

Stoughton Health

FY2022 Strategic Plan

Organic Strategic Planning

- ▶ Not mechanistic or linear, strategies and supportive tactics unfold over time in response to continually changing environment. In this way, it becomes self-organizing in a perpetually changing environment.

Know Thyself

▶ Three principles:

▶ Possess certainty and clarity around organizations Mission, Vision, Values

▶ **MISSION:** The mission of Stoughton Health is to provide safe, quality health care with exceptional personalized service.

▶ **VISION:** We grow to meet the changing needs of the communities we serve and become their health partner of choice.

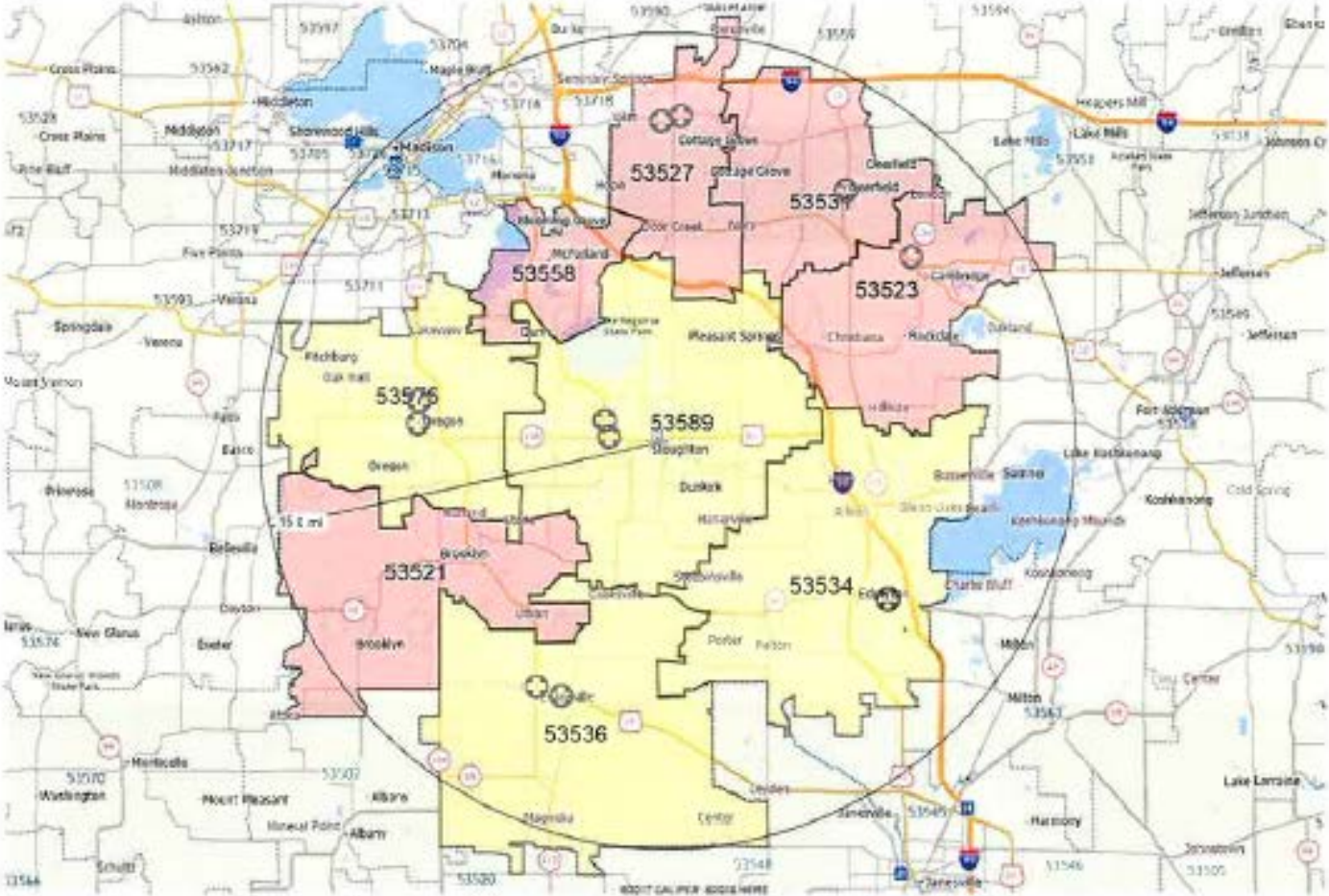
▶ **VALUES:** Our patients and community are our number one priority. Employees are committed to providing Excellence Together through:

- ▶ Attitude
- ▶ Accountability
- ▶ Appearance
- ▶ Communication
- ▶ Teamwork
- ▶ Service

▶ Appreciate our service area, customers therein, and services they require.

