

Quality & Patient Safety

Quarterly Review

Employees Celebrated for Person-Centered Care

Each year an employee of a Health PEI long-term care facility is recognized for consistently demonstrating the person-centered care philosophy through the Shelley L. Woods Award. The award is named after a retired nurse and former Chief Nursing Officer for long-term care with Health PEI who demonstrated strong person-centered care throughout her work and interactions with residents.



Nancy Rattray-Smith, Crystal Dumville, Shelley Woods, Mary Ann Chaisson

Prince Edward Home and Crystal Dumville a Resident Care Worker at Beach Grove Home. These individuals have demonstrated on a consistent basis, a remarkable and sustained commitment to person centered care. Both individuals has been described by colleagues as amazing and reliable caregivers, tireless advocates for resident well-being who make good happen on the regular for everyone around them, residents of course but also families, fellow staff and volunteers. Congratulations Nancy and Crystal on this well-deserved recognition!

The 2019 Shelley L. Woods award was presented to two individuals this year. Nancy Rattray-Smith who is a

Resident Care Worker at the

QEH Recognizes Quality & Safety Champions

The 2019 Quality & Safety Award was presented at the Queen Elizabeth Hospital (QEH) Quality & Safety Recognition Ceremony held on October 30, 2019. This award is in recognition of a group or an individual who demonstrates leadership in promoting Quality and Safety within their workplace and for consistently demonstrating QEH values of Caring, Integrity and Excellence.

This year's recipient of the Quality & Safety Award was Lynn Drake and the staff of Unit 3 for the Early Mobilization Project Team.

The goal of the project is to offer a seated exercise class to patients of Unit 3 and provide early mobilization and maintain patients baseline functioning. The program is offered Monday-Friday at 1:00pm on Unit 3. A physiotherapy assistant leads patients for approximately 30 minutes of seated exercises.

The core objectives for the project were: 1) more patients getting out of bed and moving; 2) demonstrate patients who are suitable for restorative/rehab; 3) increase patient and family satisfaction with increased mobilization; and 4) improve health, quality of living and functionality in patients.

Congratulation to the Early Mobilization Project team for their hard work using existing resources as well as help alleviate nursing work while supporting patient care needs.



QEH Early Mobilization Project Team (Unit 3) receives Quality & Safety Award

Canadian Patient Safety Week

From October 28 to November 1, 2019, Health PEI participated in Canadian Patient Safety Institute's 15th annual Canadian Patient Safety Week (CPSW).

The theme of this year's CPSW was **#ConquerSilence**.

According to Canadian Patient Safety Institute (CPSI, 2019) 28,000 Canadians every year die from preventable harm while receiving care. Patient safety incidents are the third leading cause of death in Canada, behind cancer and heart disease. One in three Canadians has had patient harm affect themselves or a loved one, yet the public is unaware that this problem exists. #ConquerSilence was launched to raise awareness of patient safety incidents and the www.conquersilence.ca website was created to provide a venue for patients, families, health care providers, administrators, the public and others to share stories, information and strategies on how to reduce patient harm.

CPSI Initiatives: During this year's CPSW, CPSI offered a variety of interactive activities including sharing patient stories about preventable healthcare harm on the new conquersilence.ca website, offering webinars on a variety of topics (Conquer Silence, creating a safe space, and mandatory reporting [Vanessa's Law]), and unveiling a new episode of CPSI's award-winning PATIENT podcast. Health PEI's CPSW initiatives included daily patient safety question and a number of our facilities presented awards related to quality and patient safety.



Question of the Day: Each day during CPSW, Health PEI staff received an email with a daily question to increase knowledge of patient safety. Each person who responded with the correct answer was entered into a draw for a prize and correct answers were shared with staff the following day. We had a total of 333 responses

to this activity and are so pleased with the engagement of staff! Congratulations to our winner's Sandra Ramsay (\$50 gas card), Brittany McQuillan (\$25 gas card) and Marlin McCarthy (\$25 gas card).

Thank you to all Health PEI staff who participated in 2019 CPSW and helped make it a success! If you are interested in learning more about patient safety to visit the CPSI website where you will find countless tips, tools, and resources related to patient safety.



