

# BC CHILDREN'S HOSPITAL STRATEGIC PLAN



September 2007



[www.phsa.ca](http://www.phsa.ca)

[www.bcchildrens.ca](http://www.bcchildrens.ca)



September 25, 2007

Our strategic plan for BC Children's Hospital has been reviewed and revisited regularly. With this road map, we continue to work towards achieving our vision of better health for the children and youth of British Columbia.

Through the concerted efforts of the PHSA, the BC Children's Hospital Foundation, and Children's and Sunny Hill's expert physicians, staff and volunteers, many vital steps have been taken to provide our patients and their families with an improved environment for better health. The renovation and relocation of several of our clinics in the new Djavad Mowafaghian Wing has resulted in bright, comfortable, family-sized areas that promote healing and includes the greatly expanded Outpatient Oncology Clinic.

The new Mental Health Building was built through a partnership between BC Mental Health & Addiction Services and BC Children's Hospital Foundation. The facility consolidates child and youth mental health programs under one roof and includes a school room and recreational areas, so our young patients can feel like everyday kids and gain independence, enabling them to re-engage with their families and communities.

Staff and physicians have focused significant energy on planning for future site redevelopment at the Oak Street site to improve the provision of health care, support, education and research.

We have moved from planning to implementation of the initial phase of a clinical information system. And we are committed to changing the way we work by implementing imPROVE—PHSA's program to focus on patients and empower staff—into everything we do.

At the provincial level, major projects have been implemented by Child Health BC to support the needs of children and youth closer to home, regardless of where they live. Significantly, Overwaitea Food Group pledged \$20M through BC Children's Hospital Foundation to support Child Health BC in this endeavour.

Our close partnership with the Child & Family Research Institute continues to support the clinical and laboratory-based research that is vital to improving the health of children and youth.

There remain many challenges; however, I am confident that with the continued support of the PHSA and the incredible dedication and expertise of our front-line staff and leaders, as well as our Foundations, we will achieve our vision of better health for the children and youth.

Sharon Toohey  
President

BC Children's Hospital & Sunny Hill Health Centre for Children



# Table of Contents

Who We Are and What We Do.....	1
Looking Forward: Opportunities and Pressures .....	11
Our Strategic Directions .....	16
• Operational Excellence.....	16
• Knowledge and Innovation .....	17
• System-Wide Improvement.....	17
• Prevention, Promotion, Protection .....	18
Enabling Strategies.....	19

# Who We Are and What We Do

## The Future Direction of BC Children's Hospital

BC Children's Hospital plays an important role in both advancing practice in child and youth health through its commitment to academic health sciences and research, and as a leader in promoting the development of clinical networks that support access to quality services throughout the province.

Children's is more than the province's only tertiary care facility for children and youth. We are a resource for the development of child and youth services across B.C. Children's, which delivers child health and rehabilitation services, is the province's major treatment, teaching and research facility for child health. We also provide primary and secondary services to Vancouver residents.

Sunny Hill Health Centre for Children, a distinct provincial facility within BC Children's Hospital, offers specialized services to children with disabilities, their families and communities throughout British Columbia.

Children's is committed to treatment, teaching and research in child health. We are equally committed to finding new ways to disseminate knowledge and to develop new partnerships for improved health and health services for children and their families.

Child health is more than treatment in times of illness. It is also about promoting health and preventing disease, disability and injury. Early detection and intervention through primary care and appropriate use of specialized health services are the other integral parts of a comprehensive system of health services.

Improving the quality of lives for children living with chronic conditions is an important part of our work at Children's. By providing a range of inpatient and outpatient services and networks, Children's seeks to prevent unnecessary hospitalizations and increase the options for daily life for these children and their families.

Children's is a specialized resource for all children in the province. We seek to promote improvements in the health of BC's children and youth.

These are challenging times—health resources must be used wisely, decisions must be guided by the best evidence, and administrators and providers must find new ways to work together to ensure a creative environment for innovation and quality.

The strategic plan of BC Children's Hospital describes our directions and goals. It sets a course for the next three to five years. The plan brings together vision and resources in a framework of action and evaluation.

### **Vision**

*Better health for children and youth, achieved with partners who work together to ensure access to best practices & best care in the best setting.*

### **Mission**

- *Be a provincial and regional resource providing child and youth health care and services.*
- *Integrate our role as an academic health centre, so that excellence in care is driven by learning and applying new knowledge; this quest for new knowledge is driven by clinical questions, and continual learning is driven by passion for what we do.*
- *Provide provincial and regional leadership in assessing and meeting health-care needs by working with partners to ensure children, and youth throughout BC have access to excellent care.*
- *Support, respect and value our people, recognizing they are the heart and soul of the work we do.*

### **What We Do**

The unique, specialized province-wide resources housed at Children's for the specialized care of children and youth include a trauma centre, neonatal intensive care, kidney and bone marrow transplants, kidney dialysis, open heart surgery, neurosurgery and other complex/tertiary surgical services, cancer treatment, and high level diagnostic and laboratory services.

