President,
Barnes-Jewish Hospital

POSITION SPECIFICATION

Christine Mackey-Ross, RN, MBA
Wendy McLeod, BBA

August, 2013

This Position Specification is intended to provide information about Barnes-Jewish Hospital and the President position. It is designed to assist qualified individuals in assessing their interest in this position.
The Opportunity

Barnes-Jewish Hospital (BJH) in St. Louis, MO, is one of the nation’s preeminent academic medical centers committed to providing excellence in clinical care, teaching, research and community outreach. The flagship hospital of BJC HealthCare, one of the largest nonprofit healthcare organizations in the United States and the teaching hospital of world-renowned Washington University School of Medicine, the hospital has been ranked on the elite honor roll by *U.S. News & World Report* for 21 years in a row and ranked in 15 individual specialties among the nation's best.

BJH is a $2 billion, fully integrated, academic medical center with over 1,800 medical staff and 1,300+ beds. Other *U.S. News* rankings include: #15 in the nation; #1 in Missouri and #1 in the St. Louis area. Washington University School of Medicine is ranked #6 in research and #44 in primary care by *U.S. News*. The School is #4 in terms of NIH funding for 2012.

The President position is vacant following the promotion of Mr. Richard Liekweg to Group President, BJC HealthCare and will report to Mr. Liekweg. The successful Presidential candidate will have:

- Significant executive leadership experience in an academic medical center, within a competitive market;
- A broad understanding of managing hospital operations within a multi-hospital system;
- Demonstrated successful relationships with medical school leadership and academic medical staff;
- Commitment to a strategic and transformative response to the changing dynamics in healthcare, including the increased fiscal pressure on academic priorities.
Organizational Overview

<table>
<thead>
<tr>
<th>MISSION</th>
<th>VISION</th>
<th>VALUES</th>
</tr>
</thead>
<tbody>
<tr>
<td>We take exceptional care of people:</td>
<td>Barnes-Jewish Hospital, along with our partner, Washington University School of Medicine, will be national leaders in medicine and the patient experience</td>
<td>In service to the patient, we value:</td>
</tr>
<tr>
<td>• By providing world-class healthcare</td>
<td></td>
<td>• Integrity</td>
</tr>
<tr>
<td>• By delivering care in a compassionate, respectful and responsive way</td>
<td></td>
<td>• Compassion</td>
</tr>
<tr>
<td>• By advancing medical knowledge and continuously improving our practices</td>
<td></td>
<td>• Accountability</td>
</tr>
<tr>
<td>• By educating current and future generations of healthcare professionals</td>
<td></td>
<td>• Respect</td>
</tr>
</tbody>
</table>

Barnes-Jewish Hospital (BJH) at Washington University Medical Center is the largest hospital in Missouri and the largest private employer in the city of St. Louis. As an affiliated teaching hospital of Washington University School of Medicine, BJH has a 1,800 member medical staff with many who are recognized as “Best Doctors in America.” They are supported by residents, interns, fellows, nurses, technicians and many other healthcare professionals.

Recognizing its excellent nursing care, BJH was the first adult hospital in Missouri to be certified as a “Magnet Hospital” by the American Nurses Credentialing Center (ANCC). The Magnet Award is the highest honor awarded for hospital nursing by the ANCC. Magnet is the highest honor for excellence in nursing. BJH was initially recognized in 2003, redesignated in 2008 and again in 2013.

BJH was created by the 1996 merger of Barnes Hospital and The Jewish Hospital of St. Louis. Each hospital brought a rich tradition of excellence. Barnes Hospital opened in 1914 and became one of the first medical teaching centers in the United States. The Jewish Hospital opened in 1902 to care for St. Louis’ growing immigrant population. BJH is a member of BJC HealthCare, one of the nation’s largest healthcare organizations and the largest employer in the state of Missouri.

For 21 years, BJH and Washington University School of Medicine have ranked among the best hospitals in America by *U.S. News & World Report*, including a top ranking in the “2013-14 Best Hospitals” issue. To date, BJH is the only hospital in St. Louis or the state of Missouri to be recognized as one of America’s best hospitals by *U.S. News & World Report*. The Hospital is recognized in 15 of a possible 16 medical specialties in the 2013-14 *U.S. News* rankings. Out of nearly 5,000 hospitals evaluated for the 2013-2014 rankings, just 18 made the cut for the Honor Roll. To qualify, hospitals had to score at the top in at least six out of 16 medical specialties.
To see all of BJH’s rankings in *U.S. News & World Report*, follow this link:


In addition to being the best hospital in St. Louis and the only hospital ranked by *U.S. News* in Missouri, BJH is the recipient of additional awards and designations.

**Level I Trauma Center:** BJH’s trauma program has earned the distinction of Level I verification from the American College of Surgeons, the highest national recognition possible. BJH is one of three hospitals in the State of Missouri to earn this prestigious honor.

**Top-five Highly Prepared Trauma Center:** Received in 2006 from the National Foundation for Trauma Care and given to acknowledge trauma centers prepared to provide care in the event of a disaster.

**Epilepsy Center of Excellence:** Received from The Joint Commission. One of the nation’s first three epilepsy centers to receive this certification for its care of patients with seizures.

**Primary Stroke Center:** Received from The Joint Commission. BJH was the first hospital in St. Louis to earn this certification for having the critical elements in place to achieve long-term success in improving outcomes for stroke patient, and the first in Missouri to achieve Comprehensive Stroke Center certification.

