



Appendix C: Findings of the Environmental Scan

Table C-14: Selected Canadian Health Authorities' Service Plans: Strategic Goals, Objectives/Strategies, Outcomes/Measures

Jurisdiction	Title of Service Plan	Strategic Goals				Equity Reference
		Strategic Goals	Objectives/Strategies	Outcomes/Measures	Operationalized Through	
SASKATCHEWAN						
Saskatoon	Saskatoon Health Region Population & Public Health Strategic & Operational Plan: 2013-2015	<p>Better Care: In partnership with patients and families, improve the individual's experience, achieve timely access and continuously improve health-care safety.</p> <p>Goal 1 - Quality Improvement Culture: To ensure our Population and Public Health's clients receive the best possible care and services.</p> <p>Goal 2 - Cultural Competency: To create the conditions that support PPH employees in providing culturally competent care to the populations we serve, thereby creating cultural safety and removing barriers to care and service.</p> <p>Better Health:</p> <p>Goal 3 - Health Equity: To stabilize and/or reduce the gap in life expectancy between the most and least affluent</p>	<p>Better Care:</p> <p>Goal 1 - Quality Improvement Culture:</p> <p>CLIENT EXPERIENCE</p> <ul style="list-style-type: none"> To implement validated and meaningful client satisfaction measurement tools in at least two health centres. To measure the views of PPH community partners in selected program areas. <p>HAND HYGIENE</p> <ul style="list-style-type: none"> To introduce staff to the steps for appropriate hand hygiene in 2013/14. To establish a means of integrating the steps for appropriate hand hygiene into the daily work of at least four PPH program areas by 2014/15. <p>ACCESSIBILITY</p> <ul style="list-style-type: none"> To conduct an "Hours of Operation Survey" for selected PPH programs to 	<p>Better Care:</p> <p>Goal 1 - Quality Improvement Culture:</p> <p>QUALITY IMPROVEMENT CULTURE</p> <ul style="list-style-type: none"> To achieve accreditation in 2013 without recommendations. To implement the immunization and child health components of Panorama in 2014/15. <p>HAND HYGIENE</p> <ul style="list-style-type: none"> To achieve 100 % hand hygiene compliance in selected clinical areas as per the SHR audit process and develop best practice methods for auditing non-clinical areas. <p>ACCESSIBILITY</p> <ul style="list-style-type: none"> To address client needs by modifying access points for services to enhance our services with the "right 	No programs identified.	<p>Health Status: health, well-being, health equity</p> <p>Root Causes: risk factors, risk conditions, environments, disadvantage, social determinants (gender, race/ethnicity, indigeneity, disability, security (income, food, housing), social safety net, social isolation, assets)</p> <p>Populations: vulnerable, at risk, marginalized</p> <p>Interventions: closing the gap, removing barriers</p>



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		<p>residents of Saskatoon Health Region without adversely affecting quality of life.</p> <p>Goal 4 - Child Health: To improve the overall health of children living in Saskatoon Health Region with a focus on early child health.</p> <p>Goal 5 - STIs, HIV, HCV and Tuberculosis: To enhance the prevention, management and control of STIs, HIV, HCV and/or Tuberculosis and improve the quality of life and life expectancy of those at risk or living with these conditions.</p> <p>Goal 6 - Germ Smart</p> <p>Better Teams: Build safe, supportive and quality workplaces that support patient and family centred care and collaborative practices, and develop a highly skilled, professional and diverse workforce that has a sufficient number and mix of service providers.</p> <p>Goal 7 - Support for Staff Learning: To foster a learning environment in PPH.</p> <p>Goal 8 - Employee Well-being: To improve overall PPH</p>	<p>inform service redesign.</p> <p>Goal 2 - Cultural Competency: To create the conditions that support PPH employees in providing culturally competent care to the populations we serve, thereby creating cultural safety and removing barriers to care and service.</p> <p>Better Health:</p> <p>Goal 3 - Health Equity:</p> <p>MEASUREMENT & REPORTING</p> <ul style="list-style-type: none"> To report on the main contributors to the widening the gap in SHR resident life expectancy (e.g. "The Equity Over Time" Report). To measure and report on the number of SHR Department plans/strategies reflective of health promotion/health equity principles and/or include measures of equity. <p>HEALTH SYSTEM RESPONSE</p> <ul style="list-style-type: none"> That PPH support SHR's Senior Leadership Team to establish a goal to stabilize and/or reduce the gap in life expectancy for SHR overall. To strengthen Western Canadian collaborations with actions that address health system responses to achieve 	<p>service, right time, right provider, and right place" by March 2015.</p> <p>Goal 2 - Cultural Competency:</p> <p>CLIENT SATISFACTION</p> <ul style="list-style-type: none"> That client satisfaction survey findings reveal a majority of PPH clients believe they were treated in a culturally respectful manner. <p>CULTURAL COMPETENCY - IDI PHASE I</p> <ul style="list-style-type: none"> The Strategic Management Team (SMT), Operations (OPS) Team and the departments/programs that have completed their Intercultural Development Inventory survey (IDI) before April 1, 2013 have positive movement along the IDI continuum towards adaptation in 2013/14. <p>Better Health:</p> <p>Goal 3 - Health Equity:</p> <p>Goal 4 - Child Health:</p> <p>EARLY YEARS</p> <ul style="list-style-type: none"> To work with partners to increase the percentage of children ready to learn by 	



