COLLABORATIVE QUALITY IMPROVEMENT PLAN PROGRAM

Guidance Document

2024/25

JANUARY 2024

Ontario Health

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Purpose of This Document

This guidance document is for people who are involved in developing and submitting a collaborative Quality Improvement Plan (cQIP) on behalf of their Ontario Health Team (OHT). It is designed to provide instructions on how to develop (e.g, who should be consulted and what resources are available to help) and submit a cQIP using the online platform *QIP Navigator*. This document also provides links to additional resources.

The cQIP Program

What Is a Collaborative Quality Improvement Plan?

A cQIP is a population health management[1] improvement plan that aligns provincial and local health system priorities with the Quintuple Aim (reducing costs, improving population health, patient experience, provider experience, equity) and that considers populations most at risk. It describes the process that an OHT will work on throughout the year to employ an equity lens systematically to identify and bridge gaps in care using quality improvement and change management principles.

> The cQIP program is related to, but distinct from, the Quality Improvement Plan (QIP) program. The QIP and CQIP programs are complementary – the cQIP program is designed to support multiple partner organizations within an OHT in developing and monitoring common collaborative quality improvement activities, whereas the QIP program focuses on organization-specific quality improvement.
>
> cQIPs should support performance objectives, but an OHT's cQIP is not used as a performance or accountability tool in the way that a service accountability agreement or transfer payment agreement is used; instead cQIPs help OHTs promote quality improvement culture by supporting the identification of shared quality improvement objectives.
>
> Similar to the QIP program, the cQIP program centres province-wide improvement work on a core set of priorities.

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[1]Population health management is an iterative process that involves gathering data and insights from many traditional and nontraditional health partners about an entire defined population's health and social needs. These insights inform the co-design of proactive, integrated, person-centred, cost effective, equitable, and efficient solutions, with the goal of improving the health of individuals. *(Source: Rapid-Improvement Support and Exchange; Health System Performance Research Network. Overview of Population-Health Management [Internet]. Hamilton (ON): The Exchange and the Network; 2012 [cited 2022 Nov]. Available from: https://www.mcmasterforum.org/docs/default-source/rise-docs/infographics/rise_infographic_population-health-mgmt.pdf?sfvrsn=8a028c47_5*

Areas of Focus and Priority Indicators

The areas of focus and priority indicators from 2023/24 will continue to be used in 2024/25. With support from the Ministry of Health, areas of focus were identified by Ontario Health as health priorities for people in Ontario. The growing role of OHTs in the health care system means that OHTs are well positioned to support improvements in these areas. The priority indicators within each of 3 areas of focus are:

- Improving overall access to care in the most appropriate setting
  - Indicator 1: *Alternate level of care days expressed as a percentage of all inpatient days in the same period*
- Increasing overall access to community mental health and addictions services
  - Indicator 2: *Emergency department visit as first point of contact for mental health and addictions–related care*
- Increasing overall access to preventive care
  - Indicator 3: *Percentage of screen-eligible people who are up to date with Pap tests*
  - Indicator 4: *Percentage of screen-eligible people who are up to date with mammograms*
  - Indicator 5: *Percentage of screen-eligible people who are up to date with colorectal tests*

