

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

April 3, 2025



OVERVIEW

Renfrew Victoria Hospital (RVH) is a small community hospital located in Renfrew, Ontario, about one hour west of Ottawa. It serves a catchment of 100,000 people. Most RVH executives have integrated roles with SFMH in Barry's Bay, Ontario (90 minute commute from Renfrew). SFMH is a small, rural, and isolated community hospital. Other integrated Leadership roles include: Director of Pharmacy, Occupational Health and Safety/Infection Prevention & Control Coordinator, Director of Hospital Information Systems, Corporate/Clinical Educator, and Director of Information Technology. This innovative and collaborative model has ensured excellence, quality, and efficient service delivery while keeping care close to home. Each hospital has its own independent Board of Directors.

The average income is 40K annually and there are many other factors affecting health equity including access to affordable housing, food insecurity and a lack of public transportation.

RVH is committed to bridging this gap working collaboratively with all local and Regional partners and as an active leader in the Ottawa Valley Ontario Health Team. RVH Regional Programs include Addiction Treatment Services, Domestic Violence and Older Adult Protection Services Program and Nephrology. Renfrew County has one of the highest rates of domestic violence in Eastern Ontario.

Renfrew County has a growing number of seniors in our catchment area and experiences great pressures in terms of LTCH occupancy and sub-acute beds. The hospital offers a wide range of services including inpatient medical/surgical beds, complex continuing care beds, and two operating rooms. RVH has a long-standing

relationship with TOH and this has ensured that specialized surgical services including ENT, gyne, urology, and breast are performed at RVH in addition to general surgery procedures. The 24/7 Emergency Department sees over 25,000 patients each year with increasing acuity. We were pleased to be able to expand to include additional Internal Medicine physicians to support our ER and Hospitalist teams, in addition to 3-bed level 2 ICU and growing ambulatory care service (including clinics for over 40 different specialties).

RVH's Nephrology program includes 2 satellite units, one in Barry's Bay and one in Pembroke. The program also includes a home Peritoneal dialysis program and chronic kidney disease clinic. In 2024 RVH Nephrology Team received a certificate for achieving the annual target of deferred dialysis reflecting the commitment to quality of life patients.

RVH continues to expand the systemic therapies, including chemotherapy, for our patients in partnership with Cancer Care Ontario. RVH remains committed to reinvestments to ensure cancer and other specialized treatments can be accessed locally. The CCC unit continues to restore patients to baseline or improved functioning supporting safe transitions and discharges. RVH successfully also expanded the Assisted Living Program in the community to reach other at-risk seniors and support them in staying in their own homes. The program supports patients in Renfrew, Cobden and Calabogie.

The RVH mission, vision, values, and strategic direction provides the direction for the delivery of quality health services. The quality improvement plan is aligned with the hospital's key strategic directions below, with an emphasis on the provision of quality

health care services:

Values:

- **Quality:** We are committed to continuously improving the quality of health care we provide.
- **Safety and Wellbeing:** We make every effort to support the safety and wellbeing of all individuals within our environment.
- **Leadership and Accountability:** We champion innovation and collaboration to anticipate and respond to the changing needs of our community in a fiscally responsible manner. We foster a culture of ownership, innovation and teamwork that promotes resiliency.
- **Respect:** We respect the rights, dignity, diversity and values of each individual.
- **Engagement:** We believe care is enhanced through the active participation of patients and their caregivers. We value the contribution of each individual and our community partners in the organization.

ACCESS AND FLOW

System integration is a pillar of the strategic plan: We will strengthen relationships and embrace innovative opportunities to advance the delivery of seamless, high-quality health care that is responsive to our community's needs.

We will:

- Create a climate that encourages access to collaborative, coordinated healthcare
- Implement and optimize systems and processes
- Expand the use of evidence-based performance measures and best practices
- Mobilize technology and equipment that enhances quality, safety and efficiencies in care while mitigating risk

- Invest time and resources to deepen strategic relationships with key partners.

