Southern Coos Health District
Strategic Plan Update 08-21-2023

STATUS	WBS	DESCRIPTION	OWNER	DUE DATE	RESOURCES	%
	1.0	**People**				
Completed	1.1	Benchmark and implement employee compensation philosophy	Jeremiah Dodrill, Raymond Hino	2/28/2023	Carrie Okey, Katelin Wirth	100
Completed	1.1.1	Implement Salary.com Benchmarking	Raymond Hino, Jeremiah Dodrill	7/31/2022	Carrie Okey, HR, Finance	100
Completed	1.1.1.1	Provide compensation data to Salary.com	Jeremiah Dodrill	6/30/2022	Carrie Okey, HR, Finance	100
Completed	1.1.1.2	Complete HR staff training on Salary.com	Jeremiah Dodrill	7/31/2022	Carrie Okey, HR, Finance	100
Completed	1.1.1.3	Update practices and standard work related to annual market benchmarking for all positions	Jeremiah Dodrill	11/30/2022	Carrie Okey, HR, Finance	100
Completed	1.1.2	Develop employee compensation philosophy	Raymond Hino, Jeremiah Dodrill	11/30/2022	Carrie Okey, HR, Finance	100
Completed	1.1.3	Complete benchmarking study of hospital job codes	Jeremiah Dodrill, Raymond Hino	1/31/2023	Carrie Okey, HR, Finance	100
Completed	1.1.3.1	Compare current salaries by job code to Salary.com benchmark data, noting large differences. Establish pay grads, based on market data, for those positions in which they do not exist.	Jeremiah Dodrill	1/31/2023	Carrie Okey, HR, Finance	100
Completed	1.1.3.2	Quantify compensation differences individually and in the aggregate by job code, department and whole hospital	Jeremiah Dodrill	1/31/2023	Carrie Okey, HR, Finance	100
Completed	1.1.3.3	Determine strategy to impact compensation differences, particularly roles or areas that appear to be significantly under the benchmark and implement required wage/market adjustments as necessary	Jeremiah Dodrill	2/28/2023	Carrie Okey, HR, Finance	100
Completed	1.2	Develop Employee Recognition and Engagement Plan by department/division, with a focus on collaboration	Scott McEachern, Carrie Okey	1/1/2023	Executive Team, Carrie Okey	100
Completed	1.2.1	Identify gaps in employee recognition	Cori Valet, Carrie Okey, Scott McEachern	12/31/2022	Amy Moss Strong	100
On Track	1.2.1.1	Exploring employee recognition platforms	Carrie Okey, Scott McEachern	2/28/2023		100
Completed	1.2.2	Implement Daisy Award Program	Cori Valet, Raymond Hino	11/22/2022		100
Completed	1.2.3	Develop a budget for Employee Recognition	Scott McEachern, Cori Valet, Jeremiah Dodrill	12/31/2022	Executive Team	100
Completed	1.2.4	Develop Pulse Surveys as a way to track employee engagement over time	Carrie Okey, Scott McEachern	11/1/2022		100
Completed	1.2.5	Implemented Survey Monkey Enterprise system	Carrie Okey, Scott McEachern	11/1/2022		100
Completed	1.2.6	Reboot Employee Activities Committee	Carrie Okey	11/1/2022		100
Completed	1.2.7	Implement Cyrano Video Platform and distribute weekly CEO videos	Scott McEachern, Raymond Hino	12/1/2022	Amy Moss Strong	100
On Track	1.3	Develop and implement a staff education plan	Cori Valet	12/31/2023	Carrie Okey	90
Completed	1.3.1	Identify current staff education plans.	Cori Valet	8/12/2022	Carrie Okey, Kerry Vincent and department managers	100
Completed	1.3.1.1	Identify current all staff education plan (Initial and annual)	Cori Valet	7/8/2022	Carrie Okey, Kerry Vincent	100
Completed	1.3.1.2	Identify current department specific education processes.	Cori Valet	7/15/2022	All department managers, Kerry Vincent	100
Completed	1.3.2	Identify current Medical Provider Education plans	Cori Valet	6/18/2022	Shawn March	100

Status	ID	Task	Owner	Due Date	Support	%
Completed	1.3.3	Perform a gap analysis to determine deficiencies in existing education processes.	Cori Valet	2/28/2023	Carrie Okey	100
Completed	1.3.3.1	Develop a gap analysis tool	Cori Valet	12/31/2022	Carrie Okey, Arianne Booth	100
Completed	1.3.3.2	Benchmark other Hospitals, i.e. LUH, CVH, CGH	Cori Valet	12/31/2022	Carrie Okey, Arianne Booth	100
Completed	1.3.3.3	Perform gap analysis using data from other hospital benchmarking	Cori Valet	1/31/2023	Carrie Okey, Arianne Booth	100
Completed	1.3.3.4	Utilize existing template within MCN to amend current GAP analysis	Cori Valet	2/28/2023	Carrie Okey, Arianne Booth	100
Completed	1.3.4	Update existing education plans to include deficiencies noted in gap analysis.	Cori Valet	3/31/2023	Carrie Okey	100
On Track	1.3.5	Implement the updated education policy for staff, managers, and medical providers.	Cori Valet	12/31/2023	Carrie Okey	50
On Track	1.3.5.1	Create an education policy for staff, manager and medical provider education.	Cori Valet	6/30/2023	Carrie Okey	50
Completed	1.4	Implement Leadership Training Program	Raymond Hino	9/1/2022	Carrie Okey, Executive Team	100
Completed	1.4.1	Identify management team members required to participate in Leadership Training program	Raymond Hino	5/31/2022	Carrie Okey, Executive Team	100
Completed	1.4.2	Research external resources for Leadership Training (e.g. Studer, HealthStream, etc)	Raymond Hino	6/30/2022	Carrie Okey, Executive Team, Studer Group, HealthStream	100
Completed	1.4.3	Select resource entity, sign contract (if necessary) and establish start date	Raymond Hino	7/31/2022	Carrie Okey, Executive Team	100
Completed	1.4.4	Create 12-month schedule for Leadership Training program	Raymond Hino	9/1/2022	Carrie Okey, Executive Team	100
On Track	1.5	Expectations - Clarify expectations of all employees and update/streamline employee evaluation process aligned with expectations	Raymond Hino, Carrie Okey	10/31/2023	Carrie Okey	50
