

# **HEALTHCARE EXCELLENCE CANADA**

## **2021-22 PERFORMANCE MEASUREMENT FRAMEWORK (PMF) REPORT**

**RESULTS: APRIL 1, 2021 – MARCH 31, 2022**

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## 1.0 INTRODUCTION

### 1.1 Background

Healthcare Excellence Canada's (HEC's) 2021-22 Performance Measurement Framework (PMF) includes a set of 21 indicators. This indicator set was established as a bridge between the Performance Measurement Frameworks of our legacy organizations<sup>1</sup> and HEC's new PMF, which comes into effect in 2022-23. HEC reports annually on its progress to deliver its identified outputs and outcomes, and to meet the accountability targets set for the year.

The 2021-22 PMF provides annual results and targets on 21 cross-program indicators in the categories of outputs, reach and outcomes. These indicators are valid for the 2021-22 fiscal year only and will be replaced by a new set of indicators beginning in 2022-23 that are aligned with HEC's new strategy.

### 1.2 Overview of Performance

Of the 21 indicators contained in the HEC 2021-22 PMF:

- Fifteen (15) are target indicators, where targets are set for indicators where improvements can be measured annually, and desired direction of change is known;
- Four (4) are tracker (non-directional) indicators, meaning performance is tracked but no targets are set for:
  - HEC 1 – number of programs supported
  - HEC 3 – number of new knowledge products developed
  - HEC 4 – number of knowledge exchange activities delivered
  - HEC 5 – number of behaviour change campaigns underway or completed
- Two (2) are non-target, legacy indicators that were slated for retirement at the beginning of 2021-22, but are being tracked for this fiscal year to maintain continuity with legacy indicators:
  - HEC 20 – percentage of acute care hospitalizations with at least one unintended occurrence of harm
  - HEC 21 – percentage of provinces and territories with key patient safety legislation

Overall, HEC met targets for 13 of its 15 target indicators in 2021-22. Of the 15 target indicators, 11 indicators surpassed the upper target range, two fell within the target range, while two fell short of the lower boundary of the target range. More detailed results can be found in Section 2.0 - HEC Performance Measurement Matrix and Annex A – PMF Data Tables.

Table 1 summarizes the year-end status of all indicators in relation to 2021-22 targets.

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<sup>1</sup>To the end of fiscal 2020-21, HEC's measurement and reporting practices were guided by the Performance Measurement Frameworks of the former Canadian Foundation for Healthcare Improvement (CFHI) and the former Canadian Patient Safety Institute (CPSI). For 2021-22, an interim PMF comprised of a combined set of legacy indicators was established and is the basis for this PMF report. Measurement and Reporting beyond 2021-22 will be guided by HEC's new Performance Measurement Framework, which was approved in January 2022.

**Table 1: Summary of 2021-22 PMF Results for Target Indicators**

<b>Result Rating</b>	<b>Indicators Affected</b>	<b>Total Indicators</b>
Targets exceeded	HEC 2 - # and % of HEC programs guided by patients, residents, essential care partners, community members and others with lived experience	<b>11</b>
	HEC 6 - # of healthcare leaders who participated in HEC offerings	
	HEC 7 - # of target patient and resident populations reached	
	HEC 10 - # of improvement teams supported	
	HEC 11 - # and % of improvement teams guided by patients, residents, essential care partners, community members and others with lived experience as core team members	
	HEC 12 - # and % of improvement teams that reported improvements in their organization's culture related to healthcare practices and/or delivery models	
	HEC 14 - # and % of improvement teams that reported making improvements in the health of patients and residents reached	
	HEC 15 - # and % of improvement teams that reported making improvements in efficiency of care	
	HEC 16 - # and % of improvement teams that reported making improvements in the work-life of healthcare providers	
	HEC 17 - # and % of improvement teams that reported further spreading their project beyond the original implementation site	
	HEC 18 - # and % of improvement teams that reported the creation of new or updated/revised policies, standards or guidelines resulting from their project	
Targets met	HEC 8 - # and % of healthcare leaders who reported knowledge acquisition as a result of participating in HEC programs	<b>2</b>
	HEC 13 - # and % of improvement teams that reported making improvements to patient, resident and essential care partner experience of care	
Targets not met	HEC 9 - # and % of healthcare leaders who reported skill acquisition as a result of participating in HEC programs	<b>2</b>
	HEC 19 - # and % of improvement teams that reported sustaining their project at least six months since the end of the collaborative	