**Bariatric Surgery Center of Excellence:** Received in 2006 from the American Society for Bariatric Surgery.

**Lung Volume Reduction Center of Excellence:** Received in 2007 from The Joint Commission in acknowledgement of the hospital’s longstanding clinical excellence, outstanding patient care and leadership in thoracic surgery.

**The Siteman Cancer Center at BJH and Washington University School of Medicine** is the only National Cancer Institute designated Comprehensive Cancer Center in Missouri and within a 240-mile radius of St. Louis. Siteman offers a multidisciplinary team of more than 300 preeminent clinicians and medical researchers. In 2006, the National Comprehensive Cancer Network, an alliance of the world’s leading cancer centers, added Siteman to its roster of 20 centers dedicated to improving the quality, effectiveness and efficiency of oncology practices. Siteman offers one of the largest Bone Marrow Transplant programs in the country. A new Proton Beam Center is scheduled to open in late 2013.
The Barnes-Jewish and Washington University Heart & Vascular Center has pioneered many procedures, from ablation therapies to valve repair and replacement, and permanent implantation of ventricular assist devices. Patients have been among the first to benefit from advanced angioplasty techniques, coronary bypass procedures, valvuloplasty and heart transplantation. BJH is home to one of the largest ventricular assist programs in the country and was among a select handful of centers to participate in the PARTNER trial, and the among the first to perform the FDA-approved procedure that allows valves to be deployed via catheter to treat patients who could not otherwise tolerate an open chest procedure.

Lung Care – Innovation, thoracic surgical skill and excellent care lead patients from around the world to BJH. Advanced areas include lung cancer surgery; esophageal cancer surgery (including Barrett’s esophagus); lung volume reduction surgery to treat COPD; transcervical thymectomy to treat myasthenia gravis; lung transplantation; cystic fibrosis center, pulmonary hypertension and lung nodule monitoring.

Transplant Services – BJH has the only comprehensive transplant center in the region offering heart, heart & lung, lung, double lung, kidney, liver, pancreas islet cell and bone marrow transplants. In addition to achieving outcomes that meet or beat national averages, the transplant program is known for quality and continuity of care, and is also recognized as one of the largest transplant centers in the country, transplanting over 400 organs in 2012.

Orthopedics – From adult reconstruction and joint replacement to sports medicine and trauma, the Washington University specialists at BJH provide the highest level of orthopedic care. The sports medicine specialists are the team physicians for the St. Louis Rams and the St. Louis Blues.

Neurological Care – A dedication to research and patient care regularly brings advancements to life. Highlights include a Neurosurgery/Neuroradiology Center for managing cerebral aneurysms and arteriovenous malformations; Gamma Knife Center for minimally invasive treatment of brain tumors; comprehensive care for epilepsy, multiple sclerosis, neuromuscular disease, dementia and stroke; stereotactic neurosurgery; interoperative MRI; and deep brain stimulation for movement disorders.

The Mallinckrodt Institute of Radiology at Barnes-Jewish provides full diagnostic procedures including computed tomography, nuclear medicine and interventional radiology. The Institute has pioneered many radiological milestones including becoming the first in Missouri to combine PET and CT scanning.

Trauma Care – BJH was the first in Missouri and first in St. Louis to receive Level I verification from the American College of Surgeons (ACS) for the Trauma Center. Now, BJH is one of only three ACS-verified level-one trauma centers in Missouri. In addition, BJH received the honor of being named one of the top five highly prepared trauma centers, in the event of a disaster, in the United States by the National Foundation for Trauma Care in September 2006.
BJH patients have access to leading-edge treatments as a result of research from one of the top-ranked medical schools in the nation. As one of the leading recipients of National Institutes of Health grant money for medical research funding, Washington University School of Medicine and BJH are proud of advancements developed through bench-to-bedside research and treatment including:

- A Washington University surgeon who performed the first U.S. surgery to restore voice to a patient with an artificial larynx in 2003 at BJH.

- Innovative spinal cord injury treatments including brain imaging to verify recovery, and a neurologic rehabilitation program for spinal cord injury, traumatic brain injury and stroke.

- The lung transplant program is one of the world’s largest with more than 800 transplants, including the world’s first double-lung transplant.

- Washington University heart surgeons at BJH developed procedures such as robotic heart surgery, off-pump (beating heart) surgery and the Cox Maze procedure for atrial fibrillation.

- The world’s first removal of a patient’s kidney through laparoscopic surgery was performed at BJH. More recently, the mini-nephrectomy procedure, which provides significant health benefits to the living donor and the recipient, was developed here.

- In 2005, the first U.S. surgery to relocate a salivary gland to restore moisture to a tear duct was performed at BJH. This groundbreaking surgery may help save the eyesight of future patients suffering from this disorder.

BJH’s care extends into the community. Their refugee health department supports new immigrants, assisting patients in 33 different dialects. The AWARE program counsels victims of domestic violence. The Siteman Cancer Center focuses on outreach including providing mammograms, prostate PSA screenings and colonoscopy screening to the indigent. The hospital also provides more than 165 community education events annually.

The Foundation for Barnes-Jewish Hospital

The Foundation for BJH supports the Hospital, Washington University School of Medicine, The Alvin J. Siteman Cancer Center and Goldfarb School of Nursing at Barnes-Jewish College. Last year, the foundation raised $12.2 million; assets under management as of July 31 total $493 million.