The next Canadian Patient Safety Week takes place **October 26-30, 2020!**



Accreditation Update

Accreditation is an ongoing process of assessing healthcare organizations against standards of excellence to identify what is being done well and what needs to be improved (Accreditation Canada, n.d.). Accreditation is an important process because it helps create better health care for patients, clients, families, residents and communities. Accreditation helps health care organizations make better use of their resources by focusing on increasing efficiency, improving quality and safety, enhancing communication among staff and reducing risk and variances. Accreditation is a voluntary process that takes place every four years as part of ongoing quality improvement. Health PEI has participated in the Accreditation process since becoming one Island Health System in 2010. Health PEI's next Accreditation review is scheduled for September 2021. Over the coming months, Quality Improvement Teams and many Health PEI staff will be working diligently to ensure we are meeting Accreditation and other standards to enhance patient care and safety. More information will on our 2021 Accreditation survey will follow in the coming months.

For more information please visit Accreditation Canada's website at <https://accreditation.ca/> and Health PEI's Staff Resource Centre.

Risky Business

In October 2019, Canadian Patient Safety Institute (CPSI) unveiled a new campaign called **#ConquerSilence** – the theme for 2019 Canadian Patient Safety Week.

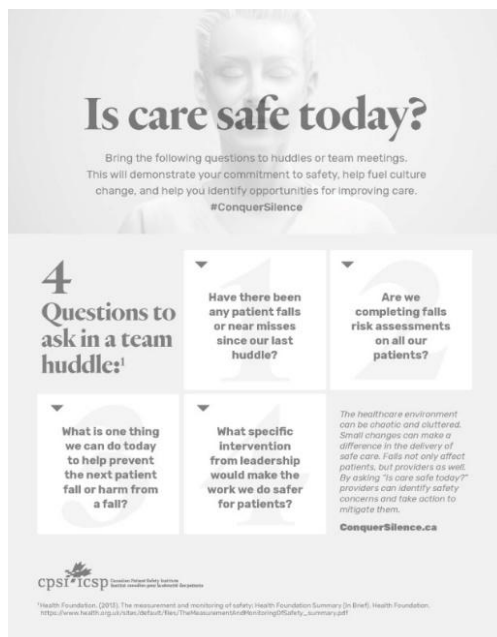
The focus of the Conquer Silence campaign for February and March is *Conquer Silence: Speak Up to Prevent Falls*. Falls are the leading cause of injury among older adults. Nearly 40% of inpatient safety incidents are falls, while 40% to 60% of long term care residents fall at least once a year (CPSI, 2019). CPSI has created a useful tip sheet entitled “Is care safe today?” which includes four questions health care providers, managers, and staff can ask in a team meeting or safety huddle to help identify and mitigate harm and prevent falls.

The tip sheet and other tools can be found at

<https://www.patientsafetyinstitute.ca/en/toolsResources/Falls-Knowledge-Tools/Pages/Falls-Knowledge-Tool-Provider.aspx>

For more information on Conquer Silence: Speak up to Prevent Falls, please visit <https://www.patientsafetyinstitute.ca/en/NewsAlerts/News/Pages/Conquer-Silence-Speak-Up-to-Prevent-Falls-2020-02-05.aspx>

For more information on the Conquer Silence campaign, and to listen to stories about patient harm, please visit <https://conquersilence.ca/>



PCH Surgical Quality Initiative Introduced

Enhanced Recovery after Surgery (ERAS) is a Surgical Quality Initiative that was introduced in July of 2018 to improve patient outcomes following *Elective Colorectal Surgeries* at Prince County Hospital (PCH). The Canadian Patient and Safety Institute promote Enhanced Recovery Canada to be a gold standard in patient care.



This provided the foundation of the program at PCH. A multidisciplinary team was established and goals were created to improve the overall patient experience in the defined population. The goals included *decreasing the length of stay, decreasing complications, and increasing patient satisfaction*. An educational roll out to the Surgical Suite, Surgery Floor, and Intensive Care Unit was completed prior to the beginning of the program. All staff were invited to attend one of the many sessions provided over a three week period. The team was visible throughout the facility to answer questions and provide direction throughout the introduction and implementation of the ERAS program.

ERAS at PCH followed four main principles:

1. Evidenced Based Elements of Care
2. Collaboration among caregivers
3. Patient Centered Care
4. Outcome Directed

After one year of service and data collection, the ERAS program has resulted in:

1. Decrease in complications by 30%
2. Decrease Length of Stay (LOS) by 50%
3. Increase Patient Satisfaction

Prince County Hospital has dedicated knowledgeable and caring staff and collectively their efforts work to battle systemic silence and reduce patient harm. Congratulations to the ERAS team and thank you for all that you do!

