

Let's Make Healthy  
Change Happen.



# 2023/24 Quality Improvement Plan (QIP)

## Narrative for Health Care Organizations in Ontario



Trillium  
Health Partners

Better Together

Date last Updated: **March, 2023**

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

## Overview

Trillium Health Partners (THP), is committed to delivering the highest quality of care and exceptional experiences for patients, families and visitors. Entrusted with providing care to a growing and diverse community, THP is continuously seeking new ways to improve the quality of our services. We are proud to present our Quality Improvement Plan (QIP) for 2023-2024, focusing on our acute care commitments through three main hospital sites and the Reactivation Care Centre; and our long-term care (LTC) goals for our 21 LTC beds at the McCall Centre for Complex Continuing Care at our Queensway site.

To guide improvement in quality, access, and sustainability at THP, we look to our quality model that is predicated upon high reliability built into all processes and services; delivery of exceptional experience with a lens on people-centred care, evidence-informed leading practices, and innovation; and a continual drive for excellence and improvement. Driven by our strategic plan, our quality model and our commitment to the community we serve, the QIP indicators we have committed to represent key areas of focus across the patient journey including operational effectiveness, patient experience, people engagement, and sustainability. QIP indicators ensure that all staff, professional staff, volunteers and learners contribute to achieving our goals, and they maintain priority on identified areas for improvement; specifically, patient experience, equity, pressure ulcers, and wait times.



In 2023-24, we are maintaining crucial indicators of access and quality and updating our targets. We will streamline priorities and manage the pace of change, while placing focus on safety and patient services.

### 2021-2022 by the numbers:

**1,711,698** Patient visits  
 ↑ 56,372 from last year

**828,244** Outpatient clinic visits  
 ↓ 83,988 from last year

1,397  
Beds\*

56,544  
Surgeries  
 ↑ 9,975 from last year

675,037  
Diagnostic services  
 ↑ 105,482 from last year

**208,417**

**63,938**

Emergency visits  
 ↑ 34,878 from last year

Inpatient admissions  
 ↑ 6,067 from last year

520  
Patient transfers  
 Due to COVID-19

**8,162** Births  
 ↑ 480 from last year

10,619  
Staff

1,430  
Medical & Professional Staff

2,225  
Learners

3,276  
COVID-19 patients  
treated  
 ↑ 1,528 from last year

172,165  
COVID-19 tests  
conducted  
 ↑ 107,287 from last year

528,881  
COVID-19 vaccines  
administered (total)  
 ↑ 462,512 from last year

## Patient/Client/Resident Engagement and Partnering

The delivery of high quality care and exceptional patient experience is a key priority for THP. We use a multi-faceted approach to seek feedback, identify opportunities, and improve the patient experience by utilizing quantitative and qualitative data to inform action planning. Every major project we embark on and every major decision we make involves a patient voice at the table. Our 2019-2029 Strategic Plan that sets the course for THP for the next ten years was the result of extensive engagement with over 180,000 people inside and outside our hospital walls. It reflects the voices of this community and what matters most to them about their health care.



Across the hospital, Patient and Family Partners provide guidance from the corporate to clinical program level. Patients and families contribute recommendations on quality and patient experience concerns through engagements on councils and committees (e.g. Patient and Family Partners are on our Board of Directors and our Senior Leadership Team), on project teams, and through other feedback processes. Currently, THP has over 60 registered Patient and Family Partners that participate at decision-making tables and/or are a part of key inter-professional strategic initiatives. We continue to grow this network of Patient and Family Partners to ensure we have inclusion and representation of the

diverse community we serve.

As part of advancing our strategic plan, we regularly engage patients and members of the community; for example, we host extensive town halls as part of the development of our multi-generational Trillium HealthWorks redevelopment initiatives and the accelerated build of a new LTC home. However, no change is too small: every day we engage with patients and their families on how their care is managed and delivered through leader rounding and seek opportunities for improvement. Currently, Patient and Family Partners are members of QIP working groups and are active participants in the design and change process. They support the review of indicator performance data and provide input to help inform action plans development and implementation of change ideas.

