At Women’s College Hospital (WCH), we are determined to deliver the safest and highest quality patient care possible in an academic ambulatory setting. To guide us in this endeavor the Women’s College Hospital Quality and Safety Plan 2012-2016 has been developed. The plan details the key quality and safety strategies that we will undertake through to 2016.

We are working to simultaneously minimize unintended patient harm (safety), and ensure the quality of the service we provide is aligned with global best practices (quality). We recognize that errors occur in health care for a variety of reasons that have little to do with lack of good intention, knowledge or skill. At Women’s College Hospital we believe in a systems approach to prevent and modify the conditions that contribute to errors. Our culture of openly reporting errors and critically analyzing what went wrong for the purpose of improvement means that we can build standardized systems that will catch incidents before they lead to harm.

We are committed to clinical excellence, academic leadership and quality performance outcomes. The strategies outlined in this plan are intended to facilitate the best service to our patients and best clinical outcomes, in accordance with evidence-based research. The Quality and Safety Plan affirms WCH’s commitment to quality and safety and will assist in the promotion, co-ordination and leadership of quality and safety priorities throughout the organization. As an academic, ambulatory care hospital, Women’s College is engaged in a multitude of quality and safety initiatives to improve our services. This plan captures those initiatives and overviews their alignment with the broader corporate strategies.

The Quality and Safety Plan directs our focus on health for women, health system solutions, and complex chronic conditions and ensures alignment with our three strategic directions:

- drive the innovation agenda
- strengthen the capacity to lead from our mandate
- grow our academic impact

Within each of these corporate directions, we have identified key quality and safety strategic priorities, including: advancing a culture of quality and safety with just accountability, implementing solutions to prevent harm and advance quality of care, and adopting ambulatory safety practice as defined by the Institute for Healthcare Improvement (IHI). Accomplishing our quality and safety goals further requires rigorous adherence to the Excellent Care for All Act (ECFAA) and Accreditation Canada requirements.

The strategies and the goals that comprise this plan are available to the general public, staff, physicians, and volunteers of WCH. Many quality and safety activities are already underway and some initiatives simply represent a different and improved way of doing things. Strategies to reduce delays in first case OR start times, enhancement of surgical safety checklist procedures, and hand hygiene compliance represent key areas of focus that require continued investment. New initiatives to improve access to care such as the Refugee Clinic, the Virtual Ward, and the CACE Complex Care Clinic are being initiated. Quality and safety outcomes are monitored in our day-to-day work and reported on a quarterly basis to ensure progress of achievements across the organization.

This is an exciting, transitional time for Women’s College Hospital as we move into our new facilities and strive to revolutionize health care in an ambulatory setting. Through these times of great change, quality and safety remain integral priorities at Women’s College Hospital.
Women’s College Hospital sets leading standards for safe, quality care in an academic ambulatory environment. We provide valued, superior healthcare solutions outside of the inpatient environment, increase care and knowledge for women and prepare professionals to work in the health-care system of the future.

1 Agency for Healthcare Research and Quality. www.ahrq.gov/consumer/qnt/qntqlook.htm
The Quality and Safety Plan at Women’s College Hospital (WCH) is designed to align, support and promote the hospital’s mission, vision and values; our organizational strategic directions and focus areas; the Patient Safety Vision (See Appendix A); and the Quality and Patient Safety Framework.

Our Vision

A world leader in women’s health.
Canada’s pre-eminent academic ambulatory hospital.

Our Mission

We enhance the health and quality of life of all we serve.
We do research to improve women’s lives.
We empower our communities by exchanging knowledge.
We work in caring, interprofessional teams and educate others to do the same.

Our Values

We are guided by our values in everything we do.
Equity | Safety | Innovation | Relationships | Leadership | Collaboration
Women’s College Hospital’s mandate as ‘Ontario’s first and only independent academic ambulatory hospital with a primary focus on the health of women’ requires us to do things differently...to be exceptionally innovative. Our strategic plan articulates our goals and provides the context and vision to guide this journey. WCH has three primary foci. We are committed to health for women and the prevention and management of complex chronic conditions. We are also determined to develop health system solutions that go beyond traditional boundaries and borders.
Our strategic directions focus our efforts and our investments over the next four years. They are also foundational in our quality and safety improvement model – “Quality and Safety in Evolution.”

