

The Local Council of Women

President's Message

Dear Members,

It has been a busy and eventful third quarter for LCW. As we approach the end of the year, I'd like to provide a brief recap and a look ahead to the year-end annual meeting.

LCW sincerely thanks Brian Shockney and his team at IU Health for arranging for us to take a guided bus tour of the new Hospital and Regional Academic Health Center at our third quarterly meeting on September 18. It was great to see the progress being made on the site, and to have a first-hand account of the layout of the facilities and the expectations for its ultimate completion in 2021. We were privileged to be the first such tour and are thankful to Brian and IU Health for making it happen.

The Bloomington Health Foundation, along with several other organizations, including The City of Bloomington, Monroe County Health Department, United Way, and IU Health, has recently initiated an effort to provide the "Aunt Bertha" communication portal for our community. The LCW board approved a \$2,500 contribution to partner with the Foundation on this program, and we are proud to be a co-sponsor of this important resource. Aunt Bertha's mission is to make human service program information more available and accessible to those in the community. It will provide a central place where people can go to search for and be connected with health and social service resources, and it will be updated regularly. This directory provides a significant advantage over the paper directories of the past, which often were out of date by the time of printing. Getting access to care, referrals, and overall information about services that are available in the community has always been a challenge, and improved connectivity to such information has been one of the areas identified by our board as a point of emphasis throughout the year. We think Aunt Bertha can and will be a tremendous resource and asset to the community in the future, and we are happy to be a part of making it available.

The contribution towards Aunt Bertha is part of our overall philanthropy objective this year. Other causes for which LCW advanced contributions throughout the year included "Project Stay," which focuses on suicide prevention, the South Central Indiana Kiwanis Balloon Fest, and the Nurse Family Partnership program.

LCW's annual meeting, which also represents the final quarterly meeting of the year, will take place on November 21 at 6:00 pm in Lamkin Hall at Ivy Tech. We look forward to and are proud to award our LCW scholarships that evening. We will present our Cecilia Wahl scholarship of \$2500 and four other scholarships, each in the amount of \$1500, in partnership with the Bloomington Health Foundation. We thank BHF for their support of our scholarship program again this year. We also want to thank our members who have so generously donated to the scholarship program, and we hope to see you at the annual meeting for the scholarship presentations and some good companionship.

Ben Niehoff

President

Local Council of Women — Your Voice for Community Health Since 1897



The Local Council of Women

ProjectStay and Suicide Prevention Highlighted at LCW's First 2019 Quarterly Meeting

LCW's first member meeting of 2019, held on April 17 at St. Mark's church on the Bypass, was opened by Vanessa McClary with a door prize drawing, leaving Ben Niehoff the lucky winner of an infusion bottle donated by the South Central Indiana Kiwanis club.

Vanessa then introduced Michele Martin Coleman, director of ProjectSTAY and a SafeTALK trainer as recognized by the American Foundation for Suicide Prevention, whose talk, "The Titanic: Power to Prevent Suicide," discussed how to recognize warning signs and delineated techniques to aid in suicide prevention. Citing the film Titanic, in which a caring and practical bystander convinces a young woman not to throw herself overboard, Michele explained it is important to understand that "the brain of a depressed person has lost its executive function. People who commit suicide think differently in the moment." If they can be deflected in that moment, they may be able, with help, to combat their depression and suicidal thoughts. She suggested trying to get them to think of something else.

In general, Michele said, one out of every five persons is depressed. Someone in a suicidal trance thinks nobody cares, and this can happen in schools, work places, and in all kinds of public spaces, but often nobody pays attention. She urged listeners to "say something when you see it" and "intervene when you see someone is depressed, and help them in that moment, because it's usually just a moment." Unfortunately, when someone takes her or his own life, there is a good chance that individuals among their friends and family will do so, too.

Michele suggested asking someone who appears to be despairing, "you aren't thinking of taking your own life, are you?" and then doing something to let the person know you want to help. Ask what is going on in the person's life and listen to what she or he has to say. Then stay with them. Sometimes using humor and telling them that this bad time won't last can be helpful, as can even telling them that a consequence of their suicide could be that others in the family might take their own lives, too.

Michele said that Bloomington does not have the resources to handle the number of people in this area who are depressed. There are not enough therapists, with a great need especially for those who will respond immediately. There is also a need for volunteers who can offer help.

