

Let's Make Healthy
Change Happen.



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



3/3/2020

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

Temiskaming Hospital is pleased to share its 2020-2021 Quality Improvement Plan (QIP), which outlines quality improvement efforts for the upcoming fiscal year.

A QIP is a public, documented set of quality commitments that a health care organization makes to its patients, staff and community on an annual basis to improve specific quality issues through focused targets and actions.

Temiskaming Hospital is a fully accredited, 59-bed medium-sized community hospital that provides regional based programs of care for the residents of the Temiskaming District serving a population of 33,000. Temiskaming Hospital is committed to creating a teaching/learning environment for student placements and a culture of inquiry for staff and physicians. We are proud to be affiliated with the Northern School of Medicine (NOSM), Nipissing University, Northern College, College Boreal, Laurentian University and several other Ontario colleges and universities. We are also proud to provide such regional programs as obstetrics, stoke services, general surgery, and diagnostic imaging including CT Scan.

With a vision to be a role model for northern and rural health care, Temiskaming Hospital is committed, as its mission, to provide quality patient centered care, services and education close to home. New strategic pillars (Patient Centered; Staff Focused; Fiscally Responsible) are the foundation of quality improvement throughout the organization.

Organizationally grounded by our values of leadership, respect, excellence, accountability, team work, social responsibility, and safety; these values are also at the core of our Quality Improvement journey.

The 2020-2021 QIP includes a number of priority indicators and improvement ideas that are reflective of the continued work underway across the organization and focuses on priorities of engagement, integration and coordination of services, effective care and patient flow/access.

TH has aligned its Quality Improvement targets and initiatives with the following:

- *Excellent Care for All Act, 2010*
- Accreditation Canada; Standards and Required Organizational Practices
- Health Quality Ontario (HQO); Quality Standards
- *Bill 74: The Peoples Health Care Act, 2019*
- Ministry of Health; Patient's First: Action Plan for Health Care
- Safer Healthcare Now Best Practices
- Provincial Senior Friendly Hospital Strategy
- Choosing Wisely Recommendations
- Data analysis of Temiskaming Hospital's patient safety incident reports
- Opportunities identified through Temiskaming Hospital's Patient Relations activity

Temiskaming Hospital's 2020-2021 priorities include:

- Reducing repeat Emergency Department revisits for patients with mental health conditions.
- Decreasing the number of patients waiting in Hospital for Long-Term Care Home Placement (alternate level of care rate).
- Decreasing the number of inpatients receiving care in unconventional spaces.
- Ensuring discharge summaries are sent from hospital to community care provider within 48 hours of discharge.

- Ensuring patients have adequate information at discharge about what to do if worried about their condition or treatment after leaving the hospital.
- Ensuring Medication Reconciliation (Best Possible Medical Discharge Plan) is completed at discharge.
- Decreasing the number of workplace violence incidents.
- Early Identification of patients with a progressive, life-limiting illness, who would benefit from palliative care, have a comprehensive and holistic assessment of their palliative care needs.
- Reducing Emergency Department wait time for an in-patient bed.

Describe your organization's greatest Quality Improvement achievements from the past year

Temiskaming Hospital has implemented a number of successful quality improvement initiatives that impact the quality of care delivered to our patients.

Diagnostic Imaging and Specialist Clinics eReferral Project

Temiskaming Hospital is proud to have recently implemented electronic referral (eReferral) platform within the Diagnostic Imaging and Specialist Clinic Departments. This solution is also now live within a number of primary care offices who refer to the Hospital. In 2018, the North East Local Health Integration Network (NE LHIN), started work on a Ministry of Health mandate to address patient wait times by improving the efficiency of the referral process via eReferral. This solution is fully funded by Ministry of Health and is a component part of the Digital Health Playbook provided to Ontario Health Teams.

eReferral will improve wait times for patients through:

- Electronic forms containing standardized and best practice information.
- Facilitating communication between providers connected to a patient referral with secure built-in messaging function.
- Removing the risk of lost referrals, misdirected referrals, or misplaced pages of referrals.
- Reducing incomplete referrals.
- Ensuring providers are aware of all actions on the referral throughout the process; reducing concern that referral is missed.
- Ensuring providers have access to up-to-date wait time information.