### 1.3 Challenges and Limitations

In 2021-22, the COVID-19 pandemic continued to impact the delivery and reach of HEC programs, as well as the acquisition of data related to performance. HEC and many of our partners experienced delays related to the fifth wave of the pandemic, which affected the ability of stakeholders to participate in our programming due to other pandemic priorities. Several programs were forced to defer the delivery of offerings to the latter part of 2021-22 and into 2022-23. This prolonged the data collection time horizons and affected the slate of programs contributing to the 2021-22 PMF report.

**Indicator HEC 19 - # and % of improvement teams that reported sustaining their project at least six months since the end of the collaborative**, was particularly affected by the pandemic. Based on 2020-21 performance, HEC had established a target range of 75%-85% for this indicator. At the end of 2021-22, HEC achieved just 17% (4 of 23 teams reporting) on this indicator. Teams that contributed to this data were from the Optimizing Practices, Use, Care and Services-Antipsychotics (OPUS-AP) program, which was completing phase II of its three-phase program when the pandemic struck in 2020. Because sustainability data is collected months after the completion of the collaborative and COVID-19 disproportionately affected the older adult population and long-term care homes, it is not surprising that improvements were difficult to sustain as long-term care homes re-focused their efforts on infection prevention and control, crisis response and maintenance. With the recent launch of phase III of the OPUS-AP – PEPS initiative, there will be an opportunity for further collaboration with homes across Quebec.

HEC also fell short of the minimum of its target range for **Indicator HEC 9 - # and % of healthcare leaders who reported skill acquisition as a result of participating in HEC programs**. In this case, HEC programs collectively achieved a performance level of 82% (309 of 377 respondents indicating skills had been acquired), which is just 3 percentage points short of the lower end of the 85%-95% target range. We are comfortable attributing this shortfall to the natural variation associated with this approach to measuring impact and do not consider this indicative of a decline in our ability to build capability among those who participate in our programming. We were also pleased to note that, while performance on this indicator decreased slightly from the 2020-21 baseline of 88%, the number of leaders we assessed on this indicator grew by a factor of 10.

#### **1.4 HEC Programs**

Table 2 below lists a total of 43 active programs that contributed to the PMF indicators in 2021-22. Each program contributed only to the indicators that were relevant to its work.

**Table 2: Active HEC Programs in 2021-22**

Collaboratives (Total = 14)	
1.	Advancing Frailty Care in the Community a. including Practice Facilitation
2.	EXTRA Cohort 15
3.	EXTRA Cohort 16
4.	EXTRA Cohort 17
5.	Implementation Science Teams
6.	Learning Together (previously LTC+ Expanded)
7.	LTC+ 2.0
8.	LTC+ Acting on Pandemic Learning Together
9.	Optimizing Practices, Use, Care and Services-Antipsychotics (OPUS-AP) - Phase 2
10.	Optimizing Practices, Use, Care and Services-Antipsychotics (OPUS-AP) - Phase 3
11.	Paramedics and Palliative Care: Bringing Vital Services to Canadians
12.	Promoting Life Together
13.	Safe Virtual Care
Initiatives (Total = 29)	
1.	Advancing Safety for Patients in Residency Education (ASPIRE)
2.	AI in Healthcare
3.	Bridge-to-Home Spread Collaborative
4.	Canadian Patient Safety Officer Course (CPSOC)
5.	Webinar Discussion Series: Community Dementia Care and Support
6.	Deteriorating Patient Condition
7.	Enhanced Recovery Canada
8.	Equity, diversity and inclusion at HEC
9.	Essential Together
10.	FPT Government Quality and Patient Safety Network
11.	Global Patient Safety and Patient Engagement Leadership
12.	HEC Campaign – Clean Your Hands Day
13.	HEC Campaign – World Patient Safety Day
14.	HEC Campaign – Canadian Patient Safety Week
15.	HEC General
16.	Improve Safety Outcomes and Enable Safety-Capable Environments
17.	Knowledge Translation & Implementation
18.	Leaders Forum
19.	Measuring and Improving Safety: Hospital Harm Project
20.	Measuring and Improving Safety: Measurement and Monitoring of Safety (MMS) Through the Eyes of Patients
21.	Measuring and Improving Safety: Strengthening Surveillance of Healthcare-Associated Infections (HAI)
22.	Medication Safety
23.	Patient Partnership and Engagement Strategy Development
24.	Patients for Patient Safety Canada
25.	Quick Start Guide to Patient Safety Improvement
26.	Reimagining Care of Older Adults
27.	Safety Improvement Projects
28.	Support Cultural Safety and Humility and Address Systemic Racism in the Healthcare System
29.	TeamSTEPPS Canada Essentials

