



Strategic Planning Cycle: Public Consultation Sessions

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March 2, 2010



Agenda

- Welcome (Board member)
 - PRHC today:
 - About PRHC
 - update on HIP progress
 - PRHC's strategic planning process
 - Progress so far
 - Main options and questions
 - How we will use feedback from the public
 - Voting on your issues and ideas
 - Next steps and adjournment
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About PRHC



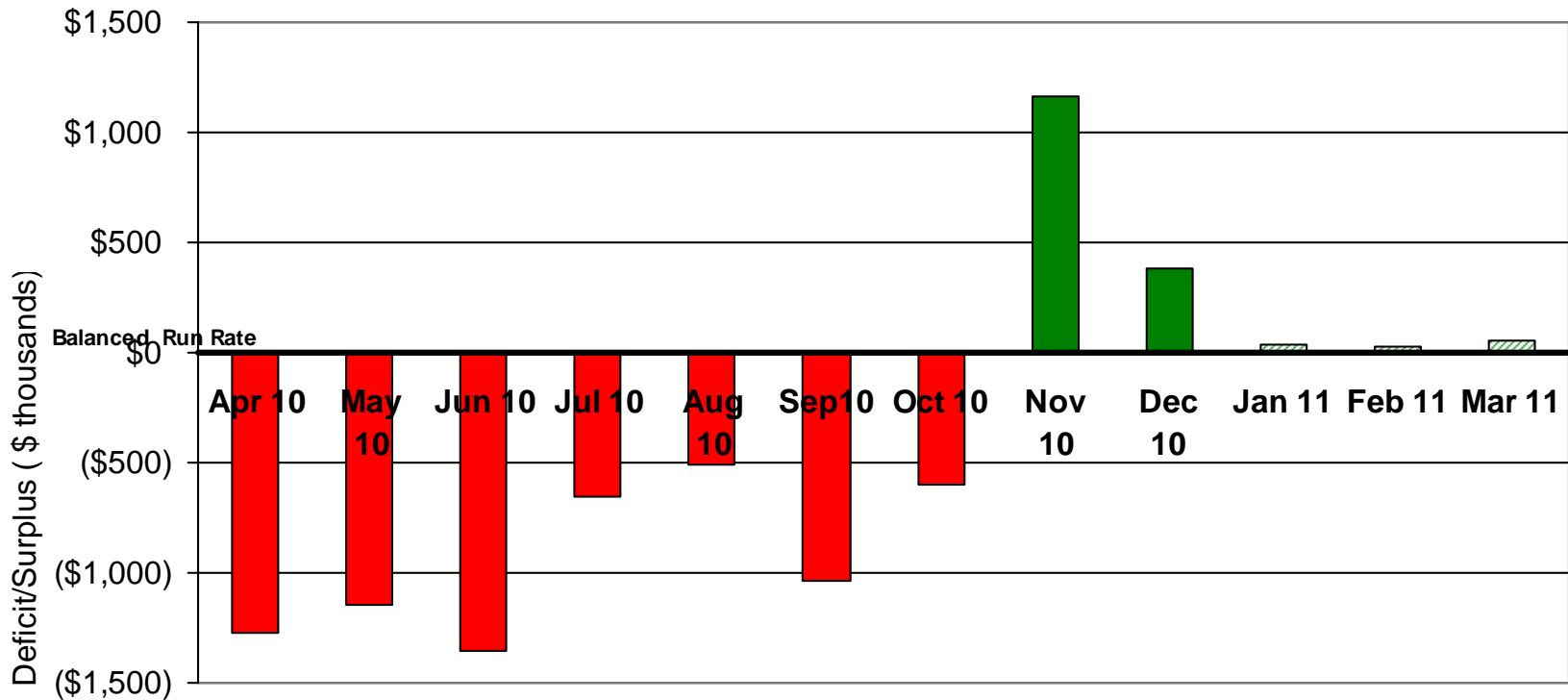
- PRHC is a regional centre and serves more than 300,000 people across four counties.
- Our hospital is the region's largest employer with 2,200 staff, approximately 350 physicians with privileges, and 600 volunteers.
- The hospital offers specialized services including cancer care, dialysis, cath lab, and interventional radiology – as part of one of the province's most technologically advanced Diagnostic Imaging departments.
- The Dembroski Emergency Department is among the busier in the province with approx. 73,000 visits last year.