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		<p>employee wellbeing.</p> <p>Better Value: Achieve best value for money, improve transparency and accountability, and strategically invest in facilities, equipment and information infrastructure.</p> <p>Goal 9 - Integration of Population and Public Health: To ensure PPH programs and services are aligned in order to improve service effectiveness and increase efficiencies.</p> <p>Goal 10 - Quality, cost effectiveness and efficiency of PPH programs and services: To ensure that PPH programs and services do the right things well and at a reasonable cost.</p>	<p>health equity and to share new knowledge.</p> <ul style="list-style-type: none"> To develop and implement an integrated health equity strategy for PPH and document an inventory of health equity action. <p>Goal 4 - Child Health:</p> <p>EARLY YEARS</p> <ul style="list-style-type: none"> To fully implement and begin evaluation of the PPH Early Child Health and Development Strategy by 2015. <p>Healthy Weights Strategy</p> <ul style="list-style-type: none"> To develop and implement an SHR population health promotion strategy that aligns with provincial healthy weights targets for 2022. <p>Goal 5 - STIs, HIV, HCV and Tuberculosis:</p> <p>SEXUALLY TRANSMITTED INFECTIONS (STIS)</p> <ul style="list-style-type: none"> To establish standard work around linking, engaging and retaining HIV clients to care with treatment as the goal. <p>TUBERCULOSIS (TB) PREVENTION & CONTROL SK</p> <ul style="list-style-type: none"> To implement and evaluate the Saskatchewan TB Strategy. 	<p>kindergarten to 82% by 2018 using the Early Development Index.</p> <p>HEALTHY WEIGHTS STRATEGY</p> <ul style="list-style-type: none"> To develop and implement an SHR population health promotion strategy that aligns with provincial healthy weights targets for 2022. <p>VACCINE PREVENTABLE DISEASE</p> <ul style="list-style-type: none"> To achieve immunization coverage rates for vaccine preventable diseases at a level determined by the Ministry of Health, with an interim measure of 81% in 2014 and 82% in 2015 for children at age 2 years. <p>Goal 5 - STIs, HIV, HCV and Tuberculosis:</p> <p>SEXUALLY TRANSMITTED INFECTIONS (STIS)</p> <ul style="list-style-type: none"> By March 2014, 95% of STI clients seen in the PPH clinic have treatment initiated within 7 days of the case status date. By March 2015, 88% of STI clients seen by all SHR providers are treated within 14 days of the case status date. 	



