

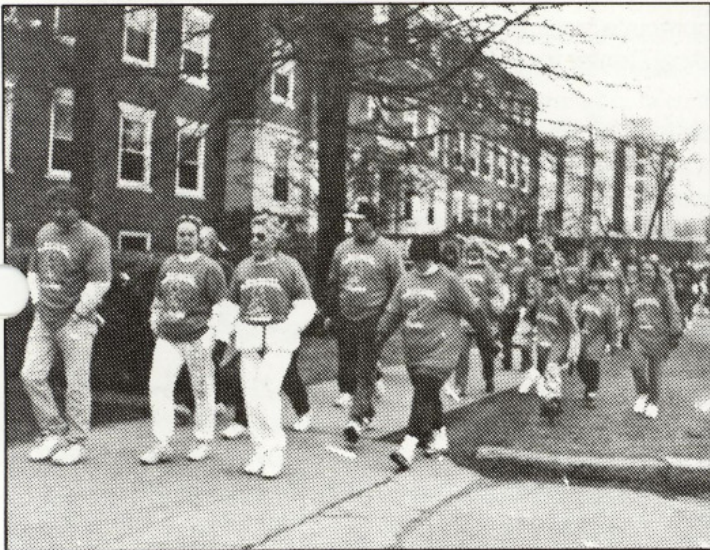


BRIGHTON Rounds

JUNE 1995

VOLUME 4:6

BRIGHTON - MAINE MEDICAL WALK TOGETHER FOR MARCH OF DIMES WALK AMERICA



Brighton Medical Center wearing blue and Maine Medical Center wearing red shirts walk to the USM Gym to join the rest of the participants for the walk.

BMC/MMC SPELLING TEAM PLACED IN TOP THREE

On Monday, May 22, 1995, the Brighton Medical Center/Maine Medical Center Spelling Team placed third in the large field of competitors representing 30 companies from Greater Portland.

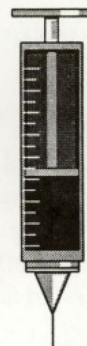
This second Annual Corporate Spelling Bee was sponsored by the Portland Partnership and was their major fundraising event of the year. Master of Ceremonies for the event were WCSH-6 Alive's Susan Kimball and Kevin Mannix.



The BMC/MMC team consisted of BMC's Louise Wakefield, Emergency Services (center) who was the official spokesperson for the team, Dr. Marc Stone and Barbara Marston, both from MMC. They made a ***GREAT TEAM AND***

DID US PROUD!

REMINDER



If you are due to have
a TB TEST call
Joan McPhail at
879-8068

Employee Spotlight/News

Youth Mentoring Program

The Hospital Industries Youth Mentoring Program is designed to help students complete high school and make the transition to post-secondary education or work. Employees of the Portland Hospitals; Maine Medical Center, Brighton Medical Center, New England Rehabilitation Hospital, and Jackson Brook Institute, and students at Portland High School make up the Youth Mentoring Program. The program currently has 28 mentors and mentees.



Mechelle Turcotte, Administrative Secretary, and Saralyn Mello, Portland High School student, received the Principal's Award through the Hospital Youth Mentoring Program.

Employees participating were **Mechelle Turcotte**, Administrative Secretary; **Venita Weatherbie**, Human Resources; and **Scott Fox**, Central Stores; and **Cary Lamson**, Coordinator for Brighton Medical Center.

Mechelle's role as a mentor to Saralyn is to be a positive role model, a friend and a stable influence in her life. She must be willing to provide support, encouragement and understanding. But most of all she must be there and spend time with Saralyn.

Saralyn's goal as a mentee is to stay in school and graduate, to improve her grades, attendance and attitude and also to be exposed to career options.

At the end of each school year there is a celebration and recognition event to mark a year of hard work, growth and fun experienced by mentors and mentees. At this celebration, awards were given. The Principal's Award recognized a mentor and mentee who have shown the greatest growth in attitude and efforts toward school. Saralyn and Mechelle received that award at the Portland High School Awards Assembly on May 17, 1995.

Mechelle feels good about herself for having impacted another's life and says that Saralyn was the one that did all of the hard work, she was just there to support her through it!

Congratulations to Mechelle and Saralyn!