cQIP Program Cycle

The cQIP program runs on an annual cycle. Planning materials are released and updated annually and should be reviewed each year to guide cQIP development. cQIP submissions are due by April 1.
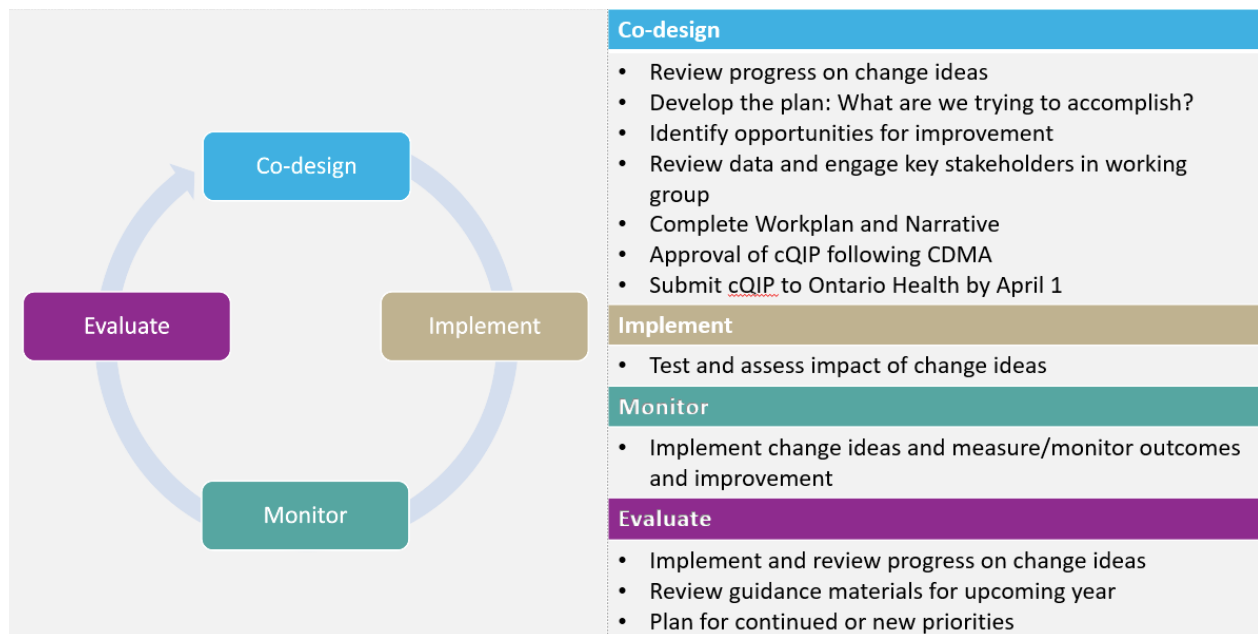
Developing a cQIP

A cQIP is based on the Model for Improvement and consists of 3 components:

- A progress report, in which OHTs reflect on their change initiatives over the past year, including successes, challenges, and lessons learned.
- A narrative, in which OHTs can highlight the quality improvement work of which they are most proud. The narrative is also the place to capture and analyze emerging quality issues.
- A workplan, in which OHTs will set improvement targets for the quality indicators (points of measure that reflect issues of importance to people in Ontario) and describe their planned quality improvement initiatives to achieve these targets.

Using these components, OHTs share their quality improvement story – the status of 2023/24 implementations and quality improvement plan for 2024/25 and future years.

Figure 1. A Typical cQIP Cycle for an Ontario Health Team

Co-design
- Review progress on change ideas
- Develop the plan: What are we trying to accomplish?
- Identify opportunities for improvement
- Review data and engage key stakeholders in working group
- Complete Workplan and Narrative
- Approval of cQIP following CDMA
- Submit cQIP to Ontario Health by April 1

Implement
- Test and assess impact of change ideas

Monitor
- Implement change ideas and measure/monitor outcomes and improvement

Evaluate
- Implement and review progress on change ideas
- Review guidance materials for upcoming year
- Plan for continued or new priorities

Abbreviations: CDMA, collaborative decision-making arrangement; cQIP, collaborative quality improvement plan.

Roles in the cQIP Development Process

cQIP Point of Contact

Each OHT has a cQIP point of contact who is responsible for submitting the cQIP. This process of submission is considered confirmation of the OHT's approval of the cQIP (in alignment with the OHT's

collaborative decision-making arrangement) and acknowledgment of the OHT's ultimate accountability for the following:

- Developing, implementing, and monitoring a cQIP
- Target setting
- Executing quality improvement activities outlined in the cQIP
- Reviewing progress toward implementing the change ideas and achieving targets

cQIP Working Group

It may be helpful to review your OHT's collaborative decision-making arrangement to understand how the OHT has agreed to address quality monitoring and improvement and integrate the cQIP process into governance structures. If needed, it may be helpful to create or refresh a cQIP working group or an OHT quality committee and schedule regular meetings to develop and monitor the OHT's progress on the cQIP throughout the year.

