

March/April 2016

Anderson Times

Building Better Healthcare *Together*

Anderson Hospital is excited to announce to our staff and volunteers a successful expansion of services to our north in Staunton, Illinois. Community Memorial Hospital will soon be officially affiliated with Anderson Hospital, under a new name of Community Hospital of Staunton.



The hospitals announced the intent to create a strategic partnership back in October, 2015. Since then, much work has been done behind the scenes including due diligence and other legal preparations. With both Boards of Trustees recently approving the alliance, a formal announcement is planned in June. At that time, the new Community Hospital of Staunton will host a ribbon cutting and tour of its newly renovated facility.

Community Hospital of Staunton will retain its own identity while aligning as “An Anderson Healthcare Partner.” Anderson’s Board of Trustees will have ultimate oversight of the facility while the two

organizations plan together to enhance services and improve the coordination of care.

“Our hometown healthcare will be stronger and better with this affiliation, and it will provide additional access to Anderson’s advanced diagnostics, specialty care and resources to better serve our patients,” said Sue Campbell, Community Memorial Hospital’s CEO.

“Community Memorial Hospital and Anderson Hospital have a history of working together cooperatively to improve access to healthcare services for the residents of Macoupin County and northern Madison County,” said Keith Page, President and CEO of Anderson Hospital. “As healthcare continues to evolve, our organizations will be better positioned to adapt to change together so that we can continue to provide coordinated, quality care, close to home.”

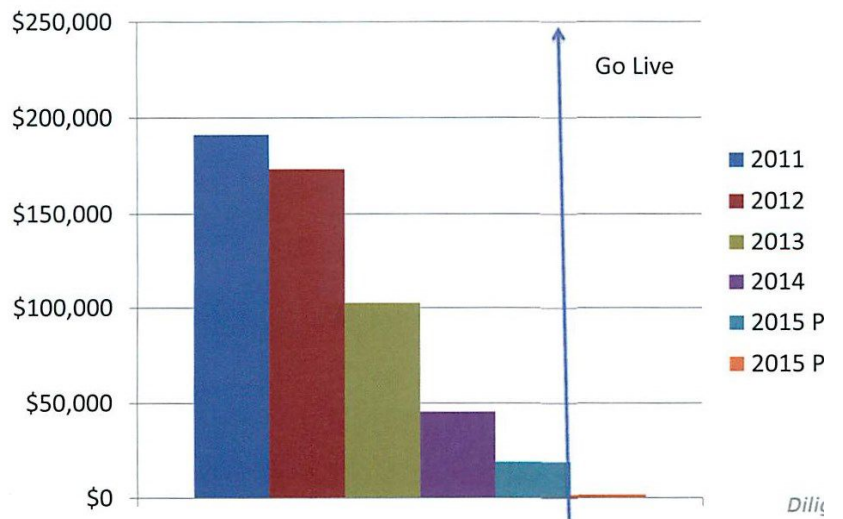


SAFETY NEWS

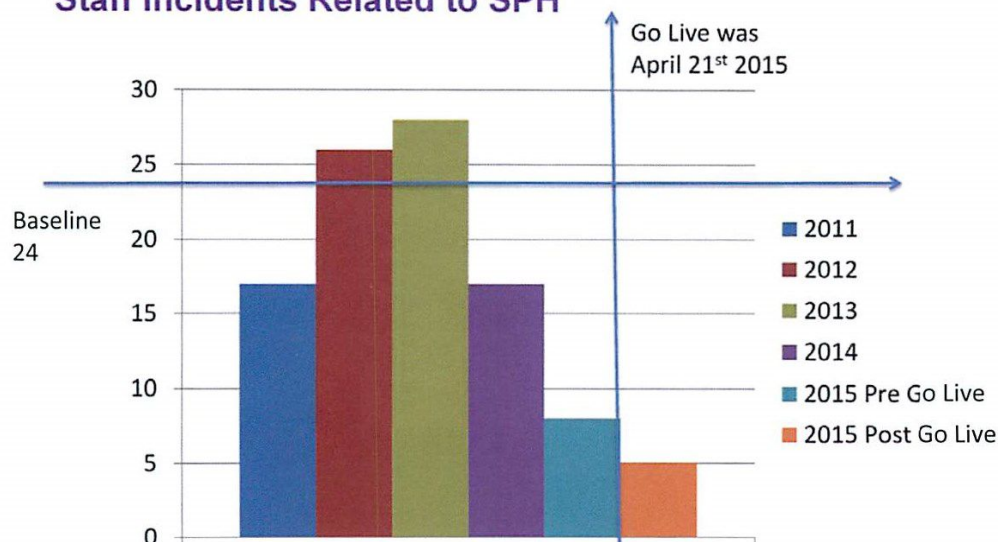
The “Know Safety, No Accidents” initiative celebrated its one year anniversary on April 1, and there was definitely reason to celebrate! Over the past year, the new standard and best practice for how we move patients has made a positive impact on staff and patient safety which is clearly visible in the graphs shown. We have built a strong culture of care through people, products and processes that protect all staff and patients from injury when transferring or assisting patients. The story doesn’t end here, however, we must remain consistent in our efforts by continuing to embrace this initiative so we can make a difference in our lives and the lives of our patients.



