

Office of Health Care Access Strategic Plan

April 2009

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Section 1 - Agency Description/Planning Process

Introduction

The leadership and staff of the Office of Health Care Access have engaged in strategic planning in order to reevaluate organizational priorities and realign resources to ensure the accomplishment of identified critical objectives. The strategic plan described in this document is endorsed by the senior leadership of the agency.

Agency Description

Connecticut legislation enacted in 1994 and 1995 created the Office of Health Care Access (OHCA) as the successor agency to the Commission on Hospitals and Health Care (CHHC). OHCA oversees the state's health care delivery system to ensure that access to affordable, quality health care is available to the citizens of the state. The agency has three major functions: (1) administration of the Certificate of Need (CON) program, (2) hospital financial review and reporting; and (3) health care data collection, analysis and reporting.

Through administration of the CON program for hospitals, surgical facilities and other health care facilities, OHCA ensures service accessibility for the state's citizens while limiting duplication or excess capacity of services. Certificate of Need (CON) authorization is required when a health care facility proposes a medical equipment purchase, introduction of an additional functional or service, a reduction or termination in services, or changes in ownership or control

OHCA collects, verifies, analyzes and reports on a wide range of hospital financial data for use by health care policy decision-makers. Information includes hospital revenues and expenses, uncompensated care cost, volumes and financial solvency measures. These data are also used to perform the calculation required by the federal government to participate in the Disproportionate Share Hospital (DSH) program.

OHCA's data collection, analysis and public release of health care utilization information allows the agency to function as an information resource to a variety of organizations and individuals. OHCA regularly provides legislators, health care policy makers, the health care industry and members of the general public with detailed analyses of health care trends and topics relevant to public policy and public interest.

The agency currently has two major divisions that carry out its core responsibilities: (1) Certification, Financial Analysis and Reporting, consisting of the Financial Review, Certificate of Need and Compliance units and (2) Research and Planning, responsible for research, planning and information technology (IT) functions. The agency currently has 26 employees, four of which are part time.

In addition to its day-to-day work, the agency has undertaken a number of critical projects related to Connecticut's health care delivery system and health care policy. In

2000, OHCA conducted a mandated study to determine the public health effects of nurse-patient ratios at the state's acute care hospitals, in 2001 the agency concluded a 15-month mandated study of the fiscal health of the state's hospitals, and from 1997 to 2006, OHCA was the recipient of \$2.15 million in private and federal grants funding the agency's study of the uninsured and identification of policy options to increase access to affordable health care coverage in the state. In 2005, OHCA conducted a mandated evaluation of hospital inpatient behavioral health bed capacity for children and recommended an increase in the number of pediatric beds in mental health region five. In 2007, OHCA, in conjunction with the Office of Policy and Management (OPM), co-chaired the Hospital System Strategic Task Force initiated by the Governor, which provided recommendations aimed at stabilizing the state's health care delivery system with respect to workforce challenges, access limitations and fundamental financial structural issues. Many of the recommendations developed by the task force were considered by OHCA during the strategic planning process.

Strategic Planning Process

At the request of Commissioner Cristine Vogel, OHCA began its strategic planning process in June 2008 in an effort to reevaluate the current role of the agency, prioritize deployment of resources and establish overall direction and agency goals for the future. A strategic planning work group (SPG) consisting of OHCA's Chief of Staff, two senior managers and four supervisory staff was charged with developing the framework for the plan and facilitating the planning process.

The process involved three major phases:

Phase 1: Establishing Organizational Direction

OHCA's strategic planning approach included an organizational review of its current mission statement and development of a 5-year vision statement and core agency values. The mission statement describes OHCA's purpose, the vision statement details where OHCA is headed in the next five years and the values are intended to guide the agency in its day-to-day activities. OHCA's mission, vision and values were drafted by the SPG and then presented to all agency staff for consideration and comments. The mission, vision and values statements are presented in **Section 2: Organizational Direction (Mission, Vision, Values)**

