

Peterborough Regional Health Centre Quality Improvement Plan (QIP) 2026/27



One team, here when you need us most.

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Peterborough Regional Health Centre
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Overview

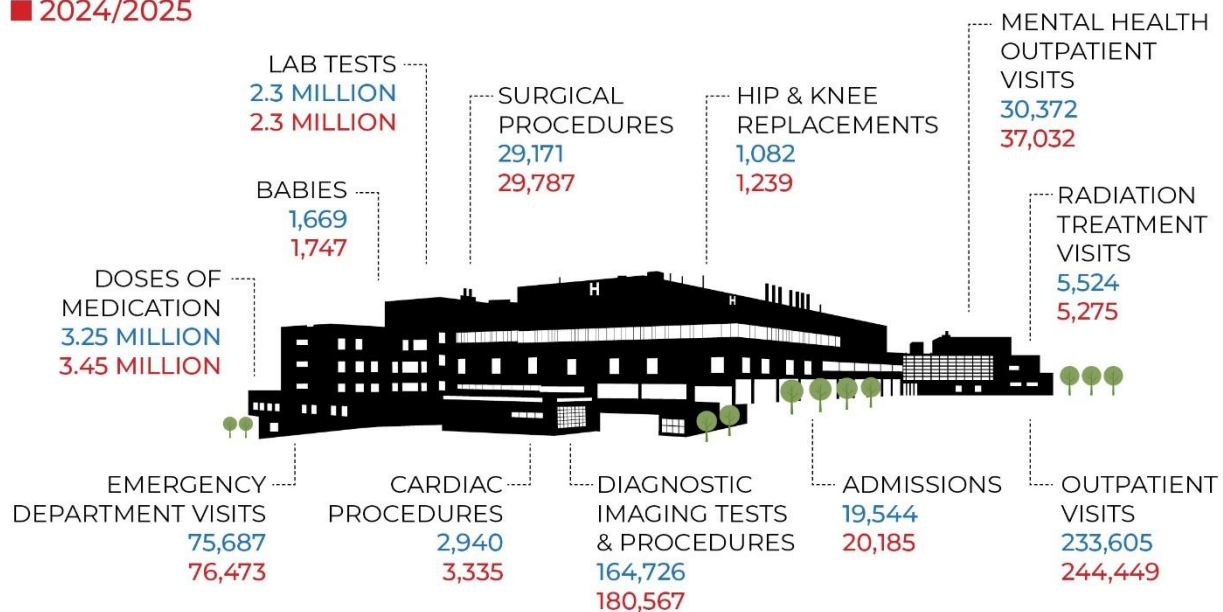
At Peterborough Regional Health Centre (PRHC), through our partnerships, commitment to quality, and dedication to providing the best patient and provider experience, we aim to improve the health of the population we serve and shape the future of healthcare in the region. We are driven and inspired by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

PRHC is a regional acute-care hospital providing in-patient and outpatient 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 changing rapidly. 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

■ 2023/2024

■ 2024/2025



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PRHC achieved significant milestones in 2025, reflecting our unwavering dedication to quality, innovation, staff well-being, and community impact. In June, PRHC became one of Canada's first hospitals of its size to earn the prestigious Age-Friendly Health System designation from the Institute for Healthcare Improvement (IHI)—recognizing its comprehensive seniors' care approach and alignment with the "4Ms" framework (What Matters, Medication, Mentation, Mobility).

PRHC also led in digital healthcare innovation by launching "Peregrine," an in-house data analytics platform championed at a Microsoft Canada event and rolling out the Surgical Department's eco-friendly "bring your own bag" initiative during Earth Month. These achievements underscore PRHC's purpose-driven excellence: one team, serving the people of our community when they need us most.

Access and Flow

PRHC is dedicated to enhancing access and patient flow by implementing evidence-based Alternate Level of Care (ALC) practices, maximizing the use of transitional care beds, and closely monitoring targeted quality improvement measures. Senior leadership integrates Senior Friendly Care into strategic planning, ensuring accountability through comprehensive dashboards that track ALC patient flow and length of stay.

The active planning for Lighthouse (the hospital's command centre) further supports real-time visibility and management of patient flow, enabling proactive decision-making based on high-quality data and more efficient allocation of resources across the hospital. Regular daily bed meetings, the Discharge Command Table – which provides interactive reports in our electronic medical record system – and weekly meetings with multidisciplinary teams help to identify and resolve discharge barriers promptly, using tools such as Identification of Seniors At Risk and Blaylock screening for patients at risk of prolonged hospital stay in the Emergency Department (ED).

