Institute *for* Healthcare Improvement

Understanding Your Governance and Leadership Structures

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Objectives

- Gain clarity on the leaders responsibility for the Triple Aim

- See how the Triple Aim fits into the organizations strategy

- Understand principles of coalition governance

Poll: Does your organization or coalition have a governance structure in place to lead Triple Aim efforts?

- **Yes:** We have a governance structure in place that includes key stakeholders. The leadership team can move very fast to make progress.

- **Somewhat:** The governance structure is clear but not all key stakeholders are included. We have the right leaders in right roles – now we need to move faster with more agility and be able to resolve conflicts.

- **Slightly:** We are currently clarifying our governance structure and leadership team for this work. Decision-making is slower and more confusing than we want it to be, and we may not have the right leaders in the right roles.

- **No:** We are currently building and/or locating our governance structure.

Some questions to think about…

- Is the Triple Aim strategic or just one of many "projects"?

- How important is population management to your strategy?

- Do you think of the hospital a cost center or a revenue generator?

Leadership 101

- Is it clear to you who is the executive sponsor/governance structure for this work?

- And have the other team assignments been made: portfolio manager, project manager, content experts , improvement advisor and data analyst?

Example: Teams and Projects Aligned

IHI Triple Aim Improvement Community
Project Team Contact Worksheet
Sonoma County Committee for Healthcare Improvement (CHI)
August 31, 2012

Project	Project Team Role	Contact Name
Educate and empower patients and their loved ones to make informed choices during the last years of life	Day-to-Day Project Manager	Trayce Beards
	Content/Clinical Expertise	Antara Aiama
		Bo Greaves
		Patty Jellison-LaVine
		Susan Keller
		Mary Maddux-González
		Jack Neureuter
	Additional Improvement Expertise	Lynn Silver Chalfin
	Measurement Lead	Jenny Mercado
Align care with patient choices during the last years of life	Day-to-Day Project Manager	Trayce Beards
	Content/Clinical Expertise	Kathy Ficco
		Robin Hagenstad
		Gary Johanson
		Karen Leider
		Pat Riley
		Brad Stuart
	Additional Improvement Expertise	Lynn Silver Chalfin
	Measurement Lead	Jenny Mercado

High-Impact Leadership Framework
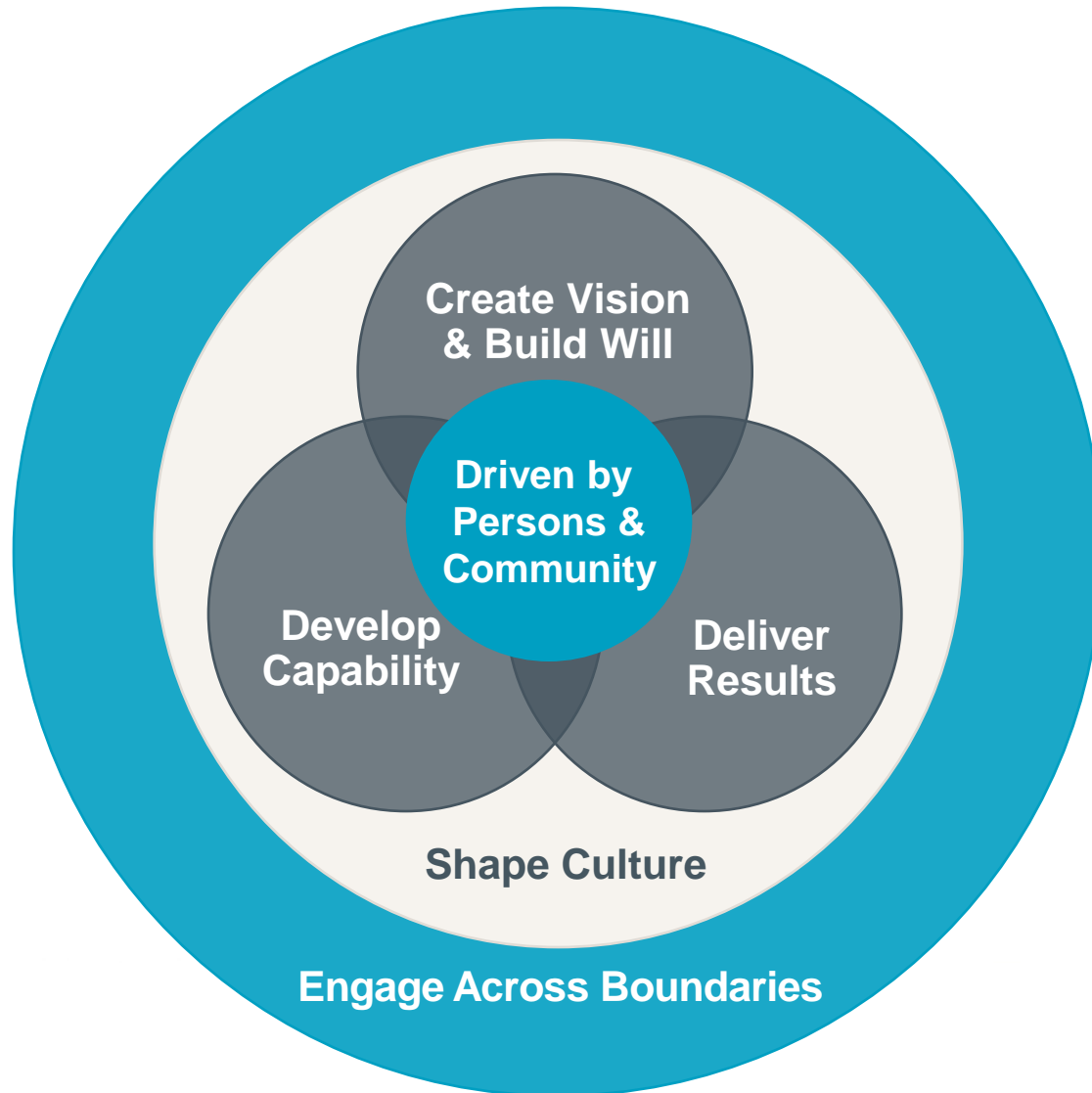
Creating the Vision & Building will

