

EXPANSION OF THE REQUIRED ORGANIZATIONAL PRACTICES (ROP) AUDIT PROGRAM ACROSS THE ORGANIZATION

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DESCRIPTION

In preparation for the scheduled accreditation survey by Accreditation Canada in October 2023, Humber River Health (HRH) launched a ROP Audit Program in 2022. In January 2023, the scale of the program was expanded to audit ROP compliance among clinical and non-clinical staff. To facilitate this implementation, the Quality and Patient Safety team provided placement opportunities to 18 undergraduate students from various university healthcare programs. The students completed audits among HRH's staff members for three months. HRH's Accreditation preparation process was a collaborative effort between the student cohort, frontline staff, and the senior leadership team.



Figure 1. The student cohort from York University, Centennial College, and Toronto Metropolitan University (January – April 2023).

LESSONS LEARNED

Expanding the ROP Audit Program and involving leadership in the Accreditation preparation process improved ROP compliance rates at HRH.



OBJECTIVE

To implement an effective ROP compliance audit program across the hospital.

ACTIONS TAKEN

- In reference to the 32 ROPs, 16 clinical tracer practice templates were revised to include answer keys.
- From January to April 2023, the students (figure 1) performed tracer audits throughout HRH.
 - The data collected reflected the ROP compliance rates across the various units and programs.
- The audit results were presented to the senior leadership team monthly.
- Monthly meetings with unit leadership teams ensured that the gaps in compliance were addressed through the education to staff.

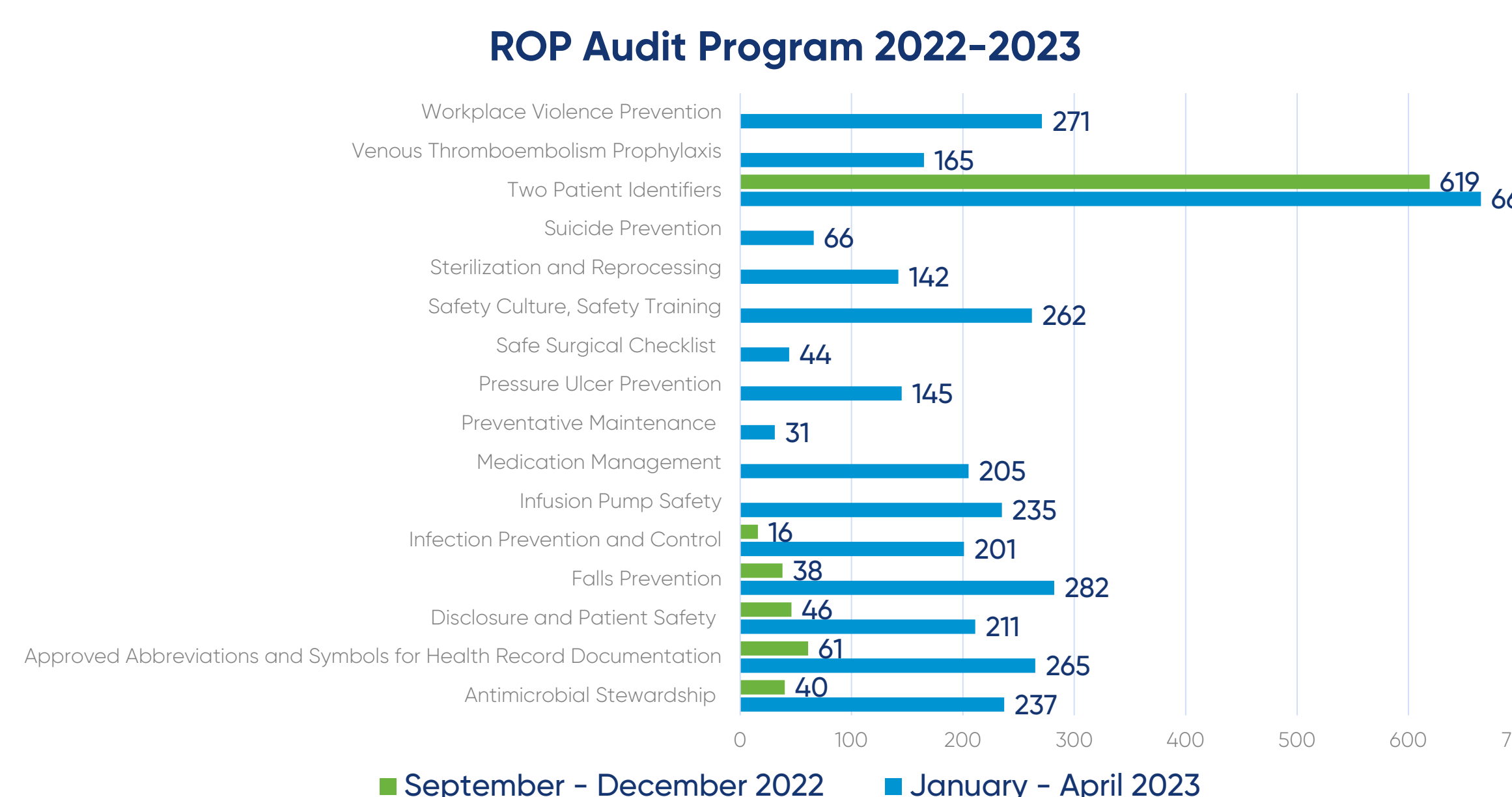


Figure 3. A comparison of total number of completed tracers for all ROPs between September – December 2022 (n=820) and January – April 2023 (n=3427).

