

QUEENSWAY CARLETON HOSPITAL

Patient Safety Plan

2022-2024

PREFACE

The mission of the Queensway Carleton Hospital is to provide high-quality, compassionate and coordinated care for the people and communities we serve.

To provide exemplary patient care, all aspects of quality must be considered, including population focus, accessibility, safety, work-life, client-centred services, continuity, effectiveness, and efficiency. Patient safety is a key component of service provision and a strategic priority of Queensway Carleton Hospital. At QCH, we have established systems and processes that minimize the likelihood of errors and maximize the likelihood of intercepting them so they won't occur.

Accreditation Canada states that patient safety plans may include a range of actions and approaches, such as mentoring team members, articulating the role of leadership in safety, implementing organization-wide patient safety initiatives, accessing evidence and best practices, and recognizing team members for innovations to improve patient safety. In addition, the Canadian Patient Safety Institute (2019) states that healthcare systems are safer, and patients will have improved experiences and better outcomes when patients, families and the public are intentionally engaged in program and service design and delivery. Patient and family engagement is essential to safe care. Partnering with patients shows respect, values their insights and experiences and empowers them to take an active role in their care and shared decision-making.

QCH's Patient Safety Plan (PSP) was informed and developed by numerous sources, including the Quality Improvement Plan 2022 (QIP), our Strategic Plan, results of the Patient Safety Culture Survey, committees across the organization and feedback from our patients and their families. The Patient Safety Plan builds on the quality and safety performances of past years and identifies new opportunities to further enhance the delivery of quality care to patients and their families. The PSP supports our continuous pursuit to identify system improvements for our patents and staff.

THE BOARD OF DIRECTORS ROLE IN PATIENT SAFETY

The Governance Centre of Excellence of the Ontario Hospital Association has published a document titled "Quality and Patient Safety: Understanding the Role of the Board". The document provided guidance to hospital boards dedicated to leading their institution's quality agenda. Practical advice surrounding the board's legislative duties and introduction to the patient safety landscape in Ontario, and insight into how effective boards drive the quality agenda are all captured in this document.

This document notes that 'it is ultimately the board's responsibility to ensure that the quality of patient services provided by their hospital is monitored, and to ensure that it meets the standard that can be reasonably expected of the community it serves.'

The Excellent Care for All Act, which was declared in force in June 2010, requires every health care organization to establish and maintain a quality committee which has a responsibility to monitor and report on quality issues and on the overall quality of services provided. One of the attributes of a high-performing health system which is included in the reporting framework is safety. The Queensway Carleton Hospital Board of Directors has established a Quality and Patient Safety Committee in compliance with the Act. A number of patient safety indicators and initiatives are included in the annual Quality Improvement Plan (QIP) required by the Act. The details of the QIP can be found on QCH's Internet Homepage under the About Us, Quality Improvement Plan section.

The QCH's governance policy on Risk Management (GP24) specifies that the CEO and Chief of Staff establish a risk management program, which incorporates patient safety across the hospital.

HISTORY OF ACCOMPLISHMENTS

The Patient Safety Plan builds upon our demonstrated commitment to quality and prioritizing the delivery of safe, equitable and accessible patient care. This plan highlights the various achievements across the organization over the years and the continued efforts to deliver the high-quality care our patients deserve and expect.



QUALITY AND PATIENT SAFETY COMMITTEE OF THE BOARD

The Queensway Carleton Hospital Quality and Patient Safety Committee and Board of Directors monitor the quality and safety of hospital services through a number of mechanisms including:



Monitoring achievements and progress related to patient safety indicators linked to our True North Strategy through Cascading Scorecards and Key Performance Indicators.



Receiving reports from Patient Care and Support teams and departments which include team specific patient safety indicators and initiatives at every meeting



Presentations are made to the Quality and Patient Safety Committee of the Board on all key clinical risks that impact quality and patient safety identified through the integrated risk management program. Examples include:

- Capacity Overload;
- Delayed Elective Procedures;
- Discharge and Transition of Care;
- Failure to Recognize Deterioration;
- Medication Administration;
- Healthcare Acquired Infection

The Board participates in the development of and approves the strategic goals for QCH, including those related to patient safety.

