

Administrator's Report
5/10/2010

PEOPLE

Professional Development

Audrey Snyder, WGN lead clerk, passed her Certified Healthcare Access Associate (CHAA) exam.

Congratulations to Pam Miller, a nurse in Home Healthcare and Hospice who recently graduated from the University of Washington with a Masters in Nursing, specializing in Palliative Care

Standards of Behavior

Since assuming the CEO position in October, I have met with staff frequently. I have asked questions of them and answered many of their questions regarding my focus and direction for our hospital. It is easy for us to question if the changes we make are truly effecting the outcomes we intended. Staying the course and remaining focused when faced with such questions is hard. The Standards of Behavior have been a huge undertaking for us. I commend your accepting them and for many of you embracing them, making them real. We are making a difference in how our community perceives us. These are excerpts from an email that I recently received.

I've been a resident of Langley for the last 9 years but worked for the Everett Clinic until I retired last year and always received my care from them. And honestly I had heard some stories about the quality of care at WGH being less than par so never went there as a patient. But I was too sick to wait in the ferry line on a Sunday afternoon so my wife drove me to WGH.

I am very, very happy with the care and compassion I received during my stay at WGH and with the professionalism and friendliness of your staff. Having led and managed a large IT staff at The Everett Clinic for 10 years before I retired, I recognize that staff performance is a direct reflection of the philosophies and values of top leadership. Congratulations on instilling these fine philosophies and values in your staff. You are making an important difference in the quality of healthcare received on the Island. I will recommend WGH highly to my friends on Whidbey and will never again hesitate to get my ER and inpatient care from WGH.

As I have often shared, I read all the patient comments and I am seeing more comments like this. You are doing a great job, thank you for your commitment.

Leadership Development Institute (LDI): *Rounding For Outcomes*

Nationally recognized reports indicate that 60% of employees who leave a position do so because of their relationship with their direct supervisor. Manager Rounding for Outcomes is a powerful practice that has proven effective in establishing a positive, trusting, supportive relationship between employee and manager. It has also been shown to improve patient satisfaction, employee satisfaction and operational efficiency. Rounding will allow us to be proactive in identifying and correcting issues before they become larger problems. Rounding will also allow us to identify individuals that deserve recognition and will ensure the continued success of our Standards of Behavior implementation.

In order to facilitate a successful implementation by June 1, the entire April LDI was dedicated to educate the managers on rounding. Specifically, this practice entails the department or unit manager meeting with each of their staff members regularly (frequency depends on staff size). During these meetings, the manager has a focused, intentional conversation that emphasizes building relationships, harvesting wins, identifying process improvement areas and discussing systems that need to be monitored or repaired. Information gained from rounding will be used to recognize staff and physicians for a job well done, improve systems and ensure staff members have the basic tools to do their work. We will measure the success of the practice by employee and patient satisfaction scores and employee retention.

Employee Recognition

As you know, we recognize four employees each quarter for the contribution they make to our community and the ways in which they demonstrate the importance of **S**ervice, **T**eamwork, **A**ttitude and **R**espect. Our STARS for the 1st Quarter of 2010 are:

Patsy Kolesar-Hynson	Med/Surg
Robert Hawkins, MD	Diagnostic Imaging
Bruce Schwab	Emergency Department
Diane Takasugi	Dietary

Gladys Jameson of Environmental Services retired May 7th after almost 35 years of service. Gladys' warmth, humor and deep commitment to our patients and staff will never be forgotten and she leaves behind a legacy of service and quality that will remain with her staff. We wish her well in her retirement and are deeply grateful for her dedication to our community's healthcare.

SERVICE

Community Outreach

A community outreach team has been assembled from several key areas with the primary goal of reaching out to our community in a consistent, sustainable manner. Although individual departments have performed specific outreach events in years past, the organization as a whole has not done so under this model. The team is comprised of Michele Renninger, Dr. Jerry Sanders, Robert May, Michael Unruh, & Sally Fox. Members of the

team have met multiple times to discuss key strategies that are in alignment with the WGH 2010 strategic plan. The core goals will be presented at the May 10th board meeting. A few of the key concepts consist of scheduled, quarterly community forums with educational speakers rotating between community locations north, central and south. This also provides opportunities for community questions in regard to general hospital business or time to ask questions of the team, commissioner, or administrative representative that may be present.

Participation in local events will include staff from multiple departments providing interactive education on health promotion. An example of this happened most recently at Coupeville Elementary school. The team designed a health fair to coincide with a dance-a-thon to raise support for a classmate who is undergoing treatment at Children's Hospital. This was a great way to promote disease prevention and listen to the fears and concerns of the children about illness in a non-threatening environment. For two weeks prior, the children collected pledges in the community wagering how long they could dance. During the dance there were tables and clinicians present to teach about health topics such as bullies, sun-protection, nutrition, hand hygiene, exercise, and tobacco. The children spent time with the clinicians and availed themselves of printed information about tobacco. One boy commented, "My dad quit smoking but today I think he forgot." The nurse spent the next half hour teaching and encouraging him on how our hospital could support his family in their efforts to become tobacco free. This is just one example of how being present at such an opportune time can begin to build trust with our community.

A specific email address has been created to encourage community ideas and feedback as well as a survey to assess key components of how the outreach opportunity has affected the participants.

Patient Comments

We receive many positive comments from our patients about their healthcare experience at WGH. Our Leadership Team has been recognizing the importance of these comments by writing personal thank you notes to individuals and Departments mentioned. Below are some of the more recent comments:

I have told all my friends how great you are. *Cindy,*Phil & *Sue coordinated my rehab among themselves. A terrific team!

My hospitalist, *Mrs. Wallace was superb. I wish she could be my PCP.