**Workers' Compensation Costs
SPH Injuries**



Staff Incidents Related to SPH



FOUNDATION

Anderson Welcomes New Foundation Executive Director



Join us in welcoming Lynn Huelsmann, the new Executive Director of the Foundation. Lynn is a graduate of Southern Illinois

University at Edwardsville with a Bachelor's degree in Mass Communications and a Master's degree in Public Administration. With 15 years of nonprofit management experience, most recently at Places for People and Independence Center, Lynn is excited to join the Anderson team to help raise the support necessary to further the mission of the foundation. "I approach my work in the nonprofit sector with an unwavering commitment to the mission and the individuals with whom my organization is privileged to serve," says Lynn.

When not at work, Lynn enjoys cycling, spending time with family and friends, and working out at the YMCA!

O'Saben Joins Hospital Foundation Board



The Anderson Hospital Foundation is proud to add Joan E. O'Saben, MBA, CPA, CPCU, to their leadership team as a Foundation Board Director. O'Saben, Chief Financial Officer and Treasurer, Senior Vice President at Hortica

Insurance & Employee Benefits in Edwardsville, Illinois, brings a wealth of expertise to the Foundation. She is an active community member with volunteer service to the Land of Goshen Rotary,

Edwardsville YMCA, SIUE School of Business, United Way of Southwestern Illinois and other not for profit organizations.

"I am humbled to be asked to serve on the Anderson Hospital Foundation Board," said O'Saben, "and, as with any undertaking that comes my way, I will strive for success in advancing the Foundation's mission. As a native of our community, I have both the desire and responsibility to serve in efforts to better it. And, because Anderson Hospital is a cornerstone here, my response to the Board's generous invitation was a resounding 'yes.' I am honored for the opportunity to learn and do more for the Hospital."

Anderson has been making a difference in the healthcare of Madison County residents since 1977. We are an independent, not for profit hospital dedicated to creating a health care setting in which quality of life and service excellence are experienced by our patients, their families, our staff and the community. In an effort to recognize Anderson Hospital as a charitable organization within our community, the Anderson Hospital Foundation was established in 2011.

The Anderson Hospital Foundation enables longevity of a donor gift and offers donor opportunities such as endowments, planned giving, charitable gift annuities, grants, memorials, bequests, naming rights, annual campaigns, and future capital campaigns. A governing Board of Directors focuses solely on contributions, prospecting and obtaining new donors, while making certain sound planning investments are made for the foundation, all creating an increase of income revenue for the hospital.



PRIVATE ROOMS: Building a **Better** Patient Experience

Anderson Hospital's long-term planning for private patient rooms has come to fruition. With years of careful planning and necessary building modifications now complete, the start of a private patient room project has begun at Anderson Hospital.

21 new private patient rooms will be created in a space once used for physician offices. The current building known as Physician Office Building I now houses our state-of-the-art cardiac cath labs on the third floor and will house a new private patient room unit on the entire second floor.

In addition to the new private patient unit, renovations on current surgical and medical units within the hospital will occur simultaneously, creating private patient rooms within existing units. By the end of

2016, Anderson Hospital will offer private patient rooms throughout the hospital.*

WHY IS A PRIVATE ROOM SO IMPORTANT?

