On April 4, UNC Health Care took its first step toward the goal of “one patient ID, one problem list, one medication list and one bill” for each patient.

Go-Live #1 at UNC Medical Center, Chatham Hospital and UNC Physicians Network West practices was one of the largest in Epic history and, by all measures, was extremely successful. Go-Live #1’s success is the result of more than 16 months of work by co-workers across UNC Health Care, including core team members, super users and subject matter experts. I want to thank them for their efforts and dedication.

While problem solving and stabilizing activities continue for Go-Live #1, our attention now turns to Go-Live #2 at Rex Healthcare and UNC Physicians Network East practices. Training is underway for co-workers and physicians, and we are hard at work incorporating lessons learned from Go-Live #1 into our Go-Live #2 plans. I’m sure we will have more lessons from Go-Live #2 that will guide us as we continue our Epic@UNC implementations across UNC Health Care.

In addition to Go-Live #2 work, we are already mapping out an Epic@UNC implementation strategy for the rest of UNC Health Care. In May, we will meet with leaders at High Point, Caldwell, Johnston and Pardee to discuss timing and costs. Our goal is to finalize a plan by the end of June.

For more information on the Epic@UNC initiative, please visit http://news.unchealthcare.org/epic.

Tracy Parham  
Vice President & CIO, UNC Health Care
In May, Ernie Bovio joined High Point Regional Health as the new CEO. He succeeds Jeff Miller, who retired as president at the end of March after nearly three decades with the health system.

Bovio says he had a number of criteria that interested him when he was looking to make a career move, including the commitment of the governing board and the community to the organization, the quality of the medical staff and the size of the organization. He cites the thorough interview process as a primary factor in his decision to accept the position.

“I spent a lot of time with board members, medical staff and the management team, and that’s how I made the decision to accept the position – because I felt like I knew everybody and felt at home, and it was a good fit for all,” Bovio said.

The partnership between High Point Regional and UNC Health Care also was an attractive draw for Bovio. He says he sees the continued integration of High Point into the system as essential to organizational improvements, future success and growth. And, Bovio says, he hopes to help execute the integration effort and strategic plans the existing team put together.

In his more than 18 years of health care management experience, Bovio has held leadership positions with Tenet Healthcare as CEO of Trinity Medical Center, Medical Center of Mesquite as COO, and Duke University Health System and Medical Center as director of strategic planning and business development. He began his career with the Sisters of Charity Health System in Houston.

Before joining High Point Regional, Bovio served as CEO with Baylor Scott & White Health’s Hill Country and Round Rock regions in Texas. He expanded Baylor Scott & White’s presence in the market to include a 175-provider multispecialty group practice in 22 clinic locations and three community hospitals while building a fourth hospital.

He will continue the trend of expansion at High Point Regional as the organization begins renovations and construction projects made possible by its new partnership with the system. And, he says, he has plans for improving the delivery and quality of care at High Point.

“My focus is going to be partnering with the medical staff to advance an integrated health care delivery system throughout the Triad region,” Bovio said. “We’ll be ensuring high quality, high value and a great patient experience. Those are some things I want to continue to build upon.”

When he is not at work, Bovio is a distance athlete who enjoys swimming, cycling and running and participates in Ironman triathlons. When asked how being an endurance athlete translates to health care, he said, “For both, you really have to look into the future for where you want to end up and develop the training plan and have the discipline to stick to a long-term plan to achieve that vision of crossing the finish line.”

Bovio holds a master’s of health care administration and business administration from the University of Houston and a bachelor of arts in history from Texas A&M University. Bovio and his wife, Holly, have four children: Rebecca, 24; Stephen, 20; John, 13; and Lilly, 11.
Our system is well positioned to dynamically adapt and grow, both in today’s environment and in the future, as health care reform takes hold. As we move toward value-based reimbursement models, we will work to consistently innovate the way we provide care – developing new models of care, creative partnerships and ways to streamline and lower costs.

UNC Health Care’s strategy for responding to health care reform hinges on the following commitments:

• We will be prepared for reimbursement models based on value and population health and we will take measured steps to create new models of care.

• We will become increasingly integrated and efficient as a health care system, both in care delivery and in administrative functions.

• Streamlined information is crucial to successfully responding to the changes health care reform brings, and we will work to ensure information technology is interoperable across UNC Health Care.

