



# INTEGRATED STRATEGIC PLAN 2020-2025



**Patient-Centred Care :**  
**At the Heart**  **of All we DO**

## Espanola Health Hub: A Patient-Centered Model for Care Integration

The Espanola Health Hub comprised of the Espanola Regional Hospital and Health Centre (ERHHC), which includes a long-term care home, and the Espanola & Area Family Health Team (EAFHT), is a fully-integrated care organization, serving the health care needs of Espanola and the surrounding communities.

The Health Hub has evolved over many years, as the result of a long-standing, shared vision of congregating facilities and services into a concentrated health campus, which now resides on McKinnon Drive. This has created a very functional “One-Stop-Shop” for patient care, centered around a 79-bed health campus - comprised of 15 acute care beds, a modern expanded Emergency Department, 2 chronic care beds, 30 ELDCAP (long-term care) beds and 32 nursing home beds, a 19-unit assisted living facility, a 30-unit seniors’ non-profit housing complex, a Family Health Team, a 6-bed sleep lab, and a newly created palliative care suite.



The Organization has reached out across the health care system to embrace many Partnerships with other service providers, in an effort to improve upon the journey for our patient’s as they pursue their health goals.

Putting our Patient’s First is at the heart of everything that we do.

As a small, rural and northern organization, we know that we must work collaboratively with partners, so as to maximize the value that we can bring to the people that we serve.

The Health Care system is impacted by many complex and evolving challenges, including the combination of an aging population, fiscal restraint of health spending, and growing complexities of health care technology... just to name a few! However, by working through the strength of our staff and clinicians, in collaboration with our partners, we are ready to embrace the future.

And so, towards this end, we’ve set out to chart our future within our first ever Integrated Strategic Plan, creating a shared, visionary roadmap that will guide the activities of the entire Health Hub under a single, shared Plan; on the following page, you will find a one-page summary of our Plan.

## Understanding the Context of Building a New, Integrated Plan

### **INTRODUCTION**

An organization creates a strategic plan as a tangible, thoughtful roadmap, allowing for the definition of high-level elements, such as Strategic Pillars (what we want to achieve), Goals (how we will achieve them), and Indicators of Success (how we will demonstrate and/or measure success). Through this thoughtful and focused approach, operations are thus guided for a defined period of time, allowing for alignment in efforts across an organization towards the chosen vision, in a manner consistent with its mission, and congruent with its values.

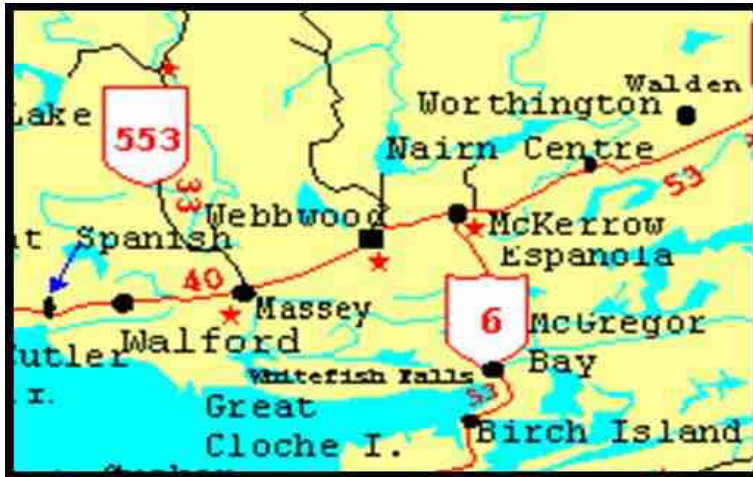
The visionary approach being taken was to create a single Integrated Strategic Plan, serving the broader needs of the entire Health Hub. A respectful and thoughtful synthesis was required to fuse together new Vision and Mission Statements, and to integrate the Values from the previous stand-alone Plans from the hospital/health centre, and the Family Health Team. It was determined that a shared set of Strategic Pillars, Goals, and Enablers would be defined and used across the broader Hub. To keep these relevant in such diverse settings as the hospital, primary care, and long-term care, it was envisioned that high-level elements would be required.

