

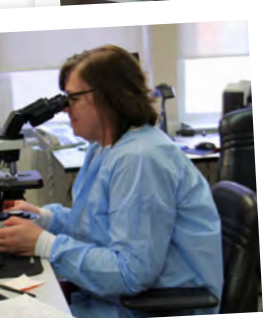
STRATEGIC PLAN 2016-2020

OPERATIONAL PLAN -
WOMEN'S & CHILDREN'S PROGRAM
STRATEGIC OBJECTIVES
UPDATED: 2019





“ 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. ”



OUR VISION

OUTSTANDING CARE – NO EXCEPTIONS!

OUR MISSION

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

OUR VALUES

C – COMPASSIONATE

- keeping the patient at the centre of all we do;
- 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.

COMPASSION is our
PASSION



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

- 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.



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

- i) 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



- i) 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

- i) 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.



COMPASSION is our
PASSION



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.	1B. Lead in the development and performance of patient safety initiatives and measures.	Through MOREob/MOREex complete the 2019/2020 goals.
1. Strengthen the culture of patient safety and quality care.	1A. Integrate standardized best practices to achieve quality care and outcomes.	Create increased capacity in OB triage (OBT) utilizing existing resources by reassessing current guidelines.
1. Strengthen the culture of patient safety and quality care.	1B. Lead in the development and performance of patient safety initiatives and measures.	Pregnancy and Infant Loss (PAIL) workshop.
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.	Create increased capacity in the Paediatric Program utilizing existing resources, timely access to care close to home (Allergy clinic, Cystic Fibrosis clinic, Cardiac clinic, Nephrology clinic, Pediatric Oncology Group of Ontario (POGO)).
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 initiative Hysterectomy.
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.	Develop with Critical Care Services Ontario (CCSO) an Ontario strategy for NICU/Paediatrics surge capacity and NICU working group.
2. Champion accountability and transparency.	2A. Utilize the results from the performance indicators to achieve excellence.	Ongoing NICU participation in EPIC (Evidence Based Practice for Improving Quality).
2. Champion accountability and transparency.	2A. Utilize the results from the performance indicators to achieve excellence.	Ongoing FBC/NICU participation in BORN (Better Outcomes Registry Network).
3. Develop a sustainable corporate financial strategy.	3A. Maximize revenue opportunities while providing quality care in the most cost efficient way.	Develop guidelines to review requests for new procedures and technology.
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.	Strengthen Partnership with LHIN, Erie Shores Healthcare, Public Health and Provincial Council for Maternal and Child Health.

OPERATIONAL PLAN - WOMEN'S & CHILDREN'S 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 and revised.
Refer to MOREob/MOREex key metrics.	80% attendance. Refer to MOREob/ Moreex key metrics.	In progress	100% attendance at MOREob workshops. Refer to MOREob/ Moreex key metrics.
Increase (OBT) volumes by pulling pregnant patients once medically cleared from ED.	100% of pregnant patients seen in OBT for pregnancy related issues.	In progress	In progress.
Staff attendance at workshop.	10-15 staff members to attend workshop to be champions for the entire program.	In progress	PAIL course October 16/2018.
Improved pt. experience. Improved efficiency with bed allocation, discharge planning, LOS, cost/ case, readmissions & reporting.	Refer to SOP key metrics.	In progress	Plan to complete the Surgical Flow Project by 2020.
Decreasing the number of Paediatric patients leaving the community for care. Decrease in paediatric clinic wait times. Increasing volumes in clinic visits from previous fiscal year.	Consistently see increase in volumes monitored monthly.	In progress	In progress.
Road maps reviewed weekly, develop action plan and escalate as needed.	Refer to SOP key metrics.	In progress	In progress.
Complete and implement the CCSO surge protocols for NICU and Paediatrics.	Refer to CCSO key metrics.	In progress	In progress.
Follow best practices for neonates requiring long term nasal CPAP.	Refer to EPIC key metrics.	In progress	In progress.
Refer to BORN indicators.	Refer to BORN key metrics.	In progress	In progress.
No new procedures or technologies processed without team approval.	All procedures/ technology approved prior to implementation.	In progress	In progress.
100% of staff performance appraisals completed annually. 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.
Participation by hospital/physician leaders.	Increased WRH involvement in decisions impacting Women and Children within the LHIN and community.	In progress	November 1, 2018 meeting with Southwest Maternal and Child Network.



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