STRATEGIC OBJECTIVES

Fall 2022 Updates

Renal Program

TOG

WINDSOR REGIONAL HOSPITAL

- NO EXCEPTIONS!

The success of our organization is a direct result of our dedicated, compassionate and caring people. We strive to provide the best quality healthcare services to our patients and their families always.



WRH VISION

Outstanding Care - No Exceptions!

WRH MISSION STATEMENT

Provide quality person-centred health care services to our community.

WRH VALUES

We respectfully acknowledge that the Windsor Regional Hospital occupies the traditional, ancestral and contemporary lands of the Niswi Ishkodewan Anishinaabeg: The Three Fires Confederacy (Ojibwe, Odawa, and Potawatomi). We acknowledge the land and the surrounding waters for sustaining us and we are committed to protecting and restoring these lands and waters from environmental degradation.

WE VALUE

COMPASSION	ACCOUNTABILITY	R RESPECT	EXCELLENCE
We show understanding and humility in our care for patients and for each other. We listen to our patients, their families, and caregivers throughout their health care journey. In every interaction with people in our care we have an opportunity to show empathy and kindness.	We are transparent about the care we provide to those we serve. We honour our commitments. Taking responsibility for our actions is essential to us.	We treat others with dignity and build trust as the cornerstone of care. We collaborate with patients, families and caregivers and uphold confidentiality in all we do. We respect their autonomy to make informed care decisions. We honour diversity and inclusivity.	We embody a culture of quality and safe person-centred care. We embrace change and innovation, with a focus on evidence-based best practice. We foster dynamic partnerships by encouraging research, learning and knowledge sharing.



STRATEGIC DIRECTION #1:



Strengthen the processes that drive a culture of patient safety and quality care.

STRATEGIC DIRECTION #2:

i) Integrate standardized best practices to achieve quality care and outcomes.

ii) Lead in the development and performance of patient safety initiatives and measures.

iii) Lead in the development of strategies that support timely, sustainable, and appropriate access to care.



- i) Utilize and share the results from the performance indicators to achieve excellence.
- ii) Cultivate, sustain, and lead a "Just Culture" across the organization.
- iii) Strengthen systems that clearly identify, support, and measure accountability throughout the organization.

STRATEGIC DIRECTION #3:

Maintain a responsive and sustainable corporate financial strategy.

- i) Provide quality care in the most cost efficient way while maximizing revenue opportunities.
- ii) Provide ongoing education to the organization & community about how the hospital is funded by the Ministry of Health through its funding formulas.
- iii) Engage the organization to identify and implement best practices within financial realities.
- iv) Identify and efficiently support and sustain core services.
- v) Develop and implement a long-term strategy for funding capital spending needs.

STRATEGIC DIRECTION #4:

Create a dynamic workplace culture that establishes WRH as an employer of choice.

- i) Foster a respectful, safe, inclusive and collaborative work environment across the care team.
- ii) Build capacity to enhance a sustainable workforce with a focus on talent acquisition, retention, and succession planning.
- iii) Develop strategies to optimize attendance, support and nurture a healthy and engaged workforce.

STRATEGIC DIRECTION #5:

Redefine our collaboration with external partners to build a better healthcare ecosystem.



- i) Collaborate with local, regional, and provincial partners to deliver an innovative, seamless system of care.
- ii) Develop opportunities for education and evidence-based research to build an academic healthcare system that attracts and retains professionals from all disciplines.

STRATEGIC DIRECTION #6:

Continue the pursuit of new state –of- the-art acute care facilities.

- i) Design the facilities to meet or exceed the standards related to healthcare facility planning, engineering, and design.
- ii) Ensure the design incorporates leading edge practices, technologies and equipment.
- iii) Design the facilities to support excellence and innovation in healthcare research and education.
- iv) Ensure effective & meaningful participation of staff, professional staff, volunteers, patients, academic partners and the community.
- v) Maximize use of current facilities to provide the best possible patient care.
- vi) Work with the WRH Foundation to ensure that a plan is in place to raise the funds required for state of the art equipment/technologies.







