



# YEAR 1 PROGRESS REPORT:

## STRATEGIC PLAN 2015 - 2020

*February 2016*

## STRATEGIC PLAN YEAR 1 – Progress at a Glance

Five-Year Strategic Priorities (2015-2020)		Year 1 Deliverables (2015)	Outcomes <sup>1</sup>
<b>MORE ATTUNED</b>	<ul style="list-style-type: none"> <li>Engage clients and family caregivers - effectively, meaningfully and appropriately - in all we do to improve the care experience.</li> <li>Specialize in care for children with complex medical needs, people with cognitive impairment and palliative care - growing and sharing our expertise.</li> <li>Keep relentless focus on continuous quality improvement for everything we do in client safety, care delivery and evidenced-based practice.</li> <li>Further develop self-management approaches and integrated service models that create more independence for those living with chronic diseases.</li> </ul>	<ul style="list-style-type: none"> <li>Increase the client and family voice in key committees and quality improvement activities</li> </ul>	✓
		<ul style="list-style-type: none"> <li>Explore and identify areas of focus/opportunity for our three specialities; prepare an implementation roadmap for 2015 – 2020 and carry out any 2015 activities</li> </ul>	✓
		<ul style="list-style-type: none"> <li>Achieve Best Practice Spotlight Organization (BPSO®) designation and execute all requirements to maintain the designation</li> </ul>	✓
		<ul style="list-style-type: none"> <li>Improve overall client experience scores in each service aggregated org-wide (very good and excellent )</li> </ul>	➤
		<ul style="list-style-type: none"> <li>Investigate and document innovative self-management approaches for people with chronic diseases; identify a population to focus our initial efforts on and commence a pilot program</li> </ul>	➤
<b>MORE CONNECTED</b>	<ul style="list-style-type: none"> <li>Participate in new models of collaborative and integrated care that improve client experiences and outcomes.</li> <li>Make linkages with academic, business and/or health care partners to build new knowledge and innovative services/products that help people remain safely at home.</li> <li>Build our nursing capacity with a focus of expansion in the GTA.</li> <li>Expand our charitable services through new revenue streams and partnerships.</li> </ul>	<ul style="list-style-type: none"> <li>Review existing and identify new partnerships (service/academic/business) to confirm/create formal alliances that address our strategic priorities</li> </ul>	✓
		<ul style="list-style-type: none"> <li>Research viable options and tactics for growing nursing volumes &amp; revenues</li> </ul>	✓
		<ul style="list-style-type: none"> <li>Increase impact of extreme cleaning services and support for those with hoarding challenges (# of people served)</li> </ul>	✓
		<ul style="list-style-type: none"> <li>Increase charitable revenues from external sources</li> </ul>	✓
		<ul style="list-style-type: none"> <li>Identify gaps in service and strategies to expand needed services to family caregivers in our two specialty areas through joint initiatives (internally and externally)</li> </ul>	✓
<b>MORE INSPIRED SOLUTIONS</b>	<ul style="list-style-type: none"> <li>Engage and inspire staff to drive best practices, service and process improvements to create better care and a better workplace.</li> <li>Boost staff competencies to meet increasingly complex client needs and our populations of focus.</li> <li>Leverage technology to increase productivity, enhance communication and foster service delivery innovation.</li> <li>Improve the collection and use of quality indicator data,</li> </ul>	<ul style="list-style-type: none"> <li>Increase staff participation In VHA Spark! and the number of quality improvement ideas accepted and implemented</li> </ul>	✓
		<ul style="list-style-type: none"> <li>Complete implementation of new Finance and HRIS system</li> </ul>	➤
		<ul style="list-style-type: none"> <li>Explore alternatives to GoldCare and once a suitable replacement is found, develop project plan and begin implementation</li> </ul>	✓
		<ul style="list-style-type: none"> <li>Lay the groundwork for electronic health record (EHR) solutions:                             <ul style="list-style-type: none"> <li>Implement an EHR in nursing clinic and start the roll out for community nursing (to be completed in 2016)</li> </ul> </li> </ul>	✓

