

3/13/15

Welcome to LVHN Weekly. This email (formerly called This Week at LVHN) is part of a communication transformation that began thanks to colleague feedback. LVHN Weekly has a similar look to our other new communication resources that are part of the transformation. These resources include LVHN Quarterly, a new print magazine that was mailed to all colleagues' homes this week, and LVHN Daily, your everyday source for LVHN news online (formerly called Mission Central). All colleagues will receive LVHN Weekly every Friday. It contains links to the week's LVHN Daily stories, the latest LVHN publications and more.

## Introducing LVHN Daily

Formerly called Mission Central, LVHN Daily is your everyday source for LVHN news.

## Changes in Chief Operating Officer Structure Announced

Restructuring establishes presidents for hospital campuses and helps us implement LVHN's strategic plan.

## Changes in Patient Care Services Structure

Vice president positions have been established within the chief nursing officer team.

## What Are We Doing to Fill Open Nursing Positions?

In this Q&A, a human resources colleague addresses our progress thus far.

## March 17 Casual Conversations Session Canceled

The session was cancelled because it is close to the date of our Colleague Forum on April 2.

## LVHN Nurses Recognized by Pennsylvania Patient Safety Authority

These colleagues' "great catches" are featured in a new



Patient Safety Week publication.

### **Engaging Our Patients – VIDEO**

Featuring LVPG physicians, the video was created to help doctors understand how communication impacts quality care.

### **Butterfly Effect: How Wave 1 Go-Live Transformed Us**

Since Go-Live, ambulatory colleagues are soaring with unique patient visits and chart closures.

# Introducing LVHN Daily

BY [RICK MARTUSCELLI](#) · MARCH 11, 2015

Welcome to LVHN Daily, your everyday source for LVHN news. LVHN Daily is the new name for what was Mission Central. This redesigned website is part of a communication transformation taking place thanks to colleague feedback. You can access it from the intranet ([lvh.com](#)) or by going directly to [daily.lvhn.org](#) from a network connection.

LVHN Daily is filled with features to help you get the information you need quickly. Here's a lesson on how to use it.

## ***Click a category***

New stories will be added to LVHN Daily regularly, so visit often. Every time a new story is posted, it will fall into one of eight categories listed in the top navigation bar. Here are the types of stories you'll find in each category:

- **News** – When there's a breaking story, event or announcement, you can read about it here.
- **Stories About Colleagues** – Meet the Service Star of the Month, read the Service Anniversary list and learn



about great things your colleagues are doing.

- **Wellness** – Get information about ways to use your \$700 Culture of Wellness benefit, and get tips to live healthy and be at your best.
- **Goals and Strategy** – Find out if we're reaching our goals, learn how you can help us achieve them, and understand how our goals reflect LVHN's Strategic Plan.
- **Benefits** – Get information related to our health plan, retirement plan and other benefits.
- **Discounts and Perks** – Learn about opportunities to save money, go on trips, get tickets to events, celebrate with colleagues and discover more of the advantages of working here.
- **Nursing** – Read Magnet Attractions articles, meet Friends of Nursing Award recipients and learn about the exceptional work of our Magnet™ nurses.
- **Terry's Take** – Read all the blog posts from chief operating officer Terry Capuano, RN.

### ***Search for a story***

In the top right, type words in the Search box that are likely to appear in the story you're looking for. Calls-to-action inside our new print magazine, LVHN Quarterly, and on digital signs throughout our network will often ask you to search for information using a hashtag (#). For example, if you search "#Fitness" you'll be taken directly to information about LVHN Fitness. Using hashtags in this way makes finding information easy.

### ***Link to important stories***

Underneath the top navigation bar are descriptions of and links to stories with information all colleagues should know.

### ***Read all stories***

An infinite scroll of all the stories ever posted on LVHN Daily and Mission Central appears in chronological order.

### ***Like and share stories***

Each story contains a like button, similar to Facebook. You also can share a story by emailing or printing it.

### ***Share a photo and caption***

Take a photo and submit it (along with a caption) to appear in the "Photo Feed" section on the right. It's a great way to give kudos and engage with colleagues throughout LVHN.

