

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 9, 2023



Inspired by research. Driven by compassion. Inspiré par la recherche. Guidé par la compassion.



OVERVIEW

The Ottawa Hospital (TOH) is one of Canada's largest academic health sciences centres, with more than 1,300 beds and approximately 15,000 staff and physicians. TOH touches the lives of thousands of people every day and from every corner of eastern Ontario, western Quebec, and as far as Nunavut. Housing the region's only trauma centre and serving as the hub for cancer care in the area, TOH specializes in providing acute and complex care for adults, and conducting innovative, practice-changing research that is recognized globally for its contribution to health care.

TOH aims to provide every patient with the world-class care, exceptional service, and compassion that we would want for our loved ones. Building on this steady and uniting vision, in the past year we engaged with hundreds of stakeholders to develop a new strategic plan focused on our mandate to serve our patients, our people, and our community, and to continuously improve how we do so. Accordingly, this year's Quality Improvement Plan (QIP) showcases some of the many initiatives that see the strategic plan in action and blaze the trail to achieving our vision.

Quality means delivering care that is accessible, timely, effective, safe, efficient, and centered on patients' needs. This past year, recognizing the types of pressures facing the health-care system more broadly, we advanced initiatives to improve accessibility and timeliness. As has been clearly highlighted in the media, much of the strain on our system came to a head within our emergency departments and operating rooms. This critical issue sparked our implementation of innovative new programs to improve the flow of patients throughout the hospital and back to the community. These efforts were supported by the development and roll-out of data

systems which enable our teams to make strategic decisions to best meet the needs of our patients and our community. Together, these initiatives help ensure that patients receive the right care at the right time and in the right place.

It goes without saying, the major challenges facing us today stem from system-wide issues which cannot be resolved in a year. As such, the upcoming year's QIP initiatives will continue to build on the groundwork that has been set this past year. These include efforts to improve the timeliness and effectiveness of the care we provide, the safety and wellbeing of our people, patients, and families and our service excellence overall. Finally, building on foundational work from this past year's QIP initiatives, it has become evident that none of our efforts to improve quality can be successful without also ensuring we take steps to progress on our journey towards achieving an equitable, diverse, inclusive, and just culture at TOH.

PATIENT/CLIENT/RESIDENT ENGAGEMENT AND PARTNERING

At TOH, patient engagement in Quality Improvement (QI) means actively involving patients and families (biological and/or chosen) in the process of improving the services we provide. Patients and their families offer indispensable expertise and diverse perspectives garnered from their personal and professional experiences as members of the broader community. The stories they share, and their unique perspective of their health-care experiences, are an invaluable source of information to improve not only the care experience but the safety and quality of the care we provide. As such, TOH has committed to patient engagement "in everything we do" including QI, research, education, clinical and non-clinical

processes, and strategic planning.

In living this commitment, we are guided by the TOH Patient and Family Engagement Framework, which was developed by leadership and adopted nearly a decade ago. This transformative work has since spurred the evolution of our Patient and Family Engagement Program (PFEP), which continues to be co-designed by Patient and Family Advisors (PFAs). The program structure includes well-established links to multiple initiatives, teams and Committees running all throughout the hospital; notably, these include our Quality and Patient Safety (QPS) team and our Equity, Diversity and Inclusion (EDI) Council. Within the latter, PFAs who identify as a member of a health equity seeking group (i.e. having had experience with under-representation, discrimination, or inequities that have impacted their health, or the health-care services they received) engage by interviewing candidates for key leadership positions, acting as members of the voting panel, and consulting on EDI-related QI initiatives based on their lived experience.

A recent QI project involving patient and family empowerment and co-design was the development of an innovative tool by the Deaf Patient and Family Advisory Committee (PFAC) to educate staff and physicians on providing excellent and compassionate care for Deaf patients at TOH. The Microsoft Sway reviewed important facts about Deaf people, Deaf culture, and common misconceptions about caring for the Deaf. Another similar and powerful example built on a project completed last year to expand gender-inclusive demographic fields within our electronic medical record. That project spurred overwhelming staff and physician demand for education on respecting gender diversity. To be able to effectively meet this need, a standardized online education module, called

“Respecting Gender Diversity”, was co-designed and developed by members of the Rainbow PFAC. It has since been widely promoted by hospital leadership and made available for all to access. These are two of many examples of TOH’s leadership in patient engagement, not only in meeting our mandate as laid out in our framework, but in leading in practices. We look forward continuing this improvement journey, with patients and families by our side.

