

Let's Make Healthy
Change Happen.



UHN's Quality Improvement Plan 2023/24



April 1, 2023

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

Overview

University Health Network's (UHN) 2023/24 Quality Improvement Plan (QIP) reflects our quality commitments to all patients, our community, and TeamUHN as we carry out exemplary programming across care, research and education as Ontario and Canada's largest academic health sciences centre – all in pursuit of our vision for *A Healthier World*.

Quality and patient safety are foundational elements that inform all care, research, and learning endeavors across UHN as we look to uphold our primary value of *the needs of patients come first*. We are fortunate to have an engaged community of 144 Patient Partners who are represented across all management and Board committees accountable for quality and safety.

This year's QIP was developed in consultation with UHN's Patient Partners and leaders from across the organization, with recognition of provincial priorities and in alignment with broader work underway to continue to strengthen quality culture, infrastructure and programming at UHN. This work is also grounded in UHN's [Patient Declaration of Values](#) – to ensure that what we do is aligned with what our patients trust from their hospital: respect and dignity, empathy and compassion, accountability, transparency, and equity and partnership.

UHN remains committed to fostering a high-reliability, zero-preventable harm care environment through the *Caring Safely Program*, alongside the development and monitoring of several quality-of-care and patient experience indicators through UHN's Corporate Scorecard. Our most recent QIP indicators were selected in alignment with areas of continued focus for performance improvement on UHN's Corporate Scorecard, and in many cases align with provincial and local priorities to enhance patient and staff experience, reduce harm, and improve access to care when and where patients need it most.

UHN's focus areas for this year's QIP are as follows:

- Increasing workplace violence reporting (*Ontario Health (OH) priority indicator*);
- Reducing emergency department (ED) wait time for inpatient bed (90th percentile);
- Continued monitoring of surgical recovery metrics (% pre-pandemic surgical activity levels, surgical backlog clear rate, % of patients experiencing long waits on surgical backlog); and
- Enhancing patient experience – did patients feel they received enough information [...] about what to do if they were worried about their condition or treatment after leaving the hospital? (*OH priority indicator*).

We look forward to advancing change ideas identified and validated by UHN's leaders and our Patient Partners, as outlined in our 2023/24 QIP Work Plan.

Aligning our Quality Infrastructure, Programming & Leadership for 2023/24 and Beyond

Important work at UHN is ongoing to further develop our quality infrastructure and education activities. This includes the launch of UHN's *Physician Council on Quality & Safety* and an inaugural UHN-wide *Quality Summit* that took place in 2022. In addition, in Spring 2022, an expert panel of external reviewers was invited by Dr. Kevin Smith, President & CEO, to analyze current state and opportunities for improvement

in UHN's quality and safety infrastructure, as well as our overall approach to quality management. Work is now underway to develop implementation plans for actioning review findings.

These initiatives and others are continuing to inform the development of a network of quality and safety across TeamUHN, where everyone has a role to play in the delivery of safe and quality care.

Patient/Client Engagement & Partnering

UHN is committed to being engaged, collaborative and responsive to patient needs. As such, UHN's Patient Partnerships Program matches Patient Partners to UHN initiatives, committees and additional activities that contribute to improving quality and safety of care. This includes the representation of Patient Partners on all management and Board Quality of Care Committees UHN-wide.

UHN's *Patient Declaration of Values (PDoV)*, "A Compass for Our Care", continues to guide our work across UHN, and aims to help staff, physicians, and learners understand what patients and families expect from their hospital, while also encouraging patient partnership.

This year, we engaged a group of our Patient Partners in reviewing and validating draft indicators and change ideas for UHN's 2023/24 QIP. Through a tailored focus group and additional outreach, we aimed to understand, from the experiences of our Patient Partners, the patient education, care supports and health literacy initiatives that could help UHN reach its targets for selected QIP indicators. A detailed follow-up report of themes from the discussion was validated by Patient Partners and was then provided to UHN's indicator leads to help finalize change ideas.

