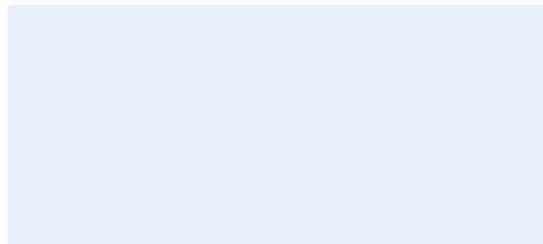


Let's Make Healthy
Change Happen.



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



3/29/2018

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

Overview and Focus of WAHA's Quality Improvement Plan for 2018 - 2019

The below projects are being done:

1. Falls Prevention Program - To continue work on the falls prevention and management program for patients who are admitted in chronic continuing care beds in Fort Albany Hospital (FAH) for 2018-2019. Health care providers will use the Morse Fall Scale with chronic continuing care (CCC) patients upon admission to FAH and when falls happen to re-evaluate patients. Once the assessments are completed, Morse Scale fall interventions will be used for patients of different risk categories. WAHA met its goal in 2017-2018 of keeping falls below 2% and the target is to continue doing this in 2018-2019. WAHA is currently finalizing a new policy and will also work towards offering this program at Weeneebayko General Hospital (WGH) and Attawapiskat Hospital (AH) in the future.

2. Hand Hygiene - In 2018-2019, WAHA will look to improve its overall combined hand hygiene performance for staff (before and after patient-environment) contact to 89%. WAHA's performance at WGH was 73% in 2017-2018. WAHA will be doing more hand hygiene reviews with health care providers in 2018-2019 and education was offered to all WAHA staff on the importance of hand hygiene through the organization's new e-learning platform, Surge Learning in 2017-2018. All WAHA staff will again be required to complete this training in 2018-2019.

3. Medication Reconciliation - In 2018-2019, WAHA will attempt to complete medication reviews on at least 75% of patients upon admission to the WGH inpatient department. WAHA will also collect baseline data for development of a medication review performance target, for discharged patients. WAHA completed medication reviews on 71% for admitted inpatients in 2017-2018. WAHA will also work towards offering this program at FAH and AH in the future.

4. Patient Satisfaction Surveys - To collect data for patients using WAHA emergency and inpatient department services, to figure out how many people would recommend WAHA inpatient and emergency services to friends and family. In 2017-2018, 78.57% of people indicated they would recommend WAHA's inpatient department services to friends and family, with 92.15% of people also saying they would recommend WAHA's emergency department services. WAHA is pleased with the overall satisfaction rates achieved and will offer patient satisfaction surveys for 2018-2019 in Moose Factory, Moosonee, Fort Albany and Attawapiskat. WAHA has come up with new methods to provide more opportunities for people to respond to surveys; the organization is utilizing nursing student interns to help collect more surveys in Moose Factory and Moosonee. WAHA has also used community surveyors and offered community outreach tables, encouraging people to fill out surveys in Moosonee, Moose Factory and Attawapiskat. WAHA will also look to conduct similar outreach for all of these communities in 2018-2019 along with Fort Albany. WAHA will also put an electronic copy of the surveys on its website www.waha.ca to get people's opinions on the services provided by the organization. In addition, WAHA staff visited patients in WGH, AH and FAH, to assist them with filling out the surveys - this will continue in 2018-2019.

5. Workplace Violence and Harassment Prevention Program - WAHA will be collecting baseline data to develop a performance target for 2018-2019. WAHA has a workplace violence and prevention program in place and will re-send the program policy to all staff. The organization will also offer an e-learning "respect in the workplace" training module to all staff, to promote and encourage positive relations between staff. Lastly, WAHA Management will receive specific training on staff

engagement. Managers will be asked to fill out a survey, identifying how they engage their staff. Based on the results, training will be offered to individual Managers who need support.

