Clinical Leadership Development

Core Competencies

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NATIONAL ASSOCIATION OF
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Health Center Clinical Leaders:
Core Competencies for Professional Self-Development

Introduction & Guidelines – October 2024

BACKGROUND

Defining health center Clinical Leader Core Competencies for the purpose of professional self-development has been a work in progress within NACHC since 2014. Consultants and health center clinical leaders – both physicians and other clinical professionals – from across the country have developed and updated a comprehensive set of health center Clinical Leader skills and descriptive Behavioral Examples (see Definitions, below) consistent with the underlying foundation of the **Value Transformation Framework** (VTF) developed over several years by NACHC's Quality Center.

The aim from the beginning has been a taxonomy of Clinical Leader competencies that will serve as a foundation for multiple aspects of capable health center clinical leadership. The result is an instrument that is organic – that is, it is subject to continuous improvement and regular updating as Clinical Leader practice evolves and feedback on the instrument itself is continuously integrated.

Since this instrument was designed to be both comprehensive and generalizable, we do not suggest adopting it wholesale as a strict standard of performance for clinical leadership of a health center. "Competence" is situational; each health center presents its own unique set of challenges and opportunities a Clinical Leader must master to achieve high performance within that organization.

These Core Competencies are appropriate for use by a wide variety of potential stakeholders: health center CEOs and other C-Suite leaders, health center Boards, Human Resources officers, search firms, Primary Care Associations (PCAs), training organizations, and more. Our hope is that they will provide a structure and a common language to help define, develop, and sustain true excellence in clinical leadership at all health centers.

Primary Purpose of the Core Competencies:

- As a *self-assessment tool* in the continuing professional self-development of current and aspiring Clinical Leaders, helping to evaluate progressive stages of functional competence and to identify specific improvement needs in order for a Clinical Leader to fully achieve professional and personal career objectives.

Potential Secondary Uses of the Core Competencies:

- As a *comprehensive taxonomy* of Clinical Leader competencies from which a center's leadership team can identify knowledge, skills, and behaviors generally needed for successful clinical leadership.
- As a *reference point* around which Clinical Leaders, other C-suite officers, and health center Boards can engage in structured conversations about professional strengths and learning needs, to enable customized professional development plans. *(NOTE: Only with specific Clinical Leader permission to share personal self-assessment results if needed.)*
- As a *comprehensive resource* for developing position descriptions, as well as related interview questions for Clinical Leader candidates.
- As a *compendium of roles and responsibilities* to guide search firm criteria for Clinical Leader candidates.
- As a *resource* for helping construct performance review criteria for health center Clinical Leaders; and
- As a *tool* for identifying training/learning resources and experiences for health center Clinical Leaders.

Conversely, these Core Competencies are **not** intended:

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- To *strictly define* the role of, and expectations for, all health center Clinical Leaders - using them in this way could create unreasonable performance expectations that may not be relevant to the specific needs of individual centers;
- As *sole or primary justification* for discharging a current Clinical Leader, or for disqualifying a candidate for such positions; or
- As a *yardstick* for measuring overall organizational performance of a health center.

DEFINITIONS

Clinical Leader: The lead member of the clinical team, who drives ethical, strategic, sustainable, and mission-centered clinical operations for the health center. A Clinical Leader will generally have both direct patient-facing clinical duties *and* administrative/management responsibilities for the clinical team. The Clinical Leader's job – and title – may well look somewhat different from center to center, and that's fine. This is not, nor should it be, a "cookie-cutter" role. However, fundamental components of the position will likely be common to most health centers; these core functions, organized into the VTF's three key **Domains** and 15 related **Change Areas** (as noted below) are described in detail in the Core Competencies document itself.

"Domains" and Related "Change Areas": The broad functions – and thus the overarching areas of required competence – addressed by NACHC's Value Transformation Framework (VTF) are as follows:

DOMAIN: *Infrastructure*

Change Areas:
- Improvement Strategy
- Health Information Technology (HIT)
- Policy
- Payment
- Cost

DOMAIN: *Care Delivery*

Change Areas:
- Population Health Management
- Patient Centered Medical Home (PCMH)
- Evidence-Based Care
- Care Coordination and Care Management
- Social Determinants of Health (SDOH)

DOMAIN: *People*

Change Areas:
- Patients
- Care Teams
- Leadership
- Workforce
- Partnerships

Tasks and Skills: Responsibilities comprising each Change Area. "Tasks" are general shorthand descriptions of the competencies, while "Skills" are the specific behaviors defining each competency.

Behavioral Examples: Sample observable actions that help differentiate proficiency stages for each specific Skill. These are *not* intended to be all-inclusive; they serve simply to help a Clinical Leader better locate the proficiency stage at which he/she currently operates.

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Proficiency Stages: These reflect how responsibilities are expected to be carried out at different stages in a Clinical Leader's competency development journey. Implementing defined Skills will involve greater or lesser support (depending on specific Stage) from directors, managers, HR professionals, and others playing leadership roles at the health center. Advancement through each stage involves ongoing training to improve the Clinical Leader's knowledge, skills, and behaviors. **Fully competent Clinical Leaders should minimally work at *Stage 3 – Applied*** to help ensure successful health center clinical operations. (See the table below for defined proficiency stages.)

This "1-5" proficiency continuum is based loosely on the seminal work of Dreyfus & Dreyfus[1].

Stage 5: <u>Expert</u> *"Innovating"* *(Incorporates Stages 1-4)*	Identifies and executes activities that are innovative and effective. Brings a broad range of experiences and expertise to bear on current and anticipated challenges in a complex and uncertain environment. Develops, demonstrates, and effectively shares well-informed and thoughtful innovations, advanced knowledge, and cutting-edge practices.
Stage 4: <u>Skilled</u> *"Modeling High Function"* *(Incorporates Stages 1-3)*	Demonstrates significant experience with a range of tools and proven solutions. Coaches others. Brings a holistic lens to addressing organizational issues while working proactively and efficiently as a key member of the C-suite team.
Stage 3: <u>Applied</u> *"Fully Functional"* *(Incorporates Stages 1 & 2)*	Implements most tasks independently and is able to view issues holistically with minimal support. Develops and executes plans and establishes productive routines. Seeks input as appropriate for novel or complex tasks and situations. Serves as an effective member of the C-suite team.
Stage 2: <u>Basic</u> *"Knowing"*	Reflects a broadening understanding of tasks and context, with supervision and support in learning new skills and prioritizing workload. Develops knowledge and skills with guidance and feedback regarding information relevant to the role.
Stage 1: <u>Learning</u> *("Awareness")*	Has a novice skill level, based primarily on knowledge-based training. Requires regular supervision and support to complete tasks while simultaneously translating experience into expertise, and applying lessons learned to a health center context. Executes tasks at a novice skill level based primarily on knowledge-based training. Requires ongoing supervision and support to complete tasks and gain experience with applying knowledge to the health center context.

[1] Dreyfus, S. E. 2004. "The Five-Stage Model of Adult Skill Acquisition". *Bulletin of Science, Technology & Society*, 24: 177 (http://www.bumc.bu.edu/facdev-medicine/files/2012/03/Dreyfus-skill-level.pdf)

SKILL KEY (e.g., "1.C.1"):
Roman Numeral = VTF **Domain** / Letter = VTF **Change Area** / Arabic Numeral = **Specific Skill**

VTF Domain I – *Infrastructure*

CHANGE AREA	GENERAL TASK	SPECIFIC SKILL	Instructions: Use this list to identify which level of proficiency best describes your behavior relative to this task. Any sub-bullets represent potential *specific examples* of this behavior.	
A		**1**	**Rating**	**Behavioral Examples**
Improvement Strategy	*Quality Management*	Actively participate and engage other clinical team members in effectively executing health center Quality Management activities. **(I.A.1)**	**5: Expert**	● Create new tools and techniques to monitor and measure quality programs. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Mentor clinical staff regarding Quality Management (QM) concepts and techniques. ● Lead the clinical component of the health center's Quality Management program. ● Advocate on behalf of team for preventing "initiative overload" and QM fatigue. ● Guide the team in the pursuit of the Quadruple Aim. ● Demonstrate *Applied* behaviors.
			3: Applied	● Use quality tools and techniques to measure/monitor processes and outcomes and creatively improve clinical performance: 　○ Peer review 　○ Selected process improvement models 　○ Best Practice Guidelines ● Can differentiate among alternative quality process improvement models while understanding their underlying commonalities. ● Continually monitor clinical performance through practice guidelines. ● Leverage best practice guidelines to identify and execute quality management initiatives: 　○ Evidence-based practice guidelines 　○ Clinical Decision Support methods 　○ National Quality Forum 　○ AHRQ National Guidelines Clearinghouse ● Pursuit of the Quadruple Aim.
			2: Basic	● Know the basics of a Quality Management Plan and am familiar with the health center's own Plan. ● Understand traditional QM concepts. ● Understand "initiative overload" and QM fatigue. ● Understand both the national Quadruple Aim and the Chronic Care Model.
			1: Learning	● Aware of the importance of quality programs.

