



Strategic, Action, and Operating Plan

April 15-16, 2016

Formally adopted by the Heart of America Medical Center Board

April 16, 2016

EXECUTIVE SUMMARY

On Friday, April 15th and Saturday, April 16th, 2016 the Governing Board of HAMC convened a Governing Board meeting and strategic planning retreat held at the Cobblestone Motel in Bottineau, ND. The participants included the HAMC Board of Directors, HAMC Medical Staff, HAMC Administrative Council, and selected members of the community at large.

During the two day retreat, we were able to determine where we are as an organization, where we would like see ourselves in the near future, and explored some opportunities to pursue to achieve our vision. By the end of the meeting we had determined the highest priority opportunities to pursue as well as identifying key strengths upon which to build, weaknesses to be addressed, and threats to be guarded against. The Board unanimously approved the recommendations and direction determined during the retreat.

The following list represents the top 3 priorities in each category:

Strengths

1. 340b Pharmacy program
2. Staff and Providers
3. Telemedicine Services

Weaknesses

1. First Year Turnover
2. Staff Shortages and Reliance on Contract Labor
3. Physician/Provider Recruitment

Threats

1. Decreasing Reimbursement from Medicare
2. Nursing Shortage
3. Bundled Payments

Opportunities

1. Chemotherapy Services
2. 340b Program Expansion
3. Certified Veteran's Care Provider

STRATEGIC PLAN

(Governance Oversight)

Action Item	Specific Description	Measure	Timeline	Accountability
Chemotherapy Services	Develop an infusion suite for the delivery of chemotherapy medications		March 31, 2017	Julie, Erik, Amanda, Colt
	Develop a chemo preparation site		March 31, 2017	Erik, Colt, Amanda
	Develop marketing plan		March 31, 2017	Patrick, Dani, Erik, Colt, Julie
	Determine scope of services and schedules		March 31, 2017	Erik, Julie, Colt, Patrick
	Staff training (pharmacy)			Erik
	Staff training (nursing)			Julie
Expand 340b Program	Contracts		March 31, 2017	Erik, Colt
	Win-Win		March 31, 2017	Erik, Colt
Certified VA provider	Application process for LTC		November 11, 2016	Jeremiah, Teresa
	Application process for RHC		November 11, 2016	Jeremiah
	Application process for Inpatient		November 11, 2016	Jeremiah, Julie

COMMUNITY HEALTH NEEDS ASSESSMENT PLAN

Action Item	Specific Description	Measure	Timeline	Accountability
Chemotherapy Services	Develop an infusion suite for the delivery of chemotherapy services		March 31, 2017	Julie, Erik, Amanda, Colt
Psychiatry Services	Obtain psychiatry services for the		March 31, 2017	Erik, Colt, Amanda

	community via onsite and/or telemedicine services			
Dunseith Radiology	Re-establish x-ray service by training operator		March 31, 2017	Patrick, Dani, Erik, Colt, Julie
Community Care Expansion	Provide improved financial assistance to community members in need		March 31, 2017	Erik, Julie, Colt, Patrick
Hospice Program	Expand services to surrounding communities		March 31, 2017	Erik, Dustin
Diabetes Education	Capture more of diabetic population and provide outpatient education services		March 31, 2017	Julie
Internal Medicine Services	Recruit Internal Medicine MD for hospitalist role		March 31, 2017	Patrick
Shortage of Providers	Increase recruitment activities to recruit mid-level and physicians		March 31, 2017	Patrick
ER Abuse	Address complaints of inadequate care by recruiting a solid cadre of providers for ER coverage		March 31, 2017	Patrick

OPERATIONAL PLAN

(Management Accountability)

Action Item	Specific Description	Measure	Timeline	Accountability
Reduce 1st Year Turnover by 25%	Identify departments with highest % of 1 st year turnover	Determine the actual rate for all departments	June 30, 2016	David
	Review exit interviews for patterns	Categorize based on primary	June 30, 2016	Patrick

		separation reasons		
	Eliminate barriers to longevity	Analyze reasons for staff turnover and take action	July 31, 2016	Patrick
	Evaluate effectiveness of orientation program	Analyze stated goals of orientation and modify to achieve optimal results	July 31, 2016	David
Eliminate Reliance on Contract Labor by 50% of actual cost	Identify departments with highest usage rate of contract labor	Analyze new data to ascertain actual turnover	June 30, 2016	Patrick, Colt
	Develop strategies to limit contract labor		June 30, 2016	Julie, David, Teresa, Marilyn
	Examine retention strategies		June 30, 2016	
	Expand Daycare services	Build, buy, or lease additional space	August 30, 2016	Amanda, Scott, Patrick
Develop provider recruitment and retention strategy	Simplify and improve current contract language to assure equity and marketplace competitiveness	Standard contract template in place for each provider	August 1, 2016	Patrick, Jeremiah, David, Amanda
	Conduct and review exit interviews	Examine for patterns	June 30, 2016	Patrick
	Correct issues identified in exit interviews		July 31, 2016	Patrick
	Further develop provider partnerships in		June 30, 2016	Patrick, Jeremiah,

	governance and management decision processes			Amanda, Colt, Julie, Teresa, Marilyn
	Evaluate benefits program		June 30, 2016	David

The following section contains all of the information we were able to capture on the flip charts. The number in parentheses represents the vote tally for each item.

