

Making **Meaningful** Connections: A conversation with clinical leaders in support of quality improvement

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Presenter Disclosures

- Presenters:
 - Dr. Jeffrey Turnbull
 - Lee Fairclough

Relationships with commercial interests: None

Disclosure of Commercial support

This session has received no commercial support.

Potential for conflict(s) of interest: None

Learning Objectives

By attending this breakout session, participants will:

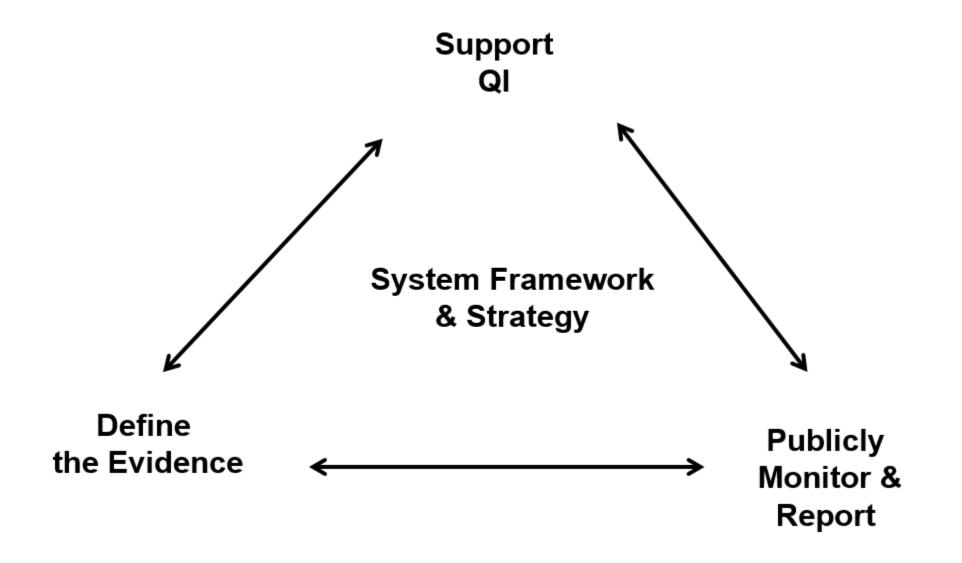
 Contribute to a meaningful conversation on how to accelerate and optimize the quality agenda through collaborative, interconnected networks

 Discuss and identify opportunities to leverage and connect existing clinical leaders to catalyze quality improvement in Ontario.

QUALITY IMPROVEMENT AT HEALTH QUALITY ONTARIO

Assumptions Guiding Our Work

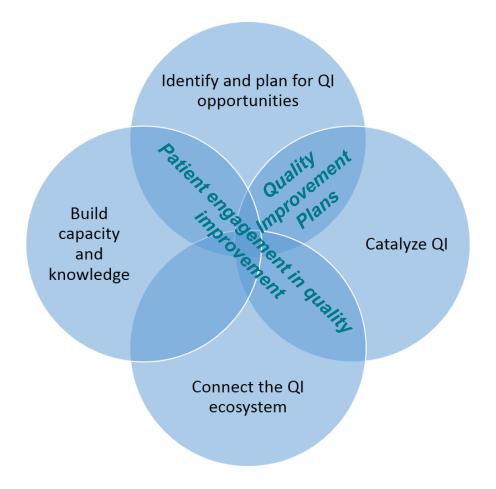
- The capacity focused on quality in ON has grown (and will continue to grow)
- Function as a catalyst
- Engage and connect teams/communities/partners
- Align internally (3 pillars) and with govt priorities as much as possible
- Invest strategically in leadership
- Listen to the patient's voice



Desired Future State in QI

- ☐ In the next few years, with the networks of experts, organizations and quality improvement capacity connected through our efforts, and fully leveraging emerging evidence and public reporting we will:
 - Have been consistently proactive and responsive to emerging evidence and quality issues in a planned and timely way
 - Achieved success with 1-2 large spread and scale initiatives bringing measurable change provincially, and catalyzed other implementations as appropriate
 - Be a trusted broker for QI. Enabled the quality improvement community to connect and see benefits from one another, and to specific quality issues
 - See ongoing building of knowledge and capacity for quality improvement
- ☐ Have a prevailing culture for quality in Ontario

