

Southern Coos Health District
3-Year Strategic Plan (2024 - 2027)

Update 09-24-2024

STATUS	WBS	DESCRIPTION	OWNER	DUE DATE	RESOURCES	%
	1.0	People: Be the employer of choice and a Chartis top 100 rural hospital				
	1.1	Be the kind of employer that drives top 100 hospital (Employee Engagement Survey)	Stacy Nelson	6/30/2027	Stacy, Amanda	0.69
	1.1.1	Survey Current Employees about their current Workplace Experience: What's working, What's not working, What do	Stacy Nelson	3/30/2025		
	1.1.2	Identify the type of employee (performance/behavior) we want at SCHHC, and the culture we want to build on.	Stacy Nelson	3/30/2025		
	1.1.3	Implement an employee-focused culture (so employees want to come and stay at SCHHC).	Stacy Nelson	6/30/2026		
	1.1.4	Enhance employee engagement strategies	Stacy Nelson	6/30/2027		4.16
	1.1.4.1	Utilize an Employee Engagement Survey Tool; Evaluate what we have done. What has worked? What has not		3/31/2025		
	1.1.4.2	Design plan for Employee Engagement, based on feedback from employees.		6/30/2025		
	1.1.4.3	Revamp Onboarding Process: The 4 C's: Culture, Compliance, Communication, and Connection.		3/30/2025		
	1.1.4.4	Implement plan for Employee Engagement		9/30/2025		
	1.1.4.5	Evaluate plan for Employee Engagement.		9/30/2026		
	1.1.4.6	Get certified as a, "Great Place to Work."		6/30/2027		25
	1.1.5	Develop and Implement Wellness Strategies (Physical, Mental/Emotional, Spiritual, Financial).	Stacy Nelson	9/30/2025		
	1.1.6	Grow our SCHHC Workforce	Stacy Nelson	6/30/2026		
	1.1.6.1	Professional development for employees		6/30/2025		
	1.1.6.2	Employee Career Paths		12/31/2025		
	1.1.6.3	Succession planning		6/30/2026		
	1.2	Provide competitive compensation and robust benefits packages	Antone Eek, Stacy Nelson	6/30/2026	Stacy	6.16
	1.2.1	Compensation	Stacy Nelson, Antone Eek	6/30/2025	Stacy	10
	1.2.2	Evaluate current benefits package	Antone Eek, Stacy Nelson	12/31/2025		2.33
	1.2.2.1	Medical Benefits (Reasonable Cost, Quality Coverage, Excellent Access to Providers, etc.	Stacy Nelson, Antone Eek			5
	1.2.2.2	Retirement Package	Antone Eek, Stacy Nelson			1
	1.2.2.3	Evaluate other value-added benefits (i.e. Pet Insurance, etc.)	Stacy Nelson			1
	1.3	Expanding Volunteers and duties	Stacy Nelson	6/30/2026	Stacy	
	1.3.1	Bring volunteers back		6/30/2026	Stacy	
	1.3.1.1	Identify a pool of volunteers to recruit.		12/31/2025		

Southern Coos Health District
3-Year Strategic Plan (2024 - 2027)

Update 09-24-2024

	1.3.1.2	Outreach to High School for volunteers		9/30/2025		
	1.3.1.3	Develop program for youth to explore health care careers.		12/31/2025	Stacy	
	1.3.1.4	Develop/Design how Volunteers will be used.		9/30/2025		
	1.3.1.5	Training and Development for Volunteers.		3/30/2026		
	1.3.1.6	Develop an ambassadorship program.		9/30/2026		
	1.4	Designated as National Health Service Corps (NHSC) Site for eligibility for Loan Repayment Eligibility	Dawn Gray, Stacy Nelson	12/31/2027	Stacy, Dawn	
	1.4.1	Develop required policies and procedures	Dawn Gray, Stacy Nelson	6/30/2026	Raymond Hino	
	1.4.2	Submit attestation to become an NHSC site	Stacy Nelson, Raymond Hino	6/30/2027	Dawn Gray	
	1.5	Develop workforce housing options and opportunities, in collaboration with other large employers in Bandon.	Raymond Hino	12/31/2027	Antone	1.25
	1.5.1	Meet with Developers	Raymond Hino	12/31/2024	Executive Team	5
	1.5.1.1	Perk Development Group				10
	1.5.1.2	L2L				
	1.5.2	Employee Survey to find out needs	Stacy Nelson	10/31/2024	Executive Team	
	1.5.3	Find out what property the district owns for housing development	Antone Eek	9/30/2024	Executive Team, Real Estate Agent	
	1.5.4	Collaborate with other leaders in the community	Raymond Hino	12/31/2027	Executive Team	
	2.0	Service: what are we doing for our customer				
	2.1	Collaborate with the community and other healthcare organizations.	Raymond Hino	12/31/2027		15
	2.1.1	Collaborate with Coast to address challenges related to social determinants of health.	Dawn Gray, Cori Valet	12/31/2025		80
	2.1.2	Bay Area Hospital STEMI program	Amanda Bemetz, Alden Forrester, Cori			
	2.1.2.1	STEMI program				
	2.1.2.2	Dietician program				
	2.1.3	Partnership with Coast Community	Raymond Hino	7/1/2025	Antone Eek, Scott McEachern, Dawn Gray	40
	2.1.3.1	MSA agreement	Raymond Hino	12/31/2024		80
	2.1.3.2	Optimize referral patterns	Alden Forrester	7/1/2025		
	2.1.4	Partnership with Bandon Dunes	Raymond Hino	12/31/2026		
	2.1.4.1	Botox, Hydration, etc.				
	2.1.5	Partner with CTCLUSI	Raymond Hino	8/31/2025		
	2.1.6	Partnership with other businesses (Healthcare, transportation, gov, business, Tribes)	Raymond Hino	12/31/2027		
	2.1.7	Develop a patient transportation strategy	Cori Valet			
	2.1.7.1	clinic				
	2.1.7.2	ED				
	2.1.7.3	city transport services				
	2.1.7.4	Partner with Coast				

