state-of-the-art, energy efficient hospital, enhanced emergency services and 100 percent private rooms."

October 2011

- Sharon Mumm, COURT, Surgery, was named Employee of the Month.
- Massage Therapy relocated to Bluff Haven and added Aesthetics Services.
- The 22nd annual C.A.R.E. Youth Leadership Conference was held with 59 students and 11 adults from three school districts receiving training on "Above the Influence (ATI)." ATI is not a typical anti-drug program. It's a philosophy, an attitude and a commitment for youth to resist negative influences in their life and be "more pro-me." The experiential, ropes course and team building activities were again a highlight of the event.
- The Relay for Life Team, The Power of Pink, hosted "Pretty in Pink" for Breast Cancer Awareness Month. Ladies enjoyed the health education and being pampered with chair massages, hair tinsel, and mini manicures.
- The Cardiovascular/Pulmonary Rehabilitation Program was recognized by the American Association of Cardiovascular and Pulmonary Rehabilitation for its commitment to improving the quality of life by enhancing standards of care.

November 2011

- Senator Jennifer Shilling visited the Hospital to discuss healthcare issues facing rural communities and the positive impact the hospital has on the Prairie du Chien area.
- Amanda Nagel, Parent Educator, was named Employee of the Month.
- Home Health and Hospice collected 70 blankets through their "Spread the Warmth" campaign. The blankets were distributed to Crawford County Human Services in Wisconsin and Shepherd of the Hills in Iowa.
- A security system was added in Pharmacy, and a new Clean Room allowed the pharmacist to prepare sterile products.
- State-of-the-art technology and equipment were installed in one of the surgery rooms so that now both operating rooms are equipped to handle any surgical procedure.
- State and Federal grant monies were used to update the door security system and purchase other new equipment.
- Increased energy efficiency by replacing the boiler controls.



Wisconsin Senator Jennifer Shilling visits PDCMH



December 2011

- Beth Henkes, RN and Ansa Thomas, RN were named Employees of the Year. Years of Service Awards were presented to 50 employees.
- Julie Fagner, RN, Home Health, was named Employee of the Month.
- Partners and PDCMH hosted another successful Preview with the theme "An Arctic Christmas."
- PDCMH received an acceptance to the offer to purchase land east of Hwy 18 and South Marquette Road, across from the Municipal Airport. The property features adequate land for future expansion and will also allow for easy access for patients, med flight and other emergency vehicles. The hospital will be clearly visible from Hwy 18.
- Added Uninterrupted Power Supply (UPS) system at tower for pager system.



Ansa Thomas and Beth Henkes

The excitement continues to BUILD!

After six months of researching and considering more than 16 sites for the new hospital, PdC Memorial Hospital received an acceptance to the offer to purchase land on December 15, 2011. The land under contract is located east of Hwy 18 and South Marquette Road, just south of Vineyard Coulee Road, across from the Prairie du Chien Municipal Airport. The property features adequate land for future expansion and will also allow for easy access for patients, med flight and other emergency vehicles. The hospital will be clearly visible from Prairie du Chien's main corridor, Hwy 18. Mr. Sexton, CEO, stated, "We're dedicated to creating a state-of-the-art healthcare facility, offering superior privacy and infection control, increased emergency services with easy access and expanded services."



“I have been in a lot of hospitals and the Prairie du Chien Hospital is my favorite one and the best yet!”

~Home Health Patient

Partners are a vital part of our team. *Sue Meisner* Co-President

Partners have logged in approximately 5,381 hours of service for 2011, and we are honored to support the mission of the Hospital, make a difference in the lives of others, and assist the wonderful staff. This past year was quite busy with the addition of numerous volunteer efforts:

- Greeting patients for Hip Hop Pre-Op
- Completing inventory for Occupational Therapy
- Decorating the Hospital's 10 Christmas trees
- Sewing Angel Pockets
- Hosting a Lunch & Learn for employees
- Helping at a Blood Drive held at the Hospital
- Assisting with displays in the front lobby
- Representing our Hospital at PDC's Octoberfest with our scarecrows "Mabel & Gertrude" promoting Breast Cancer Awareness
- Helping with activities at Walter Schmidt Assisted Living—hosting Bingo games, providing hand massages, assisting at their picnic and leading morning exercises and the Rosary.

We continued to coordinate Christmas Stockings for patients, W.H.A.L.E., H.E.L.P., and Daffodil Days. Partners manned the volunteer desk; made hand-crafted walker bags, hats and dish rags; sent birthday cards to residents at Bluff Haven, Prairie Maison, and Walter Schmidt Assisted Living, and sent sympathy cards to families that lost a Partner.

Fundraisers were Geranium/Basket Sales, Greeting Cards made by the Opportunity Center, Vending Service, Book Fairs, A Light for All Seasons, Season of Lights, Walk of Stars and Preview to Christmas. The Season of Lights honorees for 2010 were Kelly Mundt and Rick Walters and 2011 honorees were Jack and Betty Howe. Partners also received a generous donation from the George Family Foundation to help fund Baby's 1st Books.

