



## **Quality Improvement for Primary Care: An Introduction**

Alice Strachan, Health Quality Ontario



# Welcome and Introductions

## Presentation Team

Anne Speares  
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QIP and Capacity Building Specialist  
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Quality Improvement Coach  
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Alice Strachan  
Quality Improvement Coach  
Health Quality Ontario

# Learning Objectives

By the end of this session, participants will:

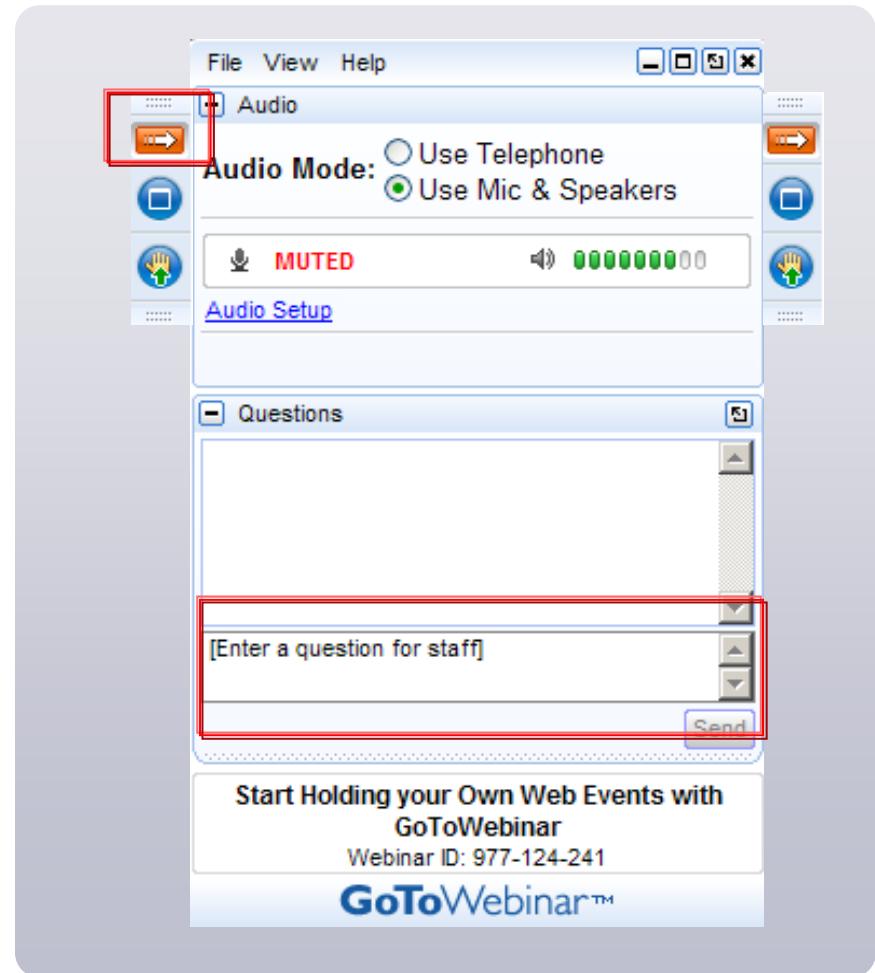
- Understand the fundamentals of the Model for Improvement
- Understand the importance of the Model for Improvement and the Quality Improvement Framework
- Understand who should be engaged in quality improvement planning in your organization

# Agenda

- Who should be involved in quality improvement?
- Ways to select organizational improvement priorities
- Overview of the Model for Improvement
- Plan-Do-Study-Act (PDSA) Cycles
- The link between the Model for Improvement and Quality Improvement Plans (QIPs)

# How to Participate

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- Please type any questions you may have into the question pane at the bottom of the control panel. If you ask a question and it is not answered, or if you would like more information following the webinar, please contact us at:  
[QIP@hqontario.ca](mailto:QIP@hqontario.ca)

