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.

Cheers to a Successful 2017

Let’s celebrate our accomplishments this past year and look forward to a great 2018!

Patient Safety and Outcomes

Serious Safety Event Rate – 0.69 to 0.56 (1.20 January 2016). The revised serious safety event rate through November 2017 is 0.56. We had no serious safety events in October or November of 2017. We began measuring events of harm to our patients back in 2009-10. The measuring of harm and near misses allows us to be aware of how the care we provide is affecting the patients we serve. Over these many years of monitoring of safety events, we have seen the rate decrease every year because of the processes and policies we have put in place to streamline and add consistency to the care we provide.

All Cause Readmission Rates decreased from 12.9% in January to 10.1% in September for all payor – Readmission rates are a focus for every hospital because in theory, we can assume our patients are being well cared for in the hospital and on the outpatient side if they don’t require another inpatient stay within 30 days of their initial discharge. The efforts at Good Samaritan to reduce readmissions have included:

1. Enhanced patient education:
   a. CHF
   b. AMI
   c. Pneumonia
   d. Stroke
   e. COPD
2. COPD navigator
3. Readmission risk scoring
4. Provider follow-up visits for moderate and high readmission risk patients

National Patient Safety Goals (NPSG) – The compliance with the Joint Commission monitored National Patient Safety Goals has improved 8 percent in 2017 over 2016. There are seven goals that the Joint Commission has released and is requiring hospitals accredited by them to comply with. Those goals are: Improve the accuracy of patient identification, Improve the effectiveness of communication among caregivers, Improve the safety of using medications, Clinical Alarm safety, Reduce the risk of health care associated infections, Identification of patients at risk for suicide, Prevention of wrong site, wrong procedure, and wrong person surgeries.

Influenza vaccination – Six months of every year hospitals are required to see to it that each of our patient’s flu vaccination requirements are met. October through March is flu season, and hospitals must either give the flu shot to those in-patients who need it or document why they don’t need it. For the 2017 calendar year, we have performed at a 99.2 percent rate. That eclipses our 2016 rate of 99.0 percent.

EPIC Implementation

Good Samaritan went live with EPIC during 2016, starting with our physician practices in March, April and May, and the hospital go-live in June 2016. Since its implementation, we have made several changes and significant strides with our electronic medical record in multiple departments. Some of them include:

- Development of Beacon module for Oncology use in 2018
- Epic Assessment was completed by Epic for Good Samaritan
- Centralizing Epic support into one location to better provide support for our customers
- Epic double upgrade to Epic 2017 took place in June
- An improved optimization process is starting to be put in place
- Dashboards are starting to be used more and new ones are coming in the future
- Diving deeper into Epic Stars, which helps us understand how well we are using the system and where to focus next
- Patients are now able to pay Good Samaritan bills through MyChart
January’s Shining Star is Mike Hedge

Mike Hedge, Environmental Services Attendant, is truly what the Shining Star award is about. He is always very pleasant and will go out of his way to help anyone. Recently, he made a monetary donation to the clothing drive the Emergency Department was doing for sexual assault patients. True to his character, Mike pulled out his wallet and donated $40 to their cause. It is so meaningful to sexual assault victims to have a new shirt, underwear, socks and pants. Mike’s donation helped to provide dignity for these patients who often have none left after the experience that brings them to the Emergency Room. He helped a patient that he will likely never meet or know that was there. It was very much appreciated and he truly deserves this award.

December’s DAISY Winner is Nicole Spencer

ICU nurse, Nicole Spencer, is the December DAISY Award winner for her dedication to being a patient advocate. Recently, her patient’s family was faced with a difficult decision on the best path to take. The family decided to go ahead with dialysis and a feeding tube, but complications arose that prolonged the time of the procedures. Nicole stood strong and advocated that her patient needed to have the procedure done as soon as possible. After a few phone calls, she accomplished her goal. She expedited the delivery of much needed nutrition for her patient, decreased their length of stay and avoided additional costs of calling in extra staff. Nicole demonstrated her support and love for her patients.
Our community is looking to take its first journey in establishing a Federally Qualified Health Center (FQHC). The name of this new facility/service is Good Samaritan Family Health Center (GSFHC), and we look for it to start officially seeing patients at the start of 2018. GSFHC will expand upon the services currently offered at our Primary Care Clinic with a goal to offer more options to those in our communities that are underserved and/or underinsured.

