



St. Joseph's Health Care London

Progress on Quality Improvement Plan from 2011/12

| Priority Indicators for 2011-2012 | Baseline performance March 2011 | Goal for 2011-2012 | Progress to date | Comments |
|---|---------------------------------|------------------------|---|---|
| Hand Hygiene compliance before patient contact: The number of times that hand hygiene was performed before initial patient contact divided by the number of observed hand hygiene indications before initial patient contact multiplied by 100 | 57% | 75% | Based on year-end audits currently in progress we expect results to be 75% or better for 2011-12. | Through focused efforts in this area – improvements have been achieved. We are increasing the target to 85% for 2012-2013. |
| Methicillin Resistant Staphylococcus Aureus (MRSA) rates at Parkwood Hospital: Number of patients with hospital-acquired MRSA, divided by the number of patient days, multiplied by 1000 for Parkwood Hospital | 0.45/1000 patient days | 0.2/1000 patients days | The rate YTD is 0.6 per 1000 patient days. | Despite several initiatives targeted toward reducing hospital-acquired MRSA, the target for 2011-2012 was not achieved. We will continue to strive for improved performance and have set a target to reduce the current rate by 50% in 2012-13. |

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| Influenza Vaccination Rates: Increase rates of influenza vaccination among staff | 43% | 55% | 49% | We made improvements in our vaccination rates in 2011-2012 – achieving 50% of our goal. We will continue to work toward a target of 55% in 2012-2013. |
| Suicide Prevention: | Several suicide prevention practices in place. | Build upon current practices with implementation of additional best practices for suicide prevention | An Inter-professional Suicide Risk Assessment Guide was completed in May 2011, identifying risk factors, protective factors, and levels of engagement and observation that are suggested for each degree of risk. The assessment is completed on admission and when there is a change noted in the client's status. Evaluation and work to strengthen the way in which clinicians document and communicate level of risk has taken place. Education regarding suicide risk assessment and management has taken place in all programs at Regional Mental Health Care (RMHC) London and St. Thomas. | Planned work has been completed in 2011-2012. |

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| Median wait time (weeks) from initial screening mammography to surgery for patients with the full interval of care at St. Joseph's | 16 weeks | 13 weeks by Quarter 3 of 2011-2012 | 16 weeks | As a result of program consolidation, the volume of mammography procedures increased by more than 1,500 procedures per quarter in 2011-2012. Despite that we maintained our wait time performance but did not reach our goal of improving median wait time. We have set a goal to reach the target of 13 weeks in 2012-2013. |
| 90 th Percentile Wait Time for All Cancer Treatment Surgery (days): Wait time to complete surgery from the time decision for surgery is made with the patient | 124 days | 84 days | 89 days | Notable overall improvement was made and goal was close to being achieved. We will continue to work to reach the target of 84 days in 2012-2013. |
| Minimize the use of Seclusion and Restraint (RMHC): The frequency of utilization of seclusion and restraints in regional mental health care | Quality baseline data was not available. | Data was to be collected in Quarter 2 and 25% reduction was to be achieved by Q4. | Baseline data was not available until Q3 2011. | A 25% reduction will be achieved in 2012-2013. |

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| Total Margin (consolidated): Percent by which total corporate (consolidated) revenues exceed or fall short of total corporate (consolidated expense, excluding the impact of facility amortization, in a given year. Q3 2010/11, OHRS | 1.5 | Total margin of 0 or greater | Current performance is greater than 0. | Goal being achieved. |