

# HeRO Playbook 2025

Safety, quality  
and the remarkable  
patient experience



# HeRO Playbook 2025

**I'm proud to introduce the 2025 edition of the HeRO Playbook —** a refreshed and comprehensive guide that captures our collective efforts to elevate safety, quality, health equity and the patient experience at Novant Health.

As we look forward, we continue to navigate the ever-evolving landscape of healthcare with steadfast dedication to excellence, innovation and continuous improvement. The HeRO Playbook supports us in our ongoing journey to becoming a high reliability organization (HRO) and serves as a testament to our shared commitment to making a meaningful impact in the lives we touch. Your contributions are the foundation of Novant Health's legacy of safe, high-quality care. Thank you for your unwavering dedication to Our Cause to create a healthier future and bring remarkable experiences to life for our patients and communities.

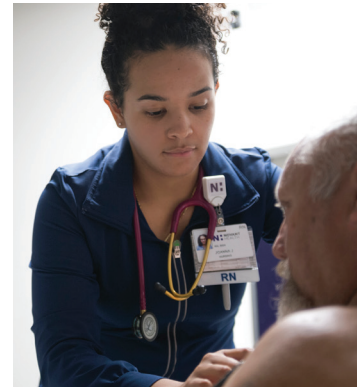
**Carl S. Armato**  
President and CEO, Novant Health

As the proud chair of the Novant Health board of trustees, I'd like to extend my heartfelt appreciation to each of you for your commitment to advancing excellence at Novant Health. The HeRO Playbook stands as a testament to your teamwork and shared dedication to delivering safe, high-quality and equitable care to the communities we serve. Your contributions bring the playbook to life, turning its principles into meaningful actions that make a lasting difference in the lives of our patients and their families. Thank you for the vital role you play in fostering a culture of safety and reliability. Your efforts inspire remarkable outcomes every day.

**Christine P. Katziff**  
Chair, Novant Health board of trustees

## TABLE OF CONTENTS

<b>HeRO Playbook overview</b>	3
Introduction	3
What is a high reliability organization (HRO)?	3
Strategic direction	4
Strategic partnerships	4
Annual goals	5
Long-term goals	6
<b>HeRO safety management system</b>	7
<b>HeRO quality management system</b>	10
<b>HeRO institutes</b>	12
<b>HeRO clinical variation reduction program (Precision)</b>	13
<b>HeRO patient experience system</b>	15
<b>HeRO population health and value-based care</b>	19
<b>HeRO health equity</b>	22
<b>HeRO regulatory and accreditation</b>	28
<b>2024 Safety &amp; Quality Symposium</b>	31



# HeRO Playbook overview

## INTRODUCTION

Welcome to the Novant Health HeRO Playbook! This playbook serves as the unifying framework for safety, quality, health equity and patient experience within our organization. Our goal is to foster a culture of continuous improvement and learning as we progress on our journey to becoming a high reliability organization (HRO), with a strong focus on prioritizing patient care. We aim to empower our leaders, physicians, advanced practice providers (APPs), nurses and all clinical staff to actively monitor and optimize the care we deliver, building on Novant Health's long-standing history of clinical excellence.

## WHAT IS A HIGH RELIABILITY ORGANIZATION (HRO)?

Our playbook is called the "HeRO Playbook" to honor our clinical teams, who deliver outstanding care around the clock. The name also plays on the concept of a high reliability organization (HRO). HRO, a concept derived from safety and quality science, emphasizes the importance of managing change and complexity in complicated systems, like healthcare, while maintaining high reliability in environments that present potential hazards. Although this concept originated in industries such as nuclear power and aviation, it is crucial that healthcare embraces these principles to prevent harm and maximize quality.

### This playbook includes:

- Current safety, quality, health equity and patient experience priorities with annual and long-term goals
- Practical tools that the organization uses to promote safety, quality, health equity and patient experience
- Data tools that give insight and benchmark our performance against like healthcare systems
- Health equity initiatives and the importance of data in ensuring that all our patients have equal access to care and comparable outcomes
- Current initiatives to reduce clinical variation in the care we provide
- Insight into the teams that support this work

## STRATEGIC DIRECTION

The Novant Health HeRO Playbook was created in 2024 to help our clinical team members unite around a shared vision for safety, quality, health equity and patient experience, while recognizing the exceptional care our teams already provide. The HeRO Playbook is not just “another new program”; it is a framework designed to enhance the work we are already doing as an organization. It serves as the foundation for our clinical care strategies and a tool to foster organizational understanding.

Healthcare is rapidly evolving, and we believe that having a unified approach to continuous improvement and organizational learning will enable us to collectively prioritize what is best for our patients, both now and in the future. Our goal is to shift from a project-based approach to safety and quality to one of “*whole system quality*,” where every part of our organization understands its role in delivering safe, high-quality care to our patients.



## STRATEGIC PARTNERSHIPS

As an organization, it is crucial to leverage both internal and external resources to enhance the clinical care we provide. These resources include data management platforms and analytic engines that help optimize patient care, meet regulatory requirements and navigate the complexities of payor expectations and value-based contracts. Additionally, these platforms enable us to standardize data schemas, ensuring consistency when sharing information across the system. To further support our efforts, we have established strategic partnerships with several external organizations to deliver best-in-class clinical care.

**Epic**

 PRESS GANEY

**vizient**

### A word about safety and quality metrics

Through the HeRO Playbook, you will notice a focus on a variety of safety and quality metrics. One of the challenges of developing these metrics and working within the science of quality improvement is how to best measure the care we provide.

We have all heard the expression that "medicine is both an art and a science." The art and science (not to mention philosophy) of medicine can make attempts to quantitate the care we provide a challenge. Biological systems are extremely complicated; they do not care about quality programs, metrics or the complexity of the modern healthcare landscape. We recognize that quality metrics are imperfect and may point to an issue we should focus on even if there is not an ideal way to measure that process or outcome.

Our focus must always be on the patient and not "improving a number." Understand that quality metrics are one view to benchmark our care against other healthcare systems and to discover true clinical opportunities.



## ANNUAL GOALS

Each year, our organization sets key safety and quality goals, which are presented to the Novant Health board of trustees. These goals are developed by the Novant Health Institute of Safety & Quality in collaboration with various stakeholders, including clinical team members and leaders. Ideas for these goals are derived from existing clinical tools and are focused on identifying opportunities for clinical improvement and closing care gaps.

The annual goals presented to the board of trustees do not encompass all the projects that our physicians, APPs, nurses, clinical leaders and other staff work on throughout the year. These efforts are continuously adjusted to meet new challenges and improve the quality of care we provide. The board of trustees approves these annual goals for our acute care facilities, ambulatory practices and ambulatory surgery centers.

### Acute care

The Vizient Quality & Accountability (Q&A) score is a benchmark that compares hospitals based on data from the Vizient Clinical Database (CDB). Over the past few years, Novant Health acute care facilities have consistently ranked among the top, with 90% of our facilities earning 4- or 5-star ratings, compared to just 30% of similar facilities in the Vizient CDB.

In 2025, we will continue to focus on improving our Q&A scores while maintaining our top-tier performance. Our efforts will include a renewed emphasis on reducing central line-associated bloodstream infections (CLABSI) and catheter-associated urinary tract infections (CAUTI).

### Ambulatory

The quality goals for our ambulatory sites and clinics are developed annually through discussions with clinical leaders within Novant Health Medical Group (NHMG). Metrics are selected based on opportunities to improve care, outcomes and cost, with some targets determined by payors and value-based contracts. This year, our annual incentive metrics will focus on 10 key metrics and 5 gap closure opportunities. Quality improvement is a priority across all ambulatory sites, regardless of medical specialty.

