

Southern Coos Health District  
2022-2024 Strategic Plan - Updated December 12, 2022

STATUS	WBS	DESCRIPTION	OWNER	DUE DATE	RESOURCES	%
	<b>1.0</b>	<b>People</b>				
On Track	1.1	Benchmark and implement employee compensation philosophy	Raymond Hino, Jeremiah Dodrill			72.22
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	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
Overdue	1.1.3	Complete benchmarking study of hospital job codes	Jeremiah Dodrill, Raymond Hino	12/31/2022	Carrie Okey, HR, Finance	16.66
Overdue	1.1.3.1	Compare current salaries by job code to Salary.com	Jeremiah Dodrill	11/30/2022	Carrie Okey, HR, Finance	50
Overdue	1.1.3.2	Quantify compensation differences individually and in	Jeremiah Dodrill	11/30/2022	Carrie Okey, HR, Finance	
Overdue	1.1.3.3	Determine strategy to impact compensation	Jeremiah Dodrill	12/31/2022	Carrie Okey, HR, Finance	
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	51.14

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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	12/31/2022	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	4/30/2023	Jeremiah Dodrill, Kim Russell	

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Attention	1.2.6	Complete implementation of findings and recommendations from Board approved Medical Staff Development Plan	Raymond Hino	4/30/2023	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	33
On Track	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	89.28
On Track	1.3.1	Identify gaps in employee recognition	Cori Valet, Carrie Okey, Scott McEachern	12/31/2022	Amy Moss Strong	25
On Track	1.3.1.1	Exploring employee recognition platforms	Carrie Okey, Scott McEachern	2/28/2023		25
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	Carrie Okey, Scott McEachern	11/1/2022		100
Completed	1.3.5	Implemented Survey Monkey Enterprise system	Scott McEachern, Carrie Okey	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	41.66
Completed	1.4.1	Identify current staff education plans.	Cori Valet	8/12/2022	Carrie Okey, Kerry Vincent and department managers	100

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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
On Track	1.4.3	Perform a gap analysis to determine deficiencies in existing education processes.	Cori Valet	1/31/2023	Carrie Okey	50
On Track	1.4.3.1	Develop a gap analysis tool	Cori Valet	12/31/2022	Carrie Okey, Arianne Booth	50

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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	
On Track	1.4.4	Update existing education plans to include deficiencies noted in gap analysis.	Cori Valet	3/31/2023	Carrie Okey	
On Track	1.4.5	Create an education policy for staff, manager and medical provider education.	Cori Valet	1/31/2023	Carrie Okey	
On Track	1.4.6	Implement the updated education policy for staff, managers, and medical providers.	Cori Valet	4/14/2023	Scott McEachern, Shawn March, Carrie Okey	
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

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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

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On Track	1.6.2	Perform value stream analysis on employee evaluation process.	Jeremiah Dodrill, Raymond Hino	11/30/2022	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,	Jeremiah Dodrill	12/31/2022	Carrie Okey, HR	

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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

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Completed	1.7.3	Create Standard Operating Procedures for each step in the recruiting process	Jeremiah Dodrill	9/30/2022	Carrie Okey, HR	100
	<b>2.0</b>	<b>Service</b>				
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	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	3/1/2023	Executive Team; Project Teams	
Attention	2.1.3	Implement 2-5 deliverable enhancements to patient engagement, recommended by each team	Raymond Hino	11/17/2022	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	37.83

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On Track	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
On Track	2.2.2	Open conversations with potential EMR vendors	Scott McEachern	7/31/2022	Raymond Hino, Trevor Jurgenson	87.5
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

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Attention	2.2.2.4	Providence Community Connect	Scott McEachern	11/7/2022		50
On Track	2.2.3	Determine scope of work for hiring an external project management team	Scott McEachern	8/31/2022	Executive Team	33
On Track	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
On Track	2.2.4	Identify needed peripheral systems	Scott McEachern	12/31/2022	Trevor Jurgenson, Cindy Kessler, Deb Backman, Marlene Rocha, Deb Ellis,	50
On Track	2.2.4.1	Laboratory Information System	Scott McEachern	9/30/2022	Cindy Kessler, Laboratory	50
On Track	2.2.4.2	Radiology Information System & Peripherals	Scott McEachern	9/30/2022	Deb Backman	50
On Track	2.2.4.3	Respiratory Peripherals	Scott McEachern	9/30/2022	Cheryl Johnson	50
On Track	2.2.5	Identify ERP System Vendors	Scott McEachern	12/31/2022	Marlene Rocha, Finance Team	35
On Track	2.2.5.1	Premier	Scott McEachern	12/31/2022	Finance team	50
On Track	2.2.5.2	Workday	Scott McEachern	12/31/2022	Finance team, Supply Management	30

