

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 31, 2026

OVERVIEW

Brockville General Hospital is your community hospital. Together, we are dedicated to the health and wellbeing of our friends, families and neighbours. Our hospital has a long history of rising to the challenge when the community is in need. Whether pioneering local access to care, building modern diagnostic, surgical, and healing spaces, or tackling the pressures facing our healthcare system, we are here to serve you.

Through teamwork, partnership, and the support of our community, we proudly achieved many of the ambitious goals we have set for ourselves over the past year. We expedited greater utilization of outpatient clinics, reviewed and revised our Fit to Sit Criteria, developed an accessibility, inclusion, diversity and equity committee, implemented the essential care partner program in a pilot area, and completed comprehensive chart audits to better understand how we can reduce inpatient falls. We also began to leverage data from our regional health information system (HIS) which informed many of our quality improvement initiatives this past year. Ongoing data analysis informs the priority areas we can focus on as an organization in the coming year including assessing and standardizing workflows, how high-volume high impact diagnoses are impacting patient movement, leveraging data during daily huddles, and setting and tracking performance on appropriate internal targets.

Our 2026-27 Quality Improvement Plan (QIP) is organized in the four priority categories set out by Ontario Health (access and flow, equity, experience, and safety). This aligns well with our local priorities which move us forward with our strategic goals. We are proud to include indicators which are important to our patients and

their family members while addressing the priority indicators identified by Ontario Health. The QIP reflects our continued commitment to a pursuit of excellence and being right here with you.

ACCESS AND FLOW

Brockville General has made great strides to improve a number of initiatives relating to access and flow. We completed reviewing and revising our fit to sit criteria and maximized utilization of our designated offload nurse. We opened a new Rapid Assessment Zone (RAZ) and are continuing to track the implementation and effectiveness of this space in the coming year. We have been collaborating with our data analyst to develop and understand data from our new HIS that supports our quality improvement initiatives pertaining to access and flow. This work will continue this year as it pertains to patient movement throughout the hospital in order to expedite admissions to inpatient areas from the Emergency Department (ED). We have identified opportunities to improve workflows by improving admission criteria, developing our approach to hallway medicine and continuing to explore surge space development. We are focused on reviewing staffing models, developing cross-program huddles and will be utilizing root cause analysis and chart reviews to better understand patient movement challenges. We will also be implementing cardiac monitoring and point of care urinalysis this year in an effort to improve patient throughput in the ED.

EQUITY AND INDIGENOUS HEALTH

Brockville General has prioritized the development of standardized Equity, Diversity, and Inclusion (EDI) language as well as the development of an Accessibility, Inclusion, Diversity and Equity (AIDE) committee. This ensures consistency, clarity, and a shared understanding of how we describe, measure, and address inequities across the organization. This work will continue with the implementation of inclusivity training for team leads and development of an incident reporting pathway. The intention of this work is to build awareness and develop supporting processes that will enhance communication, promote inclusiveness, and ensure that staff, physicians, patients, and caregivers operate within a common framework of respect. As a result of this initiative, Brockville General as an organization will deepen our understanding of workplace inequities. We will assess the impact of these initiatives on organizational culture, and guide targeted interventions that foster psychological safety, inclusiveness, and equity in all aspects of care delivery.

PATIENT/CLIENT/RESIDENT EXPERIENCE

Brockville General recognizes that strong support systems are vital to a patient's health, healing, and well-being, both during hospitalization, and when returning home or transitioning elsewhere. We are committed to fostering meaningful partnerships between patients, their Essential Care Partners (ECP), and the care team. We want to ensure that patients have the support they need from someone who is essential to their health and well-being and that they know what to do after hospitalization if they have questions. ECPs can support patients emotionally, physically, and cognitively. They are acutely attuned to changes in the patient and can report those changes to the care team as a member of the patients care team.

We are also continuing invite patients to enroll for My Health Record Portal. We are collaborating with our regional hospital partners on this improvement initiative, and it will require a phased approach as we optimize our HIS. My Health Record Portal will give patients access to their health information security across six hospitals.

SAFETY

Brockville General's approach to never events includes a biannual review submitted to Ontario Health as well as reports to clinical leadership, senior leadership, our quality and safety committee and board. We use a structured, transparent approach to track, review, and prevent never events based on quality standards. Patient safety events are reported immediately through our incident reporting software, escalated to leadership, and reviewed by an interdisciplinary team. Each confirmed event triggers a quality-of-care review focused on system improvements rather than individual blame with clear corrective actions. Prevention efforts to prevent never events at Brockville General for the coming year include standardizing and improving adherence to documentation requirements for inpatients at high risk for falls. This includes medication reviews which will be improved through electronic medication reconciliation, positive patient identification (PPID) and positive accession identification (PAID) training and implementation. These initiatives support a just-culture, continuous learning, and ongoing monitoring to reduce risk and improve patient safety.

EMERGENCY DEPARTMENT RETURN VISIT QUALITY PROGRAM (EDRVQP)

During our hospital site's inaugural year in the Emergency Department Return Visit Quality Program (EDRVQP), our team developed a structured approach to completing ED return visit audits and using the findings to inform quality improvement. A key strength was the intentional inclusion of ED frontline members within the auditing process. Their participation improved the accuracy and practicality of chart reviews, strengthened shared ownership of results, and helped translate audit themes into

actionable changes. Heading into 2026/27 we are more familiar with the Ontario Health audit methodology and documentation expectations, which we anticipate will support improvements in utilization of the auditing tool to guide quality improvements within the program.

An identified opportunity for our site is to integrate the EDRVQP learnings into existing review structures in a sustainable way. We see an opportunity to better align audit outputs with our current ED Program Council processes and to leverage Morbidity and Mortality (M&M) rounds, where appropriate, to support deeper interdisciplinary learning and follow-through. Building on our audit results and our self-assessment using the Emergency Department Leading Practices Toolkit, our priorities for 2025/26 include strengthening triage reassessment and processes in place to reduce patients leaving without being seen (LWBS) and follow up in the event that they do. Finally, we will explore opportunities to continue to improve pathways and connections between the ED and homecare. The timing of these initiatives will be determined with our internal and external partners, to occur over the 2026-27 year.

EXECUTIVE COMPENSATION

Brockville General includes a performance-based component to its executive compensation framework. This framework applies to the Chief Executive Officer, the Chief of Staff, and the executive members of our Executive Leadership Team. A percentage of the executive's compensation (5%) is tied to the achievement of annual goals and objectives aligned to the organization's strategic goals and the quality improvement plan. This approach ensures organizational alignment, as it carries goals through to the individual executive's portfolio. Executive compensation is linked to the outcomes achieved in our quality improvement plan. The specific performance goals which drive quality and organizational improvement for 2026-27 will be identified and approved by the Board of Directors.

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 March 31, 2026.

Original signed by

James Eastwood, Board Chair

Original signed by

Eleanor Newman, Board Quality Committee Chair

Original signed by

Julie Caffin, Chief Executive Officer

Original signed by

Deanne Henson, EDRVQP lead, if applicable