2.0 HEC Performance Measurement Matrix

Index	Indicator	Baseline 2020-21	Result 2021-22  Target met Target not met No Set Target	Target 2021-22	Notes
HEC 1	Number of programs supported	59	43	-	This is a Tracker Indicator. No desired target was set because there is no clear directionality for this indicator.
HEC 2	Number and percentage of HEC programs guided by patients, residents, essential care partners, community members and others with lived experience	50 98%  (50/51)	88% (38/43)	75% ± 5%	
HEC 3	Number of new knowledge products developed	282	427	-	This is a Tracker Indicator. No desired target was set because there is no clear directionality for this indicator.
HEC 4	Number of knowledge exchange activities delivered	293	542	-	This is a Tracker Indicator. No desired target was set because there is no clear directionality for this indicator.
HEC 5	Number of behaviour change campaigns underway or completed	5	3	-	This is a Tracker Indicator. No desired target was set because there is no clear directionality for this indicator.
HEC 6	Number of healthcare leaders who participated in HEC offerings	10,909	11,238	8,200 (+/- 10%)	
HEC 7	Number of target patient and resident populations reached	Direct: 15,443 Potential: 15,755	Direct: 52,117 Potential: 792,970	Direct: 3,300 (+/- 10%) Potential: 640,000 (+/- 10%)	
HEC 8	Number and percentage of healthcare leaders who reported knowledge acquisition as a result of participating in HEC programs	553 87%  (481/553)	91% (1,495/1,648)	90% ± 5%	

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HEC 9	Number and percentage of healthcare leaders who reported skill acquisition as a result of participating in HEC programs	32 88% (28/32)	82% (309/377)	90% ± 5%	Performance fell 3% short of the lower end of the target range on this indicator. This indicator will be closely monitored moving forward, however, the slight shortfall is likely attributable to natural variation in the measure and is not indicative of a decline in service.
HEC 10	Number of improvement teams supported	1200	2,134	1,900 (+/- 10%)	
HEC 11	Number and percentage of improvement teams guided by patients, residents, essential care partners, community members and others with lived experience as core team members	208 66% (208/314)	85% (57/67)	60% ± 5%	
HEC 12	Number and percentage of improvement teams that reported improvements in their organization's culture related to healthcare practices and/or delivery models	35 97% (35/36)	93% (28/30)	85% ± 5%	
HEC 13	Number and percentage of improvement teams that reported making improvements to patient, resident and essential care partner experience of care.	71 97% (71/73)	95% (111/117)	90% ± 5%	
HEC 14	Number and percentage of improvement teams that reported making improvements in the health of patients and residents reached	46 94% (46/49)	94% (143/152)	75% ± 5%	
HEC 15	Number and percentage of improvement teams that reported making improvements in efficiency of care	66 96% (66/69)	92% (144/156)	75% ± 5%	
HEC 16	Number and percentage of improvement teams that reported making improvements in the work-life of healthcare providers	60 94% (60/64)	93% (143/153)	85% ± 5%	
HEC 17	Number and percent of improvement teams that reported further spreading their project beyond the original implementation site	40 87% (40/46)	72% (60/83)	50% ± 5%	



