COMMONWEALTH HEALTHCARE CORPORATION (CHCC)

Strategic Plan 2015 – 2020
The Commonwealth Healthcare Corporation (CHCC) Strategic Plan for the years 2015-2020 is a commitment to improving the standards of services to the people of the Commonwealth of the Northern Mariana Islands (CNMI) and those who visit our beautiful islands. The CHCC has made substantial progress in reaching autonomy while ensuring that quality services are provided consistently since the inception of the corporation in 2009.

This strategic plan has involved over a hundred staff, managers, community partners and volunteers in formulating the strengths and weaknesses to capture the desired outcomes for its varied health care systems in Saipan, Tinian and Rota. As the CNMI addresses its socio-economic challenges including stimulating economic growth, expanding educational opportunities and improving capacity building of our local workforce, the CHCC focuses on improving the overall health and wellbeing of its populace.

The goals and objectives outlined in the strategic plan reflect the desired outcomes that CHCC perceives as being critical to address the current state of health of our culturally diverse pacific islander population that live in the 3 main islands of the CNMI. For decades the people who called the CNMI “home” have travelled off island sometimes to foreign countries spending thousands of dollars for health care. Leaving family behind to seek care for medical, behavioral health and other conditions can be not only expensive and a financial strain on a family but the emotional support that helps to heal is often limited when a patient is off island.

Affordable and accessible care here at home is our ultimate long range-goal in the coming years. We visualize a thriving and highly efficient system that is responsive and responsible in every aspect of the work we do in prevention, treatment and aftercare for all that come to our doors. We seek partnerships with the government, our business and nonprofit partners and our consumers to make this vision possible. Won’t you join us?

Table of Contents

CCHC History, Vision, Values & Mission 3
Pillars of Excellence 4
Corporate Operational Strategies 6
Outcomes 8
Core Health Care Strategies 9
Our HISTORY

CHCC was created by Public Law 16-51 as passed by the House of Representatives, Sixteenth Northern Marianas Legislature at its First Regular Session and signed into law by then Governor Benigno R. Fitial on January 15, 2009. The Act was “to establish a public corporation for healthcare and related public health services known as the Commonwealth Healthcare Corporation.” In essence it combined the hospital, public health, behavioral health, the community guidance centers and all of its related programs in Saipan, Tinian and Rota. The primary rationale for this historic and monumental move was to “allow management more flexibility and authority to independently meet the acute and long term health care needs of the Commonwealth.” The expectation that this policy directs is “to coordinate the delivery of quality health care to all Commonwealth residents in a financially responsible manner. The Commonwealth Healthcare Corporation is intended to be a professionally managed, nationally accredited, independent public health care institution that is as financially self-sufficient and independent of the Commonwealth government as is possible.”

From the date of its passage in 2009 until today, the CHCC has worked tirelessly to fully realize the idea of autonomy and high functioning management of limited resources while delivering the best possible services to those entrusting the CHCC with their varied healthcare plans. We continue to do so every day and in every way as is reflected in our upcoming plans. We honor all those who have made contributions to the building of the healthcare systems in the CNMI and in crafting this model legislation to promote autonomy and stimulate efficiency in the delivery of healthcare in our islands.

VISION STATEMENT
Commonwealth Healthcare Corporation strives to improve the quality of life for the CNMI community through its innovative preventive/urgent care services to foster responsible lifestyles.

VALUES STATEMENT
CHCC is committed to exceed standards by providing a culture of quality care, honoring the dignity of its stakeholders and community, and promoting equality and accountability throughout the corporation.

MISSION STATEMENT
Improving CNMI health and well-being through excellence and innovation in service.
Pillars of EXCELLENCE

The Commonwealth Healthcare Corporation (CHCC) is committed to national and international standards of excellence that encompasses the five (5) pillars of excellence. We join other committed professionals in the healthcare fields who believe that the foundation of any good and progressive organization must embrace these pillars: People, Service, Quality, Finance and Growth.

People.

To be the employer of choice in the healthcare arena in Micronesia with a qualified workforce comprised of trained persons who are compassionate, respectful, caring and honest employees. The cadre of diverse professionals and support staff will be treated with fair and just employment practices and work in a safe and positive environment promoting personal and professional growth in the dynamic field of healthcare.

