

Let's Make Healthy
Change Happen.



Quality Improvement Plan (QIP) Narrative for Health Care Organizations in Ontario



This document is intended to provide health care organizations in Ontario with guidance as to how they can develop a Quality Improvement Plan. While much effort and care has gone into preparing this document, this document should not be relied on as legal advice and organizations should consult with their legal, governance and other relevant advisors as appropriate in preparing their quality improvement plans. Furthermore, organizations are free to design their own public quality improvement plans using alternative formats and contents, provided that they submit a version of their quality improvement plan to Health Quality Ontario (if required) in the format described herein.

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Overview

Located in the heart of the City of Kawartha Lakes, Ross Memorial Hospital (RMH) is an active, acute-care 170 bed community hospital serving more than 80,000 local residents and 35,000 seasonal visitors. RMH has a proud history extending back over a century. Our hospital is one of the largest employers in the region, with more than 820 staff members, 140 credentialed physicians, and close to 400 volunteers. Together, the Ross Family provides compassionate, high quality patient care to more than 45,000 emergency patients and 6,000 inpatients in orthopedics, ophthalmology, obstetrics, and general surgery. It operates a 15 station dialysis unit, and is renowned for its mental health programs and restorative seniors care. We have a progressive health promotion program for chronic disease management and outpatient physiotherapy.

RMH is the only hospital in the City of Kawartha Lakes, a “cottage country” municipality of 3,000 sq. km located one-and-a-half hours north east of Toronto. RMH is located on the traditional territory of the Michi Saagiig in the territory covered by the Williams Treaty. We acknowledge the long history of First Nations, Metis and Inuit Peoples in what is now called Ontario, and locally we recognize the proud heritage of our First Nations communities.

At RMH, we are committed to partnering with you to achieve **Exceptional Care –Together**. Our relentless pursuit of continuous quality improvement involves input from patients, families, staff, physicians, Board members, volunteers, and community members. This partnership is vital to our ability to provide safe, high quality care. We thank you for your contribution and for taking the time to read our 2020/21 Quality Improvement Plan (QIP). The QIP is an integral part of our quality improvement framework and it is aligned to our vision, mission, values, strategic directions and quadruple aim.

Figure 1: Ross Memorial Hospital Strategic Framework 2018-2021



Our 2020/21 QIP Focus Areas

RMH is committed to patient safety and becoming a high performing learning organization. As a result, we have met with the people we serve to develop the following Quality Improvement initiatives for 2020/21.

1. We will advance appropriate care in the appropriate care places and decrease the time to inpatient bed.
2. We will continue to provide a safe workplace.
3. We will electronically collect family satisfaction with ICU care and decision making.
4. We will continue to advance integrated care management for our mental health clients.
5. We will continue to improve palliative care management.

Describe your organization's greatest QI achievement from the past year



Ross Memorial Hospital's focus on quality patient care was recognized by Accreditation Canada this year. The hospital received the highest possible level of accreditation: Accreditation with Exemplary Standing. Together, the team met 99.6% of the required quality standards – an incredible result. This is the third time in a row that the hospital has achieved Exemplary Standing.

Everyone at Ross Memorial Hospital, including staff, physicians, volunteers and community partners, are involved in the accreditation process, and strive to deliver exceptional care and services, every day.

