Toronto Rehab Strategic Plan

Innovative Teams - Transforming Lives



Toronto Rehab Strategic Plan

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A Message from Jan, Mark & Milos

Looking back and looking ahead is UHN's way of ensuring we're leveraging past experiences, to plan for tomorrow's success. As we look back at Toronto Rehab's last strategic plan, we're inspired by all we accomplished.

We built Ontario's first nocturnal dialysis unit for Complex Continuing Care patients with end-stage renal disease, shifting the focus from the process to the person.

We established a first-ever, national network of Spinal Cord Injury clinicians, researchers, and patient partners, to implement and assess best practices and lead to better outcomes.

We expanded access to upper limb therapies that use functional electrical stimulation to re-awaken paralyzed muscles. The Food & Drug Administration's recent approval of MyndMove, means this homegrown therapy now has the potential to increase the independence of patients well beyond our borders.

And when the COVID-19 pandemic gripped the healthcare system, we responded immediately, by inventing COVID rehabilitation for post-acute inpatients, and launching one of the Province's first, virtual, long COVID clinics for outpatients.

These examples, and many more, exemplify Toronto Rehab's success and our commitment to building A Healthier World.

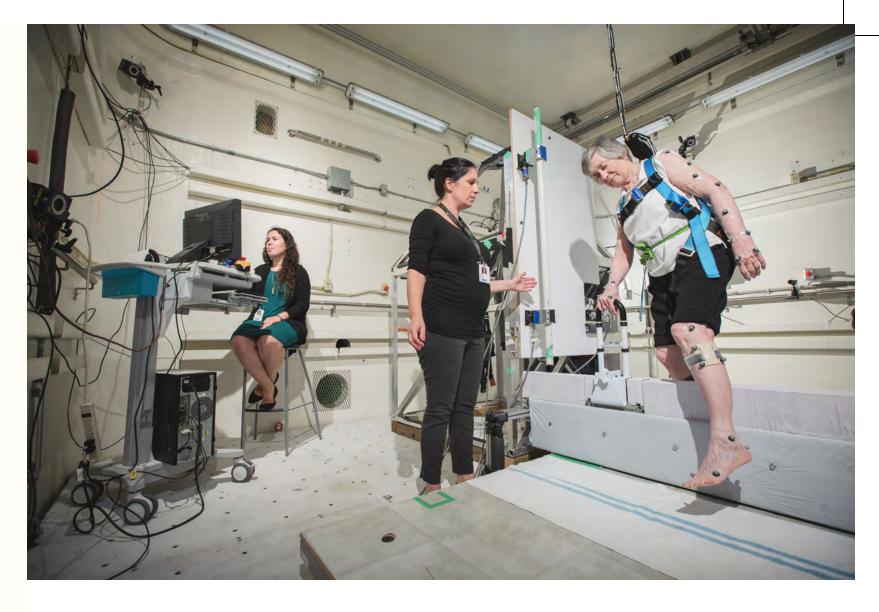
There's never been a more exciting – or essential – time to reimagine and redefine rehabilitation and complex continuing care. The pandemic has challenged us, but has also brought to light what is possible when we come together to achieve a common goal: to deliver exceptional patient care.

In these pages, we detail how we will design our future. Over the next 3 years, we will:

- Invest in the wellbeing of our people and the strength of our culture
- Design seamless rehabilitation experiences across the care continuum
- Integrate research and care to co-invent the future of rehab
- Harness the power of technology to revolutionize rehab

We invite you to join us in realizing Toronto Rehab's 2022-2025 Strategic Plan.

Jan, Mark & Milos



Toronto Rehab Strategic Plan 2022-2025

Our Vision

Innovative Teams - Transforming Lives, in support of A Healthier World

Our Mission

To develop solutions for people living with the consequences of illness, injury and aging through excellence, innovation and the integration of care, research, and education.

Four Strategic Priorities

Through partnership with patients and colleagues, we have defined four strategic priorities, each of which are foundational to our commitment to put patients first.









Toronto Rehab Strategic Plan 2022-2025

Ol Invest in the wellbeing of our people and the strength of our culture







Healthcare workers have risen to the extraordinary challenge that the COVID-19 pandemic has presented, demonstrating their resilience and commitment to providing quality care, and putting the needs of patients and families first. This strategic priority will focus on continuing to build a culture that supports the growth of our people, who have given so much. With the goal of retaining our exceptional staff and recruiting the next generation of providers, we will continue to learn and build off of best practices to foster a workplace that allows people to grow into their future selves, play with new ideas, and discover the future of rehabilitation.

