Chief Medical Officer

POSITION SPECIFICATION

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Photo courtesy of Bernie Auten
WHY JOIN FAITH REGIONAL HEALTH SERVICES AS CHIEF MEDICAL OFFICER?

- Engaged Board, medical staff and senior leadership team, particularly focused on culture, education, quality, HCAHPS and robust technologic advancement.

- A new 210,000 sq. ft. patient care tower with all private rooms, paperless chart and a state-of-the-art design bringing all care givers right to the patients’ bedside.

- Growing regional presence, currently formally affiliated with eleven area critical access hospitals and providing monitoring services for an additional three. Tele-health is used in eleven critical access hospitals.

- Clinical practicum site for 3rd year medical students and residents from the University of Nebraska.

- Using Siemens’ Soarian, CPOE is operational throughout the organization and Faith Regional Health Services (FRHS) achieved top quartile status nationally relative to overall EMR implementation toward meaningful use.

- Recognized in the areas of patient safety and a hospital infection rate ten times lower than the U.S. national average for hospitals.

THE OPPORTUNITY

FRHS has a rich heritage of delivering quality health care to the residents of northeast Nebraska since 1923, serving a population of over 100,000 people within a 75-mile radius.

FRHS, a 160-bed acute care facility, offers Centers of Excellence in cardiovascular care, cancer care, physical rehabilitation and obstetrics. The organization operates acute care services from the new patient care tower on the West campus; rehabilitation and behavioral health services are provided on the East campus. Long term, all facilities will be consolidated onto the West campus.

This opportunity is best suited for an individual who is passionate about advancing outcomes, patient, employee and physician satisfaction, quality and safety; fluent in advanced information technologies; wishes to participate in leading an organization towards integration, increasing numbers of physicians participating in leadership and a greater regional presence.

The Chief Medical Officer is a key member of the hospital executive team, reporting directly to the Chief Executive Officer and has a broad presence in initiatives throughout the organization, particularly in promoting the advancement of current continuous quality improvement programs and use of the electronic health record to improve performance, outcomes, satisfaction and finance.
THE ORGANIZATION

Mission Statement

The mission of FRHS is to serve Christ by providing all people with exemplary medical services in an environment of love and care.

Vision

The vision of FRHS is to become a regional referral center by providing the most comprehensive, high quality health services to the residents of Northeast Nebraska.

Values

The values guiding this vision are:

- Spirituality
- Excellence
- Integrity
- Compassion
- Respect
- Stewardship.

Current Circumstances

FRHS is a non-profit corporation created in 1996 through the alliance of two hospitals in Norfolk, Nebraska – Lutheran Community Hospital (LCH) and Our Lady of Lourdes Hospital (OLLH). In 2008, the OLLH sponsors made the decision to withdraw from healthcare and focus on a spiritual mission and the Sister’s interests were acquired by LCH. Medical services are delivered at multiple locations. Annually more than 75,000 patients are served on an inpatient or outpatient basis, and approximately 1,000 babies are delivered.

FRHS employs more than 1,200 individuals, the largest employer in the Norfolk area. In addition to medical services, Faith Regional manages physician clinics, and is affiliated with Faith Regional Physician Services, a wholly owned entity (LLC) formed to employ physicians.

Recent Expansion and Innovation

Spring 2010 ushered in the new $56 million 207,000-sq.-ft. patient room addition at FRHS. With a focus on developing the next generation of health care in Northeast Nebraska, the tower incorporates the needs of patients and families through technology and design.
The expansion project offers all private patient rooms. Intensive Care and Medical Units are located on the first floor. The Intensive Care Unit features state-of-the-art, 24-hour patient monitoring capabilities. The second floor houses Orthopedic and General Surgery; both floors have 39 patient rooms. The third floor includes 33 patient rooms for Labor and Delivery and streamlines the admitting process for mothers in labor. The fourth floor is shelled to add another 39 patient rooms, in the future.

The new tower also includes eight dedicated isolation rooms to treat patients with contagious diseases and six rooms specially designed with lift equipment for patients who may require additional assistance. On the lower level the new kitchen and dining areas feature a walkout patio and garden.

One of the most tranquil aspects of the new building is the unique garden areas: the Bradford Family Spiritual Garden, on the east side of the building, features a brick labyrinth where one can walk, reflect, and meditate. In the Virgil and Betty Jane Froehlich Healing Garden, a tranquil waterfall and stream give way to relaxation and a retreat from the “hospital” environment.

