HAY RIVER
Health & Social Services Authority

Strategic Plan 2013 – 2018

MARCH 2013

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Contents

Context for Strategic Planning

About this strategic plan

This strategic plan is the result of extensive consultation with both internal and external stakeholders. In order to understand how stakeholders perceive the challenges and opportunities facing the Hay River Health Authority, meetings were held all departments within the Health Authority. External stakeholders were identified and invited to provide their input. (A list of stakeholders consulted is included in the appendix.)

This strategic plan looks forward to 2018, and encompasses a period of significant change for the Authorit, as it prepares to commission a new Health Centre in 2015. While many challenges can be anticipated, many others cannot.

This strategic plan sets direction and identifies how the Hay River Health and Social Services Authority will move forward. The Authority's **vision**, **mission**, and **values** tell us where we are headed, what we do, and the values we embody as we pursue our vision. These are fixed and, like the North Star, help us to take our bearings. They are not expected to change over the course of this strategic plan.

The **goals** in this plan represent what we will work to achieve over the next five years. As a goal is achieved, new goals will be set. Goals respond to areas of priority identified by the Authority: those things that need to be achieved if the Authority is to succeed in its mission in the next five years. These are the milestones along the journey.

Each goal has several **strategies**. These actions that the Authority will take to create the critical success factors needed to succeed and to overcome barriers to achieving our goals. Strategies are highly dynamic. If a strategy is not working, it can be changed; as our environment and our situation changes, we can change our strategies so that we can continue to make progress on our goals.

The **objectives** and **measures** in this strategy describe how we will know we are making progress. They describe the outcomes that we seek to create through this strategic plan that will demonstrate that we are achieving our goals.

The NWT health and social service system

The Hay River Health and Social Services Authority (HRHSSA) is one of eight Health and Social Service Authorities in the Northwest Territories that together address the health and wellness needs of NWT residents. The authorities operate under policy-making and funding umbrella of the GNWT Department of Health and Social Services (DHSS) and make up the NWT health and social services system. The Hay River Health and Social Services Authority serves the populations of Hay River, Kakisa and Enterprise.

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Department of Health and Social Services vision:

Healthy people, healthy families and healthy communities

Territorial health system mission:

To promote, protect and provide for the health and well-being of the people of the Northwest Territories

Hay River Health and Social Services Authority

Within the context of the entire territorial health system, the Hay River Health and Social Services Authority embodies its own, but complementary and supportive vision, mission and values.

HRHSSA vision:

Healthy people living in healthy communities

HRHSSA's mission:

Meeting community needs through quality care and education

Hay River Health and Social Services Authority values:

*We believe in client and staff **safety**. Therefore we continually identify and manage risks to minimize harm and educate clients and staff to empower them to minimize their own risk.*

*We believe in **integrity**. Therefore we are honest, honour our commitments and act ethically.*

*We believe in **accountability**. Therefore we take responsibility for our actions and decisions.*

*We believe in **respect**. Therefore we treat clients and staff the way we wish to be treated, we do not impose our personal beliefs and judgements on others, and we honour a person's right to choose what is best for them.*

*We believe in **collaboration**. Therefore we value working together with people within and outside the Authority to achieve a shared mission and goals.*

*We believe in **empowerment**. Therefore we encourage and support staff to make decisions and follow through to ensure the best outcomes for clients.*

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Operating context

The context for delivering health and social services is complex across Canada

Realities like an ageing population and increasing health needs put pressure on health and social services systems across the country. And while medical breakthroughs make better health care possible, they also come at an increasing cost and in an economic climate where corresponding increases in health care spending are unlikely.

According to a recent poll, 80% of Canadians are concerned that the quality of health care will decline. Throughout the country, Canadians are demanding shorter wait times, improved patient management and privacy protections and the modernization of health and wellness services to meet the needs of a growing and ageing population.

The challenges of delivering health and social services in the NWT are unique

Together with DHSS, the health and social services authorities serve a population of 45,000 people in 33 communities spread across a massive geographical area. Throughout the territory the small population, remote location and climate create challenges in recruiting and retaining health care workers. As a result, health authorities such as the HRHSSA rely heavily on short term (or locum) health care practitioners.

