

Readiness Assessment Crucial First Step in Building an Outcomes Improvement Focused Organization



EXECUTIVE SUMMARY

Healthcare organizations need to be cognizant of their readiness for change, enabling them to create a plan that will enhance the organization’s ability to successfully drive change. While many studies have been completed on the importance of organizational readiness in non-healthcare organizations, there is little research and relatively few, measurement tools focused specifically on healthcare organizations.

To cement the Pulse Heart Institute (Pulse Heart) as a destination for adult heart health, and ensure its long-term success, Pulse Heart required a better understanding of its readiness to drive and sustain outcomes improvements—which it found through an onsite assessment that leveraged the Health Catalyst® Outcomes Improvement Readiness Assessment (OIRA) framework. Using the assessment findings and subsequent recommendations, Pulse Heart successfully developed, and continues to develop, the findings to guide workplans to improve competencies and enable the organization for long-term outcomes improvements success.

Based on the results of the onsite readiness assessment they have identified and implemented interventions to improve readiness for change in each of the five major OIRA Tool categories:

- Leadership, culture, and governance
- Analytics
- Best practices
- Adoption
- Financial Alignment

HEALTHCARE ORGANIZATION

Integrated Delivery System

PRODUCTS

- Health Catalyst® Outcomes Improvement Readiness Assessment (OIRA)

SERVICES

- Professional Services

ASSESSING READINESS FOR CHANGE

Changes in the healthcare delivery system are required to improve health outcomes, reduce health disparities, and increase quality of care.¹ One important factor contributing to success in making enhancements is organizational readiness for change. However, there is a relative absence of reliable measurement tools for healthcare organizations to support this need.²



We know we want to improve quality. To do that, we needed a comprehensive assessment to help us understand our readiness, what is working, and what required change.

Jason Parks, President
Pulse Heart Institute

Pulse Heart is the most recent innovation in care delivery from the Cardiac Study Center and MultiCare Health System. Uniting cardiac, thoracic, and vascular services into one integrated entity, Pulse Heart has a vision of becoming the Pacific Northwest's destination for adult heart health, offering a comprehensive range of the most advanced cardiac, thoracic, and vascular services available. As Pulse Heart strives to continuously improve care delivery, it looked for a way to thoroughly evaluate its readiness to drive and sustain improvements.

UNDERSTANDING ORGANIZATIONAL READINESS

Pulse Heart was established in 2016 with the strategic mission to deliver seamless cardiac services to the communities it serves. It is a physician-led entity, with a dyad management structure, arranged around six patient centers: heart rhythm, advanced heart failure (HF), structural heart disease, peripheral vascular disease, and coronary artery disease prevention.

Creating a new business, particularly one that brings multiple departments, providers, and locations of care together, is challenging work. As a new organization with a different structure, substantial excitement, and a commitment to excel, Pulse Heart was aware that it would face challenges. To ensure its ability to face those challenges, and to ensure long-term success in creating a destination for adult heart health, Pulse Heart needed to better understand its readiness to drive and sustain outcomes improvements.

FINDING THE KEYS TO SUCCESSFULLY IMPROVE OUTCOMES

Pulse Heart's first step was to find an assessment tool that could reliably determine the organization's current readiness to drive and sustain outcomes improvement. Pulse Heart's search led them to Health Catalyst and its on-site assessment, which leverages the OIRA Tool. The OIRA Tool was developed using an integrated literature review of healthcare organizational improvement research. The articles were assessed and used to derive an initial set of competencies. A three-round, modified Delphi nominal group method was used with a panel of 11 subject matter experts (SMEs) to evaluate the relevancy and clarity of the competencies using an item-level content validity index (I-CVI) and a scale content validity index (S-CVI)³. The I-CVI indices ranged from 0.82 to 1.0, exceeding the target established in research literature of 0.78; The S-CVI was 0.92, again exceeding the research literature target of 0.9 for 11 SMEs. A confirmatory factor analysis was also used to evaluate the construct of the OIRA Tool, which showed the model was statistically sound as evidenced by a comparative fit index



We continue to utilize the results of this assessment and actively implement the recommendations. We reflect back on the areas where we can do better, and integrate those suggestions into our work plans.

Holly Burke
Director of Clinical Innovation
Pulse Heart Institute

(CFI) of 0.950⁴, non-normed fit index (NNFI) of 0.942⁵, and a root mean square error of approximation (RMSEA) of 0.046⁶.

OIRA Tool Competencies

The onsite assessment is designed to help organizations identify their highest performing competencies as well as those skills for which there are gaps that require additional development to better drive and sustain outcomes using the OIRA Tool competencies

22 OIRA Tool competencies are grouped into five main keys for success (see Figure 1):

- Leadership, culture, and governance – Represents organizational leadership culture and structure needed to design a strategy for sustained, system-wide outcomes improvements.
- Analytics – Represents standard measurement work (data sources, visualizations, and analysis) needed to monitor and assess priorities, progress, and outcomes.
- Best practice – Represents standard ‘knowledge’ work (guidelines, protocols, and order sets) needed to guide and improve best practice.
- Adoption – Represents standard organizational work (teams, roles, processes, mindset changes) needed to transform.
- Financial Alignment – Represents organizational and payer incentives and payment models to deliver high-quality, cost-effective, and-patient centric care.

