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

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.

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Overview

A Quality Improvement Plan (QIP) is an important health system transformation tool, and it is the North Simcoe Muskoka Local Health Integration Network’s public commitment to meet quality improvement goals. Aligned with achieving better health for all Ontarians, North Simcoe Muskoka Local Health Integration Network (LHIN) Home and Community Care strives to continuously improve care delivery. As an organization that holds an Exemplary Standing from Accreditation Canada since 2011, the North Simcoe Muskoka LHIN places timeliness, safety, effectiveness, efficiency, equity, and patient-centred care at the forefront of Home and Community Care.

Year over year, LHINs in Ontario advance the health care quality agenda by evolving commitments to put patients at the centre of the system. Through learnings garnered from our 2018/19 QIP activities, we continue to build on a strong culture of continuous quality improvement. We are committed to working hand-in-hand with partners in care – patients, their caregivers and families, our Home and Community Care team, health service providers, and community organizations. We leverage strong relationships with these partners to improve timeliness of care, to achieve safe quality health outcomes, and to improve overall health care experiences for patients and their caregivers, all while realizing the best value from finite health resources.

The North Simcoe Muskoka LHIN’s 2019/20 QIP, in alignment with Health Quality Ontario (HQO) priorities, is focused on three key themes: timely and efficient transitions, service excellence, and safe and effective care. The seven indicators selected align with these key themes and will guide our quality improvement work for the upcoming year. QIP targets for these indicators are woven into our service accountability agreements, provider contracts, Annual Business Plan, Integrated Health Service Plan (2019-2022), and the Home and Community Care Integrated Patient Safety Plan.

Of these seven indicators selected for improvement, four are provincial home care sector indicators and three are unique to North Simcoe Muskoka:

**Timely and Efficient Transitions**
1. Unplanned Emergency Department (ED) visits within 30 days
2. Wait time to long-term care home placement (community and hospital)

**Service Excellence**
3. Patient Satisfaction (KPI 1 – Client and Caregiver Experience Evaluation)
4. Palliative Caregiver Satisfaction (Caregiver VOICEs Survey)*

**Safe and Effective Care**
5. Patient Safety Culture (Patient Safety Culture Tool)*
6. Patient Safety (KPI 9 – Client and Caregiver Survey)*
7. Early Identification: Documented assessment of needs for palliative care patients

*indicator unique to North Simcoe Muskoka.
Who We Serve

Each year, the North Simcoe Muskoka LHIN cares for more patients who have increasingly complex care needs. There is a long-standing focus on partnerships to ensure patients have access to the right level of care through cross-sector partnerships with hospitals, Health Links, community care, long-term care and primary care.

North Simcoe Muskoka continues to be challenged by alternative level of care (ALC) rates. We continue to champion addressing ALC issues at a local level by working with sub-region planning tables and with system partners to identify opportunities to better support patients in the most appropriate care environments. Learnings and achievements captured through our ALC review have informed system change recommendations.

We focus on a range of initiatives to improve health equity for our most vulnerable patients, their caregivers, families and residents living in communities across our region.

Francophone Populations

We have adopted an ‘active offer’ approach to French Language Services at the North Simcoe Muskoka LHIN. This means we place an emphasis on making French Language Services proactively announced, visible, and easily accessible. In 2018/19, approximately 75 per cent of our staff completed Active Offer of French Language Services training, and planning is underway to launch an active offer virtual learning module in 2019/20. To augment active offer of French Language Services efforts, we enhanced our Home and Community Care intake process by making identification of mother tongue and preferred language spoken mandatory for all Home and Community Care clients.

We also created a French Language Services Steering Committee in 2018/19 to further embed the needs of our French-speaking population into planning and operations of everything we do at the North Simcoe
Muskoka LHIN. This committee is tasked with applying a health equity lens to operational policies and procedures of the organization, and to improve planning for and delivering culturally safe care.