Traditionally, these metrics have been managed by the Novant Health Community Health & Wellness Institute (CHAWI), which has excelled in driving best-in-class performance. However, the organization recognizes that the development and improvement of ambulatory metrics cannot rest solely with one institute — everyone plays a role in enhancing the care and outcomes of our patients.

To support this, our specialty clinical institutes have identified specific ambulatory quality opportunities to focus on this year (see page 13).

### **Ambulatory surgery centers**

Our ambulatory surgery centers continue to perform outstanding work, and their role in the healthcare landscape is growing as more surgical procedures shift from acute care facilities to the ambulatory setting. We measure quality in these centers using metrics set by the Centers for Medicare & Medicaid Services (CMS) and other sources, in collaboration with our Novant Health Surgical Institute leadership. This year, our dashboard will include specific care sites focusing on 13 metrics based on what procedures are performed at each location.

## **LONG-TERM GOALS**

In addition to our annual goals, our organization also sets long-term goals, which span three years. These goals focus on larger, broader projects that require more time to analyze data, implement interventions and maximize outcomes. The objective of these three-year cycles is to identify a clinical care opportunity, develop a plan for improvement in year one, achieve target performance in year two and maintain that performance in year three.

In previous years, our long-term goals have focused on areas such as opioid prescribing, hospital-acquired infections, sepsis and congestive heart failure. Currently, our safety and quality long-term goal is “Efficiency: Capacity management and flow (2023-2025).”



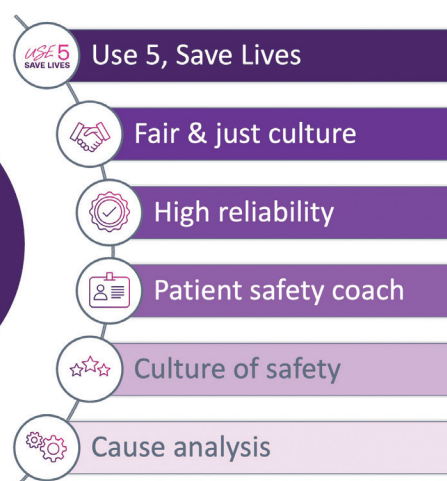


# HeRO safety management system

At Novant Health, we aim to create a culture of safety for our patients and team members.

Our safety focus is one in which our patients are safe and free from harm when they are in our care, a work environment that promotes open communication and timely feedback about patient and team member safety as well as care experience, which is guided by the expectation of First, Do No Harm.

Novant Health has made a commitment to zero preventable harm. Not only can we reduce errors, but we also have an obligation to prevent harm from reaching our patients and team members.



## PATIENT SAFETY COACH

Patient safety coaches are team members who are specially trained to coach, mentor, assist and collaborate with peers, as well as observe peers' work behaviors and provide real-time feedback about practice and compliance with Novant Health's safety behaviors to prevent events of harm to our patients.

## SAFETY CULTURE SURVEY

A systemwide safety survey is conducted at regular intervals for our team members with efforts to improve the culture of safety, based on the organization's survey results.

## FIRST, DO NO HARM: UNIVERSAL SKILLS AND SAFETY BEHAVIORS

First, Do No Harm program utilizes our five safety behaviors and error prevention tools, including:

1. **Practice with a questioning attitude.**  
Stop, reflect and resolve in the face of uncertainty.
2. **Communicate clearly.**  
Use SBAR-Q to share information.  
Communicate using three-way repeat backs and read backs.  
Use phonetic and numeric clarifications.
3. **Know and comply with Red Rules.**  
Practice 100% compliance with Red Rules.
4. **Self-check: Focus on task.**  
Use the STAR technique.
5. **Support each other.**  
Cross-check and assist.  
Use 5:1 feedback to encourage safe behavior.  
Speak up using ARCC: “I have a concern.”



## PATIENT SAFETY ORGANIZATION (PSO)

Novant Health is a member of the Press Ganey PSO, which is officially listed with the Agency for Healthcare Research and Quality (AHRQ). The PSO is a legally protected, confidential forum for members to learn from each other, gain insights based on aggregate analysis of safety event and root cause data, and share tested, practical strategies with peers.

It is the first and only PSO guided by Press Ganey's proven and proprietary:

- Safety Event Classification (SEC) taxonomy
- Serious Safety Event Rate (SSER) harm measures
- In-depth HRO-based cause analysis methodologies

The PSO and PSO community facilitate learning among healthcare peers, as well as safety experts. The Press Ganey PSO uses high reliability science as the framework and provides four primary learning forums for members:

- Safety Event Classification Advisory Panel
- Cause Analysis Grand Rounds
- Safe Tables
- High Reliability Learning Series

## SAFETY ‘FAIR AND JUST’ CULTURE

A fair and just culture refers to the idea that high-performing organizations identify their weaknesses and improve by transparently addressing them. As part of this process, the organization has a responsibility to create a safe environment for team members to report errors without fear of retribution or retaliation. Team members are responsible for reporting safety events, precursor events and near misses.

James Reason, an expert on human error, described what this looks like when he said, “An atmosphere of trust in which people are encouraged to provide, and are even rewarded for providing, essential

safety-related information but in which they are clear about where the line must be drawn between acceptable and unacceptable behavior.” At Novant Health, we are committed to creating this atmosphere of trust.

## DAILY SAFETY HUDDLES

Daily safety huddles occur to maintain situational awareness of issues affecting the safety and quality of patient care and to give direction about priority and responsibility for problem identification and resolution. These huddles establish urgency and accountability to prioritize work by:

- Looking back at significant safety or quality issues from the last 24 hours.
- Looking ahead to identify potential high-risk, out-of-norm activities or safety/quality issues anticipated in the next 24 hours.
- Identifying threats to success and follow-up.

## e-RL – EVENT REPORTING SYSTEM

Events are entered into e-RL, our safety reporting system to:

- Identify potential issues that could result in injury to patients.
- Promote quality patient care and ensure resolution when events occur.
- Track and trend safety event types to inform safety initiatives such as but not limited to:
  - Surgical and procedural
  - Medication
  - Falls
  - Monitoring/surveillance
  - Maternal/childbirth
  - Workplace violence (physical, verbal and emotional)

## SAFETY EVENT CLASSIFICATION (SEC)

SSE (serious safety event) / PSE (precursor safety event) / NME (near-miss event)

SEC is an outcome-based event classification system that:

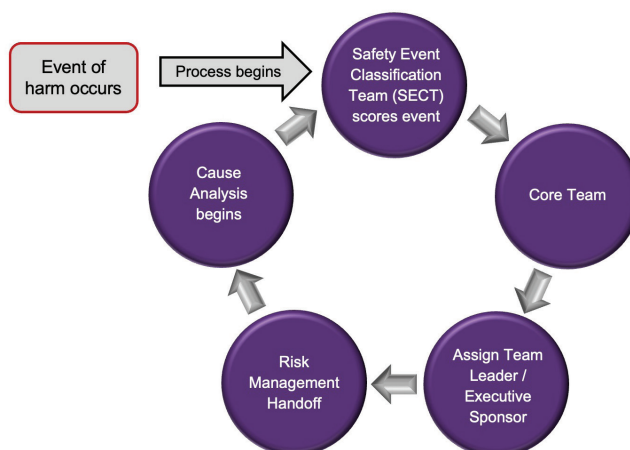
1. Determines if there were deviations in care from accepted practices (gap).
2. Establishes if there was a direct cause-and-effect relationship between deviations and the outcome.
3. Classifies the event according to the level of patient harm resulting from the event.



