

Hospitalists: On-Boarding New Partners to Aid in Retention Efforts

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Mercy: This is Who We Are

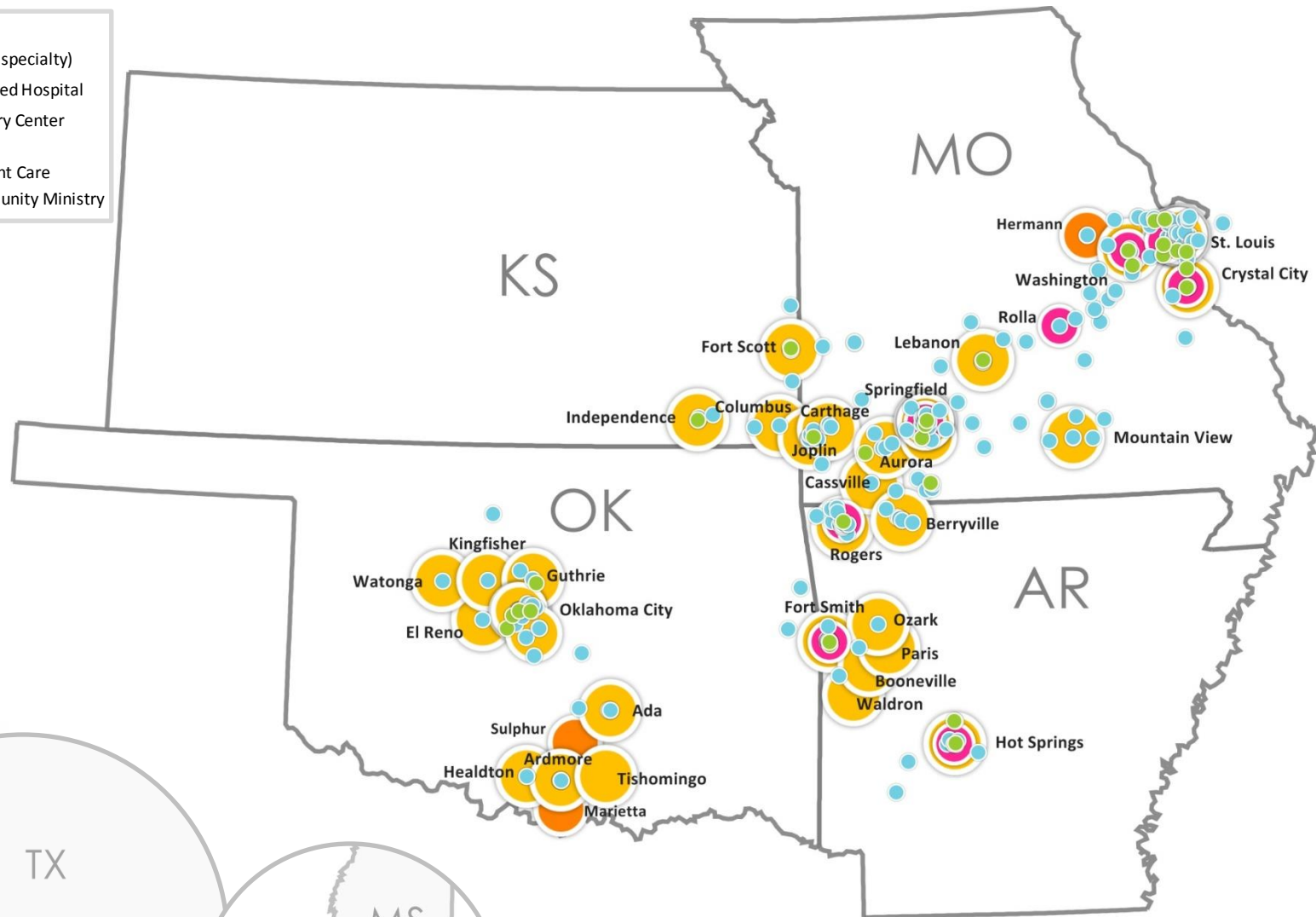
As the Sisters of Mercy before us, we bring to life the healing ministry of Jesus through our compassionate care and exceptional service.

- Values
 - Dignity
 - Justice
 - Service
 - Excellence
 - Stewardship
- Charism
 - Bias for Action
 - Entrepreneurial
 - Hospitality
 - Right Relationship
 - Fullness for Life



MERCY

- Hospital (acute & specialty)
- Managed/Affiliated Hospital
- Outpatient Surgery Center
- Clinic
- Urgent/Convenient Care
- Sponsored Community Ministry



Mercy is the 7th largest Catholic Health System in the US (31st overall) based on Net Patient Service Revenue, serving in over 140 communities and seven states.

