

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

2024/25



OVERVIEW

Mackenzie Health is a vibrant regional healthcare provider serving diverse communities in the Western York Region with services across two acute care hospitals: Mackenzie Richmond Hill Hospital and Cortellucci Vaughan Hospital – along with the Reactivation Care Centre and a wide array of community-based locations. With a commitment to providing a world-class health experience, Mackenzie Health has an unwavering focus towards providing high-quality patient care and is proud to serve over 550,000 residents in one of Canada’s fastest growing and most diverse communities.

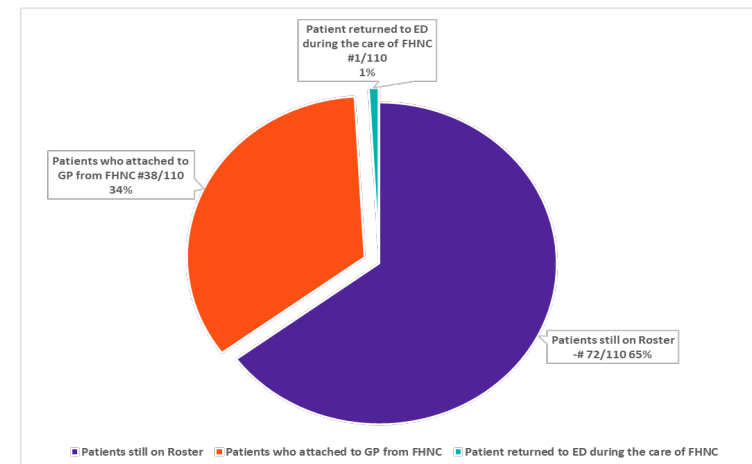
The communities we serve in Vaughan, Richmond Hill, and King are seeing, and will continue to see significant population growth. Mackenzie Health is committed to understanding the needs of its communities and will continue to tailor its services to strive to meet those care needs. We consistently see close to 600 patient visits per day across our Emergency Departments, far exceeding our projected volumes of nearly 400 patients per day. As with many hospitals, we continue to face significant capacity pressures and health human resource challenges. Mackenzie Health continues to give careful consideration when introducing new services and enhancing existing ones to ensure patient needs can be addressed at the right time and in the right manner. Alongside our goal to tailor services to the needs of our communities, Mackenzie Health continues to incorporate the patient and family voice through traditional and innovative methods, to ensure services are delivered with patient safety and experience at the forefront.

Mackenzie Health’s Quality Improvement Plan (QIP) for 2024/25 continues to support our journey to “create a world-class health experience” by ensuring we provide safe, effective, and timely access to care for all those within our community and to support smooth transitions for patients throughout the healthcare system.

ACCESS AND FLOW

Family Health Navigation Clinic

Mackenzie Health has seen a disproportionate rise in patients without a primary care provider visiting our Emergency Departments (ED). In October 2023, we introduced the Family Health Navigation Clinic designed to support these patients by providing follow-up care for outpatients who lack a primary care provider. The Clinic operates from the Mackenzie Richmond Hill Hospital twice weekly, and the primary focus of this clinic is to ensure continuity of care for individuals who would otherwise rely on the ED for non-emergency health needs. By offering dedicated space for unattached patients and facilitating access to primary care providers, the clinic aims to reduce unnecessary ED visits, improve patient outcomes, and enhance overall efficiency of healthcare delivery. **Graph 1** illustrates that in the first three months of opening, the clinic saw 110 referred patients, of whom 38 (34%) have been successfully attached to a family practitioner. The clinic has shown great promise and has already seen more referrals than visit times currently available. Future plans include the incorporation of additional workstreams to cater to various community healthcare needs, aligning with Mackenzie Health’s commitment to keeping patients close to home.