6. In-Hospital Sepsis - WAHA has introduced this as a new project for the 2018-2019 QIP. The organization will look to focus on identifying possible cases of sepsis that present to the WGH ER department, by triaging, assessing and treating identified cases of sepsis with antibiotics within the first hour. The organization will collect baseline data to identify past performance and also measure performance for 2018-2019.

Projects retired from WAHA's 2018-2019 Quality Improvement Plan

1. Surgical Safety Checklist - The WAHA Operating Room Nurses improved surgical safety checklist performance in the WGH Operating Room team for 2017-2018 to 98.53%. WAHA's exceeded its targeted performance of 98.47% and will retire this project from this year's submission.

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

WAHA's quality improvements from 2017-2018 are as follows:

1) Surgical Safety Checklist: performance improved by 7% from 91% in 2016-2017 to 98.5% in 2017-2018. WAHA's Operating Room Department worked hard to revamp its surgical safety checklist program and implemented the fully adjusted program in 2017-2018. As a result of this improvement, WAHA will be removing this QIP project from the 2018-2019 submission.

2) Staff E-Learning Initiative: WAHA's Education Team launched "Surge Learning", an online Learning Management System in October 2017. About 40% of all workers have accessed Surge Learning thus far. As use of Surge Learning increases, WAHA will more efficiently ensure annual completion of legislative learning requirements including education on Health and Safety, Violence Prevention, Accessibility, Fire Safety, WHMIS, Quality Assurance and more!

Beginning in October, WAHA also saw a reduction in 'In-Person Orientation' time by 50% due to the addition of Surge Learning, resulting in a more streamlined orientation for workers, and a savings of both cost and time for WAHA. New hires complete over half of their required learning requirements online in the comfort of their homes before attending a WAHA site for the first time.

As managers grow in their ability to use this program, they will be able to better track their departments learning needs and mandatory certification status through the integrated Skills and Credentials tracker as well. As WAHA expands its use of Surge Learning, we nurture our goals of making education accessible, easy to access, and relevant for our staff.

3) WAHA Provincial Quality Based Procedures (QBP) Order Set Project: WAHA started using digital order sets in May of 2017. The project was developed to aid WAHA physicians, and all physicians province-wide in providing more quick and efficient care to patients through having access to electronic pre-developed orders for various presenting health conditions. Access to these pre-developed order sets reduces the amount of time that physicians have to spend for identification of patient treatment interventions, allowing them to provide more timely care. WAHA physicians have taken an active lead in developing 63 WAHA and QBP order sets and

submitting 364 of these since May, with more order sets to be developed and submitted in the future.

4) WAHA Public Health:

WAHA's Public health department held community engagement sessions in all communities along James and Hudson Bay Region with the goal of hearing first-hand from the each community what they feel is missing in regards to Public health. WAHA has developed a draft version of a regional public health strategy and will use the information from the community visits to adjust the strategy. The organization will eventually develop a finalized public health strategy for the Region. The Public Health department is also working with James and Hudson Bay communities to make the switch from only paper based charting methods to also using Electronic Medical Records. Additionally, WAHA's Public Health department has taken on many data related projects to provide James and Hudson Bay communities with health information to help local leaders with their health planning efforts.

Resident, Patient, Client Engagement and relations

WAHA will invite people from the James and Hudson Bay Region to share their patient-care experiences at medical rounds in 2018-2019. The organization will also actively engage community members in identifying quality improvement projects for the 2019-2020 QIP.

WAHA has a client satisfaction process that allows community members to share their patient care experiences, with reviews and follow-up action taken for situations as required. Client satisfaction surveys are also conducted to measure satisfaction levels.

Collaboration and Integration

WAHA's interdisciplinary team works closely together to ensure continuity of care is maintained as inpatient care is managed through our various hospitals, and also when inpatients are transferred out to other hospitals/health care providers. Our Quality Improvement Initiatives in these various respects are discussed below and tie into WAHA's annual Senior Friendly Hospital Plan.

