



**Our Mission: We are a community of people working together to transform the patient and family experience through innovative and collaborative approaches to care, knowledge and leadership**

Welcome to our 2015-16 Integrated Annual Corporate Plan (IACP). Each year since we established the KGH 2015 Strategy for achieving our aim of Outstanding Care, Always, we have identified specific targets in our IACP that we intend to achieve that year. This rigor has helped us transform our organization over the last five years in many ways and will continue to support our advancement towards our 2015 outcomes. As we enter 2015-16, we will hold the gains we have made and continue to address the improvement priorities that have guided us over the last several years.

KGH is also now engaged in two processes of strategic planning. The KGH 2020 Strategy, which will provide guidance to the next phase of our journey towards Outstanding Care, Always is to be completed by March 2016. Concurrently, we are working with our regional hospital partners, the Southeast Local Health Integration Network (SE LHIN), Continuing Care Access Centre (CCAC), and the Queens Medical School to develop plans to support the collective capacity of the system to meet the needs of our communities in the future through the *Health Care Tomorrow* hospital services project. While these processes are separate from our 2015-16 IACP, they are naturally interdependent and will inform our ongoing targets and tactics.

The 2015-16 IACP will build on the KGH 2015 Strategy advancing our aim of Outstanding Care, Always.

**Our planning process**

This year, we have continued to align our Integrated Annual Plan (IACP) with our budget, Quality Improvement Plan, and regional and provincial initiatives. We have also looked closely at the results of our employee, physician and patient surveys, risk assessments, accreditation results, quality of care reviews and our current performance to inform our priorities for the coming fiscal year. We have examined trends in the feedback we have received, identified specific opportunities for improvement and ensured that these are addressed in our plan. At the same time, we are factoring in issues and changes in our environment to ensure we can respond to the changing health-care landscape. These include Health System Funding Reform as well as working with our community partners to strengthen regional health-care through initiatives such as *Health Care Tomorrow*, Health Links and a regional hospital information system.

The IACP has been developed with leadership and staff engagement and discussion about the issues identified in the surveys and assessments we conducted in the past year, and the initiatives that are part of this year’s operating budget and Quality Improvement Plan. Drafts of this plan have been reviewed and discussed at our Leaders’ Forum, Medical Advisory Committee, Fiscal Advisory Committee, Patient and Family Advisory Council and by our Board Committees and the Board of Directors. We will continue this engagement as we proceed with planning the specific tactics we’ll employ this year to help us deliver on this plan.

The coming fiscal year represents a transition year from our KGH 2015 strategy to the KGH 2020 strategy. Therefore, we will continue to be guided by the KGH 2015 outcomes. We are committed to staying the course on the excellent work that is already underway across the organization, which has us firmly on the path to achieving those outcomes. This means we will not be introducing an entirely new set of targets for 2015-16. Our theme for the coming year will continue to be to *focus*

*and finish* the work underway, while we prepare to launch the KGH 2020 strategy and continue our journey in pursuit of Outstanding Care, *Always*.

### **Elements of the Integrated Annual Corporate Plan**

Our Integrated Annual Corporate Plan incorporates all the targets, indicators and tactics associated with our Quality Improvement Plan and budget initiatives, as well as the work that is currently underway to achieve our KGH 2015 outcomes.

The following table outlines highlights of what we've learned from our surveys, assessments and discussions, and provides examples of how we're using the evidence to shape and focus our tactics for the coming year. Detailed tactic plans will be further developed for each improvement priority and target that appears in this year's plan.