Mental health is a key concern in the NWT. Only 64% of the population rates its mental health as "excellent" or "very good", compared to 73% of other Canadians. Seniors (aged 60 or older) are also the fastest growing segment of the NWT population, expected to increase from 9% in 2008 to 13% in 2017. Chronic disease is widespread throughout the NWT, with an estimated 200 new cases of diabetes diagnosed each year. As rates of chronic disease increase with age, the demand for, use and cost of health and wellness services are likely to increase as well.

In 2010-2011, the NWT healthcare system accounted for 25% of the territorial government's budget (or $326 million). A significant increase in the overall health care budget is not expected, requiring all health and social services authorities—including HRHSSA—to optimize existing resources and do more with less.

Working within this greater context, HRHSSA faces its own unique challenges, opportunities and operational realities

There are a number of distinct challenges that HRHSSA faces as it works towards achieving its vision of healthy people living in healthy communities. The challenges and context identified below were derived from the perspectives of internal and stakeholders. Stakeholders were engaged in the HRHSSA strategic planning process, to identify realities, challenges, opportunities, successes, and needs. These perspectives shaped the development of this strategy.

Culture shift

The Hay River Health and Social Services Authority is entering a period that will be characterized by significant change. Effectively responding to these positive changes will require careful management of the change process, and a shift of culture to one that is nimble, responsive, and innovative. The changes on the horizon are planned and positive, but any change can be disruptive to people and process, and a strong change management approach will be needed.

System-wide changes in delivery

The Department of Health and Social Services, in efforts to continually improve the delivery of service across the NWT health and social service system, is moving toward consolidation of "back office" services such as purchasing/procurement and warehousing, information technology services, and contract management. This will change how the Hay River Health and Social Services administers its services, freeing up resources. However the transition will, without doubt, include challenges as processes are designed and implemented.

New health centre

A new health centre for Hay River is in progress, and due to be completed by 2015. The new health centre will provide an opportunity for HRHSSA to re-assess how it provides programs and services to the community. The new infrastructure is expected to make it easier to introduce new services in the region. For example, the new health centre will include a labour, birthing, recovery and postpartum (LBRP) room, which will provide the physical infrastructure HRHSSA will need to deliver a midwifery model of care for expectant mothers.

The transition to the new health centre will be complex, requiring the continuing seamless delivery of programs and services while completing a successful move to the new facility and its new systems.

Management and staffing

Management provides strong leadership through timely decisions, support of staff and a clear understanding of financial realities. As an organization, HRHSSA benefits from low turnover, resulting in a permanent staff complement that takes a broad and long term view of its role in the community. As a result, HRHSSA employees are able to provide a high quality of care by applying their knowledge of the full range of HRHSSA programs, the community, and its residents.

However, being able to recruit fewer than an optimal number of permanent staff—physicians, in particular—influences the Authority's ability to deliver services and affects continuity of care. Operating without permanent resident physicians since 2006, HRHSSA relies on locum practitioners (physicians and nurse practitioners) to deliver medical services. As a result, clients may see multiple practitioners, repeating their history to each. Fluctuations in the availability of practitioners hamper the Authority's ability to meet the high expectations of residents with respect to access to clinic appointments.

Access to programs

HRHSSA's programs and services can be difficult to navigate. Service delivery through several access points throughout the community is complicated by a lack of awareness among internal and external audiences of the services offered by HRHSSA. Combined with permanent staffing issues, these

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challenges have a trickledown effect that influence continuity of care, wait times and residents' ability to connect with the right service, at the right time, from the right provider. Specifically, there are issues with access to the following programs and services.

Mental Illness and Addictions: Residents suffering from mental illnesses, drug addictions, or dual disorders may need to leave the community for care, due to limited support resources in some areas.

Long-term Care for Seniors: As in other locations, the population overall is ageing. With a limited number of long term care beds in Hay River, the number of seniors requiring long-term care may soon result in seniors leaving the community to in order to get the care they need as they age.

Midwifery: On average, 65 women leave Hay River each year in order to deliver their babies because of the lack of a surgeon or a midwifery program in the community.

Communication

HRHSSA benefits from robust health promotion and outreach efforts that support illness prevention and wellness of residents through education and specialty clinics. These clinics work to improve access to specific services through outreach. There are also structures in place that support internal communication between senior management and front line employees. Processes, such as regular Public Administrator meetings, exist for the public to engage with the Authority. Opportunities to engage the community more extensively could be created through an advisory committee.

HRHSSA communicates extensively in English, but is less equipped to meet its requirement to communicate in other official languages, in particular French.