PROVIDER EXPERIENCE

As society sought to return to a “new normal” this past year, it was clear that following nearly three years of unprecedented demands related to the pandemic, our people were struggling. Recognizing this, our Chief Operating Officer & Chief Nursing Executive and her team set out to meet with staff and physicians at the frontlines, to discuss ways to help everyone better balance our work lives. They heard several great ideas and as a result, TOH launched a new approach to help us all to take care of ourselves, called ‘You First’. We hear it time and time again: to take care of others, you must take care of yourself first. ‘You First’ is a new way of thinking and is all about helping us to find a better work-life balance. It’s a culture, a motto, and a daily reminder to put our wellness first.

To bolster this paradigm shift, ‘You First’ has been integrated throughout the hospital and has brought about new initiatives to improve the work life at TOH. This coming year, we will be updating our employee scheduling system to a new, best-in-class system. With this change, we are set to embark on a new era of workforce scheduling that provides our workers and leaders with easy access to scheduling information in real-time – using a phone, tablet, or computer – and ensures more accurate compensation through better tracking of hours worked. ‘You First’ also includes initiatives

for clinical staff, such as floating support for nurses, paid mandatory training, flexible scheduling to various clinical areas based on experience and skill-set, and clinical coaching by retired nurses to support the professional development of new nurses. Targeted initiatives to support managers includes on-call rotation, flex time, vacation bank payouts and mentorship. Other ‘You First’ initiatives include employee discounts, discretionary funds distributed to leaders for a variety of staff-led engagement initiatives, as well as contests, prizes, and giveaways. All related information and resources are housed in our new SharePoint site, where our people can submit their feedback and new ideas. Regular updates are also provided across TOH directly from our CEO and through our weekly ‘What’s Happening’ newsletter.

Supporting the ‘You First’ approach, this year also saw our hospital-wide ‘ground-up’ engagement strategy to develop and launch the EDI Council’s workplan. The engagement efforts and the initiatives prioritized on the workplan will help ensure a more equitable, diverse, and inclusive workplace for all TOH people. As well, TOH’s Wellness Program is pleased to continue to offer free on-site and virtual support sessions with our psychologist, available in English and French. Finally, TOH’s Wellness Navigator continues to be a hub to connect our people with the wealth of available wellness resources, such as the Peer Support program, conflict resolution services, Violence Prevention resources, EDI and disability training, and more.

WORKPLACE VIOLENCE PREVENTION

Fostering a better provider experience is a key component of our annual QI efforts. On a broader level, our Board of Governors and Senior Leadership Team maintain a longstanding commitment to

ensuring those who work at TOH have the best experience possible. Accordingly, supporting engagement and well-being to maintain a healthy workforce is an integral component of the People Strategy within our new strategic plan. Over the past several years, a considerable amount of effort has been made to monitor and prevent workplace violence at TOH. Workplace violence data are captured in our incident reporting system and information is summarized in a dashboard for clarity and visibility. This information is incorporated into the quarterly QIP updates provide to the Quality Committee of the Board of Governors.

Since our last narrative update on this topic, TOH created and successfully filled a formal role dedicated to this issue – a Violence and Harassment Prevention Officer. As part of our Safety Office, this role has been instrumental to the creation of a Workplace Violence Prevention Toolkit, a website housing all of TOH’s violence and harassment prevention resources, training information and program elements, to help empower TOH staff, residents and physicians. The Toolkit also provides a comprehensive breakdown of the well-established pathways and resources that are in place to support those who experience violence or harassment – including support from leaders, Occupational Health and Wellness, Conflict Resolution, Protective Services, and the Safety Office. TOH continues to build on existing collaboration and engagement with frontline workers and leaders, our Joint Health and Safety Committees (JHSCs) and labour representatives, which accelerates our adoption of best practices and the transformation of our safety culture. We now have a good foundation in place for the progress yet to be made.

