

Let's Make Healthy
Change Happen.



Quality Improvement Plan (QIP) Narrative for Health Care Organizations in Ontario



QIP 2021-22

This document is intended to provide health care organizations in Ontario with guidance as to how they can develop a Quality Improvement Plan. While much effort and care has gone into preparing this document, this document should not be relied on as legal advice and organizations should consult with their legal, governance and other relevant advisors as appropriate in preparing their quality improvement plans. Furthermore, organizations are free to design their own public quality improvement plans using alternative formats and contents, provided that they submit a version of their quality improvement plan to Health Quality Ontario (if required) in the format described herein.

ontario.ca/excellentcare

Overview

To the Residents, Workers and Visitor’s of our beautiful South Georgian Bay community of Collingwood, Clearview Township, The Blue Mountains and Wasaga Beach:

Collingwood General and Marine Hospital (CGMH) has never been more proud to serve you. March 11th, 2020 will forever remain a day etched in our memories. The days and weeks which followed the announcement of the COVID-19 pandemic have surpassed a fateful anniversary, summoning local and system level response to protect our patients/their caregivers, employees, physicians, volunteers and the community. At CGMH we would like to honour and express gratitude to the partnerships we have strengthened over this past year with our local health partners, emergency and community services. CGMH remains committed to providing “Outstanding Care – For Life”, and your support will allow us to preserve health through compassion, collaboration and innovation to provide the best care possible during these extraordinary times.

While operational changes under the guidance of Ontario Health have been necessary to support patient and employee safety, we have continued to focus on providing the best possible care and experience by adapting how we provide services. Our core programs include Emergency Services, General Medicine, General and Orthopedic Surgery, Obstetrics and Gynecology. We continue to strive to bring care closer to home through the delivery of outpatient care via virtual and onsite care through our outpatient clinics including medical daycare, orthopedic clinics, outpatient mental health, telemedicine services, cardiac and orthopedic rehabilitation services. This Quality Improvement Plan (QIP) represents CGMH’s annual quality commitments outlining system focused quality indicators, performance data and measurement milestones. As a medium sized hospital ambassador, our plan aligns with our provincial health system vision to deliver safe, effective, equitable, patient-centered care in a timely and efficient manner.

The 2021-22 QIP follows a year of unparalleled transformation. At this time, the health of our nation and our people require us to carefully consider this year’s plan taking into account our current environment and the commitments we have pledged. In addition, our traditional consultation processes are limited and capacity to launch new initiatives is stressed. For this reason, we have built upon last year’s commitments to strengthen and sustain quality and innovation at CGMH.

CGMH is dedicated to improving the quality of care we provide to our community. This year’s Quality Improvement Plan (QIP) will continue to highlight and strive for excellence in 4 key areas aligning with our strategic priorities: Patient Experience, Partnership, Innovation, and Our People.

Strategic Pillar	Quality Improvement Plan 2021-22
Patient Experience	Did you receive enough information when you left the hospital about what to do if you were worried about your condition or treatment after you left the hospital?
Partnerships	Repeat emergency visits for mental health
Innovation	Reduction of ED wait time to in patient bed
Our People	Reduction of workplace violence incidents

Describe your organization's greatest QI achievement from the past year

COVID-19 Pandemic Response

All employees, physicians, midwives and Leaders have worked hard to continuously roll out directives from the Ministry of Health to provide hospitals with capacity to deal with surges in COVID-19 positive patients. Quality initiatives focused on multiple initiatives including:

- The implementation of a comprehensive Personal Protective Equipment strategy, including evaluation and sustainability plans;
- Ramp down of multiple services including non-urgent and elective/scheduled care and procedures; ambulatory and mental health clinics;
- Redeployment of employees to provide care in our hospital and to support our LTC partners;
- Creation of the COVID-19 Assessment Centre at the front of the hospital, later moved to the Collingwood Legion and now run by the Georgian Bay Family Health Team;
- Established an Alternate Health Facility (AHF) at the Collingwood Legion to care for patients in the event of a surge and subsequent opening December 2021;
- Introduction of Personal Support Workers, a new role for CGMH, recruited from outside our local system partners;
- The addition of an Intensive Care Unit bed with the ability to support COVID-19 patients;
- Reconstruction of patient care areas across the organization to optimize capacity; improve physical distancing and support safe patient care;
- As part of the North Hub of the GTA Incident Management System (IMS), we accepted COVID+, non-COVID, COVID-recovered and Alternate Level of Care (ALC) patients to support equitable access to care across the province; and
- Ongoing amendments to the delivery of care practices and processes throughout the organization to support infection control practices and patient flow processes.

