Beaumont Hospital - Grosse Pointe

Operational Initiatives - 2016

I. Market Share:

- a. Grosse Pointe Competitors:
 - i. St. John, Main (2.9 miles)
 - ii. St. John, Macomb (13.9 miles)
 - iii. Henry Ford, Main (10.0 miles)
 - iv. Henry Ford, Macomb (9.5 miles)
- b. Grosse Pointe Market Admissions & Growth
 - i. Grosse Pointe Market admissions YTD Dec 2015...115,484
 - ii. Grosse Pointe Market admissions YTD Dec 2014...113,330
 - iii. Grosse Pointe Market overall growth...1.9%
- c. Grosse Pointe <u>Hospital</u> Admission growth, <u>2015 vs. 2014</u> was 6.9%. This represents a continued market shift to the Grosse Pointe hospital.

II. Strategic Growth Initiatives: Budgeted

a. Admissions – Hire/credential additional primary care physicians and specialists.

Budgeted increase in admissions for 2016 = 332, which represents a year-over-year growth of 2.8%.

The table below outlines the budgeted growth in the major specialties:

Specialty	Admission Growth within Specialty	Cases		
Neurosurgery	9.5%	25		
Orthopedics	11.8%	97		
Urology	3.0%	9		
Internal Medicine	2.2%	148		
Cardiology	18.0%	53		

- a. <u>Cardiology</u> Plan to submit application for elective PCI in May 2016, anticipate an October 2016 start date (an additional 53 cath.'s were budgeted due to this new program).
- b. <u>Termination of the LTACH lease</u> with Select Specialties, which will be effective in June, will provide two options:
 - i. Adding <u>private</u> med/surg rooms to compete more effectively with the St. John hospital.
 - ii. Bringing in another LTACH service. The alternate LTACH would be Vibra, which is a joint venture arrangement through legacy Oakwood.

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- c. Movement of the following outpatient services to the lower level of the <u>Medical Office</u> <u>Building</u> to provide room to expand these programs and additional space for inpatient services:
 - i. Pain Clinic
 - ii. Shared Services (general radiology, ultrasound, non-invasive cardiology, EEG/EMG, PFT and outpatient laboratory)
 - iii. Wound Treatment
 - iv. Hyperbaric Services

Related cost of move is \$3M, which has already been funded by the Capital Committee on February 15th.

- d. <u>Surgical ICU</u> new 7 bed unit to open June 1st; will provide the ability to do more complex surgical cases...project funded through philanthropic support of \$2.0M. This project is scheduled to be operational in June, 2016.
- e. Key Volume Statistics Summary

	2015 YTD	2016 Budget	Projected Growth (2015 – 2016)
Admissions	11,915	12,247	2.8%
EC Visits	42,411	43,714	3.1%
Surgeries IP/OP	7,200	7,303	1.4%
Ortho	1,728	1,814	5.0%
Neuro	296	346	16.9%
Imaging	42,738	43,782	2.4%
Ambulatory Infusion	5,357	5,909	10.3%

III. Strategic Growth Initiatives: "Must Haves"

- a. Renovations and backfill of departments moving to MOB...\$1.8 (Strategic Imperative: Achieve clinical alignment for value based care)
 - i. Reopen 10 headwalls; 7 patient rooms on 3W
 - ii. Renovate 1st floor space for cardiovascular services (space vacated due to MOB)
 - iii. This program was funded through the Capital Committee meeting on February 15th
- b. LTACH renovations...\$2.94M (Strategic Imperative: Advance a culture of patient and family centered care)
 - i. The current unit is over 65 years old
 - ii. Renovations will:
 - 1. correct ongoing infrastructure and equipment issues
 - 2. bring the unit up to similar standards as the rest of the hospital
 - 3. make this unit ready for occupancy by a Vibra LTACH or as a private-bed med/surg unit

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IV. Remaining Strategic Growth Initiatives

