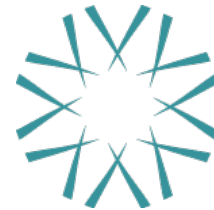


Strategic Action Planning

**Small Rural Hospital Transition
HELP Webinar
February 16, 2016**



**NATIONAL
RURAL HEALTH
RESOURCE CENTER**

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Rural Health Value Project

■ Vision

- To build a knowledge base through research, practice, and collaboration that helps create high performance rural health systems



■ Partners

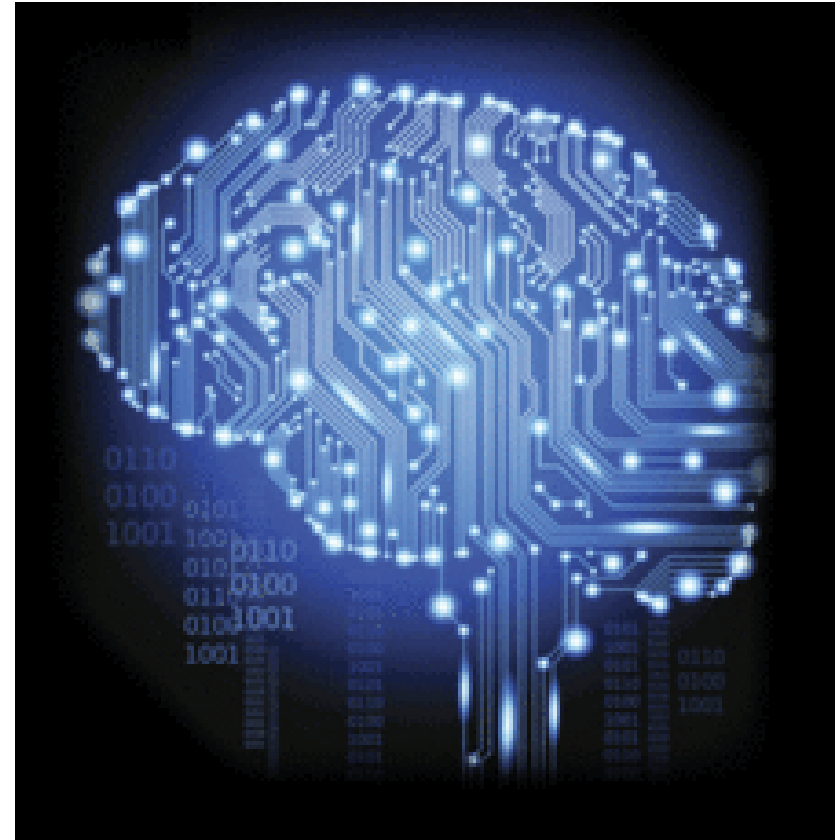
- Second 3-year FORHP Cooperative Agreement
- RUPRI Center and Stratis Health
- Support from Stroudwater Associates, WIPFLI, and Premier

■ Activities

- **Tool & Resource** development, compilation, and dissemination
- Technical assistance
- Research

