

Section 2.2 Plan

Setting and Monitoring Goals for CCC

This tool describes the importance of setting goals for a community-based care coordination (CCC) program and monitoring results toward achievement of the goals.

Time needed: 3 hours

Suggested other tools: CCC Maturity Assessment; CCC Program Change Management; Physician Engagement in CCC; Workflow and Process Analysis/ Redesign/ Optimization for CCC tool suite

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How to Use

1. As the community-based care coordination (CCC) program is being planned and designed, the governance team should recognize the importance of goals and **engage all stakeholders in establishing goals** for the program that are specific, measurable, achievable, realistic, and time-based (SMART).
2. **Goals should be widely circulated** throughout the community, acknowledging the participation of all stakeholders in their development and seeking continual input on their refinement.
3. According to the timeline established as part of goal setting, the CCC program should **monitor achievement of milestones**, celebrate success, and use the *Monitoring Goal Achievement* section of this tool to correct course as needed.

Importance of Goals

A community-based care coordination (CCC) program strives to address the overall Triple Aim of improved quality, cost, and experience of care. This triad is the focus of federal shared savings/shared risk initiatives and other private value-based purchasing programs. It is critical to not only creating a healthier population with less cost and more satisfaction, but also the individual CCC program participants' bottom lines.

Monitoring achievement of specific goals helps quickly pinpoint the need for course correction where necessary and allows for celebration of success.

Engaging All Stakeholders in Writing Goals

Goals are most acceptable to those who must help achieve them when goals are written with all stakeholders' interests considered. To do so, all stakeholders must at least be represented during the process of writing goals. Even when the governance of the CCC program includes representatives of all stakeholder organizations (e.g., hospitals, clinics, community service organizations, patients), it is important to include not only their leadership – including those who serve on the board of directors – but also those who actually perform the work. It is very likely that those closest to the work itself will have insights that can help clarify components of the goal. These persons can also share with their peers their experience in helping to write the goals.

While it is probably not necessary to conduct a formal vote to accept the goals by all they have an impact upon, presenting the goals in a manner that leaves open the possibility for improvement in how the goal is written can be important. In addition, presentation of the goals should be accompanied by information on how goal achievement will be monitored and course corrections made (see Monitoring Goal Achievement section in this tool).

Writing SMART Goals

Writing specific, measurable, achievable, realistic, and time-based (SMART) goals will ensure that they are clear to all and can be used to guide work and evaluate progress. Too often organizations write goals that are global platitudes that sound good, but are not workable. For example, a goal of a CCC program may be to improve quality of care. But this does not explain specifically what care is referenced, how to measure the quality of care, or what to do to in order to make quality of care better.

Writing effective goals is not easy, but can be aided by breaking down goal statements so that they address the following SMART goal characteristics:

Specific. Goals should identify who, what, where, when, and why. They should be well defined and clear to anyone who has a basic knowledge of the way the CCC program works. Goals not only need to be *Significant* enough to make the investment in achieving the goal, but they need to be *Stretching* so the program can push itself to continuously strive for improvement.

Measurable. “If you can't measure it, you can't manage it” is a common business mantra. Goals should answer the questions how much, and how many? That way you can determine when a goal has been accomplished. To be measurable, goals must contain specific *Metrics*, be *Meaningful*, and be *Motivational*.

Achievable. In addition to the need to develop *Attitudes* and *Abilities* to reach the goals being set, gaining consensus on *Acceptable* goals to which *All* stakeholders can

commit to **Attaining** is critical as well. Goals need to be **Action-oriented** if they are going to guide your program to success.

Realistic. Goals should be **Realistic, Relevant, Reasonable, Rewarding, and Results-oriented**. Goals must reflect the availability of resources, knowledge, and time so they can be achieved. Set the bar high enough to be meaningful in light of the investment made to **Reach** the results, yet not so far afield that you become frustrated in attempting to achieve them.

Time-based. Enough time for acclimation to the various components of the CCC program is necessary to support achieving goals. Goals need to be **Timely, Tangible, and Trackable**. Applying milestones to each goal helps make their achievement more realistic, although allotting too much time to attain goal achievement may suggest that the goal is not important or meaningful for your program. Specific metrics make the goal tangible and enable your organization to track its accomplishments. If a goal is achieved within the timeframe established, celebrate it. If it is not accomplished by the designated milestone, analyze why it has not been achieved.

