



STRATEGIC PLAN 2005 — 2008 A Living Document

The 2005-2008 Strategic Plan remains consistent with the thoughts and ideas of three key PHC texts:

1. PHC Vision Statement

At Providence Health Care, our vision for the future is that we will continue to grow as a community, regional and Academic Health Science enterprise that is a recognized leader, and major player, in the provision of health care within British Columbia. We will be respected for our care and services, known for our Mission and Values, acknowledged for the contributions of our teachers and researchers. We will actualize our Vision by being an organization of “Caring hearts, creative souls, resourceful actions”.

PURPOSE

We know ourselves by our shared vision of who we are and what we are here to do

REALITY

We are guided by our timeless values, regardless of change and uncertainty.

OPERATIONS

We will be leaders in the aligning and creation of systems, structures and processes that enable quality care and meaningful work to take place



CULTURE

We have a culture of care and service that sets us apart.

PEOPLE

We are the people with the caring hearts, creative souls and resourceful actions

2. PHC Positioning Statement: ***How you want to be treated.***

- with compassionate care and a sense of tradition.
- with respect for justice and diversity
- with excellence and leadership.
- with responsibility and independence.
- with courage and confidence.

3. PHC Strategic Directions for 2005–08

1. Provide excellent care & service
2. Live our mission everyday
3. Create an environment that attracts & retains the best people
4. Support research & new knowledge integration
5. Achieve strategic growth

Vision Element: Purpose

Strategic Direction ONE: Provide excellent care & service

I. Improving Patient (Inpatient & Outpatient)/Resident Care and Safety

Objective: We will continually improve the quality and safety of patient and resident care.

Actions:

1. Improve Performance: We will build a culture where staff and physicians continually improve performance. We will do this by:

- 1.a. Selecting and setting annual targets for improvement and regularly reviewing indicators
- 1.b. Assigning leadership, creating work plans and allocating resources to improvement initiatives
- 1.c. Building performance improvement capacity of leaders, teams and committees

2. Maximize Patient/Resident Safety: We will implement a plan to ensure every patient and resident is as safe as possible. We will do this by:

- 2.a. Fostering a culture of safety through structured and focused communications initiatives
- 2.b. Selecting and monitoring performance indicators related to patient safety and risk
- 2.c. Achieving best practice, policies and procedures that reduce risk and improve safety
- 2.d. Identifying, communicating and acting on lessons learned from critical incidents and external reviews

3. Improve Professional Practice: We will enhance integration, consistency and coordination of clinical practice. We will do this by:

- 3.a. Developing and implementing PHC-wide interdisciplinary standards of care and practice
- 3.b. Integrating professional practice issues into strategic and operational decisions

3.c. Advancing the work of the Professional Practice Committee and the Medical Advisory Committee

II. Improving Health Services

Objective: We will continually improve health services.

Actions:

4. Improve Patient Flow and Access: We will redesign how patients and residents flow through the health system. We will do this by:

- 4.a. Implementing and evaluating PHC's patient flow and bed management strategy
- 4.b. Revising and implementing the bed allocation methodology
- 4.c. Redesigning PHC's system for patient portering
- 4.d. Improving identification and management of the alternative level of care population
- 4.e. Achieving performance indicators for patient flow and access (e.g. LOS, ALC rates, etc)

5. Redesign Health Services: We will redesign how we deliver care and services to patients and residents. We will do this by:

- 5.a. Renewing our care model for residential service delivery
- 5.b. Redesigning and streamlining chemistry and hematology laboratory services
- 5.c. Redesigning pre-surgical services to enhance patient preparedness and discharge
- 5.d. Revitalizing critical care services within our acute sites
- 5.e. Enhancing hemodialysis and renal transplant options and expanding ambulatory services
- 5.f. Redesigning ambulatory care services

III. Improving Business Operations

Objective: We will continually improve business operations to enhance effectiveness and efficiency of the system to ensure financial stewardship of resources

Actions:

6. Initiate the Development of Electronic Health Record: We will facilitate the creation of the electronic health record. We will do this by:

