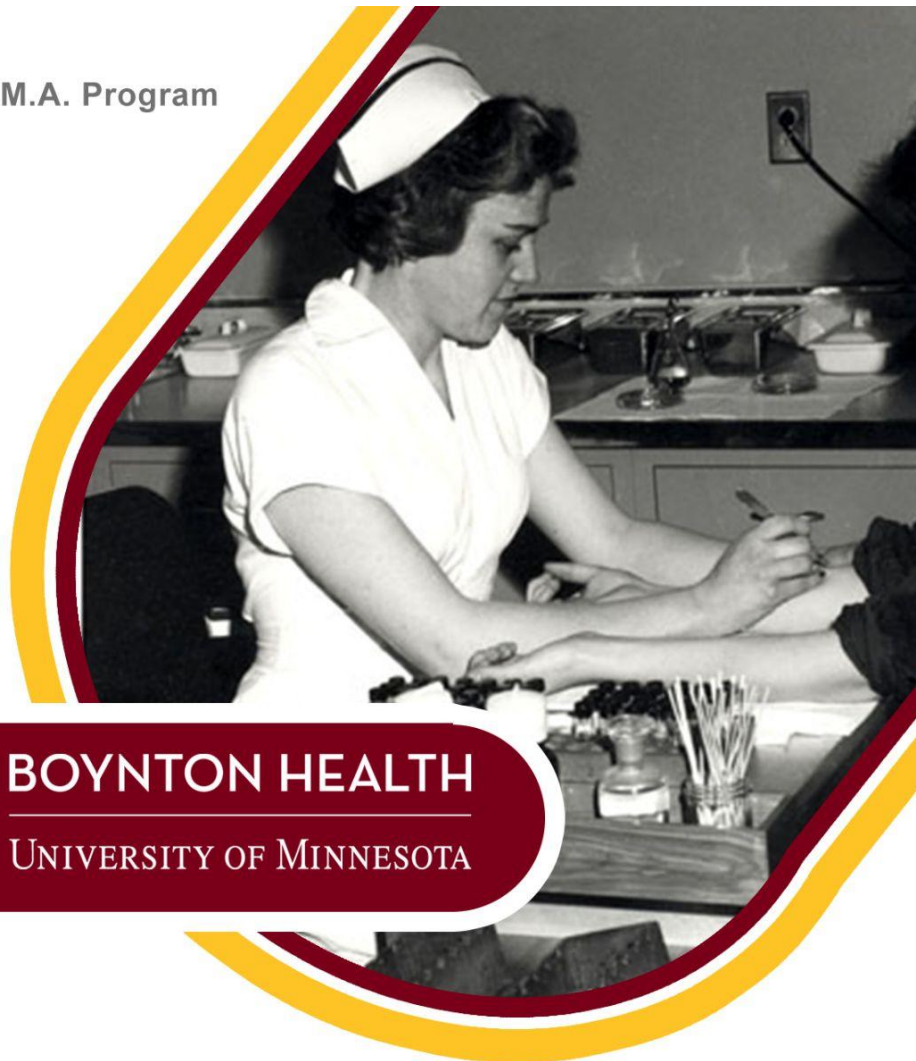


Strategic Communication M.A. Program
University of Minnesota
May 2, 2022



BOYNTON HEALTH

UNIVERSITY OF MINNESOTA

CAPSTONE RESEARCH AND PLANNING REPORT

NOW HIRING!

Boynton has staffing issues in the clinical departments, hindering them from meeting the demand of care the University of Minnesota Twin Cities campus requires. Low staffing affects the health and well-being of the campus, as well as the morale of the staff. This research takes a look at obstacles preventing hiring and employee engagement.



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BOYNTON HEALTH

INTRODUCTION

Pandemic response is not new. The University of Minnesota Twin Cities approved the creation of the **University Health Service** in the spring of 1918 in response to what was to impact the University. By September, when the clinic opened, the Twin Cities reported its first case of the Great Influenza, the world's deadliest epidemic of that time. One patient during that outbreak was a young medical student, Ruth Boynton—who would become a leader in public health, director of the University's health service, and eventually, its namesake.

Boynton Health has taken strides to address campus care with a research-based public health approach. Over 100 years, Boynton Health has led the nation's student health, adding dental and mental health services in the 1920s. In the 1940s, Boynton Health was the first college health center to require tuberculosis testing on campus and, in 1954, the first full-time college to bring on a health educator in the country. Boynton Health was the first college health center with a Quality Assurance Program, the first college health service, and the first clinic in the Twin Cities to be accredited by the Accreditation Association for Ambulatory Health Care in 1979. Amongst other firsts and services added have been transgender care, sexual health, nutrition, and reproductive health.