Template for Writing SMART Goals

Goal setting is often difficult for health care stakeholders, and especially for physicians, for many reasons. The Physician Engagement tool describes the cultural norms surrounding personal responsibility for patient care. The fear of doing harm to patients goes back to the days of Hippocrates, whose first rule of patient care was “do no harm.” This extreme fear of failure can paralyze physicians – and in turn others with whom they work – to the point that they cannot tolerate failure in any situation. A rational person would recognize that failing to achieve one milestone in a CCC program does not result in severe harm to patients, and can be corrected over time. As a result, many health care stakeholders prefer not to write goals, so they do not have to face the fact that it is very likely that some goals may not be able to be met, at least not on the first pass at writing goals for a new environment, such as the CCC program.

When SMART goals are written using a template such as the example below, the logic behind the goal becomes clearer and more acceptable. Use the template to help write your goal statements. Note that the goal in the example might be considered an intermediary goal to the ultimate Triple Aim goals. It is critical that patients be recruited into a CCC program for the program to achieve the ultimate goals associated with improvement in quality, cost, and experience of care.

The following is a well-stated SMART goal for the CCC program:

“XXXX number of patients, consistent with other CCC programs of our size, will agree to participate in the CCC program and will have engaged at least once with the care coordinator within the first X months of obtaining collateral materials that will aid the care coordinator in convincing patients identified at risk to actively participate in the CCC program.”

This goal may have been written as a result of using the following template:

SMART Goal Writing Template				
Focus of Goal: Intermediary - Patient Recruitment into CCC Program				
Specific	Measurable	Achievable	Realistic	Time-based
Focuses on recruitment of patients into the CCC program; essential to begin working with them and their providers to reach subsequent goals	XXXX number of patients agree to engage (i.e., meet CC in office, speak to CC on phone, host CC at home, respond to CC email, etc.) at least once	Collateral materials (e.g., brochures, scripts and “sales techniques”) are identified as key supporting tools for care coordinators to be successful in recruitment	The CCC program has researched and determined that other similar programs have been able to achieve this goal	Within X months of collateral materials supplied to the care coordinator to aid in recruitment

Monitoring Goal Achievement

Monitoring goal achievement is essential – not only for the direct purpose of ensuring results but for the indirect purpose of reassuring stakeholders that their work on goal setting was important and to reassure them there is a process to correct course as needed. There are two key tools that can (1) help monitor goal achievement and (2) diagnose the cause of not achieving a milestone goal so that course correction can be undertaken.

Some organizations use the template for writing SMART goals to also track progress on goal achievement and to document outcomes of the monitoring. The two additional columns on the right can be added to the above template for this purpose:

SMART Goal Monitoring						
Focus of Goal: Intermediary - Patient Recruitment into CCC Program						
Specific	Measurable	Achievable	Realistic	Time-based	Milestone Measure	Results of Root Cause Analysis
	XXXX patients			X mos.	XXYY patients recruited (10% short)	Patients who chose not to participate were primarily those of ABC Clinic. Workflow and process analysis revealed that there were issues with identifying which patients needed CCC, and two of the three physicians were not contacting the CC about potential patients to recruit or were not introducing their patients to the CC when present. Set X mos. after resolving patient identification issue in the EHR and retraining physicians as next milestone.

