Mission: Provide excellent health care by promoting wellness and healing through trusting relationships.

Vision: To be the regional center of excellence in health and wellness.

Good Samaritan Approves Strategic Plan

Good Samaritan’s three-year strategic plan, outlining specific priorities and strategies of the organization, was approved by the Hospital Board of Governors. The plans include multiple strategies, all of which fall under one of five beacons of excellence, which are: Patient Safety and Quality, Team, Experience, Community, and Stewardship and Growth. Each objective is focused on bettering the health of the community.

“The manner by which we conduct our annual strategic planning process was initiated several years ago via our Baldrige Journey to Performance Excellence,” said Fred England, Chief Administrative Officer. “Each year, that process becomes stronger and includes the contributions of more and more individuals in the Good Samaritan family, including patients, employees, volunteers, board members and community leaders.”

A huge focus of the hospital’s strategic plan centers around the stewardship and community beacons. Throughout 2016, Good Samaritan leadership has participated in Serve 365, a community engagement initiative that promotes citizenship and volunteerism. This year to-date, 32 Directors and Senior Leadership volunteered their time and donated a total of 184 hours. This effort will continue to increase in the next three years and will allow the opportunity for all employees to participate if they wish.

The hospital will also strive to increase community partnerships in Knox and surrounding counties. A large part of what influences the health of a group of patients is found in the patients’ behaviors, socioeconomic conditions and other factors that are challenging to address in clinical visits. These influences have led to an increase in obesity and smoking throughout the community. As Good Samaritan continuously works to keep patients healthy, reaching patients outside of the typical care setting of a hospital or doctor’s office will have a positive impact on health outcomes.

The results of the latest Community Needs Assessment found that residents in Good Samaritan’s service area have three major factors that contribute to unhealthy behaviors: 1.) Lack of primary care, 2.) Decrease in physical activity, and 3.) Lack of health education.

To assist in the patient’s access to care, Good Samaritan’s strategic plan explains that individuals will not have to wait any longer than a specific number of days for care.

In collaboration with three local hospitals, Good Samaritan will enter a consortium to receive post-graduate medical residents beginning in 2018. This collaboration will assist in the growing shortage of primary care physicians in the area, thus increasing patients’ access to care. “Having residents at Good Samaritan will help with our physician recruitment, and will allow us to provide care to more people. Our physicians will work closely with the residents and together they can create a learning environment where both parties can improve their knowledge and patient care,” said Rob McLin, President and CEO.

Also a part of the approved strategic plan is to increase employee wellness. Every year, employees participate in biometric testing. This screening checks the employees’ height, weight, blood pressure, BMI, tobacco usage, and cholesterol, kidney function and A1C (sugar) in a blood test. The prostate specific antigen (PSA) is also screened in men.

Employees who are on the Good Samaritan Medical Plan and meet certain criteria are eligible to receive $12 a pay that equals out to $312 a year as an incentive. Those who do not meet the requirements can earn the same reward by completing a reasonable alternative. The strategic plan wants to increase the number of qualifying individuals each year and will strive to have 60% of the workforce meet the criteria in 2019. “Providing these incentives for healthy numbers not only decreases Good Samaritan’s and our employees’ insurance costs, but it also promotes a healthy lifestyle throughout the organization,” said McLin.

The strategic plan outlines Good Samaritan’s goals for the next three years. The plan sets the organization’s path toward its vision – to be the regional center of excellence in health and wellness. Outlined with its implementation in 2017, Good Samaritan will be better positioned to manage and promote the ever-changing health care environment and provide improved care to its patients.

To see the 2017-2019 Strategic Plan, click HERE.
August’s Shining Star is Penny Culp

One day, a 34-year-old female patient came into the emergency room with abdominal pain. She had just finished battling breast cancer and was finally getting her life back to normal. After receiving the test results, it was found that this patient had a large mass on her liver. The patient immediately burst into tears and began worrying about her future and her family. After several minutes of trying to console the patient with no success, the nurse treating her knew there was only one person that could help during this situation - Penny. Battling cancer herself, Penny hesitated at first, fearful of what she could say, but then immediately walked to the patient’s room to help. She grabbed a chair and pulled it up right beside the patient’s bed, and began to speak with the young woman. After some time had passed, both Penny and the patient were talking and crying together. Penny gave this patient the strength to survive and the willpower to beat cancer once again. When the patient left, she was able to smile through the tears and joke with the staff a little. Because of Penny’s courage and empathy, she was able to save this patient’s life and encouraged her to battle the cancer. Her kind words and understanding provided the patient with hope - something medicine could never do.

