Focus the system on a common quality agenda

Catalyze Spread

Evaluate Progress

Build Evidence & Knowledge

Broker Improvement

Quality Improvement Plans, Year One: A Giant Step Forward

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Health Quality Ontario

Ontario
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Bonjour

Bem-vindos

स्वागतम्

Olá

مرحبا

Willkommen

欢迎光临

Dag

Kamusta

Bienvenido

Hola

你好

Hello

नमस्कार

Salve

Benvenuti

Welcome

Ласкаво просимо!

Вітаємо!

Mabuhay

Hallo

مرحباً

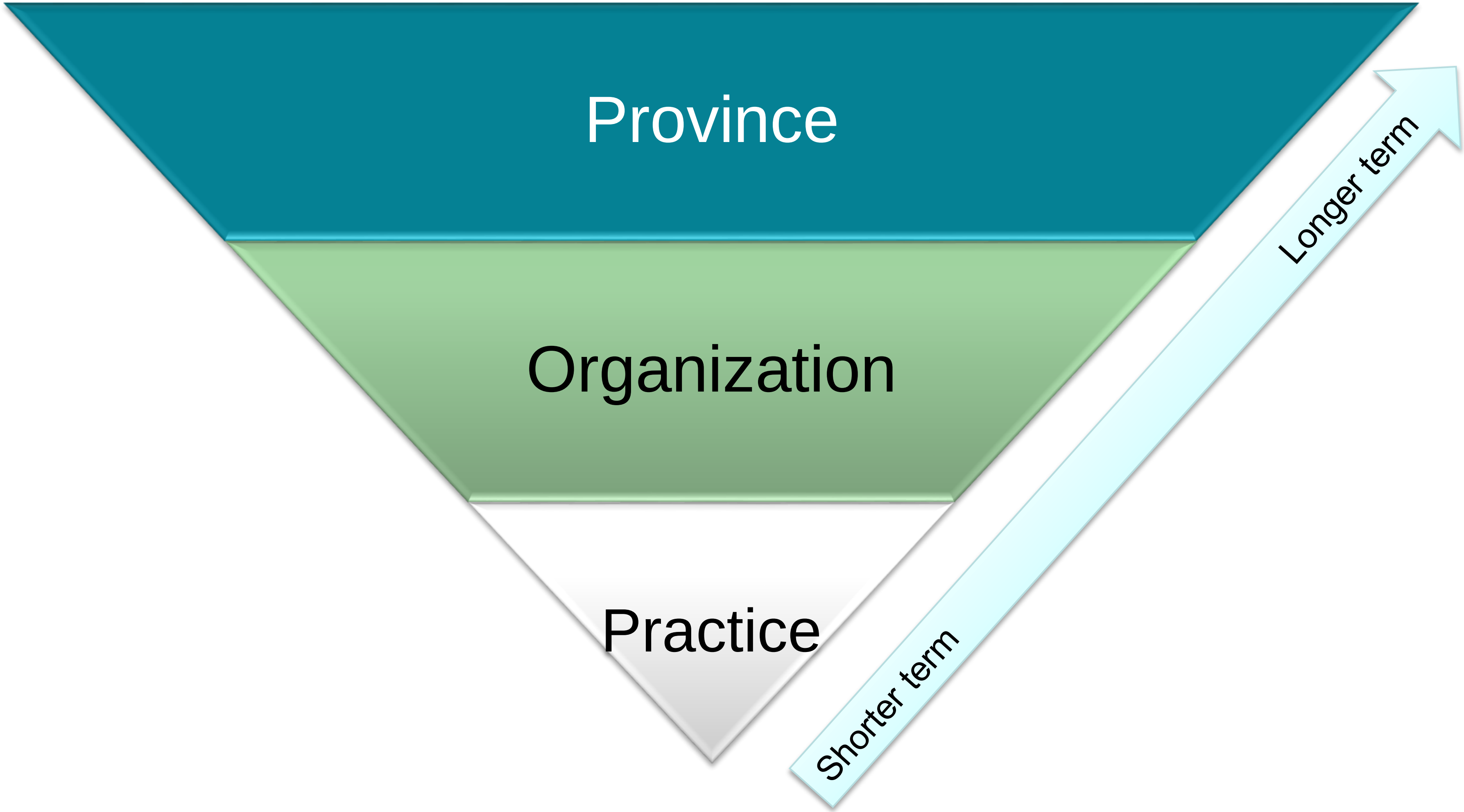
Welkom

Bienvenue

Objectives

1. Illustrate how QIPs can support both short and long term improvement planning
2. Share key observations from QIPs submitted by primary care organizations in 2013/14

