

Excellent Care for All
Chatham-Kent Health Alliance
Quality Improvement Plans (QIP): Progress Report for 2012/13 QIP

Priority Indicator (2012/13 QIP)		Performance as stated in the 2012/13 QIP	Performance Goal as stated in the 2012/13 QIP	Progress to date	Comments
1	Avoid new stage 2-4 pressure ulcers (Complex Continuing Care)	4.4%	≤ 3.6%	1.8%	Discovered need to increase awareness, re-educate, and engage all programs for ownership. Made investment in improved bed and seating surfaces as well as heel wedges. Will continue with daily assessments and monitoring of interventions.
1	Reduce incidence of C. difficile (Rate: per 1000 patient days)	0.41	≤ 0.34	0.24	Continue to focus on environmental cleaning and following guidelines, improve hand hygiene rates, and promote antimicrobial stewardship.
1	Improve pt. satisfaction – In-patients (Med/Surg) “Would you recommend? Yes, definitely!”	71%	≥ 74%	70%	Comprehensive service excellence and ‘Language of Caring’ initiative. Developing improved discharge instructions to prepare individuals for self-care and improved access to resources in the community on discharge.
1	Improve patient satisfaction Out-patients (ED) “Would you recommend? Yes, definitely!”	51%	≥ 55%	48%	ED waiting room liaison position continues and hours extended. Improved waiting room communication services. Prepared list of common discharge instructions.
1	ED Provider (MD or NP) Initial Assessment Time (90 th Percentile)	4.23 hours	≤ 3.81 hrs	4.7 hours	Shortage of medical resources and community clinics continue. Using ED Nurse Practitioners to full potential to improve access to lower acuity ED care.
1	Improve organizational financial health	-1.04%	0	-0.001%	Integration of services with community partners. Decrease sick time and overtime.