July DAISY Winner is Amber Miller

Amber Miller, Emergency Room nurse, was providing care to a patient who recently became homeless. During the patient’s stay in the hospital, Amber worked to find a shelter for the patient, but was unsuccessful and had to discharge the patient with no home to go to. Later that evening, security informed Amber that the former patient was sleeping in the grass outside the hospital. Amber continued to search for a shelter and eventually found one in Evansville. She worked with Knox County Emergency Medical Services to get the patient a free ride to the shelter. While waiting for the vehicle, Amber had the patient wait inside and provided them with a meal, blanket and pillow. Amber is an example of what a nurse should be. She went out of her way to show kindness and compassion to her patient, who would have otherwise been left to sleep outside with no shelter.

Patient Satisfaction Scale

- Does Not Meet Goal
- Does Not Meet Goal, But Within 15%
- Meets or Exceeds Goal
- World Class Status

Click HERE to see the presentation of Penny’s award.

Click HERE to see the presentation of Amber’s award.
Lean Six Sigma

The Power of a Question

For the past few months, members of The Revenue Integrity Committee have paid special attention to various aspects of the revenue cycle (Charge Master, Charge Capture, Charge Reconciliation and Audit). Much work is being done to accomplish Revenue Integrity by the committee members and most employees are being asked to pay particular attention to revenue opportunities with the implementation of Epic. Recently a question, posed by an employee in a department typically not associated with producing revenue, has resulted in a change of documentation practice, which has resulted in additional revenue.

When an employee noticed the absence of a particular charge on certain patients, it was discovered that two physicians documented a separate note for the interpretation of the image, while a third did not. Brandee Hahn, Lean Six Sigma Department, was contacted and the question was asked, "Is there a reason charges are different for similar types of patients?" Brandee talked with coders to verify the requirements for the documentation, then spoke with Traci French, Director of Business Development and Revenue Integrity. It was determined that billing for the images may occur when a separate report/interpretation from the op note is completed.

Because the question was asked, the physician now dictates his report/interpretation for the image, and billing occurs, resulting in approximately $3,150 additional charges per year. The Revenue Integrity Committee believes similar opportunities exist throughout the hospital. To begin finding the opportunities, one must ask a question.

Recruitment Corner

Good teamwork has many advantages; increased productivity, better morale and improved efficiency to name only a few. One of the most important things in creating a good team is communication. The better the communication, the better the teamwork!

Good communication is essential to maintaining an efficient workplace. When our channels of communication are well established and information flows, then positive interactions increase. We learn how to interact more efficiently with each other to perform our job duties. Also, it helps us identify the strengths and weaknesses in each of us so we can better plan our work and to recognize our individual responsibilities to Good Samaritan’s success. Communication keeps us updated on our progress and working toward the collective goals of the hospital.

Because communication is so vital in the workplace, it’s imperative for all of us to develop clear communication skills, both written and verbal. Nonverbal communication is just as important and refers to things unspoken. Don’t forget that your eyes, facial expressions, body language, body positioning and hand movements are all forms of communication as well. These signals can reveal just as much as the spoken or written word.

If you’re communicating in writing, review your words to ensure they are logical and accurate. If you are speaking, think first and organize your thoughts. And of course, remember the tone of your voice. Also, be aware of the messages your body is communicating to your teammates as well, otherwise you may be at risk of “miscommunicating”. Things such as eye contact, or the position of your arms or body can send positive or negative messages.

Poor communication in any form can lead to frustration, misunderstandings, employee conflict, lost productivity, low morale, errors and even turnover. So keeping solid communication in the forefront of our minds will help us accomplish our goals, both individual and collective.

And since we all know every job performed in our facility is important; so should our communication with each and every coworker on the Good Samaritan team. We are all part of a team that helps provide great patient care. As always, employees are welcome to call or visit Human Resources for information and guidance.

Don’t forget our new location: 1st Floor, Columbian Towers (near the 6th Street); our phone number is unchanged at 812-885-3373.

