STATUS	WBS	DESCRIPTION	OWNER	DUE DATE	RESOURCES	%
	1.0	People				
On Track	1.1	Benchmark and implement employee compensation philosophy	Raymond Hino, Jeremiah Dodrill	2/28/2023	Carrie Okey, Katelin Wirth	83.33
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
Attention	1.1.3	Complete benchmarking study of hospital job codes	Jeremiah Dodrill, Raymond Hino	1/31/2023	Carrie Okey, HR, Finance	50
Attention	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	75
Attention	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	50
Attention	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	2/15/2023	Carrie Okey, HR, Finance	25

	1		Plan - Updated January 23, 2023	I- 1: 1	T	1
Attention	1.2	Develop and implement hospital physician/provider (medical staff) development plan, to include both current and projected future recruitment needs, Stark law compliance, additional best practices for medical staff development.	Jeremiah Dodrill, Raymond Hino	5/1/2023	Executive Team, Katelin Wirth, MD Ranger, MGMA	55.85
Completed	1.2.1	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
Attention	1.2.2	Review Community Health Needs Assessment & interview Board, Medical Staff, Executive Leadership for physician recruitment needs	Raymond Hino	1/31/2023	Survey Monkey or hard copy surveys. Distribute, collect and tabulate results	50
Completed	1.2.3	Complete a provider contract audit and identify if compliance variances exist	Raymond Hino	7/15/2022	MD Ranger, Jeremiah Dodrill	100
Attention	1.2.4	Create Medical Staff Development plan based upon results of needs assessment and best practices	Raymond Hino	12/31/2022	Executive Team, Kim Russell	50
Attention	1.2.4.1	To include recruitment needs and recruitment plan	Raymond Hino	12/31/2022	Executive Team	
Completed	1.2.4.2	To include Stark Law compliance metrics for all contracts	Raymond Hino	12/31/2022	Executive Team	100
Attention	1.2.5	Present findings of Medical Staff Development Plan to Board of Directors	Raymond Hino	12/31/2022	Jeremiah Dodrill, Kim Russell	
			1	1		

		2022-2024 Strategic	Plan - Opualed January 23, 2023			
Attention	1.2.6	Complete implementation of findings and recommendations from Board approved Medical Staff Development Plan	Raymond Hino	12/31/2022	Executive Team	25
Attention	1.2.7	Renegotiate provider contracts, where necessary, to meet regulatory requirements	Raymond Hino	4/30/2023	Jeremiah Dodrill, Outside legal counsel	66
Completed	1.3	Develop Employee Recognition and Engagement Plan by department/division, with a focus on collaboration	Carrie Okey, Scott McEachern	1/1/2023	Executive Team, Carrie Okey	100
On Track	1.3.1	Identify gaps in employee recognition	Cori Valet, Carrie Okey, Scott McEachern	12/31/2022	Amy Moss Strong	100
On Track	1.3.1.1	Exploring employee recognition platforms	Scott McEachern, Carrie Okey	2/28/2023		100
Completed	1.3.2	Implement Daisy Award Program	Cori Valet, Raymond Hino	11/22/2022		100
Completed	1.3.3	Develop a budget for Employee Recognition	Scott McEachern, Cori Valet, Jeremiah Dodrill	12/31/2022	Executive Team	100
Completed	1.3.4	Develop Pulse Surveys as a way to track employee engagement over time	Scott McEachern, Carrie Okey	11/1/2022		100
Completed	1.3.5	Implemented Survey Monkey Enterprise system	Carrie Okey, Scott McEachern	11/1/2022		100
Completed	1.3.6	Reboot Employee Activities Committee	Carrie Okey	11/1/2022		100
Completed	1.3.7	Implement Cyrano Video Platform and distribute weekly CEO meetings	Raymond Hino, Scott McEachern	12/1/2022		100
On Track	1.4	Develop and implement a staff education plan	Cori Valet	2/28/2023	Carrie Okey	70
Completed	1.4.1	Identify current staff education plans.	Cori Valet	8/12/2022	Carrie Okey, Kerry Vincent and department managers	100
Completed	1.4.1.1	Identify current all staff education plan (Initial and annual)	Cori Valet	7/8/2022	Carrie Okey, Kerry Vincent	100
Completed	1.4.1.2	Identify current department specific education processes.	Cori Valet	7/15/2022	All department managers, Kerry Vincent	100
Completed	1.4.2	Identify current Medical Provider Education plans	Cori Valet	6/18/2022	Shawn March	100
