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

March 29, 2023



#### **OVERVIEW**

Campbellford Memorial Hospital (CMH) is a 34-bed health care facility located in Trent Hills. It serves approximately 40,000 Northumberland, Peterborough, and Hastings County residents, as well as a large seasonal population of cottagers and tourists enjoying the beautiful Kawartha Lakes Region and the Trent River System.

CMH provides a comprehensive array of acute care services including a Special Care Unit, Endoscopy Surgical Suite, Diagnostic Imaging Department, Laboratory, numerous Out-Patient Clinics, 24/7 Emergency Department and community programs including Mental Health, GAIN, and Supportive Housing.

CMH has developed the 2023/24 Quality Improvement Plan (QIP) aligned with its vision to be a recognized leader in rural health care, creating a healthy community through service excellence, effective partnerships and the development of innovative hospital services. The QIP areas of focus fall under the 4 quality dimensions of timely, patient centered, effective, safe, and equitable . These dimensions align with the overall strategic plan and is informed by feedback from our patients and families, staff, and best practices including Accreditation Canada Standards' Required Organizational Practices.

We are confident that CMH will continue to achieve the priorities as set out by the QIP given a renewed dedication and commitment of excellence of our staff and physicians, the engagement of our Board, Leadership and collaboration of community partners.

# PATIENT/CLIENT/RESIDENT ENGAGEMENT AND PARTNERING

CMH collaborates with the Patient and Family Advisory Committee and is in the early phase of co design with respect to operational process and policy design. CMH relies on PFAC and Patient Experience surveys to gather diverse perspectives and input to inform decision making related to met and unmet needs and change initiatives.

The newly formed PFAC have been involved in co design of various quality improvement initiatives including patient communication boards, patient and family education boards, signage and way finding as an experience measure, and have had input into the 2023/24 QIP development and review as well as the annual strategic goals.

CMH engaged the PFAC in development and writing of the Caregiver Presence Policy and were integral partners in providing input into multiple required organizational practices policies related to Accreditation Canada.

CMH utilizes patient experience feedback through the compliments and complaints process and commits to look for every opportunity to meaningfully engage patients and their families in out quality improvement efforts.

The 2023/24 QIP has continued to identify opportunities for patients and PFAC members to be key stakeholders in co design with respect to the 4 quality dimensions and CMH will seek to engage through various operational committees and working groups.

The 2023/24 QIP quality dimension Patient Centered - "Our patients feel they received adequate information about their health and their care and discharge "involves direct experience feedback and PFAC working groups which will then be utilized to develop change ideas and action plans to support the needs of our patients and families.

#### **PROVIDER EXPERIENCE**

Campbellford Memorial Hospital (CMH), like many other small hospitals, has been impacted by the COVID 19 pandemic and is struggling to recruit and retain trained skilled health human resources (HHR). The ability of small rural hospitals to recruit HHR has been identified as a major challenge across the province. Factors such as rural location, limited resources, and competitive incentive pay, critical mass, and overall burnout, has led to long term full time and part time vacancies and challenges with recruitment and retention within the organization.

CMH has prioritized recruitment and retention as a strategic goal and is focusing on ways to provide support to the teams through stabilization of health human resources post pandemic. CMH intends to recruit, retain and develop highly skilled and engaged people who are empowered and inspired to provide quality, person-centred care and services.

Although not explicit as a goal on the QIP, CMH has processes in place to engage health care workers in the overall recruitment strategy through an Employee Retention Committee, development of ongoing retention strategies, and gathering of formal input through Unit Based Councils regarding innovative solutions to the Health Human resource crisis. CMH has also partnered with local secondary and post-secondary education centres to increase engagement through adding student placement positions and high school co-op placements.

#### WORKPLACE VIOLENCE PREVENTION

Workplace violence prevention remains a core dimension of our Strategic priority and the QIP. Workplace violence incidents are a growing concern for smaller communities and CMH is committed to taking steps to minimize risk and maximize preparedness. By measuring the number of violent incidents reported by hospital employees we can empower our teams to be their own safety champions while providing valuable feedback for change ideas.

Conducting overall risk assessments will enable CMH to create a culture of quality improvement and workplace health as it relates to workplace violence. CMH is focusing on recruitment and retention strategies which include initiatives that ensure overall safety and an environment that promotes conditions for staff to thrive and feel safe while at work.

Change ideas specific to staff training (NCVI and GPA), appropriate patient screening, workplace assessments and interprofessional simulation learning will promote a culture of safety and provide the necessary tools for staff to work towards workplace violence prevention.

## **PATIENT SAFETY**

CMH has established a formal patient safety incident reporting and critical incident review process that enables incident analysis, and learning that guides development of action plans to mitigate future recurrence. The follow up and feedback mechanisms include summary reports identifying trends that are reviewed at the Patient Safety and Quality of Care Committee of the Board.

Plans are underway to share the trend reports, patient stories and action plans with other committees such as, Unit Based Councils and PFAC with intent to enhance a culture of quality improvement and culture.

## **HEALTH EQUITY**

CMH has identified opportunities to improve the knowledge at the leadership level in relation to equity, diversity, and inclusion (EDI). Establishment of an internal EDI working group will provide the necessary framework to create CMH policies to guide practice specific to EDI, recommend educational opportunities around 2SLGTBQIA+, Indigenous, Mental Health, Black and racialized communities, and high priority populations in efforts to understand and reduce health disparities.

EDI education can be sourced from various organizations with different focuses for learning. Leadership at CMH will have the opportunity to choose an area of interest based on the EDI working group recommendations and take the lead on closing the knowledge gap across the team. This initiative will support and guide CMH with respect to further strategic planning related to the accreditation standards pertaining to EDI.

#### **EXECUTIVE COMPENSATION**

An executive leadership compensation plan for 2023/24 has been presented and approved by the CMH Board February 2023.

#### **CONTACT INFORMATION**

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#### **SIGN-OFF**

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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

**Board Chair** 

Board Quality Committee Chair

Chief Executive Officer

Other leadership as appropriate