

**SOUTH DAKOTA**

# West River AHEC Strategic Plan

Prepared by:  
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UNIVERSITY OF  
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## Introduction

In August of 2019, the South Dakota Area Health Education Center (AHEC) Program Office announced the establishment of a third center office to serve Western South Dakota. Housed on the Western Dakota Tech campus located in Rapid City, West River AHEC (WRAHEC) pursues five initial purposes as laid out in the organization’s bylaws. These include:

- (1) develop youth interest in health care careers;
- (2) provide opportunities for job shadowing, care exploration, and educational rotations;
- (3) facilitate continuing education for area health professionals in health care fields;
- (4) enhance community health education; and
- (5) sustain and expand an overall health care workforce pipeline for West River South Dakota.

In the two years since initial development, WRAHEC has: hired an executive director (Stephanie Mayfield), employed one other full-time staff, developed bylaws, received several millions of dollars in grant funds to support its endeavors, and held countless educational opportunities. In November of 2021, WRAHEC determined to further formalize its mission by holding a visioning meeting.

*Table 1. List of Attendees at Visioning Meeting*

WRAHEC Staff		
Stephanie Mayfield	Executive Director	
Cassi Severson	Program Coordinator	
Ana Fox	Intern	
Board of Directors		
Valeriah Big Eagle	Diversity Outreach and Engagement Coordinator	SDSU College of Nursing & Native American Nursing Education Center
Ann Bolman	President	Western Dakota Tech
Charity Doyle	Executive Director	OneHeart
Jim Kinyon	Executive Director	Catholic Social Services
Emily Leech	Director of Laboratory Services	Monument Health
Johnica Morrow	Pre-Health Pathways Advisor	South Dakota School of Mines & Technology
Tim Trithart	CEO	Community Health Center of the Black Hills

The Board of Directors and the WRAHEC staff (see Table 1) met with South Dakota AHEC program office staff, Bridget Diamond-Welch, who facilitated a full day discussion. Diamond-Welch, Ph.D., is the associate director of the Center for Rural Health Improvement (CRHI), which is housed in the University Of South Dakota School of Medicine. As part of its larger scope, CRHI provides strategic planning, evaluation, and grant writing and management services. The purpose of this meeting was to begin drafting the formal strategic plan.

However, there were several other discussions that also resulted in new visionary guidance for WRAHEC. For example, the group updated their mission statement and developed a decision guide for the WRAHEC executive director – to empower her to make choices between opportunities. In the following document, we present all these outcomes. Sections will include:

- Updated Mission Statement
- SWOT & Risk Analysis
- Initial Strategic Planning
- WRAHEC Decision Guide

Following meetings, Diamond-Welch took notes summarized by Severson and Fox to develop this document. Earlier versions of this document were reviewed by WRAHEC staff and the board of directors.

Diamond-Welch edited based on feedback. Support for this document was also provided by Clara Pierskalla, Research Associate at CRHI, particularly in terms of graphics and formatting. In the following sections, we will review the outcomes of these processes.

## Updated Mission Statement

The overall organization of this meeting was based on the premise that the work of the organization should all flow from its vision and mission. Prior to this meeting, the Vision and Mission statement for

WRAHEC were initially adopted from the overall AHEC program office.

The original (and continuing vision):

*The West River Area Health Education Center (WRAHEC) fosters a continuum of interdisciplinary health professions education focusing on the healthcare needs of the most underserved in our state. This is accomplished through academic-community partnerships in collaboration with state agencies and organizations to improve the supply and distribution of a culturally sensitive, quality healthcare workforce.*



Figure 1. Original Mission Statement

At this meeting, the vision statement was not examined in detail. The consensus is that it meets the current needs of WRAHEC. Future meetings

should continue to reexamine this statement to ensure it continues to provide the necessary guidance for action.

The initial mission statement (summarized in Figure 1), was:

*Connecting students to careers, professionals to communities and communities to better health.*

There was a consensus that this mission statement did not provide an accurate reflection of the work of WRAHEC. Through discussions, the following mission statement emerged:

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The mission of West River Area Health Education Center is to create collaborations and programs which inspire people to pursue healthcare careers and equip healthcare professionals to serve in rural and underserved communities throughout western South Dakota.