Completed	1.4.3	Perform a gap analysis to determine deficiencies in existing education processes.	Cori Valet	1/31/2023	Carrie Okey	100
On Track	1.4.3.1	Develop a gap analysis tool	Cori Valet	12/31/2022	Carrie Okey, Arianne Booth	100
Completed	1.4.3.2	Benchmark other Hospitals, i.e. LUH, CVH, CGH	Cori Valet	12/31/2022	Carrie Okey, Arianne Booth	100
On Track	1.4.3.3	Perform gap analysis using data from other hospital benchmarking	Cori Valet	1/31/2023	Carrie Okey, Arianne Booth	100
On Track	1.4.4		Cori Valet age 3 of 11	3/31/2023	Carrie Okey	

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On Track	1.4.5	Implement the updated education policy for staff, managers, and medical providers.	Cori Valet	4/14/2023	Carrie Okey	50
On Track	1.4.5.1	Create an education policy for staff, manager and medical provider education.	Cori Valet	1/31/2023	Carrie Okey	50
Completed	1.5	Implement Leadership Training Program	Raymond Hino	9/1/2022	Carrie Okey, Executive Team	100
Completed	1.5.1	Identify management team members required to participate in Leadership Training program	Raymond Hino	5/31/2022	Carrie Okey, Executive Team	100
Completed	1.5.2	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	1.5.3	Select resource entity, sign contract (if necessary) and establish start date	Raymond Hino	7/31/2022	Carrie Okey, Executive Team	100
Completed	1.5.4	Create 12-month schedule for Leadership Training program	Raymond Hino	9/1/2022	Carrie Okey, Executive Team	100
On Track	1.6	Expectations - Clarify expectations of all employees and update/streamline employee evaluation process aligned with expectations	Raymond Hino, Jeremiah Dodrill	5/31/2023	Carrie Okey	50
Completed	1.6.1	Identify best practices in employee evaluation process	Raymond Hino, Jeremiah Dodrill	9/30/2022	Carrie Okey, HR	100
On Track	1.6.2	Perform value stream analysis on employee evaluation process.	Jeremiah Dodrill, Raymond Hino	3/31/2023	Carrie Okey, HR	50
On Track	1.6.2.1	Clarify expectations of employees and managers in evaluation process	Jeremiah Dodrill, Raymond Hino	3/31/2023	Carrie Okey	50
On Track	1.6.2.2	Develop standard operation procedures for HR, managers and employees for the employee evaluation process	Raymond Hino, Jeremiah Dodrill	3/31/2023	Carrie Okey	50
On Track	1.6.3	Revamp employee evaluation documents to meet best practices	Jeremiah Dodrill, Raymond Hino	4/30/2023	Carrie Okey, HR	
On Track	1.6.3.1	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	4/30/2023	Carrie Okey, HR	
On Track	1.6.4	Develop visibility and accountability measures for leadership	Raymond Hino, Jeremiah Dodrill	4/30/2023	Carrie Okey, HR	50
Completed	1.7	Identify gaps in recruitment process	Raymond Hino, Jeremiah Dodrill	12/31/2022	Carrie Okey	100
Completed	1.7.1	Identify best practices in employee recruiting.	Jeremiah Dodrill	7/31/2022	Carrie Okey, HR	100
Completed	1.7.2	Perform value stream analysis on employee recruiting process	Jeremiah Dodrill	8/31/2022	Carrie Okey, HR	100
Completed	1.7.3	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	6/30/2023	Executive Team	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 Page 4 of 11	6/17/2022	Executive Team, Leadership Team	100
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2.2.4.1 2.2.4.2 2.2.4.3 2.2.5 2.2.5.1 2.2.5.2	Laboratory Information System Radiology Information System & Peripherals Respiratory Peripherals Identify ERP System Vendors Premier Workday	Scott McEachern Scott McEachern Scott McEachern Scott McEachern Scott McEachern Scott McEachern Scott McEachern Scott McEachern Scott McEachern	9/30/2022 9/30/2022 9/30/2022 12/31/2022 12/31/2022 12/31/2022 12/31/2022	Trevor Jurgenson, Cindy Kessler, Deb Backman, Marlene Rocha, Deb Ellis, Cheryl Johnson Cindy Kessler, Laboratory Deb Backman Cheryl Johnson Marlene Rocha, Finance Team Finance team Finance team, Supply Management Finance team, Jonathan Yamasaki	100 100 100 100 58.33 100 50
