

Strategic Plan – Key Strategies

FY 2015 – FY 2019



South Peninsula Hospital
Homer, Alaska

TABLE OF ABBREVIATION

ACA	Affordable Care Act
ACO	Accountable Care Organizations
ADC	Average Daily Census
ALOS	Average Length of Stay
ANMC	Alaska Native Medical Center
ANTHC	Alaska Native Tribal Health Consortium
ASHNHA	Alaska State Hospital & Nursing Home Association
BRFSS	Behavioral Risk Factor Surveillance Systems
CAH	Critical Access Hospital
CHOICE	Community Home Options to Institutionalized Care for Everyone
CNM	Certified Nurse Midwife
CMS	Centers for Medicare and Medicaid Services
CON	Certificate of Need
CPH	Central Peninsula Hospital
CT	Computed Tomography
DEXA	Dual Energy X-ray Absorptiometry (Bone Densitometry Test)
ENT	Ear, Nose and Throat
ER	Emergency Room
FQHC	Federally Qualified Health Centers
FY	Fiscal Year
HCAHPS	Hospital Consumer Assessment of Healthcare Providers and Systems
ICU	Intensive Care Unit
ICD	International Classification of Diseases
IT	Information Technology
KPB	Kenai Peninsula Borough
LTC	Long Term Care
MAPP	Mobilizing for Action through Planning and Partnerships
MRI	Magnetic Resonance Imaging
OB/GYN	Obstetrics & Gynecology
PCA	Personal Care Attendant
PEPM	Per Employee Per Month
PSA	Primary Service Area
QI	Quality Improvement
SAB	Service Area Board
SLOA	Sublease & Operating Agreement
SPH	South Peninsula Hospital
SPHI	South Peninsula Hospital, Inc.
SPHSA	South Peninsula Hospital Service Area
SVT	Seldovia Village Tribe
US	Ultrasound
VA	Veteran's Administration

KEY STRATEGIES FOR SUCCESS – FY 2015 - 2019

The following key strategies were developed by the Board of Directors and help direct the five year goals and objectives which were developed from the key findings in the South Peninsula Hospital FY 2015-2019 Strategic Plan. Goals and objectives will be prioritized annually, and specific action plans written and adopted for implementation purposes. Quarterly updates will be provided to the Board of Directors to track the status.

1. Maintain and enhance the reputation of SPH by focusing on services and clinical excellence.

The leadership of SPHI must develop and maintain a strategic plan that is consistent with the hospital's mission, vision and values; clearly communicate the strategic plan throughout the organization; and provide a framework to accomplish the goals of the strategic plan. Provide a framework for planning, coordinating and improving healthcare and administrative services which are responsive to community, patient and staff needs. Ensure all contract requirements as identified in the SLOA are met.

2. Continuously improve organizational performance throughout the hospital:

South Peninsula Hospital's performance is measured through the Centers for Medicare and Medicaid Services (CMS) Critical Access Hospital survey and Hospital Consumer Assessment of Health Plans Survey (or Hospital CAHPS®). SPH's Long Term Care performance is measured both by state and federal surveys as well as CMS's Nursing Home Compare tool available for viewing at <http://www.medicare.gov/NHCompare/>.

Quality Improvement: SPHI must maintain a quality improvement plan which addresses employee, management, medical staff and board education; continuous quality improvement; resource allocation; and measurable success criteria.

Control of infection: SPHI will coordinate its activities related to the surveillance, prevention and control of nosocomial infections and link with support systems to reduce the risks of infection from food and water.

Assessment of patients: That qualified individuals assess the needs of each patient; plan care to address identified needs; and these assessments should continue throughout the patient's contact with the organization.

Care of patients: All interventions must respect and encourage the patient's ability to make choices; to develop and maintain a sense of achievement; and to choose to continue or modify his or her participation in the care, treatment and rehabilitation.

Joint Commission accreditation strategy: SPHI will build on the quality improvement plans in such a manner as to position the hospital for attaining Joint Commission accreditation when economically feasible.

