

Fort Washington Medical Center
Required Executive Summary and Hospital Strategic Transformation Plan Format
Due: December 7, 2015

Hospital Strategic Transformation Plan

1. Describe your overall goals:

The overall Strategic Transformation Goals of Fort Washington Medical Center are as follows:

- **Improve support for patients with chronic disease to reduce the likelihood of readmission to the hospital after an initial episode of care:** The hospital will continue the use of internal resources to coordinate the transition of care for patients discharged from the hospital back to the community monitoring their progress with medication management and appointment follow-up to reduce the likelihood of readmission to Fort Washington or any other area hospital.
- **Provide for coordination of care following an episode of with the hospital (post-acute) through the use the Totally Linking Care Regional collaborative:** As part of the recognized need to utilize infrastructure beyond the capabilities of our small community hospital, Fort Washington Medical Center has been a partner in the development of the Totally Linking Care (TLC-MD) Regional Collaborative which plans to improve care coordination in Prince George's, Calvert, and St. Mary's Counties. TLC's member hospitals include Doctor's Community Hospital, Dimension's Health System, MedStar Southern Maryland Hospital, Calvert Memorial Hospital, MedStar St. Mary's Hospital as well as Fort Washington Medical Center. TLC-MD was formed in March 2015, bringing together the skills and resources of the southern counties of Maryland in an effort to collaborate and improve health care delivery to achieve the Centers for Medicare and Medicaid Service's (CMS) Triple Aim: providing better care for patients, improving population health outcomes, and lowering costs by improving our health systems. TLC-MD represents a commitment of all seven of the hospitals within Prince George's, Calvert, and St. Mary's counties to work together to achieve these aims.
- **Recruit and support the growth of primary care providers in the Fort Washington primary service area:** To improve access to health care for residents in the hospital's primary service area, Fort Washington Medical Center (the Hospital) will facilitate the recruitment and placement of primary care physicians in local physician practices (Practices). This will be accomplished through income guarantees and loans to support bring new physicians into these Practices. Prince George's county has less access to care

and lower numbers of physicians than its neighboring counties. Recruiting new primary care physicians will reduce use rates for emergency care services at the hospital and reduce readmissions by allowing for timely follow-up after an acute care episode

- **Reduce the cost of care in the hospital through the implementation of productivity management:** To improve efficiency of operations, the hospital will complete the implementation of a productivity management system to improve control over labor cost which is a significant driver in the cost of health care delivery. While other cost efficiencies are considered on an ongoing basis, labor management is a major focus for the organization as it seeks to reduce the cost of health care delivery and improve efficiency.
- **Support the education of the community through health care fairs, lectures, diabetes education:** As part of its community outreach, the hospital will continue to use its resources to educate the public on chronic disease management and health awareness. The hospital has a diabetes education program that is poised to provide services to the community and provide education to patients discharged from Fort Washington as well as other community providers.

2. List the overall major strategies (3-10) that will be pursued by your hospital individually or in collaboration with partners (and answer questions 3-6 below for each of the major strategies listed here):

The overall major strategies that will be pursued by Fort Washington Medical Center include:

- A) Readmission reduction through improved care coordination, education and follow-up
- B) Expand access to care through recruitment and seeding of primary care physicians in the Fort Washington Medical Center primary service area.
- C) Collaboration with other area hospital's through participation in the Totally Linking Care, LLC. This collaborative will provide post-acute care coordination of services to avoid readmission to area hospitals.

3. Describe the specific target population **for each major strategy**:

Target Population:

- A) Readmission reduction: Those patients presenting at Fort Washington Medical Center including high use patients and those with chronic disease management indicators
- B) Access to care through physician recruitment: Patients in the hospital's primary service area which includes zip codes 20744, 20745 and 20748.
- C) Those patients living in Prince Georges's, Calvert and St. Mary's counties where hospitals in the TLC-MD collaborative are located

4. Describe the specific metrics that will be used to measure progress including patient satisfaction, quality, outcomes, process and cost metrics **for each major strategy**:

- A) Readmission reduction will be measured by change in the hospitals readmission rate, MHAC scores and percentage of potentially avoidable utilization at the facility.
- B) Overall impact of physician recruitment and seeding will be measured by hospital use rates including emergency room visits, changes in readmission rates, and volumes of patients seen by the providers in the specific practices participating in the program.
- C) Collaboration with Regional Providers on care coordination will be monitored through changes in hospital readmission rate, patient satisfaction scores, MHAC scores, change in potentially avoidable utilization

Measure	Definition	Goals	Source	Population
Total Hospital cost per capita	Hospital charges per person	Growth <3.58% from CY 2013 in 2015; meeting state goals in ensuing years	HSCRC case-mix data	Based on use rates in zip codes 20744, 20745, and 20748
ED visits per capita	ED visits per thousand	2% per year decrease	HSCRC Case-mix data	Based on use rates in zip codes 20744, 20745, and 20748
Readmissions	All-cause readmissions within 30 days, both as N/1000 and as N/discharges	< national average N/1000 for Medicare within two years	CRISP	Based on use rates in zip codes 20744, 20745, and 20748
Potentially avoidable utilization	As per HSCRC specifications	Reduction of 15% per year for two years	PAU Patient Level Reports	Based on use rates in zip codes 20744, 20745, and 20748

5. List other participants and describe how other partners are working with you on **each specific major strategy**:

- A) Local physician practices including Dr. Hilary Washington (primary care), Dr. Felton Anderson (Cardiology) and George Washington Emergency Physicians (contract physician group). These primary care physician and Cardiologist are improving access to care by taking scheduled appointments or emergency appointments to avoid returns to the hospital. The contract physician group manages the Emergency Room and is an integral part of managing patient care at the hospital for appropriate placement of patients.
- B) Local physician practices in the Fort Washington primary service area consisting of zip codes 20744, 20748 and 20745. Certain practices have agreed that they are agreeable to the hospital assist in the recruitment of an additional physician to add to their practice capability.
- C) Hospitals in the TLC-MD Collaborative including Calvert Memorial Hospital, Dimensions Health System, Doctor's Community Hospital, MedStar Southern Maryland Hospital, MedStar St. Mary's Hospital. Member hospitals and their community partners will coordinate post discharge care of patients providing support services including care monitoring and transportation services to reduce the likelihood that the patient will have an unscheduled return visit to the hospital.

6. Describe the overall financial sustainability plan **for each major strategy**:

- A) The overall cost of the strategy includes cost of staffing and support in patient navigation and education of patients including the hospital's diabetes education program (total estimated amount based on budget \$300,000). Program is partially supported by infrastructure funding from the HSCRC.
- B) Physician recruitment and seeding is subject to availability of funding from grant proposals and improvement in operational efficiency of the hospital which includes reduction of cost when utilization is reduced and elimination of unnecessary cost. The annual cost associated with the program is \$150,000.
- C) Regional collaboration is totally dependent on grant funding and the hospital's alternative will be to rely solely on the internal readmission reduction program and its strategy for success. The larger collaborative leverages the pooled resources of the member hospitals providing a very robust program for post-acute care coordination and support tracking patients across the area. The support of this effort has an estimated annual cost to Fort Washington of \$233,000.