

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 27, 2024



OVERVIEW

Located approximately 100 kilometres east of Toronto, Northumberland Hills Hospital (NHH) delivers a broad range of

acute, post-acute, outpatient and diagnostic services. The hospital serves a catchment area known as west Northumberland County. A mixed urban and rural population of approximately 63,000 residents, west Northumberland comprises the Town of Cobourg, the Municipality of Port Hope, Alderville First Nation, and the townships of Hamilton, Cramahe and Alnwick/Haldimand. NHH employs more than 700 people and relies on the additional expertise and support provided by over 170 physicians and midwives, and more than 400 volunteers.

In 2022, a 23-member multi-disciplinary team comprised of senior leadership, representatives from the Board of Directors, Patient and Family Advisory Council (PFAC) partners, physicians, and front-line care providers as well as members of NHH's Foundation and Auxiliary, co-designed a collaborative community consultation process with our partners in the Ontario Health Team of Northumberland (OHT-N). This consultation process led to the development of Northumberland Hills Hospital's new Strategic Plan Framework.

Anchored around the acronym "CARE," and grounded in a new shared purpose of People First, the Strategic Plan Framework set NHH on its current path to achieve four strategic priorities:

- Connected care close to home
- Accountable care
- Responsive and healthy work environment
- Exceptional care, every time, for every person

Aligned with these strategic priorities, NHH's 2024-25 Quality Improvement Plan (QIP) is our internal and public commitment to

continuous improvement in quality of care delivery, and patient safety. Together with our QIP, our strategic priorities are also

supported by several related annual operational plans and frameworks that are frequently reviewed. These include but are not limited to quality and safety initiatives, Professional Practice Frameworks, Ethics Framework, NHH's People Plan, Infection Prevention and Control Framework etc. Working with The Beryl Institute, a global community of practice committed to transforming the human experience in healthcare, we are also introducing our first NHH Experience Framework to better prioritize, coordinate and monitor actions under way and planned to enable a positive experience for patients and their caregivers as well as our staff, physicians, midwives and volunteers.

Our shared purpose of People First reflects the central role and aspiration of this hospital. It speaks to why we exist and how we can make an impact in our community. It speaks to our commitment to ensure that our patients and caregivers receive an experience that is safe, effective, equitable, timely, and efficient through a philosophy of person-centred care and, likewise, that our people (staff, physicians, midwives and volunteers) can find joy and fulfilment in the roles that they play in contributing to patient care, outcomes and experience. Our QIP is guided by Ontario Health, patient and caregiver experience survey results, and the ongoing efforts to reduce Alternate Level of Care. It is strengthened by feedback from patients, families and caregivers, staff, physicians and midwives. Finally, our QIP is informed by the objectives set out in NHH's integrated risk management program and best practice standards including but not limited to Accreditation Canada's Required Organizational Practices.

Guided by our core values of integrity, quality, respect, compassion and teamwork, we are confident that NHH will achieve or make substantial progress toward the 2024-25 QIP targets, given our dedication and commitment to exceptional patient care, every time for every person, the engagement of our Board and leadership team, the partnership of our dedicated Patient and Family Advisory Council (PFAC) and continued collaboration with community partners and volunteers.

ACCESS AND FLOW

NHH recognizes the importance of access to care in the right place, at the right time. We are committed to optimizing system capacity, timely access to care, and patient flow through the following actions in 2024-25, with aim of avoiding preventable hospitalizations and decreasing overall length of stay:

- Maintaining a strong focus with a 'Home First' philosophy and approach to care through the consistent provision of educational materials for staff, physicians, midwives, as well as patients and families.
- Bolstering our Geriatric Activation Team in the Emergency Department and expanding to Geriatric Activation Team Mobile to extend comprehensive geriatric assessments and activation plans into the in-patient areas.
- Implementation of a standardized care planning process with patients and families to address barriers to discharge as early as possible in the hospital admission.

NHH strives to reduce the number of Alternate Level of Care (ALC) designations within the in-patient areas and monitor ALC throughput ratio by implementing these change ideas.

Decreasing the number of patients with an ALC designation in hospitals is significant to NHH for many reasons. Firstly, it ensures the right patients are in the right area of care, at the right time for patients whose care needs are best met at a facility that is equipped to meet their needs and patients requiring acute care to support their health journey. Aligned to our shared purpose of People First, this will optimize finite hospital resources and ensure acute care resources are used by individuals who need acute care. This will enhance the efficiency of resource allocation and ensure timely access to care. Addressing ALC improves overall patient flow within the healthcare system, leading to more streamlined and effective care delivery starting in the Emergency Department.