Indigenous Populations

We continue to provide Indigenous Cultural Safety training to our staff and staff from our funded health service provider organizations. The training addresses the need for increased Indigenous cultural safety within the system and provides an opportunity for participants to examine the ways in which their own culture, education, and history have shaped their approach to providing health care and services.

Since 2016, nearly 100 of our own staff and 450 staff from our funded health service providers have completed Indigenous Cultural Safety training, and we anticipate an additional 70 North Simcoe Muskoka LHIN staff will take Indigenous Cultural Safety Training in 2019/20.

Greatest Quality Improvement Achievements from 2018/19

Finding Solutions for Patients Waiting for Personal Support Services

We are currently experiencing a shortage in Personal Support Workers (PSWs) in North Simcoe Muskoka. This resource capacity challenge is a major contributing factor to wait-times for personal support services in our region. We understand personal support services are crucial to ensuring patients and families receive care when they need it, and where they want to receive it.

Since the development of a Personal Support Capacity Dashboard in April 2017, we have actively monitored personal support capacity on a monthly basis through a number of indicators which speak to patients' access to timely care. We also continue to lead a priority initiative with community partners to identify long-term sustainable strategies to reduce the gap between personal support worker supply and demand.

The North Simcoe Muskoka LHIN launched a project focused on identifying the key drivers of the growing gap between the supply of PSWs and the demand for their services in spring of 2017. Since then, we have continued to implement change ideas identified by a number of local stakeholders at a planning forum held in November of 2017, and continue to engage with community partners to identify additional areas for improvement.

We undertook a number of initiatives throughout 2018/19 to examine factors affecting personal support capacity challenges and to maximize resources within the community.

Help Us Help You

We have partnered with patients and families through the Help Us Help You initiative. Communication tools support Home and Community Care staff to proactively work with patients and caregivers to identify changes in daily routines, physical abilities, or increased flexibility in scheduling to improve access to PSWs.
when they are needed most. The *Help Us Help You* initiative recognizes flexibility as a key driver to delivering quality care to all patients.

By creating awareness in an environment where resources are limited, we are able to partner with patients, families, and caregivers in creating solutions that help to ensure support for individuals to receive care and remain in their communities for as long as possible.

**Optimizing Use of All Available Personal Support Capacity**

The North Simcoe Muskoka LHIN launched a six-month pilot to improve access to PSWs for retirement home residents in December 2018. The pilot aims to increase Personal Support capacity within the community by working closely with service providers to schedule teams of Personal Support Workers in shifts.

Patients in two pilot-location retirement homes will receive personal support services by teams of personal support workers at a greater frequency but in smaller increments of time. Structuring the provision of personal support services in a shift-based model allows for PSWs to care for multiple patients, with greater flexibility to meet the needs of patients, and with better consistency and continuity of care. Evaluation will take place in 2019/20, following the six-month pilot. We will continue to work closely with health system partners to assess the impact of this new model of care on PSW capacity in the community.

The North Simcoe Muskoka LHIN has also focused on maximizing existing health care resources in the community beyond those traditionally associated with personal support services. This includes expansion of the community paramedicine program, selective substitution of nursing, and implementation of a kinesiology-based program to optimize functional independence and reduce demand for personal support services for some patients.

**Extensive Engagement of PSWs**

“We need to make the PSW field more desirable [in pay and benefits], so that people are more inclined to pursue this as a career.”

- NSM LHIN Health Service Provider

We recognize and value the important role Personal Support Workers play in ensuring timely access to high-quality care for the patients, clients, and residents we serve. We also recognize personal support work is a difficult and demanding job, and many partners are working together to position personal support as an attractive and viable career choice.

In late fall of 2018, we engaged with more than 200 PSWs in the region to identify opportunities for positive change. Nine focus groups were held at different locations across North Simcoe Muskoka. Along with an online survey for those unable to attend in person, we gathered insights about job satisfaction, challenges, and changes related to the career, and personal education/training experiences.

