

# Mercy Matters

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Healthy News for a Healthier Community from Mercy Medical Center

## Bigger, Better, Faster. Mercy Invests in Advanced MRI System

A more reliable diagnosis and a faster, more comfortable appointment: That's what Douglas County residents will experience with Mercy Medical Center's new magnetic resonance imaging, or MRI, system.

Mercy recently became one of the first medical centers in the West to acquire the most advanced MRI technology available — a GE Medical Systems Signa 1.5T TwinSpeed.

"This new MRI system strengthens our commitment to providing the most advanced patient care with cost-effective technology," says Ed Cox, Mercy's imaging director. "It provides us with state-of-the-art MRI imaging capability. Now, with the system's cardiac capacity, we may actually see patients from other communities coming to us for exams that they cannot get in their local facilities."

MRI technology uses finely calibrated, high-power magnets and radio-frequency waves to create pictures of the human body's internal features. Doctors use the images to help diagnose



Images from Mercy's new, patient-friendly MRI



it, radiologists and technologists can perform magnetic resonance angiography — the process of imaging inside the veins, arteries and other blood vessels. Other procedures now available using the new system are head MRI, which can be used to determine if someone has had a stroke, and cardiac MRI. The new system can effectively capture clear images of the head and brain, bones, chest and abdomen.

In addition, the system has a wider entrance, which can help alleviate claustrophobic feelings and allow patients to stay in contact with technologists throughout the scanning process. Its advanced magnetic capabilities and streamlined design also significantly

speed up exams, which is good for the hospital as well as the patient.

The new MRI joins Mercy's state-of-the-art GE LightSpeed CT scanner, which uses low-level X-ray beams to capture cross-sectional images of the internal body. ▲

## Rising To The Challenge: The rising cost of health care is challenging providers and patients alike

From the talking heads on the nightly news to the waxing politicians on the stump to the average American at the coffee shop, everyone seems to have something to say about the cost of health care.

Problem is, even with all the talking, only part of the story is getting told. Anyone who has a television, reads a newspaper, or has taken a recent trip to a health care provider can testify that the cost of care has risen precipitously over the past couple decades. But few know why, and even fewer know where all that extra money is landing.

If you guessed in hospitals, you're already down one strike. Consider this: In 2001 nearly half of all American hospitals will be operating in the red. Two-thirds of the nation's hospitals are so financially feeble they can't finance the purchase of the new technology essential to survive.

In Roseburg, Mercy Medical Center has been fortunate enough to keep its head above the rising tide; however, the financial pressures facing the health care industry aren't going away. Assuring Mercy is well-prepared to meet the future health care needs of Douglas County residents will demand continued efficiency and creativity.

So what are the factors that are forcing up health care costs? And why, given the growing costs, aren't health care providers swimming in black ink? Here are four good reasons:

### 1. Medical technology is expensive . . . very expensive.

Patients demand — and, we believe, deserve — the best technology that modern medicine has to offer. That comes at a very steep price. In addition, Mercy's 24-year-old facility is beginning to show its age in many areas. The hospital has planned for

a major renovation/new construction project to better serve patients. The cost of expanding and maintaining a facility that is able to meet our community's needs well into the future: \$40 million.

### 2. Employment costs are soaring.

The number of people pursuing careers as nurses, technologists, and other skilled health professionals is dramatically decreasing, and hospitals are feeling the pinch. The lesson of Economics 101 is that when demand exceeds supply, prices — or, in this case, the salaries of health professionals — rise. At Mercy, we offer very competitive wages and benefits to assure we don't lose our outstanding professionals to higher paying jobs and to help us attract the best and brightest people to fill our vacancies. That dedication to outstanding patient care requires an enormous financial commitment.

### 3. Insurance payments seldom cover the cost of patient care.

The reimbursement Mercy and other hospitals receive from Medicaid (the state welfare program), Medicare, and most private insurers for caring for their patients typically falls far short of the cost of providing that care. Over half of Mercy's revenue comes from the Medicare program, and the government reimburses hospitals only about 48 cents on the dollar for that care. Fewer Medicare dollars mean smaller hospital reimbursements. As Douglas County's senior population continues to grow, Mercy will be treating more and more Medicare patients for fewer and fewer dollars.

### 4. We're living our mission.

For nearly a century, Mercy's mission has been to provide care for all in need, regardless of their ability to pay. Living that mission by providing



A shortage of outstanding health professionals continues to drive up salaries.

charity care to the uninsured, by caring for Medicare patients whose reimbursements don't cover the cost of their care, and by caring for other under-insured patients, costs Mercy more than \$1 million each year.