## Shaping our focus

Inputs to the plan	What we learned	Examples of what we're doing this year
<b>Quality Improvement Plan (QIP) 2015-16</b>	Each year, we submit a Quality Improvement Plan (QIP) to the Ministry of Health and Long-Term Care. Our QIP identifies specific priorities for quality improvement in five dimensions including access, effectiveness, integration, patient-centred and safety.	This year, we are aiming to improve patient satisfaction, reduce emergency department wait times, reduce unnecessary deaths, hospital-acquired infections, hospital readmissions and time spent in acute care, improve medication and surgical safety and improve financial health.
<b>Budget 2015-16</b>	As part of our budgeting process, all Programs and Services have strived to achieve the 25 percentile performance of their peers and find an additional 1 percent savings. As a result, we've come up with a mix of savings and new revenues that have allowed us to balance our 2015-16 operating budget.	In this year's plan, there are savings and/or financial consequences associated with improving patient flow and wait times, achieving Quality Based Procedure and volume targets in our clinical services, reducing employee sick time, and implementing our staff scheduling and time-capture project.
<b>Staff and physician engagement survey results</b>	More than 64 per cent of employees completed engagement surveys in 2013-14, identifying opportunities for both team-based and organization-wide improvements. Five corporate level themes emerged as opportunities to improve trust, recognition, communication, wellness, education and career development.	This year, teams will continue to implement engagement action plans that address specific issues that are important to them. At a corporate level, we are focused on strengthening opportunities for education, learning and development and conducting a follow up engagement survey in the fall of 2015-16 to gauge our progress.
<b>Patient satisfaction survey results and patient feedback</b>	Several times a year, we collect survey data and written feedback from recent patients of our hospital. Both the compliments and concerns we receive focus on issues related to care and treatment, communication, attitude and courtesy and service accessibility.	This year, we're continuing to embed patient- and family-centred care standards across the organization. We're also training an additional 1,500 of our people in a healthcare service excellence program called <i>Communicate with H.E.A.R.T.</i>
<b>Risk Assessment</b>	Two years ago, we conducted a detailed risk assessment within the 33 dimensions that represent the top HIROC insurance claims. This year we have continued to develop our risk process and tools, including a risk registry, and approaches to the various different domains of risk, such as Legislative compliance.	We are continuing our work to address the top sources of gridlock with a focus on patient discharge processes and realigning beds amongst clinical services. We're strengthening measures to prevent skin ulcers and ensuring consistent implementation of the 'Falling Star' and ARTIC 'Move On' programs to help reduce patient falls.
<b>Quality of Care Reviews</b>	Quality of care reviews are held in response to patient harm incidents with a focus on identifying opportunities to improve quality of care at the hospital. Reviews have identified issues related to communication with patients and families and amongst care teams, as well as gaps related to the documentation of patient histories and physicals.	We're continuing to roll out a successful service-excellence model called <i>Communicate with H.E.A.R.T.</i> developed by the Cleveland Clinic. This year, we will continue training staff in all areas of the hospital in this new model. We're also developing a chart audit and education cycle to improve the documentation of patient information.
<b>Accreditation Canada survey results</b>	In 2012 KGH was awarded Accreditation with Exemplary Standing by Accreditation Canada. For meeting 2,223 out of 2,248 standards and criteria for an overall score of 98.9 per cent. The next accreditation is in 2016.	Delivering on Required Operating Procedures (ROP) in our daily work remains a top priority at KGH as we continue to embed regular ROP reviews within all clinical programs.
<b>Current performance (Q3)</b>	From the vantage point of Q3, we know we will not solve all of our toughest challenges by year end, but we are encouraged by the work underway. In the coming year, we will continue to work together and with our partners to address performance issues related to patient flow and gridlock, hand hygiene compliance, medication fluid events, and falls.	This year, we'll continue with the tremendous improvement initiatives that are underway to address the top sources of gridlock, while working with our partners to improve patient flow on a regional basis. We're also increasing the visibility of hand hygiene compliance results and continuing to address the top sources of preventable harm to patients.

## Our plan

Our Integrated Annual Corporate Plan consists of 15 improvement priorities and 27 targets that we are committed to achieving by March 2016. Powered by 4000 staff, physicians, learners and volunteers, we are confident that we can continue to improve and advance toward our aim of Outstanding Care, Always.

For the purposes of this document, we have expressed our targets in language that allows us to be compared to our peers on standard hospital performance measures. In our quarterly and annual performance reviews, we challenge ourselves to ‘peopleize’ all of our data so that we stay focused on the impact of our performance on the people we serve. This helps us to foster meaningful dialogue about what our performance means for patients, families and everyone who works, learns or volunteers at KGH. The following table describes this year’s plan for advancing each of our strategic directions.

### Transform the patient experience through a relentless focus on quality, safety and service

KGH 2016 Outcome	Improvement Priority	Targets
Patients are engaged in all aspects of our quality, safety and service improvement initiatives	Partner with patients to improve communication issues identified in our patient surveys and feedback	Inpatients who respond good, very good, and excellent to “overall how would you rate the care you received at the hospital” increases from 94 to 97 per cent
	All preventable harm to patients is eliminated	Reduce the incidence of hospital acquired infections and unnecessary deaths in hospital
All preventable delays in the patient journey to, within and from KGH are eliminated		Reduce the incidence of specimen collection errors, medication events, falls and skin ulcers
	Every patient receives medication reconciliation at admission	
	Level 3 and 4 patient falls are reduced from an average of 3 to 1 a quarter	
	The number of incidents associated with morphine and hydromorphone are reduced to 12 per quarter	
	Reduce specimen collection and labelling errors from 76 to 45 per quarter	
	All three phases of the Surgical Safety Checklist are performed for all surgeries	
	Twenty-five per cent fewer patients experience skin ulcers on Kidd 6, Connell 10 and our ICU	
All preventable delays in the patient journey to, within and from KGH are eliminated	Reduce wait times, length of stay, avoidable admissions and the number of patients waiting in our hospital for alternate levels of care	ED wait time for admitted patients improves from 31.6 to 29 hours
		Percent of ALC days improves from 14.8 to 10
		Clinical services meeting wait time targets reach 90 per cent
All preventable delays in the patient journey to, within and from KGH are eliminated	Manage occupancy rates to optimize patient safety, flow and quality	Overall medical/surgical occupancy rate improves from 102 to 95 per cent