PRHC's Fiscal Recovery Update

- We were pleased to report that our Hospital Improvement Plan (HIP) is nearing completion, with \$23M of \$27M in changes already implemented
- Response indicated LHIN is pleased with progress at PRHC

Sustain the recovery

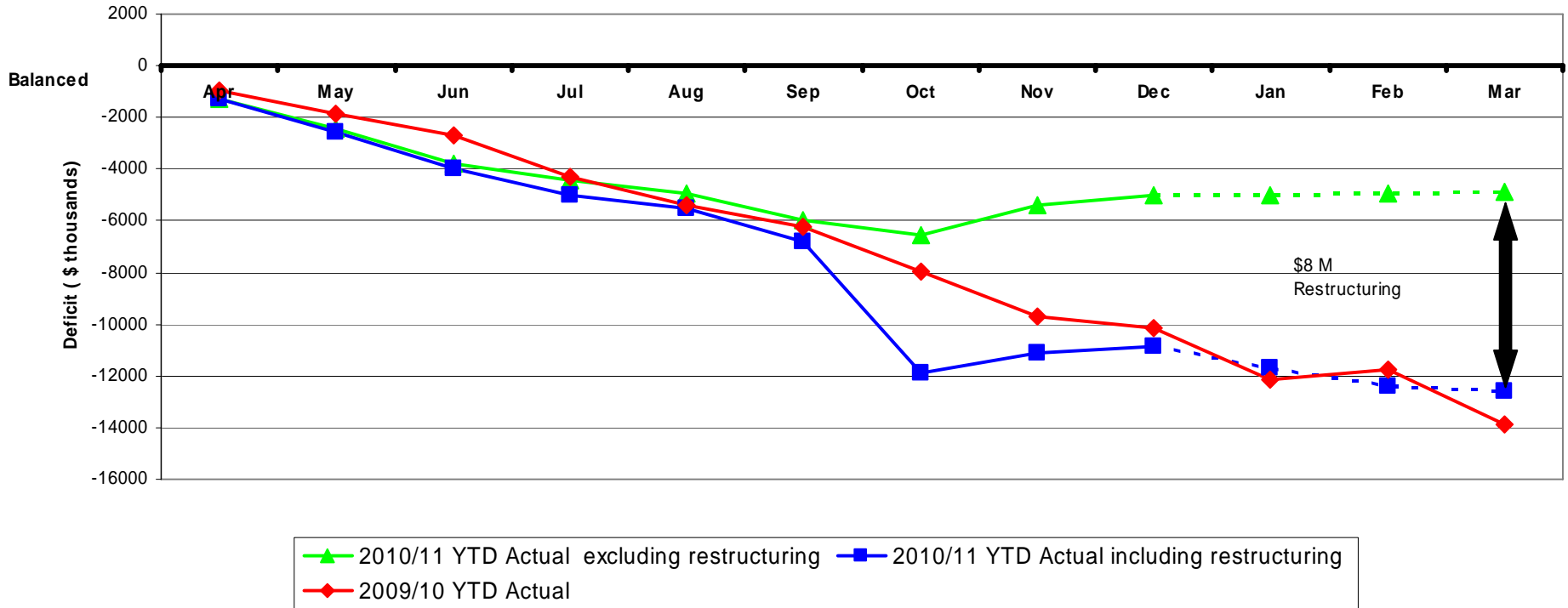
Monthly (Deficit)/Surplus
2010/2011
(Excludes Restructuring)



Source: Internal Monthly Financial

Sustain the recovery

Year To Date Cumulative Deficit
20010/2011



Source: Internal Monthly Financial

Hospital Improvement Plan (HIP) update

- In its April 14, 2010 report, the Peer Review made 60 recommendations for improvements to the hospital
- 57 of those recommendations are now completed or in progress as part of the HIP
- 3 of those recommendations remain to be implemented:
 - Reconfirm Level 2 intensive care nursery needs and funding
 - Paediatric on-call move to HOCC funding
 - Mental health shared model of care (Psychiatry and Family Physicians and PRHC staff)

HR Update

- 219 layoff notices issued since July 2010
- Early retirements, voluntary exits, transfers to vacancies, natural attrition, re-assignments and layoff acceptances have reduced the number of layoffs to 57
- 38 layoff notices still in progress
- Fewer than 20 staff members will leave involuntarily. These people will be placed on a recall list for future opportunities at PRHC

HR Update

- Overtime costs have been reduced 62% from last year, for a total reduction of \$2M by March 2011
- Absenteeism costs have been reduced by \$538,453
- Benefits savings of \$1.2M
- Forecast for 2010/2011 is a \$4.9 deficit, as compared to the \$27M projected prior to the HIP

