

STRATEGIC PLAN 2016-2020

S U R G I C A L P R O G R A M STRATEGIC OBJECTIVES

UPDATED: 2019





OUR VISION

OUTSTANDING CARE - NO EXCEPTIONS!

OUR MISSION

DELIVER AN OUTSTANDING PATIENT CARE EXPERIENCE DRIVEN BY A PASSIONATE COMMITMENT TO EXCELLENCE

C - COMPASSIONATE

 keeping the patient at the centre of all we do;

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- demonstrating compassion for patients and their families;
- supporting staff, professional staff, and volunteers so they are able to care for patients and each other; and
- operating as a team, both within WRH and with our partners, to provide exemplary care.

A – ACCOUNTABLE

- striving for accountability and transparency to those we serve and to ourselves;
- driving fiscal responsibility;
- stimulating effective two-way communication at all levels; and
- facilitating timely access to care and service.

R - RESPECTFUL

- treating those we serve and each other with empathy, sensitivity and honesty;
- upholding trust, confidentiality and teamwork;
- communicating effectively; and
- welcoming individuality, creativity and diversity.

E - EXCEPTIONAL

- promoting a culture of quality and safety;
- embracing change, innovation, and evidence-based practice;
- encouraging learning, discovery, and knowledge sharing; and
- fostering dynamic partnerships.





STRATEGIC DIRECTION 1: STRENGTHEN THE CULTURE OF PATIENT SAFETY AND QUALITY CARE

- 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.





STRATEGIC DIRECTION 2: CHAMPION ACCOUNTABILITY AND TRANSPARENCY

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

STRATEGIC DIRECTION 3: DEVELOP A SUSTAINABLE CORPORATE FINANCIAL STRATEGY

- Maximize revenue opportunities while providing quality care in the most cost efficient way.
- ii) Provide ongoing education to the organization and community about how the hospital is funded through the health based allocation model, quality based procedures, and global funding.
- iii) Engage the organization to identify and implement best practices within financial realities.
- iv) Identify, support, and sustain core services.





STRATEGIC DIRECTION 4: CREATE A VIBRANT WORKPLACE

- i) Foster a respectful and safe work environment across all disciplines.
- ii) Create a culture of pride that establishes WRH as an employer of choice.
- iii) Provide experiences and opportunities that facilitate professional development, advancement, and succession planning.
- iv) Develop strategies to optimize attendance and support an engaged workforce.





STRATEGIC DIRECTION **5**: STRATEGICALLY ENGAGE WITH EXTERNAL PARTNERS

- Collaborate with community partners to deliver an innovative, seamless system of care.
- ii) Work with Erie Shores Healthcare and regional partners to identify and act on opportunities for collaboration.
- iii) Create opportunities for education and 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

- Design the facilities to allow for best possible patient outcomes and experience.
- ii) Ensure the design incorporates leading edge technologies and equipment.
- iii) Design the facilities to support excellence and innovation in healthcare research and education.
- iv) Ensure effective and meaningful participation of staff, professional staff, volunteers, patients, academic partners and the community.
- v) Maintain and sustain current facilities until relocation to the NEW acute care facilities.







STRATEGIC OBJECTIVES

STRATEGIC DIRECTION	STRATEGIC INITIATIVE #	OBJECTIVE: WHAT ARE YOU TRYING TO DO?	
1. Strengthen the culture of patient safety and quality care.	1A. Integrate standardized best practices to achieve quality care and outcomes.	Through SOP, Standard Unit, Patient Flow and QBP working groups, integrate standardized best practices to achieve quality care and outcomes.	
1. Strengthen the culture of patient safety and quality care.	1C. Lead in the development of strategies that support timely, sustainable, and appropriate access to care.	Timely access to the most appropriate acute care bed, focused care delivery that supports achieving LOS targets, and a well planned discharge.	
1. Strengthen the culture of patient safety and quality care.	1C. Lead in the development of strategies that support timely, sustainable, and appropriate access to care.	SOP QBP Wave 3 initiatives: Shoulder Repair; Hysterectomy; Mastectomy; Prostatectomy.	
2. Champion accountability and transparency.	2C. Strengthen systems that clearly identify, support, and measure accountability throughout the organization.	1. Develop Terms of Reference for OR Executive and OR Committee . 2. Review and Revise "OR Rules" - Standardize scheduling/booking rules for scheduled and non-scheduled surgical cases at both sites. 3. Develop guidelines for new surgical procedures and technology. 4. Develop Ambulatory Scheduling Rules for both scheduled and non-scheduled cases at both sites.	
4. Create a vibrant workplace.	4D. Develop strategies to optimize attendance and support an engaged workforce.	Provide Staff with continuous feedback. Annual staff performance reviews. Attendance Management Program.	
5. Strategically engage with external partners.	5A. Collaborate with community partners to deliver an innovative, seamless system of care.	Develop & Implement : 1. LHIN Bundle Care Hip and Knee, 2. LHIN MSK hip & Knee pain, RAC (rapid assessment centre), 3. LHIN MSK lower back pain RAC, and 4. OWN - WSIB.	

SURGICAL PROGRAM - UPDATED: 2019

MEASURE/INDICATOR DESCRIPTION	OUTCOME TARGETS FOR 2017/2018	STATUS 2017/2018	OUTCOME TARGETS 2019 / 2020
Refer to SOP key metrics.	Refer to SOP key metrics.	In progress	Layer additional Standard Unit Work as it is reviewed & revised.
Improved patient experience. Improved efficiency with bed allocation, discharge planning, LOS, cost/case, readmissions & reporting.	Refer to SOP key metrics.	In progress	Plan to complete Surgical Flow Project by 2020.
Roadmaps reviewed weekly and will escalate to surgical leads and their departmental outliers to standardized work and processes.	Refer to SOP key metrics.	In progress	Complete SOP QBP wave 3 and initiate wave 4.
Plan, implementation, measure compliance. Reinforce escalation plan.	Development of Terms of Reference OR Rules & Guidelines.	In progress	To be completed by 2020.
100% of staff performance appraisals completed. Monthly attendance tracking and follow up action plans.	100% completion of staff performance appraisals. 100% of monthly attendance tracking and associated follow up.	In progress	In progress.
Refer to project Metrics.	100% implementation.	In progress	Full implementation 2019/20.



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