

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 31, 2023

OVERVIEW

Kingston Health Sciences Centre (KHSC) is Southeastern Ontario's complex, acute and specialty care, research and teaching hospital. Consisting of our Hotel Dieu site, Kingston General site, as well as the Cancer Centre of Southeastern Ontario and our research institute, we care for more than 500,000 patients and their families from across our region.

As one of the region's largest employers, we are home to over 5,000 staff, more than 2,000 health-care learners and 1,000 volunteers who are committed to partnering with patients and families to ensure that we continually provide quality, compassionate care.

In Fiscal Year '23 (FY23), the KHSC Quality Improvement Plan (QIP) included two initiatives targeted at attaining Choosing Wisely and Choosing Blood Wisely national designations.

Choosing Blood Wisely

In FY23 KHSC joined a growing list of hospitals across the country making efforts to better utilize Canada's blood supply and successfully achieved the "Using Blood Wisely" national designation. To join this initiative, KHSC was required to meet or surpass key benchmarks for four consecutive months to demonstrate appropriate use of blood products for patients.

Choosing Wisely

Choosing Wisely Canada is focused on ensuring appropriateness of tests and treatments for patients and improving the use of health

care resources, thereby resulting in safer and higher quality care. In February 2022, KHSC received Level 1 designation. The FY23 QIP as well as the work of the KHSC Utilization committee, has focused on making improvements in five key areas,

- Uncoupling PT/INR and aPTT tests and revising order panels in the Emergency Department
- Elimination CK testing if troponin is available
- Removing “daily lab” options from order sets
- Removing folate testing from hospitals order systems and
- Stopping ordering routine chest x-rays in the ICU except to answer specific clinical questions.

Choosing Labs and Blood wisely remain critical areas of focus on the FY4 QIP.

Over the past year KHSC has continued to improve and expand the services provided to the patients and families of our region including,

- Receiving Exemplary Standing designation from Accreditation Canada
- Opening the state-of-the-art Breast Imaging Kingston Facility
- Expanding the regional renal program, assuming the operation of the dialysis clinic in Brockville and offering additional kidney care services in Belleville.
- Becoming the first hospital in Canada to implement innovative systems that deliver contrast dye to patients during CT scans.
- Receiving Accreditation Canada recognition as a world-class regional stroke program.

In March 2023, for the fifth consecutive year in a row, KHSC was recognized as one of the best hospitals in the country by American

Publication Newsweek. This year, KHSC ranked in the top 40 of Canadian hospitals. While there are more than 1200 hospitals in Canada, only 67 received a rank. Hospitals were measured by a panel of medical experts including doctors and health-care administrators who considered patient satisfaction scores, patient reported outcome measures, key performance indicators and overall reputation.

Meanwhile, for the eleventh consecutive year, KHSC and its research institute, the Kingston General Health Research Institute (KGHRI), has been named one of the Top 40 research hospitals in Canada by Research Infosource, ranking 23 overall. As the research arm of KHSC, KGHRI is committed to cultivating patient-oriented research, building innovative partnerships and pursuing excellence in research through collaboration, including with its partner, Queen’s University.

PATIENT/CLIENT/RESIDENT ENGAGEMENT AND PARTNERING

Embedding the lived experience and voice of patients and families in our work is a long-standing foundational priority for KHSC. As members of the three Board of Directors’ committees, key steering committees, councils, working groups and quality improvement project teams, KHSC’s Patient Experience Advisors play a key role in bringing the culture of Patient and Family Centred Care to life.

The KHSC Patient and Family Advisory Council (PFAC), Southeast Regional Cancer Program PFAC, the Regional Renal PFAC and the rapid response “Balzacs Group” were integral to Covid-19 planning and preparedness over the past few years and continue to partner and provide guidance in the designing of a new regional Health

Information System and as members of the Frontenac, Lennox and Addington Ontario Health Team Community Council.

