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Here to Support the Program Directors, Customers, and Clients



2017 Corporate Office: Front row from left to right: *Christina Butler, Melissa McNamara, Rena Smith, Tess Ulloa, Dr. Caskey, Denise Santana, Kareema Johnson, Anna Quici, Laura Butler, Tod Mammuth, Ken Carabello.* Second row from left to right: *Michael Caskey, Matt DiGirolamo, Tom Boshell, Rick Robinson, Mike Hanna, Tom McParland, Camille Tanner, Shirley Greenlee, Sue Nayda, Gretchen Gibbs, Carol Wertley, Judith Ann Shields, Cathy Oblea, Anh Lucci, Dana Knipe, Trish Piontek, Maxine McBride, Debi Snyder.* Third row from left to right: *Ian Castronuovo, Paul Anderson, Andy Chauhan, Mike Busby, Todd Graybill, Chris Baglio, Jerry Jennings, Melinda Monastra, Michael MacRae, Kathy Gerhart, Abby Yankawitz.*

Enhancing Our Service Culture and Quality

We have really focused on enhancing our service culture at the corporate office. Two years ago, we met as an entire corporate office service group and developed written standards for our customer service and posted these throughout the office. This year we are sending each program site a copy along with our refreshed, “Code of Conduct”, so you and your staff can strategically place and evaluate these established standards. There is also an annual corporate office services survey, so be sure to inform your manager if any standard is not met.

Employee Engagement

We are committed to a workplace approach resulting in the right conditions for all staff of Liberty to give of their best each day, commit to their Liberty goals

and values, and contribute to Liberty’s success with an enhanced sense of their own well-being.

Customer Experience

We are committed to persistent and actionable intent when it comes to improving our customers’ experience. This goal requires each of us to do our jobs as efficiently and effectively as we can while allowing for thoughtful access to our services and mindfulness concerning risk to Liberty, our customers, and clients. We are in the process of completing our 2017 Customer Experience Satisfaction Survey and a majority of our customers rate their experience as, “very good to excellent”. Each of us should “take a moment of excellence” for these results and try even harder to understand and meet our customers’ goals and expectations.

Medical Center

Everyone should protect PHI

Liberty's IT committee is responsible for IT activities. The tactical focus most recently is HIPAA Security and Privacy.



IT Committee: Camille Tanner, VP of Human Resources; Eli Back, Security Officer; Judith Ann Shields, Privacy Officer; Paul Anderson, Data Analyst; Rena Smith, Office Manager; Tod Mammuth, General Counsel; Tom McParland, Chief Financial Officer; Sue Nayda, Sr. VP/Chief Operating Officer

“If you think compliance is expensive, try **non-compliance**.”

Former U.S. Deputy Attorney General
Paul McNulty

HIPAA: Enforcement Highlights

The U.S. Department of Health and Human Services

Office of Civil Rights (OCR):

Since the effective date of the Privacy Rule in April 2003, OCR has received over 167,321 HIPAA complaints and has initiated over 857 compliance reviews. OCR has resolved 97% of these cases (162, 564):

- OCR has investigated and resolved over 25,497 cases by requiring changes in privacy practices & corrective actions
- Since October 31, 2017 the OCR has settled or imposed a civil money penalty in 52 cases resulting in a total dollar amount of \$72,929,182.00
- In another 11, 355 cases OCR investigators found no violations occurred
- Additionally, in 23, 734 cases the OCR intervened early and provided assistance without the need for an investigation *Remember always make a 'good faith' effort as it relates to HIPAA Privacy & Security*
- In the rest of the completed cases (101,978) OCR determined that the complaint did not present an eligible case for enforcement: e.g. cases alleging a violation by an entity not covered by HIPAA; the complaint is untimely or withdrawn from the filer; the activity described does not violate HIPAA rules since the Privacy Rule permits such a disclosure

HIPAA compliance issues most frequently investigated are:

1. Impermissible uses and disclosures of PHI
2. Lack of safeguards of PHI
3. Use or disclosure of more than the 'minimum necessary' PHI
4. Lack of administrative safeguards of e-PHI

Reference:
<https://www.hhs.gov/hipaa/for-professionals/index.html>

Key Performance: Principles and Methodology

Written by: Judith A. Shields, RN, MSN, SSGB, SSLB, SSBB, MCBB

“A measure is as good as the actions it identifies for improvement.”

— Angelo Scangas, President & CEO of Quality Support Group

Prevent Rather than Inspect

Liberty is on a journey to excellence and best practices. The healthcare environment is constantly changing and Liberty must pro-actively review processes that may have been poorly designed or executed in a way that does not result in the best outcome for our clients. Our programs' performance initiatives should be regularly reviewed and ensured that each aspect of the initiative is systematically planned and carried out, rather than putting out fires process-by-process or case-by-case. In all of our environments, we must respond rapidly to shifting market forces, payer mixes, and our customers' goals. Consequently, we need to take a proactive inventory of our current processes, measurements, outcomes, and expected changes so that we do not fall behind our competitors, our customers' expectations, and standards of best practice. Take time to outline your risk and benefits of your current performance program and indicators and analyze if you did the right things the first time, if you know the costs of improving your processes, and if the quality of the care you provide is really best practice.

