KHSC IACP: 2021-22														
Board priorities:	Redevelopment	HIS	Access to care	Financial resilience	Staff resilience	Performance						Accountability		
STRATEGIC DIRECTIONS	GOALS	2024 OUTCOMES	2021-22 OBJECTIVES	TACTICS	INDICATORS	TARGET	Target Justification	RED	YELLOW	GREEN	EXEC	Board Reporting Committee	MRP commentary	
1. Ensure quality in every patient experience	Make quality the foundation of everything we do	KHSC has a robust culture of quality improvement and cost efficiency is part of our daily work	Implement a virtual health service design framework.	TBD	% of the accreditation Canada Telehealth standards are met	75%	Internally set	<50%	50-74%	>= 75%	Carter/Fitzpatrick	Patient Care & Quality Committee	K. Kennedy	
			Improve access to care by meeting monthly elective activity volume targets.	TBD	Diagnostic, cancer & elective activity volumes meet monthly targets (target: 100%)	100%	Internally set	< 60%	60 - 79%	>= 80%	Ilse	Patient Care & Quality Committee	R. Ilse	
			KHSC is compliant with all Accreditation Canada Required Organizational Practices.	TBD based on Accreditation readiness plan	Indicator = a % compliance; include R/Y/G performance corridor	100%	Internally set	< 60%	60 - 79%	>= 80%	Carter	Patient Care & Quality Committee	G. Miller	
			Reduce hospital-acquired pressure injuries	Implement F22 Quality Improvement Plan work plan	Rate of hospital-acquired pressure injuries (target: 8% or less)		Ontario hospital acquired pressure injury benchmark	>10%	>8% and <10%	<=8%	llse/McDonald	Patient Care & Quality Committee	L. Wakelin	
		KHSC benchmarks as a high performer amongst Ontario teaching hospitals		Recover COVID costs	COVID Incremental Cost Recovery	100%		<60%	>60% and <75%	>75%	Bansal	People, Finance & Audit Committee	A. Bansal	
				Recover Loss of Revenue: 1) recover elective volume-based activity revenue 2) recover non- elective volume-based activity revenue	Achieve pre-COVID position by March 31	100%	Incremental Cost Recovery	<60%	>60% and <75%	>75%	Bansal	People, Finance & Audit Committee	A. Bansal	
				Operating expenses equal budget & funded activity	HSAA/MSSA conditions met	100%	Monthly volume revenue hit the pre-covid level	<60%	>60% and <70%	>70%	Bansal	People, Finance & Audit Committee	A. Bansal	
			Build long-term capital strategy	Review medical equipment market strategy to secure best value	Board endorses RFP for managed equipment services Y/N	TBD	Operating expenses equal revenue	No = 0	Blank = in progress	Yes = 1	Bansal	People, Finance & Audit Committee	A. Bansal	
	Lead the evolution of patient- and family-centred care	Patients and families are full partners in our innovation, quality improvement and design initiatives	Evolve patient engagement practices to successfully sustain a culture of Patient & Family-Centred Care.	Co-develop, with patients and staff, patient engagement guiding principles and an online PFCC portal to support consistent, purposeful patient partnership in alignment with principles.	Y/N: Prroject to complete Guiding Principles of Patient Engagement and PFCC Portal meets quarterly milestones	100%	Internally set	No = 0	Blank = in progress	Yes = 1	Bardon	Patient Care & Quality Committee	E. Bardon	
	Create the space for a better experience	Our communities are inspired to provide philanthropic support for our master facilities plan	Issue a Request for Qualifications and complete Project-Specific Output Specifications.	As per redevelopment project milestones	Issue RFQ, complete PSOS	100%	Internally set	No = 0	Blank = in progress	Yes = 1	Wells-Pearce	People, Finance & Audit Committee	K. Wells-Pearce	

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2. Nurture our passion for caring, leading and learning	Foster a safe, healthy, innovative working environment that inspires and motivates the people who work, learn and volunteer at KHSC		work experience.	Engagement Survey and action planning, Access, Diversity, Equity & Inclusion strategy and action plan	Engagement action plans & Access, Diversity, Equity & Inclusion strategy in place Y/N	100%	Internally set	No = 0	Blank = in progress	Yes = 1	Carlton	People, Finance & Audit Committee	M. Mulima
			Implement an accountable performance management approach across the KHSC leadership team	Engagement Survey and action planning, Access, Equity, Diversity & Inclusion strategy and action plan	Engagement action plans & Access, Equity, Diversity & Inclusion strategy in place Y/N	100%	Internally set	No = 0	Blank = in progress	Yes = 1	Carlton	People, Finance & Audit Committee	M. Mulima
		KHSC has a strong culture of safety	Sustain our reduced number of workplace violence incidents	As per F22 QIP work plan.	Incidents reported per quarter (target: <153)	153/ Qtr	Internally set	>160	154-160	<=153	Carlton	People, Finance & Audit Committee	J. Noonan
3. Improve the health of our communities through partnership and innovation	walls that delivers complex, acute and	We have one, accessible, information system that supports a coordinated patient journey	Enable clinical transformation through digital care by kicking off our Health Information System project design phase.	Begin design phase, complete governance structure and resourcing plan.	Governance structure and resourcing plan in place Y/N	100%	Internally set	No = 0	Blank = in progress	Yes = 1	Carter, Fitzpatrick, Gamache-O'Leary	Governance	D. Lorrichio
		An integrated system of care optimizes access across the region and provides a coordinated patient experience	Contribute to the development of an Ontario Health Team in Frontenac, Lennox & Addington by participating in year-1 projects.	Participate in FLA-OHT year-1 projects	Year-1 project participation Y/N	100%	Internally set	No = 0	Blank = in progress	Yes = 1	Pichora	Governance	T. MacBeth
4. Launch KHSC as a leading centre for research and education	Foster a culture of teaching, learning, research and scholarship	Together with our partners, KHSC has a strong brand as a centre of excellence for teaching, research, learning and scholarship KHSC provides an engaging and welcoming environment where learners report high satisfaction with our learning environment	Develop a coordinated strategy with educational partners to optimize the learner experience at KHSC.	TBD	Coordinated learner experience strategy in place Y/N	100%	Internally set	No = 0	Blank = in progress	Yes = 1	Fitzpatrick	People, Finance & Audit Committee	C. Gilles