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HEC 18	Number and percent of improvement teams that reported the creation of new or updated/revised policies, standards or guidelines resulting from their project	67 78%  (67/86)	79% (148/188)	55% ± 5%	
HEC 19	Number and percent of improvement teams that reported sustaining their project at least six months since the end of the collaborative	12 92%  (12/13)	17% (4/23)	80% ± 5%	The teams contributing to this indicator participated in the Optimizing Practices, Use, Care, and Services – Antipsychotics (OPUS-AP) program, which targets improvements in long-term care homes and the older adult population. The COVID-19 pandemic heavily affected this sector and shifted focus away from sustaining improvements toward infection prevention and control, crisis response and maintenance. See section 1.3 for more detail.
HEC 20	Percentage of acute care hospitalizations with at least one unintended occurrence of harm	5.4%	5.9%	-	No target - legacy indicator being retired
HEC 21	Percentage of provinces and territories with key patient safety legislation	56%	56%	-	No target - legacy indicator being retired

**ANNEX A – PMF DATA TABLES**

<b>HEC 1: Number of programs supported by:</b> a) number of improvement collaboratives b) number of Initiatives		<b>43</b> <b>a) 14</b> <b>b) 29</b>
<b>Program phase reached as at March 31, 2022</b>		
Implementation		19
Complete		13
Development		5
Post-Implementation		6
<b>Shared federal, provincial and territorial health priority*</b>		
Innovation/transformation		29
Diverse federal, provincial and territorial priorities		13
Home and community care (including palliative care)		10
Access, affordability and appropriate use of prescription drugs		4
Indigenous health		3
Mental health and addictions		1
<b>Collaboration with other pan-Canadian health organizations*</b>		
None		28
Other pan-Canadian health organizations		5
Canadian Institute for Health Information		5
Canadian Partnership Against Cancer		5
Canadian Agency for Drugs and Technologies in Health		2
Canadian Centre on Substance Use and Addiction		3
Canada Health Infoway		3
Mental Health Commission of Canada		3
<b>Engagement of First Nations, Inuit and Métis perspectives in design, delivery and/or evaluation of the collaborative or program</b>		
No		33
Yes		10
<b>HEC 2: Number and percentage of HEC programs guided by patients, residents, essential care partners, community members and others with lived experience</b>		
Yes		38
No		5
<i>*Number includes programs that contributed to more than one option</i>		

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<b>HEC 3: Number of new knowledge products developed</b>	<b>427</b>
<b>Tools and Resources</b>	
Recordings (webinar, video, etc.)	178
Online platforms (website, applications, resource hubs, etc.)	26
Training resources (e.g., toolkits, guides, manuals, etc.)	14
Online course	2
<b>Summaries and Briefs</b>	
Handout, fact sheet, brochure, poster	63
Story (improvement, patients)	0
<b>Reports, Papers and Scans</b>	
Research and analysis	7
Background/summary	5
Corporate document	2
Environmental scan	0
White paper	0
<b>Journal Articles</b>	
Original article	3
Blogs	18
Commentaries and editorials	11
Other	39
<b>By Language*</b>	
English	196
Bilingual	117
French	112
<i>*Language in which the knowledge products were published</i>	

<b>HEC 4: Number of knowledge exchange activities delivered by</b>	<b>542</b>
<b>Education and Training</b>	
Coaching call	242
Webinar	89
Workshop	43
Course	12
Site visit	2
<b>Conference Presentations and Outreach</b>	
Oral presentation	26
Booth and exhibits	13
Poster presentation	2
<b>Roundtables/Forums</b>	
Invited presentation	25
Hosting	9
Other	79

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Language*	
English	334
Bilingual	124
French	84
<i>*Language in which the knowledge exchange activities were delivered</i>	

