Strategic Line of Sight

สถาบันรับรองคุณภาพสถานพยาบาล (องค์การมหาชน)

1

Strategic Line of Sight

We also have strengthened the line of sight from strategic challenges and advantages to core competencies, to strategy, and then to work systems and work processes. This clear set of linkages should move an organization from the strategic environment in which it functions to the execution of its operations in a logical sequence. While each of these concepts is complex, the line of sight should simplify the execution.



Strategic Line-of-Sight

Core Competency ้เรื่องที่องค์กรมีความ ชำนาญที่สุด

Vision

- สิ่งที่องค์กรต้องการจะเป็น
- ภาพลักษณ์ที่ต้องการให้ ผู้อื่นรับรู้ในอนาคต

Work **Process**

Work **System**

Strategy

Core **Competency**

Challenges Advantages

Vision

Strategy

<mark>การเตรียมการสำหรับอนาคต:</mark>

- บริการใหม่
- ลูกค้าใหม่
- core competency ใหม่
- นวตกรรม

Challenges แรงกดดันที่มีผลต่อความสำเร็จใน อนาคตขององค์กร

Advantages

ปัจจัยที่ช่วยให้องค์กรประสบ ความสำเร็จ (core competency, ความสัมพันธ์กับองค์กรภายนอก)

BHAG: Big, Hairy, & Audacious Goals

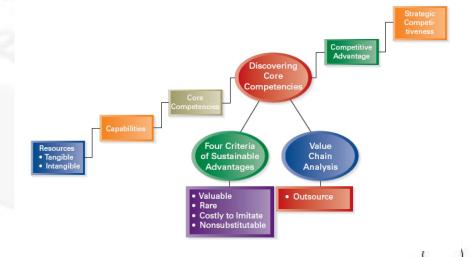
A Big Hairy Audacious Goal (BHAG) is a strategic business statement similar to a vision statement which is created to focus an organization on a single medium-long term organization-wide goal which is audacious, likely to be externally questionable, but not internally regarded as impossible.

Vision as BHAG Example

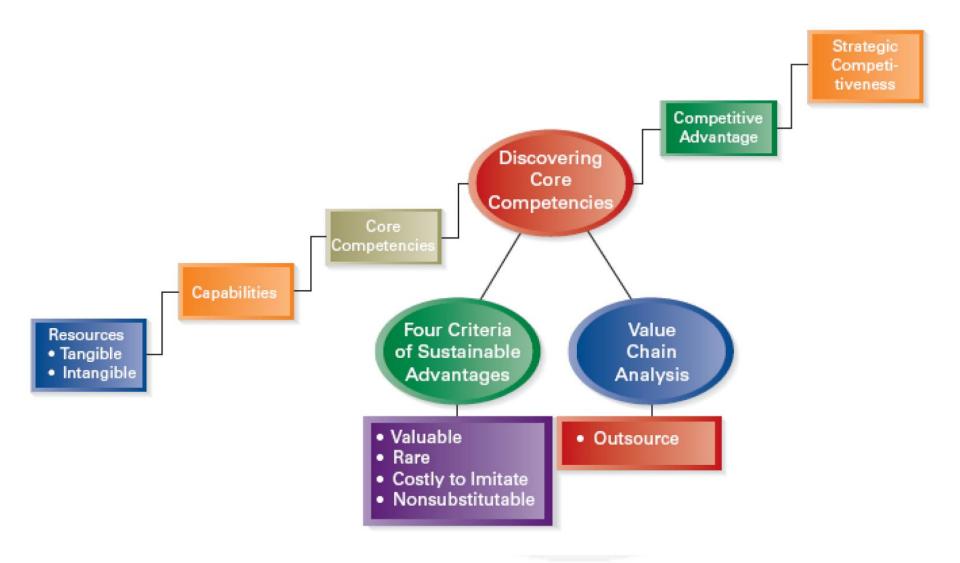
- <u>Facebook</u>: To make the world more open and connected.
- Google: Organize the world's information and make it universally accessible and useful.
- <u>JFK's Moon Challenge</u>: This nation should commit itself to achieving the goal, before this decade is out, of landing a man on the moon and returning him safely to the earth.
- Microsoft: Empower every person and every organization on the planet to achieve more.
- SolarAid: To eradicate the kerosene lamp from Africa by 2020
- Amazon.com: To be Earth's most customer-centric company.

Resource-based View (RBV)

Ability of a firm to deliver **sustainable competitive advantage**, by application of a bundle of valuable tangible or intangible resources at the firm's disposal, resulted in **above average return** (AAR).



