



STRATEGIC OBJECTIVES 2025 - 2029

CANCER PROGRAM

VISION, MISSION & VALUES

OUR VISION

Outstanding Care - No Exceptions

OUR MISSION STATEMENT

Provide quality patient-centred healthcare to our community.

COMPASSION

We show understanding and humility through equitable care for patients and for each other. We listen to our patients, their families and caregivers throughout their healthcare journey. In every interaction with people in our care we have an opportunity to show empathy and kindness, recognizing that each individual will have their own unique experience.

ACCOUNTABILITY

We are transparent about the care we provide to the community that we serve by fostering an environment where independence, confidentiality and dignity are demonstrated at all times to everyone. We honour our commitments by taking responsibility for our actions.

RESPECT

We treat each other with dignity and maintain trust as the cornerstone of providing equitable care. We collaborate with patients, families, caregivers, and the community to deliver inclusive care. We respect the autonomy of patients to make informed care decisions, reflective of the diversity of our community.

EXCELLENCE

We embody an inclusive culture, focused on quality and safe patient-centred care. We embrace change and innovation, with a focus on evidence-based best practice. We foster dynamic partnerships by encouraging research, learning and diverse knowledge sharing.



OUR STRATEGIC DIRECTIONS

1 STRENGTHEN THE PROCESSES THAT DRIVE A PROACTIVE AND INCLUSIVE CULTURE OF PATIENT SAFETY AND QUALITY CARE.

2 FOSTER AN INCLUSIVE CULTURE OF ACCOUNTABILITY AND TRANSPARENCY.

3 MAINTAIN A RESPONSIVE AND SUSTAINABLE CORPORATE FINANCIAL STRATEGY.

4 ENHANCE AN EQUITABLE WORKPLAE CULTURE THAT ESTABLISHES WRH AS AN EMPLOYER OF CHOICE.

5 ENHANCE COLLABORATION AND STRENGTHEN PARTNERSHIPS TO BUILD A BETTER HEALTHCARE NETWORK.

6 DESIGN AND DELIVER A NEW STATE-OF-THE-ART ACUTE CARE FACILITY WITH THE COMMUNITY FOR OUR REGION.



1 STRENGTHEN THE PROCESSES THAT DRIVE A PROACTIVE AND INCLUSIVE CULTURE OF PATIENT SAFETY AND QUALITY CARE.

- Lead in the development and integration of standardized best practices to achieve quality care and outcomes reflective of the diversity of the community.
- Lead in the development of patient safety initiatives and measures in collaboration with community partners.
- Lead in the development of strategies and practices that support timely, flexible, sustainable and equitable access to care.



2 FOSTER AN INCLUSIVE CULTURE OF ACCOUNTABILITY AND TRANSPARENCY.

- Utilize and share the results from the performance indicators to achieve excellence.
- Promote safe and inclusive care through a consistent, fair culture of accountability using the Just Culture and the Ethics Frameworks.
- Strengthen systems that clearly identify, support and measure accountability throughout the organization.



3 MAINTAIN A RESPONSIVE AND SUSTAINABLE CORPORATE FINANCIAL STRATEGY.

- Provide quality, equitable care in the most cost efficient way while maximizing revenue and funding opportunities.
- Provide ongoing education to the organization and community as to how the hospital is funded by the Ministry of Health through its funding formulas.
- Identify and implement best practices within financial realities.
- Monitor and update long-term strategy for funding capital spending needs.
- Maximize use of current facilities to provide the best possible patient care with existing resources.



4 ENHANCE AN EQUITABLE WORKPLACE CULTURE THAT ESTABLISHES WINDSOR REGIONAL HOSPITAL AS AN EMPLOYER OF CHOICE.

- Foster a respectful, safe, inclusive and collaborative work environment across the team.
- Build capacity to enhance a sustainable and diverse workforce with a focus on talent acquisition, retention and succession planning.
- Develop strategies to nurture a healthy and engaged workforce that is reflective of the community we serve.