Service.

To consistently build an environment of trust and mutual respect with consumers, staff, community partners and stakeholders striving for the highest level of ethics and integrity in service delivery always safeguarding the health and well-being of all those seeking services from CHCC.

Quality.

To aim to constantly and aggressively improve delivery of consumer-centered quality health care by exceeding expectations and standards set in the healthcare industry and by the CNMI community. Will consistently work to ensure transparency, to gain and keep trust, and afford equality by and between consumers and providers in a clean, safe, and healthy environment.
Finance.

To hold its fiduciary responsibility to the optimum level in proctoring the financial resources entrusted to it by the people of the CNMI and its government. To always make financial decisions in a transparent manner that welcomes review and expects that such will indicate the highest level of care. To maximize the use of funds entrusted by the local and U.S. federal governments and by the community by utilizing these resources appropriately and leveraging them when possible in partnership with business and nonprofit entities ensuring the viability of the corporation to make returns on investments to the CNMI. To properly maintain current revenue streams and to encompass new revenue producing mechanisms reflected in a comprehensive business plan.

Growth.

To not only survive but thrive in a competitive and healthy environment that promotes the better wellbeing of its consumers and community through culturally diverse and competent programming and services tailored specifically to the populations targeted in a comprehensive and coordinated manner. To be committed to working collaboratively with all sectors of the community and within the region to meet common goals that will result in the prosperity and sustenance of the people of the CNMI, Micronesia and the pacific. To seek new and progressive ways to manage programs and to expand services that are best practices through a multitude of local, regional and international partnerships.
Our CORPORATE OPERATIONAL STRATEGIES

The CHCC is committed to a unified approach in improving the overall health and wellbeing of our people through sound programmatic, fiscal, and operational strategies designed to promote optimum standards of service delivery in a healthy, safe, and supportive environment for consumers and staff.

The corporate-wide strategies will be supported by these eight (8) operating strategies:

Operating Strategy 1

A Reorganizational plan restructuring of the organization with clear, reporting and authority lines including action plan formats and management team meetings schedules for the year, annual retreats with managers, staff, advisory board of trustees and partners.

Operating Strategy 2

A comprehensive recruiting and retention plan that will attract and maintain the most qualified and trained persons to the CHCC focused on fair and just treatment stimulating personal and professional growth.

Operating Strategy 3

A Service Plan Code of Ethics that strives towards responsiveness, responsibility, respect and accountability in a consumer-centered environment.

Operating Strategy 4

A facility plan that ensures that all CHCC facilities and program areas are clean, well equipped, appropriately stocked for necessary consumer supplies and materials and has appropriate space to conduct the best care.
Operating Strategy 5

A fully integrated electronic health record system that will improve consumer and provider contact in a confidential and coordinated manner and a comprehensive data management system to track patterns and trends in consumer profiles, presenting conditions, and consumer progress while encouraging research and the development of evidence based best practices.

Operating Strategy 6

A CHCC wide consumer satisfaction and community participation plan that will actively and regularly solicit feedback and ideas for improvement of services while stimulating partnerships.

Operating Strategy 7

A Financial business plan that reflects maximizing local and federal dollars while integrating new revenue generating mechanisms.

Operating Strategy 8

A plan to secure and maintain accreditation by the Centers for Medicare and Medicaid Services (CMS) for the CHCC Hospital and another accrediting authority for the Divisions of Public Health, Behavioral Health and the Community Guidance Centers.
OUTCOMES

for 2015-2020

1. **Fully accredited** hospital, public health, behavioral health and community guidance center.

2. **Financially stable** operations with newly added funding streams annually and full and appropriate usage of all U.S. federal and local government funding.

3. **Clean Audits** and **Full Compliance** to all Contracts and Grants.

4. Workforce that is **certified, licensed** and otherwise qualified and trained for their respective positions each employee with an annual contract and personal and professional plans in place making **competitive** and **fair wages**.

5. Increase in **consumer satisfaction** and **community partnerships** with the business and nonprofit sectors to ensure consistent feedback and participation in meeting CHCC goals.