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On Track	2.2.5.3	Oracle NetSuite	Scott McEachern	12/31/2022	Finance team, Jonathan Yamasaki	25	
On Track	2.2.6	Compare potential EMR Vendors	Scott McEachern	12/31/2022	Executive Team	75	
Attention	2.2.7	Identify potential project funders	Scott McEachern	8/31/2022	Jeremiah Dodrill	50	
Attention	2.2.7.1	SM reached out to USDA	Scott McEachern	7/6/2022	Jeremiah Dodrill	50	
Attention	2.2.7.2	SM reached out to AHA/Phil Rivera	Scott McEachern	7/6/2022	Jeremiah Dodrill	50	
Attention	2.2.7.3	Reach out to Advanced Health	Kimberly Russell	7/31/2022	Jeremiah Dodrill, Ray Hino	50	
Attention	2.2.8	Develop financial plan for EMR implementation	Scott McEachern, Raymond Hino, Jeremiah Dodrill	2/28/2023	Executive Team		
On Track	2.2.9	Make recommendation to SCHD Board	Scott McEachern	3/23/2023	Executive Team		
	<b>3.0</b>	<b>Quality</b>					
On Track	3.1	Implement and Maintain Quality DNV Accreditation Program	Raymond Hino	9/30/2022	Scott McEachern, Barb Snyder, staff	80	
Completed	3.1.1	Schedule a meeting with Stakeholders to discuss next steps and establish timelines	Scott McEachern	5/12/2022	Scott McEachern	100	

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Completed	3.1.2	DNV Training	Scott McEachern	7/12/2022	Barb Snyder	100
On Track	3.1.3	Prepare for DNV Assessment in September 2022	Scott McEachern	9/30/2022	Managers, staff	100
Completed	3.1.3.1	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
	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	
Completed	3.2	Establish Quality Benchmark	Cori Valet	11/21/2022	Barb Snyder, Sharon Bischoff	100
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

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On Track	3.3	Develop and Execute Effective Internal Communication Plan	Scott McEachern	12/31/2022	Executive Team, Employees Activity Committee	90.62
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
On Track	3.3.3	Implement Regular CEO Messaging	Scott McEachern	11/18/2022	Raymond Hino	87.5
On Track	3.3.3.1	Implement weekly Cyrano Video Messaging	Scott McEachern	11/18/2022	Raymond Hino	75
Completed	3.3.3.2	Monthly Staff Meetings via Zoom	Raymond Hino	8/1/2022	Scott McEachern	100
On Track	3.3.4	Implement regular communication with staff	Carrie Okey	10/1/2022	Scott McEachern	75
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	3.3.4.3	Compile data to periodically report to executive team; craft follow-ups	Carrie Okey	3/31/2023	Scott McEachern	25
Attention	3.4	Update and Implement a district wide Incident Response Plan	Scott McEachern, Cori Valet	7/31/2023	Jason Cook, Trevor Jurgenson, Deb Backman, Katelin Wirth	
	3.4.1	Source vendor with expertise in updating IR Plan	Jeremiah Dodrill	1/31/2023	Jason Cook	
Attention	3.4.2	Complete Draft of Emergency Preparedness Plan	Jeremiah Dodrill	4/30/2023	Jason Cook, Jeremiah Dodrill	
Attention	3.4.3	Conduct preparedness exercises	Jeremiah Dodrill	5/31/2023	Jason Cook, Arianne Booth	
Attention	3.4.4	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	
Attention	3.4.5	Communicate Plan to Board of Directors, Foundation, and Community Members.	Scott McEachern, Cori Valet	7/31/2023	Jason Cook	
On Track	3.5	Update SCHHC cybersecurity program	Scott McEachern	6/30/2023	Trevor Jurgenson	73.43