Approach to Quality Improvement



Looking Ahead: Chief Clinical Quality's Role: Moving to a Culture of Quality

- ☐ Engagement: an established management concept where an individual is fully involved in and enthusiastic about, their work and will act in a way that furthers their organizations interest (Kahn 1990). Synonymous with Emotional Commitment.
 - Elements: a sense of importance, clarity and value of goal, opportunity for advancement, communication, respect, involvement, commitment.
- ☐ Communities of Practice: also a long-standing management approach targeted towards improved outcomes. "Groups of people who share a concern or a passion for something they do and learn how to do it better as they interact regularly" (Wenger-Trayner).
 - Elements: shared problem-solving, information sharing, shared or new experiences, shared resources, coordination and synergy, shared developments/projects, clarifying existing knowledge and identifying gaps.

Current & Candidate Areas of Focus

- □ Healthlinks and support for patients with complex needs
 □ Primary care collaboration with OCFP, primary care practice reports, patient experience, measurement framework
 □ Surgery an ON-NSQIP collaborative
 □ Integration of Care (ARTIC cross sector theme)
 □ Patient experience
 □ Emerging evidence reviews: QBPs (acute/community), palliative care, understanding variation
 □ Others?
- * Alignment with the Common Quality Agenda
- * Fully utilize the Quality Improvement Plans

QUALITY IMPROVEMENT SURVEY

Survey of Clinical Leaders and Participants

- We sent out a survey to participants registered in this session
- We asked you about quality priorities, enablers, and barriers in Ontario, in your organization, and your personal quality goals
- The results of this survey helped to shape the direction of this session

- 186 participants responded to this survey
- We will now show you some of the results and ask you all to respond to similar questions today using the audience response system

Audience Participation – Keypad

We want to know what you think

- You will be asked for your input at the beginning and end of the session
- Using the keypad on your chair, answer by choosing the letter corresponding to your response



- Answer within the time allotment
- See the aggregate response instantly

Using your keypad, answer the following question:

Warm-up Question

When will the Toronto Maple Leafs win the Stanley Cup?



b. In the next five years 14%

d. Never

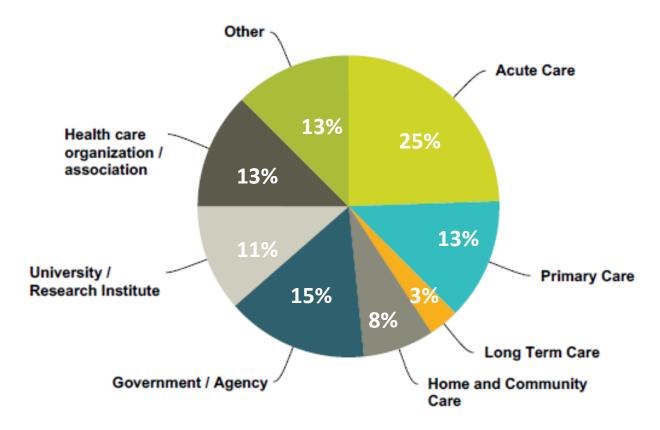




Survey Demographics

Which health care sector or type of organization do you work in?

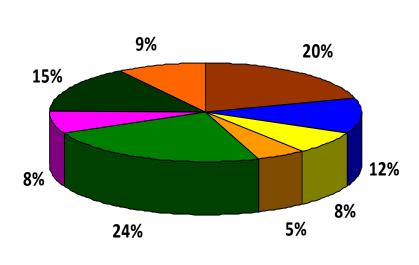
Answered: 184 Skipped: 2

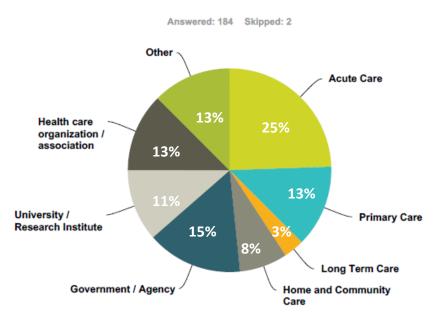


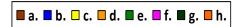
Using your keypad, answer the following question:

Which health care sector or type of organization do you work in?