If the quest to thrive in this environment sounds like a struggle, we at Mercy see it simply as another challenge to overcome. It's an enormous challenge, to be sure, but we've faced more than a few of those in our 92 years of service to Douglas County residents. And always, we've emerged a stronger organization.

We currently have plans on the drawing board which, when brought to life, will lead Mercy into an exciting new era of service to our community. We may be facing a rising tide of pressures, but with the support of our staff, physicians, volunteers, board, and community, we have no intention of just treading water. ▲

## An Exercise In Supply And Demand: High demand for health care workers keeps recruiters on their toes

The smaller the supply, the greater the need, the higher the price: What's true for commodities is proving true for the health care work force, and Mercy Medical Center is no exception.

Fortunately, Mercy's percentage of vacant jobs and rate of staff turnover are somewhat lower than the national averages. To keep them that way, however, the hospital and its affiliates spend more time and money on staff retention and recruitment and development of the workforce.

"There are shortages of skilled people to fill positions of all kinds. So applicants can and do demand more," says Denise Dwight, Mercy's Human Resources director. "You have to be aggressive and move quickly in the hiring process, and you have to invest more in retaining existing employees, as well."

While Mercy is starting to experience labor shortages in many areas of the hospital, including pharmacy, coding and information systems, nursing also has felt the pinch, says Fran Martinez, Mercy's vice president of Nursing Services.

"There are fewer young people coming into the nursing profession in proportion to the need, and that's creating competition for new graduates," Martinez says. "At the same time, we're



Long-time Mercy Behavioral Health nurse Carolee Harbour (right) discusses patient care with trainee Twila Keith, a UCC nursing student.

seeing sicker patients and an aging population."

Instead of feeling defeated by health care workforce trends, however, Mercy is taking action. It has convened a recruitment and retention committee to step up staff development and recruitment efforts and explore other changes. And the committee's efforts have paid off: As a result of a partnership between Umpqua Community College and the hospital, a new preceptor program, and persistent on-campus recruiting, 25 of UCC's nursing program graduates signed on with Mercy this spring.

"The efforts have had a positive impact on our recruitment results," Dwight says. "We have developed a strong team that includes unit directors, educators and the hospital's human resources staff."

As new hires begin work, Mercy is making sure they have the support they need to succeed and stay put. The hospital is paying higher wages to experienced nurses to be preceptors — mentors — to the novices during their first months on the job. Mercy nurses also act as preceptors to UCC nursing students.

"Compared to what new nurses were used to in school, they can be very busy the first six months they're on a hospital floor. It can be overwhelming," says Tammy Thiems, R.N., Mercy's nurse educator. "So our preceptors work alongside them and help them learn organizational skills, how to work effectively with other departments, and tricks of the trade."

Mercy also has issued across-the-board pay adjustments for its nursing staff in order to stay competitive. The hospital pays benefits to both full- and part-time employees and strives to accommodate scheduling needs as well. Martinez points out that, like the rest of the nation's work force, the hospital's staff is aging.

"Nursing is a physically hard job. At some point, working long days can become very difficult for the older nurse," she says. "But we don't want to lose our most experienced people. So we have to look at varying shifts."

With other health care facilities offering impressive sign-on bonuses, particularly for experienced clinicians, Martinez and Dwight say that paying attention to their employees' needs is critical to keeping them. By assisting with tuition, fees and travel expenses, Mercy encourages its



UCC nursing student Becky Tharp practices patient care skills during a rotation at Mercy Behavioral Health.

employees to refresh skills and pursue advanced training that will allow them to fill higher-paid specialty positions. The hospital also regularly offers staff development workshops on site.

"Employees like to be recognized and have opportunities to grow, and when they see that you've made a commitment to them, they commit to you," Dwight says.

So far, the efforts of Mercy's recruitment and retention committee have kept severe staff shortages at bay, but they do have a price. Aside from the direct expenses of additional and higher salaries, bonuses, tuition, travel, advertising job openings and keeping benefits competitive, there are hidden costs to expanding and enhancing a labor pool. As beneficial as it may be in the long run to mentor students and new hires, for example, such programs can reduce productivity in the short term.

"It seems like we're making a much bigger investment in employees," Thiems says, "but it's making Mercy more competitive, and I think it will pay off in the long run."

Dwight and Martinez agree and say the hospital is committed to continuing to look for ways to enhance the working environment at Mercy. ▲

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investing  
in people,  
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