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			<ul style="list-style-type: none"> To work with partners to support the management and screening of co-infected patients. To work with partners to improve and support Direct Observed Therapy (DOT) by clarifying roles, responsibilities, and accountabilities. <p>Goal 6 - Germ Smart Better Teams:</p> <p>Goal 7 - Support for Staff Learning:</p> <ul style="list-style-type: none"> To build and enhance health promotion, health equity and healthy public policy development competency of PPH staff in selected programs/roles as well as in leadership skills of PPH Managers. To meet or exceed 8 hours of professional development for each in-scope FTE, each fiscal year. To support employee involvement in SHR programs such as succession planning and mentorship, to develop the region's future workforce. To ensure the development and implementation of a cost- 	<p>HIV AND HEPATITIS C (HCV)</p> <ul style="list-style-type: none"> To increase HIV testing by 50% of the 2009 baseline, with testing of high risk populations at a minimum of 10% of the total number and greater volumes being achieved by general practitioners and hospital personnel. <p>TUBERCULOSIS (TB) PREVENTION & CONTROL SK</p> <ul style="list-style-type: none"> To implement the Treatment Order Set provincially and exceed the goal of 90% by March 2014. <p>Goal 6 - Germ Smart</p> <ul style="list-style-type: none"> To launch and evaluate the public hand hygiene campaign, Germ Smart, with the initial focus on childcare facilities, schools, physician offices and select workplaces in 2014, with expansion to additional workplaces in 2015. 90% of registered medical facilities, schools, daycares and workplaces indicate they are satisfied with the promotional materials and approach to support hand hygiene practices. 	



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			<p>effective annual in-service plan that meets both certification and employee learning needs.</p> <ul style="list-style-type: none"> To collaborate with staff to identify internal and external partners to enhance our teams by addressing the “right provider at the right place”. <p>Goal 8 - Employee Well-being:</p> <ul style="list-style-type: none"> To enable a more proactive approach in flexible work arrangements within the parameters of the respective collective and employment agreements. <p>Better Value:</p> <p>Goal 9 - Integration of Population and Public Health:</p> <p>HIV/HCV/TB Objectives:</p> <ul style="list-style-type: none"> To identify opportunities for collaboration and communication with TB, Street Health and Positive Living programs to provide clients with an enhanced approach to preventative and treatment services. To provide sustainable PPH outreach services to support linkages, engagement and retention in HIV care. 	<ul style="list-style-type: none"> 63% of schools are registered in 2014, with an additional 10% in 2015. 75% of childcare facilities are registered in 2014, with an additional 15% in 2015. 25% of physician offices register in 2014, with an additional 25% in 2015. 100 workplaces register in 2014, with an additional 200 in 2015. <p>Better Teams:</p> <p>Goal 7 - Support for Staff Learning:</p> <ul style="list-style-type: none"> To take actions to meet the regional goal for a representative workforce, with a highly skilled, professional and diverse workforce by March 2015. <p>Goal 8 - Employee Well-being:</p> <ul style="list-style-type: none"> To address or mitigate issues arising from Resiliency Workshop for targeted programs by March 2014. To meet or exceed Ministry and SHR targets to reduce PPH overtime and sick time each fiscal year. 	



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			<p>Goal 10 - Quality, cost effectiveness and efficiency of PPH programs and services:</p> <p>Bending the Cost Curve Objective: To develop an A3 for 2013/14 & 2014/15, and balance budget at year end.</p> <p>Quality and Cost Effectiveness Objectives:</p> <ul style="list-style-type: none"> To embed Lean thinking and tools in PPH practice through visibility wall walks, team huddles, high quality metrics for incremental improvement, supported by ongoing staff/management learning each fiscal year. To conduct a research project on restaurant inspection frequency and implement findings in 2016. 	<p>Better Value:</p> <p>Goal 9 - Integration of Population and Public Health:</p> <p>Goal 10 - Quality, cost effectiveness and efficiency of PPH programs and services:</p> <p>Bending the Cost Curve Objective:</p> <ul style="list-style-type: none"> To develop an A3 for 2013/14 & 2014/15, and balance budget at year end. To implement the vaccine management component of Panorama by March 2014. To implement Schedule View at Health Centres by September 2014. To choose two areas to value stream map and PDCA the non-value add components by March 2015. 100% of staff are able to identify waste, A3 problem-solving opportunities and the need for 5S by March 2015. 	