QIPs as a Driver for Improvement Planning



Province

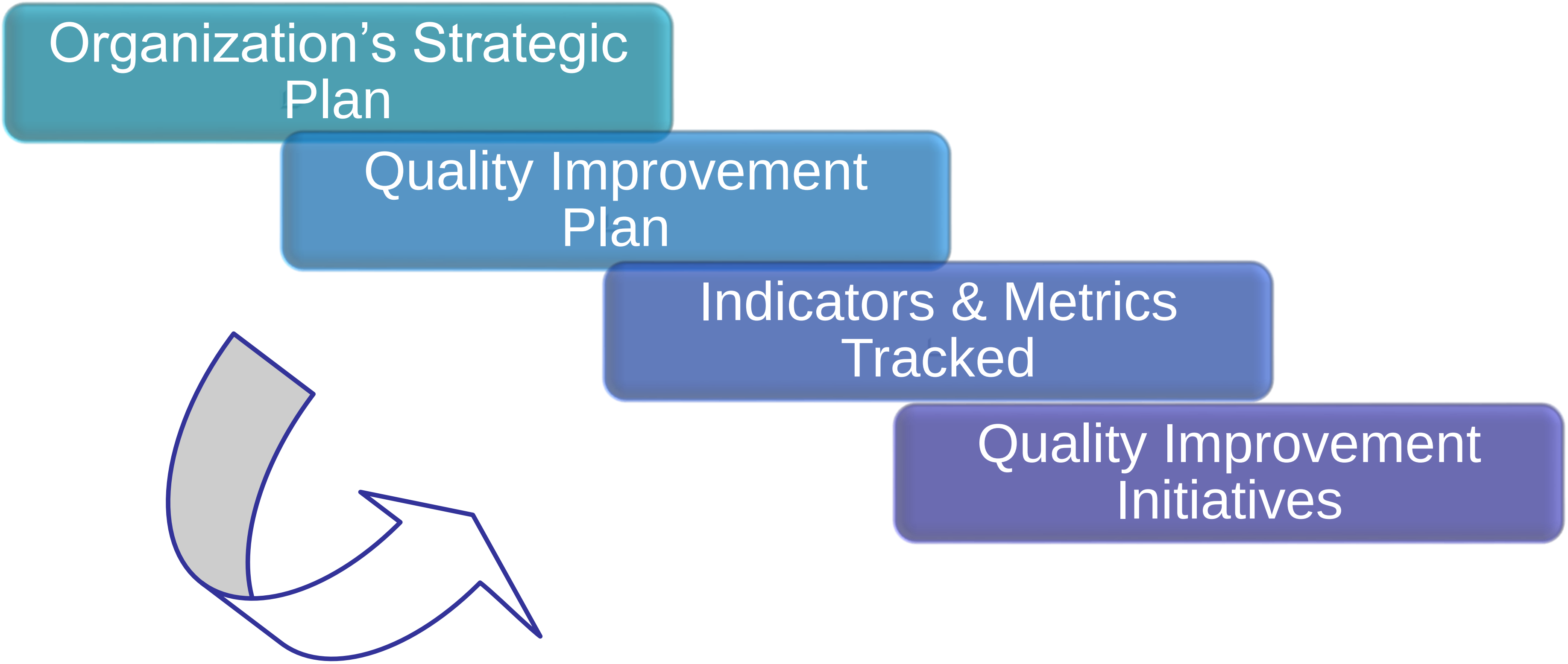
Organization

Practice

Longer term

Shorter term

Quality Improvement Planning in Primary Care Organizations



Organization’s Strategic Plan

Quality Improvement Plan

Indicators & Metrics Tracked

Quality Improvement Initiatives

http://www.health.gov.on.ca/en/pro/programs/ecfa/docs/qi_pri_guidance.pdf

2013/14 Primary Care QIP Submissions

- HQO received 295 QIPs from Ontario’s four primary care interprofessional team based models: Aboriginal Health Centres (AHACs), Community Health Centres (CHCs), Family Health Teams (FHTs), and Nurse Practitioner-Led Clinics (NPLCs).
- Three priority themes of quality care (access, integration and patient centredness) were recommended.
- Additionally, PC organizations focused on other quality themes including effectiveness and a focus on population health

Key Observations

1. PC organizations embraced the three recommended priority themes
2. Many organizations are collecting baseline data for the purposes of target setting in 2014/15
3. PC organizations are adopting surveying
4. Identifying good change ideas and linking them to process measures is a challenge.
5. Organizations faced challenges in collecting, organizing and interpreting data

Indicators & Survey Questions

Customization vs standardization

What is the right balance to strike so that the indicators and survey questions are relevant to the organization AND the data is comparable so we can demonstrate improvement?

