

## UPCOMING REGIONAL ROUNDTABLES

### May 24–25, 2011

Ritz-Carlton Boston

#### **Preparing Your Hospital for Accountable Care**



### November 16–17, 2011

Ritz-Carlton Philadelphia

#### **Efficiency, Effectiveness and Alignment**



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## OUR MISSION

Our mission is to help lead the future of health in our communities by providing exceptional learning and relationship building opportunities for community hospital and system executives.

## Community Hospital 100 Executive Summary

Regional Roundtables provide an intimate forum for community hospital leaders to share best practices and strategies. The roundtables give equal treatment to the short- and long- term areas of focus for community hospitals and their executive management.

On March 16, 2011, ten community hospital executives, representing four states (LA, AL, MS, and SC), gathered in New Orleans. Their discussion revolved around the activities supporting areas of efficiency, effectiveness and relationships.

From these topics, three key action themes then emerged as being critical areas of CEO and executive management focus, specifically: **Manage, Engage, Align**. We've organized this Executive Summary to present the key factors discussed at the roundtable and how they apply to these themes.

## MANAGE

### Manage Uncertainty

- Reform is a moving target – but it is currently the law – and, at a minimum, the key concepts are going to stick.
- Strategic planning is now a key determinant of success
  - *There's no margin for bad decisions, particularly where capital is concerned.*
- Physicians are also unsure of their future – good time to engage them.

### Provide and Promote Leadership

- Executive leadership is more important than ever in establishing and maintaining a culture of quality and value.
  - *This is the main job of the CEO – to manage the culture of the hospital towards a completely aligned system of care.*
- Physician leadership must be cultivated and co-ownership established, regardless of economic relationship between the parties.

### Reduce Costs While Raising Quality

- Change how you work, not just faster but better. “Bend the cost curve” by better applying resources more effectively, perhaps even more resources earlier.
- A high efficiency environment is correlated with high effectiveness.
- High efficiency environments are attractive to physicians.
- Pay attention to satisfaction and HCAHPS.
  - *Consider a patient experience task force.*
- Pay attention to documentation.

### Determine What You Can and Can't Manage

- Do you really know how to manage physician practices?
- Could co-management work for you?
- Perhaps there is another wave of opportunity in outpatient services, which does fall in line with the hospital's competencies.

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## ENGAGE

### Communicate and Educate

- Transparent disclosure of information promotes a culture of trust.
- For policies and procedures, cover both the “why” and the “how” – give context.
- Follow-up: Check back relentlessly and don’t assume that the communication/ education is sticking.
  - *Example: Have staff take the HCAHPS test themselves so they know firsthand what is being measured and how.*

### Reach Out and Listen...

- To Patients
  - *Consider letting patients participate in your quality committees.*
- To Physicians
  - *Create two way communication paths between hospital and physicians*
  - *Develop closer ties to primary care as they are a key determinant of future success.*
  - *Allow select physicians to lead and advise the management of the hospital.*
- To Nurses
  - *Involve nurses in care coordination as the glue to a personal system of care.*
- To Staff
  - *Insist upon core values; culture has to be an all or nothing game.*
- To Post Acute
  - *Create stronger relationships with post acute settings to develop an aligned continuum of care.*
- To Your Communities
  - *Develop multiple methods of obtaining community input and feedback; there’s only so much you can learn from a survey.*

### Engage Physicians in EMR/CPOE

- The EMR is only as good as the usage.

## ALIGN

### Create Common Purpose as Critical for Alignment

- Don’t try to jump ahead – you can’t align without the proper culture in place.
- Don’t assume economics are the only mechanism.
  - *Clinical alignment is the ultimate objective and clinical alignment depends more on cultural alignment than economics.*
  - *As culture trumps strategy, culture trumps economics.*

### Build a Culture of Clinical Process Ownership

- Pursue a cultural definition where optimizing the overall quality and value of the care delivered comes naturally – *it cannot be dictated.*
- Regardless of the economic relationship with physicians, the strength of the bonds between the physicians and the community will have a major correlation with optimizing community health.

- Preparing for accountable care (ACOs) begins with understanding the partnerships and relationships required for the populations served.
  - *Create and strengthen the building blocks for ACOs*
    - Efficiencies, connectivity and relationships
  - *Develop your ACO strategy*
    - Do you lead or should you partner?
    - Start thinking now about how partnering might work and the alignments required to manage the population's health

**Be Realistic and the Economics**

- Consider the menu of alignment possibilities at your disposal.
  - *Multiple options work to align physicians economically. Employment as one option comes with many benefits as well as costs. Ask yourself:*
    - Do you need to employ?
    - Can you ever really “own the docs”?
  - *Other options can address economics, but also focus on specific results for operations and quality.*
    - Be deliberate on how contracts such as medical directorships, clinical co-management, joint ventures, can improve processes and outcomes for the program or service line.
  - *Remember that the end game is clinical activity alignment and economic alignment*
- Preparing for Bundled Payments/Global Payments/Accountable Care
  - *New payment mechanisms and delivery models require strong alignments with physicians and other providers to coordinate high quality care at a lower cost.*
    - How will you split payment across activities to manage the population's health?

**ATTENDEE LIST**

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# Thank You

To our Regional Roundtable Partners, whose support and vision allows these thought-leading efforts to continue at Community Hospital 100.



Our Facilitator:  
Kurt Salmon



## **About Community Hospital 100:**

Our mission is to help lead the future of health in our communities by providing exceptional learning and relationship building opportunities for community hospital and system executives. At the center of this effort is our annual executive management conference.

The Community Hospital 100 Executive Management Conference is an elite gathering of executives from community hospitals and health systems. Many of the most dynamic players in the industry attend, offering a valuable opportunity to expand your personal network while attending focused education sessions that address today's most pressing issues.

Please visit us online at [www.communityhospital100.com](http://www.communityhospital100.com) to learn more and register to join us October 23-25 at Pinehurst Resort in North Carolina.

## **Community Hospital 100 Executive Management Conference**

October 23-25, 2011

Pinehurst Resort, NC

[www.communityhospital100.com](http://www.communityhospital100.com)