

Let's Make Healthy  
Change Happen.



# Quality Improvement Plan (QIP) Narrative for Health Care Organizations in Ontario



March 2025

This document is intended to provide health care organizations in Ontario with guidance as to how they can develop a Quality Improvement Plan. While much effort and care has gone into preparing this document, this document should not be relied on as legal advice and organizations should consult with their legal, governance and other relevant advisors as appropriate in preparing their quality improvement plans. Furthermore, organizations are free to design their own public quality improvement plans using alternative formats and contents, provided that they submit a version of their quality improvement plan to Health Quality Ontario (if required) in the format described herein.

[ontario.ca/excellentcare](https://ontario.ca/excellentcare)

## Overview

Sinai Health is comprised of Mount Sinai Hospital, Hennick Bridgepoint Hospital, Lunenfeld-Tanenbaum Research Institute and system partner Circle of Care. As an integrated health system, it delivers exceptional care from healthy beginnings to healthy aging, especially for people with specialized and complex health needs, in hospital, community and home. Sinai Health discovers and translates scientific breakthroughs, develops practical health solutions, educates future clinical and scientific leaders and leads efforts to eliminate health inequities. Its Lunenfeld-Tanenbaum Research Institute ranks in the top ten biomedical research institutes in the world. Sinai Health is an academic teaching institution, affiliated with the University of Toronto.

In 2016, Sinai Health's Board of Directors approved the first set of Quality Aims to align and focus the newly amalgamated organization's quality efforts, while setting ambitious improvement targets over a multi-year timeframe. The goal in establishing these Quality Aims was to define what "best care and best patient experience" looks like for complex and highly specialized patients across Sinai Health. They serve as measurable statements outlining the organization's quality priorities and expected performance levels.

This year represents the third renewal of our Quality Aims, flowing from a broad consultative process that wrapped up in December 2024. This process included a comprehensive review of internal and external data, patient and family feedback, insights from key stakeholders and frontline staff, and input from content experts. The organization's annual Quality Improvement Plans (QIP) provide the framework to achieve Sinai Health's Quality Aims, guiding multi-year activities and driving progressive improvement targets.

By embedding the Quality Aims 2025-2028 into our organizational strategy, Sinai Health is reinforcing its commitment to excellence in patient care, safety, and experience. Achieving these aims requires an integrated, system-wide approach, leveraging Interprofessional collaboration, data-driven decision-making, and continuous quality improvement.

These Quality Aims serve as a unifying framework, ensuring that quality enhancement remains at the forefront of operational and strategic planning, clinical innovation, and workforce development. Through clear sub-aims and measurable targets, our teams can track progress, adapt to emerging challenges, and drive meaningful improvements. The alignment of these aims with Sinai Health's broader strategic initiatives fosters a culture of accountability, engagement, and sustained excellence.

As we move forward, these Quality Aims will guide our efforts in shaping a health-care environment where patients receive the best possible care, staff are supported in delivering excellence, and system-level improvements contribute to long-term success. With strong governance oversight and leadership commitment, we will continue to evolve, ensuring that Sinai Health remains at the forefront of quality, safety, and patient-centered care.

Our new Quality Aims will continue to be rooted in Health Quality Ontario’s key quality dimensions—Safe, Timely, Effective, and Person-Centred—with the addition of Equity, which was previously an embedded principle instead of a core focused domain.

The 2025-26 Quality Improvement Plan (QIP) was developed through a systematic, consultative process involving patient and family feedback, and input from key stakeholder committees, direct care staff, and subject matter experts. The QIP was informed by a number of planning and priority assumptions including:

- Quality Aims 2025-2028
- Board Priorities and Sinai Health Strategic and Operating Plan (annual and multi-year)
- Ontario Health strategic priorities and recommended indicators
- Renewal of the Sinai Health Digital Strategy 2025-28
- External Requirements (Magnet™ and Accreditation)
- Aggregated critical incident data, patient surveys, internal and external quality data, and Patients Relations data.

In Year One (2025-26) of Sinai Health’s Quality Aims, the QIP identifies key opportunities for foundational work as part of our change ideas. This foundational work is critical as we embark on our first year of the Quality Aims, ensuring that each initiative is strategically planned, evidence-based, and sustainable. By establishing a strong base, we can effectively drive meaningful improvements while aligning efforts across the organization.

