



Excellence Every Day

YEAR END 2017

## Preserve your Legacy

Carry your history into the future and preserve your legacy in a time capsule.

The Legacy Living and Rehabilitation Center's Advisory Board has launched a fundraising campaign to celebrate 100 years of long term care in Campbell County.



Individuals and businesses can purchase a time "caplet" for \$100 and fill it with their commemorative items. The sealed plastic time caplets measure 2.7" x 3" x 9.8" in diameter and will be inserted into an air and water tight stainless steel capsule to be buried on Memorial Day, May 28, 2018 at The Legacy Living and Rehabilitation Center. The time capsule will be opened on Memorial Day 2064.

Time caplets can be purchased at The Legacy Living and Rehabilitation Center, 1000 S. Douglas Highway, or the Campbell County Memorial Hospital Gift Shoppe, 501 S. Burma Avenue. Caplets must be returned to The Legacy by May 1, 2018 or sooner. Call 688-7156 or visit [legacywyo.org](http://legacywyo.org) for more information.

## Between Hospital & Home

By Kim Phagan-Hansel

Shoulder surgery followed by a stroke last December were huge setbacks for Leland Hove. After spending a week in the hospital, Leland decided it would be too difficult to go straight home, not feeling fully recovered. So instead, he spent 10 days at The Legacy Living and Rehabilitation Center in Short Term Rehabilitation resting, recuperating and working with the physical and occupational therapists on staff to get stronger.

"It was a great choice," Leland said. "Everyone was interested in helping me get better."

Because of the area in his brain where the stroke occurred, Leland struggled with balance. So, a majority of his time at The Legacy was spent working on regaining balance. In addition, since he was still recovering from his shoulder surgery, Leland focused on strength training to help avoid reinjury of his shoulder.

"I had to be really careful with my shoulders," Leland said. "I needed to strengthen muscles. They were there to help me with different kinds of needs."

His daily therapy was coupled with plenty of time for rest and to enjoy the amenities



Occupational Therapist Christie Boer helps Leland Hove with his weight training program at Short Term Rehabilitation in The Legacy.

of The Legacy facility as well. Being in a beautiful setting working with people who were encouraging helped keep Leland motivated to get back up to speed.

"It's a beautiful place," Leland said. "Everybody was in pleasant moods. I like the place. I like the people."

Greeting residents and patients with a

smile on her face is an important aspect of occupational therapist Christie Boer's job. Being upbeat and encouraging helps keep patients motivated and from becoming depressed about the situation that's brought them to The Legacy.

"I try to be positive and help them maintain a positive outlook," Christie said. "It's a lot of educating on ways to cope."

Patients typically come to Short Term Rehab after experiencing a catastrophic event like a stroke, car accident, extended illness or extensive surgery and just need a little extra work in order to return home and be self-sufficient.

The Legacy therapy team works closely with individuals to help them get stronger and be safer as they prepare to go home. They work on some targeted exercises to help patients gain strength but they also work on smaller details that will help them function better and safely when they go home.

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## CEO Update



Andy Fitzgerald, CEO

During the holiday season, caring for the ones we love is on our minds and close to our hearts. At Campbell County Health, we show our employees we care through our retention and training programs, and we show the community we care through our wellness program. In both cases, we empower individuals to better themselves, and to be well.

We know that employees who feel valued mean better care for our patients and a more productive workplace, so we support potential and current employees in advancing their careers through workforce development, including recruitment, retention and training programs.

For many years we have helped sustain Gillette College's nursing program by supporting nursing instructor positions and providing dollars to expand class offerings and training equipment, such as the new health simulation lab. This means nursing students get a quality education and an effective preceptorship with our experienced nurses. Hopefully, they decide to join us.

We also support new registered nurses who come to us fresh out of college in our popular RN residency program. They have the clinical knowledge, they simply need support from seasoned nurses to help them apply their skills in the real world.

For our staff who wish to return to school for advance degrees, we provide \$100,000 annually, beyond the approximately \$400,000 we spend on continuing education yearly, helping CNAs gain their RN or technician degrees, RNs gain their master's in nursing, and management folks gain their MBAs or another advanced degree.