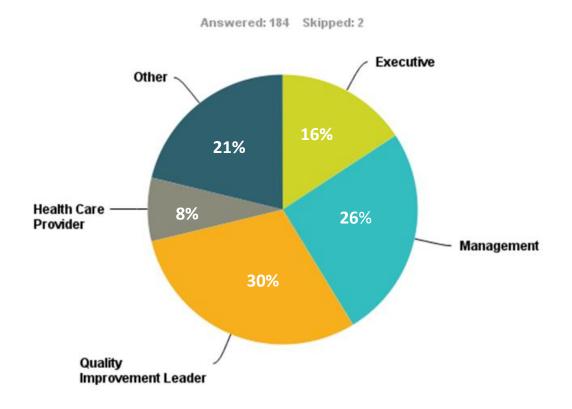






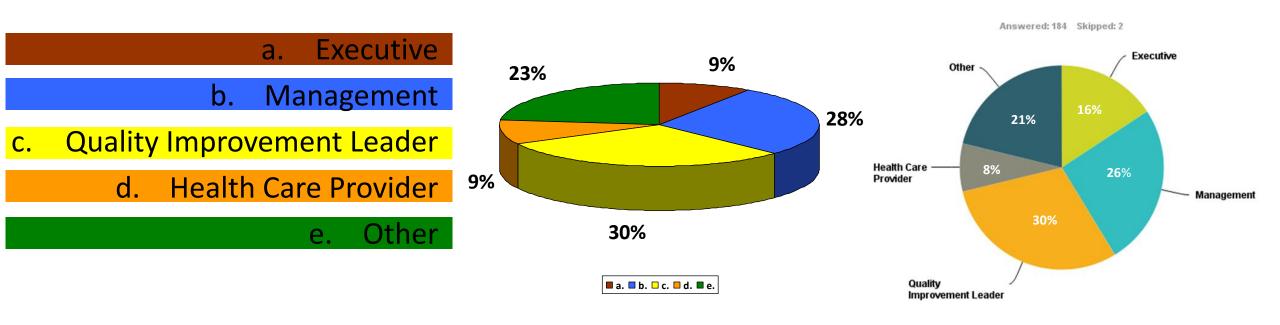
Survey Demographics

In your organization, what is your primary role?



Using your keypad, answer the following question:

In your organization, what is your primary role?

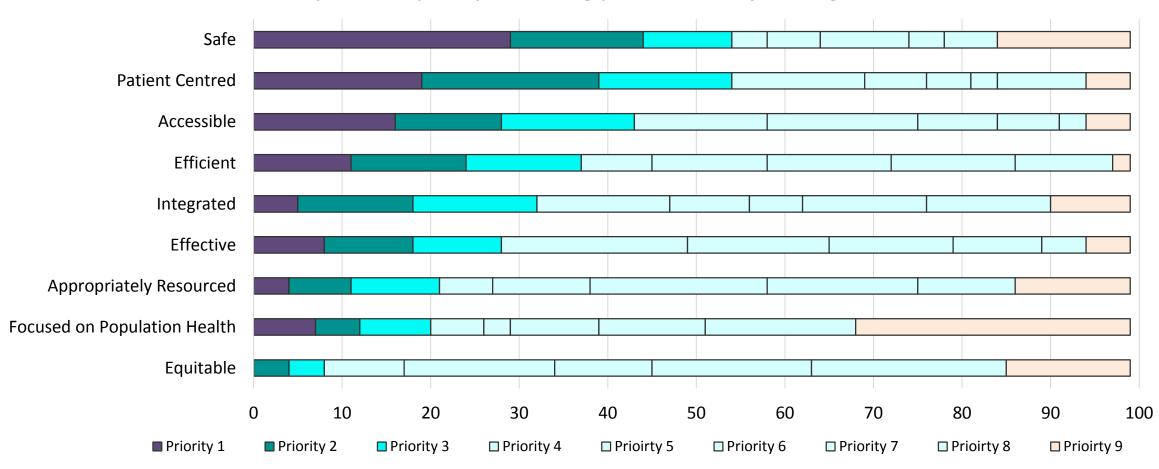




IDENTIFYING QI GOALS AND PRIORITIES

Quality Priorities

Which aspects of quality are being prioritized in your organization?



Patient Safety

- □ 30% of respondents ranked patient safety as a number one priority.
 - ➤ Which aspects of safety are important to your organization today?

- □ 15% ranked patient safety as their last priority.
 - If patient safety was your last priority why?

Patient Centered

☐ 19% ranked being patient centred as their top priority, and another 20% ranked it as their second most important priority.

> Why is being patient centred important to your organization?