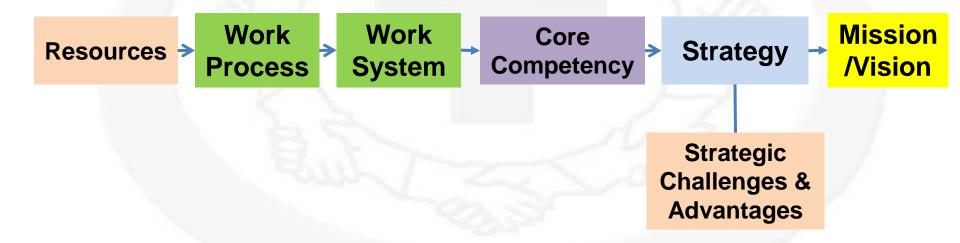
Resource-based View (RBV)



Strategic Line Of Sight: Plan



Strategic Line Of Sight: Action



Mission & Core Competency



Core Competency ของรพ.ของเรา มีส่วนทำให้บรรลุพันธกิจอย่างไร?

Core Competency

ความสามารถขององค์กรที่มีความสำคัญเชิงกลยุทธ์ที่จะทำ ให้บรรลุพันธกิจขององค์กร

อาจเป็นความสามารถพิเศษทางเทคโนโลยี การให้บริการที่เป็น เอกลักษณ์ การให้บริการเฉพาะกลุ่ม การตอบโจทย์เฉพาะ

The term "mission" refers to the overall function of an organization. The mission answers the question, "What is this organization attempting to accomplish?" The mission might define customers or markets served, distinctive or core competencies, or technologies used.

ตัวอย่าง Core Competency

Org	Mission	Core Competency
CAMC (2015)	Striving to provide the best health care to every patient, every day.	 Improving the health and economics of our community
St Davids (2014)	To provide exceptional care to every patient, every day with a spirit of warmth, friendliness and personal pride.	 Providing clinical expertise Ensuring a culture of excellence Collaborating with physicians Strong operating discipline
Sutter Davis (2013)	To enhance the well-being of people in the communities we serve, through a not-for-profit commitment to compassion and excellence in health care services.	The Sutter Davis Difference (A CULTURE OF CARING)

ตัวอย่าง Core Competency

Org	Mission	Core Competency
North Mississippi (2012)	To continuously improve the health of the people in our region	"PEOPLE WHO PROVIDE A CARING CULTURE."
Henry Ford Health System (2011)	To improve human life through excellence in the science and art of health care and healing.	INNOVATIONCARE COORDINATIONCOLLABORATION/PARTNERING
Advocate Good Samaritan (2010)	Serve the health needs of individuals, families, and communities through a wholistic approach.	 Building Loyal Relationships (with patients & families)



กิจกรรม 1

- 1. ทบทวน Mission & Core Competency ของ รพ.
- 2. พิจารณาว่า Core Competency ของ รพ. มีส่วนในการทำ ให้บรรลุ Mission อย่างไร?

SC/SA & Core Competency



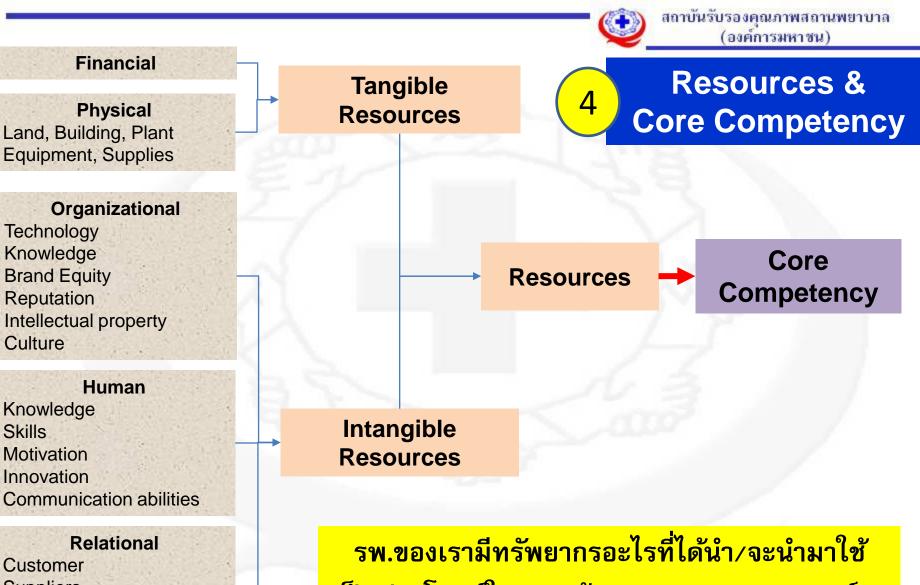
SC/SA & Core Competency

Competencies, Strategic Challenges?