Medical Staff

Barnes-Jewish is the primary adult teaching hospital of Washington University School of Medicine (WUSM). BJH’s medical staff is comprised of a mix of Washington University faculty physicians, fellows, trainees and house staff.
Washington University Physicians are specialists who are members of the full-time faculty at the School of Medicine. The highly active clinical practice group – one of the largest in the nation – represents more than 50 specialties and subspecialties in medicine and surgery. Washington University Physicians provide comprehensive medical care at more than 35 clinical office sites throughout the greater St. Louis area. WUSM and BJC have a long-standing affiliation agreement which defines revenue sharing terms for operating margins achieved at BJH and St. Louis Children’s Hospital, as well as remuneration for medical staff executive leadership positions held by WUSM physicians.

**Governance**

The BJH Board has oversight and responsibility for services provided by BJH. The Board assures the quality of care and competence of providers; provides guidance and feedback regarding strategic initiatives internally and in a broader market environment; provides guidance and counsel regarding capital and operating plans; and ensures that community needs are being met responsibly. The BJH Board supports BJH management in fulfilling the Hospital’s mission to take exceptional care of people and pursue its vision of national leadership in medicine and the patient experience.

Primary role and responsibilities of members include: 1) Provide advice and counsel from personal experience and expertise to President and senior leaders; 2) Help establish and develop relationships with local and regional organizations and communities; 3) Advocate for BJH and act as liaison with organizations and policy-making bodies. Board and committee meetings each occur four times per year (March, June, September, and December).

Standing committees include: Nominating, Governance & Diversity; Finance & Planning; Patient Care Quality & Safety; Washington University School of Medicine Relationship; Executive (meets as needed).
### Board Members:

<table>
<thead>
<tr>
<th>Name</th>
<th>Position/Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Craig Schnuck</td>
<td>Chair, Barnes-Jewish Hospital, Board of Directors, Chairman of the Executive Committee, Schnuck's Markets, Inc.</td>
</tr>
<tr>
<td>Joanne Griffin</td>
<td>Retired Corporate Vice President, Enterprise Rent-A-Car</td>
</tr>
<tr>
<td>Kathryn Bader</td>
<td>Director, Tax Credit Strategies, Husch Blackwell, LLP</td>
</tr>
<tr>
<td>Eugene Kahn</td>
<td>Former CEO, Claire's Stores, Inc.</td>
</tr>
<tr>
<td>Warner Baxter</td>
<td>President and CEO, Ameren Missouri</td>
</tr>
<tr>
<td>Ron Kruszewski</td>
<td>Chairman and CEO, Stifel, Nicolaus and Company, Inc.</td>
</tr>
<tr>
<td>Maxine Clark</td>
<td>Founder and Chief Executive Bear (Retired), Build-A-Bear Workshop</td>
</tr>
<tr>
<td>Pat Stokes</td>
<td>Former Chairman, Anheuser-Busch Companies</td>
</tr>
<tr>
<td>Arnold Donald</td>
<td>President &amp; CEO, Carnival Corporation &amp; plc</td>
</tr>
<tr>
<td>Tony Thompson</td>
<td>President and CEO, Kwame Building Group, Inc.</td>
</tr>
<tr>
<td>John Dubinski</td>
<td>President and CEO, Westmoreland Associates, LLC</td>
</tr>
<tr>
<td>Doug Yaeger</td>
<td>Retired Chairman, President and CEO, The Laclede Group, Inc.</td>
</tr>
<tr>
<td>Peter Edison</td>
<td>Former Chairman, CEO and President, Bakers Footwear Group, Inc.</td>
</tr>
<tr>
<td>Vacant - regular</td>
<td></td>
</tr>
<tr>
<td>Greg Fox</td>
<td>Group President, Harbour Group, Ltd.</td>
</tr>
<tr>
<td>Vacant - regular</td>
<td></td>
</tr>
</tbody>
</table>
Ex-officio members:

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bruce Cohen, MD</td>
<td>President-Elect of Barnes-Jewish Hospital Medical Staff Association</td>
<td></td>
</tr>
<tr>
<td>Chuck Knight</td>
<td>Chairman Emeritus</td>
<td>Emerson Electric Co.</td>
</tr>
<tr>
<td>James Crane, MD</td>
<td>Associate Vice Chancellor for Clinical Affairs</td>
<td>Washington University School of Medicine CEO, Washington University Faculty Practice Plan</td>
</tr>
<tr>
<td>Larry Shapiro, MD</td>
<td>Dean and Executive Vice Chancellor for Medical Affairs</td>
<td>Washington University School of Medicine</td>
</tr>
<tr>
<td>Rich Liekweg</td>
<td>President, BJH</td>
<td>BJC HealthCare</td>
</tr>
<tr>
<td>Ken Steinback</td>
<td>Chairman, Foundation for BJH</td>
<td>CSI Leasing</td>
</tr>
<tr>
<td>Steve Lipstein</td>
<td>Chief Executive Officer</td>
<td>BJC HealthCare</td>
</tr>
<tr>
<td>Mark Wrighton, PhD</td>
<td>Chancellor</td>
<td>Washington University, St. Louis</td>
</tr>
</tbody>
</table>

**Facilities Improvements**

The Campus is undergoing significant changes in their facilities. Known as the WUMC Campus Renewal Project, this effort will be accomplished in two distinct phases. Phase I focuses on the north campus program, and will enable the organization to achieve an increased percentage of private inpatient beds, important programmatic adjacencies and greater operational efficiencies, with flexibility to accommodate future growth at both BJH and St. Louis Children’s Hospital. This phase will:

- Consolidate inpatient, medical and surgical oncology to provide comprehensive Siteman Cancer Center services on the North Campus.
- Provide flexible space sufficient to support continued growth of Siteman Cancer Center inpatient volume at approximately 3% per year.
- Relocate select surgical services from the South Campus as part of the plan to decant Queeny Tower.
- Consolidate and modernize inpatient and outpatient women’s health services, including obstetrics and gynecology (OB/GYN) on the North Campus.
- Co-locate Labor & Delivery services with the special care nursery and neonatal intensive care unit (NICU) on the North Campus, in partnership with St. Louis Children's Hospital.
- Provide capacity for up to 4,000 births annually.
• Expand the bed platform of St. Louis Children’s Hospital to achieve a market competitive complement of private inpatient beds and accommodate growing demand for diagnostic and treatment services.