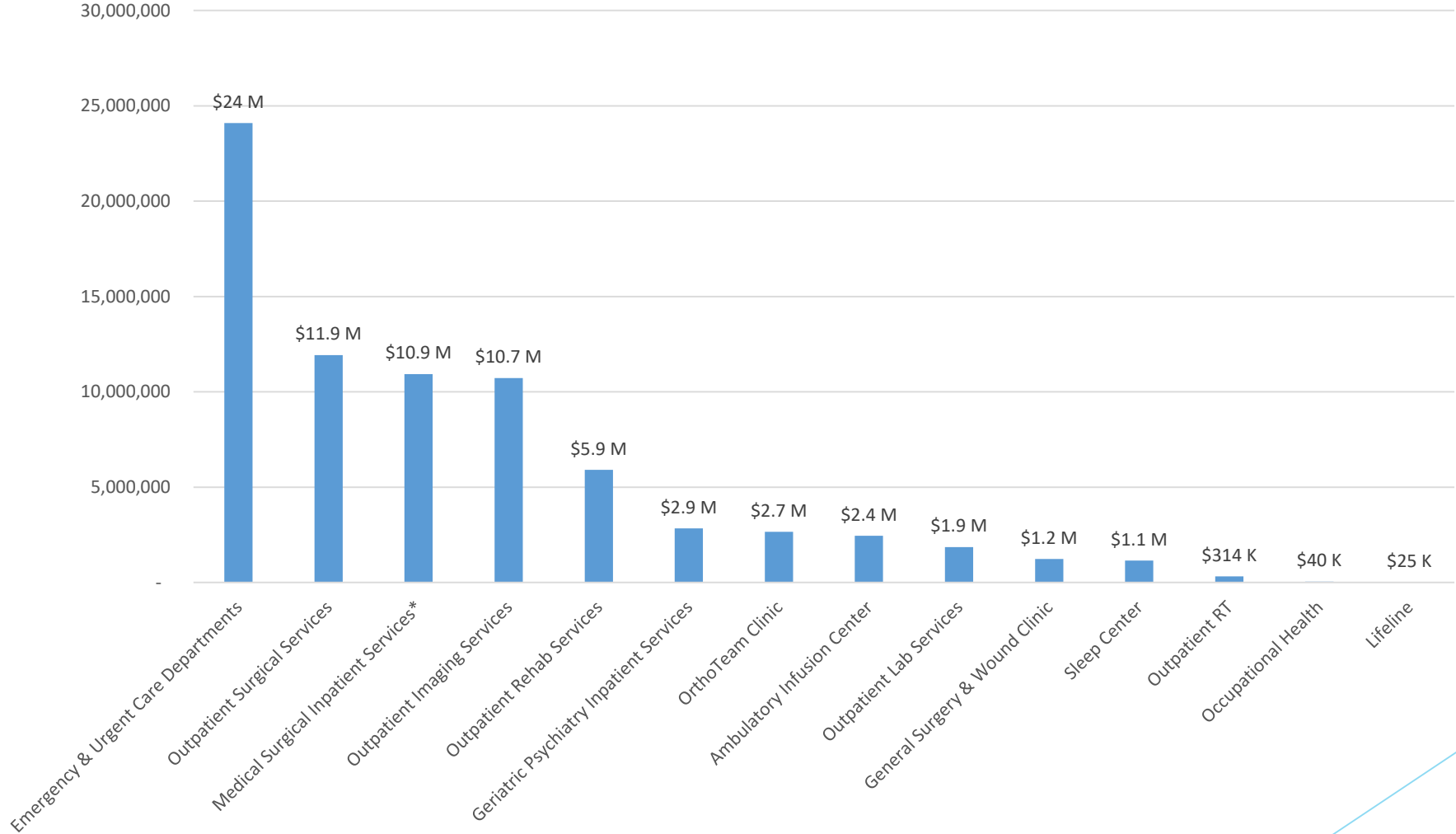
Map of Service Area

Service area spans roughly 15 miles



Gross Charges FY21 YTD by Service Line

