



EM/ANB Quality Improvement Plan

On behalf of Quality, Patient Safety & Education

December 2019

Version 1.2

Introduction

Mission, Vision, Values

The mission, vision, and values form the foundation for all activities within an organization. These statements play a critical role in communicating the purpose of the organization to stakeholders, informing strategy development, quality improvement initiatives and developing measurable goals and objectives. Through interdependent, cascading roles and relationships, the statements define an organization's purpose and future aspirations.

Together our mission, vision and values guide the development of our strategy, including our quality improvement initiatives, help communicate our organization's purpose, and inform what goals and objectives will be used to determine whether our strategy is on track.

It is important that the quality initiatives chosen by EM/ANB are in line with it's mission, vision and values.



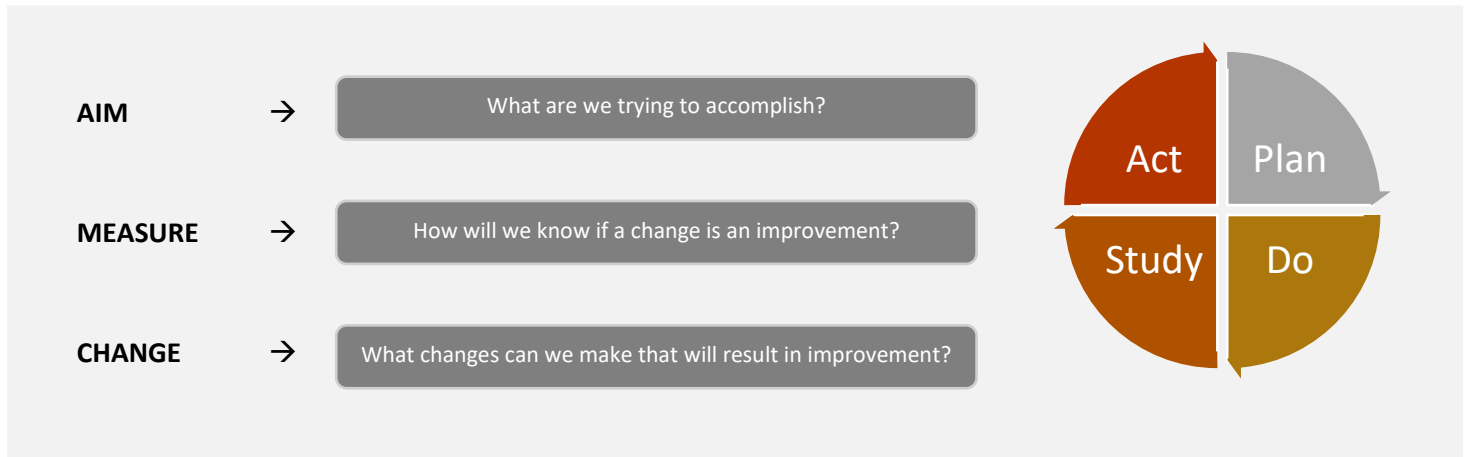
Purpose

Quality improvement refers to improving the way care is delivered for our patients and their families including which policies and practices are in place for service delivery. The EM/ANB Quality Improvement Plan serves as a commitment to the ongoing efforts to improve the quality of the services offered. EM/ANB will continuously strive to ensure that:

- Practices, policies and procedures are evidenced based.
- Practices, policies and procedures are appropriate to our patients, families, stakeholders and employee's needs.
- Risks to patients, families, stakeholders and employees are appropriately tracked and mitigated.
- Services are rendered in an effective and timely matter.
- Teams, clients/residents, and families are supported to develop the knowledge and skills necessary to be involved in quality improvement activities.
- Performance indicators are selected and regularly monitored.
- The results of the organization's quality improvement activities are communicated broadly, as appropriate.
- Promote a quality improvement culture throughout the organization.
- The spread and sustainability of quality improvement results is promoted and supported.
- Indicators and other quality improvement information are used to identify and address opportunities for quality improvement
- The organization's leaders monitor the progress and achievement of the quality improvement plan.