Completed	1.5.1	Identify best practices in employee evaluation process	Carrie Okey, Raymond Hino	9/30/2022	Carrie Okey, HR	100
On Track	1.5.2	Perform value stream analysis on employee evaluation process.	Raymond Hino, Carrie Okey	10/31/2023	Carrie Okey, HR	50
On Track	1.5.2.1	Clarify expectations of employees and managers in evaluation process	Jeremiah Dodrill, Raymond Hino	3/31/2023	Carrie Okey	50
On Track	1.5.2.2	Develop standard operation procedures for HR, managers and employees for the employee evaluation process	Raymond Hino, Jeremiah Dodrill	3/31/2023	Carrie Okey	50
Attention	1.5.3	Revamp employee evaluation documents to meet best practices	Carrie Okey, Raymond Hino	10/31/2023	Carrie Okey, HR	
On Track	1.5.3.1	Employee evaluations to include review of job performance in reference to stated job descriptions, progress to individual and departmental goals and expectations of all employees	Jeremiah Dodrill	5/31/2023	Carrie Okey, HR	
Attention	1.5.4	Develop visibility and accountability measures for leadership	Carrie Okey, Raymond Hino	10/31/2023	Carrie Okey, HR	50
Completed	1.6	Identify gaps in recruitment process	Raymond Hino, Carrie Okey	12/31/2022	Carrie Okey	100
Completed	1.6.1	Identify best practices in employee recruiting.	Jeremiah Dodrill	7/31/2022	Carrie Okey, HR	100

Status	Number	Task	Owner	Due Date	Responsible	%
Completed	1.6.2	Perform value stream analysis on employee recruiting process	Jeremiah Dodrill	8/31/2022	Carrie Okey, HR	100
Completed	1.6.3	Create Standard Operating Procedures for each step in the recruiting process	Jeremiah Dodrill	9/30/2022	Carrie Okey, HR	100
	2.0	Service				
Attention	2.1	Develop and implement a concierge patient engagement model for patient services to improve patient satisfaction.	Raymond Hino	12/31/2024	Executive Team	29.25
Completed	2.1.1	Create a vision for SCHHC's patient engagement model, from initial contact and intake to point of service, and finally to discharge. The working premise is that the SCHHC patient engagement model should emulate an Apple Store experience.	Raymond Hino	6/17/2022	Executive Team, Leadership Team	100
Attention	2.1.2	Create project teams focused on. at minimum, the following: (1) Pre-Hospital Experience; (2) Wayfinding and Physical Environment; (3) Intake; (4) Outpatient Services; (5) Inpatient Services; (6) Discharge and Continuation of Engagement.	Raymond Hino	7/1/2023	Executive Team; Project Teams	17
Attention	2.1.3	Implement 2-5 deliverable enhancements to patient engagement, recommended by each team	Raymond Hino	8/17/2023	Executive Team, Project Teams; Leadership Team	
	2.1.4	Implement 4-8 deliverable enhancements to patient engagement, recommended by each team	Raymond Hino	6/30/2023	Executive Team, Project Teams, Leadership Team	
On Track	2.2	Identify, select, and implement the most effective EMR and ERP systems.	Scott McEachern	9/30/2024	Executive Team, Managers, Providers	66.63
Completed	2.2.1	Convene EHR Governance Committee, comprised of a cross-departmental team tasked with overseeing selection, implementation, and maintenance of EHR system	Scott McEachern	2/28/2023	Executive Team, Managers, Providers	100
Completed	2.2.2	Open conversations with potential EMR vendors	Scott McEachern	7/31/2022	Raymond Hino, Trevor Jurgenson	100
Completed	2.2.2.1	OCHIN	Scott McEachern	5/31/2022		100
Completed	2.2.2.2	St. Charles EPIC	Scott McEachern	7/31/2022		100
Completed	2.2.2.3	Cerner Community Works	Scott McEachern	7/31/2022		100
Completed	2.2.2.4	Providence Community Connect	Scott McEachern	11/7/2022		100
Completed	2.2.3	Identify needed peripheral systems	Scott McEachern	12/31/2022	Trevor Jurgenson, Cindy Kessler, Deb Backman, Marlene Rocha, Deb Ellis, Cheryl Johnson	100
Completed	2.2.3.1	Laboratory Information System	Scott McEachern	9/30/2022	Cindy Kessler, Laboratory	100
Completed	2.2.3.2	Radiology Information System & Peripherals	Scott McEachern	9/30/2022	Deb Backman	100
Completed	2.2.3.3	Respiratory Peripherals	Scott McEachern	9/30/2022	Cheryl Johnson	100
Completed	2.2.4	Identify ERP System Vendors	Scott McEachern	12/31/2022	Finance Team, Materials Management	100
Completed	2.2.4.1	Premier	Scott McEachern	12/31/2022	Finance team	100
Completed	2.2.4.2	Workday	Scott McEachern	12/31/2022	Finance team, Supply Management	100
Completed	2.2.4.3	Infor	Scott McEachern	12/31/2022	Finance team, Jonathan Yamasaki	100

Status	ID	Task	Owner	Date	Support	%
Completed	2.2.4.4	Sage Intacct	Scott McEachern	2/1/2023		100
Completed	2.2.5	Identify appropriate project management team options. Criteria: has worked with small rural hospitals before; experience with EPIC implementation in CAHs; affordable price.	Scott McEachern	3/23/2023		86.66
Completed	2.2.5.1	Determine scope of work for hiring an external vendor selection team	Scott McEachern	8/31/2022	Executive Team	100
Completed	2.2.5.2	Present three vendor selection team options to Exec Team	Scott McEachern	3/15/2023	Executive Team	100
Completed	2.2.5.3	Present recommended EMR/ERP vendor selection team to SCHD Board of Directors	Scott McEachern	3/23/2023	Executive Team	100
Completed	2.2.5.4	Incorporate vendor selection team timeline into the SCHD Strategic Plan	Scott McEachern	4/30/2023	Executive Team	100
On Track	2.2.5.5	Compare potential EMR and ERP Vendors with the External Vendor Selection Team Assistance	Scott McEachern	8/24/2023	Executive Team	33.3
Completed	2.2.6	Gather Data and Collect Surveys of SCHHC staff	Scott McEachern	4/21/2023	Experis Health Solutions, SCHHC project team	100