### ***Contact us***

This is where to submit a photo for the "Photo Feed." It's also where you can make a suggestion, share a story or ask a question. We'll forward your question to the colleague who can best answer it and post the response ASAP.

### ***Track our progress***

The bar graph in the right column shows how we're doing on a measurable goal or initiative. For example, the graph currently shows the percentage of colleagues who reported their blood pressure and body mass index as part of our Know Your Numbers initiative.

### ***Vote in a poll***

The topic of the poll question will typically be fun. However, at times we'll ask your opinion about an LVHN-related topic so your feedback can be used to make our health network even better.

### ***What's next?***

1. Check your home mailbox this week for LVHN Quarterly. Our new print publication contains important and useful information, and is another part of our communication transformation.
2. LVHN Weekly (formerly called This Week at LVHN) will be emailed to all colleagues each Friday beginning this week. It contains links to the week's LVHN Daily stories, the latest LVHN publications and more.
3. We'll continue to add new features to LVHN Daily. For example, you'll soon see a "To-do List" that includes things all colleagues need to do throughout the year, like enroll in benefits and complete the latest core bundle. You also will soon be able to get email updates when a story is posted in a category you're interested in.

# Changes in COO Structure Announced; Presidents Established for Hospital Campuses

BY [ADMIN](#) · MARCH 11, 2015

## Special Announcement



**This message is from Brian A. Nester, DO, MBA, FACOEP,  
president and chief executive officer**

Last week, we announced changes within the domain of the chief medical officer that were designed to help us successfully implement LVHN's strategic plan and to prepare us for a leading role in population health management.

Today, we're announcing important changes on the operations side involving the domain of the chief operating officer (COO). These are not new positions or extra management layers; instead they represent streamlined reporting structures and responsibilities, making us more agile in responding to the challenges of our evolving health care environment. Among the changes:

First, **Terry Capuano, RN**, will now hold the title executive vice president and chief operating officer. A trusted colleague for more than 25 years, Terry has served as COO since 2010, and prior to that served as senior vice president of clinical services. Her new title best reflects her skills and position within the network.

To support Terry, we are establishing presidents at each hospital facility (LVH, LVH–Muhlenberg and LVH–Hazleton). These presidents will report directly to Terry and will have responsibility for all operations under those hospital licenses, including fiscal responsibilities.

The president of LVH will be responsible for LVH–Cedar Crest and LVH–17<sup>th</sup> Street, as well as the women's and children's service line, including Children's Hospital at LVH. This particular role is not a new position; we are adapting the former senior vice president of ambulatory services position to provide greater focus on these important assets. The president of LVH position is not yet filled. We will initiate a search in the ensuing weeks. In the interim, all operations issues will continue to be addressed to the appropriate senior vice president according to function.

At LVH–Muhlenberg, the title for **Jim Geiger** will change from senior vice president of operations to president of LVH–Muhlenberg. Jim has been a valued leader here since 2001 and has previously served as senior vice president of operations and as the vice president of ambulatory services. He joined LVHN in 2001 after 26 years of distinguished U.S. Air Force service.

**John Fletcher** will continue to serve as president of LVH–Hazleton, a position he has held since last January. Prior to that, John had served as the chief operating officer of the former Greater Hazleton Health Alliance.

Also reporting to Terry will be **Sue Lawrence**, who will serve as senior vice president of operations. In this role she will be responsible for post-acute care services, including inpatient and outpatient rehabilitation, home care and hospice, case management, patient access, patient logistics and guest relations. Sue joined LVHN in 1985 and most recently served as senior vice president of the care continuum.

**Keith Weinhold** will continue to report to Terry as senior vice president of service lines. In this role he will continue to be responsible for the cancer, cardiac, trauma/burn, neuroscience and orthopedic/sports medicine service lines as well as LVHN–Tilghman, our Center for Orthopedic Medicine. Keith joined LVHN in 2006, serving as vice president of the cancer center before moving to his senior vice president role in 2010.

