

QI For You and I

April 2024 | Issue #14



QUARTERLY REPORT OF
QI ETHICS SCREENING TOOL
USE & REGISTERED QUALITY
IMPROVEMENT PROJECTS



About QI Ethics

OUR MISSION

We provide Island Health employees, clinicians, researchers, and consultants with an ethical review pathway when a research ethics review may not be required, but there are ethical considerations, for a proposed project, program or quality improvement initiative.

OFFERINGS

- [REDCap QI Screening Tool and Registry](#) to determine if a project is quality improvement or research.
- Formal exemptions from research ethics board review as per the [Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans](#) (TCPS2 2022).
- Consultations and support navigating ethical issues that can arise in the design or operationalization of a QI/QA project or program.

When you visit the [QI Ethics Decision-Making Tool](#), you are asked to complete a series of questions about your project. These questions help to generate a risk score. Projects that are considered moderate to high-risk will be offered a consultation with the QI Ethics team to explore mitigation strategies, tools, templates, links, and more information where needed. Connecting with the QI Ethics team early in your project work helps identify ethical quandaries and may also resolve issues related to planned dissemination and publication for QI work.

If you have questions, feel free to contact us at QIEthics@islandhealth.ca.





North Quadra UPC, 2022

QI ETHICS TEAM

QI Ethics currently resides within the Quality, Safety, Risk, Experience, and Research Portfolio within Island Health. We continue to work with areas of expertise including privacy, and data access as needed depending on the projects.



E. Sarah Bennett, Manager, Research Ethics & Compliance



Jaclyn Morrison, Manager, Patient Safety



Victoria Philibert, Health Research Ethics Board Coordinator



Catherine Marrie, Patient Safety Consultant



Kaitlin Blackwood, Patient Safety Consultant

As of March 2024

QI ETHICS ACTIVITIES

69

CONSULTATIONS OFFERED IN 2023

34

ISLAND HEALTH DEPARTMENTS SERVED

52

QI PROJECTS REGISTERED IN FISCAL 2023

191

TOTAL ETHICS CONSULTS SINCE 2017

266

TOTAL PROJECTS SUBMITTED TO THE QI
REGISTRY SINCE 2017

KEY CHALLENGES AND BARRIERS

- **Time:** Lack of formal resources limit capacity.
- **Outreach:** Limited organization-wide knowledge of the tool and the ethics resources currently available.
- **Representation/Capacity:** Promoting QI work within nursing and allied health professions.

2023 MILESTONES

- The Quality, Safety, Risk, Experience, and Research merged into one portfolio in early 2024. Through partnership, we continue to increase support and capacity for research and quality improvement in Island Health.

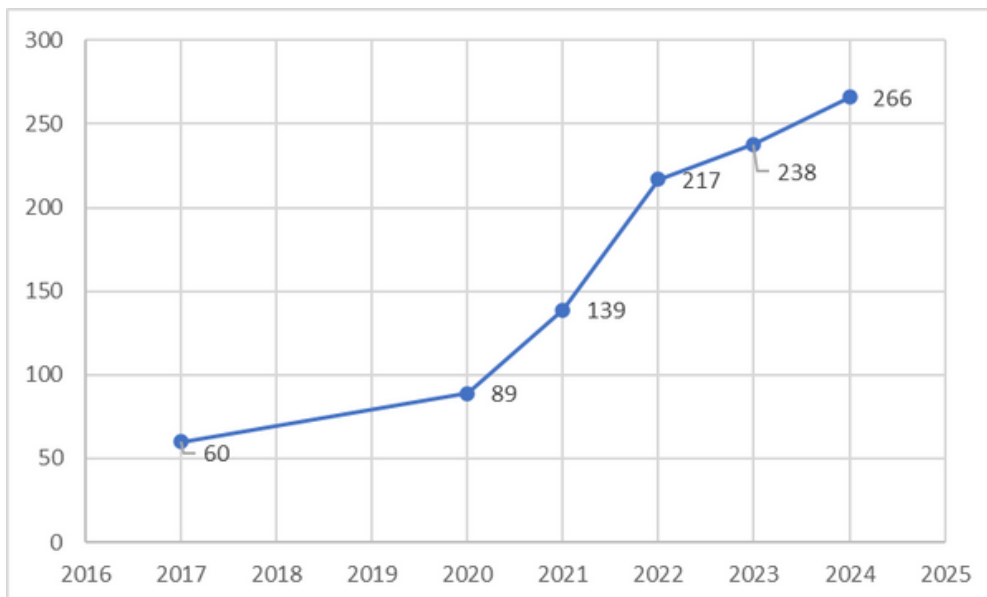


Royal Jubilee Hospital, 2007

QI ETHICS HISTORY

- **2014:** QI Registry established to capture QI projects
- **2017:** QI Ethics formalized a review process for QI projects using ARECCI as a decision-making tool to highlight potential ethical issues
- **2020:** Updated policy, interpretations, and feedback led to revisions in the screening tool
- **Ongoing:** *QI For You and I* report published four times per year
- The majority of QI work is taking place in the South Island; however, we continue to see increased initiatives in the Centre and North Island areas

