# 4 departments1 process

April-May 2014





### **Our Organization**

- Wheaton Franciscan Healthcare ministries in Illinois, Iowa, and Wisconsin
- Franciscan Ministries housing for underserved in Colorado, Illinois, Iowa, and Wisconsin







### **Our Organization**



Affiliated Physicians 2,172



Long-Term
Care Facilities





Employed 518



Home Health 2 Agencies



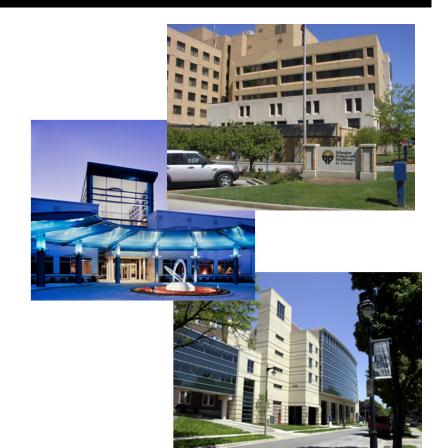
Associates **17,229** 





### **Wisconsin Sites**

- Wheaton Franciscan Healthcare
  - All Saints
  - Franklin
  - St. Francis
  - Elmbrook Memorial
  - St. Joseph
  - Midwest Spine and Orthopedic Hospital and Wisconsin Heart Hospital
  - Wauwatosa (OP)
  - Brown Deer (OP)
- JV Midwest Orthopedic Specialty Hospital



### Mission, Vision, Values

#### **MISSION**

Wheaton Franciscan Healthcare is committed to living out the healing ministry of Jesus by providing exceptional and compassionate health care service that promotes the dignity and well being of the people we serve.

#### **VISION**

Our health ministries will be recognized in each community we serve for superior and compassionate patient service, clinical excellence, as the health care employer of choice, and the preferred partner of physicians.



# Housekeeping

- I'm sharing everything so all of the charts, forms and graphs are available for you in open files.
  - Drop me a line and e-mail you the presentation.
- WFMG = Wheaton Franciscan Medical Group
- We break our markets into three.
  - North
  - Central
  - 3. South



### Let's find out about us

- Who are we?
  - Physician Relations, Provider Development
  - Physician Recruiters,
  - Strategic Planners
  - Marketing
- Where do we work?
  - Medical Group a division of the hospital
  - Hospital
  - Stand alone Medical Group



# Who helps who?

### Your Leadership

- I report to a Director
- I report to a VP
- I report to a SVP
- I report to the President



# **Planning**

To what degree are <u>you</u> involved with the development of the Medical Staff Development Plan (MSDP)?

- I'm at the table
- The person I report to is at the table
- We don't have a MSDP
- We don't have a table

#### Your MSDP

- 1 year plan
- 2 year plan
- 4 year plan
- 5 or more year plan





Recruit

MSDP

Pipeline Report



On-Boarding tele-conference and Report



Orient

Agenda

Checklist



Retain
Practice Building
Dash Board



# definitions

#### Recruiting-

From the moment a position is approved to the day the physician starts

Retention-

6 months before the physician starts until they are at the 50<sup>th</sup> % of AMGA

On-Boarding-

From the moment a contract is signed to the day the physician starts

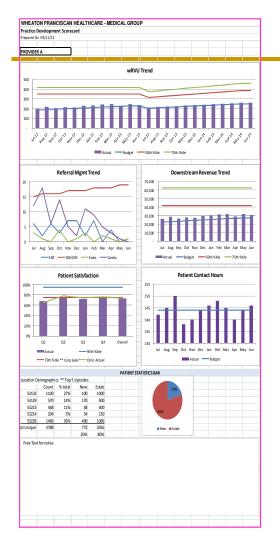


Orientation-

From the moment the start date is selected to the day they see their first patient

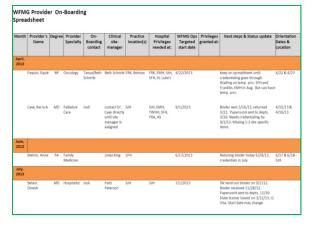






North Market Medica	al Staff Development Plan			updated 5/13/2	013
Start Date		Aug-13	Aug-14	Aug-15	
Fiscal Year	FY 2013	FY 2014	FY 2015	FY 2016	
Primary Care					Comments
SJH-POB 6th Floor		SJH-POB FP (1)	SJH-POB FP (1)	SJH-POB FP (1)	Needed this fall
Wauwatosa 201		1 (IM or FP)			growth/replacement
EIM		1(IM)			replacement
Sussex		1(FP-DO)			growth/replacement for Davis
Pewaukee		1 (FP)			growth
Sub Total	0	5	1	1	
Specialists:					
Allergy					Track All. Center of Milw. aging group. Zache spoke with them 2/1/13
Cardiology		0			
Dermatology					Berman & Herszenson signed as Part Time at Brown Deer and Cap & Lily

