

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 27, 2026



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 equally value data and 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 investigate barriers to diverse patient engagement, we launched the EMPaCT Phase 1 - Listening and Learning project, allowing us to design a UOHI Framework for equity-mobilizing engagement. We held two Kairos blanket exercises, educating 36

clinical and administrative staff through an immersive session to help us all gain a deeper understanding of systemic inequities and how to provide more respectful, patient-centered care while contributing to a more culturally safe and responsible healthcare environment.

On April 1, 2025, we expanded the hours of the Acute Cardiac Triage Unit (ACT-U), opened in fiscal year 2024-2025, aiming to further reduce emergency department visits for cardiac patients. This innovative approach facilitates direct transfers from clinics and diagnostic services to a dedicated triage unit, bypassing the emergency department when appropriate. By expanding our hours, we further optimized the use of hospital resources, creating timely access to care, improving patient satisfaction, and alleviating system pressures, ensuring that patients receive the right care at the right time. This year we monitored utilization metrics for ACT-U to further understand its impact in light of the new extended hours.

In addition to improving access and flow, UOHI remains dedicated to promoting an inclusive healthcare environment. The Equity, Diversity, and Inclusion (IDEA) Education was active, conducting recognition days marked by opportunities to share stories on social media and attend lunch and learn sessions on topics including women's health care experiences and respecting gender diversity. 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. Learnings from EMPaCT this year will further support training and education.

The team leading the SGLT2-i project obtained a grant to assist in the completion of a literature review and retrospective health record analysis to better understand the need for change regarding implementation and reduced discontinuation rates for SGLT2-i therapy prescribed for nephrology, cardiology and endocrinology patients at UOHI and The Ottawa Hospital. This initiative led to the creation of a standardized document for nursing staff to guide patient education through the continuum of a patient's care; and worked in partnership with Patient Partners to design an educational resource for patients. Pre- and post- data analysis measured the uptake and adherence with the new standardized educational material.

A newly designed Near Miss Report was added to the Event Learning System (ELS) launched in 2024, allowing staff to report issues anonymously to the Patient Safety Committee, comprised of leaders in clinical services, for analysis and action.

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:

Cardiac Imaging Failure Modes and Effects Analysis: we will

continue the systemic review of the UOHI Cardiac Imaging Department using the LEAN/FMEA tools, to determine risks or gaps and opportunities for improvement. Last year, we pivoted to look at the Cardiac Booking processes and ECHO procedure, and this year we will examine the MRI and CT procedures to identify failure modes and create an action plan.

Prehab Transplant Optimization Pathway: This project will develop a patient pathway for systemic enrollment of all waitlisted transplant patients into cardiac rehabilitation for the duration of their time on the waitlist for exercises, assessments and follow ups with members of allied health and other specialists.

Digitization Using Artificial Intelligence: Using AI software, this project digitized the UOHI Hypertension Guide during the 2025-26 fiscal year. This year, the team will capture feedback on uptake and acceptability.

Discharge Efficiency: This project aims to improve discharge efficiency on our cardiology inpatient unit, streamlining less-complex discharges and strengthening processes for complex discharges. The initiative will decrease the average length of stay while maintaining safe and patient-centered transitions.

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 from last year will continue by expanding the opportunities for waste diversion and to optimize recycling at the UOHI. The exercise was piloted in Ambulatory Care, CSICU and ICCU with success; therefore, the Cardiovascular Rehabilitation Centre and the H4 unit 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.

Accessibility Baseline Assessment: The Accessibility Committee will establish a comprehensive baseline assessment of accessibility barriers across the UOHI for patients, staff, physicians, learners and volunteers. This foundational work will support ongoing long-term compliance with AODA, HSO/Accreditation Canada Standards and internal EDI goals.

Culturally-Sensitive Inuit Education: In support of ongoing work with Larga-Baffin, the Cardiovascular Rehabilitation team will work with an Inuit illustrator to co-develop culturally-sensitive and relevant heart health education for Inuit and Northern patients.

