

ST. THOMAS EAST END MEDICAL CENTER CORPORATION STRATEGIC PLAN: FY2023-FY2025

This Strategic Plan lays out the St. Thomas East End Medical Center Corporation's strategic priorities and pathway to achieving those priorities to be the premier center of excellence, providing high quality health care, wellness, and management programs to the community.

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Acknowledgements

The successful completion of this strategic plan is the result of collaboration across a number of persons and groups to include STEEMCC's Board of Directors, Chair, Ms. Francia Brin, STEEMCC's leadership team, Executive Director Mr. Moleto Smith, STEEMCC staff members – both clinical and administrative, the Core Strategic Planning Group (listed below), members of the four Work Groups (*See Appendix I*), as well as primary, secondary, and key stakeholders who provided valuable feedback during the Virtual Town Hall meetings. The Core Strategic Planning Group met almost weekly, over the course of four and a half months and members of the various Work Groups met bi-weekly over the course of six to eight weeks.

Further, efforts to engage a broad cross-section of stakeholders could not have been successful without the able assistance of the Director and key staff who ensured that information regarding Virtual Town Hall meetings was shared with the media and also facilitated sessions with STEEMCC staff as well as with broader stakeholder groups. Special recognition to members of the CERC team for their diligence and unwavering engagement and contributions during the strategic planning process. Of note is the contribution of student research assistant Ariana Athanase with the environmental scan research process, the development of key graphics and tables in support of the market assessment element of the Environmental Scan, and other elements of the strategic plan.

Members of the CORE STRATEGIC PLANNING GROUP

Name	Agency	Role
Gloria B. Callwood	St. Thomas East End Medical Center (STEEMCC) Board of Directors	Vice Chair
Lisa M. Corneiro	STEEMCC	Executive Administrative Assistant
René D. Crawford	STEEMCC	Executive Assistant for Policy and Administration
Mario A. Francis	STEEMCC Board of Directors	Chair, Human Resources Committee
Noreen Michael	University of the Virgin Islands Caribbean Exploratory Research Center (UVI-CERC)	Research Director/Project Director
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Moleto A. Smith, Jr.	STEEMCC	Executive Director (ED)

Message to STEEMCC Stakeholders – Board Chair



STEEMCC Board of Directors

“Your Health is our **First** Priority”

November, 2021

The St. Thomas East End Medical Center Corporation (STEEMCC) Three Year Strategic Plan has been developed with the broad involvement of the Board of Directors, the Executive Leadership Team and Staff of STEEMCC and the University of the Virgin Islands' Caribbean Exploratory Research Center (UVI-CERC).

STEEMCC places the utmost importance on being proactive in contributing to a healthy future for all residents and visitors alike. We must pause intermittently and gauge where we are in remaining responsive and relevant to meeting the health needs of the community. Hence, strategic planning helps us to assure this happens and contributes to organizational stability, expansion and growth.

The Strategic Plan serves as a road map to point the way forward with a refreshing look at our vision, mission, goals, objectives, strategies and timetables to obtain the set desirable outcomes and meet expectations. Where there are weaknesses, they will be strengthened, where there is a need for improvement, strategies are identified and will be applied, where there is a need for the expansion of services, we will continue to work diligently to identify and offer an array of choices for patient care.

The Board believes that with a core mission to improve the lives of our clients driven by a culture of high quality performance and accessibility, we will continue to transform lives especially after having experienced two catastrophic hurricanes and a world-wide pandemic that disrupted and displaced families and lives. We are overcomers!

I wish to commend the planning process coordinated by a Core Strategic Planning Group (CSPG) which held weekly strategic sessions and bi-weekly Progress Updates for the Board of Directors, via Zoom. Needless to say, the process led to an intensive schedule of assignments, required readings, designated research, and mandated feedback from internal as well as external stakeholders. All the efforts of those involved have been invaluable and their time, effort and hard work is sincerely appreciated by the Board of Directors.

Let us all use this strategic plan to propel us forward along with the great talents, strengths and potentials of the health center staff and to work collaboratively with our partners to optimize and reform health care to the benefit of us all, now and in the future.

Respectfully yours,

Francia M. Brin, BS, MPA
Chair, Board of Directors

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Message to STEEMCC Stakeholders – Executive Director



Remarks from Moleto A. Smith Jr, Executive Director

The St. Thomas East End Medical Center Corporation (STEEMCC) is dedicated to providing high quality preventative health care to every patient, while supporting research, innovation, collaboration, community engagement and a passionate and highly trained workforce.

While the Territory continues to recover from the catastrophic impact of the two (2) Category 5 Hurricanes Irma and Maria occurring in 2017, all of us are grappling with the adverse impact that the COVID-19 Global Pandemic is having on families, the community at large and the health care infrastructure. Needless to say, today's health care environment is evolving constantly -- both globally, nationally, regionally and otherwise. In order to stay ahead of the constantly evolving health care curve, it is imperative that STEEMCC continues to be strategic in its planning, while fluid in its approach.

With the support and expertise of the University of the Virgin Islands Caribbean Exploratory Research Center (UVICERC), as well as the collaboration and participation of our Board of Directors, leadership team, managers, staff, community stakeholders and others, this document is evidence of our commitment to doing these things. Important to note is that this three (3) year strategic plan is a living document that will help to serve as a framework for furthering the health center's ability to meet patients wherever they may be on the preventative medical, mental and oral health and wellness spectrum, particularly in a post-COVID-19 Global Pandemic world.

As we collectively prepare for a post-COVID-19 health care delivery environment, I am confident that STEEMCC will implement this strategic plan to assist our patients with meeting their health care needs, including managing chronic diseases, such as hypertension and diabetes, as well as addressing behavioral health and other emerging needs.

On behalf of the health center's staff, including its leadership and management teams, I thank the UVICERC for supporting and guiding the strategic planning process from beginning to end. I also thank the health center's staff for actively and energetically participating in all aspects of the process. Special thanks are also in order to our community stakeholders, as well as to the STEEMCC Board of Directors, for supporting this exciting work.

I encourage you to read it. Share it. Use it.

Sincerely,

Moleto A. Smith Jr.
Executive Director

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Abbreviations/Acronyms

ABBREVIATION/ACRONYM	DESCRIPTION	APPEARS FIRST ON PAGE No.
AARP	American Association of Retired Persons	25
ADP	Automatic Data Processing, Inc.	14
AHRQ	Agency for Healthcare Research and Quality	33
BOD	Board of Directors	1
BPHC	Bureau of Primary Health Care	34
C&P	Collaborators and Partners	21
CCQAO	Clinical Compliance & Quality Assurance Officer	15
CDC	Centers for Diseases Control and Prevention	8
CFO	Chief Financial Officer	27
CFVI	Community Foundation of the Virgin Islands	28
CHC	Community Health Center	13
CHNA	Community Health Needs Assessment	1
CLAS	Culturally and Linguistically Appropriate Services	33
CSPG	Core Strategic Planning Group	1
DAP	Disparities Action Plan	35
ECRI	Emergency Care Research Institute	33
ED	Executive Director	i
EHR	Electronic Health Record	16
FHC	Frederiksted Health Care	21
FQHC	Federally Qualified Health Center	13
GVI	Government of the Virgin Islands	25
IDP	Individual Development Plan	13
IT	Information Technology	16
MOA	Memorandum of Agreement	8
NACHC	National Association of Community Health Centers	33
NAMI	National Association of Mental Illness	25
PPEP	Program Performance Evaluation Plan	38
PR	Public Relations	21
SES	Socio-economic status	15
SP	Strategic Plan	2
STEEMCC	St. Thomas East End Medical Center	i
SWOT	Strength, Weaknesses, Opportunities, and Threats	7
UVI-CERC	University of the Virgin Islands Caribbean Exploratory Research Center	i
UVI-SON	University of the Virgin Islands School of Nursing	4
VA	U.S. Department of Veterans Administration	25
VIBOC	Virgin Islands Bureau of Corrections	4
VIDE	Virgin Islands Department of Education	4
VIDHS	Virgin Islands Department of Human Services	4
VIDOH	Virgin Islands Department of Health	4
VIDOL	Virgin Islands Department of Labor	4
VIHA	Virgin Islands Housing Authority	4
VITRAN	Virgin Islands Transit	25
WHO	World Health Organization	vi

Glossary of Terms

TERM	DEFINITION
Culture	The integrated pattern of thoughts, communications, actions, customs, beliefs, values, and institutions associated, wholly or partially, with racial, ethnic, or linguistic groups, as well as with religious, spiritual, biological, geographical, or sociological characteristics. Culture is dynamic in nature, and individuals may identify with multiple cultures over the course of their lifetimes [National CLAS Standards, 2013, p. 3].
Cultural Competency	A developmental process in which one achieves increasing levels of awareness, knowledge, and skills along a continuum, improving one's capacity to work and communicate effectively in cross-cultural situations. [Definition retrieved from CLAS, Cultural Competency and Cultural Humility (hhs.gov)]
Health	Encompasses many aspects, including physical, mental, social, and spiritual well-being (HHS Indian Health Service, undated; HHS Office of the Surgeon General and National Action Alliance for Suicide Prevention, 2012; World Health Organization [WHO], 1946). The World Health Organization also notes that health is “not merely the absence of disease or infirmity” (WHO, 1946) [As quoted in the National CLAS Standards, 2013, p.3].
Health disparity	Preventable differences in the burden of disease, injury, violence, or opportunities to achieve optimal health that are experienced by socially disadvantaged populations. (CDC)
Health equity	Everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care – (Robert Wood Johnson Foundation).
Health inequity	Systematic differences in the health status and outcomes of different population groups. These inequities have significant social and economic costs both to individuals and societies. (WHO)
Person-centered care	<p>“Person-centred care means treating patients as individuals and as equal partners in the business of healing; it is personalised, coordinated and enabling” [p.114] (Coulter, A., & Oldham, J. (2016). Person-centred care: What is it and how do we get there? <i>Future Hospital Journal</i>, 3(2), 114–116. https://doi.org/10.7861/futurehosp.3-2-114)</p> <p>Four principles undergird person-centered care: 1) the person is treated with dignity, compassion, and respect; 2) care is personalized; 3) care is coordinated; and 4) care is enabling (https://aicasemanagement.com/person-centred-care-principles-definitions-examples/)</p>

Description of the Strategic Planning Process

The St. Thomas East End Medical Center Corporation's (STEEMCC) strategic planning process reflected an inclusive approach which began in June 2021 and culminated in November 2021. Organized around a Core Strategic Planning Group (CSPG) the strategic planning work was grounded in the STEEMCC 2020 Community Health Needs Assessment (CHNA) which was completed by the University of the Virgin Islands' Caribbean Exploratory Research Center (UVI CERC) over a nine-month period. The strategic planning process was informed by *The Community Tool Box*, a service of the Center for Community Health and Development at the University of Kansas (<http://ctb.ku.edu><http://www.communityhealth.ku.edu/>) and *Creating a Dynamic and Useful Strategic Plan: A Toolkit for Health Centers*, a publication developed by Capital Link (www.caplink.org).

The CSPG was formed with membership from STEEMCC and UVI CERC. Working meetings were held weekly and outputs from the CSPG working sessions were presented to the STEEMCC leadership through bi-monthly Progress Update meetings for review, input, and concurrence. Also, members of the STEEMCC leadership team and members of the STEEMCC Board of Directors (BOD) engaged in a self-assessment activity that was used to inform several elements of the strategic plan, including the identification of strategic priorities. A summary of the self-assessment is incorporated as Appendix III (separate document). The CSPG also completed an environmental scan and outputs of that process served to inform the development of strategic priorities and other elements of the strategic plan. Stakeholders were provided an opportunity to share feedback on the environmental scan outputs. The final environmental scan is included as Appendix IV (separate document) and the related Impact Evaluation is included at Appendix V (separate document).

In addition to the CSPG, four work groups were formed to engage STEEMCC personnel and STEEMCC Board of Directors (BOD) members in the development of strategic objectives and work plans. These work plans operationalize approaches to achieving the strategic goals and priorities identified as focus areas for the strategic plan. The work groups formed around the four strategic priorities met weekly or twice weekly between mid-September and early November.

Additionally, two sessions were held with STEEMCC staff during “all staff” professional development days. During these sessions, staff members had an opportunity to provide input on all key elements of the strategic plan (SP). Additionally, two sessions were scheduled for all BOD members to present elements of the strategic plan to solicit feedback. At both meetings, members of the BOD present affirmed their support for the key elements of the strategic plan. Based on feedback from STEEMCC internal stakeholders, updates were made to the strategic plan document.

