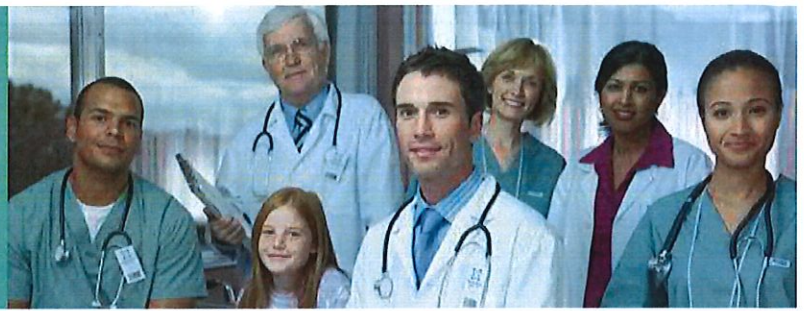


Let's Make Healthy
Change Happen.



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



3/01/2024

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.

ontario.ca/excellentcare

Overview

In this section, you may wish to include a description of how you are working to improve care within your organization or an achievement your organization is most proud of. This opening paragraph will set the context for what your organization will be working toward through your QIP.

About St. Thomas Elgin General Hospital

St. Thomas Elgin General Hospital (STEGH) is dedicated to delivering health care excellence to the City of St. Thomas and all seven municipalities within the County of Elgin. STEGH has a proud history and legacy in the community with almost 70 years of service. A fully accredited hospital with exemplary standing, we offer a full range of services, including: outpatient care, diagnostic imaging, inpatient acute care, obstetrics, emergency services, post-acute care, and regional satellite services. To achieve the best possible health outcomes for our patients, we continually seek innovative ways to deliver services, engage our patients and community, invest in our people, and collaborate with our health care partners.

More than 1,000 employees work at STEGH, including over 200 credentialed professional staff (physicians, dentists, and midwives) who provide in-hospital care ensuring the highest quality of service delivery to every patient that walks through the door. STEGH is also supported by 70 active volunteers as well as students who come from colleges and universities to complete their educational placement requirements.

Access and Flow

Optimizing system capacity, timely access to care, and patient flow ultimately improve outcomes and the experience of care for patients, clients, and residents. Health service organizations across the system, including inter-professional primary care, long-term care, and hospitals, are working in partnership and across care sectors on initiatives to avoid unnecessary hospitalizations and avoid visits to emergency departments through new models of care and by ensuring timely access to primary care providers. In this section, you are encouraged to share improvements that are supporting patient/client/resident access to care in the right place at the right time.

STEGH aims to provide the highest quality of care to its patients and is steadfast in its approach to optimizing capacity and maintaining access and flow. STEGH has adopted this philosophy with the intent to provide patients with an efficient and safe journey through the facility. STEGH's leadership and point of care staff hold a shared accountability on the critical importance of hospital patient flow, which in turn yields positive patient outcomes and staff satisfaction.

This undertaking involves everyone across the organization and has resulted in STEGH maintaining best-in-province time from the Emergency Department (ED) to inpatient bed (2023/24). As the demand and complexities for timely access to care continue to evolve, STEGH explores and fosters new and innovative strategies that examine and capture the full potential of health human resources (HHR), process and policies, as well as physical capacity and maximization of space.

On average, STEGH's ED sees over 1,250 patients on a weekly basis. And, out of 75 hospitals provincially, STEGH has maintained a place in the top 20 best performers for Physician Initial Assessment (PIA), demonstrating the hospital's commitment to timely patient assessments. Over the past decade, STEGH has been on a journey of continuous quality improvement utilizing a LEAN methodology approach. The hospital has undergone many quality and process improvements to enhance efficiency, while implementing innovative solutions to ensure timely access to ED physician assessments.

Building Partnerships and Service Integration:

In order for STEGH to continue as one of the top performing ED's in the province the collaboration and partnerships developed with Home and Community Care Support Services (HCCSS), the Canadian Mental Health Association (CMHA) and most recently the Southwest Alzheimer Society have become invaluable. These organizations have been fully integrated into the ED model of care resulting in worker representatives fulfilling their roles alongside ED staff and physicians to maximize patient outcomes by providing more timely patient assessments and care planning resulting in a better experience for service users.