While HRHSSA regularly engages in communication and provides opportunities for the public to participate in meetings, messages may not be reaching intended target audiences. As a result there is a risk that the public's perceptions of how the Authority operates and the programs and services it provides are inaccurate, leading to misperceptions, decreased trust and residents that are disengaged from the health and social services system.

Community partnerships

HRHSSA has made the most of its limited resources by forming strong relationships with several external partners such as community service providers, DHSS, other Authorities and the Hay River Hospital Foundation to provide services to the community. However, there is a need for greater collaboration with other groups in the community to extend the Authority's reach especially to "hard to reach" residents. There is also an opportunity to collaborate with external partners, such as community government and local businesses, to jointly deliver programs and services, improve communications to ensure that accurate and timely information is available to the public, and to make Hay River a more attractive destination for prospective job seekers.

Sustainability

HRHSSA's long-term sustainability is influenced by the availability of consistent, multi-year funding for infrastructure, human resources and programs and services, as well as the restructuring of health care in the NWT. HRHSSA serves a relatively compact geographical area, and is in close proximity to communities like Hay River Reserve that fall under the jurisdiction of other Authorities. HRHSSA partners with other Authorities (such as the Deh Cho Health and Social Services Authorities) and other community organizations to deliver service to all residents in the area as they are required.

The way the public currently uses the system strains HRHSSA's sustainability. Residents access services to treat problems once they are acute rather than actively managing their own health and wellness or taking advantage of the health and wellness education and prevention. Combined with an ageing population and ongoing challenges addressing mental illness and addictions, the result is a high cost of operation for the Authority.

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Goals and Objectives

While the Hay River Health and Social Services Authority faces a unique context with many challenges, the Authority is optimistic and energized about the future and the potential and the opportunities it sees to work flexibly and innovatively to address the evolving health and social service needs in the Hay River region.

Within this context, and looking to maximize the opportunities inherent in the future, the HRHSSA has set the following seven goals, each with its own objectives and strategies:

1. **Program goal:** Provide integrated and client-focussed programs and services, delivered efficiently, that are accessible to all people in the Authority's service area, that result in improved overall health and wellness.
2. **Service goal:** Provide a client experience for internal and external stakeholders that builds trust and confidence in services and service providers of the HRHSSA.
3. **Communication goal:** Engage in dialogue with internal and external stakeholders to build trust, increase engagement and maintain and improve accountability.
4. **Resources goal:** Optimize the use of our (financial, human, and capital) resources for the benefit of our community.
5. **Staffing/human resource goal:** Maintain a full complement of competent and committed workers that provides the highest standard of practice and care for our community.
6. **Quality improvement and risk management goal:** Foster a risk management approach that allows people to operate effectively and deliver continuous quality improvements while maintaining and protecting the safety and interests of our clients and employees.
7. **Culture goal:** Foster a culture that is nimble, innovative, collaborative and creative in order to live our values and meet the needs of our stakeholders.

Legend
In the tables of goals and strategies that follow, the following abbreviations are used to identify the functions that either own or support each strategy:

CS	Client Services		MC	Medical Clinic
CEO	Chief Executive Officer		Mgrs	Managers
Com H	Community Health		M. Rec	Medical Records
Dept H	Department Heads		PA	Public Administrator
DHSS	Department of Health and Social Services		PR	Physician Recruiter
EA	Executive Assistant to the CEO		PWS	Public Works
Fin	Finance		QI	Quality Improvement
FP	Facility Planner		SMT	Senior Management Team
HR	Human Resources		Suprs	Supervisors
IT/IS	Information Technology/ Information Systems		THS	Territorial Health Services
LTC	Long Term Care		WG	Health Centre Working Group

Program goal

Provide integrated and client-focussed programs and services, delivered efficiently, that are accessible to all people in the Authority's service area, that result in improved overall health and wellness

In order to achieve this goal, HRHSSA will develop a chronic disease management program, a robust homecare program, a complement of permanent practitioners and stability in overall availability of permanent/locum practitioners. Additionally, achievement of this goal requires the right staff complement and skills in mental health and addictions, and a resolution to the issue of long term care beds. Navigation to appropriate programs and services, public education, and working with the community to help residents take personal responsibility for wellness will help HRHSSA move toward achieving this goal.