				Recruiter	bw
	cruiting Pipe	line Report	t	Lastupdated	6/7/2013
Definition of the report: Pipeline = Recruiters	have identified these candid	fates as viable and an	in various sta	ges of the intervie	w process
PHYSICIAN NAME	SPECIALTY	WFM G LOCATION	MARKET	Recruiter	Status and next steps
	DERMATOLOGY	Atrium	SOUTH	Carol Kamenar	On the MSDP - Recruiting has not started as the Business Case has not been developed/approved.
	PRIMARY CARE	Sussex Family	NORTH		On the MSD P
Schwelbe, Justin MD	Family Medicine				6/07/13 2014 resident in La Crosse Mayo program. Spoke to Dr. Bradley, Will visit over the symmer.
	PRIMARY CARE	SJH POB	NORTH		On the MSDP
Dhawan, Aman MD	Family Medicine				6/07/13 Currendy practicing in northern illinois. Wife has family in WI and would like to move. Has several years of practice experience.
	FAMILY MEDICINE/INTERNAL MEDICINE		Central		Business cases approved by Dan Mattes
	GASTROENTEROLOGY	Atrium	SOUTH	Carol Kamenar	On the MEDIA
Hees, Jeson - 2014	QI CI	2017 Sering	3001H	Catoricaniena	Aurora (Dr. Musselman's spouse) - 2014
Daram, Sumanti - 2013	ĠI	3817 Spring			3/25 -E-mail stating we were finitezing PD & would send. 3/14/13 - Spoke with candidate. Awaiting PD details. 2/28 - Previously at St. Joes as a hospitalist. Glowing eval from Dr. V. Kumer.
Sud. Anchel	GI	3817 Spring			5/23/13 - S/W candidate. Training does not include ERCP.
Samuel, Erica - 2014	ĠI	3817 Spring			428. Siv genddaw. Will do a 4m chief Fellon Vear. No ERCP training or desires. 3228 - Telle tag. Will contact neck ward. 31515-1 and the same from cendidate - recontacted and switching a response. 317313 - Left message for cardidate to centact me. 2722/13 - MCW program. Dr. Samuels desirate.
	HEMATOLOGY / ONCOLOGY	Cancer Center	SOUTH		On the MSD P
Colucci, Philomena	Hem/Onc	3811 Spring St.		Carol Kamenar	5/30 - At this juncture - will make offer to Rayani. 4/29 - Wating for Dr. Rayan's visit and then will make decision. 4/18 - Visit today, candidate. Arranging visit for 4/18, 1/4 -
	Hem/One	3811 Spring St.		Carol Kamenar	6/10 - Continuing negotations: 5/23 - Conducting referencing process: 4/29 - Visit scheduled for 5/2: 4/10 - Initial
Rayani, Shayan					interview accomplished. Handed off to Dr. Engel.
Rayani, Shayan Saghir, Fasil	Hem'One	3811 Spring St.		Carol Kamenar	interview accomplished. Handed off to Dr. Engel. 644 - E-mail to him to keep in the loop. 5/24 - Decision to make offerto Dr. Rayani. 5/23 - Dinner with candidate. Not available for work. until December. 5/13 - E-mail from

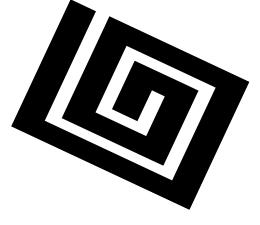




# Goal (description of todays presentation)

To create a seamless process that glides the physician through our internal maze.

Our goal is to have the physician trained, oriented, acclimated and able to see and bill for patients their first day on the job.





