

# Looking Back and Looking Ahead

## A Sneak Peek for QIP 2017/2018: Primary Care

Danyal Martin, Health Quality Ontario  
Margaret Millward, Health Quality Ontario  
October 5, 12:00 pm to 1:30 pm

# Learning Objectives

- Share learnings from the 2016/17 QIPs
- Prepare organizations for 2017/18 QIP submission by offering advance notice of changes
- Provide an overview of HQO resources to support organizations in meeting their goals and supporting change across the system

# Embrace Health Quality

● A health system with a culture of quality is . . .

Safe

Effective

Patient-centred

Efficient

Timely

Equitable

● ...stays true to these principles

Commits to ongoing quality improvement

Achieves healthy populations

Ensures accessibility for all

Partners with patients

Balances priorities

Uses resources wisely

● . . . and can only happen when we

Engage patients and the public

Redesign the system to support quality care

Help professionals and caregivers thrive

Ensure technology works for all

Support innovation and spread knowledge

Monitor performance with quality in mind

Build a quality-driven culture

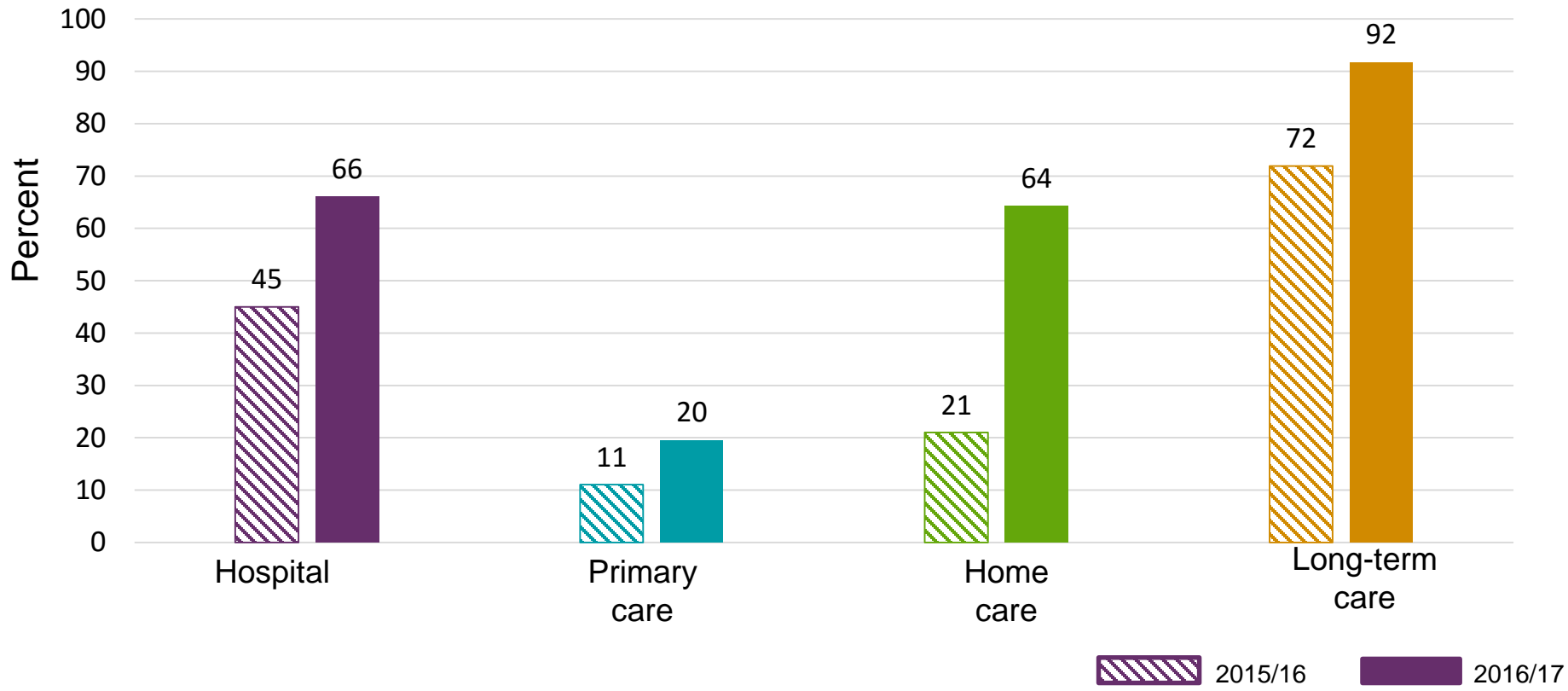
**A just, patient-centred health system committed to relentless improvement. Let's make it happen.**

Read our vision for achieving a quality health system  
*Quality Matters: Realizing Excellent Care For All*