Strategies	Owner	Support	Objectives/Measures
Stabilize practitioner consistency			Decrease in inappropriate visits (10% decrease in CTAS 4 and 5 clients at the Emergency Room).
• Continue pursuit of practitioner recruitment strategy.	**PR**	**HR, SMT, PA, MC**	
• Increase percentage of repeat/return locums to 85%.	**MC, PR**	**HR, SMT, PA**	Decrease length of patient stays by 10% per year.
• Work with DHSS to rework locum contract and flexibility on restricted funding.	**CEO**	**THS Dir, DHSS DM**	Reduce outpatient department visits annually.
• Hire 9 permanent practitioners (4 physicians, 3 nurse practitioners, 2 midwives) by the time the new health centre is commissioned (September 2015).	**PR, HR**	**SMT, PA, MC**	Over long term, reduce clinic visits annually. Clinic visits will go up initially to coincide with the decrease in CTAS 4 and 5 clients at the Emergency Room.
• Establish midwifery program by the time the new health centre is commissioned (September 2015).	**CS, MC**	**HR, DHSS, CEO**	
Manage chronic diseases			Decrease mental health/ addiction counselling wait times by 10% annually.

• Develop chronic disease management plan that aligns with the NWT Department of Health and Social Services plan and model.
• Focus initially on mental health, renal, and diabetes chronic disease:
  • Develop a strategy to measure the number with these diseases on a quarterly basis
  • Develop a robust chronic disease management model
  • Develop a strategy to identify key chronic diseases that tax our resources (DM, COPD, renal D3, etc)
	MC Clinical Co-ordinator, Mgr Social Programs	**Medical director, Clinical Advisor, Social Programs**	Increase in number of partnerships initiated and active with external stakeholders in the delivery of programs and services.

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	Mgr Social Programs	SMT, Social Programs	
• Evaluate our own numbers, assess need, and expand beyond mental health, renal, and diabetes as appropriate.			
Long Term Care strategy	**LTC**		
Mental Health and Addictions strategy	**Mgr Social Programs**	**SMT, Social Programs**	
Address needs at most appropriate source			
• Increase health promotion with additional specialty clinics (outreach).	**Comm H**	**SMT, HR**	
• Develop useful case management to better serve the client (by supporting navigation to appropriate services).		**SMT**	
• Expand homecare program (hours, staffing).		**SMT, HR**	
• Promote and use/update website as source of information on service availability and access.	**IT/IS, PR**	**DHSS**	
• Participate with interagency group and other community stakeholders on community wellness plans.	**Comm H**	**SMT, HRHSSA reps**	
Match resources with needs/programs			
• Determine the core programs this authority needs to provide (ISDM) in order to meet community needs within existing resources.	**CEO**	**PA, SMT**	
• Work with DHSS to complete program review. Ongoing dialogue with respect to service delivery and funding allocation.		**DHSS, PA, SMT**	
• Encourage stakeholders and community to communicate and advocate for effective resourcing for HRHSSA core services.		**Community**	
Maximize existing resources			
• IT/IS will work with departments to ensure they know and maximize the capabilities of existing software.	**IT/IS, Dept Mgrs**	**SMT, Depts**	

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Client service goal

Provide a client experience for internal and external stakeholders that builds trust and confidence in services and service providers of HRHSSA

The Hay River Health and Social Services Authority strives for a relationship with its clients and stakeholders characterized by dialogue, trust, transparency and accountability. People who seek service from HRHSSA are often already vulnerable, hurting, unwell or needing help. In this environment, encountering a positive response and a client-centred approach very important, and can help clients feel they are well cared for. HRHSSA understands that clients do not have other places to turn for health and social service support. This places a higher responsibility and onus on the authority to deliver not only quality programs, but a quality experience.

Strategies	Owner	Support	Objectives/Measures
Client service training:			Increase in number of positive client comments received annually. Client complaints are reduced by 10% annually. Decrease in number of briefing notes related to service issues. Improvements from baseline on internal customer service survey.
• Establish client service program by March 31, 2014.	HR	LTC, Comm. H, SMT	
• 90% of all staff participate in client service training program by December 2014.	HR	Mgs, Supr	
• Provide client focussed training for all staff to train staff on how to deal with difficult people and how to provide good service. Ensure service expectations are clear. Review annually/as required.			
Measure internal and external client service satisfaction:			
• Develop an evaluative framework that can be undertaken by an external consultant group by Dec 2015: • The results of the evaluation are reviewed by April 2016 • A plan to address issues is in place by Jun 2016 • Offer staff and clients incentives to participate in surveys/evaluations.	QI	HR, Dept H	
• Develop and execute an internal client survey to establish a baseline. Resurvey annually. Tie to client service training.			
• Develop process for recording and tracking complaints and complements.			