Phase 2: Internal and External Environmental Assessment

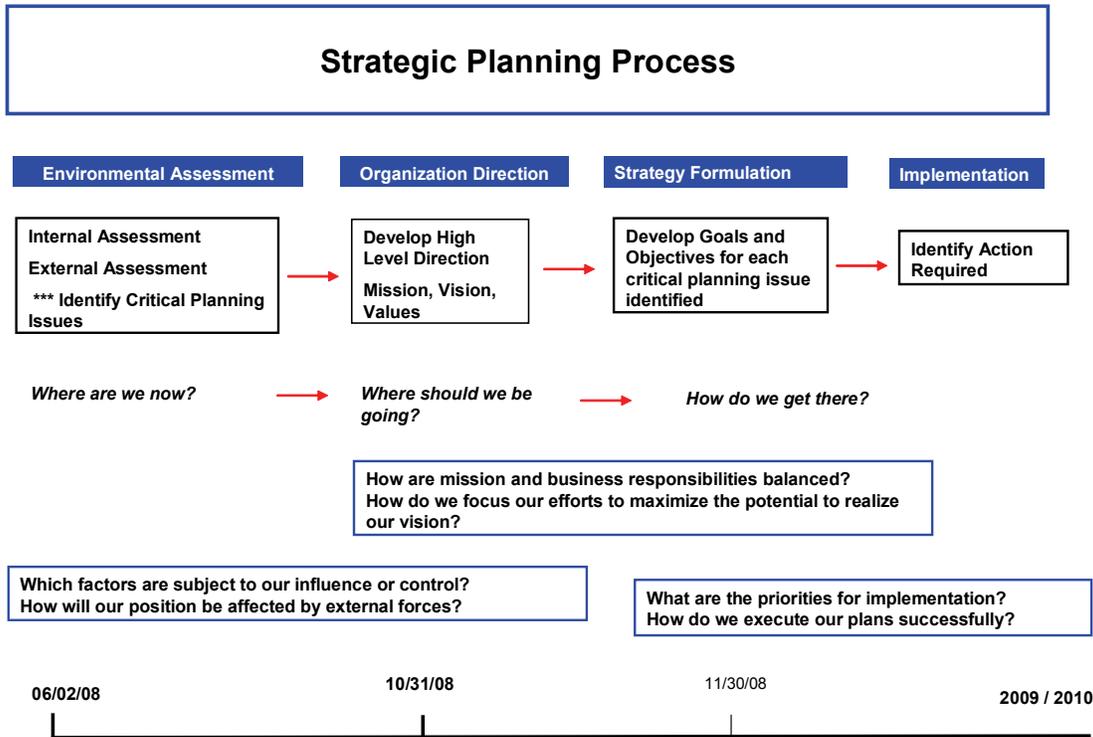
In order to ascertain the sustainability of strategic decisions, address the interrelationships of OHCA with certain external stakeholders and identify the presence of internal barriers to success, the agency conducted a comprehensive environmental assessment. The external environmental assessment included a series of interviews with agency stakeholders (e.g., hospital leadership, professional medical/health care organization officials and other state agency representatives), and an analysis of regulatory trends in neighboring states. The internal environmental assessment included an employee

satisfaction survey, a SWOT (strengths, weaknesses, opportunities, threats) analysis and a thorough review of all statutory mandates.

Meetings with agency staff were held to elicit feedback at critical points in the strategic planning process. A complete description of this phase follows in **Section 3: Environmental Assessment**.

Phase 3: Identifying strategic themes and operational goals and objectives

At the conclusion of each strategic planning segment, the SPG analyzed the information and feedback obtained to determine emerging strategic themes and critical planning goals and objectives. The strategic themes and critical planning goals identified are presented in **Section 4: Strategic Themes /Operational Goals**.



Section 2 - Organizational Direction – Mission, Vision and Values

The SPG, with feedback from the entire agency, crafted the mission, vision and values statements for the Office of Health Care Access. These statements, presented below, identify the future direction of the agency, providing the context or framework for the development of strategic themes.

Mission Statement

The mission of the Office of Health Care Access is to ensure that the citizens of Connecticut have access to a quality health care delivery system

Vision Statement

Planning tomorrow's health care system today.

Office of HealthCare Access Core Values

- ***Trust*** – Create and promote a culture and environment of mutual trust that fosters confidence in the ability to perform
- ***Respect*** – Treat fellow employees and customers of the agency as we wish to be treated
- ***Excellence*** – Pursue only the highest standards of quality in all that we do
- ***Integrity*** – Demonstrate open, honest and ethical behavior in all interactions
- ***Service*** – Use the resources entrusted to us wisely and efficiently as we serve the citizens of the state
- ***Teamwork*** – Work collaboratively and cooperatively together for the greater good
- ***Innovation*** – Develop new ideas and methods to continuously provide services efficiently and effectively
- ***Accountability*** – Accept responsibility for our actions as we are accountable to the citizens of the state, the executive branch and legislature, and to each other
- ***Empowerment*** – Strengthen individuals' knowledge, skills and confidence in their own capacities as they relate to the agency's mission

Section 3 -Environmental Assessment

In order to ascertain the sustainability of strategic decisions, address the interrelationships of OHCA with external stakeholders and identify the presence of internal barriers to success, the agency conducted a comprehensive environmental assessment.

The internal environmental assessment included an employee satisfaction survey, a SWOT (strengths, weaknesses, opportunities, threats) analysis and a thorough review of all statutory mandates. The external environmental assessment included a series of interviews with external agency stakeholders (e.g., hospital leadership, professional medical/health care organization officials and state agency representatives), and an analysis of regulatory trends in other states.

A summary of significant findings from each segment of the environmental assessment is presented below.

Internal Environmental Assessment

In September 2008, OHCA conducted a voluntary employee satisfaction survey to assess the “*climate*” within the agency, employee readiness for change, and possible barriers to success for the strategic plan. The Department of Administrative Services administered the employee survey. A copy of the survey instrument and summarized results are available in **Appendix A**.

