Fort HealthCare
FOR HEALTH

Strategic Plan 2023 – 2025

Mission: Improve the health and well-being of our community.

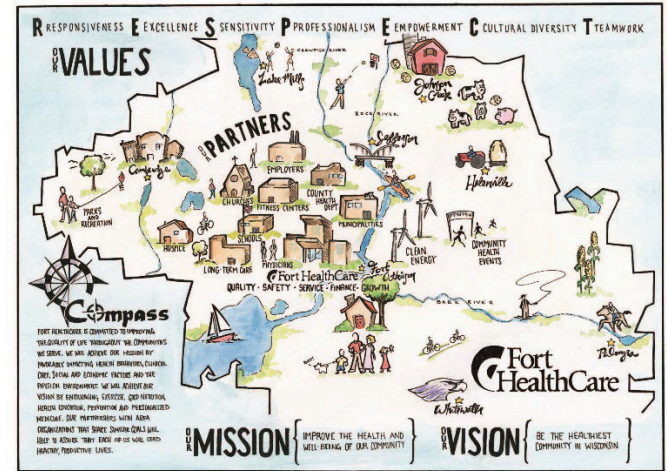Vision: Be the healthiest community in Wisconsin.

Core Commitments

Service: Provide an excellent experience for key stakeholders- patients, employees, physicians, payers, and employers.

Quality: Demonstrate a passion for providing quality healthcare by utilizing evidence-based practices in the delivery of care.

Finance: Meet or exceed financial targets to support the organization's Mission and Vision.

Growth: In partnership with our community, identify and develop programs and services that provide value.

Service	Quality/Safety	Finance	Growth
Goal: To deliver a healthcare experience resulting in the highest levels of patient and employee satisfaction. Measures: • Overall rating of satisfaction for Hospital Inpatients; exceed state average - Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) • Overall rating of satisfaction for Outpatients - Ambulatory • Aggregate average of patient satisfaction for all Fort Medical Group Clinics • Designation as Top 25 Large Employer of Choice in the annual Milwaukee Journal Sentinel Survey of regional employers	*Goal:* To provide for the preventive and acute healthcare needs of area residents in the safest and most timely manner. Measures: • C-Diff Infection Rate (SIR) • 30-Day Mortality Rate – Heart Failure • Median Time - ED Arrival to Departure • Prenatal Care – Elective Delivery Rate • Re-Admission Rate • Safety Survey Results	*Goal:* To provide the community and employees of Fort HealthCare with a financially sound and viable, locally-based healthcare system. Measures: • Operating Margin • Days Cash on Hand	*Goal:* To partner with our community to develop appropriate access to health and wellness services and grow community engagement and accountability for improved preventive care, nutrition, exercise, and health-affirming lifestyles. Measures: • Increase MyCompass Portal Users • Lowered Body Mass Index (BMI) community-wide • Well-Child Visits 3rd-6th Year of Life • Advanced Care Planning • Breast Cancer Screening - Mammograms • Improve Blood Pressure (BP) community-wide • Depression Screening

Find Additional Health Information with these resource links:

Center for Medicare & Medicaid Services – Hospital Compare

County Health Rankings – Jefferson, Wisconsin

Wisconsin Department of Health Services

Wisconsin Hospital Association's Check Point – Fort Memorial Hospital

Milwaukee Journal Sentinel Top Workplaces

Fort HealthCare, Inc.

Strategic Plan Indicators: Goals and Current Values
2023-2025

Mission: Improve the health and well-being of our community
Vision: Be the healthiest community in Wisconsin

SERVICE: To deliver a healthcare experience resulting in the highest levels of patient and employee satisfaction.				
	Notes		**Current Value**	**Goal Date**
Patient Experience/Satisfaction				
# out of the 11 HCAHPS (Hospital Patient Experience) Survey Questions that Exceed the State Average	1			2023
OAS CAHPS - Ambulatory - Recommend Faciliity to family/friends	2			2023
Overall Experience - FMG Clinic Groups	3			2023
Employee Satisfaction – Journal/Sentinel Top Workplace - Large Employer Top 25	4	Every year	**No** 2014 **YES** 2010, 2011, 2012, 2013, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, **2023**	May of Every year

QUALITY: To provide for the preventive and acute healthcare needs of area residents in the safest and most timely manner.

	Notes	Goal	Current Value	Goal Date	
CORE MEASURES - Quality Bundle:					
C-Diff Infection Rate (SIR)	13	<0.96	2015: 0.54 2016: 2.16 2017: 1.018 2018: 0.62 2019: 0.00 2020: 1.40 2021: 0.00 2022: 1.773 2023: Q2: 2.31	2023	⬇
30 Day Mortality Rate - Heart Failure	14	<12.1%	6/14: 12.4% 6/15: 13.0% 6/16: 12.1% 6/17: 11.4% 6/18: 11.3% 6/19: 11.3% 12/19: 12.1% 7/1/18-6/30/21: 13.2%	2023	⬇
Median Time from ED Arrival to ED Departure	15	<112 min	2015:143 2016:131 2017:145 2018:135 2019:131 2020:129 2021:141 2022: 131.5 2023 Q1: 126.0 Q2: 143.5	2023	➡
Prenatal Care (PC-01): Elective delivery rate prior to 39 weeks	5	0 cases	2012: 0 2013: 0 2014:1 2015:1 2016: 0 2017:1 2018:1 2019:0 2020:0 2021: 0 2022: 0 2023: Q1 0, Q2 0	2023	⬆
READMISSIONS: 30-Day All Cause	9	<7%	Calendar 2013:9.7% 2014:5.7% 2015:5.1% 2016: 3.1% 2017: 4.9% 2018: 5.3% 2019: 4.7% 2020: 5.5% 2021: 4.8% 2022: 3.8% 2023: Q1: 5.3% Q2: 6.6%	2023	⬆
SAFETY BUNDLE:					
Safety Survey Results (Annual Survey - April)					
-Clinic Metrics	10	81%	2013: 66.3%; 2014: 78.8%; 2015: 73.3%; 2016: 72.7%; 2017: 81.4%; 2018:75.8% 2019: 83.7% 2020: 76% **2022: 74%**	2023	⬇
-Hospital Metrics		83%	2013: 81.5%; 2014: 77.2%; 2015: 77.9%; 2016: 79.3%; 2017: 84.3%; 2018: 82.0% 2019: 93.3% 2020: 78% **2022: 69%**		⬇

