



California Health Care
Safety Net Institute

CIO/CMIO Group Q3 Meeting

Thursday, September 24, 2015

Today's Agenda

Time	Lead(s)	Topic
8:30-9:00		BREAKFAST & NETWORKING
9:00-9:15	David Lown, MD	Welcome Back: Introductions & Today's Agreements
9:15-11:15	David Lown, MD All	Waiver: Update & Discussion <ul style="list-style-type: none"> ▪ What are you currently doing? ▪ How are you challenged & where do you need help?
11:15 – 11:45	David Lown, MD Kristina Mody	SNI Update & Discussion
11:45-12:30		LUNCH & NETWORKING
12:30-1:00	David Lown, MD	Charter Review
1:00-1:45	David Lown, MD Task force members	Task Force Updates <ul style="list-style-type: none"> ▪ Data ▪ Procurement ▪ Staffing/Recruitment
1:45-2:00	David Lown, MD	Closing & Next Steps

Welcome & Introductions

- Name
- Role
- Hospital/health system
- Top local data priority

Today's Agreements

- Parking lot / bike rack
 - Permission to facilitate
- Confidentiality
- One person speaks at a time
- Cell phones on buzz
- Everyone's input encouraged

WAIVER UPDATE & DISCUSSION

Next Waiver

What to Expect

Data for reporting

- **Robust reporting capacity** – DSRIP 2.0
- **Tracking of ‘alternate touches’** like phone visits

Data for improvement

- **Data integration and coordination** between primary care/specialty care, primary care/behavior health, and primary care/inpatient
- **Population health data** for clinical teams to manage panels – stratifying for high risk patients

Round Robin: Waiver

Data for reporting

- Robust reporting capacity
- Tracking of 'alternate touches'

Data for improvement

- Data integration and coordination
- Population health data for clinical teams

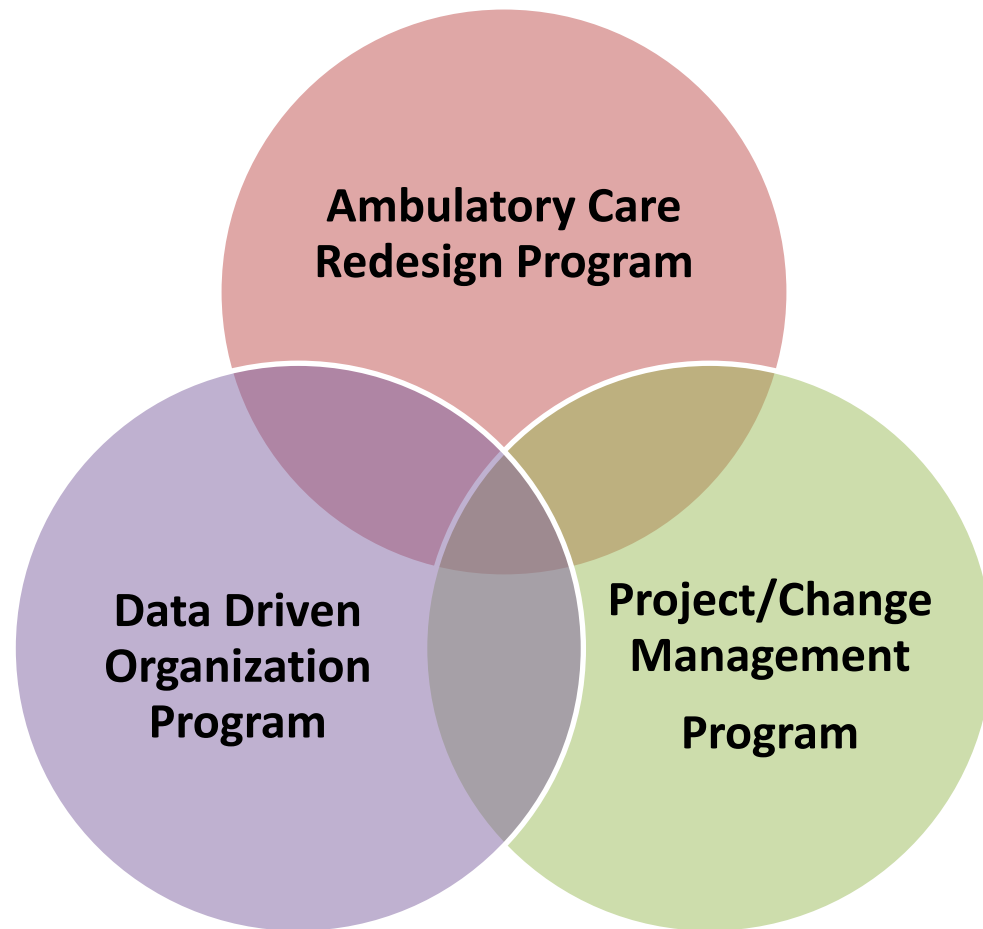
What are you currently doing?

How are you challenged & where do you need help?

