



2023-24 Quality Improvement Plan

Updated: February 22nd, 2024

Priority	Measure	Description	2022-23 Performance	2023-24 Performance					Year End Forecast	2023-24 Target	
				Q1	Q2	Q3	Q4	YTD			
📍 Patient Safety											
Provide Safe, High Quality Care	Serious Safety Event Rate (SSER)	Rolling 12 month Serious Safety Events expressed per 10,000 adjusted patient days	0.65**	0.79**	0.93	0.95		0.95		0.45	
🏠 Access											
Provide Timely Access to Care	Surgical Long Waiters	The percentage of patients waiting more than the recommended time based on the patients assigned priority level	64% 1,972 patients	65% 2,038 patients	70% 2,210 patients	68% 2,083 patients		68% 2,083 patients		15% or less	
	Length of stay (LOS) in the ED for admitted patients	Length of stay (triage time to ED departure) in the ED for admitted patients -90th percentile, measured in minutes-	640 min 90th percentile	667 min** 90th percentile	637 min** 90th percentile	609 min 90th percentile		635 min 90th percentile		540 min 90th percentile	
🏥 Infection Prevention & Control											
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: 89%	Moment #1: 85%** Moment #4: 87%**	Moment #1: 86% Moment #4: 86%	Moment #1: 85% Moment #4: 86%		Moment #1: 85% Moment #4: 86%		Moment #1: 85% Moment #4: 85%
		CLABSI	Central Line-Associated Bloodstream Infections per 1,000 central line-days	1.6	3.18	2.75	3.28		3.07		1.07
💡 Safe & Healthy Workplace											
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	0.62	0.18	0.00	0.00		0.06		1.00	
👤 Patient Experience											
Improve Health Centre Wayfinding	Wayfinding Quick Survey Results	% of favourable responses to question "Did you have any trouble finding your way through the health center today?"	87.1% (patient & family experience survey)	86% (12/14)	83% (10/12)	79% (11/14)		83% (33/40)		85%	
📊 Patient / Clinical Outcomes											
Advance Improved Clinical Outcomes	QPS Committees with (and achieving) Clinical Outcome Improvement Priorities & Targets	% of QPS Committees meeting requirements to have clinical outcome improvement priorities & targets set, and % of those achieving set targets	With targets: 50% Achieving: 35%	annual self-assessment survey not expected to be completed by March 31, 2024				N/A		With targets: 60% Achieving: 25%	

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

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