

## QUEENSWAY CARLETON HOSPITAL

# Patient Safety Plan

2025-2027

## PREFACE

Queensway Carleton Hospital (QCH) strives to provide high-quality, compassionate and coordinated care for the people and communities we serve.

To provide exemplary patient care, all quality aspects must be considered, including a population focus, accessibility, safety, work-life, client-centred services, continuity, effectiveness, and efficiency. Patient safety is a key component of service provision and a strategic priority of QCH. At QCH, we have established systems and processes aimed at minimizing the likelihood of errors and to provide practical strategies for reporting concerns for analysis and improvement when they do occur.

Accreditation Canada states that patient safety plans may include a range of actions and approaches, such as mentoring team members, articulating the role of leadership in safety, implementing organization-wide patient safety initiatives, accessing evidence and best practices, and recognizing team members for innovations to improve patient safety. In addition, Patients for Patient Safety Canada (2019) states that when patients, families, and the public are intentionally involved in designing and delivering healthcare programs and services, the system becomes safer, resulting in enhanced patient experiences and improved outcomes. Engaging patients and families is essential to ensuring safe, high-quality care. Partnering with patients shows respect and value for their insights and experiences, empowering them to take an active role in their care and shared decision-making.

QCH's Patient Safety Plan (PSP) was informed and developed by numerous sources, including the Quality Improvement Plan 2024 (QIP), our Strategic Plan, the results of the Patient Safety Culture Survey, committees across the organization, and patient and family feedback. The Plan builds on past years' quality and safety performance and identifies new opportunities to enhance the delivery of quality care to patients and their families. The PSP supports our continuous pursuit of identifying system improvements for our patients and staff.

## THE BOARD OF DIRECTORS ROLE IN PATIENT SAFETY

The Governance Centre of Excellence of the Ontario Hospital Association has published a document titled "Quality and Patient Safety: Understanding the Role of the Board." The document provides guidance to hospital boards dedicated to leading their institution's quality agenda. It provides practical advice surrounding the board's legislative duties, an introduction to the patient safety landscape in Ontario, and insight into how effective boards drive the quality agenda.

This document notes that 'it is ultimately the board's responsibility to ensure that the quality of patient services provided by their hospital is monitored, and to ensure that it meets the standard that can be reasonably expected of the community it serves.'

*The Excellent Care for All Act*, which was declared in force in June 2010, requires every healthcare organization to establish and maintain a quality committee that is responsible for monitoring and reporting on quality issues and on the overall quality of services provided. Safety is one of the attributes of a high-performing health system included in the reporting framework. The Queensway Carleton Hospital Board of Directors has established a Quality and Patient Safety Committee in compliance with the Act. Several patient safety indicators and initiatives are included in the annual Quality Improvement Plan (QIP) required by the Act. The details of the QIP can be found on QCH's Internet Homepage under the About Us, Quality Improvement Plan section.

The QCH's governance policy on Enterprise Risk Management (ERM) requires that the organization establish a risk management program that incorporates patient safety across the hospital.



## **HISTORY OF ACCOMPLISHMENTS**

The QCH Patient Safety Plan builds upon our demonstrated commitment to quality and prioritizing the delivery of safe, equitable and accessible patient care. This plan highlights various achievements across the organization and the continued efforts to deliver the highquality care our patients deserve and expect.

#### **2021 Newsweek Recognition**

QCH was ranked first among Ottawa-area hospitals in Newsweek Magazine's World's Best Hospital 2021 rankings.

#### 2023 ACS Surgical Quality Partner

A designation as an American College of Surgeons National Surgical Quality Partner in recognition of maintaining the highest standards in surgical care.

#### 2023 Accreditation Canada

Exemplary Standing achieved.

#### **NICHE Designation**

The NICHE designation demonstrates our organizational commitment and continued progress in improving the quality of care for the geriatric population.

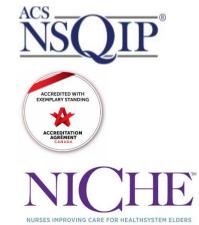
#### 2023-2024 CABHI Award

Recipient of the 2023-2024 Sparks Program, the Emergency Department (ED) has been recognized for introducing a temporary Behavioral Support RN role. This initiative has paved the way for a specialized training program for emergency nurses, equipping them to better manage patients with responsive behaviours.

