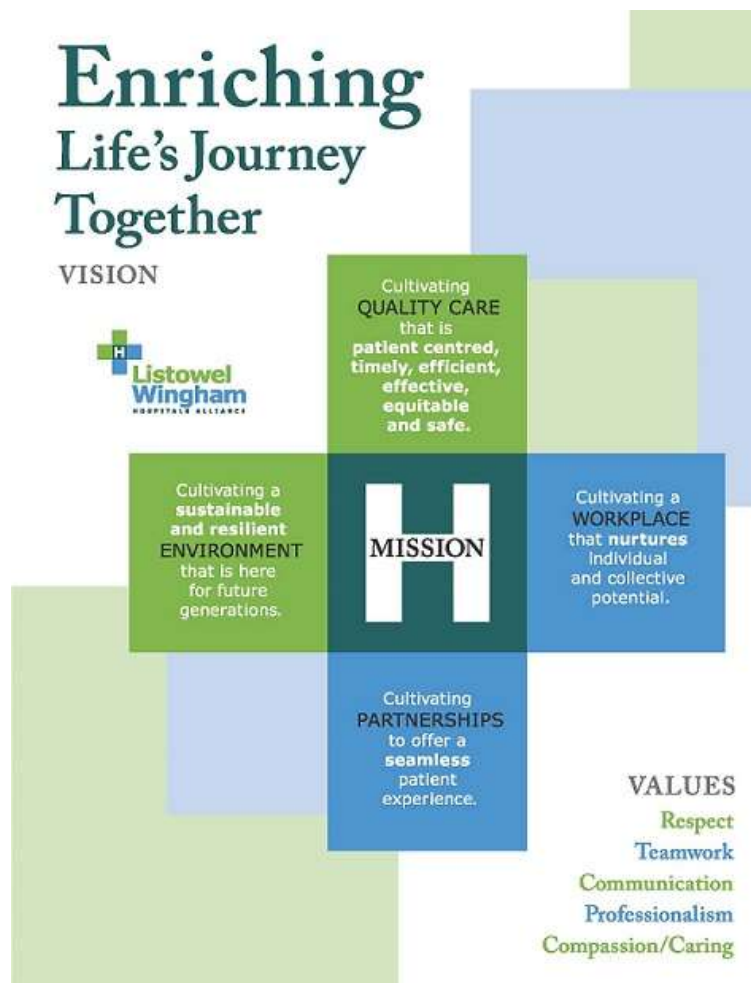


Let's Make Healthy  
Change Happen.



## Listowel Wingham Hospitals Alliance: 2019-20 Quality Improvement Plan



## Overview

The Listowel Wingham Hospitals Alliance (LWHA) was formed on July 1, 2003 as a partnership between the Listowel Memorial Hospital and the Wingham and District Hospital. As an Alliance, we share a common management structure with a single leadership team and shared Vision, Mission, and Values. Although we remain as two separate corporations, there is a one Board of Directors. We look for opportunities to share services and programs across our two communities, and find innovative ways to work with our community partners in order to deliver high quality care to our patients and their families.

In the spring of 2016, LWHA released an updated strategic plan that articulates an organizational mission. It includes cultivating a sustainable and resilient environment that is here for future generations, cultivating quality care that is patient centered, timely, efficient, effective, equitable and safe, cultivating a workplace that nurtures individual and collective potential, as well as cultivating partnerships to offer a seamless patient experience. These mission statements embody the quadruple aim of healthcare and are supported by our organizational values of respect, teamwork, communication, professionalism and compassion/caring.

The 2019-20 Quality Improvement Plan (QIP) is a documented plan to facilitate achievement of the vision of LWHA and aligns with our strategic priorities. The indicators, targets and action plan were discussed and developed by LWHA leadership, staff, physicians, board members and patients/families.

## Quality Improvement Achievements over the Past Year

Listowel Wingham Hospitals Alliance (LWHA) demonstrated commitment to continuous quality improvement, patient safety, and staff and patient engagement over the past fiscal year. Keeping in mind the quadruple aim (enhancing patient experience, improving population health, maintaining or reducing costs, and optimizing provider experience), the organization focused on key quality principles to drive improvement change.

