



# LEE MEMORIAL HEALTH SYSTEM

## BOARD OF DIRECTORS

### PLANNING

## Committee of the Whole MEETING

May 14, 2009, 1:00pm

Lee Memorial Hospital Boardroom  
2776 Cleveland Ave, Ft. Myers, FL 33901

### ELECTRONIC BOARD PACKET

**ALL MEETINGS ARE OPEN TO THE PUBLIC AND THE PUBLIC IS INVITED TO ATTEND**

Any Public Input pertaining to an agenda item is limited to three minutes and a  
“Request to Address the Board of Directors” card must be completed  
and submitted to the Board Assistant prior to the meeting.

P.O. BOX 2218

FORT MYERS, FLORIDA 33902

239-332-1111

CAPE CORAL HOSPITAL

GULF COAST MEDICAL CENTER

HEALTHPARK MEDICAL CENTER

LEE MEMORIAL HOSPITAL

THE CHILDREN'S HOSPITAL

THE REHABILITATION HOSPITAL

LEE PHYSICIAN GROUP

LEE CONVENIENT CARE

**BOARD OF DIRECTORS**

**DISTRICT ONE**

Stephen R. Brown, M.D.

Marilyn Stout

**DISTRICT TWO**

Richard B. Akin

Nancy M. McGovern, RN, MSM

**DISTRICT THREE**

Lois C. Barrett, MBA

Linda L. Brown, MSN, ARNP

**DISTRICT FOUR**

Frank T. La Rosa

Dawson C. McDaniel

**DISTRICT FIVE**

Kerry Babb

James Green



**PLANNING**  
**COMMITTEE OF THE WHOLE MEETING**

**Thursday, May 14, 2009**  
**1:00 p.m.**  
**Lee Memorial Hospital Boardroom**

**TENTATIVE AGENDA**

1. **CALL TO ORDER** (*Linda Brown, MSN, ARNP Planning Chairman*)  
The meeting of the Planning Committee of the Whole of the Lee Memorial Health System Board of Directors will be called to order. Matters concerning the business of Lee Memorial Health System consisting of Gulf Coast Medical Center & Lee Memorial Hospital/HealthPark Medical Center and its subsidiaries (HealthPark Care Center, Inc., Lee Memorial Home Health, Inc., Cape Memorial Hospital, Inc. doing business as Cape Coral Hospital, and Lee Memorial Medical Management, Inc.) may be reported, discussed and recommended by the Committee of the Whole, then referred to the full Board of Directors for final action.
2. **PUBLIC INPUT**: Any public input pertaining to items on the Agenda is limited to three minutes and a "Request to Address the Board of Directors" card must be completed and submitted to the Board Assistant prior to meeting.
3. Consent Agenda (***Approval***):
  - A. April 2, 2009 Planning Committee Meeting Minutes
  - B. LMHS Strategic Scorecard for FYTD March 2009
4. **FY 2009 Planning Principles** (*Jim Nathan, CEO/President – 45 min*) (***Verbal Update***)
  - A. Grow Selective Market Share (Inpatient & Outpatient)
  - B. Strengthen Physician Relations & Communications
  - C. Strengthen Regional Vision for Children's Services
  - D. Focus on Key Performance Improvement Initiatives
5. HCAHPS (Hospital Consumer Assessment of Healthcare Providers & Systems) Improvement Plan (***Update***)  
(*Brad Pollins, System Director – Organizational Effectiveness – 20 min*)
6. Other Items
7. **Date of the next REGULAR Planning Committee of the Whole**:  
Thursday, June 11, 2009, 2:00 p.m.  
Lee Memorial Hospital Boardroom, 2776 Cleveland Avenue, Fort Myers
8. **ADJOURNMENT of PLANNING COMMITTEE**

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**LEE MEMORIAL HEALTH SYSTEM  
BOARD OF DIRECTORS**

**PUBLIC INPUT –  
AGENDA ITEMS:**

**Any public input  
pertaining to items on the  
Agenda is limited to three  
minutes and a  
“Request to Address the Board of Directors”  
card must be completed and  
submitted to the Board Assistant  
prior to meeting.**

**Refer to Board Policy: 10:15E: Public Addressing the Board**

**Non-Agenda Item:**

Individuals wishing to address the Board on an item NOT on the Agenda, the Board office must be notified of subject matter at least seven (7) days prior to the meeting to allow staff time to prepare and to insure the matter is within the jurisdiction of the Board.

