Florida State University College of Medicine
Internal Medicine Residency Program at
Sarasota Memorial Hospital

Utilizing Mega Planning Theory in the Development of a New Graduate Medical Education Program: A CLER Vision

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Disclosures

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Professor of Clinical Sciences & Research, Florida State University Internal Medicine Residency Program at Sarasota Memorial Hospital

Karen Hamad, MD
Associate Program Director and Immediate Past Chief of Staff, Sarasota Memorial Hospital
Objectives

1. Identify opportunities for GME Program(s) to add value to society in their community

2. Apply principles of Kaufman’s Mega Planning and Organizational Elements Model in the design of a new GME program
   a. Identify and incorporate key stakeholders in the strategic planning process
   b. Create program mission / vision / aims that align at the mega, macro, and micro levels
   c. Identify barriers and discuss possible solutions
Outline

✓ Introduction to FSU Model for Graduate Medical Education

✓ Description of Mega Planning Theory and Performance Model

✓ Application to the GME residency development

✓ Identification of stakeholders needed to accomplish defined goals and their potential contributions to the mega vision

✓ Defining performance metrics

✓ Identification of potential barriers and develop means to overcome them
FSU Model

✓ Service to the elderly, rural, minority, and underserved
Regional Medical School Campuses:
1: Daytona Beach
2: Fort Pierce
3: Orlando
4: Pensacola
5: Sarasota
6: Tallahassee

Rural training sites:
7: Immokalee
8: Marianna

Clinical training site:
9: Thomasville, Ga.

GME Programs:
Tallahassee Memorial HealthCare
Dermatology Associates of Tallahassee
Sarasota Memorial Health Care System
Lee Health
FSU’s Role in GME Expansion

Problem:
✓ Florida has the 3rd largest population (20 million)
  • 30/50 states in terms of active primary care physicians per 100,000 population
  • 41/50 states in the number of GME positions per 100,000 population
✓ Newly accredited Florida medical schools & increase in medical school graduates
✓ Need for more GME positions in the state

Solution:
✓ Partnership with clinical institutions & joint decision making
✓ Emphasis on: primary care, care for the underserved, rural, geriatric populations
How Does the FSU Model Work?

- Use of technology
- Synchronous orientation
- Graduate Medical Education Committee
- Close liaison with hospital leadership
Challenges of Our Model

- Oversight
- Multiple hospital partners—CLER may not always be CLEAR!
- Resident interaction
Are you planning to start a new GME program?
“Mega Thinking & Planning”

✓ Focus on strategic planning to help define and achieve organizational success

✓ How can we use our organization as a primary vehicle for adding value to society?

✓ If our GME program is the solution, what is the problem?
Alignment in Program Planning

Based on Organizational Elements Model; Kaufman, 2000
Organizational Alignment

FLORIDA STATE UNIVERSITY
COLLEGE OF MEDICINE
External Client & Societal Contributions (Mega)

Organizational Contributions (Macro)

Organizational Accomplishments and Contributions (Micro)

Activities, Programs, Processes, Interventions (Processes)

Resources (Human, Financial, Physical) (Inputs)

Mega Planning Steps

1. Ideal Vision, Indicators, and Targets
2. Current status with regards to ideal vision
3. Gap between desired and current state
4. Prioritize gaps based on costs and consequences
5. Mission objectives and functional objectives
6. Analyze and Implement Solutions

Kaufman R, Guerra-Lopez I; Needs Assessment for Organizational Success; 2013 ASTD Press
The Ideal Vision

“Belief and assumption that the primary purpose of every person and every organization is to create a better world for the Child of Tomorrow—The Ideal Vision”
The Ideal Vision

✓ Access and delivery of health care

✓ Disease prevention and wellness

✓ Population Health
Mega Planning Steps

1. Ideal Vision, Indicators, and Targets
2. Current status with regards to ideal vision
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Kaufman R, Guerra-Lopez I; *Needs Assessment for Organizational Success; 2013 ASTD Press*
### Current Status & Gap