Daily Change Initiatives Program

In 2012-13, our positive change journey began with the implementation of the Daily Change Initiative recognition program. Any department employee from frontline to senior leadership could submit a completed change idea resulting in improvements in their workplace. Aligning the change ideas with the CGMH strategic pillars (Patient Experience, Innovation, Partnerships, Our People), we are able to celebrate our achievements, improve quality of patient care and workplace environment, as we move our strategic plan forward. In 2020-21, CGMH employees submitted 520 Daily Change Ideas demonstrating our continued support to quality improvement across the organization (Fig. 1).

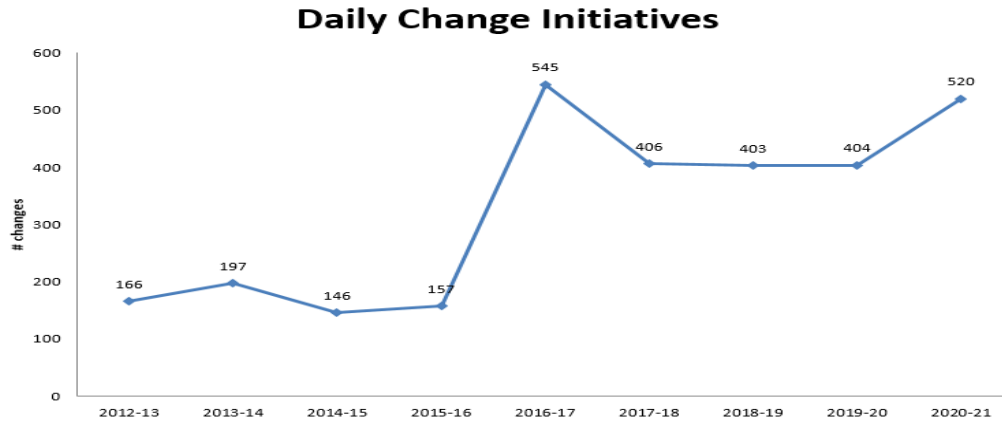


Fig. 1 In 2020-21, CGMH employees submitted 520 Daily Change Ideas demonstrating our continued support to quality improvement across the organization.

Cardiac Services

Now, when a patient presents to CGMH with heart attack symptoms they will be transported directly to Royal Victoria Regional Health Centre's (RVH) Cardiac Intervention Unit for their lifesaving treatment. This change is the result of a quality initiative called the Simcoe Muskoka Code STEMI Protocol, first introduced to the county in November 2020 and rolled out to the residents in the Collingwood and Midland area in February. This phased, gradual approach to bringing the 'gold standard' of cardiac care to the people of Simcoe Muskoka is the result of a partnership between RVH, the County of Simcoe Paramedic Services, Rama Paramedic Services and area hospitals. The 'gold standard' of care is achieved when a patient coming from a community hospital receives advanced cardiac care in less than 120 minutes from onset of symptoms. Over this next year, we will continue to support this partnership and advance the quality of care.

Mental Health Crisis Clinic Pilot

In September 2020, following a lean improvement session to map out processes, develop a standard operating procedure and provide education, we successfully launched a pilot to open the Mental Health Crisis Clinic. The clinic was developed to service referrals from the Emergency Department physician with the goal of reducing wait times in the Emergency Department (ED), reducing ED re-admissions and revisits; and improve patient experience. The Clinic is staffed by registered allied health professionals where they provide time limited support to link individuals to community support and offer single session counselling.

Results of the Pilot:

- A total of 24 referrals were made to the Mental Health Crisis Clinic
- Although there was a 29% No show rate, follow-up calls completed with each patient identified the crisis was resolved the next day and the patient no longer felt a clinic appointment was required

In 2021-22, future opportunities will include identifying ways to increase referrals with the overarching goal to reduce revisits to the ED.

Shared Electronic Medical Record (EMR) System (CARE4)

In partnership with Georgian Bay General Hospital (Midland), Headwaters Health Care Centre (Orangeville) and Royal Victoria Regional Health Centre (Barrie), we are working collaboratively to transform our shared Health Information System (HIS). This initiative aligns with the future vision for health across our province by creating an integrated, seamless system of care, supporting the ‘one patient; one record’ approach.

Use of this advanced technology will:

- improve quality, safety and timeliness of care;
- reduce errors and duplication that may lead to a patient safety incident;
- provide real-time access to vital patient information;
- reduce duplication of ordered tests; and
- eliminate medical history duplication for patients, as they won’t have to keep repeating it with every new clinical interaction, as they navigate through our complex healthcare system.