WAHA's Regional Discharge Planning Department

WAHA's Regional Discharge Planning has been in existence for four years and this department plays a key role in helping coordinate the overall care and supports received by WAHA ALC patients. The RDP team works together to ensure ALC patients have the appropriate care and supportive services available while staying with WAHA, they also make sure these patients are supported when transferring from a WAHA health care facility to other health care locations, and also when they return to their homes.

The RDP has also assisted families with obtaining long-term care home placements, advocacy for additional health care/supportive services, providing consistent linkages with family members and loved ones, and with fulfilling various other needs. The RDP has been very successful in delivering on its mandate and our ALC patients continue to receive support on an ongoing basis from the collective efforts of the department.

WAHA/Northeast Specialized Geriatric Services Centre (NESGC) Geriatric Clinics

- WAHA's Regional Discharge Planning Department continues to work in partnership with the NESGC to provide geriatric clinics for those aged 65 and over, as well as individuals who were 55 and over with multiple health issues for communities

located within the James and Hudson Bay region. Clinic patients are scheduled for appointments with geriatric doctors and nurses to determine their health status and update their care plans to meet individual needs. Cree translation service supports are also available for patients as required.

- These clinics are part of the NELHIN's 2013-2016 Integrated Health Service Plan priority of enhancing access and coordination of care for Aboriginal/First Nation/Métis people living in the NE LHIN region.

Moose Factory Clinic - September 11-13, 2017

- The NESCG team was able to conduct appointments with 15 patients, 10 were seen in their homes and 5 were seen in the WGH inpatient department.

Engagement of Clinicians, Leadership & Staff

WAHA's Quality Department sent communications to all WAHA staff, for identification of new Quality Improvement projects to add for the organization's 2018-2019 QIP. The Quality Department also met with the Medical President and the VP of Patient Care/Chief Nursing Executive to review progress of the 2017-2018 QIP and to also identify new Quality Improvement projects. The Medical President and VP in question provided excellent feedback from their peers, which will inform the development of the 2018-2019 QIP.

WAHA's Quality Department will also attend medical rounds and a communique will be sent to all staff, presenting the results from outcomes achieved in the 2017-2018 QIP and the new 2018-2019 QIP to clinicians.

Population Health and Equity Considerations

WAHA is a regional, community-focused organization, committed to providing optimum health care as close to home as possible. To deliver on its mandate, WAHA provides culturally specific training supports to its staff, a traditional healing program as well as other specialty based services.

Cultural Competency Training

- WAHA's Director of Community Relations delivers cultural competency training to educate staff about Cree Aboriginal history, traditions, teachings and effective ways of communicating with people from the Weeneebayko Region to provide culturally appropriate health care service. This training has been offered to newly hired employees for the past five years.

Traditional Healing Program (THP)

- The Program offers a variety of services with traditional and cultural healing options, focusing on the mind, body, and spirit of the person. The THP exists to support WAHA community members and their families, with emphasis on serving those who are surviving residential school members, or family members of survivors.
- WAHA's Traditional Healing Program is offered in Moose Factory, Moosonee, Fort Albany, Kashechewan, Attawapiskat and Peawanuck.
- Traditional Healers along with Traditional Counselors travel throughout all of the six communities, conducting ceremonies and providing counseling services for the people.
- For April - December 2017, 12,589 appointments/interactions were completed by persons utilizing THP services.

The key programs and services of the THP are:

- Providing counseling to individuals, youth, couples, families and community groups

- Counseling services for addictions, grief, sense of cultural loss, personal crisis situations and suicidal ideations
- Healing for residential school survivors and family members
- Various ceremonies which include the rites of passage, sweatlodges and seasonal ceremonies
- Traditional Cree knowledge recovery through traditional medicines

WAHA Diabetes Health Education Program (WDHEP)

The WDHEP is a community-based program that serves people with diabetes, of all ages, and at any stage of the disease. The program focuses on providing education that assists with the treatment, management of diabetes, and prevention of diabetes related complications. The Program is also involved in community level initiatives such as cooking demonstrations, health displays and public education on diabetes and nutrition. The WDHEP works in partnership with other departments and programs to provide individuals with the best diabetes care possible. We operate 7.5 hours per day; the hours are 8:30-4:30 Monday-Friday totaling 37.5 hours/week. We offer communication in English and Cree. Our department consists of two Registered Nurses, two Registered Dietitians, 1 Register Practical Nurse specializing in foot care and 1 Administrative Assistant.