5 ENHANCE COLLABORATION AND STRENGTHEN PARTNERSHIPS TO BUILD A BETTER HEALTHCARE NETWORK.

- Collaborate with partners locally, nationally, and across the globe, to deliver an innovative, inclusive and seamless system of care.
- Strengthen opportunities for education and evidence-based research to build an academic healthcare system that attracts and retains professionals from all disciplines.



6 DESIGN AND DELIVER A NEW STATE-OF-THE-ART ACUTE CARE FACILITY WITH THE COMMUNITY FOR OUR REGION.

- Design the facilities to meet or exceed the standard related to healthcare facility planning, engineering, accessibility, and design.
- Ensure the design incorporates leading edge and inclusive practices, technologies and equipment.
- Design the facilities to support excellence and innovation in healthcare research, health equity, and education.
- Ensure effective and meaningful participation of employees, professional staff, volunteers, patients, external partners and the community.
- Support the WRH Foundation to progress the plan in place to raise funds required for state-of-the-art equipment/technologies.



STRATEGIC OBJECTIVES CANCER PROGRAM

STRATEGIC DIRECTION	STRATEGIC INITIATIVE	OBJECTIVE	MEASURE/INDICATOR	OUTCOME TARGETS
<p>Strengthen the processes that drive a proactive and inclusive culture of patient safety and quality care.</p>	<p>Lead in the development of strategies and practices that support timely, flexible, sustainable and equitable access to care.</p>	<p>Redesign the treatment planning process to improve the efficiency and throughput of RT treatment plans. This will be achieved through workflow automation, additional staff training and the introduction of new software tools. This work will be completed within 6-12 months.</p>	<p>RTTD within 85% target. Limbus-time to contour per patient. Smartview RL6</p>	<p>Full limbus implementation. Full smartview implementation. Achieve target RTTD to treatment (85% starting within target per OH-CCO).</p>
<p>Strengthen the processes that drive a proactive and inclusive culture of patient safety and quality care.</p>	<p>Lead in the development of strategies and practices that support timely, flexible, sustainable and equitable access to care.</p>	<p>Successfully implement a 4th radiation therapy linac in the Radiation Therapy Department to enhance treatment capabilities and improve patient outcomes. This will be achieved by completing installation and testing of the linac, training staff on the operations.</p>	<p>Types of technique, volume of patients on the new linac, daily throughput.</p>	<p>Utilization of the 4th linac Implementation of further ultra-hypofractionated techniques. Increased patient volumes (throughput) on the new unit.</p>
<p>Strengthen the processes that drive a proactive and inclusive culture of patient safety and quality care.</p>	<p>Lead in the development of strategies and practices that support timely, flexible, sustainable and equitable access to care.</p>	<p>Establish multidisciplinary clinics to provide integrated, patient centered care for complex oncologic disease sites. (lung, GI, gyne, CNS). This will be achieved by successfully setting up and operationalizing the clinics.</p>	<p>RTTD to Treatment wait times (85% target per OH-CCO). Referral to consult wait times (85% target per OH-CCO). YVM survey</p>	<p>Successful implementation with all physicians and concurrent disease sites.</p>