Graph 1. FHNC referral types

Restructuring of Outpatient Senior Services

In response to the evolving needs of our senior population, Mackenzie Health has successfully restructured its outpatient senior services. The merger of the Geriatric Outreach Team with the Senior Wellness Clinic into what is now collectively known as Seniors Services marks a significant step toward improved care coordination. The consolidation of referral forms streamlines the process, allowing patients to access services based on their individual needs rather than the model to which they were initially referred. This has resulted in improved access to specialized care for higher-risk patients through the Geriatric Outreach Team and optimized wait times for lower-risk patients in the Seniors Wellness Clinic. The careful triaging of referrals ensures that each patient receives services aligned with their unique requirements. Early returns on the consolidation efforts are very positive with an 8.4% reduction in wait times for Seniors Wellness Clinic referrals and a nearly 55% reduction in wait times for referrals to the Geriatric Outreach Team. By breaking down silos between services, Mackenzie Health aims to provide more personalized and efficient care for the senior population, emphasizing a patient-centric approach.

Long Stay Program

The Long Stay Program is a 3-year pilot program in collaboration with Critical Care Services Ontario (CCSO) and Michael Garron Hospital (MGH) to provide access to patients in Critical Care programs who require additional support to wean from a ventilator and minimize extensive rehab. The program focuses on the critically ill patients who require additional supports in the critical care recovery process. The program operates on a referral-basis, enabling Critical Care Programs to refer eligible patients to our facility for dedicated care, aiding their transition to appropriate non-acute settings. In addition, the program not only supports patients remaining closer to home to receive critical care recovery support, but also allows Critical Care units to open capacity and facilitate timely access for those who require acute care. During its short time, the program has had 53 patients of which 19 (35.8%) have been successfully weaned off and transitioned to appropriate non-acute care settings. Access and flow to Critical Care is

essential to ensure our critically ill patients are provided the right care at the right time.

EQUITY AND INDIGENOUS HEALTH

Mackenzie Health continues to demonstrate its commitment to fostering Diversity, Equity, and Inclusion (DEI) in the workplace as well as in the way we deliver services to our patients. Over the past year, the hospital has utilized its DEI framework to help expand service offerings and introduce new initiatives that promote equity across culturally diverse populations. Mackenzie Health continues to offer a multifaceted approach to DEI learning, offering opportunities for staff, physicians, and volunteers to engage in ongoing education through various source offerings: the keynote Speakers' Series, Inclusion and Diversity Learning Series, monthly articles, and targeted training sessions during Corporate Orientation. New sessions, such as workplace belonging, intercultural communication, and inclusive language, have been integrated into the Inclusion and Diversity Learning series. Mackenzie Health has embedded a DEI lens into all-staff training on High Reliability Organization (HRO) material and with de-escalation techniques. Furthermore, we have ensured that there is patient voice at our DEI committee so we may integrate patient experiences into the way we approach future initiatives. In acknowledgement of Indigenous health, Mackenzie Health continues to offer learning opportunities for staff and physicians and has recently introduced a Smudging/Cleansing Ceremonies policy that aims to provide a safe space for culturally important ceremonial rituals to patients of First Nations, Metis, and Inuit People to help individuals along their healing journey.

PATIENT/CLIENT/RESIDENT EXPERIENCE

MyCare

Alongside Mackenzie Health's initiatives that promote access and equity, thoughtful consideration has gone into prioritizing the patient experience through the utilization of innovative technologies and

collaborative practices. Since May 2023, the deployment of MyCare bedside tablets across all inpatient units at Mackenzie Richmond Hill Hospital and Cortellucci Vaughan Hospital has enhanced our ability to interact with patients and receive feedback in real-time regarding their experience with care. Beyond providing fingertip conveniences like meal ordering and entertainment options, these tablets integrate seamlessly with patients' electronic medical records, offering our patients, tailored health information, from upcoming procedures to treatment details and educational videos. In addition, Patient Care Managers can receive patient feedback through surveys on the tablets and can address concerns in real-time. The MyCare tablet solution has provided patients with a much improved and more personalized health experience as shown in **Figure 1**. Patients' feedback has been overwhelmingly positive since the introduction of this initiative, with MyCare patient survey satisfaction scores for 2023 being 78% and 86% at Mackenzie Richmond Hill Hospital and at Cortellucci Vaughan Hospital respectively.

