

Let's Make Healthy
Change Happen.



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



2/22/2024

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

Ensuring quality and accountability in everything we do is a strategic direction of The Hospital for Sick Children (SickKids). As one of Canada's Top 100 Employers (2024) and the number two children's hospital in the world (*Newsweek*, 2024), we constantly strive to partner with patients and families in decision-making for care, research, and education; exemplify compassionate communication and care; optimize efficiency and use of resources; and eliminate preventable harm.

Caring Safely is our patient and staff safety program that began in 2015 with the underlying goal to eliminate preventable harm. The success of Caring Safely goes beyond adopting techniques and processes, it's about creating culture of safety through consolidating, reinforcing and advancing our safety practices. Caring Safely applies to everyone because it aims to eliminate preventable harm to patients and staff alike, and we're deeply proud that our safety metrics are all heading in the right direction. Here's a summary of recent trends:

- Serious safety events (SSEs): We are seeing incremental improvement but still working to achieve our goal of 0.2 events per 10,000 adjusted patient days, which corresponds to about three events or fewer per year.
- Hospital-acquired conditions (HACs): We are currently surpassing our goal to reduce the rate by 20 per cent to 0.93/1,000 patient days from 1.15/1,000 patient days.
- Staff safety: SickKids continues to perform consistently better than our peer hospitals in the Solutions for Patient Safety (SPS) network with respect to employee safety. We are surpassing our goal to reduce the rate of DART injuries (days away, restricted or transferred) by 10 per cent.



SickKids is pleased with these results, especially in the context of ongoing human resource challenges in health care, surges in patient volumes and high patient acuity, and ongoing post-pandemic recovery challenges. At the same time, we are constantly focused on new opportunities as part of our culture of continuous improvement.

Access and Flow

SickKids continues to work through a significant surgical and endoscopy backlog, with nearly 6,500 paediatric patients currently on the SickKids surgical waitlist. To help overcome this challenge, SickKids is partnering with other GTA hospitals to build capacity and deliver high-quality care to more children and families.

SickKids has been working with North York General Hospital, Scarborough Health Network, Michael Garron Hospital, Trillium Health Partners and St. Joseph's Hospital/Unity Health to refer cases that can safely be done at partner sites with family consent and approval. By taking a system-wide approach, we are starting to see reduced wait-times for some surgeries and endoscopies, ensuring that children receive rapid access to care in the most appropriate setting. For instance, urology cases make up a significant 35 per cent of the SickKids surgical waitlist, and through new collaborations with other centres we are targeting a 10 per cent reduction in surgical wait-times for urology services.

Another area helping access and flow is virtual care, which transcends geography by providing SickKids high-quality care at a distance. The program began in the early days of the pandemic across our ambulatory operations and other services, and subsequently expanded with the launch of the Virtual Urgent Care (VUC) program to better meet the needs of children, youth, and their families. The program enables access to real-time guidance for urgent health concerns from any mobile device, tablet, or personal computer connected to the internet or cellular service. That means fewer trips to the SickKids Emergency

Department and less crowding and waiting in that space. Since the launch of VUC in April 2021, more than 10,000 patients have been seen virtually by a member of the SickKids Emergency Department clinical team (as of January 2024).

Equity and Indigenous Health

A new approach to patient safety is being championed that is grounded in exploring, learning, and acting to create safer care and reduce all forms of harm, including those caused by culturally unsafe care. When Ontario Health mandated Toronto-based hospitals to implement a revised Patient Health Equity Survey, SickKids relaunched its longstanding Health Equity Data Collection initiative under the name, “Health Equity: Your Health Matters.” The revised survey launched in the Emergency Department in October 2023.

By collecting information from patients and families related to ethnicity, gender, income and more, SickKids can better understand their unique needs and create programs and services to improve health-care quality at SickKids. This work is an essential part of understanding the whole child, from the genetic code to the postal code. This program now allows the responses to integrate into the Epic electronic health record system and be viewable in the patient’s chart throughout their journey at SickKids.

