Q: A member of my region’s senior leadership team attended the recent MercyOne Strategy Summit held in Des Moines. Can you provide an overview of what was discussed?

A: We held our second MercyOne Strategy Summit on Tuesday, June 4, with more than 135 leaders in attendance.

After a wonderful reflection from Mark Schultz, DO, and some great focused storytelling, we kicked off the meeting with a presentation about where we started, where we are today and where we will be in the future. MercyOne COO and CFO Mike Wegner then shared that excellent progress is being made on our Key Results and the different statewide strategies being pursued.

Our efforts have created one strong strategic plan. We have come together as a unified system of health services, serving Iowa and our surrounding communities and together, we are focused on advancing our Vision.

As attendees summarized what they heard and experienced, these are some of the takeaways we heard.

- “One brand feels good!”
- “We are unified, focused and clearly on a path to ‘one-ness.’”
- “Our greatest opportunities are in front of us.”
- “We need to continue with our culture work; continue creating great experiences for our patients, their families and our colleagues; and continue building our exceptional brand.”

We want to stand out in a competitive, fast-changing health care environment. Our Vision is to set the standard for a personalized and radically convenient system of health services to care for the people who trust us to care for them. To do that, we need everyone to work together, facing the market as one.

Thank you for all you do. It is an honor to serve beside you.
Our Key Results give us a way to focus our work and measure our performance and progress toward our Vision to set the standard for a personalized and radically convenient system of health services. Since aligning our five Key Results, we have made significant progress on nearly all measures yet work remains to be done to achieve our goals. Within this newsletter, all of our more than 20,000 colleagues will see the results of our work. Local versions of the scorecard (on the right) are also available and you will begin to see the Key Results scorecard for your region in your local communications.

Impacting our Key Results begins with understanding what they are and how you can positively impact them. In each newsletter, you will see a deep dive into one of the Key Results.

So far, we’ve shared Consumer Experience, Team Engagement, Quality and Sustainable Growth and Efficiency. This month, we focus on Ambulatory Growth.

MercyOne Mission

MercyOne serves with fidelity to the Gospel as a compassionate, healing ministry of Jesus Christ to transform the health of our communities.

Ambulatory Growth

What is it?
Ambulatory Growth refers to when we increase the number of times we help when they are not an inpatient. We do this through connections with consumers like wellness visits, specialty care from a provider at a clinic location, care provided in a patient’s home or via telemedicine.

Non-inpatient care or encounters also includes ambulatory surgeries, diagnostic and therapy services.

Why it is important?
As part of living out our Mission which includes transforming the health of our communities and our Vision to set the standard for radically convenient and personalized care we are called to keep patients well, not just treat them when they are sick.

How are we doing?

- Overall we will end the year about the same as last year which is below our Key Result of 3.4 million non-inpatient encounters.
- Through May, the Central Iowa Region had 19,201 more visits to clinics year-to-date than budgeted (1,354,638 vs. 1,335,437).
- Through May, Western Iowa (13,522 vs. 11,606) and Central Iowa (14,638 vs. 13,701) are above budget on ambulatory surgeries year-to-date.

Everyone in our organization positively impacts Ambulatory Growth. These are some examples:

- A CMA notices a trend that patients who started new blood pressure medicine are waiting too long to come in for their follow up, so he works with the clinic team to arrange proactive calls to schedule follow-ups.
- Urgent care centers provide extended hours to reduce the number of patients who may end up in the emergency department after clinics have closed for the day.
- The Population Health Services Office works with local chapters and clinics to ensure annual wellness visits scheduled and are coded correctly. This ensures each beneficiary is receiving an annual wellness visit, which can identify and pro-actively treat health risks that can cause hospitalization maximizes provider reimbursement and

How do you and your team impact Ambulatory Growth? For a chance to win one of five MercyOne jackets, email MercyOneCulture@mercydesmoines.org with your story.
MercyOne North Iowa celebrates dedication and opening of $10.6 million Behavioral Health Center

by Angie Creger

On June 8, MercyOne North Iowa held a formal dedication ceremony for the opening of its new 27,200 square-foot Behavioral Health Center.

The entrance of the building has a unique feature—a community space. This center will provide free access to information on community resources, such as how to receive help for those struggling with mental illness and general information about the disease. A $900,000 gift from the Jan Again Foundation allowed for this addition.

“This whole project has been wonderful. Moving to private rooms allows us to serve more behavioral health patients,” says Teresa Mock, MD, senior vice president of MercyOne Medical Group North Iowa. “Private rooms are important to reduce stress levels for patients. Diminished patient stress means more opportunities for positive responses to patient care.”

MercyOne is clearly impacting mental health care across the state. In addition to the new North Iowa Behavioral Health Center, MercyOne recently held a groundbreaking in Des Moines for a similar facility and created a residency program emphasizing mental health. In Waterloo, MercyOne Waterloo Medical Center expanded an area of the ED to create four additional holding rooms and a common area for stable adult behavioral health patients. Holding rooms in the new area are larger than a common/smaller ED exam room. Patients who end up waiting for placement and confined to a small room for hours or days now have more space in the common area where they can also interact with other patients and colleagues.

