Great health starts here.
2012 MEMORIAL HEALTH SYSTEM ANNUAL REPORT
One of the leading healthcare organizations in Illinois, Memorial Health System is a not-for-profit corporation based in Springfield dedicated to patient care, education and research. Our health system’s six affiliates provide a full range of inpatient, outpatient, home health, hospice, behavioral health and primary care physician services. With three hospitals and other clinics in Sangamon and its neighboring counties, we deliver high-quality, patient-centered care in support of our mission to improve the health of the people and communities we serve.

**Memorial Medical Center**
Memorial Medical Center is an acute care hospital in Springfield that offers comprehensive inpatient and outpatient services. Since 1970, Memorial has been a teaching hospital affiliated with Southern Illinois University School of Medicine for the purpose of providing clinical training for residents.  
[MemorialMedical.com](http://MemorialMedical.com)

**Memorial Home Services**
Memorial Home Services provides home health, hospice and medical equipment services across an 18-county region in central Illinois.  
[MemorialHomeServices.com](http://MemorialHomeServices.com)

**Mental Health Centers of Central Illinois**
MHCCI offers a full range of behavioral healthcare and rehabilitation services in Sangamon, Menard, Logan, Mason, Scott and Morgan counties.  
[MHCCI.org](http://MHCCI.org)

**Abraham Lincoln Memorial Hospital**
ALMH is a critical access hospital serving the people and communities of Logan and eastern Mason counties. ALMH also offers a full range of outpatient rehabilitation, therapy and diagnostic testing.  
[ALMH.org](http://ALMH.org)

**Taylorville Memorial Hospital**
Taylorville Memorial Hospital is a critical access hospital offering a full range of inpatient and outpatient services to a service area of 34,000 in Christian County.  
[TaylorvilleMemorial.org](http://TaylorvilleMemorial.org)

**Memorial Physician Services**
Memorial Physician Services is a primary-care network serving more than 280,000 patients each year in 15 central Illinois locations in Chatham, Jacksonville, Lincoln, Petersburg and Springfield.  
[MemorialMD.com](http://MemorialMD.com)
Dear friends,

We are pleased to report that 2012 was a great year for Memorial Health System as we cared for a growing number of patients while successfully moving forward with our strategy to achieve the goals of national healthcare reform.

Our accomplishments in 2012 are significant:

- We improved access to care through the growth of our primary care physician network and the start of construction of medical office buildings in Springfield on the Memorial Medical Center campus and in Jacksonville at Passavant Area Hospital, both in partnership with Springfield Clinic (see pages 9 and 16).
- Our ongoing work to improve the patient experience has resulted in improved patient satisfaction scores in our inpatient and outpatient areas.
- Measures of clinical performance, which gauge the quality of care our patients receive, continued to improve, reflecting the exceptional level of engagement among clinical staff, nurses, physicians and administrative leaders.
- With health plan providers, we are developing health insurance programs to help patients with chronic illness achieve better symptom control, improve quality of life and reduce both complications and avoidable use of condition-related healthcare services.
- Our 2012 financial results are very strong. These results (see page 34) were achieved, in part, through “Strengthen Our Future,” a strategy that generated important cost savings and process improvements.

All of these performance factors are vital to plans, announced in September, for a historic expansion of the Memorial Medical Center campus. In “Advancing Care by Design,” our focus will remain on patient safety, privacy, comfort, quality of care and the comfort and convenience of family members and visitors. In reading about this project (pages 4–5), you will learn that it will include a three-floor addition to the hospital that will provide 114 private rooms for intermediate care, orthopedic and cardiology patients; new operating rooms and additional space for surgical services; the Memorial Center for Learning and Innovation; and a new lobby and main entrance.

In another strategically important development, we are confident of the benefits to be gained through Memorial Health System’s partnership with BJC HealthCare of St. Louis, CoxHealth of Springfield, Mo., and Saint Luke’s Health System of Kansas City, Mo., to create The BJC Collaborative, LLC. Our organizations share common values and a commitment to be national leaders for excellence in patient care. As you will learn on pages 12–13, we will work together to treat more patients, lower our costs and deliver higher quality care.

In addition to learning about these and other developments in this year’s report, you will also read patient stories of physical and emotional healing. All that we present in these pages gives meaning to our theme that “Great Health Starts Here” at Memorial. It also reflects the commitment we bring to our mission to improve the health of the people and communities we serve.

We are grateful for the trust you place in us and extend our best wishes for your good health in 2013 and the years ahead.

Sincerely,

Edgar J. Curtis
President and
Chief Executive Officer

James P. Bruner
Chairman,
Board of Directors
The number of new private patient rooms that will be added to Memorial Medical Center during its expansion.

In a historic decision, the Memorial Health System and Memorial Medical Center boards of directors in September approved a hospital expansion project that will position Memorial Medical Center to provide for the community’s healthcare needs and meet the expectations of our patients for decades to come.

In “Advancing Care by Design,” the project will focus on patient safety and quality of care, all private medical/surgical patient rooms, improved comfort and convenience for families and visitors, and more operating rooms and post-procedure facilities. Other goals are improved patient access; enhanced employee development, workforce and community education capabilities; stronger relationship with Southern Illinois University School of Medicine; and modernization of energy delivery systems. The project includes:

- Construction of a three-floor patient care tower that will include 114 private patient rooms;
- Six new operating rooms and renovation of perioperative/surgery services;
- Construction of the Memorial Center for Learning and Innovation;
- Renovation of the main entrance and lobby; and
- Upgrading of the hospital’s energy plant (such as boilers, chillers and medical gas systems).

The cornerstone of Advancing Care by Design is the three-floor, 112,000-square-foot hospital addition to serve intermediate care, orthopedic and cardiology patients. Each floor will feature 38 private patient rooms (all with specific patient safety design features), improve access to patient medications and supplies and include dedicated space for families and visitors. The support space on each new unit will include large supply and equipment storage rooms along with accommodations for interdisciplinary collaboration and teaching. New operating rooms and additional space for pre- and post-procedure services will provide for improved patient care from the point of
advancing care by design

The Memorial Medical Center Expansion Project

registration for a surgical procedure to discharge from the hospital or transfer to an inpatient room. The expansion of surgical services will be constructed on two levels: the lower level in the area currently occupied by the Wedeberg Conference Center and a new pre-operative area just off the main lobby on the first floor. This new surgical space will be significantly more accessible for patients and create a better working environment for employees and physicians. The final stage of this component of the expansion project will be renovation of the lobby, main entrance and circle drive to improve “front door” access. This will accommodate increased vehicle traffic, improve pedestrian safety and create a more pleasant look and feel in this area.

Our responsibility to support workforce training, research, education and community service programs that enrich the quality of life in our community will be supported by the new Memorial Center for Learning and Innovation. Memorial Health System employees, physicians, SIU School of Medicine residents, students and the public all will benefit through the enhanced learning opportunities that will be made possible through the features of the Center for Learning and Innovation. A reflection of Memorial’s “constant state of learning,” the facility will be specifically designed to promote learning and innovation and personal and professional development. It will include a large conference center that will replace the Wedeberg Conference Center and also feature state-of-the-art facilities for leadership and employee development, surgical skills training and patient care education in simulated clinical settings.

Work on the project is to begin in spring 2013 with the construction of the Memorial Center for Learning and Innovation, which will open in summer 2014, and the two-phase operating room expansion and lobby renovation. In the summer of 2013, work on the three-story hospital addition will start. All phases of the expansion are expected to be complete in early 2016. As a strategic, patient-focused initiative, Advancing Care by Design will position Memorial Health System to fulfill its mission to improve the health of the people and communities we serve for decades to come.
Noninvasive outpatient radiation procedure helps treat brain tumors.

Karla Dirks was looking forward to a great road trip to St. Louis with her sister, but it ended with an injury followed by more bad news. Fortunately, the care she needed was close to home at Memorial Medical Center’s Regional Cancer Center.

The two sisters were watching the St. Louis Cardinals in the playoffs in October 2011. Karla left her seat during the seventh-inning stretch at Busch Stadium and returned to find it occupied. As she waited for the man to get out of her seat, the trespassing fan lunged backward for a free shirt that had been hurled into their section. He bumped Karla, who fell and hit the back of her head on a concrete step. A follow-up CT scan revealed a brain tumor – news that left her scared and surprised. The tumor was a meningioma, which grows from the membranes that surround the brain and spinal cord. Somewhat easing her concerns, she learned that these tumors were slow growing and often not malignant. Symptoms of meningiomas typically begin gradually and include vision changes, headaches that worsen with time, hearing loss, memory loss, seizures and weakness in the arms and legs. But Karla had no symptoms to hint that anything was wrong.

Her doctor referred her to Brian Russell, MD, a Springfield Clinic neurosurgeon, who explained that she had three options: brain surgery followed by two to three months off work to recuperate; do nothing and keep an eye on the tumor; or an outpatient procedure called stereotactic radiosurgery that would not require an incision. The procedure is a form of radiation therapy that can control and decrease the size of tumors without putting patients through the risks involved with a standard operation. That option sounded excellent to Karla, who has three adult children and five grandchildren.

