



2021-22 Quality Improvement Plan

Updated: March 21, 2022

**indicates an updated performance measure to the figure reported in Q1

Priority	Measure	Description	Pre-Pandemic Performance (2019-20)	2020-21 Performance	2021-22 Performance					YTD	Year End Forecast	2021-22 Target
					Q1	Q2	Q3	Q4				
Patient Safety												
Provide Safe, High Quality Care	Serious Safety Event Rate (SSER)	Rolling 12 month Serious Safety Events expressed per 10,000 adjusted patient days	0.74	1.23	1.07	0.79	0.39			0.39		0.70
Access												
Provide Timely Access to Care	Resumption of Service Delivery Rate	Outpatient Clinics	Comparing 2021-22 outpatient volumes to 2019-20 for Women's Newborn, Children's, Mental Health & Addictions, Diagnostic Imaging and Blood Lab clinics	100%	93%**	100%**	99%	99%		99%		100%
		Surgery	Comparing 2021-22 OR volumes to 2019-20 for Women's Newborn and Children's surgery	100%	84%	95%**	95%	95%		95%		100%
Infection Control / Public Health												
Reduce Healthcare Acquired Infections	Infection Prevention and Control Measures	Hand Hygiene Compliance (Moments #1 and #4)	% Hand hygiene audit samples compliant for Moment #1 (before patient/patient environment contact) and Moment #4 (after patient/patient environment contact)	Moment #1: 79% Moment #4: 83%	Moment #1: 86% Moment #4: 89%	Moment #1: 87% Moment #4: 87%	Moment #1: 86% Moment #4: 89%	Moment #1: 87% Moment #4: 91%		Moment #1: 87% Moment #4: 89%		85%
		CLABSI	Central Line-Associated Bloodstream Infections per 1,000 central line-days	0.98	1.51**	1.93	2.36	1.20		1.83		1.07
Safe & Healthy Workplace												
Keeping Our People Safe	Lost Time Incident Rate	Number of recordable incidents per 100 employees that resulted in lost or restricted days or job transfer, due to work related injury or illness	1.25	1.05**	0.88	1.78	0.47			1.05		1.00
Patient Experience												
Improve Communications with Patients & Families	Survey Results for Communication on Support Person Restrictions as a Result of COVID-19	% of favourable responses to question "Overall, how satisfied were you with the communication from the IWK during the pandemic?"	New Indicator	65%	Working to relaunch survey later in 2021-22 FY					TBD		80%
Patient / Clinical Outcomes												
Advance Improved Clinical Outcomes	QPS Committees with Clinical Outcome Improvement Priorities & Targets	% of 24 QPS Committees meeting requirements to have clinical outcome improvement priorities & targets set	New Indicator	0%	Setting the baseline	55% (11/20)	55% (11/20)			55% (11/20)		100%

Source: Strategy & Performance, Occ. Health & Safety, Patient Safety & Risk, IPAC

Target tracking to be met Potential issues; target at risk Target not anticipated to be met