



**ANDERSON VALLEY HEALTH CENTER
STRATEGIC PLAN 2016-2021**



Anderson Valley Health Center Strategic Plan: March 2016 – March 2021

OUR SHARED VISION

Our Shared Vision is to use creative and innovative ways to

- Be financially healthy and to have the ability to expand and grow by creating new and sustainable revenue sources
- Be a part of and understand the needs of our diverse community
- Provide integrated personalized health care to support well-being and happiness
- Coordinate our services within the community using an holistic approach
- Deliver nationally recognized healthcare that our patients can trust

OUR MISSION

Our mission is to provide excellent and affordable care to the community of Anderson Valley

OUR VALUES

- AVHC is integral to the health of our community.
- Services are accessible, available, and affordable - no one is turned away.
- Access to high-quality health care is a right and a responsibility.
- The staff of AVHC is one of our most valuable assets.
- Services are delivered in a supportive, safe, non-judgmental manner, stressing patient involvement and responsibility, health education, counseling and preventative health care in all programs and services.
- Services at AVHC are of the highest quality, up to date and responsive to the individual needs of our patients in their homes or at the health center.
- AVHC services are responsible, adaptable to a diverse community and are culturally and linguistically appropriate.
- AVHC maximizes financial resources.

RESOURCES

AVHC Staff and Board; Anderson Valley community; Federal and Local grants; current cash reserve

OVERALL STRATEGY

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Summary of strategic planning process

In early 2016, the Anderson Valley Health Center (AVHC) Board and staff agreed to embark on creating a strategic plan for the next 3 - 5 years. In order to better understand how they could serve the community they hired a professional facilitator, Lori Lewis of Chaordic Balance, to guide the group in developing a comprehensive roadmap. The group early on identified the desire and need to engage the general Anderson Valley community and incorporated that into the process.

On Thursday March 31st, 2016 the community was invited to meet with the Board and staff in a public forum. A World Café format was used, i.e., small groups gathered at tables to discuss key questions (e.g., How has having a local health center made difference in your life? What has worked or not worked and what could “better” look and sound like?). Approximately forty five people attended.

On the following weekend, April 2th and 3rd the AVHC Board and key staff met for a two day strategic planning retreat to build upon and discuss the ideas and thoughts shared at the community event. In order to better understand some of the overarching issues and ideas, the Board invited several key community representatives to participate Saturday morning in more detailed conversations. There were between 20-25 people who participated on Saturday morning.

The group looked forward five years (2016-2021). They considered their organizational past history and learnings and current internal and external factors. These shared understandings allowed them to identify a shared vision to work towards over the next five years; five key strategic directions to focus on over the next 1-3 years; and strategies for each strategic direction that can be implemented over the next 1-2 years. Using this incremental approach, the group will use these strategies and other action plans (to be developed as needed) to help them identify the tasks needed to move forward and achieve steady progress.

Integration of Strategic plan

The following steps will assist in integrating the strategic plan and working towards our vision while remaining flexible and proactive

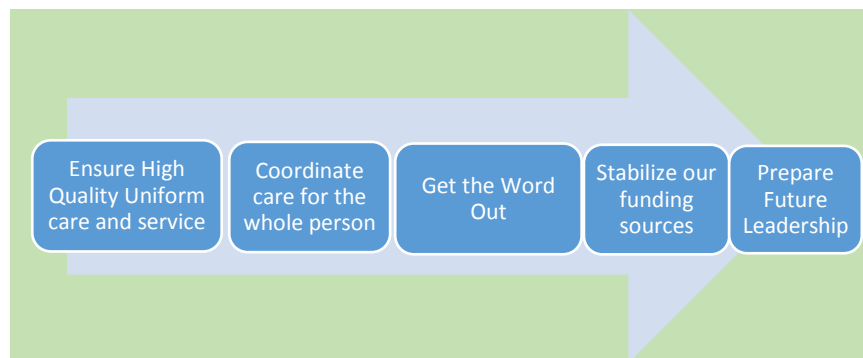
- Share the general plan and check for alignment with overall goals and needs
 - with the staff (in May/June 2016) eliciting input and buy-in
 - with the community (in June 2016) to provide results of the community event and subsequent retreat
- Institute monthly and quarterly updates on the specific strategies (by committees as appropriate). Each strategic direction and associated strategy is “owned” by a specific committee. The Board Chair and Executive Director will jointly oversee this process.
- Annually review the plan, check for progress and adjust strategic directions and strategies as needed.
- Conduct a more thorough strategic planning session in 2020-2021 or as needed.