**Collaborating with Educational Institutions to Minimize Barriers**

“My instructor was very focused on a holistic approach, she taught us to always consider the person as a whole: mind, body and spirit. I think this is very important, otherwise the role of PSW becomes too task-oriented,” said a PSW from North Simcoe Muskoka, when asked to think back on their personal support education and aspects that worked really well to support them in their work.

We continue to work with educational institutions to break down barriers to accessing PSW education programs. We have also broadened our scope of focus beyond post-secondary education, to promote PSW
as a career path for youth. We are working with the Simcoe County District School Board to consider opportunities for increasing dual-credit programs and/or to graduate PSWs directly from high school.

For post-secondary students specifically, we are working with contracted service providers to address barriers to clinical placements in community settings. We have also offered advice to the Ministry of Health and Long-Term Care regarding expansion of the Ontario Student Assistance Plan (OSAP) to certificate programs.

We are also exploring opportunities to increase availability of ongoing training that promotes high quality safe patient care and PSW safety, such as Gentle Persuasive Approach (GPA) training for dealing with responsive behaviors.

Championing Change at a Provincial Level

"If people could access the appropriate services in a timely manner, it would alleviate the demand for emergency services for issues that are not emergencies"– NSM LHIN resident

In November of 2017, the North Simcoe Muskoka LHIN was proud to release our first PSW report titled Personal Support Services: Examining the Factors Affecting the Gap between Supply and Demand in North Simcoe Muskoka. This report showcased our best advice to the Ministry of Health and Long-Term Care, including:

- Ensure educational standards support the core competencies required to provide safe, high quality care to today’s patients;
- Breakdown barriers to accessing education;
- Expand options in the delivery of personal support services;
- Modernize the home care service delivery model;
- Rebrand personal support to be within the continuum of nursing; and
- Continue PSW wage enhancements.

We continue to work closely with the Ministry of Health and Long-term Care, pan-LHIN colleagues, and partners in care to explore opportunities that help to ensure all Ontarians have access to quality, safe care and can remain in their communities for as long as possible.

Opioid Prescribing for the Treatment of Pain and Opioid Use Disorder

The North Simcoe Muskoka LHIN continues to lead regional work to improve narcotic safety within the region. In 2018/19, the Home and Community Care Nurse Practitioners and Care Coordinators, and the LHIN physician leads worked closely with Bayshore Specialty Rx, our contracted vendor, to create a new Pain Pump order set. With enhancements focused on patient and family safety, the new order set has many opioid safety enhancements to improve communication with the prescriber, the pharmacy, the nurses, and the LHIN for safe medication documentation and administration to the patient.

Building on enhancements made in 2017/18 to our Symptom Relief Kits, all kits now contain a narcotic accountability document for nurses and caregivers, along with a list of kit contents. As well, significant improvements have been made to the Symptom Relief Kit ordering and removal process. This allows kits to be collected in a timely manner by our contracted pharmacy once they are no longer required for pain and symptom management. Work will continue into 2019/20 to make further improvements to our Symptom Relief Kits and related processes.

At a regional level, the North Simcoe Muskoka LHIN and the Simcoe Muskoka District Health Unit have co-led an initiative called the Simcoe Muskoka Opioid Strategy (SMOS). Formed in 2017, the Simcoe Muskoka Opioid Strategy is a regional collaborative effort addressing the opioid crisis. It is founded on a multi-pillar
approach (prevention, treatment/clinical practice, harm reduction, enforcement, and emergency management as action pillars, along with data and evaluation and lived experience as foundational pillars). The first SMOS report was published in July 2018 with the goal of providing a common understanding of the opioid crisis and the need for a collaborative response. It outlines a comprehensive plan to move the region forward over the next three years to address this complex issue. In 2019/20 we will use pillars to guide a staff education day on best practices to support patients in our community who are struggling with substance use.