2.2.4.1 2.2.4.2 2.2.4.3 2.2.5 2.2.5.1 2.2.5.2	Laboratory Information System Radiology Information System & Peripherals Respiratory Peripherals Identify ERP System Vendors Premier Workday	Scott McEachern	9/30/2022 9/30/2022 9/30/2022 12/31/2022 12/31/2022 12/31/2022	Backman, Marlene Rocha, Deb Ellis, Cheryl Johnson Cindy Kessler, Laboratory Deb Backman Cheryl Johnson Marlene Rocha, Finance Team Finance team Finance team, Supply Management	100 100 100 58.33 100 50
2.2.4.1 2.2.4.2 2.2.4.3 2.2.5 2.2.5.1	Laboratory Information System Radiology Information System & Peripherals Respiratory Peripherals Identify ERP System Vendors Premier	Scott McEachern Scott McEachern Scott McEachern Scott McEachern Scott McEachern	9/30/2022 9/30/2022 9/30/2022 12/31/2022 12/31/2022	Backman, Marlene Rocha, Deb Ellis, Cheryl Johnson Cindy Kessler, Laboratory Deb Backman Cheryl Johnson Marlene Rocha, Finance Team Finance team	100 100 100 58.33 100
2.2.4.1 2.2.4.2 2.2.4.3 2.2.5	Laboratory Information System Radiology Information System & Peripherals Respiratory Peripherals Identify ERP System Vendors	Scott McEachern Scott McEachern Scott McEachern Scott McEachern	9/30/2022 9/30/2022 9/30/2022 12/31/2022	Backman, Marlene Rocha, Deb Ellis, Cheryl Johnson Cindy Kessler, Laboratory Deb Backman Cheryl Johnson Marlene Rocha, Finance Team	100 100 100 58.33
2.2.4.1 2.2.4.2 2.2.4.3	Laboratory Information System Radiology Information System & Peripherals Respiratory Peripherals	Scott McEachern Scott McEachern Scott McEachern	9/30/2022 9/30/2022 9/30/2022	Backman, Marlene Rocha, Deb Ellis, Cheryl Johnson Cindy Kessler, Laboratory Deb Backman Cheryl Johnson	100 100 100
2.2.4.1 2.2.4.2	Laboratory Information System Radiology Information System & Peripherals	Scott McEachern Scott McEachern	9/30/2022 9/30/2022	Backman, Marlene Rocha, Deb Ellis, Cheryl Johnson Cindy Kessler, Laboratory Deb Backman	100 100
2.2.4.1	Laboratory Information System	Scott McEachern	9/30/2022	Backman, Marlene Rocha, Deb Ellis, Cheryl Johnson Cindy Kessler, Laboratory	100
				Backman, Marlene Rocha, Deb Ellis, Cheryl Johnson	
2.2.3.1	Identify appropriate project management team options. Criteria: has worked with small rural hospitals before; experience with EPIC implementation in CAHs; affordable price.	Scott McEachern	12/31/2022		33
2.2.3	Determine scope of work for hiring an external project management team	Scott McEachern	8/31/2022	Executive Team	33
2.2.2.4	Providence Community Connect	Scott McEachern	11/7/2022		50
2.2.2.3	Cerner Community Works	Scott McEachern	7/31/2022		100
2.2.2.2	St. Charles EPIC	Scott McEachern	7/31/2022		100
2.2.2.1	OCHIN	Scott McEachern	5/31/2022		100
2.2.2	Open conversations with potential EMR vendors	Scott McEachern	7/31/2022	Raymond Hino, Trevor Jurgenson	87.5
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	12/31/2022	Executive Team, Managers, Providers	10
2.2	Identify, select, and implement the most effective EMR and ERP systems.	Scott McEachern	9/30/2024	Executive Team, Managers, Providers	45.98
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	
2.1.3	,	Raymond Hino	11/17/2022	Executive Team, Project Teams;	
2.1.2	Hospital Experience; (2) Wayfinding and Physical Environment; (3) Intake; (4) Outpatient Services; (5) Inpatient Services; (6) Discharge and Continuation of Engagement.	Raymona Timo	3) 1, 2023	Executive really, Project realls	
2 2 2 2 2 2	.1.4 .2 .2.1 .2.2 .2.2.1 .2.2.2 .2.2.3	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. Implement 2-5 deliverable enhancements to patient engagement, recommended by each team Implement 4-8 deliverable enhancements to patient engagement, recommended by each team Identify, select, and implement the most effective EMR and ERP systems. Convene EHR Governance Committee, comprised of a cross-departmental team tasked with overseeing selection, implementation, and maintenance of EHR system Open conversations with potential EMR vendors OCHIN 2.2.1 OCHIN Cerner Community Works	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. Implement 2-5 deliverable enhancements to patient engagement, recommended by each team Implement 4-8 deliverable enhancements to patient engagement, recommended by each team Identify, select, and implement the most