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VTF Domain I – *Infrastructure*

CHANGE AREA	GENERAL TASK	SPECIFIC SKILL	**Instructions** Use this list to identify which level of proficiency best describes your behavior relative to this task. Any sub-bullets represent potential *specific examples* of this behavior.	
A		**2**	**Rating**	**Behavioral Examples**
Improvement Strategies	*Benchmarking*	Use benchmarking to actively identify clinical improvement opportunities. **(I.A.2)**	**5: Expert**	● Create tools and templates to document process improvement and optimization ideas within our center. ● Seek out new approaches that will have the greatest impact on clinical outcomes. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Perceived internally as someone who is always considering ways to improve and optimize our processes. ● Demonstrate *Applied* behaviors.
			3: Applied	● Have a structured surveillance process for identifying clinical process improvement and optimization. ● Engage the team in evaluating benchmarking data to guide our process improvement initiatives.
			2: Basic	● Understand benchmarking. ● Understand performance metrics and related HRSA requirements. ● Pursue process improvement and optimization opportunities identified by others.
			1: Learning	● Aware of the use of benchmarking for comparing clinical operations to others but have not utilized benchmarking data to make substantial changes to clinical operations.

CHANGE AREA	GENERAL TASK	SPECIFIC SKILL	**Instructions** Use this list to identify which level of proficiency best describes your behavior relative to this task. Any sub-bullets represent potential *specific examples* of this behavior.	
B		**1**	**Rating**	**Behavioral Examples**
Health Information Technology (HIT)	*Data Security*	In coordination with HIT leadership, lead clinical team in ensuring that all patient data is appropriately safeguarded, and that confidentiality is maintained, per HIPAA and other relevant regulations. **(I.B.1)**	**5: Expert**	● Co-design with HIT leadership and SMEs on implementation of advanced, AI / ML driven anomaly detections systems to identify potential security breaches in real-time. ● Support HIT leadership and staff in their contributions to community health center-relevant development of national and international standards for healthcare data security and privacy. ● Awareness and involvement in cross-functional teams in conducting comprehensive security risk assessments and developing enterprise-wide data governance strategies. ● Support HIT leadership and staff publications or peer-reviewed research on innovative approaches to healthcare data security and privacy.
			4: Skilled	● Network with other agencies to better understand confidentiality. ● Demonstrate *Applied* behavior.
			3: Applied	● Consistently communicate to the health center staff the importance of protecting patient information as required by HIPAA regulations. ● Lead appropriate action to immediately and successfully address identified risk situations arising regarding HIPAA.
			2: Basic	● Understand HIPAA and other relevant regulations for safeguarding patient health information and confidentiality.
			1: Learning	● Aware of the legal requirement to keep patient information confidential.

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CHANGE AREA	GENERAL TASK	SPECIFIC SKILL	**Instructions** Use this list to identify which level of proficiency best describes your behavior relative to this task. Any sub-bullets represent potential *specific examples* of this behavior.	
B		**2**	**Rating**	**Behavioral Examples**
Health Information Technology (HIT)	*Advanced Technologies*	In coordination with HIT leadership, utilize advanced technology concepts beyond EHRs to optimize management of clinical functions. **(I.B.2)**	**5: Expert**	● Create new and innovative approaches to leveraging technology to optimize management of clinical functions. ● Lead clinical team in ultimately utilizing "big data" techniques to advance optimal care quality and true Population Health. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Lead the clinical team in promoting and utilizing advanced Electronic Health Record-related technology: ○ Health Information Exchanges (HIEs) ○ Data warehouses ● Lead clinical team in optimizing use of EHR and taking advantage of all related data-driven opportunities (analysis, etc.). ● Demonstrate *Applied* behaviors.
			3: Applied	● Can use main functions of the center's EHR system to retrieve patient data and document assessments/interventions. ● Guide clinical team in successfully addressing operational issues regarding the health center's EHR system. ● Guide staff in helping patients/families appropriately use online tools as part of care plans (including provider/patient communication via secure technologies). ● Drive efforts to leverage technology to improve patient care.
			2: Basic	● Understand advanced technology concepts beyond EHRs (such as HIEs and data warehouses). ● Understand advantages of, and issues regarding, EHRs and their selection/implementation. ● Understand potential consumer applications enabling patients/families to access health and intervention information online.
			1: Learning	● Aware of the existence of EHRs in a clinical environment. ● Aware of the existence of HEIs and data warehouses.

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B		**3**	**Rating**	**Behavioral Examples**
Health Information Technology (HIT)	***Technology to Advance Care and Equity (TechQuity)***	In coordination with HIT leadership, use technology to improve patient care and reduce health disparities. **(I.B.3)**	**5: Expert**	• Involvement in initiatives to develop ethical AI frameworks that address health disparities and promote equity in healthcare delivery. • Co-design with HIT teams implementation of large-scale, multi-institutional studies on the impact of telehealth and AI on health outcomes for underserved populations. • Involvement in the development of policies and standards for equitable implementation of health technologies at state or national levels. • Support and coordinate with HIT teams in pioneering innovative approaches to integrate social determinants of health data with clinical data using advanced analytics and AI. • Involvement in the development of strategies to mitigate algorithmic bias in healthcare AI systems, particularly for historically marginalized populations.

			4: Skilled	• Coach clinical team in improving Telehealth services delivery.
				• Ensure ongoing Telehealth legal compliance.
				• Coach/train team in increasing and improving the use of AI.
				• Use AI to routinely pull-out meaningful data from ongoing "noise".
				• Train clinical team to avoid potential AI negatives:
				    ○ Built-in racial and/or gender bias
				    ○ AI "hallucinations"
				    ○ Lack of "people judgement" oversight RE: diagnosis data
				    ○ Other unintended consequences

			3: Applied	• Successfully manage the health center's Telehealth services.
				• Monitor compliance with Telehealth legal issues at all levels.
				• Actively lead the team in optimally using AI for appropriate purposes:
				    ○ Diagnosis / treatment recommendations
				    ○ Advancing patient engagement and adherence
				    ○ Administrative and routine activities ("scribe", etc.)
				• Work across functions to develop procedures for using AI to generate improved / easier patient pre-visit check-in and final visit summary.

			2: Basic	• Know fundamentals of Telehealth, AI, and other relevant technologies.
				• Understand the concept of "TechQuity" – combining technology and health equity to advance the Quintuple Aim – and its requirements:
				    ○ Data trust
				    ○ Equity dashboards
				    ○ Transparent AI
				• Know basic uses, techniques, and legal requirements pertaining to Telehealth.
				• Understand AI's potential uses in health care, including:
				    ○ Enhancing preventive care
				    ○ Producing more accurate diagnosis/treatment plans
				    ○ Managing routine and administrative tasks
				    ○ Predicting/tracking infectious diseases

			1: Learning	• Generally aware of technologies – e.g., Telehealth and Artificial Intelligence (AI) – that can foster patient care and help advance health equity, but not knowledgeable about their actual use.