Children's augments inpatient services with a wide range of outpatient programs, providing therapy, medical care and surgical treatment without an overnight stay. Through traveling clinics and telehealth, specialists consult and provide care to patients "closer to home" throughout BC

Sunny Hill Health Centre for Children offers interdisciplinary assessment, diagnosis, consultation, referral, and, in select cases, treatment for children with complex disabilities throughout the province via traveling clinics and telehealth outreach. Services delivered on-site at Sunny Hill are designed to complement resources available in the child's community. A small number of children require stays in Sunny Hill's 18-bed inpatient unit.

BC Children's Hospital (including Sunny Hill) is an academic health centre affiliated with the University of British Columbia (UBC), and partners with many post-secondary institutions across the province. We play a vital role in the education of health-care professionals from a wide range of disciplines.

Research is a core component of all clinical activities at Children's. Through the Child & Family Research Institute (CFRI), Children's advances the knowledge about and care for children, youth and their families. Research excellence also supports recruiting the very best experts in child and youth health to the province, allowing health-care providers and the provincial population to benefit from the excellence of our local resources. CFRI is located on the same site as Children's, promoting a close relationship between clinicians, researchers, clinical researchers and the patients and families they support.

### **Service Delivery Sites**

In partnership with BC Mental Health & Addiction Services, Children's operates a 142-bed inpatient facility (housing an additional 47 special care nursery beds for BC Women's Hospital & Health Centre), located at 4500 Oak Street, Vancouver, BC It is co-located with BC Women's and CFRI.

Sunny Hill operates an 18-bed inpatient facility.

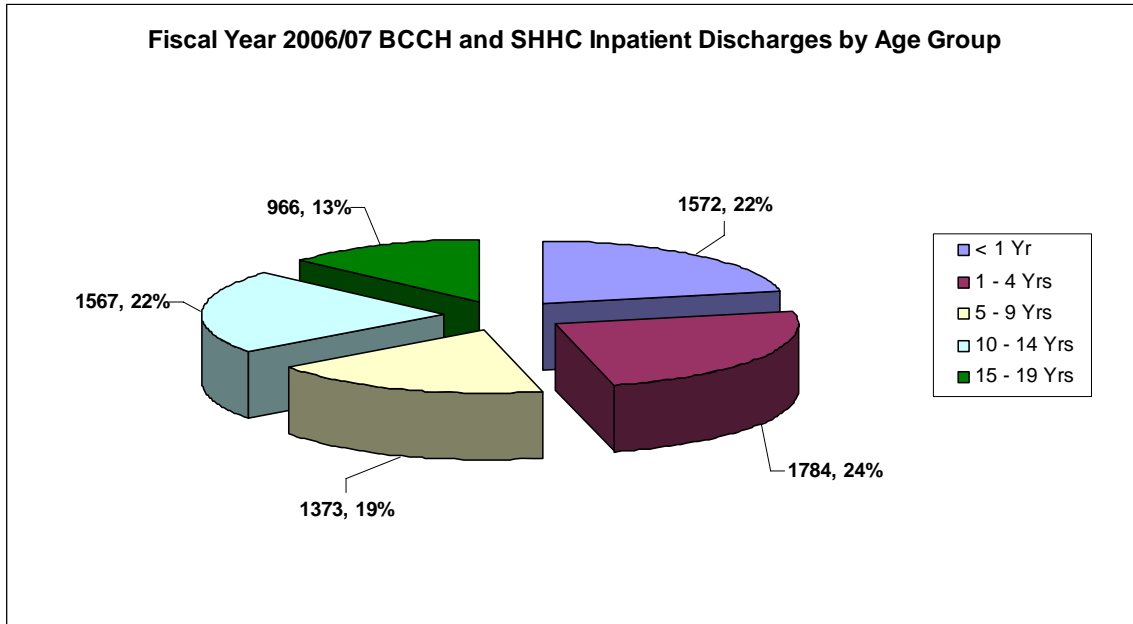
Both Children's and Sunny Hill offer outreach consultation, assessment and treatment services in several communities throughout the province.