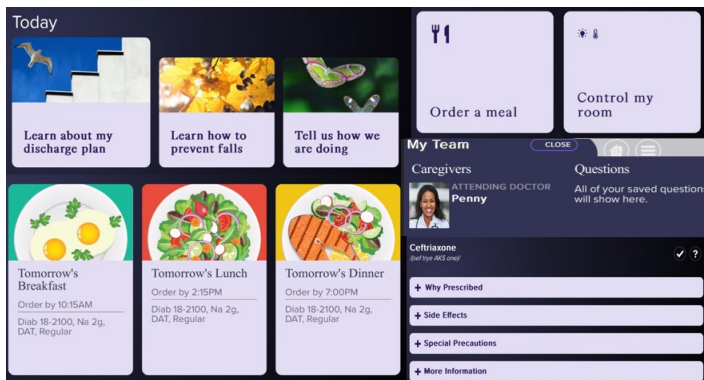


Figure 1. Patient's personalized view on MyCare Tablet

Patient Partner Program

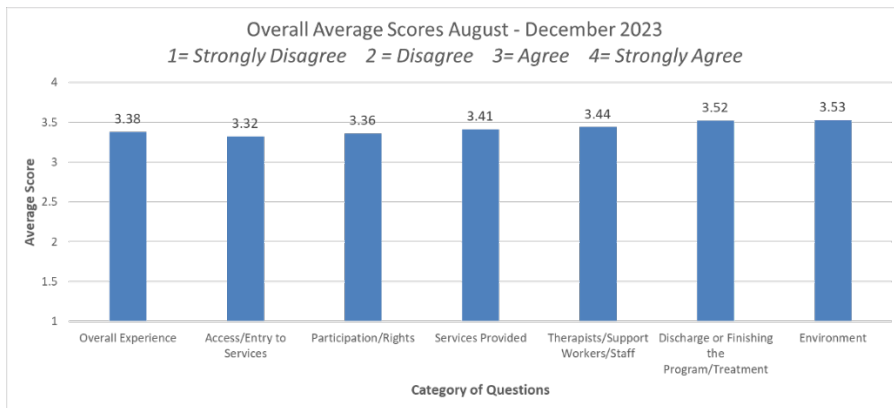
Mackenzie Health's Patient Partner Program continues to undergo a transformative evolution. Co-designed with current patient partners through in-person meetings, the program's multiyear work plan focuses on key areas essential to its advancement. In the past year, we've expanded enrollment into the Patient Partners program by 25%, building capacity and diversity. Patient partners have been embedded

into each program and sit on various organizational committees to ensure that the patient experience is woven into the initiatives that we introduce. The expanded roles and responsibilities of our members emphasize a collaborative approach, where members provide a patient lens as programs strive to address community needs. One recent example of this partnership is the co-design of the fall prevention education material post-discharge as part of the Fall Quality Aim initiative. The education material was successfully implemented in the form of a handout and online brochure in December 2023 and translated into the top 4 most spoken languages by our patient population.

