

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



2023/24 QIP



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OVERVIEW

Scarborough Health Network is investing in sustainable healthcare in Scarborough for generations to come. We're leveling up with new and expanded facilities, growing our world class workforce, and offering state-of-the-art care to everyone in our community. With all this and more, Scarborough has so much to look forward to.

At SHN, we demonstrate our commitment to exceptional care for our patients every day. This includes our goal of zero harm as part of our journey to become a High-Reliability Organization, and as recently recognized as a Best Practice Spotlight Organization by the Registered Nurses' Association of Ontario – a concrete reflection of the hospital's vision to be recognized as Canada's leader in providing the best health care for a global community.

While COVID-19 has created a burden on our health care systems, our hospital operations continue to innovate and transform the health experience for patients and families. Today, we remain committed to working with our patients, families, and partners to find bold new ways to provide unwavering quality, and to be a place where patients are not only physically safe, but also mentally and culturally safe.

Everyone has a vital role to play in maintaining a safety culture. We have built initiatives that improve patient as well as staff and physician safety — including workplace violence prevention, safety debriefings, adverse event prevention and improvements to incident reporting and quality of care reviews.

Looking ahead, we will focus on delivering the safest, highest quality healthcare as we contend with a post-pandemic reality and enhance our diverse and specialized services. We are optimistic about the future of healthcare in Scarborough and look forward to advancing our vision of being Canada's leading teaching community health network—transforming your health experience.

Our 2023-2024 QIP Indicators

SHN has continued to develop a Board approved QIP which is aligned with our strategy and community priorities. This year, SHN has selected seven (7) quality indicators for our 2023-2024 QIP. This set of indicators are aligned with priority areas from Ontario Health for both the hospital and community partners. As a partner in the Scarborough Ontario Health team, SHN is committed to collaborating and aligning our quality efforts with our OHT partners across the care continuum. Therefore, a focus on efficient patient flow and effective care for patients presenting with mental health and addiction concerns continues to be a focus for how we as an organization can work with community providers to ensure that patients are receiving the right care, in the right setting, at the right time. As leaders in health equity, diversity and inclusion, SHN has also decided to add a custom indicator to reflect the work done to educate staff, physicians and volunteers on this important work.

Our indicators link to the quality dimensions outlined by Ontario Health (formerly Health Quality Ontario or HQO), the provincial advisor on quality in health care. These provincially-identified issues closely match the priorities that SHN has set, and serve as a framework for the development of our 2023-2024 QIP.

Scarborough Health Network 2023-2024 QIP Indicators

Quality Dimension	SHN 2023-2024 QIP Indicator
Efficient	Conservable Beds
Equity	Number of Staff Education on Equity, Diversity and Inclusion
Patient-Centred	Satisfaction with Information on Discharge
Safe	Number of Workplace Violence Incidents
	Reduction in Rate of Hospital Acquired Pressure Ulcers per 1000 discharges
Effective	Medication Reconciliation on Discharge
	% Emergency Department Revisit for Mental Health and Addictions

REFLECTIONS SINCE OUR LAST QIP SUBMISSION

After an extremely challenging few years navigating COVID-19 and the staffing pressures that resulted from it, we remain steadfast in our commitment to exceptional care.



One Year with Epic

With over one year of Epic under our belts, we know that Epic has led to a better work experience and enhanced quality through improved communication and data—resulting in better outcomes for our patients. It has been an absolute pleasure to witness our Epic transformation, across our seven partner hospital organizations as a true regional partnership.



Accreditation 2021-2022: Quality and S.A.F.E.T.Y. Road Trip

In December 2022, SHN was accredited with Exemplary Standing in the 2022 Final Report from Accreditation Canada achieving the highest level of performance meeting 99.6 per cent of the criteria that we were evaluated on. In addition, three Leading Practices were accepted by the Health Standards Organization. The onsite accreditation survey has demonstrated that SHN provides exceptional care and services to its communities.