# How was our system created?

- Created by mistake, out of pure self-preservation or c.y.a.
  - Confusion
  - Catastrophes
  - Calamities
  - Circular blaming



### WFMG Physician Recruiting Timeline

- Date of hire, minus 20 months Sen. Leadership Creates
   MSDP
- Date of hire, -19 months Ops creates Business Case
- Date of hire, -18 months- Post position internally/externally
- Date of hire, -17 to -11 months source candidates
- Date of hire, -15 to -10 months arrange for site visits
- Date of hire, -10 months finalize & sign contracts
- Date of hire, -9 months On-Boarding binder sent
- □ Date of hire, -2 to -3 months receive MSO/WFMG approval.
- Date of hire, First two days Physician Orientation
- □ Date of hire, +2 days Physician sees 1<sup>st</sup> patient



# **Process**

					RETENTION							
						<b>ORIENTATIO</b>	N					
				ON-BOARD								
		RECRUITI	NG									
Positi	on	Contract		6 month's		Orientation		Physician			at the	
Approved		Signed		to start				sees 1st			50th %	
				date				Patient				



# Senior leadership sets the table

#### MSDP

- Meet with leadership
- Develop the 3 year plan
- The plan is hosted on a secure intra-net site with limited access
  - Updated monthly



#### North Market Medical Staff Development Plan

updated 1/3/14

Calendar Start Date	asap	7/1/2014	7/1/2015	7/1/2016	7/1/2017	
Fiscal Year	FY 14	FY 2015	FY 2016	FY 2017	FY 2018	
Primary Care						Comments
SJH-POB 6th Floor	(1)FP					Replace Bates-
Orange Box NE Strip mall		2(FP/IM) 1(OB)				plus FP mentor
Wauwatosa 201	2 (IM or FP)		1 (IM/FP) Ignace			some patient preferences
Ogar Office 5650 N. Green Bay Ave.	1(FP) 1(OB)					Office has a total of 3 provider offices, 5 exam rooms.
EIM	1(IM)					transfer central market physician
Sussex	1(FP-DO)					growth/replacement for Hughes/Davis
117th			1(OB) TP	1(OB) JE	1(OB) RL	replace
New Berlin	FP					replace Moldvan
SJH 6th floor	OB internal					internal move
Pewaukee	Hildabrandt signed					
Sub Total	8	3	2	1	1	



				Recruiter	bw	ck
<b>WFMG Rec</b>	ruiting F	Pipeline	Report	Last updated	12/9/2013	######
Definition of the report:						
Pipeline = Recruiters ha	ve identified thes	se candidates as	viable and are in	various stages of	of the interview process.	
PHYSICIAN NAME	SPECIALTY	WFMG LOCATION	MARKET	Recruiter	Status and next steps	Replace (R) or New (N)
	HOSPITALIST	SPRING ST	SOUTH		Approval by PET due to	3-N
					departure of AHC physicians	1-R
Juarez, Lisa - immed	IM	3801 Spring St.		Carol Kamenar	12/30 - Not B/C. Will be taking Boards 8/14 and will be doing L/T until that time. Will contact her to see if she is interested in L/T at All Saints. 12/2 - scheduled to chat next week. Preparing offer. 10/22 - Visit. Evals being	
Ross, Jamal - 2014	IM	3801 Spring St.		Carol Kamenar	12/30 - He & wife have decided on a faith based system closer to Chicago. 12/6 - Gathering evals.	
Patel, Kiran - 2014	IM	3801 Spring St.		Carol Kamenar	12/6 - Took position at Monroe clinic. 11/27 - Dr. Ansani in process of contacting. 11/6/13 - Initial Interview. Handed off to Dr. Ansani.	
	HOSPITALIST	St. Francis	CENTRAL		Approval per D. Mattes	2-N
Orakzai, Muhammad MD	Hospitalist	St. Francis	Central	Brandon Wilson	12/03/13 Dr. Orakzai has the offer of employment; in the review phase.	
Upadhyay, Bishwas MD	Hospitalist	St. Francis	Central	Brandon Wilson	12/03/13 In the process of scheduling a visit.	



# Pipeline Distribution

- Updated every week
- We use it at our weekly Recruiter meetings as the agenda
- Send to
  - Medical Group Admin
  - Medical Group Physician leaders
  - Medical Group Ops leaders
  - Hospital Presidents, VPMA's
- It helps to stop:
  - what's the status with.....
  - where are we on......



# definitions

#### Recruiting-

From the moment a position is approved to the day the physician starts



6 months before the physician starts until they are at the 50<sup>th</sup> % of AMGA On-Boarding-

From the moment a contract is signed to the day the physician starts



Orientation-

From the moment the start date is selected to the day they see their first patient





# **On-Boarding**

- After the contract is signed
  - On-Boarding Binder Sent
    - It has everything.....everything





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### Once the Binder is returned ...