Along with other volunteers, Michele serves as a catalyst for Project STAY. Because persons who have lost a loved one to suicide are 1,000 times more likely to take their own lives, Project STAY's caring volunteers work to provide training, support, and resource information to help people choose to STAY, rather than take their own life. For more information, contact Michele at 812-322-1500 or mmartincolman@gmail.com.

[Ed. note: At a later board meeting, LCW agreed to fund suicide prevention signs that will be located in places such as bridges and the tops of high garages, in an effort to aid Project STAY.]

Following Michele's talk, attendees heard about developments at IU Health and at IUH Bloomington Hospital (IUHBH). Teri deMatas, IUH Vice President of Marketing and Community Relations for the South Central Region (SCR), reported that a change from a rules-based to a values-based organization is well underway, adhering to the vision of leading a transformation of health care to make Indiana one of the healthiest states. The core values that have been identified – **excellence, team, compassion, and purpose**—resonate with the staff, who are striving to provide the best care possible for patients.

Bruce Wade, Vice-President for Human Resources for the SCR, explained that the value of **compassion** implies using kindness and empathy to try to make the best decisions.

Chief of Staff at IUHBH Wendy Hernandez recounted that a new mother was helped by a high school intern at the hospital who was guided by the **purpose** of helping others by opting to work in the healthcare field.

Alan Biggs, SCR Chief Operating Officer, said the staff's thorough preparation for Little 500 weekend, with the shared expectation of putting in extra hours, illustrated the concept of **team**.

Teri noted that **excellence** was embodied in the experience of a young man who, after multiple heart attacks, developed a rare pain syndrome. To improve his condition he worked with Dr. Rob Stone for two years, with no use of pain medications but lots of talking and rehabilitation, until he could walk again and even go on to learn computer skills.

Wendy reported that the shared values are listed on "huddle boards" in all departments, where staff meet at least twice a day to discuss how the shared values are undergirding their work.

Glenda Deford, a new LCW member who lives near Bedford, said she hopes the SCR staff will be able to use the values to ameliorate the lack of physicians who will accept new patients in her area. She said it would be very helpful if people could know whom to contact to find a welcoming physician.

LCW Supports Aunt Bertha

As Ben Niehoff reported at the beginning of this newsletter, LCW is partnering with the Bloomington Health Foundation and several other local organizations to support access for the community to Aunt Bertha, a national database that offers an easier way to find healthcare programs and to connect to them electronically and directly. It was started in 2010 by Erine Gray, after his mother had experienced a confusing and sometimes intimidating process of navigating for care when she contracted a rare brain disease. Gray has said that “the name Aunt Bertha came from this idea of the zany but wise aunt a lot of us have, who gives us great advice and a helping hand.” The mission of the project is to “connect people in need and the programs that serve them, with dignity and ease.” Over the last decade, the database has become the largest network of free and reduced-cost programs available in every ZIP code in America.

Gray explains that data curation and maintenance is the project’s biggest investment. The Data Operations Team, based in Austin, Texas, is the company’s largest department. Its main task is to research information, entering new programs and responding to changes across the country with updates. Although it would be easier and cheaper to rely only on technology such as robots, they have humans doing all the work, because they consider it the only way to ensure that people in need get help simply and quickly.

Aunt Bertha serves a broad population outside of just healthcare by partnering with coalitions, governments, education establishments, residential communities, prison systems, and more. Gray cites the example of a longtime customer, the New Jersey based Camden Coalition, which is “advancing complex care by implementing person-centered programs that address social barriers to health,” and which recognize the importance of doing so very early on.

That the number of people searching for help on Aunt Bertha has been rising steeply since it was initially made available seems to indicate it is having a positive impact. Over two million people are now using it and all will continue to have access to it; the intent is that it always be open and free to the end user.

Erine Gray, the founder and CEO of Aunt Bertha, has worked on business and technology consulting projects for over 12 years. At the Texas Health and Human Services Commission he was involved in a project responsible for administering the application process, for which he delivered more than 40 software and operational improvements that saved over five million dollars annually in operating expenses. Gray studied public policy at the LBJ School of Public Affairs at the University of Texas and has a BA in Economics from Indiana University. He is a 2014 TED fellow.

[Ed. note: This information was mainly derived from an article “5 Questions with...” by Idexter, in a September 19, 2019 news release from the Bloomington Health Foundation. It can be accessed at <https://bloomhf.org/news/5-questions-with-erine-gray/>.]

LCW Again Supports the SCI Kiwanis Balloon Fest

The South Central Indiana Kiwanis Club’s annual Balloon Fest this year celebrated the 80th birthday of the movie ***The Wizard of Oz***, featuring such attractions as a performance of the story by wooden marionettes and a balloon from North Carolina that was decorated with Oz characters and piloted by a woman.