There was an organizational focus on improving Joy in the workplace. LWHA used the Institute for Healthcare Improvement Framework for Improving Joy in Work (Perlo et al, 2017) to develop and implement change ideas to increase our organization's Joy in Work in the 2018-19 fiscal year. To measure Joy in Work, an internal survey tool was created and circulated monthly. Baseline results indicated staff Joy in Work at 65% an improvement target of 75% was outlined.

Literature correlates a healthy and engaged workforce with improved patient experiences, delivery of high quality safe care, higher productivity, reduced turnover, and less workplace incidents. Internal messaging and educational events supported that improving Joy in Work was everyone's job. Joy in Work was described as more than a feeling but greater than the absence of burnout. Leaders were supported to engage staff in conversations to identify and address barriers to Joy in Work.

Specific improvement ideas supporting improved Joy in Work were around discussions on what matters, increased and standardized communication between leaders and direct reports, a focus on wellness and recognition, and allowing for choice and autonomy while focusing on daily improvement.

What matters conversations occurred throughout the hospital in order to determine the impediments to Joy, or pebbles in the shoes of our staff. These conversations were important to help drive change ideas in the initiative this fiscal year, and are intended to be ongoing standard work.

Status exchange is a standardized communication tool used by leaders and staff. The tool consists of questions, aligned with the quadruple aim, to increase awareness and address issues in a timely manner (ie. broken equipment, safety concerns, staffing problems, waste). Status exchange improves leader involvement in operational issues, promotes teamwork, and improves communication.

Employee health initiatives were designed to support wellness and promote psychological safety. Change ideas included offering in-house yoga, flu shot clinics, a focus on the services offered by the employee assistance program, supporting ongoing education, as well as the purchase of massage chairs.

Lastly, quality huddle boards began on 2 units and a scale and spread schedule was developed. The quality huddle boards contain information such as safety discussions, recognition opportunities, a chance to review what is new in the departments, an opportunity to acknowledge a need or change in a process for improvement, a focus on which initiatives/measures the department is currently working on to provide clarity and consistency within the unit, as well as program aims and monitoring measures, such as falls and patient experience. The huddle boards have increased communication, promoted staff engagement and teamwork, increased leader presence and participation in the units, allowed for choice in work improvements, as well as provided a clear visual aid to track improvement progress. Huddle boards are designed to help address the pebbles in shoes of staff and leaders, and address standard work and behaviours that are leading to burnout and dissatisfaction.

While there were many ideas implemented in this fiscal year, further improvements are planned for the 2019-20 fiscal year as our organization continues with our Joy in Work initiative.

### **Patient/Client/Resident Partnering and Relations**

LWHA values the input provided from our patients and families utilizing hospital services. Methods of patient and family engagement include in-house patient experience surveys in both paper and electronic formats, patient rounding, focus groups, committee participation and engaging patients through face-to-face interactions, phone, and email on change processes within the organization. Feedback opportunities through concerns raised by patients and families allows LWHA to identify issues and understand future improvement opportunities.

LWHA believes that patient feedback is a fundamental opportunity for change and improvement throughout our organization. LWHA views patients as partners and promotes all staff to engage patients in everyday activities, as well as in planning and solution generation. Patient engagement education is incorporated into orientation. Patient feedback is also discussed at each Quality Team, with patient partners sitting on several teams.

Partnerships between patients, families and health care providers are mutually beneficial and rewarding. Patient stories are shared through re-telling, in-person account, and videos at a variety of committees, meetings, and forums to bring the patient perspective to our decision making. Partnering with patients and their loved ones supports a common understanding of their experiences, preferences, and needs, and how to respond to them.