Data Challenges

Observations	Suggestions
Many organizations did not have data to support the indicators	When electronic data is not available, consider tracking manually using PDSA cycles.
Difficult to obtain data	Integration data available at MOH
Many organizations set targets to establish baselines	

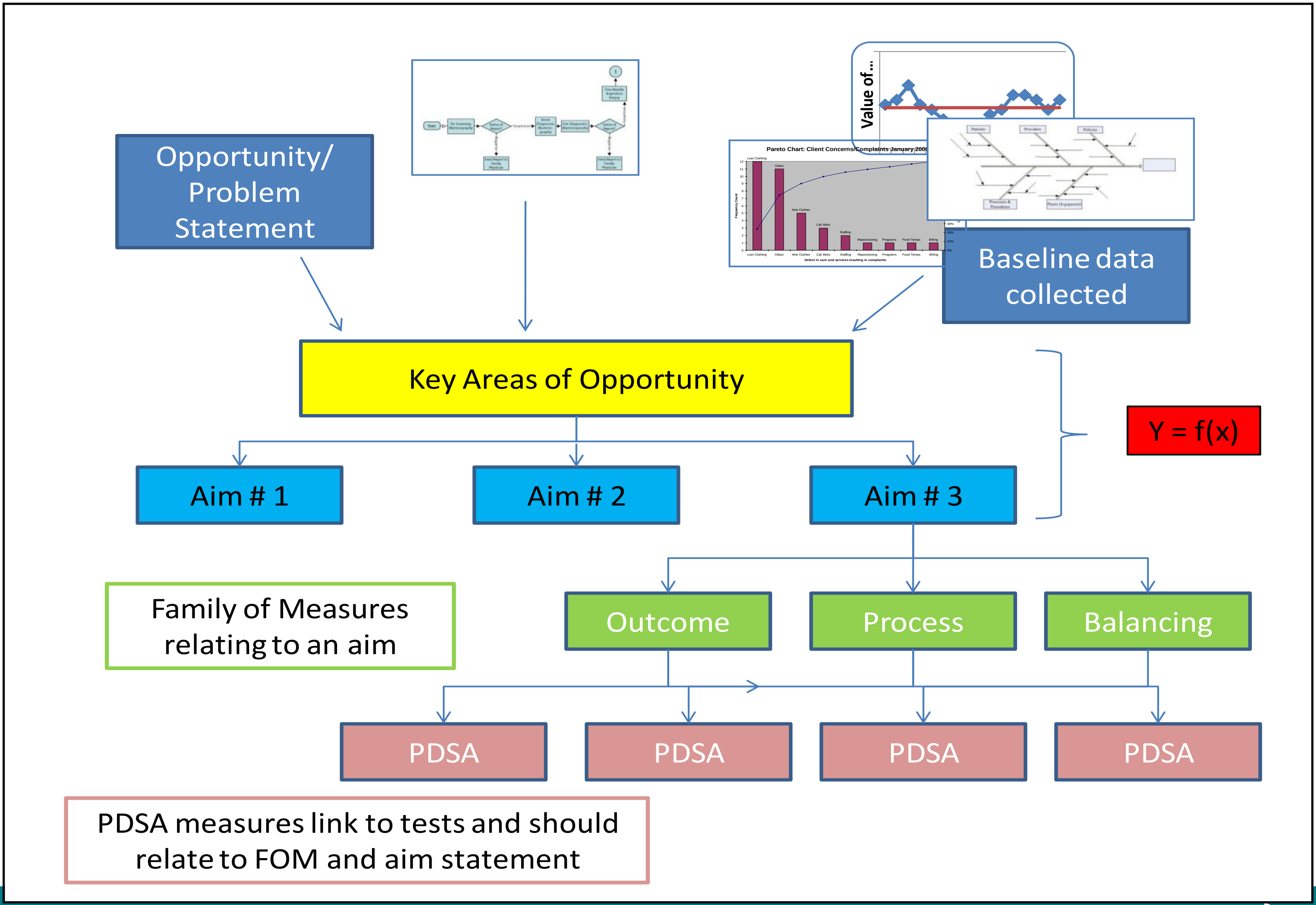
Change Ideas

Observations	Suggestions
Access & Patient Centered: many organizations' change ideas focused on the development of a survey	Access & Patient Centered: more robust change ideas can be created once surveys are implemented (electronic, mail, in person)- see the new AA&E program See transitions change package on hqontario.ca
Integrated: many organizations' change ideas focused on working with hospitals to identify patients discharged	

Process Measures

Observations	Suggestions
Many Process Measures must be measureable – often, they were not (e.g., “work with one local hospital”	Recommend using a percentage or number to measure the effectiveness of your change idea. • *Percent of admitted patients that were known at time of admission (#admissions known at admission/total patients admitted to hospital in same time period)*

Family of Measures


Value of…
Pareto Chart: Client Concerns/Complaints January 2009

Opportunity/ Problem Statement

Baseline data collected

Key Areas of Opportunity

Y = f(x)

