



# Collaborative Quality Improvement Plan

Guidance Document

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# The Purpose of this Guidance 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 inform and provide instruction on how to prepare for the cQIP, who should be consulted, how to develop and submit the cQIP through the online platform, and available resources. This guidance document was developed with feedback from OHTs, RISE coaches, and the Health System Performance Network (HSPN).



## What is a collaborative Quality Improvement Plan (cQIP)?

A cQIP is based on the Model for Improvement<sup>1</sup> and consists of two components:

1. A Narrative, where OHTs provide context for their quality improvement work by describing their OHT and the population they serve. The Narrative is also the place to capture and analyze emerging quality issues (e.g., patient and provider experiences), and
2. A Workplan, where OHTs will set improvement targets for the quality indicators (points of measure that reflect issues of importance to Ontarians; more on this below) and describe their planned quality improvement initiatives to achieve these targets

Together, these components tell your OHT's quality improvement story for 2022/23 and plans for future years.

The cQIP is related to, but distinct from, the provincial Quality Improvement Plan (QIP) for many individual health care organizations. The cQIP is designed to support multiple partner organizations within an OHT in developing and monitoring common quality improvement activities, whereas the QIP focuses on organization-specific issues. These two documents should ideally be complementary.

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<sup>1</sup> Langley GJ, Moen RD, Nolan KM, Nolan TW, Norman CL, Provost LP. The improvement guide: a practical approach to enhancing organizational performance. John Wiley & Sons; 2009 Jun 3.

The cQIP should support performance objectives, but it is not a performance or accountability tool (in the way that a service accountability agreement or transfer payment agreement would be). It is one of many tools that help OHTs promote a culture of quality improvement and it supports the identification of shared quality improvement objectives. Building on the foundation of Ontario’s QIP program, the cQIP centres the improvement work of all OHTs on a core set of priorities.

**A cQIP is:**

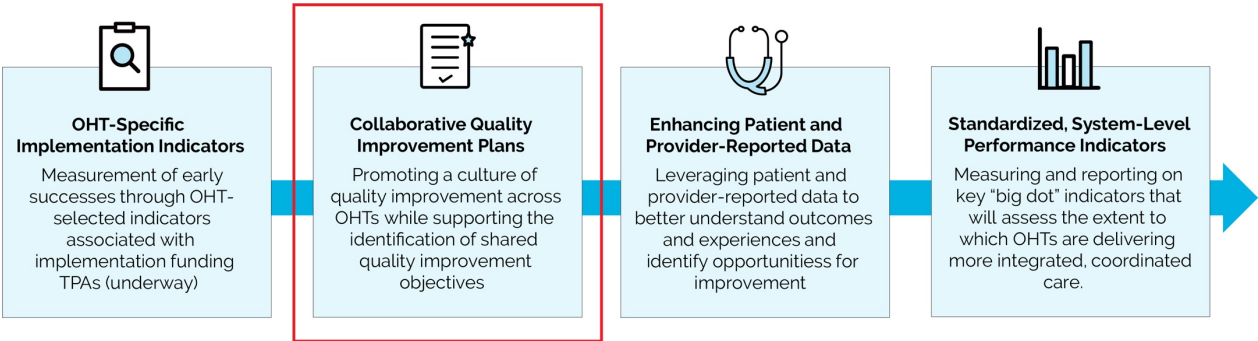
- An improvement plan that aligns provincial and local health system priorities with the Quadruple Aim and that considers populations most at risk
- A process that OHTs work on throughout the year to systematically identify and bridge gaps in care, using quality improvement and change management principles and employing an equity lens



**Why are Ontario Health Teams (OHTs) required to submit cQIPs?**

Ontario Health Teams are transforming the health care system by organizing and delivering care in a way that is more connected to patients and their local communities. Through the OHT model, health care providers work as one coordinated team—no matter where they provide care—making it easier for patients to navigate the system and transition between providers and care settings. As part of this vision, a standardized [performance measurement framework](#) for OHTs is in place.

The OHT performance measurement framework consists of the phased implementation of four core components:



Source: [https://health.gov.on.ca/en/pro/programs/connectedcare/oht/docs/OHT\\_Performance\\_Framework\\_Webinar.pdf](https://health.gov.on.ca/en/pro/programs/connectedcare/oht/docs/OHT_Performance_Framework_Webinar.pdf)

For the first phase of the OHT performance measurement framework, OHTs are required to measure their early successes through OHT-specific implementation indicators associated with implementation-funding transfer payment agreements (TPAs). Ontario Health Team-specific implementation indicators are used by the Ministry of Health (ministry) and OHTs to 1) identify early successes in improved population health outcomes and 2) understand potential challenges experienced by OHTs as they move along the maturity pathway to become an integrated team.