STRATEGIC OBJECTIVES CANCER PROGRAM

STRATEGIC DIRECTION	STRATEGIC INITIATIVE	OBJECTIVE	MEASURE/INDICATOR	OUTCOME TARGETS
<p>Strengthen the processes that drive a proactive and inclusive culture of patient safety and quality care.</p>	<p>Lead in the development of strategies and practices that support timely, flexible, sustainable and equitable access to care.</p>	<p>Replace three existing radiation therapy linacs with state of the art models to enhance treatment precision and patient safety. This will be achieved by completing the installation and commissioning the new linacs, decommissioning the old units. The project will involve coordination with vendors, scheduling staff training sessions, and integrating the new linacs into the treatment workflow with minimal disruption. The entire replacement process will be completed within 36 months of project start date.</p>	<p>Types of technique, volume of patients on the new linac, daily throughput</p> <p>Clear role and scope of team members, standardized education and training for both staff and patients, Implementation of pre-assessment, improved benchmarking.</p>	<p>Utilization of the 4th linac</p> <p>Implementation of further ultra-hypofractionated techniques</p> <p>Increased patient volumes (throughput) on the new unit.</p>
<p>Foster an inclusive culture of accountability and transparency.</p>	<p>Strengthen systems that clearly identify, support and measure accountability throughout the organization.</p>	<p>Redesign the radiation clinic to enhance patient flow, improve clinic efficiency, create an improved patient experience and staff experience.</p>	<p>Clear role and scope of team members, standardized education and training for both staff and patients, Implementation of pre-assessment, improved benchmarking.</p>	<p>Decreased overtime by 10%.</p> <p>Improved patient experience.</p> <p>Improved staff experience post changes (utilizing same survey as pre).</p>
<p>Maintain a responsive and sustainable corporate financial strategy</p>	<p>Maximize use of current facilities to provide the best possible patient care with existing resources.</p>	<p>Introduce and expand usage of bispecific Tcell engagers in inpatient and outpatient settings, optimizing resources allocation to serve patients effectively.</p>	<p>Number of patients receiving Tcell engagers; average time to initiation; feedback on care coordination and resource utilization.</p>	<p>Successful integration of bispecific Tcell engagers.</p>

STRATEGIC OBJECTIVES CANCER PROGRAM

STRATEGIC DIRECTION	STRATEGIC INITIATIVE	OBJECTIVE	MEASURE/INDICATOR	OUTCOME TARGETS
<p>Enhance an equitable workplace culture that establishes WRH as an employer of choice.</p>	<p>Build capacity to enhance a sustainable and diverse workforce with a focus on talent acquisition, retention and succession planning</p>	<p>Develop and implement an end to end CMH Stem Cell Transplant (SCT) program where total care is provided close to home. This will be achieved by completing all auto transplant care here at WRH, conditioning and collection to occur in outpatient setting, reinfusion to begin on inpatient setting. Key actions include recruitment and training of team members in apheresis, procurement and implementation of apheresis equipment, establishing partnerships with external partners. Implementation to begin March 2025. FACT accreditation to be completed by FY27/28.</p>	<p>Increased HHR compliment to support the increased patient volumes.</p>	<p>Increased compliment of HHR: 6-8 additional MRTTs, 1-2 additional Medical Physicists, specialized pharmacists, 5-10 additional RNs, 1 additional Genetics Counsellor, 1 Genetics Assistant, increased hours SLP (funded).</p>
<p>Enhance collaboration and strengthen partnerships to build a better healthcare network.</p>	<p>Collaborate with partners local, nationally and across the globe to deliver an innovative, inclusive and seamless system of care.</p>	<p>Continue to expand systemic therapy and supportive care services at our ESHC Level 4 site to increase patient access to care closer to home, improved patient outcomes, reduce travel burdens for patients and optimize capacity at WRH systemic suite. This will be achieved by increasing the number of systemic therapy regimens provided at the ESHC Level 4 site.</p>	<p>Number of regimens available.</p>	<p>Patient volumes increase to 20-25 patients per month.</p>

STRATEGIC OBJECTIVES CANCER PROGRAM

STRATEGIC DIRECTION	STRATEGIC INITIATIVE	OBJECTIVE	MEASURE/INDICATOR	OUTCOME TARGETS
<p>Strengthen the processes that drive a proactive and inclusive culture of patient safety and quality care.</p>	<p>Lead in the development of strategies and practices that support timely, flexible, sustainable and equitable access to care.</p>	<p>Develop and implement an end to end CMH Stem Cell Transplant (SCT) program where total care is provided close to home. This will be achieved by completing all auto transplant care here at WRH, conditioning and collection to occur in outpatient setting, reinfusion to begin on inpatient setting. Key actions include recruitment and training of team members in apheresis, procurement and implementation of apheresis equipment, establishing partnerships with external partners. Implementation to begin March 2025. FACT accreditation to be completed by FY27/28.</p>	<p>Complete all auto SCT patients here at WRH (~30/year).</p>	<p>30 patients/year.</p>
<p>Maintain a responsive and sustainable corporate financial strategy.</p>	<p>Maximize use of current facilities to provide the best possible patient care with existing resources.</p>	<p>Optimize the infrastructure in the systemic suite to improve operational efficiencies, enhance patient care and support increasing volumes of both systemic treatments and support care needs. This will be achieved by relocating supportive care from the systemic suite to a supportive care area within the Cancer Centre, reviewing staffing models required for systemic treatments and supportive care.</p>	<p>Moving 100% of supportive care services out of the systemic suite.</p>	<p>100% of supportive care services provided outside of the systemic suite.</p>

