

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

February 22, 2023



HÔPITAL
NOTRE-DAME
HOSPITAL (HEARST)



**Ontario
Health**

OVERVIEW

L'Hôpital Notre-Dame Hospital (Hearst) is a fully accredited 44 beds hospital. We provide a comprehensive list of services for both in and out patients within the town of Hearst and its surrounding communities. The hospital serves a population of approximately 8,500 people who reside within the radius of up to 135 kilometers. The Constance Lake FIRST NATION community also receives health care services from the hospital.

Everything we do at Notre-Dame Hospital revolves around patient-centered care, quality of services, partnerships & collaborations with local organizations and also within the neighboring towns, hospitals, and ministry organizations to have more access and maintain our local medical services. We have been raising funds privately in order to expand and maintain medical services in our community like physiotherapy and Oncology respectively. This will help alleviate travelling over 1200kms to obtain such services and in turn improve patient care. A locum medical clinic has also been funded by our hospital for the last 1.5 years in order to serve over 50% of our community who no longer have a family physician. The opening of the locum medical clinic was aimed to help alleviate Emergency Room overcrowding and to ensure easier access for patients to a Physician or Nurse Practitioner. Our hospital has registered for the Emergency Department Locum Program to help avoid any Emergency Department closures as this would be catastrophic for our small community as our closest Emergency Department is over 90kms away. In order to maintain our hospital's services and avoid delays and closures of departments, our hospital has increased the number of agency personnel providing front line care. Our facility has been exchanging services for Surgery, Anesthesia, Hospitalist and Obstetric physician schedules in order

to share coverage when it is lacking at one site. We work closely with Timmins and District Hospital to send some of our nursing staff to learn and practice specialized skills in order to maintain their competency. Notre Dame Hospital has been researching and applying for all programs that we are qualified for in order to both improve our facilities infrastructure, partnering to share out IT systems to facilitate patient medical record access, decrease our carbon footprint, reduce and recycle our energy, support out staff, and expand our range of medical services to our community.

PATIENT/CLIENT/RESIDENT ENGAGEMENT AND PARTNERING

Patient Partnership continues to be difficult. We are still actively seeking an ombudsman since our last ombudsman resigned from her position last March 2022. We currently have two patient representatives who take part in some of our Hospital Board Committees. Since our last QIP submission we have only been able to collect one patient story that was presented to the board. Since we are a small community, patients and family do call the hospital and the CEO to report any issues they or their family members are or have experienced. We also have a bi-monthly meeting with members of the Constance Lake First Nations and some of the Jane Mattinas Health Centre Staff to ensure open communication and to address immediate needs.

Notre Dame Hospital's Quality Working Group and Quality Care Committee of the Board have been working on implementing a patient focus group that will meet at least annually to engage with the community/patients on hospital projects in the future. This was not possible during COVID as we were restricting all visitors when we were experiencing high number of cases in the community and staff.

PROVIDER EXPERIENCE

We continue to see employees retiring from the hospital at 55, once eligible as a result of exhaustion. COVID-19 as well as other respiratory illnesses continue to affect staff which leave some departments short staffed at times. Regular meetings are held with managers, the union, schedulers and employees to seek recommendations for both temporary and long-term solutions to help protect staff from burnout. The union was on board with us

having staff remain at home and on call when the unit was not overloaded with patients and the staff would then be called in if patients were admitted during the shift. This solution helped prevent working too many overtime shifts when no one else was available. This solution, however, was only used a few times as it is entirely dependent on patient admissions and patient load on the floor. Notre Dame Hospital also has over 20% agency staff to help cover our services and we are actively recruiting staff using every tool at our disposal. A training room has been built in order to provide local RPN and PSW students at the local college to do their placement and training on-site to help with our recruitment efforts. Letters of intent to employ as well as summer student positions have been used as well in order to help with recruitment once graduated from their programs.

