# Charting our Course Forward Brain Injury Services Strategic Plan 2018-2021



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### Introduction:

Brain Injury Services finds its self at a critical turning point in its history as strategic planning was undertaken in January 2018. The organization has new operational leadership, there is an evolution underway with hospitals forming new relationships with primary and community based care, there is a priority to recruit and retain quality staff to provide quality care, insurance regulations have altered the fee for service landscape and most significantly a shortage of affordable and accessible housing along with aging clients with increasing medical needs is requiring the agency to look closely at its current business model and chart a new course forward.

The board and senior leadership team engaged in preliminary conversations regarding the current environment and future challenges and opportunities along with identifying emerging trends that would need to inform a strategic plan.

A decision was made to begin the strategic planning process as an internal exercise. This approach will allow the agency directions to begin mapping the projected health journey of its current client base. As the range of strategic goals are explored external stakeholders will be engaged along the planning process in a more direct, timely and deliberate manner for feasibility, planning and final implementation. Initial action upon approval by the Board of Directors of the Strategic Plan will be to map out the Year 1 Operational Plan. This will allow the senior leadership team to best understand the current challenges, opportunities, and imperatives informed by qualitative and quantitative data.

The strategic planning has moved forward against an assumption that the agency will continue to provide services it is currently funded to provide and will meet the outcomes and metrics required by its funders. Concurrent with this "day-to-day" approach, the strategic imperatives will begin to be explored at an operational level with board oversight and monitoring as the agency moves forward in the coming 3-5 years.

A primary consideration in developing the following strategic plan framework is that it provides the agency with an opportune time to define its client base in which they have both expertise and a well-established accredited history of serving with excellence. BIS is committed to serving clients who benefit from a rehabilitative approach to care, as well as their families and caregivers, as they reclaim their lives after the acquired brain injury and related acute care episodes have been addressed, and adapt to the chronic nature of their injury.

## Who are BIS clients?

The agency's vision is 'every person with a brain injury realizes their full and unique potential'. The majority of clients served by BIS have moderate to severe ABI and are considered to be amongst the 'hardest to serve' ABI population in the province. They have suffered a catastrophic ABI, have chronic cognitive and/or physical impairments and often present with challenging behaviours. Additionally, it is estimated that about half of the clients served have a dual diagnosis of ABI and a mental health condition/addiction. There is also a higher incidence of client's with co-morbid conditions, e.g. diabetes, dementia, and many of this adult population's needs are changing due to aging.

### Who funds services for BIS Clients?

Brain Injury Services funding breaks down per below.

Revenue					
Υe	ars ended March 31				
		<u>2017</u>	<u>_</u>	<u>2016</u>	
	Ministry funding (including via HHS) *	\$ 9,356,066	61.2%	\$ 9,082,163	63.2%
	Local Heath Integration Network	3,185,882	20.8%	3,191,861	22.2%
	Fees	2,243,094	14.7%	1,569,832	10.9%
	Rent, grocery and travel cost recovery	454004	0.00/	105 100	0.00/
	from Clients			465,493	3.2%
	Fundraising, interest & other	43,531	0.3%	58,110	0.4%
		\$15,282,807		\$ 14,367,459	
	*excludes Bethesda client & trans funds				

The Ministry funding includes financial support for specific goals related to clients served and hours of care/ residence days for Outreach Services as well as Assisted Living Services. The LHIN funding is also for goals related to clients served and hours of care/ attendance days/residence days/visits for Outreach Services, Group Services, Assisted Living Services, Social Work and Case Management.

# Where are BIS clients receiving service?

BIS provides services to clients from all over Ontario, within the geographic area aligned with the HNHB LHIN.

# What continues as we take action on the strategic plan?

The commitment to client well-being and rehabilitation guides all that is done at BIS. BIS will continue in its commitment to meeting the quality standards required by Health Quality

Ontario and accrediting bodies, as well meeting the requirements as agreed to in funding agreements and as required by legislation. Engagement in research and best and promising practice development will also continue to ensure clients and staff are at the forefront of caring for clients with chronic and/or moderate to severe ABI in community.

BIS will continue in its current commitment to ensuring the optimal environment for clients through partnerships and outreach programs, and to continually hone its expertise in community-based ABI rehabilitation.