Choosing Wisely

Over the past year, Temiskaming Hospital has been working towards a submission to Choosing Wisely Canada for Level 2 Designation of the Choosing Wisely Program. The Choosing Wisely program focuses on ways to reduce unnecessary patient care including the overuse of tests and procedures, improving safety and efficiency. There are currently over 300 Choosing Wisely Canada recommendations regarding tests, treatments, and procedures. A significant number of these recommendations pertain to the hospital setting. Supported by Temiskaming Hospital's Quality and Patient Safety Council, Quality of Care Committee, Medical Advisory Committee and Quality and Service Planning Committee of the Board, eight choosing wisely recommendations have been implemented.

Recommendations that have been reviewed and/or implemented include:

- Uncouple PT/INR and aPTT tests;
- Eliminate CK testing if troponin is available;
- Remove "daily lab" options from order sets;
- Remove folate testing from hospital's ordering systems;

- Stop ordering routine chest x-rays in the Special Care Unit except to answer specific clinical questions;
- Don't encourage bed rest for older persons during hospital stay unless medically indicated;
- Don't transfuse more than one red cell unit at a time when transfusion is required in stable, non-bleeding patients; and
- Don't order continuous telemetry monitoring outside of Special Care Unit without using a protocol that governs its discontinuation. (In Progress)

Timely Access to Care: Non-Urgent Transportation

Temiskaming Hospital is committed to ensuring a seamless transition for our patients when they leave the hospital by working in collaboration with our community, district and regional partners to support and coordinate appropriate non-urgent transportation in a safe, timely and effective manner.

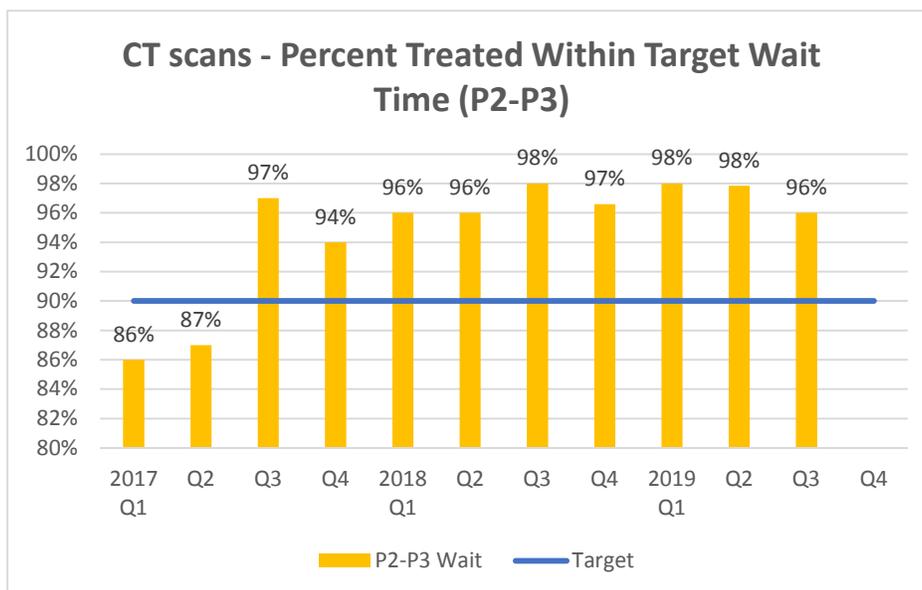
Patient flow barriers have been recognized related to the unavailability of non-urgent patient transportation resources within the community. This lack of resource has led to barriers in accessing care in a timely manner for patients who required care, treatment and/or admission to higher level of care facilities. Temiskaming Hospital, therefore, has entered into a guaranteed rate agreement with Platinum Patient Transfer Services which commenced on June 10, 2019 providing for dedicated services to ensure patients are transferred to appointments and/or health care facilities in a timely, safe and efficient manner. The positive impact to hospital patients in receiving timely access to care and staff workload is noteworthy and continues to be our focus.