OHCA staff report high overall satisfaction with their work, indicating that they like the kind of work they do, feel that it makes good use of their skills and abilities, and they get a sense of personal accomplishment from their work.

Staff indicated that it is time to reevaluate how “success” is defined at OHCA and how the agency can best provide high quality and relevant services. In open-ended narrative responses, staff revealed a strong interest in evaluating how organizational priorities fit with OHCA’s mission, clarifying the mission, and more clearly defining the different aspects of OHCA’s statutory responsibility. Some of these responses appear to be driven by concerns about resource allocation within the agency, indicating that lack of prioritization among agency responsibilities is a challenge. Other comments by staff indicate they are eager to ensure OHCA is proactive and responsive to changes in the health care industry.

Overall, staff rated teamwork as one of the most positive aspects of the agency and indicated that staff cooperates effectively to accomplish organizational goals. Staff is also generally positive about employee involvement and feel supported by supervisors and managers. In their narrative responses to the employee survey, however, staff indicated that they would like to be further empowered to make decisions at the analyst level and that they feel that individual staff strengths could be better considered when allocating work. Staff members also agree that while teamwork is an agency strength, it could be

further leveraged by engaging in more cross-unit work and training to access and improve each other’s skill sets.

The employee satisfaction survey highlighted the need for organizational change, in particular, improved communications by and among all levels of the agency and for a commitment to process improvement in order to streamline work, establish priorities and effectively utilize resources.

Strengths, Opportunities, Weaknesses and Threats (SWOT)

The SWOT analysis conducted by the agency reveals that OHCA is an agency with solid core strengths that can be leveraged in order to build and chart a future direction for the agency. Among the key strengths is the skilled and versatile staff, the ability to respond timely to changing demands, data collection and analysis, and broad statutory mandates. The agency is challenged by the current organizational structure which encourages a “silo” orientation and less effective resource utilization. The limited opportunity for professional growth and development is a staff “dissatisfier” and impacts the agency’s ability to attract and retain talent. In addition OHCA will be faced with significant budget constraints for the near future necessitating the re-prioritizing and streamlining of work processes. Opportunities exist for the agency to expand beyond its current focus on acute care services and begin to develop a template for statewide health care facilities and services planning.

OHCA SWOT Analysis

<p style="text-align: center;">STRENGTHS</p> <ul style="list-style-type: none"> ➤ Diverse, creative, experienced staff with broad knowledge base (skilled in policy, finance, statistics and analysis) ➤ Productive team environment ➤ Agency size allows staff to respond quickly and efficiently ➤ Positive relationships with industry and other state agencies ➤ Robust data sets including inpatient acute care utilization and hospital financial data ➤ Strong internal agency IT Infrastructure ➤ Broad statutory investigative powers 	<p style="text-align: center;">WEAKNESSES</p> <ul style="list-style-type: none"> ➤ Primary focus on acute care inpatient services ➤ Current organization structure impacts distribution of workload ➤ Reactive versus proactive in addressing industry trends ➤ Limited opportunities for professional growth ➤ Limited communication with industry regarding health care issues ➤ IT limitations include an aging building infrastructure and reliance on DOIT for email and print services
<p style="text-align: center;">OPPORTUNITIES</p> <ul style="list-style-type: none"> ➤ Expand focus to include outpatient services (beyond hospital industry) ➤ Strengthen and expand relationships with national data agencies and other state agencies ➤ Prioritize and streamline administration of Certificate of Need ➤ Reorganize agency to reflect future direction and balance workload ➤ Expand data collection to enhance information and provide additional information to consumers 	<p style="text-align: center;">THREATS</p> <ul style="list-style-type: none"> ➤ State’s budget constraints with respect to both financial and human resources ➤ Political and economic climate ➤ Conflicting priorities with trade industry associations ➤ Duplication of efforts among state agencies, competition for data ➤ Financial sustainability of the hospital industry ➤ Reduced availability of federal and private grant funding

Statutory Mandates

The SPG also reviewed the agency's statutes, identified the specific action(s) required by the mandate(s) and assessed their relevance to OHCA's mission and vision statements. The team then suggested revisions to or improvements. As a result of this review, the SPG recommended that in order to re-prioritize work load and realign resources, OHCA statutes and related regulations should be revised to reflect the future direction of the agency. The group recommended that the agency develop a comprehensive legislative package to advance the agency's objectives.

External Environmental Assessment

Regulatory Environment

Overall, the trend across the country is for less regulation regarding Certificate of Need (CON) administration. The Community Health Planning and Policy Development Section of the American Health Planning Association publishes an annual "CON Matrix" (officially called the *Relative Scope and Review Thresholds: CON Regulated Services by State*) to provide a quick relative overview of CON regulation across America. Based on a comparison of the 2007 and 2008 versions, there was a decrease nationwide in CON regulation, with four states being ranked lower according to the methodology used in the CON Matrix.