#### **Simulation Project**

In 2024/25, QCH launched a Simulation Program funded by Critical Care Services Ontario for a Retention Demonstration Project. This initiative uses high-fidelity interprofessional simulations and low-fidelity skills training to enhance clinical knowledge, procedural expertise, and crisis resource management in a safe environment. The program also supports the recruitment and retention of an engaged workforce by fostering a just culture that strengthens interprofessional teamwork and respect.









## **Quality and Patient Safety at the Board**

At QCH, the Quality and Patient Safety Committee and Board of Directors monitor the quality and safety of hospital services through several mechanisms including:



Monitoring achievements and progress related to patient safety indicators linked to our True North Strategy through Cascading Scorecards and Key Performance Indicators.



Receiving reports from patient care departments and support Teams, which include team-specific patient safety indicators and initiatives at every meeting.



Presentations are made to the Board's Quality and Patient Safety Committee on all key clinical risks that impact quality and patient safety identified through the enterprise risk management program. Examples include:

- Capacity Overload;
- Delayed Elective Procedures;
- Discharge and Transition of Care;
- Failure to Recognize Deterioration;
- Medication Administration;
- Healthcare Acquired Infection

The Board develops and approves QCH's strategic goals, including those related to patient safety.

### **GUIDING OUR FUTURE: VISION & MISSION**

#### **Our Vision**

As an organization, we routinely re-evaluate our vision, ensuring it reflects the overall direction and culture of the hospital and the goals we aspire to achieve. In 2022, our vision statement was revised and captures where we strive to be as an organization:

## 'Trusted as one of Canada's most caring and innovative health partners, fostering vibrant, healthy communities.'

This vision extends to our patient safety portfolio, where we envision providing exemplary care with no incidents of preventable harm in an organization that learns from proactive reporting to avoid harm.

#### **Our Mission**

Our mission statement guides the hospital's decision-making, operations, and culture, ensuring that we remain focused on our values and that we provide the highest-quality care to our patients. It serves as a compass for our organization, helping us to stay true to our mission and fulfill our commitment to the community we serve.

## 'Provide high-quality, compassionate and coordinated care for the people and communities we serve.'

The hospital's mission statement lays the foundation for a comprehensive Patient Safety Plan. The hospital is committed to providing the best possible care to its patients through our approach to patient safety, which includes a focus on communication, education, and continuous quality improvement. The mission statement serves as a guiding principle for the hospital's efforts to enhance patient safety. It ensures that the hospital remains focused on its core vision of providing compassionate care to those in need.

## **ORGANIZATION-WIDE PATIENT SAFETY STRUCTURES**

QCH has a strong governance structure for engaging physicians, leaders, volunteers, staff, patients, and their families in patient safety, ensuring their efforts are rooted in peoplecentred care. We lead with the premise that patient safety is a shared responsibility, emphasizing active collaboration with patients and families to co-design safer care practices. There are clear accountabilities at all levels of the organization to ensure we continuously monitor, review, and improve the processes that support quality and patient safety, prioritizing the unique needs, preferences, and experiences of those we serve.





#### **INCIDENT REPORTING**

Creating a culture where people are confident to report their concerns without fear of reprisal, shame or blame.

#### **QUALITY REVIEWS**

Conducting Quality of Care Reviews, Morbidity & Mortality rounds and discussing patient safety incidents as opportunities for learning and recommending.







#### MONITORING

Actively collecting, analyzing and sharing patient safety information to support quality and patient safety throughout the organization.

#### SAFETY OFFICERS

The physician-patient safety officer structure plays a key role in advancing quality and patient safety initiatives by actively fostering collaboration and engaging physicians as partners in promoting and ensuring quality and patient safety care.



#### **QUALITY GOVERNANCE STRUCTURE**

Corporate Quality Reporting structures, including the Quality Council, Patient and Family Advisory Council engagement and Quality Leadership meetings, ensure accountability and alignment of quality and patient safety at all organizational levels.

## SAFETY CULTURE

We know that fostering a Safety Culture is one of the most effective ways to deliver quality care, reduce risk, and support patient safety. This means we encourage staff. physicians, volunteers, patients and families to openly and confidently report safety or risk concerns. This information is utilized to measure, monitor and learn from safety incidents and create organizational learning. Through these measures, we strengthen our patient partnerships, inform staff education and improve our processes. A Safety Culture encourages everyone to report risk and safety concerns so that actions can be taken to fix system issues and prevent the precursors that can lead to errors.