A diverse and comprehensive team supports personalized care planning and smooth transitions, focusing on maintaining patient function and reducing hospital-acquired deconditioning. Estimated Discharge Dates (EDD) are set within 48 hours of admission and reviewed daily, with updated patient-centred whiteboards improving communication. Key quality measures guiding progress include increasing the number of patients discharged in the morning by 11:00 a.m., improving discharge documentation for patients with stays over 10 days, focusing on getting patients up and moving, and decreasing the time patients spend waiting for care in the Emergency Department.

The Home First philosophy ensures all community support is considered before any long-term care discussions take place, and that transition plans are shared with care partners. The PRHC at Home program continues to innovate and further advances patient-centred transitions, reducing readmissions and fostering recovery at home. Recognition as an age-friendly hospital reflects PRHC's commitment to seniors, highlighted by our integration of IHI's 4Ms framework – What Matters, Medication, Mentation, and Mobility – into daily practice for holistic, respectful, and safe care for older adults.

Equity and Indigenous Health

PRHC is advancing health equity and Indigenous health through our Equity, Diversity, Inclusion, Anti-Racism and Reconciliation Framework, which helps guide our work to address systemic and organizational barriers and support the Truth and Reconciliation Commission's Calls to Action. To support this work, PRHC created two dedicated roles and hired an EDI-R Lead and an Indigenous Program Navigator (IPN). Before hiring an IPN, PRHC collaborated with local First Nations to co-develop the job description, and community members actively participated in the hiring process.

We continue to expand staff education to reduce barriers to care and strengthen Indigenous patient safety. A new Indigenous Cultural Safety session for senior leadership and managers is being developed to support, in part, the creation of an Indigenous Health Framework. The insights gained through this training, along with ongoing engagement with Curve Lake First Nation, Hiawatha First Nation, Alderville First Nation, and the urban Indigenous population, will guide the development of the Framework in early 2026.

In the coming year, we plan to finalize the Indigenous Health Framework and explore the development of an on-site Indigenous healing space for Indigenous patients, their families, and staff at the hospital. We will continue to provide opportunities for staff to complete training in anti-racism, anti-bias, and Indigenous Cultural Safety, and we will establish Employee Resource Groups to further support staff and strengthen representation.

In the year ahead, PRHC will continue improving patient experience and reducing disparities through the collection and analysis of sociodemographic data. We will recruit Experience Partners who identify as Indigenous to ensure that care delivery is shaped by their perspectives.

Population Health

As a member of Peterborough Ontario Health Team (POHT), Peterborough Regional Health Centre (PRHC) continues to advance a population health-management approach by co-developing shared data and analytics capabilities with local system partners. Building on the foundational development of an integrated information-sharing framework, PRHC has further expanded its data environment built on Microsoft (MS) Fabric to securely onboard and connect multiple community health and service providers, including Community Paramedicine, the Canadian Mental Health Association – Haliburton, Kawartha, Pine Ridge branch, and Lakelands Public Health, with additional partners to be added throughout 2026/27. This shared infrastructure is enabling the import and alignment of clinical, operational, and sociodemographic data across sectors to support proactive planning, performance monitoring, and system-level quality improvement.

Within PRHC, MS Fabric is already being used to support real-time monitoring of key operational indicators (e.g., ED wait times, total ED visits per 1,000 patients). At a broader system level, early analytics have focused on priority flow challenges, including Ambulance Patient Offload Time/Transfer of Care intervals, allowing partners to jointly identify bottlenecks and opportunities to improve the movement of patients across care settings.

While full aggregation and system-wide analytics are still in development, our long-term intent is to use shared data to describe the sociocultural characteristics of our patient population, better understand patterns of service use across defined population groups, and identify targeted opportunities for smooth transition between care providers. Through these efforts, PRHC is contributing to POHT's goal of enabling equitable, person-centred, data-driven solutions that strengthen outcomes throughout the patient journey.

Patient/Client/Resident Experience

We remain committed to our strategic priority of partnering with patients and families in the design and delivery of programs and services. Patient experience feedback is gathered through multiple channels, including leader patient experience rounding, Patient Relations, standardized experience surveys, and the active involvement of Experience Partners (Patient & Family Advisors) in co-designing quality improvement initiatives with staff.