**Planning Committee of the Whole**  
**May 14, 2009**

**3. Consent Agenda: (*Approval*)**

**A. April 2, 2009 Planning Committee Meeting Minutes**

**B. LMHS Strategic Scorecard for FYTD March 2009**

# LEE MEMORIAL HEALTH SYSTEM BOARD OF DIRECTORS PLANNING COMMITTEE OF THE WHOLE MEETING MINUTES

## Thursday, April 2, 2009

**LOCATION:** Lee Memorial Hospital Boardroom, 2776 Cleveland Avenue, Fort Myers, FL 33901

**MEMBERS PRESENT:** Linda Brown, MSN, ARNP, Chairman/Planning Committee; Richard Akin, Board Chairman; Nancy McGovern, RN, MSM, Board Vice Chairman; Frank La Rosa, Director; Dawson McDaniel, Director; Kerry Babb, Director; Wayne Daltry, Community Representative/Planning Committee; Fred Pollier, Community Representative/Planning Committee; Jack Eikenberg, Community Representative/Planning Committee; Marliese Mooney, Physician Leadership Council Consultant/Planning Committee

**MEMBERS ABSENT:** Marilyn Stout, Board Treasurer; Lois Barrett, MBA, Board Secretary; Steve Brown, M.D., Director; James Green, Director

**OTHERS PRESENT:** James Nathan, CEO/President; Cathy Stephens, Board of Directors' Liaison; Jim Humphrey, Board Counsel; Teri Isacson, System Director/System Counsel; Donna Giannuzzi, RN, Chief Patient Care Officer; CB Rebsamen, M.D., Chief Medical Officer/Clinical and Quality Services; Jon Cecil, Chief Human Resources Officer; Larry Antonucci, M.D., Chief Administrative Officer/CCH; Doug Luckett, Chief Administrative and Ancillary Services Officer/GCMC; John Iacuone, M.D., Executive Director/The Children's Hospital; Kevin Newingham, System Director/Planning and Strategy; Brad Pollins, System Director/Organizational Effectiveness; Marjory May, Vice President/Post Acute Care; Karen Krieger, System Director/Public Affairs; Joan Carroll, System Director/Health Advocacy; Walt Ittenbach, System Director/Rehab Hospital; David Berger, M.D., Community Representative/Quality & Education Committee; Tuck Wilson, M.D., Physician Leadership Council Consultant/Quality & Education Committee; Bob Johns, Guest; Cheryl Peppers, Guest; John Mitsa, Guest; Jennifer Reed, Reporter/News-Press; Beth Finney, Executive Secretary, Board of Directors

**NOTE:** Documents referred to in these minutes are on file by reference to this meeting date in the Office of the Board of Directors and on the Board of Directors website at [www.lememorial.org/boardofdirectors](http://www.lememorial.org/boardofdirectors), for public inspection.

SUBJECT	DISCUSSION	ACTION	FOLLOW-UP
<b>MEETING CALLED TO ORDER</b>		<p>The <b>PLANNING COMMITTEE OF THE WHOLE</b> meeting was <b>CALLED TO ORDER</b> by <b>Planning Chairman Linda Brown, MSN, ARNP</b> at 2:38p.m.</p> <p>The Board sits as the Lee Memorial Health System Board of Directors of Gulf Coast Medical Center, Lee Memorial Hospital, HealthPark Medical Center and the Board of Directors of its subsidiary corporations: Cape Memorial Hospital, Inc. doing business as Cape Coral Hospital; Lee Memorial Medical Management, Inc.; Lee Memorial Home Health, Inc.; and HealthPark Care Center, inc.</p>	
<b>PUBLIC INPUT</b>	There was NO "Public Input".		
<b>MEETING MINUTES</b>	Linda Brown asked if anyone wished to make corrections or deletions to the March 5, 2009 Planning Committee of the Whole Meeting minutes.	<p>A motion was made by Nancy McGovern to approve the <b>March 5, 2009 Planning Committee of the Whole meeting minutes</b>. The motion was seconded by Frank La Rosa and it carried with no opposition.</p>	
<b>LEE WOUND CARE PROGRAM</b>	Marjory May and Walt Ittenbach reviewed the Lee Wound Care Program presentation (Exhibit 1). Marjory said this is an update from the December approval of the consolidation of both Wound Care programs at Lee Memorial Hospital and Southwest Florida Regional Medical Center into the newly constructed and leased Plantation Road facility. Marjory said there was a revision to the last slide of the presentation and was distributed to the Board today.		
<b>CROSS ACCESS EASEMENT AGREEMENT</b>	Jim Humphrey said on December 4, 2008 the Board approved the move of the Wound Care Program, the Lease, and approved the moving of capital expenditure from the 2010 budget to the 2009 budget. He said from December 4, 2008 there were changes made to the agreement. These revisions include changes to the effective date of agreement from December 1, 2008 to March 31, 2009, revisions to the definition of delivery date and deposit requirements (first and last months rent plus a security deposit). He said additionally, in January 2009 Administration and the property landlord executed Letter of Intent to have an easement to connect the leased premises to the Gulf Coast Medical Center property. He said the closing of this is based on the approval of creating the Cross Access Easement Agreement (Exhibit 2). He said the proposed changes have been approved and signed by the Board Chairman however final Board approval is required. Jim also reviewed the Aerial Photo (Exhibit 3), which was distributed at the meeting. He said this decision is time sensitive based on the closing requirements.	<p>(Wayne Daltry left the meeting at 2:59pm)</p>	