At LWHA, we believe that by incorporating patient and family involvement and feedback in decision making, quality initiatives, organizational design, and policymaking we will co-design services that are tailored to our patient populations; thus leading to best possible outcomes. Patient engagement is known to contribute to improvements in quality and patient safety. We want to build the knowledge, skills, and confidence of our patients to drive practices that will change our systems for the better, and

enrich life's journey together. Our patient engagement framework best captures how we will support this capacity-building plan with our patients and staff (see Appendix A, adapted from Health Quality Ontario, 2017).

Participation in the 2019-20 QIP planning process allowed our patient partners to identify meaningful quality improvement opportunities for the organization to focus on. Patient input was sought in person, through social media, and captured on Strategic Planning surveys. This feedback was particularly helpful in the Joy in Work indicator, as the public identified communication and attitude of our staff as an area of improvement.

Community partners, such as Mental Health Matters Wingham, mentallyfit, and our North Perth/North Huron Family Health teams (including social work) were consulted for input, and this feedback was used to detail our Mental Health initiative and associated measures.

### **Workplace Violence Prevention**

LWHA's strategic direction includes strengthening our organizational effectiveness by recognizing the value of our people in providing a positive, safe and caring workplace. Workplace violence prevention facilitates this, in conjunction with the Joint Health and Safety Committee, to provide an environment where violence and harassment are prohibited.

Consistent with enhanced legislation, LWHA has undertaken a complete review of the LWHA Workplace Violence and Harassment policy, effective September 1, 2016 and have provided education for all staff. This includes enhanced screening for the risk of patient violence as well as communication processes among the healthcare team.

Employees report violent incidents into the electronic incident reporting system, RL6. An aggregate report of incidents by site is shared with the Joint Health and Safety Committee (JHSC). If there are trends of occurrences, these are discussed at JHSC and/or Leadership and efforts are put in place to reduce incidents. For example, we may need to increase staffing and observation if there is a specific patient risk.

Over the past two years, the organization has provided all staff with Non-Violent Crisis Education training. This training is a full-day mandatory course for our staff and all new hires. Re-certification is required every two years and staff participate in a 4-hour refresher course. LWHA also began practicing skills through mock Code White training simulations.

With the addition of Workplace Violence as a mandatory Quality Improvement Plan indicator for 2019-20, LWHA has outlined several change ideas to implement in order to drive a decrease in violence incident reporting.

## **Executive Compensation**

The Broader Public Sector Accountability Act requires that a designated employer shall ensure that its performance pay envelope for any performance cycle that falls in whole or in part within the restraint period does not exceed its performance pay envelope for the last performance cycle ending before the employer's effective date, in respect of which the employer paid performance pay. (Sec 7.9(1)). The Listowel Wingham Hospitals Alliance did not have any performance pay during the performance cycle ending before the "effective day" of March 31, 2012 (2010-2011 performance pay cycle). Therefore as stipulated by the Broader Public Sector Accountability Act (BPSAA), executives within our organizations do not have any pay-for-performance tied to the achievement of targets in our 2019-20 QIP.

## **Work Plan: Aims, Change Ideas, Process Measures displayed on a Driver Diagram**

The senior sponsor, project lead and steering committee will be responsible for oversight and progress reporting on each indicator through use of run charts and driver diagrams. Data will be disseminated to appropriate staff, quality teams, leadership, Quality Council and the Board of Directors.