STRENGTHS:

1. Community
 - a. Community support (11)
 - b. Longevity (1)
 - c. Stability (1)
 - d. Supportive
 - e. Unique
 - f. Sense of pride
 - g. Need
 - h. Engaged Board (1)
 - i. Organizational management
2. My Health
3. Progressive and nimble (1)
 - a. ACO (6)
 - b. 340B (21)
 - c. EPIC
 - d. Meaningful Use
 - e. PQRS
 - f. Care Everywhere
4. Communication access
5. Independence (4)
6. Excellent Staff – ALL (9)
 - a. PT (3)
 - b. Singing nursing staff
 - c. Creativity
 - d. Midwest work ethic
7. Physical plant (2)
8. Foundation (3)
 - a. Auxiliary
 - b. Volunteers
9. Great location- Centrally located on planet (4)
10. Personnel (6)
 - a. Creative staff
 - b. Passionate (1)

- c. Longevity
 - d. Commitment
 - e. Responsibility
 - f. Relationships
 - g. Kindness
11. Services (8)
- a. PT (2)
 - i. Dry needling
 - b. Pharm/Retail Pharm
 - c. Hospice (3)
 - d. OT
 - i. Lymphedema
 - e. MRI
 - f. Surgery
 - g. Ophthalmology/Podiatry
 - h. Acute-Swing-Basic Care-Assisted Living-Hospice-Homecare
 - i. MyHealth
 - j. Treatment Room
 - k. EMS
 - i. Billing
 - ii. Education/Intercepts
 - l. Cardiac/Pulmonary Rehab (1)
 - m. Telemedicine (7)
 - n. Stress test
 - o. Day care (2)
 - p. Speech therapy
 - q. Diabetes Ed
 - r. DME
 - s. ER-provider on site
 - t. RT
12. Quality Providers (9)
- a. Large number of providers
 - b. General surgeon
 - c. Women's health
 - d. Stress test
 - e. Prenatal
 - f. Opioid rehab
 - g. Jail contract
 - h. Balanced and integrate
 - i. Personable/caring
 - j. Access/availability
 - k. Collective years of experience (1)
 - l. Award winning (1)
 - m. Satellite clinics

i. Rugby/Maddock/Dunseith

WEAKNESSES:

1. Financial instability (6)
2. Care Center Contract labor (1)
3. Staff Shortage (9)
4. Level of expertise
 - a. Education requirements
5. Employee Turnover (12)
6. Affordable housing (2)
7. Child care (4)
8. Market place infiltration
9. Physician Recruitment (6)
10. Career Ladder
 - a. Encourage self-improvement
11. Provider appreciation
12. Stuck in the past
13. Motivation
14. Bad Debt (2)
 - a. Community backlash upon collection
 - b. Lack of accountability
15. Communication (6)
16. Board of Directors-Election outdated; changes needed
17. Mental Health (5)
18. Leverage strengths of community businesses
19. ER Entrance (6)
20. Physical plant (8)
 - a. Lack of privacy
 - b. No canopy @ ER entrance

THREATS:

1. CAH Revenue from Medicare (15)
 - a. Volume vs value
2. Get more patients (5)
3. OIG Swing bed (1)
4. Un/Under insured
 - a. Poor insurance communication (6)
5. High salaries
6. EPIC (cream of crap)

7. Nursing shortage (13)
8. Lack of cross training (9)
 - a. Too particular of shift work (1)
 - b. Entitlement (3)
9. Exclusion from Network
10. Bundled payments (14)
 - a. Patient becomes self-pay (Swing bed)
11. Insurance picking what to pay for (7)

OPPORTUNITIES:

1. PT in Dunseith (2)
 - a. PIC Lines
2. New provider services-Botox (6)
3. Case Management (5)
 - a. EPIC-DC vs readmit
 - b. Informatics
4. Recruitment/Retention (1)
 - a. Vesting Retirement (9)
 - b. Self-education/improvement (3)
 - c. Housing (8)
 - d. Wage adjustment survey (able to use)
5. Community Services
 - a. Daycare (8)
 - b. Weight management program
 - c. PT expansion (1)
 - d. Career promotion in school systems (outlying communities also) (2)
 - e. 340B (12)
 - f. VA hospital (11)
 - g. Chemo (19)
6. Telemedicine (8)
7. Community reputation
8. Partnership w/ larger organization (1)
9. Centralize continuing education (3)