Triage Rapid Access Physician:

Over the 2023 period, STEGH embarked upon a pilot project to address the following:

- Streamline the process for CTAS 3 patients to be assessed and provide access to diagnostic services sooner (equating to a reduction between triage and PIA time)
- Reduce the number of patients who leave the ED without being seen (LWBS)
- Reduce the workload burden and patient volume for triage nurses
- Target interventions during peak wait times creating a steady flow of patients through the ED and diagnostic departments (preventing an accumulation of patients waiting to be seen after hours when supports are less available)

Through this pilot project, an ED physician was placed in the triage location to work collaboratively with the triage team. This project was named "Triage Rapid Access Physician". The triage nurse would determine if the patient meets the criteria for the Triage Rapid Access Physician based presentation, wait time to be seen, as well as patients who choose to leave without being seen (LWBS) a doctor.

The results of this project demonstrated that there were reductions in the 90th percentile for the time it took patients to be seen by an ED physician, as well as a decrease in the number of patients who LWBS (after being triaged as urgent). As such, STEGH aims to build on this work over the 2024/25 period in order to further support timely access to care.

Over the course of 2023, STEGH has also invested a significant amount of time on the redesign of its morning bed huddle model and associated performance metrics. Clinical teams reviewed the hospital's approach to bed huddle in its entirety, taking into consideration people, process, and technology, and made changes to redesign the process using Smartsheets. Adopting Smartsheet technology has allowed leaders to enter daily occupancy metrics, staffing levels, access and flow metrics, and other key data on either a computer or mobile. Daily metrics are now visible for all leaders through an interactive dashboard that is accessible on either device, at any time. Clinical managers no longer need to enter data into an excel spreadsheet, which was time-consuming and at times, redundant. Each leader now enters data into a survey, which is more efficient, streamlined, and intuitive. This essential information is used daily by leaders to address hospital occupancy and health human resources, ensuring that patients are transitioned to the appropriate care areas in an efficient, safe and timely manner.

Equity and Indigenous Health

Ontario Health is committed to driving improved and equitable outcomes to reduce health inequities across the province. Advancing health equity for communities in Ontario requires strategic and sustained efforts. Some health service organizations have established or are developing an Equity, Inclusion, Diversity, and Anti-Racism workplan and First Nations, Inuit, Metis, Urban Indigenous work plan (that include existing provincial priorities such as French language health services, Disabilities Act, Black Health Plan, etc.) based on Service Accountability Agreement obligations. This is an opportunity to share your organization's quality improvement initiatives that are driving equity and Indigenous health and Indigenous cultural safety initiatives.

Recommended length: 250 words

Partnering with, and learning from, our Indigenous Communities

As part of STEGH's ongoing work in partnering with patients to enhance their care experiences, the organization identified a key priority to incorporate the voices of Indigenous patient partners into co-design work within the Patient Partner Program. Through this work, STEGH aims to improve equity, diversity and inclusion. During the 2023/24 period, STEGH committed to carrying out 100 per cent completion of three co-design activities that included the voices and perspectives of Indigenous patient partners, based on the recommendations provided by the Truth and Reconciliation Commission of Canada.

In collaboration with partners and representatives from the Southwest Ontario Aboriginal Health Access Centre (SOAHAC), STEGH has made adaptations to the Multi-faith Space to include beautiful Indigenous art pieces created by local artists. These pieces create a more welcoming and inviting spiritual space for the Indigenous community. Based on feedback from Indigenous community partners, the organization is in the process of incorporating Indigenous artwork in other areas of the facility to promote a safe, inclusive environment for Indigenous community members who are seeking care.

Over the 2023/24 period, STEGH focused on Indigenous patient partner recruitment to ensure the Indigenous voice is represented. We turn to our Indigenous partners to help guide the hospital and provide crucial feedback about quality improvement initiatives and policy development. In January 2024, STEGH was extremely happy to welcome its first indigenous patient partner to the team.

This year, STEGH developed and shared a land acknowledgement that came to fruition through close collaboration with its valued indigenous partnerships. STEGH has also produced its own educational package for leaders to develop their own personalized land acknowledgement statements. STEGH continues to learn about the history of the land it occupies, and is taking meaningful and necessary steps towards building respectful relationships with Indigenous peoples and communities. The hospital recognizes and has prioritized the importance of diversity, equity and inclusion training for all staff and physicians. This training involves active thinking, intellectual engagement, social skills, empathy, and racial understanding.