- **\$**
- We track on the On-Boarding Spreadsheet
- This helps to eliminate questions from our colleagues:
  - Where are they in the process?
  - When can they start?
  - Can they start sooner?
  - Why can't they start sooner?
  - What else does the MSO need from them?



# **On-Boarding**

- Bi-weekly tele-conference:
  - 15 minutes
  - Attendees:
    - MSO's, HR, Payroll, WFMG Ops, Recruiters, Physician Relations, Orienteers, IT, VPMA's, schedulers, Lab, Risk Management,
  - We keeping questioning until everyone understands who has the next step?



Month	Provider's Name	Degree	Provider Specialty	On- Boarding contact	Clinical site- manager	Practice location(s)	-	WFMG Ops Targeted start date	AGENCY	Privileges granted at:	steps &	Orientation Dates & Location
	Chaleby, Kutaiba (Kurt)	MD		Barb Jones/ Jenny Moore (phy. Support	Barb Jones	SFH	SFH	1/13/2014	Barton & Assoc		Pre-app done. Awaiting WI License.	

March, 2014										
	Abad Santos, Jose	MD	Peds	Olga	Matthew Barber	3807 Spring AS	3/10/2014	AS	Signed contract received 12/30/13	3/10 & 3/14/14

May 2014							
Arora, Jaspal	MD	OCC MED Olga	Matthew Hwy 20 Barber	AS	5/15/2014	AS	 5/15/14 & 5/16/14



# definitions

#### Recruiting-

From the moment a position is approved to the day the physician starts



From the moment a contract is signed to the day the physician starts

#### Retention-

6 months before the physician starts until they are at the 50<sup>th</sup> % of AMGA



#### Orientation-

From the moment the start date is selected to the day they see their first patient





### Physician Orientation Checklist

- Mission, Vision, and Values
- Human Resources
- Physician Compensation
- Corporate Compliance & HIPAA
- Infection Control
- ING
- Risk Management
- Quality Improvement/Mgmt
- Hospital Transcription (if applicable)
- Philanthropy
- Library Services
- Medical Staff Office (if needed)

- Human Research Protection Program
- Patient Experience
- Portal Training
- Coding
- Lab Services
- PLUS Training
- Health Information (Medical Group)
- Emergency Department
- Care Management
- Pharmacy
- PACS Training
- SOAME EDUCATION



#### **Provider Orientation Survey**

We hope you enjoyed your orientation! Please complete this survey and return it at the end of your orientation.

Name					
Date of Orientation:					
Location of Orientation:					
Please use this scale	e to rate the effectiveness (Check the ap	of the follow opropriate b	wing component ox)	ts of the Orie	entation.
4= Excellent	3= Good	2:	= Fair	1=	Poor
		4	3	2	1
How would you rate yo communication?	our pre-orientation				
Was there sufficient ti each topic?	me allotted to cover				
How satisfied were you presenters?	u with your				
Overall, how would yo orientation?					
What topics were the n	nost helpful and/or rele	vant?			
What topics were the k	east helpful and/or relev	/ant?			
Is there anything we	could do to improve fut	ture orient	ations?		

Thank you for your thoughtful completion of this survey. You reinion greatly appreciate Financiscan Healthcare feedback will be thoroughly reviewed.

# definitions

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# Day 2 ...

□ I heard they're not happy.

They're not as busy as they need to be?

□ I heard patient satisfaction was low?

□ Isn't (any dept but yours) taking care of that?



### Retention

- Who is responsible for retaining physicians in your organization?
- If one persons name does not instantly come to mind ... you have a problem
  - Recruiters
  - PR
  - Marketing
  - Physician Relations
  - Senior Leaders
  - Operations
  - Physician Services
  - Physician leaders
  - Strategic Director
  - HR



# Retain...do we have a problem?

- What is your turn-over rate, thus what is your retention rate?
  - Rate of:
    - PCP's
    - Specialists
    - Hospitalists



