

QAdministrator's Report
2/13/2012

PEOPLE

The Employee Satisfaction Survey has been completed and the aggregate data finalized. For the first time, we were able to offer our employees an electronic survey and we had a 49% response rate which is an increase of 5% over last year. We are pleased to report a 6% average positive increase in the "Strongly Agree" category, which demonstrates that we have exceeded our organizational goal for 2011 by 3%. Below we wanted to share with you the comparison of the **Strongly Agree** category across the past three years. We will be providing this same information as well as the overall aggregate survey results for 2011 to the WGH staff in the next week. The Administrative Team will be looking closely at areas of focus so we can continue to improve the satisfaction of our employees.

WGH Employee Satisfaction Survey
"Strongly Agree" Comparison from year to year

	2011	Change from prior year	2010	2009
Q1. LEADERSHIP				
A. I know my hospital's vision (what it is trying to accomplish).	48.2%	12.2%	36.0%	27.0%
B. Administration uses the hospital's values to guide us.	25.9%	3.9%	22.0%	17.0%
C. Administration creates a work environment that helps me do my job.	17.6%	0.6%	17.0%	15.0%
D. Administration shares information about the hospital.	30.7%	8.7%	22.0%	15.0%
E. I have opportunities to ask questions and have my ideas heard.	29.8%	4.8%	25.0%	18.0%
F. Hospital management provides a work climate that promotes patient safety.	33.0%	9.0%	24.0%	24.0%
G. The Administrator who oversees my Dept. responds to my needs in a timely manner.	36.6%	5.6%	31.0%	30.0%
H. I see the Administrator who oversees my Dept. demonstrating the Standards of Behavior.	41.4%	5.4%	36.0%	New
Q2. STRATEGIC PLANNING				

A. In planning for the future, the Admin Team asks what I think and listens to my answers.	14.3%	2.3%	12.0%	9.0%
B. I know how future changes will affect me and my work.	10.7%	-0.3%	11.0%	9.0%
C. As changes occur in the hospital, I receive the support I need to adapt to change.	14.9%	2.9%	12.0%	8.0%
D. The Administrative Team is doing a good job of planning for the future.	14.3%	0.3%	14.0%	10.0%

Q3. JOB SATISFACTION

A. I am allowed to make decisions to solve problems for my patients or customers.	34.2%	6.2%	28.0%	24.0%
B. I know what is expected of me at work.	49.4%	13.4%	36.0%	37.0%
C. I have the materials and equipment I need to do my work.	22.0%	0.0%	22.0%	18.0%
D. In my workgroup, members support, nurture and care for each other.	49.1%	17.1%	32.0%	30.0%
E. I can make changes that improve my work and am encouraged by my supervisor to do so.	38.7%	9.7%	29.0%	25.0%
F. Recently I have received recognition or praise for doing good work.	35.4%	9.4%	26.0%	24.0%
G. Regardless of the topic, communication is direct, truthful and open.	27.7%	9.7%	18.0%	17.0%
H. Members of my workgroup treat each other with dignity and respect.	41.4%	11.4%	30.0%	24.0%
I. We are actively doing things to improve patient safety.	40.5%	14.5%	26.0%	24.0%
J. Compared to 2 years ago, I am more satisfied with my job.	24.7%	3.7%	21.0%	18.0%
K. My pay is fair.	26.8%	7.8%	19.0%	21.0%
L. I am satisfied with my benefits.	23.5%	7.5%	16.0%	22.0%
M. I am satisfied with my job.	29.8%	6.8%	23.0%	25.0%
N. I believe my job makes a difference at the hospital and in our community.	59.2%	14.2%	45.0%	46.0%

O. I understand our Standards of Behavior and I am able to demonstrate them in my work.

	58.6%	20.6%	38.0%	New
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Q4. SUPERVISOR / MANAGER

A. My supervisor is able to achieve results through his/her management style.

32.7%	6.7%	26.0%	25.0%
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B. My supervisor recognizes the staff's need to balance work and family life.

45.2%	6.2%	39.0%	35.0%
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C. My supervisor seriously considers staff suggestions for improving patient safety.

44.3%	10.3%	34.0%	32.0%
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D. I am given appropriate training and orientation to do my job well.

34.2%	9.2%	25.0%	25.0%
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E. My supervisor provides me with timely performance reviews that help me improve.

