Business Plan Part 2: Action Plan

Dignity Health Action Plan

 Dignity Health was founded in 1986 and has since made it their goal to meet the needs of every patient that walks through the door. They have more than 60,000 staff members and provide quality service in 21 states. Dignity Health is the fifth largest health care system in the nation, and the largest provider in the state of California.

**Description of the Project**

 My business plan for Dignity Health, is to create a curriculum for the residency program that teaches and trains the staff on the importance of providing quality, comprehensive health care by staying up-to-date with technology changes as well as the constant changes in health care. The curriculum would be called Graduate Medical Education (GME).

**History/Rationale**

Although Dignity Health has eleven teaching hospital sites, they are lacking in the curriculum that is offered to post-graduate students. It is important for residency staff to continue with their education while gaining necessary clinical experience. With the constant changing health care environment, it is important to stay up-to-date with technology changes as well as keeping the curriculum current with the changing policies and procedures. With the residency training program, recent graduates will be able to learn medicine while also adhering to the mission and vision of Dignity Health and providing patients with compassionate, quality care.

**Market Analysis**

 Many other residency programs are being offered all across the United States. While we only currently serve Arizona and California, it is important we step our game up to ensure we have the best curriculum, so people all across the United States want to complete their residency at Dignity Health.

 Other residency programs around Arizona and California offer a wider variety of clinical specialties than Dignity Health currently does. We currently offer seven specialty residency programs while our competitor offers eleven.

**Goals/Outcomes**

 One major goal of developing a curriculum for the residency program is for Dignity Health to be the leading public academic health care system in the United States. This can be done be allowing the opportunity to create a program that allows residency staff to learn in a real-world environment while being under the mentorship of Dignity Health’s teaching physicians.

 Another goal is to identify technology changes that may affect the residents or the teaching staff. One way to do this is for the staff to monitor the technological changes that may affect the residents and document them on a spreadsheet. Another way to reach this goal is to administer monthly surveys to get feedback from the residents to determine if they have everything they need to provide quality, compassionate care. Lastly, a survey could be administered after each block that provides evaluative feedback regarding the value and effectiveness of training.

**Structure**

 Since Dignity Health already has a residency program, it already fits into the current structure of the organization. What it needs, is a revamping. It needs updated training tools and material and additional training for teaching physicians. This will allow Dignity Health to recruit and train the most talented physicians and provide them with the necessary support to help further the mission here at Dignity Health.

**Financial Data Overview**

 Funding for the program is already provided through the Centers for Medicare and Medicaid Services (CMS) for direct and indirect support, supplemented with clinical income.

 A recent study was conducted to determine the revenue generated from Teaching Health Centers (THC). “The median revenue-generation level across all programs (ambulatory and inpatient visits) was $46,535 per resident- but with wide variation. The median at expansion programs was $111,267” (Robeznieks, 2017). This same study concluded the median cost for training a resident would be $157,602. For expansion programs, the median cost would be $144,999. However, under the Affordable Care Act there is a five-year initiative that appropriates $60 million per year and provides $95,000 per resident (Robeznieks, 2017). Revenues and visits increase as the residents gain experience and require less supervision.

 “The American Medical Association (AMA) has awarded $12.5 million in grants to 32 of the nation’s leading medical training schools to develop an innovative curriculum that can be implemented all across the country” (American Medical Association, 2018).

**Personnel/Staffing**

 Since Dignity Health already has numerous residency programs, no new hires will be needed for this business plan. What will be needed is additional training for teaching staff, updated training materials and support from teaching staff and residency staff.

**Implementation Schedule**

 Since the residency programs already meet the Accreditation Council for Graduate Medical Education (ACGME) requirements, the only real requirement would be to provide training for the teaching physicians and all necessary staff. Since this will have to be done in blocks, so our current residency programs can continue operating smoothly, this will take 3-6 months to have every teaching physician put through training. Updated training material will need to be put together and technological changes will need to be monitored closely so all training material for residents stays current and up-to-date. This will take an additional month to get together.

References

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