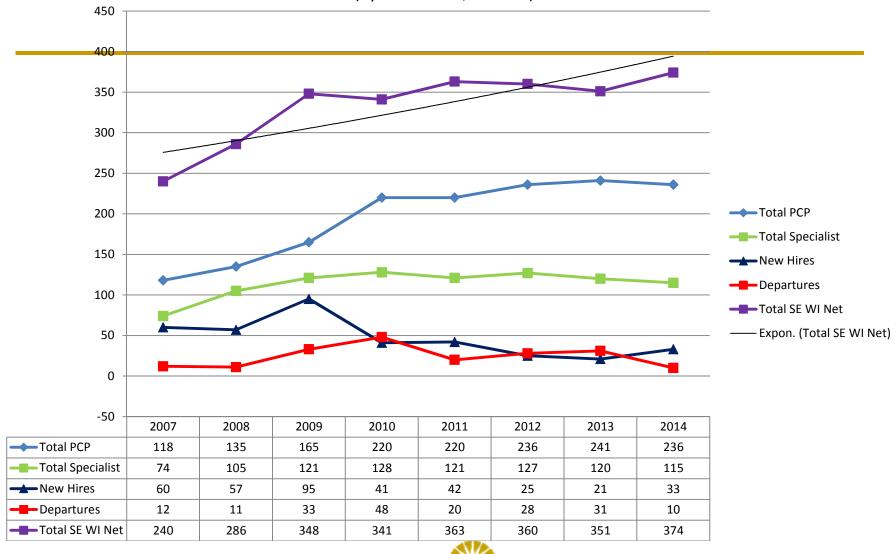
# Retain: do you have a problem?

- What % is attributable to things we can control?
  - Income, practice environment, support, technology, community immersion, leadership, lack of cultural fit, better call, CME, seeking more money, more flexible hours, work-life balance
- What % is attributable to things we can't control?
  - Retirement the AMA reports 25% of their membership is 60 plus
  - moving closer to family, leaving medicine,



#### **SE Wisconsin WFMG Employed Physician Count**

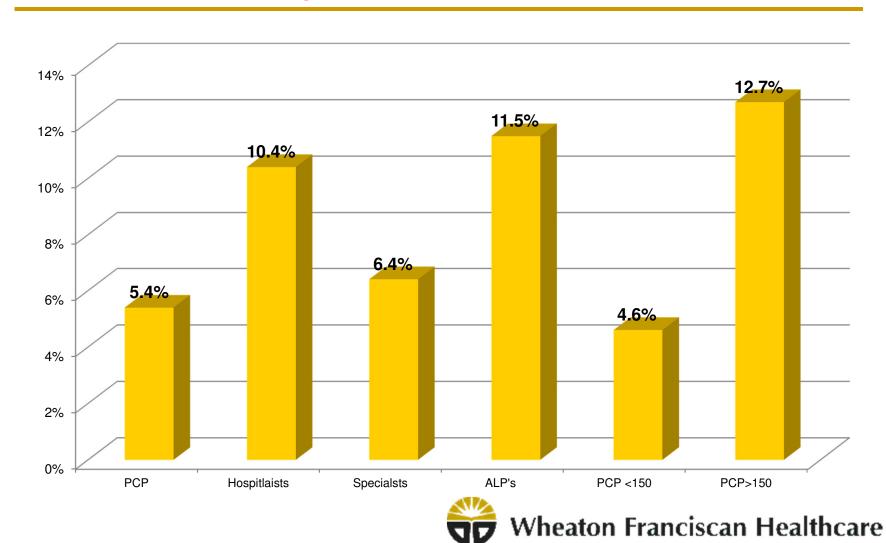
(by headcount, not FTE)



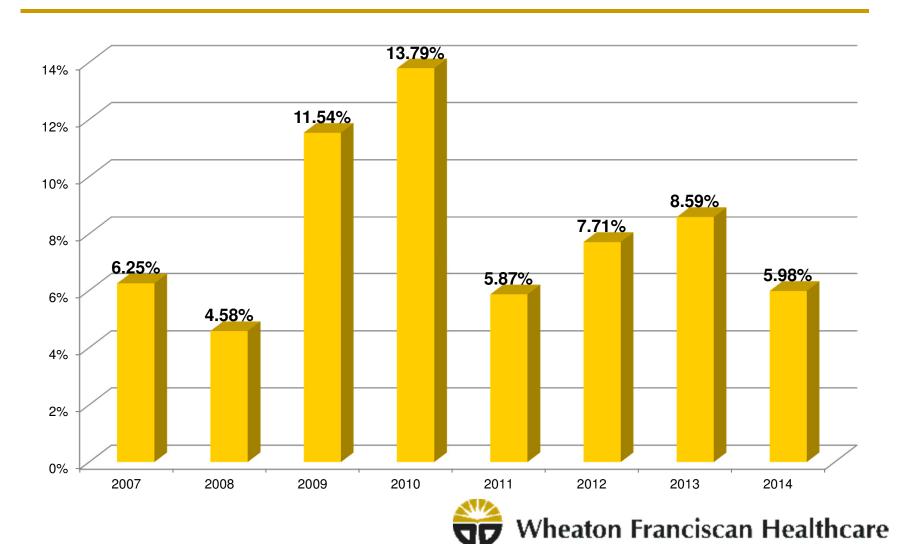


## National Physician Turnover

(2013)



### WFMG Turnover



### Physician Retention — multifaceted atmospheres

#### Collegial

Are their colleagues helpful and encouraging?

