

Let's Make Healthy  
Change Happen.



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



03/28/2022

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.

DEVELOPED IN PARTNERSHIP WITH  
**Sault Area Hospital**  
Patient and Family Advisors

[ontario.ca/excellentcare](https://ontario.ca/excellentcare)



## Overview

Serving a population base of approximately 115,000, Sault Area Hospital (SAH) provides primary, secondary, and select tertiary services to residents of Sault Ste. Marie and the District of Algoma. SAH is extremely proud of our dedicated staff, physicians, and volunteers.

Our Mission of *'Exceptional people working together to provide outstanding care in Algoma'* and our Vision, *'Trusted Partner. Outstanding Care.'* are the cornerstones of quality improvement for our organization. The iCcare values support our strategy to provide our patients access to the safest and highest quality of care as close to home as possible. Through incorporating these values into the daily care, we provide:

- **Integrity** – We say what we mean and we mean what we say
- **Compassion** – We show concern and care for others
- **Collaboration & Partnership** – We promote teamwork
- **Accountability** – We are answerable for our actions and decisions
- **Respect** – We care about the well-being, dignity and uniqueness of everyone
- **Excellence** – We deliver our best every day and encourage innovation to continuously improve

Our 2022 / 2023 Quality Improvement Plan (QIP) is guided by the following principles:

- Commitment to timely and efficient transitions
- Alignment with hospital objectives and strategic priorities
- Provides a focussed effort on sustainable quality measures
- Drives improvement through consultation and collaboration

The development of our QIP was informed by the following:

- Previous Ontario Health Quality guidance and mandatory indicators
- Needs of patients, clients, and residents
- Insight gleaned through the patient relations process, patient experience surveys, and critical incidents
- Results and initiatives pertaining to employee and physician engagement
- Commitments outlined in Strategic Plans and Hospital Service Accountability Agreement, Local Health Integration Network, and Ministry of Health & Long-Term Care priorities
- Accreditation Canada's standards and processes
- Federal, provincial, and local directives related to pandemic activities

## Describe your organization's greatest quality improvement achievement from the past year

Timely and safe delivery of quality patient care is integrated into every aspect of our operations and that focus will remain as we develop improvement strategies and plans for the future. Over the past year, Sault Area Hospital's greatest quality improvement achievement has been our ongoing COVID-19 Pandemic Response. SAH is proud of the hard work and resilience of our physicians, leaders, staff, and volunteers who continue to provide outstanding care as the pandemic evolves.

In response to the pandemic, our organization continues to operate a structured Command Centre which has served as an efficient and reliable communication and planning strategy. Our multi-disciplinary teams have come together to provide expert advice and collaboration both internally and with community partners. Some examples of pandemic initiatives include the mass immunization clinics, the COVID Assessment Centre, as well as our community approach to supporting partner agencies by sharing knowledge, resources and supplies. SAH in association with local and regional partners, is providing access to outpatient COVID treatment for high risk individuals through the Monoclonal Antibody Therapy Clinic. The clinic provides early intervention to reduce severe progression of illness and hospital admissions.

The ongoing supportive efforts of our community have included gestures of gratitude honouring the dedication of our staff and physicians, support for fundraising through the SAH 50/50 draws, and generous donations to the hospital foundation. The cumulative effects of COVID 19 will continue to be felt for the coming months and years and because of the incredible amount of commitment by our staff and support from the community, SAH is well positioned for success.

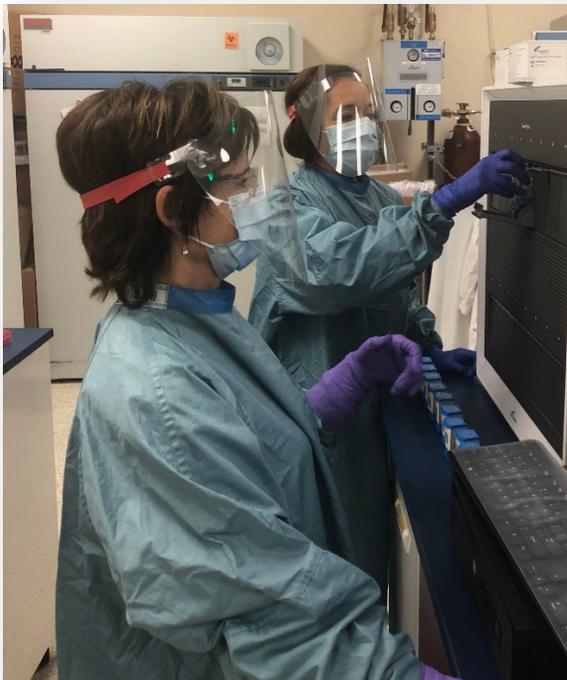


Figure 1 Lab staff processing Covid swabs



Figure 2 Pharmacy staff at the Mass Immunization Clinic

## Collaboration and Integration

Partnership and collaboration between SAH and the Algoma Ontario Health Team (AOHT) is evident in our pandemic response in providing services such as multi-agency vaccination clinics and providing support to the vulnerable homeless population seeking equitable care and services. Working together to plan and integrate support for those most in need has been a priority in strengthening our ability to better serve the community.