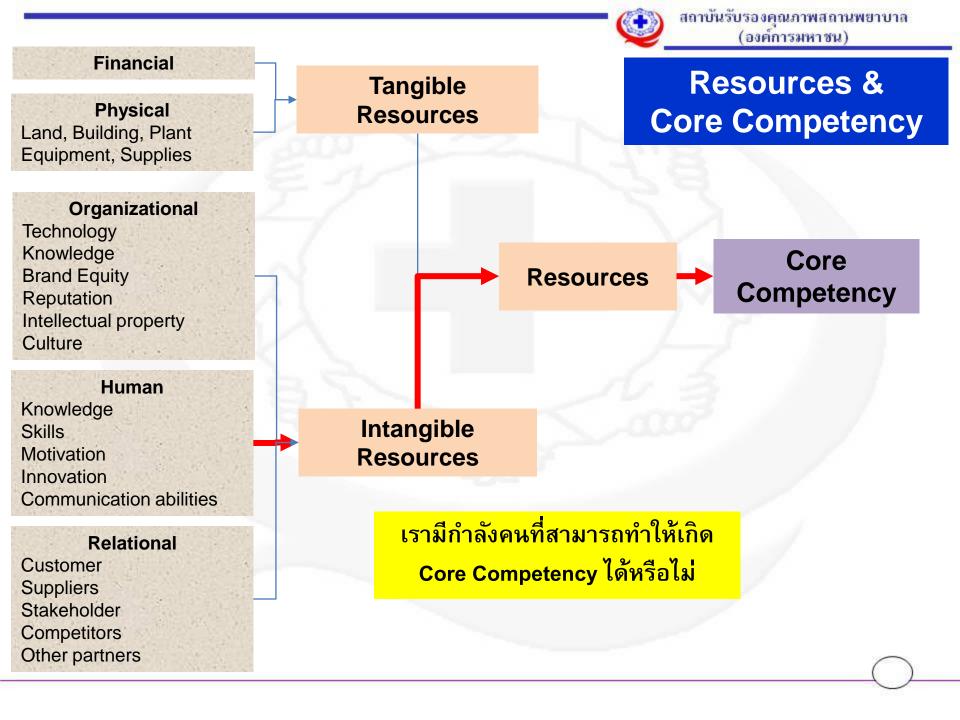
กิจกรรม 2

- 1. Core Competency ของ รพ.มีส่วนในการเสริม Strategic Advantage ของ รพ.อย่างไร?
- 2. อะไรคือส่วนที่ขาดไปของ Core Competency ที่ควรมี ถือว่าเป็น strategic challenge หรือไม่ มีแผนการพัฒนา และเรียนรู้อย่างไร?