The Program's key yearly activities include:

- The WDHEP provides service to approximately 1500 clients throughout six communities in the James and Hudson Bay Region, which include Moose Factory/Moose Cree First Nation, Town of Moosonee, and Fort Albany, Kashechewan, Attawapiskat and Peawanuck First Nations. The WDEPs mandate includes seeing people living with type 2 diabetes (86.5%); type 1 diabetes (< 1%), pre-diabetes (2%); diabetes in pregnancy (9%) and other diabetes-related conditions (2%). Diabetes education services are delivered through clinic visits, home visits, the Ontario Telemedicine Network, telephone, community drop-in clinics, and outreach visits to the more remote, fly-in communities.

The WDHEP's key yearly activities include:

- 1 coastal trip per/month to communities on a rotating basis (Fort Albany, Kashechewan, Attawapiskat and Peawanuck).
- Kashechewan, Attawapiskat and Fort Albany communities receive 3-4, 4 days visits per year
- Peawanuck visited by diabetes team for 2-3 day visits twice each year.
- Clinics are conducted in Moosonee 3 to 8 days per month on a yearly basis.
- The WDHEP also works with the Moosonee Health Unit as well as the Aboriginal Diabetes Programs and Health Centres to provide diabetes and nutrition education.
- Special community events are hosted in selected communities within the James and Hudson Bay Region every 2 months and include education sessions on diabetes, food demonstrations and drop in clinics with local Health Centres.
- Staff from the WDHEP team have participated in Wawatay radio shows hosted by the WAHA Director of Community Relations and broadcasted to listeners in the Region. A variety of diabetes related topics are discussed during each show, and listeners also have the opportunity to call in and ask questions.
- The WDHEP conducts Ontario Telemedicine Network appointments on an as needed basis.
- Pediatric clinics are conducted 3 to 4 times per year at Weeneebayko General Hospital in Moose Factory for patients from the Region with visiting a Pediatric Endocrinologist.

WAHA/Northeast Specialized Geriatric Services Centre (NESGC) Geriatric Clinics

- WAHA's Regional Discharge Planning Department continues to work in partnership with the NESGC to provide geriatric clinics for those aged 65 and over, as well as

individuals who were 55 and over with multiple health issues for communities located within the James and Hudson Bay region. Clinic patients are scheduled for appointments with geriatric doctors and nurses to determine their health status and update their care plans to meet individual needs. Cree translation service supports are also available for patients as required.

- These clinics are part of the NELHIN's 2013-2016 Integrated Health Service Plan priority of enhancing access and coordination of care for Aboriginal/First Nation/Métis people living in the NE LHIN region.

Moose Factory Clinic - September 11-13, 2017: The NESGC visited Moose Factory, and the geriatric team was able to create care plans for 15 patients. 10 Home visits were conducted by the geriatric team as required, and inpatients were seen in WGH.

Rehabilitation Services Department

- The Rehabilitation Services Department at Weeneebayko General Hospital (WGH) provides Physiotherapy and Occupational Therapy services to in-patients and out-patients
- Rehabilitation includes an assessment of the client's condition, recommendations for activity and exercise, and prescription of adaptive aids to help improve mobility and function.
- The Department also conducts monthly Orthotic & Prosthetic clinics with a certified Prosthetist & Orthoptist. WAHA is a certified Amputee Clinic site.
- The home base for this Department is in Moose Factory (Weeneebayko General Hospital), with regular visits to Moosonee.

