

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 28, 2024



OVERVIEW

In October 2020, Blanche River Health (“BRH”) was established as a result of the amalgamation of the Englehart and District Hospital and the Kirkland and District Hospital.

BRH is a fully accredited community hospital committed to providing quality, patient-centered health care services in Northern and Central Timiskaming. Our hospital sites continue as leaders in health care services by collaborating with community health partners to create safe and healthy communities and ensuring seamless transitions to partner health services. The hospitals follow a Hospitalist based care model for in-patients at both sites and rely on local and locum physicians to support our Emergency Departments.

The Englehart Site has 26 designated acute care beds, and employs 100 team members. Patient care is provided by rotating locum physicians. BRH Englehart site has a 24/7 Emergency Department and offers Diagnostic Imaging, Laboratory, Physiotherapy, Occupational Therapy, Hospice Palliative Care and Ontario Telemedicine Network (OTN) to both in-patients and out-patients. In partnership with Sudbury's Health Sciences North, the Englehart Site provides Virtual Critical Care.

The Kirkland Lake Site has 48 beds (42 Medical/Surgical, 6 ICU care beds) employs 261 team members, and has 9 Visiting Specialists, 9 Physicians (including 1 General Surgeon and 1 Anesthetist.) BRH Kirkland Lake site has a 24/7 Emergency Department and offers Diagnostic Imaging, Laboratory, Respiratory, Clinical Nutrition, Pharmacy, Physiotherapy, Timiskaming Diabetes Program, Hospice Palliative Care and Ontario Telemedicine Network (OTN) to both in-

patients and out-patients. In partnership with Sudbury's Health Sciences North, the Kirkland Lake site provides satellite services in the patient care areas of Dialysis, Chemotherapy, Cardiac Rehabilitation and Virtual Critical Care.

BRH is committed to a culture and environment of teaching/learning for students. BRH is affiliated with many Ontario Colleges and Universities including the Northern Ontario School of Medicine, Nursing and Allied Health (NOSM), McMaster, Queens, Laurentian, Nipissing and the University of Toronto, College Boreal, Cambrian, Algonquin, Canadore, Lambton and Northern College.

BRH's 2024/25 QIP is aligned with Accreditation Canada, Home and Community Support Services (HCSS) and Ministry of Health & LTC (MOHLTC) priorities including:

- HCSS Integrated Health Services Plan
- Hospital Service Accountability Agreements (H-SAA)
- Accreditation Canada Required Organizational Practices (ROP)
- Mandatory and Publicly Reported Requirements
- Ontario's Action Plan for Health Care

BRH's Quality Improvement Plan (QIP) continues to build upon strategic priorities and commitment to quality patient care by strengthening partnerships, leadership, integration, financial accountability and transparency.

Our Vision is to establish Blanche River Health as a leader in northern rural healthcare. It is a lofty goal but not impossible. We know we can get there by valuing what truly matters and we will begin this journey by embracing our Mission of making healthcare

work for you. Our patients and family members, our communities, partners, our employees, physicians, our leaders.

BRH strongly values People and Continuous Improvement. Our strategic direction for 2024- 2029 includes system integration, communication, fiscal accountability, infrastructure and health human resources. BRH continually demonstrates a strong patient focus and commitment to a high level of accessible care, "outside the box" thinking, and exceptional leadership in Ontario.

ACCESS AND FLOW

As a strategic direction, BRH will work to map out patients' journeys, learn and implement changes that promote "Nothing about without me without me", reduce unnecessary barriers, and proceed with processes that make health care work for patients and families.

The expansion of business analytics will determine overall wait time indicators for all programs. This will provide data to review and create efficiencies for the services provided.

EQUITY AND INDIGENOUS HEALTH

With the promotion of a Culturally Safe environment and the development of an Equity Diversity and Inclusion Framework, BRH aims to provide a safe environment for all – honouring all people. Education for equity, diversity, inclusion, and anti-racism will be expanded to support care providers, staff and patient and their families.

PATIENT/CLIENT/RESIDENT EXPERIENCE

BRH is committed to a culture of patient engagement. The hospital

welcomes any suggestions and feedback to support an environment of high performing, patient-centered healthcare at both hospital sites.