The work around the FQHC designation has been under way for approximately five months now with large strides continuing to be made. To date, some of the key infrastructure pieces to the FQHC have been completed:

- Board of Governors Established (51% of composition of the board are patients)
- Chief Executive Officer Named (Andrea Cole, MBA, MPH)
- Separate Tax ID Established (as the FQHC will be a completely separate entity from Good Samaritan)
- Short and Long Term Site Locations Established (Current - 429 S. 6th / Future - 501 S. 6th)
- Formal Application Process Started (application to be submitted in April 2018)

With the key start-up pieces being complete, the work now shifts more toward the operational and support service side of the equation:

- Electronic Medical Records Modification
- Billing Vendor/Platform
- Accounting Services
- Health Resources and Services Administration Policy Compliance

As the application and designation process continue, GSFHC plans to work closely with Good Samaritan Hospital, Good Samaritan Physician Network, Samaritan Center and other community entities to integrate critical medical and social services that could benefit the patients/community. Some of these services include: adult/pediatric primary care, obstetrics/gynecology, behavioral health, substance use/abuse, oral health, eye health and case management.

We would like to thank all of the Good Samaritan and community representatives that have helped contribute to the pieces of this amazing start up. More importantly, we would like to thank the Primary Care Clinic staff for allowing us to spring board off of the great service they already provide to our patients and our community.

**New Providers**

**New Physicians**
- Andrei Croitoru, MD - Hospitalist
- Sugata Sensarma, MD - Pulmonology
- Vinu Bhuma, MD - Hospitalist
- Matthew Hermansen, DO - Anesthesiology
- Steven Maynard, MD - Anesthesiology
- Lindsay Fleshman, DO - General Surgery
- William Allred, MD - Neurology
- Nadir Ishag Osman, MD - Neurology
- Peter Lai, MD - Radiation Oncologist
- Douglas Debenham, MD - Radiation Oncologist
- Errin Weisman, DO - Emergency Medicine

**New Advanced Providers**
- Jennifer Inman, FNP-C
- Linda Linneweber, NP-C
- Lindsey VanSchoyck, FNP-C
- Allison Holt, FNP-C
- Meaghan Meeks, PNP-C
- Stephanie Lowrance, NP-C
- Julie Owen, ACNP
- Melissa Lough, FNP-C
- Evelyn Blanchard, PA-C
- Kelly Sparks, PA

**Physician Recruitment Plans in 2018**

The ladies in the Physician Recruitment Department have continuously worked hard to bring the best physicians to Good Samaritan. In 2018, we will welcome Apogee Hospitalists: Naveen Rajoli, MD; Mini Sra, MD; Peter Lipsy, MD; and Syed Rehman Sha, MD. We are also excited for the arrival of Interventional Cardiologist, Ling Abigail Qin-Nelson, DO and Hemotologist/Oncologist, Cassandra Lacher, DO.

**Financial Challenges**

Last year was financially challenging for Good Samaritan due to changes in payor mix and reimbursement. These challenges will still be a hurdle our organization sees in 2018. However, we will remain vigilant in our dedication to keeping Good Samaritan strong. The 2018 budget is set to reflect a 3.25% operating margin for the year, based on increased outpatient volumes and reduced costs. The recruitment of new physicians is also a factor in increased volume expectations. Recruitment of family practice, internal medicine, oncology, obstetrics and cardiology will allow the hospital to remain optimistic for growth in the next few years.

Continued efforts of the organization will focus on the patient triple aim of quality, experience and low cost. “The changes in health care are still unknown and hospitals are forced to predict and navigate different potential outcomes. With new government leaders in power, those changes will continue to increase,” stated Rob McLin, President and CEO. “Good Samaritan strives to remain on the forefront of these changes by constantly improving our health care practices and becoming more efficient. Our team of employees, physicians and volunteers all understand the hospital’s mission to improve the health of the communities we serve and this shared purpose is how we will remain the best choice for health care in our region.”

**Employee Engagement**

In May of 2017, Good Samaritan employees took part in an employee opinion survey with 80% participation. The results of this survey will be the main focus in 2018 as we look for ways to increase employee engagement. Overall, the seven questions measuring engagement increased by 15 points to the 49th percentile. The greatest increases were in the following: “My job is secure,” “Senior leadership communication,” “I can tell my supervisor what I think,” “People in my department communicate well with each other,” and “I trust the people I work with.”

