

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

April 11, 2023

OVERVIEW

Deep River and District Health, comprised of The Deep River and District Hospital, The North Renfrew Family Health Team and The Four Seasons Lodge is a multi-sector organization that provides primary, acute and long term care services on one integrated site. Deep River and District Health is located in Deep River, Ontario, roughly 200 kilometers north of Ottawa, and serves a catchment population from the towns of Deep River and Petawawa, the City of Pembroke and Townships of Laurentian Hills, Head, Clara and Maria, Laurentian Valley and Rapides des Joachims. The Hospital offers acute care services including an Emergency Department and 16-bed inpatient Medical Unit, supported by a multi-disciplinary care team including laboratory, medical imaging, pharmacy and physiotherapy services. The Four Seasons Lodge is a 14 bed Long Term Care Home onsite that provides long term residential care and support. The North Renfrew Family Health Team is also onsite and provides a range of multi-disciplinary primary care services including preventative health care, episodic care, dietician services, nursing services and counselling. Together, these facilities provide patients and Long Term Care residents with integrated, coordinated healthcare to support seamless movement from one care setting to another.

Throughout 2022/23, the health campus focused on continued COVID-19 pandemic response and recovery. The health campus leveraged existing relationships with external care partners, newly developed partnerships and leverage internal resources within the multi-sector campus to ensure that services remained open and all levels of care remained available to the local communities. The organization shifted focus from emergency COVID-19 response, including community testing and vaccination clinics and returned to pre-pandemic operational services, including in-person diabetes

clinics and OTN clinics. During a respiratory illness surge in late 2022 and early 2023 the organization stood up additional inpatient beds on the Medical unit and supported cross-training of the clinical care team to increase the flexibility of the workforce to rapidly adjust to meet the increase in patient demand.

Additionally, in 2022/23, the organization focused on building integration through information technology (IT) as well as renewal of physical infrastructure to improve patient and staff safety. This enabled a smooth implementation of integrated electronic medical records (EMR) in the Long Term Care sector with the launch of PointClickCare in June 2022, and in the acute care sector with the introduction of the Epic EMR as part of the Atlas Alliance in November 2022. Both EMRs advance IT use throughout the organization, build integration with external partners, as well as support enhanced integration and use of technology to advance practice, care and safety.

In 2023, the health campus entered into a strategic refresh planning phase which will identify the strategic direction that will guide quality improvement activities and direction of the organization through 2027.

The 2023/2024 Quality Improvement Plan (QIP) supports the ongoing integration of services across the sectors, as well as engagement in promoting quality of services overall. Items addressed in the QIP have been identified based on risk assessment, legislative compliance, patient and resident feedback, collaborative quality improvement initiatives with OHT partners and anticipated future needs of patient and residents of Deep River and District Health.

The enactment of the Fixing Long Term Care legislation in April 2022, the COVID-19 pandemic, and the post-pandemic stabilization period has highlighted benefits and strengths of a multi-sector

organization. The organization has continued to build and leverage its partnership with local and regional partners from all sectors to quickly adapt to the changing care needs of the patients, residents and communities we serve.

These learnings will serve the health campus into the future, with two capital development projects now underway for the construction of a new 11000 square foot Primary Care Building as well as construction of a new 96-bed long-term care home to help meet the growing need for primary care and long term care in our communities.

PATIENT/CLIENT/RESIDENT ENGAGEMENT AND PARTNERING

As the organization continues its recovery and stabilization from the COVID-19 pandemic, and as the organization entered a phase of strategic refresh, patients, residents and families have helped identify priority initiatives within the organization as members of the Patient and Family Advisory Council (PFAC), Resident and Family Council (RAFC) and Accessibility Council.

The PFAC group reviews their goals annually and in 2022/23 their focus was on providing input on French Language Services, the Long-term Care Development project, the 2023-2027 strategic refresh, the annual Quality Improvement Plan, the patient education and safety information related to EPIC's, MyChart, and to stabilize and grow a diverse membership through information sharing and engagement. In 2022 the PFAC provided input and helped identify priorities on the multi-year Patient Safety Plan. RFAC meets monthly with both residents and family members attending. This active group provides input on policy and procedure development and help to guide the activities in the home, including home renovations, recreation activities, dietary menus and social gatherings. The RFAC has provided critical input into the design development of the new LTC home, and continues to actively engage in activities to update the current home as well as identify priorities for the new home.

The Accessibility Council, made up of members of the organization and patient, resident and family representatives, launched a new multi-year Accessibility Plan for 2022-2025 in 2022/23 which highlights key activities for the organization to address to ensure that every member of the community is able to access the services within Deep River and District Health.

PROVIDER EXPERIENCE

In 2022/23 the organization developed a comprehensive medical workforce plan to ensure that all sectors within the organization are prepared for the planned growth and are ready to meet the future healthcare needs of our communities.

With the organization entering a period of significant growth and renewal with capital and business unit expansion, the importance of medical workforce planning to support successful recovery, stabilization, and growth of the organization is key to success. The Medical Workforce Plan for the years 2023-2027 has been renewed to align with the organization's strategic direction and objectives, as well as support the current and future growth in alignment with the strategic direction of the organization and its people.

