STRATEGIC IMPERATIVES AND DIRECTION
2011-2016
INTRODUCTION

Strategic planning for the future is important for any organization, but with the rapidly changing health care environment, it is an indispensible activity for all health care providers. Hospitals in particular can’t wait for every uncertainty associated with national reform to be resolved before they act, because the only certainty is that more change is coming. Identifying the steps necessary to ready for these reforms, and making the necessary investments in new programs or services, or in restructuring existing programs and services, is the only way hospitals can remain viable and contribute towards the goals of our evolving health care system.

Charlotte Hungerford Hospital’s (CHH) strategic planning process was meant to provide the people who work, volunteer, practice, or receive services here with a clear picture of what the Hospital is about, what it wants to become, and how it intends to get there. The Hospital, and the system of care it is a part of, needs this direction in order to prosper and assure the health and well-being of the 100,000 lives it proudly serves, and continue to thrive as a small, independent, community-based hospital.

Any strategic planning process must begin with a clear sense of mission, a well-articulated vision statement that essentially describes a desired state for the Hospital five years into the future, and a collection of values to guide the work. Affirmed by the CHH Board of Governors, senior management, and physician community, the following Mission, Vision and Value Statements provide the overarching framework to this Strategic Plan.

MISSION

The primary Mission of The Charlotte Hungerford Hospital is to provide access to quality, compassionate, affordable healthcare for the people of Northwestern Connecticut.

VISION

To have grown and developed as a vibrant, independent, community-based health care network serving as the provider of choice for the 100,000 lives in our service area, delivering a comprehensive array of health care programs and services directly, or in partnership with others.
In reaching this status, we shall:

1) Achieve clinical excellence and provide the highest quality of care;
2) Assure our staff, patients and community have confidence in our care;
3) Develop our organization and network of providers into a more effective, coordinated, competent and accountable team;
4) Improve our infrastructure and patient environment; and,
5) Strengthen our organization’s financial health.

VALUES

Recognizing the worth and dignity of every human being, we fulfill our mission through the expression of core values rooted in our history, defining our present, and directing our future. Our values recognize patients, families, co-workers, colleagues and the community we serve without regard to ethnic or cultural differences, spiritual belief or lifestyle choices. We pledge ourselves to the following values and beliefs and commit ourselves continually to seek out ways to embody them in our attitudes, services and care.

Dignity--We respect the unique nature and needs of every individual, and recognize their right to privacy, confidentiality and healthcare choices. We involve the individual and their significant others in decisions regarding their health.

Compassion--We believe in the compassionate delivery of care and advocate for those in need. We strive to create an environment in which professionalism and caring are combined to promote healing, growth, and well-being for all.

Service/Excellence--We believe that service excellence is achieved through proactive, innovative and responsible management of our many resources, both human and technological. We believe that this can be accomplished by a “customer first” approach in which we listen, anticipate, and strive to exceed expectations. We promote continuous learning and collaboration among health care teams in order to achieve excellence.

Community--We promote the health of all we serve and believe that partnership with the community is essential to the achievement of shared goals. We encourage education and participation in care to maximize health care outcomes.

Integrity--We believe each person, whether a patient, an employee, vendor, or any agent of the Hospital has the right to be treated in an honest, fair, and appropriate manner with dignity and respect beyond economic or personal needs.
CONTEXT FOR PLANNING

To accomplish this Mission and Vision, and remain a vibrant and independent community-based hospital, requires a clear focus on sustaining and increasing certain competitive advantages, and in carefully evaluating the multiple conditions that influence our long-term success. As a means to inform strategic planning, the Hospital, over several months, conducted a comprehensive assessment, using both quantitative and qualitative data, of multiple factors and conditions affecting the Hospital. In addition, an analysis of our behavioral health market and services was conducted.

Reflecting on the multiple findings from these efforts concluded that CHH is a stable and well-positioned hospital with a distinct opportunity to grow and develop. However, that opportunity can only be grasped by effectively addressing and meeting several challenges, both existing and anticipated. From this emerged five strategic imperatives for which there was common interest and agreement among CHH’s stakeholders, including:

1) **INVEST IN QUALITY AND STRENGTHEN THE PRODUCT:** Achieve what it takes to be recognized as a high quality hospital and a provider of clinical services that is comprised of the best human and technological resources available.

2) **THINK PATIENT EXPERIENCE AND LOYALTY:** Take all necessary steps to be perceived as a Hospital attuned to its community, possess a strong public and self image, and be the provider of choice and the Hospital people first think of when they need Hospital-level of care.

3) **BUILD TEAM, INTEGRATION AND SHARED RESPONSIBILITY:** Create a positive work environment and effective care-giving through the recruitment, retention, support and development of staff, including managers and directors, and the establishment of partnerships, collaborations and models of physician-hospital integration.

4) **REMEMBER THE ENVIRONMENT MATTERS:** Update facilities and non-clinical technology and equipment to ensure our staff has a physical workplace that supports safe care delivery and patients and their families experience comfort and convenience.

