



September 2016

## Monthly Update

**Architecture, Design, and Community Relations** – Internal Construction is moving along nicely. Melissa Bierman presented Unity’s Garden plan at the AHDA conference and it was well received. Still working with the state to determine what is required of the PES from a medical service perspective. The most impactful issue is whether we’ll have to meet building code for a medical ED. The new entrance to Unity will not be complete upon opening and a contingency plan is being developed.

**Care Model Design** – The focus in Care Model has been around policy development, creating operational agreements with support service teams, and finalizing clinical workflows. Next steps include reviewing policies, executing necessary changes, and submitting changes for approval.

**Change Management** – Training Plan is under development. NEO is set-up for all transitioning teams. The final Communication Session with staff will occur on October 10th. Managers working with staff to start developing ‘get to know you’ team documents.

**Communications and Marketing**– Tim Hall has been out and about in the community, primarily promoting Unity at community fairs. He’s observed a lot of interest in Unity from the community. They held a Community Meeting, attended by 125 people that were primarily community partners. This served to trigger more interest in Unity information sessions. January 5th from 10-12pm will be the Unity Grand Opening for invited guests. Public Tours will be offered on this same day from 4-7pm. Sending out Save the Dates the week of 10/3 and they are collecting names of interested parties from Unity Leadership.

**Community Advisory** – Greg was introduced to the advisory council and the discussion centered on medical management and PES operation. The Exec Director for Cascadia, Derald Walker, joined the advisory council. Terry is coming as a guest to speak to the council.

**Development** – Development has raised \$39 million raised out of the \$40 million. Generally the last million is the hardest to get so we are working hard on the last stretch. We are submitting a grant to Cambia to support Peer bridgers. In the month of October we will have several hard hat tours for potential donors. We will also have a fundraiser for Unity art.

**Finance/Rev Cycle** – Working on contracting with health plans and gave an update to the Board of Managers on 9/27. All contracts are part of Legacy EMC and Unity is under that license. The final S-code pricing scheme has been determined for the PES. Patients moving between PES and IP will be transferred rather than DC/Admit.

**Government Affairs** – We held tours recently with commissioners who were very excited about Unity. The Rules Advisory Council has concluded which means we have temporary rules for advising what a PES is and the change in secure transport that would allow ambulances to transport patients to the PES instead of law enforcement.

**Human Resources** – We extended an offer for PES RN Manager but it was declined. Filled 278 positions, we have applicants for the remaining positions but need time to review each application thoroughly. Juliana Wallace, the Director of Unity Services, starts October 10th. We may need to fill a total of 6 positions to get the 4 FTE for Hospitalists. Need to fill 151 staff positions, of which 46 are on call. Support positions won't open up until mid-October and are not included in the numbers above.

**IS** – The IS Rev Cycle Build is nearly complete with S Code price finalization complete. Rover and Vocera devices ordered. Integrated Testing for Unity Build will take place on October 17th/18th. Provider Build and Order Sets are next to be finalized before Integrated Testing.

**IS Construction** – Workstations have been created in Epic. We are working with security vendor to make sure cameras are programmed correctly. The network is up on the fifth floor. Workstations will start being set-up on the 17th.

**Provider Recruitment** – We added another NP this week who accepted an offer in the PES. We are interviewing another psychiatrist as there is one 1.6 FTE left in IP Adult. We are working to establish LOCUMs and Tele Psychiatry contract to cover the holes.

**Risk Management** – Lynda Benak is assisting with developing policies that help to mitigate clinical risk.

**Transitions of Care** – TOC Team has been meeting one on one with each TOC organization and they are making strides toward agreements. They have identified a list of the final organizations that will be co-locating and provide In-Reach at Unity. In October and November we will be presenting the co-location Plan to the TOC Teams.

**Transition Steering** – Transition Staffing Kaizen took place to complete the staffing schedule for move day. Meeting with transportation group to ensure they can accommodate needs for Move Day. Finalization of Move Plan. Existing known risks include snow and traffic.

**Transportation** – Beta testing continues to show our original algorithm assumptions were correct. Law Enforcement seem thrilled that they won't be transporting patients anymore. This group is continuing to meet with police to let them know they'll be getting out of the patient transportation business. They continue to work on the flow of communication from the field to Unity.