

PRH's Revised Strategic Goals/Objectives for 2018-2019

(Based on Board Retreat held Oct. 20-21, 2017)

Context for PRH's Strategic Plan:

- Uncertainty remains about sub-regional LHIN accountability requirements and level of guidance. Early indications suggest that the Champlain LHIN is taking a reasonably low-enforcement / high encouragement approach.
 - Very few person-days of time are being invested at the LHIN in sub-regional management (2.2 people – including 1 sub-regional director, 1 home care lead and 0.2 of a sub-regional clinical lead).
 - PRH continues to indicate to the Champlain LHIN that it is prepared to play a leadership role in the sub-region.
 - However, without a strong and enforceable requirement from the LHIN that all players in the sub-region start to actively coordinate and strategize collaboratively, the situation is likely to be status quo (i.e. self-directed collaboration based on good will).
- Coordinated care planning for complex patients (Health Links) remains a top priority for Ministry/LHINs
- Primary care in Renfrew County is not well organized and this is contributing to inappropriate hospital utilization (e.g. non-urgent ER visits, re-admits, etc.) A key factor in this is that 60% of primary care physicians are solo practitioners in the sub-region. This equates to very little team-based interdisciplinary care.
- Population health status in Renfrew County is not good in terms of prevalence of various chronic diseases and this is correlated with unhealthy lifestyle decisions (smoking, alcohol, poor diet and lack of exercise).
 - Increasing relationship between the LHIN and public health units may assist planning, but it is too early to tell.
- Socioeconomic status and social support are both very low in the sub-region, which are two core factors that correlate to poor health and comorbidities of patients.
- Serving the vulnerable (“those most in need”) remains a tenet of Catholic health mission.
- Community partnerships are required to tackle social determinants of health that are contributing to burden of disease.
- Financial Context – PRH is experiencing an unprecedented challenge in its working capital position limiting its ability to respond to key challenges.



STRATEGIC PILLAR 1 - PATIENT FOCUSED

1.0	Strategic Goal #1: <i>Providing care closer to home</i>	<i>Why this is important</i>	<i>Measures of Success</i>
1.1	Develop a plan to repatriate complex care /critical care services to our PRH community. Examples: <ul style="list-style-type: none"> • Closed ICU with specialist team • Surgical Program • Medical Program • Inpatient Mental Health 	This objective will improve service and increase access to critical care. It will provide better patient care closer to home. It will enable PRH to offer the same quality or higher than patients can receive outside of PHR.	<ul style="list-style-type: none"> • # of MOUs developed to fill service gaps. • More training (referral). • Increased # of weighted cases. • Reduced referral outside of PRH catchment (referral patterns change). • Achieving the expected cost per case. • Reduced transfers to other ICUs. • Increased weighted cases. • Increased ventilator days.
1.2	Review opportunities that are appropriate for PRH that can replace weighted cases 'lost' from efficiencies: <ul style="list-style-type: none"> • Work with MAC to examine new opportunities (e.g. orthopedic procedures, rehabilitation) within HSFR framework. 	When specialists and allied health providers are educated, they will understand PRH's services. This will prevent primary care providers from routing patients elsewhere and provide care closer to home.	<ul style="list-style-type: none"> • Increased weighted cases. • Greater number of educated primary care providers.

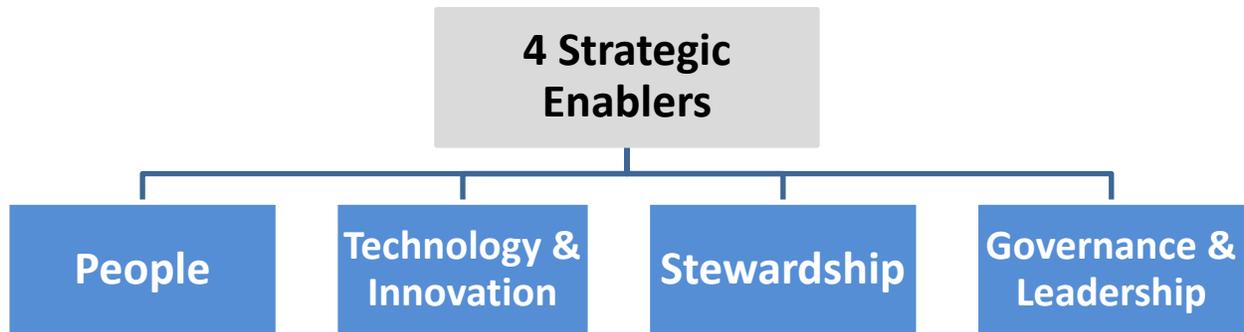
1.3	Pursue a partnership with CHEO on Kids Health Alliance and participate in the implementation of the Champlain LHIN Thrive report.	This focus will enable greater collaboration and eventually leading to better meeting the needs of the paediatric population in our service area.	<ul style="list-style-type: none"> • A MOU exists with CHEO for Kid's Health Alliance by April 2018. • Respond to opportunities from the Champlain LHIN to participate in children's services planning initiatives through the Thrive Report.
2.0	Strategic Goal #2: Exceeding patient's expectations	Why this is important	Measures of Success
2.1	Advance patient and family centred care	Patient and family centred care is the gold standard of care. It is important. Patients and families should be active participants in planning and designing care. Patients and family should be active participants in their own care (Nothing About Me, Without Me).	<p>Direct measures:</p> <ul style="list-style-type: none"> • Gaps in achieving patient centered care are reduced. • There is an increase in the # of patient advisors on the leadership team <p>Indirect measures:</p> <ul style="list-style-type: none"> • Reduced # of complaints. • Increased # of compliments. • Higher patient satisfaction scores.
2.2	Identify three action items from the community survey process.	This will enhance the PRH brand and community trust.	<p>Direct measures:</p> <ul style="list-style-type: none"> • Three actions identified and implemented. • Improvement in patient satisfaction scores.