The three corporate strategic directions are:

1. Drive the innovation agenda

Goal: Achieve superior care, systems transitions, and integration.

By 2017: We will be a driving force of innovation leading system transitions and integration. Innovative, superior models of care, delivery, quality and patient safety will be core to our identity and actions. We will lead transformative, transferable, sustainable, system-oriented health-care solutions in integrated clinical care, education and research. As a valued system partner and a hub connecting health-care organizations, we will be a critical player in policy and funding development related to integrated ambulatory care, health for women and marginalized populations in Ontario.

2. Strengthen capacity to lead from our mandate

Goal: Strengthen leadership as Ontario’s first and only independent academic ambulatory hospital with a primary focus on the health of women.

By 2017: We will confidently exercise leadership in our mandate and be valued as a champion for system change and innovation. We will develop leaders who are experts in engaging staff, innovating solutions, and advancing the organizational strategy, and we will have a board that is characterized by its outstanding health-care governance practices.

3. Grow our academic impact

Goal: Enable academic leadership and expertise to advance health system solutions in our focus areas.

By 2017: We will be the national experts for women’s health and ambulatory care solutions and will have local, national and international impact in our focus areas, as demonstrated by innovative teaching, publications, and successful adoption of our work in quality measures, guidelines and policy. We will be a magnet for health professionals wanting to study, practice, and evaluate new concepts in our areas of focus.
Our Patient Safety Vision
At Women’s College our place, our people and our processes ensure a steadfast commitment to patient safety. In September 2008, the WCH board of directors commissioned the development of a Patient Safety Vision for the hospital (Appendix A). Four key themes integral to patient safety were identified through this initiative: community, culture, communication and care. The WCH Patient Safety Vision embodies elements that enable it to ‘live’ and be operationalized in our day-to-day functions as we continue to evolve as Canada’s pre-eminent academic ambulatory hospital and a world leader in women’s health. “Our place, our people, our processes ensure a steadfast commitment to patient safety.”

Our Quality and Safety Framework
Women’s College Hospital is committed to clinical excellence, academic leadership, and quality performance. We also recognize that patient care is the core of a high quality health care system and a necessary foundation for safe, effective, efficient, and equitable care. Our Quality and Safety Improvement Model —“Quality and Safety in Evolution” — considers Women’s College Hospital’s organizational strategic directions along with its core values. The model builds on the Institute for Healthcare Improvement’s quality drivers’ model by emphasizing our areas of focus. Advancing and integrating safe and high quality care and service delivery is considered a priority in everything that we do. WCH further incorporates healthy work environment as per requirements of the Excellent Care for All Act (ECFAA) under the strategic direction of “strengthen capacity to lead from our mandate.” Together, these elements drive WCH’s core business – to advance and advocate for the health of women and improve health-care options for all by researching, evaluating, teaching, disseminating and delivering new treatments and models of system-integrated care.

The Quality and Safety Framework focuses our quality and safety efforts at all levels and promotes monitoring and improvement of our quality and service over time. As a continuous improvement model the Quality and Safety Framework and plan will assist us to measure, monitor, and refine our efforts as we pursue the highest levels of quality care and patient safety.
Quality and Safety in Evolution

Quality and Safety in Evolution is a continuous quality improvement model that will guide our efforts to measure, monitor, and advance the highest quality care and service delivery to our patients.

Set Strategic Aims

Improvement starts with agreement on clearly understood aims. Our strategic quality and safety aims are:

1. **Deliver care and services through an enhanced culture of quality and safety.**

   By doing so, we will provide the best patient care and care transitions experiences while treating our patients with compassion and respect. The culture will support engaged reporting, incident/critical incident review and disclosure.

2. **Advance quality and safety practice and measures in ambulatory care.**

   We will build on our existing strengths and establish meaningful practice and measures to achieve best outcomes for patients in the ambulatory care environment.

3. **Identify and implement innovative quality process improvements and redesign.**

   By doing so, we will reduce inefficiencies and improve quality and timely delivery of services and care transitions.
The WCH’s strategic aims for quality and safety reflect our Quality Improvement Plan initiatives, Accreditation Canada’s Required Organizational Practices (Appendix B) and standards, and the key elements of ambulatory safety as defined by the Institute for Healthcare Improvement (IHI) (missed or delayed diagnosis; delay in proper treatment or preventive services; problems with medications: adverse drug events; and communication and information flow processes).