To ensure that all stakeholder groups had opportunities to provide feedback on the strategic plan document, three virtual town hall meetings were convened during the second and third weeks of November (11/10; 11/16; and 11/17) to provide other key stakeholder groups an opportunity to weigh in and provide feedback on the penultimate version of the strategic plan. Key STEEMCC and project staff participated in three live radio sessions during which information was shared about the virtual town hall meetings and appeals were made for stakeholders to participate in one of the three sessions to provide feedback on key elements of the strategic plan.

Over the course of the three Virtual Town Hall meetings, participants representing all stakeholder groups – primary, secondary, and key stakeholders, attended the sessions. The overwhelming majority of participants supported the key elements of the strategic plan presented – from the vision and mission statements to strategic goals and objectives in support of the strategic priorities delineated for the strategic plan, as well as the proposed strategies, action steps, performance measures, indicators of progress, and desired outcomes. Summaries of stakeholder feedback from the staff sessions and the Virtual Town Hall meetings are included as *Appendix II*.

The final strategic plan reflects consideration of the feedback received from primary, secondary, and key stakeholders over the course of the strategic planning process.

STEEMCC's Vision

To be the premier center of excellence, providing high quality health care wellness and management programs to the community.

STEEMCC's Mission

To provide comprehensive, high quality, accessible, affordable, and cost-efficient primary healthcare services, including patient education and involvement, community outreach, and research for a healthier community.

Stakeholder Members/Groups

CATEGORY	WHO SHOULD BE AND WILL BE ENGAGED?
Primary Stakeholders <i>Beneficiaries or targets of STEEMCC services</i>	STEEMCC patients <ul style="list-style-type: none"> • children • youth • adults • special populations
	Persons in the STEEMCC Catchment Area
Secondary Stakeholders <i>Persons directly involved with or responsible for beneficiaries or targets of STEEMCC services; persons whose jobs or lives might be affected by the strategic planning process or by STEEMCC services</i>	STEEMCC Board of Directors
	STEEMCC Employees <ul style="list-style-type: none"> • Providers • Leadership team • Management team • Line staff
	Healthcare collaborators/partners
	Interns/Preceptors/Emerging Professionals
	Legal Services of the Virgin Islands
	Social services collaborators/partners
	Youth/adolescent groups/organizations
Key Stakeholders <i>Government officials & policy makers; those who can influence others; those with an interest in the outcome of the strategic planning process and STEEMCC's service delivery activities</i>	Business community, particularly businesses in the STEEMCC Catchment Area
	Community-based Organizations
	Faith-based organizations
	Federal Partners
	Media
	Office of the Governor – Health Insurance Board
	Rotary Clubs
	Tutu Park Mall (STEEMCC Landlord)
	University of the Virgin Islands School of Nursing (UVI SON)
	Virgin Islands Department of Education (VIDE)
	Virgin Islands Department of Health (VIDOH)
	Virgin Islands Department of Human Services (VIDHS) <ul style="list-style-type: none"> • Disabilities, Vocational and Rehabilitation Services • Head Start • Medical Assistance Program
	Virgin Islands Bureau of Corrections (VIBOC)
	Virgin Islands Department of Labor (VIDOL)
	Virgin Islands Housing Authority (VIHA)

Note: Adapted from The Community Toolbox, Section 8. Identifying and Analyzing Stakeholders and their Interests, University of Kansas, Lawrence, KS

Core Operating Values

Ethics and Integrity

- Adherence to respect, honesty, confidentiality and transparency; maintaining the highest ethics and integrity worthy of our patients' and employees' trust.

Teamwork

- Encourage individual input, collaboration and empowerment of staff to benefit patient and fellow caregivers for the advancement of our mission.

Service

- We strive to exceed our patients and our fellow caregivers' expectations for comfort and convenience, while holding our Center accountable, for providing the best care for patients and their families.

Compassion

- Provide holistic, patient and family-centered care in a supportive and caring environment, while treating patients and caregivers with respect and dignity.

Innovation

- Welcome change and seek efficient, effective, and creative approaches to achieve our goals.

Equity and Inclusion

- We embrace diversity in perspectives, clients, staff, and other stakeholders and are committed to eliminating racial, ethnic, sexual orientation/identity, and other disparities in services provided by STEEMCC.

Core Beliefs – We Believe That

Access to high quality and affordable healthcare for every person is a basic human right.

High quality service through innovation, with equity and inclusion, is essential.

Every person should be treated with dignity and respect.

Truth is essential to productive relationships.

Every person deserves healthcare that promotes wellness.

Diversity should be embraced and celebrated.

Freedom of expression is encouraged.

Collaboration and teamwork make us stronger.

An environment that promotes a culture of trust, respect, collaboration, support, and excellence is essential.

Actively engaging in one's care is essential.

Health literacy is necessary for optimal health outcomes.

Community engagement is vital.

Healthy people have a better chance of successfully meeting life's challenges.

SWOT Analysis

This Strength, Weaknesses, Opportunities, and Threats (SWOT) Analysis provided the strategic plan development process undertaken by the STEEMCC with a summary of the positive and negative internal and external issues and conditions that are important in the selection and refinement of strategic goals and objectives. The SWOT also offers the reader or observer of the final strategic plan some understanding of the issues, perceptions and conditions that influenced and guided the final strategic goals and objectives.

The STEEMCC SWOT analysis is based on two inclusive approaches that provided opportunities for significant input from knowledgeable, key stakeholders. The STEEMCC 2020 CHNA, which took approximately nine months to complete, offers pertinent information on gaps, threats, and opportunities from a wide range of stakeholders in the Territory. This base was reviewed and extended by the discussions and decisions of the STEEMCC CSPG in June 2021. The information provided through the SWOT analysis has helped to anchor the STEEMCC Strategic Plan goals in activities designed to realize the center's vision and mission and to successfully position the organization to capitalize on the opportunities of the future.

IDENTIFIED STRENGTHS

- ✓ Responsiveness to recommendations of 2016 C²HNA as evidenced by the addition of a separate, dental health unit which provides dental services to pediatric and adult clients.
- ✓ Ongoing, incremental expansion of behavioral health providers and services available to clients.
- ✓ Expansion of non-clinical staff – Case Managers and Outreach Workers – to support clients as they navigate challenges and access needed secondary and tertiary care and related services.
- ✓ Expansion of pharmacy and laboratory services for clients.
- ✓ Providing care for an increased number of clients after disruptions associated with hurricanes in 2017 and despite difficult conditions of the recovery.
- ✓ Availability of services and informational campaigns supporting an increase in screenings for colorectal cancer and cervical cancer.
- ✓ Maintenance and expansion of agreements with key agencies within the V.I. Government and other medical facilities within and outside the Territory in support of mission fulfillment.
- ✓ Expanded focus on research on social and population health.
- ✓ Partnerships with local and academic institutions.
- ✓ Expansion in behavioral and mental health services including case management services.
- ✓ Qualifications and dedication of staff.

- ✓ Center's capacity to identify and secure funding to support programs and interventions, including funds for outreach, telehealth activities, implementation of Center for Disease Control (CDC) recommended infection control guidelines and staff development activities and for participation in the National Hypertension Control Initiative.
- ✓ Securing of funds and the identification of a location to erect a new facility for relocation of STEEMCC to better serve the expanded patient population.

IDENTIFIED WEAKNESSES

- ✓ Insufficient staff with language skills to meet growing communication needs of a diverse client pool.
- ✓ Need for targeted programs to address patient support for management of key chronic illnesses, such as diabetes, obesity, hypertension, HIV, cancer, and overall wellness.
- ✓ Minimally targeted services for adolescents.
- ✓ Clients' complaints regarding wait-time may signal the need for added providers as well as extended hours of service.
- ✓ Because of COVID-19 and social distancing requirements, existing space does not allow for the provision of targeted client services by Case Managers and Outreach Workers at the Health Center.
- ✓ Insufficient programs to provide special information and support needed for disease-management and wellness of children, adolescents, and geriatric clients (ages 65 and older).
- ✓ Insufficient staff.

IDENTIFIED OPPORTUNITIES

- ✓ Targeted collaboration with the public education system in the St. Thomas-St. John District to address identified health priorities for children and adolescents, particularly around behavioral health issues, the physical school environment for middle school and high school students, and nutrition education.
- ✓ New or expanded Memorandum of Agreements (MOAs) and collaborations associated with funding in support of hurricane recovery and resilience and climate change impact mitigation.
- ✓ Expansion of telehealth, outreach, and case management to mitigate negative impacts of COVID-19 impacts on clients' health.
- ✓ Expansion of physical space at Health Center to accommodate new realities associated with COVID-19.
- ✓ Consideration of revisiting appointment scheduling or increase of providers to reduce client wait-time while at Health Center to see providers.
- ✓ The modification of training for outreach personnel and providers to include bilingual communication and consideration of conversational English classes for clients based on the demographic shifts in populations served by STEEMCC.
- ✓ To expand access, and availability of quality behavioral health in the catchment area and Territory in general.

IDENTIFIED THREATS

- ✓ Lack of permanent or determination of Medicaid funding cost-ratio for Territory.
- ✓ An increase in uncompensated care is not offset by local government contributions.
- ✓ Insufficient Territorial financial planning to support healthcare.
- ✓ Climate change impacts and ability of Territory to respond effectively.
- ✓ Impacts of man-made and natural hazards, including unsustainable development actions and global warming.
- ✓ Financial condition of Territorial government.
- ✓ Lack of consistency among collaborations with local healthcare entities creates weaknesses in the quality of care that negatively impacts care outcomes.
- ✓ Insufficient Territorial involvement in meeting the demands of behavioral health.
- ✓ Inability to serve more of the population timely due to COVID-19, lack of staff, limited support from government agencies due to their staffing and resources, and compiled stress on the community creates an inability to care for the whole patient.

Strategic Priorities



INSTITUTIONAL AND WORKFORCE CAPACITY BUILDING AND DEVELOPMENT:

Mechanisms and institutional culture to address challenges of sustainability, workforce capacity, and adjustments in institutional design in response to environmental and socio-economic changes.

COLLABORATION AND PARTNERSHIPS:

Formal and informal relationships with key stakeholders and stakeholder groups in support of access to and continuous improvements of healthcare programs and services to the USVI community.

COMMUNITY ENGAGEMENT:

Mechanisms visibly engage the catchment area communities and the Territory, in general, in wellness and healthcare programs and provide diverse approaches to health information and wellness opportunities.

HIGH QUALITY, INNOVATIVE, PROGRAMS AND SERVICES:

Programs and services are innovative and reflect responsiveness to dynamic socio-economic and environmental changes, needs, and circumstances that arise in the community, Territory, and region.

Strategic Priorities and Related Strategic Goals

Institutional and Workforce Capacity Building and Development

- Establish mechanisms to address workforce capacity.
- Develop mechanisms for assessing space and facilities needs based on changing demographics, clients served, and healthcare needs in the catchment area.
- Ensure information systems and software are optimized to support EHRs and data resources and use.
- Develop a framework within which to assess the success of the strategic plan implementation and goal achievement.

Collaboration and Partnerships

- Develop an operational framework to foster and strengthen collaboration and strategic partnerships to support STEEMCC's mission.
- Establish partnerships with key agencies and entities that provide ancillary services to STEEMCC clients.

Community Engagement

- Establish and launch community outreach initiative to deliver programs and services in neighborhoods within STEEMCC's catchment area.
- Develop and implement a stakeholder communication and engagement plan.

High Quality, Innovative, Programs and Services

- Develop and implement initiatives to expand and improve access to high quality, innovative, person-centered care for vulnerable children and families in STEEMCC's catchment area.
- Adopt and/or adapt strategies used/recommended by AHRQ to assess the quality of STEEMCC programs and services.
- Develop and implement a Disparities Action Plan to reduce health disparities and increase health equity for STEEMCC clients.

The next section of the Strategic Plan document expands on each of the four strategic priorities or focus areas, presenting strategic goals and action plans for achieving the strategic goals. Essentially, the action plans provide specific information on what will be accomplished within specific timeframes, how objectives will be achieved (strategies), specific action steps to implement identified strategies, the person(s) responsible for ensuring that action steps are implemented, and the resources (fiscal, human, other) needed and/or secured to advance the strategic objectives. Additionally, the action plans identify stakeholders/collaborators who need to be aware of planned activities and those identified to support STEEMCC in the implementation of various elements of the strategic plan or who need to be aware of the actions that STEEMCC will be implementing. Finally, information is provided relative to timelines within which objectives are to be met and/or triggers for advancing various objectives.

