

Goal	Objective	Senior "Owner"	June Report to Strategic Planning Committee	August Report to Strategic Planning Committee	November Report to Strategic Planning 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 activities of the QI Committee and regular reporting of quality measures to BOD.	Ongoing activities of the QI Committee and regular reporting of quality measures to BOD.	Ongoing.
	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	Expanded QI Coordinator position to upper management role: Director of Quality and Population Health. Position filled with experienced candidate from payer community.	New Director begun analyzing gaps in care potential increased PFF payments - overview to be presented to the Board on 8/20/18. Analysis of patient assigned to us who have not established as CHC patients indicated this is the greatest opportunity; however, it requires increased capacity.	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.
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 an special populations coordinator.
	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 Melleite			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.
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	Dr. Dahlberg continues to evaluate possible opportunities for a same day/clinic overflow location.		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.
	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.
	Develop telehealth options that are financially viable and appropriate for the patients served.		Pilot site for VA program for PTSD.		No progress to report.
	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.
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	2nd focused month of outreach resulted in approximately 300 adolescent well visits.		Ongoing with targeted outreach planned for specific months.
	Evaluate opportunities to 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.

	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.
					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.
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 Mellette	Contingent upon adequate staffing - 1st interview conducted.		Have hired additional Pharm.D.
	Develop third commercial pharmacy site in Clinton.	Paul Grogan	Due diligence on property underway. GHS/Laurens County Hospital has expressed interest in a collaborative site development project.		Currently in holding pattern. See below.
	Evaluate contract pharmacy options and implement contract arrangements with strategically selected partners.	Paul Grogan	First contract initiated and currently being implemented. Have engaged Atria - a third party administrator - to conduct our independent audit with the goal of evaluating the possibility of using them to develop and administer additional contract pharmacy agreements.		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.
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	Position filled.		Feedback from LC4 and HTP is positive.
	Explore options in addition to partnership with Beckman Center to maintain and expand behavioral health services.	Sue Veer	All approved position filled and continuing to discuss enhanced service options with the Beckman Center as those emerge.		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.
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.
	Develop and pilot a Family Advisory Council in conjunction with pediatric medical home model.	Brooke Holloway			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.

	Continue to maintain and enhance effective employee communication using a variety of vehicles.	Brooke Holloway	Triennial employee survey in the development process. CEO initiated "Monday Messages."		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.
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.
	Continue the development of planned and emergency leadership transition plans for the senior management team and other key leaders.	Sue Veer			Ongoing.
Provide necessary upgrades to facilities and equipment to support quality and operational effectiveness	Finalize and implement conversion of Pharmacy Information System.	Dr. Dominic Mellette	Conversion complete.		Complete.
	Upgrade to digital x-ray at all sites where radiology is performed.	Miriam Ferguson	Conversion to digital x-ray complete at Uptown and McCormick Family Practices. Other practices will be converted as funding allows.		Ongoing.
	Implement an EKG replacement program.	Miriam Ferguson	Complete.		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	Needs assessment conducted with an initial group of five vendors selected for consideration. Field of options has been narrowed to 2 vendors with three possible models of implementation.		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.