SUBJECT	DISCUSSION	ACTION	FOLLOW-UP
	<p>Discussion ensued regarding traffic flow systems.</p>	<p><b>A motion was made by Dawson McDaniel to approve revisions made to the Lee Wound Care Lease which include: 1) changes to the effective date of agreement from December 1, 2008 to March 31, 2009, 2) revisions to the definition of delivery date and 3) deposit requirements (first and last months rent plus a security deposit). The motion also includes approval of the Cross Access Easement, which connects the leased premises to the Gulf Coast Medical Center property and is necessary for the closing of the Lease (Exhibits 2-3). The motion was seconded by Richard Akin and it carried with no opposition.</b></p>	
<p><b>LMHS STRATEGIC SCORECARD FOR FYTD FEBRUARY 2009</b></p>	<p>Kevin Newingham reviewed the LMHS Strategic Scorecard for FYTD February 2009 (Exhibits 4-5) distributed today. Kerry Babb asked if there were early indications for low scores within the Service Indicators? Kevin said the low scores could be due to a number of different variables. He said he is constantly reviewing trends to pinpoint specific issues to improve planning and future strategies. He said a committee has been formed to identify and discuss best practices within the System to improve low scores. Kerry said this is a very important issue to be addressed in the future. Kevin said he will bring this back to the Board for discussion once an action plan is developed.</p> <p>Jim Nathan said scores on any of the scorecard indicators are constantly monitored. He said low scores get a high level of attention and review from senior leadership. He said there is a massive amount of information collected from all facilities, which we try to condense and examine for overall challenges in the System and facility specific issues.</p>	<p><b>A motion was made by Nancy McGovern to accept the LMHS Strategic Scorecard Summary for FYTD February 2009 (Exhibits 4-5). The motion was seconded by Dawson McDaniel and it carried with no opposition.</b></p>	<p><i>Kevin Newingham bringing Action Plan on low Service Indicators to 5/14/09 committee</i></p>
<p><b>STRATEGIC PLANNING CYCLE</b></p>	<p>Kevin Newingham reviewed the System Strategic Planning Cycle (Exhibit 6), which outlines the process developing the FY 2010 Budget.</p>		
<p><b>FY 2009 SYSTEM STRATEGIC PRIORITIES</b></p> <p><b>STIMULUS PACKAGE UPDATE</b></p>	<p>Jim Nathan reviewed the five FY 2009 System Strategic Priorities: Financial Focus, Physician Relationships, Organizational Clarity, Clinical and Operational Effectiveness, and Public Image. He said the System continues to work on many different initiatives and opportunities for improvement. He said System leadership is fully engaged on these initiatives for improvements in the future.</p> <p>Jim provided an update on the stimulus package. He said Florida is now planning their budget based on the proposed money from the stimulus package. He said the National Association of Public Hospitals are watching this very closely.</p>		
<p><b>OTHER ITEMS</b></p> <p><b>TOBACCO-FREE LEE PROJECT</b></p>	<p>Kerry Babb said he asked Brad Pollins and Joan Carroll to provide a brief update on the phasing in of the Tobacco-Free Lee project. He said during the March 26, 2009 Full Board of Directors meeting there was a comment with regard to the possibility of implementing a 98% tobacco-free policy at LMHS facilities. He said this is not feasible and we are going to continue with plans to phase in a 100% tobacco-free policy. He said Brad and Joan have done a stellar job in the research and planning process.</p> <p>Brad reviewed material regarding the Tobacco Free Hospitals in Florida (Exhibit 7). He said in February 2009 a steering committee was developed to address the specific areas for key implementation of a tobacco-free policy. He said they are currently working towards communications with stakeholders and vendors, internally and externally, as a vehicle to get our message out. He said there are many outside</p>		