STRATEGIC OBJECTIVES CANCER PROGRAM

STRATEGIC DIRECTION	STRATEGIC INITIATIVE	OBJECTIVE	MEASURE/INDICATOR	OUTCOME TARGET
<p>Strengthen the processes that drive a proactive and inclusive culture of patient safety and quality care.</p>	<p>Lead in the development of strategies and practices that support timely, flexible, sustainable and equitable access to care.</p>	<p>Integrate AI-assisted scheduling software into the cancer program to optimize appointment scheduling, reduce wait times, and improve overall patient experience. This will be achieved by reducing patient wait times, increase scheduling efficiency and achieve \improved patient experience scores with 12 months of implementation. Key actions include collaborating with software vendor (GrayOS) and TSSO for installation and customization, training staff on the new tools, development of new workflows, and conducting a phased rollout (beginning in systemic suite, then in radiation therapy. Full integration to be completed in 6-9 months of project start.</p>	<p>Improve chair utilization in systemic suite. Decrease RN OVT . Improve patient experience. Decrease wait times for treatment.</p>	<p>Optimized chair utilization in systemic suite. Decreased RN OVT in systemic suite. Optimized new starts across the week. Optimized daily workloads of the RN team.</p>
<p>Strengthen the processes that drive a proactive and inclusive culture of patient safety and quality care.</p>	<p>Lead in the development and integration of standardized best practices to achieve quality care and outcomes reflective of the diversity of the community.</p>	<p>Ensure the consistent use of a malnutrition tool for all cancer patients to improve nutritional care and patient outcomes, and provide timely access to care at the onset of symptoms. This will be achieved by providing training sessions for healthcare staff on the importance of nutritional assessments and the use of the malnutrition screening tool, and integrating the tool into the electronic medical record (EMR) system. The goal is to ensure that 90% of patient assessments include the use of the malnutrition screening tool within 6 months from the project implementation date.</p>	<p>Screen all patient for appropriate PSO support to initiate uptake of services earlier in the patient's cancer journey. Improve patient Quality of Life (QoL).</p>	<p>90% of patient assessed using malnutrition tool.</p>

STRATEGIC OBJECTIVES CANCER PROGRAM

STRATEGIC DIRECTION	STRATEGIC INITIATIVE	OBJECTIVE	MEASURE/INDICATOR	OUTCOME TARGETS
<p>Foster an inclusive culture of accountability and transparency.</p>	<p>Utilize and share the results from performance indicators to achieve excellence.</p>	<p>Develop and implement a transparent system for sharing key performance indicators (KPIs) with all stakeholders involved in the Cancer Program to improve accountability, performance tracking, and decision making. This will be achieved by ensuring that 100% of relevant KPIs are shared with stakeholders through monthly reports posted in common staff areas, achieving an 85% understanding rate among staff on how KPIs are used to inform decisions, and increasing stakeholder engagement by 20% in the first year of initiation. Key actions include utilizing existing data management systems, training staff on KPI reporting and interpretation, and establishing regular communication channels such as dashboards.</p>	<p>Monthly reports posted and reviewed at staff meetings, huddles.</p>	<p>100% of KPIs shared with team members.</p>
<p>Maintain a responsive and sustainable corporate financial strategy.</p>	<p>Maximize use of current facilities to provide the best possible patient care with existing resources.</p>	<p>Enhance the infrastructure within the cancer centre to better address the supportive care needs of cancer patients, including physical, emotional and psychosocial support. This will be achieved by improving patient satisfaction scores related to supportive care by 30%, reducing waiting times for supportive care services by 20% and increasing the availability of support resources by 20% within 12 months. Key action items upgrading existing facilities, integrating supportive care services into the patient care pathway, and providing training for staff. The infrastructure enhancement will be completed and fully operational within 12 months from the project start date.</p>	<p>Utilization of OH-CCO guidelines to identify program needs that are not currently offered in the Cancer Program (for example care of the caregiver). Optimize in person and virtual resources to support patient/family/caregiver during the cancer journey.</p>	<p>Number of appointments. Number of virtual appointments.</p>

