

WHAT'S UP DOC?

PHYSICIAN NEWSLETTER OF LAKEWOOD REGIONAL MEDICAL CENTER

2011 HOSPITAL GOAL

Our 2011 hospital goal is to attain **Tenet's Circle of Excellence Award**. The award typically recognizes those Tenet hospitals that have demonstrated Balance Scorecard (BSC) excellence. Receiving the award would be a first for LRMCM. Ranking high in the BSC among all Tenet facilities will make this goal a reality.

What is BSC?

The Balanced Scorecard was designed specifically to help align an organization around its strategy, mission, and goals. It's built to provide transparency and continuous improvement across all dimensions. The tool creates consistency throughout the company in how we define and evaluate performance. It also incorporates Tenet's 5 pillars to reflect key strategic focus (5 pillars = Quality, Service, People, Cost and Growth).

- Quality measures take into consid-

eration both nationwide standards and prior year performance.

- Service metric targets have been set based on 2 components:
 - Physician Satisfaction – Percent improvement targets are assigned to each facility using a straight line methodology.
 - HCAHPS Inpatient Satisfaction – Hospitals are expected to either attain a 'gold standard' performance for each measure or if the hospital was better than 'gold standard' in the previous year, they must maintain previous year performance.
- People metric targets have been set based on overall company-wide goal. Hospitals are expected to either attain a 'gold standard' performance for each measure or if the hospital was better than 'gold standard' in the previous year,

they must maintain previous year performance with respect to employee turnover and retention.

- Financial (Cost and Growth) metric targets are set based on finalized budget numbers.

How do we excel on BSC?

While all of the metrics are important to our success as a hospital, focusing on **Quality and Service** is imperative. Our quality is improving every day and I'm extremely proud of the effort that's put in – **thank you!** Service is equally important. Patients and physicians have choices in terms of which hospital to choose and our goal is to make LRMCM the hospital of choice.

LRMCM Overall Ranking within our Region (12 Hospitals)

Within Tenet (50 Hospitals)

Date	LRMCM Ranking within Tenet top = 1 bottom = 50	LRMCM Ranking within CA Region Hospitals top = 1 bottom = 12
1/1/2010 – 5/31/2010	30 th	8 th
1/1/2010 – 6/30/2010	21 st	8 th
1/1/2010 – 7/31/2010	25 th	6 th
1/1/2010 – 8/31/2010	20 th	6 th
1/1/2010 – 9/30/2010	19 th	6 th

LRMCM Service Ranking within our Region (12 Hospitals)

Within Tenet (50 Hospitals)

Date	LRMCM Ranking within Tenet top = 1 bottom = 50	LRMCM Ranking within CA Region Hospitals top = 1 bottom = 12
1/10 – 8/10	38 th	8 th
1/10 – 9/10	37 th	7 th

LRMCM Quality Ranking within our Region (12 Hospitals)

Within Tenet (50 Hospitals)

Date	LRMCM Ranking within Tenet top = 1 bottom = 50	LRMCM Ranking within CA Region Hospitals top = 1 bottom = 12
1/10 – 8/10	33 th	7 th
1/10 – 9/10	30 th	7 th

CAUTI IMPROVEMENT PROJECT

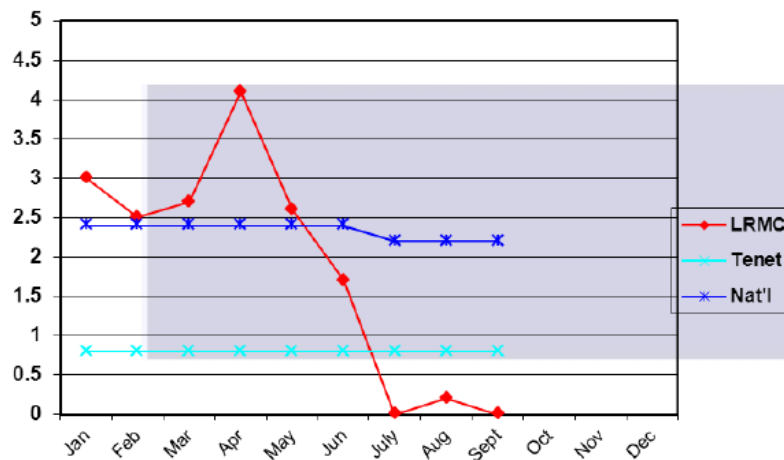
In April 2010 we implemented a new clinical strategy in an effort to decrease our catheter acquired urinary tract infection (CAUTI) rates. Based on evidence-based research a "foley bundle" was developed, approved, and activated. The medical staff approved a nurse-driven policy allowing nurses to automatically remove a foley cath based on

approved criteria. This strategy, along with other infection prevention strategies, has reflected a significant improvement in our CAUTI rates. We are now below the Tenet goal and far below the national average. We have been able to sustain our goal of < 0.5% for a consistent three months and are confident we will continue to

do so. It is through the partnership of medicine and nursing that will allow us the ability to move forward and drive practice based on research and the most current standards of care.

