



STRATEGIC PLAN
2007 - 2010

May 2007

Our Vision

“Healthy people in healthy communities.”

Our Mission

“Working together to provide quality health services and to promote and support healthy living in diverse communities.”

Our Values

- Accountability and Responsibility to sustain the future of our health care resources.
- Respect, compassion, and Dignity for all people, regardless of cultural, social and economic factors.
- Trust and Integrity in everything we do.
- Appropriate Access to Quality Health Services: the right service at the right time in the right place by the right provider.
- Creativity and Innovation that support learning, partnerships and an ongoing commitment to progress.
- Safe and supportive environment for all.

STRATEGIC DIRECTION – Goal 1: Improved Access To Quality Health Services

PRAIRIE NORTH HEALTH REGION OBJECTIVES	STRATEGIC PRIORITY and ACTION	LEAD	TIME FRAME	OUTCOME INDICATOR	RESULTS/ EVALUATION	
<p>1. Provide responsive, coordinated primary health care</p>	<p>1.1 An Integrated Primary Health Care Network</p> <p>1.1.1 Support the community in needs identification in their efforts and areas for development (i.e. transportation) through focus group participation</p> <p>1.1.2 Support and link communities in their efforts toward sharing community information for health improvement</p> <p>1.1.3 Strengthen and build partnerships with other providers/sectors including Regional Intersectoral Committee (RIC), KidsFirst, School Plus, Acquired Brain Injury (ABI) Program, Youth Criminal Justice Act (YCJA) Initiatives</p> <p>1.1.4 Strengthen and develop formal communication and relationships between Aboriginal communities/organizations and PNHR</p>	<p>Dir. Primary Health Care</p>	<p>- Target Jan 2008</p> <p>- Ongoing</p> <p>- Ongoing</p> <p>- Ongoing</p> <p>- Ongoing</p>	<p>- # of communities involved in complete process/# of communities approached</p> <p>- # of community descriptions posted on Internet</p> <p>- # of communities with web links to Internet</p> <p>- ABI Coordinator hired</p> <p>- YCJA position hired</p> <p>- Completed</p> <p>- # of First Nations Bands represented on Primary Health Care Teams/# /First Nations within geographical area</p> <p>- Aboriginal HT funds submission</p>	<p>- Submission completed</p>	
	<p>1.2 An increased percentage of the PNHR population has access to Primary Health Care Teams</p> <p>1.2.1 Maintain and strengthen Primary Health Care Teams (utilize outreach team effectiveness tool)</p> <p>1.2.2 Integrate Emergency Medical Services (EMS) health human resources into Primary Health Care teams and services</p> <p>1.2.3 Conduct five-year reviews for Primary Health Care sites and implement recommendations for improvement</p> <p>1.2.4 Ensure public representatives on front line PHC team</p>		<p>Dir. Primary Health Care</p>	<p>- Ongoing annually</p> <p>- Nov 2006 to 2010</p> <p>- Ongoing</p> <p>- Ongoing</p> <p>- Annually</p> <p>- Goodsoil 2010</p> <p>- Annually</p>		<p>- % of RHA population with geographic proximity to PHC teams</p> <p>- PHC Plan update included with annual Operational Plan</p> <p>- Tool in place</p> <p>- # of teams with EMS involvement/total # of teams</p> <p>- # of outreach initiatives</p> <p>- Report complete</p> <p>- % of recommendations implemented before next review</p> <p>- Annual membership review</p> <p>- # of frontline PHC teams with public representatives/total # of teams</p>

PRAIRIE NORTH HEALTH REGION OBJECTIVES	STRATEGIC PRIORITY and ACTION	LEAD	TIME FRAME	OUTCOME INDICATOR	RESULTS/ EVALUATION
<p>Provide responsive, coordinated primary health care (cont'd)</p>	<p>1.2.5 Develop Primary Health Care site for North Battleford (Frontier Mall)</p>	<p>VP Primary Health Services</p>	<p>- June 2007</p>	<p>- Site operationalized</p>	
	<p>1.2.6 Combine Population Health Unit with NB Primary Health Care Site (Frontier Mall).</p>	<p>Dir. Population Health/Dir. Primary Health Care</p>	<p>- June 2007</p>	<p>- Co-location of PHC & PHS on one site - Existence of leadership & frontline NB PHC team</p>	
	<p>1.3 Timely, appropriate access through waitlist management for all Primary Health Care services</p>	<p>Dir. Population Health</p>	<p>- Sept 2007</p>	<p>- Report with recommendations received from framework - Knowledge transfer regarding outcomes of other project to manage waitlists</p>	
	<p>1.3.1 Participate in Health Quality Council Technical Efficiency Fund Project and implement recommendations (SLP/ECP services)</p>				
	<p>1.3.2 Establish guidelines regarding 'reasonable access' for each Primary Health Care Program</p>	<p>Dir Population Health/Dir Primary Health Care/Dir Mental Health & Addictions Services/Dir Sask. Hospital</p>	<p>- Sept 2007</p>	<p>- # program guidelines completed/total # programs</p>	
	<p>1.3.3 Expand Regional Telehealth services to support Primary Health Care sites</p>	<p>Dir Emergency Services/Dir Primary Health Care</p>	<p>- Dec 2007</p>	<p>- Goodsoil established/operating</p>	
	<p>1.3.4 Assess need for telehealth in all primary care site</p>		<p>- Dec 2008</p>	<p>- # of times telehealth accessed for consultation for (1) clinics or (2) continuing education or (3) consults</p>	
<p>2. Improve chronic disease management</p>	<p>2.1 A Chronic Disease Management Program supports clients across the Region</p>				
	<p>2.1.1 Support and participate in HQC Chronic Disease Management Collaborative</p>	<p>Dir Primary Health Care</p>	<p>- Ongoing</p>	<p>- # of physicians participating in Collaborative/total # physicians in practice - # of CDM clients serviced/ baseline</p>	