effective EMR and ERP systems. Convene EHR Governance Committee, comprised of a crossdepartmental team tasked with overseeing selection, implementation, and maintenance of EHR system Copen conversations with potential EMR vendors Scott McEachern Scott McEachern Scott McEachern Cottline Scott McEachern Scott McEachern Cottline Cottline Scott McEachern Cottline Cottline Scott McEachern Cottline Cottline Cottline Scott McEachern Cottline Cottlin	Hospital Experience; (2) Wayfinding and Physical Environment; (3) Intake; (4) Outpatient Services; (5) Inpatient Services; (6) Discharge and Continuation of Engagement. Implement 2-5 deliverable enhancements to patient engagement, recommended by each team Industry and the second of the second	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. 1.3 Implement 2-5 deliverable enhancements to patient engagement, recommended by each team 1.4 Implement 4-8 deliverable enhancements to patient engagement, recommended by each team 1.4 Implement 4-8 deliverable enhancements to patient engagement, recommended by each team 1.2 Identify, select, and implement the most effective EMR and ERP systems. 2.1 Convene EHR Governance Committee, comprised of a cross-departmental team tasked with overseeing selection, implementation, and maintenance of EHR system 2.2 Open conversations with potential EMR vendors Scott McEachern Scott McEachern Scott McEachern 7/31/2022 Raymond Hino 11/17/2022 Executive Team; Project Teams; Leadership Team Executive Team, Project Teams; Leadership Team Executive Team, Project Teams; Leadership Team Executive Team, Managers, Providers Scott McEachern 12/31/2022 Executive Team, Managers, Providers Executive Team, Managers, Providers Executive Team, Managers, Providers Scott McEachern 7/31/2022 Raymond Hino, Trevor Jurgenson Scott McEachern 5/31/2022 St. Charles EPIC Scott McEachern 7/31/2022 St. Charles EPIC Scott McEachern 7/31/2022

Completed	3.5.1	Perform gap analysis on current SCHHC cybersecurity practices	Page 6 of 11	7/31/2022	Trevor Jurgenson	100
On Track	3.5 3.5.1	Update SCHHC cybersecurity program	Scott McEachern	6/30/2023	Trever Jurgenson	73.43
		Community Members.	·			72.42
Attention	3.4.5	the Department of Homeland Security modules. Communicate Plan to Board of Directors, Foundation, and	Scott McEachern, Cori Valet	7/31/2023	Booth Jason Cook	
Attention	3.4.4	Embed training into onboarding and annual review process using	Jeremiah Dodrill	6/30/2023	Jason Cook, Carrie Okey, Arianne	
Attention	3.4.3	Conduct preparedness exercises	Jeremiah Dodrill	5/31/2023	Jason Cook, Arianne Booth	
Attention	3.4.1	Complete Draft of Emergency Preparedness Plan	Jeremian Dodrill	4/30/2023	Jason Cook, Jeremiah Dodrill	
	3.4.1	Source vendor with expertise in updating IR Plan	Jeremiah Dodrill	1/31/2023	Backman, Katelin Wirth Jason Cook	
Attention	3.4	Update and Implement a district wide Incident Response Plan	Cori Valet, Scott McEachern	7/31/2023	Jason Cook, Trevor Jurgenson, Deb	†
On Track	3.3.6	Update SCHHC Intranet Pulse Page	Scott McEachern	2/28/2023	Managers	
On Track	3.3.5.2	Update Tier I based on assessment	Scott McEachern	3/31/2023	Managers	
On Track	3.3.5.1	Assess usage rate of Tier I huddles	Scott McEachern	2/28/2023	Executive Team	
On Track	3.3.5	ups Revise Tier I & Tier II Huddle System	Scott McEachern	6/30/2023	Executive Team	
On Track	3.3.4.3	Compile data to periodically report to executive team; craft follow-	Carrie Okey	3/31/2023	Scott McEachern	25
Completed	3.3.4.2	Utilize Survey Monkey to take regular surveys of 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
On Track	3.3.4	Implement regular communication with staff	Carrie Okey	10/1/2022	Scott McEachern	75
Completed	3.3.3.2	Monthly Staff Meetings via Zoom	Raymond Hino	8/1/2022	Scott McEachern	100
On Track	3.3.3.1	Implement weekly Cyrano Video Messaging	Scott McEachern	11/18/2022	Raymond Hino	75
On Track	3.3.3	Implement Regular CEO Messaging	Scott McEachern	11/18/2022	Raymond Hino	87.5
Completed	3.3.2	staff with communication?	Scott McEachern	11/30/2022	ivialiagers, stall	100
