



Quality Takes Center Stage on Mercy Web Sites

With growing attention on healthcare quality nationally, consumers are increasingly taking charge of their healthcare choices by using the Internet as a research tool to compare services and quality provided by health systems and hospitals. Recognizing this trend, the Sisters of Mercy Health System (Mercy) has been proactively working to make information about the quality of our care readily available to patients and other customers through our Mercy Web sites.

Currently, this new quality content appears on the Web sites of Mercy Health System of Oklahoma (www.mercyok.net) and the Sisters of Mercy Health System (www.mercy.net). Mercy's Oklahoma-based Strategic Service Unit (SSU) volunteered to work with System representatives in developing quality information for display on the Oklahoma and corporate sites. Going forward, this work serves as a prototype and resource for other Mercy

SSUs in the development of quality information for their Web sites.

A wide variety of quality-related information is available on the Oklahoma and corporate sites, including clinical outcomes measurements; patient satisfaction scores; use of new and emerging technology; Mercy's involvement in medical research; awards and honors received by Mercy physicians, nurses and facilities; and patient testimonials.

"For our consumers, this quality information is intended to answer the question, 'Why Mercy?'" said Myra Aubuchon, Mercy vice president-strategic planning and leader of the project design team. "We want to give our patients, their family and friends confidence in coming to Mercy, and help them in making decisions about their healthcare.

"For Mercy, the new Web content gives us another way of communicating our commitment to quality and demonstrating our role as a leader in improving healthcare. It helps to build a brand name for Mercy that is associated with quality," she added.

Research and testing were an integral part of developing the new quality content as well as updating Mercy's Web site design. Focus groups and one-on-one testing with consumers helped to shape both the quality message and the positioning of the new content on the Web sites.

"The learnings from this research were invaluable to our work," said Lisa Springer, Mercy Health Center-Oklahoma City, who helped lead the efforts of the Oklahoma Web/Quality team. "Primarily, it demonstrated the importance of quality to our consumers – they are eager for this kind of information and responded very positively to it. But they also think about quality in many different ways, and they challenged us to give them information that is easy to find and meets their varying needs."

The development of this Web-based approach to communicating quality is the last step in a three-phased work plan designed to provide information on Mercy quality and outcomes measurement, both internally and externally. The first phase, "Measuring Mercy," was launched on Mercy's intranet site in early 2004. This site offers co-workers and physicians information on quality measures related to the National Hospital Quality Initiative and patient satisfaction scores from surveys conducted by Press Ganey, the healthcare community's top satisfaction and improvement firm. Information also is



provided on Mercy's activities related to areas such as clinical safety, disease management and medication transformation.

The second phase, "Focus on Clinical Quality," was launched in May 2004. This password-protected intranet site contains more in-depth information and clinical quality measurements, including data and information on more than 50 measures. Because of the depth of the information provided, access to this site is more restricted. •



some aspect of "future state design" – how our processes will look in the future.

Begun in late 2003, the Genesis Project is Mercy's multi-year effort to improve patient care and service as well as the working environment for physicians and co-workers. The project is organized by four "tracks" – Clinical, Revenue, Enterprise Resource Planning (ERP) and Supply Chain, with Information Services and a Project Management Office (PMO) supporting each of these tracks.

"Future state design for the many areas touched by the Genesis Project is drawing on a wide range of resources to ensure that we combine the hands-on knowledge and vision of our Mercy co-workers with best practices in the healthcare field," said Bob Schimmel, senior vice president and executive sponsor of the Genesis Project. "In the design process the teams also are focusing on standardizing how activities are handled from one facility to the next. In that way, we can compare results and share process improvements going forward, a major benefit of being part of a larger healthcare System."

The benefits of standardizing have been echoed by many from Mercy's Strategic Service Units (SSUs) who have been participating in the project as Subject Matter Experts. "Standardization is needed in order to have accountability in the correct areas. It will be beneficial to provide the best service to our patients," commented one co-worker who participated in future state design sessions from the Revenue area. "We have a lot of brilliant people here and we can brainstorm quickly to find the correct answers," commented another.

The Revenue track recently completed its future state design sessions, while the Clinical and Supply Chain areas are beginning theirs. ERP, the segment of the project related to

finance and human resource/payroll areas, completed its future state design with the help of its SSU Subject Matter Experts in August, and is busy planning for the initial implementation of the new processes and technology related to these areas.

Track Updates

■ **Enterprise Resource Planning (ERP)** – ERP is the project area with the first "go live" date – July 2005 – for finance-related changes to be made at St. John's Mercy Health Care in St. Louis and Washington, Missouri, as well as the System Office and ROi. Last fall, a decision was made to defer to January 2006 the first installation of the human resources/payroll-related technology to allow for a standardized automated time and attendance and staff scheduling system (Kronos) to be added to the project.

