

Mission to Action



AN UPDATE ON THE CLINICAL ACTION PLANNING PROCESS

Our five-year plan to strengthen clinical services at TSH

Welcome to the very first edition of *Mission to Action*, the newsletter that will keep you up to date on TSH's progress as we move through the Clinical Action Planning Process.

We've named this process "Mission to Action" because the planning that will take place in this process must ultimately be grounded in our new Mission, Vision and Values with the unique needs of our patients at the very centre of everything we do.

I've said it before, and I'll say it again—we are in a very strong position here at TSH. We've all witnessed many positive changes over the past two years and we've emerged as a leader in our LHIN. The real challenge now is to keep moving in the right direction. To seize the opportunity we now have to create our own bright future here at TSH. We are one of the largest community hospitals in this country, and working together as a unified system, we have the opportunity to be one of the very best.

Some of you have been involved in clinical services planning processes



Dr. John Wright
President & CEO

in the past that were not the most positive experience. So, working with our clinical action planning process consultants, KPMG, we've carefully designed a process that is unlike those used in the past. Instead of simply working in program silos with a heavy reliance on data, we're going to try

to create a positive vision for TSH—one that everyone can enthusiastically support, and then go back to their programs to figure out how to get there.

My biggest goal for TSH as we begin this process is that we create a new model for how we can work together as a unified organization—thoughtfully, respectfully and enthusiastically. TSH is home to one of the most dedicated, intelligent and creative groups of staff and physicians I have ever encountered. What we need now is a shared sense of purpose. If we can develop that through this process—a shared sense of mission, with everyone pulling in the same direction—the future will be very bright indeed.

Meet the 'Mission to Action' leadership team

Creating a clinical action plan for an organization as large as TSH is no easy task, and it will require leadership and hard work

from many individuals and teams. The following groups and individuals will be helping to lead the mission to action process.

TSH's Project Lead: Dr. Steven Jackson, Chief of Staff

The overall project lead on behalf of TSH is Dr. Steven Jackson. As the Chair of the Advisory Committee, he will work directly with KPMG, his committee and a smaller working group (Lindsey Crawford, Jackie Phan and Anne Marie Males) tasked with keeping the process moving forward.



Program Working Groups

The program working groups will lead the identification of clinical service elements of each program according to direction from the Advisory Committee.

These groups were formed to participate in and lead clinical action planning for their PSG, and will be supported by the CAP Project Team. Groups will be made up of approximately 10 people, including staff and physicians in both leadership and front-line positions. Membership will be announced in the next edition of *Mission to Action*.

Tasks for the Program Working Groups will include communicating with staff in their PSG, soliciting input from staff on clinical services in preparation for a Visioning Summit, participation in the summit and in PSG workshops, and participation and leadership at a Consensus Summit.

The Consultants: KPMG

After a lengthy tendering process that involved two RFP's, KPMG was selected as the consultant group to help TSH lead this project. Valerie Grdisa and Sven Byl will lead the KPMG team.

The KPMG team also includes a health statistician (Chenglin Ye), a senior facilitator (Steven Wong) and two Physician Engagement Specialists (Dr. Craig Muir and Dr. Chris Cobourn).

KPMG in Canada is part of a large multi-national firm with a significant healthcare advisory practice. The Toronto practice is a multi-disciplin-



Valerie Grdisa
Project Director



Sven Byl
Senior Project Manager



Steven Wong
Facilitation/Data Analysis

ary team of professionals focused on strategy and planning, health service improvement and change management. The firm is dedicated to

improving our healthcare system and sees value in approaching problem-solving with consideration for the patient experience.

Community Engagement:

A key component of the CAP process

In the past two years, The Scarborough Hospital has led a number of successful change processes. One factor that has definitely contributed to the success of major initiatives like the introduction of the new board bylaws and the development of the Mission, Vision and Values is the hospital's commitment to community engagement.

“Community engagement leads to better decision making,” explains Anne Marie Males, Executive Director of Public Affairs and Community Relations. “In the past, organizations typically drafted their plans and then asked for feedback on the finished plan. At TSH, we do things a little differently—we invite our community stakeholders to be part of the process, adding valuable feedback throughout. The result is a great finished product with wide-spread support.”

Members of the general public who want to participate in the Clinical Services Planning process will have multiple opportunities to participate including an on-line survey and at the upcoming Town Hall meeting on April 19th.

The Advisory Committee

The Advisory Committee will participate in the process, provide direction to the program working groups, review input from the program working groups and review and validate the plan.

