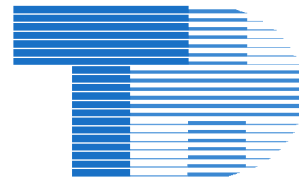


Quality Improvement Plan (QIP)

# Narrative for Health Care Organizations in Ontario

March 27, 2025



## OVERVIEW

At the Timmins and District Hospital (TADH), quality and safety are our top priorities. As part of our commitment to these priorities, we do our best to ensure patients receive appropriate, consistent health care in a clean and safe environment, in which they are treated with respect. This years QIP will continue to focus on reducing wait times, improving access and supporting collaboration between health providers to best serve our community and region.

## ACCESS AND FLOW

In accordance with Ontario Health's operational direction, Home First, TADH is prioritizing ALC leading practices from our hospital and beyond. Strategies to support this work include but are not limited to: identifying an estimated date of discharge, use of escalation tools and transition plans...

## EQUITY AND INDIGENOUS HEALTH

Comprised of representatives from Indigenous organizations and communities, the Indigenous Advisory Committee at the Timmins and District Hospital works to ensure that Indigenous Peoples, communities, patients, employees, and volunteers experience quality and equitable health care services. Additionally, the Diversity, Equity, Inclusion, Social Accountability, and Anti-Racism Committee has implemented a work plan with actions regarding the delivery of Indigenous Cultural Safety training (e.g., San'yas Indigenous Cultural Safety Training and The First Nations Principles of OCAP® training), anti-racism training, and addressing systemic inequities and racism experienced by Indigenous Peoples in the health care context.

## **PATIENT/CLIENT/RESIDENT EXPERIENCE**

Timmins and District Hospital is committed to enhancing the patient experience and continues to identify opportunities to enhance patient centered experience. This year our focus will be to embed patient and family advisors in our committees and working group. Furthermore, based on our Accreditation requirements we will be engaging our Patient and Family advisors in the development of a strategy to prevent the abuse of clients/patients. Finally, we will strategically grow our Patient and Family Advisors to reflect the diversity of the population of the Cochrane District.

## **SAFETY**

Timmins and District Hospital is pleased to participate in the Hospital safety characteristics and Adverse event Rate Measurement study (HARM) through the Canadian Institutes of Health Research. Healthcare associated harms are costly to the system. The objective of this study is to evaluate the relationship between safety strategies and patient safety in hospitals. This study supports our strategic vision of on going quality improvement strategies to improve safety in our setting. Our participation in the study over the next 3 years with over 50 other hospitals in the country. We look forward to this long term study and hope it assists in identifying the most efficient strategies to ensure a safe environment for both patients and staff.

## **PALLIATIVE CARE**

The Cochrane District OHT has been successful at obtaining funding for Palliative Care Coaches. TADH is supportive of this work and will assist in leading engagement with relevant community partners to develop strong partnerships which will ensure meeting evidenced based care for palliative clients in our region. Much of our focus for this year will focus on education related to recognized evidenced based approaches to care for our Palliative Care Coaches.

## **POPULATION HEALTH MANAGEMENT**

TADH is a partner in the Cochrane District OHT and will support the cQIP work for this upcoming year. As part of this work the region is focused on supporting key areas such as Hospital to Home, Home First Operational Direction, ALC Leading Practices, COPD and CHF care pathways, primary care resources, Mental Health and Addictions Provincial Data Set. TADH is actively involved in all of these population health strategies to support our communities.

## **EMERGENCY DEPARTMENT RETURN VISIT QUALITY PROGRAM (EDRVQP)**

Over the past year, our ED has focused on improving care coordination with primary care for clients without a primary care provider. Our goal was to recruit a NP to support this population, enhancing continuity of care and reducing ED revisits. Despite our efforts, we were unable to successfully recruit for this role. The Timmins Academic Family health team has also recently opening an Unattached Primary Care Clinic. We continue to monitor KPIs related to this initiative, specifically tracking the number of clients presenting without access to primary care. These data points inform ongoing strategies for improving care transitions and access to community-based services.

This year's EDRVQP audit identified key quality concerns, including challenges in safe discharge planning for clients who face barriers to outpatient care. Social determinants of health, such as housing insecurity, lack of transportation, and limited healthcare access, contribute to difficulties in follow up and care continuity. To address these challenges, TADH is developing a memorandum of understanding (MOU) with EMS to develop a Mobile Health unit. This initiative will expand point-of-care testing, wound management, and outreach services, particularly for individuals facing healthcare access barriers. By leveraging mobile health resources and integrating care with EMS, we aim to improve equitable health care access, enhance client outcomes, and reduce avoidable ED visits thereby also improving ambulance offload time. This initiative aligns with our vision of Providing exemplary care to Northerners by providing inclusive client-centered care that addressed the diverse needs of our community.

## **EXECUTIVE COMPENSATION**

We are dedicated to maintaining a performance-based compensation system that reflects our commitment to embedding equity, diversity and inclusion into all the work we do, and providing opportunities for growth and learning for our team members.

Through an analysis of the selected QIP indicators and the Hospital's 2022-2027 Strategic Plan, executive compensation for the 2025-2026 fiscal year will be linked to ensuring the full leadership team continues to support the front line team members by ensuring any safety, privacy and wellness needs are met. This initiative aims to enhance our environment for both staff and patients. The Leadership team will complete 6 leadership huddles in 2025-2026 and reports back on the challenges with action items created to highlight improvement in the organization.

4% of each executive's compensation will be tied to the successful achievement of this indicator.

## **CONTACT INFORMATION/DESIGNATED LEAD**

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## **OTHER**

It is important to note that our Quality Improvement Plan also is our Patient Safety Plan for this year. Although not all inclusive of Patient Safety Initiatives it supports some of the Patient Safety work in our organization.

## SIGN-OFF

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

I have reviewed and approved our organization's Quality Improvement Plan on

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Board Chair

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Board Quality Committee Chair

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Chief Executive Officer

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EDRVQP lead, if applicable

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