

Home Level Strategic Plan 2021 - 2024

MISSION: Durham Christian Homes is a welcoming community that provides exemplary, quality care to our residents through empowerment, compassion, dignity and respect.

VISION: To be an innovative leader and the homes of choice, committed to enhancing quality of life.

VALUES: Motivated by our Christian faith, we CARE: Commitment to Community. Accountability. Respect. Excellence

CORPORATE STRATEGIC DIRECTION 1: PROVIDE AN EXCEPTIONAL LIFE EXPERIENCE

1. Ensure residents are heard and supported in mind, body and spirit.

Organizational Strategic Goal	Organizational Objectives	Home Goal	Indicator	Current Performance	Target	Key Action Items	Responsible	Timeline
Provide exceptional care.	• Align care and support the needs of residents today and in the future.	Improve communication with Residents	<ul style="list-style-type: none"> I am aware of who to contact to initiate a concern/complaint. I receive updates about my health. Communication during the pandemic I am given opportunities to make decisions about my care. 	73% 62% 64% 71%	78% 67% 70% 76%	<ul style="list-style-type: none"> Strengthen function of Residents Council Elevate move-in experience Standardize Care Conference process Review Complaints process 	Social Services Coordinator Admin	Q2 2022
	• Monitor/increase use of best practices in care provision • Encourage innovation and creativity to meet the individual needs of our residents	Utilize best practices and innovation to further strengthen strategies related to behaviour supports and palliative/end-of-life care residents	<ul style="list-style-type: none"> Worsened behavioural symptoms Avoidable ED transfers (per 100 residents) 	• 11.6% • 11.1%	10% 10	<ul style="list-style-type: none"> BSO Foundations Program/BSO Toolkit Certified GPA Coach/Train the Trainer education for staff Strengthen Palliative Care Program/training 	DOC/ Clinical Leads	Q2/Q3 2022
	• Monitor/increase use of best practices in care provision • Encourage innovation and creativity to meet the individual needs of our residents • Improve Health Quality Indicators	Utilize best practices and innovation to further strengthen clinical programs	<ul style="list-style-type: none"> # Medication Incidents per quarter Falls Worsened pressure ulcers 	• 11 • 11.3% • 1.4%	10 10% 1%	<ul style="list-style-type: none"> Implementation of eMAR ISMP best practice guidelines automated stat box dispensing Introduction of wound care app Integration of Clinical Support Tools - Think Research 	DOC	Q2/Q3 2022
	• Develop creative staff recruitment and retention strategies	Recruit and retain qualified staff - become an employer of choice	<ul style="list-style-type: none"> # voluntary resignations Staff engagement - would recommend as good place to work 	• 48 (hired 52) • to collect baseline	35	<ul style="list-style-type: none"> Staff appreciation increase communication/ opportunities for input - utilize "survey monkey" for real time feedback Meaningful work - efficient and effective - review of job routines to make best use of staff time - realign staffing plan Surge Learning platform in 2022 to support on-line staff education. Preceptor Resource and Education Program to support dedicated training and resources to enhance clinical student placements Promotion of the Career Laddering Program for PSW's and RPN to develop internal talent Utilization of provincial strategies 	Admin	Q2 2022
Provide meaning, purpose and quality of life for our residents.	• Strengthen Spiritual and Activation Programming	Strengthen Spiritual and Activation Programming Post pandemic "return to normal"	<ul style="list-style-type: none"> I like the activities provided in this home. There are activities that support my religious/spiritual beliefs. There are opportunities for me to participate in activities. I have access to enjoyable things to do on weekends. 	• 58% • 55% • 71% • 71%	65% 65% 78% 78%	<ul style="list-style-type: none"> Post-pandemic re-introduction of spiritual program and services Resident input and planning into desired programs re-commence Spiritual Care audits Worship planning group of residents to guide spiritual programs in the home 	Chaplain	Q2 2022
	• Maintain resident and family satisfaction	Manage aging environment until rebuild	Family Satisfaction Survey: <ul style="list-style-type: none"> Mealtimes are pleasurable for my family member The home is free from odours. The building and grounds are maintained 	• 54% • 76% • 78%	60% 80% 83%	<ul style="list-style-type: none"> Formalize a Family Council Processes for on-unit dining Strengthen environmental processes/routines 	Admin	Q2/Q3 2022
	• Develop trusting relationships that empower our future residents and their families as well as current residents and their families	Develop trusting relationships that empower our future residents and their families as well as current residents and their families	• Post admission satisfaction	To develop/collect baseline			<ul style="list-style-type: none"> Strengthen and standardize admission process Orientation program for residents 	Social Services Coordinator