The Local Council of Women was involved with the event, as it has been since its inception five years ago, as a way to develop ties to the community. Funds raised by the Balloon Fest are donated to non-profit service organizations.

LCW again this year sponsored the “5K Run/Walk with the Balloons” event that took place on the beginning evening of Balloon Fest on Friday, September 6. The race started as the participating balloons were rising into the sky, a beautiful sight. LCW funded t-shirts for the event and award medallions for the first and second place winners, both runners and walkers, in each age group. A great time was had by all!



Precision Genomics a Focus of LCW's Second 2019 Quarterly Meeting

At LCW's second member meeting of the year, held on June 18, 2019, in Wegmiller Auditorium of IUH Bloomington Hospital, attendees learned about precision genomics and received updates on IU Health developments from five IUH South Central Region (SCR) administrators.

Oncologist Dr. Laura Lourdes gave an overview about precision genomics, a form of medicine that uses information about a person's genes, proteins, and environment to prevent, diagnose, and treat disease. It helps doctors select cancer treatments that are most likely to help patients, based on a genetic understanding of their disease.



Dr. Laura Lourdes

Dr. Lourdes grew up in Kuala Lumpur and received her medical degree from the National University of Ireland. She moved to Singapore for her next two years of medical training, followed by an internal medicine residency with the National University of Singapore. She then worked at the Johns Hopkins Cancer Center there for a year, before moving to Gainesville to pursue a second internal medicine residency with the University of Florida. After serving in Florida as Chief Resident, she moved to Indianapolis with a Hematology and Oncology Fellowship at the IU School of Medicine. On its completion, she joined IU Health Southern Indiana Physicians in Bloomington, where she leads the Precision Genomics Program in the IUH southern region, in collaboration with the Simon Cancer Center. Dr. Lourdes says that although she grew up in a large cosmopolitan city, she and her Finnish husband love the quietness of Bloomington, where they can raise their two young sons closer to nature. Whatever free time she has is spent "gardening, cooking, baking, and learning Spanish."

Dr. Lourdes explained that precision genomics involves creating an individual treatment solution for each cancer patient. It is increasingly being used in oncology care, especially for patients with advanced metastatic cancer. Conducting tests on a patient as early as possible helps the oncologist to sequence treatment options. A general analysis will produce an understanding of the biology of the cancer. Further testing can help to identify resistance mechanisms as well as treatment possibilities that may be easier to tolerate than chemotherapy, and may open up clinical trial options. It can sometimes also help in identifying the origin of cancers whose cause was unknown. Another incentive to consider this kind of non-toxic approach is that those receiving genomic-guided therapies often live longer.

Molecular profiling can yield prognostic markers such as what might encounter resistance and what might work in a specific treatment. It can sometimes also determine whether cancer genes show inheritable mutations, although this is generally not comprehensive. It does not replace FDA-approved genetic

testing, which comprises panel-based testing for 324 genes. The FDA-approved testing is covered by most insurance companies, although there may be a co-pay. Sequencing of the entire genome has not yet been approved by the FDA.

It takes about four to eight weeks for the results of the testing to become known. A team of oncology healthcare workers will interpret them, and they usually also obtain a second opinion regarding how to sequence the systems of care.

Precision medicine is being pursued under the aegis of the National Cancer Institute. It has been effective in a number of cases, but practitioners are still honing their skills and learning a lot from patients. Genomics have been most successful with cancers that have mutations, although about two out of ten cannot yet be treated. Of the eight out of ten that can be addressed, about half of eligible patients decline the treatment.

Clinical trials for patients in this field are ongoing, but there are none in our immediate area. The closest one is in Indianapolis; others are being carried out in Chicago, Ohio, and Tennessee. The long-term outlook for genomics is slowly improving, and increasingly there are more FDA-approved treatments. The hope is that complete genomic sequencing will be approved soon, because it could lead to more and better treatment options.

Dr. Lourdes enjoys practicing oncology, because it is continually changing, always with new things to learn. As well, the number of patients being seen by IU Health is growing: for 2018 the projected number of patients was 48, but they actually saw 60-70. In 2019 that number may climb to 100. Precision genomics is a very promising approach to making cancer treatment more effective and easier to tolerate.