## **STRATEGIC PLAN & PATIENT SAFETY**

QCH's Strategic Plan prioritizes Exceptional Care Experience and Seamless System of Care as key components of our commitment to delivering safe, compassionate, and high-quality care to our patients and their families. Our Connected Care partnership is a critical element of this strategy, helping us to leverage technology to enhance patient safety and quality of care. The PSP embodies our deep commitment to our True North goals and aligns with evidence-based quality and safety standards by Accreditation Canada. We believe that quality and patient safety are the foundation for every aspect of the services we provide, and the PSP reflects the values and priorities of our patients, families, staff, physicians, and volunteers.

## **SEAMLESS SYSTEM OF CARE**

Our Seamless System of Care goal states that we will coordinate care within and beyond the walls of the hospital and improve population health. The key areas of focus under the Seamless System of Care goal include:

- o Right Care, Right Place, Right Time
- Coordinated Transitions

The Patient Safety Plan outlines the initiatives we've identified that will impact quality and patient safety related to the seamless system of care goal.

## **Coordinated Transitions**

It has been established that coordinated care management is an effective approach to improving the quality of care for patients with complex health and wellness issues. Our key initiatives identified through the QIP will enhance coordination and transitions for the patient during their care journey.

Timeframe	Key Initiative	<b>Quality Dimension</b>	Source/Oversight
Current year	Expand the Remote Care Monitoring program to additional patient populations.	Access & Flow Efficient	QIP
Current year	The transition tool, a patient document containing post- discharge instructions, will have standardized workflows for healthcare staff to ensure consistent discharge practices.	Experience Patient-Centered	QIP

Timeframe: Current year (2024/25 FY); Mid-term (2025-26 FY); Long-term (Beyond 26/27 FY)

## Time to In-Patient Bed

Time to inpatient bed is closely linked to accessible care. Timely admission to the appropriate care setting is linked to improved patient outcomes, enhances the overall patient experience, and minimizes the risk of adverse events. A Time-to-Inpatient Bed project is on track to improve patient flow across the organization.

Timeframe	Key Initiative	<b>Quality Dimension</b>	Source/Oversight
Mid-term	Development of a patient flow model for patients seeking mental health support through the Emergency Department (ED).	Safe Patient-Centered	QIP
Mid-term	Standardize inpatient rounds to enhance collaboration and improve efficiencies in patient care discharge planning.	Efficient Timely	QIP

## **Capacity Overload**

Increased demographic demand associated with growth in the community and lack of financial growth can result in inability to optimally care for all patients who require hospitalization. In addition, lack of physical space and infrastructure results in capacity being close to or at its ultimate limit without disadvantaging patients who require medical and surgical inpatient care.

Timeframe	Key Initiative	<b>Quality Dimension</b>	Source/Oversight
Mid-term	Improve ED efficiency and reduce wait times through the ED Xcellence project. The primary focus will be on enhancing Time to Physician Initial Assessment (PIA), Ambulance Offload Time (AOT), and the number of patients waiting in the ED at 8 a.m. This is crucial for streamlining our processes and ensuring patients receive timely, quality care.	Safe Patient-Centered	ERM
Long-term	A submission to the Ministry outlining the need to increase the ED's footprint and capacity to accommodate growing patient volumes.	Efficient Timely	ERM
Long-term	Submission to the Ministry outlining the need for 90 new inpatient beds.	Patient-Centered Efficient	ERM

## **Digital Health Solutions**

At QCH, technological advancements and automation that enhance clinical workflows and patient safety are top priorities. We've built strong relationships with regional partners, and integrating leading practices while staying current with health technology is central to our care delivery. To further improve the patient experience, a reevaluation of our digital health strategy is currently underway.

## **EXCEPTIONAL CARE EXPERIENCE**

Our Exceptional Care Experience goal states we will provide high-quality patient and familycentered care. Our areas of focus to achieve this goal include:

- o Zero Patient Harm
- 100% Patient Satisfaction

The Patient Safety Plan outlines the initiatives we've identified that will impact quality and patient safety under the goal of Exceptional Care Experience.

### **Recognizing Deterioration**

Early identification of patient deterioration can lead to timely treatment and better outcomes. A delay in recognition of patient deterioration increases the risk of patient harm due to the delay or failure of timely treatment.