Staff training is an important part of our work related to equity, diversity and inclusion (EDI), which led to SickKids launching multiple staff-wide courses: EDI Foundations, EDI Foundations in Health Equity, EDI Foundations in Gender Diversity, and EDI Foundations in Anti-Black Racism. The San’yas Indigenous Cultural Safety Training Program, which has been designed to help participants strengthen their knowledge, awareness, and skills for working with and providing service to Indigenous people and communities, continues to be offered via an online and self-paced 10-week training program.

SickKids hired an Indigenous Health Navigator & Patient Experience Specialist in the Office of Patient and Family Experience. The role provides direct support to Indigenous patients and families, reviews and addresses concerns about their experience or care at SickKids, facilitates Indigenous ceremonies and connection with Elders and Knowledge Keepers, and works with staff to foster a culturally safe environment. SickKids also honours such days of significance as Bear Witness Day, National Indigenous People’s Day, National Day for Truth and Reconciliation annually and, for the first time in January 2024, National Ribbon Skirt Day. In the coming year, SickKids will open an Indigenous Healing and Gathering Space to serve indigenous patients and families, including space for ceremony, a workstation and a kitchenette.



**HEALTH EQUITY
YOUR HEALTH MATTERS**

We ask questions to understand the unique you so we can:

- Improve the quality of health care
- Create programs and services to meet your needs
- Reduce health equity gaps

Scan the code to learn more.
If you have questions, please contact health.equity@sickkids.ca



Patient/client/resident experience

With more than 15,000 inpatient admissions and more than 290,000 clinic and emergency visits in 2022-23, we want to know about the patient and family experience at SickKids. In addition to ongoing work through our Family Advisory Network and related Family-Centered Care Advisory Council and Children’s Council, we put some key foundational elements in place this year to help improve the patient and family experience going forward.

SickKids is adopting a new digital surveying approach, allowing us to invite more patients and families to share their experiences with us and send results from the survey to different areas of the hospital sooner. We are targeting a response rate of 21 per cent for the surveys on our inpatient units and plan to use the survey data to give direction for improvement priorities. With more comprehensive and timely data, this platform will enable more timely changes where patients and families will feel it most – the front lines of care.

SickKids also began work to enhance the patient and family experience through the creation of an enterprise-wide Patient and Family Experience Strategy. We began the process by surveying our staff, patients and families, and the broader community serving SickKids, and we are using this feedback to inform the creation of the strategy as we evolve our longstanding child and family-centred care model.

Feedback is also welcome and acted upon through the SickKids Office of Patient and Family Experience. The office provides a safe space where anyone can provide feedback – including sharing concerns, comments, suggestions, or compliments – about the care experience at SickKids.

Provider experience

At SickKids, we can't take care of the community we serve without also taking care of the physical and mental health of our staff, and we are deeply proud to have been recognized as one of Canada's Top 100 Employers for the ninth year in a row. Despite the well-documented health-care human resource challenges of the past few years, SickKids stood out for its work environment and health and family-friendly benefits, including subsidized access to an onsite wellness centre/fitness, e-recognition platform and defined-benefit pension plan.

As part of our Staff Health and Well-being Strategy, SickKids always aims to create a safe and inclusive work environment. Caregiver escalation and violence in health care has been on the rise worldwide, particularly during the pandemic, and SickKids has not been spared. A steering committee focused on this issue was created and discussion and work is ongoing related to a family caregiver escalation policy; response to physical assaults; education and training; facility access and control; and family caregiver wellness. For instance, a new online course was recently launched to help prevent escalation by creating safer spaces and educating staff about how to defuse encounters if an escalation of distress is unable to be prevented.

With each passing year, recruitment and retention has increasingly become more of a challenge at SickKids and the broader sector, not only across the province but nationally and around the world. To address this challenge, SickKids created a strategy specific to nursing, an area in particular need of increased retention and recruitment. The strategy positioned SickKids as the best place to be a paediatric nurse. We shone the spotlight on unique nursing roles through dynamic storytelling, including a video series titled *Our Kind of Nursing*. To reach audiences both within and outside of the hospital walls, we used SickKids' internal and external platforms to celebrate nursing with the call-to-action of joining our team.



