



2019/20 Quality Improvement Plan

Narrative

Overview

St. Thomas Elgin General Hospital (STEGH) is dedicated to delivering health care excellence to the City of St. Thomas and all eight municipalities within the County of Elgin. A fully accredited hospital, STEGH is comprised of 157-beds, and offers a range of hospital services, including emergency medicine, surgery, cardio respiratory services, palliative care, chemotherapy, diagnostic imaging, education, pediatrics, obstetrics, internal medicine, anesthesia, mental health, and much more.

More than 850 professionals work at STEGH, including over 200 credentialed Professional Staff (physicians, dentists, and midwives) who provide in-hospital care ensuring the highest quality of care to each and every patient that walks through the door. STEGH is also supported by 160 volunteers and 130 students.

Expanding to Better Serve the Community

In early 2018, STEGH celebrated the grand opening of the North Tower, which houses a new Emergency Department (ED), surgical suite, sterile processing department, and a new mental health unit. The new 3-story building was designed with an excellent patient care experience in mind while improving efficiencies and lessening footsteps. The new ED is much larger and is geared toward high volume activity with a design intended to lower patient wait times and improve workflow. The modern design was built with the patient in mind to provide the most efficient and streamlined patient care journey. The design also supports physicians and staff in providing excellent care and creates a more comfortable and welcoming place for patients and their families. The North Building is transforming the way care is delivered to the community.

Committed to Lean

In 2010-2011, STEGH adopted a Lean management philosophy to quality improvement, which continues to guide all initiatives and activities within the hospital. Lean is an approach that focuses on continuous improvement in the pursuit of excellence with an emphasis on respect for people - patients, families, providers, and volunteers. This approach has allowed STEGH to achieve a multitude of successes and improvements, which directly translate to excellent care experiences for patients. Of course, these achievements are due to the commitment, hard work, and passion of staff, physicians and volunteers. In 2018, STEGH implemented almost 1800 quality improvement initiatives.

New Strategic Directions and Revised Mission, Vision and Core Values

STEGH recently completed a comprehensive strategic planning exercise, *Imagine 2023: Creating a Healthier Tomorrow*. Through consultations with internal and external stakeholders, partners, and patients, four strategic directions were identified. These directions will continue to propel STEGH toward

meeting and achieving goals and objectives, and will guide the strategic plan over the next four years. The strategic directions are as follows:



Achieving operational excellence

to ensure quality and sustainability.



Empowering our team

to reach their full potential.



Creating collaborative networks

to connect patients to the services they need.



Partnering with patients

to enhance their care experiences.

STEGH is in the process of finalizing newly developed Mission and Vision statements, which describe the organization's core purpose, and reflect collective aspirations for the future. These statements will be shared publicly in May 2019. Frontline staff were recruited to act as Values Ambassadors to engage with physicians, staff, and volunteers to review STEGH's core values. These individuals collaborated with approximately 500 to 600 staff through various activities and eventually recommended a revised set of core values:

Compassion, Accountability, Respect, Innovation, and Collaboration

STEGH's QIP demonstrates commitment to the strategic directions, mission, vision and values. As a leading hospital in the province in both Emergency Department wait times and advancing patient experience strategies, STEGH continues to deliver quality in all aspects of care and is committed to open, transparent dialogue with stakeholders.

Population Health and Equity

Health is determined by complex interactions between social and economic factors, the physical environment, and individual behaviour. These determinants of health include: food, housing, education, income, peace and justice, physical environment, healthy child development, and social supports. Health is everyone's responsibility and all sectors of society take part in influencing the determinants of health (government, community and health agencies, and individuals).

As stated above, STEGH's primary catchment is Elgin County. According to a 2016 Census, the total population of Elgin is 88,978. The population only grew by 1.7% since the 2011 census. Elgin County has a large rural population with 35% of its residents in rural areas. The county covers a size of 1,845.41 km² (712.52 square miles).

Seniors make up 18% of the population - a number that continues to grow. Conversely, children and youth account for 25% of the population, but that number is decreasing.

People living in Elgin-St. Thomas consider themselves healthy overall; 90% rate their health as good or better, although more people reported better health when they had a higher income. An increasing number of Elgin residents report drinking in excess of the low risk drinking guidelines, and residents have higher smoking rates compared to the provincial average. This rate has not decreased over time. The residents of Elgin County have higher rates of chronic disease and higher mortality rates than provincial counterparts. Local residents experience greater diabetes-related hospitalization rates than the province, and chronic disease is the biggest contributor to illness and death. STEGH opened a regional Integrated Stroke Unit in April 2016, which provides both acute and rehabilitation stroke services for the aging population.

More than half of adults in Elgin-St. Thomas have a Body Mass Index (BMI) above the “normal” weight range; this is similar to the provincial average.

To ensure that vulnerable populations receive timely follow-up care when discharged from hospital, STEGH arranges follow-up appointments with primary care providers at the time of discharge. For patients without a family doctor, STEGH connects them with a Family Health Team to provide follow-up care in the community.

In April 2017, STEGH implemented a new process that involves scheduling follow-up care appointments with specialists to ensure timely access to specialized care for medically complex patients. Follow-up care plans have been extended to include mental health inpatients, one of the most vulnerable populations in Elgin County.