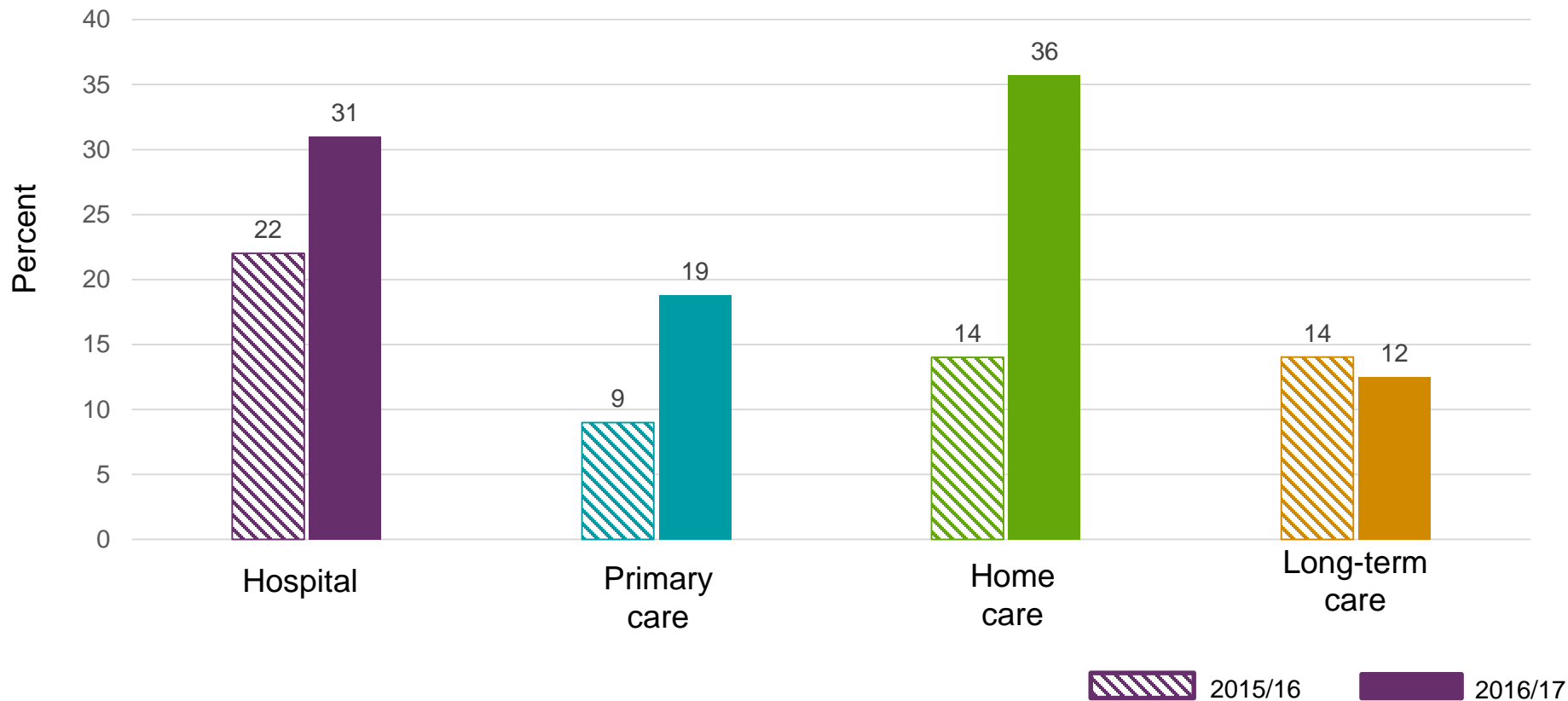
# Key Observations – Overarching

- Reflecting back on their 2015/16 QIPs, of the 1042 submissions more than 85% of organizations reported progress on at least one priority or additional indicator, and more than half reported progress on three or more.
- There was a high uptake of priority issues in the 2016/17 QIPs, particularly patient experience and integration.
  - More than three-quarters (78%) of organizations described working on at least one of the indicators related to integration.
  - More than 80% of organizations described working on at least one of the indicators related to patient experience.
- Most organizations set targets to improve, but many of these targets are modest – typically within 1-5% of their current performance.
  - While this may be appropriate for some indicators, organizations are encouraged to reflect on their current performance and consider whether a stretch target might be appropriate.

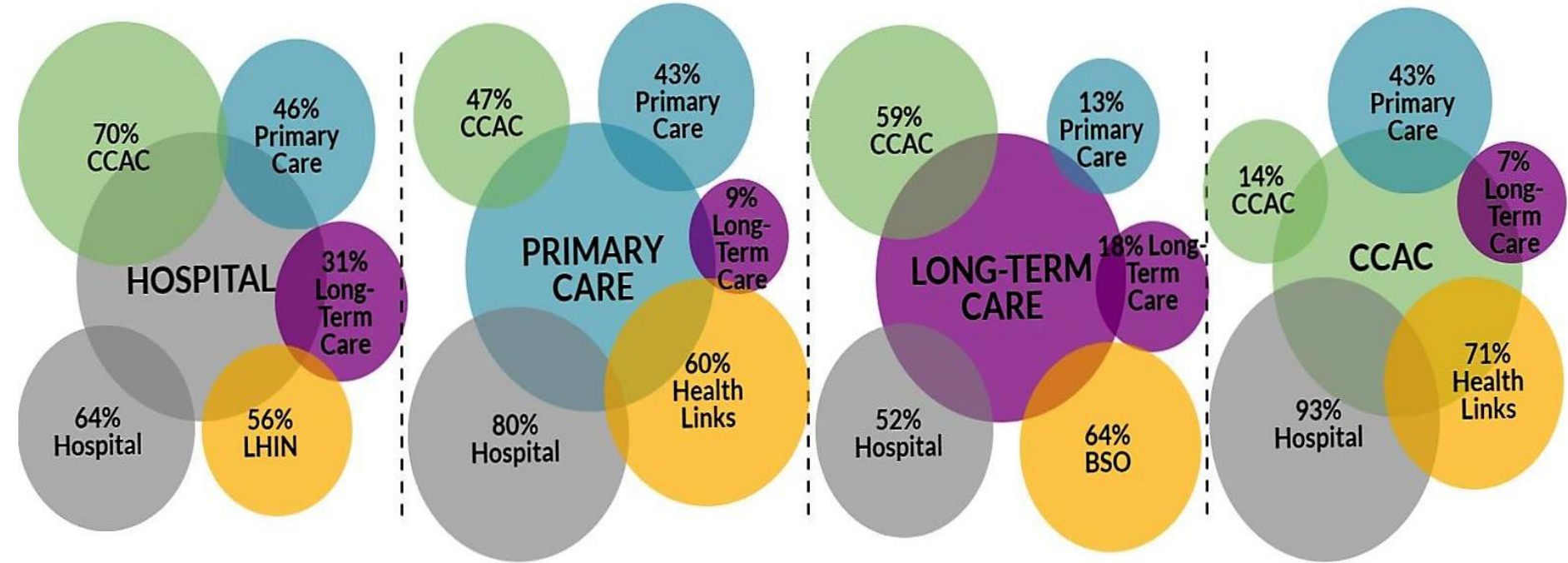
## Percentage of organizations that reported engaging patient advisory councils and forums in development of 2015/16 QIPs and 2016/17 QIPs across all four sectors



## Percentage of organizations that reported engaging patients and families in development of 2015/16 QIPs and 2016/17 QIPs across all four sectors



# Sector Collaboration



# Key Observations: Equity Indicators

1. Collecting and analysis of data, particularly surveys
2. Cultural competency training
3. Program planning
4. Access to Care
  - Poverty
  - Homelessness
  - Rural/Northern communities



