Quality Improvement Plans 23/24 (QIP): Progress Report on the 2022/23 QIP

PROGRESS REPORT FOR PRIORITY INDICATORS RENFREW VICTORIA HOSPITAL

ID Measure/Ind	licator from 2022/23	Org Id	Current Performance as stated on QIP2022/23	Target as stated on QIP 2022/23	Current Performance 2023	Comments	
from hospital f summaries are care provider v	patients discharged for which discharge e delivered to primary within 48 hours of arge from hospital.	RVH	95%	95%	98%	EPIC, our EMR has allowed us to increase performance on this Metric.	
Change Ideas from Last Years QIP (QIP 2022/23)		in	this change idea plemented as ntended? (Y/N button)	Lessons Learned: (Some Questions to Consider) What was your experience with this indicator? What were your key learnings? Did the change ideas make an impact? What advice would you give to others?			

I	Measure/Indicator from 2022/23	Org Id	Current Performance as stated on QIP2022/23	Target as stated on QIP 2022/23	Current	Comments	
4	Percentage of respondents who responded "completely" to the following question: Did you receive enough information from hospital staff about what do if you were worried about your condition or treatment after you left the hospital?		58.03%	60%	No Data for 2022-2023	RVH, in alliance with TOH and other sites in the Region have been working to procure a new Patient Satisfaction Survey platform. This will be in place for April 1 st , 2023, to allow us to start the new fiscal year with survey feedback for Inpatient and ED.	
	Change Ideas from Last Years	imple	is change idea emented as I? (Y/N button)	Lessons Learned: (Some Questions to Consider) What was your experience with this indicator? What were your key learnings? Did the change ideas make an impact? What advice would you give to others?			
v p	ncrease compliance of after Yo isit summary for patients resenting to the ED and apatient unit admissions.	25		fiscal year.		ollected for the 2022-2023 data collected again	

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5	Medication reconciliation at discharge: Total number of discharged patients for whom a Best Possible Medication Discharge Plan was created as a proportion the total number of patients discharged.	RVH	100%	100%	88.96	Target has been adjusted this year to 90%	
Change Ideas from Last Years QIP (QIP 2022/23)		Lessons Learned: (Some Que Consider) What was your expe this indicator? What were learnings? Did the change ide impact? What advice would others?			operience with re your key deas make an		
Improve pharmacy involvement related to complex patients with multiple changes to their medication. Inpatient unit nurses will review medication reconciliation on discharge with less complex patients.		Yes		Medication Reconciliation upon Discharge continues to be a focus point for our care providers. BPMH stats for last year were high at 100%. 90% is a more accurate target for this indicator.			

ID	Measure/Indicator from 2022/23	Org Id	Current Performanc stated or QIP2022/2	e as า	Target as stated on QIP 2022/23	Current Performance 2023	Comments
6	Number of workplace violence incidents reported by hospital worker (as defined by OHSA) within a 12- month period.	RVH s	6		4	4	
		imple inter	is change idea emented as nded? (Y/N putton)	A Lessons Learned: (Some Questions to Consider) What was your experience with th indicator? What were your key learnings? D the change ideas make an impact? What advice would you give to others?			
Oc co ed	adership will work with ccupational Health and Safety mmittee to provide continued lucation to all staff and review data ements related to this indicator	′es		reviev	wed to look at	ace violence inci potential areas ducational oppo	for