

St. Joseph's General Hospital Elliot Lake

Strategic Plan

Strategy Refresh 2010



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1 OVERVIEW

1.1 PHILOSOPHY AND APPROACH

Without a known starting point and an agreed upon destination, charting the course for any journey would be a difficult task. The same principle holds for organizations.

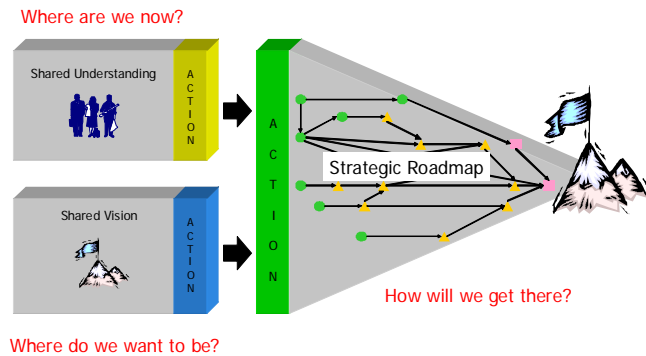
The reason why organizations develop strategies and plans is to generate positive results. It's about making things better. Strategy is the roadmap to positive change.

The three fundamental questions in developing an effective strategic plan are:

- Where are we now?
- Where do we want to be?
- How will we get there?

The questions correspond with three phases of a strategic planning initiative:

- Current state assessment
- Future state visioning
- Strategy development



1.2 THE STRATEGIC PLANNING PROCESS

A decision was taken by the Board to refresh the current strategic plan in 2010.

The first step in this process was to convene a one day meeting where key community healthcare partners met to exchange information relative each organization's healthcare strategies with a view to ensuring that each organization's healthcare strategies were aligned to those of the other organizations. This exercise confirmed that the healthcare strategies of the key stakeholders in Elliot Lake were synchronized.

A weekend retreat was held involving the Board and the Senior Management Team in the summer of 2010 to kick-start the process. In this session we reviewed the key current state factors and future state vision elements. We explored the meaning and intent of each strategy. Modifications were adopted to reflect changes in the environment and new thinking.

Further detail and refinements were added in a series of intensive sessions with the Senior Management Team and Department Heads during the fall of 2010.

The result is an updated Strategic Plan for 2010-2013.

These sessions resulted in the development of a draft strategic plan that will be presented to the Board for discussion.

1.3 OVERVIEW OF STRATEGIC PLAN

Before any organization can begin to develop a strategic roadmap to guide their development, they must have a shared understanding of where they are today; and a shared vision of where they want to be in the future.