# **REFLECTIONS ON THE 2016/17 QIPs: LOOKING BACK**

# Reflections on the 2016/17 QIPs

## Looking back:

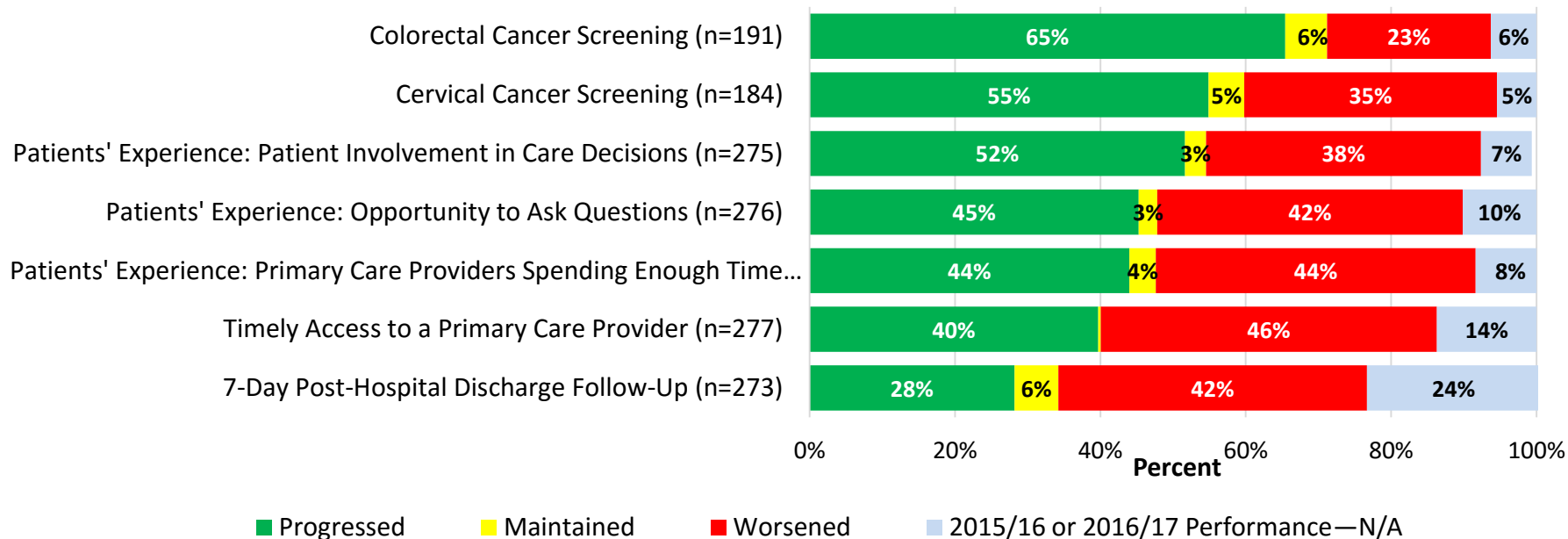
- Cancer screening indicators had the highest rate of progress
- ~30% of organizations worked on emergency department visits, hospital readmissions and immunization (additional indicators)

## Moving forward:

- 94 to 100% of organizations are working on priority indicators
- Applying learnings from cancer screening to HbA1c testing
- >93,000 patients surveyed on patient experience indicators

## Looking back: Percentage of primary care organizations in Ontario that progressed, maintained or worsened in their performance between 2015/16 QIP and 2016/17 QIP on priority indicators, as reported in 2016/17 QIP progress report

Primary Care Priority Indicators



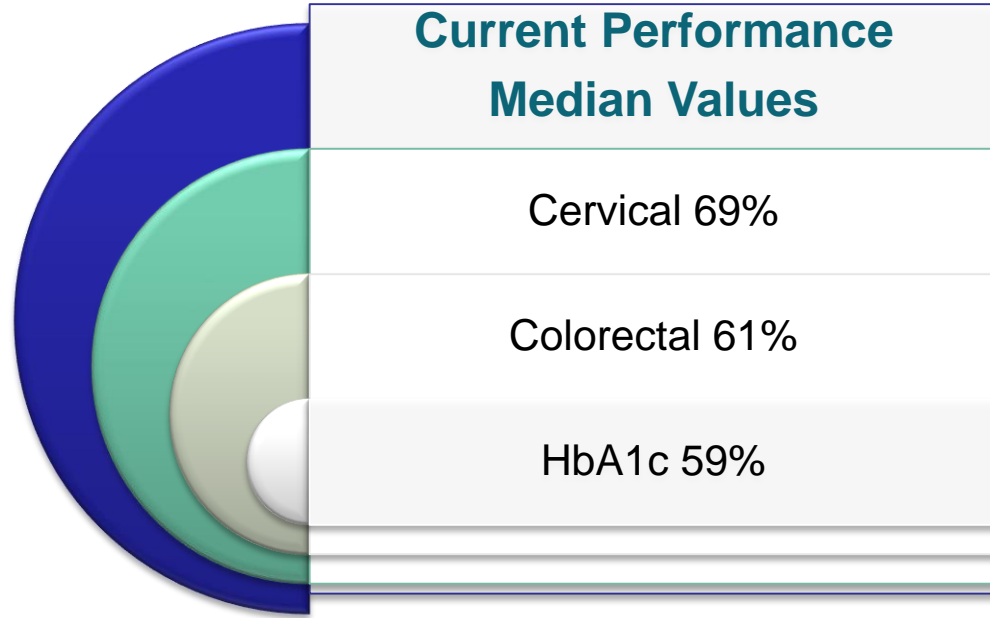
Less than 50% organizations progressed on four out of the seven primary care priority indicators between 2015/16 and 2016/17. Comparatively, 65% and 55% primary care organizations progressed on Colorectal Cancer Screening and Cervical Cancer Screening indicators, respectively. Please see Technical Specifications for indicator reporting period.