Wait Time Strategy – CT and Ophthalmology (Cataract Surgery)

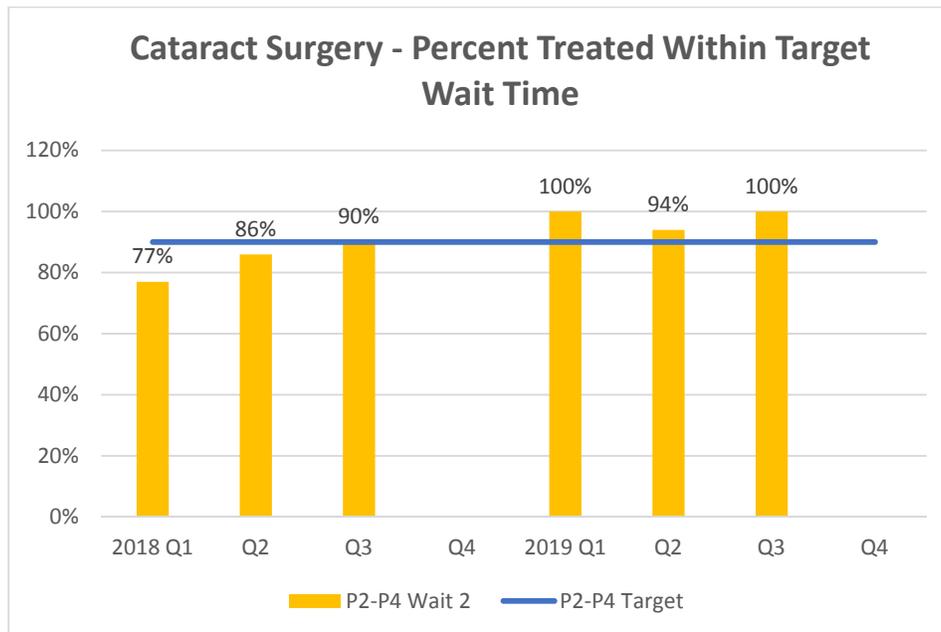
As part of Ontario's Wait Time Strategy developed to improve access key health services by reducing wait times, Temiskaming Hospital is required to report wait time performance including Cataract Surgery and CT. Through various improvement initiatives in both Diagnostic Imaging and Operating Room bookings, wait times for procedures have drastically improved. Improvement initiatives include workflow mapping and process changes to ensure patients are booked for their procedure within the target wait time. Patient are now consistently being seen within the provincial targeted wait time.

Provincial Wait Time Targets:

- CT Scans (Priority 2 and 3) = 90%



- Cataract Surgery (Decision to treat to procedure) = 90%



Collaboration and Integration

Temiskaming Hospital is continually working to improve integration and continuity of care across the care continuum collaborating with healthcare system partners. The Temiskaming Health System Collaborative Table, a sub-region planning table focusing on local health care planning and priority setting, is being transitioned into an Ontario Health Team. Temiskaming continued integration efforts with Blanche River Health by integrating the Occupational Health Nurse position in 2019.

Équipe Santé des régions du Timiskaming Area Health Team (ESTHT)

The ESTHT (originally filed as the Temiskaming Health Team) filed a self-assessment in accordance with the timelines established by the Government and was designated as In-Development. The self-assessment identified “Seniors 65 and Older” as the population of focus. Regardless of our categorization of In-Development, the ESTHT continues to operate as if it was a fully functioning and sanctioned Ontario Health Team (OHT).

The ESTHT intends to build upon the strength of the work from its predecessor, the Temiskaming Health Services Collaborative, to continue to improve health care in our communities. At this stage, the ESTHT: is verifying population data and has been able to confirm our target population; is in the final stages of developing the Terms of Reference; is developing the Working Groups to focus on initiatives to improve patient outcomes; and has committed to developing a joint Strategic Planning process, including multiple community input sessions.

