



HSHS
Sacred Heart
Hospital

The Volunteer Partners newsletter is published three times a year to communicate information of interest and usefulness to volunteers and friends. We welcome all suggestions and comments. You may contact me at 715-225-3978 or email me at Jaci.Fuller@hshs.org Jaci Fuller, Volunteer Partners Newsletter Coordinator.

VOLUNTEER PARTNERS MISSION STATEMENT

In partnership with HSHS Sacred Heart Hospital, the Volunteer Partners will provide compassionate, supportive services for patients, their families and hospital staff; promote community awareness of the Hospital's mission; and raise funds for Hospital needs.

HSHS SACRED HEART HOSPITAL

VOLUNTEER Partners

WINTER 2021



Sandy Anderson, Interim President and CEO,
HSHS Sacred Heart Hospital

HAPPY NEW YEAR!

*Another year has passed
With many changes
And adjustments to make.
Volunteering was on "hold" -
No flowers or calls to take.*

*COVID-19 is the reason
for halls empty and quiet.
Few visitors are allowed.
No volunteers - only staff,
- And masks are required.*

*Now a new year - 2021 -
And a new beginning.
All of the volunteers here
Are wished a Happy
And Healthy New Year!*

- Jaci Fuller 2021



VOLUNTEER PARTNERS



Dear Volunteer Partners,

When you walk through the doors of HSHS Sacred Heart Hospital the walls say what we all feel in our hospital: There is HOPE here.

There is so much hope to be had as we enter the new year. But even before January 1 rolled around, you brought us hope.

Our patients, colleagues and community felt your passion for hope the first week of December with the beautiful Love-Lights event. I want to thank every one of you for pushing through with this event even though it looked a little different this year. Not only did our community need this event, but our hospital did as well. Thank you for finding a new way to bring joy and HOPE to our community.

COVID-19 is still a very real threat to the health and safety of our community, but as I write this, the number of patients hospitalized because of complications from the virus is decreasing and hope is on the horizon in the way of a COVID-19 vaccine. This is an historic time – to go through nine months of living through the complications of a new virus. The virus touched all of us in some way, but now there is hope.

It's important as we continue to go through the process of flattening the curve and knocking down this disease, that we continue to have a positive mindset and really see that glimmer of hope. And then let that hope spread like wildfire! It's been a long time since we've had positive news. This is what we needed.

As always, I want to thank you for your patience and dedication to our ministry. Even if you're not in our hospitals volunteering, everything you're doing from home helps HSHS Sacred Heart Hospital. Wearing a mask helps. Distancing yourself from others helps. Being mindful of handwashing helps. You're doing your part and we can't say thank you enough.

You continue to reveal and embody Christ's healing love for all people through our high quality Franciscan health care ministry. Our hospital continues to be a warm and welcoming place because of you. Thank you!

Sincerely,
Sandy Anderson
Interim President and CEO, HSHS Sacred Heart Hospital

*The heart of a volunteer
Is not measured in size
But by the depth of the
Commitment to make a
Difference in the lives of others.*



A note from your President



Happy New Year, everyone!

As we prepared to celebrate the birth of Christ at Christmas we thought back upon the past year. What we did last Christmas, last Easter, vacations over the summer and all kinds of happy occasions. These events didn't happen for most of us in 2020 as we tried hard to keep ourselves and our loved ones safe and healthy. God wants us to be joyful people so we must think of the good things to come such as the Covid-19 vaccine which is now being given to front-line workers. Also coming are attending church services, long-awaited hugs we can give our families, Sunday dinners with family and friends, dining out at our favorite restaurants. Another huge part of our lives as volunteers is returning to the service we have given, sometimes for years. 2020 required us to have patience, patience and more patience. Better days are coming.

Have a happy and healthy new year!

Kathy Herfel, President (2020-2021)
HSHS Sacred Heart Volunteer Partners

"Remember the past with gratitude. Live the present with enthusiasm. Look forward to the future with confidence."- St. John Paul II

HONOR POINTS REQUIREMENTS

The following are the requirements as of this date for organizations to receive the Honor Points. Each year a certificate is given if requirements are met.