CUMULATIVE NUMBER OF PROJECTS IN THE QI REGISTRY



QI Ethics Process



QI LEADS SUBMIT PROJECT INFORMATION TO THE QI SCREENING TOOL AND REGISTRY IN REDCAP

ALGORITHM ASSIGNS A RISK SCORE TO THE PROJECT BASED ON THEIR ANSWERS

IF SCORE IS HIGH, ETHICS TEAM ARRANGES CONSULTATION

IF SCORE IS LOW OR ZERO, TEAM SENDS EMAIL WITH MORE INFORMATION

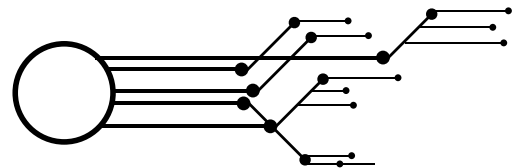
CONSULT SUMMARY WITH SUGGESTIONS, RESOURCES, AND SUPPORT SENT FOR DESIGNING AND IMPLEMENTING PROJECT. WHERE APPLICABLE, EXEMPTION FROM FORMAL RESEARCH ETHICS BOARD REVIEW ISSUED AS PER TCPS2 ARTICLE 2.5

QI PROJECT IS LOGGED IN THE QI REGISTRY AND IS RELEASED QUARTERLY AND ANNUALLY IF QI LEADS PERMIT





CREATING A PROVINCIAL ETHICS SCREENING AND RISK ASSESSMENT TOOL



Work continues to finalize a draft ethics screening algorithm and risk assessment tool. Since June 2022, a small dedicated multi-institutional team has developed, programmed, and tested this tool. The tool will have two arms which will sort submitted projects into whether they will be active in academic or health organization settings. From there, projects will receive a document outlining potential risks and whether they need further review. The ongoing aim is to offer efficient ethical guidance and support for the many types of projects including QI which drive quality and evidence across organizations.

Timeline of Progress

- Drafted tool completed – January 2024
- Programmed into survey tool – March 2024
- Academic and health or biomedical tools tested – Current

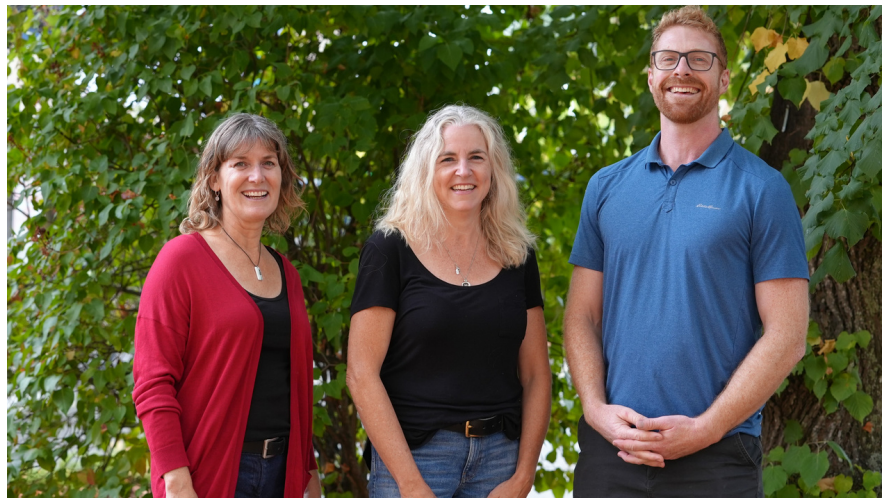
Currently, this project is testing the algorithms for the two arms and aims to be active in the summer 2024.

PROJECT HIGHLIGHT: COGNITIVE STIMULATION THERAPY

Health Quality BC, 2024 Quality Award Winner

Aim: Improving care for patients with mild-moderate dementia and their informal caregivers in the Comox Valley. The Cognitive Stimulation Therapy (CST) initiative offers non-pharmacological interventions such as reminiscence therapy, multi-sensory simulation and implicit learning using themes such as food, maps, sounds and childhood. Robust research shows that expanded clinical treatment options are required and CST can improved cognitive function, mental health and quality of life for people with mild-moderate dementia.

Results: The results were overwhelmingly positive. Data collected before and after participation showed that over the two months in the program, cognitive scores improved by 2% to 4% and quality of life by 8.5% on average. Participants noted that this was the only support of its kind available to them, and 100% recommended it for others with early dementia. The team has been awarded a \$50,000 Spark Innovate Grant from the Centre of Aging + Brain Health Innovation and have expanded the program to offer more sessions in other communities and train new facilitators of the program.



L-R: **Laurel Steed**, **Kyle Hillman**, and **Alison Ritchie**. Occupational Therapists with the Comox Valley Geriatric Specialty Services Team



CRITICAL AIR PROJECT: MINIMIZING INHALER RELATED CARBON FOOTPRINT ON TRANSFER

Q: What inspired your team to focus on this project?

Dr. Valeria Stoyanova responds:

Climate change is the single greatest threat to human health in the 21st century. We initially started thinking about this work in the fall of 2021, after a record breaking summer for admissions at Island Health between the historic heat dome and one of the worst forest fire seasons on record. As frontline health care providers, Dr. Celia Culley and I were both intimately familiar with the devastating effects of climate change on human health.

