



STRATEGIC PLAN:
GOALS & OBJECTIVES 2018/19 MONITOR

WE WILL PROVIDE EXCEPTIONAL QUALITY AND SAFE CARE WITHIN A COMPREHENSIVE COMMUNITY HOSPITAL

- % of Primary and Secondary care of Chatham-Kent residents delivered in Chatham-Kent
- Top quartile all provincial wait times
- Top quartile Hospital Standardized Mortality Ratio and/or other patient safety outcomes

Strategic Direction Goals	Objectives	Responsible	Start Date	End Date	Year	Status	Comments/Notes
1 Identify gaps and create strategies to improve access and coordination of comprehensive hospital care	Identify clinical services required by the community within CKHA through environmental scan and evaluation of statistics/data from other credible sources, such as LHIN and MOHLTC	CSP	September 2018	March 2019	1		
	Leverage existing and build new partnerships to coordinate services that provide quality, well-coordinated care for all patient's needs at all stages of life	COS CNE	January 2019	October 2020	1		
	Identify current gaps in service that could be provided by a medium community hospital and investigate implementation of these services where appropriate, e.g. Urology	CNE COS	May 2018	April 2020	1		<ul style="list-style-type: none"> • Assignment of project staff by September 2018 • Gap analysis presented to Quality Utilization Review Committee (QUR) March 2019 • Business case specifically re Urology to be completed by December 2018
2 Partner with patients and families to provide the safest, most effective quality care possible	Engage Patients and Families in all Quality Improvement Initiatives identified in the annual Quality Improvement Plan (QIP)	CNE	April 2018	April 2021	1		<ul style="list-style-type: none"> • Majority of initiatives on QIP have patient advisors assigned & engaged
	Engage with partners and patients to ensure transitions between providers, departments, and care settings are patient centered, coordinated, effective and safe e.g. Bundled Care	CNE	June 2018	April 2019	1		<ul style="list-style-type: none"> • Regional assessment centre (RAC) plan for implementation April 2019 • Providing "Bundled Care" currently and in contract in negotiation with Erie St. Clair LHIN/Rehab providers
	Develop and implement a response to Patient Safety Culture survey to nurture and support a culture of quality and safety	CNE	June 2018	Sept 2018	1		<ul style="list-style-type: none"> • Plan developed and on target for completion by due date
	Adopt innovations and practices that provide good value for money identified through benchmarking with like organizations and the Advisory Board	CNE	May 2018	April 2020	1		<ul style="list-style-type: none"> • Kick-off of Strategic Plan with Advisory Board completed in June 2018 with Leadership Forum and Physician Leads

Legend:
● Project on track for completion by due date
● Project slightly off track or in danger of becoming off-track
● Project off-track
● Project complete

Person Responsible:
 CEO – Chief Executive Officer
 COS – Chief of Staff
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2018/19 STRATEGIC PLAN DELIVERABLES

Strategic Direction Goals	Objectives	Responsible	Start Date	End Date	Year	Status	Comments/Notes
	Partner with Patient Advisors to develop and implement a patient safety plan	CNE	June 2018	July 2018	1		<ul style="list-style-type: none"> Draft Patient Safety Plan developed and incorporating into framework to be completed by August 31, 2018
3 Provide Equitable Access to Care	Implement a model of care that provides the right level of care by the right provider for the right patient at the right time and in the right place.	CNE	June 2018	June 2020	3		<ul style="list-style-type: none"> Opportunity to implement model of care identified Complex Continuing Care (CCC) Mental Health Inpatient Program staffing levels adjusted to shift some resources from evenings to nights to provide better coverage
4 Monitor and evaluate the impact of the strategic plan on quality and safety outcomes	Develop scorecards with standardized and customized indicators to monitor effectiveness of all clinical programs/services.	CSP	June 2018	Dec. 2018	1		<ul style="list-style-type: none"> Team resources identified for each Program Program planning to be completed in September 2018

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WE WILL ENGAGE WITH PATIENTS, FAMILIES AND THE COMMUNITY TO DELIVER PATIENT CENTRED CARE

- Top quartile patient satisfaction scores
- Patient Experience Advisors and Community members meaningfully engaged in Programs and Services
- Evidence of Seniors' and Indigenous health strategies in programs and services across CKHA

