



Oak Valley
Health

QUALITY IMPROVEMENT PLAN

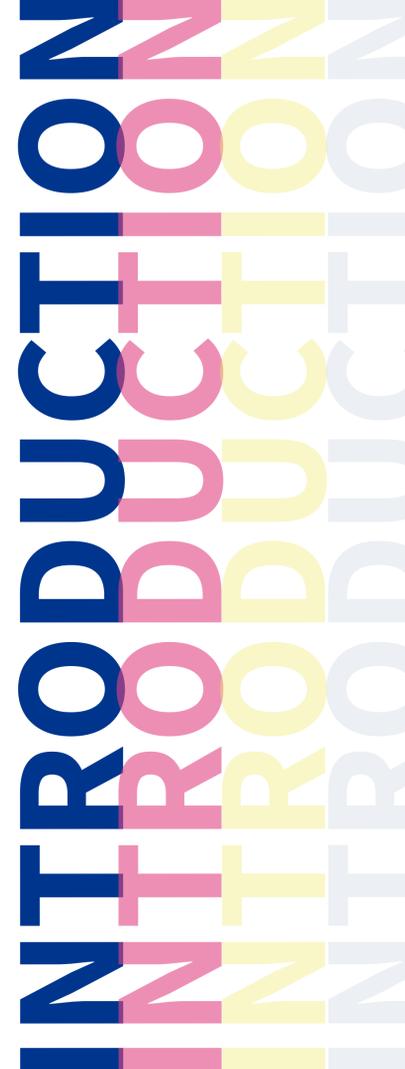


QIP NARRATIVE

2022/23 FISCAL YEAR



Honoured to care



Oak Valley Health is pleased to share its Quality Improvement Plan (QIP) narrative. This report provides a brief introduction to our organization’s reflections of the past year, and outlines the key priorities in quality improvement in the upcoming fiscal year 2022/23.

Oak Valley Health is one of Ontario’s leading community health systems. Across our two hospitals, Markham Stouffville Hospital (MSH) and Uxbridge Hospital (UXB), as well as our Reactivation Care Centre (RCC), we provide high quality, patient-centred care to more than 474,000 patients each year. We offer diagnostic and emergency services and deliver clinical programs in acute care medicine and surgery, addictions and mental health, and childbirth and children’s services. We are proud to be part of the Eastern York Region North Durham Ontario Health Team (EYRND OHT).

Our 489 physicians, 28 midwives, over 3,000 staff and over 750 volunteers serve patients and families with an honoured to care mindset and are focused on delivering an extraordinary patient experience to the residents of Markham, Whitchurch-Stouffville, Uxbridge, and beyond.

Through collaborative efforts, we will enable a safer patient-led healthcare service, making it easier for patients and families to navigate the healthcare system. Our efforts are driven by our pledge to serve our community by providing care within and ***beyond our walls.***

REFLECTIONS FROM THE PAST YEAR

— Impact of the pandemic on our community

Health systems across the globe have faced unprecedented strain and uncertainty during the pandemic. The persistence of COVID-19 has also been unexpectedly long, testing our health system and its health human resources. Despite this, Oak Valley Health continued to respond rapidly, making changes to services and continuing to meet the needs of our community. When the pandemic started, many active improvement efforts, such as work outlined in our annual Quality Improvement Plan, were disrupted as we turned our immediate attention to safely providing care to our patients, while maintaining high care standards for all. Like many hospitals, we grappled with determining how to balance existing quality improvement work with our new challenges.

It has been a very long and hard journey; however, we have a number of successes to celebrate. These include:

- The COVID-19 Vaccination Centre – After administering more than 270,000 vaccinations, the COVID-19 Community Vaccination Centre at Cornell Community Centre closed its' doors in March 2022 due to a decline in demand. Many incredible health care workers stepped up to fight the pandemic and keep the community safe by administering vaccinations to the community during the 56 weeks the COVID-19 Vaccination Centre was open. This centre was the largest mass vaccination clinic in York Region, operated by staff and physicians from Oak Valley Health, community service groups, and local family physicians from the Eastern York Region North Durham Ontario Health Team.
- Clinical Assessment Centre – Initially implemented and known as the COVID-19 Assessment Centre to address emerging COVID-19 testing, services have now evolved to include assessment, testing, and treatment for individuals with respiratory symptoms.



