QUALITY, SAFETY & PERFORMANCE FRAMEWORK

APRIL 2021 – MARCH 2024

QUALITY & SYSTEM PERFORMANCE

REPORT JULY 2021

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EXECUTIVE SUMMARY

The first Quality, Safety and Performance (QSP) Framework was established at the outset of Nova Scotia Health and served as a foundational element in support of our Strategic Plan, to build a common understanding of the provincial approach to quality and help us achieve Nova Scotia Health's goals. A new QSP framework was developed in light of the renewed Nova Scotia Health Strategic Plan, and was modeled off of the Canadian Patient Safety Institute (CPSI) and Health Standards Organization (HSO) Canadian Quality and Patient Safety Framework to ensure areas of focus were consistent with evidence and leading practice. It applies to all aspects of the health and wellness system and is intended as a resource for planning, aligning and implementing quality initiatives - recognizing that safety is a leading element in quality. It is of importance to note that the term patient, as utilized in the QSP Framework denotes anyone who receives, or has requested health care or services from Nova Scotia Health and its healthcare providers.

The QSP Framework has seven areas of focus that guide actions to achieve our overall aim of focusing actions and resources that promote quality and safety while improving patient experience and outcomes:
1. Organizational Goals, Objectives & Priorities
2. Quality Improvement Methodologies, Tools & Measurement for Improvement
3. People-Centred Care
4. Safe Care
5. Accessible Care
6. Appropriate Care
7. Integrated Care

The QSP Framework targets attention to areas of focus that all roles within the organization could find alignments with for various aspects of the work they do. Whether you are in clinical; administrative or support roles; direct care or service to clients; or leadership for Nova Scotia Health, the work you do is connected to quality and safety. The Framework should therefore be able to apply to all aspects of our system and is intended as a resource for planning, aligning and implementing quality and safety in every day work.

As part of the development of the QSP Framework, an extensive engagement process was carried out to ensure the areas of focus, goals and action address unmet needs and are useful for all healthcare stakeholders. Through this comprehensive process, all feedback received was reviewed and incorporated where appropriate.

Providing leadership to guide and drive quality improvement across the healthcare system, the Framework is complimented by plans and strategies for Safety and Quality Culture; Performance and Accountability; Enterprise Risk Management; and Emergency Preparedness, as well as program and zone based operational plans to support quality, safety and performance. The Nova Scotia Health Patient Safety Plan is embedded in the QSP Framework.

Monitoring and reporting of indicators across the areas of focus prioritized in the QSP Framework is a vital activity to measure how successful we are in meeting the goals outlined. Therefore, an evaluation framework was established, involving routine reporting of key performance indicators through the use of dashboards, complimented by in depth reviews into areas of focus by key operational leaders/subject matter experts.

Nova Scotia Health commits to utilizing the QSP Framework to focus organizational attention, action and resources on promoting quality and safety while improving patient experience and outcomes. When we align our actions with the seven shared goals and work together, we will experience positive movement in the areas of quality and safety.

QUALITY, SAFETY & PERFORMANCE FRAMEWORK

INTRODUCTION

Nova Scotia Health is committed to providing excellent care and service working to improve the health status and wellbeing of Nova Scotians, and all Staff, Physicians, Leaders and Learners are integral to serving, building, connecting, and caring for communities to attain our organization's vision: *Healthy people, healthy communities – for generations*.

In order to provide high quality, safe care that Nova Scotians deserve, we need to empower those working within our organization to be the best that they can be to serve our communities. That is why we are pleased to introduce the *Quality, Safety & Performance (QSP) Framework*. The Framework aims to build a common understanding of our approach to quality, and guides action and resources that promote quality and safety while improving patient experience and outcomes.

The QSP Framework targets attention to areas of focus that all roles within the organization could find alignments with for various aspects of the work they do. Whether you are in a support or administrative role; direct care to clients; or leadership for Nova Scotia Health, the work you do is connected to quality and safety. The Framework should therefore be able to apply to all aspects of our system and is intended as a resource for planning, aligning and implementing quality and safety in every day work.

Individuals and/or teams can apply the Framework to their own work by posing questions in relation to the areas of focus such as:
- Does the work I am/we are doing align with the organizational goals and priorities?
- How could I/we improve the quality of care or service I/we provide?
- In what ways could I/we be more people-centred?
- What are the things I/we could be doing to provide safer care?
- How could access to the service I/we provide be enhanced?
- What could I/we do to contribute to appropriate care?
- Is there anything I/we could do to make our services more seamless and integrated for patients?

BACKGROUND

Nova Scotia Health's QSP Framework has been in place through the duration of the organization's first strategic plan, was grounded in the dimensions of quality, and operationalized through multi-year action plans. The organization met its initial objectives and established foundational components identified within the framework and strategy. With the launch of the new strategic plan in 2019, and completion of core activities, a new QSP framework was developed ensure areas of focus were consistent with organizational requirements, evidence and leading practice.

