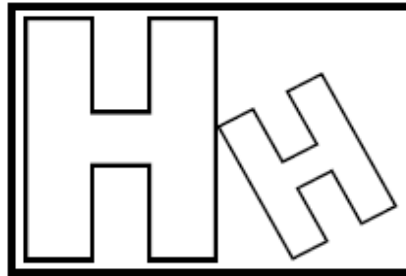


Template Strategic Plan 2009 - 2011
Address

Service Strategic Plan 2009 – 2011

This is a DEMO only. Some pages have been removed.

*Leading in the provision of premium quality,
client focused residential care.*



Healthcare Help

Template Strategic Plan 2009 - 2011

INDEX

| | |
|---|---------|
| Organisational Chart | Page 2 |
| Introductions & Mission Statement | Page 3 |
| Brief History & photos | Page 4 |
| Three of Four Strategic Goals Suggested [Varies. We can help formalise these] | Page 5 |
| 10 Strategic Internal & External Priorities Suggested | Page 6 |
| Internal & External Priorities Elaborated | Page 7 |
| Support Factors for Identified Goals Vs Barriers to Achievement of Identified Goals | Page 8 |
| Outcome Measures / Performance Indicators | Page 9 |
| - Client focused Performance Indicators Positive versus Negative | Page 10 |
| - Staff focused Performance Indicators Positive versus Negative | Page 13 |
| - Funder focused Performance Indicators Positive versus Negative | Page 14 |
| - Community focused Performance Indicators Positive versus Negative | Page 15 |
| Planned changes in Strategic Direction | |
| - This could be business expansion or contraction / or changes to service provided Additional [This is customised to each service - it needs to fit with standards and regulations] For example: opening a Dementia Unit now needs NZQA trained staff to specific unit standards. | |

[This is an example where good client care is a main priority goal]

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10 Strategic Internal & External Priorities

| Internal | External |
|---|--|
| Effective complaints management <i>Every complaint is an opportunity for improvement</i> | GREAT REPUTATION Maintained & enhanced |
| Ensure Adequately Trained Workforce Robust Training Program | Demonstrate Service Quality Certified to relevant standards [GREAT report published] |
| Happy workforce who fully participate in smooth running of the service | Safe Workplace Good employee / career pathways for employees |
| Client satisfaction with our service | MOH, DHB & ACC endorsement of our services |
| All persons & cultures welcomed as staff / clients | Open arms policy to our client group |
| Robust Business Risk Management Plan | Efficient & Effective Organisation |
| Effective Linkage Between Exception Reporting & Business Risk Management Plan | Control over Business Risks Managing changing terms of contracts [MOH, DHB] |
| Retention of Fully trained staff | In house free training / Good Employer |
| Maintain Present Robust Policy Improve identified Gaps | Meeting & exceeding recognised minimum standards Attaining highest ratings at MOH audit |
| Introduction of Supported [Healthcare Help] Management System | Smooth Running Service Improved Management Systems |

Elaborated on next page, then support factors & barriers to achievement are identified]

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Outcome Measures / Performance Indicators

a) CLIENT FOCUSED PERFORMANCE INDICATORS

Statistical logging of quality indicators will enable us to better assess trends and opportunities for improvement.

POSITIVE INDICATORS

Satisfaction Surveys of:

1. Client ability to complain successfully [seeking indicators of user friendliness & service responses]
2. Staff respect & courteousness including use of preferred names
3. Staff respecting privacy & confidentiality
4. Satisfaction with any meals prepared
5. Overall satisfaction with staff
6. Overall satisfaction including NOT feeling rushed
7. Cultural respect

Chosen quality indicators have been selected to match those that the District Health Boards are presently working on for their benchmarking of residential services.

Versus

LOGGING OF EXCEPTION REPORTING – i.e. any thing that has gone wrong

Our statistics will enable benchmarking in three areas

- a) Historical [looking at how we have performed over the years]
- b) Against threshold values [those identified by the Ministry as Indicators for safe Aged & Dementia [Mental Health] Care SNZ 8163:2005] using Healthcare Help online Benchmarking Stats
- c) Against other similar services – a rate is calculated so that comparisons are robust.