## CAUSE ANALYSIS

A cause analysis (e.g., apparent cause analysis, root cause analysis) is a structured process to identify causal factors that resulted in an event of harm and develop corrective actions to prevent recurrence. Cause analyses identify deviations in processes and system failures that contributed to the event.

The cause analysis purpose is to determine what happened, why it happened and to implement effective action plans.





# HeRO quality management system

The Novant Health HeRO quality management system (QMS) is designed to enable clinical and operational leaders and teams to continuously improve the care that they provide. The principles of high reliability organizing are embedded into the QMS.

## QUALITY MANAGEMENT SYSTEM – LEARNING SYSTEMS

The quality management system promotes learning through:

- High reliability organizing principles
- Prioritization and focus
- Utilization of data and insights
- Rigorous application of improvement methodologies
- Diverse expertise

## High reliability organizing framework and guiding principles

The HRO framework has three pillars:

1. Leadership commitment
2. Culture of safety
3. Process improvement

### PRINCIPLES OF HIGH RELIABILITY

1

**Preoccupation with failure**

Small problems or errors could indicate a larger problem.

2

**Sensitivity to operations**

Get ahead of potential events by finding and fixing problems.

3

**Reluctance to simplify**

Know as much as possible about the complex environment and resist assumptions.

4

**Commitment to resilience**

Develop the ability to detect and contain errors and bounce back from adversity.

5

**Deference to expertise**

Remove power gradients and allow those on the front lines with the most expertise to make decisions.

Managing the Unexpected: Karl E. Weick & Kathleen M. Sutcliffe

## Utilization of data and insights

Our Microsoft Teams platform is utilized to establish a visible and accessible safety and quality analytics platform to provide insights that facilitate quality improvement across the organization.

- Data analytics needs
  - Establish priorities to align with organizational goals.
  - Create focus to drive improvement.
- Governance and alignment for current metrics
  - Standardize metrics definitions and assets across divisions and clinical specialties.
- Real-time data insights
  - Create tools to drive process measures, to improve patient care at the bedside.
- Data transparency and access
  - Make it easy to access data and promote transparency across the enterprise.
- Efficiency and user-friendly tools
  - Create tools that are reusable so data can be retrieved quickly and accurately.
- Data literacy
  - Help the organization better understand data and how to transform it into decisions.

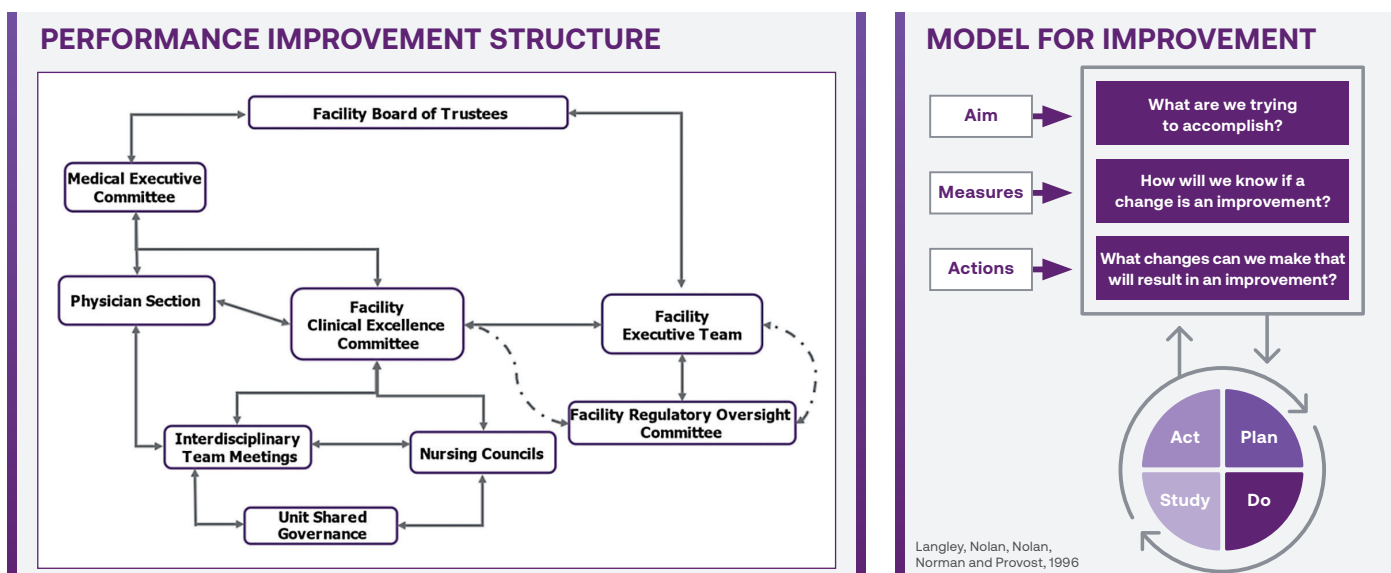
## Organized for improvement

The Novant Health quality management program utilizes a structure for performance improvement to provide oversight of the safety, quality, health equity and experience improvement efforts and ensure we are meeting regulatory requirements across the system.

Novant Health uses performance improvement methodology to maximize quality based on both behavioral (willingness to speak up) and technical (Plan-Do-Study-Act [PDSA] model etc.) tenets.

The organization will act on improvement priorities by designing new processes or redesigning existing processes. All performance improvement initiatives will use the scientific method of problem solving and may be represented in “A3” format for clarity or Situation, Background, Assessment, Recommendation, Questions (SBAR-Q) summary of work when reporting results. Performance improvement may be conducted by teams or by individuals.

Other performance improvement tools may be used as needed when consistent with the PDSA approach. These tools may include RCA-PDSA, Lean, 5S, Gemba Walks, statistical analysis, flowcharting, value streams and group facilitation techniques.





## HeRO institutes

Corroborating quality work within primary care, institute partners will work on ambulatory quality initiatives to drive value in the way that Novant Health cares for patients beyond the acute care setting.

The NHMG Quality Improvement team partnered with institute leaders to use data points to develop opportunities of improvement as measurable quality metrics. This work aims to improve outcomes across the continuum of care, reduce cost and improve the overall patient and provider experience. This is another demonstration of how institute leaders continue to commit to a culture of safety and quality, by focusing on process improvement within the work that they are doing to help patients thrive.

### INSTITUTE AMBULATORY QUALITY METRICS



#### Heart and Vascular Institute

- Tobacco cessation



#### Orthopedics Institute

- Hello World Adoption (Communication)



#### Neurology

- TCM (Transitional Care Management) visit after stroke



#### Behavioral Health Institute

- Metabolic screening for patients on antipsychotics



#### Women's and Children's Institute

- Postpartum follow-up visit completion
- HPV vaccine administration



#### Surgical Institute

- Full rollout of surgical wellness program



#### Neurosurgery

- Reduce ER visits after spine surgery



#### Cancer Institute

- Referrals with Decision Trees for patient self-scheduling



## HeRO clinical variation reduction program (Precision)

Precision is Novant Health's program that addresses unwarranted care variation to improve patient outcomes and reduce healthcare costs. Precision seeks to embed patient-centered and evidence-based care standards across the health system and to optimize efficient care delivery.



