

Let's Make Healthy
Change Happen.



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



2024/25

3/31/2024

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.

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

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

In its 2024-25 Quality Improvement Plan, HHS has chosen to focus on seven organizational priorities aligned with our organization's vision and strategic goals. The seven 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
- Reduce our risk of hospital acquired infections through improved hand hygiene rates
- Reduce the incidence of readmissions
- Expand the implementation of our EDI Collecting Accurate and Robust Equity (CARE) data initiative

Refer to the Improvement Targets and Initiatives document to see plans on how HHS will achieve the targets in the QIP.

Access and Flow

Overcrowding in our hospitals is a system-wide challenge. Its root causes can be due to the unavailability of inpatient beds, inappropriate admissions, delays in the decision to admit, delays in discharge, a lack of timely access to diagnostic services, lack of timely access to care in the community, among other challenges. At HHS, we work with internal teams, partner hospitals, and teams from other sectors to develop strategies to meet demand and address overcrowding. HHS has protocols for daily operations (Patient Flow Protocol, ED Gridlock Protocol, ALC Protocol, Discharge Planning Protocol, Regional Repatriation Agreements/Processes) and strategies in response to a surge or over-capacity situation (Over Capacity Protocol). There are a large number of initiatives across HHS sites, and across the region, in order to improve access and flow. This includes more than one hundred active and recently completed initiatives at the unit, site, and regional levels to:

- Improve ED efficiency and wait times

- Reduce ambulance offload times
- Improve inpatient flow, reduce length of stay and improve transitions to the community
- Divert ED visits and reduce ED demand
- Develop innovative models of care (e.g., expanded step down models, hospitalist model expansion, short stay surgical models)
- Improve discharge planning and rapid outpatient follow up
- Implement remote monitoring for improving outcomes at home and reducing risk of readmission
- Implement enhancements to how care is coordinated and integrated through our Epic hospital information system
- Improve access to diagnostics and clinical support services
- Improve care coordination and demand balancing across the region

Patient/client/resident experience

HHS utilizes several approaches for incorporating experience information into our quality and safety improvement activities including patient experience surveys, storytelling, patient relations concerns and compliments, and through our patient and family advisors. HHS has increased its focus on all of these approaches over the last several years and has made patient and family experience a priority. We have more than fifty patient and family advisors and three advisory committees and from April 2023 to February 2024, these advisors contributed over 1850 hours of their time towards process and quality improvements across HHS. The Quality Committee of the Board assesses and evaluates the quality of care at HHS and ensures improvement processes are in place. A Patient Advisor currently participates as a patient and family representative at these meetings. The Quality & Patient Safety Steering Team's purpose is to set direction and monitor quality and safety throughout HHS. The team consists of senior executives and two patient advisors. There are currently three active HHS advisory councils, each consisting predominantly of patient and family advisors:

- Juravinski Cancer Centre Patient & Family Advisory Council
- McMaster Children's Hospital Family Advisory Council
- McMaster Children's Hospital Youth Advisory Council

Two other councils are in early stages of development and planning is underway for more councils.

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, board members better understand the successes and challenges across HHS in relation to patient experience and safety issues.

Daily engagement of patients and families occur daily across clinical units. There are multiple ways the patient and family voice guides quality and safety improvements, including questionnaires, interviews, focus groups and patient perception rounding. As an example, patient and family advisors helped co-lead the development of our in-house Accreditation Mock Tracer training program and also participated in conducting patient experience focused mock tracers on units leading up to our 2023 Accreditation assessment.

Important improvements to patient experience are underway, including spreading and sustaining service excellence behaviours, rolling out results from our new electronic patient experience surveying platform (aligned with Ontario provincial platform), improved access for interpretation services in all areas of HHS and exploring a new entertainment system for patients and families.

Provider experience

A strong and sustainable workforce is key to providing exceptional care. In the face of persistent, on-going healthcare worker shortages, an increased demand for hospital services, and shifting workforce demographics, HHS has prioritized workforce planning at the highest level. As part of our Strategic Plan we are leading several key projects and initiatives aimed at attracting, training, and retaining skilled healthcare workers over the short- and long-term to ensure we can continue providing safe, high quality care to the patients we serve. These include:

- Aggressive, [nation-wide recruitment approaches](#) aimed at attracting skilled healthcare professionals in high-priority roles including nursing. Staffing levels, including nursing, have benefited from these robust recruitment efforts over the past year.
- An updated multi-year “People Plan” which will outline the key activities and projects we will undertake to create a work environment where our staff, physicians, and learners can grow, feel respected, and thrive.
- *Care Transformation*, an initiative to reimagine how we design and support clinical teams with the goal of implementing modern models of care that are safe and sustainable in the long-term.
- The renewal of our scheduling system with the goal of improving the accuracy, efficiency, and convenience of staff scheduling and, ultimately, contributing to a better employee experience.
- Comprehensive wellness and recognition programs offering free resources, activities, and events year-round to support staff and physicians’ mental and physical well-being.

