

The quilt behind the ambo is by Paducah-based printmaker Freda Fairchild. Printed on it in five languages are the verses of Isaiah 58: 8-11 which end, "You will be like a watered garden." The ambo, altar, presider's chair and crucifix were made for the chapel by Mike Kaufman, a local carpenter.

Women's Center Brings Urban Services to Rural Areas

BY PAMELA SCHAEFFER, Ph.D.

ADUCAH, KY. — Dr. Lisa Lasher was late for her interview. Late and profusely apologetic. She had been in surgery: two endometrial ablations, two hysterectomies, one cervical conization and one unplanned delivery.

The wait was mandatory. As an ob-gyn and a breast cancer survivor who became the founder and director of the Women's Center for Health and Wellness at Lourdes Hospital in Paducah, Ky., this committed, vivacious doctor is at the heart of the story.

After nine months of challenging planning sessions, the centered opened in January in a new hospital wing. The wing includes a new chapel with windows and works by Kentucky artists highlighting two of Paducah's best-known features, water and quilting. Water represents the two rivers, the Ohio and the Tennessee, which merge



Dr. Lisa Lasher, a breast cancer survivor, is one of the visionary forces behind Lourdes' Women's Center.

near the city's downtown. It also refers to the sacred healing waters of Lourdes, France, for which the

hospital is named. Quilting, a regional art form, is showcased not only in the Lourdes chapel, but also at Paducah's primary tourist attraction, the National Quilt Museum.

The women's center itself is as non-institutional as a contemporary medical environment could be. The changing rooms feature rich wood paneling, gold curtains and homelike furnishings. Gone are the familiar drab, gaping, gowns. Instead, patients wrap themselves in luxurious, white terrycloth robes, similar to what they might find at a fancy spa.

Lasher grew up about an hour

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outside Paducah, her home now for 16 years. She was just 32 when she learned she had breast cancer. "I was lucky. They caught it at Stage One," she said. Although she was on the staff at Western Baptist Hospital in Paducah at the time, 11 years ago, she went to Lourdes for diagnosis and treatment. "Lourdes was the leader in breast surgery in the region," she said.

She had a sentinel lymph node surgery to determine the extent of the cancer, followed by a partial mastectomy, chemotherapy and radiation. A graduate of the University of Kentucky Medical School, she had been in practice just three years.

"When I was first diagnosed, I didn't do breast surgery," she said. But her own surgery amounted to a call. It became clear to her, she said, that caring for women with breast cancer "was my purpose in life."

"It was a year before I could talk to other people about it. When you're a doctor, it's hard to convert to becoming a patient," she said. But the experience gave her empathy with women suffering from breast cancer, and that became the basis of a dream, one she brought to Lourdes when she joined its staff six years ago. She wanted to open a center focused on women's health. As the dream evolved, planners, who included hospital administrators, physicians and staff, along with representatives of the community at large, began to envision a serene, homelike environment where women receiving mammogram screening could be fast-tracked under one roof to diagnosis and treatment, should any questions or problems arise.

Lourdes, a member of Catholic Healthcare Partners (CHP), is a hospital with 379 beds (and a licensed staff for 279) and serves a high proportion of rural clientele. It is one of the largest hospitals in western Kentucky and draws from ten mostly rural counties - seven in Kentucky, three in Illinois. The region is fragmented, crisscrossed by rivers. Competition comes from hospitals in Missouri, including St. Louis, three hours away, as well as in Indiana and Tennessee.



Sr. Lucy Bonifas, chaplain at Lourdes, chats with Marianne Potina, vice president, mission integration, in a garden outside the new chapel.

"Lourdes has always been known as the charity hospital," said Kelly Nicholls, vice president for strategic development. Marianne Potina, vice president, mission integration, said the hospital prides itself on providing care to all who need it, regardless of ability to pay. At the same time, Lourdes had to ensure its financial stability. "We had to work hard to attract more of the insured people in our area," Nicholls said. "Six years ago, we had nowhere to go but up."

Nicholls went around to area businesses to promote Lourdes and make sure they understood the hospital was part of their insurers' networks. She also became a strong supporter of developing the women's center, which met a big need in the region, she said, and is becoming one of the hospital's strongest attractions.