Her next step was to meet with James Wynstra, MD, a radiation oncologist with University Radiologists in Springfield, to discuss what would be involved with the procedure. “Dr. Wynstra spent an hour with me,” she said, “and explained it in a way I could understand.” Memorial’s Regional Cancer Center is one of only a few healthcare facilities in the nation to have two top-of-the-line Varian TrueBeam linear accelerators, which shape the beams used for radiation therapy to treat cancer or to prevent tumor growth. When Dr. Wynstra asked Karla if she wanted to think about whether or not she wanted to move forward with the procedure, she told him, “Let’s schedule it.” The procedure was planned for January 2012.

Karla entered the procedure with little anxiety and feeling relaxed. Making it easier, “everyone around me explained exactly what they were doing,” she said. Dr. Russell attached the halo – a large metal ring – to her skull, which would ensure her head would not move when the linear accelerator delivered its precisely targeted radiation treatment. Dr. Wynstra developed the treatment plan, making sure the surrounding normal tissue didn’t receive a dose of radiation that’s too high. The entire procedure was less than 30 minutes, and then Karla went back to her home in Athens. “I was just amazed at what they can do,” Karla said. “I didn’t know this even existed.”
The number of people who attended and participated in the third annual Be Aware Women’s Fair in October 2012. Thanks to the hard work of the event’s organizers and a great group of volunteers, the event, held in the Orr Building at the Illinois State Fairgrounds was a large success. “The building was full, and we received a lot of positive feedback on the booths and education that was available and how wonderful of an event it was,” said Tiffany Lowers, manager of Memorial’s Outpatient Imaging Center at Baylis and chairwoman for the event’s organizing committee. Visitors could tour the dozens of exhibitors and vendors, enjoy mocktails and samples of various treats, watch live entertainment such as fitness demonstrations, and participate in several free health screenings. More than 30 nominations were received for the Super Survivor makeover. People were asked to nominate a breast cancer survivor whose cancer journey was an inspiration to others. Three women – Jennifer Finley, Becky Daugherty and Angie Daniels – were chosen in a random drawing and honored as Super Survivors. They showed off the final results of a makeover and day of pampering as family and friends cheered them on. Proceeds from Memorial’s Be Aware Women’s Fair go toward a mammography patient assistance fund, which supports women who may need additional tests after receiving a positive result from a mammogram but cannot afford the associated expenses.
Students from Memorial ChildCare performing at the MASH Kickoff in May / The 2012 Be Aware Women’s Fair Super Survivors, Angie Daniels, Becky Daugherty and Jennifer Finley, after their makeover reveals / During the month of October 2012, construction began on the Springfield Clinic 1st North building using pink steel beams in support of Breast Cancer Awareness month

The square footage of the new Springfield Clinic 1st North medical office building. In June, Springfield Clinic and Memorial Health System broke ground for the four-story building, which is being developed on more than four acres of Memorial Medical Center’s campus, just north of the existing Springfield Clinic 1st building. The two buildings will be joined by an overhead walkway. Springfield Clinic will lease the new building, Springfield Clinic 1st North, from the health system. The project is expected to be completed in fall 2014. Springfield Clinic officials estimate that the new building will house an additional 65 physicians, surgeons and mid-level providers in addition to support staff. The first two floors will house a women’s health center, consolidating Springfield Clinic’s two OB/GYN practices and creating opportunities for women’s health specialists to provide care in the same location. The third floor will hold Springfield Clinic’s general surgery and colon and rectal surgery departments. The fourth floor will accommodate Springfield Clinic’s cancer care center. The new building will include a 600-vehicle parking garage on the north side. Patients will have walk-in access to physicians’ offices on each level of the garage.
Pediatric feeding specialists help children triumph over eating struggles.

During a visit to a local buffet restaurant in spring 2012, Nellena Pier of Nokomis watched as her 7-year-old son, Chase, indulged in pizza, vegetables, ice cream, cotton candy — anything he wanted. His face was covered in food. It was a welcome sight to both Nellena and Chase’s feeding therapist from Memorial Medical Center, Cheri Fraker. “It was awesome,” Nellena recounted.

Leading up to that feast had been months of fear, feelings of hopelessness and stress as Chase struggled to overcome symptoms of globus hystericus, a sensation of a lump in the throat that causes difficulty swallowing when there is no physical cause. With a globus hystericus diagnosis, usually there are other issues going on to cause the sensation, most commonly gastroesophageal reflux disease (GERD).

Chase’s diagnosis stemmed from an incident in July 2011 when part of a toasted cheese sandwich became stuck in his throat. While en route to the Emergency Department at a hospital near their hometown, Chase vomited up the stuck food, and after an evaluation by the ED medical staff, his family assumed the problem was over. “The following week, he started telling me there was a ball in his throat and he couldn’t breathe,” Nellena said. “I took him to his doctor, he ordered a barium swallow, saw nothing and said it should go away.”

A week went on with Chase consuming only yogurt, ice cream and supplement drinks because of the lump he felt. He lost nearly eight pounds before Nellena asked to see a specialist. A gastroenterologist in Springfield ordered a scope, which uncovered inflammation in his stomach and esophagus, suggesting GERD. They also were referred to Memorial’s Center for Selective Eating and Pediatric Feeding Disorders to consult with Fraker, a nationally renowned pediatric speech pathologist with Memorial’s Kids @ Koke Mill outpatient rehab department who specializes in feeding disorders.

The Center for Selective Eating and Pediatric Feeding Disorders sees about 325 patients a year. Each patient benefits from a multidisciplinary team that includes a speech pathologist/feeding specialist, registered dietitian, occupational therapist and psychologist. With Fraker and her colleagues’ help, Chase learned to stay relaxed while eating and began to reintroduce foods into his diet to regain his eating skills. “Our first step was crumbs,” Nellena said. “We’d make crackers and cookies into crumbs, wet his spoon with yogurt, sprinkle on some crumbs and he’d take a bite. It was kind of like he was a baby again. Cheri gave him a special spoon with textures on it and had him chew on the ridges of the flexible, chewy spoon to get used to chewing on textures again.”

The next visit, Chase tried something solid by nibbling around the edge of a cracker like a mouse. Gradually he kept adding more and more into his diet. Chase’s total therapy included relaxation techniques and medication for his reflux and anxiety, as well as an allergy pill. Because Chase is a red head, he is more susceptible to throat irritation, which could add to the lump sensation he was feeling.

In March, Chase had a setback because of an anxiety attack from another near-choking incident. He quickly got in to see Fraker, who again helped him regain control over his fears and resume a healthy diet.

A straight-A student who is active in a lot of athletic activities, Chase is again thriving. His mother said she is thankful that a resource such as the Center for Selective Eating and Pediatric Feeding Disorders is available so close to home. “I never even knew a therapist like Cheri was out there until this happened to us,” Nellena said. “It’s just wonderful, and Cheri is just awesome. She makes sure to let Chase know she’s there for him.”
The number of seconds someone in the United States suffers from a stroke – the fourth leading cause of death in the nation. To offer our stroke patients access to the best medical care, Memorial Medical Center began offering neurointerventional radiology services in 2012. Some strokes can be treated with clot-busting drugs, but they must be administered within a few hours of the onset of symptoms to be effective. Many stroke patients don’t reach a hospital in time to be considered for this treatment. Neurointerventional radiology uses minimally invasive technologies – such as the threading of tiny catheters and wires through a patient’s blood vessels to eliminate clots and restore blood flow to the brain – to diagnose and treat strokes. Augusto Elias, DDS, MD, a neurointerventional radiologist with Clinical Radiologists, S.C., leads the neurointerventional team in Memorial’s Stroke Center.

The number of non-profit health systems in The BJC Collaborative. With an eye on reducing costs while achieving higher quality of care for patients, Memorial Health System has partnered with BJC HealthCare of St. Louis, CoxHealth of Springfield, Mo., and Saint Luke’s Health System of Kansas City, Mo., to create The BJC Collaborative, LLC.

The four systems that are part of this new collaborative are leaders in their regions and have entered into this new relationship with a commitment to doing what is best for their patients. The Collaborative is buoyed by the tenets of the Patient Protection and Affordable Care Act that encourage partnerships and innovation to improve patient outcomes and reduce healthcare costs. The four partners in the collaborative are well positioned to work together to achieve economies of scale, learn from each other and share best practices that will ultimately lead to better patient outcomes, improve healthcare access and lower costs.

BJC HealthCare, a 13-hospital system with urban, suburban and rural hospitals serving eastern Missouri and southern Illinois, is among the largest non-profit healthcare organizations in the country. CoxHealth, established in 1906, serves more than 900,000 people in a 25-county service area in southwest Missouri and northwest Arkansas and offers a comprehensive array of primary and specialty care including three hospitals and more than 65 clinics in 20 communities. Saint Luke’s Health System, serving the Kansas City metropolitan area, consists of 11 area hospitals and several primary and specialty care practices, and provides a range of inpatient, outpatient and home care services. Its national honors include recognition as a Malcolm Baldrige National Quality Award recipient.

