

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 6, 2025



UNIVERSITY OF OTTAWA
HEART INSTITUTE
INSTITUT DE CARDIOLOGIE
DE L'UNIVERSITÉ D'OTTAWA



**Ontario
Health**

OVERVIEW

The University of Ottawa Heart Institute's (UOHI) is Canada's largest and foremost heart health centre dedicated to understanding, treating, and preventing heart disease. The UOHI mission is inspired by a culture of excellence, promoting heart health and leading in patient care, research, and education. The UOHI is the only cardiac center (and ECMO center) in the region and serves as a cardiac center for the 16 hospitals, as well as Western Quebec and Nunavut, and has an agreement with the Province of Newfoundland and Labrador to supplement their program in providing cardiac surgical care.

The UOHI is dedicated to continually improving quality and patient safety. We learn from data as well as the lived experiences of patients, their families and caregivers, and consider them valuable members of our care and continuous quality improvement teams. Patient engagement is integrated into decisions regarding programs and services. The UOHI has designed its own quality framework to meet the needs of providers, patients (and their families and caregivers) and community. Our definition of quality consists of six dimensions that express our values: safety, equity, efficiency, continuity, people-centered care and wellness. These dimensions form the backbone of our annual quality and safety plan and drive all quality improvement work.

Over the past year, we have undertaken several key initiatives to enhance access, patient experience, safety, and equity in healthcare delivery. To support patients awaiting their first cardiology appointment, UOHI launched the "While You Wait for Your Cardiology Consultation" initiative. Indeed, one of the most pressing challenges in cardiology care is prolonged waiting times for

specialist consultations, and with this project we provide patients with essential education through monthly webinars led by a multidisciplinary team, empowering them with knowledge on symptom management, heart-healthy living, and hospital navigation. By enhancing patient preparedness, reducing emergency department visits, and increasing participation in preventive programs like smoking cessation, this initiative aims to improve both patient outcomes and overall system efficiency.

We have recognized the need for better patient flow and reduced emergency department visits and have introduced the Acute Cardiac Triage Unit (ACT-U). This innovative approach facilitates direct transfers from clinics and diagnostic services to a dedicated triage unit, bypassing the emergency department when appropriate. By optimizing the use of hospital resources, ACT-U enhances timely access to care, improves patient satisfaction, and alleviates system pressures, ensuring that patients receive the right care at the right time.

In addition to improving access and flow, UOHI remains dedicated to promoting an inclusive healthcare environment. The Equity, Diversity, and Inclusion (IDEA) Education initiative launched last year addresses identified gaps in staff training on inclusion and health equity. By implementing mandatory IDEA training, UOHI is taking proactive steps to build a culture that values diversity, reduces health disparities, and ensures all patients receive respectful and equitable care.

In October 2024, UOHI launched its Datix Event Learning System to enhance safety event reporting across the organization, replacing a mixed electronic and paper-based process. The new system

increases transparency by allowing staff to track event statuses and report more detailed data on contributing factors. Training covered what to report, how submissions are processed, and system use.

Additionally, staff received education on Never Events, with qualifying incidents reported to Ontario Health. A retrospective review of pre-2024 events was conducted, and ongoing monitoring has been integrated into the new system.

These initiatives, alongside numerous other quality improvement projects, reflect UOHI's ongoing commitment to excellence in healthcare.

ACCESS AND FLOW

A high-quality health system ensures that patients receive timely care in the right setting. By streamlining processes, enhancing communication, and providing support while patients await services, we aim to improve access, reduce strain on emergency departments, and enhance overall patient care and satisfaction with the projects below:

Women's Heart Health Program Failure Modes and Effects Analysis: we will complete a review of the UOHI Women's Heart Health Program using the LEAN/FMEA tools, to determine risks or gaps and opportunities for improvement.

ACTU Hours of Operation Extension: The ACTU is currently available from 0800-1600 Monday to Friday. With the goal of diverting even more patients from Emergency, the ACTU will extend its hours from 0800-2300 on weekdays. This project will track the number of Emergency visits averted, the number of patients sent to ED and the number of admissions from ACTU.

Standardized Reporting to Physician Chiefs: The clinical units hold a daily bed meeting to discuss sick calls, planned admissions and discharges and review the number of patients waiting in the emergency department for transfer to UOHI. Following the meeting, a report is sent out to all invited parties, summarizing the discussion and statistics. The goal of this process is to create a colour-coded heat map report with next steps expected based on colour classification.