Best Practice Spotlight Organization

SHN has also been re-designated a “Best Practice Spotlight Organization” (BPSO) by the Registered Nurses’ Association of Ontario. SHN has implemented ten evidence-based Best Practice Guidelines that positively impact the health and well-being of our patients.



Community Partnerships

SHN is making bold strides to advance research that matters to our community with the creation of the Scarborough Health Network Research Institute, a place where researchers will apply evidence-based practices through a health equity lens to better understand the needs of Scarborough. We also began work towards a proposed Scarborough Academy of Medicine and Integrated Health at the University of Toronto Scarborough, to create an inclusive hub for education and strengthen connections among healthcare providers in the region.



Love, Scarborough

Our friends at SHN Foundation have continued to support our staff with community donations, encouragement, and vital support. Together we also celebrated the launch of Love, Scarborough – which has since become a movement, raising an incredible \$130 million and counting!



Hospital Redevelopment

Thanks to investments from the Ontario government, we are planning a massive expansion to SHN Birchmount as part of the first phase of the broader redevelopment, which will double its current capacity. In addition, we will be expanding emergency care services SHN Centenary, funding a new chronic kidney disease program at Bridletowne Neighbourhood Centre, and modernizing surgical services and expanding diagnostic imaging services at SHN General.

PATIENT/CLIENT/RESIDENT PARTNERING AND RELATIONS

From nurses and physicians, support staff and executive professionals, to patients, family and the Scarborough community, so many people are working hard to make each patient's experience the best it can be.



Partnering with Patients

SHN's commitment to partnering with patients follows a Person-Centered Care (PCC) philosophy, which signals the importance of being treated as a person first, and as a patient second. PCC encourages the patient's voice in the design and delivery of the care they receive and enables them to be more actively involved in their care.

At SHN we have a robust Patient Family Advisory (PFA) program consisting of 38 PFAs. These advisors share their lived experiences and partner with us to improve health outcomes for patients, families and caregivers by working to improve quality and safety measures for patients and providers.

This past year, PFAs were involved in many initiatives including SHN's QIP. SHN is fortunate to have corporate and department level Patient and Family Advisory Council (PFAC). All PFACs meet monthly basis to discuss key QIP initiatives and drive work plans. Furthermore, SHN has ad hoc PFAs who support working groups, councils and committees involved in clinical service planning and QI work across the organization. Some of the ad hoc work that the PFAs are involved in include:

- Participating on interview panels
- Tracer Exercises with Facilities
- Sharing their patient journey with medical learners
- Accreditation working groups (corporate and department level)
- Program Committees
- Co-creation of patient education materials

Our PFA's have played an important role continue on projects and committees to enhance our services and better support our community's needs, including:

- **Recruitment Focus Group for New CEO**
- **Hospital Accreditation** (Preparation and Survey)
- **Program Leadership Committee(s) and Grand Rounds**
- **Hospital Facilities Redevelopment**
- **Membership on the Corporate Quality of Care Committee and other Safety Committees**
- **Cardiovascular and Stroke Five Year Strategic Plan**
- **BPSO and Best Practice Guidelines; Patient and Family-Centered Care**

PROVIDER EXPERIENCE

SHN leaders and staff have worked exceptionally hard on organizational wellness, for our employees and professional staff. By helping to raise awareness and engage all employees, professional staff and volunteers in wellness activities, we strive to build a culture that empowers and inspires our people.



Supporting our People

In order to create capacity for our ongoing work and to prevent leadership and employee burnout, we consider what additional activities and resources are needed to support our leaders and their teams. The wellness specialist and team provide wellness coaching and have incorporated their Mental Health First Aid and Safe Talk certifications to assist during sessions with staff. The focus of psychological support and protection is a staple in program development for healthcare workers to encourage engagement for both staff and to support leaders in managing burnout and resilience, as we all navigate and continue to strive for a healthy workplace.

