

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 27, 2024



OVERVIEW

Guided by our vision of One System. Best Health. and supported by a dedicated team of more than 8,700 staff, physicians, and volunteers, Lakeridge Health offers some of the broadest and most comprehensive acute care, ambulatory care, and long-term care services in Ontario.

Our Quality Improvement Plan (QIP) is part of our broader quality agenda and is directly aligned with our efforts to improve both the both quality of care, and the experience of the patients, residents, and clients we care for, through the six dimensions of quality: care that is patient-centred, safe, timely, effective, efficient, and equitable. It includes indicators that drive improvement and are aligned with the corporate measures identified in our 2024/2025 Annual Business Plan (ABP).

The organization is further positioned to improve the quality of care delivered at Lakeridge Health through the achievement of Accreditation Canada's Required Organizational Practices, the use of evidence-based quality-based procedures to promote standardized care for patients, and the optimal use of safety incident data to provide insights and actions into our quality agenda at the program and organizational level.

In developing the QIP, Lakeridge Health benchmarks performance against established performance standards, drawing from sources such as the Canadian Institute for Health Information (CIHI), Hospital Service Accountability Agreements (HSAA), Ontario Health (formerly Health Quality Ontario), and the Institute for Healthcare Improvement (IHI).

The 2024/2025 QIP indicators represent key areas of quality improvement for the organization and are designed to ensure we are focused on organizational priorities and planned and/or current initiatives. By committing to measure the progress gained toward stated targets, assessing the impact of various change initiatives on an ongoing basis, and identifying lessons learned regarding measurement and implementation throughout the year, Lakeridge Health will optimize its improvement impact on the most salient metrics and, in so doing, improve quality and safety outcomes for patients, residents, and clients, and their families, as well as team members.

The following priorities were approved by the Quality Committee of the Board of Trustees for inclusion in Lakeridge Health's 2024/2025 QIP. The indicators are:

Hospital:

1. Number of workplace violence incidents resulting in lost time or health care sought.
2. In-hospital sepsis.
3. 90th percentile Emergency Department (ED) Length of Stay (LOS) for admitted patients.
4. Alternate level of care (ALC) throughput ratio.
5. Patient experience question: Did you receive enough information from hospital staff about what to do if you were worried about your condition or treatment after you left the hospital?
6. Percentage of leaders completing four inclusion, diversity, equity, accessibility, and anti-racism (IDEAA) self-directed or focused learning and development sessions.

Long-Term Care:

1. Percentage of potentially avoidable ED visits for Lakeridge Gardens long-term care residents.
2. Percentage of long-term care residents not living with psychosis who were given antipsychotic medication.
3. Percentage of long-term care residents who fell in the last 30 days.
4. Patient experience question: Do residents have a voice in participating in care planning decisions and services received?

ACCESS AND FLOW

Lakeridge Health remains focused on optimization of capacity, access, and flow across the organization. In the past year, Lakeridge Health has put significant emphasis on working with internal and external partners to influence and facilitate patient flow.

Some examples include:

- Introduction of a process related to repatriation of patients to external acute organizations.
 - Building collaborative relationships with our partner organizations.
 - Working internally to guide process and pull times of patients to ready beds.
 - Identification of standard work specific to clinical programs related to patient flow.
 - Identification of estimated date of discharge for all patients.
- Our efforts help to improve the patient experience, prevent unnecessary lengths of stay, and ensure access to the right care, in the right place, at the right time.

EQUITY AND INDIGENOUS HEALTH

In 2023, Lakeridge Health introduced the IDEAA Multi-Year Action Plan with team members and the communities we serve. During this first year of the plan, several initiatives were implemented and achieved. This foundational year will help us build momentum as we also continue to further strengthen our internal team and resources.

Collaboration among the IDEAA team and three clinical areas has been critical to moving this IDEAA work forward. This includes working with the Emergency Department (ED) at the Ajax Pickering Hospital to improve quality outcomes for sickle cell patients, as well as program reviews of our Women's and Children's program and our Surgical program.

