

Partnering for Excellence in Rural Health Care

Strategic Plan Quality Goals & Objectives 2022-23

STRATEGIC DIRECTION #1 DELIVER SAFE AND EFFECTIVE PATIENT CARE RESPONSIVE TO THE NEEDS OF OUR REGION	Providing excellent care to patients is at the core of everything we do. We must stay apprised of the changing needs in our community and ensure our services are adaptable to meet patients' current and future needs.		
For HDH, delivering safe and effective patient care means:			
WE WILL...	ANNUAL PRIORITIES 2022/2023	METRICS	LEADERSHIP
1. We will deliver high quality care	<ul style="list-style-type: none"> • ***BIGDOT*** Ensure that patients have timely access to inpatient beds within 1.5 hours of decision to admit 	85% patients will be admitted to inpatient bed within 1.5 target	VP of Patient Care Services and Chief Nursing Executive
	<ul style="list-style-type: none"> • ***BIGDOT*** QIP Initiative: Ensure patients receive enough information about if they were worried about their condition/treatment after leaving the hospital 	95-100% of respondents who responded "Yes" to the following question: Did you receive enough information from hospital staff about what to do if you were worried about your condition or treatment after you left the hospital?	VP of Patient Care Services and Chief Nursing Executive
2. We will provide a safe physical environment for our patients and staff.	<ul style="list-style-type: none"> • ***SCORECARD*** COVID-19 Response: Complete 5-10 PPE Audits per month with respect to ensuring that donning and doffing PPE practices are in place • 	% of successful audits (95% goal)	Senior Leadership Team
	<ul style="list-style-type: none"> • ***SCORECARD*** COVID-19 Response: Provide education on PPE annually to all staff 	Completed by 95% of staff (part-time and full-time) by the end of the fiscal year. (does not include those that are on maternity or	Senior Leadership Team

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		parental leave)	
	<ul style="list-style-type: none"> ***SCORECARD*** COVID-19 Response: Monthly Hand Hygiene Audits 	95 to 100% compliance on Hand Hygiene before and after patient contact	Senior Leadership Team
	<ul style="list-style-type: none"> ***BIGDOT*** Complete Medication Reconciliation upon internal transfer to Surgical Services 	100% completion of medication reconciliation upon internal transfer to Surgical Services	VP of Patient Care Services/CNO
	<ul style="list-style-type: none"> ***SCORECARD*** Report/Track number of falls that occur causing significant harm. 	# of falls reported causing significant harm.	VP of Patient Care Services/CNO
	<ul style="list-style-type: none"> ***SCORECARD*** QIP Initiative: Continue to encourage reporting of workplace violence incidents 	Report on the number of workplace violence incidents annually	Senior Leadership Team
	<ul style="list-style-type: none"> Ensure timely follow-up, resolution and communication of incident reports (i.e. RL6s) Continue to promote a “Just Culture of No Blame” to encourage open learning and a safe patient environment. 	<p>95% of all RL6s resolved and communicated on within thirty (30) days of submission (less needle stick/WSIB)</p> <p>Increase reporting of incidents</p> <p>Maintain/increase cumulative % positive score on PATIENT SAFETY CULTURE SURVEY –</p>	Senior Leadership Team

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		November 2022	
		Maintain/increase % positive theme score on SAFETY & HEALTH on the Work-Life Pulse Survey – November 2022	
3. We will use technology and updated equipment proactively.	<ul style="list-style-type: none"> Maximise integrated technology opportunities (blood pressure monitors, infusion pumps potentially) 	Report back on status of integration projects as led by GBIN	Senior Leadership Team
	<ul style="list-style-type: none"> Gain approval from Ministry to include tomography option for mammography 	Status updates on approval process	VP of Operations and Chief Financial Officer
	<ul style="list-style-type: none"> Continue to look for opportunities to apply for enhanced technology that will support patient care 	Report back on opportunities pursued	Senior Leadership Team
	<ul style="list-style-type: none"> Batch scanning project – paperless dialysis 	Status updates on the progress of the project	VP of Patient Care and Chief Nursing Officer
	<ul style="list-style-type: none"> Reintroduction of Registration kiosks as COVID precautions allow 	Report on project timelines and implementations	VP of Operations and Chief Financial Officer
4. We will work with others to help our patients navigate the health care system.	<ul style="list-style-type: none"> Continue to work with partners to become a designated Grey-Bruce Ontario Health Team 	Status update on OHT development	Senior Leadership Team
	<ul style="list-style-type: none"> Continue to be an active partner with hospitals and other health sectors to be responsive to emerging needs 	Report back on specific initiatives	Senior Leadership Team
STRATEGIC DIRECTION #2 STRENGTHEN PARTNERSHIPS AND COMMUNITY ENGAGEMENT	For HDH to be successful, it is critical that we are open to working together and collaborating with other health care providers as well as our patients. We must work to eliminate silos, which currently exist in the Grey Bruce area and improve coordination and communication.		

