

# **Sharing the Strengths of Henry County's Public Health System**

Anne Goon, MS, RD, LD

Health Commissioner, Henry County General Health District

Kimberly Bordenkircher, BSN, MBA, FACHE

Chief Executive Officer, Henry County Hospital



# Who We Are



- Combined health district
- 57 staff and 80+ volunteers
- Wide variety of public health services, including Dental, Help Me Grow, Home Health, Home Health Aide, and Hospice
- Primary local source of children's immunizations
- Supported by health levy; \$16.96 per capita local (and \$0.17 state) public health investment in 2011
- 25-bed private critical access hospital
- JCAHO Accredited
- 247 staff and 88 volunteers
- Fire Starter Award by Studer Group® in August 2010
- Excellence in Patient Care award given by Studer Group® in 2011
- Named to "Top 100 Best Places to Work" by *Modern Healthcare* in 2010, 2011, 2012

# Where We Are



2010 Census = 28,215

97.6% white; 0.7% black; 6.4% Hispanic or Latino origin

# What We Do

- Intentional interconnectedness between health department and hospital:
  - Governance
  - Planning
  - Training
  - Resource Development
  - Actions
- Shared services and close collaboration with “6-Pact” health districts
  - Defiance, Fulton, Henry, Paulding, Putnam, Williams