<b>HEC 5: Number of behaviour change campaigns underway or completed</b>	<b>3</b>
<b>Campaign phase reached as at March 31, 2022</b>	
Complete	2
Implementation	1

<b>HEC 6: Number of healthcare leaders who participated in HEC offerings</b> <ul style="list-style-type: none"> <li>• Total value</li> <li>• Unique value</li> </ul>	<b>11,238</b> <b>6,393</b>
<b>Unique values by program type</b>	
Initiatives	5,856
Collaboratives (Improvement team members)	1,393
<b>Program</b>	
Equity, diversity and inclusion at HEC	1,618
LTC+ Acting on Pandemic Learning Together	1,601
HEC Campaigns	769
TeamSTEPPS Canada Essentials	709
Knowledge Translation & Implementation	448
Learning Together (previously LTC+ Expanded)	321
Essential Together	262
Patient Partnership and Engagement Strategy Development	238
Promoting Life Together	222
Advancing Frailty Care in the Community	194
Safe Virtual Care	171
Webinar Discussion Series: Community Dementia Care and Support	159
LTC+ 2.0	105
EXTRA Cohort 17	85
Quick Start Guide to Patient Safety Improvement	80
Safety Improvement Projects	50
Improve Safety Outcomes and Enable Safety-Capable Environments	43
Patients for Patient Safety Canada	43
EXTRA Cohort 16	38
Re-Imagining Care for Older Adults	38
AI in Healthcare	30
FPT Government Quality and Patient Safety Network	25
Support Cultural Safety and Humility and Address Systemic Racism in the Healthcare System	20
Practice Facilitation	18

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Paramedics and Palliative Care: Bringing Vital Services to Canadians	16
Leaders Forum	11
Measuring and Improving Safety: Measurement and Monitoring of Safety (MMS) Through the Eyes of Patients	11
Global Patient Safety and Patient Engagement Leadership	4
<b>Primary role of healthcare leader</b>	
Administrator (includes executives, senior leaders, managers, directors)	1,695
Not known/not disclosed	1,692
Other	836
Nurse (Registered Nurse or Licensed Practical Nurse)	458
Student	342
Quality Improvement Lead	334
Allied Healthcare Provider	333
Consultant	302
Patient/family member/community member/person with lived experience	233
Researcher	222
Policy Advisor/Analyst	171
Physician	129
Pharmacist	45
Indigenous Leader	23
Personal Support Worker/Care Aide	21
Recreation Therapist/Activities Coordinator	13
<b>Region</b>	
Ontario	2410
Not known/Not disclosed	1371
Alberta	577
British Columbia	569
Manitoba	335
Quebec	327
Nova Scotia	278
Saskatchewan	220
Newfoundland and Labrador	157
New Brunswick	126
International	100
Prince Edward Island	44
Yukon	27
Northwest Territories	19
Nunavut	10
<b>Language*</b>	
English	4,941
Not known/Not disclosed	1,302
French	245
Bilingual (no preference)	60
Other	9
<b>Gender</b>	
Not known/not disclosed	1,725

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Woman	4,107
Man	742
Another gender	17
<i>Numbers include unique healthcare leaders who participated in more than one program; in other words, numbers include duplicate count of unique healthcare leaders</i> <i>*The healthcare leader's preferred language for day-to-day communication</i>	

HEC 7: Number of target patient and resident populations reached	
<b>Direct Reach</b>	<b>52,117</b>
<b>Program</b>	
Safe Virtual Care	45,587
Paramedics and Palliative Care: Bringing Vital Services to Canadians	4,120
Advancing Frailty Care in the Community	2,088
Practice Facilitation	322
<b>Region</b>	
Ontario	31,203
Alberta	9,980
Newfoundland and Labrador	4,557
British Columbia	4,374
Nova Scotia	1,524
Manitoba	245
Saskatchewan	92
Prince Edward Island	41
New Brunswick	36
Quebec	-
Yukon	-
Nunavut	-
Northwest Territories	-
<b>Potential Reach</b>	<b>792,970</b>
<b>Program</b>	
Safe Virtual Care	553,243
LTC+ Acting on Pandemic Learning Together	177,283
LTC+ 2.0	37,077
Implementation Science Teams	13,710
Learning Together (previously LTC+ Expanded)	6,887
Paramedics and Palliative Care: Bringing Vital Services to Canadians	4,770
<b>Region</b>	
Ontario	429,810
British Columbia	100,714
Northwest Territories	72,066
Alberta	58,796

