

## Report of the President & CEO to the Board of Directors

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**Date:** October 2013

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Change is the law of life.

And those who look only to the past or present are certain to miss the future.

**John F. Kennedy**

Welcome to a new era in hospital healthcare delivery in Windsor/Essex.

On a monthly basis, I provide a report to the Board of Directors of Windsor Regional Hospital (WRH) that I will share with all of you highlighting various activities of WRH.

This month's report is meant to provide you with an overall orientation to WRH's Strategic Plan.

The Strategic Plan is the Plan that drives what we do on a daily basis towards achieving our Vision of *Outstanding Care...No Exceptions !*

The current WRH Strategic Plan is used as the template for this monthly report. You will continue to hear that everything we do has to be tied back into the Strategic Plan. If the work we are doing is not directly tied into the Strategic Plan and does not accomplish one of the Strategic Directions, then we STOP doing it.

The current Strategic Plan was created in 2012 and lasts until 2016. It was created by direct involvement of front line staff from across the organization. It was created by examining both our internal and external environment and determining what our organization should focus on operationally for the benefit of our patients and stakeholders.

It starts with our Vision, Mission and Values. They are as follows:



## Our Vision: Outstanding Care – No Exceptions!

**Our Mission:** Deliver an outstanding care experience driven by a passionate commitment to excellence.

**Our Values:**

<b>C – COMPASSIONATE</b>	<b>A – ACCOUNTABLE</b>	<b>R – RESPECTFUL</b>	<b>E – EXCEPTIONAL</b>
<ul style="list-style-type: none"><li>• Keeping the patient at the center of all we do;</li><li>• Demonstrating compassion for patients and their families;</li><li>• Supporting staff, physicians and volunteers so they are able to care for patients and each other; and</li><li>• Operating as a team, within WRH and with our partners, to provide exemplary care.</li></ul>	<ul style="list-style-type: none"><li>• Striving for accountability and transparency to those we serve and to ourselves;</li><li>• Driving fiscal responsibility;</li><li>• Stimulating effective two-way communication at all levels; and</li><li>• Facilitating timely access to care and service.</li></ul>	<ul style="list-style-type: none"><li>• Treating those we serve and each other with empathy, sensitivity, and honesty;</li><li>• Upholding trust, confidentiality and teamwork;</li><li>• Communicating effectively; and</li><li>• Welcoming individuality, creativity and diversity.</li></ul>	<ul style="list-style-type: none"><li>• Promoting a culture of quality and safety;</li><li>• Embracing change, innovation, and evidence-based practice;</li><li>• Encouraging learning, discovery, and knowledge sharing; and</li><li>• Fostering dynamic partnerships.</li></ul>



David Musy  
PRESIDENT & CEO



Gay Wrye  
CHAIR OF THE BOARD OF DIRECTORS



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To see a clearer version of the Vision, Mission and Values as well as the full Strategic Plan visit [http://www.wrh.on.ca/webbuild/site/wrh-internet-upload/file\\_collection/StrategicDirections/index1.html](http://www.wrh.on.ca/webbuild/site/wrh-internet-upload/file_collection/StrategicDirections/index1.html)

Then we have 6 Strategic Directions. Under each Direction are Strategic Initiatives that clarify exactly what is meant by the Strategic Direction. Each program and service then uses these Directions and Initiatives to operationalize the Strategic Plan. The work they perform is directly tied into one of these Initiatives and as a result tied to a Strategic Direction.



## STRATEGIC DIRECTIONS

**STRATEGIC DIRECTION #1: Excel in patient safety and quality.**

- i) Lead in the performance of patient safety measures
- ii) Continue to set stretch targets and goals for all core indicators
- iii) Lead in the development of strategies that support seamless patient flow



**STRATEGIC DIRECTION #2: Champion accountability and transparency.**

- i) Utilize the results from the indicators measured to drive performance
- ii) Cultivate and embed a 'Just Culture' across the organization
- iii) Strengthen dynamic mechanisms that will clearly identify, support, and measure accountability throughout the organization



**STRATEGIC DIRECTION #3: Strengthen and sustain a proactive approach to health care funding reform.**

- i) Continuously identify and implement strategies to be efficient and effective
- ii) Develop and implement innovative strategies to acquire equipment and improve infrastructure
- iii) Influence local and provincial priorities to align with community health care needs