We welcome and recognize that a diversity of perspectives, lived experiences, identities and cultural backgrounds enriches our workplace and creates inclusion and belonging. Our Human Resources and Equity, Diversity and Inclusion departments collaborated to develop an inclusive recruitment pathway, which encourages applications from members of equity-priority groups, including Indigenous persons, Black and racialized persons, persons with disability, and persons who identify as women and/or 2SLGBTQIA+. To help achieve a workforce that reflects the diversity of our community and to better understand representation of equity-priority groups in our talent pool, SickKids launched a voluntary Self-Identification Survey.

Leadership starts at the top and SickKids' executive team consistently engages in rounding to meet with staff face-to-face to hear about the challenges and opportunities they face first-hand. SickKids' president and chief executive himself is engaging in a series of rounding that has taken him to nearly 100 areas of SickKids (and counting) to hear directly from clinical and non-clinical staff alike.

Safety

SickKids has always been a leader in advancing safe and high-quality care for children, as well as providing a safe working environment for staff. There have been steady improvements in safety at SickKids as a result of various structures and processes that have been put in place through our Caring Safely program, which aims to eliminate preventable harm.

SickKids' model of child and family-centred care illustrates our commitment to respect, communication, and partnership at all levels of care to achieve our vision of *Healthier Children. A Better World*. We know that children in the hospital are safer when their parents are involved and informed in their care. We want to engage patients and families in discussions around patient safety by listening to their questions, concerns and feedback so we have the opportunity to learn and improve. As health-care providers and hospital staff, we have a responsibility to create and maintain an open line of communication with families, and to explain how they can report any safety concerns they may have during a child's care. Ensuring families are comfortable sharing their questions, comments and concerns creates the opportunity for a collaborative approach to finding solutions and

overcoming challenges.

In rare cases when preventable harm to a patient occurs, we follow our Disclosure of Harm Related to Patient Safety Events policy. All serious safety events (SSE) and all patient safety events (PSE) that caused harm to a patient must be disclosed. Disclosure of an event is generally undertaken by the primary health practitioner for the patient, who is typically the most responsible physician (MRP). For SSEs, the MRP, together with a chief or vice-president, will together perform the disclosure to the patient or person responsible for making treatment decisions. SickKids is committed to informing patients and their parents promptly, out of respect for their right to be informed about their care, and in the interests of maintaining relationships of trust.

SickKids uses root cause analysis, a standardized approach to the retrospective analysis of safety events, to focus on systems not individuals. It is intended to determine what happened, including what usually happens and what should have happened, why it happened and what we can do to reduce the likelihood that it will happen again. Any members of the care team (including physicians, nurses, allied health professionals, trainees, students and family caregivers) may be asked to participate in an event review in order to provide insight into the event or to provide insight and expertise related to usual patient care and processes in their area. We also analyze what we learn from individual events through a formal process called Common Cause Analysis. This process helps us to understand where extra focus is required to address factors and conditions that have been recognized in more than one safety event to prevent future recurrence.

We understand that anyone involved in a safety event may feel anxious and stressed. The process is about pinpointing root causes, not pinning blame. Staff are encouraged to reach out for support by speaking to a manager or colleague they trust, a member of the Peer Support a Trauma Response Program, contacting the Employee Assistance Program, or visiting the Occupational Health Clinic for a referral. We care deeply for the well-being of our people and are fully committed to ensuring that staff involved in these events are well supported.

Staff are also engaged in discussions around safety when lessons learned from an event are shared with colleagues. This sharing allows others within the organization to learn from past situations. In addition to lessons learned through serious safety events, stories are also shared about near-miss events. These events are just as important as events resulting in harm, as they often identify something in a system that could be improved. These stories highlight how staff who employ the key safety behaviours have caught errors before harm reaches the patient.

Patients and families are kept informed and updated through the process and findings are always shared with them. We also provide families with an opportunity participate in developing and to hear recommendations resulting from our root cause analysis to understand how we intend to prevent the same harm being repeated to other families and make SickKids safer overall. On occasion, families will partner with SickKids by taking part in storytelling in a collaborative effort to improve safety. We are always looking at new and innovative ways to further engage families with our safety stories to help them understand our commitment to quality and safety and the importance of working together to prevent patient harm.

