

The Rapid Pulse

February 2002

The Director's Perspective

By Dr. Eugene Migliaccio

During the last issue of *The Rapid Pulse*, I talked briefly about the wonderful progress that was made in refining the Balanced Scorecard (BSC) during the leadership symposium in San Diego, California. Over the next several issues of *The Rapid Pulse*, I would like to expound on many of the new initiatives in the BSC that reflect our three priority areas: employees, quality and cost.

In this issue, I will be focusing on the area of cost. DIHS is committed to providing cost-effective health care without sacrifice to quality. One of the initiatives developed in San Diego was the creation of a central pharmacy that would provide next-day mail order service to the Service Processing Centers and eventually the Jail Management System. This would ensure that DIHS is providing medications at government cost to the population we serve.

Currently, we are undertaking a thorough review of pharmaceutical expenditures, which will give us an indication of the dollars we can expect to save with a central pharmacy system. I am also excited about the test pilot mail order service for HIV medications expected to begin in early March



in York County, PA, an area with a particularly high number of HIV cases.

We have also developed several mental health initiatives in the area of cost, such as having the Clinical Directors treat simple mood disorders on-site and conducting non-complicated de-tox treatment at our infirmaries.

Cost-containment is a key initiative that requires the commitment and resolve of every member of this Division. The net result is our ensured viability as an organization and a well-deserved reputation as a leader in correctional health care.

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Faces and Places

WELCOME

Aguadilla, Puerto Rico
Rosa Hernandez

El Paso, Texas
Luis Solano

Florence, Arizona
Tamara Ortiz

Port Isabel, Texas
Betty Lara

Rockville, Maryland
Pamela Graff

San Pedro, California
LT Frederick Brown
LTJG Shelly Hollandsworth
Angela Watson

FAREWELL

El Centro, California
CDR Diana Rand

Elizabeth, New Jersey
CDR Mark Baldwin
Kathy Protogiannis
Veronica Hart

Port Isabel, Texas:
Everett Leader



**Congratulations
to Kelly
Hoppensack
(DIHS HQ), on
giving birth to a
healthy baby
girl!**

From the Chief of Staff ...

By Dr. GERALYN JOHNSON

Health and Human Services (HHS) Secretary Tommy Thompson has recently initiated the Secretary's Forecast Report of Significant Upcoming Activities- also known as the "Forecast." This is a brand-new, all electronic reporting system to help HHS plan ahead and operate as a single Department.

At the Division level, DIHS has been tasked with providing a weekly activity report to the Health Resources and Services Administration (HRSA). The following types of information will be provided in the report:

- ?
????Alerts
- ????Historical Projects
- ????Policy (e.g., new PINs, regulations, involvement in Departmental or other policy initiatives)
- ????Intergovernmental Relations (e.g., visits from foreign dignitaries or representatives from other agencies)
- ????Media
- ????Congressional Activities
- ????Grants
- ????Major Conferences/ Meetings
- ????Reports/Publications

We must provide this information to HRSA every Monday.



Therefore, the Director of DIHS recently asked all Branch Chiefs, Health Services Administrators, Clinical Directors, Managed Care Coordinators, and Consultants to submit any updates they have in the areas listed by COB every Thursday to Shalana Millard either via fax (202-514-0095) or email (shalana.millard@usdoj.gov or smillard@hrsa.gov).

The information submitted by the Division's leadership will be reviewed at Headquarters to ensure it arises to the Secretarial level and is appropriate for inclusion in the DIHS Weekly Activity Report to HRSA. Please also keep in mind that the information submitted to the HHS Secretary will serve as a basis for the Department's weekly report to the White House.

I expect that the DIHS Weekly Activity Report will be one more way to raise our profile and let the entire nation know of the vital work we do each day to protect the health of the American public!

This is *your* newsletter! Have an idea or suggestion for a future issue of *The Rapid Pulse*? Don't delay! Call or email Shalana Millard !

**202-616-8951
shalana.millard@usdoj.gov
smillard@hrsa.gov**

Leaders

Leaders are called to stand
In that lonely place
Between the no longer and the not yet
And intentionally make decisions
That will bind, forge, move
And create history

We are not called to be popular
We are not called to be safe
We are not called to follow

We are the ones called to take risks
We are the ones called to change attitudes; to risk displeasures
We are the ones called to gamble our lives for a better world

-Mary Lou Anderson
April 1970

How to Measure Your Performance as Cost Center Manager

By Mel Roberts

As a Health Services Administrator (HSA) you wear many hats, one of which is that of the Cost Center Manager (CCM) for your particular medical facility.

Your role as Cost Center Manager entails numerous responsibilities that make you an important part of the Division's overall operation. Your ability to fulfill these responsibilities is crucial to the smooth operation of your facility and to the Division's reputation for efficiency and cost-effectiveness. Having said that, then how do you measure your effectiveness as a CCM?

To answer this question, it is necessary for you to understand what are unacceptable, successful and outstanding CCM performance factors:

Unacceptable Performance

- ? Fails to project known budget or program requirements
- ? Ends a quarter with a deficit balance
- ? Fails to acquire adequate supplies or equipment
- ? Acquires supplies or equipment that are unusable
- ? Fails to maintain adequate records

Successful Performance

- ? Anticipates and projects funding requirements for new, modified or proposed programs and provides that information to superiors
- ? Purchases equipment only after examining needs, priorities and projected life of current equipment
- ? Prepares budget submissions and justifications that are detailed, accurate, submitted by deadline and that use the prescribed formats
- ? Meets program goals and objectives within current budget
- ? Uses funds in accordance with Executive Council decisions

Outstanding Performance

- ? Uses resources in an innovative fashion, leading to significant cost reduction and increase service delivery
- ? Explores and suggests new types of equipment which management adopts and which improve operations or save resources
- ? Proposes new ideas that are adopted by executive management to increase the efficiency of the budget process or budget management



The 2002 DIHS Leadership Symposium– In Pictures



Acting Surgeon General of the United States RADM Kenneth Moritsugu (I) with DIHS Chief Pharmacist CAPT Don Brown

RADM Moritsugu with CDR Yvonne Anthony, Health Services Administrator of the San Pedro Service Processing Center



CDR Jay Garrido, Managed Care Coordinator, gets his turn to pose with the Acting Surgeon General

Did You Know?

RADM Kenneth Moritsugu was designated the Acting Surgeon General of the United States effective February 13, upon the departure of Dr. David Satcher.

DIHS extends its congratulations to RADM Moritsugu and heartfelt thanks to Dr. Satcher for his outstanding service to our nation.