Accessible

□ 16% of respondents ranked accessibility as their first priority.

What areas of access are you focussing on?

Which dimensions are *not* priorities?

- □ 31% of respondents ranked **population health** as their last priority.
- □ 0% ranked **equitable** as a first priority.
- ☐ Only 4% ranked **appropriately resourced** as a number one priority.

Why are these dimensions not considered priorities?

How Does Ontario Measure Up?



Common Quality Agenda

Health Status

Life expectancy at birth

Infant mortality

Self-reported health status

Premature avoidable deaths

Public Health

Smoking

Physical inactivity

Obesity

Measles immunization

Meningococcal immunization

Influenza immunization in older adults

Primary Care

Having a primary care provider

Access to a primary care provider on the same day or next day when sick

Access to primary medical care in the evening, weekend or on a public holiday

Patient experience

Screening for colorectal cancer

Diabetes eye exams

Hospital Care

Patient satisfaction

Emergency department length of stay

Hip or knee replacement wait time

Cardiac procedure wait time

Cancer surgery wait time

Clostridium difficile infections acquired in hospital

Falls among complex continuing care patients

Pressure ulcers among complex continuing care patients

Use of physical restraints in acute mental health care

Home Care

Patient satisfaction

Wait time for nursing services

Wait time for personal support services

Long-Term Care

Long-term care home placement wait time

Use of physical restraints in long-term care home residents

Falls among long-term care home residents

Pressure ulcers among long-term care home residents System Integration

Hospitalizations for ambulatory-care sensitive conditions

Physician visit within seven days of hospital discharge

Readmissions for mental illnesses

Readmissions for medical or surgical patients

Alternate level of care days

Health Workforce

Number of registered nurses, registered practical nurses or nurse practitioners

Number of family doctors or specialists

Lost-time injury in health workers



Measuring Up 2014

Key Themes from Measuring Up

- ☐ Our health system is improving
- ☐ Access is a challenge in some areas
- ☐ Integration is a challenge
- ☐ There is variation across Ontario

Quality Priorities Identified

- ☐ Safe
- ☐ Patient Centred
- ☐ Accessible

Patient safety is a priority

FIGURE 5.7
Rate of hospital-acquired *C. difficile* infection, in Ontario, 2009/10 to 2013/14

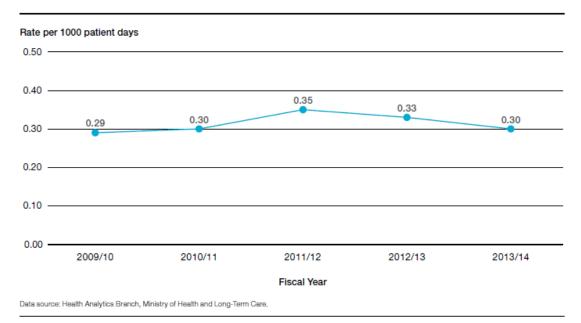
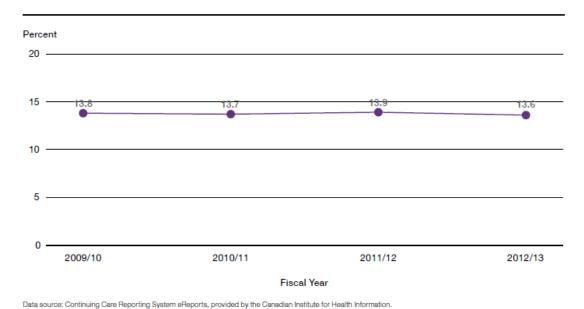


FIGURE 7.5

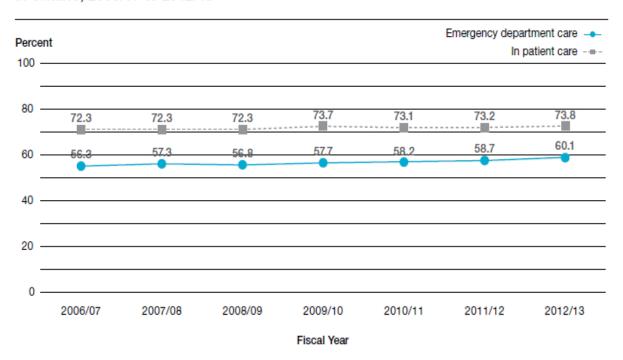
Percentage of long-term care home residents who fell in the last 30 days, in Ontario, 2009/10 to 2012/13