Measure Against Approved Standards

Having sensitive tools to measure the performance of your care and services is really at the heart of excellence; but to get the best use of your tools, you must use the data to improve performance. Results should be communicated and explained to all levels of your program staff so that your performance efforts are focused on the care and services you provide. Be sure that you have spent time identifying whether an opportunity for improvement exists and study that performance opportunity thoroughly before you begin the measurement phase.

Continually Improve

You want to start by determining the underlying factors associated with the improvement opportunity you identify. One way is to select and test an improvement

intervention, observe the effects of the intervention, then analyze the effects of the intervention.

Take Accountability

The first step toward accountability is either implementing the intervention or redesigning the intervention. Secondly, ensure that the results of implemented interventions are communicated clearly and simply so that all members of the work group understand their part in the pathway to excellence. Finally, program leadership must periodically monitor the intervention.

Part III of the competency evaluation review audit confirms that all Joint Commission HCSS Standards have been met both pre-hire and annually.

The final portion of the competency evaluation review audit is a checklist to ensure that there was no aspect of the audit that was not completed correctly.

Know the Cost of Process Improvement

Knowing the cost of processes should not be neglected since it is a key element of efficiency. You can get started in reviewing cost data with length of stay, total unit/program charges, and indirect costs of vital processes. Whatever method you choose, get started at looking at the cost of the care provided in a way that is meaningful to your program and can be compared to outcomes.

References:

- Kopf, James A. et al., Patient Safety Meets Corporate Compliance. HCPro, Inc., 2004*
- Benchmarking in Health Care. Joint Commission, 2000.*
- Advanced Performance Improvement for Hospitals. Joint Commission, 2000.*
- Framework for Improving Performance. Joint Commission, 1994.*

Healthcare Business Corner

2017 Q4 R.A.I.S.E. Award Recipient:

Stacy Riegsecker

Award presented by: FulCare Behavioral Health

We are pleased to announce that Stacy Riegsecker is the 2017 Q4 award recipient of the Liberty Healthcare R.A.I.S.E. Customer Service Award! Her nominator let us know, “In November of 2017, Stacy Riegsecker was selected amongst the Fulton County Hospital’s ‘best of the best’ employees to serve as a ‘Service Excellence Advisor’. This honor was bestowed upon Stacy, not by management, but by the front line staff of FCHC for her ‘terrific attitude and demonstrated commitment to patient satisfaction’. Stacy has a strong work ethic and an obvious commitment to quality and patient satisfaction. This honor demonstrates that Stacy’s hard work and ‘can do’ attitude are embraced by leadership and peers alike. Stacy graduated from the SEA class on December 6th of 2017 and will serve as a Service Excellence Advisor for the entire year of 2018. Let’s celebrate Stacy’s success and honor her for her commitment to excellence.”

2017 Annual R.A.I.S.E. Award Recipient: Jermaine Winborne

Award presented by: NCIA Management

We are pleased to announce that Jermaine Winborne is the 2017 annual award recipient of the Liberty Healthcare R.A.I.S.E. Customer Service Award! Jermaine Winborne was the Q3 winner. His nominator from Q3 wrote, “Jermaine has exuded the greatest example of customer service. He is always polite and friendly with every call he takes as a Call Center Representative. He shows great empathy to our callers and goes above and beyond to try and help them, despite them being disgruntled most of the time. He is such a positive energy for the team and always helps his teammates to see the positive in every situation. It is rare that you do not see a smile on Jermaine’s face. This has been Jermaine’s personality from day one. Everyone internally knows how great Jermaine is at delivering excellent customer service, and we got feedback from our key stakeholder that they feel the same way. During the Provider Focus Group Meeting, where we invite stakeholders to come in and provide feedback, they all unanimously praised Jermaine for his excellent customer service skills. He is truly an asset to the Call Center and Liberty.



Stacy Riegsecker presented with her 2017 Q4 R.A.I.S.E. Customer Service Award.

Pictured from left to right: Stacy Riegsecker (Registered Nurse), Aaron Harmon (Program Director)



Jermaine Winborne presented with his 2017 Annual R.A.I.S.E. Customer Service Award.

Pictured from left to right: Jill Elliott (Director of Operations), Jamie Henderson (Call Center Supervisor), Jermaine Winborne (Annual Winner and Call Center Representative), Laurie Patton (Operations Department Manager), Lyneka Judkins (Executive Director)

Healthcare Business Corner- Continued



Pictured above from left to right: Aaron Harmon, RN (Program Director), Stacy Riegsecker, RN, Starla Jagers, RN, Sarah Ackerman, Technician, Shelly Brink, LSW, Deb Boger, Office Manager, Donna Keiser, RN, Kathryn Palmer, CNS, and Lauren McNanny, Music Therapist

Ohio Fulton County Health Center Outstanding Patient Experience Results

As Tiffany Siegel, MSN, APRN, FNP-C, Chief Nursing Officer of the Fulton County Health Center put it, “keep on rocking”.

