

2000-2002 STATE HEALTH PLAN ANNUAL REPORT

III. STATE HEALTH PLAN REPORTING

Overview: Section three focuses on measuring the progress of implementation. A questionnaire distributed to the Lead Agencies in late 2000 is included and its results are revealed.

Lead Agency Reporting

Initiating the collection of Lead Agency performance information and evaluating implementation activities is a major component of the Authority's responsibilities during State Health Plan implementation. These activities will allow SHAG and the Authority to monitor progress toward implementing State Health Plan policies. These efforts may also create opportunities for collaboration, redirection, or expansion of implementation activities.

An initial Lead Agency reporting activity occurred in December 2000. All twenty-four questionnaires distributed were completed, representing a 100 percent response rate. Information collected from the responses suggests the following observations.

- Many appropriate State Health Plan policy assignments have been made.
- There is moderate feasibility to fully implement a majority of State Health Plan policies.
- Most of the issues Lead Agencies have been asked to address are in the growth stage. Listed in descending order, other stages indicated are beginning, mature, and declining.
- The commonly perceived degree of health care system readiness to make change accommodating implementation activities is "some".
- Some constraints or obstacles are foreseen in implementing State Health Plan policies.
- Most Lead Agencies do not foresee the need to revise their submitted work plans.
- While several Lead Agencies have begun policy implementation, most Lead Agencies have not yet accomplished any State Health Plan policy goals.
- Many of the Lead Agencies have established measures and indicators to evaluate progress in their initial work plans.
- All of the State Health Plan goals are addressed by future Lead Agency activities.
- Data collection and reporting systems monitoring policy implementation are in place for a majority of Lead Agencies.
- Many Lead Agencies will use comparative data and information to evaluate their planned implementation activities.
- The majority of Lead Agencies did not indicate specific areas needing attention at the next SHAG meeting.

The information gained from this initial reporting activity will help determine the need for a Lead Agency Fall retreat. Compiled questionnaire responses were presented to and discussed with SHAG members in a March meeting. If a retreat is desired, the Group can draw conclusions from these responses to develop the structure of the meeting. The complete questionnaire and analysis of the results follow.

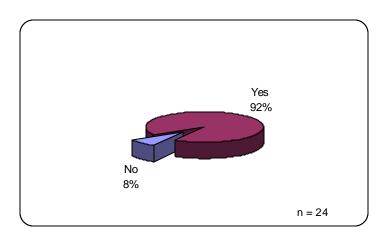
Survey and Survey Results

2000-2002 State Health Plan Implementation - Lead Agency Reporting

For Questions 1-5, provide an assessment of your current ability as a Lead Agency to accomplish your policy. Scores range from 1-5.

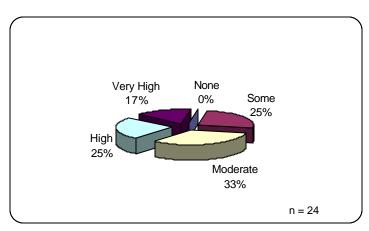
1. Do you consider the State Health Plan policy to be currently within your **agency's current vision and mission**?

No Yes



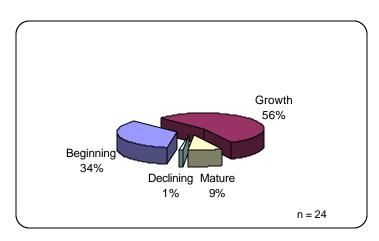
2. How **feasible** is it that your State Health Plan policy will be able to be fully implemented by December 31, 2002?

None 1 Some 2 Moderate 3 High 4 Very High 5



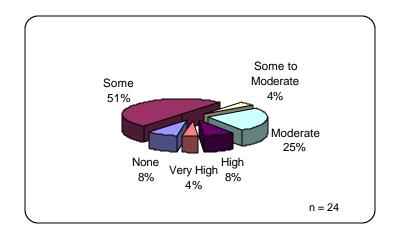
3. What do you consider to be the **lifecycle stage** of the issues you have been asked to address?

Beginning 1 Growth 2 Mature 3 Declining 4



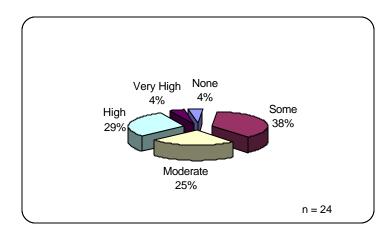
4. What degree of **readiness** does the Health Care System have to make changes to accommodate your proposed implementation activities?

