

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

June 29, 2022



OVERVIEW

The University of Ottawa Heart Institute is a unique academic facility with a responsibility to provide specialized cardiac care to patients of the Champlain region, the province of Ontario and nationally for selected procedures . We believe excellent care is achieved by supporting a full continuum of care from prevention, to acute care and rehabilitation. We work in partnership with facilities in our Local Health Integration Network to ensure all patients have access to care while continuing to support care close to home. Supporting excellent care, leadership in ground breaking research and the education of future health care professionals are our main goals. In recent years, our focus has been managing operations and maintaining quality of care in the midst of a global pandemic.

PATIENT/CLIENT/RESIDENT PARTNERING AND RELATIONS

After a brief interlude during the Covid-19 global pandemic, the University of Ottawa Heart Institute Patient Partnership Committee (UPP) reformed to combine leaders, staff and patients from clinical care and research instead of operating two separate committees. The UPP provides insight and advice on the selection of Quality Improvement Projects and we included several initiatives that are co-lead by patients on UPP in our QIP this year.

During the Covid-19 Pandemic, the UOHI expanded and formalized its Patient Engagement Program to include formal patient partners, available on demand to join project teams, working groups and to consult on the development of education, surveys and policies. We have patient members on many committees, including on our Board Quality of Care Committee, to ensure that the patient voice is heard at all levels of our organization. Patient Partners on UPP and as part of our Patient Engagement Program regularly provide feedback on quality improvement initiatives and their partnership is mandatory for projects registered through the Quality Department. Heart Institute staff and patients work together on quality initiatives throughout the year. Some recent initiatives include: Review and updates made to the UOHI Patient Rights and Responsibilities document, development of a patient-centered education materials policy and process, and development of an organization-wide patient engagement framework for staff, researchers and patients.

EXECUTIVE COMPENSATION

We have ensured that our performance-based compensation remains consistent with other institutions of our size. For each of our executives, the percentage of salary at risk is as follows:

CEO - 10% of base salary is linked to achieving targets set out in our QIP

VP - 5% of base salary is linked to achieving targets set out in our QIP

Given their importance to the organization and to the delivery and quality of exemplary care, the following indicators are recommended to assess performance:

1. Prehab IVR Program

Waiting for cardiac surgery can be a very stressful time for patients and their loved ones. However, it is also a unique opportunity to be able to use this waiting period to medically optimize, provide support and subsequently improve our patients' outcomes. Interactive Voice Response Technology (IVR) is a proven system used within most UOHI patient populations to monitor and identify patients who require clinical interventions and support. A best practice, multi-disciplinary algorithm that screens patients immediately after acceptance for cardiac surgery has been developed. "Pre-habilitation" enables patients to withstand the stress of surgery by augmenting functional capacity. Preoperative exercise decreases sympathetic over reactivity, improves insulin sensitivity, and increases the ratio of lean body mass to body fat. It also improves physical and psychological readiness for surgery, reduces postoperative complications and the length of stay, and

improves the transition from the hospital to the community. Patients who are identified by the system as being at risk will be referred to the appropriate Health Care Provider in Cardiac Rehabilitation and the Institute to ensure they are in the best possible condition prior to their procedure.

Project Deliverables/ targets:

- Hold a focus group of patients who attended the Heart Failure Education Series to collect feedback. Revise education based on comments by April 1, 2022.
- Plan a focus group of providers regarding Heart Failure Education by June 1, 2022.
- Evaluate integration opportunities with other regional hospitals by September 1, 2022.

Weight: 33.3%

2. Women's Heart Health Registry

Cardiac disease in Women is underdiagnosed, undertreated and under researched. The UOHI is embarking on a women's heart health registry which will capture data to give a rich source for improving patient care and research in Women's Heart Health.

Project Deliverables/ targets:

- Work with women's heart health expert to develop a list of data elements important to cardiac disease in women.
- Build the women's heart health registry into CardioCore.
- Begin population of registry with women's heart health clinic

patients (report on # of entries)

Weight: 33.3%

3. Cardiology LEAN/FMEA

The UOHI Quality Team conducts an annual Failure Modes and Effects Analysis (FMEA) within a program or department to determine risks or gaps and opportunities to improve. Part of this process also involves a Value Stream Map which is derived from LEAN. This year, the Quality Department will complete a Cardiology program review using the LEAN/FMEA tools, including gathering a team from various areas of Cardiology to develop a process stream map and a work plan to address gaps. The project plan will be presented to senior leadership.

Project Deliverables/ targets:

- Assess scope of the program
- Conduct a Value Stream Map
- Develop project Plan and roadmap

Weight: 33.3%

CONTACT INFORMATION

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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 **June 29, 2022**

Paul Labarge, Board Chair

Kathryn Butler Malette, Board Quality Committee Chair

Thierry Mesana, Chief Executive Officer

Bonnie Bowes, Other leadership as appropriate