

Beaumont Grosse Pointe
Monthly Strategic Tracker

Beaumont Grosse Pointe 2017 Objectives																		
Objectives		Measure	Department Leader	Administrator	Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
Tactics																		
Quality & Safety	1. Eliminate HAC Penalty	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	
	a. Reducing peri op hemorrhage rate	from __ to __	Muscat	Cavender	Sue													
	b. Reducing post op kidney injury rate	from __ to __	Muscat	Cavender	Sue													
	c. Reducing post op respiratory failure	from __ to __	Muscat	Cavender	Sue													
	2. Improve Culture of Safety	Confirm w/ the team & Sue Muscat: 75 % of units achieving status 2, 3, or 4 (new target score for Overall Perceptions of Safety increased from 66% to 70%, for 2017)	All department leaders	All Administrators	75%													
	3. Implement communication boards	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	
	a. Partner with Service Excellence and Nursing to implement a consistent communication board by 1st Qtr. 2017	On Track / At Risk / Not on Track	Muscat/Bennett	Cavender														
	4. Complete Magnet document by August 1st	On Track / At Risk / Not on Track	Whitney	Stewart														
Patient Experience	1. Implement Patient & Family Advisor model	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	
	a. Include PFAs on 4 service teams by 2nd Quarter 2017	On Track / At Risk / Not on Track	Bennett	Cavender														
	b. Include PFAs on QC&SC by 1st Quarter 2017	On Track / At Risk / Not on Track	Bennett/Muscat	Cavender														
	2. Complete service model training for all employees by the end of 1st quarter	On Track / At Risk / Not on Track	Bennett	Cavender														
	3. Implement a leader rounding model by 1st Qtr. 2017	On Track / At Risk / Not on Track	Bennett	All Administrators														
	4. Improve physician engagement in patient experience	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	
	a. Report physician scorecards on a quarterly basis (at least) at the Operations Team meetings	On Track / At Risk / Not on Track	Bennett	Cavender														
	5. Achieve patient experience target specifically related to the Clean & Quiet Domain (lowest performing domain, of those noted as top priority index domains)	__ % Always	Kripli	Cavender	TB Developed by Corp	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	
Management	1. Improve time to fill vacancies	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	
	a. Reduce average fill time by 10% (from 33 days to 30 days = 3 day reduction)	Average fill time (days)	Walker	Swaine	30													
	2. Achieve milestones related to Magnet designation	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	

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Employee Eng	Tactics																
	a. Increase BSN rates to 60% by year end; goal is to have BSN rate of 80% by 2020	BSN rate (%) at BGP	Whitney	Stewart	60%												
	3. Develop hospital wide and departmental action plans re: to engagement survey by the end of the 1st quarter	On Track / At Risk / Not on Track	All department leaders	All Administrators													
Growth	1. Achieve hospital-wide budget targets associated with key strategic initiatives: Outpatient Services	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
	a. Achieve 340B savings target	\$2.1M savings by year end or \$175K/month; metric documented in (\$000)	Stout	Cavender	\$175												
	b. Meet Hyperbaric NOI	31% net margin by year end	Winters	Cavender	31%												
	c. Develop a plan to track volume growth associated with MOB tenants by ???	On Track / At Risk / Not on Track	N/A	Cavender/ Kilpatrick/ Miller													
	d. Grow PT business through expanded space plan on Little Mack	PT Program Expansion SCS/Proforma ROI/BMG Negotiation On Track / At Risk / Not on Track	Amarnath	Kilpatrick	 BMG Meeting												
	e. Implement 3rd shift MRI and associated volume targets	Total Volume, Customer Service, Next Available On Track / At Risk / Not on Track	LeBlanc	Kilpatrick	Budget Cust Serv. Next Avail.												
	f. Increase pain clinic volumes by 10% increase and on track to achieve this by the end of the 2nd quarter	Budgeted Annual Pain Clinic Volume for Pain Clinic is 6,893 cases	Witt	Swaine	10%												
	2. Achieve hospital-wide budget targets associated with key strategic initiatives: Inpatient Services	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
	a. Open SICU by (insert date)	On Track / At Risk / Not on Track	Reinman	Stewart													
	b. Achieve PCI volume projections	Monthly volume	Reinman	Kilpatrick	17												
	b. Achieve PCI CON procedural equivalents	Monthly procedural equivalents	Reinman	Kilpatrick	117												
	3. Achieve hospital-wide budget targets associated with key strategic initiatives: Surgical Services	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
	a. Achieve Surgical growth projections by marketing private rooms to orthopedic surgeons, referring physicians and community, beginning on 1/4/17	Joint replacement volume to increase by 10 % (insert #)	Hartner	Swaine	need target # from Marla												
	b. Develop strategies such as "pre-hab" to minimize the impact of Ortho bundled payment to be completed by the end of the 2nd quarter	On Track / At Risk / Not on Track	Hartner	Swaine													

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Tactics																	
Finance	c. Achieve Surgical growth projections by conducting tours of new urology suite to attract physicians with renovations complete & announcements/invitations to tour by end of 1st quarter	On Track / At Risk / Not on Track	Witt	Swaine													
	4. Improve utilization management & revenue stream	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
	a. Improve the management of OPPMs	Decrease OPPM LOS by ____	Muscat/Kline	Cavender	Sue/Deb												
	b. Reduce denial rates for 3 payers	Decrease denial rates by ____	Muscat/Kline	Cavender	Sue/Deb												
	c. Implement quarterly case mix meetings with physicians	metric/volume?	N/A	Miller/ Swaine	Miller												
	d. Implement EC copay collection process	metric/volume?	Newman-Bain	Miller	Miller												
	e. Bundled Payment Team to develop pre-surgical optimization process to prepare for BC/BS and CMS bundled payments; Draft complete by end of Q1 & Implement by the end of Q2	a. LOS for Hip/Knee procedures will be reduced by ____%	Hartner	Swaine	target developed by end of Q1												
		b. Utilization of Skilled Care facilities will be reduced by ____%	Hartner	Swaine	target developed by end of Q1												
	5. Develop new and expand existing services	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
	a. Plan to add 2nd MRI (Fixed/Mobile)	On Track / At Risk / Not on Track	LeBlanc	Kilpatrick		TBD											
	b. Feasibility plan for 2018 onsite Linear Accelerator	On Track / At Risk / Not on Track	LeBlanc	Kilpatrick								Review CON					
	6. Proactively plan for medical staff succession planning	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
	a. Assess and prepare for anticipated retirements within the next 5 years for Drs. Barbe, Lloyd & Rodriguez with a documented and agreed upon succession plans will be established by 3/31/2017	On Track / At Risk / Not on Track	Hartner	Hoban													
	b. Achieve Surgical growth projections through vascular surgeon outreach on behalf of Drs. Bove & Haouilou	Visits to 11 BMG PCP locations and other targeted referring physicians beginning on 1/31/17	Hartner	Swaine	11												