Vision, Mission, Values

Our Vision
- To be the world leader in Children’s health.

Our Mission
- Children’s Hospital of Pittsburgh of UPMC is dedicated to improving the health and well-being of children through excellence in patient care, teaching, and research.

Our Values
Our five core values are the foundation of all we do:
- Patients and Families First
- Responsibility
- Innovation
- Dignity and Respect
- Excellence
Strategic Plan Overview

Children’s strategic plan is not intended to detail the immediate tactics of tomorrow but to set the direction of the institution for the next five years. The plan should be used as a tool to guide effective leadership, match organizational resources with opportunities, cultivate tactical plans, and support meaningful action. It will be reviewed and refreshed on an annual basis and help Children’s leadership to translate ideas into hospital and practice plan operating budgets and health system capital budgets. The plan is comprehensive and actualized by focusing efforts around the five strategic imperatives outlined below:

I. Quality Improvement through Automation and Evidence-Based Practice

Our unprecedented investment in a comprehensive electronic health record and fully automated campus will create endless opportunities to improve pediatric care delivery. We will strive to deliver the safest, most efficient care through strong clinical leadership, state-of-the-art technology, targeted application of health analytics, and high-quality clinical programs. The transition to a paperless workflow in all care settings enables us to set the standard for continuity of care, integration, outreach, and informatics research. We recognize that the future of care is focused on reducing variation and eliminating waste or non-value added services. We will support our expert clinicians in their ability to leverage the clinical information systems to identify opportunities for improved clinical outcomes.

II. Program Growth through Partnership and Cultivation of New Markets

We will actively work to improve communication and collaboration with primary care physicians, other referring providers and hospitals. The primary care physician is not only a source of referrals, but a partner in the care of the patient and often responsible for the entire health care timeline of the patient. In essence, Children’s exists to assist the referring provider when the needs of the patient exceed the scope of his or her services. When this occurs, Children’s will provide the referring provider with notification of visits and admissions and an opportunity to provide information to the Children’s care team that might otherwise be overlooked. The full breadth of health information generated for their patients, and a recommended plan of care at discharge will also be made available to the referring provider,
giving him or her the opportunity to provide feedback based on their 
detailed knowledge of the patients and families.

Despite a declining pediatric population in Western Pennsylvania, we will 
identify key clinical service lines both within and outside of the region 
with significant opportunities for enhanced community benefit, increased 
market share, and financial viability. Specific focus will be placed on: 1) 
the continued development of an integrated regional pediatric delivery 
model to include West Virginia, Eastern Ohio, Central Pennsylvania, and 
the Southern tier of New York; 2) the maturation of a scalable telehealth 
solution and international service line, and 3) the implementation of a 
robust growth and marketing strategy around targeted service lines.

III. Knowledge Transfer through Research and Teaching

At Children’s Hospital of Pittsburgh of UPMC, research, medical education, 
and cutting-edge clinical care go hand in hand. With some of the fastest 
growing pediatric research and teaching programs in the country, 
Children’s will continue to enhance our ability to discover new and 
innovative therapies for the cure of childhood disease and disability, and 
disseminate those discoveries through our students, residents, and fellows.

IV. Service Excellence through Staff Empowerment 
and Teamwork

All of our interactions will be warm and professional. Everyone at Children’s 
will consistently display courtesy, respect, and sensitivity toward patients, 
families, co-workers, and community medical professionals. Staff will be 
empowered to anticipate the needs of patients and families and demonstrate 
flexibility and accountability as we strive to provide extraordinary care at 
all times.

We recognize that every employee at Children’s has a valuable contribution 
to make to the patient and family experience. Teamwork drives the quality 
of our service and we will continue our evolution from a collection of 
individual departments and divisions, to a cohesive unit. The financial 
alliance between the hospital and the physician divisions will be leveraged 
to create service lines and centers of excellence that cross traditional 
disciplinary barriers. We will recognize the vital role of all hospital staff, 
and formalize the structure of teams based on broad definitions of patient 
outcome and experience.
V. Operational Efficiency through Innovation and Process Improvement

We will create a care model that is timely, clinically appropriate, and cost-effective. We are committed to enhancing patient flow and the patient and family experience. In a rapidly changing health care environment focused on increasing access to care and cost containment, we must streamline our work processes and tightly manage our expenses. Through real time performance measurement and the application of process improvement techniques, leadership will look to systematically improve patient flow and productivity over time.