The following provides a high-level overview of Sinai Health’s Quality Aims, which serve as the anchor for the 2025-26 QIP:

## **SAFETY**

### **Quality Aims 2025-28 (SAFE)**

**Aim Statement:** Achieve ZERO “Never Events” and eliminate preventable Health Care-Associated Infections (HAIs)

**Sub- Aim Statement #1:** Achieve ZERO Never Events in the following targeted areas:

- Unintended foreign object left in the patient
- Stage III or IV pressure injury acquired after admission
- Leaving a secured ward without knowledge of staff
- Suicide or suicide attempt where prevention protocols were to be in place (self-harm event)

**Sub-Aim Statement #2:** Eliminate Preventable Healthcare Associated Infections (HAIs) through:

I. Outperforming provincial/national benchmarks for rates of:

- C. Difficile infection (CDI)
- Central line associated bloodstream infection (CLABSI)
- Catheter associated urinary tract infection (CAUTI)
- Vancomycin-Resistant Enterococcus (VRE) bacteremia rate

II. Achieving ZERO transmission of viral respiratory infections in hospital beyond one incubation period (unit outbreak)

### **Quality Improvement Plan 2025-26 (SAFE)**

This year, Sinai Health will focus on preventing the Never Event of Stage III or IV pressure injuries acquired after admission and reducing self-harm among at-risk patients in our Emergency Department and Mental Health in-patient unit. To achieve this, we are implementing evidence-based interventions, enhancing staff education, updating environmental design, and leveraging data-driven strategies to improve early identification, risk assessment, and prevention efforts. These targeted initiatives will strengthen patient safety, improve outcomes, and support a culture of continuous quality improvement.

Our objective this year is to continue monitoring and reducing Health Care-Associated Infections (HAIs), which can lead to severe complications or even death. Preventing HAIs is a team effort, and our support services team plays an integral role in infection prevention by enhancing shared equipment protocols, conducting targeted training sessions, and implementing real-time audit processes to provide immediate feedback.

Hospital-acquired infections remain a critical focus of this year's QIP as they directly impact patient safety, clinical outcomes, and health-care resource utilization. While we have made significant progress, ongoing vigilance is essential to sustaining improvements and preventing setbacks. Keeping HAIs on the QIP ensures continued monitoring, accountability, and the adoption of best practices to drive infection rates down. This work aligns with our commitment to high-quality, safe patient care and reinforces a culture of continuous improvement across our clinical teams.

## TIMELY (Access and Flow)

### Quality Aims 2025-28 (TIMELY)

**Aim Statement:** Ensure timely access to care in acute, complex continuing and rehabilitative care by reducing waits and harmful delays in care

**Sub-Aim Statement #1:** Achieve Top Performance (90th percentile – P4R Rank, OH Regional) amongst academic organizations focused on:

- Ambulance off-load time (Ontario Health Priority)
- ED wait time to physician initial assessment (Ontario Health Priority)
- ED Time to inpatient bed (Ontario Health Priority)
- ED length of stay for non-admitted patients with low/high acuity
- ALC rate and throughput

**Sub-Aim Statement #2:** Achieve incremental year-over-year improvement in surgical volume and wait time target by:

- Increasing capacity and elective surgical volumes
- Increasing cancer surgical volumes
- Improving % wait list priority targets for all surgeries (long waiters)

### Quality Improvement Plan 2025-26 (TIMELY)

At Mount Sinai Hospital, we have made significant strides in reducing Time to Inpatient Bed, surpassing the year-end target set for our 2024-25 Quality Improvement Plan (QIP). A key driver of this success was the expansion of our General Internal Medicine bed capacity related to our capital project, with an additional 20 beds operational by the end of Q3, increasing our ability to meet patient needs. In anticipation of seasonal surges, the opening of a temporary eight-bed surge unit was prioritized, providing critical additional capacity during the respiratory virus season. These targeted efforts have enhanced patient flow, improved access to timely care, and reinforced our commitment to efficient and responsive hospital operations.

This past August, Sinai Health opened a 16-bed Reactivation Care Centre (RCC) located at the former West Park facility. This initiative is in partnership with University Health Network and Trillium Health Partners, each having their own designated RCC unit but working together to share resources. These RCC beds operate as a “unit” of Mount Sinai Hospital and are located in the newly named UHN Reactivation Care Centre. The care philosophy has an emphasis on activation and engagement to enable patients to transition “home” (e.g., former residence, long-term care or, assisted living facility, etc.). The RCC provides expedited access to post-acute care for Mount Sinai Hospital patients who require Alternate Level of Care (ALC) or at-risk for ALC.

