

# HOW DOES RHC LEADERSHIP STAY FOCUSED DURING THESE UNSETTLING TIMES

MAJOR KEYS TO SUCCESSFUL  
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# LEARNING OBJECTIVES

- WHAT ARE “UNSETTLING TIMES”
- LEADERSHIP IS ALWAYS IMPORTANT BUT ESPECIALLY IN UNSETTLING TIMES
- WE LEARN THE TYPES OF LEADERSHIP THAT WILL NOT WORK
- WE WILL SEE HOW TO CHANGE AND DEVELOPMENT LEADERSHIP

# DEFINITION OF “UNSETTLING TIMES”

**"UNSETTLING TIMES"** REFERS TO A PERIOD OR SITUATION  
CHARACTERIZED BY UNEASE, ANXIETY, OR UNCERTAINTY, OFTEN DUE  
TO SIGNIFICANT CHANGES, INSTABILITY, OR DISTURBING EVENTS. IT  
SUGGESTS A PERIOD THAT IS NOT STABLE, PREDICTABLE, OR  
COMFORTABLE, AND CAN EVOKE FEELINGS OF WORRY,  
DISTURBANCE, OR DISQUIET.



# WHAT'S REAL AND WHAT IS NOT

“SITUATION CHARACTERIZED BY UNEASE, ANXIETY, OR UNCERTAINTY, OFTEN DUE TO SIGNIFICANT CHANGES, INSTABILITY, OR DISTURBING EVENTS.”



## LET'S TAKE STOCK

- HAS THE REGIONAL OFFICES OF CMS BEEN CONSOLIDATED?
- HAVE ANY OF THE STATE OFFICE OF RURAL HEALTH BEEN SHUT DOWN?
- HAS MEDICAID PATIENTS LOST THEIR BENEFITS?
- HAS THE FMAPS BEEN MODIFIED?

**NOT YET!!**



# ALL WE HAVE IS A FORECAST

- YOU DON'T CANCEL THE WEDDING IF RAIN IS IN THE FORECAST, YOU JUST MAKE PROVISIONS IF IT DOES RAIN.
- WEDDING PLANNERS DON'T FREEZE OR PANIC...THEY PLAN!

A MEGA-TSUNAMI HAS BEEN FORECAST

- LET'S GATHER TOGETHER AND STIR UP PANIC AND ANXIETY





# VARIOUS KINDS OF LEADERS



# LEADERS ARE NEEDED DURING THESE TIMES, BUT NOT THESE KINDS OF LEADERS

- TOP-DOWN LEADERS
- MICROMANAGER LEADERS
- POSITIONAL LEADERS
- CHICKEN LITTLE LEADERS
- SEAGULL LEADERS
- MUSHROOM FARMER LEADERS



## TOP-DOWN LEADERS

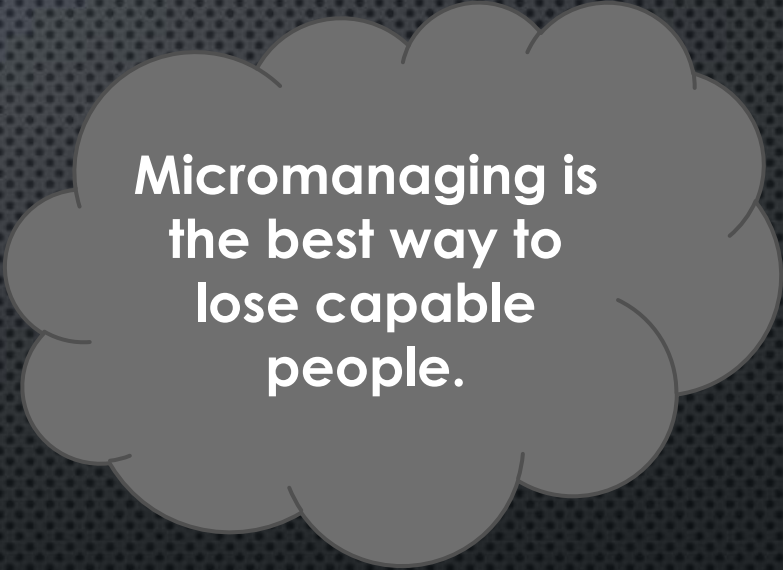
THE AUTOCRATIC  
LEADER. THIS USUALLY  
REQUIRES THE LEADER  
TO DRIVE BLIND.

