

## **Quality Improvement Plan (QIP) Narrative (2024-2025)**



We make it possible.

#### Overview

Runnymede Healthcare Centre, with its 206-bed capacity, stands as a beacon of excellence in post-acute care, offering rehabilitation services to our patients. Our commitment revolves around delivering an outstanding patient experience and advancing innovative rehabilitation programs.

At Runnymede, our patient-centric approach is integral to our mission. We emphasize placing patients at the forefront of their care and decision-making, acknowledging the unique needs of older adults. Our dedicated team ensures comprehensive, compassionate care that promotes independence, dignity, and overall well-being.

Focused on becoming a center of excellence for aging and wellness, we continually strive to raise the bar on quality and safety. Runnymede is pleased to share its eleventh annual Quality Improvement Plan (QIP). This narrative briefly describes our key priority areas for improvement for 2024/2025 and highlights some of the achievements we experienced in 2023/2024.

## Indicators (2024-2025)

Ontario Health has mandated that healthcare facilities focus on the priorities below for 2024-2025 starting 1<sup>st</sup> April 2024. Based on this direction, Runnymede aims to achieve the following indicators under each of the priorities.

#### 1. Access and Flow

A high-quality system provides people with the care they need, when and where they need it. Indicator:

- Reduction in the Alternate Level of Care (ALC) Rate
- Increase and Maintain Occupancy Rate >95%

## 2. Equity

Advancing equity, inclusion, and diversity and addressing racism to reduce disparities in outcomes for patients, families, and providers is the foundation of a high-quality system.

Indicator:

• Percentage of staff (executive-level, management, or all) who have completed relevant equity, diversity, inclusion, and antiracism education

## 3. Experience

Better experiences result in better outcomes. Tracking and understanding experience is an important element of quality.

Indicator:

• Percentage of respondents who responded "completely" and "quite a bit" to the following question: "Did you receive enough information from hospital staff about what to do if you were worried about your condition or treatment after you left the hospital?"

## 4. Safety

A high-quality health system ensures that people receive care in a safe and effective way. Indicator:

• Increase in Workplace Violence Reporting.

#### Patient-Centric Initiatives in 2023

Over the span of two years, Runnymede has witnessed significant strides in enhancing patient experience, as evidenced by key success indicators in patient experience obtained from a survey reflecting the sentiments of our patients during their hospital stay. Below are some noteworthy improvements in patient responses in quarter three (Q3) of 2023/24; the majority of these areas have doubled in satisfaction level when compared to the patient satisfaction results from 2021.

Patient Experience	% achieved
Good Communication Between Staff	88%
Got Information Needed About Condition and Treatment	90%
Got Support Needed with Anxieties/Fears	75%
Involved in Decisions About Care/Treatment	86%
Got Help from Staff When Needed Attention	100%
Had a Clear Understanding About All Prescribed Medications	90%
Overall Rating of Hospital Experience	92%

The improvements above reflect Runnymede's unwavering commitment to elevating patient care, fostering better communication, and ensuring a more compassionate and supportive environment. In addition to our notable quality accomplishments, Runnymede has also improved its patient outcomes, reflected through our Key Performance Indicators. Noteworthy achievements include a reduction in Length of Stay, an increase in the Case Mix Index, and an increase in Functional Independent Measure scores. We were able to achieve these outcomes by implementing several Quality Improvement Initiatives, a few of which are listed below:

# Patient-Centric Initiative – 1: HEART (Healthy Engagement of Older Adults in Rehabilitation Therapy)

# Project Leads: Karimah Alidina, Chief Nursing Executive and Phuntsok Namgyal, Director, Operational Effectiveness and Excellence

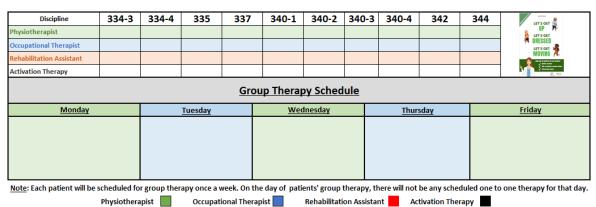
Using a multi-dimensional approach, Runnymede delved into understanding the current state of the Low Tolerance Long Duration (LTLD) rehabilitation program and uncovered a few opportunities to enhance staff and patient experience.

