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HENNEPIN COUNTY MEDICAL CENTER, MINNEAPOLIS, MINNESOTA 55415 VOLUME 28, NO. 2, JULY 2007

Work to begin on major facility renovation and expansion

Hardhats and cranes are in our future as an \$80 million renovation and expansion begins this summer. The first phase will add up to 58 more inpatient beds on the downtown campus, replace Family Medical Center, and fund the purchase of land downtown for a new ambulatory clinic and education building.

“The projects downtown are focused on providing patients easier, more convenient access to our services by getting high volume clinics off the upper floors of the buildings and into a modern, accessible ambulatory building and, at the same time, adding new variable acuity beds in rooms that are private, which is today’s standard for infection control, patient privacy, and operational efficiency,” said Deborah Sweetland, Office of Strategy Management.

Capital funding for the project was approved in June and already hospital employees, physicians, and patients are providing input to architects and planners as they create new facilities that will meet current and future needs. Employees from 26 departments, with more than 750 years of combined experience at Hennepin, met with architects in July.

“We’re actively seeking input from employees to identify what nurses, ancillary staff, support staff, physicians, and others who will work in the units will need, and where they need things to be located in order to do their jobs,” said Sweetland. “We are fortunate to be working with an industrial engineer and architects who have extensive experience designing hospitals and clinics that meet

today’s functional programming needs, so the input of employees plus the experience of our architects and planners will

See page five for John Fineberg's article, "Chaplaincy, Social Services, and OT among those 'all in' with Epic."

Infectious Disease Clinic and Positive Care Center from Red 7 to the former Urgent Care Center space on Blue 1. The construction will begin to add 38 new ICU and Med Surg telemetry beds, which are expected to open by May 2008.

New Buildings

The timeline for construction of the two new buildings in the Hennepin system is still being finalized. Planning has started on the new ambulatory building in South Minneapolis that will replace Family Medical Center. The intent is to purchase land by the end of 2007 and complete construction by early 2009. A site has not yet been identified.

The preliminary planning for the downtown building shows acquisition of land by March of 2008. The second phase of the capital project includes construction of the ambulatory and education facility to be completed by summer of 2009.

New CNO joins Hennepin

Kathy Wilde joined Hennepin County Medical Center July 16 as the hospital’s new Chief Nursing Officer, succeeding Becky Enos, who retired last month.

Wilde (rhymes with tiled) has more than 30 years of nursing leadership experience. Since 1995, she was with Mercy and Unity Hospitals, most recently serving as Vice President of Operations/Patient Care and as Chief Nursing Officer. Prior to that, she spent more than 20 years in nursing management with the University of Minnesota Hospital and Clinics. Before moving into nursing leadership roles, she practiced nursing in the areas of critical care, oncology and general medicine.

“We are so fortunate to welcome Kathy to Hennepin at this time,” said Lynn Abrahamsen, CEO. “Her experience is such a good fit for who we are and are becoming, so we couldn’t be more pleased.”

continued on page 2

New CNO *continued from page 1*

“I’m excited to be coming to Hennepin for a number of reasons,” Wilde said. “First, I love the teaching environment and the opportunity to teach people and help them learn. That has always been in my blood. Another thing that impressed me was people’s articulation of mission here at Hennepin, knowing that providing outstanding health care services to a diverse group of patients is why we are here and is what gives us pride in our work every day. This is also a time of great opportunity and challenge for Hennepin in terms of change, growth, and expansion. It will be rewarding to meet people, learn the culture, and see what we need to do to make the hospital even better than it is today.”

Wilde holds a Master of Arts degree in Human and Health Services Administration from St. Mary’s Graduate School and a Bachelor of Arts degree in Nursing from Metropolitan State University. She is a member of the Minnesota Organization of Leaders in Nursing, American Association of Critical Care Nurses, American Organization of Nursing Executives and the Nightingale Society.

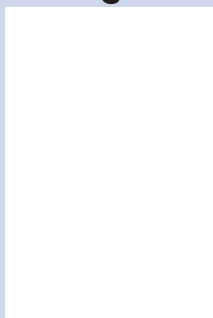
Wilde and her husband of 31 years, Gary, live in south Minneapolis with their two cats, Pepe and Lucy. In free time, they enjoy their cabin, water sports, and golf. Though they are now confirmed joggers, Kathy notes that they have run in many marathons in the past, including the Twin Cities Marathon and Grandma’s Marathon in Duluth. “Small world” connection? She grew up in the west-central city of Morris, Minn., which is also the hometown of CIO Joanne Sunquist, who was a fellow Morris Tiger.

