

Rejuvenating, Re-imagining and Expanding Organizational QI capacity at WCH

A QI project revolutionizing the Best Practice Guideline (BPG) Program for frontline staff

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Background

Women's College Hospital (WCH)

- World leader in ambulatory care, health for women, health equity and health system solutions
- Strategic plan to enable the intersection of research, care innovation and education through the implementation of a learning health system
- Designated Registered Nurses Association of Ontario (RNAO) as a Best Practice Spotlight Organization (BPSO) to implement Best Practice Guidelines (BPG) into clinical practice

Problem

Root cause analysis revealed lack of:

- quality improvement (QI) knowledge/tools
- time/support
- targeted clinical deliverables aligned to program goals

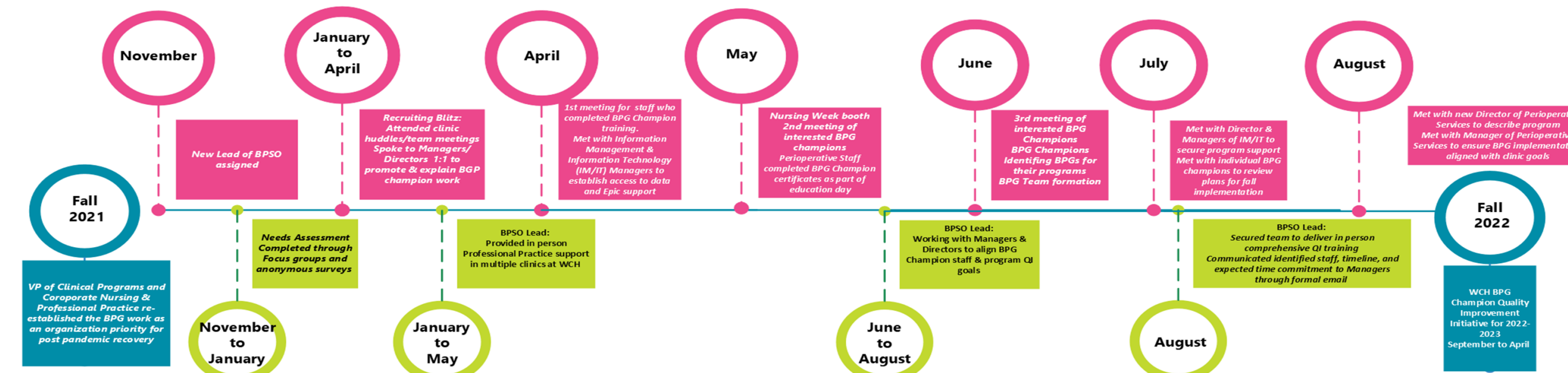
Aim Statement

To improve QI Capacity in Nursing & Health Disciplines at WCH by 50% by April 2023