Recruiters:

Julie Marchino
jmarchino@gshvin.org

Ali McCrary
anmccrary@gshvin.org

Morgan Bohnert
mbohnert@gshvin.org
**Patient Comments**

<table>
<thead>
<tr>
<th>“I think your name fits very well. I will always trust your care.”</th>
<th>“I take my hat off to the staff.”</th>
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<tbody>
<tr>
<td>–Ambulatory</td>
<td>–Emergency</td>
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<table>
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<tr>
<th>“Best hospital and staff I have ever experienced.”</th>
<th>“The doctor and nurses were always friendly and caring.”</th>
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<tbody>
<tr>
<td>–Inpatient</td>
<td>–Outpatient</td>
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</table>

**Performance Excellence**

The Power of One

Each employee that serves at Good Samaritan has a vital role to play in the provision of safe quality care to our patients. Last month we reviewed the concept of “stopping the line” if you feel that an unsafe practice is occurring; and this month we are looking at the “power of one.” This concept involves viewing your contribution as vital to the safety of the patient. It is easy to connect front-line patient care staff with safe quality care, i.e. physicians, nurses, nurse assistants, phlebotomists, etc.; however, in reality every employee in the organization is affecting the patient in some way, whether through data analytics, support to other departments who are providing patient care, or numerous other areas. The bottom line is that each employee has the power to determine that they will strive to do their best in serving the patient.

The second part of this concept is viewing the organization as one collective group united together for the safety of our patients. Unity is a general concept that applies to all aspects of our lives at home, work and play. In essence, as employees we are not here alone nor is it possible for one person to provide everything our patients need. However, together we can make a difference in the lives of our patients and their families. The patients come to our facility and expect that every employee will work together to care for them in the safest way. When it comes to caring for our patients, it should never be “us versus them” but must always be “we.”

In conclusion, as employees we must remember that we are all part of the Good Samaritan team here to serve the patient. They deserve to receive the safest care possible, which can only be done through teamwork. After all, no one chooses to face illness and tragedy, but unfortunately it happens. The least we can do is pull together to make their experience here the best that it can be. Remember . . . The POWER OF ONE individual serving with others to make ONE team.

**Nursing Class of 1956**

Members of Good Samaritan Nursing Class of 1956 celebrated their 60th reunion on Wednesday, June 29 at Trace Inn in Illinois. Eleven of the fourteen members attended the anniversary celebration and eight members also brought their husbands. All members are now retired after having been employed in many areas of nursing in several states and overseas. Many are still involved in volunteer activities in their community. The eleven members who attended the party are pictured below, along with the nursing class photo in 1956.

Front row, from left: Gloria (Branham) Lafferty; Margaret (Hardacre) Hoch; Donna (Painter) Hacker; Barbara (Burgoon) Gognat

Back row, from left: Betty (Clark) Wallace; Delores (Ressler) Curry; Becky (McDowell) Schmucker; Donna (Beegeman) Hays; Shirley (Duncan) Legg; Roberta (Neeley) Griggs, Georgia (Paddick) Carie.

Absent: Betty (Shank) Dailey; Elnora (Ravellette) Berens and Carol (Enyart) Matteson.

Front row, from left: Elnora (Ravellette) Berens; Carol (Enyart) Matteson; Donna (Painter) Hacker; Rebecca (McDowell) Schmucker; Gloria (Branham) Lafferty and Mary (Zeigler) Herron.

Back row, from left: Donna (Begeman) Hays; Margaret (Hardacre) Hoche; Betty (Shank) Dailey; Betty (Clark) Wallace; Bert (Neeley) Griggs; Georgia (Paddick) Carie; Shirley (Duncan) Legg; Marilyn (Allen) Florey; Mary (Wallace) Walters; Barbara (Burgoon) Cognat and Deloras (Ressler) Curry.
May New Hires

Cancer Program
• Ashlynn Kendall - Clinical Dietitian

Environmental Services
• Cameron Anderson - Environmental Services Assistant
• Lori Byrer - Environmental Services Assistant
• Trevor Hess - Environmental Services Assistant
• Zina Lockhart - Environmental Services Assistant
• Bunk McCrary - Valet Attendant
• Traci Reed - Environmental Services Assistant
• Dana Wright - Environmental Services Assistant

Engineering
• Libby Myers - Clerk Typist
• Nic Bruner - Maintenance Utility

Food Services
• Haley Underwood - Food Service Assistant
• Ryan Vestal - Cook

Health Information
• Carly Hatten - Imaging Specialist

Hospice
• Carla Hatcher - Student Nurse Extern

Laboratory
• Meredith Spitz - Laboratory Assistant

Nursing Services
Clinical Decision Unit
• Lydia Acord - Graduate Extern
• Shera Horton - Staff Nurse