### Reducing unwarranted clinical variation

Unwarranted variations are differences in practice patterns that cannot be explained by the type or severity of patient illness or by patient choice. Precision addresses unwarranted variation through partnerships with clinical and operational teams to develop guidelines and best practices, analyze performance data, draft and adopt evidence-based care standards, and enhance workflows.

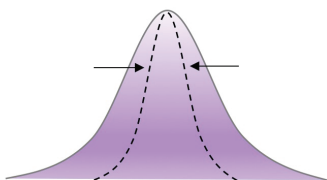
The program is multidisciplinary and includes representatives such as physicians, nursing, sourcing, pharmacy, finance and data analytics.

## Precision strategy

The Precision system strategy includes both vertical and horizontal approaches. Vertical approaches focus on reducing variation within populations of patients by specific condition, disease or procedure type. Horizontal approaches focus on reducing variation across many patient conditions in areas such as medications, supplies, operation processes and other therapeutics.

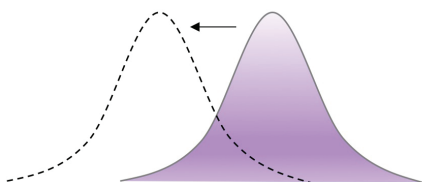
### REDUCING UNWARRANTED CLINICAL VARIATION

**Unwarranted variation:** differences that cannot be explained by type or severity of patient illness or by patient personal preference



#### Narrowing the Curve

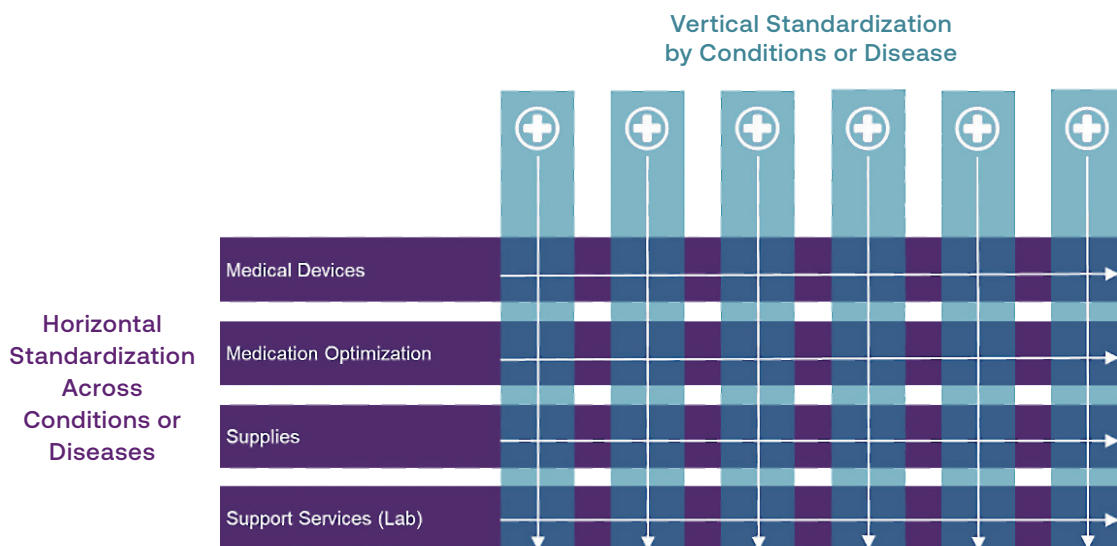
Changes in clinical practice to reduce unwarranted variation, narrowing the curve toward best practice



#### Shifting the Curve

Entire practices move toward best practice

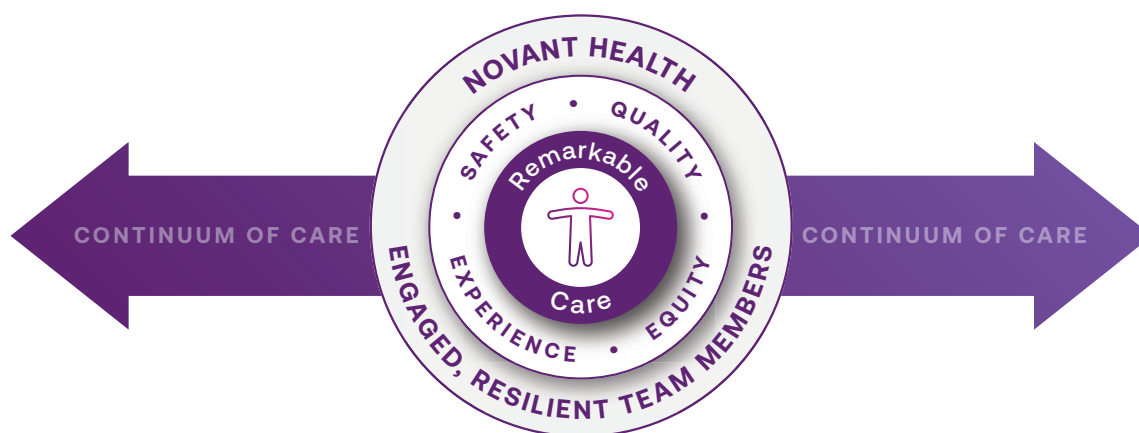
### SYSTEM STRATEGY: TWO-PRONGED APPROACH





# HeRO patient experience system

Novant Health's vision for patient experience is *at every interaction, patients and teammates should be met with compassion and connection.*



Our promise to our patients is to provide care in a safe, high-quality, equitable and person-centered way by an engaged and resilient care team, across the care continuum. We create remarkable experiences for our patients and their loved ones, by remaining focused on consistent and effective communication, personalized care and treating people with dignity and respect.

We do this by leveraging evidence-based practices, accessing and knowing your data, and coaching and recognizing our teams

## BUILDING AND SUSTAINING A PATIENT-CENTERED CULTURE WITH SPARK STANDARD BEHAVIORS

Culture setting is established shared values, beliefs and behaviors within an organization. Leaders have a significant role in setting the culture and expectations for delivering a remarkable patient experience. Each one of us has a role and a responsibility in delivering on these experiences. SPARK behaviors are our foundation for delivering a safe, high-quality, equitable patient experience. These behaviors are what will shape our culture and our future.

Novant Health's SPARK behaviors are designed to help you promote a culture of compassion, connection and excellence for every patient, family member, guest and Novant Health team member. They will help us ensure every person has a next-level remarkable experience.



**Support** Safe Environments

**Personify** a Passion for Service

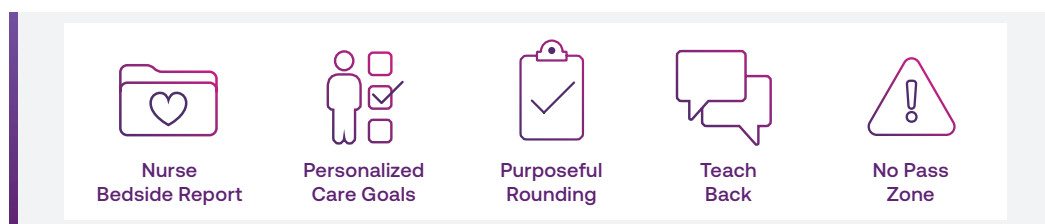
**Acknowledge** and Anticipate Needs

**Remain** Reliable and Consistent

**Kindle** Positive Experiences

## CARE IMPERATIVES

The care imperatives are a set of evidence-based best practices. When performed correctly, they align Our Cause with our patient-centered culture. They also enable us to drive improvement in our patients' perception of their care and overall satisfaction. Learn more about each of these on the office of patient experience website on I-Connect.



