

The Strategic Plan of LutherCare Communities Saskatoon, Saskatchewan For 2014-2017

1. Strategic Context

1.1 Historical Context: LutherCare Communities

LutherCare Communities (LCC) is part of the broader social ministry of the Evangelical Lutheran Church in Canada (ELCIC). Being involved in social ministry is an integral part of our history as Lutherans.

Henry Melchior Muhlenberg, the founder of Lutheranism in America in the 18th century, was also in the forefront of humanitarian concern for those in need. In the 19th century, William Alfred Passavant was the foremost American Lutheran in establishing “inner missions,” establishing the first Protestant hospital in Pittsburgh, Pennsylvania, in 1849.

Lutheranism in Canada was established in relation to United States churches that were predecessors to the Evangelical Lutheran Church in Canada. In Canada, some of the early agencies under the auspices of the Lutheran Church in America (LCA) and the Evangelical Lutheran Church of Canada (ELCC) were St. Paul’s Old Folks Home in Melville, Saskatchewan; Bethany Home in Camrose, Alberta; and Lutheran Sunset Home in Saskatoon. Other developments in social ministry included services to orphans, refugees, and the disabled.

The foundation for Lutheran social ministry is found in the gospel of Jesus Christ, which tells a “story” of the revelation of God’s love for humankind, the fulfillment of the scriptures, of God’s mighty acts for the people of Israel, and what the prophets foretold in God’s name. Among those Gospel accounts are a multitude of stories that embody the love of Christ in the caring ministries of Lutheran social services. As we read in Colossians 3:12, “...clothe yourselves with compassion, kindness, humility, gentleness, and patience.”

Being Lutheran in social ministry is to be shaped in values, leadership, and practice by biblical and theological themes that are shared with the larger Christian community. In our service, we pledge to uphold the dignity of every person, for we are told in Genesis 1:26-27 that all people are created in the image of God.

Being Lutheran in social ministry also is to be shaped in values, leadership, and practice by distinctive Lutheran theological and ethical beliefs. Indeed, Lutheran doctrine speaks to the motivation, purpose, and identity in the work

of social ministry. For as Christians, occupation is seen through the eyes of God-given vocation, where work is not the venue for personal aggrandizement but rather the witness of Christ in service of the neighbour.

Finally, being Lutheran in social ministry is to be an integral part of the church's witness to the world. Lutheran social ministry, determined to serve all people and to protect their dignity, bears witness of its faith and belief that the redeeming work of Christ has secured the dignity of all. As Jesus went about healing infirmities, giving sight to the blind, restoring hearing to the deaf, and embracing outcasts and sinners, he pointed the way to the ultimate and complete healing of his Easter victory.

Lutheran Sunset Home of Saskatoon, now known and operated as LutherCare Communities, began as a vision of national church leaders in the 1940's to respond to the needs of the Lutheran community as opportunities presented themselves for social ministry. Their vision enabled the purchase of a block of land on the edge of Saskatoon. After responding to the need for a seminary, which was built on the site, they determined that a retirement home for seniors was important for the Saskatoon community. In the years since then, LutherCare Communities developed a "continuum of living" model, serving people of many different ages throughout Saskatchewan. These services have broadened to provide services that are multiculturally and ecumenically sensitive and are inclusive of a broad economic and social spectrum.

LutherCare Communities is a recognized faith-based, province-wide organization providing innovative quality services through the "continuum of living."

The Board of LutherCare Communities receives its mandate by being elected by the Saskatchewan Synod of the Evangelical Lutheran Church in Canada (ELCIC) and is accountable to the church by reporting every two years to the Synod for services delivered. (The full list of operations for LutherCare Communities is outlined in Appendix A).

1.2 Environmental Context

This section summarizes the significant environmental scanning factors that will shape the context for the next planning period.

List of Environmental Topics

Environmental Scanning Topics	Spiritual	Cultural	Economic	Political	Technological
Changes in demography, ethnicity	√	√	√		
Strengthening our brand			√		
Health care standards		√	√	√	√
Safety and security	√		√	√	√
Funding, fee for services		√	√	√	
Relationships with strategic partners		√	√	√	
Medical and care technology	√		√		√
Labour pool and unions		√	√	√	
Political climate and government policy		√	√	√	
LutherCare, churches, chaplaincy	√	√			
Future of private sector health care	√	√	√	√	√
Rural communities, aboriginal care		√	√	√	

2. Values

To achieve our vision and mission, LutherCare Communities focuses on shared, deeply held values that govern our behaviour and guide our actions. These values have been foundational to LutherCare Communities since the development of the first seniors' home in 1955. They reflect a dynamic, caring, and growing organization.