Completed	2.2.7	Conduct Foundational Leadership Work Session	Scott McEachern	4/28/2023	Experis Health Solutions, SCHHC project team	100
Completed	2.2.8	Develop RFP and release solicitation	Scott McEachern	5/31/2023	Experis Health Solutions, SCHHC project team	100
On Track	2.2.9	Vendor demonstrations & Presentations	Scott McEachern	8/11/2023	Experis Health Solutions, SCHHC project team	90
On Track	2.2.10	Coordinate Vendor References	Scott McEachern	8/31/2023	Experis Health Solutions, SCHHC project team	25
On Track	2.2.11	Develop funding plan for EMR/ERP Implementation Project	Scott McEachern, Raymond Hino, Jeremiah Dodrill	8/24/2023	Experis Health Solutions, SCHHC project team	31.25
On Track	2.2.11.1	Identify potential project grant funders	Scott McEachern	7/31/2023	Jeremiah Dodrill	75
Attention	2.2.11.2	Identify financing partners	Scott McEachern	8/18/2023	Jeremiah Dodrill	25
Attention	2.2.11.3	Work with CLA to determine impact of cost report	Scott McEachern	8/18/2023	Jeremiah Dodrill	
Attention	2.2.11.4	Develop a draft total cost of ownership	Scott McEachern	8/18/2023	Jeremiah Dodrill, Katelin Wirth	25
On Track	2.2.12	Present draft TCO and financing plan to executive team	Scott McEachern, Jeremiah Dodrill	9/13/2023	Executive Team	
On Track	2.2.13	Final recommendation for EMR, ERP, total cost of ownership, and funding plan, to SCHD Board	Scott McEachern	9/28/2023	Experis Health Solutions, SCHHC project team	
On Track	2.2.13.1	Hold special board meeting for presentation of EMR/ERP, TCO, and funding plan.	Scott McEachern	9/18/2023	Raymond Hino, SCHD Board of Directors	
On Track	2.2.13.2	Notify vendors of final selection	Scott McEachern	9/30/2023	Experis Health Solutions	
On Track	2.2.14	Begin Implementation of EMR/ERP Solution	Scott McEachern		Project Management Team, Selected Vendors, and SCHHC project team	

On Track	2.3	Develop and implement Community Health Needs Assessment Plan and Community Health Improvement Plan; Develop and implement a Hospital physician/provider (medical staff) development plan, to meet IRS requirements, and to include both current and projected future recruitment needs, Stark law compliance, and additional best practices for medical staff development.	Jeremiah Dodrill, Raymond Hino	12/31/2023	Executive Team, Katelin Wirth, MD Ranger, MGMA	60.41
Completed	2.3.1	Develop and Complete 2023 Community Health Needs Assessment	Raymond Hino, Scott McEachern	12/31/2023	Executive Team, Outside Consultant	100
Completed	2.3.1.1	Select vendor to assist with development of Community Health Needs Assessment (CHNA)	Scott McEachern, Raymond Hino	5/31/2023	Executive Team	100
Completed	2.3.1.2	Create CHNA community survey. The target audience will be major employers and minority groups (City of Bandon, Bandon School District, Bandon Dunes Golf Resort, Coquille Tribe, Coos Hispanic Leadership Council).	Raymond Hino, Scott McEachern	5/31/2023	CHNA Vendor, Executive Team, Board of Directors	100
Completed	2.3.1.3	Meet with major employers and minority group organizations to review CHNA survey process and seek assistance to send out surveys to their employees and members	Scott McEachern, Raymond Hino	5/31/2023	CHNA Vendor, Executive Team, Board of Directors	100
On Track	2.3.1.4	CHNA vendor to compile results of CHNA surveys and prepare a preliminary report of findings to SCHHC Executive Team	Raymond Hino, Scott McEachern	6/15/2023	CHNA Vendor, Executive Team	100
On Track	2.3.1.5	Final CHNA Report to be presented to SCHHC Board of Directors	Scott McEachern, Raymond Hino	6/22/2023	CHNA Vendor, Executive Team, Board of Directors	100
	2.3.1.6	Post Final 2023 CHNA report to SCHHC website	Scott McEachern	6/30/2023	Amy Moss Strong	100
On Track	2.3.2	Develop and Implement Community Health Improvement Plan (CHIP)	Scott McEachern	11/30/2023	David Sandberg, Executive Team	25
On Track	2.3.2.1	Kick-off Meeting with David Sandberg	Scott McEachern	10/31/2023	David Sandberg, Raymond Hino, Jeremiah Dodrill	25
On Track	2.3.3	Create Medical Staff Development plan based upon results of needs assessment and best practices	Raymond Hino	12/31/2023	Jeremiah Dodrill, Executive Team	56.25
Completed	2.3.3.1	Complete a provider contract audit and identify if compliance variances exist	Raymond Hino	5/31/2022	MD Ranger, Jeremiah Dodrill	100
On Track	2.3.3.2	To include recruitment needs and recruitment plan	Raymond Hino	12/31/2023	Executive Team	
Completed	2.3.3.3	Research best practices and compliance requirements (DNV) in medical staff development plans	Raymond Hino	7/31/2022	DNV, MD Ranger, Governance Institute, CEO colleagues	100
Completed	2.3.3.4	To include Stark Law compliance metrics for all contracts	Raymond Hino	12/31/2022	Executive Team	100
On Track	2.3.3.5	Review Community Health Needs Assessment & interview Board, Medical Staff, Executive Leadership for physician recruitment needs	Raymond Hino	12/31/2023	Survey Monkey or hard copy surveys. Distribute, collect and tabulate results	100
On Track	2.3.3.6	Vendor to conduct physician market analysis	Raymond Hino	9/29/2023	David Sandberg, Jeremiah Dodrill, Scott McEachern	50

Status	#	Task	Owner	Due Date	Support	%
On Track	2.3.3.7	Present findings of Medical Staff Development Plan to Board of Directors	Raymond Hino	12/31/2023	Jeremiah Dodrill, Kim Russell	
On Track	2.3.3.8	Complete implementation of findings and recommendations from Board approved Medical Staff Development Plan	Raymond Hino	12/31/2023	Executive Team	