Source: Modern Healthcare Survey, June 2013

Mercy Ministry

- 30 Acute Care Hospitals
- 4 Heart Hospitals
- 2 Children's Hospitals
- 3 Rehab Hospitals
- 1 Orthopedic Hospital
- \$4.4 Billion Total Operating Revenue
- 656 Physician Practices
- 276 Clinic Locations
- 40,000 Co-Workers
- 2,143 Integrated Physicians
- 878 Integrated Advanced Practitioners



The Environment: 2009-2010

- Demands on Service Growing
 - Admissions Increasing
 - Acuity of Patients Increasing
 - Clinic Physicians Going Non-Admitting
- Inability to Meet Growth Needs
 - Recruitment Efforts Not Effective
 - Retention Rate = 44%



What Was Right-Recruitment Process

- Recruitment
 - Advertising in the right places
 - Generating contacts
 - Compensation at market
 - Candidates had great experience with recruiting team
 - Able to secure onsite interviews



And Then.....



What Was Wrong-Recruitment Process

- Dismal Office Setting
- Poor Candidate Follow-Up from Physicians
- Negative Physician Interaction
 - Projected product was not worth buying



What Was Wrong-On Boarding

- No Transition from Recruitment to Practice
- Thrown to the Wolves
 - No tour of hospital
 - No introduction to specialists
 - No review of workflow
 - No mentoring



What Was Wrong-Culture

- Individualistic
- Not Growth/Service Oriented
- Victim Mentality
- Negative Voice Dominated Positive Voice
- Low Group Organizational Structure
- Isolated



Starting Point: 2010

- Engaged Internal Mercy Resources
 - Six Sigma Team
 - Talent Development Team
 - Recruitment Team
- Structured Group Meeting
 - Assessed Current State
 - Developed Vision for Future State