Foster Growth

Create an environment that enables staff to develop the skills and abilities they need to optimize their potential and further their professional goals

Example Initiative: Partner with the Michener Institute to prioritize clinical education to support new role development

Facilitate Flexibility

Build systems that allow for flexibility around when and how staff work, while ensuring we maintain accountability to patients, families, and other partners

Example Initiative: Explore job sharing to create flexibility

Build Community

Design inclusive, safe and welcoming spaces for teams to build relationships, connect with and learn from each other

Example Initiative: Work with teams to find creative ways to gather professionally and socially, yet safely

Support Learners

Develop the next generation of care providers by ensuring exceptional educational experiences

Example Initiative: Create dedicated space for learners

Measures of Success

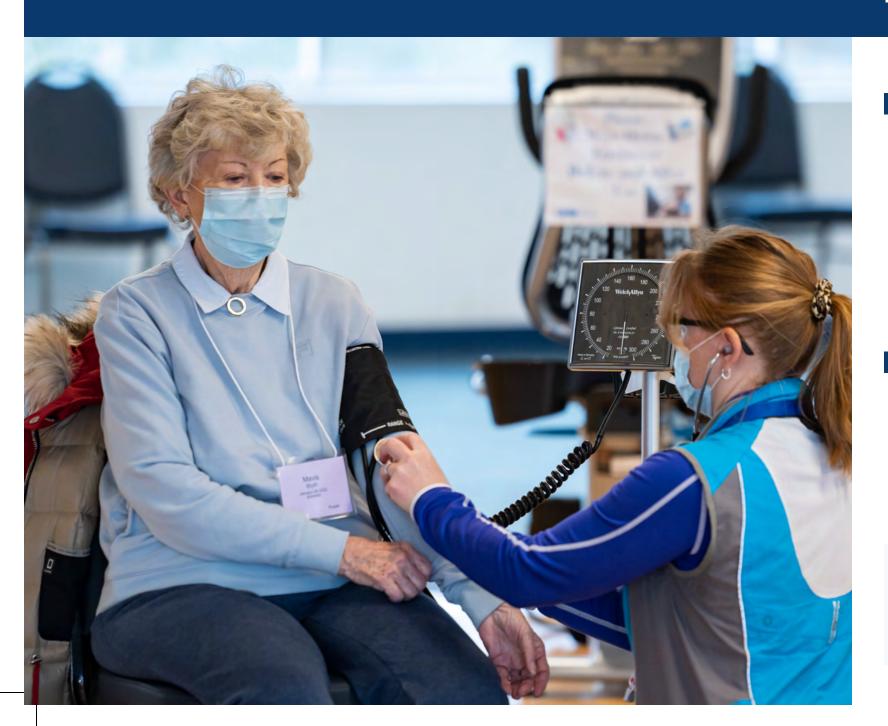
Retention rates

Staff satisfaction

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02 Design seamless rehabilitation experiences across the care continuum

We will ensure patients have access to rehab, wherever they are in their care journey, to drive positive outcomes and experiences throughout the care continuum. Knowing that we cannot chart this course alone, we will co-design these new models of care alongside our patients, families, acute care, and community partners.



Rehab at the Right Place, Right Time

Partner with patients, families, and acute care teams at UHN and beyond to co-design new models of care that bring rehab upstream to optimize outcomes and create more seamless transitions

Example Initiative: Develop interdisciplinary care teams across acute and rehab settings to promote communication and collaborate in the delivery of care

Re-Design Discharge

Co-create "soft landing" discharge programs that create a more supportive experience for patients and families

Example Initiative: Create Integrated Care pathways that amplify support for patients and families into the community

Design a multi-pronged approach to better understand how recovery progresses after patients transition to the community

Evaluate Post-Discharge Outcomes

Example Initiative: Capture patient experience and outcome data across the continuum and define improvement strategies

Activate Partnerships

Create a consistent approach to building trusted partnerships, within UHN and the community, to best support our patients and families throughout their care journey

Example Initiative: Partner with the Gattuso Centre for Social Medicine to ensure we are designing for marginalized populations

Measures of Success

- Patient Quality of Life
- Readmission Rates

■ Wait Times for Post-Discharge Services

"The opportunity to potentially extend my own therapy, while helping researchers learn, is very exciting to me"



Two years after a devastating fall left Frances Lamb immobile from the neck down, she continues to commit herself to recovery and discovery. And at Toronto Rehab's Lyndhurst Centre, where innovation meets care to advance rehabilitation in patients with spinal cord injuries, she's found support through every stage of her journey.

