Sacramento Region Health Care Partnership
Regional Strategic Planning Meeting

“Building a Bridge: Closing the Gap for Community Health Care Reform”

May 7, 2012
REGIONAL MEETINGS

APRIL 16TH SESSION
• Rollout of Detailed Market Analysis
• Present Feedback
  ✓ Top five (5) areas for focus by the region
  ✓ Benefits/Challenges
• Respond to Top Areas
  ✓ Where are the gaps?
  ✓ What are the benefits/challenges?
  ✓ What are the risks/threats?
  ✓ What are the success factors needed to implement?

APRIL 30TH SESSION
• Present SWOT Analysis by Opportunity
• Complete SWOT Analysis
• Design SMART Goals for each opportunity via group process
• Group consensus on Goal Statement
• Develop action necessary to achieve
• Notify participants re: online survey purpose & deadline

MAY 16TH
• Present DRAFT Strategic Planning Document
• Implementation Development
• Strategic plan leadership (who)
• Resources/Budget (what)
• Timeline (when)
• Communications (how)

MAY 21ST
• Present online survey results (depending on response rate may need to do mini prioritization exercise
• Identify who, what, how & success measures for priority items via group process
• This is the reality check session where individuals with content knowledge & experience discuss what factors are needed for success & resources available with stakeholders in roundtable discussions

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SURVEY

INPUT FROM THE COMMUNITY, WRITTEN BY THE CONSULTING PLANNING TEAM

DRAFT STRATEGIC PLAN

VALIDATE DRAFT WITH ADVISORY GROUP

ROLLOUT STRATEGIC PLAN
Community Wide Meeting
Congresswoman Matsui
And Key Policy Makers
Emerging Regional Areas
Sacramento, El Dorado, Placer and Yolo Counties

- Leadership
- Collaboration
- Expansion, retention of workforce training
- Primary care safety net and specialty care capacity
- Care coordination for patients
  - Identifying strategies to reduce patients unnecessarily visiting the ED
  - Better partnerships between hospitals and community health centers
- Building capacity
- IT – Communication integration
- Funding
- Culturally appropriate patient education on consumer utilization choices
Meeting Goal

To reach clear and actionable key items for action
What do “breakthrough” and “SMART” goals mean?

**BREAKTHROUGH:**
- Significant opportunity to impact the primary care health care safety net
- Thinking completely out of the “bun,” “the box” or “the universe”

**SMART:**
- Specific: Goal must be clear and unambiguous
- Measurable: Clear data point that is pre/post-measureable
- Attainable/Achievable/Actionable: Goals must be realistic (high leverage and high yield) and attainable (within 18 to 24 months)
- Relevant or Realistic: Goals must be an important tool in reaching the strategic plan
- Time-bound: Goals must have starting points, ending points, and fixed durations
Survey Results

• Survey sent to 147 people.
• Total started survey: 64
• Total completed survey: 50 (78.1%)
SRHCP Strategic Plan Survey

1. Which of following are the most important topics for the Sacramento Region to implement using the “SMART*” goals (select up to four)?

<table>
<thead>
<tr>
<th>Topic</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding</td>
<td>44.3%</td>
<td>27</td>
</tr>
<tr>
<td>Building Capacity</td>
<td>49.2%</td>
<td>30</td>
</tr>
<tr>
<td>Care Coordination</td>
<td>63.9%</td>
<td>39</td>
</tr>
<tr>
<td>Collaboration</td>
<td>54.1%</td>
<td>33</td>
</tr>
<tr>
<td>Culturally Competent</td>
<td>27.9%</td>
<td>17</td>
</tr>
<tr>
<td>Expansion and retention of workforce</td>
<td>18.0%</td>
<td>11</td>
</tr>
<tr>
<td>IT/communication integration</td>
<td>23.0%</td>
<td>14</td>
</tr>
<tr>
<td>Leadership</td>
<td>37.7%</td>
<td>23</td>
</tr>
<tr>
<td>Primary care and specialty care</td>
<td>49.2%</td>
<td>30</td>
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answered question: 61
2. Of your top four choices, which two "SMART" goal characteristics had the most influence on your decision (select up to two)?

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<thead>
<tr>
<th>Characteristic</th>
<th>Response Percent</th>
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<tbody>
<tr>
<td>Specific</td>
<td>31.3%</td>
<td>15</td>
</tr>
<tr>
<td>Measurable results</td>
<td>39.6%</td>
<td>19</td>
</tr>
<tr>
<td>Attainable</td>
<td>45.8%</td>
<td>22</td>
</tr>
<tr>
<td>Realistic</td>
<td>39.6%</td>
<td>19</td>
</tr>
<tr>
<td>Timely</td>
<td>35.4%</td>
<td>17</td>
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answered question 48
skipped question 15
Survey Q3: What comments do you have about the strategic planning process?

