

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

May 26, 2020



## OVERVIEW

Royal Victoria Regional Health Centre (RVH) is a busy, complex regional health centre - the largest in North Simcoe Muskoka - providing specialized services and advanced technology to the more than 450,000 residents of the region. The Senior Leadership Team is accountable for a budget of \$366 million. They also provide oversight of approximately 4000 employees, physicians, volunteers and learners and has achieved 10 consecutive balanced budgets. RVH is also home to the Family Medicine Teaching Unit, a partnership with the University of Toronto, providing family physicians with their final two years of training and education before they take on their own practices.

RVH's top priority is to provide safe, high-quality patient-centred care, as demonstrated by our Accreditation Canada survey result of Exemplary Standing in both 2015 and 2019.

Our MY CARE strategic plan puts patients and families at the centre of everything we do. It means that at every moment, during every interaction, the care and safety of patients comes first as we deliver exceptional healthcare to residents of the region.

Our Vision: Make Each Life Better. Together.

Our Mission: Exceptional care is our passion. People are our inspiration. Safety is our promise.

Our Values: Work Together, Respect All, Think Big, Own It, Care.

Our Strategic Directions: Focus on MY CARE, Drive Clinical Excellence, Value People and Accelerate Teaching and Research.

As a consistently high-performing health centre, RVH continues to

drive measurable results supporting top quality care and outcomes. With an unrelenting focus on safety, we use evidence-based practices, processes and resources wisely and are guided by an ethical decision-making framework. RVH continues to monitor progress and publicly report on our performance to demonstrate accountability, a commitment to transparency and continuous quality improvement.

RVH's annual Quality Improvement Plan (QIP) is guided by a comprehensive assessment of our opportunities to improve quality while ensuring we continue our journey to enhance access to outstanding healthcare close to home. The 2020-21 QIP defines our priorities; it sets out a detailed work plan to improve quality by improving access to care; and ensures we deliver patient-centred care. Specifically, we will:

- create a care experience that is patient-centred as measured by our "Would you recommend our hospital to family and friends" score for all medical and surgical patients and by our "Did you receive enough information when you left the hospital" score for all medical and surgical patients.
- provide a safe environment for patients to receive care and clinicians to practice by ensuring that a) patients are being discharged with the correct medication, and b) that workplace violence is reduced
- ensure patients are not waiting for an inpatient bed any longer than necessary

## DESCRIBE YOUR ORGANIZATION'S GREATEST QI ACHIEVEMENT FROM THE PAST YEAR

As Access is a dimension of quality, and was identified as RVH's top

risk, RVH partnered with Bayshore Healthcare, IOOF Seniors Home Inc. and the North Simcoe Muskoka Local Health Integration Network (NSM LHIN) to open a 29-bed Alternative Level of Care (ALC) Transitional Rehab Program (program) in December 2018 to smoothly transition patients out of hospital and back into their own homes.

The ALC Transitional Rehab Unit is operated by Bayshore's Integrated Care Solutions team in a local Barrie retirement home. The Transitional ALC program enhances the recovery process by helping patients regain their strength and independence before moving back home. Eligible individuals receive high-quality comprehensive care, in a supportive congregate community setting.

The key objective of the program is to ensure patients and their families have all of the proper supports and services in place for a smooth and successful transition home. Additionally, the program aims to reduce the pressure on ALC beds, unscheduled emergency department visits and hospital readmissions within the region by increasing community supports. Access to this program helps to ensure all partners in the delivery of services are working together toward the common goal of providing the best care possible, at the right time and place, to support people in making a safe transition home from hospital.

As of December 2019, a total of 189 patients were discharged from the program with 76% of the patients successfully transitioning to their home. The program is showing a positive impact on throughput for RVH through timely access to community transitional care beds.

The short term transitional care beds continued to operate in 2019-20, with an expansion of 10 beds to the Wasaga Beach area.

## **COLLABORATION AND INTEGRATION**

RVH partnered with many community organizations to submit an application to become an Ontario Health Team (OHT). Although the Barrie-area OHT planning team has more work to do before we are approved, we continue to work with our many partners. Below are some more recent examples:

In early 2020, and after two years of broad consultation, RVH submitted its Pre-Capital Plan for future development of the RVH North Campus and a new South Campus in south Simcoe County to the MOH Capital Branch for approval. Broad, inclusive community consultation has been foundational to RVH's planning process. In fact, we logged an unprecedented 27,000 interactions with area residents, patients and families, health and community partners, RVH staff, physicians and volunteers. That invaluable feedback informed every step of RVH's new master program and master plan.

Additional examples of collaboration and integration include the following regional programs: Heart, Cardiac Rehab, Cancer, Renal, Child and Youth Mental Health, and Addictions (RAAM). In addition, there is excellent collaboration with local partners in a Symptom Management Clinic (Palliative Care). As well, RVH collaborates with other sites providing resource supports such as Accreditation, Decision Support, and Legal.

