

	<u>Goal</u>	<u>Objective</u>	<u>Senior Owner</u>	<u>February 2022 Update to the Board of Directors</u>
1.a	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 with quality data reported monthly to the BOD. On time completion of quality and population health data on HRSA required Universal Data System Report (submitted 2/15/22).
1.b		Develop and maintain internal resources to support care coordination and improve quality as measured by Medical Loss Ratio, HEDIS measures, and other applicable criteria that may be identified.	Dr. Locke Simons	Department of Quality and Population Health remains fully staffed. Performing at or above average among CIMS health centers in meeting HEDIS measures and MLR goals.
1.c		Implement a plan to eliminate gaps in health care equity that have been identified through data on access and quality outcomes.	Dr. Locke Simons	Select quality indicators are being stratified according to race and ethnicity in order to identify opportunities for intervention and improvement in clinical outcomes. To date, the data has not indicated significant actionable disparities.
2.a	Address the unmet need for health care services for targeted vulnerable populations.	Expand and enhance outreach and collaboration to a) support the care the persons living with HIV/AIDS; b) increase prevention strategies including the use of PrEP; and c) support HRSA's initiative to end the HIV/AIDS epidemic.	Dr. Jason Dahlberg,	Collaboration and referral relationship with Upper Savannah Consortium continues and CHC is now the only primary practice in Greenwood and surrounding areas taking new HIV/Aids patients. In January CHC submitted an application for a HRSA supplemental grant that will support enhanced outreach and care coordination to increase testing, bring patients into care following their diagnosis, and promote the use of PrEP (pre-exposure prophylaxis).
2.b		Continue Controlled Substance Initiative intended to reduce opioid abuse through a multidisciplinary and multidimensional approach. Ensure patient access to comprehensive Medication Assisted Therapy (MAT) that is integrated into the primary care medical home model.	Dr. Locke Simons	CHC has two providers with the credentials necessary to provide MAT and Dr. Simons continues to encourage others to pursue eligibility. Our MAT initiative is coordinated by a multidisciplinary team that is comprised of family medicine, pharmacy services, and behavioral health. We have formed a partnership with Cornerstone that provides patients who qualify for their grant-funded program the option of being referred to us or to Greenwood Treatment Specialists. The Director of Behavioral Health serves as point. We are evaluating two supplemental funding opportunities that would provide additional resources for behavioral health support of our MAT initiative. However, with only two eligible providers we have limited capacity in terms of the number of MAT patients that can be managed at any given time.

3.a	Increase capacity/access and expand services system-wide with a focus on meeting the continued demand for services in the Greenwood area.	Expand Village Family Practice to accommodate additional 1.0 FTE provider by 2023.	Paul Grogan, Miriam Ferguson (expansion) and Locke Simons (provider staffing)	Secured grant funding. Finalizing engineering and design work after which the project will be out for bids for the construction phase. Expected completion in Spring of 2023.
3.b		Continue to monitor potential need for same day/overflow capacity and evaluate opportunities that present.	Dr. Locke Simons, Dr. Jason Dahlberg, and Paul Grogan	No activity to report.
3.c		Provide financially viable telehealth options appropriate to patient need and preference.	Dr. Locke Simons	No activity to report.
4.a	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.	Complete redesign and transformation of The Children's Center to support increased capacity and comprehensive team-based care model.	Miriam Ferguson and Paul Grogan	Design complete and construction contract executed. The project will be completed in 3 phases to minimize disruption of operations. Phase I, which is the relocation of Early Childhood Services to the second floor is underway with expected completion by the end of April 2022.
4.b		Convert Lakelands Family Practice to Lakelands Family Medicine and Pediatric Center and add pediatrics (1.0 FTE provider).	Miriam Ferguson and Paul Grogan	Began providing pediatric services in December 2021 using existing space. Site name was changed to Lakelands Family Practice and Pediatric Center and HRSA required Change in Scope was submitted. Design work to up fit the unused space for pediatrics is complete and finishes have been selected. Will go out to bid within the next 90 days. Determined adding brick facade to the exterior is cost-prohibitive; consequently alternative options are being evaluated.
4.c		Relocate Hometown Pediatrics to accommodate current and the potential for increased demand and correlated provider capacity. (Location TBD - see Objective 7.a)	Miriam Ferguson and Paul Grogan	Planning for Laurens/Clinton relocation and expansion projects is not anticipated to begin until early 2023.
5.a	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. Primary focus areas for clinical integration include: a) Objective 2.a HIV/AIDS and PrEP; b) Objective 2.b MAT services; and c) clinical support for Medicare Annual Wellness Visits.	Dr. Dominic Mellette	Pharmacy is actively involved in initiatives to provide of HIV/Aids, PrEP, and MAT services to increased numbers of patients. Plans to evaluate and potentially implement clinical pharmacists I a supporting role for Medicare Wellness Visits remains on hold until COVID 19 infectious rates drop and we have adequate staffing to shift resources to this initiative.
5.b		Implement PharmD facilitated disease management at two pilot sites through collaborative relationship with Presbyterian College School of Pharmacy.	Dr. Dominic Mellette	Two pilot sites identified: LC4 and Lakelands Family Practice and Pediatric Center. Implementation date contingent upon staffing.