The Temiskaming Hospital President & CEO and the Executive Director of the Kirkland District Family Health Team Co-Chair the ESTHT. Our team includes 28 total members: 18 Formal Members; 9 Associate Members; and 1 Supporter. Membership covers all 3 hospitals, 6 Family Health Teams, the Centre de santé communautaire du Temiskaming, 3 family physicians and 1 specialist physician, Alzheimer’s Society, Family & Children Services, Midwives, the Health Unit, Home & Community Care, Home Support, Hospice Palliative Care, Vital Aire, 3 Long Term Care Homes, a Chiropractic Centre, a

Nursing Clinic, Réseau du mieux-être francophone du Nord de l'Ontario and the Mino M'Shki-ki Indigenous Health Team.

Integrated Mental Health and Addictions System Navigator

The Canadian Mental Health Association (CMHA) - Cochrane Timiskaming, Temiskaming Hospital, and the Ontario Provincial Police (OPP) - Temiskaming Detachment have been working collaboratively to identify improvement and integration opportunities to better serve patients living with mental health concerns and/or addictions. Temiskaming Hospital and CMHA have partnered to implement an Integrated Mental Health and Addictions System Navigator role, located within the Hospital. The position which commenced December 2, 2019 is focused on improving transitions of care for patients with Mental Health and Addictions from hospital to the community setting. The System Navigator role focuses on the most vulnerable, high risk and repeat Emergency Department users with the goal to reduce Emergency Department visits while supporting a more community based recovery model; providing the right care in the right setting.

Keys roles and responsibilities of the System Navigator include:

- Support for patients with mental health and addiction conditions presenting in the Emergency Department in an effort to redirect and connect (where appropriate) to community based resources/supports as an alternative to hospital admission.
- Support assessment and discharge planning for admitted patients improving transitions of care.
- Develop common care/communication/intervention plans for high risk/high use individuals.
- Provide follow up phone calls for patient discharged from hospital and high risk patients presenting to the Emergency Department.
- Promote community based services and access.
- Further Rapid Access to Addiction Medicine (RAAM) strategies and pathways for those most in need of rapid access to addiction medicine both at the hospital and in the community.
- Make recommendation and assist in defining/develop proactive joint response with OPP, as a second phase of initiative.

Patient Partnering and Relations

Temiskaming Hospital engages with patients and families focusing on quality activities and experiences through several mechanisms including patient experience surveys, patient relations processes, focus groups and review of focus items through consultation and invitation. In 2016, Temiskaming Hospital established a Patient and Family Advisory Committee (PFAC) to identify patient and family needs and ensure priorities in aspects of care positively shaping the patient experience are addressed.

Temiskaming Hospital is looking forward to strengthening opportunities for the Patient and Family Advisory Committee to re-initiate its membership and increase awareness on how valuable patient insight, can assist in improving the care provided at Temiskaming Hospital. Additionally, Temiskaming Hospital is currently developing a Patient and Family Engagement Framework to support a culture of patient/family/staff driven care and collaboration

A number of improvements to the design of the organization have occurred over the past year including improvements to de-centralization of patient registration for a number of services, accessible washrooms, renovations in the Emergency Department to improve privacy and comfort for re-occurring non-urgent visits, and most recently renovations have begun to create a breastfeeding area, centrally located within the hospital.

Temiskaming Hospital's draft 2020-2021 Quality Improvement Plan was publically posted to facilitate transparency of development and encourage feedback from our community on priority issues, ideas for improvement and mitigation strategies.

Workplace Violence Prevention

Workplace violence is a strategic priority for Temiskaming Hospital. We are committed to building a safe, productive and healthy working environment free of violence, discrimination, harassment, and any other misconduct for its staff, volunteers and students based on mutual respect within the workplace.

Employees and leadership participate collaboratively in ensuring a safe workplace through bi-monthly joint health and safety committee meetings and monthly facility inspections. Temiskaming Hospital has a robust incident reporting system which includes reporting, review, action planning and feedback including emergency codes and safety/security incidents. The team is able to review trends in order to make necessary improvements to safety practices, policies and procedures. Flagging processes to identify patients that have had a previous incident of violent behaviour and are at risk of harming other patients or staff are in place, however the focus this fiscal year will expand to standardize identification through an 'Alert for Behavioral Care' within the patient health record (Meditech) and new Call Bell System. Temiskaming Hospital will continue training staff in workplace violence prevention and will be introducing Safe Management's Crisis Intervention Training Program this fiscal year. Gentle persuasive approaches (GPA) and de-escalation training is also provided to staff.

