After months of hard work, the WakeMed Board of Directors is nearing completion on our new strategic plan, which includes revisions to our mission, vision and values, as well as a set of 10 new aspirational goals. Our new mission reflects the changing health care climate and aligns with work we are doing through our Accountable Care Organization and other initiatives to not only provide outstanding care when it is needed, but to also help individuals improve their overall health and wellness. “A strategic plan tells us why we exist, what we want to be, and the actions we will take to achieve that goal,” says Donald Gintzig, president & CEO. “Our new plan speaks to the heart of who we are as an organization and what WakeMed means to our community. I encourage each of you to carefully review our new mission, vision and values and make sure the work you are doing supports our new goals. It will take all of us working together to reach our goals, and I look forward to partnering with you as we work to improve the health and well-being of those around us.”

As members of the WakeMed family, it is vital that we all strive to achieve the same measurable goals. We’ll reach those goals through the Wake Way to Excellence, which combines our unique culture with streamlined and efficient processes. Much more information about the strategic plan will be communicated in the coming months. In the meantime, please retain the information below as a reminder of our new strategic direction, which should guide us in all we do.
The Organizational Scorecard tracks WakeMed’s system-wide goals for the fiscal year, which ends on September 30. The scorecard changes annually to reflect where we should place our energy and resources. Here’s a look at how we are doing so far this year, for more, visit the WakeMedWeb:

**Quality Outcomes:** We’ve made significant improvements in quality measures and in the last quarter exceeded our targets in four out of five measures.

**Service Excellence:** Improving the patient and family experience continues to be a major focus for our organization, but there are many opportunities for improvement. Over the last three years we have tremendous success in improving our scores in many areas. This year, however, despite improvements in outpatient departments, we are currently below target for all service excellence measures.

**Workforce Excellence:** We are exceeding all targets in this category with the exception of the workplace assessment ranking, which won’t be reported until the end of August. We’ll highlight the employee survey results in next month’s issue of Micros cope.

**Fiscal Responsibility:** The system’s overall financial performance has improved gradually throughout the year. We currently have a positive operating margin and are close to meeting or exceeding our financial and productivity targets, but there is room for improvement.

**Market Development:** We’re tracking well for discharges, and we are nearly to our target in surgical cases and emergency room visits. However, our WPP new patient visits are below expectations for the year.

“While we’ve made some great strides this year, there remains significant room for improvement. Patient & family satisfaction and workforce productivity are two areas where every employee can really make a direct impact on our performance,” said Tom Gettinger, executive vice president & chief operating officer. Want to help improve our scores? Here are a few ways you can help:

**Service Excellence:** We need to work together to ensure patients have a positive experience. Demonstrate the Wake Way in everything you do, and in keeping with our strategic plan, put our patients first in all you do! 

**Workforce Productivity:** We’re doing a nice job managing FTEs and salary expense this year. As we roll out our new strategic plan, let’s focus on reducing waste and making our time and energy count. We will be taking a close look at processes to ensure that they add value and support our aspirational goals.

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**ADDITIONS & ATTACHMENTS**

**ANNUAL EYE EXAMS**

Eye exams aren’t just for getting new glasses or contacts; they can also play an important role in your overall wellness. Besides measuring your vision, eye exams can help identify early signs of certain chronic health conditions, including high blood pressure, diabetes, heart disease and high cholesterol. So even if you don’t need a new prescription, eye exams can help identify early signs of major health conditions.

For more information, contact the Benefits department at ext. 08143.

**WAKESMED GOES METRIC**

Think fast — if a person weighs 150 pounds, how many kilograms is that? Not sure? You’re not alone, but this kind of uncertainty is exactly what WakeMed is trying to avoid with a new initiative being rolled out this month. In an effort to protect patient safety, WakeMed will soon join many other hospitals in using a metric weight exclusively to check and document patient weights.

