# Developing a Required Organizational Practice (ROP) Audit Program at Humber **River Hospital (HRH)**



Akhil Plathanathu BHS; Janice Yu RN, BScN, MN; Simrat Jassal RN, BScN, MN(c); Amanpreet Ghuman RN, MScN; Jennifer Yoon RN, BScN, MSc (QI/PS), PhD Student; Fiona Ferrao BHS; Karim Dhupalia BHS; Sadaf Atta BHS; Nijithaa Thavayogan BHS



### Lessons Learned

The ROP Audit Program is an effective tool in guiding leaders to promote quality of care through measuring operational performance and compliance with ROPs.

# Description

Healthcare services are routinely accredited against standards of excellence to assess service quality. Organizations accredited with exemplary standing must demonstrate 100% compliance with ROPs, which are essential practices that enhance patient safety and minimize risk. As HRH prepares for accreditation, an audit program was designed to measure ROP compliance and operational performance. The ROP Audit Program consists of tracers and an associated tracker:

Tracer questions were designed by reviewing ROPs and applying them to the local context. Staff would then be surveyed to determine ROP compliance.

Figure 1. Example of ROP Tracer. Questions included with each tracer are aligned with ROPs.

### Humber River Hospital

nediate feedback to the staff about what the correct response(s) if the response to the question results in "unmet" (i.e. if the

If you identify major gaps, please share the feedback with the Manager, Accreditation Team Leader or ROP Leader and staff.

TIP: If there is an incorrect response, encourage the person to say, "I do not know... BUT... this is what I would do to find the answer.

ACCREDITATION TEAM

ROP Lead:

arget: All clinical staff and Clinical mana-

QUESTION		1		2		3		4		5	COMMENTS
How are patients		Met		Met	0	Met		Met		Met	
assessed for the risk of											
pressure ulcers?		Not Met		Not Met		Not Met		Not Met		Not Met	
How often are patients		Met		Met		Met		Met	0	Met	
assessed for the risk of											
pressure ulcers?		Not Met		Not Met		Not Met		Not Met		Not Met	
What		Met	0	Met	0	Met	0	Met	0	Met	
education/training do											
you get on pressure		Not Met		Not Met		Not Met		Not Met		Not Met	
ulcer prevention?											
Hannala ann an dh			-		-		-		-		
How do we audit	۵	Met		Met		Met		Met		Met	
compliance to pressure											
ulcer prevention	۵	Not Met		Not Met		Not Met		Not Met		Not Met	
strategy? What are the											
results?		h.4.1	_		-		-	44.1	-	Mai	
What improvements	۵	Met		Met		Met		Met		Met	
have been made to the		Net Met		Man Man		Not Mart		No.6 Mark		NotMat	
pressure ulcer		Not Met		Not Met		Not Met		Not Met		Not Met	
prevention strategy?											
How well are they											
working?	0	Met		Met		Met	-	Met		Met	
What policies and	Ш	Met		wiet		Met		Met	"	wet	
procedures are there about prevention of	п	Not Met		Not Met		Not Met		Not Met		Not Met	
pressure ulcers? Can	٥	Not Met	U	Not Met		NOLIVIEL		NOT MEL		Notiviet	
you show me where											
they are?											
What are some	0	Met		Met		Met	<u> </u>	Met	-	Met	
validated risk	Ц	wiet		wiet		Met		wiet		Wet	
assessment scales for	۵	Not Met		Not Met		Not Met		Not Met		Not Met	
effective pressure ulcer	Ц	Not wet		Not Met		Not Met	1	Not wet		Notiviet	
prevention?											

Distribution of Responses (x out of x)							
80% met or more	4/5 out of 5						
50-79% met	3 out of 5						
Loce than 50% mot	$\Omega_{-2}$ out of 5						

- Based on tracer results, the ROP tracker allows leaders to analyze unit performance.

## **Actions Taken**

- ROPs were reviewed and 16 tracers were developed. Tracers were piloted to determine effectiveness in measuring ROP compliance.
- During the pilot, data was captured on tracer performance as well as ROP compliance. Data was then depicted in various methods to facilitate analysis.
- Audit program details were shared with organizational leaders.