The new environment is intended to provide a safe and secure area within the Waterloo Medical Center ED to avoid or diminish escalating harmful behaviors in this vulnerable population.

MercyOne Des Moines leads local competitors on cost and length of stay for knee-replacement surgery

by Jodi Hulbert

Good news for consumers suffering from knee pain—not only is it treatable, but it is also less expensive to have knee-replacement at MercyOne Des Moines Medical Center. The hospital offers the lowest cost knee surgery, as much as $16,000 to $32,000 less than local competitors (based on severity). Also, consumers will likely be discharged sooner, as the average length of stay at MercyOne Des Moines Medical Center is also shorter than that of competing health care providers.

Consumers can take a joint-replacement online assessment to determine if they are a candidate for knee surgery at MercyOne.org/DesMoines.

This is what Personalize Care looks like at MercyOne Siouxland Medical Center

by Jenna Rehnstrom

MercyOne Siouxfied Medical Center colleagues adopted the Walk of Honor tradition for a new purpose.

A local police officer, Brian Van Berkum, was shot while on duty and was brought to MercyOne Siouxland. He received outstanding care and was ready to go home just five days later. There was an outpouring of community support to organize a “welcome home” upon his release and take him from the hospital doors to his doorstep.

MercyOne Siouxfied leaders organized a Walk of Respect to send Officer Van Berkum out its hospital doors with respect and encouragement. Colleagues from across departments lined the halls of the lobby to stand, applaud and “high five” the officer, guiding him from his hospital room to the awaiting caravan of police and county deputies who escorted him home.

Click here to view video.
Kids have fun learning about the hospital at MercyOne Clinton teddy bear clinic
by Lori Leipold

A committee of colleagues from a number of MercyOne Clinton Medical Center departments, chaired by Perioperative Educator Kristi Olsen, RN, put their hearts, minds and hands to work planning and executing the first-ever MercyOne Clinton Medical Center teddy bear clinic on June 1.

More than 300 children and family members attended the event, which featured interactive educational stations from admitting, laboratory, the emergency department, radiology, maternal-child/pediatrics, rehabilitation, nutrition services, the operating room, pharmacy, health information management and infection control. Kids brought their favorite stuffed animals through the full hospital experience from admitting and diagnosis to medication and treatments such as surgery and therapy. Children and families also enjoyed tours of an ambulance from Medic EMS medics and a fire truck from the Clinton Fire Department firefighters.

Garner Medical Clinic expands orthopedic services
by Stephanie Duckert

Hancock County Health System (HCHS), a MercyOne affiliate, now offers orthopedic services at Garner Medical Clinic.

Mason City clinic provider Robert Giles, PA provides comprehensive orthopedic services, including sports medicine, hand and upper extremity surgery and foot and ankle surgery.

Michael Crane, MD, a board-certified orthopedic surgeon from the Mason City clinic, provides patient care and performs procedures at the HCHS hospital in Britt as well as MercyOne North Iowa Medical Center.

Orthopedic care rounds out a broad range of primary and specialty care provided at HCHS Garner Medical Clinic, including family medicine, behavioral health, rehabilitation services, heart and vascular care, internal medicine, pain management, skin cancer screening and wound care, along with laboratory and radiology services.

“HCHS strives to be the provider of choice in the Garner area as it has been for the past 31 years. We make it a priority to bring medical experts to the communities we serve,” says Laura Zwiefel, HCHS CEO and CNO.
Idea to try: Ask, “When you’re not in the hospital, what do you like to do?”

The following article reprinted with permission from MercyOne Central Iowa’s June 2, 2019, “Daily Huddle” notes:

Christy Dempsey, chief nursing officer at Press Ganey, says that one of the most effective ways to establish a personal connection with patients is through storytelling.

“It’s not enough to just take care of our patients. We have to connect with them as people—as individuals with interests, goals and values,” says Dempsey. She suggests starting a routine assessment with a personal question as simple as, “When you’re not in the hospital, what do you like to do?”

The patient’s answer and the conversation it evokes don’t have to be time-consuming to be effective. “It takes 56 seconds to make a connection with a patient,” Dempsey adds. And that connection, the conversation, can continue every hour of rounding—when the caregiver is hanging an IV bag, turning the patient over, or bringing medication. “The point is that rounding is not ‘one more thing’ that caregivers have to do. Caregivers have always been in the room every hour,” she says. “The point is to make your time with the patient count.”

Discussion questions

- Clinical staff: What are other examples of questions to ask patients and/or visitors to create a connection through storytelling?
- Non-clinical staff: How can you apply storytelling in your role (with colleagues, patients, visitors, etc.)?

