

Moving Towards Improving Organizational Performance-Best Practice Model for Transparency



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Objectives

- Relate the organizational challenge to meet the requirement for performance measurement, and informing our partners, collaborators, employees.
- Discuss the methodology for developing and managing scorecards.
- Describe how cycles of learning supported sharing organizational knowledge.

99 Acute
165 Skilled/Resident Care
24 Inpatient Adult Behavioral Health





Community Memorial Healthcenter

- Mission
 - To provide excellence in the delivery of healthcare
- Vision
 - To be a national leader in healthcare through continuous improvement in all we do.



Community Memorial Healthcenter

Values

- Integrity at all levels.
- Compassion and service towards others.
- Teamwork that revolves around respectful and collegial relationships among physicians, employees, patients and volunteers.
- Ethical behavior.
- Excellence in our processes and outcomes.
- Professionalism.



About CMH



- Service close to 85,000 patients-residents & families in three county area
- Poverty rates/ unemployment 13.9%
- Majority Medicare/Medicaid patients
- Surgical Volume: 5,800/yr



CMH Work System Design

WORK SYSTEM: COMMUNITY IS IN OUR NAME, AND AT THE HEART OF WHAT WE DO!

6.1.a (1)

JULY 7, 2009

SYSTEM TRIAD

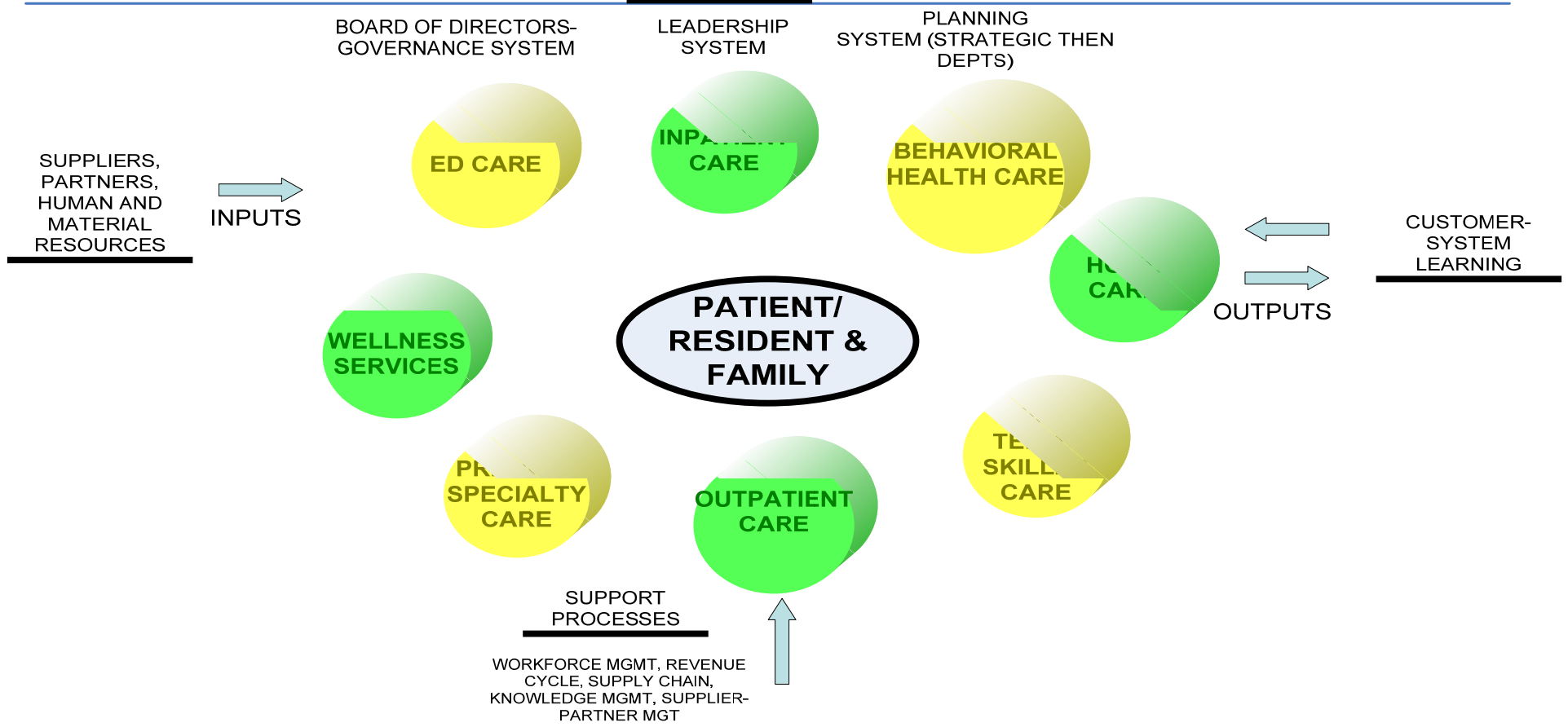


Figure 6.1.a.(1) Work System Design & Innovation



Core Competencies & Key Work Processes

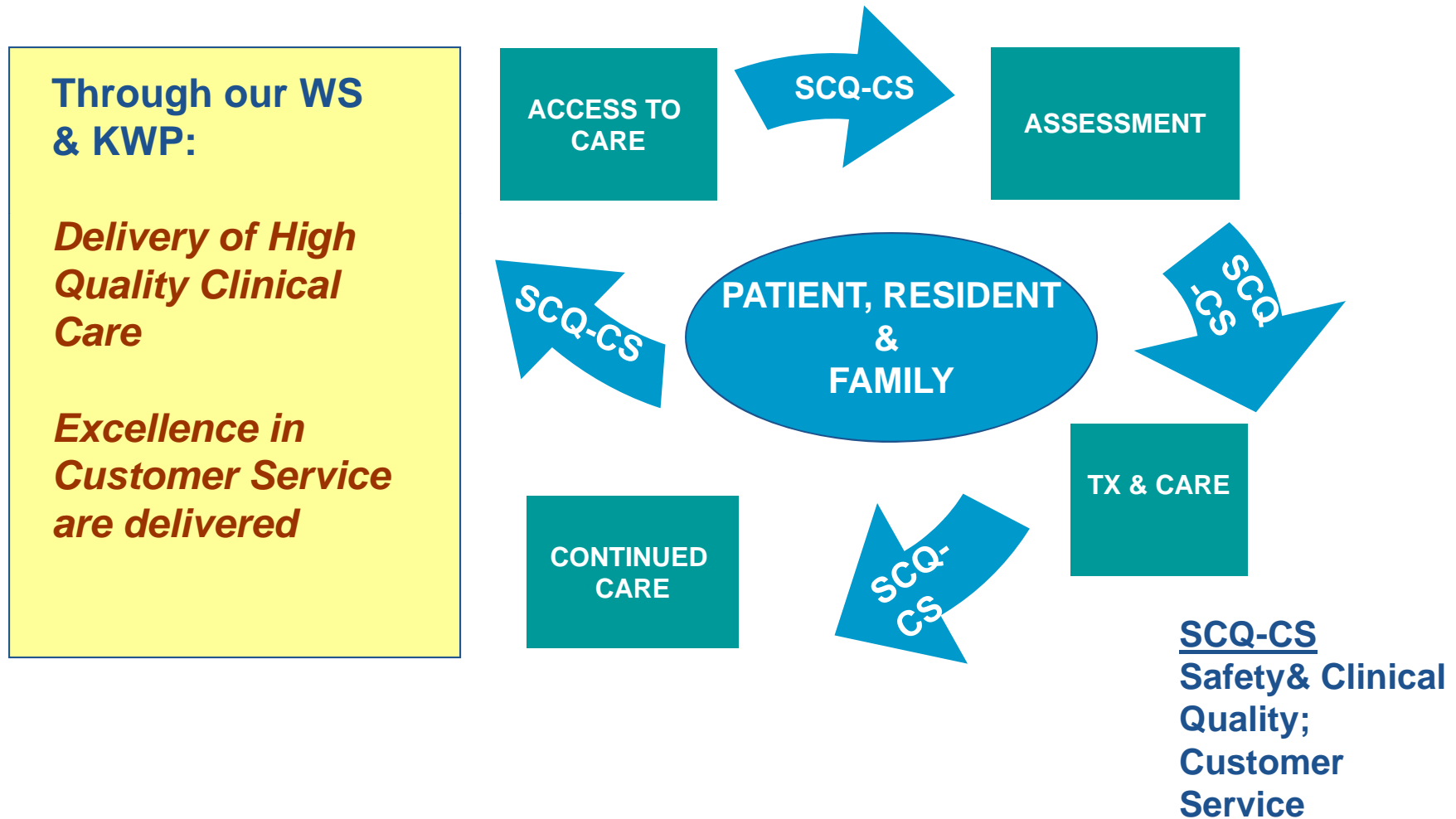


Figure 6.1.a (2) Work System & Key Work Processes Relate to Core Competencies



CMH Key Work & Requirements

Figure 6.2.b 1 Key Work Processes & Key Work Requirements

Key Work Processes	Key Work Requirements
Access to Care	Safe Care Effective Care Efficient Care Timely Care Equitable Care Patient Centered Care
