

Quality Improvement Plan (QIP)

# Narrative for Health Care Organizations in Ontario

March 11, 2024



## OVERVIEW

The Huron Perth Healthcare Alliance (HPHA) provides a wide range of healthcare services at our Clinton Public Hospital, St. Marys Memorial Hospital, Seaforth Community Hospital and Stratford General Hospital sites. Our primary responsibility is the provision of safe, quality healthcare to those we serve. As one of the 49 members of the Huron Perth & Area Ontario Health Team (HPA-OHT), HPHA is committed to continuing our long-standing tradition of formal and informal partnerships to advance an integrated health system and standards of practice, and improve community health outcomes and patient experience. Ten HPA-OHT members are participating in Ontario's first Collaborative Accreditation survey with Accreditation Canada in April 2024; one award will be received based on an evaluation of partners' demonstration of compliance with standards, as a whole and sector-specific as applicable.

HPHA's annual Quality Improvement Plan (QIP) demonstrates our commitment to the HPHA Board, staff and physicians/midwives, and our communities to provide safe, quality health care and to continuous quality improvement. HPHA's QIP aligns with annual objectives of HPHA's Strategic Plan: "Commitments to Our Communities". The 2024-25 QIP Change Plans focus on Ontario Health's Priority Issues of Access and Flow, Equity and Indigenous Health, and Patient Experience.

## ACCESS AND FLOW

HPHA is committed to our role in optimizing system capacity, timely access to care, and patient flow to promote the philosophy of right person in the right place and the right time both through improvements in internal processes and partnerships with healthcare providers.

To this end, HPHA's 2024/25 QIP Change Plan focused on the Priority Issue of Access and Flow is:

- That the Huron Perth Healthcare Alliance (HPHA) will develop and implement enhanced standardized processes to facilitate earlier transitions/discharges and improve throughput of Alternate Level of Care (ALC) patients, inclusive of all ALC types, to work towards achieving the HSAA target of 1.0.

Alternate Level of Care is a system-wide priority issue with respect to access and flow. Working with our HPA-OHT partners and further development of standardized internal processes are anticipated to increase ALC throughput.

The Stratford General Hospital Emergency Department (SGH ED) is trialing an innovative 6-month pilot project with the Huron Perth Alzheimer Society to avoid admissions that often lead to ALC designations for patients with dementia. A Dementia Resource Consultant Support provides support and resources to help individuals with dementia to live at home. Education and support for staff facilitate more effectively meeting patients' needs. The Huron Perth Helpline and Crisis Response Team works closely with the Resource Consultant to build upon processes and make effective referrals.

## EQUITY AND INDIGENOUS HEALTH

HPHA is committed to improved and equitable outcomes to reduce health inequities for patients and their families that we serve.

To this end, HPHA's 2024/25 QIP Change Plan focused on the Priority Issue of Equity is:

- That Diversity, Equity, Inclusion and Anti-Racism (DEI-AR) e-Learning will be assigned to all members of the HPHA leadership team to advance a workplace culture that embraces and values diversity, addresses systemic inequities and fosters an inclusive environment. The DEI-AR e-Learning will provide Leaders with tools to support an environment in which patients, families and providers feel a sense of belonging, psychological safety and the ability to fully participate and contribute.

Board and Committee members, physicians, midwives, Patient & Caregiver Partners, and Volunteers will have access to and will be encouraged to complete the eLearning.

In addition, a DEI-AR related question will be added to HPHA's Patient Experience survey. The Patient Experience Office will monitor and disseminate this specific feedback that will inform leaders to drive improvements.

HPA-OHT members have adopted a shared Land Acknowledgement statement. The ten HPA-OHT Accreditation partners have adopted Ontario Health's Equity Framework and a harmonized HPA-OHT Equity, Inclusion, Diversity and Anti-Racism Plan.