Information is anticipated to reveal in more detail what problems staff face each day, as well as our competencies from a rehabilitative perspective for clients. [*What do we face: how well do we deal with it*].

NB: Quality Indicators with known threshold values [according to SNZ 8163:2005] are highlighted in blue below. Where threshold values are not met, 'best practice guidelines' or 'clinical pathways' are used to improve our service. Those in blue are seen as most pertinent in terms of good care.

Clinical pathways = the recognised best way to respond to our clients when symptoms arise.

Method: Quick & Easy Stats, a digital program of six separate spreadsheets will track:

- a) Infection rates / incidences [Note the FREE Healthcare Help Benchmarking Stats are more comprehensive than some in-house statistic collection systems].
 - Chest infections
 - Flu
 - Diarrhoeal disease
 - Skin and wound infections [includes fungal, scabies & head lice]
 - MRSA
 - Eye
 - **UTI [urinary tract infection]**

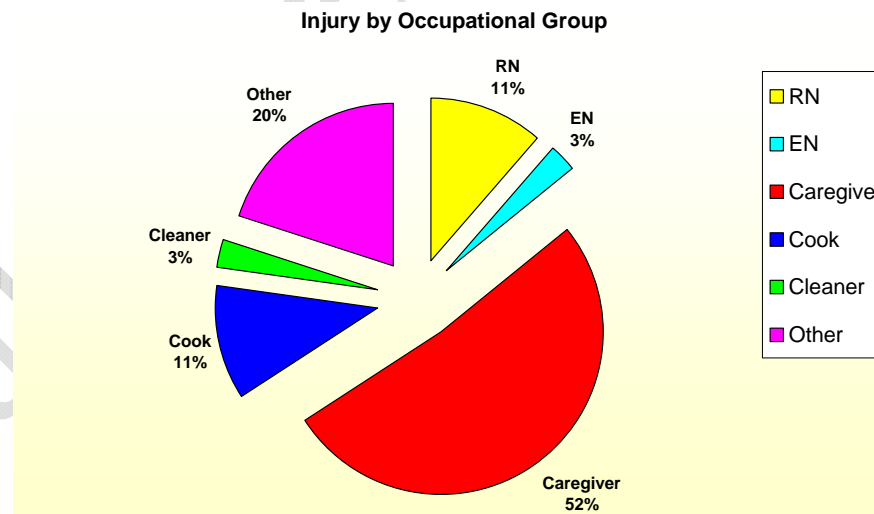
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b) STAFF FOCUSED PERFORMANCE INDICATORS

- a) Staff attaining further qualifications e.g. NZQA recognised courses completed or university qualification
- b) Staff retained by the service for more than two years
- c) Staff matching clients according to ethnicity / age / similar culture

Versus

- a) Staff turn over [tracked by the number of inductions required per annum]
- b) Staff injured using spreadsheet e) above [Desired Value = zero].
- c) Numbers of ACC claims annually [Desired Value = zero].
- d) Accidental injuries - This spread sheet mirrors ACC's Patient Handling Guidelines. It will enable the service to assess injured staff, time of injury, mode of injury, day of the week etc in an effort to reduce harm to both clients and staff. See example below:



This spreadsheet mirrors the categories in ACC's Patient Handling Guideline.

5. COMMUNITY FOCUSED PERFORMANCE INDICATORS

Responding to the needs and requirements of the communities that we serve:

Positive Indicators:

1. Surveillance audits of client care,
2. Reputation in the industry
3. Numbers of Initiatives held by the service where community attended
4. Positive media exposure
5. Unexpected gift from the community

Versus

Negative Indicators:

1. Number of OSH Investigations [Desired Value = zero].
2. Number of Referrals to Disability Commissioner [Desired Value = zero].
3. Number of incidents negative media publicity [Desired Value = zero].
4. Numbers of serious complaints [Desired value zero]

Strategic Plan is reviewed annually
First review will be in 12 months
Review will link to Business Risk Management Plan