In addition to clinical services, Boynton Health is a leader in health promotion services available to students. These self-care services oftentimes are in the community, outside of the clinical setting. These services include *Boynton Health's Pet Away Worry & Stress*, a

therapeutic animal engagement for students to take a step away from academic and life stress; *Boynton Health's Gopher Chauffeur* is a safe ride service provided to students during the peak times of criminal activity; and *Boynton Health's Nutritious U Food Pantry* where students can pick up "no questions asked" food options to prepare at their residents. Other services for the Twin Cities campus are *Boynton Health's Nutrition*, *Safer Sex 101*, *Students in Recovery*, *Health Advocates*, *Credit Card Counseling*, and *Prevention Advocates*, to name a few.

Today, Boynton Health is one of the nation's most comprehensive college student health services, with campus locations in St. Paul in Coffey Hall, west bank in Wilson Library, Rec Well, Coffman Student Union, and its headquarters on east bank. All services, care, and programs are available to every University of Minnesota Twin Cities student. The remainder of the university community, including faculty and staff, can utilize most of the clinics at Boynton Health.

BACKGROUND

Boynton Health provides healthcare for the entire University of Minnesota Twin Cities population, consisting of 26,218 faculty and staff (University of Minnesota, 2006) and 66,496 students (University of Minnesota, 2006). Approximately 95% of its patients/participants are directly affiliated with the University of Minnesota Twin Cities. Boynton has 11 medical clinics, one pharmacy, and over ten health promotion programs focusing on public health.

A primary care doctor sees about 20 patients in one day (Excel Medical, 2022). This number may vary depending on the various conditions affecting patients. Before the COVID-19

pandemic, Boynton Health cared for nearly 100,000 patient visits each year, equating to about 385 patient visits each month.

Boynton Health serves the entire student population for all services at no- to low-out-of-pocket fees. Student Service Fees (SSF) awarded to Boynton Health covers any portion not covered by insurance companies. The amount not covered depends on the insurance company and ranges between 30% - 100% of visit costs.

PROBLEM STATEMENT

Boynton has staffing issues in the clinical departments, hindering them from meeting the demand of care the Twin Cities campus requires. Low staffing affects the health and well-being of the campus and has a direct effect on the bottom line.

Boynton's financial structure is complex. Providing care to students at no- to low- copays through a portion of Student Service Fees means that Boynton needs to subsidize expenses by billing patients' medical insurance. It is the only entity under the Office for Student Affairs (OSA) where over 85% of its operating budget comes from third-party billing.

The complexity of the financial structure lies with the number of patients that can be seen in a fiscal year. Low patient visits decrease the number of billable services but secure the SSF funds. High patient visits would increase billable services but can exhaust the SSF funds. Boynton has not identified how many patient visits per fiscal year would increase profits without exhausting SSF funds, decreasing their profit margin.

The initial assessment is that Boynton Health had low retention rates due to low employee satisfaction. Boynton's retention rates have been consistent at 98%, but 60% of the staff are less than engaged. After further research, the data shows that while Boynton Health typically has been able to replace staff quickly, the turnover rate gives a better analysis of employee satisfaction. While the data reflects that Boynton Health historically filled vacant positions quickly, the turnover rate is a factor that needs to be addressed.

These complex issues are the responsibility of leadership. Boynton Health's leadership is empowered to make decisions that affect the staff and overall operations of the clinic. The hesitation in decision-making may be linked to the Groupthink Theory.

For Boynton Health, groupthink occurs when the leadership's desire to maintain cohesive solace becomes more important than making the best choices. Members of leadership often are put in situations of group decision-making (Shirley, 2012, 67) (Heinemann et al., 2006, 71-85). While staff and leadership can think and act independently in group situations, being "the bad guy" may cause hesitation in firmly standing on the best decisions. Secondly, Boynton Health falls under OSA which adds additional complexity to the groupthink dilemma.

At the organizational level; individual care decisions are shaped by group-based medical training and the medical community. There is a call for health professionals to enhance their critical thinking skills and bolster their moral awareness. The research finds that it is the burden of health professionals to be personally responsible for shying away from latent groupthink (DiPierro et al., 2021, 309-318). Decision-makers for Boynton Health may find security through groupthink. Going with the majority for the sake of OSA leadership's understanding and to not have to over-explain or present solutions that may cause a challenge from OSA's leadership. The Office for Student Affairs staff are not healthcare or

public health professionals, nor do they have the business acumen to understand Boynton Health's operations.