Ontario Perception of Care Mental Health Survey

In August 2023, the Mental Health team at Mackenzie Health introduced the Ontario Perception of Care (OPOC) patient survey, developed by the Centre for Addiction & Mental Health. This is a reliable and valid survey in accordance with Accreditation Canada standards regarding patient and family centered care. The OPOC is a standardized way of gathering client feedback regarding the quality of care received, which plays a crucial role to promote program quality and improvement. While there are no established provincial benchmarks for the OPOC yet, due to the diversity in its application across various programs, its utility remains significant. To encourage patient participation, the care team invites patients to complete the survey voluntarily before their discharge. To facilitate this, a dedicated laptop is provided on the unit specifically for completing the OPOC survey. The results shown in **Graph 2**, are shared by leadership with the Unit Council to discuss identified initiatives and opportunities for improvement. For instance, in response to the feedback received regarding "services provided" where we received a positive response rate of 3.41, there has been a focus on offering more group activities including weekend and evening group sessions. Also, in relation to "participation and rights" that scored 3.36, based on the feedback received, better accommodations for patients with hearing difficulties were attained with comprehensive training for all staff on the accessibility features in Microsoft Teams. This important initiative was

instrumental in ensuring inclusivity for all patients with hearing difficulties. The OPOC survey has been well-received by patients, which is evident from the completion of 41 surveys by December 31, 2023. This positive response is a testament to the survey's effectiveness in enhancing patient care and the team's commitment to continuous improvement and patient satisfaction.

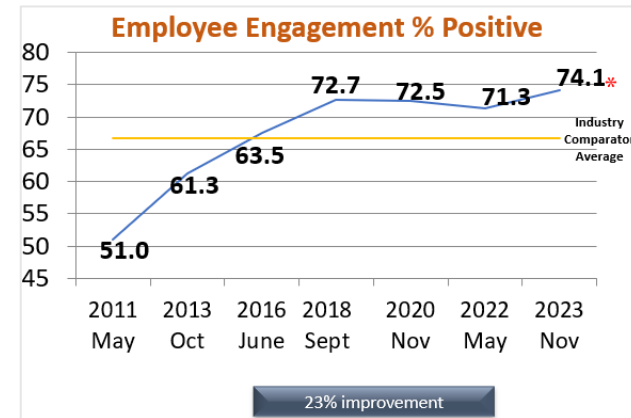


Graph 2. Survey results of OPOC between August 2023 – December 2023

PROVIDER EXPERIENCE

Mackenzie Health continues to enhance offerings to support an exceptional staff experience and develop strategies to help us manage the current health workforce challenges. We have established a Recruitment and Retention Council, which is focused on developing strategies to help us recruit and retain staff. In 2023, we expanded internal education opportunities across the organization, launched an employee referral program, enhanced wellness programming, and created a comprehensive communication plan. There has also been a concerted effort in expanding outreach to potential candidates through building school partnerships, participating in career fairs and increasing the organization's continuing education opportunities for clinical and non-clinical staff. In addition, we continue to focus on gratitude and staff recognition with the aim of improving a positive work culture. As shown in **Graph 3**, in September 2023, we asked our staff and physicians to complete the annual Employee and Physician

Experience Pulse Survey to obtain feedback on how they are feeling about working at Mackenzie Health. Mackenzie Health achieved a 74% engagement score, up from 71.3% from 2022. This is notably higher than the hospital sector average of 68.6%.



Graph 3. Employee engagement survey results between May 2011 – Nov 2023

Staff Development and Simulation Learning Experiences

At Mackenzie Health, we have implemented a holistic approach to staff development including initiatives such as internationally educated nurse orientation, new graduate support, increased student placements, and specialized training programs fostering cultural competence and effective communication. We have also boosted our student placements to not only serve as a potential hiring pipeline, but also to enrich the learning environment for both students and existing staff. We have invested in a robust internal training program for our Preceptors and Most Responsible Nurses to enhance their competency and leadership skills. We also offer in-house courses on advanced life support (ACLS, PALS, BLS, PEARS) to ensure staff readiness for emergencies and instill confidence; Program-specific simulated learning experiences which sharpens hands-on skills and critical decision-making; Introduction of a nurse residency program which offers structured support for new hires, fostering a sense of belonging and reducing turnover. Mackenzie Health has further committed to full implementation of Shared Governance through the refresh of all unit councils and proper structure to support clinicians leading their

practice. Collectively, these initiatives have created a supportive environment, promoting ongoing professional development, control over own practice and enhancing retention strategies in healthcare.