Figure 1. COVID-19 Community Vaccination Centre closing celebration event

- Language Services – During the pandemic, while visitor restrictions were in place, the impact on patients who did not speak English was pronounced. Thus, the organization accelerated plans to develop a multi-pronged Language Navigation Program (Figure 2) to ensure safe, patient-centred, equitable care to help meet the needs of our community. To-date, a tremendous amount of work has been completed; however, we look forward to growing the program to meet its full potential in the foreseeable future.

“Patients and their families are so appreciative of this service. They feel less stressed and more comfortable asking questions.” What stands out the most to Alice when she’s providing interpretation services is being able to see patients understand what the doctors and nurses are saying. “Being able to express the patient’s or family’s concerns and ask questions enables them to make informed decisions on their treatment plans.”

Alice Mau, On-site interpreter



Four key elements:

- **Professional interpretation services**
- to meet clinical, spoken language needs
- **Basic conversational interpretation**
- to meet non-clinical, spoken language needs
- **Translation services**
- to meet clinical and non-clinical, written language needs
- **Evaluation and evolution**
- to meet the diverse needs of our patients

Figure 2. Oak Valley Health Language Navigation Program Framework

Before the pandemic, our organization has had a robust quality improvement (QI) program with multiple ongoing efforts focused on optimizing patient care, reducing variation, and improving the patients’ experience. As we look ahead to the upcoming fiscal year, we are determined to balance our focus on pandemic activities while maintaining momentum and advancing important QI work. We are committed and truly excited to live our “honoured to care” mission as we continue to provide care within and “beyond our walls”.

Provider experience

Throughout the course of the pandemic, our staff continued to provide care for patients despite exhaustion, personal risk of infection, and fear of transmission to family members. Without a doubt, the pandemic has had an enormous impact on health care providers and the long-term effects remain to be seen. It has been noted that elevated burnout and other indicators of stress are anticipated to persist long after the pandemic. In addition, staffing capacity issues will require ongoing attention as the organization continues to deal with the pandemic and its impacts, including a backlog of service delivery. Responding to these issues has demonstrated the need to consider different solutions to address staffing needs, including mental health and wellness.

- To maintain employee morale, staff and physician wellness supports were augmented in the organization to offer mental health and wellness services including unit debriefs, group mindfulness practices or one-on-one counseling. The organization will continue to re-invest in our people by engaging them, caring for them and building morale through our "Healthier Together" initiatives - a new way of thinking about staff and physician wellness and engagement that will help us develop a culture of psychological safety.
- To enhance recruitment and retention efforts, human resource strategies now includes an expanded employee referral program, updated job interview questions and toolkit with an inclusive lens, and an enhanced bursary program to invest in talent development.
- To inspire the best of teams and support optimal team dynamics and quality improvement, a 12-session *Quality & Patient Safety Expert Speaker Series* was hosted with esteemed experts in quality, patient safety, and human factors. The organization will carry on with our "Safer Together" initiatives, some delayed during the pandemic, to ensure we continue to build a supportive learning environment that implements improvements leading to safer patient care while fostering a just culture.

As the organization reflected on what we have learned over the past two years, it was clear, providers have all experienced this pandemic differently and faced slightly different challenges, whether it was at home or at work. However, there were overwhelming themes of teamwork and a sense of togetherness, as well as hope, recovery and embracing of a "new normal".



“I think these past two years working in ICU, I’ve learned how much teamwork goes into looking after our patients and how much the rest of the hospital jumped in to help us throughout multiple waves of COVID.”

Diane Schmidt, RN, ICU



“What I’ve learned is that the disproportionate effect of the pandemic on the marginalized and racialized groups in our country will have a fallout for a long time to come. So I think what we can learn is that the best way to move forward is to find common ground and that equity, diversity and inclusion is really not optics. It’s probably the best way for us to become stronger together after this pandemic.”

Dr. Jeya Nadarajah, Infectious Disease Specialist

PATIENT & FAMILY PARTNERING AND RELATIONS

— Partnering with patients

Listening and learning from our patients, families, and community members are important parts of our ‘*honoured to care*’ culture. Our team of Patient Experience Participants (PEPs) are specialized volunteers ingrained within our organization who share perspectives and provide input on decisions that improve quality of care. PEPs represent the patient voice on organizational councils, committees, working groups and hospital events.