Having an engaged staff at Good Samaritan makes it a great place to work. According to Forbes magazine, “employee engagement is the emotional commitment employees have to the company and its goals.” Being engaged means more than being happy to come to work every day. It means that our employees actually care about our patients and the future of this organization. This behavior is illustrated multiple times a day through our employees who go above and beyond their daily tasks. Other examples of an engaged employee are: making eye contact with visitors and helping them navigate through the hospital, always washing their hands, noticing fall risks and other safety concerns, listening and understanding a patient’s wishes, delivering meals to patients in a timely manner while still hot, and more.

Being an engaged employee can have a huge impact on the care we deliver to our patients. Stay tuned throughout 2018 to learn more about how Good Samaritan is focusing on employee engagement and how you can help.
**Performance Excellence**

**Good Samaritan is a 4-Star Hospital** - The Centers for Medicare and Medicaid Services (CMS) publishes the Hospital Quality Star Rating on [medicare.gov](http://medicare.gov). This is designed to give the general public an overall idea about the quality and safety that a specific hospital provides. The star rating concept is one which everyone can relate to in determining which facility they choose. Effective December 2017, CMS designated Good Samaritan as a 4-star hospital, which is an improvement from our previous 3-star rating.

The star rating is based upon the hospital’s performance in the following areas with a performance category of either above the national average, same as the national average, or below the national average.

There are multiple factors that go into the calculation of the measures; however, the brief description above indicates that Good Samaritan is over the national average in keeping our patients safe, ensuring that their experience is positive, and providing them with timely care. As an organization we will continue to focus our efforts in the above areas to enhance the level of quality and safety for our patients. As you can see, the categories are diverse and encompass all aspects of the organization. Everyone is a key player. Although all employees and volunteers do not provide patient care, all can impact Safety of Care and/or Patient Experience. Our goal is to earn a 5-star rating, but this can only be achieved if our daily practices reflect 5-star care. If you would like more information or would like to have more discussion at your department meeting, you may contact Mike Smith, Director, Patient Safety/Risk/Performance Excellence at mtsmith@gshvin.org.

**December’s Cultivating Care Winner is Norma Bean**

Norma was recently nominated for the Cultivating Care Award by a patient who had broken her wrist. During her stay in the hospital, Norma stayed with the patient for her surgery, went to the patient’s house to feed her cats and bought her groceries. The patient did not have anyone else to depend on and Norma went way above and beyond to help out.

Norma (holding plaque), is congratulated for being the November Cultivating Care winner by her fellow Inpatient Rehabilitation co-workers; Steve Wissel, Director of Physical Medicine and Inpatient Rehabilitation; Lindsey Griffin, Inpatient Rehabilitation Nurse Manager; Karen Haak, Chief Nursing Officer; and Dr. Alan Stewart.

Interested in a free way to exercise and keep those New Year’s resolutions? Then join us every Saturday at Walk with a Doc at 9 a.m. The walks are currently being held at the Vincennes University PE Student Recreation Center, but will move back to Gregg Park in the spring.

Each week, a physician or health care provider will lead the walk and spend a few minutes discussing a different health topic. Whether the education provided is about the flu, managing diabetes, heart health or other health related information, it is a great way to spend your Saturday morning. Hope to see you there!
Patient Comments

<table>
<thead>
<tr>
<th>Comment</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>“It was the most excellent experience. Better than any other facility I have been to.”</td>
<td>Ambulatory</td>
</tr>
<tr>
<td>“Very good hospital, staff and experience. Treated well and with respect.”</td>
<td>Emergency</td>
</tr>
<tr>
<td>“Overall experience was good. Got me on a new and better track for a healthier life.”</td>
<td>Inpatient</td>
</tr>
<tr>
<td>“Everyone was very friendly - put me at ease about my test. I can’t say enough good things about staff.”</td>
<td>Outpatient</td>
</tr>
<tr>
<td>“This might be the best experience I’ve ever had during a doctor’s office visit.”</td>
<td>Physician Network</td>
</tr>
<tr>
<td>“The staff was caring and considerate.”</td>
<td>Inpatient Behavioral Health</td>
</tr>
</tbody>
</table>

Safe Disposal of Unused Drugs Now Offered in Pharmacy Department

Employees, patients, and community members have been asking Good Samaritan to properly dispose of their expired or no longer necessary medications for years. Some pharmacists would accept these and others would not. Both groups had good reasons for their decisions in the past:

**PROS**

- Pharmacy staff knows how to dispose of medications properly so that they cannot be retrieved and abused and/or contaminate the water supply.
- It is better to get addictive drugs off of the street to prevent abuse and decrease the profits to pushers and organized crime from prescription drug sales.
- Removing dangerous drugs from the household prevents accidental poisonings.