## PENELOPE THE PATIENT

Penelope is our Novant Health patient helping us humanize our data by bringing us the patient's voice and perspective through storytelling. She regularly shares her experiences at Novant Health so we can deliver consistent, positive experiences or ensure not-so-positive experiences don't happen again. Penelope is helping us discover new ways to deliver remarkable care by empowering team members to take ownership of the care experience.



## REMARKABLE RECOGNITION

A healthy work environment starts with recognizing team members for the value they bring to our organization. In turn, our team members then create meaningful and memorable experiences for our patients. Regular recognition promotes a culture of appreciation and engaged team members. For example, leaders can recognize team members in real time during leader rounding or by sharing positive patient comments.

To support systemwide recognition, the office of patient experience facilitates a quarterly recognition program that acknowledges and celebrates our incredible teams for the remarkable care they deliver to the patients we serve.

## SPARKY RECOGNITION

We also provide team members the opportunity to recognize other team members for “Being the SPARK” by submitting a Sparky recognition form via the Office of Patient Experience website. Each month, Sparky will then highlight a remarkable team member story in a newsletter to show how our peers and leaders recognize each other for embodying the SPARK. Sparky reviews every SPARK moment submission and carefully selects those that truly exemplify what it means to be the SPARK.



## EXPERIENCE FEEDBACK SYSTEM

The Novant Health experience system is designed to ensure that our actions align with the voices of our patients. While the kind of relationships we promise are only created by listening to one patient at a time, there is much we can learn from our patients by hearing the sum of their voices with survey instruments. Our patient survey process has been enhanced to expand patient survey modalities beyond mail and email to include surveys via text in near real time.

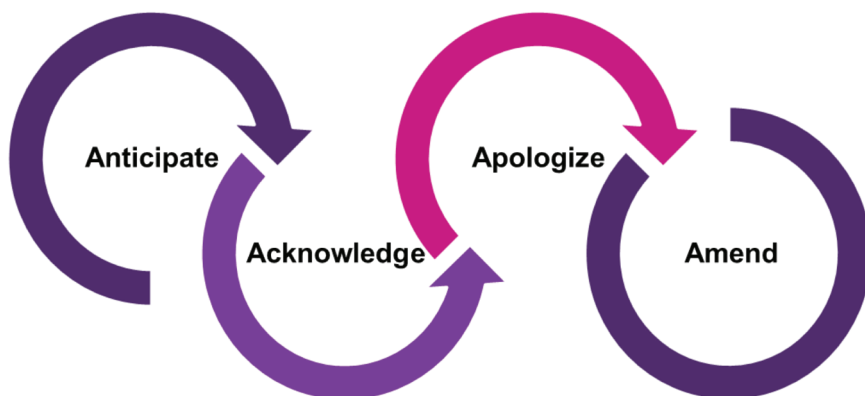
Well-designed surveys offer us a helpful and valuable source of patient feedback. The data allows us to quickly determine how we are serving our patients — what they notice us doing well and where we have opportunities to improve. Surveys guide us on where to sustain or improve our care delivery.

Patient experience performance reports are available in both our survey vendor portal and Microsoft Teams dashboards.

## REAL-TIME SERVICE RECOVERY

Service recovery is the art of continuously improving the experience of care by learning from our past and evolving everyday behaviors to meet patients’ needs and exceed their expectations. The goal is to immediately restore trust and to create loyal customers by addressing service breakdowns in real time using the Novant Health 4A service recovery model: anticipate, acknowledge, apologize and amend.

Service recovery is the responsibility of every team member at Novant Health.



## COMPLAINT AND GRIEVANCE MANAGEMENT

When we are not successful in our service recovery efforts, a patient/care partner may issue a formal complaint or grievance. These can be shared at any time by a patient/care partner without compromising the patient's care or subjecting the patient to retaliation.

A grievance is a formal/informal written or verbal complaint made regarding the patient's care. Any allegations of abuse, neglect or issues related to compliance with the CMS Hospital Conditions of Participation, or a Medicare beneficiary billing issue, is also considered a grievance. All grievances are documented and managed from the time of notification until a final resolution letter is sent. Novant Health utilizes the e-RL platform as our feedback module, and it is accessible through I-Connect.

### LEARN HOW TO DISTINGUISH THE DIFFERENCE BETWEEN COMPLAINTS AND GRIEVANCES.

#### Complaints

A complaint is a concern made by a patient or patient's representative that usually can be **resolved promptly** by team members present or is a nonclinical care concern. Complaints do not require a written response.

#### Grievances

A grievance is a **written** (fax, email, letter, MyChart) **or verbal concern** made by a patient or patient representative related to the patient's clinical or quality of care.

## CLINICIAN COMMUNICATION PROGRAM

Compassion and intentional communication lead to better patient outcomes, decreased malpractice risk, and improved job satisfaction and resilience. Our communication program provides learning and development opportunities for Novant Health clinicians to better understand patient feedback and how to respond to patients with empathy.

Through focused educational opportunities and personalized coaching, clinicians have an increased understanding of the overlap in the science of taking care of patients clinically and the art of demonstrating compassion to them.

## 5-STAR PROVIDER TRANSPARENCY PROGRAM

Eighty-seven percent of consumers will trust an online review as much as a personal recommendation. Novant Health actively manages the online reputation of clinics and providers. The office of patient experience manages the process of posting provider "star" ratings and comments from patient experience surveys to our Novant Health Physician Finder website. By being transparent with our survey data and posting five-star ratings on our website, we can highlight the remarkable care we provide.



## HeRO population health and value-based care

Achieving success in value-based care directly supports Novant Health's ambitious mission to improve the health of communities, one person at a time.

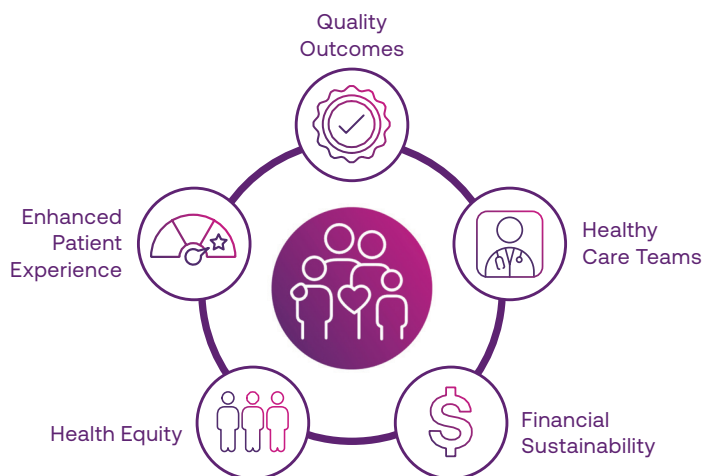
### NOVANT HEALTH'S 'VALUE' EQUATION: DEFINING VALUE

$$\text{Value} = \frac{\text{Quality} + \text{Patient Experience} + \text{Provider/Team Experience}}{\text{Cost}}$$