-Shannon Kelly

Growth Briefs

Advertising campaign tells our story and introduces new logo

Starting this month, an advertising campaign is telling the story of Hennepin County Medical Center directly to our community. The campaign includes billboards, bus sides, transit stops, and other tactics that highlight our 120-year legacy and introduces a new visual identity.



Next, we’ll add new designs for ambulances as they are replaced; updated exterior signage that will fully implement the final pieces of the wayfinding system; new brochures and other print materials, and an updated hcmc.org website.

In this issue of the Scanner you will read about the approval of \$80 million in capital funding for a significant renovation and expansion project that will add inpatient beds, replace Family Medical Center with a new facility, and acquire land downtown for a new downtown ambulatory building. The new graphic mark and refreshed visual

imagery provides a strong visual cue that supports our message that Hennepin County Medical Center is entering an era of growth, renovation and expansion. We are proud of our legacy, proud of our talented employees, and prepared to tell others that at Hennepin County Medical Center, *Every Life Matters.*

Critical Care

Emergency Express Care, a fast track care option for patients with minor acute illnesses and simple injuries, opened on April 18. Patients seen in Emergency Express Care generally have shorter wait times and relieve pressure on the staff in the Emergency Department.

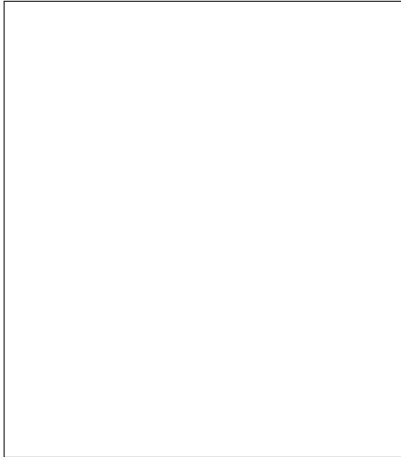
Hyperbaric Medicine featured on cover of M.D. News

A multi-page cover story detailing Hyperbaric Medicine at Hennepin County Medical Center in both critical and non-critical care applications appears in the July issue of M.D. News. The article can be viewed through the intranet through the “HCMC in the News” link on InsideWeekly.

Minnesota Pancreas and Liver Center formed

The Minnesota Pancreas and Liver Center is a multidisciplinary team developed in partnership with Hennepin County Medical Center, Hennepin Faculty Associates, the University of Minnesota Medical Center, Fairview, and University of Minnesota Physicians. The Minnesota Pancreas and Liver Center, home for the Minnesota Pancreas Cancer Program, will provide patients access to the latest in diagnostic techniques, innovative surgical and medical care, invasive gastroenterology, clinical trials, and national registration with the Pancreatic Cancer Care Registry.

New case management system provides seamless service



Vicki Weber, director of Case Management and Social Services

Patients in the Surgery/Trauma/Neurology and Psychiatry units are now being served by case management teams of clinical coordinators, social workers, and utilization review specialists to meet their needs. Vicki Weber, RN/BAN, CMC, director of Case Management and Social Services answers some basic questions about the new approach.

Q & A

Q. What is case management?

A. Case management is a collaborative approach to providing exceptional care in a cost-effective manner while seeking to promote positive health care outcomes. Case management functions include: accountability to influence action in care planning, advocacy for patients and families, collaboration with

the clinical team members, assertive and responsive communication, recognition and accommodation of diversity in our customer base, provision of expertise (mentoring and leadership), ability to impact clinical outcomes, focus on quality improvement initiatives and evidenced-based practice, identification and action planning related to barriers to care, and financial accountability promoting the right care at the right time in the right place.

Q. How is this different from how we have provided services to patients in the past?

A. While Hennepin has assigned individuals to complete various tasks related to case management, there has not been an official case management program. The new model brings teams together to be the juncture point linking the needs of the patients, the intentions of the physicians and the interest of the payers. This triad approach will create improved collaboration and communication with our patients, the nursing staff and our physician teams. The new model also brings an increased focus on quality initiatives, ties our work to the community and looks at how we can impact barriers to providing timely care.

Q. Improving patient satisfaction is one of our goals. How does this approach do that?

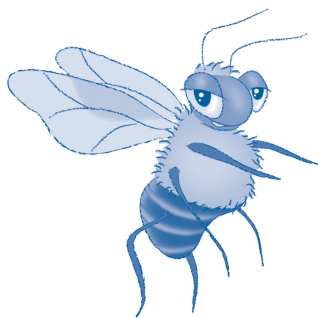
A. Our goal is to provide seamless care to our patients as they move through the health care continuum. Patients with medically complex needs should feel like they have someone in their corner, someone who is the consistent person following them as they navigate through acute care, outpatient care and into the community.