Southern Coos Health District
3-Year Strategic Plan (2024 - 2027)

Update 09-24-2024

	2.1.8	Coos County Family Practice Resident Program Consortium	Raymond Hino	7/1/2027	Dr Forrester, Executive Team.	
On Track	2.2	Become the hospital of choice identifying, developing and providing the right services to improve community health.	Raymond Hino, Kimberly Russell, Antone Eek, Scott McEachern, Cori Valet	12/31/2025	Board of Directors, Executive Team, Hospital and Health Center staff, Amy Moss Strong	54.37
Completed	2.2.1	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	7/1/2025	Board of Directors, Executive Team, Amy Moss Strong	70
Completed	2.2.1.1	Create a matrix of commercial health plan, and managed care plans that are active in Southern Coos County	Antone Eek	9/30/2022	Cathy Mann, Katelin Wirth	100
Completed	2.2.1.2	Review current commercial and managed care contracts and adequacy of payment terms	Antone Eek	12/31/2022	Cathy Mann	100
Completed	2.2.2	Evaluate alignment between employer sponsored health plans and current payor contracts at SCHHC	Antone Eek	12/31/2022	Cathy Mann, Katelin Wirth	100
Completed	2.2.3	Collaborate with other local healthcare organizations to maximize benefit to patients and the community	Raymond Hino	12/31/2022	Executive Team	100
On Track	2.2.4	Increase commercial payers use of SCHHC services	Raymond Hino	12/31/2025	Cori Valet, Antone	56.25
On Track	2.2.4.1	Increase SCHHC utilization of employees at local employers that offer better insurance plans: Bandon Dunes, School District, City of Bandon, local businesses; etc.	Scott McEachern, Raymond Hino	12/31/2025	Executive Team	25
On Track	2.2.4.2	Create and disseminate marketing collateral to local businesses and civic organizations	Scott McEachern	7/1/2025	Executive Team	
Completed	2.2.4.3	Assess local businesses' healthcare needs	Scott McEachern, Cori Valet	3/31/2023	Jeremiah Dodrill, Raymond Hino	100
Completed	2.2.4.4	Develop marketing plan for new orthopedic surgeon	Scott McEachern	12/29/2023	Scott McEachern, Amy Moss Strong	100
	2.2.5	Behavioral health (Outpatient)	Antone Eek, Dawn Gray	7/1/2025	JR, Ray	
	2.2.5.1	Geriatric Psych		9/30/2022		
	2.2.5.2	Partner with Coast		9/30/2022		
	2.2.5.3	Partner with Psychiatric Medical Care		9/30/2022		
	2.2.6	Increase Utilization of Surgical Services	Dawn Gray, Cori Valet	7/1/2025	Executive Team, Alden Forrester	
	2.2.6.1	Develop a marketing plan for surgical services	Scott McEachern	9/30/2022	Amy	
	2.2.6.2	Develop a surgery growth strategy		9/30/2022		
	2.2.6.3	Lipo and the Links		9/30/2022		
On Track	2.3	Develop and implement a patient centered engagement model for patient services to improve patient satisfaction.	Raymond Hino	12/31/2027	Executive Team	23.4
Completed	2.3.1	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

Southern Coos Health District
3-Year Strategic Plan (2024 - 2027)

Update 09-24-2024

On Track	2.3.2	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	12/31/2026	Executive Team; Project Teams	17
	2.3.3	Implement 2-5 deliverable enhancements to patient engagement, recommended by each team	Raymond Hino	12/31/2026	Executive Team, Project Teams; Leadership Team	
	2.3.4	Implement 4-8 deliverable enhancements to patient engagement, recommended by each team	Raymond Hino	12/31/2027	Executive Team, Project Teams, Leadership Team	
	2.3.5	Improve the entrance greeting process (Volunteer greeting and navigating)	Antone Eek	7/1/2027		
On Track	2.4	Build a proactive case management program	Cori Valet, Dawn Gray	12/31/2025	Karen Stafford	0.01
	2.4.1	Expand case management in the acute setting to 7 days/week	Cori Valet	12/31/2024	Karen Stafford	0.05
	2.4.1.1	Recruit and train 1 RN FTE to case management/UR Swing bed coordination	Cori Valet	12/31/2024	Karen Stafford, Stacy Nelson, Albert	0.05
	2.4.2	Initiate Chronic care nurse program in the clinic	Dawn Gray	12/31/2024	Stacy Nelson, Albert	
	2.4.3	Clinic	Dawn Gray	12/31/2025	Karen Stafford	
	2.4.4	Improve Transition of Care processes	Dawn Gray, Cori Valet	6/30/2025	Karen Stafford	
	2.4.4.1					
On Track	2.5	Level 4 Trauma designation	Alden Forrester, Cori Valet	5/31/2026	Nick Lucas, Dr. Evans, Ray Hino, Scott M., Antone E., Kim Russel, Stacey Nelson, Chris Amaral, Amanda Bemetz, Kerry Vincent	1.08
On Track	2.5.1	Designated FTE for Trauma Coordination/Management	Cori Valet	12/31/2024	Nick Lucas, Stacy Nelson, Albert, Austin	25
Attention	2.5.1.1	Job description to include educational preparation with a minimum of 4 hours per year (internal or external) of trauma-related continuing education and the completion of an accredited course in the care of trauma patients	Cori Valet	10/11/2024	Nick Lucas, Stacy Nelson	75
Attention	2.5.1.2	Recruit and hire Trauma Coordinator	Cori Valet, Stacy Nelson, Alden Forrester	11/1/2024	Nick Lucas, Albert Sanchez	
	2.5.1.3	Appropriately orient Trauma Coordinator to role, organization, tools, resources, and expectations	Cori Valet	12/31/2024	Nick Lucas, Stacy Nelson, Alden Forrester	
	2.5.2	Engage ED providers with Trauma Center Designation	Alden Forrester	6/30/2025	Nick Lucas	
	2.5.3	Establish Regional Trauma System engagement for standardization, implementation and performance improvement and patient safety (PIPS)	Alden Forrester, Cori Valet	12/31/2024	Executive team, Nick Lucas, Trauma Coordinator	
	2.5.4	Procure necessary equipment consistent with requirements of level 4 trauma designation	Cori Valet	8/31/2025	Nick Lucas, Chris Amaral	
	2.5.5	Establish well-defined transfer plan with treatment and transfer guidelines reflecting level 4 capabilities	Cori Valet, Alden Forrester	6/30/2024	Nick Lucas, Trauma Coordinator	
	2.5.6	Establish review process for transfer plan that incorporates higher-level trauma center review (in region)	Alden Forrester, Cori Valet	6/30/2025	Nick Lucas, Trauma Coordinator, Amanda Bemetz, Rachel	