- 6.a. Implementing a comprehensive Health Records Management System
- 6.b. Implementing the Unique Patient Identifier System
- 6.c. Implementing an Interdisciplinary Care Record
- 6.d. Standardizing and revising clinical care forms
- 6.e. Implementing provider order entry

7. Complete and Sustain Enterprise Resource Planning (People Soft): We will implement modules for Human Resources, Logistics, Finance and Payroll. We will do this by:

- 7.a. Streamlining and standardizing business processes
- 7.b. Continuing implementation of Logistics, Finance modules
- 7.c. Implementing Human Resources and Payroll modules

8. Improve Staff Scheduling: We will improve staff scheduling to maximize the use of our human resources for care and service. We will do this by:

- 8.a. Conducting an operational review of staff scheduling processes and systems
- 8.b. Acting on improvement opportunities in staff scheduling
- 8.c. Implementing skills training in innovative scheduling practices for leaders

9. Redesign Supply Chain Management: We will redesign and streamline how we manage supplies. We will do this by:

- 9.a. Reviewing and understanding the current system using process mapping
- 9.b. Creating a work plan to improve PHC's supply system

10. Monitor and Improve Performance of Contracted Services: We will work with our contractors to continually improve housekeeping, security and food services. We will do this by:

- 10.a. Evaluating performance of contracted services
- 10.b. Working with our contract providers to improve service delivery

Vision Element: Culture

Strategic Direction TWO: Live our mission every day

IV. Increasing Understanding of PHC's Mission

Objective: We will nurture commitment and understanding of our mission and promote ethical conduct, spirituality and diversity.

Actions:

11. Advance our Mission and Integrate Spirituality: We will strengthen our ability to articulate, integrate and act on our mission, vision, and values. We will do this by:

- 11.a. Building knowledge of the legacy of the Founding Congregations to guide us into the future
- 11.b. Celebrating people and teams who exemplify our mission, vision and values
- 11.c. Pursuing relationships with external partners and the community
- 11.d. Integrating spirituality to improve areas of care and service
- 11.e. Establishing concrete actions that nurture the 'soul' of PHC
- 11.f. Identifying and acting on a research study aligned to PHC's mission

12. Support Ethical Conduct and Decision-making: We will demonstrate leadership in ethics. We will do this by:

- 12.a. Making decisions and taking actions guided by our mission, vision and values
- 12.b. Supporting and advocating for holistic care and service (body, mind and spirit)
- 12.c. Fostering a culture in which ethical discussions are welcomed
- 12.d. Educating staff, physicians, leaders and teams about the complexity of ethical decision-making

V. Championing Faith-Based Health Care

Objective: We will champion PHC's mission through proactive communication.

Actions:

13. Communicate the PHC Positioning Strategy: We will build a credible and tangible PHC position as distinct from other health providers. We will do this by:

- 13.a. Launching PHC's positioning strategy to internal and external audiences
- 13.b. Establishing a comprehensive communication strategy for all strategic initiatives
- 13.c. Strengthening links with PHC's Foundation Boards
- 13.d. Sustaining a comprehensive PHC website

14. Promote Key Messages Internally and Externally: We will integrate PHC's key messages into all internal and external communication materials. We will do this by:

- 14.a. Standardizing and ensuring consistency of all PHC print materials
- 14.b. Incorporating key messaging of Senior Leaders and the Board into all public relations initiatives
- 14.c. Maximizing d'Vine and other vehicles to communicate key messages to staff, volunteers and physicians

15. Enhance our Presence on National and Provincial Faith-based Committees: We will participate on committees to ensure PHC's issues are represented. We will do this by:

- 15.a. Assigning Senior Leadership accountability for participating on provincial and national committees
- 15.b. Ensuring regular reporting to the Senior Leadership Team

Vision Element: People

Strategic Direction THREE: Create an environment that attracts & retains the best people

VI. Attracting & Retaining Talent

Objective: We will establish PHC as an 'employer of choice' that attracts and retains the best people who share PHC values.