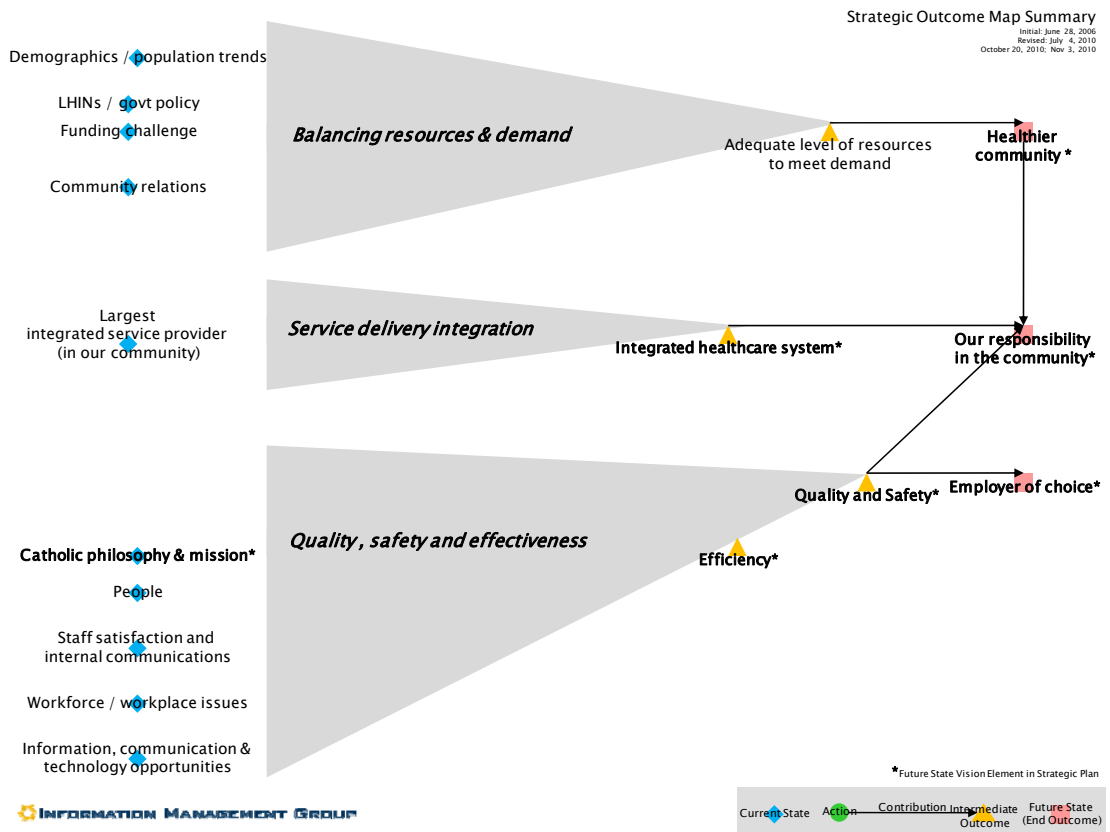
STRATEGY FOUNDATION AND THEMES

The strategy foundation identified the current state of the organization and the future state the organization seeks to move towards.

Three major strategy themes emerged as the foundation of the strategic plan to move the organization towards its desired future state:

1. Quality, safety and effectiveness;
2. Service delivery integration; and
3. Balancing resources and demand.

The strategic outcome map summary illustrates the key foundational elements of the current state (left side); the strategic themes to move the organization forward (gray arrowheads); and the intended future state outcomes (right side).



Details of the current state elements; future state elements; and the strategies within each strategic theme are provided in subsequent sections.

1.4 EXECUTION OF THE STRATEGIC PLAN

Once the draft strategic plan is amended and approved, the next phases will involve additional SJGHEL staff. These individuals will be responsible for turning the strategies into action.

This will involve:

- an orientation of key staff to the strategic plan;
- the development of individual project definitions (projects charters) and workplans;
- the development of an overall integrated workplan;
- the transformation of strategic outcomes into specific, measurable performance indicators; and
- the development of an overall strategic management process for tracking and monitoring overall progress in terms of both action and results.

2 STRATEGY FOUNDATION OVERVIEW

The current state assessment phase considers the question "**Where are we now?**" from three perspectives.

- The **context** perspective identifies external factors which may influence our decisions.
- The **change** perspective examines opportunities for positive change.
- The **core** perspective focuses on strengths and assets as the foundation to build upon.

The future state vision considers the question "**Where do we want to be?**" The **vision** perspective builds on the current state assessment phase. It considers the perspectives of various stakeholders and seeks to understand and clarify the benefits they would seek from positive change.

2.1 CONTEXT PERSPECTIVE

The context perspective examines external factors which may influence our decisions. There were several key factors identified in this perspective.

DEMOGRAPHICS / POPULATION TRENDS

The determinants of health (age, income and rurality) of our referral population places disproportionately higher demand on our services compared to similar size and type hospitals.

FUNDING CHALLENGE

Our share of government funding is diminishing and this limits the services we can provide.

MOHLTC Hospital Infrastructure Renewal Funding (HIRF) is inadequate to enable the hospital to maintain its 52 year old building. Based on information available in November 2010 the MOHLTC was considering suspending the HIRF program.