[www.wrhone.ca](http://www.wrhone.ca)

**STRATEGIC DIRECTION #4: Create a vibrant workplace.**

- i) Foster an environment that supports a healthy and productive work life
- ii) Develop and adopt formalized frameworks that facilitate professional development, advancement, and succession and transition planning
- iii) Recruit talented individuals to careers in the health care field



**STRATEGIC DIRECTION #5: Distinguish ourselves through superior performance, innovation, and exceptional customer service.**

- i) Develop, implement, and sustain best practices consistently across the organization
- ii) Promote a culture of continuous improvement
- iii) Commit to compassionate patient and family centered care



**STRATEGIC DIRECTION #6: Strategically engage with external partners.**

- i) Engage with community partners to deliver a seamless system of quality care
- ii) Collaborate with diverse people and community when developing plans and setting priorities
- iii) Build relationships with research and academic partners



AWARDED EXEMPLARY STATUS 2012  
**ACCREDITATION CANADA**

To see a clearer version of the Strategic Directions visit

[http://www.wrhone.ca/Site\\_Published/wrh\\_internet/DocumentRender.aspx?Body.IdType=5&Body.Id=45427&Body.GenericField=](http://www.wrhone.ca/Site_Published/wrh_internet/DocumentRender.aspx?Body.IdType=5&Body.Id=45427&Body.GenericField=)

When a Strategic Direction and Initiative is operationalized we ensure that the work we are doing can be measured. This means that if we cannot measure where we are starting from, where we want to get to and whether we are moving towards achieving that result, then we STOP doing it.

When all of our programs/services have identified what they are measuring we select approximately 17 of these metrics and report them corporately. These are our BIG DOT items.

QUALITY OF CARE REPORT		July	August	September	October	November	December	January	February	March	April
Safe	Hand Washing Compliance	☒ ★									
	Hospital Acquired Infections	↑ ★									
	Patient Falls (with injury)	↓ ●									
	Patient Specimen Incidents - Irreplaceable	↓ ●									
	Medication Incidents Reaching Patient- No Harm and Harm	↓ ●									
	Patient Safety Culture	↑ ●									
Integrated	Readmission (selected CMGs)	no data									
Patient Centred	Patient Satisfaction Rating	☒ ●									
	Patient Satisfaction- Emotional Support	↑ ▲									
Access	Patient Flow: ED Length of Stay- High Acuity Admitted Patients	↓ ●									
	Patient Flow: ED Length of Stay- High Acuity Non Admitted Patients	☒ ★									
	Patient Flow: ED Length of Stay- Low Acuity Patients	☒ ★									
	Patient Flow: Discharge by 1100	↑ ▲									
	Patient Flow: Discharge by 1400	↓ ●									
Effective	Actual versus Expected Cost Per Equivalent Weighted Case	no data									
	Hospital Standardized Mortality Ratio	☒ ★									
	Sick Time	↓ ●									



These BIG DOTs are reported on a daily, weekly and monthly basis through Monday Morning Huddles, Unit Based Councils, the Quality of Care Committee, the Medical Advisory Committee and the Board of Directors.

The Strategic Plan is a living and breathing document. This means that as our internal and external environment changes, we examine our Strategic Plan to determine if any priorities need to be altered to accommodate that change.

# Strategic Direction - Excel in Patient Safety and Quality

## Starting the Week off Right: Use of Monday Morning Huddles to Improve Patient Safety

- This is already recognized by the Minister of Health and Long Term Care as a cost effective, relatively straightforward practice that all healthcare providers can start without much effort. In addition, it was recognized as a Leading Practice at the 2009 International Ontario Hospitals Association Conference. In early 2008, Windsor Regional Hospital engaged in a Strategic Planning exercise that involved hundreds of front line employees, physicians and Board members in setting a Vision of *Outstanding Care-No Exceptions!* One of the strategic directions arising from the Strategic Planning was to **Embed patient quality and safety in the culture of the hospital**. This strategic direction was operationalized in July 2008, with the creation of a weekly Directors 'Huddle'. Every Monday morning, Directors check the pulse of the hospital by reviewing key quality and safety indicators. This enables:
  - communication and ownership,
  - a culture of patient quality and safety by focusing on current outcomes,
  - timely access to data and promotes accountability for action, and
  - each leader being responsible for implementing and monitoring patient safety improvements.
- Capitalizing on the weekly huddles, Windsor Regional Hospital next engaged its Board of Directors and other leaders directly in Patient Safety and Quality issues. An electronic tool was created allowing users to see updated indicators. Characteristics include a high-level roll-up with a red-green-yellow format to indicate where each of the established indicators of quality are, dynamic representation of data allowing individualized drilldown and, dissemination of results for action planning with built-in accountability to facilitate problem-solving for improvement.
- Windsor Regional Hospital then took it to the unprecedented level of sharing all of these results with the public by placing them on their Internet and in the monthly written communication of the President and CEO for the entire community and world to track its performance. Performance has improved by this active monitoring quality and action. As a result, participation and follow-up are immediately evident.



