



MEDHOST®

A 911 Healthcare Crisis:

How to Save a Rural Hospital from Closing

A MEDHOST Case Study

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“911, what’s your emergency?”

“Our hospital is closing.”

Words that hundreds of rural facilities today fear, but never hope to hear.

What does it take to save a community hospital tasked with the care of 4000 plus people?

Funding and operational support from outside investors? An impassionedly dedicated hospital staff? Unconditional support from city officials and government representatives? Outpourings of love, support, and hope from a tightly-knit community? A Christmas miracle?

As seen through the lens of Lakeland Community Hospital in Haleyville, AL—a rural hospital facing closure; a small-town facing devastation—it takes a little bit of everything, and a whole lot of care and commitment.



The Patient:

**Lakeland Community Hospital,
Haleyville, AL**

- 49-bed Acute Care Hospital
- Founded 1969

Patient History:

Sole Hospital in Winston County

Only 5-Star CMS Rated Hospital in AL

Level III Trauma Center

November 17, 2017 – A Shock to Their System the Week Before Thanksgiving

Just a few miles to the east, the colors of Bankhead National Forest are beginning to pop with shades of orange, red, and yellow—soothing tones that provide a bit of warmth with the crisp autumn breeze. In the small town of Haleyville, Alabama people busy themselves with holiday plans. Neighbors and friends debate the upcoming football rivalry pitting Auburn against Alabama. Children wait in anticipation for fall break to finally arrive.

NOVEMBER						2017
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

However, there is a different air of anticipation in the conference room at Lakeland Community Hospital. The hospital owners, who are rarely seen meandering the halls of the hospital, have just called a special meeting with all department heads. Judging by the mood in the room, Megan Welborn, Director of Imaging Services, could tell the news was not going to be good.

In the hours that followed, surrounded by motivational posters touting teamwork and fortitude, the owners announced that effective December 31st, the hospital would be closing its doors. Those present in the conference room, one that resembles more of a fellowship hall than a business office, were overwhelmed with the impact of the moment.

“Tears just started rolling down my face. I was just in shock,” said Welborn. “The first thing you think about . . . my family, my job . . . what are we going to do? What’s the community going to do? It was just a shock.”

At the time of unimaginable announcement that the hospital would be closing, Welborn had two small children to care for at home—a one and three-year-old. Just recently, another three-year old was flown into the emergency room at Haleyville, then moved to the ICU at the Birmingham Children’s Hospital. Without the Haleyville emergency department and helipad, that child probably would not have made it.

Thinking of her own three-year old at home, Welborn asked herself, “Do I want to live in a town that doesn’t have a hospital?”

Just a few miles down the road, Whitley Fowler, Lakeland's then Assistant Lab Manager, happened to be visiting her grandparents with her brother Jake, who also works at the hospital as an ER nurse. Little did she know, that day she would be receiving the shock of a lifetime.

When her lab manager called to notify her that the hospital was closing, Fowler's first experienced a moment of disbelief, followed by the painful reality of the situation. In a little over a month, she and her brother would no longer have jobs and her grandparents would no longer have easy access to care.

"It was like a bad dream. A bad shock," recalled Fowler. Her first thoughts going to the community and what they would do without a hospital.

Her lab manager let her contact other colleagues who all had similar reactions to the news. However, her grandparents were confident and steadfast in their belief—the hospital wouldn't close.

The historical "Home of 911," Haleyville could not be without a hospital. The potential crisis caused by the closing is framed by conversations with Lakeland staff—most who have spent their entire lives in Haleyville—community leaders, and rural healthcare advocates. Their experiences and efforts combined tell the story of a hospital at risk, a vigilant community, and the measures it takes to ensure rural health sustainability.





Diagnosis: Severe Community Trauma – Life Threatening to People and Economic Viability

There is historical precedence for the indomitable spirit of this community. It is a vein that runs through the entire town of Haleyville and the surrounding county. During the Civil War, in opposition to the Confederate States of America, Winston county “seceded” from Alabama to form the Free State, or Republic of Winston. If the town’s ancestors could stand up to state secession, they could fight to keep their hospital open.

Why Haleyville Needed a Hospital

Patient Care

The immaculately clean and well-kept 50-year old facility stands as the sole hospital in Winston County. The next closest emergency room is anywhere from 45 minutes to an hour away by ambulance—a long drive for someone in need of critical care.

Whether it’s preventive procedures like a mammogram, or critical emergencies, patients living in rural areas should not have to suffer because their home is not in an urban setting.

Economic Development

The hospital employs close to ten percent of the town’s working population and plays a critical role in fostering growth and attracting new business.