Sarasota is the 6th richest county in Florida

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Sarasota</th>
<th>Newtown</th>
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</thead>
<tbody>
<tr>
<td><strong>Race/Ethnicity</strong></td>
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<tr>
<td>White alone</td>
<td>91%</td>
<td>55.2%</td>
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<tr>
<td>Black or AA alone</td>
<td>4.9%</td>
<td>37%</td>
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<tr>
<td>Hispanic</td>
<td>8.8%</td>
<td>15.7%</td>
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<tr>
<td><strong>Health</strong></td>
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<td>Without insurance &lt;65 yo</td>
<td>19.8%</td>
<td>28.5%</td>
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<tr>
<td>With disability, &lt; 65</td>
<td>9.0%</td>
<td>12.2%</td>
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<tr>
<td><strong>Income &amp; Poverty</strong></td>
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<tr>
<td>Per capita income 12 mos.</td>
<td>$33,300</td>
<td>$18,416</td>
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<tr>
<td>Median household income</td>
<td>$42,000</td>
<td>$24,497</td>
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<tr>
<td>Persons in Poverty</td>
<td>10.8%</td>
<td>33.5%</td>
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<tr>
<td>Access to Food</td>
<td>Plentiful</td>
<td>Food desert</td>
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</table>
Community of Newtown
Macro Level: SMH & FSU
Mission

To educate and develop exemplary physicians who practice patient-centered health care, discover and advance knowledge, and are responsive to community needs, especially through service to elder, rural, minority & underserved populations.

To provide health care services that excel in Caring, Quality and Innovation

To train residents that are outstanding, comprehensive board certified internists; able to provide excellent care to our patients, particularly the underserved and elderly populations.
MISSION
To provide health care services that excel in Caring, Quality and Innovation.

VISION
Our community will be served by the best health care system in America. SMHCS will be the best place to be a patient, the best place to work, and the best place to practice medicine.

VALUES
Caring & Compassion; Excellence Teamwork & Trust; Mutual Respect & Recognition; Accountable/Ethical Behavior

Strategic Road Map 2017

Geographic Reach
Population Health
Community Engagement

Destination Programs
Reputation

Patient-Centered Care
Innovation

Quality
Finance
Patient Experience

Areas of Focus
Newtown Internal Medicine Practice
Others

Areas of Focus
GME Program Launch
Others

Areas of Focus
Patient Safety Initiatives (higher reliability)
Others

Areas of Focus
Triple Aim Focus Synchronization
Others

Community
Programs
Patient
Outcomes
Alignment with ACGME & CLER

... The ACGME’s mission is to improve health care and population health by assessing and advancing the quality of resident physicians’ education through accreditation.

...The CLER Program focus areas

- Patient safety
- Health care quality (including health care disparities)
- Care transitions
- Supervision
- Fatigue management, mitigation, and duty hours
- Professionalism

www.acgme.org
**SMH: Safety Net Hospital**

<table>
<thead>
<tr>
<th>Mission Services &amp; Community Programs</th>
<th>Fiscal Year 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ Bad debts</td>
<td>$27.2 Million</td>
</tr>
<tr>
<td>✓ Traditional Charity Care</td>
<td>$15.5 Million</td>
</tr>
<tr>
<td>✓ Medicare Losses</td>
<td>$33.8 Million</td>
</tr>
<tr>
<td>✓ Medicaid Losses</td>
<td>$19.1 Million</td>
</tr>
<tr>
<td>✓ Emergency Care Center call &amp; subsidy</td>
<td>$ 9.4 Million</td>
</tr>
<tr>
<td>✓ Anesthesiologist, Hospitalist &amp; Psychiatric coverage</td>
<td>$ 6.5 Million</td>
</tr>
<tr>
<td>✓ Clinics and Community programs</td>
<td>$ 3.4 Million</td>
</tr>
<tr>
<td>✓ Indigent care fund</td>
<td>$ 8.6 Million</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$123.5 Million</strong></td>
</tr>
</tbody>
</table>
SMH Outpatient Visits: Charity, Indigent, Self-Pay