Sinai Health, in collaboration with system partner Circle of Care, launched a Hospital to Home program in November 2024. The implementation of Sinai Health to Home is occurring in a phased approach beginning with patients from Hennick Bridgepoint Hospital. Plans to expand to Mount Sinai Hospital in Q4, and our RCC in early 2025-26, are in motion. Sinai Health to Home is a time-limited, needs-based program designed to provide enhanced home care supports to facilitate discharge of patients designated ALC or at risk for ALC, and to relieve hospitals of ALC pressures.

We remain committed to improving access to surgical care by continuing our efforts to increase operating room capacity, maximize elective **surgical hours** and increase **surgical volumes**. Addressing long wait times, particularly for cancer and other urgent surgeries, remains a priority as we work to enhance efficiency, streamline processes, and maximize available resources. Through collaboration with surgical teams, data-driven decision-making, and system-wide improvements, we strive to ensure timely, high-quality surgical care for all patients.

## **EFFECTIVE (Population Health Management)**

### **Quality Aims 2025-28 (EFFECTIVE)**

**Aim Statement:** Ensure safe, effective transitions in care and best outcomes for older adults

**Sub-Aim Statement #1:** Ensure safe and effective transitions in care by reliably delivering targeted [HQO Transition Between Hospital and Home standards](#), including implementing an addictions and mental health pathway.

**Sub-Aim Statement #2:** Achieve the highest quality of life and health outcomes for older adults by meeting their fundamental care needs and optimizing transitions in care by focusing on the 4Ms, as outlined by the [IHI Age-Friendly Health Systems initiative](#) and other leading practices. The 4Ms include:

- What Matters
- Medications
- Mentation (delirium, depression and dementia)
- Mobility

### **Quality Improvement Plan 2025-26 (EFFECTIVE)**

As part of our QIP for 2024-2025 under the EFFECTIVE domain, we adopted the Choosing Wisely Canada Hospital program targeting Low Value Lab Tests. Sinai Health has received the highest designation in the Choosing Wisely Canada Hospital program, achieving the Leadership Status level. This designation acknowledges Sinai Health's commitment to enhancing the quality and safety of care by actively reducing unnecessary tests, treatments, and procedures.

To achieve this designation, Sinai Health participated in Choosing Wisely Canada’s national quality improvement programs, Using Labs Wisely and Using Blood Wisely. These programs focus on reducing repetitive lab testing and improving blood transfusion practices. Beyond these initiatives, Sinai Health has led efforts to decrease sedative-hypnotic prescribing and reduce unnecessary urinary catheter use—initiatives that have enhanced patient care and inspired other hospitals, like William Osler Health System, to undertake similar improvement projects.

This year, our focus in the EFFECTIVE domain will be on increasing our Emergency after-care psychiatric visits, ensuring timely follow-up and continuity of care for patients in crisis. Additionally, we will be operationalizing an addictions services program at Hennick Bridgepoint Hospital, expanding access to comprehensive, evidence-based treatment and support for individuals struggling with substance use. These initiatives reflect our commitment to improving patient outcomes, enhancing system navigation, and strengthening the integration of mental health and addictions care across our organization.

## **EQUITABLE (Equity and Indigenous Health)**

### **Quality Aims 2025-28 (EQUITABLE)**

**Aim Statement:** Deliver Culturally Responsive and Accessible Care

**Sub-Aim Statement #1:** Advance the maturity of Sinai Health’s Equity program to ensure culturally responsive and accessible patient care

**Sub-Aim Statement #2:** Reduce disparities in access to care, patient experience and clinical outcomes for equity-deserving populations in targeted program areas.

### **Quality Improvement Plan 2025-26 (EQUITABLE)**

Sinai Health is committed to enhancing accessibility and inclusion for individuals of all abilities. The 2024-2029 accessibility plan is organized around the following general requirements of the [AODA’s Integrated Accessibility Standards Regulation](#):

- Customer Service
- Information and Communication
- Design of Public Spaces
- Employment

An accessible Sinai Health means prioritizing the principle of “Access over Accommodation”, ensuring that our spaces, programs, services, and workplace environment are designed with accessibility, inclusion, and belonging at the forefront. This approach aims to ensure that the needs of individuals with disabilities are integrated upstream into the organization’s core hospital planning, design and quality improvement efforts.