EQUITY AND INDIGENOUS HEALTH

A high-quality healthcare system must be inclusive and responsive

to the diverse needs of its patients and providers. By promoting cultural competency, improving the overall environment, and addressing health disparities, UOHI strives to create a more equitable environment that enhances patient outcomes and promotes a sense of belonging for all. Here are key projects included in this year's QIP to advance these goals:

The Green Heart Initiative: This project will review opportunities for waste diversion and to optimize recycling at the UOHI. The exercise was piloted in Ambulatory Care with success; therefore, the ICCU and CSICU have been selected to take part in the next Green Heart walk-through. The goal is to raise awareness of best practices in waste diversion and recycling and provide actionable steps for staff and leaders.

Kairos Blanket Exercise: This is an interactive, experiential workshop designed to deepen understanding of the historical and contemporary nation-to-nation relationship between Indigenous and non-Indigenous peoples in Canada. The exercise highlights the impact of colonization on Indigenous communities and fosters a deeper understanding of how historical and ongoing injustices have contributed to broken relationships.

Environmental Impact Education: The Cardiac Rehabilitation Department seeks to educate patients, caregivers and members of the public regarding the cardiac risks associated with climate change, including global warming, air pollution and excessive heat. This project will include consultation with patient partners, an environmental scan and production of educational materials.

EMPaCT in Patient Engagement: Equity Mobilizing Partnerships in

Community (EMPaCT) is a novel and scalable patient partnership model co-designed to centre the voices of diverse community members and build capacity for equity-promoting patient-oriented decision-making in healthcare. In partnership with Patient Partners, develop a UOHI EMPaCT framework and an EMPaCT team.

PATIENT/CLIENT/RESIDENT EXPERIENCE

Patient engagement means valuing the insight and lived experiences of patients, family members and caregivers. The UOHI is guided by respect, partnership, equity, participation and learning. Formal patients experience surveys, and a concerns management process collect feedback from patients, caregivers and the public in an effort to constantly improve the quality and safety of care and services. Patient experience informs the following projects:

Peer Mentor Program: Building on the successes of other successful hospital peer support groups, the UOHI will pilot its own peer2peer support starting within the Cardiac Surgery division. The pilot group of peer mentors will consist of experienced volunteers, peer supporters in the Women@Heart program, and Patient Partners with lived experience in four main key areas: coronary artery bypass graft (CABG), mechanical valve, tissue valve, and minimally invasive surgery.

Patient Navigator: The Patient Navigator role will enable staff and patients to send patient inquiries about missing calls, upcoming appts, and questions about upcoming times for visits. Currently this process is decentralized and given the privacy concerns and the lack of standardization, the role will be initiated to support patients with questions prior to their arrival at UOHI.

Patient Relations Process Review: The Manager of Patient Relations and Risk will conduct a value stream mapping exercise of the concerns management process and develop an education plan for staff and patients.

Patient Resources Review: The Patient Educational Materials Task Force is responsible for reviewing all patient and caregiver-facing education for UOHI. The group undertook an audit of all patient resource material locations in November 2024 and created a work plan to improve access and selection of materials at these locations.

PROVIDER EXPERIENCE

UOHI is committed to promoting an inclusive, supportive, and engaging workplace. A key step was the introduction of the Staff Engagement and Retention Officer in January 2023, ensuring a dedicated focus on staff well-being rather than relying on ad-hoc efforts. Over the last two years, they have worked on different staff health and wellness initiatives like setting up a Calm Wellness App for staff and 5 family members/friends, launching a Tranquility Room with Yoga and massage chairs accessible to all employees, launching a Privacy Room for staff to have a private space for appts, praying, personal needs; arranging in collaboration with Willis College for a complimentary monthly Massage clinic for all staff.

With the help of the Staff Engagement and Retention Officer we have held different staff engagement activities such as: the State of the Heart Rounds that provide a platform for open discussions on workplace experiences, strengthening staff connection and engagement, the Heart to Heart visits with units/departments and Engagement & Retention Coordinator.

Beyond these activities we have recognized staff during special professional thematic days/weeks/months; internal and external showcasing staff on HH, The This Week at the Heart Institute (TWATHI) mailout and externally (social media platforms), we have add staff appreciation social events including rooftop celebrations, holiday celebrations and gifts, staff activities and sports teams like Hope Beach, and

- o Offering Sens tickets discounts for staff
- o Communications promoting through socials, HH and TWATHI.
- o Staff Engagement Committee
- o Long Service Awards
- o Senior Leader's and CEO President distributing seasonal treats to staff
- o UOHI and Nursing Showcases
- o Promoting Team building through department/team/unit contests and activities like this years Holiday ugly sweater, decorating areas, team photos, all staff group photos
- Nursing Chair, supporting Nurses education, research time, and conference attendance.