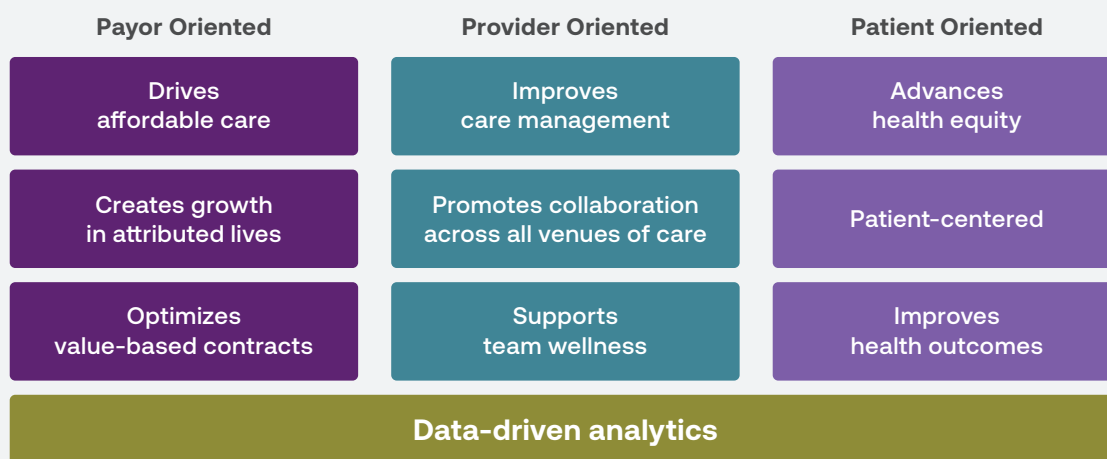
At Novant Health, value-based care (VBC) is defined as delivering safe, quality outcomes through supported care teams, when and where the patient prefers and in a cost-effective manner. We believe value can be provided when patients are ill and in need and when focused on prevention and comprehensive wellness.

## OUR VALUE-BASED CARE GOALS

Novant Health sees value-based care (VBC) as a way to fulfill the “*quintuple aim*” of healthcare: delivering high-quality outcomes in an equitable manner to all members of our community through engaged and supported care teams while being good stewards of the healthcare dollar. Success in those four areas ensures a remarkable patient experience.



## GUIDING PRINCIPLES



Novant Health’s VBC guiding principles keep us focused, guiding our operational initiatives that drive success in meeting our VBC goals.

## POPULATION HEALTH SERVICE ORGANIZATION (PHSO)

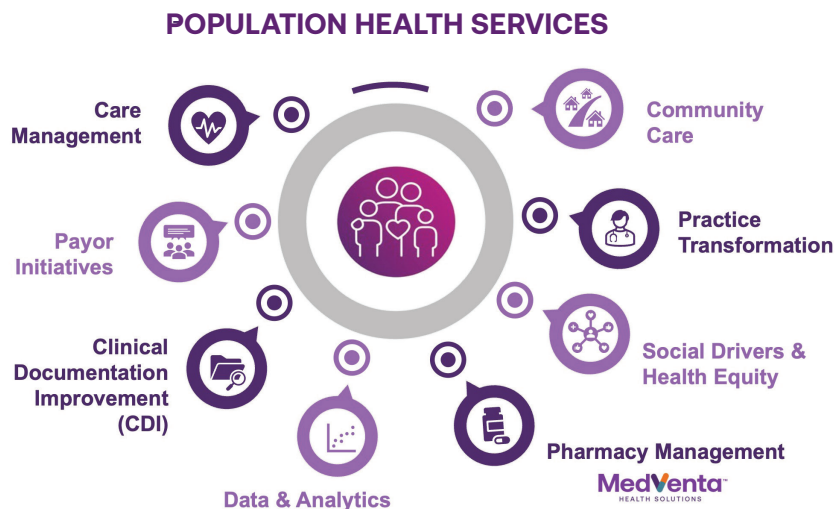
The PHSO is a key platform for Novant Health and independent physicians to deliver value to the communities we serve. It provides the infrastructure necessary to reshape and drive patient-centered wellness and engagement while efficiently managing our population of patients. The PHSO will strategically integrate providers, hospitals, payors and services across the continuum of patient care to improve health outcomes and reduce fragmented patient care.

- **Care management:** We are expanding care teams to include clinical pharmacist practitioners, nurse managers and specialists to enhance patient centered care and ensure highest quality outcomes.
- **Payor initiatives:** We are creating opportunities with our payor partners to improve quality and decrease cost of care for patient populations through reporting tools and analytics.
- **Clinical documentation improvement:** We are leveraging people, processes and technology to ensure accuracy and completeness of patient medical records.

- **Data & analytics:** We are securing accurate data sources to analyze patient activity and identify opportunities to improve clinical outcomes and reduce cost through point of care solutions.

- **Community care:** We are keenly focused on patient transitions across venues of care, including skilled nursing facilities, outpatient rehabilitation centers and home care ensuring a safe and high-quality experience.

- **Practice transformation:** We are a dedicated group of value-based consultants supporting providers and their practices in their journey to value using innovative care models.
- **Social determinants & health equity:** We are leveraging integrated behavioral health providers, community health workers and social workers, driving better health outcomes.
- **Pharmacy management:** We are partnering with MedVenta Health Solutions to support patient medication adherence, compliance and improve chronic disease management.



### CLINICALLY INTEGRATED NETWORK (CIN)

A clinically integrated network (CIN) is a physician-led entity that allows Novant Health and independent physicians to collaborate and deliver coordinated, high-quality, cost-effective care to

the communities served. Both employed and independent CIN clinics must meet participation criteria, ensuring a commitment to quality care and members can earn payor incentives for achieving set quality performance goals. A CIN is a key vehicle for driving value-based care, focusing on improving patient outcomes through shared infrastructure for population health services and data-driven care coordination.





## HeRO health equity

We remain relentlessly focused on transforming healthcare so that every patient, team member and community member may attain the highest level of wellness and health.

To transform care delivery and impact outcomes for all, including our most vulnerable communities, we must continue to operate within the intersection of health equity, patient experience, safety and quality. The Office of Health Equity and Community Health (OHECH) deploys evidence-based interventions and leverages robust community partnerships to advance access to care and drive measurable improvements in outcomes. We prioritize inclusivity and adaptability, and implement learning systems, which ensures our teams are addressing clinical gaps and meeting patients' cultural and linguistic needs through tailored services. These efforts contribute to organizational readiness, which is key to meeting regulatory requirements and quality improvement performance.

### THE OFFICE OF HEALTH EQUITY AND COMMUNITY HEALTH

#### Novant Health definition of health equity

"The attainment of the highest level of health for all people."

Achieving health equity requires that we:



Embed our core value of belonging in all that we do.



Honor each person as a human being with the right to healthcare and wellness.



Build community partnerships and presence to understand and address unique needs of all communities.



Commit to provide access to care, demonstrate compassion and promote well-being.

#### Our strategic priorities

##### Culturally & linguistically appropriate care

Advance and support Novant Health's ability to provide culturally and linguistically appropriate care to patients. As a growth strategy, improve trust in our services and access for all populations.

##### Address clinical gaps in health outcomes

Identify, research and endeavor to eliminate health disparities among our patients. Act as consultants and lead long-term goals for equity of care.