This updated QSP Framework was intentionally modeled off the recently released Canadian Patient Safety Institute (CPSI) and Health Standards Organization (HSO) *Canadian Quality and Patient Safety Framework for Health Services* - a national plan focused on the entire healthcare system, highlighting five goals to align Canada on patient safety and quality improvement: people-centred care, safe care, accessible care, appropriate care, and integrated care (Health Standards Organization and Canadian Patient Safety Institute, 2020).

Providing leadership to guide and drive quality improvement across the healthcare system, the Framework is complimented by plans and strategies for Safety and Quality Culture; Performance and Accountability; Enterprise Risk Management; and Emergency Preparedness, as well as program and zone based operational plans to support quality, safety and performance. The Nova Scotia Health Patient Safety Plan is embedded in

the QSP Framework. Efforts were additionally made to incorporate the existing Nova Scotia Health frameworks with the CPSI & HSO Framework and Accreditation requirements.

QUALITY, SAFETY & PERFORMANCE FRAMEWORK IMAGE

ORGANIZATION-WIDE GOALS, OBJECTIVES & PRIORITIES

THERE IS A FOCUS ON PLANNING, MONITORING, REPORTING, ACCOUNTABILITY AND INTEGRATED RISK MANAGEMENT ACTIVITIES IN SUPPORT OF NOVA SCOTIA HEALTH'S STRATEGY AND PRIORITY AREAS.

PEOPLE-CENTRED CARE

PEOPLE USING HEALTH SERVICES ARE EQUAL PARTNERS IN PLANNING, DEVELOPING AND MONITORING CARE TO MAKE SURE IT MEETS THEIR NEEDS AND TO ACHIEVE THE BEST OUTCOMES

ACCESSIBLE CARE

PEOPLE HAVE TIMELY AND EQUITABLE ACCESS TO QUALITY HEALTH SERVICES

SAFE CARE

HEALTH SERVICES ARE SAFE, AND FREE FROM PREVENTABLE HARM

APPROPRIATE CARE

CARE IS EVIDENCE-BASED AND PEOPLE-CENTRED

INTEGRATED CARE

HEALTH SERVICES ARE CONTINUOUS AND WELL-COORDINATED, PROMOTING SMOOTH TRANSITIONS

QUALITY IMPROVEMENT METHODOLOGIES, TOOLS & MEASUREMENTS FOR IMPROVEMENT

QUALITY IMPROVEMENTS ARE IMPLEMENTED, EVALUATED, SUSTAINED, AND SPREAD

*Important to note that no one area of focus is independent of the others as this is intended to represent an integrated approach to quality, safety and performance.

AREAS OF FOCUS

1. ORGANIZATION WIDE GOALS, OBJECTIVES & PRIORITIES

The QSP Framework is a key enabler of Nova Scotia Health's strategic plan – *Healthier Together*. There is intentional alignment to support Nova Scotia Health's strategy and priority areas, with attention to planning, monitoring, reporting, accountability, and integrated risk management activities and the development of tools and processes to assist in establishing and maintaining a high performing organization.

Examples of actions related to this theme include: creating alignment between corporate goals and objectives and operational plans; generating greater awareness and comfort with enterprise risk management resources; and increasing awareness and adoption of our ethics framework for decision making.

2. QUALITY IMPROVEMENT METHODOLOGIES, TOOLS & MEASUREMENT FOR IMPROVEMENT

We aim to become a high performing organization that creates a culture of quality improvement (QI). As an organization dedicated to high quality, evidence-based care, we need to support our team members to develop the capability and capacity to implement, evaluate, sustain and spread successful QI initiatives at all levels of the organization. This is enabled by the application of QI methods, user-friendly tools and measurement.

Examples of actions related to this theme include: developing and implementing a Nova Scotia Health QI strategy - initiating in priority areas such as Flow and Hospital Standardized Mortality Ratio (HSMR) and building capacity by starting with the basics; providing user friendly QI tools/resources to support the implementation and evaluation of such work; aligning Rapid Research Review Team and Implementation Science Team to priority QI initiatives; and determining ways to support teams in identifying opportunities to improve quality and safety in their local areas.

3. PEOPLE-CENTRED CARE

We are designing a health system where people using our services are equal partners in planning and where people-centred care is monitored to make sure it meets needs and is achieving the best outcomes. Health services will be provided in a holistic, respectful and culturally safe manner, with a focus on equity, diversity and inclusion and ensuring patients and providers have positive health services experiences.

