



Shaping the Future of Pediatric Healthcare

Strategic Plan 2012 to 2016



Our Mission

We believe all children have unique needs and should grow up without illness or injury. With the support of the community and through our spirit of inquiry we will prevent, treat and eliminate pediatric disease.



Our Vision

Our founding promise is to care for every child in our region, regardless of their family's ability to pay. Over the next five years, we aspire to:

- Provide the safest, most effective care possible.
- Control and reduce the cost of providing care.
- Find cures and educate clinicians and researchers.
- Grow responsibly and provide access to every child who needs us.

Letter From CEO and Chairman of the Board



Thomas N. Hansen, MD
CEO Seattle Children's

James R. Ladd
Chair, Seattle Children's
Hospital Board of Trustees

We don't have a crystal ball at Seattle Children's, but our vision for the future is clear: we want to be the best children's hospital.

Our new strategic plan provides a way to help us navigate each step of the way.

Over the last year, we've gained a deeper understanding of what it will take to thrive going forward. Our strategic plan is the product of what we learned and will direct our growth for the next five years.

While the strategic plan points us toward the future, it is shaped by a vision that has driven us for more than 100 years – that all children should grow up without illness or injury.

Our founding promise is to care for every child in our region who needs us, regardless of their family's ability to pay. This plan will help us navigate a rapidly changing healthcare environment to keep that promise.

The strategic plan describes in detail where we want to go and how we expect to get there. Please join us on our journey.



Strategic Overview

Seattle Children's was ahead of its time when it was founded in 1907 as the first hospital west of the Mississippi to specialize in treating children.

More than 100 years later, we remain a leader in pediatric medicine by delivering world-class care to children from the largest geographic region in the country: Washington, Alaska, Montana and Idaho.

We are proud of how much we have grown and how far we have come, but we never stop thinking about where we are going and how we will get there.

Our new strategic plan provides a way to honor our promise and achieve our mission while navigating a future filled with rapid change.

We will continue to recruit and retain the best faculty and staff to accomplish these objectives.

Children's new strategic plan will guide the growth of our clinical, research and educational programs for the next five years.

Provide the safest, most effective care possible

Control and reduce the cost of providing care

Find cures and educate clinicians and researchers

Grow responsibly and provide access to every child who needs us



The plan will help us meet our vision by keeping us focused on four key goals:

- **Provide the safest, most effective care possible.** We will standardize our care processes and strengthen our systems to prevent and respond rapidly to medical errors. We will complete the transition to an electronic medical record system.
- **Control and reduce the cost of providing care.** We will collaborate with healthcare partners to develop new payment models; coordinate all aspects of care for children; and continue to use CPI (Continuous Performance Improvement) to become as efficient as possible in everything we do.
- **Find cures and educate clinicians and researchers.** We will grow our groundbreaking research to develop new cures; enhance both our training for residents and our continuing medical education program; and ensure that all patients benefit from our research.
- **Grow responsibly and provide access to every child who needs us.** We will have a bed available for every child who needs one; reduce wait time for specialty care and expand access to our services locally and regionally; and collaborate with other healthcare providers to share our clinical expertise.

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possible



Provide the safest, most effective care possible

Eliminate medical errors by focusing on systems, people and technology.

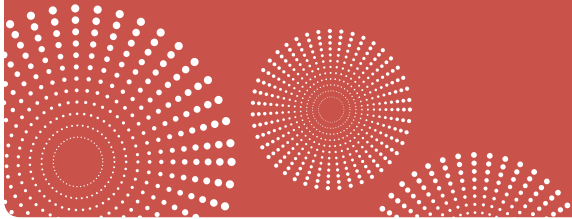
- **Systems:**
 - Accelerate the implementation of Clinical Standard Work.
 - Establish systems to prevent and respond rapidly to medical errors and hospital-acquired infections.
- **People:**
 - Improve our management systems to support safe practice.
 - Improve medication safety through enhanced oversight and pharmacy staffing.
 - Support a family-centered model of care.
- **Technology:**
 - Utilize technology to improve medication safety.
 - Complete the transition to an electronic medical record system.

Measure and report our progress.

- **Develop an integrated safety index to track our progress toward eliminating preventable harm.**



Our patients deserve the best: communication improves safety



When patients move from one part of Children's to another, lots of important knowledge about their history, condition and needs must move with them. It is critical that the knowledge is complete and correct – and that parents are confident in the process.

That is especially true when the move involves transferring a fragile newborn from the Neonatal Intensive Care Unit (NICU) to acute care rooms.

As part of the hospital's commitment to Continuous Performance Improvement (CPI), a group representing areas that play key roles in transferring children from the NICU introduced

several new steps to improve communication, increase family involvement and enhance transparency during the transition between the NICU and acute care teams.