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**Collaborations** refers to formal (e.g. through board or cabinet representation or funders) and informal (e.g. delivering services to an organization) partnerships between stakeholders and WRAHEC that make programs possible.

**Stakeholders** include representatives from healthcare industries, educational institutions, workforce development offices, social service agencies, state and governmental agencies across the catchment area (including rural and Tribal areas).

**Inspire** was selected to encapsulate the idea of educating, exposing, exciting, and even funding the pursuit of healthcare careers.

**People** was selected as this encompasses all age-levels and every port of entry into these careers.

**Equip** was selected to indicate that WRAHEC would provide students and current professionals with the tools, education, excitement, and connections they need to work in rural and underserved communities (which are defined by HRSA).

## Target Audience

The term “people,” as mentioned above, was purposely left nebulous to allow for a large audience. At the same time, it is useful to have a more concrete target audience to help drive actions. The group discussed this and determined there were specific target audiences for the two different sections of the mission statement.

The target audience for the first part of the mission statement, “*inspire people to pursue healthcare careers*,” includes middle school, high school, colleges/university students, unemployed, and underemployed people. The target audience for the second part of the mission statement, “*equip healthcare professionals to serve*,” is really AHEC Scholars (which come from colleges and universities), current health professionals, and healthcare workers wanting to upskill. At each step, WRAHEC wants to have a focus on historically underrepresented and also first-generation students. Finally, as the end of the mission statement says, these people are those located in western South Dakota – the catchment area for WRAHEC.

## SWOT & Risk Analysis

After developing the mission statement, Diamond-Welch led a discussion analyzing the strengths, weaknesses, opportunities, and threats (SWOT) and another specific discussion of risks that may make it difficult for WRAHEC to deliver on its mission.

For a SWOT analysis, the group discussed the internal strengths and weaknesses inherent to the current operation of WRAHEC. This included things such as the excellent staff (strength) and limited capacity because of the small number of staff (weakness). They also discussed how external issues have affected, and/or have potential future implications on, the operation of WRAHEC. These included things such as robust job openings in healthcare (opportunity) and lack of competitive salaries compared to other states (threat). Table 2 lists the items developed during this discussion.

Table 2. SWOT Analysis

Internal		External	
Strengths	Weaknesses	Opportunities	Threats
<ul style="list-style-type: none"> <li>- Creative &amp; passionate approach</li> <li>- Education system knowledge</li> <li>- Engaged Board of Directors</li> <li>- Excellent and committed staff</li> <li>- Grant funds</li> <li>- Healthcare knowledge</li> <li>- Increased diversity in scholar's program</li> <li>- Robust programming</li> <li>- Safe communities</li> <li>- Strong community partnerships</li> <li>- Strong infrastructure</li> <li>- Supportive state office</li> </ul>	<ul style="list-style-type: none"> <li>- Cost of living is increasing in metro</li> <li>- Diversity of activities makes calculating ROI difficult</li> <li>- Lack grant writer on staff</li> <li>- Lack of funding opportunities</li> <li>- New organization (lack of awareness, restricts funding)</li> <li>- Staff take on too much</li> <li>- Staffing capacity</li> <li>- Started during a pandemic</li> </ul>	<ul style="list-style-type: none"> <li>- Almost guaranteed career placement</li> <li>- Community growth</li> <li>- Connected to national AHEC</li> <li>- Economic growth in region</li> <li>- Growing grant focus on healthcare workforce</li> <li>- Healthcare workforce shortages</li> <li>- Large high school population</li> <li>- Large pool of available talent</li> <li>- Lots of outdoor recreation as a community pull</li> <li>- Poverty rate</li> <li>- Regional focus on historically underserved</li> <li>- Untapped network partnerships (rural, DOL)</li> </ul>	<ul style="list-style-type: none"> <li>- Funding instabilities (grants, AHEC funding)</li> <li>- Growing economic disparity</li> <li>- Healthcare &amp; higher ed costs are rising</li> <li>- Healthcare salaries low</li> <li>- Isolated area</li> <li>- Limited housing &amp; schools in area</li> <li>- USD Nursing loss</li> <li>- Negative attitudes about western SD</li> <li>- Pandemic restricts access to schools</li> <li>- Political divide &amp; public health tensions</li> <li>- Racial divide</li> <li>- Resources tend to go to eastern South Dakota</li> <li>- State leadership not addressing poverty, housing, etc.</li> <li>- Travel jobs desirable</li> <li>- Youth with high levels of unmet needs (mental health, poverty, etc.)</li> </ul>

