

## Partnering for Excellence in Rural Health Care

### Strategic Plan Quality Goals & Objectives 2023-24

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 2023/2024	METRICS	LEADERSHIP
1. We will deliver high quality care	<ul style="list-style-type: none"> <li><b>***BIGDOT***</b> QIP Initiative: 90<sup>th</sup> percentile Emergency Department (ED) wait time to inpatient bed</li> </ul>	We are targeting to improve our current performance; ideally less than 6 hours.	VP of Patient Care Services/CNE
	<ul style="list-style-type: none"> <li><b>***BIGDOT***</b> QIP Initiative: Ensure patients receive enough information about if they were worried about their condition/treatment after leaving the hospital</li> </ul>	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/CNE
2. We will provide a safe physical environment for our patients and staff.	<ul style="list-style-type: none"> <li><b>***SCORECARD***</b> Monthly Hand Hygiene Audits</li> </ul>	95 to 100% compliance on Hand Hygiene before and after patient contact	Senior Leadership Team
	<ul style="list-style-type: none"> <li><b>***SCORECARD***</b> QIP Initiative: Medication Reconciliation at discharge</li> </ul>	100% completion of medication reconciliation upon discharge	VP of Patient Care Services/CNE
	<ul style="list-style-type: none"> <li><b>***BIGDOT***</b> QIP Initiative: Medication Reconciliation completion upon internal transfer to Surgical Services</li> </ul>	100% completion of medication reconciliation upon internal transfer to Surgical Services	VP of Patient Care Services/CNE
	<ul style="list-style-type: none"> <li><b>***SCORECARD***</b> Report/Track number of falls that occur causing significant harm.</li> </ul>	# of falls reported causing significant harm.	VP of Patient Care Services/CNE
	<ul style="list-style-type: none"> <li><b>***BIGDOT***</b> QIP Initiative: Continue to encourage reporting of workplace violence incidents</li> </ul>	Report on the number of workplace violence incidents reported by hospital	Senior Leadership Team

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		workers	
	<ul style="list-style-type: none"> <li><b>***SCORECARD***</b> Ensure timely follow-up, resolution and communication of incident reports (i.e. RL6s)</li> </ul>	95% of all RL6s resolved and communicated on within thirty (30) days of submission (less needle stick/WSIB)	Senior Leadership Team
	<ul style="list-style-type: none"> <li>Continue to promote a “Just Culture of No Blame” to encourage open learning and a safe patient environment.</li> </ul>	Increase reporting of incidents	Senior Leadership Team
	<ul style="list-style-type: none"> <li>Perform Infection Control Departmental Assessments providing education based on findings.</li> </ul>	Complete minimum of 1 Infection Control Departmental Assessment per month	VP of Patient Care Services/CNE
	<ul style="list-style-type: none"> <li>Implement new <i>Never Events</i> reporting criteria.</li> </ul>	Report baseline findings.	VP of Finance & Operations
<b>3. We will use technology and updated equipment proactively.</b>	<ul style="list-style-type: none"> <li>Continue to work with GBIN partners to enhance the electronic patient record.</li> </ul>	Report back on specific initiatives	Senior Leadership Team
	<ul style="list-style-type: none"> <li>Utilize technology and equipment to improve processes of health care professionals.</li> </ul>	Report back on specific initiatives	Senior Leadership Team
	<ul style="list-style-type: none"> <li>Utilize technology and equipment to improve the patient experience.</li> </ul>	Report back on specific initiatives	Senior Leadership Team
<b>4. We will work with others to help our patients navigate the health care system.</b>	<ul style="list-style-type: none"> <li>Continue to participate in advancing the designated Grey-Bruce Ontario Health Team cQIP by supporting efforts as appropriate. (cQIP attached)</li> </ul>	Report back on specific initiatives	Senior Leadership Team
	<ul style="list-style-type: none"> <li>Continue to work with community resources to help patients receive the right care in the right place.</li> </ul>	Report back on specific initiatives	Senior Leadership Team
	<ul style="list-style-type: none"> <li>Explore/Research modalities to enhance patient communication when translation is needed.</li> </ul>	Report back on specific initiatives	Senior Leadership Team
<b>STRATEGIC DIRECTION #2 STRENGTHEN PARTNERSHIPS AND</b>	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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COMMUNITY ENGAGEMENT			
For HDH, strengthening partnerships and community engagement means:			
WE WILL...	ANNUAL PRIORITIES 2023/2024	METRICS	LEADERSHIP
1. We will treat patients as partners and involve them in hospital planning.	<ul style="list-style-type: none"> <li><b>***BIGDOT***</b> Integrate Patient &amp; Family Advisors into new hospital initiatives regarding hospital planning.</li> </ul>	Report back on involvement/interaction	VP of Patient Care Services/CNE
2. We will communicate and promote the health care services available to patients and residents.	<ul style="list-style-type: none"> <li>Improve and review hospital website to include all available health care services.</li> </ul>	Qualitative report back	President & CEO
	<ul style="list-style-type: none"> <li>Review and enhance the profile of HDH health care services within the community.</li> </ul>	Qualitative report back	Senior Leadership Team
3. We will pursue and maintain partnerships with other health care providers to enhance patient care.	<ul style="list-style-type: none"> <li>Explore expansion of services provided to outpatients.</li> </ul>	Qualitative report back	Senior Leadership Team
	<ul style="list-style-type: none"> <li>Explore opportunities to expand outpatient Surgical Services program</li> </ul>	Qualitative report back	VP of Patient Care Services/CNE
	<ul style="list-style-type: none"> <li>Collaborate with the Hanover Family Health Team on training/education to improve the Medical Assistance in Dying process.</li> </ul>	Report back on specific initiatives	VP of Patient Care Services/CNE
4. We will engage with our community to improve health outcomes, and be responsive to emerging needs.	<ul style="list-style-type: none"> <li>Utilize opportunities to create a visible HDH presence in the broader community regarding programs, services and future opportunities.</li> </ul>	Qualitative report back	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 2023/2024	METRICS	LEADERSHIP