Changes announced in June 2006, whereby the MOHLTC will fund 90% of construction costs may make major renovations or replacement of the hospital possible.

In 2009 as the result of the 2008 financial crisis the MOHLTC froze all new hospital capital projects until the Provincial deficit is brought under control. No MOHLTC infrastructure funding is available to address necessary building repairs at the Oaks Centre. St. Joseph's Manor is a new building and it should not require infrastructure renewal within the next five years.

The Public Hospitals Act (PHA) requires us to provide service to everyone when life or limb would be jeopardized if we did not provide the service. Consequently the Hospital has little to no control over demand for the services it provides.

The hospital sector's share of provincial healthcare pie keeps shrinking.

LOCAL HEALTH INTEGRATION NETWORKS (LHINS) / GOVERNMENT POLICY

Hospital, Long Term Care Facility and Addictions funding is determined by the MOHLTC and the LHINS have discretion over a very small portion of funding allocated to health service providers.

A new Population Based Payment (PbP) funding model may be phased-in commencing in 2011/12. This may address the hospital operational funding inequity that SJGHEL has been dealing with for the past 10 or more years, but because it will be phased-in the inequities will continue to make it very difficult for SJGHEL to balance its budget and provide equitable access to Core Small Hospital services during the phase-in period.

WORKFORCE / WORKPLACE ISSUES

Recruitment and retention of health professionals is a challenge. The lack of spousal employment compounds the issue. The 'revolving door' is no longer an issue due to progress via HealthForce Ontario and the tuition reimbursement program. Employee and physician retirements are issues that we must continue to manage.

2.2 CHANGE PERSPECTIVE

The change perspective examines internal and external opportunities for positive change. There were several key factors identified in this perspective.

COMMUNITY RELATIONS

The formal and informal information people receive about SJGHEL can affect our relationship with the community. People need to get the right message. Establishing and maintaining good community relations is important for many reasons (from encouraging healthy behaviors in our referral population to securing donations). There is a foundation in the community that supports SJGHEL's mission.

STAFF SATISFACTION AND INTERNAL COMMUNICATIONS

Staff satisfaction and communications issues are difficult to quantify. Improved communication between groups may help to avoid or diffuse potential problems before they become issues that affect staff. Improved satisfaction contributes to a positive image of SJGHEL in the community.

INFORMATION, COMMUNICATION AND TECHNOLOGY OPPORTUNITIES

As technology is introduced it changes how all employees and healthcare providers function. Improved communication of health information amongst agencies and providers will improve patient care. Information Technology (IT) must be exploited to improve healthcare outcomes. We are now part of a semi-regional health information system.

The increased use of technology might help with the retention and recruitment of healthcare professionals. We must have the technology to improve out-comes. This is expensive and takes money away from other priorities. Some of these changes are mandatory.

2.3 CORE PERSPECTIVE

The core perspective examines internal strengths and assets as the foundation to build upon. There were several key factors identified in this perspective.

LARGEST INTEGRATED SERVICE PROVIDER IN REGION (IN OUR COMMUNITY)

SJGHEL provides a broad range of integrated services.

This includes:

- Inpatient services;
- Outpatient services;
- Rehabilitation services;
- Long-term care; and
- Chemical dependency treatment.

We are the largest integrated service provider in our geographic area. SJGHEL provides some services that are not available elsewhere in our geographic area. We have expertise in managing an integrated health system. Our integrated model is consistent with public policy. This should position us well to address future challenges.

PEOPLE

SJGHEL has exceptional people.

- Our staff is dedicated.
- We have a good leadership team.
- We have a good mix of physicians.
- Our volunteer system is excellent.

We are viewed positively by our community.