SUBJECT	DISCUSSION	ACTION	FOLLOW-UP
<p><b>MARKETING COMMITTEE UPDATE</b></p>	<p>agencies that have already expressed an interest in committing to this effort. Brad said there are different subcommittees currently working on modifying policies and procedures to make the best decisions for patient care, disciplinary processes, facility changes, and communication efforts to employees, physicians, and patients. He said we are working very hard to pace the System and phase in the tobacco-free policy. Frank said he appreciates the hard work that has gone into making the tobacco-free initiative a reality. He said there are many other hospitals that have been successful and he knows LMHS will be as well. Kerry said he will continue to work with Brad and his team as their Board liaison and will report back to the board on a regular basis.</p> <p>Kerry Babb provided a verbal update on his recent Marketing Committee meeting. He said their first meeting was informational, bringing committee members up to speed on the goals and tactics of the marketing plan. He said there was great discussion and they will be meeting at the end of the month to discuss in further detail marketing and future planning. He said we have to remember, the field of marketing is constantly changing and evolving and the System must stay flexible with these changes.</p>	<p style="text-align: center; opacity: 0.5; font-size: 48px;">APPROVED</p>	
<p><b>NEXT REGULAR MEETING</b></p>	<p><b>The next REGULAR Planning Committee of the Whole meeting will be May 14, 2009, 1:00pm, Lee Memorial Hospital Boardroom, 2776 Cleveland Avenue, Fort Myers, FL</b></p>		
<p><b>ADJOURNMENT</b></p>		<p><b>The Planning Committee of the Whole meeting was ADJOURNED by Planning Chairman Linda Brown, MSN, ARNP at 3:58 p.m.</b></p>	

*Minutes were recorded by Beth Finney, Executive Secretary/Board of Directors Office*

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**Linda Brown, MSN, ARNP  
 Interim Board Secretary**

**LMHS STRATEGIC SCORECARD SUMMARY**  
FYTD March 2009

Indicators	FYTD Trend*	Favorable Direction	Period Reported	FY 2008 Actual	FY 2009 Target	Fiscal YTD Actual	Current Period
<b>PEOPLE</b>							
Vacancy Rate		↓	Mar-09	2.59%	5.0%	2.63%	3.00%
Total Turnover		↓	Mar-09	11.50%	13.0%	10.3%	
Year 1 Turnover Rate		↓	Mar-09	New Indicator for FY 2009	20.5%	10.73%	
<b>QUALITY</b>							
Mortality Rate - Acute		↓	Mar-09	1.61%	1.91%	1.77%	1.60%
Medication Errors(Level II) per 10,000		↓	Qtr 1	0.22	5	3.10	3.10
ALOS - Acute		↓	Mar-09	4.52	4.60	4.64	4.74
Surgical Infection Rate - Acute		↓	Qtr 1	1.23%	1.50%	1.46%	1.46%
<b>SERVICE</b>							
Patient Satisfaction		↑	Qtr 2	86.9	86.9	85.2	84.0
HCAHPS (% Top Box) - Likelihood to Recommend		↑	Feb-09	66.0%	66.3%	63.8%	63.8%
<b>COMMUNITY</b>							
Public Image		↑		New Indicator for FY 2009	Establishing Baseline		
Medical Staff Satisfaction		↑		New Indicator for FY 2009	Establishing Baseline		
Uncompensated Care & Charity (in thousands)			Mar-09	New Indicator for FY 2009	FY 66,723 FYTD 33,599 CM 5,593	32,001	5,571
Philanthropy - Total Gifts		↑	Qtr 2	New Indicator for FY 2009	FY 5,553 FYTD 3,943 CQ 2,443	3,722	2,640
<b>FINANCE</b>							
Operating Margin		↑	Mar-09	0.3%	FY 2.25% FYTD 2.2% CM 5.6%	4.3%	7.5%
Cash/Debt Ratio		↑	Mar-09	64.1%	61.0%	51.2%	
Bond Rating Moodys / S&P *****		↑	Mar-09	New Indicator for FY 2009	A2 / A	A3 / A	n/a
Days in Accounts Receivable		↓	Mar-09	59.00	59.0	55.20	
Wages % of Net Revenue		↓	Mar-09	52.9%	FY 51.5% FYTD 51.6% CM 49.8%	49.5%	48.4%
Net Revenue per CMI Adjusted Admission		↑	Mar-09	\$6,568	FY \$6,699 FYTD \$6,677 CM \$6,767	\$6,518	\$6,724
Cost per CMI Adjusted Admission		↓	Mar-09	\$6,545	FY \$6,540 FYTD \$6,531 CM \$6,390	\$6,235	\$6,220

= at or better than target  
 = below target - no immediate concern  
 = below target - immediate concern