5.c		Develop third commercial/community pharmacy location in Clinton.	Dr. Dominic Mellette	Planning for Laurens/Clinton relocation and expansion projects is not anticipated to begin until early 2023.
6.a	Expand access to behavioral health services to address the barriers that are preventing CHC patients from receiving needed services	Expand integrated behavioral health model to additional CHC practice sites as indicated by demand for services and supported by available resources.	Dr. Locke Simons	CHC's Behavioral Health Department is now well established and growing in response to demand, as well as the HRSA focus on integrated behavioral health services as a core component of the community health center medical home model. Approved staffing for the CHC behavioral Health Department consists of a Director and 4 Behavioral Health Counselor/Consultant positions - 2 of which are in the recruitment phase. Those BH professionals are/will be located at The Children's Center (2), a shared position for Uptown Family Practice and Village Family Practice, and a shared position for Hometown Pediatrics and LC4 in Clinton. We are continuing our relationship with Beckman Center for Mental Health with 2 contracted counselors. One is at Uptown Family Practice and the other position (vacant) is shared between Calhoun Falls, Pendergrass, and Lakelands Family Practice sites. We secured a HRSA supplemental grant for Integrated Behavioral Health and, as noted above in 2.b, we are evaluating two additional related funding opportunities.
6.b		Implement regular meetings, shared reporting, and exchange of patient care information in order to optimize the collaborative practice model with Beckman Center for Mental Health.	Dr. Locke Simons	Implemented under the oversight of the Director of Behavioral Health.
7.a	Ensure that facilities and services in the Clinton area of Laurens County are able to meet current demand and future growth.	Adopt a coordinated approach to addressing Objectives 4.c and 5.c that also considers capacity for family medicine and the long term viability of LC4 lease arrangement.	Paul Grogan	Planning for Laurens/Clinton relocation and expansion projects is not anticipated to begin until early 2023.
8.a	Enhance support services to patients and families with special needs and chronic disease, as well as families needing assistance navigating the health care system.	Develop peer support models for patient and family support and to enhance work with vulnerable populations.	Brooke Holloway	No activity to report. Priority for upcoming quarter,

9.a	Maintain an optimal workforce to meet current patient care and business need and position the organization for future growth and expansion of services.	Develop and implement plans with the educational system (including residency training programs) to educate, engage, and secure commitments from potential future employees.	Brooke Holloway	Implemented educational stipend model for recruiting residents in their 3rd year. HR is working with education programs to identify opportunities to engage with students. Support for current employees seeking to advance their education while remaining at CHC is approved on a case by case basis, the terms of which are specific to the situation and approval contingent upon the employee's past performance.
9.b		Implement activities that provide a learning environment and promote the active engagement of the workforce at all levels in fostering an equitable, inclusive, and respectful workplace.	Brooke Holloway and Miriam Ferguson	Initial focus groups conducted and full staff survey completes (a summary of the results will be presented to the BOD at their February 21, 2022 meeting). DEI Workgroup has been formed.
10.a	Maintain a corporate culture and a corresponding public profile that positions CHC as a patient centered organization that is a great place to work.	Conduct a triennial employee experience survey and develop a response plan and follow up communication plan based upon the findings.	Sue Veer and Brooke Holloway	Decision was made to delay the employee experience survey pending the decline of COVID19 stress factors. It is felt that the pandemic related stress factors (short staffing, increased demand, required compliance with the vaccine mandate, etc.) will result in special case variation in the results. Survey will be updated to include 2-3 questions assessing the impact of the PHE on staff experience and open for employee input prior to the end of the 2nd quarter CY 2022.
10.b		Conduct regular reviews of online Patient Experience Survey and maintain surveillance of social media outlets to identify opportunities for improvement as well as public relations testimonials	Brooke Holloway	Ongoing with monthly reports provided to senior leadership and evaluated for improvement opportunities as well as staff recognition.
11.a	Ensure the uninterrupted continuation of governance and leadership	Expand recruitment of prospective board members to include public advertising and direct solicitation of candidates from business and civic organizations that represent identified demographics or skill sets.	Sue Veer	Addition of two board members from McCormick County with New Board Member Orientation conducted on February 15, 2022. Recruitment for additional board members continues.
11.b		Continue the development of planned and emergency leadership transition plans for the senior management team and other key leaders.	Sue Veer	All senior leaders have submitted an emergency transition plan (CEO's is maintained by HR). Plan remain in pace to conduct an objective leadership assessment and compile a comprehensive CHC leadership profile.
12.a	Maintain the <b>resources and</b> infrastructure necessary for current business operations and to position the organization for continued growth and development.	Provide necessary upgrades to facilities and equipment to support access, quality, and operational effectiveness.	Miriam Ferguson and Paul Grogan	On going based on needs identified and resources available.

12.b		Implement and maintain state-of-the -industry technology that enables responsiveness to emerging standards of patient care and supports efficiency and effectiveness of operations.	Miriam Ferguson	The IT staff have been realigned under a Director of Information Technology who reports to the Chief Operations Officer.
				The Strategic and Program Planning Committee will collaborate with the Finance Committee on the development of objectives related to financial performance and sustainability.