Beginning the IU Health updates, SCR Vice President Bruce Wade gave details about the project to identify values common to all the organizations in the SCR. After extensive "reaching out" last November, the values of "purpose, excellence, compassion, and team" were determined to underlie the institutions' mutual mission to provide "the best care needed to make Indiana the healthiest state." In May 2019 they began a program to recognize staff members who practice these values.

Chief Operating Officer Alan Biggs has been working with teams of clinical staff, physicians, and business leaders to identify how to make the new hospital an optimal place for team members to work and deliver care to patients. They have been looking at a number of different areas and deciding how best to address them, with the result that 250 projects are currently underway to achieve this goal.

Biggs also noted that work at the construction site for the new Regional Academic Health Center has been progressing well. So far 250,000 person hours have been devoted to it

(Continued on page 5.)

without a major safety incident, an impressive number, as 200,000 hours are considered a landmark in construction. Addressing the building complex itself, Biggs explained that the academic building is the one nearest the highway, and the connector to the hospital will house a cafeteria accessible to those in both buildings. In the new hospital there will be only a few more beds than in the current location, because there will be a better delineation between kinds of patients, such that only those who need to stay longer than 24 hours will require in-patient beds.

Dr. Deuce Lukemeyer, who is the chief representative for physicians in the SCR, reported that the Southern Indiana Physicians group (SIP) in the region is "really on the move," working to optimize the provision of care both at the hospital and outside its walls, to help keep people from having to go there. SIP now reaches from French Lick to Martinsville. As well, IU Health has come to an agreement with the private practice group Goodman Campbell that will enable their neurosurgeons to join IUH and the IU School of Medicine and to base one of their neurosurgeons in Bloomington. Another innovation is a Center of Excellence for Muscular Skeletal Care now located at Creeks Edge Drive in Bloomington, which offers sports medicine, various kinds of imaging, and a walk-in injury clinic.

Chief Nursing Officer Cindy Herrington added that just after the Creeks Edge walk-in clinic opened, her husband broke his ankle and went there to get it treated. He reported receiving such a speedy help, including x-rays, a diagnosis, and a cast, that he was able to go home after only an hour and a half. With regard to the new hospital, Herring noted that it would have a designated critical care unit with 16 beds, as well as a progressive care unit, underscoring IU Health's goal to make things as easy as possible for patients.

During a question and answer period, former LCW board member Maria McKinley asked what the statistics are for SIP with regard to quality of care and patient satisfaction, as she had heard of long waits to get appointments, patients having to go to new locations because their providers had moved, and medical offices losing their labs. SCR Vice President of Marketing and Community Relations Teri deMatas noted that IU Health's market share is growing, and Dr. Lukemeyer added that they know they need to make improvements and are working to do so. They are tracking a number of data points in the SIP offices, including time to get an appointment, and based on the data they will change the way they compensate primary care physicians.

Alan Biggs said that on the hospital side their goal is to keep the focus on patients. They track patient service satisfaction on a

weekly basis, monitor the scores, and try to make improvements based on what has been learned.

Cindy Herrington added that both SIP and hospital healthcare givers are beginning a "Take a Seat" initiative, whereby providers will sit down with patients and talk face-to-face, rather than merely standing and entering data into a computer, so that patients feel their concerns are being listened to and that they get sufficient feedback and information. Another initiative focuses on ensuring the safety of every hospital room by using evidence-based checklists to make sure all equipment, including catheters, is handled properly.

LCW member Dr. Robert Wrenn noted that data entry is a real burden for nurses and physicians and wondered what IU Health is doing to improve its medical records system. Bruce Wade replied that, unfortunately, "there's not a really good one out there." They recently received a statistic that shows improvement on tracking the amount of time physicians spend on data entry. But this is often done after doctors' office hours and even from home, which is too much to expect, he said. IU Health is working with the records company to improve all the procedures. Dr. Lukemeyer added that a doctor in Bedford, who has become very proficient with the records system, is helping others to learn timesaving techniques, while also working with the company on an overhaul. SIP is planning to hire some scribes to help with data entry. Maria McKinley suggested it would be very helpful to have physicians' notes, not just clicks on data options, included in patients' medical records.

Teri deMatas closed the meeting by reporting that the IUHBH Community Health Department is expanding its focus from Bloomington and Monroe County in an effort to address the needs of the entire South Central Region, recognizing that some counties have different needs from others, for example in infant mortality, smoking cessation, and obesity. She suggested that this may offer an opportunity for LCW to reach out in these areas, too.



