

UVA Health System (MC, SOM, UPG) 2014 Clinical Goals

version 07/22/2014

1. Advance Our Stature		Metric	Goal	Results
a) Ambulatory and MD Network Development				
i	Open and fully operationalize the Zion Crossroads facility	1. Propose to Triad use for reserved space and develop business plan 2. Staff all available session in current space 3. Propose revisions to current offering based on: (a) volume trend (b) inpatient market share (c) new patients (d) DX utilization (e) patient satisfaction	Accomplish 3 tasks by end of FY14	Completed
ii	Open and fully operationalize the Battle Building	1. Grand Opening Event in June 2. First Patient Seen in Clinic in June	Accomplish 2 tasks by end of FY14	Completed
iii	Continue/Fully integrate the HOPE Group into the UVA Cancer Center Operations	1. Define the role of "generalist" oncologist in an academic medical practice (ECCCC building). Metric: Provide a definition of this role; ultimately, this will help determine what integration means. 2. Develop guidelines to define which patients should be seen at ECCCC by an academic multi-disciplinary team vs. in a community oncology setting. Metric: Begin building out definitions of patient/disease guideline profiles. 3. Develop a system to track referrals from UVA physicians to ensure patients seen in the community are seen by HOPE oncologist. Metric: Develop a tracking system. 4. Develop clinical trial participation expectation for HOPE practitioners/patients. Metric: Develop set of expectations/targets for clinical trial accrual. 5. Develop administrative process for HOPE administrator to report to Jody Reyes. Metric: Put process in place. 6. Develop quality program at HOPE sites in alignment with UVA Cancer Center quality program. Metric: HOPE to report out quality metrics at monthly quality meeting.	Accomplish 6 tasks by end of FY14	Results Pending as of July 2014
iv	Strengthen patient referrals by enhancing relationships with UVA network physicians and other community providers	1. Patient referrals as documented in patient registration (quarterly reporting) 2. Physician relationship strength based on Crimson Market Advantage (annual reporting)	Expand Market Share for Culpeper Regional Hospital by 2%, for UVA Primary Service Area East/West by 2%; and for UVA Secondary Service Area North by 1%	Results Pending as of July 2014
v	Integrate Dialysis Network with Centra Health	Execute Agreement with Centra	Accomplish 1 task by end of FY14	Completed
vi	Obtain approvals for 29 North Specialized Care Center	1. Propose concept to Outreach Strategy Group and obtain approval from Triad 2. Develop business plan for approval after concept approval 3. Develop project team and timeline based on approval	Accomplish 3 tasks by end of FY14	Completed
vii	Increase number of faculty and staff in primary care	# Faculty & Staff Employed through SOM, UPG	Undetermined, as available	Completed
b) Advance Clinical Programs				
i	Fully operationalize and meet clinical milestones for Centers of Excellence in Cardiovascular, Neurosciences, and Cancer	Achieve Operational & Financial goals per each MCOB business plan	various	Goals Not Met
ii	Conduct ongoing assessment readiness/demand for Programs of Distinction	Develop COE/POD Readiness & Opportunity Metric Report	Finalize Report by end of FY14, regular reporting at minimum semi-annually	Completed