Assessment	
Treatment & Care	
Continued Care	



Critical-Success: Pillars

Strategic planning, action plans:

- Quality
- Finance
- People
- Growth
- Governance



Tool Box PI Model

Ref: 4.1 How do you measure, analyze and improve?





Measurement, Analysis, Knowledge Management

- 4.1.a (1) How do you use data and information to support organizational decision making and innovation? **GAP**
 - Information not always timely
 - Unit scorecards not used across all Departments
 - Availability of information difficult across all entities off campus
 - Making decisions based on data very silo based, integrated at the Senior level



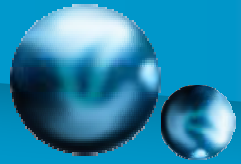
Data Management-Opportunities

- Collection/Transfer of organizational knowledge
 - Departments were not equally informed
 - Staff not connected to Strategic Objectives
 - Collection/transfer of workforce knowledge slow, incomplete



Measurement, Analysis, Knowledge Management

- 4.1.a (1) How do you use data and information to support organizational decision making and innovation? **GAP**
 - How we deploy to work groups sharing information
 - Bound by meetings, email, delegation
 - Provide access to data based on Strategic Action Plans to all levels of employees
 - Only shared at staff meetings, not all staff have email.



Measurement, Analysis, Knowledge Management

- 4.2.a.(2) How do you make needed data and information available? How do you make them accessible to your workforce, partners, collaborators. **GAP**
 - Information clustering of key performance indicators
 - Communication of relevant information to appropriate staff members



Challenge-Innovation

- Data management, tracking, reviewing
- Best in class methodology
- Associate Pillar concept with analysis/results
- Decrease cost