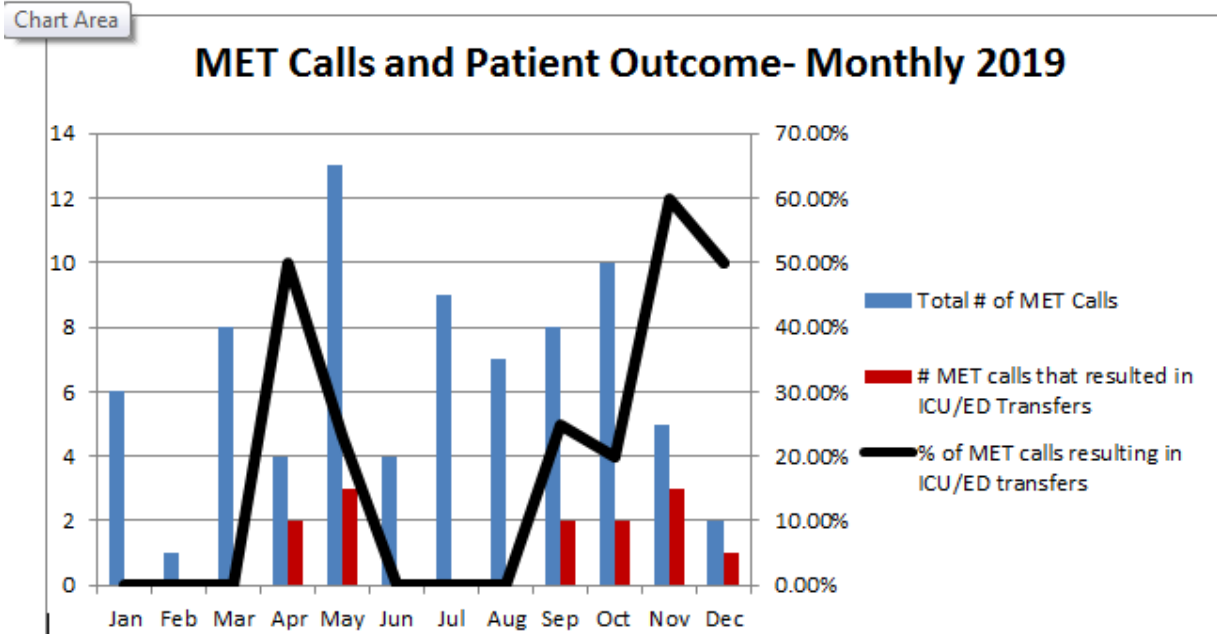
The Accreditation surveyors noted several strengths in the hospital's operations, including its strong focus on patients and families as partners in care; the early warning signs project; and collaboration with partner organizations. They also noted that staff culture at RMH, is "positive, warm and welcoming."

"This honour reflects our commitment to continually improving our care, so that we can meet the needs of our community today, and as we look to the future," says Veronica Nelson, Interim President & CEO, Ross Memorial Hospital.

Our teams wanted to share a second Quality Improvement initiative. RMH implemented NEWS2 which is an early warning system that empowers staff (primarily front line nurses) to take action based on early warning signs of patient deterioration, with the intent of catching and correcting potentially life threatening changes in clinical status (IHI, 2017). Early detection, paired with a timely and competent clinical response, create an ideal situation for a patient experiencing a critical event. Studies suggest that although nearly all critical events are

preceded by warning signs six to eight hours in advance, failure to rescue is still a challenge faced by most healthcare organizations (Al-Qahtani & Al-Dorzi, 2010). Last year, Ross Memorial Hospital successfully implemented NEWS2 across the entire organization. Two quality indicators were developed to monitor success of the program. One is an increase in Medical Emergency Team (MET) calls which demonstrated an uptake of the NEWS2 system and an early recognition of patient decline. The second indicator was a decrease in unexpected ICU admissions.

Benefits of NEWS2:



NEWS2 has standardized the acuity language throughout Ross Memorial Hospital. This success was shared with the Central East LHIN and going forward it is the proposed plan to incorporate NEWS2 in the Central East Hospital Cluster Regional Clinical Information System (CIS).

Collaboration and Integration

On January 27, 2020, the Kawartha Lakes Ontario Health Team (KL-OHT) took the next step toward designation as an Ontario Health Team by submitting an official progress report to the Ministry of Health. The report, created in consultation with the many community and patient/caregiver partners, details the KL-OHT's readiness to submit a full application. The progress report serves as an addendum to the previously submitted self-assessment and demonstrates the progress the Team has made in patient/client partnerships, community engagement, patient care and experience, digital health, governance, and quality improvement since June 2019 when it was designated as "In Development" by the Ministry .