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Communication goal

Engage in dialogue with internal and external stakeholders to build trust, increase engagement and maintain and improve accountability

Effective communication, internally and externally, supports every goal in the strategic plan. As HRHSSA enters a period of high change, internal communication will be critical to supporting a change management process and culture shift. External communication is critical in helping residents access services at the right time, and in the right place from the Authority. And education is necessary to engaging the community in taking responsibility for their personal wellness. Communication will focus on two way dialogue rather than a single direction distribution of information.

Strategies	Owner	Support	Objectives/Measures
Measure public perceptions:			
• Develop and implement external questionnaire to establish a baseline perception with respect to public/stakeholder communication.	QI	**EA, SMT, CEO**	Number of outreach public meetings held between the public and Senior Management. Level of attendance at public outreach meetings. Rate of participation by HRHSSA staff in external stakeholder forums like interagency groups. Residents report an increase in their feeling of being able to get information about happenings at the HRHSSA (from baseline) annually.
• Establish a HRHSSA report card to measure performance from the stakeholders' perspective.		**Dept H**	
Engage directly with community:			
• Seek opportunities for CEO or Senior Management to speak with stakeholder groups at their regular gatherings (i.e. Senior's Society Coffee Break).	EA	**CEO, SMT, PA, Community**	
Plan and implement a communication strategy:			

• Internal and external communication plans are in place by Sept 2013:
  • External communication plan
    o will support navigation and education in support of program goal
    o will include community outreach opportunities, with CEO/PA meeting with community groups
    o will include feedback loop to community
    o continued dialogue with staff on what community issues are, semi-annual CEO face-to-face meetings at department level
    o a survey of stakeholders to measure perceptions of ability to access information from or about HRHSSA.
	EA	**CEO, SMT, QI**	

Strategies	Owner	Support	Objectives/Measures
• Establish regular meetings with senior management staff and each department to ensure SMT and each department engage in dialogue on issues, plans, etc.	EA	SMT	
• A marketing plan is in place by April 2014.	PR	SMT, HR	
• A Facebook page is in place by April 2014.	PR	CEO, IT	

Resource optimization goal

Optimize the use of our financial, human, and capital resources for the benefit of our community, managing risk and pursuing continual quality improvement

Resource optimization is using existing financial, human, and infrastructure (capital) resources most effectively and efficiently in support of providing service to clients and achieving strategic priorities and goals. In order to achieve this, core services will be defined, and a resource framework developed to allocate resources to meet those core needs. This, in itself requires us to access current resources, and a plan to maximize the use of them. For example, using technology to best advantage to share information and streamline processes. In order to optimize existing resources staff will receive training and direction on how to plan for and use financial, human, and capital resources. This includes understanding risk, what is acceptable risk, what is not, and expectations regarding staff's role in addressing risk while ensuring continuous quality improvement.

Strategies	Owner	Support	Objectives/Measures
Align resources with programs and services:			Meet program goals within budget each fiscal year.
• Funds are allocated in accordance with core programs and services (ISDM) as currently defined each year.	Fin	SMT, Mgrs, DHSS	Each department has an annual operational plan in place and it is reviewed quarterly.
• Complete a core needs assessment to define the resources required by each service area to identify the gaps (zero based budgeting).			Client charts are consolidated.
• Work with Department of Health and Social Services to resolve budget tensions.	CEO	Fin, PA	Full implementation of existing technology by departments as per IT/IS strategy.

Support effective ISDM management:		
• Create departmental operational plans. Implement longer timelines for operational plans, reviewed quarterly to ensure goals are being met. Tie reviews to quarterly variance reports. Hold accountability and planning sessions twice/yr.	**Fin**	**SMT, Mgrs**
• Provide education and training to managers and supervisors in financial planning and on budgeting, HR processes, and how to best use (IT and capital) resources for program delivery.		**HR, SMT, IT**
• Make routine evaluation of results (dashboard/score card) visible to all.	**QI**	**SMT, Mgrs**
Maximize use of existing technology:		
• Expand current resources by using technology (as identified in IT/IS plan).	**IT/IS**	**HR, QI, RM, M. Rec, SMT**
• Identify technology training needs for staff.		
• Digitize client files.		