In the up-coming fiscal year we need to gain a deeper understanding of the root causes of workplace violence to help inform our prevention strategies. Improvement ideas include the continuance of training for all staff, implementation of organizational risk assessment focusing on workplace violence vulnerabilities, process improvements for early identification of potentially violent workplace encounters and improving patient and nursing staff communication systems including safeguards through the installation of a new call bell system and two-way, hands-free staff communication badges equipped with staff emergency functions.

Virtual Care

In order for care to be effective, it needs to be delivered at the right time and in the right setting. Being digitally enabled is a significant priority for Temiskaming Hospital with a number of advancements being made to improve care and services and ensuring health information is accessible to health providers in an efficient and effective manner. Virtual care is an important aspect of the Hospital's digital healthcare journey concentrating on ways healthcare providers effectively interact/communicate with patients remotely, allowing healthcare providers to access care specialists, use digital tools to communicate in real time and be able to provide quality health care close to home.

Temiskaming Hospital has created a Digital Health Committee to focus on develop short, medium and long-term strategy for the implementation of digital technology at the Hospital including expanding on opportunities for virtual care, with a lens on integrated and coordinated care beyond the acute care setting to the full continuum of care

Advancements made to virtual care include:

- Implementation of electronic referral "eReferral" process (OCEAN referral) in Diagnostic Imaging Department and Specialist Clinics.
- Connecting Care through Telemedicine continues, with Temiskaming Hospital's Telemedicine program reaching its highest patient volumes. As of December 31, 2019 there have been a total

of 1314 telemedicine visits this fiscal year. This is a 5.5% increase from the 1,245 visits completed last year (April-December 2019) which was a 16% increase from the year prior.

- Utilization of Virtual Critical Care: Temiskaming Hospital is a proud partner with Health Sciences North (HSN), Critical Care Services Ontario, Criticalall and the Ontario Telemedicine Network to provide Virtual Critical Care services to our patients in our community. The Virtual Critical Care (VCC) Unit (VCC) which is an initiative based at Health Sciences North (HSN) that uses state-of-the-art videoconferencing technology and electronic medical records sharing to connect HSN with smaller Critical Care units and Emergency Departments at hospitals across northeastern Ontario. In collaboration with our critical care team, the program allows a team of Intensive Care physicians, specially trained nurses and respiratory therapists from HSN to be available for round-the-clock consultations and follow-up visits for critically ill patients at Temiskaming Hospital. The goal of VCC is to enhance the diagnosis and treatment of critically ill patients, improve patient outcomes and potentially avoid the transfer of patients out of hospitals, away from their families and support systems. This system also reduces the already burdensome resource pressures in the health care system by reducing patient transfers to tertiary hospitals.

Executive Compensation

As outlined in the Excellent Care for All Act, organizations are expected to strive towards performance improvement in every aspect of implementation, including performance-based compensation. By linking achievement of targets to compensation, organizations can increase the motivation to achieve both long and short-term goals.

Our Quality Improvement Plan is approved by Temiskaming Hospital's Board of Directors and selected core indicators are directly linked to Executive Compensation.

For each of the following executives, 5% of compensation is linked to the organizations achievement of the targets set out in Temiskaming Hospital's Quality Improvement Plan:

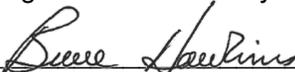
- President and Chief Executive Officer
- Chief of Staff
- Chief Nursing Executive
- Chief Financial Officer

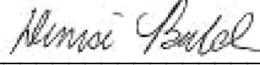
Contact Information

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Sign-off

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

Board Chair: Bruce Hawkins  (signature)

Board Quality Committee Chair: Denise Balch  (signature)

Chief Executive Officer: Mike Baker  (signature)