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CHANGE AREA	GENERAL TASK	SPECIFIC SKILL	**Instructions** Use this list to identify which level of proficiency best describes your behavior relative to this task. Any sub-bullets represent potential *specific examples* of this behavior.	
C		**1**	**Rating**	**Behavioral Examples**
Policy	***The Health Center Model***	Demonstrate a comprehensive understanding of the unique dynamics of the health center model. **(I.C.1)**	**5: Expert**	● Take a leadership role in actively advancing the national health center priorities. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Understand forces specifically shaping the delivery of health care for a 5–10-year horizon. ● Demonstrate *Applied* behaviors.
			3: Applied	● Can explain to health center personnel how health centers fit into state/national health systems. ● Can describe the dynamics of the health care system at all levels. ● Demonstrate *Basic* behaviors.
			2: Basic	● Know common health center terminology and appropriate government acronyms. ● Know reporting requirements. ● Know the history of the health center movement. ● Demonstrate Learning behaviors.
			1: Learning	● Working to understand the history of the health center movement.

CHANGE AREA	GENERAL TASK	SPECIFIC SKILL	**Instructions** Use this list to identify which level of proficiency best describes your behavior relative to this task. Any sub-bullets represent potential *specific examples* of this behavior.	
C		**2**	**Rating**	**Behavioral Examples**
Policy	***Work with Agencies & Funders***	Demonstrate the ability to work fluidly with governmental agencies and other funding sources that support health centers. **(I.C.2)**	**5: Expert**	● Create innovative approaches on how to navigate and leverage relationships with government entities and other funding sources that support health centers. ● Anticipate how changes in legislation may impact health center operations. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Routinely leverage governmental and other funding agent structures and initiatives to create new opportunities for the health center. ● Demonstrate *Applied* behaviors.
			3: Applied	● Help develop project and funding applications. ● Assist with periodic reporting. ● Communicate as needed on related issues and opportunities. ● Demonstrate *Basic* behaviors.
			2: Basic	● Understand governmental/funding source structures, relationships, and requirements pertaining to health centers, including the CHC Program's "19 Requirements" from (HRSA/BPHC).
			1: Learning	● Aware of the need to work with governmental and other funding sources, but not sure how they impact our health center.

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C		**3**	**Rating**	**Behavioral Examples**
Policy	***Advocate for Health Centers***	Advocate (within legal limits) for the role of the community health center with appropriate external entities. **(I.C.3)**	**5: Expert**	● Create new approaches to advocate for the health center. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Actively build positive relationships with and help guide advocacy efforts between/among other health centers and public health agencies on behalf of the national Quadruple Aim. ● Guide outreach efforts to educate community residents about specific health center services. ● Demonstrate *Applied* behaviors.
			3: Applied	● Conduct legislative visits, as appropriate and allowed, with state and federal policy makers to educate them on the role and the importance of the community health center. ● Help raise community awareness of the center as a vital community resource.
			2: Basic	● Understand the roles of state and federal policy-makers in enabling health center operations (both financially and from a regulatory perspective).
			1: Learning	● Aware of the need to build relationships with stakeholders that enable the operations of a community health center.

CHANGE AREA	GENERAL TASK	SPECIFIC SKILL	**Instructions** Use this list to identify which level of proficiency best describes your behavior relative to this task. Any sub-bullets represent potential *specific examples* of this behavior.	
C		**4**	**Rating**	**Behavioral Examples**
Policy	***Office Technologies***	Demonstrate advanced proficiency in office technologies **(I.C.4)**	**5: Expert**	● Develop new approaches in how to leverage technology to improve the decision making, the actions and the productivity of the health center. ● Demonstrate *Skilled* behaviors.

			4: Skilled	● Coach others on how to use electronic technologies to increase their productivity and their decision making.
				● Leverage database tools for optimizing decisions, actions, and opportunities.
				● Possess advanced skill in common software applications:
				  ○ Excel (macros, pivot tables IF statements, VLOOKUP)
				  ○ PowerPoint (embedded media)
				  ○ Outlook (task assignment)
				● Demonstrate *Applied* behaviors.

			3: Applied	● Possess a good working knowledge of common software applications:
				  ○ Excel
				  ○ PowerPoint (transitions and builds)
				  ○ Outlook (automated reminders and scheduling meetings

			2: Basic	● Have basic skills in electronic office technologies (word processing, spreadsheet management, etc.).
			1: Learning	● Aware of the availability and the importance of knowing how to use electronic productivity tools, but not quite comfortable with the technology.

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C		5	**Rating**	**Behavioral Examples**
Policy	*Systems Thinking*	Utilize both "big picture" and detailed "system thinking" when analyzing issues and making decisions. **(I.C.5)**	**5: Expert**	● Anticipate the impact of decisions on the long-term strategy of the health center. ● Develop new tools or templates for evaluating alternatives. ● Create new methods for locating data and how to analyze its accuracy and importance. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Ask strategic "generative" questions that challenge traditional thinking in order to understand an issue and pose alternatives that create new opportunities. ● Use a structured process for defining an issue, gathering data, generating and evaluating alternatives, selecting an alternative, and implementing and evaluating the alternative. ● Coach others on how to assess situations in order to make the most informed decisions about which course of action to pursue. ● Demonstrate *Applied* behaviors.
			3: Applied	● Identify information needed to make an informed decision about the strategic implications of a specific course of action. ● Think through the implications of a specific course of action and how it may affect the tactical operations of the health center. ● Consistently gather information from all stakeholders before making decisions. ● Use proven tools to evaluate alternatives relative to the needs and requirements of the stakeholders.
			2: Basic	● Can describe "strategic" vs. "tactical" thinking. ● Understand the skills needed to make decisions effectively.
			1: Learning	● Aware of the need to understand the strategic consequences of decisions, but do not have the practical experience to understand their impact. ● Recognize the complexities associated with making decisions.

CHANGE AREA	GENERAL TASK	SPECIFIC SKILL	**Instructions** Use this list to identify which level of proficiency best describes your behavior relative to this task. Any sub-bullets represent potential *specific examples* of this behavior.	
C		6	**Rating**	**Behavioral Examples**
Policy	*UDS Oversight*	Effectively assist or provide oversight in Uniform Data System (UDS) report completion. **(I.C.6)**	**5: Expert**	● Create new and innovative approaches to complete clinical and related portions of the UDS reports in a timely and accurate manner: ○ Checklists ○ Workflow ● Serve as a resource to other health centers on UDS data and improvement. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Coach others on how to complete clinical and related portions of the UDS reports accurately. ● Provide leadership to improve performance on UDS measures. ● Demonstrate *Applied* behavior.
			3: Applied	● Routinely provide assistance or oversight from the clinical perspective in completing UDS reports so that they get completed accurately and on time.
			2: Basic	● Understand basic UDS reports but may need assistance in completing necessary clinical and related entries accurately.
			1: Learning	● Aware of the UDS reporting requirements, but do not know how to complete them.

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C		**7**	**Rating**	**Behavioral Examples**
Policy	*Risk Management*	Lead staff in adopting an ongoing Risk Management mindset/approach. **(I.C.7)**	**5: Expert**	● Contribute new ideas on how to mitigate risk associated with provision of health center services. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Lead ongoing modifications / improvements to the clinical component of the center's Risk Management Plan. ● Coach others on how to follow proper protocols with respect to the critical components of the health center's Risk Management Plan. ● Demonstrate *Applied* behaviors.
			3: Applied	● Ensure that health center staff is aware of and executes the center's Risk Management Plan consistently across all critical components: ○ Quality Management ○ Clinical Management ○ Credentialing and Privileging ○ Patient Records ○ Patient Communications ○ Incident Reporting and Tracking
			2: Basic	● Understand Risk Management principles, HRSA's Risk Management requirements, and be familiar with own health center's Risk Management Plan.
			1: Learning	● Aware of the importance of managing risk and avoiding malpractice lawsuits.

	GENERAL TASK	SPECIFIC SKILL	**Instructions** Use this list to identify which level of proficiency best describes your behavior relative to this task. Any sub-bullets represent potential *specific examples* of this behavior.	
C		**8**	**Rating**	**Behavioral Examples**
Policy	*FTCA*	Guide the clinical team in actively identifying and addressing general FTCA-related issues. **(I.C.8)**	**5: Expert**	● Create new and streamlined procedures for identifying Federal Tort Claims Act (FTCA) issues and how they impact the health center. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Act immediately and appropriately regarding all issues relating to impaired providers. ● Demonstrate *Applied* behaviors.
			3: Applied	● Assist with the Deeming and/or Redeeming application for the center. ● Ensure that all health center practitioners have the appropriate credentials and privileges as required. ● Ensure that all Quality Improvement requirements are met per FTCA guideline.
			2: Basic	● Understand fundamental regulations and issues regarding Federal Tort Claims Act and FTCA deeming.
			1: Learning	● Aware of the Federally Supported Health Centers Assistance Act and the Federal Tort Claims Act, and how the impunity they provide limits risk and liability of the health center.