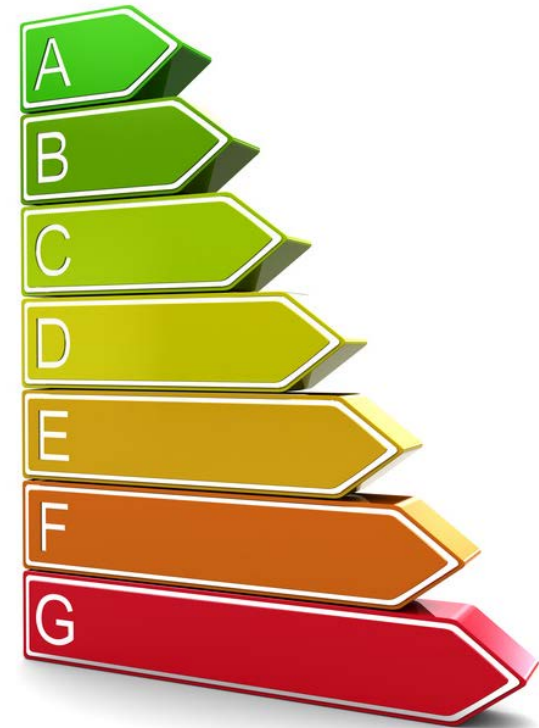
VBC Tool Purpose

- Assist rural healthcare organizations develop *value-based care* capacity
- Educate leaders, directors, stakeholders
- Prioritize action as part of strategic planning
- Identify tools and resources to benefit rural healthcare people, places, and providers



VBC Tool Design

- An online assessment tool
- Designed to assess 121 value-based care *capacities* grouped in eight *categories*
 - Governance and Leadership
 - Care Management
 - Clinical Care
 - Community Health
 - Patient and Family Engagement
 - Performance Improvement
 - Health Information Technology
 - Financial Risk Management



VBC Tool Capacities

- Value-based care *capacities* are healthcare organization resources, processes, infrastructure (etc.) to deliver value-based care
- VBC Tool Capacity Examples
 - HCO assesses and identifies patients at high risk for poor outcomes or high resource utilization, and assigns care managers to them.
 - For non-urgent clinic visits, pre-visit planning occurs for complex patients.
 - HCO strategic planning incorporates measurable population health goals that reflect health needs of the community.



VBC Tool Assessments

- Possible *responses* for each value-based care capacity
 1. Fully developed and deployed
 2. Developed, incompletely deployed
 3. In development
 4. In discussion
 5. Not applicable
 6. Not considered



VBC Designed for Action Planning

- Like classic strategic planning
 - SWOT analysis
 - Capacity strengths are those you've assessed as #1 or #2
 - Capacity opportunities are those you've assessed as #3
 - Capacity considerations are those you've assessed as #4, #5, #6, or blank
- But more enjoyable because focused and action-oriented!



