

# A Spirit of Giving

## Care and compassion are 'a way of life' at Avera McKennan

BY DONNA FARRIS, AVERA MCKENNAN WRITER/EDITOR

A spirit of giving is intrinsic to the values of Avera McKennan, and yet "compassion" is more than just a word on the pages that outline the organization's mission and vision.

Compassion and generosity pervade Avera McKennan, from administrative decisions and financial policy, to the little unnoticed kindnesses that take place each day, such as the housekeeper who quietly slips out during her lunch hour to purchase socks for a patient who has none to wear home.

"Charity and compassion are just a way of life here," said Avera McKennan regional president Fred Slunecka. "It's not an expectation that's parachuted in from above, rather it's an expectation that people place on themselves."

### Avera charity is foundational

A charitable spirit is perhaps what people respect most about the Presentation and Benedictine sisters who sponsor the Avera Health ministry.

"When the sisters started this ministry, it was definitely not a business venture," said Sister Mary Thomas, senior vice president of Mission Services at Avera McKennan. "It was a call and a response to a need from the beginning."

The sisters have a legacy of giving: Meals to hungry transients during the Great Depression, housing and employing unwed mothers until federal regulations forbade it, sheltering displaced Europeans after World War II as well as Asian refugees, or tutoring polio patients so their school work could be kept up to date.

"A charitable spirit is a thread running through Avera McKennan's story," Sr. Thomas added.

Keeping that thread strong and visible within the organization's fabric is a matter of recognizing and retaining people who have a similar value system.

"It's a self-reinforcing situation. The organization stands for charity and compassion, and that attracts people who share the same value system," Slunecka said.

In dollars and cents, Avera McKennan giving amounts to over \$31 million, according

to a community benefits report based on guidelines from the Catholic Health Association.

A major segment of that total is charity – care provided free or at a reduced cost for those who cannot afford to pay.

"Our society often views charity as a handout," Sr. Thomas said. But the sisters prefer to view it as more of a partnership, and a redistribution of resources.

"Preserving the dignity of persons is paramount in how we interact," she said.

Avera Health, system wide, in 2006 provided \$12.3 million in such charity care. Avera McKennan's portion was \$7.8 million. That compares to \$3.78 million in charity care reported by Sanford Health in 2006.

Paul Stubbe, Avera McKennan director of patient account services, said that figure represents actual costs, not charges.

Also in 2006, \$12 million was absorbed by Avera McKennan for shortfalls in government care for needy people through Medicaid and county health programs, said Julie Norton, vice president for finance and corporate controller at Avera McKennan. The figure represents the difference between actual cost of care and reimbursement.

### An open door policy

While financial staff closely monitor and analyze the figures, there's no cap or limit placed on the charity line item.

"We've never limited charity to people who live within our service area," Slunecka said. "We are 100 percent committed to our open door policy. We turn no one away in the 80-plus counties that we serve."

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### Avera McKennan Community Benefits

**Charity** .....\$7.8 million

*Care given to patients who cannot pay for some or all of their medical expenses*

**Payment shortfalls** .....\$12 million

*The difference between actual cost and reimbursement from Medicaid, county care and other government programs for needy people. Medicare is not included in this figure based on reporting guidelines, but that difference amounts to another \$17.7 million.*

**Community Health Services** .....\$3.7 million

*Community education, community-based clinical services and health care support services*

**Education** .....\$2.2 million

*Scholarships and education for medical students, nurses and other health professionals*

**Subsidized health services** .....\$3.18 million

*Providing services that operate at a loss, that government or other non-profit agencies would have to provide if not offered, such as the community blood bank.*

**Research** .....\$1.1 million

*Health research that has the long-term welfare of the community at heart*

**Financial contributions** .....\$635,000

*Cash and in-kind donations*

**Community building activities** .....\$278,000

*Includes workforce enhancement, providing a place at the downtown clinic for foreign medical professionals to serve before they obtain permanent status in the United States*

**Total**.....\$31,029,134.00

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Norton says the charity total is on the rise from year to year. "More and more people believe they can't afford health insurance," she said. Rising costs also play a role. "For every new procedure that comes out, there are related costs."

Balancing generosity with fiscal discipline is one of the finest attributes of both sponsoring religious orders, Slunicka said.

"It's easy to give it all away, but it's not possible to be an ongoing organization without that discipline. We give to the extent we can, yet we also remember that we need to reinvest in ourselves so we can give again and again," Slunicka said.

## Reaching out beyond our region

Fiscal responsibility and projects like LEAN keep costs down, allowing Avera McKennan to take on additional charity cases, for example, children from Mexico and Haiti with serious health conditions such as cancer or heart defects.

In these cases, physicians – as well as the hospital – donate their services. If billed, charges for individual cases could mount up to \$250,000 or \$500,000, if not over \$1 million, Stubbe said.