None 1 Some 2 Moderate 3 High 4 Very High 5



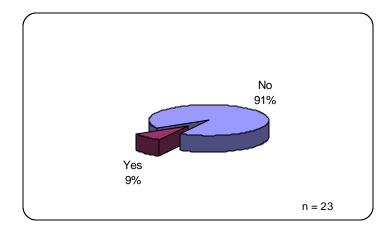
5. Do you foresee any **constraints or obstacles** in being able to implement the State Health Plan Policy?

None 1 Some 2 Moderate 3 High 4 Very High 5



6. Do you foresee the need to **revise** any previously submitted work plan information?

No Yes



7. How many of your policies have been **accomplished**?

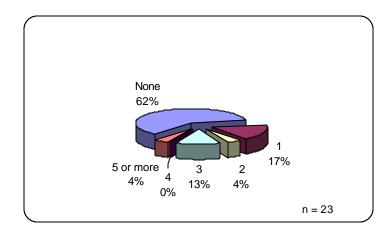
None

1

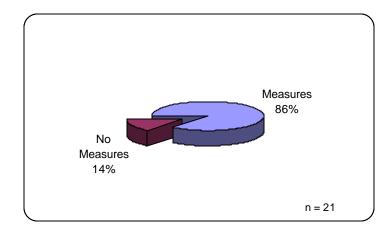
2

3

5 or more



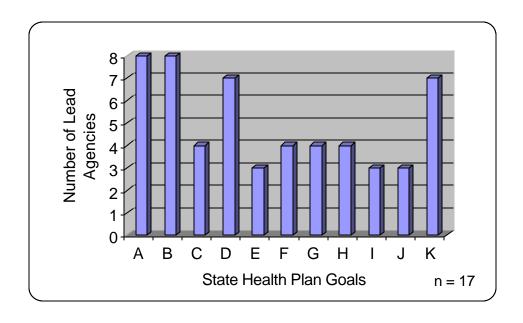
8. Identify the measures/indicators used to evaluate the direction, progress and use of planned activities and resources identified in the initial work plan. If these measures or indicators have not been identified, please describe the ones that will be used.



- 9. You will recall that the State Health Plan vision for the health care system is to:
- (1) Improve the health status of the residents of West Virginia by developing a patient-centered, community-based, integrated health care system of health promotion, disease prevention, and curative and treatment care services.
- (2) Provide a health care system that effectively integrates the delivery of a full continuum of health care services for residents of West Virginia that advances and promotes health in a way that is accessible, affordable, of high quality, and cost-effective.

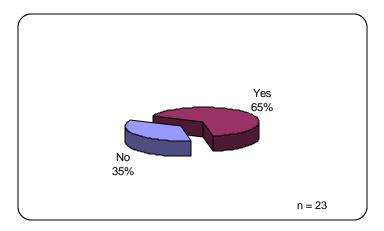
Please identify reporting assessments, measures, and/or indicators to establish and monitor the direction and use of future activities and resources to carry out the goals identified in the 2000-2002 State Health Plan. Some goals may not apply to all lead agencies. State Health Plan **Goals** are to:

- A. Access to health care services
- B. Access to health care services by special population groups
- C. Community-based services
- D. Greater personal responsibility for health care
- E. Accountability for health care services
- F. Competent health care workforce
- G. Quality of life
- H. Environment of choice
- I. Comprehensive health care information
- J. Public decision making process
- K. Health care system evaluation



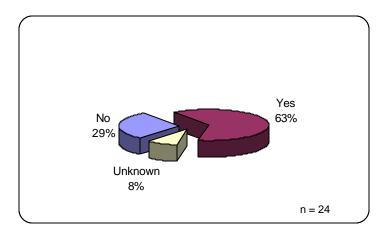
10. Are data collection and reporting systems in place to collect the information needed in items 8 and 9?

No Yes (Please specify).



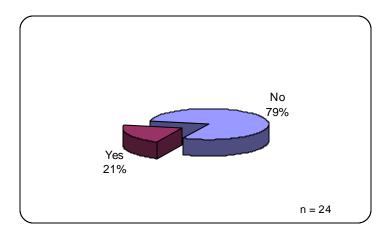
11. Will any comparative data or information be used to determine the success of your planned State Health Plan implementation activities?

No Yes (Please identify).



12. Are there any areas you would like to have addressed at the next meeting of the State Health Plan Advisory Group?

No Yes (Please specify).



Discussion areas suggested for the next SHAG meeting:

- Funding
- Uses of Health Care Authority data to analyze policy goals
- Capacity of the Health Care Authority for data analysis related to the goals
- Priority areas for the Health Care Authority
- Health care coverage concerns of the Bureau for Medical Services
- Lack of authority to develop policies requiring participation of private health care entities
- Practical applications for the outcomes of implementation activities and completion costs
- Improving the fit of assigned policies with agency vision and mission