Quality Improvement Plan (QIP)

- PRHC is working on a new Quality Improvement Plan (QIP) as mandated by the Excellent Care for All Act
- Corporate strategy addresses three quality themes in this framework: Patient Flow & Access / Patient Safety / Patient Satisfaction
- Achieving the first two will ensure the third
- The Board Quality of Care Committee's annual workplan focuses on one of these quality themes every month
- Each month, two or three different departments/programs present strategies and performance indicators for quality with respect to that month's theme

ED Quality of Care

- Improvements in ED Initial Physician Assessment times, with December results reported at 3.2 hours, exceeding the provincial target time of 4.1 hours
- Offload time from ambulance into hospital care has also improved, with recent results of 17-19 minutes exceeding the 30-minute target
- Admitting times are improving but require further work to achieve target levels
- After receiving this report at the Jan. 26 Board Meeting, Board members applauded and asked that staff be congratulated for their efforts

GAIN (Geriatric Assessment and Intervention Network)

- GAIN is now underway, in partnership with the CE LHIN, Lakeridge Health and other participating regional hospitals (Scarborough and Rouge Hill)
- Programs supported by inter-disciplinary teams at each site
- PRHC will establish a geriatric medical unit to enable direct access to inpatient capacity for frail seniors
- Impact on ER/ALC wait times:
 - alternative to avoidable ED visits
 - shortens ED visits that do happen
 - prevents avoidable admissions

Strategic Planning



Strategic planning cycle, why now?

Why Organizations Plan*	PRHC Planning Drivers
<ul style="list-style-type: none"> • Identify/address challenges or issues • Identify/exploit emerging opportunities • Address priorities amidst rapid environmental and system change 	<ul style="list-style-type: none"> • Maintain post-HIP momentum for change, accountability & performance • Ensure PRHC is positioning itself as other hospitals in the CE LHIN plan • Develop consensus on growth areas
<ul style="list-style-type: none"> • Engage community and stakeholders in shaping the future of the organization • Develop understanding/educate stakeholders and public on direction • Engage & reinvigorate staff to share in strategy development 	<ul style="list-style-type: none"> • Build on community engagement begun through HIP process • Team building and alignment process for new board & senior team members, and programmatic model.
<ul style="list-style-type: none"> • Setting priorities and allocating resources • Establish mechanisms to monitor and report on progress • Align with other organizations, sector 	<ul style="list-style-type: none"> • Provide detailed direction to, and articulation of, the earlier iteration of the plan given the context of PRHC today, (post-HIP, post IHSP, new programmatic structure). • Allocate resources to priorities prior to next round of budget negotiations

* Adapted from *Strategic Planning for Associations and Not-for-profit Organization*, Knowles & Hayward, CSAE, 2010.

Our Values



PRHC's Mission

**Caring for our patients
with expert hands
and creative minds.**

PRHC's Vision

**The place to be
for care and career.**



Strategic Directions 09 - 12



Our Strategic Plan 2009 - 2012

HIGH QUALITY PATIENT CARE

- **Safe**
Providing safe and effective care, based on evidence, to improve patient outcomes and satisfaction.
- **Seamless**
Coordinating services in our hospital and beyond to ensure patients access timely, appropriate care.
- **Seniors-Friendly**
Strengthening partnerships, expertise, and focus to improve care for our many patients who are seniors.



A GREAT PLACE TO WORK

- **Healthy**
Creating a safe workplace together, reducing waste, and valuing wellness, to ensure a safe, positive environment.
- **Connected**
Collaborating and communicating openly and proactively to improve decision making and job satisfaction.
- **Inspired**
Investing in training and education to enhance careers, develop skills, and support mentors and preceptors.

A STRONG REGIONAL CENTRE

- **Growing**
Pursuing our growth plan to deliver vital regional services and programming and the new facility's full potential.
- **Efficient**
Controlling costs and improving processes together to ensure public trust, credibility and future support.
- **Accountable**
Measuring performance, engaging the public, and reporting results to demonstrate progress on financial, quality, and safety targets.

www.prhc.on.ca

What is the scope of this planning cycle?

Given the cycle of rapid change underway, and the relatively recent high-level planning that was completed in 2009, we suggest the following scope:

Goal:

To broadly engage PRHC's stakeholders in a transparent planning cycle that clearly defines the hospital's priorities given its existing strategic directions, values, mission and vision.

Objective:

That by summer 2011, PRHC, along with its internal and external stakeholders, will have defined the Hospital's priorities in a plan that positions PRHC for service growth based on the needs of our community, our partner's priorities, and the patients in our catchment area.