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- ✓ Indicates the deliverables in Year 1 are **complete**
- Indicates the deliverables in year 1 are **in progress**

## STRATEGIC PLAN YEAR 1 – Progress at a Glance

	including client outcome data, for better decision-making and evidence-based clinical practice.	<ul style="list-style-type: none"> <li>○ Continue reviewing and testing options for an EHR in rehab (OTs and PTs) with a goal of mandatory adoption in 2016</li> </ul>	
		<ul style="list-style-type: none"> <li>• Evaluate new Personal Support service delivery model and spread/re-design as indicated</li> </ul>	➤
		<ul style="list-style-type: none"> <li>• Research and design a training plan to boost staff competencies working with our specialty populations</li> </ul>	✓

## MORE ATTUNED

Five-Year Strategic Priorities (2015-2020)	Year 1 Deliverables (2015)	Outcomes
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### HIGHLIGHTS OF RESULTS ACHIEVED

✓ **Amplifying the Voices of Our Clients and Families**

By year end we had over 45 clients/family members registered to volunteer their time and expertise to ensure their input is central to the care experience at VHA. In addition to their leadership work on our Client, Carer Advisory Council, clients and caregivers participated in many committees and workgroups this past year to advise on policies and programs, share their stories and help us co-design quality improvement initiatives.

✓ **Building Our Specialties**

2015 was a year devoted to laying the groundwork to guide our work over the next few years to become leaders in home care services for children with medical complexities, individuals with cognitive impairment and palliative care. Workgroups were formed to determine initial areas of focus. Their work entailed literature searches, internal data analysis, identification of potential partners, consultation with clients/families, and an external scan of technology enablers etc. We are excited about the first projects selected for implementation in the coming year – a playdate for kids and a music, memory program for clients with various dementias and implementing an integrated palliative care program.

✓ **Designated a Best Practice Spotlight Organization**

We are very proud that VHA met all the requirements of the Best Practice Spotlight Organization (BPSO) program and received our designation in 2015. As part of this award, five Best Practice Guidelines (BPG) were implemented across the organization over a 3 year period – i.e., Person

and Family Centred Care, Pressure Ulcer Management, Falls Prevention, Pain Management and End-of-Life Care. Two new BPGs – Screening for Delirium, Dementia and Depression (DD) and Caregiving Strategies for DDD – were selected this year and work has begun to implement them both by 2017.

➤ **Good Service Isn't Good Enough**

The good news is we know 95.8%<sup>2</sup> of clients would recommend VHA to their family/friends. Despite this resounding vote of approval, we still did not increase our “very good/excellent” scores in all services. We made some progress, in some services, but not all. Multiple improvement projects were undertaken throughout the year to raise our client experience scores (such as critical analysis of our complaints and compliments; ongoing client-centred care and soft skills training, action plans at individual team levels to address identified issues, etc.) Due to lagged survey results from the CCACs, we are not able to ascertain what, if any, impact our efforts are making at this time. We expect to see data in late spring.

➤ **More Independence For Those Living With Chronic Diseases**

Much of the year was spent scanning the literature for existing best practice approaches to and programs that encourage chronic disease self-management with a focus on peer coaching models, developing a Diabetic Resource Guide for our nurses as well as an education model (based on RNAO's BPG in this area) that will be used to teach all our clinicians how to practice using a self-management approach. This work took longer than anticipated and as a result we were unable to commence a specific pilot program.

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<sup>2</sup> Our own NRC survey results were available for Q1-Q3 in 2015. Of 2451 clients who responded to the survey, 95.8% would recommend VHA.