Actions related to this theme include: developing and implementing a Nova Scotia Health's People Centred Care (PCC) strategy; ongoing establishment of Patient and Family Advisors (PFAs) as active members of Nova Scotia Health QIS Teams and Councils (See Appendix B for current Nova Scotia Health Quality Improvement & Safety Structure) and Planning/ Advisory groups; engaging priority population-specific consultant roles to help guide service design/redesign (e.g., Re-development projects); enhancing education to promote understanding and advance a culture of acceptance of family caregivers as essential supports to the delivery of care; improving processes for timely Patient Experience Survey feedback for improvement; and assessing the effectiveness of Nova Scotia Health PCC strategies.

4. SAFE CARE

Nova Scotia Health will establish a system where its health services are free from preventable harm. We are creating an organizational culture of safety that is evident across the continuum of health services and the communities we serve; that actively monitors the safety and effectiveness of the care it provides; and that addresses safe care as a public health concern.

Examples of actions related to this theme include: creating user friendly mechanisms to support sharing patient safety information, enhancing data and reports (e.g., Patient Safety Dashboards, Toolkit, Quality Boards, etc.); developing and providing Critical Incident Analysis Course; providing training and prevention programs that

foster safe working environments; implementing standard order sets for priority areas; sharing and learning from quality review recommendations; and completing key priority activities in alignment with Accreditation program requirements.

5. ACCESSIBLE CARE

Everyone rightfully deserves to have timely and equitable access to quality health services. Nova Scotia Health will focus on ensuring all people receive safe, equitable, and timely care, with targets being set for access to services and performance measured against those. Attention will be directed at providing alternative options for care delivery; and ensuring Human Resources are effectively matched to population needs.

Examples of actions related to this theme include: improving integrated health system access and flow; implementing a rural health strategy and establishing rural health service director positions; refining community level reporting for health status and health service availability; enhancing availability to primary medical care for those who do not have regular primary care provider through virtual care; improvement initiatives to enhance access to community mental health and addictions clinics; and developing clinical service plans from community diversities, and geographical need.

6. APPROPRIATE CARE

At the core of our services, Nova Scotia Health strives to ensure the care it provides is evidence-based and people-centred. Key objectives include health services being planned and delivered based on the needs of the population, such that appropriate care is actively promoted and monitored, and unwarranted variations are minimized. Supporting organizational priorities around Research & Innovation, emerging treatments and technologies will be systematically evaluated and monitored for appropriate use in health services.

Examples of actions related to this theme include: leveraging the quality review process to assess unwarranted care variations and identify areas for improvement; supporting organizational priority initiatives that reduce unnecessary variation across the system; utilizing the network structure to identify and implement appropriateness of care priority initiatives; optimizing data and information systems to support clinical standardization as part of OPOR pre-readiness and evaluation of appropriateness of care initiatives; and engaging with Choosing Wisely Canada program and initiatives to enhance reduction in unnecessary care.

7. INTEGRATED CARE

With a goal that all patients experience smooth transitions across health services, Nova Scotia Health will work towards providing infrastructure and accountability for care transitions are in place, and that patient information is available to patients and providers to support integrated/well-coordinated care.

Examples of actions related to this theme include: ensuring programs of care, provincial networks and zone operations work together to improve coordination of care; involving patients in care and discharge planning; focusing on recommendations from Quality Reviews related to team communications, and transitions; working towards access to integrated health records; and creating more/strengthening existing collaborative family practice teams in Nova Scotia.