Between 2007 and 2008, a number of trends emerged regarding the lessening of regulation for specific equipment and/or services. Deregulation of imaging equipment was a predominant theme, including CT scanners, MRI scanners, and PET scanners. There were also trends towards removing lithotripsy, swing beds, sub-acute services, and substance abuse services from reviewable services.

The National Conference of State Legislatures provides an overview of state legislative activity with regards to CON. Based on a review of the 2007-2008 legislative activity, it appears that there are an increasing number of studies being conducted to look at CON and/or health planning in the states. At least eight states convened task forces to make health planning recommendations or convened groups charged with the study and evaluation of CON programs.

Health Care Reform

As in most states, health care reform efforts in Connecticut have been ongoing and OHCA continues to play a role in providing data and analyses to support incremental coverage expansions. In 2008, Governor M. Jodi Rell's plan to offer affordable health coverage to uninsured adults in Connecticut was approved by the legislature and the state began accepting applications for the Charter Oak Health Plan in July. The Charter Oak Health Plan serves uninsured adults, aged 19 through 64, of any income. By December 2008 more than 3,000 members had enrolled in one of the three managed care organizations offering services under Charter Oak.

Additionally, legislation passed during the 2007 legislative session created two health care Authorities to make recommendations on how to improve access to health care in Connecticut. The Health First Authority was charged with examining and evaluating different alternatives for providing Connecticut residents with quality, affordable, and sustainable health care; recommending ways to contain the cost and improve the quality of health care; and recommending ways to finance quality, affordable health care coverage. The State-wide Primary Care Access Authority was charged with making an inventory of the state's existing primary care infrastructure; developing a universal system to provide primary care services to state residents; and developing a plan for implementing the system. Both Authorities will be making recommendations to the legislature in early 2009.

Interviews with External Stakeholders

The agency's external environmental assessment included discussions with key industry stakeholders. Due to time constraints, OHCA chose to interview a selection of stakeholders that interact most frequently with the agency. The feedback obtained from the identified external stakeholder group regarding the relevancy and value of the work produced by OHCA was a critical component of the environmental assessment phase and helped to identify the critical planning issues discussed in **Section 4** of this report.

Hospital Industry Interviews

The Commissioner and Director of Operations invited executives from all Connecticut hospitals and the Connecticut Hospital Association to participate in a discussion regarding OHCA's strengths, the value of OHCA participation in policy development and research, and where the agency should focus its resources. Several hospitals participated in these small group discussions over the course of three meetings. One additional meeting was conducted by phone with the Connecticut Hospital Association.

A standard set of questions was developed by the SPG and served as a guide for these meetings, however discussion topics varied according to the issues most important to the participants present at each session. The discussion focused on four main issues: 1) statewide facilities planning; 2) data collection, monitoring and reporting; 3) changes in the health care industry and 4) top priority issues for OHCA. A summary of the discussions with hospital industry leaders is presented below. A copy of the questions used to frame the discussion is included in **Appendix B**.

Hospital stakeholders indicated that statewide health facilities planning would provide a framework for CON, and a way to stay focused on what is best for the community and patients. Assuming a lead role in systems development and facilities planning was identified as one of the top priority issues for the agency. Although hospitals expressed concern about a facilities plan being too rigid, they indicated that approaching it as an iterative process would help alleviate these concerns. They also indicated that such planning could help the hospitals deal with issues related to financial viability,

competition, maintaining the safety net, avoiding duplication, and addressing need and capacity.

Hospital stakeholders also viewed identifying emerging issues and trends within the industry as another priority issue for OHCA. Most hospitals indicated that they regularly use reports from OHCA's website (e.g., reports on the uninsured and the financial stability report). However, not all hospitals were aware of the depth of available data at OHCA, and there were questions about how to utilize the data most effectively.

The financial sustainability and viability of health care institutions was the most pressing change in the health care industry identified by the hospitals, and discussion often returned to how financial data could be more effectively used and distributed by OHCA to provide an early warning system.

Hospital stakeholders identified other important changes in the industry such as difficulties with physician recruitment/retention and other workforce issues, continuing competition for margin generating services, a continued shift in utilization to outpatient services, possible national health care reform, and access issues for the uninsured and underinsured. Hospital stakeholders envisioned a role for OHCA in using the agency's data gathering, analysis, and research capabilities for projects related to performance improvement or providing information on best practices and cost in different areas.

The hospital stakeholder interviews highlighted the potential for OHCA to play a greater role in health planning and addressing critical issues within the health care industry.

State Agency Interviews

The agency's Director of Research and Planning invited state agency stakeholders - those agencies that interact most frequently with OHCA - to participate in interviews as part of the planning process. The purpose of these interviews was to discuss how OHCA can continue to collaborate with each agency to add value to the health care system and the public constituencies that each agency serves.