#### Growth

Above and beyond CME is there motivation and professional access to learn? Are there opportunities to serve in positions of leadership?

#### Clinic

Are clinical staff supportive, encouraging and helpful?

#### Family

Are they grounded in hobbies, school, place of worship/meditation?

#### Community

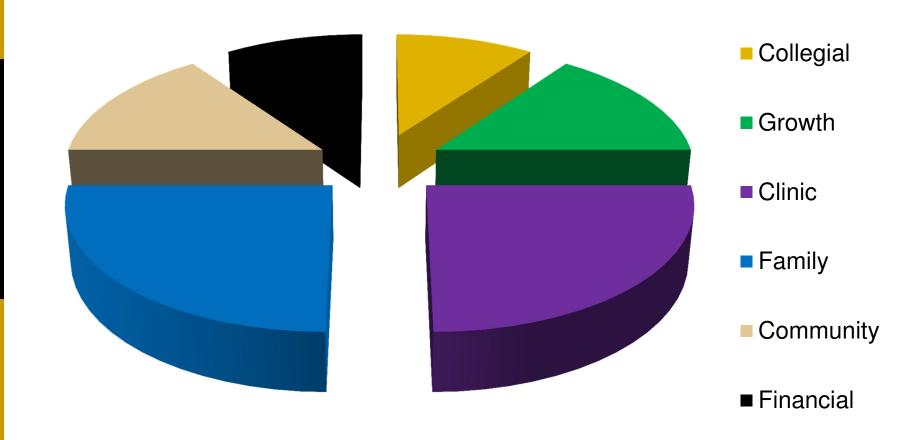
Is the family immersed participants or on the sidelines?

#### Financial

> Are the projected and anticipated financial benchmarks being achieved?

Wheaton Franciscan Healthcare

# How do you weigh what is the most important element for each Physician?





# How do you weigh what is the most important element for each Physician?





## What does each physician want?

- Ask them?
  - Naaaaah
- Surveys, questionnaire's
  - In-house
  - Outsource
    - Athena Assessment Quotient



### Numeric: Physician Relations & Marketing

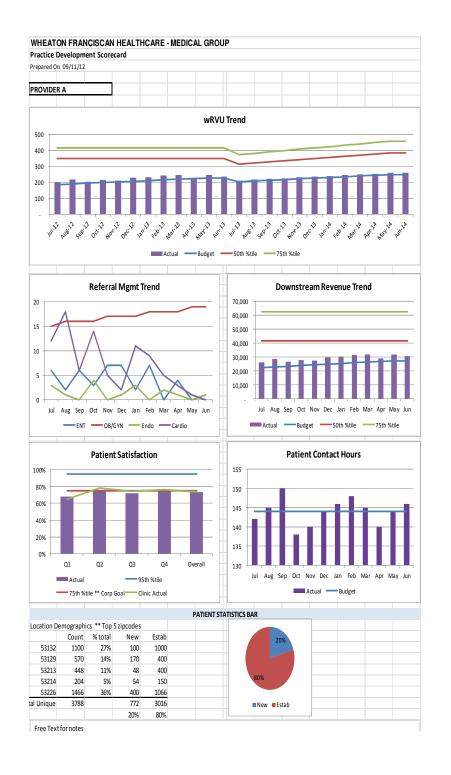
- One to six months before the start date:
  - Quarterback resource meetings with marketing, community relations, PR to plan for the new physicians start.
    - Gather data
    - Reaffirm business case goals for the physician
  - Participate with the On-Boarding Calls.
  - For continuity the Phy. Relations people lead Orientation
- After the hire date:
  - Partner with the new physician to track growth