Actions:

16. Honour People: We will nurture our human resources — staff, leadership, physicians and volunteers. We will do this by:

- 16.a. Identifying and implementing human resource metrics
- 16.b. Creating a comprehensive, profession- by-profession recruitment and succession strategy
- 16.c. Streamlining human resource recruitment processes
- 16.d. Reinventing our performance management processes to focus on competencies and development

17. Promote Diversity: We will integrate diversity into all PHC activities. We will do this by:

- 17.a. Integrating the principles of diversity into recruitment and retention strategies and new employee orientation
- 16.b. Identifying and securing support mechanisms to promote and improve diversity

18. Recognize Talent: We will recognize the contributions of staff, physicians and volunteers for their service to PHC. We will do this by:

- 18.a. Maximizing the use of PHC's recognition program
- 18.b. Developing and integrating a plan for physician recognition
- 18.c. Revitalizing the way we celebrate long service employees

VII. Developing People

Objective: We will build capacity of staff, physicians, leaders and teams to achieve their best.

Actions:

19. Develop Leadership: We will support and promote ongoing leadership development. We will do this by:

- 19.a. Implementing a powerful internal leadership program focusing on leadership and management competencies of staff and physicians
- 19.b. Sponsoring PHC leaders to participate in the "Foundations in Leadership for Catholic Organizations"
- 19.c. Creating the first national leadership program for physician leaders in residential care
- 19.d. Aligning leadership competencies with performance management and succession planning
- 19.d. Renewing the Expanded Leadership Forum to maximize development opportunities

20. Revitalize Employee Orientation: We will redesign employee orientation to provide new employees with a sense of purpose of and commitment to PHC. We will do this by:

- 20.a. Evaluating the current orientation program
- 20.b. Creating and implementing a revitalization plan

VIII. Creating a Superior Workplace

Objective: We will enhance the work environment of staff, physicians and volunteers.

Actions:

21. Enhance Employee Satisfaction: We will improve the satisfaction of our employees and volunteers. We will do this by:

- 21.a. Conducting an employee satisfaction survey and implementing solutions for targeted areas
- 21.b. Identifying and resolving system issues that impede work
- 21.c. Facilitating innovative scheduling practices
- 21.d. Identifying and advocating for improvements to the physical work environment

21. e. Identifying and improving the work environment for increased staff safety

22. Reduce Sick Time and Overtime:

We will reduce overall sick absenteeism and over time usage. We will do this by:

- 22.a. Setting and monitoring organizational targets and indicators
- 22.b. Implementing a "Shifting to Wellness" program to foster healthy lifestyles
- 22.c. Introducing Clinical Resource Teams and evaluating their impact
- 22.d. Implementing customized solutions in areas where sick time and over time is high

23. Support Frontline Care and Service Teams:

We will develop and enhance frontline care and service teams. We will do this by:

- 23.a. Reviewing and redesigning team intervention strategies and implementing support measures for the teams

Vision Element: Operations

Strategic Direction FOUR: Support research & new knowledge integration

IX. Nurturing Research

Objective: We will expand our capacity for research and increase our use of new knowledge.

Actions:

24. Expand Research: We will support and encourage researchers, students and trainees to pursue health research of the highest possible calibre. We will do this by:

- 24.a. Creating a research plan to identify and pursue external funding
- 24.b. Identifying services and developing a plan to enhance research productivity
- 24.c. Nurturing a culture where research is valued as an integral activity of PHC

25. Prioritize Interdisciplinary Research: We will enhance interdisciplinary research activities. We will do this by:

- 25.a. Increasing the participation in research of all health professionals
- 25.b. Offering a competitive funding program for interdisciplinary research

X. Building Teaching & Training Capacity

Objective: We will develop a strategy with our academic partners that positions PHC as a premier teaching and training institution.