CATHOLIC PHILOSOPHY & MISSION

The Sisters of St. Joseph of Sault St. Marie founded our hospital. Our Catholic values and mission guide our decisions and work. The public have a higher expectation of a Catholic facility. We should continue to meet their expectations.

2.4 VISION PERSPECTIVE

The vision perspective describes a shared vision of where the organization wants to be. There were several key factors identified in this perspective.

VALUES AND MISSION

The care provided is founded on the Judeo-Christian tradition and a belief in the dignity of each person.

St. Joseph's General Hospital Elliot Lake strives to provide the best possible health care for all residents of Elliot Lake and the North Shore and others who seek our care.

The values documented below support our mission:

- Dignity of the person fosters an atmosphere of respect and compassion for each other and all those we serve.
- Spirituality nurtures the experience that God dwells among us by our actions, attitudes and values.
- Collaboration requires us to work together as well as with other agencies, organizations and groups committed to health care.
- Creativity commits us to proactive stances in health delivery.
- Social responsibility requires us to continually seek ways to deliver the unmet needs of the people we serve through direct services and advocacy and within our given resources.
- Sacredness of life ensures dignity and respect for life from conception to natural death.

INTEGRATED HEALTHCARE SYSTEM

SJGHLE will be an integral part of a cost-effective, integrated healthcare system. As part of the continuum of care, we will provide Core Small Hospital Services to our patients as close to home as possible.

QUALITY AND SAFETY

Our people have a passion for the work they do and the people they serve. We will provide a complement of funded health services for the citizens of our community. We are committed to delivering quality care to our patients, residents and clients in a safe working environment.

EFFICIENCY

SJGHLE will collaborate with funding agencies to secure adequate resources to enable us to meet the healthcare needs of our patients, residents and clients. We will be in tune with changes in the industry and be willing and able to adapt. We will continue to work collaboratively with other healthcare providers to provide an integrated, cost-effective healthcare system.

EMPLOYER OF CHOICE

Our people will be empowered to make us a better organization by rethinking work and creating better value. Staff will be committed to continually improving the quality of the services we provide. We will have a state-of-the-art hospital which meets the needs of our patients and is an attractive place to work.

OUR RESPONSIBILITY IN THE COMMUNITY

Our reputation will be a marketing tool to enable stakeholders to attract businesses, residents, and healthcare professionals. We will collaborate with community stakeholders to help Elliot Lake thrive.