In addition, the health planning table for the South Georgian Bay sub-region has taken a grassroots approach to opioid-related quality improvement and will be identifying a shared indicator specific to opioid-related morbidity and mortality rates. Moving forward in 2019/20, health care organizations within this sub-region, will have a shared focus on reducing opioid-related morbidity and mortality rates in their respective quality improvement plans.

Initiatives to Improve Patient Safety

Patient safety continues to be a priority area for the North Simcoe Muskoka LHIN. Efforts in 2018/19 focused on reducing medication errors, and promoting a culture of taking a quality improvement specific to patient safety, both within our organization and in collaboration with health system partners.

The Good Catch program was officially launched in November 2018 during North Simcoe Muskoka LHIN’s Patient Safety Days. At that event, 22 of our Home and Community Care staff, along with staff from service provider organizations, were recognized for their reporting of a ‘near miss’ event, based on data from Q1 and Q2 2018/19. Through the reporting of near miss events, the Good Catch program aims to encourage all staff to take a proactive approach to quality improvement and promotes a culture of safety in preventing the re-occurrence of similar events. We look forward to continuing this program into 2019/20.

In response to medication errors involving pumps affecting our Home and Community Care patients, we developed and implemented an independent double check process in 2017/18 to reduce the number of errors in the community in partnership with our contracted service providers. This process ensures the pain pump has been correctly programmed and patients are receiving the correct concentration of medication. Despite this and other improvements made to practice and process in past years, medication errors involving pain pumps persisted into 2018/19. A structured analytical quality improvement exercise (pFMEA) was completed with Home and Community Care staff and service providers. The highest risks in our processes that contribute to medication errors involving pumps were identified and a detailed improvement plan was developed with input from our Care Coordinators, provider partners, and pharmacy vendor representatives. With support from various stakeholders, this improvement plan was initiated in 2018/19 with an initial focus on improving the safety of patients admitted and discharged from hospital receiving infused medication via pump and will continue in to 2019/20. The close monitoring and trending of data related to medication errors and the sharing of this information the Patient Safety Committee, which includes staff from Home and Community Care and contracted service provider organizations, will continue in 2019/20.
Patient/client/resident partnering and relations

Quality improvement initiatives outlined in this plan exemplify our commitment to improving the safety and quality of care provided to residents of North Simcoe Muskoka. By collaborating with patients, families, contracted service providers, and cross-sector partners, we leverage data and other evidence to make improvements together.

In 2018/19 we engaged with the North Simcoe Muskoka LHIN Patient Family Advisory Committee for input on enhanced integration between primary care and care coordination. Led by our Vice-President of Home and Community Care, the thoughts and experiences from Committee members about care expectations, experiences with transitions in care, and insights on the relationship between primary care and home and community care were collected. This input along with the engagement of sub-region planning table members informed the improvement opportunities to move forward in integrating primary care and care coordination.

Patients and their caregivers, receiving services from our Home and Community Care team and contracted service providers report high levels of satisfaction with their care experience. We turn to the voices of patients and caregivers in a commitment to ongoing improvement in the quality of care that patients receive in-home, in clinic settings, and during transitions in care. We use patient and caregiver survey results to guide person/patient-centred change ideas such as the development of the Coordinated Care Plan (CCP) and to ensure the lived experiences of patients, families, and caregivers influence positive changes to the care that patients receive.

The North Simcoe Muskoka LHIN gathers feedback in a variety of ways to capture diverse experiences from those receiving Home and Community Care services in North Simcoe Muskoka. Year over year, we have leveraged findings of the VOICEs survey to improve the provision of quality palliative care. The year 2018/19 was the first to apply an expanded VOICEs survey to collect feedback and insights not only from caregivers about the experience of care provided in the patient's last month of life in the home, but also for end-of-life care experiences within residential hospices in the region. Information gathered through the VOICEs survey was shared with the Regional Palliative Steering Committee, and will be used as a source of information in identifying quality improvement opportunities across the region.