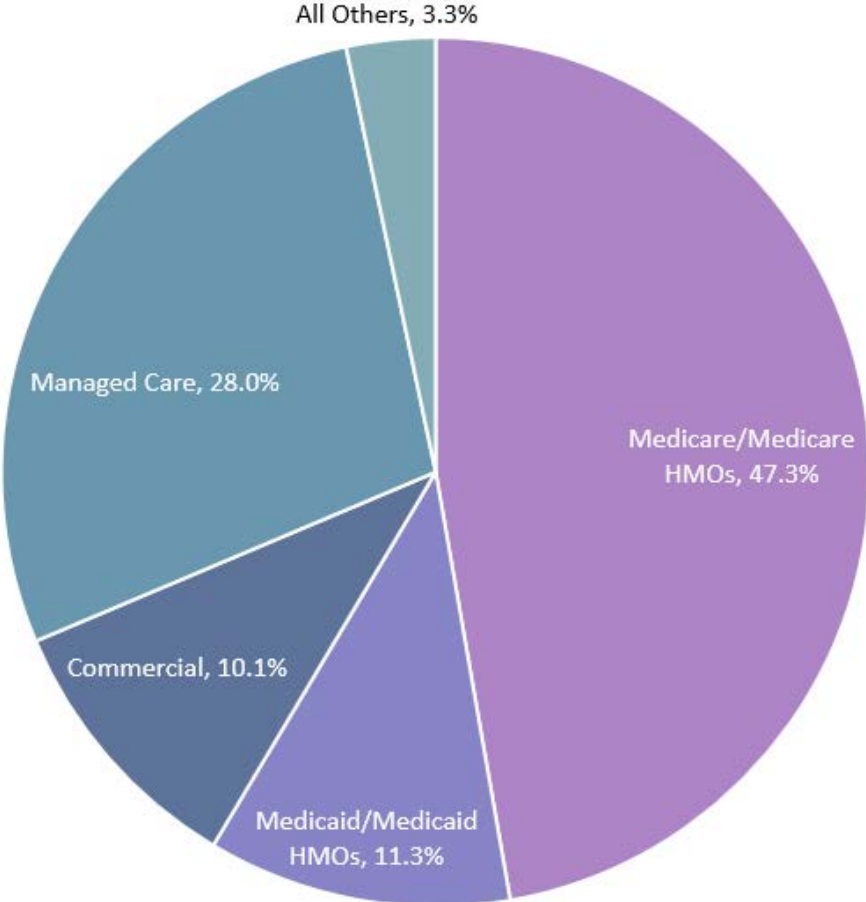
Gross Charges FY21YTD



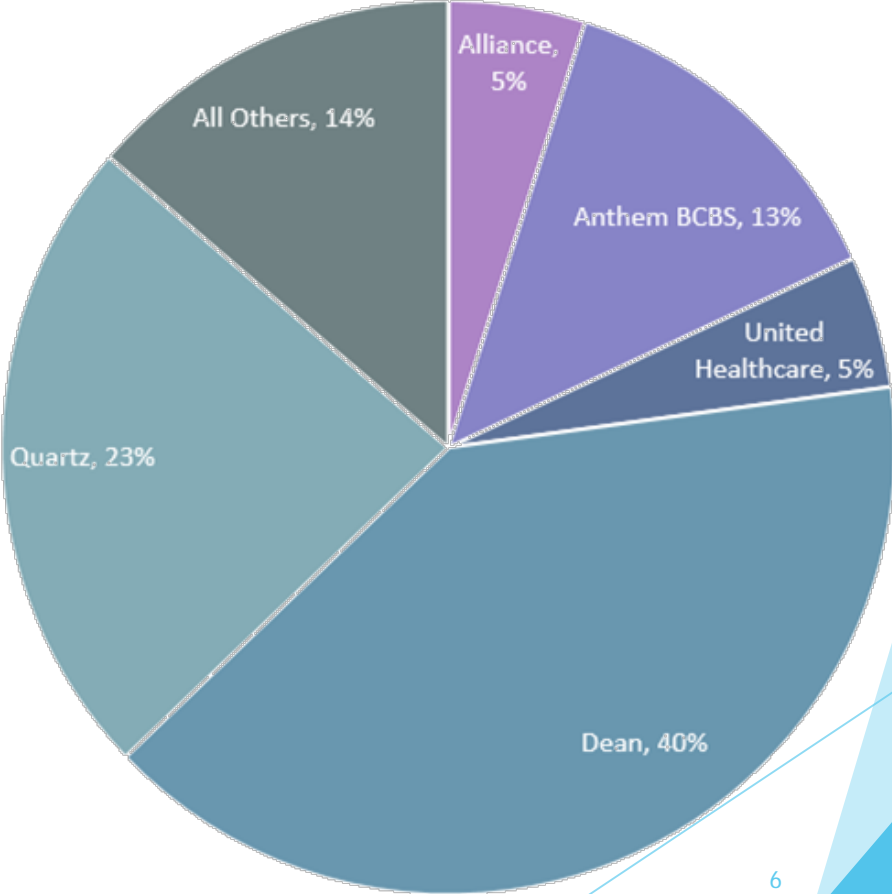
*Medical Surgical Inpatient Services Includes Outpatient Observation