When Frances was admitted as an inpatient, a respirator and feeding tube had recently been removed, she was demonstrating limited mobility in her hands, shoulders and neck, and had spent the previous month laying in an acute-care bed. Ready to face what was in front of her, Frances knew she was in the right hands when Priority #1 for her care team was starting therapy to get her up, moving, and fitted for a wheelchair.

"Once I learned how to operate the chair, I was able to move around the hospital on my own, which felt great," she recalls.

With unwavering support from her family and care team, Frances gradually worked toward discharge, realizing her goals of breathing and eating on her own, and continuing to strengthen her arms and legs. She also learned how to make accommodations for her limited mobility.

"My occupational therapist taught me how to use an adaptive fork that wraps around my hand. Being able to eat independently, without someone else's help, was a big confidence builder."

Providing a seamless journey

Following a three month stay, Frances made a smooth transition to Lyndhurst's outpatient clinics.

"Having therapy at a Centre I had come to know felt very comforting to me. I remember the therapists coming right over to welcome me back, and appeared to be so happy to see me," she says.

Frances may have completed her outpatient program after 14 weeks of building strength and improving her fine motor skills, but her journey doesn't end there.

Today, she continues to visit Lyndhurst as a research participant in the Kite Innovations and Rehab Clinics, which are clinical-research labs embedded in the hospital, that also offer public access to fee-for-service rehabilitation and technology.

So far, she's participated in two rehabilitation clinical trials. The first was a 15-week randomized trial, comparing outcomes of conventional upper-extremity occupational therapy (OT), to functional electrical stimulation. Having been part of the conventional cohort, she was still eligible for the 16-week trial she's currently enrolled in, studying non-invasive cervical spinal cord stimulation.

For Frances, clinical research felt like a natural next step, and a soft place to land, post-rehabilitation.

"The opportunity to potentially extend my own therapy, while helping researchers learn, is very exciting to me," says Frances, a retired teacher.

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O3 Integrate research and care to co-invent the future of rehab

In our ongoing commitment to work at the intersection of care, research, and education we will prioritize efforts that allow clinical and health system experience to drive research questions. Our goal is to foster discovery and the creation of knowledge that rapidly translates into practices and policies that improve the lives of patients and families.

Systematize Collaboration

Create innovative roles and a multi-channel strategy that brings clinicians and researchers together to drive collaboration and sharing of learnings

Example Initiative: Design and structure dual clinician-researcher roles for nurses and allied health professionals

Accelerate Research Translation

Purposefully embed knowledge translation frameworks into programs and dedicate effort to ensuring implementation

Example Initiative: Design for collaboration between operations and research to socialize research findings and facilitate translation to practice

Measure of Success

- Number of clinician authored publications
- Number of new practices implemented

Drive System + Policy Research

Enhance the evidence-base for the systemlevel impact of rehab to advocate for funding models and policies that support the delivery of better, more integrated rehabilitative care

Example Initiative: Alongside provincial partners, leverage research findings to define the ideal care pathway for patients with brain and spinal cord injuries

Integrate Clinical Research Across Rehab + CCC

Grow and expand KITE clinics that bring research seamlessly into clinical environments

Example Initiative: Create opportunities for staff and patients to participate in clinical research endeavors such as the Schroeder Pain Assessment and Research Clinic

• % of time clinicians spend on research

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Harness the power of technology to revolutionize rehab

Technology has played a significant role throughout the COVID-19 pandemic in fostering the delivery of care that spans time and space. Over the next three years, we commit to investing in technology that drives innovation in rehab, makes care more accessible, and allows information to flow amongst a patient's circle of care.