Private rooms:

- Increase privacy for patients to discuss care with their physicians, nurses and allied health members

Research shows private patient rooms **shorten hospital stays.**

- Allow the care team to bring medical services and technology to the bedside
- Have been proven to reduce infections
- Minimize stress and improve sleep as well as healing

- Reduce noise for a more environment
- Allow for patient and family

THE BOTTOM LINE:

Private patient rooms offer an effective model for enhancing the patient experience. Throughout its history, Anderson Hospital has responded to the needs of our community residents. Each new expansion has been driven by a commitment to community needs.

As an independent, not-for-profit hospital, we rely on the co-

PRIVATE ROOMS
Building A Better Patient Experience

I/We
Name
Mail
City:
Phone
Name

IN SUPPORT OF THE BUILDING
THE SUM OF \$ _____

CHECK OR CHARGE CREDIT CARD

DRAFT MY ACCOUNT: GIVE ME
I WILL PAY MY GIFT IN _____

INVOICE ME FOR FUTURE GIFT

CREDIT/DEBIT TYPE: VISA/MC
CARD NUMBER: _____
NAME ON CARD: _____
SIGNATURE: _____

DONATIONS CAN BE MADE ONLINE AT



People in private rooms simply **get better faster** and have a **better patient experience.**

us create a health care setting of quality and service excellence.

Please join us in our effort to support this \$7.2 million Private Room Project.

**The Acute Rehab Unit will continue to offer semi-private rooms with a total of 20 beds.*

>> Your donation will help build a better patient experience. To learn more, please contact:
Anderson Hospital Foundation
618-391-6426

restful
family to visit freely
r the most cost-effective inpatient care.
Anderson Hospital
ds of Madison
w service and
in direct response
-for-profit
community to help

are pleased to help build a better patient experience with our donation to the private rooms campaign.

Name: _____
Billing Address: _____
State: _____ Zip: _____
City: _____
Email: _____
Name to appear on recognition materials: _____



IN SUPPORTING A BETTER PATIENT EXPERIENCE CAMPAIGN, WE/ I HEREBY PLEDGE AND AGREE TO PAY _____ . I WILL FULFILL MY GIFT AS FOLLOWS:

ONE-TIME PAYMENT/DEBIT - AMOUNT: \$ _____

Payments may be pledged in equal installments via Credit or Debit Card over the next 3 years.
INSTALLMENT(S) - AMOUNT PER MONTH: \$ _____

RECURRING PAYMENT - AMOUNT: \$ _____

CARD TYPE: VISA MASTERCARD (circle) DISCOVER
EXPIRATION: _____ 3DIGIT SECURITY CODE: _____
BILLING ZIP CODE: _____
DATE: _____

LEARN MORE ONLINE AT ANDERSONHOSPITAL.ORG/PRIVATEROOMS



EVENTS

May 16

Golf Tournament
Sunset Hills Country Club
Edwardsville, Illinois
9 a.m. Registration
10 a.m. Shotgun Start

June 11

Sporting Clay Classic
NILO Farms
Brighton, Illinois
7 a.m. Registration
8:30 a.m. 1st Round Shooters
12:30 p.m. 2nd Round Shooters

August 25

Wine Tasting Event
Villa Marie Winery
Maryville, Illinois
6 p.m. to 9 p.m.

Gala Coming in January 2017!

Lean Looks at ED Throughput



Katie Ward, RN
LEAN Facilitator

In the January Anderson Times edition, the LEAN program announced that an ED Throughput project would occur at Anderson Hospital in 2016. ED crowding is an ongoing concern across the United States that has caught the attention of the Centers for Medicare & Medicaid Services (CMS). As a result, CMS requires hospitals to publically report measures that indicate crowding. Issues with an aging population, changes in managed care, perceptions by the community that the ED is a treatment center, more acutely ill patients, and an increased population that is now insured are all leading to the trend in ED crowding. While Anderson Hospital realizes that we cannot control issues outside of the hospital, the organization has taken a proactive approach to look at ED crowding as a hospital-wide issue. The organization realizes that ED crowding is costly and leads to a lack of community trust. The Agency for Healthcare

Research and Quality (AHRQ) stated “because of the high patient volumes that many ED’s experience, the ED may be the clinical area that the public is most familiar with, thereby making it the defacto public face of the organization.”