To help guide the creation of the new high-level Plan, a Steering Committee was formed with broad representation from the leadership across the Organization. The approach taken was to evolve and build upon the good work of the past five years, and not to look to a revolution. The Steering Committee decided to broadly consult with many stakeholders (staff, clinicians, patients, health care partners, health leaders, etc.), to examine and take into account current trends and issues from across the health care and political environment, so as to build the broad parameters for the organization to operate within; the guideposts, if you will. Yearly operating plans, departmental functional plans, and so on, are separate from, but guided by the Strategic Plan, and are where the tactical details will live; it is not the intent to include this level of detail within the Strategic Plan.

### **COMMUNITY PROFILE – THE CATCHMENT AREA & POPULATION BEING SERVED**

It is important to understand the attributes of the geography being served (Catchment), and an understanding of the demographics of the patient/client population and their broader determinants of health when compared to the trends being experienced elsewhere in the province.

The Organization serves a population of about 14,000 within a catchment area that includes the Town of Espanola and surrounding Townships (Nairn & Hyman, Sables-Spanish Rivers, and Baldwin). First Nations residents of Whitefish River and Sagamok are amongst the patient/client base. In addition, First Nations people living off-reserve in the broader area attend for services.



Summary of key broader determinants of health, when compared to all-Ontario rates:

- Higher proportion of the population aged 65 or over
- Higher self-reported rates of unemployment, smoking, obesity and alcohol use
- Lower levels of completed education
- Lower household total incomes
- Higher rate of single-parent families

Other Noted Demographic Factors:

- Higher death rates due to injuries, poisoning and suicides
- Higher rate of teenage pregnancy (and lower birth weight)
- Higher morbidity and mortality (with increased risk from chronic diseases - diabetes, cancers, respiratory illnesses, cardiovascular diseases, as well as accidents and suicide)
- Higher percentage of persons reporting English as first language
- Higher percentage of persons reporting Aboriginal Languages, with Ojibway predominating
- Low population density

Data Sources: Statistics Canada, Census 2011 and 2016, Ontario Public Health Profiles Ontario, Sudbury and District, and Espanola June 2019

### ***Distances Within the Catchment Geography***

The following table summarizes the distances from major towns and other health centres, to provide an understanding of the size of the catchment area, as well as distances that must be travelled by the population to access services.

Reference Point: ERHHC and EAFHT Location, Town of Espanola

<b>Name of Location</b>	<b>Distance (KM)</b>
Health Sciences North – nearest tertiary centre	77
Manitoulin Health Centre Little Current Site – nearest small hospital	50
Whitefish River First Nations	30
Sagamok First Nations	36
Walden	46
Spanish	53

### **SNAPSHOT OF KEY EXTERNAL TRENDS**

Health Care is a rapidly evolving, constantly shifting entity, which is very susceptible to factors of influence. This section will briefly outline some of these factors, so that they may help inform the overall choices that have been made within this strategic planning exercise.

#### **Demographic Shift**

As was demonstrated earlier, the population served by the organization is aging, has poorer health status, poorer social determinants of health, and has a higher prevalence of chronic disease and mental health issues. The overall population is not however growing in number; there has been a slight contraction in the number of persons living in the catchment communities. The exception to this is First Nations. According to local research, First Nations have a higher per capita birthrate, and this specific population is actually growing. (Source: North-East LHIN)

#### **Changing Quality Landscape**

For the past number of years, the organization has been focusing upon driving a changing quality agenda. This has been accomplished in concert with changing quality standards and reporting expectations. Overseeing bodies, such as Accreditation Canada, Health Quality Ontario, and the

College of Pharmacists of Ontario, have largely driven this agenda. Governments have responded through legislation to influence this quality evolution. The escalating number of obligated quality standards, while certainly increasing efficacy and safety, have become challenging for health care organizations to incorporate and operationalize. This trend is not likely to diminish, and will continue to require significant resources to accomplish.