Emergency Services
• Rowena Labo - Emergency Services Technician
• Dawn Like - Emergency Services Technician
• Lynn Morris - Emergency Services Technician
• Ryan Scott - Staff Nurse

ICU
• Kayla Campbell - Nurse Assistant
• Vanessa Heinz - Nurse Assistant
• Taylor Houck - Nurse Assistant
• Meagan Jackson - Nurse Assistant

Labor & Delivery
• Hannah Jenkins - Student Nurse Extern

Medical / Pediatrics
• Deidra Firestone - Multi-Skilled Worker
• Theresa Huey - Multi-Skilled Worker
• Logan Kermicle - Multi-Skilled Worker
• Hannah Johnson - Staff Nurse
• Chanda Perry - Multi-Skilled Worker

Surgical Services
• Mary Forbes - Staff Nurse
• Jessi Greenwood - Graduate Extern
• Erin Hughes - Staff Nurse
• Amanda Weaver - Graduate Extern

Patient Access
• Megan Clouse - Access Associate
• Sarah Maxwell - Access Associate

Pharmacy
• Makenzie Harrison - Pharmacy Intern
• Lindsey Letson - Pharmacy Technician

Pre-Certification & Scheduling
• Lori Shelton - Pre-Cert/Benefits Analyst

Physical Medicine
• Whitney Leigh - Speech Therapist Assistant

Physician Services
• Serenity Dartt - Licensed Practical Nurse
• Jill Frisz - Nurse Practitioner
• Niki Kaiser-Fischer - Physician Practice Nurse
• Jeana Mahan - Receptionist
• Nicole Woodard - Physical Therapist
• Elizabeth Wright - Receptionist
• Rick Ziegler - Receptionist

Samaritan Center
• Toni Boyle - Resident Assistant
• Jessica Frazee - Psychiatric Nursing Technician
• Haylee Hostetter - Staff Nurse
• Heather Willard - Resident Assistant
• Kelsey Wullenwaber - Resource Specialist

Promotions

Shania Alvia – ICU – Nursing Assistant – TO – OB – Multi-Skilled Worker

Beth Blome – Patient Accounts – Financial Analyst – TO – Internal Audit – Revenue Integrity Specialist

Lauren Charlton – Medical/Pediatrics – Graduate Extern – TO – Medical/Pediatrics – Staff Nurse

Jennifer Dant – Ambulatory Surgery – Surgical Tech – TO – Perioperative Services – Graduate Extern

Brittany Daugherty – OB – Graduate Extern – TO – OB – Staff Nurse

Chasity Foster – Perioperative Services – Staff Nurse – TO – Perioperative Services – Charge Nurse

Valerie Loudermilk – Perioperative Services – Graduate Extern – TO – Perioperative Services – Staff Nurse

Kourtney Osmon – ICU – Graduate Extern – TO – ICU – Staff Nurse
August Anniversaries

Molly Phillips – ICU – Graduate Extern – TO – ICU – Staff Nurse

Ashlee Primus – Medical/Pediatrics – Graduate Extern – TO – Medical/Pediatrics – Staff Nurse

Amanda Rothenberger – Medical/Pediatrics – Graduate Extern – TO – Medical/Pediatrics – Staff Nurse

Madison Schuckman – ICU – Graduate Extern – TO – ICU Staff Nurse

Shelby Seitzinger – OB – Graduate Extern – TO – OB – Staff Nurse

Justin Smith – Emergency Services – Safety Assistant/Nurse Asst – TO – Emergency Services – Emergency Services Tech

Nicole Uhlimann – Samaritan Center – Emergency Services Provider – TO – Samaritan Center – Psychiatric Social Worker II