Further, performance measures that will be used to assess the achievement of each strategic goal are delineated as well as progress indicators that will serve as annual markers to help STEEMCC assess progress with the implementation of the strategic plan. The final elements included in this section for each strategic priority is a section on desired outcomes associated with the achievement of each strategic goal and statements addressing possible contingency conditions and responses that should be considered and reviewed as appropriate during the implementation of the Strategic Plan.

After the presentation of expanded information on strategic priorities, strategic goals, related strategies and objectives and other Action Plan elements, there is a brief discussion of how STEEMCC will communicate with stakeholders about the strategic plan's implementation. This is followed by a description of the approach to the evaluation of the strategic plan implementation and a summary of resource needs for strategic plan implementation.

The current STEEMCC Strategic Plan covers three fiscal years: March 1, 2022 – February 28, 2023, March 1, 2023 – February 29, 2024, and March 1, 2024 - February 28, 2025.

EXPANSION OF STRATEGIC PRIORITIES – STRATEGIC PRIORITY I

STRATEGIC PRIORITY I: INSTITUTIONAL AND WORKFORCE CAPACITY BUILDING AND DEVELOPMENT: Mechanisms and institutional culture to address challenges of sustainability, workforce capacity, and adjustments in institutional design in response to environmental and socio-economic changes.

Goal 1.1. Establish mechanisms to address workforce capacity.

Objectives	Strategies	Action Steps
1.1.1: Develop and implement a framework for professional development that includes succession planning by the end of Year 2.	Use the current Individual Development Plan (IDP) as a framework for the professional development of staff and utilize Federal Community Health Center (CHC) recommendations training requirements at other health centers for guidance and examples of best practices.	1. Review and assess the effectiveness of the Individual Development Plan to determine the training needs of staff.
		2. Explore and evaluate established HRSA training requirements and requirements at other Federally Qualified Health Centers (FQHCs).
		3. Select and incorporate best training options as an integral part of staff development.
		4. Incentivize continuing education by giving recognition.
1.1.2. To develop an internal structure of the Center that details the roles, responsibilities, and relationships between individuals and the process of identifying and developing potential future leaders and senior managers within the 4 th Quarter of Year 2.	Optimize the Center's internal structure to ensure continuity of service.	1. Review current organizational chart by Quarter 2, Year 1
		2. Obtain Board approved documentation of the process of succession in support of the organizational chart by the end of Quarter 4, Year 1.
		3. Create a management development document that clearly delineates succession for key roles by the end of Quarter 1, Year 2.
1.1.3. Develop a volunteer program to support the activities of the Center.	Optimize the role of volunteers in the STEEMCC workforce.	1. Define prospective roles of volunteers, develop a Youth Health Core, and develop a training program for volunteers.
		2. Determine what community groups support volunteer programs.
		3. Invite community groups that have interests that align with the Center.
		4. Publicize the availability of volunteer roles with the Center.
		5. Monitor and evaluate the effectiveness of the volunteer program.
1.1.4. Determine and ensure that providers and staff have needed resources for optimal performance.	Optimize availability of resources for staff performance.	1. Develop and implement a survey to determine staff and provider's perception of whether resources are adequate by end of Quarter 1 Year 1.
		2. Develop a plan for acquiring or redistributing identified resource needs by the end of Year 1.
		3. Provide staff with needed resources by Quarter 1 Year 2.

Goal 1.1. Establish mechanisms to address workforce capacity.

Objective	Lead(s) [Person(s) Responsible]	Resources Needed/Secured	Stakeholders /Collaborators	Timing
1.1.1.	Executive Director (ED) Leadership Team; Human Resources	Automatic Data Processing (ADP) Inc. tracking system	STEEMCC staff Patient Community STEEMCC Partners	Complete evaluation and development by end of Year 1 and continue implementation through Year 3
1.1.2.	ED Leadership Team Human Resources; Board and ED	Current organizational chart and examples of other organizational charts Job descriptions Drafts of the Organizational Chart and Succession Plan	Management staff	Begin Quarter 2 and end by Quarter 3, Year 1 End of Quarter 4, Year 1
1.1.3.	ED Leadership Team	Volunteer Coordinator Sample volunteer guidelines	STEEMCC staff, clients, and community	Initiating in Year 2 and ongoing through Quarter 4, Year 3
1.1.4.	ED Leadership Team	Examples of surveys and 2020 Needs Assessment	STEEMCC staff	By the end of Quarter 1, Year 1

Performance Measures and Progress Indicators

Performance Measures that will indicate that **Goal 1.1.** has been achieved:

- ✓ The framework for professional development and succession planning has been developed and implemented.
- ✓ Board approval of organizational chart and process of succession implemented
- ✓ Volunteer program established
- ✓ Needed resources for optimal staff functioning identified

Progress Indicators		
Year I	Year II	Year III
<ul style="list-style-type: none"> • Best training options selected and incorporated as an integral part of staff development • STEEMCC BOD approval of succession plan • Developed resource needs survey completed by staff 	<ul style="list-style-type: none"> • Framework for professional development implemented • Document in place that clearly delineates succession for key roles • Volunteer roles are defined • Volunteer coordinator identified • Volunteer training program developed and implemented 	<ul style="list-style-type: none"> • Continuous staff development training • Succession plan continues in force • Active volunteer program

Desired Outcomes based on the achievement of **Goal 1.1:**

- ✓ Staff are aware of and engaged in required training
- ✓ A clear line of succession is established and approved
- ✓ Trained and vested volunteers are actively engaged with the Center
- ✓ Resources for high level job performance are available to staff

Goal 1.2. Develop mechanisms for assessing space and facilities needs based on changing demographics, clients served, and healthcare needs in the catchment area.

Objective	Strategy	Action Step
1.2.1 Assess the extent to which the planned new facility meets the needs of present and future clients and make recommendations by the end of 3 rd Quarter of Year 1.	Assess current facility space utilization and use assessment results to develop a space utilization plan based on current and future needs.	Review new facility planned space allocation for clinical, administrative, client services, and other miscellaneous facility needs, as well as the two-year trends in client access by age, Socio-economic status (SES), and diagnosis to determine alignment.

Lead(s) [Person(s) responsible]	Resources Needed/Secured	Stakeholders /Collaborators	Timing
Executive Director; Board Chair; Leadership Team; Clinical Compliance & Quality Assurance Officer (CCQAO)	Leadership team; Access to architectural plans; Board Building Committee; 2020 Needs Assessment; Access to the EHR	Clients, staff Board, stakeholders within the STEEMCC catchment area	Complete assessment by the end of the 1 st quarter of Year 1 and make recommendations by the 3 rd Quarter of Year 1.

Performance Measures that will indicate that **Goal 1.2.** has been achieved:

- ✓ Completion of the facility assessment and recommendations
- ✓ Alignment of space based on staff and client needs

Progress Indicators		
Year I	Year II	Year III
<ul style="list-style-type: none"> • Assessment of planned facility completed • Recommendations made and shared with BOD. 	<ul style="list-style-type: none"> • None 	<ul style="list-style-type: none"> • None

Desired Outcomes based on the achievement of **Goal 1.2:**

- ✓ Plans for the new facility have been reviewed based on current client demographics and needs.
- ✓ Any needed adjustments to plans are made prior to construction commencing.

Goal 1.3. Ensure Information systems and software are optimized to support Electronic Health Records (EHRs) and data resources and use.

Objective	Strategy	Action Steps
1.3.1 Develop and implement a mechanism to optimize Software Systems for User Friendly accessibility for STEEMCC staff and Patient population.	Improve the usefulness of current STEEMCC software for staff and patient population	1. Analyze present software system for performance and optimal capabilities.
		2. Compile information needed to update and enhance present software system from external resources and input from users.
		3. Implement updates to software system based on assessment and/or determine need for a new software system.
		4. Review and approve the list of stakeholders to be engaged in the evaluation process and the approach for the evaluation process.
		5. Identify information sources and set timelines for collection of data and information.
		6. Develop and approve questions to be addressed and types of data analysis to be included in evaluation process.

Lead(s) [Person(s) responsible]	Resources Needed/Secured	Stakeholders /Collaborators	Timing/Trigger
Information Technology (IT) Director	Data on assessment of current software capability Information on other Competitive Software Systems for Healthcare Settings Funding for any needed software and other IT updates	Staff and selected clients	Beginning the first quarter of the Year 1 with completion by Quarter 4 of Year 1.

Performance Measures and Progress Indicators

Performance Measures that will indicate that **Goal 1.3.** has been achieved:

- ✓ Software systems have been improved, developed and user-friendliness realized

Progress Indicators		
Year I	Year II	Year III
<ul style="list-style-type: none"> All steps for completion of the software systems have been accomplished. 	<ul style="list-style-type: none"> Updates to IT system implemented as needed. 	<ul style="list-style-type: none"> Updates to IT system implemented as needed.

Desired Outcomes based on the achievement of **Goal 1.3:**

- ✓ Information systems are state of the art and user friendly
- ✓ Information systems support the needs of staff and clients

Goal 1.4. Develop a framework within which to assess the success of the strategic plan implementation and goal achievement.

Objectives	Strategies	Action Steps
1.4.1. Evaluate implementation outcomes against stated goals.	Contract qualified evaluation professional. Produce a plan that provides documented guidelines for evaluation of achievement of STEEMCC strategic plan goals within the first 6 months	1. Establish an Evaluation Team at the start of the strategic plan implementation to identify stakeholders and develop an outline of the approach to be taken for review.
		2. Review and approve the list of stakeholders to be engaged in the evaluation process and the approach for the evaluation process.
		3. Identify information sources and set timelines for collection of data and information.
		4. Develop and approve questions to be addressed and types of data analysis to be included in evaluation process.

Lead(s) [Person(s) responsible]	Resources Needed/Secured	Stakeholders /Collaborators	Timing
Members of Strategic Plan Implementation and Oversight Committees.	Funding for evaluator Strategic Plan documentation of goals and objectives, activities and outputs, and schedules of activities.	STEEMCC Staff, BOD, Partners and Clients	Begin within the first quarter of Year 1 to allow actual implementation of evaluation and complete the evaluation in Year 3 at the end of the Strategic Plan timeframe.

Performance Measures that will indicate that **Goal 1.4.** has been achieved:

- ✓ Production of the evaluation guidelines for the Strategic Plan
- ✓ Achievement of evaluation of the Strategic Plan outcomes

Progress Indicators		
Year I	Year II	Year III
<ul style="list-style-type: none"> Evaluation guidelines of the Strategic Plan have been produced and accepted by Leadership and BOD Evaluation guidelines initiated. 	<ul style="list-style-type: none"> Continuation of the evaluation of activities and outcomes of the Strategic Plan. 	<ul style="list-style-type: none"> Completion of the evaluation of activities and outcomes of the Strategic Plan. Share evaluation report.

Desired Outcomes based on the achievement of **Goal 1.4:**

- ✓ Strategic plan level of goal achievement continuously assessed.
- ✓ Evaluation report used to inform continuous quality improvement activities.

Contingency Plans for Achieving Goals Related to Strategic Priority I

The objectives of the four goals of Strategic Priority 1 are expected to result in the built capacity of the STEEMCC workforce to be sustainable and function effectively in response to change. Should there be human or natural disaster disruptions or disruptions in IT systems, the major contingencies that are expected to be in place are clear succession roles and expectations, and staff whose trainings are up to date.

Potential damage to the Center's structure requires a contingency plan for accommodating client services and assuring computer systems and data are backed up on a secure server. Disruptions in progress in the implementation of the Strategic Plan should trigger the convening of the Strategic Plan Evaluation Team to assess progress and determine the possible need to make modifications.

EXPANSION OF STRATEGIC PRIORITIES – STRATEGIC PRIORITY II

STRATEGIC
PRIORITY II

COLLABORATION AND PARTNERSHIPS: Formal and informal relationships with key stakeholders and stake-holder groups in support of access to and continuous improvements of healthcare programs and services to the USVI community.

Goal 2.1. Develop an operational framework to foster and strengthen collaboration and strategic partnerships to support STEEMCC's mission.