The working group should:

- Represent partners within the OHT
- Include diverse representation from the community and include patients

The working group may be an opportunity to engage with new system partners that are not currently part of the OHT on cQIP change initiatives. The working group should also apply an equity lens when identifying quality improvement activities and ensure representation of the perspectives of people with lived experience; First Nations, Inuit, Métis, and Urban Indigenous populations; Francophone populations; and equity deserving communities, including Black and racialized communities; 2SLGBTQIA+ communities; and people with disabilities.

OHTs are encouraged to identify opportunities to engage with partners when developing cQIPs. Some areas may require multiyear strategies to be successful. Setting graduated targets may be appropriate.

cQIP Requirements

cQIPs are to:

- Identify an improvement target at the OHT-attributed population level (i.e., the networks of patients belonging to specific OHTs) for each indicator
- Outline quality improvement initiatives that OHTs plan to implement over the coming year to improve performance, including process measures and smart goals for those process measures
- Be updated regularly by OHTs with their partners, noting relevant progress and achievements

Resources and Tools

Planning Documents

Ontario Health has developed resources to support the cQIP development process. These documents are available both in QIP Navigator and in the cQIP community of practice (see Attachments tab). The following resources are updated annually and should be reviewed by the OHT each year to guide cQIP development:

- *Collaborative Quality Improvement Plan Program: Guidance Document 2024/25* (i.e., the one you are reading) is designed to inform and provide instruction on how to prepare, who should be consulted, and how to develop and submit a cQIP
- *Collaborative Quality Improvement Plan Program: Narrative Questions 2024/25* is a document which can be used to help you summarize your OHT's cQIP, providing an opportunity to describe to your community your OHT's work on a few quality issues. Each section has guiding questions or prompts to help set the stage to describe your OHT's quality initiatives
- *Collaborative Quality Improvement Plan Program: Indicator Technical Specifications 2024/25* presents detailed definitions of each indicator and how it will be measured. Throughout the year, the cQIP team at Ontario Health will be available to respond to questions and concerns related to how to use this information. For data questions please reach out to OHT Analytics Support at OHTanalytics@ontariohealth.ca,and for general cQIP questions, please reach out to QIP@ontariohealth.ca

OHT Data Dashboard cQIP Report

This interactive report contains data pertaining to the cQIP quality indicators as well as data for some additional measures that provide further context on how the OHT is performing in each area of focus. To get access to the data dashboard, contact OHTanalytics@ontariohealth.ca.

Ontario Health may provide additional data related to the other priority areas of focus that may be useful for context and planning purposes. Additional supporting measures may be available in the dashboard and also included as supplementary indicators in the technical specifications as a reference.

Change Packages

For each area of focus, change concepts and change ideas that are related to the issue and drawn from the evidence are provided. Change packages with suggested changed ideas are available on QIP Navigator Resources – Ontario Health Team page or the cQIP community of practice. Visit the OHT Shared Space or cQIP community of practice to access the most up-to-date resources.

For those who are new to cQIP or quality improvement, review information on change concepts and ideas and on how to use the Plan-Do-Study-Act cycle for testing change ideas.

Quality Improvement Resources

Anyone new to cQIP or interested in refreshing knowledge related to quality improvement may use this [link to Quorum to access helpful videos and resources](#). RISE (i.e., [Resources to support patient, family and caregiver engagement and partnership](#)) population health management coaches are also available to OHTs to support teams with cQIPs, including how to leverage population health management principles in the quality improvement.

Drop-in Sessions

Informal weekly, drop-in sessions are scheduled and facilitated by the cQIP support team who will be available to answer your questions and offer advice on developing or working on your cQIP. Visit the [cQIP community of practice](#) or [QIP Navigator](#) for dates and details on how to register.