Having accurate patient weight information is important because pharmacies use kilogram weights to calculate many medications, such as antibiotics, pain medications and insulin. If a patient’s weight is accidentally entered in pounds where kilograms should have been used, the patient can receive an incorrect dosage, which can potentially lead to serious complications.

This was a concern for Tiffany Young, MSN, RN (Children’s Emergency Department) who had witnessed several medication errors due to wrong weight in the emergency department could cause medication errors throughout a patient’s hospital stay. A literature review made it clear that the simplest solution is to use the metric system exclusively,” she said. Young collaborated with Clinical Engineering and Facility Services to set all Children’s ED scales to metric readings. This change significantly reduced weight-related medication errors in the Children’s ED and helped Young understand that using the metric system exclusively could prevent such errors from occurring throughout the system.

Young shared her concerns and findings with the WakeMed Center for Patient Safety, and the multidisciplinary Metric Weight Task Force was formed to ‘weigh in’ on the issue. They wrote an administrative policy and worked with Clinical Engineering to repurpose scales so they only weigh in kilograms. “This will cut down on the amount of community and document in kilograms; the less likely we are to transpose the weight from kilograms to pounds or vice versa,” commented West Paul, MD, MD, vice president, Quality & Patient Safety who is executive sponsor of the committee. “Patient safety is our top priority, and streamlining our weighing process will eliminate confusion and ensure patients receive the right medication dose.”

**Did You Know?**

The United States is one of only three countries in the world that doesn’t use the metric system for everyday measurements. Liberia and Myanmar are the others.

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**IN MEMORIAM**

Former WakeMed employee Karen Medlin passed away on July 10. Medlin, who left WakeMed in February of this year, worked in the Rehabilitation Department for 12 years. She will be remembered for her smile, love of life and commitment to helping others.

**ADDITIONS & ATTACHMENTS**

Heather Perry, RN, (Staffing Resources) welcomed daughter Lily Hope, who was born on March 18 and joined her adoptive family on May 3.

Georgia Sumiel, vice president (Operations) married Jonathan Harrington on April 17.

Trina Barham, RN, (Heart Center) and husband Andy welcomed daughter Daviegh Laine on June 26.

Jef F oote, RN, manager (all of 2 East Medicine – Cary Hospital) received gerontology certification.

Ruby Brown-Herring, BSW, Med, (Wake AHEC) received the 2014 West Paul, MD, PhD, vice president, Quality & Patient Safety who is executive sponsor of the committee. “Patient safety is our top priority, and streamlining our weighing process will eliminate confusion and ensure patients receive the right medication dose.”

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**IN MEMORIAM**

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It may still feel like summer out there, but flu season is right around the corner. WakeMed is gearing up for our flu vaccination program, which will begin in September. Please review the highlights of our influenza vaccination policy:

- **WakeMed requires all employees** to receive an influenza vaccine each year. Failure to comply is grounds for termination. WakeMed managers and employees are also required to comply with the WakeMed influenza policy.
- **Employees must get the vaccine or obtain an exemption by Oct. 31, 2014.** Vaccines will be available at no cost to all WakeMed employees, contractors and volunteers. Details about when and where vaccines will be administered will be shared soon. Employees who receive the vaccine elsewhere (physician's office, pharmacy, etc.) must provide documentation to Occupational Health by Oct. 31.
- **Limited exemptions will be granted for medical reasons.** Employees who receive an exemption must wear a surgical mask while at work during flu season (as determined by Occupational Health). To request an exemption, submit a medical exemption form (available on the Occupational Health WakeMedWeb page) by Sept. 30, 2014.

**Questions? Review the Flu Resources page on the WakeMedWeb or contact Occupational Health at ext. 07370 (Raleigh Campus) or ext. 02631 (Cary Hospital).**
Cutting Costs While Keeping the Lights On

Hospitals, like most businesses, can’t really run without water and power, but that doesn’t mean we can’t save money even on those necessities. Cary Hospital’s Facility Services has found some creative ways to lower utility expenses without sacrificing service.