STEGH continues to maintain equity, inclusion, diversity and anti-racism through the promotion of three training modules for staff and physicians. One hundred per cent of leaders and over 95 per cent of staff have completed these modules to date. The Advancing an Inclusive Culture at STEGH Committee is partnering with the College of Physicians and Surgeons of Ontario (CPSO) on a quality improvement initiative to increase equity, diversity and inclusion training for physicians over the next year. In the spring of 2024, STEGH will offer a learning module to all staff and physicians that was co-created with local Indigenous communities to provide the rich history of Indigenous people and their interactions with the health care system. STEGH continues to partner with local Indigenous partners on a variety of initiatives for education and patient centered care. These initiatives include policy development on smudging and traditional healing practices, inclusion of land acknowledgement, the hospital's commitment to truth and reconciliation and indigenous cultural safety workshops for staff, board members and physicians.

Patient/client/resident experience

This is an opportunity for you to share how you incorporate experience information (this may include from surveys, patient/client/resident advisory committees, or other feedback you receive about care experiences and quality of life) into improvement activities.

Recommended length: 250 words

Gathering feedback and engaging our partners

STEGH currently utilizes its internal survey system to gather insight into the patient experience. These survey responses help to identify the patient care areas that are excelling in service provision and also highlight where there are opportunities for improvement. Leadership and board members review these results on a monthly basis; they celebrate successes and discuss planning for areas of improvement.

In early 2023, in an effort to increase patient feedback through survey responses, STEGH adopted QR code scanning technology placing QR codes around the building so that patients and visitors can simply scan the code with their mobile devices. This code links directly to STEGH's patient experience survey providing a more convenient option for submitting feedback. In 2024, STEGH will be moving to the Qualtrics XM platform, which is a digital pre-programmed patient experience survey instrument that enables benchmarking with other organizations and provides patient experience dashboards in an effort to drive continuous quality improvement.

STEGH also engages with the Patient and Family Advisory Council (PFAC), which plays a vital role in shaping the organization's improvement strategies. Established in 2012, the PFAC is comprised of a diverse group of volunteers with varied health care experiences. The PFAC works collaboratively with hospital staff and leaders to ensure that the voice of the patient and/or caregiver is represented in program development and service delivery evaluation.

In addition to the PFAC, the hospital also engages with patient and family advisors by involving them on corporate committees, co-design working groups, and personnel hiring panels. Their input and ideas bring a unique perspective to the hospital's decision-making processes. Their involvement ensures that patient experiences are considered in operational protocol development.

Over the past two years, STEGH has developed a robust patient rounding program across clinical areas, involving all levels of leadership. Through direct communication with patients and caregivers, hospital leadership asks specific questions about how the organization can continue to improve service delivery. By engaging in one-on-one conversations, leaders gather real-time feedback and can address immediate concerns, creating a more personalized and responsive care environment. Most recently, STEGH has enhanced this rounding system by developing a ticketing process to track and address patient experience feedback at both organization-wide and unit-specific levels. This allows the organization to monitor trends, allocate resources effectively, and implement targeted improvements. STEGH also has a dedicated Patient Relations team available by phone, email, and in-person to receive patient and family feedback, address concerns, and advocate for patients and family members if necessary.

The experiences shared through all channels contribute to the hospital's ongoing improvement efforts and overall quality of care delivery.

Provider experience

It continues to be a challenging time for health care organizations with unprecedented human resources challenges. Many organizations are currently implementing innovative practices to improve workplace culture, providing recruitment incentives, and optimizing staff to the full scope of practice. In this section, you are encouraged to share how you are improving staff experience and the practices your organization is undertaking to manage current health workforce challenges.

Recommended length: 250 words

Workplace Wellness

STEGH continues to engage staff in a variety of wellness offerings which include emotional, physical, mental and spiritual. STEGH provides on-unit stretching, mindfulness, fitness classes, counselling, coaching, spiritual care, wellness workshops, therapy dog visits, and much more! There are also many corporate events, such as the annual volleyball tournament, summer BBQ, and Wellness Week. Internal supports are augmented by the employee and family assistance provider – Homewood Health. This year, STEGH is partnering with the Canadian Mental Health Association (CMHA) to bring wellness moments and relaxation breaks to our teams. Annually, STEGH provides over 3,500 events to staff, physicians, and volunteers.

