HRD belief is in the value and potential of AUBMC employees. The 2011-2012 Staff Development plan was thus devised to offer the best, most effective, job related training possible with which employees can continue to improve the level of service provided. Within this framework, key developmental activities will be offered to attend to the needs for development on identified significant general competencies including Management and Supervisory Skills; Critical thinking; Chairing and Conducting meeting; Project Management and Projecting a Professional Positive Image.

On another front, the 2011-2012 Staff Development plan will embrace promoting profiting of functional competencies specific to certain jobs. Accordingly, HRD will support the below listed “job specific development activities” as per the following:

Certified Purchasing Professionals: This is planned to be achieved by supporting two employees to attain “internationally recognized” certification for professionals in this function. Certified “Controlling Food Service Costs” Professionals: AUBMC HRD will fund for the progress of this service by supporting two employees to attain “internationally recognized” certification for professionals in this function. “Recruitment and Retention of Talent” Professional: The “Recruitment and Retention of Talent in Healthcare” conference has been identified to assist the AUBMC HRD Recruitment Manager in significantly contributing towards introducing appropriate AUBMC wide talent recruitment, retention and management plans. Clinical Embryologist: Embryology is a rapidly developing field which has seen enormous growth in the last 20 years. On another front, the IVF technician is one of the technical jobs at AUBMC that are not backed by specific specialization. HRD will thus be supporting the participation of one IVF technician in the “Alpha 2012 9th Biennial Conference”.

Clinical Perfusionist: Patient safety is paramount, but safety within particularly the operating room and more specifically on cardiopulmonary bypass need to take into account the protection of the perfusionists’ careers. The call to action for this was addressed by the 2011-2012 Staff Development Plan through supporting the participation of one Perfusionist in the “American Society of Extracorporeal Technology” Conference.

Performance Management Cycle on FOCUS – BDI
Performance Management is a joint initiative intended to advance AUBMC mission and vision by aligning individual employee contributions with the hospital’s goals. Performance Management is a joint effort between a supervisor and an employee utilizing the concepts of coaching, supporting and developing.

The performance appraisal measures employee performance against the goals, standards and competencies in an employee’s performance plan and assigns a summary rating of record. The appeal process: if the staff disagrees with his/her performance appraisal, the staff has the option of indicating in writing and requests an appeal to discuss the appraisal with a human resource officer, who then investigates the reason and reconciles the two parties.

It has to be kept in mind - however that electronic signature is always required to indicate that employee’s appraisal has been discussed with them by their supervisor and this doesn’t necessarily indicate approval of respective appraisal. Employee has to indicate any disagreement in the “notes” field but always has to sign his/her appraisal in order for HR to follow up any appeals or disagreements.

Certified Professional in Healthcare Quality (CPHQ)

We would like to congratulate the following 3 employees who’ve recently received CPHQ certification:

Ms. Rafael Yazbek (CPHQ 2011)
Ms. Shaha Abi Gheiram (CPHQ 2011)
Ms. Layal Mohar (CPHQ 2011)

CPHQ is a universal source of certification that is considered to be the highest and most specific recognition of professionals in healthcare. Most hospitals have incorporated the CPHQ as a pre-requisite requirement for the appointment of quality management staff.

How to get certified?
Step 1: Prepare for the exam by enrolling in a recognized course and by reading the pertinent literature. CPHQ review course is organized by the Quality, Accreditation and Risk Management Program in coordination with the Continuing Medical Education Office at AUB.
Step 2: Get involved in practical quality management projects.
Step 3: Schedule an exam date for CPHQ. The exam questions are based on recall, application and analysis. The exam is conducted on line at the Clinical and Professional Development Center (CPDC) at the American University of Beirut Medical Center - Hamri School of Nursing. You can apply on line by accessing the HCGC website: http://www.aha.org
Step 4: Read the CPHQ Candidate Handbook which contains all of the information needed to apply and schedule for the CPHQ examination.

HRDMC Newsletter Issue 02 October 2011

2011-2012 Staff Development Plan

How Engaged Are AUBMC Employees?

An Employee Engagement Survey was recently conducted among AUBMC employees.

A random stratified sample of 191 employees was selected in a way that represents actual characteristics (mainly job families & years of service) of AUBMC employee population.

Interviews were conducted by AUB MPH graduate students where 20 engagement items were rated on a 5 points Likert scale. Employee Engagement is defined as “involvement with commitment, to and satisfaction with work”.

It is different from Employee Satisfaction in being a “one step further” in predicting employees’ commitment and dedication to deliver better outcomes. Engaged employees are likely to be satisfied in their jobs; the opposite –however- may not always hold true: Satisfied employees are not necessarily engaged.

