

## Strategic Plan 2020–2022

**Mission:** Building a safe and caring community, through quality programs and services

**Vision:** A caring and supportive community assisting its people

**Values:** SUPPORT

**S** - Significant and Strategic contribution to our community

**U** - Understanding our diverse population and their needs

**P** - Progressive and Proud – Building a community of design while respecting our past









**P** - Positive – Providing comfort, support and encouragement



**O** - Opportunity – Offering opportunities to educate and empower

**R** - Respect for all

**T** - Teamwork – As leaders we adapt, manage change and strive to improve quality


**Dimensions:**



	<b>Population Focus</b>	Work with my community to anticipate and meet our needs
	<b>Accessibility</b>	Give me timely and equitable services
	<b>Safety</b>	Keep me safe
	<b>Worklife</b>	Take care of those who take care of me
	<b>Client-Centered Services</b>	Partner with me and my family in our care
	<b>Continuity</b>	Coordinate my care across the continuum
	<b>Appropriateness</b>	Do the right thing to achieve the best results
	<b>Efficiency</b>	Make the best use of resources

Strategic Area/Goals	Objectives	Outcome Measures	Targets	Responsibility	Timeframe	Actions
<b>Strategic Area #1 Maximizing the Full Potential of our Workforce</b>						
<p>Goal 1: All programs will have appropriate staffing to meet their program needs (Right people, right equipment, right skills)</p>  	<p>Obj 1: We will support staff in their roles by supplying equipment and resources necessary to complete their work requirements and solicit their input on improvements</p>	<p>Staff indicate they have materials, supplies and equipment need to do their work.  <u># 7 Worklife Pulse Tool</u>  June 2020, 21,22</p> <p>Staff indicate they are able to make improvements to how their work is done.  <u>#5 Worklife Pulse Tool</u>  June 2020, 21, 22</p>	<p>90% of respondents report they agree or strongly agree they have the materials, supplies and equipment to do their work.</p> <p>90% of respondents report they agree or strongly agree they are able to make improvements to how they do their work.</p>	<p>Lead: E.D.  Home Care Coordinator,  Home Support Coordinator</p>	<p>Ongoing</p>	<p>Monitor Workforce changes (AHS, Industry standards, environmental changes)</p> <p>Technology Assessment and Planning</p> <p>Pursue staff input (staff meetings, concern forms)</p>
	<p>Obj 2: Team members have access to competencies training in a variety of settings (online, in-person, textbook, mentoring)</p>	<p>Field Staff Compliance with AHS Continuing Care Standards  Credentials, Qualifications and competencies are verified, documented and up-to-date (Staff Training Tracking data and Personnel Files 2020, 21, 22)</p> <p>Staff indicate they receive the training they need to do their job well</p>	<p>90% Compliance with AHS CC. Standards Audit review</p> <p>90 % of staff agree or strongly agree the receive</p>	<p>Lead: Home Services Coordinator  H.S. Coordinator  On-call RN  QI Committee  E.D.</p>	<p>December 2020 and ongoing</p>	<p>Pursue variations in development and implementation of education access and availability of training (staff portal, on-line, mentoring, etc.)</p> <p>External/Internal Trainers in place</p> <p>Use of technology to meet educational standards</p>

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		#9 Worklife Pulse Tool (2020, 2021, 2022)	the training they need to do their job well.			Personnel Files Updates
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	<p>Obj 3: We will support the individual learning pursuits of both field and administrative staff</p> 	<p>Staff indicate they receive the training they need to do their job  <u>#9 Worklife Pulse Tool, June 2020, 21, 22</u></p> <p>Professional Development Plans devised for administrative staff</p> <p>Field staff applicable to pursue additional training (such as HCA certification) will be assessed for supports from FCSS such as tutoring, practicum hours registration fees and recommendations brought forth.</p> <p>Staff indicate they have good opportunities to develop their career.  <u>#10 Worklife Pulse Tool (2020,21,22)</u></p>	<p>90% of Staff strongly Agree or Agree they have adequate training</p> <p>100% of Administrative staff have PD plan and are pursuing training</p> <p>If qualified / applicable, 2 field staff per year will be supported in their HCA Certification. (this has potential to include tuition fees, mentoring, tutoring, proctoring etc.)</p>	<p>Lead: E.D. Home Services Coordinator</p> <p>HR Committee Finance Committee</p>		<p>Performance reviews will include PD Planning for all staff and goals documented</p> <p>Budget implications for PD supports submitted to Board for field and administration</p>
	<p>Obj 4: We will ensure an appropriate and optimal mix of skill level and experience of staff, to ensure</p>	<p>Staff indicate their team provides top-quality patient care always <u># 26 Worklife Pulse Tool, June 2020, 21, 22</u></p>	<p>90% of staff indicate their team provides top-quality patient care</p>	<p>Lead: Home Services Coordinator</p>		<p>Succession Planning Review of current staff compliment and projections of future needs Analysis of Staff Turnover Exit Interviews</p>