Renal ProgramStrategic Objectives



STRATEGIC DIRECTION	STRATEGIC INITIATIVE	OBJECTIVE What are you trying to do?	MEASURE/INDICATOR DESCRIPTION	OUTCOME TARGETS FOR 2022 / 2023	STATUS	COMMENTS
Strengthen the processes that drive a culture of patient safety and quality care.	Lead in the development of strategies that support timely, sustainable, and appropriate access to care.	Develop a screening and referral pathway in collaboration with the Ontario Renal Network to provide improved access for First Nations, Inuit and Métis communities.	Increase the number of referrals of individuals identifying as First Nations, Inuit, and Métis to the Multi-Care Kidney Clinic.	Increased annualized volumes	In Progress	Currently in the planning phase with the Southwest Regional Renal Program on a collaborative approach to community engagement and screening program opportunities. Will involve SOHAC in the process as well.
Uphold the principles of accountability and transparency.	Utilize and share the results the results from the performance indicators to achieve excellence.	Develop a pathway and standard work in our Multi-care Kidney Clinic to improve early referral and timely access to renal care to improve patient outcomes	Increase the 12 months of MCKC follow up prior to initiating dialysis metric on the ORN quarterly scorecard	75%	In Progress	Review of referral patterns with individual nephrologists, awareness with physician scorecards particularly with KFRE and EGFR measurements to ensure that patients are being referred in a timely fashion.
Redefine our collaboration with external partners to build a better healthcare ecosystem.	Collaborate with local, regional, and provincial partners to deliver an innovative, seamless system of care.	Implement palliative care consults on all appropriate renal patients initiating chronic dialysis in collaboration with community and hospital palliative care teams.	Increased referrals for palliative care, improved patient satisfaction, ORN quarterly Scorecard	70%	Completed	Identify those patients that are organ transplant ineligible to ensure that they have early referral and intervention with palliative care when appropriate, in collaboration with nephrology. Will collaborate with Hospice.
Uphold the principles of accountability and transparency.	Utilize and share the results the results from the performance indicators to achieve excellence.	Improve QBP initiatives including HHD and Home Dialysis rates exceeding the provincial targets	Quarterly ORN QI Scorecard	HHD rates of 3% or greater and achieve a home rate of 30% or greater	In Progress	Currently sitting at 27% overall. The rates are in constant fluctuation due to attrition related to organ transplant and clinical decline in some patients. Ongoing identification of patients in the MCKC that have expressed interest in home modality.

Renal ProgramStrategic Objectives



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Maintain a responsive and sustainable corporate financial strategy.	Provide quality care in the most cost efficient way while maximizing revenue opportunities.	Monitor QBP funding agreement and maximize funding according to volumes shifts with best practice initiatives	Monthly Volume Reports as well as initial and mid year reconciliation	Volume and budget alignment	In Progress	Ongoing monthly evaluation of volumes in relation to the funding agreement and QBP, adjustments made based on current and trending volumes to ensure alignment.
Create a dynamic workplace culture that establishes WRH as an employer of choice.	Develop strategies to optimize attendance, support and nurture a healthy and engaged workforce.	Improve staff communication and engagement in quality initiatives to create a culture of safety and accountability	Staff survey and decrease in non-productive time	Meet current targets	In Progress	Staff survey completed; results collated. Safety Huddles in process of implementation in all unit areas; performance reviews in progress, as well as attendance management. Ongoing monitoring of non-productive time through Red/Green.
Continue the pursuit of new state-of-the-art acute care facilities.	Maximize use of current facilities to provide the best possible patient care.	Review and plan for future state of physical space for the renal program to maximize patient care to accommodate increased volumes in MCKC and Home Programs	Monthly Volume Reports as well as initial and mid year reconciliation	Ongoing	Completed	Currently in the process of moving MCKC to larger space in Jeanne Mance which will allow for increased patient volumes and expanded programming. Awaiting Ministry capitol approval for Bell Building expansion for MCKC and Home Programs.
Strengthen the processes that drive a culture of patient safety and quality care.	Integrate standardized best practices to achieve quality care and outcomes.	Achieve targets for fistula rates vs perm cath among in-centre dialysis patients.	Best practice for dialysis access is for the majority of patients to utilize a fistula for hemodialysis.	Achieve 60% fistula rate among prevalent in-centre dialysis population.	In Progress	Additional vascular surgeon clinic for outpatient program which allows for improved patient flow. Plan to evaluate role of the Body Access Nurse to allow for improved assessment and education for patients, along with vascular surgery. With improved follow up metric in the MCKC this will allow for improvement in this metric as vascular access will be more preemptive than reactive.