WAHA Dental Services

- WAHA Dental Services is committed to providing friendly and exceptional dental care for all clients in the WAHA region.
- WAHA's Dental Services department currently has a dentist, two dental hygienists and dental assistants who provide a full range of dental treatment such as: hygiene (cleaning), fillings, root canals, prosthodontics (dentures, hockey mouthguards, night guards), perio surgery (gum surgery), extraction (tooth removal), as well as preventative tips for keeping teeth and gums healthy.
- For patients who have dental anxiety, the clinic can offer conscious sedation (nitrous gas) to minimize a patient's anxiety during treatment.

Speciality Clinics

WAHA offers a variety of different specialty clinics, enabling people in the WAHA region access to these services. Through these clinics, WAHA is bringing specialists closer to the region and minimizing the amount of travel needed for patients/clients.

The list of clinics includes:

Internal Medicine

- Medical specialty dealing with the prevention, diagnosis and treatment of adult diseases.

Obstetrics and Gynaecology

- Medical specialty dealing with the female reproductive organs, when pregnant and when not pregnant

Cardiology

- Medical specialty dealing with disorders of the heart, including the diagnosis and treatment of congenital heart defects (birth defects), coronary heart disease, heart failure and valvular heart disease.

Neurology

- Medical specialty dealing with disorders of the nervous system, including the brain and spinal cord

Colposcopy

- Medical specialty dealing with conditions of the female reproductive system, particularly the cervix.

ENT

- Medical specialty dealing with conditions of the ears, nose, throat and structures of the head and neck. One may see a ENT specialist for hearing disorders, ear infections, balance disorders, allergies, problems with sense of smell, swallowing issues, head and neck cancers, facial traumas or deformities and dental trauma.

Echo Cardiology

- Medical specialty pertaining to the internal structure of the heart. This ultrasound technology is utilized for patients with suspected or known heart disease.

Nephrology

- Medical specialty dealing with the function and diseases of the kidney. Patients see nephrologists for electrolyte disturbances, kidney stones, high blood pressure, renal replacement therapy, dialysis and renal transplant.

Spirometry

- Medical specialty pertaining to conditions associated with breathing such as asthma, pulmonary fibrosis, cystic fibrosis and COPD.

Psychiatry

- Medical specialty responsible for preventing and treating mental health disorders, offered in conjunction with WAHA's Community Mental Health Program.

Pediatric Cardiology

- Medical speciality dealing with disorders of the heart in children, particularly congenital heart defects (birth defects)

Urogynecology

- Medical specialty involving the diagnosis and treatment of urinary incontinence and female pelvic floor disorders

Urology

- Medical and surgical specialty that focuses on the urinary tracts of males and females, and on the reproductive system of males. Patients see urologists for kidney/bladder stones, kidney/bladder/prostate/testicular cancer and vasectomies.

Audiology

- Medical specialty that deals with hearing, balance and related disorders through tests and treatment through hearing aids.

Pediatric Cardiology

- Branch of medicine that deals with children's heart and vascular conditions.

Developmental Pediatrics

- Medical specialty that cares for patients with a wide variety of developmental disorders such as autism, acquired brain injury, cerebral palsy, cognitive disability, down syndrome, complex learning and behavioral disorders and language delays.

Community Mental Health

- Community Counselors are available to assist WAHA community members requiring mental health services in Attawapiskat, Peawanuck, Kashechewan, Fort Albany, Moosonee and Moose Factory.

Program staff includes:

Program Manager
Regional Concurrent Disorders Worker
Regional Mental Health Clinician
Addiction Counselor
Regional Court Diversion Worker
Intake/Information & Referral Worker
Regional Early Psychosis Intervention Worker
Administrative Assistant

- The program works in collaboration with organizations such as Sagashtawao Healing Lodge in Moosonee. The Lodge is the Drug & Alcohol Treatment Centre for the whole WAHA region.
- The program also works closely with other WAHA departments, particularly the Traditional Healing Program to provide culturally appropriate services to our First Nations clients and to incorporate traditional healing practices, as needed.
- The telemedicine service is also very helpful in our coastal communities and provides easier access to a psychiatrist. This technology also helps staff to participate in a meeting when face-to-face is not possible.