Objectives	Strategies	Action Steps
2.1.1. Establish written guidelines for formal and informal relationships with key stakeholders within Year 1.	Organize internal and external stakeholders to develop and support framework.	1. Identify and invite/recruit a core group of stakeholders to work on guidelines with STEEMCC in a Collaboration Task Force.
		2. Review examples of frameworks for collaborative agreements.
		3. Develop a draft framework, including a risk assessment plan, for review by other stakeholders addressing shared vision and goals aligned with STEEMCC's mission.
		4. Create a plan for stakeholder involvement and identify areas for stakeholder input.
		5. Recommend to STEEMCC Board for approval.
2.1.2. Develop a written, effective, transparent communication strategy for the framework development process, agreed on by key stakeholders within the first six months of Year 1.	Use effective communications to support success of framework development.	1. Produce and agreed-upon guidelines to effectively communicate with stakeholders and recognize operational and cultural differences.
		2. Maintain effective communication with all stakeholders throughout the process.

Objective	Lead(s) [Person(s) responsible]	Resources Needed/Secured	Stakeholders /Collaborators	Timing
2.1.1.	Executive Director and Board Chair	Leadership Team; Board Committee on Public Information and Outreach; Digitally accessible examples of collaborative frameworks and agreements; funding.	Key stakeholders that serve same population served by STEEMCC in support of wellness.	All completed by end of Year 1.
2.1.2.	Collaboration Task Force	Meeting space, access to technology (i.e., hardware, software, mobile devices); sample communication strategies; communications specialist	Key stakeholders that serve same population served by STEEMCC	Begin development in 1 st Quarter of Year 1 and maintain ongoing implementation throughout process.

Performance Measures and Progress Indicators

Performance Measures that will indicate that **Goal 2.1** has been achieved:

- ✓ Guidelines for formal and informal relationships agreed-on by stakeholders and approved by BOD
- ✓ Written guidelines for effective communications among key stakeholders of STEEMCC are reviewed by stakeholders and approved by the BOD

Progress Indicators		
Year I	Year II	Year III
<ul style="list-style-type: none"> • Written guidelines developed. • Collaboration and Partnership framework developed. • Collaboration Task Force formed. • Plan for stakeholder engagement developed. • STEEMCC BOD approval of collaboration framework and stakeholder engagement plan received. 	<ul style="list-style-type: none"> • None 	<ul style="list-style-type: none"> • None

Desired Outcomes based on the achievement of **Goal 2.1**:

- ✓ STEEMCC will have a clear indication of the stakeholders that it will seek to develop collaborations and partnerships with over time.
- ✓ STEEMCC will share and regularly use an approved approach and engagement mechanism with potential collaborators and partners in support of improved healthcare services for clients.

Goal 2.2. Establish Partnerships with key agencies and entities that provide ancillary services to STEEMCC clients.

Objectives	Strategies	Action Steps
2.2.1 Convene an initial meeting to orient and explore specific partnership goals with selected stakeholders, within the 4 th Quarter of Year 1.	Implement selected collaborations and partnerships based on STEEMCC Collaborators and Partners (C&P) Framework guidance.	1. Identify and contact list of all appropriate stakeholders.
		2. Share the STEEMCC C&P Framework with key stakeholders.
		3. Plan and execute facilitated inaugural meetings with invited stakeholders to identify areas of collaboration and possible partnerships.
2.2.2. Produce an agreement of understanding for approval by key stakeholders based on proposals from STEEMCC and stakeholders to address mutual goals by end of Year 2 and ongoing.	Formalize mutual goals of cooperation with key stakeholders.	1. Draft proposal of areas of importance to all Parties, including level of commitment by partners, evaluation and monitoring plan, and joint team training. 2. Share draft proposal with identified partners for feedback, finalization, and approval by all Parties. 3. Convene a signing ceremony for the agreed-on document and publicize to the public and clients. 4. Monitor and evaluate the collaboration or partnerships in accordance with the budget, monitoring and evaluation plan guidelines in the agreement, including addressing data collection, analysis, and reporting.

Objective	Lead(s) [Person(s) responsible]	Resources Needed/Secured	Stakeholders /Collaborators	Timing
2.2.1.	Appropriate STEEMCC leadership (i.e., Clinical/ Behavioral Health/Dental Directors); or subgroup appointed by ED	Consultant to facilitate sessions, space for meeting, approved framework, list of stakeholders.	Stakeholders that work closely with STEEMCC (VIDOH, VIDHS, Frederiksted Health Care (FHC))	Begin planning for C&P initiatives in Quarter 4, Year 1 and hold meeting in Quarter 1, Year 2.
2.2.2.	ED and leadership team; appropriate STEEMCC leadership	Legal counsel, STEEMCC Communications Strategy, Public Relations (PR) personnel, technology for data storage and analysis.	Stakeholders involved in drafting and implementing agreements.	Begin Quarter 1, Year 2 or upon completion and acceptance of agreements through Year 3.

Performance Measures that will indicate that **Goal 2.2.** has been achieved:

- ✓ An inaugural meeting results in engaged participation of key stakeholders and a positive exploration of ideas for collaborations and partnerships with STEEMCC.
- ✓ Negotiations between STEEMCC and key stakeholders around presented ideas result in signed agreements supporting collaboration and partnerships between STEEMCC and key stakeholders.

Progress Indicators		
Year I	Year II	Year III
<ul style="list-style-type: none"> • List of stakeholders developed. • Stakeholders contacted and meetings planned. 	<ul style="list-style-type: none"> • Draft proposals completed. • Inaugural, facilitated, collaboration development meeting convened. • Agreed-upon goals document developed. • Signing ceremonies held. 	<ul style="list-style-type: none"> • Monitoring activities commenced. • Evaluation plan developed. • Evaluation of collaborations completed. • MOAs developed and signed.

Desired Outcome based on the achievement of **Goal 2.2:**

- ✓ STEEMCC will be engaged in functional, effective collaborations and partnerships with appropriate groups that facilitate and support quality service to clients and other stakeholders.

Contingency Plans for Achieving Goals Related to Strategic Priority II

The objectives of the two goals of Strategic Priority 2 are expected to result in functional, effective collaborations and partnerships with appropriate groups that facilitate and support quality service to STEEMCC clients and other stakeholders, based on approved mechanisms outlining responsibilities and engagement strategies. The Threats listed in the SWOT and the Possibilities Inventory, especially impacts from natural hazards and climate change, dramatic changes in financial support to STEEMCC or the Territory's healthcare sector, and additional negative economic changes, all have the potential to disrupt or strain arrangements established under the formal agreements supporting collaborations and partnerships.

In response to anticipated disruptions in service and life, the STEEMCC leadership will need to develop a framework or guidelines for addressing the specific issues that they may want to address with partners and collaborators under their various agreements, keeping in mind that the goal will be to continue offering the appropriate level of services to STEEMCC clients or partners under the changed conditions presented by a particular disruption. The guidelines should address agreed on options for communication with all stakeholders regarding conditions for operations, projected timelines for meeting goals linked to functionality, identification of services available, methods for contacting clients and partners, and identification of designated liaisons between collaborators and partners. Basically, the guidelines will, ahead of the disruptions, support STEEMCC's ability to agree on how partners will communicate and act under the changed conditions.

EXPANSION OF STRATEGIC PRIORITIES – STRATEGIC PRIORITY III

STRATEGIC
PRIORITY III

COMMUNITY ENGAGEMENT: Mechanisms visibly engage the catchment area communities and the Territory in general in wellness and healthcare programs and provide diverse approaches to health information and wellness opportunities.

Goal 3.1. Establish and launch community outreach initiatives to deliver programs and services in neighborhoods within STEEMCC's catchment area.

Objectives	Strategies	Action Steps
3.1.1. By August 2022, establish and launch a Community Partnership comprised of members from key stakeholder groups.	3.1.1.1. Invite key stakeholders to join Community Partnership.	1.1.1. Identify key stakeholder groups and agree on size of Partnership.
		1.1.2. Determine mode of communication (email, phone calls, flyers, other approaches)
		1.1.3. Specify roles and responsibilities of partners.
		1.1.4. Issue invitations
	3.1.1.2. Community Partnership as key voice in STEEMCC decision making regarding community outreach and client services.	1.2.1. Establish how Community Partnership will be integrated into STEEMCC decision-making process
		1.2.2. Establish and engage subcommittees to support various foci of community outreach and client services.
	3.1.1.3. Regularly engage Community Partnership.	1.3.1. Establish and implement a calendar of meetings.
		1.3.2. Establish charter for Community Partnership.
		1.3.3. Conduct annual survey of Community Partnership members to document level of engagement.
3.1.2. By November 2022, develop mechanisms to engage stakeholder groups in one of three wellness programs and initiatives.	3.1.2.1. Establish three Wellness Programs.	2.1.1. Select a team to review program data to determine priority or needed wellness programs.
		2.1.2a. Collaborate with other organizations and entities to support program development.
		2.1.2b. Develop each wellness program – to include information on target group, resources needed, schedule, and location for delivering program.
		2.1.3. Develop and implement strategies to market each program (internal and external) and launch wellness programs.
	3.1.2.2. Establish Rewards Program to incentivize clients who participate in Wellness Programs.	2.2.1. Select team to develop structure of rewards program.
		2.2.2. Decide on categories of incentives based on available resources (fiscal and/or other) and develop criteria for awarding incentives.
		2.2.3. Distribute incentives to clients.
	3.1.2.3. Monitor and provided feedback on effectiveness of Wellness Programs.	2.3.1. Evaluation team to evaluate wellness programs implemented (See Goal 1.4., Obj. 1.4.1., p. 17).
		2.3.2. Evaluation report(s) shared with STEEMCC ED.
3.1.3. By February 2023, develop community outreach programs targeted to children, adolescents, and the elderly.	3.1.3.1. Establish programs targeted to children, adolescents, and the elderly.	3.1.1. Select a team to compile data for each target population and to determine appropriate program for each target population.
		3.1.2. Compile the external, internal, and financial resources needed and identify collaborating partners.
		3.1.3. Convene sessions to determine mode of communication (email, phone calls, flyers, other approaches) and to develop outreach programs.

Objectives	Strategies	Action Steps
	3.1.3.2. Establish collaborations community agencies and organizations in support of program development and delivery.	3.2.1. Determine which collaborator(s) is/are for appropriate for each outreach program, secure contact information, and specify partner roles and responsibilities.
		3.2.2. Develop a calendar for outreach for each target population and launch outreach programs based on calendar.
	3.1.3.3. Link programs to key Healthy VI 2030 and CDC's Healthy People 2030 health priorities for target groups.	3.3.1. Convene collaborators to support efforts to link program to key health priorities.
		3.3.2. Gather and review patient data for target populations to facilitate identification of health priority indicators for each target group.
	3.1.3.4. Monitor and provide feedback on effectiveness of targeted outreach programs.	3.4.1. Evaluation team to evaluation outreach programs (See Goal 4.1, Obj. 4.1.1, p. 16).
		3.4.2. Evaluation team shares evaluation report(s) with STEEMCC ED.
3.1.4. Beginning in the third quarter of FY2022-2023 and quarterly, through FY2024-2025, conduct at least one community health wellness workshop/ seminar, or other health education activity aimed at improving health outcomes for STEEMCC clients.	3.1.4.1. Develop annual theme for community health education activities.	4.1.1. Convene a team to develop the annual themes based on input from key stakeholders (primary, secondary, and key).
		4.1.2. Proposed themes shared with key stakeholders to solicit feedback/input.
		4.1.3. Themes finalized and disseminated to key stakeholder groups and incorporated in annual community health education activities.
	3.1.4.2. Engage partners and collaborators to deliver and/or partner with STEEMCC to deliver health education activities.	4.2.1. Convene partner/collaborator group identified within Strategic Goal 2.1 and establish calendar of meetings to develop agreed-upon health education activities.
		4.2.2. Partners/collaborator agreements on health education activities to be spearheaded.
		4.2.3. Master calendar of health education activities, with collaborators to deliver activities identified finalized and promulgated virtually.
	3.1.4.3. Develop media campaign to advertise/market health education activities.	4.3.1. Public Relations unit, in collaboration with BOD Communications Committee to determine key elements of media campaign.
		4.3.2. Draft media campaign developed and shared with Executive Team for review, feedback, and concurrence.
		4.3.3. Media campaign shared with and approved by BOD and launched by Public Relations team.
	3.1.4.4. Monitor and provide feedback on effectiveness of health education activities.	4.4.1. Evaluation team to evaluation health education activities (See Goal 4.1, Obj. 4.1.1, p. 16)
		4.4.2. Evaluation team shares evaluation report(s) with STEEMCC ED.

