

Excellent Care for All

Progress on QIP Year One (2012/13) to Q3 St. Thomas Elgin General Hospital

| Priority Indicator (year 1) | Performance as stated in 2012/13 QIP | Performance Goal as stated in 2012/13 QIP | Progress to date | Comments |
|---|--------------------------------------|---|-------------------------------|--|
| Hand hygiene compliance before patient contact: The number of times that hand hygiene was performed before initial patient contact divided by the number of observed hand hygiene indications for before initial patient contact multiplied by 100 – Jan – Dec 2012, consistent with publicly reportable patient safety data | 74% | 85% | 89.9% | We continue to work on improvements to this indicator by increasing the number of audits and continue to review results with the executive team and nursing managers on a weekly basis. We continue to promote HH throughout our culture to ensure sustainability. |
| Medication Reconciliation Percentage completion of all patients discharged from acute medical beds | New indicator for 2012/13 | 80% | 82% | Weekly audits continue with reports to department chiefs, managers and P&T committee. We have increased our goal to 85% completion for 2013/14 QIP. |
| ER Wait times: 90th Percentile ER length of stay for Admitted patients. | 9.2 hours | 8 hours | 7 hours | By consistently focusing on patient flow throughout the organization we have exceeded our ER Wait Time LOS target. |
| NRC Picker / HCAPHS: "Would you recommend this hospital to your friends and family?" (In-house survey-percent of those who responded "Definitely Yes") | 82% | 85% | 87% | By implementing an in-house survey that is distributed daily to discharged patients, we are able to review feedback in real time, quickly make improvements and check to ensure these actions have a positive result. |
| Percentage ALC days: Total number of in patient days designated as ALC in acute care beds, divided by the total number of in patient days | 15% | 12.5% | 12/13 Q1 7.36% Q2 4.23% | Over the past year our ALC days have significantly decreased due to a combination of increased support via CCAC through Home First and a focus on coordinated discharge planning. |