- | | |
|--|-----------|
| 1. Annual reports completed and mailed by the due date..... | 10 points |
| 2. Minimum of three newsletters per year..... | 4 points |
| 3. Two delegates Spring District meeting..... | 6 points |
| 4. Attend WHA Advocacy Day..... | 4 points |
| 5. Two delegates to Fall meeting..... | 6 points |
| 6. Delegates to annual convention (5 points EACH - Max. of 2)..... | 10 points |
| 7. Display at Partners Annual Convention..... | 2 Points |
| 8. Scholarship Program in Health Career Field..... | 4 Points |
| 9. Silent Auction item for convention..... | 2 Points |
| 10. Application for WAVE Award..... | 2 Points |
| 11. Application for Best of the Best Award..... | 2 points |
| 12. Have a designated PPE chair..... | 2 points |
| 13. Have a designated CHE chair..... | 2 Points |
| 14. Dues Paid by 6/30 | |

HONOR POINTS

The Volunteer Partners of Sacred Heart Hospital again earned the Honor Points for 2019. However, due to COVID-19, Honor Points will not be given out for 2020. Requirements are being reviewed by State officials and local organizations will be notified of any changes.
Jaci Fuller

Dues must be paid by 6/30 in order to be considered a member of the Partners of WHA and receive the Honor Points.

Certificate. A minimum of 40 points is required to receive the award. Certificates in the past have been given out at the annual convention. However, in future years, they will be mailed out to the local organizations.

VOLUNTEER PARTNERS



Volunteer Services Manager Notes...

A new year is upon us and I am excited to close the door on 2020 and welcome in 2021. What a year 2020 was! I just remember the end of 2019 and how everyone couldn't wait for the new decade to take us to new beginnings. The excitement of the New Year came and shortly thereafter it went.

This year has brought on many challenges for everyone but I like to focus on the great things that came about this year. I was able to spend more time with my husband and kids this year. We have always been a very busy family. My husband and I both work a second part-time job and our kids are in multiple sports. It was nice to sit around the table and play cards, have meals together again and focus on each other and be in the moment instead of always looking at what the next couple days' events will be and passing each other in the garage as we say drive safe and see you when I see you!

It will be nice to get back to a new normal; seeing my kids play their sports again and living their childhood experiences, having ALL volunteers back to the hospitals, seeing visitors again roaming the halls, and being able to just give hugs again without worrying! I know it was a tough year for the volunteers. Many were not able to return for fear of becoming sick and those that did were faced with concerns with each shift they worked. I respect each and every one of you in the choices that you had to make this year. The colleagues were very grateful for those that stayed during the pandemic and I know that as more of you return, they will appreciate your time and dedication to them and the hospital.

I walked in my office this morning and saw a penny on the floor. I picked it up and placed it on my desk where I will see it every day as a reminder. They say a penny found is a message from heaven and I want to believe that my grandma was sending me a message today to let me know that all will be ok and that 2021 will bring new adventures (hopefully good ones!) and a more peaceful year. I hope you all had a blessed Holiday Season and Cheers to 2021!

Brandy Sikora, Manager of Volunteer Services

Upcoming Events

NATIONAL VOLUNTEER MONTH

April is designated as National Volunteer Month and National Volunteer Week is April 18 - 24, 2021. It began in 1974 when President Nixon signed an Executive Order establishing the week as an annual celebration of volunteering and since then, every U.S. president has signed a proclamation promoting National Volunteer Week.

For more than 82 years, volunteers have been a significant part of the healthcare team at HSHS Sacred Heart Hospital and share a vital role in helping to fulfill the Hospital's mission to provide high quality health services and promote good health and well-being. Volunteers have been active in many areas of the Hospital and accept assignments with dignity, a sense duty and sincerity of purpose.

Thank you, volunteers, for all you do!

2021 ADVOCACY DAY

Mark your calendar for WHA's (Wisconsin Hospital Association) Advocacy Day. It is Wednesday, April 14, 2021. The keynote speaker is Frank Sesno, internationally recognized journalist. This year, WHA has contracted with the professional virtue event platform, LeaderPass, to deliver this event to advocates across the State virtually. The day is being planned, and attendees will have the opportunity to meet with their legislators.

For more information, visit the WHA website. Let your voice be heard!

Gift Shop News



GIFT SHOP NEWS

The Gift Shop is OPEN. We are still asked this on a weekly basis and our answer is always the same, "The Gift Shop is open Monday through Friday from 8 a.m. until 5 p.m." Volunteers have been welcomed back into the hospital and they have been giving generously of their time (as always) to the hospital, colleagues, visitors and each other. At times it feels as if we are self-isolating in the Gift Shop because it is so quiet but we welcome all customers with smiling eyes (due to our masks being on all the time). We are still taking phone orders for patients and delivering the gifts up to the floors. We sell candy to colleagues in 'need,' and catch up with friends we made here in the hospital. Our sales in the shop have been weaker in 2020 but considering what we

went through, we can still hold our head high. We do have new items coming in so stop by to check out the merchandise.