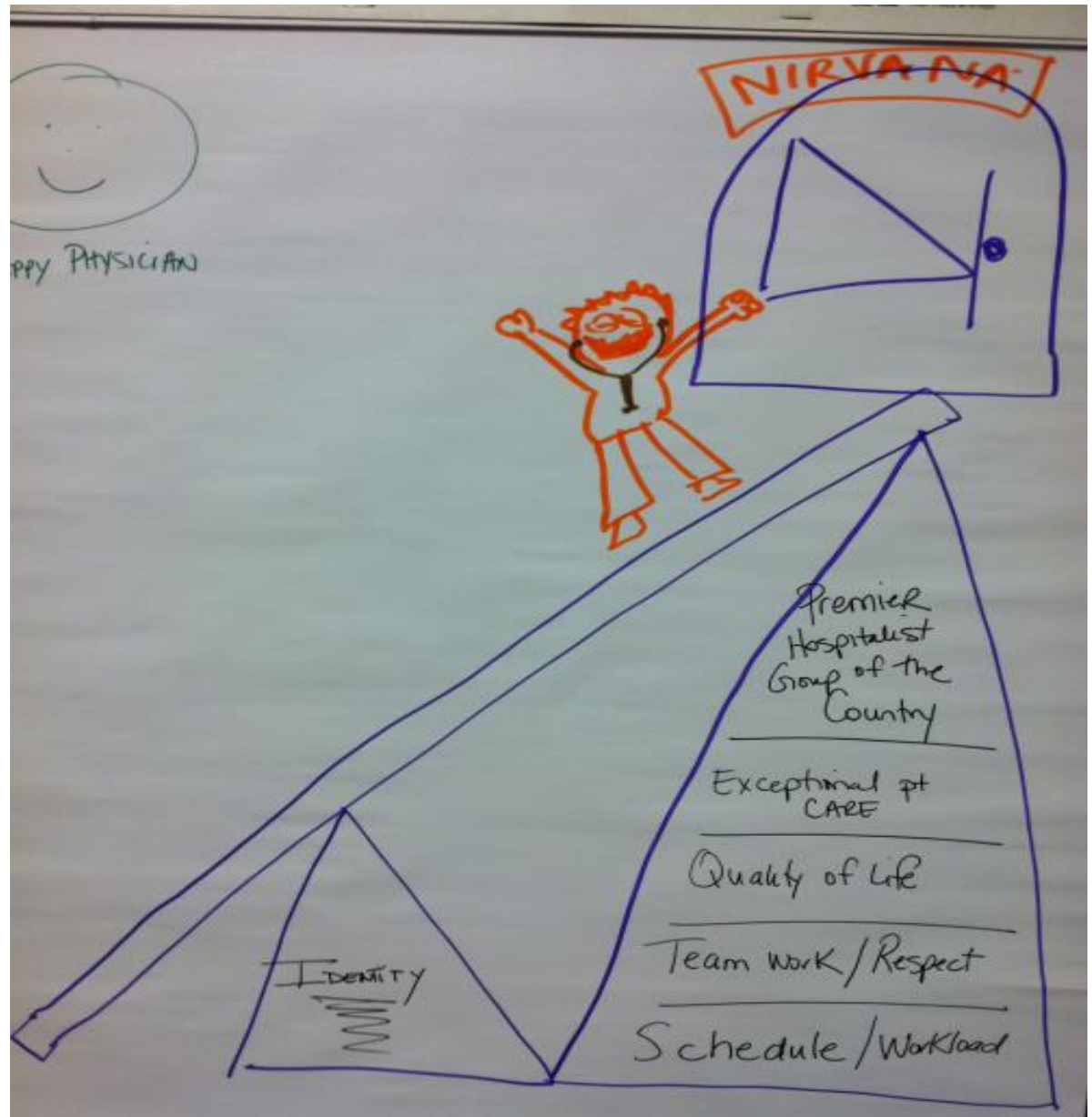


REASON FOR CHANGE

- \uparrow Volume = \downarrow Quality
or "not as good"
 - = Burnout
 - = Lack of detail
 - = Family
 - Relation/Safety
- NEED TO ADAPT TO CHANGING HEALTHCARE
- Identity Crisis
- NEED TO IMPROVE QUALITY OF



Target State



What Was Learned...

- Group Identity Needed
 - Mission Statement
 - Practice Model
 - Organizational Structure



Mission Statement

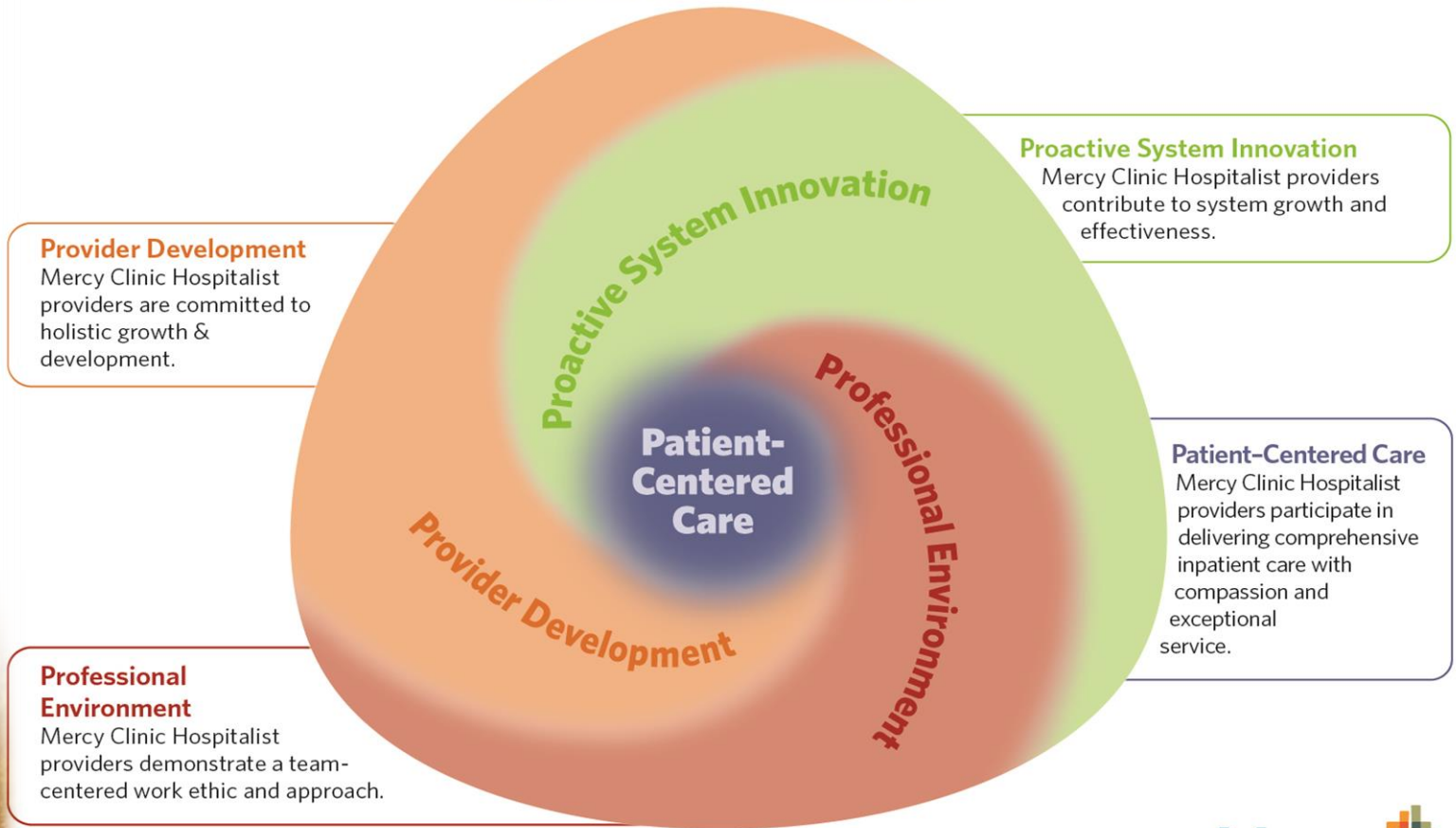
- Mission Statement
 - As a team of Mercy Providers we are dedicated to delivering comprehensive inpatient care with compassion and exceptional service.