- Is there alarm in the system or region about a particular issue (cost, access, quality, big social problem, economy, etc.)?
- Who is alarmed and why?
- Is the alarm broad based?
- Or, is there massive indifference, resignation or naiveté?

Ideas

- An identified population
- A chosen portfolio of projects reflect ideas for your population

Deliver Results

- Creation or refinement of a business model that can support the Triple Aim for at least part of the population that they care for
- Willingness to allocate sufficient resources to this work
- Participation in portfolio development

Prerequisites of Governance
When Working in a Region or Community

- Understanding the stakeholders
- History of the region regarding health system reform
- Familiarity with dynamics of health system related politics
- Knowledge of community leadership
- Assessment of strength and weaknesses of governance structure(s) of existing organization(s) (if any)

Some Governance Observations

- Rely on **existing governance structures** within your organization or community, and if not, understand you'll **need time to build infrastructure**

- The pursuit of ***outside*** grant money may be more of a distraction than a help. Internal organization or community based funding for this work that has the potential to be sustained would be better.

- It's in the **telling of "war stories" that builds the will and confidence across sectors**, not always in "best practice"

- **Honor your partners but don't seek consensus**: If a region waits for all stakeholders (esp. health systems) to cooperate they will never start. "Leave the door open."

- What can you do to make them **robust and sustainable**?
  - Policy change: Oregon CCO, Vermont Blueprint, NC Medicaid
  - Connection with ongoing structure in the community: local government, business community
  - ?

Practical tips

- Discuss and observe who is at the "table", who is not and why? Who needs to be there? And who is optional for this work?
  - "Decisions are made by those who show up"
- Who is committed to making it work? Who is neutral? Who is skeptical? Who wants it to fail?
- Is there a commitment to transparent regional measurement for all aspect of the Triple Aim?

Getting Projects Done

- You need two levels for your governance structure:
  1. Overall steering committee of "the good and the great" - could be your organization or coalition's senior leadership team
  2. A working committee of folks who understand project management and have people skills to work across the organization or community

