

Key Factors Worksheet

P.1a Organizational Environment

Organizational Description Pilot program integrating 3 service offerings: cemeteries, benefits, health care into one operation for Veterans/families. Started as a pilot in 2010 with integrated services to provide more comprehensive, effective, efficient care to Veterans in geo. areas w/o sufficient population for separate service. Higher than normal Veteran population (~8,500), higher than normal needs (8% of local population served in military, 50% enrolled, 35% treated annually, 32.5% below poverty level).

Products and Service Offerings (1) Health care services: complexity 2 inpatient hospital, surgery, ICU, emergency care, rehab, imaging, clinics telemedicine, telephone crisis line, helicopter transport service, other; (2) Burial/memorial services; (3) Benefits: insurance, career services, home loans, pension services.

Mission, Vision, and Values Mission: To fulfill President Lincoln's promise "to care for him who shall have borne the battle, and for his widow, and his orphan" by serving and honoring the men and women who are American's Veterans. Vision: A transformed and integrated facility that adapts to new realities, leverages new technologies, and serves a changing population of Veterans with the highest quality of care and support services while controlling costs. Values: I-CARE, Integrity, Commitment, Advocacy, Respect, Excellence.

Core Competencies (CC1) Veteran-centric care, including & especially treatment of physical, mental, and/or emotional war-related injuries; (CC2) Holistic, comprehensive, integrated system approach to provide Veterans, their families, & survivors with health care, benefits, & a final resting place; (CC3) Baldrige-based leadership & management systems. [Figure P.1-2]

Workforce Profile 291 employees: 225 hospital, 10 cemeteries, 29 benefits, 27 in 4 clinics. Also nursing students, 200 volunteers (approximately 40% of workforce). [Figure P.1-3]

Workforce Segmentation (1) 67% female, 33% male; (2) 70% black, 19% white, 1% Asian, 10% other (VI general 74% black, 16% white, 2% Asian, 8% other; (3) Veterans 60%, Non-Veterans 40%; (4) ~80% represented by collective bargaining unit.

Workforce Engagement Key Drivers Work environment; making a difference for Veterans. Other: teamwork; healthy, safe, secure work environment. Leadership System provides fair/equitable treatment, ethical service, professional growth opportunities.

Assets and Delivery Mechanisms Facilities: 25-bed, full service hospital—~20% of 100 acre-campus; 3 clinics; benefits office in hospital; cemetery—50% of campus (18,000 unfilled gravesites, 10,000 columbaria niches, 2,500 in-ground garden niches); secure web connections linking three functions; webcams; parent's computer systems; software.

Regulatory Requirements Special parent requirements for applicant as pilot business model. Federal regulations for cemeteries, benefits admin., insurance industry, health care. OSHA, NRC, AHCG, CARF, CAP, AABB, FDA, OIG, EPA for service components.

P.1b Organizational Relationships

Organizational Structure Matrix structure: single Director reports equally to leaders of network office for cemetery activities, area office for benefits services, parent region for veterans health. SLT: Director; Deputy Director; Associate Director for Health; Associate Director for Memorial Affairs & Facilities; Associate Director for Benefits; Chiefs of Performance Excellence, HR, IT.

Key Customers Veterans, their families and survivors; 3,000 Veterans enrolled for services, 5,000 Veterans receive insurance benefits; annual volumes: from 150 (burial) to 7,500 (outpatient).

Key Customer Requirements Veterans—timely & easy access, urgent/emergent care, interregional coordination, telehealth, electronic benefits access, electronic cemetery access; Veteran families & survivors—timely services/care/support, interregional coordination.

Key Market Segments Aligned with main offerings (health care, burial/memorial, benefits) & three islands; Also non-VI-resident Veterans seeking services.

Other Key Stakeholders Workforce, stakeholder, partners, suppliers, local communities impacted by Veteran homelessness, parent system.

Other Stakeholder Requirements Attractive facilities, no homeless Veterans, healthy/safe/secure environment, supportive environment, feedback on performance, desired scheduling, on-time payments, clear/frequent communications, tangible success measures. [Figure P.1.5]

Suppliers, Partners, and Collaborators Vaults, Granite Works, AuditAccountAware, local university, Douden Medical, MedsPharmRUs, FEMA, local hospitals/social service agencies (including competitor hospitals), Air Tours, VSOs, VA OIT [Figure P.1-6]. Key suppliers have over 70% of book of business.

Supply-Chain Requirements (1) applicant: accuracy, on-time delivery; (2) suppliers: prompt payment, fair pricing; (3) two-way: open communication channels for requirements/expectations, performance, opportunities for improvement.

Key Communities local service area; Veterans; focus on intersection of two groups (eligible Veterans who reside in or visit local service area).

P.2a Competitive Environment

Competitors Two general hospitals, large local insurance company, other local cemetery, other local insurance providers. Relationship collaborative due to high percentage of Veterans who can't pay. Other cemeteries in local area, but applicant services unique. Benefits services unique.

Competitive Position More health insurance & health care choices for Veterans due to ACA Medicaid expansion & Veteran's Choice Cards; may lead to increased competition with local hospitals & insurance providers. 2 larger hospitals have outpatient services & services not available from applicant via fee-basis provisions of "Non-VA Care." Other cemeteries, but applicant's have no cost to Veteran's family. Local unemployment rates: 13.5% vs. 6.1% continental US; poverty level: 32.5% vs. 15%; homelessness: 0.5% vs. 0.2%.

Competitive Changes Health system: ACA, Veteran's Choice Cards may increase Veterans' ability to choose other providers. Few changes for benefits and cemetery service lines.

Comparative and Competitor Data (Figure P.2-1) Challenges: timely comparative external data/information, cost for trade organization data. Internal sources: Cemetery Summary Report, Cemetery Performance Reports, Benefits Performance Summary, Health Performance Summary, Health Performance Reports. External sources: ACSI, HEDIS, CMS core measures, HCAHPS, IMPress, OSHA, AES.

Contracted Services Due to facility sizes, applicant pays under fee-basis provision for "Non-VA Care" program.

P.2b Strategic Context

Strategic Advantages and Strategic Challenges (SA1) beautiful campus, adequate space; (SA2) support from service orgs.; (SA3) parent's technology/infrastructure resources; (SA4) new infrastructure/technology; (SA5) community support; (SA6) alignment with parent plan; (SA7) many Veteran employees/volunteers; (SA8) engaged employees/volunteers. [Figure P.2-2] (SC1) increasing complexity of benefits & health care management, (SC2) more options for health care providers available to Veterans, (SC3) integrated system in a complex government agency, (SC4) remote location making procurement difficult, (SC5) local economic conditions, (SC6) few external training programs. [Figure P.2-2]

Strategic Opportunities (SOpp1) identify/enroll all eligible Veterans, particular emphasis on homeless; (SOpp2) anticipated increase in local Veteran population as DoD downsizes.

Strategic Objectives world-class: (SOBJ 1) access, (SOBJ 2) quality, (SOBJ 3) safety, (SOBJ 4) customer experience, (SOBJ 5) workforce engagement, (SOBJ 6) value. [Figure 2.1-5]

P.2c PERFORMANCE Improvement System

Performance Improvement System IDEALS (Figure P.2-3). Promoted to workforce as "simply a way of life." Includes tools from Lean, theory of constraints, Six Sigma, appreciative inquiry, other improvement methodologies. Deployed w/PIT Crews. Also 6-Ps of Leadership; 6-E Leadership Tool.