Provider Experience

The wellbeing, morale and engagement of TeamUHN continues to be of top priority for our organization. A variety of initiatives are underway to best support our teams. Highlights include:

- The development of a *UHN Inclusion, Diversity, Equity, Accessibility, and Anti-Racism (IDEAA) Strategy* based on our recent Self-Identification and Inclusion survey results, which will outline detailed action planning, concrete, measurable goals, and a robust accountability framework.
- Launch of a modernized Benefits Program, to come into effect in 2024, which better aligns with the needs of TeamUHN.
- A revitalized *Wellness@Work program*, providing members of TeamUHN even more ways to invest in their mental health and wellness, both at work and at home.
- Continued efforts to onboard and upskill hundreds of Personal Support Workers (PSWs) to strengthen care teams and enhance the delivery of safe and effective patient care.
- The development and upcoming launch of tailored profession-specific engagement strategies, kicking off with (1) nursing; and (2) allied health and health professions in Spring 2023, which will engage these groups in building solutions for recruitment and retention challenges, and how UHN can strengthen and elevate overall TeamUHN experience.
- The launch of refreshed Leadership Development programs for all levels, including informal leaders, new leaders, Managers, Directors, and Executives.

As it relates to engaging healthcare workers in identifying opportunities for quality improvement (QI), UHN's Quality & Safety team was pleased to launch an inaugural *Summit on Quality & Safety: Transforming our Future Together* in 2022, which was attended by more than 700 members of TeamUHN, a powerful indicator of engagement in QI and our commitment to continuing to deliver the safest and highest quality of care possible for our patients. To continue the momentum from 2022, the team is hosting biweekly *Interprofessional Quality & Safety Rounds*, where TeamUHN has the opportunity to learn from, and contribute to, key QI projects ongoing across the organization. Members of TeamUHN are also encouraged to identify opportunities for improvement through daily standardized UHN Safety Huddles.

Workplace Violence Prevention

UHN is committed to reporting, responding to, and reducing incidents of violence in the workplace in order to cultivate a safe and respectful work environment. Concerningly, there is mounting evidence that the rate of violence post-pandemic has been more than twice as high as the three months prior to the pandemic, at a rate of 2.53 incidents per 1,000 visits compared to 1.13 incidents per 1,000 visits prior to the start of the pandemic,¹ with healthcare practitioners in Emergency Departments as the most likely amongst hospital staff to be exposed to workplace violence (WPV).²

In the spirit of improvement, and centred on the principles of TeamUHN and patient safety, as well as improving UHN's culture of compassion, an external review of UHN's security services was launched in September 2020. This review, led by subject matter experts in mental health, security and policing, delivered a series of recommendations to enhance UHN's policies, procedures and data monitoring as it relates to security services, and drive alignment to best practices in healthcare.

Work is now underway to operationalize these recommendations, in collaboration with UHN's WPV Advisory Committee. To date, a new security incident debrief process has been developed with a clear pathway for escalation and consultation, and a biannual report on security incident debriefs will be brought to UHN's Quality of Care Committee to support continued monitoring and follow-up. UHN's WPV Advisory Committee is also working to conduct a training needs assessment and curriculum evaluation of safety and crisis intervention training in place across the organization, to explore new training opportunities that best support UHN's staff, physicians and trainees, and potential integration of security and clinical training, where appropriate.

Patient Safety

Starting in 2016, in partnership with SickKids, UHN initiated its High Reliability journey with a commitment to eliminate preventable harm for patients and family caregivers through the *Caring Safely* program. *Caring Safely* has led to a remarkable shift in UHN's safety and reporting cultures, high-reliability mindset and learning health approach. As part of this work, leaders across UHN support and facilitate standardized safety huddles in their respective areas, and champion system learnings from safety event debriefs and root cause analyses to prevent reoccurrence. Collectively, these efforts have delivered over 1,900 bed-

¹ McGuire, G.B. et al. (2022). *Impact of the COVID-19 pandemic on workplace violence at an academic emergency department*. The American Journal of Emergency Medicine, 53, 285 e.1 – 285 e.5.

² (2022). *Violence against physicians and nurses: a systematic literature review*. Journal of Public Health, 1-19.

days avoided and over \$4.5M in avoided costs. Highlights from *Caring Safely* programming over the years include:

- Education of >12,000 staff/physicians on high reliability principles and standardized safety huddles.
- Harm reduction through implementation of prevention bundles for six hospital-acquired conditions (HACs).
- Classification framework for serious safety events (>1,000+ debriefs and >50 root cause analyses (RCAs) completed).
- Reporting of UHN Q&S Scorecard (>20 reports prepared each month for TeamUHN).
- Development and support of Quality of Care Committees (QCCs).
- Renewal of Accreditation Canada approach (Exemplary Status) and conduct of Safety Culture surveys.
- Development of Patient Partner safety & quality education module to support Patient Partners in their role as members across all QCCs at UHN.