There are changes, there's no denying that, but not all are negative. I've felt healthier this flu season than in others' past due to vigilant mask wearing. My heart is grateful for the friendships I have and the casual conversations with others makes my day happier. And as we move through this next year, I hope to incorporate some of the things I learned during the pandemic-mode to my everyday-mode. Asking, "Are you ok?" and then really listening to the response. Checking in with even your strongest friends more frequently; we all need support. Buy local. I've always been a big supporter of this but those small shops really stepped up with curbside pick-up and great websites so I could shop from my couch. But most of all, be safe. We are following all the precautionary guidelines and I feel safer in the Gift Shop than many other places. This next year has a lot of potential and I hope to see you soon in the Gift Shop.

Jennifer Stuber, Gift Shop Manager



A TIME TO REMEMBER

The Volunteer Partners wish to extend our sincere and heartfelt sympathy to the families and friends of the following volunteers, who will be honored in the TAG (Tuition Assistance Grant) Program: Scott Stagliano, Dora Irvine, Lois Olson, Bernele Schultz, Julia Rohn, Evelyn Mickelson, Edith Weisenbeck and Vera Witte.

Past Events

WELCOMING DECEMBER BABIES

The Volunteer Partners at HSHS Sacred Heart Hospital brought good wishes and cheer to the patients during the holiday season. Christmas Santa hats and stockings were delivered to the babies born during the month of December. The items were contributed by the volunteer handcrafters.



FIRST BABY IN THE NEW YEAR

For the first baby born at Sacred Heart Hospital in the new year, the Volunteer Partners gave a beautiful layette set. In addition, \$100 was given to the parents for the baby. Due to COVID-19, The Volunteer Partners Chair was unable to deliver the gifts personally as in the past years. However, they were presented to the parents by Hospital staff.



Past Events continued

PATIENTS GIFTS - SPREADING CHEER

No one wants to be in the Hospital during the holidays, but the Volunteer Partners brought some cheer and good wishes to the patients at Sacred Heart Hospital. On Christmas Eve Day, December 24, the Volunteer Partners gave each patient in the Hospital an angel ornament and a bookmark with an angel poem, with good wishes for healing and good health in the new year. Due to COVID-19, representatives of the Volunteers were unable to deliver the gift personally. Instead the gifts were put on the meal trays for the patients.

\$7 SALE

The FIRST, and only, in house fundraiser for 2020 was well received by colleagues. With COVID taking a short reprieve around September we were able to sneak in the \$7 Sale before cases went on the rise again. Colleagues were extremely grateful to be able to take part in the sale and get their early Christmas gifts (or just some retail therapy for themselves) of hats, leggings, electronic items, jewelry and MUCH more! With everything priced at \$7, with a few exceptions that were \$10, there were bargains everywhere. With the 2-day sale held on September 24 and 25, the Volunteer Partners were able to receive a commission check worth \$256.50 from PTK Sales. This reflects a 10% commission of the total sales which were \$2565. This is down from past years, but we were grateful to be able to have the sale and gain some funds back into our account. We hope that next year will be better!

LINEN AND BLANKET SALE

With COVID still looming around, Geneva Distributing was able to pull together and offer the Volunteer Partners an online sale this year. Items could be viewed on their catalog site and ordered right then and there. There was an option to have the items delivered to their home for a small fee or they could have them delivered to the hospital for free. They were then instructed to pick up their items from the volunteer office when they were able to. The hot items were of course their 1200 thread count sheets that were priced at \$48 each with many colors to choose from and their Sherpa throw blankets. Some new items this year included their glow in the dark blankets for children or those young at heart and the hooded Sherpa blanket which you would wrap around your back. The sale was held November 6th-12th with total sales at \$2780. The Volunteer Partners received a commission of \$556.06.

DISTRICT MEETING: WEST CENTRAL DISTRICT NEWS

The Spring West Central District meeting of the Partners of WHA is scheduled to be held in Ea Claire, hosted by HSHS Sacred Heart Hospital, District Chair John Tully announced. However, if due to the pandemic, groups cannot gather, the business meeting will be held virtually. New officers will be installed, with Betty Oddo as Chair of the District. The Nominating Committee will present the Chair Elect and Secretary/Treasurer nominations for the coming year.

TAG (TUITION ASSISTANCE PROGRAM)

The Volunteer Partners of HSHS Sacred Heart Hospital are offering three \$1,000 Tuition Assistance Grants to eligible colleagues and volunteers at Sacred Heart Hospital, St. Joseph's Hospital or L.E. Phillips-Libertas Treatment Center who are taking classes in 2021 toward a degree in the healthcare field. Because of the extra demands placed upon colleagues and volunteers due to the pandemic, the application deadline has been extended to March 31, 2021.

Thank you to all of our colleagues and volunteers who have been working under difficult circumstances for many months. We truly appreciate your dedication and resolve at this time more than ever. We hope that these grants will help lighten the load just a little bit for those who will receive them.