37.5%	8.5%	29.0%	28.0%
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F. I see my supervisor as a good example of customer service.

44.3%	6.3%	38.0%	35.0%
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G. My supervisor supports the Standards of Behavior and demonstrates our values through his/her actions.

46.1%	6.1%	40.0%	New
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Q5. ORGANIZATION

A. Mistakes have led to positive change here.

18.8%	4.8%	14.0%	10.0%
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B. The organization is hiring the right people for the job.

13.4%	1.4%	12.0%	10.0%
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C. The organization puts forth effort to build a sense of pride and spirit in the work we do.

23.2%	3.2%	20.0%	14.0%
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D. WGH is a place I would suggest to a friend as a great place to work.

28.9%	1.9%	27.0%	24.0%
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E. If asked, I would recommend the healthcare services at Whidbey General Hospital.

39.0%	11.0%	28.0%	25.0%
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Average

33.0%

25.7%	22.2%
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4th Quarter 2011 Service Teamwork Attitude Respect (STARS)

Cheryl Coleman – Health Information Management

S – Cheryl is kind and respectful in her interactions with us, providing timely status updates and ALWAYS presenting a positive, can-do attitude that is contagious.

T – Cheryl has worked tirelessly with staff from WGH, providers, and Webmedx staff to ensure accuracy and alleviate sources of frustration.

A – She is quiet, not one to make a fuss, but goes about her daily tasks always giving beyond what is needed, no matter what her personal circumstances may be.

R – Cheryl shows respect by always involving us in the solution, taking our experience and ideas seriously.

Dee Giordan – Medical Ambulatory Care

S – Dee is consistently following up making sure that appointments are being made and offices are getting the information so the patient will receive the best care possible.

T – Dee is a joy to work with and goes above and beyond so the nurses can have all the information needed for excellent care.

A – Dee has an honest, caring, and loving attitude towards her team and patients.

R – Dee keeps patient information private and shows a great deal of respect for patients that come in, keeping all of their appointments and information confidential.

Kellie Harris – North Whidbey Community Clinic

S – She motivates her staff to high quality marks by developing loyalty and cohesion.

T – Kellie has volunteered for the Safety Committee, the Great Service Team, is a Lucidoc super user and juggles these meetings despite the travel involved.

A – Kellie is kind, a good listener, and uses humor to teach and lighten up a workspace that can get heavy with sad and difficult patient traumas.

R – She lets staff figure things out amongst themselves before intervening which is an ultimate respect of their abilities to rise above conflicts and find the common goal.

Emrie McCauslin – Environmental Services

S – Emrie is committed to providing outstanding service to all and following up to ensure appropriate outcomes.

T – Emrie understand the very important role her department plays in the health and well being of our patients and staff.

A – I enjoy each opportunity I have to work with Em and know that she comes to work each day with a clear intention to live our values.

R – She is respectful of the individual needs of whomever she is serving and finds a way to make a personal connection.

Flu Vaccine Campaign

Our flu vaccine campaign has had a “shot in the arm” since the snow weather lull. Besides the 6 vaccinated employees who committed to the prevention of flu at WGH, 5 employees submitted their “vaccination elsewhere” documentation stating the commitment to protection for all of us during this flu season. At this time 78% of WGH employees are vaccinated against influenza. We are within reach of the 80% employee vaccination rate to

be eligible for the Washington State Hospital Association "Best Hands on Care" Award and closer to our campaign goal.

If you have not had the opportunity to receive your flu shot or have not submitted information pertaining to receiving your flu vaccination elsewhere, please contact Monica Smiley at ext 3156. Our goal is to have 100% of our employees receive the influenza vaccination.

SERVICE

Physician Office Staff Meeting

On January 31st, we were honored to host a medical office staff meeting. At the meeting, I shared where WGH has been and where we are going. Teresa Fulton spoke to the audience about CMS's programs on physician pay for performance and CACAHPs. LaJolla Peters shared how our journey with AIDET has helped us reduce patient anxiety and increase compliance for better clinical outcomes. We plan to continue having collaborative hospital/medical office meetings throughout the year.

Standards of Behavior

The Standard of Behavior for February is:

LEAD BY EXAMPLE – I show compassion, make an investment in people and am always aware of how my actions impact others. I am the person and role model that I expect others to be.