EMPaCT in Patient Engagement: After successfully completing Phase 1 - Listening and Learning, of the scalable EMPaCT model, the project team will begin Phase 2 - Setting the Groundwork for Success by identifying Champions for Change, early adopters and potential stakeholders for a community UOHI EMPaCT table.

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, our Patient Partnership Council 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 the UOHI Peer2Peer support program within the Cardiac Surgery division, this year the program will expand to include one other area of cardiac care at the UOHI. The group of peer mentors includes experienced volunteers, peer supporters in the Women@Heart program, and Patient Partners with lived experience. These volunteer mentors receive support from Prehabilitation Program nurses and the psychology team.

Nurse Practitioner Role: The UOHI introduced the role of Nurse Practitioner at the UOHI in the Fall of 2025 to strengthen multidisciplinary care. This role is expected to improve communication and streamline discharge. This year the team will establish key performance indicators to refine the position and ensure appropriate supports are in place for the success of the role.

ROSC Education Class: ROSC, which stands for return of spontaneous circulation, is a complex population of patients receiving care at UOHI. In previous years, a care pathway was developed to facilitate optimization of ROSC patients. A new initiative, a one-hour ROSC Education Class led by a nurse and an occupational therapist, will further support and educate this group of patients and their caregivers post-discharge.

Communication Boards in CCU and CSICU at UOHI: Speech pathology, with expertise in communication, will work with Patient Partners to develop a communication board for ventilator-dependent and other patients who cannot communicate verbally. The initiative will help the team and family communicate with patients at the bedside.

Patient Resources Review: After the project team conducted a environmental scan of all existing UOHI patient educational documents in fiscal year 2025-2026, the team will track and monitor use of materials on pilot units to make further adjustments to recommended offerings.

PROVIDER EXPERIENCE

UOHI is committed to promoting an inclusive, supportive, and engaging workplace. A Staff Engagement and Retention Officer ensures a dedicated focus on staff well-being rather than relying on ad-hoc efforts. Over the last several years, they have implemented 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. More recently, additional lunch time social events such as the Silent Disco or lunch-hour painting class, Pilates and Zumba classes compliment existing offerings. The Staff Engagement Committee has also been instrumental, bringing together a multidisciplinary team to organize these events.

Beyond these activities, UOHI 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). Staff appreciation social events including rooftop celebrations, holiday celebrations and gifts, staff activities and sports teams like Hope Beach, and long service Awards.

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.

SAFETY

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

Opioid Stewardship Program: The UOHI will implement a comprehensive, evidence-based, multidisciplinary opioid stewardship program to enhance patient safety and prescribing

practices.

Rate of Delirium onset during hospitalization: In fiscal year 2025-26, a project team including clinical staff, Quality and Patient Partners developed a pilot project on the cardiac surgery inpatient unit to assess noise levels, causes of noises and disruptions of patients sleep. Following the success of this pilot, the project will expand the assessment to two more inpatient units.

Improving Compliance with Transfer of Accountability Practices During Inpatient Unit Transfers at UOHI: This project will audit current practices among nurses during inter-unit transfers and use the findings to optimize transfer of accountability documentation in the electronic medical record to better support compliance and standardization.

Rate of medication reconciliation at discharge: Following an audit in 2025-26 that demonstrated 100% compliance with discharge medication reconciliation, the Quality Department will complete spot audits of accuracy, randomly selecting 10% of discharges to audit on a given date once per quarter from inpatient units.

IPAC Audits: Develop and implement a standardized auditing format that actively engages clinical leaders in Infection Prevention and Control (IPAC) audits to support real-time feedback, data capture and target follow-up.

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 2026-27 and share

results with staff. In order to expand feedback to historically excluded care areas, the project team will develop an audit tool for Cath/EP and Cardiac OR.

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.