Finally, we are developing an innovative succession plan for our management staff that identifies new leaders, provides training, and assigns a mentor to help them advance their career. We aim to develop at least half of our leaders internally. The hope is that these upfront investments will pay off in the end to better us as an organization, and to better our individual employees.

This proactive thinking continues in our wellness program, where we help better the health of thousands of business and industry participants each year. Our wellness program is well known in the state and region. We partner with many companies to promote health and wellness by supporting their employees with a wellness coach, nurse, or nutritionist to help meet health goals. Goals include losing weight, changing dietary habits, starting an exercise program, or getting a chronic illness in check. With someone at your side, you tend to do better.

Our goal is to change the model of care from focusing on providing sick care to providing well care. We want to help you stay well and out of the hospital, and we are here to help you achieve that—and to provide the best care possible when you need us.

Well wishes!

Andy Fitzgerald, CEO

## MEET OUR NEW PROVIDERS



Sarah Smith, APRN  
*Behavioral Health Services*  
688-5000



Amy Hawk, APRN  
*Nephrology and Complex  
Medicine*  
688-3615



Anne Jones, APRN  
*Nephrology and Complex  
Medicine*  
688-3615



Michael Nollo, MD  
*Pulmonary and Sleep  
Medicine*  
688-3615



Jennifer Frary, PA-C  
*Walk-in Clinic*  
688-9255

Complete information on  
all our medical providers at  
[cchwyo.org/findadoc](http://cchwyo.org/findadoc).

## Automation Makes IV Medications Safer

A new software product in the CCMH Pharmacy called DoseEdge is making intravenous (IV) medications safer for patients. IV medications are introduced directly into a patient's vein and work quickly. This makes them a very effective way to give antibiotics, chemotherapy agents and other medications. Because they work so quickly, IV medications have a greater potential for an adverse outcome, even with only small variances in their preparation. They are usually also clear fluids, along with the liquids they are mixed with.

"Pills have different shapes, colors and markings to help identify them," said Robert Quintana, RPh, Pharmacy Director.

The DoseEdge software incorporates bar code scanning into the process of routing, preparing, inspecting, tracking and reporting on IV doses. It supplements the knowledge, judgement and expertise of the pharmacist and pharmacy technician in their preparation of IV mixtures, ultimately increasing patient safety.

The pharmacist can even verify the mixture from a remote desktop location because the software photographs the completed IV dose, saving the time it would take the technician to gown up and enter the sterile preparation room. Nurses benefit too, and can see when their IV medications will be completed and schedule the patient's treatment or administration accordingly.



*A sample of an IV medication with the new bar coding system used in the CCMH Pharmacy.*

"The new software improves on the human-based safeguards we already have in place," says Quintana. "Bar coding reduces the variability of IV medication preparation even more. It's a great improvement for our patients."

The CCMH Pharmacy department is the first in Wyoming to implement this system. Robert Quintana fully expects that bar coding of IV preparations to become the standard of care for hospitals like CCMH, which dispenses over 44,000 doses of chemotherapy and IV medications annually.

## Surveys Help Improve the Patient Experience

If you've ever had services at Campbell County Health, chances are you've been asked to complete a survey about your experience. Surveys help us find out whether something that should have happened actually did happen, and how often it happened. It's a way to address any issues and keep improving our care. We know it takes time and effort to complete a survey and we appreciate everyone who does.

Most of our patient surveys are conducted by telephone through an outside vendor called Healthstream. Patients are selected at random, and the vendor must follow our rules

about patient confidentiality. You will see the number 614-846-8410 on your caller id, and surveyors only call between 9 am and 9 pm. Patients who had services in the hospital, emergency department, outpatient surgery, radiology, lab and rehab are surveyed using this method.

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## Between Hospital & Home *continued from the cover*

“Their goal is to return home as quickly, safely and independently as possible,” Christie said. “The Legacy is a really great facility with so many opportunities for people.”

Some of those opportunities include working out in the state-of-the-art gym. Specialized equipment like a gait trainer with an overhead harness enables patients to walk and move with the added security of the harness that prevents them from falling.

The Legacy’s occupational suite is equipped with a replica of a home to help patients practice their day-to-day tasks like washing dishes, switching laundry and cooking. The mock apartment helps them practice for independent living again.