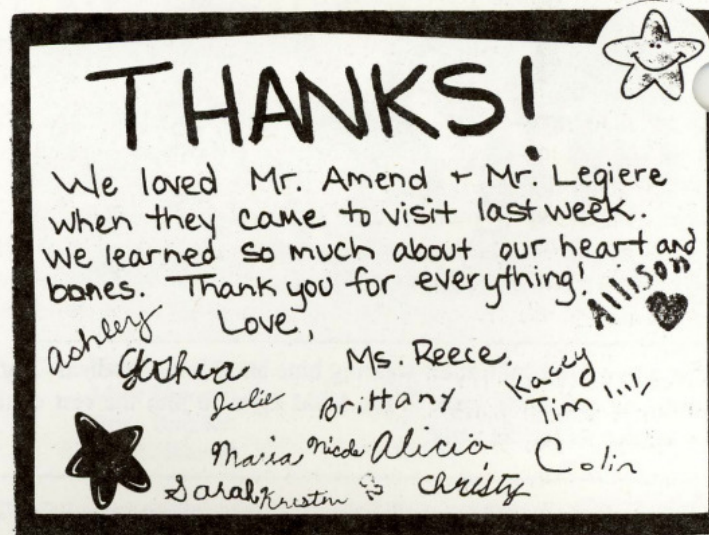
Thank You Letters

The teachers and second graders at Prides Corner School want to thank Andrew Johnson for coming to our school with "Mr. Bones." The children enjoyed seeing and touching him.

Thank you for setting up the program on blood for my science classes.

I appreciate your effort and applaud you and the Brighton Medical Center for volunteering time in the schools.

King Middle School



Debbie Martin, Shelly Miller and Sue Harper (1 Care) have been promoted to CNIII.

Linda Madore RNC was recertified in Med/Surg. Nursing.

APPROACH TO PERFORMANCE IMPROVEMENT

By Elliot Sarantakos

Today, we need go no further than the local newspaper or a television news broadcast to see the intense concern about the future of health care; its availability, its quality, and most particularly, its cost. These pervasive concerns - shared by patients, health care providers, the public, purchasers, payers, accreditors, regulators, and others - are fueling unprecedented efforts to understand and improve how health care is delivered. Certainly, our merger with Maine Medical Center is a large step toward addressing many of these issues.

Brighton Medical Center has long established itself as a health care facility that provides top quality care. This fact has been recognized by both the Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) and most recently, the American Osteopathic Association (AOA). More importantly, this is consistently what our patients tell us. The challenge ahead is to continue on this quality path and incorporate our culture and methodologies into the changing environment. Our Service Quality Improvement (SQI) program has been the driving force in forming Brighton's personality and reputation represented through our Vision Statement of Quality Built on Respect. This is demonstrated each day by all of us through our actions and resulting services provided to all customers. It is indeed our culture that has given us the opportunity of empowerment which has resulted in improvements to patient care and increased responsiveness to each other.

To meet the demands of the future, however, it is our responsibility to ensure a continuing assessment of 'what' we are doing and 'how well' it is done. Good ideas must be supported by a process of data analysis and measurement to ensure we achieve desired results. This process represents a distinct shift from traditional quality assurance to performance improvement. No longer do we focus on detection of problems and performance of individuals but rather upon processes and prevention of problems. Each major process that our patients experience during a hospital stay - admission, assessment, treatment, discharge planning, and patient satisfaction should be continually reviewed. This organizational, self-evaluation can be accomplished through several mechanisms. Individuals, departments, committees, multidisciplinary teams, etc., can all address important aspects of care to ensure optimum outcomes and efficient utilization of resources to achieve these outcomes. This is how opportunities for improvement are identified.

As defined by the JCAHO and the Brighton Medical Center Performance Improvement Plan, there are nine important dimensions of performance which define the quality of health care received. The advantage of focusing on these dimensions of performance is that they can be measured, improved and tracked for progress.

DOING THE RIGHT THINGS:

- ◆ The **efficacy** of the procedure or treatment in relation to the patient condition

The **appropriateness** of a specific test, procedure, or service to meet the patient's needs

DOING THE RIGHT THING WELL

- ◆ The **availability** of a needed test, procedure, treatment, or service to the patient who needs it
- ◆ The **timeliness** with which a needed test, procedure, treatment, or service is provided to the patient
- ◆ The **effectiveness** with which test, procedures, treatments, and services are provided
- ◆ The **continuity** of the services provided to the patient with respect to other services, practitioners, and providers, and over time
- ◆ The **safety** of the patient (and others) to whom the services are provided
- ◆ The **efficiency** with which services are provided
- ◆ The **respect and caring** with which services are provided

No matter what process or function is examined - from mammography screening to fire safety education to specific surgical procedures to discharge planning to maintaining food temperatures to telephone coverage - data must be analyzed. Without data a group can only exchange anecdotes, hunches, and impressions. While these things are all worth considering, such 'evidence' alone is insufficient. It is here that the cycle for improving performance is applied in order to quantify performance. This cycle involves the steps of design, measure, assess, improve and remeasure. It is a framework that recognizes the range of external issues such as health care reform and community needs as well as internal issues that affect performance. It is designed to help us pursue the goal of cost-effective care and optimal patient outcomes.

