

December 12, 2018

Re: Annual Priorities for the 2019/20 Quality Improvement Plans

Dear Colleagues,

I am pleased to be writing you about this year's annual quality priorities for the Quality Improvement Plan (QIP) program. As we have communicated previously, this will be a year of change to the QIP program – we hope to simplify, bring a stronger focus to a smaller number of priorities, and increase the ability to impact meaningful improvements in care.

[Measuring Up 2018](#), our yearly report on the performance of the province's health system, launched a few weeks ago. This report highlights that many parts of our health care system are under increased strain and draws particular attention to issues of hospital overcrowding and backlogs throughout the system. We know that these issues impact the experience of patients, but also the experience of their family members and friends, as well as the health care providers who deliver their care.

There are also bright spots – more patients are starting to receive palliative care in their homes in their last days of life, and fewer children and youth are having their first care for a mental health condition occur in the emergency department. These types of improvements are a testament to the combined and unceasing efforts of front-line providers, those with lived experiences, and quality improvement leaders who are committed to a singular goal of improving care for Ontarians. With focus, commitment, and support, these individuals and teams show that better patient care is possible.

Changes to the QIP program for 2019/20

We outlined some planned changes to the QIP program in a [memo](#) released in October 2018. The changes respond to feedback from an evaluation of the QIP program and other stakeholder consultations conducted over the past year, as well as recent recommendations of the Auditor General of Ontario in her annual report. The changes also reflect shifts in the environment to new priorities. Our hope is that with strong alignment of the QIP program to system priorities, QIPs can support organizations to address the issues that matter to patients and the public of Ontario, including hallway health care, mental health care, and service excellence.

Planned changes to the QIP program over the next few months:

1. Fewer and more focused priorities and ambitious targets

A list of the QIP priorities and indicators for 2019/20 is presented in Appendix A, and the prompts to be answered in the 2019/20 QIP Narrative are outlined in Appendix B.

This year we are reducing the priorities to focus on three core themes: timely and efficient transitions, service excellence, and safe and effective care. These themes reflect significant quality gaps within the system and areas that matter to patients and their families and remain grounded in the six domains of quality that reflect a health system that is timely, efficient, effective, safe, patient-centred, and equitable. Within these themes, we have reduced the number of indicators from approximately 60 (across all four sectors) in the 2018/19 QIPs to approximately 30 in the 2019/20 QIPs.

We recommend that organizations strongly consider focussing on this year's priorities in their QIP given their alignment to current system issues, unless they are already performing well on the indicator (for example, significantly better than the provincial average or benchmark). In particular, we encourage organizations that have relatively low performance on priority indicators to select and work on these.

We also advise organizations to take advantage of the smaller number of priorities to consider setting more ambitious targets. Health Quality Ontario will provide more guidance and support on target setting this year.

2. Reflecting your collaborative quality improvement efforts

The evaluation of the QIP program showed that 60% of organizations are keen to pursue more collaborative improvement efforts. We know that complex health system priorities like access and timely transitions cannot be addressed without the combined efforts of organizations across sector. We encourage you to work with others to define these quality goals. Beginning in 2019/20, the QIP has been designed to reflect these joint commitments including functionality in the QIP Navigator that will allow organizations to reflect their partnerships with other organizations on specific quality themes and indicators.

3. Implementation support

We are increasing our support for the implementation of changes reflected in the QIP and to create more opportunities to learn from each other. These supports will be available to all organizations, and we will specifically reach out to organizations with lower performance. We will roll out these supports over the coming year, beginning in mid-January. In the meantime, please access our guidance materials and tools related to [workplace violence prevention](#), [patient relations](#), and [patient partnering](#). [Quorum](#), Ontario's online health care quality improvement community, includes [stories](#) of how organizations across the province have been successful with their quality improvement efforts. We will also soon be launching a guidance document designed to specifically support organizations that are interested in incorporating equity into their QIP.

Priority Themes and New Indicators for the 2019/20 QIPs

A list of the QIP priorities and indicators for 2019/20 is presented in Appendix A, and the prompts to be answered in the 2019/20 QIP Narrative are outlined in Appendix B.

The following describes the priority quality themes and indicators for 2019/20.

Mandatory indicators (hospital sector only)

A focus on specific areas of quality for all hospitals is established through the mandatory indicators. These are confirmed at the direction of the Minister of Health and Long-Term Care with advice from Health Quality Ontario.

