VVRMC 2016-2018 STRATEGY MAP

MISSION: VVRMC lives to deliver healthcare our community can trust

VISION: The Premiere provider for all health care needs

LEGACY: Strengthening our foundation through empowerment

PILLAR	Strategic Objectives	Balanced Scorecard Measures	FY2017 Goal	FY2019 Goal
	Develop a highly competent team	High/Med/Low Ratings	Fully deploy the High/Medium/Low Process	High - 60% / Med - 30% / Low - 10%
PEOPLE	Create a great place to work	Workforce Satisfaction and Engagement Workforce Retention	Engagement - 50th percentile Favorability - top quartile Retention - 75th percentile	Engagement - top quartile Favorability - 85 percentile Retention - top decile
	Strengthen integrated Physician alignment	Physician Satisfaction/Engagement Champion of hospital strategic initiatives Physician - sensitive indicators (all CAHPS, PSI indicators)	Prep for a 2018 Survey 4 projects 100% of measures at CMS Median	HCA Mean 8 projects 100% if CMS measures at top quartile
QUALITY	Provide excellent care you can trust	CMS Core Measures -Inpatient -Outpatient ED Clinics -Ambulatory Surgery Regulatory/Accredidation compliance Physicians offices PQRS/MIPS measure	25% in top decile Full compliance 10% improvement in results	75% in top decile Full Compliance 50% in top decile
GOALITT	Eliminate preventable harm	PSI measures Hospital Acquired Conditions Falls with Injury Medication reversals Medication Scan Rates	85% of measures above the national rate Reduce HACs by 50% over prior year Establish accurate baseline	99% of measures above the national rate 0 HACs NDNQI Top Decile Improve by 50% 98% Scanned
SERVICE	Deliver an integrated patient-centered experience	HCAHPS (Press Ganey) CG CAHPS (Press Ganey) Outpatient Satisfaction (Press Ganey) ED Satisfaction (Press Ganey)	100% top Quartile PG 50 Percentile Establish baseline measure 50 Percentile	100% Top Decile PG Top Quartile PG Top Quartile PG Top Quartile
FINANCE AND GROWTH	Ensure financial Sustainability	Days cash on hand Net margin from operations Cost per adjusted patient day MOR compliance	Increase days to 10 0% \$15- Introduce MOR process	Increase cash on hand to 180 days 6% 10% improvement 100% monthly department review
	Enhance Service to meet Community needs	DSRIP Compliance (Encounters) Medical Staff recruitment	90% of yearly goal met 50% of targeted specialist	100% of goals met 75% of targeted specialists hired
	Expand markets to maximize resource utilization.	Primary Market Share-Inpatient Primary Market Share-Outpatient Secondary Market Share Patient Revenue from new markets	Establish precise market share Establish precise market share Establish precise market share Achieve yearly targets	3% increase from 2017 1.5% increase from 2017 TBD Achieve yearly targets
COMMUNITY	Establish relationships for population health	CPRIT compliance Philanthropy and Volunteerism Population Health Strategy Plan Leadership Participation on NFP Boards	90% compliance Establish plan and metrics Develop plan Educate leaders on board membership	 100% compliance 100% of leaders participating 100% of initiatives on target 100% of Senior leaders participate with designated NFP boards
VALUES:	Accountable (Consistent Empowered	Quality-Focused	Trustworthy United
VALVERDE				

REGIONAL MEDICAL CENTER in partnership with Methodist Healthcare-San Antonio