Another trend within the Quality sphere is the incorporation of the patient/client and family voice into more and more aspects of the organization's processes. This is particularly seen within the changing standards being adopted by Accreditation Canada. The expectation is that this voice must be an ever-present factor within service planning, implementation, quality assurance, risk management, and other areas of governance and operations within health care.

### **Political Landscape and Financial Picture in Ontario**

After a decade of Liberal rule in Ontario, a Progressive Conservative majority government was elected in the late spring of 2018, under the leadership of Doug Ford. The government's announced priorities included balancing the budget from an announced \$15 billion shortfall, ending what has come to be described as "hallway medicine," and improving access to mental health services.

Hospitals across Ontario have been at and over-capacity for some time now, with the net result of some patients being cared for within hospitals in unconventional spaces (like hallways, lounges, etc.). All parts of the health care system are experiencing high service demands, as a result of well understood demographic factors, and when other parts of the system cannot accommodate patients, hospitals become the stop-gap service provider. This reality is reflected within the high occupancy rates and wait time statistics for many services.

The Government's first budget was released in the early spring of 2019, and included a modest 1% increase to the base budgets of Ontario's hospitals. In addition, some other funding sources which had been provided previously only on a year-to-year basis, were rolled into base funding. With inflation due to wages, drugs, supplies, and other operating needs running at on average between 1.5 – 3.0%, it is recognized that operating efficiencies will be required to manage within the funding envelopes being provided.

### ***Health System Changes – New Legislation***

The Ontario Government has passed **Bill 74: The People's Health Care Act, 2019**. The Bill creates the legislative framework for the Government to achieve its objective of creating a new model for a patient-centric, integrated public health care delivery system. Included in the Bill are the powers to merge many of the existing separate corporations (such as LHIN's, Cancer Care Ontario, eHealth Ontario, etc.) into a single mega-agency called Ontario Health.



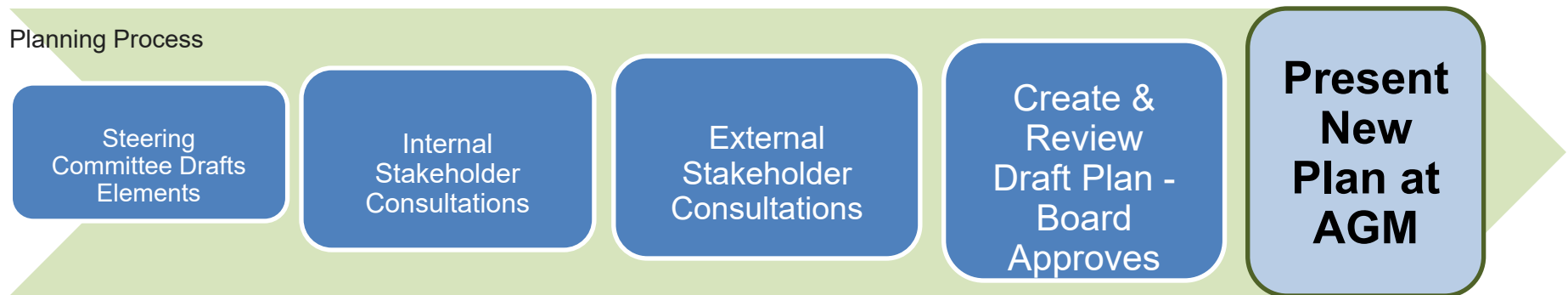
In addition, the Legislation creates the framework for new integrated care delivery networks of health care provider organizations, called *Ontario Health Teams*. It is stated that at least 3 of the main health services must be represented within a new Ontario Health Team (such as hospitals, long-term care, and primary care).

With the number of transformative changes being undertaken by the Government to the structure and mandate of the various organizations across the health care system, the Steering Committee wisely decided that the new Strategic Plan must be nimble enough to accommodate and respond to the many possible resulting policy shifts.

### Efforts Towards the New Integrated

#### Strategic Plan February to June, 2019 – The Stepped

Planning Process



The Steering Committee guided the creation of drafted elements that were seen as important for discussion with our Stakeholders. Drafted Pillars and possible Goals were articulated, so that there was “food for thought” for people to react to. In addition, a master Survey Questionnaire was utilized, in both electronic and paper format, which asked key questions about health care services and the current and evolving needs of our patients.

