

**LSU HEALTH SCIENCE CENTER –  
SHREVEPORT**

**E.A. CONWAY MEDICAL CENTER**

**Strategic Plan  
July 1, 2004 – June 30, 2010**

Revised: September 1999  
Revised: June 2001  
Revised: October 2002  
Revised: June 2004

# **I. THE PURPOSE OF E.A. CONWAY MEDICAL CENTER**

**Overview**

**Mission Statement**

**Vision Statement**

Revised: September 1999  
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## Overview

E.A. Conway Medical Center is an acute care teaching facility licensed for the operation of 247 beds by the Department of Health and Hospitals. Louisiana State University Health Science Center-Shreveport has oversight responsibility for E.A. Conway Medical Center. The hospital received a three-year accreditation by the Joint Commission on Healthcare Organization in November 2003. Laboratory and Blood Bank operations are accredited by the College of American Pathologists and the American Association of Blood Banks.

The facility provides inpatient and outpatient medical care to the residents of a 12-parish service area in Northeast Louisiana. The medical center service area comprises the parishes of Caldwell, East Carroll, Franklin, Jackson, Lincoln, Madison, Morehouse, Ouachita, Richland, Tensas, Union, and West Carroll. Census data for 2003 showed a service area population of 480,237. The 2003 average parish unemployment rate for the Region 8 Service Area is 11.33% (ranging from 4.9% to 19.3%). The 2003 Income Data shows that the below poverty income level families averaged 24.47% (ranging from 16.8% to 39.9%) of the population in the Region 8 Service Area.

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## **MISSION STATEMENT**

### **E.A. Conway Medical Center has adopted the following mission statement:**

To provide quality healthcare education, patient care, and research in a safe and secure environment.

## **VISION STATEMENT**

### **The organizational vision statement includes the following:**

Be a value driven organization that improves organizational performance and strives to achieve excellence in healthcare delivery, education, and practice.

Be sensitive and adapt to changes in healthcare delivery to meet the expectations and needs of the community.

Manage disease processes through standards of care and clinical pathways to reduce complications, decrease costs, and improve outcomes.

Enhance healthcare delivery through efficient and accurate information management systems with a goal to increase the use of automated systems while maintaining patient confidentiality.

Foster a work environment that supports the retention of competent, qualified staff to promote community support and confidence.

Foster a work environment that attracts and supports the retention of competent, qualified staff to promote community support and confidence.

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# **Philosophy**

## **Integrity**

We will place the quality of life first while maintaining an atmosphere of mutual trust and respect. We honor and direct, open, honest, and collaborative leadership in our medical and business practices.

## **Respect**

We treat others, as they would want to be treated and cared for. We will recognize and reward the contributions and accomplishments of all members of the health care team. We support decisions made to achieve professional and personal balance in the lives of the team members.

## **Accountability**

We will be committed to personal and organizational goals and expectations and will constantly strive to do our best.

## **Innovation**

We will encourage and support creativity. In addition, we advocate learning and continuous improvement. We take pride in our work and celebrate success.

## **Compassion**

We value treating people, as they would like to be treated by working to understand their feelings, and diverse cultural needs.

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## **Commitment**

We continuously strive to foster an environment where employees are invested in providing the optimal outcomes for our patients. We want our interactions to result in constructive dialogue and outcomes.

## **Diversity**

We work to build organizational strengths through teamwork. We honor and respect individual differences in style, culture, experience, race, education, gender, sexual orientation, and religion.

## **Growth**

We value, accept, and encourage participation and involvement in all efforts. We strive to grow as an organization and to sustain improvements that are accomplished.

## GOALS AND OBJECTIVE

**Goal 1:** To ensure that the medical center serves patients, staff, and community in the most effective and efficient manner possible.

**Objective 1.1:** Promote effective/appropriate patient utilization of Emergency Department services.

**Strategy 1.1.1:** Multi-disciplinary team reviews current patterns of patient management in the Emergency Department and make recommendations to Administration.

**Strategy 1.1.2:** Monitor resources needed to maintain a non-emergent patient clinic.

**Strategy 1.1.3:** Utilize high-volume users registry.

**Strategy 1.1.4:** Educate and direct patients to more appropriate healthcare options.

**Strategy 1.1.5:** Study and improve the admission and assessment process affecting the Emergency Department patients.

### Performance Indicators:

PI Type	Performance Indicator Name
Output	Number of high volume users of the Emergency Department
Outcome	% change of high volume users of the Emergency Department
Output	Number of Emergency Department visits
Outcome	% change in number of Emergency Department visits

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**Objective 1.2:** To develop a more patient/family focused approach to the birthing/bonding process.