Employee Engagement level at AUBMC proved to be comparable with most international benchmarks. Overall Engagement Index was 67%-compared to 60% and 62% in US and Canada respectively.

Several interesting findings were found which are highlighted in page two of this newsletter. In case you need any details or specific information, don’t hesitate to contact us.

Readers’ Feedback

Congratulations on your Newsletter !

The Human Resources Department newsletter is sent at a time when the AUBMC is witnessing major changes to reflect a new perspective, new goals and core values. The Human Resources Department plays a pivotal role to instill these values in the staff members of AUBMC through disseminating the needed messages via its newsletter. As a reader of this newsletter, I look forward to receive updates in personnel policies and procedures, performance improvement projects related to Human Resources and other topics of common interest to the AUBMC staff at large.

Good Luck

Khalfi Flick

Quality, Accreditation and Risk Management Program

Each year on September 6th, AUBMC celebrates employees who completed 10, 15, 20 & 25 years of service.

AUBMC celebrated the 2011 Service Awards Ceremony - organized by Human Resources Medical Center at Issam Fares Hall on September 6, 2011.

This year witnessed many enhancements that added to the celebratory nature of the event. After the national anthem and alma mater, speakers (Mrs. Roula Haddad, Dr. Adnan Tahrir, Dr. Mohammad Saeigh, Mr. Abdallah Faour, and VP Jim Radulski) highlighted the importance of dedication, loyalty and commitment to excellence that are well reflected throughout employee’s long service at AUBMC.

Pins and flowers were distributed to awardees. The ceremony was concluded with cutting a huge cake followed by an exceptional buffet.

184 employees celebrated this event. Out of them 62, 60, 41 & 21 employees completed their 10, 15, 20 & 25 years of service respectively.

Performance Appraisal Results

Performance appraisal scores summary of 1778 Non-Academic AUBMC employees for this year:

Overall average of all employees: 3.73
Standard Deviation: 0.47
Median: 3.8
Range: 1.3 – 5.0

Distribution of scores:

Distribution of PK Scores

Distribution of scores
Resume Training Sessions

“What is the Resume Training about?” was one of the frequently asked questions at the beginning of each training session. Let us start by briefly describing what a resume is.

Resume (also known as curriculum vitae or CV) is defined as “a written document that lists your work experience, skills, and educational background. It is used as a marketing tool for job seekers.” These two points were highlighted and stressed on during all the training sessions that were given. The Resume Training was a hands-on training held every day for the past two months and each session included 12 employees. Due to the outcome of the sessions that were held, the next trainings are going to occur twice per day.

New sessions will open in October and the employees who did not register for the previous trainings will be able to register this time. Moreover, email confirmations as well as reminders will be sent in order for the employees to make sure that their registration has been accepted. In addition please remember this training is mandatory. Frequent follow-ups are going to be done by the appointed HR Staff in order to make sure all the AUBMC employees have filled in their resumes on time.

Employee Engagement at AUBMC (cont'd)

The graph to the right summarizes overall response to the survey items

The following is worth noting:

- 63% indicated that they don’t receive regular recognition or praise for good work.
- 32% didn’t indicate having opportunities to learn and grow.
- 25% indicated that they plan to leave AUBMC within the next 2 years.
- 86% showed willingness to put efforts beyond what is expected.
- 32% were neutral to considering colleague's commitment to doing quality work.
- 68% indicated having a best friend at work.
- “Technical” Job Family was the least to agree to having supervisor care tailored as a person.
- “Nursing” Job Family considerably had higher agreement with their progress being discussed at work.
- “Technical” Job Family scored lower than others in many areas (particularly in receiving recognition).
- “Nursing” Job Family had the highest agreement score in having opportunities to learn and grow.
- Employees with 0-5 years of service indicated the highest willingness to leave AUBMC.
- Employees with 5-10 years of service showed a lower engagement pattern than both employees with less and more years of service (a J shaped graph)

Recommendations:

While overall engagement is good, some findings show some below-average engagement scores among certain groups, mainly “Technical” and “skilled Labor/operational support”, and also among employees with 5-10 Years of service.

HRDMC will be working towards enhancing the culture of recognition, improving supervisors’ role in building engaged teamwork, and enhancing employees’ realization and perception of learning and growth.

This Issue’s Q&A: Resignations

Q: If I resign, what is the notice period required?
A: In cases of resignation, the employee or worker shall give the organization or manager prior to the effective date of his/her resignation as follows:
- 1 month written notice if he/she has 0 or less years of continuous service
- 2 months’ written notice if he/she has more than 3 years but less than 6 years of continuous service
- 3 months’ written notice if he/she has more than 6 years of continuous service
- 4 weeks’ written notice if he/she has more than 12 years of continuous service

Q: Can employees or workers withdraw their resignations?
A: This depends on the judgment of the department head, Human Resources, and the employee’s record.