Ongoing training and developing a psychologically healthy and safe workplace aligns within the organizational wellness strategy, specifically the psychological health wellness pillar and our emotional support, provided by our Spiritual & Religious Care team. SHN wellness encourages work/life balance and solution-focused initiatives to create awareness, provide tools and resources that empower, build resilience and provide ongoing support with a progression towards improving the health and wellness of the internal community.



Wellness at SHN

SHN wellness has two committees supporting both the employees and professional staff (midwives, residents and physicians). Consisting of 48 members, 20 of those members representing our professional staff working group and 6 participate on both committees. We work collaboratively to develop, advise and monitor SHN's wellness strategic plan and follows a set of core values:

- Support each other in our journey of self-improvement
- Create a culture of self-empowerment
- Establish a “safe space” to support open and honest communication – avoid stigmas
- Address structural barriers to wellness
- Develop organizational supports to prevent burnout
- Determine ways to identify barriers and systematically address them
- Support root causes of the individual and organizational work-related factors
- Adopt a holistic approach to our internal community and program delivery



Communities of Inclusion

Communities of Inclusion (COI) are voluntary, staff-led groups that provide a safe space for support, dialogue, networking and development with the goal of continuously improving workplace inclusion. Staff, physicians, learners and volunteers are invited to join any COIs that they feel they could contribute to – SHN currently has three COIs: Blacks United in Leadership and Development (BUILD), SHN PRIDE, and SHN Helping Our Parents Excel (HOPE).



Workplace Diversity and Inclusion

At SHN, we're striving to build a culture that empowers and inspires. This means everyone feels welcomed, respected, supported and valued and able to fully participate in the workplace. We are doing this through creating awareness, providing education resources, and empowering staff-led communities of inclusion.



Personal and Professional Development Opportunities

Organizational Development seeks to 'build our culture to empower and inspire our people' by providing employees, medical staff, and volunteers with a range of standard and customized programs, supports, and resources. These include:

- Delivering LEADS-based development and mentoring programs for emerging and seasoned leaders.
- Administering mandatory training to staff in the areas of Code of Conduct and Workplace Violence Prevention.
- Facilitating organization-wide and department-specific staff appreciation, recognition and engagement initiatives and supports.
- Developing customized team interventions to identify and address issues impacting engagement, well-being, effectiveness, and service delivery.
- Producing practical resources, such as 'Leadership Toolkits' and 'Timely Tips' documents, to address issues such as burnout, staffing shortages, service excellence, conflict, and resilience.
- Providing orientation and onboarding supports to new employees and leaders.
- Supporting ongoing career development through financial assistance and Library resources.
- Promoting 'VIP Chats,' a framework for leaders to connect with staff regularly and in-the-moment on a range of topics.

WORKPLACE VIOLENCE PREVENTION

At SHN, ensuring that we have a safe and welcoming work environment is our highest priority. We enforce an environment of zero tolerance for violence and harassment with procedures for preventing, reporting and addressing incidents and supporting our staff.



Preventing Workplace Violence and Harassment

SHN is committed to improving the workplace environment for staff, professional staff, volunteers, patients and families. SHN has reviewed and incorporated RNAO Best Practice Guidelines that provide evidence-based recommendations to recognize, prevent and manage violence, harassment and bullying in the workplace. SHN has a multifaceted approach to WPV Prevention that includes a corporate steering committee with a variety of Health Care Workers including a Patient and Family Advisor, policies and procedures, capital funds dedicated to enhance the staff duress system, evidence-based tools to identify the risk of WPV from individuals and standardized tools to identify environmental risk, a robust training and education program and a comprehensive incident reporting system and follow up process. All individual incidents and incident trending are reviewed in a timely manner.

WPV reports are shared at many levels of the organization at a set frequency. There are many stakeholders in all WPV incidents including the employee, their manager and other leaders as required, Professional Practice, Human Resources, Workplace Health and Safety (WHS). All of the stakeholders that interact with this employee provides resources and support.

