

Let's Make Healthy
Change Happen.



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

St. Joseph's
Healthcare  Hamilton

3/31/2014

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 HQO (if required) in the format described herein.

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Overview

Message from the Board

Hospital care involves thousands of complex procedures every day and this creates a high risk of error. The Board of Trustees is committed to working with staff, physicians and volunteers to make St. Joseph's Healthcare Hamilton the safest possible hospital environment. This plan represents a subset of our goals and the targets represent one year of improvement.

To make our clinical environments as safe as possible we focus on identifying, measuring and eliminating all preventable harm, using education, best practices, scientific research, checklists, new technologies, risk management and other process improvement techniques.

We strongly believe in learning from the experiences of our patients and their families. In 2013/14 we invited two patient/family members to join our quality committee to help us in our journey and have made it a priority to involve patients and families in service design and quality improvement.

Our Heritage and our Plans for the Future

The Sisters of St. Joseph's were invited to Hamilton in 1852 and as part of their work began a mission of healing. They visited people in their homes and on the streets to provide care. They also began to teach in schools and take care of orphans. On June 11, 1890 they opened St. Joseph's Hospital in a converted mansion house. Many more years of work followed to build the infrastructure that we have today. The Sisters believed in providing service where is most needed and solidarity with the poor. Today we retain, as our own, their values of dignity and respect for everyone.

As we look toward the future St. Joseph's Healthcare Hamilton is committed to transforming health care to meet the needs of our community in the 21st century. Our ultimate goal is improved quality of service, which we define as: Safe, clinically Effective, Accessible to all who need it, and Kind (SEAK).

We have set four directions in our Strategic Plan to achieve this goal:

- Transforming How We Work - so that we can deliver better care with fewer resources
- Breaking Down Barriers - within the health care system to provide a better patient experience
- Engaging Patients, families, staff, physicians and volunteers – so that we make better decisions
- Continuing our Commitment to Education and Medical Research - to maintain a skilled workforce and improve the science of health care

Our Quality Improvement Plan goals for this year are:

Plan Goals for 2014/15	SEAK Framework Alignment
<p>CDI (Antibiotic Management)</p> <p>Our goal is to introduce best practices that reduce the need for antibiotics during hospital care. The use of antibiotics is a major risk factor for CDI. Our focus will be on a reduction in the use of catheters which increases the risk of urinary tract infections and the use of antibiotics used to treat them. In 2014/15 we will:</p> <ul style="list-style-type: none"> • standardize catheter assessment • reduce the use of catheters in total joint replacement surgery by 25%; • reduce the use of catheters in colorectal surgery by 25%; • shift to pre-assembled catheters 	SAFE / EFFECTIVE
<p>Seclusions in Mental Health</p> <p>Our goal is to reduce seclusions in Mental Health by debriefing with clinical teams after every seclusion. Debriefing will allow the teams to learn so that future seclusions can be prevented. In 2014/15 we will focus on three phase one units and our goal is to reduce seclusions in those units by 25%.</p>	SAFE / KIND
<p>Patient and Family Shadowing Pilot Project</p> <p>This is a joint pilot project led and co-designed by our Patient and Family Advisory Council and hospital staff. In 2014/15 volunteers from the project team will join patients and families to share their experience in hospital minute-by-minute and day-by-day. The project team will then take the lessons learned to our staff so that they can make service improvements that are truly grounded in the needs of patients and families.</p>	SAFE / EFFECTIVE / ACCESSIBLE / KIND
<p>Medication Reconciliation</p> <p>This is part of our plan to improve the management of medications. Medication reconciliation means keeping track of the changes and being clear about the right prescription. In 2014/15 we will achieve 100% medication reconciliation in the Rehabilitation Unit.</p>	SAFE

Integration & Continuity of Care

We are working closely with our regional partners to improve the continuum of care for patients. Two key areas are:

- **The LHIN Clinical Integration Plan** – a long term plan that will integrate services across our region to provide higher quality, better coordination and integration, and lower cost.
- **Health Links** - a system wide initiative that brings together health care and social care service providers to coordinate the care of people with complex medical and social needs.
- **Integrated Comprehensive Care** - a pilot project with St. Joseph's Home Care, our local Community Care Access Centre (CCAC), the Ministry of Health, and other partners, to improve the experience of patients as they transition from hospital to home. This project has been very successful. It provides patients with a case manager who organizes both their hospital care and their home care and includes a 24/7 phone number to call if they have concerns. Preliminary results show very high patient satisfaction, improved clinical outcomes, fewer readmissions to hospitals, fewer Emergency Department visits, shorter hospital stays, and lower costs.

