



Strategic Plan

2026-2028

*Adopted by the Midland Memorial Hospital Board of
Trustees, September 25, 2025*

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Executive Summary

When Midland Memorial Hospital opened in 1950, the mission was clear: to serve the healthcare needs of our community. Today, the mission of Midland Health is essentially the same, although to accomplish it we must take a course of action that extends far beyond the hospital walls. With the ever-changing face of healthcare, it is essential that we not only work to create a strategic and focused plan to serve our community according to this mission, but also that we be intentional about planning for our future. In doing so, great thought was given to align our strategic plan with the “quintuple aim” national standards of (1) delivering a high-quality patient experience of care; (2) being good stewards of limited healthcare resources; (3) improving the health of the population we serve; (4) supporting an engaged and productive workforce; and (5) advancing health equity.

Mission Statement: *Leading healthcare for greater Midland.*

Vision: *Midland will be the healthiest community in Texas.*

Strategic Pillars:

- ❖ **Quality and Patient Safety Focus**
- ❖ **Patient Experience**
- ❖ **Workforce Engagement**
- ❖ **Financial Health**

Core Values:

- ❖ ***Pioneer Spirit***
 - We tell the truth and honor commitments.
 - We innovate and embrace change.
 - We are careful stewards of our resources.
 - We overcome problems without complaining.
 - We exceed quality and safety expectations through teamwork and partnerships.
- ❖ ***Caring Heart***
 - *We are West Texas friendly...*treating all people with kindness and respect.
 - We care for the hearts and souls of our patients and visitors.
 - We see the human being first and then the medical condition.
 - We slow down and listen; true healing begins with empathy.
 - We honor diversity and promote the dignity of each individual.
- ❖ ***Healing Mission***
 - We do our best to improve the health and well-being of our community.
 - We are continuous learners.
 - We create an environment that supports the healing process.
 - We care for ourselves, so we are able to care for others.
 - We find joy in our work and have fun together.

Strategic Pillars

Over the course of the next 3 years, we will be focusing on 4 primary strategic priorities to help us accomplish our Mission, while maintaining our commitment to our Vision and Core Values. Those priorities are as follows:

1. **Quality and Patient Safety Focus:** We will continuously improve clinical practices as needed to deliver the highest quality care possible in each Midland Health setting. This will require thorough engagement with providers and staff across the system to ensure that best practices are followed and that outcomes meet or exceed national standards.
2. **Patient Experience:** We will strive to put the patient and their experience at the center of everything we do. The results of these efforts will be transparent to the people we serve, with the specific intention of improving the overall health of the community. We will continue to develop and sustain the market-facing brand of the organization, including the development of consumer relationships and patient, family and employee engagement.
3. **Workforce Engagement:** We will advance our culture connecting personal values with our organizational values - Pioneer Spirit, Caring Heart, Healing Mission – whereby our people can be and perform at their best. This will include enhancement of our portfolio of staff development and wellness opportunities.
4. **Financial Health:** We will build on, refine and create new processes and procedures to ensure organization-wide efficiency. This includes demonstrating improvement, highlighted by competitive performance across specific operational measures compared to key benchmarks. Consistent with these expectations, we will carefully steward our resources to assure our ability to adequately invest in the organization's long-term needs.

Goals and Key Performance Indicators

Quality and Patient Safety Focus Goals:

- 1) Achieve improved outcomes in all components of quality and patient safety reporting systems with a goal of zero preventable harm.
- 2) Identify the quality metrics tied to financial incentives the Clinically Integrated Network (CIN) can impact and create a plan to achieve meaningful improvement in scores and related reimbursements by the end of the next measurement period.
- 3) All published mortality and infection rates at or better than published national benchmarks.
- 4) Coordinated continuum of care:
 - a. Notable improvement of public infrastructure.
 - b. Continue to grow and improve relationships with our post-acute care preferred providers.
 - c. Launch the Care Coordination Team by end Q1 of FY26.
 - d. Develop new care pathways directly related to the TEAM (Transforming Episode Accountability Model) Payment Model.
- 5) Comprehensive, coordinated behavioral health care system established.
- 6) Establish data collection and reporting for social drivers of health, identify disparities and collaborate with community-based organizations to advance health equity.

Key Performance Indicators:

- 1) Obtain Leapfrog score of a “B” by end of 2026 and an “A” by the end of 2028.
- 2) Achieve patient safety outcomes that are at or better than the CMS published benchmarks each quarter including mortality, infection and readmission rates.
- 3) Increase provider participation in MQA by end of FY26. (As of 9/1/25, MQA has 472 providers.)
- 4) Share real time quality data with MQA physicians by end of FY26 to increase percentage of quality bonus payout. (FY25 thru Q3 total payout is \$120,126.14)
- 5) Enable a comprehensive longitudinal clinical record view that enables providers to access a unified, patient-centered history across all points of care by end of FY26.
- 6) Permian Basin Behavioral Health Center to be operational by April 2026.