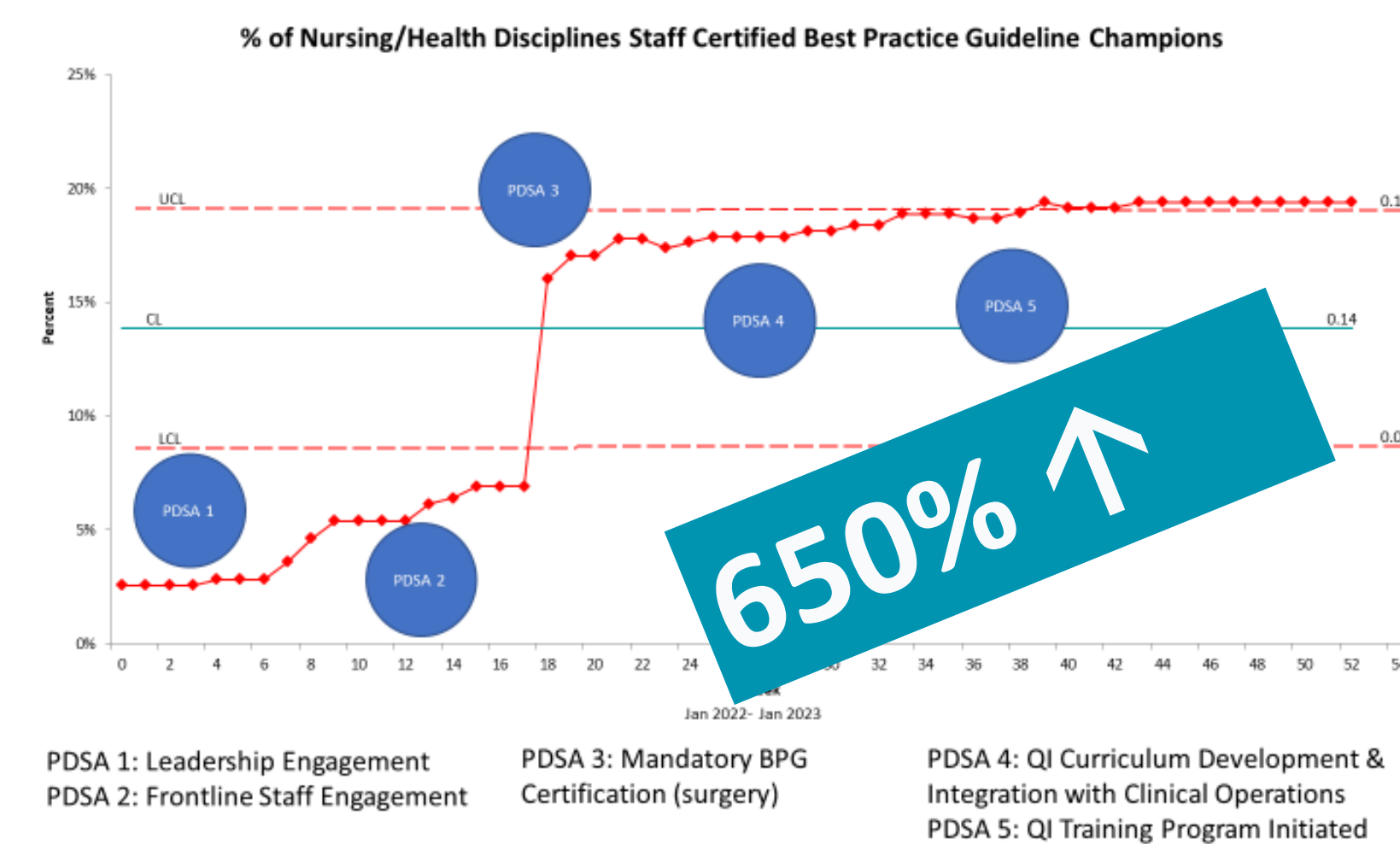
Family of Measures

- Primary Outcome:** % of nurses/Health Disciplines with QI training; # of Academic poster/presentations in 2023
- Process Measures:** # of workshops, % of APQIP submissions with nursing/HD, % of BPG Champions, Utilization of QI Tools
- Balancing Measures:** change in patient volumes; staff satisfaction

Timeline of Activities



Results



Organizational Journey

BPG Champion Program	Spread & Sustainability
Emails sent to 113 interested staff	Academic Output: 10 posters/presentations; 7 ethics submissions
# BPG Champions: 83 (19.4%)	Ongoing Professional Development
Total Best Practice Guidelines: 6 across 17 clinics	Building QI Leadership Capacity
WCH BPG QI Capacity Building	
# of Staff enrolled in WCH BPG QI Capacity Building: 35	
# of Projects: 15	
Attendance in WCH BPG QI Capacity Building : 60%	