Q. What is the key to making this work for our patients?

A. It is imperative that the triad teams form a partnership that relies on the skills of each member. Our clinical coordinators are the clinical experts providing expertise in the management of care. Our social workers are the psychosocial experts providing expertise in medical and social issues related to continuity of care. Our utilization review specialists are the system experts looking at the quality and effectiveness of practice. Our patients become our partners as we work together to support the best possible clinical outcome. To ensure success, it is important that all members of the Hennepin family embrace this new approach, providing continuous feedback on improvements noted and identifying areas of challenge. Case management must become part of the foundation of providing care and must be intricately woven into the all areas providing care for our patients and families.

Q. Where will it be implemented next?

A. We're currently serving patients in the Surgery/Trauma/Neurology and Psychiatry units. The next identified areas of growth include Orthopedics, Cardiology, Medicine and our Emergency Department. We have a goal of having identified teams covering all areas of the hospital by the end of the year.



Gallup employee survey results now available

By now, most employees should have seen the results of the 2007 Gallup Be Heard survey. More than 2,200 employees answered a range of questions by telephone or online in April to measure employee engagement.

Results were shared with managers in June, with the expectation that they share results with employees for their specific departments - for the medical center - and begin impact planning in the weeks to follow.

“These survey results are a tool to help managers understand what employees are saying, how they feel about working here, and what they need to make this a great place to work,” said Twanya Hood-Hill, director of Organizational Development and Learning.

For the organization overall, scores on most of the questions stayed about the same from 2006 to 2007. Of the 15 questions that had been asked on past surveys at Hennepin, scores on three questions were lower this year, while the rest of the questions had no measurable change in scores.

“Given all of the changes that have been going on here over the past two years, it is a credit to employees and their dedication that the scores didn’t drop on more questions,” said Hood-Hill. “That said, it is important for managers and administration to take this information seriously and to work with employees to improve engagement and satisfaction with Hennepin as a place to work.”

Twanya Hood-Hill, director of Organizational Development and Learning

Hennepin County Medical Center is one of America’s Best Hospitals



For the 11th year in a row, Hennepin County Medical Center ranks among America’s Best Hospitals in the *U.S. News & World Report’s* annual rankings of where consumers can go for the best level of medical care. This year, Hennepin County Medical Center is recognized for its expertise in the treatment of kidney disease.

Hennepin County Medical Center was the first kidney transplant center in the Upper Midwest and approximately 80 kidney transplants are now performed each year. In 2003, the Hennepin

Kidney Transplant Program was identified as one of the top national performers by University HealthSystem Consortium.

“Our strengths in caring for our patients are supported by our wonderful medical staff and employees — professionals who bring us to this level of recognition every year,” says CEO Lynn Abrahamsen. “It’s our privilege to deliver remarkable care and services to our patients, and to be a nationally recognized medical center our communities depend on.”

Chaplaincy, Social Services, and OT among those “all in” with Epic



So many professionals, all attending to the needs of the same patients. So much documentation on those patients. Yet such inefficiency in the communication between disciplines. That was then.

Epic is now. With an electronic health record (EHR), most everyone involved in patient care now has the ability to enter information, as well as to access the information that they need, where they need it, when they need it.

Like in previous “go live” days, on May 1, employees who earlier had only gotten their feet wet with EHR were now in it up to their necks.

Helping to stay focused on the patient

In earlier “waves” only a handful of people in Occupational Therapy really needed to know how to operate Epic well. Now, however, everyone in the entire department is becoming proficient. “It was a major transition,” says Marilyn Haight, senior occupational therapist.

Haight appreciates that Epic makes it simpler to write and stay on track with

care plans for patients. In the past, with paper charts, goals as written and the actual care provided didn’t necessarily match up. “Now,” she says, “with documentation directly below the goal, we’re constantly reminded to fulfill those goals.”

Likewise, in Chaplaincy, Epic makes it easier to stay focused on the patient. In general, says Jim Vogt, chaplain, “Epic allows us to keep an eye on the patients we serve, without bugging staff all the time for updates.”

As for Social Services, using Epic makes communication “more seamless,” says Brian McNeill, senior social worker. “Epic makes it easier to assess patient information and communicate it to others involved in their care.”

Because so many other people are depending on it, employees are encouraged to enter patient information as soon as possible. Of course, the entire system requires that the information entered be accurate and thorough, reminds Haight, “If everyone is keeping it up-to-date, I can get a good view of what’s going on with a patient.”