In 2019, an aggregate review of UHN's Serious Safety Events (SSEs) was conducted to understand factors contributing to preventable patient harm. Amongst the top themes were *Escalation of Care and Transfer of Accountability/Information*, which have become key areas of focus at UHN. By building on the model developed under *Caring Safely*, and taking a focused, systematic and patient engagement- and evidence-based approach, we can reduce preventable harm to patients, improve the patient experience across the care continuum and continue to be a leader in improving patient safety and health quality.

Furthermore, efforts have been made to promote learnings from Safety Events via Lessons Learned Bulletins, Patient Safety Alerts, and Patient Stories. These communications are shared at key committees and through the standardized huddle structure to ensure broad dissemination.

Health Equity

Population Health & Social Medicine Program

UHN is leading the charge on improving access and integration of care for equity-deserving populations through our Population Health & Social Medicine program. The program works to develop strategic, innovative, and data-driven population health initiatives to address the underlying social determinants of health (SDOH) driving poor health outcomes, while working to reduce health disparities, and increase equitable access to care.

The program is developing a multifaceted, interdisciplinary intervention that comprehensively addresses the SDOH for UHN patients with medical and social complexity utilizing a high proportion of acute services. A mobile care team of Community Health Workers and Nurse Practitioners, in partnership with community-based organizations, provide coordinated support for system navigation, case management, primary care, harm reduction, and links to community health services as part of a comprehensive care model to directly address unique patient needs.

In addition, the team is leading the way in the development of permanent housing as an evidence-based intervention to improve population health outcomes – the first of its kind in the country, slated for

completion in 2023. The scalable model of care, including attachment to primary care, mental health support, and harm reduction services, aims to identify frequently hospitalized and housing-unstable individuals and provide them with safe, dignified housing that includes medical and social services to improve health outcomes, manage chronic conditions, and reduce visits, readmissions, and wait times at UHN hospitals.

In 2023/24, the UHN Social Medicine program will continue to address key health inequities linked to unmet medical and social needs of UHN patients, building on Social Medicine programs that show significant success in providing tailored, comprehensive care to complex patients, including:

- *Peer Workers in the ED:* Established in 2020, Peer Workers provide trauma-informed care and connection to social services to UHN patients with complex medical and social needs in UHN EDs. A total of 3,200 UHN ED patients have received care from Peer Workers, connecting 807 patients to a shelter bed, 1,210 patients with food support, and successfully de-escalating 128 potential incidents in the ED.
- *Community Health Worker support:* A Community Health Worker embedded at UHN Francis Family Liver Clinic continues to provide system navigation and care coordination. To date, 80 high needs patients have been provided with over 200 referrals to community supports, housing, Mental Health and Substance use programs, and more.
- *Stabilization and Connection Centre:* The Stabilization and Connection Centre has diverted over 120 patients from UHN EDs to date, significantly reducing EMS offload times from 5-7 hours to 10 minutes, thereby returning over 500 hours back to the health system, and providing tailored, preferential care to patients.

Indigenous Health Program

UHN's Indigenous Health Program (IHP) is focused on improving access to high quality, effective healthcare for Indigenous people, and ensuring that Indigenous knowledges, values and voices are present and respected across a number of priority areas – *direct patient, TeamUHN and community supports, Indigenous Place-Making, education, community relationships, and data quality and governance.*

By integrating Indigenous ways of knowing, being, and doing, the IHP is advancing a strengths-based approach to health and wellness, reconciliation and partnerships. Under the leadership of the Indigenous Health Program, we have seen progress by:

- Formally committing each September to a specific healthcare-related Call to Action from the *Truth and Reconciliation Commission of Canada's 94 Calls to Action* to advance the cause of reconciliation.
- Drafting a policy on UHN Indigenous ceremonial practices to guide the use of Indigenous ceremonies and healing practices at UHN, and incorporating teachings from Indigenous community members.
- Creating and expanding Indigenous Health roles at UHN, including Emergency Navigators at Toronto General and Toronto Western hospital sites, in addition to Elder and Knowledge Keepers.
- Hosting the first summer solstice sunrise ceremony and sacred fire at the Michener Gitigan (garden) to mark National Indigenous History Month in June 2022.