Invest in Innovative Therapies

Develop and commercialize technology that supports movement and improves the delivery of rehab and complex continuing care

Example Initiative: Design textile-based wearables that can monitor patient health remotely to support post-discharge continuation of rehabilitation activities

Support Patient Access

Create a strategy to ensure our patients and families have access to and are comfortable using technology

Example Initiative: Design a Patient Technology Lab to support digital literacy

Put Data to Work

Leverage EPIC, UHN's new Health Information System, to ensure the flow of information between teams and to gather data for research and quality improvement initiatives

Example Initiative: Configure EPIC to automate data collection to examine the relationship between therapy intensity and patient outcomes to drive quality improvement and research

Invest in Infrastructure + Support

Ensure access to hardware and provide staff with training and education to increase digital literacy

Example Initiative: All staff at TR will have ready access to, and training on, necessary hardware for the Synapse implementation

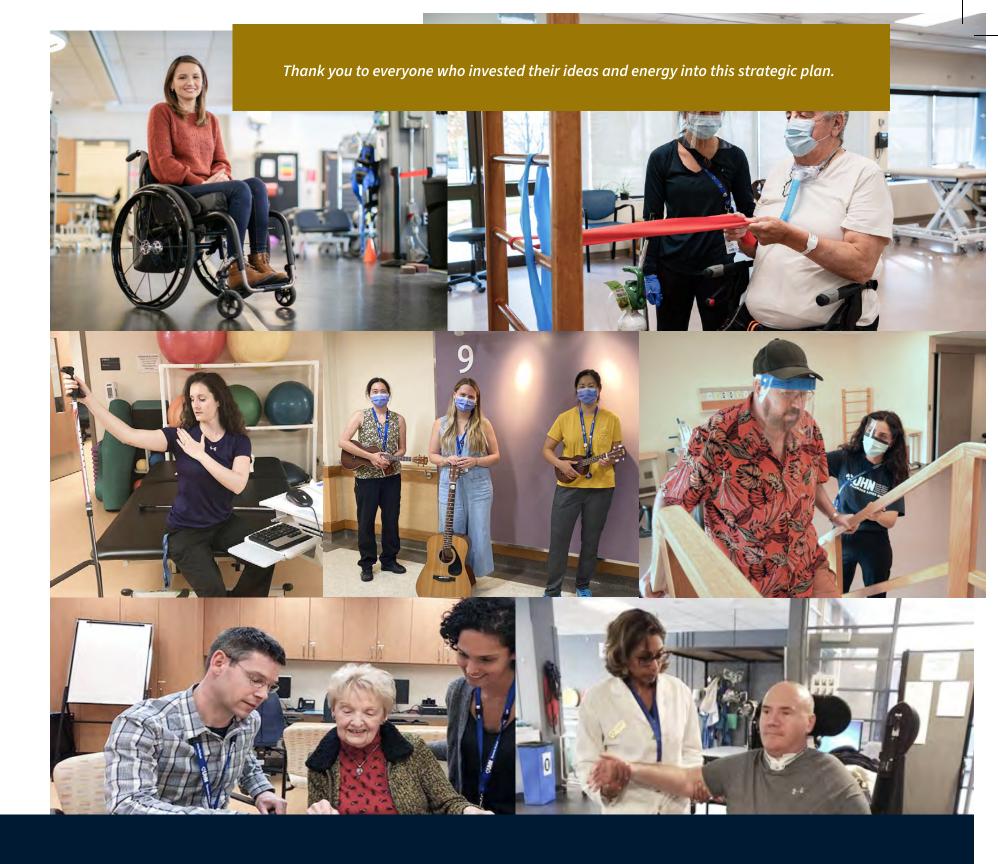
Measure of Success

- MyChart utilization
- Patient quality of life

Clinical time spent: on a device vs. providing

How We Developed This Strategic Plan

This plan was created in partnership with an extensive network of patients, UHN staff, and external stakeholders.



80

Stakeholder interviews

110
Responses to a survey of

our draft priorities

Kickoff workshops with 92 participants

an worksh

Action plan workshops with 71 participants

Where We Go From Here

This plan will create a foundation for annual goal setting across Toronto Rehab. Programs and individual care areas will use the four strategic priorities as a basis for annual goals and focus for the next three years.

With the support of the Toronto Rehab Clinical Executive and the UHN family, we will grow in each of the four priority areas, and help to push forward UHN's strategic plan and vision of A Healthier World. As we do so, we commit to engaging patients and families to ensure their voices are heard and that they have a hand in shaping the future of rehabilitation and complex continuing care.

Acknowledging that the world around us is changing rapidly, we also commit to creating a plan that can adapt to changes in the landscape. We will establish an accountability framework and a broad suite of measures that are meaningful to our patients, families and staff. These will serve as our goals, allowing us to maintain steadfast focus on outcomes, while giving teams room to reshape plans should we need to respond to changes in the health system and beyond.



Check out our video here!





