

Let's Make Healthy
Change Happen.



Quality Improvement Plan (QIP) Narrative for Health Care Organizations in Ontario



SickKids®

3/11/2026

This document is intended to provide health care organizations in Ontario with guidance as to how they can develop a Quality Improvement Plan. While much effort and care has gone into preparing this document, this document should not be relied on as legal advice and organizations should consult with their legal, governance and other relevant advisors as appropriate in preparing their quality improvement plans. Furthermore, organizations are free to design their own public quality improvement plans using alternative formats and contents, provided that they submit a version of their quality improvement plan to Health Quality Ontario (if required) in the format described herein.

ontario.ca/excellentcare

Overview

The Hospital for Sick Children (SickKids) has been changing the game for paediatric health care since it became the first children's hospital in Canada in 1875. Its mission is to provide the best in complex and specialized care; promote a culture centred around patient and family experience; pioneer scientific and clinical advancements; foster an academic environment that nurtures health-care professionals; and champion an accessible, comprehensive and sustainable child health system. In the latest ranking from *Newsweek*, SickKids was ranked the number one paediatric hospital in the world.

In 2025, SickKids celebrated 150 years of excellence in children's health, continuing to advance Precision Child Health (PCH), its groundbreaking movement to deliver individualized care, through the launch of its new five-year strategy, SickKids 2030. The strategy promises to enable individualized care that is equitable, efficient, patient-centred and safe. To elevate quality and care, our strategy includes embedding proactive safety and prediction to eliminate harm, and harmonizing physical, mental, and behavioural health.

Moving precision medicine from possibility towards practice for every patient and every family is closely linked to the responsible use of artificial intelligence to improve clinical care and research. SickKids is harnessing the transformative potential of AI through the creation of SickKids Artificial Intelligence (SKAI), a flagship initiative of SickKids 2030, designed to help improve clinical care, education, research and operations using AI systems, while ensuring that AI is used safely, ethically and effectively for the benefit of patients, families and staff.



Access and Flow

SickKids has prioritized improvement initiatives to ensure timely, appropriate care for the children and families we serve, focusing on both Emergency Department (ED) efficiency and surgical waitlist management.

In order to tackle sustainable and impactful change, key clinical teams have worked closely with the Enterprise Data & Analytics Office to complete a multi-variate analysis to better understand what contributes to extended lengths of stay for patients admitted through the Emergency Department. Based on this analysis, key improvement opportunities will be identified and piloted this year, enabling the identification of high-impact opportunities, such as reducing the length of stay for non-admitted, high-acuity patients and admitted patients. By investigating cases involving long-stay admissions in the ED, the organization is uncovering root causes that contribute to delays. Additionally, SickKids has improved the time to physician initial assessment by 12.2% year-over-year, by utilizing capacity-demand scheduling, deploying machine learning and AI tools & technology. The recent introduction of a dedicated emergency diagnostic imaging service has further streamlined patient assessment and care, enhancing overall ED flow. Patients are experiencing a 7.8% reduction in the time it takes to organize and ready an inpatient bed for their admission.

With respect to surgeries, SickKids achieved unprecedented reductions to the waitlist in the last year. Prior targets have focused on overall surgical waitlist reductions of 10%. This year we are specifically focusing on a 7.5% reduction to the Urology waitlist, as it has been the most challenging to address. To support this goal, new resources will be available in 2026, including an opportunity to transition select procedures to the renovated Minor Procedure Unit (MPU), which will optimize throughput and reduce bottlenecks when completed in 2026. Furthermore, increasing operating room access by diverting cases to the MPU is set to accelerate progress, ensuring that children receive the right surgical care in the right place and at the right time.