“Our community had to have medical care . . . we needed the emergency room, that was the most critical thing,” stated Haleyville Mayor Ken Sunseri. “Secondary, economic development . . . you can’t recruit an industry or a business if you can’t provide healthcare.”

Not only would attracting new business become a challenge, but without a nearby hospital, companies currently employing residents would see an increase in workers’ compensation insurance rates. The loss of a major employer would also put a huge dent in municipal funding previously gained through Alabama’s employment tax.

Treatment: The Healing Hands of a Community, Healthcare Partners, and Hospital Staff

First Responders: The Community

Like a true first responder for a community facing a critical emergency, Mayor Sunseri stepped up in a courageous way.

Sunseri has lived in Haleyville for 44 years. His father-in-law was mayor when the hospital was constructed in 1969. If there was anyone who knew how vital the hospital was to the community, it was him.

When calls from shocked and concerned citizens began to pour into the mayor's office, he was quick to action. After reaching out to officials from neighboring towns and receiving advice from rural health advocates, the city council concluded they would need to form a healthcare authority.

However, there was another problem that arose. They needed to figure out where they could find the money and how they could organize the purchase in less than a month.

Formation of the Haleyville Healthcare Authority

Finally, some good news!

Typically, hospitals are given eight to nine months to manage a potential closing. In this case, Lakeland was given a mere six weeks. Once it was decided the city would purchase Lakeland, ownership agreed to keep the hospital open for another 30 days. Yet, the decision was not an immediate remedy because it only gave Sunseri and the hospital staff an extra month to come up with a plan to finance the purchase.

Further complicating matters, the hospital had assumed a large amount of debt over the years. Some vendors had not been paid going on nine months.



Ken Sunseri, Mayor

In a city council meeting attended by more than 120 people, including state senators and legislators, as well as federal officials, a solution was born. With amazing buy-in from the citizens of Haleyville, it was decided that one percent sales tax increase would go towards financing the hospital and sustaining the its growth.

In addition, both members of the state and federal government were essential in tracking down programs that would aid the city of Lakeland in their healthcare authority bid.

Ensuring profits and long-term viability would take two and a half years and close to \$5 million. To accomplish this, they would need help from investors and an experienced hospital management entity that could guide the business-end of recovery.

At this critical time, while faced with another roadblock, Bappa Mukherji and the Java Medical Group launched into action.



An Investment in Rural Healthcare

Bappa Mukherji, the now CEO of Java Medical Group was also in attendance at the city council meeting. He had learned about the crisis at Lakeland through a colleague and was asked to help.

After reaching out to Haleyville representatives and the previous owners, Mukherji travelled south from Nashville to visit the hospital and attend the council meeting. In that meeting Mukherji was a key figure in helping to devise a plan to fund the hospital—the preface to a more prolific partnership down the road.



pride in the hospital.”

Passing a nursing station on their way to the elevators they noticed a bulletin board decorated with paper holiday lights, a Santa hat, and two scrolls rolling down towards the floor. One scroll read: “To Santa: All we want

for Christmas is to save Lakeland, Love 3rd Floor Nurses. This small detour, that was enough to inspire Mukherji and his partner to fully commit.

In the next two weeks they created a plan to keep the hospital open. Along with the sales tax increase, the plan also required an expansion of services, compromises with vendors as well as surrounding area hospitals, but most importantly, a huge commitment from the staff.

In an unprecedented display of comradery, every hospital who had extended a job offer to Lakeland employees agreed to hold those offers for 30-days, with no extra incentives.

MEDHOST pitched in by offering to take over Lakeland’s central business office functions and creating a process for fiscal recovery that included a payment plan for outstanding bills.

However, this holiday miracle couldn’t be pulled off without the hospital employees. With competing jobs offers tabled and vendor agreements concluded, the responsibility now lay with Lakeland staff.

“The hospital staff didn’t disappoint,” stated Mukherji.

“Through the end of December and all the way through January, no one complained, people worked double shifts, five or six days in a row; did everything they could.”

A Hospital Family and a Holiday Wish

Lakeland is home to many staff members who have lived in Haleyville their entire lives. Some of the employees have worked for the hospital for close to 40 years. In situations where jobs are at risk, it's understandable that employees would immediately consider seeking out more secure opportunities.

There were a few employees who left the hospital, but to the surprise of the community, many of them committed to stay.

In the months that passed, those who stayed at the hospital would ride a rollercoaster of emotions. In the end, each one of them displayed an uncanny belief in their community, unwavering faith, and a pure determination to keep the hospital open that would make the Free State of Winston proud.

"I wasn't going to look for another job," said Welborn. "This is my home . . . Any department could have made the decision not to stay and it would have been devastating for the hospital. I am proud of all the people who put in the effort."