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	safe, effective and client centred service delivery 					
	Obj 5: We will pursue technological advancements to maximize staff efficiencies 	Implementation of automated timesheet system	Software/Process put into operation	Lead: Financial Controller Payroll Accountant ED	2021	Research available options  Recommendations brought to Board of Directors  Budget Implications/Considerations
		We will train staff and implement "Connect Care" Program and Protocols	Training and Implementation as per AHS Direction and Timeline	Lead: E.D. Accreditation Coordinator	2022	Source Equipment if necessary Budget Implications Training




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**Strategic Area #2 Healthy and Engaged Team that Feels Valued**

Goal 1: 	Obj 1: Staff are recognized for their contributions	Team members indicate the recognition initiatives in place are of value to them and offer insight into other areas that would enhance their workplace experience February 2020	85% of staff indicate that specific programs (COLA, Health Benefits Performance Bonus, Learning and Wellness) are somewhat to very important to them	Lead: ED	2020	Development and implementation of Workplace Financial Wellness Report
	Obj 2: Strategies are developed and/or enhanced to support team members manage their personal well-being	Team members are polled to gain insight into organizational activities and culture that offer them support in their pursuit of personal well-being.	# of activities or initiatives recommended, researched and implemented	Lead: ED	2020, 21 22	Wellness Survey (including financial Wellness) 2020 Learning & Wellness Fund Staff Wellness Committee
		Staff indicate they usually, or always look forward to going to work #28 Worklife Pulse Tool 2020 – 22  Staff indicate they are overall satisfied to very satisfied with their job. #29 Worklife Pulse Tool 2020-23  Field Staff Turnover Rate of 8% or less	85 % of staff indicate they usually or always look forward to going to work  85% of staff indicate they are satisfied to very satisfies with their job  8% of field staff leave FCSS for other positions of equal description	Lead: E.D. Home Services Coordinator	Ongoing	Staff Scheduling  Wage Scales reviews  Wellness Survey  Wage Scale Comparisons Financial Wellness Survey
	Obj 3: Review of employee benefits package	Recommendations brought forth to board of directors for adoption		Lead: Financial Controller Payroll Acct. ED	2021	Benefits reviews including Health, RRSP etc.

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**Strategic Area #3 Demonstrated Commitment to Excellence in Client Centered Care (based on evidence)**



<p>Goal 1: Client and family representatives are regularly engaged to provide input and feedback</p>  	<p>Obj 1: Client Advisory Council established and in operation</p>	<p>The development and implementation of a client/family advisory council and project specific committees as needed. (focus groups)</p>	<p>Advisory Council in operation 2021</p>	<p>Lead: Board and Administration E.D. Accreditation Coordinator Admin Support QI Committee</p>		<p>Terms of Reference Developed</p> <p>Recruitment of members</p> <p>Regular meetings established</p> <p>Third party involvement if necessary</p>
	<p>Obj2: We will have an open, transparent and respectful relationship with each client and/or their family</p>	<p>Clients indicate they or their family representative can contact FCSS staff when needed. # 5 Client Satisfaction Survey</p> <p>Clients indicate that when they have concerns/compliments they feel they have been heard and changes (if necessary) made #16 Client Satisfaction Survey</p>	<p>90% of clients indicate they or their family can contact FCSS staff when needed.</p> <p>85% of clients indicate they have been heard and changes made.</p>	<p>Lead: Home Care Coordinator Home Support Coordinator Reception</p>	<p>Ongoing 2020 -22</p>	<p>Focus Groups</p> <p>Easily accessed compliments/concern forms</p> <p>Adherence to timely response policies</p> <p>Service Exit Interviews</p>
	<p>Obj 3: Seek and implement efficiencies in Budget Projections as</p>	<p>Initiate 3-year funding model</p> <p>Health Care Surplus Review</p>		<p>2020</p> <p>Ongoing</p>	<p>Lead: Financial Controller Payroll accountant ED</p>	<p>3-year funding model Projections and completion Research payment options (debit, credit)</p>


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	well as client billing and payment options	Implementation of Debit payment system		2020		Recommendations to board
	Obj. 4: We will review and where applicable improve and update our policies and procedure to ensure adherence to AHS C.C. Standards	<i>Continuing Care Standards Audit (timeline to be determined by AHS)</i>	Attainment of CC Standards Audit Pass	Lead: Home Services Coordinator E.D. Home Support	2020 December	Interpretation of standards Development of processes and evidence to support
	Obj.5 We will review and where applicable improve our policies and procedure to ensure adherence to Accreditation Canada Audit	Receive Qmentum Status	Qmentum Status Achieved	Lead: Accreditation Coordinator and E.D. FCSS Admin Staff Field Staff, clients QI Members Accreditation Coordinator/Consultants	Oct 2021	All standards met Evidence Binder established Policy review Ongoing monitoring/indicators Preparation for Accreditation audit Oct 2021





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**Strategic Area # 4 Uncompromising Quality and Safe Program designed by our clients, families, team members and partners**