<table>
<thead>
<tr>
<th>Outpatient Patient Type Distribution</th>
<th>Facility</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Outpatient Cases</td>
<td>34,300</td>
<td></td>
</tr>
<tr>
<td>ED Cases</td>
<td>17,444</td>
<td>50.86%</td>
</tr>
<tr>
<td>Other Outpatient Cases</td>
<td>14,352</td>
<td>41.84%</td>
</tr>
<tr>
<td>Recurring/Series Cases</td>
<td>1,310</td>
<td>3.82%</td>
</tr>
<tr>
<td>Observation Cases</td>
<td>706</td>
<td>2.06%</td>
</tr>
<tr>
<td>Same Day Surgery Cases</td>
<td>488</td>
<td>1.42%</td>
</tr>
</tbody>
</table>
SMH ED Returns: Charity, Indigent & Self-Pay

Outpatient View
Sarasota Memorial Hospital
8/1/2014 to 7/31/2015

ED Returns to ED

- within 1 Day: 339 (1.94%)
- within 3 Days: 830 (4.76%)
- within 7 Days: 1,446 (8.29%)
- within 30 Days: 3,084 (17.68%)

8.29% of ED patients returned to the ED within 7 days.
Rationale for Internal Medicine Residency Continuity Clinic in Newtown

**Problem:**
52% of population is below poverty level*

**Solution:**
✓ Provide access to internal medicine clinic to adults in the community in which they live

**Metrics:**
✓ Decrease use of Emergency Department as source of primary care
✓ Provide follow-up and continuity care to discharged patients
✓ Decrease hospital readmissions for the underinsured

The Impact Evaluation Process

1. Identify Stakeholders and Expectations
2. Develop Conceptual Model of Program
3. Determine Key Decisions and Develop Evaluation Questions
5. Data Collection/Data Sources
6. Data Analysis
7. Results
8. Add societal value

Kaufman R, Guerra-Lopez 2013
### Fourteen Steps to Useful Results

1. **Decide to Create a Better Future**
2. **Define partners and stakeholders**
3. **Obtain commitment**
4. **Commit to a Mega (societal focus)**
5. **Identify needs at Mega, Macro, and Micro**
6. **Prioritize and select needs**
7. **Determine change requirements**
8. **Determine likely causes of needs**
9. **Identify alternative methods-means**
10. **Select appropriate methods-means**
11. **Make, buy, or obtain methods-means**
12. **Implement and manage**
13. **Determine effectiveness and efficiency**
14. **Revise and improve as required**

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*Kaufman & Stone; 1982*
*Kaufman, Oakley –Browne, Watkins, Leigh; 2003*
Identifying Key Stakeholders