Continuous learning and innovation to strengthen and broaden scope of care and services.	• Strengthen customer service standards throughout the home	Strengthen customer service standards throughout the home	• Resident and Family "Would Definitely Recommend"	• Family - 49% • Resident - 49%	55% 55%	• Relationship model • Strengthen and standardize admission process • Develop orientation program for residents • Review complaint process	Social Services Coordinator	Q3 2022
	• Promote learning and knowledge transfer to optimize care by continually improving processes	Provide opportunities for continuous learning for staff	• Staff Engagement - opportunities for continuous learning and opportunity	• To develop/collect baseline		• Surge Learning • Subject Matter Experts/Champions for required programs • Train-the-trainer approach	Admin	Q2/Q3 2022
Nurture relationships with residents and DCH community	• Engage residents and work collaboratively to support residents in the transition to the LTC home	Standardize admission process and care conference process to optimize resident and family input	• Post admission satisfaction	• To develop/collect baseline		• Strengthen and standardize admission process • Develop orientation program for residents • Standardize Care Conference process	Admin Social Services Coordinator	Q3/Q4 2022

CORPORATE STRATEGIC DIRECTION 2: NURTURE OUR NETWORK

2. Strengthen relationships to enhance collaboration.

Organizational Strategic Goal	Organizational Objectives	Home Goal	Indicator	Current Performance	Target	Key Action Items	Responsible	Timeline
Nurture relationships with employees, stakeholders, community agencies, health professionals and government.	• Strengthen visibility and advocacy in the community	Strengthen visibility and advocacy in the community						
	• Empower staff through education and leadership encouragement	Provide opportunities for continuous learning for staff	• Staff Engagement - opportunities for continuous learning and opportunity	• To develop/collect baseline		• Surge Learning • Subject Matter Experts/Champions for required programs • Train-the-trainer approach • Mentorship/succession planning	Admin	Q2/Q3 2022
Work collaboratively with community partners and agencies	• Leverage partnerships that assist with coordination of care	Leverage partnerships that assist with coordination of care	• Medication errors • Outbreak Management • IPAC stats/audit results			• Participation in Ontario's Data Integration Project Pilot • Continue to build relationship with IPAC Hub and utilize resources • Continued partnership with Pharmacy and work with Medication Safety Technologies	Admin DOC	Q1/Q2 2022
	• Partner with education providers to leverage placement opportunities	Provide dedicated training and resources to enhance clinical student placement experience.	• Post placement feedback/satisfaction survey	• To develop/collect baseline		• Active participation in Preceptor Resource and Education Program • Identification of dedicated preceptors • Development of placement effectiveness/learning transfer tool	Admin Staff Educator	Q2 2022
	• Encourage resident, family, staff and community engagement to enhance value to our homes through collaborative planning, decision making and positive action	Establish a formalized Family Council	• Active Family Council	NA	NA	• Continue with information sessions • Promote Family Councils - guest speaker • Actively poll for FC President	Social Services Coordinator	Q3 2022
	• Post pandemic return to recruitment of volunteers	Post pandemic return to recruitment of volunteers	• number of active volunteers			• targeted recruitment campaign	Programs Mgr Chaplain	Q3/Q4 2022
Promote a learning atmosphere whereby new initiatives and innovation are encouraged.	• Create internal capacity to address staffing challenges	• Create internal capacity to address staffing challenges	• # of vacant positions past 30 days	Collect baseline		• Preceptorship program to strengthen hiring pool • quarterly review of staffing plan • Active recruitment strategies	Admin Dept Managers	Q1 2022 and ongoing
	• Maintain CARF accreditation	Integrate home level teams to sustain CARF initiatives	• Active CARF teams	NA	NA	• Review current teams/meeting agendas to integrate CARF initiatives into existing processes	Admin	Q3 2022 and ongoing
	• Develop best practices that improve effectiveness and efficiency	Integrate process improvement into everyday practice to support change management	• Use of process improvement tools and methodologies			• Re-introduction of QI tools • use of metrics to validate change management	Admin	Q3 2022 and ongoing

CORPORATE STRATEGIC DIRECTION 3: PROMOTE GROWTH AND SUSTAINABILITY

3. Ensure effective and efficient use of resources in our existing and new communities.

Ensure financially viable operations.	Maximize resources in accordance with annual budget	Decrease costs related to sick time and lost time injury claims (WSIB)	• Sick time statistics • NEER statements	• 329 hrs/pay	200 hrs/pay	• Quarterly review of attendance management program - strict adherence to attendance management policy • Education around Workplace Injury process for Supervisors on weekends/evenings	Admin Dept Managers	Q1 2022 and ongoing
	Optimize utilization of provincial staffing strategies and programs	Optimize utilization of provincial staffing strategies and programs	Participation in provincial strategies			Participation in provincial strategies as available		

Maintain/increase occupancy levels and waitlist	Maintain 97% Occupancy	• Occupancy statistics	92%	97% <ul style="list-style-type: none"> • Work with HCCSS to manage waitlist • Work with hospital contacts related to interim beds • re-introduction of CVC program as approved • continue to monitor preferred revenue and internal transfers post census decrease to ensure residents are in appropriate accommodation 		
---	------------------------	------------------------	-----	---	--	--