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.
Overview
As the largest healthcare organization in the Waterloo Wellington region, Grand River Hospital, its Board of Directors, staff, physicians, and volunteers strive to be leaders within the healthcare community of the region, by providing excellent care to patients every time. GRH is guided by our mission to provide exceptional care through inspired people, innovative initiatives, and strong partnerships in the community we serve.

This year we are focusing our work by bringing together various plans into a single Integrated Plan. The Quality Improvement Plan (QIP) is one component of this integrated plan. In developing the QIP, we obtained input from our patients and families along with leadership, physicians and staff. The plan has been developed to ensure that our quality improvement work is focused on key priorities to improve access to care for our patients as well as providing safe care.

In addition to the areas of focus summarized in our QIP, GRH is also on a journey to replace our hospital information system with a planned go-live date of September, 2019. The replacement of our hospital information systems has been branded as ‘PRISM’. Just like a prism takes a single beam of light and transforms it into a spectrum of color, this change is bigger than new computers and wiring, as it will change the way we communicate and work together to improve and support patient care.

Grand River Hospital is on a transformative journey to improve communication and access to critical information, and standardization of care and processes, assisting clinicians in the decision making process. All solutions will integrate as necessary, supporting operations to increase quality and ensure safer patient care.

Describe your organization’s greatest QI achievement from the past year
Among the numerous quality improvement accomplishments achieved at Grand River Hospital this year, two that are improving patients access to care stand out.

In November 2018, the surgical program successfully discharged their first same day hip replacement surgery patient, marking innovation to improve a patient’s recovery and quality of life while more effectively using hospital resources. To accomplish this, an algorithm was developed to identify appropriate patients. Changes were made to the pre surgical clinic process, scheduling processes, OR processes, and discharge processes. In addition, an updated care pathway and patient education materials were developed. The team responsible for planning this change included a surgeon, anesthesiologist, nurses, director, manager, educator, quality improvement consultant and patient representative. A patient who goes home on the same day as surgery receives a follow-up telephone call later that day from their surgeon or nurse to ensure they are doing well and to address any questions or concerns they may have. Community partners also play an important role in discharge and recovery.

Partnering with patients is noted to be a key component of the success of this initiative. The first same day patient joined the planning team and helped us in re-designing the processes and education materials from a patient perspective. As of February 2019, we have completed six same day cases and an additional six are scheduled. It is estimated that about 40-60 hip replacement patients will be offered same-day discharge over the next year. As we move forward with same day discharge for hip surgery patients, we are planning to expand the service to include knee replacement patients. “Patients who are able to go home the same day after surgery are able to recover better from the comfort of their home with the support of their loved ones,” says Robinne Hauck, program director for the surgical program at GRH. “This also allows us to use our resources more effectively and helps prevent surgery cancellations due to bed shortages when demand for emergency surgery climbs.”
In October 2018, GRH has started a new Pain Management Centre at the Freeport Campus which will provide innovative treatments for patients with chronic pain. This may help to address the opioid crisis in our community. The focus of our Pain Management Centre is to help patients decrease their level of pain and suffering so they may return to their maximum level of functioning and independence, helping to restore their quality of life.

**Patient/client/resident partnering and relations**

Grand River Hospital has established Patient and Family Advisory Councils (PFAC's) in the cancer, renal, and mental health & addictions programs. Our medicine and surgical programs also have patient advisors as members of their Quality and Patient Safety program councils. These councils enable a stronger voice from patients and families. Council members have also been active participants in key quality improvement initiatives within the organization, providing an opportunity to leverage their unique perspective. These councils were engaged in the development of this year's QIP through targeted focus groups to understand what was most important to them. Their feedback was incorporated into the development of our priorities surrounding access to care.

Our PFAC's have had numerous achievements over the year. Some key highlights from each of our groups are summarized: (1) The Renal PFAC developed Welcome Kits for patients new to dialysis and were involved in the co-design of the renal channel content on our hospital television system; (2) the Mental Health PFAC co-designed an updated Least Restraint Policy as well as the Families for Awareness Change and Education (FACE) webpage; and (3) the Cancer program PFAC operationalized the PFAC strategic plan and engaged multiple indigenous partners in Waterloo Wellington to build relationships and obtain feedback on the Regional Aboriginal Cancer Plan.

Our focus in 2019/2020 will be to build on the success of our current PFACs and the development of a refreshed patient and family engagement strategy for the organization as a whole.

**Workplace Violence Prevention**

At Grand River Hospital, our “Respectful Workplace Program” supports the organization in maintaining a healthy, safe, positive and respectful work environment that is free from actual, attempted, or threatened violence and harassment. The GRH 2017-2019 Strategic Plan includes a strategy to “promote a healthy workforce that is respectful, resilient and strong by optimizing human resources services infrastructure to support staff, physicians and volunteers.” In addition, the 2018-19 Operating Plan also included priorities to continue our focus on cultivating a healthy, inclusive and inspired environment, through the enhancement of workplace wellness and safety.

Highlights of achievements in supporting a respectful workplace include:
- Establishment of a new Violence Prevention Committee in the fall of 2018
- Launched an updated on-line Respectful Workplace course that is mandatory for all existing and new staff (completion rates are monitored quarterly and followed up on as needed)
- Continued a comprehensive training program that covers code white response, verbal de-escalation and physical protection skills (initial course completion and refresher compliance is monitored)
- Provided quarterly reports to the Senior Leadership Team that include violence indicators such as violence injury statistics, code white incidents, Respectful Workplace Program referrals.
Executive Compensation
Up to 50% of at risk executive compensation will be based on QIP results in alignment with the respective areas of accountability of our executive team members.

Contact Information
For further information please contact info@grhosp.on.ca

Other
No additional comments

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 ____________ (signature)

Board Quality Committee Chair ____________ (signature)

Chief Executive Officer ____________ (signature)

Other leadership as appropriate ____________ (signature)