6. **Decrease** in the incidence of the top six (6) major **causes of death** and **debilitation** in the CNMI (cancer, diabetes, hypertension/heart disease, teen pregnancy, HIV/STI, Substance Abuse).
Core Health Care Strategy 1:

ACCREDITATION

In 2015 the hospital will receive full accreditation from the Centers for Medicare and Medicaid (CMS) and will maintain these standards throughout the proceeding years. During the revisit of CMS surveyors, CHCC will receive no citations for non-compliance and will maintain this status for the following years. Bi Annual Reviews and Annual Mock Surveys will be conducted by consultants beginning in March 2015 who are experienced to conduct CMS surveys developing an action plan to better ensure that subsequent visits are uneventful.

In 2015 the divisions of Public Health, Behavioral Health and Community Guidance Center will complete their review of appropriate accrediting authorities. A recommendation for this authority will be made in a comprehensive orientation and presentation to key stakeholders including corporate officers, staff, advisory board of trustees, the Governor of the CNMI, the Speaker and Senate President of the CNMI Legislature and their respective Committee Chairs.

In 2016 an organizational readiness assessment by a consultant who has experience as a surveyor with the respective accreditation authority selected by CHCC will be conducted and citations fully addressed. An application for accreditation will be submitted by year’s end.

Each year, CHCC will convene reviews of the status of accreditation for the hospital and the divisions of public health, behavioral health and the community guidance and develop a plan to ensure that accreditation is maintained for subsequent surveys. Reviews will include participation of line staff, managers, advisory board of trustees members, business and nonprofit partners, key government officials from the Executive and Legislative branches and presented by the Accreditation Committee which its membership shall be comprised of a representative of each of these entities.
In 2015 a comprehensive business plan shall be developed that will include the maximum usage of all local and US federal government funds and identify at least two (2) new funding streams and revenue generating activities.

An assessment of all federal and local contracts will be completed in the first quarter of 2015 and a plan to ensure the strict monitoring and compliance of expenditures of all funding with monthly reports made. The return or non-use of all appropriated monies or grants received shall not exceed 10% each year. Quarterly reports shall include a plan to ensure that monies and correlating activities are carried out as planned. All funds that are unspent in its respective program year shall have a corrective action plan developed within five (5) days from the end of the project term.

The partnerships with business and nonprofit entities shall be solidified for the following program year no less than thirty (30) days prior to commencement of that year to maximize and leverage all government and locally generated resources.

The business plan shall be evaluated by a third party consultant who will make recommendations to the CHCC for amendments at least bi annually.
Core Health Care Strategy 3: CLEAN AUDITS & FULL COMPLIANCE

An audit committee will be organized in 2015 and will consist of a representative from the office of the Chief Financial Officer, the advisory Board of Trustees, and an accountant from the business community who will ensure that proposals are properly announced, received and evaluated for an auditing firm to conduct an annual audit within ninety (90) days from the end of the CHCC fiscal year.

If there are any material weaknesses or citations in the audits, a corrective action plan shall be developed within thirty (30) days from the time the audit findings have been made addressing specifically each item. A preliminary audit review will be conducted by a designated third party individual or firm with auditing credentials on a biannual basis and at least three (3) months prior to the next planned audit with recommendations for activities that will work towards a clean audit.

In the first quarter of 2015, a monitoring system will be developed that will tract the progress of every grant and contract for its deliverables and expenditures. Corporate officers will meet in a management team on a regular date and time each month to review and to develop a specific plan to preclude noncompliance/reporting and to increase probability of full implementation of all programs and attainment of all deliverables.
A thorough assessment will be conducted in 2015 that will identify the requirements for the licensure and credentialing of key staff positions including doctors, specialists, nurses, nurse assistants/aides, pharmacists, pharmacy technicians, laboratory technicians, social workers, substance abuse counselors, risk reduction counselors, prevention specialists, administrators, grant writers, program managers, accountants, bookkeepers, facilities managers, program coordinators and other positions. At the conclusion of the assessment will be a plan that will identify the courses, supervision, and internship requirements for the positions. Each staff will then have a personal and professional development that will meet the overall goals for licensure and credentialing. Quarterly personnel reviews will be conducted for each staff by their respective supervisor and monitored by the Human Resource Manager. An annual report will be developed showing the progress being made by each division.