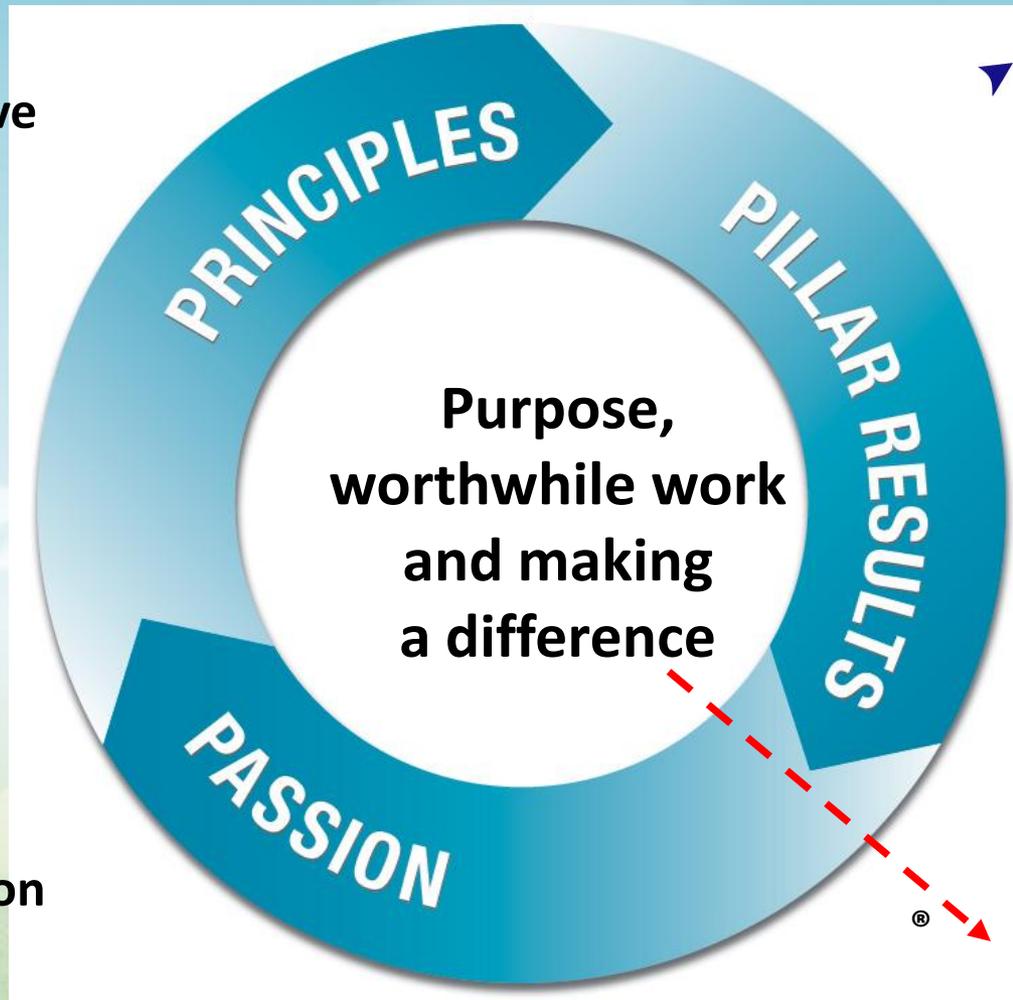
# Why We Do It

- Common mission...
  - Saving lives
  - Improving the health of Henry County residents
- Collaborative spirit...
  - We like working together.
  - We achieve more together than we can alone.
- Complementary services...
  - Ensures viability of both organizations
  - Ensures local needs are being met without duplicating services or wasting resources

# How We Do It

## Healthcare Flywheel<sup>®</sup>

▼ Prescriptive  
To Do's



▼ Bottom Line  
Results  
*(Transparency  
and  
Accountability)*

▼ Self-  
Motivation

**WHY**

# Evidence-Based Leadership<sup>SM</sup>

Foundation

Breakthrough

STUDER GROUP<sup>®</sup>:



Aligned Goals

Aligned Behavior

Aligned Process

- ▼ Implement an organization-wide staff/leadership evaluation system to hardwire objective accountability (Must Haves<sup>®</sup>) (30 pts)

- ▼ Create process to assist leaders in developing skills and leadership competencies necessary to attain desired results (15 pts)

- ▼ Agreed upon tactics and behaviors to achieve goals
  - *Rounding for Outcomes: (10pts)*
  - *Thank you notes: (2 pts)*
  - *Selection and the First 90 Days (8 pts)*
  - *Key Words at Key Times (5 pts)*
  - *Post Phone Calls (10 pts)*

- ▼ Re-recruit high and middle performers
- ▼ Move low performers up or out (12 pts)

- ▼ Processes that are consistent and standardized throughout the company (8 pts)

# Henry County Health Department

## PILLARS OF EXCELLENCE

### PEOPLE

To be the public health employer of choice in northwest Ohio

### SERVICE

To consistently provide exceptional service

### QUALITY

To provide client-centered public health services that are safe, effective, timely, efficient, and equitable

### GROWTH

To lead northwest Ohio in implementing effective public health interventions that improve the lives of local residents