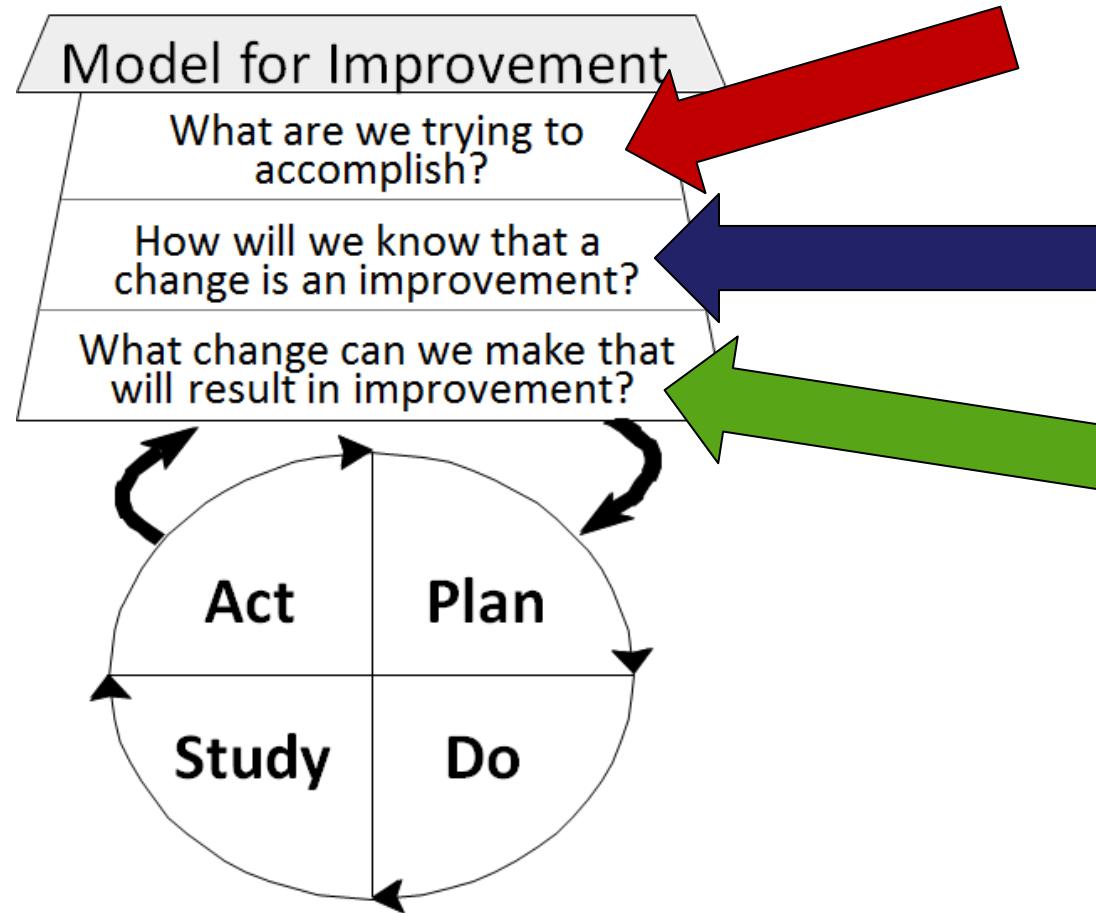


# Quick Poll

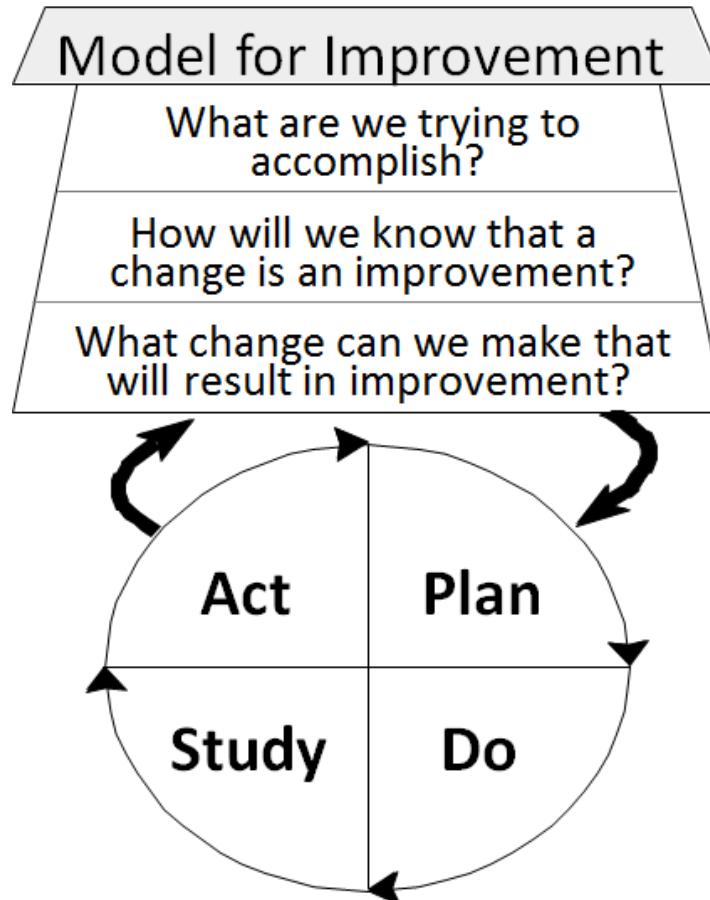
Before we get started, please rate your experience with the fundamentals of quality improvement.

1. I am a QI expert. I could be leading this webinar.
2. I know a little bit about QI and have seen some of the tools
3. I know what QI stands for.
4. Q what?

# The Model for Improvement



# The Model for Improvement



- Relevant
- Practical
- Evidence-based
- Knowledge-based
- Inclusive

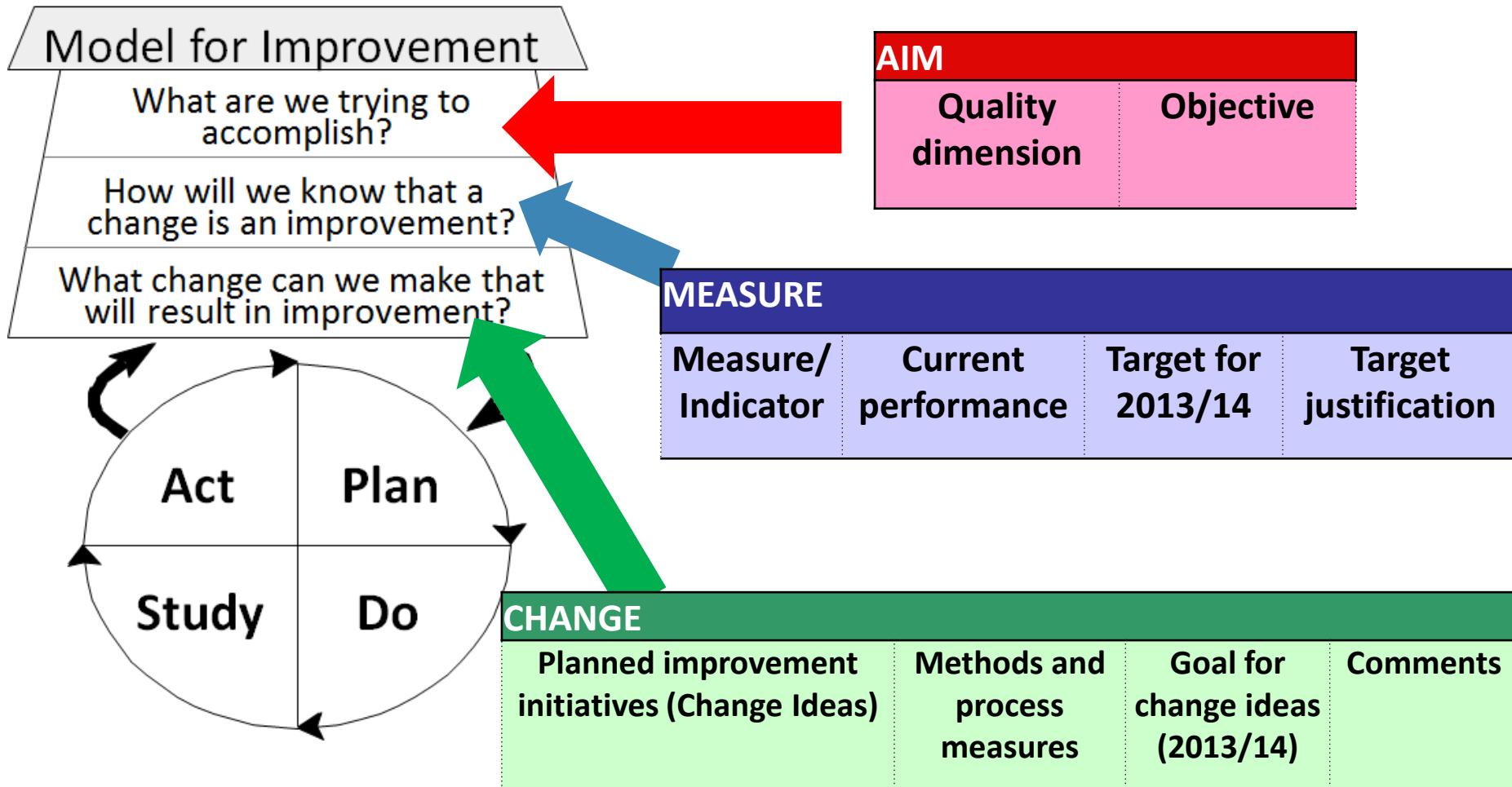
# The QIP Template (Excel)

AIM		MEASURE			
Quality dimension	Objective	Measure/ Indicator	Current performance	Target for 2013/14	Target justification
Each column to be filled in...					