HPHA initiatives and resources to increase awareness and support DEI-AR in the workplace include:

- Pink Shirt Day (Anti-Bullying)
- Recruitment Videos
- Orange Shirt Day (Every Child Matters)
- Black History Month (e.g. Amherstburg Freedom Museum Virtual Tour)
- Pride Month activities
- Gender-neutral public washroom signs in redeveloped / renovated areas with planned spread
- Accommodation for safe space locker rooms
- Option of including preferred pronouns on staff identification badges
- Discontinuation of “male”/“female” student identification badges
- Provision of in-person Indigenous Cultural Competency Training (Ontario Federation of Indigenous Friendship Centre)
- Introduction of HPHA Guide to Inclusive Language (adopted from the HPA-OHT guide)
- DEI-AR and 2SLGBTQ eLearning modules available to all staff, physicians, midwives, Board members, Patient & Caregiver Partners and Volunteers

## **PATIENT/CLIENT/RESIDENT EXPERIENCE**

HPHA is committed to seeking feedback from patients, their caregivers and their families that contributes to a culture of exceptional patient and family experience. HPHA views observations, compliments, personal experiences and concerns from patients, families and visitors as valued sources of information regarding perceptions of the HPHA environment and an opportunity to improve the quality of services and care provided.

HPHA embraces diversity and inclusivity by ensuring ALL voices are heard and considered in healthcare decision making, planning, and operations in a safe and respectful manner. Engaged patient and their caregivers are better able to make informed decisions about their care options and are a critical component in safe, people centred care.

HPHA’s 2024/25 QIP Change Plan focused on the Priority Issue of Experience is:

- That HPHA determine if HPHA inpatients and Emergency Department patients feel they received adequate information about their health and their care at discharge by increasing the volume of Patient Experience feedback, understanding feedback received, and utilizing the data to inform opportunities for improved patient experience.

HPHA gathers patient and caregiver feedback through such means as:

- New patient experience survey platform launched August 2023 that supports more timely survey distribution by various methods (e.g., digital via email, SMS, QR Code).
- Expected improved response rates and weekly and monthly reports will facilitate opportunities for quality improvement.
- Planned development of Patient Experience Dashboard will inform quality improvement initiatives.
- Planned development of Patient Experience Call Centre to provide post-discharge follow up calls by trained Patient & Caregiver Partners and Volunteers.
- Patient Rounding by Leaders

- Patient Relations processes to respond to concerns received.

HPHA's Patient & Caregiver Partner Program currently has 25 volunteer partners who share valuable insights, perspectives and expertise based upon their lived or living experiences regarding matters that directly affect patients and families. They are actively involved in advancing People-Centred Care and building relationships across HPHA. Our Patient & Caregiver Partners are engaged in various ways which will influence how feedback is gathered based on their preferred engagement specialties of Communications, Operations and Projects.

Patient & Caregiver partners collaborate with healthcare leadership to help shape the delivery of care and services throughout HPHA and are integrated into the organization's operations as active members on the following:

- Participation in interviews and onboarding of HPHA Patient & Caregiver Partners
- Presentation at monthly HPHA Corporate Orientation
- Ex-officio membership on HPHA Board of Directors (Patient & Caregiver Partner Program Co-Chair)
- Membership on HPHA committees include Medical Advisory Council, Quality Committee, Ethics Committee, Program Councils
- Participation in interviews for HPHA leadership positions
- Co-design opportunities:
  - o Patient information/education materials
  - o New or revised programming
  - o Special projects (e.g., Pharmacy and Chemotherapy Redevelopment, St. Marys Memorial

Hospital inpatient unit redevelopment)

ALL Voices Matter, TOGETHER we are Better.