No Update

\*\*\*\*\* - Moodys has LMHS on a "Negative Outlook" watchlist



**Focus on key  
Performance Improvement  
initiatives**

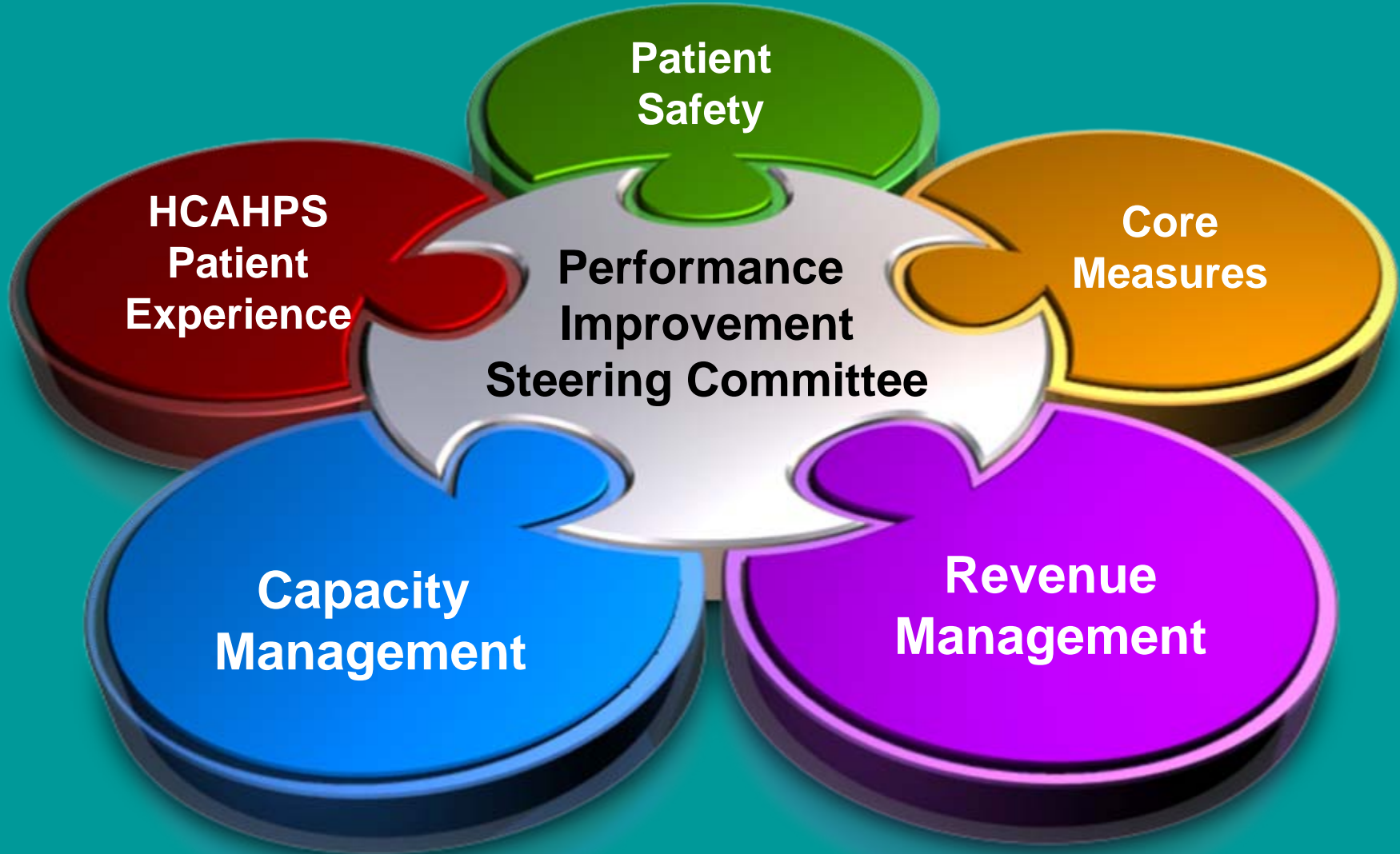
**Strengthen regional  
vision for children's  
services**

**LEE MEMORIAL  
HEALTH SYSTEM**

**Planning Principles**

**Grow selective  
market share  
(inpatient and  
outpatient)**

**Strengthen physician  
relations and  
communications**



# HCAHPS Update

## Board of Directors Presentation



# Presentation Objectives



- To review current HCAHPS performance trends for the system and inpatient facilities
- Identify next steps in improving HCAHPS performance



# What we want as patients...

- Doctors and nurses listen carefully to me
- Doctors and nurses explain things in a way I can understand
- Doctors and nurses treat me with courtesy and respect
- Before giving me any new medicine, hospital staff tells me what it is for
  - And describe possible side effects in a way I can understand
- If I am having pain, caregivers do what they can to control it
- I am given information about what to look out for after I leave the hospital

