

# The Peoplefirst Post

A Newsletter for Peoplefirst Employees



October 2006



## First Things First! with Ben Breier

### Technology and You

By Benjamin A. Breier  
President, Peoplefirst Rehabilitation

In the last edition of The Peoplefirst Post, we shared not only the results of our 2005 employee satisfaction survey, but actionable plans designed to improve the way we do business. By now, you and your manager should have discussed the information and reviewed its content. Our last newsletter of 2006 will come out toward the end of December. It is our intention to share with you the progress we have made working towards meeting the action items taken directly from your feedback.

In an effort to continue to find ways to make improved job satisfaction a top goal at Peoplefirst, I make every effort to be informed about changes in the rehab industry and new developments in overall employee satisfaction. A recent article listed **rehabilitation therapists** among the eight "best careers" for job satisfaction, according to a survey by CareerJournal.com.

The highly satisfied workers in the survey listed four factors as key to their happiness at work. While you may or may not agree with these findings, allow me to touch on some points that I believe hold true for our division, and some of the action items we are taking to meet these needs. These action items, and this newsletter edition, revolve around our commitment to improving job satisfaction through the use of and investment in new technology.

The four key factors are:

- **Intellectual stimulation** – Therapists are highly educated and need to be challenged to maintain interest and passion for their jobs.

\*Our new web-based clinical training programs will help our therapists continually develop their skills and provide the comfort and ease of earning CEUs from home.

- **Strong job security** – The continued growth in the strength of our division, and our increasing presence in the rehab industry should provide our therapists with a sense of security, and, we hope, a desire to remain committed to our organization over the long term.

\*Our new website, and the many interactive functions it offers to current and prospective clients and therapists, is a symbol of our organization's strength. This new technology



allows thousands of people to access information about our company every day. Providing educational tools, billing information and recruitment resources helps position Peoplefirst to remain competitive for many years to come.

- **A high level of control and autonomy** – Our experience in talking to hundreds of you out in the field is that therapists want to continue to find ways to manage their caseloads more effectively, and with more autonomy and control, than they currently are able to do.

\*The pilot of the new hand-held documentation device we are building will provide our employees with a greater sense of independence in managing their patient caseload on a daily basis. This technology will also allow us to become more efficient and less dependent on manual documentation.

- **Extensive, direct contact with customers/clients** – I am continually impressed with the passion our therapists possess toward ensuring that our patients receive the highest quality of care.

\*Our new patient/therapist scheduling system, and continued improvement of the DAR process, will offer new tools to help our therapists provide creative, effective treatment plans in the most expedient manner possible. Doing this will also allow for less manual planning and more direct contact with our patients.

Please take a few minutes to read about all the exciting new developments in technology that are on the horizon at Peoplefirst. Again, these initiatives are in direct response to our desire to attract and retain the best therapists in the industry.

Thank you for your commitment to our patients and our Peoplefirst team. By focusing on doing what you do best, we are on our way to having a very successful year in 2006.

Benjamin A. Breier

A handwritten signature in black ink, appearing to read "Ben Breier".



**It's All About Putting People First.**

## Your Opinion Counts and Your Feedback Is Important to Us

By Lynda J. Anderson

Regional Director of  
Information Systems  
Peoplefirst Rehabilitation

In August, a Daily Activity Report (DAR) documentation survey was mailed to 16 randomly selected Peoplefirst Rehabilitation contract sites. These surveys were distributed to obtain the opinions of therapists on the current use of the paper DAR process. The survey results were due in September and are being tabulated to form a DAR documentation baseline.

Once the baseline is established, we will be able to measure the effectiveness of the new POC/FTS hand-held device, which contains an electronic version of the DAR. Our hypothesis is that the electronic DAR will be easier to use, result in less duplication of efforts, and will become a more efficient way of capturing time and services.

If you have any comments about your personal experiences with the DAR and would be willing to provide us with your input, or if you would like to provide input on what we should automate within the DAR process, please feel free to contact me any time at [lynda.anderson@kindredhealthcare.com](mailto:lynda.anderson@kindredhealthcare.com).



## An Eye on Technology: What's New on the Horizon?

There are a number of other new and helpful functions, programs and projects that are coming your way. Here is a preview.