## Strengths

There was a great deal of agreement that WRAHEC has the core of what it needs to be successful. It has strong relationships (e.g. to stakeholders and their program office), an active and involved board, and strong connections to schools, healthcare industry, workforce programs, and other stakeholders. Together, the organization has the healthcare and education knowledge and experience to meet its mission – and it has the passion and creativity to be flexible and find solutions. The organization has already shown success securing grant funds. While only in operation for two years, the organization has a strong infrastructure and robust programming primed for growth. Finally, AHEC Scholars (an important required element of WRAHECs' programming) is showing great diversity.

## Weaknesses

As will be discussed below in more detail, almost every person in attendance noted that capacity is a key concern. While WRAHEC may have the infrastructure and programs ready to grow, it does not have the staff capacity to do so. At the same time, staff have difficulty saying “no” to new opportunities, resulting in over commitment for their time. This should be a major concern in terms of possible staff burnout. WRAHEC really began right around the time of the stay-at-home orders for the COVID-19 pandemic. As a result, they were somewhat stunted in their ability to develop relationships and get information out about opportunities. Funding opportunities may necessitate additional programs (which is difficult given capacity), and there is no staff grant writer. Finally, the sheer number and type of activities undertaken by the staff make it difficult to calculate an accurate return on investment (ROI).

## Opportunities

There was agreement that WRAHEC is well-positioned to take advantage of current changes in the population, workforce structure, and overall national environment. During the pandemic, the population in West River South Dakota actually grew – while much of this growth is likely restricted to Rapid City. South Dakota performed well economically during this time. The pandemic and the population growth have both placed a strain on the healthcare sector, resulting in more demand for healthcare professionals. This strain is also occurring nationwide, meaning that many federal agencies are dedicating dollars for grant programs to address these strains.

One board member wrote that 65% of students are currently uncommitted to a career path. With the demand for healthcare workers, there is almost a 100% guarantee that a student will be able to get a solid paying job after completing their education. Beyond the growing population, there is also a rich untapped pool of talent (impoverished and BIPOC individuals) in West River South Dakota. With its focus on historically underserved and first generation (see target audience), WRAHEC also can help enrich outcomes for these individuals.

Finally, while WRAHEC has expanded its connection to existing agencies and organizations in its service area, there is still room for growth. The board can expand to include members from rural areas and expand underserved representation. It can also take advantage of its connection to the National AHEC organization and the program office.

## Threats

The group discussed many threats, stemming from national, state, and local levels. Nationally, there is concern about changing grant funding and the level of funding that will be available to WRAHEC in this cycle. National changes in the economic climate affects the local area through growing economic disparity, rising healthcare costs, rising higher education costs, and political divisions – particularly those around public health issues.

These national issues occur at the state as well. Some argued that state politicians are not adequately addressing poverty and that public health tensions are inflamed. Others noted that resources, when they do come to the state, tend to be concentrated in eastern South Dakota. Board of Regents decisions



also affect operations – most notably the removal of the USD Nursing program from Rapid City. Salaries in the state for healthcare are lower than other areas, making travel jobs more attractive.

All of the above compounds what occurs at the local level. Rural areas lack housing. Rapid City is seeing a population boom that is resulting in community members, and medical students, being priced out of affordable quality housing. While some may enjoy the outdoor activities on offer, there was some feeling that there is a bias against western South Dakota. Racial divides that occur nationally and statewide are also often on greater display in our communities. Finally, our service area is very rural – most of it is considered frontier – where people can become very isolated from services.

