

Peterborough Regional Health Centre Quality Improvement Plan (QIP) 2025/26



One team, here when you need us most.

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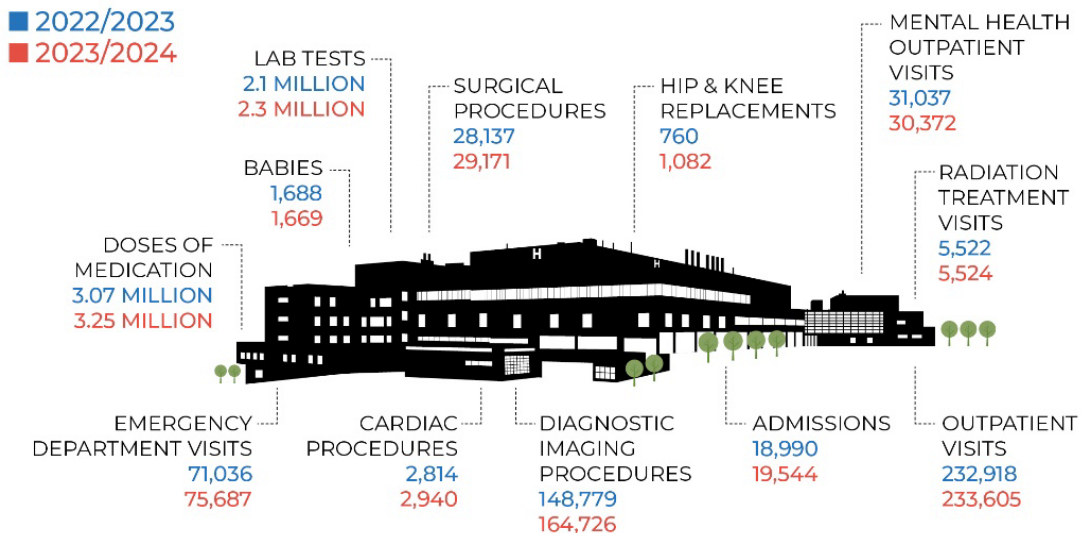
Peterborough Regional Health Centre
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Peterborough, ON K9J 7C6
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Overview

At Peterborough Regional Health Centre (PRHC), through our partnerships, commitment to quality, and dedication to providing the best patient and provider experience, we aim to improve the health of the population we serve and shape the future of healthcare in the region. We are driven and inspired by our purpose statement: “One team, here when you need us most.”

PRHC is a regional acute-care hospital providing tertiary services to a population of 600,000 people, which includes the residents of Peterborough City and County, Northumberland, the City of Kawartha Lakes, Haliburton, and three First Nations – Curve Lake, Hiawatha and Alderville. The geographic region we serve at PRHC is rapidly changing in terms of size, age and other key demographic factors. Our population is growing and is expected to increase by 24 per cent over the next two decades. Our patient population is also aging rapidly; a quarter of our population is aged 65 and older today, and the number of seniors in this age range is projected to increase by 40 per cent over the next 20 years, which creates unique health needs.

PRHC BY THE NUMBERS



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In November 2024, PRHC was among the first hospitals in Canada to be awarded participant status in our journey toward achieving the Age-Friendly Health System designation from the Institute for Healthcare Improvement (IHI). In December 2024, PRHC also opened a Reactivation Care Centre: a specialized, acute medical unit with an interprofessional team supporting patients to become as independent and active as possible and working with patients and families to connect them with the appropriate hospital and community partners and supports before they return home.

As a component of our 2024-29 Strategic Plan, PRHC has made a commitment to improve quality of care using a systematic approach. The approach PRHC will be implementing is called Whole System Quality: an evidence-based model that seeks to improve the performance, efficiency, and outcomes of an entire organization. Over the past year, PRHC has developed a framework for Whole System Quality and begun the process of piloting the model. Foundational to this model is the integration of patients, families and caregivers as active members of improvement teams, working in collaboration with care providers and leadership to co-design improvements to care and service delivery.

Access and Flow

To support patient transition practices in Peterborough, it has been identified that creative solutions must be based on a comprehensive, system-wide view of capacity across the continuum of care. PRHC continues to practice the Home First philosophy – a patient-centered approach focused on keeping people safe in their homes for as long as possible with community supports in place. To this end, the hospital collaborates with Ontario Health @ Home, Community Paramedicine, and Community Care Peterborough to support successful transitions from hospital to home.

In addition, in response to the need for timely access to high-quality care, PRHC has developed an integrated comprehensive care program, PRHC @ Home. This 16-week hospital-to-home program aims to identify individuals with no previous connection to home care who would benefit from comprehensive in-home support after experiencing a sudden change to their health and/or physical function. This approach to home care delivery enables patients to return to their community living environments and other flexible settings, where individualized care is provided as a bundled package.

PRHC is further operationalizing Alternate Level of Care (ALC) leading practices through the early identification of patients who are at risk of adverse functional outcomes, using the Identification of Seniors at Risk (ISAR) tool in the Emergency Department. Additionally, the Assess and Restore+ Team in the Emergency Department works with patients and their caregivers to establish baseline functional data that forms the basis for care planning.