Indicator #1: Mental Health

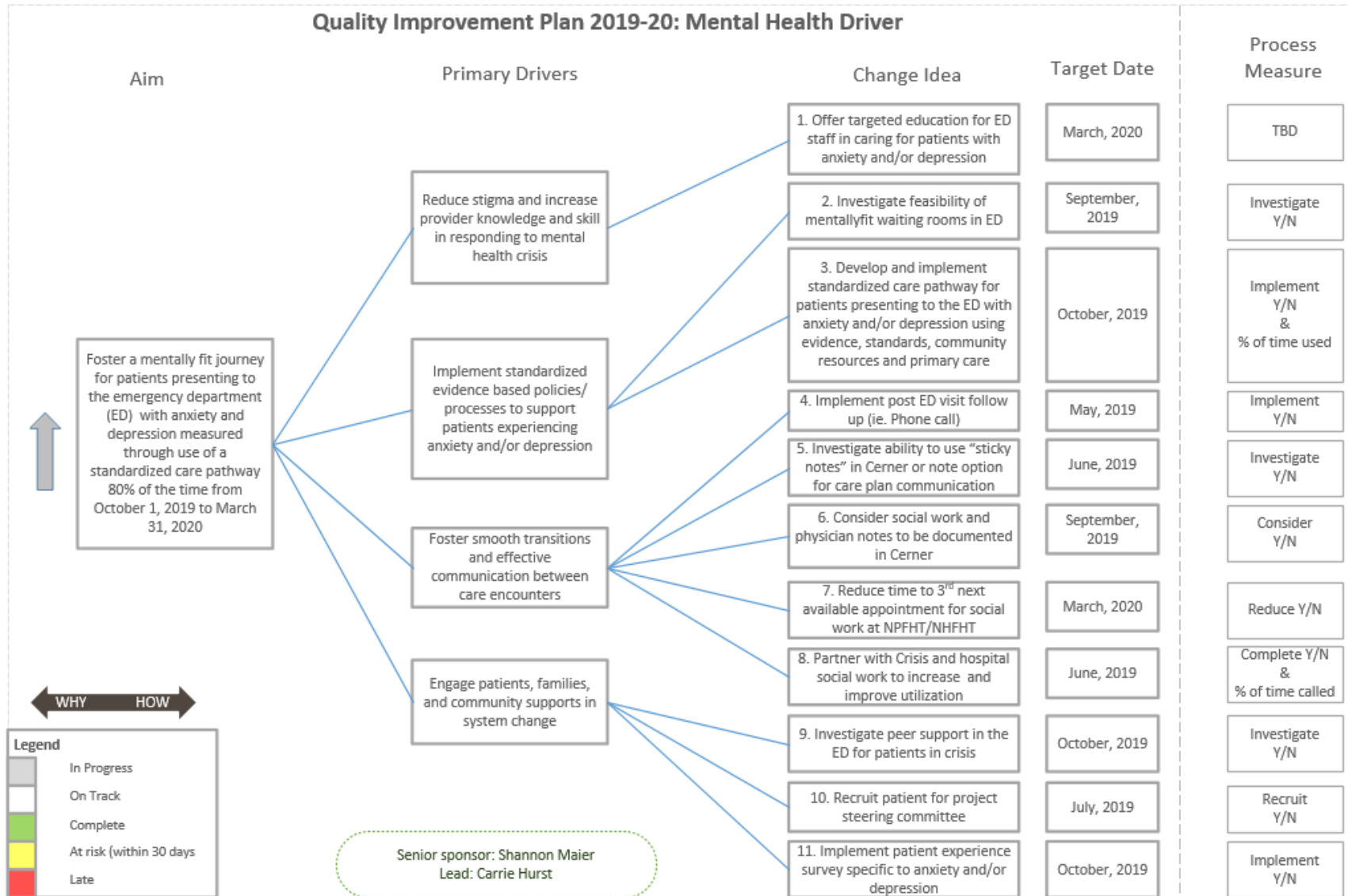
Indicator #2: Joy in Work

Indicator #3: Workplace Violence