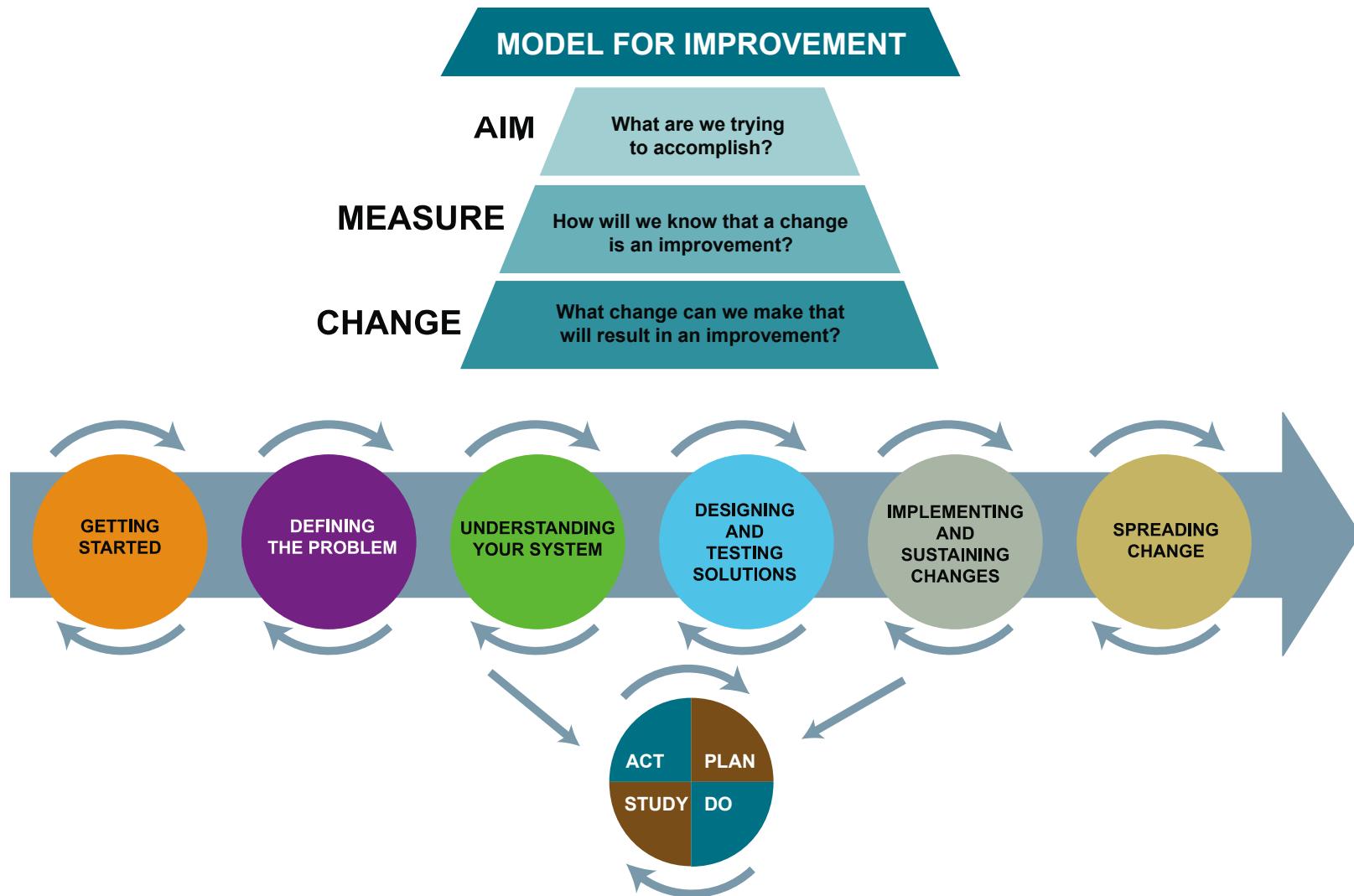
CHANGE			
Planned improvement initiatives (Change Ideas)	Methods and process measures	Goal for change ideas (2013/14)	Comments
Each column to be filled in – multiple rows (change ideas) per measure is ideal			

[http://www.health.gov.on.ca/en/pro/programs/ecfa/legislation/qi\\_primary.aspx](http://www.health.gov.on.ca/en/pro/programs/ecfa/legislation/qi_primary.aspx)

# Quality Improvement Plan Template (Excel)



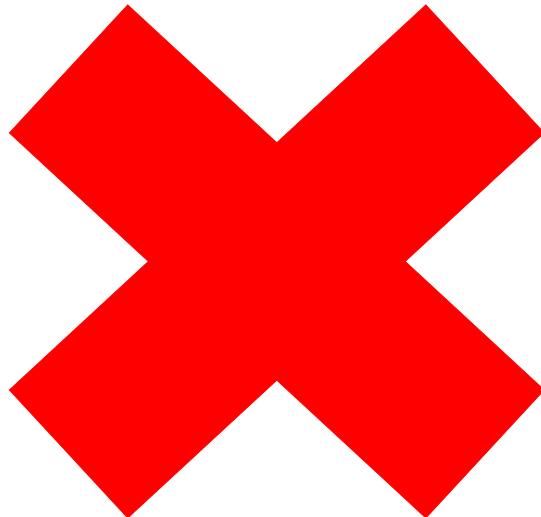
# HQO's Quality Improvement Framework



# Types of Change

## Reactive Change

- Knee-jerk reactions
- Short term, quick fixes



## Fundamental Change

- System focus
- Long-term sustainable change



# Quick Poll

Of the changes you have made or tried to make in your organization, how many do you think have been fundamental? How many do you think have been reactive?

- 100% fundamental
- 75% fundamental/ 25% reactive
- 50/50
- 25% fundamental/ 75% reactive
- 100% reactive

# Where do these change ideas come from anyways?

- Logical thinking about the current system
- Learning from others
- Using technology
- Creative thinking
- Using change concepts

# Quality Improvement

All health care professionals have two jobs:

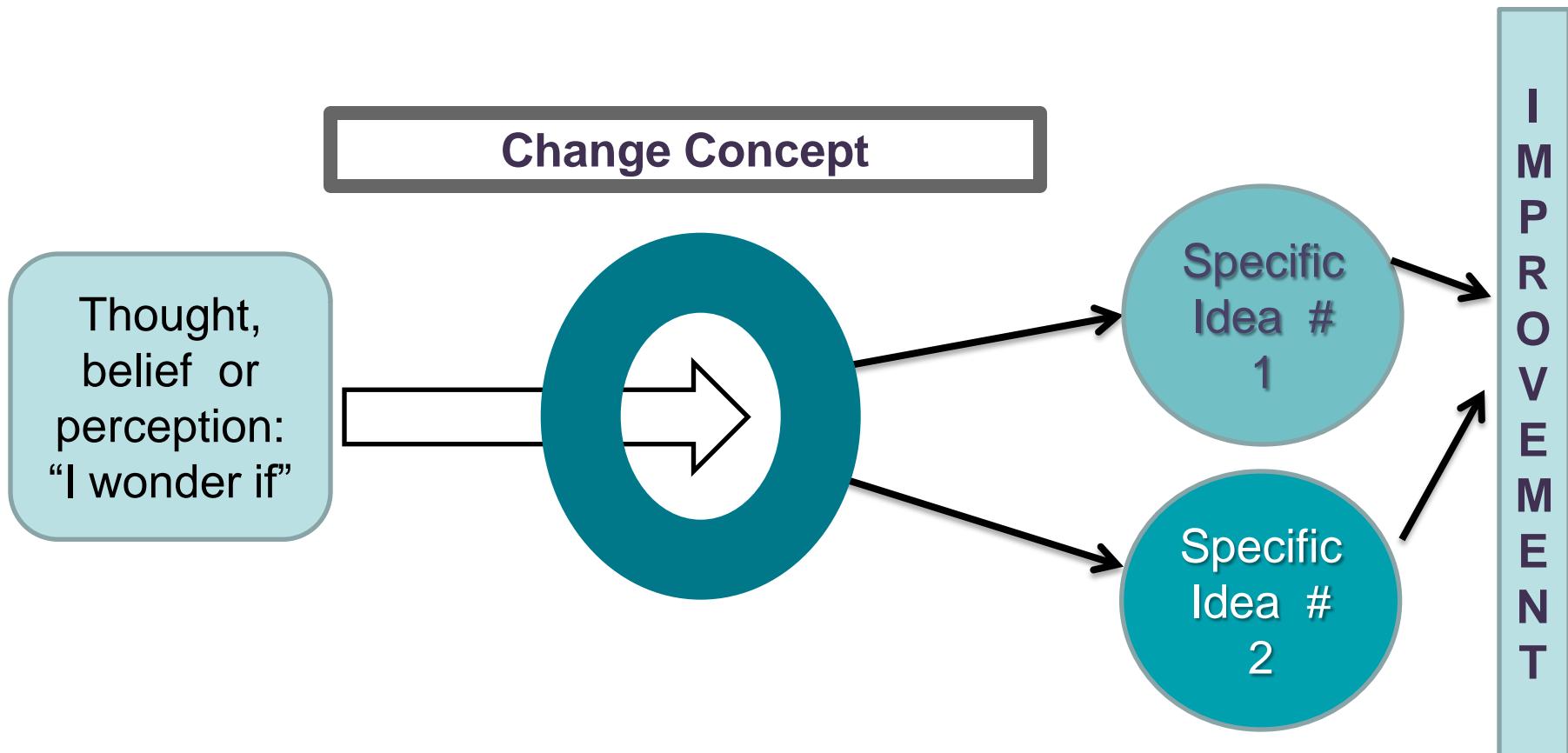
- 1. Providing care*
- 2. Improving care.*

Nelson, E.C., Batalden, P.B., Godfrey, M.M. (2007). *Quality by Design: A Clinical Microsystems Approach*. San Francisco : Jossey-Bass.

