Yale NewHaven Health Greenwich Hospital

# Fiscal Years 2018-2020 Business Plan

**Confidential** 

# YNHHS Strategic Framework FYs 2018-2020

Yale NewHaven **Health** 

	Prov	ide Unparalleled \	/alue		
Inspire a Culture of Excellence	Ensure Patient- Centered Care	Enhance Clinical Services	Manage Total Cost of Care	Sustain Financial Strength	
Academic Excellence Diversity/Inclusion Employee/Physician Engagement Governance & Organizational Structure Innovation Talent Management Technology and Analytics	Customer Experience  Patient Safety  Quality/Benchmark  Outcomes	Ambulatory Network  Clinical Program Excellence  Physician Alignment  Service Line Integration  System Scale	Clinical Integration and Network  Coordinated Care Management Across the Continuum  Healthy Communities  Infrastructure  Operational and Clinical Effectiveness	Alignment of Paymen Models  Capital Deployment  Financial Integration  Financial Performanc  Philanthropy	
Yale New Haven Health is committed to innovation and excellence in patient care, teaching, research and service to our communities.					

	GOALS OBJECTIVES		2018	2019	2020
	1.1 Support academic	Support leadership skill development in GME	•	•	•
	excellence	Support the new clinical program development corporation	•		•
	<u>SL</u>	Support the recruitment of excellent clinical chairs/chiefs across YNHHS			
	1.2 Enhance Diversity and Inclusion	<ul> <li>Develop and implement work plans to address four domains: Marketing and Community Engagement,</li> <li>Workforce Development, Patient Relations and Experience and Supplier Diversity</li> </ul>	•	•	•
	<u>NGR/MT</u>	<ul> <li>Increase percentage of business that YNHHS does with minority and women owned businesses to support diversity of vendors (CO)</li> </ul>	4%		8
		Fully install reconstituted Diversity and Inclusion Committee	•		
(A)		Begin affinity groups and other initiatives	•		
ဗ	1.3 Enhance employee,	Assess/modify/reinforce employee engagement action plans based on 2017 survey results	•		
ence	management and physician	Attain improved employee engagement FY 2018 results with minimum achievement at threshold level (CO)	•		
12	engagement and communication	<ul> <li>Develop consistent rewards and recognition programs across YNHHS as appropriate</li> </ul>	•	•	
Excel	<u>MT/SL/SB/AC/MK</u>	<ul> <li>Implement plans to address issues identified in physician engagement surveys</li> </ul>	•		
		Implement plans to decrease physician burnout	•	•	•
of		Conduct research to monitor and improve the culture of excellence			
Culture		- Conduct culture interviews in select departments	•		•
=======================================		- Conduct new employee follow-up interviews at regular milestones			•
3		Offer at least two opportunities to celebrate/connect with employees			•
C		Continue to provide leadership exposure to staff	000000000000000000000000000000000000000		
Q		- Conduct administrative rounds	•		•
9		- Conduct monthly "Conversations with Norm"	•		•
<u>a</u>		- Conduct Town Hall Meeting series			•
nspire		- Continue monthly "Tea with Anna"	•	•	
	1.4 Ensure effective	Align System governance to support strategy and operations	•		
	governance and organizational structure	Ensure "Systemness" to achieve performance excellence	•		•
	MPB/NGR	● Enhance diversity of the GH Board	•		•
	1.5 Develop a culture of	Create and sustain a culture of innovation			
	innovation	- Develop and implement a Value Innovation Council	•		
	<u>VT/GC/NGR</u>	<ul> <li>Support development opportunities for innovation throughout the System by creating an internal innovation fellowship program to include the development of intellectual property guidelines</li> </ul>	•		
		Leverage Yale University relationships in the development of a health-related innovation memorandum of understanding and hold the Value Innovation Health Forum Event	•		
		- Utilize System Innovation Fund to invest in new innovative technologies	•		•