**CONS**

- Increasing the volume of our hazardous waste costs the hospital more money because our waste company charges by the pound.
- When we received controlled substances we were not exactly legal as we were not registered as a collector by the DEA.
- It was just plain more work for Pharmacy staff to sort returned medication into the various hazardous waste streams and account for the waste.
- The Knox County Sheriff’s Department has a drop off box so why duplicate their effort?

Our return vendor, Inmar, offered a solution for everyone that would be paid for using the credits for returned, expired medications. Their solution takes the burden away from the Pharmacy staff, since the return bin can be accessed by the public. The returns are shipped to a licensed destruction facility that accepts single stream waste (no sorting required).

Thanks to the new disposal box in Pharmacy, Good Samaritan is now happy to offer a safe way the community can dispose of their expired or unused medications. The disposal system decreases the amount of drugs being thrown down sinks and toilets, and also lessens the number of individuals who misuse or overdose on prescriptions. Other community and environmental benefits include:

- **Prevents Diversion and Abuse**
  - 91 Americans die every day from an opioid overdose.
  - Each day more than 1,000 people are treated in emergency departments for not using prescription opioids as directed.
  - 77% of opioid medications taken by new users are obtained from a friend or relative.
  - 62% of teens who admit taking medication for non-medical reasons say they get drugs from medicine cabinets in their homes.

- **Prevents Environmental Contamination**
  - 80% of streams sampled from 1999 to 2000 contained at least one pharmaceutical. Returning drugs to Good Samaritan’s return bin is a better solution than flushing down the toilet or sending to the landfill.
  - Tests have detected minute concentrations of pharmaceuticals in the drinking water supplies of at least 46 million people in 24 major American metropolitan areas.
November New Hires

Environmental Services
- Clay Baxley - Environmental Services Assistant
- Gail Davison - Environmental Services Assistant

Food Service
- Kerilyn Davis - Food Service Assistant
- Taylon Fitch - Food Service Assistant
- Bruce Johnson - Food Service Assistant
- Shawna Washburn - Food Service Assistant

Intensive Care
- Stacey Langley - Patient Care Technician

Laboratory
- Samantha Hiatt - Laboratory Assistant
- Sadie Newlin - Laboratory Assistant

Medical / Surgical
- Casey Kraus - Patient Care Technician
- Autumn Meadows - Staff Nurse
- Christie Wright - Staff Nurse

Nursing Administration
- Judy Culp - Resource RN

Patient Access
- Steve Rich - Courier

Perioperative Services
- Haley Ivers - Staff Nurse

PPM Neurology Physicians
- Sandy Merry - Licensed Practical Nurse

Surgical Unit
- Holly Horrall - Patient Care Technician

Wellness Salute

Susan K. Thompson
Receptionist
Oncology Physician Network Office

What healthy / lifestyle-related change(s) have you made? I have been on a weight loss journey.

How did you make the change / what have you been doing? Last year in January, I went to my first Walk with a Doc. I have continued to go almost every Saturday morning since then. I love the program; it's simple and it's free. I encourage everyone that I know to come join me! I was still unable to get off the weight I needed to lose so in May of 2017, I decided to join Weight Watchers at work. I think the combination of the two was exactly what I needed.

What motivated you to make the change? My motivation to make these changes was that I was pretty much at my heaviest weight and I also wanted to get my numbers in check for the biometric testing so I could get a discount on my health insurance. I also come from a family of insulin dependent diabetics and I have worked very hard over the years to not become one. So far I have succeeded in that and with the weight loss and exercise, all of my biometric testing numbers were great.

Tip(s) for success / staying motivated? I do have a great support system around me. Several of my family members are also working on getting healthy. We exercise together, and are more conscious of how and what we eat at family gatherings. I have been going to classes at the YMCA as well as going to Walk with a Doc.