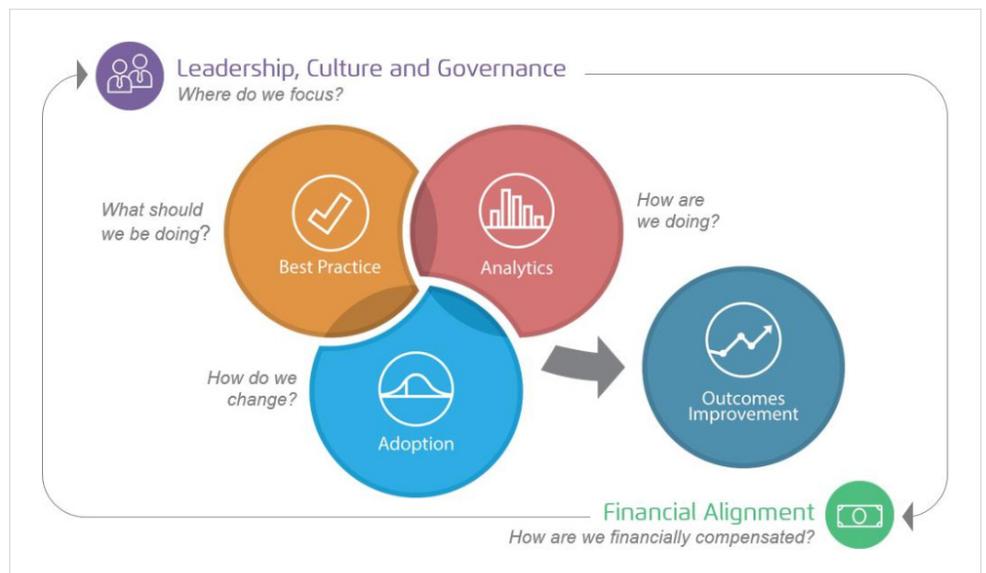


Figure 1. Key areas for success in outcomes improvement.

Confident that the OIRA Tool was an assessment that had been validated for clear, understandable, and relevant competencies, and cognizant that a professional services organization, with an outside perspective could provide unbiased feedback, Pulse Heart engaged Health Catalyst. Health Catalyst conducted the onsite assessment, using the OIRA Tool categories and competencies, and provide Pulse Heart with its baseline results, suggested recommendations, and suggested an ongoing reassessment of its organizational readiness every 6 to 12 months, or as needed based on major strategic business or organizational changes.

Engaging Stakeholders Across the Organization

Pulse Heart's leadership team selected participants for the on-site assessment, contacting people from the centers of excellence, leaders, physicians, nurses, and other key stakeholders across the organization, providing them an opportunity to have their voices heard.

The chance to participate in the assessment created excitement and positive energy, as it was different than previous approaches. Participants were excited to be involved in something new, and confident that the information would be used for improvement. To ensure adequate perspectives and representation, experts from Health Catalyst interviewed 37 cross-discipline individuals from Pulse Heart and the key hospitals they serve, including 18 clinicians/clinical leaders, 14 people in leadership positions, and five front line staff/IT.

Following completion of the onsite assessment, results and recommendations for improvement were shared with the leadership team.

ASSESSMENT RESULTS AND RECOMMENDATIONS DRIVE ACTION

Pulse Heart, following through on its commitment to respect and leverage the onsite readiness assessment findings and subsequent recommendations, actively uses the results to guide the development of workplans. The assessment reassured the team that they were on the right track with actions they had taken and helped set priorities for their future work.

➤ Leadership, culture, and governance

- Performance goals have been coordinated and integrated across the organization. Objectives used for performance evaluation and incentive programs are aligned and cascaded out to each employee, and matched with quality improvement



Because of the assessment, we are learning and talking more about polarities. How do we engage our physicians and have them actively participate in quality improvement activities, while balancing patient access? These polarities will always be there, and we are learning how to better balance them.

Needham Ward, MD, CMO
Pulse Heart Institute

targets, such as readmission rate. When priorities and goals change, they are updated for everyone in the organization.

