

Quality Improvement Plan (QIP)

# Narrative for Health Care Organizations in Ontario

March 31, 2023



## OVERVIEW

West Park Healthcare Centre (the Centre) is a national leading hospital in rehabilitation and complex continuing care that has been helping patients facing life-changing health challenges to reclaim their lives and realize their potential since 1904.

The Centre has created a nurturing campus of care where patients and their families are supported in responding to adversity and adapting to new circumstances. The collaborative, restorative care at West Park is empowered by advanced technology and research and gives patients and their families the skills, knowledge and confidence to lead productive, independent lives.

West Park's Quality Improvement Plan 2023-24 and the indicators identified within, align with our strategic priorities of:

- Exemplary Care: Deliver high quality patient and family centered care
- Integrated Campus of Care: Build an integrated campus of care to improve access to local, regional and specialized services
- Operational Excellence: Emphasize operational excellence to ensure organizational sustainability
- A Great Place to be: Build on our culture to create a healthy and safe environment where people want to be
- Bold Partnerships: Work hand-in-hand with our partners to simplify the patient and family journey

As reflected within these priorities, West Park is committed to achieving excellence in patient care, service and work life through ongoing quality improvement. Quality improvement is a shared accountability across the Centre for patients and families, students,

employees, physicians, leadership, volunteers and Board members. As such, individuals at all levels of the organization have been engaged in the development of the Quality Improvement Plan. Patients and families have provided their perspective on the 2023-24 Quality Improvement Plan, through the development of change ideas within the workplan, the patient relations process, and other mechanisms such as patient experience survey feedback.

West Park Healthcare Centre (WPHC) is currently constructing a new, six-storey, approximately 730,000 square foot hospital that will create an accessible, senior-friendly and green environment that is flexible and technologically advanced to deliver more enhanced and integrated rehabilitative services. The new hospital will accommodate rehabilitation and complex continuing care beds, expanded outpatient services, community living and outreach programs. It will incorporate the best and latest in evidence-based design including 80% single-patient rooms including airborne isolation rooms and 20% semi-private rooms; a three-piece washroom for every patient for improved infection control; decentralized medication, supply and equipment areas for timely and efficient care; and decentralized team stations which are close to patient rooms for safe and patient-centred care. Significant increases in outpatient care spaces will serve double the current patient volume with similar quality design considerations as the inpatient units. The new hospital will include emerging technologies to enable integrated clinical care and enhance quality, patient safety and outcomes, including a robust nurse-call system, enhanced unified communication systems, electronic medication delivery systems, integrated bed alarms, real time location systems, patient wandering and staff duress devices, patient status monitors, integrated bedside terminals, self-service registration and

wayfinding kiosks, and virtual care capabilities. Enhanced therapeutic environments extend to accessible and safe outdoor landscaped spaces which include inpatient terraces, accessible outdoor therapy trails, meditative gardens, social spaces and gathering destinations for patients, families, staff and community.

The Centre continuously strives to work towards improvement for the priorities identified within its Quality Improvement Plan. The shared accountability of quality improvement will facilitate the achievement of the established targets and work towards West Park's vision of 'exemplary care inspired by innovation and exceptional performance'.

For 2023-24, West Park has identified the following five areas for improvement:

- Workplace Violence
- Patient Experience
- Equity Diversity Inclusion (EDI)
- Discharge Summaries
- Falls Risk Assessment

These priorities exemplify our commitment to our staff, patients and community as we continually raise the bar on quality, staff and patient safety.

Our achievements over previous Quality Improvement Plans have demonstrated on-going and incremental improvements year over year. These results emphasize West Park's commitment to quality improvement and our vision to provide exemplary care inspired by innovation and exceptional performance. This past year is no exception as West Park has had numerous quality improvement

achievements that the Centre is proud of including:

Accreditation with Exemplary Standing by Accreditation Canada Accreditation is a recognized process to assess and improve accountability and efficiency in delivering quality healthcare. All hospitals in Ontario undergo Accreditation.