# ISSUES

# Population Health

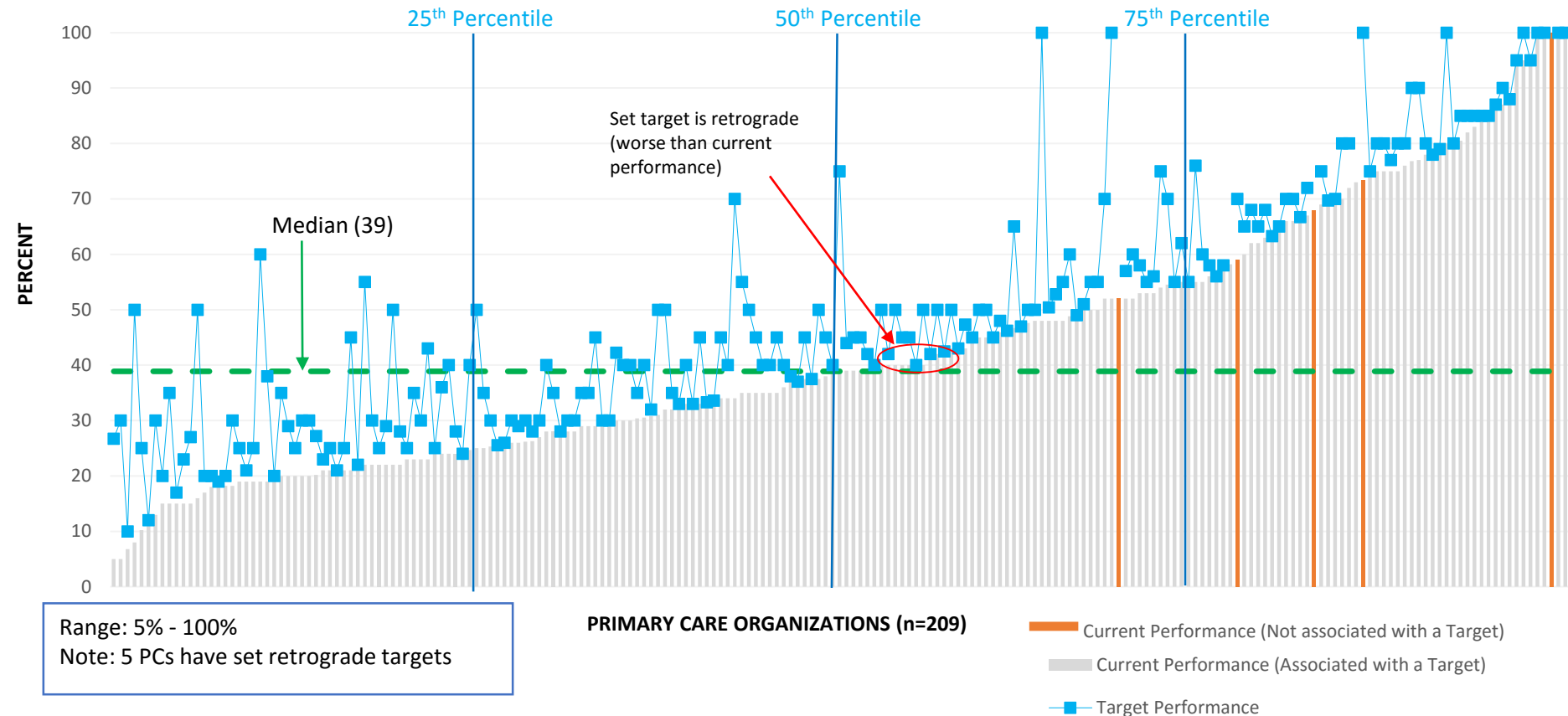
## Common change ideas

- Identify the population
- Notify the patients
- Educate patients
- Audit and provide feedback

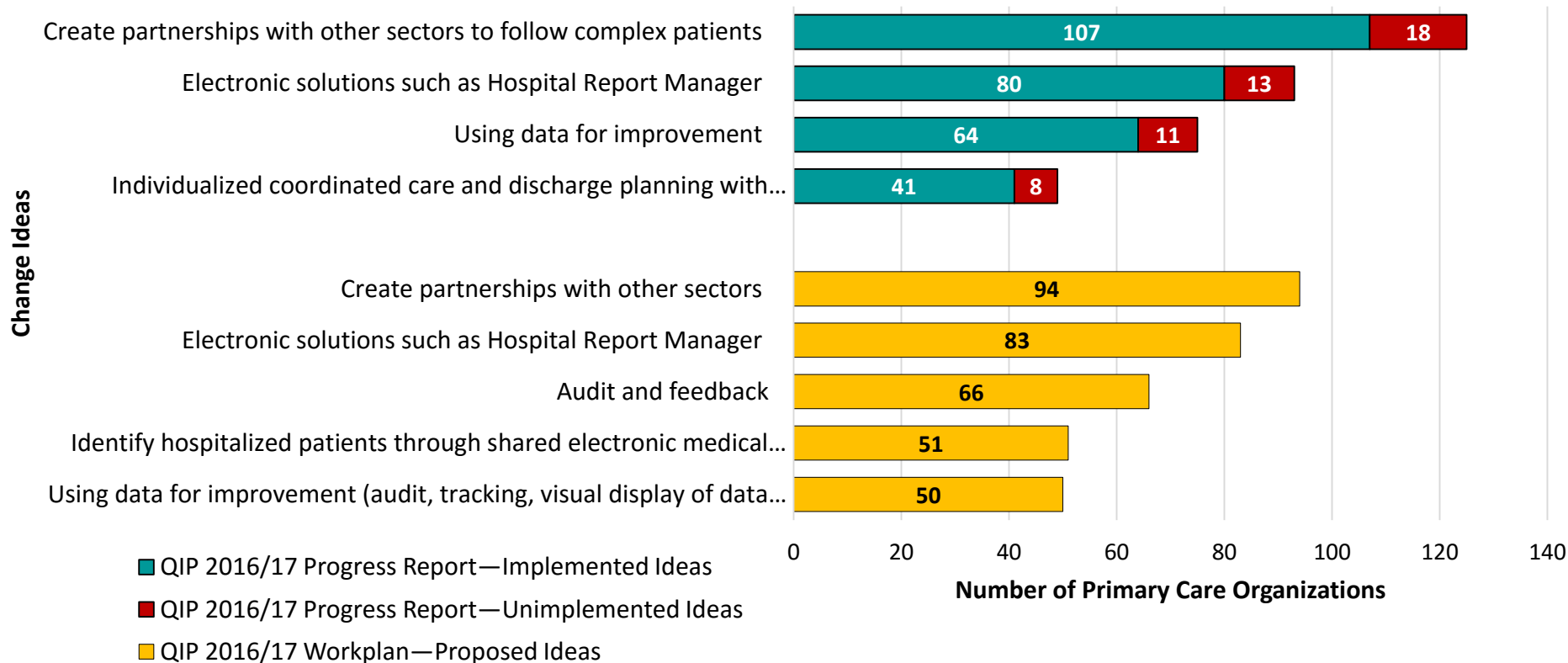


# TRANSITIONS: Percentage of patients or clients who see their primary care provider within 7 days after discharge from hospital for selected conditions in Ontario, QIP 2016/17