Staff Engagement Surveys have consistently high return rates. On the most recent survey, 88 per cent of staff indicated that they would recommend STEGH to family and friends, and 87 per cent recommend the hospital as a place to work. This is an achievement that the organization is extremely proud of. STEGH has successfully recruited over 40 nurses into the Community Commitment Program for Nurses (CCPN), filling all allotted positions. The hospital has been approved for an increase in 2024 allowing for more nurses to be enrolled into the program which will contribute to further sustaining STEGH's nursing workforce.

STEGH has invested in new processes for hiring and orientating new staff to the organization. These processes, such as automated tools for rounding and staff on-boarding have helped to ensure a consistent, streamlined and timely approach to checking in on the well-being and experience of its employees. STEGH offers internal training for staff and leaders, including an Aspiring Leadership Program, Crucial Conversations, and Diversity, Equity and Inclusion training. STEGH's clinical staff are supported by a skilled group of clinical educators, clinical coaches, as well as dedicated and empathetic leaders who have recently attended educational sessions on compassionate leadership approaches.

Safety

Organizations are encouraged to use this section to share your approach or standardized process used to learn from patient safety events. It may be valuable to provide examples of any new innovations that you have used to share learnings about patient safety with your patients/residents/families to prevent future occurrences.

Safe, high quality care is top priority at STEGH, and the hospital frequently evaluates safety processes and data to ensure safety protocols remain nimble and proactive. STEGH has upgraded its adverse event reporting system (RL6) to ensure the reporting of safety events is easy and time efficient for point of care staff. Since completing this upgrade in 2023, the hospital has seen an increase in safety event reporting, which has provided the ability to identify safety event types and trending, and analyze how best to address and mitigate concerns.

Leaders are held accountable to safety standards and the percentage of workplace safety incidents with leader follow up (within 48 hours) are tracked on the organizations quality and safety scorecard. These results are reported to the board of directors on a monthly basis, when safety trends and targeted initiatives are discussed. Leaders at STEGH consistently maintain this safety requirement, and in 2023, 90 per cent of monthly safety events were reviewed and followed up within 48 hours. As part of the RL6 system upgrade, STEGH now requires a detailed root cause analysis as a standard for all level three (and higher) adverse events. All staff completed mandatory training about how to effectively and accurately document safety incidences that may be encountered, and how to submit them in a timely manner for leadership review and analysis. This entire process is designed to mitigate risks to patient and staff safety.

STEGH has developed standardized training for clinical staff on explicit, implicit, anchoring, confirmation, and confounding biases in health care. In late 2023, STEGH launched two leadership surveys asking leaders to identify the top ten risks in their respective areas and in order of importance. This data is currently being

uploaded to STEGH's risk register. This risk register is a database of assessed risks within the organization at any one time. It helps managers prioritize available resources to minimize risk and target improvements with a thoughtful and methodical approach.

Population Health Approach

Population health-based approaches involve a broadening focus to include being proactive in meeting the needs of an entire population. This includes providing proactive services to promote health, prevent disease, and help people live well with their conditions in every interaction with the health system. In this section, you are encouraged to share how your organization is working in partnership with other health system providers or for those who are part of an [Ontario Health Team](#), on population health-based approaches to care for the unique needs of their community.

Over the last year STEGH has been closely collaborating with the Elgin Ontario Health Team (OHT) on a number of quality improvement projects that promote population health for service users. STEGH is currently engaged with the Elgin OHT on the Let's Go Home (LEGHO) project in an effort to bring bundled care services into fruition which supports the coordination of community support services around access to meals, transportation, housekeeping, wellness checks, navigation and improved community connections removing financial barriers to patients.

STEGH is also very proud of its (PREVENT) program which was initially launched in 2019. This collaborative initiative involves critical support and input from Home and Community Care Services (HCCSS) as well as primary care physician partners with the goal of improving care for members of the St. Thomas and Elgin community who are experiencing Chronic Obstructive Pulmonary Disease (COPD) and Congestive Heart Failure (CHF). This work was placed on hold during the height of the COVID-19 pandemic but with the inception of the local OHT this program has recently been re-launched in order to provide a specific and specialized care pathway to ensure equitable access to best practice and enhanced post discharge patient follow-up and monitoring. This work is targeted towards helping to keep individuals in their homes and prevent readmission to hospital.