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For HDH, strengthening partnerships and community engagement means:			
WE WILL...	ANNUAL PRIORITIES 2022/2023	METRICS	LEADERSHIP
1. We will treat patients as partners and involve them in hospital planning.	<ul style="list-style-type: none"> Improving the patient experience by completing one annual quality improvement (QI) initiative as identified by patient satisfaction surveys 	Report back on QI as completed	Vice President of Patient Care Services and Chief Nursing Officer
	<ul style="list-style-type: none"> ***BIGDOT*** Develop a multi-year priority planning for the health equity committee 	Plan developed by the end of the second fiscal quarter	Senior Leadership Team
2. We will communicate and promote the health care services available to patients and residents.	<ul style="list-style-type: none"> Communication and Social Media Plan will be reviewed annually and updated to promote health care services and the hospitals as a place to work 	Report back	Senior Leadership Team
	<ul style="list-style-type: none"> QIP Initiative: Alternative level of care (ALC) days expressed as a percentage of all inpatient days in the same period 	Quarterly report back on the % of inpatient days where a physician has indicated that a patient occupying an acute care hospital bed has finished the acute care phase of their treatment	Vice President of Patient Care Services and Chief Nursing Officer
3. We will pursue and maintain partnerships with other health care providers to enhance patient care.	<ul style="list-style-type: none"> ***BIGDOT*** QIP Initiative: Increase the amount of discharge summaries sent from hospital to community care provider 	95% of Discharge summaries will be sent to community health care providers within 2 business days of discharge	Chief of Medical Staff

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	<ul style="list-style-type: none"> LTC/Hospital Partnership quarterly meetings to improve transitions of care and communication 	Report back as appropriate	VP of Patient Care Services and Chief Nursing Executive
	<ul style="list-style-type: none"> Explore opportunities to enhance or expand outpatient clinics to provide care as close to home as possible 	Report back on opportunities explored and expanded clinics	VP of Patient Care Services and Chief Nursing Executive
4. We will engage with our community to improve health outcomes, and be responsive to emerging needs.	<ul style="list-style-type: none"> Utilize opportunities to create a visible HDH presence in the broader community regarding programs, services and future opportunities. 	Qualitative report back	Senior Leadership Team
	<ul style="list-style-type: none"> Participate in community initiatives 	Report back on initiatives as appropriate	Senior Leadership Team
STRATEGIC DIRECTION #3 ENSURE THE FINANCIAL SUSTAINABILITY OF THE HOSPITAL HDH prides itself on our track record of solid financial status and we will work to continue this recognition moving forward. For HDH, ensuring the financial sustainability of the hospital means:			
WE WILL...	ANNUAL PRIORITIES 2022/2023	METRICS	LEADERSHIP
1. We will advance our strategic priorities in a financially responsible way.	<ul style="list-style-type: none"> Endeavour to align with HSAA financial indicators ***BIGDOT*** Achieve a balanced budget for the fiscal year. 	Reported surplus/deficit based on gross margin.	VP of Operations and Chief Financial Officer
2. We will explore revenue opportunities, funding and operational efficiencies.	<ul style="list-style-type: none"> Advocate for continued support for COVID-19 expenses 	Report back on funding received and efforts	VP of Operations and Chief Financial Officer
	<ul style="list-style-type: none"> Advocate for funding due to operational financial pressures in conjunction with Ontario Hospital Association, SRN, regional partners 	Report back on funding received and efforts	VP of Operations and Chief Financial Officer
3. We will invest in equipment and infrastructure.	<ul style="list-style-type: none"> Apply for Exceptional Circumstance (ECP) grants through Health Infrastructure Renewal Fund (HIRF) to leverage funding for larger infrastructure projects 	Report back on ECP applications, HIRF infrastructure projects, funding opportunities as they present.	VP of Operations and Chief Financial Officer