## MORE CONNECTED

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### HIGHLIGHTS OF RESULTS ACHIEVED

- ✓ **Positive Partnerships**  
 A review of existing and prospective partnerships was completed, as well as a plan to begin to develop/deepen relationships with others in the health care sector with whom, historically, we have not been as closely connected (such as hospitals, primary care and LHINs). We have a well-earned reputation for being a great partner and this year we both initiated and responded to a number of requests to collaborate in service planning, delivery and research activities. In total, 28 partnerships were formed through 10 new collaborative initiatives.
  
- ✓ **Nursing Growth**  
 We experienced over 4% organic nursing growth in our existing contracts, in addition to winning a new integrated Palliative Care contract with the Central East CCAC which we anticipate will increase annual revenues by 11%. We also explored a number of business opportunities with nursing involved but nothing we could move forward with in 2015. We will continue to be vigilant in our search for opportunities in the coming year.
  
- ✓ **Homelessness Prevention & Hoarding Support Programs**  
 This year we served record numbers of clients in need of extreme cleaning services to prevent eviction and homelessness – 496 clients (an increase of 30%) and expanded the program into Ottawa so help is now available in York Region, Toronto and London. Our work with those living with hoarding challenges in our Community Support Program continues to grow. We served 115 individual clients (compared to 26 in 2014) either through our volunteer hoarding program (where volunteers are matched with people ready to accept help) or through referrals from the Hoarding Support Network in Toronto which VHA leads.

✓ **Growing Our Charitable Programs**

2015 saw the roll out of several grants secured late in 2014 reflecting a 9% increase in revenues. These monies have enabled us to expand our reach to the most vulnerable in our communities funding primarily homelessness prevention programs/initiatives such as extreme cleaning and our hoarding volunteer program and city-wide network (in Toronto).

✓ **Responding to the Needs of Caregivers**

Several new programs were initiated in 2015 that support caregivers who truly are the heart and soul of home care. Programs such as “Mind and Body in Action” that provides activation for individuals with dementia while also providing caregiver relief; a Parent Relief Program for children with autism; and a Volunteer Caregiver Relief service for clients with dementia.

## MORE INSPIRED SOLUTIONS

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### HIGHLIGHTS OF RESULTS ACHIEVED

✓ **More Great Ideas Generated**

We increased staff participation in SPARK! by over 48% from 2014 with 991 employees registered by year end, which is 49.6% of our workforce (meeting our target of 50% if you round the number up!) 27 out of 115 ideas with an official response (required for ideas with over 20 votes) had actions implemented and were completed by Dec. 31<sup>st</sup>. It is exciting to see so many quality improvement ideas generated by staff implemented – everything from client cards for special occasions, availability of longer gloves for care delivery, to a TTC VIP Metropass program.

➤ **New Finance and HR systems in Place (almost!)**

Significant headway was made on the preparatory work required to implement Great Plains and Quadrant HR. Unfortunately a number of critical interface issues with our current CRM (GoldCare) were not resolved by year end which pushed our ‘Go Live’ date into 2016.

➤ **Transitioning From Paper to Electronic Records**

This year marked the successful introduction of an electronic health record (EHR) in our Central nursing clinic and a limited production release of an EHR for our community nurses to use with their adult clients to be rolled-out to all VHA’s adult nursing practice in 2016.

➤ **New Client Relationship Management (CRM) System is on the Horizon**

After an extensive RFP process, we are working with Microsoft and BDO Dunwoody to explore a CRM solution.

➤ **New Personal Support Service Delivery Model for Better Care**

Our evaluation demonstrated that our new model with nursing supervisors and peer personal support coaches added to the team makes a positive difference for clients and staff. We were slowed down in spreading the model to all regions primarily due to HR issues which have been resolved and we are now in position for a full roll-out in 2016.

✓ **Boosting Staff Competencies**

We have identified core competencies required by staff and providers working with our three specialty populations (medically complex children and individuals with cognitive impairment) and a robust plan to ensure educational/training programs can be accessed as necessary in the coming years.