Customer
Suppliers
Stakeholder
Competitors

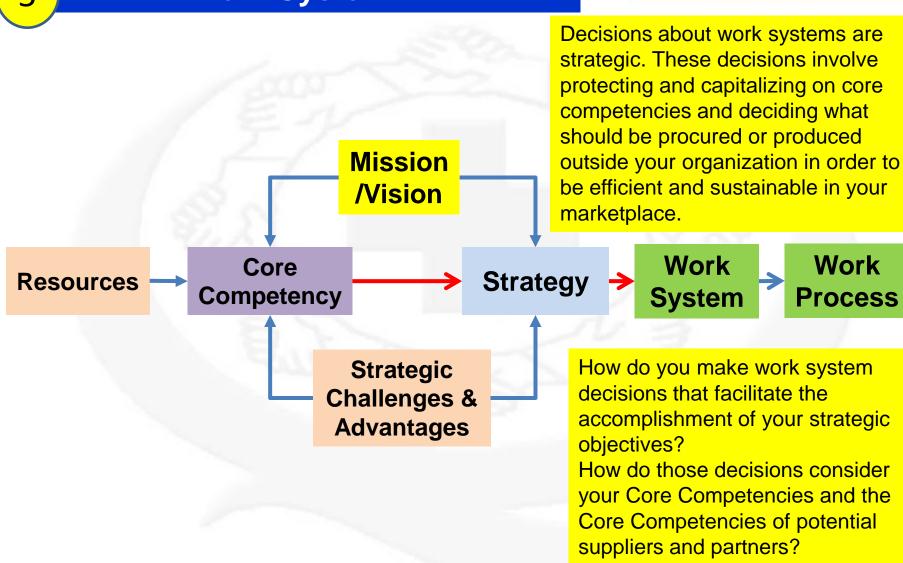
Other partners



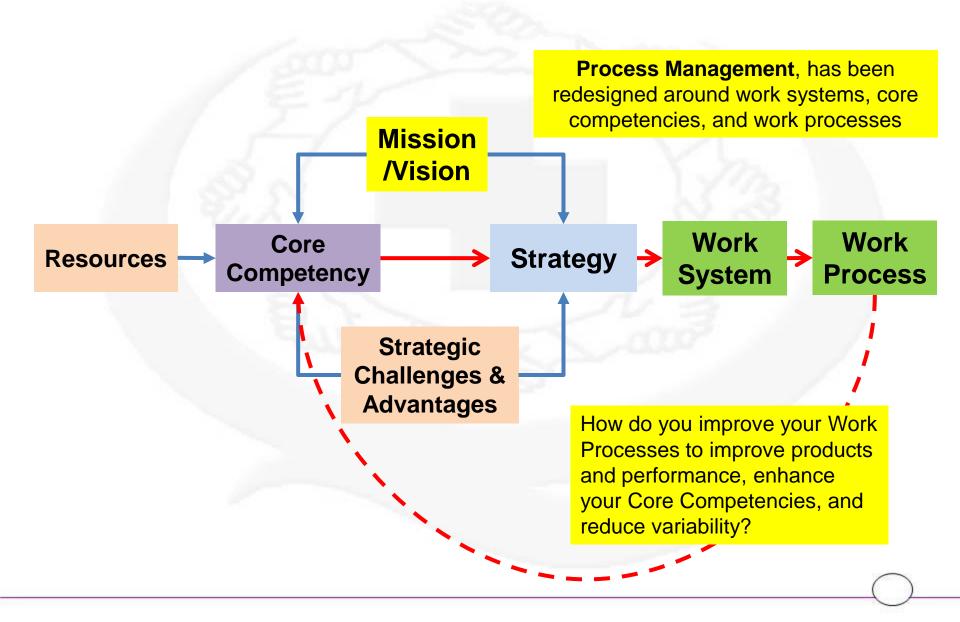
กิจกรรม 3

- 1. ทบทวน รพ.มีทรัพยากรอะไรที่เป็นข้อได้เปรียบของ รพ.
- 2. พิจารณาว่า รพ.ได้นำทรัพยากรเหล่านั้นมาใช้ประโยชน์ ในการสร้างความสามารถขององค์กรอย่างไร ?
- 3. จากทรัพยากรที่มีอยู่ ควรปรับปรุง Core Competency ของ รพ.หรือไม่ อย่างไร?
- 4. กำลังคนที่มีอยู่ สามารถทำให้เกิด Core Competency ที่ กำหนดไว้ได้หรือไม่? จะต้องมีการพัฒนาอย่างไร?