S.W.O.T. ANALYSIS

<p>STRENGTHS</p> <p>Niche Target Audience</p> <p>Quality Care</p> <p>Non-training - Professional Staff</p> <p>Student Service Fees</p> <p>Retention Rates</p> <p>Patient Satisfaction</p>	<p>WEAKNESSES</p> <p>Staff Accountability</p> <p>3% Detached Staff</p> <p>Internal Collaborations</p> <p>Internal Communications</p> <p>Perception</p> <p>OSA - BH Scope of Work</p>
<p>OPPORTUNITIES</p> <p>40% Engaged Staff</p> <p>Clear Direction from Leadership</p> <p>High demand - Clinical</p> <p>Cross-department Sharing</p> <p>Employees Sense of Belonging</p>	<p>THREATS</p> <p>34% Disengaged Staff</p> <p>Competitive Clinics</p> <p>Capacity - Clinical</p> <p>Patient Choosing Other Options</p> <p>Staff - Patient Satisfaction - Turnover</p>

INITIAL INTERVIEWS

Interviews were conducted with Boynton Health's Executive Leadership Team and Primary Care Director by Maurice Perkins, March 2 - 15, 2022. Those interviewed were identified at Boynton Health, as they would have the best understanding of the impact staffing has on

providing services to the Twin Cities population. The full interview transcripts can be found in the Appendices below.

“We serve the students. Access to healthcare and services help students get through school.” - Dave Golden

OVERALL INITIAL INTERVIEW INSIGHTS

Boynton Health's Executive Leadership has different views on the Employee Engagement Survey Results, and how it impacts recruitment, as well as what affects turnover and retention rates. It seems the Executive Leadership aren't on one accord on the best plan of action to increase revenue-generating staff while increasing staff engagement, and reducing turnover. One resounding commonality is that the Executive Leadership Team recognizes that staff want to be informed more, but need to find the balance between being informed more and staff being involved in decision-making. Staff also want more flexibility to work remotely, having autonomy/authority.

The nursing shortage of 4,000 in Minnesota is impacting Boynton Health's ability to increase capacity (Nurse Journal, 2022). Although Boynton Health has increased provider staff, the lack of nurses can impact the morale of the primary care clinic.

The observation is that the Executive Leadership members with the most tenure lean more toward a defensive response, while those with four or fewer years, identify shortcomings and are seeking resolve. Boynton Health is currently working on the mission and vision, which would lay the foundation for clear and concise direction the staff yearns for.

The sense is that Boynton Health needs to communicate more with students about how insurance and billing work, as well as how to maintain healthy lifestyles.

SECONDARY INTERVIEWS

Reviewing the data collected and analyzing initial interviews led to a deeper dive into the nursing industry. Research of Boynton Health showed that “staff” didn’t mean all of Boynton Health’s staff, but nursing staff in particular. This warranted anonymous interviews of nursing staff within Boynton Health on March 31, 2022, and one nurse outside of Boynton Health conducted on March 4, 2022, by Maurice Perkins.

“First, respect the staff you have, the nurses have connections and will talk about the workplace. have a market competitive wage, be flexible with the potential hires, try the various temp agencies, other hiring platforms.” - Boynton Health Nursing Staff Interviewee G

OVERALL NURSING STAFF INTERVIEWS KEY INSIGHTS

There are similarities between nurses on why positions have been hard to fill. COVID-19 is one common factor due to mandates, added stress, and strenuous work demands. Nurses have either retired or entered into the “Great Resignation” and opting to change industries. For Boynton Health, employee satisfaction and confidence in leadership may play a huge role in the low capacity. The nursing network may be transparent about the issues of salary, leadership, and stress at Boynton Health.

SUMMARY

Data collection and review laid the foundation to support initial assumptions as to the reason Boynton Health's capacity does not meet demand. The interviews shed light on how the leadership at Boynton Health feels about the direction of the organization and the financial obstacles posed. Understanding how Boynton Health can increase its capacity to meet demand is to understand the roadblocks that prevent them from making necessary changes impacting employee engagement while maintaining patient satisfaction.

Further research also found disparities in the nursing industry nationwide and the impact the nursing shortage has on Boynton Health. Boynton Health is presented with obstacles out of its control that would require long-term changes to overcome. There are other challenges that can be addressed that require more strategy to accomplish.

Another challenge is, that currently, Boynton Health's department directors rely on the Chief Operating Officer, Director of Finance, and Director of Marketing and Communications for solutions to increase capacity to meet demand.