GUIDING OUR FUTURE: VISION & MISSION

Our Vision

As an organization, we routinely re-evaluate our vision, ensuring it reflects the overall direction and culture of the hospital and the goals we aspire to achieve. In 2022 our vision statement was revised and captures where we strive to be as an organization:

'Trusted as one of Canada's most caring and innovative health partners, fostering vibrant, healthy communities.'

This vision extends to our patient safety portfolio where we envision to provide exemplary care with no incidents of preventable harm in an organization that learns from proactive reporting for avoidance of harm.

Our Mission

Our mission statement guides the hospital's decision-making, operations, and culture, ensuring that we remain focused on our values, and that we provide the highest quality care to our patients. It serves as a compass for our organization, helping us to stay true to our mission and fulfill our commitment to the community we serve.

'Provide high-quality, compassionate and coordinated care for the people and communities we serve.'

The hospital's mission statement lays the foundation for a comprehensive Patient Safety Plan. Through our approach to patient safety, which includes a focus on communication, education, and continuous quality improvement, the hospital is committed to providing the best possible care to its patients. This mission statement serves as a guiding principle for the hospital's efforts to enhance patient safety and ensures that the hospital remains focused on its core vision of providing compassionate care to those in need.

ORGANIZATION-WIDE PATIENT SAFETY STRUCTURES

The Queensway Carleton Hospital has a strong governance structure in place for engaging clinicians, leaders, volunteers and staff about patient safety. We lead with the premise that patient safety is a shared responsibility. There are clear accountabilities at all levels of the organization to ensure we continuously monitor, review and improve the processes that support quality and patient safety.



INCIDENT REPORTING

Creating a culture where people are confident to report their concerns without fear of reprisal, shame or blame.

QUALITY REVIEWS

Conducting Quality of Care Reviews, Morbidity & Mortality rounds and discussing patient safety incidents as opportunities for learnings and to recommend systemic changes to enhance safety.





MONITORING

Actively collecting, analyzing and sharing patient safety information to support quality and patient safety throughout the organization.

SAFETY OFFICERS

We have introduced a new physician patient safety officer structure to support quality and patient safety initiatives across the organization and engage physicians as partners in quality & safety.





QUALITY GOVERNANCE STRUCTURE

Corporate Quality Reporting structures including Quality Council, Patient and Family Advisory Council engagement and Quality Leadership meetings ensure accountability and alignment of quality and patient safety at all levels of the organization.

JUST CULTURE

We know that fostering a Just Culture is one of the most effective ways to deliver quality care, reduce risk, and support patient safety. This means that we encourage staff, physicians, volunteers, patients and families to openly and confidently report safety or risk concerns. This information is utilized to measure, monitor and learn from safety incidents and create organizational learning. Through these measures we strengthen our patient partnerships, inform staff education and improve our processes.

A **Just Culture** encourages everyone to report risk and safety concerns so that the actions can be taken to fix system issues and prevent the precursors that can lead to errors.

STRATEGIC PLAN & PATIENT SAFETY

Queensway Carleton Hospital's Strategic Plan prioritizes Exceptional Care Experience and Seamless System of Care as key components of our commitment to delivering safe, compassionate, and high-quality care to our patients and their families. Our Connected Care partnership is a critical element of this strategy, helping us to leverage technology to enhance patient safety and quality of care. The PSP embodies our deep commitment to our True North goals and aligns with evidence-based quality and safety standards by Accreditation Canada. We believe that quality and patient safety are the foundation for every aspect of the services we provide, and the PSP reflects the values and priorities of our patients, families, staff, physicians, and volunteers.

SEAMLESS SYSTEM OF CARE

Our Seamless System of Care goal states that we will coordinate care within and beyond the walls of the hospital and improve population health. The key areas of focus under the Seamless System of Care goal include:

- Right Care, Right Place, Right Time
- Coordinated Transitions

Outlined in The Patient Safety Plan are the initiatives we've identified that will have an impact to quality and patient safety related to the seamless system of care goal.