• Accommodate continued growth of pediatric inpatient services of 1-3% per year with priority emphasis on short term (Phase 1A) need to address PICU demand/capacity.

Once Phase I is complete, Phase II will move to the south campus, which will replace the 17-floor Queeny Tower building, accommodating more private-bed capacity for other key growth programs of Heart & Vascular, Neurosciences and Transplant. The first building for Phase I is expected to open in 2018.
### BJH by the Numbers

<table>
<thead>
<tr>
<th>BARNES-JEWISH HOSPITAL</th>
<th>CURRENT FYTD*</th>
<th>PREVIOUS FY</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Operating Data</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Licensed Beds</td>
<td>1,315</td>
<td>1,288</td>
</tr>
<tr>
<td>Operating Beds</td>
<td>1,173</td>
<td>1,163</td>
</tr>
<tr>
<td>Average Daily Census</td>
<td>821</td>
<td>828</td>
</tr>
<tr>
<td>ER Visits</td>
<td>42,249</td>
<td>86,490</td>
</tr>
<tr>
<td>ALOS Medicare</td>
<td>5.6</td>
<td>5.9</td>
</tr>
<tr>
<td>ALOS - Hospital Wide</td>
<td>5.40</td>
<td>5.38</td>
</tr>
<tr>
<td>Total Paid FTEs</td>
<td>9,674</td>
<td>9,159</td>
</tr>
<tr>
<td>Case Mix Index, all patients</td>
<td>1.89</td>
<td>1.83</td>
</tr>
<tr>
<td>FTEs/AOB</td>
<td>6.90</td>
<td>6.65</td>
</tr>
<tr>
<td><strong>Financial Data</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gross Revenues</td>
<td>2,100,234</td>
<td>3,955,093</td>
</tr>
<tr>
<td>Net Patient Revenues</td>
<td>711,968</td>
<td>1,376,958</td>
</tr>
<tr>
<td>Non-Patient Revenues</td>
<td>92,025</td>
<td>204,968</td>
</tr>
<tr>
<td>Total Revenues</td>
<td>803,993</td>
<td>1,581,926</td>
</tr>
<tr>
<td><strong>Key Ratios</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Operating Margin</td>
<td>3.7%</td>
<td>3.8%</td>
</tr>
<tr>
<td>Excess Margin</td>
<td>4.0%</td>
<td>4.5%</td>
</tr>
<tr>
<td>Annual Debt Service Coverage</td>
<td>13.31</td>
<td>10.79</td>
</tr>
<tr>
<td>Cash on Hand (days)</td>
<td>330</td>
<td>330</td>
</tr>
<tr>
<td>Accounts Receivable (days)</td>
<td>58.2</td>
<td>55.8</td>
</tr>
<tr>
<td>Debt-To-Total Revenue</td>
<td>11.2%</td>
<td>11.6%</td>
</tr>
<tr>
<td>Debt-To-Cash Flow</td>
<td>1.7</td>
<td>2.0</td>
</tr>
<tr>
<td>Bad Debt as a Percent of Net Patient Revenue</td>
<td>2.3%</td>
<td>1.7%</td>
</tr>
<tr>
<td>Average Age of Plant (years)</td>
<td>12.0</td>
<td>11.3</td>
</tr>
<tr>
<td>Capital Spending Ratio</td>
<td>1.56</td>
<td>1.32</td>
</tr>
<tr>
<td><strong>Payor Mix</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medicare</td>
<td>40.6%</td>
<td>40.5%</td>
</tr>
<tr>
<td>Medicaid</td>
<td>19.1%</td>
<td>20.0%</td>
</tr>
<tr>
<td>Commercial/Managed Care</td>
<td>31.8%</td>
<td>31.8%</td>
</tr>
<tr>
<td>Self-Pay</td>
<td>8.5%</td>
<td>7.7%</td>
</tr>
<tr>
<td>Percentage IP Business</td>
<td>59.5%</td>
<td>61.1%</td>
</tr>
<tr>
<td>Percentage OP Business</td>
<td>39.9%</td>
<td>38.3%</td>
</tr>
<tr>
<td>Active Medical Staff</td>
<td>1,633</td>
<td>1,773</td>
</tr>
</tbody>
</table>

*Fiscal year is January - December*
Position Overview

The position is vacant following the promotion of Mr. Richard Liekweg to Group President, BJC HealthCare.