We value:

- Excellence in care and service;
- Focus on clients, residents, and guests to whom we provide care and services;
- Integrity, fairness, and principles of ethical conduct as reflected in the social principles of the Evangelical Lutheran Church in Canada;
- Diversity within an inclusive, dynamic, collegial community;
- Openness to change through seizing opportunities with passion, creativity, and innovation;
- Nurturing positive, healthy working relationships between staff and residents, and among staff;
- Exercising responsible stewardship of our resources;
- Maintaining pride in our history and traditions, including contributions of Lutheran and other faith and community groups.

We embrace Christian values, including grace, hope, faith, love, justice, joy, service, and peace.

We embrace leadership values of servant leadership, affirmation, and involvement.

3. Beneficiaries, Strategic Partners, and Other Stakeholders

3.1 Beneficiaries

Beneficiaries are the categories of individuals or groups that form the clients who benefit from the services of LutherCare Communities. They may be described by need, age, type of individual or organization, or other categories that are mutually exclusive. They may be divided further to identify internal beneficiaries, e.g. staff and volunteers, and external beneficiaries, e.g. individuals, families, hospitals, etc.

The beneficiaries of LutherCare Communities, in mutually exclusive categories, are:

- Seniors
- Persons in advanced stages of dementia
- Individuals with physical and mental disabilities
- Low-income families
- Staff/Volunteers

3.2 Strategic Partners

Strategic partners are those organizations or churches with whom LutherCare Communities shares some part of its mission. While they are not direct recipients of the mission, some financial resources may be allocated to them or received from them so that together we are able to deliver the services we offer to our beneficiaries.

The strategic partners of LutherCare Communities are:

- Sask. Synod, Evangelical Lutheran Church in Canada
- Saskatoon Health Region / Saskatchewan Health
- Social Services
- LutherCare Foundation
- Training facilities (colleges, U of S, SIAST, SAIT)
- Sask. Housing
- Volunteers
- Unions (Saskatchewan Union of Nurses, Service Employees International Union)
- Meridian Development
- MLAs
- Alzheimer's Society
- Other supporters of LCC – CNIB, BHP Biliton, Brunskill Pharmacy
- Other community organizations – Prairie Hospice Society, Saskatoon Services for Seniors

3.3 Other Stakeholders

Stakeholders are individuals and groups who may be directly impacted by LutherCare Communities but who themselves are not direct recipients of LutherCare Communities' services, e.g. government, suppliers, districts, etc. or strategic partners.

The other stakeholders of LutherCare Communities are:

- Vendors
- Suppliers
- Individual churches
- Donors
- Financial institutions
- Staff
- Families

4. Core Services

4.1 Long-term Care

- Levels 3 and 4 care, as assessed by Client Patient Access Services (CPAS)
- A secure Special Needs Unit for the care of residents in advanced stages of dementia
- Seniors day care and ambulatory socialization programs

4.2 Seniors Supportive and Enriched Living

- Intermediate care homes
- Seniors housing with assistance and support
- Low-income subsidized seniors housing with assistance and support

4.3 Community Services

- Group homes for younger people with physical and mental disabilities
- Family housing for low-income families
- Home help services

4.4 Spiritual Care

- Chaplain services
- Mission support

5. Location of Services

Geographically, LutherCare Communities' services are currently provided throughout Saskatchewan in Saskatoon, Outlook, and Estevan. LutherCare

Communities is currently working with Meridian Developments to develop a seniors housing facility in Saskatoon.

6. Vision

The vision of LutherCare Communities is expressed in the following phrase: **“Dare to Care: Building Healthy, Faith-Based Caring Communities.”**

7. Mission

The mission of LutherCare Communities is to provide excellence in care, shelter, and support in a nurturing Christian environment for all entrusted to our care.

Underlying this mission is the commitment to providing quality care, sustaining the organization, and maintaining the health of communities served by LutherCare Communities.

