

Employer of Choice ® Resubmission Application

1. What was the total income for your organization?

*income includes all receipts from sales of services or products.

Please list for: 2009 \$

2. How much before tax, net income from overall operations did your organization earn?

*For Net Income, please take net sales revenue less cost of goods sold, minus operating expenses. Do not include extraordinary items or discontinued operations.

Please list for: 2009 \$

3. What was your net income as a percentage of net revenue?

*For Net Income, please take net sales revenue less cost of goods sold, minus operating expenses. Do not include extraordinary items or discontinued operations.

Please list for: 2009 %

4. What was the average number of full-time (or Full-Time Equivalent) employees?

*Full Time Equivalents are permanent employees that are scheduled for 32+ hours per week.

Please list for: 2009

5. How many temporary/part-time workers did your organization employ?

*These are workers that are scheduled for less than 32 hours per week or are temporary.

Please list for: 2009

6. How many total full time (or Full Time Equivalent) employees have left your organization?

*This number should include the total number of voluntary uncontrolled separations during the quarter and exclude separation due to death, illness, pregnancy, relocation, performance or discipline, cutbacks due to mergers, cyclical layoffs, and permanent reductions in force.

Please list for: 2009 Gross =

Please list for: 2009 Voluntarily =

7. What was your total employee payroll (in US dollars)?

*Payroll includes all forms of compensation, such as salaries, wages, commissions, dismissal pay, bonuses, vacation allowances, sick-leave pay, and employee contributions, to qualified pension plans paid during the year to all employees. For corporations, payroll includes amounts paid to officers and executives; for unincorporated businesses, it does not include profit or other compensation of proprietors or partners. Payroll is reported before deductions for social security, income tax, insurance, union dues, etc.

Please list for: 2009 \$

8. How much money did your organization spend on learning, training and development?

* This number should include money spent on orientation, employee development, leadership development, online learning, offsite seminars and training, materials, tuition reimbursement and trainer's salaries. You should not include wages for employees while attending training events or travel expenses (e.g. hotel, mileage, meals, etc.).

Please list for: 2009 \$

9. How many hours of professional development are required by your organizations leadership team?

Please list for: 2009

10. LER (Labor Expense Ratio)

*Compensation and benefits as a % of organization's overall revenue

Please list for: 2009

11. FTE's per AOB (adjusted occupied bed)

*Gross revenue includes all receipts from sales of services or products.

Please list for: 2009

12. Patient Satisfaction.

How do you measure patient satisfaction:

How often do you measure patient satisfaction:

What is your overall percentile rank for patient satisfaction

12. Physician Satisfaction.

How do you measure physician satisfaction:

How often do you measure physician satisfaction:

What is your overall percentile rank for physician satisfaction

13. Clinical Quality

Mortality Rate

ALOS (average length of stay)

Complication Rate

Surgical Infection Rate

14. Additional Performance Measures

Employee Turnover % (Total Turnover not Voluntary)

CMI (case mix index) adjusted cost per admission

3 year Market Share