Actions:

26. Build Academic Capacity and Output: We will amplify PHC's reputation as a stellar, sought-after teaching and training destination. We will do this by:

- 26.a. Creating a plan to attract top students and trainees

- 26.b. Offering enhanced orientation for student and trainees and creating an environment in which they feel integrated, welcome and supported
- 26.c. Strengthening formal and informal teaching and training opportunities for researchers
- 26.d. Working in partnership with UBC and other academic institutions to attract and retain top students and trainees
- 26.e. Partnering with UBC and others to increase undergraduate, interdisciplinary education

Vision Element: Reality

Strategic Direction FIVE: Achieve strategic growth

XI. Implementing The Legacy Project

Objective: We will implement the Legacy Project and demonstrate PHC's leadership in health services redesign.

Actions:

27. Redevelop Acute Services: We will pursue the development of a new acute and academic health sciences enterprise. We will do this by:

- 27.a. Finalizing a business case for government approval in partnership with the Region
- 27.b. Implementing a public engagement and community consultation strategy
- 27.c. Engaging the City of Vancouver on rezoning issues and studies to determine potential impacts of the Legacy Project
- 27.d. Completing detailed functional planning for the new site
- 27.e. Identifying and beginning care and service redesign initiatives in preparation for the new site

28. Develop Campuses of Care: We will pursue the establishment of two Campuses of Care for older adults. We will do this by:

- 28.a. Finalizing the Campus of Care models for the St. Vincent's Heather and Richmond sites
- 28.b. Finalizing renewal options for Holy Family Hospital
- 28.c. Pursuing and advancing the partnerships with Vancouver Coastal Health Authority, the Fraser Academy and other external stakeholders at both sites
- 28.d. Commencing the redevelopment of the St. Vincent's Heather site

XII. Pursuing Strategic Alliances

Objective: We will pursue partnerships to advance PHC's vision, mission and strategic directions.

Actions:

29. Strengthen Partnerships with Major Stakeholders: We will embark on a process to establish and strengthen mutually beneficial partnerships. We will do this by:

- 29.a. Continuing increased collaboration and integration of PHC's Foundation boards
- 29.b. Enlisting PHC's Foundations to focus on the major capital campaign for the Legacy Project (redeveloping acute services, campuses of care)
- 29.c. Identifying and communicating with key stakeholder groups and individuals

30. Implement the Public Engagement Plan: We will ensure a transparent public engagement process for input and feedback into PHC's strategic directions. We will do this by:

- 30.a. Completing information and issues-sharing meetings with stakeholder groups
- 30.b. Launching an effective and formal public engagement process
- 30.c. Implementing public awareness campaigns that includes a comprehensive media relations strategy

XIII. Renewing Health Delivery with Regional Partners

Objective: We will strengthen and integrate PHC's health delivery system with other health regions and providers.

Actions:

31. Enhance our Presence on Regional Committees: We will enhance our presence on regional committees to ensure PHC issues are represented. We will do this by:

- 31.a. Participating in Vancouver Coastal Health Authority's One Acute Network, Community Care Network and Primary Care Network
- 31.b. Participating in the Provincial Health Services Authority's provincial health systems planning
- 31.c. Strengthening the integration of regional work with PHC services

XIV. Advancing Care to PHC's Populations of Emphasis

Objective: We will achieve strategic growth aligned with our populations of emphasis.

Actions:

32. Lead Regional, Provincial and National Health Redesign: We will demonstrate leadership by dramatically improving health research, teaching and service delivery to our populations of emphasis. We will do this by:

- 32.a. Establishing strategic alliances with governments, community groups, professional groups and others to advance care for PHC's populations of emphasis
- 32.b. Becoming a regional and provincial leader in end-of-life care
- 32.c. Strengthening the Centre of Excellence in Aging and Health
- 32.d. Expanding PHC's Addictions Program and appointing the Research Chair in Addictions
- 32.e. Promoting PHC's provincial role as an integrated Diabetes Service that demonstrates innovation in chronic disease management

33. Implement New Services: We will identify opportunities and secure resources to enhance services supporting our populations of emphasis. We will do this by:

- 33.a. Supporting the expansion of Surgical, Cardiac, Intensive Care, Acute Mental Health and Addiction services
- 33.b. Developing a minimally invasive surgical suite, a new cardiac procedure room, a palliative care hospice at Youville Residence and other opportunities as they are identified