• Through strategic partnerships throughout the state, we will increase the scale and scope of UNC Health Care’s clinical services so that we may achieve the highest quality care, lowest costs and most streamlined care for patients.

• We will maintain a strong relationship with the state of North Carolina. UNC Health Care is positioned to support improvements in Medicaid, mental health and other statewide health care challenges.

• We must further strengthen and extend our research and teaching enterprise, enabling us to lead the way in clinical innovation.

New models of care
In preparation for new care delivery and reimbursement models, we have a number of innovative initiatives across the system. Our goal is to get ahead of the curve. To that end, we are testing small scale, measurable changes.

We observe, improve processes and set metrics to ensure success on a larger scale.

We also are in active discussions with payers and others regarding shared savings models and risk-sharing arrangements. For example, we partnered with Blue Cross and Blue Shield of North Carolina on Carolina Advanced Health, an innovative care delivery model that streamlines the care experience for patients with chronic care needs. We hope to replicate this model as our experience grows. Much of this activity is being coordinated by our newly established Office for Population and Value Care, which you are sure to hear more about in the coming months.

UNC Health Care growth
UNC Health Care is already in a strong position in terms of scale, geographic breadth and presence along the care continuum. Over the past few years, our system has added several highly-valued partners, adding to our capabilities and broadening our perspective. We continue to look for opportunities to enhance our service offerings and expand our presence to benefit communities and improve access to high-quality care. We are not focused on growth for growth’s sake, but rather on improving health care for our citizens. For this reason, when evaluating partners, physicians and hospitals, we seek and prioritize alignment in values and goals.

As UNC Health Care moves into the future, we remain focused on our mission and culture, striving to do what is best for our citizens. I look forward to sharing more about our growth and innovations in care moving forward.
UNC HEALTH CARE ANNOUNCES SYSTEM PILLARS

Soon, all entities of UNC Health Care will adopt a common set of “pillars” that will outline our priorities and key areas of focus. The five “pillars” of UNC Health Care are People, Quality & Service, Growth, Value and Innovation. These pillars are declarations of who we are and what makes us different. These words unite UNC Health Care both symbolically and practically. They will guide us from our strategic planning all the way to our individual goals and work plans.

Leaders from across UNC Health Care decided on these five pillars after careful consideration. As of July 1, 2014, all affiliates in UNC Health Care will integrate the pillars into their strategic plans, performance management tools and orientation materials. Most affiliates already have some form of the pillars, so for many, it will be switching out what they have and incorporating the new ones. It is up to each affiliate to decide how to use and incorporate the pillars into the organization.

Please visit the UNC Health Care Pillars page for more information: http://news.unchealthcare.org/empnews/pillars.

NEW VIDEO SERIES SEEKS INSPIRING, MOTIVATIONAL STORIES FROM ACROSS UNC HEALTH CARE

“Real Medicine: Stories that Connect” is a new UNC Health Care video series. We are sharing stories that inspire, motivate and connect the UNC Health Care system.

Communications and Marketing recently reached out to communicators from across the system to share the new video series and its promo with your co-workers. The team also designed a space where system communicators can download the promo, a generic “Real Medicine” poster and affiliate-specific posters. There’s also social media messaging. You can see the promo and submit your story ideas to us at http://uncmedne.ws/realmed.

The first “Real Medicine” video aired May 14. It is a story about a UNC orthopaedic surgeon who started life in Myanmar, where his four siblings and parents scraped by on factory worker wages. When the future surgeon was 10, their father took him and the rest of the family behind in search of a better life in the United States. Hard work and a lot of luck later, the surgeon now performs highly complex spinal surgery in Chapel Hill for UNC Health Care – a wonderfully inspiring story. See the first installment in our series at http://news.unchealthcare.org/news/2014/may/real-medicine-unc-spine-surgeon-has-humble-beginning-in-burma.

If you have thoughts or questions, please contact Stephanie Mahin, Media Relations/Broadcast Manager, at smahin@unch.unc.edu. Thank you, in advance, for your help in making “Real Medicine: Stories that Connect” a success!
UNC HEALTH CARE ANNOUNCES FIRST OFFICIAL SYSTEMWIDE POLICY

A new policy about the sponsorship of events by UNC Health Care affiliates is the system’s first official policy. While UNC Health Care supports and encourages the sponsorship of events, especially those that promote wellness and prevent illness in our communities, the new policy states that affiliates of UNC Health Care may not solicit other affiliates to sponsor such events. Affiliates may co-sponsor events and/or participate in each other’s events at a level lower than sponsorship (purchase of tickets or table seats), but all such activities should be coordinated through Communications and Marketing.