Coordinated Transitions

It has been established that coordinated care management is an effective approach to improving the quality of care for patients with complex health and wellness issues. Our key initiatives identified through the QIP will improve coordination at transition points for the patient during their care journey.

| Timeframe | Key Initiative | Quality Dimension | Source/ Oversight |
|--------------|---|--------------------------|----------------------|
| Current Year | Develop discharge champions role and implement on each Medicine unit. | Efficient Effective | QIP |
| Current Year | The transition tool, which is the patient document for all instructions needed after discharge, will be adapted to the electronic platform. | Safe Patient-Centered | QIP |

Timeframe: Current Year (2022/23 FY); Mid-term (2023-24 FY); Long-term (Beyond 23/24 FY)

Time to In-Patient Bed

Time to inpatient bed is closely linked to patient safety. Timely admission to the appropriate care setting is linked to improved patient outcomes, enhances the overall patient experience, and minimizes the risk of adverse events. A Time-to-Inpatient Bed project is underway to improve patient flow across the organization.

| Timeframe | Key Initiative | Quality Dimension | Source/ Oversight |
|--------------|--|--------------------------|----------------------|
| Current Year | Opening a new state-of-the-art 24 bed Mental Health Unit to better serve our patients. | Safe Patient-Centered | QIP |
| Current Year | Development of a 4-bed psychiatric intensive care unit to offer specialize care and increased observation-levels. | Safe Effective | QIP |
| Current Year | Paramedic training for IV pumps and PICC line care for community paramedics to support earlier discharge to the community. | Efficient Timely | QIP |

Capacity Overload

Increased demographic demand associated with growth in the community and lack of financial growth can result in inability to optimally care for all patient who require hospitalization. In addition, lack of physical space and infrastructure results in capacity being close to or at its ultimate limit without disadvantaging patients who require medical and surgical inpatient care.

| Timeframe | Key Initiative | Quality Dimension | Source/ Oversight |
|-----------|--|-------------------------------|----------------------|
| Mid-term | Open an offsite facility operated by the hospital for Alternate Level of Care patient care. | Effective Patient-Centered | IRM |
| Long-term | Submission to the Ministry outlining the need to increase the footprint and capacity of the ED to accommodate growing patient volumes. | Efficient Timely | IRM |
| Long-term | Submission to the Ministry outlining the need for 90 new in-patient beds. | Patient-Centered Efficient | IRM |

Digital Health Solutions

Technological advancements and automation that support clinical workflows and patient safety are a top priority at QCH. We have built strong relationships with regional partners and lead the Connected Care digital health strategy. Integrating leading practices and remaining current with health technology is woven into every aspect of care delivery to provide the best patient experience.

| Timeframe | Key Initiative | Quality Dimension | Source/ Oversight |
|-----------|--|----------------------|----------------------|
| Long-term | Implement Norvari Pre-Surgical Services to enhance Pre- Op workflows. | Safe Timely | Connected Care |
| Long-term | Introduce the Meditech Web Ambulatory to QCH outpatient clinics. | Efficient Safe | Connected Care |

EXCEPTIONAL CARE EXPERIENCE

Our Exceptional Care Experience goal states we will provide high-quality patient and family-centered care. Our areas of focus to achieve this goal include:

- Zero Patient Harm
- 100% Patient Satisfaction

Outlined in The Patient Safety Plan are the initiatives we've identified that will have an impact to quality and patient safety under the exceptional care experience goal.

Recognizing Deterioration

Early identification of patient deterioration can lead to timely treatment and better outcomes. A delay in recognition of patient deterioration increases the risk of patient harm due to the delay or failure of timely treatment for the patient.

| Timeframe | Key Initiative | Quality Dimension | Source/ Oversight |
|-----------|--|--------------------------|---|
| Mid-term | Integrate all Welch Allyn vital sign monitors with the electronic health record, allowing real- time documentation of vital signs. | Safe Effective | QIP IRM |
| Mid-term | Update policy and optimize transition practices to ensure relevant information is consistently provided during patient transfer. | Safe Patient-Centered | Professional Practice Quality Council |

Recognizing Deterioration (cont'd)

| Timeframe | Key Initiative | Quality Dimension | Source/ Oversight |
|--------------|--|----------------------|------------------------------|
| Current Year | Introduction of Simulation exercises throughout the organization to prepare frontline staff to recognize and respond to various emergency scenarios. | Timely Effective | QIP Quality Council |
| Mid-term | Optimize the NEWS2 scoring workflow to improve early identification of patient deterioration. | Effective Timely | Quality Leadership IRM |
| Current Year | Optimize the use of the Rapid Response nurse as a support and educate front-line inpatient unit nurses. | Timely Safe | QIP |
| Long-term | Continue advocating to obtain permanent funding for four Level 2 ICU beds. | Safe Effective | IRM |