**Manage Local Improvement** – We will intentionally enable quality and safety by ensuring that the strategic aims and the work of the organization are aligned. This means that quality and safety aims must be integrated throughout our execution of the organizational strategic directions. Additionally, organization-wide systems are in place to minimize gaps and promote continuity and standardization of care and service. Support for our organization-wide systems include:

- Medical Advisory Committee (MAC), Nursing Advisory Committee (NAC)
- Quality Academic Committee
- Quality Excellence Committee
- Decision Support
- Risk Management and Patient Relations
- Hospital Ethics
- Infection Prevention and Control
- Joint Occupational Health and Safety Committee

By designing our systems toward quality and safety excellence, we can align and mobilize our care delivery, provide teams with the skills required for continuous improvement and hardwire improvement processes and best practice to ensure right care at the right time for all.

**Drive Organizational Commitment** – Everyone has a role to play in quality and safety to ensure that we are “doing the right thing, at the right time, in the right way, for the right person – and achieving the best possible outcomes.” We will accomplish this through mechanisms such as:

- a governance structure that actively promotes and monitors quality and safety
- a culture of quality and safety with just accountability
- a healthy workplace and engaged workforce
- quality and safety best practice tools such as policies and procedures, medical directives, preprinted physician orders, transfer of accountability, communication tools, and medication reconciliation.

**Quality and Safety Priorities**

Quality and safety are integral to becoming a world leader in academic, ambulatory care that improves healthcare options for all by researching, evaluating, teaching, disseminating and delivering new treatments and models of system-integrated care. Quality is achieved by providing the right care to the right patient by the right care provider at the right time. And safety is an integral aspect of quality.

Quality and safety are strongly embedded throughout our strategic plan and Women’s College Hospital insists on achieving superior quality in all that we do. Our strategic quality and safety aims provide further guidance for continuously improving the quality of care we provide our patients.

Key quality and safety aims, objectives and outcomes are outlined:
## Strategic Quality and Safety Aims, Objectives and Outcomes FY 2012-13

<table>
<thead>
<tr>
<th>Strategic Quality and Safety Aims</th>
<th>Objective</th>
<th>Process/Outcome</th>
<th>Target</th>
<th>Accountability Lead</th>
</tr>
</thead>
</table>
| 1. Identify and implement innovative quality process improvements and redesign | We will reduce inefficiencies and improve quality and timely delivery of services and care transitions. We will implement solutions to prevent harm and advance quality of care. | • Improve provider hand hygiene compliance  
• Improve procurement process  
• Ensure operational readiness to transfer to new facility within defined timelines  
  – monitor the status of the organizations operational preparedness as defined by the Integrated Work plan for transition to the new facility  
  – establishment and adoption of common patient registration and scheduling tools  
• Development of annual Quality Improvement Plan (QIP) | • Increase hand hygiene compliance to 88%, with the longer term goal of reaching 100%  
• Electronic requisitions should be turned around within 24 hours; paper requisitions within 72 hours.  
• Deliverables can be delivered to the targeted outcomes. By 3rd quarter: 100% on track to achieve operational readiness  
• Common processes and electronic tools in place by March 31, 2013  
• Compliance with April 1st submission deadline to Health Quality Ontario (HQO) for all | Jessica Ng  
Beverley Conquest  
Debbie Cock  
Kimberly Kennedy-Blackhall |
| 2. Deliver care and services through an enhanced culture of quality and safety | We will provide the best patient care and care transitions experiences, while treating our patients with compassion and respect. The culture will support engaged reporting, incident/critical incident review and disclosure. | • Improve wait time for special procedures for skin cancer  
• Improve patient satisfaction in the Mental Health population  
• Compliance with Excellent Care for All Act (ECFAA) requirements for implementation of employee satisfaction surveys to monitor safety culture  
• Compliance with Excellent Care for All Act (ECFAA) requirements for implementation of patient satisfaction surveys and Accreditation Canada standards and Required Organizational Practices (ROPs) pertaining to patient satisfaction  
• Compliance with all Accreditation Canada patient safety ROPs | • Improve squamous cell and basal cell wait times to less than 28 days for squamous cell and less than 84 days for basal cell  
• 75% of respondents will respond positively to the question “are clients being provided with information on how to reach staff”  
• Administer Patient Safety Culture survey in 2014/15  
• Revision of patient experience survey plan methodology for organization to include use of NRC Picker and in-house survey methodology. Shortening of NRC Picker standard questionnaire for 2014  
• 100% compliance with all Accreditation Canada ROPs by December 2013 survey dates | Johanna Amar  
Cris Barrett  
Kimberly Kennedy-Blackhall  
Kimberly Kennedy-Blackhall |
### Strategic Quality and Safety Aims, Objectives and Outcomes FY 2012-13