Children's and Sunny Hill deliver the following programs:

- Cardiac Sciences
- Critical Care
- Neurosciences
- Oncology/Hematology/Bone Marrow Transplant
- Pediatric General and Sub-Specialty Medicine
- Surgery and Surgical Services
- Diagnostic and Imaging Services
- Child Development and Rehabilitation Programs (delivered by Sunny Hill)

## Who We Serve

**Exhibit 1: Information and trends regarding the children and youth populations served by BC Children's Hospital & Sunny Hill Health Centre for Children**



## Evolving Trends

### Exhibit 2. Summary Stats for FY 2004/05, 2005/06, 2006/07 BC Children's Hospital & Sunny Hill Health Centre for Children

Data	FY 04/05	FY 05/06	FY 06/07
Number of Children's inpatient budgeted beds staffed and in operation	124	123	124
Number of inpatient beds - Sunny Hill Health Centre	14	14	14
Number of Children's inpatient discharges	6,343	6,334	7,066
Number of Children's inpatients from Vancouver Coastal Health (VCHA)	2,394	2,442	2,761
% Children's inpatients from Vancouver Coastal Health (VCH)	38%	39%	39%
Number of Emergency Room Visits	38,382	38,634	37,653
Number of Outpatient Clinic Visits*	101,628	105,346	105,417
Number of Surgical/Medical Daycare Visits**	6,047	6,095	6,036
Number of Professional Service Visits***	7,169	8,179	8,074
Number of Radiology Exams	68,258	70,294	66,645
Number of Laboratory Tests	1,881,078	1,932,927	1,950,000****
Number of Sunny Hill Health Centre outpatient & outreach visits*****	7,377	8,136	7,715

\* Includes Medical Day Unit visits

\*\* Includes Medical Daycare Visits coded as Surgical Daycares

\*\*\* Includes outpatient visits with Allied Health professionals only

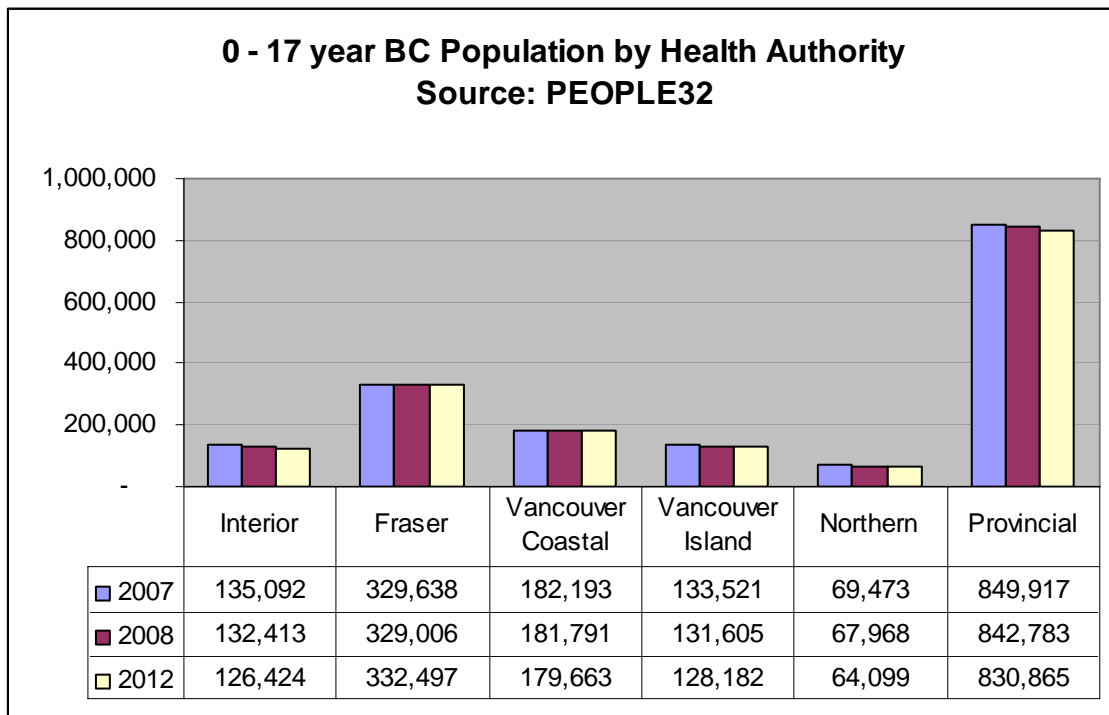
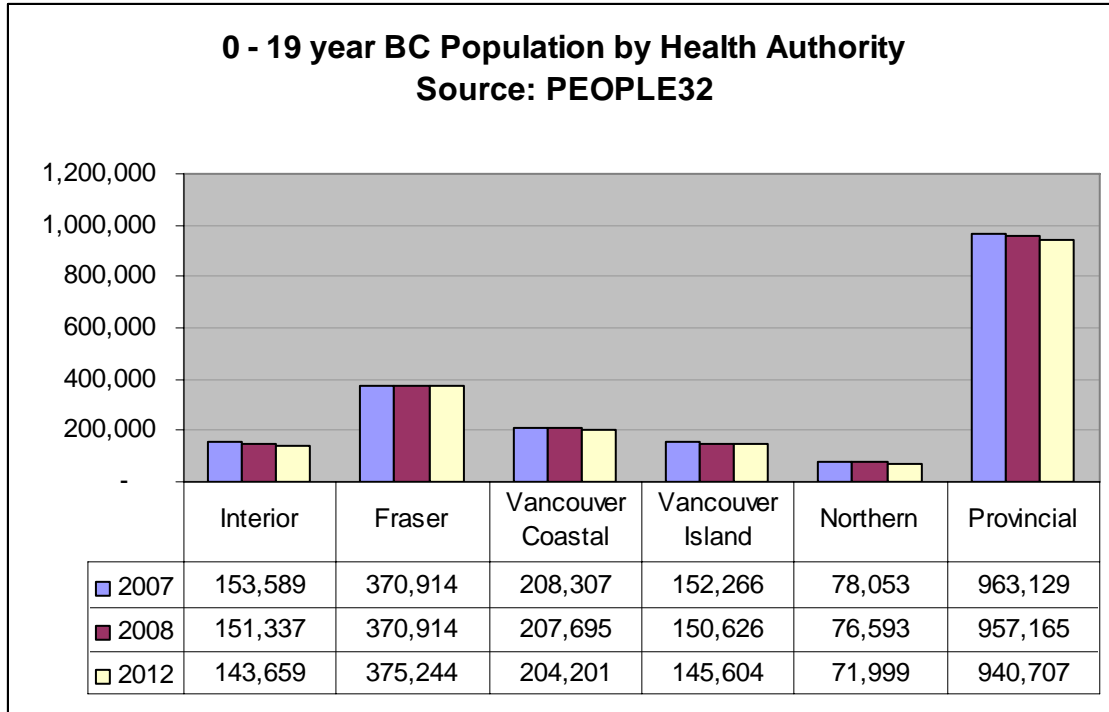
\*\*\*\* Lab data is not available, therefore this is an estimate calculated by DSS based on lab financial compensation expenses. This has not been reviewed by lab.

