



TRAVERSE INDEPENDENCE STRATEGIC PLAN 2018 - 2019

APPROVED BY THE BOARD OF DIRECTORS 2018/07/25

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INTRODUCTION

In 2016, Traverse Independence undertook the development of a new rolling three-year strategic plan.

Consultant Ethan Mings, principle owner of The Desk Consulting Group, facilitated the initial activities. <http://www.thedesk.ca/main/?q=node/7>.

The following activities helped inform the plan:

1. Review of internal and external documents including past strategic plans, operational documents as well as recent staff and client surveys
2. Full day strategic planning session with all members of the board of directors and management team
3. Online survey with external stakeholders gathering perspective on Traverse
4. Values survey information from all employees and clients.

In 2015, the plan was reviewed and updated. In 2018, after a consultation with key stakeholders, the plan was updated¹.

OUR CORE COMMITMENTS

OUR MISSION

The mission statement should be the clearest and simplest statement that describes why the organization exists, its main reason for being, its core purpose, and its core activity.

We maximize our clients' ability to live independently by providing support services for adults with a physical disability or brain injury.

OUR VISION

The vision statement should describe the preferred future state as described/understood through the eyes of the organization's key stakeholders (clients, staff, caregivers, and partners). It should be inspirational.

Supporting People to Traverse the Distance to Independence.

OUR VALUES

¹ Stakeholder Engagement Report, April 2018

Values are the principles and beliefs that guide an organization's relations with its stakeholders as it lives out its mission in pursuit of its vision.



** The board undertook a consultative review of the core values of the organization. The board constructed the acronym "CARES" and asked staff to submit votes on the word for each of the letters.

WHO WE ARE

Traverse Independence is a registered not-for-profit organization providing services to individuals with physical disabilities and brain injuries in the Region of Waterloo and Wellington County. Established in 1977, the organization offers the following services in the community:

- Supportive Housing at two locations where people with physical disabilities and/or brain injuries live with supports in their own apartments
- ABI (Acquired Brain Injury) Transitional Living in two locations where, with supports, people learn to live independently once again
- The ABI Group Home for people with catastrophic brain injuries who are considered slow to recover versus transitional
- Two ABI Day Programs, a drop-in centre and a more structured program for those with more significant brain injuries
- ABI Outreach in Waterloo/Wellington, a one-to-one employee who offers training so clients can live independently in the community.

The organization plays an integral role in supporting the Waterloo Wellington Local Health Integration Network (WWLHIN) in their objective of providing a systems approach to health

services in the community and is the ABI stream lead on system integration. There is a singular dedication to integration with both the mental health and addiction systems in order to better support our clients and by extension our staff who work tirelessly to ensure our clients work towards independence.

THE CONTEXT

Traverse specializes in providing supports to adults with very complex needs, including brain injuries and physical disabilities. Traverse works in close partnership with others to meet the service needs of these populations and acts as an expert resource to those involved in planning, advocacy, and raising public awareness. This means thinking ahead when clients or policy makers cannot or do not make strategic and proactive decisions and it means speaking out about the issues that are emerging. Having an eye toward the future also means focusing on services and supports that build capacity, improving system navigation and ensuring client centred, high quality services.

After the development of the 2016/18 Strategic Plan, further intensity from the Ontario government and subsequently the WWLHIN on the transformation agenda caused the organization to re-examine the strategic directions during their annual review. The results of the annual review are reflected in the strategic directions.

ENGAGEMENT

The board has met with staff and clients at the majority of sites and programs throughout the winter and spring of 2017/18. The feedback provided at these meet and greet functions was that clients were generally satisfied with the programs and services they were receiving, spoke of the “progress” they were making with the Traverse staff support and were excited for their future. When asked about possible improvements, one client commented: “We need to hire more staff as it seemed that the employees at the site are constantly running short”. Key stakeholder surveys were also sent over the winter of 2017/18 to clients and caregivers. The general survey validated the mission, vision, and values of the organization. Questions around the quality of our services were asked along with probing into the strategic directions of the organization. This engagement has been used to validate this plan’s strategic priorities².

STRATEGIC PRIORITIES

- Quality and Safety
- Outcomes
- Engagement

² Stakeholder Engagement Report, April 2018

These form the foundation of the organizational work for the year.

