



Hospital ER Campaign kicks off



By DAVE MOSIER

VW Independent Editor

Van Wert County Hospital kicked off a capital campaign for its \$6 million ER project with some good news: more than half the project cost has already been raised in pledges from local businesses, individuals, and hospital employees.

Andy Czajkowski, ER campaign chair and a member of the hospital board of trustees, said that more than \$3 million has already been pledged to the project, including approximately \$200,000 from hospital employees and service providers, \$200,000 each from First Federal Savings & Loan and Van Wert Federal Savings Bank and \$100,000 each from First Financial Bank and Vancrest Health Care Centers.

Of the \$6 million project cost, \$2 million will be underwritten by the hospital's reserves, with the remaining \$4 million to come from pledges from area businesses and individuals.

Mark Minick, VWCH president/CEO, said that, while the hospital does not have a history of going to the public for money to fund projects, he felt that the ER project was a good one on which to do so, since it is a very visible



Mark Minick

part of the hospital and affects nearly everyone in the community.

Minick noted that the hospital has approximately \$17 million worth of capital projects, not counting the ER project, in its five-year capital improvement schedule, but said the ER project was the most visible and affected the most people.

"And of all the projects we have in the pipeline, we don't know of one that affects more people, or has the potential of affecting more people, from a quality of life standpoint -- or even a life standpoint -- as the ER," Minick said. "We're all potential patients of the ER; it could be a life and death situation.

"Our mothers, our fathers, our brothers, our sisters, our sons, our daughters are all potential

patients of the ER," Minick added, "and the emergency services of a community many times determine the quality of life of our loved ones, and may actually determine the life or death situation of our loved ones."

Minick said that, when the hospital administration and board looked at all potential capital projects, "we saw no more appealing project for our community than the ER, and that's why we chose the ER for this project."

Minick said it was important for the ER project to be built, since it was probably the most important project the hospital is looking at.

The hospital president/CEO also said that keeping the hospital as an independent, community hospital is important to maintain the services the community has come to expect.

Architect Bill Ledger of Design Collaborative, who also worked with the hospital on the second floor renovation project, gave an overview of the planned project, which is expected to encompass approximately 12,000 square feet and be located at the northwest corner of the hospital (see drawing at right).

Also speaking at the kick-off was George Brooks, city president of First Financial Bank and chairman of the hospital's board of trustees.

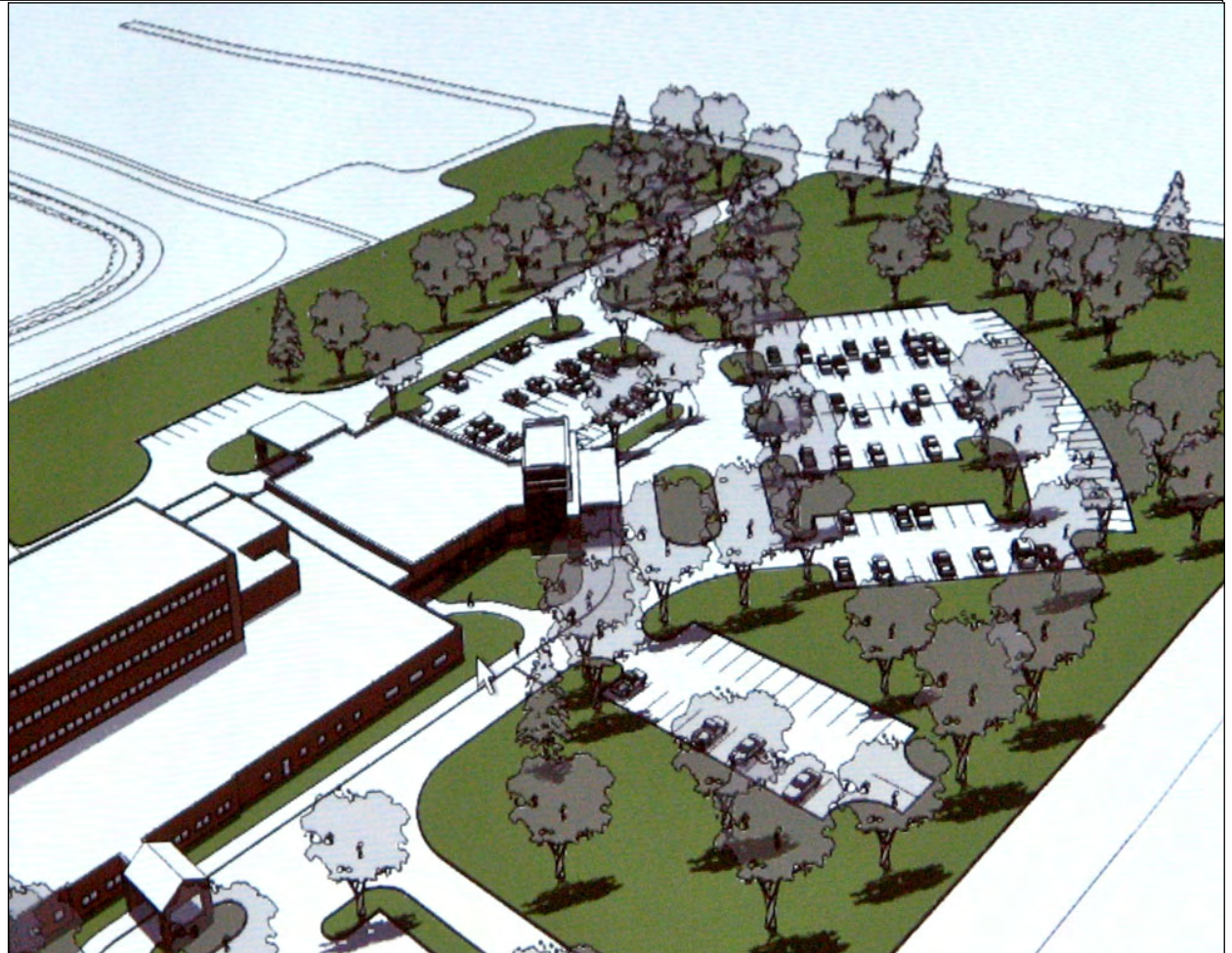
Brooks talked about the importance of the hospital to the community and also cited the