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Quebec	39,553
New Brunswick	29,143
Newfoundland and Labrador	20,931
Manitoba	14,092
Nova Scotia	13,011
Saskatchewan	12,233
Prince Edward Island	1,949
Yukon	672
Nunavut	-

	n	Total Respondents	%
<b>HEC 8: Number and percentage of healthcare leaders who reported knowledge acquisition as a result of participating in HEC programs</b>	<b>1,495</b>	<b>1,648</b>	<b>91%</b>
<b>Program</b>			
LTC+ Acting on Pandemic Learning Together	927	1,052	88%
Webinar Discussion Series: Community Dementia Care and Support	173	182	95%
Learning Together (previously LTC+ Expanded)	151	164	92%
Advancing Frailty Care in the Community	71	73	97%
Promoting Life Together	62	63	98%
Safe Virtual Care	54	55	98%
LTC+ 2.0	37	38	97%
Practice Facilitation	13	14	93%
Paramedics and Palliative Care: Bringing Vital Services to Canadians	7	7	100%
<b>Language*</b>			
English	1134	1241	91%
Not known/Not disclosed	288	324	89%
French	60	65	92%
Bilingual (EN/FR)	13	18	72%
<b>Gender</b>			
Woman	795	856	93%
Not known/Not disclosed	552	630	88%
Man	125	139	90%
Prefer not to disclose	21	21	100%
Another gender	2	2	100%
<b>Notes:</b> <i>n = number of respondents who reported knowledge acquisition</i> <i>*The healthcare leader's preferred language for day-to-day communication</i>			

HEC 9: Number and percentage of healthcare leaders who reported skill acquisition as a result of participating in HEC programs	n	Total respondents	%
	309	377	82%
<b>Program</b>			
LTC+ Acting on Pandemic Learning Together	188	241	78%
Advancing Frailty Care in the Community	62	72	86%
Safe Virtual Care	51	55	93%
Paramedics and Palliative Care: Bringing Vital Services to Canadians	7	7	100%
Learning Together (previously LTC+ Expanded)	1	2	50%
<b>Language*</b>			
English	272	333	82%
French	18	22	82%
Not known/Not disclosed	12	14	86%
Bilingual (EN/FR)	7	8	88%
<b>Gender</b>			
Not known/Not disclosed	240	300	80%
Woman	59	66	89%
Man	10	11	91%
Notes: n = number of respondents who reported skill acquisition *The healthcare leader's preferred language for day-to-day communication			

<b>HEC 10: Number of improvement teams by</b>	<b>2,134</b>
<b>Program</b>	
LTC+ Acting on Pandemic Learning Together	1,619
LTC+ 2.0	279
Learning Together (previously LTC+ Expanded)	115
Safe Virtual Care	25
OPUS-AP - Phase 2	23
Implementation Science Teams	22
Advancing Frailty Care in the Community	18
EXTRA Cohort 17	9
Practice Facilitation	9
EXTRA Cohort 16	8



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Paramedics and Palliative Care: Bringing Vital Services to Canadians	7
<b>Type</b>	
Interorganizational	1,946
Interprofessional	134
Inter-provincial/territorial	52
Inter-sectoral	2
<b>Primary area of care</b>	
Long-term care	1,942
Marginalized populations (e.g., LGBTQ+, people experiencing homelessness, immigrants, refugees, etc.)	84
Primary care	52
Other	38
Palliative and end-of-life care	7
Patient, family and/or community engagement in care	4
Indigenous health and care	3
Mental health	2
Children and youth	1
Population health/public health	1
Community and/or home care	0
Access to pharmaceuticals	0
Access to specialist care	0
Acute care	0
Care for high-risk, high-need, high-cost patients	0
<b>Region*</b>	
Ontario	814
Quebec	321
British Columbia	300
Alberta	290
Manitoba	153
Newfoundland and Labrador	38
New Brunswick	94
Saskatchewan	62
Prince Edward Island	28
Nova Scotia	36
Yukon	8
Northwest Territories	3
National	1
Nunavut	0
<i>*Number contains improvement teams implementing projects in more than one region</i>	

