The Brass Ring: Common Goals Towards Enhanced Outcomes
Atlantic General Hospital

Program/Project Description.
As today’s healthcare environment becomes even more outcome focused, it is imperative that direct-care associates become involved in the organizational strategic planning process. Learn how one rural health system has successfully incorporated all levels of associates into the strategic planning process by developing common performance goals to achieve optimal outcomes.

A clearly defined strategic planning process has evolved into a systematic means of maintaining a disciplined approach to incorporating strategic planning, capital planning, and operational budget into an actionable annual plan. Focused on achieving enhanced outcomes through the development of common goals across all levels of the organization, this replicable model can be utilized to develop a shared vision for the future, guide financial stewardship, ensure investment in community needs and incentivize all members of the healthcare team to participate in the attainment of organizational goals.

Process.
Using strategies outlined in Financing the Future Report 5: How are Hospitals Financing the Future? Core Competencies in Financial Planning (Healthcare Financial Management Association, 2004), Atlantic General Hospital has incorporated a well-defined strategic planning process that includes the development of common goals across all levels of the organizations, from the Board of Directors to the front-line healthcare associates.

Solution.
Healthcare change will require an active involvement of healthcare associates at all levels, including both direct-care staff and leaders. Our limited resources will need to be focused, evidence based and measurable. This program defines a targeted method to combine efforts in today’s healthcare environment to achieve strategic initiatives and enhanced outcomes.

At AGH, our annual budget calendar is fully integrated into our strategic planning process. See attached graphic on the AGH/HS Strategic Planning Process.

All strategic initiatives are incorporated into the annual organizational goals and categorized based on six strategic pillars. Senior Leadership then develops their individual performance goals that support organizational goals, Leadership Management develop individual goals that support their Senior Leader's goals, and then Global Shared Governance Councils develop goals that support all levels.

For example, on our initiative to implement a Bedside Medication Administration System, the following goals were developed:

VP of Patient Care Services
  Goal - Successfully implement bedside medication administration system by March 2011
  Measurable Standard – Monitor the medication error rate and determine the impact of closing the medication safety loop

Director of Nursing
  Review and evaluate current state medication reconciliation process

Director of Pharmacy
  Complete pre-implementation assessment of organizational readiness to utilize bedside medication administration system
  Implement bedside medication administration system

Director of Community Foundation
  Raise $98,000 to assist in the purchase of bedside medication administration equipment using bar code scanning technology to further the safety of administering medication to patients

Performance Improvement /Patient Safety Council
  Monitor med error rates as reported by the Medication Safety Team to meet benchmark of 75% reduction in med errors after implementation of bedside medication administration system

Practice Council
  Review and approve all bedside medication administration policies and procedures supported by evidence based practice

Education Council
  Assist with the development of patient/family and provider education of new bedside medication administration system
Measurable Outcomes.
See attached for examples:
- Strategic Initiative Status Report
- Leadership Goal Tracking Tool
- Global Shared Governance Annual Goals Status Report

Sustainability.
Annual strategic planning and budget cycle that never ends. It's the never-ending nightmare! :) 

This process enables AGH to attract, retain, motivate, and reward leadership for successful achievement of strategic initiatives and organizational goals through leadership team compensation:
- Base Salary – 50th-60th percentile
- Directors – earn up to 7.5% of annual base salary
- Managers – earn up to 5% of annual base salary
- Percentage Compensation based on accomplishment of weighted goals, as well as a discretionary bonus

This same process also enables AGH to attract, retain, motivate, and reward direct-care associated through an individual compensation plan:
- Earn incentive based compensation, paid in the form of a bonus, for activities and behaviors that go beyond the standard expectations for their position
- FY10 - 12% of all associates participated in this voluntary program
- First Tier – 50 points, 1.5% of annual base salary
- Second Tier – 100 points, 2.5% of annual base salary

Role of Collaboration and Leadership.
Healthcare change does require an active involvement of healthcare associates at all levels, including both direct-care staff and leaders. Our limited resources will need to be focused, evidence based and measurable. AGH has successfully engaged their Board of Directors, leadership and associates to reach for the “brass ring” - our common goals. Our patients, families and associates have all benefited from this targeted method to combine efforts in today's healthcare environment to achieve strategic initiatives and enhanced outcomes.

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AGH/HS Strategic Planning Process

June 30
- Capital Needs
- Cash Plan
- Operations Budget
- Board Approval

External Environment
- Population Data
- Trend Data
- Needs Assessment
- Competitive Analysis

October 31
- Performance Measures
- Current Strategic Plan Update
- Historical Trend Analysis
- Sr. Leadership Retreat

March 1
- Action Plan Summaries
- Prioritization of Plans
- Business Plan Development
- Board of Directors Retreat

November 30
- Gap Analysis
- Leadership
- Physicians
- Categorize “Clinically”


Securing Buy-In Into Strategic Initiatives

Board and CEO visit Central Sterile before and after approved renovations in FY10
## Status Reports

<table>
<thead>
<tr>
<th>FY11 Initiative</th>
<th>Sr. Leadership Ownership</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cashless Cafe Tech</td>
<td>Lebedz</td>
<td>• Timeline is undeveloped and is projected to be achieved by schedule 14 JUL 10</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Glenn has a conference call scheduled with Freemarked to discuss education for medical staff (21 JUL 10)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Held kick off meeting with IS, waiting for software to develop implemented (26 AUG 10)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Scheduled go live for August 31, 2010 (planners will be included 14 AUG 10)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Go live complete and service is working. There is significant number of groups on the first day (28 SEP 10)</td>
</tr>
</tbody>
</table>

## Leadership Goal Template

<table>
<thead>
<tr>
<th>Goal Description</th>
<th>Standard to be met/ How achievement is measured</th>
<th>Timeframe for measurement</th>
<th>Why is this important? Relative importance</th>
<th>Final Outcome</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality</td>
<td>1. Establish reporting mechanism and indicators of success 2. Monitor results and report to quality 3. Utilize strengths of the project to define future projects through analysis of success</td>
<td>Implementation - 08/2010 Quality Dashboard - 03/2011</td>
<td>Achieve our mission to deliver quality patient care, including the development of new services. Ensure new service lines are aware of published benchmarks and collecting quality data.</td>
<td></td>
<td>A. 5%</td>
</tr>
</tbody>
</table>
## Council Goal Template

<table>
<thead>
<tr>
<th>Strategic Pillar</th>
<th>Goal Description</th>
<th>Standard to be met/ How achievement is measured</th>
<th>Timeframe for measurement</th>
<th>Why is this important? Relative importance</th>
<th>Update to Executive Council</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality</td>
<td>Monitor the establishment of quality indicators and benchmarks for new services: 1. eCare - S. Rose 2. Cancer Care - J. Wingate 3. Ophthalmology - S. Donaldson 4. Digital Mammography - N. Heigson</td>
<td>Completion of a Department level dashboard report displaying data against published benchmarks</td>
<td>1. 03/2011 2. 02/2011 3. 10/2010 4. 02/2011</td>
<td>Achieving our mission to deliver quality patient care, including the development of new services. Assures new service lines are aware of published benchmarks and collecting quality data.</td>
<td>9/14/2010: eCare went live. 7/2010 and will continue to work on establishment of indicators and reporting structure.</td>
</tr>
</tbody>
</table>