SHN provides the following to staff to ensure staff are trained to manage and control WPV and harassment situations:

- In-services, huddles, mocks, formal course, self-study, online
- Violence Training and iLearn Modules
- Code White Drills and Table top exercises
- Specialized training for specialized units
- De-escalation training (behaviour, environment, language)
- Crisis Prevention Intervention (CPI) Courses
- Gentle Persuasive Approach (GPA) Courses

PATIENT SAFETY

SHN continues to achieve high, quality patient-centred care through several program and corporate initiatives. Our successes have been exemplified through our ongoing focus to providing the best care possible, and ensuring the patient is front and centre throughout their journey.



Maintaining a Culture of Safety

At SHN, we are committed to our strategy of setting a New Standard for Exceptional Quality and Patient Safety. Part of this work involves building a culture of safety based on High Reliability Organization principles. High Reliability means that we are committed to achieving zero patient harm, we are focused on process improvement and we have a culture of patient safety at all levels of the organization.

As part of this work SHN has described how we manage quality and safety in the organization in the 2021-23 Quality and Patient Safety Framework. The purpose of the SHN Quality and Safety Framework is to provide a structure for our promise to “Set a new standard for Exceptional Quality and Patient Safety” and our commitment to achieve all the dimensions of quality. This framework communicates specific activities and processes undertaken by SHN to manage quality and safety. This framework is supported by the principles of a High Reliability Organization and references the Institute for Healthcare Improvement Framework for Safe, Reliable and Effective Care.



Reporting and Reviews

Our robust patient safety incident process includes a review of cases that require further investigation (i.e. never events, potential critical incidents, severe harm and death-related cases, Coroner's request, family involvement), whereby Quality of Care Reviews are conducted to assess

and evaluate the provision of health care and how make system improvements. Throughout these reviews, recommendations are then shared across other program teams to identify trends and themes to prevent future occurrence for similar events. A more recent patient safety review process has been established whereby multi-incident reviews are being conducted for all falls injury and pressure ulcer incidents. This allows for a more comprehensive and combined review to identify common trends and themes, and implement strategies to prevent reoccurrence.



S.A.F.E.T.Y. Starts with Me

As part of our ongoing efforts to streamline processes, programs also conduct safety briefings during huddles to discuss incidents, which allows an inclusiveness between leaders and their staff. It allows the opportunity for staff to feel comfortable discussing errors and being supportive when safety events take place. This then further creates a culture of safety, reducing the risk of errors, and improving the quality of care provided to patients.

We are committed to the prioritization of safety, eliminating incidents of unintended harm, while we act on and learn from errors. When we have conversations, it changes the way we think about safety.

HEALTH EQUITY

SHN is a healthcare organization that is proud to serve one of Canada’s most diverse communities with an equally diverse workforce. We strive to advance health equity and address the social determinants of health through engagement, knowledge translation and capacity building.



Patient and Community Engagement



Patient and Community Engagement

Our Patient and Family Advisory Council took the lead in developing the Patient Declaration of Values (PDoV) choosing to align to the four values in our Strategic Plan, articulating a path toward patient partnership across the healthcare system. In addition to the PDoV, our Patient Partnership Principals, in the final stages of development, will give recognition to the right for every patient to receive the highest standard of care and a pledge for fair treatment.



Equity, Diversity and Inclusion Strategy (EDI) 2022-2025

Our EDI Strategy is the next step for SHN on its journey towards real inclusion. The 2022-2025 EDI Strategy demonstrates the importance of this work and responds with a thoughtful approach and targeted goals. SHN is committed to becoming the leader in EDI in the hospital sector. This EDI strategy will be our roadmap to accomplish this goal. Building upon impressive work already underway, success will be achieved through organization-wide commitment, collaboration, courage and investment over several years. SHN will focus on four EDI goals over the next three years, as described in the diagram below.