The Office of the President includes:

- Vice President, Facilities & Support Services
- Vice President, Siteman Cancer Center
- Vice President, Surgical Services
- Vice President, Patient Care Services and Chief Nursing Officer
- Vice President, Chief Medical Officer
- Vice President, Human Resources and Patient Experience
- Vice President, Chief Financial Officer
- Vice President, Diversity, Inclusion, & Equity
- Vice President, BJC Information Systems (*dotted line relationship*)
- Director, Marketing (*dotted line relationship*)
Candidate Qualifications

Required Experience

- President, COO or significant senior level role in a complex academic healthcare system, within a competitive marketplace.

- Leading hospital operations, including strong balance of financial and productivity management, service excellence, quality and safety improvement, and employee engagement. Motivating and engaging staff during times of change.

- Has demonstrated successful relationships with medical school leadership and academic medical staff. Familiar with balancing the needs of physicians in clinical, teaching, research and educational settings.

- Track record of building a high functioning leadership team and strong Board relationships.

- Promotes diversity including all manner of employment, community interaction and advocacy.

- Construction and facilities planning experience.

Essential Knowledge

- Broad and deep healthcare industry knowledge (health reform, payment mechanisms, supplies, technology, regulatory, trends and forecasts).

- Detailed understanding of academic funds flow and how to collaborate with a school of medicine.

- Thorough knowledge of hospital operations including management systems, processes, governance, strategic and tactical planning, project management, budgeting, financial analysis, IT and construction.

- Thorough knowledge of medical staff arrangements, structure and relationships. Knowledge of the natural tension points between physicians, hospitals and administration.

- Appreciation of the functions and motivations of a large, employed academic medical group.

- Thorough knowledge of the functions of clinical, nursing, management and administrative departments of the contemporary healthcare organization.

- Working knowledge of healthcare performance improvement processes (Lean, QI, PI, CQI) and utilization review requirements.

- Knowledge of medical staff and patient care policies and procedures.

- Working knowledge of regulatory, legislative, TJC and other credentialing bodies.
• Knowledge of customer service excellence and employee engagement programs (e.g., Disney, Baptist, Studer).

• Working knowledge of public relations, marketing and community relations.

• Human relations skills (one-on-one leadership; team leadership; talent management; and leadership within the larger organization with multiple departments and constituencies).

**Education**

• MHA, MBA or similar applicable graduate degree from a leading educational institution is required.

• Evidence of continuing additional education and coursework in management, leadership, and business.

**Licensure/Certification**

• None required.

• Certification by the American College of Healthcare Executives (FACHE credentials) preferred.

• Potential physician candidates should be Board Certified in their area of professional specialty, with all the required management and leadership experience and essential knowledge.

*Candidates will be assessed using the Talent Plus leadership assessment tool and asked to provide examples of their leadership skill sets.*

**Leadership Competencies**

It is important that the new President demonstrate clear leadership competency. The following competencies are ones that have been shown to be the hallmarks of exceptional leaders:

- Living by personal conviction
- Possessing emotional intelligence
- Visionary
- Communicating vision
- Earning loyalty and trust
- Listening like you mean it
- Giving feedback
- Mentoring others
- Developing teams
- Energizing staff
- Generating informal power
- Building consensus
- Making decisions
- Driving results
- Stimulating creativity
- Cultivating adaptability
Key Leadership Competencies and Definitions

Living by personal conviction

Means you know and are in touch with your values and beliefs; are not afraid to take a lonely or unpopular stance if necessary; are comfortable in tough situations; can be relied on in difficult circumstances; are clear about where you stand; and will face difficult challenges with poise and self-assurance.

Possessing emotional intelligence

Means you recognize personal strengths and weaknesses; see the linkages between feelings and behaviors; manage impulsive feelings and distressing emotions; are attentive to emotional cues; show sensitivity and respect for others; challenge bias and intolerance; collaborate and share; are an open communicator; and can handle conflict, difficult people, and tense situations effectively. Emotional intelligence may often be labeled EQ, or emotional intelligence quotient.

Visionary

Means that you see the future clearly; anticipate large-scale and local changes that will affect the organization and its environment; are able to project the organization into the future and envision multiple potential scenarios/outcomes; have a broad way of looking at trends, and are able to design competitive strategies and plans based on future possibilities.

Communicating vision

Means that you distill complex strategies into a compelling call to march, inspire and help others see a core reason for the organization to make change; talk beyond the day-to-day tactical matters that face the organization; show confidence and optimism about the future state of the organization, and engage others to join in.

Earning loyalty and trust

Means you are a direct and truthful person; are willing to admit mistakes; are sincerely interested in the concerns and dreams of others; show empathy and a generally helpful orientation toward others; follow promises with actions; maintain confidences and disclose information ethically and appropriately; and conduct work in open, transparent ways.

Listening like you mean it

Means you maintain a calm, easy-to-approach demeanor; are patient, open minded, and willing to hear people out; understand others and pick up the meaning of their messages; are warm, gracious and inviting; build strong rapport; see through the words that others express to the real meaning (i.e., cut to the heart of the issue); and maintain formal and informal channels of communication.
Giving feedback

Means you set clear expectations; bring important issues to the table in a way that helps others “hear” them; show an openness to facing difficult topics and sources of conflict; deal with problems and difficult people directly and frankly; provide timely criticism when needed, and provide feedback messages that are clear and unambiguous.

Mentoring others

Means you invest the time to understand the career aspirations of your direct reports; work with direct reports to create engaging mentoring plans; support staff in developing their skills; support career development in a non-possessive way, will support staff moving up and out as necessary for their advancement; find stretch assignments and other delegation opportunities that support skill development, and role model professional development by advancing your own skills.