Obstacle 1: Boynton Health does not have the authority to fully manage its profits and losses, as the university does not allow competitive wage offerings and an increase in staff. Third-party billing is 85% of Boynton Health's revenue and through the Student Services Fees Committee, the University of Minnesota regulates the funding it receives and how it's allocated. These obstacles hinder Boynton Health's finance department from making adjustments and recommendations to the executive leadership for better forecasting and management of profits and losses.

Obstacle 2: Boynton Health's staff mix of clinical and non-clinical; union and non-union make it difficult to address employee engagement across the board. The staff mix also impacts the ability of some staff to work remotely, which based on the Boynton Health Employee Engagement Survey Results and interviews is a desire of staff. Not only is this a staff desire, but from an operational perspective, Boynton Health cannot effectively increase capacity due to a lack of physical space for staff gained. The physical location of Boynton Health on East Bank has space to expand at its headquarters, on the 5th Floor. Unfortunately, the University's space management department has not released this space back to Boynton Health.

Obstacle 3: Increasing patient visits per fiscal year, does not necessarily increase revenue and will exhaust the SSF funds allotted. The current billing model to ensure most students have \$0 co-pay for services Boynton Health offers, coupled with the various types of medical insurance students have makes it difficult to determine an overall number of visits to maximize profits.

Obstacle 4: There is a nationwide shortage of nurses. This shortage is impacting Boynton Health's ability to fill positions with seasoned nurses. Low pay, lack of awareness, and COVID-19 fatigue are a few issues making it difficult for Boynton Health to fill vacant positions.

Some of these obstacles can be addressed once the Executive Leadership Team collectively identifies a clear and concise direction, mission, and vision for Boynton Health. Presently Boynton Health staff have expressed they are doing a job without the sense of belonging as the employee engagement survey results reflect. While data shows that Boynton Health's turnover rate is just over 12%, its retention rate is 98%. This can be a problem as 60% of staff are less than engaged working at Boynton Health, which creates a culture of unsatisfactory

behaviors, not only for staff but as stated in an interview can spew over to patients unintentionally.

On the patient side of things, the research shows that 60% of all patients are covered under one insurance plan through *Boynton Health's Student Health Benefit Plan*. This revelation would make it easier for the finance department to assess what would be the "sweet spot" of patient visits Boynton Health can receive without negatively impacting the bottom line. Identifying the maximum number of annual patient visits that will not negatively impact profits will aid in creating a strategic communications plan.

Increasing Boynton Health's capacity to provide care through increased annual visits will meet the demand, and increase revenue positively impacting its bottom line. Increasing nursing staff will increase employee satisfaction and balance out the work of clinical staff to reduce burnout. The perception of Boynton Health would be positively impacted not only by the staff but the patients they serve.

COMMUNICATION GOAL AND OBJECTIVES

Boynton Health will need to focus time and energy to establish strategic communications. Decision-making from leadership and clear and concise communications about the direction of the clinic will build trust among employees. Internal communication strategies will lead to stronger job affiliation with disengaged employees, which have an influence on the nursing industry and how Boynton Health is perceived by potential applicants. External communications highlighting the positive feedback and key insights that "engaged employees" express will be used to entice potential applicants with the benefits of working as a nurse at Boynton Health.

Goal: Creating an effective communications plan that will make the nation's nursing industry perceive Boynton Health as the best place in America to work.

Objectives: Communicating Boynton Health as the best place in America to work will be gauged by:

1. increasing the employee engagement to 65% in the 2024 Boynton Health Employee Engagement Survey Results.
2. identifying the number of annual visits that will maximize profits; obtaining 80% of the annual visits needed to maximize profits by the end of the fiscal year 2023.

