

Goal	Objective	Senior "Owner"	November Report to Strategic Planning Committee	May 2019 Report to Strategic Management Committee
Demonstrate that CHC provides access to high quality care to improve the individual health and well-being of individual patients and to improve the health of the population served.	Measure, monitor and improve performance in HRSA required and self-selected quality measures.	Dr. Locke Simons	Ongoing.	Ongoing activities of the QI Committee and regular reporting of quality measures to BOD.
	Develop and maintain internal resources to support care coordination and improve quality as measured by Medical Loss Ratio and HEDIS measures,	Dr. Locke Simons - designated to Terri Woodrome	The CIMS centers have developed a year end "play-book" targeting gaps in care that need to be closed to meet the quality measures established by the Managed Care Plans. There is a Monday afternoon "huddle" during which each center reports briefly on their progress and strategies are shared among the centers. In addition, CHC has added one care coordination specialist and filled a vacancy with an individual with a more advanced skill set.	Based on the success of the year-end playbook strategy reported in the November Progress Report, CIMS has implemented twice a month huddles using the same methodology for reporting data and sharing best practice. It is important to note however, that CHC's performance on HEDIS measures may not improve or even keep prior with past performance during our EHR conversion due to increased demand on staff and optimizing the capability of the system.
Address the unmet need for health care services for targeted vulnerable populations.	Develop outreach and patient care model to ensure that patient care services are accessible and culturally appropriate for homeless individuals and families.	Brooke Holloway	New Horizon Family Health Services provided training for CHC staff earlier this year. They are the homeless grantee for Greenwood County. Brooke Holloway continues to develop on of her staff previously hired to do ACA Outreach and Enrollment to serve as a special populations coordinator.	No additional progress to report.
	Develop a Controlled Substance Initiative intended to reduce opioid abuse through a multidisciplinary and multidimensional approach including the provision of Medication Assisted Therapy (MAT).	Dr. Locke Simons and Dr. Dominic Mellette	Currently Dr. Simons is the only CHC provider eligible to provide MAT. We are working on plans to host regional training in January; however, implementing a full scale MAT includes a range of support services and therefore, requires significant planning and coordination. We will be evaluating the need and feasibility on an ongoing basis.	Screening and referral continues through the previously awarded AIMS and SUD/MH grants. CHC has submitted a proposal for the 2019 HRSA Integrated Behavioral Health Services grant opportunity that includes the addition of a coordinator position and community engagement work to identify need and gain insight into improving access and utilization of services. Specific to MAT services, discussions are ongoing with Cornerstone regarding a collaborative venture to support CHC's ability to offer MAT.
Increase capacity/access and expand services system-wide with a focus on meeting the continued demand for services in the Greenwood area.	Add or expand a site in the Greenwood area with a possible focus on same day/urgent care need	Dr. Jason Dahlberg	Continue to be open to opportunities; however, this falls below the pediatric and pharmacy expansions in terms of priority due to the projection of financial impacts. Dr. Dahlberg continues to manage staffing to expand capacity as much as possible.	Plans for new service delivery sites adjusted in alignment with organizational performance improvement plan. To be re-evaluated as resources allow and/or viable opportunities present.
	Focus on improving access by enhancing the ability of CHC sites to function as a system of care rather than as independent practices.	Dr. Locke Simons	Balancing the clinical rationale for a PCP model with the patient centeredness of an open system model is a subject of ongoing discussion with medical staff. Individual situations are handled as they arise and used as training examples.	Ongoing communication through medical staff leadership with focus on ensuring access for our patients.
	Develop telehealth options that are financially viable and appropriate for the patients served.		No progress to report.	Equipment is installed at all locations. Training and implementation plan deferred until after HER conversation is complete.

	Expand the network of contract dentists to provide more geographically dispersed access to oral health care for low-income, uninsured, and underinsured adults.		No progress to report.	Contact with one additional dentist but have not yet secured commitment.
Expand the reach of the Department of Pediatrics to: a) reach underserved populations; b) create more convenient access for families in outlying communities; and c) improve overall access to high-quality pediatric care in CHC's service area.	Targeted marketing and outreach to engage adolescents in a primary care medical home.	Dr. Juan Bonetti	Ongoing with targeted outreach planned for specific months.	No change to plans.
	Evaluate opportunities to increase access to a pediatric provider at existing CHC practices: McCormick, Saluda, and Abbeville counties.	Dr. Juan Bonetti	Requires additional provider staffing due to the increased demand at TCC.	Focus has shifted to the possibility of running pediatric clinic hours at Lakelands Family Practice to accommodate identified need in the Coronaca, Cross Hill, and Waterloo families. LFP has sufficient space to support an additional provider. Contingent upon increased pediatric provider staffing, but could be achieved with the addition of a mid-level provider shared with HTP.
	Expand pediatrics to a new site that serves Abbeville/Anderson county corridor.	Paul Grogan	We are evaluating a different course of action in response to the increased demand at The Children's Center being driven by increased births at SRH and MCO requirements for well child visits. Under consideration is expansion the physical capacity at TCC to house at least one additional pediatric provider, additional support an enabling staff, and ideally - a small pharmacy outlet. We believe there is sufficient square footage, though it is not configured or being used in the most effective manner. To that end, we have retained a consulting firm that specializes in practice design and patient flow to conduct an assessment of the space and provide us with recommendations for optimizing the space to accommodate our short term needs as well as long term expansion.	Relocation of billing department is imminent, pending completion of IT configuration in leased building. Large scale redesign/renovation of TCC will be deferred until resources allow; however, affordable reconfiguration along with optimal provider staffing as referenced above should allow for increased capacity.
			Unexpectedly, we have been made aware of a 3rd year pediatric resident who is scheduled to interview with another Greenwood practice - assumedly with SRH. We have had an initial telephone interview and are piggy-backing a face to face interview and tour of TCC onto his already scheduled trip to Greenwood.	We were unsuccessful in securing a commitment from this resident over the SRH offer. The addition of another pediatrician in Greenwood may impact demand and we will continue to monitor.
Expand access and enhance quality through the continued growth of Carolina Community Pharmacy and the CHC Department of Pharmacy.	Integrate pharmacy services into the primary care medical home to achieve optimal clinical benefit.	Dr. Dominic Mellet	Have hired additional PharmD.	Department of Pharmacy is fully staffed though there are some gaps in capacity based on medical leave.