The onset of the pandemic required the organization to make significant changes very quickly to address the patient care needs associated with this public health crisis. Although planned QI work and committees were paused, modified, and re-scoped throughout the pandemic, our PEPs continued to support our QI efforts. They pivoted with the teams and informed the work through remote options, such as, teleconference and videoconference. We recognized that this form of engagement is not optimal; however, during this extraordinary time, we remained committed to continuing to infuse the patient’s voice into all aspects of organizational practice and operations as a driver for improvement. As public health measures evolve, our methods of engagement reverted back to in-person activities. For example, PEPs conducted mock tracers in person, as the restrictions lessened. As we continue to move through the pandemic we look forward to finding new and different ways to engage with patients.



As recently expressed by Jacquie, one of our Patient Experience Participants (PEP) and long time community member, “As we know, health care has never, I would argue, in our lifetime been more challenged than over the course of the past two years. COVID-19 has taken us in directions that most of us could not have imagined. And, through it all, members of the Oak Valley Health team have been there for us - day in and day out - and our collective appreciation has been rightly galvanized and expressed.”

Family and caregiver experience

Delivering an extraordinary patient experience is an important pillar of Oak Valley Health’s Strategic Plan, with a promise to provide exceptional care for our patients and families. Recognizing that patient experiences are a rich source of information about the performance of our health system, we continuously monitor feedback from our patients and families in order to make improvements.

Undeniably, the pandemic has significantly impacted patients and their families, particularly with visitor restrictions limiting loved ones’ involvement in care. Our Family Presence policy has experienced the most drastic changes, and continues to evolve under the guidance of Healthcare Excellence Canada, a new organization with a relentless focus on improving healthcare, with – and for – everyone in Canada.

Throughout all of the challenges posed by the pandemic, we have strived to maintain a balance between patient, staff and public safety, while still honouring our Patient-and Family-Centred Care (PFCC) principles. The implementation of unique programs to support patients and families over the past two years has included Virtual Visiting, Compassionate Rounding, Messages of Love, Visitor Navigation and most recently the new Essential Caregivers Program.