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Understanding OUR CURRENT REALITY

| What supports us in achieving our vision? | What stands in the way from achieving our vision? |
|--|---|
| <p>Internally (“Our Strengths”)</p> <ul style="list-style-type: none"> • Staff are committed, locally based and part of the community • We have links to outside (of Anderson Valley) health community • We provide excellent care and patients have a high level of satisfaction • Strong community support and response • Strong and knowledgeable leadership (Board and ED) | <p>Internally (“Our Weaknesses”)</p> <ul style="list-style-type: none"> • Lack of succession plan for staff and providers • Do not have established training program for staff (e.g., customer service, leadership, upward mobility) • Procedures are not always documented or followed through consistently • Still dealing with past issues (e.g., billing, “shake-up”, etc.) • Have limited physical space to expand • Do not have full bilingual capability (e.g., providers and RNs) |
| <p>Externally (“Our Opportunities”)</p> <ul style="list-style-type: none"> • Strong community support • Increased opportunities to look for funding and support (e.g. wineries, medical cannabis, other internship programs, etc.) • Community wants additional services, including stronger link with exercise • Increase in local population (Spanish speaking) who need health care | <p>Externally (“Our Threats”)</p> <ul style="list-style-type: none"> • Unpredictable funding sources (e.g., grants, AmeriCorps project, etc.) • National push towards consolidation of health providers/clinics • Aging community requires expanded/different services • Rural health clinics do not have as much influence and small clinics have harder time meeting FQHC program requirements • Current political climate and health care discussions • Vulnerable to large scale emergencies |

Looking towards our future – OUR STRATEGIC DIRECTIONS



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STRATEGIC DIRECTIONS AND STRATEGIES

In addition to our ongoing work of providing excellent and affordable care to the community of Anderson Valley, the AVHC Board and Executive Director will use the identified strategic directions to guide their work and decisions

| Strategic Direction #1- Ensure High Quality Uniform care and service | | | | | |
|--|---|---------------------------------|---|---|--------|
| <i>Lead – Program Improvement Committee</i> | | | | | |
| TASKS/PROJECTS | ACTIONS/DELIVERABLES (see specific action plans for additional detail) | TIMELINE | LEAD | MEASUREMENT OF SUCCESS | STATUS |
| 1. Complete training and Implement LEAN principles within organization (HC & Board) | | | | | |
| | a. Arrange/Attend LEAN training (for ED, Staff & Board) b. Organize LEAN book club c. Engage PI committee d. Develop plan for implementing LEAN e. Identify LEAN mentors f. Identify & Implement key LEAN events | 1 year 6-8/16 9-12/16 | Chloe, Drew Drew PI Committee | <ul style="list-style-type: none"> Clinic leadership/ staff is LEAN trained | |
| 2. Identify/ Implement key metrics of improvement | | | | | |
| | a. Develop action plan for engaging staff, board and community. Identify roles & responsibilities b. Identify metrics and implement departmental rounding for transparent monitoring of progress | | ED, MD, Board(PI), staff | <ul style="list-style-type: none"> Identify key metrics of improvement Develop plan for tracking data/metrics | |

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|---|---|-----------------|--|---|---------------|
| <i>Lead – Program Improvement Committee</i> | | | | | |
| TASKS/PROJECTS | ACTIONS/DELIVERABLES (see specific action plans for additional detail) | TIMELINE | LEAD | MEASUREMENT OF SUCCESS | STATUS |
| 3. Follow current performance improvement plan | | | | | |
| | <ul style="list-style-type: none"> a. Ensure clinic workplan is implemented (e.g., follows current action items) b. Monitors externally and provides additional support and expertise | Ongoing | Chloe and PI Committee PI Committee | <ul style="list-style-type: none"> • Plan is in place and being implemented • Integration with staff capacity and leadership training • Clinic policies & procedures are updated/implemented | |
| 4. Integrate “ongoing improvements” into our culture | | | | | |
| | <ul style="list-style-type: none"> a. Develop and document workflows b. Monitor progress through transparent monitoring processes | 2 years | ED/TBD | | |