Bill Ledger



George Brooks



An artist's conception of what the ER would look like (seen here in the northwest corner of the drawing, with additional parking to the west and north).

economic development advantages of having a locally-controlled hospital in a community, as well as the benefits of maintaining a strong hospital presence.

"Without a community hospital, I don't think those things happen," Brooks said.

In talking about economic development, Brooks said companies looking to construct a facility look at items such as good schools and hospitals, as well as other quality of life assets.

"It's important to invest in our health care system," said Brooks for all of the above reasons.

Ironically, perhaps, the idea of maintaining an independent community hospital was applauded by the featured speaker of the day: Mike Schatzlein, CEO of the Lutheran Health Network that includes eight Indiana hospitals that is based in Fort Wayne, Ind.

"I'm an absolute fan of Van Wert, of your hospital, and of your administrator," said

Schatzlein, a cardiologist who performed the very first heart transplant in northern Indiana in 1985. "I'm very enthusiastic about what you're doing here."

As to the steps the local hospital was taking to maintain an independent community hospital, Schatzlein was also enthusiastic about those.

"Bravo! Right on! You're doing what you should be doing. There are people all around you who would like to consume you and turn you into a (health care) feeder.

"What you are doing to preserve health care for the citizens of Van Wert preserves a valuable resource, preserves a valuable economic resource," Dr. Schatzlein said. "It's really a good thing."

The Lutheran Health Network CEO also had some facts and figures showing how important having a strong ER is to a hospital's survival and the health concerns of its patients.

He also built on local ER statistics that showed the hospital would likely see more than 17,000 patients in its emergency room by the end of the year -- and had had to treat 2,000 of those patients in the hallways and turn others away three times because of the lack of space.

The hospital currently treats an average of 2,000 patients for each of its seven ER beds -- about 500 over the industry standard -- and there is no designated private triage area.

New Health Insurance Portability & Accountability Act (HIPAA) regulations and the lack of privacy in the current ER are also important reasons for the ER expansion project.

Even with the increased needs and challenges of the local hospital ER, Minick said the amount of money raised during the capital campaign, which the hospital hopes to complete early next year, will determine the "footprint" of the project.

"We've been working with the design builders and the architects and we have a timetable for that, which coincides very much with our capital campaign," Minick said. "Obviously, we have a financial goal, obviously the ability to reach that financial goal will determine what that final footprint looks like."

"I don't want people to believe that we're going to do whatever we want regardless of the amount of money raised," Minick stressed. "It's still very dependent upon how successful we are in this capital campaign."

Minick said the private portion of the campaign has been completed, but added that a number of potential private donors haven't yet responded.

Hospital officials are hoping to break ground on the project in the spring of 2009, but Minick also said he wanted people to understand that the hospital has tried to be responsible with the size of the ER project.

"We think we've been very responsible in just providing a good, efficient use of space," Minick said. "I don't think you see any overbuilding; we're



Dr. Schatzlein



Campaign chair Andy Czajkowski runs through the numbers.

trying to build for the next 10 years ... we think that's a responsible way of doing it."

The hospital president also said officials want to make sure that potential donors know they have done their homework and that the project is the best value for the money.

Minick cited as an example early estimates that the ER project would need to encompass 26,000 square feet.

"We had this consultant come in and actually model patient flow using the metrics we've established and they say we can do it with 12,000," Minick said.

He added that the hospital has already spent \$25-30 million over the past 15 years in capital projects that the public was not involved in -- and \$17 million planned over the next five years without public investment -- and really doesn't plan to go to the public for funding much in the future.

But Minick said he felt the ER project was one for which a capital campaign was well suited.

"I also think there's something special about people putting money into this and then having a greater ownership of the project," he said.

In addition to Czajkowski, who chairs the Capital Campaign effort, others involved include co-chairs Mark White and Gary Clay and members Brooks, Chris Roberts, Robb Krecklow, Barb Kohnen, Glen Jenkins, Jon Rhoades, Drs. Jerry Sell, Jeff Easley and Joel Knerr, Steve Beck, Pam Baker, Chuck Koch and Minick.