



Unity Health Toronto's Quality Improvement Plan 2024-25

Improving Care at Unity Health

Unity Health Toronto is one of Canada's largest Catholic healthcare networks serving patients, residents and clients across the full spectrum of care, spanning primary care, secondary community care, tertiary and quaternary care services to post-acute through rehabilitation, palliative care and long-term care, all while investing in world-class research and education. We are comprised of St. Joseph's Health Centre, St. Michael's Hospital and Providence Healthcare.

Our inspiring shared vision— *The best care experiences. Created together* — comes from the hearts and minds of the people across the network. It is rooted in our commitment to care for the whole person – body, mind and spirit – and sets our course towards excellence in person-centred care.

At Unity Health, high-quality care has many dimensions; it is safe, effective, timely, efficient, patient and family-partnered, equitable and integrated. We recognize that improving care for patients is only possible with engaged and healthy staff, physicians, learners and volunteers, which is a key reason we also strive to ensure that they experience joy in work. Additionally, we understand that employing environmentally sustainable health care practices is important to achieving excellent health over the long-term. At Unity Health, we are sharing knowledge and education, and continually identifying and supporting efforts to integrate a sustainability lens into our work to mitigate our environmental impact and adapt to the changing climate.



8 Dimensions of Quality



Each year at Unity Health, we set out quality priorities that form the basis of our organizational Quality Improvement Plan. These priorities are part of Unity Health Toronto's broader vision to continue improving the experience of patients. Over the past year, we have maintained a focus on providing an excellent care experience despite continued challenges, including capacity pressures, increasing patient acuity and significant staff shortages.

With a commitment to excellence, Unity Health Toronto is currently preparing to go live with our first organization-wide electronic patient record (EPR) system in November 2024. The new EPR system will be a key enabler to drive quality improvements across all eight quality dimensions. A single system will help us to move towards best practice workflows across all our sites. Improved access to data and analytics will help us plan and make better decisions in real time. It will also provide a better patient experience by creating more ways for patients to engage with health care teams across multiple communication devices like a computer, a tablet or a mobile phone.




2024-25 Quality Priorities

Our Quality Improvement Plan for this year continues to reflect key priorities aligned with Unity Health Toronto's overall strategic goals and was shaped by the experiences and wisdom of patients, residents, families, staff and communities. Additionally, our priorities have been informed by information from our safety event reviews, patient relations and patient experience surveys, as well as key performance data including emergency department wait times and alternative level of care (ALC) rates.




Further, we continue to closely monitor and participate in other platforms, programs and communities of practice such as the National Safety Quality Improvement Program (NSQIP), GEMINI and the

Canadian Institute for Healthcare Improvement (CIHI) to guide the development of our priorities and accelerate improvements in care quality, system performance and population health.

To support improvements in each priority area, we will continue to advance Unity Health's Quality Management System (QMS); focusing on organizational capacity and capability to drive continuous improvement, as well as implementing structures and processes at the program and local level. While this Quality Improvement Plan lists organization-wide priorities and indicators, a mature QMS will include priority setting and monitoring of indicators across all of our clinics, units and other sites where care is provided.




Dimension of Quality		2024-25 Unity Health Quality Scorecard Indicators	
	Patient and Family Partnered Care/ Care Experience	Top box response to "Did you feel listened to?"	
	Safe	Number of 'never events':	
		<ul style="list-style-type: none"> • Never events (excluding pressure injuries) • Stage IV pressure injury acquired after admission to hospital 	
	Timely Access	Emergency Department (ED)	Average ED Length of Stay (LOS) for admitted patients
		Primary Care	The percentage of new patients who experience disadvantage (as estimated by priority postal codes) attached or enrolled to the Family Health Teams (FHTs)

2024-25 Quality Priorities Continued

Dimension of Quality		2023-24 Unity Health Quality Scorecard Indicators
	Equitable	The percentage of staff in selected programs/teams who have completed an Indigenous Cultural Safety Training Program
		Equity-oriented initiatives: Complete inventory of equity-oriented quality improvement efforts in clinical areas
	Provider Wellness	Voluntary turnover
		Early service turnover (employees hired within 2 years) for nurses (RNs and RPNs)
	Effective	No organization-wide indicator. Programs include one or more effectiveness indicators on their program scorecards

2024-2025 Long-Term Care Quality Priorities

In addition to the above quality priorities, the Long-Term Care program at Unity Health, which applies to the Cardinal Ambrozic Houses of Providence, will be focusing on these specific areas of improvement.