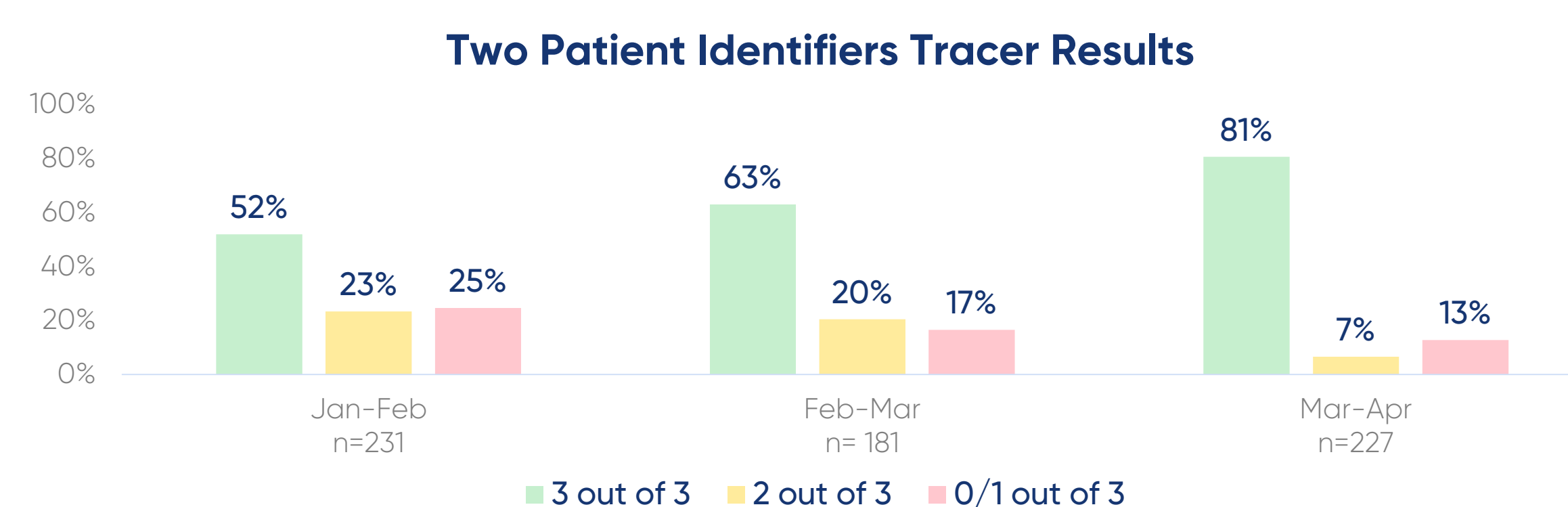


Figure 4. An example from the Two Patient Identifiers tracer results. This reflects a consistent improvement in compliance rates from January to April 2023.

QUESTION	1.	2.	3.	RESPONSE
Does HRH have a policy on Approved Abbreviations and Symbols for Health Record Documentation? Where can you find it?	<input type="checkbox"/> Met	<input type="checkbox"/> Met	<input type="checkbox"/> Met	Yes, "Approved Abbreviations and Symbols for Health Record Documentation Policy" (HR2607) found on number in HRM.
What is the Policy on use of abbreviations?	<input type="checkbox"/> Met	<input type="checkbox"/> Met	<input type="checkbox"/> Met	Approved Abbreviations and Symbols (HR2607): only abbreviations in the approved Abbreviations and Symbols list can be used for documentation otherwise all documentation is to be written in full. Abbreviations and symbols on "Do Not Use Dangerous Abbreviations and Symbols" list must not be used.
Can names of drugs be abbreviated?	<input type="checkbox"/> Met	<input type="checkbox"/> Met	<input type="checkbox"/> Met	Approved Abbreviations and Symbols (HR2607): No abbreviations of drug names are acceptable.
What do you do if you identify a "Do Not Use" abbreviation, symbol or dose designations?	<input type="checkbox"/> Met	<input type="checkbox"/> Met	<input type="checkbox"/> Met	Possible answer: notify colleague of use of abbreviation, if possible, flag unit leadership or CFI for correction and education.
How often are you educated on "Do Not Use" Abbreviations and Symbols? Where is this information located?	<input type="checkbox"/> Met	<input type="checkbox"/> Met	<input type="checkbox"/> Met	"Do not use" Abbreviations factsheet: during staff orientation, list is available in the patient chart and medication areas of each unit, staff advised of new changes as they come.
Who keeps track of updated abbreviations and symbols?	<input type="checkbox"/> Met	<input type="checkbox"/> Met	<input type="checkbox"/> Met	Approved Abbreviations and Symbols (HR2607): Inter-Disciplinary Professional Practices Committee.

Figure 2. An example of the revised Approved Abbreviations for Health Record Documentation tracer with revised answer key (based on ROP Do Not Use List of Abbreviations).

SUMMARY OF RESULTS

- Compared to when the ROP Audit Program first launched in 2022, 10 additional tracers with detailed answer keys were implemented (figure 2).
- Number of audits conducted displayed a positive trend, with 2607 more tracers completed in 2023 (figure 3).
- Education was tailored towards the needs of staff by ensuring leadership awareness about gaps in knowledge and practices, leading to improved compliance with ROPs as observed in the audit results (figure 4).