Goal 3.1. Establish and launch community outreach initiatives to deliver programs and services in neighborhoods within STEEMCC's catchment area.

Objective	Lead(s) [Person(s) responsible]	Resources Needed/Secured	Stakeholders /Collaborators	Timing
3.1.1.	Executive office & Public Relations personnel [specific persons to be determined by ED]; Community Health worker/coordinator; healthcare provider representation	Staff; financial resources to support marketing and communication; support for off-site venues; space consideration	Catholic Charities and related non-profits; Virgin Islands Housing Authority (VIHA); Government of the Virgin Islands (GVI): VIDE, VIDOH, VIDHS; Tutu Park Mall management The Market – St. Thomas; NAMI; American Association of Retired Persons (AARP); Veterans Administration (VA)	Objective achieved by Quarter 2, Year 1.
3.1.2.	Medical, Dental, Behavioral Health Directors; Public Relations personnel; Community Health workers and/or case managers	Additional staff; financial resources (for incentives and materials for programs); facilities/space for delivering programs; Health education and/or health literacy materials	STEEMCC BOD; STEEMCC clients; VIHA; VIDE; VIDOH; VIDHS; Tutu Park Mall management; AARP	Objective achieved by Quarter 3, Year 1.
3.1.3.	Medical, Dental, Behavioral Health Directors; Public Relations Team Community Engagement Associate; Community Health workers and/or case managers	Additional staff; financial resources (for incentives and materials for programs); facilities/space for delivering programs Health education and/or health literacy materials	Catholic Charities and related non-profits; VIHA; GVI: VIDE, VIDOH, VIDHS; Tutu Park Mall management The Market – St. Thomas; National Association of Mental Illness (NAMI); AARP; VA	Objective achieved by Quarter 4, Year 1.
3.1.4.	Public Relations Director & Public Relations team; Medical Director; Case Manager; Others – as determined by ED	Health education and health literacy materials Incentives for participants	VIDOH, VIDE, AARP, VIDHS, VIHA; Virgin Islands Transit (VITRAN); Smith's Ferry; Varlack Ventures; Tutu Park Mall management; Media outlets	Objective commences in Quarter 3, Year 1 and is fully achieved by Quarter 4, Year 3.

Performance Measures that will indicate that **Goal 3.1.** has been achieved:

- ✓ The STEEMCC Community Partnership is formalized, and members are providing input into STEEMCC decisions.
- ✓ Stakeholder groups are engaged in one of three wellness programs and initiatives.
- ✓ Wellness programs and health education activities are organized, and stakeholders are engaged and benefiting.

Progress Indicators		
Year I	Year II	Year III
<ul style="list-style-type: none"> • Community Partnership formed. • Calendar of Community Partnership meetings developed and implemented. • Community Partnership sub-committee formed. • Community Partnership sub-committee integrated into STEEMCC decision-making structure. • One wellness program launched. • Rewards Program developed and launched. • Targeted health programs developed. • Health literacy campaign commenced. • Media campaign commences 	<ul style="list-style-type: none"> • One wellness program launched. • Rewards Program ongoing. • Targeted health programs launched. • Health literacy campaign ongoing. • Media campaign ongoing. 	<ul style="list-style-type: none"> • One wellness program launched. • Rewards Program ongoing. • Targeted health programs ongoing. • Health literacy campaign ongoing. • Media campaign ongoing.

Desired Outcomes based on the achievement of **Goal 3.1**:

- ✓ Community engagement activities integrated into STEEMCC's standard operating procedures.
- ✓ Community input integrated in process for determining optimal approaches to engaging the community.
- ✓ Community Engagement Charter serves as guiding document for engaging the community.

Goal 3.2. Develop and implement a stakeholder communication and engagement plan.

Objectives	Strategies	Action Steps
3.2.1. By quarter 1, FY2022-2023, secure needed resources to strengthen Public Relations unit.	3.2.1.1. Assess public relations unit resource needs.	1.1.1. Create a detailed expense spreadsheet based on the necessary items, training, and resources needed for the unit to be successful for the fiscal year.
		1.1.2. Collaborate with the Chief Financial Officer (CFO), Grant Writer, and ED to determine support needed from Public Relations unit to support community engagement as delineated in grant-funded projects.
		1.1.3. Collaborate with Human Resources to hire two additional staff members for PR unit.
		1.1.4 Update and finalize initial Excel spreadsheet based on additional research regarding public relations support needed for core mission-related activities, as well as strategic plan implementation and grant-funded project requirements.
	3.2.1.2. Funds and other resources identified	1.2.1. Review grant budgets to determine funds available, inclusive of program income funds, to support public relations activities.
		1.2.2. Identify and delineate opportunities for cost-sharing with collaborators and partners.
		1.2.3. Annually, include existing contracts with media outlets in listing of available resources.
		1.2.4. Annually, develop master listing of funds and resources to support public relations activities in support of the Strategic Plan.
	3.2.1.3. Targeted utilization of resources to support public relations mission and support for STEEMCC strategic plan.	1.3.1. Allocate funds (program income, donations, and grants) to public relations for successful marketing and outreach events
		1.3.2. Itemize and budget necessary materials, equipment, and external resources to plan and execute outreach events (to include marketing and promotional advertisements).
		1.3.3. Discuss and plan for marketing and promotional advertisement that promote the center not just an outreach event for the fiscal year
		1.3.4. Assess effectiveness of resource allocation in support of the public relations activities.
3.2.2. By September 2022, develop and implement a media campaign plan to promote community engagement.	3.2.2.1. Identify and secure resources to support the development and implementation of community engagement media campaign plan.	2.1.1. Determine scope and focus of media campaign plan.
		2.1.2. Identify key staff and other stakeholders to support media campaign plan implementation and define roles and responsibilities.
		2.1.3. Develop media campaign and secure plan approval from ED and BOD.
	3.2.2.2. Establish schedule of media appearances.	2.2.1. Public Relations team to work with Executive Team to identify media outlets (radio and television) for media appearances and staff to participate in media appearances.
		2.2.2. Public Relations team to develop schedule based on consultation with media outlets as well as other scheduled events in support of the implementation of the Strategic Plan.
		2.2.3. Media appearances schedule finalized and disseminated.
	3.2.2.3. Deploy community engagement activities in collaboration with partners.	2.3.1. Annually, community engagement activities deployed based on master calendar.
		2.3.2. When appropriate, survey data will be collected to assess participants' evaluation of community engagement activities.
		2.3.3. STEEMCC personnel and collaborators will review community feedback and adjust future community engagement activities based on community feedback.

Objectives	Strategies	Action Steps
3.2.3. By June 22, and quarterly through February 2025, develop and disseminate PSAs, newsletters, and other outreach print materials to increase community engagement.	3.2.3.1. Develop annual schedules, themes, and format for newsletters.	3.1.1. Convene team to identify newsletter format and potential themes and/or focus areas, contributors, and to develop a master calendar for newsletter dissemination.
		3.1.2. E-newsletters uploaded to STEEMCC website, quarterly, through quarter 4, Year 3 and PR staff track “views” of various virtual materials targeted to reach the community.
	3.2.3.2. Develop annual schedule and focus for PSAs.	3.2.1. Convene team to identify annual focus areas for PSAs, audiences to be targeted, and to develop a schedule or master calendar for releasing PSAs.
		3.2.2. Develop and launch PSAs based on established foci and master calendar.
		3.2.3. Public Relations staff to develop Survey Monkey surveys for community to share their impressions/views on PSAs.
	3.2.3.3. Develop and/or secure additional print material to engage the community.	3.3.1. Team formed to assess need for resources to optimize community engagement and to review resources on hand and funds available to supplement resources or fill gaps with respect to community engagement materials.
		3.3.2. Funds identified and needed community engagement materials purchased for dissemination.
		3.3.3. Assess impact of additional community engagement materials in supporting implementation of the community engagement plan.

Goal 3.2. Develop and implement a stakeholder communication and engagement plan.

Objective	Lead(s) [Person(s) responsible]	Resources Needed/Secured	Stakeholders /Collaborators	Timing
3.2.1.	Public Relations and Community Engagement Department, CFO, Grant Writer, and ED	Additional staff; financial resources (for incentives and materials for programs); facilities/space for delivering programs Health education and/or health literacy materials	STEEMCC BOD; STEEMCC clients; VIHA; VIDE; VIDO; VIDHS; Tutu Park Mall management; AARP	Objective achieved by Quarter 1, Year 1.
3.2.2.				Objective commences by Quarter 3, Year 1 and is fully achieved by Quarter 4, Year 3.
3.2.3.	Public Relations Director & Public Relations team; Medical Director; Case Manager; Others – as determined by ED	Print materials for community engagement activities; funds to support PSAs. Incentives for participants	VIDO, VIDE, AARP, VIDHS, VIHA; VITRAN; AARP; St. John Community Foundation; Community Foundation of the Virgin Islands (CFVI); Tutu Park Mall management; Media outlets	Objective commences in Quarter 2, Year 1 and is fully achieved by Quarter 4, Year 3.

Performance Measures that will indicate that **Goal 3.2.** has been achieved:

- ✓ A strengthened Public Relations Unit.
- ✓ Successful implementation of a media campaign to promote community engagement and support health literacy.

Progress Indicators		
Year I	Year II	Year III
<ul style="list-style-type: none"> • Public Relations resource needs identified. • Resources and sources of resource to support Public Relations unit identified and earmarked. • Master calendars for media campaign, community engagement, and health literacy activities developed and disseminated. • Media campaign launched. • Community engagement activities deployed. • Health literacy materials purchased. • Evaluation of community engagement activities commenced. • Media appearances commenced. 	<ul style="list-style-type: none"> • Media campaign ongoing. • Community engagement activities ongoing. • Inventory of needed health literacy materials on hand. • Evaluation of community engagement activities ongoing. • Media appearances ongoing. 	<ul style="list-style-type: none"> • Media campaign ongoing. • Community engagement activities ongoing. • Evaluation of community engagement activities completed. • Media appearances concluded.

Desired Outcomes based on the achievement of **Goal 3.2:**

- ✓ Health literacy of STEEMCC clients increased.
- ✓ Improved health outcomes for STEEMCC clients.
- ✓ Collaborations with partners/key stakeholders strengthened.
- ✓ Communication and engagement efforts result in increased selection of STEEMCC as medical home or usual source of primary care.
- ✓ Community engagement institutionalized.

Contingency Plan for Achieving Goals Related to Strategic Priority III

Given that the FY2023 to FY2025 Strategic Plan is slated for implementation in the first quarter of FY 2022-2023 (March – May 2022), it is highly likely that the COVID-19 Pandemic would have shifted from pandemic status to likely epidemic status and that, in the U.S. Virgin Islands, herd immunity would have been achieved. If this is the case, STEEMCC would be able to fully implement its new Strategic Plan and the Community Partnership would likely be formed and in place before the peak of the 2022 Hurricane Season.

Within this context, the need to make adaptations to the existing Strategic Plan due to potential natural hazards, would be an activity that would include members of the Community Partnership. Current redundancies within its systems that STEEMCC has put in place since the two Category 5 Hurricanes in September 2017 (Hurricane Irma and Hurricane Maria) as well as the expansion of virtual healthcare within the context of the COVID-19 Pandemic, would position STEEMCC leadership, in collaboration with the Community Partnership, to pivot with respect to community engagement activities and priorities. There could be an element in the Community Partnership Charter that addresses this aspect of the Strategic Plan.

Further, key personnel within STEEMCC who are identified as leaders with respect to the realization of strategic priority three – around community engagement – are expected to collaborate closely with the STEEMCC team who has the responsibility of implementing its overarching contingency plans that have been developed to be deployed in the advent of a significant disruption. Within this framework, STEEMCC necessary adjustments to implementation dates of key strategies would be made.

EXPANSION OF STRATEGIC PRIORITIES – STRATEGIC PRIORITY IV

STRATEGIC
PRIORITY IV

HIGH QUALITY, INNOVATIVE, PROGRAMS AND SERVICES: Programs and services are innovative and reflect responsiveness to dynamic socio-economic and environmental changes, needs, and circumstances that arise in the community, Territory, and region.

Goal 4.1. Develop and implement initiatives to expand and improve access to high quality, innovative, person-centered care for vulnerable children and families in STEEMCC's catchment area.