Slunicka said special cases are selected based on Avera McKennan's ability to care for the child in question.

"We've been blessed, in that the charity we've done has come at a time commensurate with our ability to provide."

## Charity care close to home

Closer to home, 400 to 500 patients each month access free care through the Avera McKennan Health Care Clinic on East 10th Street. Open since 1992, this clinic serves people who are uninsured, either through private or government insurance programs. The clinic sees patients for illnesses such as upper respiratory infections, chronic diseases such as diabetes, preventative care and physical exams.

"Our mission is to care for the poor and underserved," said Joanne Hindbjorgen, RN, clinic supervisor.

The clinic dedicates one staff member just to the task of lining patients up with free medications through programs sponsored by pharmaceutical companies. "We have so many patients in need. It's a big part of the clinic because meds are very expensive," Hindbjorgen said.

Also through the Health Care Clinic, monthly evening clinics are staffed by medical students, under the oversight of Avera McKennan physicians.

## Every day, charity 'just happens'

Even patients with insurance can become overwhelmed by expensive out-of-pocket costs, travel expenses or specialized medical equipment.

Through Avera McKennan Foundation resources, patients can receive help with expenses not covered by insurance, such as walkers or wheelchairs, travel costs or even clothing to wear home from the hospital, said Stacy Reitmeier, manager of Avera McKennan Social Services.

"For some people, large out-of-pocket costs and co-pays aren't feasible. We can help in those circumstances, too," she said.

Slunicka said the big cases are often celebrated, but the little things that go on from day to day are even more remarkable.

For example, staff in Pediatrics arranged for an evening out at a local restaurant for parents who had spent 24 hours a day for days on end at their daughter's bedside, as she battled a life-threatening condition.

In another situation, Pediatrics nurses cared for a little boy whose mother was in the process of leaving an abusive spouse. Staff arranged for Foundation monies to treat the mom to a make-over, giving her a needed lift and a new start. Her young son was thrilled to receive new dinosaur pajamas to wear during his hospital stay.

"Those little acts of charity are more important and impressive than the big ones," Slunicka said. "No one talks about it, it just happens. It's a cultural thing."



## Nurturing families in a safe environment



One of many community benefits supported through Avera McKennan is the Family Visitation Center, a collaboration between Avera McKennan, the Children's Inn and Turning Point.

The center provides a safe and supportive environment for children to visit with non-custodial adults, when there has been a history of domestic abuse or child abuse, conflict or other difficulties. Supervised visits are provided on a sliding fee scale, and no one is denied services based on inability to pay.

*Recently, a father had his first visit with his nine-month old daughter in over a month.*

*The little girl was napping as she was handed over to her father. For the next hour, the two of them slept and cuddled on the couch in the center. The affection shown by the young dad was very moving. When the little girl woke up she was so happy to see her daddy and they continued playing until the visit ended. Following the visit, the father broke down and sobbed, talking about the consequences of the choices he had made.*

As the largest visitation center in the region, FVC has impacted more than 1,000 children in the past six years. Children at FVC have often lived in homes where drugs or alcohol are abused, where one spouse abuses the other, where parents constantly fight and put the child in the middle, or where children themselves are physically abused or neglected. When Social Services or the court system rescues a child from such situations, children still love their parents. At the Family Visitation Center, these important family ties can be maintained and strengthened, giving the child new, positive memories of time with "mommy" or "daddy."

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## A healthy life begins months before birth

There's no time more special in the life of a family than the birth of a new baby, yet many families struggle with the costs of prenatal care, labor and delivery - especially if they are uninsured.

An answer to that dilemma has quietly been in operation since the 1970s, through a collaborative effort between both local hospitals in Sioux Falls and the Center for Family Medicine, affiliated with the University of South Dakota.

The OB Clinic serves low-income women who don't qualify for Medicaid, but can't afford health insurance. Being in this situation often keeps women from seeking prenatal care, said Becky Severson, program manager for Women and Children's Community and Outreach Education through Avera McKennan.

For a fee of \$950, women are offered prenatal care and labor and delivery services, although most are unable to pay the \$950. Whether they can pay the fee or not, costs for services far exceed any income received.

Care is provided by primarily by first-year family practice residents at the CFM through both Avera McKennan and Sanford.

Because of its commitment to serve everyone in need, Avera McKennan takes on a higher load of these cases.

While Sanford limits their residents to eight patients each, Avera McKennan has an "overflow" plan that assigns OB patients to second and third-year residents after the first year residents all have at least 12 patients each.

"We do that because we feel we can't turn people away. "Our mission is to provide care for all in need, regardless of ability to pay. It's so rewarding to help provide for the health and safety of our future generation," Severson said.