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<thead>
<tr>
<th>Strategic Quality and Safety Aims</th>
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<th>Process/Outcome</th>
<th>Target</th>
<th>Accountability Lead</th>
</tr>
</thead>
</table>
| 3. Advance quality and safety practice and measures in ambulatory care | We will build on our existing strengths and establish meaningful practice and measures to achieve best outcomes for patients in the ambulatory care environment. | • Reduce rates of complications associated with surgical care through use of the standardized surgical safety checklist  
• Improve operating room first case start time accuracy  
• Improve follow up of higher-risk surgical patients  
• Improve the identification, review, implementation and evaluation of recommendations for incidents/critical incidents | • 100% target as current performance as exceeds the Ontario Academic mean of 98.6%  
• 80% target as current performance as exceeds the Ontario Academic mean of 74%  
• 100% of patients identified as having undergone higher risk procedures will be called within 72 hours and we will speak personally to 70% of those patients  
• 100% of staff educated on patient safety/incident reporting and resolution follow up at orientation and 100% of all staff will complete patient safety e-learning module annually  
• 100% of administrators will have reporting centers in IRIS and education will occur on use of the system as needed  
• 3 month evaluation following critical incident review improvement strategies | • Vicki Noguera  
• Vicki Noguera  
• Nancy Groff  
• Kimberly Kennedy-Blackhall |
<table>
<thead>
<tr>
<th>Strategic Quality and Safety Aims</th>
<th>Objective</th>
<th>Process/Outcome</th>
<th>Target</th>
<th>Accountability Lead</th>
</tr>
</thead>
</table>
| **1. Identify and implement innovative quality process improvements and redesign** | We will reduce inefficiencies and improve quality and timely delivery of services and care transitions. We will implement solutions to prevent harm and advance quality of care. | • Improve provider hand hygiene compliance  
• Improve procurement process  
• Integration and implementation of an Ambulatory Electronic Patient Record  
• Development of annual Quality Improvement Plan (QIP) | • Increase hand hygiene compliance to 92%, with the longer term goal of reaching 100%  
• The percentage of e-requisitions divided by the total number of requisitions that are submitted through the procurement process will increase to 50%  
• Deliverables can be delivered to the targeted outcomes. By December 31, 2013 all integration requirements will be defined  
• Compliance with April 1st submission deadline to Health Quality Ontario (HQO) for all components of the QIP | • Jessica Ng  
• Beverley Conquest  
• Laura Viola  
• Kimberly Kennedy-Blackhall |
| **2. Deliver care and services through an enhanced culture of quality and safety** | We will provide the best patient care and care transitions experiences, while treating our patients with compassion and respect. The culture will support engaged reporting, incident/critical incident review and disclosure. | • Improve patient engagement in the Family Health Team  
• Monitor patient satisfaction during transition to the new facility  
• Compliance with Excellent Care for All Act (ECFAA) requirements for implementation of employee satisfaction surveys to monitor safety culture  
• Compliance with Excellent Care for All Act (ECFAA) requirements for implementation of patient satisfaction surveys and Accreditation Canada standards and Required Organizational Practices (ROPs) pertaining to patient satisfaction  
• Compliance with all Accreditation Canada patient safety ROPs | • Increase patient engagement in the FHT by involving them in providing hand hygiene compliance feedback. 78% of the survey cards distributed will be returned with feedback.  
• 75% of patients surveyed to determine their perception of their care during the transition will respond Excellent, Very Good or Good to the question, "Overall how would you rate the care and service you received at the hospital?"  
• Administer Patient Safety Culture survey in 2014/15  
• Revision of patient experience survey plan methodology for organization to include use of NRC Picker and in-house survey methodology. Shortening of NRC Picker standard questionnaire for 2014  
• 100% compliance with all Accreditation Canada ROPs by December 2013 survey dates | • Jennifer Dockery/Jessica Ng  
• Gillian Judkins  
• Kimberly Kennedy-Blackhall  
• Kimberly Kennedy-Blackhall  
  Gillian Judkins |
## Strategic Quality and Safety Aims, Objectives and Outcomes FY 2013-2014