Completed	3.3.1	Perform a gap analysis: what could we be doing better to reach all		11/7/2022 11/30/2022	Carrie Okey Managers, staff	100
On Track	3.3.1	Develop and Execute Effective Internal Communication Plan Create SCHHC Communications calendar	Scott McEachern Scott McEachern	12/31/2022	Executive Team, Employees Activity Committee	100
Completed	3.2.2	Establish individualized Quality Benchmarks for each clinical department	Cori Valet Scott McEachern	11/21/2022	Barb Snyder, Sharon Bischoff, All clinical dept managers	100
		Hospitals				
Completed Completed	3.2.1	Establish Quality Benchmark Establish Quality Benchmarks consistent with other Critical Access	Cori Valet	11/21/2022	Barb Snyder, Sharon Bischoff Barb Snyder, Sharon Bischoff	100
Completed	3.2	Establish Quality Ronshmark	Cori Valet	11/21/2022	providers, district board	100
- Diripieteu	3.1.5	Pass DNV Accreditation Survey for 2nd Year in a Row	Raymond Hino, Barbara Snyder	9/30/2023	Providers, district board Executive Team, Managers, staff,	
Completed	3.1.4	Achieve Initial DNV Accreditation	Barbara Snyder, Raymond Hino	12/30/2022	Executive Team, Managers,	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	3.1.3.1	Meet with managers to review DNV accreditation items	Scott McEachern	6/10/2022	Managers, Barbara Snyder	100
On Track	3.1.3	Prepare for DNV Assessment in September 2022	Scott McEachern	9/30/2022	Managers, staff	100
Completed	3.1.2	establish timelines DNV Training	Scott McEachern	7/12/2022	Barb Snyder	100
Completed	3.1.1	Schedule a meeting with Stakeholders to discuss next steps and	Scott McEachern	5/12/2022	Scott McEachern	100
On Track	3.1	Implement and Maintain Quality DNV Accreditation Program	Raymond Hino	9/30/2022	Scott McEachern, Barb Snyder, staff	80
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		2022 2024 Strategic	Flatt - Opuated January 23, 2023			
On Track	3.5.2	Update cybersecurity practices and protocols	Scott McEachern	12/31/2022	Trevor Jurgenson	50
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
On Track	3.5.4	Perform annual risk assessment	Scott McEachern	12/1/2022	Trevor Jurgenson	43.75
On Track	3.5.4.1	HIPAA Security Risk Assessment findings presented to exec team	Scott McEachern	12/7/2022	Critical Insight	100
On Track	3.5.4.2	HIPAA Security Risk Assessment findings presented to SCHD board	Scott McEachern	12/15/2022	Critical Insight	
On Track	3.5.4.3	Develop security awareness training program	Scott McEachern	12/31/2022	Trevor Jurgenson	50
	3.5.4.4	Implement patch management services and vulnerability review	Scott McEachern	1/31/2023	Trevor Jurgenson	25
On Track	3.6	Achieve top 100 Hospital Status	Raymond Hino, Scott McEachern, Cori Valet, Jeremiah Dodrill	6/30/2025	Executive Team, Managers, staff, providers, district board	75
On Track	3.6.1	Implement new HCAHPS vendor	Scott McEachern	12/31/2022	Cori Valet	75
	4.0	Growth				
On Track	4.1	Develop comprehensive district marketing plan.	Scott McEachern	6/30/2023	Amy Moss Strong	60.02
On Track	4.1.1	Refresh Hospital Brand and Collateral	Scott McEachern	6/30/2023	Executive team	
On Track	4.1.1.1	Create separate branding guidelines for the Health Center/Clinic	Scott McEachern	6/30/2023	Dawn Gray, Executive Team	
On Track	4.1.2	Begin billboard advertisements	Scott McEachern	3/31/2023	Amy Moss Strong	25
On Track	4.1.3	Install New Outside signage	Scott McEachern	1/31/2023	Jeremiah Dodrill, Ray Hino, Jason Cook	12.5
On Track	4.1.3.1	Redesign	Scott McEachern	1/31/2023	Jeremiah Dodrill, Ray Hino, Jason Cook	25
On Track	4.1.3.2	Approach Art Signs for cost estimate	Scott McEachern	1/31/2023	Jeremiah Dodrill, Ray Hino, Jason Cook	
Completed	4.1.4	Perform a SWOT analysis	Scott McEachern	6/1/2022	Executive Team	100
Overdue	4.1.5	Assess SCHHC community and patient demographics to optimize outreach practices	Scott McEachern	2/28/2023	Amy Moss Strong	50
Overdue	4.1.5.1	Develop SCHHC patient and provider personas in an effort to better target patient advertising and provider recruitment	Scott McEachern	10/31/2022	Executive Team	50
Attention	4.1.6	Identify SCHHC's value propositions and differentiators	Scott McEachern	10/31/2022	Amy Moss Strong	75