Jodi Hein, Chief Nursing Officer

Catheter Acquired Urinary Tract Infection Rates-2010



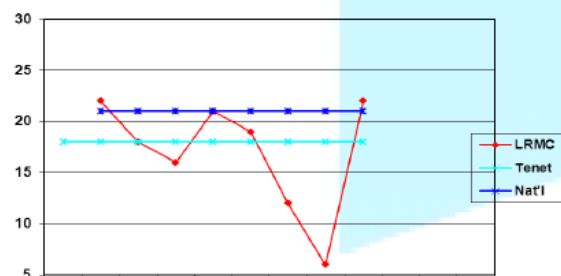
CONGESTIVE HEART FAILURE

Congestive Heart Failure is a diagnosis the clinical staff has been focusing on in an effort to reduce our CHF readmission rates. As part of the 'pay for performance' initiative Medicare will decrease reimbursement based on readmission rates for certain diagnosis. For CHF, the requirement is to prevent readmission within 30 days of discharge. We now have a CHF coordinator, Lorraine Rol, RN, who coordinates nursing care and education for the patients to ensure they have an understanding of diet, weight, meds, exercise, and overall disease management. Lorraine also provides the patients with several tools to take home to monitor their disease. In addition, we are in the process of educating local nursing home staff with CHF in-services and tools to monitor their CHF patients after discharge from our facility. We started this process in May of this year and have seen significant improvement, thus

far. In September, one CHF patient was readmitted 3 times after being discharged to a SNF, unfortunately, increasing our rate for that month. Moving forward, we are confident to get our lower rate back on track. Our goal is to sustain our readmission rate to < 10%.

Jodi Hein, Chief Nursing Officer

Congestive Heart Failure Re-admission Rates- 2010



HPF ELECTRONIC RECORD UPGRADE

Changes to our electronic medical record (HPF) are scheduled for February, 2011.

If you currently access HPF through the "MY PATIENTS" page of etenet Physician Portal, the changes for you will be minimal, and no additional training will be needed.

If you are accessing HPF through the "MY PORTAL" page of etenet Physician Portal, and "Launch" HPF from this page – you will be experiencing the most changes. We think you will be pleased with the changes you will see. Using the "My Patients" page of portal will provide these enhance-

ments:

- ⇒ You will have direct access to HPF. You won't have to select "hub 3" or re-enter passwords.
- ⇒ Completing deficiencies and accessing patient records will be easier.
- ⇒ When completing dictations, it will be easier to access the portion of the medical record you need to view (H&P, progress notes, etc.).

What can you do now to prepare for the new HPF?

The next time you need to complete your medical records, come to the health information management (HIM) department. We have handouts in the chart completion carrels that will walk you through using the "MY PATIENTS" portal page, or the HIM staff will be pleased to show you how to do it. It will just take a few minutes of training, and we are certain you will like the new features.

MEDICARE PERFORMANCE INITIATIVE

In light of the challenges and uncertainties surrounding health care reform, Lakewood Regional Medical Center launched its Medicare Performance Initiative (MPI).

WHAT IS MPI?

MPI is a Tenet-wide initiative that focuses on Medicare efficiency through data driven and outcomes-

based processes. This project is aimed to reduce unnecessary cost without negatively impacting quality.

WHAT IS THE PURPOSE OF MPI?

Part of the process will be to better prepare LPMC for upcoming Medicare payment cuts by identify and improving hospital/physician variations that

have led to cost inefficiencies. We are fortunate to have several of our physicians involved in the process. We appreciate their participation, expertise, and leadership.

"GO GREEN"

In an effort to "Go Green" and improve communication for the Medical Staff, we are asking you to take a moment to update your email address and cell phone number so we can be sure our files have the most current information. If you have not already done so please fax this information to 562.634.6303 or stop by

the Medial Staff Office to provide us with your information. Thank you!

GENERAL STAFF MEETING

Friday, November 19, 2010

Lunch and Meeting at 12:30pm

Basement

Please RSVP to 562-602-6811

Welcome New Physicians



Abdul Elah Abu Qare, M.D.

Internal Medicine

Dr. Abu Qare joined the medical staff in October 2010. He is Board Certified by the American Board of Internal Medicine. He earned his Medical Degree and completed his Internal Medicine Residency at Case Western Reserve University in Cleveland, Ohio.



Claudia Epele, M.D.

Family Practice

Dr. Epele joined the medical staff in October 2010. She earned her medical degree and recently completed her Family Practice Residency at Stanislaus County Health Services Doctor's Medical Center in Modesto, California.



Ana Faitlowicz, M.D.

Hematology/Oncology

Dr. Faitlowicz joined the medical staff in October 2010. She earned her medical degree and completed her Residency at the University of Sao Paulo Hospital. She is currently an Associate Clinical Professor in the Division of Hematology/Oncology at the University of California Irvine.



Timothy Geraci, M.D.

Infectious Disease

Dr. Geraci joined the medical staff in October 2010 and is Board Certified in Internal Medicine. He received his medical degree and completed his Residency in Internal Medicine at the University of Southern California, and his Infectious Disease Fellowship at Harbor UCLA Medical Center.



Shivanand Pole, M.D.

Internal Medicine

Dr. Pole joined the medical staff in October 2010 and is Board Certified in Internal Medicine. He received his medical degree and completed his residency at King Drew Medical Center and Loma Linda University Hospital.



Jennifer Stever, D.O.

Emergency Medicine

Dr. Stever joined the medical staff in October 2010 and is Board Certified in Emergency Medicine. She received her Osteopathic degree and completed her Residency at Upstate Medical University in New York.

Sincere thanks to all physicians who continue to trust LPMC with patient care needs. On behalf of the hospital staff and administration, we thank you for your support.

Please let us know how we are doing by giving us your feedback.

• **Nursing/Quality:**

Jodi Hein, CNO
(562) 602-6781

• **Ancillary/Support/Operational:**

Steve Cornejo, COO
(562) 602-6739

• **Admitting/Finance/Medical Records:**

Mary Beth Formby, CFO
(562) 272-6420

• **Business Development/Marketing:**

Dianne Pfau, DBD
(562) 602-6709

• **MD Relations/General & Other Concerns:**

Joe Badalian, CEO
(562) 602-5055