<table>
<thead>
<tr>
<th>Strategic Quality and Safety Aims</th>
<th>Objective</th>
<th>Process/Outcome</th>
<th>Target</th>
<th>Accountability Lead</th>
</tr>
</thead>
</table>
| **3. Advance quality and safety practice and measures in ambulatory care** | We will build on our existing strengths and establish meaningful practice and measures to achieve best outcomes for patients in the ambulatory care environment. | • Implementation of an Antimicrobial Stewardship Program  
• Improve wait times in Specialized Medicine  
• Improve operating room first case start time accuracy  
• Compliance with TAHSN Research Qualifications | • 100% of patients who are having ACL reconstructions will receive their appropriate antibiotic therapy within 45 minutes prior to their first incision  
• 85% of our patient visits will meet a wait time benchmark of 20 minutes. Patients must have arrived on time for their appointment  
• 90% target as current performance as exceeds the Ontario Academic mean of 74%  
• 50% of all individuals listed on an active research ethics protocol will complete the “Responsible Conduct of Research” module and achieve a certificate of completion, indicating a satisfactory mark on all required courses.  
• 65% of all principal investigators leading/responsible for an active research ethics protocol will complete the “Responsible Conduct of Research” module and achieve a certificate of completion, indicating a satisfactory mark on all required courses.  
• 100% of staff educated on patient safety/incident reporting, implementation and evaluation of recommendations for incidents/critical incidents | • Vicki Noguera  
• Christine Gordon  
• Cris Barrett  
• Vicki Noguera  
• Katharine Schwartz  
• Kimberly Kennedy-Blackhall |
Accountability
The Canadian Patient Safety Institute defines the patient safety culture of an organization as the collective values, knowledge, skills, and commitment to safer patient care that is demonstrated by every member of the organization. At WCH, every person who works, learns or volunteers must act with an awareness of whether an action could harm a patient and understand what should be done to prevent or minimize that harm. The focus is preventing harm and minimizing the possibility of harm. WCH continues with many initiatives aimed at improving quality and providing safe care, among them:

- confidential reporting of incidents (Incident Reporting Information System (IRIS))
- quality review process (risk reviews and other critical review tools)
- implementation of applicable Safer Healthcare Now initiatives
- participation in the national hand washing campaign
- quality and safety – annual education requirements
- patient Safety Week
- patient safety brochure and posters

Quality and safety is the responsibility of each and every member of the WCH team. Administrative and medical staff leaders are responsible for fostering and promoting a culture of safety and learning that supports quality and safety work and for making quality and safety a strategic priority.

Implementation of the Plan
An action plan has been developed to accompany this document. The action plan identifies strategic objectives, goals and actions in greater detail.

Once approved by the senior leadership team and communicated to the board of directors, communication and dissemination of the Quality and Safety Plan will be a priority. It will be essential for physicians, directors, managers, supervisors and front-line clinical and non-clinical staff to understand and apply the information contained in the plan.

Evaluation of the Plan
The Quality and Safety Plan is a fluid document and will be reviewed on a quarterly basis for the status of action items. An annual review will be completed to update the status of each remaining or ongoing action item and revisions will be made as appropriate.

The WCH Balanced Scorecard and supplementary reports offer additional tools to monitor progress in strategy and performance. Each program/department uses balanced scorecard measures for decision-making and evaluation of performance improvements.

Quality improvement projects will be initiated in specific areas, utilizing evidence-based models for improvement such as: Plan, Do, Study, and Act (PDSA); Continuous Quality Improvement (CQI) or Lean methodology. The hospital supports these efforts through its standard quarterly reporting format.

Summary
The Quality and Safety Plan outlines the quality and safety framework and accountabilities for Women’s College Hospital. The plan is not a standalone document - it is supported by other documents and tools including the strategic plan, the balanced scorecard and numerous educational and research opportunities. The plan provides guidance for identifying priorities and measures of our achievements in service quality, care outcomes and risk mitigation. It is not intended to offer detailed procedures for designing or implementing quality and patient safety initiatives. This plan will be reviewed on an ongoing basis to ensure continued alignment with the vision, mission and strategic directions of Women’s College Hospital.