The organizations in The BJC Collaborative share common values and a commitment to being national leaders for excellence in patient care. Through this collaborative, we will work together to treat more patients, lower our costs and deliver higher quality care. Opportunities that may be explored by the collaborative include developing and sharing best practices around:
The additional number of MRI tests performed at Taylorville Memorial Hospital in the first 12 months following the installation of a new, in-house 3.0 Tesla MRI in 2011. The addition of this new high-field strength magnet has significantly enhanced access for the patients TMH serves and improved quality of care by allowing for new procedures to be performed, shorter exam times and higher resolution images. The updated system also offers a wider bore, which accommodates larger patients, provides a wider field of view and reduces the chance of a patient experiencing claustrophobia. Prior to the installation of the 3.0 MRI in the new Outpatient Services Center at TMH, patients had limited access to a 1.5 Tesla machine housed in a mobile unit that was available for only 16 hours per week.

- **Population Health Management** – population health information and assessment, physician recruitment and engagement strategies, and accountable care organization and medical home development
- **Clinical and Service Quality** – performance improvement, staff development and training — including e-learning, management and leadership development, clinical skills training, clinical decision support, safety event reporting and emergency preparedness
- **Capital Asset Management** – supply chain relationships, facilities design, clinical engineering, technology evaluation, energy conservation and facilities management
- **Financial Services** – capital resource analysis, treasury operations, revenue cycle, business intelligence and actuarial expertise
- **Information Systems and Technology** – meaningful use of health information technology, data center management, data warehousing, software applications, hardware configurations and emerging technologies and data security and patient confidentiality

In a national healthcare publication, one industry analyst referred to The BJC Collaborative as “brilliant” in that it allows the partners to gain the benefits of working together as a system to share and implement ideas without giving up the local control or governance. Working together on these and other initiatives that are imperative to achieving better patient outcomes and lower costs, The BJC Collaborative will bring sustainable advantages to the patients and families we serve.
MHCCI program helps individuals find the right path.

Tina Grisby’s life has been on a rollercoaster since she was a young girl. There were downs like her mother’s death, legal problems, being unemployed and living with others because she did not have a place of her own. Then she had ups like the years spent living with her grandmother, raising two daughters and spending time with grandchildren. Through it all, Tina struggled with depression.

During the summer of 2010, Tina noticed her symptoms were getting worse — she cried excessively and constantly felt fatigued and isolated. Her anxiety level increased as well as her appetite. “It was a mess,” she said. “I couldn’t find a job. Doors were slamming in my face. I was living with other people, and I just didn’t have my own space.”

In October 2010, a family friend told Tina it was time to get help and dropped her off in front of Mental Health Centers of Central Illinois (MHCCI) in Springfield. Because Tina does not like to ask for help, she stood outside for 45 minutes before entering the building. “She made me walk in the door or else I would have never done it,” she said.

Tina does not regret her decision to seek help. At 49 years old, she was diagnosed with major depression, a serious medical illness affecting 15 million adults each year, according to the National Alliance on Mental Illness. Tina started to see a counselor and was connected with other service providers at MHCCI to help her stabilize her symptoms and work toward regaining her independence.

During her first mental health assessment, Tina told her counselor that she wanted to “get out on my own.” But to afford her rent, Tina had to find steady employment. An employment specialist with MHCCI’s Individual Placement and Support program assisted Tina in filling out more than 50 job applications.

Tina eventually became a home healthcare provider for a woman in Springfield. The next step was to meet her goal of living independently. She was connected to MHCCI’s Projects for Assistance in Transition from Homelessness (PATH) program, which provides specialized services to individuals who are homeless or at-risk of becoming homeless and have a mental illness.

Tiffany Lowe, a recovery specialist with PATH, assisted Tina in her search for an apartment as well as other resources, including vouchers for food and transportation, medical services and the necessities needed for a new home. “Tiffany was someone to talk to and just kept hope alive,” Tina said. “She’s been there for the long haul.”

Unfortunately, Tina’s position as a home healthcare provider only lasted 10 months, and she was unemployed again. While she was able to use money for rent and bills from her income tax refund, she knew those funds wouldn’t last long. Tina started the job search again and kept her spirits up by a desire to survive on her own, prayer and reflecting on how much her life had changed for the positive in the previous year. She also knew the staff at MHCCI could provide the emotional support she needed during that difficult time. “One step at a time, one day at a time,” Tina said. “They helped me stand up and be stronger.”

In May, Tina started providing day care for her daughter’s children. Today, Tina has her own apartment on Springfield’s north end, and is a license-exempt family child-care provider. She also has seen her depression symptoms improve.

There were many bumps in the road for Tina, but with the help of MHCCI’s staff, she persevered and continued to have hope for a better future. “That’s what these guys do — they reach their hand out every time.”
The square footage of the new medical office building under construction on the Passavant Area Hospital campus in Jacksonville. The structure will house physician offices for both Memorial Physician Services and Springfield Clinic. More than 50 physicians, surgeons and mid-level providers representing family medicine, internal medicine, general surgery, orthopedic surgery, pediatrics, urology, cardiology and allergy/asthma/pulmonology will be in the facility. The two-story building, immediately northeast of the Passavant campus, also will include work areas for imaging and laboratory services and will be connected to Passavant by an indoor walkway. The project is expected to be complete by spring 2013.

The year David S. Sumner, MD, began his career at Southern Illinois University School of Medicine as professor of surgery and chief of peripheral vascular surgery. He was promoted to distinguished professor of surgery in 1984 and served for 23 years until his retirement in 1998. In his honor, Memorial Medical Center renamed its vascular laboratory the David S. Sumner Vascular Laboratory at Memorial. Under Dr. Sumner’s leadership and vision, the SIU School of Medicine’s vascular surgery training program earned accreditation in 1986. The program has provided vascular surgery fellowship training to more than 40 vascular surgeons, who have gone on to provide training and care to others throughout North America. Dr. Sumner’s contributions to advances in the diagnosis and treatment of vascular diseases have been internationally recognized through work he pioneered during his nearly quarter-century of service at SIU School of Medicine. A remarkably gifted surgeon and educator, he has written nearly 350 scientific articles and made more than 350 presentations of scientific papers and guest lectures in North America, Europe, South Africa, China and other international venues.

It just takes one easy phone call for outlying community hospitals to transfer a patient to Memorial Medical Center.

In fiscal year 2012, Memorial surpassed our goal to increase admitted patients from outlying hospitals and physicians, achieving a 6.6 percent increase over the prior year via the MemorialACCESS program. Formerly known as MMC STAY, MemorialACCESS was launched in February 2012 for outlying healthcare providers and physicians who need to consult with a physician or transfer a patient to Memorial Medical Center. The process is initiated with one phone call to the MemorialACCESS hotline, which is staffed 24/7 with Memorial RNs. Once a call is received, the nursing staff proceeds to quickly facilitate meeting the needs of our regional partners and patients. More information on MemorialACCESS is at ChooseMemorial.org.

The number of participants in the third annual Road to Recovery 3K/5K Walk-Run, held May 5 in Springfield’s Washington Park to raise awareness about mental illness.

With a special focus on children, the event included a Kids Dash and was held in conjunction with the Substance Abuse and Mental Health Services Administration’s National Children’s Mental Health Awareness initiative. In total, nearly $2,000 was raised at the event. Proceeds were split between Mental Health Centers of Central Illinois to support underfunded direct services provided to children, adolescents and adults, and NAMI (National Alliance on Mental Illness) Springfield to support educational events and programs.
The number of stroke patients who presented at Memorial Medical Center in FY2012. In FY2013, Memorial expects to assist dozens of additional patients with life-threatening stroke symptoms thanks to its new Telestroke technology, implemented in August. Memorial's Telestroke program places high-definition audio-video conferencing technology at each partner location, with a focus on rural hospitals, which do not typically have immediate access to a fellowship-trained stroke neurologist. When a patient with suspected stroke symptoms presents at a partner hospital, staff there can quickly contact an on-call stroke neurologist at Memorial Medical Center, who can assess the patient as if he were on-site with the patient. The neurologist utilizes a computer on a portable Telestroke cart and operates a remote that allows him to manipulate a camera on the computer system stationed at the rural hospital to evaluate the patient; the system also allows high-definition medical imaging scans (such as CT scans of the brain) and other pertinent information to be shared between hospitals. This technology helps the neurologist collaborate with the rural emergency physician to determine if the patient qualifies for tPA, a life-saving clot-busting medication and/or neurointerventional procedures, and requires transport to MMC or another hospital for higher level care. In most cases, patients suffering a stroke qualify for tPA for just three hours following the onset of symptoms. “Telestroke expedites the evaluation of the patient and consideration of potential treatment options by using technology to put the neurologist at the point of the patient, family and emergency department physician,” said Teresa Reiser, director of Neuromuscular Sciences at Memorial Medical Center. “This avoids any delays in making crucial decisions for care.” MMC's Telestroke partnership launched with Abraham Lincoln Memorial Hospital in October and Taylorville Memorial Hospital in November and will expand to other hospitals.
TMH provides a ‘hometown touch’
to lifelong resident’s medical care.