	3.0	**Quality**				
On Track	3.1	Implement and Maintain Quality DNV Accreditation Program	Raymond Hino	9/30/2023	Barb Snyder, staff	90
Completed	3.1.1	Schedule a meeting with Stakeholders to discuss next steps and establish timelines	Scott McEachern	5/12/2022	Scott McEachern	100
Completed	3.1.2	DNV Training	Scott McEachern	7/12/2022	Barb Snyder	100
Completed	3.1.3	Prepare for DNV Assessment in September 2022	Scott McEachern	9/30/2022	Managers, staff	100
Completed	3.1.3.1	Meet with managers to review DNV accreditation items	Scott McEachern	6/10/2022	Managers, Barbara Snyder	100
Completed	3.1.3.2	Follow-up with managers to review DNV accreditation items	Scott McEachern	7/15/2022	Managers, Barbara Snyder	100
Completed	3.1.4	Achieve Initial DNV Accreditation	Barbara Snyder, Raymond Hino	12/30/2022	Executive Team, Managers, Providers, district board	100
On Track	3.1.5	Pass DNV Accreditation Survey for 2nd Year in a Row	Raymond Hino, Barbara Snyder	9/30/2023	Executive Team, Managers, staff, providers, district board	50
Completed	3.2	Establish Quality Benchmark	Cori Valet	11/21/2022	Barb Snyder, Sharon Bischoff	66.66
Completed	3.2.1	Establish Quality Benchmarks consistent with other Critical Access Hospitals	Cori Valet	11/21/2022	Barb Snyder, Sharon Bischoff	100
Completed	3.2.2	Establish individualized Quality Benchmarks for each clinical department	Cori Valet	11/21/2022	Barb Snyder, Sharon Bischoff, All clinical dept managers	100
	3.2.3					
On Track	3.3	Develop and Execute Effective Internal Communication Plan	Scott McEachern	6/30/2023	Executive Team, Employees Activity Committee	78.12
Completed	3.3.1	Create SCHHC Communications calendar	Scott McEachern	11/7/2022	Carrie Okey	100
Completed	3.3.2	Perform a gap analysis: what could we be doing better to reach all staff with communication?	Scott McEachern	11/30/2022	Managers, staff	100
Completed	3.3.3	Implement Regular CEO Messaging	Scott McEachern	11/18/2022	Raymond Hino	100
Completed	3.3.3.1	Implement weekly Cyrano Video Messaging	Scott McEachern	11/18/2022	Raymond Hino	100
Completed	3.3.3.2	Monthly Staff Meetings via Zoom	Raymond Hino	8/1/2022	Scott McEachern	100
Completed	3.3.4	Implement regular communication with staff	Carrie Okey	10/1/2022	Scott McEachern	100
Completed	3.3.4.1	Add text messaging capability to HR/Admin	Scott McEachern	11/11/2022	Carrie Okey	100
Completed	3.3.4.2	Utilize Survey Monkey to take regular surveys of staff	Carrie Okey	10/1/2022	Scott McEachern	100
On Track	3.3.5	Revise Tier I & Tier II Huddle System	Scott McEachern	6/30/2023	Executive Team	25
On Track	3.3.5.1	Assess usage rate of Tier I huddles	Scott McEachern	6/30/2023	Executive Team	50
On Track	3.3.5.2	Update Tier I based on assessment	Scott McEachern	6/30/2023	Managers	
Completed	3.3.6	Implement Microsoft 365	Scott McEachern	4/30/2023	Trevor Jurgenson, Chris Cox	100
On Track	3.3.7	Update SCHHC Intranet Pulse Page	Scott McEachern	7/31/2023	IS team	75
On Track	3.3.8	Develop data to periodically report to executive team	Carrie Okey	5/31/2023	Scott McEachern	25
Attention	3.4	Update and Implement a district wide Incident Response Plan	Cori Valet, Scott McEachern	12/29/2023	Jason Cook, Trevor Jurgenson, Deb Backman, Katelin Wirth	8.33

Status	#	Task	Owner	Due Date	Support	%
On Track	3.4.1	Reach out to regional facilities and organizations for collaboration opportunities and resources	Raymond Hino	9/29/2023	Executive Team, Jason Cook	
Attention	3.4.2	Source vendor with expertise in updating IR Plan	Jeremiah Dodrill	10/31/2023	Jason Cook	
Attention	3.4.3	Complete Draft of Emergency Preparedness Plan	Jeremiah Dodrill	11/30/2023	Jason Cook, Jeremiah Dodrill	50
Completed	3.4.4	Conduct preparedness exercises	Jeremiah Dodrill	5/31/2023	Jason Cook, Arianne Booth	
On Track	3.4.4.1	Schedule preparedness exercises for FY24	Jeremiah Dodrill	9/29/2023		
Completed	3.4.4.2	OHA ED Peds Simulation Event	Cori Valet	8/11/2023	Nick Lucas	
On Track	3.4.5	Embed training into onboarding and annual review process using the Department of Homeland Security modules.	Jeremiah Dodrill	6/30/2023	Jason Cook, Carrie Okey, Arianne Booth	
On Track	3.4.6	Communicate Plan to Board of Directors, Foundation, and Community Members.	Scott McEachern, Cori Valet	7/31/2023	Jason Cook	
Completed	3.5	Update SCHHC cybersecurity program	Scott McEachern	6/30/2023	Trevor Jurgenson	100
Completed	3.5.1	Perform gap analysis on current SCHHC cybersecurity practices	Scott McEachern	7/31/2022	Trevor Jurgenson	100
Completed	3.5.2	Update cybersecurity practices and protocols	Scott McEachern	12/31/2022	Trevor Jurgenson	100
Completed	3.5.3	Develop annual vulnerability testing plan	Scott McEachern	12/31/2022	Trevor Jurgenson	100
Completed	3.5.3.1	Hold kick-off call with Critical Insight	Scott McEachern	7/7/2022	Trevor Jurgenson	100
Completed	3.5.3.2	CI ships out devices to SCHHC	Scott McEachern	8/15/2022	Trevor Jurgenson, Jeff Weymouth, Chris Cox	100
Completed	3.5.3.3	Schedule penetration test	Scott McEachern	8/22/2022	Trevor Jurgenson, Jeff Weymouth, Chris Cox	100
Completed	3.5.4	Perform annual risk assessment	Scott McEachern	12/1/2022	Trevor Jurgenson	100
Completed	3.5.4.1	HIPAA Security Risk Assessment findings presented to exec team	Scott McEachern	12/7/2022	Critical Insight	100
Completed	3.5.4.2	HIPAA Security Risk Assessment findings presented to SCHD board	Scott McEachern	12/15/2022	Critical Insight	100
