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

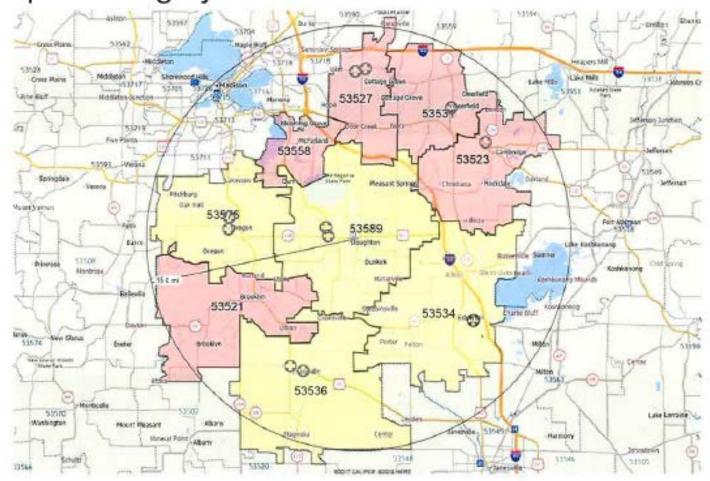
- ► Three principles:
 - Possess certainty and clarity around organizations Mission, Vision, Values
 - ▶ MISSION: The mission of Stoughton Health is to provide safe, quality health care with exceptional personalized service.
 - ▶ VISION: We grow to meet the changing needs of the communities we serve 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