Care plans are created in partnership with patients, their caregivers, and other members of the care team to ensure they are reflective of what matters to the patient and establish goals for discharge. This ensures ongoing, meaningful engagement with the patient and caregiver related to care and transition planning and supports successful outcomes across the continuum of care.

Equity and Indigenous Health

PRHC continues to focus on building and maintaining strong partnerships with the Indigenous communities we serve, including Curve Lake First Nation, Hiawatha First Nation, and Alderville First Nation. We are committed to supporting the Truth and Reconciliation Commission's Calls to Action to address systemic racism in healthcare, to advance equity, and to foster Indigenous health through a combination of strategic initiatives and enhanced practices.

We hired our first dedicated Lead to support this work and will be creating an Indigenous Navigator role in 2025. In November 2024, we launched our Equity, Inclusion, Diversity, Anti-racism, and Reconciliation framework. Underpinned by five (5) key pillars; Belonging; Education and Training; Policies and Programs; Data Analytics and Reporting; and Person-Centred Equity, a detailed action plan has been developed and is underway.

As a component of this plan, in 2025/26, all staff will complete foundational anti-racism, anti-bias, and Indigenous cultural safety training to cultivate a shared understanding and commitment to equity. To support this work, as a component of our 2025/26 QIP, we will be monitoring and reporting the care experience of patients who identify as Indigenous. Additionally, we will enhance the collection of sociodemographic data to better understand the population we serve and to reduce barriers that may contribute to health disparities.

Population Health

As a member of Peterborough Ontario Health Team (POHT), PRHC is working in partnership with other member organizations to deliver seamless, integrated care to the residents of Peterborough and the surrounding communities. To support population health, PRHC has been leading the development and implementation of an information-sharing framework and Information Technology infrastructure and services to enable POHT to collect, manage and use data from multiple service providers, organizations and sectors (e.g. primary, long-term, community and acute care, mental health and addictions and social services/housing). Through this information-sharing infrastructure, POHT will be able to collect and aggregate data from multiple member organizations to evaluate outcomes and generate predictive insights to support planning, program design and performance measurement.

Patient/Client/Resident Experience

As a component of our 2024-29 Strategic Plan, PRHC is committed to partnering with patients and families as we deliver care and programs. Central to this commitment is the collection and use of patient experience feedback to guide our work, and the engagement of patients, family members and caregivers to help co-design improvements.

At PRHC, we collect patient experience feedback through a combination of digital surveys and post-discharge phone calls. Survey results are shared on a recurring basis at the unit level, with our Patient and Family Advisory Council, and with various Program Quality Committees. To support continuous quality improvement, we will be enhancing our collection and use of patient experience feedback in 2025/26.

In collaboration with our Data Analytics team, over the coming year we plan to collect, store, and share patient experience data on a digital scorecard, which will inform quality improvement initiatives across PRHC. In addition, education on Experience-Based Co-Design will be provided to leadership and staff to support them in integrating Experience Partners into local, unit-level quality improvement teams. The inclusion of Experience Partners at the Board level continues to provide a strong patient perspective in quality-of-care governance and accountability. Our 2024-29 PRHC Equity, Diversity, Inclusion and Reconciliation Framework and action plan includes a commitment to employing strategies to diversify our team of Experience Partners to better reflect the communities that we serve.

Provider Experience

With a focus on recruiting and retaining top talent in the healthcare sector, the team at PRHC is driving forward a variety of Human Resources-related strategies to continue to support workplace well-being, culture and positive staff experience, as part of our strategic commitment to **be a workplace where people can thrive**. The HR team leading these strategies is comprised of Talent Acquisition Specialists and Organizational Development & Wellness Consultants.

Current recruitment initiatives underway at PRHC include the establishment of an internal Talent Acquisition (TA) team committed to sourcing and selecting candidates that match not only the requirements of the position, but also the culture of the team and organization. The TA team has added artificial intelligence to its sourcing strategies, and with the support of the hospital's Communications team, has been expanding PRHC's electronic presence within the local, academic, and international communities. We have had success in attracting both local and internationally-trained talent by promoting PRHC on multiple social media platforms and emphasizing the many benefits of our "Work Better, Live Better" recruitment brand. Incentive programs, such as the Nursing Graduate Guarantee and a staff referral program, have also been successful in boosting recruitment efforts.

After finding and hiring talent, PRHC is committed to retaining and recognizing the dedicated staff who make up our Health Centre. The Organizational Development team offers opportunities to **recognize and appreciate** team members through a length-of-service program, peer-nominated Excellence Awards and other staff events held throughout the year. The hospital also invests in ongoing staff learning and development through a dedicated Learning Fund and a new Micro-Credential program for leaders, offered through our partnership with Trent University.