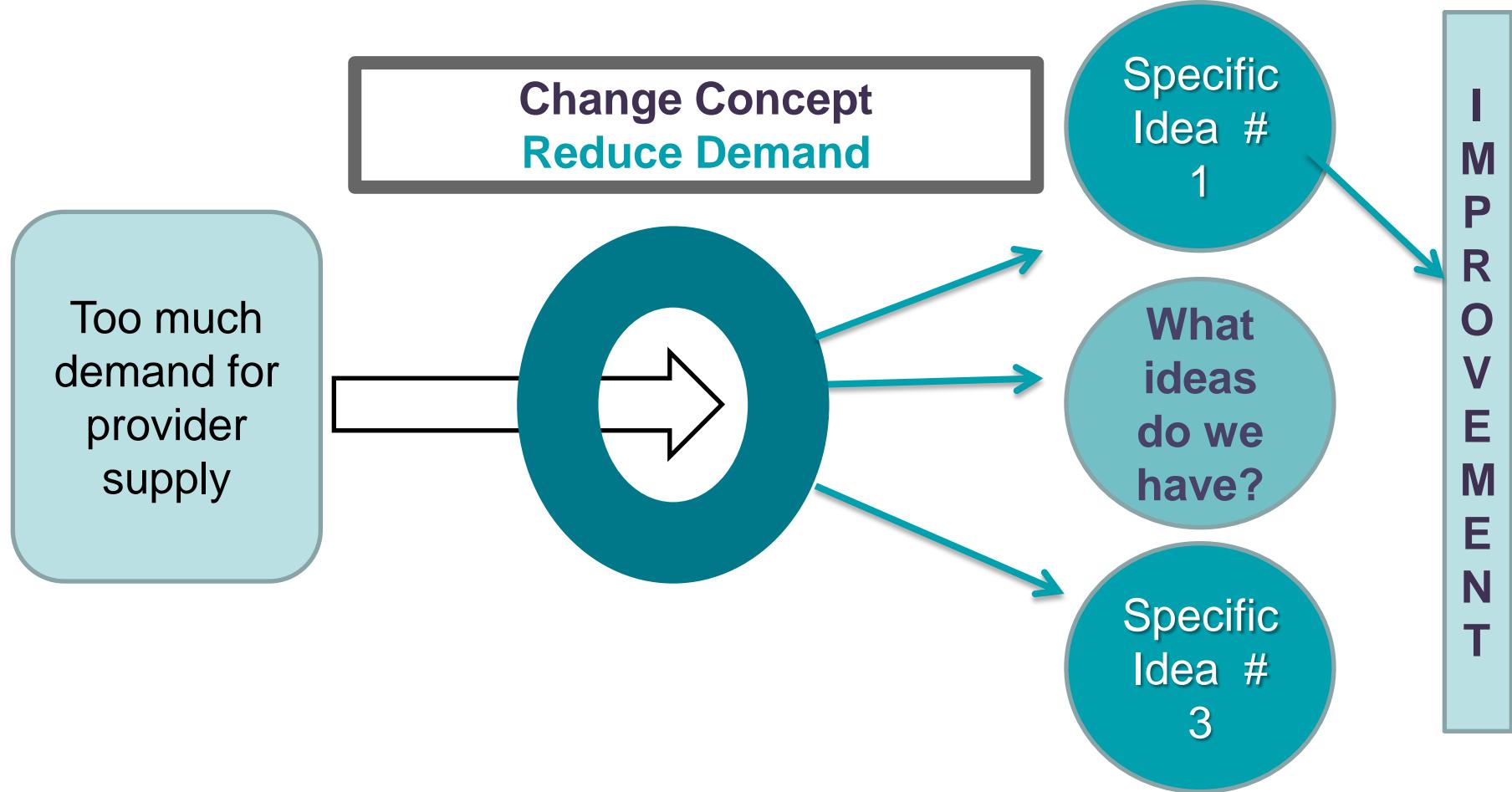
# Participation Across the Organization

- Board
- Quality Committee
- Executive Director
- Lead Clinician
- Other clinicians and staff
- Patients/Clients and caregivers

# Using Change Concepts



# Using Change Concept- Access



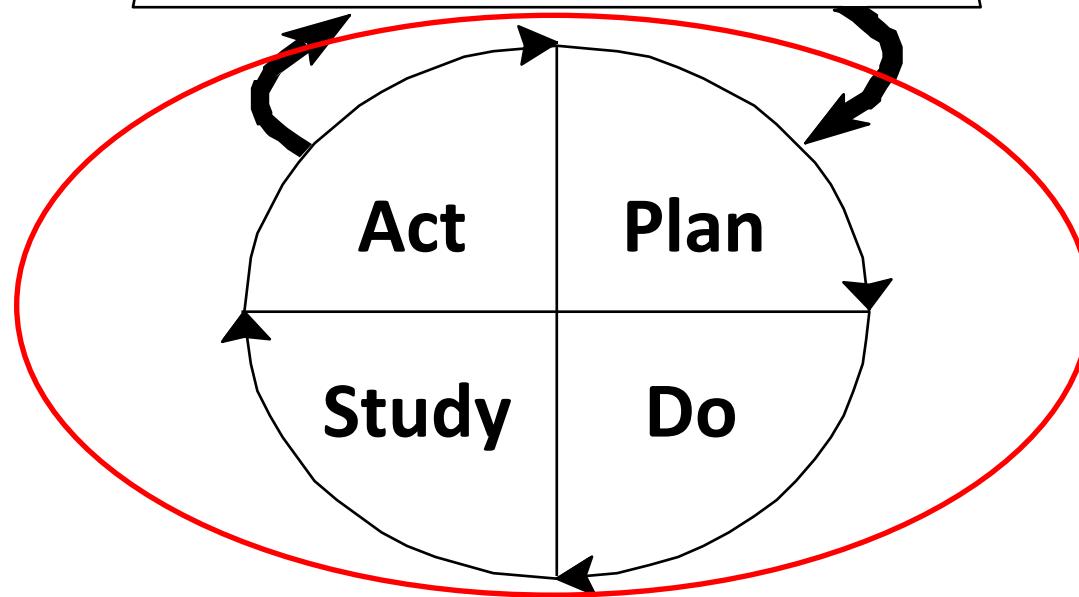
Langley, G.J., Moen, R.D., Nolan, K.M., Nolan, T.W., Norman, C.L., Provost, L.D. (2009). *The Improvement Guide: A Practical Approach to Improving Organizational Performance*. San Francisco: Jossey-Bass