With the move into the new patient tower, FRHS also implemented Siemens’ Soarian electronic medical record, including CPOE. Trained EMR specialists are on each unit, providing 24/7 expertise to all users. Attainment of meaningful use criteria and completion of clinical documentation implementation will occur by mid-summer.

Meetings are underway with state representatives from the Nebraska Health Information Initiative to discuss state-wide integration.

Telemedicine was also advance with the signing of a contract to provide services for two pilot projects at three sites. Regional presence was enhanced by the establishment of additional clinics in neighboring communities and the implementation of a case management program inclusive of all critical access hospitals in the region.

Oncology, already a strong service line through the Carson Cancer Center, was expanded through the establishment of two outreach clinics and continued work with the American Cancer Society to finalize a specific cancer health status baseline for Northeast Nebraska. Discussions with the University of Nebraska Medical Center for a potential affiliated service line approach are ongoing.

Additional expertise has been added in neurosurgical and urologic surgery. Further evaluation of additional services for the cardiovascular program is under review through an independent audit by the Cleveland Clinic.
Faith Regional West Campus
Faith Regional West Campus houses emergency services*, acute care, women's and children's services, imaging services, cardiac and pulmonary rehabilitation, cardiovascular services, cardiopulmonary services, hospital medicine, surgery, social services, laboratory services, nutritional and diabetic education services, and LifeNet Air Ambulance service.

Faith Regional East Campus
Faith Regional East Campus provides acute rehabilitation, home health, physical therapy, occupational therapy and speech/language pathology, sports medicine, behavioral health services and psychiatric outpatient clinic, dialysis and Northeast Nebraska Child Advocacy Center.

Other Components and Affiliates

Medical Offices West

Completed in 2003, Medical Offices West is a three-story, 42,000 sq.ft. medical office and outpatient facility, connected to FRHS’s west campus. The first floor contains 15,000 square feet dedicated to the Carson Cancer Center and provides a comprehensive medical and radiation oncology treatment center, including a linear accelerator. Similarly sized, the third floor contains the Cardiovascular Institute, with offices for cardiologists and cardiothoracic surgeons. Cardiac and pulmonary rehabilitation and the Sleep Disorder Center are located on the second floor.

Medical Offices West provides office space to Faith Regional Carson Cancer Center, Faith Regional Cardiovascular Institute, Faith Regional Cardiac and Pulmonary Rehabilitation, Faith Regional Infectious Disease, Faith Regional Internal Medicine, Faith Regional Nephrology Services, Faith Regional Pulmonology Services, Faith Regional Health Resource Center, Executive offices and Faith Regional Physician Services.

* Underlined items are links which may be accessed by hitting control + click.

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Medical Offices North

Medical Offices North provides office space to Faith Regional Outpatient Clinics, Faith Regional Surgery Center, Faith Regional Family Medicine, Faith Regional Neurology Services, Faith Regional Orthopedic Center, Faith Regional Physical Medicine and Rehabilitation, Family Health & Sports Medicine, Norfolk Ear, Nose & Throat, P.C., Open MRI, and Norfolk Medical Group.

AHP-MHR Home Care is a comprehensive home care provider offering medical equipment products and services in the home. One call accesses their entire professional staff, which is available 24 hours per day, to meet home medical equipment needs.

Faith Regional Surgery Center, Norfolk’s first same-day surgery center, is located in the Faith Regional Medical Offices North Building. The Surgery Center, which opened in September, 1999 is a joint venture between physicians and Faith Regional Health Services.

Saint Joseph's Rehabilitation and Care Center is an 83-bed facility with a reputation for exceeding standards of excellence in care and treatment since 1968. Both long- and short-term rehabilitative care are available based on the individual needs of each resident.

Skyview Villa Assisted Living facility offering studio or one bedroom apartments, daily meals, medical care, as needed, and various other onsite services.

FRHS has just completed a year of unprecedented innovation; the organization is anticipating that 2011 will be a year focused on education, performance maximization and finalization of the clinical documentation phases of the Siemens Soarian implementation, along with continued regional expansion. FRHS is widely held to be a good organization, on the path to becoming great. Infection rates are well below national averages and the cardiac care outcomes rival any in the state. A new program called “Just Culture” has focused on the identification and resolution of systems or processes that contribute to error, encouraging team members to bring those forward in a proactive, preventative approach.

