

Quality Improvement Plan (QIP)

# Narrative for Health Care Organizations in Ontario

March 31, 2025

## OVERVIEW

Niagara Health's 2025/2026 Quality Improvement Plan (QIP) reflects our quality and safety commitments to our patients, families and the community as we work towards implementing our 2023-2028 Strategic Plan Transforming Care. Niagara Health (NH) is entering an era of great opportunity and the inspiration behind this is providing exceptional care for our patients and their families and a supportive, enriching experience for our staff, physicians, students, learners and volunteers.

One of the most significant quality and safety investments in late 2024 was the introduction of NH's new Hospital Information System. This system enables better management of data, improved patient safety, faster access to information, enhanced quality and consistency of patient care. This will bring countless quality improvements for patients, families, physicians, staff and the community.

At NH, we believe every person who comes through our doors should receive the best care, every time. As a community-based academic hospital, our focus on teaching and learning, research, innovation and partnership propels us to continually improve care and make a difference in people's lives. Safe and Quality Care is a key priority in our strategic plan and the QIP serves as a complement to our strategic plan, our operational plans, and our Hospital Service Accountability Agreement. The QIP focus for 2025/26 will be on the following:

For the Hospital

- Improving ambulance offload delays through innovative strategies;

- Advancing care for equity deserving groups by reducing the rate of Emergency Department 30-day repeat visits for individuals with sickle cell disease;
- Completion of equity, diversity, inclusion and anti-racism education for our staff;
- Improving patient experience in receiving enough information to manage their conditions when they are discharged;
- Improving identification and treatment of In-Hospital Delirium.

For our Long-Term Care Home

- Completion of equity, diversity, inclusion and anti-racism education;
- Understanding and acting on resident's perception of whether they are listened to by staff;
- Understanding and acting on resident's perception of whether they can speak up without consequences;
- Implementing strategies to improve pressure injuries.

We look forward to advancing the change ideas identified and validated by NH's leaders, Patient Partners and long-term care home residents as outlined in our accompanying workplans.

## ACCESS AND FLOW

Access to care and the flow through our hospital system is a priority at NH. However, lack of access to primary care has resulted in our Emergency Departments (EDs) serving as a prime access point for care, impacting wait times and patient flow. This is further exacerbated by Niagara's increasingly aging population with complex care needs and the region's high rates of chronic conditions.

Working with Ontario Health West, and in keeping with our Home First Philosophy, we have developed collaborative action plans with our community partners to improve Access and Flow, supporting effective discharges with a focus on supporting patients at home with the appropriate supports. Specifics include early identification and reduction in the number of Alternate Level of Care (ALC) patients and engaging early with family and caregivers to transition patients across the continuum of care. Strategies we are working on are aligned with the ALC Leading Practices guidelines and senior friendly principles, including:

- Hospital to Home (H2H) H@H program model: As a strategy to reduce ALC days, ED visits and hospital readmissions, this program offers a coordinated approach to provide wrap around services to support transition from hospital to home.
- Expansion of the LEGHO (Lets go home) program, a partnership with Community Support Services Niagara, which supports admission avoidance and provision of additional supports at home including meal delivery, transportation to follow-up appointments, homemaking and wellness checks.
- Implementation of Dementia Resource Pilot in partnership with the Alzheimer's Society of Niagara in all our EDs, which supports admission avoidance by providing access to outreach and home support options.
- Regular meetings with our community partners (e.g., Hospice Niagara) to identify opportunities to support patients at home based on their needs.
- Regular Access and Flow Steering Committee meetings that

include partners such as Hotel Dieu Shaver as well as Patient Partners, with a prime focus on ensuring that the right patient is in the right bed.

- Niagara Health/Niagara Region partnership with a focus on the unhoused population.

## **EQUITY AND INDIGENOUS HEALTH**

As a regional hospital system, NH recognizes its responsibility to provide equitable, high-quality care for all and is committed to embedding equity across the organization to improve health outcomes for the diverse communities we serve. Through evidence-based initiatives, strong community partnerships and system-wide improvements, we aim to identify and address disparities while fostering a responsive and inclusive hospital environment. Building relationships with diverse community partners to ensure our approach to quality care is responsive, comprehensive and inclusive while aligning our approaches with provincial priorities, we remain committed to provide care that is culturally respectful and safe. Reducing barriers to care across all NH sites is a priority for the Indigenous Health Services and Reconciliation team. In May 2024, the inaugural plan Journey to Reconciliation was released. This plan outlines key priorities for building trust and improving care for Indigenous community members.

Examples of successes to date aligned with the plan include:

- Signing of a relationship agreement with the Indigenous Primary Health Care Council, which is foundational to building trust and ensuring that there is meaningful collaboration with our Indigenous Health partners.

- Building on the commitment to creating safer spaces, NH engaged in a community driven art call out, resulting in the installation of a series of unique art pieces located in each of the three Outpatient Mental Health waiting rooms.

- Developed a dedicated community space located at the Marotta Family Hospital for Indigenous Organizations and community members.