This year, we implemented four new standardized digital surveys in alignment with Ontario Hospital Association recommendations, while continuing to offer the option for inpatients to be surveyed by telephone. Survey results are regularly shared with unit teams and leaders, Program Quality Committees, the Length of Stay Steering Committee, the Board Quality Committee, and the Patient & Family Advisory Committee.

Looking ahead, we plan to improve our use of Artificial Intelligence to group and theme patient comments, enabling deeper insights to inform quality improvement initiatives. Sharing patient experience specific data on a digital scorecard has supported broad monitoring of key measures, and future collaboration with the Data Analytics team will automate reporting of all patient experience survey feedback.

In 2026/27, education on Experience-Based Co-Design will expand beyond leadership to include new staff during orientation and front-line teams through huddles. We also aim to broaden the use of individual patient stories—currently shared with the Board Quality Committee—to other committees and front-line teams, inspiring and motivating initiatives that elevate the patient experience.

Aligning future activities with the 2025-29 PRHC Equity, Diversity, Inclusion, Anti-Racism and Reconciliation Framework, we will be developing strategies to diversify our team of Experience Partners to better reflect the communities we serve.

Provider Experience

PRHC continues to advance its strategic commitment to being a workplace where people can thrive. Guided by our Well-Being Framework and Accreditation priorities, we have implemented initiatives focused on staff experience, engagement, retention, inclusion, and development.

Our Workplace Well-Being Framework is now operational, and outcome measurement has begun. The Talent Acquisition, Organizational Development, and Wellness teams have expanded their reach through Unit Champions, Leadership Advisory, and Peer Support Groups, strengthening engagement and impact. Talent Acquisition efforts have significantly reduced staff vacancy rates—from nearly 20 per cent in April 2023 to approximately 6 per cent in 2024—through targeted recruitment strategies, incentives, and participation in Ministry-funded programs such as the Nursing Graduate Guarantee and Community Commitment Program for nurses.

Building on this success, we are in the planning stages of introducing an internal career pathway and support program to assist staff with career planning, and leaders with staff career advancement best practices.

Initiatives to attract students have grown through partnerships with local school boards and organizations, including Junior Achievers. Activities such as high school co-op placements, Take Our Kids to Work Day, and participation in career fairs have embraced our community connections and supported long-term recruitment goals.

PRHC also contributed to the Peterborough Nogojiwanong Workplace Inclusion Charter as a steering committee member, aligning this work with our Equity, Diversity, Inclusion, Anti-Racism and Reconciliation and Well-Being Frameworks to enhance recruitment, retention, and staff culture.

Staff engagement was measured through the recent Health Standards Organization survey, achieving an overall engagement score of 61.3 per cent. Corporate action plans have been developed and shared based on these results.

Recognition programs, including length-of-service awards and peer-nominated Excellence Awards have continued to demonstrate success at recognizing and appreciating team members. Excellence awards were realigned to reflect PRHC's strategic values and participation targets were exceeded this year.

Finally, leadership learning and staff development remain a priority. Organization-wide cascading goal setting has been implemented, and an initiative called PRHC University was launched to provide leaders with advanced coaching and innovation skills. Staff learning opportunities have expanded through the Learning Fund and additional training focused on physical and psychological safety and wellness have been offered.

Patient Safety

PRHC is committed to preventing “never events” through a comprehensive patient safety strategy that emphasizes robust reporting systems, learning from serious safety events, standardized processes, clear communication, and a strong culture of safety supported by patient and family engagement.

To reduce the risk of preventable harm, PRHC has implemented targeted initiatives and safeguards, including the surgical safety checklist in all procedural areas, wound care prevention protocols supported by a specialized team, and barcode scanning technology for medication administration.

PRHC fosters an environment where healthcare professionals, staff, patients, and families feel safe to report and discuss risks, near misses, and serious safety events. The focus remains on system factors and failures, supported by fair accountability.

Just Culture principles guide PRHC in balancing individual performance with an understanding of how system and process issues contribute to safety events. Facilitated reviews of serious safety events involve those directly engaged in patient care, using tools that promote open, honest discussion and root cause analysis. These reviews identify opportunities for improvement, and recommendations targeting root causes are co-designed and implemented with the teams and monitored by leadership to prevent future harm.