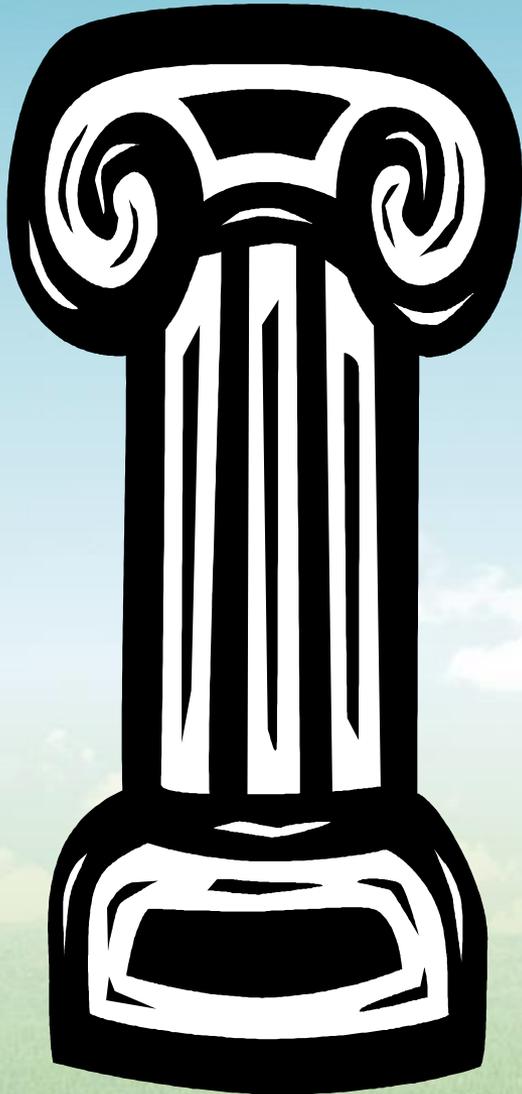
### FINANCE

To maintain adequate funding to support the provision of essential public health services

# People Pillar

Strategies:

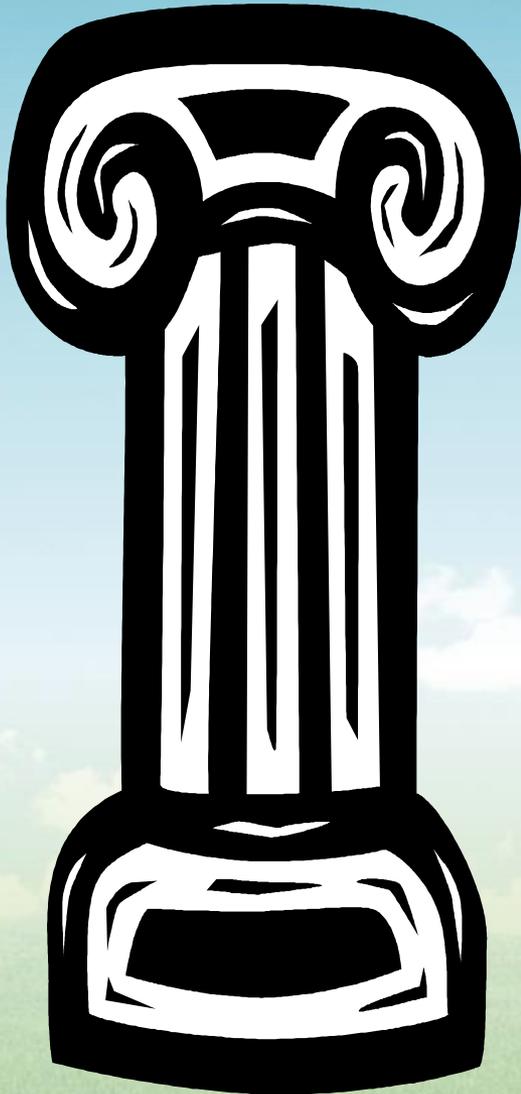
- Introduce Annual employee satisfaction survey.
- Update job descriptions.
- Create performance evaluation tool based upon current job descriptions.
- Create single agency-wide compensation plan.
- Involve staff in agency strategic planning.
- Update Personnel Policy Manual- *nearing completion*
- Implement joint Leadership Development Institute with Williams County Health Department.
- Implement 1) rounding for outcomes with staff, 2) thank you notes, and 3) high, middle, and low performer conversations- *rounding started in June 2012; training on thank you notes completed and introduction to hml performers started Sept 2012*



# People Pillar: 2012 Goals

Indicators	2011 Achievement	2012 Goals	2012 Achievement
% of Staff Completing Employee Satisfaction Survey	60%	65%	72%
Employee Satisfaction Score: Satisfaction with Current Position (strongly agree)	27.3%	40.0%	34.1%
Employee Satisfaction Score: Likelihood to Recommend as an Employer (strongly agree)	24.2%	40.0%	39.5%