Patient stories help to identify priorities that matter to patients and families and are being heard at every level of the organization. The “It’s Great to Ask” project was inspired by asking patients what mattered to them in ambulatory services transitions of care and included patients in every step of the project from conception, to co-design to implementation and evaluation. Patient Advisors helped to co-design and facilitate patient and family virtual care focus groups, sat as members of the Virtual Care Steering Committee and as members of a research team in the co-design of a patient centred Virtual Care Access Toolkit (VCAT).

Patient Advisors work with staff and leaders to ensure that their participation is meaningful and appropriate. Thoughtful conversations about where the patient voice is best aligned, most needed and valuable, has helped to guide how patients will be engaged in more technical work like that of the Utilization/Choosing Wisely Committee. In addition to the QIP coming to the KHSC PFAC for input, a patient advisor was a member of the QIP Working Group sub-committee reviewing, prioritizing and recommending projects as well as on QIP projects such as Workplace Violence and Prevention.

Authentic patient partnering is dependent on it being purposeful and well-grounded in mutual respect and relationship building. KHSC had the foundation of patient partnership built before the pandemic and it has only become stronger as we continue to transform care, together through these challenging times.

PROVIDER EXPERIENCE

As the pandemic continued into its third year, which in turn continued pressures on healthcare, the work environment and staffing in particular, saw demand outstrip supply. KHSC recognized that it was critical to support our healthcare workers to ensure both continuity of staffing and quality outcomes. Our staffing shortages have placed an intense focus on recruitment and retention of staff to fill the shifts required. Not only have other health care providers worked in roles outside their normal positions to fill the gaps, KHSC created new healthcare roles in support positions such as Nursing Support Assistants and Patient Mobility Aides. We also ensured that healthcare providers were working to their full scope of practice.

Feedback from our staff is gathered through department level retention committees, practice councils, staff huddles and feedback loops with leaders. On a broader level, Open Forums, virtual CEO Town Halls, and Open mic sessions with the Chief Nursing Executive occur to hear directly from staff and leaders thoughts and ideas regarding enhancements, challenges and how to improve the work experience. In the spirit of accountability and transparency, KHSC has developed a website to update staff on our progress and house the suggestions that have come forward. A corporate steering council continues the focus on recruitment and retention through numerous initiatives spanning compensation, education and supports, learning, workload concerns and wellness. Actions improving the work experience include appreciation activities, mentorship, paid courses, food access, and innovative staffing solutions.

Our Wellness Advisory Committee is another mechanism to bring forward ideas for workplace improvements. There continues to be

lunch and learns, webinars and communication for leadership and front line staff to focus on topics, including burnout, mental health and resilience. Given the important role of leaders for supporting staff, a Workplace Mental Health Certificate program for leadership is offered to augment support and direct support for staff who may be struggling with mental health. KHSC has recently launched the Your Health Space program for Ontario's health care setting to help address staff burnout and promote psychological health and safety in the workplace. These initiatives are supported by the introduction of a psychological health & safety policy, expansion of our Employee and Family Assistance Programs and services including more hours available for counselling, and better access to services. A new Mental Wellness Practitioner role has been created to support staff, leaders, and the organization in managing psychological stressors, building staff resilience, and reducing the impact of trauma and cumulative exposure to stressors in our health care environment.

WORKPLACE VIOLENCE PREVENTION

Workplace violence has, and continues to be, a key area of focus for KHSC where we are putting intentional effort toward reducing the risk of harm to staff and patients, creating a care and work environment that is healthy and safe where our staff are equipped, motivated, and inspired to do their very best work. Workplace violence has been a corporate indicator for many years with improvement priorities and targets embedded in the annual quality improvement plan and reported to the Board. We recognize the significant effects violence can have on our staff, including the cumulative psychological impact, all of which can negatively affect the personal health, satisfaction and engagement, work attendance, and staff retention. For this reason, workplace violence

has been identified as one of our eight critical to quality measures this year.