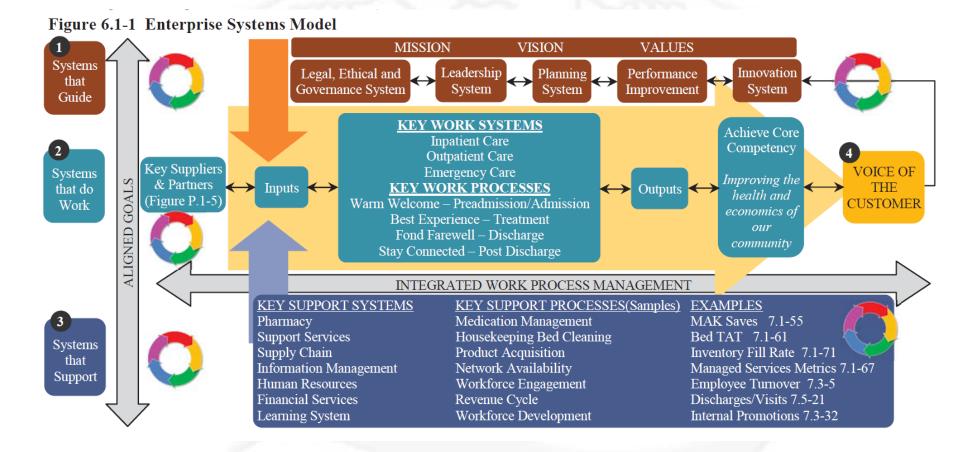
Work System



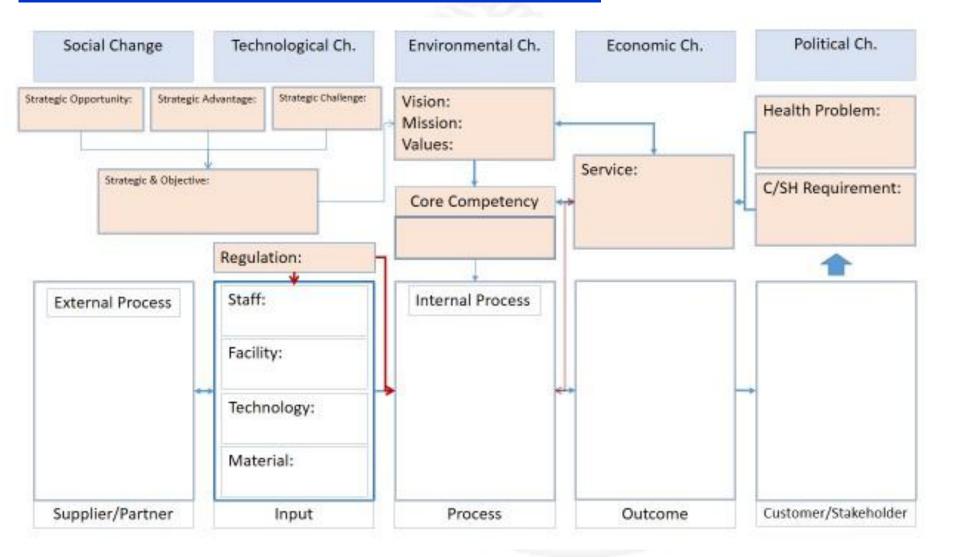
Work System



Work System Example



Hospital Profile



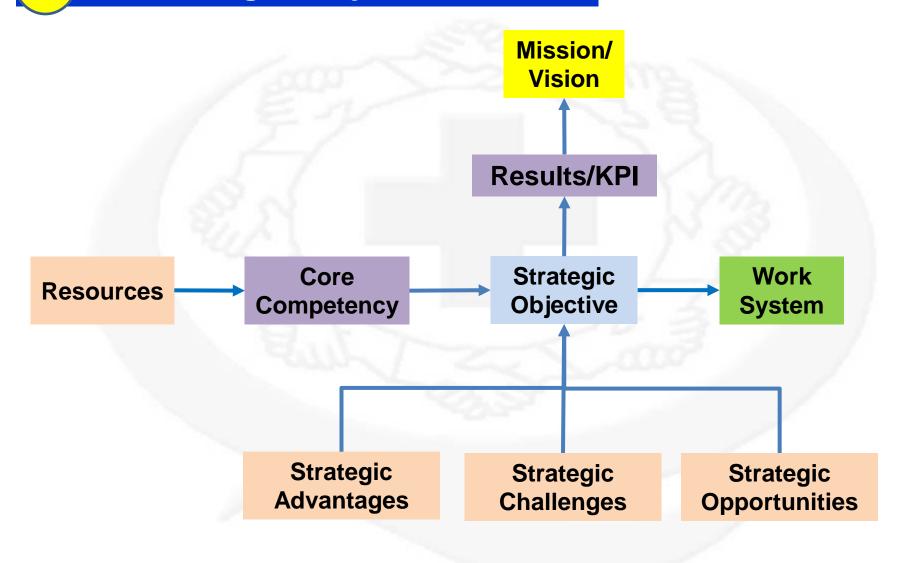
กิจกรรม 4

- 1. ทบทวนระบบงานของ รพ. มีอะไรที่ทำเอง อะไรที่ให้ผู้อื่นทำ
- รพ.มีวิธีการ/เกณฑ์ในการตัดสินใจว่ากระบวนการใดเป็น กระบวนการภายในองค์กร กระบวนการใดจะใช้ทรัพยากรจาก แหล่งภายนอก มีการนำ Core Competency ของ รพ. และของ คู่ความร่วมมือมาพิจารณาอย่างไร?

I-6.1ก(2) องค์กรออกแบบระบบงานโดยรวม และสร้างนวตกรรมให้กับระบบงาน โดยใช้ทรัพยากรจาก

N	Р	M	Extended Evaluation Criteria							
			ร.1ก(21) แหวคิดการออกแบบระบบงาห ⁴³ (design concepts)							
			211 องค์กรใช้วิธีการที่เป็นระบบในการออกแบบระบบงานและสร้างนวตกรรมด้าน							
			ระบบงานโดยรวม⁴⁴ เพื่อส่งมอบคุณค่าแก่ผู้ป่วย/ผู้มีส่วนได้ส่วนเสีย ทำให้องค์กร							
			ประสบความสำเร็จและยั่งยืน							
			212 องค์กรใช้ประโยชน์จาก core competency ขององค์กรในการออกแบบระบบงาน							
			213 องค์กรใช้วิธีการที่เป็นระบบในการตัดสินใจว่ากระบวนการใดเป็นกระบวนการ							
			ภายในองค์กร กระบวนการใดจะใช้ทรัพยากรจากแหล่งภายนอก ⁴⁵							

Challenges-Objectives-KPI



MISSION: Striving to provide the best health care to every patient, every day.

VISION: CAMC, the best health care provider and teaching hospital in WV, is recognized as the:

- BEST place to receive patient-centered care
- BEST place to work
- BEST place to practice medicine
- BEST place to learn x BEST place to refer patients



STRATEGIC OBJECTIVES

Best Place to Receive Patient Centered Care

Improve HCAHPS <u>patient experience</u> results to top decile Achieve top decile <u>clinical care outcome</u>

Best Place to Work

Improve employee satisfaction and engagement to "Employer of Choice"

Best Place to Practice Medicine

Ensure <u>medical resources</u> to meet service delivery needs/reimbursement model, and create the capability to respond agilely to healthcare reform

Best Place to Learn

Ensure accredited education and research program

Create and sustain a <u>clinical learning environment</u> that promote innovation, patient safety, and performance improvement

Best Place to Refer Patients/Market Share

Grow <u>market share</u> in primary and secondary service areas Establish <u>competencies</u> for success in the health care reform environment

CORE COMPETENCY:

Improving the health and economics of our community.