The Model for quality improvement

The continuous quality improvement process is driven by the PDCA (plan, do, study, act) improvement model. The PDCA model is a simple but powerful tool for accelerating improvement. It is recommended that all of our quality improvement activities follow this model.



Quality improvement activities

Quality improvement activities are currently found in many of the plans and frameworks designed for EM/ANB. These are listed below:

- EM/ANB Strategic Plan
- EM/ANB Risk management plan
- Disaster and emergency preparedness plan
- ANB Patient safety plan
- EMP Patient safety plan
- Quality and Safety Framework
- EM/ANB Ethics Code and Framework

Performance measurement

Performance measurement is the process of regularly assessing the results produced by the different initiatives listed in the Quality improvement activities. Continuous Quality Improvement involves taking actions as needed based on the results of the data analysis and the opportunities for performance they identify.

Measure of Service Quality	
Name	EM/ANB Strategic plan
Owner	General Manager, Integration & Organizational Performance
Definition	The 3 year EM/ANB strategic plan describes the areas where EM/ANB will be focusing its efforts from 2019 – 2022. Three focus areas were established and help guide our activities and project prioritization while providing transparency into our operations to our partners and patients.

Data Collection	<ul style="list-style-type: none"> • Patient Satisfaction • Performance on contractual key performance indicators • Accreditation Canada Results • Feedback from community partners • Feedback from employee roadshow • Accreditation Canada Work/life Pulse Survey for employees • Recruitment and attrition rates • Adherence to launch dates • Stakeholder surveys
Assessment Frequency	<p>Monthly to the Senior Management Team</p> <p>The plan is reviewed every three years</p>

Measure of Service Quality	
Name	EM/ANB Risk Management plan
Owner	VP, Quality, Patient Safety & Education
Definition	This Risk Management Plan is designed to identify and analyze risks to all assets of MHSNB, EMP and ANB with the aim of reducing harmful consequences and leveraging opportunities. The Plan effectively manages losses that may occur, and enhances continuous improvement of patient care service delivery in a safe environment. Extra-Mural / Ambulance New Brunswick (EM/ANB) recognizes that a formal risk management process is essential to managing risk within the organization.
Data Collection	Risk identification, assessment, response & measurement
Assessment Frequency	<p>Quarterly to the Senior Management Team</p> <p>Risk Management Plan reviewed by committee annually</p>

Measure of Service Quality	
Name	Disaster and emergency preparedness plan
Owner	Manager, Emergency Preparedness
Definition	This document describes how EM/ANB will prepare for, respond to, recover from, and mitigate the impact of future emergencies. Its purpose is to provide the framework for the organization, mechanisms and procedures necessary to accomplish these tasks. It is the hope that this will enable the employees of EM/ANB to save lives through provision of community-based healthcare and emergency service delivery and will also minimize the physical and mental health risks posed by major events.
Data Collection	<p>Annual Section/Appendix Review</p> <p>Emergency exercise updates</p> <p>Operational event updates</p>
Assessment Frequency	<p>Quarterly to the Senior Management Team</p> <p>The plan is reviewed annually for defined components within a three year cycle for a full review</p>

Measure of Service Quality	
Name	ANB Patient safety plan
Owner	Manager, Quality & Risk
Definition	<p>The primary objective of this <i>Patient Safety Plan</i> is to build the basic framework required to support all future patient safety activities while still being flexible enough to respond to new trends and research in this critical area. The activities outlined within this plan describe how we intend to build and maintain a patient safety-focused environment.</p> <p>This plan, composed of the following main objectives, is meant to be a living document that will be reviewed annually and will evolve in terms of completed activities, ongoing activities, and the identification of yet undiscovered areas of focus:</p> <ul style="list-style-type: none"> • Patient Safety Governance • EM/ANB Leadership for Patient Safety • Clinical Competence • Patient Safety Incidents Reporting • Patient Safety Incident Disclosure • Accreditation • Canadian Patient Safety Institute Safety Competencies • Vehicle Safety • Fatigue and Hours of Work • Patient Safety Incident Analysis • Patient Transfer during Adverse Weather • Infectious Disease Prevention and Control • Extra-Mural Referral Program
Data Collection	Identify and prioritize gaps in Patient Safety and set new goals
Assessment Frequency	Annual reporting as part of the Quality Improvement plan The Patient Safety Plan is reviewed and updated annually