- Using the plants grown in the Gitigan for traditional medicine and healing practices that support patients and program initiatives, and striking community partnerships for new learning initiatives.
- Using a ceremonial bundle (hand drum, rattle, copper vessel) gifted by the Indigenous Cancer Program for patient care.
- Advancing work on a financial equity project to recognize the value of Indigenous knowledge.
- Integrating Indigenous knowledge to inform practice (e.g. patient relations, non-physical harm).
- Strengthening community relationships by hosting a community input session, with engagement from Indigenous partners, to inform the development of the new Toronto Western Hospital tower and patient experience at UHN.
- Partnering with the Native Women’s Resource Centre of Toronto on a quilt program for patients.
- Launching and actively recruiting for the UHN Indigenous Community Advisory Council.

With a focus on expanding teaching and learning offerings this upcoming year, the IHP is working towards:

- Continuing to expand Indigenous Health roles at UHN.
- Creating two post-doctoral fellowships in partnership with the Waakebiness Institute for Indigenous Health at the University of Toronto, UHN Research, and the Peter Munk Cardiac Centre at UHN, dedicated to data governance and sovereignty, and digital health, respectively.
- Welcoming practicum placements from the Masters of Public Health – Indigenous Health stream.
- Advancing training partnerships between Indigenous communities and UHN, including at the Michener Institute of Education.
- Developing cultural safety programs with both targeted and UHN-wide approaches.
- Beginning important work to develop an Indigenous health, wellness and gathering space at UHN.

Health Equity Data Collection: Key Developments & Collaborations

UHN is eager to support system partners in important that will continue to guide the collection of health equity data across the Toronto region, in alignment with broader work underway across the province’s health system. UHN Population Health & Social Medicine and Indigenous Health Programs are pleased to be playing a key role in this work via:

- Engaging with OH on the development of training resources and tools for the collection of health equity data.
- Leading efforts in collaboration with local community partners to support Toronto Region’s hospitals and Community Health Centres in the collection and analysis of health equity data, building the capacity of Toronto Academic Health Science Network (TAHSN) hospitals and Community Health Centres (CHCs) to advance health equity across various domains.

Non-Physical Harm Steering Committee at UHN

Safety events not only result in preventable physical harm, but also have potential to result in preventable non-physical harm. UHN’s Non-Physical Harm Steering Committee is expanding the definition of preventable harm to include non-physical harm. At UHN, Non-Physical harm is defined as: *event(s) causing damaging effects to an individual’s dignity and/or their emotional, psychological, social, or spiritual health.* Examples may include incidents of disrespect (including racism and discrimination), threats to personal

safety or privacy, or any other event causing loss of trust in UHN or therapeutic relationship(s) with their care providers at UHN.

Through 2023/24, this Steering Committee, which includes 2 Patient Partners, will focus on broadening awareness of non-physical harm by developing education and engagement opportunities for TeamUHN, learners and patients. The Steering Committee will also develop and implement a reporting and review process for responding to, and preventing, non-physical harm from safety events at UHN.

Executive Compensation

UHN's Executive Leadership Forum is held accountable for the implementation of identified change ideas and achievement of targets set out in UHN's 2023/24 QIP. This includes linking a subset of QIP indicators to performance-based compensation to drive alignment with organizational strategy and health system goals, and reinforce UHN's focus on continuous quality improvement to further enhance patient and provider experiences at UHN. Informed by [UHN's Essentials](#), the subset of QIP indicators that will be linked to performance-based compensation will be identified by UHN's People & Culture leadership, in consultation with our Board of Trustees.

Contact Information

UHN Corporate Strategy & Planning Office
strategy@uhn.ca

Sign-off

The following individuals have approved UHN's Quality Improvement Plan for 2023/24:



Mr. Brian J. Porter
Chair, Board of Trustees



Dr. Ross Baker
Chair, Quality & Safety Committee of the Board



Dr. Kevin Smith
President & CEO

UHN 2023/24 Quality Improvement Plan (QIP)

Workplan - Improvement Targets and Initiatives

University Health Network 190 Elizabeth St., R. Fraser Elliott Building, 1st Floor, Toronto, ON, M5G2C4

