1. Improve outcomes on all HRSA Clinical Measures

2. Assess patients' social determinants of health needs upon enrollment in Compass Rose.
   MEASURES:
   a. The percent of HCH Mental Health patients who received the Screening, Brief Intervention, Referral and Treatment (SBIRT) during the reporting year
   b. Percent of HCH Mental Health patients who have been referred to Mental Health Services and % of referred patients with an episode opened within 30 days
   c. Percent of HCH MH patients who received follow up after PES (episode/ touch from HCH MH team within 2 weeks)

3. Diabetes: Create individualized improvement plans for diabetics seen in HCH department with a Hemoglobin Test (A1c) over 9 or missing an A1c
   MEASURES:
   a. Percent of HCH diabetic patients whose most recent A1c was over 9.0 or missing
   b. Percent of HCH patients with an A1c over 9.0 or missing who received a follow up from HCH during the reporting year

   MEASURES:
   a. % of patients 50-74 years of age who had appropriate screening for colorectal cancer
   b. % of women 51-73 years of age who had a mammogram to screen for breast cancer
   c. % of women 23-64 years of age who were screened for cervical cancer

5. Increase availability for addiction treatment in all HCH Clinics
   MEASURES:
   a. Percent of HCH patients with an opioid use disorder that were offered buprenorphine or referred to methadone clinic during the reporting year
   b. Percent of HCH patients with an opioid use disorder that received the prescription for buprenorphine during the reporting year

6. Increase Communicable Disease screening with Point of Care Tests (POCT)
   MEASURES:
   a. Percent of HCH patients due for screening during the reporting year with a completed screening order for HIV and syphilis.
   b. Percentage of positive HIV and syphilis POCTs with completed follow up labs

7. Increase percentage of patients who have insurance by 2.5% by December 2024 relative to 2022.