Patient and Family Partners are embedded in key initiatives organization wide. For example, in preparation for THP's on-site Accreditation Canada survey (June 2023), the refresh of all in-room patient whiteboards was supported by an engaging and collaborative effort to drive change and improvement. Project team members and Patient and Family Partners worked together to help design the in-room patient whiteboards in a way that would best meet the needs of patients and families, and created an exciting pulse in anticipation of the standardization of whiteboard use at the point of care. Patients and families were asked to provide feedback on the whiteboard's current use, including opportunities for improvement on the design and utility of the boards to better meet their needs. Their feedback has been

incorporated into the design of whiteboard templates, including customizations such as visual icons, headings, and a section that can be used by patients and families to communicate with their health care team.

## Provider Experience

In October 2022, THP launched *Foundations of Clinical Excellence*, a commitment to excellence in the delivery of safe, high quality health care matched with an exceptional experience for every person, every time. Excellent care is designed around the needs of patients and their loved ones, delivered in timely, safe, and effective ways by talented staff and teams. *Foundations of Clinical Excellence (Foundations)* was created using lessons learned throughout the COVID-19 pandemic and is anchored



by the quality model laid out in our strategic plan. It is designed to help us standardize, achieve, and continue to exceed quality benchmarks for patient care. In our inaugural year of Foundations (2022-23), we will focus our preparation for the survey with Accreditation Canada being conducted in June 2023, refresh key enabling practices within the hospital that are focused on best practices in quality and patient safety, and stabilize our workforce.

We recognize the toll the pandemic and lasting capacity challenges have had on our staff. In October 2022, we launched the Count Me In: Opinion and Demographic Survey as a means of engagement, and to understand the experience of all staff and professional staff. Feedback from our people is integral to informing opportunities for continuous improvement, shaping how we achieve exceptional patient experiences, and to building an inclusive environment that leaves no one behind.

To highlight some important opportunities, we prioritized the following initiatives:

- In the 2022 calendar year, THP actively filled vacancies for nurses (1,510 RNs, 669 RPNs), professional staff (207) and allied health staff (781). In addition, we grew the number of clinical externs (335) and internationally educated nurses (67).
- In developing new online tools for staff to clear themselves to return to the workplace following a COVID-19 illness, THP expedited the return to work process to help address staffing shortages seen across the clinical platform in reoccurring COVID-19 waves.
- We initiated a clinical staff support program, whereby enabling staff (on a voluntary basis) were able to complete supportive duties on the units, releasing time for clinical staff to provide care.
- In collaboration with the Mental Health Commission of Canada, THP began a phased approach to providing Mental Health First Aid certification to all staff in leadership roles.

We supported the wellness of our teams through our 24/7 Employee & Family Assistance Program, peer support, connection carts, and activities led by volunteers who wanted to give back to their colleagues.

## Workplace Violence Prevention

At THP we aspire to create a healthy, safe and respectful environment for healing that is based on our values of compassion, excellence, and courage. Since 2018/19, THP has maintained workplace violence as a QIP indicator with the target of improving reporting culture. Reported incidents of abusive behaviours towards staff, professional staff, learners, and volunteers across the health care sector have risen, particularly during the pandemic. In May 2022, THP, along with many hospitals in the GTA came together to show their collective commitment to creating a healthy, safe, and respectful hospital environment including focusing on mitigating the risks of workplace violence.

While the reasons for workplace violence incidents are complex, THP has processes and policies in place to keep advancing our commitment to workplace safety so that staff are able to come to work and care for patients and each other in an environment where they feel secure and supported. The Joint Health and Safety Committee comprised of a cross-section of staff and leadership representatives in conjunction with safety specialists, continues to monitor reported incidents and identify improvement opportunities. Furthermore, in 2022, THP's workplace violence QIP working group was engaged to identify proactive strategies to reduce the overall impact workplace violence incidents have had on our people, patients, families, and community.