## Traditional Leadership



## **MICROMANAGER LEADERS**

THEY DON'T TRUST THE  
EMPLOYEES TO DO THEIR  
JOB. THEY WANT TO  
CONTROL EVERY ASPECT  
OF THEIR TEAM'S WORK,



**Micromanaging is  
the best way to  
lose capable  
people.**



## **POSITIONAL LEADER**

LEADER DUE TO TITLE ON BUSINESS CARD. LEADER IN NAME ONLY. HAS THE JOB OF LEADING BUT CLEARLY IN NOT THE LEADER.

Being a leader doesn't  
require a title;  
Having a title doesn't  
make you one.

**CHICKEN LITTLE LEADER**  
THEY THINK IF WE  
PRODUCE ANXIETY  
IT WILL LEAD TO  
ACTION





## SEAGULL LEADER

THEY FLY HIGH AT 50K  
FEET, BUT EVERY SO  
OFTEN THEY SWOOP  
DOWN MAKE A LOT OF  
NOISE AND CRAP ALL  
OVER THE PROJECT.



## **MUSHROOM FARMER LEADER**

KEEP YOU IN THE DARK,  
FEED YOU CRAP, ONCE  
YOU START TO RISE  
ABOVE THIS, THEY  
COME ALONG AND  
CUT YOUR HEAD OFF.





NOT JUST  
LEADERSHIP

BUT GOOD AND WISE  
LEADERSHIP

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**- THERE ARE NO -  
BAD TEAMS  
ONLY  
BAD LEADERS**

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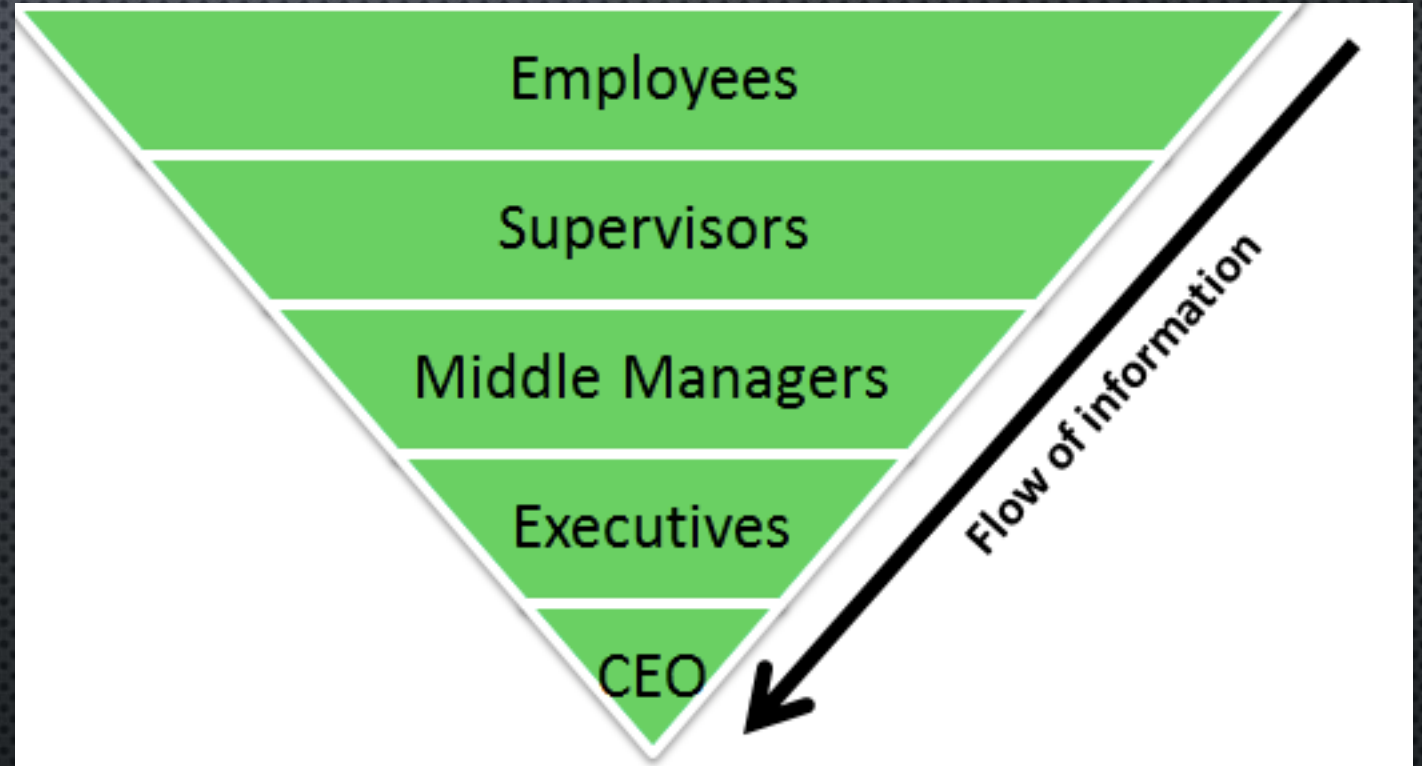
THIS IS THE TYPE OF LEADER  
THAT CAN FOCUS.