However, we soon learned that nearly 5% of Canadian greenhouse gas emissions are related exclusively to healthcare, which is on par with the aviation industry! A quarter of these emissions stem from inhalers, with each metered-dose inhaler containing the carbon footprint equivalent of a car driving up to 170km in a standard gasoline powered vehicle.

Island Health dispenses enough inhalers each month to drive around the circumference of the earth 4.5 times; yet, up to 97% of doses per inhaler are wasted without even making it to the patient.

We saw a huge opportunity for improvement in a way that contributes positively to patient care, lowers healthcare costs and decreases our environmental impact in one fell swoop.



CONTINUED: CRITICAL AIR PROJECT - DR. VALERIA STOYNOVA

Q: How did the QI Ethics team support your project?

As newcomers to the field of QI, we were enthusiastic about reading the theory, but didn't have any sense of how to put our ideas into practice in a structured way. Our initial funding was contingent on the project being framed as quality improvement rather than research, which we found confusing.

After reaching out to the Ethics team with some of our anxieties, we were reassured that it was the intent of the work that mattered most to the framing of the project. Reassured, we submitted the online application. A subsequent meeting with a QI ethics consultant, who was as passionate about this work as we were, gave us the opportunity to further ask questions in a friendly and non-judgmental space. No question was too big or too small.

Q: How do you see this work inspiring other quality initiatives?

The possibilities are limitless! Environmental sustainability in healthcare isn't just an outcome measure of improvement. It's rapidly becoming a prerequisite to high quality care. I'm fortunate to be surrounded by some of the most creative, brilliant and enthusiastic colleagues in PQI cohort 8. Their projects run the gamut, from decreasing inappropriate imaging to improving access to perinatal care and cancer screening for unattached patients. It's hard to think of a project that can't be seen through a planetary health lens; every unnecessary scan prevented and every cancer caught at an early stage will meaningfully decrease our healthcare-related carbon footprint while providing better care.



North Quadra UPC, 2022

PHYSICIAN QUALITY IMPROVEMENT (PQI)

The PQI team in Island Health supports community or facility-based medical staff in the Island Health region (including Family Physicians, Specialists, Midwives and Nurse Practitioners) who want to enhance their QI capacity, build connections with colleagues, create a continuous improvement culture, and transform our local health system. There are four main focus areas for 2024/2025:

1. Develop physician capacity and willingness to contribute to outcome-driven group QI projects (through QI introductory learning and outreach events)
2. Develop physician QI leaders that drive local improvement (through a 12-month Cohort Training Program with QI learning action projects)
3. Create engaged and empowered alum community (through supporting QI-trained physicians to engage in health system improvement post-graduation)
4. Accelerate health system improvements at local and regional levels (through spread of successful QI projects)

All QI projects supported by the PQI team are submitted to the QI Ethics Screening Tool.



PROJECT HIGHLIGHT: INCREASED COLORECTAL CANCER SCREENING UPTAKE IN THE GREATER VICTORIA AREA

Background: Attachment rates to a primary care provider in the Greater Victoria area are some of the lowest in Canada. Lack of attachment reduces access to preventative care services, including colorectal cancer screening.

Aim: By offering targeted colorectal cancer screening to unattached patients in the Island Health region, we will improve the count of FIT tests completed under the project co-leads by 3-fold over a 6-month period (Dec 2023-May2024).

Methods: Increase FIT test screening through outreach, alternative booking methods, targeted kit distribution, streamlined appointment bookings and collection, and patient reminders.

Results: Early results are encouraging. The project is ongoing with fulsome results expected in the Fall 2024.

DR. STUART BAX AND DR. CAL SHAPIRO

Dr. Bax has worked as a GP and walk-in physician in the Greater Victoria for over five years. He has a passion for preventative medicine and enhancing equity in the healthcare system.

Dr. Shapiro has been in practice for nine years, with five of those offering full-spectrum rural family medicine in predominately First-Nations rural and remote communities. He currently practices in a variety of outpatient general practice settings with unattached patients and offers some services to LTC residents.

North Island Region

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
1. Bingocize as a fall reduction intervention in LTC	To reduce the number of falls in the LTC facility chosen by 25% within three months of implementation of the new exercise/mobility program.	Cindy Perry	Eagle Ridge Manor, Port Hardy	falls; reduction; Bingocize; mobility; balance
2. BPMH Expansion to Surgical Day Care (SDC)	To develop processes for BPMH pharmacy technician rollout to the SDC unit of the North Island Hospital to improve BPMH completion rate. Lessons learned will be applied to other units of hospital such as ED.	Cameron Egli	North Island Hospital - Campbell River pharmacy department and Surgical Day Care.	Best Possible Medication History (BPMH); Medication Reconciliation; Pharmacy Technician; Surgery; Quality Improvement
3. Pharmacy Residency Project - Duplicate Dispensing of Inhalers in Hospital	1. To quantify the number of duplicate inhalers dispensed per patient encounter in one tertiary care and two community hospitals over a one-year timeframe. 2. To use this data to calculate the carbon footprint of duplicate inhaler dispenses. 3. To calculate the cost of duplicate dispenses in terms of	Monique Theriault	Royal Jubilee Hospital Comox Valley Hospital Campbell River Hospital	duplicate; inhaler; dispense; climate; environment