3. Maintain, improve and develop new strategic physician/hospital partnership relationships:

With the input and support of the medical staff, SPHI must outline future partnership strategies between the hospital and medical staff which supports the practice of medicine, provides access to services for the community, and support the service delivery role of the hospital in accordance with health care reform.

4. Provide services that increase utilization of SPHI as a first choice medical facility and service point in the service area.

Patient focused functions: SPHI must identify those programs and services which meet the healthcare needs of the community, are consistent with the clinical expertise of the medical staff, promote utilization and financial growth, and support the achievement of the hospital's mission.

5. Assure positive financial performance, cost justified rates and appropriate reimbursement strategies:

SPH must position itself as a cost-effective, quality provider while maintaining a positive financial position through service growth and expense controls. Any capital project funding must limit long-term debt. Provide financial budget directives for administration use in preparing for financial objectives. Continue to monitor implications and financial impact of critical access hospital status.

6. Assure appropriate management of human resources:

SPHI must define the qualifications, competencies and staffing needed to carry out the mission; attract staff to fill these requirements; minimize turnover of staff; and implement processes to ensure that the competence of all staff members is assessed, maintained and improved throughout their association with the hospital.

7. Provide for cost effective technology, information management and equipment usage:

SPHI must develop access to those technologies including information management technology that will provide cost-effective improvements in patient care and maximize the staff capability to use the technology that is available to them.

8. Provide a facility and campus with resources and space to best support organizational goals:

SPHI must provide adequate, updated sufficient space to meet the health care needs prioritized by the community when feasible. This includes but not limited to best utilization of facilities and space, planned maintenance and expansions to support the organization's strategic plan.

KEY STRATEGY IMPLEMENTATION

Strategy #1

Maintain and enhance the reputation of South Peninsula Hospital by focusing on services and clinical excellence

Goals

- Patient-centered care model of service
- New services that meet community need and are cost effective
- Increased community awareness of services offered
- Meet the demand of senior health needs
- Increased market share of service area, and decreased outmigration
- Healthier community

Team Leaders

Chief Executive Officer

Director of Patient Care Services

Quality Improvement Director

Marketing, Public Relations Coordinator

Objectives

- Adopt patient centered medical home model at Homer Medical Center
- Educate service area on service excellence and quality of care
- Recruit staff and physicians essential to offering additional services
- Recruit staff and physicians essential to clinical excellence
- Develop a targeted marketing plan for new services and service excellence
- Optimize physician use of hospital services
- Provide service excellence and high quality care using the patient centered care model
- Maximize the skilled clinical resources
- Complete a long-range plan for senior care, including feasibility assessment of expanded services including but not limited to oncology, urology, diabetes, arthritis, Alzheimer’s care and end of life care.
- Continue designation as a Trauma Level IV facility, including but not limited to councils and enhanced partnerships with community-level EMS groups
- Increase presence in outlying clinics
- Support staff and physician education for best practices and quality care
- Determine the feasibility of adding services related to substance abuse and mental health
- Provide community education on preventative, prevalent health-related diseases and those related to leading causes of death
- Integrate findings from community health needs assessment into the strategic plan
- Develop a sustainability plan for MAPP of the Southern Kenai Peninsula in regards to health needs assessments and addressing population health

Indicators

Patient outmigration / patient volumes

HCAHPS scores

Revenue

National quality reporting indicators

Total patient encounters

Additional senior services

Patient satisfaction surveys

Sufficient primary care providers

CMS core measures of performance

Payer contracts for ACA medical home services

Health status measures

Secured funding source for MAPP

Strategy #2

Continuously improve organizational performance throughout the hospital, including quality improvement, control of infection, assessment of patients and care of patients.