## **BOTTOM-UP OR SERVANT LEADERS**

ANYONE CAN LEAD AND THE  
FORMAL LEADER IS NEVER  
DRIVING BLIND.

THIS TYPE OF LEADER LISTENS TO  
HIS OR HER TEAM.

THIS IS SOMETIMES CALLED  
DEMOCRATIC OR  
PARTICIPATIVE LEADERSHIP





# WE NEED FOCUSED LEADERS

- **FOCUSED ON WHAT?**
  - FOCUS ON STAFF
  - FOCUS ON PATIENTS
  - FOCUS ON NEW SOURCES OF REVENUE
  - FOCUS ON EFFICIENCIES
  - FOCUS ON PERSONAL SERVE

# FOCUSED ON STAFF

- TEAM BASED CARE
- HIRE WELL
- AND TRAIN EVEN BETTER
- DISPENSE ENCOURAGEMENT LIBERALLY



# FOCUSED ON PATIENTS

- **HOW TO GET THEM**

- CONSIDER EXTENDING HOURS
- SPEAK TO THE COMMUNITY — LIONS, ROTARY, KIWANIS
- GO TO SCHOOLS FOR PHYSICALS

# FOCUSED ON PATIENTS CON'T

- **HOW TO TREAT THEM**

- THEY MUST KNOW THAT YOU CARE BEFORE THEY CARE WHAT YOU KNOW
- THEIR TIME IS AS VALUABLE AS YOURS
- TREAT THEM LIKE FAMILY
- TREAT THEM LIKE YOU NEED THEM INSTEAD OF THEM NEEDING YOU



# FOCUSED ON NEW SOURCES OF REVENUE

- **NURSING HOME VISITS**
- **HOME VISITS**
- **SWING BED ROUNDING**
- **CARE MANAGEMENT PROGRAMS**

# NURSING HOME VISITS

- CONTACT NURSING HOMES IN A 30 MILE RADIUS THAT ARE ALSO IN A HPSA.
- EXPAND YOUR FOOTPRINT — HAVING FRIENDS WILL ALWAYS BE TO YOUR BENEFIT.