## **PATIENT/CLIENT/RESIDENT PARTNERING AND RELATIONS**

We believe engagement is about giving stakeholders who may be impacted by a decision or action the opportunity to partner with us and help shape decisions before they are made. Real community engagement requires listening and learning, as well as informing and educating. Only through genuine two-way dialogue can RVH make better decisions that meet the needs of all stakeholders. All departments in the health centre are expected to engage and communicate with a broad range of stakeholders, particularly patients and families. In keeping with its commitment to provide safe, high quality patient-centred care, RVH established a Patient Family Advisory Council (PFAC) in 2014. The council participated in development of the 2020-21 QIP. Through the council's monthly meetings, PFAC members provided feedback on individual elements of the QIP including metric targets and the narrative report. By reviewing the proposed priority indicators, PFAC has provided its endorsement of the plan.

The QIP will be a standing item on the PFAC agenda, PFAC members will be engaged to ensure we maintain our focus on the MY CARE strategy and incorporate the lens of the patient and their families in every change we make to enhance the quality of care and overall experience. The engagement will range from consultation on emerging plans to participation in quality improvement projects. In addition to PFAC's participation in the development and implementation of the QIP, there are other opportunities for patients and their families to influence quality improvement. RVH develops themes that emerge from many sources, including patient feedback surveys, post-care calls, complaint and compliment information, and patient safety event monitoring system data sets to make improvements where required.

## WORKPLACE VIOLENCE PREVENTION

At RVH, an integral part of our mission statement is "Safety is Our Promise". Our MY CARE plan includes the strategic direction of Value People – engaging and supporting our employees, physicians, volunteers, and students in the delivery of exceptional care through a healthy, violence-free, respectful workplace. RVH recognizes the potential for violence in the workplace and is committed to taking every reasonable precaution to identify, eliminate or minimize potential sources of this hazard.

Predicated on the definition of workplace violence delineated by the Occupational Health and Safety Act, the RVH Workplace Violence and Harassment Prevention (WVHP) program provides a framework for hazard identification, risk assessment, risk elimination or mitigation, incident response, investigation, recovery support, and all-staff education to address all threatened, attempted or actual acts of violence or harassment in the workplace. Since 2010, the WVHP program has continuously evolved to address the challenges presented by a changing and growing patient population and a growing RVH workforce.

To measure the effectiveness of our WVHP program, statistics related to incidents of threatened, attempted or actual violence, or incidents of workplace harassment, are gathered by the Workplace Safety department (as lagging indicators) and shared with the RVH Joint Health and Safety Committee on a monthly basis (posted publicly on our Intranet), as well as the Senior Leadership Team on a quarterly basis. The quarterly data is further reported to the Board of Directors.

In addition to quarterly reporting on incidents of workplace violence and harassment, quarterly statistics are also gathered to reflect the total volume of staff assist calls received by Security Officers. These calls frequently represent opportunities to de-escalate situations that may otherwise have resulted in threatened, attempted or actual violence. These interventions are a vital component of our violence prevention and mitigation strategy.

## **VIRTUAL CARE**

For 2020/21 RVH will be working towards the implementation of a virtual critical care (VCC) outreach model with our regional partners. By leveraging technological advancements (Ontario Telemedicine Network, Connecting Ontario, etc.) the critical care outreach team from RVH will be able to support two smaller hospitals by providing primarily Intensivist consultations. Both sites will also have access to the critical care outreach nurse and respiratory therapist who can coach, mentor and provide direction to the care team involved in caring for a critical care patient in another community hospital setting. The goals of the VCC model are to allow patients to continue receiving quality and safe care in a setting that is close to home, reduce transfers and ensure the local care teams feel supported by the clinical expertise of Intensive Care physicians and RVH team members available virtually.

The RVH Simcoe Muskoka Regional Cancer Program has the second highest performance for the use of telemedicine visits in the province.

## **EXECUTIVE COMPENSATION**

RVH's Board of Directors is committed to strengthening the accountability of the health centre as an organization receiving valuable public funds. Four times a year we report publicly on key performance indicators and, annually, we share details of our executive performance plans. These are posted on the RVH website.

RVH leaders are held accountable for performance on strategic initiatives and metrics associated with the QIP on a monthly basis and integrate relevant action into 90 day plans.

Each member of RVH's executive team is evaluated on their ability to meet a wide range of performance targets. A portion of their compensation is directly linked to the achievement of the organization's Quality Improvement Plan targets.

## **CONTACT INFORMATION**

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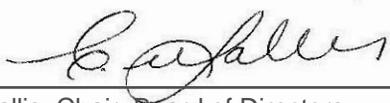
## **OTHER**

N/A

## 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 on May 26, 2020.



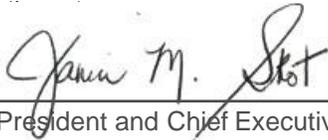
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Charlotte Wallis, Chair, Board of Directors



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Kimberly Matheson, Chair, Board Quality Committee



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Janice Skot, President and Chief Executive Officer