In-person and phone consultation sessions were held with patients, clinicians, boards, staff, partner organizations (including First Nations), and the public-at-large, in an effort to gather broad and useful input into the creation of our new Plan. In all, over 150 persons provided input during this process. The Organization is thankful for this wonderful degree of participation.

### ***THEMES RESULTING FROM ENGAGEMENT SESSIONS & SURVEYS***

The following Themes were summarized from the survey data, individual comments, and in-person and phone call discussions:

1. The suggested Strategic Pillars were strongly supported and seen to be timely, with the need for some slight changes noted – these were incorporated into the final Pillars
2. Home and Community Care Services were seen to require improvement and the Organization was seen as capable of playing an enhanced role
3. Mental Health and Addictions gaps were perceived to be a major health system issue



4. Additional access to Living Spaces for Seniors (LTC, Assisted Living, Apartments) was seen to be desired
5. Resource Concerns (funding, space, staffing, GP Clinicians and Specialists) were noted
6. The Organization was encouraged to Continue to focus on Communication (internal and external) –suggested themes: Helping Stakeholders Understand Change, Privacy, Security, Quality/Safety, Services Available
7. The Organization was encouraged to Continue to focus upon Partnerships (across the system partners, for better IT, for Cultural Safety, for better Access to Services)
8. The Organization was seen in an overall positive light by stakeholders, and highly valued

## ELEMENTS OF OUR NEW PLAN:

### Our New Vision

- ***Caring for the Health of our Community***

### Our New Mission

- ***Your Partners for Better Health and Wellness***

We heard from our Stakeholders that Patient-Centred Care must be at the core of everything we do. We understand that each patient's health goals and experiences are different, and that we must partner with patient's, their families, and with other care providers, so that we positively contribute to each person's own health journey. These important themes are now strongly embedded within our Vision, Mission, and Values.

## Our New Shared Values

- **Patients First**
- **Integrity**
- **Respecting Diversity**
- **Compassion**
- **Respect and Dignity**
- **Contribution of All**

We wanted to strongly ground our collective efforts going forward under a meaningful set of Core Values. We commit to working hard over the life of this new Plan to living these values within our Organization. We understand the importance of creating a caring, safe, compassionate, trusting and respectful environment for everyone who interacts with us, including our patients and staff.

# OUR STRATEGIC PILLARS

**Build Upon  
Patient-  
Centred Care  
Through  
Quality and  
Safety**

**Enhance Care  
Coordination  
and Capacity**

**Embrace  
System  
Change, Grow  
Through  
Collaboration**

**Invest  
in  
Our People**

## **1. Build Upon Patient-Centred Care Through Quality and Safety**

In recognition of the important core of providing patient-centred care, and understanding the growing focus on safety and quality in all aspects within our operations, we will use this Pillar to focus our efforts. In addition, patients and their experiences are a wealth of knowledge to tap into. When we bring the voice of patients to the planning table, through engaging with Patient Advisors, we learn, improve and grow in our abilities to fulfil our caring Mission.

## **2. Enhance Care Coordination and Capacity**

We know how important it is to work towards a more seamless health journey for our patients, because the system itself is so complex and specialized. In addition, providing a comprehensive basket of services close-to-home is also important. This forms the basis for Pillar Number 2.

## **3. Embrace System Change, Grow Through Collaboration**

With the number of fundamentally transformative changes that are occurring within the health care system, we know that to continue to be successful as an organization, we must evolve and adapt to best take advantage of these changes. In addition, we know that the voice of small, rural, health care providers and patients must reach the ears of government, so as to influence policy and program changes. This Pillar strongly articulates this need.

## **4. Invest in Our People**

Healthcare is a people-oriented service; we work for patients, through the hands, minds, and hearts of our care-givers. All staff and clinicians have an important role to play in this. Every function within our Organization, whether it is direct hands-on care, or in various supportive roles, ultimately impacts upon our patients. Thus, we have selected Pillar Number 4 as key to our future efforts over the next 5 years.

