



<b>Type:</b>	General Management
<b>Authority:</b>	Board
<b>Related Documents:</b>	Strategic Plan 2022-2025 POL-102 Vision, Mission, Values Appendix Current 5-Year Plan

**Preamble**

The work of Grey Bruce Hospice Inc. (GBH) will be guided by the Strategic Plan and the operations by a variety of workplans.

**Policy Statement**

Directors and staff members will participate in the creation of an organizational Strategic Plan at appropriate intervals – no greater than every five years.

**103.01 Purpose of Planning**

The purpose of the Planning Policy is to establish a planning process that enables The Grey Bruce Hospice Inc. (GBH) to:

1. Meet the needs of the community;
2. Maintain continuity of service;
3. Respond effectively to change;
4. Budget in an effective and responsible manner;
5. Ensure the GBH services are modern and meeting industry standards;
6. Ensure that the Board and personnel share a common understanding of what the organization is trying to achieve; and
7. Ensure the joint governance bodies of the Board and Foundation are working in concert to achieve the shared mission and vision.

**103.02 Authority**

1. Planning shall be conducted by the party responsible for the action.
  - a. The Board shall approve all governance planning documents.
  - b. The ED shall approve all operational planning documents.
2. The ultimate planning documents of the organization shall be the Strategic Plan, annual Action Plan and annual Budget, each of which are approved by the Board.

**103.03 Board Planning**

1. The Strategic Planning Process will include a review of the Mission, Vision, Values as well as the identification of Strategic Goals. Staff members will have work plans that are based upon the organization's Strategic Plan. The Board of Directors will set its annual budget and current priorities based on the Strategic Plan. The Strategic Plan will be shared publicly via the website and provided to the LHIN or future funding body (i.e., OHT) as required..

2. Towards the end of each Strategic Plan, the Board shall develop a new or revised four-year Strategic Plan which includes a mission and/or vision statement, values, goals and strategies. In this process the Board will review and consider:
  - a. The character and needs of the residents, families/caregivers, and staff as part of its regular analysis;
  - b. The role of the GBH in the community as part of its regular analysis;
  - c. Palliative care priorities;
  - d. Future growth projections; and
  - e. Fiscal needs and restraints.
3. Before the end of each fiscal year, the Board shall review and assess both the Strategic Plan and the Annual Action Plan. The Board will be guided in this process both by the collection of relevant data and by consultations with staff and the Leadership Team.

#### **103.04 Strategic Plan Development**

The process for the development of the Strategic Plan will be the responsibility of the Board and include:

1. Consultation, input and final approval from the Board Committees
2. Consultation and input from the Leadership Team;
3. Input and information from clients, families/caregivers and partner agencies;
4. Staff input. Review of relevant local, provincial and national planning documents impacting palliative care (such as LHIN strategic plan; HPCO; CHPCA; QHPCCO); and
5. Other information and resources deemed to be of relevance.

#### **103.05 Staff Planning**

1. The ED shall be responsible for creating an annual and long-range work plan. This document shall be used for planning budget, staffing, and space needs;
2. Annual work plans shall be presented to the Board in open session and accepted as part of the larger Annual Plan; and
3. Regular reporting shall occur where the ED and designated staff report on successes and challenges to achieving the plan.

#### **103.06 Annual Report**

The ED prepares an Annual Report of the previous year in time for the AGM or by the end of September, whichever comes first. This report will include:

1. Review of the previous year's Annual Action Plan;
2. Priorities for the coming year;
3. Summaries of the state of GBH and Chapman House;
4. Usage;
5. Audited financial statements.

#### **103.07 Emergency Planning**

The ED prepares Emergency Planning documents.

1. Any Plans which relate to a change in service model as a result of the emergency, shall be approved by the Board. Such Plans include but are not limited to:
  - a. Pandemic Plan;
  - b. Business Continuity Plan

- c. ED Succession Plan
- 2. Any Plans which are Health & Safety or Legislated plans shall be completed by the ED and approved by the relevant parties. Such Plans include but are not limited to:
  - a. Fire Safety Plan (to be approved by the Owen Sound Fire Department);
  - b. Accessibility Plan to be endorsed by the JHSC and approved by the ED.

**103.08 Review Cycle**

This policy will be reviewed at least every three years.

**Original Approval:** 11-27-2019

**Reviewed On:**

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