The FY23 QIP included two key areas of focus; the creation of a customized workplace violence training program and improving the occurrence of Code White debriefs. The Workplace Violence Training program was customized for staff in the Emergency Department, Urgent Care Centre and Mental Health Program. Through stakeholder engagement this program was developed to meet the specific needs of the staff at KHSC to respond to known risks within the organization. Despite staffing challenges, this training continues to roll out with 100 staff trained to date. When an incident of violence occurs a Code White is called, which triggers additional resources being deployed to the area to support staff in managing the situation. Following a Code White, a debrief is supposed to occur to provide staff the opportunity to discuss patient and system learnings to prevent recurrence of violence. Through the work of the FY23 QIP, the rate of Code White debrief completion exceeded 90% in Q3. As indicated in the QIP Workplan, the FY24 QIP will focus on maximizing learnings and opportunities for improvement stemming from the Code White Debrief process.

In addition to the work undertaken through the QIP, to support the effective prevention and management violence, as well as staff response to incidents of violence or patient self-harm that may be traumatic, KHSC has invested in a new Workplace Mental Health Practitioner role. This position has a fundamental role in helping staff effectively manage patient behavior that could lead to violence, and will support staff debriefing and the development and implementation mental wellness tools, resources, and psychoeducation to help reduce the psychological impact of

stressors and trauma on our staff.

PATIENT SAFETY

KHSC has a policy and process in place to report and respond to patient safety incidents. All staff and physicians are encouraged to report incidents through our electronic incident tracking system (SAFE). When an incident is reported, follow-up may occur through different pathways, depending on whether a patient is harmed or not, the severity of the harm, and the risk of harm to others. We focus our attention on preventable harm and identifying systemic changes that can be implemented to reduce the risk of harm in the future.

For all critical incidents, a quality-of-care review is conducted. These reviews are facilitated by the Patient Safety and Quality department and chaired by the Chief of Staff. We aim to create a psychologically safe environment where staff involved in the incident can share information freely. We focus our review on understanding facts, identifying contributing factors, and developing recommended changes to reduce risk for patients. Staff are engaged in the review process as facts are being gathered. Leaders will communicate the outcome of the review, including the identified contributing factors and recommendations, to staff who were directly involved in the incident. Patients and/or family members impacted by a critical incident are invited to share their perspective as an input to the review. Following the review, the patient's physician, and the Director of the program in which the care was provided will meet with the patient or family and share what was learned and what our recommendations for improvement are.

Over the past 2 years, we have worked to strengthen the

effectiveness of critical incident reviews and associated improvement plans by adopting the Root Cause Analysis and Actions (RCA2) process promoted by the Institute of Healthcare Improvement. In the coming year, we aim to roll out this process and strengthen our reviews for incidents of moderate harm and near misses. We are also working on a process to better disseminate lessons learned from incident reviews across the organization, while ensuring that we maintain confidentiality and psychological safety for the patient and staff involved in an incident.

HEALTH EQUITY

Health equity is an integral component of how care is delivered at KHSC. The historical missions of HDH and KGH sites, and the current mission, vision and values of KHSC illustrate a strong commitment to equity in access and delivery of care. Our commitment to patient and family centred care is intrinsically connected to an approach to care wherein a holistic, intersectional and individualized approach to setting goals, offering choices, and addressing needs is foundational.

While this the everyday approach to delivery of care at KHSC, the next fiscal year will focus our organization to complete a current state analysis of what equity related data is presently being collected and analyzed to inform care delivery, and to identify current programs and projects underway targeting access and equity in delivery of care. Once this current state analysis has been completed, we will be able to identify gaps and opportunities for improvement to action.

EXECUTIVE COMPENSATION

Each of the executives at Kingston Health Sciences Centre have a percentage of their pay linked to quality improvement initiatives, including annually established objectives, indicators and targets. The amount of pay-at-risk for executives ranges from ten to fifteen percent of total compensation. The payment of pay-at-risk occurs following the fiscal year end evaluation of results. The amount of pay-at-risk awarded will be based on the Board of Directors and the President & CEO's evaluation of performance against specific thresholds.

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 on

Board Chair

Board Quality Committee Chair

Chief Executive Officer

Other leadership as appropriate
