WakeMed was recognized as “high performing” Johnston counties home. With the opening of this healthplex, the care that they need will be closer than ever.

WakeMed’s Epic implementation is moving full speed ahead with many employees and physicians involved. Here’s an overview of where we are:

**“AMBULATORY” IMPLEMENTATION**
- Includes all WakeMed Physician Practices
- Go-live is scheduled for June 2014
- Teams are now working on building out workflows

**“INPATIENT” IMPLEMENTATION**
- Includes all hospitals, healthplexes and other outpatient sites
- Go-live is scheduled for December 2014
- Teams are working on validation to ensure Epic workflows will work for WakeMed

Once Epic is implemented, there will be no more paper charts – all documentation and order entry will be done electronically. This is a major change, but will allow us to care for our patients more efficiently. Looking toward the future, many have asked, “What happens during a power outage or if the network goes down?” With help from the Epic team, WakeMed has explored these worst-case scenarios and is ready with-backup systems and downtime plans to address potential issues.

Change is never easy. Many of you have spent years learning our current IS systems and they’ve been customized to meet your needs. While the transition may be challenging, the good news is that Epic is designed to make caring for our patients easier, safer and more efficient. With Epic, all of our caregivers will have access to the same information about patients, which will eliminate duplication and ensure safer care. Visit itsgoingtoBepic.wakemed.org to learn more!

Christine Craig, vice president of Government Affairs, and Betty Woodard, PhD, RN, director of nursing research and evidence-based practice, were honored with Women in Business Awards from the Triangle Business Journal. The annual awards program recognizes women throughout the Triangle who have a history of business or community service accomplishments.

Craig was in the public policy category, which recognizes leaders who make a difference in government policies or laws that impact business. In her decade at WakeMed, Craig has strengthened WakeMed’s role in the state legislative decision-making processes by helping policymakers better understand how laws impact residents, hospital organizations and healthcare quality. On behalf of WakeMed, Craig works closely with business and government representatives to reduce the cost of healthcare and improve access. Additionally, she serves on several boards and advisory councils.

Woodard was recognized in the mentor category, which honors women who enrich the lives and careers of others by sharing their experience and knowledge. At WakeMed, Woodard helps nurses understand how valuable their expertise is by funneling it into projects and research that will benefit others. Since 2007, she has worked with countless nurses to design and implement research projects, publish papers in professional journals, and present at national conferences. Woodard also sits on several boards, is active in state and national professional organizations, and serves as an American Nurses Credentialing Center Magnet Appraiser.

Thank You for Your Feedback!

Employee Survey Gets Strong Participation & Great Results

WakeMed’s 2013 Workplace & Engagement Assessment Survey invited employees to evaluate WakeMed on its patient focus, work culture, employee engagement, management and leadership. As in previous years, the online survey was conducted by Success Proﬁles, an external survey administrator.

“Knowing how employees feel about their workplace is invaluable. When employees feel that WakeMed is a satisfying and rewarding work environment, they are better able to focus on providing the best care possible for our patients,” commented Jeanene Martin, senior vice president of Human Resources.

This year we achieved an 87.5 percent participation rate and scored 75.2 overall, up from 72.8 last year. Most survey results were compared to those of 315 other healthcare organizations and show how we performed in comparison to other organizations surveyed. Here’s how WakeMed compared to the competition and improved over the past year (2012 scores are in parenthesis):

**Average Score**
- Work Culture: 89th percentile (83rd percentile)
- Employee Engagement: 87th percentile (82nd percentile)
- Management: 79th percentile (59th percentile)

**Epic UPDATE**
One Patient, One Record

Way to Go, WakeMed!
The U.S. News & World Report 2013-14 Best Hospital list named the Raleigh Campus:
- #1 in Wake County
- #4 in the Raleigh-Durham metro area
- #5 in North Carolina

WakeMed was also recognized as “high performing” in nine out of 16 different specialties.

**WakeMed’s Strengths**
Areas that were ranked above the 87th percentile are considered organizational strengths. These include:

- Emphasis placed on delivering the best care
- Sufficient feedback about performance
- Staff allowed to make decisions to solve problems for customers
- Respect for cultural differences
- Opportunities for personal and professional development
- Fair treatment
- Sees profession in a positive light

**continued on back cover**
The WakeMed Physician Practices (WPP) division has grown exponentially over the years and now employs more than 50 WPP offices. She has been an integral member of our leadership team since 1999 and has over 25 years of clinical and administrative leadership experience. Her recent promotion to senior vice president will help strengthen the connection with the WakeMed system. Congratulations to the following proven leaders!