Aim # 1

Aim # 2

Aim # 3

Family of Measures relating to an aim

Outcome

Process

Balancing

PDSA

PDSA

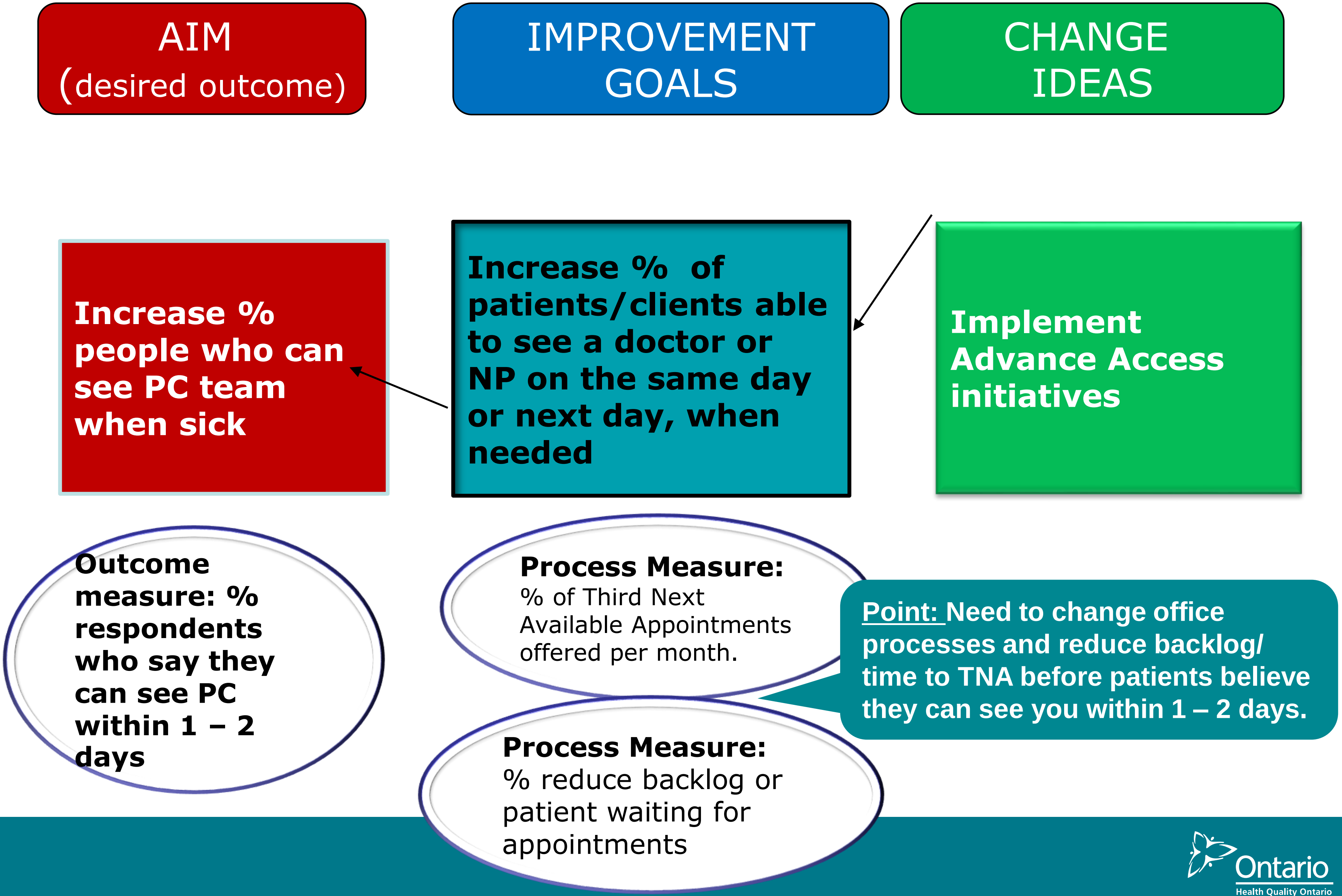
PDSA

PDSA

PDSA measures link to tests and should relate to FOM and aim statement

HQO. Residents First. 2011

PC Example- Tree Diagram



AIM
(desired outcome)

IMPROVEMENT GOALS

CHANGE IDEAS

Increase % people who can see PC team when sick

Increase % of patients/clients able to see a doctor or NP on the same day or next day, when needed

Implement Advance Access initiatives

Outcome measure: % respondents who say they can see PC within 1 – 2 days

Process Measure:
% of Third Next Available Appointments offered per month.

Process Measure:
% reduce backlog or patient waiting for appointments

Point: Need to change office processes and reduce backlog/ time to TNA before patients believe they can see you within 1 – 2 days.