The Kawartha Lakes OHT recently held focused advisory sessions to ensure the voices of patients, clients and families were reflected in plans to enhance our local healthcare delivery. The team will host community engagement sessions throughout 2020 across the City of Kawartha Lakes, to seek broader input about the healthcare gaps and challenges experienced in our communities, particularly when it comes to aging and transitioning between home, hospital and community care.

"We've partnered with several local healthcare organizations and will continue to look for opportunities to work together with our community, health and service providers as we shape our OHT," said Veronica Nelson, Interim President and CEO, Ross Memorial Hospital and Co-Lead of KL-OHT. *"Together, we are determined to create a connected and supportive system in the City of Kawartha Lakes."*

"Through collaboration with our partners and the public, we're confident in our progress toward creating an Ontario Health Team that delivers on its mission to provide connected local care for our community," said Barb Mildon, CEO, Community Care Health and Care Network and Co-Lead of KL-OHT. *"This report took into consideration the range of expertise from our partners, as well as the thoughtful input we've received through our focused advisory sessions."*

In March 2020, the Team will learn if they are invited to submit a full application to move forward in the next wave of OHTs to receive their designation of full implementation.

We have collected key quality metrics from our OHT partners. We know that by improving communications and becoming digitally connected, care navigation and coordination will improve. The partners are in the early stages of developing shared QIP indicators focusing on connecting local care.

Along with several affiliates, the current Kawartha Lakes OHT partners include:

- Ross Memorial Hospital (co-lead)
- Community Care Health and Care Network (co-lead)
- Brock Community Health Centre Care Partners
- City of Kawartha Lakes Family Health Team
- City of Kawartha Lakes Family Health Organization
- Canadian Mental Health and Addictions, Haliburton, Kawartha, Pine Ridge
- Extendicare & Lakeland Village
- Kawartha Lakes Paramedic Service
- Kawartha North Family Health Team
- Patient/Caregiver Partners

The Kawartha Lakes OHT will initially focus on connecting local care and services to a year one target population that includes seniors 65 years and older who live alone or have a poor support network; who are frail, with complex medical needs or are cognitively unwell; and who have been hospitalized within the last year. As the work of the OHT evolves, the target population will expand.

Community engagement sessions will be available on the new Kawartha Lakes OHT website, launching in the near future. The website will also offer a survey tool for patients, families and service providers to share their feedback.

Patient / Client / Resident Partnering and Relations

Patient and Family Advisory Council (PFAC)



Patient engagement is an essential way to incorporate the voices of patients and caregivers into decisions that will affect the care that patients received at RMH. “Patient to Patient” dialogue is an innovative Quality Initiative (QI) approach and is making a positive difference in our patient care and experiences.

Through our Patient & Family Advisory Council (PFAC) we implemented the Patient Experience Partners (PEPs) Rounding Program where former patients or family members engage current patients and family in real-time experience feedback. Feedback gathered during rounds are documented and utilized to improve communications, enhance staff engagement, address any immediate issues/concerns and provide data for quality improvement initiatives.

The participation of PFAC members in committees and quality improvement initiatives provides an important source of insight and ideas for improving care and patient experiences. Recently, one of our PFAC members was involved with a quality improvement initiative in the operating room that occurred following his feedback to the team. When the renovations were complete, he met with the team and toured the operating room. He wrote a follow up letter to the Interim President & CEO stating, *“In addition to answering my questions, they explained the plans for operating room staff to develop audit and continuous improvement processes within the area. This approach will ensure ongoing compliance with the various operating room procedures plus provide a forum to document and take corrective action for any deficiencies that are identified. Thank you for your support in*

making these improvements a reality. Operating room staff should be proud of their work area. The professional image of the facility will improve the patients' confidence."

Workplace Violence Prevention

RMH is committed to continuing to provide a work environment that is safe, healthy, supportive, secure and respectful of each individual. We continue to foster behaviours that contribute to minimizing the risk of violence and harassment in the workplace. This is a key priority for our Board and is part of our QIP and strategic plan.