Completed	3.5.4.3	Develop security awareness training program	Scott McEachern	2/21/2023	Trevor Jurgenson	100
Completed	3.5.4.4	Implement patch management services and vulnerability review	Scott McEachern	1/31/2023	Trevor Jurgenson	100
On Track	3.6	Achieve top 100 Hospital Status	Cori Valet, Scott McEachern, Raymond Hino, Jeremiah Dodrill	6/30/2025	Executive Team, Managers, staff, providers, district board	50
Completed	3.6.1	Implement new HCAHPS vendor	Scott McEachern	12/31/2022	Cori Valet	100
On Track	3.6.2	Research criteria for achieving top 100 Hospital Status	Raymond Hino	12/29/2023	Executive Team	
	4.0	Growth				
On Track	4.1	Develop comprehensive district marketing plan	Scott McEachern	12/29/2023	Amy Moss Strong	71.88
On Track	4.1.1	Refresh Hospital Brand and Collateral	Scott McEachern	6/30/2023	Executive team	46.87
Completed	4.1.1.1	Perform a SWOT analysis	Scott McEachern	6/1/2022	Executive Team	100
Completed	4.1.1.2	Assess SCHHC community and patient demographics to optimize outreach practices	Scott McEachern	6/30/2023	Rachel Gray, project team	100
On Track	4.1.1.3	Identify SCHHC's value propositions and differentiators	Scott McEachern	6/30/2023	Rachel Gray	100
On Track	4.1.1.4	Develop SCHHC patient and provider personas in an effort to better target patient advertising and provider recruitment	Scott McEachern	6/30/2023	Executive Team	50

Status	ID	Task	Owner	Date	Support	%
On Track	4.1.1.5	Present options to internal team around brands for hospital, clinic, and foundation	Scott McEachern	10/6/2023	Rachel Gray, Executive Team, managers	25
On Track	4.1.1.6	Finalize comprehensive brand guidelines	Scott McEachern	11/3/2023	Rachel Gray, Executive Team, managers	
On Track	4.1.1.7	Present final brand deck to SCHD Board	Scott McEachern	11/16/2023	Rachel Gray,	
	4.1.1.8	Begin Implementation of new SCHD Brand	Scott McEachern	1/1/2024	Executive Team, managers	
On Track	4.1.2	Revamp patient education on website and on-site resources	Scott McEachern	6/30/2023	Clinical managers	25
Completed	4.1.3	Begin billboard advertisements	Scott McEachern	3/31/2023	Amy Moss Strong	37.5
	4.1.3.1	Quarterly Billboard 1 Install	Scott McEachern	4/1/2023	Amy Moss Strong	100
Attention	4.1.3.2	Quarterly Billboard 2 Install	Scott McEachern	8/31/2023	Amy Moss Strong	50
On Track	4.1.3.3	Quarterly Billboard 3 Install	Scott McEachern	9/30/2023	Amy Moss Strong	
On Track	4.1.3.4	Quarterly Billboard 4 Install	Scott McEachern	1/1/2024	Amy Moss Strong	
On Track	4.1.4	Install New Outside signage	Scott McEachern	1/31/2024	Jeremiah Dodrill, Ray Hino, Jason Cook	66.66
Completed	4.1.4.1	Redesign	Scott McEachern	1/31/2023	Jeremiah Dodrill, Ray Hino, Jason Cook	100
Attention	4.1.4.2	Approach Art Signs for cost estimate	Scott McEachern	3/31/2023	Jeremiah Dodrill, Ray Hino, Jason Cook	
Completed	4.1.4.3	Redesign Clinic and Biz Building signs	Scott McEachern	4/3/2023	Jeremiah Dodrill, Ray Hino, Jason Cook	100
Completed	4.1.5	Develop high-level strategies and core messaging to communicate changes at SCHHC, new services, and pertinent information to the community	Scott McEachern, Raymond Hino	8/31/2022	Amy Moss Strong	100
Completed	4.1.6	Develop pipeline of patient testimonials	Scott McEachern	12/31/2022	Amy Moss Strong	100
Completed	4.1.7	Position the SCHHC Website as SCHHC's digital front door	Scott McEachern	12/31/2022	Amy Moss Strong, external vendor	100
Completed	4.1.7.1	Perform a needs assessment on current website design, functionality, and content	Scott McEachern	7/31/2022	Amy Moss Strong, Employee Council	100
Completed	4.1.7.2	Evaluate vendors to provide web design and content maintenance services	Scott McEachern	8/31/2022	Amy Moss Strong	100
Completed	4.1.7.3	Integrate website with all other SCHHC digital assets -- ensure continuity of experience	Scott McEachern	12/31/2022	Amy Moss Strong	100
Completed	4.1.8	Review current practices for SCHHC brand optimization and expansion opportunities	Scott McEachern	10/31/2022	Amy Moss Strong	100
Completed	4.1.8.1	Identify other advertising and public relations integrations available in the community; e.g. other newsletters, business relationships, etc.	Scott McEachern	10/31/2022	Amy Moss Strong	100
Completed	4.1.8.2	Implement regular survey cadence of community to assess movement in SCHHC brand awareness	Scott McEachern	11/30/2022	Amy Moss Strong	100
On Track	4.1.9	Grow SCHHC Brand awareness by enhancing communication pathways to patients and community	Scott McEachern	6/30/2023	Amy Moss Strong	75
On Track	4.1.9.1	Increase SCHHC's social media activity by 25%	Scott McEachern	6/30/2023	Amy Moss Strong	75
Completed	4.1.9.2	Increase mailing list sign-ups via e-newsletter and calls to action on website, social media	Scott McEachern	12/31/2022	Amy Moss Strong	100

Status	ID	Task	Owner	Due Date	Support	%
On Track	4.1.9.3	Optimize current patient portal experience for patients	Scott McEachern	6/30/2023	Shawn March, Clinical Informatics	75
On Track	4.1.9.4	Increase patient utilization of patient portal by 25% by 6/30/23	Scott McEachern	6/30/2023	Shawn March, Clinical Informatics, Amy Moss Strong, front desks at clinic and hospital	50
On Track	4.1.10	Increase Digital Key Performance Indicators	Scott McEachern	6/30/2023	Amy Moss Strong	67.85
Completed	4.1.10.1	Website Traffic	Scott McEachern	10/31/2022	Amy Moss Strong	100
Completed	4.1.10.2	Open rate and click-through rate of e-newsletter	Scott McEachern	10/31/2022	Amy Moss Stronggg	100