Kaleigh Weger – OB – Graduate Extern – TO – OB – Staff Nurse

Veska Banzon ................. 1
Lori Dart .......................... 1
Elaine Durchholz ............. 1
Michele Elliott ................. 1
Janilyn Elsten ................. 1
Brayton Haney ................. 1
Elana Hankins ................. 1
April Hatfield ................. 1
Alexa Heumann ................ 1
Emily Iafrate .................... 1
Michalyn Johnson ............. 1
Shearie Kummerer .......... 1
Jennifer Lay ..................... 1
Jasmyne Lewis .................. 1
Jennifer Ludlow ............... 1
Shawna May ...................... 1
Mykalia Meng ................... 1
Courtney Morris ............... 1
Melony Neff ..................... 1
Jane Parish ...................... 1
Brenda Robbins ............... 1
Sherly Seitzinger .............. 1
Debbie Silva ..................... 1
Benjamin Sparks ............... 1
Ty Boyd ........................... 2
Amber Burkhart ............... 2
Cortney Carter .................. 2
Mike Curtis ....................... 2
Jennifer Dailey ................. 2
Heather French ................. 2
Angela Gayer .................... 2
Lindsey McBride ............... 2
Jessica Robertson .............. 2
Christine Ruppel .............. 2
Judy Seitzinger ................. 2
Amanda Varble ................. 2
Sharon Arnold ................... 3
Karisa Bauer ..................... 3
Matt Brown ....................... 3
Mary Bryant ...................... 3
Rhonda Burns .................... 3
Heather Cooper .................. 3
Andrea Evans .................... 3
Amanda Hance ................... 3
Laura McBee ..................... 3
Penny McCloud .................. 3
Tim Schmidt ..................... 3
Kay Thais ......................... 3
Joyce Lindsey .................... 3
Michael Ransom ................ 4
Chazlynn Wolfe ................. 4
Caitlyn Wonning ............... 4
Whitney Curry ................... 5
Torey Marvel ..................... 5
Angle Meek ....................... 5
Dawn Stroud ..................... 5
Bobbie Anderson ............... 6
Darvin Brown .................... 6
Sandra Diggs ..................... 6
Beverly Emmons .................. 6
Davenna Frey ..................... 6
Julie Harrington ............... 6
Angela Jones ..................... 6
Mary Ray ......................... 6
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Helen Goszowski ............... 7
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Jeri Davis ....................... 9
Erin Hurst ....................... 9
Brant Schaefer ................... 9
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Linda Royalty ..................... 20
Michelle Voltz ................... 20
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Norma Bean ....................... 21
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Vickie Smith ..................... 38
Barbara Boyer .................... 40

Physician Anniversaries

Harold Hebard, III, MD ........ 2
Karen Neeley, MD ............... 2
Heather Nichols, MD .......... 2
Mary Loftin, MD ................. 3
Gregory Whitsett, MD ........ 3
Dominic Cefali, MD .......... 4
Scott Keyes, MD ................. 8
Mindi Morris, MD ............. 8
Kristin Mahan, MD ............. 14
Victor Kirchoff, MD .......... 17
Henry Matick, DO .............. 29

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On August 23, 2016 Good Samaritan will have its first ever Lung Screening Day for (qualifying) employees and their spouses.

Because it is generally found at a late stage, lung cancer still remains the number one cause of cancer-related deaths in both men and women. Lung Screening at Good Samaritan began in 2014 to help our high risk population fight this statistic. Since that time, our program has been finding lung cancers, some of them in the early stages and many of which have been treatable right here at Good Samaritan. Helping the patient find, treat and potentially cure lung cancer is our goal.

Our program is modeled after a clinical trial performed by the National Institute of Health where Low Dose CT (LDCT) was used to screen people who were at high risk for developing lung cancer and who were without symptoms at the time of screening. The results showed a comparison between LDCT Screening and standard chest x-rays and revealed a 20% reduction in lung cancer deaths for the participants in LDCT screening arm of the study. This test can and does save lives. It is important if you are considering LDCT as a screening exam that you meet certain criteria and have a visit with a medical professional who will order this test. While lung screening is effective and beneficial, a medical provider should sit with you and provide you with the information you will need to make this important decision. If you decide to do the screening, it is done on a separate date and time from the office visit that is convenient for you.

Dr. Mark Pajeau, oncology physician here at Good Samaritan is offering to assist our (qualifying) employees and/or their spouses with this decision-making by seeing them on August 23 in his office located on the second floor of the Cancer Pavilion inside the hospital.

• Appointments or information can be made by calling the Lung Screening Coordinator, Patty Inyart at 812-885-3638 or by emailing her at pinyart@gshvin.org. Call between August 1st and August 15th to schedule your appointment, or for more information for the office visit on August 23.

• Appointments for the actual scan will be made for you at the office visit in order to select a date and time for testing that is convenient for you.

UMR (and most major insurances) currently cover the cost of this test as a wellness benefit at 100%. Please call Patty at 812-885-3638 if you are unsure if you are covered. *A co-pay for the office visit is expected at the time of the appointment.

