

City of Kawartha Lakes
Family Health Team



Strategic Plan 2023 to 2026

City of Kawartha Lakes Family Health Team

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1. Strategic Context

1.1 Executive Summary

The City of Kawartha Lakes Family Health Team (CKLFHT) provides high-quality, patient-centred care through their team of primary care professionals. Working collaboratively, CKLFHT supports the community through the skills and expertise of family doctors, nurse practitioners, nurses, registered dietitians, pharmacists, social workers, receptionists, an occupational therapist, and a respiratory therapist.

By partnering with other healthcare and social services organizations, CKLFHT can provide the community with various services and programs to meet their unique needs. Our team is making a difference in the health and well-being of those across the City of Kawartha Lakes.

Strategic Planning Process

From September 2022 to January 2023, CKLFHT engaged Laridae, a leading consulting and training firm, to guide the Board of Directors through a strategic planning process, leading to the development of a three-year plan.

CKLFHT's Board of Directors led a strategic planning process based on best practices for non-profit organizations. The process included a document review, focus groups and key person interviews, an online survey, and an environmental scan to understand where the organization fits in the greater primary care landscape. Additional meetings were held with the Board and senior leadership to develop the final strategy.

A Three-Year Plan

CKLFHT is committing to a future-oriented plan with three (3) strategic directions:

- One Team Culture
- Access and Service Delivery
- Community Collaboration

These directions will better position the organization over the next three years to ensure that CKLFHT continues to provide high-quality services and programs across the City of Kawartha Lakes.

2. Strategic Foundations

2.1 Mission:

To deliver coordinated, high-quality, cost-effective, patient-centered primary care in a collaborative team model.

2.2 Vision:

Every resident of the City of Kawartha Lakes has access to local team-based primary care.

2.3 Values: Our Guiding Principles

1. Leadership
2. Community-oriented
3. Effective
4. Collaboration
5. Equitable

3. Strategic Directions

An effective **strategic plan** sets the foundation for a clear and focused future, uniting the organization under a common purpose and strategy.

Our strategy is shaped by our strategic directions, which provide clear focus and direction while allowing us to respond and adapt as circumstances evolve over the next three years.

Each of our strategic directions includes a corresponding set of tangible **commitments**.

Our strategic directions and commitments will provide a strong framework for developing **annual operational plans** with **measurable goals** and **achievable objectives**.

3.1 One Team Culture

We understand the importance of a cohesive, collaborative team in supporting responsive care. Our aim is to create a healthy workplace culture that motivates staff and appeals to new talent. We want everyone to know that there is a team behind them when they access care and to ensure the processes, infrastructure, and systems are in place to support effective communications, coordination, and relationship-building between physicians and allied health staff.

Commitments

*Over the next three years, we will focus on cultivating **one team culture** by ...*

- **Supporting collaboration and communication:** Ensuring the necessary pathways are in place to support physicians and the interprofessional care team staff in effectively sharing knowledge and resources within and across teams.
- **Increasing awareness of team-based care:** Establishing a consistent understanding among all staff and physicians as to who CKLFHT is and how we support patient-centred care. Building and implementing a strategy to effectively communicate this to patients, partners, and the wider community.

- **Developing a strong team:** Growing a workplace that prioritizes individual and collective growth and development with effective and impactful systems and incentives to retain and attract a strong complement of staff and physicians.
- **Exploring infrastructure opportunities:** Ensuring the necessary physical infrastructure is in place to support collaboration and access to care, including an exploration of long-term planning for centralized co-location.
- **Encouraging a healthy workplace culture:** Building the structures to support a cohesive, healthy workplace culture grounded in trust and where everyone feels heard, respected, supported, and able to express themselves.

3.2 Access and Service Delivery

With a focus on increasing access to care, we will collaborate with our networks and be flexible and intentional with our strategies and resources to ensure we are receptive to community needs. Leaning into the passions and interests of our team, we will continue to develop our skills and knowledge. We will remain accountable to our patients, community, and funders throughout all we do, constantly working to increase equity, consistency, and quality.

Commitments

*Over the next three years, we will work on enhancing **access and service delivery** by ...*

- **Supporting the unattached patient population:** Developing and implementing strategies to ensure more equitable access to primary care across the City of Kawartha Lakes.
- **Prioritizing high-quality care:** Driving high-quality care to support consistency and equity in access across the wide geography we serve.
- **Creating effective infrastructure systems:** Ensuring the necessary technical and administrative systems and processes are in place to support care access and to streamline organizational practices.
- **Offering community-responsive services and programs:** Strengthening existing and exploring new programs and services in an evidence-based manner that considers community needs while prioritizing impactful outcomes for patients.

- **Nurturing and strengthening professional skillsets:** Investing in the professional development of our staff and ensuring an environment that is supportive of ongoing learning and innovative ideas to continually strengthen care and be responsive to the ever-changing sector.