# Service Pillar



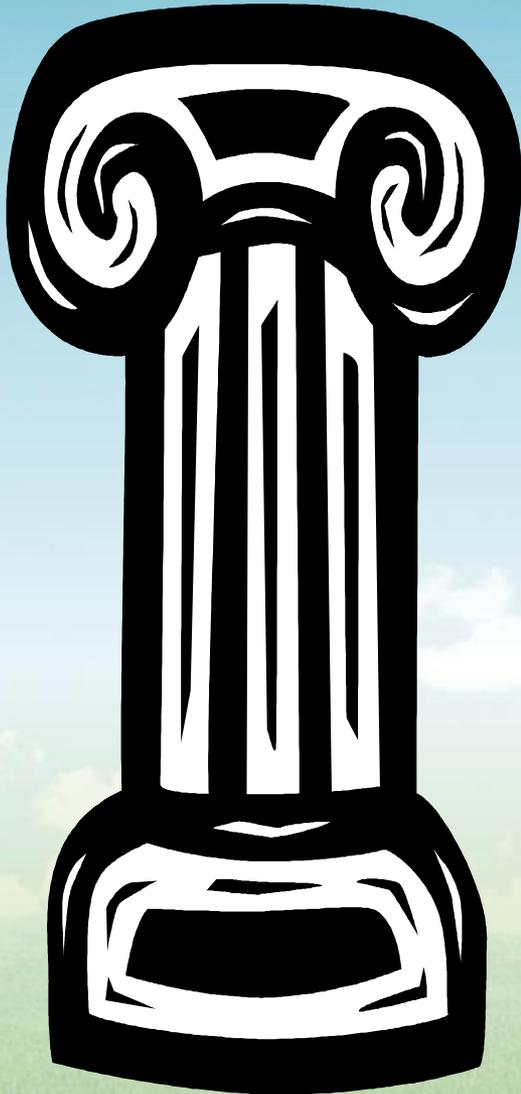
Strategies:

- Introduced on-going client satisfaction survey in English and Spanish (and refining for use with Environmental Health clients)
- Staff-developed Agency Standards of Conduct
- Introduce Five Fundamentals of Service (AIDET)
- Implement rounding for outcomes with internal and external clients/customers.

# Service Pillar: 2012 Goals

Indicators	2011 Achievement	2012 Goals	2012 Achievement
% of clients reporting the length of time for services was “much less than expected”	28.2%	36.0%	16.4% 2 <sup>nd</sup> qtr
<i>% of clients reporting the length of time for services was “about as expected”</i>	64.1%		73.0% 2 <sup>nd</sup> qtr
Increase % of home health clients stating they <u>always</u> felt home health staff really cared about them	84.2%	90.0%	93.8% 2nd qtr