The QIP for 2022-2023 focused on enhancing our violence

prevention program awareness and improving incident reporting among frontline staff. Looking ahead to the 2023-2024 QIP, we aim to undertake an evaluation of training access and appropriateness, and to continue to reinforce the importance of reporting while enhancing our safety communication strategy. We will continue to promote the Workplace Violence Prevention Toolkit and provide in-servicing to increase the awareness of violence in the workplace and the available resources for prevention and support. The ongoing positive feedback from our JHSC and labour partners suggests that we are making significant headway and we are excited by the improvements we have accomplished. We look forward to building on the progress made towards ensuring the best possible workplace experience for our people.

PATIENT SAFETY

TOH supports a Just Culture where everyone feels safe, encouraged, and enabled to discuss and learn from patient safety incidents and near misses. As part of a Just Culture, we are all accountable for the quality of our decisions and processes, and we seek to openly evaluate and improve these wherever possible. TOH has a formal and standardized process for reporting, investigating, analysing, and communicating safety incidents (including near misses) involving patients and visitors. It is the responsibility and expectation for all TOH staff, physicians, and residents to report all patient safety incidents and near misses in our electronic incident reporting system, the Safety Learning System (SLS). Leaders review all reported patient safety incidents and are trained and equipped with the knowledge and skills to address risks, improve safety, and communicate this information to their care teams, patients, and families. Any incident deemed Serious or Critical is thoroughly investigated by the hospital's QPS team in collaboration with care teams, senior leaders, and subject matter experts. Lessons learned and actions to correct and prevent similar incidents from reoccurring in the future are determined through this process. Any actions requiring system-level improvements are collaboratively planned, implemented, and evaluated through use of the TOH Innovation Framework to ensure continuous learning and improvement of outcomes for patients. The interdisciplinary review team shares learnings, actions and outcomes resulting from these incidents with patients, families, and care teams through several communication channels. Looking ahead to the upcoming year, we aim to enhance these safety processes to maximize our learning and ensure the safety of all who receive care at TOH.

HEALTH EQUITY

This past year, the EDI Council undertook a learning mission: conducting interviews, holding anonymous large-group sessions (called Design Jams), and having many conversations with people across the organization to listen to their experiences and hear their ideas as to how to help TOH build an inclusive environment for all. The stories heard were raw and eye-opening, expressing the desire to welcome diversity, to be valued for individuality, and to feel safe being themselves. With the support of our EDI Coordinator (a newly created role at TOH), all the insights gained through these engagement efforts have fuelled development of the EDI Council's workplan to impact and influence change.

The EDI Council's current focus is on addressing inequities, discrimination, and under-representation from the perspective of our people (staff, physicians, volunteers, and learners) at TOH. For this reason, the EDI Council is building relationships within the community, while also engaging Patient and Family Advisors to develop the next workplan with the goal that all people at TOH – including our patients and families – feel welcome, respected, safe, and valued in our environment. Initiatives such as the expansion of gender-inclusive demographic fields in our electronic medical record system have allowed us to start to measure sociodemographic data of patients at an organizational level. Building on this, the EDI Council is developing an ethical framework for collecting socioeconomic demographic data that clearly explains the rationale and planned use of the data to help address inequities for staff, physicians, and patients. There are multiple projects aimed at addressing non-medical social needs of patients (e.g., culture/cultural barriers, income, food security, housing, health literacy, and social connection) at the unit, department, or service line level, though these have not yet been gathered at an

organizational level in a systematic way. Accordingly, the EDI Council plans to identify, support, evaluate, and recognize successful projects that can be spread across the organization. Ultimately, the initiative featured on this upcoming year's QIP reflects only one of the many projects that are being prioritized, planned, and executed as part of the invaluable work to promote EDI and ensure the best outcomes for all people at TOH and in the communities we serve.

EXECUTIVE COMPENSATION

Accountability for the execution of both the annual QIP and the Corporate workplan are delegated to the President and CEO from the Board of Governors through a delegation of authority policy. The plans are reviewed, approved, and monitored by the Board of Governors through quarterly performance evaluations of the President and CEO and the Chief of Staff, which are then cascaded to all the executives of the hospital. It is the sum of all objectives in these plans that determine the performance pay component for the hospital executives, including the Chief of Staff.

CONTACT INFORMATION

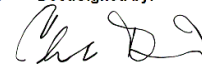
For more information related to TOH's QIP, please contact:
Quality@toh.ca

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 on

DocuSigned by:



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Board Chair

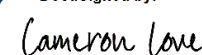
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Board Quality Committee Chair

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Chief Executive Officer

Other leadership as appropriate