\*\*\*\*\* The North Island Early Intervention Therapy Contract was transitioned to VIHA on 06/07 (transition completed in August 2006). That does explain the small decrease in Sunny Hill Health Centre outreach visits for the tier3/tier4 services. The "outreach visit" numbers do not include data for the tier 2 contracts (School Therapy and Early Intervention Therapy services)

- Increasingly, the proportion of children admitted to hospital will be at a tertiary level and require complex care.
- With advancements in technology and therapeutics, there will be continued opportunity to shift child health care to daycare and ambulatory settings.
- The health concerns of children with chronic disorders will have increasing prominence as common causes of illness in children decrease as a result of new preventative strategies.
- We will serve more children in their communities through collaboration with regional providers and coordinated support through regional clinics, telehealth and education.
- There will be increased need to plan for major public health or disaster events to ensure that the systems are in place to protect and care for children and youth.
- There will be increased need to deal with seasonal variations in child and youth disease and injury.

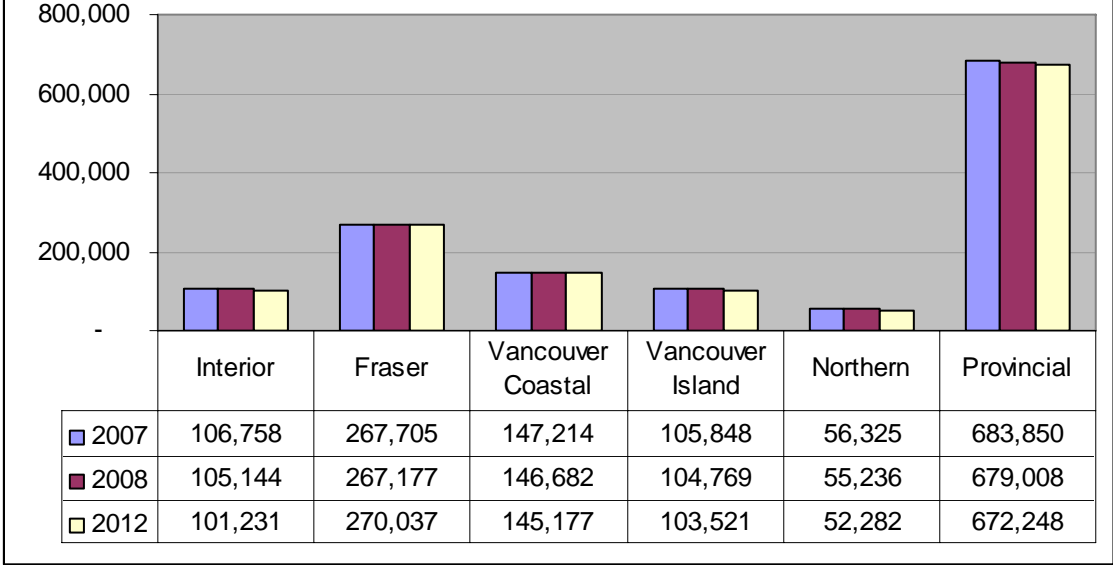
## Demographic Trends

**Exhibit 3: Trends in BC's child and youth populations broken down by health authority**

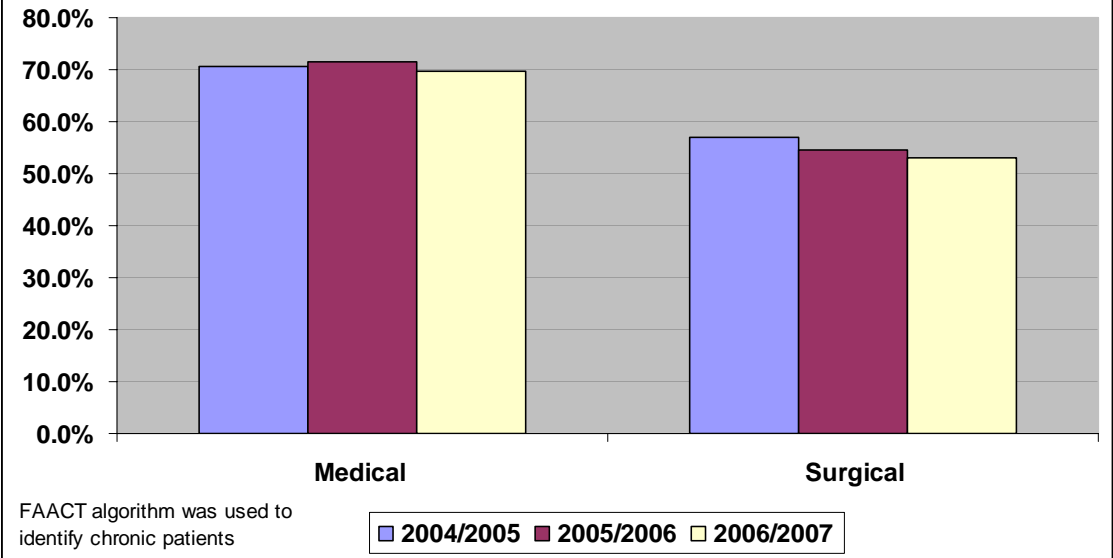


### 0 - 14 year BC Population by Health Authority

Source: PEOPLE32



### Percentage of BCCH Chronic Discharges



*In our daily efforts, we will:*

- *Strive for excellence in providing the best possible quality patient care, education and research using our resources and assets creatively, effectively and efficiently.*
- *Demonstrate respect for each other's unique qualities, interests, life experiences and choices while working thoughtfully together to resolve differences and negotiate competing priorities.*
- *Be open and honest in order to be trustworthy in our relationships.*
- *Work cooperatively and collaboratively with each other, those we serve and our other partners.*
- *Act with compassion and empathy to support all people in pursuing balanced and healthy lives.*
- *Be optimistic, courageous and innovative in our efforts to improve the health and well-being of children and youth, and their families.*
- *Be accountable and ensure our actions are consistent with our words, using self-assessment, respectful feedback and continuous learning to achieve positive change.*
- *Be just and fair with people and act with a social conscience.*

## **How We Connect with Other Parts of the BC Health System and the PHSA**

The PHSA provides a key strategic and organizational framework for supporting and promoting the delivery of high quality and efficient health services and for supporting the research and education missions of Children's.

Children's is most fortunate to have as a key partner the BC Children's Hospital Foundation. The Foundation supports the mission of Children's through fundraising and has been instrumental in supporting the growth of research, major capital construction projects, equipment, education and program innovation. The Foundation is a leader in North America and is a critical partner in our work for the children and youth of this province.