**Strategy 1.2.1:** Expand education/awareness of Labor and Delivery Room birthing opportunities.

**Strategy 1.2.2:** Expand physical resources to create an environment more inclusive for family within the Labor and Delivery area.

**Strategy 1.2.3:** Work with community partners to increase awareness of available Labor and Delivery services.

**Performance Indicators:**

PI Type	Performance Indicator Name
Output	Number of births
Outcome	% change in number of births
Quality	Measure of Patient Satisfaction

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**Objective 1.3:** Decrease fetal and infant mortality rates in partnership with regional maternal-child health stakeholders, through regional evaluation of mortality factors, development of improvement strategies, and implementation of targeted interventions.

**Strategy 1.3.1:** Increase community awareness of the high fetal and infant mortality and its contributing causes in northeast Louisiana.

**Strategy 1.3.2:** Motivate the community to accept ownership and identify causes of the high mortality rates and serve as a catalyst for a community strategic planning response.

**Strategy 1.3.3:** Work within the community to develop and implement targeted intervention programs.

**Strategy 1.3.4:** Collaborate with community partners in an ongoing evaluation process of current programs and newly developed interventions.

**Performance Indicators:**

PI Type	Performance Indicator Name
Output	Number of fetal and infant deaths
Outcome	% change in number of fetal and infant deaths
Output	Number of case review (cases = stillbirths and infant deaths)
Outcome	% of change in number of cases reviewed.

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**Objective 1.4:** Maintain excellence in patient care delivery at E. A. Conway Medical Center for the citizens of Louisiana.

**Strategy 1.4.1:** Multi-disciplinary Performance Improvement Team evaluates usage of unit to include efficiency of the admission to and the discharges from the units.

**Strategy 1.4.2:** Enhance monitoring systems for internal transfers including transfers from the Emergency Department.

**Strategy 1.4.3:** Gather statistical information on inpatient days, outpatient clinic visits, number of beds available, percentage of occupancy, cost per adjusted patient day and discharge, and patient satisfaction survey rating.

**Strategy 1.4.4:** Explain any 5% variance from the performance standard used to measure the activity.

**Strategy 1.4.5:** Maintain excellence in patient care by efficiently using all available resources related to the delivery of health services to adults and children.

**Strategy 1.4.6:** Continue to improve on the healthcare education and training for services to children.

**Objective 1.4:** Maintain excellence in patient care delivery at E. A. Conway Medical Center for the citizens of Louisiana.

**Performance Indicators:**

PI Types	Performance Indicator Name
Output	Inpatient Days
Output	Outpatient Clinic Visits
Output	Number of beds available (excluding nursery)
Output	Percentage of Occupancy (excluding nursery)
Output	Average daily census
Output	Average length of stay for psychiatric patients
Output	Average length of stay for medical/surgery patients
Output	% of readmissions
Efficiency	Cost per adjusted patient day (including nursery)
Efficiency	Cost per adjusted discharge (excluding nursery)
Quality	Patient Satisfaction Survey

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**Goal 2:** LSUHSC – Shreveport/E.A. Conway Medical Center creates a learning environment of excellence, preparing students for career success and encouraging creative activity.

**Objective 2.1:** To maximize the benefits of educational opportunities and patient care encounters for medical residents, nursing, and other allied health students to promote personal and professional growth and to integrate scientific knowledge with clinical experiences.

**Strategy 2.1.1:** Create coordinated partnerships between healthcare facility and schools to provide student orientation, establishment of rotation schedules, and understanding of roles and performance expectations of students and agency and facility personnel.

**Strategy 2.1.2:** Enhance and encourage opportunities for student learning through participation in hospital wide educational activities or certification programs (i.e. ACLS, PALS, BLS, inservices, Audiovisual Library, Medical Library, etc.)

**Strategy 2.1.3:** Participate on school advisory committees or provide ongoing feedback about school curriculums to facilitate the coordination of clinical experiences and to assure adequate resources to accomplish the program and facility objectives.

**Strategy 2.1.4:** Solicit feedback from students on all aspects of their clinical experiences including recommendations for improvement.

### Performance Indicators:

PI Type	Performance Indicator Name
Output	Number of Allied Health students trained
Outcome	% change in number of students

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**Goal 3:** To promote preventive healthcare for LSUHSC patients and the community.

**Objective 3.1:** Increase the number of disease preventive screening by 5% per year until 2010.

**Strategy 3.1.1:** Support the increase in the number of cancer screening through the Partners In Wellness program with emphasis on prevention.

**Strategy 3.1.2:** Attend community health fairs to discuss health education and to explain the importance of health to learning.

**Strategy 3.1.3:** Send follow-up and reminder cards/letters.

**Performance Indicators:**

PI Type	Performance Indicator Name
Output	Number of cancer screenings
Outcome	% change in number of cancer screenings

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