



# EM/ANB Quality improvement Plan Report

2020 / 21

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## INTRODUCTION

The Quality Improvement Plan is a summary document that outlines the different plans and frameworks within the organization that support and guide quality improvement.

This report provides a synopsis of accomplishments for the 2020/2021 fiscal period for each component of the plan. This is the second edition of this report which provides updates for what has proven to be an atypical year.

## REPORT HIGHLIGHTS

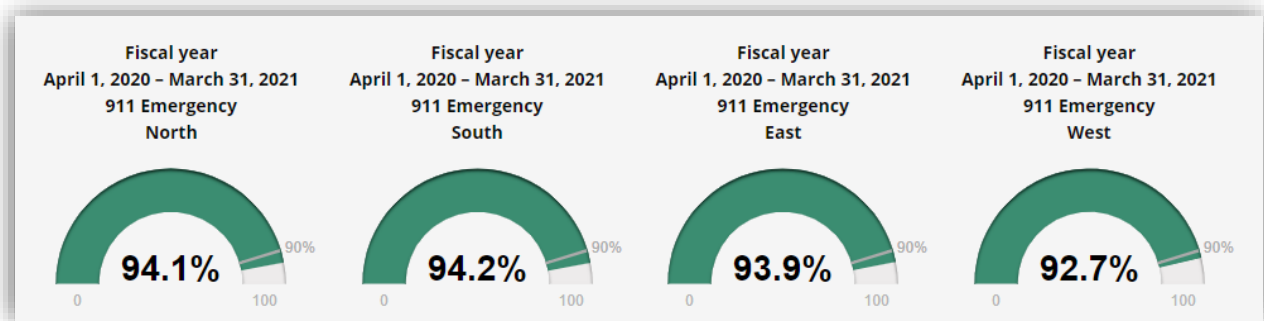
### EM/ANB Strategic Plan

#### Patient satisfaction

EM/ANB continued to measure patient satisfaction levels in fiscal year 20/21 and is proud to share that patient satisfaction levels increased for both ANB (**96.0%**) and EMP (**96.0%**).

#### Performance indicators

Although the management of the pandemic had an impact on ambulance performance in the earlier months of the fiscal year, ANB continued to exceed its performance targets for 2020/21.



The Extra-Mural Program (EMP) was heavily impacted by the COVID-19 pandemic in 20/21. In the early months the activation of their pandemic plan meant a significant drop of visits. The pandemic also had an impact in the amount of referrals from primary care providers since these providers also saw less patients.

KPI	Baseline	20/21 Results	Target	Status
Referral to Care time (Median)	3 days	2	1 day	On track
Referral to Care time (90 <sup>th</sup> Percentile)	33	24	10	On track
ED visits Ratio	.60	0.452	.51	On track
Primary Care referrals	7,426	7,393	8,911	behind
EMP Visits	497,771	492,568	572,437	behind
Patient Experience	95%	96%	95%	On track



## **Accreditation Canada**

Accreditation preparedness activities continued in 20/21. The next on-site survey is planned for Spring of 2022. EM/ANB continues to maintain an Exemplary Standings designation from Accreditation Canada.

## **Feedback from community partners**

Due to the COVID-19 pandemic there has not been any official partners meeting, however, more than ever EM/ANB demonstrated the importance and effectiveness of team collaboration. This was demonstrated by the Provincial Rapid Outbreak Management Teams, the Mobile Swab teams as well as the Mobile vaccination teams that were put in place with collaboration from various health partners to assist in the pandemic response.

## **Employee Road show**

Due to the COVID-19 pandemic there was no official road show of senior leaders in 20/21. The senior leadership team will be resuming this practice in 21/22.

## **Work life pulse results**

The EM/ANB teams continued to work on the action plan identified in 2019/20. For example, our internal communication team continues to keep employees informed via various communication channels including our internal newsletter and a new retirement and service recognition program was launched for EM/ANB employees. This new program had its first virtual celebration in the fall of 2020.

## **Launch dates**

All items identified on our corporate plan are reviewed by the senior leadership team on a monthly basis during Senior Management team meetings. All items are closely monitored including tasks and milestones.