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Staffing goal

Maintain a full complement of competent, committed workers that provides the highest quality of care and education for our community

Staffing is pivotal in HRHSSA's ability to deliver programs and services and achieve all of the priorities and goals in this strategic plan. In particular in this planning cycle, staff will be called upon to embrace and manage change as the Authority commissions a new health centre and evolves its culture to a lean, innovative, and responsive organization that optimizes resources and delivers a high and increasing level of access to service. Change, and its inherent uncertainty, can be unsettling and stressful. This goal, and the strategies to achieve it, recognize the need to maintain and grow the Authority's staffing complement, equip them with the tools they need to succeed, and manage the process of change.

Strategies	Owner	Support	Objectives/Measures
Employee retention and recruitment:			Achieve vacancy rates no greater than 3% each year for actively recruited positions.
• Pursue stability in locum pool and complement of permanent practitioners in support of program goal.	**PR**	**HR**	
• Look at other sources of funding for staff recruitment fairs.	**HR, PR**	**Community, SMT**	Achieve an average length of service greater than seven years every year.
• Address why people leave before they leave – actively seek them out.	**HR**	**SMT**	Annual employee satisfaction surveys show improvements against the baseline.
• Establish employee satisfaction survey.			
• Establish a Wellness Committee and program.		**All depts and cttees**	

• Create and use performance management toolkit incorporating:
  ○ Attendance management
  ○ Return to work
  ○ Stay at work
  ○ Wellness.
		Dept H	80% of staff successfully complete pertinent modules in Learning Management System.
			
			Decrease in overtime by 5% annually.

• Understand and implement best practice HR strategies toward enabling a positive culture.		**SMT, Mgrs, Suprs**	Decrease in sick time by 5% annually.
Employee communication and engagement:			In increase in participation in wellness and health prevention/promotion
• Involve staff in planning sessions.	**SMT**	**Mgrs, Suprs**	

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			programs.
• Establish regular meetings with senior management staff and each department to ensure SMT and each department engage in dialogue on issues, plans, etc.	EA	SMT	
• Have department head meetings on review of HRHSSA report card.	QI	Dept H	
Training and competency development			
• Develop area specific training to enhance job satisfaction (for areas without PDI).	HR	SMT, Dept Mgrs	
• Establish corporate training/orientation to populate Learning Management System (LMS).		IT, Dept Mgrs	
• Require all staff to meet or exceed competency standards for their positions (through LMS).			
• Cross train employees within "Like" environments. Establish a job bank for enabling cross training and understanding other parts of the Authority.		SMT, Mgrs	
• Develop staff enrichment/succession planning program by Sept 2013.			
Support workload and role balance:			
• More permanent physicians and nurse practitioner positions filled.	PR	SMT	
• Have open discussions with staff regarding their job descriptions and if they accurately reflect their current job and tasks.	HR	Mgrs	

Commissioning of health centre goal

The HRHSSA's new health centre is successfully commissioned with a minimum of operational disruption

Commissioning a new health centre in Hay River is one of the major milestones within the timeframe of this strategic plan. It is a major undertaking that will need significant attention and focus, while the Authority continues to deliver ongoing programs and services. Strong planning will ensure a smooth transition to the new health centre for staff, clients, and stakeholders. This goal, and in particular the strategies to achieving it, will evolve as more information about the new health centre its systems, and its commissioning become available.

Strategies	Owner	Support	Objectives/Measures
Develop/implement a commissioning plan that considers each of the following areas:			
• Off-site services (social programs, public health, home care, environmental health, finance/HR, etc.)	FP	PWS	Minimum impact for community and stakeholders
• Staff training/needs	HR	WG	
• Policies and procedures.	Directors	Mgrs	
• Change of business process	Commissioning Team	Dept H	
• Programs	Directors	Mgrs	
• Long Term Care	DHSS		
• Technology and systems	FP	Consultant	
• Furniture and equipment	Consultant		
• Internal and external communication	Commissioning Team	PA	
• Decommissioning plan for HH Williams	PWS	HRHSSA	

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Culture goal

Foster a culture that is nimble, innovative, and collaborative; a culture that ensures resources are optimized, clients are safe, and staff are empowered to be sensitive and responsive to change and the needs of stakeholders

Culture shift starts at the top. Senior Management must lead by example and become role models for the attitudes and approaches that epitomize the new culture. Senior Management must use the quality improvement and risk management plans as their guide, living and leading these initiatives. While policies and procedures detail the "rules", incentives and support are required to encourage staff to evolve their approach to one that is more innovative. An environment where staff feel supported to risk – within an defined risk framework – and problem-solve with no reprisals will be key to achieving the culture shift.