The Department of Social Services (DSS), Department of Children and Families (DCF), Department of Public Health (DPH), and Department of Mental Health and Addiction Services (DMHAS) were all asked and agreed to participate in these interviews. The discussion focused on three main issues: 1) how OHCA's services and work products are utilized; 2) how OHCA can continue to add value; and 3) changes in the health care industry. A summary of the discussions with stakeholder agencies is presented below. The questions used to guide the discussion are included in **Appendix C**.

The state agencies indicated that they were familiar with OHCA's data and that they often use OHCA data and reports, including the inpatient discharge database and reports on the uninsured. There are many issues that other state agencies would like OHCA to research or collaborate on. These particularly centered on access, need, and demand, and included identifying areas of unmet need within vulnerable populations, identifying 'pressure points' in the system (such as emergency department length of stay and

backlogs), and identifying and evaluating models to translate need into demand. As with the hospitals, the state agencies also identified workforce development issues and the ongoing sustainability and viability of health care institutions as important topics to study and report.

The state agencies all work collaboratively in some respect with OHCA on CON. They expressed interest in strengthening this communication and ensuring that there is a “value added” to the process. The state agencies also indicated a need for comprehensive state planning, particularly coordinated behavioral planning among the agencies that provide behavioral health services (DMHAS, DCF, and DSS).

The state agency interviews highlighted the positive collaborations that currently exist, and the potential for the agencies to work together to address issues related to access, need, and demand from a research and policy perspective.

Other Industry Stakeholders

The Radiological Society of Connecticut, Inc. was also interviewed as a stakeholder. A large part of this discussion focused on the idea of statewide health planning. The Society indicated that the current lack of a formal plan or methodology creates ambiguity for providers submitting CONs. The Society indicated that the CON process serves the purpose of ensuring appropriate utilization and determining need for additional capacity.

Summary

The information and feedback obtained during the course of the environmental assessment, along with the articulated goals of executive leadership, were merged and integrated to form “strategic themes”, those areas of required focus for the agency. The strategic themes reflect the main strategies of the agency and incorporate critical planning issues which must be addressed in order to move the agency forward.

A summary of the strategic themes and operational goals is presented in the next section of this document.

Section 4 -Strategic Themes/Operational Goals

Office of Health Care Access Strategic Themes/Operational Goals

Strategic Theme: Develop a statewide approach to facilities and services planning to ensure a sustainable and viable health care delivery system for Connecticut.

Operational Goals

- 1. Focus on expanding data collection and analysis, which may include use of data located in other agencies, that will allow the agency to report on access to services within specified regions of the state.**
- 2. Develop a process, supported by legislation and regulation, to enable OHCA to measure utilization, capacity, demand and need for health care services on a regional and statewide basis.**
- 3. Collaborate with other agencies to assist in the development of facility plans specific to the populations they serve.**

Strategic Theme: Influence and support health care policy by providing access to research and information necessary for evidence-based public policy formation and evaluation.

Operational Goals

- 1. Evaluate state and federal coverage initiatives to measure access improvements.**
- 2. Review and make available, the current research on issues of access to health care.**
- 3. Apply for available grant funding when appropriate research studies are relevant to funding opportunities.**

Strategic Theme: Maintain oversight and regulatory responsibilities to ensure appropriate provision of health care services.

Operational Goals

- 1. Administer the Certificate of Need (CON) program for hospitals and health care facilities to assure optimal levels of services and their sustained availability.**
- 2. Monitor and enforce CON decisions, hospital assessments and other compliance issues.**
- 3. Develop a process supported by legislation and regulation to enable OHCA to monitor the financial viability of the hospital system and fulfill agency mandates.**
- 4. Educate consumers on issues related to health care access.**

Appendices:

Appendix A: Employee Survey Instrument, Summarized Survey Results

Appendix B: Hospital Industry Interview Questions

Appendix C: State Agency Interview Questions

Appendix D: List of Hospital Executives Interviewed

Appendix A: Employee Survey Instrument, Summarized Survey Responses

Employee Survey

Instructions

The following statements ask you to describe your own personal work experiences or your personal opinions/attitudes about various aspects of your job.

PART I -- ORGANIZATIONAL EXPERIENCES

Using the scale below, indicate the extent to which you agree or disagree with each of the following statements.

Please use the following 1-6 scale to make your ratings:

1 Strongly Disagree (SD) 2 Disagree (D) 3 Neither Disagree nor Agree (N) 4 Agree (A) 5 Strongly Agree (SA) 6 Don't Know (DK)

Rewards/Recognition

1. Supervisors personally recognize the contributions of individuals and teams
2. Managers personally recognize the contributions of individuals and teams
3. Executive Leadership personally recognizes the contributions of individuals and teams
4. Supervisors are fair in recognizing individual and team accomplishments
5. Managers are fair in recognizing individual and team accomplishments
6. Executive Leadership is fair in recognizing individual and team accomplishments
7. Employees are acknowledged by Supervisors for producing high quality products
8. Employees are acknowledged by Managers for producing high quality products
9. Employees are acknowledged by Executive Leadership for producing high quality products