- a. <u>Special Care Nursery</u> (Strategic Imperative: Advance a Culture of Patient and Family Centered Care). Justification for this new service:
 - i. Letter of Intent, which has been signed by East Side OB/GYN has the potential to bring 300 400 additional births
 - ii. Maternal Fetal Medicine group on-site Q1, 2016; will need a higher level of nursery to support this patient population
 - iii. To avoid the transfer of newborn < 36 weeks gestation (avoid delivery and separation of mom and baby)
- b. <u>Cancer Center</u> (Strategic Imperative: Develop innovative program to meet emerging market needs)
 - i. Provide radiation therapy for our patients on the east side, increase market share and stop the leakage to other health systems.
 - ii. Providing radiation therapy will increase cancer related surgeries, surgical ICU admissions, and ancillary testing.
 - iii. Our Breast Surgeon has converted to full time status in Feb. 2016 to accommodate increased volumes.
 - iv. Timeframe for development of this program is dependent on Troy achieving CON compliance.
 - v. With HOPD reimbursement somewhat unsettled, and potentially limiting the development of an <u>offsite</u> service, GP Administration will explore an <u>onsite</u> opportunity to further develop our Cancer Program.
- c. <u>OR Renovation</u> (Strategic Imperative: Achieve best in class quality and financial performance)
 - i. Need to increase size of ORs to accommodate new technology.
 - ii. Need hybrid OR to remain competitive in this ever changing, state-of-the-art environment.
 - iii. Need surgical core and storage space (citations from Fire Marshal; excess equipment in hallways).
- d. <u>Mobile Health Clinic</u> (Strategic Imperatives: Develop a Beaumont Health Network; Develop innovative programs to meet emerging market needs)
 - Given GP's proximity to underserved communities and its ability to leverage the hospital's Family Medicine Residency program, there is a unique opportunity to bring patient care <u>to</u> the community.
 - ii. Investment: \$350,000, with an opportunity for a portion to be funding through philanthropy.

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V. Additional 2016 Initiatives:

- a. <u>Magnet application</u> to be filed in December of 2016...designation in 2017 (Strategic Imperative: Employer of choice)
- b. Recertify as Level III trauma service (visit occurred March 3rd and 4th).
 - i. Research potential of providing Geriatric Emergency Center service.
 - ii. Research Acute Care Service (24/7 midlevel service) to support Acute Care Service, geriatric trauma and Surgical ICU.
- c. <u>Complete construction of MOB</u> in fourth quarter of 2016...full impact of MOB physicians in 2017 (Strategic Imperative: Achieve clinical alignment for value based care).
- d. <u>Develop a hyperbaric oxygen therapy program</u> to enhance existing outpatient wound treatment services.

VI. Physician Manpower Needs...(4.95 FTE)

- a. Advanced Practice professional (1.0 FTE)
- b. Primary Care physician (1.4 FTE)
- c. Director of Surgical ICU (.4 FTE)
- d. Nutrition & Preventive Medicine physician (0.05 FTE)
- e. Palliative Care physician (0.4 FTE)
- f. Maternal Fetal Medicine physician (0.3 FTE)
- g. General Surgeon...0.4 FTE, (tentative start date is June 1st)
- h. General Surgeon...1.0 FTE, (specialty in Breast surgery...hired March 1st)

VII. Concerns:

- a. Infrastructure capital
 - i. Total...\$10M
 - a) Of the \$10M, \$7.9 needed for Code/Joint Commission requirements
 - ii. Replacement of existing 45-year old parking deck
 - Current engineering and design studies underway
 - ii. Medical Equipment Replacement
 - Equipment needs from 2014 were differed to 2015, which were again deferred to 2016 at an estimated figure of \$6M
- b. Capital needed to fund Strategic Growth Initiative "Must Haves" noted above
 - i. LTACH renovations...\$2.94M

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Foundational

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No. Strategic Initiative Tactics Responsibility Metrics Responsibility Anne Stewart Complete Q2 2015 x V V V V V V V V V V V V V V V V V V				ngaged and diverse workforce		Year			BLG:		
1) Complete Magnet Gap Analysis/consultant Anne Stewart 2) Recruit and Hire Magnet Program Director Anne Stewart 3) File Magnet Application Anne Stewart/Randy, Whitney Anne Stewart/Randy Whitney Anne Stewart/	No.	Strategic Initiative				2015	2016	2017	2018	2016 Capital Dollars	2016 Operatin Dollars
Obtain Magnet Designation. Grosse Pointe plans to be the third Beaumont Health Hospital to be awarded ANCC Magnet Designation 4) Train and engage entire hospital in the Magnet philosophy 5) Achieve Magnet designation Anne Stewart/Randy Whitney Sept 2015-application X X X X X X X X X X X X X		.1 the third Beaumont Health Hospital to be awarded	1) Complete Magnet Gap Analysis/consultant	Anne Stewart	complete Q2 2015	х					
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ANCC Magnet Designation philosophy Sept 2015-application X 5) Achieve Magnet designation Anne Stewart/Randy Whitney Improve RN recruitment, turnover & retention to within target of Magnet			3) File Magnet Application	Anne Stewart/Randy Whitney	Dec-15		х		Г		
turnover & retention to within target of Magnet	5.1		(A)	Anne Stewart/Randy Whitney	Sept 2015-application			х			
organization			5) Achieve Magnet designation	Anne Stewart/Randy Whitney	turnover & retention to						

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