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VTF Domain I – *Infrastructure*

CHANGE AREA	GENERAL TASK	SPECIFIC SKILL	Instructions Use this list to identify which level of proficiency best describes your behavior relative to this task. Any sub-bullets represent potential *specific examples* of this behavior.	
C		**9**	**Rating**	**Behavioral Examples**
Policy	*Health Equity*	Actively promote the foundational Health Equity principles of Justice, Equity, Diversity, and Inclusion ("JEDI") in all transactions with/among staff, Board, patients, families, and the broad community. **(I.C.9)**	**5: Expert**	• In collaboration with other health center staff members, generate continual awareness of new national initiatives related to Health Equity and/or JEDI principles. • Generate innovative internal initiatives to advance Health Equity with all health center stakeholders. • Work with the PCA and other state and national organizations to help develop new opportunities to address JEDI. •.Demonstrate Skilled behaviors.
			4: Skilled	• Regularly assess Clinical staff's success in fostering JEDI principles in all interactions with health center stakeholders. • Continuously coach Clinical staff in ways to improve their accomplishment of JEDI principles in their relationships with all health center stakeholders. • Demonstrate *Applied* behaviors.
			3: Applied	• Actively promote, and model for Clinical staff, JEDI behaviors with all health center stakeholders. • Ensure all Clinical staff members are familiar with the health center's Health Equity position and related policies, and routinely attempt to apply JEDI principles in daily interactions with all health center stakeholders. • Assess health inequities through ongoing Quality Improvement data in order to identify improvement opportunities related to JEDI.
			2: Basic	• Know the specific health center policies addressing Health Equity issues, and their real-world ramifications. • Be able to define and fully understand the JEDI principles, and their real-world applications.
			1: Learning	• Aware of the fundamental concepts of Health Equity and its component JEDI principles.

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D		**1**	**Rating**	**Behavioral Examples**
Payment	*Grant Applications: Clinical Component*	Develop clinical component of health center grant applications. **(I.D.1)**	**5: Expert**	● Identify and pursue new funding options. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Seek out and develop potential programs and ideas for new grant funding. ● Demonstrate *Applied* behaviors.
			3: Applied	● Develop clinical component of the health center grant applications. ● Able to justify the funds requested in the grant application. ● Responsible for monitoring successful implementation of clinical components of grants. ● Responsible for reporting on clinical components.
			2: Basic	● Have basic understanding of grant-writing and fund sources (public and private). ● Have awareness of the clinical components of the health centers grants (public and private). ● Help develop grant applications.
			1: Learning	● Aware of the need to apply for health center grants to fund clinical operations.

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VTF Domain I – *Infrastructure*

CHANGE AREA	GENERAL TASK	SPECIFIC SKILL	**Instructions** Use this list to identify which level of proficiency best describes your behavior relative to this task. Any sub-bullets represent potential *specific examples* of this behavior.	
D		**2**	**Rating**	**Behavioral Examples**
Payment	*Reimbursement Mechanisms*	Ensure clinical staff awareness of reimbursement mechanisms and issues. **(I.D.2)**	**5: Expert**	● Work with other senior managers to create new and innovative approaches to leverage the reimbursement mechanisms available to the health center. ●Demonstrate *Skilled* behaviors.
			4: Skilled	● Act as a resource to other health center managers as an intermediary with the clinical staff. ● Demonstrate *Applied* behaviors.
			3: Applied	● Work with other members of the senior management team to communicate to the clinical staff the various reimbursement mechanisms important to the center. ● Work with the clinical staff to ensure they understand their role in maximizing health center reimbursement.
			2: Basic	● Develop understanding of reimbursement options/issues in health care: ○ Risk based mechanisms ○ Public and private payers
			1: Learning	● Have awareness of reimbursement mechanisms at the health center level, including Prospective Payment.

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VTF Domain I – *Infrastructure*

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E		**1**	**Rating**	**Behavioral Examples**
Cost	*Financial Tools*	Use financial tools and systems to effectively manage ongoing clinical operations. **(I.E.1)**	**5: Expert**	● Create innovative approaches to budgeting that enhances our funding source opportunities. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Use practice management systems, dashboards, etc. to optimize operations and generate clinically-related financial opportunities. ● Work with other managers to optimize the clinical budget. ● Coach others on how to analyze and leverage the data in health center financial statements. ● Demonstrate *Applied* behaviors.
			3: Applied	● Use budgeting tools to generate, track, and maintain annual program budgets for the clinical team. ● Utilize analysis of financial statements to drive decisions about clinical operations. ● Actively participate in decisions regarding overall health center financial and budget development.
			2: Basic	● Understand essential financial concepts and reporting tools: 　○ Income statement 　○ Balance sheet ● Understand basic budgeting principles and requirements regarding major health center funding sources.
			1: Learning	● Aware of the purpose of the income statement and the balance sheet.

Clinical Leadership Development: Core Competencies

VTF Domain II – *Care Delivery*

CHANGE AREA	GENERAL TASK	SPECIFIC SKILL	**Instructions** Use this list to identify which level of proficiency best describes your behavior relative to this task. Any sub-bullets represent potential *specific examples* of this behavior.	
A		**1**	**Rating**	**Behavioral Examples**
Population Health Management	*Delivery of Care*	Actively work to integrate Public/Population Health issues with routine delivery of primary care. **(II.A.1)**	**5: Expert**	● Take a leadership role in initiatives to continually improve integration of primary care and Public/Population Health. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Actively promote outreach to positively affect broad community health. ● Guide the clinical team in actively addressing issues related to: 　○ Health disparities 　○ Health care access 　○ Social determinants of health ● Demonstrate Applied behaviors.
			3: Applied	● Use results of Needs Assessments to set clinical strategy. ● Discern the value of potential partnerships/strategic alliances. ● Demonstrate *Basic* behaviors.
			2: Basic	● Understand Public/Population Health fundamentals (including public health reporting structures) and related local, state, and national dynamics. ● Know health Needs Assessment concepts, as well as the health center's current Assessment and priority populations. ● Understand government channels, mandates, and ethical considerations regarding: 　○ Health disparities 　○ Health care access 　○ Social determinants of health
			1: Learning	● Aware of Public/Population Health fundamentals, but not comfortable being ultimately responsible for aligning our care delivery to meet the needs of the population we serve.

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Clinical Leadership Development: Core Competencies

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VTF Domain II – *Care Delivery*

CHANGE AREA	GENERAL TASK	SPECIFIC SKILL	**Instructions** Use this list to identify which level of proficiency best describes your behavior relative to this task. Any sub-bullets represent potential *specific examples* of this behavior.	
B		**1**	**Rating**	**Behavioral Examples**
Patient Centered Medical Home (PCMH)	*Accreditation / PCMH Recognition*	Support center accreditation and Patient Centered Medical Home (PCMH) recognition. **(II.B.1)**	**5: Expert**	● Create new approaches on how the center can transform its practice and achieve accreditation. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Guide the health center's clinical component in achievement of accreditation and PCMH recognition. ● Demonstrate *Applied* behaviors.
			3: Applied	● Promote Practice Transformation, the Patient Centered Medical Home (PCMH) care model, and the basis of both in quality. ● Drive implementation and maintenance of the PCMH care model.
			2: Basic	● Understand health center accreditation, PCMH recognition, and the primary organizations that provide recognition: ○ The Joint Commission (TJC) ○ Accreditation Association for Ambulatory Health Care (AAAHC) ○ National Committee for Quality Assurance (NCQA) ● Understand the impact of practice transformation and the PCMH care model on quality. ● Demonstrate knowledge of quality infrastructure and its integral importance to PCMH recognition.
			1: Learning	● Aware of the PCMH model and the significance of obtaining accreditation.