Continuing to operate with a positive financial position, a decrease in volumes and a shift in payer mix to slightly less commercial, provided additional impetus for careful planning and efficient operations. A small reduction in force was completed in 2010.

Information technology is a robust function with in-house consultants available on a long-term basis. Technology is being implemented throughout the organization and the move to meet meaningful use criteria is well underway, scheduled for completion by May, 2011. Former unit clerks became EMR/CPOE specialists and are available 24/7 throughout the organization to assist clinical staff and physicians.

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Medical Staff

Two-thirds of the FRHS medical staff remains independent practitioners. A primary care network is being developed and 47 providers in a variety of specialties are now aligned under an employment model, Faith Regional Physician Services (FRPS), a wholly-owned subsidiary. Physicians recruited to the area may select from an array of models from which to join the medical staff.

FRPS is led by a 12-member Board, 50% of which are physicians. A FRPS Chief Operating Officer reports to the Board and the FRHS system CEO; hospital-based physicians report through the Chief Medical Officer (CMO). A compensation model targets the 50th percentile of MGMA, with the potential to earn up to the 75th percentile based on bonus provided for quality. A hospitalist program is available and the majority of medical staff avail themselves of this service. Some of the usual tension between employed and independent medical staff is present, but diminishing as the focus has been established on common quality and satisfaction targets.

Although above average in some areas, there remains opportunity for improvement in overall HCAHPS scores; a program is under development that rewards all physicians for participation in these efforts and attainment of target metrics. The CRIMSON quality monitoring program has been implemented for 18 months. Physician participation is mixed and the understanding of how quality and satisfaction data will drive reimbursement and value based purchasing is still in its infancy.

The CQI committee represents a broad array of leadership and reviews data monthly as well as current focus projects. Larger projects are tackled through “100-day workout teams,” the first focused on discharge efficiency. The quality committee of the Board is evolving, having been established two years ago and is gaining strength in their analysis and interpretation of data.

Patient Care Services

Much of the attention in 2010 was centered on the transition to the new bed tower, which reorganized care around a physical structure that removes the centralized nurses’ station and places caregivers directly at the bedside. The transition to a paperless system occurred simultaneously with the move into the new bed tower and nurses are incorporating the new technology into their work flow and processes.

Nursing is ready for the next generation of strategic vision and definitions around professional aspirations and operational goals. Given the degree of change, much of the leadership has been focused on the immediate challenges and problem resolution, rather than future direction. Support for baccalaureate education, certification programs, career ladder development and the continued development of a “Magnet-like” approach to self governance and collaborative practice are opportunities for the next CNO. Unit councils are operational and there is an increasing focus on evaluating current policies and procedures against Evidence Based Practice principles.

Nursing students from local A.D. and B.S.N. programs provide a steady flow of manpower into the organization. Consideration needs to be given to the development of nursing fellowship and

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residency programs, given the observations that some students are requiring longer orientation periods for practice independence.

PROFESSIONAL PROFILE

A formal organizational job description and organization chart is attached to this document. What follows is a summation of a series of on-site meetings with direct reports, Board members, key physician leaders and executive team members.

The CMO oversees day-to-day operations and the medical practice at FRHS in order to ensure and promote high-quality medical care. He/she provides leadership and drives targeted results in the areas of quality outcomes/indicators, patient/employee/physician satisfaction and patient safety.

Reports to: President & Chief Executive Officer, Faith Regional Health Services

Direct Reports: Quality/Case Management
Medical Staff Services
Hospital Based Physicians
Medical Trainees

Education & Experience

- M.D. or D.O. Board Certified in a clinical discipline, with a license or ability to gain licensure in the State of Nebraska.
- Additional course work in business, management or medical management strongly preferred.
- Five plus years of physician executive leadership, with emphasis on improvements in quality, outcomes, physician alignment, and clinical information systems.
- Experience in and an understanding of private independent practitioners, hospital sponsored clinics and rural healthcare is strongly preferred.