She recognized the inpatient geropsychiatry unit staffs’ work with patient experience. In the most recent 3rd party “Spotlight Report”, based on the Center for Medicare & Medicaid Services (CMS) survey of patients who stayed in the Fulton County Health Center inpatient psychiatric unit, the staff were placed in the top 95th percentile of all psychiatric hospitals nationwide. Staff performance in Q4 was near perfect at 97% patient satisfaction!

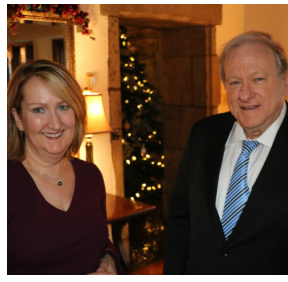
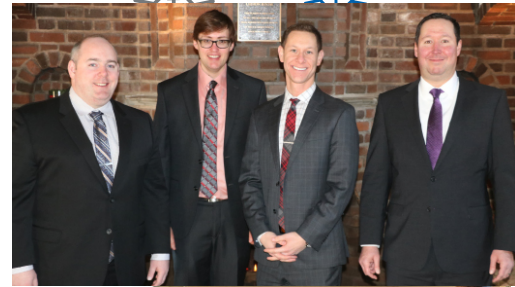
Illinois Treatment and Detention Facility: A Pathway to Excellence

On October 27, 2017, Dr. Shan A. Jumper, Ph.D., Executive Director, Illinois Treatment and Detention Facility was designated a Fellow by the Association for the Treatment of Sexual Abusers for his significant contributions in the field of sexual abuse prevention and treatment. Dr. Jumper and his team of clinicians share this honor for the years of dedication to research, publication, and treatment of one of the most difficult populations where health outcomes have improved. This esteemed group of clinicians, led by Dr. Jumper, have brought their knowledge and skills to this esteemed association and have worked hard internally to be able to achieve the honorable status of Fellow.



Healthcare FUN Corner

PA Corporate Office wishes you & your families a very happy holiday season and the best in 2018!





Centralized Quality Services Work Group

If you have any questions or additional comments about the centralized Quality Services Work Group, please contact your direct supervisor so they can forward your comments or concerns directly to us.

- Adam Deming, Executive Director, INSOMM
- Camille Tanner, VP, HR Admin Support and Benefits Management
- Debi Snyder, Payroll Manager
- Hugh Sage, Executive Director, OK Robert M. Greer Center
- Ian Castronuovo, VP, Recruitment
- Ken Carabello, VP, Operations
- Judith Ann Shields, VP, Performance Corporate Compliance/Privacy Officer
- Kevin Rice, Executive Director, CA ROC Program
- Shirley Greenlee, Controller
- Sue Nayda, Senior VP/Chief Operating Officer
- Trish Piontek, Director, Marketing

Medical Peer Review Work Group

The Medical Peer Review Work Group has two openings for a board-certified physician in internal medicine and/or family practice and forensic psychiatry which we hope will be filled as soon as possible. Please notify your supervisor if you have a recommendation.

The following are members of our Medical Peer Review Work Group:

- Chairperson: Dr. James Michael Pontius, OK Greer, Family Medicine, BC, QA
- Co-Chairperson: Judith Ann Shields, RN, MSN, Diplomate, VP, Performance, Corporate Compliance/HIPAA Privacy Officer
- Gretchen Gibbs, RN, MSN, FNP, Corporate Director, Operations
- Dr. Charlie Sproule, VP of Operations, Administrative Member

The Safety Corner: Business Continuity/Disaster Planning

For this winter quarter, the safety committee has developed a business continuity/disaster plan for the corporate office in Bala Cynwyd, PA. The safety committee's chairperson is Camille K. Tanner, M.Ed. VP, Human Resources.

The members include: Gretchen Gibbs, RN, MSN, NP, Director of Operations; Steve Bryant, BA, Executive Director, Illinois, Safety 1st Conditional Release Program; Kyle Shore, M.A., Director of Community Services, Indiana Sex Offender Management and Monitoring; Lesley Hofberger, Human Resources Manager, Oklahoma Robert M. Greer Center; Jana Fransen, HR Manager, North Carolina Independent Assessments.

For 2017-2018, the committee will use the corporate plan as a template for all programs to create their own business continuity/disaster plan.

Any Liberty Healthcare employed or physician sub-contracted staff member that has concerns about the safety or quality of care provided by Liberty Healthcare should:

- Contact his or her supervisor
- Call the Employee Help Line at 1-800-653-7174
- Contact the Corporate Compliance/Privacy Officer: Judith Shields, RN, MSN
Phone: 610-668-8800 ext. 193 Email: judith.shields@libertyhealth.com
- Contact the Joint Commission Health Care Staffing Services (HCSS)
Website: <http://www.jointcommission.org/aboutus/contactus>
Phone: 1-800-994-6610

