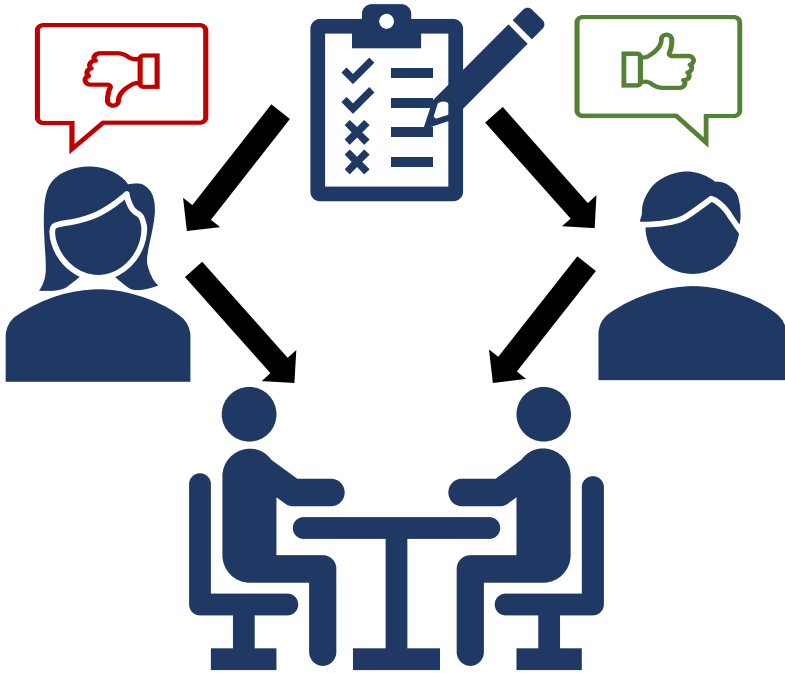


SERVICE EXCELLENCE

Patient Relations & Patient Experience



SJGHEL strives to deliver high quality and safe care. We recognize however there are times patients and families, and/or caregivers, identify opportunities for us to improve and share their feedback through the issuance of a complaint. Multiple channels and tools are used throughout the Organization to continue to inform the public of the Patient Relations process and illicit feedback – both compliments and concerns.

Guidelines offered by Health Quality Ontario and regulatory requirements outlined in the Excellent Care for All Act (ECFAA) suggest a benchmark of acknowledging patient relations inquiries and complaints **within five (5) business days and we will seek to maintain our current performance of 90%**. This metric is audited monthly and reported on our internal *Quality and Patient Safety (QIP) Scorecard*, which is the responsibility of SJGHEL's Quality and Patient Safety Committee and submitted as requested to our Quality Committee of the Board.

SAFE & EFFECTIVE CARE

Hand Hygiene Compliance



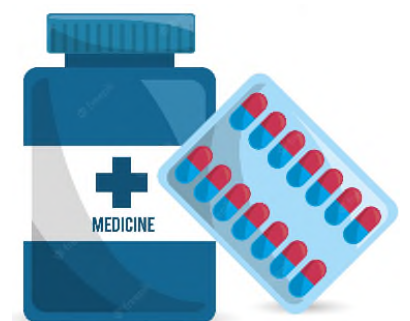
SJGHEL will continue to improve staff compliance with hand hygiene practices. Our Infection Prevention and Control Officer will continue to use a multi-pronged approach including but not limited to targeted staff education highlighting the importance of the 4 moments of hand hygiene and re-implementation of “wash and glow” sessions, hand hygiene audits, and clear communication of monthly audit results and related action plans to staff.

Specifically, we will audit proper hand hygiene practices prior to interacting directly with a patient or a patient environment – aiming for a **2% increase, improving our current performance of 78% to 80%**. This metric is tracked monthly and reported on our internal *QIP Scorecard*, which is the responsibility of SJGHEL's Quality and Patient Safety Committee and submitted as requested to our Quality Committee of the Board.

Medication Safety

SJGHEL will continue to focus our efforts on maximizing patient safety and reducing medication errors through improving medication reconciliation on admission.

Specifically, we will audit documentation of: **1.** two (2) sources, **2.** QA signatures, **3.** medication name, **4.** dose and frequency and are aiming for a **10% increase in our current performance, from 45% accuracy to 50% completion**. This metric is audited monthly and reported on our internal *QIP Scorecard*, which is the responsibility of SJGHEL's Quality and Patient Safety Committee and submitted as requested to our Quality Committee of the Board.



Workplace Violence Prevention



SJGHEL will continue to ensure a safe, healthy and supportive workplace environment for our staff. Our Organization will continue to promote a “just culture” which encourages a “culture of reporting”.

Specifically, we will audit the **# of workplace violence incidents reported by our staff (as defined by OHSa) within a 12-month period, in relation to the # of employee full-time equivalents**. This metric is audited monthly and reported on our internal *QIP Scorecard*, which is the responsibility of SJGHEL's Quality and Patient Safety Committee and submitted as requested to our Quality Committee of the Board.