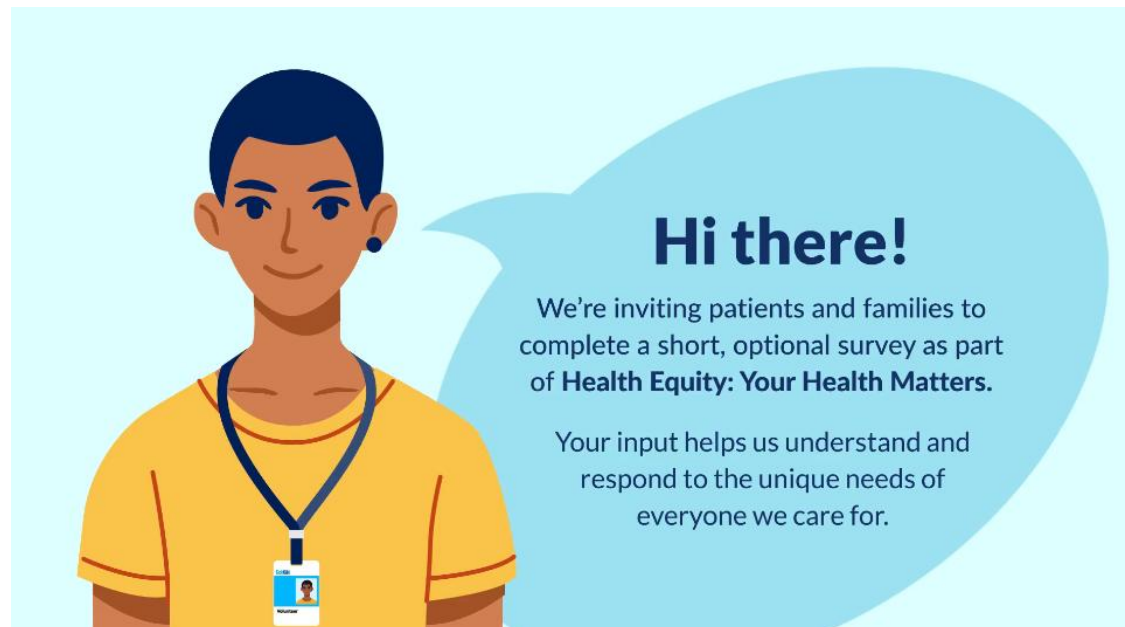
Equity and Indigenous Health

SickKids is committed to embedding health equity, Indigenous health, and equity, diversity and inclusion (EDI) across the organization. Guided by Ontario Health's Equity, Inclusion, Diversity and Anti-Racism Framework and the First Nations, Inuit, Métis, and Urban Indigenous Health Framework, we are working to foster a diverse and inclusive workplace, increase equitable access and delivery of care, and advance the provision of culturally safe care for Indigenous patients and families.

In the past year, the SickKids Office of Health Equity and Inclusion (OHEI) has been developing a renewed HEI strategy to align and advance these efforts. This strategy will launch in March 2026. In support of these efforts, a 2025 QIP goal was set to build leadership awareness and capacity to support these efforts, where 81% of people leaders completed three foundational EDI e-learning modules.

The renewed HEI strategy includes a distinct focus area on Indigenous Health. The Indigenous Health Program has identified strategic directions including enhancing cultural safety education, amplifying cultural support and spaces and building reciprocal partnerships. In 2025, a traditional Medicine Garden was opened on the Patient Support Centre rooftop and medicines have been harvested by the Indigenous Health Navigator with Indigenous patients and families.

SickKids also advanced its collection of patient/caregiver sociodemographic information with the implementation of the Health Equity Data Initiative (HEDI) in inpatient units. HEDI is now live across the Emergency Department, outpatient areas, and inpatient units. From October to December 2025, 26.9% of unique patients seen at SickKids had HEDI complete. The goal for 2026 is 35% of unique patients seen to have HEDI complete.



Hi there!

We're inviting patients and families to complete a short, optional survey as part of **Health Equity: Your Health Matters**.

Your input helps us understand and respond to the unique needs of everyone we care for.

Patient/Client/Resident Experience

Enhancing the quality of care by actively incorporating feedback from experience surveys and other sources into quality improvement activities is central to SickKids' Patient and Family Experience Strategy launched in 2024. Patient and family experiences provide valuable insights into the effectiveness of care, communication and support services. In addition to digital surveying of inpatients and outpatients, SickKids also uncovers insights about the patient and family experience through art-based activities, focus groups, interviews, and real-time feedback.