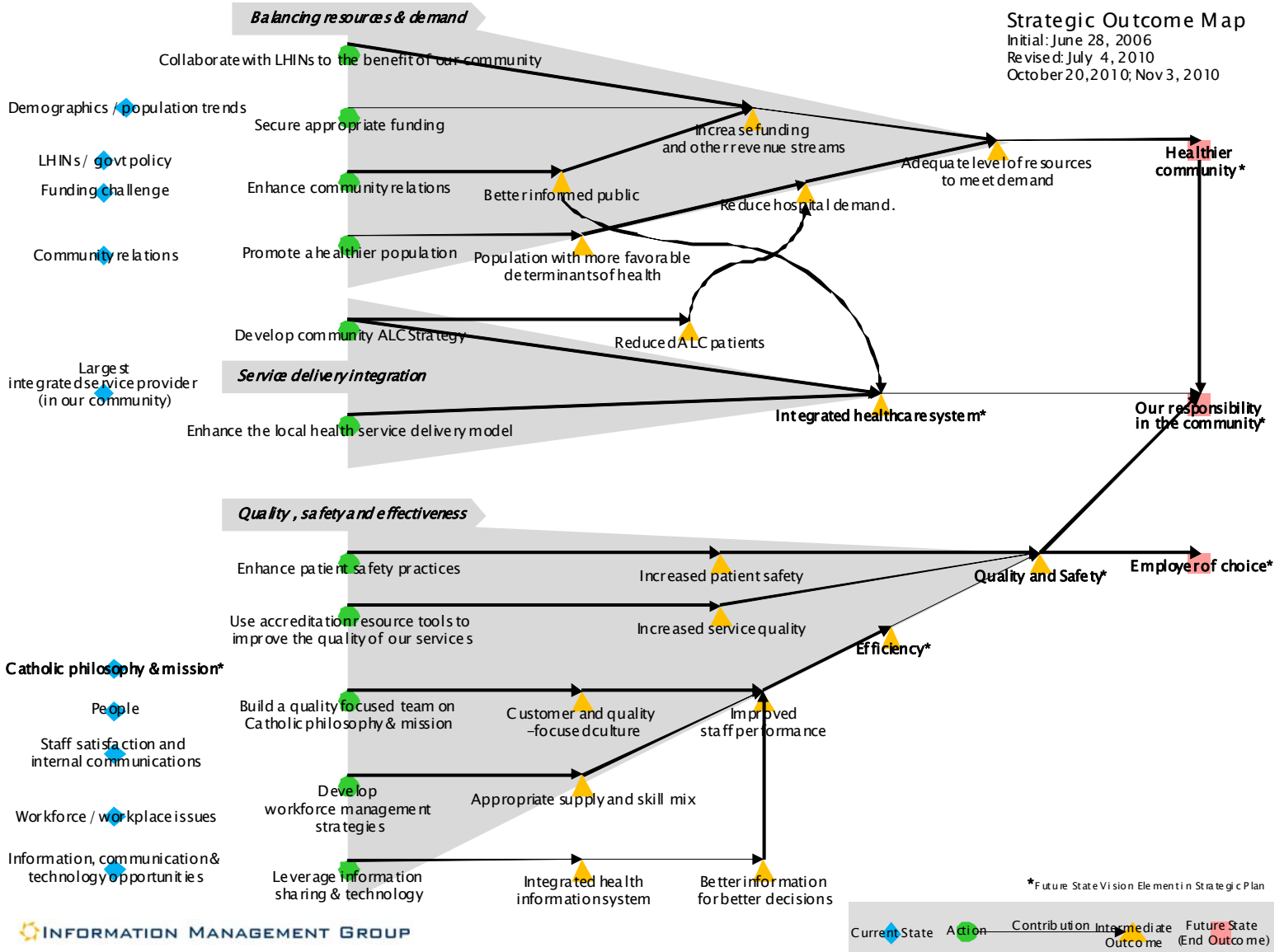
HEALTHIER COMMUNITY

The ultimate goal of our strategies is to improve the health of the people we serve by delivering the best possible service within our means.

3 STRATEGY DEVELOPMENT OVERVIEW

The strategy development phase considers the question "How will we get there?" The development of strategies builds on the current state assessment and future state vision. The intent of strategies is clarified through dialogue and debate. This is synthesized in the meaning of each strategy.

The contribution of each strategy to organizational outcomes is represented in the strategic outcome map.



Further details of each strategy are provided in subsequent sections of this document.

4 STRATEGY THEME: BALANCING RESOURCES & DEMAND

4.1 COLLABORATE WITH LHINS TO THE BENEFIT OF OUR COMMUNITY

MEANING

(What does it mean? Why is it significant?; Are there alternative perspectives?)

Our needs must be on the LHINs radar. We must secure the resources we need to meet the needs of our referral population by collaborating effectively with the NE LHIN.

ACTION

(Is there any action that we should take? ... and what outcomes would we desire?)

Acquire data to support our case for change

- e.g. operational funding per weighted cases & HIRF based on age and size of hospital.

Determine best approach to influence LHIN on key issues

- e.g. work on key committees to influence positive change.

Engage influential stakeholders to achieve the equitable distribution of healthcare resources.

- Develop community advocates for our positions
- Engage physicians to support achieving funding equity

Prioritize where we will commit our resources to best achieve equitable distribution of healthcare resources

- e.g. work on key committees to influence positive change,
- CEO to continue to advocate for hospital operational and HIRF equity.