Dimension of Quality		2023-2024 Long-Term Care Quality Scorecard Indicators
	Resident and Family Partnered Care/ Care Experience	The percentage of residents who responded "usually" to the question "do you feel listened to by staff"
	Safe	Number of newly acquired Stage II, III, IV, unstageable and deep tissue pressure injuries in the Cardinal Ambrozic Houses of Providence
	Equitable	The percentage of staff, leaders, physicians, residents and family council members in the Cardinal Ambrozic Houses of Providence who have completed relevant anti-racism and equity, diversity and inclusion education



Patient and Family Partnered Care/Care Experience

	Indicator	Baseline	Target 2024-25
Inpatient	*Top box response to "Did you feel listened to?"	77%	80%

At Unity Health Toronto, our commitment to patient and family partnered care is anchored in our vision – *The best care experiences. Created together.* This vision recognizes the holistic concept of "care experience". Over the past year, we have continued to mature our care experience measurement program. This has resulted in the co-design of new survey tools reflecting what matters most to patients, the implementation of a care experience measurement team and the identification and procurement of a new digital analytics platform to support in-depth analysis and visualization

of care experience data. We also started a new real-time patient feedback program and began collecting sociodemographic questions as part of our care experience surveys.

Based on previous care experience data and input from Patient and Family Partners (PFPs) and staff, we are focusing on patients feeling listened to as our 2024-25 indicator. When patients feel their needs and preferences are being listened to, they are more likely to perceive a positive overall experience and it empowers them to actively participate in their care decisions.

Activities to measure and improve the care experience

1) Develop an in-depth understanding of what contributes to patients feeling listened to through the:

- a. Facilitation of three focus group sessions with Patient and Family Partners to further understand key factors and perspectives on what contributes to patients feeling listened to
- b. Launch of a survey through Virtual Patient Panel for additional patient input to understand opportunities for improvement in inpatient settings

c. Completion of a literature review to uncover best practices to support how staff and physicians can contribute and support patients in feeling listened to

2) Implement a working group with representation from Patient Family Partners, leadership and patient experience to guide improvement strategies across all three hospital sites

3) Drive unit specific improvements through timely sharing of care experience data and use of unit-based huddles to engage staff in reviewing and developing improvement ideas



Safe

		Baseline	Target 2024-25
Number of 'never events'	Excluding pressure injuries	1	0
	Stage 4 pressure injury acquired after admission to hospital	2	0
The percent of high priority action items from critical incident reviews implemented by target date		85%	85%

At Unity Health, one of our goals is to create and sustain a fair and just culture. Within this culture, we acknowledge that errors happen, usually because of system inadequacies, and that we should generally respond in such a way that does not assign blame but supports those involved and seek to learn, improve and prevent the likelihood of recurrence through system change. Reducing preventable harm remains a key priority for Unity Health. All staff, physicians and learners at Unity Health are encouraged and supported in reporting all patient safety incidents through our safe and accessible electronic incident reporting system. Another key element is having robust processes in place to learn from incidents and make meaningful change to reduce the probability of future harm.

Leaders of clinical areas and the organization's Patient Safety team review all reported patient safety incidents. All 'never events,' (patient safety incidents that result in serious patient harm or death, and are generally felt to be

preventable with system-level interventions to improve safety), including stage 4 hospital acquired pressure injuries, are treated as potential critical incidents. They are formally reviewed through our patient safety incident review process, where contributing factors and action items to reduce future similar events are identified. Any actions required to address urgent and ongoing threats to the safety of patients are implemented immediately. Beyond this, additional action items felt to have the highest impact on prevention and mitigation of future harm are referred to as high priority action items. Each high priority action item is assigned a target date for completion. The timely implementation of high priority action items is key to preventing future patient harm. While we strive to implement all action items within the identified timeframe, there are times where reasonable delays occur. With this in mind, although we improved over 10% last year hitting our target of 85%, we would like to continue to set a target of implementing 85% of all high priority action items within the identified timeframe.