8. Allocation of Resources

Allocation of Financial Resources by Beneficiaries

Services→ Beneficiaries↓	Long-Term Care	Assisted Living	Community Services	Spiritual Care	Admin	Totals
Senior citizens	28.8%	29.4%	1.7%	1.3%	7.6%	68.8%
Persons with dementia	16.8%			.3%	1.2%	18.3%
Persons with disabilities			9.7%	.1%	1%	10.8%
Low-income families		1.8%			.1%	2%
LutherCare staff	.04%		.02%		.11%	.2%
Families of clients						
Future development					2%	
Totals	45.6%	31.2%	11.4%	1.8%	12%	102%

Notes:

- The table above is based on expenses from 2015 Audited Statement.
- Long-term care (Luther Special Care Home) split 2/3 to senior citizens and 1/3 to dementia, based on the number of secure beds divided by the total number of beds. The actual percentage of individuals with dementia is higher than 1/3 as individuals on first and second floor also have a diagnosis of dementia.
- Low-income families includes only Luther Family Housing. It does not include subsidized Luther Heights, subsidized Trinity Tower, or rent discounts for Luther Tower.
- Staff includes staff appreciation, staff training, and professional fees. It does not include orientation or cost of staff time.
- Families of clients: difficult to track because it is incorporated into position descriptions.
- Future development costs are incorporated within the Administration column.

Allocation of Financial Resources by Geographical Places

Services→ Places↓	Long-Term Care	Assisted Living	Community Services	Spiritual Care	Admin	Totals
Saskatoon	45.6%	21.2%	11.4%	1.8%	8%	88%
Outlook		5%			1%	6%
Estevan		5%			1%	6%
Total	45.6%	31.2%	11.4%	1.8%	10%	100%

Allocation of Funding by Facilities

Source→ Facility↓	Government			Resident Fees	Other	Investment	Management Fees	Totals
	Saskatoon Health Region	Social Services	Sask. Housing					
Luther Special Care Home & Luther Seniors Centre	35.6%			9.9%	0.6%			46.1%
Luther Tower				13.6%	0.5%			14.2%
Luther Heights			1.1%	6.1%	0.7%			7.8%
Trinity Tower			0.9%	1.6%	0.1%			2.5%
Luther Place Outlook				1.4%	0.001 %			1.4%
Luther Riverside Terrace				6.1%				6.1%
Luther Family Housing			0.9%	0.6%	0.013 %			1.5%
Intermediate Care Homes				4.7%				4.7%
Group Homes		9.7%			0.1%			9.8%
Other Community				1.6%	0.1%			1.7%
Rental Operations					0.2%			0.2%
Corporate					1.7%	1.3%	1.1%	4.1%
Total	35.6%	9.7%	2.9%	45.5%	4%	1.3%	1.1%	100%

Notes:

- a) Other includes roof top contracts, parking, cable unit resales, house rental, and miscellaneous.
- b) Resident fees are determined by government for Luther Special Care Home and Luther Seniors Centre.
- c) Portion of resident fees paid by Family Housing, Luther Heights, and Trinity Tower residents is income dependent.
- d) Government has ability to reject proposed resident fee increases for Luther Tower.

Allocation of Human Resources by Beneficiary

Services → Beneficiaries ↓	Long Term Care	Assisted Living	Community Services	Spiritual Care	Admin	Total
Senior citizens	28.77%	29.39%	1.73%	1.32%	7.63%	68.84%
Persons with dementia	16.81%			.3%	1.24%	18.35%
Persons with disabilities			9.65%	.08%	1.04%	10.77%
Low-income families		1.78%			.07%	1.86%
Staff	.04%		0.02%		.11%	0.18%
Families of clients						
Future development					2%	
Total	45.64%	31.17%	11.4%	1.7%	12.09%	102%
Full time equivalents (FTE)	140.66	81.05	51.53	5.35	14.29	292.88
FTE percentage	48.03%	27.67%	17.59%	1.83%	4.88%	100%

Notes:

- a) Based on expenses from 2015 Audited Statement.
- b) Long-term care (Luther Special Care Home) split 2/3 to senior citizens and 1/3 to dementia based on number of secure beds divided by the total number of beds. The actual percentage of individuals with dementia is higher than 1/3 as individuals on first and second floor also have a diagnosis of dementia.
- c) Low-income families only includes Luther Family Housing. It does not include subsidized Luther Heights, subsidized Trinity Tower, or rent discounts for Luther Tower.
- d) Staff includes staff appreciation, staff training, and professional fees. It does not include orientation or cost of staff time.
- e) Families of clients: difficult to track because it is incorporated into position descriptions.
- f) Extra administrative time.