There are many patients who move between our four hospitals for specialized services and emergency care. If a patient receives specialized care at one hospital, physicians at their “home” hospital will have access to accurate information about their visit. Being able to view a patient’s complete medical record at any of our hospitals, at any time, is a huge benefit to patient safety.

Collaboration and Integration

Reducing ED Wait Times to Inpatient Bed

The pandemic has placed tremendous pressure on patients and capacity throughout the health system and although CGMH saw a 20% decrease in patient visits to the ED, CGMH faced many constraints that occur within an older building. It is during these hardships where we come together to innovate and look beyond the lens, through which we view and envision our future.

Our teams knew early on that additional capacity offered only by an off-site location was a priority. As such they worked tirelessly to establish an 18-bed Alternate Healthcare Facility (AHF) at the Legion and opened on December 7th, 2021. Capacity at the AHF has fluctuated between 22% and 50%, allowing the hospital to stretch capacity to 122% when necessary while preserving patient flow during times of increased demand.

We transformed outpatient care areas to support patient flow initiatives including the Endo Surge Beds; redefining clinics to add functional space to the Emergency Department; and will continue over this next year to optimize our footprint through innovation. This next year will involve defining our new normal processes to support quality patient care.

To facilitate a timely transition, CGMH will continue to support initiatives to ensure:

- Adequate discharge cleaner scheduling and resources to sustain a bed dirty time of less than 40 minutes to maximize bed availability for admitted patients;
- Support “shared unit worker” and personal support worker positions to focus on supporting timely transfers and strategies to support care by the right care provider during the pandemic;
- Identify opportunities to optimize inpatient pull strategies to transfer patients out of the ED using LEAN improvement techniques;

- This past year a frontline team of nurse champions implemented a revised process for providing Transfer of Accountability, a process to provide important information to receiving areas and improve timeliness of transfers, and will continue on this initiative over the next year as a stepping stone to future patient record process advancements.
- Optimize outpatient clinic procedures to reduce unnecessary visits/treatments in the ED

Discharge Process Improvements

- CGMH will continue to engage patients through surveys to better understand if the information received is enough information from hospital employees about what to do if they are worried about their condition or treatment after they leave the hospital? We feel this is an important initiative especially during the pandemic.
- Strengthening our communication on discharge will continue as a priority opportunity, as we include interactive Teach-Back training to improve the communication between patient/caregiver and healthcare provider.
- As a result of structural changes over the past year and in recognition of the significance of Patient Care Boards at the bedside, the new care boards will be implemented to optimize communication on discharge.
- Over this next year, Leaders will continue to introduce patient rounding to promote a culture of safety and further our vision to deliver patient-centred care.

Alternate Level of Care (ALC)

Across the province, we all bared witness to the heartbreaking crisis in our Long-Term Care (LTC) facilities. In April 2020, the Ministry of Health issued a call to action for Hospitals to prepare and volunteer healthcare workers to provide staffing support. CGMH team members quickly answered the call to volunteer should the need arise.

In January 2021, the GTA Incident Management System (IMS) called upon CGMH and other partner hospitals to prepare to accept ALC patients to relieve the pressure on acute care beds at GTA hospitals. As we answered the call to support our healthcare partners, the Patient Flow Coordinators underwent their own team redesign and implemented measures to support internal ALC flow; meet additional infection prevention controls and support COVID-19 outbreak management protocols. Our most successful strategy remains early identification and discharge focused conversations.

We anticipate Long-Term Care wait times and limited access to home care will continue to be a challenge for patients ready for discharge from hospital in the coming year. Through collaborative partnerships we will continue to enhance care for our patients including those who require an alternative level of care. Our ongoing commitment to this strategy is essential to the communities we serve and the partners we support.

Patient/Client/Resident Partnering and Relations

Our commitment to serve you has never been stronger. Under Ontario Health's guidance, we have completed required operational changes to keep you safe including:

- Screening Procedures upon entry to the hospital
- Designated Visitor guidelines with 4 phases to support the hospital's COVID-19 response procedures and reduce the risk of transmission
- Reduction in scheduled surgical and procedural services to ensure capacity

- Enhanced cleaning in patient care areas and between all appointments
- Access to hospital approved Personal Protective Equipment (PPE)
- Liaison services to support virtual sessions to connect with family and friends

Our Patient, Family & Caregiver Advisory Committee (PFCAC) serves in an advisory capacity to improve the patient and caregiver experience. In 2021-22, our focus will include developing a plan for patient, family and caregiver participation in our ever-transforming healthcare environment; enhancing recruitment and onboarding processes to welcome additional members to our PFCAC; and partnering with patients/caregivers to co-designing care in partnership with patients and caregivers to improve healthcare care quality and safe transitions.