Submitting a cQIP

Using QIP Navigator

QIP Navigator is a convenient online tool and Ontario Health's platform to build, submit, and report progress annually on cQIPs. QIP Navigator is also the source for tools and resources to develop an annual cQIP and includes a searchable database of all previously submitted cQIPs (Query QIP). Each OHT has only a single set of credentials (i.e., 1 username and 1 password) for the cQIP point of contact to access QIP Navigator. Updates to the cQIP point of contact information can be made in the profile section of QIP Navigator. If you are unsure of the point of contact email associated with the account, you can contact the cQIP team at QIP@ontariohealth.ca.

Components of the cQIP

A cQIP consists of 3 components: a progress report, a narrative, and a workplan. Each section reflects an integral part of the quality improvement planning process. Together, these sections tell your communities your OHT's quality improvement story for the current year and plans for the year ahead.

Progress Report

The purpose of the progress report is to highlight how your OHT, with its partners, has improved care in your community through improvement efforts outlined in the cQIP. The Progress Report includes information about the previous year performance, target set, change concepts selected, successes and challenges experienced, and progress made toward targets, including learnings about what worked and what did not. This information is a great starting point for determining areas for improvement, targets, and change concepts to include in your cQIP for the coming year.

Information Automatically Generated in QIP Navigator

The following information will be automatically generated in the progress report section of QIP Navigator each year (Figure 2, outlined in red):

- Indicators and change ideas included in the previous year's cQIP workplan
- Performance as stated from the previous year's cQIP
- Process measures from the previous year's cQIP
- Targets set in the previous year's cQIP
- Your OHT's current performance for cQIP priority indicators

Figure 2. Information to include in cQIP Progress Report

ID	INDICATOR (UNIT; POPULATION; PERIOD; DATA SOURCE)	ORG ID	PERFORMANCE STATED IN PREVIOUS QIP	PERFORMANCE TARGET AS STATED IN PREVIOUS QIP	CURRENT PERFORMANCE	COMMENTS	RESULTS	ACTIONS

CHANGE IDEAS FROM LAST YEAR'S QIP	WAS THIS CHANGE IDEA IMPLEMENTED AS INTENDED	PROCESS MEASURES FROM LAST YEAR'S QIP	LESSONS LEARNED: •WHAT WERE YOUR SUCCESSES AND/OR CHALLENGES?

Information That is Required for the Progress Report

OHTs will need to input the following information (Figure 2, outlined in blue):

- Current performance for indicators that are measured using self-reported data, such as custom indicators
- For each change idea, identify whether it was implemented or not
- Lessons learned: Describe the key learnings from your experience working on the improvement initiative. Include advice for other OHTs attempting a similar initiative. (e.g., what made the change idea successful or what were the barriers that prevented successful implementation?)
- When completing this section, consider the following topics and incorporate this information in the cQIP:
    o What are the root causes of current performance?
    o Were the proposed change concepts adopted, amended, or abandoned? Why or why not?
    o If implemented, have the changes helped the OHT meet or exceed the target set? What change concepts were the most successful?
    o If not implemented, what challenges were experienced and what was learned?
    o How will the OHT leverage the learnings from quality improvement activities and further improve on this indicator with the next cQIP?
- Comments: Use this section to outline any challenges to meeting the targets set or details you want to share with others about this initiative
- Results: Upload any results (e.g., a graphic or run chart) to illustrate progress on the indicator

Narrative

The narrative is an opportunity to describe the context in which your OHT's quality improvement activities take place and share your plans to improve the quality of care provided. It sets the stage for the key quality initiatives that will be outlined in the workplan but should be brief and easy to understand. In QIP Navigator, you will be prompted with questions related to a few quality issues.