### Mileage Reimbursement through POC.net and FTS

Within the next few months, you will no longer have to submit Mileage Reimbursement forms to Accounts Payable to be paid. The process will be managed through mileage data entered into POC.net and FTS. This means no more delayed reimbursement or lost forms. You will be reimbursed in the same pay period you incurred the expense simply by entering the information on your DAR. Accounts Payable is also waiting anxiously for this enhancement as it means they won't have 1,200 mileage forms and checks to process each month.

### New and Improved PFR Knect Page

The Operations and Systems team has been working on a new design and layout for the Peoplefirst Knect page that will provide more detailed and timely information. We have a great deal of important information that is distributed by email, word of mouth, conference calls, etc., and that never makes it to one location where it can be accessed at a later date. The new Rehab Knect page will be the location for all of this helpful information. It will also provide names and numbers of who to call to get further information or resolve a specific issue. We expect these changes to take place before the end of the year.



### Crystal Enterprise Downtime – There Is Light at the End of the Tunnel!

Those of you who run reports know that Crystal Enterprise going down at the most inconvenient times has been an issue for a long time. The problem is that we have too many rehab and data warehouse reports for Crystal to support. Different methods of relieving the system have been tried, including patches and re-booting, but none have provided the long-term solution we need.

To change from Crystal to a different method of reporting (Microsoft) is a huge and costly undertaking, but one that needs to be done. We are happy to report that this change is now underway. It will be a few more months until the transition is complete, but when it is, we will no longer have to worry about downtime.

### Customer Electronic Billing

One of the services many of our customers have requested is electronic billing. They want our services to automatically interface with their billing systems. When this automatic system is in place, it means our customers will no longer have to manually enter the rehab units for billing. As you can imagine, in a large facility, the Business Office has to manually enter hundreds of rehab units, under the correct patient, on a daily basis. This is in addition to all the other billing information entered for other departments and services. As such, the rate of error and time involved can be extremely high.

By the end of the year, customers will be able to go to the Peoplefirst public website, log onto a customer portal, and pull in their billing data for the month. Not only will

this help our current customers, but it also gives us a competitive edge with potential customers.

### **New Learning Management System (LMS)**

We are excited to announce a new system that went online in September to our Peoplefirst rehab sites. It is called the Learning Management System, or LMS. The LMS program is being implemented in two phases. Phase I will enable our Managers to track the expiration dates of all employees who require a professional license to work for us. Licensure requirements (i.e., Physical, Occupational and Speech Therapists) are loaded into the system for each state. When a license is renewed or received by an employee, the manager will verify the license and go into the LMS system to confirm that the license has been renewed. If this doesn't happen, LMS will notify the manager that a license is about to expire. This will provide an automated system to ensure all Peoplefirst employees maintain current licensure. Phase II will eventually replace the education tracking system for keeping track of compliance courses and education. A date for this complete rollout has not been announced, but implementation for Phase I was completed at the end of September.

### **Patient/Therapist Scheduling System**

Another exciting system that is being developed is a Patient/Therapist Scheduling System. This system is in the development stages, but when completed it will provide our employees with a tool to assist in managing their patient caseloads, as well as assist managers in determining if additional staffing is required. The plan is for the scheduling part of the system to be available in late 2006 with the additional practice management components proposed for 2007.

### **Website Training Courses**

In 2007, Peoplefirst Rehabilitation will make it easier for our employees to meet their continuing educational requirements by providing approved training via the internet. The Clinical Services Team has developed cutting-edge courses and, with the web enhancement, Peoplefirst therapists will be able to log in to a secured website and access web-based training tailored to the needs of Physical and Occupational Therapists, and Speech-Language Pathologists. Peoplefirst will provide this benefit to employees at no cost. This means Peoplefirst employees will be able to earn CEUs from the comfort of their own home through the Internet.

## **Hand-Held Computing Is Here!**

The Peoplefirst Rehabilitation Division is sponsoring the development of a mobile version of POC/FTS. The new application, called PFR Mobile, is an extension of our existing POC/FTS systems. PFR Mobile will reside on a hand-held computer (see photos) and enable therapists to load their Daily Activity Reports (DARs) directly into the device. This new approach to capturing information will enhance our ability to accurately record services and employee payroll information.