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| Strategic Direction #2- Coordinate care for the whole person | | | | | |
|--|--|--|--------------------------------|---|--------|
| <i>LEAD – Staff Coordination and Care Committee (SCCC)</i> | | | | | |
| TASKS/PROJECTS | ACTIONS/DELIVERABLES (see specific action plans for additional detail) | TIMELINE | LEAD | MEASUREMENT OF SUCCESS | STATUS |
| 1. Get our Patient Centered Medical Home (PCMH) designation | | | | | |
| | a. Make workplan and timeline for achievement of PCMH designation b. Identify data needs & collect data c. Write policies d. Complete other necessary tasks e. Put package proof together f. Submit package | 1 year 7/16 4/16 8/16 9/16 10-11/16 12/16 | Mark, Fabi Jason Mark | <ul style="list-style-type: none"> Develop and implement policies and procedures Have (PCMH) designation | |
| 2. Increase communities access to additional resources | | | | | |
| | a. Train team (e.g., health coaches) – focus on nutrition and exercise b. Increase access to fitness opportunities/development Identify Health center staff to liaison and identify agencies and contact and alternative health care modalities c. Develop a plan to replace AmeriCorps service. (work with AVUSD) | Ongoing | Chloe, Kathy Cox | <ul style="list-style-type: none"> Begin Health Coach Program Visit senior center lunch monthly AVHC has established relationships with County social service agencies | |
| TBD | d. Explore creating a coalition to coordinate programs for healthy kids | 2-3 years | | <ul style="list-style-type: none"> Present to board for feasibility | |

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| TASKS/PROJECTS | ACTIONS/DELIVERABLES (see specific action plans for additional detail) | TIMELINE | LEAD | MEASUREMENT OF SUCCESS | STATUS |
| | e. Hold an outreach event. Coordinate with Marketing Committee. | TBD/ annually | | <ul style="list-style-type: none"> Hold two events annually | |
| 3. Ensure internal coordination | | 1 year | | | |
| | a. Identify coordination between medical, dental and behavioral departments b. Improve electronic communication with UVMC and our clinic (Logan and Cindy have hospital logins) | TBD | TBD | See LEAN measurements | |
| 4. Use best practices in community | | | | | |
| | a. Staff attends health coach training | 2-3 years | | <ul style="list-style-type: none"> 20% decrease in patients with A1C (diabetes control) greater than 9 10% decrease in patients w BMI greater than 30 (BMI considered normal up to 30) | |

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| Strategic Direction #3- Get the Word Out | | | | | |
|--|--|--|--------------|--|--------|
| <i>Lead: Marketing Committee (MC)</i> | | | | | |
| TASKS/PROJECTS | ACTIONS/DELIVERABLES (see specific action plans for additional detail) | TIMELINE | LEAD | MEASUREMENT OF SUCCESS | STATUS |
| 1. Identify and create an marketing committee | | 1 year | | | |
| | <ul style="list-style-type: none"> a. Identify and invite potential marketing committee members (e.g., Board, staff, Community,) b. Identify a member of the AVHC board fundraising committee to join marketing committee c. Hold first meeting | <p>4/16</p> <p>5/16</p> | Ivan, Teresa | <ul style="list-style-type: none"> • Marketing committee established and meeting regularly | |
| 2. Identify and contact potential groups | | | | | |
| | <ul style="list-style-type: none"> a. Identify first group businesses and organizations for potential presentations. b. Appoint someone to write letter/contact; Write letter to targets c. Follow-up with phone calls to confirm presentations d. Identify hard to reach populations and develop strategies for reaching them | <p>5/16</p> <p>5/16</p> <p>6/16</p> <p>8/16</p> <p>2-3 years</p> | MC | <ul style="list-style-type: none"> • List of groups to give presentations (e.g., schools - parents and teachers, community organizations, Brewery, Mill, Buckhorn, etc.) • Meet with 80% of community groups | |

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| Strategic Direction #3- Get the Word Out | | | | | |
|---|---|----------|------------|--|--------|
| <i>Lead: Marketing Committee (MC)</i> | | | | | |
| TASKS/PROJECTS | ACTIONS/DELIVERABLES (see specific action plans for additional detail) | TIMELINE | LEAD | MEASUREMENT OF SUCCESS | STATUS |
| 3. Prepare presentation materials | | | | | |
| | a. Identify key educational points to preserve | 5/16 | MC | | |
| | b. Develop PowerPoint and pamphlet | 6/16 | | | |
| | c. Hold meeting to practice presentations | | | | |
| 4. Meet and Present | | | | | |
| | a. Work with internal clinic outreach committee to conduct presentations at vineyards | 7-8/16 | MC | Meet with 6 community groups to present AVHC | |
| 5. Ensure our ongoing communications | | | | | |
| | a. Add phone message to wait time | | TBD | | |
| 6. Connect with other ongoing work | | | | | |
| | a. Meet with other board committees and staff | | MC | | |