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Strategic Advantage

(SA1) Scope of services

(SA2) Performance improvement culture & infrastructure

(SA3) Learning culture

(SA4) Grown Our Own

Strategic Challenges

(SC1) Government pressure in cont. increasing quality & decreasing cost (SC2) Recruiting & retaining competent staff

(SC3) Medical staff alignment & integration

Strategic Opportunities

(SOp1) Increasing affiliation with hospitals, other providers & payors

(SOp2) Formalizing physician alignment

(SOp3) Strengthening primary care



Strategic Advantage (SA1) Scope of services (SA2) Performance improvement culture & infrastructure (SA3) Learning culture (SA4) Grown Our Own **Strategic Challenges** (SC1) Government pressure in cont. increasing quality & decreasing cost (SC2) Recruiting & retaining competent staff (SC3) Medical staff alignment & integration

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Charleston Area Medical Center (CAMC) MBNQA Recipient 2015

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care

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Strategic Advantage

(SA2) Performance improvement culture & infrastructure

Strategic Challenges

(SC1) Government pressure in cont. increasing quality & decreasing cost

Strategic Opportunities

(SOp2) Formalizing
physician alignment
(SOp3) Strengthening
primary care

Pillar: Best Place to Receive Patient Centered Care

Improve patient experience to top decile

Achieve top decile performance in clinical outcome



Pillar: Best Place to Receive Patient Centered Care

Strategic Objectives

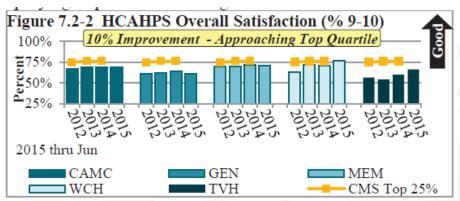
Improve patient experience to top decile

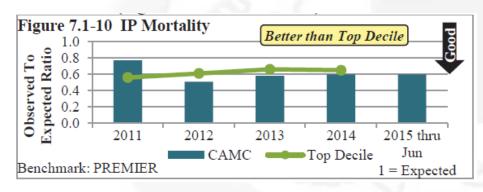
Achieve top decile performance in clinical outcome

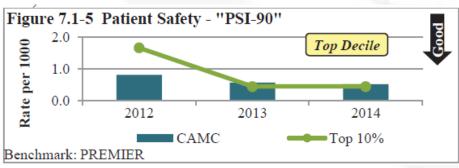
- Improve processes that support our customer service vision and timeliness of responding to key customer needs.
- Deploy standardized processes for communication with patients/families.
- Improve use of Soarian and workflows. NEW GOAL: Replace Siemens/Soarian with Cerner IT system (See 2.2b).
- Accelerate coding and clinical documentation improvements.
- Improve appropriate use.
- Improve evidence-based care reliability.
- Improve effectiveness of transitions of care to reduce readmissions. SOP(C).
- Deploy TCT to all nursing and selected ancillary departments. Value Stream Map key processes in ED, OR, CDL and Ambulatory areas.
- Improve safety systems to reduce harm. SOP(B)

BIG DOTs (4-year long- term) Results Figure # KEY MEASURES	2014 Baseline	Performance Target 2015	Stretch Target 2016	Stretc Targe 2017	t Ta	Comparison to Projection of Competitor Performance
•HCAHPS Pt. Experience Composite (7.2-2)	68%	73%	76% (QUEST Top Quartile)	77%	79% (QUEST Top Decile)	Local + Regional =
•HCAHPS Discharge Information Composite (7.2-7)	85%	88%	89% (QUEST Top Quartile)	90%	91% (QUEST Top Decile)	Local + Regional =
•O/E Mortality (7.1-10)	0.76	0.74	0.73	0.72	0.67 (QUEST Top Decile)	Local + Regional +
•TCT Implementation – Value Streams (7.4-27)		3	6	9	10 5S 30 depts.	N/A
•Patient Safety Composite (7.1-5)	0.52	0.50	0.49	0.48	0.45 (Premier Top 5%)	Local + Regional +









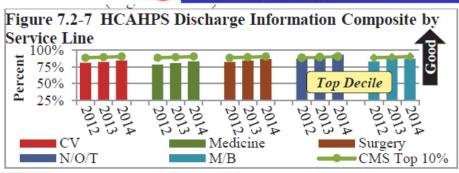


Figure 7.4-27 Implementation of Strategy & Action Plans Results

Strategy and Action Plans (Figure 2.1-6)							
Pillar	BIG DOT	Figure	3 or 4 Year Improvement				
	HCAHPS Patient Experience	7.2-2	7.9%				
Best Place to	HCAHPS Discharge Instructions	7.2-7	7.9%				
Receive	Mortality	7.1-10	22%				
Patient	TCT I	46 units	(All planned)				
Centered Care	TCT II	3	2 units				
	Patient Safety Composite	7.1-5	36.6%				
Best Place to Work	Employee Engagement	7.3-20	7.9%				
Best Place to Practice	HCAHPS Physician Communication	7.2-5	3.6%				
Medicine Medicine	High Priority Recruitments	83 recruitments					
Best Place to Learn	Accreditation status of all CAMC sponsored GME programs (15)		ams accredited ial compliance				
Best Place to Refer	IP and OP Volume for Ortho, Cardio, Neuro and CAMC Teays	7.5-24	24%				
Patients/	Expense per Adjusted Admission	7.5-2	5% (1 year)				
Market	Excess of Revenue over Expense	7.5-9	17%				
Growth	Expense Reduction	7.5-11	34%				
	All BIG DOTs Show Improvem	ent					