Activities to monitor and reduce preventable harm

1) For 'never events' excluding stage 4 hospital acquired pressure injuries

- Develop a process to share unit/program-specific learnings and action items from analysis of all 'never event' reviews

2) For stage 4 hospital acquired pressure injuries

- Complete formal patient safety incident reviews of all stage 4 pressure injuries using common cause analysis
- Introduce a Unity Health-wide pressure injury prevention care plan and unique visual identifier for individuals at risk of developing pressures injuries in the new electronic patient record
- Standardize measurement and reporting of hospital acquired pressure injuries across all three sites
- Improve access to therapeutic surfaces for patients identified as at risk for pressure injuries

3) For implementation of high priority action items

- Expand access to high priority action item tracking view in Safety First to managers and educators to monitor implementation of action items within targeted timeframes
- Establish a process to follow-up on action items that are not implemented within targeted timelines





Timely Access to Care – Emergency Department Length of Stay (ED LOS)

	Site	Baseline	Target 2024-25
Emergency Department Length of Stay (ED LOS) for admitted patients (in mean hours)	St. Joseph's	20.5 hours	18.5 hours
	St. Michael's	19.1 hours	17.2 hours

Timely access continues to be a critical focus for our organization. The established Access, Flow and Transitions Task Force at Unity Health continues to develop, implement, continually revise and monitor a plan to improve access to care for patients. The task force has targeted three primary pillars to focus efforts on improving flow of patients throughout our facilities: safe patient placement, safe staffing and safe transition

planning. Through a data analysis review and the engagement of the task force and other key stakeholders, we have set a 10 per cent improvement target for 2024-25. In addition to this target, we have set a two-year goal for each of our acute care sites to be in the top one-third of its peer group (very-high volume for St. Joseph's and teaching for St. Michael's) on ED LOS.

Activities to Improve ED LOS at Unity Health

1) Leverage our new electronic patient record to standardize patient placement processes and support safe transitions through the development of documentation tools for "transfer of accountability"

2) Establish integrated pathways to post-acute services

3) Standardize alternative level of care processes including rounds and documentation



Timely Access to Care – Primary Care

	Site	Baseline	Target 2024-25
The percentage of new patients who experience disadvantage (as estimated by priority postal codes) attached or enrolled to the Family Health Teams (FHTs)	St. Joseph's	27%	35%
	St. Michael's	34%	40%

Access to timely primary care appointments remains a very important issue to patients and data is being collected across all the academic family health teams (FHTs) (14 sites). As part of the improvements related to our 2023-24 indicator for improving telephone access,

which includes increasing the use of the FHTs online appointment booking platform, the FHTs are moving to a new indicator for 2024-25 that is focused on access for communities experiencing marginalization or structural inequities.

Activities to improve timely access to primary care

- 1) Enhance Patient Navigation Services and collaboration with community partners
- 2) Increase the number of physicians enrolled in the NEWR program at St. Michael's, a program that supports individuals from equity-deserving populations (incl. patients who identify as Black or Indigenous or who are experiencing homelessness or poverty) to get access to primary care
- 3) Accept family medicine patients who present to our Rapid Access Addiction Medicine Clinic at St. Joseph's, live in our catchment area and do not have a family physician



Equitable

Care Setting	Indicator	Baseline	Target 2024-25
All	The percentage of staff in selected programs/ teams who have completed an Indigenous Cultural Safety Training Program	N/A	85%
All	Equity-oriented initiatives: Complete inventory of equity-oriented quality improvement efforts in clinical areas	No inventory	Completed inventory

At Unity Health, all three of our sites share the Sisters of St. Joseph's legacy of caring for people and communities who have been marginalized or disadvantaged. More than a century after each site was founded, this shared commitment to serving the underserved is one of the network's strengths and continues to be the focus of our mission, values and strategy.

Opportunities exist as a system and within our network to address social determinants of health and more deeply embed equity within our quality management system. Better understanding is part of the way forward, so one of our goals for 2024-25 is to improve the way we collect sociodemographic data

from patients, staff and physicians. We will support this work through the implementation of equitable data governance frameworks that guide the collection, storage and use of data in a way that support equitable use and protect patients, the workforce and communities. We will also implement lessons learned from our data collection efforts to date to better understand what is working and where efforts should be focused to improve quality. We recognize we are still a long way from being able to collect data in a way that allows for meaningful and valid comparisons between different groups of patients at all locations of care.

Improving the quality of our data is important, but we don't need to wait for better data to improve equity. For 2024-25, we will continue our focus on embedding equity within our serious safety event reviews and will continue to support new program-specific equity initiatives, while conducting an inventory of ongoing equity-oriented improvement activities. The inventory will support the aim of understanding where there are strengths and

gaps in our services and where equity-focused education can be used to support knowledge gaps towards action. An additional focus this year will be supporting key departments with Indigenous Cultural Safety training and education to support our accountabilities in meeting the cultural and spiritual needs of Indigenous patients.