Examples include 50% improvement in Pathway compliance, more than 90% hand washing compliance and reduced hospital acquired infections. Now, the organization focuses on outcomes without confusing what the hospital is doing with how it is doing, paying attention to the data, and not mistaking improvement for achievement.

### Patient Harm Index

- In 2012 Windsor Regional Hospital created a Patient Harm Index to create a better focus and avoid drift.
- The Patient Harm Index focuses on Hospital Acquired Infections, Falls (with and without injury), Irreplaceable Lab Specimens and Medication Incidents.

## Patients Harmed Last Week

(dated week of Oct 22, 2012)

**HAI**

**3**

**Falls**

Total Falls (no injury) **14+1** near misses

Falls With Injury **0**

**Irreplaceable Lab**

Corrected – Yes **0**

Corrected - No **0**

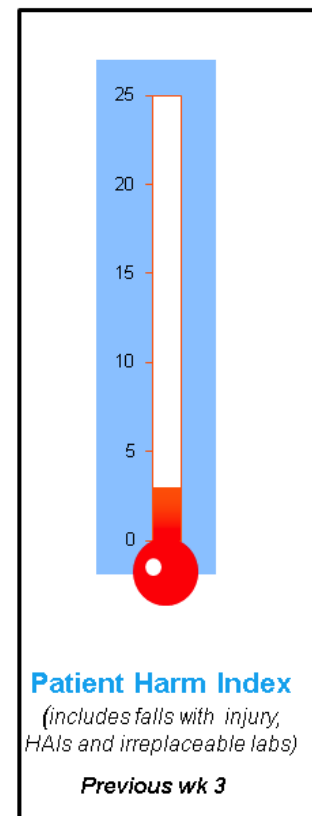
**Patient Harm Index**

**3**

### Reported Medication Incidents

**13** (includes 6 near misses)

- Overall: reaching pt 7 Harm 0
- High alert: reaching pt 1 Harm 0



- This Index is tracked daily and reviewed at our weekly morning huddles and executive committee meetings.
- Individually and collectively, with metrics like the Patient Harm Index, we can make proactive changes to avoid harm to patients that come to us to be healed.
- Many thought we would never see ZERO patients harmed and that it was not possible. In 2013 we celebrated our first week of ZERO. It was followed by another ZERO a couple of weeks later. ZERO is a number and is possible to achieve. Our patients deserve nothing less.

### **Clinical Red/Green**

Similar to Financial Red/Green, on a monthly basis management teams attend a session to discuss their program clinical results, share ideas and discuss improvement plans.



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Corporate Program Unit Program Manager Indicators Clinical Practice Indicators

Currently Showing: Corporate

Clinical Practice Indicators	May-13	Jun-13	Jul-13	Target	On Target
Patient Safety Culture	23.0	13.0	12.0	8.0	RED
Hand Washing Compliance	97.7	97.5	99.0	90.0	Green
Hospital Acquired Infections- Incidents	21.0	12.0	9.0	0.0	RED
Hospital Acquired Infections- Rate	1.32	0.80	58.00	0.88	RED
Medication Incidents Reported	113.0	132.0	164.0	0.0	RED
High Alert Medication Incidents Reported	47.0	61.0	67.0	0.00	RED
High Alert Medication Near misses Reported	35.0	40.0	41.0	0.0	RED
Medication Reconciliation	163.0	166.0	163.0	0.0	RED
Patient Falls Incidents Reported	59.0	53.0	46.0	0.0	RED
Patient Falls with Injury	2.0	1.0	2.0	0.0	RED
Patient Falls (with injury) Rate	0.09	0.05	0.10	0.25	Green
Patient Specimen Incidents- Corrected Irreplaceable	0.0	0.0	1.0	0.0	RED
Patient Specimen Incidents- True Irreplaceable	0.0	0.0	0.0	0.0	Green
OVERALL					
Hospital Standardized Mortality Ratio	98.0	100.0	N/A	100.0	Missing

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At Clinical Red/Green each program is required to share a patient story. This story is to focus on how a patient was harmed and how the program responded, learned from their experience and shared those learning's with the other programs.