Multiple community projects are underway that support collaboration including the AOHT Quality Committee which has been established to measure performance and increase learning across organizations. The AOHT collaborative Quality Improvement Plan (cQIP) is a model of care that is person-centred, efficient, and simplified. The areas of focus for this work include:

1. Improving access to care in the most appropriate setting.
  - Support timely transitions from hospital to long-term care.
2. Increasing access to community mental health and addictions services.
  - Providing options for care outside of the emergency department
3. Increasing access to preventative care.
  - Supporting population health for up to date cancer screening

Establishing a cQIP for the AOHT will improve outcomes by aligning system efforts, encouraging a culture of quality improvement, offering a systematic approach to working together, and fostering community and patient engagement in quality.

Another integrated effort that shines light on local collaboration is the Project Percolator, which is a monthly open forum where projects and initiatives can be socialized. The goal is to create space for understanding and how organizations can work together to start and finish projects that serve the community such as the relocation of Withdrawal Management Services and the Community Wellness Bus. The Wellness Bus provides support for basic needs, connection to services, first aid treatment and harm reduction supplies. It is a mental health and addictions initiative that aligns with the area of focus to improve access to community mental health services.

## Patient/Client/Resident Partnering and Relationships

### 1. Partnering with Patient and Family Advisors

Sault Area Hospital demonstrates a commitment to enhancing our patient and family centered approach to the way we deliver care by recognizing patients as experts in their own care needs. This is reflected in our commitment to a Patient & Family First Culture, whereby patient and family advisors are involved in key decision making in the organization and act as a compass to direct the implementation of projects, process improvements and day to day operations.

Currently, 95 patient and family advisors participate on hospital committees such as Ethics, Accessibility, Operations, and Joint Health and Safety. Our advisors are actively involved in the Algoma Ontario Health Team with tri-chair representation and support from 11 additional members. Advisors also participate through placements on four program-based councils (Algoma Regional Renal Program, Algoma District Cancer Program, Mental Health & Addictions, and Emergency Department), one corporate-wide council, and a resource pool that fulfills ad hoc requests throughout the hospital. Recent PFAC engagements that have had an impact on quality improvement initiatives include:

- Participation as project team members in the new Withdrawal Management Facility
- Essential Care Giver ID program with expansion throughout Algoma to partner organizations
- Participation in activities of the Algoma Ontario Health Team (AOHT) including healthy aging
- Consultation in SAH's strategic planning and quality improvement planning processes

The implementation of a robust Patient and Family Advisory Program has contributed to high-quality patient outcomes and greater patient and family satisfaction.

*“My work on QIP this year remains focused on our emergency department where we continue to monitor the patient experience. It’s an area of SAH that is important to all patients. The most satisfying work to date has been working on the Essential Caregiver pilot program. By engaging with patients and families throughout this pandemic, we’ve learned how to provide family support for our patients at SAH. We’ve started expanding these services across the hospital with success at every level. This work has been achieved in collaboration with family advisors, nurses, key administrators at SAH and AOHT. We are currently having discussions with other health care facilities in Algoma to recognize and standardize essential caregiver roles. It’s a vision that is attainable with the work of all parties involved, and an example of quality improvement in health care for Algoma.”* Louis Ferron, PFAC Advisor



Figure 3 Patient and Family Advisors Louis Ferron (Emergency Department Advisor) and Karen Gillgrass, (Patient and Family Advisor) both actively contributed to the development of the SAH Annual Quality Improvement Plan.

## 2. Partnering to Improve Indigenous Health in Algoma

Algoma has a significantly higher proportion of Indigenous peoples (13.8%) compared to the rest of Ontario (2.8%) ([APH, 2018](#)). There are a number of health disparities, caused by downstream effects of historical events such as the Indian Act and implementation of residential schools, which affect Indigenous northerners including: higher rates of medically complex chronic health conditions, smoking, mental health issues, and admissions to addiction services within Northeastern Ontario. Through addressing cultural competency and partnering with Indigenous-led providers, we will seek to reduce health disparities by addressing colonialism as a social determinant of health and advancing reconciliation within our community.