Building on our successes from last year:

- RMH's Workplace Violence Prevention Committee continues to develop the action plans from the yearly hazard identification and risk assessments which are completed by organizational leaders every April.
- Risk mitigation strategies, hazard prevention and controls are developed from the assessments and placed in an action plan that will eliminate or reduce the risk of violence in the workplace.
- The quality improvements will be implemented and tracked at the committee level.
- Education and training will continue to increase the team's awareness of potential hazards and appropriate actions.
- With a growing need for management of behavioural emergencies in our geriatric population, the implementation of Code BERT (Behavioural Emergency Response Team) will be trialed. The Code BERT team will respond to geriatric patients demonstrating responsive behaviours who are resistant to 'in the moment de-escalation' and Gentle Persuasive Approach (GPA) techniques. These efforts are intended to reduce Code White calls.

Trending and tracking of incidents is important to providing a safe, supportive and healthy workplace:

- The number of workplace violence incidents is reported to the Hospital Board on quarterly basis.
- Incidents of violence causing staff injury are reported to the Joint Health and Safety Committee (JHSC) monthly.
- In cases where an employee requires healthcare, modified work or has lost time at work, the incident is reported within 72 hours and is investigated with JHSC representatives.

Virtual care

RMH is working with our community partners, patients and staff to enhance utilization of virtual care to optimize access to care, minimizing travel and wait times for our patients.

RMH's Current Status:

RMH currently has 4 portable OTN (Ontario Telehealth Network) units, a number of Personal Computer Video Conferencing (PCVC) ability including one meeting room dedicated to PCVC capabilities. Current examples of usage of OTN and PCVC are for outpatient and inpatient appointments, staff and patient education (such as physician rounds), meetings, and e-consults (i.e. tele-derm clinic, oncology visits, Mental Health assessments).

The Mental Health Program utilizes OTN to support patient visits within Halliburton Highlands Health Services, Youth psychiatric appointments, Consent and Capacity Hearings, and Mental Health meetings.

Consideration of expansion for this year:

- Purchase monitor for board room to facilitate PCVC admin meetings.
- Expand use of OTN for inpatient follow-up and consult appointments.
- Increase the use of E-consult referrals by reviewing the physician onboarding process.
- Secure emails and secure instant messaging will be introduced by OTN in 2020.

The Regional Clinical Information System (CIS) foundation is currently being built and will be implemented in the fall of 2021. This system has the capability, through the “My Chart” portal to provide patients access to a variety of services such as online scheduling for routine tests such as mammograms, education, secure emails and e-consultation.

Executive Compensation

Ross Memorial Hospital’s Board of Governors holds the President and CEO responsible to ensure the delivery of goals and objectives and improve quality of care, by establishing clear performance expectations and accountabilities. Executive compensation is linked to achieving the performance improvement targets set out in our QIP. Approximately 2% of annual base salary for the CEO, Vice Presidents, Chief of Staff, Chief Financial Officer, and Integrated Chief Human Resources Officer is dependent on achieving the QIP targets by fiscal year-end.

In assessing target achievements, indicators are equally weighted. Compensation will be linked directly and proportionately to achievement. For each indicator, the percentage of the goal will be accordingly rewarded. Performance on indicators will typically be evaluated on an annual basis, either fiscal or calendar year. In some cases, quality results may be considered in the assessment of performance achievements. The detailed 2020/21 QIP indicators, targets, measures and work plan can be found on our website.

The continued support and engagement of our Patient Family Council, Quality, Safety and Risk Council, our staff, physicians, board members, community partners and volunteers allows for RMH to continue to improve and achieve **Exceptional Care - Together**

Contact Information

If you wish to contact Ross Memorial Hospital with questions, concerns or suggestions related to our Quality improvement Plan, please contact quality@rmh.org.

Sign-off

I have reviewed and approved our organization’s Quality Improvement Plan for 2020 /2021



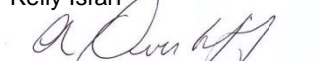
Board Chair
Val Harris



Board Quality Committee Chair
Wanda Percival



Chief Executive Officer
Kelly Isfan



Vice President Patient Care
Anne Overhoff

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