Southern Coos Health District
3-Year Strategic Plan (2024 - 2027)

Update 09-24-2024

2.5.7	Board certification in Emergency Medicine or current Advanced Trauma Life Support (ATLS) certification for all ED providers	Cori Valet, Alden Forrester	8/31/2025	Kerry Vincent, Michelle Winchel	
2.5.8	Establish a Trauma Medical Director role	Alden Forrester, Raymond Hino	1/31/2025	Antone E, Stacy Nelson	
2.5.8.1	Develop job description that includes requirement that this role be a physician practicing emergency medicine responsible for coordinating the care of injured patients, verifies continuing medical education (CME) of personnel, and has oversight of the trauma quality improvement process. The TMD is clinically involved with trauma patient management and responsible for credentialing of trauma team members. is current in ATLS.				
2.5.8.2	Obtain documentation that the board have empowered and grant authority to the TMD and TPM to lead the program				
2.5.9	Determine if a Trauma program manager (TPM) is required if Trauma coordinator in place				
2.5.9.1	Obtain documentation that the board have empowered and grant authority to the TMD and TPM to lead the program				
2.5.10	Develop PIPS program				
2.5.10.1	Multidisciplinary Trauma peer review committee consisting of medical staff active in trauma resuscitation				
2.5.10.2	Ensure inclusion of audit filters to review and improve pediatric and adult patient care				
2.5.10.3	Ensure transport activities are evaluated				
2.5.10.4	Ensure PIPS review of all transfers out				
2.5.10.5	Create on-going method to review and determine "other" potential criteria for trauma team activation				
2.5.10.6	Ensure response time is tracked by trauma level and from patient arrival, not notification or activation				
2.5.10.7	Establish strategies for monitoring data validity				
2.5.10.8	Develop process for recording problem identification, development of corrective action plan, method of monitoring, reevaluation and benchmarking.				
2.5.10.9	Develop method where in the trauma PIPS program's written plans for process and outcome measures are reviewed and updated at least annually				
2.5.11	Develop prehospital care protocols and process for improvement				

Southern Coos Health District
3-Year Strategic Plan (2024 - 2027)

Update 09-24-2024

2.5.12	Update diversion or bypass policy/procedures				
2.5.12.1	Prearrange alternative destinations with transfer agreements in place				
2.5.12.2	Notify other centers of divert or advisory status - Maintain a divert log				
2.5.12.3	Subject all diverts and advisories to performance improvement procedures				
2.5.13	Ensure board and medical staff approval of decision to become trauma center is received and documented.				
2.5.13.1	Develop process to obtain reaffirmation of Administrative support of Trauma certification every 3 years				
2.5.13.2	Develop process to obtain reaffirmation of medical staff support of Trauma certification every 3 years				
2.5.13.3	Develop process to document administrative commitment from the board and medical staff				
2.5.14	Establish criterial for graded activation clearly defined by the trauma center with high-test level of activation including the six required criteria listed in Exhibit 3.				
2.5.15	Develop massive transfusion protocol developed collaboratively between the trauma service and the blood bank				
2.5.16	Ensure transfer agreement in place with referral burn center				
2.5.17	Establish Trauma Registry Process				
2.5.17.1	Ensure data is collected and analyzed on all trauma patients.				
2.5.17.2	Develop process to ensure registries entered within 60 days of discharge				
2.5.18	Obtain endorsement of the trauma PIPS program by governing body, include empowerment to address events that involve multiple disciplines				
2.5.19	Develop required education processes				
2.5.19.1	Engage in public and professional education				
2.5.19.2	Develop Orientation, credentialing process and skill maintenance for advanced practitioners				
2.5.19.3	Develop education process for all Trauma registrars to attend two courses within 12 months of hire 1) the American Trauma Society's Trauma Registrar Course or equivalent provided by a state trauma program; and (2) the Association of the Advancement of Automotive Medicine's Injury Scaling Course or an equivalent local course.				
2.5.19.4	Establish method training for prehospital and hospital-based providers and personnel				

Southern Coos Health District
3-Year Strategic Plan (2024 - 2027)