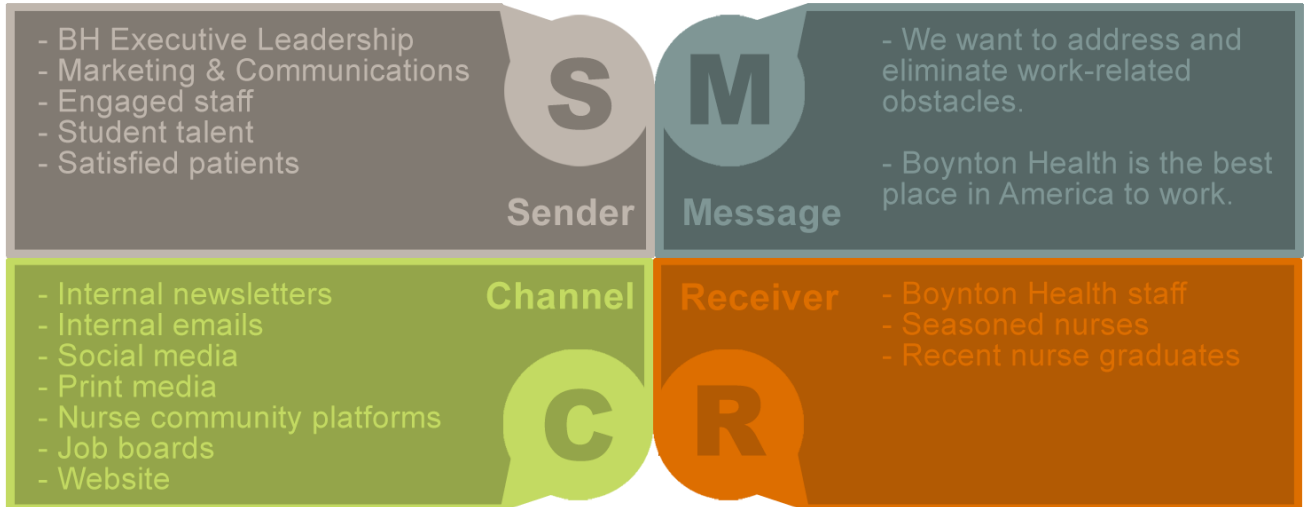
Addressing the impact of low capacity and high demand, the aim is to understand the root causes of Boynton Health's struggles in filling clinical positions. Additionally, it is vital to identify the perfect combination of the number of visits in a fiscal year to maximize income without negatively impacting the Student Service Fees income.

PLANNING

Boynton Health is not just about healthcare, but it's about public health and all that it involves. The brand voice is relatable, knowledgeable, compassionate, and fun, with a brand tone of empathy, down-to-earth, and good feeling. Some of Boynton Health's voice characteristics are dedicated, knowledgeable, irreverent, and approachable.

Voice Characteristics	Description	Do	Don't
Dedicated	We're committed to learning and understanding our patients and their needs.	Use strong words - Be champions for individual patients - Be empathetic. Use active verbs.	Be indifferent. Be apathetic. Be untrue
Knowledgeable	We will communicate with evidence-based solutions pertaining to health and wellness.	Use facts - Be thorough but concise - Verify. Be confident.	Lie - Give false or misleading information - Be cocky or arrogant.
Irreverent	We take our services seriously; we don't take ourselves too seriously.	Use colorful images, illustrations, and motion (videos). Speak to our primary target audience.	Be too casual - Use jargon - Try too hard to fit it.

SMCR



Boynton Health's problem is not having the man/woman power or capacity to serve the patient demand. In order to increase annual patient visits, it needs to increase the capabilities of the healthcare providers.

The Sender, Message, Channel, Receiver outlined would focus on Boynton Health's staff to build on purpose. The team feels disconnected from the organization and its leadership. Sending internal messages to the Boynton Health staff to engage and inform them with clear and concise direction would be critical to the communications plan. Externally, messages to the nursing community will increase awareness of Boynton Health. Nurses have many job location options, and it would be advantageous to include Boynton Health in their selection process.

The message, while simple, would need to be approached strategically. Boynton Health's staff have expressed frustration, disengagement, and lack of communication from leadership. The aim would be to address these issues and explain how leadership plans to eliminate correctable obstacles that prevent staff from success and work satisfaction. The big plan is to create an external message that ties Boynton Health to rankings that the University of Minnesota is one of the best places to work in the state of Minnesota, and the state of Minnesota is in the top 10 best states to work in America (Star Tribune, 2022) (Hubbard, 2021). Boynton Health must take a strategic approach in the messaging, as data reflects that racial disparities are ranking Minneapolis near the bottom of employment satisfaction for Black people, which may be evident by Boynton Health's turnover trends by ethnicity (Rosalsky, 2020). Using quotes from engaged staff, identifying non-white staff with high job satisfaction, sharing the benefits and work schedule/ hours, the message will highlight the positive offerings Boynton Health provides that other clinics and hospitals do not.