Dee Darkes
Cardiovascular Service Line Director

Darkes joined WPP this month, bringing over 25 years of healthcare administration experience. She has oversight for the following practices:
- Raleigh Cardiology
- Carolina Cardiology
- Carolina Cardiovascular Surgical Associates
- WSP – Cardiovascular (Advanced Devices)
- Cary Cardiology

Carolyn Knaup
Senior Vice President, Ambulatory Services and Physician Operations

Knaup now oversees all WakeMed ambulatory sites, including more than 50 WPP offices. She has been an integral member of our leadership team since 1999 and has over 25 years of clinical and administrative leadership experience. Her recent promotion to senior vice president will help strengthen the connection with the WakeMed system. Congratulations to the following proven leaders!

Thomas Haugh
Medicine Service Line Director

Haugh has over 20 years of healthcare experience and joined WakeMed in 2011 when we acquired Accent Urgent Care, where he served as the operations manager/administrator. He has oversight for the following practices:
- Hospitals & Intensivists – Raleigh Campus, Cary Hospital and Harnett Health System
- Pulmonology
- Psychiatry
- Gastroenterology
- eICU

Karen Perry
Women’s and Children’s Service Line Director

Perry has been with WakeMed for over 30 years and has spent several years leading practice management operations for multiple WPP practices. She has oversight for the following practices:
- Obstetrics & Gynecology (Women’s Center and Raleigh Campus)
- Maternal Fetal Medicine
- Pediatrics
- Pediatric Surgery
- Pediatric Intensivists
- Children’s Endocrinology & Diabetes
- Neonatology

David Pontz
Surgery Service Line Director

Pontz has served in partnership with WakeMed for over 12 years while working for Progress USA, an ancillary services partner of WakeMed. He has oversight for the following practices:
- Wake Orthopaedics
- Ear, Nose & Throat – Raleigh & Cary
- Employee Health

The following Information Services staff members achieved national certifications.

- Beverly Alman, RN, received her CCRN certification.
- Brandy Grice, RN, received her CCRN certification.
- Christopher Barnes, RN, received her CCRN certification.
- Danielle Wells, RN, received her CCRN certification.
- Mary Brownson, RN, received her CCRN certification.
- Myra Dickerson, RN, received her CCRN certification.
- Liz Watson, RN (Occupational Health) received her BSN from East Carolina University.
- Christopher Barnes, RN, received her CCRN certification.
- David Coulter, RN, received her CCRN certification.
- John Price, RN, received her CCRN certification.
- Britney Surles, RN, received her CCRN certification.
- Korea Wells, RN, received her CCRN certification.
- Kara Wells, RN, received her CCRN certification.
- Brandy Grice, RN, received her CCRN certification.
- Myra Dickerson, RN, received her CCRN certification.
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- Britney Surles, RN, received her CCRN certification.
- Korea Wells, RN, received her CCRN certification.
- Kara Wells, RN, received her CCRN certification.
Pharmacy Hours:
Monday through Friday - 7 am to 7 pm
New hours:
Multiple payment options: cash, credit cards, flex prescription to the Cary pharmacy and it will be returned to you.
Michele delivers medications to Cary Hospital – simply take your key to get your medications! Pick up your prescription at work and save yourself time.

Wake Medication makes it easy to get your medication.

For appointments, call ext. 08284.
Walk-ins are also welcome.

Wake Specialty Physicians – Employee Health
Caring for Your Family: the Way You Want!
WSP – Employee Health provides primary and urgent care services for employees and their dependents age 6 and up.

From annual exams to chronic disease management: from sunburns to insect bites, we can help you feel better ASAP.

Providers are available Monday through Friday for urgent medical needs, routine check-ups and injuries. Employee Health is located on the first floor of the Andrews Center.