Goals

- Embody a culture of patient-centered care
- Align Quality Improvement with Affordable Care Act provisions.
- Drive hospital decisions by the goals defined in the strategic plan.
- Incorporate quality improvement, infection control, risk management, utilization and patient safety goals into daily operations.
- Provide service excellence
- Provide effective management of disaster occurrences with fully trained and prepared staff and plans

Team Leaders

Chief Executive Officer
Quality Improvement Director
Director of Patient Care Services

Objectives

- Update and implement the plans for quality improvement, infection control, risk management, utilization and safety
- Support accreditation, memberships, staff certifications and educational opportunities to improve standards of excellence
- Communicate, educate and promote hospital goals and objectives to staff and physicians and empower staff and committees to implement organizational objectives
- Designate resources to implement organizational goals (education, equipment, tools, money, etc)
- Utilize best practices for performance improvement, to meet national quality standards and meet the needs of the community
- Use organizational scorecards and unit based dashboards for benchmarking
- Establish and empower a Patient Centered Care committee
- Ensure hospital practices stay current with national healthcare standards
- Optimize levels of care utilization (observation, Swing Bed, ICU, acute care, etc.)
- Support physicians in their changing roles defined by the Affordable Care Act
- Utilize proven management principles (Studer, LEAN, 6 Sigma, etc) for effective leadership
- Meet current CMS requirements for emergency preparedness
- Utilize HPP grant and EMT committee for necessary planning and training related to emergency preparedness

Indicators

Patient satisfaction surveys	Utilization Management data
Quality Scorecard	Employee and facility certifications and accreditations
Physician satisfaction	Peer review
Quarterly reports on strategic plan action items	Trauma standards
Quality benchmarks	
Infection Control Rates	
Increased Swing Bed admissions	

Strategy #3

Maintain, improve and develop new strategic physician/hospital partnership relationships

Goals

- Adopt a succession plan to address retiring medical staff (including leadership and directors) to seamlessly maintain existing level of service and care
- Align South Peninsula Hospital and Homer Medical Center to be a Patient Centered Medical Home
- Involve physicians in organizational quality initiatives
- Assure appropriate mix of providers and services to adequately meet the needs of the service area
- Implement ICD-10 by October 2015
- Use best-practice standards consistently in patient care
- Provide an effective, comprehensive peer review platform

Team Leaders

Chief Executive Officer
 Chief of Medical Staff
 Quality Improvement Director
 Medical Executive Committee
 Director of Patient Care Services
 Chief Financial Officer

Objectives

- Create a Medical Staff Development Plan in collaboration with Medical Staff and Board of Directors
- Recruit providers based on the Medical Staff Development Plan, while incorporating community input via the community health needs assessment, community surveys, and population statistics
- Recruit or contract with providers necessary for Patient Centered Medical Home, including but not limited to behavioral health
- Designate a physician champion on all pertinent committees
- Education, training and support for physicians in the transition to ICD-10 implementation and documentation requirement
- Develop a consistent, internal and external peer review process
- Maintain a high degree of quality by consistent application of best practice standards and associated order sets
- Homer Medical Center providers will adopt new treatment practices to implement Patient Centered Medical Home, including chronic disease management, etc.

Indicators

Revenue	Accurate documentation to support ICD-10 implementation
Physician satisfaction	Appropriate reimbursements
Patient volume	Hospital Compare measures
Patient encounters	Patient Centered Medical Home contract with payers
Expanded medical services	QI Scorecard
Uninterrupted services upon physician retirement	Medical Executive Committee–Peer Review reports
Recruitment success	
Physician engagement and input	

Strategy #4

Provide services that increase utilization of South Peninsula Hospital as a first choice medical facility and service point in the service area

Goals

- Provide services that align with the health needs of the community
- Accommodate the healthcare needs of the growing senior population
- Offer new services needed by community that are sustainable
- Capture patient outmigration for services already provided