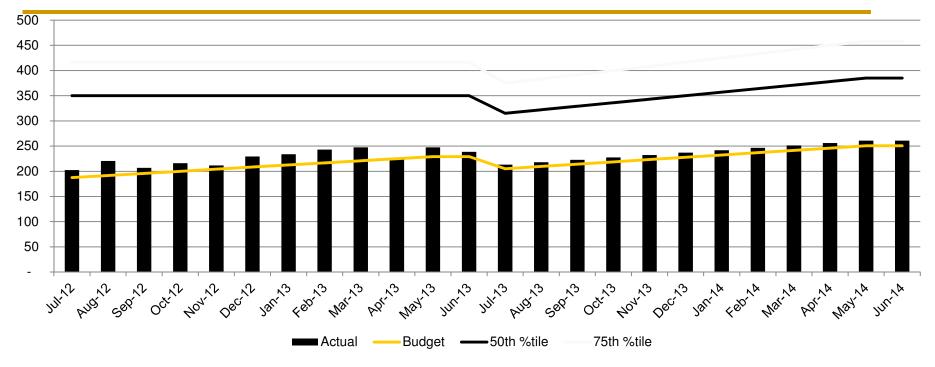
## Retaining by the numbers

- Monthly meetings
- Physician Relations, Physician, Ops
- 15 minutes
- Agenda w/goal
  - check numerical benchmarks
  - (in the process of modifying the dashboard to include quality values)
  - Action items with deliverables, assigned w/deadlines