Organizations are assessed against standards developed by Health Standards Organizations (HSOs). Required Organizational Practices (ROPs) are evidenced-informed practices which address high-priority areas to enhance patient safety and minimize risk.

Through the accreditation process, organizations are mandated to demonstrate compliance with standards.

The Centre completed Phase I Accreditation process in June 2022 through a three day virtual site visit. Two system-wide standards were evaluated; Leadership and Governance. Over 200 standards assessed were met, resulting in Exemplary Standing being awarded to the Centre.

Phase II on-site survey will be conducted in June 2024.

#### Stroke Accreditation

West Park was granted a special Stroke Distinction Award from Accreditation Canada for the period of October 2021 – October 2025. This award recognizes demonstrated clinical excellence and an outstanding commitment to leadership in stroke care by meeting rigorous standards for quality and safety.

#### Provincial Strategy for Long Term Ventilation

In 2021, West Park Healthcare Centre was asked by Provincial Programs Branch of the Ministry of Health, to lead the development of a Provincial Strategy for Long Term Vent care. The strategy was developed based on Quadruple Aim Elements to:

- Help keep ICU beds available for those most in need of them.
- Improve the quality of life for people requiring long-term ventilation by allowing these individuals to receive specialized care closer to home.
- Reduce unnecessary emergency department visits
- Make available expertise and educational resources in LTV across the province to enrich healthcare for Ontarians.
- Coordinate existing resources from across the province to support better patient care.

#### Balanced Scorecard

Within its quality toolbox, the Centre uses a Balanced Scorecard as a tool to monitor performance across four quadrants, Our Stakeholders and Community; Clinical Excellence, Our People and Organizational Capacity; and Financial Capacity. Each indicator has a numeric value and colour to highlight performance, and is reviewed across the organization including the Quality Committee of the Board.



## PATIENT/CLIENT/RESIDENT ENGAGEMENT AND PARTNERING

West Park Healthcare Centre (Centre) continues to emphasize the importance of a Patient and Family Centered Care approach to care. One of the varied avenues in which to engage patients and families is through the Centre's Patient & Family Advisory Committee (PFAC). PFAC is the advisory body by and for patients and family members. PFAC works in partnership with West Park to ensure that the needs, wants, preferences and priorities for Patient-and Family-Centred Care are reviewed, considered, and incorporated into all of the hospital initiatives that impact patients and their families. More specifically, the committee provides patients and families an opportunity to propose new ideas and improvements, become involved with planning and decision-making, offer feedback, and have direct access to the Centre's Senior Leadership Team, amongst

other activities. In addition, unit forums take place across the Centre and are supported by staff. These forums are by and for patients and family members to meet on a regular basis with unit leadership, enhance care drive improvements review items that are impacting their day to day quality of life.

The Centre welcomes the feedback of patients and families as part of its' ongoing commitment to patient-centred care. The Centre's Compliments and Concerns process is a formal mechanism to express opinions and to seek resolution. In alignment with the requirements of the Excellent Care for All Act (ECFAA), the compliments and concerns process is an important component of the Centre's quality improvement program. The Centre recognizes compliments and concerns as an important indicator of patient satisfaction. Feedback is used to improve the quality of care and services provided and to acknowledge the valuable contributions of staff.

Another mechanism that is being used to obtain in-depth feedback is patient experience surveys. The surveys are representative of the rehab and complex continuing care populations. Responses to the survey questions will help to inform change ideas and quality improvement activities.

Obtaining this feedback provides a robust mechanism to ensure that the patient and families are partners in the delivery of care. This partnership has supported patients and families to be meaningfully heard and incorporate their viewpoints. This information is embedded in the 2023-24 change ideas and action plan to continue to build upon a positive patient and family experience.

## PROVIDER EXPERIENCE

Volatility across sectors in the job market is exacerbated in healthcare due to shortages in critical positions such as nursing and respiratory therapy, as well as inflationary pressures compounded by legislative compensation constraints and uncertainty e.g. Bill 124

As we approach the opening of the new facility in 2023, there will be a larger workforce required to be functional. The Centre has bolstered efforts to support the recruitment of new employees, as well as retain and engage current employees. The following actions have been taken over the last year:

Development and implementation of a recruitment plan, including an investment in a 3rd party recruitment partner and an additional internal recruitment resource to assist in filling vacancies and address staff shortages that contribute to overworked staff and burnout.