# KEY STRATEGIC GOALS

We have articulated specific Goals as the means by which we will achieve each of the 4 Pillars during the life of this Strategic Plan. The Goals help to define the “How” of our upcoming efforts, and were chosen to reflect the feedback we heard from all of you. Each year, for the next 5 years, we will work both inside and outside of our walls to bring these Goals into our operations, and those of our Partners.

## **Pillar: Build Upon Patient-Centred Care Through Quality and Safety**

### ***Goals:***

- ✓ Bring the Patient’s Voice to the Forefront, through Growing Roles for Patient Advisors
- ✓ Collaborate with Partners to Streamline Care Pathways
- ✓ Partner with First Nations to Strengthen Cultural Safety & Competency
- ✓ Participate in Major eHealth Strategies

## **Pillar: Enhance Care Coordination and Capacity**

### **Goals:**

- ✓ Focus on Care Transitions
- ✓ Explore Home and Community Care Enhancements
- ✓ Grow Access to Priority Programs (Mental Health & Addictions, Chronic Diseases, End-of-Life Care, Patient Transportation)

## **Pillar: Embrace System Change, Grow Through Collaboration**

### **Goals:**

- ✓ Take an Active Leadership Role to Influence New Policy Directions
- ✓ Advocate for Rural Care Models that Grow Equity of Access and are Respectful of Cultural Diversity
- ✓ Collaborate with Partners towards a Local Ontario Health Team

## **Pillar: Invest in Our People**

### **Goals:**

- ✓ Enhance our Patient-Focus
- ✓ Grow our Just Culture across the Organization
- ✓ Utilize Focused Training Opportunities to Grow Expertise & Competencies throughout the Continuum of Care



**Enablers:**  
**Our People**  
**Effective Communication**  
**Technology**  
**Resources**  
**Partnerships**

There are key strengths that the Organization possess, which if used effectively, can help us to achieve our ambitious 5-year agenda. These assets can help us mitigate some of the weaknesses and challenges that are part of the realities for small, rural, northern organizations (for example, recruitment and retention of staff and clinicians, aging equipment, rapid changes to technology, limited fundraising opportunities, growing service needs).

Each of the 6 Enablers we have listed are seen as crucial strengths which must be utilized to their fullest, so that we may fulfill our Mission and further our Vision. We commit to being good stewards of these elements, by being responsive to your needs, and accountable for their judicious use.

## Towards the Future – Living Our New Integrated Strategic Plan

Our Organization has historically been seen as a leader in Ontario for excellence in rural, integrated, collaborative care.

We know that to continue to be successful, we must be ready to lead and embrace change. We know that our voices are important at the regional and provincial level, helping to inform the creation of new models of care, influencing the policies, legislation, and funding allocations that are key to providing care in a rural environment.

We know that one of our greatest strengths is our people. We will continue to grow and make investments in our skills, competencies, and culture. We also realize that close and cooperative efforts with our health system Partners from many other area organizations is essential if we are to build a truly seamless, integrated system of care. With the constraints that are happening in health system funding, to continue to sustain and even grow equity of access to programs and services, it is so important that we work in harmony with our Partners.

The rapid improvements in technology are transforming health care. Whether those changes are centred around electronic health records, equipment, or care processes, we realize that we must embrace and implement in a thoughtful way those improvements that are consistent with our level of care, and those that will bring the best health results for our patients.

Finally, and most importantly, we look to renew and grow our commitment to Patient-Centred Care. We commit to listening and incorporating the voice of our patients into our planning and quality efforts, through increasing roles for Patient Advisors. We look forward to partnering with First Nations organizations to enhance our abilities to provide culturally safe and appropriate care. We recognize and embrace the rich diversity of individuals that come to us on their health journeys, and so working to understand and embrace diversity (i.e. culture, language, sexual orientation) will be a priority for us.

We are excited and honoured to bring this new Plan to Life. We look forward to working and communicating with our Patients and Partners, Staff and Clinicians, as we embark upon this next phase for our Organization.