↑ Better Performance



# TRANSITIONS: Most common change ideas in Ontario from 2015/16 and 2016/17 primary care QIPs for 7-day post-hospital discharge follow-up rate for selected conditions, as reported in the 2016-17 QIPs



# Patient Experience (3 indicators)

## **Current Performance:**

- Close range between 59% to 100% overall
- Median: 92-93%
- More retrograde targets

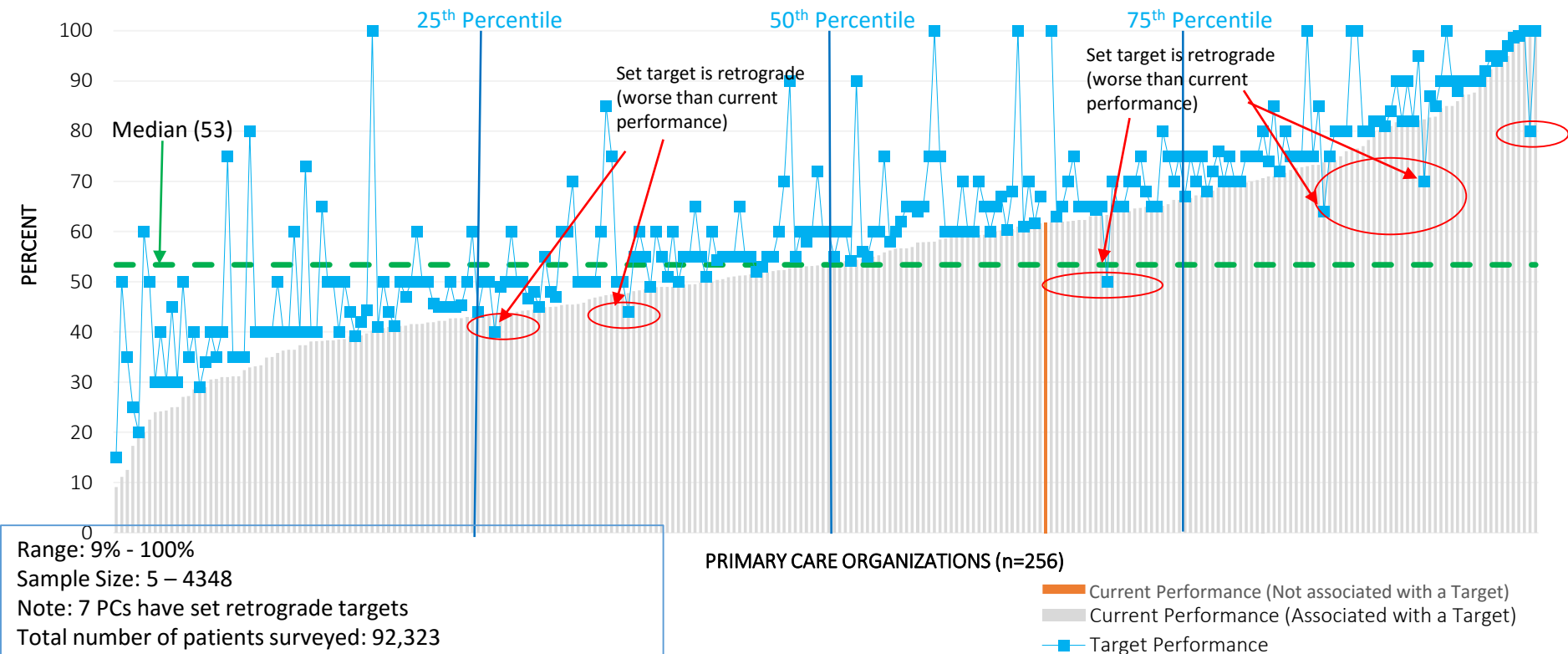
## **Patient Experience Survey Sample:**

- Overall patients surveyed up 30% from ~70,000 to over **93,000!**
- Huge range: 1 to 4102 patients surveyed
- Median surveyed per organization 163-166



# TIMELY: Percentage of patients and clients able to see a doctor or nurse practitioner on the same day or next day in Ontario, QIP 2016/17

↑ Better Performance



# LOOKING FORWARD 2017/18

# Considerations for change ideas moving forward

- If you are... just getting started
  - Set a goal to complete baseline to learn your starting point
  - Start training on Advanced Access Principles
  - Involve the front line providers and senior leadership in the plan and initiatives
- If you are.... testing change ideas
  - If the idea worked with one doctor, one team, try it on another team, adapt and improve
  - If it worked in one office, try it in another office... round back to share your learnings for mutual improvement
- If you have fully implemented the change
  - Regularly retrain new and existing staff
  - Use audit and feedback, so that the new processes become the “new normal”
  - Consider adjusting your targets to be “best in class”

# The QIP Consultation Process

Association of Family Health Teams of Ontario  
Association of Ontario Health Centres  
PFPAC  
HQO QIP advisory  
Branches and departments at HQO