QUALITY & SAFETY ³	OUTCOMES	ENGAGEMENT
Provide a recognized service that supports quality care and a healthy and safe environment for clients and staff	Demonstrate and communicate our commitment to achieving key client and system outcomes.	Create opportunities for engagement with key stakeholders.
 <p>Achieve accreditation, implement quality management system, ensure service is based upon best practices, implement client safety plan, and ensure all policies and procedures that support staff safety are actively reviewed, updated, and implemented</p>	 <p>Active contributions on local and provincial system committees, collect data to support funding requests</p>	 <p>Develop virtual and face to face systems for engagement, use surveys to collect data, use information for quality improvement</p>

CONCLUSION

This plan is a living document that is updated at least annually based on the ongoing information and feedback obtained throughout the year. The strategic plan is the platform that maps out future directions of the organization. It identifies priorities based on input, data and measurable outcomes along with significant engagement with the key stakeholders - our clients, caregivers and employees.

³ Refer to Client Safety Plan and staff health and safety policies as resources.

PRIORITIES, GOALS, OBJECTIVES & INDICATORS

PROVIDE A RECOGNIZED SERVICE THAT SUPPORTS QUALITY CARE AND CLIENT SAFETY

Strategic Priority	Goal	Objectives	Outcomes	Lead	Timeline	Indicators
Quality & Safety	Achieve Qmentum accreditation in September 2018	Organizational assessment and gap analysis on all standards is completed Complete all work required to meet requirements, communicate and implement	Traverse successfully achieves Qmentum status	Toby Harris Jessica Bates	Sept 2018	Qmentum Level accreditation is achieved
	Implement the quality management system	Adopt quality scorecard with measurable indicators Trend and analyze data Broadly distribute results	Score card developed and adopted Scorecard with quarterly results is available	Employee Advisory Committee	Sept 2018	50% of the quality indicators are met 100% of results are trended and analyzed Results are made available 100%

Strategic Priority	Goal	Objectives	Outcomes	Lead	Timeline	Indicators
	Ensure that clients receive service based on best practice based on client centred care.	<p>Mayo Portland ABI Assessment Tool is completed on all clients</p> <p>Client centred care planning is completed and current for all clients</p>	<p>All assessment results are posted in Goldcare</p> <p>Outcomes of goal completion are charted in Goldcare and reviewed at least annually</p>	<p>Employee Advisory Committee</p> <p>Goldcare Committee</p>	June 2018	<p>100% of eligible clients are assessed by the Mayo Portland Assessment Tool</p> <p>100% of goal directed clients have outcome measures being charted</p>
	Implement all requirements of client safety plan	<p>Develop and approve plan with outcome indicators</p> <p>Collect data and analyze and trend</p> <p>Post outcomes publicly</p>	<p>Incidents are trended and used for quality improvement</p> <p>Results are posted publicly</p>	Client Safety Committee	June 2018	<p>Plan is approved and adopted</p> <p>100% of client safety incidents are logged, trended and analyzed</p> <p>100% of the quarterly reports are publicized through a variety of media sources</p>
	All safety polices are actively	Utilize MyPolicy to ensure all policies are	Policies are up to date	Client Safety Committee and Management	Annual	100% of policies and procedures are reviewed annually

Strategic Priority	Goal	Objectives	Outcomes	Lead	Timeline	Indicators
Client & System Outcomes	reviewed, updated, and implemented	reviewed annually				
	Maintain an active role with local and provincial associations that strive to influence health care policy	Maintain membership on Waterloo Wellington system committees.	ABI continues to be a contributor at local system tables	CEO/Management	Ongoing	100% of relevant committees have a representative on them
		Maintain membership on provincial committees	Member in good standing at provincial system tables with a focus on provincial health care strategies	CEO	Ongoing	
Refer clients who would benefit from a coordinated care approach to Health Links	Participate in coordinated care planning for clients with all partner agencies including Health Links.	Clients have access to enhanced services through coordinated care planning	Intake Department	Ongoing	100% of Traverse clients who would benefit from a coordinated care approach are referred to the appropriate Health Links	

Strategic Priority	Goal	Objectives	Outcomes	Lead	Timeline	Indicators
Engagement		Update and communicate changes to care plans to Health Links	Care plans are coordinated and representative of a multi-sectoral approach to service delivery	Managers	Ongoing	100% of clients who would benefit from a coordinated care approach have a current care plan
	Develop both virtual and in person opportunities for stakeholder engagement	<p>Face to face meetings held</p> <p>Surveys designed, distributed and tabulated</p> <p>Advisory committees launched and functioning</p>	<p>Information is exchanged</p> <p>Stakeholders have information required to make informed decisions</p> <p>Committees have opportunity to influence decisions</p>	CEO Jessica Bates	April 2018	<p>Invitations issued to 100% of clients and eligible caregivers to participate</p> <p>40% response rate on surveys</p> <p>Committee's terms of reference complete and posted along with minutes of all meetings</p> <p>Summary Report is produced and used 100% of the time for planning</p>

SEPTEMBER 2017/18 ENVIRONMENTAL SCAN

INTRODUCTION

As part of the process for refreshing the strategic plan, the board used the following environmental scan to identify new and ongoing challenges. The content of the scan is one of the foundational documents used to review and update the strategic plan for the upcoming year and was developed by the leaders of the organization to support the board in their work to refresh the strategic plan for the upcoming year.