Completed	4.1.7	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
On Track	4.1.8	Develop pipeline of patient testimonials	Scott McEachern	12/31/2022	Amy Moss Strong	100
Attention	4.1.9	Position the SCHHC Website as SCHHC's digital front door	Scott McEachern	12/31/2022	Amy Moss Strong, external vendor	75
Completed	4.1.9.1	Perform a needs assessment on current website design, functionality, and content	Scott McEachern	7/31/2022	Amy Moss Strong, Employee Council	100
Completed	4.1.9.2		Scott McFachern	8/31/2022	Amy Moss Strong	100

		2022-2024 Strategic	Plan - Updated January 23, 2023			
Attention	4.1.9.3	Revamp patient education on website and on-site resources	Scott McEachern	12/31/2022	Clinical managers	25
On Track	4.1.9.4	Integrate website with all other SCHHC digital assets ensure continuity of experience	Scott McEachern	12/31/2022	Amy Moss Strong	75
On Track	4.1.10	Review current practices for SCHHC brand optimization and expansion opportunities	Scott McEachern	10/31/2022	Amy Moss Strong	50
On Track	4.1.10.1		Scott McEachern	10/31/2022	Amy Moss Strong	100
Attention	4.1.10.2	Implement regular survey cadence of community to assess movement in SCHHC brand awareness	Scott McEachern	11/30/2022	Amy Moss Strong	
Attention	4.1.11	Grow SCHHC Brand awareness by enhancing communication pathways to patients and community	Scott McEachern	12/31/2022	Amy Moss Strong	65
Attention	4.1.11.1	Increase SCHHC's social media activity by 25%	Scott McEachern	6/30/2023	Amy Moss Strong	75
Completed	4.1.11.2	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
On Track	4.1.11.3	Optimize current patient portal experience for patients	Scott McEachern	12/31/2022	Shawn March, Clinical Informatics	75
Attention	4.1.11.4	Increase patient utilization of patient portal by 25% by 6/30/23	Scott McEachern		Shawn March, Clinical Informatics, Amy Moss Strong, front desks at clinic and hospital	10
On Track	4.1.12	Increase Digital Key Performance Indicators	Scott McEachern	8/31/2022	Amy Moss Strong	67.85
Completed	4.1.12.1	Website Traffic	Scott McEachern	10/31/2022	Amy Moss Strong	100
Completed	4.1.12.2	Open rate and click-through rate of e-newsletter	Scott McEachern	10/31/2022	Amy Moss Strongg	100
Completed	4.1.12.3	Social Media page likes & reach	Scott McEachern	10/31/2022	Amy Moss Strong	100
Completed	4.1.12.4	Survey community on SCHHC brand awareness - benchmark	Scott McEachern	5/25/2022	Amy Moss Strong	100
On Track	4.1.12.5	Increase website traffic by 5% by 6/30/23	Scott McEachern	6/30/2023	Amy Moss Strong	25
On Track	4.1.12.6	Increase open rate and click-through of Bandon Health Wave by 10%	Scott McEachern	6/30/2023	Amy Moss Strong	25
On Track	4.1.12.7	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.	Scott McEachern, Raymond Hino, Cori Valet, Kimberly Russell, Jeremiah Dodrill	12/31/2023	Board of Directors, Executive Team, Hospital and Health Center staff, Amy Moss Strong	54
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.	Raymond Hino, Kimberly Russell	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	ı	Raymond Hino	6/30/2023	Executive Team	
Attention	4.2.4.1	Construct a service line analysis process to identify new service lines	,	4/30/2023	Executive Team	
		and evaluate existing service lines	•			
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,	Raymond Hino, Cori Valet, Scott	6/30/2023	Executive Team	
		outpatient and inpatient surgical services, transitional care) that are	McEachern, Jeremiah Dodrill	, ,		
		financially feasible for SCHHC	,			
Attention	4.2.5	Increase commercial payers use of SCHHC services	Raymond Hino	1/31/2023	Cori Valet, Jeremiah Dodrill	
Attention	4.2.5.1	Assess current state of patient intake process, including outreach to	Scott McEachern	1/31/2023	Dawn Gray, Cathy Mann, Shawn	
		local providers			March	
Attention	4.2.5.2	Increase SCHHC utilization of employees at local employers that	Scott McEachern	3/31/2023	Executive Team	
		offer better insurance plans: Bandon Dunes, School District, City of		, ,		
		Bandon, local businesses; etc.				