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Clinical Leadership Development: Core Competencies

VTF Domain II – *Care Delivery*

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C		1	**Rating**	**Behavioral Examples**
Evidence Based Care	*Clinical Process*	Create, implement, and maintain high-performing clinical processes and systems. **(II.C.1)**	**5: Expert**	● Create tools, processes and systems that ensure consistent delivery of high-quality clinical care. ● Develop/implement innovative disease management programs using all appropriate tools/modalities. ● Anticipate issues related to regulatory changes that may impact systems or processes. ● Recognized as a resource for other health centers. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Leverage tools, processes and systems created by other health center leaders that ensure consistent delivery of high-quality clinical care. ● Apply change management techniques when changes in processes and systems are required. ● Demonstrate *Applied* behaviors.
			3: Applied	● Implement and maintain systems (e.g., open access) that provide optimal access to health center services. ● Implement and maintain systems that support consistent clinical processes: 　○ Workflow management 　○ Productivity optimization ● Implement and maintain processes that support high quality clinical care.
			2: Basic	● Use systems that support consistent clinical processes. ● Use systems that provide access to health center services. ● Understand fundamental health care access issues and related clinic scheduling concepts. ● Understand concepts and issues related to care planning/management/coordination. ● Understand basics of the health center's practice management system and can utilize reports generated by that system.
			1: Learning	● Aware of the need to have processes and systems in place, but no experience implementing and maintaining them.

Clinical Leadership Development: Core Competencies

VTF Domain II – *Care Delivery*

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D		**1**	**Rating**	**Behavioral Examples**
Care Coordination & Care Management	*New Care Models*	Manage change among the clinical staff as the health center moves into new care models (e.g., the Patient Centered Medical Home model). **(II.D.1)**	**5: Expert**	● Break new ground via "disruptive innovation" to create new approaches to clinical issues. ● Lead the execution of changes resulting from scenario planning and brainstorming sessions. ● Seek to find new and innovative ways to manage change and share those techniques with others. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Anticipate change by identifying and analyzing potential changes on the horizon. ● Identify and initiate new opportunities to pursue as a result of the changing health care model. ● Lead scenario planning sessions to identify possible changes and approaches. ● Lead brainstorming sessions for new ways to overcome the obstacles of changing circumstances. ● Coach others on how to align their work to meet changing circumstances. ● Demonstrate *Applied* behaviors.
			3: Applied	● Communicate the reason for changes in health center operations and how those changes impact the work of each staff member. ● Create new/modified health center organizational designs to meet mandates/initiatives and optimize clinical effectiveness/efficiency. ● Focus on the upside to changing situations as opposed to dwelling on the difficulties associated with them. ● Consistently realign work efforts to meet changing circumstances and priorities. ● Demonstrate *Basic* behaviors.
			2: Basic	● Understand the concepts of organizational culture and how these apply within the health center. ● Know basic planning concepts, as well as the health center's current Strategic Plan.
			1: Learning	● Aware that clinical operations need to change as the center moves into new care models, but not sure how to implement changes without disrupting the culture of the center. ● View change as an obstacle to productivity at times.

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Clinical Leadership Development: Core Competencies

VTF Domain II – *Care Delivery*

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D		**2**	**Rating**	**Behavioral Examples**
Care Coordination & Care Management	*Overall Care*	Demonstrate and implement comprehensive understanding of Care Coordination and Care Management in the Health Center setting. **(II.D.2)**	**5: Expert**	● Routinely measure – and improve as needed – clinical outcomes by tracking Care Coordination and Care Management program effectiveness and the extent to which patients regularly reach care plan goals. • Work with National, State, and Local organizations to promote SDOH efforts. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Enhance and expand partnerships for the care and referral of patients' health, social, and related needs. ● Work with MCO's to ensure coordination with, and payment for, Care Management services if/when appropriate. • Document and facilitate billing for chronic Care Management services. • Establish a process for patients to "graduate" from Care Management as they meet their goals. • Coach others on concepts and practical applications of Care Coordination and Care Management. ● Demonstrate *Applied* behaviors.

			3: Applied	● Implement a Care Coordination and Care Management strategy, including:
				    ○ Hiring and training a Care Manager
				    ○ Defining the interface between the Care Manager and the care team
				    ○ Implementing a risk stratification procedure
				• Define services to be provided as part of Care Coordination and Care Management, including SDOH factors as appropriate.
				• Enroll patients and create individualized care plans.

			2: Basic	● Understand the principles of Care Coordination and Care Management, including:
				    ○ Risk Stratification
				    ○ Comprehensive needs assessment
				● Individualized care planning.

			1: Learning	● Working to know why Care Coordination and Care Management is important to health centers.

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VTF Domain II – *Care Delivery*

CHANGE AREA	GENERAL TASK	SPECIFIC SKILL	**Instructions** Use this list to identify which level of proficiency best describes your behavior relative to this task. Any sub-bullets represent potential *specific examples* of this behavior.	
E		1	**Rating**	**Behavioral Examples**
Social Drivers of Health (SDoH)	*SDoH Programs*	Demonstrate a comprehensive understanding of – and be able to plan for and work with – Social Drivers of Health (SDOH) in the health center setting. **(II.E.1)**	**5: Expert**	● Continuously leverage SDOH data to drive value-based care and reimbursement. • Work with National / State / Local organizations to promote and continuously improve SDOH programs. • Facilitate efforts to address systemic issues and patterns identified by ongoing SDOH efforts and initiatives. ● Demonstrate Skilled behaviors.
			4: Skilled	● Ensure ongoing collection and active monitoring of SDOH data. ● Use SDOH data to inform practice transformation. ● Demonstrate *Applied* behaviors.
			3: Applied	• Design a workflow for SDOH screening that includes tool selection (including, as appropriate, the national PRAPARE risk assessment tool); identify specific target population(s); detail how, when, and where to screen; and provide appropriate documentation methods. • Design a workflow for interventions in response to identified SDOH needs. ● Identify specific community resources to address identified social risks. ● Train staff on SDOH concepts, workflows, and resources. ● Work with internal / external parties to ensure development and ongoing maintenance of appropriate informatics systems and tools to support SDOH efforts.
			2: Basic	● Understand the domains of SDOH, including economic stability, education access / quality, health care access / quality, neighborhood and built environment, and social and community context. ● Understand the local community's specific social risk factors. ● Engage health center leadership and Board in prioritizing SDOH efforts.
			1: Learning	● Working to know why Social Determinants of Health (SDOH) are important to health centers.

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Clinical Leadership Development: Core Competencies

VTF Domain III – *People*

CHANGE AREA	GENERAL TASK	SPECIFIC SKILL	Instructions Use this list to identify which level of proficiency best describes your behavior relative to this task. Any sub-bullets represent potential *specific examples* of this behavior.	
A		**1**	**Rating**	**Behavioral Examples**
Patients	*Self-Management and Integrated Care*	Actively guide the clinical team toward patient self-management and true patient-centered, integrated care, wellness, and health promotion. **(III.A.1)**	**5: Expert**	• Advocate in the community for patient self-management and true whole-person integrated care (including Oral and Behavioral Health Care), wellness. and health promotion. • Speak at wellness events. • Write relevant blogs for social media, and articles for publications. • Monitor the industry for innovative approaches to patient-centered and integrated care, and to leveraging patient self-management. • Create processes/structure that the clinical team can use for regularly identifying those patients who can best benefit from integrated care, including Oral and Behavioral Health Care. • Demonstrate *Skilled* behaviors.
			4: Skilled	• Hold regular team meetings and proactively ask team members to identify patients who need multi-disciplinary clinical support. • Serve as active mentor/coach for clinical team members regarding patient self-management and integrated care, including Oral and Behavioral Health Care. • Demonstrate *Applied* behaviors.

			3: Applied	• Guide active integration of related clinical disciplines (including Oral and Behavioral Health Care, AIDS/HIV services, etc.) and applicable community resources to the full range of patient needs.
				• Distribute materials in support of integrated care.
				• Schedule health center events to educate patients/stakeholders on the importance of self-management and integrated care.
				• Communicate to the clinical team the benefits of integrated care, including Oral and Behavioral Health Care:
				   o Clinical
				   o Financial
				   o Community
				   o Health Center
				• Ensure team members are ambassadors for self-management.
				• Ensure the clinical team works together to deliver whole-person care.
				• Lead team meetings to discuss patients who need multi-disciplinary clinical support, including Oral and Behavioral Health Care.