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Completed	3.5.1	Perform gap analysis on current SCHHC cybersecurity practices	Scott McEachern	7/31/2022	Trevor Jurgenson	100
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	Jeremiah Dodrill, Raymond Hino, Cori Valet, Scott McEachern	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
	<b>4.0</b>	<b>Growth</b>				
On Track	4.1	Develop comprehensive district marketing plan.	Scott McEachern	6/30/2023	Amy Moss Strong	64.77
On Track	4.1.1	Refresh Hospital Brand and Collateral	Scott McEachern	6/30/2023	Executive team	
	4.1.2	Create separate branding guidelines for the Health Center/Clinic	Scott McEachern	6/30/2023	Dawn Gray, Executive Team	
Completed	4.1.3	Perform a SWOT analysis	Scott McEachern	6/1/2022	Executive Team	100
Overdue	4.1.4	Assess SCHHC community and patient demographics to optimize outreach practices	Scott McEachern	2/28/2023	Amy Moss Strong	50

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Overdue	4.1.4.1	Develop SCHHC patient and provider personas in an effort to better target patient advertising and provider	Scott McEachern	10/31/2022	Executive Team	50
Attention	4.1.5	Identify SCHHC's value propositions and differentiators	Scott McEachern	10/31/2022	Amy Moss Strong	75
Completed	4.1.6	Develop high-level strategies and core messaging to communicate changes at SCHHC, new services, and pertinent	Scott McEachern, Raymond Hino	8/31/2022	Amy Moss Strong	100
On Track	4.1.7	Develop pipeline of patient testimonials	Scott McEachern	12/31/2022	Amy Moss Strong	100
On Track	4.1.8	Position the SCHHC Website as SCHHC's digital front door	Scott McEachern	12/31/2022	Amy Moss Strong, external vendor	75
Completed	4.1.8.1	Perform a needs assessment on current website design, functionality, and content	Scott McEachern	7/31/2022	Amy Moss Strong, Employee Council	100
Completed	4.1.8.2	Evaluate vendors to provide web design and content maintenance services	Scott McEachern	8/31/2022	Amy Moss Strong	100
On Track	4.1.8.3	Revamp patient education on website and on-site resources	Scott McEachern	12/31/2022	Clinical managers	25
On Track	4.1.8.4	Integrate website with all other SCHHC digital assets -- ensure continuity of experience	Scott McEachern	12/31/2022	Amy Moss Strong	75
On Track	4.1.9	Review current practices for SCHHC brand optimization and expansion opportunities	Scott McEachern	10/31/2022	Amy Moss Strong	37.5
On Track	4.1.9.1	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	75
Attention	4.1.9.2	Implement regular survey cadence of community to assess movement in SCHHC brand awareness	Scott McEachern	11/30/2022	Amy Moss Strong	
On Track	4.1.10	Grow SCHHC Brand awareness by enhancing communication pathways to patients and community	Scott McEachern	12/31/2022	Amy Moss Strong	75
Attention	4.1.10.1	Optimize SCHHC's social media performance	Scott McEachern	12/31/2022	Amy Moss Strong	50
Completed	4.1.10.2	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	4.1.10.3	Optimize current patient portal experience for patients	Scott McEachern	12/31/2022	Shawn March, Clinical Informatics	75
Completed	4.1.11	Track Key Performance Indicators	Scott McEachern	8/31/2022	Amy Moss Strong	100
Completed	4.1.11.1	Website Traffic	Scott McEachern	10/31/2022	Amy Moss Strong	100

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Completed	4.1.11.2	Open rate and click-through rate of e-newsletter	Scott McEachern	10/31/2022	Amy Moss Strongg	100
Completed	4.1.11.3	Social Media page likes & reach	Scott McEachern	10/31/2022	Amy Moss Strong	100
Completed	4.1.11.4	Survey community on SCHHC brand awareness - benchmark	Scott McEachern	5/25/2022	Amy Moss Strong	100
On Track	4.2	Become the hospital of choice identifying, developing and providing the right services (health screening, mental health, surgical,	Cori Valet, Scott McEachern, Kimberly Russell, Raymond Hino, Jeremiah Dodrill	12/31/2023	Board of Directors, Executive Team, Hospital and Health Center staff,	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	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	
Attention	4.2.4.1	Construct a service line analysis process to identify new service lines and evaluate existing service lines	Raymond Hino	1/31/2023	Executive Team	
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,	Raymond Hino, Jeremiah Dodrill, Cori Valet, Scott McEachern	6/30/2023	Executive Team	
Attention	4.2.4.4	Hire project manager	Raymond Hino	1/31/2023	Executive Team, HR	
Attention	4.2.5	Increase commercial payers use of SCHHC services	Raymond Hino	1/31/2023	Cori Valet, Jeremiah Dodrill	