STRATEGIC OBJECTIVES CANCER PROGRAM

STRATEGIC DIRECTION	STRATEGIC INITIATIVE	OBJECTIVE	MEASURE/INDICATOR	OUTCOME TARGETS
<p>Strengthen the processes that drive a proactive and inclusive culture of patient safety and quality care.</p>	<p>Lead in the development of strategies and practices that support timely, flexible, sustainable and equitable access to care.</p>	<p>Expand the patient navigation program to provide comprehensive support for an increased number of patients, ensuring personalized guidance through the cancer care continuum. This will be achieved by increasing the number of patients served by the navigation program 50%, achieving a 90% patient satisfaction rate, and reducing appointment no show rates by 20% within 12 months. Key actions include recruiting and training additional patient navigators, developing standardized navigation protocols, and integrating patient navigation services into existing healthcare workflows. The expansion will be completed and fully operational with 36 months from the project start.</p>	<p>Utilization of nurse navigator in high needs/risk disease sites.</p>	<p>Increase navigation from 2 disease sites (current-prostate and H&N) to 5 disease sites (CMH auto, CNS, and lung)</p>
<p>Enhance collaboration and strengthen partnerships to build a better healthcare network.</p>	<p>Strengthen opportunities for education and evidence-based research to build an academic healthcare system that attracts and retains professionals from all disciplines.</p>	<p>Support and implement educational opportunities to enhance the knowledge and skills of the oncology team members, ensuring the consistent application of evidence based practice. This will be achieved by achieving 75% participation in CPD activities, increasing the use of evidence based practices by 30%, and improving patient outcomes. Key actions include designing and delivering a comprehensive CPD curriculum, providing access to relevant resources and training opportunities, and establishing regular evaluation and feedback mechanisms. The CPD program will be fully implemented and the goals achieved within 36 months from the project start.</p>	<p>Inter-professional lunch and learn sessions.</p>	<p>Increased inter-professional education learning opportunities.</p>

STRATEGIC OBJECTIVES CANCER PROGRAM

STRATEGIC DIRECTION	STRATEGIC INITIATIVE	OBJECTIVE	MEASURE/INDICATOR	OUTCOME TARGET
<p>Strengthen the processes that drive a proactive and inclusive culture of patient safety and quality care.</p>	<p>Lead in the development and integration of standardized best practices to achieve quality care and outcomes reflective of the diversity of the community.</p>	<p>Implement new genetics software into the clinical genetics program to enhance data accuracy, streamline workflows, and improve patient outcomes. This will be achieved by successfully integrating the software into the program, training all relevant staff, and increasing workflow efficiency within 6 months, as demonstrated by decreasing time between referral receipt and provision of family history questionnaire (FHQ) to patient, decrease in patient wait-times for genetic counselling appointments, and increase in number of genetic counselling assessments completed. Key actions include collaborating with the software vendor for installation and customization, providing comprehensive training sessions for staff, and allocation necessary resources for the integration process. The integrations will be completed and fully operational within 9 month from the project start date (January 2025).</p>	<p>Full implementation of the software into clinical workflows and practice.</p>	<p>Implementation of genetics software.</p>
<p>Maintain a responsive and sustainable corporate financial strategy.</p>	<p>Maximize use of current facilities to provide the best possible patient care with existing resources.</p>	<p>Develop and implement an online patient education platform to provide accessible, comprehensive and reliable health information for cancer patients and their families. This will be achieved by creating a minimum of 5 educational modules, achieving a user engagement rate of 60%, and increasing patient satisfaction with educational resources by 25% within the first year of launch. Key actions include collaborating with healthcare professionals to create content, investing in a user-friendly website or app design, and ensuring technical support and maintenance. This platform will be fully developed and launched within 12 months from the project start.</p>	<p>Your Voice Matters (YVM) survey. Online analytics.</p>	<p>Number of views of the online resources. Patient experience responses. Number of new education materials available for patients.</p>