## Strategic Direction - Champion Accountability and Transparency

WRH was one of the first, if not the first, hospital in the Province to publicly disclose the various metrics and data (BIG DOTS) I have referred to previously for the world to see on our Internet site. It is our patient's data, we have an obligation to share it and they have a right to see it and ask us questions about it.

In addition, you will see that every admitted patient receives a letter from me that welcomes them to the hospital, invites them to recognize team members through *Above and Beyond* and if they



have an issue they cannot seem to resolve with team members directly they can call me or email me.

I can inform you that my philosophy is to support staff in trying to resolve any issues that may arise, keep “small issues small” and make our patient/family experience at WRH what they deserve – Outstanding Care ....No Exceptions !



## Strategic Direction – Create a Vibrant Workplace

### Above and Beyond

- Windsor Regional Hospital recognizes the important role of ALL staff (employees, physicians, volunteers and associates) in fulfilling its mission and striving for its Vision – *Outstanding Care – No Exceptions!*
- In keeping with this principle, Windsor Regional Hospital launched the *Above and Beyond* Recognition Program in 2008 to recognize individual efforts in providing excellent service.

- To date, over 3100 individuals have been recognized. Patients, families, visitors and colleagues complete an online nomination or call in to tell us about exceptional service they have received.
- Each month an honour roll of those whose submission satisfied the criteria is posted to our website and digital TVs. As a reward, and to further encourage our staff to continue to treat patients as they would their own families, individuals are recognized with a token (referred to as “dog tags” from staff) and note from the CEO. Tokens then can be turned in by staff in exchange for gift cards.
- Every quarter, *Above and Beyond* nominations are reviewed and a selection of the individuals are featured on banners and billboards across the City to recognize and introduce our staff to the public. □ These are the same individuals you see on reports, presentations and posters throughout the organization. That is because it is our staff that make WRH what it is...not the facilities or equipment.
- We are anxious to expand this program to our new Ouellette Campus staff and invite nominations at [www.wrh.on.ca](http://www.wrh.on.ca).

**IT'S EASY TO THANK A STAFF MEMBER WHO HAS:**

- ☒ helped make your experience with Windsor Regional a positive one.
- ☒ gone “Above and Beyond” to help others.




- 1 Find us at [www.wrh.on.ca](http://www.wrh.on.ca)
- 2 Click on 
- 3 Fill out our online form.

**COMPASSION is our PASSION**

**WINDSOR REGIONAL HOSPITAL**  
OUTPATIENT CARE - NO EXCEPTIONS

**METROPOLITAN CAMPUS** 1995 LENS WINDSOR, ONTARIO N8W 1L9 • **OUELLETTE CAMPUS** 1030 OUELLETTE AVE. WINDSOR, ONTARIO N9A 1E1

# Strategic Direction - Strengthen and Sustain a Proactive Approach to Health Care Funding Reform

## Financial Red/Green

- During the last 16 years, WRH has only operated at a break even or surplus position 5 times. Four of those times have been the last 4 years.
- For the past 4 years, a monthly process that has been in place at WRH is the Financial Red/Green sessions with Vice-Presidents, Directors, Managers and myself. These meetings compare monthly and year to date performance to budget of each program of WRH under certain key metrics (Wages and Benefits, Revenue, Drug expense, Medical/Surgical supplies and other supplies).
- Each month each and every portfolio must address any variances positive or negative to budget.
- A positive variance is as troubling as a negative variance if you cannot explain its origin.
- From time to time volunteer members of the WRH Finance and Audit Committee or WRH Board members have attended the sessions. We always appreciate their attendance.

# Strategic Direction - Distinguish Ourselves Through Superior Performance, Innovation, and Exceptional Customer Service



## Have you ever heard of AIDET?

**AIDET** is a framework to communicate with patients and their families as well as with each other. It is a simple acronym that represents a very powerful way to communicate with people who are often nervous, anxious and feeling vulnerable. It can also be used as we communicate with other staff and colleagues, especially when we are providing an internal service. It has proven to increase patient satisfaction and, as a result, staff satisfaction.