Pillar: Best Place to Receive Patient Centered Care

Strategic Challenges

(SC2) Recruiting & retaining competent staff

Strategic Objectives

Pillar: Best Place to Work

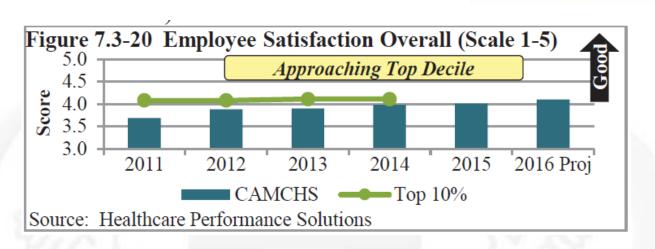
Improve employee satisfaction and engagement to "Employer of Choice"

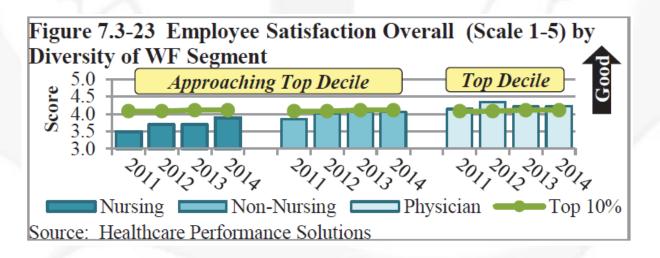
Identify at least one opportunity in each department from the 2014 Employee Survey and develop an action plan for improvement

BIG DOTs (4-year long- term) Results Figure # KEY	2014 Baseline	Performance Target 2015	Stretch Target 2016	Stretch Targe 2017	t and	Comparison to Projection of Competitor Performance
MEASURES	20	TIMETA	ABLE FO	R ACHII	EVEMENT	
•Employee Engagement Composite Score (7.3-20-7.3-23)	3.98	3.99	4.00	4.10	4.11 (EOC)	N/A

Goals

Measures





Pillar: Best Place to Work Workforce-focused Results



Strategic Challenges

(SC2) Recruiting & retaining competent staff (SC3) Medical staff alignment & integration

Strategic Opportunities

(SOp1) Increasing affiliation with hospitals, other providers & payors

(SOp2) Formalizing physician alignment

(SOp3) Strengthening primary care

Strategic Objectives

Pillar: Best Place to Practice Medicine

Ensure medical resources to meet service delivery needs/reimbursement models, and create the capability and capacity to respond agilely to healthcare reform

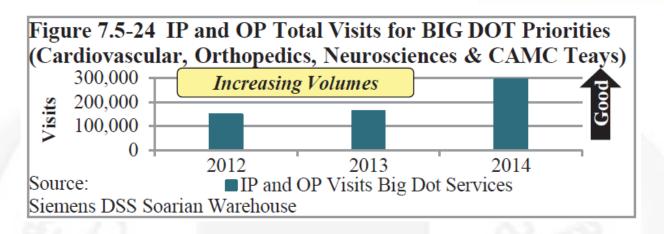
- -Fill gaps in identified critical medial staff recruitment needs
- -Implement a Medical Staff Leadership program
- -Define our Physician Enterprise Model

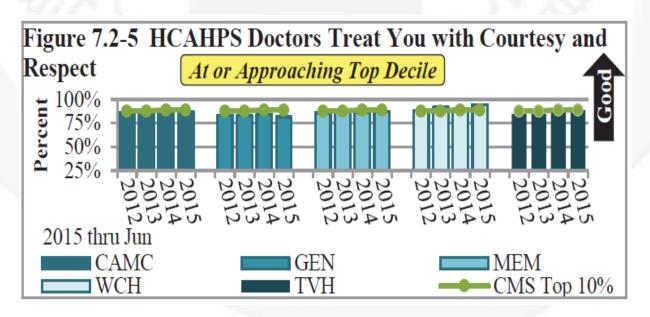
Goals

	BIG DOTs (4-year long- term) Results Figure # KEY MEASURES	2014 Bascline	Performance Target 2015	Stretch Target 2016 ABLE FO	Stretcl Targe 2017 R ACHII	<u>-</u> - =	Comparison to Projection of Competitor Performance
2	•High Priority Recruitments (7.5-24)	67%	80%	90%	100%	100%	N/A
	•HCAHPS Physician Communication Score (7.2-5)	79%	80%	81%	83%	87% (QUEST Top Decile)	Local + Regional =

Charleston Area Medical Center (CAMC) MBNQ

Measures





Pillar: Best Place to Practice Medicine





Strategic Objectives

Pillar: Best Place to Learn

- -Ensure accredited education and research programs
- -Create and sustain a clinical learning environment that promotes innovation, patient safety & PI

