MASH
Manitoba Association for Safety in Healthcare

Strategic Plan 2024-2029

Prepared for MASH by PRA Inc., December 2023

Mission, Vision, Value

Mission: Empower, support, and enable those working within the healthcare sector to create safer environments to reduce harm.

Vision: To deliver physically and psychologically safe environments for everyone working in the healthcare sector.

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Values

- **Safety and Health for All** The right of every worker to have a safe, healthy, respectful, and incident-free work environment.

- **Collaboration** An engaging, diverse, and inclusive environment where people listen to and share a broad range of perspectives to support the common goal of achieving the highest level of safety and quality care for all.

- **Excellence** A trusted source of high standards and professionalism where innovation and best practices nurture a culture of continuous improvement.

- **Accountability** Delivering value to the healthcare sector through measurable reduction of harm.

- **Transparency** Ensuring a culture of openness where people have the confidence to report concerns, seek improvements, and receive quick responses to safety needs at all levels.

Three Main Categories of Harm

Context

- There is increased focus in the healthcare system on recruitment and retention of staff, and increased focus on how to keep staff safe and healthy.

- There will always be competing priorities which may undermine workplace safety and health.

- Collaboration and cooperation can be difficult across the numerous organizations in the healthcare system.

- MASH:
  - Represents a collective and collaborative effort.
  - Is a partner that consults, trains, and certifies.
  - Brings dedicated resources to the issue of safety and health in the healthcare system.

Categories of harm

There are three main categories of harm where action is required:
- *Physical harm*
- *Psychological harm*
- *Workplace violence*

For each category of harm, the objectives are:
- to identify the harms and their root causes;
- for MASH to work with members to put in place solutions to address them;
  and
- establish and monitor indicators that demonstrate change.

Physical harm

Objective: Reduce, and eventually eliminate, the causes of physical harm to healthcare workers.

- Physical harm is an injury to a person which results from an incident. This objective might include preventing incidents that cause harm, reduce the likelihood of such incidents or, reduce the severity of the harm.

- The initial focus can be on reducing and ultimately eliminating more common types of physical harm

Psychological harm

Objective: Reduce the causes of psychological harm to healthcare workers.

- Situations that might cause psychological harm can be difficult to identify and may vary by individual.

- The initial focus can be on preventing incidents that cause stress or trauma, or reducing the likelihood of such incidents.

- The focus can also be on providing resources to individuals that allows them to better deal with stress and trauma before they cause further psychological harm.

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Workplace violence

Objective: Prevent the occurrence of workplace violence.

- The incidence of harassment and/or threats and/or acts of violence in or near the workplace is increasing, and can be initiated by patients, visitors and others not directly being treated by the staff or facility. Although less likely, workplace violence can involve violence by staff directed at other staff.

- Violence can lead to both physical and psychological harm.

Strategic directions 2024 – 2029

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MASH will:

1. Provide training support.

2. Be innovative in its approach.

3. Be a data-driven organization.

4. Enhance existing and develop new lasting partnerships across healthcare and other sectors.

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1. Provide training support

- It is primarily through training that the three categories of harm will be addressed.

- Training may include programs for both management and staff; peer supports; proactive workplace committees, and champions; sharing learning from member organizations; training staff on the effective use of new and existing equipment; identifying how to use space more effectively to improve safety, etc

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Priority actions: short and longer term

Short Term #1	Short Term #2	Short Term #3	Long Term
Identify the nature and causes of harm in each of the three areas, starting with the most common.	In each of the three areas of harm, identify needs and state of readiness of members.	Create an inventory of training currently available and identify gaps for development.	Develop a process that continuously evaluates the effectiveness of existing training and employing evidence-based solutions to address emerging issues to maintain effective safety management systems.

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2. Be innovative in its approach

- MASH should be open to the adoption of existing programs from within or outside of the province, as well as the incorporation of collective agreement related data reporting, to improve or adapt programs where it can.

- It should look to identify gaps, be innovative in the design of programming, and identify new and better approaches.

- It should oversee the consistent implementation of training and the certification process, while considering the audit protocols, healthcare distinction and cultural inclusivity.

- MASH should have access to, and regularly review quantitative and qualitative data to help identify needs and improve existing programs and services to address these needs.

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Priority actions: short and longer term

Short Term #1	Short Term #2	Short Term #3	Long Term
Review current training to understand gaps and opportunities to innovate.	Develop a framework to evaluate the impact of consultation, training, and certification.	Incorporate lessons from past training successes into future training.	Improve or adapt Existing training programs. Create new programming as needed to fill gaps in existing training.

3. Be a data-driven organization

- To understand whether it is meeting its goals, and to be an effective and innovative organization, MASH needs timely and reliable data that allow it to monitor outcomes across member organizations.

- MASH needs information from the WCB and its member organizations in order to better understand what areas or gaps need to be addressed and how to address them. Two types of indicators are necessary to refine its programs (training, certification) and monitor success: leading indicators, i.e. to identify emerging issues and develop/adapt programs to address them before they result in harm; and lagging indicators, to monitor success and impact.

Priority actions: short and longer term

Short Term #1	Short Term #2	Short Term #3	Long Term
Develop initial performance indicators to monitor changes in each of the three categories of harm.	Identify gaps in what is currently collected by member organizations and assess efficacy to support existing WCB data.	Identify opportunities to standardize and integrate data collected across member organizations and the WCB into a unified Dashboard.	Create data-sharing agreements with member organizations and explore future data sources and opportunities.

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4. Enhance & develop lasting partnerships

- MASH will continue to invest in and develop partnerships both within the healthcare sector and other sectors.
  - It will explore opportunities to learn from and share with other sectors.

- This starts with ensuring that all member and non-member organizations feel they are stakeholders in MASH.

- MASH's primary focus is publicly funded healthcare, and over time, it will begin working with other organizations.

Priority actions: short and longer term

Short Term #1	Short Term #2	Short Term #3	Long Term
Work with organizations under WCB insurance rate code 70202.	Set goals for the number of organizations certified, while regularly Consulting with members, sharing information, etc.	Support organizations outside the current insurance rate code by sharing safety Information and training programs.	Over time, expand service to organizations under affiliated rate codes.

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