WHAT YOU SHOULD KNOW ABOUT The Healthcare Reform Individual Mandate

A key part of healthcare reform is the individual mandate, which requires most individuals to purchase health insurance coverage or pay a penalty. If you are currently covered under the WakeMed health plan or a government program (Medicare, etc.), you can still receive insurance under those programs. Starting next year, if you are eligible and opt out of WakeMed’s medical plan, you can buy health care coverage through a government-run exchange called the Marketplace.

Is anyone exempt from the individual mandate?
Individuals may be exempt from the individual mandate if they cannot afford coverage or have an income below federal tax filing threshold. For a list of exemptions, see the Benefits website.

How much is the penalty and how will it be collected?
The penalty is either a fixed dollar amount or a percentage of income, whichever is greater. In 2014, the penalty will be $95 per person or up to 1 percent of income (for example, someone earning $50,000 would pay $500). The penalty will be phased in over a three-year period and will increase in 2015 and 2016.
Starting in 2015, everyone who files a federal tax return will have to report whether they (and their dependents) had insurance coverage or if they were exempt from the individual mandate. The government will use this information to determine who must pay a penalty.

Is there financial assistance available to help purchase health insurance?
Premium tax credits are available for low-income individuals who purchase health insurance through the Marketplace. Premium tax credits amount vary. To qualify, a taxpayer:
• Cannot be eligible for the WakeMed health plan or a government program such as Medicaid.
• Must have an annual household income between 100 and 400 percent of the federal poverty line
• May not be claimed as a dependent of another taxpayer
• Must file a joint return, if married
• Must enroll in a health plan through the Marketplace

Individuals with household incomes below 250 percent of the federal poverty level may also be eligible for cost-sharing reductions to help pay medical expenses.
If you have questions about how healthcare reform will impact you, contact the Benefits department at ext. 08143.

CRITICAL CARE NURSES PRESENT RESEARCH
Nurses and administrators from several hospitals participating in the American Association of Critical-Care Nurses Clinical Science Investigator (CSCI) Academy visited WakeMed in July to present their CSCI projects. Raleigh Campus and Cary Hospital are two of seven North Carolina hospitals taking part in the year-long program, which is designed to help critical care nurses use best practices at the bedside.

The Raleigh Campus CSCI project was designed to improve nurse-to-nurse communication at shift change as well as engage patients and families in that process. Team members include Kohin Mitchell, RN (CICU-A); Kelley Keep, RN, BSN (2E CVICU); Veronica Coker, RN (2E CVICU); and Taylor Smith, RN, RN (CICU-A). Cary Hospital CSCI participants include Lindi Hawkins, RN (2 West ICU); Tammy Fralin-Mossey, RN (2 West ICU); Laura Guillard, RN (2 West MSICU); and Ashley Ritchie, RN (2 West MSICU), also shared their project, whose goal is to improve mobility in the critically ill and reduce the number of days patients are on ventilators. After the projects are complete, the CSCI nurses will share their knowledge at a regional conference in 2014.

In Memoriam
Former WakeMed employee
Margaret (Mattie) Palmer passed away on June 27. Palmer, who retired in 2012, spent most of her 16-year tenure at WakeMed working at the Raleigh Campus patient information desk. Palmer will be remembered for her friendly attitude and commitment to helping others.

Carolyn Bunch passed away on June 26. Bunch was a long-time member of the Health Information Management department and would have celebrated 30 years of service to WakeMed this September. She will be greatly missed by her coworkers.

WakeMed Specialty Physicians – Employee Health

Caring for Your Family: the Way You Want!
WSP – Employee Health provides primary and urgent care services for employees and their dependents age 6 and up.

From annual exams to chronic disease management: from sunburns to insect bites, we can help you feel better ASAP.

Providers are available Monday through Friday for urgent medical needs, routine check-ups and injuries. Employee Health is located on the first floor of the Andrews Center.

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Walk-ins are also welcome.

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Silver Spoons Program Highlighted as Innovative Way to Improve Patient Care

Silver Spoons, an interdisciplinary volunteer program developed at Cary Hospital, was featured in the April 2013 issue of Nursing Management. The paper was co-authored by Teressa Harvey, MHA/MBBA, BSN, RN (2 East Medicine – Cary Hospital); Lisa Zuber, RN (Nursing Services – Cary Hospital); Susan Coulter, MEd, CCC-SLP, a speech pathologist and WakeMed volunteer; and Betty Woodard, PhD, RN, director (Nursing Research & Evidence-Based Practice).