## Mental Health

### Current performance:

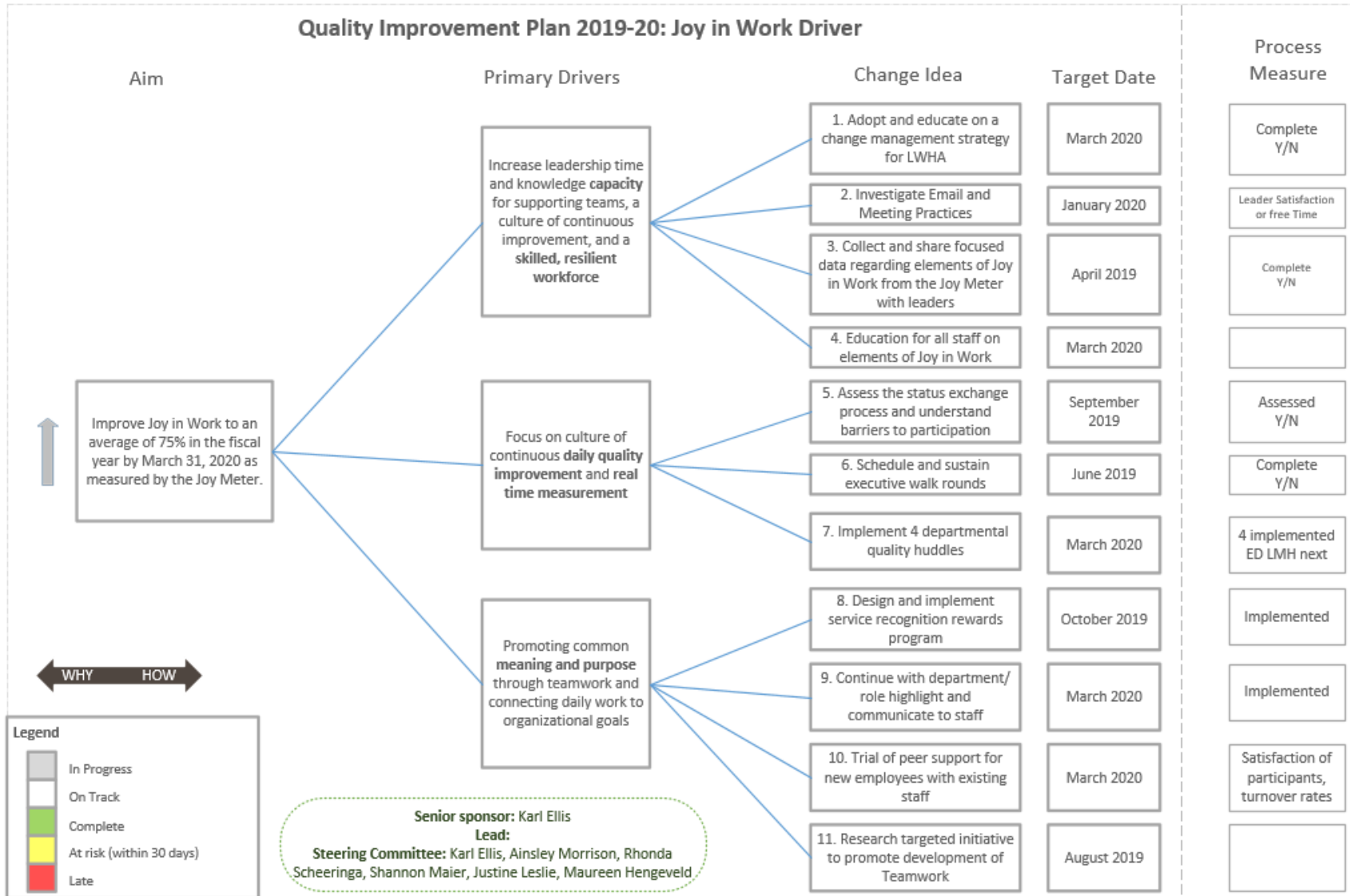
Fiscal Year 2018-19: LWHA 0% standardized care pathway utilized