The new steps are designed to ease families' anxiety and quickly connect them to the new team.


For instance, one of the steps calls for the NICU nurse to complete a nursing report and share it with the parents in the patient's room or over the phone. Physicians will exchange information in a similar fashion.

"It's hard when your child lands in the NICU," says Rick Lundeen, a parent who

worked with the group. "I wanted to be absolutely certain that knowledge about my child's unique situation was transferred – accurately and completely – from one care team to the other. Hearing about an exchange of information is one thing; actually being involved is another."

Another key step adds a visit from the NICU team to the acute care room within 48 hours, establishing better communication and a bridge for families moving between care teams.

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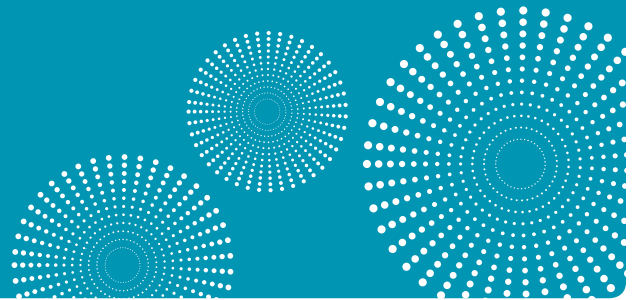
Control and reduce the cost of providing care

- Anticipate and respond to healthcare reform and the changing healthcare environment to ensure that we can continue to serve all children in our region, regardless of their family's ability to pay.
- Limit increases in our cost-per-patient so that it rises no faster than general inflation.



“The healthcare reform legislation is full of references to assessing, improving and measuring quality of care and to holding healthcare organizations accountable for outcomes,” says Mangione-Smith. “Being able to measure whether healthcare is having the desired effect on quality of life is one of the most important dimensions of quality.”

Responding to a changing environment



The rising cost of healthcare means providers must make every penny count, so it is important that doctors and hospitals know that the care they deliver improves patients' health and their quality of life.

Dr. Rita Mangione-Smith, researcher at Children's, is actively investigating how to measure those things.

Her research is extremely timely. Today, tracking outcomes and measuring quality is completely voluntary for pediatric healthcare providers. However, in the future, the Centers for Medicare and Medicaid Services will likely link

reimbursement to quality and outcome measurements.

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One thrust of Mangione-Smith's research involves using a survey called the PedsQL to look at how children are functioning physically,

emotionally, socially and in school at the time they're admitted to the hospital and then two weeks after they leave.

Mangione-Smith is the first to introduce the PedsQL survey as a routine part of every hospital admission. Her vision is for doctors at Children's to look at the data from the surveys whenever they change the approach to care for a particular diagnosis. Comparing the before-and-after quality of life reports will help them see if the new approach makes a difference.

Building on that work, Mangione-Smith is also leading an effort to develop measures to evaluate how well healthcare providers coordinate care for children with complex healthcare needs and mental health conditions, and how different services affect the quality of their lives.

"These children access services in multiple settings, and we all need to work together effectively if we want to improve their health and quality of life," she says.

Dr. Mangione-Smith provides care to a newborn patient.





Find
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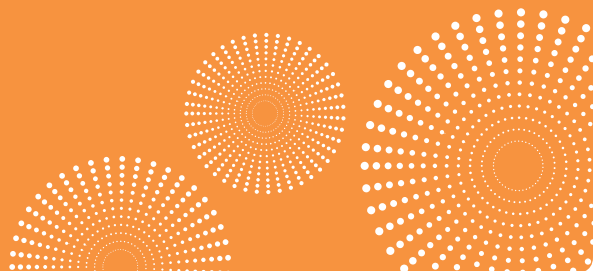
Find cures and educate clinicians and researchers

- Develop new cures through a sustained commitment to innovative research.
- Ensure every child has the opportunity to benefit from research.
- Accelerate discovery, education and sharing of our expertise globally.
- Enhance our training of new clinicians and our continuing medical education.



Dr. Ramsey (pictured above) has treated Brianna Strand (bottom right) since the age of 3. Today Dr. Hoffman (bottom left) focuses on the cures of tomorrow.

Changing lives through research and education



When Brianna Strand was 3 years old, she was very sick. No one could figure out why until she came to Children's. Within minutes of walking into the room, Dr. Bonnie Ramsey knew Brianna had cystic fibrosis (CF).

That was nearly 20 years ago. Today, Brianna is a newlywed pursuing her dream to become a veterinarian, thanks to improved treatments for CF – including important advances made by Ramsey and other researchers at Children's.

Their work has helped double the life expectancy for CF patients with breakthroughs like TOBI, an inhalable form of the antibiotic tobramycin.

“Being cared for by doctors who are world leaders in studying and treating cystic fibrosis was the answer to our

family's prayers,” Strand says.