# Model for Improvement

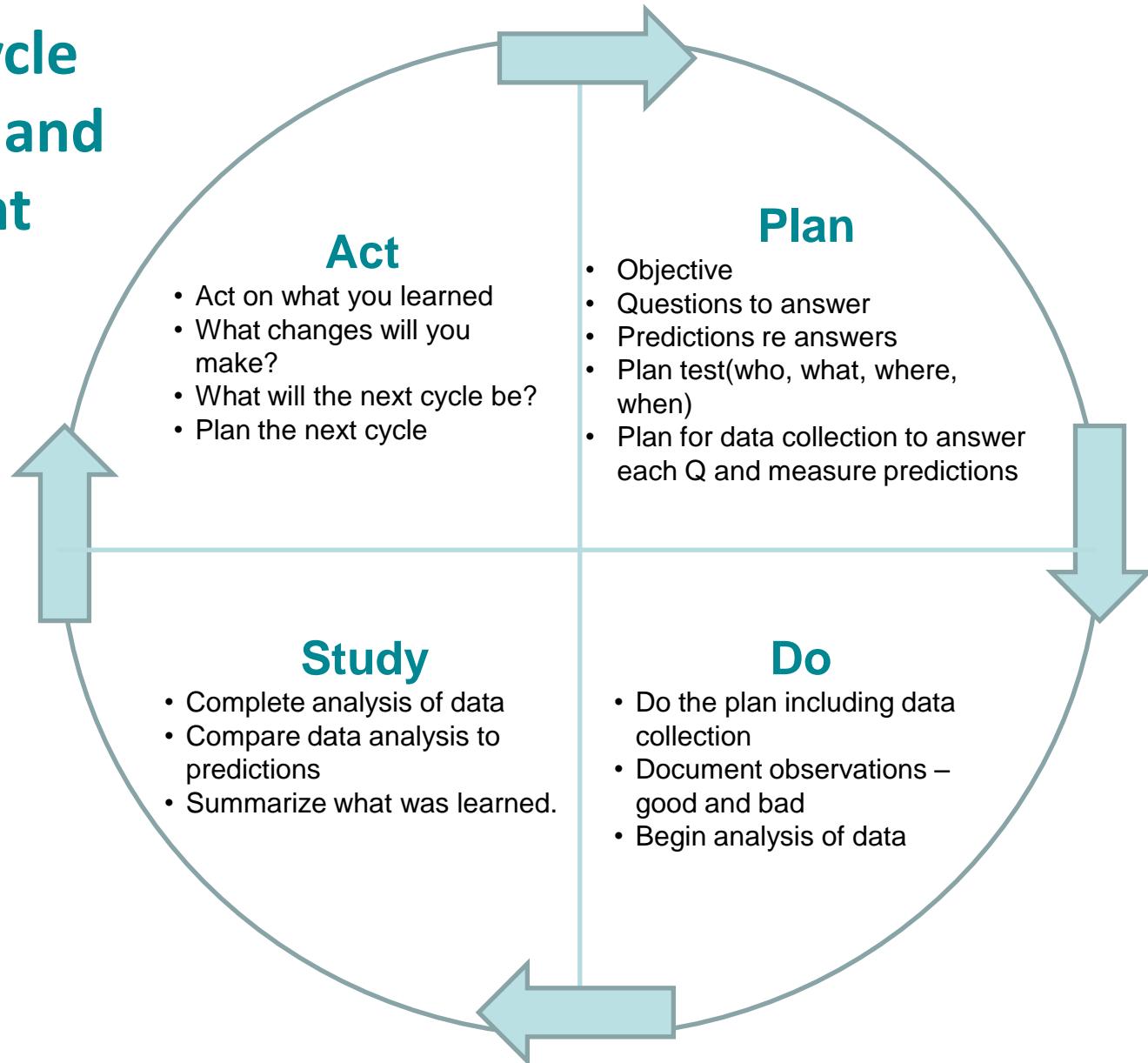
What are we trying to accomplish?

How will we know that a change is an improvement?

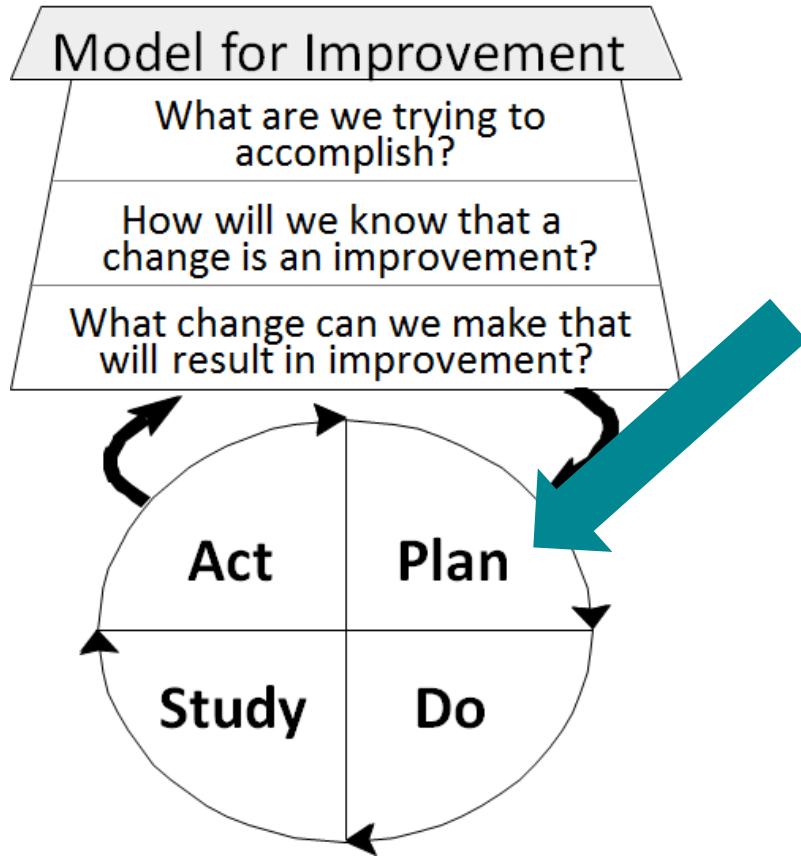
What change can we make that will result in improvement?



# The PDSA Cycle for Learning and Improvement



# Plan



- What are we testing?  
Why?
- Questions to answer
- Predictions for each question
- Plan for data collection to answer each question
- Create the plan to carry out the cycle

# Plan to Measure

- What questions do you want to answer?
- Plan to collect data to answer: Who? What? When? Where? and How?
  - ✓ Useful
  - ✓ Low-tech
  - ✓ Qualitative
  - ✓ Quantitative

Questions and Predictions	What Data?	Who Collect?	When collect?	Where collect?	How?
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# Plan the test

- What do you need to administer the test?
- Ensure that everyone knows their role

**List tasks required to set-up this test: Who, What, When, Where?**

What – Tasks	Who	When	Where

# Plan Phase

**Area of Focus:** To increase supply

**Purpose of cycle:** To test having the RN see hypertension patients in follow-up to increase provider supply

## Questions:

1. How long will appointment be to cover all required tasks?
2. What is the feedback from the patient?

## Predictions:

1. The RN predicts it will take 30 minutes for this first test.
2. The RN predicts that the patient will be fine with meeting her for the BP appointment. The medical receptionist predicts that the patient may be concerned about not seeing the provider.