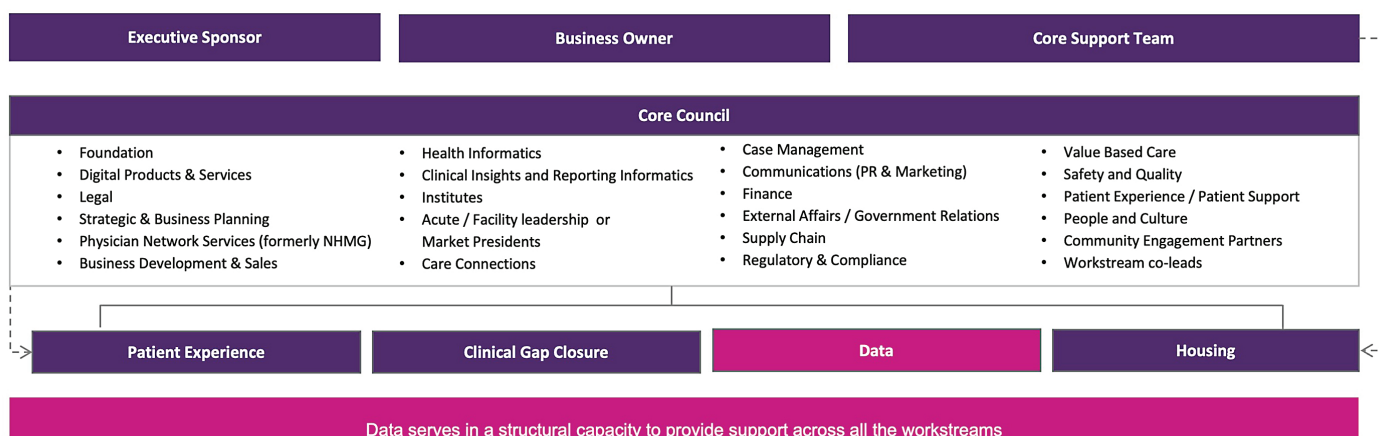
##### Community health

Serve as a change agent to identify and address health disparities in our communities by honoring community voice, increasing access, building capacity through trusted partnerships and measuring impact.

## HEALTH EQUITY GOVERNANCE AND ACTIVITIES

Novant Health's Health Equity Governance Council (HEGC) is led by the chief health equity officer, the chief safety and quality officer, and the vice president of patient experience. The HEGC convenes senior leaders across the system to align strategies, approve definitions, select key performance indicators, and champion prioritized initiatives related to Health Equity and Community Health. The council is mindful of the shared impact across health equity, safety, quality and patient experience. Comprised of seven workstreams, health equity, safety and quality are key components of the HEGC's work and responsibilities.

Our 2024 priority areas and achievements included strategic alignment across the enterprise; communication on impact and sustainability for stakeholder engagement; enhancing and aligning best practices for food insecurity and transportation programs; development and refinement of social drivers of health dashboards; developing framework for assessing policies from a health equity lens; supporting clinical gap closure and achievement of clinical outcomes for systemwide efforts. For 2025, these workstreams will evolve to meet operational and emerging needs.



## CULTURALLY AND LINGUISTICALLY APPROPRIATE SERVICES

Seeking health equity in patient care is a core function of the OHECH and includes aligning strategies to improve and sustain culturally and linguistically appropriate services (CLAS). CLAS, which is recognized by the Centers for Medicare and Medicaid Services Office of Minority Health, is integral to patient safety and quality. The Novant Health CLAS work plan will advance and support Novant Health's ability to provide linguistically and culturally appropriate care to patients. As a growth strategy, the CLAS work plan improves the organization's ability to build trust and access to our services for all populations.



## CONSISTENT, HIGH-QUALITY CARE FOR ALL

In 2024, building upon the learnings and success of previous health equity initiatives, the Novant Health Institute of Safety and Quality partnered with the OHECH to obtain a foundational understanding of how to impact clinical gaps that were identified across five quality metrics while maintaining the successes experienced for the overall population. This initiative included annual wellness visits (AWVs) for patients with Medicare, blood pressure control, colorectal cancer screening, chlamydia screening and diabetes laboratory testing (ABCCDs) for care equity. While continuing to focus on health equity for all populations, quality metrics also included a health equity component to address clinical gaps demonstrated in one or more specific populations.

To support the colorectal cancer screening equity goal, three Charlotte-based and one Winston-Salem-based community access and equity clinics were selected as pilot sites for innovative and coordinated improvement efforts. Our improvement goals were to:

- Increase colorectal cancer screening rates and timely follow-up.
- Improve access to resources.
- Strengthen medical neighborhood collaborations and specialty care partnerships to maximize access to no- or low-cost screening and ensure timely follow-up after an abnormal result.
- Increase knowledge, awareness and adoption of effective, evidence-based approaches to increasing on-time screening.

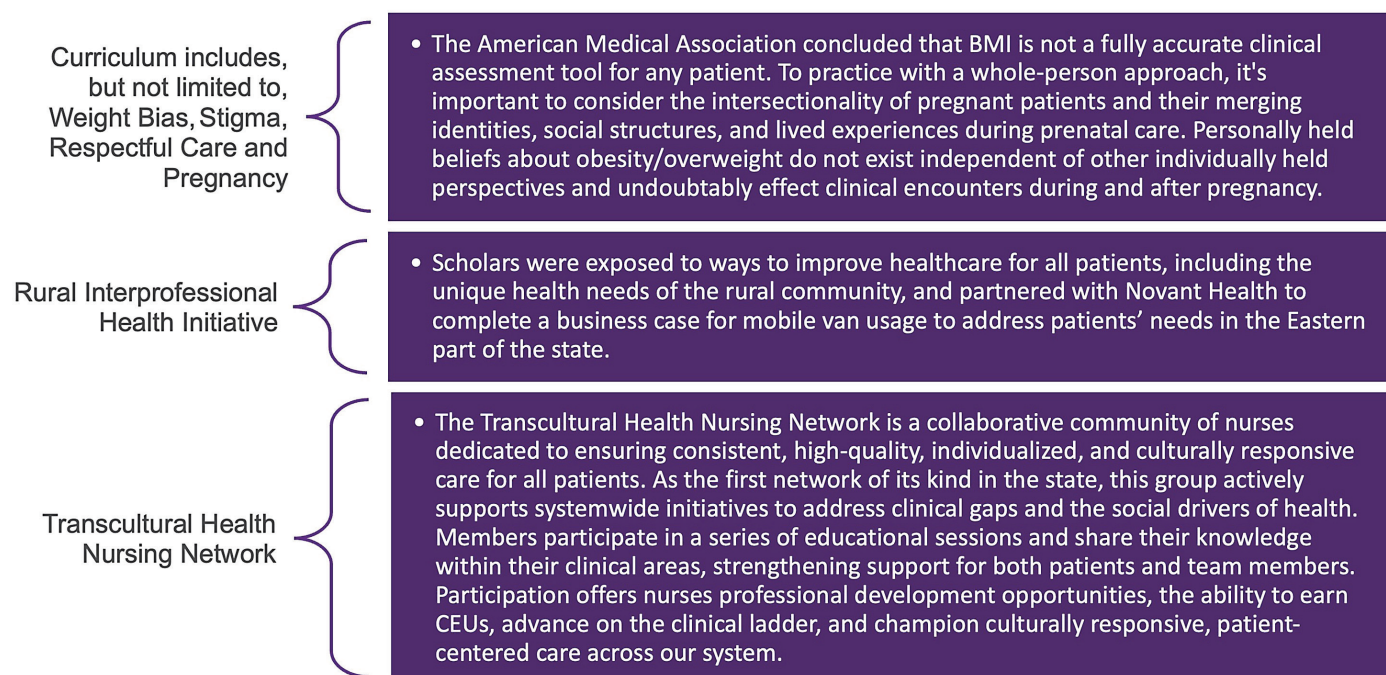


Data analysis revealed six months of screening rates above baseline and six months of consecutively increasing rates, confirming both a shift and a trend in performance post-intervention and suggesting an increase directly related to the improvement work. Using the most conservative estimates based on our results of 899 more people screened than expected at the four clinics, this work has helped patients at Novant Health gain 257 years of life, avoid 38 cases of colorectal cancer and prevented 22 unnecessary deaths.\* We consider our journey to increasing access to colorectal cancer screening at these four clinics a remarkable success.