This year, work continued to evolve a culture of quality improvement and patient safety through the quality of care review process following critical patient safety incidents. Opportunities were sought for patients and families to be involved in the process specifically in the information gathering stage to assist the care team in their understanding of the concerns and expectations of patients and families for improvement. As well, all recommendations for improvement are provided to the patient and caregiver to review and provide feedback. In 2019/20, we will continue to evolve this engagement process with a plan to include patient partners on incident analysis teams.

Workplace Violence Prevention

We take a proactive approach to monitor, reduce, and prevent workplace violence. By using the Safety and Services Issues Framework with supporting policies and tools, staff and contracted service providers are guided through situations where a patient’s care environment poses a risk to our staff and/or our contracted service providers.

In the fall of 2018, Home and Community Care staff refreshed the Safety and Service Issues Management Framework – Risk to Patients, Staff and Providers. This guiding framework provides our staff with resources to manage identified risks to patients, staff, or service providers. Initially addressing exclusively risk to staff and service providers, the framework and associated resources were further enhanced to include processes and practices that support and manage patient risk. Resources such as a Risk Response Stream, Risk Identification and Assessment Matrix, and other aids, were shared with Home and Community Care and service provider staff. As patient risk was a new framework element, education focused on both patient-assumed risk and vulnerable patients who become at risk due to the presence of conditions, diagnosis or other factors beyond the patient’s control.
Supporting vulnerable patients in our community was further reinforced at a patient safety education day. This included presentations and panel discussions by a local geriatrician, the Canadian Mental Health Association, and the Central East Stroke Network. In 2019/20, we will continue to develop proficiency and knowledge among our staff related to management of patient, staff, and service provider risk.

In 2017/18 we developed a “Safe at Work” mobile application for all organizational cell phones and tablets. The Safe at Work application was introduced in a phased approach beginning in Q4 2017/18. It introduced staff to the application as the portal for all emergency-related resources. Planning for phase two implementation occurred in 2018/19, with a Work Alone check in feature being added to the application. This feature will be introduced to our Care Coordinators and Direct Nursing staff in Q4 2018/19 and will be used during home visits that occur outside of normal business hours.

All critical patient and staff safety events, and other patient safety events where a trend has been identified, are reviewed by our Home and Community Care Quality of Care Committee with critical harm events being reported to the Board through quarterly organizational performance reporting. The committee aims to develop recommendations for improvement to minimize the re-occurrence of similar events in the future. The table below highlights reported risk events to staff and contracted service providers over a 12-month period (Q3 2017/18 to Q2 2018/19). Of the 52 reported staff safety risk events, seven involved North Simcoe Muskoka LHIN Home and Community Care staff, and 45 involved contracted service providers. Historically the most common reportable event type was ‘Abuse, Threat, and Injury to Staff’ however, data from the second quarter of 2018/19 indicates the highest number of events were reported in the ‘Unsafe Client Environment’ category. While reducing workplace violence and harassment during the provision of patient care continues to be a priority, particular attention will be placed on ensuring staff safety measures are in place prior to visiting client environments.

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The Safe at Work application is a centralized location for emergency-related resources, comprised of: the North Simcoe Muskoka LHIN live twitter news feed; Environment Canada weather alerts; a list of emergency contacts (both urgent and non-urgent); on-call resources for staff (to reach the Manager-On-Site or Director-On-Call); North Simcoe Muskoka LHIN Emergency Plans (Decision Tree, Incident Management Structure, Manager’s Checklist, Fire Safety Plan, Tornado Safety Plan, and the Code White Response Plan); site maps of all three office locations; and a personal safety toolbox.
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Other

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

Board Chair ____________________________ (signature)

Quality Committee Chair or delegate ____________________________ (signature)

Chief Executive Officer ____________________________ (signature)

Other leadership as appropriate ____________________________ (signature)