An additional decision made during the ERP future state design process is to consolidate certain Systemwide functions, following one of the Genesis Project's guiding principles to be better stewards of our resources. Accounts payable will be located physically as part of St. John's Health System in Springfield, Missouri. Payroll will be consolidated at St. John's Mercy Health Care in St. Louis. Compensation planning and benefits design/administration will be consolidated at the System Office in St. Louis. A local presence will be maintained at each SSU to facilitate customer service for each of these activities, and co-workers whose jobs are affected by these changes will be assisted in finding comparable positions within Mercy, where possible. The design for the shared service centers is being developed, with some aspects of accounts payable scheduled to begin in mid-2005 and remaining consolidations beginning in early 2006.

■ **Revenue** – The Revenue track, which includes areas such as admitting/registration, medical records and billing, recently completed its future state design sessions involving 40 Subject Matter Experts representing each Mercy SSU. The design recommendations developed during the sessions will be presented in February to Mercy leadership. Some process improvements identified during the design sessions can be adopted even prior to the technology installations

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Sister Mary Juliane Carey, RSM

When most people think of retirement, they envision a more relaxed lifestyle with less hustle and bustle – a time to enjoy the fruits of their labor. Not so for Sister Mary Juliane Carey, RSM. While technically retired from fulltime ministry, for the past three years Sr. Juliane has spent her days as a volunteer organizing and implementing the Spiritual Development Program at Our Lady of Lourdes Community Center in Metairie, Louisiana. The center is located in the inner city of New Orleans and provides programs and services to seniors ranging in age from 60 to 103 years.

Sr. Juliane takes great pride in touching the lives of senior adults. Recently she facilitated a group that produced and performed a Christmas pageant. "It was fantastic to watch them engaged in this. It enables them to see

that they still have something to contribute, despite their age and economic circumstances," said Sr. Juliane.

Sr. Juliane grew up in the Irish Channel neighborhood of New Orleans. She experienced the Sisters of Mercy in elementary and high school and recalls that the sisters were very engaged with their students. It didn't take long for her to realize that she was being called to religious life. "I am the oldest of oldest of eight children and I recognized that my leaving might create a hardship on my family. The support and encouragement of my parents made all the difference in the world," said Sr. Juliane.

In 1950, directly out of high school, Sr. Juliane entered the Sisters of Mercy in Webster Groves, Missouri, a suburb of St. Louis. She professed her vows three years later, and then attended Webster College to obtain a bachelor's degree in math and chemistry, with a minor in education. Upon graduating, Sr. Juliane taught for a few years

before transitioning into medical technology and health administration at Mercy Hospital in New Orleans. In later years she taught as an instructor in the graduate program in Health Administration at St. Louis University. She also served as Vice President of Sponsorship for Mercy Health System of Kansas, and as Vice President of Mission Integration at both St. John's Mercy Hospital in Washington and St. John's Mercy Medical Center in St. Louis. Sr. Juliane earned a master's degree in health planning and administration from Washington University in St. Louis in 1973.

When the Sisters of Mercy Health System was formed in 1986, Sr. Juliane assisted with organizational strategies and participated in activities shaping the role of sponsorship and integration in System hospitals. She also was active in development of the Board of Trustees Internship Program.

In addition to a long career in the healthcare and education ministries, Sr. Juliane has served on both the Sisters of Mercy Regional Leadership Team in St. Louis and the Institute Team, headquartered in Maryland. She also served as the administrator of McAuley Convent

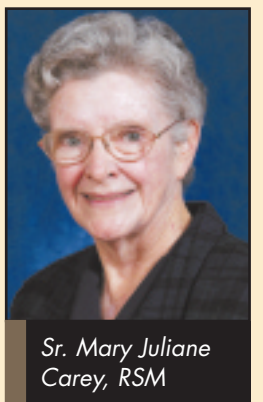
and Retirement Residence in Barling, Arkansas, living and ministering with a vibrant community of Sisters of Mercy retirees.

"Most of my life has been serving in Mercy hospitals, but in my late 60s I

realized that I was becoming a 'senior' and began looking at what seniors could do to remain actively engaged in life activities," said Sr. Juliane.

In the early 2000s Sr. Juliane became a chaplain. "This work allows me to be in touch with seniors' spirituality and I am blessed to work in such a wonderful ministry," she said.

In the spare time she has during these retirement years, Sr. Juliane enjoys visiting with her family and friends, traveling, making candles, crocheting, walking and reading. •



Sr. Mary Juliane Carey, RSM