Harvey collaborated with Coulter, Zuberlan and specially-trained volunteers to develop an innovative feeding and socialization program for patients. Harvey recognized that at med-surg patients did not always receive the individualized attention she and her staff wanted to provide. Enter Coulter, who trained carefully-screened volunteers to assist with the meal experience. Silver Spoon volunteers now sit with patients and help with the mechanics of eating; provide companionship and gentle nudges to eat.

As a result, patients benefit, as do nurses and nurse techs, who have time to focus on other patients with more demanding care needs.

“One is the best initiative that I have been privileged to be part of. It benefits both patients and staff without adding a financial burden,” Harvey said. “Silver Spoons has been embraced by staff and appreciated by patients and their families. At a time when we have renewed our focus on Patient- & Family-Centered Care, this is a wonderful way to engage the patient in a personal, satisfying meal experience.”

InDemand Expands Interpretation Services’ Reach

When you’re in the hospital, discussing your medical condition and care needs is vital and leads to better medical outcomes. For patients with limited English proficiency, having access to an interpreter isn’t only helpful; it’s a matter of patient rights.

To help meet the needs of these patients and improve access to interpretation services, WakeMed has partnered with InDemand Interpreting to provide computer-based video and audio translation services.

“As our patient population continues to diversify, we are facing the need to translate a wider variety of languages,” said Georgia Sumiel, vice president of Operations. “With InDemand, we can provide interpretation services in a more efficient and timely manner, thereby improving our patients’ experience and care.”

InDemand’s medical interpreters are available 24/7 and speak 180 languages, including American Sign Language. The service is accessed through mobile workstations equipped with laptops and tagged with Radio Find for easy locating.

WakeMed’s 30 workstations will be placed strategically throughout the system based on interpreting demands. When an interpreter is needed, patients can request a male or female interpreter and are usually connected in less than one minute. High-quality video conferencing is available for 18 languages and includes a “privacy curtain” feature that can block the video temporarily.

In addition to the computer-based services, WakeMed’s Translation & Interpretation Services team is available to assist in sensitive situations. The team consists of providers – physicians, nurses, social workers and hospitalists can refer patients to Paired Health through their website or by completing a home visit referral form. To learn more or to refer a patient, contact Jamie Winston, WakeMed account manager at Paired Health, at 919-719-0658 or visit www.pairedhealth.com.

WakeMed, Paired Health Partner to Improve Translational Care

In an effort to provide uninterrupted care for patients as they transition home from a hospital stay or emergency department visit, WakeMed has partnered with Paired Health, LLC, a Raleigh-based company offering mobile translational care.

Paired Health provides physicians, PAs and nurse practitioners – visit patients in the places where they can do the most good during their convalescence. “This means patients are often seen at home, which is more cost-effective and frees up hospital beds. Since partnering with Paired Health this January, these services have helped WakeMed avoid unnecessary admissions and readmissions.

“This partnership allows WakeMed to provide comprehensive care that helps keep at-risk patients healthy – and at home,” said Becky Andrews, vice president of Health Information and Utilization Management. “Paired Health doesn’t replace a patient’s primary care provider or hospitalist. Rather, their practitioners take ownership of a patient’s care during a limited, critical period of time.”

Paired Health’s mobile providers conduct exams, review test and lab results, perform medication reconciliation, and provide education on lifestyle changes. Their physicians also manage medications, alter care plans and sign home-health orders. These services ensure quality care for patients who may be at risk for readmission or who would benefit from regular care but don’t require hospitalization. Thanks to this concentrated focus, to date, just 2 percent of WakeMed patients seen by Paired Health have been readmitted to WakeMed within 30 days of discharge.

Paired Health is credentialled with several insurance companies and, through WakeMed’s contract, provides care to uninsured patients. Case managers, nurses, social workers and hospitalists can refer patients to Paired Health through their website or by completing a home visit referral form. To learn more or to refer a patient, contact Jamie Winston, WakeMed account manager at Paired Health, at 919-719-0658.
Rounding for Results
Rounding RNs Offer Extra Expertise & Education

“Kathy, can you come to 6C? This patient’s heart rate has me concerned, but I’m not sure it’s time to call an RRT.” This type of call is common for 35-year nursing veteran Kathy Lancaster, RN, (CICU - A) to receive. Lancaster is one of WakeMed’s rounding nurses, who are available to staff 24/7 at Raleigh Campus.