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Attention	4.2.5.1	Assess current state of patient intake process, including outreach to local providers				
Attention	4.2.5.2	Target local employers that offer better insurance plans: Bandon Dunes, School District, City of Bandon, local businesses; etc.	Scott McEachern	3/31/2023	Executive Team	
Attention	4.2.5.3	Assess local businesses' healthcare needs	Scott McEachern, Cori Valet	3/31/2023	Jeremiah Dodrill, Raymond Hino	
Attention	4.2.5.4	Develop outreach plan to local businesses	Scott McEachern	3/31/2023		
Attention	4.2.5.5	Implement outreach plan and tracking system to ensure continued outreach	Scott McEachern	3/31/2023		
Attention	4.2.5.6	Research population segments; develop specific marketing outreach to segments	Scott McEachern	3/32/2023	Amy Moss Strong	
On Track	4.3	Develop long-term board governance training program for SCHD board	Raymond Hino	3/1/2023	Board, Sr Leadership	50

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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
On Track	4.3.2	Select a long-term board governance training partner.	Raymond Hino	12/30/2022	Executive Team, Kim Russell, Board of Directors	50
On Track	4.3.3	Create a 12-month calendar for Board Education and Training, for the months of June 2023 to May 2024	Raymond Hino	3/1/2023	Executive Team, Kim Russell, Board of Directors	
On Track	4.4	Develop a facility master plan for the entire facility that will encompass equipment, clinical tools, and infrastructure	Jeremiah Dodrill	12/31/2023		26.71
On Track	4.4.1	Select Architectural Firm	Jeremiah Dodrill	3/31/2023	Jason Cook	30

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Completed	4.4.1.1	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
Overdue	4.4.1.2	Develop Architect selection criteria based on results of CAH hospital interviews	Jeremiah Dodrill	11/30/2022	Jason Cook	50
Attention	4.4.1.3	Develop RFP and solicit bids for Architects to develop master site plan	Jeremiah Dodrill	12/31/2022	Jason Cook	
Attention	4.4.1.4	Select Architect base on RFP submissions/responses. Negotiate Engagement terms	Jeremiah Dodrill	1/31/2023	Jason Cook	
Attention	4.4.1.5	Sign Architect Contract	Jeremiah Dodrill	3/31/2023	Jason Cook, Ray Hino and Architect	
Overdue	4.4.2	Identify future plant infrastructure needs	Jeremiah Dodrill	8/31/2022	Jason Cook, Service Line Management	50
Completed	4.4.2.1	Interview Service Line management to understand growth/expansion/service opportunities and issues	Jeremiah Dodrill	7/31/2022	Jason Cook, Service Line Management	100
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 improve existing campus infrastructure without large	Jeremiah Dodrill	6/30/2023	Jason Cook and Architect	
	4.4.3.1	Work with Architect and management to identify opportunities for Phase 1 Plan	Jeremiah Dodrill	4/30/2023	Jason Cook and Architect	
	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 expansion	Jeremiah Dodrill	6/30/2023	Jason Cook and Architect	
	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	

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	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, Service Line Management	53.57
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/obsolescence of each equipment classification given date of purchase,	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 replacement/investment/service contracts	Jeremiah Dodrill	11/30/2022	Jason Cook, SCS and Accounting	
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	
On Track	4.5	Develop and execute SCHF Strategic Plan, aligned with the SCHHC StratPlan; improve communication between SCHF and SCHHC; improve SCHF financial statements and metrics	Scott McEachern	3/31/2023	Joseph Bain, SCHF Foundation, Steve Reber, Pam Hansen	87.77
On Track	4.5.1	Develop Strat Plan	Scott McEachern	2/16/2023	Pam Hansen, Steve Reber facilitators	38.88
Completed	4.5.1.1	Develop scope of work for hiring external strategic plan consultant	Scott McEachern	9/22/2022	SCHF Foundation	100
Completed	4.5.1.2	Reach out to potential strategic planning vendors	Scott McEachern	10/31/2022	SCHF Foundation	100
Completed	4.5.1.3	Select strategic planning vendor	Scott McEachern	11/30/2022	SCHF Foundation	100
On Track	4.5.1.4	Milestone #1: Develop Planning Timeline & Approach	Scott McEachern	12/12/2022	Pam Hansen, Steve Reber	50
On Track	4.5.1.5	Milestone #2: Review & Validate Mission and Vision	Scott McEachern	12/15/2022	Pam Hansen, Steve Reber	
	4.5.1.6	Milestone #3: Gather Data & Stakeholder Input	Scott McEachern	12/31/2022	Pam Hansen, Steve Reber	