In collaboration with the Elgin OHT, STEGH has been heavily involved in making improvements to the continuum of care through the application of digital health tools. The intent of this digital health journey is to improve the sharing of information between the hospital and community health partners in order to simplify transitions in patient care whilst maintaining the safe handling of personal health information. ConnectMyHealth and online appointment booking are just a couple of examples of the digital health tools adopted and utilized by STEGH which have been strategically embedded into practice. Utilizing these tools provides the ability for practitioners to more efficiently carry out patient care through electronic patient referrals and consultations, supporting smoother clinical workflows, improved transitions in care between providers and an overall better patient experience.

Executive Compensation

Please describe how you have connected executive compensation to the indicators and targets set in the workplan of your QIP. For information on performance-based compensation, please see the Excellent Care For All Act.

STEGH's executive compensation is currently under a process of review. However, STEGH's Board of Directors will be holding executive level leadership accountable to QIP performance for the 2024/25 cycle.

QIP-2024-25 Proposal		
Indicator	Target	Initiative
<p>Percentage of patients who indicate on their survey (negative response).</p> <p>Did you experience racism and/or discrimination while receiving care at the hospital based on your citizenship, race, place of origin, ethnic origin, colour, ancestry, disability, age, creed, sex/pregnancy, family status, marital status, sexual orientation, gender identity, and/or gender expression?</p>	<p>Collecting baseline data to determine future organizational target</p>	<p>This is a new question which will be added to the hospital's patient experience survey. This question will be used to specifically address and target patient experiences around Equity Diversity and Inclusion (EDI). The hospital's EDI committee will continue to engage with community partners to ensure that staff have up to date, relevant training available both in person and online, as well as monitor and make recommendations based on patient experience survey results.</p> <p>The EDI committee will complete an assessment of learning needs and demographics this year to support the development of an EDI framework for the organization.</p> <p>The hospitals Executive leaders and board members will also be engaged on a monthly basis on organizational performance through the Quality and Safety committee level.</p>
<p>Percentage of respondents who responded "Completely" to the following question: Have you been provided with thorough discharge instructions before leaving the hospital?</p>	<p>90%</p>	<p>The organization will continue to refine and evaluate the standardized practice implemented in late 2023 which engages patients and families during discharge period to ensure they received enough information at discharge and understand their instructions. The hospital will make necessary changes to the process and package by December 31, 2024.</p>
<p>Medication reconciliation at discharge: Total number of discharged patients for whom a Best Possible Medication Discharge Plan was created as a proportion the total number of patients discharged.</p>	<p>90%</p>	<p>Although STEGH performed well on this indicator throughout 2023, it was identified that there is continued opportunity to improve timely medication reconciliation at discharge and therefore onboarding education with providers and residents during orientation will continue with the necessary adjustments being made to the educational process for physicians.</p>
<p>Medication reconciliation at admission: Total number of admitted patients for whom a Best Possible Medication Admission Plan was created as a proportion to the total number of patients admitted.</p>	<p>80%</p>	<p>Patients admitted to hospital via the ED will have their admission medication reconciliation completed by the most appropriate prescriber.</p> <p>Throughout the last QIP cycle STEGH was collecting baseline data on this indicator to establish how the organization has been performing. For the 2024/25 period STEGH will apply a target of 80% to this indicator.</p>
<p>Rate or reported workplace violence incidents by hospital workers that resulted in a lost time injury within a 12 month period (5 incidents resulting in lost time)</p>	<p>Collecting baseline data to determine future organizational target</p>	<p>Over the 2024 period STEGH will be undertaking a significant remodeling of security resources provision at the hospital.</p> <p>STEGH will move Security services in house to ensure greater consistency of scheduled shifts and collaboration.</p> <p>There will also be further updates executed on the RL6 employee reporting form to allow the organization to collect, analyze, evaluate and share lost time data with team members.</p> <p>As part of this QIP work, staff and leaders will receive further training to identify, mitigate and react to potentially aggressive situations.</p>

Contact Information/Designated Lead

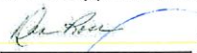
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Sign-off

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

Board Chair  (signature)

Board Quality Committee Chair  (signature)

Chief Executive Officer  (signature)

Other leadership as appropriate  (signature)