Mercy Clinic Hospitalists Springfield

Professional Practice Model

Mission: "As a team of Mercy providers, we are dedicated to delivering comprehensive inpatient care with compassion and exceptional service."

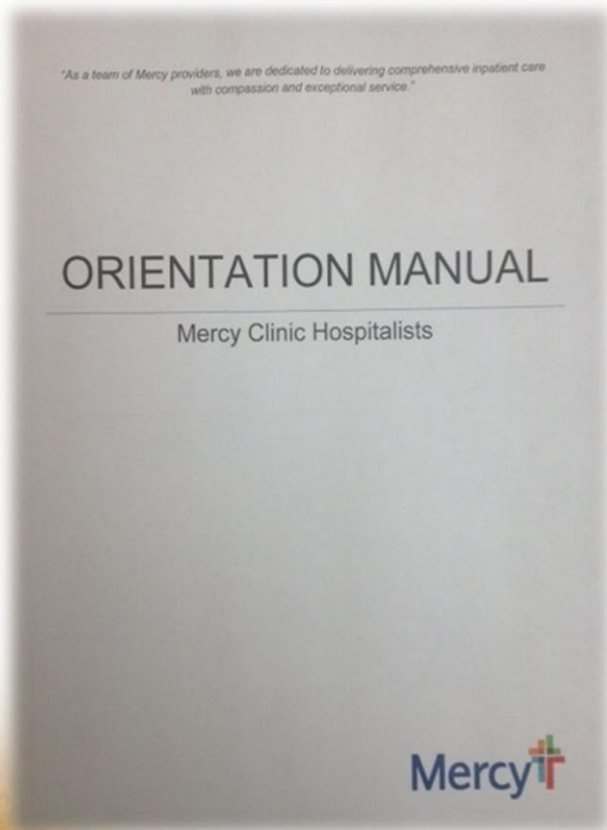


Impact on Recruitment/Retention

- Lost the Overalls
 - The view of ourselves changed
- Developed On Boarding Process
 - Orientation Manual
 - Mentoring Program
 - Leadership Ranch
 - Orientation Week



Orientation Manual



- About Mercy
- Practice Model
- Key Behaviors
- Group Organization and Expectations
- Current Priorities
- Day in the Life
- Coding
- Work Schedules



Mentoring Program

- Two Month Graduated Program to Full Work Load
- Assigned a Mentor
- Mentor Expectations
 - Structured shadowing 1-2 weeks
 - Scheduled bimonthly meetings
 - Provide feedback





Leadership Ranch

<http://leadershipranch.com/index.html>

- Tim Eberle – Developed the program in the early 1990's
- Discover "**how to be who they are committed to being and — rise to the top – it's not out of reach**" – Tim Eberle
- Low and high ropes courses
- Offers leadership and motivational experiences



Physician Orientation Week

- EPIC Training
- Leadership Ranch
- Overviews
 - Critical Care Medicine
 - Emergency Medicine
 - Patient Safety
 - Palliative Care
 - Ethics
- Day in the Life of Hospitalist
- Hospital Functions
 - Bed Control
 - Single Line
 - Nursing Overview
- Coding and Compliance
- Signature Service



People are drinking...



Results Thus Far

Previous

- 44% Retention Rate
- Low Group Performance
 - Service Capped at 117 per day.
 - No Care Teams
- No Hospital Influence

Current

- 87% Retention Rate
- Group Performance
 - Service not capped. Ranging 220-250 per day.
 - Development of Care Teams
- Hospital Influence
 - Transformational Leaders
 - MDEC





What has growth done?

Pre

- Not open to change
- Not open to innovation
- Worked in Silos
- Physician knows best
- Limited provider involvement

Post

- See opportunities not hindrances
- New Care Model
- Collaboration between service lines
- Seeks data
- Strategic planning by physicians