Patient Experience Goals:

1. Utilize information and data obtained by current resources to enhance the patient experience at all points of contact with patients and families throughout the health system.
2. Outstanding patient satisfaction based on Midland Health-specific measures.
3. Implement meaningful services and projects that address areas of opportunity identified in the Community Health Needs Assessment (CHNA).
4. Engage patients and families to understand their goals in the development of care plans.

Key Performance Indicators:

- 1) Use Midland Health-specific patient satisfaction measurement tool(s) to improve patient satisfaction in Outpatient Services (NPS), Outpatient Ambulatory Surgical Services (CAHPS Overall Rating), Emergency Department (NPS) and Inpatient (HCAHPS Overall Rating). The goal for all areas will be determined based on the benchmark provided through the NRC database.

Each score will be graded on the below scale:

50th percentile – Meets Threshold

75th percentile – Meets Goal

90th percentile – Meets Stretch

- 2) Impact the health of Midland County by focusing on the below areas of opportunities identified in the CHNA:
 - a. Implement public education of risk and resources of diabetes with a goal to meet or be lower than the state percentage of Diabetes and High Blood Sugar. (Baseline in 2025 CHNA: Midland County 18.2% and Texas 12.7%.)
 - b. Maintain and increase access to Primary Care Physicians for Midland County residents. (Baseline Primary Care Providers on MQA Roster is 85)
 - c. Implement public education of risk and resources of heart disease and stroke with a goal to meet or be lower than the state percentage of heart disease and stroke. (Baseline in 2025 CHNA: Midland County 7.5% and Texas 5.4%.)
 - d. Operationalize the obesity medicine program in a joint location by end of FY26.
- 3) Increase inpatient admission of Social Determinants of Health (SDOH) screenings by 10%. The baseline for FY25 is 49%.
- 4) Develop and implement SDOH screening process for emergency department patients by the end of Q1 in FY26.

Workforce Engagement Goals:

- 1) Maintain an engaged, high-performing, and stable workforce.
- 2) Enhance the comprehensive staff professional development education plan, including an effective leadership development program.
- 3) Maintain recognition for excellence with Modern Healthcare Best Places to Work and encourage all service lines to seek recognition for excellence.

Key Performance Indicators:

- 1) Achieve re-designation of Modern Healthcare Best Places to Work.
- 2) Create and execute an action plan off of the Modern Healthcare Best Places to Work survey results.
- 3) Continue Staff and Leadership Development Programs and report completion rates.
- 4) Reduce turnover rate year over year. The FY25 turnover rate is 24.89%.
 - a. FY26 Turnover Rate Goal: 23%
 - b. FY27 Turnover Rate Goal: 22%

- c. FY28 Turnover Rate Goal: 21%
- 5) Continue efforts for recruitment of alternative clinical personnel and report number recruited each quarter (i.e. virtual, international, clinical lab scientist).
- 6) Continue Nursing Radius Leader Program and report completion rates.
- 7) Identify and report exit survey and new hire survey trends.
- 8) Revamp and implement new hire orientation by Q2 of FY26.
- 9) Implement new culture program for all employees by Q2 of FY26.

Financial Health Goals:

- 1) Optimize cost accounting and decision support system to evaluate product line performance and inform strategic decision-making across the system by optimizing and capitalizing on the system-wide data and analytics service.
- 2) Implement a comprehensive facilities development and financing plan to assure Midland Health's readiness to meet the needs of an expanding community.
- 3) Risk-sharing arrangements in place with one or more payers or employers.
- 4) Establish capital plans to finance capital needs at lowest reasonable cost.
- 5) Focus on the health of the balance sheet to position ourselves for future capital plans.

Key Performance Indicators:

- 1) Achieve and maintain system-wide days cash on hand. (FY25 system-wide days cash on hand is 90)
 - a. FY26 Goal is 83 Days Cash on Hand
 - b. FY27 Goal is 92 Days Cash on Hand
 - c. FY28 Goal is 100 Days Cash on Hand
- 2) Execute Phase 2 of the Master Facility Plan by end of Q1 of FY26.
- 3) Execute Phase 3 of the Master Facility Plan by end of Q1 of FY27.
- 4) By the end of FY26, have an organization wide plan created for next phase of Master Facility Plan.
- 5) Earn a net reward in ACO REACH by end of FY26.
- 6) Implement clinical and financial operational dashboards by the end of FY26.
- 7) Exercise a strategic approach to negotiating and managing key managed care contracts.