<p>Goal 1: Client and Community programs and services that meet the needs of the community</p> 	<p>Obj. 1: We lead community consultation regarding current improvements, deletions, and development of new programs</p>	<p># of Community Needs Assessments Completed</p> <p># of adaptations/adjustments to programs</p> <p># of unique/new programs created</p> <p>Reporting of outcomes measures for FCSS programs (annual report)</p>	<p>Family programming needs assessment</p> <p>Transportation Assessment</p> <p>Additional Needs Assessments as Required</p> <p>85% positive response to measured outcome) in accordance with FCSS outcomes)</p>	<p>Lead: Executive Director Program Coordinator</p>	<p>Completion 2020</p> <p>Completion 2021-22</p>	<p>Online Survey</p> <p>Data Analysis</p> <p>Recommendations</p> <p>Funding Allocations</p> <p>Interagency Meeting</p>
		<p>Stakeholders (other agencies and community partners) indicate that FCSS increases awareness of local need</p> <p>Stakeholders indicate FCSS facilitates effective and efficient use of resources (avoids duplication and addresses gaps in services)</p>	<p>90% of stakeholders surveyed indicate that FCSS increases awareness of local need</p> <p>90% of stakeholders surveyed indicate FCSS is effective and efficient with use of resources</p>	<p>Lead E.D. Program Coordinator</p>	<p>Completion 2021</p>	<p>Online Survey</p> <p>Interagency Meetings</p> <p>Transparent Communication of Programs/Services and Funding Allocations</p>
	<p>Obj 2: We will utilize technology to simplify and</p>	<p>Updated and revamped website that provides detailed program and service information,</p>	<p>New website</p>	<p>E.D. Program Coordinator</p>	<p>Completed 2021</p>	<p>Staff and community member review of current website</p>

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	streamline our access, reliability and predictability of our services and mitigate issues brought forth	while encouraging user engagement  Increased Social Media Followers Compliance with AHS contract expectations <ul style="list-style-type: none"> <li>- Accept/decline service auth with in 2 hrs or receiving</li> <li>- Service delivered within time frame specified by CM</li> </ul> We will ensure less than 2% of missed visits are vendor driven	Increase Facebook followers to 1000 by 2023 <i>(Current 2019 886, therefore averaging 38 additional followers per year)</i>  Seek opportunities for virtual visits and monitoring.  95 % (both)  2% or less of total visits are missed due to staff error	Home Services Coord Home Support Coord. Q I Committee		Research and evaluation of similar agencies websites  Research Available Software (Zoom, Teams etc.)
	Obj 3: We will enhance Home Care Client Safety and quality through active monitoring and development of plans for improvement.	Staff will indicate that senior managers are committed to providing high-quality care (#18 Worklife Pulse Tool 2020, 21, 22)	85% of staff indicate managers are committed to high quality care	Lead: Home Services Coordinator E.D.	Ongoing 2020-22	
		Staff will comply hand hygiene protocol and audits (Monthly)	90% compliance per staff completing hand hygiene monthly audits	Lead Hand Hygiene Auditor  Home Care Coordinator	Ongoing 2020-22	Hand Hygiene Audits Rimoka and Community  Training Awareness

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		Clients indicate they and their visitors are informed of infections and how to control them (#5 Personal Care Client Satisfaction Aug)	90% of clients indicate they and their visitors are informed about infections and how to control them	Lead: Home Care Coordinator Home Support Coordinator	Ongoing 2020-22	Staff Training  Promotion/Signage  PPE Equipment and Training
		Clients indicate FCSS educates and supports them in fall prevention (#12 Client Satisfaction Survey Aug 2020-23)	95% of clients indicate fall prevention is provided	Lead: Home Services Coordinator	Ongoing Measures	Fall Prevention Audits in Community Client Home Promotion/Awareness
		Staff related medication errors are kept at 6% or less in relation to # of clients (reported 1/4 rly)	Maintain 6% of staff medication errors per total MAP clients in each ¼	Lead: Home Services Coordinator E.D. QI committee	Ongoing	Monitoring and Recording Data for submission to QI
	Obj 4 We will improve FCSS program and services safety through proactive identification of risks and mitigation of same	Hazard assessments of existing and new FCSS programs	Evidence of assessments reporting and recommendations (QI Minutes)	Lead: ED Program Coordinator Home Services Coordinator QI Committee	Ongoing 2020, 21, 22	

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	<p>Obj 5 We will augment our workforce with vibrant volunteers that offer community and personal based services</p>	<p>Develop a Recruitment and Retention Strategy for Volunteer Base</p> <p>Stakeholders indicate FCSS sufficiently promotes and recognizes volunteerism in the community</p>	<p>85% of stakeholders indicate FCSS promotes and recognizes volunteerism</p>	<p>Lead: Program Coordinator</p>	<p>Ongoing 2020, 21, 22</p>	<p>Training and Development Research of current volunteerism trends and information</p> <p>Volunteer Training Opportunities to Volunteer Week Celebration Recognition</p>
		<p>Hazard Assessments completed by Volunteers</p>	<p>Evidence of Assessments, reporting and recommendations (QI Minutes)</p>			