Team Leaders

Chief Executive Officer

Homer Medical Center Medical Director

Chief Financial Officer

Director of Patient Care Services

Director of Marketing and Public Relations

Management team

Objectives

- Provide services required by seniors, such as cardiology, urology, Alzheimer’s care, cancer care, pulmonary, dementia, geriatric psychiatry and depression, obesity, circulatory, gastrointestinal, dental, nutrition, wound care, ophthalmology, podiatry, medication management, home care services, etc.
- Promote education, wellness and prevention medicine to address and prevent chronic illnesses (obesity, diabetes, cardiac, cancer, pulmonary, mental health, etc.)
- Offer expanded walk-in clinic services
- Evaluate home care services and business practices for a sustainable role in Patient Centered Medical Home
- More frequent surveying of the community regarding their hospital usage and needs
- Use data from community health needs assessment, community surveying and outmigration patterns to help evaluate current services and identify potential new services
- Build on primary care services including family practice, OB/GYN, walk-in clinic, internal medicine, PT/OT/SLP.
- Provide services required by childbearing age families including but not limited to reproductive care, prenatal care and primary care for children.
- Address leading causes of death with wellness, screenings, preventative services, improved access to care and education (cardiology, pulmonary care, mental health issues, cancer, accidents and injury prevention)
- Expanded specialty clinic services where cost effective, considering cardiac, cancer, circulatory, pulmonary, gastrointestinal, neurology, dermatology, nephrology, podiatry, plastic surgery, allergist and more
- Grow volume of existing specialties by increased marketing, education and community outreach to expanded geographical areas including but not limited to Ninilchik Explore economic feasibility for services related to substance abuse, addiction and mental health.
- Develop a five year plan for Long Term Care that includes range of services, medical directorship, marketing and facility needs

Indicators

Patient outmigration

Patient volume

Resident volume

Outpatient volume

Financial performance in home care service line

Extended hours in primary care

Patient admission profile

HCAHPS

Specialty clinic volumes

Available, relevant community survey data

Strategy #5

Assure positive financial performance, cost justified rates and appropriate reimbursement strategies

Goals

- Meet Best Practice standards to ensure maximum reimbursement under Value-Based Purchasing.
- Optimize utilization and case management for maximum reimbursement.
- Align financial accounting with new payment models of Affordable Care Act.
- Maximize reimbursement opportunities under critical access hospital status
- Adopt a balanced budget with controlled expenses and maximized revenues, resulting in a positive EBITDA
- Support legislation that provides access to care for the uninsured
- Offer sustainable home care services

Team Leaders

Chief Executive Officer

Chief Financial Officer

Quality Improvement Director

Objectives

- Quality improvement, risk management, infection prevention and utilization management practices are included in daily operations
- Provide flexible billing and coding systems that meet new payment models of the Affordable Care Act
- Provide staff development and training on cost reimbursement strategies of critical access hospitals
- Incorporate strategic plan goals into manager development and accountability of the budget
- Identify and assist high risk uninsured patients to enroll in eligible program.
- Work with ASHNHA to influence legislation to expand Medicaid and require insurers to pay as mandated under the Affordable Care Act
- Adjust home care services billing practices for optimal reimbursement and sustainability
- Educate physicians and staff on accurate documentation practices to maximize charge capture and successfully transition to ICD-10
- Develop a Utilization Management and Case Management programs that maximize patient services, optimize levels of care utilization (observation, swing bed, ICU, acute care, etc) and improve financial reimbursement
- Focus on standardization process management, productivity and staffing plans that ensure greater efficiencies and cost savings
- Contain and manage rising employee healthcare costs
- Seek out other sources of funding, including grants, designations, donors, etc.

Indicators

Bad debt

Charity care

Legislation for expanded Medicaid program

Net revenue

Operating margin

Commercially insured patient volume

Monthly budget analysis with management

Swing Bed utilization

Quality scorecard

Monthly operating indicators

Productivity

Reduced PEPM total

Denials

Reduced self-pay

Home care financial indicators

Utilization Management data

Strategy # 6

Assure appropriate management of human resources

Goals

- Maintain a fully staffed, highly skilled labor force
- Achieve and maintain a high level of employee engagement, including staff, medical staff, managers, contractors, etc.
- Offer continuing education and training to meet healthcare standards
- Support an aging workforce