Our affiliation with UBC is key to supporting our partnerships in child and youth health. The UBC Faculty of Medicine Department of Pediatrics and Pediatric Surgical Divisions are located at Children's. We also have strong links with the UBC Schools of Rehabilitation and Speech and Audiology Sciences, as well as excellent relationships with the School of Nursing and other UBC departments. Additional partnerships supporting child health professional training and research exist with a number of other universities and colleges throughout the province.

While this is a strategic plan for Children's, it is important to specifically acknowledge our close working relationship with BC Women's Hospital & Health Centre as we advance care for children and youth. One of our greatest strengths in support of this mission is the co-location of Children's with BC Women's, particularly in the interface between maternity and newborn care. It is critical that we support and foster this relationship if we are to have the best opportunity to achieve our goals.

The Child & Family Research Institute is a joint partnership between the PHSA and UBC, providing the organizational framework and support structure for all research conducted at Children's.

Children's works with numerous public sector, private sector and not-for-profit disease-specific and general health advocacy organizations throughout the province to support province-wide delivery of health services.

Children's is a member of the Canadian Association of Paediatric Health Centres, a key national body that collaborates in supporting the best care for children and youth across Canada. We are also members of the National Association of Children's Hospitals and Related Institutions (NACHRI) based in the United States. Through these and other national and international professional and scientific links, we are able to draw on and contribute to international expertise on child and youth health.

## Looking Forward: Opportunities and Pressures

There have been remarkable changes in children's health. Ongoing advances in technology and medical practice mean that fewer children are hospitalized, and when they do require hospital stays, they are shorter in duration. Increasingly, children and their families are able to receive care and follow-up in their own communities. These advancements in children's health services are the result of coordination and partnership among providers and health authorities.

Looking ahead we see the need to respond in a proactive fashion to the pressures we face and take advantage of the opportunities to achieve our vision of *"Better health for children and youth, achieved with partners who work together to ensure access to the best care in the best setting."*

The following set of strategic planning assumptions related to service pressures, service model, human resources, and funding were used to guide our thinking about priority strategies.

### Key Assumptions: Service Pressures

- The availability, specificity and cost of diagnostic tests and tools will continue to increase.
- Advances in broadband infrastructure and imaging technology will permit digital networking and real time video connections.
- There will be a continued shift in diagnosis and treatment to minimally invasive approaches.
- There will be increased attention on translational research focusing on new therapeutic options for diseases of children and youth, ensuring that they have the full benefit from new technologies.
- There will be increased expectation for coordinated chronic disease management for children and youth, and effective adult transition programs with the goal of reducing the long-term health, emotional and social impacts of these diseases.
- The regional health authorities will develop coordinated child and youth health plans that integrate with provincial and tertiary services.
- The advent of new pathogens will continue to force attention on the need for surveillance and impact infection control including facilities planning, use/reuse of equipment, cleaning; emergency preparedness; and treatment strategies including vaccines.
- Increasing numbers of children will survive previously fatal conditions (e.g. cystic fibrosis, cancer, and congenital heart disease) – requiring extensive health care for children and adolescents, and a need for transitioning to adult care.
- Planned increases in health-care professional trainee programs will go ahead, which will have a significant impact on human and capital resource needs of the hospital.

### **Key Assumptions: Service Model**

- Children's will increasingly work in partnership/network models to achieve its mission and vision. This will add complexity and require new skills and service models.
- Within PHSA, we will strengthen our collaboration with partner agencies with specific attention paid to newborn services, youth health, oncology, mental health, cardiac sciences, renal transplantation, and the BC Centre for Disease Control.
- Children's will maximize collaboration with UBC and the Child & Family Research Institute as well as other academic institutions in the province to optimize the research and educational opportunities focused on the health needs of children and youth.
- With consolidation of Sunny Hill Health Centre for Children on the Oak Street site and modernization of the facilities for acute and critical care of children, we will build community services that support our provincial mandate.
- Human resource shortages will occur in a variety of professional groups over the five years of this plan. This will require innovative strategies to manage workload in a safe and effective manner and may increase costs of recruitment and retention.
- Adequate physician resources will be critical to the success of the strategic plan and we will increasingly move to contracted services to better align the goals of physician groups with the strategic direction of PHSA and its agencies.
- Nursing and the professional disciplines will be equally critical to the success of the strategic plan; the organization and support of these disciplines will be addressed and include capacity building for interprofessional teams.