Training/Career Development

10. Employees receive the training they need to perform their jobs (for example, on-the-job training, conferences, workshops)
11. Employees receive the everyday guidance and assistance they need to perform their jobs (for example, help from supervisors, or co-workers)
12. Employees are provided with training and other opportunities for professional growth

Innovation

13. Creativity and innovation are acknowledged by Supervisors
14. Creativity and innovation are acknowledged by Managers
15. Creativity and innovation are acknowledged by Executive Leadership
16. Supervisors are receptive to change
17. Managers are receptive to change
18. Executive Leadership is receptive to change.
19. Employees are, in general, receptive to change in the organization
20. Employees are provided with training when new technologies and tools are introduced
21. New practices and ways of doing business are encouraged by Supervisors
22. New practices and ways of doing business are encouraged by Managers
23. New practices and ways of doing business are encouraged by Executive Leadership

Leadership and Quality

24. Employees understand OHCA's mission, vision, and values
25. Supervisors let employees know how their work contributes to the organization's mission and goals
26. Managers let employees know how their work contributes to the organization's mission and goals
27. Executive Leadership lets employees know how their work contributes to the organization's mission and goals
28. Managers provide sufficient resources (for example, time, training, dollars) to promote improvement throughout the organization.
29. Executive Leadership provides sufficient resources (for example, time, training, dollars) to promote improvement throughout the organization.
30. Supervisors respond to employee suggestions for improvements in products, services, and work processes
31. Managers respond to employee suggestions for improvements in products, services, and work processes
32. Executive Leadership responds to employee suggestions for improvements in products, services, and work processes
33. Supervisors set challenging and attainable performance goals
34. Managers set challenging and attainable performance goals
35. Executive Leadership sets challenging and attainable performance goals

Fairness and Treatment of Others

36. Supervisors at OHCA treat others in the agency with respect
37. Managers at OHCA treat others in the agency with respect
38. Executive Leadership at OHCA treats others in the agency with respect
39. OHCA staff treat others in the agency with respect
40. Disputes or conflicts (for example, between co-workers, management and employees) are resolved quickly and fairly

Communication

41. Employees are kept informed on issues affecting their jobs
42. Employees share their knowledge with each other
43. Supervisors communicate the goals and priorities of the organization to employees
44. Managers communicate the goals and priorities of the organization to employees
45. Executive Leadership communicates the goals and priorities of the organization to employees
46. Supervisors promote communication among different work units (for example, about projects, goals, needed resources)
47. Managers promote communication among different work units (for example, about projects, goals, needed resources)
48. Executive Leadership promotes communication among different work units (for example, about projects, goals, needed resources)
49. Managers keep employees informed about the organization's conditions and operations, as well as the choices it faces (for example, budget cuts, downsizing, reorganizations)
50. Executive Leadership keeps employees informed about the organization's conditions and operations, as well as the choices it faces (for example, budget cuts, downsizing, reorganizations)
51. There is effective communication among various levels of the organization

Employee Involvement

52. Employees have a feeling of personal empowerment and ownership of work processes
53. Employees are held accountable for achieving positive results
54. Supervisors ask for employee ideas and opinions about decisions which impact the work of staff

- 55. Managers ask for employee ideas and opinions about decisions which impact the work of staff.
- 56. Executive Leadership asks for employee ideas and opinions about decisions which impact the work of staff.
- 57. Supervisors provide an environment that supports employee involvement, contributions, and teamwork
- 58. Managers provide an environment that supports employee involvement, contributions, and teamwork
- 59. Executive Leadership provides an environment that supports employee involvement, contributions, and teamwork

Use of Resources

- 60. The amount of work is reasonable, allowing employees to provide high quality products and services
- 61. Internal policies and procedures do not interfere with the completion of work in a timely manner

Work Environment/Quality of Work Life

- 62. Physical conditions (for example, noise level, temperature, lighting, cleanliness) allow employees to perform their jobs well
- 63. Supervisors take steps to minimize work-related stress
- 64. Managers take steps to minimize work-related stress
- 65. Executive Leadership takes steps to minimize work-related stress

Teamwork

- 66. A spirit of cooperation and teamwork exists throughout the agency
- 67. Different work units cooperate to get the job done
- 68. Teams are used to accomplish organizational goals, when appropriate
- 69. Employees are rewarded for working together in teams (for example, performance ratings, certificates, public recognition)
- 70. Employees in different work units participate in cross-functional teams to accomplish work objectives

Performance Measures

- 71. The agency/staff understand(s) how “success” is defined for OHCA.
- 72. Assessments of the quality of systems, work processes, and products/ services are performed at regular intervals across the organization
- 73. Information collected from periodic assessments is used to improve the quality of products and processes.