North Island Region

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
4.Harm Reduction Vending Machines	The purpose of the evaluation is to investigate if, how, and when the Care and Connect Kiosks are being utilized (i.e., to dispense harm reduction supplies, use of mail-in drug checking services via dispensed pre-paid envelopes , and/or to direct individuals to resources via an on screen service directory). .	Landon Walters	Campbell River Hospital (CRH), Nanaimo Regional General Hospital (NRGH) and Victoria General Hospital (VGH).	Harm reduction vending machines; Overdose prevention; Drug checking; Harm reduction; Naloxone
5.Penicillin Allergy De-Labeling at the Campbell River Maternity Clinic	That 100% of the pregnant patients at the CRMat Clinic identified as being allergic to penicillin will be identified, and offered clarification of the allergy with aim to de-label before labor.	Dr. Jennifer Kask	CRMat Clinic (outpt dept CRG) Maternity Ward	Allergy Perinatal Penicillin De-labeling Improvement
6.The Best Care in the Best Place: ED to Rapid Primary Care Follow-up in the Comox Valley	Appropriate outpatient follow-up after ED discharge leads to improved health outcomes. The aim of the project is to increase ER patient follow-up visits at the urgent care clinic by 25%.	Dr. Laura Matemisz	Comox Valley Hospital Emergency Department Island Health After Hours Urgent Care Clinic, Comox Valley	Emergency Department, Primary Care; Follow-up; Access; Collaboration

North Island Region

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
7. Improving Pregnancy Care at Wavecrest Medical Clinic: Dismantling Barriers to Person-Centred, Evidence-Based Care	Majority of patients rate their experience of pregnancy care with Dr Sandwith at Wavecrest Medical Clinic as "Good" or "Excellent" by June 2024 (rated on a 5-point scale). Comparison to baseline data to be collected in a 3 or 4-week "run-in" of data collection.	Dr. Sara Sandwith	Wavecrest Medical Clinic	pregnancy; experience; quality; barriers; stigma
8.Improving Musculoskeletal Consultation Access in the Comox Valley	The wait time for a patient to one of two physicians at Comox Valley Orthopedics clinic will be reduced by 50% by June 30, 2024.	Dr. Andrew Robb	Comox Valley Orthopedics	Consultation; access; appropriate; orthopedics; musculoskeletal
9.Developing an appropriate prescription pathway for LTC.	To decrease the total number of medications per resident at The Views LTC facility by 10 % by March 1, 2024.	Dr. Rainbow Sand Russell-Atkinson	The Views LTC facility - Providence Living Comox, BC	polypharmacy; medication-review; goals-of-care; antipsychotic; appropriate

North Island Region

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
10.Engagement with Campbell River Hospital Wellness Centre to Improve Patient Care	To improve communication between WC staff and clinicians (RM and MD) in 2 programs (DEC and BiRCH) by September 2024 (80% attendance at lunch and learn; survey data.)	Dr. Jennifer Kask	Campbell River	Diabetes; Cardiovascular Disease Prevention; Engagement; Postpartum; parent
11.Program Evaluation of the CBT Skills Group for Managing Depression	The project aims to evaluate the changes in mental health symptoms following a 10 week group CBT program. Specifically, self-reported depression (PHQ-9) and anxiety (GAD-7) will be examined at baseline and after completion of the program.	Lisa Ohlhauser	Mental Wellness Day Program (part of Victoria Mental Health and Substance Use, at the Eric Martin Pavilion at Royal Jubilee Hospital).	depression; anxiety; cognitive behavioural therapy; mental health treatment; group therapy;

Centre Island Region

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
1. Implantable Cardioverter Defibrillators	Enhance care provider knowledge to inform patient information materials	Dr, Michael Slawnych	RJH, NRGH	Cardiology; ICD; quality care; patient experience
2.A Review of Appropriate Antimicrobial Prescribing for Diverticulitis	To determine if piperacillin-tazobactam is being overprescribed for empiric treatment of diverticulitis of inpatients at NRGH, as compared to local guideline (Firstline) empiric antimicrobial selection recommendations.	Kim Scott	Nanaimo Regional General Hospital	antimicrobial stewardship; diverticulitis; piperacillin-tazobactam; overuse; empiric therapy
3.Harm Reduction Vending Machines	To investigate if, how, and when the Care and Connect Kiosks are being utilized (i.e., to dispense harm reduction supplies, use of mail-in drug checking services via dispensed pre-paid envelopes , and/or to direct individuals to resources via an on screen service directory).	Landon Walters	Campbell River Hospital (CRH), Nanaimo Regional General Hospital (NRGH) and Victoria General Hospital (VGH).	Harm reduction vending machines; Overdose prevention; Drug checking; Harm reduction; Naloxone

