

1. Category: Motivation

- **Why do you want to be Estes Park Health's next CEO?**

I am passionate about rural healthcare. I have spent most of my career serving in leadership and executive leadership roles in rural communities. Serving in these communities has given me both professional and personal fulfillment and joy. Being the CEO of Estes Park Health would be another opportunity for me to use my rural health care experience and executive leadership skills to help navigate a community health system through today's challenging health care environment. Typically, rural health systems, like Estes Park Health, face many challenges due to constrained resources, geographic isolation and fluctuations in volumes. In my career, I've viewed these challenges as opportunities and found success in leading two organizations, like Estes Park Health, through turn around strategies and set the health systems on the path for sustainable health care for these two communities. Professionally, it would be rewarding to take the lessons learned from these experiences and partner with Estes Park Health stakeholders (the Board, the Medical community, the Foundation, and area business leaders and citizens) to assess the current state and devise and implement a plan for Estes Park Health's future success.

Making a direct impact in the community where my family would live, work and play is professionally exciting to me especially since Estes Park is a personally appealing community to relocate. While I was born and raised in a metropolitan area, my husband and I have preferred to reside in smaller, rural communities. In the two rural communities we've had the fortune to live over the past 25 years, we have enjoyed becoming engaged members of the towns participating in civic organizations, volunteering in city events and weaving into the fabric of the community. Estes Park appears from the Chamber of Commerce materials and several videos we have watched to be a community that encourages citizen involvement.

Therefore, navigating Estes Park Health through the challenging healthcare landscape would be professionally rewarding and would be complemented by the personal fulfillment our family would gain by being an engaged resident of this beautiful community.

2. Category: Marketing

- **Our market share in the community is 20-30%. What are your ideas for improving market share? Provide examples on how you have dealt with similar situations in the past.**

Estes Park Health is unique and so is the community it serves. Therefore, the reasons for the current market share are likely aligned with environmental factors specific to this organization and community and must be identified first. Once the contributing factors are identified then the ideas for improving market share can be developed and implemented. Likely, Estes Park Health has many assets that can be leveraged to address the current barriers preventing this organization from capturing their maximum potential market share.

Let me provide an example from my current health system on how this could be done. When I arrived six years ago as the new CEO, the Board of Directors charged me with turning the organization's performance around in terms of community reputation, financial outcomes, quality, stakeholder engagement (staff, medical and business community, and patients) and service. While they didn't specify market share as a desired target improving stakeholder engagement, quality, and service ultimately improves community reputation leading to increased market share and improved financial results.

Here's how I tackled this turn around challenge. First, I spent 90 -120 days in assessment and relationship building mode meeting with as many stakeholders possible through numerous venues gathering input about the strengths and opportunities of the organization. Meeting with physicians in their clinics and practice settings helped me appreciate their

environments, current challenges, and potential capabilities we could leverage. In community and employee focus groups, I learned of historical barriers impacting the organization's ability to meet community expectations of access, quality and service. Similarly, meetings with community business leaders and civic groups shed light on the important role the health system played in the economic growth of the area and the desire to forge partnerships to improve the community's overall health and wellbeing while making healthcare more affordable for employers and citizens. These information and relationship building activities were complemented by a thorough review of the organization's performance data including employee and physician engagement survey results; quality, safety and patient experience outcomes; and financial metrics including service line profitability assessments.

After gathering important information and identifying the potential contributing factors impacting the organization's performance, the next step was to engage the team (Board, employees, medical staff, and leaders) in affirming the outcomes of the assessment and crafting strategies to address the opportunities for improvement identified in the assessment. Together we agreed to adopt a culture of excellence focused on quality, safety, service and financial accountability grounded in high employee and physician engagement. A strategic plan was developed for the next 24 months outlining tactics to improve engagement, quality, safety, patient experience and address operational gaps limiting the organization's ability to achieve excellent performance.