Workplan

The workplan is the forward-looking portion of the cQIP that identifies indicators, quality improvement targets, and planned improvement initiatives or change ideas that your OHT will commit to for the coming year. Some improvements may require multiyear strategies to be successful, and setting graduated, multiyear targets and plans may be appropriate. OHTs are strongly encouraged to identify their partnerships with health service or other nonmedical organizations and include these collaborations in their cQIP.

For each area of focus in the workplan, OHTs will need to identify the following:

- MEASURE – How will we know that change is an improvement?
- CHANGE – What changes can we make that will result in improvements?

To know that a change is resulting in improved outcomes, it is essential to measure progress and compare results against baseline. Current performance data is either prepopulated or self-populated in QIP Navigator. Here is a description of what will be included in each step of this section.

Table 1. Workplan: Measure Fields in QIP Navigator

Field name	Description
Measure/indicator	Indicators are measures of specific data points that can be monitored over time. They enable teams to identify areas that need addressing and support shared quality improvement objectives.
Type	*Priority indicators* – Within the 3 areas of focus, there are 5 associated priority indicators that are included. *Custom indicators* – Custom indicators may be included for the area of focus, in which case the following fields are required: *area of focus, indicator name, unit of measure, time period, data source, and target population*.
Unit/population	Describe the priority populations for this indicator and/or sub-populations that may be at risk.
Current performance	This field is the current performance for the indicator. Current performance data will be prepopulated for OHTs in QIP Navigator by Ontario Health for the priority indicators using validated data from the source identified in the indicator technical specification. For custom indicators, OHTs will need to enter their own local data.
Target performance	This field represents the target that OHTs have set for the indicator. Input the target the OHT expects to meet or exceed. Setting an aspirational target requires evaluation of the OHT's current performance on the indicator and careful assessment of what is feasible given the local and broader health care environment.

Field name	Description
	Note: When setting targets, OHTs are expected to aim for high-quality care (aspirational) balanced with what can be done (achievable). Retrograde targets, a target in which the goal is set to perform worse that the current performance, should not be selected.
Target justification	Describe why the OHT selected this quality improvement target(s) for the coming year.
External collaborators	Include all partner(s) that are involved in working on this issue or indicator. A collaborator report can be exported once completed.

Workplan: Entering Change Fields in QIP Navigator

Except for the Comments section, each field in the change section has a 15-character minimum.

Field: Planned Improvement Initiatives (Change Ideas)

Making changes that result in measurable improvement is the goal of the cQIP. Given the scale and scope of OHTs, focusing on improvement initiatives is critical. A change concept is a "general notion or approach to change" that prompts specific ideas for changes that lead to improvement. Change ideas, on the other hand, are specific, practical strategies that focus on improving aspects of a system, process, or behaviour. Change ideas, also known as improvement initiatives, can be tested, and measured so that the results can be monitored.

There are "hover help" symbols in QIP Navigator that link to best practice change ideas and resources. OHTs can align key initiatives with these concepts.

 Look for this symbol in QIP Navigator to access additional resources and guidance through hover help

- List 1 change idea per row (rather than adding them as a group within a single cell) to determine the effectiveness of each change idea in supporting quality improvement goals. **The change ideas included in this section of your workplan will appear in next year's progress report so results can be reported for each.**
- Include at least 1 corresponding process measure (how you will measure impact; see *Field: Process measures* section below) for each change idea. Include at least one corresponding process measure (how you will measure impact for each change idea)
- Review QIP Navigator OHT Resources or cQIP community of practice for information about change concepts and ideas and about using the Plan-Do-Study-Act cycle for testing change ideas.

Field: Methods (How the OHT Will Implement the Change Idea)

- Identify the processes and tools your OHT will use to regularly monitor progress on your quality improvement activities and tests of change. Include details on how and by whom data on change

ideas will be collected, analyzed, reviewed, and shared. Describe any collaborations with partners and the roles that each will play here.