### **Key Assumptions: Financial**

- Funding continues to be capped at 2002/03 levels, other than adjustments made for labour contracts, PHSA life support programs or reallocation of funds within PHSA.
- There will be ongoing disparity between demand for services and the availability of financial resources, which will call for a process for setting priorities and for the development of innovative strategies.
- The redesign of clinical programs and services to enhance value will need to be a key mechanism for achieving ongoing sustainability of Children's, given that we expect continued pressures for increased demand and costs.

## Staying Focused on Our Goals

### **Challenges and opportunities to improve access to child health services for children across the province**

One of the clear priorities for the public and for pediatric clinicians in the province is ensuring that all children in BC have timely access to appropriate health services, regardless of where they live. Specific needs that have been identified under the umbrella of “improved access” include:

- Improving transportation and coordination of patient transfers.
- Building capacity for child and youth health services in regions across the province.
- Developing guidelines for transferring patients to regional referral centres and Children’s.
- Ensuring that existing resources are being used as effectively as possible. For example, ensuring that only the most acute patients use the highest intensity acute facilities.
- Developing and implementing a coordinated provincial plan for child health services.
- Improving inter-regional transfers.
- Supporting the development of child health data and information systems.
- Driving aspects of clinical coordination and integration.
- Supporting more efficient and appropriate referrals.

### **Challenges and opportunities to improve quality, efficiency and cost effectiveness**

One of the most significant opportunities presented by new approaches in networks and partnerships is the opportunity to bring together clinical experts to improve practice through the development of guidelines, protocols and standards. This work is particularly important for the BC child health-care system because resources are spread across the province among many small communities. As a result, many health professionals may have relatively little experience in some areas of practice. Standards will help define the expectations for communities to deliver child health services. Guidelines will communicate clinical protocols based on best practices and facilitate monitoring practice variations and outcomes.

Improving quality through the actions of a network may be achieved through any of the following:

- Bringing more evidence to decision making. Despite a strong belief in evidence-based practice, we are currently limited by our ability to collect and use information to guide or change practice. Going forward, the monitoring of the results of these standards and using this information to identify areas for further investigation or improvements will be a key focus.

- Supporting opportunities for research and education. Suggested educational opportunities include medical residency/training rotations outside the Lower Mainland and continuing medical education opportunities located in more rural areas.
- Improving research opportunities could include better communication of the research being done across the province, disseminating research results and best practices across the province, and supporting clinician participation in research being undertaken in the province.

**Challenges and opportunities around improving coordination and continuity**

There is consensus among leaders in child health services across BC that the major benefit of child health networks is improved coordination of services and initiatives. This is supported by the experience of child health networks across Canada. In British Columbia, improved coordination is viewed as a requirement to support a more effective and sustainable system.

- Despite our emphasis on the development of information management and sharing using digital technology, Children’s application of these to provincial networks is only in its infancy and could lead to duplication of effort and the wasting of resources. Improved information systems and information management will result in comparable data across regional health authorities and better measurement of outcomes, which will enable better coordination.
- Coordination would improve continuity of care for children and youth with complex and/or chronic health problems.
- Better coordination would enable the development of coordinated child health service plans across the province to reduce competition for funding and human resources.

**Challenges and opportunities around education and research**

Closely linked to our clinical challenges are the challenges of supporting excellence in research and education and having the capacity to respond to both the pressures and the opportunities to support excellence in these areas. Important areas of change include:

- Expansion of the UBC Faculty of Medicine to 256 students over the next several years and the distribution of the faculty throughout the province.
- Expansion in virtually all other professional discipline areas places additional expectations on us in relation to child and youth health training.
- Enormous investment in health research by federal and provincial governments means new opportunity to focus those resources on the health problems of children and youth. As one of the top four child health centres in Canada, we have an obligation to ensure that we have the expertise to compete for these funds. This is consistent with CFRI’s expectation to double research funding over the next five years.

## **Internal Influences**

Over the past year, Children's has integrated a culture of safety and quality that includes capacity building for interprofessional teams and networks with regional health authorities. In partnership with BC Mental Health & Addictions and the BC Children's Hospital Foundation, a new facility opened for children and youth at the site. Significant energy has been focused on planning the redevelopment of acute care services. Within child health, a framework has been developed to prioritize clinical programs and services.

## Our Strategic Directions

The Children’s strategic plan is structured to align with the four strategic directions in the PHSA strategic plan. These four strategic directions are also reflected in the challenges and opportunities faced by Children’s.