	GOALS	OBJECTIVES		2019	2020
_	1.6 Implement and sustain a	Incorporate Standards of Professional Behavior into Performance Reviews and new employee orientation	•		
	superior talent	Increase the number of IFE course hours offered	10%		
	management process across YNHHS	Increase the number of managers enrolled in Management Academy courses	10%		
	NGR/SB/MT/AC/SL/MK/CB	Provide managers with the tools necessary to create development plans	•		•
		● Encourage RNs to obtain a 4-year BSN by 2020 consistent with IOM recommendation	•		•
		Redesign and integrate the talent acquisition process across YNHHS	•		
		<ul> <li>Expand recruitment and outreach to diverse organizations, websites and schools</li> </ul>	•		
		<ul> <li>Implement a plan to enhance leadership development for managers, directors, VPs, Senior VPs and physician leaders</li> </ul>	•	•	•
0		<ul> <li>Implement the leadership continuity process (succession planning) through first line supervisors</li> </ul>	•		•
ည		Complete 95% performance evaluations on time	•		•
en		<ul> <li>Identify future physician leaders and offer experiential opportunities to develop their leadership skills</li> </ul>	•		•
<u></u>		Develop internships and cross training opportunities in critical positions and mentoring for leadership	•		
ပ္		development  • Expand RN residency program			
Exce	175				
of	1.7 Ensure technology applications to support and	Ensure data access, integrity, privacy and security			
	sustain organizational	- Finalize and launch the three year data center strategy and plan	•		
9	excellence	- Maintain and deploy advanced cybersecurity measures	•		
1	<u>LSS</u>	Enhance physician and staff engagement and alignment through innovative technology and applications			
a Cul		<ul> <li>Utilize technology to enhance the patient experience through real-time patient feedback, education, access and outreach, and streamlined, self-service functionality in concert with the YNHHS ambulatory strategy and service line plans</li> </ul>	•	•	
0		- Develop an access center for central scheduling and navigation across YNHHS	•		
.=		Support innovation and transformation			
nspir		- Sustain and expand the integrated data repository to support comprehensive, standard methodology and tools to measure and drive value	•		
		- Leverage Project Infor to drive business transformation in Human Resources, Supply Chain, Finance and Information Technology Services	•		
		- Develop and execute telemedicine services	•		
		- Develop and launch strategy for expanded telehealth offerings	•		
		- Implement telehealth recommendations for service expansion	•		
		<ul> <li>Implement appropriate components of the YNHHS IT plan at GH to enhance patient experience, clinical services and operational efficiencies</li> </ul>	•	•	•
		- M-Modal voice recognition	•		
		- Tap and Go	•		
		- Patient Photo ID (beyond Radiology)	•		
		- Mobile Heartbeat	•		

#### YaleNewHavenHealth

#### **Greenwich Hospital**

FYs 2018 - 2020 Business Plan

GOALS

OBJECTIVES

2018 2019 2020

1.8 Maintain Magnet
Designation status
SB/AC

Octinue to enhance Shared Governance
- Design a communication structure that enhances the bed side nurse's knowledge of Shared
Governance and practice model
- Continue data collection for outcome based stories
- Continue to grow nursing involvement
Obtain recertification

	GOALS	OBJECTIVES		2019	2020
	2.1 Ensure an excellent Customer Experience	<ul> <li>Maintain or improve HCAHPS "Overall Rating of Hospital" scores to ensure we are meeting our patients' expectations (CO)</li> </ul>	#		
	<u>SB/AC/CB/MT/MK</u>	Maintain or improve Press Ganey patient satisfaction to meet our patients' expectations (CO)     Overall GH Ambulatory	#		
		- Overall GH Outpatient	#		
		- Overall GH Emergency Department (ED)	#		
		<ul> <li>Develop and educate new advisors in Patient and Family Advisory Council (PFAC)</li> </ul>	•		
ab		Standardize patient experience orientation for new employees	•		
are		Provide advanced training to staff in service excellence	•		•
O	2.2 Become one of the safest health systems in the	Improve effective management of serious safety events to include CLEAR disclosure to ensure that we are continuing to advance key programs of a high reliability organization (CO)	•	•	•
உ	country	Develop a structure for shared learning from serious safety events associated with causal factors			
Centered	<u>SL</u>	Enhance and sustain High Reliability Organization interventions across the System	•		
		<ul> <li>Establish formal training for "Just Culture and Accountability" throughout the organization</li> </ul>	•		
		<ul><li>Enhance "Rounding to Influence" rounds by directors and managers</li></ul>	•		
atient-	2.3 Continuously improve patient quality to	Attain targets for Centers for Medicare and Medicaid Services (CMS) publicly reported measures and fiscally incentivized programs	•	•	•
atie	outperform key benchmarks	Deploy appropriate quality improvement strategies and make performance transparent through the creation of standardized System Board dashboards	•		•
<u>a</u>	<u>SL/SB/AC</u>	<ul> <li>Improve readmission rate for defined conditions to ensure that we continue clinical redesign and provide high quality, safe patient care (CO)</li> </ul>	•		•
nsure		<ul> <li>Reduce overall number of hospital-acquired infections including CLABSI, CAUTI, SSI and clostridium difficile to ensure that we continue clinical redesign and provide high quality, safe patient care (CO)</li> </ul>	•		
直		<ul> <li>Increase percentage of hospital discharged patients that receive transitions of care services per Transitions of Care Management guidelines (CO)</li> </ul>	•		
		Enhance Nursing Integration across the YNHHS			
		- Recruit and onboard a System Chief Nurse Executive	•		
		- Develop and initiate a nursing care signature/practice model across the System	•		
		- Develop and initiate a nursing operations center			
		- Develop and initiate a Career Development Enterprise	•		
		- Integrate the professional practice of nursing across YNHHS	•		
		Maintain disease specific certifications and pursue additional certifications as appropriate	•	•	