“It’s really very helpful to work on retaining of functional tasks in order for people to go home,” Christie said.

And before patients get the all clear to return home, therapists visit the patient’s home to check on safety.

The Legacy Living and Short Term Rehabilitation Center is **100% Open**



40

Memory Support Rooms

20

Short Term Rehabilitation Rooms

100

Long Term Care Rooms

They often identify tripping hazards or areas where safety handrails could be installed.

“We take the residents to their house to see how they do functionally in their home,” Christie said.

Before his stay at The Legacy was complete, a therapist went to Leland’s house. The staff identified some rugs that could be tripping hazards and areas where handrails could add additional support and help prevent potential falls.

Now that he’s home and back to work as owner of Chemical Consultation, Inc., Leland is still working to get stronger, using the exercises recommended by the therapists at The Legacy.

“I get a little bit better every day,” Leland said.

**Learn more about the services offered at Short Term Rehabilitation in The Legacy at [cchwyo.org/str](http://cchwyo.org/str).**

## Hospital Billing Office to Move in Early 2018

Soon after the new year, patients can pay their clinic and hospital bills in one location. The billing office for CCMG and CCMH is moving to the Pioneer Manor building at 900 West 8th St.

“Combining the billing functions in one location will make it more convenient for patients,” said Shawn Reznicek, Patient Accounting Manager. “Currently, patients cannot pay a hospital and clinic bill at the same site. We are striving to streamline the process and provide the utmost in customer service.”

Patients will still be able to pay their hospital or clinic bill at the cashier’s office located at CCMH. However all the patient account counselors will be centralized in the new location at the Pioneer building.

“We know this will be a big change for people who have lived in Gillette for a long time,” said Shawn. “It may be confusing for a while, but we will be able to provide better service to our customers in the long run.”

A date for the move hasn’t been finalized yet, and there will be plenty of notification before the change occurs.



# Questions for the Experts

We asked members of our medical staff to answer some common questions they hear from their patients.



Whitney Shawver, APRN  
Geriatrics

[cchwo.org/senior](http://cchwo.org/senior)  
688-3636

## Q: How can I help my parents prevent falls in their home?

A: Preventing falls is a big concern for seniors, especially during the holiday season. Make sure walkways are clear of snow outside and packages and decorations inside. Make sure all electrical cords are undamaged, and never

stretch them across sidewalks or hallways. That way everyone can enjoy the beauty of the holiday season without worry.

### GENERAL HOME SAFETY TIPS

**Clean up clutter.** Remove all clutter, such as stacks of old newspapers and magazines, especially from hallways and staircases.

**Repair or remove tripping hazards.** Examine every room and hallway, looking for items such as loose carpet, slippery throw rugs, or wood floorboards that stick up and repair, remove or replace them.

**Install grab bars and handrails.** These safety devices are crucial for going up and down stairs, getting on and off the toilet, and stepping in and out of the bathtub. Have a handyman or family member help if necessary.

**Avoid wearing loose clothing.** You want to feel comfortable at home, but baggy clothes can sometimes make you more likely to fall. Opt for better-fitting and properly hemmed clothing that doesn't bunch up or drag on the ground.

**Light it right.** Fix inadequate lighting by installing brighter light bulbs where needed, particularly in stairways and narrow hallways.

**Wear shoes.** Socks may be comfortable, but they present a slipping risk. Purchase non-slip socks that have grips on the soles of the feet if shoes are too uncomfortable.

**Make it nonslip.** Bathtubs and showers, as well as floors in kitchens, bathrooms, and porches, can become extremely dangerous when wet.

**Move more carefully.** Many people fall at home by moving too quickly from a sitting to a standing position and vice versa. Preventing falls like this is as easy as taking your time.



Erica Rinker, MD  
Family Medicine  
[cchwo.org/family](http://cchwo.org/family)  
688-3636

## Q: How can I deal with my chronic constipation?

A: A common complaint that I get that is often overlooked is normal bowel health. Chronic constipation—meaning not having a soft, easy to pass bowel movement daily is something that affects people of all ages. From newborns to people in their 80s and 90s having a daily soft bowel

movement should be a normal part of everyone's life. Many times this is not taught and is something that is not part of normal conversation for most people.