## Bring to life new models of interprofessional care and education

KGH 2015 Outcome	Improvement Priority	Target
Our interprofessional collaborative practice model is implemented in every clinical area with high ratings from patients, staff and learners	Increase adoption of patient- and family-centred care standards in every clinical area	Adoption of patient- and family-centered care standards improves from 93 to 98 per cent
KGH is recognized as a centre of excellence in interprofessional education		

## Cultivate patient-oriented research

Externally funded research at KGH has increased by 50 per cent	Advance the plan for a Kingston-wide health research enterprise	Open the William J. Henderson Centre for Patient-Oriented Research
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## Increase our focus on complex-acute and specialty care

KGH services are well aligned and integrated with the broader health-care system	Reduce 30-day readmission rates	30-day readmission rate outperforms its expected MOH rate
	Engage the KGH community to help us shape the future of KGH	Deliver a long-term KGH strategy in the context of <i>Health Care Tomorrow</i>

## Enable high performance

Staff are engaged in all aspects of our quality, safety and service improvement initiatives	Address priorities identified in our employee and physician engagement surveys	Staff who respond "yes" to "does the organization provide opportunities for employee education, learning and development" improves by 20 per cent
	Align organization and individual accountability	1500 additional staff participate in performance reviews and agreements are completed (phase 2 of 2)
All preventable harm to staff is eliminated	Reduce the incidence of musculoskeletal injuries and incidents of workplace violence	Musculoskeletal (MSI) injury claims from staff are reduced from 53 to less than or equal to 42 per year Staff injuries related to workplace violence are reduced from 55 to less than or equal to 44
Phase 2 construction is underway and KGH is clean, green and carpet free	Advance Phase 2 redevelopment and improve hospital cleanliness	Phase 2 redevelopment advances to stage two approval status
		Cleaning audit performance reaches 85 per cent
Rapid transmission of information improves care and operational efficiency	Focus organizational project resources on strategic technology projects	Strategic technology projects are implemented on schedule and on budget



Our operating budget is balanced and we are able to allocate \$20 million a year to capital expenditures	Increase our capital spend to \$20 million	KGH total margin is greater than zero
		Our capital budget reaches \$20 million

## Delivering on our plan

Articulating our plan on paper is a small but important part of our overall planning and performance management cycle. With the plan in place, we turn our focus to ensuring that accountabilities are clear, that our processes are aligned to our improvement priorities and that people are supported to contribute to our mission of working together to transform the patient and family experience through innovative and collaborative approaches to care, knowledge and leadership. Here's how we're setting ourselves up to successfully implement this year's Integrated Annual Corporate Plan:

- Working with leaders, physicians and staff to plan specific tactics that will help us achieve our targets
- Continuing to conduct rigorous quarterly performance reviews
- Applying continuous improvement principles, methods and tools to all our improvement priorities, as well as to our overall planning and performance management cycle
- Staying true to the KGH Way by upholding our guiding principles of respect, engagement, accountability, transparency and value for money
- Working with our health system partners to improve access to high quality care through the development of a sustainable system of integrated care
- Involving patients and families every step of the way in all planning and decision-making activities that influence their experience at our hospital

## Looking to the future

This is the final year of our KGH 2015 strategy, but it's not the end of our journey. This year, as we set our sights on the future, we will continue to pursue our aim of Outstanding Care, Always – for every patient, every day. We will also remain grounded in our mission of working together as a community of people dedicated to transforming the patient and family experience through innovative and collaborative approaches to care, knowledge and leadership. As a valued member of the KGH community of people, you can expect to be engaged in thoughtful discussion as we continue to shape the future of KGH.

## Stay connected

We began a communication revolution four years ago by asking our stakeholders to help us set priorities and shape our strategy. We have continued on this path by emphasizing listening and participation and making it easier for people within KGH and in the community to keep track of the exciting things happening at their hospital. Our websites and social media channels are one way we ensure that everyone can be part of the conversation with KGH and receive the information and engagement they want. Our performance information is updated quarterly on our corporate website in the Strategy and Performance section where you'll find copies of *KGH This Quarter*, *KGH This Year* and our Strategy Performance Report. We'll also be using our online channels to reach out and start a new conversation about the future of KGH as we develop our next long-term strategy. There are many ways to stay in touch online:



[www.kgh.on.ca](http://www.kgh.on.ca)



[www.twitter.com/KGHConnect](http://www.twitter.com/KGHConnect) and follow our CEO @Leslee\_KGH



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[www.youtube.com/kghconnect](http://www.youtube.com/kghconnect)

Stay tuned, KGH is on the move!

## Appendix

1. Strategy Performance Index – a detailed listing of all our Integrated Annual Corporate Plan targets, indicators and performance corridors
2. 2015-16 Quality Improvement Plan – our plan for improving health-care quality, which is submitted annually to the Ministry of Health and Long-Term Care
3. 2015-16 Budget – our Hospital Annual Planning Submission and annual operating budget presentation