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| Strategic Direction #4- Stabilize our Funding Sources | | | | | |
|--|---|----------------------|------|---|------------------------------------|
| | | | | | Lead – Fundraising Committee (FRC) |
| TASKS/PROJECTS | ACTIONS/DELIVERABLES (see specific action plans for additional detail) | TIMELINE | LEAD | MEASUREMENT OF SUCCESS | STATUS |
| 1. Establish Fundraising committee | | 1 year | | | |
| | a. Identify committee members of prospects b. Call Bill S and Brad W c. Set up committee meeting | 4/16 4/16 6/16 | | Fundraising committee established and meeting regularly | |
| 2. Create fundraising plan | | | | | |
| | a. Write draft plan b. Review and get approval c. Implement plan | 8/16 | FRC | Fundraising plan written and approved by Board | |
| 3. Pay off Mortgage | | | | | |
| | a. Create committee to explore options for and develop a plan for paying off mortgage b. Present to Board and get approval | 1 year | FRC | Committee established and begin implementing plan | |
| | | 3 years | | Mortgage paid off | |

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| Strategic Direction #4- Stabilize our Funding Sources | | | | | |
|---|--|-----------|------|--|------------------------------------|
| | | | | | Lead – Fundraising Committee (FRC) |
| TASKS/PROJECTS | ACTIONS/DELIVERABLES (see specific action plans for additional detail) | TIMELINE | LEAD | MEASUREMENT OF SUCCESS | STATUS |
| 4. Establish Endowment fund | | | | | |
| | a. Identify a plan for establishing an endowment | 1-3 years | FRC | Endowment fund established and contributions started | |
| 5. Establish partnerships with other foundations, donors, etc. | | | | | |
| | a. Identify key donors and foundations b. Integrate partnership strategy into fundraising plan (as appropriate) | 1 year | FRC | | |

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| Strategic Direction #5- Prepare Future Leadership | | | | | |
|---|---|----------|-------------|--|--------|
| Lead – Board Development and Governance Committee (BDGC) | | | | | |
| TASKS/PROJECTS | ACTIONS/DELIVERABLES (see specific action plans for additional detail) | TIMELINE | RESOURCES | MEASUREMENT OF SUCCESS | STATUS |
| 1. Ensure smooth transition of medical leadership and continuity of services to patients | | | | | |
| | <ul style="list-style-type: none"> a) Develop general succession plans for providers and staff b) Develop and implement succession plan for medical director c) Reactivate search committee to be used for any new openings | 1 year | BDGC | <ul style="list-style-type: none"> • Recruitment plan for future medical director | |
| 2. Develop staff capacity, capability and leadership | | | | | |
| | <ul style="list-style-type: none"> a. Identify ways to communicate and engage staff in Strategic planning efforts b. Provide leadership training for key staff <ul style="list-style-type: none"> I. Provide staff with LEAN training and identify next steps c. Promote additional learning opportunities for staff | | | | |

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| Strategic Direction #5- Prepare Future Leadership | | | | | |
|--|--|----------|-----------|--|--------|
| Lead – Board Development and Governance Committee (BDGC) | | | | | |
| TASKS/PROJECTS | ACTIONS/DELIVERABLES (see specific action plans for additional detail) | TIMELINE | RESOURCES | MEASUREMENT OF SUCCESS | STATUS |
| 3. Ensure healthy and sustainable Board. | | | | | |
| | a) Develop plan for Board recruitment (e.g. Members and leadership roles). b) Develop Board Leadership and succession plan c) Develop message for community engagement and involvement d) Recruit people to serve on board committees and develop into Board members e) Increase diversity of board members f) Identify opportunities to build community and make our work together fun | | | <ul style="list-style-type: none"> Board recruitment plan in place Successful transition to new Board leadership | |
| 4. Support ED in building capacity | | | | | |
| | a. Support Chloe in working with CLI institute | | Board | | |

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| Strategic Direction #5- Prepare Future Leadership | | | | | |
|---|---|---|--|------------------------|--------|
| Lead – Board Development and Governance Committee (BDGC) | | | | | |
| TASKS/PROJECTS | ACTIONS/DELIVERABLES (see specific action plans for additional detail) | TIMELINE | RESOURCES | MEASUREMENT OF SUCCESS | STATUS |
| 5. Incorporate Strategic plan into ongoing work, discussions and decisions | | | | | |
| | <ul style="list-style-type: none"> a. Review and revise draft strategic plan b. Present “finished strategic plan to staff c. Review strategies and identify additional action steps d. Present strategic plan summary to community e. Review strategies monthly/quarterly at committee and board meetings for progress updates f. Review plan annually for changes to strategic directions and strategies | <p>1 year</p> <ul style="list-style-type: none"> 5/16 5/16 5-6/16 6/16 | <ul style="list-style-type: none"> ED, BD Committees Board Committees Board and Staff | | |