RVH has expanded the Assisted Living Program to 2 other towns: Calabogie and Cobden to support seniors to remain in their own homes. Proactive interventions and teaching ensure that they remain free from injury and medication support and assessment reduce the number of visits to the ER as staff can be the liaison between the client and PCP. The home-first philosophy is well embedded in the practices at RVH and is supported by in-house OH at-home care coordinators supporting admission avoidance in the ER and safe care transitions from the inpatient units. The care coordinators participate in regular joint discharge rounds and care conferences as required.

RVH performed a self-assessment and developed action plans to implement and strengthen best practices for clients deemed ALC. These best practices are supported by all care teams, and by managers and team leaders. A geriatric Assessor, geriatric coordinator and Geriatric emergency management nurse work with teams and OH at home to connect clients with community services and other supports. All of these practices contribute to access and flow. RVH participates in daily Regional patient flow calls, Renfrew County multidisciplinary team meetings and OVOHT geriatric and patient navigation tables. RVH continues to recruit PCP to the community and support efforts to improve access to primary care including continued support for unattached clients with Chronic disease through the Regional Diabetes Program as well as Access MHA.

EQUITY AND INDIGENOUS HEALTH

RVH is working to reduce disparities of health outcomes and improve access to care throughout our catchment area. Social supports in addition to medical and health care are provided by social workers, specialized geriatric assessors and nurses, pastoral care, and our community Meals on Wheels program, amongst other resources. Outreach programs include an Assisted Living program that cares for seniors in their homes, an addiction treatment services program, diabetic counselling and palliative care. As an OHIP funded hospital all services are provided at no cost.

RVH has an IDEA (inclusion, diversity, equity, and accessibility) committee to support health equity aims. This committee is intended to promote health equity and foster inclusivity and belonging. This committee provides a cultural event calendar in our biweekly communique and recognizes events throughout the year, such as Black History Month and the National Day for Truth and Reconciliation. In addition to training on accessibility for all staff, and training on pronouns and gender diversity, RVH also provides indigenous cultural safety training, and provides safe spaces for smudging and culturally important practices. Patients are also able to self-identify in their MyChart their own gender and pronoun preferences and are able to change this.

In our catchment area, is also a significant number of Mennonite communities. RVH leadership visit and meet with the leadership of these communities annually to discuss how to better provide services in a manner that is culturally safe. For example, we have a hitching post to accommodate horse-drawn buggies and all staff are familiar with how to support patients who do not have health cards and pay in cash.

To support French-speaking patients and clients, all of RVH's regional programs have been officially designated as bilingual under

Ontario's French Language Services Act (O.Reg 551/22) – our dialysis, addictions treatment service and regional assault care programs. In addition, translation services are available in over 300 languages (including indigenous languages, and ASL, amongst others).

RVH has access to the census data of the broader community and are reviewing this against our organization's personal demographics, where available, to see if they reflect this of the broader community. RVH also actively participates on a number of regional hospital and healthcare EDI and accessibility committees to share best practices.

PATIENT/CLIENT/RESIDENT EXPERIENCE

In 2024 RVH implemented Qualtrics for electronic patient experience surveys for the ER and inpatient unit. Our response rates have increased as they are sent via e-mails collected at registration. Managers are able to review dashboard data in real-time and graphed data and free text comments are shared at care teams, on huddle boards, and with the Patient & Family Advisory Committee. It also reached the Board through the Board Quality and Safety Committee. PFAC is very engaged in action items and reviewing trends. RVH has also experienced increased uptake in the use of the My Chart functionality. PFAC members are welcome on internal Care Teams and members currently participate on Acute Care, Cancer Services, CCC, ER, Infection Control, Ethics, Nephrology, and EPIC My Chart working group. PFAC members have also joined the OVOHT PFAC. RVH is working with OVOHT leads on the QI Enabler Group (OVOHT) on a cQIP.

