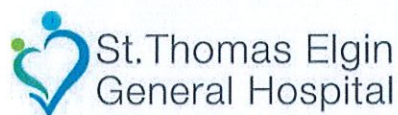


Let's Make Healthy  
Change Happen.



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



2025

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.



## Overview

This narrative describes the 2024/25 Quality Improvement Plan (QIP) accomplishments and introduces the 2025/26 QIP journey for St. Thomas Elgin General Hospital (STEGH) over the next year. This document highlights STEGH's commitment to advancing healthcare excellence and patient-centered care. The QIP serves as a strategic framework for the hospital to systematically improve service delivery, optimize patient outcomes, and enhance the overall quality of care across all clinical and operational domains. Guided by STEGH's values of innovation, compassion, collaboration, accountability, as well as continuous learning, the 2025/26 plan builds on the successes of prior years while addressing emerging healthcare challenges and priorities. The focus areas for this period include enhancing patient safety, reducing wait times, improving care accessibility, and fostering an inclusive, compassionate care environment. Through collaborative employee and patient engagement and evidence-based practices, STEGH is dedicated to fulfilling its mission and vision to provide healthcare excellence for the community it serves.

## Access and Flow

Access and flow are crucial to the effective functioning of STEGH and the quality of care it provides to the community. As an acute care hospital serving a diverse and growing population in Ontario, STEGH is committed to ensuring timely access to medical services and efficient patient flow throughout the facility. Improved access reduces wait times in critical areas such as the emergency department, surgical services, and inpatient care, directly enhancing patient outcomes and reducing the likelihood of poor patient outcomes. Effective patient flow ensures that beds and resources are utilized optimally, preventing bottlenecks that can lead to overcrowding and delays in care. For STEGH, maintaining seamless access and flow is essential not only for patient safety and satisfaction but also for supporting healthcare staff and ensuring that the hospital remains responsive to the dynamic needs of the community, particularly during periods of high demand or public health challenges.

STEGH is dedicated to providing high-quality, patient-centered care, with a strong focus on performance improvement across all departments, including its Emergency Department (ED). The hospital's participation in the Ontario Ministry of Health's Pay for Results (P4R) program underscores its commitment to achieving key performance targets, particularly in areas such as wait times, patient flow, and the overall quality of emergency care. The P4R initiative incentivizes hospitals to meet specific benchmarks related to ED performance, such as reducing wait times, improving patient satisfaction, and ensuring timely access to care. By aligning financial incentives with quality care objectives, STEGH's ED is continuously striving to enhance care delivery and optimize resource utilization.

STEGH is very proud to have maintained its 1<sup>st</sup> place position for time to inpatient bed performance. STEGH also continues to lead the 1<sup>st</sup> place position for admitted length of stay. Through careful resource allocation and metric evaluation over the last year STEGH has managed to reduce and then maintain ambulance offload times to 20 minutes at the 90<sup>th</sup> percentile placing STEGH in the top ten out of 75 hospitals for this performance indicator. STEGH has ensured that access and flow policies are maintained and regularly reviewed with input from front line leadership and staff as part of its overall flow strategy. Over the 2024/25 period STEGH has tested its surge and capacity plan to address large visit volume and high hospital occupancy situations. These exercises have allowed the hospital to remain laser focused and prepared in the event of periodic access and flow challenges. Ensuring that patients are seen in a timely manner during their ED visit is very important to the organization. Over the last year STEGH has seen a 5% reduction in patients who left without being seen by an ED physician. This is important to the hospital as reducing the number of patients leaving without being seen improves patient safety, resource utilization and patient satisfaction. Moving into 2025/26 STEGH will be placing continued focus on ED access and flow priority indicators specifically around nursing roles and accountabilities in an effort to enhance care delivery and rising visit volumes.

## Equity and Indigenous Health

STEGH has made significant progress in advancing equity and Indigenous health through a variety of initiatives aimed at addressing health disparities and improving access to care for underserved populations. The hospital has actively engaged with Indigenous communities to better understand their unique healthcare needs, integrating cultural competency into staff training and clinical practices. STEGH is committed to fostering an inclusive environment that respects Indigenous traditions, beliefs, and values, ensuring that patients receive care that is both culturally appropriate and patient-centered. Additionally, the hospital has worked to improve access to care for Indigenous peoples by building partnerships with local Indigenous organizations. STEGH continues to dedicate work efforts towards the health and well-being of Indigenous populations, focusing on reducing health inequities and promoting greater health outcomes through collaboration, education, and community-centered care.