These efforts have been informed by the input and feedback of our staff and physicians, including via HHS’ annual workforce-wide engagement survey and our *continuous quality improvement* management system, two of the key mechanisms in place to identify improvement opportunities at the local and organizational levels.

Safety

HHS has a robust policy, governance and systems infrastructure that supports the identification, reporting, assessment and action planning in response to patient safety incidents across the organization. This includes a patient safety occurrence reporting system, protocols for identification and investigation into root causes of serious safety events 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 serious safety events for the purpose of learning from the events and improving the provision of healthcare at HHS. The critical incident process has a comprehensive toolkit and supports the identification of recommendations that help reduce the risk of future incidents. All approved critical incident recommendations are tracked to completion with regular follow up at the Quality of Care Committee until the incident is closed. There is ongoing work to improve the efficiency and effectiveness of critical incident management at HHS. This work includes:

- improving the critical incident review process through a quality improvement initiative in progress
- advancing the utilization of the Continuous Quality Improvement management system when engaging frontline teams on serious safety events, findings and the design and implementation of actions to address
- participating with Healthcare Excellence Canada in their *Rethinking Patient Safety Program*, focused on broadening the view of hospital harm and further supporting a proactive approach to patient safety. This is being supported by four clinical units and patient and family advisors

Population Health Approach

HHS is proud to partner with more than 40 organizations in the Greater Hamilton Health Network (GHHN) Ontario Health Team to transform healthcare with patients, families, primary care, local organizations and the community. GHHN is a collaboration of local patients, families, care partners, and health and human service partners, including representation from primary care, home care, hospitals, community agencies, long-term care, mental health, Indigenous health, post-secondary education, and the City of Hamilton (Healthy and Safe Communities Department, Public Health and Paramedic Services). GHHN is one of 12 OHTs chosen to implement an advanced work plan and work towards OHT designation at a rapid rate. As a dedicated group of professionals, organizations and people with lived experience, GHHN is working to co-design a patient-centered health system grounded in engagement, health equity and the local needs of the communities served. This includes advancing priorities in aligning digital and navigation services, modernizing home care within the OHT model, advancing integrated primary care planning using population health approaches, co-designing integrated/sustainable/equitable health pathways and improving health and wellbeing for priority populations within the GHHN catchment.

Equity and Indigenous Health

At HHS, we value and respect the rich diversity of our people and the communities we serve. We are dedicated to cultivating a welcoming, inclusive, and safe environment. Our Equity, Diversity and Inclusion (EDI) efforts have focused on a comprehensive set of training programs, events, resources, rounds (e.g., Ethics & Diversity Grand Rounds), and improvement activities to help advance equity and inclusion and build skills, confidence and capabilities of everyone at HHS. Creating an inclusive and safe environment for everyone 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. HHS recently released a comprehensive 5-year Equity, Diversity and Inclusion Plan for 2023-2028. HHS has made significant investments to improve our EDI efforts and has committed to establishing EDI as a key element of the corporate strategy. Key milestones completed over the last year include:

- EDI and Human Rights team expansion
- Pilot launch of the Collecting Accurate and Robust Equity (CARE) data initiative to improve patient care and safety through collecting of patient demographic information
- Improved workforce engagement survey feedback
- Completed Board and executive leadership EDI training
- Rollout of the new Anti-Racism policy and revised Workplace Violence and Workplace Harassment and Discrimination protocols

We recognize and respect that Indigenous Truth and Reconciliation is distinct and necessary, and we are committed to increasing Indigenous cultural safety and ensuring our leadership teams, starting with our Executive Leadership Team, have completed Indigenous Cultural Safety training. HHS will be creating an Indigenous Health Plan informed by extensive Indigenous community engagement. The draft plan will be reviewed with consultation from internal and external people within the Indigenous community. The approach and plan is to support in aligning with Truth & Reconciliation Calls to action, Ontario Health Indigenous Health Framework, United Nations Declaration on the Rights of Indigenous Peoples and Missing and Murdered Indigenous Women Calls to Justice. We will continue to acknowledge Indigenous peoples constitutional rights and sovereignty.

While celebrating our achievements, we recognize that much work still needs to be done. Refining our process to gathering data safely will be crucial in better understanding how we can provide the best care for all. By equipping our staff and physicians with appropriate knowledge and tools to embed EDI into daily practices and building a sustainable governance structure will be the catalyst to shift the organization from complacency to change.

Executive Compensation

HHS believes strongly in accountability for results and therefore, all eligible members of the Executive Leadership Team, including the CEO, have a portion of their total compensation at-risk under 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 Hamilton Health Sciences' Quality Improvement plan, please contact Bryan Herechuk, Director of Quality & Value Improvement at herechukbr@hhsc.ca.

Other

Sign-off


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

Keith Monrose
Keith Monrose (Apr 2, 2024 10:17 EDT)

Keith Monrose
Board Chair

Shirley Thomas-Weir
Shirley Thomas-Weir (Mar 28, 2024 18:43 EDT)

Shirley Thomas-Weir
Board Quality Committee Chair


RSM (Apr 2, 2024 08:49 EDT)

Rob MacIsaac
Chief Executive Officer