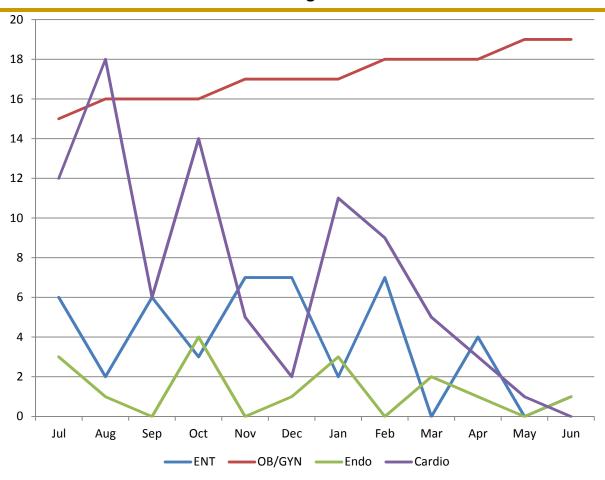


#### **wRVU** Trend



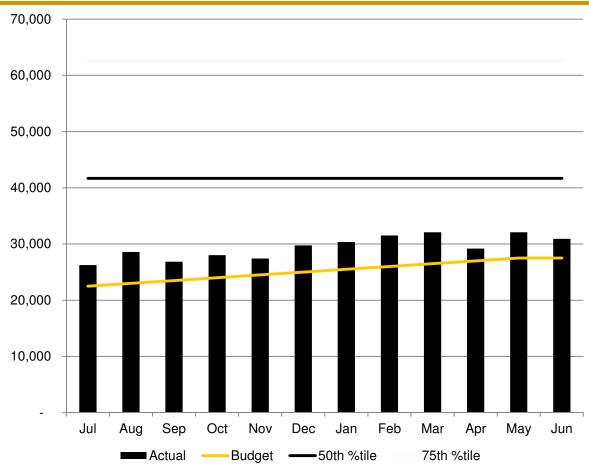


#### **Referral Mgmt Trend**



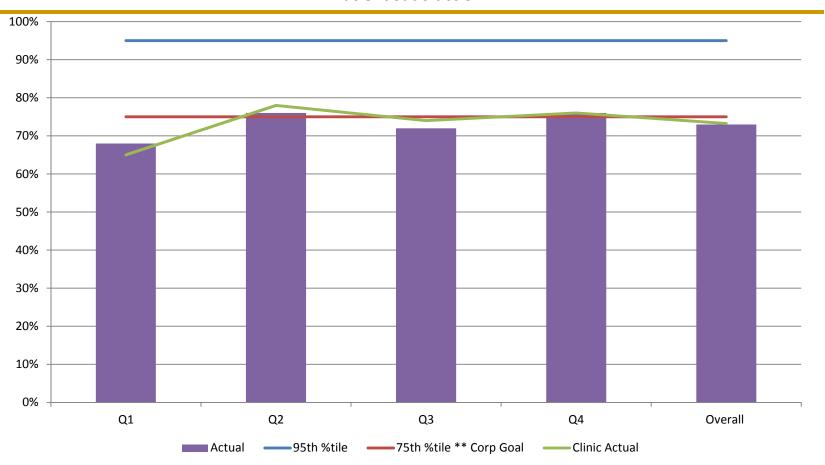


#### **Downstream Revenue Trend**



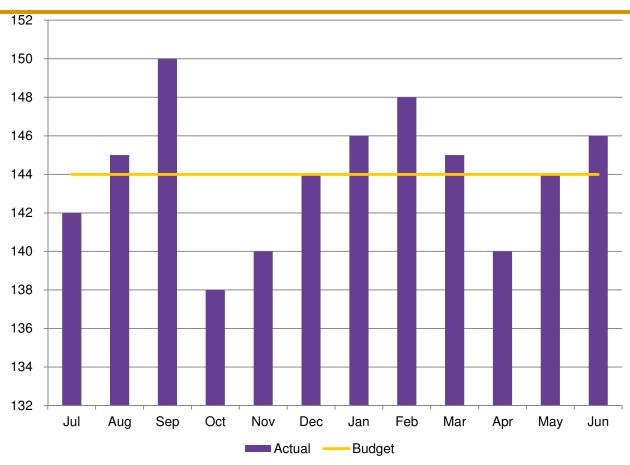


#### **Patient Satisfaction**



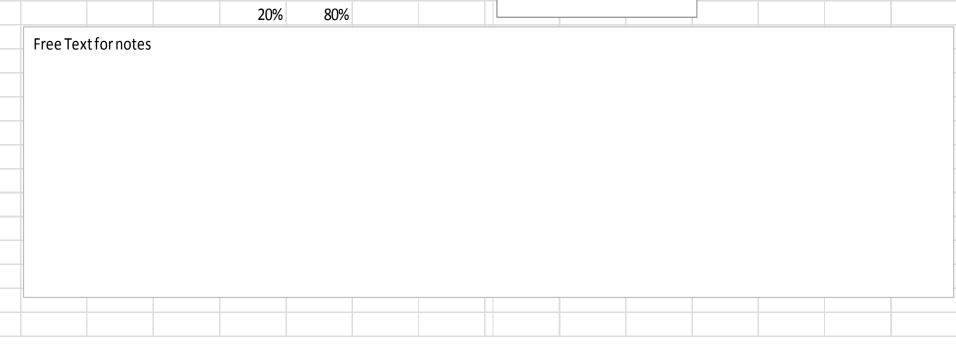


#### **Patient Contact Hours**





					PATIENT STATIST	ICS BAR		
Location De	mographi	cs ** Top 5	zipcodes					
	Count	% total	New	Estab		20%		
53132	1100	27%	100	1000				
53129	570	14%	170	400				
53213	448	11%	48	400				
53214	204	5%	54	150		80%		
53226	1466	36%	400	1066				
otal Unique	3788		772	3016		■ New ■ Estab		
			20%	80%			_	



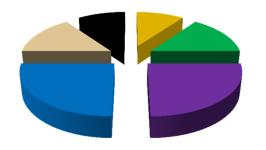
### So what? Now what?

- Post meeting the physician knows......
  - Distance to their guarantee.
  - Are their rvu's similar to their colleagues.
  - Is their quality on the mark.
  - Do patients like them
  - How many new patients do they see a month and where do they live.
  - How much do I financially contribute to the medical group and or the health system.
  - What's my plan for growth

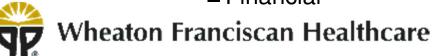


# Hey Jim ... you skipped over the other pieces of that retention pie chart?

- Home life, family, community, collegial, clinical, leadership.
  - Work in progress
    - Looking for a physician partner for a beta program and a deeper dive.



- Collegial
- Growth
- Clinic
- Family
- Community
- Financial



# Curious: P-2-P Mentoring?

### Physician-to-Physician Mentoring = retention:

- We have a P-2-P mentoring program with just physicians
- We have a P-2-P mentoring program with just administrators
- We have a P-2-P mentoring program involving both administrators <u>and</u> physicians.
- We don't have a program



#### **Recruiting-**

From the moment a position is approved to the day the physician starts

Retention-

6 months before the physician starts until they are at the 50<sup>th</sup> % of AMGA On-Boarding-

From the moment a contract is signed to the day the physician starts



From the moment the start date is selected to the day they see their first patient





### 1 minute 30 seconds left

#### 1. Gather your buckets

- For those with a similar processes but reside in different department buckets:
  - Survey stakeholders to see who comprehends a problem.
  - Invite your biggest roadblock to co-chair the new team
  - Create your own definitions, expectations and timeline.

#### 2. Blend

- MSDP, recruiting, orientation and on-boarding.
- At least pretend you are in sync with each other

#### 3. Retain

- Mentorship
- Monitor



### <u>Jim.Zache@wfhc.org</u> 414-447-2282