- You need to think ahead about resources
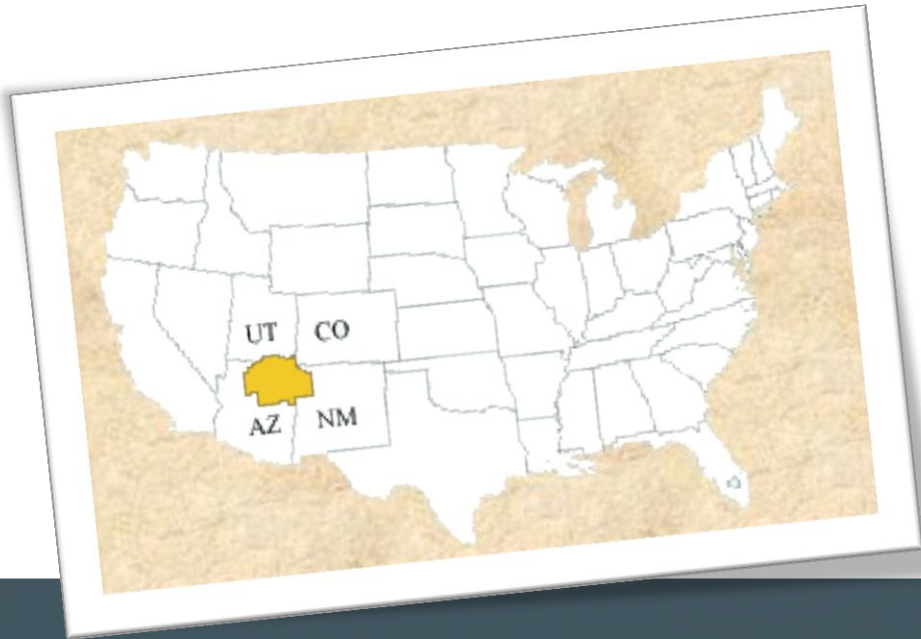
- And how will you make decisions

CHINLE SERVICE UNIT
NAVAJO AREA INDIAN HEALTH SYSTEM

Chinle Service Unit (CSU)
Navajo Area Indian Health Service

- A federal agency within DHHS
- Provides comprehensive, culturally acceptable personal and public health services to Native Americans

Chinle Comprehensive Health Care Facility

Pinon Health Center


Tsaile Health Center

Our Population

- **35,000 Native Americans** in the central region of the Navajo Nation

- Indian Health Service beneficiaries living within 31 central Navajo Nation communities that have received care at a CSU facility at least once in the past 3 years

Improvement milestones

- Early involvement in IHI – Leading Accelerated Change – 1997

- Culturally based improvement model - 2005

- Improving Patient Care (IPC) - 2007

- Balanced Scorecard – 2010
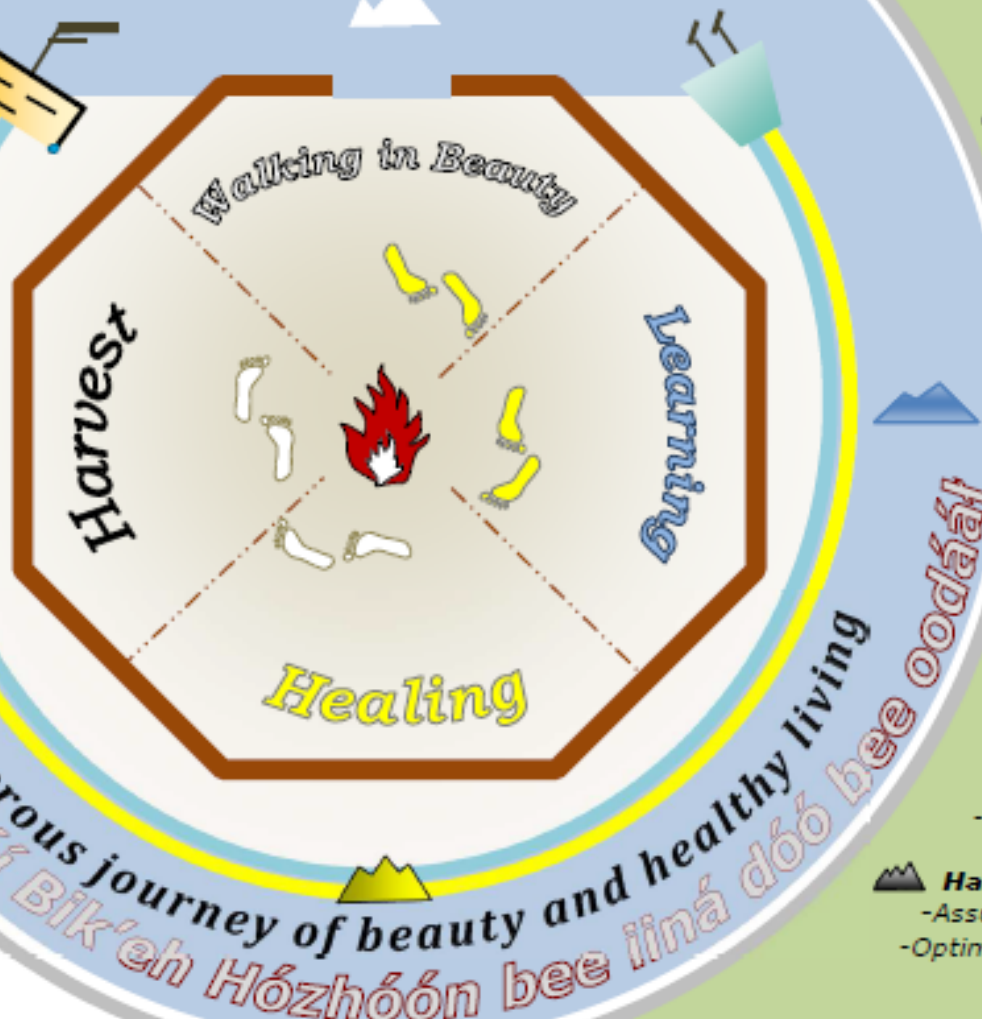
- Joined Triple Aim in 2012
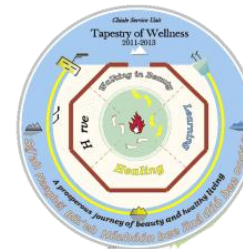
Changing landscape