Safety Spotlight: IV Smart Pump Implementation



In the fall of 2019, Health PEI, with support from the hospital foundations, implemented new IV smart pumps with dose error reduction software (DERS) across all Health PEI acute care sites and the Provincial Palliative Care

Centre. The goal was to introduce standardized best practices in infusion therapy for large volume and syringe smart infusion pumps with a provincially standardized, referenced drug library.

A comprehensive infusion assessment was completed by the vendor to observe and report on the state of infusion therapy across the province, and develop a set of recommendations with a focus on patient safety. A full time nurse and pharmacist were hired to build the library, and to co-lead the project team, which also had representation from Clinical, IT Shared Services, Biomedical Engineering, Materials Management, and Quality and Risk. Working groups were formed with members from all across PEI, including the Drug Library Working Group, Policy and Education Working Group, and several Care Area Working Groups. Other stakeholders included Anesthesia, Infection Prevention and Control, Housekeeping, CIS, UPEI, Holland College, College de l'Ile, and Island EMS.

By the Numbers

- 7 facilities
- 1051 staff trained
- 750 pumps
- 249 medications/fluids
- 18 profiles

The drug library was built with input from the working groups and went through three rounds of validation prior to implementation. The library includes information such as the drug name, indication, concentration/dilution, infusion mode, and settings for volume to be infused (VTBI) and rates of administration with soft and hard limits.

Soft limits allow a clinician to program the pump within a predefined range outside of the standards established for the particular medication

Hard limits prevent the clinician from programming the pump outside the predefined parameters for a particular medication.

In addition to the standardized library, IV infusion practice in PEI was further standardized by eliminating concurrent flow in Western PEI, reinforcing best practice in secondary medication administration, and by the release of a provincial IV push module. As a result of the implementation, Health PEI was also able to eliminate several IV sets to further standardize care, and cut costs.



The pumps were implemented within the wireless infrastructure creating the ability to update drug libraries and associated limits, and provide infusion and utilization data that can be uploaded onto a data server wirelessly. This data will be used to monitor how the pumps are being used for continuous quality improvement.

A further update on this project will be provided in a future Quality & Patient Safety Newsletter.

2019 Canadian Patient Safety Culture Survey Results

From September 18 to October 4, 2019, Health PEI staff participated in the 2019 Canadian Patient Safety Culture Survey (Can-PSCS). The Can-PSCS is an essential requirement of the Accreditation Canada survey process and was developed to address themes of patient safety culture in the workplace. The survey was open for all Health PEI staff working directly with patients/clients/residents, those providing leadership to clinical programs/services (including senior leadership) and staff working in departments supporting patient care.

2019 Results:

- 935 staff participated.
- Reports are broken down into three sections: provincial, division, area of care.
- Provincial results: 7 green flags (highest scores), 13 yellow flags and 3 red flags (lowest scores).
- These results are the same as our 2015 Can-PSCS.
- Area(s) of care where there are less than 5 respondents, results are not provided.

Flag Calculation

- Green – top two columns with *positive answers are added and the sum is greater or equal to 75%.
- Yellow – top two columns with *positive answers are added and the sum is more than 50% but less than 75%.
- Red – top two columns with *positive answers are added and the sum is less than our equal to 50%.

Note: *Positive answers indicate the most desirable response to the question (not necessarily in agreement with the question).

A full summary of our 2019 Can-PSCS results can be found at <https://rstudiohiu.gpei.ca/quality-and-risk/cpsc/2019/cpsc.html>

Next Steps

- Follow-up with various staff groups to better understand our overall safety culture, what are strengths are and our areas to improve
- Formally adopt throughout Health PEI Canadian Patient Safety Institute (CPSI)'s *SHIFT to Safety* initiative
- Explore adopting other frameworks and initiatives from CPSI and other organizations to help improve and support our overall safety culture
- Continue to issue Provincial Safety Management System (PSMS) *Safer Practice Notices* to share learnings from reported incidents
- Continue to provide *Just Culture* and *Incident Management* education for Health PEI leaders and staff
- Continue to provide Team STEPPS education throughout our organization

Thank you to everyone who participated in the survey. For more information on the 2019 Can-PSCS, please contact Brianne Timpson, Quality Risk Consultant, at 902-620-3349 or btimpson@ihis.org.



Countdown to Accreditation – 19 months!

Vanessa's Law

Mandatory Reporting of Serious Adverse Drug Reactions and Medical Device Incidents by Hospitals

Background

Vanessa Young died in 2000, at the age of 15, of a cardiac arrhythmia after taking Cisapride (Prepulsid®) as prescribed. A campaign for increased regulation of therapeutic products subsequently led to greater powers for Health Canada to request safety data from hospitals and industry about drugs and medical devices. **Vanessa's Law** was enacted in 2014 and the mandatory reporting requirements come into effect December 16, 2019. The regulations apply to **all hospitals**.