In January 2025, Hennick Bridgepoint Hospital achieved the Rick Hansen Foundation Accessibility Certification (RHFAC) – Base Level, a significant milestone in our commitment to creating an inclusive and accessible health-care environment. This certification recognizes our efforts to improve physical accessibility within our facilities, ensuring that patients, families, and staff—regardless of mobility challenges—can navigate our spaces with greater ease and dignity. Incorporating accessibility into our QIP aligns with our broader goals of patient-centered care, health equity, and operational excellence. As we continue to enhance accessibility, we are committed to identifying and addressing barriers to care, fostering a more inclusive environment for all.

A key focus of our QIP is enhancing linguistic accessibility by introducing on-demand patient interpreter services in key areas. This initiative ensures that patients with language barriers receive clear, accurate, and timely communication, improving their overall healthcare experience, safety, and outcomes. By integrating interpreter services into high-priority areas, we are advancing health equity, reducing misunderstandings, and fostering a more inclusive and patient-centered care environment.

Sinai Health's cancer program continues to work in close partnership with the Toronto Regional Cancer Program's Indigenous Cancer Care team. This includes connecting patients to the supports provided by the Indigenous Patient Navigator and assisting with the team's efforts around enhancing cancer screening awareness.

## **PERSON CENTERED (Patient and Provider Experience)**

### **Quality Aims 2025-28 (PERSON CENTERED)**

**Aim Statement:** Deliver a Compassionate Care strategy by implementing an evidence based compassionate care intervention bundle, supporting staff well-being and prioritizing patient needs over paperwork

**Sub-Aim Statement #1:** Implement a compassionate care intervention bundle across Sinai Health that aligns with the strategic framework outlined below:

**Context** – Implement Safe Staffing models and reduce administrative burden

**Cultivate** - Create an environment that builds the capabilities and capacity of health-care professionals, patients and their family caregivers to deliver compassionate care

**Connect** - Enhance workflow processes and daily routines to support patient connections

**Care(giver)** -Tailor care to individual patient needs in partnership with caregivers



**Sub-Aim Statement #2:** Enable an environment that supports staff well-being and retention by:

- Eliminating (*Theoretical Best*) serious incidents of workplace violence
- Being a top performer in health-care worker retention and avoiding premature departures of a nurse within two years of hire (Never Event)
- Creating an environment of belonging: REDI (reconciliation, equity, diversity and inclusion)
- **Sub-Aim Statement #3:** Develop and fully implement a renewed Electronic Patient Record (EPR) strategy across Sinai Health

## Quality Improvement Plan 2025-26 (PERSON CENTERED)

A focus on compassionate care was identified as a Board of Directors and Sinai Health priority for 2024/25. This was predicated on several factors including the need to deliver high-quality compassionate care; optimize patient and care partner experience; and enhance healthcare workforce resilience and retention. The key focus of this is to deliver a compassionate care strategy by implementing an evidence-based compassionate care intervention bundle, supporting staff well-being, and prioritizing patient needs over paperwork (digital strategy).

Sinai Health hosted an extensive co-design engagement event to select measures of compassionate care with hospital-wide and unit specific Patient Family Advisory Council representation. The Schwartz Center Compassionate Care Scale (Patient Version) was selected which emphasizes the importance of empathetic, respectful, and compassionate interactions between patients and providers. The plan is for Sinai Health to co-design a Compassionate Care Intervention Bundle and to pilot this bundle on one unit at Mount Sinai Hospital and Hennick Bridgepoint Hospital as identified by the analysis of the survey results.

Staff well-being and retention remain a top priority in our QIP as we work to create a safer and more supportive workplace. This year, we are focusing on enhancing the management of high-risk behaviours and strengthening our response to serious workplace violence incidents resulting in harm. By implementing evidence-based strategies, improving staff training, and increasing access to de-escalation resources, we aim to reduce risks and foster a culture of safety. Additionally, we are committed to providing comprehensive support for staff involved in workplace violence incidents, ensuring they receive timely debriefing, mental health resources, and ongoing assistance. These efforts are critical to staff retention, engagement, and overall well-being, reinforcing our commitment to a safe and respectful work environment.

Staff well-being and retention are key priorities, including a deeper understanding of premature staff departures within two years of hire. Through exit interviews and staff feedback, we aim to identify trends, challenges, and opportunities for improvement. A key focus will be on Reconciliation, Equity, Diversity, and Inclusion (REDI) initiatives to foster a more inclusive and supportive work environment. By addressing workplace culture, onboarding experiences, and professional growth opportunities, we strive to enhance staff engagement and long-term retention.