- Increase reliability
- ASP model
- Structure, reports constructed Nov 2009-Jan 2010



ScoreBoard-Scorecards

- Features
 - Cascade data by Organization, Pillar
 - Reflect, track measures
 - Viewing access to all Departments
 - Over 5,000 indicators
- Progression
 - Added reports by pillar
 - Linkage between reports to reduce resource requirements
 - Added organization by Senior Leader Group



System Implementation: Feb-March 2010

- Pilot Professional Services Organization
 - Radiology
 - HR, Education, Wellness
 - Q/PI
 - Lab
 - Pharmacy
 - HIM
 - Specialty Clinics
 - Acute/Out-Pt Rehabilitation



Steps

- Developed Scorecards-Pillars
 - Focused on MBOs developed from Strategic Objectives
 - Performance tied to outcomes
 - Example Rehab-Documentation
 - Finance-against budget
 - Problem prone indicators
- Q/PI developed in system
 - Made import sheets per Dept for 12 months



CMH Performance Excellence View

System View

<https://cmh-sh.spiderstrategies.com/cms/spring/authenticate>



Efficiencies

- Departments can access 24/7
- Quality data email to send all data
- Link KPIs from 1 area to another
- Laptop/projector at every meeting
- Time-0.5 FTE
- Flexibility of viewing/presenting information
- 1 import sheet/dept for data entry



Cycles of Learning

- Working on Department specific KPIs for Pillars
- Scorecard Workshops for all Directors
 - Reinforce on how to select, express, use benchmarking
 - Use systems view, connect to Strategy for employees
 - Use financial data to manage expenses
 - Common view



Cycles of Learning

- Departments are tracking KPIs that cascade to Strategic Objectives
 - Goals, Target
 - Process Measures
 - Stretch goals
 - Add, archive over time
- Employees, partners, collaborators view access



Discussion & Questions



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