Understand How You Get Paid

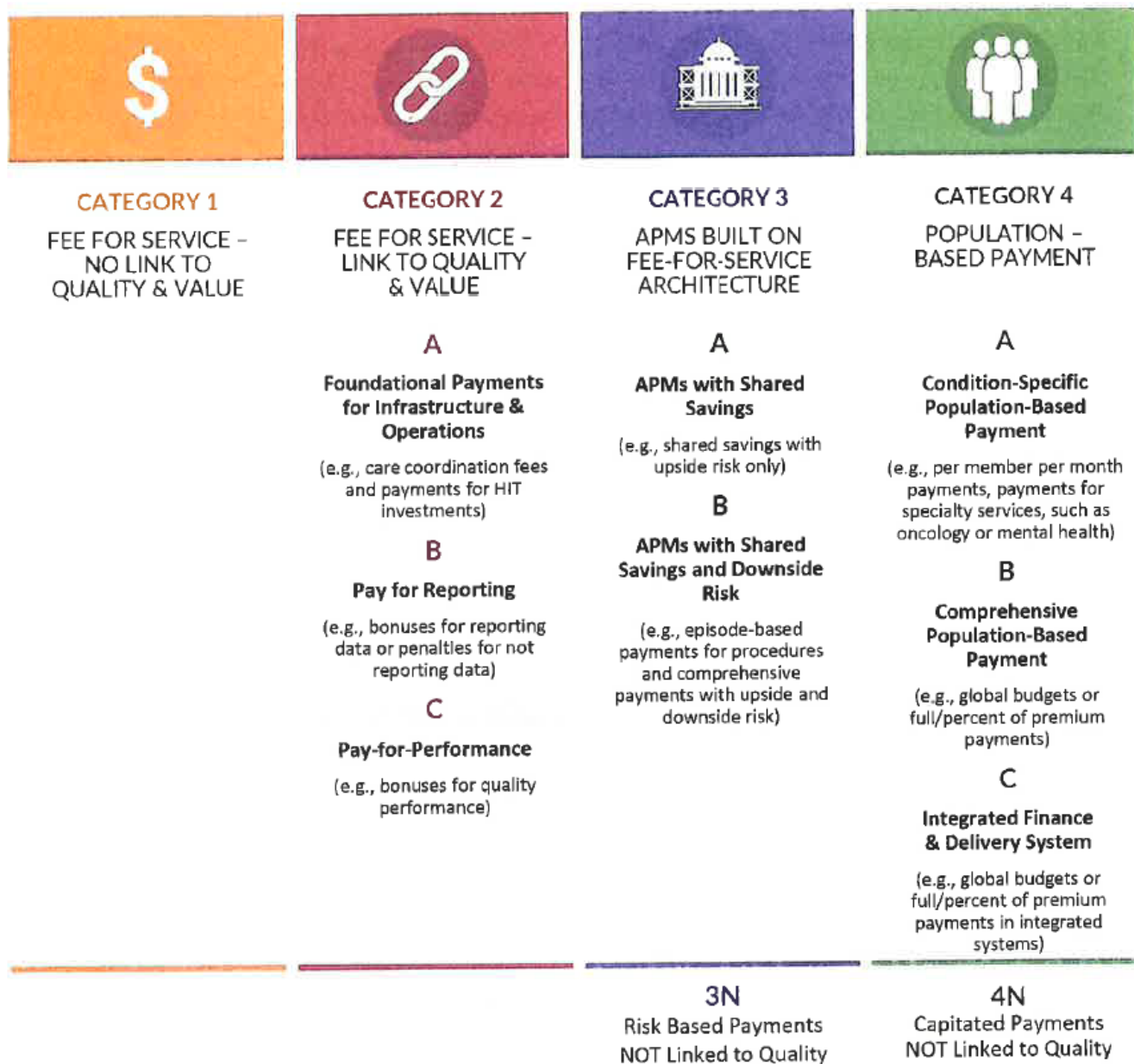
Stoughton Health Payer Mix
FY2021 YTD through May 2021