Consumer Experience around the state

Our Consumer Experience Key Result likelihood to recommend improved from a baseline 28th percentile to the 46th percentile for the 11 months ended May 2019. That is an 18-point improvement, all related to great personalized care. Below are examples of how we are improving Consumer Experience throughout our state:

- MercyOne Central Iowa is exploring a Critical Care Paramedic Program in Newton. It is anticipated this would include stationing a paramedic with an ambulance on the MercyOne Newton campus 24/7 to better serve our patients and improve outcomes through expedited transfers.
- MercyOne Des Moines is evaluating expansion of its emergency department concierge role to extend services to all hospital waiting areas and include delivery of items from comfort care carts to all inpatient units. It is anticipated this role will eventually be supported by trained volunteers.
- Patient experience leaders from across the state gathered in April to share ideas with each other. They also got ideas from Press Ganey, our patient satisfaction vendor.
- MercyOne Central Iowa formed a steering committee to help improve patient experience by increasing the rate of emails and phone numbers obtained during patient registration.
- MercyOne Eastern Iowa is beginning conceptual work on a family caregiver support center.
- MercyOne North Iowa is providing service recovery education and training for the remainder of 2019. More than 200 colleagues have already been trained.
- MercyOne Northeast Iowa started a monthly consumer experience newsletter posted on patient care units. The newsletter provides an overview of current scores and includes solution starters to address various topics on the Press Ganey surveys.
Healthy food options now available to colleagues 24/7 at MercyOne Des Moines
by Jodi Hulbert

At MercyOne Des Moines Medical Center, a new fresh food vending area has been added in the East Tower. Market Fresh vending now offers made-fresh daily sandwiches and salads, baked goods, prepared soups and entrees, beverages, snacks and more.

“We've had requests from colleagues who work overnight and want fresh options when the cafeteria isn’t open,” says Doreen Richmond, director of nutrition services. “We worked with administration to bring in this new type of vending for colleagues and guests. We are the second hospital in the country to have this.”

Since the cases are available 24/7, access to fresh food is convenient. Items can be purchased with a credit card, debit card or a Smart-N-Go Market scan card. The scan cards are only available for colleagues and are located in the vending area. They can be loaded with a balance using cash or a credit card. After the scan cards are loaded, users have the option of adding a fingerprint scan so they don’t have to carry the scan cards.

This is what Be One looks like for human resources and new hires throughout MercyOne

All MercyOne markets launched a new orientation presentation for new hires in April. The interactive orientation experience was developed by the orientation and on-boarding work stream, which is part of our Culture Cabinet. Colleagues from all markets and many departments worked together to bring our Culture to life for new colleagues.

Some of what we are hearing . . .
- “The most valuable part of the day is learning more about the Mission, Values and Vision of MercyOne."
- “The presenters really hit home the Cultural Beliefs of MercyOne and how Key Results are tied to those beliefs.”
- “I valued the sharing of the goals to continuously improve the culture through Vision and Mission.”
- “Wow—other organizations could learn a lot from this one!”

North Iowa colleagues improve complaint responses
by Stephanie Duckert

MercyOne North Iowa has decreased the number of complaints that convert to grievances. The North Iowa policy states leaders have three days to follow up on complaints that are placed in the VOICE reporting system. If a complaint is not addressed or completed by the end of the third day, it converts to a “grievance.”

A complaint usually includes a phone call or a face-to-face visit with the patient along with trying to understand or resolve the complaint at hand. Follow up on a “grievance” follows Joint Commission regulation that has strict rules. The grievance needs a letter written within seven days from the CEO stating to the patient that the complaint was received, and a staff member will reach out to the patient. A leader then makes contact with the patient and works through the grievance at which point a follow-up letter is mailed to the patient within 30 day of the complaint.

MercyOne North Iowa has implemented a daily dashboard Monday through Friday at the 9:05 a.m. organizational huddle. The patient experience manager reports on any complaints that will convert to a grievance by the end of the day to ensure that leaders contact their patients in a timely manner. This structure has decreased the complaints converting to grievances by 50 percent. In addition to saving time for colleagues, patients receive more timely resolutions to their concerns.

MercyOne Vision

MercyOne will set the standard for a personalized and radically convenient system of health services.
National Health Care Week wrap-up video

National Health Care Week flew by this past May 12–18, we’ve got a great video to share with you that highlights staff from many of our MercyOne locations.

We are so thankful for all of our colleagues who support the health and well-being of our communities.

View the wrap-up video at https://www.mercyone.org/Quarterly-CEO-Video/. And while you’re there, watch the latest quarterly CEO video. President Bob Ritz discusses how our new brand has been enthusiastically received by colleagues, consumers and our patients.

Remembering the Sisters of Mercy

by Jodi Hulbert

Memorial Day provides a time to reflect on lives given in sacrifice and service to others. At Glendale Cemetery in Des Moines, 63 Sisters of Mercy are at rest—having devoted their lives to education or helping meet health and community needs.

The sisters touched many lives. Members of the Des Moines community and MercyOne Central Iowa use the holiday as an opportunity to honor the legacy given to us by these women of faith.

Prior to Memorial Day, community members and current and former members of the MercyOne Central Iowa family visited Glendale to wash each sister’s memorial marker. Stories about the sisters are often shared as they decorate their markers with flowers provided by florist Tom Boesen, a pupil of the Sisters of Mercy as a child.

After the holiday the flowers were planted at the Bishop Drumm campus as a Mission on the Move project. There, they are being enjoyed by residents and visitors as they bloom throughout the summer.