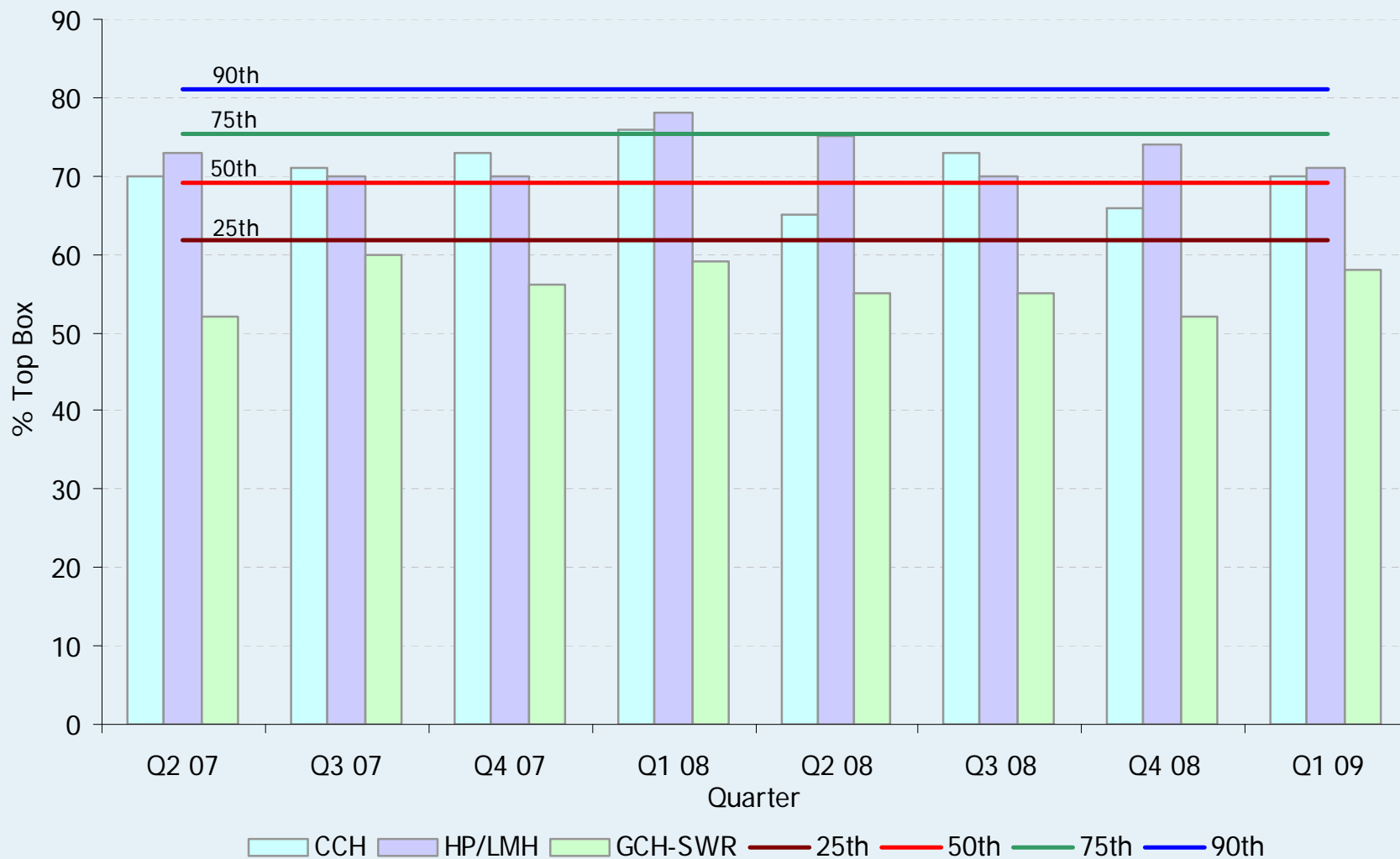


= HCAHPS

# HCAHPS and Targets



## HCAHPS Scores and Quartile Rankings



# Nationally HCAHPS Scores are Getting Better

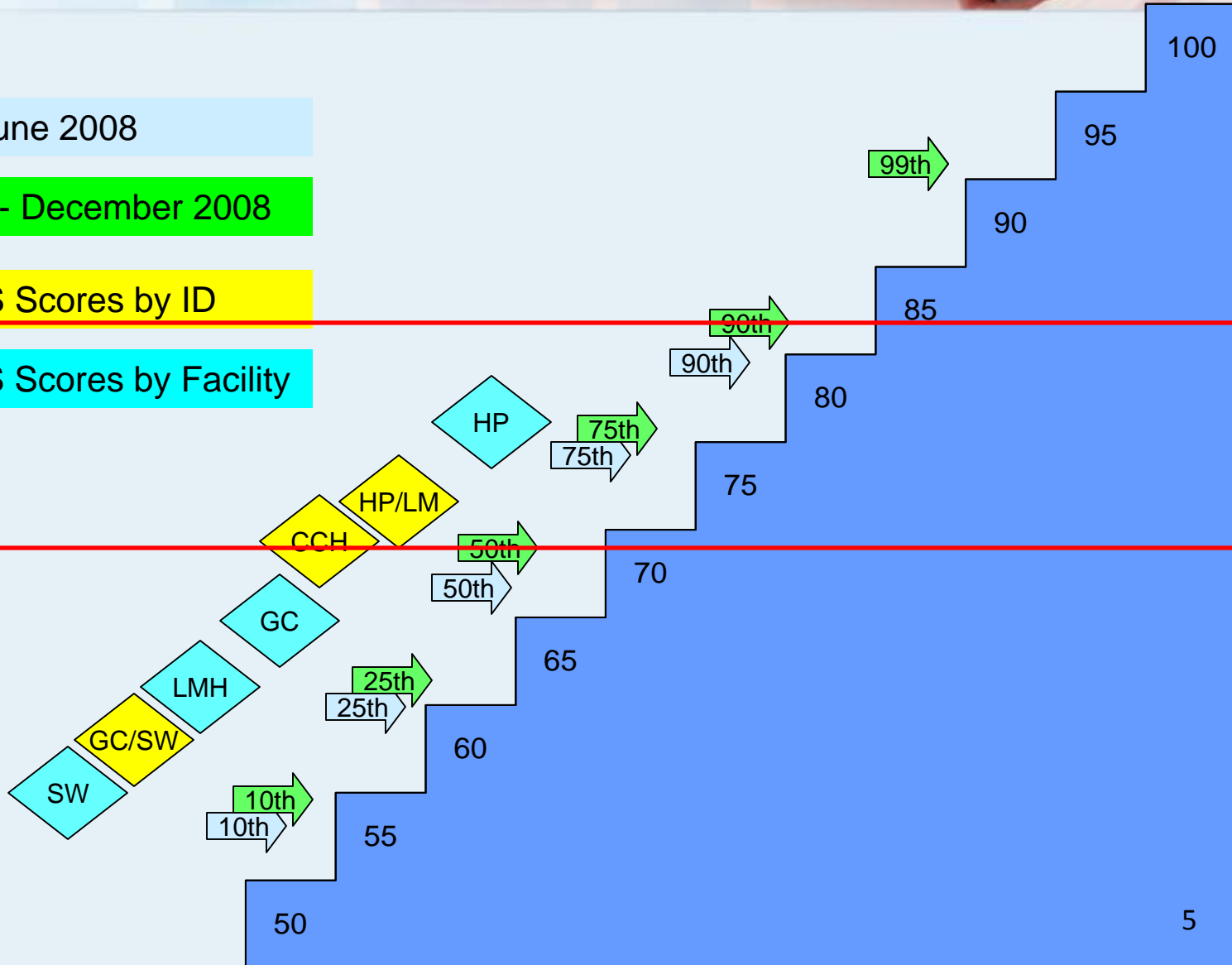


Rankings April – June 2008

Rankings October - December 2008

FY09 Q1 HCAHPS Scores by ID

FY09 Q1 HCAHPS Scores by Facility



# Pay for Performance

## Current Thinking

- Upper threshold for being in a position to earn more is greater than 90<sup>th</sup> percentile
- Lower threshold for being in a position to lose is less than 50<sup>th</sup> percentile
- HCAHPS is part of defining quality care by CMS
- Pay for Performance likely to begin in Oct. 1, 2011
- CMS will weight payments – 70% for clinical measures and 30% for HCAHPS
- CMS's Value Based Purchasing calculation will be based on 8 separate areas
  - Communication with Nurse
  - Communication with Doctors
  - Responsiveness of Hospital Staff
  - Pain Management
  - Communication about Medicines
  - Discharge Information
  - Cleanliness/Quietness of Hospital
  - Overall Hospital Rating



# HCAHPS Priorities



	CCH	GCH	HPMC	LMH	SWR
<b>1</b>	Staff describe medicine side effect	Staff describe medicine side effect	Nurses listen carefully to you	Help toileting soon as you wanted	Staff describe medicine side effect
<b>2</b>	Call button help soon as wanted it	Pain well controlled	Help toileting soon as you wanted	Nurses listen carefully to you	Nurses listen carefully to you
<b>3</b>	Nurses listen carefully to you	Nurses listen carefully to you	Call button help soon as wanted it	Call button help soon as wanted it	Room and bathroom kept clean
<b>4</b>	Nurses expl in way you understand	Call button help soon as wanted it	Pain well controlled	Nurses expl in way you understand	Help toileting soon as you wanted
<b>5</b>	Pain well controlled	Room and bathroom kept clean	Nurses expl in way you understand	Staff describe medicine side effect	Call button help soon as wanted it
					Nurses expl in way you understand