## **Stakeholder surveys**

No global stakeholder surveys took place this year however, stakeholders were consulted as part of specific initiatives for example: Advanced Care Paramedic Expansion project and the Permanent implementation of the Care Coordination Center.

## **EM/ANB Risk Management Plan**

The Risk Management Plan review was initiated in 20/21 and is still in progress. As well, work took place to identify Risk Statements and Risk Tolerance statements that align with the Strategic Plan objectives. These statements will assist the organization with necessary guidance in the creation or revision of policies, risk mitigation activities and decision-making. The committee representation has been adjusted with the addition of a Patient and Family Advisor to ensure that their perspective is considered as the committee fulfils its mandate.

## **Emergency and Disaster Management Plan**

The ongoing impacts of the COVID-19 Pandemic continued to be managed over the last year. Training and development of the Provincial Rapid Outbreak Management Team were completed in time for a busy response cycle between October, 2020 to year-end. Each response brought unique qualities that the PROMT response was able to successfully adapt to and fulfill its mandate of preventing spread, caring for the most vulnerable



population groups in their traditional home setting, and limiting secondary impacts to the hospital-based health system.

Activities outside of the pandemic response were more limited.

- The Saint John River did not flood which allowed for COVID-19 related activities to be the focus of response actions.
- Winter 2020 was reasonably stable without sustained events involving power interruptions or changes to operational responses by either EMP or ANB.
- Preparation for future events and accreditation visits continue with revisions to planning documents based on lessons learned from COVID-19 responses.
- Full-scale exercises ground to a halt with most transitioning to virtual tabletop or deferral to a future date.

## ANB Patient Safety Plan

An annual review of the ANB Patient Safety Plan was completed by meeting with each owner of patient safety activities. New goals were set or adjusted to reflect current trends or to realign with processes. The new goals are:

- The implementation of an enhanced hands-on driver training to new paramedic hire to provide to provide education, training and awareness on the safe operation of vehicles.
- Maintain and promote an employee immunization program
- Improvement to the process supporting the EMP referral program for ANB paramedics.
- Review of the procedure for managing medical equipment malfunctions to ensure a safe response to incidents

## EMP Patient Safety Plan

An annual review of the EMP Patient Safety Plan was completed by meeting with each owner of patient safety activities. New patient safety activities were added and adjustments were made to current ones. The new patient safety activities are:

- An increased compliance to Pixalere audits for improved safe skin and wound care practices
- The promotion of medication reconciliation practice during care and at care transition
- Review of the procedure for managing medical equipment malfunctions to ensure a safe response to incidents
- The measurement of compliance to policies and procedures in regards to employee fatigue and hours of work
- Maintain and promote an employee immunization program

## EM/ANB Quality & Safety Framework

The activities outlined in the document are mostly managed by the Manager, Quality and Risk and the Quality of Care and Patient Safety Committee. This committee meets at least quarterly and reviews patient safety incidents and provide recommendation based on their findings.



The Manager, Quality and Risk reports monthly to the Senior Leadership Team on quality and safety activities monitoring and quarterly to the EM/ANB Quality and Patient Safety sub-committee of the board on patient safety incidents.

## EM/ANB Ethics Code and Framework

The EM/ANB Ethics Code and Framework is used to guide daily decision-making as well as the development of the Organization's policies, processes, and practices. During the 2020/21 fiscal year, the Committee conducted its meetings quarterly in a virtual fashion due to COVID restrictions. A standing agenda item for each Ethics Committee meeting is a review of ethics consult summaries, for which there were a total of 10 facilitated in that timeframe.

In addition to the above, the following quality improvement activities were undertaken by the EM/ANB Ethics Committee as part of its mandate:

- Reviewed and revised the existing Framework, published version 2.0
- Developed an e-Learning module with cased based examples to help reinforce knowledge and approach when employees are faced with ethical conflicts.
- Identified a plan to pilot an "Ethics Round" approach that would allow interactive live sessions with groups of employees to help understand process, perspectives and a practical approach to ethical decision- making.