Guided by the philosophy of **HEART**, Runnymede integrated the "patient's voice" by having the patient/family participate in designing the LTLD program. Through this redesign, Runnymede was able to implement the following:

- Introduction of evidence-based group therapies, including circuit training, vestibular training and strengthening training. Preliminary survey results showed that 86% of the patients were satisfied with group rehabilitation therapy and found group therapy beneficial to achieving their rehab goals.
- Early identification and documentation of Patient SMART Therapy Goals that has allowed us to optimize patient treatment plans and empower our staff and patients.
- Optimal use of technology has allowed us to reduce redundancies and improve system efficiency. For example, by using automated reports, we have noticed a significant increase in therapy minutes provided to patients.
- The introduction of therapy time boards in the LTLD program enhanced communication among staff, patients, and families, enabling easy access to daily schedules and promoting collaboration among interdisciplinary teams.

THERAPY BOARD - 3RD FLOOR WEST (Break Time 1300hrs to 1400hrs)											
306	308	310-1	310-2	312-1	312-2	314-1	314-2	316-1	316-2	318	320

Discipline	322-1	322-2	324-1	324-2	326	328	330-1	330-2	332-1	332-2	334-1	334-2
Physiotherapist												
Occupational Therapist												
Rehabilitation Assistant												
Activation Therapy												



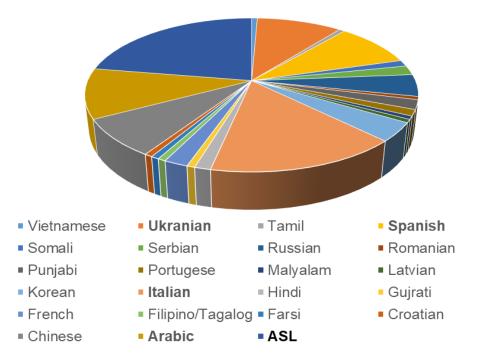
## Patient-Centric Initiative – 2: Introduction of Voyce

## Project Lead: Karimah Alidina, Chief Nursing Executive

Runnymede introduced an innovative technology, "Voyce," that connects our staff and patients with a medically-trained interpreter in seconds. Voyce provides on-demand access to qualified medical interpreters in over 240 languages and dialects, including American Sign Language (ASL), Quebec Sign Language (LSQ), and Indigenous languages such as Cree and Ojibway. Voyce interpreters can be reached 24/7, often in 30 seconds or less, through the Voyce App via remote video or audio calls. Voyce abides by Canadian privacy laws

(PHIPA), and interpreters are trained to ensure interpretation accuracy and efficiency, specifically for healthcare settings.

Since its launch in March 2023, many patient sessions have been conducted using 23 or more languages. The top languages requested were ASL, Italian, Arabic, Ukrainian, and Spanish. On average, it took 23.7 seconds for staff to connect with an interpreter of the preferred language. In June 2023, the Voyce app was installed on each patient's bedside terminal to facilitate easy access.



#### Languages Pairs Served

#### Patient-Centric Initiative – 3: Pharmacy Led-Discharge Medication Reconciliation

# Project Leads: Karimah Alidina, Chief Nursing Executive and Simon Oh, Advanced Practice Leader, Pharmacy

Discharge medication reconciliation is an integral part of the discharge process for patients leaving the hospital. The process reconciles home, acute care and Runnymede's medications into the prescription and home medication list. At Runnymede, the compliance of discharge medication reconciliation is 100%; however, opportunities to improve the quality of prescriptions and home medication lists were identified.

The Pharmacy-Led Discharge Medication Reconciliation Project was initiated by introducing the "Draft" function on Meditech that empowers pharmacists to be actively engaged in the medication reconciliation process. Our pharmacists create draft reconciliations, provide detailed rationales for new or discontinued medications, ensure accurate day supplies, and incorporate Limited Use codes for seamless coverage. The final draft is reviewed by the prescriber, allowing them to review, modify, and/or approve the medication list and home prescriptions as they see fit.

In summary, the Pharmacy-Led Discharge Medication Reconciliation Project demonstrates a strategic and collaborative approach to improving the quality of prescriptions and home medication lists, with a clear focus on patient safety and continuity of care.