The sickle cell work is being done in partnership with the Institute for Healthcare Improvement (IHI) to ensure health equity is embedded. This work also aligns with Ontario Health's release of the Sickle Cell Quality Standards. This model for improving health equity outcomes is being trialed and tested in the ED at the Ajax Pickering Hospital with plans to build and grow this approach to other programs and initiatives to help centre health equity.

The Women and Children's program and Surgical program reviews have allowed us to recognize growth and learning opportunities for all team members to help improve overall team experiences and culture.

Lakeridge Health has developed five self-directed training modules with reflective practice guides with one more in development. All internal leaders are required to complete at least two of these

modules by the end of this fiscal year.

- Anti-Black Racism in Health Care
- Anti-Asian Racism in Health Care
- Beyond Heteronormativity and Gender Affirming Care
- Discrimination Faced by Newcomers
- Understanding and Combating Islamophobia
- Understanding and Combating Antisemitism (launching soon).

There are also a number of facilitated education sessions available such as:

- Inclusive Leadership
- Providing Intersectional Survivor Centred Care
- Civility and Workplace Behaviour
- Unit Specific Training

Our Indigenous Cancer Program at the Durham Regional Cancer Centre has also been working hard to improve outcomes for our Indigenous communities. This team has been successful in securing a Health Canada grant for three projects to help improve the experiences of Indigenous community members within Lakeridge Health. The three projects include:

- Creating Indigenous Cultural Safety training for team members.
- Improving the current patient complaints process to better support Indigenous patient complaints of racism.
- Voluntary self-identification for Indigenous patients to better connect them to available supports.

This work is being done in constant collaboration with Indigenous community members, and in alignment with our stakeholders and clinical leadership within the Durham Ontario Health Team.

Lakeridge Health has also completed an accessibility audit and is working towards the development of a five-year accessibility plan, based on the audit completed by the Abilities Centre, which included individuals with lived experience. This work was done in partnership with the Accessibility Committee and various departments throughout Lakeridge Health.

Additionally, the organization has reviewed its internal complaints process through an intensive multiple day planning event that has highlighted key opportunities for change and improvements to help make the process more consistent, fair, and equitable. There are several working groups that are developing policies, procedures, and processes from renewed WeCare reports to human resources processes and other key changes.

PATIENT/CLIENT/RESIDENT EXPERIENCE

Lakeridge Health collects experience information to guide improvement activities from a variety of sources such as patient experience surveys, compliments, complaints, program Patient and Family Advisor (PFA) Councils, and PFA presence on councils and committees.

Lakeridge Health launched the Ontario Hospital Association (OHA) Patient Experience surveys in April 2023. The surveys are offered to patients who have been discharged from the Medicine, Surgery, Inpatient Rehab, and the Women's and Children's programs, as well as patients who have visited the Emergency Department. To ensure equitable access, patients can participate in the survey via QR code, weblink, email, or in person with the assistance of a survey volunteer. We are collecting and sharing this data with program leadership weekly to promote real time quality improvement. The

data, along with themes from compliments and complaints, is also shared with program leadership quarterly for use at program councils and to drive larger quality improvement initiatives. Themes seen across different programs are shared through the annual business planning process to influence our goals for the 2024/2025 fiscal year.

The information shared from patients through the surveys has influenced a redesign of the patient whiteboard to improve inpatient communication, a change in the ED waiting room volunteer role to ensure information is shared about wait times, and the increase in the use of activities to pass the time in the waiting room.

For clinical programs where an OHA survey is not available, the program is participating in other regulatory survey programs or in-house surveys to obtain experience information to inform quality improvement initiatives.

Lakeridge Health has a robust PFA program engaged in all programs across the organization – from working groups to members of the Quality Committee of the Board of Trustees. The PFAs participate in quality improvement through document creation and revision, policy development, physical space changes, program and organization strategic planning, working groups, general orientation, and staff recruitment.