Employees and physicians have been actively involved in the development of the new Long-term Care Home and Primary Care builds, providing valuable input at all levels of planning. As well, the primary care teams are working collaboratively towards aligning internal practices with other external physician practices.

In 2023/24 the organization will be surveying employees and physicians using the Worklife Pulse survey as part of the preparation for the Accreditation survey scheduled for November 2023.

WORKPLACE VIOLENCE PREVENTION

Through a robust quality and risk management processes the organization reports, tracks and reviews all incidents of workplace violence. Trends are tracked on monthly departmental dashboards and through quarterly quality and risk reports reviewed by JHSC, PFAC and Quality, Risk and Safety Committees. In response to an increase in workplace violence incidents related to resident responsive behaviours related to dementia, the organization provided full day Gentle Persuasive Approaches training to all long-term care staff. This successfully decreased incidents of workplace violence in Long Term Care by 43%. DRDH will continue to build on this success in 2023/24.

In 2022/23 all Emergency Preparedness policies were updated to ensure alignment with the Fixing Long Term Care Act, 2021. Education was provided to all staff on all emergency preparedness policies, with regular practice drills completed. Participation in mock codes has allowed staff to exercise their response to emergency situations and to reinforce education. 2022/23 will see further education provided to staff, as well as mock situations in conjunction with local partners such as the local Police and Fire Departments.

PATIENT SAFETY

DRDH has made significant investments in improving patient safety with the implementation of new Electronic Health Records in both Long-term Care and the Hospital. These new electronic platforms include electronic physician order entry which includes imbedded electronic clinical decision support systems and closed loop medication administration, including electronic Medication Administration Records.

The organization's Long-term Care Home was the first Home in Ontario to pilot an electronic physician order entry program as part of the PointClickCare EMR and are eager to share learnings with the Long Term Care sector across the province. Additionally in Long Term Care, the organization successfully launched a revised Fall Prevention program in which focuses on multi-disciplinary approaches to fall reduction and risk mitigation which as has led to a 41% reduction in resident falls over the year.

The organizations acute care sector joined the Atlas Alliance, a group of 9 healthcare organization that share one integrated EMR system, Epic in November 2022. This has ensured a seamless information transfer for the patients seen at any of the organization across the Alliance, increasing patient safety and satisfaction. The organization is eager to track improvements in patient outcomes and particularly reduction in medication errors with the newly implemented technologies as work to optimize the systems occurs over 2023/24.

HEALTH EQUITY

The Accessibility Council met regularly throughout 2022/23 to help address the needs of those seeking care at the organization with both visible and non-visible accessibility needs. This committee developed an ambitious three year plan targeting technology, information and communications, education and training, physical plant and architectural elements, and policies. This committee has already seen successes in improving accessible parking space in front of the building, and removing Plexiglas barriers to communication and the addition of designated waiting room space for patients using wheelchairs in the Family Health Team. With input from the PFAC and Accessibility Council, the organization is focussed on improving access and services for francophone community members in 2023/24.

Additionally, representatives from the organization completed Indigenous Cultural Safety training in 2022/23 through the Indigenous Primary Health Care Council to address the negative impacts on the health and wellness of indigenous communities that seek care at the organization, by supporting equitable care for Indigenous peoples.

EXECUTIVE COMPENSATION

Performance based compensation is linked to achievement of strategic priorities. The CEO, CNE/VP Clinical Services, CFO/VP Support Services and the Chief of Staff compensation frameworks are in keeping with the Broader Public Sector Executive Compensation Act. As such, each role includes performance based pay (pay at risk). The Board of Directors approves strategic priorities on a yearly basis along with performance targets for activities that support advancement of quality.

In 2023/2024, executive compensation is linked on the Quality Improvement Plan to achievement of actions to advance the strategic priorities of Seniors and Sustainability. Identified on the Quality Improvement Plan under LTC Resident survey, Patient satisfaction survey for both hospital and primary care, and Hospital discharge information, these strategic action items improve the safety and quality of care and services provided to patients and residents throughout the organization.

CONTACT INFORMATION

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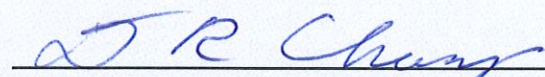
SIGN-OFF

It is recommended that the following individuals review and sign-off on your organization's Quality Improvement Plan (where applicable):

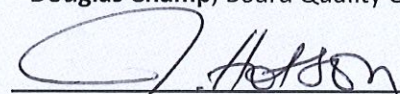
I have reviewed and approved our organization's Quality Improvement Plan on
March 31, 2023



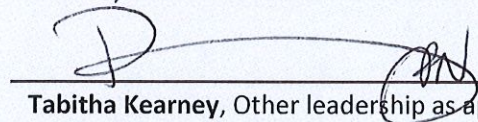
David Cox, Board Chair



Douglas Champ, Board Quality Committee Chair



Janna Hotson, Chief Executive Officer



Tabitha Kearney, Other leadership as appropriate