## Patient-Centric Initiative – 4: Implementation of SentinelOne "Rollback" Functionality

#### Project Leads: Kevin Fernandes, Chief Technological Officer

Runnymede is committed to protecting our patients' Personal Health Information (PHI) through the implementation of the SentinelOne "Rollback" capability.

In June of 2023, the "Rollback" functionality went live and provided another level of defence against malware by allowing an infected computer to be automatically "Rolled Back" to a copy of the software before the cyber attack. The result was a computing infrastructure demonstrating increased resiliency to malware as well as the capacity to recover quickly in the event of an attack. Both are excellent examples of Runnymede's continual commitment to reducing cyber risk and improving the overall security of our patients' data within our Electronic Medical Records.

In conclusion, these patient-centric initiatives underscore Runnymede Healthcare Centre's unwavering commitment to quality, safety, and an exceptional patient experience. Our continuous pursuit of innovation ensures that we provide the highest standard of care, driving positive outcomes for our patients.

## **Staff Centric Initiatives in 2023:**

The staff engagement scores reveal that Runnymede has achieved its highest score since 2015, with almost 75% of our staff feeling engaged at work. This improvement is attributed to our commitment to listening to our staff and collaborating with them on issues that matter the most. Several staff-centric initiatives were implemented in 2023, including the following:

## Staff Centric Initiative 1: Promoting Just Culture

## Project Lead: Shakil Ahmad, Director Quality and Risk

Runnymede implemented an incident management framework and toolkit for patient safety incidents under a just culture. This framework emphasizes a balanced perspective that distinguishes between human error, at-risk behaviour, and reckless behaviour, fostering an environment where individuals feel comfortable reporting incidents without fear of punitive measures.

In addition, the workplace violence (WPV) reporting process was enhanced to augment a supportive and inclusive Workplace. Researchers have reported WPV as one of the significant reasons for employee dissatisfaction and a reduction in employee performance (Chao et al., 2015). Runnymede aimed to increase reporting of all WPV incidents, review them, and ensure that mitigation methods are employed to prevent or reduce occurrences. This will directly result in less stress or burnout for staff. To promote a just culture and increase WPV reporting, Runnymede has updated the WPV policy and strategically placed WPV posters across the Hospital and in the patient admission package. Collaboration with staff also resulted in the completion of a WPV staff survey and the creation of a collaborative action plan to mitigate the risk of WPV. This innovative approach resulted in obtaining an award from Health Excellence Canada.

#### Project Leads: Karimah Alidina, Chief Nursing Executive; Maria De Leon, Director Patient Care & Phuntsok Namgyal, Director Operational Effectiveness and Excellence

Runnymede implemented a schedule change for registered nurses, physiotherapists, and occupational therapists to promote work-life balance. These initiatives, such as reducing weekend work and introducing 12-hour shifts, have resulted in improved staff retention and work-life balance.

#### Staff Centric Initiative 3: Engagement with Front-Line Staff

#### Project Lead: Karimah Alidina, Chief Nursing Executive

#### Leadership Rounding/Rounding for Outcomes:

Leadership Rounding is a structured method for gathering valuable insights from our staff. It provides a platform for employees to discuss their work environment openly and for the leadership team to celebrate successes.

#### **Coffee with Karimah**

An informal, recurring event where staff can have one-on-one discussions with the Chief Nursing Executive in a relaxed atmosphere. These sessions have provided an opportunity for staff to have one-on-one and candid discussions with their senior leaders.

#### Staff Centric Initiative 4: Professional Development of Runnymede Leaders

## Project Lead: Tony Bavota, Chief Operating Officer and Karimah Alidina, Chief Nursing Executive

- Leadership Contract: Runnymede's leadership team participated in a session featuring Dr. Vince Molinaro, focusing on "The Leadership Contract" principles.
- Working Minds Training Program: A full-day session dedicated to promoting mental health awareness and reducing stigma within the workplace.
- **Hardwiring Excellence Session**: A session focusing on improving organizational performance and promoting a positive work environment.

These sessions were crucial in equipping our leaders with the knowledge and tools necessary to foster excellence within our organization.







## **Executive Compensation**

None.

#### Sign-Off

I have reviewed and approved our organization's QIP Narrative for 2023-2024.

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Nick Migliore Board Chair

David Hawkey Quality Committee Chair

Connie Dejak

President & Chief Executive Officer and Secretary-Treasurer to the Board of Directors