Let's Make Healthy Change Happen.



Quality Improvement Plan (QIP) Narrative for Niagara Health



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

Niagara Health's 2023/24 Quality Improvement Plan (QIP) reflects our quality and safety commitments to our patients, families and community as we work towards Transforming Care as set out in our 2023-2028 Strategic Plan. Our purpose is clear that every person who comes to NH should receive the best care, every time. We must use all resources available to us to ensure people can access hospital services when they need them, that these services and experiences are consistent, and that we are always striving to do better. By embedding continuous quality improvement in all that we do, we will standardize our care and empower our team to deliver the best care to our patients. As such, our QIP is complimentary to our Strategic Plan.

The key areas of focus for the Hospital QIP:

- Ensuring we keep our patients safe through medication reconciliation practices.
- Reaching out to patients regarding their experience at discharge, to ensure a safe discharge.
- Providing a focused effort on Diversity, Equity, and Cultural Sensitivity.
- Providing a safe work environment for our staff and physicians.

The key areas of focus for our Long-Term Care QIP:

- Ensure a resident-centred environment, so that residents feel free to express their opinions in all matters.
- Ensure that residents feel that the staff listen to their care needs and experience.
- Ensure all residents that have a plan to manage ongoing pain.

Patient/client/resident engagement and partnering

Niagara Health actively engages the community through patient and family partnerships via our Niagara Health Engagement Network (NHEN). More than 50 Patient Partners have engaged in co-designing, sharing their voices and insights on more than 130 initiatives in the past year to guide meaningful improvements in quality, safety and the care experience. This has included:

- Inviting two (2) Patient Partners to serve as ex-officio voting members of the Quality Committee of the Board,
- Inviting two (2) Patient Partners to serve as members of the NH Strategic Planning Steering Committee,
- Patient Partners participating in interview panels for key leadership roles,
- Patient Partner participation on Committees such as Accreditation Steering; Diversity, Equity and Inclusion; Accessibility; and other such Committees,
- Five (5) Patient Partners co-developing the Essential Care Partner Program,
- Patient Partners providing important input to encourage patient participation on the launch of our new Patient Experience Survey and in reviewing patient experience questions,
- Patient Partner involvement in the new South Hospital planning.

Patient Partners have had input into the development of the QIP and have provided feedback leading to the initiatives chosen. As noted above, Patient Partners are members of the Quality Committee of the Board approving the Plan. Patient Partners have also been involved in the patient experience initiative and the Violence Prevention Task Force which informs the activities. The Resident Council is engaged with initiatives related to the Extended Care Unit.

Provider experience

Foundational to NH's Strategic Plan is fostering a people first culture where NH team members are equipped for success while building an inclusive and collaborative workplace and strengthening our patient-centred culture. In order to elevate this commitment, NH will invest in our people, teams, leaders, and workplace, with an emphasis on wellness and diversity, equity and inclusion. This is even more important as we learn and recover from the COVID-19 pandemic, compete for talent in a challenging labour market, and maintain our position as an employer of choice.

To support this work, in March, 2023, NH is launching an employee and physician engagement survey to collect feedback from our team and develop a supporting action plan.

Workplace Violence Prevention

A collaborative, safe, and inclusive workplace is a core pillar within the NH Strategic Plan. Specific to violence and incivility in the workplace, NH measures workplace violence primarily through the Incident Reporting System (IRS) where staff and physicians report incidences and provide details for follow up and investigation. All IRSs are followed up to ensure corrective actions are taken to strengthen workplace relationships and safety and to extend supports, resources, and on-going follow up to impacted individuals, teams, and workplaces. Much of this support is coordinated through the Human Resources team, in close partnership with key partners, including Security, Facilities, Quality and Risk, Ministry of Labour, Employee Assistance Program, etc.

NH continues to make significant investments around workplace safety, violence and civility. From a cultural and educational perspective, we are refreshing our Be Kind approach and this, along with the concepts of collaboration, civility, and inclusivity, is reinforced in all training at the new hire level, at clinical skills trainings, in annual mandatory LERNH modules, and at workplace relations/conflict resolution refresher trainings. We continue to offer Safe Management Crisis Prevention and Intervention training to approximately 30 staff per month. In addition, we have completed the rollout of Vocera badges in all patient-facing area so that staff can call communicate with one another and or call for help in real time.

Patient safety

NH has many examples of ways in which it is improving patient safety and quality. For example, NH has earned the highest national recognition for providing safe, high-quality healthcare by reducing the overuse of low-value tests, treatments and procedures. Choosing Wisely Canada has awarded Niagara Health Leadership Status for its commitment to continuous quality improvement programs that limit unnecessary use of resources in patient care. It's one of only two Canadian hospitals to receive the updated designation, joining William Osler Health System in demonstrating critical and sustainable change in habits and processes that don't benefit patients and may actually expose them to harm. This latest recognition builds on Niagara Health's previous successes in quality improvement, mentoring other hospitals and making Choosing Wisely a key part of its ongoing organizational strategy. In December, the St. Catharines Site joined Welland and Niagara Falls when it was recognized as a Using Blood Wisely hospital by Choosing Wisely Canada and Canadian Blood Services for reducing unnecessary red blood cell transfusions. Using blood conservatively keeps supplies sustainable while lowering the risk of side effects to patients.

