I have a very exciting announcement to share with you in this issue. Our Board of Directors has named Charles “Chuck” Bill as the hospital’s new Chief Executive Officer. Many of you met him during the CEO interview process and I’m sure you will all join me in welcoming him to the Bartlett Team.

Chuck brings excellent healthcare leadership and strategic planning experience and demonstrated skill at developing and leading successful organizations.

Chuck and his wife, Sue, have spent a great deal of time in Juneau over the years. Chuck’s mother grew up in Juneau.

In making the announcement, Kristen Bomengan, President of the Bartlett Regional Hospital Board of Directors, said, “We are extremely pleased to have secured the considerable experience and expertise that Chuck Bill brings to Bartlett Regional Hospital. His focus on building fiscally successful organizations, quality services, and physician relations are an excellent fit with Bartlett’s mission of providing our community with quality care in a sustainable manner.”

The Patient Access Services Department: Our Goodwill Ambassadors

At one point or another, every department at Bartlett Regional Hospital comes in contact with the public. With that contact comes the opportunity to present a positive image to our community. The Access Department is most often responsible for providing patients and visitors with their first impressions of our hospital.

We work very hard on guest relations. Patients and families coming into our hospital are often in a stressful situation. Our job is to ease their concerns in a caring and efficient manner.

In an average day, the Access Department handles a variety of requests from many persons including physicians, nurses and patients. Switchboard functions provide the voice of Bartlett Hospital by answering inbound calls from the public. Additional communication functions include monitoring the hospital’s emergency alarms and providing notification of all events, including codes, traumas and disasters. They oversee the daily operations of Bartlett House for guests who need accommodations while in Juneau for medical services. The Access Department staff must also be familiar with the procedures and guidelines of the various insurance companies and initiate the revenue cycle for all claims.

During the patient registration process, patients sometimes feel apprehensive and need support. "When people aren't feeling well, we need to be fast, accurate and above all, friendly," Access Staff member, Sheryl Love, noted. "If we don't do our job right, the problems reverberate throughout the hospital. Our main priority is to balance efficiency with large doses of caring and concern."

Another staff member, Elisha Solano, reports that her job is very rewarding. "I feel good at the end of the day when I know I was able to make a difference in a person's outlook by cheering them up, or smoothing away worries by being there to answer questions."

Last year Bartlett’s Patient Access Services Department registered approximately 38,000 patients for our inpatient and outpatient services.
The Bartlett Culture of Safety

By Bethany Rogers

In April 2013, about 50% of you chose to participate in a survey assessing Bartlett’s “Culture of Safety.” This survey asked questions about teamwork, leadership support for patient safety, event reporting, communication openness, staffing, handoffs, and communication about errors. The goal of the survey was to identify areas Bartlett needed to work on to improve its Culture of Safety.

The top three areas identified by the survey as opportunities for improvement relate to event reporting, communication about errors, and leadership support for patient safety. As we reach our one-year anniversary for taking the survey, I wanted to share some of the work that has taken place to improve the systems that make up our safety culture.

Event Reporting:
In May and June 2013, we transitioned from our Meditech-based occurrence reporting system to a new vendor, RL Solutions. Due to long-standing frustration with the difficulty of the Meditech occurrence reporting system, we specifically chose RL Solutions for its emphasis on user-friendliness. I hope that most of you have had the opportunity to enter an occurrence report into the new system during the past year. I call it an opportunity because I want to emphasize the fact that occurrence reports are not about “when someone screws up” or “when someone gets hurt” or “when someone makes an error.” Occurrence reports are one of the best ways for us to find out what is not working well that could be improved within our many, complex systems. Ideally, people should enter occurrence reports whenever things don’t go as expected, even if nothing was done in error, and even if no one got hurt. That way, we can deal with the problems in the system before they hurt someone or before someone gets caught up in a bad system and makes a mistake. We’d love to have more reports coming in, not fewer. In the coming year, we will be looking at more ways to encourage reporting.

Communication about Errors:
Errors can come from several sources – the systems and processes may not be designed such that they prevent or catch errors; there may be opportunities to improve education and training so that errors of awareness are less likely to occur; or, an error may occur because of a reason unique to a particular individual. The challenge is to determine which category is the correct fit, so that we pursue the most appropriate solution. We have made efforts to improve closing the loop with people who submit occurrence reports so that there is not a sense that those reports are going into a “black hole.” Each report is reviewed by the Risk Manager, Sara Parker, and because of her broad view of the errors being reported in the organization, she can identify trends or patterns that show needs for system changes or further training. In the past, we have not always communicated that a system or process changed or additional training was offered because of a trend in errors. This is something the Quality and Education Services departments are focusing on this year – coming up with a predictable way to characterize issues (systems-, training-, or personnel-related), and then better communication of the “why” behind the change.

