

## Questions and Answers 2015 strategic plan

### Question 1:

What's different about this new plan vs. the current strategic plan?

### Answer:

Our 2001 and 2005 strategic plans helped guide our progress over the last decade. The new plan will speed us along the path we've been following, not change our direction. However, there are some things that are notably different:

- Strategic focus statement — a new element; defines where we choose to focus our efforts in the next five years
- Tighter plan: 3 objectives, 10 goals with 33 initiatives, 3 critical requirements with 14 initiatives

By comparison, the 2005 plan had 5 broad themes, as many of 14 priorities under each, and 119 initiatives

- Plan includes a commitment to improve the health of children in our own community
- Metrics are built into the plan
  - Will allow us to measure progress towards meeting our objectives and goals
  - This is the first time specific, measurable targets have been written into our strategic plan
- Focus on value and cost
  - Times are different. The health care industry can expect more rigorous scrutiny, more demand to bring down health care costs
    - Noticeable escalation of cost compared to most industries
    - Enormous, unsustainable burden on the national economy, businesses, families
  - Cincinnati Children's was a leader in adopting the quality/safety agenda

- We have an opportunity to lead now by being a model for reducing costs while delivering superior quality, safety and patient experience
- A commitment to outcomes, experience and value are part of our mission statement. Our value equation: 
$$\frac{\text{outcomes} + \text{experience}}{\text{cost}} = \text{value}$$

**Question 2:**

What happened to the 2005 plan?

Have we met the major goals?

If there are goals we haven't achieved, are they still relevant?

**Answer:**

- There's continuity between the two plans
  - Our vision statement, which has guided us since 1996, was central to the 2005 plan, and still is.
  - Mission statement was introduced in 2005. That stays the same.
  - Three of the five themes were 1) outcomes, 2) experience, and 3) value. Our commitment to O, E, V remains the same.
- We've achieved/made progress on many of the goals in the 2005 plan.  
Examples:
  - The three institutes announced over the last year-and-a-half are an outcome of goals related to infrastructure, organization, integration, and innovation in improving child health
  - Examples of clinical initiatives in the 2005 plan that have been accomplished:
    - Develop Center for Adherence Medicine
    - Develop comprehensive asthma center
  - Examples of research initiatives in the 2005 plan that have been accomplished:
    - \* Expand research in developmental biology, immunobiology, inflammation, cancer
    - \* Develop data repositories and other information technology capabilities

- \* Recruited leadership and established Center for Health Care Quality
  - \* Built research core capabilities and infrastructure
  - \* Developed internal training program to support delivery system improvement (I2S2) and created leadership training and mentoring programs
  - \* Implemented EPIC, including ability to mine clinical data for research purposes
  - \* We have more multidisciplinary teams, programs, approaches
  - \* Demonstrated significant cost savings from improved safety (reducing VAPs, SSIs) and flow (maximizing use of existing resources)
  - \* Created the Global Health Center; focusing on international education and formalized partnerships; developing international research relationships
  - \* Goal of recognition in graduate medical education: We've been ranked in the top 3 for pediatric residency training for the last few years
- The goal of improving medical and quality of life outcomes is a “forever” goal. It's a lynchpin of the 2005 plan and of the new plan and of any plan we might ever write.

Example: Have developed and begun rolling out the self-management guideline for children with chronic conditions. More work needs to be done to improve outcomes for children with chronic health issues.

**Question 3:**

What will be most challenging for us to achieve?

**Answer:**

The plan includes bold aspirations. We may never achieve some of them. For example, our goal for patient safety is: “Eliminate all preventable serious harm to our patients.” That is an aspirational, perfection goal that we will always strive for. Unless we can totally eliminate human error, we probably can't ever achieve it. That doesn't mean we shouldn't try. If we don't set the highest possible standards, we may find ourselves settling for less than we can achieve.

Our community health goal commits us to working with collaborators across the greater Cincinnati region to tackle some very difficult problems, including infant mortality, obesity, and injury. These are not simply health issues, but are linked to many complex social issues. They are issues we must and will work on, fully aware that it will take a very long time to achieve this goal.

The continuing recession, high unemployment, local demographics, and the impact of health insurance reform will create new financial challenges in the coming years. This reality makes it more critical for us to be proactive in seeking new revenue streams.

**Question 4:**

I don't see myself/my department in this plan. Are we a lower priority?

**Answer:**

- The strategic goals are intentionally broad so all of us can work on improvements: i.e., productivity, care integration, innovation and safety.
- In addition there's important work all across the institution that is outside the themes called out in this plan. That work will continue. It's essential to the institution, the future of medicine and the families we serve.
- At the same time, we know we can't do everything, and that not everything can be a priority. We need guidelines to help us prioritize. That's the purpose of the strategic plan.

**Question 5:**

How will this plan help our department set priorities?

**Answer:**

- It will be different for each department
- Departments will link their operating plan and budget to the strategic plan

- Business unit meetings will review progress on operating and strategic plan goals
- The board will regularly review progress on the strategic plan

**Question 6:**

I'm troubled by the business focus of the plan.

Is it all about the bottom line?

How does this plan relate to our vision?

Is this the environment where I want to work?

**Answer:**

- Our vision is to be the leader in improving child health. To be the leader, we need to be strong and financially stable to have the resources to invest in new and innovative programs, attract and retain the best talent, stay at the leading edge of technology, and be the best place to work. We must work within financial realities to achieve our vision.
- As a strategic planning document, the plan focuses on many of the business and organizational priorities of the institution. We need to understand and embrace these priorities to keep our organization fiscally strong, thriving and growing so that we can pursue the vision.

**Question 7:**

Why was this plan developed without consulting our department/division?

**Answer:**

- The planning process was different this time than the last time we developed a strategic plan. With discussion of health care reform intensifying, and a change in CEO coming, the cabinet undertook an evaluation of organizational

performance and our overall strategic direction. The new strategic plan is an outgrowth of that initiative.

- The cabinet reached out for input from many sources throughout the planning process, among them many division directors and parents on the Family Advisory Council. Although not every division was consulted, there was broad representation.
- Over 100 focus group participants gave input in March 2009. The focus groups were reconvened in March 2010 to provide additional feedback.

**Question 8:**

What happens if new factors or environmental trends cause us to make major changes? Do we change the plan?

**Answer:**

We believe we've developed a strong plan that will be an effective guide for future decision-making. Nonetheless we will re-evaluate our strategies and priorities over time.

The plan is a guide, but not a straitjacket. We always need to be flexible to respond to unanticipated changes or emerging opportunities.

**Question 9:**

How will I learn about progress in the next five years, or learn about any changes to the goals and initiatives?

**Answer:**

Since the plan includes specific measures for every goal and initiative, we will have unprecedented ability to track progress.

We are committed to transparency about our progress. Scorecards will be posted on CenterLink and updated on a regular basis. In addition, CenterNews and 'Round the Center will have periodic stories updating progress.