High Reliability Organization (HRO) Training

As our journey towards Zero-Harm continues, staff have a unique opportunity to receive High Reliability Organizing (HRO) training that enables them to learn and practice the Zero Harm Safety Behaviour Tools. These tools will help build the foundation to maintain a high reliability culture that fosters engagement and resilience among team members. Education and training on HRO continue to occur on an ongoing basis as part of the partnership with Press Ganey. As of December 15, 2023, we have a total of 52 trainers for Universal Skills, who have led the completion of 83 full day training sessions, resulting in 2593 trained staff members (60.9% of All Staff and Physicians), with approximately 1660 Staff and Physicians to be trained. The Universal Skills training includes the reliability and commitment to caring behaviours, skills and tools needed to continue building on our culture of safety, with a focus on compassionate and patient-centred care. The Just Culture Policy was implemented and communicated organization wide, to support an environment where everyone at Mackenzie Health feels safe and encouraged to speak up and discuss quality and safety with their colleagues and Managers without fear of consequences. Additionally, the Just Culture training was completed in October 2023, with approximately 140 leaders, and 100% of participants expressing satisfaction with the training and would recommend this training to others. We will continue the work with training everyone at Mackenzie Health on HRO principles and will focus on habit formation by implementing sustainable structures and processes, including refresher training, storytelling, visual aids, and many other methods to embed the learnings into practice.

SAFETY

Cause Analysis and Organizational Learning Program

In our Zero Harm journey, we are enhancing our safety culture by adopting an evidence-based Patient Safety Management Approach and Worker Health and Safety Management System in partnership with Press Ganey. As part of this initiative, Mackenzie Health established an effective cause analysis oversight model, redefined roles, and responsibilities for cause analysis, and refined the RLDatix Solutions system for more streamlined incident reporting and management. Senior Leaders were educated on the standardized root cause analysis (RCA) and apparent cause analysis (ACA) methodologies and a training program on RCA & ACA is being established for new leaders and potential refresher training as needed for existing leaders. This new process has allowed for systematic identification of contributing factors to patient and worker events and the opportunity to trend data over time to monitor the effectiveness of the program in the prevention of similar events.

Leadership Safety Huddles

In June 2023, Mackenzie Health implemented Leadership Safety Huddles, where leaders and their direct reports meet daily to actively maintain awareness of operations and provide direction on key safety issues. The purpose of the Leadership Safety Huddles is to enhance situational awareness of immediate issues impacting safety, enhance communication and accountability related to identification, mitigation, and escalation of potential or actual safety, and set a high reliability mindset across the organization. **Figure 2** shows the three-tiered model implemented to provide clear direction about prioritization, help identify problem owner and designate an expected time for resolution. Tier 1 involves Managers leading the unit huddles with front line staff, Tier 2 is where Managers escalate safety concerns to Directors, and Tier 3 is where Directors report to the Senior Leadership Team lead as appropriate. Leadership Safety Huddles allow department leaders to concisely report main safety issues affecting their department and ask for follow up actions necessary, by following a look back, look ahead and follow-up report out structure. This initiative aligns

with our HRO principles and our goal towards achieving Zero Harm.