Welborn's imaging department had been whittled down to three people. Each of them worked day-in and day-out, often spending two to three nights a week at the hospital away from their families. A sacrifice they gave for almost two months, their team was dedicated to making sure the patients received the care they needed.

In comparison to Haleyville residents, the hospital staff had a unique perspective in the fact that they could easily grasp the bigger community picture—lives saved, plus the economic impact.

Gerita Rye was 9-years old when the hospital was built. The Director of Safety, Marketing, and Physician Recruitment can't recall a time when the hospital wasn't there—for her it had always been an essential focal point of their community.

"You need good schools and a hospital to bring in an economy . . . without the hospital it would have been devastating to our town," stated Rye.

In conjunction with the tireless efforts of Mayor Sunseri and the hospital staff, community support began to pour in. Stories of their combined successful efforts and lives saved by the hospital began to surface.

"Without the hospital this town would have become a ghost town," said Fowler. "But we all came together, we stood our ground."

Thanks to the unyielding efforts of hospital staff; the community; and rural health advocates like Java Medical Group, MEDHOST, and other area hospitals, the 30-day extension turned into 3-months. Two weeks before Christmas, it became clear the hospital would survive. The staff would get their Christmas miracle after all.



The Road to Recovery: Lakeland Today

Lakeland's current COO, Ashley Pool, is a figurative bridge between the small Alabama community and the new management in Nashville. With a background in nursing that extends from Vanderbilt University to the patient bedside in rural Alabama, she provides a unique outsider-turned-in perspective. The sense of dedication and family fortitude that was so apparent during her recruitment was one of the key reasons Pool decided to accept the job.

When she walks the well-kept hallways of Lakeland Community Hospital she sees an empowered family of colleagues focused on working to create growth.

"Just in speaking with the people here, it became really obvious that failure was just not an option for them," said Pool. "The word is not even part of their vocabulary."

In cooperation with Java Medical Group, Pool is working on adding new services to Lakeland. She is also working alongside other departments to bring on specialists and institute new processes designed to build more efficiency

into the hospital and elevate the level of patient care.

Pool refers to this three-month battle as a "textbook example" of what it takes to save a rural hospital—a lesson that should be taught in healthcare management courses and shared with rural hospitals nationwide.

There are still battles to be won and challenges to be faced, but almost a year later Lakeland is still making progress towards recovery. Mukherji notes the hospital is still in the early stages of its business management plan, but with the right people and the right services, everything should fall into place.

"This wouldn't have happened without some tremendous leadership . . . it came from the mayor, it came from the city council, it came from the people that work in this facility," stated Mukherji.

Lakeland is open for business, and both the staff and community can tell things are better than before—better than they have ever been.

The Challenges Facing Rural Health

A story not isolated to Lakeland—hospitals in rural communities across the country are struggling to keep pace with changes in healthcare. Constantly evolving legislation and shifting payment models are among rural health's top barriers. While many of the innovations spurring healthcare forward come out of the rural experience, those same facilities are closing at outstanding rates.

Along with policy and payments, the NRHA (National Rural Hospital Association) states that the battle for rural health in America has just as much to do with the internal factors—social determinants—as it does external ones.

For the 60 million plus people who call rural America home, the means to easily access the care they need often does not exist and their environments may do little to support healthy lifestyles.

Aged travel infrastructures and workforce shortages are difficult to remedy without a wealth of capital. Social barriers that may include increased mortality rates,

rampant opioid abuse, and a high percentage of uninsured patients put even more stress on rural hospitals.

Even more critical, rural hospitals represent essential community centers that not only strive to keep populations healthy, but also act as structures for economic support.

NRHA calls the hospital the “beating heart” of a rural community. Without the circulatory support of a hospital, many of the small towns dotting the American landscape may sadly fade away.

What does it take to revive the beating heart of a rural community and save it from its own 911 emergency?

Empowered people from different walks of life working together, from healthcare industry leaders and government officials, to the third-floor nursing team. A collective of people who understand that simple access to quality healthcare has incredible value for those living in remote areas. Access to healthcare helps support rural communities and plays a vital role in their economies. It's a battle being played out across the fabric of America and a miracle worth fighting for.



About MEDHOST

MEDHOST has been providing products and services to healthcare facilities of all types and sizes for over 30 years. Today, more than 1,000 healthcare facilities are partnering with MEDHOST, and are enhancing their patient care and operational excellence with its clinical and financial solutions including a fully-integrated EHR solution. MEDHOST also offers a comprehensive emergency department information system with business and reporting tools. Additionally, its unparalleled support and hosting solutions make it easy to focus on what's important for healthcare facilities: their patients and business.

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