Completed	4.1.10.3	Social Media page likes & reach	Scott McEachern	10/31/2022	Amy Moss Strong	100
Completed	4.1.10.4	Survey community on SCHHC brand awareness - benchmark	Scott McEachern	5/25/2022	Amy Moss Strong	100
On Track	4.1.10.5	Increase website traffic by 5% by 6/30/23	Scott McEachern	6/30/2023	Amy Moss Strong	25
On Track	4.1.10.6	Increase open rate and click-through of Bandon Health Wave by 10%	Scott McEachern	6/30/2023	Amy Moss Strong	25
On Track	4.1.10.7	Increase Facebook, LinkedIn, Instagram reach by 10%	Scott McEachern	6/30/2023	Amy Moss Strong	25
On Track	4.2	Become the hospital of choice identifying, developing and providing the right services (health screening, mental health, surgical, transitional care) to improve community health.	Cori Valet, Scott McEachern, Raymond Hino, Kimberly Russell, Jeremiah Dodrill	12/31/2023	Board of Directors, Executive Team, Hospital and Health Center staff, Amy Moss Strong	70.66
Completed	4.2.1	CEO to meet with major employers, elected leaders, medical staff members, Hospital Board and Executive Team to identify an opportunity assessment for current and future hospital services.	Kimberly Russell, Raymond Hino	3/31/2023	Board of Directors, Executive Team, Amy Moss Strong	70
Completed	4.2.1.1	Create a matrix of commercial health plan, and managed care plans that are active in Southern Coos County	Jeremiah Dodrill	9/30/2022	Cathy Mann, Katelin Wirth	100
Completed	4.2.1.2	Review current commercial and managed care contracts and adequacy of payment terms	Jeremiah Dodrill	12/31/2022	Cathy Mann	100
On Track	4.2.1.3	Renegotiate Moda commercial and MA contracts	Jeremiah Dodrill	3/31/2023	Cathy Mann, Katelin Wirth	10
Completed	4.2.2	Evaluate alignment between employer sponsored health plans and current payor contracts at SCHHC	Jeremiah Dodrill	12/31/2022	Cathy Mann, Katelin Wirth	100
Completed	4.2.3	Collaborate with other local healthcare organizations to maximize benefit to patients and the community	Raymond Hino	12/31/2022	Executive Team	100
Attention	4.2.4	Develop service line growth analysis mechanism and plan.	Raymond Hino	6/30/2023	Executive Team, Katelin Wirth, Brenda Sund	45.83
Attention	4.2.4.1	Construct a service line analysis process to identify new service lines and evaluate existing service lines	Raymond Hino	4/30/2023	Executive Team, Katelin Wirth, Brenda Sund	
Attention	4.2.4.2	Conduct market study of outpatient services	Raymond Hino	3/31/2023	Executive Team	
Attention	4.2.4.3	Evaluate opportunities for new services (outpatient services, outpatient and inpatient surgical services, transitional care) that are financially feasible for SCHHC	Raymond Hino, Jeremiah Dodrill, Scott McEachern, Cori Valet	6/30/2023	Executive Team	
Completed	4.2.4.4	Complete Orthopedic Service Line analysis and recruit provider	Jeremiah Dodrill, Raymond Hino	8/15/2023	Katelin Wirth	100

Status	ID	Task	Owner	Due Date	Support	%
Attention	4.2.4.5	Develop referral relationship with CCHC for laboratory services	Raymond Hino, Cori Valet, Scott McEachern	9/29/2023		75
Completed	4.2.4.6	Develop occupational health program in clinic	Dawn Gray, Raymond Hino, Jeremiah Dodrill	8/15/2023	Providers	100
Attention	4.2.5	Increase commercial payers use of SCHHC services	Raymond Hino	1/31/2023	Cori Valet, Jeremiah Dodrill	37.5
Completed	4.2.5.1	Assess current state of patient intake process, including outreach to local providers	Scott McEachern	1/31/2023	Dawn Gray, Cathy Mann, Shawn March	100
Attention	4.2.5.2	Increase SCHHC utilization of employees at local employers that offer better insurance plans: Bandon Dunes, School District, City of Bandon, local businesses; etc.		3/31/2023	Executive Team	25
On Track	4.2.5.3	Create and disseminate marketing collateral to local businesses and civic organizations	Scott McEachern	1/1/2024	Executive Team	
On Track	4.2.5.4	Assess local businesses' healthcare needs	Cori Valet, Scott McEachern	3/31/2023	Jeremiah Dodrill, Raymond Hino	100
Attention	4.2.5.5	Research population segments; develop specific marketing outreach to segments	Scott McEachern	3/31/2023	Amy Moss Strong	
On Track	4.2.5.6	Develop marketing plan for new orthopedic surgeon	Scott McEachern	12/29/2023		
On Track	4.3	Develop long-term board governance training program for SCHD board	Raymond Hino	7/1/2023	Board, Sr Leadership	63.33
Completed	4.3.1	Research best practices in Governance Training and Education, including by not limited to: Governance Institute, Special District Association of Oregon; Estes Park Institute	Raymond Hino	12/31/2022	Executive Team, Kim Russell, Board of Directors	100
Attention	4.3.2	Select a long-term board governance training partner.	Raymond Hino	4/27/2023	Executive Team, Kim Russell, Board of Directors	90
Attention	4.3.3	Create a 12-month calendar for Board Education and Training, for the months of June 2023 to May 2024	Raymond Hino	7/1/2023	Executive Team, Kim Russell, Board of Directors	
Attention	4.4	Develop a facility master plan for the entire facility that will encompass equipment, clinical tools, and infrastructure	Jeremiah Dodrill	12/31/2023		46.66
Completed	4.4.1	Engage consultant to guide development of facility master plan, including RFP, selection of architects, and development of TCO	Jeremiah Dodrill	8/15/2023	Jonathan Yamasaki, Scott McEachern, Jason Cook	100
Attention	4.4.2	Select Architectural Firm	Jeremiah Dodrill	9/30/2023	Jason Cook	30