# Quality Pillar



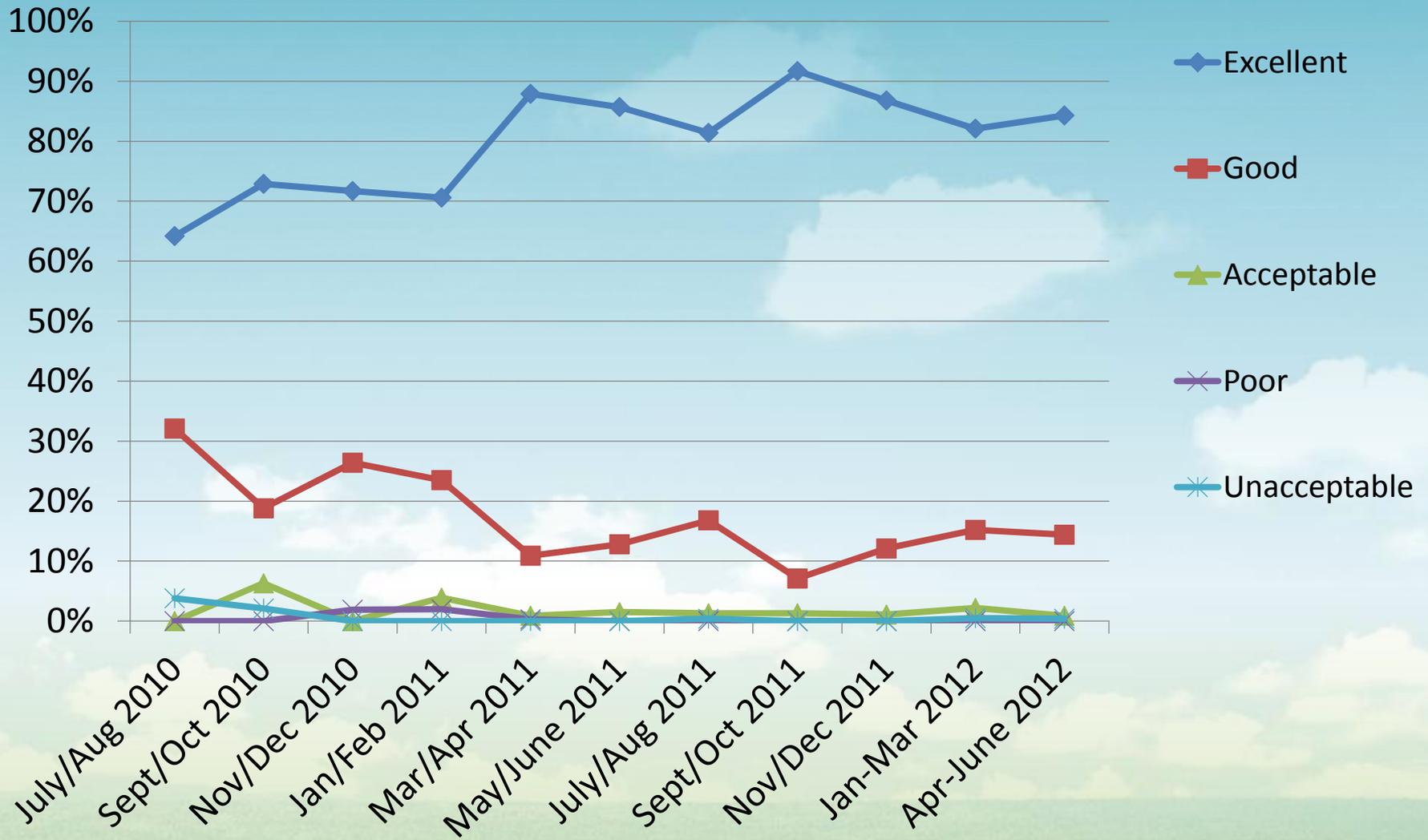
Strategies:

- Develop and implement a community-wide strategic plan for public health improvement (i.e. Community Health Improvement Plan).
- Position the Health Department to be eligible to apply for voluntary Public Health Accreditation.
- Identify how clients define quality for each primary service area.
- Implement the use of key words at key times.