Stoughton Health Payer Mix - Commercial Payers Only
FY2021 YTD through May 2021



Alternative Payment Model (APM) Framework



Build on Your Strengths

- ▶ Do more of what you do best:
 - ▶ High touch, patient centered community-based healthcare.
 - ▶ Leverage Critical Access Hospital (CAH) status to more effectively serve specific patient populations.
- ▶ What takes advantage of your current strengths, geography, circumstance?
- ▶ Know your organizational differentiators... (i.e. competitive advantage)

Make Decision Making Criteria Explicit

- ▶ Identify and communicate the fundamental criteria for decision making.
- ▶ Organically generated strategic planning lacks a defined, precise, chronological “road map” thus continual communication is key to creating shared vision.

CEPPT (Pronounced "KEPT")

Strategic Goals

CEPPT (Pronounced "KEPT")

C = Continuous improvement of safety/quality/experience

E = Efficiency - strive to make healthcare more affordable to provide and receive

P = Partner with payers

P = Partner with providers

T = Utilize Technology to maximize access, convenience and portals of entry to Stoughton Health

“C” = Continuous
Improvement of
Safety/Quality/Experience

“C” - Safety/Quality

- ▶ Compliance with regulator agency criteria (Joint Commission (JC), State, Department of Health Services (DHS), Department of Quality Assurance (DQA), Occupational Safety and Health Administration (OSHA), etc.).
- ▶ Continued progression of Continuous Improvement Process throughout the organization.
 - ▶ All departments actively engaged in two PDSA projects at all times (Department and/or Systemic)

