



Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

May 12, 2022



OVERVIEW

Georgian Bay General Hospital (GBGH) is a community hospital, serving the North Simcoe area including Midland, Penetanguishene, Tay Township, Tiny Township and Christian Island, as well as southern Georgian Bay Township and northern Springwater Township. The population base of this area is approximately 55,000 and swells to more than 200,000 for six months of the year due to tourism and seasonal residents.

In addition to serving a large seasonal population, throughout the year GBGH also serves a large Francophone and Indigenous community which is an important role for our hospital.

GBGH's top priority is to provide safe, high-quality patient-centred care, as demonstrated by our Accreditation Canada survey result of Exemplary Standing in 2019.

As a consistently high-performing hospital, GBGH continues to drive measurable results supporting top quality care and outcomes. With an unrelenting focus on safety, we use evidence-based practices, processes and resources wisely and are guided by an ethical decision-making framework. GBGH continues to monitor progress and publicly report on our performance to demonstrate accountability, a commitment to transparency and continuous quality improvement.

GBGH's annual Quality Improvement Plan (QIP) represents our formal, public commitment to continually improving the quality and safety of the care our hospital provides. The QIP and our hospital's

strategic plan are designed to be mutually reinforcing. Each of the quality improvement initiatives that comprise the Quality Improvement Plan contribute to our organization's overall strategy and support at least one of our three strategic themes - Engagement and Inclusiveness, Quality and Safety, and Accountability and Sustainability.

REFLECTIONS SINCE YOUR LAST QIP SUBMISSION

Although last year's QIP was paused while hospitals focused on the impact of the COVID-19 pandemic, GBGH has remained committed to ensuring safe quality care.

While new QIP metrics were not developed, we continued measuring and reporting the last submitted QIP's targets. Further, we continued our program quality meetings, our Quality Care Reviews and our Quality Care Committee. Using an in house continuous quality improvement methodology, we initiated quality improvement initiatives that focused on improving patient outcomes and finding efficiencies.

Last year, GBGH requested one of our regional partner's (Royal Victoria Regional Health Centre) Quality and Risk team for an objective evaluation of their Quality and Risk program. The goal was for GBGH to establish the best structure to deliver on its commitment to quality and safety while benefiting patient care. An assessment was conducted, including a review of structures, frameworks, processes and procedures. After a careful assessment, both partners concluded there was opportunity to leverage the

strength of the resources available in our partner's Quality and Risk program to support GBGH in optimizing quality, risk management, patient experience, privacy, legislation, patient relations, litigation and Accreditation. A dedicated resource works from GBGH supporting staff, physicians, and where applicable, patients. The remainder of the support work occurs at our regional partner site. Given the limited resources across the healthcare industry, both organizations see the value in the partnership.

PATIENT/CLIENT/RESIDENT PARTNERING AND RELATIONS

To ensure the safety of our patients, workers, and volunteers, we made the difficult decision to pause on-site volunteer activities during most of the pandemic. We continue to strengthen our Patient and Family Advisor pool who have remained steadfast partners for us.

Our mission is to improve the health of the communities we serve and our vision is exceptional care, every person, every time. We know we cannot deliver on those without the valued input of our Patient and Family Advisors.

PROVIDER EXPERIENCE

Not unlike hospitals across the nation, GBGH's staff have felt the impact of COVID-19 both professionally and personally.

The Executive Team and Foundation has an unwavering commitment to ensuring workers feel valued and supported during the last two years. Leveraging relationships with local vendors and

community partners, various events of gratitude have occurred.

Each year, GBGH's Wellness Committee organizes a Team Appreciation Week in June to celebrate our staff, credentialed staff and volunteers. This includes meals, events (trivia, escape room), guest speakers, entertainment, classes and gifts.

In September 2021, right before a major project launch and right after a challenging summer of covering for other staff so our team members could take much-deserved vacation, we held an additional recognition event entitled 10 Days of Gratitude. During this time, there were different activities, meals and giveaways for the team.

Throughout the year, leaders are invited to submit news about their team's celebratory and/or awareness day/week/month (i.e. Lab Week, Physiotherapy Month) for inclusion in the internal staff newsletter.

GBGH has also featured stories of staff who've gone above and beyond their role in a regular feature called 'Staff Spotlight'. These are included in the newsletter, washroom poster holders and screensavers.

Each year, we also celebrate staff and credentialed staff for their Years of Service. In lieu of no longer having our Awards Dinner since pre-pandemic, we have developed an electronic campaign to highlight our team members for their commitment to the hospital.

Annually, the GBGH Board of Directors also selects winners for the Board Awards of Excellence which are awarded in June at the Annual General Meeting. In 2021, the entire GBGH team received the Awards of Excellence for their combined efforts throughout the pandemic in every area of the hospital.

EXECUTIVE COMPENSATION

GBGH's Board of Directors is committed to strengthening the accountability of the hospital as an organization receiving valuable public funds. Four times a year we report publicly on key performance indicators and, annually, we share details of our executive performance plans. These are posted on the GBGH website.

GBGH leaders are held accountable for performance on strategic initiatives and metrics associated with the QIP on a monthly basis and integrate relevant action into action plans.

Each member of GBGH's executive team is evaluated on their ability to meet a wide range of performance targets. A portion of their compensation is directly linked to the achievement of the organization's Quality Improvement Plan targets.

CONTACT INFORMATION

Rachel Kean, Chief Quality and Privacy Officer
1112 St. Andrew's Drive
P.O. Box 760
Midland, ON L4R 4P4
Phone: 705-526-1300
keanr@gbgh.on.ca

OTHER

N/A

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 June 9, 2022



Board Chair

Sara Lankshear

Board Quality Committee Chair



Chief Executive Officer

Other leadership as appropriate