# RN BP Appointment

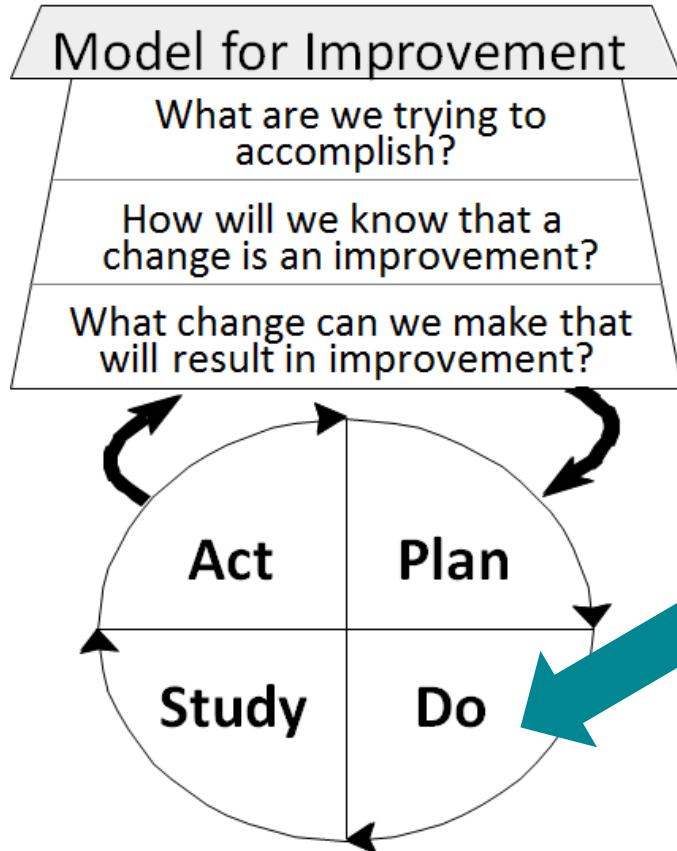
Questions and predictions	What Data?	Who Collect?	When collect?	Where collect?	How?
<p>How much time to conduct the appt?</p> <p><b><u>Prediction:</u></b> 30 minutes</p>	Number of minutes	RN	During appt	Exam room	Stopwatch on phone
<p>What is patient feedback?</p> <p><b><u>Predictions:</u></b></p> <ol style="list-style-type: none"> <li>1. Patient will like the appt with RN</li> <li>2. Patient will want to see provider</li> </ol>	Patient feedback	RN	After appt	Exam room	Interview questions

# BP appointment done by RN

List tasks required to set-up this test: Who, What, When, Where?

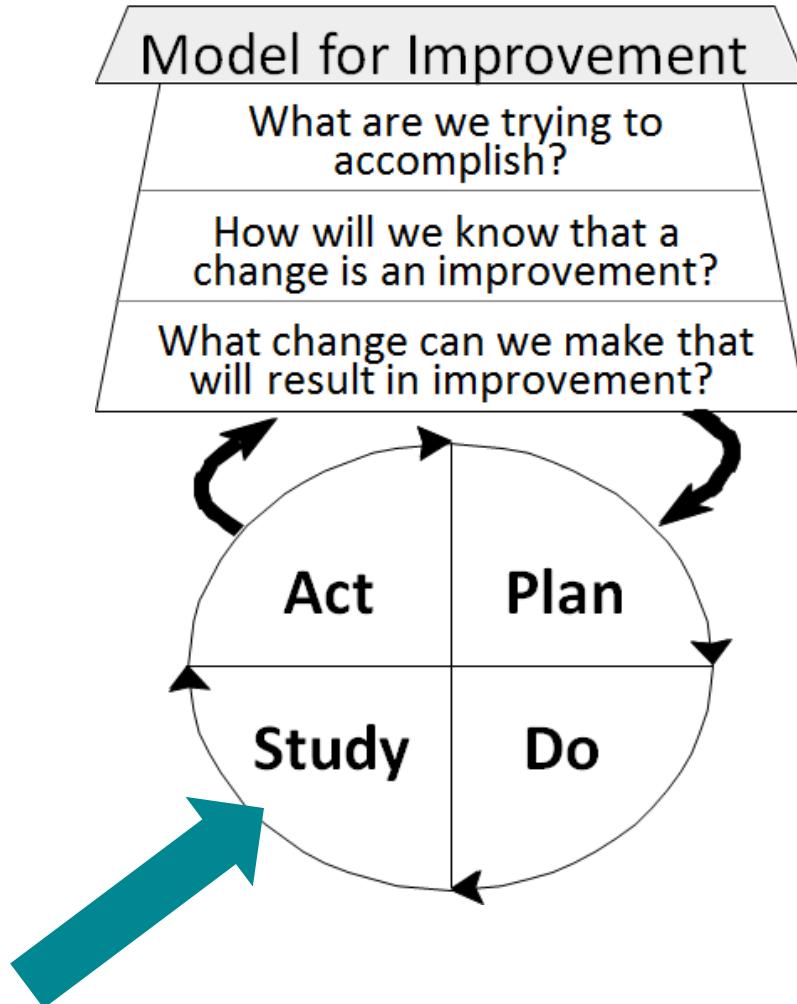
What - tasks	Who	When	Where
Phone patient to ask if he will participate in appt with RN	Receptionist	Tuesday	
Develop questions to collect patient feedback	RN	Tuesday	
Book extra time in RN schedule after appt to collect feedback	Receptionist	Today	RN template

# Do



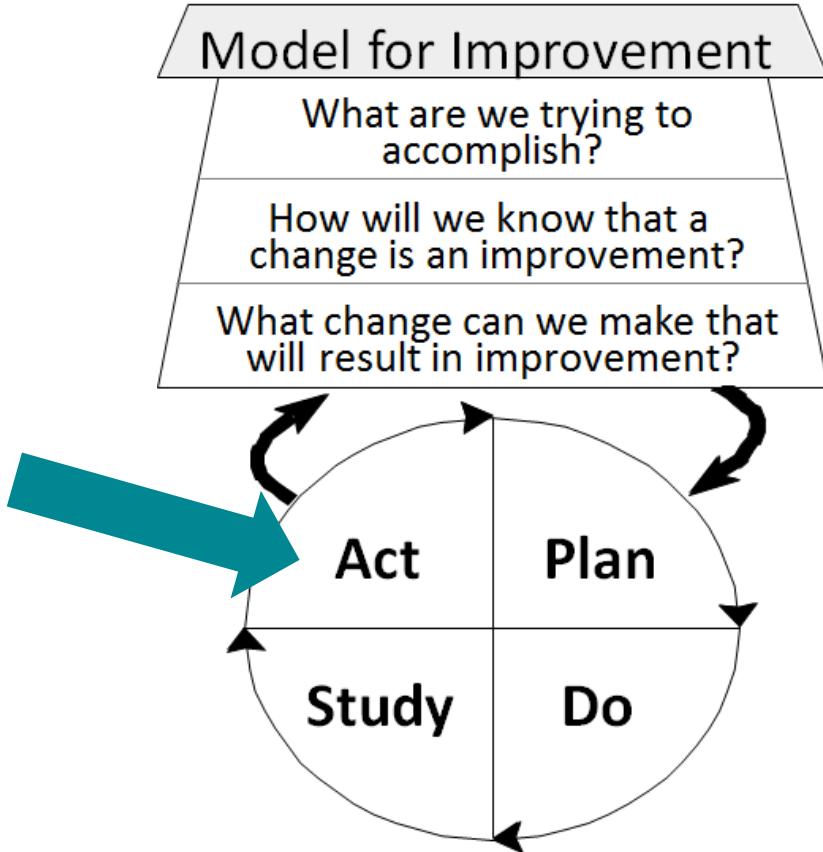
- Conduct the plan and collect data
- What did you observe when the test was carried out?
- Were there any unexpected observations?

