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## St. Mary's reports lowest death rate for all Canadian hospitals



Communications clerk Maly Moua (right) opens the discussion Thursday at the daily performance-improvement huddle at St. Mary's General Hospital.

Philip Walker/Record staff

WATERLOO REGION — St. Mary's General Hospital has the lowest death rate of all hospitals in Canada, and this area ranks among the country's safest for admitted patients.

"We get compared to them all and St. Mary's came out on top," said hospital president Don Shilton.

"I think the quality in this region is superb and we should be very proud."

This area ranks second in the province and fourth among health regions nationally in an annual quality of care measure by the Canadian Institute for Health Information, its latest report released Thursday.

The hospital standardized mortality ratio is the ratio of actual deaths compared to expected deaths in acute care hospitals, adjusted for differences in the types of patients a hospital treats.

The national average is 100. Anything below suggests there were fewer deaths than average.

St. Mary's scored 66 and Grand River Hospital's ratio is 82.

Cambridge Memorial Hospital is not reported separately because of the small patient numbers, but it is included in the regional rate.

The Waterloo Wellington Local Health Integration Network is 80. Guelph General Hospital is 82 for the reported period of 2011-2012.

All local hospitals and the health region have improved significantly since the data on admitted patients was first gathered in the 2004 fiscal year. (Numbers from past years have changed as the calculation was revised this year against the 2009/10 average.)

The region's mortality rate dropped steadily from 113 in 2007. St. Mary's was in the 12th spot nationally two years ago and last year was fifth.

Grand River realized big improvements in the past few years from highs of 127 and 129, climbing up from the bottom to the top quarter of large community hospitals.

"We've been working away on this for five years, improving each year," said Grand River chief executive officer Malcolm Maxwell. "We're pretty pleased."

Maxwell said it's helpful that the Kitchener hospitals share staff, and also improvements, and specializing in different programs allows the hospitals to provide excellent care.

"There's a lot of things they've helped us out on and vice versa," said Maxwell.

He said staff in each area of Grand River look for areas where improvements can be made and those add up to create a safer hospital. He wants to see a similar drop in next year's numbers as they continue on with changes.

"It takes time because it's a lot of small changes," Maxwell said.

Shilton agreed it is not a single change that makes the difference and there's always more that can be done.

"It's no one thing. It's always the sum total of many, many things," Shilton said.

St. Mary's employees are encouraged to identify obstacles to providing the best care, then come up with ideas on solutions that become standard if found to be helpful.

"It really drives a lot of improvement," said Shilton, adding that St. Mary's achieved more than 1,000 improvements last year.

He joined the daily huddle of all staff in the day surgery on Thursday morning to watch the team in action. Staff post ideas on a board, which are discussed, assigned to someone to look into and then the idea is followed up on a set day.

"Every day there's tons of new ideas," said nurse Laura Lee. "We always have something to work on."

Maxwell said the mortality ratio is helpful because there aren't many objective measures of overall hospital performance.

"It's one of the few tools we have," Maxwell said. "There's a lot of things patients want from us. Survival and a chance to go home is at the top of the list."

Across Canada, patient care and quality is improving, reflected in a decreasing mortality ratio of 16 per cent in participating hospitals outside of Quebec between this and last year's numbers, reports the Canadian Institute for Health Information. Of those 82 facilities, 42 were significantly below 100 and only four were significantly above.

This is the first year Quebec facilities have been included and the calculation method was adjusted for this year's report for a more accurate picture of hospital mortality in Canada.

The institute says the standardized mortality ratio is a tool that allows hospitals to measure and monitor their progress in quality of care with the goal of identifying areas for improvement.

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