Our health care system is improving Patient-centred care is a priority

FIGURE 5.1

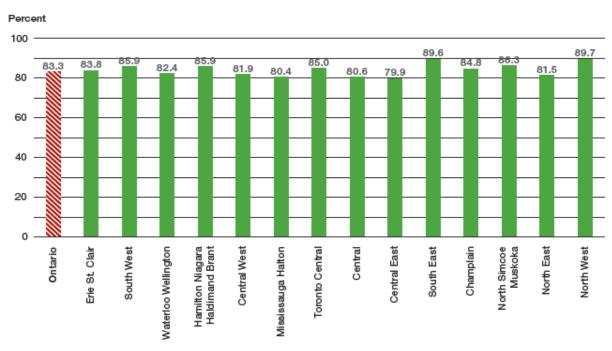
Hospital satisfaction: percentage of survey respondents who would "definitely" recommend hospital to family and friends, by inpatient and emergency department care, in Ontario, 2006/07 to 2012/13



Data source: National Research Corporation of Canada provided by the Ontario Hospital Association.

FIGURE 4.6A

Percentage of survey respondents who report that their provider always or often gives them the opportunity to ask questions, in Ontario, by LHIN region, 2013



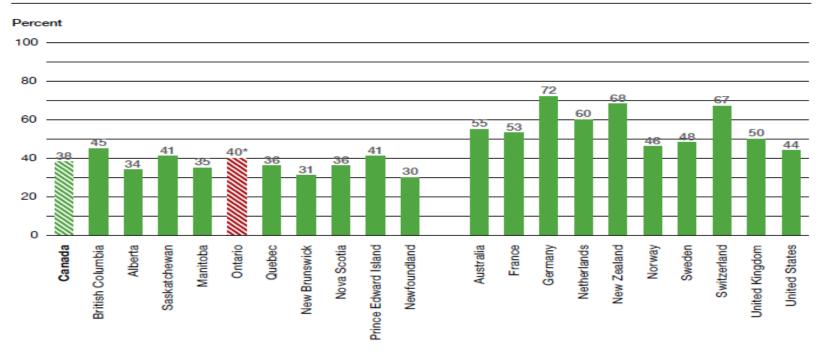
Local Health Integration Network (LHIN) region

Data source: Health Care Experience Survey, provided by Ministry of Health and Long-Term Care.

Timely Access is a challenge and a priority

FIGURE 4.3

Percentage of survey respondents who were able to see their primary care provider on the same day or next day when they were sick, in Canada and internationally, 2013



Data source: 2013 Commonwealth Fund International Health Policy Survey. *Ontario rates vary due to different data sources.

Canada and Ontario have the worst rates of same day/next day appointments vs other countries

38% Canada

40%

72%

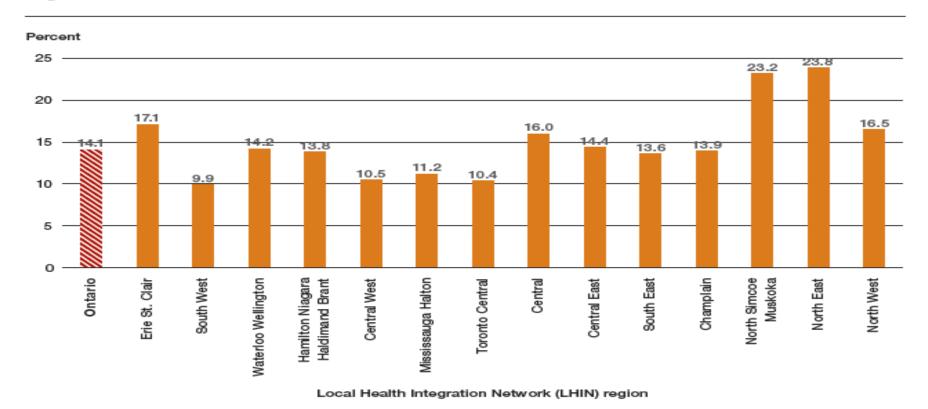
United States



Integration is a challenge There is variation across Ontario

FIGURE 8.10

Percentage of acute care days designated as alternate level of care, in Ontario, by LHIN region, 2012/13