Team Engagement around the state

Team Engagement data has been collected and will be analyzed in July. Around the state:

- MercyOne Clinton child care is restructuring current classrooms to fully use available space, creating capacity for 20 additional spots to be filled by children in almost every age group.
- MercyOne West Des Moines is participating in a corporate fitness challenge through MercyOne’s Health and Fitness Center. More than 80 colleagues signed up.
- MercyOne Central Iowa surveyed colleagues celebrating a milestone anniversary to find out how they would like to be recognized. Large events held in the past were attended by about 50% of those honored. The overwhelming response was that honorees would like to have a special event outside their departments. An on-site luncheon and a dinner will be held, and honorees will choose which event they would like to attend.
- MercyOne Centerville held a colleague and family Easter egg hunt.
- MercyOne Dubuque installed digital communication monitors in break rooms to enhance 24/7 communication with colleagues.
- MercyOne North Iowa updated huddle boards to connect work and discussions to Key Results. Profiles of the results will be provided to leaders for the purpose of updating huddle boards monthly.
- MercyOne Northeast Iowa launched the “MercyOne Minute,” a short weekly video update to increase communications and engagement on what is happening throughout the system.
- MercyOne Western Iowa increased clinical rounds to support Joint Commission efforts and increase leadership visibility.
- MercyOne Western Iowa launched “What’s up, Doc?”, a session featuring multiple physicians providing 15 presentations for CME credit.
Idea to try: MercyOne Moments
MercyOne Siouxland asks staff to share their stories with the marketing team via email, phone calls or simply catching a marketing colleague in the hallway.

The team turns those stories into MercyOne Moments, which are shared online and in the hospital’s newsletter.

Each “Moment” uses our Focused Storytelling format with a Cultural Belief at the beginning, the story, and then how that information affects a Key Result.

A recent Moment is shown below:

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MercyOne Values
Reverence
We honor the sacredness and dignity of every person.

Integrity
We are faithful to who we say we are.

Commitment to the Poor
We stand with and serve those who are poor, especially the most vulnerable.

Compassion
Solidarity with one another, capacity to enter into another’s joy and sorrow.

Excellence
Preeminent performance, becoming the benchmark, putting forth our personal and professional best.

Justice
We foster right relationships to promote the common good, including sustainability of the Earth.

Stewardship
We honor our heritage and hold ourselves accountable for the human, financial and natural resources entrusted to our care.
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“To affect the quality of the day, that is the highest of arts.”

~Henry David Thoreau

Lord, There is a reason You brought me to this new day. Shine brightly through me so that everyone that comes across me today may feel your presence in me. Take my hand Lord and teach me to do that which is right. As I step out today, let lives and destinies be blessed by my words and actions. Amen.
MercyOne Siouxland celebrates 2,000th robotic surgery

by Jenna Rehnstrom

Surgeons at MercyOne Siouxland performed their 2,000th innovative robotic surgery in mid-May.

MercyOne uses Intuitive’s da Vinci surgical system, which allows patients needing medical intervention quicker recovery times. The minimally invasive, robotic-assisted platform helps surgeons deliver the best outcomes possible for those needing abdominal surgeries, including prostate, colon, intestinal, bladder, kidney, hernia, gall bladder and hysterectomy procedures.

“Robotic surgery has allowed us to reduce post-operative pain and perioperative complications with shorter hospital stays and quicker recoveries,” says MercyOne’s Chief Medical Officer Lawrence Volz.

Dr. Volz, who had the honor of performing the 2,000th surgery also performed the 1,000th procedure. He says the latest robotic technology allows the medical center to recruit and maintain high-level surgeons and surgical team members and offer patients high-quality medical services and treatments.

In early May, staff from MercyOne West Des Moines Medical Center hosted a three-day preview and “test drive” of the da Vinci system. Colleagues and consumers were invited to preview the platform and even get behind the controls of the technology that is transforming lives with smaller incisions, less pain and a faster recovery.

MercyOne Iowa Heart Center investigates stem cell-based therapy to treat heart failure

by Jodi Hulbert

MercyOne Iowa Heart Center has treated its first patient in the Phase III CardiAMP® clinical trial of an investigational stem cell-based therapy for the treatment of heart failure that develops after a heart attack. The first procedure was performed by interventional cardiologist Mark Tannenbaum, MD, lead investigator of the trial at MercyOne Des Moines and chief physician officer at MercyOne Iowa Heart Center.

The investigational CardiAMP therapy is designed to deliver a high dose of a patient’s own bone marrow cells directly to the damaged parts of the heart, potentially stimulating the body’s natural healing response after a heart attack. Patients are screened for bone marrow characteristics that may result in a higher likelihood they may benefit from the therapy.

Alan Nicholas, a 62-year-old retired pilot and engineer from southwest Iowa, was the first patient enrolled in the trial at MercyOne Iowa Heart Center. While he won’t know for nearly two years whether he received the treatment during randomization, during his six-month follow-up visit, he noted he is experiencing an improvement in his heart failure symptoms. “I am able to walk without getting short of breath, and I recently walked a nine-hole golf course,” says Nicholas. “My color is better, and I am able to do things I wasn’t able to do before.”