- I provide timely and accurate education and/or instruction.
- I exceed expectations.
- I know my surroundings and act appropriately.

This standard supports the organizational value of Quality.

Following is a story from a staff member that exemplifies this standard:

- *"It is a daily comfort to know exactly what is expected of me and to try to achieve or surpass those standards with every patient and staff interaction."* Trish Rose, Public Relations

Great Service Team

The Great Service Team is pleased to recognize Lorrie Anderson as the December 2011 Great Service Story winner. Lorrie has been a cook and nutrition assistant in Food and Nutrition for over 16 years. She is described by her colleagues as "a great person to work with", "dependable" and "always willing to chip in when needed." When Lorrie is not at work she enjoys crocheting, weaving scarves and rugs, and riding with her husband on his Harley. Here is Lorrie's story as submitted by Dorothy Buck:

Lorrie Anderson gets a Great Service Kudo for her enthusiasm and dedication for spreading holiday spirit in our hospital! Lorrie's spirit of giving not only happens at Christmas but other holidays, too. Each seasonal event she decorates the West Wind cafe with holiday cheer with most of the decorations being brought in from home!! At Christmas she joyfully adorns the cafe with singing bears and lights and adds her special touch to

the Employee Council Christmas party. For the party Lorrie takes off 3 days of work to help with the preparation, decoration, attending and hosting the party (acting as Mrs. Claus) and the day after to put everything away and provide the prizes won. She selflessly gives of herself to make her co-workers and community happy. Working with Lorrie is always a joy. She has a smile on her face and truly brings the spirit of the holidays to life here at WGH

Patient Comments

Dr. Hansen - very nice & professional

Love Ann as always - Have POOR veins & Ann found one right away AND it was painless!! Gold stars for ALL

Carol T. at office does a super job managing visits & contacts @ office.

Positive Nurses. Jennifer & Chris were excellent - Also Carol B. GREAT staff. Very caring & skilled.

Nancy (if I remember correctly) the X-ray technologist was wonderful. She was courteous, cheerful and a delight to interact with.

Dr. Burnett was very respectful of my sensitive/private needs, this is very important to me and I appreciate it

Dr Chinn and her staff are tremendous

Dr Chinn is wonder. I am thrilled to have her as my GYN

Christine was great - she is so caring & made me feel very safe & attended to during my sleepover.

Dr. Zaveruha is a very caring, compassionate, and professional physician. There should be more like him.

No pain during the surgery nor after it! I did not need nor used the pain pills prescribed & received - The whole Surgical Team were professional friendly & personable. Dr. Zaveruha & the anesthesiologist

Laura was great! All the staff was great.

I trust and value Dr Langrock's judgment, his recommendations in my best interest and would highly recommend him.

Dr and PA Bibby are wonderful

PA Bibby shows concern and genuine care. She creates an atmosphere of trust.

Barbara Simons is one of the best doctors I see and does her job well

Alicia Hawkins RN 'awesome' with the sedation.

E. Kiel 'terrific'

V. Grambow 'the best' surgery technician of course L. Oman was 'wonderful.'

Bonnie Garcia RN was very helpful & informative with instructions
Gail in registration cut her 'break' short to get me checked in quickly.

Laura called. She is excellent felt like an old friend calling me!

Dr. John Plastino is great, so is the nurse in charge on the afternoon shift. I have and so has my wife always had great care there and we recommend it

Toni-Marthaller-Anderson is just the best ARNP I've ever experienced in every way. I've been to medical clinics in UK & Australia-none are as good as Toni and this clinic.

I was very thankful for the follow-up call from Linda after I left the hospital.

Terry, Eddy, Shannon and Shannon T. were particularly kind and attentive - especially the 2 Shannons!

Ginger was excellent!

"I would like to tell you that the care was outstanding. The nurses on the floor, RT, and the ED staff (especially Dr. Perrera) were all fabulous. The last time I was here was in 2008 and the food has improved and was great. Then, on top of it, I get a call to see how I am doing. That is top notch service.!"

"You guys did an outstanding job. I was super-impressed the first time around and the second time you didn't disappoint. Curtis, the night shift nurse, especially, was great!"