Update 09-24-2024

	2.5.19.5	Create education requirements for all ED nurses or trauma responding nurses to complete an initial 16 hour accredited course in the care of trauma patients followed by recertification or 4 hours/year of trauma-related continuing education				
	2.5.20	Develop written protocol defining the clinical criteria and confirmatory tests for the diagnosis of brain death				
On Track	2.6	Feasibility Study for Appropriate services	Cori Valet, Antone Eek	12/31/2026	Katelin Wirth, Applicable department managers	
	2.6.1	Echo Stress Testing	Cori Valet, Antone Eek	12/31/2026	Katelin Wirth, Leah Hyman	
	2.6.1.1	Conduct preliminary analysis to determine if following steps worthy of completion				
	2.6.1.2	Prepare projected income statement				
	2.6.1.3	Conduct Market Survey				
	2.6.1.4	Create business and operations plan to include equipment, facility, personnel, supply availability and overhead				
	2.6.1.5	Review and analyze all data and determine Go/No Go Decision				
	2.6.1.6	Present proposal to board of directors for approval if applicable				
	2.6.2	Mobile Nuclear testing	Antone Eek, Cori Valet	12/31/2026	Katelin Wirth, Leah Hyman	
	2.6.2.1	Conduct preliminary analysis to determine if following steps worthy of completion				
	2.6.2.2	Prepare projected income statement				
	2.6.2.3	Conduct Market Survey				
	2.6.2.4	Create business and operations plan to include equipment, facility, personnel, supply availability and overhead				
	2.6.2.5	Review and analyze all data and determine Go/No Go Decision				
	2.6.2.6	Present proposal to board of directors for approval if applicable				
	2.6.3	Endoscopy	Cori Valet, Antone Eek	2/28/2025	Katelin Wirth, Danielle Wirt	
	2.6.3.1	Conduct preliminary analysis to determine if following steps worthy of completion				
	2.6.3.2	Prepare projected income statement				
	2.6.3.3	Conduct Market Survey				
	2.6.3.4	Create business and operations plan to include equipment, facility, personnel, supply availability and overhead				
	2.6.3.5	Review and analyze all data and determine Go/No Go Decision				
	2.6.3.6	Present proposal to board of directors for approval if applicable				
	2.6.3.7					

Southern Coos Health District
3-Year Strategic Plan (2024 - 2027)

Update 09-24-2024

	2.6.3.8					
	2.6.4	Coast Top referrals: Gen Surgery, Dermatology, ENT	Antone Eek, Cori Valet	6/30/2025	Katelin Wirth, Danielle Wirt	
	2.6.4.1	Conduct preliminary analysis to determine if following steps worthy of completion				
	2.6.4.2	Prepare projected income statement				
	2.6.4.3	Conduct Market Survey				
	2.6.4.4	Create business and operations plan to include equipment, facility, personnel, supply availability and overhead				
	2.6.4.5	Review and analyze all data and determine Go/No Go Decision				
	2.6.4.6	Present proposal to board of directors for approval if applicable				
	2.6.4.7					
	2.6.5	Expand Pain Program	Cori Valet, Antone Eek, Dawn Gray	4/30/2025	Katelin Wirth, Danielle Wirt, Victoria Schmelzer	
	2.6.5.1	Conduct preliminary analysis to determine if following steps worthy of completion				
	2.6.5.2	Prepare projected income statement				
	2.6.5.3	Conduct Market Survey				
	2.6.5.4	Create business and operations plan to include equipment, facility, personnel, supply availability and overhead				
	2.6.5.5	Review and analyze all data and determine Go/No Go Decision				
	2.6.5.6	Present proposal to board of directors for approval if applicable				
	2.6.6	Service lines for telemedicine	Dawn Gray, Antone Eek, Cori Valet	1/31/2025	Katelin Wirth, Nick Lucas, Amanda Myers	
	2.6.6.1	Conduct preliminary analysis to determine if following steps worthy of completion				
	2.6.6.2	Prepare projected income statement				
	2.6.6.3	Conduct Market Survey				
	2.6.6.4	Create business and operations plan to include equipment, facility, personnel, supply availability and overhead				
	2.6.6.5	Review and analyze all data and determine Go/No Go Decision				
	2.6.6.6	Present proposal to board of directors for approval if applicable				
	2.6.7					
Attention	2.7	Develop TeleMedicine strategy.	Cori Valet, Alden Forrester	6/30/2025	Antone, Ray, Exec Team	
	2.7.1	Decide on Strategy for program and Alignments, equipment etc.	Scott McEachern			
	2.8	Expand Access to Care at Clinic	Dawn Gray	12/31/2027	Executive Team	20.83
Completed	2.8.1	Increase clinic hours	Dawn Gray	8/1/2024		100

Southern Coos Health District
3-Year Strategic Plan (2024 - 2027)

Update 09-24-2024

	2.8.2	Recruit a Physician Medical Director and additional FNP	Dawn Gray, Stacy Nelson	12/31/2024	Raymond Hino	25
	2.8.3	Develop plan to increase clinic space to accommodate additional providers	Dawn Gray, Antone Eek	12/31/2024	Executive Team	
	2.8.4	Feasibility study for creating an Urgent Care clinic to expand access to care and address ED overutilization	Antone Eek, Dawn Gray	12/31/2027	Katelin Wirth, Executive Team	
	2.8.5					
	2.8.6					
	3.0	Quality: Services and internal operations				
On Track	3.1	EHR Optimization	Scott McEachern	12/31/2025	Staff	
On Track	3.1.1	Epic Go-Live	Scott McEachern	12/7/2024	Staff	
On Track	3.1.2	Post-Live Support Begins	Scott McEachern		Staff	
On Track	3.1.3	One Month Post Live: All provider documentation finished in Legacy EHR	Scott McEachern	1/11/2025	Medical Staff, Dr. Forrester	
On Track	3.1.4	One Month Post Live: Ellkay Archive Live	Scott McEachern	1/11/2025	Staff	
On Track	3.1.4.1	Communication to Providers regarding where data resides	Scott McEachern	1/4/2025	Staff	
On Track	3.1.5	1st Post Live Training for Providers and Clinical Staff	Scott McEachern	2/28/2025	Staff	
On Track	3.1.5.1	2nd Post Live Training for Providers and Clinical Staff	Scott McEachern	3/31/2025	Staff	
On Track	3.1.6	1st Post Live Training for Clinic	Scott McEachern	2/28/2025	Staff	
On Track	3.1.6.1	2nd Post Live Training for Clinic	Scott McEachern	3/31/2025	Staff	
On Track	3.1.7	Decommission Trubridge EHR and convert to legacy system	Scott McEachern	6/30/2025		
	3.1.8					
On Track	3.2	Achieve top 100 Hospital Status	Raymond Hino, Antone Eek, Cori Valet, Scott McEachern	12/31/2027	Executive Team, Managers, staff, providers, district board	30
Completed	3.2.1	Implement new HCAHPS vendor	Scott McEachern	12/31/2022	Cori Valet	100
On Track	3.2.2	Research criteria for achieving top 100 Hospital Status	Raymond Hino	6/1/2025	Executive Team	50
	3.2.3	Achieve 50% of Top 100 Hospital metrics	Raymond Hino	12/31/2026	Executive Team	
	3.2.4	Achieve 100% of Top 100 Hospital metrics Nationwide	Raymond Hino	12/31/2027	Executive Team	
	3.2.5	Work with Altius to improve staffing metrics to become a top hospital	Antone Eek	12/31/2025	Executive Team	
On Track	3.3	Develop and implement an organization-wide Risk Management Strategy	Amanda Bemetz	4/30/2025	Executive Team	
On Track	3.3.1	Perform Annual Risk Assessment- systemic approach to identify, analyze, and manage risks. Including likelihood of potential risks and developing strategies to reduce their likelihood and impact. The goal is to ensure the safety and quality of care for patients and healthcare professionals. Noting potential adjustments to strategies to address changing circumstances.	Amanda Bemetz	1/31/2025	Executive Team	
On Track	3.3.2	Internal analysis via internal audits and distribute resources and process improvement as applicable at the operational level; goal of being proactive versus reactive.	Amanda Bemetz	4/1/2025	Executive Team	