3.3 Community Collaboration

We acknowledge that the needs of the community are bigger than our organization. We will help mobilize positive change across the City of Kawartha Lakes and beyond by focusing on collaboration and building trusting relationships with our partners. We aim to further explore partnership opportunities in ways that strengthen primary care and increase impact and access. We will be data-driven, making informed decisions to offer responsive services that complement those of our partners.

Commitments

*Over the next three years, we will focus on strengthening our **community collaboration** by ...*

- **Streamlining access to primary care:** Collaboratively developing systems and working with partners to simplify the healthcare journey and strengthen pathways, referrals, and care coordination across the City of Kawartha Lakes.
- **Leading sector change:** Being a catalyst by guiding the development of high-quality, responsive primary care across central east Ontario.
- **Increasing collaboration:** Prioritizing strong engagement and building trusting relationships with partners to reduce duplication, holistically address chronic disease management, and increase accessibility.
- **Understanding our community's needs:** Strengthening connections with and building a strong understanding of the community to ensure we remain responsive and receptive through strategies such as a community needs assessment.

4. Appendix: Stakeholder Engagement

4.1 Why Engage?

Leadership Through Genuine Engagement

Strategic plans that provide meaningful direction throughout their stated duration rely on an authentic engagement process that genuinely seeks input and allows those invested in an organization's success to provide ideas, input, and feedback.

Properly conducted, stakeholder engagement is in no way an abdication or devolution of leadership.

It's the opposite.

Leaders who reach out to and seek the input of the people delivering or accessing services are far more likely to craft future strategic directions that resonate with those they affect and those who must implement them.

The Multiple Purposes of Engagement



Listen

To listen to stakeholders by gathering input, ideas, and suggestions.



Include

To include stakeholders in the planning process, helping to generate buy-in.



Educate

To educate stakeholders about the great work you do.

4.2 Engagement Process

The engagement with stakeholders was the foundation for the process, informing subsequent discussion, deliberation, and decision-making.

The engagement process—developed and facilitated by Laridae from October to November 2022—was designed to engage with and listen to the individuals who interact with CKLFHT on a regular basis.

As a result of this engagement, our strategic plan is informed by experience, evidence, and the most broadly held perceptions of all those we serve.

Audiences

We engaged CKLFHT’s primary stakeholders during the engagement process.

Patients	Parents/ Caregivers	FHT Staff	FHO Physicians
Board Members	Health Care Providers	Medical Professionals	Municipal Stakeholders
Donors	Funders	Community Partners	Community Members

Stakeholder Participation



4.3 Common Themes

Great Staff

Stakeholders appreciated the additional support CKLFHT provides and the positive interactions they've had with staff. Stakeholders described staff as **focused, driven, skilled, and professional**. Many staff spoke positively about the workplace culture and collaboration and support for one another.

71% of survey respondents **"Strongly Agree" or "Agree"** that CKLFHT's programs/services are facilitated by **skilled and dedicated staff**.

83% of survey respondents ranked their experience with CKLFHT staff as **"Excellent" or "Good."** **75%** said the same for the Family Health Organization (FHO) doctors.

Patient Care

82% of participants said "excellent" or "good" regarding their experience with CKLFHT. The following percentages of respondents selected excellent/good:

- **79%** of patients
- **75%** of parents/caregivers
- **83%** of community members

The top words chosen by patients to describe CKLFHT were **understanding, community-oriented, and responsive**.

Partnership

Several partners commented on the organization's **active engagement in broader system conversations**. There was also appreciation from the doctors we spoke to about supporting the FHO through allied services and programs.

It was acknowledged that CKLFHT is **always willing to come to the table** and participate in discussions at the Ontario Health Team.

Multiple partners spoke to the **collaborative efforts** between organizations to try and **address primary care** issues and bridge gaps in services.

Human Health Resources (HHR)

Participants spoke to the ongoing sector-wide **staffing crisis** and its impacts on CKLFHT, including challenges with **recruitment and retention and the doctor shortage**.

A high turnover rate and lack of continuity among staff were noted by some FHO physicians and FHT staff, as were **internal communications challenges, current salaries, burnout**, and other organizational changes impacting **workplace culture**.

Ontario Health noted that the current HHR doesn't allow the system to continue to operate long-term with solo practices, while the Association of Family Health Teams of Ontario (AFHTO) asked, "*What is primary care moving forward, and who delivers it?*"

When stakeholders were asked about the top areas of focus for the organization over the next three years:

- **76%** said **staff attraction and retention**.
- **36%** chose **workplace culture**.

Communications and Awareness

Communications and awareness regarding CKLFHT remain unclear – a lack of understanding of the FHT's role or the relationship between the FHT and FHO and what this means for patients (what is in the purview of the FHT vs FHO vs. other community agencies). The website was reportedly down for a long time, and ongoing updates were noted.