HEC 11: Number and percentage of improvement teams guided by patients, residents, essential care partners, community members and others with lived experience as core team members	n	N <sub>Respondents</sub>	% <sub>Respondents</sub>
	57	67	85%
<b>Program</b>			
Implementation Science Teams	22	22	100%
Safe Virtual Care	18	21	86%
Advancing Frailty Care in the Community	11	18	61%
Paramedics and Palliative Care: Bringing Vital Services to Canadians	6	6	100%
<b>Region</b>			
Ontario	24	27	89%
British Columbia	7	10	70%
Newfoundland and Labrador	8	8	100%
Alberta	7	8	88%
New Brunswick	6	6	100%
Saskatchewan	4	4	100%
Manitoba	3	4	75%
Quebec	3	3	100%
Nova Scotia	3	3	100%
Prince Edward Island	2	2	100%
Northwest Territories	0	0	0%
Nunavut	0	0	0%
Yukon	0	0	0%
<p><i>Notes:</i>  <i>n</i> = Number and percentage of improvement teams guided by patients, residents, essential care partners, community members and others with lived experience as core team members  <i>N<sub>Respondents</sub></i> = total number of responding improvement teams providing data for this measure</p>			

HEC 12: Number and percentage of improvement teams that reported improvements in their organization's culture related to healthcare practices and/or delivery models	n	N <sub>Respondents</sub>	% <sub>Respondents</sub>
	28	30	93%
<b>Program</b>			
Advancing Frailty Care in the Community	12	14	86%
Safe Virtual Care	12	12	100%
Paramedics and Palliative Care: Bringing Vital Services to Canadians	4	4	100%

**Notes:**

*n* = Number and percentage of improvement teams that reported improvements in their organization's culture related to healthcare practices and/or delivery models

*N<sub>Respondents</sub>* = total number of responding improvement teams providing data for this measure

	<b>n</b>	<b>N<sub>Respondents</sub></b>	<b>%Respondents</b>
<b>HEC 13: Number and percentage of improvement teams that reported making improvements to patient, resident and essential care partner experience of care</b>	<b>111</b>	<b>117</b>	<b>95%</b>
<b>Program</b>			
LTC+ Acting on Pandemic Learning Together	84	87	97%
Safe Virtual Care	11	14	79%
Advancing Frailty Care in the Community	9	9	100%
Paramedics and Palliative Care: Bringing Vital Services to Canadians	7	7	100%
<b>Notes:</b> <i>n</i> = Number and percentage of improvement teams that reported making improvements to patient, resident and essential care partner experience of care <i>N<sub>Respondents</sub></i> = total number of responding improvement teams providing data for this measure			

	<b>n</b>	<b>N<sub>Respondents</sub></b>	<b>%Respondents</b>
<b>HEC 14: Number and percentage of improvement teams that reported making improvements in the health of patients and residents reached</b>	<b>143</b>	<b>152</b>	<b>94%</b>
<b>Program</b>			
LTC+ Acting on Pandemic Learning Together	121	127	95%
Advancing Frailty Care in the Community	11	12	92%
Safe Virtual Care	6	8	75%
Paramedics and Palliative Care: Bringing Vital Services to Canadians	5	5	100%
<b>Notes:</b> <i>n</i> = Number and percentage of improvement teams that reported making improvements in the health of patients and residents reached <i>N<sub>Respondents</sub></i> = total number of responding improvement teams providing data for this measure <i>n</i> = Number and percentage of improvement teams that reported making improvements in the health of patients and residents reached			