Leadership Support for Patient Safety:
In January 2014, the Board Quality Assurance Committee and the Hospital Quality Improvement Committee combined into the Board Quality Council. There were several reasons for this change, but the most significant reason was to provide a venue for information about safety and quality to reach the Board of Directors in greater detail. Previously, information about safety and quality became diluted as it moved up the chain, but now members of the Board of Directors get regular, detailed information about process improvement projects happening within departments, patient compliments and complaints,
occurrence reporting trends, and various hospital staff and physician quality and safety initiatives and efforts. Not only does this new structure allow Board members to get better understanding and exposure to the safety and quality activities going on at Bartlett every day, but it allows them to recognize those efforts and the people involved in them. It allows the Board to get a better understanding of staff’s safety and quality successes and concerns, as well as a venue to hear their recommendations for solutions to safety and quality issues. This new structure has been functioning for three months, and is one way we hope to bring the organization’s leaders and staff together on issues of patient safety and quality going forward.

I appreciate those people who took the time to complete the Culture of Safety survey in 2013, as well as all of those who have worked to improve the Culture of Safety every day. Thank you for all that you do to build the Culture of Safety at Bartlett.

BRH Earns Diagnostic Imaging Accreditation

By Lorie Daniels

Diagnostic Imaging has been awarded a three-year term of accreditation in mammography as the result of a recent review by the American College of Radiology (ACR).

The ACR gold seal of accreditation represents the highest level of image quality and patient safety. It is awarded only to facilities meeting ACR Practice Guidelines and Technical Standards after a peer-review evaluation by board-certified physicians and medical physicists who are experts in the field. Image quality, personnel qualifications, adequacy of facility equipment, quality control procedures, and quality assurance programs are assessed. The findings are reported to the ACR Committee on Accreditation, which subsequently provides the practice with a comprehensive report they can use for continuous practice improvement.

The ACR is a national professional organization serving more than 36,000 diagnostic/interventional radiologists, radiation oncologists, nuclear medicine physicians, and medical physicists with programs focusing on the practice of medical imaging and radiation oncology and the delivery of comprehensive health care services.

We would like to let the mammography staff and the radiologists know that we appreciate their hard work and dedication to their patients.

BRH Earns Quality Respiratory Care Recognition

Bartlett earned Quality Respiratory Care Recognition (QRCR) under a national program aimed at helping patients and families make informed decisions about the quality of the respiratory care services available in hospitals.

About 700 hospitals or approximately 15% of hospitals in the United States have applied for and received this award.

Announcing the BRH 2014 Organization Culture Survey

When employees feel a heightened connection to the organizations they work for, including a strong connection to mission, work, and team, organizations excel in key areas: profitability, productivity, innovation, customer satisfaction, and employee retention. At the same time there is a significant reduction in absenteeism, workplace injuries and lost, stolen or damaged inventory. On an individual level, engaged workforces create environments where it is fun to come to work, where employees feel valued as individuals and have a high degree of satisfaction about the work they are able to accomplish. This sense of heightened connection is referred to as Employee Engagement. A high level of employee engagement is good for individual employees and good from a business operations standpoint. Everyone wins!

Levels of employee engagement can be measured. Working together, we can use those results to define opportunities to improve our organization culture and increase the level of engaged culture at BRH.

I would like to invite you to participate in this process. BRH will be conducting an employee culture survey from 6:00 a.m. on Monday, April 21 through 8:00 a.m. on Monday, May 5. The survey includes questions about teamwork, morale, employee involvement, information flow, supervision, meetings, customer services and quality. Your honest and direct feedback is encouraged and welcomed. Work time and access to a computer will be provided so you can participate in the survey. Paper surveys will also be available for those employees who are more comfortable participating in that manner. It should take about 15 minutes to complete the survey.

Your responses to the questions are completely confidential. CBJ has been conducting a similar survey on and off for the last 12 years. For
the last five years, they have enjoyed a voluntary return rate of 94%. BRH will use an identical methodology for analyzing and reporting the data. It would be great if BRH could match or exceed CBJ’s return rate.

The survey data will be gathered through Survey Monkey and reported out in an aggregate form. Once the survey data is collected, reports will be run and provided to the entire hospital so everyone can see how BRH as a whole fared in the survey. Specific reports will also be run by department and division so you can assess how your individual work areas and teams view yourselves. Teams will be asked to discuss the data and identify those areas that are strengths that can be built on – moving from good to excellent, and those areas that need a little more work. Next year, we’ll run the survey again and see how we fared.

While the survey period is running, we hope to have Survey Champions in each major work area to remind people to participate. If you would like to be a Survey Champion for your area, please contact the Human Resources Office.

If you have questions or concerns please contact Mila Cosgrove in the HR office: 796-8677 or via e-mail: mcosgrove@bartlethospital.org

CBJ/Bartlett Health Benefits: A Self-Insured Plan
By Jess Brown

Did you know that the CBJ/Bartlett Benefit Plan is a self-insured plan? What does that mean? Self-insured means that we are able to manage our own health plan and have more decision-making control in the design and rates of our plan. Premera Blue Cross/Blue Shield of Alaska is our Third Party Administrator: they manage the payment of our claims. A relationship with Premera also allows us to take advantage of their network of providers and get lower rates for medical services.