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	<ul style="list-style-type: none"> ***BIGDOT*** Prepare 5-year infrastructure and equipment renewal plan to guide capital budgeting process 	Create a 5-year Infrastructure and equipment renewal plan	VP of Operations and Chief Financial Officer
	<ul style="list-style-type: none"> Apply for one time operating funding opportunities 	Report back on opportunities.	VP of Operations and Chief Financial Officer
4. We will pursue partnerships to make the best use of resources.	<ul style="list-style-type: none"> Identify operational partnership opportunities to make the best use of resources. 	Report back on opportunities.	VP of Operations and Chief Financial Officer
STRATEGIC DIRECTION #4 SUPPORT OUR CURRENT AND FUTURE HEALTH CARE TEAM	<p>Our staff and physicians are critical to care delivery. We are committed to investing in our staff and physicians to ensure they have the required support, training and resources to deliver the best care possible.</p> <p>For HDH, supporting current and future health care teams means:</p>		
WE WILL...	ANNUAL PRIORITIES 2022/2023	METRICS	LEADERSHIP
1. We will support training and ongoing education.	<ul style="list-style-type: none"> Continue utilizing a clinical education plan and monthly calendar 	Report on actions quarterly.	VP of Patient Care Services and Chief Nursing Executive
	<ul style="list-style-type: none"> ***BIGDOT*** Implement mandatory cybersecurity training across the organization 	Completed by 95% of staff (part-time and full-time) by the end of the fiscal year. (does not include those that are on maternity or parental leave)	VP of Operations and Chief Financial Officer
	<ul style="list-style-type: none"> Explore the development of alternative learning modalities/delivery models for learning and development (virtual) 	Report back on the development and activity of this initiative	Senior Leadership

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	<ul style="list-style-type: none"> Continue to identify opportunities for internal trainers Collaborate with community partners in developing shared learning opportunities 	Report back on the progress of this initiative as completed	Senior Leadership Team
<p>2. We will recruit and retain staff, physicians and volunteers to meet the current and future needs of our patients.</p>	<ul style="list-style-type: none"> ***BIGDOT*** Redevelopment of clinical volunteer program 	<p>Launch by the end of the first quarter.</p> <p>Quarterly reports on volunteer involvement</p>	Senior Leadership Team
	<ul style="list-style-type: none"> Build upon the feedback from focus groups to enhance initiatives within departments and across organization to enhance retention 	Complete by end of second quarter	Senior Leadership Team
	<ul style="list-style-type: none"> ***SCORECARD*** Maintain/Improve staff and physician overall satisfaction scores on the Work-Life Pulse Survey. 	<p>Maintain rating of 85-90% for the question, “Overall how would you rate your organization as a place to work?” for “Excellent”, “Very Good” & “Good”.</p> <p>Maintain rating of 85-90% for the question, “How would you rate this organization as a place to practice medicine?”</p>	Senior Leadership Team
	<ul style="list-style-type: none"> Enhance our recruitment materials and social media to better promote our roles, our hospital, and our community 	Complete by the end of first quarter	Senior Leadership Team
	<ul style="list-style-type: none"> ***BIGDOT*** Creation of a Recruitment and Retention Committee 	Development of committee, terms of	Senior Leadership Team

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		reference and work plan by the end of second quarter.	
3. We will recognize and appreciate our staff, physicians and volunteers.	<ul style="list-style-type: none"> • Develop a staff wellness plan • Develop a robust recognition program. 	Plan completed by end of the second quarter Complete by the end of the fiscal year	Senior Leadership Team Senior Leadership Team