Southern Coos Health District
3-Year Strategic Plan (2024 - 2027)

Update 09-24-2024

On Track	3.3.3	Recognizing risks, identifying their causes and effects, and taking the relevant actions to mitigate them in a collaborative supportive approach.	Amanda Bemetz		Executive Team	
On Track	3.3.4	Risk mitigation initiatives, strategy to include implementing related projects to achieve the KPIs by setting measurable targets: Key Performance Indicators (KPI's).These can be used to measure success, monitor changes, and explore improvement opportunities.	Amanda Bemetz	4/1/2025	Executive Team	
On Track	3.4	Develop a Clinical Informatics Roadmap	Scott McEachern	12/31/2024	Shawn March, Executive Team	
On Track	3.4.1	Develop a SCH Data Governance Model	Scott McEachern	12/31/2024	Executive Team, Managers	
On Track	3.4.1.1	Benchmark Data Accuracy	Scott McEachern			
On Track	3.4.1.2	Benchmark Accessibility Standards based on Roles & Responsibilities	Scott McEachern			
On Track	3.4.1.3	Benchmark Data Quality Standards	Scott McEachern		Amanda Bemetz, Executive Team	
	3.4.1.4					
	3.4.1.5					
On Track	3.5	Develop IS Strategy and roadmap	Scott McEachern	6/30/2025	Trevor Jurgenson, Executive Team	
On Track	3.5.1	Develop a Telehealth Strategy	Scott McEachern	10/31/2024		
On Track	3.5.2	Promote Health & Wellness in SCH's Community through use of technology	Scott McEachern	10/31/2024		
On Track	3.5.3	Enhance the Delivery and Experience of Care	Scott McEachern	10/31/2024		
On Track	3.5.4	Improve Patient Satisfaction through use of Innovative Workflows and Products	Scott McEachern	10/31/2024		
On Track	3.5.5	Improve Patient Continuity of Care through SCH's participation in Health Information Exchanges, Building Connections with other medical facilities, and maintaining high interoperability standards	Scott McEachern	10/31/2024		
	3.5.5.1	HIE participation				
	3.5.5.2	Build Connections with Medical Facilities: CTCLUSI, CCHC				
	3.5.5.3	Maintain high Interoperability Standards:				
On Track	3.5.6	Develop SCH AI Strategy	Scott McEachern	10/31/2024		
On Track	3.5.7	Improve Cybersecurity Posture	Scott McEachern	6/30/2025		
On Track	3.5.7.1	Conduct Three Live All Staff Tabletop Exercises	Scott McEachern	6/30/2025		
On Track	3.5.7.2	Coordinate a community-wide cyberattack training episode with medical and civic partners	Scott McEachern	6/30/2025		
On Track	3.6	Develop an organizational clinical quality program: Patient Safety	Amanda Bemetz	1/30/2026	Executive Team	
On Track	3.6.1	Organizational dissemination of measures: Inpatient Quality Indicators (IQI's)	Amanda Bemetz	4/30/2025	Executive Team	
On Track	3.6.2	Organizational dissemination of measures: Patient Safety Indicators (PSI's)	Amanda Bemetz	4/30/2025	Executive Team	

Southern Coos Health District
3-Year Strategic Plan (2024 - 2027)