Centre Island Region

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
<p>4.Improving access, participation and engagement in CBT for Anxiety Group Therapy Sessions for Individuals with Diverse Abilities</p>	<p>DDMHT clinic is aiming to improve access, participation and engagement in CBT for Anxiety group therapy sessions by 50% for individuals with mild range of intellectual disabilities in the Central/North Vancouver Island region by September 2024.</p>	<p>Shelly Mark</p>	<p>DDMHT clinic (Central and North Vancouver Island)</p>	<p>CBT; anxiety; group therapy; intellectual disability; DDMHT</p>
<p>5.Appropriateness of Vancomycin Drug Level Utilization</p>	<p>We will improve the appropriateness of Vancomycin Drug Monitoring in Laboratory Medicine by March 30 of 2024. Additionally, we aim to create a microbiology specific website to provide education to end users, as well as promote prospective monitoring of Vancomycin Drug Level Utilization.</p>	<p>Dr. Christine Lee</p>	<p>RJH; VGH; NRGH: CRG; CVH.</p>	<p>Therapeutic Drug Monitoring; Vancomycin Trough Level; Microbiology Specific Website; Prospective Monitoring; Laboratory Medicine</p>

South Island Region

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
1. Pediatric End-of-Life Project: Development of Guidance Documents & staff education	To improve the care we provide to this vulnerable population, improve the distress that parents are faced with, and improve the morale distress bedside staff feel while caring for these children .	Dr. Ava Butler	Pediatric Ward- VGH Pediatric ICU- VGH Emergency Department- VGH	pediatric; end-of-life; improvement; palliative
2. Patient Centred Care: A Measure of Efficacy in the Revascularization of STEMI and NSTEMI	Provide feedback to clinicians regarding how their practices are impacting patient outcomes in both NSTEMI and STEMI patients. Potentially this will change clinicians approach to providing more or less aggressive revascularization via PCI in different settings, thereby improving patient outcomes.	Dr. Markus Sikkel	Royal Jubilee Hospital	revascularization ; aggressive; invasive; STEMI; NSTEMI
3. Reducing presentations of Shoreline patients to the SPH ER for CTAS4/5 conditions by optimizing team based care and improving same day access at the clinics.	The number of patients attached to Shoreline Medical Society clinics who present to the Saanich Peninsula Hospital (SPH) Emergency Department (ED) with less urgent or non urgent conditions (I.e. Canadian Triage and Acuity Scale (CTAS) score 4-5) will be reduced by 20% by June 2024.	Dr. Sienna Bourdon	SPH ED Shoreline Medical Society - Sidney and Brentwood clinics.	CTAS; Attached; ED; visits; patients

South Island Region

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
4.CDH ED ISART course quality improvement project	To decrease the gap between self identified Indigenous and non-indigenous patients answering a top box answer to the DART 3.0 question "Using any number from 0 to 10, where 0 is the worst care possible and 10 is the best care possible, what number would you use to rate your care during this emergency department visit" by 5% by April 2024.	Dr. Ava Butler	Cowichan District Hospital ER	Emergency Cultural Safety Simulation Indigenous Anti-Racism
5.Appropriateness of Vancomycin Drug Level Utilization	We will improve the appropriateness of Vancomycin Drug Monitoring in Laboratory Medicine by March 30 of 2024. Additionally, we aim to create a microbiology specific website to provide education to end users, as well as promote prospective monitoring of Vancomycin Drug Level Utilization.	Dr. Christine Lee	RJH; VGH; NRGH: CRG; CVH.	Therapeutic Drug Monitoring; Vancomycin Trough Level; Microbiology Specific Website; Prospective Monitoring; Laboratory Medicine

South Island Region

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
<p>6. Improving access to clozapine through the development of a clinical pathway and order set</p>	<p>Our aim is that, by December 2024, 90% of outpatients at EPI with treatment-resistant schizophrenia in this program who are initiated, re-started, or maintained on clozapine will receive monitoring that is consistent with a clinical pathway that reflects specific, guideline-based recommendations.</p>	<p>Lauren Yearwood</p>	<p>Early Psychosis Intervention Program, Victoria</p>	<p>Clozapine; schizophrenia; outpatient; monitoring; access</p>
<p>7. Audit of fibrinogen usage during mass transfusion on the Island</p>	<p>This project aims to increase the speed of fibrinogen administration in VGH and RJH during massive hemorrhage protocol (MHP) activation by implementing a change in procedure from laboratory to bedside reconstitution.</p>	<p>Danica Friesen</p>	<p>Royal Jubilee Hospital and Victoria General Hospital</p>	<p>Massive hemorrhage, fibrinogen, bedside reconstitution, transfusion, best practice</p>

South Island Region

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
8, Evaluation of Abbott and Medtronic Implantable Loop Recorders in VIHA Patients	Evaluate the rate of false alerts before and after we changed device manufacturers of our loop recorder implants.	Dr. Markus Sikkel	Royal Jubilee Hospital	Implantable Loop recorder; Medtronic; Abbott; device alerts
9. Efficacy of Leads for LBBB interventions	To compare the performance of the Boston Scientific active fixation extendable helix lead (Ingevity) to the Medtronic fixed helix lead (SelectSecure). Performance will be measured by ability to successfully capture the conduction system.	Dr. Markus Sikkel	Royal Jubilee Hospital	conduction system pacing; pacemaker leads;
10. Assessing postoperative pain management via parasternal blocks in the cardiac surgery intensive care unit	The aim of this project is to assess the efficacy of PSIC blocks for post-operative pain management in cardiac surgical patients, and to align their routine use with the current literature as part of a standardized "pain pathway" in the cardiac surgery intensive care unit.	Dr. Richard Gardiner	Royal Jubilee Hospital Cardiovascular Unit (CVU)	Parasternal block; Cardiac surgery; Regional anesthesia; Enhanced Recovery After Surgery (ERAS); Pain management