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	4.5.1.7	Milestone #4: Outline Goals & Develop Plan Framework	Scott McEachern	1/9/2023	Pam Hansen, Steve Reber	
	4.5.1.8	Milestone #5: Draft the Strategic plan	Scott McEachern	1/23/2023	Pam Hansen, Steve Reber	
	4.5.1.9	Milestone #6: Review Draft Plan & Approval by Board	Scott McEachern	2/16/2023	SCHF Board	
Completed	4.5.2	Develop fundraising plan for FY23-25	Scott McEachern	6/30/2022	Amy Moss Strong, Foundation board	100
Completed	4.5.2.1	Define specific fundraising targets for FY23-25	Scott McEachern	6/30/2022	Foundation board	100
Completed	4.5.3	Recruit SCHF Board Members	Scott McEachern	12/31/2022	SCHF Foundation	100
Completed	4.5.3.1	Identify a list of potential, interested people	Scott McEachern	6/30/2022	SCHF Foundation Officers	100
Completed	4.5.3.2	Meet with potential board members	Scott McEachern	9/30/2022	SCHF Foundation members	100
Completed	4.5.4	Improve communication between hospital & SCH Foundation	Scott McEachern	5/31/2022	Amy Moss Strong	100
Completed	4.5.4.1	Begin bi-weekly emails to SCH Foundation board updating them on issues of importance related to	Scott McEachern	8/29/2022		100
Completed	4.5.5	Refine SCHF Financials to include FY23 budget and fundraising goals	Scott McEachern	12/31/2022	Marlene Rocha	100
	<b>5.0</b>	<b>Finance</b>				
On Track	5.1	Develop financial sustainability plan	Jeremiah Dodrill	12/31/2022		20
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

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On Track	5.1.2	Complete long range financial plan, taking into consideration impact of cost based reimbursement, growth initiatives/targets and required capital/infrastructure plans	Jeremiah Dodrill	3/31/2023	Axiom, Katelin Wirth, CLA	
On Track	5.1.3	Define what it means to be adequately profitable to meet the capital needs of the hospital.	Jeremiah Dodrill	4/30/2023	Board, Executive Management	
On Track	5.1.4	Update plan with results of the Phase 1 facilities plan	Jeremiah Dodrill	6/30/2023	Axiom, Katelin Wirth, CLA	
On Track	5.1.5	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	67.91
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

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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
	5.2.2	Achieve positive net income for clinic for 3 consecutive months	Jeremiah Dodrill	6/30/2023	Dawn Gray, clinic providers, clinic staff	5
On Track	5.2.2.1	Renegotiate Advance Healthcare Contract for Medicaid patient population	Jeremiah Dodrill	3/1/2023	Raymond Hino, Dawn Gray, Advance Healthcare	5
On Track	5.2.2.2	Attest for PCPCH designation, to increase Medicaid reimbursement rates	Dawn Gray	3/31/2023	Barbara Snyder, Raymond Hino,	5
Completed	5.2.3	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	5.2.4	Renegotiate existing clinic provider contracts (as they expire), benchmarked for compensation and productivity which	Raymond Hino	2/28/2023	Jeremiah Dodrill, Katelin Wirth, MGMA and MD Ranger benchmark	66.66
Completed	5.2.4.1	Negotiate Dr. Mitchell contract	Raymond Hino	11/30/2022		100
Completed	5.2.4.2	Negotiate Dr. Pense contract	Raymond Hino	12/31/2022		100
	5.2.4.3	Negotiate Dr. Adams Contract	Raymond Hino	4/30/2023		
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	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	<b>Accreditation and regulatory compliance</b>				
	7.0	<b>General SCHHC Projects</b>				