## Risk Analysis

Given that it is essential that WRAHEC is prepared to deal with potential problems, we had a final discussion about risks. The group was asked to keep these risks in mind as they form the strategic plan. Further, this assessment can provide other direction for board action. While many of these repeated larger structural concerns that should be monitored (e.g. school closures, USD Nursing leaving Rapid City, increase cost of education, need for housing), there were a few major risks which can be more immediately addressed: capacity, board representation, and funding.

### Capacity

Likely the largest risk to WRAHEC at this time is capacity. The organization has two full-time employees and one intern. These individuals are responsible for all programs and the majority of the fundraising. The result is that the organization is restricted in the number of opportunities it can take advantage of. Further, the staff become vulnerable to burnout and fatigue. Two potential solutions were proposed as immediate solutions to this issue:

1. A train-the-trainer program where staff train volunteers and board members in how to staff some events (such as setting up the 250lb inflatable brain).
2. The creation of the WRAHEC Decision Guide (included here). This document empowers the staff to make decisions about which activities they should prioritize and which they can turn down.

The urgency of this risk should not be minimized. After this initial meeting, Severson moved on to a new position outside of WRAHEC, leaving only the executive director as paid staff. Another type of limited capacity is space. WRAHEC continues to create programs that have materials (e.g. the brain, mental health kiosks) which need to be stored securely.

### Board Representation

Another risk identified was the lack of board representation from rural areas and school administrators. The service area of WRAHEC is very large, yet the board composition is mainly from Rapid City. There is also no current secondary school representation. Yet, these are two large components of the target audience of the organization – making their insight fundamental. Expanding the board can also address the concern the board had of the current limited awareness of WRAHEC across the region. The group discussed inviting additional members, which is allowable under the by-laws.



## Funding

A key risk was a concern over funding. With the AHEC grant support being limited, there is a gap in funding needs (approximately \$75,000) to operate at current capacity. Frequently, grant programs target new programs, rather than allowing funding of continuing efforts. Mayfield has been working on fundraising efforts, and these will continue. Some federal dollars may be able to be leveraged to pay for costs of an expanded staff under new programs (see capacity concern). A related concern is being able to illustrate the return on investment (ROI). Board members were very interested in making sure that a process to calculate the ROI could be put in place. This can further be used in fundraising efforts.

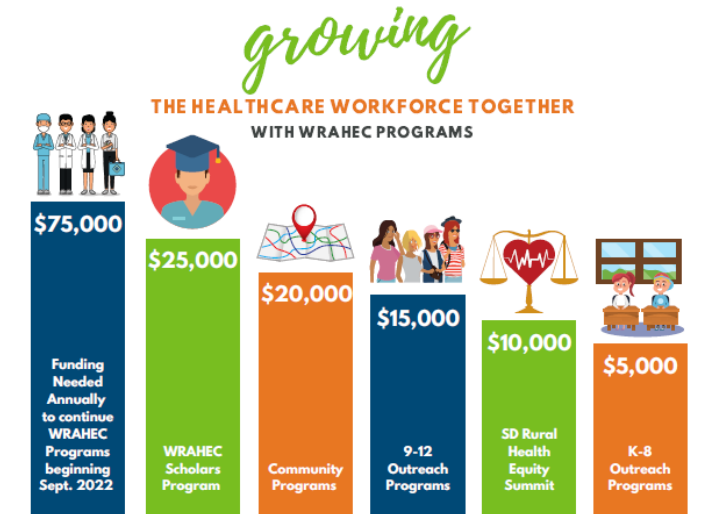


Figure 2. Funding Needs

## Initial Strategic Planning

Through discussion, the group developed four overarching goals. These goals are directly associated with the mission statement of WRAHEC to create collaborations and programs which inspire people to pursue healthcare careers and equip healthcare professionals to serve in rural and underserved communities throughout western South Dakota. Recall that “people” and “throughout western South Dakota” are indicative of the target audience for each goal.