The RVH Patient and Family Advisory Committee (PFAC) continues to help improve decision-making processes, patient experience, and

patient safety. PFAC members strongly advocate for clients and their care needs. The projects they work on add value to client and family experiences. This committee continues to provide valuable insight and observations on many pertinent topics including hitching posts location, patient education/handouts, pamphlets, way-finding and signage and many other policies & procedures. The PFAC will continue to play an integral role in Accreditation and related preparations. Members of PFAC hosted stations at internal Skills Fair and Patient Safety Days to raise awareness about PFAC role and engaging with staff about patient/family experience.

In 2025, PFAC will be engaged as part of the ED Negative Air Project and the 2nd and 3rd floor renovation planning/focus groups. RVH also engages patients and families through an "open door policy", regular care conferences, use of patient whiteboards and after visit summaries, and the RVH website via feedback e-mail. RVH remains committed to the BPSO Best Practice Guideline for Patient & Family Centered Care.

PROVIDER EXPERIENCE

RVH will champion an environment that positions RVH as the organization of choice for staff, physicians, volunteers, and partners where everyone is empowered to be the best they can be.

We will:

- Sustain and enhance an inclusive environment that values and supports diversity, physical and psychological health, safety, continuous learning, and wellness
- Inspire a culture of mutual respect, empowerment and engagement that encourages collaboration, ownership, and innovation
- Employ strategies to attract and retain the best possible

individuals

- Communicate clear expectations and provide meaningful recognition of our people
- Promote opportunities and support ongoing development and education to meet the changing needs of our healthcare team and our community

The Quality Improvement Plan for 2025/26 continues to focus on initiatives that will engage all our organization's clinicians, leadership, and staff. Our hospital values promote leadership and innovation by all our staff in developing programs and services. In the 2025/2026 year RVH will embark on a new journey to prepare for our next accreditation, planned for December 2026. Our employee wellness committee continues to work with our staff/physicians at RVH to plan and roll-out meaningful events. Front line/clinical staff are key members of this committee and actively participate in what is needed. Bi-weekly newsletters provide valuable information on supports available to all staff at RVH.

Work-life balance and staff wellness is a key priority for RVH and we appreciate the landscape and climate staff and physicians are working in as well as the risk for burnout given the significant accountabilities held by all. Care Team meetings and Taskforces are taking place to identify opportunities for improvement. RVH also uses anonymous surveys to gather feedback and develop actions.

SAFETY

RVH has a comprehensive Integrated Quality, Risk, and Safety Plan. RVH participates in multiple Ontario Health Quality and Safety Initiatives, including Never Events and related reporting. RVH has an extremely robust policy related to patient incidents and critical incidents. A structured process is in place to review all incidents

involving key physicians and staff to ensure changes and follow-ups occur in a timely manner. IPAC and Occ. Health safety practices are current, and RVH supports our partners whenever possible if a need arises.

Patient safety is embedded into the culture of this hospital and part of the Accreditation focus to ensure safety remains a top priority. The OVOHT, Alliance partnership, and Regional and provincial table participation allows RVH to remain current with Best practices and internal committees regularly review near misses, incidents, and other code debriefs and reviews in order to disseminate lessons learned readily. RVH has a just culture, and we aim to continuously learn and improve practices.

Patient concerns/incidents are reported quarterly to the Board Quality and Safety Committee, along with changes made. In 2024, RVH had an increase in the number of patients responding through My Chart and completing the Qualtrics patient experience surveys. RVH is able to monitor data on dashboards and trend performance. Currently, we review all free text on a monthly basis at care teams and then quarterly at the Board Quality and Safety Committee. RVH conducts daily discharge rounds, regular care team meetings, family meetings and joint discharge rounds for patient flow/access decisions. This process engages the team, patients, and families in safe and timely discharges. RVH has also implemented many ALC leading best practices to ensure adequate throughput.