OUTCOME

(What outcomes would we desire?)

Improve the NE LHIN's understanding of the extra ordinary demands placed on our Organization by our high needs population.

Secure the support of stakeholders in our pursuit of the resources we need to fulfil our mission.

Ensure that NE LHIN actions are aligned with the health care needs of our referral population.

4.2 SECURE APPROPRIATE FUNDING

MEANING

(What does it mean? Why is it significant?; Are there alternative perspectives?)

In order to serve our referral population we must have adequate financial resources. The accountability agreement and service agreements prescribe certain levels of services that SJGHEL is obligated to meet. Funding formulae are constantly changing. We must find ways of securing an adequate level of funding to provide services in all our programs.

ACTION

(Is there any action that we should take? ... and what outcomes would we desire?)

- Continue to participate in provincial Population Based Payment (PbP) funding formula task force
- Advocate that the LHIN and MOHLTC provide regional IT funding
- Support NEON's efforts to secure Canada Health Infoway funding for NE LHIN hospital projects
- Recover overhead costs associated with dialysis satellite unit

OUTCOME

(What outcomes would we desire?)

- Increased funding and other revenue streams
- Able to provide core small hospital services in an attractive and safe work environment
- Improved staff satisfaction
- Able to attract and retain healthcare professionals

4.3 ENHANCE COMMUNITY RELATIONS**MEANING**

(What does it mean? Why is it significant?; Are there alternative perspectives?)

People need to be clear about the role of small rural hospitals in terms of what healthcare services we do and do not provide.

Establishing good community relations is important for many reasons:

- To encourage healthy behaviors;
- To increase donations; and
- To facilitate health service realignment.

Our staff are key in delivering the right message and enhancing our community relations.

ACTION

(Is there any action that we should take? ... and what outcomes would we desire?)

Build relationships with other key stakeholders

- Hold biannual healthcare summit with key stakeholders
- Work with Family Health Team
- Participate in Sudbury/Manitoulin Hospital Hub CEO committee

Provide staff with knowledge and information to promote the hospital in the community

Provide staff with knowledge and information to access other service providers

Develop a community communications strategy.

- We must do a better job of "telling our story".
- Get the right message out to the right people.
- Monitor and measure the effectiveness of the communications strategy.

OUTCOME

(What outcomes would we desire?)

- Public understands our role

Increased fundraising opportunities
 Contribute to health services realignment
 Customer and quality focused culture

4.4 PROMOTE A HEALTHIER POPULATION

MEANING

(What does it mean? Why is it significant?; Are there alternative perspectives?)

The needs of our referral population place disproportionately higher demand on the services we provide due to their age, income levels and isolation than the demands placed on similar size and type hospitals. A community wellness focus may enable us to deal with these extra ordinary demands. Improved health education and promotion is an important component of this strategy. We will undertake to improve our health education and promotion programs and support others where it is within their mandate to do so.

ACTION

(Is there any action that we should take?)

Understand current impacts of key determinants of health
 Explore ways to build integrated patient education approaches into care delivery
 Build chronic disease management components

- Asthma care pathways
- Smoking cessation
- Diabetes outreach program
- Prescription medication mismanagement
- Develop a refined substance abuse referral initiative

Collaborate with community partners to exploit current programs and new opportunities

- Public health
- CCAC
- Family health teams

OUTCOME

(What outcomes would we desire?)

Population with more favorable determinants of health
 Better chronic disease management
 Reduce demand on finite resources
 A community that leads in the wellness of seniors

5 STRATEGY THEME: SERVICE DELIVERY INTEGRATION

5.1 DEVELOP COMMUNITY ALC STRATEGY

MEANING

(What does it mean? Why is it significant?; Are there alternative perspectives?)