SickKids recently established the Office of Engagement, which is dedicated to ensuring that people with lived experience can drive meaningful change. Concurrently, the organization introduced a new Framework for Engagement, which builds on a long history of engaging patients, families and members of the community to drive improvement. Together we are working to make changes to the health system that reflect the lived experiences of those who use it.

SickKids plans to enhance data collection by expanding surveys to all outpatient clinics and implementing a short-form outpatient experience survey to increase the response rate to 28 per cent from 25 per cent. SickKids fosters a culture of continuous learning by regularly sharing feedback findings with frontline staff, leadership and quality committees, as well as patients and families about the actions taken in response to their input. This transparency encourages accountability and engagement at all levels.



Provider Experience

SickKids is actively implementing a range of innovative practices to enhance recruitment and retention, fostering a supportive and rewarding work environment. Its efforts have been recognized nationally, as it is consistently named one of Canada's Top 100 Employers. Frequently cited for its trailblazing Peer Support and Trauma Response program, a staff Wellness Centre open 24/7 and free of charge, and the healthy food options made in-house at The Terrace Café, SickKids attracts top talent while instilling pride in current staff. Joining the Healthcare of Ontario Pension Plan made SickKids an even more attractive place to build a lasting career.

In addition to competitive compensation and benefits, SickKids invests in the professional growth and well-being of its workforce. For example, the Nursing Optimization Strategy focuses on streamlining nursing roles, improving work-life balance and enabling nurses to practice to their full scope. These workforce improvements strengthen job satisfaction and support retention, with the added benefit of reducing burnout and contributing to consistent, high quality patient care.

In support of staff safety, the Prevention of Workplace Violence Program consists of clear policies, mandatory education and standardized response processes governed by Steering and Code White committees. Together with the new Family Caregiver Behaviour Escalation Policy, SickKids is emphasizing prevention, early-risk identification, and continuous learning to keep staff safe on the job.

Staff appreciation is also a cornerstone of SickKids' culture. Annual events, such as the Celebration of Excellence and staff barbecue, provide opportunities to recognize achievements, build camaraderie and celebrate success. Collectively, these initiatives reinforce a positive workplace culture, supporting the recruitment and retention of skilled health-care professionals at SickKids.



Safety

While the term “never events” is used in some jurisdictions to describe serious patient safety incidents, SickKids approaches safety through a broader, proactive framework focused on reducing preventable harm across the continuum of care. It’s operationalized through Caring Safely, our long-standing patient and staff safety strategy, which marked its 10th anniversary in 2025. Central to Caring Safely is fostering a culture of safety where all team members, from frontline staff to leadership, are empowered to identify risks and participate in continuous improvement initiatives.

A core pillar of Caring Safely is the prevention of hospital-acquired conditions (HACs) through the consistent implementation of evidence-based bundles of care and monitoring of adherence. One example is the prevention of central line-associated bloodstream infections (CLABSI), which has long been an area of focus at SickKids. In 2015, SickKids’ CLABSI rate exceeded the Solutions for Patient Safety (SPS) network benchmark; today, rates are comparable to SPS. This improvement has been achieved through strict adherence to central-line insertion and maintenance bundles, routine auditing, and a culture that emphasizes precision, accountability without blame, and continuous learning. In 2026, SickKids is targeting a rate of 0.95 per 1,000 line days, down from 1.05 the previous year.

Building on this foundation, SickKids is increasingly shifting from reactive harm reduction to proactive safety and prediction, which is part of the broader SickKids 2030 strategy. This approach focuses on anticipating and mitigating risk before harm occurs by understanding “work as done,” strengthening psychological safety, and equipping teams with tools to identify and address emerging threats. Through this evolution, Caring Safely reinforces the organization’s commitment to reducing preventable harm by designing safer systems rather than relying on event-based responses alone.