PRAIRIE NORTH HEALTH REGION OBJECTIVES	STRATEGIC PRIORITY and ACTION	LEAD	TIME FRAME	OUTCOME INDICATOR	RESULTS/ EVALUATION
<p>Improve chronic disease management (cont'd)</p> <p>3. Reduce wait times for surgical procedures</p>	<p>2.1.2 Integrate HQC Framework into existing cardiac and diabetes programs (i.e. Heart-to-Heart, Diabetes Education) into Chronic Disease Management Program (CDM)</p>		<p>- Dec 2007</p>	<p>- Framework developed - Staff reporting relationship restructured</p>	
	<p>2.1.3 Prioritize program expansion i.e. additional CDs based on evidence from Regional Health Status Report, other determinants of health (see appropriate page/reference)</p>		<p>- Dec 2007 - Ongoing</p>	<p>- CDM plan following receipt and review of Health Status report - CDM a regular agenda item on PHDC Steering Committee - implementation of stroke strategy in Lloydminster - Prioritization of CDM actions based on Health Status Report - # of diseases included in CDM program/# of diseases listed and ultimately included in CDM programming - # of best practices at targets i.e. beta blockers, blood pressures, smoking</p>	
	<p>3.1 Surgical capacity is maximized at PNHR's Regional and District hospitals</p>	<p>VP Integrated Health Services</p>		<p>- Out migration surgical rates of PNHR population – SSCN data - In migration surgical rates</p>	
	<p>3.1.1 Expand visiting surgical specialty programs at all three surgical sites (gynecology, surgical)</p>		<p>- Dec 2008</p>	<p>- # of surgical speciality programs operational by sites</p>	
	<p>3.1.2 Influence physician referral patterns to promote referrals within Region</p>		<p>- Dec 2008</p>	<p>- # of physician referrals within Region</p>	
	<p>3.1.3 Achieve 365 days coverage for core surgical specialties at Battlefords Union and Lloydminster Hospitals</p>		<p>- July 2007</p>	<p>- # of gaps in 24/7 surgical site coverage</p>	
	<p>3.1.4 Create a Regional Surgical Services Committee to optimize surgery capacity with Prairie North surgeons anaesthetists, OR mangers and surgical assistants</p>		<p>- Dec 2007</p>	<p>- Committee membership and frequency</p>	
	<p>3.2 Surgical patients obtain surgery within the SSCN targeted time frames</p>	<p>BUH Nurse Manager</p>			
	<p>3.2.1 Participate in the Saskatchewan Surgical Care Network</p>		<p>- Ongoing</p>		
	<p>3.2.2 Monitor Surgical Information System for wait times</p>		<p>- Dec 31, 2007</p>	<p>- SIS implementation at surgical sites</p>	

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4. Reduce wait times for diagnostic services	<p>4.1 Timely and appropriate Diagnostic Imaging services are provided to the Region's residents</p> <p>4.1.1 Participate in provincial RIS/PACS system implementation to achieve timely results reporting</p> <p>4.1.2 Support Magnetic Resonance Imaging (MRI) at Lloydminster Hospital site, in partnership with East Central Health (ECH) Alberta</p> <p>4.1.3 Monitor timelines and appropriateness of radiology services</p>	VP Integrated Health Services	<p>- Dec 2008</p> <p>- Dec 2008</p> <p>- Ongoing</p>	<p>- Implementation of RIS/PACS</p> <p>- Monitor turnaround times for results reporting</p> <p>- Monitor timelines</p> <p>- # of patients as a % of agreed on target for specialized computed tomography scans</p> <p>- # of exams as a % of agreed on target for specialized computed tomography</p>	
5. Improve emergency medical care	<p>5.1 Appropriate Utilization of Emergency Rooms</p> <p>5.1.1 Explore alternative Primary Health Care access for patients with non-urgent needs</p> <p>5.1.2 Educate all stakeholders on appropriate utilization of emergency room services</p> <p>5.1.3 Promote and increase the use of HealthLine/Health Link by PNHR residents (Assess the impact of HealthLine)</p> <p>5.1.4 Explore utilization of Mental Health/Addictions specialists in the Emergency Rooms at Lloydminster</p> <p>5.1.5 Explore utilization of Nurse Practitioners in facilities that provide emergency room care 24/7</p> <p>5.2 Accessible and Responsive Emergency Medical Services</p> <p>5.2.1 Continue recruitment of First Responders to programs</p> <p>5.2.2 Continue to recruit and retain First Responders through regular training sessions</p> <p>5.2.3 Support appropriate staffing standards for rural ambulance providers based on volumes and strategic placement of EMS services</p>	<p>VP Integrated Health Services</p> <p>Dir Emergency Services</p>	<p>- Mar 2007</p> <p>- Ongoing</p> <p>- Ongoing</p> <p>- Mar 2008</p> <p>- Mar 2008</p> <p>- Ongoing</p> <p>- Ongoing</p> <p>- Mar 2007</p>	<p>- # of ER visits per site</p> <p>- # and % of visits to ER by CTAS score</p> <p>- # of calls to HealthLine and HealthLink from Lloydminster for PNHR</p> <p>- Presence/absence of alternate service providers at sites that provide emergency care 24/7</p> <p>- Presence/absence of alternate service providers at sites that provide emergency care 24/7</p> <p>- % of communities/sites with First Responders over total # of communities</p> <p>- # of First Responders within the Region</p> <p>- Completion of two training programs annually</p> <p>- Monitor EMS call volumes and response times</p>	

