

2021/2022 Quality Plan

Health Service Provider Name	Head Injury Rehabilitation Ontario
Sector	

AIM: What are we trying to accomplish?		MEASURE: How do we know that a change is an improvement?						CHANGE: What changes can we make that will result in the improvements 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 is happening?	What population are you targeting for the quality improvement initiative?	What is the time period representing the current performance?	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 step-by-step methods will you be using to track progress on the planned initiatives?	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	What is the numeric goal specifically related to the process measure? E.g. 100% compliance by Dec 31, 2015	Additional Information?
SAFE	Reduce stage 2 or greater ratings on wound care protocol scale in residential	Number of wounds among residential clients	Residential clients	April 1 2020 - March 31, 2021	4	<5	Target established based on last year's performance.	Engage primary care	1. Involve each residential client's primary care provider to discuss client's history with wounds and wound prevention.	1. % of residential clients services who have a high risk of wounds have met with their primary care provider to discuss history and prevention	1. 100% of residential clients who have high risk of wounds have met with their primary care provider	
								Education of staff around wound care	1. Education module on wound care prevention for staff who work with residential clients	1. % 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	
								Implement individualized prevention strategy	1. Wound prevention plan will be reviewed with all clients who reported a wound in the previous year	1. % of residential clients who have a high risk of wounds have a wounds prevention plan	1. 100% of residential clients who have a high risk of wounds have a prevention plan in place 2. 100% of residential clients will complete the skin assessment annually	
SAFE	Reduce number of staff med admin errors	% of staff admin med errors amongst residential clients	Residential clients	April 1 2020 - March 31, 2021	0.10%	<0.11%	Target established based on last year's performance.	Staff retraining	1. 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	
								Additional verification of med process completed	1. Second staff sign off that meds were completed	1. % of staff signatures on sign off documentation	1. 95% of completed signatures	
EFFECTIVE	Clients will achieve identified goals	% of client goal achievement	Community and Residential clients	April 1 2020 - March 31, 2021	68%	>67%	Target established based on last year's performance.	Engagement of staff and client	1. Participation of staff and clients in goal identification.	1. % of residential and outreach clients have identified goals	1. 100% of Residential and Outreach clients have identified goal/s.	
								Engagement of client and family	1. 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 after Brain Injury (QOLIBRI) score	% of completed of QOLIBRI: high, very high	Community and Residential clients	April 1 2020 - March 31, 2021	56%	>56%	Target established based on last year's performance.	Engagement of clients	1. Participation in QOLIBRI	1. % of CFs/Managers receiving training	1. 100% of CFs/Managers complete training
		Average, high, very high			85%	>84%					
PATIENT CENTERED	Positive rating of how clients rate their overall care and services and decisions about care	Rating on survey: Overall care and services	Community and Residential clients	April 1 2020 - March 31, 2021	88%	>87%	Target established based on last year's performance.	Client and Family Focus Group	1. Running focus group	1. # of client and family focus groups completed	1. 5 client and family focus groups
		Decisions about care			84%	>83%		Client and Family Engagement	1. Provide client and family opportunities for feedback and involvement	1. Number of requests for feedback on agency protocols	1. 3 requests for feedback on agency protocols
TIMELY	Reduce wait times to access services in Outreach	Wait time to access services in Outreach	Community clients	April 1 2020 - March 31, 2021	4.3 months	>4.5 months	Target established based on last year's performance.	Outreach model	1. Evaluate the outreach model	1. Number of clients following outreach model	1. 80% of clients follow outreach model
TIMELY	Transition identified residential clients to the most appropriate care location	Number of identified residential clients moved to the most appropriate care location	Residential clients	April 1 2020 - March 31, 2021	3 clients	2 clients	Target established based on last year's performance.	Review opportunities for transition	1. Review opportunities through clinical rounds	1. Number of identified residential clients appropriate for transition	1. 2/5 identified residential clients transition 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 improving my health.	The care I provide is based on best evidence and produces the desired outcome.
Patient centered	My goals and preferences are respected. My family and I are treated with respect and dignity.	Decisions about my patient's care reflect the goals and preferences of the patient and his or her family or caregivers.
Efficient	The care I receive from all practitioners is well coordinated and efforts are not duplicated.	I deliver care to my patients using available human, physical, and financial 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 I need and why. I am confident this wait time is safe and appropriate.	My patient can receive care within an acceptable time after the need is identified.
Equitable	No matter who I am or where I live, I can access services that benefit me. I am fairly treated by the health care system.	Every individual has access to the services they need, regardless of his or her location, age, gender, or socio- economic status.

SOURCE: Health Quality Ontario - Quality Matters: Realizing Excellent Care for All

<http://www.hqontario.ca/portals/0/Documents/pr/realizing-excellent-care-for-all-en.pdf>