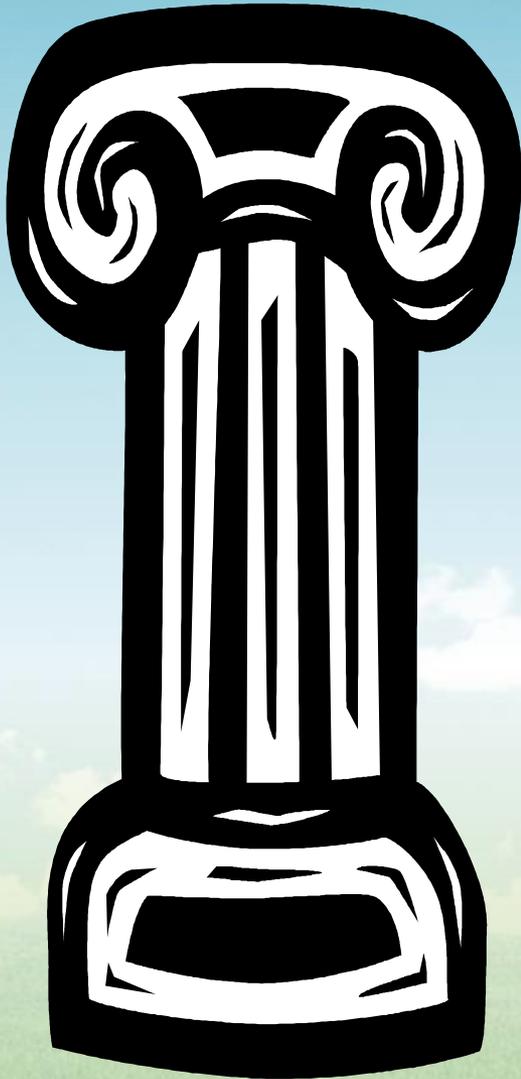
# Quality Pillar: 2012 Goals

Indicators	2011 Achievement	2012 Goals	2012 Achievement
Increase % of Health Department clients reporting quality of care as "Excellent"	86.4%	90.0%	84.3% 2nd qtr
Maintain "Readmission to Hospital from Home Health" rate at or below national average	29.0	≤ 29.0	28.0 YTD July
Maintain % of Home Health clients rating the care as a 10 ("best home health care possible")	84.5%	≥ 84.5%	76.5% 2 <sup>nd</sup> qtr

# Quality of Services Provided



# Growth Pillar



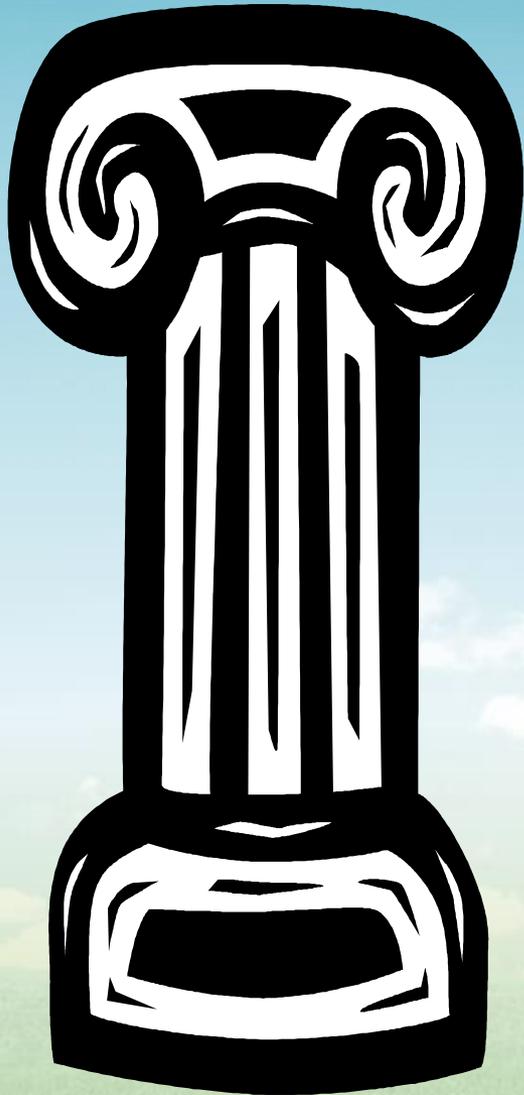
## Strategies:

- Develop staff-generated list of opportunities for growth.
- Complete state biennial Improvement Standards report (mirroring PHAB standards).
- Assign accreditation team to assess readiness to apply and create action plan to complete pre-requisites and application process.
- Collect and organize documentation to demonstrate achievement of accreditation standards.
- Adopt and begin implementation of Health Department strategic plan.

