



TO: Chair and Members of the Board of Health

FROM: Christopher Mackie, Medical Officer of Health; Michael Clarke, CEO (Interim)

DATE: 2021 January 21

STRATEGIC PLANNING UPDATE

Recommendation

It is recommended that the Board of Health:

- 1) Receive Report No. 02-21 re “Strategic Planning Update” for information; and*
- 2) Direct staff to work with the Governance Committee to develop and finalize a Draft Provisional Strategic Plan, inclusive of the draft strategic directions outlined herein, for consideration of the Board of Health.*

Key Points

- With the conclusion of the 2015-2020 strategic plan, a renewed strategic plan is required.
- The context of the current pandemic and the associated demands on health unit staff and leadership are significant and prevent meaningful engagement in a robust strategic planning process.
- Adoption of a provisional strategic plan, inclusive of previously recognized Board of Health priorities, is recommended at this time.

Background

As the 2015-2020 strategic plan has concluded, it is important for the Board of Health to renew its strategy. The strategic planning process commonly includes comprehensive environmental scanning, including the Political, Economic, Social, Technological, Legal and Environmental (PESTLE) factors that are anticipated to influence the organization in the foreseeable future. Key strategic priorities are identified via this process, which is typically completed with participation from a broad range of internal and external stakeholders to ensure multiple perspectives. Such a process has several opportunities for engagement. Subsequent steps in the planning process typically include refinement of priorities into strategic directions and understanding associated impacts to financial and human resources. Strategic planning also often includes refreshing the organizational vision, mission and values, which requires robust staff and stakeholder engagement to ensure they are truly meaningful to those charged with enacting them.

The Board of Health has consistently recognized the hard work of staff at all levels of the organization in the context of the current pandemic. This work continues to accelerate, both due to increasing COVID-19 case counts in London and Middlesex, and the launch of the largest and most complex vaccine campaign in Canada’s history. At the same time, pressures in non-pandemic programming continue to mount, both in terms of reduced staffing due to redeployments, and increasing demand for some programs, such as the Seniors Dental program. Capacity within the organization is stretched to its furthest extent, presenting serious challenges to meaningful engagement in a fulsome strategic planning process. Levels of change fatigue were high even prior to the pandemic, and at this point there is a significant risk of burnout at all levels of the organization.

A Provisional Strategic Plan

One solution, which recognizes the need to advance the strategic work of the organization while balancing the context provided above, is the development of a *provisional strategic plan*. This provisional plan, which would guide the organization for the next 18 months and assume no change to the current vision, mission and values of MLHU, would focus in part on previously identified, Board of Health-approved key priorities. The condensed development process, limited to Board of Health and Senior Leadership engagement, would leverage other work that has had input from across the organization, while still allowing the opportunity for refinement of priorities previously approved by the Board. A comprehensive, longer-term strategic planning process would be undertaken a time when organizational capacity can support the required levels of meaningful engagement.

Key Priorities for the Provisional Strategic Plan

A provisional strategic plan would focus on strategic directions and key priorities approved by the Board of Health in the past year. Each of these would be implemented, as always, through a health equity lens and would continue to focus attention on the needs of those who are most at risk or otherwise marginalized. These four strategic directions include:

- 1) MLHU will continue to be leaders in the COVID-19 response, including case and contact management, outbreak management, the vaccine campaign, and public and stakeholder guidance and reporting. This work was discussed at the Board of Health regularly, and [a related proposal](#) was approved at the Board meeting of July 2020.
- 2) MLHU will work to address priority recovery issues, including food security, domestic violence, racism, mental health and substance misuse. These were [presented](#) to the Board of Health and approved at the meeting of November 2020.
- 3) MLHU will actively participate in health care system reform and [public health modernization](#), including through Ontario Health, the Western Ontario Health Team, and other opportunities as they arise. The Board of Health has received periodic verbal and written updates on this work primarily through the Medical Officer of Health activity report, such as in [March](#), [July](#), and [November](#) of 2020.
- 4) MLHU will continue to strive for organizational excellence through strengthened processes and infrastructure, including governance policies, financial processes, and information technology supports, along with other issues. This work has been primarily reported through the Governance Committee to the Board of Health, such as in [February](#), [June](#), [July](#), and [October](#) of 2020.

Focusing on these four key strategic directions will ensure MLHU can continue to be a leading public health agency by providing a clear path forward during these unprecedented times.

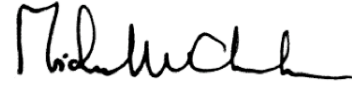
Next Steps

With endorsement from the Board of Health, a condensed provisional strategic plan development process will be planned, including two half-day virtual retreats with the Board of Health and Senior Leadership. A final draft provisional strategic plan would be presented for consideration of the Board of Health in February 2021.

This report was prepared by the Office of the Medical Officer of Health and the Healthy Organization Division.



Christopher Mackie, MD, MHSc, CCFP, FRCPC
Medical Officer of Health



Michael Clarke, PhD
Chief Executive Officer (Interim)