STEGH’S GREATEST QUALITY IMPROVEMENT/ACHIEVEMENT FROM 2018

STEGH employs a continuous improvement model with a primary emphasis on developing an engaged team of problem solvers by building capacity in the organization. Throughout 2018, STEGH assessed its system approach to continuous improvement to highlight key areas to drive change. Through organizational reflection, changes were identified that connect the strategic vision to everyday work in an effort to drive sustainable change throughout the organization.

STEGH developed and tested a model of tiered leadership to connect outcomes through all levels of the organization. A Tier 1 approach was developed and piloted to connect and align the unit level work to the strategic priorities. This enabled staff to huddle and integrate PDSA thinking into the everyday workflow and test changes. It also created a focused approach on the critical measures that are important to each unit and the organization. The executive team also created a Tier 2/3 approach where the status of key measures within the organization flows up to the executive team enabling conversations to cascade support and coaching to the Tier 1 level. While this development and testing has shown positive results, STEGH continues to deploy a tiered system to include the Board of Directors. Rooted in this work is a focus on coaching and development to enable performance and change. The journey will continue in 2019-2020.

PATIENT PARTNERING AND RELATIONS

Listening to and involving patients, families and caregivers in all stages of the care design and delivery process is a key driver of STEGH’s operational platform. Patient and family engagement is critical to STEGH’s daily work and quality improvement efforts. Patient surveys are distributed to every discharged

patient; the survey is also available electronically online. STEGH boasts a return rate of more than 39%, which provides robust and rich data on which to base quality improvement work. STEGH also uses the NRC Health Canadian Patient Experience Survey (CPES) and the Emergency Care Survey to identify trends and validate the information received through the in-house survey. STEGH will continue to measure patient experience in the area of receiving enough information on discharge, setting a target of 85% to patients who answer “Yes – Completely” to this question.

The Patient Experience Council has continued to grow and develop; becoming involved in different hospital wide initiatives, such as making improvements to hospital wayfinding. Currently, three Patient Partners have joined the Accreditation Ambassador committee to provide feedback about their experiences and to assist with preparations for the Accreditation Survey in June 2019. Patient Partners are also engaged in the implementation of the “iConnect with AIDET” tactic, a communication strategy that aims to improve interactions with patients and their family caregivers. AIDET, which was implemented in early 2019, stands for Acknowledge, Introduce, Duration, Explanation and Thank You and provides staff with a framework to ensure every encounter with the patient is positively contributing to the patient’s experience. AIDET has been shown to improve patient perception of the care, decrease patient anxiety and ensure empathy, concern and appreciation is consistently delivered by staff.

In alignment with the Continuous Improvement philosophy at the hospital, STEGH will implement Experience Based Co-Design (EBCD) activities in 2019-2020. EBCD is an approach that enables staff, patients and family caregivers to co-design services and/or care pathways, together in partnership. It focuses on the patient and staff experiences and empowers both groups to make changes together. Over the next year, this methodology will be added into the existing Lean Management System that provides the hospital a framework for continuous improvement.

WORKPLACE VIOLENCE PREVENTION

Workplace violence prevention is a strategic objective for 2019/20. STEGH is broadening its focus on violence prevention by implementing a Workplace Violence Prevention (WVP) committee. The Committee will analyze WVP practices and adopt practices from leading organizations. The Committee will also consider staff feedback, through staff surveys, related to prevention of abuse and violence as well as response to incidents of violence, with a goal of implementing solutions to reduce risks of violence. STEGH will fully implement all departmental workplace violence risk assessment action plans in 2019/20. Work plans include a variety of measures such as signage, policy refreshers, panic alarms, training, and departmental mock code white events.

STEGH continues to document and monitor all incidents of violence and has set an expectation for leadership follow up within 48 hours.

COMPENSATION

The QIP spans April 1, 2019 to March 31, 2020. Five of the six metrics below will be met and each of the five metrics will have 1% assigned for performance-based compensation.

1. STEGH will collaborate with system partners to reduce colonoscopy wait times.

By March 31, 2020, the wait will be 56 days or less for 75% of patients waiting Colonoscopy who are positive for Fecal Occult Blood Test (FOBT) / Fecal Immunochemical Test (FIT).

2. Continue to sustain Emergency Room Pay for Performance Results (P4R). Three of six P4R measures will be at Ministry of Health and Long Term Care 90th target.

3. Percentage of Discharge Summaries Dictated within 48 hours.

For fiscal 2019/20, 90% of discharge summaries will be completed within 48 hours.

4. IDEAS - Improving transitions to home for Congestive Heart Failure (CHF) and Chronic Obstructive Pulmonary Disease (COPD) patients. Supporting patients who are admitted to STEGH with primary diagnosis of COPD/CHF and who screen positive using the Complex Discharge Screener.

For fiscal 2019/20, successful deployment of the IDEAS program called PREVENT as evidenced through the development of increase coordinated care plans for patients with COPD and CHF.

5. Patient Experience – Did you receive enough information from hospital staff about what to do if you were worried about your condition or treatment after you left the hospital?

For fiscal 2019/20, achieve 85% who responded Yes-Completely on the internal patient experience survey.

6. Medication reconciliation at discharge for inpatient areas.

Successful implementation medication reconciliation at discharge for inpatients. Target 88%

Contact Information

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Other: 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 STEGH's Quality Improvement Plan:

Cathy Crane, Board Chair _____ (signature)

Sally Martyn, Quality Committee Chair _____ (signature)

Robert Biron, President & Chief Executive Officer _____ (signature)

Dr. Waleed Chehadi, Chief of Staff _____ (signature)