Exhibit OO3.a

	<i>iii</i>	Improve performance in metrics that would result in improved <i>US News</i> rankings for Clinical Programs	Overall: 1. 5 Top Ranked Adult Specialites (OR Survival Score Index, Process of Care Indicators) REPUTATION: 1. Ensure a minimum of 5 SOM faculty are nominated to the IOM 2. Organize a small group of faculty to evaluate the current factors that have limited the national and international recognition of SOM faculty and provide a report for the Dean. 3. Encourage faculty who are currently members of high profile academies and honor societies to nominate SOM faculty members whenever possible. 4. Ensure all election of SOM to high profile positions in national medical or scientific societies are well publicized. 5. Generate a list of SOM faculty, who can be developed as strong candidates for election to honor societies and for national awards.	Accomplish 6 tasks by end of FY14	Goals Not Met
	<i>iv</i>	Advance and expand fundraising efforts to support the Centers of Excellence	1. Neuro, Cardiology, and Cancer fundraising case development. 2. Fundraising progress on COEs (all sources, including bequests, but excluding private grants).	1. Performance targets: (a) Complete development of fundraising cases afor Cardiovascular and Neurosciences Centers of Excellence by June 30, 2014 (b) Develop outline for Cancer COE by June 30th with final case to be completed by first quarter of FY15. 2. Performance Targets: (a) Raise \$1.5M for Cancer COE (b) Raise \$2.1M for Cardiovascular COE. (c) Raise \$2.0M for Neurosciences COE.	Results Pending as of July 2014
c) Clinical Research Development					
	<i>i</i>	Fund/Support 5 grant proposals during second round of Clinical Research Grant Funding	Select and Fund 5 New Grant Proposals	5 Grants	Completed
	<i>ii</i>	Emphasize support of interdisciplinary research and Population Health models	Develop Academic Strategy	TBD	Results Pending as of July 2014
	<i>iii</i>	Develop program for addressing the clinical and research data needs of the Health System	Develop Academic Strategy	TBD	Results Pending as of July 2014
	<i>iv</i>	Expand funding identified for Clinical Research infrastructure to achieve “scalable/ adaptable support” for Clinical Research and demonstrate meaningful infrastructure capabilities leading to additional increased external research funding	Develop Academic Strategy	TBD	Results Pending as of July 2014
2. Strengthen Alignment & Build Productive Partnerships					
a) Collaborative Planning and Management					
	<i>i</i>	Develop and implement aligned operational '14 goals for the MC, SOM, and UPG	Develop Health System list of operational goals	Accomplish 1 task by end of FY14	Completed
	<i>ii</i>	Develop a joint strategic planning and budgeting process that encourages alignment between the MC, SOM and UPG	Develop Health System list of key assumptions for FY15	Accomplish 1 task by end of FY14	Completed

Exhibit OO3.a

iii	Implement collaborative Employee Engagement Survey for the MC, SOM, SON, UPG, HSL, focusing on a 5% improvement in engagement	Employee Engagement Index	3.9	Completed
iv	Improve the efficiency and usability of the Electronic Health Record	1. Fund Physician Epic Experts 2. Hire Chief Medical Information Officer	Accomplish 2 tasks by end of FY14	Completed
v	Support the start-up and functioning of the Executive Vice President for Health Affairs	Execute Funding Agreement	Accomplish 1 task by end of FY14	Completed
b) Achieve Financial Alignment of the MC, SOM, and UPG				
i	Finalize the MajestaCare Corporate Agreement	Execute Agreement	Accomplish 1 task by end of FY14	Goal Not Met
ii	Finalize the Funds Flow Agreement between the MC, SOM, and UPG	Finalize Funds Flow Agreement for FY14	Accomplish 1 task by end of FY14	Completed
iii	Fully fund [\$200M – 390M] the Strategic Implementation Pool	Fund Strategic Implementation Pool	\$200M	Results Pending as of July 2014
iv	Begin to explore funds flow principles that can be used if there are changes in the reimbursement structure from government or third party payors	TBD	TBD	Results Pending as of July 2014
c) Enhance the Alignment of the UVA Clinical Enterprise				
i	Work collaboratively across entities to develop a new Care Model and financial structure that will function within the Population Health conceptual framework	1. Apply & Establish Medicare Shared Savings Program (MSSP) 2. Operationalize MSSP agreement with CMS	Accomplish 2 task by end of FY14	Completed
ii	Reinstitute a clinical departments' incentive program	Execute CMI Incentive Program	Accomplish 1 task by end of FY14	Completed
iii	Develop system support to improve scheduling in order to achieve 75% of requests for Primary Care initial visits within 3 days (for 3 rd available appointment) and specialty care initial visits within 7 days for (for 3 rd available appointment)	1. Primary Care 3rd Available Appointment within 3 days 2. Specialty Care 3rd Available Appointment within 7 days	1. 75% 2. 75%	Goal Not Met
d) Develop Mutually Beneficial Partnerships to Support the Clinical and Academic Enterprise				
i	Operationalize MajestaCare initiative to include necessary ownership and oversight	Execute Agreement with MajestaCare	Accomplish 1 task by end of FY14	Goal Not Met
ii	Continue Strategic Dialogue with potential Tier I and Tier II partners: Fauquier, Riverside, Carilion, Centra, Bon Secours, and Mary Washington	Continue Dialogue with partners		Completed
iii	Expand Market Share for Culpeper Regional Hospital by 2%, for UVA Primary Service Area East/West by 2%; and for UVA Secondary Service Area North by 1%.	1. Market share reporting: (a) The baseline market share will be FY12 as compared to FY13 (b) FY14 market share will be available in January 2015 2. Culpeper Regional Hospital market share will be based on their primary and secondary service areas which include Culpeper, Madison, and Orange counties 2. Physician relationship strength based on Crimson Market Advantage (annual reporting)	Expand Market Share for Culpeper Regional Hospital by 2%, for UVA Primary Service Area East/West by 2%; and for UVA Secondary Service Area North by 1%	Results Pending as of July 2014
iv	Open and fully operationalize the PACE/Charlottesville facility	First Patient Seen at facility	Accomplish 1 task by end of FY14	Completed
v	Continue integration of community practices into the Health System	# Acquisitions Executed	Undetermined, as available	Completed