For the hospital sector, there will be two mandatory indicators in the 2019/20 QIPs:

- **Time to inpatient bed:** This is an important indicator to support timely access to care and high-quality patient-centred care. This indicator aligns with current requirements of the Pay-for-Results Program in the hospital sector. While this is a hospital indicator, the work to improve upon it will involve all sectors working together to improve how patients move throughout the system. We encourage organizations in all sectors to consider how they can work with their hospital partners to address this issue.
- **Number of workplace violence incidents (overall):** Hospitals demonstrated leadership in 2018/19 when this was first included to improve safety for those working in hospitals. The intent is to continue these efforts. This year, an updated guidance document to support organizations with this indicator, including case studies, will be available.

Theme 1: Timely and efficient transitions

Transitions are a linchpin of the health care system and a point at which patients often fall through the cracks. When transitions go poorly, we often see backlogs in the system – for example, the increasing number of hospital beds occupied by patients waiting to receive care elsewhere (see [Measuring Up 2018](#)). While these issues may manifest in one part of the system, addressing them requires all organizations and sectors to come together to ensure that patients are getting the care they need, when and where they need it.

Within the theme of timely and efficient transitions, there is a continued focus on topics such as potentially avoidable or unplanned emergency department visits and post-discharge follow-up in primary care.

There are also three new indicators that focus on:

- **Number of inpatients receiving care in unconventional spaces** (hospital sector)
- **Time to inpatient bed** (hospital sector)
- **Wait time to long-term care home placement** (home and community care sector)

Theme 2: Service excellence

This theme relates to how patients perceive and experience their care. The indicators address patients' experiences of transitioning from the hospital back to the community, their overall satisfaction and experience of care, how we manage complaints from patients, and how patients are involved in decisions about their care.

Themes 3: Safe and effective care

A cornerstone of quality is that the care that patients receive should be safe and effective. Several previous indicators in this theme have been maintained for 2019/20.

There are two new indicators in this theme:

- **Percentage of non-palliative care patients newly dispensed an opioid** (primary care sector)
This indicator aligns with the [MyPractice: Primary Care Report](#), which provides primary care physicians with information about their opioid prescribing patterns. Health Quality

Ontario has several related [quality standards](#) and [resources](#) available to support teams in this area.

- **Early identification: Documented assessment of needs for palliative care patients** (all sectors)

This new priority is designed to more proactively identify patients that might benefit from a palliative approach to care. It aligns with Health Quality Ontario's [palliative care quality standard](#) (see Quality Statement 1: Identification and Assessment of Needs), with the overall goal of improving timely connections with appropriate services. As an active member of the [Ontario Palliative Care Network \(OPCN\)](#), Health Quality Ontario will work with them to promote resources and other supports for teams focussed on this priority. This indicator also aligns with the [OPCN Action Plan](#). We encourage you to connect with the [OPCN regional programs](#) to align with planned local improvements. Finally, we encourage you to pay particular attention to patients with complex needs – we know that those patients who have had a more intensive focus on care coordination through the health links approach to care are the ones that could most benefit from earlier identification of palliative care needs.

Next Steps


We are committed to supporting you with your submission for this year and the overall work you do to support patients and to offer them the best care possible. More information will be sent in the coming weeks regarding the guidance and technical specifications, QIP Navigator, and additional training opportunities. QIP Navigator is scheduled to open in January, and the QIPs are due to be submitted by April 1. **We will be hosting webinars on December 17, 12:00 – 1:00 PM and December 19, 2:00 – 3:00 PM ([register here](#))** that will provide more information on the QIP priorities and indicators. We encourage you to attend one of these webinars to learn more and reach out to us at QIP@HQOntario.ca if there is anything we can do to help.

Thank you again for your ongoing commitment to quality improvement – we have seen that improvements are possible when teams of front-line providers, patients and families, organizations, and sectors come together to implement change and strive for better. We look forward to working with you to improve care for the people of Ontario.