LDCT lung screening is recommended for the following persons who are considered by medical professionals as being at “high risk” for developing lung cancer:
- Ages 55-77 AND
- A 30 or more pack year or equivalent smoking history (one pack a day for 30 years, 2 packs a day for 15 years, etc.)
- Current smokers or former smokers who have quit smoking within the last 15 years
- Currently showing no signs of lung cancer

To calculate your risk for lung cancer or for general information about lung cancer screening, click on the links below:

Should I Screen
Lung Cancer Alliance

DON’T FORGET! If you are on the Good Samaritan Health Plan and did not meet one or more of the Biometric Criteria, you can still qualify for your wellness incentive of $12/pay. Contact Employee Wellness at 812-885-3316 or email slyochum@gshvin.org to request a Reasonable Alternative by SEPTEMBER 30th, 2016.
Our number one priority at Good Samaritan is to provide excellent patient care. In a time where health care is rapidly changing, we must continue to adapt and grow as an organization. Our success is dependent on our ability to learn and improve.

We expect employees to be engaged at Good Samaritan and promote collaboration and teamwork among all departments. As we communicate the vision of better health throughout southwest Indiana and southeast Illinois, working closely with other local organizations will be vital. Our presence in the community is required if we are to promote wellness to our patients.

We are blessed to provide hope and healing to those in need. Our connection with patients through our clinics and programs allows us to offer affordable access to health care. This becomes our starting point towards Population Health, beyond our four walls.

We want Good Samaritan to be the best place to receive health care, but also the best place to work. We strive to get better every day and will never stop improving. Our employees, physicians and volunteers make Good Samaritan great. We all share the same goal - do what is best for our patients!

Sincerely,

Rob McLin
President & CEO
### Long-Term Action Plans (L)

- **Dollars and Cents**: $500,000
- **Payment Source**: Implemented Savings

<table>
<thead>
<tr>
<th>Measures</th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
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</thead>
<tbody>
<tr>
<td>Reduce Medical Errors (S)</td>
<td>≤ 0.5</td>
<td>≤ 0.75</td>
<td>≤ 1.0</td>
</tr>
<tr>
<td>Eliminate Hospital-Acquired Infections (S)</td>
<td>≤ 1.0</td>
<td>≤ 1.4</td>
<td>≤ 1.0</td>
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<tr>
<td>Improve Medicare Spend/Benefit (L)</td>
<td>&gt; 85%</td>
<td>&gt; 85%</td>
<td>≥ 75th Percentile</td>
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<tr>
<td>Develop Wellness Culture (L)</td>
<td>&gt; 85%</td>
<td>&gt; 85%</td>
<td>≥ 50th Percentile</td>
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### Short-Term Action Plans (S)

- **Dollars and Cents**: $1,100,000
- **Payment Source**: Community Support

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<thead>
<tr>
<th>Measures</th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
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<tbody>
<tr>
<td>Value Based Purchasing Scores</td>
<td>Adjusted Discharge</td>
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<tr>
<td>Serious Safety Event Rate</td>
<td>Top Box 75%</td>
<td>Top Box 75%</td>
<td>Top Box 75%</td>
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<td>All-Cause Readmission Rate</td>
<td>Top Box 80%</td>
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<td>Top Box 95%</td>
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<td>Anthem Scorecard</td>
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</tr>
<tr>
<td>Improve by 5%</td>
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### Strategic Objectives

- **Compass**: Patient Safety & Quality
  - Improve high quality and safety outcomes
  - Engage high quality team members in relationships to support the delivery of excellent health care
  - Engage and satisfy customers who are then likely to recommend Good Samaritan to others
  - Create the conditions for the sustained financial viability of Good Samaritan through growth initiatives

- **Team**: Experience
  - Consistently maintain high quality and safety outcomes
  - Develop Wellness Culture
  - Develop Ambulatory Quality Measures
  - Deliver and Conduct Opinion Surveys
  - Implement 2016 CNHA Action Plans of 53 of 92 Counties

- **Community**: Stewardship & Growth
  - Engage with our community as the leader in providing for their health care
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  - Implement 2016 CNHA Action Plans of 53 of 92 Counties

- **Stewardship & Growth**: Strategic Challenges: Health Care Reform, Physical Plant & Technology, Recruitment, Retention

### Strategic Advantages

- Interdisciplinary Team
- Location
- Quality Performance (Outcomes)
- Physical Plant & Technology
- Community Support