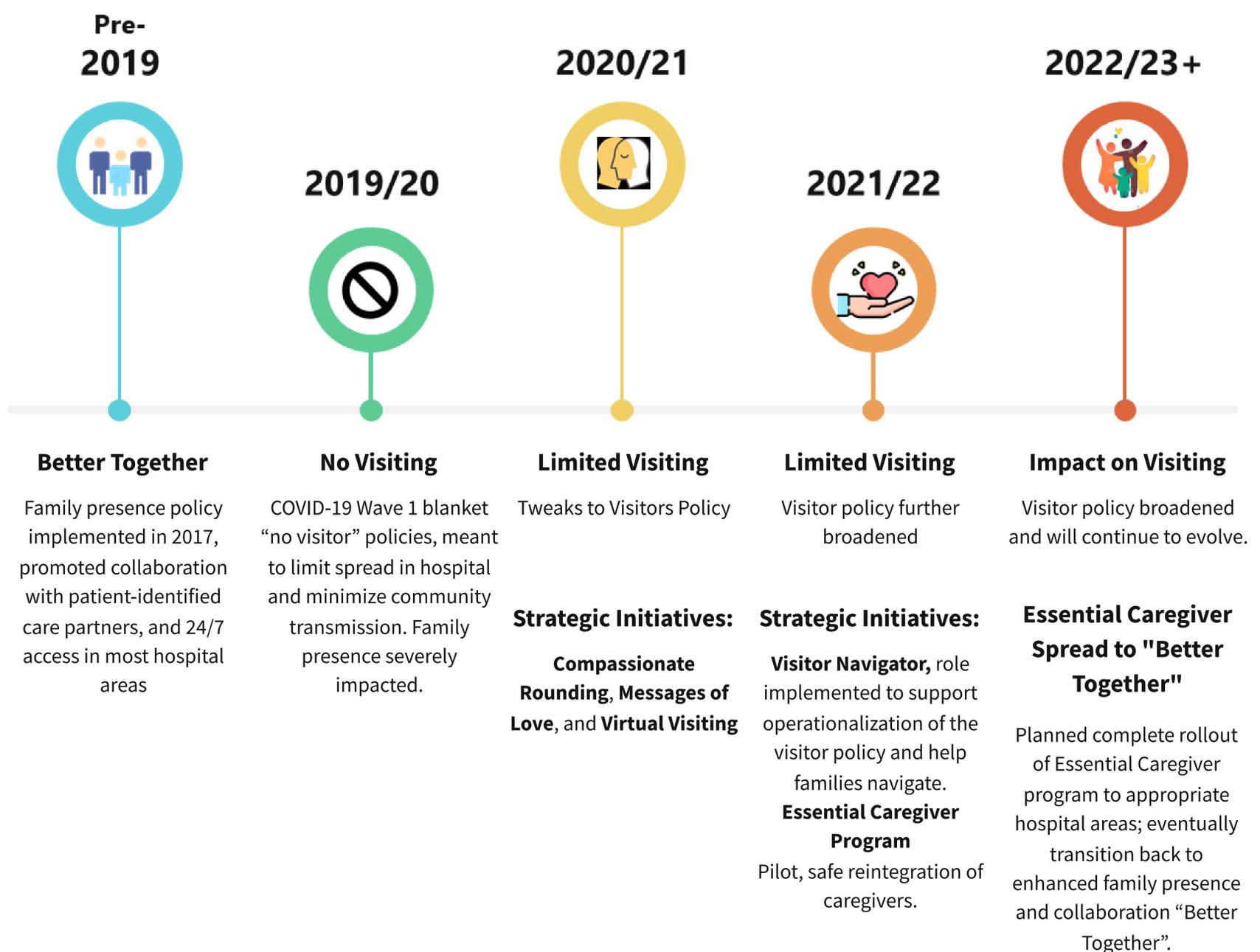


Figure 3. Evolution of family presence at Oak Valley Health

OUR 2022/23 QIP INDICATORS

— Our focus and initiatives

Oak Valley Health is on a continuous journey of learning and improvement. As outlined in the Excellent Care for All Act (ECFAA), we develop and publicly post our QIP to demonstrate our quality commitments to our patients, staff, and community, on an annual basis.

For the 2022/23 QIP, an engagement strategy including a survey was conducted to involve staff, physicians, PEPs, volunteers, students, and community members in identifying areas of focus. In conjunction with aggregated data from patient safety incident reporting, patient surveys, and patient relations, 247 survey responses were utilized to develop the QIP indicators for Oak Valley Health in the 2022/23 fiscal year.

Aligned with Ontario Health's *Quality Priorities for the 2022/23 Quality Improvement Plans*, Oak Valley Health will focus on quality improvement indicators targeting the following three themes:

- 1) Timely and effective transitions
- 2) Patient experience
- 3) Safe and effective care

— Priority 1: Time to inpatient bed

A high-quality health system manages the patient journey and hospital flow while providing people with the care they need, when and where they need it. When patients arrive to the hospital and require an inpatient bed, it is important that this occurs in a timely manner. This indicator has historically been a priority indicator for hospitals across Ontario and continues to be a priority for us. Our 2022/23 target is to reduce the time a patient waits for an inpatient bed.

— Priority 2: Patient communication

Tracking and understanding patient experience is an important element of quality. Based on our current patient experience data, and our QIP engagement survey, there was a decrease in respect and dignity perceived by our patients over the past year. The focus of this year will be to better understand the underlying issues and opportunities such as upskilling and simulation training so that we can do better for our patients.

— Priority 3: Workplace violence prevention

Ontario Health has identified workplace violence prevention as a priority indicator for hospitals. We strive to maintain a safety culture which ensures that all staff, physicians, patients, families, students, and volunteers feel safe from threats and acts of harm, including workplace violence. As our reporting culture is already well established, our target for the 2022/23 fiscal year is to reduce the number of workplace violence incidents.

— Priority 4: Falls reduction and injury prevention

At Oak Valley Health, we recognize that many falls are predictable and preventable. For those that are not, we aim to proactively prevent and/or decrease injuries from a fall, recognizing that competent individuals have the right to take risks (i.e. make decisions or take actions that may increase their risk for falls). Our target for the 2022/23 fiscal year is to reduce the number of harmful falls.

