

Let's Make Healthy  
Change Happen.



## Quality Improvement Plan (QIP) Narrative



2023/24

2023/3/8

This document is based on a template provided by Ontario Health

## Overview

A mission that inspires us — to provide excellent health care for the people and communities we serve and to advance health care through education and research — drives Hamilton Health Sciences' (HHS) vision of **Best Care for All**.

No matter our role, each of us is working to ensure that our organization achieves its vision, centered on four strategic objectives:

- **Patients:** Our objective is to be a top ranking hospital for the quality of care and the excellence of our patient and family experience.
- **People:** Our objective is to create a safe work environment with highly engaged staff and physicians.
- **Sustainability:** Our objective is to be responsible resource stewards.
- **Research, Innovation and Learning:** Our objective is to be one of Canada's top research hospitals.

The Quality Improvement Plan (QIP) is one component of our overall planning process, with initiatives selected to drive results against our strategic objectives. The QIP complements our strategic plan, our operational plans, and our Hospital Service Accountability Agreement. Aligning these components helps to ensure that we deliver high quality care, are accountable to our patients, and are fiscally responsible.

In our 2023-24 Quality Improvement Plan, HHS has chosen to focus on six organizational priorities aligned with our organization's vision and strategic goals. The six priorities in this year's QIP are to:

- Reduce the incidence of sepsis
- Reduce deaths following major surgery
- Reduce the incidence of pressure injuries
- Maintain our reduced rate of lost-time injuries to our workforce
- Improve medication safety through a reliable use of bar code medication administration
- Reduce our risk of hospital-acquired infections through improved hand hygiene rates

Specific QIP targets and plans for meeting them are detailed in the Improvement Targets and Initiatives document.

To achieve our goals, we must focus on involving people closest to the care: staff, physicians, credentialed health-care providers and especially patients and families.

There are also several ongoing priority projects to consider in our QIP, including workforce planning, preventing workplace violence and establishing equity, diversity and inclusion as a core factor in patient safety.

The 2023-24 QIP was developed with input from patient and family advisors on the Board Quality Committee and the Quality and Patient Safety Steering Team. We also engaged the corporate patient and family advisors in the development of the QIP. As in past years, the advisors told us they found great value in consulting, deliberating or collaborating with specific improvement initiatives identified in the QIP.

## Patient safety

HHS has a robust policy and governance system that supports the identification, reporting and assessment of patient safety incidents across the organization. This includes a patient safety occurrence reporting system, protocols for identification and investigation into root causes of critical incidents, and regular reviews at the organizational leadership and board of directors on the overall trends related to patient safety occurrences and critical incidents.

HHS's Quality of Care Committee reviews critical incidents or occurrences for the purpose of learning from the events and improving the provision of health care at HHS. The comprehensive critical incident review process results in recommendations that help reduce the risk of future incidents. All approved critical incident recommendations are tracked for completion with regular follow up at the Quality of Care Committee until the incident is closed.

Ongoing work to improve the efficiency and effectiveness of critical incident management at HHS includes:

- Creating stronger connections between HHS's committees and councils to advance the awareness of critical incidents, and
- Advancing the use of the Continuous Quality Improvement management system when engaging frontline teams on critical incidents, findings and the design and implementation of actions to address.

Patient storytelling has been an important feature of our Board Quality Committee meetings for several years. With these stories shared at each Board Quality Committee meeting, we build important context around patient safety successes and challenges across HHS.

## Partnering with patients and families

HHS engages with patients and family members in a variety of ways, including sharing information, collaborating to solve problems and empowering patients to be involved in their care.

We have increased our focus on all three of these approaches over the last several years. From April 2022 to January 2023, patient and family advisors contributed over 1050 hours to process and quality improvements across HHS. And we have seen a marked improvement in the number of quality improvement projects driven by patient engagement.

One change we have made that drove this increase is the use of Experience Based Co-Design. Almost 250 individuals across HHS have received training in co-designing with patients and families. A few examples of co-designed projects include:

- Developing an essential caregiver program
- Reimagining developmental pediatric rehabilitation services through emotional mapping with 18 families
- Updating the corporate advisor program, working with advisors and staff liaisons to determine priorities and how to address top issues identified by both groups.

Additionally, as part of the hospital's Continuous Quality Improvement management system, clinical units are solving problems every day that staff raise on behalf of their patients, as well as opportunities identified by patients and families themselves. HHS also has patient and family advisors on our Quality Committee of the Board and our corporate Quality and Patient Safety Steering Team. There are also patient and family advisory councils at both the Juravinski Cancer Centre and McMaster Children's Hospital.

Patient engagement in upcoming QIP initiatives is already in progress. For example, a patient and family advisor is a member of our corporate working group for reducing pressure injuries. As well, when quality and safety initiatives are rolled out across targeted units, patients and families will receive resources to help them be involved in preventing pressure injuries and providing care if a pressure injury occurs.

## Health equity

Creating an environment where every person at HHS feels included, safe, and respected is key to achieving our vision of Best Care for All. We know, however, that many people who work for and visit our hospital experience racism, discrimination, and oppression. This is unacceptable and regrettable. HHS is committed to changing these experiences at every level of the organization.

Our Human Rights and Inclusion efforts have focused on a comprehensive set of training programs, events and resources, including Ethics & Diversity Grand Rounds. Our goal is for these tools to help advance equity and inclusion and build the skills, confidence and capabilities of everyone at HHS.

