

**Quality Improvement Plan (QIP)**

# **Narrative for Health Care Organizations in Ontario**

March 5, 2020



## OVERVIEW

Mackenzie Health is a dynamic regional healthcare provider serving a population of more than a half million people across York Region and beyond. Nationally recognized for its commitment to safety and quality patient care, Mackenzie Health is a healthcare leader with a wide variety of academic partners. Mackenzie Health includes Mackenzie Richmond Hill Hospital, the future Mackenzie Vaughan Hospital, as well as a comprehensive network of community-based services in Richmond Hill, Vaughan and the surrounding communities.

Mackenzie Health is committed to quality improvement and providing safe patient care. Our 2020/21 Quality Improvement Plan (QIP) continues to support our journey to “create a world class health experience”. Our commitment to ensuring timely access to care for all those within our community, and supporting smooth transitions throughout the healthcare system, supports our mission to “relentlessly improve care to create healthier communities”. As in past years, our QIP is developed in consideration of past and current performance and is informed by feedback from our patients and families, staff, and best practices including Accreditation Canada Standards, Required Organizational Practices.

The 2020/21 Quality Improvement Plan demonstrates our ongoing commitment to patient safety and our relentless pursuit of continuously improving the care and services we provide alongside our patients, their families and our community. The plan outlines our journey towards achieving zero harm and is designed around Quality and Patient Safety Framework which is measured by specific and measurable quality aims. This plan will guide our quality focus

throughout the coming year and will also serve as our touchstone as we prepare for the opening of our second hospital site in early 2021.

Underscoring our commitment to patient-centred care, the QIP recommendations for 2020/21 were presented to our patient partners. Patient partners provided feedback on what they felt would be important to patients regarding quality and patient experience. Themes that emerged included engagement of patients and families; patient safety; communication and information sharing; timeliness and responsiveness; and quality medications. Their valuable insight has helped to shape the final QIP and further ensures that the priorities for quality reflect the patient perspective.

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

1. Healthcare Information and Management Systems Society (HIMSS) Nicholas E. Davies Award of Excellence

In 2019 Mackenzie Health was named a recipient of the Healthcare Information and Management Systems Society (HIMSS) Nicholas E. Davies Award of Excellence. The award recognizes the thoughtful application of health information and technology to substantially improve clinical care delivery, patient outcomes and population health. This international award has been received by only a few other Canadian healthcare organizations in its 26-year history.

The Davies Award of Excellence was awarded based on three clinical case studies:

- A. Improved Stroke Outcomes Utilizing Data and Technology  
For patients presenting with an ischemic stroke it is imperative that the time from arrival to hospital until the administration of life saving medication is minimized so patients can have better outcomes by limiting brain damage. Prior to implementing our electronic medical record system, this time was 53.5 minutes. Through the dedication of the Mackenzie Health's Stroke team, along with the tools available as a result of an electronic medical record (EMR) system, the time was reduced to 27 minutes. This is a 50% improvement and below the provincial target of 30 minutes. This improvement directly impacted patient outcomes by increasing the percentage of patients going home without impairment by 52% and thereby negating the need for admission to a rehabilitation unit. The further downstream impact of this is an estimated cost avoidance of \$360,326 on rehabilitation care alone.
- B. Leveraging Technology to Combat Hospital-Acquired Clostridioides Difficile Infections (HACDI)  
The Anti-microbial Stewardship Program and Infection Prevention and Control teams have been dedicated to reducing antimicrobial usage and HACDI at Mackenzie Health since 2011. Although successful, their work has been manual and therefore time consuming, and as a result were unable to maximize the full reduction potential. With the introduction of the electronic medical record, the teams developed many thoughtful uses of the technology and drove the numbers down significantly in a short period of time. From July 2017 to 2019 HACDI rates have dropped to 0.16/1000 patient days. Since the introduction of the EMR, the team has been able to avoid 134 cases of HACDI with an estimated \$1.6 million dollar cost avoidance.

The positive impact on patient care is staggering with an estimated 3,484 patient days avoided and 15 deaths were prevented.

C. Enhancing Care Delivery for Chronic Obstructive Pulmonary Disease (COPD)

By utilizing the many features of Mackenzie Health's electronic medical record, including sophisticated order sets and electronic pathways, the multidisciplinary clinical team was able to reduce length of stay of COPD patients by an average of 2.2 days. This reduction resulted in an increase in bed turnover by 28% and enabled 60 more admissions to be cared for in an inpatient bed instead of a lengthy stay in the Emergency Department. This reduced length of stay contributed to a yearly saving of \$200,000 in funding and provided better outcomes to the patient allowing them to go home and recover in their own environment. Mackenzie Health is proud to be recognized for the work of our teams and the improvements in clinical care delivery and patient outcomes. The integration between our clinical teams and digital health strategies, such as Epic and our electronic medical record, have clearly made a meaningful difference to our patients, their families and the broader community.