PRAIRIE NORTH HEALTH REGION OBJECTIVES	STRATEGIC PRIORITY and ACTION	LEAD	TIME FRAME	OUTCOME INDICATOR	RESULTS/ EVALUATION
6. Improve hospital, specialized services and long-term care	<p>6.1 A strong Renal Dialysis Program functions in PNHR</p> <p>6.1.1 Explore the feasibility of a Satellite Dialysis Unit at the Meadow Lake facility in consultation with Saskatchewan Renal Initiatives and Saskatchewan Health</p> <p>6.1.2 Expand hour of operation in the BUH Satellite Dialysis Unit</p> <p>6.2 Telehealth supports clients clinics and consultation throughout the Region</p> <p>6.2.1 Incorporate Telehealth technology into ambulatory care settings where care is provided 24/7</p> <p>6.2.2 Enhance ambulatory care programs by increasing specialty clinics at all Telehealth sites in PNHR</p>	<p>VP Integrated Health Services</p> <p>Dir Emergency Services</p>	<p>- Jan 2008</p> <p>- Mar 2007</p> <p>- Mar 2008</p>	<p>- Feasibility review will be submitted to SMT</p> <p>- %of dialysis clients served/ on wait list</p> <p>- Operationalize Maidstone site</p> <p>- # ambulatory care patients utilizing Telehealth technology</p> <p>- # of speciality clinics occurring by Telehealth in Region</p>	
7. Improve service delivery across the continuum of care	<p>7.1 Vulnerable adults are supported by specialized programs in designated Regional sites</p> <p>7.1.1 Expand Adult Day Program in the communities of Lloydminster, North Battleford & Meadow Lake</p> <p>7.1.2 Establish 6-bed Transition Unit at Lloydminster Hospital</p> <p>- Evaluate 6 bed Transition Unit at Lloydminster Hospital</p> <p>7.1.3 Explore need for special unit at BDCC to serve high needs cognitively impaired adults.</p> <p>- Explore feasibility of above now</p> <p>7.1.4 Implement dysphagic management in all long-term care sites</p> <p>7.1.5 Complete 60-bed supportive housing initiative in Lloydminster in partnership with East Central Health</p> <p>7.1.6 Complete redevelopment of 60 long-term care beds at Dr. Cooke Extended Care Centre, in partnership with ECH</p> <p>7.2 An integrated system-wide service plan supports community clients</p> <p>7.2.1 Evaluation of single entry patient system as coordination of community services</p> <p>7.2.2 Options to collaborate with tertiary centres to facilitate acute discharges to PNHR sites</p>	<p>Dir Continuing Care</p> <p>Dir Long-Term Care</p>	<p>- Sept 2007</p> <p>- Jan 2007</p> <p>- Done</p> <p>- Jan 2007</p> <p>- June 2007</p> <p>- Jan 2008</p> <p>- June 2009</p> <p>- Jan 2007</p> <p>- Ongoing</p>	<p>- # of requests for day program by community</p> <p>- Unit operational at Lloydminster Hospital (achieved)</p> <p>- Completed</p> <p>- Feasibility assessment completed</p> <p>- %/# of LTC residents who received care over # of referrals</p> <p>- Project completed on time and on budget</p> <p>- Project completed on time and on budget</p> <p>- Evaluation completed</p> <p>- Protocol between tertiary centres and PNHR developed</p>	

PRAIRIE NORTH HEALTH REGION OBJECTIVES	STRATEGIC PRIORITY and ACTION	LEAD	TIME FRAME	OUTCOME INDICATOR	RESULTS/ EVALUATION
Improve service delivery across the continuum of care (cont'd)	7.2.3 Enhance Cancer Outreach Program (COPS) in collaboration with Saskatchewan Cancer Agency and Alberta Cancer Board			- Project complete	
	7.2.4 Examine Lloydminster COPS services in collaboration with Saskatchewan Cancer Agency and Alberta Cancer Agency's two primary sites	- Acute Care Directors (3)	- June 2007	- Standardized COPS policies and procedures in place within PNHR	
	7.2.5 Implement Home Care program enhancements to provide additional services to acute care and mental health patients 14 days post discharge		- Annually	- # of readmissions to acute care and mental health by home care clients within 30 days	
	7.3 Volunteer and spiritual care is provided and supported at all levels of health service delivery	VP Corp Services/ VP	- Ongoing	- Ongoing	- % of LTC facilities with Spiritual Services Program
	7.3.1 Structure spiritual and volunteer service programs at Region's LTC facilities	Integrated Health Services/ Manager	- Ongoing	- Ongoing	- % of LTC facilities with Spiritual Services Program
	7.3.2 Conduct workshops/in-services for staff, physicians, clergy and volunteers	Volunteer & Spiritual Services	- Dec 2007	- # of training events	
	7.4 A Regional Palliative Care Program provides comprehensive end-of-life care	Dir Continuing Care/ Volunteer Coordinator	- June 2007	- Review completed	
	7.4.1 Complete a regional review of palliative services				
	7.5 All PNHR long-term care facilities are focused on practices which promote quality of life for LTC residents and their families	Dir Continuing Care	- Dec 2008	- Dec 2008	- Report outlining best practices in LTC
	7.5.1 Investigate best practices in LTC		- Dec 2007 - Ongoing	- Dec 2007 - Ongoing	- Report outlining best practices in LTC
	7.5.2 Promote an 'aging in place' philosophy		- Dec 2008 - Ongoing	- Dec 2008 - Ongoing	- average length of stay in supportive housing
	7.5.3 Examine the impact of the "Eden Like" Philosophy on the current programs and regional LTC infrastructure		- Annually	- Annually	- # of Eden-like principles in place
	7.6 A Regional medical social work program supports vulnerable clients	Dir of Social Work	- Mar 2008	- Mar 2008	- # of consults to each program
7.6.1 Expand medical social work support to rural facilities, long term care facilities, Home Care and Community Health clients					
8. Provide quality maternal/child services	8.1 Mothers and their infants are supported through a comprehensive continuum of care	Dir Population Health			