# HOME VISITS

- HOME VISITS HELP YOU DEVELOP GOOD STORIES
- THE BEST LOBBYING COMES FROM GOOD STORIES
- SERVING THOSE THAT ARE UNDERSERVED WITH CHRONIC CONDITIONS ARE A PRIORITY FOR THE NEW ADMINISTRATION

## SWING-BED OR SNF ROUNDING

- ROUNDING WITH ANYONE OTHER THAN RHC PROVIDER IS COSTING YOUR ORGANIZATION TWICE AS MUCH
- REIMBURSEMENT COULD BE AS MUCH AS 3 TIMES AS MUCH
- IF YOU HAVE A CENSUS OF AT LEAST 7, THIS COULD MEAN AS MUCH AS \$500k



# CARE MANAGEMENT PROGRAMS

<b>Advanced Care Planning</b>	<b>Community Health Integration</b>
<b>Behavioral Health Integration</b>	<b>Principal illness navigation</b>
<b>Chronic Care Management</b>	<b>Principal Care Management</b>
<b>Transitional Care Management</b>	<b>Advanced Primary Care Management (Not Time Based)</b>
<b>Remote Patient Monitoring</b>	
<b>Remote Therapeutic Monitoring</b>	

Care Management Element	Chronic Care Management	APCM
Patient Consent	✓	✓
Seen patient within 3 years/initiating visit	✓	✓
24/7 Access	✓	✓
Real time access to records	✓	✓
Needs Assessment/Data Analysis	✓	✓
Preventive Services	✓	✓
Care Plan (internal/external)	✓	✓
Coordination of Care	✓	✓
Offer messaging, email or portal communication	✓	✓
Transitional Care Management		✓
Clinical Documentation	✓	✓
Time Documented	✓	



# WHO CAN BE THE LEADER IN UNSETTLING TIMES?

- IS IT THE PROVIDER, THE OWNER, THE CLINIC MANAGER, THE NURSING STAFF OR THE FRONT DESK?

**YES**

# WHO HAS THE BEST SOLUTIONS TO YOUR CLINIC'S PROBLEMS?

- I HATE TO SAY THIS BUT IT'S NOT THE OUTSIDE CONSULTANT. DID I JUST SAY THAT?
- IT'S PROBABLY THE PEOPLE THAT ARE LIVING WITH THE PROBLEM EVERYDAY.

If a leader is not a learner,  
a learner from his or her  
people, he/she won't be a  
leader very long.

It's respecting the team members that have boots on the ground.



# IT TAKES COMMUNICATION TO HAVE A TEAM THAT WILL FOLLOW

- YOUR TEAM NEEDS TO KNOW HOW YOU THINK, AND THEY MUST HEAR FROM YOU.
- YOU MUST HAVE MEETINGS, ALL TYPES

# ~~MEETINGS~~ ENGAGING MEETINGS

- DAILY ENGAGEMENT
- WEEKLY ENGAGEMENT
- MONTHLY ENGAGEMENT
- QUARTERLY ENGAGEMENT

STAND-UP 5 MINUTES ABOUT THE DAY AND PERSONAL ISSUES

AT LUNCH ASK HARD QUESTIONS HOW ARE WE DOING?

BLOCK OFF AN HOUR ON FIRST THURSDAY, GO OVER GOALS

FRIDAY HALF DAY, DO WE HAVE THE RIGHT GOALS?



BEING A FOCUSED LEADER WITH THE CORRECT GOALS MUST BEGIN AND END WITH:

- CONVENIENT SERVICE
- RESPECTFUL SERVICE
- COMPASSIONATE SERVICE

**The is the key to a dealing with a tsunami**



For the past forty years, Jeff Harper has been a business leader and innovator. During his emerging career, his accomplishments include: Working with Hospitals and Physician Practices in both urban and rural areas. Leading a regional CPA Firm as Managing Partner of a regional for 8 years; Providing 10 years of strategic financial leadership as CFO; Navigating and heavily negotiating through 12 mergers & acquisitions; and Serving as President of 50-million-dollar international corporation for 3 1/2 years earning INC 5000 for two consecutive years.

He presently is a principal of InQuiseek Consulting, a Louisiana-based firm that provides a wide range of consulting services across a variety of healthcare facility types. He is certified in Healthcare Compliance. Harper is in various hospitals and RHCs ever week all over the rural landscape and his diverse experience gives him a unique perspective to address opportunities for improved operational performance and cultural transformation. He has membership in NARHC, NRHA, and HFMA.



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