AIM	Measure									Change				
Quality dimension	Measure/Indicator	Type	Unit / Population	Source / Period	Organization Id	Current performance	Target	Target justification	External Collaborators	Planned improvement initiatives (Change Ideas)	Methods	Process measures	Target for process measure	Comments
M = Mandatory (all cells must be completed) P = Priority (complete ONLY the comments cell if you are not working on this indicator) A= Additional (do not select if you are not working on this indicator) C = Custom (add any other indicators you are working on)														
Efficient	% of pre-pandemic surgical activity levels	C	% of completed surgical volume/ baseline volume	Local data collection / Most recent quarter performance available (Q3 FY22/23)	947*	96%	105%			Continue to Utilize Expanded Weekend and Flex OR Capacity	Initiative focuses on the following: consistently utilizing two OR blocks per site each Saturday throughout FY23/24; balancing HHR requirement to ensure surgical volumes remain above pre-pandemic levels; exploring the feasibility and utility of new roles to mitigate risk related to HHR, as needed.	Utilization measures - evening and weekend ORs Continuous monitoring and reporting of waitlist changes to ensure progress and resource alignment	Monitoring and iteration - through Mar 31, 2024 Quarterly reporting and analysis via internal scorecard through Mar 31, 2024	
										Maximize Utilization of Recently Expanded Infrastructure	Operationalize and optimize completed infrastructure investments including: maximizing recently developed fluoroscopy suites and GTx OR at TGH and procedure suites at TWH; maximizing three flex ORs opened in Q4 FY22/23 at TGH for backlog cases.	Utilization measures - ORs Continuous monitoring and reporting of waitlist changes to ensure progress and resource alignment	Monitoring and iteration - through Mar 31, 2024 Quarterly reporting and analysis via internal scorecard through Mar 31, 2024	
	% of patients experiencing long waits on surgical backlog	C	% of surgical waitlist exceeding wait time targets	Local data collection / Most recent quarter performance available (Q3 FY22/23)	947*	67%	40%	In consideration of historical performance, UHN's annual OR schedule and opportunities for enhanced investment, OH Toronto Region Surgical Resumption/ Recovery & Optimization activity.	OH Toronto Region Surgical Resumption/ Recovery & Optimization Table	Expand central waitlist practices to more Divisions ensure timely assessment of long waiting patients and data quality of waitlist	Initiative focuses on: continued investment in Wait Time Coordinator role to complete follow-ups with all patients waiting greater than 2 years to assess readiness to treat and support data clean-up; implementation and expansion of centralized intake processes for high-volume procedures on the wait list; continued development and utilization of surgeon-level data reporting to highlight long waiting priority patients for clinic re-assessment or surgery; continued ongoing prioritization of waitlist cases with competing demands of regional and priority programs.	Central waitlist management practices implemented to follow-up with patients waiting above clinical access target times and prioritize them for reassessment Ongoing assessment of wait time variability by surgeon to inform load sharing of cases	Monitoring and iteration - through Mar 31, 2024 Quarterly reporting and analysis via internal scorecard through Mar 31, 2024	
	Surgical backlog clear rate	C	Ratio of weekly cases completed vs. added to backlog	Local data collection / Most recent quarter performance available (Q3 FY22/23)	947*	1.1	1.2			Optimizing Clinical Models of Care to Enhance Case Throughput	Initiative focuses on: maximizing day surgery opportunities; working with UHN Integrated Care on strategic planning and expansion of novel care pathways that support early discharge and care of patients at home.	LOS and readmission measures monitored for initiative impact Project plans defined and actioned	Monitoring and iteration - through Mar 31, 2024 Quarterly reporting and analysis via internal scorecard through Mar 31, 2024	