Jim McCoy is a familiar face at Taylorville Memorial Hospital. Diagnosed in 1983 at the age of 29 with Common Variable Immunodeficiency (CVID), Jim has required monthly infusion treatments to help sustain a healthy immune system. Without those treatments, his immune response to infection would be virtually nonexistent and he’d face any number of infections that could threaten his life — as well as a life sheltered from social contact. To be able to receive those treatments at his community hospital, just four blocks from his home, is literally a life-saver, he said.

“You have no idea what this hospital has done for me,” said the 58-year-old married father of two sons. “There’s nothing to compare to how I’m treated there. If I didn’t have this hospital, my lifestyle would change dramatically. I can’t tell you how blessed I am – I don’t have the vocabulary.”

CVID occurs when a patient’s immune system can’t protect him from bacterial, viral and even some parasitic infections. After suffering several back-to-back rounds of pneumonia in his late 20s, Jim learned he had CVID, which often is diagnosed after many other ailments are first ruled out. He suspects he developed the genetic condition in his late teens.

The best treatment for CVID is intravenous immunoglobin (IVIG) infusions, which boosts the patient’s level of antibodies to properly fight off infection. Jim’s monthly two-hour infusions at TMH help keep his counts high enough to fight infection until he’s due for another round. In addition to IVIG, he retired early from his career as a warehouseman and spends his days at home making sure his body is properly rested and nourished. Every now and then, he manages to get in a round of golf.

A lifelong Taylorville resident, Jim said a large part of what keeps his stress levels down is knowing his community hospital is familiar with his rare condition. In addition to avoiding the time and expense required to travel to more distant hospitals, he has the benefit of working with a staff who knows him well. When it’s time for his next monthly treatment, he calls three to four days ahead, asks to be scheduled with his nurse, Karen Herman, RN, and sets a date. On the day of his treatment, Herman is waiting for him with the exact settings for his infusion so that he’s in and out as quickly as possible.

“I’ve got a nurse who knows me and understands me, which is huge,” Jim said. “That hometown touch – they know me when I walk in the door – you can’t get that anywhere else.”

Beyond the nursing and medical staff, Jim said he also is grateful for the newly renovated Emergency Department, completed in 2011, which he visits without hesitation if he begins to feel unwell, and he’s also used the hospital’s new CT technology in the Outpatient Services Center, completed in 2011, for his annual checkups. He even sings the billing staff’s praises for helping him find the most ideal insurance company for both him and the hospital to work with, which he said helped him keep his dignity in knowing his bills were being paid on time.

“It’s not just one thing – it’s the whole thing,” he said. “It’s everybody working together. As bad as this hand is that I’ve been dealt, the good people I’ve met along the way are lifelong friends that I absolutely treasure.”
The milestone kidney transplant performed by staff with the Alan G. Birtch, MD, Center for Transplant Services at Memorial Medical Center in December 2011. Marc Garfinkel, MD, surgical director for Transplant Services, performed the 800th transplant on recipient Stephanie Constant, a Havana mother of two preteen children who had been waiting for the call for eight years. That call arrived on Christmas Day. “I was so excited. It was a shock,” she recalled. The kidney and pancreas transplant program was founded in 1972 by Dr. Birtch, who was recruited by Southern Illinois University School of Medicine to join its faculty. Under his leadership as medical director, the transplant program was developed through a partnership between Memorial and SIU. The program was named after Dr. Birtch in May 2011. He died in December at age 79. The transplant program offers a personal, holistic approach that involves patient education, coordination of long-term medical care, social work support and helping patients resolve concerns about costs for necessary medications. A multidisciplinary team manages the care of approximately 250 post-transplant patients as well as patients who are on the waiting list for an organ. Physicians on the transplant team include Dr. Garfinkel, associate professor with SIU School of Medicine’s Division of General Surgery; David Rea, MD, assistant professor, SIU School of Medicine’s Division of General Surgery; and Brad West, MD, Springfield Clinic, who also serves as medical director.

800

260,000

Dollars raised in November 2011 during Memorial Medical Center’s 22nd annual Festival of Trees to be used for health-related projects and programs in the community. This family-friendly event continues to be a success because of the support of generous sponsors, designers, dedicated committee members and more than 1,000 volunteers who staff the nine-day event in the Orr Building on the Illinois State Fairgrounds, said Elena Kezelis, executive director of the Memorial Medical Center Foundation. Nearly 30,000 visitors attended the 2011 Festival. “Even during a challenging economy, our community remains generous in helping to support Memorial and our mission to improve the health of the people and communities we serve,” Kezelis said. Memorial’s Festival of Trees began in 1989 as an event to benefit the mission of Memorial Medical Center. Since then, the Festival has raised more than $2.9 million for healthcare projects and programs and is the single largest family-oriented holiday tradition in central Illinois. Proceeds from the Festival of Trees have been used to support programs such as Memorial’s Regional Cancer Center, hospice care and Independence Square – Memorial’s nationally recognized rehabilitation program – as well as Memorial’s Foundation healthcare grants.

The number of renovated operating rooms in Memorial Medical Center’s updated Day Surgery department in the Baylis Medical Building. Completed in January 2012, the renovation also features new pre-op, recovery and discharge bays and a modernized waiting room. As a result, throughput – the process in which patients move through the department for their procedures – has greatly improved, making it a much more pleasant and easier experience for patients, said Shari Hill, Baylis Day Surgery director. “Patients are happier, and our surgeons are a lot happier. It’s much easier for scheduling,” she said. “We’ve gotten a lot of positive feedback.” The upgraded facility features state-of-the-art equipment including new monitoring technology, laparoscopic equipment, lighting, flooring and much more. Staff provided input regarding room and equipment setup to optimize the department and make it as efficient and safe as possible.
The percentage decrease in hospitalizations for respiratory failure for patients who participated in Memorial Home Services’ non-invasive ventilator program in 2012. Part of Home Services’ Durable Medical Equipment department since 2010, the non-invasive ventilator program has grown significantly in the past two years. The program helps patients with later stages of Chronic Obstructive Pulmonary Disease (COPD) improve their symptoms of shortness of breath, improve the quality of life and decrease admissions to the hospital. The equipment is used at night and as needed during the day via a mask on their face similar to CPAP therapy for sleep apnea. Patients with COPD, however, breathe very shallow at night and have air trapping in their lungs during the day, which causes an increase of carbon dioxide in their body and eventually could lead to very high levels that require a hospitalization. This therapy helps them expel the carbon dioxide by providing support to their breathing while they sleep. Of the 10 patients in the program in 2012, the group experienced nine hospitalizations, compared to 19 the year prior to being enrolled. “Our clinicians have been more proactive at identifying patients that meet the criteria for this equipment and educating the physicians on the program,” said Lori Valentine, director of Durable Medical Equipment. “This therapy helps patients improve their quality of life, reduce their severe shortness of breath and decrease re-hospitalizations and emergency-room visits.”
Hospice patient’s final wish takes her soaring ‘like an eagle.’

On a warm summer evening, with a sky as blue and clear as it comes, Carol Cray set off in a hot-air balloon to fulfill a longtime dream.

“I’ve always wanted to glide and soar like an eagle,” she said as she watched the colorful balloon inflate on its takeoff spot — an empty plat of grass near the Wal-Mart in Lincoln.

“Isn’t it pretty?” she said to her 6-year-old granddaughter, Kati. “Soon, we’ll be floating in the clouds.”

A doting grandmother to three girls ages 6 to 18, Carol, 56 of Girard, spent much of 2012 pursuing and fulfilling dreams and wishes she had for her life. After more than two years battling various cancers — first breast cancer, than colon cancer, and finally lung cancer that metastasized to her brain and bones — her doctor placed her in the care of Memorial Home Services Hospice, where a team of nurses, social workers and aides worked together to ensure her comfort during her final days.

Carol’s daughter, Angie Kruse of Curran, made it her duty to help fulfill her mother’s final wishes and had made all but one come true: a hot-air balloon ride, which Carol and her husband, Pat, had talked about for years. For six months Angie searched until Carol’s Hospice social worker, Laurie Dobrinich, suggested the family apply to Memorial Medical Center Foundation’s new Sharing Wishes Fund, which grants wishes of hospice patients in central Illinois. Carol’s was the fourth wish granted by the fund, which was established in March 2012.

“Laurie came into my room and said, ‘Is there anything you want?’” Carol said. “And my first thought was, well, Disney World! But then I’d want my grandchildren to be with me, so I told Laurie a balloon ride would be beyond my wildest dreams. It’s nice to have something to look forward to when you’re told your time is limited.”

Because of the progression of her illness, Carol’s wish was granted quickly. On June 22, she and her family met Ed Dowling, a balloon pilot from Lincoln, and his team for her ride. Accompanying her in the balloon was her granddaughter, Natalie, whom Carol had helped raise.