PROVIDER EXPERIENCE

At Lakeridge Health, our commitment to enhancing the staff and provider experience and addressing the unique challenges within the health-care workforce remains a key focus. In 2023, we

continued our efforts to deliver on our Strategic Direction to Be a Workplace of Choice, where individuals want to begin, grow, and culminate their careers at Lakeridge Health.

We believe that open communication and feedback are essential to fostering a thriving work culture. To this end, we employed various means to collect insights from our teams:

- Our annual Team Engagement Survey allowed us to gauge staff satisfaction and engagement levels, providing a comprehensive understanding of their experiences.
- Throughout the year, we initiated team-based pulse check surveys, facilitating candid discussions within teams and prompt action planning to address specific concerns.
- Throughout the year, we also collect employee lifecycle feedback via orientation and 90-day onboarding surveys, transfer surveys, and exit interview surveys. Feedback collected is reviewed regularly and informs team-based and organizational improvements.

A positive workplace culture is crucial for staff and provider well-being and productivity. In 2023, we took several initiatives to cultivate such an environment:

- We introduced a Workplace Civility and Respect educational module dedicated to fostering workplace civility and respect. This module equips our staff with the skills necessary to promote a culture of professionalism and kindness.
- We also introduced DISC Team Development and Communications workshops, receiving positive feedback from participating teams about the effect on team engagement.
- Recognizing the evolving demands of health care, we expanded our leadership development program to equip our leaders with the skills and knowledge needed to navigate new challenges effectively.

- We launched a New Leader Onboarding Program designed to provide new leaders with a structured and supportive introduction to their roles.

Over the past year, we have worked to revamp our Performance and Development program to align staff growth and development with our organizational objectives, including a special focus on wellness, inclusion, and personal development. This is scheduled to launch in April 2024.

To effectively manage the current health-care workforce challenges, we implemented the following strategies:

- We continued to develop and refine our multifaceted recruitment strategy to ensure that we have the right talent in place to meet current and future demands. Special efforts have been made to streamline and improve the onboarding process for all new staff.
- We continue to focus on implementing solutions aimed at engaging our teams in efforts to reduce our voluntary turnover rates.
- We established common practices for staff deployment and workforce scheduling to optimize resource utilization.
- We remain committed to fostering an inclusive environment through educational offerings for both leadership and staff in these critical areas.

SAFETY

Lakeridge Health remains focused on eliminating patient harm by focusing on implementing safety systems that prevent errors and mistakes from reaching the patient. A comprehensive safety program is in place to ensure any incidents reported can be investigated so leadership can develop action plans to prevent

recurrence. Classification of incidents is also done for ongoing learning and to monitor the impact of quality improvement initiatives.

The top five (5) incident types (with harm) from July to September 2023 accounted for 80 per cent (26) of all with harm incidents reported. The types of incidents include falls, patient-other (e.g., patient in distress), medication/fluid, skin/tissue, and diagnosis/treatment. In all cases, it standard practice for leadership to ensure actions are implemented and shared back with team members and patients/residents/clients that may have been affected. In addition, patient stories are regularly provided to the Board of Trustees for ongoing learning.

Over the past year, Lakeridge Health has put significant emphasis on focusing clinical teams and leadership on improving compliance of practices that mitigate patient safety risks and improve quality of care. These areas of focus have been rolled into a number of indicators on the organization's corporate scorecard called the Zero Harm Measures. Some examples include hand hygiene monitoring and compliance improvement, bar code medication compliance, and repositioning of patients to mitigate hospital acquired pressure injuries. Many hospital-wide and unit-based solutions and ideas have been implemented to continue to improve compliance needed to ensure patients are safe while under the care of Lakeridge Health. We look forward to continuing the progress and success achieved in 2024-2025.

POPULATION HEALTH APPROACH

Lakeridge Health is focused on improving population health through proactive and preventative measures that involve cross-sector

collaboration. As the Lead Agency for the Durham Ontario Health Team (DOHT), Lakeridge Health is working to improve the health of the communities we serve.