Exhibit 003.a

3. Together Achieve Operational Excellence in All that We Do		Metric	Goal	
a) Lead the Market in Quality, Service, Safety, and Access				
i	Develop and implement a plan to collect and report timely, reliable clinical data for ongoing quality improvement	Develop standardized reporting of Q17 priorities	Establish regular reporting mechanism	Completed
ii	Align the Medical Center, SOM, and UPG in the support of quality improvement initiatives	Develop Health System Quality and Patient Safety Plan	Approval of Plan by MCOB Quality Subcommittee	Completed
iii	Achieve or exceed UHC Indexed Mortality of <0.88	UHC Indexed Mortality	<0.88	Goal Not Met
iv	Achieve UHC AHRQ Patient Safety Quality Indicator Composite of <0.67	AHRQ Patient Safety Quality Indicator Composite	<0.67	Goal Not Met
v	Exceed Performance Targets for Q17 Quality Initiative including "Chasing Zero" targets	1. Overall Mortality Index 1.1 Cardiac Surgery Mortality 1.2 Cariology Mortality 1.3 Sepsis Mortality 1.4 Death after surgery with serious treatable complications 1.5 Gastrointestinal Hemorrhage Mortality 2. Post Operative Hemorrhage (O:E) 3. Hospital Based Inpatient Psychiatric Services 4. Pneumonia Bundle 5. Heart Failure Bundle 6. Surgical Care Improvement Project Bundle 7. Pneumococcal Immunization Rate 7.1 Pneumococcal Immunization Age 65+ 7.2 Pneumococcal Immunization High Risk 8. Influenza Immunization Rate 9. CAUTI 10. CLABSI 11. VTE/PE Postoperative 12. Stage III/IV Pressure Ulcers (NSI) 13. Patient Falls with Injury (NSI) 14. Glycemic Management/Control (Adult ICU/PO Cardiac Surgery) 15. Hospital-wide Readmissions 15.1 Heart Failure 30 day all cause readmissions 16. Patient Satisfaction 16.1 HHCAHPS Overall 9&10s 16.2 Roll-up Press Ganey 17. Pain Management - Patient Satisfaction	1. 0.79 1.1 0.63 1.2 0.85 1.3 0.91 1.4 0.94 1.5 0.55 2. 0.54 3. 77.1% 4. 96.9% 5. 97.6% 6. 97.6% 7. 91.4% 7.1 95.9% 7.2 84.1% 8. 93.9% 9. 0 10. 0 11. 0.77 12. 1 13. 0 14. 97.2% 15. 13.5% 15.1 15.5% 16. 75th pctile 16.1 50th pctile 16.2 50th pctile 17. 50th pctile	Various Results
b) Be the Network of Choice for UVA Employees				
i	Develop a Long-Range Plan for enhancing the UVA Clinical Enterprise role in the University Benefits Plan as it addresses requirements of the Accountable Care Act			Results Pending as of July 2014