Actions to improve health equity:

1. Conduct review of Indigenous Cultural Safety trainings available
2. Develop and share inventory with Unity Health staff, physicians and learners
3. Develop a survey to identify what equity- oriented process improvement initiatives are currently underway in the organization
4. Review initiatives and collate themes that emerge over the year to track what lessons can be learned about where the learning of equity principles can be strengthened.





Provider Wellness

Care Setting	Indicator	Baseline	Target 2024-25
All	Voluntary turnover	14.83% less than Ontario Hospital Association (8.78% turnover)	10% less than Ontario Hospital Association Winter 2024 Survey
All (Clinical)	Early service turnover (employees hired within 2 years) for nurses (RNs and RPNs)	30%	25.5%

At Unity Health Toronto, preserving the health and well-being of staff, physicians, learners and volunteers remains a top priority and a centerpiece of our overall retention efforts. In the past year, both the hospital sector as a whole and Unity Health have seen steady improvements in health human resource pressures. A combination of human capital strategies and labour market changes have contributed to reductions in employee turnover levels in line with pre-pandemic norms. That said, despite marked improvements in health human resources measures, Unity Health continues to experience acute health human resource pressures in some areas of the organization. For this reason, we will maintain a focus on voluntary turnover and further develop robust programming and strategies for the attraction, retention and sustainment of talent.

Specifically related to health and well-being, we continue to gather information from employees through engagement surveys, exit interviews, employee governance such as nursing and health disciplines advisory councils and rounding, to support our program planning to focus on the most leveraged areas of provider wellness that will advance the health and well-being needs of staff, physicians, learners and volunteers. We are committed to supporting an array of programs, which include recognition events and employee mental health programming and benefits.

Actions to improve provider wellness:

- 1) Implement Federal Nursing Retention Toolkit
- 2) As part of the *Employee and Physician Wellness Strategy*, continue funding three programmatic elements (Calm, On-site Massage, Wellness Coordinator site-based programming) to support wellness
- 3) Provide mental health programming for employees and physicians that includes Mental Health First Aid, Mental Health Leadership Certificate, Mental Health Benefit, and Employee and Family Assistance Program (EFAP) promotion

- 4) Initiate LAUNCH (Leadership Academy at Unity Health for Careers in Healthcare) to provide opportunities for enhanced leadership development for current and aspiring leaders across the organization



The Cardinal Ambrozic Houses of Providence Long-term Care Home

Our long-term care home, the Cardinal Ambrozic Houses of Providence (Houses), is truly a home for each of its 288 residents. With a focus on quality of life and the implementation of best practices, the Houses provide the highest standards of comfort, care and safety for residents.

The profile of residents continues to change; residents continue to be vulnerable, older and frailer on admission, and we are experiencing an increase in complexity of resident care needs. The Houses is experiencing the impact of "aging at home" with increased acuity of resident care and thereby greater

demands on staff, services and resident/family expectations.

The Houses is committed to partnering with residents and families, as this is fundamental to the overall care residents receive and their experience at the Houses. The Houses have processes in place to ensure residents and families are involved, heard and partnered with in care decisions. Further, there is a Resident and Family Council to ensure input from residents and families is regularly gathered and used to inform various strategies, including identifying annual quality priorities.

Resident Care Experience – The Cardinal Ambrozic Houses of Providence Long-term Care Home

	Baseline	Target 2024-25
The percentage of residents who responded "usually" to the question "do you feel listened to by staff"	70%	75%

For 2024-25, the Houses wants to ensure that residents feel they are listened to, and have set this as a priority. Asking residents about their experiences related to the care and service they receive is key to improving quality of care. When residents feel comfortable sharing

their thoughts, it allows care providers to identify areas for enhancement and address concerns promptly. When residents feel their needs and preferences are listened to, it empowers them to actively participate in their care decisions.

Activities to improve the resident care experience:

1) Obtain additional detail from residents on areas identified as needing improvement in survey responses by conducting focus groups

3) Raise awareness of information that exists to support communication in addition to the use of interpreter services

2) Explore use of technology for residents whose first language is not English



Safe – The Cardinal Ambrozic Houses of Providence Home

	Baseline	Target 2024-25
Number of newly acquired Stage 2, 3, 4, unstageable and deep tissue pressure injuries in the Cardinal Ambrozic Houses of Providence	25	25

Pressure injuries are the breakdown of skin integrity due to pressure. This can occur when a bony prominence on the body has persistent contact with an external surface, such as a bed or wheelchair. In 2023-24, the Houses were successful in reaching a target of reducing pressure injuries (PI) by more than 10%. The Houses will

continue working on improvements in the PI Program to maintain current performance. This year the Houses team will be using their internal data, which is more accurate and available in real time, allowing clinical staff to be more responsive to pressure injuries.