Brighton Medical Center has identified many opportunities for improvement and has addressed these issues through effective, result-oriented, multidisciplinary teams. This horizontal approach toward improving processes is based upon data measurement and is what we are tasked to continue and emphasize at all levels. The focus is upon patient care processes and identifying opportunities for improvement in whatever patient care environment we are in. Our ability to proactively and effectively manage quality is the only way we can prosper in the face of stringent resource constraints and increasing demands for better health outcomes. To emphasize this approach the following are objectives of the Brighton Medical Center Performance Improvement Plan.

OBJECTIVES

- Maintain a comprehensive, effective system for monitoring and evaluating the quality of patient care and services provided throughout the organization in a cost effective manner in a continuum of improving organizational performance.
- Assure that patient care is provided and maintained at a level consistent with the professional standards held in the medical community. (continued)

Performance Improvement Continued:

- Provide improvement of existing processes and functions through a systematic approach that includes identifying a potential improvement, testing the strategy for change, assessing data from the test to determine if the change produced improved performance, and implementing the improved strategies.
- Provide for a collaborative approach to review healthcare practices for their quality, cost effectiveness, and positive patient health outcomes.
- Focus on improving organizational reference databases for examination, analysis and documentation of ongoing activities. Reference databases are to include use of statistically valid performance measures and quality control activities.
- Provide for performance improvement assessment processes that includes data about the facility's outcomes over time, use of current sources about the performance of processes and the facility's performance of processes and outcomes in relationship to that of other organizations.
- Provide for the initiation of the performance improvement assessment process which occurs when undesirable variation in performance may have occurred or is occurring; by important single events and by absolute levels and/or patterns/trends that significantly and undesirably vary from those expected, based on statistical analysis; when performance significantly and undesirably varies from recognized standards, when Brighton Medical Center wishes to improve existing performance.
- Reduce malpractice and general liability through objective care evaluation; specific review of occurrences resulting in malpractice actions and/or adverse outcomes in order to assure system, process and procedure correction, including procedures for credentialing.
- Provide for performance measures that are consistent with the organization's mission, vision, and values and emphasize the assessment of opportunities for improvement or the need to reduce and/or eliminate undesirable change in performance.
- Provide a collaborative and systematic process of improving performance utilizing information from up-to-date sources about the design and performance of processes.
- Assure that clinical and leadership staffs monitor and evaluate the quality of patient care and clinical performance, resolve identified problems, and report the information to the Board of Trustees to assist it in fulfilling its responsibility for the quality of patient health outcomes.
- Assure that the objectives, mission, vision, and values of the organization and effectiveness of performance improvement activities are evaluated annually and revised as necessary.

Taking this approach toward improving quality requires teamwork, commitment and flexibility. Brighton Medical Center has a proven track record of quality care because we have quality people who recognize what is important to our

patients and one another as professionals. Let us continue to blend this culture with recognizing the need for ongoing performance improvement through data analysis and measurement. In doing so we will continue to meet the challenging times ahead.

Baseball Bulletin

Next to the Portland Sea Dogs the hottest team around is the Brighton Medical Center Softball team. BMC is undefeated with 3 wins and no losses. In the last 2 games they came from behind to pull off a win. Keep it up!!

Contact Elliot Sarantakos at 879-8245 for information.



PI Excellence!

By Janice Gibson

Long before the Quality movement was in "vogue", the people of BMC were naturally demonstrating the kind of service to everyone who passed through its portals. As SQI Performance Improvement vision and training increased awareness of the characteristics of excellence, and the effort is constantly nurtured and improved, it's nice to get feedback from our "customers."

In the wake of "Merger-mania", we can still take pride in what we do and how it is done. The people receiving our services are the best source of input, whether it be how to improve on something or about something done well; and that brings us to the main point of this article...

Several very positive "pats-on-the back" have been received via surveys and personal exchanges. These are nice to share! One patient in particular put a lot of that feedback into one phone call (while in the process of completing his survey). It was his desire that everyone know how much he appreciated all that was done for him. The message goes to Physicians, Nurses, ER personnel and everyone he had interacted with here at BMC, and included the following expressions: "Super people, can't say enough....great hospital!"