Some of our fun activities have been restarted in attempt to lift the staff's spirits and recognize their dedication. Some of these activities have included a seasonal door decorating contest around Christmas time, a staff appreciation BBQ in the summer prepared by the summer students as well as a holiday breakfast which was prepared by Senior Leadership and members of the board. A profession appreciation recognition has also been implemented in order to thank and ensure that all employees are appreciated for their hard work within the hospital. These events all had excellent participation and were appreciate by the staff. The CEO tours all departments of the hospital on a regular basis and staff do come talk to her in her office to try to find solutions to arising issues when their managers are not around. The CEO has also on repeated occasions in the last few years baked cakes for the departments when they went above and beyond when we faced different crisis in the hospital to show acknowledgement of their actions and as a

personal thank you.

WORKPLACE VIOLENCE PREVENTION

A Public media campaign was launched to be kind to our staff. 5' X 3' posters were made for our Emergency Department to promote that violence and abuse of staff will NOT be tolerated. Police officers come to the hospital and do walkabouts a few times quarterly to help to reinforce that workplace abuse and violence will not be tolerated. We have worked out agreements with our local Police Department to have certain known abusive patients to be escorted for treatment at the Emergency Department for medication renewals as they do not have family physicians and must use our Emergency Department for health services. More mock and table talk code exercises are being performed to ensure that staff are comfortable with their roles to play in any code that would/could result in violence or abuse. Debriefing sessions with local Social Workers are also offered to affected staff.

PATIENT SAFETY

An incident reporting software called RL6 is used at our facility. The software generates reports that are reviewed with staff and reviewed at our Quality of Care Board Committee once every 6 weeks. Managers review the incidents, frequency and possible trends with their staff in a non-punitive way to ensure that reporting is honest and that solutions can be found. From this, a "back to the basics" training program will be implemented.

HEALTH EQUITY

We are a northern rural mostly Francophone Community which includes Constance Lake First Nations (CLFN) community. Our hospital has employed a Patient Navigator and First Nations Liaison

Officer to hold regular meetings with members of the Jane Mattinas Health Centre to address and foresee any issues with communication, training and/or care being provided at the hospital. Being that 85% of our community are Francophone and that most of our Agency personnel deployed do not speak French, we ensure that they are scheduled to work with someone who is able to translate when patients need or request to have information in their language as we have a French designation. Notre Dame Hospital abides by its Code of conduct and Ethics with respect to a healthy workplace that is free from discrimination and provides equal employment opportunities regardless of race, color, religion, sex, gender, sexual orientation etc... As such, over 50% of our staff/agency personnel hired in the last few years are multicultural or LGBTQ. As one of our family physicians in town was in a same sex marriage and is loved and accepted with open arms, this alleviates a lot of anxiety with our personnel about their acceptance within our working family.

Since our community only has one long-term care facility with a low turnover rate, we have designated 21 bed in our facility for ALC patients. These 21 beds are being re-designated as chronic cared bed in order to keep our ALC patients in our community. Some of these patients have been living in our facility for many years and these rooms have become their homes and the staff their "extended family". This solution has allowed us to prevent sending these patients away with Bill 7 coming into effect.

Notre Dame Hospital has been a part of many working groups with the town of Hearst, counselling services, Family Health Team, Paramedics etc... to focus on addressing homelessness, food security other non-medical social needs. Our facility also provides

meals on wheel services and the Aging at Home program for our community as well as neighboring communities.

EXECUTIVE COMPENSATION

The purpose of performance-based compensation is the following:

- To drive better performance and improve the quality of patient care
- To establish clear performance expectations
- To create clarity about expected outcomes
- To ensure consistency in application of the performance incentive process
- To drive accountability of the team to deliver on the Quality Improvement Plan
- To enable team work and a shared purpose

The Executives who have participated in the plan and are subject to the compensation-at-risk include:

- Chief Executive Officer
- Chief Auxiliary Officer
- Chief Financial Officer
- Chief Information Officer
- Chief Nursing Officer

Compensation of our executives is tied to the achievement of the quality improvement performance targets. Our executives' compensation is linked to performance through a performance pay plan. Overall, there is a 5% total at-risk compensation for those listed above.

CONTACT INFORMATION

Liza Fortier
Directrice général/Chief Executive Officer
Hôpital Notre-Dame Hospital (Hearst)
1405 Edward Street/Postal Bag 8000
Hearst, ON P0L 1N0
FortierL@ndh.on.ca
705-372-2907

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

Board Chair

Board Quality Committee Chair

Chief Executive Officer

Other leadership as appropriate
