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INTERVENTION REPORT (EXCERPTS)

Intervention at Hôpital Anna-Laberge

Québec City, June 30, 2021

THE INTERVENTION

Several elements concerning the emergency room at Hôpital Anna-Laberge of Centre intégré de santé et de services sociaux (CISSS) de la Montérégie-Ouest were brought to the Québec Ombudsman's attention.

According to the allegations:

- The emergency room is frequently overcrowded;
 - The stretcher occupancy rate is frequently in the vicinity of 175 %, with spikes of more than 200%;
 - Such a situation affects the quality of care and services provided to users, as well as compromising their safety;
- A high proportion of users on emergency room stretchers are waiting to be hospitalized;
- Some of these people spend up to six days on a stretcher while waiting for a bed on a hospitalization unit.

Given the nature of the allegations and the risk of harm, the Québec Ombudsman decided to intervene. Its investigation began in November 2020.

CONCLUSION

From all the information collected by means of the investigation, the Québec Ombudsman discovered organizational tension, trouble mobilizing around promising actions or projects, and internal communication issues that hinder improvement efforts. It also concluded that the entire staff felt strongly about providing users with quality care and services.

Several projects, sectors, plans or measures were analyzed in the context of this investigation but without comment within this report. The Québec Ombudsman nonetheless highlights certain actions or processes underway:

- An increased slate of home-support services;
- An increased slate of residential services;
- Project to harmonize and develop new collective prescriptions for the institution (under the responsibility of Hôpital du Suroît);
- Work concerning re-direction of emergency-room service users.

The Québec Ombudsman urges the institution to continue the steps it is taking and feels that they, in tandem with implementation of the recommendations and the follow-up indicated in this report, will help to improve the situation at Hôpital Anna-Laberge.

RECOMMENDATIONS

The Québec Ombudsman is making the following recommendations to Centre intégré de santé et de services sociaux de la Montérégie-Ouest:

R-1 Ensure that there is no nurse understaffing at the emergency room of Hôpital Anna-Laberge during all work shifts, in particular to:

- Prevent staff movement between COVID-19 zones;
- Provide service users with the monitoring and care they require, including reassessments in accordance with CTAS timelines;
- Use collective prescriptions in a timely fashion;
- Allow users to be accompanied during transportation, without the emergency room being deprived of a resource as a result.

By October 29, 2021, show the Québec Ombudsman that the recommendation has been implemented and indicate the measures for achieving this goal.

R-2 Reintroduce or strengthen the presence of the following staff at the emergency room of Hôpital Anna-Laberge:

- Physical therapist;
- Nurse specialized in chronic obstructive pulmonary disease;
- Mental health liaison nurse;
- Support for elderly autonomy program worker;
- Respiratory therapist;
- Electrocardiography technician;
- Nursing assistant.

By October 29, 2021, provide the Québec Ombudsman with confirmation that these professionals have joined the emergency room team and indicate the measures for fostering their integration.

R-3 Ensure that the overflow unit in the basement of Hôpital Anna-Laberge has sufficient staff so that the unit can be operational when needed;

By October 29, 2021, show the Québec Ombudsman that the recommendation has been implemented and indicate the measures for achieving this goal.

R-4 Immediately reorganize the physical layout of the emergency room to:

- Make all permitted stretchers functional;
- Ensure that triage staff can see the service users;
- Comply with the physical distancing recommended for infection prevention and control measures against COVID-19;
- Have a number of stretchers equipped with heart monitors, that correspond to identified needs.

By October 29, 2021, let the Québec Ombudsman know who the in-house project manager will be and the timeframe for the work to be done, and, subsequently, send it quarterly progress reports.

R-5 Fill the following vacant positions: director of professional services and medical instruction; director of critical and specialized care program, and the corresponding assistant directors;

By October 29, 2021, provide the Québec Ombudsman with confirmation that these positions have been filled and sent it the directors' starting dates.

R-6 Strictly apply the plan to unclog the emergency room by insisting on the following elements:

- Discharges signed before 10 a.m.;
- Hospital beds freed up before 11 a.m.;
- Meetings of the admissions and discharge management teams leading to outcomes in terms of fluidity;
- Consultations in fewer than two hours;
- Questioning the relevance of consultations with specialists;
- Appeal to all physicians who are behind schedule;
- Presence of consulting physicians;
- Opening of overflow beds on care units.

By October 29, 2021, show the Québec Ombudsman the measures used so that the plan is strictly applied.

R-7 Ensure that the director of professional services or the director's representative has a clear mandate which the various players understand, so that action can occur should there be an impasse in applying the plan to unclog the emergency room;

By October 29, 2021, inform the Québec Ombudsman about the measures for achieving this goal.

R-8 Establish an action-support team for the emergency room according to emergency management guide requirements;

By October 29, 2021, let the Québec Ombudsman know who the action-support team members are, and sent it the Board of Director and Council of Physicians, Dentists and Pharmacists resolutions detailing the team's mandate and the meeting schedule for the coming year.