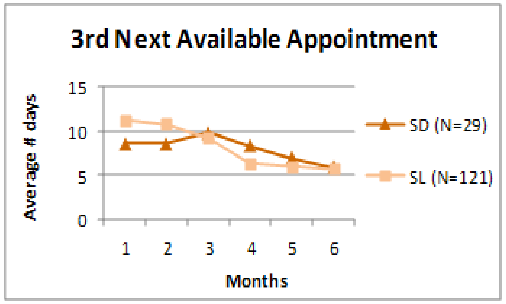
HQO SUPPORTS

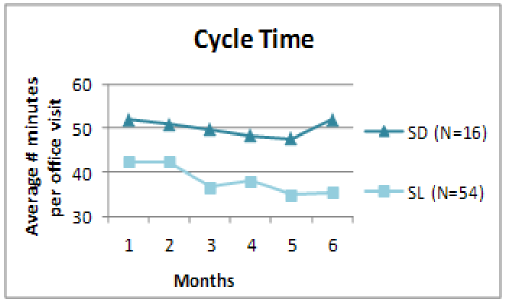
qip@hqontario.ca

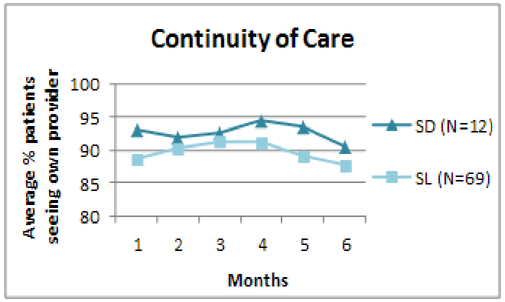
Access & Chronic Disease Management

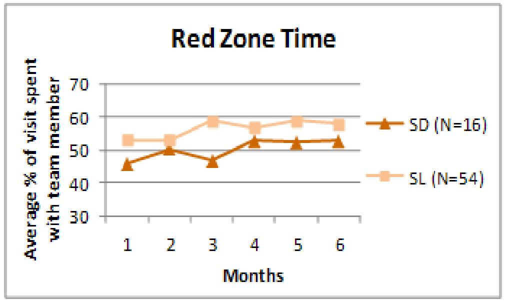
The benefits of improvements to access, efficiency and chronic disease management in Primary Care include:

- Improved office efficiency and patient flow
- Increased patient satisfaction
- Increased provider and staff satisfaction
- Improved ability to organize care processes and continuity of care


3rd Next Available Appointment

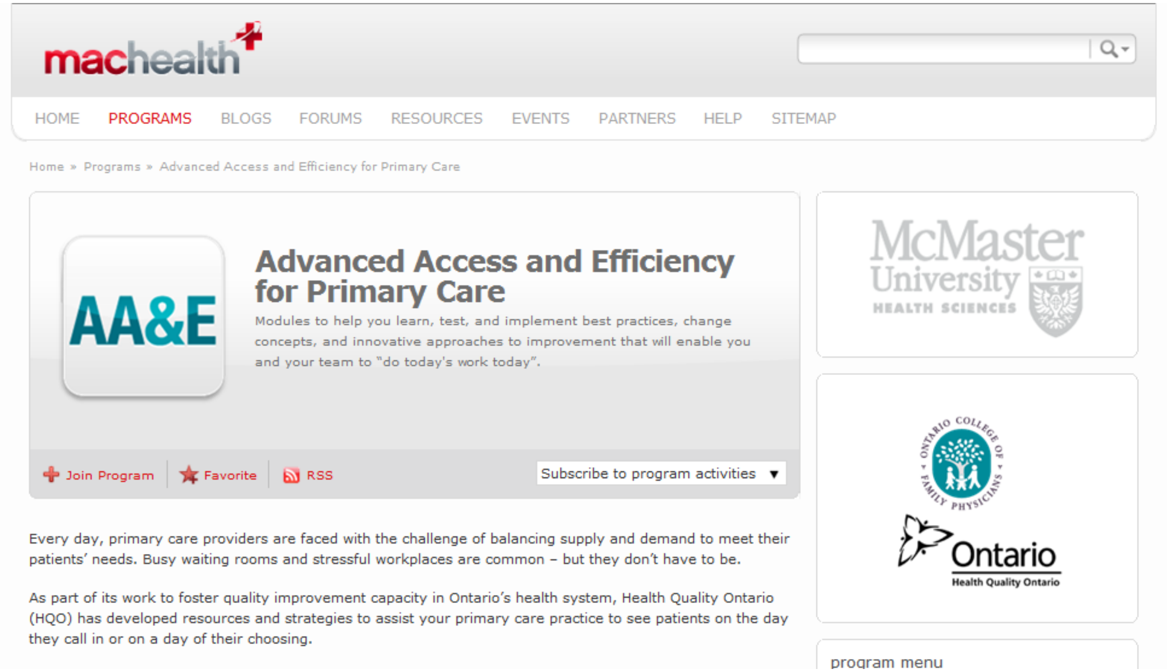

Cycle Time


Continuity of Care


Red Zone Time

E-learning Modules: advancedaccess.machealth.ca

An online series of accredited e-learning modules, resources, tools & virtual QI Coaching to guide teams through access and efficiency improvements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McMaster University HEALTH SCIENCES
ONTARIO COLLEGE OF FAMILY PHYSICIANS
Ontario
Health Quality Ontario
program menu

Advanced Access and Efficiency for Primary Care

Modules to help you learn, test, and implement best practices, change concepts, and innovative approaches to improvement that will enable you and your team to "do today's work today".

