



Auxiliary Volunteers of HYMC Make Donations to Howard Young Medical Center

The Auxiliary of Howard Young Medical Center Volunteers recently made two donations to Howard Young Medical Center to benefit our local community. A donation of \$1,205 was made in October 2015 to be utilized for the purchase of six wheel chairs to be placed at the main entrances to the facility in an effort to always have wheel chairs available for our patients and visitors when arriving at the facility.

In November 2015, the Volunteers voted to purchase five preemie car beds at a cost of \$392. This purchase would be the first of an ongoing program in conjunction with the Howard Young Birthing Center to present parents of each newborn preemie with a car bed upon discharge to allow for safe transportation of their newborn until they are able to utilize standard car seats.

"As our Volunteers provide service in various departments throughout the facility and come in contact with patients, families and visitors, they become aware of opportunities to put their fund raising dollars to good use," said Kathy Viergutz, HYMC Community Service Coordinator. Funds are raised through Auxiliary of Howard Young Medical Center fundraisers and services, including the LifeDirect service and also sales from the Auxiliary Gift Shop located inside Howard Young Medical Center.



Left to right, Back Row: Janet Beitz, Sue Damske, Diane Day, Webb Southwick and Tom Thompson. Front Row: Carol Andrews, Janet Bolger, Joanne Peters and Charles Peters



Picture (left to right) David Foster Donovan, Austin Ungst, Natalie Sell, Jessica Anderson, Anna Wilke, Rebecca Butkus, Benjamin Durette. Tyler Scharbarth was unavailable for the photo.

2015 Ashe Scholarship Recipients Announced

By Joan Taddy, AHYMC Scholarship Chair

The Auxiliary of Howard Young Medical Center awarded Dr. Henry Ashe Continuing Education Scholarships to eight students who are pursuing a career in a healthcare field at the undergraduate level. Each student received \$2,000.

College recipients include: Jessica Anderson, Hurley, Northern Michigan University, clinical laboratory science - pathology; Tyler Scharbarth, Minocqua, Viterbo University, nursing; David Foster Donovan, Minocqua, University of Iowa, Department of Biomedical Engineering, pre-med; Austin Ungst, Arbor Vitae, UW-Eau Claire, healthcare administration; Natalie Sell, Minocqua, The College of St. Scholastica, nursing; Rebecca Butkus, Minocqua, University of Wisconsin-Madison, Kinesiology; Benjamin Durette, Woodruff, Marquette University, Biomedical Engineering and Anna Wilke, Arbor Vitae, St. Catherine University, nursing.

Scholarships were awarded based on the number of qualified applications selected, and funds available for the program. Funds are provided by the Auxiliary of Howard Young Medical Center fundraisers, including the Harvest of Holidays, and also sales from the Auxiliary Gift Shop.

In 2015 the Auxiliary provided \$16,000 to the Dr. Ashe Scholarship and \$2,000 to the LUHS Scholarship. All scholarships awarded by AHYMC are given to students pursuing a healthcare major.

Thanks to all our members who have continued to support the scholarship program.

YOUR 2016 LEADERSHIP TEAM

By Kathy Viergutz

I would like to introduce your 2016 Leadership Team. Please feel free to go to any of these individuals with any questions, concerns, or suggestions that you might have concerning the Auxiliary. The leadership team is comprised of at least seven members: Two newly elected first-year members, two second-year members, the Secretary, the Treasurer, a Gift Shop representative, and advisor. Individuals on the Leadership Team are elected by the general membership for a term of two years and may serve two consecutive terms.

Please give some consideration if you would like to join the leadership team for 2017 or at any time in the future or if you know of someone who you would like to nominate for the team.



Susan Damske – Advisor, Barbara Schjoneman – Secretary, Bernadette Staller – Gift Shop Representative and Second Year Member, Darlene Reed – Treasurer, Mary Lou Shepski – First Year Member, Robert O’Neil – Second Year Member, David Christensen – First Year Member

Ministry Spirit Medical Transportation Earns Highest Level of Accreditation

Ministry Health Care’s Spirit Medical Transportation has earned the medical transport industry’s most respected and highest level of accreditation from The Commission on Accreditation of Medical Transport Systems (CAMTS). This accreditation is a reflection of Ministry Spirit Medical Transportation’s commitment and focus on quality, patient care, and safety during medical transport.

CAMTS is designed to improve the quality of patient care and safety during transport for services providing rotor-wing, fixed-wing and ground transport systems. The Commission, consisting of 21 nonprofit organizations, is a peer review organization dedicated to improving the quality and safety of medical transport services. Currently there are only 175 critical care transport services world-wide that have achieved CAMTS accreditation.



