

Let's Make Healthy
Change Happen.



Quality Improvement Plan (QIP) Narrative for Health Care Organizations in Ontario – Sub-LHIN QIP 2017/18

This Collaborative Quality Improvement Plan (C-QIP) outlines specific quality commitments that health care providers in KW4 are making to patients, clients, and residents of Kitchener, Waterloo, Wellesley, Wilmot, Woolwich to improve palliative care at a system level.

As described at the [Waterloo Wellington LHIN Board Quality Symposium in September 2016](#), a Collaborative QIP is a formal, documented set of quality commitments that health care organizations make to their patients, clients, or residents, staff and community on an annual basis to improve quality through focused targets and actions that specifically address agreed upon sub-region needs.

Each organization will publicly post the C-QIP in hopes of encouraging a culture of shared learning, and will reflect on lessons learned, trends, and observations gained. Importantly, Collaborative QIPs are an “improvement” tool. While they are not “accountability” or “performance” management tools, each board, senior leadership, and the organization as a whole are expressing a public commitment for the planned collective improvements described in the plan (e.g. achieving targets set and undertaking the improvement activities).

In signing this document, each organization recognizes that no one has accountability or authority over another for items documented in the C-QIP; however, we are agreeing to collaborate for residents in this community.

Overview

Quality Governance Sessions were held in each Waterloo Wellington LHIN sub-region in 2016 regarding the development of Collaborative Quality Improvement Plans (C-QIP). The objective of sub-region C-QIPs is to:

- collaborate on QIP's for improved transitions and coordinated care per sub-region per area of focus
- leverage existing committees or working group project teams where the item of focus is already being addressed.

In the KW4 region, governors identified hospice palliative care as the key area of focus for the 2017/18 C-QIP. With this direction, stakeholders from organizations delivering palliative care in KW4 were brought together to identify a specific area of focus to support improved transitions and coordinated care for KW4 residents requiring palliative care. The group identified the following area of focus:

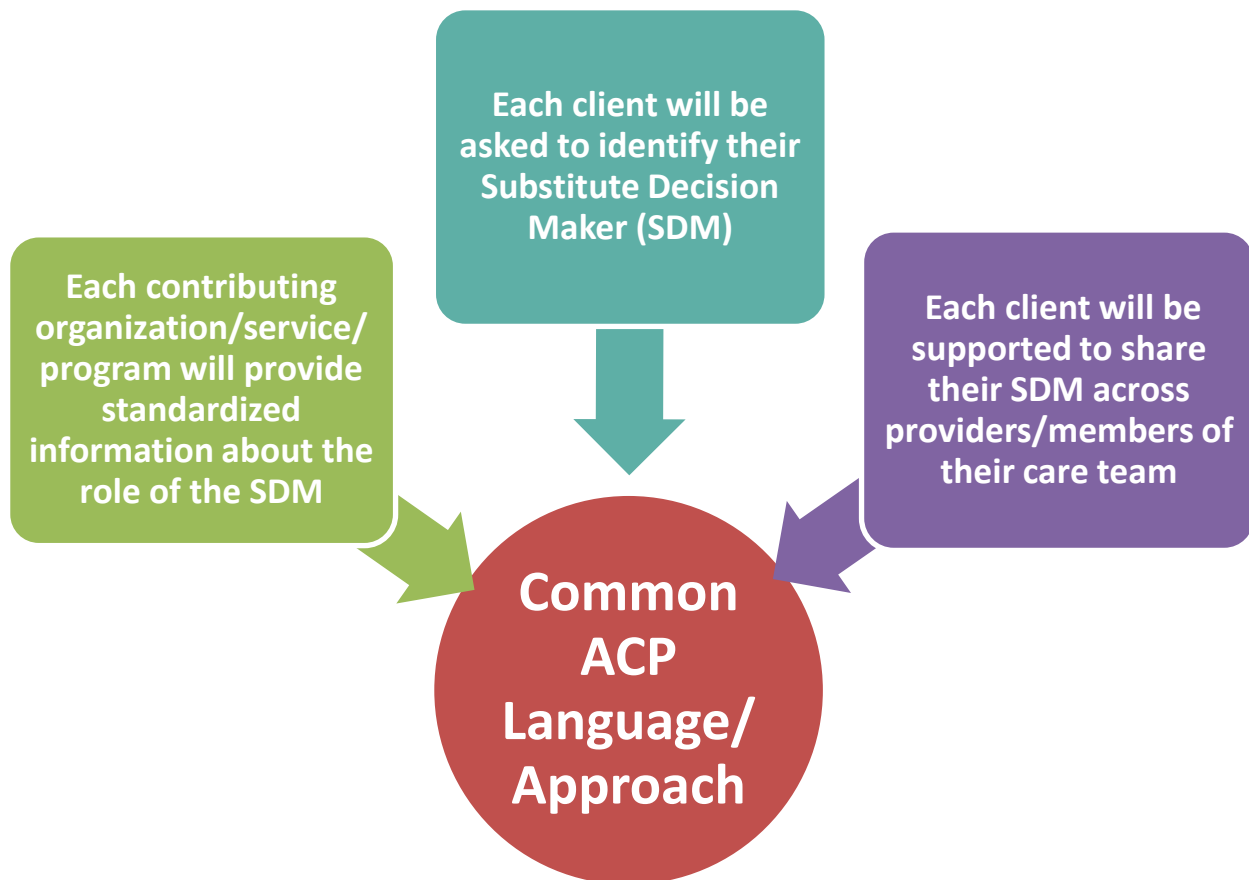
Create a common approach and common ACP/SDM language across the subLHIN. This will be achieved by:

ontario.ca/excellentcare

1. Providing standardized information about the role of the SDM
2. Asking each client to identify their Substitute Decision Maker (SDM)
3. Supporting each client to share their SDM across providers/members of their care team

Each contributing member will identify their own targets for each of the following process measures. (Consider a percentage increase over baseline). Key Measures of achievement of this goal include:

1. # of regional ACP materials distributed
2. # of adult patients/residents /clients who have SDM discussion documented in patient chart/record
3. a) Qualitative description of how organizations are sharing SDM info with other providers/members of the care team
and/or
3. b) # of SDM wallet cards requested from/provided to patients/ residents/client



Engagement of Patients/Residents/Clients

The Waterloo Wellington ACP initiative regularly engages with and supports patients/residents/clients as well as health care providers to support enhanced knowledge of advance care planning.

Additionally, patient and caregiver surveys are regularly conducted as a way of identifying required and evaluating improvement efforts that are currently underway in our hospice palliative care system. Sign-off

It is recommended that the following individuals review and sign-off on the Collaborative Quality Improvement Plan (where applicable):

I have reviewed and approved our organization's role in sub-LHIN Quality Improvement Plan

Organization **Hospice Waterloo Region**

Board Chair [Click here to enter text.](#)

Quality Committee Chair [Click here to enter text.](#)

Chief Executive Officer [Click here to enter text.](#)

Organization **K-W Seniors Day Program**

Board Chair [Click here to enter text.](#)

Quality Committee Chair [Click here to enter text.](#)

Chief Executive Officer [Click here to enter text.](#)

Organization **Lisaard House/Innisfree House.**

Board Chair [Click here to enter text.](#)

Quality Committee Chair [Click here to enter text.](#)

Chief Executive Officer [Click here to enter text.](#)

Organization **St. Mary's General Hospital (SMGH)**

Board Chair [Click here to enter text.](#)

Quality Committee Chair [Click here to enter text.](#)

Chief Executive Officer [Click here to enter text.](#)

Organization **The Working Centre**

Board Chair [Click here to enter text.](#)

Quality Committee Chair [Click here to enter text.](#)

Chief Executive Officer [Click here to enter text.](#)

Organization **Trinity Village**

Board Chair [Click here to enter text.](#)

Quality Committee Chair [Click here to enter text.](#)

Chief Executive Officer [Click here to enter text.](#)

Organization **Waterloo Wellington Community Care Access Centre (CCAC)**

Board Chair [Click here to enter text.](#)

Quality Committee Chair [Click here to enter text.](#)

Chief Executive Officer [Click here to enter text.](#)

Organization **Woolwich Community Health Centre (CHC)**

Board Chair [Click here to enter text.](#)

Quality Committee Chair [Click here to enter text.](#)

Chief Executive Officer [Click here to enter text.](#)

Organization **Kitchener Downtown Community Health Centre (CHC)**

Board Chair [Click here to enter text.](#)

Quality Committee Chair [Click here to enter text.](#)

Chief Executive Officer [Click here to enter text.](#)

Organization **Lanark Heights and ST. Andrew's Terrace of S&R Nursing Homes Ltd**
Board Chair [Click here to enter text.](#)
Quality Committee Chair [Click here to enter text.](#)
Chief Executive Officer [Click here to enter text.](#)

Organization **Grand River Hospital, Renal Unit**
Board Chair [Click here to enter text.](#)
Quality Committee Chair [Click here to enter text.](#)
Chief Executive Officer [Click here to enter text.](#)