We visited several PFR nursing center and hospital contracts to assess the daily workflow of therapists and see how a mobile device would fit into their active day to make data entry more efficient. During these visits and other encounters, therapists were asked to rate five different mobile devices on a number of factors. These factors included screen size and color, ease of reading, weight of device, size, and durability. In addition, the therapists reviewed examples of different programs on the devices to assess flow and ease of use. This feedback was the primary guide for the development of PFR Mobile. The three devices most preferred by therapists (pictured below) were the HP iPAQ, the Sprint 6700 and the Symbol MC50. These three devices will all be used during the PFR Mobile pilot to determine which one will work best in our environment. The full pilot program will begin early November 2006.

To ensure the constant flow of communication and feedback between the field and project teams, a national, multi-disciplinary Therapist Advisory Council was established. The council communicates on a regular basis to review the progress of the mobile project, give guidance to the project team and provide feedback on enhancements. The members of the council will also function as advisors to the field when the project is rolled out.

**HP iPAQ**



**Sprint 6700**



**Symbol MC50**



This is a very exciting project and we'd like to thank the therapists who have contributed.

# The RMAC and DORAC: Finding and Implementing Solutions!

In last month's Special Edition of The Peoplefirst Post, we outlined the 2005 Employee Satisfaction Survey Results and Action Plans for "Opportunities for Improvement" for the remainder of 2006. In response to the feedback received regarding employees having a say in things that affect their jobs, Peoplefirst Advisory Councils were created: the Rehab Manager Advisory Council (RMAC) and Director of Rehab Advisory Council (DORAC).

The **RMAC** has been formed for some time now and is working on the following core topics:

- employee recognition
- communication
- continuing education and core initiatives
- training and development
- productivity/financial reporting
- new hire orientation/RM toolkit

Periodic updates on the status of these initiatives will be highlighted in future issues of The Peoplefirst Post and weekly nursing center communications. Members include:

- **Rick Starke**, Senior Vice President of Rehab Services, Peoplefirst, and sponsor
- **Judy Freyermuth**, Regional Education Clinical Coordinator (Northeast Region) and co-chair
- **Allyson Wolfe**, Senior Director of Human Resources, Peoplefirst, and co-chair
- **Vonda Black**, Regional Rehab Director (Central Region)
- **Jaclyn Davin**, Rehab Manager (Senior Health Management)
- **Misty Grover**, Rehab Manager (Britthaven)
- **Lyle Black**, Rehab Manager (West Region)
- **Marisa Velez-Spina**, Rehab Manager (Southeast Region)
- **Dee Perkins**, Rehab Manager (Central Region)
- **Chris Titcomb**, Rehab Manager (Northeast region)
- **Kersten Farah**, Human Resource Specialist, Peoplefirst

DORAC members were identified and recently met at the

corporate office to formalize their mission: **The Director of Rehab Advisory Council will serve as an advocate for directors and staff with the purpose of facilitating communication, sharing expertise and reinforcing Peoplefirst values and culture.**

Additionally, they also identified four core areas on which to focus:

- human resources
- leadership training and development
- clinical programs
- recruiting and retention

**Shane Everett**, Senior Director of Hospital Rehab Services, is the sponsor of DORAC. Members include:

- **Julie Feasel**, Regional Rehab Director (South Region) and Chairperson
- **Allyson Wolfe**, Senior Director of Human Resources, Peoplefirst
- **Dan Schaeffer**, Director of Rehab (East Region)
- **Anthony Bertoni**, Director of Rehab (East Region)
- **Sharon Fleming**, Director of Rehab (Midwest Region)
- **Stephanie Madrid**, Director of Rehab (Midwest Region)
- **Jay Mower**, Director of Rehab (West Region)
- **Melissa Szamet**, Director of Rehab (West Region)
- **Anita Schaul**, Director of Rehab (South Region)
- **Jennifer Williams**, Director of Rehab (South Region)
- **Ginger Grabert**, Regional Education Clinical Coordinator, Hospitals
- **Mary Moretti**, Regional Education Clinical Coordinator, Hospitals
- **Kersten Farah**, Human Resources Specialist, Peoplefirst

Feel free to contact your regional RMAC or DORAC representative if you have any questions or would like to provide any suggestions.

## Peoplefirst Refer-a-Friend Opportunity Earn Extra Holiday Cash!

### Receive up to a \$1,000 bonus!

Please contact your Rehab Manager for an RAF form, or call/email Bethany Smelson at 1.800.545.0749, ext. 6965 or [bethany.smelson@kindredhealthcare.com](mailto:bethany.smelson@kindredhealthcare.com). To find current openings across the country, visit [peoplefirstrehab.com](http://peoplefirstrehab.com).

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