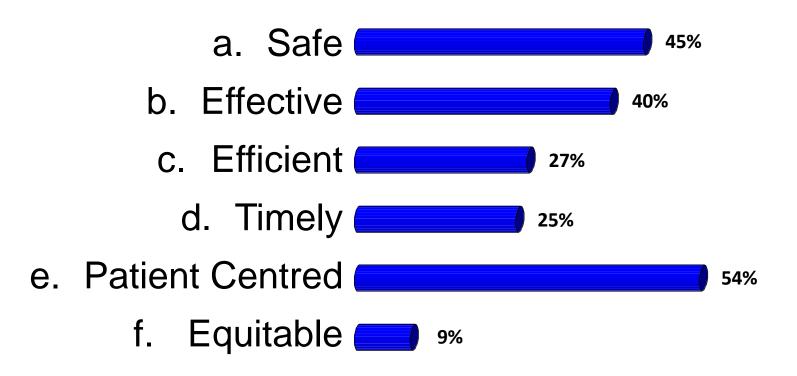


Data source: Discharge Abstracts Database, provided by Health Analytics Branch, Ministry of Health and Long-Term Care.



Using your keypad, answer the following question:

Please indicate which of the following quality dimensions would be your top 3 priorities?







Using your keypad, answer the following question:

Understanding that system integration is a priority, but sector level improvements also need to be focused on:

Which health care sector do you think is a priority for Ontario?



- b. Hospital Care 8%
- c. Home and Community Care ______ 33%
 - d. Long-Term Care 12%
 - e. Public Health 7%

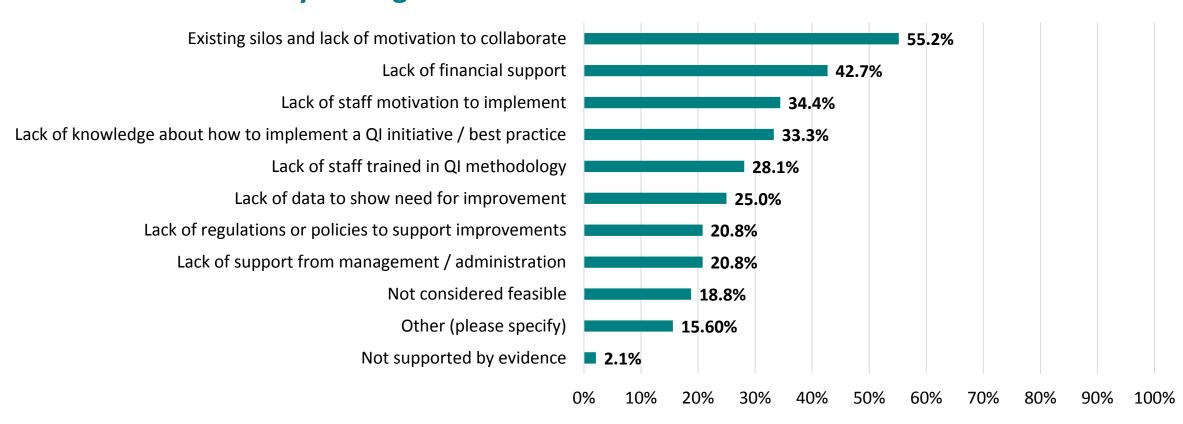




QI STRATEGIES: How do we achieve our goals?

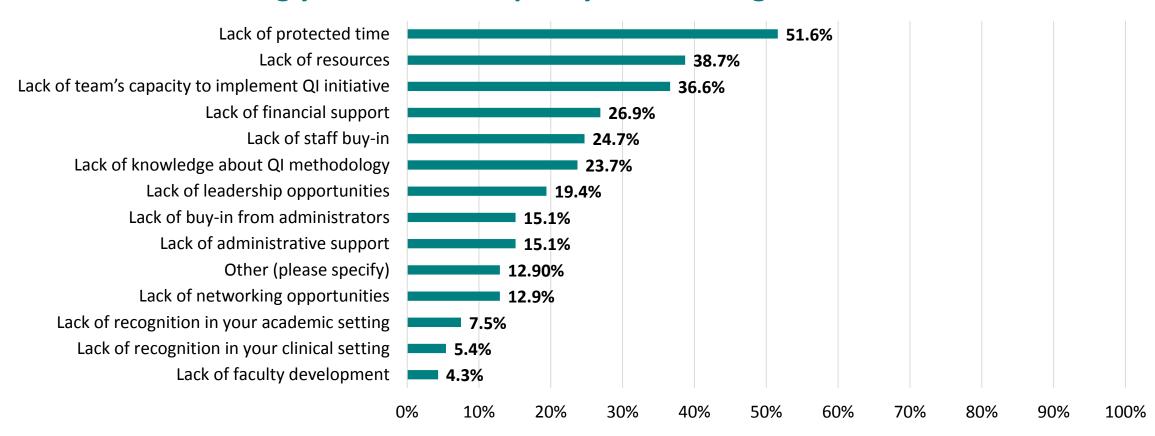
Organizational QI Challenges

What are the three most challenging aspects of doing quality work in your organization?