			2: Basic	• Understand the implications of non-integrated care. • Understand the benefits of patient self-management.
			1: Learning	• Aware of the importance of patient self-management and integrated care, including Oral and Behavioral Health Care, but have no experience implementing programs around these concepts.

Clinical Leadership Development: Core Competencies

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VTF Domain III – *People*

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A		**2**	**Rating**	**Behavioral Examples**
Patients	*Mobilization for Health*	Guide clinical staff in learning about, and taking an active role in, community mobilization for health. **(III.B.2)**	**5: Expert**	● Create new and innovative approaches for mobilizing health services for the community. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Advocate for ongoing clinical excellence among all center sites and with other health center organizations. ● Demonstrate *Applied* behaviors.
			3: Applied	● Lead clinical staff in understanding the health center "value equation" (improved care/reduced costs).
			2: Basic	● Understand the health center "value equation" (improved care/reduced costs).
			1: Learning	● Aware of the role of the health center in providing health care services to the under-served population in the community.

CHANGE AREA	GENERAL TASK	SPECIFIC SKILL	**Instructions** Use this list to identify which level of proficiency best describes your behavior relative to this task. Any sub-bullets represent potential *specific examples* of this behavior.	
A		**3**	**Rating**	**Behavioral Examples**
Patients	*Respect for Diversity*	Demonstrate sensitivity to the culture, behaviors, and illness perspectives of the diverse populations served by the health center. **(III.D.2)**	**5: Expert**	● Lead development of clinical programs that successfully address health disparities in diverse populations served. ● Create health education materials that accommodate the varying health literacy levels of patients and family members. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Positively facilitate staff diversity in all clinical roles, including outreach and community health workers. ● Facilitate culturally-sensitive collaborative relationships with both internal and external providers and groups. ● Effectively manage conflict arising from cultural issues. ● Demonstrate *Applied* behaviors.
			3: Applied	● Deliver a thorough assessment of quality-of-care perceptions of patients and families. ● Continually improve care of, and relationships with, diverse populations. ● Adapt health center clinical services to the languages, cultures, and preferences of patients and families. ● Establish ongoing rapport and positive working relationships with health center staff, patients, families, and community residents from diverse cultural and ethnic backgrounds. ● Provide health education and other appropriate written materials in a manner consistent with the communication style and health literacy levels of patients and family members. ● Communicate verbally with patients and family members in their preferred language and communication mode, either directly or through an interpreter.
			2: Basic	● Demonstrate, through self-awareness, a critical understanding of my own personal values relating to culture, ethnicity, and diversity.
			1: Learning	● Aware of the need to demonstrate cultural sensitivity (diverse cultures, differing cultural norms, and ethnic differences).

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VTF Domain III – *People*

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B		**1**	**Rating**	**Behavioral Examples**
Care Teams	*Teamwork*	Instill a sense of true teamwork among all stakeholders/ customers. **(III.B.1)**	**5: Expert**	• Create a clinical environment in which innovation is valued and rewarded. • Search for and implement best practices for creating an integrated care and team-oriented environment. • Anticipate and prepare for possible discord with scenario planning. • Demonstrate *Skilled* behaviors.
			4: Skilled	• Effectively direct collaboration and service delivery of the broad clinical team (internal and external). • Create a shared understanding and appreciation of all team member roles/responsibilities, including professionals representing integrated disciplines such as Oral Health and Behavioral Health, etc. • Develop a cadence for scheduling formal one-on-ones with team members to discuss projects, challenges, and resolutions. • Demonstrate *Applied* behaviors.
			3: Applied	• Lead successful team meetings with optimal member participation. • Communicate regularly with the fully integrated clinical team, including Oral Health and Behavioral Health team members, etc. • Determine how best to share information with others in the group. • Share all relevant information (as permitted by HIPAA). • Guide shared decision-making with stakeholders. • Proactively identify informal ways to meet and discuss relevant issues with specific team members.
			2: Basic	• Understand common concepts for forming and maintaining a true interdisciplinary team that at a minimum addresses Oral and Behavioral Health.
			1: Learning	• Aware of the importance of effective teamwork, and support other members of the health center team, including the Oral Health and Behavioral Teams, in whatever ways they need.

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B		2	Rating	Behavioral Examples
Care Teams	*Credentialing / Privileging*	Guide the health center's credentialing/privileging activities. **(III.B.2)**	5: Expert	● Submit new ideas to credentialing bodies on how to streamline the credentialing process. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Guide ongoing improvements to the health center's program for credentialing/privileging. ● Demonstrate *Applied* behaviors.
			3: Applied	● Manage the full credentialing process for the center. ● Interact with Board of Directors on credentialing/privileging. ● Ensure that privileges are granted in a timely manner as appropriate. ● Assess and confirm the qualifications of a health care provider to provide services for the health center. ● Determine the capabilities of the practitioner to be able to perform the scope of services needed by the center. ● Make specific recommendations regarding appropriate individuals (e.g., potentially impaired providers). ● Monitor the performance of the clinical staff to ensure that privileges should be maintained.
			2: Basic	● Understand both general principles of credentialing/privileging, and HRSA requirements on credentialing/privileging. ● Describe the various elements of credentialing and privileging processes and how they apply to the health center.
			1: Learning	● Aware of the importance of credentialing and privileging to managing the overall risk of the health center.

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Clinical Leadership Development: Core Competencies

VTF Domain III – *People*

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B		3	**Rating**	**Behavioral Examples**

Care Teams	*Provider Compensation*	Actively advocate for appropriate provider compensation. **(III.B.3)**	**5: Expert**	● Work with the senior management team to create new and innovative ways to improve compensation for the center and providers that incorporates:
				  ○ Risk based contracts
				  ○ Care and case management incentives
				  ○ Shared savings
				  ○ Capitation
				● Demonstrate *Skilled* behaviors.

			4: Skilled	● Work with other senior managers in the development and implementation of alternate provider performance compensation programs that include productivity, quality, and other organizational priorities, to improve provider recruitment and retention and strengthen the organizations financial stability. ● Demonstrate *Applied* behaviors.
			3: Applied	● Responsible for, or work with other senior managers, to oversee the implementation and modification of the provider compensation system. ● Work with provider staff to ensure their input to and understanding of the compensation plan.
			2: Basic	● Understand fundamental provider compensation models and their importance in promoting recruitment and retention and avoiding compensation inequity among providers.
			1: Learning	● Aware of provider compensation models.

CHANGE AREA	GENERAL TASK	SPECIFIC SKILL	**Instructions** Use this list to identify which level of proficiency best describes your behavior relative to this task. Any sub-bullets represent potential *specific examples* of this behavior.	
B		4	**Rating**	**Behavioral Examples**
Care Teams	*Professional Networks*	Continuously build knowledge and expertise through professional networks. **(III.B.4)**	**5: Expert**	● Take leadership role in Clinician Networks, Primary Care Associations (PCA) functions, and NACHC forums / projects. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Coach other members of the clinical team as to why it is important to continuously build knowledge/expertise through appropriate professional networks. ● Participate in an industry working groups as needed. ● Demonstrate *Applied* behaviors.
			3: Applied	● Routinely participate in Clinician Networks and appropriate PCA and NACHC activities. ● Seek to expand my network of clinician contacts.
			2: Basic	● Understand PCAs, Clinician Networks, and NACHC, and their relationships. ● Have a small network of clinician contacts.
			1: Learning	● Aware of the existence of the state PCA, Clinician Networks, and NACHC, but have limited involvement in their activities or programs. ● Have not yet established a network of clinician contacts.