FINANCE: To provide the community & employees of Fort HealthCare with a financially sound & viable locally based healthcare system.

	Notes	Current Value	Goal Date	
Operating Margin	8		FY 2023	⬇
Days Cash on Hand	8		FY 2023	⬆

GROWTH: To partner with our community to develop appropriate access to health & wellness services & grow community engagement and accountability for improved preventive care, nutrition, exercise and health-affirming lifestyles.

	Notes	Current Value		Goal Date
Increase MyCompass Portal Users	16	Portal Users / Goal (31,500 to 11,500)		2023
Lower BMI (Body-Mass-Index)	7	Lower BMI / Goal 29.5 / Linear (Lower BMI) (33 to 28)		Calendar 2023
Well Child Visits 3rd-6th year of life	11	Well-Child Visits / Goal 61% / Linear (Well-Child Visits) (90.0% to 50.0%)		2023
Advanced Care Planning	12	ACP / Goal / Linear (ACP) (11.0% to 7.0%)		2023
Breast Cancer Screening	6	Breast Cancer Screening / Goal / Linear (Breast Cancer Screening) (85.0% to 65.0%)		2023
BP < 140/90 mm Hg	6	BP < 140/90 mm Hg / Goal / Linear (BP < 140/90 mm Hg) (85.0% to 65.0%)		2023
Depression Screening	6	Depression Screening / Goal / Linear (Depression Screening) (100.0% to 40.0%)		2023

1) HCAHPS – Measure of Inpatient satisfaction from the most recent quarterly survey. (Goal is set to exceed State Average)
    Higher numbers are better. In order to receive MCR and MCD fiscal incentive, at least **three** of the HCAHPS measures must meet or exceed the State avg.

2) OAS CAHPS - Ambulatory: Recommend Facility to Family/Friends - perform higher than State Average. Higher numbers are better.

3) Aggregated average of all FMG Clinics. Higher numbers are better. Selection of Press Ganey CG-CAHPS score for "Likelihood of recommending practice"

4) Journal/Sentinel Top WorkplaceAnnual Survey - Goal is to be in the Top 25 of the Large Employer category. Results are available in April/May.

5) Prenatal Care PC-01 - New measure to prepare for for FY2017 Value Based Purchasing measure

6) Data is from the electronic medical record registries. The Goal represents the median from the WCHQ data base. Higher numbers are better.

7) Data is from FHC's electronic medical record. The goal represents 2010 data. Lower numbers are better.

8) Values from Consolidated Financial Statements. Higher numbers are better.

9) Self benchmark All-Cause Readmission Rate (hospital goal <7%). Medicare 30 Day Rates for Readmissions (specific targeted dx) –
   Hospital Compare Data as of Q3 2013:
   Heart Failure 22.4% as of Q2 2013 (goal <23%), Pneumonia 18.3% (goal <17.6%), AMI n-too few cases (goal<18.3). Medicare goal represents US National Rate. Lower number is better.
   Note: Readmission is defined here as an admission to INPATIENT. This does not include observation or outpatients. Starting in FY2015, Medicare readmission conditions will include COPD patients, total hip arthroplasty (THA) and total knee arthroplasty (TKA).

10) Results are based on the AHRQ's survey results on Patient Safety Culture for Hospitals & Clinics. Overall average percentage of 'very good' and 'excellent' scores combined (Patient Safety Grade). Goal: 2+ percentage increase annually. Higher numbers are better.

11) Data is from the electronic medical record and represents a rolling 12 month % of children aged 2 years thru 6 years of life that have had a well child visit. (HEDIS metric) (2nd year of life added in 2022.) The goal is set at 61% or the equivelant of Dean Health Plan's database average. Higher numbers are better.

12) Data is from Cerner report & represents all individuals 18 years old & older that have an advance directive scanned into our EMR. Our Goal is to keep increasing the % of completed ACPs by 1% each year. Higher Numbers are better.

13) C-Diff Infection Rate (SIR): FY2017 Value Based Purchasing Mesure. Goal is set to exceed State Benchmarks

14) 30 Day Mortality Rate - Hearth Failure: FY2017 Value Based Purchasing Measure. Goal is set to exceed US average. CMS changed the measurement and measurement period due to COVID.

15) Median Time from ED Arrival to ED Departure: Goal is set to exceed the US average.

16) Data represents the number of registered users in the MyCompass Patient Portal. The Goals is to grow the number of uses by 5% from Jan 2017 to Dec 2017.

Green - Improved statistics over past reported numbers

Yellow - Remaining constant over past reported numbers

Yellow - Declining away from goal

Yellow - Improving but not yet met goal