Since 2011, Cary Hospital has participated in Duke Energy’s Demand Response Automation (DRA) program, which lets customers with generators save money on utility costs. As part of the program, Duke Energy asks Cary Hospital to use generator power temporarily when the power grid is compromised, such as during extreme heat or cold and when power lines are damaged. This is called ‘curtailment’ and the hospital receives a financial incentive for each curtailment they complete. Cary Hospital has curtailed 15 times in the past three years, including twice in July. As a result, the hospital has received $579,000 in revenue. “As healthcare engineers it isn’t easy for us to go out and recruit patients to bring in revenue, but we can think creatively about how to cut costs and help contribute to the bottom line,” said Tim Markijohn, director Facility & Environmental Services – Cary Hospital. “Over a 10-year period, we estimate that this program will save Cary Hospital approximately $1 million in electrical utility costs.”

Another way they have cut costs is by installing a new water meter for the hospital’s chiller towers. The towers use large fans to cool water that is then sent through the hospital’s chiller plant (part of the HVAC system). Thousands of gallons of water pass through the towers every day, but much of it evaporates during the cooling process. Three years ago, that water came from the hospital’s main water line, which meant WakeMed paid two charges on it: one for the water itself, and one for sewage processing. “We were paying sewer fees for water that was evaporating and not going into the sewer at all. It just didn’t make any sense,” said Markijohn. With the new meter, the hospital doesn’t pay those sewer charges any more, which keeps about $75,000 each year from going down the drain.

How Curtailment Works

The savings speak for themselves, but power curtailment is more than just flipping a switch. That’s where Matt Olson (Facility Services – Cary Hospital) comes in. His job is to make the transition to the generator seamless and ensure that nothing goes wrong during the curtailment, which usually lasts five hours. After testing and warming up the generators, Olson syncs them to Duke Energy’s grid for a few seconds. “It’s important that we don’t interrupt hospital services and by using a closed system, no one can tell when we change over to generator power,” says Olson. Olson transitions the hospital to the generator in two phases then keeps an eye on things to make sure that the systems don’t get overloaded. When the curtailment is over, he transitions the hospital back over to Duke Energy’s power grid and can finally call it a day.

Above L – R, Derak Dillahunty, Matt Olson, Tim Markijohn, director Facility & Environmental Services – Cary Hospital. The premium credit is being replaced by a healthy rewards account (HRA).

Deadlines for WakeWell Rewards are now outcomes based, which means that you get points for meeting requirements based on your biometric screening results.

As you know, WakeMed introduced a number of changes to WakeWell Rewards this year that will affect your 2015 incentives:

- The premium credit is being replaced by a healthy rewards account (HRA).
- WakeWell Rewards is now outcomes based, which means that you get points for meeting requirements based on your biometric screening results.
- Participants can make up points with an alternate standard.

The deadline for WakeWell Rewards is right around the corner! For more information about the program—and what to expect from your incentive in 2015—read the Q&A below or contact Bob Nelson at ext. 06903 or bnelson@wakeomed.org.

Do I need an alternate standard?
If you did not earn 120 points from the biometric screening and online health assessment, you should complete an alternate standard by September 20, 2014. No extensions will be granted, so don’t delay! The alternate standards are:

- One-on-one consult with a dietitian (40 points)
- Physician-signed alternate standard form (up to 40 points)

Why did we move to an outcomes-based program?
WakeMed values and encourages a healthy lifestyle for our employees. If you didn’t reach the 120-point goal, that means you have at least two primary risk factors and should take steps to improve your health. If you are already working with a physician, meeting an alternate standard is easy. If you are not, this is a great opportunity to start.

What is the incentive in 2015?
WakeWell is replacing the premium credit with an HRA, which can be used to pay for many out-of-pocket medical expenses not covered by insurance. HRAs have many benefits:

- It costs you nothing. WakeMed funds the account, so you don’t pay anything for it.
- Use funds, tax-free, for qualified out-of-pocket health care expenses.
- Unused funds carry over from year to year, and every year you participate in WakeWell Rewards, you’ll get more money in your account.

