

### **Patients**



People



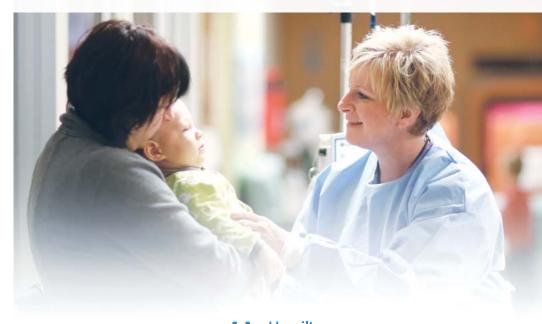


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### **Hamilton Health Sciences**

### STRATEGIC PLAN

**PLAN AT A GLANCE 2016-2017** 







Rob MacIsaac
President and CEO
Hamilton Health Sciences

"Our strategic plan helps us focus on what is most important for us to achieve together."

# Hamilton Health Sciences STRATEGIC PLAN

**PLAN AT A GLANCE 2016-2017** 

We're working in a rapidly changing healthcare environment. In order to navigate that change and achieve our vision of **Best Care for All**, Hamilton Health Sciences needs a clear and focused strategic plan.

We developed this strategic plan to be our North Star. It will help guide our decisions about how we invest our time and resources, and it is based on input from our staff, physicians and community partners.

Our strategic plan focuses on four goals:



**Patients** 



**People** 



Sustainability



Research, Innovation & Learning

These four goals are compass points of our plan. Each goal has three drivers to direct our attention and energy. There are also a series of initiatives outlining the work we will do to meet our drivers this year.

This strategic plan will help us move forward with confidence, together.



### **Patients**

### Our goal is to provide an excellent patient and family experience every time.

#### **Drivers**

- Always deliver compassionate care that respects the needs and values of our patients and their families
- Continuously refine our care delivery to raise quality, improve safety and enhance value
- Ensure seamless and timely transitions in a welcoming environment for HHS patients

Patients				
Nouth Char Matrice	Baseline		Targets	
North Star Metrics	(FY15/16)	1 Year (16-17)	3 Year (18-19)	
Patient and family experience QIP	QIP Calendar Year 2015	80.3%	82.50%	85%
Emergency wait time for admitted patients QIP	QIP Calendar Year	27.5 hours	26.5 hours	Top half of Peer Group
Medication Reconciliation Upon Admission QIP	Baseline Target of 19 units	70%	80% Target of 19 units	80% Target of ALL inpatient units

Key Indicators of Success (16/17)	Baseline (FYTD15/16)	Targets (FY16/17)
Patient rating for service excellence	91.6%	93.0%
CHF Readmission QIP	18.1%	17.2%
COPD Readmission QIP	17.3%	16.4%

- Ongoing Patient & Family Experience Initiative
- Population Health:
  - Integrated Funding Model (IFM)/ Integrated Care Coordination (ICC) Initiative
  - HealthLinks
- Med Reconciliation roll out
- · Ongoing patient flow initiatives



### **People**

### Our goal is to engage, empower and enable our people to deliver on our mission.

#### Drivers

- Ensure a healthy and safe workplace
- Develop and support our people
- Cultivate empowered decision making and collaboration

People			A
North Star Metrics  Baseline (FYI5/16)	Baseline	Targets	
	1 Year (16-17)	3 Year (18-19)	
Staff & Physician Engagement	2014 survey results Staff 69% Physician 56%	Not Available in 16-17	5% improvement on 2014 Staff 72.4% Physician 58.8%
# CQI active units	2	8	40
Lost Time Injuries - Drive to Zero QIP	1.49	1.34	1.08

Key Indicators of Success (16/17)	Baseline (FY15/16)	Targets (FY16/17)	
Sick Time	4.4%	4.0%	
Injury Measure Rate: All Reported Claims to WSIB (work related injury/illness)	7.04	6.69 5% improvement	
Staff & Physician Engagement Pulse Surveys	2014 survey results  Staff 69%  Physician 56%	2% improvement on baseline Staff 70.4% Physician 57.1%	

- · Continue roll out of CQIMS
- Ongoing improvements with staff based on Engagement survey responses
- Physician Hospital Partnership Committee
- · Centre for People Development
- Sick Time Reduction Strategy (Pilot & PDSA)
- Implement Kronos (ATLAS) and HRIS



### Our goal is to meet the healthcare needs of the communities we serve now and in the future.

### **Drivers**

- Partner with our community to ensure the right care is being delivered in the right place at the right time
- Transform our practices and processes to improve performance
- Optimize our revenue streams

Sustainability			
No who Show Madwice Baseline	Targets		
North Star Metrics	(FY15/16)	1 Year (16-17)	3 Year (18-19)
Acute Cost per Weighted Case	\$6,055 (Based on internal estimate, MOH final numbers expected in Fall.)	\$5,995	Top quartile Peer Group
ALC Rate QIP	12.6% QIP Calendar Year 2015	12.0%	10.79% Directional target for 17/18
Acute Length of Stay (Acute Census LOS)	6.6 days	6.6 days	Maintain at or below Expected LOS

Key Indicators of Success (16/17)	Baseline (FY15/16)	Targets (FY16/17)
Contribution to Capital	\$12.9	\$20.0
Working Capital (Current Ratio Fund 1)	0.44	0.48
Hospital Operations Results	\$35.8M	\$30.0M
Operational Revenue (Non MOH and CCO Revenue)	\$147.7M	\$144.6M

- Complete OHF and submit to MOH
- Master Planning
- Population Health:
- Population Segmentation
- ALC Initiatives
- Continue to pursue community and strategic partners
- Partner with BAHT in Business Development Office
- Create Project Management Office
- Review HHS brand / market position
- Supply Chain Transformation



### Our goal is to lead in research, innovation and learning for the benefit of our community and the world.

#### Drivers

- Align research efforts to address HHS priorities
- · Foster a culture of evidence informed care
- Create excellent learning environments with our academic partners

Research, Innovation & Lear	ning			
Nouth Stay Matrice	Baseline		Targets	
North Star Metrics	(FY15/16)	1 Year (16-17)	3 Year (18-19)	
Student Learner Satisfaction	Baseline due in June 2016	TBD	TBD	
Research Grants	\$169 M 2011/12	\$169 M	\$169 M	
EMRAM Stage 6 Journey	3.48	3.48	TBD	

Key Indicators of Success (16/17)	Baseline (FY15/16)	Targets (FY16/17)	
New HIREB Approvals	909 Calendar 2015	954	
Publications in selected journals	42	44	
Adherence to evidence-based QBPs – Pneumonia	69.7%	75%	

- IT/HIS Strategic Plan to achieve stage 6
- Launch the Centre for Implementation Science and a regional Hamilton Health Study
- Target key practices in select QBPs to establish baseline performance and increase adherence.
   Begin spreading to other QBPs
- Action Plan to improve student learner satisfaction/ experience in collaboration with McMaster University and Mohawk College

## Hamilton Health Sciences North Star Metrics

### **Patients**

Patient and family experience

Emergency wait time for admitted patients

Medication Reconciliation Upon Admission

### **Sustainability**

Acute Cost per Weighted Case

**ALC Rate** 

Acute Length of Stay (Acute Census LOS)



### **People**

Staff & Physician Engagement

# CQI active units

Lost Time Injuries
- Drive to Zero

## Research, Innovation & Learning

Student learner satisfaction

Research Grants

EMRAM Stage 6 Journey

FY16/17