

2022/23 Quality Improvement Plan

"Improvement Targets and Initiatives"

Headwaters Health Care Centre 100 Rolling Hills Drive, Orangeville , ON, L9W4X9

AIM		Measure							Change			
Issue	Quality dimension	Measure/Indicator	Unit / Population	Source Period	Current performance	Target	Target justification	External Collaborators	Planned improvement initiatives (Change Ideas)	Methods	Process measures	Target for process measure
Theme I: Timely and Efficient Transitions	Timely	Percentage of patients discharged from hospital for which discharge summaries are delivered to primary care provider within 48 hours of patient's discharge from hospital.	% / Discharged patients	Hospital collected data / Most recent 3 month period	60%	70%	Implementation of new EMR and use of guidelines		Develop process for more regular review of documentation Conduct flow map of current physician workflow with respect to discharge dictation	Develop and implement new policy and procedure for users and reviewers Utilize alert system (as part of procedure change)	Run document deficiency report weekly	75% completion of summaries in 48 hours in first three months post full implementation
Theme II: Service Excellence	Patient-centred	Percentage of respondents who responded "completely" to the following 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?	% / Survey respondents	CIHI CPES / Most recent 12 mos Feb 2021- Jan 2022	69.30%	75%	Modest improvement target with change in methodology for survey administration		Increase patient response to survey	Initiate real time surveys at bedside, administered by volunteers	Real time survey development and implementation on 1 unit by end September 2022	completion of 25 surveys in first month post implementation
Theme III: Safe and Effective Care	Effective	Medication reconciliation at discharge: Total number of discharged patients for whom a Best Possible Medication Discharge Plan was created as a proportion the total number of patients discharged.	Rate per total number of discharged patients / Discharged patients	Hospital collected data / October 2021– December 2021	60%	75%	Modest improvement target with change in methodology for survey administration	Royal Victoria Hospital, Collingwood General & Marine Hospital, and Georgian Bay General Hospital	Regional Team to develop common process for reporting to track trends (new EMR across sites)	Pharmacy is developing an education plan for the ED and 1 inpatient unit to increase completion	Weekly review of completion of discharge med reconciliation on the two units; % of staff and physicians completing education	90% of staff and physicians completed education plan
									Develop a process flow for Emergency Department to eliminate use of paper prescription pads	ED leaders, nurses and physicians to (1) understand current process (2) develop revised process to improve documentation for discharge BPMH	Run weekly discharge BPMH report	75% of ED patient charts indicate completion of discharge BPMH
	Safe	Number of workplace violence incidents reported by hospital workers (as defined by OHSA) within a 12 month period.	Count / Worker	Local data collection / January - December 2021	39	39	Maintain current reporting status while looking to increase action completion %		Continued dissemination of deescalation practices and procedures	Delivery of Management of Aggressive Behaviours (MOAB) training	4 sessions within the calendar year	4 successfully completed sessions by Q4
Workplace Violence embedded into Joint Health and Safety committee (JHSC) to develop and recommend actions based on incidents and risk assessments									Develop action plans based on recommendations following incident, inspections and risk assessment reviews at monthly JHSC meeting	% of actions completed by end of year	70% of recommended actions completed	