By navigating the organization through implementation of these strategic tactics, we were able to achieve the turnaround expectations set by the Board. The organization's employee engagement ranking went from 3rd percentile rank to the 65th percentile rank within the first year and has improved annually to the current rank of 89th percentile. The high engagement by employees, leaders and the medical staff has contributed to the organization going from good quality, safety and patient experience to excellent ratings as evidenced by CMS 5 Star and Leapfrog A rankings routinely. More importantly, the community has greater faith in the organization's abilities as evidenced by increased patient encounters in our acute, emergency, surgical and ancillary services. Increased community utilization along with improved fiscal accountability has contributed to the organization moving from a historic annual loss of \$3-4million before I joined the team to breakeven in the first 12 months after the strategic plan went into motion to a positive operating income every year since including a record double digit operating margin last year. The team's success has helped gain the organization credibility and respect within the business community opening doors to build partnerships with area business leaders to connect their employees and customers to utilize our services.

I hope this example from my current position has provided some insight into a pathway we could take with Estes Park Health to achieve its market share growth objectives. Likely, the obstacles limiting the organization's growth potential can be impacted by engaging key stakeholders and leveraging organization and community assets to overcome these barriers. Since this health system is an integral part of the Estes Park community, stakeholders have a vested interest in helping the organization succeed to ensure excellent healthcare is available now and for generations to come.

3. Category: Personal Attributes

- **What skills and experience do you have that make you the right choice to provide the leadership necessary to address future challenges faced by Estes Park Health?**

Over the course of my executive career, I have been successful at navigating between the strategic and operational. Working with Boards and executive teams, I have set vision and charted the course for the organizations I've led to move toward their long-term objectives. Once this course has been set, I have been successful at engaging the stakeholders necessary to create the culture and operational pathways that achieve the desired outcomes. Achieving these outcomes in a dynamic industry like health care has meant being open to innovation, forging partnerships, and tackling hurdles as they arise with a relentless pursuit of excellent healthcare for the communities served. I would bring these skills,

experiences and passion to Estes Park Health. My executive skills and experience coupled with the talent already in the health system and community would position Estes Park Health to tackle current and future challenges.

4. Category: Style- Management, Leadership, Communication, Relationships

- **Describe your leadership style in interacting with the organization, the medical providers, the leadership team, the Board of Directors, and the community.**

Let me start with a general description of my leadership style and then describe my communication and relationship building skills. First, my primary leadership style is collaborative and participatory. Organizations are filled with bright, talented individuals who want to be engaged and share their expertise. Organizations with high employee engagement also typically excel in performance outcomes (quality, service, financial, etc.). Therefore, I role model engagement in my interactions with my leaders, employees and the medical staff and foster collaboration with business and community leaders. Here are a few examples of what this engagement and collaboration looks like:

- Leadership team – engaged in setting annual metrics for the organization’s balanced score card and corresponding tactics to help achieve the outcomes.
- Staff - Created a Patient Experience and Employee Engagement Committee made up of frontline team members who help oversee tactics to improve opportunities highlighted on patient experience and employee engagement surveys.
- Medical Staff – developed a Retinology Performance Improvement taskforce made up of seven Retinologists who assisted me in improving the operational performance of their service line to prevent need for discontinuation of this critical service for the region.
- Board – engaged members of the Board’s executive team to help assess governance strengths and opportunities and then assist in instituting best practices to improve the Board’s efficiency and effectiveness.
- Community- currently leading the Chamber of Commerce’s Health and Wellbeing Partnership. I have facilitated this collaboration of business, city, civic and county leaders through the collective impact framework to set Mission, Vision, Values, Guiding Principles, and baseline measurement. I will be facilitating the group through a strategic planning effort over the next 90 days.