“We’re looking at how use of a patient’s own stem cells promotes self-healing within his or her heart,” says Dr. Tannenbaum. “Oftentimes, advanced heart-failure patients need an artificial pump or heart transplant. With this trial, we hope to identify a less invasive option to improve the quality of life for these patients.”
Quality around the state

Our Key Result of Quality, measured by readmissions rate, is now better than 96% of hospitals across the country. At 12.2%, our readmission rate is well below our goal of 14.8%. Around the state:

- MercyOne Siouxland is working to improve the discharge education process to have physician, nursing and pharmacy colleagues provide clarification of instructions to help patients understand their care when they leave the hospital. The staff also fully discuss the purpose of the medications patients will be taking.

- MercyOne Western Iowa made a request to the Congressional House of Representatives to provide funding to address the ongoing homelessness and addiction problems among Native American constituents in Sioux City.

- MercyOne Dubuque demonstrated our Cultural Belief of Be ONE when infection control and surgical nursing leadership traveled to MercyOne Siouxland to assist with improvement efforts in follow-up to the triennial accreditation survey.

- MercyOne Newton's daily safety calls have increased awareness of patient, employee and visitor safety since implementation in June 2018.

- MercyOne Clinton was recognized with the Iowa Healthcare Collaborative Award of Excellence for achievement in reducing preventable conditions through a creative hand-hygiene campaign.

- MercyOne Newton has realized positive changes with regard to the reduction of antibiotic days of therapy due to enhanced antibiotic stewardship work combined with the implementation of the hospitalist program in January 2019.

- Members of Western Iowa's readmission committee identified medication duplication on patient discharge instructions of readmitted patients. Education and reinforcement was provided to all clinical nurse managers, charge nurses and nursing staff in regard to their responsibility to review the medication lists with patients prior to discharge and to contact physicians with questions regarding any potential medication errors.
Coordination throughout Eastern Iowa region creates new opportunities and efficiency

by Jennifer Faley

Two new roles have been created in the Eastern Iowa region, which includes the Clinton and Dubuque markets and critical access hospitals in Dyersville, Elkader and Guttenberg. These new positions were developed from a consolidation of roles to create synergy throughout the region and increase efficiency.

Jacquie Brunssen has accepted the position of vice president of performance excellence/high reliability organization. Brunssen will have responsibility for accreditation activities, regulatory and value-based payment programming, risk management, safety, clinical analytics, performance excellence and implementation and evaluation of quality-improvement efforts, including outcomes reporting for the Eastern Iowa region.

Chad Kruse has accepted the position of regional director of integrity, compliance and privacy. Kruse will lead the development and implementation of the Eastern Iowa region’s integrity, compliance and privacy program, ensuring the program is designed and administered to meet recognized standards for effective health care compliance programs such as Centers for Medicare and Medicaid Services and Department of Health and Human Services—Office of the Inspector General.

Kruse will also ensure that MercyOne standards of conduct and policies and procedures are established and maintained to support the operations of the integrity, compliance and privacy program.

MercyOne Clinton and Medical Associates join forces

by Lori Leipold

On May 30, MercyOne Clinton Medical Center announced an agreement with Medical Associates of Clinton in which the medical group will join MercyOne this summer. The two organizations, which have provided quality care to the Clinton area for decades, will work together to expand services, improve access and create an even higher level of care coordination to benefit patients and communities throughout the region.

“In an era of major change in the health care industry, we are pleased to have reached this important agreement between our organizations,” says Kay Takes, president of the MercyOne Eastern Iowa Region. “Medical Associates of Clinton and MercyOne Clinton Medical Center have proudly served patients and families in our community for many years, and we look forward to the positive impact this new relationship will have in providing medical care and services well into the future.”

MercyOne Clinton will continue to offer the services provided by Medical Associates, including care at the Urgent Care and Occupational Medicine Clinic in Clinton and the clinics in Clinton and DeWitt, Iowa, along with the clinics in Fulton and Morrison, Illinois.
MercyOne Launches First Statewide Service Line Marketing Campaign

by Kelly Jans

When MercyOne adopted our unified brand strategy, it created many efficiencies across all markets. Joint marketing efforts are just one way we are leveraging our statewide network and impacting sustainable growth. Prior to adopting the master brand strategy, markets would buy media individually, often with overlap and bidding against one another, driving up costs.

Now, we have the opportunity to participate in cross market campaigns. Cardiology is our first strategic focus area with confirmed participation in three markets: Northeast Iowa, Dubuque and Siouxland. The tactics include digital media with two calls to action: a health risk assessment and requesting a call to schedule an appointment.

The cardiology campaign will launch at the end of June and continue for six months. Watch for this campaign and others to come in the future. This is just another way we can Be One and work together to impact our Key Results.

Sustainable Growth and Efficiency around the state

Through May, our Sustainable Growth and Efficiency Key Result of operating margin is 2.2%, which is lower than budget. However, this represents a significant improvement over last year. Around the state:

- MercyOne Dubuque is planning for the implementation of a transcatheter aortic valve replacement (TAVR) program, likely first quarter 2020. TAVR is a minimally invasive surgical procedure that repairs the valve without removing the old, damaged valve.

- MercyOne Newton’s Neurology Clinic is increasing to two days per month.

- MercyOne Eastern Iowa is focusing on the growth of its rehabilitation business line and capturing referrals from MercyOne Clinton to MercyOne Dubuque.