The future is bright for PRHC talent, as this team works to forge partnerships with local high schools and post-secondary institutions to build a student pipeline to support future employment needs. We are working to establish robust succession planning, career pathways and coaching for staff while they are progressing in their careers at PRHC. Work is also underway to develop and launch a workplace well-being strategy. Aligning recruitment, retention, and recognition efforts with PRHC's Equity and Reconciliation framework will also be essential to ensuring the continued success and relevance of PRHC as an employer of choice.

We have maintained Workplace Violence Prevention as a key dimension within our Integrated Risk Model and 2024-25 QIP, with a focus on risk identification, communication, and staff training. In 2023, a new Workplace Violence Prevention Response and Oversight Committee was struck to help guide and lead improvement work, and in 2024 PRHC hired a new Workplace Violence Prevention Lead to support the ongoing implementation of improvements.

Patient Safety

Peterborough Regional Health Centre (PRHC) requires that quality reviews are conducted for all adverse events resulting in critical, major or moderate harm.. Safety incidents are recorded in our electronic incident management system by staff. Adverse events are reviewed at the next scheduled Quality Improvement (QI) Rounds, and the Patient Safety Committee functions as the oversight mechanism for QI Rounds.

In 2024, a quality improvement project associated with the use of central venous access devices (CVAD), was developed based on a recommendation coming out of a Quality Improvement review. Central line education, including simulation with the CVAD mannequin, was rolled out organization-wide in addition to interprofessional team reviews of the processes related to ordering, care coordination and communication of central venous catheters post-operatively.

Patient safety incidents and trends are monitored at the governance level through regular reports to the Board Quality Committee and at the operational level by various working groups, such as the Falls Working Group, Medication Safety Committee, and unit-based councils. The outcomes of quality reviews are shared with the Board of Directors, and leaders are held accountable to implement follow-up recommendations and actions.

Patients and families are engaged in quality reviews by the Patient Relations team, and their feedback is incorporated into the final recommendations.

Palliative Care

The Palliative Care Program at PRHC has been expanding across the entire organization to allow for early identification and assessment of patient needs. A Nurse Practitioner intake nurse role has been implemented in the Emergency Department to triage palliative patients for care. If the patient requires urgent admission for uncontrolled symptoms, they can be admitted to the Palliative Care unit directly.

The Palliative Care team works closely with our palliative physicians, who also care for patients in the community and can directly admit a patient to the Palliative Care unit if required, bypassing the ED. These physicians have privileges at Hospice Peterborough to ensure our patients seamlessly transition to hospice at end of life. PRHC meets with Hospice Peterborough weekly to discuss any possible transitions between the two organizations, and several PRHC leaders sit on the Hospice Board and Committees to ensure that we provide timely and excellent care for patients and their families.

If another hospital unit receives the palliative patient, Registered Nurses (RNs) from the Palliative Care team will round on the unit to support staff with orders, conversations with the family, and other

specialized services and supports. These RNs also provide one-on-one education and/or team huddles to support the staff caring for a palliative patient.

Emergency Department (ED) Return Visit Quality Program

The Emergency Department (ED) Return Visit Quality Program is an initiative designed to improve patient care in emergency departments across the province. It focuses on analyzing and understanding cases where patients return to the ED within a short period after their initial visit, especially when the return visit involves a serious or adverse outcome.

The key objective is to improve quality of care and enhance patient safety through supportive learning and process improvement. In 2024/25, an analysis was completed through physician-led audits, and several themes were identified for improvement in 2025/26, including:

- Decreasing Left Without Being Seen (LWBS) times. Each day we measure how many patients leave the department without seeing a physician. A LWBS Working Group has been initiated to review, identify and implement improvements, including optimizing the Pre-Triage Nurse role in reassessing and communicating with patients in the waiting room, creating criteria to identify high-risk patients who may leave and bring them to the attention of the medical staff, and increasing transparency about wait times.
- Sustaining Ambulance Offload Time improvements that were achieved in 2024/25. Our Flow Working Group reviews this metric and works to engage staff and assess processes for and barriers to meeting this goal.
- Decreasing Physician Initial Assessment (PIA) times. A PIA Working Subgroup has been created via our ED Quality Committee. This group includes ED leadership, physicians and nurses who review our current processes and areas to decrease the time it takes for patients to move through the ED and be seen by a physician.

Executive Compensation

The Excellent Care for All Act (ECFAA) requires that the compensation of the CEO and executives reporting to the CEO be linked to the achievement of the performance improvement targets laid out in the QIP. The purpose of the performance-based compensation related to ECFAA is to drive accountability for the delivery of the QIP, enhance transparency and motivate executives. As a component of the Executive Compensation Program, two percent (2%) of compensation is paid out based on the achievement of goals, including QIP indicators.

Contact Information




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Other

We thank you for taking the time to review our 2025/26 Quality Improvement Plan and thank all those who have supported our quality improvement efforts in 2024/25.

Sign-off

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

Position	Name/Signature
<i>Board Chair</i>	 Robert Gibson
<i>Board Quality Committee Chair</i>	 Deborah Pidgeon
<i>Chief Executive Officer</i>	 Dr. Lynn Mikula, President & CEO
<i>Other leadership as appropriate</i>	