Developing teams

Means you select executives who will be strong team players; actively support the concept of teaming; develop open discourse and encourage healthy debate on important issues; create compelling reasons and incentives for team members to work together; effectively set limits on the political activity that takes place outside the team framework; celebrate successes together as a unit, and commiserate as a group over disappointments.

Energizing staff

Means you set a personal example of good work ethic and motivation; talk and act enthusiastically and optimistically about the future; enjoy rising to new challenges; take on your work with energy, passion and drive to finish successfully; help others recognize the importance of their work; are enjoyable for which to work, and have a goal oriented, ambitious and determined working style.

Leading through influence

Means you understand the roles of power and influence in organizations; develop compelling arguments or points of view based on knowledge of others’ priorities; develop and sustain useful networks up, down and sideways in the organization; develop a reputation as a go-to person; and effectively affect the thoughts and opinions of others, both directly and indirectly.

Building consensus

Means you frame issues in ways that facilitate clarity from multiple perspectives; keep issues separated from personalities; skillfully use group decision making process to ensure that quieter group members are drawn into discussions; find shared values and common adversaries, and facilitate discussions rather than guide them.
Making decisions effectively

Means you make decisions based on an optimal mix of ethics, values, goals, facts, alternatives and judgments; use decision tools, such as force-field analysis, cost-benefit analysis, decision trees, and paired comparisons analysis, effectively and at appropriate times, and show a good sense of timing related to decision making.

Driving results

Means you mobilize people toward greater commitment to a vision; challenge people to set higher standards and goals; keep people focused on achieving goals; give direct and complete feedback that keeps teams and individuals on track; quickly take corrective action as necessary to keep everyone moving forward; show a bias toward action, and proactively work through performance barriers.

Stimulating creativity

Means you see broadly outside of the typical; are constantly open to new ideas; are effective with creativity group processes (e.g., brainstorming, Nominal Group Technique, scenario building); see future trends and craft responses to them; are knowledgeable in business and societal trends; are aware of how strategies play out in the field; are well read, and make connections between industries and unrelated trends.

Cultivating adaptability

Means you quickly see the essence of issues and problems; effectively bring clarity to situations of ambiguity; approach work using a variety of leadership styles and techniques; track changing priorities and readily interpret their implications; balance consistency of focus against the ability to adjust course as needed; balance multiple tasks and priorities such that each gets appropriate attention, and work effectively with a broad range of people.
Goals and Objectives – Measures of Success

The following goals and objectives – measures of success, have been identified for attention and focus during the early tenure of the new President. They are listed in no particular order of significance.

It is not anticipated that all of the below will be executed by the new President, but that the team he/she puts into place will be held accountable for progress towards their attainment.

- Continue to engage all levels of the organization.
- Build trust between physicians and administrative leadership, creating an atmosphere of collective and collaborative decision making and transparency.
- Promote partnerships and collaborations across BJC.
- Promote employee engagement.
- Hardwire an environment focused on continuous performance improvement, quality and safety, that places BJH within the top 10 of UHC peers.
- Continue to create a positive and motivating atmosphere among staff and leadership as the organization adapts to the inevitability of diminishing resources.
- Promote a culture that takes exceptional care of each and every patient, each and every day while holding the leadership team accountable to attain top tier patient satisfaction metric goals.
- Manage the balance between the tripartite missions of clinical care, education, and research.
- Continue to refine the cohesiveness and effectiveness of the leadership team.
- Actively support BJC as it pursues greater standardization of policy, process and outcomes.
- Continue to improve the operating margin of the facility focused on reducing supply expense, optimizing labor costs, and enhancing revenue capture.
- Grow market share.
- Fully embrace the talent management and succession planning tools.
- Continue to improve Emergency Department access.
- Enhance overall patient throughput and capacity planning.
- Work with the School of Medicine to assist in developing new care delivery models responsive to the changes in reimbursement, while maximizing physician effectiveness.
• Manage potential new IT system implementation.
• Manage associated disruptions to operations related to the WUMC Campus Renewal project.
• Employ the use of both business and clinical best practices throughout the organization.
• Meet or exceed benchmarks set for safety, quality, outcomes, and patient and employee satisfaction.
• Implement BJH’s response to the Community Needs Assessment, and in coordination with public relations and community outreach, engage with the community as requested.
Overview of BJC HealthCare

BJC HealthCare (BJC) is one of the largest nonprofit healthcare organizations in the United States, delivering services to residents primarily in the greater St. Louis, southern Illinois and mid-Missouri regions. With net revenue of $4 billion, BJC serves urban, suburban and rural communities and includes 13 hospitals and multiple community health locations. Services include inpatient and outpatient care, primary care, community health and wellness, workplace health, home health, community mental health, rehabilitation, long-term care and hospice.

**Highlights**

- Hospitals: 13
- Employees: 28,184
- Physicians: 4,413
- Staffed Beds: 3,479
- Hospital Admissions: 149,797
- Home Health Visits: 220,099
- Emergency Department Visits: 500,056
- Net Revenue: $4 billion
- Community Health Programs: $22.7 million*
- Charity and Unreimbursed Care: $280 million*

*based on 2011 data

Statistics are from year-end 2012. Totals are aggregate figures for the hospitals and healthcare services that are members of BJC HealthCare.

**Purpose**

As one of the largest nonprofit healthcare delivery organizations in the country, BJC is committed to improving the health and well-being of the people and communities they serve through leadership, education, innovation and excellence in medicine.

**Goal**

BJC’s goal is to be the national model among healthcare delivery organizations in patient advocacy, clinical quality, medical research, employee satisfaction and financial stability.