Out of scope:

Three Strategic Directions (revisit in 2012)

Vision, Mission & Values (revisit in 2012)

Defining Roles and Responsibilities

Responsible: Board of Directors	Accountable: Senior Management	Consulted: Internal & external stakeholders in the continuum of care	Informed / Engaged: general public
<ul style="list-style-type: none"> • Determine planning process (Planning cmte) • Develop the plan • Approve the plan • Est. success indicators • Monitor progress • Ensure corrective action when needed 	<ul style="list-style-type: none"> • Support planning process • Propose strategies • Develop the plan • Action the plan • Report on progress • Propose corrective action when needed 	<p>Internal</p> <ul style="list-style-type: none"> • Develop the plan • Propose strategies • Execute the plan <p>External</p> <ul style="list-style-type: none"> • Provide input into plan development • Provide feedback on progress 	<ul style="list-style-type: none"> • Be informed of planning timelines and process • Provide input to plan development • Have access to final plan • Have access to results and hold PRHC accountable

Principles for Planning Process

Transparency

- We will make planning documents, data sets and proceedings available to stakeholders

Engagement

- We will encourage active participation by stakeholders.
- We will share data sets and other source documents accessible
- We will share issues, challenges and solutions

Courage (to have difficult conversations & to make decisions)

- We know there are no simple solutions
- We know we cannot be all things to all people
- We know that internal and external limits and constraints exist
- We will not shy away from ambitious and stretch objectives
- We will strive to create the organization we need to become

Principles for Planning Process

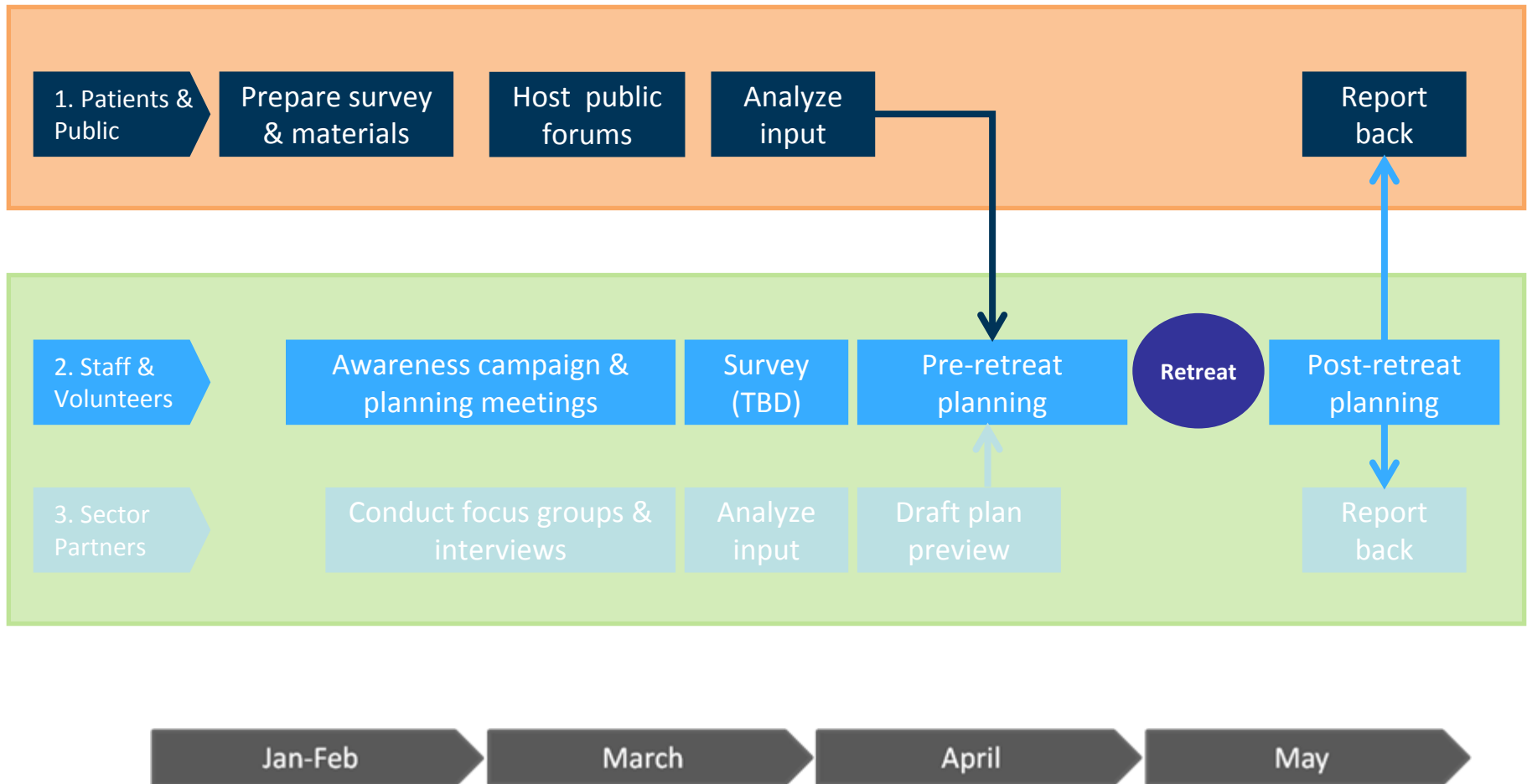
- **Accountability and responsibility**
 - We will address the issues and activities for which we are both responsible and accountable
 - We will plan for mandates, capacities and capabilities within available and obtainable resources
- **Patient-focused, patient-centred**
 - We will place the needs of patients and their families first
 - Where we cannot offer or sustain programming, we will establish linkages and partnerships to community or regional providers
- **Highest-quality and safety in our services**
 - We will incorporate all published standards and their compliance within our planning framework
 - We will not offer programs where volumes needed for quality and sustainability are not achievable within our region
 - We will improve the performance, safety or quality needs of current programs before we add new ones