Update 09-24-2024

On Track	3.6.3	Identifying and implementation of applicable quality measures including rural-relevant measures; annual data mapping and disseminate to key stakeholders.	Amanda Bemetz	7/30/2025	Executive Team	
On Track	3.6.4	Implement a Patient Safety Culture Survey program; possibly implementing the AHRQ tool Surveys on Patients Safety Culture (SOPS) Hospital Survey, determine frequency, route, dissemination, and result driven focus points. Goal of Spring 2025.	Amanda Bemetz	1/30/2026	Executive Team, HR Director	
On Track	3.6.5	Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS):	Amanda Bemetz	1/30/2026	Executive Team	
On Track	3.6.5.1	New version/ measures 2025: January 1, 2025, will be known as HCAHPS 2.0; Patient Discharged- pending rulemaking	Amanda Bemetz	4/30/2025	Executive Team	
On Track	3.6.5.2	Value-based Purchasing: CMS adjusted payments for performance on the survey, including the quality of their clinical care.	Amanda Bemetz, Antone Eek	4/30/2025	Executive Team	
On Track	3.6.5.3	Public Reporting: from CMS, results reported on Hospital Compare: Address critical aspects, evaluate and assess for trends, implement identified	Amanda Bemetz	1/30/2026	Executive Team	
	4.0	Growth				
	4.1	Develop and Implement Comprehensive District Marketing Plan for 2025-2026	Scott McEachern			
	4.1.1	SCH Marketing Strategy 2025: Epic Transition	Scott McEachern			
	4.1.1.1	Increase Patient Portal (My Chart) utilization by 50%	Scott McEachern			
	4.1.1.2	Regular Project Press Releases	Scott McEachern			
	4.1.2	Deploy Short Videos	Scott McEachern			
	4.1.2.1	Implement Who Works Here Wednesdays Videos	Scott McEachern			
	4.1.3	Enhance SCHHC Website	Scott McEachern			
	4.1.4	Revisit Rebranding to Bandon Regional Health	Scott McEachern			
	4.1.5	Conduct Regular HIPAA Risk Audits on Marketing Efforts	Scott McEachern			
	4.1.6	Increase Investment in Digital Technologies to assist in streamlining the Patient Journey	Scott McEachern			
	4.1.6.1	Explore chatbots and virtual assistants	Scott McEachern			
	4.1.7	Increase Patient Access by Connecting all Elements of SCHHC Ecosystem	Scott McEachern			
	4.1.7.1	SCHHC Website, MyChart Patient Portal, Patient Statements, Phone Tree	Scott McEachern			
On Track	4.2	Develop a facility master plan for the entire facility that will encompass equipment, clinical tools, and infrastructure	Antone Eek, Raymond Hino	7/1/2026	Board of Directors, Executive Team, Design architects, Managers	66.66
Completed	4.2.1	Engage consultant to guide development of facility master plan, including RFP, selection of architects, and development of TCO	Antone Eek	8/15/2023	Jonathan Yamasaki, Scott McEachern, Jason Cook, Joe Kunkle	100

Southern Coos Health District
3-Year Strategic Plan (2024 - 2027)

Update 09-24-2024

	4.3	Create Project Management Infrastructure at SCHHC	Scott McEachern			
	4.3.1	Inventory current SCHHC projects by 2/28/23	Scott McEachern			
	4.3.2	Set up weekly project meetings	Scott McEachern			
	4.3.3	Set up MS Project SCHHC Project Tracker	Scott McEachern			
	4.3.4	Quarterly Governance Committee Meeting	Scott McEachern			
	4.3.4.1	Quarterly Project Review	Scott McEachern			
On Track	4.4	Epic Community Connect Implementation	Scott McEachern	3/31/2025		
On Track	4.4.1	Imprivata SSO	Scott McEachern			
On Track	4.4.2	Sage/Intacct Go Live	Scott McEachern	10/1/2024	Antone Eek	
On Track	4.4.3	EHR Technical Dress Rehearsal	Scott McEachern	10/15/2024		
On Track	4.4.4	EHR Workflow Dress Rehearsal	Scott McEachern	11/15/2024		
On Track	4.4.5	Scheduling/Registration Conversion	Scott McEachern	11/30/2024		
On Track	4.4.6	Epic Community Connect Go-Live	Scott McEachern	12/7/2024		
On Track	4.4.6.1	Epic Community Connect	Scott McEachern	12/7/2024		
On Track	4.4.6.2	Data Conversion to Epic:	Scott McEachern	12/7/2024		
On Track	4.4.6.3	Imprivata Go Live	Scott McEachern	12/7/2024		
On Track	4.4.7	Data Conversion to Epic Third Extract	Scott McEachern	12/31/2024		
On Track	4.4.8	Archive Go-Live	Scott McEachern	3/31/2025		
On Track	4.4.8.1	Convert staff to use of Epic data and Archive and d/c use of TruBridge	Scott McEachern	6/30/2025		
	4.5	Expand and Optimize Pharmacy Services	Antone Eek	12/31/2025	Scott McEachern, Ray Hino	12.49
	4.5.1	Outpatient Pharmacy	Antone Eek	12/31/2025		16.66
	4.5.1.1	Agreement with Cardinal	Antone Eek	8/1/2024	Ray	100
	4.5.1.2	Contractor - Pharmacy Build (Service Contract)	Antone Eek			
	4.5.1.3	Contractor - Pharmacy Build	Antone Eek			
	4.5.1.4	Contractor - Cardinal (Payor Contracts)	Antone Eek			
	4.5.1.5	Contractor - Cardinal (Pharmacy Setup)	Antone Eek			
	4.5.1.6	Contractor - Cardinal (POS System)	Antone Eek, Scott McEachern			
	4.5.2	Optimize 340B program	Antone Eek	12/31/2025		33.33
	4.5.2.1	Pharmacy Tech - JD and Posted	Antone Eek			100
	4.5.2.2	Pharmacy Tech - Hire	Antone Eek			
	4.5.2.3	Pharmacy Tech - Trained / Database Cleaned	Antone Eek			
	4.5.3	Inpatient Pharmacy	Antone Eek	12/31/2025		
	4.5.4					
	5.0	Finance:Self sustainable				
On Track	5.1	Review and renegotiate and include quality metrics for all payer contracts	Antone Eek	7/1/2025	Raymond Hino, Dawn Gray, Advance Healthcare	25
	5.2	Profitability plan to define a X% increase to the bottom line.	Antone Eek		Katelin Wirth	
	5.2.1	OP Pharmacy	Antone Eek			
	5.2.2	OP Clinics	Antone Eek, Dawn Gray			
	5.2.2.1					
	5.2.3					
	5.2.3.1					
	5.2.3.2					
	5.2.4					

Southern Coos Health District
3-Year Strategic Plan (2024 - 2027)