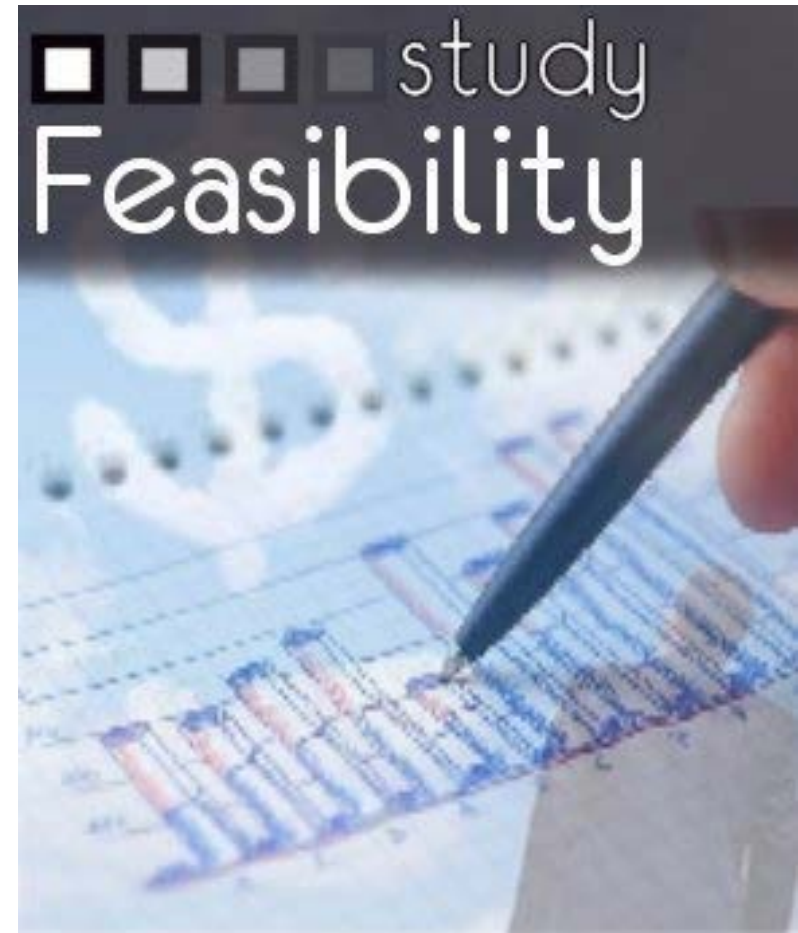
Assess Support for Action

- List all capacities that you assessed as #3 (In Development)
 - Add other capacities that your leadership team finds important
- Define *support* criteria
 - Leadership commitment
 - Organizational resources available
 - Staff interest
- Assess each capacity by support
 - 3 = strongest support
 - 2 = midrange support
 - 1 = weakest support



Assess Feasibility for Action

- Add the numbers for each capacity
- Add a “gestalt” factor
 - Which of these capacities feels the most important to the hospital and its future?
- Pick two or three highest support capacities for action plan development



Prioritization Table

Capacity	Commit	Resource	Interest	Total
Generate actions lists for providers of patients who are due/overdue for services.	2	1	3	6
Offer chronic disease management services.	3	1	3	7
Identify a champion specifically tasked with accountability for community health improvement.	3	1	2	6
Include a leadership position specifically tasked to oversee and develop patient and family engagement activities.	1	2	1	4
Tailor performance data presentation to the stake-holder such that the data are actionable.	3	3	3	9
Discuss value-based care performance during most internal and public meetings.	1	3	1	5
Train managers in continuous quality improvement techniques.	3	1	1	5

Action Plan Development

- Mandatory action plan inclusions
 - Measureable objectives
 - Single person accountability
 - Resource commitment
 - Timeline and due dates
- Requires *leadership attention*
 - The currency of leadership
 - We achieve what we attend to



Sample Action Plan

Offer chronic disease management (CDM) services (start: 7/1/2015)

Objectives	Accountability	Resources	Due Date
Identify professional skill set and experience necessary for CDM manager position	DON	Current DON duties	8/1/2015
Determine FTE required for CDM manager position and post job announcement (or advertise)	DON	Current DON duties	8/1/2015
Hire (or reassign) CDM manager	CEO	Current CEO duties	9/1/2015
Allocate resources for CDM manager compensation and education	CEO	0.5 FTE RN compensation	9/1/2015
Research CDM programs in similar situations	CDM Mgr	Current CDM Mgr duties	11/1/2015
Attend appropriate CDM educational conference and obtain appropriate CDM written and web-based resources	CDM Mgr	\$2,000	11/1/2015
Develop CDM financial pro forma (include additional resources, if required) and present to CEO	CDM Mgr	Current CDM Mgr duties	12/1/2015
Present abbreviated pro forma to Board	CDM Mgr	Current CDM Mgr duties	1/15/2016
Approve new CDM program and allocate resources	CEO	Based on pro forma	1/15/2016
Establish CDM team and accountabilities	CDM Mgr	Current CDM Mgr duties	2/1/2016
Establish process to identify patients most appropriate for CDM	CDM Mgr	Current CDM Mgr duties	2/15/2016
Develop policies and procedures for CDM program operation in consultation with CDM team	CDM Mgr	Current CDM Mgr duties	3/15/2016
Identify a trial cohort of CDM patients	CDM Mgr	Current CDM Mgr duties	4/1/2016
Establish health status and financial metrics for CDM patients, obtain data, and then measure baseline status	CDM Mgr	Current CDM Mgr duties	5/1/2016
Apply CDM program to trial cohort of CDM patients	CDM Mgr	Current CDM Mgr duties	5/15/2016

What's Next

- Use a prioritization process to select 2 or 3 value-based care capacities for action
- Develop your action plans
- Leadership must stay engaged
- Go forth and do good for rural people and places!
- Please contact Clint MacKinney with questions
clint-mackinney@uiowa.edu