"C" - Safety/Quality

CI Project Dashboard

| Indicator | Owner | Source | | Direction | 2021 Quarterly Goal | Mar-21 | Feb-21 | Jan-21 | Oct - Dec 2020 | Dec-20 | 20-Nov | Oct-20 | Jul-Sep 2020 | Sep-20 | Aug-20 | Jul-20 | Apr-Jun 2020 | Jun-20 | May-20 | Apr-20 | Jan-Mar 2020 |
|--|----------------------------|--|----------------------|-----------|---------------------|--------|--------|--------|----------------|--------|--------|--------|--------------|--------|--------|--------|--------------|--------|--------|--------|--------------|
| Quality Report Card | | | | | | | | | | | | | | | | | | | | | |
| Inpatient Influenza Vaccination Rate (Effective October-March only) | Heather | 96% Q12020 RWHC | 94% Q4 2019 National | ↑ | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | ND | ND | ND | ND | ND | ND | ND | ND | 96% |
| Length of stay in ER for patients discharged (median)-excl MH and TX | Tina | RWHC Q32020 121 | National 150 | ↓ | <RWHC | 146 | 156 | 192 | 137 | 137 | 125 | 149 | 152 | 144 | 174 | 144 | 142 | 146 | 136 | 145 | 142 |
| ED Transfer - Transfer form sent to SNF/Other on DC | Tina | N/A | N/A | ↑ | >55% | ND | 50% | ND | 64% | 100% | 71% | 50% | 44% | 66% | 50% | 0% | 33% | 50% | 0% | ND | 50% |
| Balanced Score Card | | | | | | | | | | | | | | | | | | | | | |
| Columbia Suicide Severity Rating Scale | Heather | N/A | N/A | ↑ | 100% | 100% | 100% | 100% | 99% BSC | 100% | 100% | 100% | 90% BSC | 93% | 90% | 90% | | 47% | 84% | 95% | 88% |
| Inpatient HCAHPS Rank Your Hospital High (overall 9/10) | Heather | Press Ganey | Press Ganey | ↑ | ≥95% | 99% | 90% | 97% | 95% | 99% | 96% | 88% | 97% | 91% | 91% | ND | 71% | ND | ND | ND | 82% |
| Emergency Department HCAHPS Definitely Would Recommend (Loyalty) | Tina | Press Ganey | Press Ganey | ↑ | ≥90% | 94% | 99% | 93% | 86% | 94% | 77% | 79% | 79% | 93% | 93% | ND | 89% | ND | ND | ND | 61% |
| General Surgery Clinic HCAHPS Definitely Would Recommend (Loyalty) | Teresa | Press Ganey | Press Ganey | ↑ | ≥95% | 99% | 8% n=5 | 99% | 99% | 99% | 99% | 99% | 61% | 3% | 3% | ND | 73% | ND | ND | ND | 67% |
| DHP P4P | | | | | | | | | | | | | | | | | | | | | |
| 30 Day Readmissions - Dean Primary Ins (1 year rolling calendar) | Heather | Reporting Period 01/01/2019 - 12/31/2019 | | ↓ | < 6.1% | ND | ND | ND | 9% | ND | ND | ND | 11% | ND | ND | ND | 7% | ND | ND | ND | 8.3% |
| 1-day in-patient Medical Stays (1 year rolling calendar) | Heather | Reporting Period 01/01/2019 - 12/31/2019 | | ↓ | <15.4% | ND | ND | ND | 5.9% | ND | ND | ND | 25% | ND | ND | ND | 35% | ND | ND | ND | 33.3% |
| Transition Record complete with 11 required elements (Started 01/2017) | Heather | N/A | N/A | ↑ | 100% | 92% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | ND | ND | 100% | 91% |
| Timely Transmission of Continuing Care Plan (Started 01/2017) | Heather | N/A | N/A | ↑ | 100% | 92% | 100% | 100% | 94% | 83% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | ND | ND | 100% | 91% |
| Misc | | | | | | | | | | | | | | | | | | | | | |
| Pathology specimen labeling | Tracy with Kyle supporting | | | | | | | | | | | | | | | | | | | | |
| Lab specimen labeling | Kyle | | | | | | | | | | | | | | | | | | | | |

“C” - Experience

▶ Patients/families:

- ▶ Continued focus on patient/family experience as measured by Press Ganey Patient Experience Survey (Balanced Score Card) and supported by Press Ganey Employer Engagement Survey (PG EE survey).
- ▶ Identification of and tactics around social determinants of health Stoughton Health can assist with.

“C” -Experience

- ▶ Development of broader local care service portfolio options:

| Patient and Families |
|--|
| General/Vascular Surgery (↑ 15%) * |
| <ul style="list-style-type: none">• Lynx• Breast• Wound |
| Musculoskeletal Service Growth (↑ 16%) * |
| <ul style="list-style-type: none">• Total Joint• Shoulder• Sports Medicine |
| Cardiology - Non-Interventional * |
| Podiatry - Stoughton Health Clinic/Surgery (↑ 41%) * |
| ENT (↑ 31%) * |
| Ophthalmology (↑ 23%) * |
| Urology (↑ 71%) * |
| Dental (Flat) * |

* FY 2022 Budget vs. Projected Actual FY 2021
(BSC: # New Patient Records)

“C” -Experience

▶ Workforce:

- ▶ Continue investment in and reboot of all Excellence Together teams post pandemic.
 - ▶ Wellness Team
 - ▶ Customer Experience Team
 - ▶ Employees for Employees (E for E) Team
 - ▶ Physician Partnership Team
 - ▶ Communications Team
 - ▶ Measurement Team
 - ▶ Standards Team
- ▶ Create permanent hybrid work options for employees when appropriate (# permanent hybrid roles)
- ▶ Implement new Workforce Wellness gainsharing initiative (KOM = decrease Workman’s Compensation claims, decrease number of unscheduled PTO days, and decrease insurance premium costs)