Blue = 3 facilities had this issue in the top 5 priorities

Purple = 4 facilities had this issue in the top 5 priorities

Pink = All 5 facilities had this issue in the top 5 priorities

# Performance Improvement Plan



1. HCAHPS identified as one of the top 5 performance improvement areas for 2010
2. Comprehensive Education Plan developed and approved
3. Project Charter has been developed and approved

## Purpose:

An acute care leadership team to provide guidance and oversight for the planning and implementation of HCAHPS Performance Improvement initiatives to achieve established targets for Lee Memorial Hospital, Cape Coral Hospital, Health Park Medical Center, and Gulf Coast Medical Center.

# Performance Improvement Plan



## Objectives:

- Position LMHS acute care facilitates in the top decile of performance thereby positioning LMHS to improve the patient care experience.
  - Build awareness throughout the acute care setting about the importance and urgency of the LMHS HCAHPS situation including describing the upside and downside consequences of HCAHPS performance
  - Build understanding about the need to deliver top box performance
  - Develop basic service delivery and HCAHPS skills related to priority index
  - Develop courtesy and compassion skills necessary to deliver an excellent experience at each patient/family/guest tough-point
  - Implement other supporting patient service change initiatives needed to positively impact performance

# The Three Levels of Care



5

**Compassion**

is a profound human emotion prompted by the needs of others

4

**Courtesy**

excellence of manners or social conduct; polite behavior

3

**Competence**

Patient's perception of our ability to perform a specific task, action or function successfully

# Key Initiatives

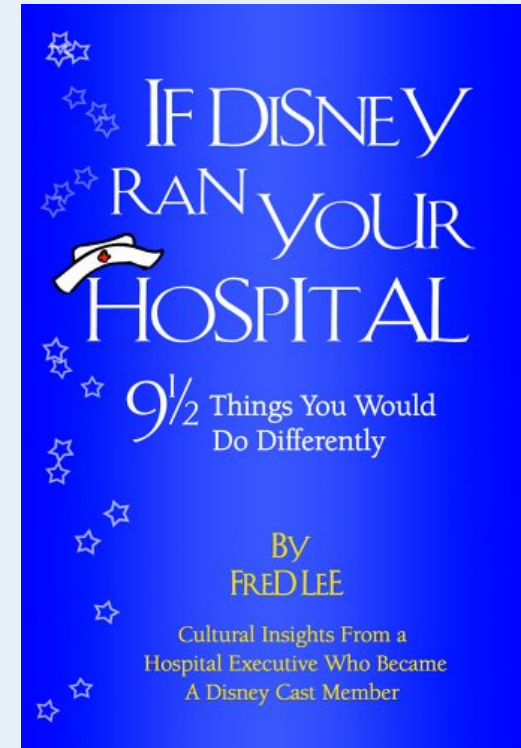


1. Provide regular updates to leadership
2. Create and distribute a leadership toolkit for leadership to communicate with staff
3. Retool the customer service portion of the Onboarding Program
4. Ensure campus orientations emphasize customer service
5. Rollout the intentional rounding using the 4P approach on units at each campus (pain, position, personal needs, placement of items)
6. Implement quiet times on units at each campus
7. Provide education on HCAHPS priority items – begin with Nurses Listen Carefully to You



# Key Initiatives

8. Provide If Disney Ran Your Hospital training to leadership and staff
9. Implement Discovery Chart to address 5 patient touch-points
10. Conduct GSC needs assessment and build capabilities
11. Delivery courtesy and compassion training
12. Ensure HCAHPS reflecting in accountability standards
13. Establish reward and recognition program
14. Expand use of Customer Compliment and Complaint System
15. Replicate HPMC ER LPN Coordinator Role



# Next Steps

1. Assemble the Project Team

2. Develop interventions

3. Implement interventions

4. Measure performance and correct as needed



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**LEE MEMORIAL HEALTH SYSTEM**  
**BOARD OF DIRECTORS**

**OTHER ITEMS**

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**LEE MEMORIAL HEALTH SYSTEM  
BOARD OF DIRECTORS**

**DATE OF THE NEXT  
REGULARLY SCHEDULED  
MEETING**

**PLANNING  
Committee of the Whole  
MEETING**

**THURSDAY,  
June 11, 2009  
2:00pm**

Lee Memorial Hospital Boardroom  
2776 Cleveland Ave, Ft. Myers, FL 33901