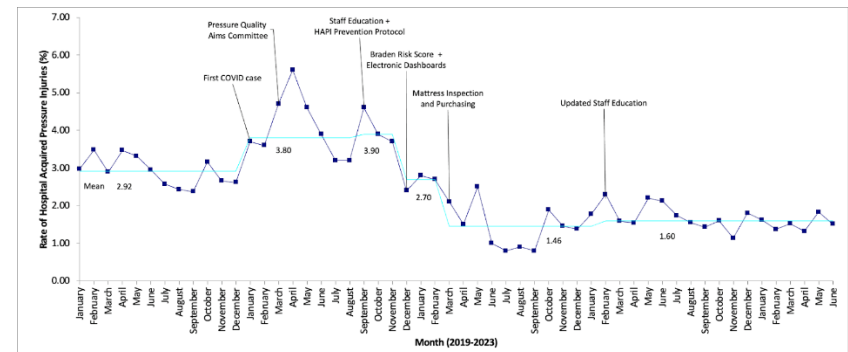


Figure 2. Structure of Leadership Safety Huddles

Pressure Injury Prevention

In 2020, the COVID-19 pandemic coincided with increased Hospital Acquired Pressure Injury (HAPI) rates across healthcare institutions, including our hospital system. In response to rising HAPI rates, we established a Quality Aim to reduce HAPIs stage II and above by 50% over three years. An interprofessional Quality Improvement (QI) approach to HAPI reduction was implemented that consisted of fostering a governance and accountability structure for HAPI monitoring to ensure effective prevention strategies are undertaken; building capacity across the multidisciplinary team in HAPI prevention techniques and practices including simulation training, MyLearning modules for physicians, and onsite bedside training by vendors for frontline nurses. In addition, changes in clinical practice were implemented based on evidence-based strategies, Braden risk assessments were performed more frequently, and the Electronic Medical Record (EMR) system was optimized to reflect the HAPI prevention protocol. Applicable intervention strategies were available based on the sub-scores of the Braden assessment allowing for a standard approach to HAPI prevention. Additionally, an integral component was implementing a proactive approach for surface maintenance and replacement. As shown in **Graph 4**, prior to the pandemic, HAPI rates were 2.92% for admitted patients and from January 2022, the mean stabilized at about 1.60% reaching as low as 1.2% in December 2023. The

working group will continue to implement initiatives over the next year that are reflected in the workplan.

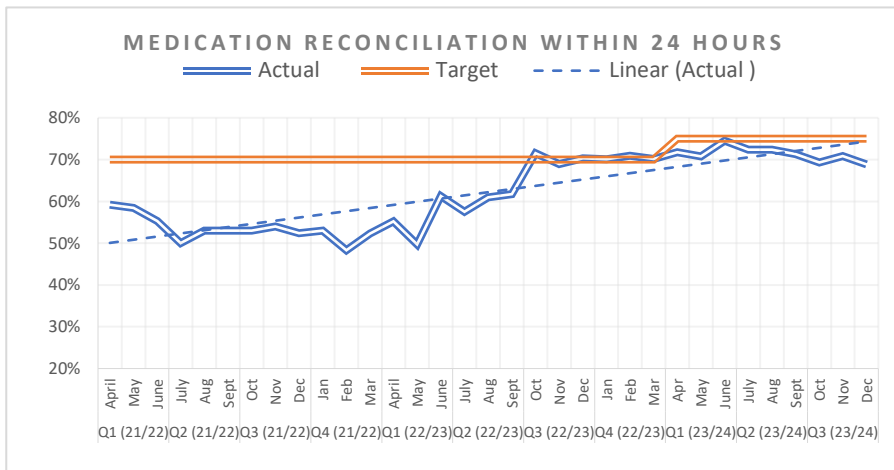


Graph 4. HAPI rates trend from January 2019 – June 2023

Medication Reconciliation

Medication Reconciliation was identified as one of the 5 Quality Aims of the organization. The working group has been working over the past four years to implement change ideas that would improve compliance. One of the key change ideas involved validation and development of reliable dashboards that are leveraged to ensure medication reconciliation is completed close to the time of admission (within 24 hours). In addition to focusing on creating corporate visibility to compliance, the team created standardized educational materials tailored to the needs of the interdisciplinary team members who are responsible for reconciliation; MyLearning module for physicians. Process improvement opportunities were identified in key areas where compliance was low to build electronic triggers, enhance visibility to gaps in documentation and optimize the sequencing of EMR tools to facilitate documentation and workflows. Pharmacists' full scope of practice was leveraged through implementation of a policy enabling pharmacist to adapt medication orders to support medication reconciliation. The team is now focusing on building accountability within Program Quality Councils for the ongoing monitoring and process improvement of medication reconciliation compliance and quality. **Graph 5** shows the initial target at the onset of the quality aim was 70% and was achieved in fiscal year

2022/23. The changes showed sustained performance and the target for 2024/25 was subsequently increased to 80%.