Strategic Direction Goals	Objectives	Responsible	Start Date	End Date	Year	Status	Comments/Notes
1 Implement framework for Patient Family Centred Care	Complete an assessment through Institute of Patient Family Centred Care and best practice review to determine governance structure, organizational framework and priority areas of focus	CCE	July 2018	November 2018	1		<ul style="list-style-type: none"> • Institute of Patient and Family Centred Care Self-Assessment of readiness to be completed by September 2018 • Action plans to be reviewed by Patient Experience & Community Advisory Council
	Develop a PFCC education program for leaders, Board, physicians, staff and volunteers to renew cultural commitment to PFCC including model, common language, use of patient stories, tools etc.	CCE	January 2019	June 2019	2		
	Empower and collaborate with the Patient Experience and Community Advisory Council on a corporate-wide PFCC work plan to address gaps and opportunities identified through the assessment and assign patient advisors to all program councils, committees and key corporate projects	CCE	November 2018	April 2019	1		

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WE WILL ENHANCE ACCESS TO HEALTHCARE FOR OUR COMMUNITY

- Clinical programs demonstrate improved access to care closer to home and a shift from bedded to ambulatory care
- >90% of medical residents who train in Chatham-Kent choose to practice in rural setting
- Engaged in research and/or program evaluation of rural health

Strategic Direction Goals	Objectives	Responsible	Start Date	End Date	Year	Status	Comments/Notes
1 Identify gaps and create a framework for delivery of healthcare across our community	Identify clinical services required by the community across the region through environmental scan and evaluation of statistics / data from credible sources, e.g. LHIN and MOHLTC.	CSP	September 2018	March 2019	1		
	Introduce new programs/services based on assessment of community needs e.g. home dialysis	CEO	January 2019	March 2021	1		
2 Develop new and enhance existing partnerships with various providers	Provide a platform for community partners to collaborate and engage with CKHA in provision of healthcare, with a focus on acute and chronic care services in the region.	CEO	September 2018	March 2021	1		
	Develop and execute innovative service delivery programs in partnership with healthcare service providers in the community.	CEO	January 2019	March 2021	1		
	Strengthen and optimize the role of primary care providers by engaging them in the development of CKHA clinical programs and services	CEO COS	September 2018	March 2021	1		
	Leverage partnerships and existing facilities, structures and roles to create or enhance access to services beyond the hospital's walls by identifying services that can be safely offered in another location.	CEO COS	September 2018	March 2021	1		

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WE WILL LEVERAGE TECHNOLOGY AND INFRASTRUCTURE TO ENABLE CARE

- Implement new Health information System and exceed EMRAM 6 score
- Progress in capital project plan for both sites

Strategic Direction Goals	Objectives	Responsible	Start Date	End Date	Year	Status	Comments/Notes
1 Identify gaps and opportunities to create a digital roadmap that aligns to the provincial digital health plan	Improve network infrastructure – meet HIS, Staff Alarm/Safety, equipment tracking, and other wireless needs – such as Telemetry, nurse call system integration, and improved cell coverage	CFO	June 2018	Apr 2019	1		<ul style="list-style-type: none"> • Capital approved for expenditure in 2018/19 • RFP development in progress
3 Achieve a new Health Information system at EMRAM 6 level of automation	Standardize workflows to extent possible, to avoid errors and less efficient work around solutions such as handling paper and duplicate entry of information	CFO CNE	April 2018	April 2019	1		<ul style="list-style-type: none"> • KPMG engaged in regional workflows
	Implement HIS (Cerner) for comprehensive core system and initiate ancillary plan for non core systems to support regional HIS delivery approach	CFO	September 2018	October 2019	1		
	Enable system improvements that require less reliance on specialized staff for routine work that can be avoided or done by others on the team	CFO CNE	June 2018	Dec 2020	1		<ul style="list-style-type: none"> • KPMG engaged to review workflows
	Auto generate needed data from the system to report, plan and manage at a patient care, hospital and system level	CFO CSP	June 2018	Dec 2019	1		<ul style="list-style-type: none"> • Assessment with all programs underway
4 Optimize the physical environment across sites	Develop staged facility improvement plans along with planning partners (including patient representatives) to improve functionality, infection control measures and patient experience at both sites	CFO	April 2018	Dec 2019	1		<ul style="list-style-type: none"> • Dialysis and Oncology renovations underway
	Complete Master plan and Master program for future development	CFO	June 2018	Dec 2020	1		<ul style="list-style-type: none"> • Master Plan, Master Program submitted to the Ministry pending review

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WE WILL OPTIMIZE OUR CULTURE AND PROVIDE A SAFE ENVIRONMENT FOR OUR PEOPLE TO BE THEIR BEST

- Top quartile staff and physician engagement scores
- Reduced lost time due to injury, absenteeism & incidents of workplace violence