Now, another one of Brianna's doctors who trained with Ramsey at Children's, Dr. Luke Hoffman, is on the trail of yet another possible breakthrough. His research into how different bacteria interact could produce a remedy for the chronic infections that over time cause permanent – and life-threatening – damage to the lungs of CF patients like Strand.

Most research has focused on studying individual bacterium in isolation even though many combinations of bacteria inhabit the lungs of CF patients. Hoffman decided to study how two of those bacteria – *Pseudomonas aeruginosa* and *Staphylococcus aureus* – behave together when grown in the lab.

Hoffman discovered that *Pseudomonas* produces a compound that causes *Staphylococcus* (a.k.a. staph) to grow more slowly, making it difficult to detect. The compound also makes staph highly resistant to the antibiotic tobramycin. Based on those findings, Hoffman is leading three additional studies to learn more about how communities of bacteria behave in the lungs of people with chronic infections.

“The defining characteristic of chronic lung infections is their persistence, despite antibiotic treatment,” says Hoffman. “In many cases, we don't understand why we can't cure them. Our hope is that learning more about how bacteria interact and respond to antibiotics holds the key to providing more effective treatment.”

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Grow responsibly and provide access to every child who needs us



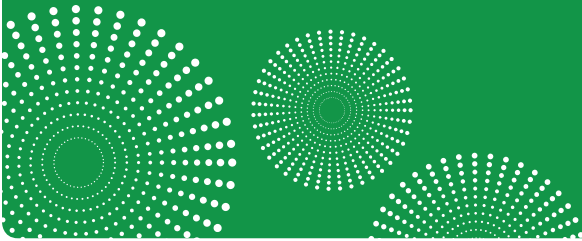
Grow responsibly and provide access to every child who needs us

- Continue to develop our current focus programs and invest in three new ones: Craniofacial; Gastroenterology; and Psychiatry and Behavioral Medicine.
- Ensure we have a bed available when a child needs it so we never have to divert a medical or surgical patient to another hospital.
- Reduce the wait time for specialty care appointments to seven days.
- Increase access to care locally and regionally.



The Towne family, whose son Ben, pictured left, was a patient at Seattle Children's, looks forward to the day when cancer patients and their families no longer have to share rooms.

Caring for every child who needs us



The world turned upside down for Jeff and Carin Towne the day their son Ben, 2, was diagnosed with an aggressive form of cancer. Although many of the details are a blur, the Townes will never forget the frustration they felt after waiting hours for a room to open up in the Seattle Cancer Care Alliance Unit at Children's – and then having to share the room with another family.

"I was beside myself," Carin recalls. "My son needed to go to bed and we desperately needed privacy to digest the news."

Children's is working to meet those needs and others by constructing a new building on the Seattle campus and building clinics to help bring care closer to home. On the Seattle campus, Building

Hope: Cancer and Critical Care Expansion is scheduled to open in 2013. The building will increase capacity and will allow us to improve care for the hospital's most vulnerable patients – children who need cancer care as well as children who need critical and emergency care.

Our existing cancer unit is overflowing. Patients often double-up in rooms, and sometimes the only available rooms are elsewhere in the hospital. When the new building is complete, our cancer program will move into an expanded 48-bed unit and each patient will have a private room, complete with sleeper sofas and bathrooms with showers.

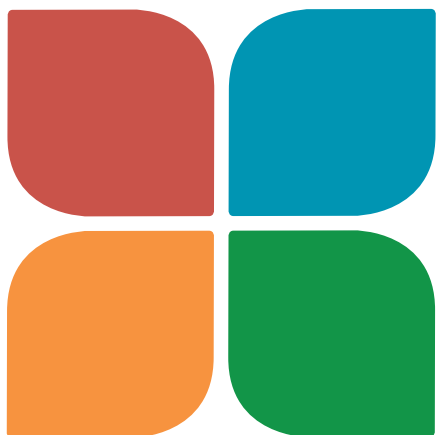
The unit will occupy the top two floors of the new building,

and the very top floor will be dedicated to adolescents and teens. Each floor will include a shared family lounge and one or two private "quiet rooms."

The Townes spent more than 100 nights at Children's while Ben was fighting cancer. Sadly, he lost the battle. Still, his parents remain grateful for the care he received and they look forward to the day the new building opens – increasing access to world-class cancer care for other children in the community who need it.

"If the children in your life have never walked the halls of Children's, you are very fortunate," Carin says. "But if they ever face a serious illness or injury, there's no other place you'd rather be."

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Laying a Strong Foundation

At Seattle Children's we embrace our unwavering commitment to prevent, treat and eliminate childhood disease.

The three entities that make up Seattle Children's and serve as our pillars - Hospital, Research and Foundation - are foundational to the heart of our story. Each is critical in our efforts to provide hope, care and cures to patients now and in the future.