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1. We will advance our strategic priorities in a financially responsible way.	<ul style="list-style-type: none"> <li>• Endeavour to align with HSAA financial indicators</li> </ul>	Report back on progress of this initiative as completed	VP of Operations and Chief Financial Officer
	<ul style="list-style-type: none"> <li>• <b>***BIGDOT***</b> Align financial performance with planned operational budget</li> </ul>	Reported actual budget compared to planned budget.	VP of Operations and Chief Financial Officer
2. We will explore revenue opportunities, funding and operational efficiencies.	<ul style="list-style-type: none"> <li>• Review purchasing to ensure full advantage of group purchasing opportunities.</li> </ul>	Report back on progress of this initiative as completed	VP of Operations and Chief Financial Officer
3. We will invest in equipment and infrastructure.	<ul style="list-style-type: none"> <li>• Apply for Exceptional Circumstance (ECP) grants through Health Infrastructure Renewal Fund (HIRF) to leverage funding for larger infrastructure projects</li> </ul>	Report back on ECP applications, HIRF infrastructure projects, funding opportunities as they present.	VP of Operations and Chief Financial Officer
	<ul style="list-style-type: none"> <li>• Apply for one time operating funding opportunities</li> </ul>	Report back on opportunities.	VP of Operations and Chief Financial Officer
	<ul style="list-style-type: none"> <li>• Optimize accessibility and storage to improve provider and patient experience.</li> </ul>	Report back on specific initiatives	Senior Leadership Team
	<ul style="list-style-type: none"> <li>• Continue to work with Ministry partners and community stakeholders for the future vision of the ED.</li> </ul>	Report back on progress of this initiative as completed	Senior Leadership Team
4. We will pursue partnerships to make the best use of resources.	<ul style="list-style-type: none"> <li>• Identify operational partnership opportunities to maximize use of limited resources.</li> </ul>	Report back on opportunities.	Senior Leadership Team
<b>STRATEGIC DIRECTION #4 SUPPORT OUR CURRENT AND FUTURE HEALTH CARE TEAM</b>	<p><b>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.</b></p> <p>For HDH, supporting current and future health care teams means:</p>		
<b>WE WILL...</b>	<b>ANNUAL PRIORITIES 2023/2024</b>	<b>METRICS</b>	<b>LEADERSHIP</b>
1. We will support training and ongoing education.	<ul style="list-style-type: none"> <li>• Continue utilizing a clinical education plan and monthly calendar</li> </ul>	Report on actions quarterly.	VP of Patient Care Services/CNE

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	<ul style="list-style-type: none"> <li><b>***BIGDOT*** QIP Initiative:</b> 80-100% of full-time and part-time staff to complete relevant equity, diversity, inclusion, and antiracism education.</li> </ul>	% Full-Time and Part-Time Staff Completion of Rainbow Health Ontario 2SLGBTQ Foundations Course	Senior Leadership Team
	<ul style="list-style-type: none"> <li><b>***SCORECARD***</b> Monitor the number of reported phish emails by staff utilizing the report phish function</li> </ul>	Number of reporting phish emails utilizing the report phish function	VP of Operations and Chief Financial Officer
	<ul style="list-style-type: none"> <li>Continue to identify and expand opportunities for internal trainers and shared learning opportunities with community partners.</li> </ul>	Report back on the progress of this initiative as completed	Senior Leadership Team
	<ul style="list-style-type: none"> <li>Completion of mandatory Cybersecurity Training by all staff.</li> </ul>	Report back on progress of this initiative as completed	VP of Operations and Chief Financial Officer
	<ul style="list-style-type: none"> <li>Develop comprehensive learning plan that prepares staff for urgent Code situations that arise.</li> </ul>	Report back on progress of this initiative as completed	VP of Patient Care Services/CNE
<b>2. We will recruit and retain staff, physicians and volunteers to meet the current and future needs of our patients.</b>	<ul style="list-style-type: none"> <li>Operationalize the new succession plan previously developed.</li> </ul>	Report back on progress of this initiative as completed	Senior Leadership Team
	<ul style="list-style-type: none"> <li>Review and Refresh Human Resources Plan to meet current needs.</li> </ul>	Completion by second quarter, report back on progress of this initiative as completed.	Manager of Human Resources
	<ul style="list-style-type: none"> <li><b>***BIGDOT***</b> Maintain/Improve staff and physician overall satisfaction scores on the Workforce Survey on Wellbeing, Quality and Safety (previously known as the Workplace Pulse Survey).</li> </ul>	<p>Achieve rating of 80% or greater for the question, “Overall how would you rate your organization as a place to work?” for “Excellent”, “Very Good” &amp; “Good”.</p> <p>Maintain rating of 80% or greater for the question, “How would you rate this organization as a place to practice medicine?”</p>	Senior Leadership Team

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<b>3. We will promote a positive work culture and strive for work life balance.</b>	<ul style="list-style-type: none"> <li>Continue to support and prioritize the annual wellness and mental health plan as a tool to improve work culture.</li> </ul>	Report back on progress of this initiative as completed	Senior Leadership Team
<b>4. We will recognize and appreciate our staff, physicians and volunteers.</b>	<ul style="list-style-type: none"> <li>Launch/Promote new recognition program for staff.</li> </ul>	Complete by the end of the fourth quarter	Manager of Human Resources
	<ul style="list-style-type: none"> <li>Investigate developing volunteer recognition.</li> </ul>	Report back on progress of this initiative as completed	Manager of Human Resources