Measure of Service Quality	
Name	EMP Patient safety plan
Owner	Manager, Quality & Risk
Definition	<p>The primary objective of this Patient Safety Plan is to build the basic framework required to support all future patient safety activities while still being flexible enough to respond to new trends and research in this critical area. The activities outlined within this plan describe how we intend to build and maintain a patient safety-focused environment.</p> <p>This plan, composed of the following main objectives, is meant to be a living document that will be reviewed annually and will evolve in terms of</p>

	<p>completed activities, ongoing activities, and the identification of yet undiscovered areas of focus related to patient safety:</p> <ul style="list-style-type: none"> • Board of Directors of EM/ANB INC. • EM/ANB Leadership for Patient Safety • Clinical Competence • Patient Safety Incidents and Near Miss Reporting • Canadian Patient Safety Institute Safety Competencies • Fatigue and Hours of Work • Incident Analysis • Patient Care during Adverse Weather • Accreditation • Medication Management • Home Care Safety Strategies • Skin and Wound Care • Infection Prevention and Control • Home Safety Risk Assessment
Data Collection	Identify and prioritize gaps in Patient Safety and set new goals
Assessment	Annual reporting as part of the Quality Improvement plan
Frequency	The Patient Safety Plan is reviewed and updated annually

Measure of Service Quality	
Name	EM/ANB Quality & Safety Framework
Owner	Manager, Quality & Risk
Definition	<p>The Quality and Safety Framework builds the foundation to support all future patient safety activities at EM/ANB. Its structure seeks to reflect the unique demands of caring for patients in NB while integrating the findings of the CPSI working group and the requirements of Accreditation Canada, by employing the CPSI's Safety Competencies as a touchstone.</p> <p>The six domains of The Safety Competencies as outlined by the CPSI will help guide the creation of a safety culture at EM/ANB. Risk and integrated quality management are also incorporated into this framework. In this way, EM/ANB has declared its intention to organize policy and practical matters in order to deliver patient care and business operations with quality, safety and risk in mind.</p> <p>This framework is meant to be a living document. It will evolve in terms of completed activities, ongoing activities, and the identification of undiscovered areas of focus. Initiatives for the Quality and Safety Framework are recorded through regular meetings, in the records of ad hoc committees that are formed as necessary, and all safety and quality related events stored in the EM/ANB incident reporting systems. These documents include all ongoing issues of quality, action plans, target dates, team member names, and status.</p>

Data Collection	<ul style="list-style-type: none"> • Sentinel events • Adverse events • Near misses • Quality and patient safety report
Assessment Frequency	Quarterly to the Quality and Patient Safety Committee of the EM/ANB board The Framework is reviewed and updated annually

Measure of Service Quality	
Name	EM/ANB Ethics Code and Framework
Owner	VP, Quality, Patient Safety & Education
Definition	EM/ANB's Code of Ethics and Framework is used to communicate the Organization's guiding principles of "safety" and "people-centered", describe the steps required to ensure values-based decision-making, outline the ethics consultation process, and also define the role of the Ethics Committee. It should be used not only to provide ethical support in daily decision-making for EM/ANB and third party employees, but also during the development of the Organization's policies, processes, and practices.
Data Collection	<ul style="list-style-type: none"> • Review of ethical dilemmas • Review of educational content available • Policy review
Assessment Frequency	Quarterly to the Senior Management Team The Framework is reviewed and updated annually

Evaluation and Reporting

An evaluation will be completed by the VP of Quality, Patient Safety and Education at the end of each fiscal year that summarizes the improvement initiative conducted for each of the activities listed in this document. The results of the findings will be posted in the EM/ANB Annual report.

Resources

<https://www.mainemed.com/sites/default/files/content/PI%20Plan%20Template%20-%20short%20version%20for%20small%20practices.pdf>

<http://www.hqontario.ca/portals/0/Documents/qi/qi-quality-improve-guide-2012-en.pdf>

<https://bcpsqc.ca/resource/improvement-101-learning-series/>