Violence in the workplace presents a risk to the well-being of Renfrew Victoria Hospital staff, physicians, volunteers, patients, and visitors. It is everyone's responsibility to prevent violence in the workplace. At RVH, we strive to create a positive environment with mutual respect and open communication.

In response to Bill 168 (Act to amend the Occupational Health and Safety Act with respect to violence and harassment in the

workplace and other matters), RVH has updated its violence and harassment policies and programs, employee reporting and incident investigation procedures, an emergency response procedure for violent events, and a process to deal with incidents, complaints, and threats of violence. Extensive education has taken place for all RVH staff. Staff in key areas of the hospital have received non-violent crisis intervention training, which includes gentle persuasion approach training and general education on the new policies, procedures, and protocols. RVH has implemented a more robust panic alarm system and recommendations from the Occupational Health and Safety Committee as well as front line staff are actioned as soon as possible and as able. RVH continues to work with our paramedic and police partners to ensure safe transitions of care for both mental health and addiction patients requiring care at our hospital. One of the most recent changes to support staff and physician safety on off-hours as well as that of the public, was the implementation of a 12 HR security guard overnight, which began on September 30, 2024. Pre and post surveys have indicated that this investment is valuable and effective.

PALLIATIVE CARE

Renfrew Victoria Hospital (RVH) is dedicated to delivering high-quality palliative care by focusing on patient-centered approaches, ongoing education, and effective community collaboration. RVH ensures that people with palliative care needs receive compassionate, effective, and timely symptom management while supporting patients, families, and care partners throughout their journey. This approach aligns with key Ontario Health quality standards, such as the management of pain and symptoms (Quality Statement 6), providing the necessary education to staff, families and care partners (Quality Statement 13 and 8, respectively), and

facilitating seamless transitions in care (Quality Statement 10). Examples of specific activities RVH has completed to support this commitment include:

1. **Staff Education Initiatives:** RVH has provided education on Empathy, Compassion, and Fatigue to support healthcare professionals in managing the emotional toll and grief that often accompany the care of palliative patients. Additionally, staff participate in a "Lunch and Learn" format of education focused on pain and symptom management at the end of life. These sessions are recorded and uploaded to the Learning Management System, making the content accessible to all staff year-round, and ensuring ongoing education and competency development (Quality Statement 13).
2. **Community Partner Collaboration:** RVH actively engages with the community through events like "By the Way before You Go", and Preparing for the End of Life, 2024. These community collaborations foster understanding and learning about available resources and the care provided throughout the region, ultimately supporting seamless transitions of care. As healthcare providers and community members work together, they enhance patient navigation and ensure continuous, coordinated care across settings and providers (Quality Statement 10).

Partner Collaboration includes:

Renfrew County Palliative Care Network
Renfrew Victoria Hospital Multidisciplinary Palliative Care Team
Champlain Centre for Health Care Ethics
Champlain Hospice Palliative Care

3. **Patient and Family Support and Education:** RVH has recently developed a comprehensive resource booklet to guide families

through the dying process and what to expect after a death. This booklet is provided to families, offering essential education and support during difficult times, and helping them understand the care process and the available resources.

POPULATION HEALTH MANAGEMENT

The OVOHT and its resources have helped to better understand our population and chronic disease incidence. Additionally, we can review data on other aspects of health, including vaccination rates, precarious housing and homelessness, and food insecurity rates. We work very collaboratively with Public Health and other community social services to improve healthcare and access as much as possible. In 2024, RVH recognized a need for patients who did not have a PCP and who required Driver's Medicals for their employment. RVH started a clinic to address this need and in order to prevent these patients from presenting to ER, instead they are provided an appointment.

In our catchment area, we have a significant number of Mennonite communities. RVH leadership visit and meet with the leadership of these communities annually to discuss how to better provide services in a manner that is culturally safe. For example, we now have 2 hitching posts to accommodate horse-drawn buggies on the RVH property supporting hospital and clinic building access.