The Rounding Nurse Program grew out of the Rapid Response Team (RRT), which began in 2005 as a means to catch worsening medical conditions before they become emergencies. The original RRT included a critical care nurse, respiratory therapist, hospitalist and clinical administrator. Their initial goals were aligned with recommendations from the Institute for Health Care Improvement: 10 calls per 100 beds a month.

“We didn’t meet that goal for a variety of reasons, but probably the two primary ones were learning curve and hesitancy to call an entire team,” explained Lancaster. “We learned that nurses are more comfortable with a peer-to-peer consult so we added the option to call the rounding nurse directly.” The result: calls-per-month doubled and now average 110. And it’s not just nurses who call for assistance – rounding nurses welcome calls from therapists and many different members of the care team.

It’s the combination of clinical expertise and mentoring that makes the Rounding Nurse Program so successful. A few examples of success include:

• During the RRT’s first month, team members intubated 30 percent of the patients they saw. In 2012, the intubation rate of patients seen by RRTs and rounding nurses dropped to fewer than 5 percent.

• Before the Rounding Nurse Program, 65 percent of patients seen by the RRT were transferred to the ICU. Now, that percentage has decreased to 28 percent.

“We’re saving more lives and heading off more issues than ever before,” Lancaster said. “That’s the reason nurses join the program. Our goal is to catch unexpected changes and prevent them from progressing.”

Rounding nurses are experienced RNs from the Raleigh Campus CICU and the Cary Hospital ICU. “These nurses are passionate about critical care nursing,” said Jeannie Moore, BSN, RN, director (Heart Center Operations). “They are confident in their abilities and know, having responded to countless codes during their careers, that they can prevent medical emergencies by working nurse-to-nurse.”

Raleigh Campus rounding nurses serve as trainers for rounding nurses at Cary Hospital. The Cary Hospital team currently works 12-hour shifts and their work is similar to their peers’ at Raleigh Campus. “The rounding nurse role is a very busy career and challenging one with a lot to accomplish in a 12-hour period,” said Amy Short, RN (2 West ICU – Cary Hospital).

To reach the Rounding Nurse Program on Raleigh Campus, call 919-630-7416; at Cary Hospital, call 919-350-4011.

WVA Recognizes WakeMed for Reducing Heart Failure Readmissions
Efforts Continue to Reduce Readmission Rates System-Wide

VHA Central Atlantic honored Raleigh Campus and Cary Hospital for excellence in reducing hospital readmissions to the top 5% in the country. Other hospitals throughout WakeMed’s hospitals were recognized for achieving 20 percent or greater reduction in 30-day heart failure readmissions from July to December 2012, compared to a baseline period of October 2010 through March 2011.

Several strategies helped WakeMed reach this goal:

• Early identification of patients at high risk for readmission.

• At the Raleigh Campus, grouping heart failure patients on one unit and conducting daily interdisciplinary rounds that include patients and caregivers.

• Engaging primary care providers and pharmacy prior to discharge.

• Using health coaches to ease the transition home.

“Our baseline rate was better than the national average, but we recognized the negative impact that preventable readmissions have on this vulnerable population and made a commitment to improve further,” said West Paul, PhD, MD, vice president of Quality & Patient Safety. “We are proud of the strides we have made and will be implementing these successful strategies in other areas.”

Reducing hospital readmissions is an ongoing focus for many hospitals, and not only because it is a measure of patient care quality. Readmission rates are often used to compare hospitals and Medicare issues penalties against hospitals with high heart failure, pneumonia and acute myocardial infarction (AMI) readmission rates. In the past two years, every hospital in the Triangle, except Cary Hospital, has received these penalties. While we made great strides in reducing heart failure and pneumonia readmissions, rates for AMI readmissions at Raleigh Campus were higher in 2012 than they were in 2011. Unfortunately, you do not receive any benefit in areas where you perform better than expected. As a result, WakeMed is paying a higher penalty this year because of higher-than-expected AMI rates.