In 2022, HHS completed a comprehensive organizational assessment on EDI and broadly communicated the full report, including key findings and recommended actions. This assessment and report are the starting point for what will be an ongoing journey to make HHS a more equitable and inclusive place for everyone. HHS is making significant investments to improve our EDI efforts and has committed to establishing EDI as a key element of the corporate strategy. As a result, a new Senior Lead and Strategic Advisor, EDI role was created and the incumbent was hired as a key member of our organization's senior team. This role is focused on the following key priorities over the next year:

- Developing an EDI Corporate Plan to guide HHS's efforts to creating a culture of inclusivity and belonging
- Collecting sociodemographic data, including race-based data, in Epic and MyChart
- Reviewing existing HHS policies with an EDI lens, and creating new ones where there are gaps, such as the anti-racism policy currently under review
- Establishing EDI competencies for leaders and developing and implementing training and resources

## Provider experience

An unprecedented global shortage of health-care workers is putting immense pressure on our workforce and organization. This has led to workforce planning being a top priority of our updated strategic plan. We asked our frontline and leadership teams for innovative ideas to help solve this challenge.

A large and diverse steering committee is working to help stabilize teams facing the most pressing staffing gaps. Some immediate steps have already taken place, including:

- Creating standby clinical teams for high-need areas
- Expanding the clinical extern and internationally educated nurse programs
- Expanding the health care aide and essential caregiver programs
- Maximizing clinical learner placements
- Expanding centralized recruitment processes to support frontline leaders and increase our competitiveness as an employer
- Strengthening staff retention through wellness programs, fostering an equitable and diverse work environment, and taking action on feedback from the recent My Voice Matters survey

After conducting a current state review and looking at best practices across the health-care sector, HHS identified five programs of work to move Workforce Planning objectives forward. They are:

- **Models of Care:** A corporate baseline staffing model that incorporates patient needs, staff characteristics and unit and organization factors.
- **Recruitment & Onboarding:** Improve recruitment outcomes through the expansion of HHS' centralized recruitment processes. Target recruitment toward priority areas and identify opportunities to improve onboarding processes.
- **Orientation & Retention:** Enhance both the new staff and student experiences and improve employee commitment to HHS from day one with targeted programming and support.
- **Workforce Data & Analytics:** Strengthen workforce planning, data, and predictive analytics capabilities by introducing stronger data governance and management.
- **Management Support:** Enable managers to focus more time on leading and less on administration by reducing administrative workload and providing additional leadership support.

In the fall of 2022, HHS conducted an engagement survey of all staff, physicians, residents, fellows and leaders called "My Voice Matters." About 6500 people completed the survey, with rates varying across different departments. The results of this survey are being used to identify and implement improvement opportunities related to provider experience at both organizational and department levels. HHS intends to increase the frequency of this survey from every two years to annually. This will help us shorten the improvement cycle between surveys and ensure our actions are making a difference.

## Workplace violence prevention

HHS is committed to providing a safe work environment free from violence and harassment. Our goal is to ensure that all staff feel safe coming forward with concerns about workplace violence and workplace harassment and that HHS addresses concerns quickly and appropriately. The health, safety and well-being of our workforce and the quality of the work environment affect the effectiveness and efficiency of the services we provide.

We have a detailed protocol for the prevention and management of workplace violence and harassment, which includes reporting mechanisms, roles and responsibilities, and processes for resolution. In addition, HHS conducts annual risk assessments for workplace violence at the site and department levels, monitors risk levels and implements appropriate controls throughout the year.

We have posted public-facing signage in high-risk areas promoting a violence- and harassment-free environment. The Workplace Violence Hazard Cluster and the Health, Safety and Wellness Steering Committee oversee workplace violence issues and prevention programs.

HHS has implemented a Behavioural Safety Risk (BSR) Communication and Care Plan Protocol across all HHS hospitals and clinics. This protocol supports HHS's overall efforts to provide a safe work environment by identifying and communicating potential patient behaviour safety risks and care planning actions to keep everyone safe. As part of the WSIB Health & Safety Excellence Program, HHS is evaluating the BSR program to ensure the effectiveness of these communications with staff at HHS. Mechanisms are also in place to address safety risks from families, visitors and the general public.

## Executive compensation

HHS strongly believes in accountability for results. All eligible members of the Executive Leadership Team, including the President & CEO, have a portion of their total compensation tied to the hospital's executive performance variable pay plan.

The salary at risk for the President & CEO as well as eligible Executive Leadership Team members (Executive Vice-Presidents, Presidents, Vice-Presidents, Chief Nursing Executive) is linked to achieving certain targets set out in the QIP in combination with other components of the variable pay plan.

## Contact information

For questions related to the Hamilton Health Sciences Quality Improvement plan, please contact Bryan Herechuk, Director of Quality & Value Improvement at [herechukbr@hhsc.ca](mailto:herechukbr@hhsc.ca).

## Approval


I have reviewed and approved our organization's Quality Improvement Plan.

  
Dave Lazzarato (Apr 14, 2023 13:01 EDT)

David Lazzarato  
*Board Chair*

  
Andrea McKinney (Apr 14, 2023 18:12 EDT)

Andrea McKinney  
*Board Quality Committee Chair*

  
RSM (Apr 14, 2023 11:10 EDT)

Rob MacIsaac  
*Chief Executive Officer*

### Acknowledgement:

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.