

Inside RASC



Rockford Ambulatory
SURGERY CENTER

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The 'Get Down to Business' Office



Bev Knautz, who joined the surgery center in 2007, has been promoted to Director of Business Operations.

Here's another reason why the surgery center runs so smoothly.

Grab a dictionary of idioms and look up "get down to business." The definition? "To begin seriously doing what you need to do."

That pretty much sums up Rockford Ambulatory Surgery Center's business office. An immense amount of work needs to get done every day so surgical cases proceed smoothly for the surgeons and patients.

Bev Knautz, a four-year veteran of the surgery center, recently was named Director of Business Operations. Bev is fortunate to be supervising a well-trained staff of professionals who excel at the responsibilities required for an efficient business office.

Bev ticks off the numerous direct and behind-the-scenes tasks staff members perform that contribute to a well-oiled machine.

"Efficient scheduling of surgical procedures, obtaining accurate insurance information, ensuring that the equipment and supplies are

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Two major system installations target patient and employee safety.



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Teamwork, medical skills and TLC combine to produce happy patients and surgeons.



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Special report examines the recently completed accreditation process at the surgery center.

best suited to the surgeons' needs, advising patients of their account status — these are just a few items from a very long list," she says.

Billing, filing claims and tracking changes in patients' insurance coverage are on that list, as is answering patients' questions regarding billing, insurance or financial assistance.

Staying on schedule

The surgery center takes pride in utilizing surgeons' time well, with each patient prepared for surgery at the time that the preceding procedure ends.

"The scheduling process is complex," Bev says. "The goal of coordinating between our

scheduling staff and surgeons' offices is no downtime and the operating rooms at peak efficiency. An easy transition for the physicians to schedule patients means they will be happy when they're here."

Records start here

The business office coordinates with the Preoperative Department to create a patient record that is up to date when the patient arrives at the surgery center the day of his or her surgery. Staff members have extensive knowledge of medical terminology and medical coding. They generate an electronic billing statement based on the operative report dictated by the surgeon.

Business staff supply the records required by the State of Illinois. Chief among them are infection control statistics, quality improvement studies, case volume and demographic data.

The business office safeguards the integrity of protected health information under the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule. In addition to ensuring that the recertification of the facility and staff is always current, the business office sees that RASC meets the licensing requirements of the Medicare system.

"A good business office is able to keep the surgery center's business moving forward," Bev says.

"A good business office is able to keep the surgery center's business moving forward."

Meet the Business Staff

Gina Aiello, *Receptionist/Admission Clerk*
Deb Ballard, *Surgery Scheduling Specialist*
Lori Brown, *Medical Record/Scanning Clerk*
Juanita Cunningham, *Document Management/ Medical Record Clerk*
Anna Drog, *Patient Accounts Coordinator*
Danielle Hinkle, *Surgery Scheduling Specialist*
Erica Lander, *Insurance Verification Coordinator*
Kris Mimier, *Accounts Payable/Payroll Coordinator*
Gayle Olson, *Collection Coordinator*
Beth Peterson, *Clinical Data Specialist*

Spotlight On

Bev Knautz, RHIA

To Bev Knautz, the job of Director of Business Operations consists of a practical and a philosophical side. A registered health information administrator, Bev honed her skills at hospitals in Rockford and Belvidere. The background in coding, recordkeeping and doctor credentialing supplied a firm foundation for the practical aspects of her current post.

"The awarding of credentials and privileges to qualified physicians is quite an undertaking, considering the amount of information that must be double-checked before a provider is accepted into the facility," Bev says. "The thorough evaluation of qualifications and practice history best serves the interests of the surgery center and the health care needs of the community."

On the other hand, the *supervisor* has several roles, some of which touch on deeper, less-straightforward issues. Bev describes these as works in progress.

"Supporting employees' development through coaching, positive and corrective feedback, organizational insight and goal setting is the most important of my management functions," she explains. "We want our employees to be satisfied with their positions. Being a good role model and the best manager you can be for the people who work in the business office is something you continually learn to do. You're never done learning — that's a good thing."

Did You Know?



The monthly demand for surgical linen at the surgery center is approximately 2,500 pounds.

Keeping Up Appearances

Surgery center emphasizes innovation and tender loving medical care in plastic surgery.

We live in a world where appearance matters. Studies point to reconstructive and cosmetic plastic surgery as life-changing procedures.