ALIGNMENTS

NOVA SCOTIA HEALTH STRATEGIC PLAN – STRATEGIC DIRECTIONS

The QSP Framework is a key component of Nova Scotia Health's strategic plan's three strategic directions: Our Services, Our People and Our Community. The achievement of our mission, vision, and strategic directions is facilitated through implementation of the seven areas of focus identified in the QSP Framework:
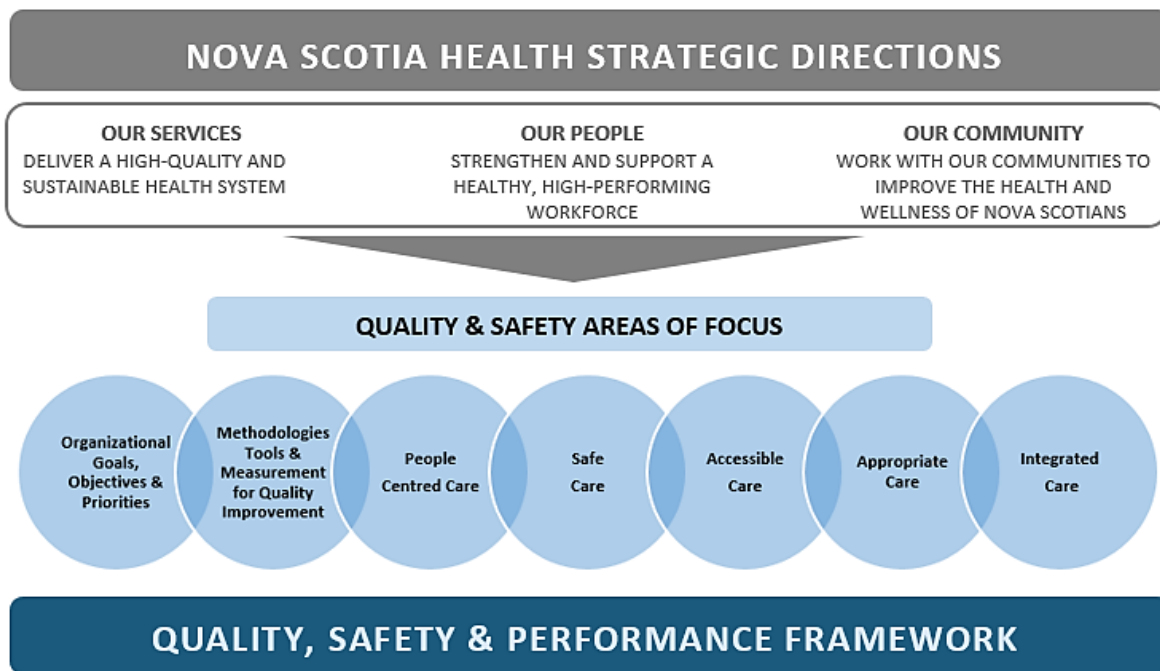
NOVA SCOTIA HEALTH VALUES

Nova Scotia Health's values define what we stand for as an organization, and reflect our perspective on how we interact and care for communities, patients and their families, and with each other. The values are embedded in the organization's Strategic Plan and are integral to the actions and initiatives that will be undertaken as part of the QSP Framework.

Respect	is caring for each other and those we serve
Integrity	is being honest and ethical
Courage	is doing what is right even when it may be difficult
Innovation	is being open to change, learning new things and exploring new possibilities
Accountability	is answering to the people we serve and each other for our decisions and actions

(Nova Scotia Health, 2019-22)

ALIGNMENT WITH DEPARTMENT OF HEALTH & WELLNESS QUALITY & PATIENT SAFETY FRAMEWORK

The Nova Scotia Health Quality, Safety and Performance Framework aligns with the Nova Scotia Department of Health and Wellness (DHW) Quality and Patient Safety Framework, which is intended to promote a provincial standardization in our approaches and practices to quality and safety across the healthcare system. Consistent goals between the Nova Scotia Health QSP Framework and DHW Framework include safe care, appropriateness, people centred, accessibility, and integration. DHW focuses on value, diversity, population health, and culture of learning and healthy workplace hold additional common ground with Nova Scotia Health as these elements are embedded in various organizational priorities and objectives (Nova Scotia Department of Health and Wellness, 2020).

ALIGNMENT WITH ACCREDITATION CANADA PROGRAM

Nova Scotia Health is dedicated to continually improving our programs and services. It is one of the reasons why we participate in a program with Accreditation Canada, as it provides opportunity for us to highlight what we're doing well and learn where we can improve in alignment with evidence-based standards.

As Nova Scotia Health recognizes that the accreditation process supports excellence in care and service, the QSP Framework is enabled by Accreditation Canada's dimensions of quality and safety. These are applied as principles to support planning, decision making, quality and safety. The quality dimensions aligned with those outlined and supported by Accreditation Canada include:

Safety	Keeping clients/families/teams safe
Population Focus	Working with the community to anticipate and meet their needs
Accessibility	Providing timely and equitable services
Continuity of Services	Coordinating care across the continuum
People-centred Services	Partnering with clients/family in their care
Appropriateness	Doing the right thing to achieve the best results
Efficiency	Making the best use of resources
Work-life	Taking care of the team

(Accreditation Canada, 2019)

STAKEHOLDER ENGAGEMENT

The main purpose of the framework engagement process was to seek patient and internal input into the elements of a quality improvement, safety and performance program that would inform the framework. This type of engagement approach is situated at the consult level on the IAP2 spectrum (International Association for Public Participation, 2018). At this level, the Quality Improvement & Safety and Planning & Performance Portfolios worked with audiences to obtain feedback (both verbal and written opportunities), and then provided information back on how input received influenced revisions made to improve the QSP Framework.

Extensive consultation across all zones was completed over the period of one year where the draft QSP Framework was presented to a variety of audiences including:

- Zone Leadership Forums (Includes Managers)
- Zone QIS Councils
- Zone Medical Advisory Committees (ZMAC)
- Front Line Focus Group
- Nova Scotia Health QIS Council
- Senior leadership Team
- Executive Leadership Team
- Health Authority Medical Advisory Committee (HAMAC)
- Patient Family & Public Advisory Council (PFPAC)
- Quality Committee of the Board of Directors

Key questions asked for feedback were:
1. Are there any gaps in this framework that you think should be included?
2. Do the areas of focus in the framework make sense for your program/plan/service plans?
3. How could this framework help guide your work at a program/service level?