Graph 5. Medication compliance report between April 2021 – December 2023

Workplace Safety – Musculoskeletal Injuries

Alongside patient safety, Mackenzie Health is committed to ensuring that our workplace is safe for our staff, physicians, and volunteers. In response to the Ministry of Labour's Health and Safety Compliance Campaign, we have concentrated our efforts on decreasing musculoskeletal injuries through enhanced patient handling techniques and an Injuries Prevention program. Post-evaluation with key clinical stakeholders including the Joint Health and Safety Committee (JHSC), we identified a need to provide hands-on refresher training for staff hired between 2020-2023. We developed an education module with SE Health that focused on patient transfer and mechanical lift use. Delivery of the refresher to clinical staff began in November 2023 and has already led to a 5% reduction in MSK injuries. Additionally, we are implementing a pre-use inspection checklist for mechanical lifts, ensuring compliance and safety in their operation.

Distinctions and Awards

Accreditation

Mackenzie Health adheres to stringent standards and underwent three separate Accreditation surveys in 2023. Successfully completing the Qmentum on-site survey, Mackenzie Health continues to be Accredited with Exemplary Standing under the sequential Accreditation program, demonstrating excellence in meeting Accreditation Canada standards for quality and safety in health care. In addition, Mackenzie Health achieved Distinction in Stroke services from Accreditation Canada, the highest level that can be awarded, in Acute and Inpatient Rehabilitation Stroke services. Our lab program successfully completed its mid-cycle review and maintained its ISO standing. These achievements underscore Mackenzie Health's commitment to using accreditation to enhance the quality and safety of the services we offer our patients in our community. These recognitions are a testament to the commitment by our staff and physicians in delivering safe, high quality and patient-centred care.

Canadian College of Health Leaders Award

The Canadian College of Health Leaders, a national non-profit association of health leaders and corporate, academic, and organizational partners, chose Mackenzie Health as the 2023 Excellence in Patient Safety Award recipient. The award recognizes organizations and teams that are committed to improving patient safety practices within the health care environment through leadership, culture, best practices, innovation and change management expertise. In November 2019, we embarked on the journey towards Zero Harm and our goal as an organization was to avoid preventable harm by embracing a culture of high reliability from the boardroom to the bedside. This award is a testament to the dedication the organization has shown in working towards achieving this goal.

Digital Health Davies Award

Mackenzie Health recently became the only organization outside of the United States to receive the Healthcare Information and Management Systems Society (HIMSS) Nicholas E. Davies Award of Excellence for a second time in 2023. The award recognizes our innovative application of health information and technology to improve the way care is

delivered, create more positive patient outcomes, and support the overall health of the broader population. Mackenzie Health was evaluated on three clinical case studies that resulted in improved patient care: preventing hospitalization through a COVID-19 remote monitoring program, optimizing medication reconciliation so patients go home sooner, and supporting the healthcare system through the COVID-19 pandemic. This recognition is a testament on how Mackenzie Health is changing the landscape of healthcare innovation across the sector.

POPULATION HEALTH APPROACH

BACE Unit

Mackenzie Health is committed to prioritizing proactive initiatives through community partnerships to foster a healthier and thriving population. Initiated in April 2023, the 12-bed Behavioural Acute Care for the Elderly (BACE) unit specializes in caring for acute medical patients with an additional complication of delirium or dementia and/or have response behaviours. Patients in this program are supported from admission to discharge, bridging care from the hospital to the community. The initiative partners with LOFT whose members provide behavioural assessments and coordinate treatment plans for patients with responsive behaviours, and train Mackenzie Health staff on behavioural support strategies. Patients on this unit and their caregivers learn to identify cues for behavioural changes and supportive strategies to manage those changes, which helps improve safe and sustained discharge for patients to their homes or alternate care facilities. Since its introduction, there have been 92 patients who have received services in the BACE Unit, and from which, 22 of them have successfully been discharged to their homes and another 23 patients have been placed into a Long-Term Care facility, earlier than anticipated.