Objectives	Strategies	Action Steps
4.1.1: Develop and implement a mechanism to increase access to high quality, innovative programs.	Expand community outreach, service hours, and available providers.	1. Establish a working group composed of internal and external stakeholders.
		2. Review previous outreach efforts, assess effectiveness, and revise approach to community outreach based on areas of deficiency (in previous efforts).
		3. Extend current service hours to include evening and weekend hours to reduce wait time for appointments.
	Create processes for increasing access to services.	4. Seek and secure funding for mobile health van to support targeted mobile health services.
		5. Develop and implement marketing campaign to increase awareness of services available at STEEMCC for all community members.
		6. Evaluate the success/impact of the access mechanism.

Objective	Lead(s) [Person(s) responsible]	Resources Needed/Secured	Stakeholders /Collaborators	Timing
4.1.1.	Executive Director Leadership Team Other staff designated by ED.	Grant funding for mobile van Adequate PR staffing Additional providers	Key Stakeholders Key stakeholders (Internal)	Quarter 1, Year 1 through the life of the Strategic Plan (Quarter 4, Year 3)

Performance Measures and Progress Indicators

Performance Measures that will indicate that **Goal 4.1.** has been achieved:

- ✓ Service hours have been expanded
- ✓ The community has a greater awareness of available services at STEEMCC
- ✓ Documented evidence that increased numbers of vulnerable children and families have accessed services

Progress Indicators		
Year I	Year II	Year III
<ul style="list-style-type: none"> • Working group of internal and external stakeholders established. • Phase I of expansion of clinic hours in place. • Possible funding sources for mobile health van identified. 	<ul style="list-style-type: none"> • Based on available funding, develop, and submit grant application for mobile van. • Phase II of expansion of clinic hours in place. • Marketing campaign developed. • Marketing campaign implemented to reflect expansion of community outreach. 	<ul style="list-style-type: none"> • Marketing campaign continues. • Phase III of expansion of clinic hours in place. • Phase II of expansion of community outreach documented. • Evaluation report focused on success of expansion efforts.

Desired Outcomes based on the achievement of **Goal 4.1.:**

- ✓ Reports and assessments will confirm that vulnerable children and families in the STEEMCC catchment area will be able to access quality healthcare services when needed.
- ✓ Strategies to address barriers to quality healthcare for vulnerable children and families are institutionalized, effective, and regularly reviewed.

Goal 4.2. Adopt and/or adapt strategies used/recommended by Agency for Healthcare Research and Quality (AHRQ) to assess the quality of STEEMCC programs and services.

Objective	Strategy	Action Step
4.2.1 Increase the quality of care and treatment for identified areas of deficit by 5% annually.	Use of practice improvement tools to deliver high quality services.	<ol style="list-style-type: none"> 1. Identify the areas of deficit for focus. 2. Access evidence-based practices associated with the areas of deficit. 3. Develop a support system for clinicians. 4. Systematically collect clinical data to determine levels of improvement.
4.2.2. Annually, implement at least one intervention program targeted to improve clinical care and/or patient health outcomes.	Determine interventions that improve care and lead to improvement.	<ol style="list-style-type: none"> 1. Convene a group to identify appropriate interventions. 2. Review internal practices and external best practices (AHRQ) to compile a list of possible interventions for approval by STEEMCC.
4.2.3. By Quarter 2, Year 1, adopt the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in health care.	Identify opportunities to improve quality of care and increase efficiency of care delivery.	<ol style="list-style-type: none"> 1. Identify a consultant to assist the Center 2. Establish an internal task force to work with the consultant. 3. Develop an action plan in support of the implementation of the CLAS standards.

Objective	Lead(s) [Person(s) responsible]	Resources Needed/Secured	Stakeholders /Collaborators	Timing
4.2.1	Risk Management/Clinical Compliance Manager; Medical Director	Additional community health workers; Emergency Care Research Institute (ECRI) system; EHR access; Dedicated time to address objectives	VIDOH; VIDE; VIDHS; CFVI; Bureau of Primary Health Care (BPHC); Health Resources and Services Administration (HRSA); National Association of Community Health Centers (NACHC)	Begin in Quarter 1, Year 1, end in Quarter 4, Year 3.
4.2.2		Best practices documents Dedicated time to address objectives		
4.2.3		Dedicated time to address objectives		

Performance Measures that will indicate that **Goal 4.2.** has been achieved:

- ✓ Evidenced based practices have been successfully used to improve identified deficit areas.
- ✓ CLAS standard have been adopted.
- ✓ Plans for implementation of CLAS have been developed.

Progress Indicators		
Year I	Year II	Year III
<ul style="list-style-type: none"> • Document developed listing areas of deficit. • Practice improvement tools identified and shared with clinical staff. • List of evidence-based practices to address deficit areas identified and shared with clinical staff. • Clinical data collected and included in EHR system. • Group to identify appropriate interventions established. 	<ul style="list-style-type: none"> • List of possible interventions developed and disseminated. • At least one intervention program is implemented. • Support system for clinicians developed. • Support system for clinicians implemented. • Quality Improvement system developed and/or implemented (national standards will serve as guide) • Consultant to support adoption of National CLAS standards hired. 	<ul style="list-style-type: none"> • Task force established. • Consultant and Task Force collaborate and develop action plan. • CLAS training schedule developed and implemented. • Action plan implemented. • Evaluation report focused on success of implementation of the National CLAS Standards.

Desired Outcomes based on the achievement of **Goal 4.2.:**

- ✓ STEEMCC's adoption and adaptation of AHRQ standards drive improvements in healthcare and programs and correlate with improvements in health outcomes for clients.
- ✓ STEEMCC service providers consistently and effectively apply the CLAS standards to delivery of healthcare services to clients

Goal 4.3. Develop and implement a Disparities Action Plan (DAP) to reduce health disparities and increase health equity for STEEMCC clients.

Objective	Strategies	Action Steps
4.3.1 By the end of the second quarter, determine focus of Disparities Action Plan (DAP).	Engage contractor (to develop Disparities Action Plan) Seek funding to support DAP implementation.	4.3.1.1. Engage a consultant
		4.3.1.2. Establish internal workgroup
		4.3.1.3. Collaboration between consultant and workgroup
4.3.2. Develop a 3-year DAP with input from stakeholders, by the end of Year 2.	Engage key Partners to collaborate on implementation of DAP.	4.3.1.4. Generate a document enumerating the disparities for inclusion in the action plan.
		4.3.2.1. Consultant to develop draft plan.
		4.3.2.2. Draft plan will be shared with key stakeholders for input.
4.3.3. By the first quarter of Year 3 implement DAP and assess the implementation.		4.3.2.3. Plan will be revised and finalized based on stakeholder feedback.
		4.3.3.1. Identification of an internal implementation team.
		4.3.3.2. Launch DAP
		4.3.3.3. Evaluate DAP implementation.

Objective	Lead(s) [Person(s) responsible]	Resources Needed/Secured	Stakeholders /Collaborators	Timing/Trigger
4.3.1	ED	Consultant Funding for consultant Dedicated staff time Training related to health disparities	Primary, secondary, and key stakeholders.	Begin Year 1, Quarter 2 through Year 3, Quarter 4.

Performance Measures and Progress Indicators

Performance Measures that will indicate that **Goal 4.3.** has been achieved:

- ✓ DAP plan has been developed
- ✓ DAP has been launched
- ✓ DAP is continuously evaluated

Progress Indicators		
Year I	Year II	Year III
<ul style="list-style-type: none"> Consultant engaged. Work Group formed. Disparities to be included in action plan delineated. Draft Disparities Action Plan (DAP) developed by consultant and submitted to ED. 	<ul style="list-style-type: none"> Draft DAP shared with stakeholders. Final DAP shared with all STEEMCC providers. Implementation team identified. Disparities Action Plan launched. 	<ul style="list-style-type: none"> Disparities Action Plan in place (implementation continues). Evaluation completed of Disparities Action Plan implementation.

Desired Outcomes based on the achievement of **Goal 4.3.:**

- ✓ The DAP will allow STEEMCC to implement a successful initiative to reduce selected health disparities in the catchment area.
- ✓ STEEMCC can demonstrate, based on empirical data, that health disparities have been decreased for clients in the catchment area.

Contingency Plan for Achieving Goals Related to Strategic Priority IV

The three goals supporting Strategic Priority IV focus on programs and services that are innovative, and reflect responsiveness to dynamic socio-economic, environmental changes, needs, and circumstances that arise in the community, Territory, and region. All three goals require that some risk management planning is included in the implementation process to increase the probability that the benefits of activities and outputs will be maintained in any event that causes interruptions or disruptions. It would be expected that outbreaks of epidemics, extreme weather events like hurricanes and flooding, and economic downturns or any other service interruptions or disruptions will negatively impact access to the Center, levels of health in the community and maintaining standards at STEEMCC.

Therefore, it will be important to have prepared clear continuity of operations plans and communication strategies that outline what will be communicated to clients, staff, stakeholders, and the community about what the STEEMCC will do to continue providing and maintaining essential services and what needs to be adjusted under the disrupted conditions. The plans are based on what is critical regarding keeping staff and clients safe, what are essential services and information needed by clients and stakeholders, and an understanding that there will be a need to be flexible while trying to uphold the values and standards of the Center.

Communication Plan for Implementation

Communication is a key element for the successful implementation of the STEEMCC strategic plan. To that end, it is essential that the STEEMCC leadership establish a framework within which communication regarding the strategic plan implementation will be communicated with primary, secondary, and key stakeholders. It will be crucial to proactively engage persons and entities identified throughout the strategic plan as having leadership, support, and/or collaborating roles in the implementation of the strategic plan.

Consideration should be given to establishing mechanisms through which ongoing communication will occur, with STEEMCC staff and Board members, as well as with partners, collaborators, funders, and other stakeholders. Communication tools such as progress reports, newsletters, posts on the STEEMCC website could be used to share information. A key element of the communication plan should include regular updates to the Collaboration Task Force (Strategic Priority 2), the Community Partnership (Strategic Priority 3), and other committees and task forces that are established in support of the strategic plan. Further, targeted information to clients around the launching of various programs associated with the strategic plan implementation should also be considered.

Ensuring that communication regarding the strategic plan implementation is integrated in communication related to efforts to support STEEMCC's mission is recommended.

Approach to Strategic Plan Evaluation

In addition to ongoing communication regarding the implementation of STEEMCC's new strategic plan (FY2023 – FY2025), it will be essential to determine how successful the Center is in meeting the strategic goals delineated within the strategic plan. The optimal approach to assessing the successful implementation of the strategic plan is to develop and implement a Program Performance Evaluation Plan (PPEP) at the outset of the implementation of the strategic plan.

The recognition of the need for an evaluation of the strategic plan is noted within Strategic Priority 1. It is anticipated that by developing and implementing a PPEP, STEEMCC will be able to address six key areas:

1. Monitor progress toward the achievement of the eleven strategic goals delineated in the strategic plan.
2. Determine whether the components of the strategic plan, as delineated in the action plans, are producing the desired outcomes.
3. Compare health outcomes for clients within the context of health disparities, particularly as access to timely, high-quality care improves and the implementation of the Disparities Action Plan.
4. Identify opportunities for continuous quality improvement across programs and services, particular in areas of focus within the strategic plan.
5. Affirm that high quality, innovative programs, and services are delivered, client health outcomes improve, and resources are optimally utilized.

Evaluation efforts should include both process and outcome information and should be an inclusive process that ensures representation from all stakeholder groups.

Resource Needs

The successful implementation of the FY2023 – FY2025 STEEMCC Strategic Plan will require a range of resources, as delineated at the end of each strategic goal presented. While several categories of resources have been presented, this section underscores one resource need that cuts across all work to be done during the implementation of the strategic plan and highlights some of the key categories of resource needs identified to support the operationalization of the strategic goals.

As with most strategic plans, additional resources are always needed to optimally implement each new strategic plan. For STEEMCC, a key resource that cannot be overstated is time. A significant number of staff, particularly healthcare providers – both clinical and non-clinical – have salient roles in the strategic plan implementation. Strategic plan activities will require some time commitments that will have to be managed within the constraints of the finite number of hours in the workday as well as clinical time that must be devoted to patient care.

Additionally, given the resource needs that have been determined to be essential to the successful implementation of the strategic plan, it will be incumbent on the STEEMCC Board of Directors and the Executive Director and his leadership team to prioritize the provision of the identified resources. Such prioritization will increase the likelihood of the successful implementation of the strategic plan, thus leading to the actualization of the four strategic priorities and moving STEEMCC closer to the realization of its vision. Key areas of resource needs supporting the successful implementation of the STEEMCC Strategic Plan include financial resources, human resources, and technology resources.