5) **STAY WEDDED TO A LOW-COST STRUCTURE:** Assure the Hospital’s financial health so that it may pursue its health care mission on a long-term basis, provide high quality service, and be able to adapt to the changes in the health care environment.
STRATEGIC PRIORITY AREAS

Using these five imperatives as the basis for framing our strategic work initiatives, five corresponding strategic priority areas were selected. Each strategic priority area contains explicit objective measures and specific strategies which will be monitored and reported throughout the life of this plan.

Strategic Priority Area 1: 

**Clinical Excellence and Quality of Care Improvements**

**Goal:** Be recognized as a high quality hospital and a provider of clinical services that is comprised of the best human and technological resources available.

**Key Strategies and Measures**

1.1 Expand our capacity to track clinical processes and results, compare those elements against national, state and internal benchmarks, and respond with quality improvements and initiatives.

   A. Within five years achieve the top 10% of hospitals across standardized quality care (Oryx) and patient safety measures (SCIP).
   
   B. Over the next five years, maintain a constant state of readiness and compliance with Joint Commission
   
   C. Over the next five years, we shall strive for zero “sentinel” and zero “never” events.
   
   D. Within five years readmission rates will be below national average.

1.2 Develop select clinical services and make targeted investments in human capital, infrastructure and technology in support of enhancing their quality and health outcomes, with an emphasis on emergency department, obstetrics, oncology, general surgery and cardiology.

   A. Over the next five years, wait times at the Emergency Department from “door to MD” will average less than 30 minutes.
   
   B. Within five years, total time at the ED will be at or below New England averages.
C. Within five years, market share for the following services will be achieved:

1. General Surgery Market Share will be at or exceed 60%.
2. Medical Cardiology Share will be at or exceed 80%.
3. Deliveries Market Share will be at or exceed 65%.
4. GYN Surgery Market Share will be at or exceed 75%.
5. Medical Oncology Market Share will be at or exceed 70%.
6. Urology Market Share will be at or exceed 80%.

1.3 Develop a seamless electronic communication of patient information between and among regional health care providers and their patients, and invest in technology for clinical decision support.

A. Within five years, meaningful use standards will be met, under which 90% of all providers will utilize an electronic medical record system, and there will be 100% utilization of a computerized physician order entry system.

B. Within five years, CHH will develop a Health Information Exchange, under which 90% or more of all patient information will be captured.

C. Within five years, clinical documentation in support of hospital-based inpatient, outpatient, and diagnostic encounters will be 95% automated.

**Strategic Priority Area 2: Confidence in Care**

**Goal:** Be perceived as a Hospital attuned to its community, possess a strong public and self image, and be the provider of choice and the Hospital people first think of when they need Hospital-level of care.

**Key Strategies and Measures:**

2.1 Establish and implement a strategic communications plan that builds stakeholder relationships, unifies branding, increases market awareness, develops a compelling case for using specialty care services, and increases the positive image and support for the Hospital.
A. Positive consumer perception will increase by 10% in three years and 15% in five years

B. Within five years, market share for the following services will be achieved:

1. General Surgery Market Share will be at or exceed 60%.
2. Medical Cardiology Share will be at or exceed 80%.
3. Deliveries Market Share will be at or exceed 65%.
4. GYN Surgery Market Share will be at or exceed 75%.
5. Medical Oncology Market Share will be at or exceed 70%
6. Urology Market Share will be at or exceed 80%

C. Over the next five years, remain the provider of choice by maintaining or increasing our market share in behavioral health, pediatrics, general medicine, and ancillary/diagnostic services.

D. Within five years, increase ratio of elective admissions to total admissions by 10%.

2.2 More frequently assess CHH’s service areas’ health needs and demographics, and conduct joint planning with other providers in order to identify and develop specialized product and service lines, community collaborations and programming.

A. Over the next five years, an annual, proactive community benefits plan shall be created.

B. Within five years, a periodic and formal health assessment process shall be established and implemented in conjunction with other community providers.

2.3 Develop an “optimal” patient experience plan with integrated satisfaction benchmarks, routinely assess and act upon consumer perception findings related to CHH’s performance in key clinical and non-clinical areas of patient care, and recognize, nurture and utilize our nursing and direct care staff as one of our key assets in creating this experience and shaping this perception.

A. Within five years, measures related to “Likelihood to Recommend” and overall rating of care will be above state and national averages.

B. Over the next five years, measures related to cleanliness, quietness and other patient environment concerns will be above state and national averages.
Strategic Priority Area 3: Organizational and Partnership Development

Goal: Create a positive work environment and effective care-giving through the recruitment, retention, support and development of staff and organizational leaders, and the establishment of partnerships, collaborations and models of physician-hospital integration.

Key Strategies and Measures:
3.1 Foster stronger relations between and among employed and private Medical Staff at the Charlotte Hungerford Hospital aligned around improving the quality of patient care, patient satisfaction, coordination of patient care, medical information exchange, physician recruitment and financial performance.

A. Over the next five years, ensure that M.D. specific and on-going professional performance evaluations are completed and reviewed by the respective departments of the Medical Staff, by the Medical Executive Committee, the Patient Care Conference Committee, and by the Board of Governors and that any identified issues are addressed in accordance with the standards of care for the State of Connecticut and the Joint Commission.