District Stroke Outreach

Mackenzie Health is proud to be home to the York Region District Stroke Centre (YDSC) and provide support and leadership to Oak

Valley Health, Southlake Regional Health Centre, and our community partners in York Region. The YDSC creates awareness within the community about stroke risk factors, helps the public recognize the signs of stroke and the need to seek emergency assistance. According to the World Health Organization (2024), 80% of strokes are preventable. This past year, the YDSC was proud to have participated in 21 educational outreach activities that included leading in-person health promotion at seniors' centers, wellness fairs and awareness booths and virtually joining library hosted events as a guest speaker on various stroke awareness programming. These events were open to the public with the goal of educating community members on various community driven topics around stroke prevention and post-stroke living. Additionally, the YDSC mentors nursing students from local universities, offering them a platform to learn about public health concepts and gain invaluable practical experience as educators.

Nurse Led Outreach Team

The Nurse Led Outreach Team (NLOT) plays a pivotal role in providing specialized and time-sensitive care to seniors in Long Term Care Homes (LTCHs) within the Western York Region. The NLOT team serves 10 homes that have over 1300 residents with a focus on preventing avoidable emergency room transfers, facilitating seamless inpatient discharges, and building capacity in LTCH staff through knowledge and skill translation. NLOT's collaborative efforts extend beyond LTCHs, engaging with Mackenzie Health's outpatient services to enhance timely access to elective care and consultations. Over the past three years, the interventions of the NLOT team have played a crucial role in diverting 4561 preventable ED visits. This comprehensive approach not only ensures continuity of care for seniors in LTCHs but also improves coordination between inpatient and outpatient services.

Next Steps

Mackenzie Health will continue with the majority of the 2023/24 QIP indicators. This year, four new indicators are included in our 2024/25 QIP. There are two new patient centered indicators and two new indicators related to workplace violence incidents resulting in harm,

and hospital acquired delirium. As outlined in the workplan, efforts will continue in improving quality indicators, supporting access and flow, and enhancing our staff & patient experience.

EXECUTIVE COMPENSATION

Mackenzie Health has a comprehensive executive performance-based compensation plan. The plan has an allocated pay for performance percentage that exceeds the industry average and extends to the Director level positions and above.

The performance-based plan is linked to the achievement of strategic goals and objectives and includes patient centered service excellence QIP targets. Total compensation, benchmarked to market rates of peer hospitals, equals base salary and performance-based pay, also referred to as 'at risk' pay. The at risk pay component is:

- Up to 15% of base pay for the President and Chief Executive Officer (CEO)
- Up to 10% of base pay for the Executive Leadership Team reporting directly to the President & CEO (Executive Vice President, COO & CNE; Vice President, Strategy & Program Support Services; Vice President, People Services & CHRO; Vice President, Finance & CFO; Vice President, Digital Health & CIO, and Vice President, Public Affairs & Stakeholder Relations and Chief Communications Officer)
- Up to 15% of base pay for the Vice President, Medical Planning & Chief of Staff (COS)

All management staff complete annual Accountability Agreements incorporating corporate strategic targets, program targets and individual targets. All Accountability Agreement objectives include QIP targets.

CONTACT INFORMATION

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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 27, 2024.

Board Chair - Fay Lim-Lambie



Board Quality Committee Chair – Azi Bolorchi



Chief Executive Officer – Altaf Stationwala



Chief Nurse Executive – Mary-Agnes Wilson