To further support a focus on safety, in 2026 we will be launching daily tiered safety huddles, creating a more systematic approach to the identification and escalation of safety risks.

Palliative Care

Peterborough Regional Health Centre continues to strengthen its Palliative Care Program by embedding early identification and assessment of patient needs across the organization. A central component of this work is the Palliative Outreach team, which plays a vital role in assessing patients throughout the hospital and ensuring they are connected to the most appropriate supports. When patients are admitted to other hospital units, a Nurse Practitioner works with care teams, when appropriate, to help manage symptoms and support families to avoid the discomfort of moving the patient to the Palliative Care unit. At the same time, when symptoms become more complex or specialized interventions are needed, the team will also arrange for transfer to the Palliative Care unit to ensure patients receive the highest level of support.

Collaboration with community partners remains a cornerstone of the program. PRHC maintains strong ties with Hospice Peterborough, meeting weekly to plan transitions and share updates. Palliative physicians at PRHC also provide care at Hospice which allows patients to move smoothly to Hospice when the time comes. Several PRHC leaders also serve on Hospice boards and committees, reinforcing our shared commitment to compassionate, coordinated care at end of life.

We have invested in small portable infusion devices (CADD pumps) which are programmed to deliver medications to patients safely and effectively. These devices improve patient comfort and safety for patients with complicated medication routines. By combining advanced technology with a coordinated approach to care, PRHC ensures that patients and families receive consistent, high-quality support. Through collaboration, innovation, and a strong focus on dignity, PRHC continues to expand its Palliative Care Program to meet the needs of patients across the hospital.

Emergency Department (ED) Return Visit Quality Program

The Emergency Department Return Visit Quality Program (EDRVQP) is a province-wide initiative aimed at enhancing the quality of patient care in emergency settings. The program focuses on identifying and analyzing cases where patients return to the ED shortly after their initial visit, particularly when the return involves a serious complication or adverse outcome. By understanding these patterns, this initiative seeks to improve clinical practices and prevent avoidable harm.

The 2024/2025 EDRVQP audit identified two priority areas for the PRHC Emergency Department: reducing overall wait times and sustaining strong Ambulance Offload Time (AOT) performance. To address long wait times for Physician Initial Assessment (PIA), the ED implemented targeted strategies including hiring a dedicated Nurse Practitioner to expedite subacute flow and a data-informed physician work schedule to match physician availability with patient arrival patterns.

The patients who Left Without Being Seen (LWBS) has improved from 10 per cent to 8.8 per cent to date, following implementation of an 11:00 a.m. to 7:00 p.m. pre-triage nurse responsible for early assessments and waiting-room reassessments. To further decrease patients leaving without being seen or against medical advice, PRHC launched a public facing real-time wait-time dashboard (November 2025) and will align nursing schedules to predictable demand, as we have developed for the physicians' schedule.

AOT remains our strongest area of progress: standardized criteria to assess if a patient arriving by ambulance is stable enough to wait in a chair rather than an ambulance stretcher; enhanced monitored-bed flexibility; and improved offload nurse/charge nurse processes have produced sustained improvement from 134 minutes down to 40 minutes over the last two years.

The 2025/26 audit highlighted opportunities in care for older adults, and to decrease the number of patients who left against medical advice. With 31 per cent of visits involving adults aged 65+, the ED implemented a new Oncology Pathway in Epic, our electronic medical record system. The pathway, developed collaboratively with Oncology and Laboratory Medicine, flags active patients with cancer at triage and triggers early lab work and physician notification, which decreases their wait time to see a physician. This new pathway also prioritizes rapid treatment for patients undergoing cancer treatment who come to the ED with a fever and a low white-blood cell count, by using a direct lab-to-ED alert system.

To improve outcomes for older adults (aged 65+) who represented 44 per cent of PRHC trauma cases in 2024, the Geriatric Trauma Protocol was introduced in July 2025. The protocol applies geriatric-specific activation criteria to ensure timely, specialized care for older trauma patients. Since its implementation, it has reduced missed trauma activations, wait times to be seen by a physician, and ED length of stay for this population.

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 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 per cent (2%) of compensation is 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 2026/27 Quality Improvement Plan and thank all those who have supported our quality improvement efforts in 2025/26.

Sign-off

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

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