How have you incorporated this into your life (Ex. How do you find the time, etc.)? I decided that if this was going to work for me that I was going to have to make exercise a priority. Once you forget to do that, it is very easy to get out of the habit. I have also continued to go to the Weight Watchers at work meetings. The support system in those meetings is wonderful. I needed the meetings so I would have to go in and get on the scale in front of someone else to be accountable for how I was eating.

How has it made you feel? It has made me feel much better. Last year at my first Walk with a Doc, Good Samaritan Marketing was there taking pictures. I happened to be in one of the photos. Recently, that picture resurfaced on Facebook for a Walk with a Doc promotion and I had people at work and family members ask if that was me in the picture. I was embarrassed at how I looked in that picture. It is a great feeling knowing that I have lost enough for others to see it too. To date I have lost 24 pounds. I still have more to lose but I am getting there!

Anything else you would like to add? I want to thank Good Samaritan for making Weight Watchers at work available to employees and for the monetary incentives that are available for being successful in Weight Watchers. I would also like to encourage more people to come to the Walk with a Doc on Saturday mornings at 9 a.m. It has been moved inside for the winter at the Vincennes University Student Recreation Center.
Physician Satisfaction

CELEBRATING WORLD CLASS PHYSICIAN OFFICES

Congratulations to the following provider offices who achieved a world class percentile rank for the question “Likely to Recommend Provider Office” on the CGCAHPS patient experience survey for the third quarter 2017. These results were calculated based on practices with statistically significant results.

• Diabetology Office of Jane Bridges, MD and Rebecca Akers, NP-C - 99
• Oncology / Hematology Office of Mark Stutz, MD; Renee Bartlett, MD; Mark Pajeau, MD; and Trista Armes, FNP-C - 91
• Family Practice Office of Daniel Herman Jr., MD and Michael Kelly, MD - 96
• Internal Medicine Office of Charles Hendrix Jr., MD - 95
• Internal Medicine Office of Reynaldo Carandang, MD - 99
• Internal Medicine Office of Gerry Hippensteel, MD - 99
• Podiatry Office of Derek Besing, DPM; Jason Bickel, DPM; Austin Muranaka, DPM - 98
• OB/GYN Office of William Mayfield, MD - 99
• OB/GYN Office of Shalin Arnett, DO - 99
• Office of Stephen Cullen, DO; Amy Archer, DO; Erica Story, FNP-C; Amanda Mattingly, FNP-C; and Trudy Wessell, FNP-C - 98
• Vincennes Orthopedics Office of David Miller, DO; Molly Weiss, MD; and Gregory Whitsett, MD - 95
Resolutions Are So Last Year!

As time flies by at lightning speed we find ourselves once again on page 1 of a new calendar. Welcome to 2018! What are you looking forward to in the New Year? What are you nervous about? What resolutions did you make? Better yet, what resolutions will you keep? Only 8% of the MILLIONS of New Year resolutions are kept. And truthfully, it’s probably less than that! Why?

Why on the cusp of a clean slate can we have such good intentions and yet fail so miserably? You know the drill, you’re jazzed in January to eat better, move more, lose weight, spend less… and then you fail in February.

Most resolutions are statements of change. I am going to lose 20 pounds, I am going to work out 3 days a week, I am going to stay within my budget. Change is hard. This year, try something different. What if we spin that statement into a question?

Warren Berger, journalist and host of the website “A More Beautiful Question,” coined the phrase:

**QUESTOLUTION:** The process of turning a resolution into a question.

Research shows that asking questions and then answering them is a much more effective method for sticking to your promises. Instead of declaring a statement, instead try turning it into a question such as:

- **How might I**
  - Fit exercise into my day?
  - Find an activity that I enjoy?

- **How might I**
  - Spend less money each week/month on eating out?
  - Pay down my credit card bills?

- **How might I**
  - Include more vegetables into my meals?
  - Cut out snacking?
  - Preplan meals?

A question is a puzzle. It prompts a psychological response that motivates you and even challenges you to find an answer. Instead of a statement that elicits no need for a response, a question inspires thought. Your brain immediately goes to work breaking down the problem, generating solutions and creative paths to success.

This year, don’t set yourself up for the February fail. Try a presenting your New Year’s resolution as a **Questolution**!

If you are interested in making positive lifestyle changes for 2018 call Employee Wellness at 3316 or email slyochum@gshvin.org.