## Joy in Work

### Current performance:

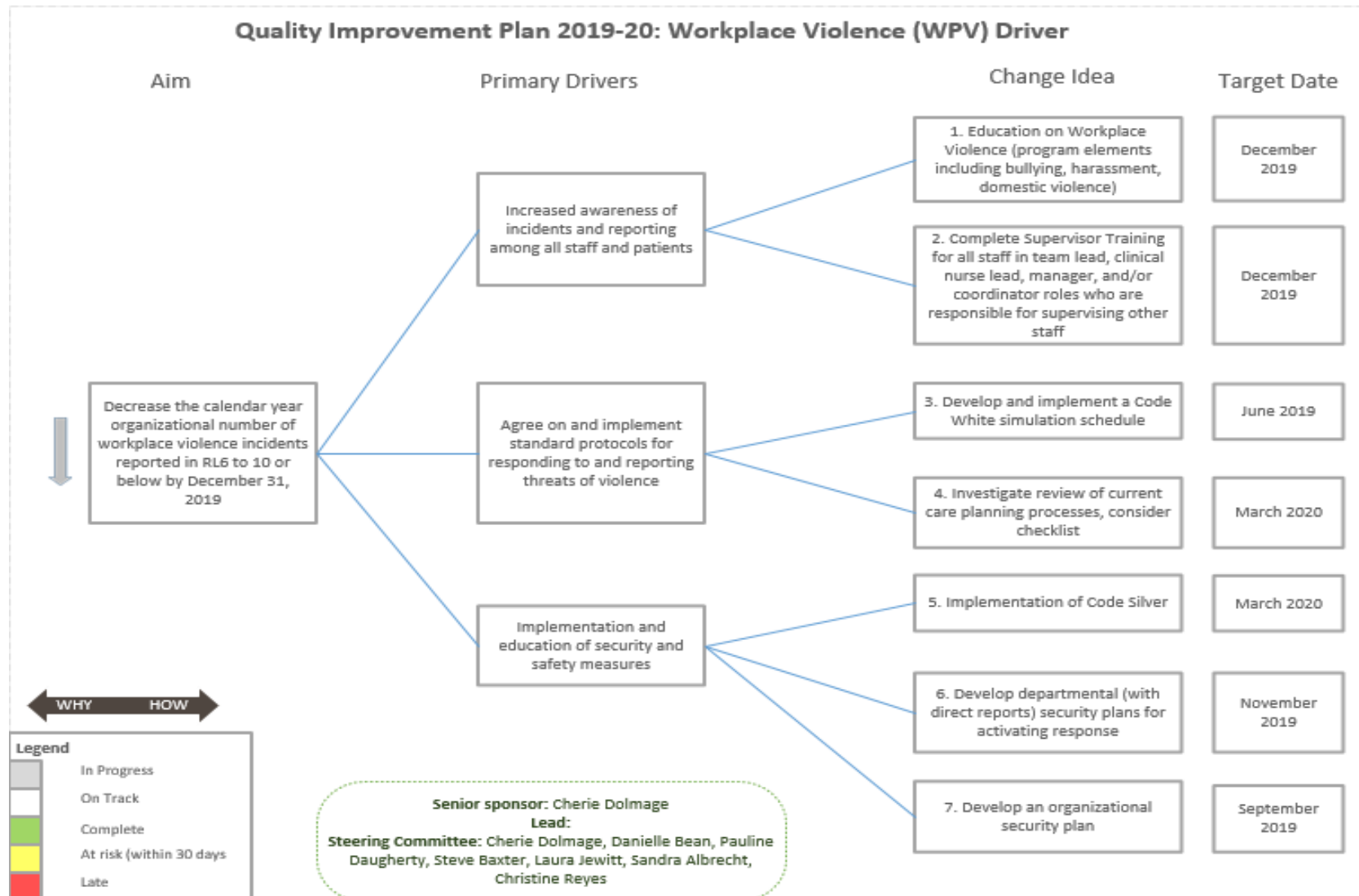
Fiscal Year 2018-19 average: 74%



## Workplace Violence

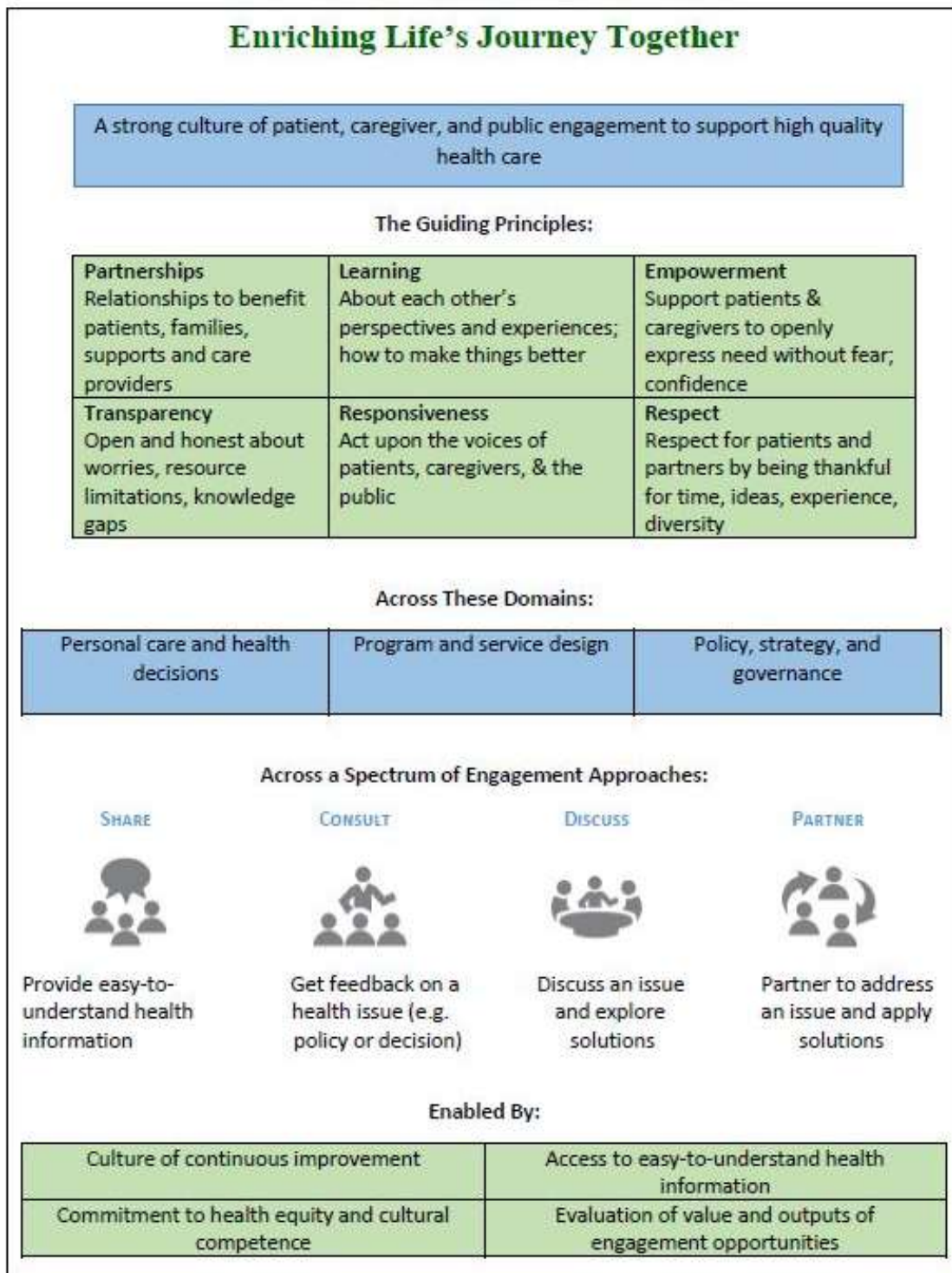
### Current performance:

Calendar Year 2018: 14 incidents





Appendix A: Listowel Wingham Hospitals Alliance Patient and Family Engagement Framework



Adapted from HQO, 2016

## Sign-off

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

LWHA Board Chair Penny Mulvey Mar 27 2019

Penny Mulvey

Date

Chief Executive Officer Karl Ellis Mar. 27/19

Karl Ellis

Date

## References

Health Quality Ontario. Ontario's Patient Engagement Framework. Toronto: Queen's Printer for Ontario; 2017.

Perlo J, Balik B, Swensen S, Kabcenell A, Landsman J, Feely D. *IHI Framework for Improving Joy in Work*. IHI White Paper. Cambridge, Massachusetts: Institute for Healthcare Improvement; 2017.