The reporting of workplace violence incidents through our electronic incident reporting system is embedded in our practices for staff, professional staff, learners, and volunteers. Through continuous education and support, we anticipate there will be an improvement in the awareness and importance of reporting workplace violence incidents. Workplace violence incidents are reviewed and analyzed regularly to ensure the appropriate level of support is provided to those involved, and that the right level of action is taken to address the situation in order to prevent similar incidents from happening again. To help further support people of THP, we have augmented many of our wellness programs to respond to these times where reports of workplace violence incidents is more prevalent. Such supports include additional resources and tools created with input from staff councils, the Professional Staff Association, and union partners; a comprehensive review and investigation into incidents by safety specialists, enterprise risk, patient care services and other partners as required; and scheduled wellness check-ins with leaders to learn from our staff about their ideas for improvements we can make at THP.

## Patient Safety



THP is committed to driving continuous quality improvement for the care of our patients through fostering a just and safe culture that promotes openness, honesty, and fairness. We prioritize providing a safe environment for every staff member, professional staff member, learner, volunteer, patient, and visitor who walks through our doors. THP recognizes that safety is everyone's responsibility and our goal is to ensure that no one is harmed through an unintended event when receiving care, visiting, or working in our hospital.

Patient Safety concepts are part of the annual mandatory training for all THP staff, and are a component of Inter-professional Orientation for new staff. In the event a patient experiences harm while receiving care in the hospital, we identify and report the incident, manage immediate patient care needs, disclose the incident to the patient and/or their substitute decision maker, and we investigate further. THP's incident analysis process is based on the Canadian Patient Safety Institute's Incident Analysis Framework, and represents a commitment to patients and their families to determine what happened, how and why it happened, and how we can prevent it from happening in the future. This allows us to identify opportunities to enhance patient safety across all three of our sites.

We disclose patient safety incidents as soon as reasonably possible. The disclosure consists of a discussion of what happened, any resulting consequences to the patient, and actions taken to prevent similar events in the future. This conversation is documented in the patient's health record. Patients and families are contacted by Patient Relations when there is an incident deemed critical, to obtain their feedback and to address any questions. The patient voice is included in our investigation and analysis, and we explore health equity considerations in our investigation.

Learnings from incident analyses are captured, shared, and embedded throughout the organization. Following an incident analysis, recommended actions developed are shared with the patient or substitute decision maker, staff who participated in the analysis, several committees that support care quality including our Quality, Experience and Practice Committee (QEPC), the Medical Advisory Committee, Senior Leadership including the CEO, and the Board Quality and Program Effectiveness Committee (BQPEC). Information regarding our patient safety incident process, its learnings, and aggregate data / trends from critical incidents are reviewed and monitored on a regular basis by the QEPC and the BQPEC. To support broader system learning, critical incidents involving medications or intravenous fluids are shared via reporting to the National System for Incident Reporting. Incident recommendations that have broad reach within THP are shared through practice alerts or other communications to appropriate provider groups. For example, a nursing practice quality improvement monthly learning series for our Nursing Advisory Committee is used to identify nursing practice opportunities arising from incident analysis trend data and themes that have been prioritized for review. These themes are further analyzed to gain better understanding of contributing factors and to develop recommendations for system-level

improvements. In the coming year we will relaunch our "learning from patient safety incident" quarterly education series that was paused during the pandemic.

At THP, we recognize that patient safety incidents can potentially be stressful for everyone involved. As a result, we provide additional support to patients and families through Patient Relations, and to staff through the Employee and Family Assistance Program (EFAP), OMA Physician Health Program (PHP), and the Professional Staff Association's Doc2Doc Peer Support Program.