First, “WRAHEC” corresponds to an organizational operations goal. The organization includes: board oversight, funding, equipment/tools, facilities/utilities, and staff (hiring, payment support, and training). Second, “collaborations” refers to what we call an outwards connections goal – or how WRAHEC develops partnerships to those in the healthcare industry, potential investors, educational organizations, workforce development offices, government and state agencies, and community partnerships in rural areas and with underserved populations. Third, “people to pursue healthcare careers” includes development of career exploration tools, community outreach, camps, hands-on/experiential learning, presentations, scholarships/funding support, wrap-around support (social, emotional, advising, etc.). Fourth, and finally, “healthcare professionals to serve in rural and underserved communities” refers to work developing those already in, or committed to, a healthcare profession and encouraging their placement in rural and/or underserved areas specifically within western South Dakota.

There are five subsections below – four for each of the four goals and one that presents an overall table of the strategic plan. Each goal section will review the overall structure of the goal through presenting a mind map. Following this, we include a strategic action table for the goal. The last section presents an overall table summarizing the strategic plan for use in presentations and short overviews.

## Goal 1. Operations

The full goal is stated as: **Develop & maintain necessary operational resources to meet WRAHEC mission.**

We selected the terms “develop” and “maintain” to indicate that some resources have already been obtained (e.g. we have an initial board and an executive director) but that others need yet to be obtained and/or replaced (e.g. staff turnover). “Operational resources” focus on the people (board, staff), place (facilities), things (e.g. equipment), and funding necessary for WRAHEC to operate and sustain services (see the green in Figure 3 and the blue which provides more detail). Importantly, all three of the large identified risks (see above) are associated with this goal.



Figure 3. Mind Map of Goal 1: Operations

This goal is also represented in the strategic action plan table (see Table 3) below. Here, the overall goal (orange in the above mind map) is the topic of the entire table. The action steps (green in the above mind map) are the particular actions that also subsume the specific elements of the action steps (blue in the above mind map). This goal ensures that WRAHEC maintains the board that oversees its efforts, appropriate staffing, space, and the financial capacity to achieve the above and sustain into the future.

*Table 3. Operations (Goal 1) Strategic Action Plan Table with Action Steps*

Action Steps	Responsible Party	Resources Needed	Progress Indicator	Completion Date
Review strategic plan yearly, including analysis of evaluative measures.	BOD Staff PO	Strategic & evaluation plan	<ul style="list-style-type: none"> <li>Review completed (yes/no)</li> </ul>	Yearly
Meet board guidelines for representation each year.	BOD Cabinet Staff	Connections to stakeholders through cabinet & BOD makeup	<ul style="list-style-type: none"> <li># BOD members</li> <li>Geographic representation of BOD members</li> </ul>	Yearly
Meet Bylaw rules for BOD meetings.	BOD Staff	Meeting location Zoom (or other)	<ul style="list-style-type: none"> <li># Meetings each year (min 6)</li> </ul>	Yearly
Maintain appropriate staffing to meet the mission each year.	BOD	Hired staff Funds for pay & benefits	<ul style="list-style-type: none"> <li>Staff feedback</li> <li># Events held</li> </ul>	Yearly
Maintain appropriate workspace to meet the staff needs each year.	BOD	Funds	<ul style="list-style-type: none"> <li>Staff feedback</li> </ul>	Yearly
Maintain, acquire and develop equipment as needed to meet strategy needs each year.	BOD Staff	Funds Storage space	<ul style="list-style-type: none"> <li>List of equipment</li> </ul>	Yearly
Fundraise at least \$50k a year from community investors for programming.	BOD Staff	Staff time Materials (e.g. fliers)	<ul style="list-style-type: none"> <li>Amount fundraised</li> </ul>	Yearly
Continually identify and pursue grant funding relevant to mission.	BOD PO Staff	Staff time Program office support	<ul style="list-style-type: none"> <li>Dollars applied</li> <li>Dollars received</li> </ul>	Yearly
Ongoing analysis of needed funding needs & ROI.	BOD PO Staff	Staff time Program office support	<ul style="list-style-type: none"> <li>ROI</li> </ul>	Ongoing

BOD = Board of Directors; PO = AHEC Program Office

## Goal 2. Outward Connections

The full goal is stated as: **Foster connections with stakeholders to leverage relationships to maximize outreach and inform “community driven” activities.**

The first step we took when creating this goal was a mind map (see Figure 4) about what was involved in ensuring that WRAHEC has the connections it needs to involve necessary stakeholders (defined above and summarized in Figure 4) in their programs. This may be through involvement in a program (e.g.

hosting an event, supporting marketing for an event) or via funding WRAHEC (e.g. providing support for the purchase of materials, providing space in kind).