"How patients feel during the surgery experience is a defining element in the entire process," says Sarah Hagarty, MD. "The surgery center provides a calm, restful and discrete environment for patients to have procedures performed. Patients can come and go quickly and efficiently. They don't encounter all the administration and registration and high patient volume associated with hospitals."

Dr. Hagarty is one of several physicians who specialize in plastic surgery at RASC. Other surgeons who often perform elective and medically necessary plastic surgery are James McAdoo, DO; Dhaval Patel, MD; Landon Pryor, MD; Pedro Rodriguez, MD; and Jerome Weiskopf, MD.

Healthy patients, happy doctors

On staff since 2006, Dr. Hagarty treats patients seeking corrective surgery for issues ranging from cancers to body contouring to skin rejuvenation.

"Patients who are about to undergo plastic surgery can be extremely focused and self-conscious," she says. "As a surgeon, I want my patients to receive the very best medical care and TLC."



Sarah Hagarty, MD

Who's New to the Center

'Special Kind of Teamwork'

"There's no doubt that surgery puts people in a vulnerable position," observes **Marilyn Greer, RN**. "Patients totally depend on the doctors, nurses and surgical techs at that point. We have the responsibility and opportunity to meet patients' comfort needs along with their surgical needs."



Marilyn Greer, RN

Marilyn has been in the nursing profession for more than 30 years. Her career trajectory since graduating with an RN from Rockford Memorial Hospital School of Nursing in 1980 has been defined by many worthwhile

experiences. Her résumé includes working in Rockford Memorial's surgery department, providing home health care and performing physical examinations for insurance companies.

Most recently, Marilyn spent 10 years as an operating room nurse at FHN, where she specialized in orthopedics. During her years at FHN, she performed the duties of circulating and scrub nurse as needed in all types of surgical cases. She brings these skills to the surgery center's OR.

"Much like a patient who depends on us in the OR, we depend on teamwork to make a positive difference in the patient's life," Marilyn says. "Working together and utilizing each other's strengths to help the patient is what makes a good team and provides the best patient safety."

'We Have an Important Job'

"I was attracted to the idea of giving of myself and doing good in my daily life," says **Heather Reese, RN**, of her decision to become a nurse. "Nurses are part of something bigger than ourselves. You can pursue many avenues in nursing, but we all experience the challenges and rewards of caring for patients."

You could say the Rockford native took the long way home to arrive at the surgery center in September. Heather studied at the Department of Nursing at Augustana College in Sioux Falls, S.D., graduating with a BSN in 2004. From there, she joined the nursing staff

at SwedishAmerican Hospital. The following year found her delivering critical care in the intensive care unit of Alaska Regional Hospital in Anchorage.

"Going from the ICU to postop is definitely a change," says Heather, who presently is assigned to the Postoperative Department. "I enjoy the pace of the surgery center. It allows me to devote more time to each patient. I'm learning new and different aspects of nursing. That enables me to appreciate nursing more."



Heather Reese, RN

The surgery center does a wonderful job in that regard. The surgical team shows the patients compassion and consideration. That attention is directed toward the doctors, too. Everyone goes the extra mile to keep the doctors happy. They will always make special arrangements if I need a particular piece of equipment or instrument."

Toward an aesthetic ideal

Cosmetic, or aesthetic, surgery is the best-known kind of plastic surgery. Aesthetic plastic surgery maintains, restores or enhances normal appearance toward an aesthetic ideal.

"Plastic surgery is a perfect union of medical science, surgical technique and artistry," Dr. Patel says.

The most common aesthetic/cosmetic procedures at the surgery center include:

- **Abdominoplasty** (tummy tuck): reshaping and firming of the abdomen.
- **Augmentation mammoplasty** (breast enlargement): an enlarging of the breast via implants.

- **Reduction mammoplasty** (breast reduction): removal of skin and glandular tissue to reduce back and shoulder pain in women.
- **Blepharoplasty** (eyelid correction): reshaping of the eyelids.
- **Liposuction** (suction lipectomy): removal of fat deposits by traditional suction technique.
- **Rhinoplasty** (corrective nasal surgery): reshaping of the nose.
- **Rhytidectomy** (facelift): removal of wrinkles and signs of aging from the face.

Pleasing environment

"I like performing surgeries here because scheduling is easy and I'm assisted by highly competent anesthesiologists and nurses," Dr. Patel says. "And I can see why patients choose to come here. In this day and age when a lot of options are available, people will go where they feel the facility's own appearance and atmosphere match the level of care. Over the past three years, I've been impressed at the safe, convenient and aesthetically pleasing environment."