If someone is having hard, pellet-like stools or blood in their stool—that is not normal. Although people do have different amounts and times that they go without having a bowel movement—that's okay—as long as the stool is soft, without blood and there is no straining to have to go.

Many times just having a short conversation on things to do to have a soft bowel movement can make a difference. It also means not having to take any medicines. The amount of water and liquids we have in our diet, in addition to fiber can play a major role in the difference between a hard stool and a soft stool. A quick rule of thumb is to take your weight in pounds and divide it in half. That is the number of ounces of water you should strive to drink in a day. Trying to use a dissolvable fiber in addition to high-fiber fruits and vegetables is a great long term solution.

Many people wonder why this matters? Chronic constipation can lead to many things, ranging from bed wetting and chronic bladder infections to leakage of stool. It can lead to pockets in the colon called diverticulosis, these can become infected and cause areas of infection and inflammation. In addition, many people become dependent upon laxatives or medications taken daily to have a bowel movement.

Although it is sometimes a topic of taboo—we need to pay attention to our poo!

**Dr. Rinker recently joined CCMG Family Medicine and is now accepting new patients of all ages.**

## Surveys Help Improve the Patient Experience *continued from page 3*

This summer the CCMG clinics started a new survey method using email or text. The survey is only nine questions and will come from [insights@healthstream.com](mailto:insights@healthstream.com) or text (48798).

Data collected from all these surveys must be reported to the Centers for Medicare and Medicaid Services (CMS) and is used to determine how CCH is reimbursed from Medicare. All hospitals who participate in Medicare are required to conduct surveys and ask exactly the same

questions as CCH, in order to compare “apples to apples” when it comes to patient experience.

And if that seems like a lot of different surveys, other CCH departments and services like EMS and Wellness conduct surveys about their own specific programs using the online program called Survey Monkey.

Your feedback is very important to us, but there are ways for patients to “opt out” of the survey process.

**Go to [cchwyo.org/prights](http://cchwyo.org/prights) to learn more.**

## Advance Practice Providers

Working alongside doctors and nurses to care for you

### WHAT IS A PA?

A Physician Assistant (PA) completes a master’s or doctoral degree and is nationally certified and licensed by the Board of Medicine to practice with the supervision of a licensed physician. PAs have been part of the healthcare team for nearly 50 years, and more than 100,000 physician assistants work in virtually every medical setting including hospitals, long term care and clinics.

### WHAT IS AN NP?

Nurse Practitioners (NP) complete a master’s or doctoral degree and have advanced clinical training beyond their initial registered nurse preparation. They emphasize the health and wellbeing of the whole person and guide patients in making healthier lifestyle choices. There are nearly 230,000 NPs practicing in the US today. NPs use the designations APRN, FNP, NNP or DNP in their credentials.



*PA Candace Winters sees patients at Orthopaedic Specialists.*

### PA's and NP's can:



**Order, perform and interpret diagnostic tests**



**Diagnose and treat acute and chronic conditions**



**Counsel and educate patients on disease prevention and positive health and lifestyle choices.**



**Prescribe medications and other treatments**



**Manage patients' overall care**

**Learn about our PAs and NPs at [cchwyo.org/APP](http://cchwyo.org/APP)**

# Cardiac Cath Lab Takes Care of More Than Hearts

The cardiac catheterization laboratory (Cath Lab) at CCMH is a special room with state-of-the-art X-ray equipment and computers that allow doctors and staff to do amazing things. While used primarily for heart procedures, the Cath Lab can be used for many other procedures that involve blood vessels, offering treatment for a number of problems involving veins and arteries.

A multidisciplinary team with Interventional Cardiologist Dr. Sairav Shah and General Surgeon Dr. Jake Rinker allow for expanded treatment options for complex disease processes. Dr. Shah and Dr. Rinker have been working together for over a year, and believe that their collaboration will provide the community and surrounding areas with treatments that were previously not available.

Dr. Shah has been performing these procedures since the Cath Lab opened in 2014. He is Board Certified in Cardiovascular Disease and Internal Medicine, and has completed Fellowship training in Cardiology and Interventional Cardiology. He practices at CCMG Cardiology with Dr. Nicholas J. Stamato.