In addition, we will continue to collect patient and caregiver input and recommendations through a variety of mechanisms including: Patient Experience Surveys; Discharge Phone Calls; and patient relations processes; to provide inform organizational and departmental quality improvement opportunities.

Although the pandemic may have transformed the way we provide care to patients and caregivers, our pursuit to provide the best possible care and experience remains at the center of our work this past year and will continue to inspire our commitment to deliver safe, effective, equitable, patient-centered care in a timely and efficient manner.

“The nursing care at CGMH is outstanding...by far superior, in my experience, than any of the previous hospitals where I had major surgery. How very fortunate our community is to have nurses that go above and beyond, especially during this most stressful period.” – Jim, CGMH patient

Workplace Violence Prevention

At CGMH, we continue to engage in our workplace violence prevention program in partnership with members of our Joint Occupational Health and Safety Committee, Union representatives, leaders and frontline employees.

Key initiatives over this past year that will inform our plans in 2021-22 include:

- Access to training for identified workers to support various strategies including de-escalation techniques; managing responsive and managing responsive behaviours;
- Access to leadership training to support workers who have experienced violence in the workplace
- Continued follow through on reviews to investigate and respond to reports of incidents;
- Follow up on preventive risk assessments;
- Access to the Personal Safety Response System (PSRS) linked to security for emergencies;
- Policies and procedures recently updated will be monitored for any required changes; and
- Trained security personnel to respond and support the safety of our workers.

As a result of COVID-19 restrictions with in-person training, we have developed and trialed alternative virtual options to support training and will continue with this work during 2021-22.

Virtual Care

Virtual Care encompasses all of the ways healthcare providers remotely interact with their patients allowing patients to receive care in the most convenient, timely and appropriate way. Patients can safely and securely

connect by video or audio with a specific healthcare professional. CGMH utilizes virtual care through the Ontario Telemedicine Network (OTN). OTN involves working with our community and partners to modernize consumer access to care. Our partnership with RVH and the Simcoe Muskoka Regional Cancer Program is our most utilized virtual care service.

The pandemic lockdowns compelled teams to strategize and initialize innovative ideas to support patient care and improve their experience. Some examples of our quality initiatives using technology to bring care closer to home include:

- Over 126 virtual connections focused on linking patients with their families and friends;
- The expanded use of Pre-Operative Clinic phone consultations to prepare patients for operative procedures

We anticipate this work will only continue to develop and flourish during 2021-22 as we pioneer novel approaches to care for our patients, caregivers and to advance the health of our community.

Executive Compensation

In 2009 the Hospital developed and introduced a “pay at risk” component for the senior leaders as a portion of the compensation framework. At the end of each fiscal year, performance indicators and targets are established for the forthcoming fiscal year in collaboration with the Hospital Board. These performance metrics are aligned to the Hospital’s strategic and clinical plans and include measures within our annual Quality Improvement Plan (QIP), as per the Excellent Care for All Act (ECFAA).

For those senior leaders whose compensation is subject to the ECFAA legislation, a percentage of their total compensation is tied to the achievement of the annual performance targets approved by the Hospital’s Board in the required pay at risk format. The percentage of compensation tied is 8% of the total salaried compensation. Within this portion of the incumbent’s performance compensation, 70% is tied to the achievement of the annual performance goals established for the Hospital by the Board. The remaining 30% is tied to achieving targets of the identified Hospital QIP indicators as described in this report.

Position	Pay for Performance %	Performance Indicators
President & CEO	8%	Hospital Indicators (70%) QIP Indicators (30%)
Chief of Staff		
Vice Presidents		

Measures which are included in our QIP for the 2021-22 year and have been linked to the above performance compensation include:


- **PATIENT EXPERIENCE:** Percent Positive Responses to “Did you receive information from hospital staff about what to do if you were worried about your condition or treatment after you left the hospital?”
- **OUR PEOPLE:** Number of workplace violence incidents reported by hospital workers (as defined by OHSA) within a 12-month period.
- **INNOVATION:** Emergency Department Wait Time to Inpatient Bed
- **PARTNERSHIPS:** Percent of unscheduled repeat emergency visits following an emergency visit for a mental health condition

Contact Information

Kelly-Anne Rowntree
Quality and Innovation Coordinator
705-445-2550 x8425
Collingwood General and Marine Hospital
459 Hume Street, Collingwood, ON, L9Y1W9
www.cgmh.on.ca

Sign-off

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

Board Chair  Lesley Paul

Board Quality Committee Chair  Geoff Davies

Chief Executive Officer  Norah holder

Other leadership as appropriate _____ (signature)