Medication Management

Adverse events caused by medications are a common occurrence in healthcare settings. Errors can happen at any stage of the medication management process, putting patients at risk of harm. To address this issue, we are dedicated to optimizing the medication process to prioritize patient safety and minimize the likelihood of errors and adverse events. Our goal is to ensure that medication administration is a safe and effective process for all patients under our care.

| Timeframe | Key Initiative | Quality Dimension | Source/ Oversight |
|--------------|--|----------------------|----------------------|
| Mid-term | Improve flow of pre-operative orders from surgeon's office to QCH patient chart. | Safe Efficient | QIP |
| Current Year | Barcodes and scanning of patient's own medication (that patients bring with them to the hospital) to support compliance with medication administration best practices. | Safe Timely | QIP |
| Mid-term | Develop a report and auditing process for unit-specific compliance of scanning patient armbands and confirming positive patient identification and BMV practices are occurring. | Safe Effective | IRM Accreditation |

Pulmonary Embolism Quality Improvement Initiative

Through monitoring trends and quality of care reviews, we identified an opportunity to standardize treatment plans of patients admitted with pulmonary embolism (PE) and ensure practices are aligned with evidence-based care. A monetary grant from Pfizer was awarded to support this initiative.

| Timeframe | Key Initiative | Quality Dimension | Source/ Oversight |
|-----------|---|------------------------------|----------------------|
| Mid-term | Develop standardized and evidence-based transition and discharge criteria for patients admitted with PE. | Safe Patient- Centered | Quality Council |
| Mid-term | Create a treatment and diagnosis algorithm supported by validated clinical decision-making tools for safe care planning relate to patients diagnoses with PE. | Safe Efficient | Quality Council |
| Mid-term | Education for physicians, nursing, pharmacy about evidence-based practices and care planning for a patient with a PE. | Safe | Quality Council |

Sepsis Management

Through the Interdisciplinary Morbidity & Mortality Review Committee (IMMRC), the organization has been monitoring and trending early identification of patients presenting with sepsis and timely treatment. Monitoring of the HSRM rates related to sepsis, coroner files, incident reports, Quality of Care Reviews and chart audits all support this initiative.

| Timeframe | Key Initiative | Quality Dimension | Source/ Oversight |
|--------------|--|------------------------|----------------------|
| Current Year | Identification of targeted measures and metrics for patients presenting with sepsis. | Effective Efficient | IMMRC |
| Mid-term | Determine appropriate data collection methodology and compile data for analysis. | Effective | IMMRC |
| Mid-term | Provide education across the organization about sepsis and leading practices in sepsis management. | Safe Effective | IMMRC |

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| Timeframe | Key Initiative | Quality Dimension | Source/ Oversight |
|-----------|--|----------------------|----------------------|
| Mid-term | Implement the Critical Care Module (Meditech) to enhance workflows and support safe care delivery. | Safe | Connected Care |
| Long-term | Implement the Surveillance Module (Meditech) to enhance workflows and identify patients at risk for deterioration. | Safe | Connected Care |
| Long-term | Implementation of the Fetal Monitoring & Surveillance Module (Meditech) to enhance workflows and support safe care delivery. | Safe Timely | Connected Care |



FINAL CONSIDERATIONS

At Queensway Carleton Hospital, patient safety is of paramount importance. We understand the critical role it plays in delivering high-quality care and ensuring positive outcomes for our patients. The Patient Safety Plan for our organization has been developed in accordance with the Required Organizational Practices (ROPs) outlined by Accreditation Canada.

Our plan is rooted in the belief that patient safety is a shared responsibility, one that involves every member of our organization, including our staff, patients, and their families. We are committed to fostering a culture of safety where everyone is encouraged to speak up, share their concerns, and actively participate in identifying and managing risks. By doing so, we can create an environment that is not only safe but also transparent and accountable.

Our plan focuses on ensuring a culture of safety, identifying and managing risks, engaging patients and families, and continually improving our processes and systems. By implementing this comprehensive Patient Safety Plan, we are committed to enhancing patient safety and providing high-quality care for all those we serve.