## PROVIDER EXPERIENCE

During this time of COVID recovery, recruitment, support for staff (often at a novice level of experience or internationally trained staff), and efforts at retention are essential. In addition to DEI-AR initiatives noted above, efforts to enhance Provider Experience include:

- Recognition and support initiatives (e.g. annual Tuer-Hodes Family Nursing Recognition Award for Exceptional Care, annual Tuer-Hodes Family Interprofessional Recognition Award for Exceptional Care, long service awards, annual Awards of Excellence; staff appreciation events).
- Resumption of social events.
- Action Plans to address results of Patient Safety Culture Survey and Worklife Pulse Survey as administered for the HPA-OHT Accreditation survey in April 2024.
- Formalized response to Professional Conduct incidents to encourage reporting, timely response, investigation to support parties involved, resolution, and action as required.
- Staff education funds through three sites' Foundations.
- Virtual corporate orientation option to facilitate more timely onboarding, and thereby greater success in recruiting, for new hires not required to attend in-person Orientation.
- Clinical Scholars to provide at-the elbow support for nurses, particularly novice and internationally-trained, to build skills development, confidence and competence, and to support retention.

- Nursing Support Line pilot for Nursing and Respiratory Therapy staff during night shifts and weekends for peer-to-peer support from experienced nurses.
- Successful joint proposal with regional hospitals to address wellness and retention of Critical Care nurses through the Critical Care Services of Ontario Retention Demonstration Project.
- Five-day Response Emergency Department (ED) Nurse Education Program directed at rural ED teams as sponsored by Ontario Health and hosted by HPHA.
- Canadian Nurse Residency Program funding for new graduate nurses to receive full-time, guided/supervised practice to develop professional competence.
- Participation in regional initiative between academic centre and hospital partners to review adapting Living Laboratories for Learners to enhance their experience; explore partnership opportunities to create innovation and collaboration in training, assess teaching and learning for preceptors and learners; and plan for future models of care, such as Collaborative/Team-based Practice, to impact system pressures.
- Significant advancement of HPHA Recruitment and Retention framework and initiatives (e.g.; Enhanced Clinical Externs, Supervised Practice Experience candidates, enhanced social media presence to reach younger demographic).
- Significant enhancement of high school co-op student program opportunities to increase awareness of healthcare careers and support potential future recruitment.
- Development of Leadership Development Framework for present and emerging leaders.
- “Childcare for Healthcare Workers” and “Housing

for Healthcare Workers” resources.

## SAFETY

HPHA tracks the rate of workplace violence incidents resulting in lost time as noted as an indicator under the Priority Issue of Safety; these are minimal in number.

HPHA is committed to a culture of safety, quality and openness regarding patient safety, and leveraging knowledge gained through our experiences to prevent and address patient safety incidents. HPHA strives to foster a reporting and learning culture, which includes supportive conversations with team members, patients, caregivers and families to address incidents. Staff are encouraged to report incidents of all severity levels. The Quality and Patient Safety team provides “Good Catch” awards when staff identify a situation with potential to harm although no incident occurred.

The Workplace Violence Prevention Program includes a Workplace Violence Prevention Flagging program that informs staff and physicians of risk of violence from a person with a history of and/or potential for violent, aggressive or responsive behaviours. Staff in identified high-risk positions, and selected Volunteers, receive Non-Violent Crisis Intervention training to assist in de-escalation and response in Code White emergencies.

Innovative approaches regarding patient safety shared with staff, physicians, and patients and families that have arisen from patient safety incidents or patient safety initiatives include:

- Implementation of Critical Incident Triage Team for timely analysis of higher severity incidents.
- Establishment of Code Trauma/ Minor Surge Protocol to

provide guidelines to support the Stratford General Hospital Emergency Department during surges in patient volumes and acuity to ensure safe, quality patient care.

- Establishment of Sensory Room on Maternal Child Unit to help provide trauma-informed care to laboring patients.
- Development of Response to Medical Emergency on Hospital Grounds policy to complement Code Blue policy.
- Review of hourly rounding and nursing documentation of same.
- Pharmacy/Chemotherapy Redevelopment Project to expand treatment space, ensure compliance with standards and best practice, and enhance environment for patients, caregivers and providers.
- Patient Room Refresh Project at St. Marys Memorial Hospital site with senior-friendly considerations that include isolation room, enhanced infection control features, state-of-the art headwalls in all patient rooms, accessible washrooms, and site-wide wandering patient system.
- Enhancement of Code Stroke resources.
- Enhancement of Massive Hemorrhage Protocol processes as identified through Mock Codes.