Completed	4.4.2.1	Identify and interview CAH hospitals that have had recent significant physical plant upgrades or built new hospitals.	Jeremiah Dodrill	9/15/2022	Jason Cook	100
Attention	4.4.2.2	Develop Architect selection criteria based on results of CAH hospital interviews	Jeremiah Dodrill	7/31/2023	Jason Cook	50
Attention	4.4.2.3	Develop RFP and solicit bids for Architects to develop master site plan	Jeremiah Dodrill	7/31/2023	Jason Cook	
Attention	4.4.2.4	Select Architect base on RFP submissions/responses. Negotiate Engagement terms	Jeremiah Dodrill	9/30/2023	Jason Cook	

Status	Number	Task	Owner	Date	Support	%
Attention	4.4.2.5	Sign Architect Contract	Jeremiah Dodrill	3/31/2023	Jason Cook, Ray Hino and Architect	
Attention	4.4.3	Identify future plant infrastructure needs	Jeremiah Dodrill	8/31/2022	Jason Cook, Service Line Management	50
Completed	4.4.3.1	Interview Service Line management to understand growth/expansion/service opportunities and issues affecting current and future clinical operations	Jeremiah Dodrill	7/31/2022	Jason Cook, Service Line Management	100
Attention	4.4.3.2	Incorporate needs assessment into Architect RFP	Jeremiah Dodrill	7/31/2023	Jason Cook	
Attention	4.4.4	Develop Phase 1 facilities plan - Immediate opportunities to improve existing campus infrastructure without large construction effort and service interruption	Jeremiah Dodrill	12/31/2023	Jason Cook and Architect	
Attention	4.4.4.1	Work with Architect and management to identify opportunities for Phase 1 Plan	Jeremiah Dodrill	12/31/2023	Jason Cook and Architect	
Attention	4.4.4.2	Develop cost estimates for Phase 1 Plan	Jeremiah Dodrill	12/31/2023	Jason Cook and Architect	
Attention	4.4.5	Develop Phase 2 facilities plan - Full campus expansion	Jeremiah Dodrill	12/31/2023	Jason Cook and Architect	
Attention	4.4.5.1	Work with Architect to identify opportunities for Phase 2 campus expansion - Location, Cost, Schematic variations considered	Jeremiah Dodrill	9/30/2023	Jason Cook and Architect	
Attention	4.4.5.2	Evaluate Lot/Land options and availability for facilities expansion	Jeremiah Dodrill	9/30/2023	Jason Cook and Architect	
Attention	4.4.5.3	Evaluate various options and select preferred high level schematic	Jeremiah Dodrill	9/30/2023	Jason Cook and Architect	
Attention	4.4.5.4	Develop Cost Estimate				
Completed	4.4.6	Develop long-range clinical and operations equipment plan	Jeremiah Dodrill	12/31/2022	Jason Cook, Accounting/Finance, Service Line Management	100
Completed	4.4.6.1	Create inventory of all existing owned, leased and serviced equipment	Jeremiah Dodrill	7/31/2022	Jason Cook and Accounting	100
Completed	4.4.6.2	Reconcile listing of all equipment between Engineering and Accounting	Jeremiah Dodrill	8/15/2022	Jason Cook and Accounting	100
Completed	4.4.6.3	Determine expected end of life/obselescence of each equipment classificaction given date of purchase, expedcted useful life and other relevant factors (including service line manager input)	Jeremiah Dodrill	10/31/2022	Jason Cook, Accounting and Service Line Management	100
Completed	4.4.6.4	Evaluate warranty service period expiries	Jeremiah Dodrill	10/31/2022	Jason Cook and Accounting	100
Completed	4.4.6.5	Develop cost estimates for replacement, create schedule of replacement/investment/service contracts	Jeremiah Dodrill	11/30/2022	Jason Cook, SCS and Accounting	100
Completed	4.4.6.6	Formalize equipment replacement plan, including cost, expected replacement dates and service contracts	Jeremiah Dodrill	12/31/2022	Jason Cook and Accounting	100
Completed	4.4.6.7	Develop standard operating procedures for maintenance of equipment and warranty lists	Jeremiah Dodrill	12/31/2022	Jason Cook and Accounting	100

	5.0	Finance				
On Track	5.1	Develop financial sustainability plan	Jeremiah Dodrill	12/31/2023		37.85
Completed	5.1.1	Complete FY 2023 budget. Criteria is that "Change in Net Position" is not negative for the fiscal year	Jeremiah Dodrill	6/30/2022	Axiom, Katelin Wirth, CLA	100
On Track	5.1.2	Renegotiate provider contracts, where necessary, to meet regulatory requirements	Raymond Hino	6/30/2023	Jeremiah Dodrill, Outside legal counsel	90
Attention	5.1.3	Complete long range financial plan, taking into consideration impact of cost based reimbursement, growth initiatives/targets and required capital/infrastructure plans	Jeremiah Dodrill	6/30/2023	Axiom, Katelin Wirth, CLA	75
Attention	5.1.4	Define what it means to be adequately profitable to meet the capital needs of the hospital.	Jeremiah Dodrill	7/31/2023	Board, Executive Management	
Attention	5.1.5	Update plan with results of the Phase 1 facilities plan	Jeremiah Dodrill	1/31/2024	Axiom, Katelin Wirth, CLA	
Attention	5.1.6	Update plan with EMR/ERP Implementation total cost of ownership	Jeremiah Dodrill	1/31/2024	Scott McEachern	
Attention	5.1.7	Update Plan with results of Phase 2 facilities plan. Identify funding gap.	Jeremiah Dodrill		Axiom, Katelin Wirth, CLA	
Attention	5.2	By the end of FY23, the clinic will be at break-even financially	Raymond Hino	3/31/2024	Raymond Hino, Jeremiah Dodrill, Dawn Gray	78.75
Completed	5.2.1	Feasibility study to Achieve rural health center designation for the clinic	Jeremiah Dodrill	11/30/2022		100
Completed	5.2.1.1	Obtain proposals to conduct feasibility study from 2 reputable consulting/CPA firms	Jeremiah Dodrill	5/13/2022	CLA and Wipfli	100
Completed	5.2.1.2	Review proposals and select consultant to conduct feasibility study	Jeremiah Dodrill	5/20/2022	CLA and Wipfli	100