Impressive work is already underway to accomplish our goal of becoming the leader in EDI in the hospital sector, including:

- **Health Equity Certificate Program** – certificate program is designed to empower those involved in delivering health care, to promote health and develop strategies to reduce disparities.
- **Stand Up for Health** – an immersive simulation that gives participants a better understanding and appreciation of the social determinants of health through experiential learning.
- **Anti-Racism Lunch and Learns** – series designed to highlight a different facet of anti-racism and response strategies, with a focus on healthcare.
- **Accessibility Advisory Committee** – responsible for preparing the multi-year accessibility plan in order to identify, establish, and implement appropriate accessibility measures by removing barriers to full participation.
- **Health Equity Data Collection** – collection and analysis of patient socio-economic data to facilitate health planning and reduce health disparities.
- **Interpretation Services** – access to on-site interpretation services with trained professional interpreters and telephone interpretation services in more than 200 languages, 24/7, at all of our three hospitals.

OTHER

In 2022, SHN was awarded with three Leading Practices accepted by the Health Standards Organization and Accreditation Canada:

1. SHN VaxFacts Clinic

SHN's VaxFacts Clinic provides patients with the opportunity to speak to a physician, one-on-one, in a confidential, judgement-free, telephone appointment to address any questions or concerns about the COVID vaccine. This direct access to a trusted, expert physician is a distinguishing feature of VaxFacts. Appointments are available 7 days a week, in 200+ languages via live interpreter, and clients do not require OHIP. It reduces health inequities by taking an intentional focus on servicing communities that traditionally face barriers in healthcare, including refugees, newcomers, and racialized communities.

2. Surgical Information System to Drive Improvement in UTI Rates and Catheter Utilization

A multi-pronged approach was implemented that leverages capabilities of a peri-operative software to drive practice changes and improvement in UTI rates. The SIS was configured to improve communications among the interdisciplinary team related to catheter care, management and removal along the patient care pathway. Ultimately, changes that came out of the UTI initiative within the context of the SIS optimization had uniquely designed practice that adds value at every point of the perioperative processes for UTI prevention.

3. Optimizing Cardiovascular Care for Patients Undergoing Cancer Therapy (SHN's Cardio-Oncology Clinic)

The Cardio- Oncology Clinic, a team of highly specialized cardiology oncology physicians and nurses work in partnership with oncologists, hematologists and pharmacists to detect, treat and manage cardiac dysfunction enabling uninterrupted cancer treatments. Now internationally recognized as a Center of Excellence, SHN's Cardio-Oncology Clinic has assessed, diagnosed, treated, and followed upwards of 1500 patients since its inception. It is the only established specialty clinic in the Greater Toronto Area supporting heart health for oncological patients.

Our hospital operations continue to innovate and transform the health experience for patients and families. Other accomplishments we have highlighted:

- **Levering Peri-operative Surgical Information Systems**

As SHN continues to harmonize and consolidate information systems, the Health Information, Technology and Services (HITS) and Surgical Services teams have implemented a single perioperative electronic record solution (SIS). SIS saves time by making the scheduling of OR cases simpler, along with providing easy access to booking information and available time slots. It also improves communication between clinical staff and reduces the number of phone calls and discrepancies that impact OR time and patient care.

- **Remote Heart Failure (HF) patient monitoring**

The Aetonix aTouchAway system for patients living at home with Class III and IV HF. ATouchAway kit including a tablet and vital sign monitoring equipment is provided to patients of the HF clinic at SHG to monitor and manage complex heart failure at home. This is a system aimed at reducing hospital visits and optimising patients' health at home.

- **Integrated Care Pathway for Schizophrenia**

With Ontario Shores and CMHA, this acute and community care partnership aims to promote integrated care delivery, offering a seamless patient care experience and improve outcomes. Other benefits include supporting continuity of care received, sharing data element collection, improving information transfer at care transitions, and improving access through collaborative triaging, referral and intake process.

