



May 2016

Monthly Update

Architecture and Design – Significant process has been made on the 5th and 6th floors. PES and second floor designs are close to final. Planning work continues regarding parking.

Care Model Design – Working actively on mapping current staff to new unit matrixes. Planning a week care model design for leadership development and the next steps in developing the foundational components of Unity's care model the week of June 20. This work will enable more detailed design and staff engagement activities over the coming months.

Communications and Marketing and Development –A new position will take the lead on developing internal and external community communication strategy and facilitating timely collaboration between partner communication representatives. This person will also develop the Communications/Marketing transition plan.

Philanthropy – Campaign in the Portland Business Journal was published throughout the month of May. The team is continuing the salon strategy for fundraising and beginning hard hat tours as part of stewardship efforts with established donors.

Garden – The third garden design meeting was completed in the end of May.

Human Resources – An email inbox for general questions has been established and will be rolled out to staff in June.

IT and Informatics – IS would like to engage providers starting in July for PES build and a medication gap analysis that would develop the formulary. The Health Information Exchange team is building a recommendation for how to use outside EPIC messaging at Unity.

Provider Recruitment – Dr. Terri Ozback has accepted the position of Medical Director for PES, starting August 1. He brings 20 years of experience in psychiatric emergency service.

Transitions of Care - Multnomah County recently made a commitment to collocate a master's level councilor to provide transitions of care for Legacy Good Samaritan and Emanuel patients who are unaffiliated with a community provider. This person will be located at Good Sam. This person will help with the 7-day follow up as well as a longer 30-60 day connection to help ensure patients are connected with their outpatient provider. The ToC Workgroup is focusing on three models of transitions: co-location, in reach, and coordinated referrals. They will meet in early June to review the development to date.

Transition Steering Committee – Planning is progressing to schedule with orientation and input by clinical leadership team. Lori Morgan, MD will present the committee's recommendation for opening date to the Board of Managers in their June 14 meeting.