- **Operational Excellence:** Improving our ability to achieve our vision through redesign, evaluation and evidence-based decisions.
- **Knowledge and Innovation:** Increasing research and education and enabling the transfer of knowledge into practice improvements.
- **System-wide Improvements:** Using our provincial role and mandate to achieve system-wide changes and maintain access to specialized child and youth health services.
- **Prevention, Promotion, Protection:** Collaborating with partners to shift the focus of the health system “upstream” to reduce the incidence and impact of disease.

For each of these key directions, we have identified a number of priority strategies for Children’s that will focus our collective attention and resources over the next three years as we move forward to address the challenges outlined earlier and harness the potential we have gained as part of a larger provincial entity.

### Priority Strategies

	<b>OPERATIONAL EXCELLENCE</b>	<b>Executive Sponsor</b>	<b>Partners</b>
<b>Priority Strategies</b>	Focus on safety and quality for Children’s and network sites in all aspects of care.	Sharon Toohey	Sr. Directors, Operations
	Implement process redesign utilizing imPROVE methodologies.	Sharon Toohey	PHSA Child Health Executive
	Become the pre-eminent centre in Western Canada in selected highly specialized services.	Chiefs	Dept. Heads
	Support and enable operational excellence in delivery of diagnostic services.	Sharon Toohey	Chief Diagnostic & Therapeutic Serv.
	Implement an electronic health record strategy with clinical information system.	Sharon Toohey	PHSA IM/IT Child Health Executive
	Coordinate administrative infrastructure support within ambulatory subspecialty services to integrate with the provincial mandate.	Sr. Directors, Pediatrics	Dept. Heads Medical Directors Chiefs Child Health BC

	<b>KNOWLEDGE AND INNOVATION</b>	<b>Executive Sponsor</b>	<b>Partners</b>
<b>Priority Strategies</b>	Develop a “learning commons” on the Oak Street site.	Discipline Leaders	Child Health BC Professional Disciplines (pediatrics, nursing, therapy)
	Support clinical outcomes research and the translation of knowledge into better practice province-wide to improve outcomes.	Stuart MacLeod	CFRI UBC Child Health BC
	Focus clinician researcher recruitment and funding to align with CFRI and Children’s clinical priorities.	Chiefs Stuart MacLeod	CFRI
	Strengthen population health and community child health research capacity to support provincial initiatives.	Stuart MacLeod	UBC UNBC/UVIC Child Health BC
	Support development of national and international pediatric networks or collaborations.	Sharon Toohey Foundation Bob Peterson	Chiefs Foundation Child Health BC
	<b>SYSTEM-WIDE IMPROVEMENTS</b>	<b>Executive Sponsor</b>	<b>Partners</b>
<b>Priority Strategies</b>	Promote advancements in child health provincially, nationally, and internationally.	Sharon Toohey Bob Peterson	Regional health authorities (RHA) Child Health BC
	Develop standards, identify and disseminate best practices and facilitate the adoption of outcomes-based practice for child and youth health services.	Sharon Toohey Bob Peterson	RHAs Child Health BC
	Implement provincial plan for sub-specialty clinics in each health authority.	Directors, Medical Surgical Bob Peterson	RHAs Child Health BC
	Facilitate the development and implementation of a provincial framework for delivery of developmental services.	Bob Peterson	MoH/MCFD Child Health BC
	Develop a child/youth chronic disease plan that supports continuity of care, accessibility, and quality within the spectrum of primary to tertiary care.	Directors, Pediatrics	Child Health BC MoH/PHSA
	<b>PREVENTION, PROMOTION, PROTECTION</b>	<b>Executive Sponsor</b>	<b>Partners</b>

<b>Priority Strategies</b>	Develop and implement an advocacy strategy to improve health of children and youth.	Bob Peterson	Foundation
	Improve care and outcome of children and youth living with chronic conditions and reduce their chances of getting secondary illnesses.	Bob Peterson	CFRI
	Learn more about modifiable childhood precursors of adult disease and translate this knowledge to prevention strategies aimed at reducing the incidence of adult chronic disease.	Stuart MacLeod	CFRI

## Enabling Strategies

To be successful in achieving our vision and implementing these priority strategies, we need to:

- Continue to build a culture of safety and quality throughout Children's and Sunny Hill utilizing imPROVE methodologies—PHSA's program to focus on patients and empower staff.
- Focus on our people and on building a culture that supports learning, innovation, and employee engagement.
- Ensure we have the financial and capital resources to implement our plan.
- Demonstrate disciplined and focused leadership in implementation of the first phase of clinical information system.
- Support the BC Children's Hospital Foundation to achieve its capital campaign goals.
- Harness the potential of provincial, national, and international networks and collaboratives, e.g., Canadian Child and Youth Coalition led by Dr. Bob Armstrong.