As Carol and Natalie soared away toward the Logan County countryside, Carol flapped her wings like the eagle she wanted to be. Angie, who promised her mother she wouldn’t cry in front of her, broke down in tears as she watched her daughter and mother float higher and higher.

Carol’s husband, Angie and granddaughters Kati and Ashli followed Dowling’s “chase” team along area back roads, occasionally stopping to watch the balloon float by and take photos. After an hour in the air, the trio landed smoothly on a country road that paved a path between bean fields. Carol pumped her arms in the air, with two thumbs up, as she exited. Once the balloon had been packed away in a trailer, the team surrounded her to toast their successful trip.

On Aug. 25, two months after her balloon ride, Carol passed away at her home. “We are eternally grateful for this,” Pat said. “She had a great time and was so glad she could do it. We are beyond grateful.”
The number of children, ages birth to 18, who have been screened for behavioral and emotional issues as part of the Children’s MOSAIC Project, which began its first year of implementation in September 2011. MOSAIC stands for Providing Meaningful Opportunities for Success and Achievement through Service Integration for Children. Springfield was one of four communities in Illinois to receive a three-year grant funded by the Illinois Children’s Healthcare Foundation to create a community-based model to transform and improve the way mental health services are provided to children and youth. Mental Health Centers of Central Illinois is the lead agency representing the community-wide collaboration. Screening is the essential first step to identify needs so that children and families can be connected to appropriate community resources. “Everyone involved in the MOSAIC Project is committed to ensuring that children in Springfield have the best chance to grow up happy, healthy and with a bright future,” said Melissa Stalets, director of the Children’s MOSAIC Project. “The screenings that have been conducted help us identify children who are experiencing problems such as excessive sadness or worry. We then connect families to the help they need.” During the past year, children were screened for behavioral health issues by MOSAIC community partners at two schools in Springfield Public School District 186 as well as SIU School of Medicine’s Center for Family Medicine. For children who are at-risk or experiencing social and emotional issues, follow-up services are coordinated by behavioral health clinicians with the MOSAIC Project. At SIU’s Center for Family Medicine, the primary care provider discusses screening results with the family and then has MOSAIC’s on-site clinician meet with the child and family during the same appointment to connect them quickly with available services in the community. Besides schools and primary care clinics, MOSAIC also reached out to children and families in the Neighborhood of Hope, which encompasses 49 square blocks in east Springfield. By working together with The Springfield Project, MOSAIC staff began screening children who live in the neighborhood. By taking behavioral health services out of the clinic and into children’s natural settings, the team hopes to engage families so children can reach their fullest potential.

The approximate number of community members who have attended Memorial Events, an ongoing series of free, educational community health events hosted by Memorial Medical Center. The events, held in the Wedeberg Conference Center, provide health education and align with Memorial’s mission to improve the health of the people and communities we serve. Led by local healthcare professionals, topics discussed at the 16 events held this past fiscal year included women’s health, organ transplant, sleep apnea, female athletic performance, prostate health, neurointerventional radiology, traumatic brain injury and treatment options for several common orthopedic disorders.

The number of babies born at Abraham Lincoln Memorial Hospital in its first year at its new location, 200 Stahlhut Drive in Lincoln. In June, 40 babies born between March 24, 2011, and March 24, 2012, returned to their birthplace along with their parents and dozens of other attendees to celebrate the Family Maternity Suites’ (FMS) 1st birthday. Attendees completed an artwork project, had the opportunity to complete a keepsake to take home, took a group photo, enjoyed refreshments and visited with the nurses from the unit. The Family Maternity Suites are tucked into a quiet corner of the ALMH acute-care unit and feature three observation rooms and three labor, delivery, recovery and postpartum suites. FMS also has its own elevator to quickly transport patients needing C-sections to surgery.
The number of people who have completed online bariatric surgery orientation since its launch. In November 2011, Memorial Bariatric Services launched an online orientation for people who want to learn more about bariatric surgery. The information once provided at orientation seminars held on campus at Memorial Medical Center (MMC) is now available free of charge on MemorialBariatricServices.com. Moving orientation from a seminar setting to an online forum created opportunities for more people to investigate bariatric surgery at MMC. Now patients can research all aspects of bariatric surgery from the privacy of their home computer. “We understand that bariatric surgery is an important decision for patients to make, as many patients spend up to two years researching it before taking their first step, such as an orientation,” said Kimberly Paskiewicz, program manager for Memorial Bariatric Services. “We hope by enabling patients to initiate their weight-loss journey from the privacy of their computers, it will be more comfortable for them.” Online orientation also creates opportunities to learn about bariatric surgery for patients who live outside of the Springfield area or for whom driving long distances is difficult. Memorial Medical Center provides bariatric services to patients throughout central Illinois, including the Bloomington and Quincy areas. The online orientation includes four courses: “Is Bariatric Surgery Right for Me?” “A Multidisciplinary Care Approach to Bariatric Surgery,” “Bariatric Surgery Overview” and “Paying for Surgery.” Each course has a video presentation followed by a series of multiple choice questions to ensure the patient understood the material. A patient must complete the online orientation before beginning their weight-loss journey in Memorial Bariatric Services’ program.
Teaching Kitchen inspires young patients.

At just 10 years old, Nate Borders can tell you what he wants to be when he grows up. The Franklin Middle School sixth-grader plans to be a professional sports player or a healthy foods chef. And after bringing his own body mass index level down five points and losing 20 pounds, he considers himself the health expert for his two younger sisters and parents. “I’m sort of scared that if I don’t watch out for them, they’ll get way off track,” he said. “Normally I have my parents watching out for me, but now I’m watching out for them.”

Nate decided to make a change in his own life after a few kids from school bullied him over his weight. “Kids are cruel,” said Nate’s mom, Kari Borders, principal at Douglas Alternative School in Springfield. “I didn’t want him or my girls to have to go through that. So we needed to do something about it as a family. And the more support we have, the better it works.”

That’s when they heard about “Just Cook – A Teaching Kitchen.” Offered through Memorial Physician Services, it’s a program designed to teach kids and their parents hands-on healthy cooking techniques while working with dietitians, doctors and nurses. Spearheaded by Virginia Dolan, MD, the program consists of a three-night series once a week for three weeks.

“Handouts are rarely effective in evoking change,” said Dr. Dolan, a pediatrician with more than 20 years’ experience. “This approach offers a chance to get unstuck from our current patterns. It is low cost with no product to sell. It makes change less overwhelming, even exciting, with the hands-on achievement.”

Dr. Dolan modeled the interactive series off a program from David Eisenberg, MD, a Harvard doctor she learned about while attending a conference at the Culinary Institute of America. She partnered with Memorial Medical Center’s Food & Nutrition department as well as local food distributor M.J. Kellner Co., Inc. The workshop was opened up to patients in her practice who would benefit from a hands-on approach.

Nate was one of 12 patients, ranging from 10 to 16 years old, who attended. The first night, titled “What’s for Dinner?” was followed by “What’s for Breakfast?” and then “What’s for Lunch?” “I tried tomato basil soup, whole-grain blueberry pancakes and rollup hummus sandwiches,” Nate said. “I actually got to do more than just mixing and really get in there. I’ve been watching cooking shows since I was 7, so I knew what to do.”

Like an office visit, participants paid a copayment for each class. They also paid $10 for food that’s made during class and enjoyed at the end of the night, which included items like grilled cheese sandwiches with balsamic caramelized onion and mixed-berry butter crunch parfaits. “It was a great experience getting to work side by side cooking things we don’t normally cook,” Kari said. “And the recipes we did get are adaptable. We can pull it out and add something else. It really opened our eyes.”

With newfound knowledge and encouragement from Nate, the Borders family began making changes at home. Better-quality meat was purchased as well as substitutions for high-calorie foods. Soda and juice boxes were banished. Only tea, water, milk and orange juice are allowed in the refrigerator. Sports drinks were consumed only during ballgames. More fruits and vegetables were added to their diet.

“We were on the diet of run through the fast food lane, pick up what you can, and then you’re eating at 9-o’clock in the middle of doing homework,” Kari said. “And with three young kids who are all in activities, it’s really about finding the time to sit down, look at what you fix and prioritize.”