## Peripheral Vascular Disease (PVD)

Peripheral Vascular Disease or “PVD” is very similar to CAD (Coronary Artery Disease) where the arteries

become narrowed and blood flow can become limited. In PVD this is often seen in the legs, causing cramping in the leg muscles with walking and may lead to ulcers or even the loss of part of the leg if blood flow is blocked. PVD is caused by smoking, diabetes, high cholesterol and high blood

pressure. To treat PVD doctors may do non-invasive tests first. If these tests suggest PVD, an angiogram may be performed either by CT scan or using special invasive catheters in the Cath Lab. If a blockage is confirmed, sometimes balloons or stents may be placed to open the artery.

Sometimes the arteries to the kidneys may become narrowed and cause high blood pressure that does not respond to medication. In that case a stent can open the kidney artery and often lower blood pressure.

Dr. Rinker also performs dialysis-related procedures and procedures for blood clots in the Cath Lab.



Disposable catheter inserted into vein



Vein heats and collapses



Catheter withdrawn, closing vein



Sairav B. Shah, MD  
Cardiologist

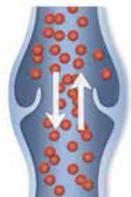


Jake Rinker, MD  
General Surgeon

Healthy Vein Valve    Diseased Vein Valve



Healthy valves keep blood moving in one direction



Diseased valves cause blood to move in both directions

Dr. Jake Rinker has a special interest in vascular (involving the blood vessels) surgery, having trained while in residency at Iowa Methodist Medical Center in Des Moines, IA. A native of Recluse, WY, Dr. Rinker returned to

Campbell County with his wife Erica, a family practice physician, in 2016. Dr. Rinker is in practice at High Plains Surgical Associates with colleague Dr. Sara Hartsaw.

“It’s much more attractive for these patients to do this in Gillette”, said Dr. Rinker. “They may not otherwise seek treatment if it means traveling out of town.”

## Fistulas for new dialysis patients

A fistula permits easier withdrawal of blood for hemodialysis. Dialysis patients often require regular procedures to keep their fistulas open and properly functioning. Patients had to leave Gillette for these procedures prior to Dr. Rinker’s arrival.

## DVT (deep vein thrombosis, or blood clots)

DVT is a serious condition that can cause chronic problems such as lack of mobility and damage to the valves in the veins if left untreated. Symptoms include pain and swelling in one leg, and many patients find out they have DVT from a visit to the Emergency Department. DVT has traditionally been treated with blood thinning medications but now a procedure can be done in the Cath Lab to remove the clot.

Learn more about Dr. Shah and Dr. Rinker at [cchwo.org/findadoc](http://cchwo.org/findadoc).

## UPCOMING EVENTS

### Holiday hours at the Walk-in Clinic

Christmas Day: 8 am-1 pm  
New Year's Day: 8 am-6 pm



### Excel

January 15 - March 14

Physical training to improve overall athletic performance for kids ages 10-17.

### ICAN Excel

January 23 - March 20

A fun training and nutrition program for kids ages 7-10.

To register for both these programs, call 688-8000.



### Becoming a Love and Logic Parent® Session begins January 10

A six-week program designed to give parents practical skills that can be used immediately.

Childcare is provided. Call 688-5026 or email [jessica.boyd@cchwyo.org](mailto:jessica.boyd@cchwyo.org) to register.

## Skip the Wait

Save your place in line at the Walk-in Clinic by using Skip the Wait. Click the button on our website and choose the time you'd like to come in. We'll send you a text message when it's time to show up.



[cchwyo.org](http://cchwyo.org)

*Campbell County Health complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.*

*ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.*

*ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung.*

**The full nondiscrimination statement can be found at [cchwyo.org/nds](http://cchwyo.org/nds)**

## Contact Us

Campbell County Health  
501 S. Burma Avenue  
Gillette, Wyoming 82716  
307-688-1000 or 800-247-5381

Mailing address:  
P.O. Box 3011  
Gillette, Wyoming 82717

[cchwyo.org](http://cchwyo.org)