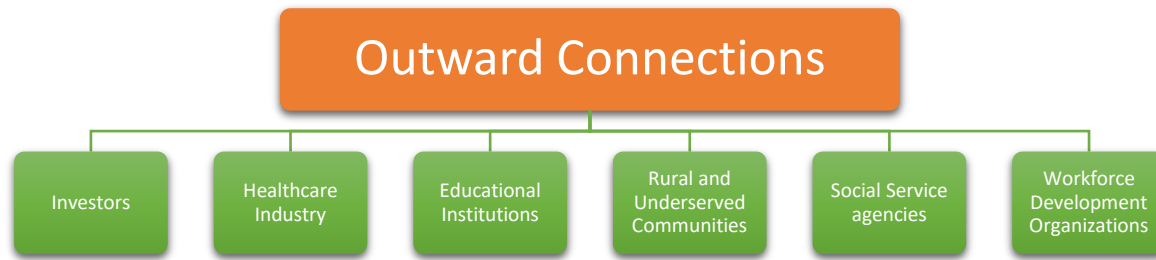


Figure 4. Mind Map of Goal 2: Outward Connections

At its core, this goal is associated with the cabinet of WRAHEC and its relationship to other stakeholders (see Figure 4). The cabinet, which needs to meet yearly, is composed of these stakeholders and should include members from across the target area. At these yearly meetings, the cabinet helps WRAHEC staff and board create yearly priorities for its work. WRAHEC is first seeking to create a cabinet that is fully representative of their catchment area.

Yet, not every stakeholder may have the capacity to sit on the cabinet. Further, turnover in staffing and leadership at these institutions necessitates continual connections to be reformed between the organization and WRAHEC. As a result, the executive director needs to continually work on relationship building with all of these entities. These connections can result in WRAHEC being invited to provide programming or even receiving financial support for its efforts.

Table 4. Outward Connections (Goal 2) Strategic Action Plan Table with Action Steps

Action Steps	Responsible Party	Resources Needed	Progress Indicator	Completion Date
Connect w/cabinet on at least a yearly basis to learn about the workforce and community needs and set priorities.	BOD Executive Director	Meeting location Zoom Facilitator	• Yearly report on priorities created	Yearly
Cabinet will represent all 16 counties by year 5 including rural and underserved representation to make sure all demographics are represented.	BOD Staff	None	• Cabinet representation map	2027
Make personal connections w/healthcare, workforce and	Executive Director	Funds for travel Materials	• # executive director	Ongoing

community stake holders and stay abreast of changeovers.			meetings with stakeholders	
Leverage connections when possible to meet other objectives.	BOD Staff	Staff time Materials	<ul style="list-style-type: none"> <li># stakeholders involved in programs</li> <li>Fundraising supports</li> </ul>	Yearly

BOD = Board of Directors

### Goal 3. People to Healthcare Careers

The full goal is stated as: **Increase exposure and access to programs to generate interest in healthcare careers.**

Exposure refers to having experiences related to healthcare careers and/or underserved and/or rural areas. Access refers to having the support needed (either financial or social services) for people to be able to pursue healthcare careers.



Figure 5. Mind Map of Goal 3: People to Healthcare Careers

This goal really focuses on creating pathways for different audiences (from those who are currently in school to community members who need to reskill) into healthcare careers. It does so by exposing people to healthcare careers, educating them about different career opportunities and the content of different jobs, and equipping them to complete the pathway (e.g. through scholarships, accessing resources, or other counseling). Exposing and educating at times can cross – as educational experiences (such as camps) also serve to expose. The difference in categorization should be the depth and breadth of materials covered within the experience. Each year WRAHEC is looking to grow the number of students exposed and educated about healthcare careers.