Regards,



Lee Fairclough
Vice President, Quality Improvement
Health Quality Ontario



Anna Greenberg
Interim President and Chief Executive
Officer
Health Quality Ontario

Appendix A. Quality Priorities for the 2019/20 Quality Improvement Plans

	Hospital	Primary Care	Home and Community Care	Long-Term Care
Efficient	THEME I: TIMELY AND EFFICIENT TRANSITIONS			
	<ul style="list-style-type: none"> Alternate level of care (ALC) rate NEW Number of inpatients receiving care in unconventional spaces 	<ul style="list-style-type: none"> 7-day post-hospital discharge follow-up 	<ul style="list-style-type: none"> Unplanned emergency department visits within 30 days of hospital discharge 	<ul style="list-style-type: none"> Potentially avoidable emergency department visits
Timely	<ul style="list-style-type: none"> NEW Time to inpatient bed * Discharge summaries sent from hospital to community care provider within 48 hours of discharge 	<ul style="list-style-type: none"> Timely access to a primary care provider 	<ul style="list-style-type: none"> NEW Wait time to long-term care home placement 	
	THEME II: SERVICE EXCELLENCE			
Patient-Centred	<ul style="list-style-type: none"> Patient experience: Did you receive enough information when you left the hospital? Complaints acknowledged in a timely manner 	<ul style="list-style-type: none"> Patient involvement in decisions about care 	<ul style="list-style-type: none"> Percentage of patients satisfied with services Complaints acknowledged in a timely manner 	<ul style="list-style-type: none"> Resident experience Complaints acknowledged in a timely manner
	THEME III: SAFE AND EFFECTIVE CARE			
Safe	<ul style="list-style-type: none"> Number of workplace violence incidents (overall) * 	<ul style="list-style-type: none"> NEW Percentage of non-palliative care patients newly dispensed an opioid 		
	<ul style="list-style-type: none"> NEW Early identification: Documented assessment of needs for palliative care patients Readmission within 30 days for mental health and addiction Medication reconciliation at discharge 	<ul style="list-style-type: none"> NEW Early identification: Documented assessment of needs for palliative care patients 	<ul style="list-style-type: none"> NEW Early identification: Documented assessment of needs for palliative care patients 	<ul style="list-style-type: none"> NEW Early identification: Documented assessment of needs for palliative care patients
Effective				
	Equitable			

Updated: December 7, 2018

* Mandatory indicator (hospital sector only)

Appendix B. Narrative Prompts for the 2019/20 Quality Improvement Plans

Overview

Include a brief description of your organization and an introduction to your organization's Quality Improvement Plan (QIP).

Imagine you are telling a member of the public about your organization – some key facts, what you do, who your clients are, and your focus of care. Include a description of how you work to improve care for any specific under-served populations you might serve.

For the introduction to your QIP, include an overview of the key areas of focus for your QIP. Think of this as an executive summary that helps to contextualize and connect the different parts of the QIP.

Suggestion: Upload your organization's logo here.

Describe your organization's greatest quality improvement achievement from the past year

Provide a story about a specific quality improvement achievement that your organization is proud of. Try to think of this as a "bright spot" that can be shared with other organizations. The story should include results from the improvement initiative (for example, data demonstrating the impact of your project or program).

The purpose of this section is to demonstrate what is possible and inspire teams within your organization to continue to do more in the year ahead.

Suggestion: Upload graphs or photos of your results here.

This year, we are particularly interested in achievements that focus on any of the following priority areas:

- Access and transitions – for example, stories related to helping people receive the right care in the right place at the right time
- Mental health and addictions
- Opioids

Suggestion: For inspiration, visit [Quorum](#) to read about other organizations' greatest quality improvement achievements.

Patient/client/resident partnering and relations

Briefly outline how you partnered with patients/clients/residents in your quality improvement initiatives this year, including in the development of this QIP. Can you identify examples where their input has had an impact on your quality improvement initiatives? For example, have patients/clients/residents helped to choose areas of focus for your QIP, contributed change ideas, or co-designed/co-delivered quality improvement activities? Have you identified any broader impacts on staff, the patients/clients/residents who were engaged, or those being served by your organization?

Workplace violence prevention

Is workplace violence a strategic priority for your organization? (yes/no).

If yes, describe how it is a priority – for example, is it included in your strategic plan, do you report on it to your board, or have you made significant investments to improve in this area?

Compensation (hospitals only)

Please describe how you have connected executive compensation to the priorities in your QIP, with special consideration for the priority and mandatory QIP indicators. For guidance on how to complete performance-based compensation, please review **Performance-Based Compensation and the Quality Improvement Plan:**

http://www.health.gov.on.ca/en/pro/programs/ecfa/legislation/performancecomp/abc_update_20111122.pdf