- Be more inclusive/involve more stakeholders (i.e., health systems, health plans, more senior leadership)
- Focus more/prioritize/get to actions/measurable results
- Process has avoided some of the “hardest” issues (i.e., fragmentation, payer policies and competition)
- Role of stakeholders in helping move strategic plan forward
- Grateful and appreciative
- Challenges with the process (i.e., stakeholders that do not know each other, unspoken self interests, differing county needs, do not know what key parties are “willing to do”
Survey Q4: What would you consider a successful outcome?

- Shared vision and attainable implementation strategy supported by all stakeholders
- Common shared vision
- Formal “buy-in” by stakeholders
- Strategic plan reflects needs of communities by the communities
- Actionable plan
- “I have no idea”
- Identifying a leader or lead organization/neutral and fully empowered
- Concrete initiatives that a significant number of CHCs agree to implement
Meeting

• Methods for this meeting

• Steps we plan to follow
Proposed Strategic Plan Template:

Proposed Strategic Plan Vision:

*Strengthen the health-care safety net in the Sacramento Region to provide health care services to all with services that are coordinated, outcome-based and integrated.*
Proposed Strategic Plan Template:

Proposed Strategic Plan Assumptions:

Create strategic planning goals/actions, which include:

• Limited fragmentation and silos
• Full key stakeholder engagement
• Sharing a common vision
• Willingness to participate and implement action plans
• Willingness to contribute resources to reach the shared vision
• Use of best and promising practices that are literature based
• Willingness to create an empowered leadership structure
• Continued engagement to assure long-term success and modification to client needs
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<td>(1) interface between care givers (i.e., CHCs, hospitals, access portals, etc.) is optimized, (2) strategies for case management and chronic disease is fully embraced between these entities and (3) metrics in place to measure outcomes and to adjust performance</td>
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**Proposed Smart Goals:**
- Develop and adopt a care coordination “best practice” toolkit
- Expand community navigator model
- Adopt an appropriate clinical care delivery pathways, prevention and coordination model
- Provide technical assistance to promote adoption of a “patient-centered medical home” in each CHC
## Sacramento Region Health Care Partnership
### Key Topic Areas / Definitions SMART Goals

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| (2) Collaboration    | (1) cooperation among CHCs  
                        | (2) coordinated strategies from funding sources (i.e., health systems, etc.) and \                                                         |
|                      | (3) cooperative opportunities resulting in better care, lower costs and more leveraged coverage of care                                   |

### Proposed Smart Goals:
- Establish an organization model to provide the infrastructure for increased collaboration amongst key stakeholders
- Implement ED coordination and cost-effective care models
- Establish short and medium-term safety net financing strategies
- Develop a, or coordinate with an existing, CHC technical assistance center (TAC) to implement high-leverage collaborative models around human resources, cost effectiveness, FQHC/MUA/grant technical support and collaborative-care delivery models
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<td>(3) Building Capacity</td>
<td>Sufficient physical, workforce and financial resources to meet all the needs of the safety net into the future particularly with regard to ACA</td>
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**Proposed Smart Goals:**

- Implement a needs-based capacity building initiatives to support the expanding needs of the primary care SN
- Establish best-practice flow, access and intake/care strategies to strengthen the CHC safety net
- Develop and implement a strategy for developing a shared understanding of current and forecasted capacity needs for specific areas in the region
- Develop and implement “load-leveling” models for peak patient intake needs through technology and collaborative measures
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<td>(2) strategies for specialty carefully leveraged through best and promising practices</td>
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<td>(3) access to both categories in a timely manner is achieved</td>
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**Proposed Smart Goals:**

- Complete inventory of physician and provider needs to meet demand
- Develop and implement strategies including the use alternative care givers, collaborative recruitment models, innovative incentive programs, etc.
- Inventory and adopt “best of breed” specialist programs that leverage specialist skill against CHC current and “to be developed” capabilities
- Adopt best practice telemedicine options for primary, dental, mental health and their coverage to CHCs
- Develop and implement specialist care maps designed to improve leverage of specialists in CHCs
SMART Goals

To achieve the implementation of Health Reform in the Sacramento Region

• **Specific:** Goal must be clear and unambiguous
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SMART Goal Exercise

Using *ten-minute* segments, begin listing your additional key “SMART” goals for each of the top four key topic areas:

**Rule 1**: All ideas are to be valued
**Rule 2**: Think out of the universe
**Rule 3**: Just write down thoughts as they come (we can clean them up later!)

Reminder:
- **Specific**: Goal must be clear and unambiguous
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Top Topic Areas:

1. Care Coordination
2. Collaboration
3. Building Capacity
4. Primary & Specialty Capacity
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**Proposed Smart Goals:**
Questions
Sacramento Region Health Care Partnership
Key Topic Areas / Definitions / SMART Goals

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Proposed Tasks/Assignments:
Thank You!