BJC’s affiliated teaching hospitals, BJH and St. Louis Children’s Hospital are affiliated with internationally renowned Washington University School of Medicine, consistently ranked among the nation’s best medical schools and research institutions.

BJC’s other major affiliated hospitals are Christian Hospital and Missouri Baptist Medical Center in St. Louis and Boone Hospital Center in Columbia, Missouri. BJC’s affiliated hospitals include Alton Memorial Hospital, Barnes-Jewish St. Peters Hospital, Barnes-Jewish West County Hospital, Clay County Hospital, Parkland Health Center, Progress West HealthCare Center and Missouri Baptist Sullivan Hospital. BJC HealthCare and HealthSouth are partners in The Rehabilitation Institute of St. Louis.
BJC’s Accountable Care Organization

In light of Federal government changes to reimbursement, BJC has created an Accountable Care Organization (ACO) to focus on achieving better patient-centered outcomes and cost saving by improving care coordination and disease management for patients; expanding evidence-based care delivery models; and developing a structure that provides sharing of cost saving to ACO members. The core objective of the ACO is to improve the quality of patient care and provide better health for patient populations while lowering the growth in healthcare costs.

BJC Medical Group

BJC Medical Group employs more than 240 doctors and specialists who are affiliated with the top-ranked hospitals in the area. The Group strives to be an outstanding physician-led organization that provides exceptional medical care to a diverse population through dedication to excellence in medical care, medical services and financial management. They maximize their close affiliation with Washington University School of Medicine through continuing education and implementation of the latest clinical advances and adopt "best clinical practice outcome" models. They also strive to meet and exceed the expectations of patients, empowering them through education. The Group uses recognized benchmarks of physician and practice performance.

BJC Collaborative

Founded October 2012, BJC HealthCare has entered into a collaborative partnership with three other Midwestern nonprofit health systems. The multi-system Collaborative, named The BJC Collaborative LLC, was formed to achieve even higher quality care for the patients served by these independent not-for-profit healthcare organizations. The other participating health systems are Saint Luke’s Health System, which is based in Kansas City, MO; CoxHealth, which is based in Springfield, MO; and Memorial Health System, which is based in Springfield, IL. Each are leaders in their regions and have entered into this new relationship with a commitment to doing what is best for their patients.

While remaining independent, member and participant organizations are collaborating to achieve savings, deploy clinical programs and services to improve access to and quality of healthcare for patients, lower healthcare costs, and create additional efficiencies that will benefit patients and communities.

Blessing Health System in Quincy, Illinois was the first health system to be invited to participate in the Collaborative by the founding members. Memorial Health System is sponsoring Blessing’s participation.

The Collaborative is buoyed by the tenets of the Patient Protection and Affordable Care Act that encourage partnerships and innovation to improve patient outcomes and reduce healthcare costs. Its members believe they are well positioned to work together to achieve economies of scale, learn from each other and share best practices that will ultimately lead to better patient outcomes, improve healthcare access and lower costs.
About Washington University School of Medicine

The School of Medicine has a rich, 120-year history of success in research, education and patient care. It pioneered bedside teaching and led in the transformation of empirical knowledge into scientific medicine. From the earliest days, there has been an understanding that “investigation and practice are in spirit, method and object.”

The School of Medicine selects applicants who, in addition to possessing keen minds, demonstrate an ability to perceive and serve the patients’ best interests. An outstanding education from Washington University School of Medicine provides graduates with solid opportunities for highly sought-after residencies and fellowships, engaging and challenging research endeavors, and successful, rewarding careers in medicine, allied health and public health.

**At a Glance**

**Founded** ................................................................. 1891

**Total Students** .......................................................... 1,326

- MD, MD/PhD, MA/MD ............................................. 604
- Audiology and Communication Sciences ....................... 69
- Clinical Investigation ............................................... 92
- Genetic Epidemiology .............................................. 20
- Occupational Therapy ............................................. 254
- Physical Therapy .................................................... 275
- Population Health Sciences ....................................... 12

**Faculty** ............................................................. 1,898

**Non-faculty Assistants and Others** .................................. 258

**Staff** .............................................................. 6,622

**Total Employees** ................................................. 8,778

**Affiliated Private Practice Faculty** .................................. 1,351

**Fellows and Trainees** .................................................. 860

**House Staff** .......................................................... 1069

**Tuition, MD** ........................................................... $50,510

(2011-12 academic year, first year; includes student health service, hospitalization and disability insurance and microscope lending plan)

**Revenue** .......................................................... $1.6 billion

- Research support ............................................... $545 million
- Patient services .................................................. $687 million

(FY 2011)
The Community

Greater St. Louis offers a unique blend; it features the big-city assets of a broadly talented work force, great cultural and educational institutions and superb recreational opportunities. Yet, St. Louis also provides the convenience, intimacy and affordability of a smaller community. This extraordinary combination produces an enviable lifestyle and a competitive home for progressive companies.

St. Louis was ranked No. 11 on Parenting Magazine's 2011 Best Cities for Families; the list ranks cities based on schools, affordable homes, low crime rates, jobs and parkland. Three St. Louis communities, Lake St. Louis, MO, Webster Groves, MO and Ballwin, MO ranked among the 100 best places to live in the nation on Money Magazine’s 2011 list of “100 Best Places to Live in 2011.” The ranking looked at job growth, income increases, cost of living, housing affordability, school quality, arts and leisure options, safety, medical care, diversity and commute.

