![CSSN - community support services network]

Central Community Support Services

Network Strategic Plan

April 2017 – March 2020

FINAL REPORT

2017

Table of Contents

Table of Contents

Part 1 - Introduction

About the Plan

This strategic plan sets out the direction, priorities and goals for the Central Community Support Services Network (CSS Network) in the coming three years. It builds on the Mission, Vision and Values set out by the network during its last strategic planning cycle in 2014. The plan exists to support the sector as an integral part of the health system in the Central Local Health Integration Network (LHIN).

While the Plan sets an overall direction for the next three years, it will be reviewed annually by the CSS Network Steering Committee along with an assessment of progress and results of the previous year. Adjustments may be made to this Plan as necessary to reflect changing circumstances and respond to newly emerging opportunities and priorities in the Central LHIN.

About the Network

Established in 2007, the CSS Network is an integrated and collaborative group of community based health organizations providing community-based health services within the Central LHIN. Our members serve seniors, people with disabilities, palliative clients of all ages and the bereaved. The Network is led by a Steering Committee of eight individuals selected from amongst the CSS Network membership.

The CSS Network is inclusive in its membership which is open to all community support agencies that receive funding directly from Central LHIN, those that provide services in Central LHIN but are funded by other LHINs, and agencies who receive Central LHIN funding indirectly (i.e. palliative care providers that receive LHIN funding indirectly through the LHIN-funded Palliative Care Network for the provision of subcontracted services). A major benefit of the CSS Network to its members is the capacity building, information sharing and networking that goes on amongst members and the CSS Network's belief is that these benefits should be open to all community support agencies regardless whether they receive direct LHIN funding. A complete list of CSS Network members is provided at the end of this Plan.

The CSS Network provides an important forum for the sector to come together, continue to improve the impact and efficiency of our sector through coordinated planning within our sector, and enables the community support services sector to have a common voice in issues of importance within the Central LHIN.

Mission/Vision/Values

Mission

To champion a vibrant and innovative community support sector in an integrated health care system, for the health and well-being of our communities.

Vision

A cohesive and sustainable community support sector providing appropriate, quality, person - centred services in an integrated and accessible local health care system.

Values

We will establish a positive collaborative culture in our work together, guided by the following values:

- ➢ We will use a person-centred perspective as our key lens for decision-making

- ➢ We will shift focus from individual organizational accomplishment to sector and system accomplishment

- ➢ We will operate with transparency to members and others

- ➢ We will promote peer collaboration, partnership and engagement

- ➢ We will work with a sense of urgency and focus on what is added value to the broader system

- ➢ We will be inclusive of all CSS organizations providing services in Central LHIN

- ➢ We will act as a role model for continuous improvement, best practice and good governance

- ➢ We will maximize the use of shared resources to enable system level integration and knowledge exchange

Memorandum of Understanding (MOU)

The CSS Network is founded on the following shared principles, as articulated in our Memorandum of Understanding (MOU):

➢ To optimize the contribution and recognition of the CSS sector by working in collaboration with each other and with key stakeholders

➢ To promote knowledge sharing, facilitate communication, and foster a culture of innovation and learning that contributes to long-term improvement of the CSS Sector

➢ To enhance the synergy between related initiatives which involve the CSS sector in order to improve efficiency and effectiveness of service delivery

➢ To build a cohesive vision, shared leadership and act with one voice in support of the communities we serve

Part 2 – 2014 – 17 Accomplishments

2014-17 Accomplishments - Building on the Past for a Strong Future

The CSS Network's last Strategic Plan was for the period 2014 – 2017. This Plan included an ambitious set of activities to meet its goals. The CSS Network and the CSS sector accomplished much over the last three years on key priority areas, including:

Strategic Priority	*2014-17 Accomplishments*
Optimize the CSS Sector	• Submitted 4 coordinated responses to Central LHIN on behalf of the network, including responses to PSW Wage Enhancement and Long Term Care Capacity Planning • Facilitated collaboration to test pilot Telephone Safety Service for Low-Moderate Needs clients between Central CCAC and member agencies • Facilitated collaboration between North York General Hospital and CSS agencies • Hosted Central LHIN and OCSA representatives at network meetings
Enhance Quality & Performance Measurement	• Worked with Central LHIN to implement AIS software • Worked with Central LHIN to hire RAI/IAR Trainer • Hosted Board 2 Board Session on Quality • Hosted 3 part Education Series Quality 101
Support Sector Capacity Building	• Hosted total 6 education sessions and 2 Board-2-Board sessions • Hosted 6 network meetings • Developed comprehensive list of service categories and standard definitions from across the sector
Strengthen the Network	• Completed branding exercise, including logo development • Re-developed and launched Central CSSN Website

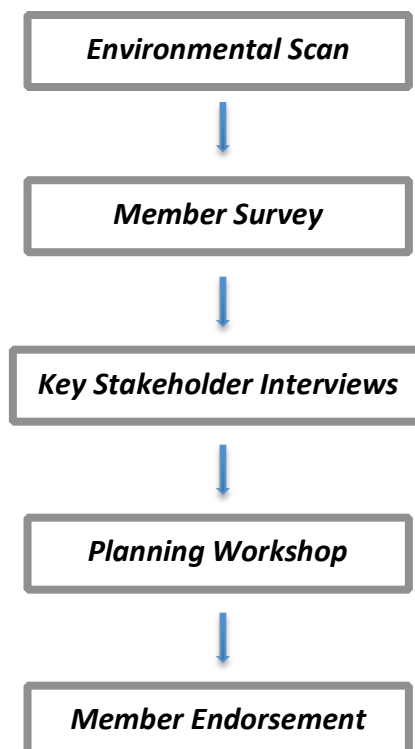# Part 3 – Strategic Planning Process for 2017 - 2020

Project Plan

The strategic planning process for this cycle began in September 2016.

It was recognized by the Steering Committee that this would be a challenging planning cycle; the certainty of many changes to the healthcare system and particularly the CSS sector within the immediate future, without much clarity on the specifics of what these changes will actually be and how they will impact agencies and clients across the sector. In particular, the implementation of Bill 41, Patients First Act, 2016, left many unanswered questions on the future of the sector and way services would be provided to clients.

Before embarking on this plan, the Central CSSN Steering Committee agreed that in this time of uncertainty, the network should continue to build on the foundations laid in the 2014-17 plan. As such, the Steering Committee decided that the Mission, Vision and Values of the network are still relevant to the network and would not be re-visited as part of this planning cycle.

The network completed an RFP and selected InVizzen Knowledge Brokers to help facilitate this plan. A strategic planning sub-committee was formed, composed of staff from InVizzen, the Central CSSN Project Manager and 2 representatives from the Steering Committee. The project plan was outlined as follows:

Environmental Scan

↓

Member Survey

↓

Key Stakeholder Interviews

↓

Planning Workshop

↓

Member Endorsement

Environmental Scan

The environmental scan was conducted as a review and analysis of 13 relevant documents. The following questions were considered for each document:

- ➢ What does this mean to the Central CSS Network (as a whole) over the next 3 years? Is this an opportunity or a threat?
- ➢ How can the network use this information to their advantage?
- ➢ What does the network need to keep on its radar during this time of uncertainty?
- ➢ What partnerships outside the network are essential?

See Appendix A for the full document scan summary.

Member Survey

An online survey was developed to solicit input and perspectives from network members. Questions addressed the areas of the network performance, organizational alignment with the network and future goals/needs.

63% of members responded.

See Appendix B for a Table of Key Themes Identified in the Network Member Survey.
See Appendix C for the Full Report of the Network Member Survey.

Key Stakeholder Engagement Interviews

Interviews were conducted with key stakeholders – individuals outside the network who are connected to the sector and could inform the future direction of the network.

4 interviews were conducted with representatives from the following organizations:

1. Health System Planning and Design – Central LHIN
2. South Simcoe & Northern York Region Health Links
3. York Region & South Simcoe – Canadian Mental Health Association
4. Ontario Community Support Association

Each interviewee was asked the following questions:

- ➢ What provincial and LHIN-wide initiatives need to be on Central CSSN's radar?
- ➢ What do you see as the value that a collaborative approach can add in terms of

strengthening the sector and contributing to LHIN wide and provincial initiatives?