The determination of the financial need of each of the candidates, along with their interviews, will be of special importance in selecting the recipients of the grants. Among other requirements, an applicant must have been a colleague or volunteer for at least one year prior to applying for the grant.

For information on how to obtain an application form and other information about the grants, please contact Brandy Sikora, Manager of Volunteer Services at 715-717-7439 or at brandalee.sikora@hshs.org

Steve Werner, TAG Committee Chair

PUBLIC POLICY & EDUCATION

Impacting the High Cost of Prescription Drugs

In November the Governor's Prescription Drug Task Force met to address this issue. The Task Force has responsibility to make recommendations for the reduction of prescription drug prices in the State. Included will be the survey of other states' development, pricing, distribution of prescription drugs, and how these initiatives could be tested in Wisconsin. The committee identified challenges within the supply chain and described state and federal government attempts to gain control over rising prescription drug prices. The committee expressed concern over some "Drug Discount Programs" and how they may be prescription drug sample programs "in disguise" in order to get people reliant on name brand drugs in lieu of lower cost generic drugs. The committee also discussed the 340B program that discounts drugs used by certain disproportionate share hospitals and how some State Departments of corrections are starting to leverage this program for drugs used in the correctional facilities.

Hospitals have a major stake in the work of this task force. A recent study prepared for the American Hospital Association noted that average total drug spending per hospital admission had increased 18.5% between their fiscal years 2015 and 2017. The growth in expenditures per hospital admission on inpatient drugs exceeded the Medicare reimbursement update five-fold during the study period. Hospitals experienced price increases in excess of 80% across different classes of drugs.

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On the Federal front, the House of Representatives will soon consider game-changing legislation that would provide relief to the American public from high costs of prescription drugs. This legislation the Lower Drug Costs Now Act (H.R 3) is named after the late representative from Baltimore, Elijah Cummings, and is supported by Representative Ron Kind. The objective is to lower drug costs across the U.S. A recent national poll conducted by Hart Research also shows that a majority of Americans across the political spectrum support H.R 3. The congressional Budget Office and the Centers for Medicare Office of the Actuary confirmed that H.R. 3 will reduce drug prices by up to 55% and save patients and taxpayers hundreds of billions of dollars over a few years.

Our Wisconsin Hospital Association suggests that for support of this proposed legislation, members contact their legislators and for them to address this in a way that benefits patients and decreases unnecessary costs to all involved.

I Trust that each of you and your Families had a safe and Blessed Christmas and look forward to 2021 with great enthusiasm and positive expectation. Thank you all for your commitment to Volunteerism.

Bill McCullough, State Chair,
webirish5all@gmail.com
Public Policy Education
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Partners of WHA

COMMUNITY HEALTH EDUCATION

COVID-19- CHECK YOUR KNOWLEDGE OF THE DISEASE AND MITIGATION STRATEGY

Covid-19 is a new virus. People with Covid can spread it to others when they cough or sneeze other people near them can breathe in the droplets. The virus is found in droplets from the throat and nose. It can also spread when someone touches something (like a table) with the virus on it. If that person then touches their face, mouth or eyes, the virus can make them sick. Did you know the virus can live on surfaces up to five (5) days like metal, paper, wood, plastics, stainless steel, aluminum, copper, even the fur on your pets?

You are infectious and can spread Covid-19 to others forty-eight hours (48) before you develop symptoms and for 10 days after the start of symptoms or if you have a fever. If you do not have symptoms, you can spread it up to ten (10) days after testing positive. The classic symptoms of Covid-19 are fever, cough, shortness of breath, sore throat, fatigue, headache, muscle aches, runny nose, loss of taste and smell, nausea, and diarrhea. A lot of the symptoms are mild, and a person may only have a few. This is troublesome as many people brush off the symptoms as nothing and continue to work, and travel around the community.

MITIGATION STRATEGIES:

1. Contact Tracing - Identifying interactions the infectious person had with others during their infectious period to see if the other person(s) met the criteria for close contact. The interactions must meet one or all the following criteria to classify as a close contact:

- Direct physical contact (e.g., hugs, handshakes, kisses)
- Within 6 feet (i.e., 2 arm lengths) of the person for fifteen (15) minutes or multiple encounters within a single day adding up to or more than fifteen (15) minutes
- Contact with respiratory secretions (e.g., sharing drinking glasses, food, towels or other personal items, cough or sneezed on)
- Live with the infectious person or stayed overnight at least one night.

If identified as a close contact, the person will be quarantined for 14 days. This means: stay at home—no work, school or public areas; minimize or avoid contact with household Covid-19 person; don't share personal items; wash hands often; wear a face mask around other people in the household and clean high touch surfaces frequently like toilets, kitchen, door knobs and light switches. Even if a close contact tests negative, they need to quarantine for fourteen (14) days as a person could still get sick up to 14 days after the last contact with someone who tested positive for Covid-19.