	GOALS OBJECTIVES		2018	2019	2020
	3.1 Enhance and expand the	Plan and implement appropriate components of the YNHHS Ambulatory Strategy			
	System ambulatory	- Optimize existing locations: Long Ridge, Park Avenue, Pequot, North Haven, Shoreline	•		
	network	- Attain Long Ridge program volume targets	•		•
	<u>NGR/SB/MK</u>	- Develop and implement a Western, Central and Eastern CT ambulatory strategy	•		
		- Complete Advisory Board consumer assessment engagement and implement recommendations			
		Facilitate the expansion of Greenwich Hospital and YNHHS services into Westchester County	•		
		<ul> <li>Operationalize GH/NEMG/YM services at Rye Brook ambulatory site</li> </ul>	•		•
		Plan, design and initiate construction of GH/YNHCH/NEMG services at 500 West Putnam Avenue	•		•
		Optimize use of Holly Hill facility	•		
	3.2 Enhance clinical program	Develop System-wide clinical program plans			
w	excellence	- Geriatrics	•		•
Ce	<u>NGR/SB/MK/AC/SL</u>	- Palliative Care	•		•
1		- Digestive Disease	•		•
		Attain patient volume targets			
Se		- Inpatient discharges			•
		- Outpatient visits			•
ca		Evaluate implementation of Level III Trauma Center designation for Greenwich Hospital			
۳.		Strengthen the relationship with Osborn through the Greenwich network			
		Expand thoracic surgery with Yale Medicine	•		
O		• Enhance ICU level of care by expanding in-house intensivist coverage to 24/7	•		
ce		Evaluate a concierge patient navigation program			
ည		Evaluate customer retention program for key service lines	•		
an	3.3 Increase physician	Add high quality primary care physicians through recruitment, employment, clinical integration and	•		•
	alignment	alignment with large groups or through professional service contracts			
	NGR/SB/SL/AC/MK/HA	Partner and align with high quality specialty physicians as appropriate	•		•
		<ul> <li>Support the growth and development of independent community practices, such as Westmed, ONS and</li> </ul>	•		•
		GI, to support care delivery and increased access			
		Evaluate a clinical and programmatic partnership with Westmed and other Westchester groups	•		
		Partner with medical staff on clinical quality opportunities	•		•
		Develop medical staff succession plans to meet community needs			
		Create a physician relations and development role to improve service and proactive communication to			
		physicians			
		Promote NEMG network to the community			
		Strengthen clinical relationships between NEMG and referring physicians			
		Evaluate opportunities to attract additional regional physicians and other healthcare providers to utilize	•		
		GH services  • Evaluate additional residency programs			
		- Cranate assistance (Cranation programs			