Overall, positive feedback was received for the draft Framework with support for the main components/areas of focus. Throughout the engagement process however, additional areas of focus to include came to light, which were then flushed out and embedded in the final Nova Scotia Health QSP Framework. These were: Organization-Wide Goals, Objectives & Priorities; and Quality Improvement Methodologies, Tools & Measurement for Improvement. Further themes surrounded positive reactions to the priority for reducing variation; a clear desire for simplified language; request for an images depicting the Framework and where the organization is doing well; inclusion of priority around safe spaces; and audiences wanting to be able to see themselves in the Framework regardless of service/portfolio/role. In one session, the Patient, Family and Public Advisory Council (PFPAC) members ordered the areas of focus by perceived level of importance, which resulted in Safe Care being ranked as the highest.

Key question feedback themes included:
1. *Gaps:* tools and resources to assist in operationalizing at the team level; priority around just culture; broaden the area of focus speaking to diversity; and reinforce the link between safe care and staff safety.

2. *Areas of Focus:* high level and broad so programs/services can make a connection; aligns with our quality and safety work; and helpful to have common framework for all roles in Nova Scotia Health

3. *Framework Guides:* provides high level direction of organizational priorities and how they need to align with day to day activities; work can be linked to QI; and helps us to prioritize and move agendas forward.

An additional point to highlight is that during the engagement process, constructive feedback was offered for the use of the term *social services* in an earlier draft, which was subsequently adjusted. This feedback was provided to the authors (HSO/CPSI) of the national Quality Framework and the term was also removed from the national framework.

MEASURING SUCCESS & TAKING ACTION

Successful attainment of the goals and objectives within the QSP Framework will result in improvement across numerous organizational indicators and metrics. Monitoring and reporting of key performance indicators (KPIs) across priority areas within the QSP Framework is therefore a vital activity. Nova Scotia Health employs a comprehensive performance measurement approach (see Appendix C: Planning & Performance Model) that involves: 1) planning for high performance; 2) measuring, monitoring and reporting on performance; and 3) using this information to take action to improve performance.

In developing the evaluation plan for the QSP Framework, consideration was made to ensure consistency with established quality structures within Nova Scotia Health. In alignment with this approach, the Quality and Safety dashboard (data visualization tool) that is reviewed by the Nova Scotia Health Quality Improvement & Safety Council and Quality Committee of the Board of Directors will additionally serve as the dashboard for this Framework. This is reviewed regularly (quarterly and annual reports) and displays KPIs overall and by zone. Many of the indicators can apply to multiple areas of focus - this is expected and further highlights how areas of focus are interconnected.

Quality and Safety Dashboard indicator topics include:

- Unplanned Emergency Preparedness Events
- Privacy breaches
- Patient Experience
- Patient Family Feedback
- Hospital Standardized Mortality Ratio (HSMR)
- Serious Reportable Events
- Patient Safety Incidents

- Infection Prevention and Control (Hand Hygiene Compliance and Healthcare associated infections)
- Wait Times within Benchmark
- Measures of variation in practice for priority areas
- Unplanned Readmission Rate
- Patient Safety Culture survey
- Worklife Pulse survey

Additional indictors may be added as required

Proactive monitoring of indicator results serves as a trigger for the organization to recognize areas where additional efforts are indicated, thereby driving opportunities for improvement. When performance is not as expected, an interdisciplinary team is wrapped around the area requiring attention, ensuring that a successful review and QI initiative is carried out. The team consists of members from the impacted clinical area, with support from: Performance and Analytics; Project Service and Performance Improvement; Research, Innovation and Discovery; Interprofessional Practice and Learning; and Quality Improvement and Safety portfolios. These portfolios have defined roles with respect to QI to ensure that each stage of the process is aptly supported and that successes can be sustained and spread where appropriate.

The interdisciplinary team completes a comprehensive investigation of data and underlying organizational context to inform what is contributing to the performance result and enable issue identification. This information is then used to develop action plans to improve the quality of the process/practice examined. Plans are monitored for completion, with performance reviewed post implementation to re-evaluate whether improvements occurred as a result of actions taken. This QI approach (Plan, Do, Study, Act Cycle) complements the dashboard by highlighting the link between quality improvement initiatives and outcomes.

SUMMARY AND NEXT STEPS

Nova Scotia Health commits to utilizing the QSP Framework to focus organizational attention, action and resources on promoting quality and safety while improving patient experience and outcomes. When we align our actions with the seven shared goals and work together, we will experience positive movement in the areas of quality and safety.