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MANITOBA					
Winnipeg	<p>Winnipeg Regional Health Authority (WRHA)</p> <p>2016 to 2021 Strategic Plan</p>	<p>Enhance Patient Experience: Enhance the experience of those we serve by striving to provide outstanding, compassionate, dignified care in everything we do.</p> <p>Improve Quality and Integration: Continuous efforts to improve the services we provide, with specific emphasis on population health, access, patient safety, client-centeredness, continuity, effectiveness, efficiency, and addressing health inequities.</p> <p>Involve the Public : Work with the community, patients and families to improve health and well-being by forging partnerships and collaborating with those we serve. We will listen to those we serve to engage them in our improvement efforts.</p> <p>Advance Research and Education: Partner with research and academic stakeholders to provide innovative, evidence informed, sustainable programs and services. We will further evolve the academic healthsciences</p>	<p>IMPROVE PATIENT FLOW</p> <ul style="list-style-type: none"> • Deliver the right healthcare, in the right place, and at the right time. • Engage the public in helping to shape health system design opportunities and potential solutions. • Work with other Regional Health Authorities on provincial system flow. • Review the role of individual hospitals, taking into account how they function within the context of the broader healthcare system. • Advocate for and enable staffing models for service delivery 7 days/week in all sectors. • Explore new models of enhancing health service delivery to the elderly. • Further integrate programs and service areas within and between health sectors (e.g. chronic disease, care of the elderly, cancer patient journey, priority populations, mental health, and maternal/child health), and 	<p>IMPROVE PATIENT FLOW</p> <ul style="list-style-type: none"> • Wait Times for Non-Admitted patients • Wait Times for Admitted patients • Non-Emergent ED Visits • Average Length of Stay: Estimated Length of Stay (ALOS:ELOS) • % Alternate Level of Care (ALC) • ED visitation disparity rate ratio <p>MANAGE RESOURCES</p> <ul style="list-style-type: none"> • Average Resource Intensity Weight • Adjusted Cost per Equivalent Patient Day • Total Sites costs/ Patient Day Equivalents • Cost per Weighted Case – Cost of Standard Hospital Stay <p>IMPROVE ENGAGEMENT</p> <ul style="list-style-type: none"> • Service provider engagement scores • Employee attendance 	<p>Health Status: health, well-being, health equity, health inequity</p> <p>Populations: vulnerable, at risk, priority, marginalized</p> <p>Interventions: downstream, primary prevention, addressing inequity</p>



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		<p>network where clinical and population health education and research activities are aligned and integrated.</p> <p>Build Sustainability: Balance the provision across the continuum of healthcare services within available resources (fiscal, human, infrastructure) to ensure a sustainable healthcare system. Deliver the right health services in the right place and at the right time.</p> <p>Engage Service Providers: Create a work environment that is engaging to service providers, enhancing their contribution to achieving priorities on a cost-effective basis, and striving to meet the needs of those we serve.</p>	<p>improve care between transition points.</p> <ul style="list-style-type: none"> Identify strategies, collaborations and other approaches that will demonstrate an impact in improving health equity and the consequential use of the health care system, including emphasis on health promotion strategies. Foster a working environment that creates new knowledge through research and innovation, and encourages collaboration amongst health decision makers, policy makers, researchers, and academics in the application of new knowledge. <p>MANAGE RESOURCES</p> <ul style="list-style-type: none"> Create an accountable financial management culture where financial implications are considered in operational decision making. Establish a transparent resource (re)allocation methodology that includes a health equity lens. Seek public feedback regarding resourcing priorities and choices. 			



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			<ul style="list-style-type: none"> • Reduce waste and improve productivity in delivery of programs and services. • Implement business technologies, improve business processes, and enhance reporting that support managers in their roles. • Link population health, health system utilization, outcome, and quality data to resources so we can become better informed in our resource (re)allocation and quality improvement efforts. • Address resource issues through effective prioritization of work in order to relieve overburden throughout the health care system. <p>IMPROVE ENGAGEMENT</p> <ul style="list-style-type: none"> • Provide support and leadership development for managers toward meeting employee needs and fostering a work environment of engagement and accountability at all levels. • Alleviate the manager span of control problem. 			