# Study



- Analyze your data and describe the results.
- How do the results compare with your predictions?
- What did you learn from this cycle?

# Act



Based on what was learned a change may be:

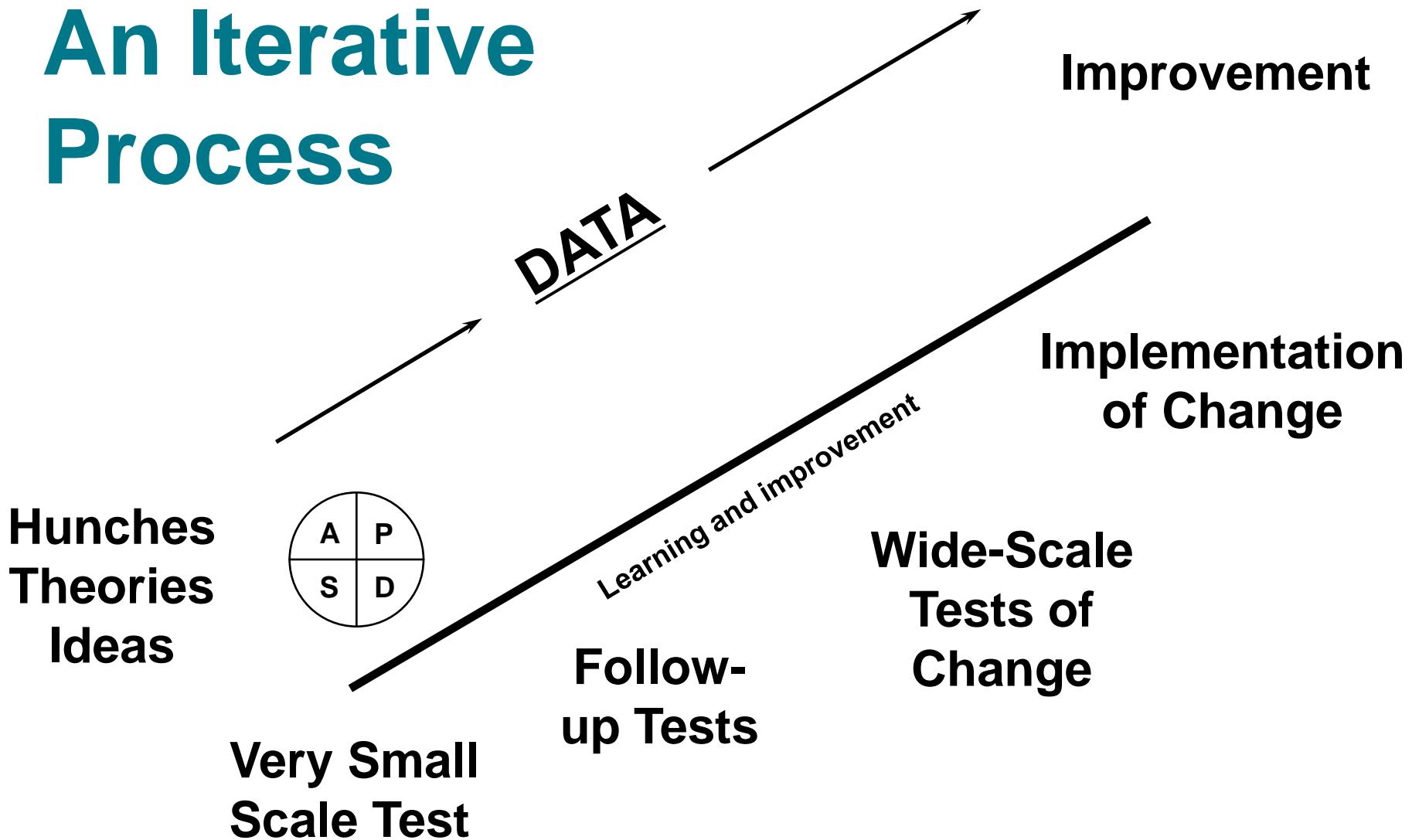
- Dropped
- Modified
- Increased in scope
- Tested under other conditions.
- Implemented

# Quick Poll

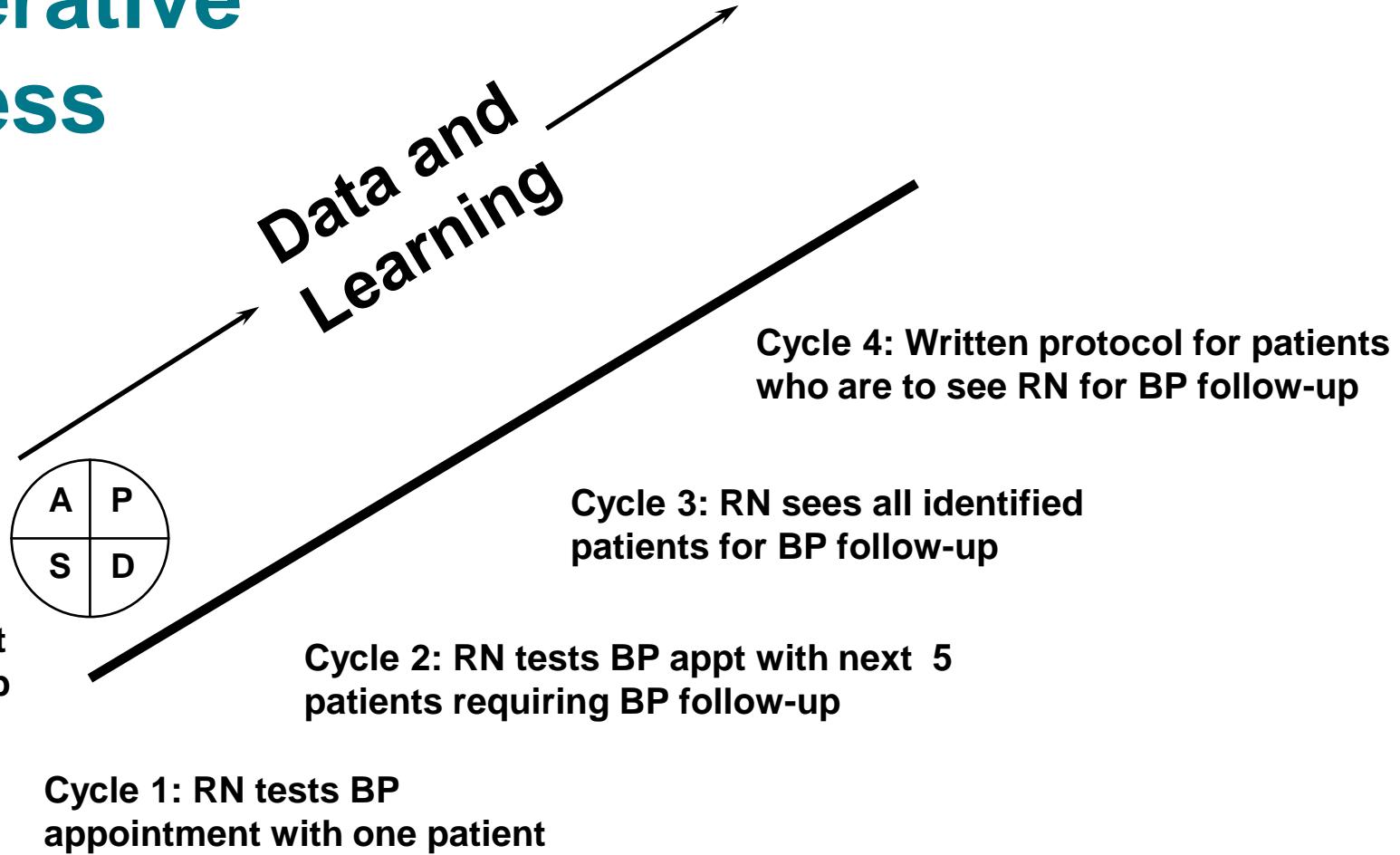
So, what does PDSA stand for?