**Organizations:**
- SMH Leadership (C-suite)
- FSU/SMH Residency Program
- SMH Pharmacy Program
- FSU GMEC

**Newtown & Other Groups:**
- Mayor Willie Shaw
- Newtown Redevelopment Office
- Community & Church Leaders
- Booker High School Principal
- Legal Aid Manasota
- Good Samaritan Pharmacy
- Glasser Shoenbaum Human Services Center
- SCOPE
- Food Pantry
<table>
<thead>
<tr>
<th>Stakeholders Identified</th>
<th>Contributions/ Role</th>
<th>Meetings</th>
</tr>
</thead>
<tbody>
<tr>
<td>SMH Leadership * (Board, C-Suite)</td>
<td>Commitment to build state of the art facility and provide staff to operate</td>
<td>Monthly</td>
</tr>
<tr>
<td>FSU/SMH IM Residency Program</td>
<td>Develop, design, implement vision, provide resident and faculty physicians; participate in clinic design</td>
<td>Weekly</td>
</tr>
<tr>
<td>SMH Architectural Group/IT Group*</td>
<td>Clinic plan design; EMR; others</td>
<td>Monthly, Weekly</td>
</tr>
<tr>
<td>Mayor of Sarasota *</td>
<td>Relationship building with community, strategy, permits</td>
<td>4</td>
</tr>
<tr>
<td>Newtown Redevelopment Office *</td>
<td>Relationship building with community</td>
<td>4</td>
</tr>
<tr>
<td>Community Physician Leaders</td>
<td>Liaison with community</td>
<td>4</td>
</tr>
<tr>
<td>Community Leaders</td>
<td>Liaison with patients</td>
<td>4</td>
</tr>
<tr>
<td>Legal Aid Manasota</td>
<td>Provide on-site free legal counsel for issues impacting health</td>
<td>2</td>
</tr>
<tr>
<td>SMH Pharmacy Residency Program</td>
<td>Provide on site pharmacist and resident</td>
<td>3</td>
</tr>
<tr>
<td>Booker High/Middle Schools</td>
<td>Shadowing opportunities for High School Students, STEM funding; artwork for practice</td>
<td>4</td>
</tr>
<tr>
<td>Glasser Schoenbaum Human Services Center</td>
<td>Provide additional resources (behavioral care, counseling, literacy, sex counseling, others); immersion experience for IM Residents</td>
<td>1</td>
</tr>
<tr>
<td>All-Faiths Foodbank *</td>
<td>Provide clients with healthier food options</td>
<td>1</td>
</tr>
<tr>
<td>SCOPE</td>
<td>Provide data on human services outcomes and indicators</td>
<td>1</td>
</tr>
<tr>
<td>Community Events *</td>
<td>Christmas parties, MLK Ceremony, others</td>
<td>6</td>
</tr>
<tr>
<td>Philanthropists *</td>
<td>Provide sources of funding for initiatives</td>
<td>3</td>
</tr>
</tbody>
</table>

* Attended by selected representatives of selected C-suite Representatives
The Glasser/Schoenbaum Human Services Center

✓ 18 non-profit health and human services agencies housed in 1 location

✓ Help low income and at risk adults, children and families achieve and maintain productive lives as contributing members of the community

Services for Adults & Seniors:
✓ Behavioral Healthcare
✓ Epilepsy Services
✓ Legal Services
✓ Family and Children’s Services
✓ Healthy Start
✓ Literacy Council
✓ More Too Life
✓ Salvation Army
✓ Partnership to End Homelessness
Newtown Community Involvement: Booker High School

✓ Promotion of Health
✓ Promotion of STEM Programs
✓ Career development through shadowing:
  Healthcare (Physicians, Pharmacists, Nurses)
  Lawyers
  Social Workers
✓ Students to provide artwork to display in the clinic
Micro Level: Program, Residents, Faculty, Patients

Newtown Immersion Program for Internal Medicine Residents

Community events
- “Meet the Residents”
- MLK Jr. Day Festivities
- “Tree Lighting Ceremony”

Experiential learning
- Food bank
- Home visits
- Tour Glasser-Schoenbaum Human Services Center
- Structured didactics (ie- health care disparities)
- Participation in High school mentoring program
Why Measurement?

What Doesn’t Get Measured Doesn’t Get Done....

Or at least it doesn’t get done very well

If you’re not consistently measuring that which should be measured... you’re probably not managing that which should be managed....

Guerra-López (2009)
Measuring Performance

Accomplishments vs. Predetermined Standards

Feedback

Data-driven decisions

H. Kromrei, PhD; based on works by Kaufman, Rumler, Guerra-Lopez
The Ideal Vision

✓ Access and delivery of health care

✓ Disease prevention and wellness

✓ Population Health
### Measurable Indicators

<table>
<thead>
<tr>
<th>Ideal Vision (Mega)</th>
<th>Ideal Targets</th>
<th>Performance Indicator</th>
</tr>
</thead>
<tbody>
<tr>
<td>All adult patients will have access to primary care provider</td>
<td>All Newtown adults will be provided internal medicine care in their community</td>
<td># of adult patients seen in clinic compared to adult patient population</td>
</tr>
<tr>
<td>Decrease adult ED utilization for non emergent visits</td>
<td>All adults will utilize continuity clinic for non emergent conditions</td>
<td># of adult patients seen in ED from Newtown</td>
</tr>
<tr>
<td>Decrease hospital readmissions by ensuring adequate follow-up</td>
<td>All discharged patients will have a physician visit and/or phone call within 7 days of discharge</td>
<td># discharged patients that were seen or contacted within 7 days</td>
</tr>
<tr>
<td></td>
<td></td>
<td># discharged patients that were not seen or contacted within 7 days</td>
</tr>
</tbody>
</table>
## Measurable Indicators