2. Face Masks - Block respiratory secretions from contaminating others and the environment.

3. Social Distancing - Social distancing, also called "physical distancing," means keeping a safe space between yourself and other people who are not from your household.

To practice social or physical distancing, stay at least 6 feet (about 2 arms' length) from other people who are not from your household in both indoor and outdoor spaces. Social distancing should be practiced in combination with other everyday preventive actions to reduce the spread of COVID-19, including wearing masks. Social distancing is especially important for people who are at higher risk for severe illness from COVID-19.

4. Stay Home - If you are sick with COVID-19, have symptoms consistent with COVID-19, or have been in close contact with someone who has COVID-19, it is important to stay home and away from other people until it is safe to be around others.

5. Limit Running Errands: Only visit stores selling household essentials in person when you absolutely need to, and stay at least 6 feet away from others who are not from your household while shopping and in lines. If possible, use drive-thru, curbside pick-up, or delivery services to limit face-to-face contact with others. Maintain physical distance between yourself and delivery service providers during exchanges and wear a mask.

6. Wash Your Hands - Wash hands for at least 20 seconds using soap and water. Use an alcohol rub that contains at least 60% alcohol when soap and water are not available. Apply enough soap to cover whole hand and scrub front, back, between fingers, rinse, and dry hands.

When to wash hands:

- After blowing your nose, coughing, or sneezing
- After being in a public space
- After caring for someone who is sick
- Before, during and after preparing food
- Before eating
- After changing diapers or toileting a child

- After using the toilet
- After touching an animal
- After touching garbage

7. Testing - A viral test tells you if you have a current infection. It is performed with an anterior nasal swab. An antibody test tells you if you had a past infection. It is performed with a blood test.

Who should get tested?

- People who have symptoms of Covid-19
- Close contact
- Referred by their medical provider

If you test positive you will be isolated for 10 days at home. It requires wearing a mask around other household members, using own bathroom, staying in a specific room e.g. bedroom to social distance from family members and pets, washing hands frequently, sanitizing hard surfaces and not sharing any personal or household items. If you test negative it means you do not have the virus at the time of the test but still take steps to protect yourself.

Summary:

Although the risk of severe illness may be different for everyone, anyone can get and spread COVID-19. Everyone has a role to play in slowing the spread and protecting themselves, their family, and their community. In addition to practicing everyday steps to mitigate COVID-19, keeping space between you and others is one of the best tools we have to avoid being exposed to this virus and slowing its spread.

COVID-19 TESTING: UNDERSTANDING THE “PERCENT POSITIVE”

As COVID-19 outbreaks continue to flare up across the U.S., the need for coronavirus testing remains urgent. Individuals rely on test results to guide their medical treatment and decisions on whether to self-isolate. Public health officials rely on the results to track the pandemic (i.e. caused by an infectious agent that is uncontrolled, spreads rapidly with a high death toll).

What is the “percent positive” and why does it matter?

The percent positive is the percentage of all coronavirus tests performed that are actually positive, or: $(\text{positive tests})/(\text{total tests}) \times 100\%$. The percent positive helps public health officials answer questions such as:

- What is the current level of SARS CoV-2 (coronavirus) transmission in the community?
- Are we doing enough testing for the amount of people who are getting infected?

The percent positive will be high if the number of positive tests is too high, or if the number of total tests is too low. A higher percent positive suggests higher transmission and that there are likely more people with coronavirus in the community who haven't been tested yet.

What does a high percent positive mean?

A high percent positive means that more testing should probably be done—and it suggests that it is not a good time to relax restrictions aimed at reducing coronavirus transmission. Because a high

percentage of positive tests suggests high coronavirus infection rates (due to high transmission in the community), a high percent positive can indicate it may be a good time to add restrictions to slow the spread of disease.

How high is too high?

The higher the percent positive is, the more concerning it is. As a rule of thumb, however, one threshold for the percent positive being “too high” is 5%. The state of Wisconsin's positivity rate is 10.2 %. The City of Eau Claire is 8.7 %. The World Health Organization recommended in May that the percent positive remain below 5% for at least two weeks before governments consider reopening. Places that have low percent positive levels have gotten there by reducing levels of coronavirus transmission through policies restricting social contact, aggressive testing and isolation, and the actions of everyday people to maintain distance. But even in these places, the vast majority of the population is still vulnerable to getting COVID-19.

How can we reduce the percent positive when it is too high?

There are two ways to lower the percent positive: Reduce the amount of coronavirus transmission and/or increase the number of people who get tested. If a place is doing more testing—and responding appropriately to positive tests, by making sure that people who might be contagious are isolated, for example—the amount of transmission should go down over time. But even without testing, measures such as stricter regulations

regarding wearing masks, physical distancing, and avoiding large gatherings are all effective ways to reduce transmission.