EXECUTIVE COMPENSATION

ECFAA requires that the compensation of the CEO and other executives be linked to the achievements of performance improvement targets laid out in the QIP. The purpose of performance based compensation related to ECFAA is to drive accountability for the delivery of the QIP, enhance transparency, and motivate executives.

The following indicators were selected to be linked to executive compensation as they reflect our commitment to providing a safe environment for our staff as well as providing safe, high-quality, patient-centered care for our patients:

- 1. Time to inpatient bed:** Time interval between time of admission decision to time patient leaves the emergency department for admission to an inpatient bed or operating room. **TARGET: ≤19.6 hours**
- 2. Patient Communication:** Opportunities to improve patient communication. **TARGET: Collect baseline**
- 3. Workplace Violence Prevention:** Number of workplace violence incidents reported by hospital workers (as defined by the Occupational Health and Safety Act) within a 12 month period. **TARGET: ≤ 264 incidents**
- 4. Falls reduction and injury prevention:** 12 month rolling average of rate of harmful falls per 1,000 adjusted patient days. **TARGET: 0.80**

The executives who will participate in the QIP executive compensation program for 2022/23 are:

- President and Chief Executive Officer
- Chief of Staff
- Vice President, Clinical Programs and Chief Nursing Executive
- Vice President, Finance and Operations
- Vice President, Planning and Transformation
- Chief, Communications and Public Affairs
- Chief, Human Resource Officer
- Chief, Technology and Privacy Officer

The achievement of the annual QIP indicators outlined above account for 15 percent of the total performance based compensation for the CEO and executives listed above.

— Sign off

I have reviewed and approved our organization's 2022/23 Quality Improvement Plan.

Mike Arnew

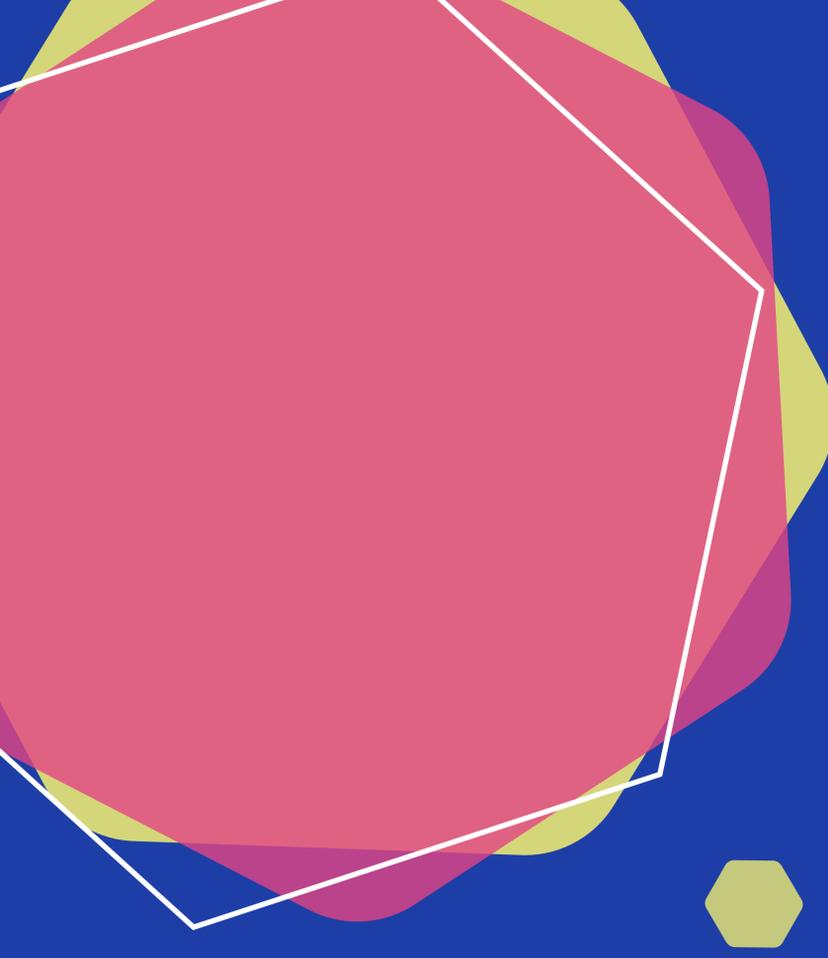
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