- MercyOne Dubuque is advancing plans to restructure Mercy Family Pharmacy, including termination of a long-standing management contract with an outside vendor. The transition plan is on track for a July implementation.

- MercyOne Eastern Iowa is working on a contract with the Clinton YMCA to provide meals for children. This is anticipated to result in new revenue of $30,000.

- MercyOne Northeast Iowa implemented a value analysis log to manage and track non-salary expense-reduction efforts.

- Mercy One Clinton hosted a community baby shower to let pregnant women and their families know what services are available to them in the community. There was good turnout with many community resources represented.
Seven Digital Health Questions

MercyOne recently held its second Strategy Summit in Des Moines, bringing together physician leaders, affiliate partners, members of each region’s senior leadership team, Culture Cabinet members, and various other thought leaders from our System Office. The day-long event included many speakers—one of which was Pamela Villacorta, Division Director of Digital and Virtual Care for MercyOne.

We recently had a chance to sit down with Pamela and ask her way more than seven questions about MercyOne’s digital health strategy, but below are the issues that may have the most impact on MercyOne in the coming year:

MercyOne Editor: How is MercyOne using digital technology to improve the way we offer consumers access to health care?

Pamela Villacorta: We have several telehealth pilots in progress where we are using a HIPAA-compliant version of Zoom, a video communications tool, to deliver outpatient care. For example, cardiologists on MercyOne Iowa Heart Clinic’s Advance Heart Failure team in West Des Moines can now conduct a virtual appointment with a patient 80 miles away in the Fort Dodge clinic. Using Zoom and a digital stethoscope, the cardiologist can hear his or her patient’s heart sounds in real-time and speak to the patient and nurse who are in the Fort Dodge clinic, as if they were in the same room. Patient and provider satisfaction ratings have been very high so far. These positive reactions have been consistent across all pilots.

We are also implementing new mobile tools in our urgent cares not only to help patients decide where to get care, but also to make the urgent care experience as easy as possible. New features include clinic wait times display, mobile appointment scheduling, mobile registration, mobile check-in and mobile payment.

ME: In your presentation at the Strategy Summit, you told the group that changes in both Iowa state legislation and state and federal payor reimbursement policies reflect broad acknowledgment that adoption of digital technology in health care can improve health care access, delivery and outcomes. Can you explain that in more detail?

PV: Yes, as more and more patients want—and use—mobile devices for health care (as they are already accustomed to in other industries like banking), the legislative landscape and payers have started to acknowledge this transition. Medicare issued new CPT codes in January, supporting different types of telehealth beyond secure video visits. This year, there are new CPT/HCPCS codes for “asynchronous telehealth” (a.k.a. “store-and-forward”), which supports payment for remote analysis of a medical image, for example. There are also new codes for remote patient monitoring, which allow a health care team to monitor a patient’s condition via a digital device, like a cellulary enabled glucometer, and intervene in that patient’s care before a medically adverse event occurs.

ME: What else will colleagues be seeing related to MercyOne’s digital health strategy?

PV: We have a new Digital Health Advisory Board that includes functional leaders and subject matter experts from all markets, including but not limited to IT, finance, revenue cycle, payor relations, legal, compliance, advocacy, credentialing, operations, strategy, marketing, population health, human resources, and affiliate leadership. People don’t realize how many functional teams are impacted when a new telemedicine service is being launched. This board will be responsible for evaluating opportunities and establishing policies regarding new and emerging health care technologies that can support MercyOne’s strategic plan. The members will also be responsible for developing strategies to quickly increase adoption of new technologies and for disseminating information regarding system-wide digital health initiatives. We are also developing a telehealth “playbook” that will be drafted by the end of July.

ME: Ohhh, tell us about this playbook. What will it include?

PV: The playbook will be a step-by-step guide and best practices on how to develop a new telemedicine program at MercyOne. More importantly, it will include the upfront planning considerations and key questions to answer before embarking on telemedicine program development. Strategic planning is critical.

ME: Where do you see telemedicine going? What cool new things do you foresee patients and providers will have access to or be able to do—all from some type of mobile device?

PV: Believe it or not, some form of telemedicine has been in existence since 1905.* NASA had a hand in developing it in the 1950s for delivering care to astronauts, so it’s not a new health care delivery system. Only now that governments and payors have begun to support its use with policy and reimbursement, and computer processors have become small and inexpensive, has it started to gain steam. That said, other types of digital health are evolving rapidly. There is a lot of exciting research around computer vision and health care—how a digital camera can “see” and detect things that the human eye cannot see. I attended a talk last week by a European research team that is working on a computer vision program that can take physiological measurements of patients in the Emergency Department (ED) just by analyzing video of the patients sitting in the ED. No probes, no blood pressure cuffs, just a video of each patient!

ME: On the flip side, what areas of telemedicine do you think we need to be careful about? Where do you see potential gaps that health care providers need to be diligent and thoughtful about?