South Island Region

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
11. The Critical Air Project: Climate-conscious inhaler practices	We aim to decrease inpatient inhaler-related greenhouse gas emissions by 30% within 36 months.	Dr. Valeria Stoynova	Royal Jubilee Hospital and Saanich Peninsula Hospital	Inhaler; Carbon stewardship; Pharmacy operations; Climate-conscious prescribing; Pharmaceutical waste
12. Improving Patient Discharge Information	To improve the quality of patient discharged from the emergency departments of Royal Jubilee and Victoria General Hospitals through the creation and dissemination of patient resources.	Dr. Fred Voon	Royal Jubilee Hospital; Victoria General Hospital	discharge resources; emergency medicine; patient literacy; quality improvement; discharge planning
13. LTC Polypharmacy Evaluation	To evaluate the recent effort to reduce polypharmacy at a small number of Victoria LTC homes.	Amanda Leddy	Glengarry Hospital; Gorge Road Hospital	Long-term care; Polypharmacy; Evaluation; Dementia; Medication review
14. Implantable Cardioverter Defibrillators	Enhance care provider knowledge to inform patient information materials	Dr. Michael Slawnych	RJH, NRGH	Cardiology; ICD; quality care; patient experience

South Island Region

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
15. How does the implementation of a Learning Health System approach affect employee engagement and retention? A Case Study of Acute and Crisis MHSU Services in South Island	To review existing literature on Learning Health System impacts, to explore connections between undertaking a LHS approach and associated engagement and retention benefits for staff, and to undertake a case study approach to the nascent	Bree Zehm	RJH	Learning Health Systems; Quality Improvement; Engagement; Retention; Staff
16. Pharmacy Residency Project - Duplicate Dispensing of Inhalers in Hospital	1. To quantify the number of duplicate inhalers dispensed per patient encounter in one tertiary care and two community hospitals over a one-year timeframe. 2. To use this data to calculate the carbon footprint of duplicate inhaler dispenses. 3. To calculate the cost of duplicate dispenses in terms of inhaler cost and pharmacy time.	Monique Theriault	Royal Jubilee Hospital Comox Valley Hospital Campbell River Hospital	duplicate; inhaler; dispense; climate; environment
16. Harm Reduction Vending Machines	To investigate if, how, and when the Care and Connect Kiosks are being utilized,	Landon Walters	Campbell River Hospital ED, Nanaimo Regional General Hospital ED, Victoria General Hospital ED	Harm reduction vending machines; Overdose prevention; Drug checking; Harm reduction; Naloxone

South Island Region

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
17. VHS Volunteer Satisfaction Survey	To develop, in collaboration with volunteers, a satisfaction survey that can be administered to volunteers by March 1st, 2024.	Michelle Bahena-Olivares	Royal Jubilee Hospital, Richmond Pavilion	Satisfaction; survey; collaboration; volunteer; focus groups
18. Topical anesthetic use in Pediatrics	Our goal is to understand the factors that impact a nurse to apply topical anesthetic prior to routine pediatric procedures (i.e. IV start and phlebotomy). Understanding these factors will allow us to take the appropriate next steps to optimize this practice and minimize pediatric pain.	Dr. Gaby Yang	Pediatric daycare, Pediatric inpatient ward, and PICU.	Topical anesthetics; Pediatric; Pain; Procedures; Practice improvement
19. Apixaban for post-operative venous thromboembolism prophylaxis after gynecologic cancer surgery: regional spread of a successful quality improvement study	To improve patient reported quality outcomes, maintain baseline adherence rates, and reduce out of pocket patient cost of 28-days of post-operative VTE prophylaxis by offering apixaban as an oral alternative to injectable enoxaparin over a 3 month study period ending March 31, 2024.	Dr. Justin McGinnis	Victoria General Hospital	Thromboprophylaxis; venous thromboembolism; gynecologic oncology; quality improvement

South Island Region

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
20. Fourth Year Nursing: Leadership Project	Gain an understanding of families education status prior to surgery, post operatively, through interviews.	Kayla Robinson	VGH: 3D pediatric surgical daycare	Satisfaction; survey; collaboration; volunteer; focus groups
21. Borderline Personality Disorder and Short Stay Population Quality Improvement Project in the Psychiatric Emergency Services Unit, Royal Jubilee Hospital	Provide guidelines to achieve therapeutic effects for appropriate patients in the SSBs	Clara Rubincam	RJH: Psychiatric Emergency Services Unit	Short stay beds; Acute Stabilization Units; Borderline Personality Disorder; Psychiatric Emergency Services; crisis unit
22. Timely Fibrinogen Administration in Massive Hemorrhage to Improve Patient Outcomes: Moving to Automatic Dispensing and Bedside Reconstitution	Our project aims to support a procedure change from laboratory to bedside fibrinogen reconstitution in all relevant practice settings (such as the emergency department and delivery room) in Victoria General Hospital (VGH) and Royal Jubilee Hospital (RJH). Currently, only the OR in VGH and RJH practice bedside reconstitution - a change that occurred in May 2023.	Jeffrey Campbell	RJH and VGH	fibrinogen; massive hemorrhage; coagulopathy; bleeding; trauma

