



Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

June 24, 2022

OVERVIEW

St. Mary's General Hospital has evolved from a small, community hospital to a healthcare leader in Canada's fastest growing urban area and tech market. We have experienced, and adapted to exponential growth in both service volumes and levels of care in each of our specialties; Surgery, as the Regional Cardiac Centre and the Centre of Excellence for Respiratory Care and Level One Thoracic Surgery Centre

Throughout the summer and fall of 2020, between waves of COVID-19, the organization undertook significant stakeholder engagement to develop a new strategic plan for 2021-2026: Inspiring Excellence. Healthier Together. To shape the plan, St. Mary's engaged physicians, staff, its Patient and Family Advisory Council, the St. Joseph's Health System, the general public, Waterloo Region hospitals, universities, the technology community, the Ministry of Health and Ontario Health West.

Five strategic priorities were developed to guide our actions: expand equitable access to high quality, empowered care; transform connected care with our partners and community; develop our team of today and the future; embrace new ways to innovate healthcare; and build for growth. As the pandemic response has shown us, these strategic priorities each have a vital impact on the quality of care we provide. The first hospital priority focused on quality connects and elevates our QIP work.

REFLECTIONS SINCE YOUR LAST QIP SUBMISSION

Through the response to the COVID -19 pandemic, we evaluated our approach to committees and have landed on a slightly revised structure to that increases efficiencies and uses the strengths of the collective committee processes. We took the opportunity to build on our long history of using a LEAN approach to improvement and have defined quality a little more broadly by using the 6 domains of quality. We ensure each dimension of quality has a focus in hospital plans including; our strategic plan, our annual hospital quality improvement plan and the quality improvement workplans that each clinical area are undertaking.

We currently capture baseline data to report to our funders and have a good understanding of our care. However, we want to grow exponentially in our use of data and use innovation to inform clinical practices. In the fall of 2021, we built a hospital wide quality scorecard based on the 6 domains that is being used to refresh and develop the quality scorecards for each clinical unit. These scorecards will be used to monitor and drive change throughout 2022/23.

The intrinsic connection between quality of care and joy at work has never been more clear. Not only have we built both into our strategic plan, but we also have a focus in our Quality Framework which defines how:

1. Health Care related Quality is defined, measured, monitored, and continuously improved upon at St. Mary's.
2. Hospital staff participate in a culture of quality, that promotes the uptake of evidence and innovations,
3. The hospital enables all involved to have real joy in their work,
4. Patients and their families are engaged as partners to the full extent of their wishes

We are embarking on an exciting Quality Improvement journey in 2022/23. Through a generous donation from the foundation, we have engaged with the University of Toronto to provide Quality Improvement workshops for our QI teams focusing on 2 main improvement areas which are on our QIP.

1. Improve patient safety through the increased Positive Personal Identification barcode scanning for medication administration and lab tests. (Scorecard indicator: Patient ID band scan rate is used for required processes (i.e. medication & lab samples))
2. Improve our "Timely access to care" by lessening the time it takes for a patient to be admitted through the Emergency Department into an inpatient unit. (Scorecard indicators: time to inpatient bed metric, Rate of readmission within 30 days (as a balancing measure to monitor), Alternate level of care (ALC) days as a % of all inpatient days (OHT focus))

PATIENT/CLIENT/RESIDENT PARTNERING AND RELATIONS

One of our strategic goals is to increase our patient engagement in our work. We have an existing Patient and Family Advisory Committee that has members engaged in approximately 10 different hospital, regional and Ontario wide initiatives. We recruited 4 new members in summer of 2021 and look to ensuring the new members become involved in as many initiatives as they individually choose.

Patient relations continues to be an important and valuable service for patients and staff. The volumes of concerns brought forward to patient relations has doubled since the pandemic began and we anticipate the high volumes to continue for multiple associated pandemic reasons. Communication between clinicians and family members continues to be challenging due to Care Partner safety limitations during outbreaks and high community transmission times. Concerns about vaccination continue to be a moral distress for everyone involved.

We did introduce a new role with COVID funding that has proved to be invaluable to patients, families and staff; the Patient Experience Guide. They provide support for zoom calls home between patients and families, they provide safe activities for isolated and lonely inpatients and often will do a social visit with a patient who does not have any in person visitors. As we incorporate volunteers back into our daily work, we will phase this work to involve them once again.

PROVIDER EXPERIENCE

In addition to the stress and workload concerns that began in March 2020, in fiscal 2021/22 we experienced 16 outbreaks. Since the start of fiscal 2022/23, in wave 6 of COVID, we have experienced the highest pace of outbreaks to date. These outbreaks have significant impact on both staff and patients. The stress of testing themselves and their colleagues, colleagues off work due to illness and exposures, changing patient protocols and decreasing patients' Care Partners creates an incredible toll on the mental health of providers.

We have approximately 1200 full time equivalent staff members. Since the beginning of the pandemic, we have had 738 staff members with a positive COVID test result (could be more than one per person). Waves 5 and 6 since December 2021 have had the highest volume of staff being affected with close to 600 positives and many more with exposures having to be off work due to COVID.

We are very proud of the external recognition received as being one of Canada's top 100 employers for 2022 through the Forbes evaluation process. Supporting staff wellness has been an enormous focus and much energy.

The top 5 highlights on how we have supported staff over the course of the pandemic:

1. Enhanced Employee and Family Assistance program coverage - all staff and physicians have access to up to 20 counselling sessions through Homewood Health, including specialized treatment for employees who are struggling with PTSD or trauma symptoms.

2. Health Benefits enhanced coverage for psychological services, which now includes a Clinical Counsellor, Marriage and Family Therapist, Psychoanalyst, Social Worker, or Psychotherapist. The temporary enhancement will be effective until March 31, 2022, and the combined maximum for these services temporarily increased to \$1,500 per year (per covered person). On plans that previously had a daily or per-visit maximum, these per-visit caps have been temporarily removed and the standard reasonable & customary factors will apply.

3. For staff and physicians without extended benefits we have an onsite counsellor one day per week in addition to enhanced EFAP.

4. Weekly snack cart - Each Friday hospital units and departments receive snacks with a side of support. Our wellness staff includes reminders of wellness support available along with information about special events and tokens of staff recognition, for example, valentines coloured by local school children.

5. Expert facilitated Health and Wellness webinars. The last Wednesday of every month is Wellness Wednesday. Staff and Physicians are invited to participate in 60 minute webinars on topics related to wellness, burnout, stress, and workplace health & wellbeing.

6. Monthly all staff town hall meetings. During Covid we have made an increased effort to provide a forum for all staff and physicians to participate in online meetings with hospital leadership and given the opportunity to ask questions and put forward ideas and suggestions directly to the administration.

EXECUTIVE COMPENSATION

The President, Chief of Staff will have 5% and Vice Presidents will have 3% of their compensation linked to the Quality Improvement and Strategic Plan key performance indicators.

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 **June 24, 2022**

Marion Thomson Howell, Board Chair

Linda Fabi, Board Quality Committee Chair

Sherri Ferguson, Chief Executive Officer

Julie Nicholls, Other leadership as appropriate