As for Nate, he enjoys being more involved with the family’s meal planning. He’s also not shy about his improved cooking ability. “It’s one of the things that I enjoy besides sports, and I actually get to make people proud,” he said. “Because all I had before was school and sports, but with cooking – trust me, I’ll be signing autographs.”
The record-high number of home hospice patients served by Memorial Home Services in fiscal year 2012. Hospice care through Memorial is provided 24/7 anywhere an individual calls “home” — such as their own home, nursing home or retirement facility. The goal of hospice care is to enhance a patient’s quality of life by providing comfort, rather than curing the illness. Pain and symptom management is a priority, allowing individuals to live their last days, weeks or months to the fullest. The growth Home Hospice experienced in 2012 is attributable, in part, to improved public awareness of Memorial’s hospice services in the community and with physicians, expansion of the hospice volunteer program, improved time from referral to admission, a nursing home team that understands the unique needs of a nursing home patient and overall excellent care, said Ronda Dudley, director of Home Health and Hospice. “Our comprehensive approach to hospice care is an extension of Memorial’s mission,” she said. “By striving to enhance a patient’s quality of life, the time left with their loved ones is more pleasant and comfortable.”
The number of Memorial Health System affiliates working together to provide integrated care by combining medical and behavioral health services in primary care settings. In 2011, Mental Health Centers of Central Illinois (MHCCI) and Memorial Physician Services (MPS) launched an innovative approach that provides patients the opportunity to address behavioral health concerns in their primary care settings. By placing therapists from Memorial Counseling Associates, a program of MHCCI, in two MPS primary care clinics, patients can access the support they need in a familiar and convenient setting. At Family Medical Center of Lincoln and Menard Medical Center in Petersburg, behavioral health specialists are part of the care team providing mental health consultation, assessment and early intervention. “We know physical health affects mental health, and mental health affects physical health,” said Jan Gambach, president of MHCCI. “Yet, the healthcare system has historically treated mental and physical health separately. Integrated care allows providers to see the whole person — and recognizes that mental health is an integral part of one’s overall health and well-being.” Thanks to a grant from the Memorial Medical Center Foundation in early 2012, integrated behavioral health services at these MPS clinics were expanded to include IMPACT (Improving Mood – Providing Access to Collaborative Treatment), an evidence-based treatment that has been shown to be twice as effective as traditional care in decreasing symptoms from depression. Treatment through IMPACT also improves physical and social functioning and a patient’s quality of life while reducing overall healthcare costs. Vine Street Clinical Associates, which joined Memorial Physician Services in November 2011, provides psychiatric consultation to the MPS physicians who are involved in the IMPACT program.

Memorial Health System affiliates working together to provide integrated care by combining medical and behavioral health services in primary care settings.

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The number of junior high students who no longer have their educational routines disrupted by helicopters landing on the Taylorville Junior High School property. Prior to the development last year of a helipad located adjacent to the new nine-bed Emergency Department in the new Outpatient Services Center at Taylorville Memorial Hospital, helicopters landed on the nearby property utilized by students for physical education classes and lunchtime activities. Students are now able to attend school in a safer and less disruptive environment. Not only did the previous arrangement cause disruption at the school, it involved the need to have an ambulance present to relay the patient to and from the ED, creating an additional step in the transfer process. The transition of patient care to the next level of provider can now occur in a more effective manner, once it is identified that helicopter transport is necessary.

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The number of new volunteers recruited to serve Memorial Home Services Hospice patients in 2012. Volunteers play a crucial role in the comprehensive care Memorial provides to its home hospice patients in 14 central Illinois counties. They offer support to patients and families in a number of ways, such as through providing companionship to patients, listening to concerns or reminiscing, reading to patients, providing respite (short breaks for caregivers and families), helping out with yard work or housework, providing emotional support and grieving with the family. Other volunteers choose to help in the office, assisting with mailings and assembling packets, making phone calls to check on the care each patient is receiving and checking in with the family members of patients who have passed to ensure they are getting the support they need during a difficult time. In 2012, the volunteer program nearly doubled in size. “This means that the quality of care received by our patients is enhanced. More of our patients can benefit from the compassionate services provided by caring volunteers,” said Amy Evans, volunteer and community education coordinator for Hospice. “They are an added support for families in times of need. Families who received a volunteer during their time with us are also contacting us to volunteer – they have seen, first-hand, the benefits of a volunteer in hospice care.”
JointWorks program provides orthopedic care close to home.

Two years ago, Gretchen Plotner was visiting her son in Florida when her left knee started going out. “It was becoming difficult to even walk,” said the 77-year-old Lincoln resident. “I knew I needed to get home and see my doctor.” She and her husband, Les, came home early and made an appointment with Rodney Herrin, MD, an orthopedic surgeon with the Orthopedic Center of Illinois. X-rays revealed there was only a small amount of cartilage remaining in her left knee. To improve her strength and mobility, Gretchen started physical therapy with the Rehab Services team at Abraham Lincoln Memorial Hospital.

The next year, however, her right knee started acting up. “It was in the same shape as my other one so I knew I needed to have surgery,” she said. “The doctor said if the cartilage wears out on the inside of the leg, I would become bowlegged. I didn’t want that.”

Gretchen underwent a right-knee replacement. She spent three days in the hospital recovering before going home. “I felt so blessed I could have the surgery at my hometown hospital,” she said. “The staff knew exactly what I needed before I even did.”

As a knee-replacement patient, Gretchen received care through the hospital’s joint replacement program, now Memorial JointWorks. Recently introduced at ALMH, Memorial JointWorks was developed and introduced at Memorial Medical Center in Springfield nearly 10 years ago. The program is designed to build a partnership between hip- and knee-replacement patients and their healthcare team. Patients and their families attend an education class to learn exactly what to expect before, during and after their surgical procedure. With evidence-based plans of care and a personalized, aggressive therapy approach, the multidisciplinary JointWorks team helps patients reach their goals of decreased pain, maximized function and mobility, and an overall improvement in quality of life.

“After surgery, Gretchen started therapy right away,” said Todd Mourning, PT, DPT, manager of Rehab Services at ALMH. “We start with an evaluation to test the range of motion, strength and to watch how they transfer up and down and in and out of bed. Our goals are to reduce the pain and get the patient out of the walker.”

To increase range of motion, Gretchen’s team had her concentrate on exercises to improve function, regain strength and assist walking and balance. She spent time on the center’s new sitting elliptical, the Octane X-ride, a machine that caters to knee-replacement patients and made possible by the Abraham Lincoln Healthcare Foundation.

Patients typically receive treatment two to three times a week for about four weeks. But exercises must continue once the patient is home. “They own their own recovery,” Mourning said. “They chose to have the surgery and need to maintain that feeling of ownership. We recommend they perform their exercise at home up to four times a week but that does depend on the patient. Ultimately, the sooner they build their strength, the quicker they can get back to daily activities.” Each year, nearly 1,500 people undergo hip or knee replacement surgery through Memorial JointWorks. Now that it has been incorporated at ALMH, Mourning expects that number to rise. “I think we’ll reach an ever wider variety of people and really make a difference in Lincoln and Logan County,” he said.

It has certainly made a difference for Gretchen. The retired jury commission clerk can now do everyday activities around the house and town with ease. Eventually she will have her left knee replaced as well. But for now, she’s enjoying life and taking it one step at a time. “We just have two steps to get into our house,” she said. “After surgery, I went right up with no problems. I was lucky. And I really do feel great. I know the treatment I got had a lot to do with that.”
The approximate number of surgical procedures performed using Memorial Medical Center’s da Vinci surgical system. In November 2011, the types of procedures the da Vinci system is utilized for was expanded to ear-nose-and-throat (ENT) procedures. The two most common ENT procedures using the advanced robotics have been radical tonsillectomy and to treat sleep apnea. Twelve ENT procedures have been performed since the first one was completed on Nov. 30, 2011. Since Memorial began using the da Vinci surgical system in June 2009, more than half of its usage (55 percent) has been for gynecological procedures. More than a third (39 percent) have been for urological procedures. The hospital purchased a second robotic surgical system in September 2011 and was the ninth hospital in the state to begin using two robotic surgical systems. Nineteen surgeons are credentialed to perform robotic surgery at Memorial Medical Center. Surgeons manipulate the robotic system’s four arms. One arm holds a tiny camera in place, another holds surgical instruments, and the other two perform the surgery. The da Vinci also comes with 3-D imaging equipment so that surgeons get the best view possible of the area where they’re working. The system seamlessly translates the surgeon’s hand, wrist and finger movements into precise, real-time movements of surgical instruments inside the patient.

The increased number of annual Emergency Department visits at Taylorville Memorial Hospital since the new ED opened in March 2011. This equates to approximately a 13-percent increase in volume. With the transition from a five-room ED to a nine-room facility, the department saw an immediate increase in volumes. Emergency Department visits increased from 1,072 visits in the month of February 2011, the month prior to the move, to 1,353 visits in May 2012. Hospital staff anticipates a continued increase in volume in the Emergency Department and looks forward to continuing to meet the needs of the community.