PART II - PERSONAL EXPERIENCES

The following statements ask you to describe your own personal experiences in OHCA

Please use the following 1-6 scale to make your ratings:
1 Strongly Disagree (SD) 2 Disagree (D) 3 Neither Disagree nor Agree (N) 4 Agree (A) 5 Strongly Agree (SA) 6 Don't Know (DK)

Personal Experiences

- 70. The people I work with cooperate to get the job done
- 71. I am given a real opportunity to improve my skills in the organization

- 72. I have enough information to do my job well
- 73. I feel encouraged to come up with new and better ways of doing things
- 74. My job makes good use of my skills and abilities
- 75. My work gives me a feeling of personal accomplishment
- 76. I like the kind of work I do
- 77. Sufficient effort is made to get the opinions and thinking of people who work here
- 78. This organization is making the changes necessary to remain effective/relevant
- 79. I feel that my contributions to the agency are valued

PART III - PERSONAL PERCEPTIONS/OPINIONS

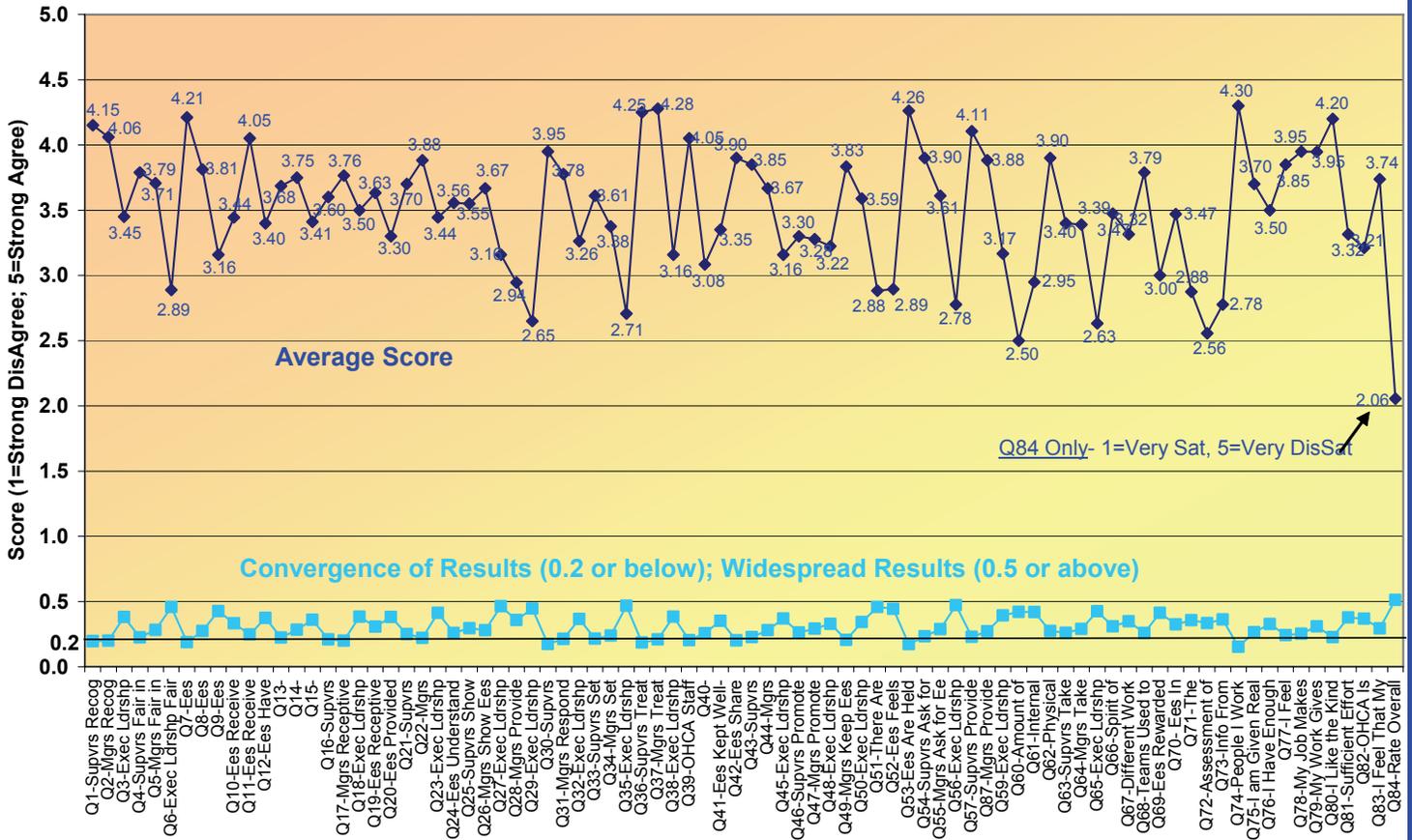
Please provide responses to the following questions:

- 80. On a scale of 1-5, how would you rate your overall employment experience with OHCA and why? Please use the following scale to make your rating. **1 Very Satisfied (VS) 2 Somewhat Satisfied (SS) 3 Neither Satisfied nor Dissatisfied (N) 4 Somewhat Dissatisfied (SD) 5 Very Dissatisfied (VD)**

Are you considering leaving the agency within the next six months to one year? If yes, why?