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VTF Domain III – *People*

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C		1	**Rating**	**Behavioral Examples**
Governance & Leadership	*Mission, Vision, and Values*	Align clinical and tactical operations with the health center's mission, vision, and values. **(III.C.1)**	5: Expert	● Provide active leadership in creation of long-term goals and measurable objectives for the clinical component of the health center's long-term Strategic Plan. ● Initiate and collaborate **on** creative approaches to enhancing the reach of the health center to all customers and stakeholders through: ○ Improved funding ○ Innovative care delivery models ○ Alternatives to established health care mechanisms ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Guide the clinical team in keeping patients, families, and the community at the heart of decision-making regarding the health center's services. ● Coach others on how to ensure that annual goals and objectives are aligned with the health center's long-term strategy. ● Demonstrate *Applied* behaviors.
			3: Applied	● Annually, set and communicate specific and measurable goals and objectives for employees that align with the health center's mission, vision and values. ● Create a sense of shared mission, vision, values, and goals among all clinical team members. ● Ensure that employees know how their work contributes to the health center's mission. ● Demonstrate *Basic* behavior.
			2: Basic	● Articulate and fully understand concepts of Mission, Vision, and Values, and how these are applied within the health center and its external environment. ● Understand and commit to the health center's mission of service to under-served populations.
			1: Learning	● Aware of the need to set measurable objectives and goals and learning to align those goals to the long-term mission and vision of the health center.

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VTF Domain III – *People*

CHANGE AREA	GENERAL TASK	SPECIFIC SKILL	Instructions
			Use this list to identify which level of proficiency best describes your behavior relative to this task. Any sub-bullets represent potential *specific examples* of this behavior.
C		**2**	**Rating** — **Behavioral Examples**

CHANGE AREA	GENERAL TASK	SPECIFIC SKILL	Rating	Behavioral Examples
Governance & Leadership	*Interaction with Governance*	As part of the health center C-Suite team, appropriately support the health center's Governing Board. **(III.C.2)**	**5: Expert**	• Generate new internal initiatives (e.g., Quality Program innovations) involving the Clinical functional area, for Board consideration when appropriate. • With the CEO, present these new Clinical initiatives to the Board for approval and/or collaborative ideas. • Demonstrate *Skilled* behaviors.
			4: Skilled	• Collaborate with the Board and CEO on addressing new community-based initiatives involving the Clinical functional area. • In coordination with the health center CEO, help educate the Board on the ongoing dynamics and complexities of the health center Clinical function. • Coach Clinical staff on the importance and function of the Board, as well as how to help appropriately present information and support appropriate governance-level decision making by the Board RE: important Clinical and Quality issues. • Demonstrate *Applied* behaviors.
			3: Applied	• In coordination with the health center CEO, report governance-level information to the Board both verbally and in writing on important initiatives and activities within the health center's Clinical functional area. • In conjunction with the CEO, support the Board in its role adopting, evaluating, and approving relevant clinical quality policies. • Report to the Clinical staff on Board issues and decisions affecting them. • Work through appropriate Board/staff channels to facilitate ongoing Quality Management (monitoring, evaluation, and improvement) and Credentialing & Privileging activities.
			2: Basic	• Understand the fundamental relationship between the Governing Board and staff of a not-for-profit organization. • Understand basic HRSA Board requirements. • Know the need, and reasons, for a consumer-majority Board in health centers. • Understand the appropriate communication channels between the health center staff and the Governing Board. • Know the role of the health center's Clinical Leader in staff/Board dynamics and communications.
			1: Learning	• Aware of the need for a Governing Board in not-for-profit organization such as health centers.

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VTF Domain III – *People*

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C		**3**	**Rating**	**Behavioral Examples**
Governance & Leadership	*Personnel Management*	Effectively carry out all relevant health center personnel management functions. **(III.C.3)**	**5: Expert**	● Craft a clinical staffing plan for the health center to fulfill objectives. ● Create a structured template and a series of questions for conducting interviews for key clinical positions in the health center. ● Develop innovative retention approaches to create a rewarding and fulfilling work environment. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Coach others on how to conduct performance reviews, and how to recruit the best employees and keep them on board. ● Demonstrate *Applied* behaviors.

			3: Applied	● Conduct real-time coaching/mentoring when I see an opportunity for it.
				● Provide coaching and feedback in a timely, candid, and respectful fashion.
				● Conduct performance reviews.
				● Recognize the effort of individuals and celebrate excellence when observed.
				● Use a variety of methods to attract qualified talent:
				  ○ LinkedIn/social media
				  ○ Employee/manager referrals
				  ○ Professional societies/associations
				  ○ Community outreach
				● Execute recruiting and retention strategies.

			2: Basic	● Understand personnel management fundamentals (managing direct reports, performance evaluation, progressive discipline, etc.). ● Can execute effective recruiting and retention strategies with assistance from others.
			1: Learning	● Aware of the responsibilities for effective personnel management in the health center but have limited to no experience in managing other people.

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Clinical Leadership Development: Core Competencies

VTF Domain III – *People*

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C		4	**Rating**	**Behavioral Examples**
Governance & Leadership	*Emotional Intelligence*	Leverage Emotional Intelligence theory for the benefit of self and the clinical team. **(III.C.4)**	**5: Expert**	● Perceived internally and externally as expert in knowledge and routine application of Emotional Intelligence. ● Serve as an educational resource in regard to Emotional Intelligence for related external parties (individual and groups). ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Coach clinical team in effective use of Emotional Intelligence for the benefit of themselves and the organization. ● Demonstrate *Applied* behaviors.
			3: Applied	● Apply Emotional Intelligence theory in working with clinical team. ● Successfully employ social awareness, positive relationship management, and empathy. ● Demonstrate *Basic* behavior.
			2: Basic	● Know Emotional Intelligence theory. ● Able to apply Emotional Intelligence theory to self through self-awareness and self-management.
			1: Learning	● Aware of Emotional Intelligence but lack significant knowledge of it.

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C		5	**Rating**	**Behavioral Examples**
Governance & Leadership	*Ethics*	Demonstrate commitment to the highest standards of ethical responsibility. **(III.C.5)**	**5: Expert**	● Create ethical dilemma scenarios/simulations for health center training purposes. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Actively lead health center efforts to meet the highest ethical standards in all health care issues. ● Guide members of the clinical team in how to address ethical dilemmas. ● Demonstrate *Applied* behaviors.
			3: Applied	● Consistently and frequently communicate the ethical standards of the health center to the health center clinical staff. ● Model the ethical behavior advocated. ● Provide avenue for discussion of ethical issues for staff and managers.
			2: Basic	● Understand governmental channels and critical dynamics regarding ethically-related considerations (right-to-life/end-of-life issues, HIV/AIDS services, etc.).
			1: Learning	● Aware of the importance of maintaining high ethical standards.

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VTF Domain III – *People*

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C		**6**	**Rating**	**Behavioral Examples**
Governance & Leadership	*Modeling Behavior*	Facilitate positive and constructive interactions with and among staff, patients, and families (both individually and in groups). **(III.C.6)**	**5: Expert**	● Create innovative approaches for interacting with stakeholders in a manner that creates respect and positive responses. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Continuously earn respect from providers, other health center staff, patients, families, and communities. ● Successfully foster a fear-free environment in which creativity is actively encouraged and mistakes are openly permitted in pursuit of excellence. ● Demonstrate *Applied* behaviors.
			3: Applied	● Demonstrate "active listening" by summarizing, clarifying as needed, and appropriately reflecting the communications of others. ● Demonstrate open communication and desire for "win-win" solutions. ● Demonstrate the ability to give/receive constructive feedback in a positive, and respectful manner. ● Create a clinical environment in which innovation is valued and rewarded.
			2: Basic	● Understand basic communication theory (including concepts regarding semantics). ● Understand how to treat staff, patients and family members with honesty and respect.
			1: Learning	● Aware of the importance of creating positive and constructive interactions with everyone involved in the health center.

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C		**7**	**Rating**	**Behavioral Examples**
Governance & Leadership	*Marketing and Social Media*	Leverage marketing opportunities and social media to continuously enhance the health center's image within the community and among external constituencies. **(III.C.7)**	**5: Expert**	● Routinely author and share, via social media, emerging issues and promising practices. ● Often requested to speak at industry events. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Lead discussions on relevant social media channels concerning health issues facing community. ● Demonstrate *Applied* behaviors.
			3: Applied	● Actively seek out and undertake presentations that effectively represent the health center and the health center model to constituent groups and other external parties, in order to advance the health center mission and leverage new opportunities. ● Use LinkedIn and other relevant social media channels to expand my presence in the community. ● Make effective presentations as requested to internal and external groups.
			2: Basic	● Articulate basic public relations principles (including marketing, social media, etc.). ● Have basic presentation skills and ability to use presentation software.
			1: Learning	● Aware of the importance of marketing the value and the capabilities of the health center to the community but have no experience in social media channels to accomplish that objective.