STEGH has placed focused attention to its truth and reconciliation commitments and as such, developed a truth and reconciliation action plan for 2024/25 which has been aligned as part of STEGH's strategic planning. Through the implementation of this plan STEGH has accomplished a number of indigenous health initiatives that now support a better patient experience for the community. STEGH has continued with its co-design of the hospital's multi-faith space with local indigenous artists to provide a welcoming environment for spiritual practices and cultural expression. The hospital has actively sought out indigenous representation and feedback in order to prioritize indigenous patient and family perspectives in decision making. This has resulted in specialized and custom designed training on local indigenous history and education for leaders and staff which articulates organizational accountability for indigenous health equity. Over the 2024/25 period STEGH has remained very engaged with local indigenous communities through community visits fostering partnerships and understanding to better serve indigenous patients and families. Over the 2025/26 period STEGH will continue to partner with the Southwest Ontario Aboriginal Health Access Centre (SOAHAC) as well as the Eglin Ontario Health Team (OHT) to explore indigenous navigation and support options that would benefit the health and well-being of the community.

In the spring of 2025, the hospital will proudly unveil an outdoor Indigenous mural, which will be prominently displayed on the exterior of the building. This artwork aims to symbolize the hospital's commitment to providing a safe and welcoming space for Indigenous patients to receive care.

## Patient/Client/Resident Experience

As part of STEGH's strategic plan, under the pillar of partnering with patients, STEGH enhanced its ability to solicit patient feedback by moving away from its paper-based internal patient experience survey model and adopting the electronic Qualtrics patient experience survey platform during the summer of 2024. The Qualtrics patient survey at STEGH plays a crucial role in gathering valuable feedback from patients about their care experiences. This system allows patients to share their insights on various aspects of their hospital stay, including communication with staff, wait times, and overall satisfaction. The feedback collected through Qualtrics is essential for the hospital to identify areas for improvement, assess the quality of care, and ensure that patient-centered practices are consistently upheld. By prioritizing patient input, STEGH can refine processes, enhance service delivery, and continually improve the patient experience, fostering trust and better health outcomes.

As part of STEGH's ongoing commitment to improving the patient and family experience for all, STEGH is currently working with its platform vendor to embark upon the provincial benchmarking program in order to establish how STEGH compares to its peer hospitals in regards to survey results and identify opportunities and areas of improvement.

As part of STEGH's strategic plan, under the pillar of Partnering with Patients, the Patient Experience team is developing a Patient, Family, and Caregiver Partnership Framework to align with Accreditation Canada standards. This framework will guide staff on fostering partnerships with patients and their families at STEGH. The framework is undergoing review by its Patient and Family Advisor Committee (PFAC) members, with plans for publication and staff education in early 2025.

Additionally, in an effort to improve the patient experience for patients with language barriers STEGH invested in the implementation of VOYCE translation services. VOYCE translation services enhance care for patients with language barriers by providing accurate, real-time translation and interpretation. This technology ensures clear communication between patients and healthcare providers, improving understanding, patient satisfaction, and overall care outcomes while fostering a more inclusive, patient-centered environment and was identified as part of STEGH strategic plan. This translation service has received extremely positive reviews from both patients and staff.

STEGH has incorporated a patient experience survey question into its Quality and Safety Scorecard to assess whether patients have encountered any discrimination, disrespect, or bias based on race, gender, sexuality, religion or citizenship. Year-to-date data indicates that 97% of ED patients and inpatient hospital service users have not perceived any discriminatory treatment or barriers during their care.

## Provider Experience

STEGH is committed to retaining staff and enhancing recruitment by cultivating a supportive workplace culture that values well-being, professional growth, and recognition. By prioritizing employee engagement, offering ongoing development opportunities, and ensuring work-life balance, the hospital fosters a positive, productive environment where staff feel valued and empowered to provide the best possible care.



In the past year STEGH did a compensation and benefits review for our non-union and management staff to ensure that the hospital is best positioned to attract and retain superlative health care professionals to support and provide care to the community. The hospital values innovation, and has a robust continuous quality improvement program which provides LEAN training and opportunities to improve the care provided to patients every day.

Over the summer of 2024 STEGH released its Employee experience survey with approximately 75% of STEGH's workforce completing the questionnaire. Over 550 employees described STEGH as being either a very desirable or extremely desirable place to work. 86% of employees who engaged in the survey stated that they had the necessary equipment and resources needed to perform their job effectively with almost 90% of employees feeling that STEGH is supportive of a diverse and inclusive workplace culture.

STEGH was also extremely happy to see that 92% of employees who completed the survey would recommend the hospital to family and friends. This recent staff survey also revealed that the hospital improved the metric attached to the survey question "Does your leader reach out to you to seek your ideas and concerns?" from 58% to 71%. STEGH's leaders engage in regular rounding with patients and staff, lead team huddles and ensure that all new staff are well supported and getting what they need to do their work through 30 and 90 day leader meetings.