	Develop third commercial pharmacy site in Clinton.	Paul Grogan	Currently in holding pattern. See below.	Clinton continues to be the optimal target for a 3rd retail pharmacy location when Chic is in a favorable position to move forward. We were contacted by an independent pharmacy in Laurens that is interested in partnering with us in a contract relationship. Members of the Pharmacy Oversight Committee have made a site visit and will be doing a feasibility study on this possibility.
	Evaluate contract pharmacy options and implement contract arrangements with strategically selected partners.	Paul Grogan	Contract arrangement with Curant is performing as hoped and we are meeting with three additional Third Party Administrators to assess additional contract opportunities. Goal is to generate revenue through contract arrangements that will support the expansion of our in-house and clinical programs.	We have expanded our contract portfolio to include 8 CVS pharmacy locations. Performance of these contract pharmacy arrangements will be reported via the monthly dashboard once they are operational in July 2019. The Curant contract arrangement continued to achieve the desired results and efforts to expand its scope are underway.
Expand access to behavioral health services to address the barriers that are preventing CHC patients from receiving needed services	Address critical need for behavioral health counselor for LC4/Hometown Pediatrics.	Sue Veer	Feedback from LC4 and HTP is positive.	Continue to get positive feedback from staff at HTP and LC4.
	Explore options in addition to partnership with Beckman Center to maintain and expand behavioral health services.	Sue Veer	Interviews for current vacancy at TCC have been disappointing. A candidate has been identified; however, she has very little experience and TCC leadership are concerned that she will not be able to handle the volume or complexity of need. They have proposed we hire three part-time counselors to job share one FT in-house counselor position.	TCC vacancy filled. Addition of Beckman counselor serving Calhoun Falls and McCormick has been effective for Calhoun Falls; however, very low referral rate from McCormick. The addition of an in-house Behavioral Health Coordinator through the IBHS grant (if funded) will allow for greater and more effective interaction and coordination with the Beckman staff. In addition, the plan for community engagement will help to identify need and barriers.
Enhance patient and family support services.	Develop a proposal for a pilot peer support group and/or peer support counseling model.	Brooke Holloway	No progress to report.	No progress to report.
	Develop and pilot a Family Advisory Council in conjunction with pediatric medical home model.	Brooke Holloway	No progress to report.	No progress to report.
Reduce the barriers to recruiting qualified staff and minimize turn-over.	Conduct a comprehensive compensation study and address any identified deficiencies in pay grades and compensation plans.	Paul Grogan	We have identified clinical support staff salaries as the category not keeping pace with the market and therefore challenging our ability to recruit and retain qualified staff in those positions. We previously adjusted the pay scale without implementing an across-the-board increase; however, now recognize that this created real and perceived inequities relative to pay and tenure. We are in the process of mapping the rate of pay and tenure for all incumbents in this category with the intent to implement individualized adjustments to establish equity and achieve a market advantage.	No additional activities planned at this time.

	Continue to maintain and enhance effective employee communication using a variety of vehicles.	Brooke Holloway	Survey complete and results reported to board and staff. Half day meeting with second tier management team scheduled for 11/28 to discuss results and develop training and communications plan. Monday messages continue to be well-received.	Monday Messages continue to be well received. The November middle management meeting resulted in a focus on professional appearance and a task force of front line supervisors has been working on an appearance policy, as well as ideas for training on this issue.
Ensure the uninterrupted continuation of governance and leadership	Develop staged plan for recruitment and development of new board members.	Sue Veer	No progress to report.	Board Development Plan completed and adopted by the Board in April 2019. Plans are underway for outreach to Laurens County practices for candidates that meet the targeted need.
	Continue the development of planned and emergency leadership transition plans for the senior management team and other key leaders.	Sue Veer	Ongoing.	Leadership planning session scheduled for June 6th.
Provide necessary upgrades to facilities and equipment to support quality and operational effectiveness	Finalize and implement conversion of Pharmacy Information System.	Dr. Dominic Mellet	Complete.	
	Upgrade to digital x-ray at all sites where radiology is performed.	Miriam Ferguson	Ongoing.	Ongoing as resources allow.
	Implement an EKG replacement program.	Miriam Ferguson	Complete.	
Implement and maintain state-of-the - industry technology that promotes the effective delivery of patient care and supports efficiency of operations.	Facilitate the implementation and maintenance of an electronic health record system that supports the needs of the organization in the current and emerging health care delivery system.	Miriam Ferguson, Dr. Locke Simons, and Paul Grogan	Due diligence is complete and final cost and contract terms have been submitted by preferred vendor. Will be presented to the Board of Directors for consideration at November meeting with December vote necessary to meet required implementation timeline.	All contracts have been executed and financing secured for the conversion to EPIC via OCHIN. Training has commenced and the go-live date is July 23, 2019.