Every day, primary care providers are faced with the challenge of balancing supply and demand to meet their patients' needs. Busy waiting rooms and stressful workplaces are common – but they don't have to be.

As part of its work to foster quality improvement capacity in Ontario's health system, Health Quality Ontario (HQO) has developed resources and strategies to assist your primary care practice to see patients on the day they call in or on a day of their choosing.

HQO's New Primary Care Patient Experience Survey

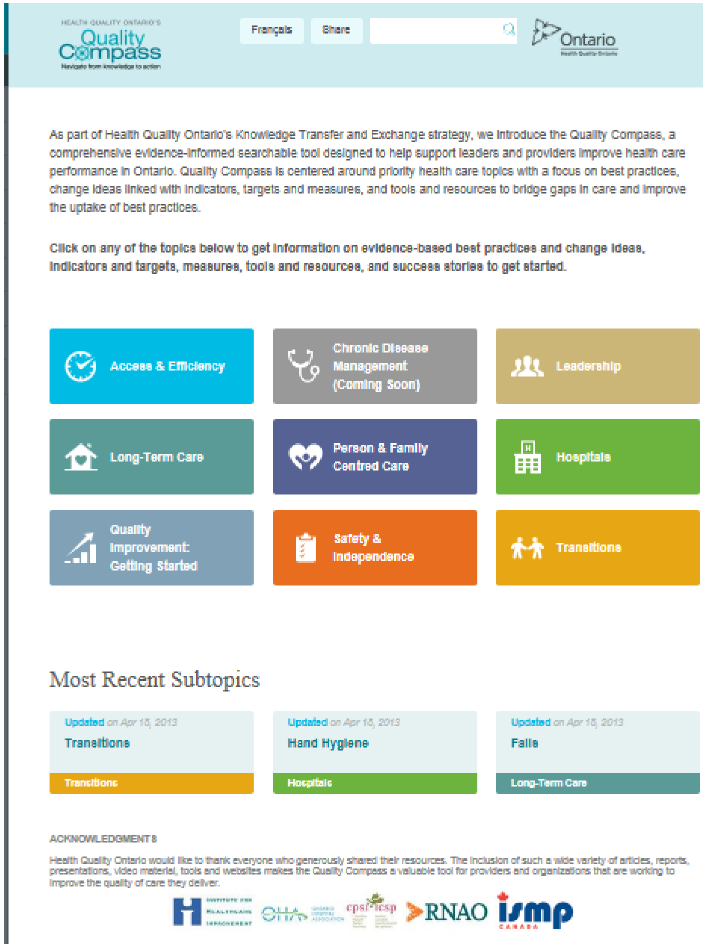
HQO is leading a project to identify a standardized survey tool and develop a standardized methodology that will be made available to all primary care practices.

Objectives:

- Content relevant to Ontario patients
- Actionable information for quality improvement
- Easy to use/administer
- Standardized for a minimum core set of survey questions
- Aligned where appropriate, to population level survey
- For more information contact: patientexperience@hqontario.ca

HQO Supports

- Individual Organizational Feedback Letters
- "QIP Conversations" Sessions for organizations available at this conference and many others
- Webinars
- Quality Compass
- QIP Navigator


HEALTH QUALITY ONTARIO'S
Quality Compass
Navigate from knowledge to action
Français
Share
Ontario
Access & Efficiency
Chronic Disease Management (Coming Soon)
Leadership
Long-Term Care
Person & Family Centred Care
Hospitals
Quality Improvement: Getting Started
Safety & Independence
Transitions

As part of Health Quality Ontario's Knowledge Transfer and Exchange strategy, we introduce the Quality Compass, a comprehensive evidence-informed searchable tool designed to help support leaders and providers improve health care performance in Ontario. Quality Compass is centered around priority health care topics with a focus on best practices, change ideas linked with indicators, targets and measures, and tools and resources to bridge gaps in care and improve the uptake of best practices.

Click on any of the topics below to get information on evidence-based best practices and change ideas, indicators and targets, measures, tools and resources, and success stories to get started.