At a fundamental level, without funding, several of the strategic goals outlined in this strategic plan would be difficult, if not impossible to achieve. Financial resources are needed to engage consultants referenced across several goals; purchase needed hardware and software in support of goals aligned to Strategic Priorities 1 and 3; and to purchase a mobile health van – in support of the strategic goal around increasing access to high quality care to persons in STEEMCC's catchment area.

To move the needle in the area of innovative, high-quality care, it will be essential to employ additional providers, thus expanding STEEMCC's human resources capacity. While fiscal resources in this area, it will also be important to identify providers who have experience working with diverse populations and who are available in the areas of specialization where need is greatest. The appropriate technology, technology platforms, as well as hardware, software and peripheral supplies will be important to ensure the achievement of several objectives delineated in the strategic plan. The appropriate technology resources will also support referenced training around the adoption and implementation of the National CLAS Standards and the implementation of the Disparities Action Plan. Further, the technology resources will be important for moving forward with the Communications Plan as well as with the overall evaluation of the strategic plan implementation.

In essence, dedicated time, additional finances, additional staff, as well as the acquisition of appropriate technology, including hardware and software and related systems are foundational pillars for the successful implementation of STEEMCC's FY2023 – FY2025 Strategic Plan. STEEMCC's BOD and ED need to make the securing of these resources a high priority.

Closing Statement

Working collaboratively and purposefully, STEEMCC BOD, executive team, and other staff, as well as other primary, secondary, and key stakeholders can help ensure access to person-centered, innovative, high quality, culturally appropriate healthcare to vulnerable children and families in STEEMCC's catchment in particular, and in the St. Thomas-St. John District, more broadly, no matter their race, economic status, home language, or disability status.

APPENDICES

Appendix I. Work Groups and Work Group Membership

Appendix II. Summaries of Stakeholder Feedback

Appendix III. Self-Assessment Summary

Appendix IV. Environmental Scan

Appendix V. Impact Evaluation Summary

APPENDIX I. WORK GROUPS AND WORK GROUP MEMBERSHIP

Work Group I

Name	Title	Agency
Gloria B. Callwood	Vice Chair, Board of Directors (BOD)/ <i>Facilitator</i>	STEEMCC
René D. Crawford	Executive Assistant for Policy and Administration	STEEMCC
Mario A. Francis	Chair, Human Resources Committee, BOD	STEEMCC
Ann Mary Joseph	Administrative Assistant/ <i>Recorder</i>	STEEMCC
Dianne Morales	Executive Assistant to the Medical Director	STEEMCC
Hans Oriol	Treasurer, BOD	STEEMCC
C. Patricia Penn.	Project Liaison	STEEMCC
LaVerne E. Ragster	Strategic Planning Specialist	UVI-CERC

Work Group II

Name	Title	Agency
Francia Brin	Chair, BOD	STEEMCC
René D. Crawford	Executive Assistant for Policy and Administration	STEEMCC
Laurel Francis	Executive Assistant to Dental Director (<i>through 10/01/2021</i>)	STEEMCC
Ann Mary Joseph	Administrative Assistant/ <i>Recorder</i>	STEEMCC
C. Patricia Penn.	Project Liaison	STEEMCC
LaVerne E. Ragster	Strategic Planning Specialist/ <i>Facilitator</i>	UVI CERC
Nyra Stout	Operations Compliance Coordinator	STEEMCC

Work Group III

Name	Title	Agency
Karl Callwood	Chair, Public Information Committee, BOD	STEEMCC
Mario A. Francis	Chair, Human Resources Committee, BOD/ <i>Recorder</i>	STEEMCC
Patricia Lake-Blyden	Health Information Management, Manager	STEEMCC
Noreen Michael	Project Director/ <i>Facilitator</i>	UVI CERC
Sianna Wynter	Public Relations & Community Engagement Associate/ Special Projects	STEEMCC

Work Group IV

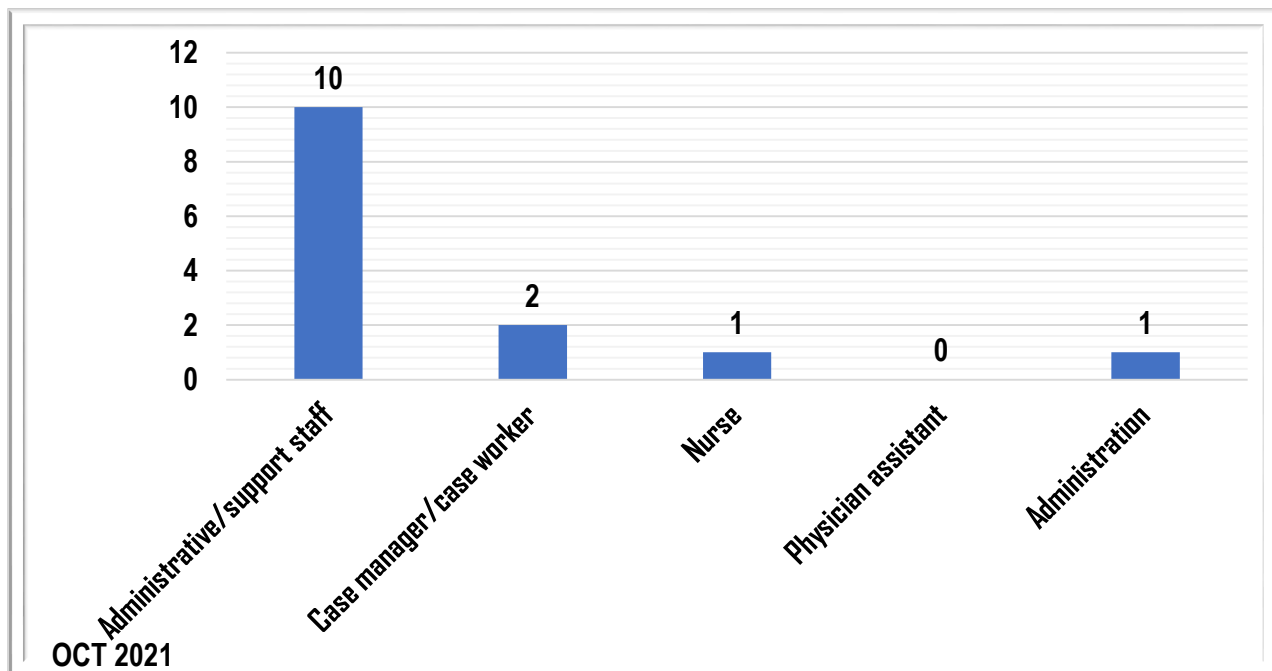
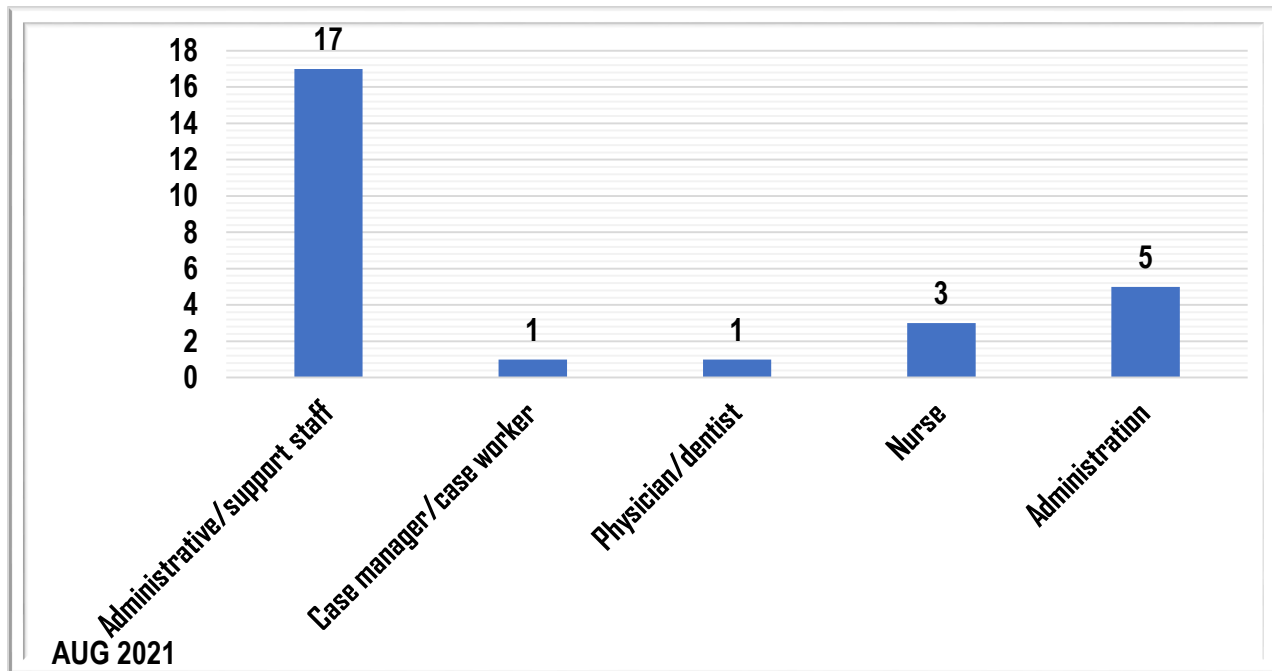
Name	Title	Agency
Eunice Callwood, RN	Nurse Manager	STEEMCC
Gloria B. Callwood	Vice Chair, BOD	STEEMCC
Lisa Corneiro	Executive Assistant to the Executive Director/ <i>Recorder</i>	STEEMCC
Marilyn Haynes	Member, BOD	STEEMCC
Noreen Michael	Project Director	UVI CERC
Dianne N. Morales	Executive Assistant to the Medical Director	STEEMCC
C. Patricia Penn	Project Liaison/ <i>Facilitator</i>	STEEMCC
LaVerne E. Ragster	Strategic Planning Specialist	UVI CERC