*Table 5. People to Healthcare Careers (Goal 3) Strategic Action Plan Table with Action Steps*

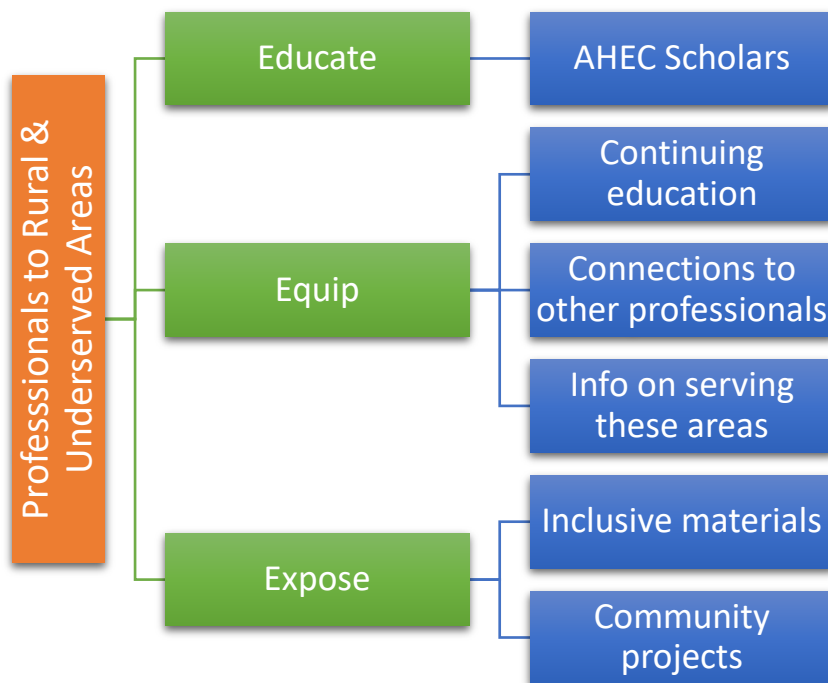
Action Steps	Responsible Party	Resources Needed	Progress Indicator	Completion Date
Grow exposure of people to healthcare careers by ____ each year.	Staff	Staff time Materials	• % growth in each method	Yearly
Grow WRAHEC presence to include 16 counties by year 5.	BOD Staff	Staff time Materials	• Exposure location map	2027
Provide <u>5</u> students scholarships each year.	BOD Staff	Scholarship Funds	• # students supported	Yearly
Meet the WRAHEC goals of H1B work plan by Jan 2025.	Staff	DOL funds Redfield PO	• # CNA, LPN, RN, BSN	2025
Continue to provide general support for students as needed.	Staff	Staff time	• #/\$/type support provided	Yearly

BOD = Board of Directors; DOL = Department of Labor H1B grant; PO = Program Office

## Goal 4. Professions to Rural & Underserved Communities

The full goal is stated as: **Educate, equip, and expose healthcare professionals to serve in the rural/underserved communities in western South Dakota.**

This goal is currently closely associated with the AHEC Scholar program. Educate refers to the content of the scholar's program. Equip refers to providing other tools and connections needed to serve in these areas. Expose refers to having experiences with rural and underserved communities.



*Table 6. Professionals to Rural & Underserved Communities (Goal 4) Strategic Action Plan Table with Action Steps*

Action Steps	Responsible Party	Resources Needed	Progress Indicator	Completion Date
Train at least 15 scholars per year.	Staff	Staff time	• # scholars	Yearly
Grow AHEC Scholar diversity to become more representative of the population at-large.	Staff	Staff time	• Demographics of scholars	2027
50% AHEC scholar graduates will be employed as healthcare professionals in a rural/underserved community each year.	Staff	Tracking method	• % students so employed	Yearly
WRAHEC will annually review educational materials that will cover topics relevant to prepare them for serving rural & underserved communities.	Staff	Staff time	• Topic chart	Yearly
Each WRAHEC Scholars Cohort will participate in a Community	Staff	Staff Time Community Collaborations	• Yes/No that all Scholars	Yearly



Impact Project that serves either rural or underserved populations.			participated in the activity	
Provide ongoing education and connection opportunities for those serving in rural & underserved areas.	Staff PO	Grant funds Staff time	<ul style="list-style-type: none"> <li># continuing ed at Mission Possible</li> <li># attend Rural Healthcare Summit</li> <li>Reports of both events</li> </ul>	Yearly

## Overall Summary of Strategic Plan

A succinct representation of the above strategic plan can be found below.