PRAIRIE NORTH HEALTH REGION OBJECTIVES	STRATEGIC PRIORITY and ACTION	LEAD	TIME FRAME	OUTCOME INDICATOR	RESULTS/ EVALUATION
<p>Provide quality maternal/child services</p>	<p>8.1.1 Provide timely and appropriate assessment and intervention for children with developmental delays, through Early Childhood Services</p>	<p>Dir Population Health</p>	<p>- Dec 2007</p>	<p>- length of time from referral to first therapeutic appointment</p>	
	<p>8.1.2 Utilize universal newborn screening tool in the Region's obstetrical units</p>		<p>- Ongoing</p>	<p>- # of births screened/total # of births</p>	
	<p>8.1.3 Review post natal support program if required</p>		<p>- Sept 2007</p>	<p>- Breastfeed maintenance rate</p>	
	<p>8.1.4 Examine the feasibility of Implementing the Managing Obstetrical Risk Efficiently (MORE) Obstetrical program a) Lloydminster Hospital b) Battlefords Union Hospital c) Meadow Lake Hospital</p>		<p>- Jan 2007</p>	<p>- Feasibility study completed</p>	
	<p>8.1.5 Support appropriate referrals of at-risk families to Parent Mentoring Program, KidsFirst, Early Childhood Therapeutic Outreach Team</p>		<p>- Ongoing</p>	<p>- # of people attending/# of referrals</p>	
	<p>8.1.6 Target prevention and intervention strategies for Fetal Alcohol Spectrum Disorder (FASD)</p>		<p>- Mar 2007</p>	<p>- Strategy is developed</p>	
	<p>8.2 An Early Childhood Therapeutic Team serves complex needs children and their families</p> <p>8.2.1 Utilize Telehealth technology to provide paediatric services regionally</p>		<p>- Mar 2007</p>	<p>- # of Telehealth pediatric consultations conducted</p>	
<p>9. Strengthen mental health and addiction services</p>	<p>9.1 A comprehensive Mental Health and Addictions Service focuses on prevention, responsiveness and quality</p>				<p>- 5 year Operation Plan including indicators</p>
	<p>9.1.1 Complete Mental Health and Addiction Services Program review a) Develop 5-year plan for Mental Health & Addiction Services in PNHR b) Action recommendations resulting from program review</p>		<p>- 2007</p>		
	<p>9.2 Psychiatric rehabilitation and forensic services at Saskatchewan Hospital are rejuvenated in collaboration with Saskatchewan Health</p>				
	<p>9.2.1 Examine within Functional Program for Saskatchewan Hospital (utilize Bland Report)</p>		<p>- 2007 - 2008</p>		
	<p>9.2.2 Redevelop the Saskatchewan Hospital organizational design and culture</p>			<p>- Incidents of involvement of SHNB Strategic Planning Committee and Health Workplace Committee</p>	

STRATEGIC DIRECTION – Goal 2: Effective Health Promotion and Disease Prevention

PRAIRIE NORTH HEALTH REGION OBJECTIVES	STRATEGIC PRIORITY and ACTION	LEAD	TIME FRAME	OUTCOME INDICATOR	RESULTS/ EVALUATION
10. Improve promotion of health and disease prevention	10.1 Population Health Promotion is intrinsic to PNHR programs and services				
	10.1.1 Collaborate with internal and external partners, communities and the Region's residents to improve conditions/determinants of health that support positive well-being.	Dir. Primary Health Care	- Ongoing	- # of community connections & activities	
	10.1.2 Develop a Health Status Report of PNHR	Medical Health Officer	- Mar 2007	- Report completed	
	10.1.3 Prioritize programming in accordance with Health Status Report	Medical Health Officer	- Sept 2007	- Priority list developed	
	10.1.4 Implement Population Health Promotion Plan focusing on: a) Mental well-being b) Community food security c) Decreased substance use/abuse d) Active communities e) At-risk groups e.g. FASD, Addicted Youth, sedentary lifestyle		- Ongoing	- Plan in place - Annual plan updates - % of planned strategies implemented - # dedicated HP FTE	
	10.1.5 Develop an internal team (PHC Team Facilitator, PHP Coordinator, Staff Development Coordinator, Representative Workforce Coordinator & Community Development Coordinator) to promote healthy living within the workforce	Dir Primary Health Care/Dir Population Health/Dir Health Quality Programs	- Mar 2008	- Plan in place - # strategies implemented/# strategies planned	
	10.1.6 Evaluate International Travel Immunization Program (immunizations) to determine effectiveness and develop plan	Dir Population Health	- Mar 2008	- Expenses/revenue - # of travel consultations	
10.1.7 Develop a health workplace food policy	VP Develop./ Operations & VP Primary Health Services	- Dec 2006	- Policy exists		