Additionally, the following senior management team members will continue to report to Terry, including:

- **Anne Panik**, senior vice president and chief nursing officer.
- **Debby Patrick**, senior vice president, human resources.
- **Brian Hardner**, vice president of facilities, construction and real estate.
- **Glenn Guanowsky**, vice president, legal services.

Please join me in congratulating those members who are assuming new roles on the COO team.

# Changes in Patient Care Services Structure: Vice Presidents Established

BY [ADMIN](#) · MARCH 13, 2015

Recently, Dr. Nester made announcements regarding changes to the domains of the chief medical officer (CMO) and the chief operating officer (COO). These changes were designed to help us successfully implement LVHN's strategic plan and to prepare us for a leading role in population health management (CMO), and to streamline reporting structures and responsibilities (COO) to make us more agile in responding to the challenges of our evolving health care environment.

Following are the changes which will occur within the domain of the senior vice president of patient care services and chief nursing officer (CNO). These are not new positions. Instead, they represent streamlined reporting structures and responsibilities.



*This announcement is from Anne Panik,  
senior vice president, patient care services.*

- **Anne Panik, RN** will continue to serve as senior vice president of patient care services and chief nursing



officer, a role in which she has served since 2010. Her position will continue to provide senior leadership for patient care services at all LVHN facilities.

- **Jackie Fenicle, RN** will now hold the title of vice president of patient care services for the LVH-Muhlenberg facility. This title better reflects not only her oversight responsibility for patient care services, but also her role as a member of the LVH-Muhlenberg facility leadership team, working in collaboration with the facility's president. She will continue to report to Anne.
- **Marie (Kim) Jordan, RN** will now hold the title of vice president of patient care services for the LVH-Cedar Crest facility and the 17<sup>th</sup> Street Emergency Department. This title better reflects not only her oversight responsibility for patient care services, but also her role as a member of the LVH-Cedar Crest facility leadership team, working in collaboration with the facility's future president. Kim will continue to provide oversight for the medical-surgical inpatient units at Cedar Crest and for the Tilghman Inpatient Unit. She will continue to report to Anne.

Administrators for the remaining LVH-Cedar Crest divisions (Women & Children, Cardiovascular/Respiratory, and Trauma/Burn/Neuro/ED) will now report directly to Kim.

- **Carolyn Davidson, PhD, RN** will assume administrator oversight responsibility for the medical-surgical intensive care units at the Cedar Crest site (2K-MICU/SICU and 2KSouth). She will continue to report to Anne.
- **Patient Logistics** (Bed Management and Patient Transport) will now report to Susan Lawrence, senior vice president of operations.

Please join me in congratulating the members of the CNO team on their new roles.

# What Are We Doing to Fill Open Nursing Positions?

BY [TED WILLIAMS](#) · MARCH 12, 2015



*At a recent Casual Conversations session with LVHN president and chief executive officer Brian Nester, DO, MBA, FACOEP, a colleague asked, “What are we doing to fill open nursing positions?” Here is a response from Julene Campion, director of talent acquisition for human resources (HR).*

HR realizes we have a shortage of nurses. In fact, the U.S. Bureau of Labor Statistics predicts projected job openings for nurses nationwide will remain high through 2022.

During his Casual Conversations, Dr. Nester has explained why we have a shortage of nurses. The reason centers on our budget. Like most hospitals, we expected to experience a decline in acute admissions this fiscal year and budgeted for fewer nurses based on the prediction. However, the decline in admissions did not occur, leaving us with a need to hire more nurses to meet the demand for our care.

LVHN is committed to recruiting and retaining the best nurses. We've held “Nurse Information and Interview” events over the past several months to fill our open nursing positions. In October, we held an event seeking nurses in the following skill areas:

- Children's services
- Critical care/trauma
- Emergency department
- Home care
- Medical-surgical
- Perioperative services
- Progressive care/cardiac step-down
- Women's services

In January, we held an event for nurses who have earned or were about to earn a bachelor's degree in nursing. This is the future of nursing, as was documented in a national report released in 2010 by the Robert Wood Johnson Foundation and the Institute of Medicine. That report made two key recommendations:

- The proportion of nurses with baccalaureate degrees should increase across all schools of nursing to 80 percent by 2020.
- The number of nurses with doctoral degrees in nursing should double by 2020.

