How far have we come?  
Where are we headed?

Harry R. Jacobson, M.D.  
December 15 and 16, 2005
Achievements 2005

- Launched Leadership Development Institute
- Established Credo Behaviors
- Set Pillar Goals
- Revamped Patient Satisfaction
- Built Leadership Goals
- Refocused on Quality
- Hardwired Thank You Notes, Rounding, Key Words, Managing Up
- Developed and Implemented Reward and Recognition
- Reconnected with our Purpose
- Started the Process of Culture Change
Pillars Goals

- People
- Service
- Quality
- Growth
- Finance
Pillar Goals - People

- New Community Survey Planned – March 2006
- Results 2004
- Drivers of Overall Satisfaction: Fun, Respect, Recognition
- Drivers of Retention: Quality Workplace, Benefits, Worthwhile Work
- Reward and Recognition: New R&R Web-Based Tool, Success Sharing Bonus, Staff/Manager Thank You Notes
- Responsiveness: Rounding, Make a Difference
- Retention & Turnover Rates
## Pillar Goals – People
**Reward & Recognition**

<table>
<thead>
<tr>
<th></th>
<th>Non-Monetary</th>
<th>Monetary</th>
<th>Total $</th>
<th>Average $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Credo Rewards</td>
<td>525</td>
<td>103</td>
<td>$14,919</td>
<td>$28</td>
</tr>
<tr>
<td>Pillar Rewards</td>
<td>401</td>
<td>93</td>
<td>$14,494</td>
<td>$36</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>926</td>
<td>193</td>
<td><strong>$29,413</strong></td>
<td><strong>$32</strong></td>
</tr>
</tbody>
</table>

(4% of Total Pool)
### Pillar Goals – **People**

#### Turnover Rates

<table>
<thead>
<tr>
<th>Goal</th>
<th>2004</th>
<th>2005</th>
<th>2006 YTD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Center</td>
<td>16.36%</td>
<td>16.23%</td>
<td>7.21%</td>
</tr>
</tbody>
</table>
Pillar Goals - Service

- New Patient Satisfaction System
- New Physician Satisfaction Tool
- HEART Service Recovery
- Credo Behaviors
## Pillar Goals – Service
### Patient Satisfaction

**Overall Quality of Care - July to November**

<table>
<thead>
<tr>
<th>Survey</th>
<th>% Excellent</th>
<th>National Percentile</th>
<th>Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult IP</td>
<td>63.9</td>
<td>90.2</td>
<td>90&lt;sup&gt;th&lt;/sup&gt; Percentile</td>
</tr>
<tr>
<td>VCH IP</td>
<td>73.9</td>
<td>90.3</td>
<td>90&lt;sup&gt;th&lt;/sup&gt; Percentile</td>
</tr>
<tr>
<td>Adult ED</td>
<td>55.3</td>
<td>86.4</td>
<td>90&lt;sup&gt;th&lt;/sup&gt; Percentile</td>
</tr>
<tr>
<td>VCH ED</td>
<td>67.0</td>
<td>99.3</td>
<td>90&lt;sup&gt;th&lt;/sup&gt; Percentile</td>
</tr>
<tr>
<td>OP Surgery</td>
<td>75.3</td>
<td>95.3</td>
<td>90&lt;sup&gt;th&lt;/sup&gt; Percentile</td>
</tr>
<tr>
<td>OP Technical</td>
<td>70.6</td>
<td>96.8</td>
<td>90&lt;sup&gt;th&lt;/sup&gt; Percentile</td>
</tr>
<tr>
<td>Clinic Visit</td>
<td>67.1</td>
<td>73.7</td>
<td>90&lt;sup&gt;th&lt;/sup&gt; Percentile</td>
</tr>
</tbody>
</table>
Pillar Goals – **Service**
Patient Satisfaction

**Likelihood to Recommend Vanderbilt - July to November**

<table>
<thead>
<tr>
<th>Survey</th>
<th>% Excellent</th>
<th>National Percentile</th>
<th>Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult IP</td>
<td>67.3</td>
<td>93.1</td>
<td>95th Percentile</td>
</tr>
<tr>
<td>VCH IP</td>
<td>78.5</td>
<td>96.6</td>
<td>95th Percentile</td>
</tr>
<tr>
<td>Adult ED</td>
<td>57.9</td>
<td>87.2</td>
<td>95th Percentile</td>
</tr>
<tr>
<td>VCH ED</td>
<td>74.0</td>
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<td>71.0</td>
<td>80.8</td>
<td>95th Percentile</td>
</tr>
</tbody>
</table>
“Overall, I am satisfied with the quality of my medical education”
2005 AAMC Medical School Graduation Questionnaire

“Overall, I am satisfied with the quality of my medical education”

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Bar chart showing the percentage of students who strongly agree with the statement from 2003 to 2005.
Pillar Goals - Quality

- Established Quality Strategic Plan
- Set Quality Goals for PCC’s
- Participation in All Major Public Reporting
Pillar Goals – **Quality**
Strategic Plan

- Develop an Integrated “Dashboard” of Key Measures Including Quality
- Define Quality Outcomes and Processes by Major Service
- Publish Quality Data on Web
- Build a Value-Driven Case for Premium Pricing

\[
\text{Value} = \frac{\text{Quality}}{\text{Cost}}
\]
Major Differences Exist Between the Top Performers and Others

Quality and Safety - Overall Score

Group #1 (n = 5)
Median Score = 67.18%
Max = 68.14%
Min = 65.12%
AMCs included: University of Wisconsin, Mayo Clinic, Brigham & Women's, Rush, Truman