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Clinical Leadership Development: Core Competencies

VTF Domain III – *People*

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C		**8**	**Rating**	**Behavioral Examples**
Governance & Leadership	*Management*	Demonstrate the ability to effectively carry out general management functions. **(III.C.8)**	**5: Expert**	● Create new and innovative approaches to time and project management that can positively impact the execution of clinical functions. ● Seek and create new ways of organizing work for maximum productivity and to ensure cost-effective and timely project results. ● Project management tools and templates. ● Recognized as an expert by others - sought out to provide guidance. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Take a collaborative leadership role within the health center regarding organizational planning and coordination. ● Coach others on how to develop responses to possible scenarios before they occur. ●Demonstrate *Applied* behaviors.
			3: Applied	● Utilize structured project management techniques to plan, coordinate and execute clinical functions. ● Assign responsibilities as appropriate to assist in coordination of clinical functions. ● Monitor execution of assignments to ensure activities are accomplished according to the plan. ● Consistently plan clinical functions in advance and respond to changing circumstances by modifying the plan. ● Prepare/lead clinical staff meetings using recognized meeting management techniques.
			2: Basic	● Understand the fundamental concepts of time/meeting/project management.
			1: Learning	● Have limited training or experience with formalized time management and or project management techniques.

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D		**1**	**Rating**	**Behavioral Examples**
Workforce	*Workforce Well-Being*	Strive for understanding and actualization of effective workforce well-being, both personally and for the clinical team. **(III.D.1)**	**5: Expert**	• Seen as mentor to staff and others in successful promotion of ongoing resilience and workforce well-being. • Demonstrate *Skilled* behaviors.
			4: Skilled	• Coach staff in ability to identify specific instances of lack of workforce well-being. • Guide staff in knowing how to promote workforce well-being. • Coach staff in stress tolerance and resilience skills. • Demonstrate *Applied* behaviors.
			3: Applied	• Able to identify symptoms of lack of both workforce well-being and personal resilience, in both self and staff. • Can successfully intervene in instances of lack of joy in work.
			2: Basic	• Understand fundamental dimensions of stress tolerance and resilience. • Know symptoms of lack of workforce well-being, in self and others.
			1: Learning	• Generally aware that lack of workforce well-being is a potentially serious problem, but not knowledgeable about how to prevent/identify/address instances of it.

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D		**2**	**Rating**	**Behavioral Examples**
Workforce	*Joy in Work*	Demonstrate knowledge of both personal and organizational causes/effects of lack of joy in work. **(III.D.2)**	**5: Expert**	● Identify innovative ways to permanently minimize both personal/relational and organizational/technical causes and effects of lack of joy in work. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Coach clinical team in ways to modify/minimize personal and relational causes and effects of lack of joy in work. ● Instruct clinical team in ways to modify/minimize organizational and technical causes and effects of lack of joy in work. ● Demonstrate *Applied* behaviors.
			3: Applied	● Guide staff in learning specifics of personal/relational causes and effects of lack of joy in work. ● Guide staff in learning specifics of organizational/technical causes and effects of lack of joy in work. ● Demonstrate *Basic* behaviors.
			2: Basic	● Know personal/relational causes and effects of lack of joy in work. ● Know organizational/technical causes and effects of lack of joy in work.
			1: Learning	● Aware that lack of joy in work is a significant organizational problem but have little knowledge of its causes and effects.

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D		**3**	**Rating**	**Behavioral Examples**
Workforce	*Change Management*	Successfully navigate change as a leader and provide support for the clinical team as the health center adopts new initiatives and addresses new care model. **(III.D.3)**	**5: Expert**	● Seen as mentor, both internally and with related external parties, in effectively dealing with stressors resulting from environmental or organizational change. ● Demonstrate *Skilled* behaviors.
			4: Skilled	● Communicate genuine empathy with the clinical team with regards to their responses to significant change. ● Coach clinical team in successfully overcoming negative responses to significant change. ● Demonstrate *Applied* behaviors.
			3: Applied	● Employ self-awareness and Change Management theory in positively managing own responses to significant health care and organizational change. ● Employ Change Management theory in positively managing clinical team responses to significant changes in health care and the health center organization. ● Demonstrate *Basic* behaviors.
			2: Basic	● Know Change Management theory. ● Have understanding of responses to change by self and others.
			1: Learning	● Have some awareness of responses to change by self and others.

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E		**1**	**Rating**	**Behavioral Examples**
Partnerships	*Training Programs*	Serve as organizational focal point for development and/or implementation of onsite or health center-based clinical and related training programs. **(III.E.1)**	**5: Expert**	• Manage sustainable health center-based clinical and related training programs (e.g., Medical or Dental Residency, NP/PA residency). • As called for, work collaboratively with executive leadership, using appropriate development steps, to start specific new clinical and related training programs. • Work with local academic institutions, helping shape faculty development to support needed education and training programs. • Work with National, Regional/State, and/or Local organizations that promote health center-based education (e.g., EHCI, THCGME). • Demonstrate *Skilled* behaviors.
			4: Skilled	• As needed, work to expand existing health center clinical and related training programs, collaborating with executive leadership to understand financial impact, required resources, and necessary decisions. • Develop relationships with potential education/training partners. • Identify internal leaders to manage clinical and related training programs. • Address accreditation requirements for relevant programs as appropriate. • Demonstrate *Applied* behaviors.

			3: Applied	• Assess outcomes of existing programs within the health center addressing diverse professions and support fields including Medical/PA/NP students, Medical Residents, NP/PA residents, MA's, Nurses, Behavioral Health, and Dental Health (Residents, Hygienists, and Dental Assistants):
				    o # students / residents
				    o Impact on productivity / workflow
				    o # retained in the health center (or similar sites)
				• Work with the State/Regional PCA to determine how it is supporting educational health center development.
				• Identify potential areas in which to expand current educational programs.
				• Know when appropriate to partner for rotations vs. starting own program(s).

			2: Basic	• Know existing clinical education and training programs in which the health center currently participates, and any related agreements. • Know appropriate deliverables for clinical education or training programs. • Know all current health center training partners, if any. • Know available external resources (e.g., EHCI, Weitzman Institute, local educational institutions, AHEC's, etc.).
			1: Learning	• Aware of the potential benefits of health center-based education and training programs for clinical positions (i.e., the "Grow Your Own" philosophy).

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E		2	**Rating**	**Behavioral Examples**
Partnerships	*Academic Affiliations*	Create and maintain, whenever appropriate, health center affiliations with external academic and related organizations. **(III.E.2)**	**5: Expert**	• Routinely investigate potential new and innovative types of relationships with academic and related organizations that mutually benefit those institutions, the health center, and the clinical workforce at all levels. • Actively advocate with other National, Regional/State, and Local organizations RE: the value of academic and related affiliations/partnerships. • Demonstrate *Skilled* behaviors.
			4: Skilled	• Successfully manage all appropriate academic and related affiliation agreements. • Coach others on developing and managing affiliation relationships and related funding sources. • Demonstrate *Applied* behaviors.
			3: Applied	• Maintain an active internal process to continually identify areas in which the center could benefit from academic and related affiliations. • Utilize policies and procedures to guide ongoing development of academic and related affiliations. • Effectively analyze the costs and benefits of developing potential affiliations. • Identify appropriate internal staff to manage academic and related affiliations.

			2: Basic	• Know health center mission areas that could potentially benefit from academic/training affiliations, including but not limited to:
				   o Recruitment and retention
				   o Research
				   o Ongoing clinical staff acculturation
				• Understand that while such affiliations are potentially available to all health centers, the practical range of possible activities may depend on center location/setting, size, etc.
				• Know potential training partners (National, Regional/State, Local).
				• Know external entities that have approached the center to partner (e.g., educational placements, participation in clinical research, etc.).
				• Know available resources for assistance in development of academic and related affiliations (e.g., NTTAPs, CHC collaboratives, etc.).

			1: Learning	• Aware of the potential value to health centers of academic and related external affiliations.

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