- » As a part of this process, individuals are learning how to better manage polarities. For example, protecting confidentiality while also promoting transparency. These two symbiotic aspects must be managed collectively.
 - » To ensure coordination of operational and quality improvement activities across the organization, there is now a monthly joint operation meeting of the dyads (physician and business leaders), quality, and operational directors. These meetings have helped ensure alignment and prioritization of resources.
 - » Having received the message that constituents want and need more information, Pulse Heart is increasing the resources dedicated to communication.
 - » With the first year completed, Pulse Heart is developing a strategic plan and roadmap, supporting requests for more clarity about the future direction, and the path to get there.
- » **Analytics**
 - » Pulse Heart is prioritizing the source system data that needs to be integrated into the EDW, and developing data and analytics literacy among team members.
 - » A bi-weekly governance meeting is used to prioritize data requests, finance requests, and epic builds. The meeting also helps the data and information systems and technology teams know what leaders want them to work on.
 - » **Best practices**
 - » Development of workplans to ensure active involvement in quality improvement activities—some members of the care teams were not previously fully engaged.
 - » Recognizing that improvements and “wins” could be captured and celebrated more widely, the communications specialist will be available to help publish the results of initiatives.
 - » **Adoption**
 - » Pulse Heart has achieved, and in many cases exceeded, its quality and financial targets.
 - » Pulse Heart is seeing positive outcomes for patients with HF managed in the Pulse Heart HF clinic. Pulse Heart is preparing to disseminate these results, and planning for

“It takes great humility to open yourself up to critical feedback and listen. When leaders do this, it opens space for ongoing, two-way feedback and dialogue, improving the culture, ability to deliver on outcomes, and ultimately the entire organization.”

Jason Parks, President

an expansion of activities contributing to success across the organization.

- › Pulse Heart is also preparing to kick off partnership review meetings with primary stakeholders where they will solicit feedback about what is working and can be spread, and what needs improvement. Each center of excellence will help develop a work plan for the next year, which will align with the larger organizational goals and be used to increase adoption.
 - › As part of ensuring ongoing financial success and viability, Pulse Heart is investing in its leaders, ensuring ongoing opportunities for further development of business/financial acumen, skills in quality improvement processes and methods, and leadership skills.
- › **Financial Alignment**
- › Financial acumen was identified as a requirement for the leaders to enable them in their work of optimizing margins and negotiating risk contracts with key industry partners.

WHAT'S NEXT

Pulse Heart is using the results of its onsite assessment report as a living document, referring to it frequently to reflect on the organization's progress, and to ensure it is developing the competencies required to drive and sustain outcomes improvements. This enables it to deliver on the promise to make Pulse Heart the destination for adult heart health. Additionally, Pulse Heart plans to administer the web-based OIRA Tool in the next several months to establish its overall readiness assessment and competencies baseline scores, and to conduct future onsite assessments, using the results to further refine the organization's outcomes improvement competencies. 🔥

REFERENCES

1. U.S. Department of Health and Human Services, Health Resources and Services Administration. (n. d.) *Readiness assessment & developing project aims*. Retrieved from <https://www.hrsa.gov/quality/toolbox/508pdfs/readinessassessment.pdf>
2. Shea, C. M., Jacobs, S. R., Esserman, D. A., Bruce, K., & Weiner, B. J. (2014). Organizational readiness for implementing change: A psychometric assessment of a new measure. *Implementation Science*, 9(7). Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3904699/>
3. U.S. Department of Health and Human Services, Health Resources and Services Administration. (n. d.) *Readiness assessment & developing project aims*. Retrieved from <https://www.hrsa.gov/quality/toolbox/508pdfs/readinessassessment.pdf>
4. Hu, L., & Bentler, P. M. (2009). Cutoff criteria for fit indexes in covariance structure analysis: Conventional criteria versus new alternatives. *Structural Equation Modeling: A Multidisciplinary Journal*, 6(1), 1-55. doi.org/10.1080/10705519909540118
5. Marsh, H. W., Balla, J. R., & McDonald, R. P. (1988). Goodness-of-fit indexes in confirmatory factor analysis: the effect of sample size. *Psychological Bulletin*, 103, 391–410.
6. Steiger, J.H. (2007). Understanding the limitations of global fit assessment in structural equation modeling. *Personality and Individual Differences*, 42(5), 893-98.

ABOUT HEALTH CATALYST

Health Catalyst is a next-generation data, analytics, and decision support company committed to being a catalyst for massive, sustained improvements in healthcare outcomes. We are the leaders in a new era of advanced predictive analytics for [population health](#) and [value-based care](#). with a suite of machine learning-driven solutions, decades of outcomes-improvement expertise, and an unparalleled ability to integrate data from across the healthcare ecosystem. Our proven data warehousing and analytics platform helps improve quality, add efficiency and lower costs in support of more than 85 million patients and growing, ranging from the largest US health system to forward-thinking physician practices. Our technology and professional services can help you keep patients engaged and healthy in their homes and workplaces, and we can help you optimize care delivery to those patients when it becomes necessary. We are grateful to be recognized by Fortune, Gallup, Glassdoor, Modern Healthcare and a host of others as a Best Place to Work in technology and healthcare.

Visit www.healthcatalyst.com, and follow us on [Twitter](#), [LinkedIn](#), and [Facebook](#).