# Growth Pillar

Indicators	2012 Goals	Current Status
Voluntary public health accreditation	Complete all pre-requisites and initial application process for during 2012.	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Community Health Assessment <i>(completed 2010)</i></li> <li><input checked="" type="checkbox"/> Community Health Improvement Plan <i>(completed 8/2012)</i></li> <li><input checked="" type="checkbox"/> Agency Strategic Plan <i>(completed 8/2012)</i></li> <li><input checked="" type="checkbox"/> Accreditation Coordinator and Team Appointed <i>(completed 2011)</i></li> <li><input checked="" type="checkbox"/> Completion of Online Orientation <i>(Coordinator- 2/2012)</i></li> <li><input type="checkbox"/> Completion of Online Orientation <i>(Health Commissioner)</i></li> </ul>
Agency Strategic Plan	Implement first year of agency strategic plan in 2012.	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Agency Strategic Plan (with Detailed Action Steps and Timeline) <i>(completed 8/2012)</i> ; Implementation began 8/2012</li> </ul>

# Finance Pillar



## Strategies:

- Obtain additional Public Health Financial Management training.
- Implement Medicaid Administrative Claiming (MAC).
- Complete cost analysis of all Health Department services.
- Implement electronic billing for all clinical services- *implemented by Home Health/Hospice, Dental; underway for programs*
- Cap cash transfers to Environmental Health fund to \$60,000 in 2012.
- Place and pass replacement health levy on March 2012 ballot.

# FINANCE PILLAR

Indicators	2012 Goals	Current Status
General Fund Balance	Achieve minimum general fund balance of at least \$417,150 ( $\approx$ 90-day operating reserve for non-self-supporting programs)	General Fund balance > minimum balance 5 out of past 6 months.
Cash Flow and Fund Balances for Self-Supporting Programs	Maintain or improve positive cash flow in self-supporting programs in 2012. Achieve year-end fund balances reflecting 5-30% growth (depending upon program).	1 of 4 programs on target to achieve cash flow goal 2 of 4 programs on target to achieve fund balance goal
Health Levy	Achieve passage of health levy in 2012.	Replacement levy passed March 2012



**Vision:** To be a public health leader that embraces excellence and collaboration  
**Mission:** Improve quality of life through health promotion, health education, and disease prevention.

**PEOPLE**

**SERVICE**

**QUALITY**

**GROWTH**

**FINANCE**

**RESULTS FOR STAKE HOLDERS**

Public Health Employer of Choice

Exceptional Service

Safe, Effective, Efficient, Timely, and Equitable Client-centered Services

Effective Interventions That Improve Health

Adequate Funding for All Essential Services

**RESULTS FOR CLIENTS**

Friendly, competent staff

Timely, courteous service

Safe, effective, and efficient client-centered services

Evidence-based community health improvement strategies

Sound fiscal data and business practices

**RESULTS FOR AGENCY**

**(WHAT WE MUST EXCEL AT)**

Effective use of technology to optimize operations and outreach

Strategic funding decisions to ensure sustainability and capacity

Effective communications to improve public perceptions

Pursuit of diverse partnerships to strengthen operations and capacity

Warm, friendly, inviting, and safe facility that supports efficient delivery of services

Improved internal processes to increase efficiency and satisfaction

**LEARNING & GROWTH NEEDED TO GET DESIRED RESULTS**

Workforce Development for Staff, Leaders & Board  
 Recruitment, Interviewing, Selection, Orientation & Performance Evaluation Processes  
 Defined Personnel Policies

Rounding for Outcomes  
 Written Standard Operating Procedures  
 Quality Improvement Plan  
 Accreditation Preparation

Acquisition of Improved Technology  
 Partnerships for Shared Services and Community Health Improvement  
 Public Health Uniform Data System (PHUD\$) and Sound Stewardship Practices

To quote Jim Collins,  
author of “*Good to Great*,” “*Built to Last*,” and  
“*Great by Choice*”...

The critical distinction is not between business  
and social, but between great and good.

Greatness is not a function of circumstance.  
Greatness is largely a matter of conscious choice,  
and discipline.

To make the greatest impact on society,  
you need a great institution.

Anne Goon:

[agoon@henrycohd.org](mailto:agoon@henrycohd.org)

(419) 591-3023

Kim Bordenkircher:

[kimb@henrycountyhospital.org](mailto:kimb@henrycountyhospital.org)

(419) 591-3837