- **Development of a Regional Psychiatric Emergency Department – short stay (< 24 hrs)**

Based on the emPATH (Emergency Psychiatric Assessment, Treatment & Healing Unit) model which has unique features like separation from a busy, noisy ED, and immediate and ongoing assessment and treatment by an interprofessional team of crisis workers, social workers and MH therapists, nurses and nurse practitioners and psychiatrists. Benefits include, enhanced patient experience; reduced use of physical and chemical restraints; reduced admission, reduced time in ED and ED re-visits; Improved out-patient follow-up rates

- **Training and simulations Program for Emergency Medicine**

The first Canadian Community Academic Hospital to have an advanced SIM Lab and Dynamic Training Program. Enabled by a generous donation from SHN Foundation, simulation events are held in the Emergency Department to promote patient safety, interprofessional communication and team building. Challenging and difficult patient presentations are practiced in a safe environment where clinicians can learn to increase their medical knowledge.

- **NSQIP – Surgical Site Infection**

The hospital conducted a 3M Audit to evaluate current practices against best evidence which lead to harmonization of the Skin Prep Policy. Improvements include staff education with hands-on simulation and product changes at one hospital site to standardize across the network. Results show a decrease in infection rates and readmission rates.

- **Fetal Health Surveillance Education Program**

Focusing on promoting a culture of clinical excellence, the Fetal Health Surveillance (FHS) program uses adult based learning principals and a variety of content delivery tools including case base examples. The interdisciplinary team learns together using a common language and approach to care, enhances teamwork and communication, learns about current and emerging evidence and guidelines, and identifies respectful ways to problem solve and navigate through conflict resolution and escalation processes.

- **Centralized intake for Diagnostic Imaging**

To standardize and upgrade processes across our health network, the scheduling of Diagnostic Imaging appointments has been centralized to a single, dedicated team, allowing the hospital to increase convenience and operating hours for patients, and further minimize duplicate referrals and improve data quality. This process will mark an exciting first phase in SHN's exploration of opportunities to expand centralized scheduling across other programs.

- **OCEAN eReferral Network**

SHN has expanded the use of OCEAN eReferrals for our programs and services. Healthcare Providers will be able to more seamlessly submit patient referrals electronically to us for an increasing number of hospital services. Funded by Ontario Health, OCEAN is a directory of referral destinations in the community and hospitals, with eReferral forms supporting a wide range of services.

EXECUTIVE COMPENSATION

The Quality Improvement Plan (QIP) executive compensation framework is designed to link the achievement of performance targets established under the annual QIP to executive compensation, in accordance with the Excellent Care for All Act, 2010 (ECFAA). ECFAA requires that the executive compensation framework be outlined in the QIP.

The executives who will participate in the QIP executive compensation program for 2023/24 are:

1. Chief of Staff Executive Vice President, Medical
2. Executive Vice President, Chief Nursing and Allied Professional Executive
3. Executive Vice President, People & Transformation
4. Executive Director, Public Affairs
5. Vice President, Finance and Corporate Services
6. Vice President, Redevelopment

For 2023/24, two QIP indicators will be linked to executive compensation. They are:

- Rate of Hospital Acquired Pressure Ulcers per 1000 discharges
- Percent of Medication Reconciliation on Discharge

Additional indicators that are not in the QIP will also be identified.

Allocation of executive performance-based compensation is at the discretion of the CEO and the Board. Consideration may be given to special circumstances that present a barrier to achievement of the targets for some or all of the indicators. Allowances for special circumstances will require CEO and Board approval.

Contact Information

If you would like to learn more about the activities described in the Scarborough Health Network 2023-2024 QIP, please contact Stephanie Robinson, Director of Quality, Patient Safety and Experience at srobinson@shn.ca

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



Matt Ainley, Board Chair



Lianne Jeffs (Apr 24, 2023 09:29 EDT)

Lianne Jeffs, Board Quality Committee Chair



David Graham (Apr 20, 2023 11:37 EDT)

David Graham, President and Chief Executive Officer



Glyn Boatswain (Apr 19, 2023 22:03 EDT)

Glyn Boatswain, Executive Vice-President and Chief Nursing and Allied Professional Executive