STEGH has been busy engaging with staff and physicians on the input into equipment needs, as well as the designs and upgrades to workspace areas. There has also been a concerted effort to provide enhanced "at the elbow" support to clinicians for changes in technology and clinical electronic documentation.

STEGH's employee wellness committee remains fully active and continues to seek out information and feedback from employees on the organizations current offerings of staff wellness activities. Staff have access to mindfulness, stretching and yoga sessions as well as monthly massage days. STEGHs dedicated serenity space also offers a relaxing place for employees to decompress and reflect whilst enjoying some time in a deluxe reclining massage chair during their breaks.

In response to employee feedback STEGH will continue with its "YOU360" wellness support team program, which brings together the expertise of professionals to support employees through their health and wellness journey. If employees identify a need in faith-based support, coaching or consulting, on-site counselling, fitness and health consulting or mental health support this dedicated team will help facilitate the resources required.

## Safety

STEGH prioritizes patient safety through a comprehensive approach that incorporates advanced technologies, rigorous protocols, and a strong safety culture. The hospital's commitment to safety is reflected in its adherence to evidence-based practices and continuous staff education. By regularly training healthcare professionals on the latest safety guidelines and providing them with tools like electronic health records (EHR) and barcode medication administration systems, STEGH works to minimize medical errors and improve patient outcomes. The hospital also fosters a culture of open communication where staff members are encouraged to report safety concerns and engage in risk assessments. This collaborative approach ensures that safety issues are identified early and addressed promptly. In addition, STEGH implements robust infection control measures, falls prevention strategies, and medication safety protocols to protect patients from preventable harm. The hospital's patient-centered care model emphasizes clear communication and shared decision-making, ensuring patients and families are informed and involved in care. Through these combined efforts, STEGH maintains a high standard of safety, striving to provide patients with the best possible care while minimizing risks and enhancing the overall patient experience.

STEGH is now participating in Ontario Health's Never Event Hospital Reporting initiative. This initiative is part of a broader effort to enhance patient safety in the province's healthcare system. The term "never events" refers to extremely serious, preventable incidents that should never occur in healthcare settings.

Launched by Ontario Health, this initiative aims to improve transparency and accountability by requiring hospitals to report such incidents when they occur. STEGH will be mandated to disclose never events to both patients and the public, ensuring that there is transparency in the investigation and response to these incidents.

## Palliative Care



STEGH strives to provide compassionate, patient-centered care for individuals with life-limiting illnesses. STEGH focuses on advanced care planning, offering patients and families' opportunities to discuss their treatment preferences, goals of care, and end-of-life decisions. The hospital also emphasizes effective communication, ensuring patients and families are fully informed and involved in the decision-making process. Furthermore, STEGH works to integrate palliative care with community resources, facilitating smooth transitions for patients who need continued care after they leave the hospital. This approach ensures continuity of care and supports patients in their home environment, promoting comfort and dignity. STEGH partners very closely with Ontario Health at Home to help identify the necessary home supports for patients and their families who may require palliation support. Most recently, STEGH has developed a service partnership agreement with the Victorian Order of Nursing (VON) that will help to strengthen transitions in care for patients with palliation requirements.

In addition to this work, STEGH has recently completed its development of a patient care room which is designated for end-of-life and palliation. This room was developed in collaboration with patient partners who were involved in providing feedback on furniture needs as well as art work and colour schemes that help to create a peaceful and welcoming care environment for individuals receiving palliative care in hospital. The work on the room commenced in 2023 and was completed in March 2024.

## Population Health Management

STEGH values co-design activities with community partnerships because they foster collaboration, empower local voices, and ensure that health services meet the specific needs of diverse populations. By working with community members in the design process, STEGH strengthens trust and enhances the relevance of healthcare solutions. This approach promotes inclusivity, encourages shared decision-making, and helps create more sustainable, effective programs. Co-design also encourages innovation by integrating local knowledge and perspectives, which leads to better outcomes.

Elgin Ontario Health Team (OHT) has built a Community Council, made of up community members (patient/client, family, caregiver partners) to ensure ongoing and meaningful involvement of community members across all OHT work and centre their voices in decision-making. STEGH has been an active participant of this council. The OHT recently hosted two mental health, substance use health, and addictions workshops with participants from across health and social services, volunteer and community-based groups, and people with lived and living experience. As such STEGH has contributed to the goal of this work, which is to identify a continuum of services in Elgin and improve access to services by moving to a model where service matching is based on the person's individual needs and preferences. Peer support and outreach services came to the forefront as priority areas in this work going forward, with collaboration through community member involvement being a critical piece to advance the work. STEGH has also been engaged in additional initiatives with active community member involvement which currently include Digital Health Literacy, to build community capacity around the use of digital tools and resources for health, and the Integrated Primary Care Team expansion work, to inform improvements around access to primary care. STEGH will continue to support this collaborative work and is committed to help support these initiatives into fruition.