Cannot remember name of CAT scan technician but she did a wonderful job.

*Doc. Benjamin T. Hu, "he was OUTSTANDING! in every sense!"

Every visit has been a 'GREAT' visit thank you *Jeremy & all the staff of Rehab North.

Registration desk was VERY fast, friendly, and really worked with you.

I have never had such wonderful, efficient, delightful care in any of my prior hospitalizations! Receiving nurse, *Lorie, *Sandy, *Terry and especially 2nd shift nurse - *Curtis! Nurse in training *Collene will be an excellent addition to the hospital staff

The nurse that admitted me onto the floor (room 12) was excellent. She stayed with me until *Dr. Zaveruha could re-check me for the night. Excellent care!

*Dr. Z. is FANTASTIC!! Excellent bed-side manners & very informative!! Also *Dr. Fru *Dr. Z.'s partner was wonderful

*Dr. Sparks was awesome!

I cannot say enough good things about *Dr. Bahiraei - he is truly an outstanding physician.

*Randy did the best blood draw I've ever had in my life - Great job

*Dr. P. (Perera) gave us the most info we've had about my health issue.

Contract Status

Anesthesia services contract update: We continue to work through the contracting process. Attorneys for Penn Cove Anesthesia and Whidbey General are finalizing the final points of the contract.

QUALITY

Quality

The WGH Risk Management Program is integrated with Quality and Patient Safety. Risk is the uncertainty that a loss or losses will occur while risk management is a function aimed at identification, analysis, treatment and evaluation of risks that represent financial, safety or quality of care issues for the organization.

Our risk management is a proactive enterprise program, identifying clinical, financial, insurable and business risks prior to an occurrence or patient safety event and developing processes and strategies to eliminate or minimize the risk exposure. The program is also responsive through occurrence reporting and surveillance that initiates investigation or quality reviews for possible improvements.

In addition to occurrence surveillance and enterprise risk mitigation, risk analysis is performed to determine the potential severity of the loss associated with an identified risk and the probability that such a loss will occur. Some risks have a high frequency of

occurrence but a low severity. Others may have a low frequency of occurrence but a high severity of loss when they do occur. Severity of loss includes direct financial loss and also damage to the brand (our reputation) which can lead to further losses.

WGH employs a combination of risk treatment strategies. Through proactive identification and planning of clinical care practices we can avoid, control or reduce risk. Risk reduction includes strategies aimed at limiting the potential risk through staff education, policy and procedures revisions, physician and staff referrals and reviews, medical record reviews, complaint and claim investigations, licensure surveys, self-assessments and regulatory and standards compliance.

The hospital governing board of commissioners is ultimately responsible and accountable for the effectiveness of the hospital's risk management and quality and patient safety programs. The board is not responsible for "doing" risk management; instead their role is to provide direction for the program and to ensure the risk management activities are functioning effectively.

GROWTH

Current Physician Recruitment Successes

Physician access continues to be the prime area influencing our growth and our standing in the community. While there is a great desire to fill a vacant position as soon as possible, it is incumbent upon us to ensure that we have the right person rather than the first person. We have been fortunate in our efforts:

- Dr. Mathew Marquart, Orthopedic Surgeon, was onsite for his first visit. So far, feedback has been positive; we are currently following up with Dr. Marquart on his interest in Whidbey General.
- Dr. Cheryl Soronen, hospitalist, has received our offer and is very interested in working here. We are negotiating some of the finer points and should have an agreement before the end of the month.
- Dr. Elizabeth Kang, hospitalist, was on site for an interview for one of our hospitalist positions. She would like to do some locums work for us so that we both have a better feel for her fit with the organization and our fit with her. We are currently negotiating that.
- Dr. Melissa Chin, OB/GYN completed her second round of interviews for the OB/GYN position and is very interested in our hospital. Feedback from physicians and staff were very positive, we have sent her an offer letter this week.

Current Physician Recruitment Initiatives

- Orthopedic Surgeon
- OB/GYN
- WGH Hospitalist

- Langley Clinic Physician

FINANCIAL

The month of March continued a trend of increased patient volumes for the hospital and clinics. Our inpatient census was 16.0 which was on budget, and was an increase from 14.8 and 15.5 in January and February, respectively. Many outpatient departments experienced increased volumes that were much closer to budget than the prior four months. Our ED saw 1,617 patients. The ED average all 2009 was 1,576. Diagnostic imaging, laboratory, therapy and MAC are experiencing volume trends similar to the ED.

As a result of these increased volumes, our gross revenue for March exceeded budget by 2%. This is the first time in 12 months that gross revenue has exceeded budget. Expenses were 0.4% over budget, primarily due to increased patient volumes. Consequently, our margin was 5.1% for March, our first positive margin since October 2009. Year to date, our margin improves to 2.0%, which is still off our requirement of 3.0%. We are taking a measured approach to evaluating capital needs and replacement.

Despite the well-publicized economic challenges facing our state, there is some good news I wanted to share. During the 2009 legislative session, the state enacted payment cuts and insurance plan enrollment reductions that would have reduced Whidbey General's payments by approximately \$640,000 from 2009-2013. In response to this challenge, the Washington State Hospital Association, on behalf of its member hospitals, promoted legislation that would restore portions of this reduction. The new program is called the Hospital Safety Net Assessment. Under this program, the state assesses a fee on all hospitals. These fees increase the Federal matching funds into the WA State Medicaid program, which thereby allows the State to restore a portion of the cuts enacted in the 2009 legislative session. We expect the Hospital Safety Net Assessment will restore approximately \$525,000 over the next four years, which will minimize the impacts of the \$640,000 budget cuts.