Patient and family as well as community partner feedback, has a positive impact on the timely and quality care. Feedback opportunities are captured with website submission forms, direct emails, in-person, comment cards and patient surveys.

Emergency Department patient surveys are on an on-line platform and can be completed in real time. Paper copies are also available for patients as requested. Information gathered drives change with the goal of improving communication, patient care outcomes and patient flow processes. Closing the feedback loop is key to effective communication and it is our priority that all patients will be contacted within 5 business days and feedback matters will be investigated and resolved within 30 business days.

For the in-patient population, all discharged patients returning home receive a 48-hour post-discharge survey call from the hospital. Patient experiences, information sharing, cleanliness and hand hygiene information is gathered from the surveys. Patients and their families can also share compliments and concerns through the BRH website and with our Patient Relations Department. Feedback comment boxes are located at both hospital sites in the Emergency, In-Patient, and Diagnostic Imaging and Laboratory departments. These cards provide another opportunity to receive feedback. Emergency department wait times is a common theme captured by the cards.

BRH has developed a Patient Experience Partner (“PEP”) Program.

This program fosters patient and family involvement in policy review and special projects occurring at both hospital sites to align with Accreditation Canada guidelines.

Our Patient Experience Partners have participated in Accreditation, Strategic Planning, Footprint Renovations and Patient Accessibility, Quality of Care reviews and Quality Improvement Planning and the creation of an Indigenous Healing Centre at the Kirkland Lake site.

Strategic Planning with PEP was conducted to identify strategies that fully incorporate patients and families’ voices in BRH processes. Patient Experience Partners review our QIPs and feedback is incorporated. In order to support an understanding of the Quality Improvement process and the QIP, a detailed explanation of the Quality Improvement process and the QIP documents was provided.

Patient and family input suggests ways to make the QIP and the accompanying narrative more meaningful and easier to understand for those stakeholders. Suggestions include:

1. The Quality Improvement Plan (QIP) should include a section at the end to provide a definition of vocabulary and acronyms.
2. QIP documents to capture a description of specific tools or programs identified in change ideas.

Our BRH Leaders continue to collaborate with the Health Leaders of our Indigenous Communities. In 2019, BRH, in partnership with our Indigenous communities, established a Healing Centre for patients and or family members wishing to participate in traditional ceremonies while at the Kirkland Lake site. Traditional sprays are

available for those patients as an alternate smudging method at both of the BRH hospital sites

Establishing healing gardens at both hospitals sites will provide a calm and peaceful environment for our patient and families and staff. Research shows that spending time in nature and gardening helps boost mental, physical and social health.

BRH is reviewing wayfinding to enhance the patient experience. BRH is working closely with our PEP and indigenous partners to explore design and accessibility for all signage.

PROVIDER EXPERIENCE

The current healthcare environment places additional stress on our healthcare providers. Agency staffing has been heavily supporting many departments at our hospital sites. Our physician team also supports our community, which comes with challenges to balance the operation of the hospital departments and the care of community. This has led to increased wait times at our Emergency Departments as patients are limited to timely access to family providers.

Internal communication and staff recognition has been a key focus during the past years. Utilizing staff feedback to develop an annual plan, wellness initiatives including team building including pumpkin carving contests and festive door decorating, random prize draws, community food donations, staff BBQs and breakfasts served by the Executive Team, BRH hospital merchandise and staff carnivals were among the events that supported a positive team/organization culture. Our CEO has introduced a news letter – “From Jorge’s Desk” outlining on-going work and upcoming projects.

With the use of Accreditation Canada Worklife Pulse instrument, BRH is in the process of analyzing feedback from all employees and physicians. Identifying themes and developing actions plans will improve/address any flagged areas in the survey. Staff huddles and professional/departmental meetings will provide the venue for staff discussion.

SAFETY

Safety for all is a key priority for BRH.