Why does more testing help?

When there is not enough testing in an area, people who are infected with coronavirus don't get counted, and they don't know to isolate themselves. As a result, these people can spread the coronavirus and cause disease in their communities. People who test positive for the coronavirus (and those exposed to them) should isolate themselves for two weeks, and contact tracing should be done to prevent the infection from spreading. Without enough testing, the coronavirus spreads “silently”. By the time severe cases begin to surge in hospitals, outbreaks are larger and much harder to control. These outbreaks can be detected earlier—and their severity lessened—by testing more people.

But for testing to work, people need to get test results quickly. When people have to wait many days to get their results back, they may be less likely to keep themselves isolated. By the time a positive test result comes back, therefore, someone who has been waiting many days may have infected more people. While tracking the number of positive tests is useful, what matters more is the total number of people who are infected—and we can only know this number by testing more people.

Catherine Barkovich and Mary Ann Bowman, Community Health Education Co-Chairs

WHA CALLS ON CONGRESS TO PASS COVID RELIEF AS PART OF LAME DUCK

The Wisconsin Hospital Association (WHA) is calling on Congress to include much needed relief for Wisconsin's health care system in a lame duck COVID package. In a letter to Wisconsin's congressional delegation on Dec. 3, WHA President and CEO Eric Borgerding described how taxing the fall spike in hospitalizations has been on Wisconsin's health care system and detailed the need for additional support, noting, "Our frontline workers are burnt out, working seemingly never-ending shifts and caring for more patients with fewer staff due to the sustained high level of community spread. Some of our hospitals and health systems have reported more than one-fourth of their workforce out on quarantine or isolation at any given time." Borgerding called on Congress to prioritize four main areas to help keep Wisconsin hospitals and health systems strong throughout the many remaining challenges of the pandemic.

1. Flexibility in spending Provider Relief dollars as well as additional funding on an application basis for hospitals who need it most.

WHA and our members greatly appreciate the support Congress was quick to authorize in the original CARES Act and that HHS was quick to disperse via the Provider Relief Fund. This funding was critical in helping hospitals weather the financial turmoil created by shutting down planned procedures as called for by the U.S. Surgeon General and CMS when COVID initially hit. WHA estimated our members lost over \$2.5 billion in revenue during that roughly six-week period before hospitals and systems gradually brought these services back online. To date, we estimate our Wisconsin members have received just under \$1.1 billion in support from the Provider Relief Fund. While many of our members have been greatly aided by these funds, others still face significant losses despite prudent efforts to reduce expenses. WHA supports additional funding on an application basis to ensure dollars are sent where they are most needed. This will also guard against the following issue created by HHS that WHA requests Congress to fix.

HHS created unnecessary and avoidable financial uncertainty for hospitals and health systems by issuing guidance on how relief dollars could be spent back in June and then changing it in September and again in October. This was extremely frustrating for hospitals who made financial decisions based on the June rules

only to have them change after the fact. While the October changes were a laudable attempt to meet hospitals halfway, they ultimately did not provide the flexibility needed for hospitals to spend these dollars as originally intended. WHA has heard from a number of our members, primarily rural hospitals, concerned they will be forced to return a substantial portion of these dollars if HHS does not revert back to the June guidance. We ask that Congress require HHS to honor the initial guidance issued in June which would allow hospitals to "use any reasonable method of estimating the revenue during March and April 2020 compared to the same period had COVID-19 not appeared." Additionally, current HHS guidance does not allow the necessary flexibility for health systems to realize the benefits of providing care as a system. During COVID, many health systems have flexed their operations to respond to the unique challenges posed by COVID. Some have incurred significant expenses at certain hospitals to care for more COVID patients while designating other facilities in their systems to continue providing non-COVID related care. Unfortunately, HHS does not allow them to spend targeted Provider Relief Funding across their system to account for these operational changes, as the dollars must stay with the hospital that received the distribution. WHA requests Congress to change this HHS policy so that dollars can be spent in a way that recognizes how care is delivered in modern health systems.

2. Additional federal matching Medicaid (FMAP) support to help stave off a projected deficit in the upcoming state budget that could negatively impact Medicaid providers.

