Experience in Hospitals: Analysis of the 2026/27 QIP Submissions

This summary shares insights from the Experience section of the 132 Quality Improvement Plans (QIPs) submitted by hospitals for 2026/27.

Progress Report

Most common successes or enablers – information at discharge:

- Data monitoring through dashboards and reports
- Staff and leadership engagement
- Digital survey processes
- Standard work, processes, and checklists

Most common challenges or barriers – information at discharge:

- Low survey response rates limit available data
- Survey platform, HIS, or EMR challenges
- Inconsistent use of standardized processes

Workplan Performance

Progress on Optional Indicators

50 hospitals selected information at discharge (↓ 11)

70% of patients felt they received adequate information at discharge (↓ 2%)

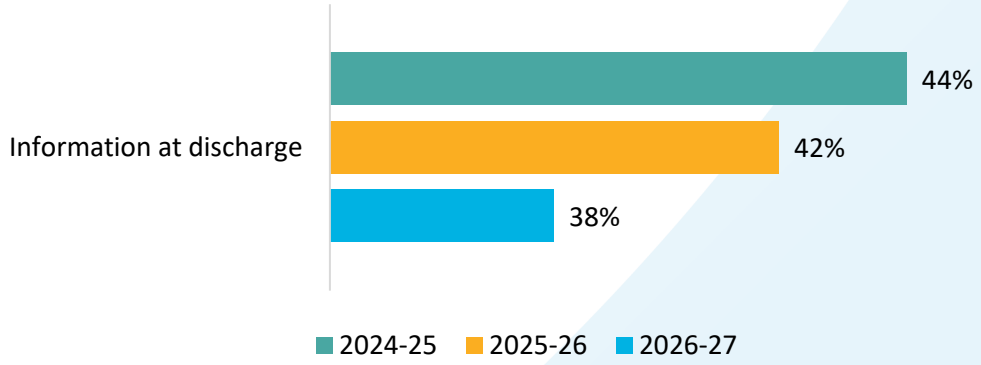
Regional Differences

80% Toronto region average, the highest regional result (↑ 15%)

62% Central region average, the lowest regional result (↓ 1%)

Indicator Uptake for 2026/27

% of Hospitals Selecting the Information at Discharge Indicator Year Over Year



Common Change Ideas: Information at Discharge

- Standard processes for discharge education (46%)
- Review survey results (41%)
- Documentation improvements (39%)
- Staff education and training (30%)

Narrative Report Themes

- 95% use patient experience surveys or feedback systems
- 66% partner with patients and families through PFACs or advisors
- 40% focus on discharge communication and transitions in care

To review the data and learn more about the QIPs submitted across the province, visit Query QIPs.

Abbreviations: ED, emergency department; EMR, electronic medical record; HIS, hospital information system; PFAC, patient and family advisory council.

Need this information in an accessible format? 1-877-280-8538, TTY 1-800-855-0511, info@OntarioHealth.ca. Document disponible en français en contactant info@OntarioHealth.ca

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