Through provider and community engagement initiatives, cancer screening rates have improved in our region over the past year.

Examples include:

- Lowering barriers to local cancer screening and prevention information through the launch of a new public-facing website.
- Building capacity for cervical screening through facilitated training workshops for nurses and other health-care providers.
- Establishing sustainable cancer screening pathways for unattached patients.
- Multiple public and community facing presentations aimed at chronic disease prevention strategies and improving awareness of cancer screening programs and eligibility criteria.
- Wide reaching social media campaigns aimed at health promotion and informing the public about steps to lower the risk of cancer.

Lakeridge Health is also contributing to the improved health of the population through the implementation of integrated clinical pathways aimed at chronic disease management. Working with the DOHT, integrated pathways for congestive heart failure (CHF) and chronic obstructive pulmonary disease (COPD) will ensure that patients living with chronic conditions have access to the right care at the right time. The success of the CHF and COPD clinics is a result of the strong collaboration with Home and Community Care Support Services and Region of Durham Paramedic Services. The design of the CHF management program has expanded to where one of our top priorities is supporting patients to avoid visits to our EDs.

Similarly, as part of the multi-year mental health and substance use services strategy, Together, Best Mental Health, Lakeridge Health launched Central Connect in 2023 to improve navigation and referral for people requiring support for mental health and/or addictions. Central Connect allows patients and health-care providers to easily make new referrals into the Mental Health and Addictions program. This initiative has led to a reduction in the number of people who seek mental health and addictions support in the ED, facilitating access to care in appropriate community settings.

Lakeridge Health also established a Department of Family and Community Medicine to improve integration between acute and primary care settings. Through initiatives that include supporting primary care with clinical education and streamlining navigation to services, we will be contributing to the overall quality of care received by the residents of Durham Region.

As Lead Agency for the DOHT, Lakeridge Health is one of seven health service providers leading a homecare modernization demonstration project aimed at improving the delivery of care to individuals in our community. The Downtown Oshawa neighbourhood project will integrate providers from multiple health and social support agencies with the goal of improving continuity of care, lowering risk of hospitalization, and allowing residents to age safely at home, contributing to the wellbeing and health of individuals served. The project will test new home care funding and contracting models while making effective and efficient use of health human resources in our community.

Lakeridge Health recognizes that the best way to improve the health of a population is to prevent chronic conditions from developing. Prevention practitioners will be made available to members of the DOHT primary care network in 2024 through a collaboration between the Lakeridge Health hosted Central East Regional Cancer Program and the DOHT. These prevention practitioners will work with patients who are at risk of developing chronic conditions, providing health coaching and goal setting to lower an individual's risk of chronic disease.

EXECUTIVE COMPENSATION

As part of the 2024/25 QIP development and to help drive organizational performance and senior management accountability for the delivery of strategic objectives and priorities, Lakeridge Health's executives have a portion of performance-based compensation linked to the achievement of the QIP indicator targets.

The Board of Trustees has approved the selection of quality indicators for 2024/2025. These indicators will be monitored through both the QIP and the organization's corporate scorecard.

Performance-based compensation will be commensurate with the degree of success achieved in meeting the improvement targets. Four of the of the seven QIP targets will be assigned to all executives eligible for Pay for Performance. These indicators include: Number of workplace violence incidents resulting in lost time or healthcare sought, 90th percentile ED Length of Stay (LOS) for admitted patients, Percentage of leaders completing four (4) IDEAA self-directed or focused learning and development sessions, and Percentage of long-term care residents not living with psychosis who were given antipsychotic medication.

CONTACT INFORMATION/DESIGNATED LEAD

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

Board Chair  (signature)
Cordelia Clarke Julien (Mar 26, 2024 18:41 EDT)

Board Quality Committee Chair  (signature)
Bill Sims (Mar 26, 2024 15:58 EDT)

Chief Executive Officer  (signature)
Cynthia Davis (Mar 26, 2024 18:36 GMT)