Exhibit OO3.a

	ii	Achieve 43% of University employees and families receiving care with primary care or specialists within the Health System	% UVA Employees/Familys Receiving Care at UVAHS	43%	Goal Not Met
	iii	Open UVA Employee Pharmacy	1. Open Bookstore location 2. Open Rx Pickup Window in West Complex	Accomplish 2 tasks by end of FY14	Completed
	iv	Achieve HCAHPS Inpatient Hospitals overall rating of 9&10's of ≥75%	HCAHPS Inpatient Overall Rating 9&10s	≥75%	Goal Not Met
	v	Achieve Press Ganey Patient Satisfaction overall score of ≥90	Press Ganey Patient Satisfaction Overall Score	≥90	Goal Not Met
	vi	Develop a plan that attracts UVA employees to stay within the system for their health care	Develop Program Plan	Accomplish 1 task by end of FY14	Completed
c) Strengthen Care Coordination and Patient Support					
	i	Fully implement the Patient Progression Program and achieve relevant metrics	1. LOS 2. Bed Turnaround Time 3. ED Door to MD Seen 4. ED LOS to Admission 5. ED LOS to Discharge 6. IP OR Utilization 7. IP OR First Case On Time Start 8. OPSC Utilization 9. OPSC First Case On Time Start	1. 5.5 days 2. 0:45 hrs 3. 0:40 hrs 4. 6:40 hrs 5. 3:45 hrs 6. 85% 7. 80% 8. 85% 9. 80%	Goal Not Met
	ii	Increase ADC for the Translational Care Hospital to 30 patients	Average Daily Census	30 patients	Goal Not Met
	iii	Expand clinical footprint at Fontaine Park	Complete Relocation Plan	Accomplish 1 task by end of FY14	Completed
	iv	Improve access and process for inter-hospital transfer of patients	Execute Contract with Direct Call	Accomplish 1 task by end of FY14	Completed
d) Create a Culture of Physician and Employee Engagement					
	i	Utilize findings from new Employee Engagement Survey to develop unified plans to increase physician, housestaff, and employee engagement	Execute Gallop Employee Engagement Programs	Complete 2 stage Employee Education Sessions	Completed
	ii	Expand and enhance Attending Physician supervision of housestaff in a manner that meets the requirements of the ACGME's new Milestones Initiative	ACGME Milestones Initiative Survey Questions: Sufficient Supervision Appropriate Level of Supervision Sufficient Instruction	≥ National Mean for each Specialty	Results Pending as of July 2014
	iii	Establish performance metrics for all of our health care professionals in responding to referring physicians, monitoring performance, and providing feedback through the physician liaisons			Results Pending as of July 2014
4. Create and Utilize Resources Sufficient to Support the Tripartite Mission					
a) Drive expansion as necessary to fund the virtuous cycle					
	i	Develop an aligned clinical budget for the MC, SOM and UPG	Develop Budget for FY'15	Finalize Budget	Completed

Exhibit OO3.a

	<i>ii</i>	Achieve total clinical revenue (UPG and MC combined of \$1.56 B (ad, to 2011)	Total Clinical Revenue	\$1.56B	Results Pending as of July 2014
	<i>iii</i>	Develop joint Long-Range Financial Plan for the MC, SOM, and UPG	Develop LRP	Finalize LRP	Completed
	<i>iv</i>	Expand clinical patient care activity to an average of 55% by reducing unfunded effort by reallocating existing faculty time to clinical effort	Clinical Patient Care Activity	55%	Goal Not Met
	<i>v</i>	Meet target Operating and Capital Budgets	Operating Margin	Hit budget #s	Results Pending as of July 2014
	<i>vi</i>	Implement ICD-10 Coding Standards including Attendant Physician and staff education	1. Hire ICD-10 project manager 2. Perform multi-stage education/training program	Accomplish 2 tasks by end of FY14	Completed