

March 11, 2009

This Week

[Meanwhile, at the Board of Directors](#)

[Raising the patient safety flag higher](#)

[A "top 100" nursing workplace](#)

[The next employee opinion survey](#)

Spring Break!



This week is our own little hello to spring. It's been a long, tense winter with one eye on the global financial markets and another on, well, the global financial markets. I'd like to move them to something a little more fun.

So we'll be holding two "Spring Breaks," today and tomorrow. We'll be serving you cool snacks and beverages. It's a chance for all of us to talk and mix informally and maybe even share plans for the summer. I look forward to seeing you there.

700 Step into Gear

We have a few more weeks left on this phase of Step into Gear so keep

Meanwhile, at the Board of Directors...

Our board of directors had one of its regular meetings recently. While many readily recognize the names of the 11 prominent businesspeople, clinicians and academicians on our board, I suspect not everyone knows what goes on when they meet.

The short answer, of course, is that the board runs the place. It's my boss. At the meetings and the many phone calls and visits between meetings, leadership provides our 11 board members with the hard performance data, business intelligence, technological and clinical input, employee news and everything else they need to inform their decisions. And then we report where we've succeeded and where we've slipped in implementing the board's policies.



But the short answer leaves you with an incomplete, overly mechanical view of many UCH board members' genuine passion for solving the nation's health care crises.

These are people, after all, who freely devote hours of their much-needed, over-booked time each month not only to UCH, but an entire region's health. It is a level of commitment most people just pretend they have.

Raising the safety and quality flag higher

For example, two board members - Steve Dawes and Beth Slifer - have formed a new board committee devoted exclusively to improving patient safety and clinical quality.

This is far from the first time that the board has wrestled with these issues. It has long aggressively supported safety and quality programs like our 24/7 stroke team, staffing up our intensivist crew, sharpening our information technology, and funding efforts to implement and measure the many processes - hand hygiene, medication protocols, etc - that are associated with safe hospital visits and good clinical outcomes.

Bang for the patient buck. But the new committee is a step toward building still more momentum behind doing even more to ensure patient safety. And, it puts a critical board-level spotlight on this very important issue.

The committee will make recommendations to the full board for how to invest in safety and quality. It will evaluate how our patients - and the hospital - will get the most bang for the substantial dollars and substantial energy we put into improving quality each year.

As you know, I've long said that no matter how many priorities we have, patient safety will always be the first among equals. I, for one, am quite proud that we are making it still more public.

A "top 100" nursing workplace

Lost somewhere in the mail was notification that *Nursing Professionals* magazine named UCH one of the nation's "Top 100 Hospitals To Work For." This is big news. All of us are aware that there is a terrible nursing shortage in America, and that attracting top nurses - the kind we hire here - is even harder.

This recognition certainly will help us in recruiting. And it will help convince nurses who like the challenging kind of medicine we deliver that UCH is a wonderful place to

walking.

More than 700 of us are wearing our pedometers and counting our steps in the effort to cut 100 calories a day off our menus and become more fit. Keep it up. I have, however, asked Chief Compliance Office Roger Gopalan to audit Dr. Bruce Evans' steps; that guy is amazing. All I can say is I am glad he is on my team.



Something On Your Mind?

[Talk to me](#)



work.

But it's also an affirmation of the hard work that has gone into making this a Magnet hospital, a place of outstanding clinical outcomes and, I hope, an environment that helps build rewarding careers. Much credit goes not only to the nursing staff of CNO Colleen Goode, but also to the many physicians here who work with nurses as genuine partners in caring for our patients.

The employee opinion survey: time to sound off

As I mentioned at my "State of the Hospital" sessions with you last week, we will be distributing the Employee Opinion Survey starting on March 16.

Engaging each of the 4,500 members (counting physicians) of our little community is not just a fluffy little goal for me. It's vital. The more engaged you are with each other and with the important work we do here, the more satisfied are patients will be. Bluntly, too, you should know we don't want to lose you or have to replace you. And even though most of us, mindful of the collapsed job market out there, are not doing a lot of job-hopping these days, I firmly believe we all do better, more creative work when we *like* coming to the hospital every day.

So this is the chance to say (anonymously, of course) what you like and what needs improvement.

I make your responses, in turn, into policy. Last year the survey results indicated UCH was a good, but not yet great, place to work. Mostly, it revealed we wanted more recognition of our good work, better working relationships with other UCH work groups, and more voice in decision-making.

We've installed many programs to work on all three of those issues. Your responses will help us mark how far we've come, how far we have to go, and other areas we need to improve to get from good, literally, to great.

Sincerely,

A handwritten signature in black ink, appearing to be "Bruce Schroffel".

Bruce Schroffel