AHYMC February Luncheon

A lovely luncheon was held on February 9th at Norwood Pines attended by over fifty of our volunteers. Before the meal, Laurie Oungst, Howard Young’s Northern Region VP of Operations, installed two auxiliary members to be part of the leadership team. Dave Christensen and Mary Lou Shepski will each serve a two year term.

The guest speaker was Dawn McPherson the Clinical Geriatric Coordinator here at Howard Young Hospital. Dawn talked about the Hospital Elder Life Program (HELP) at Howard Young. We have auxiliary volunteers that spend time with patients while in the hospital. The volunteers go through a brief orientation as to what they might do. Some of the time spent with the elder patients might include reading, doing puzzles, talking, or just listening. These volunteers find the time very rewarding for the patient as well as for themselves.

The luncheon concluded with drawings for door prizes and a 50/50 raffle.



Did You Remember to Renew Your AHYMC Membership?

This is a reminder notice from our hardworking, behind-the-scenes Membership volunteers asking that you please send back your dues (blue membership form) and sign page 11 of the safety manual. All of this was due by February 29th so most of us have already sent it back. But, if you haven’t, please attend to it.

Thank you!



We Need S'More Volunteers Just Like YOU!

As I thought about how best to say "Thank You" for all you do for National Volunteer week this April 10 - 16, I came across this picture and it made me realize that the best way to say "Thank You" was to say we need S'More just like **YOU**. No matter what role you play for the Auxiliary and no matter how many hours you give in that role or how much money you help raise, it takes each and every one of you for our organization to succeed and move forward.

Thank You for all you do and **Happy Volunteer Week!**

Kathy Viergutz, Community Service Coordinator

Community Health and Education Report

By Gloria Bonnicksen, North Central District CHE Chair

Nearly 23,000 workers developed job-related lung disease in 2008, the U.S. Department of Labor estimates. More than 16,000 people die from it each year. But most types of occupational lung disease are preventable.

Construction: Workers who inhale dust in demolitions or renovations can be at risk for lung cancer, mesothelioma, and asbestosis, a disease that causes scarring and stiffening of lungs. Wearing protective gear, including a respirator, when working around older buildings and avoiding smoking can help.

Manufacturing: Factory workers can be exposed to dust, chemicals, and gases, placing them at risk for COPD. In food plants, diacetyl, a flavoring agent used in microwave popcorn, some wines, and fast foods can cause a devastating and sometimes deadly disease. Wearing a mask can decrease risk.

Health care: An estimated 8% to 12% of health-care workers are sensitive to the powder residue found in latex gloves, which can cause a severe asthma-type reaction. Limiting exposure whenever possible can help. Many health care organizations have gone to products that are latex free.

Textiles: Byssinosis, also called brown lung disease, is common among textile workers who make upholstery, towels, socks, bed linens, and clothes. Workers can inhale particles and dust released from cotton or other materials, which can cause significant airflow obstruction. Smoking increases the risk. Wearing a mask and improving ventilation in the work environment can be beneficial.

Bartending: Serving drinks in a smoke-filled room puts bartenders at high risk for lung disease. Many cities have banned smoking in restaurants and bars. Studies are showing that bartenders' respiratory health has improved in these cities.

Baking: Baking is near the top of the list of asthma-provoking jobs, accounting for an estimated 15% of new asthma cases in adults from exposure to flour dust. An asthmatic reaction to enzymes used to alter the consistency of dough, as well as allergens shed by bugs, such as beetles, moths, and weevils, often found in flour, is common as well. Good ventilation and the use of a protective mask can help prevent illness.

Automotive industry: Asthma can be a risk for those in the automobile industry, particularly auto-body repair. Auto spray paints can irritate skin, create allergies, and cause chest tightness and severe breathing trouble. Respirators, gloves, goggles, and ventilation can help.

Mining: Miners are at high risk lung diseases, including COPD, because of dust exposure. Airborne silica, also known as quartz, can lead to silicosis, a disease that scars lungs. Coal miners are at risk for another type of lung-scarring disease called pneumoconiosis (black lung). Years of exposure to coal dust is the culprit. Not smoking and using dust-filtering masks can help.

Transportation: Delivery truck drivers who unload merchandise on loading docks, and railroad industry workers can be at risk for COPD. Diesel exhaust is the biggest factor. Staying out of the direct line of diesel exhaust and wearing protective masks help reduce the risk of lung disease.