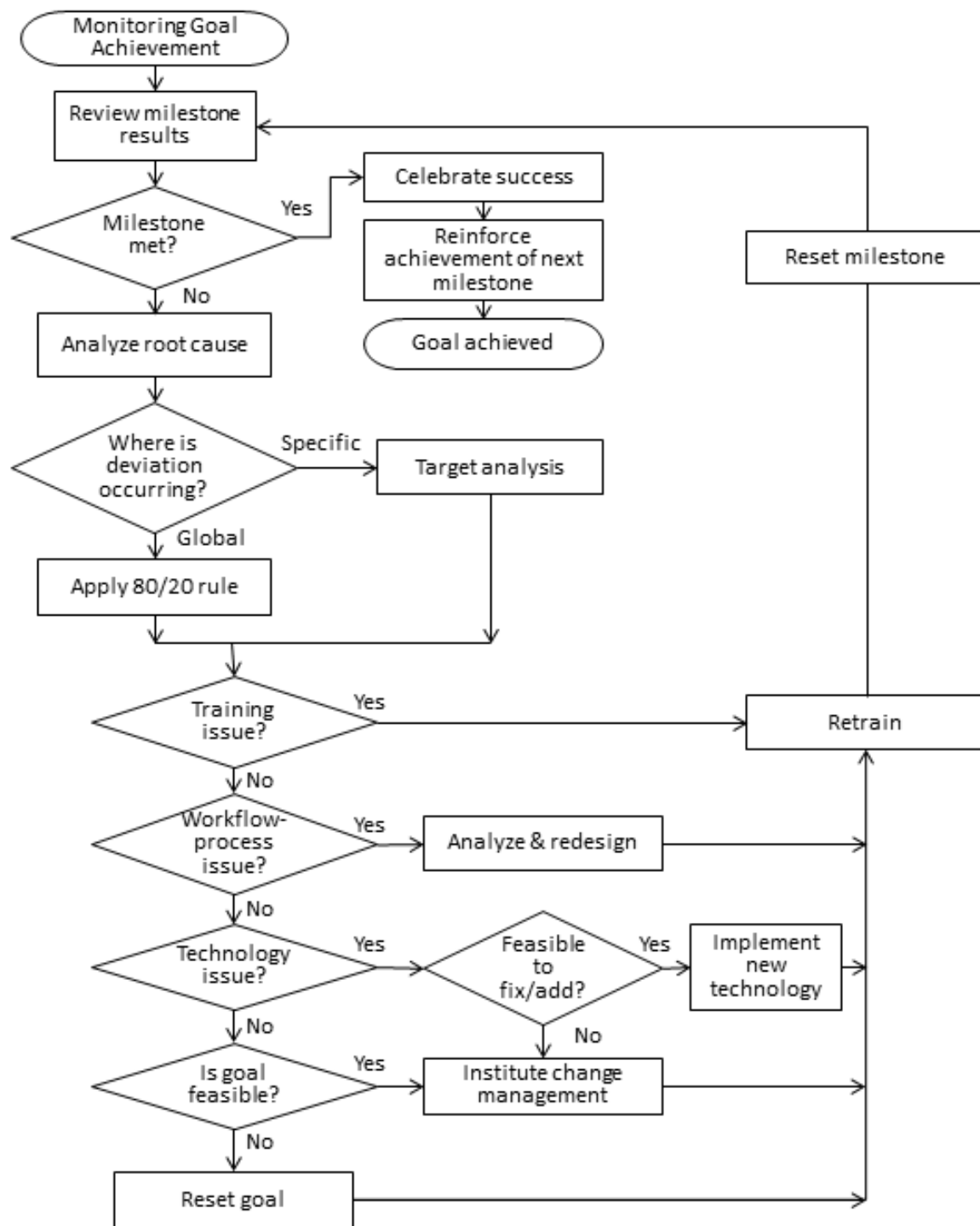
The flowchart below illustrates the general process for monitoring goal achievement. It is designed to remind CCC programs of the importance of both celebrating success and correcting course.

- ***When a milestone is achieved***, it is very important to acknowledge this with all stakeholders in a manner that celebrates the achievement. As a CCC program focuses on improving communications with patients and empowering them, so too should the program improve communications with all stakeholders – which in turn will empower them to continue.
- ***If a milestone goal is not achieved***, the root cause must be determined and appropriate action taken in order to ultimately achieve the goal. In the example, it was first determined that the patients not able to be recruited were primarily from a specific clinic. When the clinic was approached, further investigation found both a technological issue and a training issue. Plans to address these were made and a new milestone was established to reevaluate progress.

There are many issues that could be root causes for not achieving milestone goals. Training issues, workflow or process issues, technological issues, and feasibility of goals are major categories. Within each of the possible root causes, the team investigating how best to correct course needs to drill further down.

Monitoring Goal Achievement Process Flow

The monitoring goal achievement process illustrated in this flowchart helps make detection of root cause(s) more objective and provides for accountability.



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Stratis Health • Health Information Technology Services

952-854-3306 • info@stratishealth.org

www.stratishealth.org

