



STRATEGIC PLAN 2019 – 2023 - SCORECARD

MARCH 24, 2021

TRAVERSE INDEPENDENCE STRATEGIC PLAN 2019 - 2023 – SCORECARD

As a result of the COVID-19 pandemic only the fourth quarter is completed – representing the full fiscal year

STRATEGIC PRIORITY	GOALS	OBJECTIVES	OUTCOMES	INDICATORS	Q1	Q2	Q3	Q4	COMMENTS
Quality & Safety	Align and integrate systems	Commit to OHT strategic goals and objectives including QIPs that support ABI evidence informed practice and accreditation standards	Included in OHT goals and objectives	OHT goals and objectives align with ABI strategies and evidence-based practice.				70%	ABI has been highlighted in the planning of all three OHTs, which is still at a very strategic level.
		Adopt quality improvement activities that align with accreditation standards (Canada, 2019) and known evidence-informed practices	Accreditation standards are met or enhanced	Accreditation standards are maintained, and audit is successful				70%	Some momentum was lost during the year. Systems such as IPAC, pandemic planning, and employee engagement were enhanced.
		Apply external third-party requirements (e.g. Health and Occupational Safety) to support a safe environment for employees and clients	All applicable standards are considered	All standards are met				100%	
		Adopt and commit to uphold appropriate evidence-informed guidelines published by the Ontario Neurotrauma Foundation (ONF)	Evidence-informed guidelines are considered in service delivery systems	Evidence-informed guidelines are achieved as applicable				In process	A grant student completed a review of ONF guidelines and the applicability. Final results are pending.
	Talent management	Implement an ongoing recruitment and retention plan that engages all levels of						On hold	This is on hold due to the pandemic. Retention and turnover rates can not be effectively

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Comprehensive Service Mix		employees within the organization						analyzed at this time.
		Create and implement a student placement framework that focuses on a quality placement opportunity for a well-matched student					On hold	Despite the pandemic we have continued to use students at our sites.
		Improve retention outcomes (reduce turnover)					On hold	
		Provide all staff with comprehensive, timely training with a focus on risk reduction and employee retention					30%	Training has consistently been focussed on IPAC and pandemic precautions.
	Comprehensive service program review	Research and approval of a formal program review process utilizing quality evidence and evaluation tools					On hold	
		Create and adopt a program review cycle to support the formal review of one program a year					On hold	
		Incorporate the results from the program review in the Annual Report along with distribution to key informants for comment prior to final publication					On hold	
		Development and implementation of a					On hold	

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Sustainable Outcomes		Client and Caregiver Advisory Committee							
		Review the services of provincial partners and their service boundaries within the newly formed West Ontario Health region						Delete	This has become obsolete due to the current configuration of OH West.
		Work with provincial partners to consider other service types or strengthen existing services						On hold	We have been strictly focussed on COVID.
	Comprehensive outcomes measurement framework	Identify outcome measures relevant to ABI services that integrate with OHT strategic planning and system outcome measures and collect data as pertinent						On hold	None of the three OHTs are in a position to discuss data due to COVID.
		Consult and engage with key stakeholders on program evaluation data and outcomes Publish results annually						On hold	
	Health & Community Service Integration/ Partnerships	Complete the Ontario Health Team (OHT) alignment process	Work with regional OHTs to align with mission, vision, values and strategic planning	OHT mission, vision, values considered during governor annual review	Mission, vision, values are aligned with OHT as applicable				30%
		Complete the contracting and governance elements required to support	OHT governance and contracting are reviewed	Governance and contract are finalized and ongoing				100%	At this time we are core partners in the three active OHTs with contracts and governance structure in place

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Community Engagement		services within an OHT structure							and we have board members sitting on two of the governance committees.
	Partnership alignment and integration	Develop a strategic engagement strategy that identifies partner organizations where clients with brain injury are often underserved or not identified	Engagement plan developed and published	Engagement plan publicly available through social media				50%	ABI in the Streets has been presented to mental health and addictions sectors and has been endorsed. COVID has stalled implementation.
		Work with community partners to utilize tools to identify clients with brain injury that have gone undiagnosed	Tools are identified	Tools are implemented in community partner systems				50%	ABI identification tools have been promoted to Mental Health and Addictions groups.
		Expand our community partnerships to those that are hardest to identify (e.g. custody, shelters)	Design an integrated service system that supports ID of unattached clients	10 new clients attached to services annually				20%	3 new clients who were homeless have been put on caseload but COVID has stalled plans to access further clients.
	Engagement strategy map	Include the voice of those with physical disabilities and brain injuries in the OHT strategic planning and measurable outcomes	Complete engagement and generate outcomes	Information is used at all levels of decision making within the OHTs				30%	One client advocate with a physical disability was put forward and accepted onto client planning committee in the Guelph OHT.
		Creation and support of a Client and Caregiver Advisory Committee	Committee is activated	Committee generates information and recommendations				On hold	