Quality Improvement Plan (QIP) Scorecard 2021/22

Issue	Quality Dimension	QIP Outcome & Process Measures	Target	FY 2021/22 Quarter 1 (Apr-Jun)	FY 2021/22 Quarter 2 (Jul-Sep)	FY 2021/22 Quarter 3 (Oct-Dec)	FY 2021/22 Quarter 4 (Jan-Mar)	Comments
Safe and Effective Care	Safe	**Number of Reported Workplace Violence Incidents**	**0 incidents**	1	1	6	1	Underrepresentation in Repoting?
		Workplace Violence - Action Plan		*Action Plan Progress:*				
		Physician training: workplace violence, harassment & bullying, working alone *	50% of physicians trained by end of FY 2020/21 Q1	Completed 80% in FY 2021/22				Includes all Active and Courtesy Physicians
		Incorporate new training materials on workplace violence, harassment & bullying, and working alone into new employee orientation *	Complete by end of FY 202/21 Q1	Completed in FY 2020/21				
		Board education: workplace violence, harassment & bullying *	75% of Board Members trained by end of FY 2020/21 Q2	Completed 100% in FY 2021/22				
		Conflict management training; responsibility of employees in resolving conflict *	75% trained by end of FY 2020/21 Q3 in Fall For All training	Completed in FY 2020/21				
		Reporting blitz/posters to increase awareness of importance of reporting *	Complete by end of FY 2020/21 Q3	Completed in FY 2020/21				
Timely and Efficient Transitions	Effective	**% of Repeat Emergency Department (ED) Visits for Mental Health**	**19%**	25%	11%	19%	N/A	For each quarter, the data period includes the reporting quarter and the last 30 days of the previous quarter MOH deadline(June 10)
		Reduce Mental Health Repeat ED Visits - Action Plan		*Action Plan Progress:*				
		Ensure SHHA representation at OHT planning meetings as Mental Health & Addictions is focused population *	SHHA attendance >= 80%	100%	100%	100%	100%	
		Review SHHA re-visit data & summarize in report for Board Quality Committee and MAC *	Complete by end of FY 2020/21 Q4	Completed	Completed	Completed	In Progress	Once reported to QUR Committee -it will be reported to MAC
	Timely	**% of Discharge Summaries to Primary Care Physician within 48h of Discharge***	**65%**	94%	86%	81%	94%	
		Improve Discharge Summaries Turnaround - Action Plan		*Action Plan Progress:*				
		Re-establish and reinforce support and confidence of physicians-- adjust statement in discharge summary *	Complete by June	Completed in FY 2020/21				
		Report achievements/ outcomes to Medical Advisory Committee - Quarterly report (QIP Scorecard) to MAC *	Begin after end of FY 2020/21 Q2	Completed	Completed	Completed	In Progress	Once reported to QUR Committee -it will be reported to MAC
Service Excellence	Patient-Centred	**Did You Receive Enough Information upon Discharge?***	**85% answer "yes, completely"**	80% (n=10)	67% (n=24)	67% (n=12)	83% (n=12)	Data Reliability with sample size? 12 surveys=0.56% of patient population (ED/Inpatients Discharges=2124)
		Improve Information at Discharge - Action Plan		*Action Plan Progress:*				
		Identify opportunities for improvement in discharge preparation and teaching - Continue implementation of discharge phone calls *	Discharge follow-up calls completed to 80% of discharges to home	97%	85%	60%	48%	This Quarter Includes the SHHA Covid-19 Outbreak
		Aim to more holistically address patient needs at and before discharge - discharge phone call template to include assessment for social isolation and outline referral options *	Complete by FY 2020/21 Q4	Completed in FY 2020/21				Directly address social isolation during our follow up phone calls/refer to appropriate resources as applicable
		Continue to learn about best practices in preparing for discharge and adopt one new practice from Transitions Between Hospital and Home playbook *	Minimum 1 new practice adopted by end of FY 2020/21	Completed in FY 2020/21				Standard work adopted for discharge rounds

* "pay at risk" indicator (including action steps taken and/or achievement of target)

Colour indicates performance relative to target that was in place for that time period

Legend

Achieved/ Exceeds Target	In Progress; Within 10% of Target	At Risk; >10% from Target