

Let's Make Healthy
Change Happen.



2016/17 Quality Improvement Plan (QIP) Narrative for Health Care Organizations in Ontario



March 31, 2016

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

We all want to be well and as healthy as we can be – at every stage of our lives.

Trillium Health Partners’ Strategic Plan outlines our mission of a new kind of health care for a healthier community. We envision a new approach to health – an inter-connected system of care that is focused on what matters to our patients, both inside the hospital and beyond its walls: an approach that provides excellent care today and continued leadership for improving care tomorrow.

Quality, Access and Sustainability are the foundational goals of our Strategic Plan, and core drivers of our success. These strategic goals anchor our efforts and everything we do at our hospital. Our commitment to quality is also embedded in our Quality and Patient Safety Program. It is our priority to provide patients and families the highest quality care and an exceptional experience that is responsive to their needs, preferences, values and goals. Our Quality and Patient Safety Program also encompasses the advancement of our safety culture, a focus on measurement and reporting of quality, and a commitment to quality assurance. The Quality Improvement Plan (QIP) represents one key component of this program.

As we continue to expand our capacity for patient care, we remain committed to improving and sustaining the delivery of high quality care. This year’s QIP builds on the improvement efforts we’ve made in the last two years as we had committed to a 3 year planning cycle in our hospital.

| THP Strategic Plan Goal | HQO Quality Dimension | Goal | 2016/17 Priority Indicator |
|-------------------------|-----------------------|--|---|
| Quality | Patient-Centered | We will improve the experience of patients and families who trust us with their care | Patient Survey Results- "Would you recommend this hospital to your friends and family?" |
| | Effective | We will improve integration with the broader healthcare system by optimizing capacity within our hospital to deliver the right care in the right place | Emergency Department Admission Rates |
| | Safe | We will improve the safety of care we provide by focusing on two essential areas - hospital acquired infections and medication safety | Hand Hygiene Compliance Before Patient Contact Medication Reconciliation on Admission (patients admitted for longer than 24 hours) and Discharge |
| Access | Timely | We will sustain access to our services by managing emergency department wait times for admitted patients | Emergency Department Wait Times for Admitted Patients |

| THP Strategic Plan Goal | HQO Quality Dimension | Goal | 2016/17 Priority Indicator |
|-------------------------|-----------------------|--|------------------------------|
| Sustainability | Efficient | We will maintain our financial health to support reinvestment in quality improvement | Hospital Total Margin (GAAP) |

Quality Improvement Achievements

Trillium Health Partners has demonstrated our commitment to Quality in several ways. In the spring of 2015, we achieved the Registered Nurses Association of Ontario (RNAO) Best Practice Spotlight Organization (BPSO) designation. This internationally-recognized designation affirms our achievement of seven important best practices. In working toward the BPSO designation, we have also established a year-long, inter-professional leadership program for allied health and nursing staff. We will continue to build on this success by implementing additional best practice guidelines in the coming year.

We have also demonstrated our commitment to quality through our partnership with the Joint Department of Medical Imaging (UHN, Women’s College & Mt. Sinai) to implement a peer review program in diagnostic imaging. With 100% participation from radiologists, random quality checks are done to improve the overall quality of diagnostic testing within the hospital. We also have robust peer review programs in radiation oncology and pathology, and are working towards establishing a program in echocardiography.

Another key quality assurance activity in our organization is Accreditation. Since our last Accreditation survey in 2013, we have developed a very robust sustainability plan that involves more proactive planning to ensure we meet best practice standards in advance of our next survey, as well as regular mock exercises to ensure that quality and patient safety is truly embedded in the care that we provide every day. Last year, we participated in the Stroke Accreditation program and achieved a Stroke Distinction designation from Accreditation Canada.

A critical step towards enhancing our safety culture in the organization is our “Advancing Safety” initiative. This effort focuses on standardizing how our care providers record and manage safety incidents, and includes methods to encourage near miss reporting.

These accomplishments are just a few of the many examples of exceptional teamwork demonstrated at Trillium Health Partners that reflects the dedication and commitment to Quality.

Integration & Continuity of Care

Our organization’s commitment to partnering with other health care providers is based on the belief that we are all in this together. While we can make improvements within the hospital to advance our mission, we cannot be sustainable without our partners in the community.

An example of this focus is Seamless Transitions project, a partnership with the Mississauga Halton Community Care Access Centre (CCAC). This initiative has helped to identify opportunities to enhance the hospital and CCAC discharge processes, by coordinating with patients and families to plan and manage

discharge and post-discharge care. We continue to look for ways to improve the coordinate of patient care because better coordination and planning makes the transition much easier for patients and typically means patients can leave hospital more quickly, freeing up beds for others who need them.

Patient Engagement

In an effort to remain focused on what matters most to patients, direct engagement of patients and their families in how we improve quality is critical. Patient representatives on our Board and Corporate Quality Committees play key roles in developing and driving our quality goals. A patient representative now sits on the Professional Practice Committee. In addition to engagement in hospital committees, the Patient and Family Partnership Council provides input on hospital-wide policy and patient concerns. Specific to our QIP goals, we have engaged this council to help us with our quality change initiatives. Most importantly, we are committed to engaging patients and families in how their care is managed and delivered through methods such as patient rounding, and asking for their feedback through patient surveys.

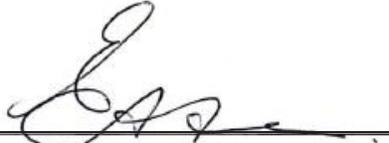
Performance Based Compensation

All executives at Trillium Health Partners will have a portion of their compensation tied to the seven priority indicators. With oversight from the Board of Directors, the executive team will be held accountable for the overall performance of the organization through regular reviews of these seven priority indicators coupled with mid-year and annual executive evaluations. Effective April 1, 2016, all executives will have at a minimum 40% of their Performance Based Pay linked to achieving the targets set for the 2016/17 priority indicators.

| THP Strategic Plan Goal | HQO Quality Dimension | 2016/17 Priority Indicator | Target |
|-------------------------|-----------------------|--|--------------|
| Quality | Patient-Centered | Patient Survey Results- "Would you recommend this hospital to your friends and family?" | ≥80% |
| | Effective | Emergency Department Admission Rates | ≤10.4% |
| | Safe | Hand Hygiene Compliance Before Patient Contact | ≥84% |
| | | Medication Reconciliation on Admission (patients admitted for longer than 24 hours); Medication Reconciliation at Discharge | ≥95% ≥75% |
| Access | Timely | Emergency Department Wait Times for Admitted Patients | ≤39 hours |
| Sustainability | Efficient | Hospital Total Margin (GAAP) | ≥0% |

Sign-off

I have reviewed and approved our organization's 2016/17 Quality Improvement Plan



Mr. Edward Sellers
Board Chair



Ms. Karen Wensley
Quality Committee Chair



Ms. Michelle DiEmanuele
Chief Executive Officer



Dr. Dante Morra
Chief of Staff



Ms. Kathryn Hayward-Murray
Chief Nursing Executive