Taking it a step at a time

As with other “go lives,” there was anxiety about being able to operate the new software, and there were worries about how well the system would work.

For Vogt, implementing the system in stages has been effective in relieving some of the stress. “Going through earlier roll-outs helped me to get mentally prepared and alleviated my concerns this time around.”

The biggest glitch of Wave Five (only one person can enter information into the care plans section at a time) is currently being addressed by Epic personnel. “But, overall,” says Haight, “the system is working out well. I think this wave went easier than most people expected.”

“It improves patient care,” adds McNeill. “And that’s what we’re all interested in.”

Join the team at the Kidney Walk

Join Team Hennepin in the 2007 National Kidney Foundation Kidney Walk and Emergency First Responders Stair Climb Challenge.

Hennepin CEO Lynn Abrahamsen is honorary chair of the 2007 walk, which will be held Sept. 15 at Midway Stadium in St. Paul.

“Hennepin has a history of leadership in both research and treatment of kidney disease, and today we continue to be recognized as one of the best hospitals in the U.S. in treating

kidney disease, so it’s natural that Hennepin takes a lead in supporting the National Kidney Foundation,” said Abrahamsen.

More than 200 walkers are expected to join Team Hennepin. You can sign up online at www.kidney.org.

H I G H L I G H T S

Experts recognized for achievements in sleep medicine

Sleep experts Dr. Mark Mahowald and Dr. Carlos H. Schenck of the Minnesota Regional Sleep Disorders Center were recently named the recipients of the American Academy of Sleep Medicine's (AASM) William C. Dement Award for

Michael H. Silber (center), past president of the American Academy of Sleep Medicine presents Dr. Carlos Schenck (left) and Dr. Mark Mahowald (right) with the William C. Dement Award.

2007. Drs. Mahowald and Schenck were presented with the award at SLEEP 2007, the 21st Annual Meeting of the Associated Professional Sleep Societies (APSS) that took place from June 11-14 in Minneapolis.

Cardiac cath lab renovation complete

The renovation of the cardiac catheterization laboratory is now complete after a year of phased construction. The completed project offers a pleasant new look with a photo gallery wall that displays the talents of Dr. Asinger, Dr. Sharkey, Dr. Goldsmith, Jodi Gaiser and James Bennett. The new Siemens Cardiac/Peripheral suite offers the latest technology available, with flat panel image detector, 3D coronary angiography and 3D peripheral angiography to assist with interventional procedures in the treatment of cardiovascular disease. The renovation included new equipment for the electrophysiology lab and the addition of new hemodynamic equipment.

Thanks, Covanta Energy!

On Tuesday, June 19, staff had the opportunity to thank representatives from Covanta Energy for a very special delivery — a truckload of more than 3,500 toys from Kids Wish Network. Covanta Energy donated \$3,000 to ship the toys to Minneapolis from the Kids Wish headquarters in Holiday, Fla. The toys are distributed to children in the Emergency Department, Pediatric Clinic, Inpatient Pediatric Unit and Pediatric Intensive Care Unit. Caregivers distribute the toys to children who are experiencing a challenging medical condition or situation.

Cath lab conference room named

On Tuesday, May 1, the catheterization lab conference room was renamed the "Richard Asinger Cardiovascular Conference and Learning Center" to commemorate Dr. Asinger's many years of service to Hennepin County Medical Center and dedication to the education of numerous medical students, residents and cardiology fellows and staff. On hand for the celebration were friends, family and colleagues.

Ernest Ruiz Emergency Medicine Resident Library

On May 29, the library in Emergency Medicine was renamed the "Ernest Ruiz Emergency Medicine Resident Library" in honor of Dr. Ruiz, Hennepin County Medical Center's first Chief of Emergency Medicine. Dr. Ruiz served as Chief for 20 years (1972-1992).

"Nurses in the Military" display

The Hennepin County Medical Center History Museum along with the Minneapolis Medical Center Historical Library have put together a remarkable display about "Nurses in the Military," located in the lower level of the Green Building. The display features uniforms, photos and other memorabilia from past wars as well as recent wars in Kuwait and Iraq. Hennepin has had nurses serving in the military in every war since the Spanish American War in 1898.



Hennepin County Medical Center

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Lynn Abrahamson, CEO

Public Relations Department

Tom Hayes, Director
Christine Hill, Editor/Writer
Sarah Hulting Ksiazek, Staff Writer
Shannon Kelly, Staff Writer
Karen Olson, Art Director
Kathy Roberts, Staff Assistant