Completed	5.2.1.3	Provide data and complete PBC listing for RHC feasibility study	Jeremiah Dodrill	8/31/2022	Katelin Wirth	100
Completed	5.2.1.4	Evaluate findings of RHC feasibility study and make recommendation to Executive Committee, Clinic leadership and Board	Jeremiah Dodrill	11/17/2022	Wipfli	100
Completed	5.2.2	Recruit additional high volume provider to clinic	Raymond Hino	12/31/2022	Jeremiah Dodrill, Katelin Wirth, MGMA and MD Ranger benchmark tools	100
Completed	5.2.3	Renegotiate existing clinic provider contracts (as they expire), benchmarked for compensation and productivity which reflects minimum of break-even financial performance	Raymond Hino	4/30/2023	Jeremiah Dodrill, Katelin Wirth, MGMA and MD Ranger benchmark tools	100
Completed	5.2.3.1	Negotiate Dr. Mitchell contract	Raymond Hino	11/30/2022		100
Completed	5.2.3.2	Negotiate Dr. Pense contract	Raymond Hino	12/31/2022		100
Completed	5.2.3.3	Negotiate Dr. Adams Contract	Raymond Hino	4/30/2023		100
Attention	5.2.4	Renegotiate Advance Healthcare Contract for Medicaid patient population	Jeremiah Dodrill	6/1/2023	Raymond Hino, Dawn Gray, Advance Healthcare	50
On Track	5.2.5	Attest for PCPCH designation, to increase Medicaid reimbursement rates	Dawn Gray	9/30/2023	Barbara Snyder, Raymond Hino,	75
On Track	5.2.6	Implement Care Coordination (HealthTech or ACO) to increase Medicare reimbursement	Dawn Gray	8/22/2023	Scott McEachern	100

Completed	5.2.7	Assess viability of hiring external consultant to optimize clinic workflows	Scott McEachern	3/31/2023	Jeremiah Dodrill, Katelin Wirth, Shawn March, Dawn Gray	100
On Track	5.2.8	Achieve positive net income for clinic over 3-month period. This is a change, per agreement with Tom Bedell. Previous goal read "Achieve positive net income for 3 consecutive months." Changed on 3-17-2023	Jeremiah Dodrill	3/31/2024	Dawn Gray, clinic providers, clinic staff	5
Completed	5.3	Add Board indemnification language to the Bylaws and Board insurance	Raymond Hino	6/23/2022	Board of Directors, Robin Miller, Chivaroli Insurance	100
Completed	5.3.1	Identify subject experts on District Hospital Board Bylaws Indemnification language	Raymond Hino	6/13/2022	Governance Institute, Special Districts Assoc of Oregon, Chivaroli Insurance, Robin Miller	100
Completed	5.3.2	Write indemnification language as a bylaws revision and present to the Board of Directors for approval	Raymond Hino	6/23/2022	Kim Russell	100
	6.0	**Accreditation and regulatory compliance**				
On Track	6.1	MIPS				
	6.1.1	MIPS Quality: Tobacco Use: Screening and Cessation Information				
	6.1.2	MIPS Quality: Comprehensive Diabetes Care: Hemoglobin poor control (>9.0%)				
	6.1.3	MIPS Quality: Controlling High Blood Pressure				
	6.1.4	MIPS Quality: Clinic Quality Measure TBD				
	6.1.5	MIPS Quality: Clinic Quality Measure TBD				
	6.1.6	MIPS Quality: Clinic Quality Measure TBD				
	6.1.7	MIPS Improvement Activities: Achieve PCPCH Certification				
	6.1.8	MIPS Promoting Interoperability: E-Prescribing				
	6.1.9	MIPS Promoting Interoperability: Query of PDMP				
	6.1.10	MIPS Promoting Interoperability: Health Information Exchange				
	6.1.11	MIPS Promoting Interoperability: Provider to Patient Exchange (utilization of the patient portal)				
	6.1.12	MIPS Promoting Interoperability: Public Health and Clinical Data Exchange (syndromic surveillance)				
	6.1.13	MIPS Promoting Interoperability: Public Health and Clinical Data Exchange (Immunization Registry; Electronic Case Reporting.				
	7.0	**General SCHHC Projects**				
	7.1					
	8.0	**Community Health Needs Assessment**				
	8.1	Expanded Access to care	Scott McEachern			
	8.1.1	Triage Line	Scott McEachern			
	8.1.1.1	Tracking Call Volume and Time	Scott McEachern			
	8.1.2	Same Day (Fast Track) Appointments	Scott McEachern			
	8.1.3	Extended Hours	Scott McEachern			

	8.2	Assess Potential Specialties to improve local access	Scott McEachern			
	8.2.1	Dermatology	Scott McEachern			
	8.2.2	Urology	Scott McEachern			
	8.2.3	Gynecology	Scott McEachern			
	8.2.4	Endocrinology	Scott McEachern			
	8.2.5	Ophthalmology (Cataracts)	Scott McEachern			
	8.2.6	Podiatry	Scott McEachern			
	8.2.7	ENT	Scott McEachern			
	8.2.8	Nephrology	Scott McEachern			
	8.2.9	Pediatric	Scott McEachern			
	8.2.10	Telemedicine	Scott McEachern			
	8.2.11	Psychiatric services	Scott McEachern			
	8.2.12	Orthopedics	Scott McEachern			
	8.3	Improve Service Areas to the Patients	Scott McEachern			
	8.3.1	Chronic Care Management	Scott McEachern			
	8.3.2	School Nurse Replacement	Scott McEachern			
	8.3.3	Concierge Service	Scott McEachern			
	8.4	Increase community awareness about our services	Scott McEachern			
	8.4.1	Google	Scott McEachern			
	8.4.2	Employers	Scott McEachern			
	8.4.3	Branding	Scott McEachern			
	8.4.3.1	Explore standard uniform for front desk staff	Scott McEachern			
	8.4.4	SEO	Scott McEachern			
	8.4.5	Same Day Billboard	Scott McEachern			
	8.4.6	Promote Pulmonary Disease Program				
	8.5	Staff Education	Scott McEachern			
	8.5.1	increased awareness of Insurance acceptance, and services offered at the hospital and clinic, Community, and how to access those services	Scott McEachern			
	8.5.1.1	Outside service resource list.	Scott McEachern			
	8.5.1.2	Availability and promotion of Financial Assistance Policy	Scott McEachern			
	8.5.2	Cultural Competency and trauma-informed care education	Scott McEachern			
	8.5.3	Expanded Privacy training	Scott McEachern			