- State Medicaid cutbacks
- ACA and Medicaid expansion
- Self governance of health care services
- Aging baby boomers
- Congressional budget approval

Chinle Service Unit
Tapestry of Wellness
2014 - 2016

Walking in Beauty
Harvest
Learning
Healing

Są́'ah Naaghéí Bik'éh Hózhóón bee iiná dóó bee oodą́ą́ł
A prosperous journey of beauty and healthy living

Chinle Service Unit

Są́'ah Naaghéí Bik'éh Hózhóón bee iiná dóó bee oodą́ą́ł.
A prosperous journey of beauty and healthy living

Mission

As'ah na'adá dóó asáh oodą́ą́ł biniiyé ahił nideilnishgo binahjį' nihi Dine'é bits'íis hadaait'é náádleeł.
To provide accessible, safe, high quality, community guided public health services.

Walking in Beauty: Customer Perspective
  -Wellness through self-reliance
  -Exceptional customer experience

Learning: Workforce Perspective
  -Grow our own
  -Promote effective communication
  -Ensure quality work-life
  -Assure competent, customer focused staff

Healing: Internal Process Perspective
  -Build stewardship
  -Support services improvement
  -Building partnerships
  -Building relationships with patients and families
  -Assure interdepartmental collaboration
  -Supporting Iiná (healthy living)
  -Improve health outcomes
  -Optimize health services

Harvest: Financial Perspective
  -Assure Financial Accountability
  -Optimize Revenue Generation

02.2014

Certified by the Diné Medicine Man Association, Inc. 7/20/2011

Sa'ah naagháí Bik'eh Hózhóón bee iiná dóó bee oodááł.
A prosperous journey of beauty and healthy living.
CSU Tapestry of Wellness Vision

The Bluebird Aim:

The Bluebirds aim to effectively guide, promote, support and communicate improvement work throughout Chinle Service Unit using the Tapestry of Wellness.

How Do The Bluebirds Guide?

Modeling and Coaching Improvement Practices

Developing Partnerships

Building the Capacity of Improvement Teams

Communicating Improvement Accomplishments

Challenges

- Competing priorities
- Extra work
- Proliferation of measures
- Limited capacity, skills and experience
- Leadership turnover

Meeting the challenges

- Aligning measures
- Aligning projects
- Sponsoring teams
- Building capacity
  - Internal collaborative
  - IHI Open School
- Communication
  - Internal collaborative
  - Newsletter for staff and community
  - CEO emails

QUESTIONS?

Governance & Leadership Worksheet to Facilitate At-Home Leadership Discussions

- Identify the burning platform within your organization or community.
- Explore and identify the major stakeholders that can make or break your Triple Aim efforts.
- Describe your current leadership accountability structures and meeting tempo.
- Devise a plan for articulating and communicating your statement of purpose.