Update 09-24-2024

	5.3	Optimize ACO performance	Dawn Gray, Raymond Hino	12/31/2025	Antone Eek, Amanda Bemetz	
	5.3.1	Utilize the ACO's platform to manage and track patient-centered care through Annual Medicare Wellness Visits and monthly check-ins with patients who are high utilizers of the ED.	Dawn Gray	4/30/2025	Shawn March, Kelli Cotton	
On Track	5.3.2	Benchmark current state of performance metrics and develop plan of improvement to reach ACO's metric goals	Dawn Gray, Amanda Bemetz	11/30/2024	Scott McEachern, Shawn March	
On Track	5.4	ERP implementation	Scott McEachern, Antone Eek	10/1/2024		
	6.0	Accreditation and regulatory compliance				
On Track	6.1	DNV Continuous Readiness; DNV Required documents current and ready	Amanda Bemetz	8/8/2025	Executive Team	
On Track	6.1.1	Attain ISO 9001 Certification at 2025 DNV Accreditation Survey	Amanda Bemetz	8/8/2025	Executive Team	
	6.1.2	2024 DNV Non-Conformities Corrective Action Plan complete	Amanda Bemetz	8/8/2025	Executive Team	
	7.0	General SCHHC Projects				
On Track	7.1	Upgrade Sterile processing department	Cori Valet	10/31/2024	Jason Cook, Joe Kunkle, Denise Ebinal, Danielle Wirt, Chris Ameral	58.5
Completed	7.1.1	Install DI water system	Antone Eek, Cori Valet	8/30/2024	Jason Cook, Chris Amaral, Denise Ebinal	100
	7.1.2	Install 3 bay sink, pass through window, and ICU breakaway doors	Cori Valet, Antone Eek	9/13/2024	Jason Cook, Chris Amaral, Denise Ebinal	50
Completed	7.1.3	Install vinyl flooring in OR	Antone Eek, Cori Valet	9/13/2024	Jason Cook, Chris Amaral, Danielle Wirt, Denise Ebinal	100
On Track	7.1.4	Procure and install table and storage options in Decontam, Sterile and OR	Antone Eek, Cori Valet	9/24/2024	Jason Cook, Chris Amaral, Danielle Wirt	25
Completed	7.1.5	Obtain approval of project from OHA	Cori Valet	8/16/2024	Jason Cook, Joe Kunkle, Denise Ebinal	100
Completed	7.1.6	Establish SPD operational plan for time period of construction	Cori Valet, Antone Eek, Raymond Hino	8/1/2024	Danielle Wirt, Denise Ebinal	100
Completed	7.1.7	Establish regular meetings for project communication	Cori Valet	8/2/2024	Jason Cook, Joe Kunkle	100
On Track	7.1.8	Install Steris Mechanical Washer	Cori Valet, Antone Eek	9/22/2024	Jason Cook	10
Attention	7.1.9	Coordinate ribbon cutting ceremony	Cori Valet	10/31/2024	Kim Russel	
On Track	7.1.10	Brick repairs to external wall and exterior paint	Cori Valet, Antone Eek	9/29/2024	Jason Cook	
	8.0	Community Health Needs Assessment				
On Track	8.1	Expand Access to care in SCH Clinic	Dawn Gray	7/1/2025	Executive Team	81.25
Completed	8.1.1	Implement Triage Line	Dawn Gray	10/1/2023	Executive Team	100
On Track	8.1.2	Tracking Call Volume and Time	Scott McEachern	7/1/2025	Executive Team, SCHHC IS Department	50
On Track	8.1.3	Same Day (Fast Track) Appointments in SCH Clinic	Dawn Gray	7/1/2025	Executive Team	75
Completed	8.1.4	Extended Hours in the SCH Clinic	Dawn Gray	8/1/2024	Executive Team	100
On Track	8.2	Assess Potential Specialties to improve local access	Raymond Hino	7/1/2025	Executive Team	66.66
Completed	8.2.1	Assess top three opportunities	Raymond Hino	8/1/2024	Executive Team	100
Completed	8.2.1.1	Dermatology	Raymond Hino	11/21/2023	Executive Team	100

Southern Coos Health District
3-Year Strategic Plan (2024 - 2027)

Update 09-24-2024

On Track	8.2.1.2	Urology	Raymond Hino			100	
Completed	8.2.1.3	Gynecology	Raymond Hino			100	
Completed	8.2.1.4	Endocrinology	Raymond Hino			100	
Completed	8.2.1.5	Ophthalmology (Cataracts)	Raymond Hino			100	
Completed	8.2.1.6	Podiatry	Raymond Hino			100	
Completed	8.2.1.7	ENT	Raymond Hino			100	
Completed	8.2.1.8	Nephrology	Raymond Hino	11/21/2023		100	
Completed	8.2.1.9	Pediatric	Raymond Hino			100	
Completed	8.2.1.10	Telemedicine	Raymond Hino			100	
Completed	8.2.1.11	Psychiatric services	Raymond Hino			100	
Completed	8.2.1.12	Orthopedics	Raymond Hino	11/21/2023	Jeremiah Dodrill	100	
On Track	8.2.2	Feasibility of top three	Raymond Hino	6/30/2024	Executive Team	33.33	
Completed	8.2.2.1	Who's in the market	Scott McEachern	10/31/2023	David Sandberg, Jeremiah Dodrill, Raymond Hino	100	
On Track	8.2.2.2	Wait times	Dawn Gray	7/1/2025	Executive Team		
On Track	8.2.2.3	Reputation of local providers	Raymond Hino	7/1/2025	Executive Team		
Completed	8.3	Improve Service Offerings to SCHHC Patients	Raymond Hino	12/31/2023	Executive Team	100	
On Track	8.3.1	Chronic Care Management	Dawn Gray	12/31/2023	Executive Team	100	
Completed	8.3.1.1	Hire a Chronic Care Management Coordinator	Dawn Gray	12/31/2023	Executive Team	100	
Completed	8.3.2	Hire School Nurse Replacement	Dawn Gray	8/14/2023	Scott McEachern	100	
On Track	8.4	Increase community awareness about our services	Scott McEachern	6/30/2025	Executive Team	66.66	
Completed	8.4.1	Improve Google Star Ratings	Scott McEachern	6/30/2024	Amy Moss Strong	100	
On Track	8.4.2	Regular Billboard Rotation: every 3 months	Scott McEachern	8/1/2024	Executive Team	100	
On Track	8.4.3	Promote Pulmonary Disease Program	Scott McEachern	7/1/2025	Executive Team		
On Track	8.5	Staff Education	Raymond Hino	7/1/2025	Executive Team		
On Track	8.5.1	Increased awareness of Insurance acceptance, and services offered at the hospital and clinic, Community, and how to access those services	Raymond Hino	7/1/2025	Executive Team		
Completed	8.5.1.1	Outside service resource list.					
On Track	8.5.1.2	Availability and promotion of Financial Assistance Policy	Scott McEachern	12/31/2023	Dawn Gray, front desk staff, Cathy Mann, Amy Moss Strong		
On Track	8.5.2	Cultural Competency and trauma-informed care education	Raymond Hino	7/1/2025	Executive Team		
On Track	8.5.3	Expanded HIPAA Privacy Training	Scott McEachern	7/1/2025	Executive Team		
	9.0	Health Equity and Social Drivers of Health					
Attention	9.1	Increase awareness about Health Equity and Social Drivers of Health	Amanda Bemetz	1/30/2025	Executive Team		
Attention	9.1.1	Collection of data for screening patients with health equity goals	Scott McEachern, Amanda Bemetz	1/30/2025	Executive Team		
Attention	9.1.1.1	Tool (Questionnaire form) to be determined. Goal of having tool built within (EHR).	Scott McEachern, Amanda Bemetz	1/30/2025	Executive Team		
Attention	9.1.1.2	Collection methodology to be determined. Goal to be within EHR and have designated analyzing/ reporting capabilities.	Amanda Bemetz, Scott McEachern	1/30/2025	Executive Team		
Attention	9.1.2	Create a shared language for Health Equity	Amanda Bemetz	1/30/2025	Executive Team		