Let's accept these kudos' with pride for a job well done; and at the same time say "Thank you so very much" to all those people who take the time to let us know how we are doing, for it is that input that keeps us on our toes and inspires excellent service to remain a part of the very fiber of our existence.

GREAT UPDATE

Patricia Beaulieu, Radiology is June's GREAT Employee Winner



Congratulations to Patricia Beaulieu. Lead Nuclear Medical Technician, Radiology Services who was selected as June's GREAT EMPLOYEE Award recipient.

Pat has been employed at Brighton Medical Center since March 13, 1974. She was nominated by many employees who felt she exhibits outstanding Service Quality skills and abilities. Here is a summary of the comments that appeared on the nomination forms:

Patty is an attribute to our department. She has the uncanny ability to make all patients feel at ease. Pat's enthusiasm for doing the best quality patient care, working with other hospital staff and having a positive attitude has never wavered in the 20+ years I have worked with her. There is not a more deserving dedicated and valuable employee. Pat has worked here forever and has always put work first. She possesses great skills as a leader and educator. The patients adore her and she works hard for the good of the department and hospital. Pat always has a great attitude and is incredibly pleasant toward employees and patients. Pat exemplifies the SQI concept. It is a pleasure to work with her in the department and have her for a friend.

As Brighton's GREAT EMPLOYEE Award recipient, Pat received a framed GREAT Employee Certificate, a silver GREAT Lapel Pin, an engraved name plate on the GREAT Employee plaque in the main lobby, a \$50.00 Maine Mall Gift Certificate, 20 free lunch passes to the cafeteria and a reserved parking space in the physician's row near the front of the hospital.

The GREAT Employee is selected each month by the Reward & Recognition Committee from one of the 15 Employee Spotlights of the Month. Each Employee Spotlight of the Month

receives a \$25.00 Maine Mall Gift Certificate. Every employee of Brighton Medical Center is responsible for nominating one employee from their Department Grouping to be the Employee Spotlight of the Month. Nomination forms can be found in the Human Resources Department or nominations may be made via the Office Automation (OA) message system. All nomination forms and OA messages should be sent each month to the current Employee Spotlight of the Month for your Department Grouping or directly to Venita Weatherbie, Reward & Recognition Committee Chairperson in the Human Resources Department. Employees are also encouraged to elect employees from other departments by sending the nomination to that Department Grouping's current Employee Spotlight of the Month or directly to Venita Weatherbie.

Congratulations to the 15 Employee Spotlights for the month of June in the following Department Groupings:

- #1. Nursing Administration, Education & Health Resources Print Shop, Executive Offices, Community Community Services, Business Office, Patient Registration, Central Scheduling-Norma Quint, Supervisor, Patient Registration
- #2. 1 Care-Joanna Godwin, RN II
- #3. 2nd Floor-Laurie Davis, Support Services Associate
- #4. Peds, OBS/GYN -Regina Chaisson, RN III, OBS
- #5. SCU, Respiratory -Maggie McGough, Patient Care Technician
- #6. Surgery, PACU, ASU, Pre-Admission, Special Services -Cheryl Dudley, RN II/Pre-Admission
- #7. Emergency Services -Linda Kirk, RN II
- #8. Laboratory -Donna Libby, Sr. Medical Technician
- #9. Radiology -Nancy Johnston, Nuclear Medical Technician
- #10. Materials Management- Steve Gauthier, Director
- #11. CHP/PT/OT-Denise Gay, Office Supervisor
- #12. Performance Improvement Services, HMS/Library, Medical Affairs/Education, Physician Coordinator, Interns/Residents-Gail Perkins, Continuing Care Coordinator
- #13. Food & Nutrition Services -Mary Parent, Registered Dietitian
- #14. Facilities Management-Deborah Merrifield, Env. Services Technician
- #15. Pharmacy, Accounting, Information Services, Telecommunications, Human Resources, Employee Health, Chaplain-Rodney Knights, Accountant

HUMAN RESOURCES UPDATE

By Human Resources Staff

MILESTONES

NEW EMPLOYEES:

| | |
|-----------------------------|------------------------------|
| Douglas E. Aston | -Nursing, 2ND |
| Elizabeth M. Delprete, D.O. | -Center for Health Promotion |
| Peter D. Hamilton | -Food & Nutrition Services |
| Alyson E. Henley | -Pharmacy |
| Carol S. Mowatt | -Food & Nutrition Services |
| Joann L. Prevost | -Nursing, 2ND |
| Melinda L. Sicotte | -Nursing, 1Care |