Skill Set

- Data driven: Familiar with the operational, financial and regulatory aspects of healthcare. Able to translate business metrics into useful information for medical staff use.
- Electronic Medical Record: high aptitude for implementation, experience in best practice uses of the EMR.
- Finance: Understands healthcare financing and the implications for hospitals, employed and independent physicians. Able to create a business plan for a proposed venture.
- Change management: Can lead an organization through a transformational process, managing anxiety, resistance and the inevitable conflict that arises from such situations.

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Position Specification

Chief Medical Officer

- **Care processes**: Able to see care delivery from the physician perspective and create an environment that supports their work, while aligning with the greater system goals.

- **Communication**: Connects with large and small groups in verbal and written formats. Concise, easily understood presentation skills.

- **Vision and strategic planning**: Energized about working with the medical staff and its leadership to create a vision for the future that encompasses increasing hospital alignment and increasing success for all. Builds physician engagement.

- **Quality/Safety champion**: Works to translate data into performance improvement. Continues Just Culture approach to root cause analysis and process change; closes the loop from issue discovery to problem resolution.

- **Mentor**: Capable of educating and guiding physicians to a greater level of understanding of healthcare reform and how to maximize their performance and profitability within the new dynamics to come. Works to increase the number of physicians involved in leadership roles, mentors their potential successor(s).

- **Physician relationships**: Credible, visible, approachable and transparent to practitioners. Fosters trust; approach to decision making that is inclusive of physician input. Works towards alignment of mutual goals. Solid recruiting and retention skills. Collaborates with formal and informal medical staff leadership.

- **Medical staff advancement**: High level of skill and track record of advancing medical staff performance improvement, credentialing process and quality committee performance.

- **Rural healthcare**: Worked and/or lived in a smaller city or semi-rural community. Able to create relationships with smaller area hospitals and build resource and referral networks.

- **Professionally integrated**: Involved with regional and national professional associations. Keeps self current with national trends in the healthcare industry.

- **Community involvement**: Comfortable living and serving as an involved member of the Norfolk community.

**Personal Style/Characteristics**

- **Style**: Leadership presence; individual who likes to be visible and known to members of the organization and community; diplomatic, but not political; collaborative, fosters a sense of teamwork; optimistic and enthusiastic; results oriented; transparent with information; extrovert and confident, without being egotistical. Finds synergies and places a premium on, but is not paralyzed by building consensus; credible at all levels of the organization; possesses the discipline of focus; does not succumb to the latest trends.

- **Values**: Has personal standards of professionalism and infuses those into the organization; trustworthy, high level of personal integrity and honesty; passionate about the organization’s...
mission and providing the best for patients and their families; known for strength of character; speaks truth to power.

- **Communication**: Excellent written and verbal communication skills in large and small groups, with a variety of constituencies; able to modify approach to target audience; good at instilling horizontal and vertical communications throughout the organization. Relationship builder with all stakeholders; consistency of message, regardless of audience; participatory decision making style, but decisive when necessary; strong listening skills; guards against group think; understands the culture of smaller communities; intuitive; direct.

- **Results Driven**: relationally driven, but will hold others accountable for outcomes; maturity that allows in-check ego, but decisive. Establishes measurable goals and objectives, clearly communicates expectations. Truly partners with those on leadership teams. Persistent in their efforts to incrementally or exponentially improve the metrics.

**GOALS & OBJECTIVES**

These are areas in which the new CMO will be expected to make significant progress within 12 to 18 months of his/her tenure. Understood is that many of these are long-term initiatives with multiple benchmarks over time. They are listed in no particular order of significance:

**Cultural/Relational**

- Establish self as a visible, approachable, trustworthy, team oriented, credible member of the FRHS leadership team with the medical staff and its formal and informal leadership, peers, direct reports, Board, other employees and the community.

- Enhance the knowledge base of the medical staff on national trends and issues, serving as a resource. Mentor additional members of the medical staff into leadership, creating some potential future successors for medical staff leadership roles. Enhance and strengthen existing medical staff leadership roles. Foster and advance the Vision, Mission, and Core Values of Faith Regional Health Services.

- Become recognized as a leader who is consistent in their communication, regardless of audience, and is noted for their ability for driving accountability and attaining high levels of performance.

- Create a synergistic relationship with the Chief Nursing Officer.

- Develop and implement a formal medical staff development program to include succession planning, governance, credentialing, peer review, quality management and outcomes, clinical integration and patient satisfaction.
Operational

- Continue to explore systems and methodologies which further align physicians, particularly independent physician practitioners, with their hospital partner. Work to increase the connectivity between those physicians who no longer practice inpatient medicine and the hospital initiatives, particularly around quality and safety.