9. Strategic Goals

9.1 To have all positions filled with caring and talented staff to provide services and deliver programs to LutherCare Communities' residents.

Indicator: *turnover rate*

Tolerance limit: *no more than 25 percent annually, excluding casuals*

Indicator: *length of time to fill a vacant position*

Tolerance limit: *vacant positions be filled within four weeks*

Indicator: *probation period*

Tolerance limit: *all employees successfully complete probation period*

9.2 To maintain and foster healthy relationships with all stakeholders

Indicator (for funding agencies): *percentage of reports not submitted on time*

Tolerance limit: *100 percent of reports submitted on time*

Indicator (for unions): *number of outstanding grievances by step*

Tolerance limit: *100 percent of grievances are settled before arbitration*

Indicator (for staff): *opportunity for staff to provide feedback to leadership team*

Tolerance limit: *100 percent of staff have opportunity to provide feedback annually*

- 9.3 To establish and enhance relationships with other organizations or individuals to extend the work and service of LutherCare Communities.

Indicator: *number of categories that enhance relationships (e.g., number of meetings, speaking engagements, events, etc.)*

- 9.4 To maintain an efficient organization

Indicator: *sick time utilization*

Tolerance limit: *to be in the bottom 50 percent of sick time usage within Saskatoon Health Region Affiliates*

Indicator: *100 percent of successful quality improvement projects completed*

Tolerance limit: *no less than four rapid improvement events per year that improve systems to the benefit of stakeholders*

- 9.5 To ensure financial sustainability of LutherCare Communities through the effective stewardship of resources

Indicator: *current liabilities*

Tolerance limit: *investments plus current assets divided by current liabilities greater than or equal to one*

Indicator: *debt to equity ratio*

Tolerance limit: *long-term debt divided by equity less than or equal to three*

Indicator: *debt service coverage ratio*

Tolerance limit: *cash operations plus interest divided by loan payments greater than or equal to 1.25*

Indicator: *net income*

Tolerance limit: *two percent of gross revenues*

Indicator: *budget variance*

Tolerance limit: *variance plus or minus ten percent of budget*

- 9.6 To exceed provincial and national standards of quality of care and services that LutherCare Communities provides, including safety and security

Indicator: *a current Value Stream Map*

Tolerance limit: *benchmarks developed that exceed provincial and national standards of care*

Indicator: *accreditation standards*

Tolerance limit: *maintain compliance for three-year periods*

Indicator: *occupational health committees self-assessment*

Tolerance: *100 percent compliance with standard*

10. Critical Success Factors

The Strategic Plan is completed with a list of those factors in the management of LutherCare Communities' service delivery that are critical to the success of achieving its Vision and Mission and monitoring the risk associated with the management of the Mission.

- Clearly maintain and enhance the reputation of the organization;
- Remain committed to the continuum of living model that emphasizes quality of life for all persons in our care;
- Be responsive to the emerging needs of the community;
- Maintain a healthy working relationship with staff.

10.1 Critical Tactical Directions

Critical Tactical Directions emphasize what will be done by the Board or by management to maintain and enhance the services of LutherCare Communities. The following statement provides an overall perspective for the tactical direction of LutherCare Communities:

LutherCare Communities emphasizes the development of services to seniors and to persons with physical and mental disabilities that will encourage innovation, creativity, and openness to new opportunities as a caring, faith-based community.

During the next three years, the vision, mission, and values of LutherCare Communities will be demonstrated through focus on the following Critical Tactical Directions:

- Complete and begin to use LutherCare Village by end of 2016.
- Create a three-year capital plan by 2015.
- Explore opportunities for future long-term care development.
- Support an engaged workforce.
- Complete a review of best practises in models of care delivery.

In implementing this Strategic Plan, the Board, administration, and staff of LutherCare Communities will further strengthen our mission of “providing excellence in care, shelter and support in a nurturing Christian environment for all entrusted to our care”. Further, the implementation of the Strategic Plan is integrally related to LutherCare Communities’ vision expressed in these words: “Dare to Care: Building Healthy, Faith-Based Caring Communities.” The Strategic Plan will be reviewed annually by the LutherCare Communities’ Board of Directors.