Individual QI Challenges:

What are the three biggest barriers you face as a quality lead in achieving your individual quality and career goals?



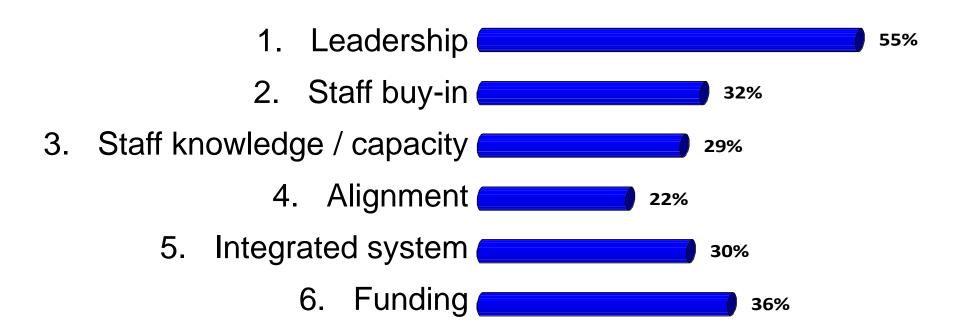
Enablers and Barriers

Key Themes identified:

- System Issues: Integration and Alignment
- Leadership
- Infrastructure support

Using your keypad, answer the following question:

Indicate which of the following would be the top three enablers to facilitate quality improvements in your organization?

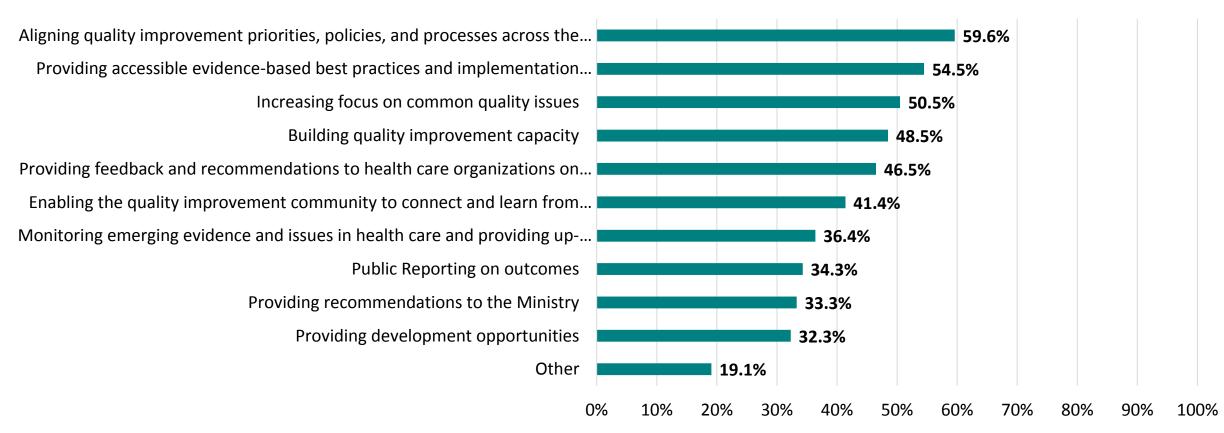






How Can HQO Support QI?

How can Health Quality Ontario support you in achieving your goals and mitigating challenges?



Using your keypad, answer the following question:

What are the three most important ways HQO can support your QI efforts?

- a. Alignment across province
 - 0%
- b. Connecting the QI community
 - 0%
- c. Building QI capacity
 - 0%
- d. Providing accessible QI resources
 - 0%
- e. Provide feedback/recommendations on QI initiatives
 - 0%
- f. Monitor and provide info on emerging evidence and up-to-date info
 - 0%



Thank you for your participation and interaction!





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