PV: We conducted a provider survey in February to better understand how our providers feel about telemedicine. About 50% of the respondents acknowledged this transition. Medicare issued new CPT codes in January, supporting different types of telehealth beyond secure video visits. Two years ago, there were only a few of these CPT codes. Now there are a lot of varying and strong opinions about what is and is not appropriate for telehealth. Every provider should make those determinations for themselves. Also, when it comes to telehealth reimbursement, the devil is in the details: payors have different reimbursement policies, so unfortunately, providers need to be aware of those reimbursement differences.

ME: May we ask one more question?

PV: You just did.

ME: Darn it! Okay, just one more. What is your favorite part about your job in the digital health world as we know it?

PV: I have seen first-hand the positive impact that digital health has on patients, care teams, families and rural communities. I am passionate about bringing that same impact to MercyOne patients and providers in communities across Iowa.

* https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3089841/
Ambulatory Growth around the state

We measure our Key Result of Ambulatory Growth by tracking our increase in non-inpatient encounters generating revenue. Through April we are below our goal, but there is growth happening across the state:

• MercyOne North Iowa is investigating the ability to have an ARNP provide Medicare annual wellness visits by telemedicine.

• MercyOne West Des Moines worked with imaging to add more MRI slots to the schedule that resulted in 20 additional outpatient studies from February to March.

• MercyOne Centerville recently instituted the following growth initiatives: 1. Expanded Rheumatology Clinic to one day/week, 2. Added lithotripsy as a service, 3. Expanded pulmonary function testing to 5 days/week, 4. Added rehabilitation services for home care, and 5. Began marketing laparoscopic gynecologic surgery.

• MercyOne Eastern Iowa is continuing to service business solutions clients, including health screenings Kendall Hunt, which has approximately 100 employees.

• Albert Lea, MN, business leaders chose MercyOne North Iowa to provide its clinic services. Provider recruitment is underway with an anticipated effective date of January 2020.

• MercyOne North Iowa will be adding outreach clinics for weight management in both Fort Dodge and Garner.

Expanded pain-management services now available in Central Iowa

by Jodi Hulbert

MercyOne Des Moines Pain Management has expanded its pain-management services in the MercyOne Ankeny Health Plaza, now offering both patient evaluations and pain-management procedures.

In addition to the Ankeny location, MercyOne Des Moines Pain Management offers a wide variety of pain services in Des Moines and Newton. Treatments include pain of any origin, including:

- Lower back pain
- Neck pain
- Radiculopathies (pinched nerves)
- Inflammatory pain disorders
- Complex regional pain syndrome
- Joint pain
- Failed back surgery syndrome
- Cancer-related pain
- Fibromyalgia

Patients are referred to MercyOne Des Moines Pain Management by their family provider or other specialist. By creating more options for consumers, we are improving their experience with MercyOne and improving our Key Result of Sustainable Growth and Efficiency and Ambulatory Growth.

Northeast Iowa launches Urgent Care online scheduling

by Adam Andor

Patients who want to visit Waterloo Urgent Care are now able to schedule online. By visiting MercyOne.org/urgentcare, patients can choose from available appointment times to help them plan their days.

There are 36 appointments reserved for online patients every weekday, with 24 appointment slots available both Saturdays and Sundays. Northeast Iowa plans to roll out online scheduling at additional urgent care locations in the future.
Beam-signing event for MercyOne Dubuque Cancer Center

by Jennifer Faley

On May 22, MercyOne Dubuque invited the community to sign a white-painted steel beam that will offer structural support—and emotional support—in the new MercyOne Dubuque Cancer Center. The 30-foot, 1,400-pound steel beam now bears the names of more than 1,200 people whose lives have been touched by cancer.

“The response was overwhelming,” remarks Matt Daughenbaugh, marketing director. “People signed their own names to show their support and the names of loved ones to honor those who have fought cancer. Many individuals shared with us their stories of survival or loss, and it was a very moving and emotional day for everyone. People really appreciated having this opportunity to sign the beam.”

The beam was installed on June 6, and the cancer center is on schedule to open in May 2020. View more photos of the beam signing on MercyOne Dubuque’s Facebook page.

VDMC Boone River Run

by Jordan Behounek

Van Diest Medical Center (VDMC) hosted the first-ever VDMC Boone River Run 5K to kick off National Health Care Week on May 11. The event was put together by the VDMC Wellness Committee with the goal of promoting the health and wellness of Hamilton County.

The hospital received immense support from the community with 10 local businesses sponsoring the event with monetary donations and 11 other businesses donating items or services to the event. The Boone River Run was a huge success with more than 100 race participants of all ages and $3,100 donated to the physical education programs at the public and private schools located in Hamilton County. The money was divided among the schools based on current student enrollment totals, and the donation checks were presented to Northeast Hamilton Community School, South Hamilton Community School District, St. Thomas Aquinas School, Stratford Elementary, and the Webster City Community School District throughout the week. This donation will reach 2,625 children in the community by supporting the physical education programs at each school.
MercyOne Dubuque promotes an active lifestyle with family friendly race

by Jennifer Faley

The Heritage Trail 5K/10K is known locally as the first major race of the season, and MercyOne Dubuque was again this year's presenting sponsor. This family friendly race was held Saturday, May 11, on the picturesque Heritage Trail, just north of Dubuque. The morning began with a free kids’ “fun run" for ages 6 and younger, with the 5K and 10K races following.