Being self-insured also means that our member’s healthcare usage is the only usage that affects our rates. Whatever premium payments are made by the employer on your behalf and by you, go into the health plan fund. In turn, all claims payments are made from that fund. We pay Premera a small administrative fee to manage that process. This allows us to provide you with a high level of benefits at a lower cost than would be possible under a traditional insurance plan.

What does all of this mean to employees? It means that the smarter we are with our health plan usage, the healthier our fund is and the lower our rates will be.

So what can you do to help keep the health plan fund healthy? Keep yourself healthy and be a smart medical consumer!

• Practice Prevention—the CBJ/Bartlett Health Plan covers preventive care visits at 100% when you go to an in-network provider. These visits are important because they can help catch something before it’s too late.

• Choose an in-network provider—by choosing an in-network provider, you will have a lower out-of-pocket cost. This is because in-network providers agree to a lower negotiated fee for services.

• Reduce unnecessary ER visits—the average cost of an ER visit to the CBJ/Bartlett health plan in 2012-2013 was $1568.00, while the average office visit was $99.00. Of those ER visits, 46% were non-emergent or primary care treatable. If you are unsure if you need to go to the ER, take advantage of Premera’s FREE 24-hour NurseLine. It is staffed by registered nurses and calls are FREE & CONFIDENTIAL. The number is 800-841-8343. It is also located on the back of your Premera ID card.

Do your part in keeping our health plan “healthy”!

Human Resources Notes
Premera NurseLine Reminder
Available 24 hours, 1-800-841-8343
Spring Reminder: Allergies
Spring is coming, and for some of us, allergy symptoms come along with the season. Having trouble with allergy symptoms? Not sure what to do for relief? Call the 24-Hour NurseLine anytime about your medical needs or concerns. It is free and confidential, and caring nurses will help provide you with peace of mind. Make a note of the number in your cell phone or other place you can reference later 1-800-841-8343. Always call 911 or your local emergency number if you are having a medical emergency.
NurseLine gives general information, does not diagnose or prescribe, and cannot give coverage determinations.
Help Decrease our Health Plan Cost
Register for Electronic Explanation of Benefits (EOBs). Our goal is to increase registration for electronic Explanation of Benefits (EOBs) before May. Go to www.premera.com to register or login as a Member.

Blue Heron Gifts
I am happy to report that starting April 14, Blue Heron Gifts is open on Mondays from 2:00 to 5:00 p.m.

We are still looking for a Volunteer for the Monday morning shift - 11:00 a.m. to 2:00 p.m., so, if you know someone who would like to volunteer, please have them contact us in the Foundation Office at: (907) 463-5704

Stop in, because we have a new shipment of Seattle Chocolate Bars and truffles!

Thanks!

Linda Hamilton, Administrative Assistant, BRH Foundation

New Employees
Rosilyn Hill, Pharmacist
Nina Tomlinson, Sleep Lab Coordinator
Bobby Montez, EMT

Increasing Efficiency: One Project at a Time!
By Dianne Bigge

Your co-workers are diligently working to make the processes in your department better!

Who might they be? Currently, Kirsten Kincaid (MS), Carolyn Garcia (HIM), Israel Ginn (DI), Eileen Jones (QI), Gail Moorehead (SD) and Tara Helleloid (Pharmacy-soon to be leaving us for MN), along with several members of the Quality Department, are participating in the Reducing Waste and Increasing Efficiency Workshop.

They have been meeting every other week for the last 6 weeks, learning and applying the steps in the Bartlett Improvement Ramp—the BRH Process Improvement System.

The current list of waste reduction and efficiency projects are designed to address: department cross training, email communication efficiency, core measures/critical information sharing, clinical ladder reviews, release of information process, uploading prior imaging studies for comparison and follow-up, formulary ordering process and standardization of Med-Surg shift report.

Participants will be looking for your help in gathering data and implementing small changes in how things are done.

Lab Announces New Services Directory
By John Fortin

The Laboratory and Histology departments are proud to roll out the new and updated Laboratory Service Directory. Unlike any of the previous versions, this resource is available on the Bartlett Regional Hospital network. The specific folder, Laboratory Service Directory is located on the W: drive and is available for all staff. The folder contains instructions for use of the directory along with the directory itself. Please review the instructions for helpful information.

All printed copies of previously distributed Laboratory manuals are outdated and need to be removed, if they have not been already. Please be sure to save any specific notes that may have been inserted into older notebooks as they will be gone very soon. The Laboratory Department decided to move to an online version for multiple reasons.

One main point was feedback from nursing staff. Also, maintaining a consistently updated printed copy was difficult. This new process allows staff to setup a shortcut on individual desktops, for ease of access. We hope all find this new directory useful. This has been a large project which has taken months to complete. Please inform us of any concerns or updates in your department that are applicable to the directory. We hope all staff find this new directory a useful tool in the care of our patients.

If you require any additional information, please feel free to contact the Laboratory Manager, John Fortin, at 796-8617.