Partners funded the following projects and programs: four \$1,000 scholarships to high school students, new matting for a print in the Medical Imaging Waiting Area, coloring books and crayons for young patients and visitors, grief therapy books, pocket calendars promoting women's health, Baby's 1st Book Sets, heart-healthy snacks for Wear Red Day, an AED (Automated External Defibrillator) for Walter Schmidt Assisted Living/WEE Care, donation of \$1,000 to WEE Care for new toys and games, an assistive hearing device to aide patients, small stuffed toy animals for use in Emergency Room, and cakes for employees to enjoy during Hospital Week and Nursing Home Week

Our Annual Meeting was held at Huckleberry's with Jane Schaaf, UW Extension, giving an informative presentation on Identify Theft. The Semi Annual Meeting, held at The Barn, included presentations by employees in new roles: Nicole Martin, Lean Manager; Romi Pattison, Registered Dietitian; and Skip Gjolberg, Chief Administrative Officer. Members attended the District Meetings in Lancaster, Viroqua and Neillsville and the State Convention in Eau Claire.

A new annual volunteer training class educated Partners on HIPAA, wheel chair use, the code of conduct and tasks that could be completed at the volunteer desk.

We strive to stay current on healthcare issues. Our Partners made 82 contacts with legislators, and five members attended Advocacy Day. We continue to keep our volunteers interested in the political aspect of healthcare and hope that one day all Partners will sign up for HEAT so that our voice will be heard!

In closing, we say farewell to Barb Huebsch and Iva Mulhern as they will be stepping down from the Board in 2012. We will also be losing Cheryl Martinez as she moves back to Peoria, Illinois. These vacancies will be filled following our Annual Meeting. These women will all be missed, but they will continue to help Partners in any way they can.



Board Members for 2011, seated from left: Marlene Grunow, Diane Koth, Hospital Liason; Sue Meisner, Co-President; Iva Mulhern, Co-President; and Lorna Davis, Treasurer. Standing: Delores Bonney, Cheryl Martinez, Mattie Rademacher, Deanie Kieser, Marsha Ritter, Barb Huebsch, Jeri Kluesner, Pulic Policy Chair; and Judy Bebow (resigned from the Board in June). Not pictured: Darlene Wolfgram, Secretary.



Some of our delegation at Advocacy Day in Madison.



Barb Huebsch, Iva Mulhern, and Cheryl Martinez.



Alice Kirschbaum and Terri Connell as they sorted geranium orders.

A Legacy of Giving.

Sasha Dull Chief Development Officer



Prairie du Chien Memorial Hospital traces its roots back to 1957, and the story of the dedication and perseverance of many local community leaders combined with the generosity of the community through memorial gifts. The land upon which the hospital currently stands was also contributed to the Hospital by the Vince Polodna family.

Prairie du Chien Memorial was built by the community to serve the community. That legacy and generous spirit still runs deep in the roots of our hospital. More than 50 years later, the people of our communities continue to contribute to the Hospital in memory of their loved ones, out of gratefulness for their care, or to enhance services.

The Prairie du Chien Memorial Hospital Foundation was established in 2010 with the mission of supporting the programs of the hospital through philanthropic efforts, to ensure a lifetime of quality healthcare is available to the people of our region. Throughout the past 18 months the Foundation Board has been working to create a strong beginning for this organization. Accomplishments include receiving non-profit- 501(c)(3) status, crafting Bylaws, Articles of Incorporation, organizational policies, and, with employee support matched by the Hospital, establishing a Friend of the Family Fund for hospital employees in need.

Back in 2009 employees and community members gave donations with the goal of creating a statuette in honor of the late Dr. Clifford C. Smith. The Foundation has shared that statuette, to carry on the legacy of Doctor Smith, one of the area's well-loved and respected providers of healthcare. The story of "Doc" and the statuette was on display at many locations throughout the communities he served, including McGregor, Marquette, Prairie du Chien and Monona and will now be prominently displayed at the hospital.

We are also proud to share that our inaugural fundraising gala, La Soiree, was held on March 24, 2012 in support of Prairie du Chien Hospice and Home Health programs. \$37,000 was raised for these two invaluable programs, which serve the people of our communities throughout Southwest Wisconsin and Northeast Iowa.

All of these successes would not have been possible without the dedication of the Foundation Board and our donors. It is with true appreciation that we recognize these generous people who continue the legacy of giving and join us in support of healthcare for today, and generations to come.

Thank you to our Foundation Board of Directors.

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Thank you for your service

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Randy Zimmer

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Donors who remember Prairie du Chien Memorial Hospital Foundation in their estate plans.

Naming Opportunities May also be available.

Contact the Foundation Office for more details and giving opportunities at 608.357.2140 or dulls@pdcmemorialhospital.org

Give online at
www.pdcmh.org/foundation

Scenes from La Soirée.

The Inaugural Gala of the Prairie du Chien Memorial Hospital Foundation raised \$37,000 for Prairie du Chien Hospice and Home Health Programs, which serve people throughout Southwest Wisconsin and Northeast Iowa.



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