1 YEAR:

| | |
|--------------------------|------------------------------|
| John A. Beaulieu, D.O. | -Intern |
| Stephen Bugden | -Health Inf. Mgmt Services |
| Julie K. Candura | -Information Services |
| Linda M. Congleton | -Nursing, 2ND |
| Kara A. Damon | -Laboratory |
| Alison Davis | -Laboratory |
| Lance M. Feray, D.O. | -Intern |
| Joseph P. Legere | -Center for Health Promotion |
| Lisa J. Libby | -Nursing, SCU |
| Terri L. Marshall | -Laboratory |
| Ann M. McGrath | -Radiology |
| Denise M. Paradis | -Center for Health Promotion |
| Joanne M. Tibbetts, D.O. | -Intern |
| Susan Upham, M.D. | -Center for Health Promotion |
| Lesley A. Wilhelmsen | -Telecommunications |

5 YEARS:

| | |
|----------------------|-----------------------------|
| Debra Barrett | -Surgery, Administration |
| Sylvia Dow | -Nursing, SCU |
| Jeannine M. Helmer | -Radiology |
| Sheila M. Keen | -Health Inf. Mgmt. Services |
| Rosemary J. Mills | -Medical Affairs |
| Wayne D. Piers, D.O. | -Residents |
| Kelly A. Sandora | -Print Shop |

10 YEARS:

| | |
|-----------------|----------------------|
| Janet Chartier | -Nursing, PACU |
| Leslie Fournier | -Nursing, Float Pool |

15 YEARS

| | |
|-----------------|---------------|
| Regina Chaisson | -Nursing, OBS |
| Kathy G. Dahms | -Nursing, OBS |
| Trudy A. Lyon | -Nursing, SCU |

"Someone Thinks You're GREAT Recipients"

Brighton Medical Services: Carol Male; **Central Stores:** David McCann, Deborah Merrifield; **Executive Offices:** Deanna Andrews; **Food & Nutrition Services:** Shirley Wallace;

Laboratory: Karen Breckenridge, Michelle Daigle, Pam Jordan, David Macisso, K.C. Morrell, Peggy Plapis; **OB/GYN:** Sandra Brooks; **Performance Improvement:** Sheri Dirrigl; **PT/OT:** Tim Griffin, Andrew Johnson, June Leary, Joe Legere, Holly Nason, Mary Senore; **Respiratory:** Ed Amend; **Second Floor:** Marge Roewer; **Surgery:** Bill Brown, Debbie Irish, Darrell Lavigne, Irene Rounds; **Telecommunications:** Irene Kecskemethy; **Volunteers:** Joan Hutchins.

Wellness Program Update

Congratulations to the following employee(s) who have completed the Level I Incentive Goals and have received all Level I Incentives including a Water Bottle, Wellness Mug, T-Shirt, Duffle Bag, Sweatshirt and the grand prize of 4 hours of PTO time.

| NAME | DEPARTMENT |
|------------------|---------------------|
| Brigid Murphy | -Emergency Services |
| Carmella Orlando | -Emergency Services |
| Jamie Nowinski | -SCU |



The following employee(s) have completed the first hurdle of the Level II Incentives. For their accomplishment they received a \$10 gift certificate to the Maine Mall.

| | |
|--------------|------------------|
| Ann Morton | -Business Office |
| Sue Plympton | -Medical Affairs |

The following employee(s) have completed the second hurdle of the Level II Incentives. For their accomplishment they received a BMC Wellness Fanny Pack.

| | |
|-----------------|-----------------------|
| Nancy Goodspeed | -Accounting |
| Mark Simpson | -Medical Affairs |
| Brian Bragdon | -Materials Management |
| Carol Jennings | -1Care |

The following employee(s) have successfully completed the third hurdle of the Level II Incentives. For their accomplishment they received BMC Sweatpants.

| | |
|------------|------------------|
| Annie Grew | -Business Office |
|------------|------------------|

The following employee(s) have successfully completed the fourth hurdle of the Level II Incentives. For their accomplishment they received a \$25 gift certificate to the Maine Mall.

| | |
|----------------|------------|
| Lori Baxter | -1Care |
| Kathy Brancely | -OBS |
| Dana Davidson | -Radiology |

The following employee(s) who have successfully completed the FINAL hurdle of the Level II Incentives. For their accomplishment, they received a \$75.00 gift certificate to the Maine Mall.

| | |
|-----------------|------------------------|
| Lori Baxter | -1Care |
| Steve Wojtysiak | -Facilities Management |