<b>HEC 15: Number and percentage of improvement teams that reported making improvements in efficiency of care</b>	<b>n</b>	<b>N<sub>Respondents</sub></b>	<b>%Respondents</b>
	<b>144</b>	<b>156</b>	<b>92%</b>
<b>Program</b>			
LTC+ Acting on Pandemic Learning Together	117	127	92%
Advancing Frailty Care in the Community	11	12	92%
Safe Virtual Care	9	10	90%
Paramedics and Palliative Care: Bringing Vital Services to Canadians	7	7	100%
<i>Notes:</i> <i>n = Number and percentage of improvement teams that reported making improvements in efficiency of care</i> <i>N<sub>Respondents</sub> = total number of responding improvement teams providing data for this measure</i>			

<b>HEC 16: Number and percentage of improvement teams that reported making improvements in the work-life of healthcare providers</b>	<b>n</b>	<b>N<sub>Respondents</sub></b>	<b>%Respondents</b>
	<b>143</b>	<b>153</b>	<b>93%</b>
<b>Program</b>			
LTC+ Acting on Pandemic Learning Together	120	129	93%
Advancing Frailty Care in the Community	8	8	100%
Safe Virtual Care	8	9	89%
Paramedics and Palliative Care: Bringing Vital Services to Canadians	7	7	100%
<i>Notes:</i> <i>n = Number and percentage of improvement teams that reported making improvements in the work-life of healthcare providers</i> <i>N<sub>Respondents</sub> = total number of responding improvement teams providing data for this measure</i>			

<b>HEC 17: Number and percent of improvement teams that reported further spreading their project beyond the original implementation site</b>	<b>n</b>	<b>N<sub>Respondents</sub></b>	<b>%Respondents</b>
	<b>60</b>	<b>83</b>	<b>72%</b>
<b>Program</b>			
LTC+ Acting on Pandemic Learning Together	41	49	84%
Safe Virtual Care	8	11	73%
Paramedics and Palliative Care: Bringing Vital Services to Canadians	6	7	86%
Advancing Frailty Care in the Community	5	16	31%
<b>Type of spread</b>			

# Appendix A – 2021-22 Performance Measurement Framework Report

Internal	7	18	39%
External	8	18	44%
Both	3	18	17%
<p><i>Notes:</i>  <i>n</i> = Number and percent of improvement teams that reported further spreading their project beyond the original implementation site  <i>N<sub>Respondents</sub></i> = total number of responding improvement teams providing data for this measure</p>			

HEC 18: Number and percent of improvement teams that reported the creation of new or updated/revised policies, standards, or guidelines resulting from their project	n	N <sub>Respondents</sub>	%Respondents
	148	188	79%
<b>Program</b>			
LTC+ Acting on Pandemic Learning Together	117	148	79%
Advancing Frailty Care in the Community	13	15	87%
Safe Virtual Care	11	18	61%
Paramedics and Palliative Care: Bringing Vital Services to Canadians	7	7	100%
<b>System-level change</b>			
Facility/Organization	140	159	88%
Immediate Setting/Unit	11	159	7%
Health Region/Authority	9	159	6%
Province/Territory	8	159	5%
Federal	0	159	0%
<p><i>Notes:</i>  <i>n</i> = Number and percent of improvement teams that reported the creation of new or updated/revised policies, standards or guidelines resulting from their project  <i>N<sub>Respondents</sub></i> = total number of responding improvement teams providing data for this measure</p>			

HEC 19: Number and percent of improvement teams that reported sustaining their project at least six months since the end of the collaborative	n	N <sub>Respondents</sub>	%Respondents
	4	23	17%
<b>Program and collaborative</b>			
OPUS-AP Phase 2	4	23	17%
<p><i>Notes:</i>  <i>n</i> = Number and percent of improvement teams that reported sustaining their project at least six months since the end of the collaborative  <i>N<sub>Respondents</sub></i> = total number of responding improvement teams providing data for this measure</p>			