ALC patients are those who are in an acute care bed but would be more appropriately placed in another setting. The NELHIN informed us that the target ALC patient days should be no more than 17% of acute patient days. Our current level is almost always above that. This consumes the limited resources at our disposal that are intended to address the acute care needs of our referral population. The long-term solutions are beyond the scope of the hospital alone; therefore, we need to work with community stakeholders to develop effective solutions.

ACTION

(Is there any action that we should take?)

Work with LHIN to develop targets more appropriate to the demographics of our referral population

Become more proactive in advocating for our community

Engage community to accept ALC as a community problem

Engage physicians to support the necessary changes

Secure ELDCAP unit for remaining 17% LTC-type ALC patients

Develop ways to change the culture around admissions versus alternatives

- Adjust thinking to new performance measures
- Help people to change behaviours

Refine approaches to optimize access to the following:

- Rehab services
- Long-term care beds
- Supportive housing
- Home care services
- Palliative care / hospice

Engage community stakeholders to develop harmonized community based strategy

- Use health care summit to kick-off community based strategy
- Continue to use East Algoma Provider Focus Group to identify ways to avoid ALC admissions and expedite their discharge to community-based programs

OUTCOME

(What outcomes would we desire?)

Patients are served in the most appropriate setting

Increased community capacity and improved access

Integrated healthcare system

Reduce ALC patient days to NE LHIN 17% Target
 Free up resources to address our Core Small Hospital Service mandate
 Lower overall cost of healthcare

5.2 ENHANCE THE LOCAL HEALTH SERVICE DELIVERY MODEL

MEANING

(What does it mean? Why is it significant?; Are there alternative perspectives?)

Demand and community expectations of SJGHEL exceed our resources. It is important to keep Core Small Hospital Services in SJGHEL to serve local people locally. This will enable us to fulfill our mandate and moral obligations while living within our means.

We need to find creative ways to divest of out-of-scope services to community providers. We will continue to collaborate with local health service providers so services are aligned with the funding and mandate of the various health service providers.

ACTION

(Is there any action that we should take? ... and what outcomes would we desire?)

Initiate CCAC in SJGH EL grand rounds

Formalize service agreements with selected health service providers

Enhance communications and issue resolution process with CCAC

Work with the family health team to reach their full potential

Utilize working groups of local health partners to review and make recommendations on improvements to local health services.

- e.g. Algoma Public Health Unit, and
- e.g. East Algoma Provider Focus Group

Participate in NELHIN Algoma Addictions and Mental Health integration initiative

- Be at the table to influence thinking
- Work with implementation committee
- Ensure our voice is heard to represent our community

Initiate community based ALC strategy

OUTCOME

(What outcomes would we desire?)

Better service to community

Meets standards of care

Hospital operates within funding

Increased healthcare services integration

Organizations provide service that they are funded and mandated to provide

6 STRATEGY THEME: QUALITY, SAFETY AND EFFECTIVENESS

6.1 ENHANCE PATIENT SAFETY PRACTICES.

MEANING

(What does it mean? Why is it significant?; Are there alternative perspectives?)

We will support and enhance patient safety by making it a priority. This will address aspects from prevention, education and monitoring.

ACTION

(Is there any action that we should take? ... and what outcomes would we desire?)

Focus on enhancing patient safety in the following MOHLTC mandated patient safety areas:

- Handwashing
- C-Difficile
- MRSA and VRE
- HSMR
- CLI
- VAP
- SSI
- Surgical checklist

Focus on enhancing patient safety in the following areas:

- Falls prevention
- Medication administration
- Patient identification
- Hand Washing

Implement bar-coding in Laboratory

OUTCOME

(What outcomes would we desire?)

- Increased patient safety (avoid harming patients)
- Reduce costs by avoiding costs associated with mistakes

6.2 USE ACCREDITATION RESOURCE TOOLS TO IMPROVE THE QUALITY OF OUR SERVICES.

MEANING

(What does it mean? Why is it significant?; Are there alternative perspectives?)

Accreditation is the process used to continually improve the quality of our services.