It is a two-year-old bravely fighting cancer. It is a research team discovering the cures of tomorrow. It is a team of clinicians committed to providing the safest care possible to the children we serve.

And, it is the generous support from our community providing funds to support our ever-growing uncompensated care, advanced clinical care, groundbreaking research, continuing education and patient care space needs.

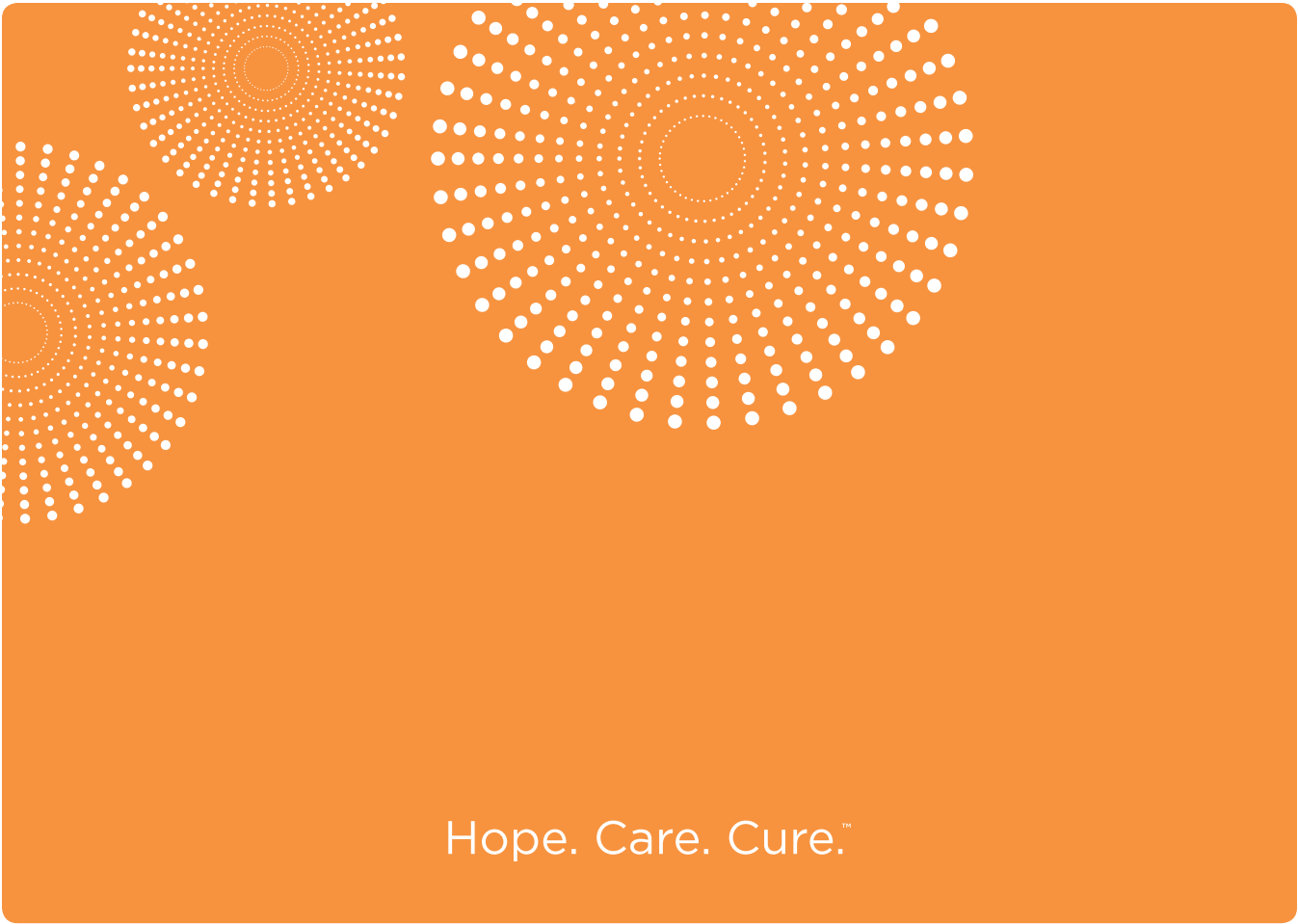
We are confident that this strategic plan positions us to both honor our past and prepare us for the future.





What will our patients and their families experience at Seattle Children's in the future?

- Patients are safe and have the most effective care possible.
 - Patients are getting the care they need when and where they need it.
 - Information flows seamlessly throughout our care system.
 - Costs of our care are affordable and we are partners with our patient's healthcare plans and providers.
 - All patients are benefitting from our efforts in research and education.
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Hope. Care. Cure.™