WHA continues to support additional federal matching Medicaid (FMAP) funds to get through the uncertainty of the COVID pandemic. We are extremely grateful for the FMAP assistance the Wisconsin delegation worked hard to secure in prior federal legislation, as Medicaid caseloads have increased by more than 160,000 members since the start of the pandemic. Unfortunately, the state projects that number to grow by more than 40,000 additional enrollees through the first half of 2021 and has projected a more than \$500 million Medicaid budget deficit even if current enhanced FMAP funding is maintained through all of 2021. Wisconsin hospitals and health systems will face a significant decrease in reimbursement as more people switch

from commercial insurance to Medicaid, which pays only about 67% of the cost to provide care in Wisconsin. The prospect of further provider cuts from the state government dealing with budgetary pressures would create significant stresses on the health care system at a time when it can least bear it.

3. Congressional action to permanently remove the Medicare telehealth geographic and originating site restrictions, even after the COVID public health emergency ends.

WHA continues to support Congress acting to permanently eliminate the geographic and originating site restrictions currently in statute, which the CARES Act allowed to be waived during the public health emergency. These flexibilities allow patients to receive care in a more convenient setting such as their own home, while also granting flexibility in where providers can initiate such care. Providers and patients do not want to effectively go backwards in time once the emergency ends, but expect to be able to keep the health care delivery gains that have been made.

4. Funding for testing, tracing, vaccine distribution, and sustained public health infrastructure. This is important, as much of the CARES Act state assistance dollars for these efforts ends on Dec. 31.

Unfortunately, this pandemic has exposed some of the weaknesses of our current health care system when it comes to public health response. To snuff out COVID early on, we would have needed adequate testing paired with comprehensive contact tracing, something that was employed effectively in some countries. While we have made great strides in testing volumes since the beginning of COVID, much of the current support was issued through state and local funding that expires at the end of 2020. Congress must distribute additional dollars to keep up a robust testing infrastructure into 2021 while also boosting states' ability to hire more contact tracers, an area Wisconsin is sorely lacking in. Additionally, the sooner we can distribute vaccines the sooner we can get back to a more normal semblance of everyday life. While we are undergoing extensive planning with the state and public health partners to prepare for vaccine distribution, it is unclear what additional expenses may arise. To avoid experiencing challenges similar to what we saw in the early days of ramping up testing, Congress should reserve additional funding for vaccine distribution expenses that help ensure a smooth and efficient rollout. Importantly, we support Congress increasing public health and hospital emergency preparedness funding to allow states to build a public health infrastructure that can quickly scale up pandemic response efforts when needed. Wisconsin currently lacks sufficient funding to sustain ongoing local public health operations. This has required hospitals and others in the health care system to take on roles traditionally associated with public health to boost our collective COVID response efforts. While we sincerely hope to not see a global pandemic as devastating as COVID-19 in the near future, we cannot dismiss the possibility of future pandemics occurring. Considering the H1N1 pandemic and SARS epidemic both occurred in the last 20 years, we must use the lessons learned from this pandemic to prepare us for the next outbreak.

WHA also sent out a Hospital Education & Advocacy Team (HEAT) alert on Dec. 7 calling on Wisconsin hospital and health system leaders to amplify these concerns and share their unique stories about the challenges and impact of COVID-19. With Congress slated to run out of funding for federal programs on Dec. 11, recent developments suggest the body will pass a short-term, one-week extension to fund the government while it continues to negotiate a COVID relief package. Leaders on both sides of the aisle seem to have settled on a spending package of around \$900 billion, but disagreement remains surrounding including liability protections and the appropriate level of state and local government aid. States like Wisconsin have relied on this funding for their testing and contact tracing efforts and will utilize part of it for vaccine response as well.

However, current funding runs out on Dec. 31, warranting additional federal funding. WHA continues to maintain close communication with our congressional delegation as talks in Washington progress. To receive WHA's HEAT Action Alerts and important public policy updates, sign up for HEAT. www.wha.org/actioncenter

Contact your U.S. Senator and U.S. House of Representatives to Pass COVID Relief

Mark Richter, Public Policy Education Chair

H A P P Y

Birthday

T O Y O U

JANUARY

R. Janelle Harrison 1/1
Sharon Schug 1/5
Karleen Notham 1/7
Bonnie Olson 1/8
David Nelson 1/14
Rita Brunner 1/15
Kayla Pocernich 1/18
Pam Weilan-Schuster 1/18
Sharon Stearns 1/21
Judy Snudden 1/21
Judy Teske 1/22
Leora Hansman 1/30
Anna Allen 1/31

FEBRUARY

Jack Ruppelt 2/5
Jaiden Danelski 2/9
Jim Culbert 2/10
Susan Donahue 2/10
Areonna Schreiber 2/11
Denise Madland 2/11
Sara Hansen 2/11
Sharon Schank 2/17
Moira Kneer 2/21
Susan Norgaard 2/23
Georgia Haley 2/25
Carol Dittmar 2/26
Patricia Thorsbakken 2/28