Finally, our digital strategy is centered on “putting patients before paperwork” (reducing administrative burden) and streamlining clinical workflows to enhance the delivery of patient care. This year, we are focused on achieving key milestones in digital transformation, including planning for improved electronic documentation and greater integration of digital tools to support decision-making. By leveraging technology effectively, we aim to improve efficiency, support frontline staff, and enhance the overall patient experience while maintaining a strong focus on quality and safety.

## Palliative Care

Sinai Health was selected as a health service organization for the Ontario Health / Ontario Palliative Care Network's palliative clinical coaching initiative. The focus on this initiative is the implementation of the provincial Palliative Care Health Service Delivery Framework to strengthen the delivery of palliative care in the community. The role of the coaches is to support community care providers to gain comfort and skills in primary-level palliative care. The aims of this initiative are:

- 1) Building palliative care competencies of health care providers in community organizations
- 2) Broader integration and coordination between specialist providers and community organizations
- 3) The provision of timely, equitable access to high-quality palliative care to patients and their families, as close to home as possible

Starting in July 2024, outreach began to community organizations, including Long-term Care Homes, Family Health Teams, Community Health Centres and Home and Community Care Support Services. This work will continue in 2025-2026.

## Emergency Department Return Visit Quality Program (EDRVQP)

Alignment of the Emergency Department (ED) return visit audit program with the QIP program strategically enables quality improvement initiatives in emergency medicine to be discussed at the executive and board level. A new approach was introduced this year for compiling the reviews. Previously, individual reports were provided to each physician for their own cases as a reflective practice exercise, while formal reviews were conducted by ED leadership and volunteers from the physician group who divided the task of reviewing 50 randomly selected cases. This year, each physician was asked to review their own cases and submit two reviews using the standard template, ensuring they were relevant to our practice.

Observations from this year's reviews continue to reinforce that sub-optimal access to resources and follow up can generate return visits. Examples include:

- ED revisit and admission following an initial discharge from a consulting service. In the majority of these cases, patients were admitted to the same consulting service, with the initial diagnosis or progression of their underlying clinical condition.

- Final diagnostic imaging reports provided from staff over-reads result in not infrequent discrepancies which lead to changes in diagnosis, management, or need for follow up with patients who have subsequently been discharged.

These issues are not unique to Sinai Health, and often reflect system-wide pressures. In an effort to continue to build on previous audit findings and to improve data availability to inform future quality improvement, the following areas of opportunity have been proposed:

1. **Key Performance Indicators:** Provide the ED physician-specific metrics surrounding resource use to inform areas for targeted quality improvement initiatives, standardization of practice, and resource utilization.
2. **Case Review:** Currently, individual physicians review their own cases which may introduce bias in the findings and recommendations. Next year, we plan to explore opportunities to expand from an ED physician centralized audit process to a more multidisciplinary and distributed approach.
3. **Access to timely mental health assessments:** Building on the success of the current Psychiatric Emergency Services (PES) program, we also plan to implement an Emergency Aftercare Service (EAS) program. Starting early 2025, after hours patients can be referred to the PES EAS who need timely mental health assessment without admission.
4. Plan to review opportunities to address radiology access during off hours.

## Executive Compensation

Hospital leadership at Sinai Health is held accountable for achieving the QIP targets through performance-based compensation. This ensures organizational alignment and leadership focus on continuous improvement in quality of care. In 2025/26, executives will have at least 75 per cent of performance-based compensation tied to a subset of the indicators in the QIP. The selected indicators will be derived from the complement of targets and initiatives outlined in the QIP, including targets for improvements in high-leverage, system-wide measures for patient safety, timely access, effective care delivery and person-care.

## Contact Information/Designated Lead

Nely Amaral  
Vice President, Quality, Patient Experience and Awards of Distinction

## Sign-off

I have reviewed and approved our organization's Quality Improvement Plan:

### **Board Chair**

Andrew Hoffman  
Chair of the Board  
Sinai Health

### **Board Quality Committee Co-Chair**

Thomas J. Kornya  
Chair, Patient Safety and Quality Committee  
Sinai Health

### **Chief Executive Officer**

Dr. Gary Newton  
President and CEO  
Sinai Health

### **Chief Nurse Executive**

Jane Merkley  
Executive Vice President, Chief Nurse Executive & Chief Operating Officer  
Sinai Health