SNI UPDATE

SNI Programs

Supporting Waiver Success



SNI Data Programs

	Q3 2015	Q4 2015	2016
CIO/CMIO Group	9/24/15	12/2/15	Quarterly
Attendees	CIOs and CMIOs	CIOs and CMIOs	CIOs and CMIOs
Data Driven Organization Program - DDROP	DDROP Phase 1: Data Governance and Strategy 7/31, 8/5, 8/24, 9/1	DDROP convening: Follow up from Phase 1 – peer consulting and DSRIP 2.0 update November date <i>TBD</i>	DDROP Phase 2 - Population Health, co-run with Center for Care Innovations (CCI) Planning Q1, Begins Q2
Attendees	Team of 3 data & quality staff & leaders/by PHS	DDROP attendees	TBD

Where are PHS?

Consolidated Summary Scores	
Leadership & Strategy	45%
Data Strategy	2.2
Senior Leader Sponsorship	2.3
Data-Driven Culture	1.6
Governance	44%
Cross-Functional Teams	2.1
Data Stewardship / Governance	2.0
Data Efforts / Initiatives	1.9
Performance Improvement	48%
Performance Measurement	2.5
Data Quality and Accessibility	2.0
Analysis of Data	2.0
Acting on Results / Change Management	2.2
Skills & Roles	44%
Clinical and Business Analysts	1.9
IT Support for Analytics	2.1
Tools & Technology	40%
Integration	1.6
Self Service Analytics	2.0
Average Score Across All Domains	2.0

Capability Levels	Reactive	Responsive	Proactive	Predictive
Self Scoring	1.0, 1.5	2.0, 2.5	3.0, 3.5	4.0, 4.5



Based on PHS self-assessment from Point B tool, July 2015

PHS are not behind the curve!

- In 2014, the *American Health Information Management Association* conducted a benchmark survey on **Information Governance** in healthcare.
- Of the 1,260 respondents from health care organizations:
 - **65%** recognized the need to formalize Information Governance
 - **43%** have initiated an Information Governance program
 - **11%** identified their cross-functional Information Governance structure as mature

Source

<http://journal.ahima.org/2015/07/28/new-ahima-white-paper-offers-insights-on-ig-preparedness/>
<https://www.google.com/search?q=AHIMA+Coahsset+Associates+white+paper&ie=utf-8&oe=utf-8>

DDROP Phase 1

SNI Observations

- Data governance foundational for:
 - Strengthening local data initiatives
 - Creating baseline understanding among member PHS
- Members at different points in journeys in data governance, EHR (re)implementation, other huge strategic initiatives
 - Invest in data governance now to facilitate transitions

DDROP Phase 1

Your Observations

- Impact of/ progress on homework?

Workshop 1 Objectives

- Finalize with your PHS leadership which individual staff will fulfill the Data Governance Components and where there are still gaps to fill
- Using the Data Governance Program slide complete the Data Governance Program Charter
- Determine the Key Performance Indicators your PHS will use to track Engagement, Effectiveness and Reach

Workshop 2 Objectives

- Create a data strategy
- Complete your data-driven organization roadmap

- Feedback for SNI?
- Ways to use Point B hours?

Please update the PHS System Information in your packet!

- You have 2 copies: please update 1 per organization and give to Kristina Mody
- Updated version to be sent with meeting materials after meeting

LUNCH & NETWORKING

CHARTER REVIEW

Purpose of Charter

Goal today: high-level agreement from group

- Each task force identified projects in key priority areas where larger group can share resources and learnings
 - Each project required some internal dedication of resources (surveys, document submissions, workflow reviews)
- Before launching into time commitment proposed by each task force, need to establish group's working principles

Charter

Common Goal

- Members of the California Association of Public Hospitals and Health Systems will leverage shared successes and learnings to continue moving toward becoming data-driven organizations.

Mission Statement

- The Data Driven Organization CIO/CMIO Group is committed to enabling the transformation of healthcare to a value-driven model. We recognize that healthcare is a dynamic environment and that our healthcare providers must derive value from their interactions with technology and information so that our patients can successfully engage with them in improving and managing their health.

Charter *continued*

Scope of CIO/CMIO Group

- Provide strategic direction by identifying areas and ways that CAPH member health systems can share information and work through similar issues around health information technology and data analytics
- Define/describe future state of identified areas of focus
- Determine immediate next steps to pursue future state
- Identify stakeholders and assign resources needed to pursue future state, leveraging existing groups and convenings where possible
 - CIO/CMIO Group member to communicate requirement to local staff
- Provide input and guidance to SNI for the development of SNI's data, health IT and analytics program offerings

Membership

- CIO and CMIO or, equivalent roles or, persons serving equivalent functions. 2 individuals per organization

Charter *continued*

Meeting

- In person quarterly, convened by SNI; Location preference?
- Communication Formats
 - TBD – discussion at 9/24 meeting (Yammer, listserv, website)

Decision Making

- By group consensus

Can the group weigh in on location and communication formats?