Last month, we held an event focusing on operating room nurses. As we always do, we invited nurses interested in joining a progressive health network and working with outstanding colleagues who are among the best nurses in health care.

We never stop looking for the best and brightest colleagues. If you know an experienced registered nurse who you think would be a great addition to our team, especially in the specialty areas mentioned, please ask that person to contact 610-402-CARE to arrange a meeting with us.

# March 17 Casual Conversations Session Canceled

BY [RICK MARTUSCELLI](#) · MARCH 13, 2015

The Casual Conversations session scheduled for March 17 from 11 a.m. to noon in LVH-17<sup>th</sup> Street's School of Nursing building has been canceled. The first ever Casual Conversations session was held on this campus only a few months ago. It gave colleagues an opportunity to ask president and chief executive officer Brian Nester, DO, MBA, FACOEP questions and share things on their mind.

This Casual Conversations session was cancelled because it is very close to the date of our next Colleague Forum. The forum will be held live at LVH-Cedar Crest on April 2 from 2-3 p.m. and will be simulcast to four different locations. During the forum, Dr. Nester will discuss LVHN's new strategic plan, share the status of our goals and provide tips about how colleagues can help us achieve our goals.

A new Casual Conversations session will be scheduled at LVH-17<sup>th</sup> Street soon after the Colleague Forum. Sessions also will be held at locations throughout LVHN. This will allow colleagues to ask question they may have following the forum.

# LVHN Nurses Recognized by Pennsylvania Patient Safety Authority

BY [KYLE HARDNER](#) · MARCH 12, 2015

Three LVHN nurses – Kathleen Cochrane, RN, Gloria Mazzie, RN, and Christine Reese, RN – are among 18 nurses statewide recognized by the Pennsylvania Patient Safety Authority for their efforts to improve patient safety within their health care facilities.

Cochrane, who works in LVH–Cedar Crest’s neonatal intensive care unit, worked with a pharmacist to prevent a potential medication error. Mazzie, who works in behavioral health at LVH–Muhlenberg, proactively realized the need to use a safer type of bag to store patient clothing. Reese, who works in the critical care float pool, worked with physicians to prevent a pair of potential errors.

[Posters featuring all three nurses](#), their photos and a description of their work currently are on display as part of National Patient Safety Awareness Week in the Harrisburg area. Also, the three nurses were invited to the authority’s public board meeting on March 10, where their achievements were celebrated.



The three nurses also are among the LVHN colleagues whose “great catches” are featured in a Patient Safety Awareness Week publication. The great catch awards are distributed monthly at LVHN to colleagues whose actions prevent adverse events and protect patient safety. The publication lists all 2014 great catch winners and includes articles submitted by colleagues who have implemented various patient safety initiatives. You can read it on the [Patient Safety intranet page](#).

# Engaging Our Patients – VIDEO

BY [GERARD MIGLIORE](#) · MARCH 11, 2015

Engaging patients means inviting them to partner in their care. We want them to share their symptoms, learn about their condition and ask questions when they don't understand. Our role is to listen, explain and keep them informed.

## *Engagement:*

- Leads to fewer errors and callbacks
- Reduces patient and family anxiety
- Lowers per-case costs
- Improves outcomes
- Creates better patient experiences

Engaging patients and giving them the best possible experience will help us earn higher Press Ganey, HCAHPS and CAHPS scores, which is part of our “better care” goal. Here are three ways we're making that happen.