We are currently investigating the implementation of a new Wellness Program focused on psychological and mental health of healthcare workers (provincially funded Frontline Wellness program being coordinated by Waypoint Centre with multiple hospital participation)

Volunteers were re-introduced in June 2022 to support units and ease staff workload

Management undertook a competitive compensation analysis to evaluate the alignment of current salaries and benefit offerings compared to other organizations. Changes were implemented within the constraints imposed by Bill 124. With Bill 124 changes

and recently released OHA market compensation results, management will be undertaking another review for competitive market positioning of front line healthcare roles.

Virtual staff town halls have been held to increase communication, and provide staff the opportunity to ask questions and share their thoughts or any concerns

New recognition efforts have been undertaken e.g. A staff appreciation week was held in Dec 2022, with various activities. Positive feedback was received.

An interactive leadership development session with a focus on change management was held with people leaders, facilitated by West Park's leadership development external vendor.

There have been Campus Development virtual sessions, in-person road shows and development of an employee communication plan to engage staff in two-way dialogue leading up to the Nov 2023 transition to the new facilities

CEO monthly coffee chats with staff have been implemented to increase senior leadership visibility and connect directly with staff in meaningful dialogue. Common themes for improvement have been captured for actioning and for input to an updated People Strategy (next point).

There is a plan to refresh the People Strategy in 2023/24. The strategy will engage multiple stakeholders, including employees, and continue to be aligned to West Park's strategic priorities and "Great Place to Be" people mission statement. Identified areas of

focus based on preliminary employee feedback, previous engagement survey results and market analysis will include:

- o Recognition/Appreciation
- o Wellness & Mental Health
- o Competitive compensation, based on market benchmarking
- o Recruitment to address continuing shortages
- o Learning, Development and Career Opportunities
- o Staff Engagement (including measurement and benchmarking through surveying, followed by action planning for continuous improvement).

## **WORKPLACE VIOLENCE PREVENTION**

West Park Healthcare Centre is committed to providing a safe and healthy workplace free from actual, attempted or threatened violence within the workplace or during work-related activities and recognizes the right of staff to freedom from violence.

The Centre is committed to: ensuring a work environment that is safe, healthy, secure and respectful of each person and will take every reasonable precaution and make every effort to prevent staff, patients and visitors from exposure to any form of violent, abusive or aggressive acts or potential violent acts in the workplace; and the implementation of measures and procedures to prevent, control and minimize the risk of workplace violence through its Human Resources strategy, Occupational Health, Safety & Wellness plan as well as, Violence Prevention policies and Program.

The Centre's prevention of workplace violence plan includes training to prevent and address workplace violence, regular review of policies and safety incidents, and workplace violence risk assessments. Additionally, efforts are already underway for

adoption and implementation of workplace violence prevention electronic learning module for mandatory, annual certification for all staff. The Centre maintains a commitment to the safety and well-being of our staff and ensuring West Park is a Great Place to Be.

West Park has implemented a leading practice policy on identification of potential for patient violence during transfer of accountability. The purpose of this policy is to outline the planning, resources, collaborative efforts, and course of action needed to transition the care of patients with a risk of violence. Sharing information between sectors, locations, and workers is central to care transition and worker health and safety. This policy addresses four (4) care transition situations with care recipients who pose a risk of violence. These include:

1. In-hospital from one shift or location to another
2. Between healthcare institutions or between units
3. Between hospital and patients home/community care setting/ or public setting.
4. Providing escort services to another location not mentioned above

## **PATIENT SAFETY**

Discharge Summaries

West Park has identified Discharge Summaries as a quality improvement indicator for 2023-24. This quality improvement project will see the creation of an electronic discharge summary within the Electronic Patient Record (EPR). The electronic discharge summary will allow discharge summaries to be delivered to the primary care provider within 48 hours of patient's discharge from hospital. Discharge

summaries will;

