

OVERVIEW:

William Osler Health System (Osler) is an accredited hospital system comprised of Brampton Civic Hospital, Etobicoke General Hospital and Peel Memorial Centre for Integrated Health and Wellness. Osler also operates a unit at the Reactivation Care Centre at the Humber River Hospital – Church site, and a Withdrawal Management Centre in Brampton. Together, we provide patient-inspired health care to 1.3 million people in Brampton, Etobicoke and surrounding communities, serving one of the fastest-growing and most culturally diverse regions in Ontario.

At Osler, we are committed to the delivery of safe, high-quality care to our patients, every time. One of the many ways we demonstrate this commitment is through our Quality Improvement Plan (QIP) which highlights our areas of focus for the next year to help ensure the delivery of safe, effective, peoplecentered, efficient, timely and equitable care in our hospitals.

Osler's 2022 QIP aligns with our 2019-2024 Corporate Strategic Plan and Patient Safety Plan and was informed by our Patient and Family Advisory Council (PFAC). It reflects the voices of our many stakeholders and takes into consideration the ongoing impact of the COVID-19 pandemic and the recovery of our hospital's programs and services.

OSLER'S 2022 QIP INDICATORS & GOALS

Osler's 2022 QIP indicators remain the same as our 2021 indicators, but with new goals that will continue to move us forward and support our ongoing progress and gains in these priority areas.

Our 2022 QIP goals are:

- 1. Decrease Workplace Violence Incidents by 5%
- 2. Increase Medication Reconciliation Upon Leaving Hospital by 3%.
- 3. Increase the number of Patients Who Report Leaving the Hospital With Enough Information by 3%
- 4. Decrease Time to Inpatient Bed by 3%

Osler's full 2022 QIP work plan is available on our website.

OSLER'S 2021 QIP FINAL RESULTS

Osler performed well against our 2021 QIP indicators, all while managing significant challenges posed by the COVID-19 pandemic, ending the calendar year with two green (on target) and two yellow (approaching target) indicators.

I. Number of Workplace Violence Incidents – GREEN

On the number of Number of Workplace Violence Incidents mandatory indicator we ended the year with 123 incidents reported against a maximum target of 170. With the number and severity of workplace violence incidents increasing during the COVID-19 pandemic, our focus in 2021 continued to be on initiatives aimed at reducing these incidents and creating a safe, respectful environment for all.



In 2021, we revised our Workplace Violence Policy and launched a new Respect in the Workplace Program with numerous resources and tools that supports this commitment to safety and civility at work.

2. Medication Reconciliation Upon Leaving the Hospital - YELLOW

On the **Medication Reconciliation Upon Leaving the Hospital** priority indicator we ended the year with 87.3 per cent of patients having a Best Possible Medication History Plan created when discharged, just below our goal of 87.7 per cent. This year's progress can be attributed to ongoing initiatives such as enhancing our ePrescription tool, adding Medication Reconciliation on Discharge to Order Sets (instructions or directives to other health care workers regarding the treatment of a patient) and increasing physician engagement.

3. Leaving the hospital, did you receive enough information? – Yes, Completely - YELLOW

On the **Leaving the hospital, did you receive enough information? – Yes, completely** priority indicator we ended the year with a score of 76 per cent against a target of 78 per cent having implemented a number of different improvement initiatives to further empower patients with the information they need to feel confident in managing their condition after discharge, including the use of Patient Oriented Discharge Summaries (PODS), the expansion of the Patient Concierge role, the development of an online discharge checklist, and more.

4. Time to Inpatient Bed 90th Percentile - GREEN

On the **Time to Inpatient Bed 90**th **Percentile** mandatory indicator, which measures the maximum length of time that 90 per cent of patients admitted from the Emergency Department (ED) wait for an inpatient bed or an operating room, we ended the year above target will an average time of 28.8 hours against a target of 42.2 hours.

The pandemic played a significant role in this result. Like many hospitals across the province, Osler's EDs saw a decrease in patient volumes during the pandemic as people sought to minimize their risk of potential exposure. This, combined with the implementation of a number of improvement initiatives, contributed heavily to our ability to meet our target on this indicator in 2021. For example, we launched our Leaving the Hospital by 11 a.m. and Estimated Date of Discharge initiatives to help reduce wait time through more effective and efficient transitions from hospital to home or to an alternate care facility. We also continued to utilize our Operational Command Centres to track patient activity across all sites in real-time, 24/7 to support timely decision-making, better capacity planning and more seamless care for patients.

At Osler, patient safety is a top priority and we never stop looking for ways to improve the delivery of care for our patients, staff, physicians and volunteers. We are committed to applying best practices in what we do every day to ensure we are delivering safe, high quality care to our community and fulfilling our Vision: patient-inspired health care without boundaries and Mission: innovative health care delivered with compassion, every time.