It is crucial internally for Boynton Health's staff to hear directly from the Executive Leadership Team and director-level leadership. The employee engagement survey results support staff wanting to receive direction from leadership, and in doing so the staff will feel their voices are heard. Using engaged staff, student patients/talent, and the marketing and communications

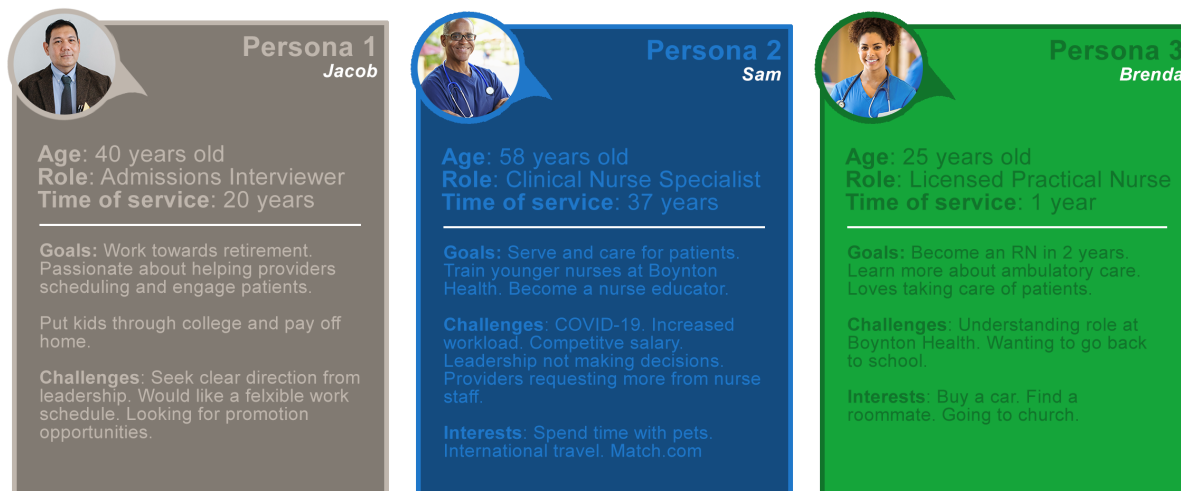
department to be the face of messaging to America's nurses may lead to heightened awareness. The aim is to put Boynton Health at the top of mind for potential applicants, by telling the story of how it could be with them as a nurse at Boynton Health.

RECEIVER MEDIA DISSEMINATION



There are two receivers we would segment our dissemination plan, Boynton Health staff, and prospective staff. To disseminate the messages the plan is to use internal emails, and newsletters, as well as in-person conversations to reach the staff. Social media, print media, nursing community platforms, job boards, and Boynton Health's website would be the best channels to get key messages to the receiver.

Personas



To garner the greatest amount of impact, Boynton Health's audience is broken down into three personas for the current problem.

Persona 1 represents Boynton Health's staff inclusive of clinical and non-clinical. Although messaging can be segmented, it would be best to speak to the collective to maintain consistency. *Persona 1* is vested in Boynton Health, well respected, and has significant influence among other staff. They are passionate about helping others and enjoy patient interaction. Over time they have seen a decrease in motivation and a sense of belonging. *Persona 1* wishes to have opportunities to work remotely, which would save them money not having to commute daily and time away from their family. Higher pay would be welcomed or more promotion opportunities made known.

Persona 2 is a seasoned clinical professional with years of experience. They want to share expertise with younger nurses, but due to nursing shortages can't find the time to break away from daily responsibilities. *Persona 2* loves to serve and care for patients, but the effects of COVID-19 have given them increased responsibilities, including cross-training in different areas which may impact the quality of care. Their fear is that patients are the most impacted by stressed nurses and providers.

Persona 3 is a recent nursing graduate seeking opportunities to grow. They want consistent work hours, good health benefits, and competitive pay. They pursued nursing when their grandparent became ill and fell in love with helping people in need of care. They are considering Boynton Health for employment but are weighing options.

Positioning

'*Taking Care of U!*' reflects Boynton Health's brand positioning. *Taking Care of U* is a phrase that encapsulates the brand's essence. It is built upon the nature and value of why Boynton Health exists. This foundational principle is a tagline that can appear on outward-facing

materials. Use it to guide communications. It should be the first thing its audience thinks or feels when they come in contact with Boynton Health. When Boynton Health engages with its target audiences, its voice should come through in its marketing and communications and is inclusive to its staff and patients.

Strategy

Perception is essential in understanding human behavior because every person perceives healthcare and employment problems differently. Given the Employee Engagement Survey Results and feedback from Boynton Health staff interviews, Boynton Health's leadership hold the responsibility of staff not feeling a sense of belonging. Additionally, the lack of clear direction disables a cohesive work environment, lending to an unwanted ambiguous workplace. The strategy is to shift Boynton Health's staff perception to become a place of cohesion and a sense of belonging. Additionally, the strategy is to present Boynton Health as the best employment option for nurses seeking change or their first job.

Shifting perception will enable the personas to grasp the issues, circumstances, or situations vital to them. Perception is important because it makes the audience visualize something and create a separate realistic idea that is logically linked to experiences they wish to have or nostalgic memories of the past.

