



Quality Improvement Plan (QIP)

# Narrative for Health Care Organizations in Ontario

June 10, 2022



## OVERVIEW

Arnprior Regional Health (ARH) is a progressive 141-bed (two site) organization that includes a fully accredited community hospital, nursing home, and community programs. ARH is a regional hub with a strong history of providing exemplary care to the residents of West Ottawa, McNab/Braeside, Arnprior and Mississippi Mills. As your partner in health, ARH is committed to listening to and responding to meet the needs of those we serve, because together, we create a healthy community.

ARH is an anchor partner in the Ottawa West Four River Ontario Health Team and an active partner supporting the Primary Care Family Health Team in our community.

## REFLECTIONS SINCE YOUR LAST QIP SUBMISSION

Over the last two years, despite COVID, ARH has continued to focus on quality improvement. Rather than submitting a formal QIP these past two years, ARH focused on the strategic goals and priorities that incorporated Quality Improvement, Integrated Risk Management, and Patient and Resident Experiences. One major initiative focused on Medication Safety. For several years, ARH has partnered with six other hospitals to roll out the Advance Clinical Modules in Meditech. In October 2021, ARH implemented Computer Physician Order Entry, an Electronic Medication Administration Record, as well as Bar code Scanning technology of Medications and Patient bracelets in both the ED and on the Inpatient Unit.

This new technology in conjunction with strong staff adoption has had a significant impact in reducing the number of medication adverse events that have occurred since its implementation.

At the Grove LTC home, the team focused on the % of residents who had a worsening depression, and again had great improvement in these scores. The results improved from 45% of residents showing worsening depression to less than 23% over the course of one year.

ARH is also an anchor partner in the Ottawa West Four Rivers OHT with representation on the Collaborative Leadership Council, the Performance Measures, Digital Health, Mental Health, and Chronic Disease Action Teams.

As part of the 2022/23 QIP, we will be incorporating two cQIP indicators, in addition to a focus on falls at both the hospital and the Grove LTC.

## **PATIENT/CLIENT/RESIDENT PARTNERING AND RELATIONS**

ARH has active engagement from our Patient and Family Advisory Council (PFAC), the Family and Friends Council, and the Residents Council at our LTC home. The input of our patients, residents and clients is paramount in quality improvement initiatives and change ideas that we work on collaboratively.

Many of our PFAC and Friends council participate on various operational committees both at the hospital and at our LTC home, providing insight and oversight to the quality improvement initiatives and change ideas and supporting the monitoring of metrics to ensure we are measuring our progress toward our goals and targets.

The PFAC and the Residents Council, participate in the review of the Quality Improvement Plan, and offer their feedback as well as approval of the plan.

Over the last two years, the Councils have continued to meet via Zoom as an alternative to not being able to attend meetings in person.

## **PROVIDER EXPERIENCE**

Our health care professionals help identify quality improvement opportunities and actively participate on action teams who develop the change ideas/actions and set the goals and targets for the quality improvement initiatives.

Over the last year, the Medical Staff have focused on Computer Physician Order Entry as their quality improvement initiative and we are working collaboratively to monitoring and measure the impact and the outcomes on the quality of care we provide our patients.

## **EXECUTIVE COMPENSATION**

The Executive Team at ARH have 2% of their base salary as pay at risk, and the at risk component is tied to achievement of the quality improvement goals as well as the corporate goals across four pillars: Experience, Quality, People and Resources.

## **CONTACT INFORMATION**

Leah Levesque  
President and CEO  
llevesque@arnpriorhealth.ca  
613-623-3166 x 220

## 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 **June 16th, 2022**

**Cathy Jordan**

---

Board Chair

**Donna Anderson**

---

Board Quality Committee Chair

**Leah Levesque**

---

Chief Executive Officer

---

Other leadership as appropriate

---