Recent activities which have contributed to improvements include:

- Leadership Development with an Indigenous focus
- Development of Indigenous health services directory
- Formation of a Diversity, Equity and Inclusion (DEI) working group
- Survey of leaders to get a pulse on current reflection of diversity
- Hospital-wide Orange Shirt campaign and donation to scholarship fund
- Display of Indigenous artwork
- Improvements to Spiritual Services and enhancements to process and access to Spirit Room

The above mentioned activities are in alignment with the objectives as outlined in the SAH Health Equity Plan with focus on an Indigenous Health Plan. Work will be guided by the following objectives:

**OBJECTIVE #1:** Engage and empower our Indigenous community partners to inform and drive action within Sault Area Hospital.

**OBJECTIVE #2:** Educate SAH staff, physicians, and volunteers by increasing availability of resources pertaining to Indigenous health.

**OBJECTIVE #3:** Represent our Indigenous population within SAH staff, physicians, patient & family advisors, and volunteers to increase diversity in decision-making.

**OBJECTIVE #4:** Implement and evaluate quality improvement initiatives that are patient and family-centred to decrease gaps in care for our Indigenous community.

Objectives informing SAH's Indigenous Health Strategy:



## Workplace Violence Prevention

In 2003, SAH developed our Workplace Violence Policy with the purpose of minimizing and/or preventing workplace violence, and to foster the safety and security of those who work at SAH. This initiative was bolstered by a comprehensive Workplace Violence Prevention Program whose mandate is to create a clear understanding that workplace violence will not be tolerated, to provide employees with the necessary education and tools to address potential and actual incidents, to encourage reporting of incident, and to heighten general awareness. The hospital's Workplace Violence Prevention Committee meets monthly to monitor and update existing programs and policies, and identify new initiatives to support a safer workplace.

In 2017 / 2018, SAH undertook a review and refresh of its Strategic Plan. The addition of 'Healthy, Well & Safe at Work' as a priority initiative reconfirmed our strategic commitment to ensuring staff, physicians, and volunteers work in an environment that is safe and promotes a culture of health and wellness. The hospital engaged frontline workers, physicians, and volunteers in order to collect feedback which then was used to inform our multi-year plan to support our strategic priority initiative of Healthy, Well and Safe at work. Improvements in workplace violence was a focus of these consultations and is a key component of our plan.

In June 2020, after several years of planning, a new incident reporting system was implemented. The design took into consideration best practices, legislation requirements, and feedback of workers. This has resulted in a system that is easier for workers to complete and captures the relevant details pertaining to workplace violence.

More recently, a refreshed Code White Protocol was established and a plan for education and skill building is underway. Empowerment of staff based on effective training, tools and resources is focused on de-escalation of behavior-based violent incidents. SAH is continuously developing improvement strategies through assessment of occurrences and incidents.

## Alternative Level of Care

Alternate level of care (ALC) refers to patients who may no longer need acute treatment in a hospital, but who continue to occupy hospital beds as they wait to be discharged or transferred to another care environment. While this indicator has been traditionally reported by hospitals, reducing ALC days is truly a cross-sector, community-wide effort. Despite external challenges impacting ALC, SAH has continued to engage community partners to support complex discharges and identify new ways to work together including engagement with the patient and family to support the right care in the right place.

Community partners providing care settings for ALC include: Home and Community Care, Red Cross, March of Dimes, Algoma Regional Community Hospice, retirement homes, assisted living, supportive housing, and local long term care homes. Continuous engagement with Home and Community Care is aimed at developing and coordinating timely and effective discharge plans.

Collaborative work with the Algoma Ontario Health Team includes:

- Post-Falls Pathway in the emergency department
- Early frailty identification
- Out-patient geriatric rehab/geriatric day hospital
- Caregiver ID program

Sault Area Hospital also recognizes the importance of addressing ALC risks before a patient is admitted to hospital. The Emergency Department utilizes a multifaceted approach to admission avoidance through an embedded resource team. A component of this team is Geriatric Emergency Management (GEM) which conducts a frailty assessment to determine how the person can be supported with available resources. GEM provides assistance with patients and families in navigating the system to ensure access to the right care at the right time. Additionally, we are implementing a full hospital-wide cross walk, based on the ALC Leading Practices Guide (2021). With the support of our community partners, following the Home First philosophy, and our Senior Friendly work, SAH continues with focused discharge planning efforts and defining a new normal for managing ALC.

## Virtual Care

Sault Area Hospital (SAH) has significantly matured in our Digital Health journey over the course of the past year through several advancements related to our electronic health record system, information management, analytics, databases and reporting tools, and scheduling solutions. Virtual care in particular has evolved in the areas of utilization, measurement/evaluation, organizational commitment, number of modalities, and the co-design of virtual programs with patient/family advisors. The COVID-19 pandemic is rapidly stimulating new innovations and propelling SAH to further develop our virtual care programs, which in turn, results in operational efficiencies and increased access to care for patients/clients.

