We are dedicated to serving our community with integrity and exceptional quality care.

| | NHHS Strategic Plan 2024 | |
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| PATIENT EXPERIENCE | CULTURE OF TRUST & ENGAGEMENT | |
| NHHS 1st Choice Healthcare Provider Patient Experience Scores High Reliability Initiatives (Process Improvement) Patient Centered Focus | 7 Habits Culture Leadership Development Trust Stoff Experience | 1.Optimization2.Real Estate &3.Service Line E4.Budget & ETE |
| | 4. Staff Experience | 4. Budget & FTE |
| NHHS 1st Choice Healthcare Provider Marketing Signage – assessment due by 4/26 Website redesign – RFP by 2/1. Selected by 3/1. Go Live Dec. 2024 Surgical Expansion/Availability of specialty providers Referral analysis – outreach for surgeons by 6/1. Specialty provider outreach by 9/1. Accessibility Review Analysis Available service lines – identify metrics by 6/1 Patient Experience Scores Review of current provider move to NRC – Review of current contract 3/31. Rollout NRC Q2/Q3 (Go Live 8/1) Customer Service training for frontline staff – assessment by 4/30. Joseph will work with direct patient facing departments and specify for each. 100% completed training by 11/30. | 1. 7 Habits Culture Continued training of 7Habits for those who have not yet attended – Goal 140 Develop a plan to onboard new hires with 7 Habits by 3/31. 128 of 140 Identify 7Habits/Trust coach in each department. Identify by 5/1 Coach the coaches by 6/1 7 Habits renewal/reinforcement plan for staff – develop plan by 6/30 – immediate rollout. 2. Leadership Development 4DX Training Executives by 1/30 Managers by 2/28 Metrics – provide feedback monthly at Leadership meeting. Development Plans Utilize Hogan assessment then meet with and create plans with each leader/manager Begin – 5/6 and to be Completed by 8/30 Trust | Continuing w Standardizating training composition Standardize coding & Identify by 3/ Implement by Provider Education HCC/UR –staff training to a state a s |
| 1/1/2025 3. High Reliability Initiatives (Process Improvement) Hospital & Clinic Telephone Call Operators - management improvement – Assessment by 3/31. Recommendations 4/30. Implementation by 7/1. Seebers POS System Go live 12/1. Referral Process Documentation & Training – completed by 12/1. 4. Patient Centered Focus Aging Community Education – Convene Rural Aging Committee by 1/31. Speaker Series 3/30. Hold 2 Events by 11/30. Establish a Patient & Family Advisory Committee by Aug 15, 2024. | Identify 7Habits/Trust coach in each department. Identify by 5/1 Coach the coaches by 6/1 Quarterly Town Halls (all staff) – 1 each quarter starting by 3/1, series to be completed by 11/30. 4. Staff Experience Safe place to work analysis Security guard supervisor hired by 3/31 Analysis of safe environment HRIS (UKG) – rollout 6/19 Employee, payroll & scheduling modules implemented by 7/1 | Assessment of Call House Refresh/ |
| Care Coordination and integration of case management hospital & clinic (for review in 2025) 4 quarterly meetings with UR by 11/30 Explore lab services in clinic – recommendation report by 3/31 | Progress | Right person right rol Candid convert Manager financial 1:1 Benchmark FTE – dor |

Vision: Sustaining independence by delivering innovative and excellent, life-long healthcare. Values: At NHHS, we provide exceptional CARE: Compassion, Accountability, Respect, Excellence. SUSTAINABILITY on/Understanding Coding & Reimbursements & Plant Management e Exploration/Expansion TE Accountability

otimization/Understanding Coding & Reimbursements ent Process

weekly meetings.

tion of UR/Case management processes – identify by 7/1, nplete by end of 11/30

& billing reference materials by 3/14. (HC Pro Training) 3/14 by 3/17

f to address coding at RHC monthly starting 4/1 de Clinic, Rehab, Imaging, ACU/ED/OB procedure location

& Plant Management

kpansion ity due by May Finance Committee ew at May board meeting.

Demo – by 6/30 t of Parking lot Expansion – by 10/31 'Repaint plan by 4/30 done by 7/30

sessment – initial review by 8/1 (RFQ posted to The Miner & erviewed and selected Architect firm – Blue Room

Exploration/Expansion/Revision Plan

nendation exploration by 6/30 Therapy Expansion by 4/30 (Installation of PFT 12/1) use by year end. one by 12/1/23. Presented to Board for approval at 1/24 board taffing Model recommendation by 4/1. **TE Accountability**

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versations about right person right role .:1 training – to be completed 100% by 11/30 one by 5/31