## POPULATION HEALTH APPROACH

The Huron Perth & Area Ontario Health Team (HPHA-OHT) boasts a membership of 49 organizations (42 member organizations, 7 collaborating partners). As an active HPA-OHT member, HPHA partners collaboratively towards an integrated healthcare system to respond to the needs of our communities as evidenced through initiatives such as:

- Adoption of 26 policies and resources through the Collaborative Accreditation.

- Reverse Referral Pilot in which HPHA internal medicine specialists refer unattached patients to primary care physicians who have committed to accepting new patients.
- Heart Failure spoke-hub-node system model providing patient care and access to resources.
- Mental Health Stepped Care Model ensuring access to services and supports for the right person in the right place and the right time.

Additional initiatives supportive of identified population-health needs include:

- Participation on Provocation Ideas Festival panel regarding current and possible future implications of artificial intelligence innovations in our region.
- Panel participation on Homelessness & Health: Improving Interactions with Emergency Services featured at regional Housing Symposium.
- Co-location at Stratford Hospital site of Shelter Link, a City of Stratford initiative that offers youth a safe environment in which to live.
- HPHA Nurse Practitioner program, offered in partnership with the City of Stratford and Huron County, brings needed services directly to individuals who are homeless thereby enhancing access.
- Mobile Crisis Rapid Response Team partners with local police forces to support individuals in crisis and offer assistance, potentially divert from Emergency Department, and connect to supports and resources.
- Corporate Lead Medical Services partners closely with Health Care Connect assisting individuals secure local primary care.

## EXECUTIVE COMPENSATION

It is a requirement of the Excellent Care for All Act that Executive Compensation be tied to select Quality Improvement Plan (QIP) measures.

HPHA is committed to advancing equity, inclusion, and diversity and addressing racism to reduce disparities in outcomes for patients, families, and providers, and supporting an environment in which patients, families and providers feel a sense of belonging, psychological safety and the ability to fully participate and contribute. As a demonstration of this commitment, the 2024/2025 objective to which executive compensation is associated is the successful achievement of:

- Equity – That 85% of management staff complete DEI-AR education by February 28, 2025.

The HPHA Board of Directors has approved a 5% Pay at Risk for the President and CEO, 0.1% of which is associated with the Multi-Sector Service Accountability Agreement, and 3% Pay at Risk for the Vice-Presidents and Chief Nursing Executive, and Chief of Staff to be associated with the 2024/2025 QIP indicator.

## CONTACT INFORMATION/DESIGNATED LEAD

Contact Information:

Mary Cardinal

Vice President People & Chief Quality Executive

mary.cardinal@hpha.ca

(519) 272-8210 ext. 8206

Julie Houben

Director Quality, Patient Safety and Interprofessional Practice

julie.houben@hpha.ca

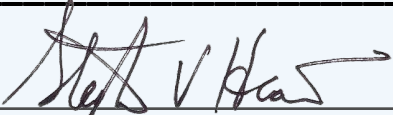
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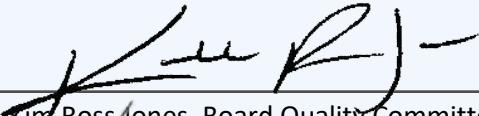
### SIGN-OFF

It is recommended that the following individuals review and sign-off on your organization's Quality Improvement Plan (where applicable):

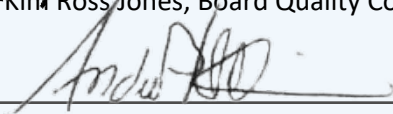
I have reviewed and approved our organization's Quality Improvement Plan on  
March 7, 2024



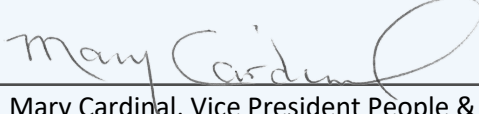
Stephen V. Hearn, Board Chair



Kim Ross Jones, Board Quality Committee Chair



Andrew Williams, President & Chief Executive Officer



Mary Cardinal, Vice President People & Chief Quality Executive

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