Most Recent Subtopics

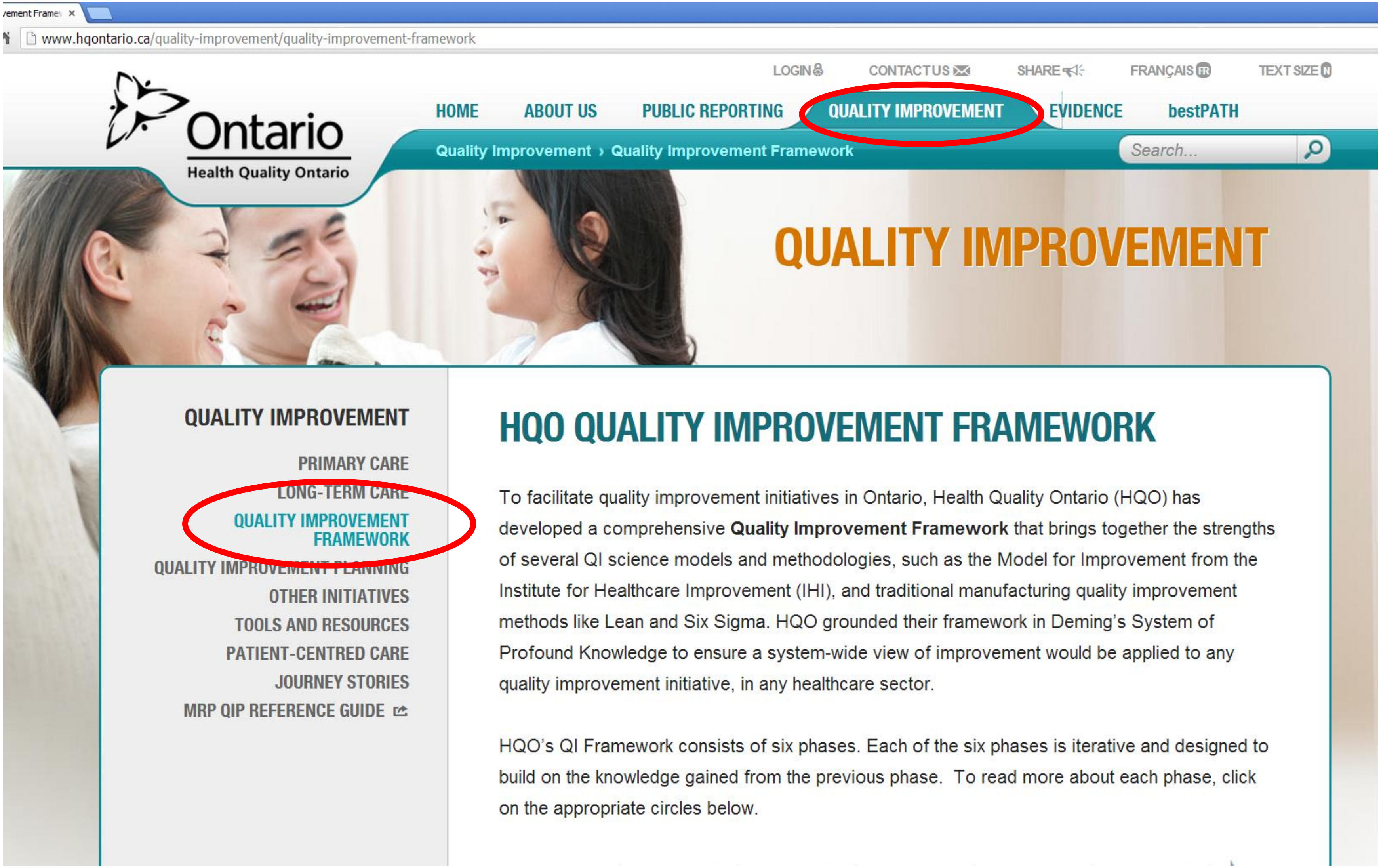
Updated on Apr 15, 2013
Transitions
Transitions

Updated on Apr 15, 2013
Hand Hygiene
Hospitals

Updated on Apr 15, 2013
Falls
Long-Term Care

ACKNOWLEDGMENTS

Health Quality Ontario would like to thank everyone who generously shared their resources. The inclusion of such a wide variety of articles, reports, presentations, video material, tools and websites makes the Quality Compass a valuable tool for providers and organizations that are working to improve the quality of care they deliver.