➢ What ideas do you have about priorities for their strategic plan over the next 3 years?
➢ Where should they focus their resources (time, energy, expertise)?
➢ What ideas do you have about how the network can help member agencies met the growing demand for services, especially for clients with complex needs, when current funding models are not keeping pace with demands?

See Appendix D for the Key Stakeholder Engagement Final Report.

Planning Workshop

The steering committee came together for a half day planning workshop facilitated by the consultants. A pre-reading package containing all the background reports described above, as well as a S.O.A.R. Analysis (strengths, Opportunities, Aspirations, Results), was distributed to participants in advance of the session.

The objectives of the session were to
➢ Set the stage for collaborative strategic planning and implementation
➢ Reach consensus on strategic priorities
➢ Prioritize initiatives and start to develop a plan
➢ Decide on the strategic plan progress tracking and evaluation approach.

Subsequent to the planning workshop, the steering committee met again to continue prioritization of strategic initiatives for presentation and endorsement at the network meeting.

Member Endorsement

A draft plan was presented to members at the network meeting on April 4th, 2017 for feedback and endorsement.   The network fully endorsed the strategic plan as presented.

Part 4 – Priorities for April 2017 – March 2020

Overview of Our Strategic Priorities

Based on the outcome of the environment scan, member survey and stakeholder interviews, the facilitators recommended that *the network continue with its existing strategic priorities*. The steering committee unanimously voted to proceed with the exiting strategic priorities. Our four priorities are the building blocks upon which the CSS Network will achieve our Vision and Mission.

Show Our Value

OPTIMIZE THE CSS SECTOR

Demonstrate Quality

ENHANCE QUALITY AND PERFORMANCE MEASUREMENT

Build Skills and Knowledge

SUPPORT SECTOR CAPACITY BUILDING

Engage Our Members

STRENGTHEN THE NETWORK

Strategic Priority #1: Show Our Value
(Optimize the CSS Sector)

Goals	Strategic Initiatives

• Continue to strengthen relationships with CLHIN and CCAC; proactively contribute to sub-LHIN planning and other LHIN initiatives as leaders
• Advocate for CSS sector locally and provincially
• Deliberately invest in mutually beneficial partnerships
• Demonstrate value and benefit of CSS in the broader sector (use data to advocate)
	• Host a "think tank" to identify top advocacy issues for sector
	• Develop consistent, compelling messages about network to share @ LHIN and partner meetings
	• Initiatives related to Sub-LHINs – TBD
	• Collect data to demonstrate activity and value of sector
	• Develop communication plan to share network value
	    o Use storytelling capacity to develop messages and demonstrate value of the sector
	• Create and implement a partnership strategy map (incl. MHA)
	    o Identify new partnership opportunities, within and outside the sector and LHIN
	    o Identify potential partners (regionally and provincially)
	    o OCSA, Home Care, ABI networks, ONPHA, MHA,

Strategic Priority #2: Demonstrate Quality
(Enhance Quality and Performance Measurement)

Goals	Strategic Initiatives
• Establish common quality indicators and benchmarks • Improve quality and consistency of client assessment info	• Conduct search for current quality indicators and benchmarks in the sector • Define and adopt standard terms and definitions • Standardize assessment protocols and reporting

Strategic Priority #3: Build Skills and Knowledge
(Support Sector Capacity Building)

Goals	Strategic Initiatives

• Create 3 year and annual education plans to address priority sector needs
• Improve access to educational resources
	• Conduct educational needs assessment and offer sessions in priority areas
	• Improve access to existing online educational resources
	   o Develop a webpage with links to resources
	• Host a knowledge exchange event
	   o Patients first – what it means to sector
	   o Showcase member successes
	   o Share info on priorities and collaboration

Strategic Priority #4: Engage Our Members
(Strengthen the Network)

Goals	Strategic Initiatives

• Maximize member contributions to working groups and seek efficiencies
• Increase reported engagement from network members
	• Create and implement a member engagement strategy that includes communication and recognition
	   o Implement a targeted recruiting drive for working group members
	   o Develop tools to standardize and streamline meetings, reporting and evaluation
	• Enhance and promote website

Part 5 – Implementation Framework

The 2014-2017 strategic plan was implemented through the establishment of strategic working groups. The working groups were chaired by members of the Steering Committee, engaged representatives from across the member agencies and were supported by the CSS Network Project Manager. They were tasked with implementing the strategic initiatives identified through the plan. The working groups reported back to the Steering Committee and the Network regularly.