**Acknowledge** — Greet people with a smile and use their names if you know them. Attitude is everything. Create a lasting impression.

- "Good morning/afternoon, Ms. Jones. We've been expecting you and we're glad you are here."
- "Good morning/afternoon, Mr. Smith. Welcome to Windsor Regional Hospital. We want to make your visit as convenient as possible. Would you please take a moment to confirm that we have your most current information?"

**Introduce** — Introduce yourself to others politely. Tell them who you are and how you are going to help them. Escort people where they need to go rather than pointing or giving directions.

"My name is Susan and I will be conducting your test today. I am a certified Ultra Sonographer and I do about six of these procedures a day. The doctors say that my skills are among the best. Do you have any questions for me?"

"Mrs. Smith, you will be seeing Dr. Jones today. He is an excellent Physician. He is very good at listening and answering patient questions. You are fortunate that he is your Physician."

"Mr. White, Dr. Purple would like you to have an X-ray in our Radiology department. We have an excellent team of Radiology Technicians who use state-of-the-art equipment. I'm confident you will have a great experience."

**Duration** — Keep in touch to ease waiting times. Let others know if there is a delay and how long it will be. Make it better and apply service recovery methods when necessary.

"Dr. Heart had to attend an emergency. He was concerned about you and wanted you to know that it may be 30 minutes before he can see you. Are you able to wait or would you like me to schedule another appointment?"

**Explanation** — Advise others what you are doing, how procedures work and whom to contact if they need assistance. Communicate any steps they may need to take. Make words work. Talk, listen and learn. Make time to help. Ask, "Is there anything else I can do for you?"

"The test takes about 30 minutes. The first step is drink this solution and then we will have you wait 20 minutes before we take a blood sample. Would you like to read while you wait?"

**Thank You** — Thank somebody. Foster an attitude of gratitude. Thank people for their patronage, help or assistance. Use reward and recognition tools.

"Thank you for choosing Windsor Regional Hospitals. It has been a privilege to care for you."

Thank you for your call. Is there anything else I can do for you? I have the time."

- To date, over 25 WRH staff have been trained to deliver the program and over 100 individuals have been trained through the efforts of the Patient Experience Task Force and the WRH Learning Resources department. Management and front-line employees from Housekeeping, Facilities, Food and Nutrition, Learning Resources, Security, Volunteer Services and Public Affairs have been some of the first to participate.
- Watch for staff wearing “Compassion is our Passion” pins – the WRH motto. The pin means they have received the AIDET training. For more information, contact Linda McLean 254-5577 ext. 52005/[linda\\_mclean@wrh.on.ca](mailto:linda_mclean@wrh.on.ca).

### **Genius Lab**

- Windsor Regional Hospital prides itself on innovative ideas. From developing its own ‘Harm Index’ to providing ‘At Your Request’ Food Patient Food service - we are truly an organization that ‘thinks outside of the box’. As stated by Albert Einstein "Imagination is more important than knowledge”.
- The WRH Genius Lab seeks innovative and creative ideas from all staff (Employees, Physicians, Volunteers and Affiliates). Since 2008, Windsor Regional has sought ideas/suggestions that either improve patient care, save money, improve efficiency or generally make WRH an even better place to work and care for patients. To date over 55 Genius Lab ideas have been implemented.
- To qualify, Genius Lab ideas must be deemed to be unique and implemented as a direct result of the submission. Only those whose submissions are accepted are contacted. If you have a question about your submission, contact Public Affairs (52005) – often similar ideas are submitted or projects are already underway...so be patient. It is all in the name of quality improvement. Successful submitters are rewarded with dinner for two at a local restaurant. (Value \$150).
- Visit the WRH Intranet to make a submission or view the Genius Gallery to see a sampling of previous winners. I look forward to reviewing many more ideas and suggestions.



## Strategic Direction - Strategically Engage With External Partners

- Windsor Regional Hospital cannot be successful without the partnerships, affiliations and support of all of the various healthcare providers in the region.
- One partner that we have created a relationship with that will forever change Windsor/Essex hospital healthcare delivery is Hôtel-Dieu Grace Healthcare. As we move forward, this relationship will continue to get stronger for the benefit of local hospital healthcare delivery.