Save The Date

Thursday, November 21, 6:00 pm

Annual Meeting

Ivy Tech, 200 Daniels Way | Lamkin Hall

After a brief business meeting, we will award LCW's Cecilia Wahl Scholarship, as well as four additional scholarships with financial support from the Bloomington Health Foundation and learn about the recipients. Please join us for an interesting and enjoyable evening!

LCW Enjoys Exclusive Tour to the New Hospital Site at its Third Quarterly Meeting

The LCW member meeting on September 19 began with box lunches at St. Mark's church on the Bypass, before those present visited the site of the new IU Health Bloomington Regional Academic Health Center along the Indiana 45/46 Bypass. President Ben Niehoff reminded attendees that membership renewals are now due, but he added that contributions to support the scholarships that LCW awards each year are welcome, too. He announced that one board member can still be appointed and urged those who might be interested in serving on the board to get in touch with him. He also reminded those in attendance that the Annual meeting will be held at IVY Tech on November 21.

Ben reported that LCW is collaborating with the Bloomington Health Foundation financially and otherwise to support access in Bloomington to a national database of area health-care providers called "Aunt Bertha." This resource offers free access to information about healthcare resources in the community. *[Ed. note: see p. 3 for more about Aunt Bertha.]*

Attendees then adjourned to two busses, one accompanied by Teri deMatas, SCR Vice President of Marketing and Community Relations, and one by Diane Bizzell, SCR Director of Philanthropy, for the short trip to the construction site. LCW was honored to be the first local group to be invited to tour the site. IUH SCR president Brian Shockney, who was instrumental in arranging the tour, greeted attendees in both busses upon their arrival at the site and noted that the new hospital is the largest IU Health building project so far, and probably for many years to come. Alan Biggs, SCR Chief Operating Officer, and Kyle Hardie, SCR design and construction director, both closely involved with the project, then took over from Brian Schockney. Hardie has worked on architecture for IU Health projects for the last 14 years and has been part of the Bloomington project for the past six months.

The site of the new academic/healthcare campus encompasses 70 acres. It can be entered from the Bypass on what will be 14th Street. Closest to the Bypass, the academic building will open for IU classes in the spring semester 2021. It will house medical science, nursing, speech and hearing, social work, and psychology. A connecting link to the hospital will house a cafeteria open to all.

The hospital complex is expected to be ready to welcome its first patients by the fourth quarter of 2021. The IU cross-country course, which formerly occupied a part of the site, will now be located on the other side of a small hill from the staff parking area. In all, 1,795 parking spaces will be available for patients, visitors, students, faculty, and staff.

There will be a great deal of natural light in the Emergency Department to make it feel more welcoming. It will have 45 beds, eight more than presently, and several "sub-waiting" rooms, making the progression of each case easier for the patient. A fully enclosed ambulance bay will accommodate four trucks at the same time, as opposed to the current capacity for two.

Two hundred workers are on the site now; next spring that number will grow to 600, and it is anticipated that by next February or March the building will be fully enclosed. The outside will feature limestone, brick, and concrete. If needed in the future, it will be possible to expand the structure both horizontally and vertically.

The building will have silver LEED (Leadership in Energy and Environmental Design) status, although it will be all electric, because solar energy could not produce the amount of electricity necessary to power all the needed technical equipment. To avoid an outage there will be double power feeds, so that if power is lost on one side of town, electricity can still be fed to the hospital from the other side. The complex has the highest possible rating for sustainability in a healthcare facility.

LCW very much appreciated having a first look at the Regional Academic Health Center. It will be exciting to watch the complex take shape!

[Ed. note: The photo below shows the October 1st celebration of the placement of the final structural beam at the site.]



LCW Financial Report

July 31, 2019

OLD NATIONAL BANK:

Balance on Hand - January 31, 2019

Community Partner Checking.....	\$1,626.03
Business Savings	\$1,126.32
Total	\$2,752.35

Balance on Hand - August 31, 2019

Community Partner Checking.....	\$921.42
Deposits	\$00.00
Withdrawals*	\$704.62
Business Savings	\$1,126.32
Total	\$2,047.74

*Withdrawals

Kiwanis Balloon Fest.....	\$500.00
Slotograf-NiehoffLCW Lunch	\$204.61

Encumbrances for Sept. 2019.....	\$66.26
V. McClary office supplies	

Vanguard

Balance on hand 12/31/2018.....	\$18,342.91
Balance on hand 03/31/2019.....	\$18,951.35
Balance on hand 06/28/2019.....	\$19,315.48

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The **Local Council of Women** **NEWSLETTER**

Fall 2019 Issue

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