

90 Day Plan

Name: Kim Blumenfeld		Leader: Patricia Stumbo		Department: 5025 Cancer Center Clinic		Division: 1021 Cancer Center		Year Ending: 2009	
Pillar	Yearly Goal	90 Day Goal	Action Steps	Manage Up	Results				
Service		Third Quarter Goal	Third Quarter Action Steps		Third Quarter Results				
10 %	<p>Improve overall Outpatient Oncology satisfaction ranking relative to other facilities. Improve percent from 25 to 40.</p> <p>Last observation by Press Ganey by quarter Baseline: 25% ranking</p>	<p>Improve overall outpatient</p> <p>Improve oncology satisfaction relative to all other facilities from a rank of 25 to 40</p>	<p>Rounding at every opportunity throughout the facility and focusing on the infusion clinics to increase patient satisfaction there which will increase overall satisfaction results.</p>		54				
Service		Third Quarter Goal	Third Quarter Action Steps		Third Quarter Results				
20 %	<p>Improve patient satisfaction ranking relative to other facilities for cost center 5057. Maintain percentage of 40% or greater.</p> <p>Last observation by Press Ganey by quarter Baseline: 40%</p>	<p>To improve patient satisfaction to 40</p>	<p>Visit or phone call each new patient to our system.</p>		51				
People		Third Quarter Goal	Third Quarter Action Steps		Third Quarter Results				
10 %	<p>Reduce employee turnover Oncology Services for CC 5057.</p> <p>Data from Report 2 Web Year to date percentage Baseline: 5.7%</p>	<p>To reach goal of less than 10%</p>	<p>Rounding on staff monthly, addressing needs quickly</p>		2.18				

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Quality		Third Quarter Goal	Third Quarter Action Steps		Third Quarter Results				
10 %	Reduce medication errors in cost centers 5057 and 7262. Data from PSN Last Observation Baseline: 4	Reduce medication errors to 0	Reinforcing the 5 rights and two patient identifiers Evaluating PSN reports and consulting individuals involved.		9				
Quality		Third Quarter Goal	Third Quarter Action Steps		Third Quarter Results				
10 %	Improve documentaion of pain assessment in cost centers 5057 and 7262 as evidenced in monthly medical record audit. Increase to 95%. Last observation Baseline: 46%	To have 100% pain assessments documenting every time	Audits and re-education as needed						
Financial		Third Quarter Goal	Third Quarter Action Steps		Third Quarter Results				
20 %	Maintain YTD operating margin for cost center 5057 Last Observation: Year to date results from revenue and expense report Baseline: 19% positive operating margin	To maintain stated operational margin of 19%	Using staff effectively and maintaining adequate staffing for patient safety Reducing agency staff by floating staff from Orange Grove to North		47.3				

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Pillar	Yearly Goal	90 Day Goal	Action Steps	Manage Up	Results
Growth		Third Quarter Goal	Third Quarter Action Steps		Third Quarter Results
20 %	Increase the percentage of new patient MRNs in our patient oncology cost centers from 4.8% - 6% excludes Orange Grove. Last Observation Baseline: 4.8% (excluding Orange Grove)	Increase new patient (MRNs) in direct oncology cost centers (excluding Orange Grove) to 4.8% Personal goal to fill all 62 treatment spaces at North and Orange Grove	Recruiting and retaining infusion staff to keep all available spaces open to accomodate treatment. Build the relationship between North and Orange Grove to share treatment patients and maximize infusion space.		20