In 2024/25, NH hosted the inaugural Health Equity Conference that brought together thought leaders from across the province to share and develop a community of practice. NH will release its inaugural Health Equity Plan for 2025-2028 in April 2025.

## **PATIENT/CLIENT/RESIDENT EXPERIENCE**

In 2024, NH deepened its commitment to patient experience and partnerships as part of its 2023-2028 strategic plan. Central to the plan is our commitment to reimagine the patient experience, emphasizing the importance of improving how patients experience their care journey as well as supporting patients to achieve their best possible health outcomes. In late 2023, a Patient Experience Steering Committee, comprised of Patient Partners and our staff and physicians, was established to co-design a plan that sets out the people, process/practice and partnership actions necessary to improve patient experience at NH, aligned with our strategic plan pillars. This inaugural plan will be launched in April 2025.

At NH, feedback from patients is incorporated into improvement activities in several ways including:

- Using the Qualtrics platform, real-time post-discharge survey that provides access to data and insights on patient experience to drive improvement. A significant focus for 2025/26 is on increasing survey response rates.

- Unit-based patient experience rounding has been introduced to support patients in providing real-time feedback.

Celebrating its five-year anniversary since its inception in 2019, the Niagara Health Engagement Network (NHEN) thrives with 65 Patient Partners having contributed to over 220 initiatives. Patient Partners help create meaningful improvements in quality, safety and care experiences by using their experiences and perspectives to work alongside staff and physicians on various initiatives. Examples of the impact of Patient Partners includes:

- At the governance level, the Board has welcomed a Patient Partner as a voting member and has established a Quality and Patient Experience Committee with two Patient Partner voting members, reinforcing the commitment to ensuring a patient voice in decision-making and improvement efforts.

- Patient Partners participate in hiring panels, participate in policy and procedure reviews, quality improvement projects, health literacy projects, to name a few.

- Patient Partners participated in a QIP working session to collaborate on identifying change ideas and areas for improvement.

## PROVIDER EXPERIENCE

At NH, our People Plan: People First is the foundation of our

commitment to fostering a thriving hospital community. Aligned with our Strategic Plan, this plan guides intentional investments to support our people, ensuring a culture that prioritizes patients, inclusivity, collaboration, and the tools necessary for success. The People First plan focuses on three key areas:

- Growing a Qualified and Capable Talent Pipeline: To attract, develop and retain top talent, we engage in provincial strategies such as the Community Commitment Program for Nurses, Nursing Graduate Guarantee, and the Supervised Experience Partnership. NH has been recognized as an Employer of Choice (7 years) and Best Diversity Employer (3 years)

- Creating an Environment Where Teams Are Healthy and Well: Employee well-being is central to our mission. We provide support through Be Well, Occupational Health and Safety, and Injury Prevention Teams. Dedicated wellness spaces, social worker support for staff and physicians, the Employee and Family Assistance Program, and peer-to-peer wellness programs contribute to a healthy workplace. Additional initiatives, such as Code Lavender, critical incident debriefing and workplace violence prevention, reinforce our commitment to safety and well-being.

- Building and Sustaining an Environment of Respect: We foster a culture of kindness, inclusion and mutual respect. Our Diversity Equity and Inclusion Action Plan, mentorship and bursary programs for equity-deserving team members, and Indigenous Health Services initiatives promote diversity and reconciliation. Mandatory training on cultural humility and respectful workplaces, along with workplace remediation programs, ensure a safe and inclusive environment for all. Research demonstrates the correlation

between organizational culture and patient experience and by putting our people first, we can contribute to better patient outcomes strengthening Niagara Health as a place where everyone can thrive.

## **SAFETY**

NH has an Integrated Quality Safety Framework (IQSF) that serves to integrate and focus on what matters most related to quality and safety at NH. The framework guides, directs and supports the continuous and measurable improvements of quality and safety at NH. Foundational to the IQSF is NH's commitment to a Just Culture, where everyone feels safe, encouraged and enabled to discuss and learn from patient safety incidents and near misses. NH has a formal standardized process that supports the identification, reporting and assessment of patient safety incidents across the organization. This includes a patient safety occurrence reporting system, protocols for identification and investigation into root causes of critical incidents including recommendations to help reduce the risk of future incidents, and regular reviews at the organizational leadership and Board levels on overall trends related to critical incidents. In addition, our Patient Experience 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 actions NH is taking to improve the system are then shared back with the patient and family to close the loop; these actions are also shared back with the care team through huddles, formal meetings, and Quality, Patient Safety and Risk Rounds. Patient storytelling related to critical incidents has been an important feature of our Board and Board Quality and Patient

Experience Committee meetings.

In addition, we have focused on several advancements, including but not limited to:

- Nurturing our positive patient safety culture by focusing on closing the loop and sharing the learnings from critical incidents with the care team through huddles, newsletters and formal meetings.
- Leveraging our technology through the reporting system to review incidents and ensure that there is follow up and accountability in understanding and making improvements to enhance patient safety.
- Launching quarterly Quality, Patient Safety and Risk Rounds to provide a forum for sharing and learning to enhance care for our patients. De-identified cases are reviewed by a multidisciplinary team together with research and existing organizational data (i.e., Incidents, quality of care reflective reviews, etc.) to help understand the scope of the issues and the potential for improved care and outcomes.
- Advancing our partnership with Brock University to leverage new knowledge and research to advance key strategic imperatives while building future QI and safety specialists of tomorrow.
- Reenvisioning how we engage with clinical teams by collaboratively reviewing existing data, leading practices and research to address key patient safety and quality issues and enact change.