At WakeMed, efforts to reduce readmissions are part of our vision to provide effective, coordinated care. In the coming year, we will focus on reducing readmission rates across the system. Be on the lookout for education and training as we refine our procedures to better care for our patients.

Along with advocacy, the council’s goals involve evaluation and education. One of the first things Manole and chair Justin Drew, PA-C, (Wake Emergency Physicians – PA) will tackle is assessing the Ongoing Professional Practice Evaluation (OPPE) and Focused Professional Practice Evaluation (PFPE) processes to determine the most concise way to evaluate mid-level provider performance. The council will also explore offering educational opportunities and professional development for WakeMed’s mid-level providers.

“Mid-level providers play an integral role in helping us meet strategic goals related to patient care, safety and quality. Given today’s changing healthcare landscape, it is vital that we involve these providers in the decision-making processes related to their practice and professional development,” said West Lawson, MD, chief medical officer. Learn more or get involved? Contact midlevelcouncil@wakemed.org.
Clothes Closet Offers Help for Patients in Need

This July, a clothes closet opened at Cary Hospital to provide clothing for patients who are in need of something to wear upon discharge. The closet was organized by Lambelin, CS, NASH, (2 East – Cary Hospital), pictured, who noticed that some patients could benefit from a helping hand—new a set of clothes—before they leave the hospital. “We see a wide variety of patients at the hospital, including patients who may be homeless or accident victims. I thought the clothes closet would allow us to continue helping them even as they prepare to be discharged,” Lambelin said.

Lambelin secured a space for the closet from Administration and then reached out to staff members for donations. Before long, she had a growing collection of gently used clothes and shoes. If you have a patient who needs clothing, you are welcome to visit the clothes closet and see what is available.

The closet is located near Occupational Health on the second floor of Cary Hospital; the key is available from the charge nurse on 2 East. For more information, or to make a donation of clean, gently used items, call ext. 02133.

Employee Survey

Employee Survey, WakeMed’s performance and direction, and efforts to retain employees who contributed to this publication. We welcome comments and suggestions on this publication and its content. Call (919) 350-8120, e-mail microscope@wakemed.org or write Microscope, WakeMed Public Relations Department, 3000 New Bern Avenue, Raleigh, NC 27610.

Katie Grossmann, Editor
WakeMed Employees, Photos

To help you plan ahead, this calendar lists upcoming system-wide events, training classes and community events. For details and fee information, visit the WakeMedWeb. Send calendar submissions to Public Relations or e-mail microscope@wakemed.org.