With the introduction of the 2025-2030 Strategic Plan, the UOHI launched its One Million Canadian Hearts. This pioneering initiative will screen one million Canadians for cardiovascular disease risk factors. By screening early, intervening swiftly, and harnessing powerful data insights, the UOHI will save lives and uncover the realities of heart disease. In its first months, the initiative began screening UOHI staff in addition to public events such as Day on the Hill, screening members of parliament.

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, the UOHI

holds community events like Women's Heart Health Day, Mega Heart Event, Sharing is Caring, and Heart Valve Awareness Day to raise awareness; and the Prevention & Wellness Centre Women@Heart peer support, Peer2Peer program, Virtual Care, CardioPrevent, an exercise app, a heart-healthy meal delivery service, and e-learning modules support a comprehensive, patient-centered approach that ensures equitable and personalized cardiac care for all.

The University of Ottawa Heart Institute maintained alignment in performance-based compensation with similar institutions of comparable size.

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 are selected for evaluating performance in fiscal year 2026-2027:

1. LEAN-FMEA Cardiac Imaging (Theme: Access and Flow)

In fiscal year 2025-2026, the Quality Department was approached to complete a review of the UOHI Cardiac Imaging using the

LEAN/FMEA tools, to determine risks or gaps and opportunities for improvement. This is a year-over-year project due to scope and department size. This year, the Quality Team will complete a report on Booking solutions, and will complete process mapping, failure modes and effects analysis and a workplan to address gaps for MRI and CT procedures. The project plan will be presented to senior leadership.

Project deliverables/targets:

- Review of the CT and MRI procedures conducted using the LEAN-FMEA tools.

Weight: 33.3%

2. Accessibility Baseline Assessment (Theme: Equity)

Establish a comprehensive baseline assessment of accessibility barriers across the University of Ottawa Heart Institute for patients, families, staff, physicians, learners, and volunteers. The assessment will identify gaps related to physical, digital, communication, sensory, cultural, and procedural accessibility and inform future improvement initiatives, including the integration of technology solutions. This foundational work will support UOHI's long-term compliance with AODA, HSO/Accreditation Canada standards, and internal Equity and Inclusion goals.

Project deliverables/targets:

- Conduct an organization-wide accessibility baseline assessment to identify physical, digital, communication, sensory, cultural, and procedural barriers experienced by patients, families, staff, physicians, learners, and volunteers.
- Develop a prioritized list of accessibility gaps identified through

the baseline assessment, using criteria such as patient and staff impact, safety risk, feasibility, regulatory requirements (AODA/HSO), and alignment with organizational Equity & Inclusion goals.

Weight 33.3%

3. Opioid Stewardship Program (Theme: Safety)

The UOHI will implement a comprehensive, evidence-based, multidisciplinary opioid stewardship program with a goal to enhance patient safety and prescribing practices.

Project deliverables/ targets:

- Develop an opioid stewardship policy and procedure in alignment with Accreditation Canada Standards.
- Select key performance indicators for future reporting and tracking purposes.
- Assess baseline knowledge of best practices for opioid prescription and administration to determine educational gaps for physicians and nursing.

Weight 33.3%

CONTACT INFORMATION/DESIGNATED LEAD

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OTHER

The new UOHI Strategic Plan was built with the voices, insights, and experiences of patients, families, staff and community partners. It is a declaration of our steadfast dedication to pushing boundaries, embracing collaboration and harnessing the power of cutting-edge technology to address the evolving needs of patients, while never losing the human touch. The plan affirms our core values through its guiding principles: People first, heart health for all, collaboration for excellence, and leveraging data, AI and technology with a human touch. When people turn to the UOHI, they know they are in the best hands. We are dedicated to continuously enhancing patient safety and quality of care, evaluating our current performance to identify strengths and areas for growth. 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 26, 2026



Board Chair



Board Quality Committee Chair



Chief Executive Officer



EDRVQP lead, if applicable