FYs 2018 - 2020 Business Plan

**GOALS OBJECTIVES** 2018 2019 2020 3.4 Increase service line • Implement System service line strategic plans addressing five key areas (Programmatic Growth, Provider integration across YNHHS Complement, Care Delivery Models, Quality and Outcomes, Innovation and Technology and Value) NGR/SB/MK/AC - Children's - Expand Pediatric Emergency Medicine Program - Expand YNHCH subspecialty clinics - Grow pediatric surgery program - Heart & Vascular - Expand Heart and Vascular services ervices - Grow CHF and women's cardiology programs - Enhance the vascular center - Implement limb salvage program - Evaluate elective angioplasty service (1) - Musculoskeletal nica - Expand Yale Medicine physician coverage to grow program - Neurosciences - Grow neurology program 0 - Evaluate a Deep Brain Stimulation clinic - Enhance stroke services and evaluate tele-stroke hance - Oncology - Further integrate oncology program with Smilow and Yale Medicine - Psychiatry & Behavioral Health - Open new outpatient services such as an interventional psych program - Expand tele-psychiatry services to increase access - Develop a private pay model - Transplant - Continue to support YNHH transplant services in the Greenwich Hospital region - Urology - Continue to grow urology services - Women's - In collaboration with Yale Medicine, continue to expand Women's Health services as appropriate

	GOALS	OBJECTIVES	2018	2019	2020
	3.5 Ensure sufficient System	Develop and implement Westerly Hospital stabilization and Rhode Island growth strategies	•	•	•
10	scale and continued	Optimize the Milford Hospital collaboration			•
ď	integration to increase	Maximize United Surgical Partners International (USPI) relationship in alignment with System ambulatory	•		
ervio	value <u>NGR/GC/CO</u>	<ul> <li>Collaborate with Physician One to enhance access to urgent care services in alignment with System ambulatory plan</li> </ul>	•		•
S		Evaluate relationships with other hospitals or health systems to expand geographic reach	•		•
ल		Expand specialty pharmacy business	•		•
n;	3.6 Invest in strategic facility	Continue to update the main campus infrastructure as necessary	•		•
ince Clir	upgrades on the main	Investigate opportunity for a helicopter landing pad			
	campus <u>SB/MK</u>	Add a patient care or observation unit when space allows	•	•	•
	3.7 Implement major	Promote the full breadth of women's and children's services throughout the service area	•	•	•
75	marketing strategy NGR/DM	Promote the YNHHS brand			•
品	INGRY DIVI	<ul> <li>Promote the full continuum of GH services and accomplishments to the community, physicians, employees and donors (e.g. clinical spotlights)</li> </ul>	•	•	•
		Share success stories of GH/YNHHS across the region (CT/NY)	•	•	•

	GOALS OBJECTIVES		2018	2019	2020
	4.1 Advance Clinical Integration and Network strategies	<ul> <li>Implement YNHHS employee accountable care / preferred physician network as initial population for Clinically Integrated Network (CIN) strategies</li> <li>Develop and begin implementation of CIN and Population Health Services Organization (PHSO) strategies</li> </ul>	•		
	<u>CO/GC/NGR/SB/SL</u>	to expand beyond YNHHS employee population  • Evaluate opportunities to partner with payers and/or employers for network products utilizing the developed CIN / PHSO	•	•	
	4.2 Provide coordinated care management across the	Integrate care coordination teams (inpatient, ambulatory and post-acute care) and standardize care coordination and disease management best practices across YNHHS	•	•	•
	continuum <u>CO/GC/PV/SL/LS/MK</u>	<ul> <li>Optimize a care coordination model for inpatient and outpatient care</li> <li>Implement Post Acute Care strategy</li> </ul>	•		•
		- Develop, optimize and manage preferred provider networks for post acute care	•		•
		- Decrease overall SNF utilization across YNHHS	•		•
are		<ul> <li>Implement strategy to optimize performance of YNHHS-owned post acute care providers and expand capabilities across YNHHS as appropriate</li> </ul>	•	•	
C		Define strategy to manage long term stay patients	•		•
40	4.3 Implement strategies to ensure healthy	Improve community health			
ost o	communities	- Continue implementation of community health improvement plans			•
Sol	<u>LS/MT</u>	- Conduct research for 2019 Community Health Needs Assessment - Implement strategies to address the social determinants of health of our patients			
Ö		Implement strategies to address the social determinants of health of our patients     Improve employee health			
otal		- Promote use of YNHHS medical services by employees to facilitate care coordination and improved	•		•
2		health - Enhance employee health and safety by increasing utilization of Occupational Health, <i>living</i> well	•	•	•
0		Cares and Employee and Family Resources			
าลg		- Expand primary care professional network and access to YNHHS covered employees and their dependents	•	•	•
ल	4.4 Provide necessary	Implement total cost of care oversight structure	•		
2	infrastructure to manage total cost of care CO/ VT/LSS	<ul> <li>Assess needs, and identify and implement necessary tools and capabilities to support enterprise-wide data/reporting/analytics for clinical integration, care coordination, and total cost of care management</li> </ul>	•		
	<u> </u>	<ul> <li>Assess EPIC capabilities to support clinical integration / care coordination requirements for employees and other managed populations</li> </ul>	•	•	
		- As needed, identify alternatives to augment EPIC capabilities	•		
	4.5 Ensure operational and	Achieve Cost and Value goal to ensure financial stability (CO)	•	•	•
	clinical effectiveness	Realize & sustain Clinical Redesign improvements	•		•
	SB/SL/AC/MT/MK	- Identify physicians to lead clinical redesign initiatives	•		•
		<ul> <li>Continue evaluation and integration of centralized services, processes and practices across YNHHS</li> <li>Clinical engineering</li> </ul>	•		
		- Employee recruitment	•		
		- Lab (core lab initiative)	•		
		Improve centralization and standardization of existing System departments	•		