Field: Process Measures (How the OHT Will Measure the Success or Progress of its Methods)

- Process measures should be carefully selected to directly gauge the impact of the change ideas on the process(es) needing improvement (e.g., Is the new process better? How is this known?). This information will help you determine if the change idea(s) should be adopted, adapted, or abandoned.
- Process measures must be quantifiable and reportable as rates, percentages, or numbers over specific timeframes. Visit Quorum for more information about creating process measures and measurement plans.

Field: Target for Process Measure (How the OHT Will Know It Is Successful)

- List the numeric target related to the process measure chosen to measure a change idea. Because there is a minimum character limit, list the target in sentence form. Include the goal, the target number, the rate, and the time frame.
    - For example, "We aim to increase/reduce _____ by _____%, from _____ to _____, by _____."

Field: Comments

- Provide any additional comments about the quality improvement initiatives. These can include factors for success, partnerships, barriers, links to other programs, etc.

Submission

Once a cQIP is complete and approved by the OHT, the cQIP point of contact is responsible for submitting the cQIP using QIP Navigator.

General Tips

- Engage partners and start as soon as possible. Begin developing the cQIP in the fall by reviewing resources listed above when released.
- When accessing QIP Navigator, download drafts and share with OHT partners to encourage input.
- Review current performance data for your OHT. Current performance data will be prepopulated in the cQIP for the priority indicators. Use the current performance data for your OHT to set a target for improvement for each indicator. Targets are to be set and agreed to by the OHT. Ontario Health provides interactive performance data and analytics for the quality indicators in the cQIP Report on the OHT Data Dashboard for further insights and ongoing performance monitoring. To request access to this report, contact OHTanalytics@ontariohealth.ca.
- Plan ahead to present the completed draft of the cQIP to OHT partners to endorse and approve.

- Contact [RISE](#) population health management coaches who are available to support you in understanding how to connect your cQIP work to your priority population work.
- Ensure your OHT's cQIP is complete and submitted in QIP Navigator by April 1, 2024.

Implementing the cQIP Workplan

A cQIP involves much more than simply developing and submitting a document to Ontario Health. The changes outlined in the plan are meant to guide the team's work throughout the year and should be reviewed monthly to ensure collaborative progress. The cQIP is a roadmap to improvement and reaching shared goals.

Monitor Performance Frequently

A central tenet of quality improvement is monitoring progress and understanding whether the changes being made are resulting in improvement. It is critical to establish a schedule for regular data review and reporting, communicating trends within your OHT, and identifying emerging performance issues early so they can be resolved in a timely manner.

It can be helpful to reserve time to review cQIP progress as a regular agenda item in meetings with active members. Celebrate successes and where improvement is not occurring, leave time to study and plan next steps.

Consult Additional Resources

You are encouraged to submit all questions to the cQIP community of practice so that the larger group can benefit from the questions, answers, and surrounding discussion. The community of practice is supported by quality improvement specialists at Ontario Health.

You can also reach a quality improvement specialist by email at QIP@ontariohealth.ca, or you can reach out to your Ontario Health regional contact.

cQIP Community of Practice

OHT cQIP points of contact are encouraged to join the cQIP community of practice, available through OHT Shared Space, which offers support for the successful development and implementation of the cQIP. In this group, members will be able to:

- Get questions answered in a spaced dedicated to quality improvement in OHTs.
- Access specific resources and supports to assist with submission
- Get notified of any upcoming cQIP events, webinars, or educational opportunities.
- Share local best or leading practices and adapt resources to advance quality plans.
- Identify emerging opportunities and address common barriers to cross-OHT collaboration.
- Learn more about some of the indicators featured in this year's cQIP program.

To join the cQIP community of practice:

1. Visit the OHT Shared Space and click SIGN UP to create an account.

2. Visit the [cQIP community of practice](#) and click the JOIN GROUP button. A notification will be sent to users via email confirming acceptance into the group.

3. Click on the "SUBSCRIBE TO UPDATES" button once you are accepted into the group to receive an email notification when there is new activity, such as upcoming webinars and posted resources.