## Quality Improvement and Emergency Department Return Visit Quality Program

Each site that is part of a hospital participating in the Emergency Department Return Visit Quality Program (EDRVQP) should answer either the large-volume site or small-volume site questions:

### **For Large-Volume Sites (Emergency Departments with More Than 30,000 Annual Visits)**

STEGH has placed a strong emphasis on enhancing the efficiency and performance of its ED. As a result, the hospital consistently maintains a top-tier position within provincial rankings, frequently placing in the top three. Last year, STEGH identified two strategic initiatives aimed at improving the ED's current P4R metrics, with a focus on elevating both patient and staff satisfaction.

The first quality initiative was designed to optimize patient flow from the ED to Diagnostic Imaging (DI), thereby improving timeliness and the overall experience for both patients and staff. Electronic tracking boards were installed in all DI treatment rooms, enabling DI staff to better assess patient readiness and improve communication with ED staff through an information text field. This technology led to a reduction in interdepartmental phone calls, which were previously identified as time-consuming for both ED and DI team members. Additionally, the tracking boards provided DI staff with direct access to vital patient information, such as behavioral assessments, infection control alerts, and resuscitation status, integrating the electronic health record into daily workflows. This enhancement ensures that all staff within the care circle have access to the most up-to-date patient information, ultimately improving efficiency, patient safety, and staff safety.



The second quality initiative was developed in response to the rising number of ED visits. As such STEGH launched the innovative Triage Rapid Access Physician Pilot Project. This initiative places a physician alongside the triage nursing team to assess CTAS three (urgent) patients and fast-track diagnostics, with the goal of improving both high and low-acuity non-admitted patient metrics. This project has also contributed to a decrease in the number of patients who leave the ED without being seen by a physician.

After a comprehensive review of current ED performance and the ED return visit audits, STEGH has made the decision to continue focusing on reducing wait times and Physician Initial Assessment (PIA) times. The ED return visit audits emphasized the utilization of the ED by patients with mental health needs and substance use. This highlighted the need for a continued focus on enhancing trauma informed care and stigma education. Stigma refers to the negative attitudes and beliefs held about certain groups and their circumstances, including discrimination, prejudice, judgment, isolation, and stereotyping. Stigma and discrimination can shape interactions with health and social service providers and, in some cases, hinder access to necessary services. Unfortunately, behavioral health-related stigma can be perpetuated by healthcare providers and reinforced through organizational practices, community norms, and media portrayals.

Addressing stigma and bias within the healthcare setting requires sustained and coordinated efforts. Given the importance of this issue, ongoing staff education in diversity, equity, and inclusion (DEI) will continue throughout the 2025/26 period. Further DEI initiatives at STEGH will engage ED, Security, and Mental Health staff. External partners, including Ontario Health at Home and the Canadian Mental Health Association (CMHA), will also contribute in a collaborative leadership effort. This ongoing DEI work will include:

- A review of current policies and practices
- Completion of online learning modules from recognized subject matter experts on decolonization, diversity, equity, and inclusion
- Conducting reflective questionnaires with ED, Mental Health, and Security staff
- Analyzing patient experience survey feedback related to stigma and discrimination
- Collaborating with the Patient Experience Council to identify relevant consumer needs
- Consulting and collaborating with the existing DEI Committee

Following the review of this year's quality audit data, the hospital has identified two quality improvement initiatives which plan to expand the physician-at-triage model to three days per week, in an effort to facilitate timely physician orders at triage.

The second quality improvement initiative involves developing a new ED nursing role which will providing follow-up telephone calls to patients who have left the ED but may require further instructions or information based on DI or laboratory testing results. This initiative is being developed by a joint working group consisting of physicians and nurses. STEGH leadership is committed to supporting the additional nursing hours required for this role. It is anticipated that this initiative will primarily impact high-acuity non-admitted patients.

## Executive Compensation

All Vice President roles will have a 3.5% portion of base salary at risk related to the Quality Improvement Plan (QIP) Targets. The President and CEO role will have a 4.5% portion of base salary at risk related to the Quality Improvement Plan (QIP) targets.

## Contact Information/Designated Lead

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Debbie Turner, Director of Quality and Professional Practice ([Debbie.turner@stegh.on.ca](mailto:Debbie.turner@stegh.on.ca))

## 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)