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			<ul style="list-style-type: none"> Continually conduct root cause analysis of lowest engagement- scoring organizational units and resolve the root cause problems. Involve service providers to ensure they can contribute to efforts at improving flow, managing resources and improving the overall quality of service. Participate in provincial workforce planning efforts to ensure adequate supply of healthcare staff in anticipation of abnormally high volume of retirements. Initiate measurement of physician engagement and develop action plans responsive to the findings. 		
ONTARIO					
Simcoe-Muskoka	Strategic Plan 2016-2017	<p>Urgent Public Health Issues: Identify and address urgent public health issues that require a coordinated and comprehensive agency response.</p> <p>Determina</p>	<p>Urgent Public Health Issues:</p> <ul style="list-style-type: none"> Respond to provincial public health funding changes, emerging public health mandate revisions and health system transformations. Implement the agency wide action plan to address climate change. 		<p>Health Status: health inequity</p> <p>Root Causes: risk factors, social determinants</p> <p>Populations: vulnerable, at risk, low income</p> <p>Interventions:</p>



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	<p>nts of Health: Address the factors that create inequities in overall health and improve the quality of life for population s at risk of</p>		<ul style="list-style-type: none"> Respond to unanticipated public health issues that have the potential to disrupt programs and services. Determinants of Health: <ul style="list-style-type: none"> Implement the agency action plan to meet the public health needs of individuals and families living in low income. Assess populations at risk of health inequities and identify those that require an agency response. Organizational Capacity: <ul style="list-style-type: none"> Implement the human resources strategy. Implement the enhanced Client Health Record Information System (CHRIS) in at least two programs. Leverage partnerships to enhance human resource capacity. Accountability and Performance Measurement: <ul style="list-style-type: none"> Demonstrate compliance with public health standards, progress towards key performance indicators and quality improvement actions using the Performance Management Framework. 			improve quality of life



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		<p>poor health outcomes.</p> <p>Organizational Capacity: Enhance our knowledge, skills and practices to increase our ability to respond to community needs and optimize service delivery.</p> <p>Accountability and Performance</p> <p>Measurement: Demonstrate efficiency and effectiveness, and enhance systems that measure and communicate progress on our priorities, programs and services.</p>			
Sudbury	2013–2017 Strategic Plan	<ol style="list-style-type: none"> 1. Champion and lead equitable opportunities for health 2. Strengthen relationships 3. Strengthen evidence-informed public health practice 4. Support community actions promoting health equity 5. Foster organization-wide excellence in leadership and innovation 	<ol style="list-style-type: none"> 1. Champion and lead equitable opportunities for health <ul style="list-style-type: none"> • Advocate for policies that address health equity. • Reduce social and economic barriers to health. • Address a broad range of underlying factors that impact health. • Support all communities to reach their full health potential. 	<ol style="list-style-type: none"> 1. Champion and lead equitable opportunities for health <ul style="list-style-type: none"> • Housing Complaints and Marginalized Populations • Supporting All SDHU Communities in Injury Prevention • Accommodating People with Disabilities in the Food Handler Training and Certification Program 2. Strengthen relationships 	<p>Health Status: health, health equity</p> <p>Root Causes: risk factors, socioeconomic, social determinants (disability, security (housing, income), social safety net, diversity)</p> <p>Populations: vulnerable, at risk, marginalized</p>



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			<p>2. Strengthen relationships</p> <ul style="list-style-type: none"> Invest in relationships and innovative partnerships based on community needs and opportunities. Help build capacity with our partners to promote resilience in our communities and neighbourhoods. Monitor our effectiveness at working in partnership. Collaborate with a diverse range of sectors. <p>3. Strengthen evidence-informed public health practice</p> <ul style="list-style-type: none"> Implement effective processes and outcomes to use and generate quality evidence. Apply relevant and timely surveillance, evaluation and research results. Exchange knowledge, internally and externally. <p>4. Support community actions promoting health equity</p> <ul style="list-style-type: none"> Facilitate diverse community engagement. Support awareness, education, advocacy and policy development at local, 	<ul style="list-style-type: none"> Relationships Are Key for Creating Action in Our Community! Municipal Leaders' Breakfast Partnerships to Strengthen Our Communities <p>3. Strengthen evidence-informed public health practice</p> <ul style="list-style-type: none"> Embracing Evidence-Informed Practice: A Journey of Organizational Change Linking Evidence to Improve Local Air Quality Knowledge Dissemination Leads to New Stakeholder Relationship <p>4. Support community actions promoting health equity</p> <ul style="list-style-type: none"> Treating Poverty – A Workshop for Family Physicians Action Around Supportive Strategies for Teen Families Living in Sudbury Collaboration for Smoke-Free Social Housing <p>5. Foster organization-wide excellence in leadership</p>		<p>Interventions: closing the gap (i.e., reducing barriers), accommodation</p>