In terms of communication, I believe transparency and redundancy is critical. Research indicates people need to hear things 7-10 times through varied mechanisms before information is thoroughly processed. Void of enough communication, people typically will make up their own story which can be detrimental to trust, relationships and organizational success. Therefore, I focus heavily on sharing information through a variety of mechanisms to ensure we minimize potential negative outcomes. During major changes, a formal communication plan is developed to ensure people hear the key information at the right time, using the right vehicle(s), by the right person. I believe so much in the importance of communication, our leaders go through ongoing training in this skill and I role model communication planning efforts whenever possible to solidify my expectations around it. Some examples of communication tools I currently use include Employee Forums, CEO reports to Medical Staff and Foundation Board (verbal and written), Senior leader rounding, speaking at civic and business forums, newsletter CEO column, as well as the typical e-mails, memos, and meetings.

These communication techniques have also helped me build strong relationship with staff, leaders, medical staff and the broader community. Communication is not just about sharing information, an integral part of communication is listening to people’s ideas, concerns and opinions. Relationships are built when people feel heard and trust you are going to be accountable for using their input effectively including follow through on commitments made. The relationships I have forged with individuals and groups in my current organization and community have resulted in a favorable opinion of our health system and opened opportunities for improvements and collaborations. One example is the relationship I developed with Southern Oregon University. This connection has resulted in our health system being the preferred

provider of acute and ambulatory services for their faculty, staff and students. Additionally, we fostered connections with their faculty to enhance health care educational degrees to increase our pipeline of future employees (critical in a rural community where it is difficult to recruit talent). Last year we even partnered with the university to create a Bachelor of Health Care Administration where students complete their capstone with leaders from our organization.

5. Category: Change in Services

- **What has been your experience in assessing the viability of various service lines, with reference to community needs, financial feasibility, ability to attract and retain talent, competition, etc? Once a decision is made on a service line, and the service will be discontinued, how have you managed the change with providers, staff, and community? Provide an example (s).**

Several years ago, while monitoring the organization's financial performance by service line, I noticed the Home Health and Hospice services routinely performed at a negative operating income. While it is not uncommon for these services to have low margins due to poor payer reimbursement levels, it was my experience these services could at least breakeven and in best case scenarios generate a small income. Therefore, department leadership and the medical director were engaged to create a plan for performance improvement including tactics related to revenue capture and expense control. An action plan outlining specific tactics, deadlines and accountabilities was established with monthly check-in meetings to monitor progress. In the meantime, I began evaluating the service line firsthand to understand the strengths, weakness and opportunities from the staff, patient/family/community, medical staff and leadership perspective as well as assessing the marketplace to understand the competitors and potential partners. This evaluation was instrumental in better understanding the community's needs and perception of these services as well as potential options to explore to provide these services in a more sustainable manner for the community. The community had a favorable perception of these services and valued the ability to access them locally. Yet many of the stakeholders interviewed worried about how long the hospital could sustain this program given its relatively small size and the competitors in the region particularly the national home health agency and the hospice program operated by an affiliated hospital within the same health system as our hospital. After about six months of monitoring the operational performance and assessing the options, I determined we needed to realign these two programs to ensure community access to these valued services in the future. Given the sensitive nature of this project, I engaged key leadership and legal counsel in the planning efforts and navigated the group through the 12-month realignment plan. This plan included negotiating a joint venture partnership with the national home health agency solidifying our ability to influence these services to support our community and population health strategies. The plan also included closure of the hospice program and a merger of our hospital's program with our affiliated hospital's program. This merger was rebranded to be the region's hospice program. This larger hospice program now has the economies of scale necessary to be efficient and is led by hospice experts resulting in a highly respected program within the community. Closing two important and respected programs had the potential of numerous negative consequences. However, thorough project planning and a solid engagement and communication plan minimized negative outcomes and resulted in a highly successful transition to the new programs. Today, the home health joint venture has a positive operating income, excellent quality and service and we have been able to leverage these services to improve our orthopedics program and positively impact readmissions rates on key chronic conditions. Similarly, the regional hospice program is performing well and valued by local families and hospice patients.