Although Lourdes had been the first in its region to offer digital mammography, MRIs and stereotactic biopsies, the services weren't well coordinated, Nicholls said. "A lot of our patients had to figure it out on their own." For example, if there was a

suspicious finding on a mammogram, women didn't have ready access to the next steps. "Typically it could take six to eight weeks for people in our market area to go from a suspicious mammogram to biopsy," she said. "This caused needless, unacceptable anxiety. It would never happen in a metropolitan area."

Within a month of the center's opening, with the help of a nurse navigator, patients could go from mammogram to biopsy in four days, and they are sometimes able to get screening and diagnostic interventions, including biopsies, in a single day. "This model isn't unique in urban America, but it's unique in rural America," Nicholls said.

And yet, said Potina, expediting the process may be even more important in a rural area because travel is a major barrier for many patients to getting good health care.

Potina, the hospital's first lay mission leader and a key member of the planning process for the women's center, kept the focus on patients' needs throughout the planning process.



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In this, she had strong backing from Steven Grinnell, the hospital's missionfocused chief executive. "Marianne would reflect the anxiety of the patient, and she kept that anxiety at the center of our conversations," Nicholls said. We had a lot of resistance. The doctors would say they couldn't turn around reports that fast. Everyone wanted to do what was best for the patient as long as it fit into their world. Marianne kept emphasizing patient first, health care team second. Once everyone became convinced the patient had to be in the driver's seat or Marianne wasn't going to be quiet," the vision became clear and planning moved forward, Nicholls said.

In practice, keeping the patient in the forefront depends on Sandra Asa, RN, the nurse navigator, who works closely with lead mammographer Dawn Ramage, RTRM (registered technologist radiology and mammography). Asa has been at Lourdes for 10 years, Ramage for 20. As a steers patients through the medical network, expediting appointments with doctors and technicians and offering resources, from a library equipped with pamphlets and books on cancer and a computer set up with useful links, to ongoing personal support. This includes regular phone calls to patients diagnosed with cancer. "I can make referrals to psychologists, religious counselors, support groups, whatever they need," she said. "I just help them with their journey until they're into survivorship."

Ramage, like Lasher, feels a special call to help patients with breast cancer. Her aunt, now 60, is a breast cancer survivor. She was diagnosed in 1991.

"After that, God said to me, 'This is what you need to do. You need to do everything you can to give these people what they need," Ramage said. And then, in 2009 she was diagnosed with breast cancer herself. After recovering from her own partial mastectomy, she returned to work "more empathetic than before."

In addition to its women's center, Lourdes attracts patients because, like Western Baptist, the other hospital in the region, it is faith-based. The Catholic population of western Kentucky is just 3 percent, Potina said, but people understand "from the heart" what it means for a hospital to be faith-based.

Lourdes was founded in 1905 in downtown Paducah as the city-owned Riverside Hospital. The Diocese of Owensboro bought it in 1959 and invited the Sisters of St. Francis of Tiffin, Ohio, to manage it. They renamed it Lourdes, assumed sponsorship in 1963, and in 1973 moved it to its present site on the city's periphery. In 1982, hospital ownership transferred back to the diocese, and in 1989, the Sisters of Mercy became the sponsors. In 1997, the Sisters of Mercy joined three other Catholic health systems to form Catholic Healthcare Partners.

Today, four Franciscan sisters serve at the hospital, two of them Sisters of St. Francis of Tiffin, Ohio. One of those is Sr. Lucy Bonifas, RN, a chaplain with a long history at Lourdes. She came in 1969 as a nurse, in 1997 took over spiritual services, and then, about a year ago, returned to her first love,

working directly with patients.

Sometimes, she said, patients will recall something she said as a nurse to one of their relatives some 20 or 30 years ago. "I think no one realizes the impact we have on others here," she said "Often I can feel a sense of peace come over a room when I walk in."

As a longtime veteran of Catholic health care — 27 years — the hospital's chief executive, Steven Grinnell, also has a deep understanding of its spiritual dimension. He was the last interview of the day.

"Ask him anything about mission," Potina had told me. "He's very mission-focused."

Instead, when he appeared, and after formalities, I decided to ask instead about margin. "Does the women's center make money for the hospital?"

Without missing a beat, as if to prove Potina's point, Grinnell responded with a question of his own.

"Does it matter?" he asked.

PAMELA SCHAEFFER is editor of *Health Progress*.



Nurse navigator Sandra Asa and Carol Wilson, former patient and Women's Center fan, examine a terry-cloth robe in the wood-paneled dressing area.

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