

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 25, 2023



OVERVIEW

The Huron Perth Healthcare Alliance (HPHA) provides a wide range of healthcare services at Clinton Public Hospital, St. Marys Memorial Hospital, Seaforth Community Hospital and Stratford General Hospital. Our primary responsibility is to provide safe, quality healthcare to those we serve. As one of the 51 members (of the Huron Perth & Area Ontario Health Team (HPA-OHT)), HPHA remains committed to continuing our long-standing tradition of formal and informal partnerships to advance an integrated health system, and improve community health outcomes and patient experience.

HPHA's Quality Improvement Plan (QIP), as a corporate planning process, demonstrates commitment to the HPHA Board, staff, physicians and communities continuous quality and safety improvement processes that support the Quadruple Aim in:

- Improving population health with positive patient outcomes
- Improving Provider Work Life through a safe and positive work environment
- Reducing costs with favourable performance across the health system
- Enhancing the Patient Experience with positive patient and family/caregiver experiences

HPHA's 2023-2024 Quality Improvement Plan (QIP) will align with the Collaborative Quality Improvement Plan (cQIP) of the HPA-OHT with respect to nine partners preparing for a joint Accreditation Canada survey in April, 2024.

HPHA's 2023/24 QIP Change Plans are identified as:

- HPA-OHT Accreditation - That HPHA will engage fully in the

collaboration between HPA-OHT partners to meet defined milestones in the preparation for our Accreditation survey in the spring of 2024.

- Leadership Development - That 100% of submitted leadership development plans are embedded into eTrain by January 31, 2024.
- Patient Experience – That the Priority Indicator question “Did patients feel they received adequate information about their health and care at discharge” be embedded in the HPHA Patient Experience Qualtrics survey, and quarterly performance reports for the identified patient populations be provided to the identified groups to drive quality improvement.

PATIENT/CLIENT/RESIDENT ENGAGEMENT AND PARTNERING

HPHA’s Patient Declaration of Values serves to ensure that our patients and their loved ones will be engaged partners in their healthcare. Valued partnerships have the ability to transform our healthcare system to one that is truly person-centered. ALL Voices Matter, TOGETHER we are better.

HPHA actively engages and partners with our patients, caregivers and families to demonstrate our commitment to Nothing for You without You. Effective patient engagement leads to better patient outcomes, promotes exceptional patient experience and creates innovative program design.

One formal method of engagement is the HPHA Patient and Caregiver Partner Program that currently has 21 active partners who help advance patient engagement and person-centred care across all services provided at HPHA. The program promotes

diversity, inclusivity and embraces all voices being heard, considered and included in healthcare planning, decision-making and operations in a safe and respectful manner. Patient and Caregiver Partners share valuable insights, perspectives and expertise. They review patient-facing information and provide ideas for initiatives and programs based on their lived-experiences that advance HPHA’s Commitment to Our Communities strategic plan.

During the pandemic when in-person engagement activities were curtailed, members of the Patient and Caregiver Partner Program remained engaged and evaluated the program, developed a new structure and formed the Patient and Caregiver Partner Steering Committee. The Steering Committee consists of five partners who oversee the function and purpose of the Program to ensure the committee’s actions fulfil its engagement commitment to HPHA. Patient and Caregiver Partners have opportunities to be engaged based on individual need and interests. With input from all partners, the Steering Committee developed three streams of engagement to allow new and potential partners the option to choose the best fit for them.

Patient & Caregiver Partner Engagement Specialities

Patient and Caregiver Partners have many collaborative engagement opportunities at HPHA that include:

- HPHA Patient & Caregiver Partner Interview / On-Boarding Team
- HPHA Corporate Orientation
- HPHA Board of Directors (Patient & Caregiver Partner Program Co-Chair is ex-officio member)
- HPHA Medical Advisory Council

- HPHA Quality Committee
- HPHA Ethics Committee
- Human Resource Interview Team
- HPHA hospital and program-based committees/councils
- Co-design opportunities on long and short-term projects throughout the organization



Specialty	Role & Expectation
Communications	Co-writing, reading, and reviewing organizational guidelines, brochures, pamphlets, patient information, policies, practices and procedures
Operations	Active members on hospital committees and councils etc.
Projects	Active participators in experience-based co-design initiatives and decision-making projects with care providers*

There is no “one size fits all” approach to engaging our patients, caregivers, families and community members.