EQUITY AND INDIGENOUS HEALTH

NHH's Equity, Diversity and Inclusion Advisory Committee (EDIAC) is responsible for advising and recommending actions and initiatives to help build and sustain an inclusive, diverse and equitable culture at NHH. The Committee is comprised of dedicated staff, physician, midwife, volunteer and Patient and Family Advisory Committee (PFAC) members that reflect strong association with diverse minority groups and/or lived experience. The Committee increases awareness across NHH through initiatives including, but not limited to:

- Monthly notable dates recognition
- Hosting of guest speakers

- Delivery of numerous equity, diversity and inclusion related training, and resources to staff, physicians, midwives, and volunteers
- Building and fostering a relationship with elders and representatives of Alderville First Nation (located just a few kilometers from NHH) and regional 'new Canadian' resource centres
- Reviewing of policies, procedures and practices through the lens of equity, diversity and inclusion
- Facilitating generative discussions with our senior leadership as well as Board and Community Committee volunteers

In 2024-25, the Committee will strive to meet their operational workplan priorities. Through ongoing and sustained efforts, NHH is dedicated to ensuring that our priorities are responsive to the unique needs of all individuals, fostering a healthcare environment that promotes diversity, inclusivity, antiracism, and antidiscrimination. By actively engaging in these initiatives, we aim to contribute meaningfully to the broader provincial objective of enhancing health equity and fostering positive outcomes for diverse communities.

The Committee will directly oversee two indicators within the Equity dimension of the 2024-25 QIP workplan: the percentage of staff, physicians, midwives, and volunteers who have completed hospital-approved equity, diversity, and inclusion education, and the total number of co-designed hospital programs, policy or resource packages with Indigenous community partners.

PATIENT/CLIENT/RESIDENT EXPERIENCE

NHH recognizes that authentic and mutually rewarding patient, family and caregiver engagement grows from a long-term approach to ensure success as we work to develop and continually partner with patients, caregivers and their families.

By enabling organization-wide partnership and experience-based co-design through a multitude of channels, NHH continues to evolve and expand our proactive engagement efforts. Committed to continuously improving the experience of individuals who receive care, and their families, we integrate the perspectives of patient, family and caregiver into our decision-making in a variety of ways. Introduced at NHH in 2016, PFAC partners play active roles on our Quality and Practice Committees (QPCs), best practice working groups, departmental and corporate project working groups, and regional tables, including our local Ontario Health Team. NHH's PFAC contributed more than 425 hours of service to NHH from January 2023 to October 2023, through a mix of individual and collective contributions. Their engagement is expected to grow further in 2024-25 as the Experience Framework they are codesigning advances its strategic and structural priorities.

In addition to our PFAC engagement, one-on-one interviews are also conducted regularly with patients and their families (manager rounding, quality review meetings). Meetings with patients and family members occur regularly through discharge support meetings and direct engagement occurs with the Board Quality and Safety Committee through a segment called "Through the Patient's Eyes." NHH's complaints and compliments process further enables direct

dialogue and as required, the timely documentation, investigation and resolution of concerns.

NHH implemented a stand-alone interim patient and caregiver experience survey program in December 2022, which NHH monitored and tracked through 2023, with a strong focus on continuous patient engagement. Promotion occurs across multiple channels (print and electronic), supported by PFAC partners who work to promote survey awareness in hard-to-reach patient care areas. Quantitative patient experience data is summarized and shared monthly via Patient and Caregiver Experience Dashboards at QPC's, and qualitative data (anonymous written feedback) is shared weekly with unit/department leaders as appropriate for quality improvement purposes. NHH will continue to utilize the interim patient and caregiver experience survey until the migration to a more fulsome long-term solution, benchmarked against provincial peers.