The members of the Advisory Committee include:

- Steve Jackson (Chair)
- Lindsey Crawford
- Joy Richards
- Mike Chapman (Surgery)
- Nurallah Rahim (Surgery)
- Joseph Chan (Surgery)
- Pervez Ali (Surgery)
- Shawn Soon (Surgery)
- Howard Clasky (Medicine)
- Bonnie Westcott (Medicine/Critical Care)
- Sandy Finkelstein (Medicine)
- Gord Nagai (Medicine)
- Henry Krieger (Oncology)
- Bryan Le (Medicine)
- Elaine Yeung (Medicine)
- Peter Azzopardi (Maternal-Newborn)
- Barb Scott (Maternal-Newborn)
- Nathan Roth (Obs/Gyn)
- Georgina Wilcox (Obs)
- Stephen Barsky (Mental Health)
- Ethel Doyle (Nephrology)
- Paul Tam (Nephrology)
- Tom Chan (Emergency)
- Ann MacKinnon (emergency)
- Tim Devlin (GI)
- Michael Silver (Medical Staff Association)
- Larry Erlick (Family Medicine)
- Pam Marshall (Patient Relations)
- Susan Brickell (Union representative)
- Tanja Futter (Nursing)
- Joseph Wong (Physiotherapy)
- Ken Merrick (Respiratory Therapist)
- Gael Gilbert (Community Advisory Council)
- Ruth Joyce (Hospital Volunteer)
- Patrick McGrade (Board Member)
- Dave Bourne (Communications)
- Jacqueline Phan (Projects)

AD HOC MEMBERS:

- Cara Flemming (Decision Support)
- Tom Jackson (Diagnostic Imaging)
- Gus Bajwa (Lab)
- Patricia Macgregor (Pharmacy)

The Steering Committee

The Steering Committee is charged with overseeing and monitoring the process, developing the communications plan, developing an appeals process and

finalizing the Clinical Services Plan before it goes to the Board of Directors.

The members of the Steering Committee include:

- John Wright (Chair)
- Steve Jackson
- David Rose
- Joy Richards
- Lindsey Crawford
- Cara Flemming
- Ralph Anstey
- Anne Marie Males
- Ester Lipnicki
- Michael Mazza
- Howard Clasky
- Michael Chapman
- Abdollah Behzadi
- Patricia Sinclair (Community Advisory Council)

About the planning process

Over the next several months the CAP project team will be committed to the development of the Clinical Action Plan for the hospital. The process has been designed to be inclusive and collaborative to draw input from a broad number of stakeholders from within and external to the organization. The launch event is a Visioning Summit on April 15th where 150 leaders and front line staff from across the organization will propose creative ideas for the future of programs and services for TSH. Following the Visioning Summit Program Working Groups will be provided with program and population health data to validate and assess the feasibility of this vision against pre-determined criteria.

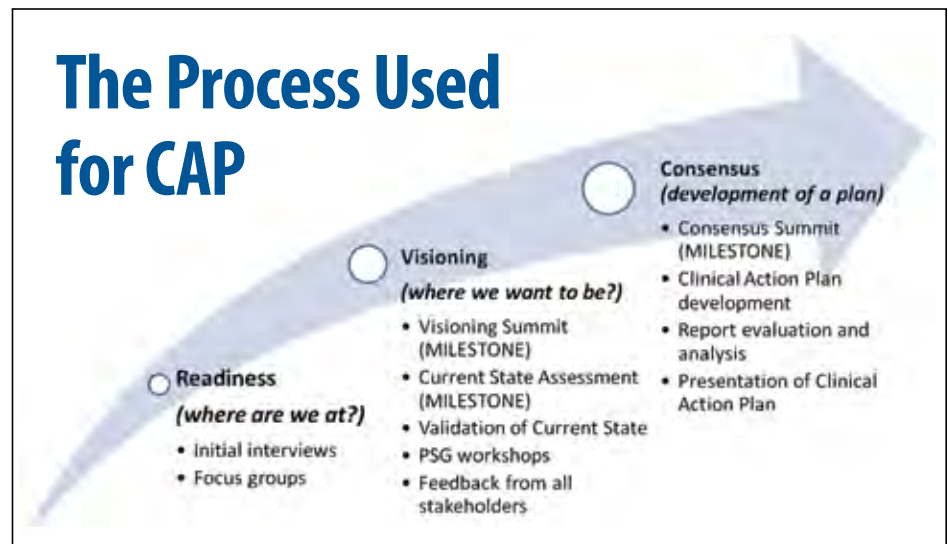
Each PSG will identify working groups that will participate in a workshop in May or June to examine the data against the initial vision in order to assess its feasibility and develop a

Quote of the week:

“Clinical services form the core function of our organization. They define who we are and what we do for our community. Over the next few months we are going to strengthen these services by developing a robust clinical service plan. I would like the entire medical staff of The Scarborough Hospital to take advantage of this great opportunity and become major participants in this process. It is time to make a difference.”

— Dr. Abdollah Behzadi

The Process Used for CAP



more rigorous and detailed clinical action plan. Throughout this process all staff will have the opportunity to provide input on the vision and designs that emerge from the visioning summit and the PSG workshops. Watch for the announcement of Destination Cafes that provide staff

and physicians with the opportunity to provide valued staff input and feedback. The planning process will wrap up with a Consensus Summit in the fall where clinical leaders and front line staff from each PSG will validate and confirm the future plan for the hospital.

Mission

To provide an outstanding care experience that meets the unique needs of each and every patient.

Vision

To be recognized as Canada's leader in providing the best healthcare

Values

for a global community.

I CARE:

Integrity • Compassion • Accountability • Respect • Excellence