Strategies	Owner	Support	Objectives/Measures
Build and maintain morale:			
• Develop staff appreciation plan by September 2013.	**HR**	**Mgrs**	Staff bring forward improvement suggestions. Increase in incident reporting. Task teams and committees are cross functional, have a senior management sponsor, and sustained attendance from key departments. Achieving results against indicators on balanced scorecard. Number and value of WCB claims, law suits, and complaints.
• Promote social activities to enhance work environment.	**Social Cttee**	**SMT, Mgrs, Suprs, Employees**	
• Intentional team-building in departments.	**HR**	**Mgrs**	
Model and celebrate desired culture:			

• Recognize employees for specific things that go above and beyond:
   ○ What to recognize (SMT provides direction)
   ○ How to recognize (HR provides direction).
	Mgrs	**HR, SMT**	

• Develop strategy for senior management to show by example by living the culture/values.	**SMT**	**HR**	
Change management in preparation for new health centre:			
• Establish a change management process to enable a smooth transition to our new health centre.	**WG**	**HRHSSA**	
• Establish a framework for culture change to provide a roadmap/foundation for change	**CEO**	**External**	

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and collaboration. Incorporate lean thinking.				
• Empower employees by providing guidelines/policies.	**Dir,**	**Mgrs**		

Encourage innovation through implementation of QI and RM plans:

• Help staff understand risk so they can identify it.	**QI**	**Dirs, Mgrs, Suprs**	
• Develop risk management framework that enables employees to take acceptable risks by October 31, 2012.	**QI**	**Mgrs**	
• Empower staff to operate within the framework.	**Mgrs**	**QI**	
• Complete a risk audit by external consultant by March 31, 2014. Report non-confidential results transparently.	**QI**	**SMT, EA**	
• OH&S committee will be functioning and will work to ensure HRHSSA meets regulated requirements.	**OHS Co-chairs**	**QI, SMT**	
• Foster and promote internally that every staff has the ability to be a risk manager; empower staff to proactively address risk.	**QI**	**Mgrs**	
• Develop a program making it safe for employees to report potential risks.		**HR, Mgrs**	
• RM teams review programs for risk.		**Mgrs, Dept H**	

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Appendix

Stakeholders consulted

Representatives from all HRHSSA departments were given the opportunity to provide input and perspectives on the context in which the Authority operates, the challenges it faces, and how it currently performs with respect to the four pillars of the territorial Health and Social Services system: wellness, access, sustainability and accountability.

Internal stakeholders (HRHSSA departments)

- Michael Maher, Public Administrator
- Acute Care
- Community Counseling and Healthy Families
- Dialysis
- Finance
- Home Care
- Human Resources
- IT Services
- Laboratory and X-Ray Services
- Long-Term Care and Supportive Living Services
- Maintenance
- Materials Management (Supply, Processing and Distribution)
- Medical Clinic
- Medical Records
- Nursing
- Patient Care
- Quality Improvement
- Rehabilitation
- Social Services
- Support Services (housekeeping, laundry, food services)

External stakeholders

A broad range of external stakeholders was invited to provide input and perspectives on the context in which the Authority operates, the challenges it faces, and how it currently performs with respect to the four pillars of the territorial Health and Social Services system: wellness, access, sustainability and accountability. While not all invited stakeholders were able to participate, the following provided input:

- Andrew Cassidy, Mayor, Hay River
- Chad Orr, Sergeant, RCMP
- Debra Beck, Hospital Foundation Board

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- Janet Marie Fizer, Chamber of Commerce
- Jennifer Norwegian, Katlo'deeche First Nation
- Scotty Edjerton, Katlo'deeche First Nation
- Jill Taylor, Hay River Interagency Group
- Jocelyn Grant, Hay River Youth Centre
- Kandace Jameson, Hay River District Education Authority
- Kathy Alton, Fort Providence Health Centre
- Larry Ring, Owner/Pharmacist, Ring Pharmacy
- Michael Richardson, SAO, Town of Hay River
- Pravina Bartlett, Council for Persons with Disabilities
- Robert Bouchard, MLA, Hay River North
- Ross Potter, Fire Chief, Hay River Fire Department
- Hay River Seniors' Society

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