The Staff Engagement Committee has also been instrumental, bringing together a multidisciplinary team to recognize and celebrate employees through initiatives like Everyday Heart Hero awards, workplace art and decorating contests, and team-building activities beyond work. Additionally, the State of the Heart Rounds provide a platform for open discussions on workplace experiences, strengthening staff connection and engagement.

UOHI has also embraced six days of observance proposed by the

IDEA (Inclusion, Diversity, Equity, and Accessibility) Committee, recognizing key cultural and awareness events: Black History Month, International Women's Day, Asian Heritage Month, Pride Month, National Day for Truth and Reconciliation, and International Day of Persons with Disabilities. These observances reflect UOHI's commitment to promoting a diverse and respectful workplace.

SAFETY

The UOHI will complete the following safety quality improvement projects this year:

New Hire Delirium Education: The UOHI Nursing Educator team will be facilitating a UOHI Corporate Nursing Orientation in conjunction with TOH Nursing Orientation. The team will coordinate with internal experts to create a delirium module for the new external nursing hires. The training will focus on cognitive assessments, including the CAM (Confusion Assessment Method), the delirium care plan and interventions.

Rate of Delirium onset during hospitalization: In fiscal year 2024-25, the Quality Department completed sleep hygiene audits on inpatient units and developed a project plan. As a follow-up project, the Quality Department will roll-out a decibel reader and feedback audit.

Patient and Caregiver Delirium Education: In the fiscal year 2024-2025, the ROSC project team develop pathways and an educational resource handout for delirium. To further support patients, this team will develop a video educational resource for patients and caregivers to review prior to admission. Education topics will include signs and symptoms and mitigation strategies.

Rate of medication reconciliation at discharge: The UOHI has historically achieved a high level of compliance for rate of medication reconciliation at discharge. The Quality team will continue to monitor compliance, in addition to completing a 6-month and 12-month audit of missed opportunities.

CSICU Safety Assessment: The CSICU has the highest number of Code White incidents, which is attributed to the complex nature of the care provided. This project aims to re-evaluate the current protocols and environment to identify areas for improvement.

Ambulatory Care Hand Hygiene Audit: The UOHI conducts regular hand hygiene audit of inpatient and critical care units; however, ambulatory care audits require a different approach due to physical space limitations. The Infection and Prevention Control team will conduct Glowgerm audits with Ambulatory Care staff to assess hand hygiene compliance.

Ethics Staff Education Campaign: The UOHI has an A4R and Ethics framework for clinical decision-making available for staff, management and executive leadership. To raise awareness of the A4R model and the Ethics framework, the Quality Department will roll-out an education campaign.

Medication Safety Audits: Medication Safety is a significant driver of success in Accreditation and safe patient care. The Quality Department will conduct quarterly medication safety audits on each inpatient and critical care until throughout the 2025-26 FY and share results with staff.

SGLT2-i Education: This retrospective review of patient electronic health records will enhance understanding of the need for change regarding implementation and reduced discontinuation rates for SGLT2-i therapy prescribed for nephrology, cardiology (HF and GDMT clinics) and endocrinology patients at UOHI/TOH.

PALLIATIVE CARE

UOHI is committed to delivering high-quality palliative care by integrating best practices and promoting multi-disciplinary collaboration. Our approach aligns with the Quality Standard for Palliative Care and the Ontario Palliative Care Network model of care recommendations. Below are five key initiatives demonstrating our commitment:

ACP Documentation in MyChart: Patients can upload their Advance Care Planning (ACP) and Power of Attorney (POA) documents to MyChart, ensuring healthcare providers have timely access to Goals of Care (GOC) information.

Nurse-to-Nurse Palliative Care Consults: This initiative promotes earlier involvement of palliative care services, leading to improved symptom management and better support for patients and families.

Ongoing Staff Education: UOHI has offered the Pallium Heart Leap course and multiple educational talks to enhance healthcare providers' palliative care competencies, ensuring consistent, high-quality care.

Data Sharing with Community Paramedics: Efforts are underway to establish data-sharing agreements between our palliative care clinic

and community paramedics via Agiloft, optimizing healthcare utilization and transitions of care.

ACP Information in UOHI Patient Booklets: A one-page ACP guide has been added to heart failure and amyloidosis booklets, with ongoing efforts to expand this to other conditions, encouraging patients to plan for future care.