Issues &  
indicator  
matrix

Ongoing  
consultations

2017-2018  
QIP  
Indicators

# Faire progresser un enjeu au moyen du PAQ

**Example: Right care, right time, right place**

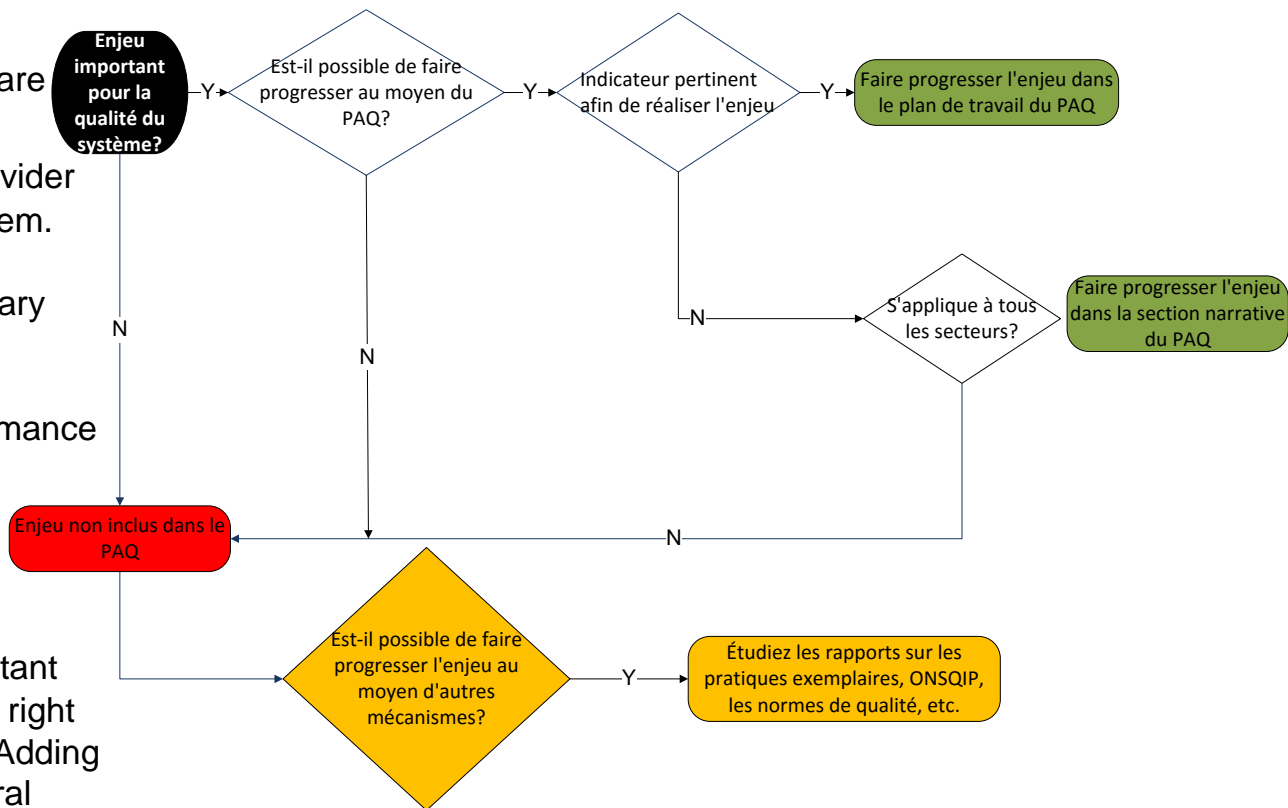
Indicator: Timely access to primary care

✓ Being able to see your primary provider impacts patients, and the health system.

✓ This indicator a priority on the Primary Care Performance Measurement Framework and is already advancing through online Health System Performance reporting.

✓ Can be advanced through QIP.

✓ From an issues perspective, important that people cared for in right place at right time and that sectors work together. Adding this to the QIP promotes cross sectoral partnerships, sharing of ideas that work.



# Quality Issues and Indicators for the 2017/18 QIPs

	Hospital	Primary Care	Home Care	Long-Term Care
Effective	<b>Effective transitions</b> <ul style="list-style-type: none"> <li>Readmission for select conditions (A)</li> <li>Readmission for one of congestive heart failure, chronic obstructive pulmonary disease, or stroke (QBP) (P)</li> <li>Readmission within 30 days for mental health and addiction (A)</li> <li>Patient received enough information on discharge (P)</li> <li>Discharge summaries sent within 48 h of discharge (A)</li> </ul>	<ul style="list-style-type: none"> <li>Hospital readmissions for select conditions (A)</li> <li>7-day post-discharge follow-up (physician) (P)</li> <li>7-day post-discharge follow-up (any provider) (A)</li> </ul>	<ul style="list-style-type: none"> <li>Hospital readmissions (P)</li> <li>Unplanned ED visits (P)</li> </ul>	<ul style="list-style-type: none"> <li>Potentially avoidable ED visits (P)</li> </ul>
	<b>Coordinating care</b> <ul style="list-style-type: none"> <li>Narrative</li> <li>Identify complex patients (Health Links) (A)</li> </ul>	<ul style="list-style-type: none"> <li>Narrative</li> <li>Identify complex patients (Health Links) (A)</li> </ul>	<ul style="list-style-type: none"> <li>Narrative</li> <li>Identify complex patients (Health Links) (A)</li> </ul>	<ul style="list-style-type: none"> <li>Narrative</li> </ul>
	<b>Population health</b> <ul style="list-style-type: none"> <li>Narrative</li> </ul>	<ul style="list-style-type: none"> <li>Narrative</li> <li>Glycated hemoglobin testing (A)</li> <li>Colorectal and cervical cancer screening (A)</li> </ul>	<ul style="list-style-type: none"> <li>Narrative</li> </ul>	<ul style="list-style-type: none"> <li>Narrative</li> </ul>
Patient-centred	<b>Palliative care</b> <ul style="list-style-type: none"> <li>Home support for discharged palliative patients (P)</li> </ul>		<ul style="list-style-type: none"> <li>End of life, died in preferred place of death (A)</li> </ul>	
	<b>Person experience</b> <ul style="list-style-type: none"> <li>Narrative</li> <li>Patient experience (P)</li> </ul>	<ul style="list-style-type: none"> <li>Narrative</li> <li>Patient involvement (P)</li> </ul>	<ul style="list-style-type: none"> <li>Narrative</li> <li>Client experience (P)</li> </ul>	<ul style="list-style-type: none"> <li>Narrative</li> <li>Resident experience (P)</li> </ul>
Efficient	<b>Access to right level of care</b> <ul style="list-style-type: none"> <li>Narrative</li> <li>Alternative level of care rate (P)</li> </ul>	<ul style="list-style-type: none"> <li>Narrative</li> </ul>	<ul style="list-style-type: none"> <li>Narrative</li> </ul>	<ul style="list-style-type: none"> <li>Narrative</li> </ul>
Safe	<b>Safe care</b> <ul style="list-style-type: none"> <li>Pressure ulcers (A), use of physical restraints in mental health patients (A)</li> </ul>		<ul style="list-style-type: none"> <li>Falls for long-stay clients (P)</li> </ul>	<ul style="list-style-type: none"> <li>Pressure ulcers, (A) restraints (A), falls (A)</li> </ul>
	<b>Medication safety</b> <ul style="list-style-type: none"> <li>Medication reconciliation (admission) (P)</li> <li>Medication reconciliation (discharge) (P)</li> </ul>	<ul style="list-style-type: none"> <li>Medication reconciliation (A)</li> </ul>		<ul style="list-style-type: none"> <li>Potentially inappropriate prescribing of antipsychotic medications (P)</li> </ul>
	<b>Workplace safety</b> <ul style="list-style-type: none"> <li>Narrative</li> </ul>	<ul style="list-style-type: none"> <li>Narrative</li> </ul>	<ul style="list-style-type: none"> <li>Narrative</li> </ul>	<ul style="list-style-type: none"> <li>Narrative</li> </ul>
Timely	<b>Timely access to care/services</b> <ul style="list-style-type: none"> <li>ED length of stay (complex) (P)</li> </ul>	<ul style="list-style-type: none"> <li>Timely access to primary care (patient perception) (P)</li> </ul>	<ul style="list-style-type: none"> <li>Wait time for home care (personal support worker, nurse) (P)</li> </ul>	
Equitable	<b>Equity</b> <ul style="list-style-type: none"> <li>Narrative</li> </ul>	<ul style="list-style-type: none"> <li>Narrative</li> </ul>	<ul style="list-style-type: none"> <li>Narrative</li> </ul>	<ul style="list-style-type: none"> <li>Narrative</li> </ul>