Women deliver at the hospital where the resident who is providing their care is assigned. Women who can't pay will deliver their babies somewhere, and without good prenatal care, the risk is higher for pre-term delivery or complications. "In the long-term, it is better for the community," Severson said.

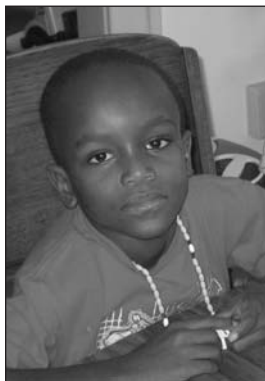
Avera McKennan also sponsors a "Tender Transitions" clinic, a free follow-up program for new moms and babies delivered at Avera McKennan.

Moms can return with their babies, free of charge, for a check-up and educational session with Avera McKennan nurses. "The majority of the time is spent on teaching and support," Severson said. Similarly, Avera provides free lactation services as a community service. Also, parents are invited to the hospital and learn how to correctly use a car seat.

"It's estimated that only one in 10 car seats is installed correctly," Severson said. If a family is eligible, they can receive a free car seat.

"These are small, specialized programs that deliver a big benefit to the community," Severson said.

## Avera's mission of healing crosses U.S. borders



A 7-year-old boy who likely faced a future of being cast aside as handicapped in his home country of Haiti now has a new range of possibilities open to him. Children from Mexico have new hope, thanks to life-saving treatments at Avera McKennan.

Avera McKennan has an open-door policy - turning no one in need of care away within its 80-county region, regardless of ability to pay. But Avera's commitment to financial stewardship, along with cost-savings through projects like LEAN, allow the organization to reach out even further with its ministry of healing, caring for young patients who might die or continue to suffer without medical specialized care.

Treating 7-year-old Jamison from Haiti was a collaborative effort between Avera McKennan, the Orthopedic Institute, McGreevy Clinics Avera, the Haitian Health Foundation in Norwich, Conn., and other agencies.

Bob Voglewede, Avera Health vice president of Mission Services, learned of the case through the Haitian Health Foundation after Boston-area hospitals had turned down requests for help.

Jamison's broken leg, suffered in an accident perhaps 18 months earlier, had never been set or treated. The boy lived with his grandfather in a primitive hut in the mountainous region outside of Jeremie, Haiti.

Avera has an ongoing relationship with the Haitian Health Foundation in Jeremie on the western edge of Haiti. Sophisticated medical care is not available to most residents of Haiti, the poorest country in the Western Hemisphere. Avera raises funds for the foundation and Avera staff make working visits to the area.

Jamison - his left leg frozen backward in a 90-degree angle with bone jutting through infected skin - was placed under the care of Dr. Walter O. Carlson, a surgeon with Orthopedic Institute, specializing in pediatric orthopedics.

With no hope of restoring the limb, the only option was amputation below the knee. Orthotic and Prosthetic Specialties Inc. of Sioux Falls fitted Jamison with a prosthesis.

In Haiti, people with disabilities do not have the same opportunities as in the United States, Dr. Carlson said. Jamison probably would never have been able to pursue an education or earn a decent living.

"Giving him the ability to walk with a limb allows him to get educated, to move on with life and have some opportunities."

Like Jamison, some 15 children from Los Cabos, Mexico, have benefited from Avera McKennan's generosity.

Since 2002, Avera McKennan has been a partner with the Los Cabos Children's Foundation. The project began when local businessman Thomas Walsh learned of some children with leukemia in Los Cabos, and asked Avera McKennan to provide treatment, said Dr. David Erickson, senior vice president of medical affairs for Avera Health.

Sister Mary Thomas, Avera McKennan senior vice president of Mission Services, said ties with Mexico date back even further, to 1965, when the Presentation Sisters sent nuns to Mexico, including Sr. Elizabeth Remily, known as "Sister Liz." From 1965 to 1976, she worked in San Carlos, Mexico, setting up a hospital and empowering indigenous people.

Among recent patients through the Los Cabos project are Andres and Armando, who received bone-marrow transplants, and heart patients Ana Maria and Miguel.

In 2006, a truckload of medical equipment and supplies given by Avera McKennan arrived in Los Cabos, after a long 13 months of working through red tape and restrictions. Equipment has been given to local hospitals, the Red Cross and rescue squads.

Avera McKennan also raised money for the latest project - telemedicine consults between Avera and physicians in Los Cabos, Erickson said.

Sr. Thomas said Avera McKennan takes on cases of this nature based on its ability to help. The need seems infinite, and yet resources only go so far.

"We are not unlimited, and yet there is much we can do," she said. Dr. Carlson, who has also treated kids from Vietnam, Colombia and Africa, agreed. "The frustration is that there are a lot of kids who need help. All you can do is one at a time."