1. Plan Do Study Act
2. Please Do Something, Anything
3. Post demand supply activity

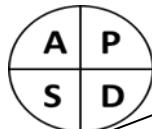
# An Iterative Process



# An Iterative Process



**Standardize  
Exam Rooms**



**RN providing  
BP follow-up**



**Email  
follow-up**



**Group visits  
for patients  
with chronic  
disease**



**Increase Supply**

# Hints for Planning Useful Cycles

## Scale down size

–think “oneness”

One patient  
One provider  
One day

## Scale down the time

– think “drop two”

Year  
Quarter  
Month  
Week  
Day  
Hour

## Test under many conditions

Other patients  
Other providers  
Different days

## Think about next cycle

# How to Participate

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[QIP@hqontario.ca](mailto:QIP@hqontario.ca)



# Resources for Capacity Building

- HQO QIP Specialists ([QIP@hqontario.ca](mailto:QIP@hqontario.ca))
- Live web-based learning opportunities from HQO
- Institute for Healthcare Improvement Open School
- 2012/13 Quality Improvement Plan analysis report
- HQO Quality Compass (Available Feb 28<sup>th</sup>, 2013)
- Signing up for bestPATH, Advanced Access & Efficiency & CDM, or other locally based initiatives
- Evidence Development and Standards Branch
- Health System Performance Branch

# Documents to support the development of your QIP

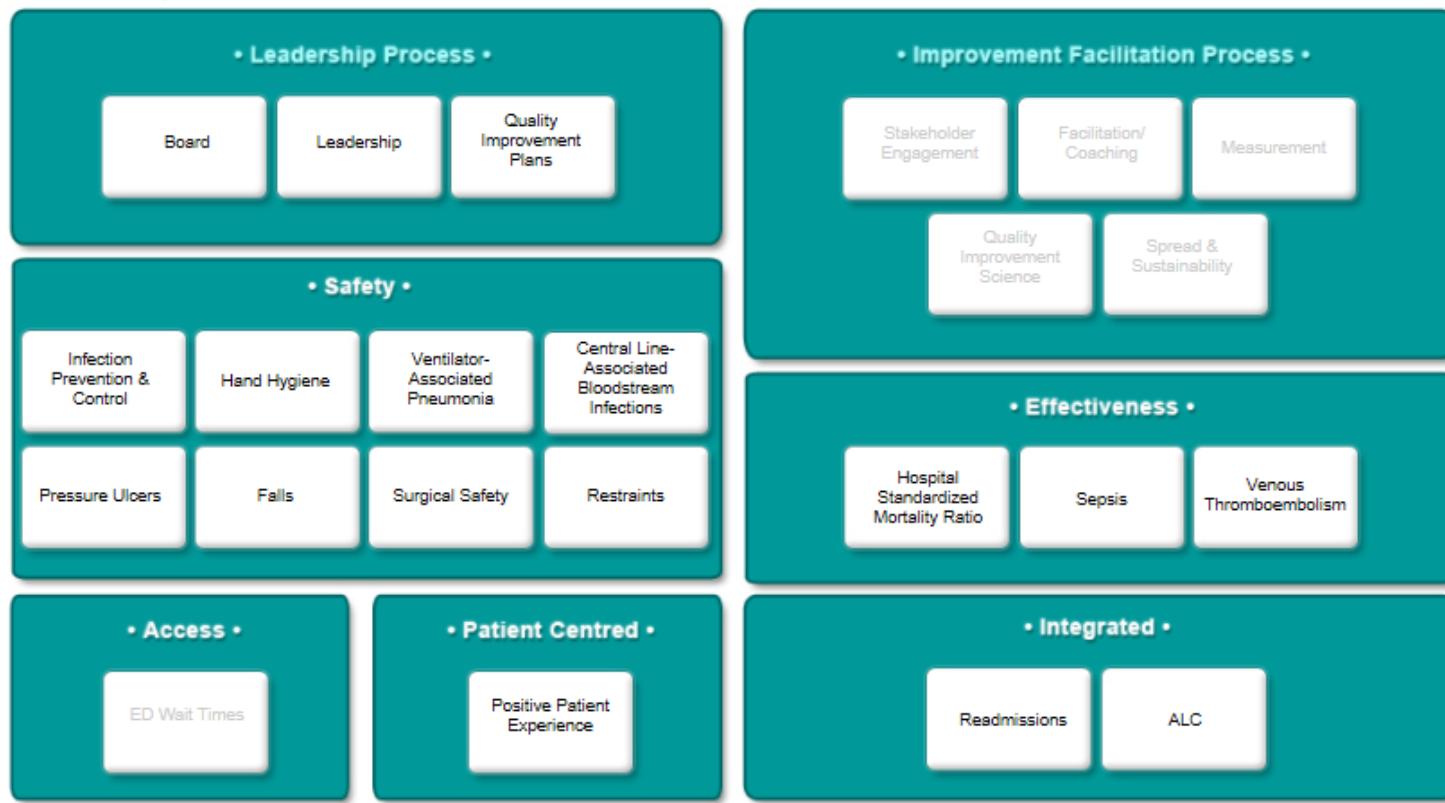
- Guidance document
- Narrative
- QIP template
- Appendices

[http://www.health.gov.on.ca/en/pro/programs/ecfa/legislation/qi\\_primary.aspx](http://www.health.gov.on.ca/en/pro/programs/ecfa/legislation/qi_primary.aspx)

# Quality Compass



## Improvement Map



# Advanced Access, Efficiency & Chronic Disease Management for Primary Care

## Wave 6 Learning Community

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- Application deadline is March 1, 2013 (rolling application process)
- Wave 6 begins March 20, 2013
  - Six months of AA&E & three months of Chronic Disease Management (as well as three months of data collection for sustainability)
- Supports available to primary care practices:
  - QI Coaches
  - Resources such as: road map, workbook, tools, new & improved user-friendly Gateway, webinars
- For more information or to apply, visit: [www.hqolc.ca](http://www.hqolc.ca)
- Questions? Contact: [learningcommunityinfo@hqontario.ca](mailto:learningcommunityinfo@hqontario.ca)

# Primary Care QIP Webinar Series

Next webinar in series:

**Webinar 3 - Thursday Feb 14 at 7:30am and 12:10pm:**

*Understanding Measurement – Using Data in Primary Care QIPs*

**Webinar 1 - Tuesday Feb 26 at 7:30am and 12:10pm:**

*Completing Your QIP – Understanding Each Step*

**Webinar 2 - Wednesday Feb 27 at 7:30am and 12:10pm:**

*Quality Improvement for Primary Care – An Introduction*

**Webinar 3 - Thursday Feb 28 at 7:30am and 12:10pm:**

*Understanding Measurement – Using Data in Primary Care QIPs*



Thanks for joining us!