The steering committee has agreed to use the same framework for implementing this strategic plan. Four strategic working groups have been identified for the implementation of this plan. As the chart below shows, the groups will go across strategic priorities in some cases, but each strategic initiative has been assigned to a group to ensure it has a home. Member Education has been moved from a working group responsibility to a staff function, assigned to the Network Project Manager.

The next step in implementation will be to identify chairs and members for each working group. Each group will be supported by the Network Project Manager as required.

Strategic initiative	Working Group
Strategic Priority #1: Show Our Value	
Host a "think tank" to identify top advocacy issues for sector	Optimization Working Group
Develop consistent, compelling messages about network to share @ LHIN and partner meetings	Optimization Working Group
Initiatives related to Sub-LHINs – TBD	Optimization Working Group
Collect data to demonstrate activity and value of sector	Optimization Working Group
Develop communication plan to share network value (use storytelling)	Optimization Working Group
Create and implement a partnership strategy map	Optimization Working Group
Strategic Priority #2: Demonstrate Quality	
Conduct search for current quality indicators and benchmarks in the sector	Performance Measurement Working Group
Implement standard terms and definitions	Standardized Definitions Working Group
Standardize assessment protocols and reporting	Standardized Assessment & Eligibility Working Group
Strategic Priority #3: Build Skills and Knowledge	
Conduct educational needs assessment and offer sessions in priority areas; calendar management (sharing sessions)	Staff Function
Improve access to existing online educational resources	Staff Function
Host a knowledge exchange event	Member Engagement Working Group
Strategic Priority #4: Engage Our Members	
Create and implement a member engagement strategy that includes communication and recognition	Member Engagement Working Group
Enhance and promote website	Member Engagement Working Group

Part 6 – Conclusion

The CSS Network looks forward to the next three years guided by this Plan. It is the outcome of a well planned process of member engagement, analysis of our role and progress to date and thoughtful discussion about the impact and contribution that we want to have in Central LHIN going forward. The four strategic priorities in this Plan provide a clear roadmap for our sector in Central LHIN: building the foundation through a stronger CSS Network and enhancing the capacity of the CSS sector as a key health system partner in achieving health system priorities in Central LHIN such as quality and optimization.

With a clear and consistent focus on this Plan we expect to see success in 2020 that includes: a solid relationship with Central LHIN and other sectors; a strong community voice on matters of importance to our sector; stronger CSS agencies within our LHIN that can meet the changing needs of clients; higher levels of client satisfaction; and overall continued improvement of our healthcare system.

CSS Network List of Members

1. Access Independent Living Services
2. Aphasia Institute
3. Better Living Health & Community Services
4. Canadian Red Cross - York Region Branch
5. Carefirst Seniors & Community Services Association
6. Central Region March of Dimes/March of Dimes Canada
7. CHATS-Community and Home Assistance to Seniors
8. Chippewas of Georgina Island First Nations
9. Circle of Care
10. City of Toronto
11. CNIB (Canadian National Institute for the Blind)
12. Doane House Hospice
13. Etobicoke Services for Seniors
14. Evergreen Hospice
15. Hazel Burns Hospice
16. Hospice Georgina
17. Hospice King-Aurora
18. LOFT Community Services
19. Lumacare
20. North York Seniors Centre
21. North Yorkers for Disabled Persons Inc.
22. PACE Independent Living
23. Participation House Markham
24. Regional Municipality of York
25. Social Services Network (SSN)
26. St. Demetrius Supportive Care Services
27. Villa Colombo
28. Yee Hong Centre for Geriatric Care

List of Appendices

Appendix A: Document scan summary
Appendix B: Table of Key Themes Identified in the Network Member Survey
Appendix C: Full Report of the Network Member Survey
Appendix D: Key Stakeholder Engagement Final Report.

Appendices can be found in the Library in the Members Section of the CSS Network Website.
http://www.cssnetwork.ca