September 2013 Calendar of Events

- Uniform Sale – The Volunteers at WakeMed Cary Hospital along with representatives from First Uniform will sponsor a uniform sale on Wednesday, Sept. 25, from 7 am to 4 pm in the Cary Hospital Conference Center. Cash, credit cards, and payroll deduction will be accepted.
- Staff Development & Training
  Enroll in any of the listed classes via Learning Link or have your manager/supervisor send an email to SDRegistrations@wakemed.org that includes your name and employee number, and course name, date(s) and time(s). For information, visit http://wakemedweb or call ext. 08306. Please note: Some classes require an introductory course or satisfactory completion of an assessment test.
- Management Development
  - Skill Builders Series: SMART Goal Setting – Tuesday, Aug. 27, 8:30 to 10 am, Raleigh Campus, Medical Office Building, Ground Floor Classrooms (Code=MDSBS SGS)
  - Skill Builders Series: Reward and Recognition – Wednesday, Sept. 4, 11:30 am to 1 pm, Raleigh Campus, Medical Office Building, Ground Floor Classrooms (Code=MDSBS R&R)
  - Skill Builders Series: Hardwiring Workplace Accountability – Thursday, Sept. 12, 2 to 3:30 pm, Raleigh Campus, Medical Office Building, Ground Floor Classrooms (Code=MDSBS HWA)
- Employee Development
  - EAP Well-being: Learning to be a Change Expert in Our Ever Changing World – Friday, Sept. 13, 9 to 11 am, Raleigh Campus, Medical Office Building, Ground Floor Classrooms (Code=SDEAP-CE)
  - Wake AHEC
    Educational credit is available for all programs. For details/fees, call ext. 08547 or visit www.wakawhec.org and click Program Listings.
- Intraoral Radiography for the Office Trained Dental Assistant – Thursday, Aug. 15, through Saturday, Sept. 28, Raleigh Campus, Andrews Center
  - The North Carolina and South Carolina Societies of Anesthesiologists – Back to Basics: Patient Care, Teaching & Research – Friday, Sept. 6, through Sunday, Sept. 8, The Omni Grove Park Inn, Asheville, N.C.
  - Pediatric SIMposium 2013 – Monday, Sept. 9, through Tuesday, Sept. 10, Raleigh Campus, Andrews Center
  - Adult Physical Assessment for Nurses: The Basics – Thursday, Sept. 12, through Friday, Sept. 13, Wingate by Wyndham, Raleigh
  - Mental Health First Aid: How to Help in an Emotional Crisis – Thursday, Sept. 12, through Friday, Sept. 13, Alliance Behavioral Healthcare, Durham
  - Medical Emergencies: An Update for Allied Dental Team Members – Friday, Sept. 13, 8:45 am to noon, the McKimmon Center, N.C. State University, Raleigh
  - Intraoral Radiography for the Office-Trained Dental Assistant – Saturday, Sept. 14, through Saturday, Nov. 2, Raleigh Campus, Andrews Center
  - UNC Clinical Lecture Series: Transition to DSM-5: Navigating Changes for Practitioners – Monday, Sept. 16, 2 to 3 pm, UNC School of Social Work Auditorium, Chapel Hill
  - Women’s Cancer Symposium – Wednesday, Sept. 18, 5 to 9 pm, Raleigh Campus, Andrews Center
  - Veritas Collaborative Eating Disorders Conference – Friday, Sept. 20, 9 am to 3 pm, Hilton Durham, Durham
  - Strategies for Effective Medical Communication – Saturday, Sept. 21, 9 am to 5 pm, Duke Doctor of Physical Therapy Division, Durham
  - SPACE: Infection Control in Dentistry – Tuesday, Sept. 24, through Tuesday, Oct. 1, Raleigh Campus, Andrews Center
  - Improving Patient Care – One Project at a Time – Friday, Sept. 27, 9 am to 4 pm, Methodist Home for Children, Raleigh
  - 2013 Spiné BiSkills Workshop – Saturday, Sept. 28, 8 am to 3 pm, Renaissance Raleigh Hotel at North Hills, Raleigh
  - Nursing Education
    Compassion in Action (NE014-12009) – Thursday, Sept. 5, 1 to 3 pm, NED A
    NIDCAP Approach to Care: What’s it All About? (NE014-11080) – Tuesday, Sept. 17, 7 to 9 pm, Raleigh Campus, Andrews Center
  - Nursing Professional Development Book Series: A Nurse’s Guide to Navigating the Path of Leadership – Cathy Leary & Scott Allen (NE014-11086) – Wednesday, Sept. 18, 1 to 2 pm, NED B
  - Education Essentials-Part I (NE014-11022) – Friday, Sept. 20, 8 am to noon, Cary Hospital, Conference Center
  - Nursing Professional Development Book Series: The Spirit Catches You and You Fall Down (NE014-12124) – Thursday, Sept. 26, 8 to 9 am, Cary Hospital, Conference Center

Employee Survey,continued from cover

- Pride in being part of the organization
- Acceptable balance between personal and work life

Areas that saw significant improvement since 2012 included:

- Staff expected to demonstrate accountability (from 45th to 69th percentile)
- Supervisor receptive to suggestions (from 63rd to 82nd percentile)
- Supervisor cares about me (from 59th to 76th percentile)
- Satisfied with my job (from 65th to 79th percentile)
- Physicians treat me with respect (from 70th to 78th percentile)

Once again, employees said they felt a strong commitment to WakeMed and they would recommend it as a good place to work. The survey results also revealed that opportunities for improvement include staff receiving information about WakeMed’s performance and direction, and efforts to retain the best minds and biggest hearts.

Next Steps

Earlier in the summer, Human Resources led workshops to help departments understand their results. Throughout August, departments will create action plans concentrating on three to five areas of improvement. “There is a lot to be said about an organization taking employee feedback as seriously as WakeMed does. Employees should take advantage of this opportunity to engage in conversations about improving their work environment,” said Anthony Newkirk, manager (Employee Relations).