Challenges, Risks & Mitigation Strategies

As we implement our plan we will face some significant challenges. These challenges include:

- An increasing prevalence of 'superbugs' in our community, such as MRSA, VRE and C-difficile.
- An increasing demand for emergency services and a corresponding need for medical beds.
- Limited funding to address the high level of inflation in health care and the increasing needs of our community.

To mitigate these challenges we will continue to work with our health care and academic partners to improve our models of care and contribute to greater integration of services. We will continue our long tradition of financial stewardship and the prudent use of taxpayer and philanthropic dollars.

Information Management Systems

We have developed a comprehensive I.T. strategic to maintain and improve our systems over the long term. Our primary goals are to improve the alignment of I.T. Systems with the delivery of Safe, Effective, Accessible, Kind (SEAK) services for our patients and clients. We are working with our partners to improve the integrations of systems regionally, provincially and nationally so that medical records can be accessed by the right person at the right time to provide the right care. We also want our I.T. Systems to support research and education purposes. For example, anonymized data can provide valuable information about which treatments are the most effective, while anonymized diagnostic images can be used to train clinical learners. I.T. Systems are expensive, but by taking a long term view we plan to evolve our systems with our eye firmly on the benefits to patients and clients.

Engagement of Clinical Staff & Broader Leadership

In 2013 we introduced a new engagement process for our staff. In this new process the opinions and feelings of our staff are sought through an anonymous survey. Our teams then meet and discuss their survey results and use a toolkit to develop team engagement plans. The goal of these plans is to make the workplace more satisfying, safe and enjoyable.

Each engagement plans also focuses on one of three priorities chosen by each team:

1. Mission and Quality of Service
2. Organizational Vision and Strategy
3. Professional Growth

Each team also chose a priority most relevant to their goals as a team.

As you will see in our 2013/14 progress report this program was implemented successfully.

Accountability Management

The President's salary will be reduced by 10% and the salaries of the executives (listed below) will be reduced by 5%:

- the Vice President, Clinical Programs and Chief Nursing Executive
- the Vice President, Mental Health and Addiction Services
- the Vice President, Medical and Academic Affairs, and Chair of the Medical Advisory Committee
- the Vice President, Business Programs and Chief Financial Officer
- the Vice President, People and Organizational Development
- the Vice President Research
- the Integrated Vice President for Diagnostic Imaging and Laboratory Services

The salary reduction may be earned back and this is linked to the performance targets associated with the indicators marked as 'Improve' in this plan.

Health System Funding Reform

St. Joseph's Healthcare Hamilton is playing a leading role, through the development of quality based procedures in Nephrology and the pioneering work of the Integrated Comprehensive Care Program. Our goal is to build our processes of care around the journeys taken by the patient, working closely with partner agencies and our Local Health Integration Network (LHIN) to make those patient journeys simpler, safer, more convenient, and above all, with better clinical outcomes.

To increase our capacity to integrate our services around patient journeys we are working closely with two of our partner agencies – St. Joseph’s Home Care and St. Joseph’s Villa Dundas. Working together we have combined our three boards into a single committee and developed a single joint strategic plan (see Mapping Our Future). Our goal is that patients, clients and residents will no longer feel that they are moved from one health care provider to another, but rather that they are staying with a single team as their care needs change.

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

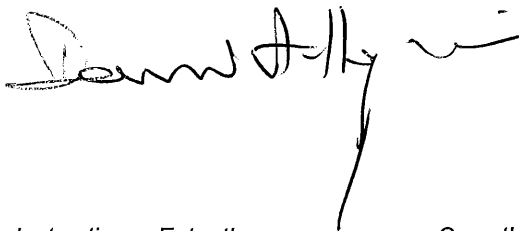
Carl Santoni, Board Chair



Ray Rocci, Quality Committee Chair



David Higgins, President



Instructions: Enter the person’s name. Once the QIP is complete, please export the QIP from Navigator and have each participant sign on the line. Organizations are not required to submit the signed QIP to HQO. Upon submission of the QIP, organizations will be asked to confirm that they have signed their QIP, and the signed QIP will be posted publically.