Firefighting: Firefighters can inhale smoke and a wide range of chemicals that may be present in a burning building. Although the breathing apparatus does a good job of protecting them, it isn't always worn, especially during the so-called overhaul phase, when firefighters sift through debris to ensure that the fire doesn't reignite. Exposure to toxic materials and asbestos is a risk even after the fire is out, and the International Association of Firefighters recommends wearing respiratory protective equipment at all stages of firefighting.

Resource: "10 Worst Jobs For Your Lungs" by Lisa Zamosky, [Health.com](#) 2016

Crafty Request from HOH



WANTED: Do you have an arts or crafts item/s to donate to our annual October, **Harvest of Holidays** Craft Sale? We are looking for birch bark creations, woodworking pieces, floral arrangements, decorated stationery & cards, quilting pieces and other items that could be sold to benefit the AHYMC Fundraiser.

Please contact Kathy Viergutz, HYMC Volunteer Coordinator, at 715.356.8677 for information.

Public Policy and Education (PPE) Report

Submitted Ruth Johnson

“Advocacy is our number one expected member benefit, and in 2015 we delivered,” (Eric) Borgerding, (WHA President/CEO) told the WHA Board at their December 2015 meeting. “Wisconsin’s health care is among the very best in the nation. We do that by putting competitive interests aside and setting our sights on the larger mission of ensuring that public policy enables our members to continue to deliver the high-quality, high-value health care that our patients, employers and payers expect--and receive--every hour of the day, 365 days a year.”

In 2015, Wisconsin was again recognized by the federal Agency for Healthcare Research and Quality as being among the very best health care delivery systems in the country. That high standard was confirmed a second time in 2015 by the Commonwealth Fund, which placed Wisconsin in the top quartile of states, based on health system performance. That level of excellence would not be possible without collaboration among providers who recognize the importance of establishing partnerships with other community health organizations, and with one another, to meet the ever-growing demand for health care services by an aging population.

Among the highlights in 2015:

- While Medicaid reimbursement in other states was being slashed, WHA was successful in reauthorizing and making the Disproportionate Share Hospital (DSH) program permanent in future budgets.
- WHA was instrumental in enacting legislation that will allow Wisconsin to be the 12th state to join the Interstate Medical Licensure Compact. This will help expedite the licensure process for qualified physicians that use it, and will ensure that physicians can begin to serve patients more quickly.
- WHA developed and saw a package of behavioral health legislative initiatives advance in 2015 that address key reimbursement and access issues.
- WHA vowed to preserve Wisconsin’s model Worker’s Compensation Program and fight against any proposals that would establish a government fee schedule. The Legislature failed to support a bill that contained one. Two bills now are before the Legislature – neither has a fee schedule.
- WHA set new records when it came to political action. Over 1,100 hospital supporters attended Advocacy Day, the conduit raised over \$270,000 and hospital/health system advocates generated over 5,200 contacts to state and federal elected officials.
- The high-quality, high-value health care message continued to resonate with audiences across the state as WHA shared that message at many public forums. In addition, more than 2,800 Wisconsin employers received information from WHA throughout the year that promoted partnerships with hospitals and health systems and pointed out the economic advantages of Wisconsin’s health care as their injured employees return to work and activities of daily living more quickly than in most other states.

“This high level of performance as an organization is only possible because of member engagement. Our members are our core strength,” according to Borgerding. “Voluntary leadership is an asset to any Association that embraces advocacy as its highest priority. WHA members lend their expertise to develop solid guidance on issues that matter. With member support, WHA can anticipate, address and resolve complex issues that could be divisive in less skillful hands.”

Make an impact in Madison for your hospital by attending Advocacy Day March 30, 2016.

Register today at <http://events.SignUp4.net/16AdvocacyDay0330>.

Articles that may be of interest to you can be found on the Wisconsin Hospital Association website. Just click on *Valued Voice* on the left-hand column. If you would like to receive it, I can email each week. Just give me your email address.

Mine is rajohnson3310@gmail.com.



Sunshine Needed?

Please contact Bev Coller if you know one of our members who might need a little “Sunshine”.

Bev can be reached at 715-356-0029 or email her at junebc@frontier.com.



SAVE THE DATE

May 5 - Recognition Luncheon at the White Tail Inn

Areas in need of Volunteer Services

If interested, please contact Kathy Viergutz at 715-356-8677.

- Greeters & Out Patient Surgery Waiting (Contact Kathy for Open Shifts)
- Runner (Wednesday 8:30 – 12:30)
- Wheel Chair Maintenance
- Med Surge Floor Nursing Assistant
- Associate Health Filing and Office Assistant
- Beauty Shop
- One Penny (Shopping Assistant, Exercise Assistant, Resident Assistant)
- Hand Craft Members



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