## 2. Zero Harm journey

Mackenzie Health has embarked on a journey towards Zero Harm in November 2019. Leveraging the current quality structures, we have committed to an aim of zero preventable harm and zero worker injuries by embracing a culture of high reliability from board room to bed side. Over the coming three years, Mackenzie Health will accelerate its effort to improve patient safety starting from setting an explicit goal of zero harm. With a focused and personally engaged leadership who will invest in driving the journey, we are committed to make Mackenzie Health a safer place. This will be achieved by drawing on safety science to create a system of safe and high reliability and is aligned with our current strategy and roadmap to success.

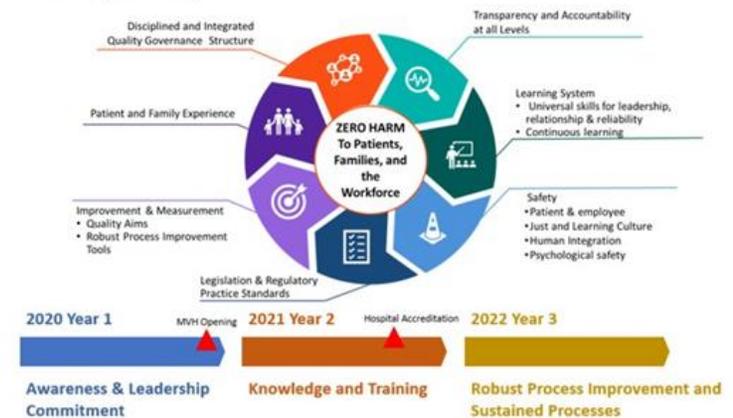


## 3. Quality and Patient Safety Framework

Mackenzie Health has developed the quality and patient safety framework in alignment with our journey to zero harm, providing us with a comprehensive overview of our safety science. This framework describes a vision for safe and high-quality care at Mackenzie Health and sets out the actions needed to achieve this vision. It also serves as our guide for reviewing investments and

research in safety and quality. This framework will improve Mackenzie Health ability to learn from mistakes and merging safety culture, process improvement and learning systems.

### Mackenzie Health Quality, Patient Safety Framework | Leading for safety



## 4. Mackenzie Health Quality Aims

Mackenzie Health emphasized key elements in creating a culture of patient safety which starts by effectively deploying performance improvement aims. In January/February 2020, five organizational quality aims were selected in collaboration with Mackenzie Health stakeholders. The aims were selected based on high risk, high volume, high cost, problem prone and alignment with Mackenzie Health strategic roadmap. In addition, the quality aims are aligned with the STEEEP framework which lays out six aims for improvement: to provide care that is safe, timely, effective, efficient, equitable, and patient-centered care. With the following focus:

- Aim: What are we trying to accomplish? Set Aims that are measurable, time specific and apply to defined population
- Measurement: How we will know a change is an improvement? Establish measures to determine if specific

change leads to improvement

- Theory of improvement: What changes can we make that will result in an improvement? Select interventions that are most likely to result in improvement



## COLLABORATION AND INTEGRATION

MackenzieHelps is a new collaborative program that Mackenzie Health launched in November 2019 to help patients transition from hospital to home after their acute admission. The MackenzieHelps program is a partnership between the hospital, Saint Elizabeth Health and CHATS-Community & Home Assistance to Seniors. The integrated team consists of Patient Navigators, Community Care Leads, nurses, personal support workers, occupational therapists, physiotherapists, caregiver counselors, social workers and dieticians. The team works closely with patients and their families to ensure that the care plan at home will meet all the patient's needs and that they are well supported once home. 85% of patients surveyed responded that they are strongly satisfied with the Program. To date, our MackenzieHelps program has supported 56 patients to return home with enhanced care and

reduced Alternate Level of care (ALC) days in the hospital by 676 days. Mackenzie Health is part of Western York Region Ontario Health Team (OHT), which is currently in the full applicant OHT status. We recently completed a submission to the ministry to work towards being approved as an OHT.