<table>
<thead>
<tr>
<th>Ideal Vision</th>
<th>Ideal Targets</th>
<th>Performance Indicator</th>
</tr>
</thead>
<tbody>
<tr>
<td>All patients will have access, availability and affordability of healthy food options</td>
<td>All Newtown families will have access, availability, and affordability of healthy food options</td>
<td>Total number reporting access points that offer healthy foods (farmer’s market, grocery stores)</td>
</tr>
</tbody>
</table>

# of existing access points
# referrals to food bank
# referrals to nutrition/cooking classes
# of individuals eligible for government food assistance
## Measurable Indicators

<table>
<thead>
<tr>
<th>Ideal Vision</th>
<th>Ideal Targets</th>
<th>Performance Indicator</th>
</tr>
</thead>
</table>
| All adults with nutritional based comorbidities will receive appropriate counseling and interventions | All Newtown adult patients will have a normal BMI  
All diabetics will be adequately controlled | % of patients with normal BMI  
% of diabetics controlled  
Prevalence of obesity  
Prevalence of diabetes  
# of referrals to nutritionist  
# of prescriptions for exercise |
# Measurable Indicators

<table>
<thead>
<tr>
<th>Ideal Vision (Mega)</th>
<th>Ideal Targets</th>
<th>Performance Indicator</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients are able to obtain and afford medications</td>
<td>All Newtown patients will have access to prescribed medications</td>
<td># of patients unable to afford medications</td>
</tr>
<tr>
<td></td>
<td></td>
<td># of Referrals to Good Samaritan Pharmacy</td>
</tr>
<tr>
<td>Patients will not experience health-harming legal</td>
<td>All Newtown adult patients will have access to free medical-legal counsel to</td>
<td># of Referrals to Legal Aid Manasota</td>
</tr>
<tr>
<td>issues.</td>
<td>address health harming legal needs.</td>
<td># of Patients with increased disability that qualify for additional benefits</td>
</tr>
</tbody>
</table>
## Measurable Indicators

<table>
<thead>
<tr>
<th>Ideal Vision (Mega)</th>
<th>Ideal Targets</th>
<th>Performance Indicator</th>
</tr>
</thead>
<tbody>
<tr>
<td>All adults will have age and gender appropriate evidence-based prevention interventions</td>
<td>100% compliance with prevention interventions</td>
<td>Rate and adequacy of prevention interventions -immunizations -hyperlipidemia -colorectal cancer screening -mammography -others</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Referrals to SMH Community Clinic</td>
</tr>
</tbody>
</table>
Mega Planning Steps

1. Ideal Vision, Indicators, and Targets
2. Current status with regards to ideal vision
3. Gap between desired and current state
4. Prioritize gaps based on costs and consequences
5. Mission objectives and functional objectives
6. Analyze and Implement Solutions

Kaufman R, Guerra-Lopez I; Needs Assessment for Organizational Success; 2013 ASTD Press
Beginning Mega Planning Process

The table below may assist you in getting started at your institution.

<table>
<thead>
<tr>
<th>Mega Level Vision</th>
<th>Current state</th>
<th>Desired State</th>
<th>Stakeholders</th>
<th>Contribution to Mega</th>
<th>Performance Metrics</th>
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Please refer to handout.
Take Home Points

1. If your GME program is the solution, what is the problem?

2. What is the “Ideal Vision” for your community as and how can your GME program contribute to that vision?

3. Ensure alignment of mission & vision at mega, macro and micro levels.

4. Identify, engage, and obtain commitment of stakeholders.  
   *Inclusive of the C-Suite.*

5. Identify performance metrics and reassess.  How do these metrics impact the mega vision and our stakeholders?
Questions?

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Joan.Meek@med.fsu.edu