- 81. What are your top three suggestions for organizational improvement?
- 82. How do you define "success" for OHCA?

OHCA Employee Survey Results



Appendix B: Hospital Industry Interview Questions

Questions for Discussion:

- 1. In your opinion, to what extent should the Office of Health Care Access pursue the following initiatives?**

- Engage in Statewide Facilities Planning
- Monitor & Report on the Uninsured and Other Access Issues in CT.
- Monitor and report on hospital financial performance

**What impact will these initiatives have on the health care delivery system?
What is the value added?**

- 2. In your opinion, what should be the top three priorities for the Office of Health Care Access?**
- 3. What changes in the health care industry do you foresee that will impact the delivery of health care services in CT?**

Appendix C: State Agency Interview Questions

External State Agency Stakeholder Interview Guide

Interview Date:

Agency:

Name(s) & Title(s):

- 1) Describe briefly how OHCA's current products and services are utilized by your agency.
- 2) In your opinion, how can the Office of Health Care Access continue to provide value to your agency?
- 3) What changes in the healthcare industry do you foresee that will impact the delivery of healthcare services in CT?
- 4) What additional data would you like the agency to collect, analyze and report on or study?
- 5) Other than the studies and reports the agency currently publishes, what other topics would you like to see the Office of Health Care Access report on?
- 6) With respect to the January 2008 Hospital System Strategic Task Force Report please rate the importance of the following recommendations on a scale of 1 to 5, with 1 meaning very important and 5 meaning not important.

Task Force Recommendation	Rating
Conduct comprehensive study of multiple hospital reimbursement systems and methodologies	
Reduce the number of patients with extended lengths of stay within the emergency department	
Reduce inappropriate use and/or extended lengths of stay for emergency department patients waiting to receive mental health and/or substance abuse services	
Reduce the number of primary care visits provided by emergency departments by expanding locations for patients to access primary care services	
Develop a state health plan to identify short- and long-term strategies to effectively address the issues of access, cost and quality of health care services in Connecticut	

Note: Study recommendations can be found at http://www.ct.gov/ohca/lib/ohca/taskforce/hospitaltaskforce/hospital_task_force_master_version_1-17-08.pdf

Appendix D: List of Hospitals Interviewed

Bristol Hospital
William W. Backus Hospital
Yale-New Haven Hospital
Greenwich Hospital
Bridgeport Hospital
New Milford Hospital
The Hospital of Central Connecticut
MidState Medical Center
St. Vincent's Medical Center
Danbury Hospital

Office of Health Care Access
Strategic Goals/Objectives

Strategic Goal: Develop a statewide approach to facilities and services planning to ensure a sustainable and viable health care delivery system for Connecticut.

2010 Operational Goal: Undertake the inventory, advisory board and utilization study components of the State Facilities Plan mandate.

2010 Operational Objectives:

By May 2010, a) determine essential data elements and sources/methods for obtaining that data for use in inventorying services/facilities statewide, b) create and populate the inventory database with available service data, c) identify some areas of possible unmet need for specific services and d) draft regulations that will operationalize inventory survey.

By June 2010, identify opportunities to collaborate with other DPH divisions and state agencies on statewide services planning.

By August 2010, establish and convene the Facilities Plan Advisory Board to assist in the creation of methodologies, guidelines, and criteria to be used as a tool in CON decision making and inclusion in the Facilities Plan.

On or before June 2010, prepare and disseminate to governor and general assembly a statewide health care facility utilization study identifying current service availability, utilization and underserved areas and populations of specific services.

By December 2010, disseminate inventory survey to outpatient services/facilities statewide.

Strategic Goal: Influence and support health care policy by providing access to research and information necessary for evidence-based public policy formation and evaluation.

2010 Operational Goal: Review/make available current research on issues of access to health care and support health care reform efforts currently underway.

2010 Operational Objectives:

By August 2010, release one-page brief on MEPS-IC employer data.

By September 2010, release one-page brief on March 2010 CPS uninsured data.

Research and produce quarterly briefs on disease-specific hospitalizations as a preliminary step in the planning process.

Strategic Goal: Maintain oversight and regulatory responsibilities to ensure appropriate provision of health care services in the State.

2010 Operational Goal: Improve and streamline our current mandated practices and processes in order to focus resources on providing guidance to the providers of health care services and assist them with issues related to financial viability, competition, maintaining the safety net and duplication of services.

2010 Operational Objectives:

By mid-April, create a consumer assistance process on the website to assist consumers on issues related to health care access.

By mid-May, complete staff level review of hospital financial filings in terms of comparisons of results to key financial performance indicators in the industry and report to OHCA leadership regarding such findings for each hospital and by early August, complete and publish a report on the financial status of Connecticut's acute care hospitals.

By mid-July, complete a redesign of the Certificate of Need process, (including determinations, waivers, exemptions, modifications) including revisions to forms and processes in order to directly address any and all statutory and regulatory changes made in the 2010 legislative session.