STRATEGIC OBJECTIVES CANCER PROGRAM

STRATEGIC DIRECTION	STRATEGIC INITIATIVE	OBJECTIVE	MEASURE/INDICATOR	OUTCOME TARGETS
<p>Maintain a responsive and sustainable corporate financial strategy.</p>	<p>Maximize use of current facilities to provide the best possible patient care with existing resources.</p>	<p>Develop and implement a Nurse Practitioner (NP) led proactive NG tube insertion program for head and neck cancer patients to ensure timely nutritional support and improve patient outcomes. This will be achieved by increasing the timely placement of NG tubes by 40%, reducing complications related to delayed NG tube insertions by 20% and achieving a 95% patient and staff satisfaction rate within 12 months of implementation. Key actions include providing specialized training for NPs, establishing clear protocols and guidelines, and ensuring collaboration with the oncology and surgical teams. The program will be completed and fully operational within 12 months from the project start date.</p>	<p>Decreased wait time for placement of NG tubes for H&N cancer patients. Number of proactive NG tube placements .</p>	<p>Implementation of this service.</p>
<p>Continue the pursuit of new state-of-the-art acute care facilities.</p>	<p>Ensure effective and meaningful participation of employees, professional staff, volunteers, patients, external partners and the community.</p>	<p>Develop and implement a caregiver information session (Care of the Caregiver) to provide a safe and supportive forum where caregivers can learn strategies to cope with caregiver stress, self-care, planning for the care of their loved one, ask questions, as well as receive information related to emotional support and resources. This will be achieved by establishing the caregiver group session and facilitating these sessions on a monthly basis, achieving an attendance rate of at least 10 caregivers per monthly session, and a 90% satisfaction rate among participants within the first 12 months. Key action items include collaborating with healthcare professionals to develop the curriculum, providing training for facilitators, and securing a suitable venue or virtual platform for the session. The development and implementation of the caregiver session will be completed within 9 months from the project start.</p>	<p>Utilization of OH-CCO guidelines to identify program needs that are not currently offered at the Cancer Program.</p>	<p>Number of caregivers who enrolled in the session. Number of caregivers who attend the session.</p>

STRATEGIC OBJECTIVES CANCER PROGRAM

STRATEGIC DIRECTION	STRATEGIC INITIATIVE	OBJECTIVE	MEASURE/INDICATOR	OUTCOME TARGETS
<p>Enhance collaboration and strengthen partnerships to build a better healthcare network.</p>	<p>Collaborate with partners local, nationally and across the globe to deliver an innovative, inclusive and seamless system of care.</p>	<p>Develop and implement a comprehensive pathway for cancer patients who do not have a primary care provider to ensure timely access to necessary medical care and support services. This will be achieved by ensuring that 90% of unattached cancer patients are provided with information to an accepting primary care provider or appropriate medical support within 30 days of cancer diagnosis and achieving a patient satisfaction rate of 85% within the first 12 months. Key actions include collaborating with local healthcare networks, establishing referral systems, providing training for staff, and utilizing patient navigators. The development and implementation of the pathways will be completed within 12 months from the project start date.</p>	<p>Continue collaboration with internal and external partners.</p>	<p>Standardized pathways for unattached patients.</p>