How do I access my funds?
Employees who meet the program requirements can access their reward accounts on January 1, 2015. You choose what you want to spend your money on—you can even use it to pay for your dependents’ qualified medical expenses. Debit cards tied to individual HRA accounts will be mailed in December 2014. If you also have a flexible spending account (FSA), you will use the same card to access both accounts.

The amount in your account will reflect your employment status on January 1, 2015 ($250 for part-time employees; $500 for full-time employees). If you are currently a full-time employee but become part-time between now and January 1, your reward will be reduced. Your account will be available as long as you work at WakeMed and continue to meet eligibility criteria:

- You must participate in the WakeMed Health Plan. If you choose not to enroll in the health plan in 2015, or if you leave the plan for any length of time, you will lose your HRA funds.
- You must be a benefits-eligible employee. If you change to a non-benefits-eligible status at any time, you will forfeit your account.

Can new employees participate?
Employees who join the WakeMed Health Plan between February 2 and September 30, 2014, can complete the BCRI/NCN online health assessment before October 31, 2014, to qualify for the HRA in 2015. Employees who join the WakeMed Health Plan after October 1 can participate in WakeWell Rewards in 2016.
Exceptional People. Exceptional Care.

WakeMed Wins Leader in Diversity Award

WakeMed Health & Hospitals was named a Leader in Diversity Award winner by the Triangle Business Journal. The program recognizes Triangle businesses, individuals and nonprofits that have demonstrated respect or inclusive treatment of others, advocacy for underrepresented groups and multicultural marketing.

“Building awareness and acceptance is an ongoing process, and we’re always learning,” commented Susan McFarland, manager (Employee Relations & Diversity). “Language barriers, low health literacy levels and cultural differences can all affect patient care. Our staff is trained to respect culture and the core beliefs of patients and each other even as they practice modern approaches to delivering health care.”

Diversity, inclusion and access have been core to delivering health care.

WakeMed Nurse Named to Great 100 Nurses of N.C.!

Robin Pritchett, RN, (Chest Pain Unit) has been selected as one of The Great 100 Nurses in North Carolina by The Great 100, Inc., an organization that recognizes nursing excellence and provides scholarships to nursing students across the state. Pritchett, along with 99 other registered nurses, was selected on the basis of outstanding professional ability and commitment to improving health care.

Pritchett, who wanted to be a nurse for as long as she can remember, has over 30 years of experience, including 14 years at WakeMed. She has spent the past four years as a staff nurse in the Chest Pain Unit where she is involved in the staff unit council and has served on several hospital-wide committees. “I knew I had been nominated, but I was just stunned when I heard that I’d been selected. It’s a great honor,” says Pritchett, who passed on her love of nursing to her daughter, who is also a WakeMed nurse!

Hunting up Savings

The Non-labor Steering Committee is tasked with reducing WakeMed’s supply costs. The system-wide committee has been very effective, saving us over $12 million since 2010. This fiscal year, they are setting a record-breaking pace, with over $3.6 million saved to date and another $3 million possible by October.

“We’re all really pleased with the results. It’s exciting to see everyone pull together and find ways to save money without sacrificing patient care, quality or safety,” commented Vicki Block, senior vice president & administrator, Raleigh Campus, who chairs the committee.

Whenever possible, the committee works with clinicians and administrative staff to reduce supply costs while continuing to provide world-class patient care. The committee also works collaboratively with a group of health systems – the Central Atlantic Health Network (CAHN) – to drive down costs. When CAHN wanted to reduce the cost of drug-eluting stents, each CAHN member selected a physician to champion the process and ensure that patient safety remained the focus. John Linden, MD, (Raleigh Cardiology) represented WakeMed and said this about the process, “By working with CAHN, we negotiated lower rates with two stent vendors by promising that they would receive more volume. That’s something we could not do alone.” As a result, WakeMed is poised to reap an annual savings of $735,000!