“C” -Experience

▶ Workforce:

- ▶ Leverage Payroll Protection Plan loan forgiveness to fund COVID-19 Workforce Recognition Payout
- ▶ Conduct Employer Engagement Surveys to identify themes and respond as appropriate (engagement % ranking)

“E” = - Strive to make
healthcare more affordable
to provide and receive

“E” – Efficiency

- ▶ All departments operate within top quartile of Premier Productivity benchmark OR at agreed upon FTE target (premier % of ranking).
- ▶ Advance virtual capabilities beginning with:
 - ▶ UC
 - ▶ ED/IP Behavioral Health
 - ▶ IP Hospitalist Service
 - ▶ Cardiology

(Number of Visits per quarter)

“E” – Efficiency

- ▶ Develop plan for future purposeful care delivery migration to lowest cost setting:
 - ▶ Drive future Master Facility Planning around this assumption.
 - ▶ Inpatient → Outpatient
 - ▶ Outpatient → Clinic
 - ▶ Clinic → Virtual
 - ▶ Virtual → Home

(BSC)

“P” = - Partner with
Payers

“P” – Partner with Payers

- ▶ Continued focus on low cost positioning for services provided.
- ▶ Quartz:
 - ▶ Fully paneled for portfolio of products
 - ▶ Tier I status
- ▶ Dean Health Plan:
 - ▶ Fully paneled for portfolio of products
 - ▶ 100% Pay for Performance Metrics
- ▶ Integration of Community Health & Wellness offerings as a covered service within Quartz and Dean Health Plans.

“P” – Partner with Payers

▶ Advocacy

- ▶ Federal and State advocacy with elected/appointed government officials to maintain and/or improve Medicare/Medicaid funding.
- ▶ Sustain or increase annual Rural Critical Care Provider annual payment.
- ▶ Diminish regulatory burden created by Federal and State agencies (Health & Human Services (HHS), Center for Medicaid/Medicare (CMS), Department of Health Services (DHS), Department of Quality Assurance (DQA), Occupational Safety and Health Administration (OSHA), etc.).

“P” = - Partner with
Providers

“P” – Partner with Providers

- ▶ Create value equation for Stoughton Health’s participation in larger system partners Accountable Care Organization (ACO) and Alternative Payment Model (APM) endeavor.
 - ▶ Engage CliftonLarsonAllen (CLA) to assist in initial work
 - ▶ Increase Business Informatics Capacity (Multiview, Electronic Health Record (EHR), Kaavio, etc.)

“P” – Partner with Providers

- ▶ Assess, quantify and mitigate primary service area outmigration for services delivered locally:
 - ▶ Stoughton Health work queue development
 - ▶ Increased coordination/communication with Service Line Administrators – Regional Execs (Finance numbers, Balanced Score Card (BSC) numbers, New Patient Records, Kaavio)
- ▶ Re-establish standing meetings
 - ▶ CEO annual meetings
 - ▶ Service line administrators
 - ▶ Regional Administration
 - ▶ Clinic Provider meetings

“P” – Partner with Providers

- ▶ Identify opportunities for new partnerships driven by managed migration of care delivery and subsequent MFP revisions
- ▶ Develop specific service capabilities that meet the need of larger system partners.

“P” – Partner with Providers

- ▶ Develop Professional Service Agreement (PSA) with additional Orthopedic and General Surgical providers to maintain 100% Emergency Department (ED) call coverage
 - ▶ Decrease transfers
 - ▶ Break even (BE) target long-term
 - ▶ Continuous coverage

“T” = Utilize Technology to
maximize access,
convenience and portals of
entry to Stoughton Health

“T” - Technology

- ▶ Leverage all platforms to maximize connectivity with market
 - ▶ Web
 - ▶ Social media
 - ▶ Mobile devices
 - ▶ Other

“T” - Technology

- ▶ Continue to grow Urgent Care setting in communities within primary service area:
 - ▶ Oregon
 - ▶ Stoughton
 - ▶ McFarland
 - ▶ Others
- ▶ Develop marketing strategy targeting 20 - 45 year olds.
- ▶ Develop relational strategy to meet different desires and expectations of different generational consumer groups.