

Strategic Planning discussions held at March CCHHS Committee Meetings
Summary of comments/requests

QPS: Quality and Reliability presentation

Patient experience should include involving the patient and families beyond asking them what they think; they should be engaged in the discussions (referenced advisory council). (Merryweather)

Front-line staff are usually the first ones to hear patient complaints and comments – they should always be involved in discussions about what is working and not working. (Junge)

When talking about quality, the Board also has to talk about personnel, particularly with regard to the language and culture of the patients. (Velasquez)

Some topics overlap into different areas – ensure that when that happens, all involved need to make sure to communicate their needs and expectations of each other, so they are not operating in silos. Examples: technology + Quality to support Quality efforts, Quality + Human Resources to implement cultural education efforts. (Hammock)

The administration should look externally at the challenges and successes of other health systems, to get the benefit of their experiences. (Marsh)

A recommendation was made to share this presentation in a mass communication throughout the organization. (Gugenheim)

Note: this information will be a part of the management development curriculum that has been previously discussed. Also, the administration will be using mass communication strategies and posters/reflections for the subject matter. (Shannon)

Important to think about the relationship between quality and financial performance; if it is then related to the Managed Care strategy, this should help to achieve a healthier population. The Board needs to think about how the actions it is taking today will carry through for generations to come. (Lerner)

A request was made for background information on Vizient that includes a list of competing organizations and a list of the health systems that compose its membership. (Richardson-Lowry)

ACC and Managed Care: Ambulatory Strategy presentation

In addition to presenting the *percentage* of visits by Hispanic patients, a request was made for information on the *number* of visits by Hispanic patients. (Velasquez)

There is a need to define “community,” as it relates to CCHHS and the strategic planning discussion. (Gugenheim)

There is a need for further information on how the population ages into Medicare and how that might impact services. (Hammock)

Payer mix – a request was made to reflect those who are dual eligible. (Lerner)

A recommendation was made to include another slide in the appendix of demographic information regarding overdose deaths, as this directly relates to the Behavioral Health Program. (Junge)

A suggestion was made to hire a demographer, due to the centrality of the data to the strategic plan and the complexity of it with the many stakeholders. (Hammock)

Note: Dr. Shannon indicated that staff should be able to handle any specific requests, as they are familiar with geocoding software and have access to the necessary tools.