	GOALS	OBJECTIVES	2018	2019	2020
T.	5.1 Align payment models for financial sustainability and long-term success <u>EC</u>	Secure budgeted managed care revenue  Evaluate ongoing participation in Medicare & commercial alternative payment models  Develop a future strategy regarding Medicaid payment and delivery reforms  Maximize performance in value-based programs  Evaluate various strategies to deliver total cost of care contracting products to the market  Implement strategic pricing strategy for commercial plans  Continue to execute strategy regarding charge transparency and financial patient experience  Improve revenue enhancement/cash collections to ensure financial stability (CO)  Develop financial infrastructure to accommodate movement toward Alternative Payment Models	•	•	
Financial Strengtl	5.2 Optimize capital deployment and investments EC/MK  5.3 Evaluate financial integration across YNHHS NGR/SB/EC	Evaluate and implement various Treasury services across YNHHS including a consolidated merchant account program and a concentrated depository account structure     Evaluate and implement capital market strategies to provide necessary investment to execute approved business plans     Develop a System Capital Deployment strategy     Attain GH capital spending as a % of depreciation     Evaluate potential for more integration in financial reporting	%	•	•
Sustain F	5.4 Improve current financial performance EC  5.5 Increase philanthropy	<ul> <li>Execute long-term physician billing strategy in house</li> <li>Rebase 5-year strategic financial plan</li> <li>Evaluate mitigation efforts and Enterprise-Wide Risks across all 5 strategic dimensions twice per year</li> <li>Maintain or improve bond ratings</li> <li>Provide comprehensive financial and analytical service line, business plan and new venture support</li> <li>Achieve GH operating margin to ensure financial stability (CO)</li> <li>Achieve GH net gain margin target</li> <li>Achieve GH days cash on hand to ensure financial stability (CO)</li> <li>Evaluate profitability by service line and address as appropriate</li> </ul>	•	•	
	S.5 Increase philanthropy  NGR/Foundation	<ul> <li>Achieve philanthropy targets</li> <li>Identify opportunities for collaborative System funding initiatives recognizing local priorities</li> <li>Centralize Foundation back office functions across YNHHS as appropriate</li> <li>Evaluate potential for a development committee of the board (with physician members)</li> </ul>	•	•	•

YaleNewHavenHealth

**Greenwich Hospital** 

	Responsibility Key:							
HA	Herb	Archer						
СВ	Christine	Beechner						
MPB	Marna	Borgstrom						
SB	Sue	Brown						
GC	Gayle	Capozzalo						
AC	Anna	Cerra						
EC	Eugene	Colucci						
MK	Marc	Kosak						
SL	Spike	Lipschutz, MD						
DM	Dana	Marnane						
со	Chris	O'Connor						
NGR	Norman	Roth						
LS	Lyn	Salsgiver						
LSS	Lisa	Stump						
VT	Vincent	Tammaro						
MT	Melissa	Turner						
PV	Prathibha	Varkey, MD						