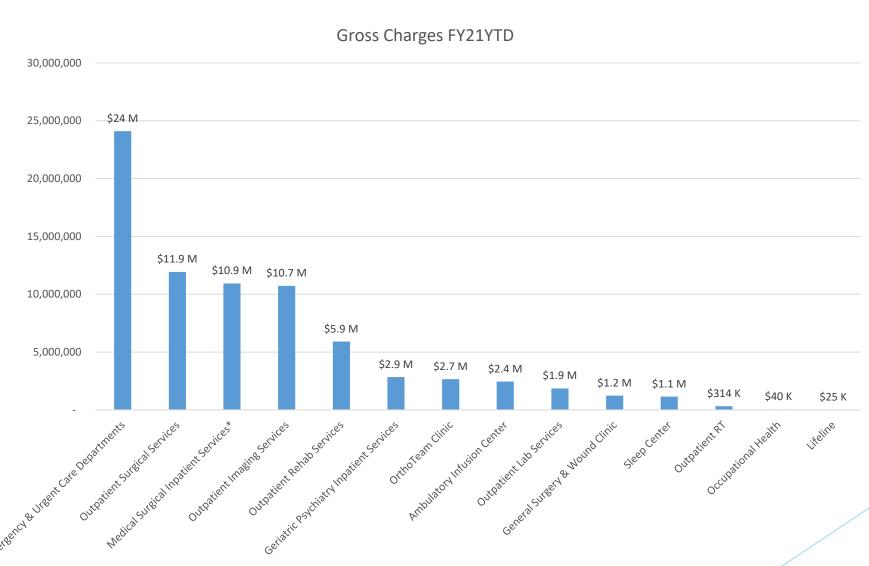
= PSA

= SSA

Service area spans roughly 15 miles

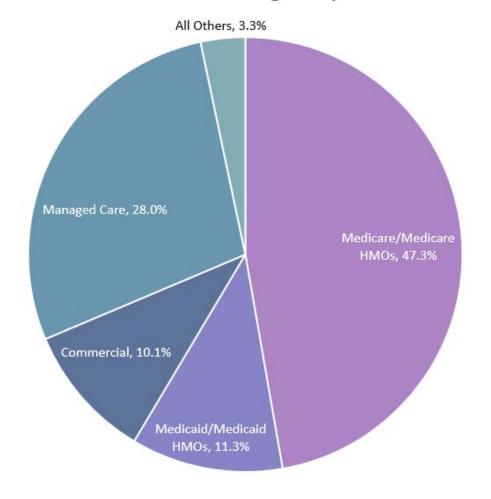


Gross Charges FY21 YTD by Service Line

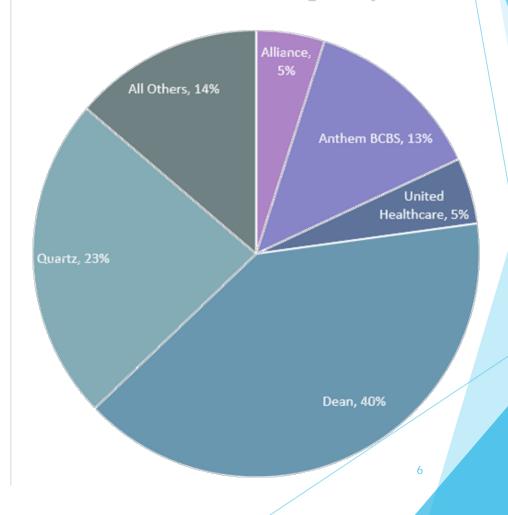


Understand How You Get Paid

Stoughton Health Payer Mix FY2021 YTD through May 2021



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



Dean Health Plan - Quality and Safety Report Card Value Based Pay for Performance Measures

Pay for Performance Measures	Desired Direction	GOAL	Jan-Mar 2021	Oct-Dec 2020	Jul-Sep 2020	Apr-Jun 2020	Jan-Mar 2020	Oct-Dec 2020	Jul-Sep 2019	Apr-Jun 2019	Jan-Mar 2019	Oct-Dec 2018
Quality (Dean Insurance and/or Medicaid)												
Reporting Period 10/01/2018 - 09/30/2019	_											
Healthcare Personnel (HCP) Influenza Vaccination Rate	Î	98%	99%	99%	NA	99%	99%	99%	NA	NA	99%	99%
Colon Surgical Site Infections (COLO)	Î	SIR ≤ .750		0%	0%	0%	0%	0%	0%	0%	0%	0%
7Total Abdominal Hysterectomy Surgical Site Infections (HYST)	Ţ	SIR ≤ .930		ND								
Central Line-associated bloodstream infections (CLABSI)	Î	SIR ≤ .570		0%	0%	0%	0%	0%	0%	0%	0%	0%
Catheter-associated Urinary Tract Infections (CAUTI)	Î	SIR ≤ .910		0%	0%	0%	0%	0%	0%	0%	0%	0%
Efficiency Measures (Dean Ins.) DHP Reporting Period 01/01/2019 - 12/31/2019		GOAL										
	Î											
30 Day Readmissions - Dean Primary Ins (1 year rolling calendar)		< 6.1%		8.60%	10.80%	7%	8.3%	6.3%	14%	14%	13%	7.8%
1-day in-patient Medical Stays (1 year rolling calendar)	1	< 15.4%		5.90%	2.5%	34.80%	33.3%	29%	26%	17.4%	21.7%	21.7%
Patient Satisfaction Measures (Dean Ins.)	Ť	GOAL		3.3070	2370	34.0070	33.370	2270	2070	21.470	21.770	22.770
Reporting Period 07/01/2018 - 06/30/2019	1	> 86%		Pass	85%	86%	87%	83%	85%	85%	84%	84%
Overall Rank Hospital High (9-10 on a scale of 0-10) Doctor's Communicated Well	1	≥ 80% >90%		Pass	87%	88%	89%	91%	92%	92%	91%	89%
Nurse's Communicated Well	<u>~</u>	>89%		Pass	88%	88%	88%	88%	88%	91%	90%	90%
Staff Provided Discharge Instructions		>94%		Pass	93%	95%	95%	94%	55.5	22.0	2070	20.0
Inpatient Psychiatric Services (Medicare) Core Measure		GOAL										
Hours of Physical Restraint Use per 1000 patient care hours **	Л	0	0	0	3.03	0	0	0	0	0	0	0
Hours of Seclusion Use per 1000 patient care hours	Ţ	0.05	0	0	0	0	0	0	1.27	1.63	0	1.03
2 or more Antipsychotic Meds with Justification - Overall Rate	Û	100%	ND	100%	100%	ND	33%	0%	100%	ND	ND	100%
Transition Record complete with 11 required elements (Started 01/2017)	Î	100%	92%	100%	100%	100%	92%	95%	95%	91%	66%	100%
Timely Transmission of Continuing Care Plan (Started 01/2017)	Î	100%	92%	94%	100%	100%	89%	92%	95%	91%	66%	100%
Alcohol Use Screening Completed (No longer reported but collected internally)	Î	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Alcohol Use Brief Intervention Received or Refused (Effective January 2016)	Î	100%	ND	100%	ND	ND	ND	ND	100%	ND	ND	ND
Alcohol Use received or refused a RX for tx of alcohol or drug use disorder or a referral for addictions treatment.	Î	100%	ND	ND	ND	ND	ND	ND	0%	ND	ND	ND
Tobacco Use Screening Completed (No longer reported but collected internally)	Û	100%	100%	100%	100%	100%	100%	100%7	100%	100%	100%	100%
Tobacco Use Counseling and Treatment Received or Refused (TOB 2)	Î	100%	100%	ND	100%	ND	100%	ND	ND	100%	100%	ND
Geriatric Psych Patient Influenza Immunization (Effective October-March only)	Û	100%	100%	ND	ND	ND	97%	84%	N/A	N/A	100%	100%
Screening for Metabolic Disorders (Effective January 1, 2017)	Î	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Alternative Payment Model (APM) Framework