It is recognized there is continued work required to ensure the QSP Framework is successfully embedded in the organization's planning and operations. Key next steps include:
- Developing QSP Framework communication plan
- Communicating/sharing the QSP Framework across Nova Scotia Health
- Finalizing and assigning accountabilities for associated actions and monitoring components
- Completing implementation plans for identified actions
- Operationalizing the QSP Framework
- Ongoing evaluation of the QSP Framework

ASSOCIATED / SUPPORTING DOCUMENTS, PLANS & FRAMEWORKS

- Canadian Quality and Patient Safety Framework for Health Services

- Nova Scotia Health Strategic Plan - Healthier Together

- Nova Scotia Health Quality and Patient Safety Framework

- Nova Scotia Health Patient Safety and Quality Culture Framework

- Nova Scotia Health Analytics Roadmap – found on System Performance Reports

- Nova Scotia Health Enterprise Risk Management Framework

- Nova Scotia Health Emergency Preparedness Plans – found on Emergency Preparedness intranet site

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APPENDIX A: QUALITY, SAFETY & PERFORMANCE FRAMEWORK GOALS, OBJECTIVES & OUTCOMES

As of July 2021

1: ORGANIZATION-WIDE GOALS, OBJECTIVES & PRIORITIES

Goal	Objective	Outcome
1.1. **Care and services are delivered in accordance with the organization's strategic plan.**	1.1.1. A planning, monitoring, reporting, accountability and risk management process is in place and followed.	1.1.1.1. We plan our service delivery, measure what is important, are accountable for our results
		1.1.1.2. We plan improvements or implement risk mitigations based on performance monitoring
	1.1.2. Annual priorities, goals and measures are clearly defined and reported in the organization's Quality and Sustainability Plan	1.1.2.1 Priorities of the organization are easily understood and guide resource allocation
	1.1.3. Operating plans are developed and are reflective of the organization's strategic plan and quality and sustainability plan	1.1.3.1 There is a clear line of sight from the strategic plan to staff level deliverables
1.2 **There is a process to manage and mitigate risk in the organization**	1.2.1. A structured process is used to identify and analyze actual and potential risks or challenges.	1.2.1.1 Risk-based decision-making is demonstrated at all levels of leadership.
	1.4.2 The organization's leaders implement an integrated risk management approach to mitigate and manage risks	1.2.2.1 Consistent approaches to understanding and managing risk are demonstrated throughout the organization, allowing risks to be prioritized and mitigated appropriately
	1.2.3 The organization's leaders develop risk management plans	
1.3 **An ethics framework to support ethical practice is developed or adopted and implemented with input from patients/clients and families and those within the health care system.**	1.3.1 Patients/clients and families have access to appropriate ethics supports.	1.3.1.1 Ethical principles and values are utilized as part of decision-making
		1.3.1.2 Staff and physicians feel supported through challenging decision-making situations
	1.3.2 Staff and physicians have access to appropriate ethics supports	1.3.2.1 Ethical principles and values are utilized as part of decision-making
		1.3.2.2 Staff and physicians feel supported through challenging decision-making situations
	1.3.3 An ethics lens is applied to decision-making	1.3.3.1 Ethical principles and values are utilized as part of decision-making
		1.3.3.2 Decisions are defensible from an ethical perspective
1.4 **The organization is prepared for disasters and emergencies**	1.4.1 Plans for preventing and mitigating potential disasters and emergencies are developed and implemented	1.4.1.1 Responses protect life and/or property while minimizing disruptions to services and facilitate efficient return to continuity of operations
	1.4.2	1.4.2.1

Goal	Objective	Outcome
	An all-hazards disaster and emergency response plan is developed and implemented	Capabilities-based preparedness to prevent, protect against, respond to, and recover from major disasters and other emergencies
	1.4.3 Plans are regularly tested	1.4.3.1 Strengths and gaps are identified and included in lessons learned processes for purpose of continued improvement and strengthening of plans/ processes
		1.4.3.2 Essential services are delivered uninterrupted when plans are activated

2: QUALITY IMPROVEMENT METHODOLOGIES, TOOLS & MEASUREMENT FOR IMPROVEMENT

Goal	Objectives	Outcomes
2.1 **Quality improvements are implemented, evaluated, sustained and spread**	2.1.1 Conditions are created at each level of the organization to impel/ empower front line quality improvement implementation	2.1.1.1 Quality improvement capacity and capability is built at all levels of the organization
		2.1.1.2 Individuals and teams have access to the appropriate resources and supports to action quality improvement
		2.1.1.3 Data is accessible and used to mobilize quality improvement
		2.1.1.4 Endorsed QI tools bring scientific method to NS Health's approach to quality improvement
		2.1.1.5 Active internal and external partnerships and collaboration to support quality improvement
	2.1.2 System-level QI priorities align with & support achievement of Nova Scotia Health's strategic plan	2.1.2.1 System-level quality improvements are identified, resourced and implemented in alignment with organizational priorities and strategic/ operational planning cycles