www.hqontario.ca/quality-improvement/quality-improvement-framework
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SHARE
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TEXT SIZE
Ontario
Health Quality Ontario
HOME
ABOUT US
PUBLIC REPORTING
QUALITY IMPROVEMENT
EVIDENCE
bestPATH
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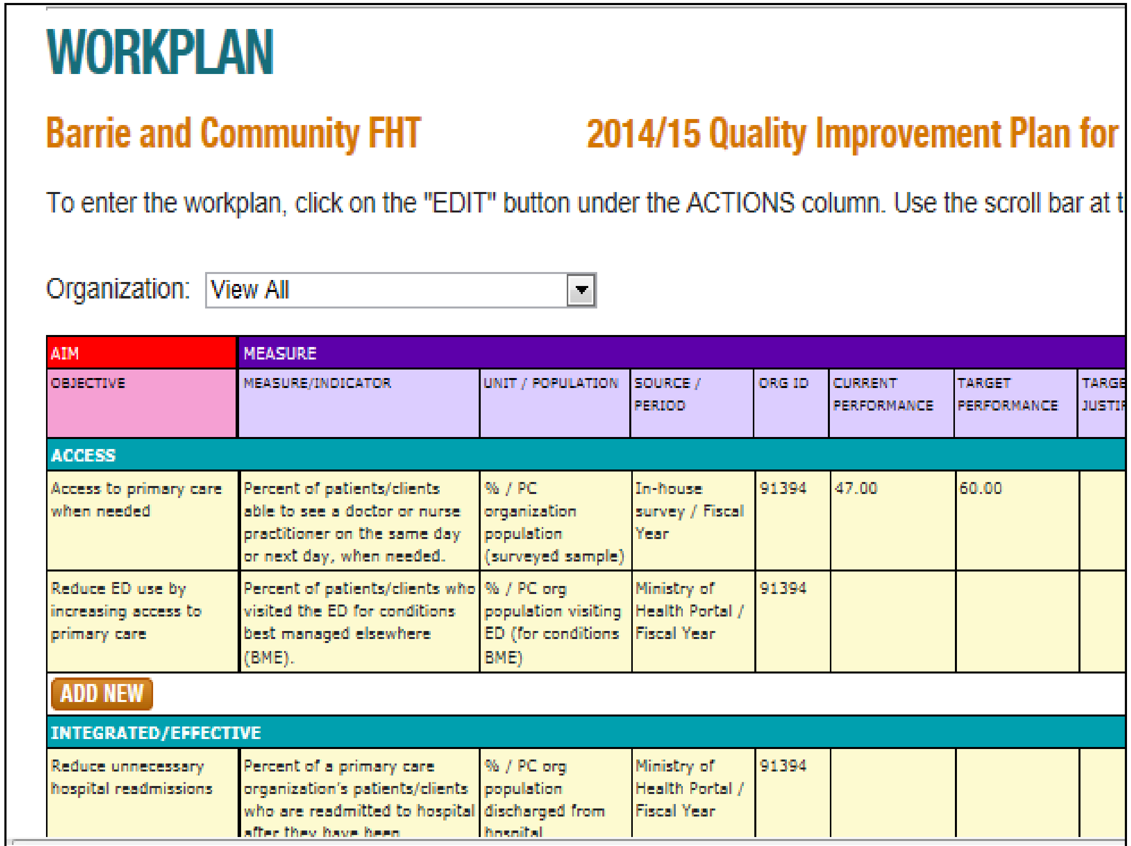
QUALITY IMPROVEMENT
PRIMARY CARE
LONG-TERM CARE
QUALITY IMPROVEMENT FRAMEWORK
QUALITY IMPROVEMENT PLANNING
OTHER INITIATIVES
TOOLS AND RESOURCES
PATIENT-CENTRED CARE
JOURNEY STORIES
MRP QIP REFERENCE GUIDE

HQO QUALITY IMPROVEMENT FRAMEWORK

To facilitate quality improvement initiatives in Ontario, Health Quality Ontario (HQO) has developed a comprehensive **Quality Improvement Framework** that brings together the strengths of several QI science models and methodologies, such as the Model for Improvement from the Institute for Healthcare Improvement (IHI), and traditional manufacturing quality improvement methods like Lean and Six Sigma. HQO grounded their framework in Deming's System of Profound Knowledge to ensure a system-wide view of improvement would be applied to any quality improvement initiative, in any healthcare sector.

HQO's QI Framework consists of six phases. Each of the six phases is iterative and designed to build on the knowledge gained from the previous phase. To read more about each phase, click on the appropriate circles below.

QIP Navigator



WORKPLAN

Barrie and Community FHT 2014/15 Quality Improvement Plan for

To enter the workplan, click on the "EDIT" button under the ACTIONS column. Use the scroll bar at t

Organization: View All ▾

AIM	MEASURE						
OBJECTIVE	MEASURE/INDICATOR	UNIT / POPULATION	SOURCE / PERIOD	ORG ID	CURRENT PERFORMANCE	TARGET PERFORMANCE	TARGE JUSTIF
ACCESS							
Access to primary care when needed	Percent of patients/clients able to see a doctor or nurse practitioner on the same day or next day, when needed.	% / PC organization population (surveyed sample)	In-house survey / Fiscal Year	91394	47.00	60.00	
Reduce ED use by increasing access to primary care	Percent of patients/clients who visited the ED for conditions best managed elsewhere (BME).	% / PC org population visiting ED (for conditions BME)	Ministry of Health Portal / Fiscal Year	91394			
ADD NEW							
INTEGRATED/EFFECTIVE							
Reduce unnecessary hospital readmissions	Percent of a primary care organization's patients/clients who are readmitted to hospital after they have been	% / PC org population discharged from hospital	Ministry of Health Portal / Fiscal Year	91394			

https://qipnavigator.hqontario.ca/PlanningArea/Workplan.aspx?SubmissionId=5394&SectorId=

Next Steps

1. QIP Navigator Demonstrations
   - AFHTO conference. Booth #38
   - HealthAchieve
   - *Health Quality Transformation 2013*
2. QIP Navigator Launch: November 29, 2013
3. QIP Guidance Materials: November/December
4. QIP Navigator training: December/January
5. HQO Webinar Supports for QIP development & submission: January – March 2014

Questions?

Ontario

Health Quality Ontario

For more information contact:

QIP@hqontario.ca