AIM	Measure									Change				
Quality dimension	Measure/Indicator	Type	Unit / Population	Source / Period	Organization Id	Current performance	Target	Target justification	External Collaborators	Planned improvement initiatives (Change Ideas)	Methods	Process measures	Target for process measure	Comments
										New Models of Out of Hospital Care	Initiative focuses on: assessing extension and expansion of current partnership with Kensington Health; and exploring possibility of leveraging remote patient monitoring pre- and post-operatively.	Partnership reviewed and optimized Additional opportunities for improvement, including scoping remote monitoring opportunities, identified and project plans defined All project deliverables delivered on time, in scope	Partnership review and optimization - June 30, 2023 Initiative monitoring and iteration - through Mar 31, 2024 Quarterly reporting and analysis via internal scorecard through Mar 31, 2024	
										Implementing Robotics models	Focus on minimally invasive technologies to enhance patient care and reduce LOS with new robotics contracts.	Installation and utilization of new robots in alignment with guidelines for use across select surgical divisions.	Installation and early operationalization - June 30, 2023 Quarterly reporting and analysis via internal scorecard through Mar 31, 2024	
Timely	Emergency department (ED) wait time for inpatient bed (90th percentile)	C	hours (90th percentile)/ Admitted patients via ED (Toronto Western (TW) and Toronto General (TG) hospital sites)	NACRS / Most recent quarter performance available (Q3 FY22/23)	947*	30.2 hrs TG ED 37.4 hrs TW ED	25.4 hrs TG ED 30.2 hrs TW ED	Updates UHN's current performance targets with recognition of operational factors impacting performance (overcapacity trends, increased isolation burden, HHR pressures)	None to report	Analysis and further iteration of components of new Capacity Management Initiative, initiated in Jan 2023.	Initiative focuses on the following: fostering greater transparency on system/program occupancy, pulling patients from EDs by 10am, reviewing protocols for escalation of care and implementing strategies for discharge delays, as well as exploring proactive management of scheduled activity, and overall network response opportunities (beyond UHN's core acute care sites).	Additional opportunities for improvement identified and project plans defined All project deliverables delivered on time, in scope	Monitoring and iteration - through Mar 31, 2024 Quarterly reporting and analysis via internal scorecard through Mar 31, 2024	
										Launch of new Acute Care Programs Discharge Planning Project.	In development; will also explore optimization of new Health Information System (Epic) functionalities.	Project deliverables defined All project deliverables delivered on time, in scope	Project launch - Apr 30, 2023 Quarterly reporting and analysis via internal scorecard through Mar 31, 2024	
Patient-centred	Percentage of respondents who responded "completely" to the following question: Did you receive enough information from hospital staff about what to do if you were worried about your condition or treatment after you left the hospital?	P	% / Survey respondents	CIHI CPES / Most recent consecutive 12-month period (FY2021/22)	947*	64.00%	70%	Stretch goal for UHN	None to report	Launch 'Your Experience' Patient Reported Experience Measures (PREMs) platform to expand patient experience-related data collection and help UHN to understand new/continued opportunities for improvement through regular reporting and discussion.	Survey platform created and launched; dashboard will be implemented in 2023-24 for standardized analysis.	On-time implementation of 'Your Experience' PREMs platform & internal reporting dashboard	Implementation complete - June 30, 2023 Quarterly reporting and analysis via internal scorecard through Mar 31, 2024	

AIM	Measure									Change				
Quality dimension	Measure/Indicator	Type	Unit / Population	Source / Period	Organization Id	Current performance	Target	Target justification	External Collaborators	Planned improvement initiatives (Change Ideas)	Methods	Process measures	Target for process measure	Comments
										After Visit Summary (AVS) tool redesigned and delivered post-discharge to all UHN inpatients. Implementation opportunities and AVS improvements identified by Patient Partners to be explored for feasibility and functionality, and their ability to meaningfully improve target measure.	After Visit Summary (AVS) tool was launched in UHN's Health Information System (Epic) in FY22/23; updates scheduled for 2023-24 to create enhanced usability.	Delivery of patient engagement to inform continued iteration for AVS tool All project deliverables delivered on time, in scope AVS uptake broadly across UHN	Engagement and improvements delivered by Dec 31, 2023 Quarterly reporting and analysis via internal scorecard through Mar 31, 2024 AVS uptake target in development via ongoing consultation across UHN	
Safe	Number of workplace violence incidents reported by hospital workers (as defined by OHSA)	P	Count / Worker	Local data collection / Apr 2021–Mar 2022 (Note: fiscal year)	947*	394	460	Return to reporting logged during launch year of incident reporting system (FY17/18)	None to report	User-friendly enhancements to incident reporting interface. Additional iteration based on user-feedback through remainder of year.	Planning, execution and closure of new project to implement user-friendly enhancements to incident reporting system.	Target launch date achieved All project deliverables delivered on time, in scope	Launch of system improvements by June 30, 2023 Quarterly reporting and analysis via internal scorecard through Mar 31, 2024	Total number of UHN staff = ~17,000
									Refreshed communications campaign to promote incident reporting interface & overall importance of reporting WPV.	Various internal communications tactics and promotional venues for information sharing (huddles, meetings, Open Forums, weekly newsletters etc.).	Scheduled timelines for delivery of comms products and activities, according to communications plan and in alignment with launch of reporting system improvements (see above)	On-time delivery and achievement of all target timelines for communication by June 30, 2023		