3: PEOPLE-CENTRED CARE

Goal	Objectives	Outcomes
3.1 **People using health services are equal partners in planning, developing and monitoring care to make sure it meets their needs and to achieve the best outcomes.**	3.1.1 Health services are provided with humility in a holistic, dignified, and respectful manner.	3.1.1.1 Diverse peoples, including First Nations, Inuit, Metis, Black, LGBTQ2S+, immigrant, and people in rural and remote communities receive care that is culturally safe.
	3.1.2 All aspects of care are co-designed with patients and providers	3.1.2.1 Patients make informed contributions to their care and treatment.
		3.1.2.2 Formal and informal patient partnerships are established and consistently supported at all levels
	3.1.3 Patients and providers have positive health service experiences	3.1.3.1 Patient-reported experience measures (PREMs) and patient-reported outcome measures (PROMs) are collected and reported and demonstrate improvements in experience and outcomes
		3.1.3.2 Patients, regardless of background and circumstance, are engaged and report positive health service experiences.
		3.1.3.3 Providers are engaged, report and learn from health service experiences.

4: SAFE CARE

Goal	Objectives	Outcomes
4.1 **Health services are safe, and free from preventable harm.**	4.1.1 Safety culture is evident across the continuum of health services.	4.1.1.1 Patients, providers and leaders are encouraged and supported to report and act on patient safety concerns and incidents.
		4.1.1.2 Patient harm events are disclosed to the patient and/or family as soon as known & documented according to organizational policies.
		4.1.1.3 Patient safety events are analyzed and acted upon by interdisciplinary teams which include patients.
		4.1.1.4 Patients who are harmed have access to supports and resources.
		4.1.1.5 Providers work in psychologically and physically safe environments with access to support programs.
	4.1.2 Safe and effective care is provided and monitored.	4.1.2.1 Evidence-based practices are implemented.
		4.1.2.2 Provider practices are reviewed and outcome trends are reported to proactively drive safe practices.
	4.1.3 Safe care is addressed as a public health concern.	4.1.3.1 Health services organizations actively participate in an accreditation process.
		4.1.3.2 Rates of patient harm and other indicators that reflect organizational safety are reported publicly.