West River AHEC Strategic Plan (2022-2027)			
Mission			
The mission of West River Area Health Education Center is to create collaborations and programs which inspire people to pursue healthcare careers and equip healthcare professionals to serve in rural and underserved communities throughout western South Dakota.			
Key Goals			
Operations	Outward Connections	People to Healthcare Careers	Professions to Rural & Underserved Communities
Tasks			
<ul style="list-style-type: none"> <li>Review strategic &amp; evaluation plan</li> <li>Maintain BOD</li> <li>Staff appropriately</li> <li>Maintain workspace</li> <li>Purchase &amp; maintain equipment</li> <li>Fundraise</li> <li>Apply for grants</li> </ul>	<ul style="list-style-type: none"> <li>Yearly cabinet meeting</li> <li>Stakeholder visits</li> <li>Expand cabinet representation</li> <li>Leverage connections</li> </ul>	<ul style="list-style-type: none"> <li>Grow exposure events</li> <li>Expand geographic reach of events</li> <li>Provide scholarships</li> <li>Meet DOL work plan</li> <li>Other support provided</li> </ul>	<ul style="list-style-type: none"> <li>15 scholars yearly</li> <li>Scholars reflect demographics</li> <li>50% in healthcare in rural and/or underserved areas</li> <li>Review of materials</li> <li>Events</li> </ul>
Key Performance Measures			
<ul style="list-style-type: none"> <li>BOD meetings</li> <li>Staffing #s</li> <li>Fundraising \$</li> <li>Grant \$</li> </ul>	<ul style="list-style-type: none"> <li>Stakeholder visit #</li> <li>Cabinet # and membership map</li> <li>Priority report</li> </ul>	<ul style="list-style-type: none"> <li>% growth events</li> <li>Geographic map of events</li> </ul>	<ul style="list-style-type: none"> <li># scholars</li> <li>Demographics</li> <li>Placement tracking</li> <li>Topic coverage</li> </ul>

<ul style="list-style-type: none"> <li>• ROI</li> </ul>	<ul style="list-style-type: none"> <li>• Fundraising/program source analysis</li> </ul>	<ul style="list-style-type: none"> <li>• Scholarship students/\$</li> <li>• DOL report</li> <li>• Other support (to be defined)</li> </ul>	<ul style="list-style-type: none"> <li>• Evaluation of Mission: Possible</li> <li>• Evaluation of Rural Health Equity Summit</li> </ul>
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## WRAHEC Decision Guide

As discussed above, West River AHEC has an issue with staff capacity. The amount of work taken on at the current staffing level is commendable, but not sustainable. To deal with this issue, the board of directors has decided to empower WRAHEC staff to determine which growth opportunities they pursue. The board provided the following guidelines to help with these decisions.

When presented with an opportunity, the first step is to determine if it fits with the current vision and mission of WRAHEC. If it does not, the staff should go no further.

If it fits with the vision or mission statement, staff should determine if it forwards any of the current objectives. If it does not, the staff is free to go no further. They are allowed to pursue it, however, if the opportunity would expand in a way that is consistent with the related goal.

If it fits with a current objective or expands in a way that is consistent, then the staff should pursue it if it meets the following criteria:

1. The staff have the capacity to take the work on and/or the project can expand capacity to enable the project to be complete (e.g. new staff written into a grant budget);
2. The opportunity would expand WRAHEC reach within their catchment area either by covering a new school and/or partnering with a new stakeholder;
3. The number of students or professionals reached would significantly support the exposure goal under goal 3.
4. Doing this work at this time would provide the groundwork for future funding potential.

As related to the first point above, the staff have the ability to turn down opportunities if they are at capacity. This includes making sure that staff have time between events for record keeping and other activities. For example, if a camp was just completed, staff should feel empowered to turn down a presentation the following week. Further, staff should feel empowered to turn down or provide an alternative date offering any event that does not have sufficient lead time prior to the requested time.