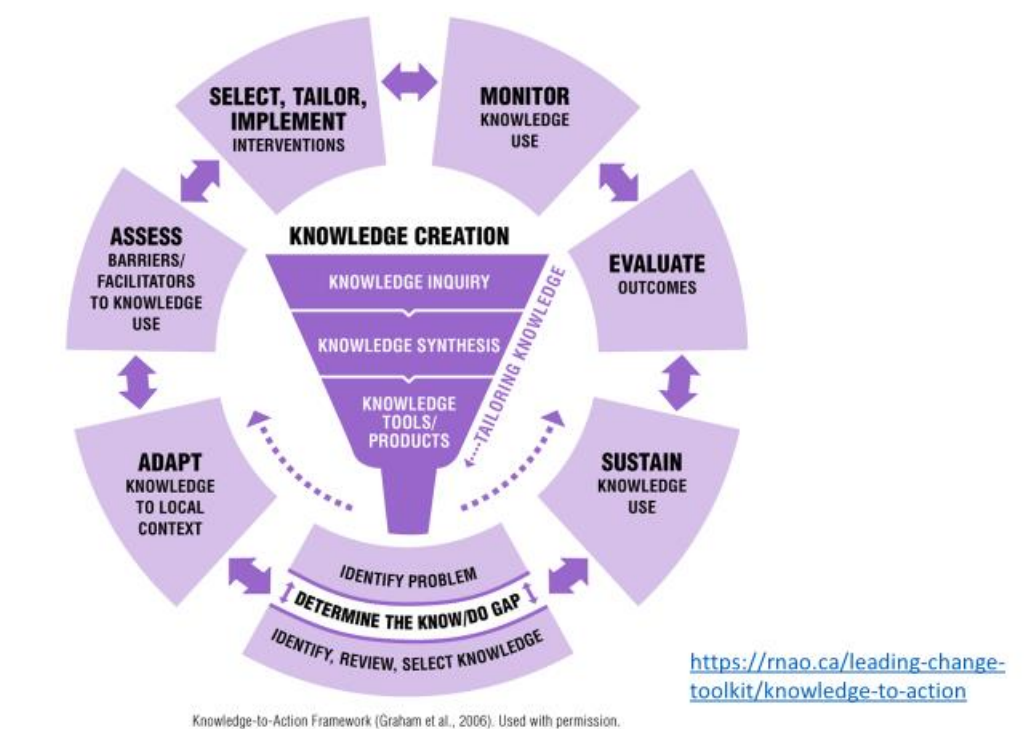
Conclusion

The QI Capacity Building initiative has high frontline staff and manager engagement organizationally despite competing healthcare pressures. Consistent with prior research, the program's success may be attributed to: building on an existing internal priorities, building on existing BPSO designation, and support by our senior leadership, but the structure, design and outcomes have been driven by the frontline staff requests. (1) The program also has iteratively adapted to improve subsequent sessions based on feedback. The sustainability of the program is evidenced by new staff enrolment for the second year and continued operational support to sustain current projects.

Next steps:

- Patient engagement is required to ensure those with lived experience are represented. Plan to co-lead patient engagement session and for selection of BPG projects in future.
- Solidify operational infrastructure at program level to integrate staff QI into clinical operations.

Theory of Change



A key characteristic of high organizational performance in cost and quality is systematic QI capacity building. (2)

We utilized the **Knowledge-to-Action framework** to engage the organization on system and interpersonal levels, utilizing multi-modal tools, including the BPG Champions to **implement evidence-based practice changes**.

Notable Considerations

Equity, Diversity & Inclusion: To ensure broad staff representation, a focused effort on recruitment from a variety of clinics, disciplines and staffing complement (e.g. lack of prior educational opportunities) was undertaken.

Acknowledgements

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References:

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- Erlingsdottir, G., Ersson, A., Borell, J., & Rydenfält, C. (2018). Driving for successful change processes in healthcare by putting staff at the wheel. *Journal of Health Organization and Management*, 32(1), 69–84. <https://doi.org/10.1108/JHOM-02-2017-0027>