Southern Coos Health District
3-Year Strategic Plan (2024 - 2027)

Update 09-24-2024

Attention	9.1.2.1	Create and disseminate a shared glossary via Policy management system, introduce in Orientation and annually thereafter? <input checked="" type="checkbox"/> Population health <input checked="" type="checkbox"/> Social determinants of health <input checked="" type="checkbox"/> Health equity <input checked="" type="checkbox"/> Health disparity and health inequity <input checked="" type="checkbox"/> Health care disparity <input checked="" type="checkbox"/> Diversity <input checked="" type="checkbox"/> Inclusion <input checked="" type="checkbox"/> Bias <input checked="" type="checkbox"/> Unconscious (implicit) bias <input checked="" type="checkbox"/> Micro-aggression/Micro-inequity	Amanda Bemetz	1/30/2025	Executive Team, HR Director	
Attention	9.1.2.2	Health Equity module training at orientation and annually thereafter?	Amanda Bemetz, Stacy Nelson	1/30/2025	Executive Team	
On Track	9.2	Optimize Health Screening and Immunizations to drive Health Equity	Cori Valet, Dawn Gray	8/31/2026	Karen Stafford, Nick Lucas, Amanda Myers, Kerry Vincent, Leah Hyman	
On Track	9.2.1	Mammography screening promotion	Cori Valet	6/30/2025	Leah Hyman	
On Track	9.2.2	Medicare Annual Wellness Visits	Dawn Gray	6/30/2025	Kelli Cotton	
On Track	9.2.3	PSA screening promotion	Dawn Gray	6/30/2025	Cindy Kessler	
On Track	9.2.4	Expand SCHHC presence at Health Fairs	Dawn Gray, Cori Valet	6/30/2025		
On Track	9.2.5	Expand access to Sports Physicals	Dawn Gray	6/30/2025	Liz Deters	
On Track	9.2.6	Expand access to Immunizations	Dawn Gray, Cori Valet	6/30/2025	Nick Lucas	
On Track	9.3	Partner with other entities for Equity Improvement (Proactive for what will be required in the future)	Dawn Gray, Cori Valet	12/31/2026	Case Management	
	9.3.1	Partnerships (Coast)				
	9.3.2	Food Banks				
	9.3.3	City/County				
	9.4	Elderly loneliness	Dawn Gray	12/31/2027		
	9.4.1	Implement a community engagement and support program	Dawn Gray, Raymond Hino	12/31/2027	Executive Team	
	9.4.2	Provide access to mental health professionals who can offer counseling and support	Raymond Hino, Dawn Gray	12/31/2026	Executive Team	
Attention	9.5	Build Infrastructure to Support Health Equity	Amanda Bemetz	4/30/2025	Executive Team	
Attention	9.5.1	Operationalizing a health equity strategy requires dedicated resources, including human resources. Health Equity module training at orientation and annually thereafter- TBD	Amanda Bemetz, Stacy Nelson	1/30/2025	Executive Team	
Attention	9.5.2	Expand the Collection, Reporting, and Analysis of Standardized Data	Scott McEachern, Amanda Bemetz	12/31/2025	Executive Team	

Southern Coos Health District
3-Year Strategic Plan (2024 - 2027)

Update 09-24-2024

Attention	9.5.2.1	Using data to support efforts to improve equity is vital to communicate and build will by showing the need to leaders, employees, and the community. Understand and disseminate our patient demographic data, stratified by race, ethnicity, language, and other factors.	Amanda Bemetz, Scott McEachern	12/31/2025	Executive Team	
	9.6	Partner with the Community to Improve Health Equity	Raymond Hino	12/31/2025	Executive Team	
	9.6.1	Work in partnership with community members and community-based organizations that are highly engaged with community members.	Raymond Hino	12/31/2025	Executive Team	
	10.0	Foundation				
	10.1	Restructure the SC foundation and fundraising.	Raymond Hino	12/31/2025	Executive Team, Foundation Board of Directors	
	10.1.1	Hire new foundation Exec Dir	Raymond Hino	12/31/2024	Executive Team, Foundation Board of Directors	