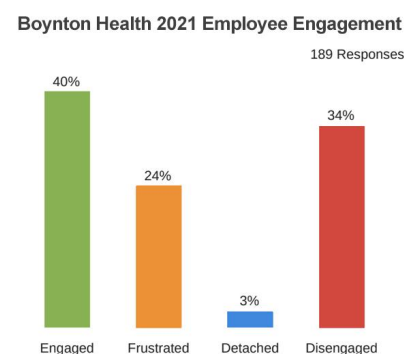
The University of Minnesota uses its athletics program for recruiting. The strategy would include Boynton Health being leveraged the same way for providing the best student health care in America and the best place to work.

IMPLEMENTATION

The goal of the strategy is to create an effective communications plan that will make the nation's nursing industry perceive Boynton Health as the best place in America to work. Influencing how Boynton Health is perceived will increase recruiting talking points for the University of Minnesota. Research and athletics tend to be at the top of mind when selling the University of Minnesota to prospective students. Being able to show how satisfied and engaged Boynton Health's staff are, coupled with being seen as the most healthy college campus in the nation would not only attract nursing professionals but build trust in the university's community.

The overall objective is straightforward, to communicate Boynton Health as the best place in America for student health care. This will be accomplished in a number of phases:

1. Increasing the employee engagement to 65% in the 2024 Boynton Health Employee Engagement Survey Results would be the responsibility of Boynton Health's Executive Leadership. Achieving this objective would require a tactic for them to listen to their staff, not only through the employee



Excerpt from 2021 Employee Engagement Survey Results (Staff), February 4, 2022

engagement survey but through in-person interactions and observations. There are key findings staff expressed that would positively impact their job satisfaction. For example, staff seek direction, respect, remote work options, and inclusion. To show staff they are being heard, a plan to address their gripes and concerns needs to be presented. If there are areas of staff concern that

cannot be met, communicating “why?” will build trust and transparency. The cost for this ongoing tactic is minimal from a financial standpoint but will take a great deal of time and planning. We will use positive employee engagement survey results and staff testimonials to create a communications campaign targeting nurses in America, looking to change organizations as well as recent graduates.

2. Giving department leaders autonomy to take ownership of their departments would be a behavior change that would give the executive team more time to address overall operational concerns. Each department director will be trained to identify the number of annual visits that will maximize profits; obtaining 80% of the annual visits needed to maximize profits by end of the fiscal year, beginning in 2023. Observations show that Boynton Health’s leadership seek direction and oftentimes withholds proactively leading their teams due to an ambiguous work environment. This tactic will transition decision-making onto the leadership team, empowering them to use data to analyze trends and make decisions that best fit their specific area instead of relying on the executive leadership to make blanket decisions that may not fit for individual units. Empowering leadership helps them to take a bird’s eye view of what’s working well and what needs improvement, requiring them to assess patient visits, patient engagement, costs of services, employee development, and the impact their area has on the overall satisfaction and profitability of Boynton Health. The cost associated with this ongoing tactic depends on each department, as leaders would evaluate what’s needed for their departments. We would create internal strategic communications around the productivity of each department based on the data the department heads collect and analyze.

3. Creating comparative university rankings similar to Niche.com and US News is another ongoing tactic to create the perception desired for Boynton Health.



Developing healthcare commonalities in universities can be compared by establishing a foundation. We would create a survey to gather information on what's important to high school students and families of high school students regarding campus health. Working with high school counselors, we would start with families of 11th and 12th-grade students in Minnesota. Compiling the data we would compose a grading system. Next, we will disseminate the grading system as a survey to students at colleges and universities in Minnesota and Wisconsin, encouraging them to provide



Image from www.niche.com/bestcolleges/search/best-colleges/

feedback by offering tangible giveaways, like Apple products or Amazon gift cards. Analyzing the grading results, we would create a ranking system, and website to show the rankings of how institutions of higher education in Minnesota and Wisconsin rank in campus healthcare. We are

recommending this tactic as Boynton Health has many "firsts" in America's student healthcare, and it has been said by the staff of over 30 years that Boynton Health's model is what other institutions try to replicate. We would need a team of six staff members. Five of them with partial assignments and one full-time to would manage the entire process. This annual project would start in October each year in preparation for the spring when families start finalizing decisions on their students' academic future.

Additionally, another ranking we want to be included in would be the Star Tribune's annual Best Places to Work in Minnesota. If Boynton Health can be

known as the healthiest college campus in the nation and the best place to work in Minnesota, it would motivate nurses to consider Boynton Health as an option for their next career move.