NH is further committed to preventing and learning from patient safety incidents. NH's Fair and Just Culture is pivotal to how we report, respond to, and manage all critical (adverse) incidents. All critical incidents are reviewed using a root cause analysis to identify contributing factors, and develop recommendations for how to prevent similar incidents in the future. The recommendations are reviewed, endorsed and tracked through a Quality of Care Review Committee and reported to the Quality Committee of the Board. In addition, our Patient Relations team conducts interviews with patients and families involved in critical incidents to invite patient /family to share their experience, give transparency to our processes, demonstrate accountability and learning from critical incidents, in order to work towards prevention. The recommendations are then shared back with the patient and family to close the loop and are shared back with the care team through huddles and formal meetings.

In addition, NH has a robust process for Morbidity and Mortality (M&M) reviews. These rounds are conducted to ensure that patient deaths and morbidity events are reviewed in an inter-professional forum with the following purposes:

- To ensure that the care provided was appropriate and timely; and
- To learn from the review in order to develop new knowledge and improved systems of care delivery.

Health equity

NH strives to be a place where everyone is welcome, heard and valued for being themselves. Having a variety of different backgrounds, cultures, beliefs and abilities is fundamental to providing high quality, safe care to all members of our community and creating an inclusive workplace for all. Some important foundation work is underway at NH that is building off of our Diversity, Equity and Inclusion (DEI) Plan.

Building a collaborative and inclusive workplace is another central component of NH's Strategic Plan. Programs, policies, and decisions at NH will continue to be designed to reflect and enhance diversity, equity, and inclusion using the Ontario Health Equity, Inclusion, Diversity and Anti-Racism Framework.

More specifically, we are listening and learning about the experiences of Indigenous people at NH so that we can take meaningful action toward reconciliation in the healthcare system. This is part of our commitment to make the hospital a safe, culturally welcoming space for Indigenous people that meets their healthcare needs and respects their traditions.

Actions we will take as part of our QIP include:

- Ensuring all NH Leaders complete the San'yas Indigenous Cultural Safety training as well as Cultural Humility elearning.
- Developing an educational Diversity, Equity and Inclusion Certificate Program.
- Ensuring all new hires participate in new employee orientation on Cultural Humility.

Executive Compensation

Niagara Health's Executive Compensation Program provides for base salary, performance-based pay (pay at risk) and a pension/benefits package. The Performance-Based Compensation Plan is designed to align executive compensation with objectives in the Hospital's QIP and strategic plan. The Plan does not provide for a bonus on top of base salary, but it is an amount clawed back from an executive's base salary, and may be re-earned every year if Niagara Health and the executive achieve organizational targets set out in the Hospital's QIP and other plans such as the HSAA and strategic plan; as well as group/program and individual measures. At the beginning of each fiscal year, the Board approves the key measures and targets to be achieved as part of the Plan, and results are evaluated at the end of the fiscal year.

The amount of compensation clawed back is based on the following:

- President and CEO: 5% of base salary
- Chief of Staff: 5% of base salary
- Executive Vice President: 5% of base salary
- Physician Chiefs: 3 10% of compensation

The structure of the Performance-Based Compensation Plan consists of three (3) elements:

- 1. Attainment of Organizational Core Priority Objectives (outcome and related QIP measures) and organizational priorities: 40% weighting
- 2. Attainment of Group/Program Objectives: 40% weighting (these may also be related to QIP/related priorities)
- 3. Attainment of Individual-specific Objectives: 20% weighting

For 2023/24, achievement of all targets would result in 100% payout on the QIP/related priorities portion of the performance based compensation plan (i.e. 40% of the total award). Partial achievement of targets will result in partial payout, as determined by the Board of Directors. Performance below threshold would result in zero payout on that measure.

Other

NH is committed to Transforming Care. Our ambitious and realistic plan will provide a clear focus to unite us over the coming years so that by 2028, Niagara Health will:

- Ensure a positive patient experience with a focus on the increasing demands of our aging community and work with specific patient populations, beginning with Indigenous partners, to improve care;
- Deliver consistent, high-quality care across all sites, using technology and data, which will get easier with the implementation of our new hospital information system;
- Fully transition to a regional model with two acute care sites, including the opening of the new South Niagara Site hospital and one ambulatory care site;
- Continue to build an inclusive and collaborative workplace with a focus on diversity, equity and inclusion.

Sign-off

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

Bunny Alexander Board Chair

Elisabeth Zimmermann Board Quality Committee Chair Lynn Guerriero Chief Executive Officer