Most importantly, a plan such as this is supported by our people. It is our innovative, talented and dedicated staff and physicians that drive continuous improvements in quality, safety and care excellence at Women’s College Hospital.
### Patient safety vision

At Women’s College Hospital

**Our Place**  
Our People  
Our Processes

Ensure a steadfast commitment to Patient Safety

- **Our Place**...provides a welcoming and safe environment that is green
- **Our People**... show what it is to humanly care
- **Our Processes**... are accessible, adaptable, fluid and relevant

<table>
<thead>
<tr>
<th>Our Community...</th>
<th>Our Care...</th>
<th>Our Communication...</th>
<th>Our Culture...</th>
</tr>
</thead>
<tbody>
<tr>
<td>“is diligent”</td>
<td>“is accessible, timely and equitable”</td>
<td>“instills partnership”</td>
<td>“is compassionate”</td>
</tr>
<tr>
<td>“has established relationships”</td>
<td>“is highly efficient teams”</td>
<td>“is responsive and respectful”</td>
<td>“is just”</td>
</tr>
<tr>
<td>“is informed and informative”</td>
<td>“is knowledgeable professionals”</td>
<td>“listens generously”</td>
<td>“is engaged”</td>
</tr>
<tr>
<td>“is flexible and nimble”</td>
<td>“is patient/family-centred care”</td>
<td>“informs openly and comprehensively”</td>
<td>“is safe”</td>
</tr>
<tr>
<td>“leads innovatively in women’s health”</td>
<td>“is empathic, respectful and trustworthy”</td>
<td>“confirms understanding”</td>
<td>“is accountable”</td>
</tr>
<tr>
<td>“is academically vested in women’s health”</td>
<td>“is receptive, responsive and empowering”</td>
<td>“charts electronically”</td>
<td>“is respectful and collaborative”</td>
</tr>
<tr>
<td>“is focused on women’s health”</td>
<td>“instills patient confidence”</td>
<td>“converses diversely”</td>
<td>“is comfortable and open”</td>
</tr>
<tr>
<td>“is known for leading in women’s health”</td>
<td>“is grounded in excellence”</td>
<td>“respects privacy and confidentiality”</td>
<td>“is consistent”</td>
</tr>
</tbody>
</table>

### Safety Matters...It Takes All of Us!

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WOMEN’S COLLEGE HOSPITAL | QUALITY AND SAFETY PLAN 2012-2016
<table>
<thead>
<tr>
<th>Required Organizational Practices</th>
<th></th>
</tr>
</thead>
</table>
| **Safety Culture**               | • adverse events disclosure  
|                                  | • adverse events reporting  
|                                  | • client safety as a strategic priority  
|                                  | • client safety quarterly reports  
|                                  | • client safety-related prospective analysis  |
| **Communication**                | • client and family role in safety  
|                                  | • dangerous abbreviations  
|                                  | • information transfer  
|                                  | • medication reconciliation as an organizational priority  
|                                  | • medication reconciliation at admission  
|                                  | • mediations reconciliation at transfer or discharge  
|                                  | • safe surgery checklist  
|                                  | • two client identifiers  
|                                  | • verification processes for high-risk activities  |
| **Medication Use**               | • antimicrobial stewardship  
|                                  | • concentrated electrolytes  
|                                  | • heparin safety  
|                                  | • infusion pumps training  
|                                  | • medication concentrations  
|                                  | • narcotics safety  |
| **Worklife/Workforce**           | • client safety: education and training  
|                                  | • client safety plan  
|                                  | • client safety; roles and responsibilities  
|                                  | • preventive maintenance program  
|                                  | • workplace violence prevention  |
| **Infection Control**            | • hand-hygiene audit  
|                                  | • hand-hygine education and training  
|                                  | • infection control guidelines  
|                                  | • infection rates  
|                                  | • influenza vaccine  
|                                  | • pneumococcal vaccine  
|                                  | • sterilization processes  |
| **Risk Assessment**              | • falls prevention strategy  
|                                  | • home safety risk assessment  
|                                  | • pressure ulcer prevention  
|                                  | • suicide prevention  
|                                  | • venous thromboembolism (vte) prophylaxis  |