We would simultaneously work on all three tactics. The initial estimated annual budget for these would be \$26,910.80 to cover the costs of acquiring listservs, manpower for developing surveys, building the webpage, posting paid job ads, dissemination of content, and marketing the ranking results.

BUDGET BREAKDOWN

Budget Category (type/description)	In-house Expense	Outsource Expense	Total Category
Content Creation	(\$ per hour x hours per month)	(\$ per hour x hours per month)	
Writing		\$24.74 X 30 hours	\$742.20
Graphics		\$29.92 X 80 hours	\$2,393.60
Video	\$41.00 X 100 hours		\$4,100.00
Job Board Ads	n/a	monthly rate	
LinkedIn		\$50.00 X 3 months	\$150.00
Indeed		\$75.00 X 3 months	\$225.00
Nurse Recruiter		\$250.00 X 3 months	\$750.00
Survey	n/a	per survey costs	
Writing		\$1500.00	\$1500.00
Dissemination		\$3,000 X 4 months	\$12,000.00
Analysis		TBD	\$
Marketing	(\$ per project x month)	(# pieces content x \$ per project)	
Email		\$350.00 X 2 months	\$700.00
Social media	\$250.00 X 3 months		\$750.00
College rankings ads	\$1200.00 X 3 months		\$3,600.00
Total	\$8,450.00	\$18,460.80	\$26,910.80

EVALUATION

Measurement of these tactics is straightforward and has different methods to gauge success.

Internal and external survey results would be used to measure the progress of **tactic one**.

Developing an internal perception survey for staff to assess how they perceive Boynton Health and the progress of implemented change will aid leadership with gauging the impact the mission, vision, and values have on the staff. Additionally, the University of Minnesota's Employee Engagement Survey Results will provide data on how Boynton Health has progressed and can be weighed against, OSA and the University.

The identified problem is Boynton Health's ability to increase capacity to meet demand. The first metric would be to monitor patient visits monthly, quarterly, and annually, identifying trends and aligning with marketing strategies.

Tactic two encourages behavior change from each director to take ownership of their departments using appointments and visits data to make informed decisions on what is needed to maximize income through patient visits. To measure the progress we would departmentally and organizationally monitor the patient visits data. These data will be used to identify trends and the impact of marketing and communications efforts. Other metrics to evaluate will be profit and loss statements, not only for Boynton Health collectively but within each department individually. Each director can assess what is working and how their department impacts the overall budget through billable services that generate revenue.

Tactic three is the most aggressive and would require the most effort and resources. Creating qualitative surveys for families of high school students will give Boynton Health an understanding of what's important to prospective students. The results from this survey will be a resource to streamline the services it provides, and be the basis for a ranking system to

compare how Boynton Health ranks with other university student health facilities. After a student healthcare ranking system is established, annual survey questions will be disseminated along with other college and university ranking data collection through U.S. News and Niche. Once the annual results are posted, Boynton Health can assess how they align with other institutions in America. If Boynton Health ranks within the top 50 institutions in the United States, this can be used in its marketing and communications efforts. The higher the ranking the easier it would be to encourage the University's recruitment and public relations offices to use Boynton Health in communications as one of the healthiest college campuses in America.

An internal measurement would be monitoring patient visits, increased staff, and an increase in media requests. Reviewing the vacancy and turnover data would also help to gauge if the rankings and change in perception increased Boynton Health's nursing staff.

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APPENDIX

1. [2022 Boynton Health Staff Breakdown by Industry](#)
2. [2021 Boynton Health Employee Engagement Survey Results](#)
3. [Boynton Health Patient Satisfaction Survey \(July 1 - December 21, 2021\)](#)
4. [Boynton Health Trending Annual Departures \(2016 - 2022\)](#)
5. [Boynton Health Trending Hires \(2016 - 2022\)](#)
6. [Boynton Health vs. External Turnover Report \(2022\)](#)
7. [Boynton Health Turnover Trending by Age Bands \(Annual\)](#)
8. [Boynton Health Turnover Trending by Employees with Disabilities \(Annual\)](#)
9. [Boynton Health Turnover Trending by Employees with Disabilities](#)
10. [Boynton Health Turnover Trending by Ethnicity \(Annual\)](#)
11. [Boynton Health Trending by Ethnicity \(2018 - 2022\)](#)
12. [Boynton Health Turnover Trending by Legal Sex \(Annual\)](#)
13. [Boynton Health Executive and Leadership Interviews](#)
14. [Nursing Staff Interviews - Boynton Health and VA](#)