



# 2022-23 Quality Improvement Plan

Updated: September 12, 2022

Priority	Measure	Description	2021-22 Performance	2022-23 Performance					Year End Forecast	2022-23 Target	
				Q1	Q2	Q3	Q4	YTD			
<b>Heart icon Patient Safety</b>											
Provide Safe, High Quality Care	Serious Safety Event Rate (SSER)	Rolling 12 month Serious Safety Events expressed per 10,000 adjusted patient days	0.39	0.26				0.26		0.45	
<b>House icon Access</b>											
Provide Timely Access to Care	Dentistry	Volume of patients waiting more than 1 year for appointment or procedure	372 (Jan 2022)	359						279 (25% decrease)	
	Other Pediatric Services		156 (Jan 2022)	166						78 (50% decrease)	
<b>First aid icon Infection Control / Public Health</b>											
Reduce Healthcare Acquired Infections	Infection Prevention and Control Measures	Hand Hygiene Compliance (Moments #1 and #4)	% Hand hygiene audit samples compliant for Moment #1 (before patient/patient environment contact) and Moment #4 (after patient/patient environment contact)	Moment #1: 86% Moment #4: 90%	Moment #1: 85% Moment #4: 88%				Moment #1: 85% Moment #4: 88%		Moment #1: 85% Moment #4: 85%
		CLABSI	Central Line-Associated Bloodstream Infections per 1,000 central line-days	1.51	1.03				1.03		1.07
<b>Lightbulb icon Safe &amp; Healthy Workplace</b>											
Keeping Our People Safe	Lost Time Incident Rate	Number of recordable incidents per 100 employees that resulted in lost or restricted days or job transfer, due to work related injury or illness	0.99	0.62				0.62		1.00	
<b>Person icon Patient Experience</b>											
Improve Health Centre Wayfinding	Patient & Family Experience Survey Results for Wayfinding	% of favourable responses to question "Hospital signs and directions make it easy for patients and families to find where they need to go"	78.3%	Survey expected to re-launch in September 2022 (results anticipated for Q3 report)				TBD		85%	
<b>Bar chart icon Patient / Clinical Outcomes</b>											
Advance Improved Clinical Outcomes	QPS Committees with (and achieving) Clinical Outcome Improvement Priorities & Targets	% of 24 QPS Committees meeting requirements to have clinical outcome improvement priorities & targets set, and % of those achieving set targets	With targets: 55% Achieving: --	Survey expected to re-launch in October 2022 (results anticipated for Q3 report)				TBD		With targets: 55% Achieving: 25%	

Source: Performance Analytics, Occ. Health & Safety, Patient Safety & Risk, IPAC

Target tracking to be met Potential issues; target at risk Target not anticipated to be met