PRAIRIE NORTH HEALTH REGION OBJECTIVES	STRATEGIC PRIORITY and ACTION	LEAD	TIME FRAME	OUTCOME INDICATOR	RESULTS/ EVALUATION
<p>Improve promotion of health and disease prevention (cont'd)</p> <p>11. Improve the health of northern and aboriginal communities</p>	<p>10.2 Responsive Population Health programs and services support PNHR residents</p> <p>10.2.1 Implement recommendations from Public Health Nursing review:</p> <p>a) Ensure/enhance lactation support</p> <p>b) Deliver a comprehensive immunization program</p> <p>10.2.2 100% public facility inspections</p> <p>10.2.3 Enforce Tobacco Control Act</p> <p>10.2.4 Regionalize harm reduction program</p> <p>a) Lloydminster</p> <p>b) Rural sites</p>	<p>Dir Population Health</p> <p>Dir Population Health</p> <p>Dir Population Health</p>	<p>- Ongoing</p> <p>- Ongoing</p> <p>- Ongoing</p> <p>- Annually</p> <p>- Annually</p> <p>- Dec 2008</p> <p>- Dec 2009</p>	<p>- Post-natal Discharge Program in place</p> <p>- 2 year old cohort rate (# of 2 year olds immunized/# 2 yr olds</p> <p>- # travel immunizations- baseline</p> <p>- % of staff receiving influenza immunizations</p> <p>- % persons age 65 yrs and over receiving influenza immunizations</p> <p>- # inspections completed/# facilities</p> <p>- # facilities in compliance with TCA/# facilities</p> <p>- # of used needles exchanged/# clean needles distributed</p> <p>- # clients served to form baseline</p>	
	<p>11.1 Collaborative working relationships with aboriginal communities and organizations are strong and effective</p> <p>11.1.1 Strengthen communication and relationships between aboriginal communities/organizations and PNHR</p> <p>11.1.2 Strengthen provision of health services to aboriginal community clients, acute care patients, LTC residents and their families</p> <p>a) Evaluate liaison program</p> <p>b) Enhance culturally sensitive strategies</p>	<p>SMT</p> <p>VP Corp Services & Dir HR</p>	<p>- Dec 2007</p> <p>- Dec 2008</p> <p>- Mar 2007</p> <p>- Mar 2008</p>	<p>- Plan in place acceptable to partners</p> <p>- Presence/absence of Aboriginal participation on Community Advisory Network</p> <p>- Evaluation complete</p> <p>- % of complaints that are due to cultural sensitivities</p>	

STRATEGIC DIRECTION – Goal 3: Retain, Recruit and Train Health Providers

PRAIRIE NORTH HEALTH REGION OBJECTIVES	STRATEGIC PRIORITY and ACTION	LEAD	TIME FRAME	OUTCOME INDICATOR	RESULTS/ EVALUATION	
12. Improve utilization and availability of health human resources	12.1 PNHR's Health Human Resources Plan defines current and future recruitment and retention strategies	Dir HR & VP Corp Services	- Jan 2008	- Identification of key leadership positions		
	12.1.1 Develop succession planning to ensure continuity of key leadership positions within PNHR		- Ongoing	- Process in place (performance evaluation tool)		
	12.1.2 Assess current gaps and future needs in Region's Health Human Resources		- Mar 2007	- Results included Health Human Resource Planning		
	12.1.3 Develop community profiles to highlight Regional employment and lifestyle opportunities	Dir HR	- Ongoing	- Community profiles completed		
	12.1.4 Promote healthcare professions to elementary students		- June 2007	- # of contacts with elementary students		
	12.1.5 Identify and promote job shadowing opportunities		- Ongoing	- # of job shadows undertaken		
	12.1.6 Promote health services volunteerism to high school students		- Ongoing	- # of high school volunteers		
	12.1.7 Support health providers in working to full scope-of-practice		SMT	- Ongoing		- # of LPNs working to full scope-of-practice
	12.1.8 Explore staff mix options to enhance service delivery i.e. psychometricians, SLP		- Mar 2008	- # of alternate positions/the # of long term vacancies		
	12.1.9 Promote and support student practicums through partnerships with educational institutions	SMT	- Ongoing	- # of student practicums occurring annually - # of university and college partnerships - Participation in HSP-Net		
	12.2 Sufficient, appropriate physician resources meet Regional service needs	SMT	- Dec 2008	- Vacancy rate		
	12.2.1 Develop a Regional Physician Resource Plan		- Annually	- Endorsement of plan by PNHR MACs		
	a) Present the plan to Medical Advisory Committees in The Battlefords, Lloydminster and Meadow Lake		- Ongoing	- Plan is approved		
	12.2.2 Continue to support and expand Municipal Health Holdings model in partnership with urban and rural communities		- Ongoing	- Increase # of sites based on model		
12.2.3 Implement Regional physician orientation process	VP Medicine	- Sept 2006	- # of orientation sessions annually/# of new physicians			