Access to the Right Level of Care - Addressing ALC

WAHA's Regional Discharge Planning (RDPD) Department has been in existence for four years and this department plays a key role in helping coordinate the overall care and supports received by WAHA ALC patients. The RDPD team works together to ensure ALC patients have the appropriate care and supportive services available while staying with WAHA, they also make sure these patients are supported when transferring from a WAHA health care facility to other health care locations, and also when they return to their homes.

The RDPD has also assisted families with obtaining long-term care home placements, advocacy for additional health care/supportive services, providing consistent linkages with family members and loved ones, and with fulfilling various other needs. The RDPD has been very successful in delivering on its mandate and our ALC patients continue to receive support on an ongoing basis from the collective efforts of the department.

Opioid Prescribing for the Treatment of Pain and Opioid Use Disorder

The NELHIN is working with the Cochrane District which includes the James and Hudson Bay west coast to develop Rapid Access Addictions Medicine (RAAM). WAHA along with other members of the coastal communities have been invited to participate.

Workplace Violence Prevention

- WAHA is committed to providing a safe, healthy and supportive working environment by treating their employees and clients with respect, fairness and sensitivity. WAHA believes that harassment in the workplace can have a devastating effect on the quality of life for its employees and on the productivity of the organization.
- WAHA continues to offer an extensive Workplace Harassment Prevention Program which provides employees with the opportunity to report instances of workplace harassment which will be investigated and followed up on.
- This year, there were no reported incidents of workplace violence and WAHA is hopeful this will continue in future years

Performance Based Compensation

President and Chief Executive Officer

- Is responsible to make sure the quality improvement plan is being worked on and that progress is reported to the public and WAHA's Board of Directors
- Makes sure work tasks included in the plan are completed by staff

Vice President of Finance and Corporate Affairs

- Will be responsible to make sure QIP goals and projects are mentioned in the budgets of each department
- Provide reports that keep the public informed about WAHA's finances, this information will also be shared with

Vice President of Human Resources

- Help with patient and staff satisfaction programs
- Staff satisfaction survey and progress reporting is done every two years
- Make sure staff are recognized for their hard work at all WAHA sites
- Works with managers to make sure staff participates in performance evaluations across all sites

Vice President of Support Services

- Help with patient and staff satisfaction programs
- To make sure WAHA buildings are clean and safe
- To make sure ordering of hand hygiene products and supplies is done for all WAHA sites

Director of Community Relations

- Help with patient and staff satisfaction programs
- Collection of patient complaints and compliments, to make sure people are satisfied with the services they receive
- Provide patients and clients with information about WAHA on the radio show and website

VP of Clinical Services/Chief Nursing Executive

- Support patient and staff satisfaction programs
- Ensure falls prevention program is delivered
- Oversee medication safety program Assist with monitoring hand hygiene performance

Chief of Staff

- Help with patient and staff satisfaction programs
- To assist with the monitoring of the falls prevention program
- To assist with monitoring the medication safety program

Chief Quality Officer

- Help with patient and staff satisfaction programs
- Make sure public reporting (Quality Improvement Plan) is completed
- Staff satisfaction survey and progress reporting is done every two years

Compensation

- President and Chief Executive Officer (3% compensation)
- Vice President Corporate Services/Chief Financial Officer (3% compensation)
- Vice President of Human Resources (3% compensation)
- Vice President Support Services (3% compensation)
- Director of Community Relations (3% compensation)
- Vice President of Clinical Services & Chief Nursing Executive (3% compensation)
- Chief of Staff (3% compensation)
- Chief Quality Officer (3% compensation)

Contact Information

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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 Josephine Williams _____ (signature)
- Quality Committee Chair Gisele Kataquapit _____ (signature)
- Chief Executive Officer Greg Spence _____ (signature)
- Other leadership as appropriate _____ (signature)