5 Year Outlook

I. Quality Improvement through Automation and Evidence-Based Practice

Current State — Successes and Opportunities

The new Children’s Hospital of Pittsburgh of UPMC features an unprecedented level of technology. This gives our workforce the resources and infrastructure to improve patient care, reduce human error, and improve patient safety while simultaneously achieving operating efficiencies. Children’s is the first pediatric hospital in the country to achieve HIMSS Stage 7 status and is recognized as one of only eight pediatric hospitals in the nation named a 2009 Leapfrog Top Hospital. Children’s hospital has made significant progress in the reduction of medication errors through a closed-loop prescribing, dispensing and administration system. The data generated by our automated clinical processes can be mined to provide information that would take years to study using standard clinical research methods.

We are now looking at ways to leverage our data with a focus on clinical resource management, patient throughput, and decreased cost of care. We have begun to create a network for sharing information with referring providers and eventually with the patient and family. While our quality of care and patient safety results continue to improve and exceed pediatric hospital industry standards, there is an opportunity to become more consistent and reliable by eliminating process failures that lead to significant quality events and suboptimal patient care.
**Future Vision**

Children’s Hospital of Pittsburgh of UPMC will use clinical data mining to establish automated alerts for clinicians, inform efforts to improve outcomes, streamline care, reduce variation in practice patterns and control cost. We will have the opportunity to set clinical standards for peer institutions and payers, both private and public. We will integrate care, not only within the institution, but across the divides between primary providers, specialists, hospital, and family. We will embrace the concept of transparency with patients, families, and referring physicians and strive to be the safest children’s hospital in the world.

**Priorities**

A.1 Advance Children’s e-Record by achieving electronic health record adoption at the highest level, sharing data with external providers, and providing the most integrated, user friendly medical record for pediatric patients throughout the region.

A.2 Leverage our clinical data warehouse to implement rapid and continuous improvement in the delivery of pediatric health care.

A.3 Champion a clinical resource management program, focusing on evidence-based protocols and continuously reducing unintended and incidental variability in care.

A.4 Closely integrate physician leaders and the clinical staff with hospital QI and evidence-based practice efforts.

A.5 Empower patients and family members to take personal responsibility with their overall health and health outcomes.

**II. Program Growth through Partnership and Cultivation of New Markets**

**Current State — Successes and Opportunities**

Over the past several years, Children’s has made great progress in developing a more integrated pediatric care delivery model in Western Pennsylvania by focusing on service line enhancement and expansion, physician recruitment and retention, and partnership with area providers. Significant resources have been committed to growing targeted pediatric service lines — GI medical, surgical, abdominal transplant, heart center,
and ENT surgical/cleft craniofacial surgery — as well as a increasing the focus on our suburban ambulatory care centers — Children’s North, East, and South. Other service lines such as orthopedics, neurology, neurosurgery and neuro-oncology, respiratory care and asthma received less emphasis but were able to maintain their position in the Western Pennsylvania market.

We have begun to strategically place coordinated outreach centers in the borders of our service region where our competition is the strongest. These include Johnstown, Wheeling, and Hermitage — and we continue to look at opportunities in Dubois, Erie, and other bordering areas in Ohio and West Virginia. We also have established telemedicine partners in cardiology, and plan to expand the partnership to include radiology, neurology, rheumatology, and dermatology. Advances in technology and system integration will allow for improved regional and international telemedicine solutions in the future.

In the international pediatric market, we have had success competing across three parameters: service, quality and price. Our clinical concierge service has hosted and successfully treated international patients from all over the world; established a competitive case rate pricing methodology; and achieved remarkable patient outcomes for our priority service lines. Children’s has also successfully established clinical education programs for the international provider community and is in the early stages of developing advanced telemedicine operations including radiology, pathology, critical care monitoring, cardiology testing, and others.

**Future Vision**

With a declining pediatric population in Western Pennsylvania, Children’s Hospital will be challenged with maintaining current volume and growing new business. Collaborative relationships with pediatric subspecialty faculty will help Children’s align physician incentives with hospital operational goals. Working with system leadership, we will identify opportunities to consolidate pediatric services within UPMC facilities, so that pediatric patients are provided with optimal care.

Children’s will focus on building direct relationships with referring physicians, consolidating disparate physician practices and developing more comprehensive outreach centers. This strategy, coupled with a regional telemedicine solution, will allow us to meet the pediatric service needs of the region,
provide convenient and accessible health care options to patients and families, and establish new sources of patient referrals and admissions.