Principles for Planning Process

- Promote integration
 - We will incorporate the principles, practices and directions of system (provider) integration in our plans
 - We will incorporate service / provider integration as a means to achieve our strategic plan and planning
 - We will incorporate integration priorities established by the Central East LHIN and Province of Ontario
- Principles for program planning
 - We will create and be faithful to those elements needed for excellence in program planning
 - We will ensure that access, quality, safety, regional role, outcomes, satisfaction, sustainability and performance drive program excellence

Stakeholder Consultation Process & Timelines

The three streams of stakeholder consultations will take place beginning in February through to April in preparation for the strategic planning retreat in May



1. Attend a session
2. Fill in an online survey – www.prhc.on.ca
3. Watch the online video
4. Attend a feedback session with CEO (April)
5. Review and comment on draft plan (late may, early June)

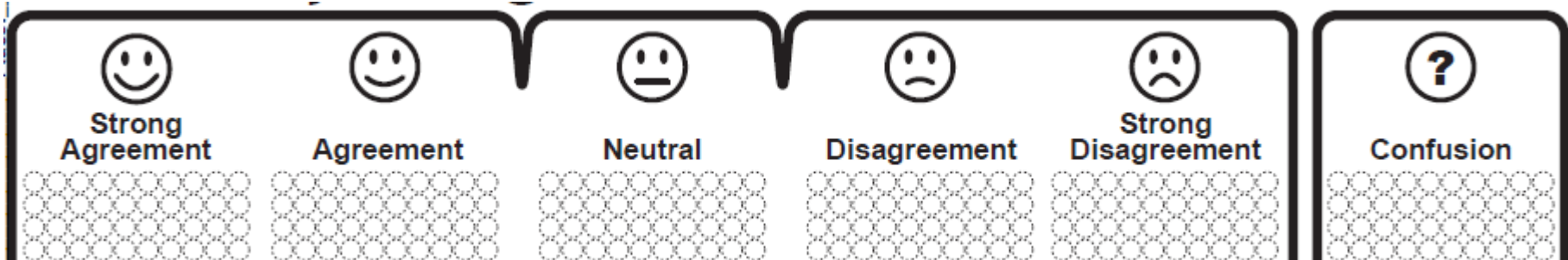
Quality outcomes: does what we measure matter to our patients and families?	5:00 p.m. PRHC Room A4105
Improving the Patient Experience at PRHC: what are the best opportunities for change?	5:00 p.m. PRHC Room C3307

Access to care at PRHC: how do we prepare to meet the needs of tomorrow?	7:45 p.m. PRHC Room A4105
Providing better care for seniors in hospital: what are the next steps?	7:45 p.m. PRHC Room C3307

Voting on your issues & ideas

- Write your issues and ideas on the sheets, one for each sheet.
- Make each issue clear and understandable.
- Post all of the issues on the wall.
- Then everyone votes on each issue, like this:

Do you agree?



Principles for Planning Process



Questions?

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