- Support and improve communication and coordination between and within the community/primary care providers, hospital, post-discharge care providers, and patients and families.
- Provide a method to support care transition
- Improve the continuity and coordination of care, and reduce medical errors
- Increase patient satisfaction and reduce hospital readmissions and patient complications

#### Falls Risk Assessment

As part of our RNAO Best Practice Spotlight Organization (BPSO) Strategy and our collaboration with the North West Toronto OHT, West Park's quality improvement goal is to ensure A Falls Risk Assessment is completed for every admission. A significant change in patient status is also set to trigger a Risk Assessment Checklist.

West Park is committed to providing ongoing organization-wide education to all staff regarding falls prevention methodology and practice expectations.

## HEALTH EQUITY

#### Patient Health Equity

Standardized patient level demographic data collection started in 2013 following the 'Measuring Health Equity' mandate; expanded to include all Toronto Regional Hospitals and Community Health Centres.

The equity data collected for planning and service delivery will help

the Region document providers' experiences with using the data, identify health disparities that are surfacing and how they have been addressed, and collect best practices that can be used for knowledge sharing between providers. West Park's Equity Data collection was significantly higher than the overall participation rate across organizations.

Equity questions include; spoken language, born in Canada, racial/ethnic group, disability, gender, sexual orientation, income, number of people income supports.

West Park is currently working with our Human Resources team on role redesign to our inpatient admission and outpatient intake/registration processes to enhance our ability to support the collection of health equity data, in current state. We are also developing new future state workflows for inpatient and outpatient registration to include collection of health equity data, leverage new technologies in the new hospital, such as registration kiosks and integrated bedside terminals.

#### Employee Health Equity

In 2020 West Park identified the need to for an increased focus on equity, diversity, and inclusion, defined as:

**EQUITY** - Equitable treatment of individuals, access to opportunities and representation of under-represented and marginalized groups across all levels of the organization

**DIVERSITY** – Respecting, acknowledging and celebrating everyone's individuality and differences in the lived experiences and perspectives of people that may include race, ethnicity, colour,



ancestry, place of origin, political belief, religion, marital status, family status, physical disability, mental disability, sex, gender identity or expression, sexual orientation, age, class, and/or socio-economic situations.

**INCLUSION** – A sense of belonging, feeling respected and valued for who you are as an individual. It means feeling a level of commitment from others so that you can do your best work. Inclusion is an active, intentional, and continuous process to address inequities and build a respectful and diverse community that ensures welcoming spaces and opportunities to flourish for all.

Initial steps including identifying and acknowledging potential systemic racism. An anti-black racism was conducted, with results to be shared for action planning with senior leadership, staff and the Equity, Diversity and Inclusion Collaborative (EDIC).

The EDIC was created to provide recommendations, advice and information to:

- Remove barriers that do not promote, support or enable equity, diversity and inclusion.
- Incorporate an equity, diversity and inclusion lens into the day to day activities of WPHC
- Build a more diverse, richer and inclusionary workplace culture

EDIC members will be provided with marketplace available EDI training to develop EDI West Park Champions for EDI.

## **EXECUTIVE COMPENSATION**

The Centre holds its executives accountable for the achievement of quality improvement targets. Achieving targets is linked to 5% of base salary within the acceptable performance variance for our Chief of Staff, VP, Campus Development & Support Services, VP Finance and CFO, VP Strategy, Innovation & CIO, VP People & Culture and our VP Programs & CNE.

## **CONTACT INFORMATION**

For further questions or information please contact: Jan Walker VP Strategy, Innovation & CIO [jan.walker@westpark.org](mailto:jan.walker@westpark.org)

## 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 **March 31, 2023**

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**Kim Marshall**, Board Chair

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**Elizabeth Squissato**, Board Quality Committee Chair

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**Anne-Marie Malek President & CEO**, Chief Executive Officer

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**Jan Walker VP Strategy, Innovation & CIO**, Other leadership as appropriate

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