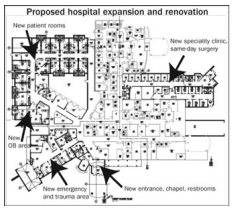

Community meetings planned to seek input

By Russ Pankonin
The Imperial Republican

Board of trustee members of the Chase County Community Hospital voted 4-1 to pursue a $13 million expansion and renovation plan during their meeting Thursday, Sept. 20.

The vote carried one important condition—arriving at a financing solution acceptable to the board.

Outgoing board chair Bill Bauerle said it will likely mean a combination of using hospital revenues combined with some sort of tax-based bond financing to finance the project.

Since the bond to build the current hospital was paid off, the hospital has received no direct tax support from the county for its operation. As a result, Chase County's hospital is amongst a small minority of hospitals in the state that does not receive tax support.

Five years of planning

Bauerle noted last week's vote was a culmination of more than five years of planning to insure the hospital remains a viable asset for the next 30 years.

"This was no knee-jerk, overnight decision by any means," Bauerle said this week.

He said they looked closely at areas of the hospital affected by obsolescence and/or regulatory requirements.

Nearly five years ago, the hospital got a five-year reprieve from having to install a sprinkler system in the facility. That deadline is quickly approaching so some type of action was needed to address the issue, he said.

Five years ago, the estimate to put in sprinklers exceeded $100,000, he said.

Bauerle said they began looking at renovating the patient bathrooms as part of a project to include sprinklers. Presently, none of the patient room bathrooms can accommodate a wheel chair.

Just the cost to renovate the bathrooms and install sprink-lers was estimated at $3.4 million, he said.

"We quickly learned that expansion would be much more cost effective than renovation," he said.

They looked at other communities that have built new hospitals but the price tag on those in Cambridge and Ord ran between $25-30 million. "We didn't feel that was what people wanted," he added.

Hospital Administrator Lola Jones noted many of the regulatory deficiencies are grand-fathered. However, once the hospital begins addressing one area, they must bring all areas into compliance.

She said their planning focused on statutory and regulatory issues, physical obsolescence and medical obsolescence.

Patient rooms no longer meet square footage requirements. The same is true for the trauma

area in the ER. Plus, the ER must have different bays for trauma patients.
As far as physical obsolescence, she said they have done a good job of maintaining the facility.

In recent years, improvements have included new boilers, a new chiller system, new climate control valves and two new generators. When power is lost, these generators allow the hospital to function normally without interruption.
In terms of medical obsolescence, Jones said the delivery of medical services has changed significantly since the present hospital was complete in 1977.
Instead of in-patient care, much of the care is delivered on an out-patient basis.
As a result, they looked on how better to fit that need, she added.

Plans include new patient rooms, day-surgery, ER, OB, PT

The expansion will include new patient rooms to the north of the existing hospital.
Plans also call for a new emergency room built in the southwest corner of the hospital. The CT scanner will also be relocated to that area for use in trauma situations.
Hospital rooms in the northwest corner of the hospital would be converted into a new combined labor and delivery room, allowing the mother to stay in the same room post-delivery.
The existing labor and delivery area would be converted into a second operating room.
Jones said with the increasing number of specialists coming to the hospital that do their own surgery, one operating room is not enough. This situation has already caused scheduling problems.
The operating rooms would connect to a new specialty clinic and day-surgery area.
Jones said this new area would better address the needs of both patients and medical staff.
She said physical therapy is one of the fastest growing areas at the hospital. To enhance this growth, the project calls for enlarging the physical therapy area and adding hydro-therapy.

Info meetings planned

Jones said the hospital board will hold information meetings throughout the county for input on the project and its financing.
Those dates have not yet been determined.
Both Jones and Bauerle emphasized the future of the hospital rests with the people of the county for their support of the proposed project.
By investing in the expansion and renovation, they said the hospital will remain a valuable asset for many more years to come.
She said the construction of the new clinic has been a success, with six providers working out of the facility.
She believes the project will have the same results in terms of enhanced medical services offered through the hospital.
Board members voting in favor of pursuing the project included Bauerle, Eddie Nichols, Vicki Heskett and Sam McNair while Bob Mendenhall, Sr. cast the dissenting vote.
This marks Bauerle's last official meeting. He will be stepping down from the board effective Sept. 31, 2012.
Merrilyn Leibbrandt has been appointed by the county commissioners to fill the vacancy.