The international health care market will view Children’s as the world leader in Children’s health. While sustaining its existing education and training relationships, Children’s will function as the hub for intercontinental telemedicine services in key clinical areas. We will work closely with the UPMC International and Commercial Services Division (ICSD) leadership to promote telemedicine services, the clinical concierge service, and further establish relations with key international stakeholders.

**Priorities**

B.1 Expand Children’s geographic reach both within and outside of the region through enhanced relationships with referring physicians and the development of comprehensive outreach centers in strategic locations.

B.2 Focus resources and grow targeted clinical service lines.

B.3 Actively develop partnerships or affiliations with health care organizations that share our values and complement or enhance our ability to broaden the impact of our services.

B.4 Become nationally and internationally recognized as a leader in pediatric telemedicine.

B.5 Market clinical programs that differentiate Children’s Hospital as a world leader in Children’s health and increase Children’s volume of international patients and out-of-area patients.

B.6 Create and/or expand programs that complement or enhance our current services and improve pediatric healthcare in the communities we serve or in new markets that we have yet to discover.
III. Knowledge Transfer through Research and Teaching

Current State — Successes and Opportunities

At Children’s Hospital of Pittsburgh of UPMC, research and clinical care go hand-in-hand. We believe the most important material for research and education is born from our experience in treating the children who come to Children’s for care. Physician and practice plan leadership remains strong and has been successful in building a disciplined culture, growing our NIH funding base, and designing state of the art space at the new campus for basic research programs. More specifically, Children’s has focused on growing ‘boutique’ pediatric subspecialties and has developed strong research programs in cell biology, liver disease, developmental biology, diabetes, and clinical trials for common pediatric ailments. Clinical research initiatives within the field of pediatric nursing have also achieved recent success and are gaining momentum within the hospital.

Future Vision

To maintain our status as a leader in pediatric research and education, Children’s will continue to focus on enhancing intellectual capital, publishing scientific discoveries at the national/international level, and expanding the core infrastructure of our basic, translational and clinical research programs. Physician and hospital leadership will evaluate and further develop specific areas of research to include oncology, bone marrow transplantation, neurobiology, immunity, endocrinology, metabolic signaling, pediatric nursing practice and clinical outcomes research. We will look to secure new core facilities to expand research in clinical genomics, epigenomics, proteomics, drug development, and medicinal chemistry. Leadership will spend time cultivating and energizing new scientists among our core faculty and staff, looking to these intelligent minds to increase the number of program projects and center grants that investigate the most important discoveries for improving the health of children, adolescents, and young adults.
Priorities

C.1 Establish endowed academic funds for talented faculty and staff.

C.2 Enhance basic, translational and clinical research by expanding existing core facilities, exploring opportunities for development of devices and increasing the number of program projects and center grants.

C.3 Enhance educational programs by increasing simulated training programs, developing electronic educational tools, and subsidizing clinical research training at the University of Pittsburgh.

C.4 Secure external funding to facilitate the growth of our subspecialty fellowship programs and other clinical education programs.

C.5. Create the Center for Clinical Investigation.

C.6 Increase recruitment of talented PhDs in specific research areas.

IV. Service Excellence through Staff Empowerment and Teamwork

Current State — Successes and Opportunities

Children’s employees are among the very best in their fields — from service employees to clinical staff, administrators, researchers, and other professionals. They understand that each child’s — and family’s — needs are unique and that outstanding care must be delivered in a coordinated and compassionate manner. Our employees have proven, through our journey to a paperless campus, transition to a new hospital, and numerous other examples of skillfully adapting to the dynamic health care industry, that they are both proactive and progressive.

We strive to ensure that both our current and newly hired employees have the knowledge and skills required to deliver quality patient care in a rapidly changing and technologically advanced environment. This not only includes knowledge specific to their job or area of expertise but also a deep understanding of Children’s core values.
While our levels of communication and teamwork are high within our traditional department and divisional structures, there is significant opportunity to improve our collaboration across organizational boundaries and disciplines. Hand offs or transitions create the greatest risk for process failure. We must move toward a goal of creating individual and hospital-wide work environments that foster dignity and respect — among departments, among our leadership teams, between physicians and our employees, and among each and every employee regardless of their role.

**Future Vision**

Looking to the future, employees across all departments will learn to appreciate one another’s important roles in achieving our mission. Improved communication across departments, 360-degree reviews, and increased transparency will enable us to identify collaborative opportunities and help us provide a seamless experience to patients and families.

