## 2019/20 Quality Plan

<b>Health Service Provider Name</b>	Head Injury Rehabilitation Ontario
Sector	

AIM: What are we trying to	accomplish?	MEASURE: How do we	e know that a ch	nange is an impr	ovement?			CHANGE: What changes	s can we make that will result in the improvement	s we seek?		
Quality dimension	Objective	Measure/Indicator	Population	Period	Current performance	Target	Target justification	Planned improvement initiatives (Change Ideas)	Methods	Process measures	Goal for change ideas	Comments
Which dimension does your quality initiative align with? (See definitions below)	What is the objective of the quality improvement initiative?	What is the indicator that will tell you whether an improvement in happening?	What population are you targeting for the quality improvement initiative?		What is the current performance in the time period specified?	What are you aiming for at the end of the fiscal year? What does the organization aspire to?	What is the rationale for selecting the target? How do you justify it? Provincial benchmark?, theoretical best?, Provincial Average?, Peer Leading Organization?	What initiatives will you put in place that will lead to the improvement being sought?		What measures will allow you to evaluate when an activity has been accomplished? Processes must be measurable as rates, percentages and/or numbers over specific timeframes		Additional Information?
	Reduce stage 2 or greater ratings on wound care protocol scale in residential	Number of wounds among residential clients		April 1 2019 - March 31, 2020	TBD	21	Target established based on last year's performance.		Involve each client's primary care provider to discuss client's history with wounds and wound prevention.	% of clients who have a history of wounds have met with their primary care provider to discuss history and prevention	1. 100% of clients who have history of wounds have met with their primary care provider	
SAFE									Education module on wound care prevention for staff who work with residential clients	% of staff who work with residential clients who have completed wound prevention training	1. 100% of staff who work with residential clients have completed training	
								·	Wound prevention plan will be reviewed with all clients who reported a wound in the previous year	% of clients who have a history of wounds have a wounds prevention plan	1. 100% of clients who have a history of wounds have a prevention plan in place	
	staff med admin	% of staff admin med errors amongst residential clients		April 1 2019 - March 31, 2020	TBD	0.19%	Target established based on last year's performance.	Staff retraining	Staff retraining after each med admin error	1. % of staff retrained within 2 weeks of identified error	1. 95% of staff are retrained within 2 weeks	
SAFE								Additional verification of med process completed	Second staff sign off that meds were completed	% of staff signatures on sign off documentation	1. 95% of completed signatures	
		% of client goal achievement	Community and Residential clients	April 1 2019 - March 31, 2020	TBD	60.00%	Target established based on last year's performance.	Education of staff around goal identification	Education module on goal identification	1. % of CFs/Managers receiving training	1. 100% of CFs/Managers complete training	
EFFECTIVE								Engagement of client and family	Participation in goal review meetings	1. % of completion of goal reviews with clients and family	1. 95% survey completion	

EFFECTIVE	Positive rating of over Quality of Life ABI score	% of completed of Quality of Life ABI	Community and Residential clients	April 1 2019 - March 31, 2020	70.00%	Target established based on last year's performance.	Education of staff around Quality of Life ABI	Education module of Quality of Life ABI assessment	1. % of CFs/Managers receiving training	1. 100% of CFs/Managers complete training
PATIENT CENTERED	Positive rating of how clients rate their overall care and services	Rating on survey	Community and Residential clients	April 1 2019 - March 31, 2020	90.00%	Target established based on last year's performance.	Group Patient and Family	Running a face-to-face focus group     The state of	# of face-to-face client and family focus groups completed  1. Number of staff reviewed patient and family engagement strategy	20 staff review and provide feedback on patient and family engagement strategy
TIMELY	Reduce wait times to access services in Outreach	Wait time to access services in Outreach	Community clients	April 1 2019 - March 31, 2020	7.5 months	Target established based on last year's performance.	New Outreach model	Evaluate the new outreach model	Number of focus groups with community CF:	1. 1 focus group with community CFs
TIMELY	residential clients to the most appropriate	Number of identified residential clients moved to the most appropriate care location	d clients	April 1 2019 - TBD March 31, 2020		Target established based on last year's performance.	Review opportunities for transition	Review opportunities through clinical rounds	Number of identified residential clients appropriate for transition	2/6 identified residential clients transitioned to most appropriate care location

Table 1: Defining elements of quality care								
Element	Patient meaning	Provider meaning						
Safe	I will not be harmed by the health system.	The care my patient receives does not cause the patient to be harmed.						
Effective	I receive the right treatment for my condition, and it contributes to	The care I provide is based on best evidence and produces the desired						
Effective	improving my health.	outcome.						
Patient centered	My goals and preferences are respected. My family and I are treated with	Decisions about my patient's care reflect the goals and preferences of the						
	respect and dignity.	patient and his or her family or caregivers.						
Efficient	The care I receive from all practitioners is well coordinated and efforts	I deliver care to my patients using available human, physical, and financial						
Efficient	are not duplicated.	resources efficiently, with no waste to the system.						
Timely	I know how long I have to wait to see a doctor or for tests or treatments	My patient can receive care within an acceptable time after the need is						
	I need and why. I am confident this wait time is safe and appropriate.	identified.						
Equitable	No matter who I am or where I live, I can access services that benefit me.	Every individual has access to the services they need, regardless of his or her						
	I am fairly treated by the health care system.	location, age, gender, or socio- economic status.						

SOURCE: Health Quality Ontario - Quality Matters: Realizing Excellent Care for All <a href="http://www.hqontario.ca/portals/0/Documents/pr/realizing-excellent-care-for-all-en.pdf">http://www.hqontario.ca/portals/0/Documents/pr/realizing-excellent-care-for-all-en.pdf</a>