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About FYA

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With every issue, FYA provides insights into the topics that concern healthcare leaders today and the challenges that will be faced in the near future.

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Separate Recognition from Competition

By Fred Lee

In every hospital where I facilitate focus groups, one common theme is sure to come up. "We need more recognition from our leaders." Or "We never hear our manager tell us when we do something good, only when we don't do something right or when we don't do enough." Or "We never feel appreciated for how hard we work."

People who exemplify the values of the organization and do the special things that generate customer and employee loyalty should be recognized. But recognition is not dependent on competition. Linking recognition to competition is a notion from our high-school days when we were in an independent reality. Competing for recognition is not what employees are talking about. They are hungry for appreciation, not contests. They want a word of encouragement, not to become teacher's pet. Why is it hard to see that you can have one without the other? I believe it's because of the "top honors" and "dean's list" syndrome that has been such a potent, and justifiable, part of the conditioning we received during our educational experience. It's hard to break out of well-established paradigms.

Many hospitals have adopted a caught-you-caring recognition system, which has been shown to increase expressions of appreciation and praise dramatically. Essentially it provides a handy card for recognizing any employee's efforts to provide special service or go above and beyond job expectations. So far, so good. But I have seen three variations on this basically good idea that are useless or counterproductive.

1. The cards are recorded and tracked so that rewards can be given, preferably by top management, to the people getting the most cards. (Remember the airline attendant?) I have already addressed the negative consequences of attaching competitive rewards to something like this.
2. Anyone can give a card directly to an employee whenever the giver sees something worth recognizing or appreciating. But what good is a card in this case? Can't the giver of the compliment just say thank-you whether or not they have a card? Besides, employees are not saying that their peers are not showing appreciation. They are saying that their managers, whose opinions are so important, are the ones who are so stingy with recognition.

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Separate Recognition from Competition (Continued...)

3. Kits with cards and tokens are given to managers, who are encouraged to give them to employees that he or she "catches" doing the right thing. Again, what does this do, besides remind managers that they need to praise people when they do a good job? Not much, because managers who are stingy with praise will be stingy with cards and tokens. Nothing significant will change and managers will soon go back to their normal behaviors. In a year the program will be finished.

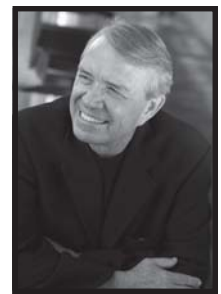
The system of recognition that I like-and have seen still in full operation and working beautifully after 10 and even 15 years-goes like this: Boxes (like suggestion boxes) with compliment cards are placed conspicuously in key locations, such as by the elevators and in waiting rooms. Anyone can use them, patients or employees. Someone is assigned to collect them at least once a week (more often if possible), and deliver them to the president in a small hospital or to the appropriate vice presidents in a large hospital. Top management reads all compliment cards and adds a note of thanks or just a signature indicating it was noticed. The cards are then routed through the chain of command to the employee. Presidents or vice presidents might select a couple of cards once in a while to deliver personally by hand. No prizes are given. The integrity of the employee's intrinsic motivation is preserved. Management has to stay

involved because the cards keep coming. They can't opt just to quit reading them. And when the card is received, the employee feels the rush of appreciation, made more powerful because the appreciation arrives through management, not as direct mail from the giver of the compliment.

A program like this is self-renewing and will go on successfully forever as long as someone keeps collecting the cards and sending them through management. That's because there is no reason to game the system for rewards or leave it to individual managers to keep it going, and the only motive for both giver and receiver is sincere appreciation. Since recognition is never at the expense of somebody else, there is no rivalry. And since there is no extrinsic reward, there is no cause for cynicism about people's motives. People want to be appreciated for doing the right thing, not given a prize. If I stop to help someone change a flat tire, I am not looking for a reward and almost certainly don't want money for my kindness, which would demean my motives.

Fred Lee is a highly popular speaker; and the author of "If Disney Ran Your Hospital." His book was named the 2005 book of the year by the ACHE.

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About



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Wave the Flag

By: Rick Kneipper, Chief Administrative Officer and Co-Founder of PHNS

OK, I admit it-I'm really into patriotic stuff, particularly great American holidays such as Independence Day a.k.a. the Fourth of July. Picnics, BBQs, clambakes, baseball games, boating, fireworks etc.--a great holiday weekend (not quite as great if you didn't get Monday off, but still great). But indulge me in a bit of patriotism/history.

Let's start with an excerpt from the epitome of this great American holiday, the Declaration of Independence, which was introduced by Richard Henry Lee of Virginia on June 7th, 1776, and was adopted by the United States Congress on July 4th, 1776, (although most of the signatures weren't in place until August, 1776, with the last signer not being added until 1781):

"We hold these truths to be self-evident, that ALL MEN ARE CREATED EQUAL, that they are endowed by their Creator, with certain unalienable Rights, that among these are Life, Liberty and the pursuit of happiness...."

The significance of this holiday was well expressed in the following quote from the *Virginia Gazette* on July 18th, 1777:

"Thus may the 4th of July, that glorious and ever memorable day, be celebrated through America, by the sons of freedom, from age to age till time shall be no more. Amen and Amen."