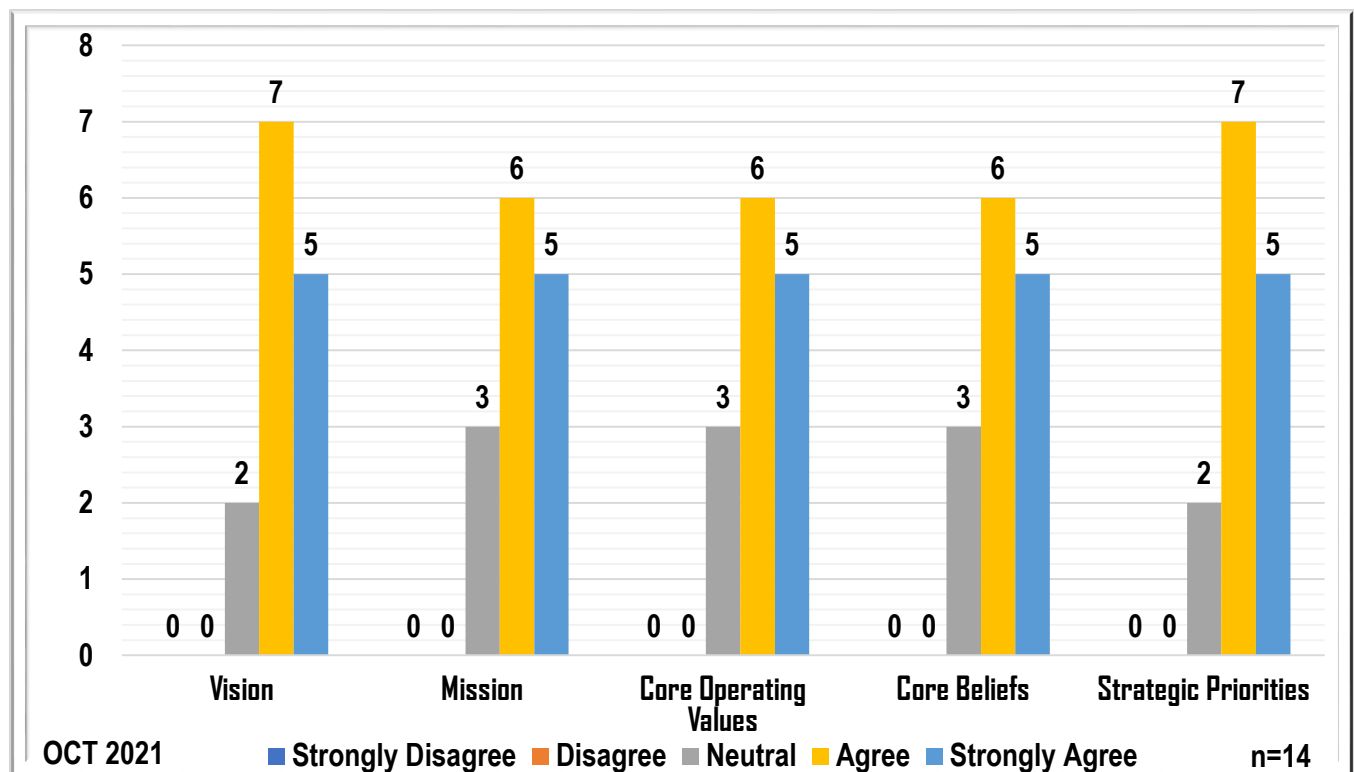
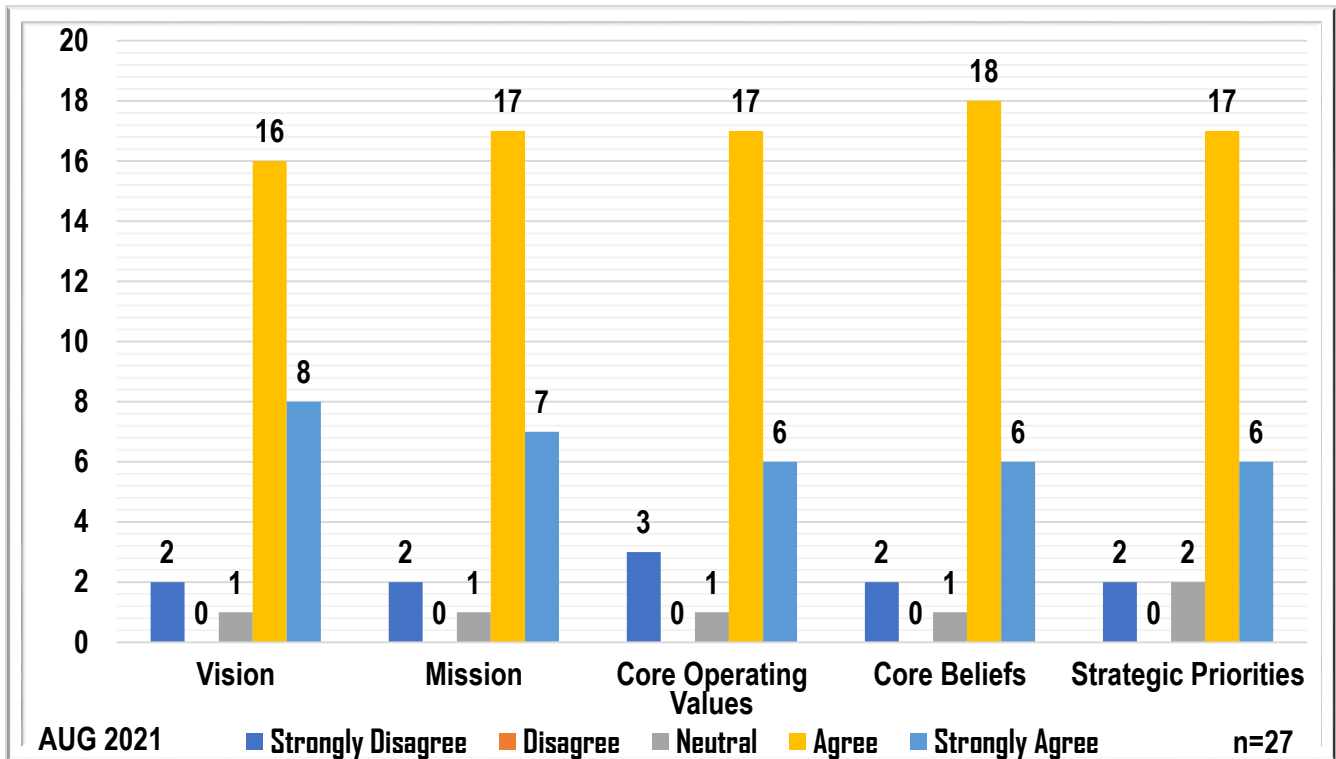
APPENDIX II. SUMMARIES OF STAKEHOLDER FEEDBACK

Appendix IIA. Survey Instrument

STAKEHOLDER ENGAGEMENT SESSIONS EXIT SURVEY – FOR STEEMCC PERSONNEL					
Please respond to this survey based on the August 27 th and/or October 29 th sessions held to present elements of the STEEMCC strategic plan to staff.					
1. Which of the following best describes you? Check all that apply.					
<input type="checkbox"/> Administrative/support staff <input type="checkbox"/> Case manager/case worker/outreach worker/social worker <input type="checkbox"/> MD/DDS <input type="checkbox"/> Nurse – APRN; RN; LPN; CNA <input type="checkbox"/> Physician assistant (PA) <input type="checkbox"/> Administrator/Director/Manager <input type="checkbox"/> Security/maintenance/transportation/translator/interpreter <input type="checkbox"/> Technician (IT) <input type="checkbox"/> Other, specify: _____					
Use the following scale to respond to item 2:					
1= STRONGLY AGREE [SA]	2= AGREE [A]	3=NOT SURE [N]	4=DISAGREE [D]	5=STRONGLY DISAGREE [SD]	
2. The following element of the draft strategic plan is supportive of improving health outcomes for vulnerable populations in STEEMCC's catchment area and the St. Thomas-St. John District.					
Strategic Plan Element:	SA	A	N	D	SD
Vision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Core Operating Values	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Core Beliefs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strategic Priorities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strategic Goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Objectives & strategies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. The proposed strategic priorities represent the most important areas that STEEMCC needs to focus on in the strategic plan being developed.					
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure					
4. I had sufficient opportunity to contribute during the session(s).					
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure					

Appendix IIB.

STEEMCC Staff Feedback: August 27th & October 29th Strategic Plan Presentations



Appendix IIC. Survey Instrument – Virtual Town Hall meetings

VIRTUAL TOWN HALL STAKEHOLDER ENGAGEMENT SESSIONS SURVEY MONKEY EXIT SURVEY

Please respond to this survey based on the November 10th, November 16th and/or November 17th, 2021 Virtual Town Hall Meetings in which key elements of STEEMCC's draft Strategic Plan were shared.

1. Which of the following best describes you?

- ☐ Health care provider
- ☐ Educator
- ☐ Business owner/entrepreneur
- ☐ STEEMCC client
- ☐ STEEMCC clinical provider
- ☐ STEEMCC staff (non-clinical)
- ☐ STEEMCC Board member
- ☐ UVI faculty, staff, or student
- ☐ Other, specify: _____

Use the following scale to respond to item 2:

1= STRONGLY AGREE [SA] 2= AGREE [A] 3=NOT SURE [N] 4=DISAGREE [D]
5=STRONGLY DISAGREE [SD]

2. The following element of the draft strategic plan is supportive of improving health outcomes for vulnerable populations in STEEMCC's catchment area and the St. Thomas-St. John District.

Strategic Plan Element:	SA	A	N	D	SD
Vision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Core Operating Values	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Core Beliefs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strategic Priorities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strategic Goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Objectives & strategies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

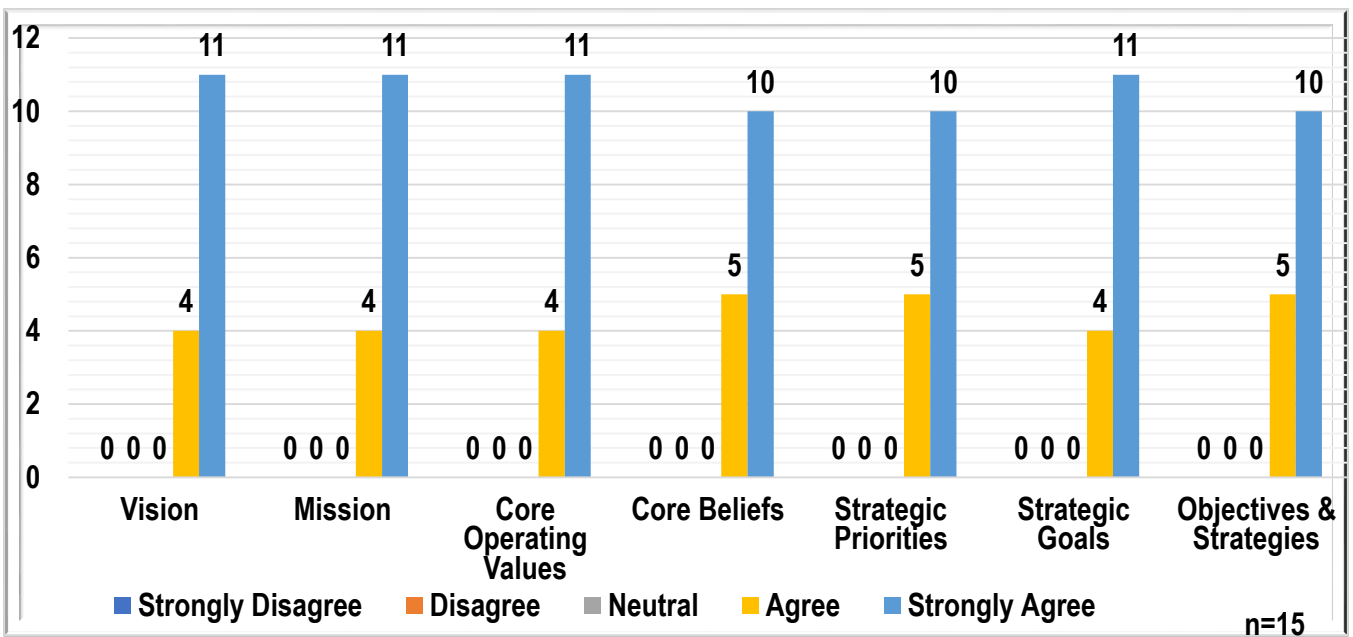
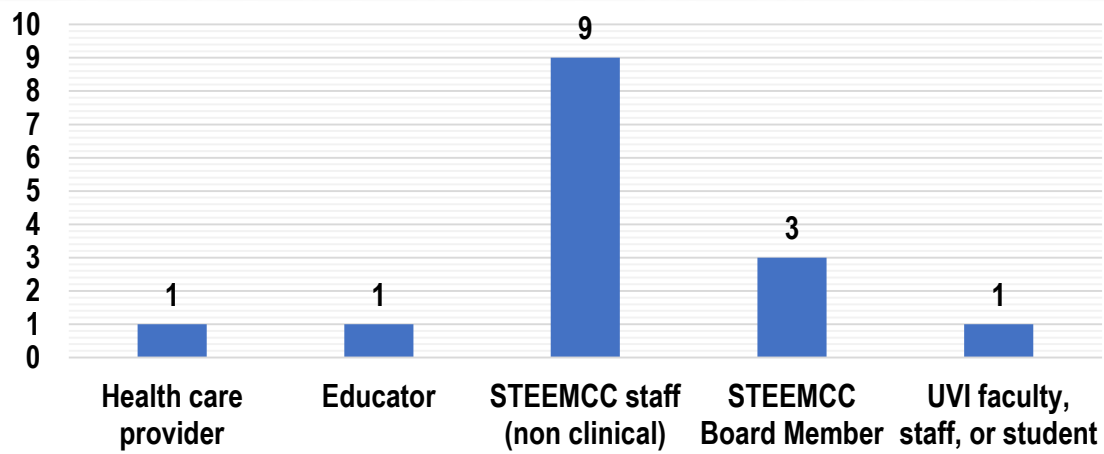
3. The proposed strategic priorities represent the most important areas that STEEMCC needs to focus on in the strategic plan being developed.

- ☐ Yes
- ☐ No
- ☐ Not sure

4. I had sufficient opportunity to contribute during the session(s).

- ☐ Yes
- ☐ No
- ☐ Not sure

Appendix IID. Feedback from Virtual Town Hall Meetings: November 10, 16, & 17, 2021, Strategic Plan Presentation



APPENDIX III. STEEMCC SELF-ASSESSMENT SUMMARY

Provided under separate cover.

APPENDIX IV. ENVIRONMENTAL SCAN

Provided under separate cover.

APPENDIX V. IMPACT EVALUATION SUMMARY

Provided under separate cover.