R-9 Reactivate the triage committee in compliance with the *Lignes directrices – Triage à l'urgence* document by the Ordre des infirmières et infirmiers du Québec;

By October 29, 2021, provide the Québec Ombudsman with confirmation that the committee has been reactivated and inform the Ombudsman about the meeting schedule for the coming year.

R-10 Supply the emergency room with computer tools for:

- Ensuring a uniform and secure record-keeping method;
- Assessing triage wait times;
- Identifying the service users whose clinical condition requires re-assessment;
- Locating, quickly and in real time, where users are in order to optimize the interprofessional committee's role in managing emergency-room patient flow.

By October 29, 2021, inform the Québec Ombudsman about the computer tools chosen and the timeline for their deployment.

R-11 Develop a mechanism for monitoring time-to-physician at the emergency room in order to know the average delay between a consultation request and the response from the consulting physician, and between the physician's response and decision-making;

By January 31, 2022, inform the Québec Ombudsman about the monitoring mechanism developed, send it the data about the average delays by period, and inform it about any measures for improving the situation.

R-12 Develop and distribute an emergency room consultation policy aimed at defining the responsibilities of the emergency physician and the consultant (delays and decision-making method);

By January 31, 2022, send the Québec Ombudsman a copy of the adopted policy.

R-13 Develop a mechanism for monitoring admission wait times in order to know the average delay between the admission request and assignment of a bed, and between assignment of a bed and departure for the unit, by care unit;

By January 31, 2022, inform the Québec Ombudsman about the monitoring mechanism developed, send it the information about the average wait times by period, and inform it of about any measures to improve the situation.

R-14 Structure the admission process by including decision-support tools and a case-management process that extends beyond the profiles defined in the admission requirements;

By January 31, 2022, send the Québec Ombudsman a copy of the documents developed and distributed within the institution.

R-15 Revive the *Intercollaboration pour la fluidité de l'épisode de soins* project by involving the medical staff and ensuring that the *Guide de pratique clinique – Planification du congé des personnes âgées de 75 ans et plus ou présentant un profil gériatrique en milieu hospitalier* is implemented;

By October 29, 2021, let the Québec Ombudsman know who the project leader will be and send it a quarterly progress report including the data from the assessment of the indicators in the *A3 Objectifs et plan 2019-2020* document.

R-16 Determine the clinical trajectories that could be optimized or established to improve the fluidity of care episodes in the emergency room;

By October 29, 2021, inform the Québec Ombudsman about the trajectories concerned and by January 31, 2022, provide it with confirmation of their optimization or introduction.

In accordance with the provisions of the *Act respecting the Health and Social Services Ombudsman* (CQLR, c. P-31.1), within 30 days of receiving this report, the institution must inform the Québec Ombudsman of whether it intends to implement the recommendations made to it, or of its reasons if it has decided not to act on them.

To ensure that the institution has the support, resources and supervision needed to remedy the situation, the Québec Ombudsman is also making the following recommendations to the Ministère de la Santé et des Services sociaux:

R-17 Analyze the institution's requests contained in the *Plan d'action à court et moyen terme – Enjeux de main d'œuvre critique en milieux hospitaliers*, including:

- Giving the institution priority for the program for recruiting nurses qualified outside of Québec;
- Convergence of resources from other network institutions towards Centre intégré de santé et de services sociaux de la Montérégie-Ouest.

By October 29, 2021, send the Québec Ombudsman the results of the analyses carried out.

R-18 Review the ambulance quotas with all partners concerned of the Montérégie-Ouest region neighbouring regions;

By October 29, 2021, send the Québec Ombudsman the results of this review.

The Québec Ombudsman is asking the Ministère de la Santé et des Services sociaux to, within 30 days of receiving this report, inform it of whether it intends to implement the recommendations made to it, or of its reasons if it has decided not to act on them.

The Québec Ombudsman is also asking Centre intégré de santé et de services sociaux de la Montérégie-Ouest to send it the following on a quarterly basis as of October 29, 2021:

S-1 Data on the situation at the emergency room at Hôpital Anna-Laberge:

- Percentage of outpatients who stay fewer than four hours;
- Average stay of service users on stretchers;
- Percentage of stays of more than 24 hours;
- Percentage of stays of more than 48 hours;
- Audits concerning re-assessments.

S-2 *Plan d'action à court et moyen terme — enjeux de main-d'œuvre critiques en milieux hospitaliers mis à jour.*

S-3 Progress of the modular complex project, including the technical and clinical structure of the in-house management project.

S-4 The statistics on alternative care service users, by variable.

S-5 The updated *Plan de contingence des urgences 2020-2021.*

Furthermore, the Québec Ombudsman is asking the Ministère de la Santé et des Services sociaux to send it the following information on a quarterly basis as of October 29, 2021:

S-6 The nature of monitoring and support at Centre intégré de santé et de services sociaux de la Montérégie-Ouest, including the minutes of meetings, reports further to visits, and the directives that it sent to the institution in order to improve the situation.



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