To support French-speaking patients and clients, all of RVH's regional programs have been officially designated as bilingual under Ontario's French Language Services Act (O.Reg 551/22) – Nephrology, Addictions Treatment Service and Regional assault care programs (child and elder abuse). In addition, translation services are available in over 300 languages (including indigenous languages, and American Sign Language (ASL), amongst others).

EMERGENCY DEPARTMENT RETURN VISIT QUALITY PROGRAM (EDRVQP)

The Emergency Department (ED) Return Visit Quality Program

builds a continuous structure of quality improvement (QI) in Ontario's EDs. This program is an Ontario-wide audit-and-feedback program involving routine analysis of ED return visits resulting in admission. Where quality issues are identified, hospitals take steps to address their root causes.

In the ED Return Visit Quality Program, participating hospitals receive data reports that flag two types of return visits:

- Return visits within 72 hours for any diagnosis resulting in admission to any hospital (termed "all-cause 72-hour return visits")
- Return visits within 7 days resulting in admission to any hospital with 1 of 3 key "sentinel diagnoses"* (acute myocardial infarction, pediatric sepsis, and subarachnoid hemorrhage) on the return visit, paired with a set of related diagnoses on the initial visit

*The sentinel diagnoses listed have a high likelihood of disability or death resulting from a missed or delayed diagnosis; thus, EDs that identify quality issues that have contributed to missed sentinel diagnoses may prevent significant patient harm by addressing these issues.

As a small volume hospital RVH is just beginning this journey in participating in the P4R Program. Participation and progress with the quality initiatives and improved patient outcomes will result in RVH having 260K in funding for the ER. Currently this funding in 2024-25 is dedicated to nursing hours in the evening, nursing chart audit and quality lead, Physician Assistant and Nurse Practitioner hours. RVH is tracking and reporting on the above indicators at ER Care Team, Board Quality and Safety Committee through to the Board of Directors. RVH is also committed to tracking and improving our rates of patients who register, are triaged, and then

left without being seen by a provider (NP,PA or MD). Although RVH has performed well in terms of wait times compared to the rest of the province our patient experience feedback captures frustration, especially among patients with no PCP. Additionally, patients state that an ER visit is very impactful because they lose a day of wages from work for a non-urgent need. RVH volumes through ER are stable, but the frail elderly/complex population and acuity overall is quite impactful in the department. RVH is also tracking via EPIC Department Dashboards the Time to initial Physician Assessment and time to inpatient bed once decision to admit is made. These indicators help with flow, safety, and overall experience. RVH is working on action plans for the program/interventions to improve performance with indicators.

EXECUTIVE COMPENSATION

Two percent of compensation for executives (defined as Chief Executive Officer, Chief of Staff, VP Patient Care, Quality, and Clinical Services/CNE, VP Corporate Services and VP Financial Services) is linked to two of the four following indicators:

- Daily average number of patients waiting in ER for an inpatient bed at 0800 AM
- Number of patients who left the ER after registration/triage without being seen
- Percentage of staff (executive level, management, or all) who have completed relevant equity, diversity, inclusion, and anti-racism education
- Percentage of respondents who responded "completely" to the following question: Did you receive enough information from the hospital staff about what to do if you were worried about your condition or treatment after you left the hospital?

The Senior Executive team will be responsible to ensure success in the four key indicators. Refer to the QIP Workplan for specific performance targets for 2025/2026

As per the above statement, two percent of executive compensation will be associated with two of four QIP indicators within the RVH plan.

Indicator data will be reviewed at the Board Quality & Safety Committee quarterly with regular feedback to the Finance & Audit Committee and overall Board Committee of the hospital to ensure targets are met.

CONTACT INFORMATION/DESIGNATED LEAD

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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 on **March 28, 2025**

Rob Tripp, Board Chair

Tom Faloon, Board Quality Committee Chair

Kimberley Harbord, Chief Executive Officer

EDRVQP lead, if applicable