B. Over the next five years, there will be an established means and system for the Hospital and Medical Staff to work together on identifying and resolving Patient Satisfaction issues.

C. Within the next five years, establish and evolve a model of care delivery and supporting policies and procedures that improves the community-wide coordination of patient care in a manner consistent with CMS mandates and future strategies.

D. Within the next five years, a technological architecture will be established across our community that connects physicians in the ambulatory environment with one hospital and other providers including skilled nursing facilities, imaging centers and visiting nurse agencies.

E. Over the next five years, ensure that the Hospital and Medical Staff work together on the recruitment of new and replacement physicians in accordance with the Hospital’s 2009 Manpower Study and clinical service line development.

F. Over the next five years, ensure that the Hospital and Medical Staff work together to maximize clinical outcomes and financial performance associated with anticipated payment transformations (e.g. shared reimbursement and shared savings).
3.2 Ensure patients and families throughout our service area have easy access to specialty care and services by establishing partnerships with health systems for services CHH does not provide, or for the purpose of improving or consolidating the delivery of care we already provide.

A. Within five years, there will be documented agreements and established clinical pathways for all partnered services.

3.3 Create a work environment that supports and nurtures the recruitment/retention of compassionate and competent staff who are enthusiastic about working, recommending, and receiving care at CHH, and whom collectively promote a culture of safety and quality, and develop and implement an internal communications plan to better inform employees, medical staff, volunteers and patients about Hospital data, outcomes, issues and concerns.

A. Within five years, Staff/Employee willingness to refer CHH for care will be at least 85% across all key service areas.

B. Within five years, Staff/Employee willingness to refer CHH for employment will increase by 10%.

C. Within five years, Staff/Employee overall job satisfaction will increase by 10%.

D. Over the next five years, CHH vacancy rate for nursing staff will on average be no greater than 8%.

**Strategic Priority Area 4: Patient Environment and Infrastructure Enhancement**

**Goal:** *Update facilities and non-clinical technology and equipment to ensure our staff has a physical workplace that supports safe care delivery and patients and their families experience comfort and convenience.*

**Key Strategies and Measures:**

4.1 Develop a five (5) year “Master Facilities Plan” and a two-year “Infrastructure Improvement Plan” that addresses the funding and prioritization of upgrades and uses to the existing physical plant and properties, and separately prioritizes improvement projects including, but not limited to: fire alarm system(s); HVAC systems or system components; parking lots; roadways and sidewalks; Operating Room modernization; cafeteria modernization; and, communication systems.

A. Master Facilities Plan developed by end of Fiscal Year 2012.
B. Infrastructure Improvement Plan developed by June 2011.

C. Compliance with all regulatory standards/requirements will be met (Joint Commission, Department of Public Health, OSHA)

4.2 Conduct a comprehensive feasibility study regarding the conversion of the hospital to 100% private beds and the development of a new or renovated emergency department that considers patient privacy and comfort, technology advances in patient care, regulatory requirements and equipment/supply storage.

A. Funding for the study will be budgeted for Fiscal Year 2013.
B. Reach a decision regarding implementation of plan by Fiscal Year 2014.

4.3 Complete the planned project to modernize CHH facilities in the Winsted market area.

A. Determine site location by June 2011
B. Formalize renovation/construction plans by March 2012
C. Complete facility renovation by September 2014 or facility construction 2013.

**Strategic Priority Area 5: Strengthen Financial Health**

**Goal:** Assure the Hospital’s financial health so that it may pursue its health care mission on a long-term basis, provide high quality service, and be able to adapt to the changes in the health care environment.

**Key Strategies and Measures:**

5.1 Design and implement an annual development plan that creates a case for support for the Hospital, provides for proper donor management, identifies prospects, and contains annual fund-raising approaches and activities.

A. Within five years, increase annual giving by 200% from Final Audited FY 2010 Financials
5.2 Enhance profitable revenue through improved documentation, inpatient case management, coding, resource utilization, and through reduced accounts receivables and favorable managed care contracts.

A. Within five years, CHH’s net revenue per equivalent discharge, case mix adjusted, will be equal to or above the average comparison group of peer CT Hospitals as identified by CHH.

5.3 Achieve cost reductions, containment, and avoidance through improved materials management, operational efficiencies, and service contracting, risk management, and reducing pension plan liability.

A. Over the next five years, CHH’s debt service ratio will be no less than 1:1 in any given year

B. Within five years, CHH’s net expense per equivalent discharge, case mix adjusted, will be less than or equal to the average comparison group of peer CT Hospitals as identified by CHH.

5.4 Conduct periodic financial and service line analysis’ of CHH’s existing and potential books of business to determine which budgetary commitments and conditions need to change and which services should be sustained, grown, initiated, repositioned, or referred out.

A. Over the next five years, achieve at a minimum a 1% Operating Margin.

B. Within five years, CHH’s gain or loss per equivalent discharge, case mix adjusted, will be greater than or less than, respectively, the average comparison group of peer CT Hospitals as identified by CHH.