South Island Region

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
23. Assessing the Management of Patients with Crohn's Disease in VIHA	To objectively assess how patients with isolated TI Crohn's Disease in the Vancouver Island Health Authority are being managed.	Dr. Sepeher Khorasani	Public Health, Surgical Services	Chron's Disease, Surgery, Elective, Emergency, Biologics.
24. Optimizing care of the Patient receiving Clozapine, Acute MHSU	We aim to provide recommendations for nursing monitoring of patients on Clozapine - orthostatic BPs, Constipation monitoring, WBC/lab monitoring, etc. by reviewing current guidelines and best practices for Clozapine prescribing and monitoring, and starts in Acute care.	Clara Rubincam	Acute and Crisis MHSU Services, Royal Jubilee Hospital	Clozapine; Order-Set; acute; monitoring; standardization
25. Finding Prenatal Care: A Patient's Perspective	Improve prenatal patient satisfaction in the process of finding PN care at Grow Health by at least one point on 5 point Likkhardt scale by June 2024.	Dr. Jane McGregor	Grow Health-Community clinic	Prenatal; Pregnancy; system navigation; obstetrics; maternity

South Island Region

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
26. Reducing the length of stay of admitted pediatric patients in the VGH ED	The project aim is to reduce the average LOS in the VGH emergency department by 25% for children who have been admitted to pediatric inpatient medicine by July 2024.	Dr. Sarah O'Connor	Victoria General Hospital inpatient pediatrics, emergency room	pediatrics; inpatient; rounding; length of stay; discharge
27. Managing Withdrawal from Novel Psychoactive Substances in Opioid Use Disorder	1) What impact does the new protocol have on clients (looking at retention in OAT care, LOS and unplanned discharges, connection to care, and PSLs events before and after intervention) 2) What associations exist between detox administered benzodiazepines and: intake UDS benzo result, recent substance use patterns, patient characteristics	Courtney Amoraal	Victoria Detox	non-medical benzodiazepine; connection to care; Opioid Use Disorder; Benzodiazepine withdrawal; retention
28. Offering Compassionate Care - Increasing Patient's Experience of Compassionate Care During Visits with their Family Doctor	By June 2024 the percentage of patients reporting high levels experienced compassion from me will be increased by 50%.	Dr. Jill Norris	Pprivate family practice in Victoria BC.	compassion; patient's perception; outpatient; primary care; mindfulness

South Island Region

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
29. The Critical Air Project: Minimizing Inhaler Related Carbon Footprint on Transfer	The aim of this project is to lower inhaler-related carbon footprint at RJH, with a target carbon footprint lowering by 15% by end of May 2023, in the ER and the medical ward.	Dr. Valeria Stoyanova	Royal Jubilee Hospital	planetary health; healthcare sustainability; climate conscious medication management; inhaler; pharmacy operations
30. Patients as Partners in Psychotherapy Calibration	To increase patient experience of attunement and responsiveness in psychotherapy by 15%, by June 2024.	Dr. Michelle van den Engh	Private practice	psychotherapy; therapeutic relationship; attunement; responsiveness; patient feedback
31. Inclusive Engagement and Building Coalitions	To create clear inclusive communication streams between senior leadership teams when implementing strategies and initiatives. Increasing communication between inter-professional colleagues to build coalitions to support the work done in clinical surgical areas.	Melanie Majore	Royal Jubilee Hospital (OR) Victoria General Hospital (OR) South Island Surgical Centre (OR)	Communication, Inter-professional Collaboration Strategies, Inclusiveness

South Island Region

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
32. Seven Oaks Schizophrenia Care Standards	To improve function and symptom burden outcomes for persons with schizophrenia and to reduce admission times and therefore improve access to tertiary services.	Ty-Leigh Whiteley	Seven Oaks	Measurement-based care; National standards; Quality improvement; Adult mental health; Schizophrenia
33. Rates of early and late complications of bariatric surgery performed at a single center.	We would like to understand complications following bariatric surgery performed at our institution so we may try to mitigate them.	Dr. Michelle van den Engh	Private practice	psychotherapy; therapeutic relationship; attunement; responsiveness; patient feedback
34. Inclusive Engagement and Building Coalitions	Increasing communication between inter-professional colleagues to build coalitions to support the work done in clinical surgical areas.	Dr. Samaad Malik	Royal Jubilee Hospital	bariatric surgery complications sleeve gastrectomy
35. Hospital at Home Physician Satisfaction	We wanted to better understand their level of satisfaction with different aspects of the Program so that we could improve physician retention	Dr. Shauna Tierney	RJH and VGH	Hospital at Home; physician satisfaction; quality improvement; Victoria