In March the ED Executive Team was created to represent the three sectors of Healthcare: Quality, Clinical and Financial including:

- ☐ Chris Cesa
- ☐ Jean Day
- ☐ Dr. Geldmacher
- ☐ Lisa Klaustermeier
- ☐ Dr. Lane
- ☐ Pat Niel
- ☐ Keith Page
- ☐ Stacy Portney
- ☐ Katie Ward
- ☐ Michelle Ward
- ☐ Mike Ward

Collaboratively a timeline has been developed to outline the year- long project that will take place.



Four Kaizen events have been designed to take place over the next two months. Kaizen events bring front-line staff (including physicians) together

Phelps Retires After 37 Years with Anderson



Dee began employment at "Oliver C." Anderson Hospital on June 4, 1979 as an Administrative Secretary to Daniel A. Hicks, Executive Vice President. In 1983, she was appointed Administrative Associate and

assumed greater responsibility for management level functions, coordinating Board of Trustees activities and handling of legal claims. Dee had previously worked for an attorney in the trust department of a bank, and it was there she became interested in legal work.

Following the death of Mr. Hicks, Dee was appointed Risk Manager, became a member of the Administrative Team and reported to R. Coert Shepard as President of the Hospital. The term Risk Manager did not really develop until the mid 80's in hospitals. She later reported to Keith Page when he became President, served on the Administrative Council, and received the title of Administrative Director of Risk Management.

Dee joined the American Society of Healthcare Risk Management (ASHRM) in 1987, became a charter member of the Illinois Society of Healthcare Risk Management (ISHRM) in 1988, and served as a board member and treasurer from 1999-2012. She

received her certification as a Certified Professional in Healthcare Risk Management (CPHRM) in 2003. "We still have some corn growing on the west side of the hospital, but in the 1980's, the hospital was surrounded by farm land," described Dee. "Now that land has buildings and parking lots. The hospital building has expanded in all directions, except up, and medical technology has greatly improved. Quite a change, but I loved being part of it."

Dee ended her full-time position as Admin. Director of Risk Management on March 31st, but will continue to work on a part-time basis as a Risk Management Consultant.

Michelle Ward Named Administrative Director of

Process & Clinical Improvement



Michelle Ward has been appointed the Administrative Director of Process and Clinical Improvement. In this

role, she initially assumes Administrative responsibilities for Board of Trustees support, Lean and Performance Improvement Initiatives, Patient Safety and Patient Advocacy functions. She will also lead the PolicyTech initiative and the Joint Commission clinical contract management functions. Her responsibilities later this year will expand to include Medical Staff services and

CONTINUED

accreditation/license requirements.

Michelle has served as the Director of Performance Improvement/Health Information Management at Anderson for 9 years and brings great enthusiasm and knowledge to her new position. Please join us in congratulating Michelle on this appointment.

New HIM Director to Begin May 2



Jennifer Standley has accepted the position of Director, Health Information Management. In this role, Jennifer will be responsible for the daily operations of the Health Information Management department along

with an oversight of Patient Privacy. She will begin her role as Director of Health Information Management on May 2nd. During the next few months, the role of Privacy Officer will transition from Candice Meyler to Jennifer. (More to come in the future on this transition).

Jennifer comes to us from Phelps County Regional Medical Center in Rolla Missouri, where she was the Assistant Director of Health Information Management. In this role she managed the clerical operations within the department. Prior to that role, Jennifer served as the Physician IT Coordinator which included training and support of the EMR to physician and staff. Jennifer attended Stephens College where she received her Bachelors of Science in Health Information Management.

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for a week-long event to discover the root causes of our issues and create solutions that to rectify the problem through continuous improvement. Metrics for each project will be developed and reported on at the 30-60-90-120 day mark. The Kaizen events will focus on the registration, triage, lab, radiology, ED physicians, transportation, physician consult, transfers to supporting departments (Inpatient Units, Surgery, GI Lab, Cardiac Cath Lab, and OB), and compliance with Stroke and Chest Pain certification requirements.

The first Kaizen event has been scheduled for the

week of 04/11/16 and will include the ED, Registration and Informatics staff. The team will focus on process issues within the waiting room, registration, and triage. The next three events have been scheduled for the weeks of 04/25/16, 05/09/16, and 05/23/16.

The LEAN program looks forward to communicating the progress of the events throughout the organization. Continuous improvement championed by front-line staff provides the most effective method for improving patient care and experience.