When asked, "On a scale of 1-10, how knowledgeable do you feel you are about the range of programs and services offered by CKLFHT?" **community members** averaged **3.2/10** and **patients** **4.2/10**.

Among FHO physicians, there was a **lack of awareness of the services and programs** available at the CKLFHT.

29% of survey respondents **somewhat understand** what CKLFHT does.

Sector Pressures

Participants identified several sector-wide challenges that are impacting CKLFHT, including:

- **Respiratory Illnesses and COVID**
- **Human Health Resources:** a shortage of healthcare professionals
- **Mental Health and Addictions:** increasing volume and complexity of needs
- **Social Determinants of Health:** socio-economic factors in the region; CKL has a higher than the provincial average for food insecurity
- **Aging Population** within CKL
- **Changing Expectations for Care**
- **Healthcare in Crisis**, especially primary care

Accessibility

Participants noted that the rural-urban divide and geographical characteristics of CKL impact accessibility.

- The requirement for **multiple sites** to serve the various communities while also having less available specialized support and infrastructure.

The number of **unattached patients** in the community, **wait times**, and **limited availability of the after-hours** clinics were significant challenges.

40% of survey respondents chose **growth and expansion** when asked about the **top areas of focus** for the organization.

Funding and Accountability

Participants spoke to the **limited overall investment in primary care** and its impact on access. The impact this has on salaries (for FHT and FHO staff) and recruitment and retention were noted.

. The Ministry noted that, moving forward, the sector would need to do a better job of demonstrating **value for the investments made in the sector**. Regarding challenges with access

to care, *“at a certain time, [funders are] going to ask if it’s a capacity problem or a performance problem.”*

Patient-Centred Alignment

The original founding goals of the FHT are to enable physicians to serve more patients, provide more services with an interprofessional care team, and attract more physicians.

An opportunity to think through how to communicate with patients in a patient-centred manner.

The emphasis from AFHTO, the Ministry of Health, and partners on **putting patients first:**

- Nurse practitioners are not there to help doctors but to help patients.
- A changed **Board composition** to include community members (to allow for different perspectives and inspire ‘provocative conversations;’ to stimulate collaboration and new partnerships).
- Thinking through how care is delivered across the sector – **supporting care** coordination, strengthened **information sharing** across organizations, and thinking of **care along a continuum**.

Integration and Collaboration

Opportunities for **further collaboration** with other sectors (e.g., mental health, community care), other primary care models, the Kawartha Lakes Ontario Health Team (KLOHT), and the FHO to **increase efficiency and support patient-focused service delivery**.

The **presence of two FHTs and a CHC within CKL** was discussed – noted by funders and stakeholders that mergers will likely be on the table in the more distant future, and CKLFHT would be best positioned to get ahead of that. *“Show you’re willing instead of having it happen to you – define it yourself.”*

In the shorter term: Focus on integrations, **smaller changes** that’ll strengthen patient care, **streamline services and reduce duplication** across the community. **Being bold and trying new approaches.** Interest from the Ministry of Health to see fewer silos between organizations and the OHTs to support that.

57% of survey participants said the organization should position itself as a **leader**.

Accessibility

Increasing access considering the **significant number of unattached individuals** in the community, but recognition from partners that there must be a **collaborative approach** to this – not just CKLFHT. There was a desire for organizations to be more strategic than reactionary.

Another suggestion raised was how to provide more **timely care** to current patients.

Taking **innovative approaches** to care by utilizing **technology to supplement service delivery and streamline referral pathways** was mentioned by several stakeholders. Virtual care was noted as an opportunity – with the FHT supporting the set-up or improvement of systems and onboarding – while recognizing that this won't be accessible to all.

The Ministry of Health noted an opportunity to think through **how to build a plan that includes everybody, not just rostered patients** – what's best for the community as a whole.

AFHTO spoke to social accountability to the community and considered their work from an equity standpoint – ***“Is the patient population reflective of the community?”*** How to work with partners and innovatively to address the health needs of the unattached population.

Programs and Services

Several stakeholders suggested increasing the quantity and quality of services and programs, including addiction counselling, physiotherapy, and children and youth mental health.

Physicians suggested **focusing on improving the quality of current programs and services**. A focused review to understand the performance of programs/services, which to focus on, and how to strengthen the remaining ones – collaboration over duplication.

Staff, the Ministry of Health, partners, and AFHTO noted the importance of ensuring that **what is offered remains responsive to the population's needs** and makes a difference to the community – *“Volume isn't the success measure.”*

Increased Communication/Knowledge of FHT

An opportunity to **strengthen communications about what CKLFHT does and what services and programs are available to patients**. To share and advertise CKLFHT more accessible.

Effective knowledge and information sharing were mentioned to improve relations between CKLFHT and the FHO and to support other partnerships (learning from one another instead of reinventing the wheel).

Increasing **advocacy** for greater access to care was encouraged by multiple stakeholders and seeing partnership and stronger OHT involvement as a venue.