## PATIENT/CLIENT/RESIDENT PARTNERING AND RELATIONS

To further align with one of Mackenzie Health's strategic priorities of "we value what matters to you", we have expanded our Patient Experience program and will be implementing our three-year Patient Experience Strategy beginning in 2020/21. The development of this strategy is in line with Mackenzie Health's philosophy of continuous process and quality improvement that specifically focuses on what matters to patients and families. As part of the organizational Quality Aims focusing on patient experience, we will be embarking on our journey to achieve more effective communication and information sharing with patients and families by enhancing the education and training of staff, physicians and leadership in partnering with patient/family. We will focus on increasing our patient partners engagement across the organization by co-designing a Patient and Family Engagement Framework with our Patient Partners Program.

## WORKPLACE VIOLENCE PREVENTION

Mackenzie Health will continue the mandatory indicator for Number of Workplace Violence for 2020/21. This is of critical importance to our organization as we continue to standardize actions relating to prevention of workplace violence.

Mackenzie Health is committed to the prevention of workplace violence across the continuum of care, including staff, patients, volunteers and visitors. A multidisciplinary

Workplace Violence Committee ensures a safe environment and takes every reasonable effort to identify all potential sources of violence with the focus on eliminating or mitigating risk. The annual review of risk assessments has been completed for this year. The intent of regular review is to identify new or elevated risks as a result of changes in facility design, workflow, and recommended actions to be taken to address these risks. Our current focus is mostly on the preventative measures. Managers/ supervisors are offered training sessions on how to complete an investigation and how to identify corrective/preventive actions for all incidents to minimize risk and triggers of violence in the workplace.

We continue to support development of a new and formal corporate training program addressing patient behaviours witnessed throughout the hospital. The initiative is led by the Education Manager and Professional Practice Lead portfolio. Additionally, we continue to offer expertise to support activities of the working group led by Professional Practice Lead and Risk finalizing Care Planning and Permanent Flagging (Violence Safety Rounds). Preliminary care plan was built in Electronic Medical Record, Epic. Criteria and means of permanently flagging patient charts continue to be discussed and investigated. Safety Talks is an ongoing tool available to our management as part of our efforts to promote safety at Mackenzie Health.

## VIRTUAL CARE

Mackenzie Health has partnered with the GetWell Network to implement MyCare. This system is an integrated bedside solution that will provide patients with convenient access and control to a wide range of hospital services, media, information, entertainment and educational contents tailored to their needs and conditions. MyCare also helps care providers to optimize workflows and enrich the patient-caregiver relationship. MyCare will help patients

and families take an active role in their health journey which will ultimately improve patient satisfaction and outcomes of care.

Recognizing the significance of measuring patient experience and improving these metrics, Mackenzie Health has piloted MyCare on one of our Inpatient Surgical units. The MyCare technology has solicited patient feedback and provided real time metrics on questions around the Hospital environment, team communication and key components to the health care team. To current date, the pilot as had an overall utilization rate of 52 % and continues to be a success. Patients and families have identified Care Team Communication, Staff Responsiveness and Room Cleanliness as unit strengths. All feedback is retrieved promptly by our leadership team and acted upon accordingly to achieve best possible patient satisfaction and outcomes.

## EXECUTIVE COMPENSATION

Mackenzie Health has a comprehensive executive performance-based plan. The plan has an allocated pay for performance percentage that exceeds the industry average and extends to the Director level and above.

The Mackenzie Health performance-based plan is linked to the achievement of strategic goals and objectives and includes patient centered service excellence and QIP targets. Total compensation, which is benchmarked to market rates of peer hospitals, equals base salary plus performance-based pay, also referred to "at risk" pay. The at risk pay component is:

- Up to 20% of base pay for the President and Chief Executive Officer (CEO)
- Up to 15% of base pay for Senior Management reporting directly to the CEO (Executive Vice President & COO, CNE, Executive Vice President & CAO, Vice President, Strategy and Redevelopment,

Vice President People Services and CHRO, Vice President, Financial and CFO and Chief Communications & Public Affairs)

- Up to 15% of base pay for the Chief of Staff (COS)

All management staff complete annual Accountability Agreement incorporating corporate targets, program targets and individual targets. The Accountability Agreement objectives further align with the Quality Improvement Plan.

## CONTACT INFORMATION

Maya Sinno

Director, Quality, Patient Safety & Patient Experience

905-883-1212 ext. 7581

[Maya.Sinno@MackenzieHealth.ca](mailto:Maya.Sinno@MackenzieHealth.ca)

## 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 30, 2020



Board Chair



Board Quality Committee Chair



Chief Executive Officer

Other leadership as appropriate