MARCH

Pam Cavanaugh 3/01
Chloe Davis 3/3
Brenda Sommerfeldt 3/6
Janice Lorentz 3/8
Pat Rumpel 3/12
Kathleen Petersen 3/23
Robert Hagman 3/24
Mary Gervais 3/24
Renee Ward 3/25

APRIL

Linda Kerckhove 4/3
Pat Janowitz 4/4
Judy Peak 4/4
Patricia Skawinski 4/5
Connie Olson 4/5
Judith Schroeder 4/11
Sylvia Emerson 4/16
Martha Munger 4/16
Mary Burt 4/17
Mary Ryberg 4/22
Russ McElroy 4/22
Jaci Fuller 4/22
Linda DesForge 4/23
LaVonne Santala 4/25
Joshua Rislove 4/26

HANDCRAFTERS REPORT

Despite not being able to accomplish as much as we could before COVID, we still have crafters stepping up to the plate. Hopefully, in January we can resume making Super Hero capes. We are also looking forward to making swaddle blankets for our newborns. Please contact Jaci Fuller or myself if you are currently doing any crafting and we will be sure that you are recognized for your efforts.

Stay safe and healthy!
Judy Peak, Volunteer Partners Council

Note: The Handcrafters contribute baby hats and blankets for newborn babies, hats for cancer patients, lap blankets and other items for the patients' comfort. They also make get well cards for patients' food trays.





DATES TO REMEMBER

Date	Event	Location
Feb. (TBA)	Pizza Ranch Fundraiser	Pizza Ranch
April 14	Advocacy Day	Virtual
April 18 - 24	National Volunteer Week	
April (TBA)	West Central District Meeting	Sacred Heart Hospital or Virtual

VOLUNTEER PARTNERS COUNCIL MEETING DATES

January 25, 2021
 March 22, 2021
 April 26, 2021
 June 28, 2021

THE PRESENT - A BIKE RACK

There are staff, visitors and volunteers who ride their bikes to the Hospital but had no place to secure them. Therefore, the Volunteer Partners Council* in 2019 voted to have a bike rack installed near the side entrance to the Hospital. This was purchased by the Council and installed.. A dedication will be held in the near future.

*The name of the Volunteer Partners Board of Directors was changed in 2020 to the Volunteer Partners Council. The Mission, purpose and structure of the group remain the same, however.

A BIT OF HISTORY ST. FRANCIS STATUE

The Center for Cancer Treatment and Prevention was the recipient of the Statue of St. Francis, a special gift from the Volunteer Partners in 2007. This effort was spearheaded by Nancy Spak, a former president of the Volunteer Partners. The statue of the Hospital's patron, St. Francis of Assisi, was given to stand in the garden outside the Regional Cancer entrance. The unique statue was commissioned by the Stone Gryphon Studio, Fairchild, and blessed by the Motherhouse, Sister Marguerite Cook and the Volunteer Partners Board of Directors. It was created by local artist Todd Meyer at a cost of \$6,000. It serves as a Franciscan reminder to all that "There is Hope Here." The statue was dedicated in a May, 2007 ceremony with a blessing.

Due to the remodeling of the Cancer Center, the Statue was recently relocated to the west side of the Hospital by the door to the Chapel, where it will be more visible to employees, patients and guests. In the summer of 2019, a plaque to commemorate the Statue of St. Francis was created with the inscription "Donated by the HSHS Volunteer Partners of Sacred Heart, 2019". The statue will be rededicated at future date.

PAINTING

The Auxiliary of Sacred Heart Hospital on April 13, 1989, at a Golden Tea for the Hospital's Centennial, presented to the Hospital a beautiful watercolor painting by Betty Wahl. The Auxiliary commissioned Mrs. Wahl, a local artist, to paint a watercolor commemorating the Hospital's 100th anniversary, at a cost of \$400 for the painting and \$167.80 for the framing and plaque. The painting, which displays the natural beauty of Eau Claire and the history of Sacred Heart Hospital, was hung in the Hospital visitor lobby.

The painting was recently relocated and is now hung inside the entrance of the volunteer Services office.

TEN WISE PRAYERS FOR THE NEW YEAR*

By Walter Reid Hunt, Minister

TODAY, I pray for - -

1. A few friends who understand me and yet remain my friends.
2. Work to do which has real value, and without which the world would feel poorer.
3. An understanding heart.
4. Moments of leisure.
5. A mind unafraid to travel, even though the trail be not blazed.
6. A sight of the eternal hills and the unresting sea, and of something beautiful the hand of man has made.
7. The power to laugh.
8. Nothing at the expense of others.
9. The sense of the presence of God.
10. And the patience to wait for the coming of these things with the wisdom to know when they will come.

**(The above was in the January, 1990 Sacred Heart Hospital Auxiliary Newsletter)*