This incorporates the development of mechanisms to provide evidence of the changes made and the performance improvements.

We will use these positive changes to respond to the recommendations in the accreditation reports.

ACTION

(Is there any action that we should take? ... and what outcomes would we desire?)

Maintain Ontario Laboratory accreditation

Response to accreditation information requirements and address outstanding Required Operation Practices

Make changes to meet Accreditation Canada standards

Provide evidence of change

Develop a communication plan for accreditation

OUTCOME

(What outcomes would we desire?)

Improved service quality, (improved patient safety)

Lower costs by avoiding costly mistakes

Maintain positive public image of the Organization (Hospital, Manor, Oaks)

Maintain accreditations

6.3 BUILD A QUALITY FOCUSED TEAM BASED ON OUR CATHOLIC PHILOSOPHY & MISSION

MEANING

(What does it mean? Why is it significant?; Are there alternative perspectives?)

Our mission is to provide physical, emotional and spiritual care to the people we serve with particular sensitivity to the needs of the most vulnerable.

ACTION

(Is there any action that we should take? ... and what outcomes would we desire?)

- Understand the ways in which our culture needs to change
- Explore ways to align the agendas of the board, staff and physicians
- Advocate for the needs of the most vulnerable
- Enhance physician engagement
- Explore expansion of volunteer roles
- Develop mechanisms to improve internal communications
- Develop mechanisms to formally recognize exemplary performance (including real-time recognition)

OUTCOME

(What outcomes would we desire?)

- Customer and quality focused culture
- Maintain optimal staff performance
- Improved communications
- Improved stakeholder understanding
- Competent, courteous staff
- Critical thinkers who take initiative
- Enable staff to optimize their performance

6.4 DEVELOP WORKFORCE MANAGEMENT STRATEGIES

MEANING

(What does it mean? Why is it significant?; Are there alternative perspectives?)

We are approaching labor market equilibrium... but it can change quickly. New nurses are staying. We must continually work at managing this. We must monitor the changing worklife cycle. We must market ourselves as the first choice for educational experiences. There are opportunities to capitalize on our demographics and strengths.

ACTION

(Is there any action that we should take? ... and what outcomes would we desire?)

Develop worklife satisfaction strategy

- Understand issues that impact on: worklife satisfaction; recruitment; and retention
- Respond to quality of worklife pulse

Negotiate new physician recruitment process with community partners

Update nurse and allied healthcare professional recruitment and retention strategy

Maintain succession plan for management team

OUTCOME

(What outcomes would we desire?)

Optimize staff satisfaction

Improve patient, client and resident experience

Appropriate supply and skill mix of staff

Maintain optimal staff performance

Reduced employee turnover

6.5 LEVERAGE INFORMATION SHARING & TECHNOLOGY

MEANING

(What does it mean? Why is it significant?; Are there alternative perspectives?)

As technology comes on board it changes how employees and healthcare professionals function. The development of integrated health information systems are in their infancy. In the future, healthcare providers will have access to complete, real-time patient information. The existence of an integrated hospital patient information system is essential to the recruitment and retention of younger healthcare professionals.

We must exploit electronic health record opportunities to generate significant positive impacts on quality and patient safety. We need to actualize efficiencies by exploiting automation opportunities inherent in integrated health record systems. There are financial opportunities through the LHIN and NEON that need to be exploited.

ACTION

(Is there any action that we should take? ... and what outcomes would we desire?)

Refresh IT strategic plan

- Engage physicians and staff to adopt an electronic medical records philosophy
- Develop strategies to overcome the operational funding shortfall for IT

Leverage portal to improve internal communications

Influence North East hospitals to harmonize priorities and exploit LHIN funding and the NEON partnership

OUTCOME

(What outcomes would we desire?)

Integrated health information system

Better information for better decisions

Improved patient safety

Improved patient experience

Improve quality and efficiency of care