Timeframe	Key Initiative	<b>Quality Dimension</b>	Source/Oversight
Current year	Improve transition practices to ensure important information is always shared during patient transfers.	Safe Patient-Centered	Professional Practice Quality Council
Mid-term	Continue to conduct Simulation exercises throughout the organization to prepare frontline staff to recognize and respond to various emergency scenarios.	Timely Effective	ERM
Mid-term	The Rapid Response Team will proactively round using NEWS2 scores to help inpatient nurses identify signs of patient deterioration while supporting and educating front-line nurses to reduce care delays.	Timely Effective	ERM

## **Recognizing Deterioration (continued)**

Timeframe	Key Initiative	<b>Quality Dimension</b>	Source/Oversight
Mid-term	Improve proactive monitoring and interventions of delirium to ensure early detection and appropriate management to improve patient outcomes and quality of care.	Safe	ERM
Long-term	Implement the Surveillance Module (Meditech) to enhance workflows and identify patients at risk for deterioration.	Safe Effective	ERM

## **Medication Management**

Adverse events caused by medications are a common occurrence in healthcare settings. Errors can happen at any stage of the medication management process, putting patients at risk of harm. To address this issue, we are dedicated to optimizing the medication process to prioritize patient safety and minimize the likelihood of errors and adverse events. Our goal is to ensure that medication administration is a safe and effective process for all patients under our care, and when they leave the hospital.

Timeframe	Key Initiative	<b>Quality Dimension</b>	Source/Oversight
Current year	Enhance barcode scanning compliance by adhering to the closed-loop medication process, supporting best practices in medication administration.	Safe Timely	ERM
Mid-term	Streamline and standardize Smart Pump use by replacing Sapphire pumps with CADD Solis pumps, reducing the number of models.	Safe Effective	ERM
Mid-term	Enhance compliance with discharge medication reconciliation practices in targeted service areas to ensure patient safety and quality care throughout the discharge process.	Safe Efficient	QIP

## Medication Management (continued)

Through monitoring trends and quality of care reviews, we identified an opportunity to standardize treatment plans of patients admitted with pulmonary embolism (PE) and ensure practices are aligned with evidence-based care. A monetary grant from Pfizer was awarded to support this initiative.

Timeframe	Key Initiative	<b>Quality Dimension</b>	Source/Oversight
Current year	Implement the standardized and evidence-based transition and discharge criteria for patients admitted with PE.	Safe Patient-Centered	Quality Council
Current year	Implement and educate treatment and diagnosis algorithm supported by validated clinical decision- making tools for safe care planning related to patients diagnosed with PE.	Safe Efficient	Quality Council
Current year	Education for physicians, nursing, pharmacy about evidence-based practices and care planning for a patient with a PE.	Safe	Quality Council

## **Sepsis Management**

Through the Interdisciplinary Morbidity & Mortality Review Committee (IMMRC), the organization has been monitoring and trending early identification of patients presenting with sepsis and timely treatment. Monitoring of the HSMR data related to sepsis, coroner files, incident reports, Quality of Care Reviews and chart audits all support this initiative.

Timeframe	Key Initiative	<b>Quality Dimension</b>	Source/Oversight
Current year	Identification of targeted measures and metrics for patients presenting with sepsis.	Effective Efficient	IMMRC
Current year	Provide education across the organization about sepsis and leading practices in sepsis management.	Safe Effective	IMMRC
Mid-term	Determine appropriate data collection methodology and compile data for analysis.	Effective	IMMRC

At QCH, patient safety is paramount. We understand its critical role in delivering high-quality care and ensuring positive outcomes for our patients. Our organization's Patient Safety Plan has been developed in accordance with the Required Organizational Practices (ROPs) outlined by Accreditation Canada.

Our plan is rooted in the belief that patient safety is a shared responsibility that involves every member of our organization, including our physicians, leaders, volunteers, staff, patients, and their families. We are committed to fostering a culture of safety where everyone is encouraged to speak up, share their concerns, and actively participate in identifying and managing risks. By doing so, we can create a safe but also transparent, and accountable environment.

Our plan focuses on ensuring a safety culture, identifying and managing risks, engaging patients and families, and continually improving our processes and systems. By implementing this comprehensive Patient Safety Plan, we are committed to enhancing patient safety and providing high-quality care for all we serve.



Revised: December 2024