Team Leaders

Chief Executive Officer

Chief of Staff

Director of Human Resources

Director of Patient Care Services

Quality Improvement Director

Medical Staff Office

Management Team

Education

Objectives

- Adopt best practices for recruitment, hiring and retention that support service excellence and employee retention. (e.g. mentorships, early employment interview, update job descriptions, etc)
- Create workforce development programs for entry-level positions
 - Strengthen preceptorship program, curriculum and cross training opportunities for clinical positions
 - Participate in fellowships for clinical positions when available (ASHNHA, consortiums, etc.)
 - Partner with Kachemak Bay Campus of Kenai Peninsula College to best meet our workforce needs
- Revise and ensure competency standards for all staff
- Coordinate efforts to better serve employed providers (recruitment, hiring process, orientation, retention, education, etc.)
- Provide training and resources for key personnel leading the transition to Value-Based Purchasing
- Develop and promote an employee wellness program that meets the needs of all, and directly addresses the concerns of our aging staff. Consider employee accountability, responsibility, incentives, promotions, etc.
- Develop a plan to address the impact of the aging workforce, their potential inability to perform all functions of job descriptions and other considerations in the workplace
- Provide training for ICD-10, Meaningful Use and other healthcare mandates for affected staff
- Offer support to management team through development opportunities, training and recognition
- Recruit best talent to support quality care, best practices and expanded services
- Develop a succession plan for hard to fill and anticipated staff and provider vacancies
- Reduce contract staff dependency
- Offer employment practices to accommodate the interests and practices of the new workforce generation, including but not limited to HR procedures, benefits package, equipment, training and communication tools

Indicators

Core competencies

Turnover rate

Employee engagement

Hard-to-fill list

Vacancy rates

Healthcare claims

Employee injuries

Turnover

Improved reimbursement

Coding audit findings

Exit interviews

Contract labor usage

Productivity

Strategy # 7

Provide for cost effective technology, information management and equipment usage

Goals

- Ensure capital funding is available to provide service excellence, quality care and state of the art technology
- Use a modern technology infrastructure to support hospital growth, security and operations
- Meet Meaningful Use measures as they evolve

Team Leaders

Chief Executive Officer

Chief Financial Officer

Facilities Director

Director of Patient Care Services

IT Director

IT Steering Committee

QI Director

Objectives

- Provide staff training, support and customer service for improved utilization of technology
- Use niche marketing to promote advanced technology used in patient care
- Utilize technology to increase and improve access to care
- Secure equipment and technology necessary to improve existing infrastructure
- Implement the information systems plan for equipment and system upgrades and replacement
- Improve operating margin to meet capital project needs
- Address technology needs of the new workforce generation
- Consider systems applications to enhance existing information management systems
- Provide ongoing staff training to meet Meaningful Use and quality measures
- Develop a replacement schedule for equipment costing greater than \$150,000.

Indicators

Patient satisfaction

Employee satisfaction

Outpatient volumes

Physician satisfaction and retention

Added useable square footage

Capital purchases funded through operations

Meaningful Use measures

Strategy # 8

Provide a facility and campus with resources and space to best support organizational goals

Goals

- Provide sufficient space and facilities for hospital and clinic services to meet the health services demands of the service area.
- Provide sufficient, functional office space for non-clinical support of hospital and clinic services.
- Identify risks and opportunities which surround the hospital and clinic campus(es).
- Get maximum efficiencies and uses out of existing facilities.

Team Leaders

Chief Executive Officer

Chief Financial Officer

Facilities Director

Management team

Objectives

- Expand Homer Medical Center facility
- Provide adequate office space for the Patient Financial Services department.
- Develop a long-range facilities plan, including a specific goal for the shelled space, which takes into account the anticipated growth defined in the strategic plan and the necessary resources to develop.
- Allocate sufficient space to support growth of outpatient services and PCMH services (with consideration for on-site behavioral health care)
- Research the need for hillside reinforcement behind the hospital.
- Consider facility needs in the development of the long term care expansion plans.
- Consider the feasibility of purchasing leased buildings that have the purchase option.
- Regular maintenance, remodels, renovations and improvements will be used to extend the life and capacity of the hospital and clinics.
- Develop a replacement schedule for equipment costing greater than \$150,000.

Indicators

- Patient and resident satisfaction
- Employee satisfaction
- Outpatient volumes
- Additional services

STRATEGY MAP

Mission

South Peninsula Hospital promotes community health and wellness by providing personalized, high quality, locally coordinated healthcare.

Vision

South Peninsula Hospital is the healthcare provider of choice, with a dynamic and dedicated team committed to service excellence.

