

MANAGEMENT ACTION PLAN for the 2019-FY2021 Strategic Plan

Focus Area	Action Item
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Priority #1 - Drive Improvement in Operational Performance of the Hospital

Business Office	Establish weekly call
Business Office	Develop 3 month goal and strategy with key metrics
Business Office	Investigate ability to redefine FTEs as Coders
Business Office	Share staffing plan with the board
Business Office	
Business Office	
Business Office	

Recruitment/ Retention	Develop recruiting plan
Recruitment/ Retention	Update recruiting plan with possible incentive structure
Recruitment/ Retention	Hire and onboard new HR Director
Recruitment/ Retention	Standardize promissory note for all employees
Recruitment/ Retention	Set date to conduct employee satisfaction survey
Recruitment/ Retention	Develop plan for retention and morale improvement from survey results
Recruitment/ Retention	
Recruitment/ Retention	
Recruitment/ Retention	

Quality Improvement	Identify outcomes to track and enhance perception
Quality Improvement	Identify outcomes to track and decrease outmigration
Quality Improvement	Identify outcomes to track and mitigate risk
Quality Improvement	Perform an HCMC-wide service line analysis
Quality Improvement	The Leadership Team will perform "peer visits" at simliar hospitals
Quality Improvement	
Quality Improvement	Create a Patient Advisory Committee that will meet quarterly

Hospital Perception	Communicate implemented improvements
Hospital Perception	Publish customer satisfaction and outcome scores
Hospital Perception	Publish/highlight received awards (internal and external)
Hospital Perception	
Hospital Perception	
Hospital Perception	

Risk Mitigation	Perform Coverys Risk Assessment (RA)
Risk Mitigation	Implement recommendations from RA as appropriate
Risk Mitigation	Implement improved Event Reporting System
Risk Mitigation	Revise/update job descriptions
Risk Mitigation	Implement consistent OIG monitoring process
Risk Mitigation	Perform a security risk assessment (IT, EOP, WVP, etc.)

Cost Containment	Report current successes for cost containment
Cost Containment	Identify quality and process improvements for additional savings
Cost Containment	Implement Vantage Productivity software
Cost Containment	
Cost Containment	

Outmigration	Report findings from ED Transfer Analysis (Drs. Marshall & Yong) to staff and external stakeholders
Outmigration	Update key pieces of capital equipment (mammo, etc.)
Outmigration	Develop plan to market continuity of care for out-of-market procedures
Outmigration	Identify community partners for post-acute care (swing bed)
Outmigration	Develop plan to understand care transitions and follow-up care ("Close the loop")
Outmigration	Develop plan to incentivize employees to receive their care at HCMC
Outmigration	Identify/research new revenue producing services
Outmigration	

External Partners	Convene meeting with community members and EMS related to patient transfers
External Partners	Meet with local FQHC's to discuss needs/partnership
External Partners	
External Partners	Set aside time with the board to identify corporate partners
External Partners	Develop a Holy Cross Medical Center Foundation
External Partners	
External Partners	

Facility Needs	Complete facility master plan
Facility Needs	Evaluate approved capital list
Facility Needs	Identify projects to add to facility plan and/or capital list
Facility Needs	Seek input from medical staff to identify, evaluate, and prioritize facility/capital needs
Facility Needs	Develop interim facility repair needs/implementation list
Facility Needs	
Facility Needs	
Facility Needs	
Facility Needs	

Priority #2 - Develop Partnership Model to Gain Approval for Increased Healthcare T

Partner Identification	Prioritize needed community services from CHNA Document
Partner Identification	Meet with board to identify partnership strategy
Partner Identification	Meet with local groups to develop partnership implementation strategy

Partner Identification	Work with local groups to develop mill levy campaign
Partner Identification	
Partner Identification	
Partner Identification	

Board Strategy	Facilitate board strategy to approach county leaders
Board Strategy	Approach county with developed plan
Board Strategy	
Board Strategy	
Board Strategy	