- Translate quality/safety and other benchmark data into meaningful use for physicians and that result in performance gains in those areas, specifically core measures and HCAHPS.

- Continue the implementation of IT systems that promote patient care quality and safety. Lead the progress in continued EMR/IT implementation and process integration.

- Support the front line staff as they implement new standards, policies and procedures.

Financial

- Collaborate on a physician manpower development plan. Participate in key recruitment and retentions strategies, particularly as they pertain to business development and revenue enhancement.

- Promote leadership in driving the FRHS cost structure lower through streamlining clinical care processes, standardization of supplies and equipment and supply chain redesign.

- Educate medical staff on value-based purchasing and the impact of quality performance on future reimbursement.

Strategic

- Serve as a support to physicians in FRHS regional network of critical access hospitals.

- Continue to advance and strengthen peer review to meet national standards.

- Encourage physician participation in national professional organizations and increase their participation in care process and benchmark development.

THE COMMUNITY

Norfolk is located in Northeast Nebraska in Madison County in the Elkhorn River Valley, 112 miles northwest of Omaha, 121 miles north of Lincoln and 75 miles southwest of Sioux City, Iowa. U.S. Highways 81 and 275, and Nebraska Highways 24 and 35 intersect in Norfolk.

Norfolk offers big city amenities with the charm of a small town. Visitors and residents may enjoy the unique displays at the Norfolk Arts Center and Elkhorn Valley Museum and Research Center. This is the only place in the world where you will see a working Square Turn Tractor, and the Emmy’s won by the “King of Late Night,” Johnny Carson. Norfolk also boasts the Johnny Carson

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The arts play an important role in the lives of Norfolk citizens, as a myriad of volunteer organizations work to bring the best in sights and sounds to life. Thanks to the Norfolk Area Concert Association, a season of musical performances, ranging from concert pianists to harmony quartets to traveling orchestras fills the 1,234 seats in the Johnny Carson Theatre. The Northeast Area Jazz Ensemble adds to the good times. The musically gifted are encouraged to join the Northeast Area College Community Band, the Men’s Chorus or the Northeast Nebraska Women Singers with the proceeds from these performances usually going to benefit non-profit causes.

The Norfolk Community Theatre extends the chance for residents and college students to perform such well-known plays as Neil Simon’s “Barefoot in the Park,” Tennessee Williams’ “A Streetcar Named Desire” and George Kaufman’s and Moss Hart’s “The Man Who Came to Dinner.”

The Northeast Nebraska Art Association encourages visual artists to display their paintings, drawings and sculptures. The Norfolk Arts Center—a $1.7 million classroom, gallery and outdoor sculpture garden—provides plenty of inspiration to budding artists.

There are a number of public and private golf courses within the city, and recreational parks with lakes for fishing. Norfolk is also home to the eastern terminus of the Cowboy Trail, a multi-use recreational trail suitable for bicycling, walking and horseback riding. It occupies an abandoned Chicago and North Western Railway corridor and when complete, the trail will run from Chadron to Norfolk, a length of 321 miles, making it the longest rails to trails conversion in the United States. The Lewis and Clark Lake, located just 60 miles north of Norfolk in Yankton, South Dakota, is one of the state’s most popular resort parks.

Norfolk is the economic center for an area encompassing six counties. Basic economic activities of Norfolk are manufacturing, farming (both livestock and grain), education, retailing, and wholesaling. Manufacturing employs over 4,059 persons. Norfolk is the major retail trade center for Northeast Nebraska. Major employers besides the hospital include four divisions of Nucor Steel, Goodyear, Affiliated Foods (a major grocery wholesaler), Covidian (formerly Tyco), Louis Dreyfus Commodities, and several ethanol plants.

Norfolk’s public school system is excellent with students scoring considerably higher than the national average on achievement and ACT tests every year. In addition, there are parochial schools, both Lutheran and Catholic, and a two-year community college. A four-year state college is located just 35 miles away.

For additional information on Norfolk, please visit the website http://www.ci.norfolk.ne.us/.
PROCEDURE FOR CANDIDACY

Nominations or requests for additional information may be directed to Christine Mackey-Ross through the office of Cindy Kennedy:

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