## Health Equity

THP is proud to serve one of the most diverse communities in the world; according to Statistics Canada approximately 69% of individuals in Peel identify with a racialized group, compared to just 34% of Ontarians, highlighting the importance of an inclusive approach to health system planning, service delivery and monitoring of health across the community. We offer a full circle of care to a massive, growing, and diverse community – the perfect environment in which to test, study and perfect new ways to manage health and health care.

Building capacity to continue to deepen our understanding of health equity in the community that THP serves is a cornerstone of how we think about and approach quality and care in our organization. While we are continuing to create necessary knowledge, data, system and structures to continuously improve health equity in our community, there are several areas of investment and progress.

Aligned and embedded within THP, the Institute for Better Health (IBH) is pioneering a new kind of research and innovation that discovers novel and unique ways to improve health care and health at the community level, resulting in better outcomes and experiences for all. IBH research seeks a deeper understanding of the nature of health and social problems in our community to shape and test transformative innovations by working with our patients, families, residents, providers, staff, community members and beyond. IBH has key researchers supporting health equity, population health and epidemiology not just at THP but across the province. Highlights of their work include evaluating the impact of Ontario Health Teams (OHTs) and co-leading a provincial program to support OHTs in adopting a population health management framework.

The research project, *We are all accountable: Collective action through data to co-design a more equitable and integrated health system in Peel Region*, used a novel approach to data integration and population health analytics through a community-based participatory research approach to centre the community's priorities and needs in the area of data and health equity. The project team worked alongside THP leadership and Peel's Anti-Black Racism and Systemic Discrimination Health Care Committee to begin exploring the question: How can healthcare and community organizations collectively and safely collect and integrate individual-level data that capture the social determinants of health from across sectors (e.g. health and community organizations) to close critical data gaps needed to address persistent and growing health inequities in the Region of Peel. The team is currently planning a health equity forum for fall 2023 to share findings with key stakeholders.

Currently, THP is in the early phases of initiating a population health strategy, including the development of a framework to guide our approach, learn more about the diverse patients we serve and ultimately help reduce health inequities. This work began with an analysis of our population to inform our Mississauga OHT and then following the onset of the pandemic an assessment of data on deferred care due to COVID-19, and opportunities to advance pandemic recovery in the community. The population assessed was described based on features which included postal code and Ontario marginalization index which measures levels of deprivation. The purpose of this work was to raise awareness, learn about factors impacting outcomes, learn more about health inequities experienced by patients, and enable a strategic discussion of approaches to address population differences.

THP's Regional Cancer Program has partnered with OHTs and community organizations across the region, including community health centres and newcomer services, to inform our cancer screening strategy. A population-based approach has been designed to understand the needs of priority populations within the region and tailor strategies to spread cancer screening awareness and advance health equity. Engagement with, and feedback from, community partners has reinforced that equity based, culturally relevant approaches are key to increasing the understanding of cancer screening. The Regional Cancer Program has developed a Cancer Screening Toolkit, which has been translated into 9 different languages and launched into the community, via Knowledge Transfer Events, to approximately 80 community ambassadors employed through multiple community organizations. Community ambassadors are using the toolkit to champion cancer screening with priority populations via engagements at community centres, faith-based groups, health promotion events, and multiple other avenues. Through ongoing work with the OHTs and community organizations, and feedback from the community, the cancer screening strategy will continue to be evaluated and developed with a target to demonstrate equitable screening rates exceeding provincial average.

To further demonstrate our efforts in supporting a diverse community, Language Services, both verbal and written, through trained medical interpreters are offered to all programs and services across the organization. This service is intended to bridge communication gaps that may be present between health care providers, patients and their families when working with a Limited English Proficient patient. In February 2023, THP proudly introduced a Language Concordant Care strategy via a new 24/7 virtual interpretation service that instantly connects health care providers with specially trained interpreters by phone or video in *real-time* in 240 languages, including American Sign Language and Indigenous languages such as Cree and Ojibwe. This interpretation service is accessible on THP's Epic digital platform, IPADs and mobile phones. This initiative demonstrates THP's commitment to ensuring we not only meet the needs of the diverse community we serve, but that we strive to achieve the highest quality and standard of care for our patients.