Priority #3 - Drive Improvement in Clinic Performance








Recruitment/ Retention	Finalize new Primary Care and Pediatric delivery model
Recruitment/ Retention	Finalize new OB delivery model
Recruitment/ Retention	
Recruitment/ Retention	
Recruitment/ Retention	
Recruitment/ Retention	










Compensation/Contracting	Identify a unified approach to incentivize productivity and performance
Compensation/Contracting	Implement incentive structure in existing and new contracts
Compensation/Contracting	
Compensation/Contracting	
Compensation/Contracting	
Compensation/Contracting	







Clinic Practice Model	Enhance med staff operations council
Clinic Practice Model	Identify enhancements by service line (See notes)
Clinic Practice Model	Identify opportunities to enhance access for patients
Clinic Practice Model	Develop prioritized action plan for service line enhancements
Clinic Practice Model	Verify performance of clinic phone/scheduling systems
Clinic Practice Model	Verify the accurate recording/coding of charges, submission of bills, and collection/posting of payments
Clinic Practice Model	Review and update purchasing contracts/processes







Embrace Physician Leadership	Develop formal process for medical directors and service line managers to operate in partnership
Embrace Physician Leadership	Develop communication mechanism for med staff and admin to share concerns across the organization
Embrace Physician Leadership	Identify workflow efficiencies
Embrace Physician Leadership	EMR Optimization - Notes
Embrace Physician Leadership	EMR Optimization - Thrive UX upgrade
Embrace Physician Leadership	
Embrace Physician Leadership	
Embrace Physician Leadership	









Secondary Accountability	Key Metrics and Targets	Completion	
		100%	
CEO		0%	
Physician Director		0%	
CEO		0%	
		0%	
		0%	
		0%	

		100%	
SLT		0%	
		0%	
SLT		0%	
SLT		0%	
SLT		0%	
		0%	
		0%	
		0%	

SLT		0%	
Quality VP		0%	
Quality VP		0%	
CEO		0%	
SLT		0%	
CNO		0%	

Quality VP		0%	
Quality VP		0%	
Quality VP		0%	
		0%	
		0%	
		0%	

SLT		0%	
SLT		0%	
IT Director		0%	
SLT		0%	
		0%	
IT Director		0%	

CEO		0%	■
CEO		0%	■
		0%	■
		0%	■
		0%	■

		0%	■
CEO		0%	■
Marketing Coord		0%	■
		0%	■
		0%	■
		0%	■
CEO		0%	■
		0%	■

CNO		0%	■
CEO		0%	■
		0%	■
Board		0%	■
Board		0%	■
		0%	■
		0%	■

CEO		0%	■
CEO		0%	■
CFO		0%	■
Ancillary VP		0%	■
Plant Ops Director		0%	■
		0%	■
		0%	■
		0%	■
		0%	■

QHR		0%	■
Board		0%	■
SLT		0%	■

Board		0%	■
		0%	■
		0%	■
		0%	■

Board		0%	■
CEO		0%	■
		0%	■
		0%	■
		0%	■

CEO		0%	■
CEO		0%	■
		0%	■
		0%	■
		0%	■
		0%	■

Physician Director		0%	■
Physician Director		0%	■
		0%	■
		0%	■
		0%	■

Dr. Dougherty		0%	■
SLT		0%	■
IT Director			■
SLT		0%	■
TPS Coordinator		0%	■
Compliance		0%	■
		0%	■

CNO & Ancillary VP		0%	■
CNO & Ancillary VP		0%	■
		0%	■
Physician Director		0%	■
CNO		0%	■
		0%	■
		0%	■
		0%	■



Notes

We have an incentive structure built. New HR Director may have enhancements for us

Each member of the leadership team will go to visit their counterpart at one of several approved hospitals. They will spend one day touring the other facility and will come back and report on:

1. What they do better than us
2. What changes they are going to make
3. What we do better than them

Primary Care, OB/GYN, Pediatric, Urology, General Surgery, Cosmetic/Reconstructive Surgery, Cardiology, Anesthesia,