Q: What is the minimum break of service in order to be re-employed?
A: No person shall be considered for re-employment before at least 10 years after date of termination. However, if the person has resigned for any reason other than change of full-time/part-time status or marriage or pregnancy/mouse of female employees and the employee has received his/her indemnity, he/she shall not be eligible to re-employment before the lapse of a minimum of two years from the date of resignation.

Department in Focus: Inhalation Therapy

The Inhalation Therapy Division has grown tremendously in terms of its range and complexity of services, since its establishment in 1968. Currently the division consists of 18 respiratory therapists and 9 technicians who work full time in a range of respiratory care services 24 hours a day, 7 days a week. Dr. Mohamed Khatib, who assumes the directorship of the division, deduced that the Inhalation Therapy is “a scientific and clinical discipline” He stated that "the mission of the division of Inhalation Therapy at AUBMC is to continue to strive to provide the state-of-the-art and comprehensive respiratory care services for all ages from newborns to geriatrics." Currently the staff in the Division of Inhalation Therapy operate the most modern and sophisticated mechanical ventilators. The division has grown to accommodate around 50 mechanical ventilators, providing respiratory support in adult, pediatric, and neonatal patients, as well as fifteen Bloweo Positive Airway Pressure systems for non-invasive ventilatory support among other state of the art respiratory care equipments (e.g., high frequency oscillatory ventilators).

High frequency chest wall oscillation, blood gas machines, nitric oxide delivery, and monitoring systems, metabolic monitor, pulse oximeters, and thyroid dose monitors, etc. Services are provided all over the Medical Center particularly in the different critical care units where neonatal, pediatric, and adult patients with respiratory failure are managed using state-of-the-art mechanical ventilation with the most advanced and novel modifications of ventilatory support. The clinical respiratory care services in the division of inhalation therapy include, but are not limited to, the following:

- Medical gases therapy (oxygen, nitric oxide, and helium)
- Invasive mechanical ventilation and pressure controlled ventilation. High Frequency Oscillatory Ventilation, Bloweo Ventilatory Support, Proportional Assist Ventilation, Airway Pressure Release Ventilation, Pressure support Ventilation, etc.
- Non-invasive ventilatory support (Bloweo Positive Airway Pressure (BPAP) and Continuous Positive Airway Pressure (CPAP) for adults and non-invasive intermittent mandatory ventilation (IMV) for neonates and pediatrics)
- Airway management (endotracheal intubation)
- Airway clearance therapy (High Frequency Wall Oscillation (HFWO))
- Airway medication (branodilation and humidification therapies)
- Transport of critically ill patients
- Diagnostic Procedures (Sampling of arterial blood for arterial blood gases determination and for co-oximetry, determination of respiratory system mechanics using mechanical ventilation, indirect calorimetry)
- Support during bedside procedures such as diagnostic and interventional bronchoscopy as well as transcutaneous differential transcutaneous tracheal CO2
- Management of chronic patients who are in need of ventilatory support and/or oxygen therapy

To keep improving its performance and achieving its goals, the division of Inhalation Therapy at AUBMC has adopted a set of values that is based on continuously improving quality, timeliness, cost-effectiveness, professional standards, patient education, and continuous self-evaluation. “We have had a very positive past, we are on the present, and we will always strive for a better and brighter future for continuously providing the best respiratory care services and practices for the patients at AUBMC, and for the people of Lebanon and the region,” concluded Dr. Khatib

Respiratory Therapy: Job Competency Profiles

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Portfolio for promotion:
1. Competencies: assess behavior using development assessment
2. Job standards: assess outcomes
3. Goals (assessment criteria)
4. Evidence of contribution
5. Narrative recommendation to recommend final promotion

Steps in performing Development Assessments:
1. HR will receive an email from Head of Department (development assessment of employees)
2. A 360 assessment will be performed using BDI Focus system by the employee, their current supervisor and his/her next level of supervision (other members are also evaluated as their peers if they have no next level)
3. HR will receive a finalized assessment to be analyzed by the BDI Focus panel
4. The employee meets the DPL (cleaner: personnel management) in a written/online interview
5. There are GAPs, how are they analyzed?
6. HR will look at the GAPs and the training is requested
7. Are these GAPs, key competencies identified?
8. These are GAPs essential for the position
9. HR will submit a finalized recommendation (HR) covering this assessment

Preparation of a ventilator