Group #2 (n = 19)
Median Score = 62.38%
Max = 64.28%
Min = 61.64%
AMCs included: 1, 2, 4, 7, 10, 14, 22, 26, 34, 39, 43, 49, 53, 54, 71, 76, 81, 89, 234

Group #3 (n = 23)
Median Score = 60.22%
Max = 61.35%
Min = 59.49%
AMCs included: 3, 5, 6, 9, 15, 19, 21, 28, 35, 40, 55, 56, 57, 67, 69, 70, 77, 78, 79, 83, 92, 179, 290

Group #4 (n = 18)
Median Score = 58.68%
Max = 59.17%
Min = 57.23%
AMCs included: 8, 12, 13, 17, 23, 33, 42, 46, 48, 58, 72, 73, 80, 82, 84, 214, 236, 240

Group #5 (n = 14)
Median Score = 56.05%
Max = 56.91%
Min = 46.37%
AMCs included: 29, 32, 37, 38, 45, 47, 52, 60, 61, 74, 87, 91, 163, 218

For a 500-bed AMC performing at the median to move into Group 1 would result in 150 fewer deaths per year.

Source: 2005 University HealthSystem Consortium
Pillar Goals - Growth

- Met All Goals for Clinical Volume in FY 2005 and YTD 06
  - Admissions
  - ED Visits
  - Surgical Procedures
  - Clinic Visits
- Grew Sponsored Research
  - FY 2005 up 10.1%
  - Well Ahead of Plan
  - Fastest Growing
We are Exceeding Our Research Growth Plan

School of Medicine - Total Awards

- Projection compared to Plan -

Actual Compared to Plan

FY04: 250
FY05: 300
FY06: Actual: 318
FY07: Actual: 350
FY08: Actual: 400
FY09: Actual: 450

Business Plan (11/03) vs. Actual & Projected

Actual data per Office of Research FYE Annual Report
## Strongest NIH Research Award Growth Rate

<table>
<thead>
<tr>
<th>Rank</th>
<th>2000-2004 compound average annual growth rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>20.4%</td>
</tr>
<tr>
<td>2</td>
<td>15.2%</td>
</tr>
<tr>
<td>3</td>
<td>14.4%</td>
</tr>
<tr>
<td>4</td>
<td>14.0%</td>
</tr>
<tr>
<td>5</td>
<td>12.7%</td>
</tr>
<tr>
<td>6</td>
<td>12.7%</td>
</tr>
<tr>
<td>7</td>
<td>12.3%</td>
</tr>
<tr>
<td>8</td>
<td>11.9%</td>
</tr>
<tr>
<td>9</td>
<td>10.2%</td>
</tr>
<tr>
<td>10</td>
<td>10.2%</td>
</tr>
</tbody>
</table>

**Top 25 average (1)**

10.3%

Source: NIH, top 25 medical schools
Pillar Goals - Finance

- Margins in FY 2005 Exceeded Budget
- Challenges Ahead…
  - Capacity Constraints
  - Uncompensated Care
Vanderbilt University Medical Center Financial Results

(millions)

Excludes Extraordinary Items and Vanderbilt Health Plans.
Pillar Goals – Finance Capacity Constraints

• Focus on Targeted Growth
  – Services that Only Vanderbilt Offers
  – Services with Greatest Margins

• Improve Thruput
  – Reduce LOS
  – Hasten Discharges

• Use Fixed Assets Intensively
  – Extend Clinic and OR Hours
  – Expand Saturday Services
Pillar Goals – **Finance**
Uncompensated Care

**Self Pay Cases**

<table>
<thead>
<tr>
<th></th>
<th>7 to 10/04</th>
<th>7 to 10/05</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>200</td>
<td>446</td>
<td>223%</td>
</tr>
<tr>
<td>Trauma</td>
<td>66</td>
<td>167</td>
<td>253%</td>
</tr>
<tr>
<td>Ortho Trauma</td>
<td>20</td>
<td>53</td>
<td>265%</td>
</tr>
<tr>
<td>Cardiology</td>
<td>13</td>
<td>40</td>
<td>308%</td>
</tr>
</tbody>
</table>

**Approach:**

- Add Medically Needy to TennCare
- Seek Higher Essential Access from TennCare
- Get DSH Payment from Feds
## LDI IV Linkage Grid

<table>
<thead>
<tr>
<th>Assignment</th>
<th>Activity</th>
<th>Person Responsible</th>
<th>Complete By</th>
<th>Date Completed</th>
<th>Date Supervisor Reviewed</th>
</tr>
</thead>
</table>
| **Progress and Pillar Results** | Review Elevate progress with all in area:  
  a. describe actual results to expected  
  b. pillar results  
  c. vision for 2006                                                                                                                          | All Leaders        | 1/31/2006   |                |                          |
| **High, Middle, Low**  | Share key learning points related to HML with staff to introduce concept:  
  a. why is HML important to a manager and staff  
  b. how Vanderbilt Medical Center’s current performance tools and processes relate to HML                                                                  | All Leaders        | 1/31/2006   |                |                          |
|                         | Complete the online survey for HML support emailed from Human Resources.                                                                                                                                     | All Leaders        | 1/09/2006   |                |                          |
| **Continued: Tough Questions** | Review and learn Tough Question responses from previous LDI and use with staff in communication.                                                                                                      | All Leaders        | Immediate – on-going |                |                          |
| **Credo Behavior**     | Review the new credo behavior tool kit – “I Respect Privacy and Confidentiality” – available on Elevate web site on 12/21/06. Present/review with staff and faculty.                                               | All Leaders        | 1/31/2006   |                |                          |
| **Recognition and Reward** | Use “Recognize” to motivate staff performance to the next level                                                                                                                                             | All Leaders        | Immediate – on-going |                |                          |