STRATEGIC PILLAR 2 – QUALITY AND SAFETY

1.0	Strategic Goal #1: <i>Services with the highest quality & safety</i>	<i>Why this is important</i>	<i>Measures of Success</i>
1.1	Continue to implement best practices in antibiotic utilization.	Minimize risk from broad spectrum antibiotics (reduce rates of C-difficile, adverse drug reactions, reduce resistance to antibiotics).	<ul style="list-style-type: none"> • Reduce daily dose of broad spectrum antibiotics. • Increase adoption of two clinical best practice pathways.
1.2	Continue to advance Health Links Coordinated care planning for complex patients and broaden partnership to non health care partners (e.g. housing, public health).	The rate of acceleration of Health Links is increasing (larger number of cases). Patient numbers are increasing. This area aligns with LHIN priorities. Need to meet targets and manage the risk associated with higher patient load. Bringing in additional partners helps to address underlying socio-economic challenges that influence patient co-morbidity.	<ul style="list-style-type: none"> • 600 plans by 2019. • Stronger linkages with supportive housing. • Stronger linkages with public health.
1.3	Engage with the Champlain LHIN initiative for regional models to support inpatient mental health.	This focus will share our local challenge with other mental health providers in the Champlain LHIN and engage them in the solution; it will support our mental health population better.	<ul style="list-style-type: none"> • Respond to opportunities from the Champlain LHIN to participate in mental health services planning initiatives through the recent 2017 inpatient mental health study.
2.0	Strategic Goal #2: <i>Exceptional health and wellness as a quality and safety driver</i>	<i>Why this is important</i>	<i>Measures of Success</i>
2.1	Increase the focus on occupational health and wellness and violence prevention in the workplace.	Staff health and wellness is directly linked to quality – improvement of one impacts the other. Safety is a strategic priority. Violence in hospitals is a known issue in Ontario that needs to be addressed. Violence in the Workplace is a new mandatory QIP indicator. PRH needs to be seen as taking leadership and action.	<ul style="list-style-type: none"> • Reduction in preventable incidents. • Increase in staff engagement and satisfaction.
2.2	Develop a timely response to the Ministry of Labour Report.	The Ministry of Labour has challenged PRH to do a better job.	<ul style="list-style-type: none"> • Develop an action plan in response to the MOL report.

STRATEGIC PILLAR 3 – WORKING WITH OTHERS

1.0	Strategic Goal #1: <i>Working Collaboratively with the LHIN and sub-LHIN partners to successfully implement the Patients First Act</i>	<i>Why is this important</i>	<i>Measures of Success</i>
1.1	Develop and implement a plan to show leadership/ influence/advocacy for the LHIN sub-region.	As the largest health entity in West Champlain we recognize our need to provide leadership.	<ul style="list-style-type: none"> • Amount of active engagement by PRH: <ul style="list-style-type: none"> ○ # of times PRH asked to lead on behalf of LHIN ○ # of times PRH asked to participate ○ # of committees PRH is a member of
2.0	Strategic Goal #2: <i>Ongoing relationship building with local partners</i>	<i>Why this is important</i>	<i>Measures of Success</i>
2.1	Strengthening key community partnerships: <ul style="list-style-type: none"> • Primary Care providers • Carefor • CLHIN Home & Community Care • Deep River Hospital • Public Health Units • Garrison Petawawa • etc. 	PRH recognizes the need to be an active participant in a regional system of care. To ensure that we can overcome the challenge of continuity when there is leadership turnover with key partners.	<ul style="list-style-type: none"> • Opportunities for collaboration with key partners are understood and mapped
2.2	Strengthen relationships with our local First Nation community.	Providing culturally safe care helps us to deliver better patient outcomes for this population	<ul style="list-style-type: none"> • # staff who have received cultural sensitivity training • Explore opportunities for partnership



STRATEGIC ENABLER – STEWARDSHIP			
1.0	Strategic Goal #1: Sustainable funding for PRH that supports care closer to home	<i>Why this is important</i>	<i>Measures of Success</i>
1.1	Explore options available and scenario plans on funding and cash flow.	Improving working capital will provide stability and ability to implement key strategic priorities.	<ul style="list-style-type: none"> Options and scenarios are developed.
1.2	Maximize rental opportunities.	Effective use of available resources.	<ul style="list-style-type: none"> New tenants identified and selected that fit with PRH mission and support strategic directions. % of space rented