Each employee will have a contract and a performance plan developed by the end of 2015 which will be reviewed in monthly supervision session and no less than quarterly.

A wage and salary scale will be completed by the end of the first quarter of 2015 with a plan for annual revisions by June of each year to be reflected in the preceding fiscal year budget.

Staff will be motivated and awarded by recognition of their best efforts through consumer satisfaction survey results and letters sent by the respective supervisor, CEO and the Advisory Board of Trustees at least quarterly with appreciation events coordinated with partners in the community.

Division retreats will be held no less than annually giving time to replenish energy, and encourage personal and professional development in a positive and supportive environment.
Core Health Care Strategy 5:  
CONSUMER SATISFACTION

A consumer-centered environment and positive, helpful and respectful attitude towards all who come into contact with CHCC staff will be the organizational cultural practice. All reception areas and staff will welcome consumers in a friendly and helpful manner striving for consumer – provider contact within a reasonable time and not more than 30 minutes from sign in always keeping confidentiality.

Consumers will have immediate and easy access to consumer satisfaction surveys at the end of each visit/contact with a CHCC provider. Suggestion boxes for consumers will also be available in addition to computers situated at check in or check out sites throughout all facilities of the CHCC.

Electronic health records will be used to ensure confidentiality and to encourage intra-communications with key providers on mutual cases.

Case reviews and multi-disciplinary case conferences with partners will be called on a regular basis to ensure maximum analysis, diagnosis and treatment planning/case management of all consumer cases.

Service plans will be made for each consumer with their signature attesting to their review and understanding of plan witnessed by a non-provider.

Referrals to specialists on or off island will be completed as needed in no more than 2 hours for life threatening cases and three (3) days for urgent care and seven (7) days for routine cases as triaged by the attending physician or key provider.

A monthly inventory of needed supplies and equipment will be made by respective division managers and submitted to the CEO. The inventory shall include recommendations for addressing any shortage, damaged or otherwise obsolete or unavailable items.

Focus groups will be held at least biannually by all programs with the summaries and recommendations submitted to the CEO for review and assignment for action within ten (10) days of receipt of reports.

Corporate management team meetings will be held to review all consumer satisfaction feedback, community recommendations and focus group summaries and the inventory of supplies, materials and equipment on a monthly basis with a correction action plan documented and sent out by the office of the CEO.
Core Health Care Strategy 6:

**DECREASE MAJOR CAUSES OF DEATH AND DEBILITATION**

Data, Statistics and management information systems (MIS) will be developed in 2015 to facilitate the timely and accurate collection and recording of conditions, diseases, prevalence and other information that will help to build a knowledge base for patterns and trends in the CNMI.

The six primary causes of death and debilitation have been identified by staff and community members through discussions and observations with some documentation. This list will be reviewed and confirmed in 2016.

By 2016, the Community Health Assessment will be completed and a MIS in place to record and report new information. A community wellness plan will then be developed by the year’s end 2016 with implementation in partnership with local, regional, and international partners from government, business and nonprofit sectors.

In 2017, CHCC will have a research and evaluation section that will focus on developing and initiating research projects, and piloting evidence based practices. Evaluation of all programs will be overseen by this section using academic resources from within the region to assist in this effort.

Suggestions for community-wide health policies and practices will be forwarded to the Governor, the CNMI Legislature, the Chamber of Commerce, the Marianas Association of Nongovernmental Organizations (NGOs) and the general public in December of each year. A series of how to stay well and be healthy as designed for the varied and diverse target groups shall be promoted through social marketing and in monthly events for the following year of the report.
HEALTH FOR CNMI CITIZENS

PREMIER HEALTHCARE SYSTEM

GOALS

STRATEGIES

PILLARS OF EXCELLENCE
WestCare Pacific Islands is a private, non-profit organization that provides a myriad of human services and technical assistance in the Pacific region. It is associated with a national foundation of non-profit organizations in 17 states and the Virgin Islands that has provided vital services for over 40 years.

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