The number of patients registered for MyHealth@MemorialMD. Memorial Physician Services launched a new patient portal in November 2011. The password-protected portal provides easy, free and secure access to patients’ personal health information online. It allows patients to schedule appointments, refill prescriptions, receive updates on changes to their health record and communicate directly with their physicians’ offices. Patients can receive reminders about appointments or follow-up care through text messages or emails as well as have access to their lab and radiology results, physicians’ notes and medication lists. If they’re traveling, patients can take their health information with them on a flash drive or CD. Enrollment is open to all Memorial Physician Services patients who are 18 or older. Patients sign up for MyHealth@MemorialMD at their physician’s office. There is also a free FollowMyHealth app for the iPhone; a Droid app is in development.
The percentage of the adult population in Adams County that is obese, according to the most recent statistics from the Illinois Department of Public Health. For some of those adults, bariatric surgery may be the answer. In July 2012, Memorial Medical Center, in collaboration with Springfield Clinic, expanded its Bariatric Services program westward, joining with Blessing Hospital in Quincy to provide comprehensive bariatric services to the people of Adams County and the surrounding communities. Staff at Blessing Hospital provides pre- and post-operative nutrition, physical therapy, social work, laboratory and imaging services as well as a nurse practitioner. The minimally invasive surgeries are performed at Memorial Medical Center. Memorial and Springfield Clinic entered into a similar partnership with Advocate BroMenn Medical Center in Normal in 2011. More than 800 weight-loss surgical procedures have been performed at Memorial Medical Center since Memorial Bariatric Services was established in 2002. Many of those patients have seen their coexisting medical conditions reversed or reduced after surgery. Three years after surgery, 62 percent of Memorial’s bariatric patients with sleep apnea had their condition completely resolve and another 18 percent saw it improve. For weight-loss surgery patients with Type 2 diabetes, 72 percent had their medical condition resolve and another 25 percent saw improvements.
## MHS Consolidated Statements of Operations

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<td>Other Operating Revenues</td>
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<td><strong>Total Revenues</strong></td>
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<td>$708,782</td>
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|                      |          |          |
| **EXPENSES**         |          |          |
| Salaries and Benefits | $330,367 | $341,652 |
| Physician Fees       | 50,290   | 41,696   |
| Patient Service Supplies | 218,194 | 215,747 |
| Hospital Provider Assessment | 12,192 | 12,221 |
| Purchased Medical Services | 31,655 | 35,516 |
| Depreciation and Amortization | 48,252 | 41,259 |
| Interest Expense     | 10,676   | 9,894    |
| Excess Available for Facilities Improvement Funds | 93,053 | 10,797 |
| **Total Expenses**   | $794,679 | $708,782 |

*(dollars in thousands)*

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**MHS Leadership**

MEMBERS OF THE CORPORATION
Frank V. Aguirre, MD
Robert E. Albert
R. Lee Allen
Donald A. Altorfer
Karen Barber
Richard D. Barclay
Carolyn E. Barris
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Mark H. Ferguson
Ellen J. Fiersten
Brenda H. Fletcher
James C. Forstall, PhD
Donald H. Funk
Randall S. Germeraad
## MHS Operating Statistics

### MEMORIAL MEDICAL CENTER

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### MEMORIAL HOME SERVICES

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<tr>
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<th>FY2012</th>
<th>FY2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospice Days of Care</td>
<td>48,390</td>
<td>39,288</td>
</tr>
<tr>
<td>Home Health Patients</td>
<td>3,692</td>
<td>3,923</td>
</tr>
</tbody>
</table>

### MEMORIAL PHYSICIAN SERVICES

<table>
<thead>
<tr>
<th></th>
<th>FY2012</th>
<th>FY2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinic Visits</td>
<td>282,175</td>
<td>259,567</td>
</tr>
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</table>

### ABRAHAM LINCOLN MEMORIAL HOSPITAL

<table>
<thead>
<tr>
<th></th>
<th>FY2012</th>
<th>FY2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Licensed Beds</td>
<td>25</td>
<td>25</td>
</tr>
<tr>
<td>Patient Days of Care</td>
<td>3,547</td>
<td>3,267</td>
</tr>
<tr>
<td>Discharges</td>
<td>1,082</td>
<td>1,046</td>
</tr>
<tr>
<td>Average Length of Stay</td>
<td>3.28</td>
<td>3.12</td>
</tr>
<tr>
<td>Outpatient Visits</td>
<td>43,472</td>
<td>47,176</td>
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### TAYLORVILLE MEMORIAL HOSPITAL

<table>
<thead>
<tr>
<th></th>
<th>FY2012</th>
<th>FY2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Licensed Beds</td>
<td>25</td>
<td>25</td>
</tr>
<tr>
<td>Patient Days of Care</td>
<td>5,021</td>
<td>5,240</td>
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<tr>
<td>Discharges</td>
<td>1,396</td>
<td>1,404</td>
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<tr>
<td>Average Length of Stay</td>
<td>3.60</td>
<td>3.73</td>
</tr>
<tr>
<td>Outpatient Visits</td>
<td>37,643</td>
<td>35,776</td>
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</table>

### MENTAL HEALTH CENTERS OF CENTRAL ILLINOIS

<table>
<thead>
<tr>
<th></th>
<th>FY2012</th>
<th>FY2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Clients Served (unduplicated)</td>
<td>9,433</td>
<td>9,163</td>
</tr>
<tr>
<td>Mental Health Clients</td>
<td>7,316</td>
<td>7,207</td>
</tr>
<tr>
<td>Memorial Counseling Associates Clients</td>
<td>1,831</td>
<td>1,669</td>
</tr>
<tr>
<td>Developmentally Disabled Clients</td>
<td>286</td>
<td>287</td>
</tr>
</tbody>
</table>
Dan Litteken
Scott McClure
Mary McNeely
Dan Raab
Rich Shaw
Bill Smith

EMERITUS MEMBERS
William B. Hopper
George A. Westrick

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2011-2012
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Reg Mills
Sandy Robinson, II
Wanda Rohlfis
Leigh Steiner, PhD
Cynthia Thomas, MD
Lora Thomas

SITES OF CARE
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Mental Health Centers of Central Illinois, Jacksonville
Mental Health Centers of Central Illinois, Lincoln
The Children’s Center
West Lake Center
Memorial Counseling Associates
Logan-Mason Rehabilitation Center

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Douglas L. Rahn, DBA, Director

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Memorial Home Services, Jacksonville

Memorial Home Services, Passavant Home Services, Jacksonville

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Edgar J. Curtis, Director
Mark E. Hansen, MD, Director

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Memorial Home Services, Jacksonville

Memorial Home Services, Passavant Home Services, Jacksonville

Memorial Home Services, Passavant Home Services, Jacksonville

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Marshall Hale, MD
Mark Hansen, MD
Paul R. Kasa, MD
Steven Lillpop, MD

Gerald D. Suchomski, MD

CLINIC SITES
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Michelle Colen, MD, Jacksonville
David D. Coultas, MD, Jacksonville
Family Medical Center of Chatham
Family Medical Center of Lincoln
Jacksonville Family Medical Associates
Jacksonville Family Practice
Jacksonville Pediatric Associates
Koke Mill Medical Associates, Springfield
Menard Medical Center, Petersburg
North Dirksen Medical Associates, Springfield
South Sixth Medical Associates, Springfield
Benjamin E. Montgomery, MD, Jacksonville
Vine Street Clinical Associates, Springfield
Women’s Healthcare, Springfield
Charity care covers bills for kidney cancer patient.

Dianna Fox was working a weekend shift at a nursing home in January 2012 when she started having back pain that wouldn’t let up. She soldiered on for another three hours, but the pain wasn’t retreating. She decided to get it checked out, assuming it was just a bladder or kidney infection.

After several tests and a CT scan at Passavant Area Hospital in Jacksonville, a doctor confirmed that Dianna had a kidney stone — but something didn’t look right with one of her kidneys either. Another CT scan revealed she had cancer in her right kidney. It needed to come out. Six days later, Dianna, 48, had her kidney removed during a two-hour procedure at Memorial Medical Center. The surgery was a success, and she didn’t need chemotherapy. She went back to work in mid-March.

Dianna lives in Raymond, a small community about 40 miles south of Springfield. The only issue that was troubling her was how she was going to pay the medical bills, which included nearly $60,000 in charges for Memorial Medical Center, because she was uninsured.

“I was a basket case,” Dianna recalls. “I had no idea what I was going to do.” However, Dianna called the hospital to see if she could work out a monthly payment schedule. Instead, Memorial helped her to see if she qualified for the hospital’s charity care. She did. Her entire bill was covered.

At Memorial, we believe that everyone has a right to medically necessary healthcare and equal access to treatment, no matter what their financial status. Charity care assistance provides free or discounted services to patients who cannot afford to pay all or part of a bill. In fiscal year 2012, Memorial Health System provided $18.35 million in charity care assistance to people who qualified for help.

“I was absolutely floored that it was all covered,” Dianna says. “Most of all, I’m thankful to God for people and charities who are there to help.”
Memorial Health System provided $107,719,000 in unreimbursed services to the people and communities we serve.

These expenses include Memorial Health System’s community benefits and unpaid Medicare and patient debts (bad debt). This represents 15.4% of our total expenses of $701.6 million.

As a leader in improving the health of our communities, Memorial Health System cares for those who are poor and underserved, regardless of their ability to pay for that care. Last year we provided more than $18.3 million in free care to our patients, relieving them of a financial burden they otherwise could not meet.