### U-2 out of 5 % Compliance Total # of "100% met" or 1s x 100 = % Total # of tracers completed

### Figure 2. Distribution of Responses vs % Compliance.

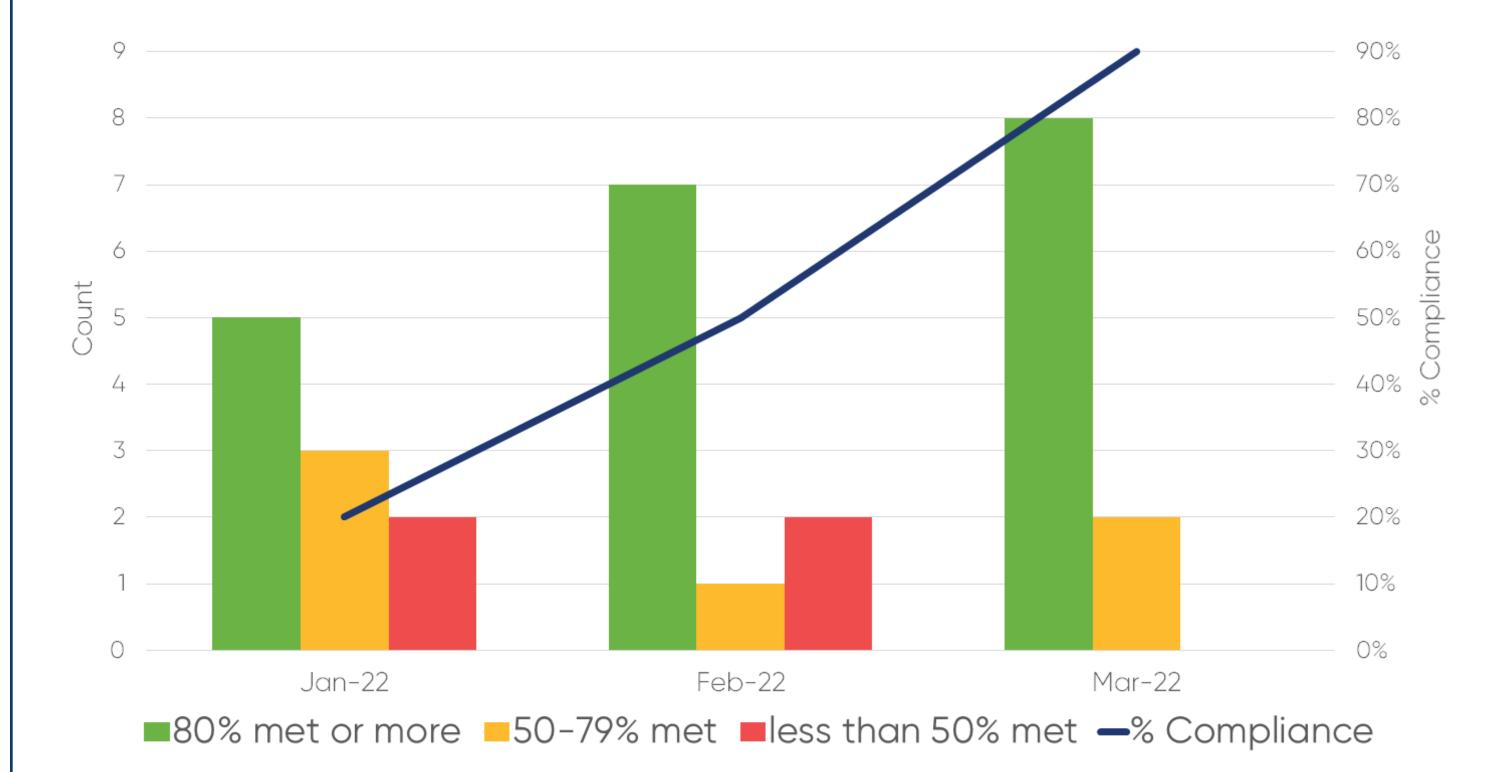
(Top) Tracer performance results are distributed based on scoring. Tracers scores greater than 80% are highlighted in green, tracer score between 50-79% are highlighted in yellow, and tracer score less than 50% are highlighted in red. This allows leaders to identify areas for improvement and/or assess the unit's current status.

(Bottom) However, ROP compliance is measured by correctly answering every question in a tracer. ROP Compliance is either categorized as "met" or "unmet". This is the scoring system used by accreditors, which provides staff with an accurate understanding of how they will be scored during accreditation.

**Tracer 8: Pressure Ulcer Prevention** 

### **Summary of Results**

Development of the audit program facilitated the effective capture of ROP compliance, and it was well-received organizationally. By utilizing tracers to measure staff performance and compliance, leaders are able to identify areas for improvement and tailor strategies to minimize gaps. As HRH works towards meeting 100% ROP compliance, it ensures that care delivery is safe and effective.



**Figure 3.** The ROP tracker depicts tracer performance and % ROP Compliance. Each bar is highlighted in green, yellow, or red, depending on the unit's tracer performance. % ROP Compliance is displayed as a percentage in grey to indicate whether compliance with ROPs have been achieved.