5: ACCESSIBLE CARE

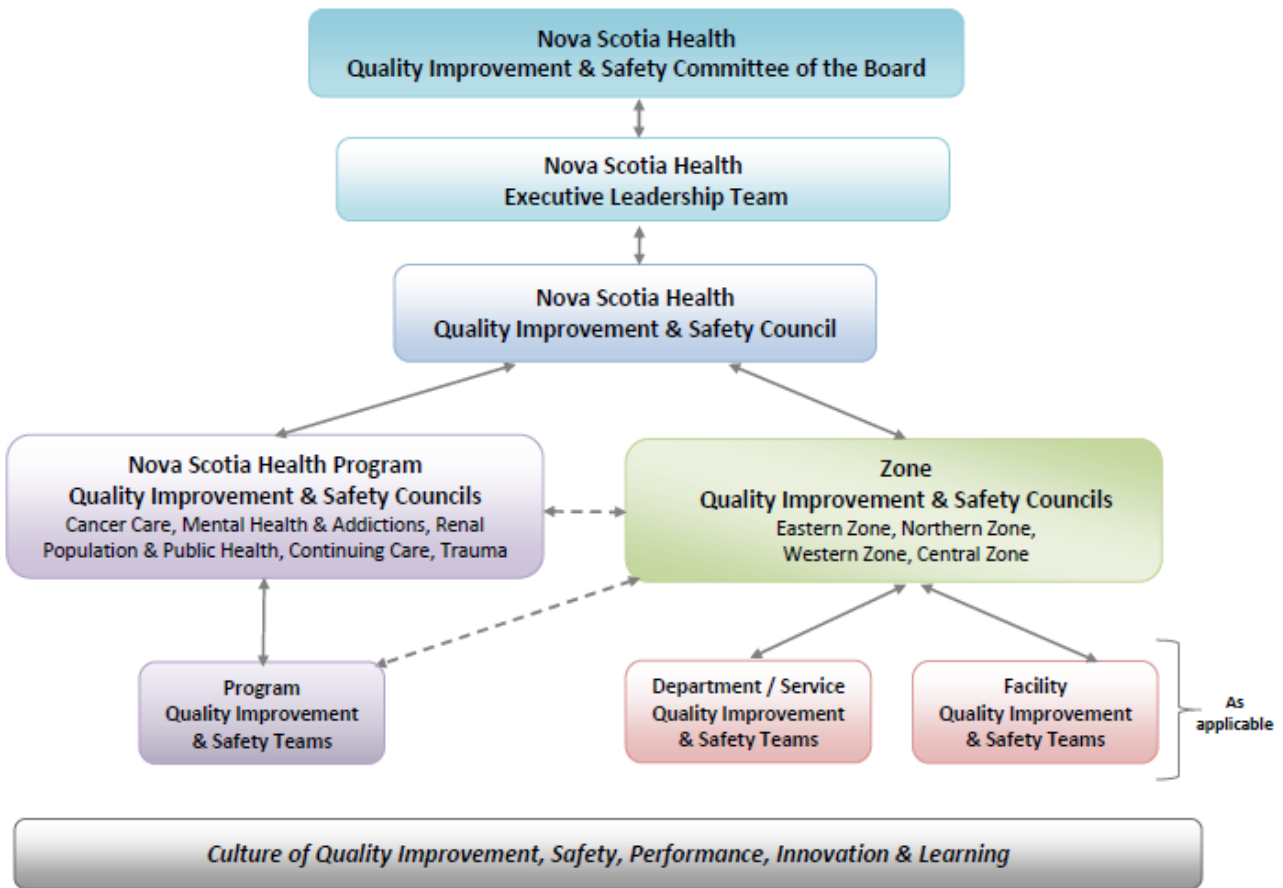| Goal	Objectives	Outcome
5.1 **People have timely and equitable access to quality health services.**	5.1.1 Care, diagnostics, and services are accessible for all people in an equitable and timely manner.	5.1.1.1 Diverse peoples, including First Nations, Inuit, Metis, Black, LGBTQ2S+, immigrant, and people in rural and remote communities, receive safe, equitable, and timely care.
		5.1.1.2 Targets for access to services are measured and publicly reported.
		5.1.1.3 Performance against access targets is monitored and the information used to identify areas for improvement.
		5.1.1.4 Alternative options for care delivery are available, including virtual and in-person visits with a provider.
	5.2.1 Human resources are effectively matched to population needs.	5.2.1.1 A needs-based human resource allocation strategy is in place, including an appropriate skill mix for the workforce.
		5.2.1.2 Health service offerings are mapped to population needs
		5.2.1.3 The scope of practice of healthcare providers (both regulated and unregulated, knowledge keepers and Elders) is recognized and optimized based on evidence
		5.2.1.4 New health programs and/or modifications to existing health programs are introduced based on the needs of the population served

6: APPROPRIATE CARE

Goal	Objectives	Outcome
6.1 **Care is evidence-based and people-centred.**	6.1.1 Health services are planned and delivered based on the needs of the population.	6.1.1.1 There is evidence that health promotion and disease prevention are addressed.
	6.1.2 Appropriate care is actively promoted and monitored, and unwarranted variations are minimized.	6.1.2.1 Evidence-based care is demonstrated throughout the patient journey, reflecting patient preferences.
		6.1.2.2 Unwarranted care variations are minimized.
	6.1.3 Emerging treatments and technologies are systematically evaluated and implemented in health services.	6.1.3.1 Treatments, technologies, medical devices, and equipment are evaluated and monitored for appropriate use.
		6.1.3.2 Health teams are prepared for effective use of new treatments and technologies

7: INTEGRATED CARE

Goal	Objectives	Outcome
7.1 **Health services are continuous and well-coordinated, promoting smooth transitions.**	7.1.1 Patients experience smooth transitions across health services.	7.1.1.1 The infrastructure and accountability for care transitions are in place.
		7.1.1.2 Providers coordinate care across health services.
	7.1.2 Patient information is available to patients and providers across health services.	7.1.2.1 Providers have appropriate access to integrated electronic health records.
		7.1.2.2 Patients have easy and timely access to their health information.

APPENDIX B: NOVA SCOTIA HEALTH QUALITY IMPROVEMENT AND SAFETY STRUCTURE

Nova Scotia Health
Quality Improvement & Safety Committee of the Board

Nova Scotia Health
Executive Leadership Team

Nova Scotia Health
Quality Improvement & Safety Council

Nova Scotia Health Program
Quality Improvement & Safety Councils
Cancer Care, Mental Health & Addictions, Renal
Population & Public Health, Continuing Care, Trauma

Zone
Quality Improvement & Safety Councils
Eastern Zone, Northern Zone,
Western Zone, Central Zone

Program
Quality Improvement
& Safety Teams

Department / Service
Quality Improvement
& Safety Teams

Facility
Quality Improvement
& Safety Teams

As applicable

Culture of Quality Improvement, Safety, Performance, Innovation & Learning

APPENDIX C: PLANNING & PERFORMANCE MODEL