Strategic Direction Goals	Objectives	Responsible	Start Date	End Date	Year	Status	Comments/Notes
1 Build a culture of trust, transparency and inclusiveness	Promote interdisciplinary and inter departmental collaboration and knowledge sharing across the organization by implementing the Experience CKHA recommendations	CHO	August 2018	March 2019	1	●	• Planning with program services and department underway
	Implement Reward and Recognition working group recommendations to build a culture of appreciation.	CHO	May 2018	January 2019	1	●	• Implemented recommendations to the Annual Perfect Attendance Program . • Implemented amendments to Alliance Awards process
	Monitor and respond to staff/physician/volunteer satisfaction results including annual corporate level action plan developed with WeRCKHA and departmental plans focused on greatest opportunities	CCE CSP	February 2019	June 2019	1		
	Enhance inclusion of Patient Advisors in human resources practices including the physician and staff orientation program, policies and interviews.	CHO	August 2018	August 2019	1	●	• Non management, non union interviews Patient Advisors are included in interviews where appropriate
2 Provide a safe and healthy workplace	Adopt and implement the National Standards for Psychological Health and Safety in the Workplace	CHO	May 2018	March 2021	1	●	• Implementation plan developed
	In collaboration with partners, develop and implement a Wellness Strategy to improve mental health in the workplace and raise awareness/promote the benefits of good nutrition and physical activity	CHO	August 2018	December 2019	1	●	• Coordinating manager training reoffering certification in mental health first aid training • Mindfulness Mondays, Walking Wednesdays and Farmers market Fridays
	Enhance access to the tools (equipment), techniques (processes and methodologies) and training for employees, physicians and volunteers to perform their best (e.g. conflict training and difficult conversations)	CHO	March 2019	March 2020	1		

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2018/19 STRATEGIC PLAN DELIVERABLES

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	Create a workplace free of violence, harassment and safety hazards through the development of corporate-wide and department specific work-plans	CHO	May 2018	August 2019	1		<ul style="list-style-type: none"> Flagging Acting Out Behaviours of patients approved and in process of training/implementation Staff duress system approved in Capital 2018/19 and going to RFP Critical incident training/debriefing Crisis prevention intervention for all staff
3 Cultivate a highly skilled, engaged and diverse workforce	Research best practices in health human resource planning and revise the current Health Human Resource Plans to adopt leading practice and implement strategies to ensure sufficient and highly skilled workforce	CHO	May 2018	Sept 2018	1		<ul style="list-style-type: none"> On track for completion
	Clarify roles and performance expectations by reviewing and updating all job descriptions and review and revise current performance evaluation and feedback tools to enhance timely and appropriate feedback.	CHO	June 2018	October 2019	1		<ul style="list-style-type: none"> On track for completion for job description component
4 Support and Enhance Leadership	Adopt and Implement Leadership Development Framework for Leadership Forum and Medical Advisory Committee members	CHO	May 2018	June 2019	1		<ul style="list-style-type: none"> Adopted the LEADS framework, Initial training provided to Senior Leadership, Directors, Medical Directors 2 leaders completing 5 day LEADS Learning Series workshop
	Enhance Leadership/New Manager & Emerging Manager training by leveraging the Harvard Manager Mentor Program	CHO	November 2018	December 2019	1		
	Develop and implement a Talent Management Strategy to strengthen existing leadership development and create a leadership pipeline for succession planning at all levels of organization	CEO	September 2018	September 2019	1		

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WE WILL ENSURE VALUE AND OPTIMIZE OUR OPERATING PERFORMANCE

- Total Margin >0
- Budget includes capital allocation 2%
- Line of credit limit <\$5 million

Strategic Direction Goals	Objectives	Responsible	Start Date	End Date	Year	Status	Comments/Notes
1 Optimize planning and performance processes, tools and use	Develop an annual planning and performance cycle at the corporate and program/service level including planning, monitoring and reporting expectations and mitigation strategies based on results	CSP	July 2018	December 2018	1		<ul style="list-style-type: none"> • On track for completion • Draft prepared for Senior Leadership Team review
	Engage Patient Advisors in Program and Service annual plans and in developing the associated budgets	CSP	October 2018	March 2019	1		
2 Entrench the concept of choosing wisely across all operations	Implement the “Choosing Wisely” campaign in areas where best practices are established e.g. diagnostics	COS	September 2018	September 2021	1		
	Implement strategies to reduce or eliminate waste in processes, resources and time across the organization to improve performance compared with benchmarks	CSP	October 2018	January 2020	1		
3 Identify and capitalize on opportunities to generate more revenue	Partner with the CKHA Foundation to increase donations to support investment in equipment and infrastructure	CEO	July 2018	December 2018	1		<ul style="list-style-type: none"> • Approved capital list for 2018/19 • Foundation provided with priorities for potential donors
	Optimize data collection and coding through education and automate to extent possible	CSP	September 2018	September 2019	1		
4 Ensure the capital and operating budgets align to the strategic plan	Focus on small meaningful investments in the physical environment that improve the staff and patient experience	CFO	September 2018	September 2020	1		

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