St. Louis experienced the fastest rate of growth of college-educated young adults living in or near downtown St. Louis over the last decade than in any other major metro area, according to a report from CEOs for Cities. The report notes that the population of ages 25-34 with a four-year degree living within three miles of downtown St. Louis, grew 87 percent (or by 2,700 people) from 2000 to 2009.

The American College of Sports Medicine’s 2011 American Fitness Index Report ranked St. Louis 26th out of the 50 largest U.S. metro's for community fitness status. The report is based on preventive health behaviors, levels of chronic disease conditions, healthcare access, as well as community resources and policies that support physical activity.

The St. Louis work force has a breadth and balance that's unusual among metropolitan areas. The area’s central location – both in population and geography – means that we’re within 500 miles of one-third of the U.S. population and within 1,500 miles of 90 percent of the people in North America.

Busch Stadium, home to the 2011 World Champion St. Louis Cardinals, was named No. 6 on Fox Sports' list of the “10 Best Ballparks in Major League Baseball for 2010.” The ranking noted a bustling downtown crawling with fans dressed in red and prevailing hospitality, in addition to Busch Stadium's "handsome brick exterior, the friendliest ushers ever, the views of the city, the ability to watch the game from the sidewalk outside and the mix of old and new that typify the contemporary class of parks," which all make it a top venue.

The Saint Louis Zoo, located in Forest Park, was named No. 3 on Parents magazine's "10 Best Zoos for Kids" in the May 2011 issue. The Saint Louis Zoo was also ranked the No. 1 Midwest city zoo in July 2007, according to the Chicago Tribune. The rankings were based on animal collections, display and overall experience.

For additional information on St. Louis and surrounding communities, visit the website: www.stlrcqa.org.
Procedure for Candidacy

Please direct all nominations and resumes to Christine Mackey-Ross and Wendy L. Brower McLeod, preferably via e-mail to BJHPresident@wittkieffer.com.

Christine Mackey-Ross
Wendy L. Brower McLeod
Witt/Kieffer
7733 Forsyth, Suite 2025
St. Louis, MO 63105
Phone: 314-754-6072
Fax: 314-727-5662

Discover Thought Leadership at www.wittkieffer.com

BJC HealthCare is an equal opportunity employer.

The material presented in this position specification should be relied on for informational purposes only. This material has been copied, compiled, or quoted in part from Barnes-Jewish Hospital and BJC HealthCare documents and personal interviews and is believed to be reliable. While every effort has been made to ensure the accuracy of this information, the original source documents and factual situations govern.
# 2013 Strategic Framework

## Our Mission
Barnes-Jewish Hospital takes exceptional care of people:
- By providing world-class health care
- By delivering care in a compassionate, respectful and responsive way
- By advancing medical knowledge and continuously improving our practices
- By educating current and future generations of health care professionals

## Our Vision
Barnes-Jewish Hospital, along with our partner, Washington University School of Medicine, will be national leaders in medicine and the patient experience.

## Our Values
- Integrity
- Compassion
- Accountability
- Respect
- Excellence

## Our Goals

**Safety & Quality**
- Be the safest hospital and provide the best care

**Service**
- Deliver an unsurpassed care experience

**People**
- Engage and develop a high-quality, diverse workforce

**Innovation**
- Promote discovery that advances world-class health care

**Finances**
- Create resources to support our mission and pursue our vision

## Our Improvement Priorities

- Achieve 98% core measure compliance
- Enhance clinical documentation management and process improvement
- Avoid all preventable harm
- Improve and implement standardized clinical workflows
- Support continuum of care initiatives

- Achieve an excellent patient experience
- Develop, retain and recruit the most talented people
- Create a culture of diversity and inclusion
- Proliferate and mature lean management model
- Strengthen clinical programs to enhance value to patients
- Transform facilities through Master Facility Plan deployment
- Reduce supply expenses, reduce utilization and remove waste
- Increase the probability of payment prior to delivering non-emergent care
- Reduce premium pay dollars
- Increase capacity/throughput

## Our Targets

- UHC Quality & Accountability rank: 30th
- Care composite score: 98%
- UHC Mortality Index: 0.90
- Patient Safety Indicators: 505
- High-risk medication errors with harm: 1.37
- ICU Central line infection: 0.38
- Mislabeled specimens for type and screen: 0
- Medication reconciliation accuracy rate: 60%
- Readmission rate in key areas: 19.5%
- BJH Best In Class score: 1.00

- Overall quality of care goal by venue:
  - inpatient: 75th
  - emergency department: 65th
  - outpatient surgery: 75th
  - outpatient continuing treatment: 75th
  - outpatient test and treatment: 85th

- Employee Engagement Score: 84
- Professionals and managers - percent people of color: 20%
- Lean maturation score: 50
- People managers complete talent management process: 50%
- FTE rate: 96%
- Turnover: 9.5%

- Adjusted patient days: 520,605
- BJH Volume Performance Index: 3.2%
- Operating margin: 4.1%
- Supply/net revenue: 23.6%
- - Supply expenses: $392.8M - Supply/stock: 1.4%
- - Denials: $41.0M
- Premium pay: $59.2M
- Labor/ovet: 1.53%
- Time from discharge order to discharge: 3h 11m
- Time from “decision to admit” to “in bed”: 2h 30m
- BJH Foundation fundraising: $13.0M
- Unit cost: -1.25%

## The Way We Work

**Lean Thinking**
Enhance patient care by adding value and reducing waste