POPULATION HEALTH MANAGEMENT

The Population Health approach at UOHI focuses on improving cardiovascular health outcomes by addressing social determinants of health, reducing disparities, and enhancing access to care.

By integrating prevention, early intervention, and tailored support for diverse patient populations, we aim to optimize heart health across the continuum of care.

This commitment is reflected in initiatives that promote health equity, culturally appropriate care, and improved patient education. UOHI enhances cultural competency through Inuit-specific training and cardiac rehabilitation resources, evaluates inpatient vs. outpatient heart failure transitional care to optimize management, expands women's cardiovascular education through regional partnerships, and raises awareness of cardiovascular risks in transgender and non-binary populations.

As a leader in primary prevention, rehabilitation, and secondary prevention, UOHI provides structured patient education on symptom management, heart-healthy living, and smoking cessation before and after procedures. Patients are automatically referred to outpatient cardiac rehabilitation, ensuring continuity of care

through mental health support, nutrition counseling, exercise assessment, and medication education. Additionally, community events like Women's Heart Health Day, Sharing is Caring, and Heart Valve Awareness Day raise awareness, while the Prevention & Wellness Centre offers programs such as Women@Heart peer support, Virtual Care, CardioPrevent, an exercise app, a heart-healthy meal delivery service, and e-learning modules.

Through these initiatives, UOHI remains committed to a comprehensive, patient-centered approach that ensures equitable and personalized cardiac care for all.

EXECUTIVE COMPENSATION

The University of Ottawa Heart Institute maintains alignment in performance-based compensation with similar institutions of comparable size. For our executives, the proportion of salary subject to performance incentives is as follows:

CEO – 10% of base salary is tied to meeting targets outlined in the QIP.

VP – 3.5% of base salary is tied to meeting targets outlined in the QIP.

Considering their significance to the organization and the provision of exceptional care, the following indicators were suggested for evaluating performance in fiscal year 2025-2026:

ACTU Hours of Operation Extension (Theme: Access and Flow)

The ACTU is currently available from 0800-1600 Monday to Friday. With the goal of diverting even more patients from Emergency, the

ACTU will extend its hours from 0800-2300 on weekdays. This project will track the number of Emergency visits averted, the number of patients sent to ED and the number of admissions from ACTU.

Project deliverables/targets:

Track unit utilization metrics through EMR specifically designed reports:

- Patient Consults
- Transfer Rates to ED
- Emergency Department Diversion

Weight: 33.3%

Kairos Blanket Exercise (Theme: Equity and Indigenous Health): This is an interactive, experiential workshop designed to deepen understanding of the historical and contemporary nation-to-nation relationship between Indigenous and non-Indigenous peoples in Canada. The exercise highlights the impact of colonization on Indigenous communities and fosters a deeper understanding of how historical and ongoing injustices have contributed to broken relationships.

Project deliverables/targets:

The UOHI will arrange for Kairos Canada recommended facilitators to conduct at least 1 blanket exercise for both management and frontline staff by March 2026.

Weight 33.3%

SGLT2-i Education (Theme: Safety)

This retrospective review of patient electronic health records will enhance understanding of the need for change regarding implementation and reduced discontinuation rates for SGL2i-i therapy prescribed for nephrology, cardiology (HF and GDMT clinics) and endocrinology patients at UOHI/TOH.

Project deliverables/ targets:

Using data collection forms, to be developed following a literature review, staff will review Epic to collect retrospective data on patients in HF, GDMT, Diabetes, Nephrology Clinics prescribed SGL2i; discontinue rates of SGL2i for any reason, including UTI and genital mycotic infections by March 2026.

Incorporate learnings from data collection into a standardized document for nursing staff to guide patient education throughout the continuum of a patient's care by March 2026.

Incorporate learnings from data collection into a patient education resource with the help of patient partners by March 2026.

Weight 33.3%

CONTACT INFORMATION/DESIGNATED LEAD

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OTHER

At the University of Ottawa Heart Institute, we are dedicated to continuously enhancing patient safety and quality of care. By evaluating our current performance, we have identified both strengths and areas for growth, shaping our quality improvement strategy. Through focused initiatives and ongoing progress monitoring, we strive to maintain the highest standards of safe, effective care for our patients and their families. Grounded in our core values—safety, equity, efficiency, continuity, people-centered care, and wellness—we remain committed to delivering exceptional care to our patients and the broader community.


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
March 27, 2025

Board Chair

Board Quality Committee Chair



Chief Executive Officer



EDRVQP lead, if applicable