Legend: (P): Priority indicator

(A): Additional indicator

(QBP): Indicator related to quality-based procedures

# 2017/18 QIP Indicators: Primary Care

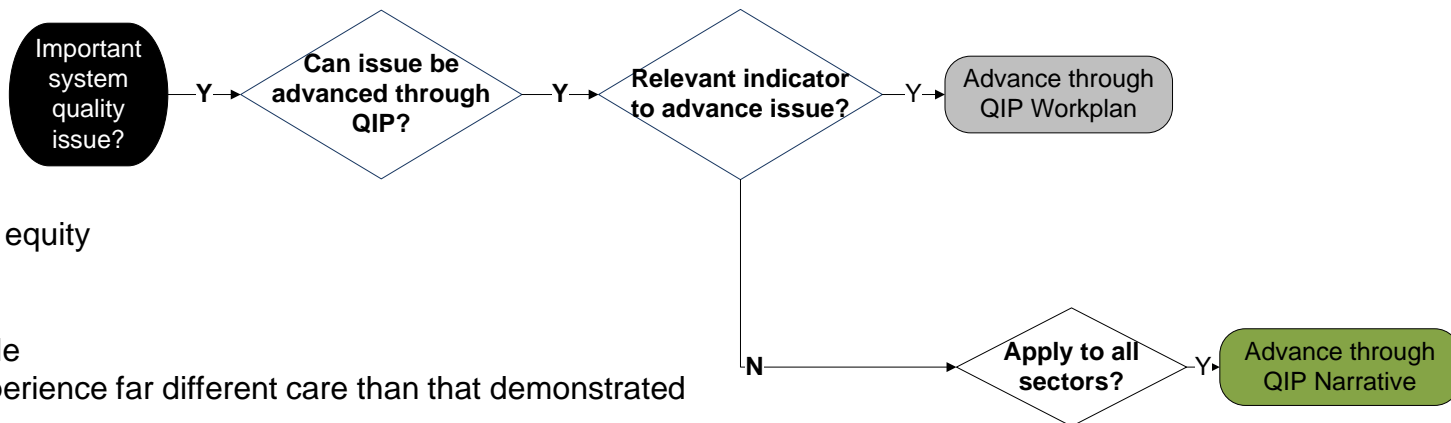
- **7-day post-hospital discharge follow-up**
- **Timely access to primary care provider**
- **Patient experience: decisions about care**
- Hospital readmission rate
- Glycated hemoglobin (HbA1C) testing
- Up-to-date colorectal cancer screening
- Up-to-date cervical cancer screening
- Discharge notification follow-up within 7-days with any clinician
- Medication reconciliation in primary care
- Identified as meeting Health Link criteria offered access
- Overdue colorectal cancer screening (CCO)
- Cervical cancer screening (CCO)

# Determining the priorities for the 2017/18 QIPs

- The Narrative
  - Is an executive summary of your QIP and is intended to introduce specific context for your QIP
  - Is a means for engaging your patients and staff in QI planning
- The Narrative is also a way to capture and understand emerging quality issues
  - For example, equity and workplace violence



# Determining QIP priorities in Narrative



## Example: Equity

**Priority:** Embedding an equity lens into QI initiatives

✓ Important as vulnerable subpopulations may experience far different care than that demonstrated overall

✗ However there is no single indicator to advance this issue.

✓ This issue is also important to all sectors.

✓ Can be advanced through QIP, through QIP narrative.

# Proposed Narrative questions for 2017/18 QIP

## Building on existing questions

- Overview
- QI Achievements From the Past Year
- Integration and Continuity of Care
- Engagement of Leadership, Clinicians and Staff
- Engagement of Patients, Clients, and Residents

## New questions

- Staff Safety and Workplace Violence
- Population Health
- Equity
- Alternate Level of Care (ALC)

# **PLANNING FOR 2017/18 QIPs: NAVIGATOR**

## Navigator key dates and timelines

- Navigator will launch by November 30, 2016
- Log in before March to ensure there are no surprises
- There will be Navigator training sessions this fall and winter to highlight the new functionalities
- Navigator closes briefly in February so that the indicator current performance values can be prepopulated for the other sectors
- Book your Board meetings now to ensure your submission is ready for April 1, 2017.