Task forces

- By volunteer basis, members serve on ad hoc ‘task forces’
- These task forces meet on an as-needed basis to analyze identified priority areas and bring recommendations to the larger CIO/CMIO Group
- Each task force shall agree to a scope of work, including objectives, time required and agreement to bring recommendations to larger CIO/CMIO Group

Questions for group

- Are there any elements missing from the charter you would like to clarify with the group?
- Are there any questions about accountability or assigning resources from reviewing this charter?

Can the group approve the charter?

TASK FORCE UPDATES

Data (Definition & Reports) Task Force Update

Members: Rajiv, Albert, Eric, Vikram, Bhumi

- Potential of group: dynamically collaborative community sharing best practices, lessons learned, rules & processes
- To focus work, need shared data framework across member PHS
 - Group should identify areas of semantic discrepancy or variance that valuable to PHS to standardize ('apples to apples')
 - Actual project not as important as the process

Data (Definition & Reports)

Task Force Update *cont.*

- Discussed how to find gaps in:
 - Data collection (e.g., capturing REAL)?
 - Analysis and reporting (skills)?
 - Information sharing (spread throughout organization)?
- Key shared focus areas:
 - Understanding semantic data variance
 - Foundational area: REAL/SOGI data
 - Sharing standardized data governance structures
 - Data sharing with other entities (e.g. Behavioral Health and Public Health)

Data (Definition & Reports) Task Force Recommendation

Proposed activity

- Understand current member PHS REAL/SOGI data collection, mapping, and reporting processes through completion of survey

Future State

- Improvement of REAL/SOGI data collection
- Establish process for:
 - Standardizing future DSRIP reporting processes
 - Group to sponsor ‘best practices’

Data (Definition & Reports)

Task Force Recommendation *cont.*

Next Steps

- SNI to create a data collection survey around REAL/SOGI data, with input from Taskforce
- CIO/CMIO (or delegated staff) to complete survey
- SNI to aggregate and share with CIO/CMIO Group
- Group to review aggregate, understand member gaps and challenges and make recommendations

Estimated resources: Survey completion: 2-4 hours staff time

Can the group approve these next steps?

Procurement

Task Force Update

- **Members:** Winona, Bill, Tura, Eric
- Identified issues:
 - Ongoing siloed PHS procurement of similar and at times identical technologies
 - Opportunity for efficiencies through sharing of and collaboration on ideas, plans, consultants, RFPs/RFQs, contracts
 - Opportunity for benchmarking of PHS procurement activity for individual PHS internal advocacy activities

Procurement

Task Force Recommendation

Future State

- Online resource of recent, current and near future top priority PHS procurement activities
 - Understand PHS ‘road map’ of future purchasing
 - Links to more info including public RFPs, RFQs, contracts, point of contact

Procurement

Task Force Recommendations *cont.*

Next Steps

- Task Force to identify list of priority PHS procurement topics
- Members submit to SNI road maps, dates, point of contact and links to relevant documents on each of those topics
- SNI:
 - collate submitted information
 - generate a online, linked table of PHS procurement activities accessible only to CIO/CMIO Steering group

Estimated resources: Document collection: 2-4 hours

Can the group approve the next steps?

Staffing & Recruitment Task Force Update

Members: Terry, Chad, Lee, Farhan, Felix

- Identified Issue: PHS challenges in hiring for clinical IT/informatics in county setting
- Leaders find workarounds to get appropriate staff hired
 - Not necessarily appropriate staffing, compensation or org charts
- Opportunity to work together around current tools, analyze, and come to a recommendation as a group

Staffing & Recruitment

Task Force Recommendations

Future State:

- Standardized job descriptions for top ten needed PHS Clinical Informatics positions
 - Potential use: PHS advocacy with County HR and in hiring process
- Pool of ideal Informatics/IT org charts for current/future health care environment for use by members

Staffing & Recruitment

Task Force Recommendations *cont.*

Next Steps

- Member Actions:
 - Share current and future Informatics/IT org charts
 - Identify job descriptions for top 10 most needed Clinical Informatics positions
- SNI Action:
 - Create online repository of org charts & job descriptions accessible to CIO/CMIO group
- Estimated time: 1-2 hours of staff time

Can the group approve the next steps?

Task Force Agreements

- Given the approvals of the group, can you assign resources for Task Force work today?
- How can the group prioritize the work?

CLOSING & NEXT STEPS

Next Steps

- Q4 DDROP Convening: *tbd (November)*
- Q4 CIO/CMIO Meeting: December 2, 2015
CAPH/SNI Annual Conference (Napa, CA)
- 2016 CIO/CMIO meetings
 - SNI to establish standing meetings
- DDROP Phase 2: Population Health with CCI
 - Advisory Group

Reminders

- **Thanks again** to Alameda for hosting!
- Packet materials
 - Evaluation form
 - 5/21/15 CIO/CMIO Notes & Next Steps
 - PHS CIO/CMIO Information Sheet (2 copies)
 - Travel reimbursement forms (send to Abby Gonzalez agonzalez@caph.org)

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