Other methods that HPHA is utilizing to gather feedback include:

- Launch of new Patient Experience Measurement Platform with the capability to digitally disseminate Patient Experience surveys “in-the-moment” that will lead to improved service recovery and response rates
- Development of a Patient Experience Dashboard to track, trend and report survey results that will lead to quality improvement initiatives
- Development of Patient Experience Call Centre – post-discharge follow up calls to patients made by trained Patient and Caregiver Partners and Volunteers
- Patient Rounding by Leaders
- Effective Patient Relations process for tracking, trending and learning from all reported healthcare experience concerns
- Patient and caregiver participation in critical incident review processes

HPHA is committed to creating an environment where patients, caregivers, families, clinicians and hospital staff work together as partners to improve the quality and safety of care now, and into the future.

PROVIDER EXPERIENCE

The COVID-19 pandemic has challenged the healthcare system, healthcare providers and recipients, and our communities at large; all sectors of our society have been affected.

Throughout the pandemic, HPHA’s approach has been:

- We will all lead with empathy, knowing these are extraordinary circumstances requiring exceptional responses.
- We will all do the best we can with what we are presented.
- We will all communicate and work together to identify challenges and find good solutions.
- We will all stand together as one Team.

Staff, physicians and midwives have demonstrated exemplary compassion and resilience throughout the pandemic and supported

one another through changing challenges of the past 3 years. Our organization has responded to the challenges of the pandemic to balance compassion for our patients and caregivers; support our staff, physicians, midwives, and volunteers; and mitigate COVID-19 pressures to the extent possible. Efforts to support our staff, physicians, midwives, and volunteers have included:

- Continued initiatives through HPHA Wellness Program (e.g. National Indigenous History Month, Pride Month, Pink Shirt Day, Green Shirt/Ribbon Day; recognition-grams and candy-grams).
- Recognition and support initiatives (e.g. annual Tuer-Hodes Family Nursing Recognition Award for Exceptional Care, introduction of annual Tuer-Hodes Family Interprofessional Practice Recognition Award for Exceptional Care, long service awards, annual Awards of Excellence; Front-Line Fridays, staff appreciation events by site-specific Foundations).
- Virtual social events for Physicians
- With retirements and departures of “seasoned” staff, all departments are recruiting younger, more novice staff and providing enhanced support and at-the-elbow training which supports skills development, confidence and competence, and retention.
- Through the HPA-OHT Accreditation, the Patient Safety Culture Survey, Worklife Pulse (physicians), Worklife Pulse (staff), and Governance Functioning Tool surveys will be administered.
- Formalized response to Professional Conduct incidents to encourage reporting, respond in a timely manner and investigate appropriately with the intent to support parties involved, resolve conflict and take action as required.

WORKPLACE VIOLENCE PREVENTION

HPHA maintains a zero tolerance standard regarding workplace violence, harassment and sexual harassment to ensure staff have a safe and healthy working environment. The Anti-Violence and Harassment Prevention program aligns with legal requirements under the Occupational Health and Safety Act and is in place to reduce the risk of staff injuries and incidents. The program consists of a written policy, the Anti-Violence and Harassment Policy, which includes reporting and follow-up required for all types of violence and harassment events. The Workplace Violence Prevention Flagging program provides staff with information on the risk of violence from a person with a history of and/or potential for violent, aggressive or responsive behaviours. Staff are trained in both program requirements, and emergency response procedures including Code White for violent events. Staff in identified high-risk positions receive additional Non-Violent Crisis Intervention training to assist in de-escalation and response for Code White emergencies.

