

# Moving Beyond Performance:

## Supporting Primary Care Improvement Efforts through Vascular Health Quality Improvement Toolkits



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## Background:

Across Ontario, there are variable high rates of vascular diseases and variation in the prevention and management of those diseases in primary care (PC). This is compounded by a lack of simple and standard point-of-care vascular health quality improvement (QI) resources that could augment current QI activity in primary care. The Ontario Vascular Health Primary Care Work Group (PCWG) was established in 2013 to improve the quality & access to a continuum of vascular services. The PCWG oversees development of practical patient-centred resources that support the implementation of vascular health best practices. Vascular Health QI Toolkits are being developed to augment QI activities in primary care.

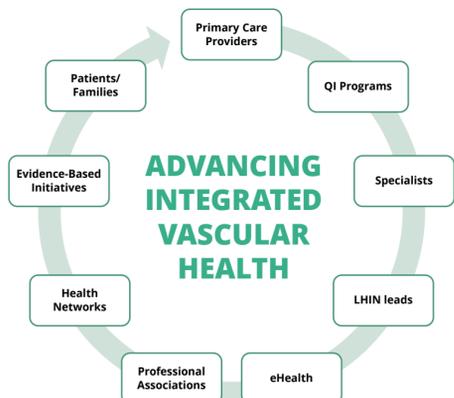


Figure 1: Primary Care Work Group Representation

## Methods:

The PCWG (Figure 1) developed foundational vascular health QI elements within a toolkit design. The Toolkits have been framed around patient engagement and feature key QI elements that can be contextualized to practices, teams, and patients. A survey (n=3) and focus group interviews (n=6) were conducted with PC providers to further understand feasibility, usefulness, and implementation ability of the Toolkits.

## Results:

Web-based QI Toolkits for hypertension (Figure 2), tobacco use, abdominal aortic aneurysm, & chronic kidney disease have been developed to date. Each Toolkit contains links to a VH QI companion.

AIM: Improve the screening, identification and management of hypertension for adult patients in primary healthcare teams in Ontario with a focus on patients at high risk for development of vascular diseases.

**REASON FOR THE EFFORT**

Hypertension is a major risk factor for mortality and vascular morbidity & is the highest ranking diagnostic category for drug expenditures in Canada.

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Imagine having access to information on patients in your practice/organization that facilitates identification of those whom would most benefit from interventions? Who would that patient be and how might the improvement change their care, experience, health journey, and their life?

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The impact on patient experience and clinical outcomes when processes are not in place or not working well becomes the improvement opportunity!



Click to view clinical examples.

**IMPROVING PROCESSES FOR PATIENTS**

QUALITY DIMENSIONS

Effectiveness; Population Health

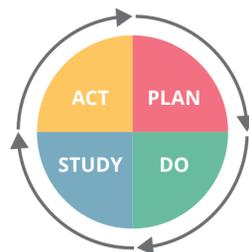
OUTCOME, PROCESS, & BALANCE MEASURES

Casting a Wide Net: **General Focus Measures** - Hypertension Screening & Identification of Adult Patients

AND/OR

Casting a Narrow Net: **High Risk Factor Focus Measures** - Hypertension Screening, Identification, & Management of Adult Patients

CHANGE IDEAS



View Ideas

**HYPERTENSION MANAGEMENT QI TOOLS**

Hypertension QI Plan Template

HYPERTENSION DIAGNOSTIC ALGORITHM:



Click to view CHEP Hypertension Diagnostic Algorithm



**HEALTHCARE PROVIDER RESOURCES**



**PATIENT/FAMILY RESOURCES**

Figure 2: Hypertension QI Toolkit

### EXAMPLES OF FEEDBACK:

“Easy to navigate; up-to-date, credible information; gives new aims to work on for QI.”  
 “Both Measures are relevant, i.e. general focus & high risk patients especially in primary care where we see all types of patients.”  
 “Why haven’t we implemented this by now? Have you shown this to anyone?”

Respondents commented on the user-friendly web-design and usefulness of the QI elements especially the sample measures, change ideas, & patient/provider resources. Feedback indicated the Toolkits could positively augment QI activities. Several comments highlighted that vascular health topics were not often identified for QI focus in PC due to other QI demands. Most reviewers would use the Toolkits if the data identified vascular health areas of focus which could be improved.

## Conclusions:

Positive feedback was received in relation to the usefulness and relevance of the patient-centred QI Toolkits with emphasis on the importance of moving from performance measurement to improvement. It is anticipated that simple QI initiatives can lead to effective and meaningful changes in practice management such as identification of high risk patients with record of blood pressure measurement or smoking status to target efforts.

### NEXT STEP:

- Add more vascular health topics
- Explore promotion via HQO’s Quorum Community of Practice



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