Island Wide

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
<p>1. The Experience of Engaging in Research for Long-Term Care Home Leaders and Teams</p>	<p>To speak with 3-4 long-term care leaders in Island Health about their prior experiences with researchers and/or facilitating research at their site, by 31 May 2023.</p>	<p>Amanda Leddy</p>	<p>3-4 long-term care homes TBD (owned and operated)</p>	<p>Long-term care; Experience; Knowledge translation; Engagement</p>
<p>2. 2022 New Nurse (RN/RPN) Transition Program</p>	<p>To support New Graduates in their transition in Island Health and encourage a positive process of consolidation of theory into practice, increase capacity to work through the transitions that occurs during the first year of practice, and provide the resources and tools that support standards of excellence in entry-level, professional practice.</p>	<p>Marcia Docherty</p>	<p>Sites that have New Nurse Grads, primarily med/surgical units, but also CHS, MHSU, and others.</p>	<p>Nursing; New Graduate; Transition; Professional Development; Onboarding</p>
<p>3. Data-driven OAT Retention</p>	<p>Determine engagement in research with long-term care leaders (prior experiences with researchers and/or facilitating research at their site) by May 2023</p>	<p>Chelsea Wakelyn</p>	<p>Private practice Addiction Medicine physician clinics.</p>	<p>Opioid Agonist Treatment; Data-driven improvement; population health; proactive care</p>

Island Wide


PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
<p>4. Surveillance and Chart Review related to SUD/ODU in Island Health</p>	<p>Providing an evidence-informed response for island Health's substance use disorder services.</p>	<p>Bohdan Nosyk</p>	<p>Locations TBD</p>	<p>Substance Use Disorder; Surveillance; health system performance; Evidence Informed; Evidence Generating</p>
<p>5. Provincial Cognitive Remediation Training Pilot Program</p>	<p>Island Health has one CRT pilot site in support of a provincial initiative to deliver education curriculum in support CRT Advanced Practice. Vancouver Coastal Health has been appointed by the Ministry of Health and Ministry of Mental Health and Addictions to lead this provincial work.</p>	<p>Dr. Mahesh Menon and Lauren Fox</p>	<p>MHSU South Island (in person) Island-wide MHSU clients (virtually</p>	<p>CRT; Cognitive; Remediation; Provincial; Pilot</p>
<p>6. Assessment of strategies for reducing employee burnout in hospital pharmacy staff</p>	<p>To identify current burnout rates among pharmacy staff, and assess pharmacy staff perception of potential mitigation strategies.</p>	<p>Ethan Wong</p>	<p>Pharmacy staff (all hospitals island-wide)</p>	<p>Burnout; Pharmacy; Mitigation Strategies; Prevention; Well-Being</p>

Island Wide

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
7. SQI SPRINT Penicillin Allergy De-labelling	The aim of the project is to increase the number of patients de-labelled per 4-week period by 50% by mid-February of 2024 for patients admitted to Campbell River Hospital, Nanaimo Regional General Hospital, Cowichan District Hospital, and Victoria General Hospital.	Dr. Victor Yuen	CRGH, NRGH, CDH VGH	penicillin; allergy; delabeling; oral; challenge
8. Building Bridges: Improving inter-organizational collaboration between the Ministry of Health and Island Health to support medical residency allocation planning	To improve the collaborative relationship between the Ministry of Health and appropriate delegate from Island Health which will support strategic involvement in medical residency allocation planning at the provincial level.	Carmen Harrington	No physical sites. All interaction will be conducted virtually.	relationship; HHR planning; medical residency; collaboration; strategic
9. Promotion of Increased Colorectal Cancer Screening Uptake in the Greater Victoria Area	By offering targeted colorectal cancer screening to unattached patients in the Island Health region, we will improve the count of FIT tests completed under the project co-leads by 3-fold over a 6-month period (Dec 2023-May2024).	Dr. Cal Shapiro and Dr. Stuart Bax	Greater Victoria Community Family Medicine	Cancer Screening; Colorectal Cancer; Preventative Health; Health Equity; Unattached

Island Wide

PROJECT TITLE	AIM	PROJECT LEAD	SITES INVOLVED	KEYWORDS
10. Good Call Action Series	To achieve a 20% improvement in scores of Team Effectiveness in on-call communication by Good Call team members, within 80% of participating teams across Island Health, six months post completion of the Action Series	Julia Porter	All sites	Learning Action Series; Call Experience; Team Effectiveness; Interdisciplinary Teams; Grassroots Level Improvement
11. Fast access to consultation for pediatric food allergy	By August 2024, 80% of patients <2 years of age referred to my community allergy practice for possible food allergy will be seen within 8 weeks of referral.	Dr. Victoria Cook	Private practice community clinic	Food allergy; Pediatrics; Egg ladder; Primary prevention; Wait times
Seven Oaks Schizophrenia Care Standards	To improve function and symptom burden outcomes for persons with schizophrenia and to reduce admission times and therefore improve access to tertiary services.	Ty-Leigh Whiteley	Seven Oaks Adult Tertiary MHSU site	Measurement-based care; National standards; Quality improvement; Adult mental health; Schizophrenia



THANK YOU

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