Attention	4.2.5.3	Assess local businesses' healthcare needs	Scott McEachern, Cori Valet	3/31/2023	Jeremiah Dodrill, Raymond Hino	
	11212			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Attention	4.2.5.4	Develop outreach plan to local businesses	Scott McEachern	3/31/2023	Jeremiah Dodrill	
Attention	4.2.5.5	Implement outreach plan and tracking system to ensure continued	Scott McEachern	3/31/2023	Jeremiah Dodrill	
, , , , , , , , , , , , , , , , , , , ,		outreach	33310 1113 2431 1511 1	3,52,2525	Jereman Dearm	
Attention	4.2.5.6	Research population segments; develop specific marketing outreach	Scott McFachern	3/31/2023	Amy Moss Strong	
710000	1.2.3.0	to segments	Section Control of the Control of th	3,31,2023	, any moss strong	
On Track	4.3	Develop long-term board governance training program for SCHD	Raymond Hino	3/1/2023	Board, Sr Leadership	50
OII ITACK	4.5	board	ikayinona riino	3/1/2023	board, or Leadership	30
Completed	4.3.1	Research best practices in Governance Training and Education,	Raymond Hino	12/31/2022	Executive Team, Kim Russell, Board	100
Completed	4.5.1	including by not limited to: Governance Institute, Special District	ikayinona riino	12/31/2022	of Directors	100
		Association of Oregon; Estes Park Institute			of Directors	
		Association of Oregon, Estes Fark Institute				
On Track	4.3.2	Select a long-term board governance training partner.	Raymond Hino	3/1/2023	Executive Team, Kim Russell, Board	50
OII ITACK	4.5.2	Scient a long term board governance training partner.	ikayinona riino	3/1/2023	of Directors	30
On Track	4.3.3	Create a 12-month calendar for Board Education and Training, for	Raymond Hino	3/1/2023	Executive Team, Kim Russell, Board	
Offitack	4.5.5	the months of June 2023 to May 2024	ikayinona riino	3/1/2023	of Directors	
On Track	4.4	Develop a facility master plan for the entire facility that will	Jeremiah Dodrill	12/31/2023	or birectors	26.71
OII ITACK	4.4		Jerennan Dodrin	12/31/2023		20.71
		encompass equipment, clinical tools, and infrastructure				
On Track	4.4.1	Select Architectural Firm	Jeremiah Dodrill	3/31/2023	Jason Cook	30
Completed	4.4.1.1	Identify and interview CAH hospitals that have had recent significant		9/15/2022	Jason Cook	100
Completed	4.4.1.1	physical plant upgrades or built new hospitals.		9/13/2022	Jason Cook	100
Overdue	4.4.1.2	Develop Architect selection criteria based on results of CAH hospital	Joromiah Dodrill	11/30/2022	Jason Cook	50
Overdue	4.4.1.2			11/30/2022	Jason Cook	30
Attention	4.4.1.3	Develop RFP and solicit bids for Architects to develop master site	Jeremiah Dodrill	12/31/2022	Jason Cook	
Attention	4.4.1.5	·		12/31/2022	Jason Cook	
Attontion	4 4 1 4	plan Select Architect base on RFP submissions/responses. Negotiate	Loromich Dodrill	1/21/2022	Jacon Cook	
Attention	4.4.1.4		Jeremiah Dodrill	1/31/2023	Jason Cook	
A 1.1 1.1	4.4.4.5	Engagement terms	La constata Da della	2/24/2022	Lanca Carlo Basellina and Analiitade	
Attention	4.4.1.5	Sign Architect Contract	Jeremiah Dodrill	3/31/2023	Jason Cook, Ray Hino and Architect	
0 1	4.4.5			0/04/0000		
Overdue	4.4.2	Identify future plant infrastructure needs	Jeremiah Dodrill	8/31/2022	Jason Cook, Service Line	50
			age 9 of 11		Management	

Completed	4.4.2.1	Interview Service Line management to understand	Jeremiah Dodrill	7/31/2022	Jason Cook, Service Line	100
		growth/expansion/service opportunities and issues affecting current			Management	
		and future clinical operations				
Attention	4.4.2.2	Incorporate needs assessment into Architect RFP	Jeremiah Dodrill	12/31/2022	Jason Cook	
	4.4.3	Develop Phase 1 facilities plan - Immediate opportunities to	Jeremiah Dodrill	6/30/2023	Jason Cook and Architect	
		improve existing campus infrastructure without large construction				
		effort and service interruption				
	4.4.3.1	Work with Architect and management to identify opportunities for	Jeremiah Dodrill	4/30/2023	Jason Cook and Architect	
		Phase 1 Plan				
	4.4.3.2	Develop cost estimates for Phase 1 Plan	Jeremiah Dodrill	5/31/2023	Jason Cook and Architect	
	4.4.4	Develop Phase 2 facilities plan - Full campus expansion	Jeremiah Dodrill	9/30/2023	Jason Cook and Architect	