Small changes can add up to big savings – but there’s always more to be done. If you have a supply-related cost saving idea, contact Kevin Schmidt at kschmidt@wakemed.org.
WakeMed Foundation Application Deadlines Approaching

Helton Scholar Program
The Helton Scholar Program is offered to offset the costs of continuing education. Any eligible WakeMed employee can submit an application for a Helton Scholarship by September 15. Applicants must have worked at WakeMed for at least two years and be enrolled in an academic program conferring a health-care-related degree. Funds must be used to support education-related expenses. Visit www.wakemedfoundation.org for more information.

Grant & Skills Scholarship
The deadline to apply for the next round of WakeMed Foundation Grants & Skills Scholarships is September 15. Skills Scholarships are available to help staff pursue non-degree opportunities that build new skills that can be shared with colleagues. Departmental grants are available to aid in developing new programs or services or expanding existing programs or services. See the Foundation site on the WakeMedWeb for more information or to apply.

CALENDAR OF EVENTS

Save the Date!
Second Annual Nurse Council Rush Day
Raleigh Campus – Tuesday, Oct. 28, 9:30 am to 1 pm
Cary Hospital – Wednesday, Oct. 29, 7 to 11 am

Nursing Education
Nurse Preceptor Workshop – Thursday, Aug. 21, 8:30 am to 3:30 pm, Cary Hospital Conference Center (NE014-12042)
Education Essentials II – Monday, Sept. 15, 8 am to noon, Cary Hospital Conference Center (NE014-12043)
CNRN Certification Review Course – Tuesday, Sept. 16, and Wednesday, Sept. 17, Andrews Center (day 1: NE014-9001; day 2: NE014-9002)
Professional Boundaries – Thursday, Sept. 25, 8:30 to 10:15 am, Raleigh Campus, NED A (NE014-14053)

Wake AHEC
Fluency Disorders: Stuttering and Cluttering – Thursday, August 21, 9 am to 12:30 pm, Andrews Center
Making it Home: Enhancing Residents’ Well-Being through Person-Centered Care – Wednesday, August 27, 8:30 am to 12:30 pm, Transitions LifeCare, Raleigh
Intraoral Radiography for the Office Trained Dental Assistant – Tuesday, Sept. 9, 6 pm, through Saturday, Nov. 1, 4:30 pm, Andrews Center
Investing Today in Tomorrow’s Adults: The Triumphs and Challenges of NC’s Emerging Adults – Wednesday, Sept. 10, 1 pm, through Friday, Sept. 12, 12:30 pm, Durham Convention Center, Durham
Adult Physical Assessment for Nurses: The Basics – Tuesday, Sept. 16, 9 am through Friday, Sept. 19, 9 am through Tuesday, Sept. 12, 4 pm, Holiday Inn Raleigh North
The Veritas Collaborative Symposium on Eating Disorders – Friday, Sept. 19, 8 am to 4:45 pm, Hilton Durham, Durham
Psychopharmacology of Addiction and Co-Morbid Disorders – Friday, Sept. 26, 8:30 am to 4 pm, Cary Hospital

2014 Duke Orthopaedic Symposium – Saturday, Sept. 27, 7:15 am to 2:30 pm, North Raleigh Hilton
Online Learning – May be viewed until June 30, 2015
• Multiple Sclerosis: What You Need to Know about the Disease
• Multiple Sclerosis: Adapting to Life with Multiple Sclerosis: The Emotional Challenges
• Multiple Sclerosis: Unique Challenges for Mental Health Professionals
• Cognitive Dysfunction: Recognition, Assessment, Treatment
AHEC Veterans Mental Health Project – Free webinars sponsored by NC AHEC and CSSP – go to www.ahecconnect.com/citizensoldier

9th Annual Time is Brain Advances in Stroke Care Conference – Saturday, October 25, 7:15 am to 2:15 pm, Andrews Center