PATIENT SAFETY

HPHA is committed to a culture of safety, quality and openness regarding patient safety, and leveraging knowledge gained through our experiences and expertise 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, and are incentivized to report near misses (reportable circumstances) in an effort to make safety and system changes before such an incident occurs. The Quality and Patient Safety team reviews reported near misses, and provides “Good Catch” awards to staff

when they identify a situation with potential to harm although no incident occurred. Additionally, HPHA revised our incident management policy to create a streamlined approach to ensure consistency in management of incidents. Quality Reviews are facilitated to unpack an incident, provide support to staff, patients and family, and outline considerations for improvement. The HPHA Incident Management Toolkit provides resources in the moment, including checklists, contacts and support items. Storytelling grounds us in our patient safety efforts to strive for continuous quality and safety improvements. Stories are shared across many tables, including during quality reviews, at the Ethics committee, and the Quality Committee, a subcommittee of the Board of Directors

Processes to learn from and share patient safety incidents to prevent recurrences include:

- Mandatory Quality Review or Quality of Care Review for follow-up of any patient safety incidents of Severity Levels 5 or 6
- Monthly reports to Program Councils providing overview of patient safety incidents reported over the previous month and trending over the previous quarter
- Feedback loop incorporated in incident reporting system that notifies staff member who reported the safety event that the incident has been investigated and provides opportunity to review the documented follow up
- Department-specific monthly reports provided to Leaders outlining types of incidents, severity levels, trends over time allow creation of custom reports to track specific patient safety incidents occurring in department
- Regular Department Huddles where patient safety incidents are discussed and improvements shared

- Patients and families/caregivers are invited to participate in Quality Reviews and, if requested, are provided with a summary of improvements as result of investigation
- Patient Partners are full-fledged members of the Quality Committee of the Board and are involved in reviewing all Critical Incident investigations
- Quality & Patient Safety Specialists monitor incident reports and identify possible trends
- Improvement projects are identified based on trends. Team members participate in the analysis of events, identification of indicated changes, implementation, and communication.

HEALTH EQUITY

HPHA is in the early stages of a comprehensive health equity strategy to consistently and appropriately recognize and reduce disparities of health outcomes, access and experiences of diverse populations. Ways in which HPHA is promoting health equity are:

- Professional Practice ensuring updated Code of Conduct standards of Regulated Colleges to provide care that is inclusive and culturally safe are widely shared and incorporated in the Orientation to HPHA.
- Implementation of outpatient/community Mental Health Stepped Care Model as partner in HPA-OHT initiative to ensure client centred care and promote equity, diversity and access.
- Land Acknowledgement statement acknowledging the host Indigenous nation(s) on whose territory people are gathering as a sign of gratitude and respect.
- Enhanced Spiritual Care access with resources developed and available for diverse needs; transition of traditional Christian Chapel space to Spiritual Centre.
- Acknowledgement of all-faith spiritual days and referring to “Holiday” season events rather than “Christmas” season events
- Incorporating inclusive language
- When possible, offering flexibility in care:
 - o Surgical Pre-op - in person or electronic
 - o Family Meetings - in person or virtual
 - o Care Provision - when possible, in person or virtual (i.e.; Stroke Rehabilitation, Diabetes Education, Pre-School Speech and Language Program)

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 partnerships, advancing an integrated healthcare system, and improving community health outcomes and the patient experience. As a demonstration of this commitment, the 2023/2024 objective to which executive compensation is associated is the successful achievement of:

- HPA-OHT Accreditation - That HPHA will engage fully in the collaboration between HPA-OHT partners to meet defined milestones in the preparation for the Accreditation survey in the spring of 2024.

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 2023/2024 QIP indicator.

CONTACT INFORMATION

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OTHER

Reflections since 2022/23 QIP Submission

Despite the continued challenges of the COVID-19 pandemic, HPHA continued to demonstrate our firm commitment to quality and patient safety as evidenced by:

Initiatives Completed:

- Continued to provide COVID-19 Assessment Centre/COVID, Cold and Flu Care Clinic
- Completed Risk Assessment Checklist including top 30 healthcare risks plus two core risks.
- Completed 8-week Surgical Efficiency Project achieving several improvements and identifying additional opportunities. RN will be seconded to coordinate achievement of identified opportunities and sustain gains.
- Achieved Stroke Distinction through Accreditation Canada in collaboration with nine stroke centres in the Southwestern Ontario Stroke Network.
- Expanded Inter-Hospital Laboratory Partnership, a regional

laboratory partnership dating back to 1959, from twelve (12) to sixteen (16) partners.