SAH continues to employ the Ontario Telemedicine Network as a foundational virtual care service where patients/clients engage in confidential and secure appointments with an array of providers in the circle of care. The Algoma District Cancer Program (ADCP) responded promptly at the onset of the COVID-19 pandemic by transitioning to provide virtual patient care both in the ADCP and the Radiation Therapy Department. Recent feedback from ADCP's Patient and Family Advisory Council indicates that virtual face-to-face interactions are preferred by patients over telephone visits.

Virtual care is being expanded at SAH in a way that is continually re-shaping the landscape of service delivery at the hospital. Two noteworthy examples of virtual care initiatives illustrate SAH's success in implementing industry-leading technology. SAH is digitally supporting surgical patients with SeamlessMD, a remote monitoring platform that is keeping patients safe and connected while at home during the COVID-19 pandemic. SAH is one of the first hospitals in Northeastern Ontario to use SeamlessMD as part of Ontario Health's latest remote patient monitoring initiative to empower patients at home and minimize in-person surgery-related visits during the pandemic and beyond. Using SeamlessMD, patients undergoing surgery can receive personalized education, progress-tracking, and post-op symptom monitoring with any device (e.g., smartphone, tablet, computer) while providing self-reported data such as pain score, symptoms, range-of-motion, and wound photos for the surgical care team to stay connected remotely – enabling quicker intervention if necessary.

One of the new areas of adoption is Mental Health and Addictions, where SAH is pioneering the application of SeamlessMD in this population. Digital remote care monitoring is being systematically introduced in outpatient mental health and addictions services. The teams are eager to venture into virtual health using a platform that will provide clients with timely information, allow them to engage with health care professionals via daily health checks, help users set and track meaningful goals, and incorporate new technology into clinical care plans.

SAH is also involved in virtual care in the community through our partnership with the Algoma Geriatric Clinic and the North East Specialized Geriatric Centre (NESGC). This exciting collaboration involves community partners to help facilitate virtual visits. Care providers now have the opportunity to view patient functioning in their home environments, which enhances clinical assessments and ultimately results in improved care delivery.

The practice of virtual care is constantly being appraised in terms of ethical guidelines, privacy and technological impact as we grow our vision in developing of governance, policies and standards. Virtual care has proven to remove barriers to care such as distance, time, and cost associated with travel to hospital – and SAH is actively pursuing our commitment to support this evolving frontier of healthcare.

## Trillium Gift of Life

### Ontario Health - Trillium Gift of Life Network

SAH was recognized by Ontario Health (Trillium Gift of Life Network) for its outstanding efforts to integrate organ and tissue donation into quality end-of-life care in 2020/21. SAH received two awards:

- Provincial Conversion Rate Award for meeting or exceeding the target conversion rate of 63 percent set by Ontario Health (Trillium Gift of Life Network) by reaching 70 percent. The conversion rate is the percentage of potential organ donors (patients who die in a hospital setting and are deemed medically suitable for donation) who went on to become actual donors. This is the third time our hospital has received this award.
- Eligible Approach Rate Award for meeting or exceeding the eligible approach rate target of 90% set by Ontario Health (Trillium Gift of Life Network). This award recognizes hospitals for demonstrating leading practices by facilitating a donation discussion with eligible patients/families of patients at the end of life.

The contribution and collaboration by staff and families is evident in this important work and it was an honour to receive these awards.

## Compensation

SAH has implemented and publicly posted its Executive Compensation Framework in accordance with the Regulation under the *Broader Public Sector Executive Compensation Act, 2014* (BPSECA). An element of performance-based pay is included in this Framework that applies to the senior leadership team. This performance-based pay is determined by an assessment of achievement of SAH's hospital objectives and QIP targets. Under the *Excellent Care for All Act, 2010*, hospitals must link executive compensation to the quality improvement targets set out in the hospital's quality improvement plan.

On an annual basis, the Board of Directors approves a focused set of hospital objectives that represent the strategic priorities of the organization. The Board-approved QIP targets support the hospital, securing the highest impact on quality.

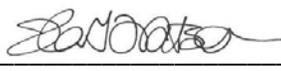
## Contact Information

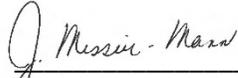
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## Sign-off

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

  
Sharon Kirkpatrick  
Board Chair

  
Ila Watson  
President & CEO

  
Johanne Messier-Mann  
Quality Committee Chair