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<p>Improve utilization and availability of health human resources</p>	<p>12.2.4 Implement regional medical staff rules, regulations and policies</p>	<p>VP Medicine</p>	<p>- Dec 2007</p>	<p>- Project complete</p>	
<p>13. Develop Prairie North Health Region into a learning organization</p>	<p>13.1 Create workplaces that encourage life long learning and development 13.1.1 Establish a comprehensive Regional Staff Development Plan which includes: a) Needs Assessment b) Strategies around key educational areas - Program critical competencies - Workplace competencies (i.e. PART, TLR, OH&S) - Leadership competencies\ c) Supportive policy framework d) Communication</p> <p>13.2 A comprehensive Employee Scheduling System enables best use of human resources 13.2.1 Collaborate with SAHO to develop regional employee scheduling system 13.2.2 Evaluate the decentralized scheduling model 13.2.3 Consolidate ESP scheduling systems in The Battlefords and Lloydminster to one database</p>	<p>VP Corp Services & Dir HR & Dir Health Quality Programs</p> <p>Dir Payroll/ Benefits/ Scheduling</p>	<p>- Mar 2007 - June 2008</p> <p>- Mar 2009 - As per SHIN project specs</p> <p>- Ongoing - July 2007</p>	<p>- Plan in place - Policies developed - Communication plan developed - Staff satisfaction survey shows improvement</p> <p>- Developed/implemented - Feedback (i.e. use and error analysis)</p> <p>- Evaluation complete - Project complete</p>	
<p>14. Develop representative work places</p>	<p>14.1 PNHR's workforce is representative of the Region's demographics 14.1.1 Explore and facilitate opportunities for Aboriginal employment 14.1.2 Development an Aboriginal self identification package 14.1.3 Incorporate career pathing processes for employees 14.1.4 Promote educational/employment partnerships with Aboriginal stakeholders 14.1.5 Continue Aboriginal Awareness Training for all staff 14.1.6 Utilize exit interviews to identify program issues</p>	<p>VP Corp Services & Dir HR</p>	<p>- Ongoing - Ongoing - Feb 2007 - 2007 - Ongoing - Ongoing - Ongoing - Ongoing</p>	<p>- % of Aboriginal employees (futuristic) - Completion of package - Retention rates of new hires - % of uptake on career pathing opportunities - Incremental increase in # of partners - # of employees trained/targeted</p>	
<p>15. Create healthier, more effective work places</p>	<p>15.1 Prairie North Health Region is a preferred health employer 15.1.1 Institute a workplace development plan</p>	<p>VP Corp Services/</p>	<p>- Ongoing</p>	<p>- Review and develop recommendations</p>	

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Create healthier, more effective work places (cont'd)	a) Expand implementation of Health Workplace Committees	Dir Health Quality Programs	- Ongoing	- # of sites with Workplace Wellness Committees	
	b) Ensure opportunities for staff and union input into healthy workplace strategies	Dir HR/Dir Health Quality Programs	- Ongoing	- Decreased sick time and absenteeism - Reduced amount of WCB time lost claims	
	c) Evaluate effectiveness of healthy workplace strategies (i.e. FISH)		- Ongoing	- Increase in staff satisfaction (i.e. surveys)	
	15.1.2 Strengthen the Regional Employee Recognition and Appreciation Program	Dir Health Quality Programs	- Jan 2007 - Ongoing	- # of recognition events - # of increase or changes to recognition programs	
	a) Make employees aware of the program and policies				
	b) Explore opportunities for ongoing staff recognition			- % of complaints that are due to cultural sensitivities	
	15.1.3 Enhance internal communication with staff, physicians, volunteers and unions	Communica tions Officer	- Ongoing	- Newsletter implemented	
a) Implement monthly staff newsletter	CEO	- Ongoing	- # of sites/programs where CEO staff meetings held - # of staff attending CEO meetings		
b) Maintain annual staff meeting/reporting by CEO					

STRATEGIC DIRECTION – Goal 4: A Sustainable, Efficient, Accountable and Quality

Health System

PRAIRIE NORTH HEALTH REGION OBJECTIVES	STRATEGIC PRIORITY and ACTION	LEAD	TIME FRAME	OUTCOME INDICATOR	RESULTS/ EVALUATION
16. Ensure quality, effective health care	16.1 Allocation of resources is effective and evidence-based				
	16.1.1 Conduct operational reviews to enhance efficiency and effectiveness in the system	SMT	- Annually - Ongoing	- Review completed	
	a) Analyse on 'cost per bed' and 'care per resident' statistics for long-term care		- Jan 2008	- # of recommendations implemented	
	b) Complete operational review of rural sites to ensure equity (where appropriate) in staffing levels and funding		- Mar 2008	- # of recommendations implemented	
	c) Implement recommendations for Diagnostic Imaging and Pharmacy as appropriate				
	16.1.2 Enhance Health Information and statistical reporting	VP Corp Services/ Manager Perform.	- Ongoing	- # of programs with reportable centralized data	
	16.1.3 Implement Ambulatory Care coding and abstracting	Measure. VP Finance/ Info Mgmt & Dir of Info Tech	- 2007/08/09	- Project complete	
	16.2 Information technology supports and enhances service delivery				
	16.2.1 Analyse SHIN Helpdesk reports to evaluate staffing levels and allocation of IT human resources		- Ongoing	- Service level indicators	
	16.2.2 Expand & enhance staff training and IT education in Regional training labs		- Ongoing	- # participants per class - # of classes offered	
	16.2.3 Develop consistent effective Information Management security and operational policies and standards for all IT services in the Region		- June 2007	- Security, policies and standards in place	
	16.2.4 Establish a project/equipment prioritization plan that aligns with the overall IT and business objectives	VP Finance/Info Mgmt	- Annual update	- IT plan complete then monitored annually for compliance	
	16.2.5 Establish the regulations, policy and procedure database on the intranet		- Mar 2007	- # of policies/procedures posted	
16.3 Provincial information systems are utilized					
16.3.1 Expand Admission, Discharge & Transfer (ADT), Pharmacy and Laboratory systems to:	VP Finance/ Info Mgmt & Dir of Info Tech	- Mar 2007 - Ongoing	- Regional progress # of installs - Provincial measures		