Also, if an affiliate wishes to use the UNC Health Care logo (beyond just the use of the affiliate’s own name and/or logo), the same policy states that the affiliate must receive approval in advance from UNC Health Care Communications and Marketing. Such approval will generally be granted as long as it is understood that UNC Health Care will not make any financial contribution to the event or its sponsoring organization. The event or its sponsoring organization also must not support any of the following:

- An individual person or family
- A commercial, for-profit business
- Political campaigns, candidates, parties or partisan activities
- Religious activities
- Governmental activities
- Any interest that is deemed inconsistent with UNC Health Care Mission or Values or that would be deemed a conflict of interest

If you have any questions or would like a copy of the policy, please contact your Communications and Marketing department at your location. The UNC Health Care Legal department is in the process of outlining the steps to create a policy at the system level, and we will share that new process with you in a future issue of Leadership Update.

SHARE YOUR THOUGHTS

We would like your feedback on this issue of Leadership Update. Please take our short survey to help us make future editions of this newsletter more relevant to you. You can find the survey here: https://www.surveymonkey.com/s/XR3X97Z
ADDITIONAL UPDATES

Nash Health Care Joins UNC Health Care
On April 1, Nash Health Care entered into a management services agreement that allows the organization to acquire managerial and operational resources from UNC Health Care. While the agreement does not involve any sale or exchange of assets, officials believe it will help Nash Health Care achieve significant cost savings and increase hospital-based clinical services for area patients. Read more about the agreement here: http://news.unchealthcare.org/news/2014/april/nash-unc-health-care-affiliation-agreement-begins

UNC School of Medicine Ranked Highly by U.S. News & World Report
UNC School of Medicine ranked second in Primary Care and 22nd in Research overall in the 2015 U.S. News & World Report Best Medical School Rankings. Family Medicine, Rural Medicine and AIDS were also listed as top 10 specialties. http://news.unchealthcare.org/news/2014/march/usnews-best-med-schools

School of Medicine Awarded $40 Million for HIV/AIDS Research
The UNC School of Medicine has been awarded more than $40 million over seven years by the National Institutes of Health (NIH) for a clinical trials unit that will implement the scientific agendas of five NIH networks devoted to HIV/AIDS treatment, prevention and cure research. http://news.unchealthcare.org/news/2014/february/unc-receives-more-than-40-million-from-nih-for-global-clinical-trials-unit-to-treat-and-prevent-hiv

HCAHPS Scores Released
The latest Hospital Consumer Assessment of Healthcare Provider Systems (HCAHPS) patient satisfaction scores for July 2012 through June 2013 were recently released. In many cases, UNC Health Care performed at or above state and national averages. View scores for all System hospitals here: http://news.unchealthcare.org/empnews/2014/may-1/hcahps-scores-available-for-all-unc-health-care-hospitals

Planning Underway for Rex Holly Springs Hospital
After a nearly four-year legal battle, Rex Healthcare has won final regulatory approval to build a 50-bed hospital in Holly Springs. This will allow Rex to begin planning what will be the ninth hospital in the UNC Health Care system, and bring much-needed medical care and services to Southeastern Wake County, one of North Carolina’s fastest growing regions. Rex officials are working with residents and community leaders to make sure the new hospital is designed to meet the current and future needs of patients and their families. Read more about Rex Healthcare of Holly Springs’ existing campus and future plans here: http://www.rexhealth.com/holly-springs.

Business North Carolina Ranks the State’s Best Hospitals
Business North Carolina magazine ranked Rex Healthcare No. 1 on its annual list of the state’s best hospitals for the second straight year. The list is based on criteria such as patient satisfaction, readmission rates and other factors. UNC Hospitals was No. 13, followed by High Point Regional Health at No. 15 and Margaret R. Pardee Memorial Hospital at No. 23. On the magazine’s “patient picks” list, UNC Hospitals was No. 1, followed by Rex at No. 4 and High Point at No. 17. Read the full report here: http://www.businessnc.com/articles/2014-03/the-annual-checkup-category/