

Health PEI Santé Î.-P.-É. Pursuing Quality & Excellence - Quality Board

QIT Members

- Dr. Amanda Reyes, MD, FACS
 - Chair, Surgical QIT
- Dr. Michael Chen, MD
 - Chief of Surgery
- Sarah Thompson, RN
 - Clinical Lead
- James Patel, RN
 - Department Manager
- Linda Brooks
 - Quality Patient Safety Consultant
- Karen Lopez
 - Patient Advocate



QIT Workplan

Timeline	Goals
October	Develop AIM
January	Ethics Refresher
February	Audit Compliance
May	Staff Education

Key Messages

1. Data-Driven Decisions for Better Care

Our initiatives are grounded in rigorous data analysis, helping us identify trends, measure performance, and implement targeted improvements.

2. Empowering Surgical Teams

We support surgeons, nurses, and OR staff with tools, training, and feedback to foster a culture of excellence and accountability.

3. Collaboration is Key

Quality improvement is a team effort. We work across departments and disciplines to ensure every patient receives the highest standard of surgical care.

4. Transparency Builds Trust

We believe in open communication about our goals, progress, and challenges. Transparency drives improvement and strengthens patient confidence.

Accreditation Timeline

315 Days until Accreditation



ROP of the Month

Health PEI
Accreditation: ROP of the Month
Required Organizational Practice: Improving Hand Hygiene Practice

Why It Matters

- Hand hygiene significantly reduces the risk of transmission of organisms and enhances client and workforce safety when performed correctly and consistently.

4 Moments of Hand Hygiene:

- Before initial patient/patient environment contact
- Before aseptic procedure
- After body fluid exposure risk
- After patient/patient environment contact

Best Practices for Hand Hygiene

- Use alcohol-based hand rub (ABHR) when hands are not visibly soiled.
- Use soap and water when hands are visibly dirty or after contact with bodily fluids.
- Allow ABHR to dry completely before touching anything.
- Keep nails short and avoid artificial nails or hand jewelry.

Training & Improvement

- All staff and physicians are required to complete annual hand hygiene education.
- The Hand Hygiene Education Module can be found on the Staff Resource Center.
- Hand hygiene compliance is regularly audited.
- Audit results are shared with staff and used for quality improvement.

Accreditation Surveyors may ask:

- What are the 4 moments of hand hygiene?
- What hand hygiene education/training have you received?
- Is hand hygiene compliance monitored on your unit?

Health PEI has a provincial Hand Hygiene Policy; it can be found on the Policy Document Management System/ Medworx

Did You Know

DID YOU KNOW? Health PEI

What is Reprocessing?

Reprocessing refers to cleaning, disinfecting, and sterilizing medical devices and equipment. Organizations reprocess equipment based on the Spaulding classification and according to manufacturer's instructions.

Effective Reprocessing can be Measured by Monitoring:

- Water quality
- Water performance
- Disinfectant concentration & use
- Sterilization test strips
- Organic residuals

Why Does it Matter?

- Monitoring reprocessing helps to:
 - Reduce healthcare-associated infections
 - Identify areas for improvement
 - Ensure compliance with manufacturer instructions

Auditing is regularly completed to evaluate the effectiveness of reprocessing procedures.

- The Reprocessing Quality Improvement Team reviews audit results to:
 - Identify opportunities for improvement
 - Promote standardization and
 - Support staff education and best practices

Idea Generation



Recognition & Celebrations



GREAT JOB!

QIT Improvement Indicators