For the fiscal year ending Sept. 30, 2012, Memorial Health System affiliates provided more than $107.7 million in unreimbursed services to the communities we serve. Community benefits totaling $64.6 million include the charity care mentioned above as well as unpaid costs for patients insured by Medicaid ($25.9 million). An additional $20.4 million supported health professions education, clinical research, donations, and community health improvement initiatives. In addition to these community benefits, MHS had other unreimbursed expenses of $43.1 million. This included $25 million for patients insured by Medicare that was not reimbursed by the government; other unpaid patient bills totaled $18.1 million.

In total, unreimbursed services represent 15.4 percent of the health system’s total expenses of more than $701.6 million.

Specifically, Memorial Medical Center returned $50.8 million in community benefits, which included $16 million in unpaid Medicaid costs. Traditional charity care and support of the Capitol Community Health Center totaled $14.9 million, and remaining community benefit dollars totaled $19.9 million.

Abraham Lincoln Memorial Hospital provided $5.8 million in community benefits to the citizens of Logan and eastern Mason counties; that total includes $3.7 million in unpaid Medicaid costs, $1.9 million in traditional charity care and $219,000 to fund other health activities. Taylorville Memorial Hospital gave back nearly $3.2 million in community benefits; this amount includes nearly $2.1 million in unpaid Medicaid costs, more than $1 million in traditional charity care and $78,000 to fund other community services.

Additional community benefits totaling nearly $4.8 million came from the health system’s three other affiliates and Memorial Health Ventures, a non-profit subsidiary. The total community benefits provided by each were:
- $1.9 million from Memorial Physician Services;
- $2.0 million from Memorial Health Ventures;
- $812,000 from Memorial Home Services; and
- $78,000 from Mental Health Centers of Central Illinois.
### Total Cost of Community Benefit Services

- **Charity Care** – $18,354,000
- **Unpaid Medicaid** – $25,884,000
- **Health Professions Education** – $17,073,000
- **Community Health Improvement** – $1,446,000
- **Cash/In-Kind Contributions** – $1,188,000
- **Subsidized Health Services** – $58,000
- **Research** – $309,000
- **Community Building Activities** – $169,000
- **Community Benefit Operations** – $158,000
- **Bad Debt (Unpaid Patient Debts)** – $18,071,000

**Total Cost of Community Benefit Services**

$64,639,000

### Total Cost of Unreimbursed Services

- **Unpaid Medicare** – $25,009,000
- **Subsidized Health Services** – $58,000
- **Research** – $309,000
- **Community Building Activities** – $169,000
- **Community Benefit Operations** – $158,000
- **Bad Debt (Unpaid Patient Debts)** – $18,071,000
- **Community Building Activities** – $169,000
- **Community Benefit Operations** – $158,000

**Total Cost of Unreimbursed Services**

$107,719,000

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The first Sharing Wishes recipient, Walt McCarty, with family after being presented an overnight stay in St. Louis.

Sharing Wishes recipient Carol Cray soaring over a Lincoln cornfield.

Sharing Wishes recipient Dianne George meeting Pat Monahan, the lead singer of Train.
The number of health priorities Memorial Health System will focus on addressing through its Community Benefit Plan in 2013. These priorities — access to healthcare, obesity, cardiovascular diseases and diabetes — were determined based on data gleaned from analysis of community health needs for Memorial Medical Center in Sangamon County, Abraham Lincoln Memorial Hospital in Logan County and Taylorville Memorial Hospital in Christian County.

Each hospital looked at county-specific health data and convened a committee of representatives from public health, social service and other healthcare organizations to gain further insight into significant health issues on the local level. In December 2011, as part of its mission to improve community health, Memorial launched its Healthy Communities website that aggregates community health data for Sangamon, Christian and Logan counties. The information is available to the public on the health system’s website at ChooseMemorial.org/HealthyCommunities.

Visitors to the Healthy Communities website have access to community health indicators, community demographics, Healthy People 2020 (a comprehensive set of key disease prevention and health promotion objectives), health disparities data and a database of Promising Practices that helps users identify potential programs and interventions that have proven to be effective in other locations and more. Memorial Health System has shared its county-specific health data with the community at large with the hope that others will find useful information as they address community health issues.

The number of Diabetes Self-Management Education courses offered in fiscal year 2012 to members of Lincoln and surrounding communities through Abraham Lincoln Memorial Hospital. Each course involves four, two-hour group sessions that educate and empower people with diabetes and provide them with the tools to prevent complications from the disease. Participants learn about possible complications and how to avoid and treat them, diet plans, blood glucose monitoring, medications and more. Jennifer DiPasquale, a certified diabetes educator and registered dietitian, facilitates the classes. Since the class was first offered in 2005, DiPasquale said she’s seen several participants and helped them fine-tune their insulin regimens, identify and make changes to meal and exercise plans and significantly decrease their A1C levels (the patient’s average blood glucose level for two to three months). “Early learning helps promote better control of the disease and prevention of complications,” DiPasquale said. ALMH has applied to have the program accredited by the American Association of Diabetes Educators and anticipates receiving the accreditation in 2013.

The number of individuals who completed an online self-assessment for depression, bipolar disorder, generalized anxiety disorder, post-traumatic stress disorder and adolescent depression on MHCCI.org or MemorialCounselingAssociates.org in fiscal year 2012. In a given year, depressive disorders affect approximately 18.8 million American adults. Because of stigma and other factors, however, fewer than half of those suffering actually seek treatment. To help fight this stigma and help individuals identify a problem, Mental Health Centers of Central Illinois began offering a no-cost, confidential online screening for depression in 2010. After completing the anonymous assessment, immediate feedback is provided, as well as information on how to access local treatment resources, and links to related articles and resources.
The number of times each year a new heart-failure support group meets in Chatham at Memorial Physician Services’ Family Medical Center. Knowing that in-depth education and ongoing support make positive improvements for people with heart failure, physicians at the clinic were referring patients to the support group that met at Memorial Medical Center in Springfield. But many of their older patients who live in the southern part of Sangamon County found the drive into the city difficult to manage. In September 2011, the Family Medical Center of Chatham physicians contacted MMC about bringing its program to their Chatham location. Memorial now alternates eight support group meetings each year between the hospital in Springfield and the Chatham clinic. Led by Memorial’s dietitians, pharmacists, heart failure nurses and Family Medical Center physicians, programs cover a range of topics that help people understand the impact of heart failure on their lives. Learning to reduce stress, exercise and cook healthier meals all improve the health of people with heart failure, as does meeting and talking with others who share their health concerns.

The number of Memorial Home Hospice patients who had wishes fulfilled by the Memorial Medical Center Foundation’s Sharing Wishes Fund during the fund’s first six months. Sharing Wishes helps fulfill the wishes of terminally ill hospice patients and their families in central Illinois. More than 300 people attended the inaugural gala and silent auction to launch the fund in March 2012. The final wishes that are granted aren’t necessarily extravagant. For one patient, it was the chance to see her favorite band, Train, in concert at the Illinois State Fair. For another, it was taking a hot-air balloon ride. Another made a last overnight trip to St. Louis while someone else received a visit from an adult child in California. “The end of life is a time of reflection and a time to focus on what matters most,” said Ronda Dudley, director of home health and hospice at Memorial Home Services. “We’re grateful to the Foundation for its work to help hospice patients see their wishes come true.”

The number of people who participated in Taylorville Memorial Hospital’s Grief Support Group in 2012. Two Mondays each month, the group gathers at TMH to share their grief over the loss of a loved one. “Grief work may be the hardest work we will do in our life,” said Sister Rose McKeown, director of Pastoral Care at the hospital. “None of us are experts on how to grieve. We are companions on the journey. The only way to work with your grief is to go through it. Not around it but through it. If we don’t work with our grief, we may be forever sad. Grief has no timetable. It often takes much longer than the bereaved or the people in their lives expect.” Participants say that companionship is the greatest benefit of the program. The group typically has eight or nine members at any given time. Participation is open-ended, and people come and go as they need. Some members have attended for several years.

The number of rural Logan County residents benefiting from improved tracking of their diabetes and cardiovascular conditions, thanks to healthcare services offered on the HOPE Mobile. This mobile health outreach program of the Logan County Healthy Communities Partnership is supported by the Abraham Lincoln Healthcare Foundation, which provides operating support and oversees fundraising activities. A three-year federal grant, for example, has allowed the HOPE Mobile to pursue new avenues to improve the health of rural patients who have diabetes and cardiovascular disease. The first year of the grant purchased a mobile satellite internet system for the mobile health unit to access an electronic patient registry. This system can alert clinicians to potential issues, provides a summary of a patient’s key clinical indicators and generates health management reports. During the recently completed second year of the grant, focus turned to using the new system to improve the health of rural patients who have diabetes or cardiovascular disease. Many of the 101 patients being tracked have received diabetes nutrition counseling, improved their blood sugars, reduced their blood pressure and lowered their cholesterol.
MEMORIAL HEALTH SYSTEM’S MISSION

To improve the health of the people and communities we serve.

MEMORIAL HEALTH SYSTEM’S VISION

To be a national leader for excellence in patient care.