PRAIRIE NORTH HEALTH REGION OBJECTIVES	STRATEGIC PRIORITY and ACTION	LEAD	TIME FRAME	OUTCOME INDICATOR	RESULTS/ EVALUATION
Ensure quality, effective health care (cont'd)	<ul style="list-style-type: none"> a) Lloydminster b) Meadow Lake c) Maidstone d) Turtleford 			- Done	
	16.3.2 Implement provincial RIS/PAC software solutions in the regional hospitals		- As per provincial plan	- Implementation completed as per provincial and regional plan	
	16.3.3 Partner with SHIN to develop the provincial Shared Client Index (SCI) project, the Surgical Information System (SIS)		- 2007	- # of installs	
	16.3.4 Partner with Sask. Health to develop and implement provincial MDS Home Care tools and software		- Ongoing	- # of installs	
	16.3.5 Implement "provider registry" in partnership with Sask. Health and professional regulatory bodies to strengthen security of electronic health records as per provincial plan		- 2006/08	- # of installs	
	16.4 Client-specific provincial electronic health records are used regionally				
	16.4.1 Implement standardized applications (i.e. laboratory, home care) in a centrally hosted Sask. Health environment	VP Finance/ Info Mgmt & Dir of Info Tech/VP Corp	- June 2007	- # of installs	
	16.4.2 Implementation (common view) access to health providers and off-site medical clinics/health centres	Services/ Manager Perform.	- June 2007	- # of installs	
	16.4.3 Address physician clinic systems within our Region	Mgmt	- Jan 07/11	- # of installs	
	16.5 A multi-year Information Management and Technology Plan supports Regional service delivery	VP Finance/ Info Mgmt & Dir of Info Tech		- Review, update and publish	- Evaluate install and IT projects to determine if needs are met
	16.5.1 Incorporate planning for technology and IT services in capital development projects				
	a) Evaluate wireless technologies for implementation in sites requiring wireless services		- 2006/07	- Evaluation complete	
	b) Convergence to IT phone and call system		- 2006/07	- -Project complete	
	c) Research and set up a convergence plan for voice over internet (VOIP)		- Dec 2008	- Project complete	
	d) Establish secure environmentally controlled data centre(s) for the Region		- 2006/08	- Project complete	

PRAIRIE NORTH HEALTH REGION OBJECTIVES	STRATEGIC PRIORITY and ACTION	LEAD	TIME FRAME	OUTCOME INDICATOR	RESULTS/ EVALUATION
<p>Ensure quality, effective health care (cont'd)</p> <p>17. Ensure appropriate governance, accountability and management for the health sector AND sustain publicly funded and publicly administered health care</p>	<p>16.6 PNHR Material Management is consolidated and standardized</p> <p>16.6.1 Continue with implementation of Regional standards for supplies and equipment</p> <p>16.6.2 Partner and build relationships with other Health Regions and SAHO in group-purchasing</p> <p>16.6.3 Enhance supply and mail distribution processes to rural and urban areas</p>	<p>VP Develop. & Operations</p>	<p>- Ongoing</p> <p>- June 2007</p> <p>- June 2008</p>	<p>- # of standardized projects</p> <p>- # of purchases done with partnerships</p> <p>- Process complete</p>	
	<p>17.1 PNRHA maintains a balanced budget</p> <p>17.1.1 Closely plan, monitor and control budgeted expenditures</p> <p>17.1.2 Review and enhance electronic budgeting processes in the Region</p> <p>17.1.3 Improve variance reporting and accountability for managers</p>	<p>VP Finance/ Info Mgmt.</p>	<p>- 2006/07</p> <p>- Ongoing</p> <p>- Ongoing</p> <p>- 2006/07</p> <p>- Ongoing</p>	<p>- Surplus/deficit</p> <p>- # of people trained</p> <p>- # of users</p> <p>- # of reports received</p>	
	<p>17.2 Adequate resources are secured for Lloydminster through partnership with East Central Health (ECH) and Alberta Health and Wellness</p> <p>17.2.1 Maintain timely communication through the established collaborative committees</p> <p>17.2.2 Funding review from both provinces</p> <p>17.2.3 Advocate for ongoing support for Lloydminster health services</p> <p>17.2.4 Sustain major capital infrastructure and maintain funding</p>	<p>SMT</p>	<p>- Ongoing</p>	<p>- Funding from Alberta vs. spending for Lloydminster</p> <p>- # of committee meetings per year</p> <p>- # of new dollars invested</p>	
	<p>17.3 Efficient and safe infrastructure supports effective health services delivery</p> <p>17.3.1 Maintain and implement a Regional multi-year Capital Management Plan</p> <p>a) Complete Maidstone Integrated Facility Project</p> <p>b) Plan for rejuvenation and expansion of Lloydminster Hospital</p> <p>c) Plan for rejuvenation and expansion of Battlefords Union Hospital</p>	<p>VP Develop. & Operations</p>	<p>- Fall 2007</p> <p>- Ongoing</p> <p>- Mar 2007</p> <p>- Mar 2007</p>	<p>- Complete review of \$ targeted</p> <p>- Maidstone capital project is completed on time and on budget</p> <p>- Approved functional plan for funding by SK Health and Alberta Health & Wellness</p> <p>- Approved functional plan for funding by SK Health</p>	