CATEGORY 1

FEE FOR SERVICE -NO LINK TO QUALITY & VALUE

CATEGORY 2

FEE FOR SERVICE -LINK TO QUALITY & VALUE

Α

Foundational Payments for Infrastructure & Operations

(e.g., care coordination fees and payments for HIT investments)

В

Pay for Reporting

(e.g., bonuses for reporting data or penalties for not reporting data)

C

Pay-for-Performance

(e.g., bonuses for quality performance)

CATEGORY 3

APMS BUILT ON FEE-FOR-SERVICE ARCHITECTURE

Α

APMs with Shared Savings

(e.g., shared savings with upside risk only)

В

APMs with Shared Savings and Downside Risk

(e.g., episode-based payments for procedures and comprehensive payments with upside and downside risk)

CATEGORY 4

POPULATION -BASED PAYMENT

Α

Condition-Specific Population-Based Payment

(e.g., per member per month payments, payments for specialty services, such as oncology or mental health)

В

Comprehensive Population-Based Payment

(e.g., global budgets or full/percent of premium payments)

C

Integrated Finance & Delivery System

(e.g., global budgets or full/percent of premium payments in integrated systems)

3N

Risk Based Payments NOT Linked to Quality

4N

Capitated Payments NOT Linked to Quality

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

Lab specimen labeling

CI Project Dashboard																					
Indicator	Owner	Source		Direction	2021 Quarterly Goal	Mar-21	Feb-21	Jan-21	Oct - Dec 2020	Dec-20	20- N ov	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	Î	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	Î	<rwhc< td=""><td>146</td><td>156</td><td>192</td><td>137</td><td>137</td><td>125</td><td>149</td><td>152</td><td>144</td><td>174</td><td>144</td><td>142</td><td>146</td><td>136</td><td>145</td><td>142</td></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	Î	>55%	ND	50%	ND	64%	100%	71%	50%	44%	66%	50%	096	3396	50%	096	ND	50%
Balanced Score Card																					
Columbia Suicide Severity Rating Scale	Heather	N/A	N/A	Î	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	Î	<u>></u> 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	Î	<u>></u> 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	Î	<u>></u> 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		Î	< 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		Î	<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	Î	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	Î	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																		•		

"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%) * Lynx **Breast** Wound Musculoskeletal Service Growth (↑ 16%) * **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.).

- 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.)

- 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

- 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.

- 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.