## **PALLIATIVE CARE**

The Regional Palliative Care Program at Niagara Health provides support within both the inpatient and outpatient settings. There are palliative care physicians and nurse practitioners within each of these areas providing coaching and counselling to front-line teams, assessing and managing patient care, acting as liaisons to community partners, as well as providing support to families and care providers.

The teams work to provide care under the guidance of the Niagara Ontario Health Team – Equipe Sante Ontario Niagara (NOHT–ESON) and the West Region Palliative Care Network. NH is supporting the following strategies within the associated Ontario Palliative Care Network (OPCN) working group actions plan:

- Improving Indigenous people's experience in palliative and end-of-life care by:
  - Adhering to the communication plan between the NOHT, community and hospital
  - Engaging with Indigenous advisors, clients and community members
- Advancing tools, training and models of care that promote early identification, skills in serious illness conversations, and advance care planning across all healthcare providers by:
  - Supporting training opportunities for front-line teams, palliative care providers and leadership,
  - A commitment by leadership to the San'yas Indigenous Cultural Safety training course,
  - Increasing participation in Learning Essential Approaches to Palliative Care (LEAP) courses,
  - Implementing the Clinical Coach at NH,

- Supporting Nurse Practitioner-led palliative care champions at the Marotta Family, Niagara Falls and Welland hospitals, and
- Supporting SCOPE for Palliative Care at NH.
- Advancing implementation of improved, seamless care pathways that work for people and families as they transition out of hospital, remain at home with support of specialty community services by:
  - Working to remove barriers to early discharge,
  - Partnering with primary care providers to enhance transitions of care.
- Empowering people and promoting self-determination/autonomy through a sustainable person-centred approach by:
  - Partnering to raise public awareness about palliative care and system navigation.



## POPULATION HEALTH MANAGEMENT

NH is a proud partner of the Niagara Ontario Health Team – Equipe Sante Ontario Niagara (NOHT-ESON). With a goal to improve population health outcomes, partners from across the continuum of care have come together over the past four years to understand and implement opportunities to transform the healthcare system in Niagara. Using a consensus decision-making model, over 45 partner organizations and patient/client/family/caregiver (PCFC) representatives have been working diligently to improve the way we operate as a connected system, considering all aspects of a patient's journey, working to ensure more equitable care for those seeking care in Niagara.

In addition, NH is working in collaboration with regional partners to identify opportunities to support our unhoused residents aligned with commitments in our inaugural Health Equity Plan.

## EMERGENCY DEPARTMENT RETURN VISIT QUALITY PROGRAM (EDRVQP)

As part of the provincial Emergency Department Return Visit Quality Program, (EDRVQP), ED leadership undertakes an annual audit of patients who have returned to the ED for care within 72 hours or seven days from the initial ED revisit that results in an inpatient admission with a sentinel diagnosis (i.e., acute myocardial infarction, subarachnoid hemorrhage and pediatric sepsis). NH leadership completed 150 audits which allowed for a robust analysis of our repeat visits at the three ED sites. Based on this audit, the most common reason identified for a patient returning to the ED was to obtain an ultrasound because this diagnostic service was not available in the evening hours. This is aligned to the findings reported by other hospitals in the EDRVQP 2023-24

summary report which states that the lack of access to diagnostic imaging services results in discharging patients who then must return the next day for specific tests. Efforts to support human resource recruitment for DI services that would allow for extended timeframes for service are ongoing but with a noted provincial shortage of technicians this continues to be a system-wide challenge. In relation to sentinel events, there were no events found in this year's audit.

Two other areas that have been noted in previous year's summary reports are linked to Physician Initial Assessment (PIA) and patients who leave without being seen. These are two areas that, although were not significant in our audit review as contributing factors to repeat visits, continue to be key priority areas for quality improvement initiatives. The team, consisting of nursing staff, managers, ED director, physicians and Quality and Patient Safety Specialists, use QI methodology and clinical data to understand trends and root causes to support our implementation of initiatives to help reduce repeat visits to the ED.

## EXECUTIVE COMPENSATION

Niagara Health's Executive is held accountable for the implementation of identified change ideas and achievement of targets set out in the annual QIP. This includes linking a subset of QIP indicators to performance-based compensation to drive alignment with organizational strategy and reinforce the commitment to drive quality improvement to further enhance patient and provider experience at NH.



## CONTACT INFORMATION/DESIGNATED LEAD

The contact information for the Designated Lead is Dr. Madelyn Law, Director of Quality, Patient Safety and Risk.

madelyn.law@niagarahealth.on.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

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Board Chair

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Board Quality Committee Chair

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Chief Executive Officer

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EDRVQP lead, if applicable

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