As recommended by Accreditation Canada, the board chose to use the PEST analysis system as a basis for the scan. This analysis looked at the following factors: political, economic, social and technological (PEST). <http://www.businessnewsdaily.com/5512-pest-analysis-definition-examples-templates.html>

It is understood by the board that not every change in the environment requires changes to the strategic plan, goals and objectives. Following is a short commentary on each of the factor areas, which includes feedback from the leaders of the organization.

POLITICAL FACTORS

The upcoming year will have a provincial election with the government of Kathleen Wynne under pressure. The government's recent announcement of the Personal Support Services Ontario agency is unexpected and will have a significant impact on the system in the upcoming year if it is enacted. <http://www.cbc.ca/news/canada/toronto/ontario-home-care-personal-support-workers-psw-wynne-1.4385797>

The integration of the CCACs and the LHINs has occurred and this organization holds significant responsibility for the funding and service delivery. At this point, the integration has just been completed and time will tell as to the implications and outcomes. In the WWLHIN area there has been very little communication to date. Locally, the WWLHIN has confirmed a strong intent to maintain the existing Health Links and sub-LHIN planning areas. With the dissolution of the WWCCAC, the sub-LHINs will focus on planning, funding and accountability at a much more microscopic level, using the smaller geography as a springboard to manage funding agreements. Following is a link to the current WWLHIN Strategic Plan. http://www.waterloowellingtonlhin.on.ca/goalsandachievements/2017-18_strategicpriorities.aspx

ECONOMIC FACTORS

Overall, the stability of the general economy has an influence on our workforce, both concerning retention and our labour relations when in bargaining. Inflation and changes to the auto sector legislation also both impact on our viability and stability. Costs are anticipated to increase for WSIB, LTD and STD as the changes to the human rights legislation push more responsibility to employers for mental health and addictions issues for employees. In addition, the Ontario government is planning to increase the contributions to CPP in the upcoming year, which will

increase costs for both the employer and employees. <https://www.ontario.ca/page/retirement-savings-gap>

Bill 148, if enacted, will drive forth the need for savings across the organization. Not only will the new benefits cost money but they will also make our attendance awareness program redundant, as we will not be able to ask for sick notes. It is anticipated that the financial impact for Traverse will be around \$25,000 annually.

We were notified that WWLHIN funding would have a zero increase for the eighth year in a row. The WWLHIN has only offered a one-year roll over, so that leaves one to wonder what is in stock for the following year. While we continue to put forth our need for new base funding, our lengthy waiting lists and our increased referrals, it appears that brain injury funding is not a priority.

The Director of Finance has reported that the inflation forecast is “a general increase in prices and fall in the purchasing value of money.” This makes budgeting to zero a continual challenge as we can expect some inflation within the expected values without any increase to base budgets. <http://www.tradingeconomics.com/canada/inflation-cpi/forecast>.

SOCIAL FACTORS

The demographics of our client base have changed slightly with more complex clients being referred to us. It is unclear if this is due to the increase in awareness about Traverse Independence in the local area or if the actual demographic of the clients is changing. The average rate of referrals has increased slightly with an average of 12 to 14 per month. The number of clients with mental health and/or substance abuse continues to increase and we are receiving more and more complex referrals. These clients require a significant amount of assessment time and even more case management time. Unfortunately, we are not funded for case management services so the intake department works steadily to keep up with the work.

Housing continues to be a social determinant of health that is under pressure in Waterloo and Wellington. While Traverse sits on the housing committee, there has been very little change in the housing stock. Projected increases in Ontario Works and ODSP will make some difference for the clients who live in poverty.

TECHNOLOGY

Implementation of GoldCare within Traverse will have a significant impact on many aspects of our organization. <http://www.mygoldcare.com/> This data management system is the tool that will weave together all the data systems in the organization such as client files, incident reporting, client safety data, quality information, employee information, etc. It will also be critical to our success within the accreditation forum as we gear to a final Qmentum Survey in September 2018.

From the IT perspective, the cloud and new ways of tracking/monitoring have increased the potential for security breaches and the systems are complex. We require a full team to maintain our IT system, which needs to be functional. In 2017, we have landed on a combination of supports that seem to keep the organization running, with a lesser toll on the Finance/IT department. The future state of IT is constantly changing and, as such, requires constant planning and foresight.