Our work environment will transform into one of dignity and respect at all levels. Our relationships — inter-departmental, leader to leader, physician to employee and between each and every employee on our campus, will be based on an appreciation of our distinct roles and responsibilities in the patient and family care continuum. We will not deflect blame to others because we are all Children’s Hospital. We will not make anyone feel inferior or make any employee feel that their role is not significant. Our leadership has a specific responsibility and accountability to focus on and address any and all behaviors that are not supportive of a culture of dignity and respect. Children’s leaders will actively seek to break down silos or barriers between departments and eliminate turf battles, which are highly unproductive and impede progress.

Children’s will be a work environment in which everyone is enabled to achieve to their full potential and advance in their careers. By empowering staff and creating a culture where employees and physicians can routinely perform at their highest level, we will become a high reliability organization, consistently providing exceptional service for our patients, families, visitors, referring providers, and other key customers.
Priorities

D.1 Achieve Magnet status.

D.2 Improve Children’s Hospital recruitment assessment and selection processes to ensure cultural fit of hires.

D.3 Implement and fine tune the entire spectrum of on-boarding processes beginning with recruitment/selection and ending with the completion of department/job specific orientation and full productivity.

D.4 Evaluate and improve performance and talent management processes resulting in both employee and leadership accountability for culture.

D.5 Establish a culture of accountability by defining roles and communicating service standards at all levels of the organization.

D.6 Drive patient satisfaction results to place Children’s in the top ten percent across all Children’s hospitals.

D.7 Proactively seek feedback from patients, families, visitors, referring physicians, and other customers and incorporate their perspectives into our work.

V. Operational Efficiency through Innovation and Process Improvement

Current State — Successes and Opportunities

Children’s has proven its ability to successfully execute a complex operational plan, with recent examples including: 1) dramatic improvements in access to our subspecialty physicians for outpatient appointments; 2) the transition to a fully automated, paperless hospital; 3) the move to our new campus; and 4) a rapid response to the H1N1 influenza pandemic. Children’s is now focused on providing excellent service in a timely, cost-effective manner. We believe that our performance in fundamental operational metrics including wait times in the emergency department; lab and pharmacy turnaround times; inpatient length of stay; physician office throughput, and operating room efficiency is currently below our standards and must be a point of emphasis.
Future Vision

Children’s will establish a robust internal process for resource need and allocation. By further centralizing financial and clinical metric reporting, Children’s will be able to establish a baseline service standard and have an ability to track growth and systematic improvement over time. We will focus significant time and resources in defining and maximizing patient flow and throughput throughout the entire hospital. Reducing delays and optimizing flow will result in reduced turnaround time, improved workflow, operating expense reductions, and a motivated and empowered workforce. We will continue to break down institutional silos to allow rapid and efficient process improvement across the organization.

Priorities

E.1 Define the optimum performance state and identify opportunities to smooth patient flow and reduce unnecessary delays in key operating areas including: Emergency Department, Inpatient units, Operating Rooms, Ambulatory Clinics, Ancillary and Support Departments.

E.2 Work with clinical leadership to simplify workflow and enhance automation opportunities.

E.3 Increase staff productivity by leveraging automation, creating efficiencies within and across departments, and encouraging innovative thought at all levels of staff.

E.4 Benchmark and actively manage our revenue and expenses per unit of service to ensure the long term financial health and stability of the hospital.
Tactical Planning & Implementation

This strategic plan should serve as a framework or roadmap for helping us to become the world leader in children’s health. It should be used by Children’s leadership to stimulate creative thinking, thoughtful conversation and healthy debate. All vice presidents, directors and division leaders are asked to review the key concepts of this document with their respective departments and teams. The **5 Strategic Imperatives** and **5 Year Outlook** should be the foundation for the directors’ annual tactical and capital equipment plans which need to be completed and submitted to vice presidents by February 10, 2010. A template tactical and capital plan will be provided to each director by their respective vice president. The plans will be reviewed and evaluated by executive leadership in preparation for the FY2011 operating and capital budget process.

**Strategic and Financial Planning Cycle**

- **Assess Progress & External Environment (SWOT Analysis)**
  - September – October

- **Complete Fiscal Year Operating & Capital Budgets**
  - March – June

- **Set the Vision Strategic Imperatives & 5 Year Outlook**
  - November – December

- **Develop Tactical & Capital Plans**
  - January – February