And then consider the following excellent summary of the significance of Independence Day by President Woodrow Wilson at an address at Independence Hall, Philadelphia on July 4th, 1914, (a few weeks before World War I broke out in Europe):

"My dream is that as the years go by and the world knows more and more of America, it...will turn to America for those moral inspirations that lie at the basis of all freedom...that America will come into the full

light of the day when all shall know that she puts human rights above all other rights, and that her flag is the flag not only of America but of humanity."

Whatever your political persuasion, whatever you think of the war in Iraq, whatever you think about our difficult immigration issue, however we resolve our healthcare challenges, this is OUR "land of the free and the home of the brave", and we are "One nation under God, indivisible, with liberty and justice for all."

Let's be very proud of our country, our heritage and this wonderful holiday that symbolizes all of that...and of course let's enjoy the midsummer holiday time.



I would like to hear your comments.
Send them to:
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About



FYA - For Your Advantage is brought to you by TrendLeader Connections. The function of TrendLeader Connections is producing educational materials and seminars that help healthcare executives differentiate between fads and trends; and making connections with "Trend Leaders" within the healthcare industry.

We are committed to delivering new perspectives and ideas, creative and innovative healthcare solutions, provocative concepts and quality educational materials to today's healthcare leaders. We want to concentrate on "what comes after what comes next."

Going Paperless-The VA Did It

We've all heard and read about the institutions across the country that have gone paperless. The Indiana Heart Hospital in Indianapolis and PeaceHealth in Bellevue, Washington, get a great deal of attention.

About 90 percent of the estimated 30 billion health-care transactions done each year in the U.S. still occur by phone, fax or mail. This is largely because the nation's doctors and hospitals each collect data in their own way. This makes it difficult to share information. And at \$20 million to implement a state-of-the-art information technology system, it is out of range for most U.S. hospitals.

The one organization that has invested in IT, and has gotten the most dramatic results, is the Veterans Administration health system. It is the nation's largest health network, with 1,300 hospitals, community clinics and other facilities. Today, the VA beats most other medical providers on dozens of quality indicators, such as administering regular cancer screenings or prescribing beta-blockers to heart-attack survivors.

At the heart of the transformation is a networked software program called Vista. It runs a powerful electronic medical record-keeping system that acts as the VA's brain.

The improved care at the VA has had its impact on veterans. This year the agency expects to treat 5.4 million patients, up sharply from the 2.9 million people it treated a decade ago. Customer satisfaction with the veterans' health system, as measured by an independent resource, has exceeded that for private health care in each of the past six years.

Equally important, the VA has achieved all this while containing costs. As more vets have come in the door, the agency's overall budget has nearly doubled since 1996, to \$30 billion. But the cost per patient has held steady at roughly \$5,000. Over the same period, total health spending for the average American shot up more than 60 percent, to \$6,300.

While the VA isn't perfect, it now outranks other providers on most quality measures. By using technology, the VA has proved that quality can actually save money.

The agency's new potential proved vital after Hurricane Katrina, which destroyed the paper records of thousands of vets. But Vista's electronic health records meant that VA physicians could treat the vets as they would normally. Every patient's health record was there at the touch of a few keystrokes.

Most of the credit for the dramatic change at the VA is given to Kenneth W. Kizer, a former Navy diver, emergency medicine physician and top health official in California, Kizer,

54, became the VA's undersecretary for health in 1994.

Everyone agreed that the system needed radical treatment. Soon after taking over, Kizer and his top managers decided to carve the country into a dozen territories, each with its own budget, managers and performance goals. Every patient got a primary-care doctor. And over the next several years the agency shifted away from an expensive, hospital-based model to one that emphasized outpatient community clinics and primary care.

As part of the overhaul, he reengineered the VA's \$1-billion-a-year pharmacy, creating a single list of approved medications. To free up pharmacists and to reduce errors, each hospital pharmacy installed systems to automatically refill prescriptions. Kizer then used the savings from these changes to create Vista's electronic health record. Vista's origins date back to the 1970s-long before programs to help doctors treat patients were commercially available. The agency's programmers began designing applications to help schedule appointments, track lab results and perform other routine tasks. By 1989, the VA had two dozen applications installed at 169 sites nationwide.

Sensing the potential of Vista, Kizer spent hundreds of millions rewiring hospitals and purchasing new computers, allowing distant facilities to talk to one another over speedy connections. VA programmers added dozens of new software programs to the growing suite of applications. By 1999, Kizer and his team had installed Vista at every VA facility in the country.

Today the numbers prove how the attention to detail that technology can provide pays off in better health. The VA's pneumonia vaccination rate, lagging at 29 percent in 1995, has risen to become an industry-leading 94 percent in 2005. The number of at-risk vets screened for cervical cancer has increased from 64 percent in 1995 to 91 percent. The increased vaccination rate has reduced hospital admissions by 4,000 patients per year.

By 1999, the VA system was clearly on the mend. The number of patients reached 3.5 million that year, up from 2.8 million in 1994. Kizer had cut more than half of the 52,000 hospital beds in order to open 300 new community clinics, helping the agency treat 700,000 more patients.

One obstacle remains for two-thirds of the nation's hospitals in their attempt to duplicate the success of the VA: affording that \$20 million price tag for an up-to-date computer system.

(Thanks go to FORTUNE magazine. It was a resource for this material.)