PRAIRIE NORTH HEALTH REGION OBJECTIVES	STRATEGIC PRIORITY and ACTION	LEAD	TIME FRAME	OUTCOME INDICATOR	RESULTS/ EVALUATION
Ensure appropriate governance, accountability and management for the health sector AND sustain publicly funded and publicly administered health care (cont'd)	<ul style="list-style-type: none"> d) Plan for redevelopment of Sask. Hospital in partnership with Sask. Property Management (SPM) and SK Health e) Access space needs for future facility-based and community-based programs and services. 17.3.2 Partner with SK Health and communities to fund capital infrastructure renovations and redevelopment 17.3.3 Maintain and implement a Regional multi-year Capital Equipment Plan <ul style="list-style-type: none"> a) Partner with SK Health, Foundations, Auxiliaries, and community groups to support equipment purchases 		<ul style="list-style-type: none"> - May 2007 - May 2007 - Ongoing - Ongoing 	<ul style="list-style-type: none"> - Approved functional plan - # of infrastructure approvals - # submitted dollars approved 	
18. Communicate appropriately and effectively with internal and external stakeholders	<p>18.1 Communication linked to the Strategic plan</p> <ul style="list-style-type: none"> 18.1.1 Communicate the strategic plan throughout the organization and to the stakeholders 18.1.2 Communication support activities to make programs and services of PNRHA more visible internally and externally 	Communications Officer			
19. Ensure Continuous Quality Improvement (CQI) is integral throughout the organization	<p>19.1 Health service delivery risks are managed in a comprehensive proactive framework (i.e. CQI)</p> <ul style="list-style-type: none"> 19.1.1 Participate in the Canadian Council of Health Services Accreditation (CCHSA) 19.1.2 Maintain effective Quality of Care program 19.1.3 Utilize evidence-based resources such as Cochrane Library, Saskatchewan health Information Resources Partnership (SHIRP), etc. 19.1.4 Communicate CQI initiatives to internal and external stakeholders 	Dir Health Quality Programs/ SMT	<ul style="list-style-type: none"> June 2007 - 2007 - Ongoing - Ongoing 	<ul style="list-style-type: none"> - Accredited 2004 to 2007 - # of client contacts with CQQ re: concerns - Newsletter in place 	
20. Ensure Patient Safety is a critical focus in all health services programming	<p>20.1 Promote a culture of patient safety within all programs</p> <ul style="list-style-type: none"> 20.1.1 Utilize Institute of Safe Medication Practices (ISMP) protocols within all appropriate programs 20.1.2 Patient safety framework developed 20.1.3 Utilize quality audits to identify and address potential and actual gaps in patient safety 	Dir Health Quality Programs/ SMT	<ul style="list-style-type: none"> - Ongoing - Jan 2007 	<ul style="list-style-type: none"> - Completion of framework 	

PRAIRIE NORTH HEALTH REGION OBJECTIVES	STRATEGIC PRIORITY and ACTION	LEAD	TIME FRAME	OUTCOME INDICATOR	RESULTS/ EVALUATION
Ensure patient safety is a critical focus in all health services programming	20.1.4 Strengthen Regional infection control program through allocation of resources, Regional policy development, and ongoing staff education	Medical Health Officer	Mar 2007	- Policy manual exists	
	20.2 Risks are managed in a comprehensive, proactive framework	Dir Quality Health Programs			
	20.2.1 Monitor patient incidents, near misses, and medical misadventures				
	20.2.2 Conduct root cause analysis on reportable critical incidents		- Ongoing		
	20.2.3 Develop strategies to prevent future occurrences				
	20.2.4 Support Regional Occupational Health & Safety (OH&S) Program a) Staff Immunization b) SEDS				
	20.2.5 Develop, maintain, communicate and test emergency preparedness plan	SMT/Dir Emergency Services/ Medical Health Officer	- Jan 2007 - Ongoing	- Completion plan - Complete roll-up including education, policies and testing	
	a) Pandemic Plan	Medical Health Officer/VP Integrated Health Services	- Jan 2007 - Ongoing	- Pandemic plan documented as per provincial guidelines - # of external partners	
	b) IT Disaster Recovery Plan	Dir IT/VP Finance & Info Mgmt	- June 2007 - Ongoing	- Written IT disaster recovery/business continuity plan in place - # of communication initiatives to staff	
	20.2.6 Develop, maintain, communicate and test site emergency preparedness	Facility Site Managers	- June 2007 - Ongoing	- Written IEP plan for the site using standardized regional format - % of updated fan out lists	
20.3. Patient Confidentiality and Privacy is integral to all services and programs	Dir Health Quality Programs				
20.3.1 Implement Health Information Protection Act (HIPA) and its supporting regulations			- % of updated fan out lists		
Communicate and educate Regional staff, physicians and volunteers about HIPA and its impact on service delivery			- Ongoing		