Caring Safely
means that everyone:

-  **Makes a personal commitment to safety**
-  **Supports a questioning attitude**
-  **Is accountable for clear and complete communication**

Thank you for working together to eliminate preventable harm

SickKids 

Population Health Approach

Ensuring access to specialized paediatric care for all children, in the present and future, requires a new way of thinking: one system of care. That means calling upon our collaboration with community hospitals and system partners, which significantly strengthened throughout the pandemic, to treat paediatric capacity as a single system resource.

Working together as one system, we are preserving specialized paediatric tertiary care capacity and priority provincial and national programs at SickKids (e.g., transplant, oncology, bone marrow transplant) while ensuring that children have access to the care they need in the right time, at the right place. In collaboration with system partners, we have strengthened relationships and built strong transfer pathways to enable timely access to tertiary care at SickKids, regardless of where patients present for care. Alternative pathways have been developed to facilitate transitions closer to home for patients no longer requiring tertiary-level care. Further, to maintain capacity in the Emergency Department, we are partnering with community hospitals to enhance local options for emergency care in addition to alternate pathways, including SickKids Virtual Urgent Care.

This system-based approach to paediatric capacity management is not only possible but successful already. Transfers from the SickKids ED to another facility increased 78 per cent in 2022-23 from the previous year, with an average of 67 transfers over the last 12 months. Paediatric Medicine inpatient transfers from SickKids to another facility increased 104 per cent in the same period, with a peak of 83 patient transfers at the height of the surge.

SickKids' Connected Care program has reached new heights in terms of patient populations and geographies. Leveraging expertise from our organization and health partners across the paediatric sector, we are building capacity and promoting seamless transitions from hospital to home and community care for more patients than ever. For instance, patients and their caregivers requiring new medical technologies are a population needing resources and support to enable a sustained transition to home care. We partner to support these families and providers with education, care, coordination and virtual consultation, and measurement data shows these efforts are successful. The most recent data from 2023 shows 98 per cent of patients and families believe that they were provided adequate information about their new medical technology before discharge, well above the target of 75 per cent.

Connected Care is also playing a role to help address the surging volumes of paediatric patients requiring acute care admissions through facilitating transfers to local community hospitals. For this population, we have expanded services that have been accessed by every region of the province to focus on building capacity for clinical teams in those sites in the following ways: webinars from SickKids experts; rapid delivery of teaching mannequins and education supplies for hands-on virtual education; clinical leadership placements; and access to a library of self-directed education and practice resources.

Executive Compensation

Performance based compensation accounts for an additional 25% of the President and Chief Executive Officer's (CEO) annual base salary, 19% for the Executive Vice President (EVP) and 15% for Vice Presidents (VP)/Chiefs. 40% of the performance-based compensation is directly linked to achieving 100% of the QIP target in addition to financial and other operating targets of the institution. If the organization achieves 100% of the QIP targets set out above, in addition to achieving the financial and operational targets, the percentages listed below are multiplied by each executive's base salary to determine the value of the performance-based compensation tied to the achievement of the QIP.

The following executive roles participate in the Executive Performance Incentive Program. Incentives are awarded based on the degree of achievement of the above performance targets:

- President and CEO 10%
- Executive Vice President 7.6%
- VP, Finance and CFO 6%
- VP and CIO 6%
- VP, Human Resources 6%
- Chief Medical Officer, and VP, Medical and Academic Affairs 6%
- VP, Clinical 6%
- VP, Clinical and Chief, Professional Practice and Nursing 6%
- VP and Chief Legal and Risk Officer 6%
- VP, Transformation 6%

Contact Information/Designated Lead

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Other

Sign-off

I have reviewed and approved our organization's Quality Improvement Plan



Kathleen Taylor, Board Chair



Clara Angotti, Board Quality Committee Chair



Dr. Ronald Cohn, President, and Chief Executive Officer