## CONSULTING AND EDUCATION

The OHECH partners with safety and quality and institute leaders to close clinical gaps, assess social drivers of health, propose recommendations, provide cultural effectiveness education, and provide additional team resources to work on specific tasks to close gaps.

CLAS workplan monitors emerging markets and growth for all populations. OHECH partners with patient experience for insights across all populations and leverages a continually growing number of community voice councils to ensure our ability to provide personalized and individualized care for all patients.



\* Key outcomes are based on the modeling presented in the US Preventive Services Task Force Recommendation Statement on Colorectal Cancer Screening. Outcomes were conservatively estimated using pre- and post-intervention screening rates.

## COMMUNITY HEALTH SERVICES

Market strategies outline new and novel approaches to community health work, particularly where strategic priorities of social drivers of health and clinically and linguistically appropriate care overlap. This is in addition to steady state work increasing access to care and building trusted partnerships in communities that need it most. Acknowledging nuance among markets, those objectives and their resulting initiatives are achieved through unique tactics and partnerships in each market. Drivers that inform communities, conditions and partnerships prioritized by community health include:



- CHNA (Community Health Needs Assessment) priorities, social needs and community feedback inform the needs addressed and communities served by community health teams, community engagement charitable contributions and other community–benefit providing teams. Acting on these priorities for vulnerable populations is required to maintain Novant Health’s tax-exempt status.
- Gap closure areas identify social drivers of health among patient groups that can affect Novant Health’s quality and safety rankings. Often, these same areas are identified at the community level in Community Health Needs Assessments.
- Social drivers of health (SDOH), factors including where someone lives, works, plays and matures in age, are considered the most significant factors of community health. Individual and community health cannot thrive unless SDOH are prioritized.



As we look forward to 2025 and beyond, emerging populations data shows significant growth across various populations that is unique to each region. This is important as we think about culturally and linguistically appropriate care — understanding, connecting and building trust across various populations.

## COMMUNITY HEALTH TO CREATE ACCESS AND COMMUNITY BENEFIT

### 1 Address and improve community prioritized health and social needs in communities we serve.

- Community Health Needs Assessment (CHNA)/Community Benefit
- Social Drivers of Health (SDoH)



**1.2 mil**

Individuals screened for food insecurity and transportation

Across Acute and Ambulatory from Jan-Oct



**23k+**

rides provided for patients

### 2 Advance equity for all by addressing the needs of vulnerable populations and communities.

- Community Health Worker (CHW) Program
- Social Work Student Program

**5,000+**

Total number of food packs distributed



**2,132**

SW Student patient touches

**Nearly 3,250**

patients served by CHWs

↓ **51%**

Reduction in ED Utilization

↓ **48%**

Reduction in IP Utilization

### 3 Address health and social needs through trusted community partnerships.

- Community Health Services (CHS)
  - Health Screenings
  - Childhood Immunizations
  - Mobile Health
  - Community Health Education

**5,441**

Individuals served through mobile health services

**80%**

Participants of Vaccines for Children Program were Spanish-speaking





## HeRO regulatory and accreditation

Novant Health strives for a constant state of compliance with regulatory, accreditation and certification requirements that leads to continuous survey and outside agency review readiness.

### **NOVANT HEALTH CONTINUOUS ACCREDITATION AND REGULATORY READINESS**

Leaders and designated teams support the selection of indicators and utilization of data to track compliance for key issues and targeted improvement efforts. This philosophy empowers and motivates leaders to maintain continuous readiness for an unannounced survey or inspection, but ultimately readiness for every patient.

The accreditation and regulatory division:

- Identifies applicable accreditation standards/regulations and simplifies the link between the standard/regulations and organization's practice
- Assesses organizational readiness and vulnerabilities by strategies such as mock surveys, parity studies, document reviews and complaint/event-related reviews
- Collaborates with leadership in establishing accountability for organizational compliance with standards/regulations

- Manages outside agency survey processes, including accreditation and disease-specific certification surveys and supports the licensing and accreditation of new facilities
- Manages accreditation and regulatory processes (action plans, policies, self-assessments, risk assessments, documentation compliance efforts, etc. )
- Coordinates the development and implementation of Novant Health’s policy and procedure processes and electronic document quality control process and software
- Supports the patient safety process from a regulatory/surveyor perspective for scored safety events and implements immediate jeopardy prevention strategies when needed
- Establishes and maintains regulatory oversight committees, regulatory oversight leaders and regulatory education with accreditation leaders’ teams that guide leader development and continuous readiness processes that flow with a system’s approach

### REGULATORY EDUCATION (ALL LEADERS)

The Novant Health Microsoft Teams “REAL” portal is a forum for regulatory education for all leaders (REAL) and is open to all Novant Health leaders at all levels. The site is utilized for accreditation and regulatory communications and education specifically targeted to support leaders and their competencies. Each facility also has a channel for facility-specific targeted communications.

REAL enhances the Novant Health frontline leader educational experience and core competencies by linking current accreditation standards, CMS conditions of participation, and federal and state regulations to promote learning/information sharing, partnerships, policy compliance and to encourage and celebrate regulatory compliance in each facility. This process streamlines communication and education through Microsoft Teams to meet leaders’ needs on their own time and reaches more leaders than a formal workshop.



## REGULATORY OVERSIGHT COMMITTEES (FACILITY-BASED)

The regulatory oversight committees (ROC) are function-based facility teams that work together at the facility level guiding education and compliance related for regulatory processes and requirements. The team is comprised of facility-focused functional team leaders (such as environment of care, patient care, medication management, infection prevention, etc.) who regularly review new and revised accreditation standards, federal and state regulations, sentinel event alerts, and key accreditation and regulatory compliance issues as assigned. ROC team members help formulate action plans to ensure compliance and refer issues as needed for system solutions. ROC teams participate in the systemwide coordinated review of standards and issues gap analysis and develop continuous readiness plans.

## REGULATORY OVERSIGHT LEADERS (EXECUTIVES AND SENIOR LEADERS)

The system executives and senior leaders participate in the Novant Health system regulatory oversight leaders (ROL) committee. These once per month hourlong gatherings provide the forum for consistent communication of accreditation and regulatory changes, and expectations and updates on key issues in a brief executive summary manner. The ROL committee provides oversight and direction for system gap analysis, solutions for improvements and issue resolution, with the aim of improving regulatory awareness and compliance across all Novant Health entities.

Novant Health supports the benefits brought to healthcare from regulatory and accreditation agencies and processes. A continuous state of compliance, with regulatory, accreditation and certification requirements, leads to safer processes for patients, visitors and team members.





# 2024 Safety & Quality Symposium

## INSTITUTE OF SAFETY & QUALITY SYMPOSIUM

On Dec. 4, 2024, the Novant Health Institute of Safety & Quality hosted its 4th Annual Safety and Quality Symposium. This event serves as an opportunity to celebrate our achievements over the past year, learn from each other and strategize on how to advance our journey toward high reliability.

This year's theme was "Teamwork," and we were honored to have Briana Scurry, goalkeeper for the 1999 Women's World Cup Champion U.S. soccer team, as our special guest speaker.

The symposium featured presentations from our chief safety and quality officer, as well as our nursing team, case management team, Precision team, ambulatory quality team and safety team. With over 360 attendees, this event continues to strengthen our culture of continuous improvement and serves as a springboard for the year ahead.