Palliative Care

SickKids integrates palliative care throughout the illness trajectory, from initial diagnosis through end-of-life care, ensuring that children with serious or life-limiting illnesses and their families receive comprehensive, compassionate support. When patients face a serious illness, health teams refer families to our Paediatric Advanced Care Team (PACT) for an additional layer of support. The team’s approach prioritizes optimizing quality of life, addressing not only medical needs but also emotional, social and spiritual well-being through the following activities:

- **Multidisciplinary care teams:** Dedicated multidisciplinary teams—including physicians, nurses, social workers, and child life specialists—collaborate to develop individualized care plans. These teams provide consistent support to patients and families, adapting interventions as needs evolve along the palliative care journey.
- **Symptom management and psychosocial support:** SickKids offers specialized symptom management programs to alleviate pain and distressing symptoms. Psychosocial support services, such as counseling and therapeutic activities, help children and families cope with the challenges of serious illness, promoting emotional resilience.
- **Advance care planning and end-of-life support:** Advance care planning discussions are initiated early and revisited regularly, empowering families to make informed decisions. End-of-life care focuses on comfort, dignity and honoring patient and family wishes, with bereavement support extending to care partners after loss.

SickKids' PACT model informed the development of Ontario's Pediatric Palliative Care Model. As a provincial leader in paediatric palliative care system design, SickKids continues to strengthen a responsive, equitable, and sustainable paediatric palliative care system for children and families across Ontario through ongoing evaluation, family feedback and partnerships with provincial and community organizations.



Population Health Management

SickKids has embraced population health management by collaborating closely with a variety of partners, both within Ontario Health Teams and across the broader health and social care sectors, to more effectively address the unique and evolving needs of children and families in the community. Here are a few examples of population health management initiatives spearheaded by SickKids:

- **The Surgical and Endoscopy Community Partnerships Program (SCP)**, co-led by SickKids and Ontario Health Toronto Region, aims to reduce wait times for paediatric surgical and endoscopy procedures at SickKids and facilitate timely access to high-quality paediatric surgical care for patients and families. In addition to the five community hospital partners, in September 2025 SickKids began referring Urology cases to Brightshores Health System (Owen Sound) and Kingston Health Sciences Centre to further support efforts to reduce delays in surgical care.
- **SickKids' Connected Care program** offers a range of services and partners across the continuum of care to coordinate, improve health and safety, spread standards of paediatric practice and deliver greater value across the health system. By integrating caregiver education, virtual support, coordination with Ontario Health at Home, and access to equipment and community resources, SickKids works to prevent unnecessary hospital visits while enhancing quality of care, promoting equity and elevating the patient and family experience.
- **Toronto Regional Maternal & Child Health Network** is hosted at SickKids and is one of six regional networks in Ontario established to improve health outcomes and health equity for perinatal, newborn and paediatric populations. A recent achievement is a partnership with SickKids' Sickle Cell team to develop a regional care model supporting the implementation of two new Satellite Clinics at Trillium Health Partners and Southlake Health.
- **The Virtual Urgent Care Hub** launched in 2025 at the Lawrence Allen Centre. This physical location aims to increase patient and family access to SickKids' Virtual Urgent Care service and other digital health resources. The Hub generated population health level impact primarily through intensive community engagement and targeted communication (e.g., print/digital materials shared at local schools, libraries, day cares) designed to build awareness, trust, and understanding of virtual urgent care within equity deserving neighbourhoods. This sustained, place-based approach reached families who were more likely to identify as visible minorities or newcomers, populations often under-represented in virtual care. Overall, VUC utilization increased by 172% in 2025, compared to 2024, for the target postal code.



Emergency Department Return Visit Quality Program (EDRVQP)

As an active participant in the Emergency Department Return Visit Quality Program (EDRVQP), SickKids remains deeply committed to advancing the quality and safety of emergency care for all patients. Through ongoing audit, reflection, and targeted improvement efforts, SickKids continuously seeks to align with the EDRVQP's mission of reducing preventable return visits and optimizing patient outcomes. The following are two examples of quality improvement initiatives resulting from audits:

- **Autism spectrum disorder (ASD):** The quality improvement initiative targeting the management of acute agitation in paediatric ED patients with ASD advanced significantly in the past year. Recognizing that neurodivergent youth, including those with ASD, are disproportionately likely to present to the ED and experience agitation due to environmental factors, a multidisciplinary team—including Emergency Medicine, Developmental Paediatrics and Psychiatry—collaborated to standardize care. The team developed a pathway to prevent behavioral escalation, categorize agitation severity, and guide first-line pharmacologic interventions. An associated order set was created and is under review for integration into the electronic medical record. Key performance indicators being tracked include Code White events, first-line medication use, order set utilization, and ED length of stay, reflecting a data-driven approach to ongoing improvement.
- **Sickle cell disease (SCD):** The current year's audit identified timely pain management in SCD patients as a priority. Data showed only 44% of patients received opioid analgesia within the recommended 60 minutes of ED arrival, and just 15% received intranasal fentanyl, a rapid and effective first-line agent, as their first opioid. In response, a multidisciplinary team is implementing targeted education, a standardized pain management pathway, order set modifications and app-based prompts to improve care. The initiative aims to increase timely opioid administration and reduce delays for second doses, while monitoring for unintended consequences such as increased length of stay, admissions, or return visits.



Executive Compensation

Executive Compensation Performance based compensation accounts for an additional 25% of the President and Chief Executive Officer's (CEO) annual base salary, 19% for the Executive Vice President (EVP) and 15% for Vice Presidents (VP)/Chiefs. 40% of the performance-based compensation is directly linked to achieving 100% of the selected QIP target in addition to financial and other operating targets of the institution. If the organization achieves 100% of the selected QIP target set out above, in addition to achieving the financial and operational targets, the percentages listed below are multiplied by each executive's base salary to determine the value of the performance-based compensation tied to the achievement of the QIP.

The following executive roles participate in the Executive Performance Incentive Program. Incentives are awarded based on the degree of achievement of the above performance targets:

- President and CEO 10%
- Executive Vice President 7.6%
- VP, Finance and CFO 6%
- VP and CIO 6%
- VP, Human Resources 6%
- Chief Medical Officer, and VP, Medical and Academic Affairs 6%
- VP, Clinical 6%
- VP, Clinical, and Chief, Professional Practice and Nursing 6%
- VP and Chief Legal and Risk Officer 6%
- VP, Planning, Development, and Transformation 6%
- VP, Health Equity and Inclusion 6%
- Chief of Surgery and Perioperative Services 6%
- Paediatrician-in-Chief 6%

Other

Remote Care Management: Enhancing patient experience and optimizing health system resources

SickKids is dedicated to pioneering innovative solutions that bring care closer to home. Advances in Remote Care Management (RCM) are further empowering patients and families while optimizing resources and reducing strain on the health care system. RCM uses technology to deliver high-quality care closer to home for the benefit of patients and families and the health system. It directly supports the SickKids 2030 Strategy by ensuring care extends beyond our hospital walls and is better integrated into patients' daily lives.

RCM supports children and families through structured, clinically guided care pathways delivered through MyChart, SickKids' online patient portal, allowing care teams to monitor symptoms, provide education and respond proactively. By partnering with families and enabling timely communication and data sharing, RCM aims to improve continuity, safety, and the patient and family experience while reducing reliance on paper-based processes and unnecessary hospital visits. Access to timely information, reminders, and symptom tracking tools in one place also enables patients and families to actively participate in and self-manage their care with more confidence.

To date, more than 660 patients have been enrolled in seven RCM programs that address a range of specialized paediatric care journeys, including peritoneal dialysis, congenital heart disease, oncology, weaning from a feeding tube, and living with a new ostomy. Thanks to the commitment of multiple teams – clinical champions, digital health experts, operational leaders and patient families themselves – SickKids is bringing care closer to home. This approach helps children receive the right care at the right time in the right place, while making more efficient use of health system resources.

Contact Information/Designated Lead

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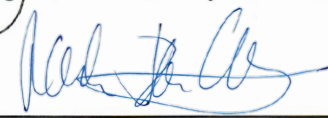
Sign-off

It is recommended that the following individuals review and sign-off on your organization's Quality Improvement Plan (where applicable):

I have reviewed and approved our organization's Quality Improvement Plan


Kathleen Taylor, Board Chair


Clara Angotti, Board Quality Committee Chair


Dr. Ronald Cohn, President and Chief Executive Officer