	4.4.4.1	Work with Architect to identify opportunities for Phase 2 campus	Jeremiah Dodrill	6/30/2023	Jason Cook and Architect	
		expansion				
		- Location, Cost, Schematic variations considered				
	4.4.4.2	Evaluate Lot/Land options and availability for facilities expansion	Jeremiah Dodrill	8/31/2023	Jason Cook and Architect	
	4.4.4.3	Evaluate various options and select preferred high level schematic	Jeremiah Dodrill	9/30/2023	Jason Cook and Architect	
	4.4.4.4	Develop Cost Estimate				
On Track	4.4.5	Develop long-range clinical and operations equipment plan	Jeremiah Dodrill	12/31/2022	Jason Cook, Accounting/Finance,	53.57
				,,	Service Line Management	
Completed	4.4.5.1	Create inventory of all existing owned, leased and serviced equipment	Jeremiah Dodrill	7/31/2022	Jason Cook and Accounting	100
Completed	4.4.5.2	Reconcile listing of all equipment between Engineering and Accounting	Jeremiah Dodrill	8/15/2022	Jason Cook and Accounting	100
Completed	4.4.5.3	Determine expected end of life/obselescence of each equipment classificaction given date of purchase, expedited useful life and other relevant factors (including service line manager input)	Jeremiah Dodrill	10/31/2022	Jason Cook, Accounting and Service Line Management	100
On Track	4.4.5.4	Evaluate warranty service period expiries	Jeremiah Dodrill	10/31/2022	Jason Cook and Accounting	75
On Track	4.4.5.5	Develop cost estimates for replacement, create schedule of	Jeremiah Dodrill	11/30/2022	Jason Cook, SCS and Accounting	
		replacement/investment/service contracts		, , , , ,		
On Track	4.4.5.6	Formalize equipment replacement plan, including cost, expected replacement dates and service contracts	Jeremiah Dodrill	12/31/2022	Jason Cook and Accounting	
On Track	4.4.5.7	Develop standard operating procedures for maintenance of equipment and warranty lists	Jeremiah Dodrill	12/31/2022	Jason Cook and Accounting	
	5.0	Finance				
On Track	5.1	Develop financial sustainability plan	Jeremiah Dodrill	12/31/2023		18.33
Completed	5.1.1	Complete FY 2023 budget. Criteria is that "Change in Net Position"	Jeremiah Dodrill	6/30/2022	Axiom, Katelin Wirth, CLA	100
		is not negative for the fiscal year		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,	
On Track	5.1.2		Jeremiah Dodrill	3/31/2023	Axiom, Katelin Wirth, CLA	10
		of cost based reimbursement, growth initiatives/targets and		, , , , ,	, , , , , , , , , , , , , , , , , , , ,	
		required capital/infrastructure plans				
On Track	5.1.3	Define what it means to be adequately profitable to meet the		4/30/2023	Board, Executive Management	
On Track	5.1.4	Update plan with results of the Phase 1 facilities plan	age 10 of 11 Jeremiah Dodrill	6/30/2023	Axiom, Katelin Wirth, CLA	+
On Track	3.1.4	Topuate plan with results of the rhase I facilities plan	Determan Dourni	0/30/2023	AXIOIII, NATEIIII WITTII, CLA	

		2022-2024 Strategic	Plan - Opualed January 23, 2023			
On Track	5.1.5	Update plan with EMR/ERP Implementation total cost of ownership	Jeremiah Dodrill	3/31/2023	Scott McEachern	
On Track	5.1.6	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	6/30/2023	Raymond Hino, Jeremiah Dodrill, Dawn Gray	36.45
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
On Track	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	66.66
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
·	5.2.3.3	Negotiate Dr. Adams Contract	Raymond Hino	4/30/2023		
On Track	5.2.4	Renegotiate Advance Healthcare Contract for Medicaid patient population	Jeremiah Dodrill	3/1/2023	Raymond Hino, Dawn Gray, Advance Healthcare	5
On Track	5.2.5	Attest for PCPCH designation, to increase Medicaid reimbursement rates	Dawn Gray	6/30/2023	Barbara Snyder, Raymond Hino,	5
On Track	5.2.6	Implement Care Coordination (HealthTech) to increase Medicare reimbursement	Dawn Gray	6/30/2023	Scott McEachern	5
On Track	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	5
On Track	5.2.8	Achieve positive net income for clinic for 3 consecutive months	Jeremiah Dodrill	6/30/2023	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	According and regulatory compliance				
	0.0	Accreditation and regulatory compliance	Page 11 of 11			