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			provincial, and federal levels. <ul style="list-style-type: none"> Tailor programs and services to reflect community voices and needs. Seek community input on issues that impact health equity. 5. Foster organization-wide excellence in leadership and innovation <ul style="list-style-type: none"> Cultivate a skilled, diverse, and responsive workforce. Promote staff engagement and support internal collaboration. Invest resources wisely. Build capacity to support staff and management core competencies. Ensure continuous improvement in organizational performance. Promote a learning organization. 	and innovation <ul style="list-style-type: none"> Elephant in the Room Campaign Promoting Excellence in Client-Centred Service Delivery Developing a New, More Accessible Website 		
York Region	2015 to 2019 Strategic Plan From Vision to Results	Support community health and well-being by: <ol style="list-style-type: none"> Increasing the range of available and affordable housing choices Protecting public health Making our communities 	1. Increasing the range of available and affordable housing choices <ol style="list-style-type: none"> Increase and sustain the rental housing supply Support home 	1. Increasing the range of available and affordable housing choices <ul style="list-style-type: none"> Increase number of subsidized households Increase percentage of total housing stock medium/high 	Health Status: health, well-being Root Causes: risk conditions, social determinants (security (housing), social safety net, social inclusion)	



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	4. Strengthening the Region's network of human services to support people in achieving their potential	<p>more welcoming and inclusive</p> <p>4. Strengthening the Region's network of human services to support people in achieving their potential</p>	<p>ownership affordability</p> <p>1.3 Strengthen services for homeless people and those at risk of being homeless to find and keep housing</p> <p>2. Protecting public health</p> <p>2.1 Optimize the use of paramedic resources so residents have access to appropriate and timely health care</p> <p>2.2 Advance collaborative efforts to increase earlier and streamlined access to mental health supports to connect people at risk</p> <p>2.3 Deliver high quality programs to promote health and prevent injury</p> <p>3. Making our communities more welcoming and inclusive</p> <p>3.1 Finalize and implement Corporate Seniors Strategy</p> <p>3.2 Advance York Region's plans to promote diversity and inclusivity</p> <p>3.3 Implement Active Transportation Network</p> <p>4. Strengthening the Region's network of human services to support</p>	<p>density residential housing</p> <ul style="list-style-type: none"> • Increase number of households that receive housing assistance • Increase number of shelter beds <p>2. Protecting public health</p> <ul style="list-style-type: none"> • Decrease number of long term care residents transported to hospital • Reduction in mental health crisis calls to 911 • Increase number of vaccines administered • Maintain percentage of samples that meet Ontario drinking water standard <p>3. Making our communities more welcoming and inclusive</p> <ul style="list-style-type: none"> • Performance Measures will be identified through the annual reporting on the Plan's progress (if applicable) • Increase number of bike lane and paved shoulder kilometres <p>4. Strengthening the Region's network of</p>	<p>Populations: vulnerable, at risk, marginalized</p>



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			<p>people in achieving their potential</p> <p>4.1 Grow the Community Investment Fund Program</p> <p>4.2 Grow collaboration across municipal, educational, health care, non-profit sectors by leading the 2015 to 2019 plans and actions of the Human Services Planning Board</p>	<p>human services to support people in achieving their potential</p> <ul style="list-style-type: none"> • Maintain per capita investment of the Community Investment Fund • Maintain or grow number of individual and collective actions of the Board 	