Activities to advance resident safety:

- 1) Raise registered staff awareness of wound staging through education
- 2) Conduct focus groups with registered staff to improve the process for confirmation of wound staging
- 3) Explore technology and tools to facilitate skin and wound healing
- 4) Conduct an inventory of pressure/relief/air mattress

Equitable - The Cardinal Ambrozic Houses of Providence Long-term Care Home

	Baseline	Target 2024-25
The percentage of staff, leaders, physicians, residents and family council members in the Cardinal Ambrozic Houses of Providence who have completed relevant anti-racism and equity, diversity and inclusion education	N/A	35%

A priority of the Houses is to reduce instances of racism and discrimination while embedding principles of equity, diversity and inclusion into every aspect of its operations. Through a knowledge-to-action approach, this year's emphasis will be on education to assist leaders, staff, residents and family members

to recognize, speak about and address racism in the moment. Additionally, the Houses are concentrating on centering the input of staff in addressing racism, as well as incorporating equity into policies and practices to improve the experiences of staff and physicians as well as the quality of care we provide.

Activities to advance resident safety:

- 1) Create an Anti-racism, Equity, Diversity and Inclusion Committee in the Houses
- 2) Directors, Managers and Operation Leads in the Houses to take specific workshops related to Anti-racism, Equity, Diversity and Inclusion that are pre-scheduled throughout the year
- 3) Raise awareness of Equity, Diversity and Inclusion among staff, resident and family councils
- 4) Develop common equity language in policy content

Activities to Advance our Quality Priorities

Unity Health's Quality Management System (QMS): An Enabler to a Culture of Improvement

To support improvements in each priority area, we will continue to focus on organizational capacity and capability to drive continuous improvement and implement structures and processes required at the program and local level. A key enabler will be the continued implementation of our Quality Management System (QMS) to streamline, integrate and sustain improvement across all levels of the organization.

The QMS is an assembly of structures, responsibilities, processes and resources explicitly designed to monitor, assess and improve the care experience. Built on a foundation of purposeful patient and family partner engagement, the QMS consists of four domains addressing:

- What do we want to achieve as an organization?
- How are we doing?
- What are we doing about it?
- How are we sustaining improvements?

Implementing the QMS will support improvements in all dimensions of quality and will facilitate a systematic, data informed and evidence-based approach to improvement. It will allow for continuous testing, evaluation and the engagement of staff, providers, learners and patient and family partnership in improvements.

- Structural elements of the QMS include:
- Program Quality and Performance Councils
- Program Quality Scorecards
- Quality and Performance boards
- Improvement huddles

New Electronic Patient Record (EPR): An Enabler to Improve Care at Unity Health

At Unity Health, we believe in creating a health care journey for patients and care teams by enabling physicians, staff and learners to share information, and work closely together to ensure each patient receives the best care experiences possible across the entire health care spectrum. Implementation of a new electronic patient record (EPR) system brings us together as a connected organization so we can deliver the best care experiences, together. For this reason, we named our EPR project, *Project Connect*.

Project Connect is a step forward in our path towards integration. It will connect our multi-network sites across multiple care environments, delivering and supporting care from home to hospital to community. From the planning to the implementation phases of the project, quality is top of mind to ensure that our system is designed and implemented to enhance our capability to create benefits and improvements across all quality dimensions. These benefits include:

- Improved **care effectiveness** and **safety** through increased adherence and adoption of evidence-based practices and clinical standards
- **Real-time access** to patient data by multiple care providers
- More **efficient** care delivery and reduction in errors by enabling information verification mechanisms and alerts in the system
- Using a single system to **integrate** patient information from different care settings across our sites, allowing for more efficient communication between care providers

- Improved patient access to their personal health information so that they can communicate their preferences and make more informed decisions about their care, leading to enhanced **care experiences**
- Improved ability to provide **equitable** and culturally competent care by providing system functionalities to capture thorough patient demographic information
- Updated interface and access through various device types; providing easy navigation to the right information at the right time, which reduces provider workload and stress and enhances user experience and **provider wellness**

We will focus on laying the groundwork for data collection and monitoring the realization of these benefits both short and long term. The new EPR system will enable collection and storage of data electronically, providing a strong data infrastructure to support continuous quality improvements activities across Unity Health.