

Let's Make Healthy
Change Happen.



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



3/31/2016

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.

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Overview

The Atikokan General Hospital is dedicated to excellence in compassionate and supportive health care for those we serve. Delivering quality patient care is everyone's focus. Every function has a goal to demonstrate Continuous Quality Improvement (CQI).

QI Achievements From the Past Year

Medication reconciliation at discharge was our organization's greatest QI achievement from the past year. AGH was able to exceed its target of 66% by achieving an actual rate of 97%. Our initial audit results indicated patient safety would be improved if we improved the discharge planning process. The routine use of the BATON (Better Admissions and Transitions in Ontario's Northwest) tool was implemented. This tool has proven to be very effective. The task of implementation was done by senior nursing staff with the cooperation of all nursing staff as well as the physicians. Discharge planning continues to be a high priority in our organization not only does it impact patient safety, it leads to an improved patient experience as a whole.

Integration & Continuity of Care

In the Northwest LHIN we are further sub-grouped into 5 districts. The Atikokan General Hospital along with the Riverside Healthcare (Fort Frances) organization is part of the Rainy River Integrated District Network. As such we meet regularly to look for opportunities to integrate at the governance and administration levels so that patient care can improve. As well, in our LHIN we are in discussions to seek opportunities to integrate/consolidate at a regional level for functions like governance and administration for the betterment of patient care. Continuity of care is important and challenging in a small hospital. We have many transfers and repatriations 200 km east to Thunder Bay. As well, we have many locums. Thirdly we have the importance of continuity of care at discharge. These three aspects of continuity are part of our mindset as we look for CQI in patient care.

Engagement of Leadership, Clinicians and Staff

Through the Medical Advisory Committee, P & T committee, Quality Committee of the Board and other regular administrative meetings, we work together to improve patient safety and health outcomes. As well, we have initiated a formal engagement of all our staff in a cultural inventory process.

Patient/Resident/Client Engagement

Patient experience informs our Quality Improvement Plans. Currently this information mainly comes from four customized feedback questionnaires so that we can measure engagement. Our organization is currently recruiting members of the community to become involved as patient advocates. Informally, we receive feedback from many residents, patients and their families. A Resident Council as well as a Family Council has been established for long term care residents.

Performance Based Compensation [part of Accountability Mgmt]

Executive Compensation is linked to performance as follows:

Chief Executive Officer	2%	Improve Patient Satisfaction
Chief Nursing Officer	1%	Increase proportion of patients receiving medication reconciliation upon discharge
Chief of Staff	1%	Reduce wait times in ED
Chief Financial Officer	1%	Improve organizational financial health

The Board may use discretion in reviewing the cause of under achieved targets, the impact on compensation and allow partial compensation for achieving partial targets.

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

Board Chair: Ed Enge



Quality Committee Chair: Ed Enge



Chief Executive Officer: Doug Moynihan