QUALITY

New performance teams are starting this month! The NPI Table team is a team of super users who will be creating a database in STAR of our non-staff providers. This will save a lot of nonproductive work time by preventing hand faxing of test results and hand editing of bills. The Rural Health Clinic Team will be looking at ways to improve the patient and provider experience in our rural clinics by improving efficiencies and processes. If you have an idea of how to improve your work process or how to improve the patient's experience be sure to tell your supervisor. The Quality Department will be happy to help you and your supervisor with your project.

GROWTH

Physician Recruitment

It's not news that the country faces an impending physician shortage. In fact, many communities face difficulties in finding and recruiting new doctors. Sadly, recruiting efforts will become even more difficult because the shortage is expected to be worse than originally projected.

Last year, the Association of American Medical Colleges released new physician shortage estimates based on projections by the Center for Workforce Studies. These studies show the estimates to be 50% worse than expected because of the passage of healthcare reform, which will extend insurance coverage to tens of millions of previously uninsured Americans. This will exacerbate the shortage as we will have significantly more people with the ability to access an already scarce resource. In addition, 36 million Americans are expected to enroll in Medicare. In light of Dr. Marquart's resignation, I would like to offer a thumbnail sketch of the approach we use to select and compensate providers.

Our recruitment efforts focus on our provider staffing needs in the near and distant future. When a position unexpectedly becomes vacant, it can be a serious challenge to find a candidate to take on the previous provider's workload. These unanticipated situations can't be prepared for; whereas, replacements for a provider's upcoming retirement or other planned absences are often in the works for months to a year in advance of their departure.

In the recruitment process we focus on the candidate's specialty and clinical qualifications. It is equally important that the candidate have the personality, characteristics and work ethic to support our defined organizational culture and goals. Will the candidate be new from residency or will he/she be more experienced? These questions are defined by the needs of the clinic. For example: at WGH's orthopedic clinic we have a senior orthopedic surgeon, Dr. Livermore, and Dr. Picco who is board certified with an established practice. Knowing that Dr. Livermore will retire in a few years and expecting Dr. Picco to move into the senior surgeon position, we recruited Dr. Marquart as a junior surgeon who could move into Dr. Picco's position when Dr. Livermore retires. In that manner, we continually bring in new ideas and techniques while ensuring that junior surgeons have the support of highly skilled senior surgeons.

To determine provider compensation in the current recruiting environment, a number of factors are taken into consideration. Are these providers in high demand and how is the marketplace reacting to that demand? Are there student loans, malpractice coverage, or other expenses for which the recruit requires assistance? Regardless of the situation we always ensure employment offers are based on sound data. We use the Medical Group Management Association (MGMA) physician compensation data as the benchmark for provider salaries. The MGMA has been collecting data on provider compensation since 1926 and has thousands of provider respondents in their database. MGMA data provides accurate and up to date information at the regional and national level, as well as by practice specialty. This allows us to compare our compensation with others in the marketplace who are competing for talent.

Our base compensation offers are always between the 25th and 50th percentile of the MGMA data for each specialty in the northwest region. This means that 50% to 75% of all northwest practitioners in a candidate's specialty have a base compensation greater than what we offer. In addition to the base compensation, we also offer incentives for building a practice, taking call beyond the medical staff requirements, and certain medical staff leadership positions. Regardless of where the compensation comes from, we cap all

payments at the 75th percentile. Once we have negotiated a contract, it is reviewed through a third-party that provides us with a detailed Fair Market Value (FMV) analysis to verify that all compensation components of the contract are within the current market benchmarks. This is the final step in ensuring that physicians are being fairly compensated.

Current Recruitment Efforts

- Two Family Practice physicians for PCA north
- Hospitalist replacement for Tom York
- Orthopedic Surgeon

FINANCIAL

During December our patient volumes were 10% under budget for the month, but up nearly 3% as compared to December 2010.

For the twelve months of 2011, our Self Pay Revenue (i.e. Patients without insurance) has increased 19% as compared to 2010. Overall, our patient volumes increased just under 1% from 2010 to 2011. However, our operating costs increased 6% from 2010 to 2011. The hospital's total margin for the year was a gain of \$750,000, however Primary Care Associates (PCA) is a wholly owned subsidiary of the Hospital District. PCA had an operating loss of approximately \$1,500,000 for 2011. So, on a combined basis the entire Hospital District had a net loss of approximately \$750,000 for the year.