

Let's Make Healthy
Change Happen.



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



3/31/2016

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

The vision for Norfolk General Hospital (NGH) was developed by staff, physicians and Board members and defines our broad and aspirational image of the future. Our vision is "To be an inspiring model of what an exceptional healthcare experience should be". Norfolk General Hospital is a community of people dedicated to transforming the patient and family experience through innovative and collaborative approaches to care, knowledge and leadership. This plan is created annually as part of Norfolk General Hospital's effort to continuously improve the delivery of safe, quality patient and family centered care.

NGH has maintained an unyielding focus on our four strategic directions:

- Improved Access: Improve wait times and help people get the care they need
- Incredible Experience: Develop unparalleled customer service
- Passionate Teams: Entrench a positive culture and grow our team
- Effective Enablers: Ensure we have the physical plant and equipment, financial stability, workplace environment and technological support to enable our staff to do the very best job they can in taking care of our patients and their families

The Quality Improvement Plan 2016-17 will focus on the following priority measures:

- Timely: Reduce emergency department wait times for admitted patients
- Effective: Reduce Low Risk C-Section rate
- Effective: Reduce unnecessary hospital 30 day readmissions
- Patient Centered: Improve in-patient experience
- Safe: Improve Hand Hygiene compliance
- Safe: Increase the proportion of patients receiving medication reconciliation on transfer
- Safe: Reduce hospital acquired infection rates

The Ontario Action Plan for Healthcare, Ontario Hospital Association Strategic Plan, Hamilton Niagara Haldimand Brant Local Health Integration Network Strategic Plan, Health Quality Ontario priorities and Provincial Priorities were taken into account as the 2016-17 improvement plan unfolded for the organization. Common themes such as chronic disease management, safe and effective care, access to care and improved patient experience are embedded in this Quality Improvement Plan (QIP). Medication reconciliation will continue to have a focus on "transition between care services" since NGH actively introduced medication reconciliation for admission and discharge five years ago and has maintained compliance in practice. We work with our community partners to reduce unnecessary time spent in acute care and continue to participate in a LHIN-wide initiatives such as the Home First Practice and the Integrated Funding Model Project to support patients and their families in receiving the right care in the right environment.

The Patient and Family Advisory Council participated in preparing this document and in doing so enhance the message to reflect the guiding principles of patient and family centered care.

Quality Improvement Achievements

We are proud of the achievements we have made over the past year. The Emergency Department wait time for a patient who is admitted has reduced by 6 hours. We accomplished this by embracing a priority focus for emergency department staff, support services staff and inpatient unit staff to improve patient flow at all touch points. Through daily bed management meetings, measuring bed utilization data, and weekly emergency wait time metrics we have improved and sustained Emergency Department wait times for both admitted and non-admitted patients while serving more patients and their families in the Emergency Department.

We have met and exceeded our patient experience performance target for overall care received at Norfolk General. Medication reconciliation at the time of transfer has been successfully implemented for patients who are transitioning from the Intensive Care Unit to the medical inpatient unit. We will continue to expand this practice to all units for any patient who transfers from one service to another.

Integration & Continuity of Care

Norfolk General Hospital (NGH) is committed to providing healthcare services to our patients and their families that are organized around their healthcare needs. We continue to partner with our community providers to improve healthcare services for identified high risk populations and ensure safe and seamless care planning to support their healthcare needs. The QIP includes priorities that have been identified through partnership with the Local Health Integration Network, Patient Safety and Quality Network for Region 4 & 5, Senior Friendly Hospital Working Group and the Community Care Access Center as we support patients as they transition across the continuum of care. In partnership with the LHIN Committee for the Enhancement of Elder Friendly Environment and the Quality/Patient Safety Team, priorities to improve patient safety and drive quality improvements for the aging population became a focus so that educational opportunities and best practices could be standardized across sites and sectors in this LHIN. Reaching out to our partners in Long Term Care (LTC) has identified opportunities to improve our warm handover, medication reconciliation and transfer of accountability as patients move from the hospital to LTC. This in turn has given us a platform to build relationships with our colleagues in LTC to ensure that care is planned and communicated for this patient population. As discharge bundles are standardized across our LHIN and with our Community Care Access Center (CCAC) partners, patients and their families will receive consistent information as they transition from hospital to home.

Our commitment to improve the discharge process has enhanced our communication with Primary Care providers and the Rapid Response Team at CCAC for high risk patients transitioning from hospital to home. Discharge bundles include communication of discharge to the primary care provider, discharge medication reconciliation, discharge instructions, follow-up appointment requests of primary care, referral to CCAC Rapid Response Team for patients at high risk for readmission and information related to symptom management strategies.

Engagement of Clinicians & Leadership

The QIP is one component of our overall planning process. We integrate our QIP into our quarterly Quality Dashboard Report, Service Indicators and Patient Safety Report. The targets are aligned with the strategic plan of Norfolk General Hospital taking into consideration the current and future needs of our patients and the community. Front line staff, managers, directors and senior leadership team were given the opportunity to review the content of the quality improvement plan. The QIP, under the direction of the Quality Committee, was presented to all key program committees, nursing practice committee, staff meetings, and the Patient and Family Advisory Council. The engagement across the organization ensures that we are committed to our fiscal responsibilities, accountable to our patients, securing collaborative practice opportunities with our healthcare partners and demonstrating our focus on the delivery of high quality healthcare. The QIP was shared with LHIN partners for constructive discussion and ideas for additional content to strengthen the plan.

Patient/Resident/Client Engagement

Norfolk General Hospital's leaders interview patients as to their experience at the hospital and to tell their story about their journey in the healthcare system. Through this standardized approach to information sharing and collaboration with our patients and their families, stories and themes are brought to program committees where these teams develop change ideas to support the strategic directions of the hospital.

A Patient and Family Advisory Council is in place at Norfolk Hospital and with the support of our patients and their families, opportunities for improvement are generated at this committee. Advisory Council members sit on our accreditation interview teams and are included in various committees across the organization. Information is brought to the Patient and Family Advisory Council about patient experience, patient safety and senior friendly hospital initiatives for consideration as we seek changes for improvement. The Patient and Family Advisory Council collaborated in the development of the Patient Feedback process for NGH. Our patient feedback responses highlight the need for improved communication between care providers and patients/families. Strategies are embed in our QIP to address our commitment to hearing our patient's voice and making improvements to improve the quality of care.

Performance Based Compensation

The Excellent Care for All Act requires a certain percentage of compensation for any executive under a compensation plan to be linked to the achievement of performance targets set out in the annual QIP.

The executives linked to the compensation plan at Norfolk General Hospital include the President and CEO, Vice President of Finance and Vice President of Patient Care & Chief Nursing Executive.

Sign-off

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

Board Chair: *Beck Snowden*

Quality Committee Chair: *Margi [Signature]*

Chief Executive Officer:

[Signature]