“We love seeing people out there running or jogging with their kids or those who are new to exercise and are walking their first 5K," says Michelle Arensdorf, community education nurse. "We had participants from ages 2 to 82. It’s truly an event for everyone."

MercyOne Dubuque dietitians added to the event with an interactive booth displaying the amount of sugar in many common foods and beverages. “The kids were especially shocked to see just how much sugar is actually in one large ice cream shake,” says Jessie Byers, MercyOne dietitian. “It’s a fun, eye-opening activity that hopefully got some people to think more about their food and beverage choices.”

Celebrations/Kudos

Mitchell County Regional Health Center named U.S. Top 20 Critical Access Hospital for patient satisfaction

by Stephanie Duckert

Mitchell County Regional Health Center (MCRHC) was recently named one of the Top 20 critical access hospitals for patient satisfaction in the country.

The Top 20 Critical Access Hospitals list is determined by The Chartis Center for Rural Health for patient satisfaction. The rankings were recently announced by the National Rural Health Association (NRHA), and an awards ceremony will be held during NRHA’s Critical Access Hospital Conference in September.


MCRHC was selected from The Chartis Center for Rural Health’s 2019 Top 100 list, released earlier this year. Those hospitals that have been recognized in the Top 20 have achieved success in one of two key areas of performance:

1. Quality index: A rating of hospital performance based on the percentile rank across the five categories of Hospital Compare Process of Care measures.

2. Patient perspective index: A rating of hospital performance based on the percentile rank on two Hospital Compare HCAHPS measures (“Overall Rating" and “Highly Recommend)."

“MCRHC is proud of the efforts of our physicians and colleagues who have contributed to our organization achieving this designation," says Shelly Russell, CEO. “Our results as a top patient satisfaction organization demonstrate our passion to serve our community and continue to improve the services we provide now and in the future.”
Creighton University awards Sister Maurita Soukup with honorary Doctor of Humane Letters

Sister Maurita Soukup, RSM, RN, MSN, PhD, received an honorary Doctor of Humane Letters from Creighton University during the school’s commencement ceremonies on Saturday, May 18.

Creighton President Rev. Daniel Hendrickson, SJ, said this honorary degree recognizes Sister Maurita’s tireless commitment to quality, compassionate health care delivery and education. A Sister of Mercy for 53 years, Sister Maurita currently serves as a health trustee and nurse consultant/researcher. Her work includes service on the boards of two regional health care systems, including CHI Health.

“Sister Maurita’s expertise is always offered through the lens of mission, keeping the board grounded in the sacred responsibility of caring for God’s people in their moments of greatest joy and deepest vulnerability,” said Rev. Hendrickson. “She is a wonderful examplar of the kind of health care professional Creighton strives to form, and we are honored to recognize her.”

During the first 30 years of her ministry, Sister Maurita held critical care nursing positions at a number of hospitals in the Midwest. After earning her doctorate, she held nursing administration positions that included serving as the founding director of the Eastern Iowa Hearth Institute at St. Luke’s Hospital in Cedar Rapids, founding director of the Center for Advanced Nursing Practice at Bryan LGH Medical Center in Lincoln, and critical care clinical nurse specialist (and later vice president) of The Iowa Heart Hospital of Mercy Medical Center in Des Moines. She returned to Cedar Rapids to assist in family caregiving of her mother until her mother’s passing.

Transitioning from nursing administration, Sister Maurita has served as a consultant and continued her research in critical care and advance practice nursing. Currently, she serves as a trustee for MercyOne–Medical Center Siouxland, MercyOne Medical Center North Iowa and MercyOne Hospital New Hampton, MercyOne Medical Center in Cedar Rapids, Mercy College of Health Sciences in Des Moines, MercyOne Iowa/Northeast Trinity–Regional Health System in Des Moines, and CHI Health Northeast Iowa system in Omaha.
MercyOne Clinton Medical Center welcomes Drs. Timothy King and Charles Parker for ENT services

by Lori Leipold

The team of Timothy King, MD, and Charles Parker, MD, will be extending their services for otolaryngology care to MercyOne Clinton Medical Center. The two physicians are based at Medical Associates of Dubuque, an independent physician group that is not affiliated with Medical Associates of Clinton.

Drs. King and Parker come to MercyOne with years of experience in treating conditions of the ear, nose and throat for adults and children. Dr. King received his medical degree from the University of Minnesota Medical School where he completed residencies in otolaryngology and maxillofacial surgery. Dr. Parker received his medical degree at the University of Missouri Columbia School of Medicine and completed a residency in otolaryngology at the University of Cincinnati Medical Center in Ohio. The two will serve the Clinton area for ear, nose and throat specialty care on the first and third Tuesday of every month.

FAMILY MEDICINE

Einar Arason, DO
MercyOne Pleasant Hill
Family Medicine Clinic and Urgent Care
Pleasant Hill

Emily Becker, ARNP
MercyOne East Village Urgent Care
Des Moines

Jessica Loban, ARNP
MercyOne Waterloo
Family Medicine
Waterloo

Bret Ripley, DO
Director, South Des Moines Family Medicine and Residency Program
Osteopathic Manipulation Medicine