Both hospital sites have adopted the Ontario Hospital Association

("OHA") Emergency Measures Codes and have established a common Joint Health and Safety Committee and a Emergency Measures Working Committee. These committees meet regularly and conduct inspections to identify any workplace hazards including emergency code drills. Our hospitals have an integrated Respectful Workplace Committee that meets to review safety incidents, staff safety plans and no trespass orders to ensure a safe workplace. All staff are encouraged to initiate any emergency code or to contact the police if an unsafe situation arises. A debrief and a summary of the outcome of codes is shared via email with all staff/affected departments.

Most recently, we have established a relationship with EmQ for a very timely call back procedure when help is required at the hospital sites. In our recent test, we received 100 responses in under 3 minutes with the response average time of 5- 10 minutes. This is a game changer for staff responding to an emergency as it would be impossible to call more than 5-10 staff for a response.

We have a robust on-line incident reporting system that notifies the team when any risk develops. Emergency Codes and Safety & Security incidents are also reported via the on-line system. Patient violence is flagged in the patient's chart as a critical care indicator. The team is able to trend the data and make safety improvements to provide safety for all. All staff are required to participate in on-going training for Crisis Intervention. This training is offered on-line and in-person.

The management team is available to support staff 24/7 as we have a rotating call schedule that designates a Manager-on-call. The Central Registration department at the Kirkland Lake site is staffed

24 hours providing support to staff at both hospital sites; initiate Emergency Codes and to notify the Manager on call of situations requiring escalation.

On an annual basis, the hospital sites provide mandatory education to all staff on respectful workplace, health & safety, emergency measures, infection control, quality improvement and patient safety. Many other topics such as cultural safety and sensitivity, privacy, and patient engagement initiatives are also offered. .

BRH is expanding our professional development program to include such topics of psychological mental health, diversity, equity and inclusion.

Both sites have upgraded the Nurse Call System. This new system will lead to increased staff and patient safety. The system provides staff with a badge that allows them to trigger an alarm if they face an unsafe situation.

The review of work environments and identifying safe spaces are in place to ensure secure areas are available if required by staff.

Patient safety

In September 2021, BRH surpassed the fundamental requirements of the accreditation program and received accreditation with commendation meeting 98.4% of the criteria.

Accreditation Canada's Qmentum program incorporates Required Organizational Practices ("ROP") into the standards for the patient safety areas of safety culture, communication, medication use,

work-life/workforce, infection prevention and control and risk assessment. Examples of ROPs that are part of our daily routines are hand-hygiene compliance and education, fall prevention and injury reduction, narcotics safety, high-alert medications, client identification and accountability for quality of care. BRH is 100% compliant with all of the ROPs at both hospital sites.

As we begin to prepare for our 2025 Accreditation survey, BRH is continuing to incorporate outline standards and ROPs into the everyday workflows. Education and awareness of on-going patient safety themes are discussed at weekly huddles and with teams and team members as required.

For 2024, BRH has established 3 new roles within the clinical programs that include Clinical Educator, Clinical Scholar and Geriatric Emergency Management (“GEM”) Nurse to support education and quality care at both our hospital sites.

The ONE initiative (one person, one record, one system) improves the delivery of patient and family centred care through one electronic health information system across northeastern Ontario.

BRH will go live with the Meditech Expanse project on May 14, 2024. The Expanse project is built with a common set of standards to enhance safe and evidence based patient and family focused care. Expanse transforms workflow with supported technology.

POPULATION HEALTH APPROACH

BRH will join the Timiskaming Ontario Health Team (OHT) with several health community partners including Long Term Care homes, Family Health Teams, Timiskaming Health Unit. Under the OHT healthcare providers will work to provide seamless and coordinated care, connecting patients to their local communities.

EXECUTIVE COMPENSATION

The Board of Directors (“BOD”) follows the framework for executive compensation set out by the OHA and provincial legislation. Quality indicators with targets built within the balanced scorecards are reviewed quarterly at the Board Resource & Audit and Quality and Strategic Planning committees. The BOD utilizes these indicators for decision-making.

CONTACT INFORMATION/DESIGNATED LEAD

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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

March 19, 2024




Board Chair



Board Quality Committee Chair



Chief Executive Officer



Other leadership as appropriate