-Improve integration of research and academic program and learners to Quality and Patient Safety structure process, QIPS and research -Incorporate Individual Leadership Learning Plans in all Leadership Performance Planners (front line leaders up)

	BIG DOTs (4-year long- term) Results Figure # KEY	2014 Baseline	Performance Target 2015	Stretch Target 2016	Targe 2017	Key Bench & 2018 Ta	Comparison to Projection of Competitor Performance
	MEASURES	2	TIMETA	ABLE FO	R ACHII	EVEMENT	
Immera) (mraa	•Accreditation status of all GME programs (7.4-15)	15/15	All programs achieve continued accreditation status (15/15)		Citations removed	15/15 ACGME	N/A

Goals

Measures

Figure 7.4-15 Awards and Recognitions (Full List AOS)

The state of the s		
Award and Recognition	Year(s)	Stakeholder
Distinguished Hospital Award for Clinical		Patients
Excellence from Healthgrades for ranking in the	2015	
nation's top 5% of hospitals for mortality and	2015, 2014	
complication rates. CAMC is the only hospital in	2014	
WV and one of only 311 hospitals nationwide.		
Women's Choice Award America's Best Hospitals	2015	
for Patient Safety and Best Hospital for Heart Care	2015	
Outstanding Achievement Award by the		
Commission on Cancer for perfect scoring for all 3	2014	
years of the survey period. One of 75 nationwide.		
The Center for Organ Recovery and Education		
(CORE) "medal of honor" and WV "Governor's	2014	
Award for Life" for increasing donations.		
WV Kids Count "Business on board with	2009-	т. 1
Childcare" and Navigator	2011	Employees
Accreditation Council for Graduate Medical		
Education/American Osteopathic Association –	2009-	
Institutional accreditation and full accreditation	2021	
status for all graduate medical education programs		Physicians
American Heart Association and American Stroke	2014	Community
Association Gold Plus Award	2014	
National Research Corporation Consumer Choice	2009-	
Award	2015	
Blue Distinction Center for Bariatric Surgery by	2014	D
Blue Cross and Blue Shield Association	2014	Payors

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Strategic Opportunities

(SOp1) Increasing affiliation with hospitals, other providers & payors(SOp3) Strengthening primary care

Strategic Challenges

(SC1) Government pressure in cont. increasing quality & decreasing cost

Strategic Advantage (SA1) Scope of services

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Strategic Objectives

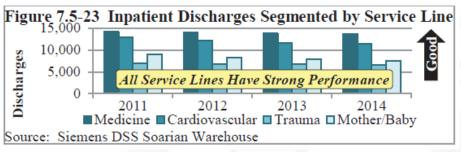
- -Grow market share in primary and secondary service areas
- -Establish competencies for success in the health care reform environment

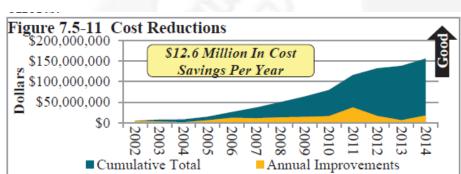
- -Grow identified service lines
- -Achieve budgeted bottom-line
- -Improve cost, efficiency and productivity
- -Implement plan to improve the health of our communities
- -Identify affiliation opportunities

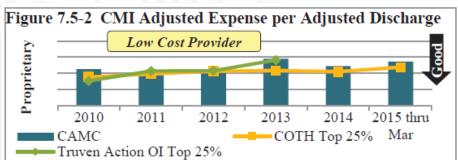
BIG DOTs Performance Key Benchma (4-year long-Target 2015 Stretch Stretch Competitor 2014 Baseline term) **Target** Target Results Figure # 2016 2017 KEY MEASURES TIMETABLE FOR ACHIEVEMENT Service Line Proprietary Local + Volume (7.5-23) Expense/AA Proprietary (7.5-2)•Reduction of \$17.3M \$20M \$22.5M \$25M N/A Operating Expense (7.5-11) •Excess of Proprietary Local + Revenue over Expense (7.5-9)

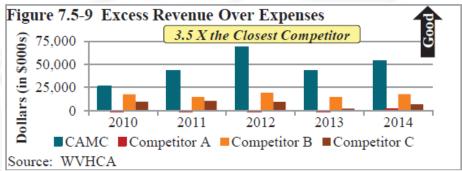
Goals

Measures









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กิจกรรม 5

- ศึกษาตัวอย่างของ Baldrige Recipient ในเรื่อง
 ความสัมพันธ์ของ Strategic Advantage/Challenges –
 Strategic Objectives KPI
- 2. ทบทวนความเหมาะสมชัดเจนของความสัมพันธ์ ดังกล่าวในข้อมูลของ รพ.
- 3. ศึกษา KPI เพื่อประเมินความสำเร็จของ รพ.
- ทบทวนความเหมาะสมของ KPI ที่ใช้ติดตาม ความสำเร็จตามวัตถุประสงค์เชิงกลยุทธ์