A serious adverse drug reaction (serious ADR) is a noxious and unintended response to a drug that occurs at any dose and that:

- requires in-patient hospitalization or prolongation of existing hospitalization,
- causes congenital malformation,
- results in persistent or significant disability or incapacity,
- is life-threatening, or
- results in death.



How do you report an Adverse Drug Reaction?

Adverse Drug Reactions are to be reported under the Medication Form icon in the Provincial Safety Management System (PSMS).

A **medical device incident (MDI)** is an incident related to a failure of a medical device or a deterioration in its effectiveness, or any inadequacy in its labelling or in its directions for use that has led to the death or a serious deterioration in the state of health of a patient, user, or other person, or could do so were it to recur.



How do you report a Medical Device Problem?

Medical Device Problems are reported under the Medical Device Problem icon in PSMS.

The regulations require hospitals to report serious ADRs and MDIs in writing to Health Canada **within 30 calendar days of first documentation** of the serious ADR or MDI within the hospital.

Potential issue(s)

The regulations require hospitals to report all documented serious ADRs and all documented MDIs, where the required information is **within the control of the hospital**. Information that is within the control of the hospital is information that would be reasonably accessible within the hospital.

While it is encouraged for hospitals to take all reasonable steps to retrieve the required information to complete as thorough a report as possible, there is no requirement to do further investigation in order to obtain the pieces of information

What Products Are In Scope of these Regulations?

The mandatory reporting requirements for hospitals apply to therapeutic products including:

- Pharmaceuticals (prescription and non-prescription drugs)
- Biologic drugs (biotechnology products, fractionated blood products, plasma proteins, and vaccines (excluding vaccines administered under a routine immunization program of a province or territory)
- Radiopharmaceutical drugs
- Disinfectants
- Drugs for an urgent public health need
- Medical devices includes medical/surgical equipment and consumables

When in doubt, Health Canada encourages hospitals to report. For more information on Vanessa's Law, visit Health PEI's Staff Resource Centre.

Quality Corner

A new project is underway in West Prince called Hospitals Without Walls. Launched in November 2019, this 12 month project aims to test the use of the existing remote patient monitoring program to support Island seniors to live longer in their homes rather than transition into care facilities. The project has received funding support from the Centre for Aging + Brain Health and Paul Young, Administrator – Community Hospitals West applauds an engaged team of Health PEI staff for taking a leap of faith to support the older adult population. For more information on this innovative initiative visit

<https://www.thechronicleherald.ca/news/canada/hospital-without-walls-health-pe-i-team-looking-at-applying-remote-patient-monitoring-in-west-prince-region-387072/>

QRC Roundup

As part of our efforts to improve knowledge of Quality Risk Consultants (QRC) and their role, we will be featuring a different Quality Risk Consultant in each edition of our newsletter. This month we will be introducing you to two new QRCs that have recently joined our team.

Betty Auld joined the Quality & Patient Safety team in October 2020. Betty's QRC portfolio consists of Hospitals East, Provincial



Laboratory Services, Provincial Pharmacy and Corporate. Betty portfolio also covers Medication Management, Provincial Laboratory Services, Provincial Infection Prevention & Control Services, Clinical Ethics, Medical Affairs and Garfield Street. Betty is a Dietitian with a background in Management and Inspection. Betty's office is at 16 Garfield Street and she invites anyone who

has questions about Quality and Risk issues to feel free to get in touch at 902.620.3497 or by email at blauld@ihis.org.

Daras Singh comes to us from Ontario, as an internationally trained healthcare professional with a Master's degree in Management. He has eight years of experience leading healthcare operations and leading quality improvement projects. His most recent position was as a Coordinator at the Micheal Garron Hospital in Toronto. Daras will be supporting many of the provincial community based program areas such as Home Care/Adult Protection, Palliative Care, Primary Care and Public Care. Daras' office is located at 16 Garfield Street and is available for questions regarding any of the service areas mentioned above by phone at 902.368.5267 or by email at dpsingh@ihis.org.



Share Your Story

Do you have questions about any of the stories you have read here? Would you like to suggest a topic or story idea for a future edition of the newsletter? If so, please contact Thelma Larkin at telarkin@gov.pe.ca or 902.569.7769.

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