# New this year: Highlight keyword + word count

\*Key Word or Phrase:  \*Narrative Section:

\*Sector:  \*Model:

\*Fiscal Year:  \*LHIN:

\*Organization:  \*Show Keyword or Phrase Count:

1 of 15 Find | Next

## Parameter Selected

Key Word or Phrase: **discharge**(Count:1328 ), **transfer**(Count:581 )

Narrative Section: ALL

Sector: ALL

Model: ALL

Fiscal Year: 2016/17

LHIN: ALL

Organization: ALL

## Text Report: Narrative

### QI Achievements From the Past Year

Our greatest accomplishment in the previous year has been the gains made in relation to patient flow as a result of the Bed Realignment project which culminated in December 2014. In preparation for Bed Realignment, guidelines were developed to promote the flow of patients across all HPHA sites to promote occupancy of 85% in all in-patient units. As of January 2015, Physician Leads, Team Leaders and Managers from each site meet with the VP Partnerships and Patient Experience and the Manager Patient Flow on a monthly basis. These meetings have enabled open discussion on patient admissions and **transfers** across all sites and have been instrumental in revising and enhancing decision making processes that result in appropriate decisions on patient destinations and the safe **transfer** of patients. Case reviews of admissions and **transfers**, review of data such as the number of off-service medical patients\*, expected daily **discharges** by unit and number of **transfers** site to site are utilized to influence process improvement decisions at this forum. (\*Off-service medical patients are those admitted to another unit such as surgery; an appropriate medical bed may be available at another HPHA site)

# New this year: Indicator type identified

- The QIP Query Reports can be filtered by type of indicator

The screenshot shows a web-based filter interface for QIP Query Reports. The interface is organized into two main columns of dropdown menus. The left column includes fields for \*Sector (Acute Care/Hospital, Community Ca), \*Fiscal Year (2016/17), \*Organization (Access Alliance Multicultural Health a), \*Indicator Type (Custom), \*Current Performance Operator, \*Target Performance Operator, and Measure Keyword. The right column includes fields for \*Model (N/A, Aboriginal Health Access Centre), \*LHIN (6. Mississauga Halton, 7. Toronto Ce), \*Domain (Effective, Efficient, Equitable, Patient), \*Indicator, Current Performance, and Target Performance. A red arrow points to the \*Indicator Type dropdown, which is open and highlighted with a red rounded rectangle. The dropdown menu lists four options: (Select ALL), Priority, Additional, and Custom (which is checked). A 'View Report' button is located on the far right.

*Sector	Acute Care/Hospital, Community Ca	*Model	N/A, Aboriginal Health Access Centre	View Report
*Fiscal Year	2016/17	*LHIN	6. Mississauga Halton, 7. Toronto Ce	
*Organization	Access Alliance Multicultural Health a	*Domain	Effective, Efficient, Equitable, Patient	
*Indicator Type	Custom	*Indicator		
*Current Performance Operator		Current Performance		
*Target Performance Operator		Target Performance		
Measure Keyword				

# Guidance materials for planning the 2017/18

Guidance materials launch  
November 30, 2016

## *Package will include*

- Annual Memo and “What’s New” Supplementation
- Refreshed guidance documents
- Updated indicator technical specifications

Please visit HQO’s website  
for additional resources  
or contact [qip@hqontario.ca](mailto:qip@hqontario.ca)  
for assistance



[www.HQOntario.ca](http://www.HQOntario.ca)

FOLLOW @HQOntario 

For more information on Quality Improvement Plans:  
[QIP@HQOntario.ca](mailto:QIP@HQOntario.ca)



# APPENDICES

# Health Quality Ontario Primary Care Sector Performance



## PRIMARY CARE QUALITY INDICATORS

View and compare the data of the nine primary care quality indicators

[Learn more »](#)



## GUIDE TO PRIMARY CARE REPORTING

Learn more about how we report on performance in the primary care sector

[Learn more »](#)

## PRIMARY CARE PRACTICE REPORTS

Sign up for Primary Care Practice Reports to get customized data reports and quality improvement suggestions for your practice

[SIGN UP](#)



## PRIMARY CARE REPORT: QUALITY IN PRIMARY CARE

Read our public report on how primary care is performing in Ontario

[READ MORE](#)



## QUALITY IMPROVEMENT RESOURCES IN PRIMARY CARE

Learn about programs and resources to support providers improve quality in primary care

[LEARN MORE](#)



# HQO Online Resources

Click on hyperlinked pages or visit [www.hqontario.ca](http://www.hqontario.ca)

## Hospitals

Impressions and Observations  
2015/16 Quality Improvement Plans

Let's make our health system healthier



### QUALITY IMPROVEMENT PLANS REPORTS

We create sector-specific reports that analyze Quality Improvement Plans across the province and highlight exceptional change ideas, emerging trends and lessons learned about what is working and what is not.

[Learn more »](#)

## Health Quality Ontario

The provincial advisor on the quality of health care in Ontario

November 2015

### Indicator Technical Specifications Quality Improvement Plan 2016/17

Impressions and Observations  
2015/16 Quality Improvement Plans

Let's make our health system healthier



### QUALITY IMPROVEMENT PLANS

Submit your Quality Improvement Plan, review other plans for ideas, and learn how to create a Quality Improvement Plan

[Learn more »](#)



### QUALITY IMPROVEMENT WEBINARS

Participate in or listen to webinars on a variety of current quality improvement topics and issues

[Learn more »](#)

Insights into Quality Improvement

### Engaging with Patients:

Stories and Successes  
from the 2015/2016  
Quality Improvement Plans

Let's make our health system healthier



## Quality Rounds Ontario

### QUALITY ROUNDS ONTARIO

Join our educational sessions for province-wide knowledge exchange and idea sharing on topics related to improving the quality of health care

[Learn more »](#)

### INDICATOR LIBRARY

Search Health Quality Ontario's health system performance indicators to find indicators that you can use to customize your organization's Quality Improvement Plan.



### QUALITY COMPASS

To support you in developing your QIPs, visit [Quality Compass](#) to find evidence-based resources, change ideas, targets, measures, and tools for successful implementation.

HEALTH QUALITY ONTARIO'S  
**Quality Compass**  
Navigate from knowledge to action

# Programming Supports

Links to resources	<u>Patient Engagement</u>	<u>Practice Reports</u>	<u>Quality Standards</u>	<u>Equity</u>
Audience	Providers, Organizations, and Patients	Physicians and Interprofessional Teams	Community of Practice members collaborating to implement Quality Standards	All organizations interested in imbedding an equity lens in QI initiatives
Resources	Tools and resources to support patient engagement	For LTC and Primary Care, a resource to collect data from the practice for use in quality improvement	Toolkits and Guidance documents, Community of Practice for peer support	Frameworks and Guidelines
Integration with QIPS	Hospitals required to demonstrate how they engage Patients in developing QIPS	Clinicians access data and receive information about performance and practice performance	There are three indicators in QIPS corresponding to Quality Standards.	Equity one of six quality dimensions measured in QIP (Narrative)