As an organization, THP is committed to dismantling racism and integrating anti-racism, diverse, equity and inclusion best practices in our work to create a better, more inclusive tomorrow.



## Executive Compensation

All executives and leaders at THP have a portion of their Performance Based Pay tied to the quality indicators outlined in the QIP. With oversight from the Board of Directors, the leadership team is held accountable for the overall performance of the organization through quarterly reviews of these priority targets, along with formal annual performance reviews.

## Sign-off

I have reviewed and approved our organization's 2023-2024 Quality Improvement Plan:



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Karli Farrow  
*Chief Executive Officer*



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Dr. Dante Morra  
*Chief of Staff*



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Terri Irwin  
*Chief Nursing Executive*



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Christine Magee  
*Board Chair*







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David Allgood  
*Board Quality Committee Chair*

# Fiscal Year (FY) 2023/24 Acute Care Quality Improvement Plan

Goal		FY 2023/24 QIP Indicator	QIP Indicator Target	QIP Indicator Target Justification
We will maintain our sustainability through efficient care practices resulting in a balanced budget		Hospital Total Margin (GAAP)	Better than or equal to -4.9% (-\$66.8M)	Maintain Stability
We will sustain access to our services by managing the time to inpatient bed for admitted patients		Time to Inpatient Bed (90 <sup>th</sup> percentile)	≤ 39.5 hours	Improvement from prior year performance
We will improve the experience of patients and families who trust us with their care		Patient Experience Survey Results: "Would you recommend this hospital to your friends and family?"	≥ 80%	Improvement from prior year performance
We will continue to improve the safety of care we provide by focusing on two core clinical practices: medication reconciliation upon discharge and pressure injuries		Pressure Injuries Incidence Rate	≤ 5.4%	Maintain performance better than national average
		Medication Reconciliation at Discharge	≥ 85%	Maintain performance
We will focus on the safety of our staff through continued engagement and awareness of a healthy and respectful workplace		Increase reporting of Workplace Violence (WPV) incidents	≥ 805	Improve reporting culture against prior year's submitted incident reports
We will engage our staff to provide the training, tools and resources to deliver the highest quality of care with exceptional experiences		People Engagement: • Anti-Black racism mandatory learning	Full compliance (≥ 90 %)	New
		People Engagement: • Opinion Survey	≥ 66.7% Grand Driver Average	Improvement from prior year performance

# Fiscal Year (FY) 2023/24 Long Term Care Quality Improvement Plan\*

Goal		FY 2023/24 QIP Indicator	QIP Indicator Target	QIP Indicator Target Justification
We will continue to provide preventive care and timely access to required services for our residents resulting in reduced ED visits.		Number of Emergency Department (ED) visits for modified list of ambulatory care sensitive conditions per 100 long-term care residents	< 12%	Maintain performance
We will improve the experience of patients and families who trust us with their care and increase overall satisfaction of residents		Resident Survey Results - "I would recommend this site or organization to others"	> 80%	Maintain prior performance and align target with THP Acute QIP Patient Experience indicator
We will continue to improve the safety of care we provide by focusing on two core clinical practices: medication administration and pressure injuries		Percentage of residents receiving antipsychotics without a diagnosis of psychosis	< 17.3 %	Maintain performance better than CIHI average
		Percentage of residents who developed a stage 2 to 4 pressure ulcer or had a pressure ulcer that worsened to a stage 2, 3 or 4 since their previous resident assessment	< 2.0 %	Maintain performance better than CIHI average

\* The LTC QIP applies to the 21 beds at the McCall Centre owned by THP, and operated by Extendicare