- Replacement of Operating Room Monitor Integration System and associated equipment to include a centralized control centre, quality imaging and audiovisual communication, and contribute to the provision of superior intraoperative patient care.
- HPHA Registered Dietitian supported newly hired Registered Nurse in the Alexandra Marine and General Hospital (Goderich) diabetes program with respect to best practice insulin adjustment
- Expanded Connexall phone system to Porters at Stratford General Hospital site to ensure quicker access to patient transportation to support positive patient experience and patient flow.

Initiatives in Progress

- Stepped Care Model in community mental health programs as HPA-OHT initiative. HPHA provides 14 outpatient/community mental health programs and is engaged in significant work to implement and revise policies and standard work documents that are client centred, and promote equity, diversity and access.
- Development of formal process regarding virtual visits for extended stay patients and those in isolation.
- Revision of Patient Flow processes.
- Revision of Least Restraints processes.
- Pharmacy/Chemotherapy Redevelopment Project to expand treatment space, ensure compliance with standards and best practice, and enhance environment for patients, caregivers and providers; anticipated occupancy May

2024.

- Significant advancement of Recruitment and Retention framework and initiatives (e.g.; Enhanced Clinical Externs, Supervised Practice Experience candidates, enhanced social media presence to reach younger demographic)
- Exploration of regional partnerships to address paediatric surgical backlogs
- Development of Massive Hemorrhagic Transfusion Protocol
- Patient Room Refresh Project at St. Marys Memorial Hospital site with Senior-Friendly considerations that will include introduction of an isolation room, enhancement of infection control features, installation of state-of-the art headwalls in all patient rooms, accessible washrooms, and a site-wide patient security system for wandering patients.
- Review and revision of Prevention of Workplace Violence processes
- Introduction of Bike Helmet Safety initiative to offer bike helmets, as funded through the Stratford General Hospital Foundation, free of charge, to paediatric patients presenting to any of HPHA's four Emergency Departments with a bike-related injury.
- Establishment of Code Trauma/ Minor Surge Protocol to provide guidelines to support the Stratford General; Hospital Emergency Department during a surge in patient volumes and acuity to ensure safe, quality patient care.
- Implementing a Clinical Coach position to provide at-the-elbow support for novice nursing staff
- Standardization of Emergency Department Trauma Rooms at all four HPHA sites to ensure staff members working at

any site will have access to necessary equipment in urgent situations

- Establishment of Sensory Room on Maternal Child Unit will help provide trauma-informed care to laboring patients
- Revision of Code Blue to include response to cardiac event or medical emergency outside of Hospital buildings

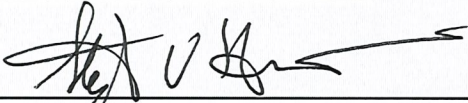
Initiatives in Development

- Development of a Risk Registry.
- Simulation Lab for clinical skills training
- Providing access to mental health safe rooms by guards for patients in custody

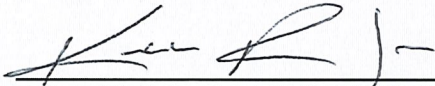
SIGN-OFF

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

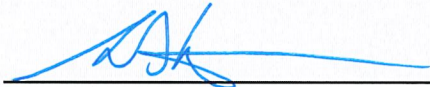
I have reviewed and approved our organization's Quality Improvement Plan on



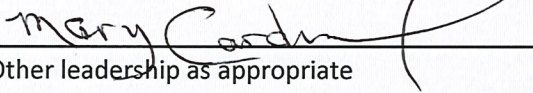
Board Chair



Board Quality Committee Chair



Chief Executive Officer



Other leadership as appropriate