PROVIDER EXPERIENCE

NHH's staff, physicians, midwives, and volunteers, like other health care professionals across Canada, have experienced unprecedented impacts due to Health Human Resource (HHR) pressures (exacerbated by the pandemic), the learning curve of new processes and procedures with the implementation of a new regional Clinical Information System (EPIC), and unavoidable absenteeism due to COVID exposures, infections, and work restrictions. This has contributed to an increase in work-related stress and, in some instances, burnout. This is not a challenge unique to NHH. Monitoring the experiences of staff, physicians, and midwives, and

acting on feedback, has remained a priority for the leadership of NHH through the pandemic. To this end, NHH implemented an interim internal experience survey, inclusive of staff, physicians, and midwives, in the fall of 2023. and was able to reach a 53%

Under the umbrella of our “Caring for the Carer” strategy, there have and continue to be targeted initiatives focused on the needs of staff, physicians, midwives and volunteers by understanding and meeting their physical, emotional, psychological and wellbeing quality patient care attributes: Quality, Safety, Risk Management needs as identified through direct feedback received, townhalls, and Performance Monitoring. In addition to these cornerstones, surveys and one-on-one discussions. NHH’s People Strategy has also renewed its focus on operational priorities under the four priority quality patient care: Culture, Leadership, Collaboration and categories of Talent Management, Service Excellence, Wellbeing and Culture. In 2024-25, the Experience Framework will provide a potential of our staff, physicians, midwives, and volunteers to new tool through which positive human experience is advanced at continuously provide high quality patient care. The 2024-25 Patient NHH.

completion rate. Results from this survey were analyzed and shared and NHH is now action planning at a departmental and corporate level to capture concrete initiatives and strategies to positively impact staff, physician and midwife experience.

SAFETY

Quality and patient safety are embedded into everything we do at NHH, and "Quality" is one of our core organizational values. NHH’s

Quality and Safety Framework is built upon four cornerstones of Quality, Safety, Risk Management

NHH’s Quality and Safety Framework describes four enablers for

Sustainability. By focusing on these enablers, we are maximizing the

Safety Plan is embedded within the Safety dimension of the 202425 QIP. This year, NHH is focusing on and committing to four areas of safety:

1. increase the barcode medication administration (BCMA) rate.
2. reduce healthcare-associated C-Diff infection rate.
3. reduce workplace violence resulting in lost time injury.
4. reduce inpatient falls.

operational components of the OHT-N through in-kind support related to HR, Finance, Communication, IT and patient/caregiver engagement.

Guided by the OHT-N's 2022-2025 Strategic Plan—the combined engagement for which also served to support and align NHH's own Strategic Plan Framework— OHT-N partners are working collaboratively on three core areas of focus:

- Improving access to primary and specialty care and services in our region.
- Supporting older adults with complex conditions to live and age well at home.
- Improving access and services for those who have mental health and addiction needs.

In alignment with these efforts, NHH remains committed to enhancing the process for safety incident reporting, management and monitoring.

POPULATION HEALTH APPROACH

As a founding member of the OHT-N, NHH continues to work closely with a broad range of area health and social care providers, including patient and caregiver partners (known within our OHT as Experience Care Partners).

In October 2023, NHH's President and CEO assumed the co-chair role of the OHT- N, together with her counterpart at a local Community Health Centre (CHC). In addition, NHH staff support In addition to a collaborative COVID response, the OHT-N demonstrated gains from a population health perspective, including but not limited to, the creation of a first-ever Rural Outreach Clinic to support unattached patients in an underserved community.

Operational priorities for the 2024-25 fiscal year are in the process of being finalized, with distinct and measurable goals within each of the core areas of focus noted above, as well as a fourth: the advancement of digital health priorities within the region. NHH remains invested in the OHT-N model and the opportunities it provides to support patient, caregiver and provider experience across the continuum of care and, by extension, population health.

EXECUTIVE COMPENSATION

The performance of each senior leader is measured against leadership competencies, annual goals including those relevant to achievement of corporate objectives, the QIP and a 360-degree

component that solicits feedback from a broad circle of stakeholders.

NHH developed a Board Position Paper on Executive Compensation and a Management of Performance Pay and Quality Improvement Plan Pay/"Pay at Risk" Guidance Framework. These endeavours were done in alignment with the Broader Public Sector Executive Compensation Act 2014, Regulation 187/17 and amended Regulation 304/16.

CONTACT INFORMATION/DESIGNATED LEAD

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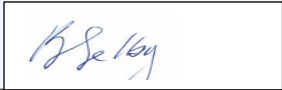
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NARRATIVE QIP 2024/25**SIGN-OFF**

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 **March 27, 2024**



Elizabeth (Beth) Selby, Board Chair



Starr Olsen, Board Quality Committee Chair



Susan Walsh, Chief Executive Officer



Lola Obomighie, Other leadership as appropriate