SPECIAL REPORT

Achieving Accreditation

The Accreditation Association for Ambulatory Health Care (AAAHC) accredited its 5,000th organization in November, a milestone for AAAHC and a cause for celebration at the Rochester (Michigan) Surgery Center. Understanding the accreditation process is critical for both quality and financial reasons. Health professionals, government agencies, insurers and the public recognize AAAHC accreditation as the symbol of quality.

"Accreditation is the Good Housekeeping Seal for ambulatory surgery centers," says Dr. Steve Gunderson, CEO and Medical Director of Rockford Ambulatory Surgery Center. "It demonstrates commitment to high-quality health care and shows you meet the criteria and nationally recognized standards to be among the best health care providers. Going

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through the process challenges us to devise better ways to serve our patients.”

The lessons are fresh in the minds of surgery center staff. As of this writing, the center is awaiting the results of the AAAHC’s survey at RASC, conducted in November.

Accreditation is a voluntary process involving an extensive self-assessment and an onsite survey by expert surveyors — physicians, nurses and administrators who are actively involved in ambulatory health care. The AAAHC Accreditation Handbook describes, in Chapters 1-8, core standards applied to all organizations seeking an accreditation survey. Adjunct standards contained in Chapters 9-27 are applied as appropriate.

Intended to be consultative and educational, the survey covers patients rights, quality of care provided, quality management and



ACCREDITATION ASSOCIATION for AMBULATORY HEALTH CARE, INC.

improvement, infection prevention and control, clinical records, health information, facilities and environment. Surveyors review surgery center governing bodies, surgical services, credentialing, human resources, physical environment and more.

Dr. Gunderson says the surgery center strategically plans stages of preparation at different intervals throughout the year leading up to the survey date.

“We take the time to understand each and every standard,” he says. “We furnish all supporting documentation, records and case studies, revisit the process and procedures

around our Quality Improvement program and conduct periodic walkthroughs to identify potential problems. If you have something wrong, they’ll find it. We don’t want any surprises.”

The surgery center has earned three-year accreditations following six consecutive surveys.

“Even though this was our seventh survey, a degree of stress always accompanies the accreditation process,” Dr. Gunderson points out. “We never expect to meet every standard to absolute perfection, but we feel confident about the outcome.”

New Systems Improve Safety for Patients, Staff

Rockford Ambulatory Surgery Center places a strong emphasis on patient safety, but we also focus as heavily on employee safety. Two recent technology installations address both of these critical areas.

The surgery center acquired 11 new vital signs monitors for the stage one and stage two postanesthesia care units (PACUs) and the two procedure rooms. As you well know, even small measurement variations can indicate significant changes in a patient’s condition. The **Dash 2500** series monitor from GE Healthcare accurately reports the patient’s respiration, blood pressures, temperature and pulse, and monitors cardiac activity to detect arrhythmias.

The monitor has a large screen and friendly user interface. It can function as a bedside or mobile system. System mobility allows the monitor to be wheeled where it is needed, as well as facilitate patient transport without data gaps or interruption.

The integrated network function connects to the central station for continued surveillance. In the future, individual monitors will be able to transmit vital signs data to patients’ electronic medical records.

The surgery center now has what we consider the best smoke detection and fire alarm



Control panel for Simplex 4100ES

solution. We replaced our old zone-centered alarm system with a **Simplex 4100ES** addressable system.

Conventional alarm systems divide a building into different zones — the surgery center has 10 zones. Detectors in each zone give a general idea of where a fire has broken out. Addressable systems pinpoint the exact location, making it easier for the fire department to extinguish the fire.

The intelligent field devices help distinguish between smoke and other things that commonly cause false alarms, especially dust. If one device fails, other systems in the area will cover for it and identify which devices are not working.

Scheduling Tips

When sending patient scheduling information by fax, please make sure that demographic details (name, address, phone numbers, social security number) and photocopies of insurance cards are clear and legible. The Scheduling Department fax number is **(815) 226-4549**.

Please fax medical history and physical examination (H & P), consent and doctor orders to the Preoperative Department. The fax number is **(815) 229-5963**.

Surgery center schedulers will attempt to obtain and document accurate employer information for the responsible party during the scheduling process.

Did You Know? On average, the surgery center uses 625 IV bags per month.

