

Theme	Goal	Objective	Measure	FY25 Baseline and Targets			
				Baseline	Threshold	Target	Stretch
Empower the Workforce	Employees choose ANTHC because it offers a fulfilling and rewarding career	Evolve culture to empower colleagues	1) Alaska Native/American Indian (AN/AI) Employees	1,042 (Jun 2024)	1,063	1,084	1,105
			2) Employee Engagement	3.99 (FY24 Survey Results)	4.02	4.06	4.09
			3) Provider Engagement	3.83 (FY24 Survey Results)	3.90	3.94	3.99
		Consistently and visibly invest in workforce development, reward high performance, and support strong succession planning	4) CLIMB Entry-Level Professional Development	New Measure	75%	80%	85%
	Employees have the tools and resources to be effective	Invest in strategies that systematically address deficiencies felt by ANTHC employees	5) Enterprise Resource Planning Transformation	Implementation Measure	80%	100%	120%
Enhance the System of Care	Patient care is coordinated across regions, episodes of care, and Tribal partners	Enhance referral management, scheduling/patient access, and care management	6) Electronic Health Record Strategy	Implementation Measure	80%	100%	120%
			7) Timely Travel Documents	New Measure	2 Days	5 Days	7 Days
			8) Urgent Referrals Seen	55% (May2024)	60%	65%	70%
			9) Centralized Scheduling	New Measure	10	12	14
	Invest purposefully in infrastructure to improve public health	Develop program/service line plans for key specialties (in person and telehealth), incorporating the diverse needs of each region and THO	10) Tribe and Tribal Health Organization Engagement	Implementation Measure	80%	100%	120%
			11) Comprehensive Piped Water and Sewer Design	New Measure	40	45	50
			12) Climate Initiatives	New Measure	14	16	18
	Invest purposefully in infrastructure to improve public health	Align health education, food security, and training initiatives with the strategic direction	13) Health Aide and Training Center Data Modernization	Implementation Measure	80%	100%	120%
			14) Nursing Scorecard	Implementation Measure	80%	100%	120%
			15) New Hotel Acquisition for Patients (if Board approved)	Implementation Measure	80%	100%	120%
Achieve Performance Excellence	Establish core metrics to measure and monitor ANTHC's progress towards performance excellence	Establish baseline performance and define metrics to track performance against quadruple aim (quality, access, cost, service) and strategic direction ("View 2025" and beyond)	16) Recommend the Hospital	62% (Jun 23 - May 24)	62%	62%	63%
			17) Communication with Nurses	76% (Jun 23 - May 24)	79%	80%	81%
	Deliver excellent services that improve the health and wellness of the community	Accelerate efforts to improve patient access, quality, and experience, including behavioral health services	18) Recommend Specialty Clinics	68.8% (Jun 23 - May 24)	69%	71%	73%
			19) Patient Housing Time To Receive Room Key	58% (Jun 2024)	60%	65%	70%
			20) Specialty Clinic Visits	128,818 (Projected 2024)	132,000	133,000	134,000
			21) Surgical Cases	20,400 (Projected 2024)	20,600	20,800	21,000
			22) Behavioral Health Services Action Plan	Implementation Measure	80%	100%	120%
			23) Grants Management and Reporting	New Measure	3	4	5
			24) Operating Margin	0.0% (Projected FY2024)	0%	0.5%	1.0%
Achieve sustainable financial health allowing for critical investments to be made	Meet key financial performance indicators critical to ensuring overall financial health						