## **Physician communication video**

Created to help physicians understand how communication impacts care quality in the hospital, the video:

- Features LVPG physicians
- Uses patient care scenarios to share tips and highlight communication benefits
- Includes patient perspective and thoughts
- Will be shown to all LVPG groups with hospital privileges



## Care team tools

New tools are making patient engagement a priority:

- Standardized communication boards
  - New boards installed in all inpatient rooms
  - Highly visible place to share important care notes and patient questions
- Admission orientation
  - Pilot program on several LVH–Muhlenberg units
  - Nurses encourage patients upon admission to share, learn and ask – Process will be evaluated for possible expansion network-wide

## iRound

To ensure our engagement efforts are on track, we're piloting a real-time hospital patient survey using iPads:

- Patients are interviewed while still in the hospital.
- Any concerns, including communication, can be immediately addressed.
- Feedback also helps managers recognize exceptional colleague performance.

# Butterfly Effect: How Wave 1 Go-Live Transformed Us

BY [JENN FISHER](#) · MARCH 12, 2015

On February 17 – the eve of Wave 1 Go-Live in our ambulatory settings – there were likely more than a few butterflies flapping their wings in LVHN and LVPG colleagues' stomachs. While the butterfly effect that night caused a sense of tension as ambulatory colleagues anticipated the next day, we can now see that those wings – coupled with the massive training and planning effort organized by the LVHN Epic team – helped launch our new Epic EMR system. Today our practices and ambulatory sites are in-flight with Epic.

## From Cocoon to Flight

In 2013 when LVHN announced we were moving to Epic and its integrated electronic medical record system, we were told Epic would bring transformative change: for information documentation; for access and revenue efforts and especially for patient care and engagement. We are beginning to see some of those changes in the three short weeks since Wave 1 Go-Live, as well as witness how incredibly adaptive our ambulatory colleagues are. **Here's how we're**



doing:

- **53,821 visits** documented within Epic through March 10
- **46,712 unique patients** received care from 635 providers
- **Under 6 minutes:** average registration time with Epic
- **95% chart closure** within four days

Behind-the-scenes, the LVHN Epic command center actively managed issues that came to light during Go-Live. **Since February 18, your colleagues at the command center have:**

- Logged over **9,005 tickets**
- **Resolved 96%** of those tickets

As of yesterday, the formal command center closed and colleagues returned to their usual locations. However LVHN Epic project leaders, application analysts and support staff will continue to work on any outstanding issues until they are resolved. As a reminder, issues are prioritized according to patient safety, regulatory and financial issues. Tickets for issues outside of those priorities – including break-fixes, maintenance and business as usual (BAU) updates – may be categorized as “optimization requests” and will be addressed once the system is stabilized for Wave 1.

### Taking Wing

The journey with Epic is still quite new to us and our patients, but it's getting easier day by day. And if you think about it, the system has some beautiful features we didn't have before, making this transition and EMR transformation something amazing to be part of. If you have questions about Epic, your workflows or how to do a task, **remember your key resources:**

- **Wave 1 supers users** will continue to be your primary at-the-elbow resource for questions concerning Epic now, as well as, into the future.
- **Divurgent support staff** will still be on-hand in many practices until March 20. If you have any questions about support, email them to [Epic@lvhn.org](mailto:Epic@lvhn.org).
- **Information services support center at 610-402-8303, option 5** is there to help if your super user or provider site champion cannot assist you with your question or concern.

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### Your Epic Calendars

#### Wave 2 Inpatient

**Now:** Wave 2 inpatient equipment delivery and set-up

**Now through May 1, 2015:** Wave 2 testing

**March 13:** Wave 2 Managers' Fair

**March 23–27:** Wave 2 pilot training

**May 11–31:** Wave 2 super user training

**June 1–July 26:** Wave 2 end user training

**July 20, 2015–Aug. 14, 2015:** PTO restrictions in effect for Wave 2 (inpatient) colleagues

**Aug. 1, 2015:** [Go-live for Wave 2, inpatient settings](#)

### **Wave 1 Ambulatory**

**March 25** – Wave 1 Super Users meeting to address referrals, scanning and clinical processes. Submit questions by March 20 to [Epic@lvhn.org](mailto:Epic@lvhn.org).

**Mid-2015 and beyond:** [Optimization](#)

Keep up with news about the LVHN Epic transformation on the [LVHN Epic intranet site](#).



New Website, Practice Names for LVPG