The second phase of the OHT performance measurement framework is about promoting a culture of quality improvement through the establishment of a cQIP program—shifting OHTs toward team-based rather than sector/organization-based improvement goals and ultimately measuring improvements in health outcomes at the population-health level. This shift supports the foundational objective of the OHT model: better coordinated, integrated care that delivers improvements on the Quadruple Aim.

To support these improvement efforts, the ministry introduced a requirement (via implementation-funding TPAs) that OHTs submit a cQIP by March 31, 2022. Collaborative QIPs are developed using a format established by the ministry and Ontario Health, in accordance with ministry direction, that enables province-wide comparison on a minimum set of quality indicators.

Much like OHT-specific implementation indicators, results and tracking of mandatory cQIP indicators will not be publicly posted at this time.

Collaborative QIPs are new to OHTs and it will take time to get structures and processes in place to enable active patient, family, and caregiver partnerships to capture your team's full attributed population. The first cQIP is about establishing your team's baseline, working together to foster community and patient engagement in quality, and shaping OHT development and planning for 2022/23 and beyond. There will be opportunity within this process to report on progress and describe new or altered improvements. The ministry, Ontario Health, and broader support partners are working to build an enabling infrastructure to ensure that the important work of developing cQIP is not an additional burden. For example, performance measurement and quality improvement activities are an eligible expense under the TPA. Additional resources, like population health management coaching and associated learning collaboratives, are also [available through the OHT Central Program of Supports](#).

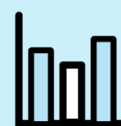


## Introduction to the 2022/23 cQIP structure

There are three key areas of focus mandated for OHTs in 2022/23, each with associated quality indicators: improving overall access to care in the most appropriate setting, mental health and addictions (MHA) support in the community, and preventative screening in primary care. These areas of focus were identified by Ontario Health, with support from the ministry, as priorities for the health of Ontarians and the indicators support COVID-19 recovery. The growing role of OHTs in the health care system means OHTs are well placed to support improvements in these areas.

**Figure 1.**

**For 2022/23, improvement on the three areas of focus will be measured using the following five indicators:**



- Improving overall access to care in the most appropriate setting
  1. *Indicator:* Percentage of alternate level of care days
- Increasing overall access to community MHA services
  2. *Indicator:* Rate of emergency department visits as first point of contact for MHA-related care
- Increasing overall access to preventative care
  3. *Indicator:* Percentage of screening-eligible patients up to date with Papanicolaou (Pap) tests
  4. *Indicator:* Percentage of screening-eligible patients up to date with mammograms
  5. *Indicator:* Percentage of screening-eligible patients up to date with colorectal screening

For their cQIPs, Ontario Health Teams will:

- Identify an improvement target at the [OHT-attributed population level](#) (i.e., the networks of patients belonging to specific OHTs) for each of the indicators
- Outline the quality improvement initiatives they plan to implement between April 1, 2022 and March 31, 2023 to assist in improving performance
- Review their plans and provide feedback on progress—OHTs can report at the mid-year point (October 22) and end of year (March 2023)

Finally, as outlined in “[Guidance for Ontario Health Teams: Collaborative Decision-Making Arrangements for a Connected Health Care System](#),” and required in the TPA, all approved OHTs have established a collaborative decision-making arrangement (CDMA) among leaders from multiple organizations within the OHT (also referred to as OHT members or partners). Approval of cQIPs should follow the established decision-making parameters outlined in teams’ CDMA.



## The cQIP online platform

Ontario Health has created an online platform (cQIP Navigator) for OHTs to use to build, submit, and report progress on their cQIPs. In addition to data on the five indicators associated with the three key areas of focus (Figure 1), data on supporting measures (see below) will be provided to support further understanding of each OHT's current performance.

Ontario Health Teams will have access to their baseline-level data for the quality indicators (i.e., “current performance”) at both an OHT-attributed population level and at an organization level, where available.

**Ontario Health Teams will then identify an improvement target at the OHT-attributed population level for each of the indicators.** In addition, an OHT may also choose to include a custom area of focus, with its own custom indicators, or to also include additional custom indicators in each mandated area of focus. Additional indicators are optional.

Ontario Health Teams are expected to aim for high-quality care (aspirational) balanced with what can be done (achievable). Ontario Health and the ministry are looking for a demonstrated intent to improve (found in the direction of the target and the target rationale) and details on how improvement will be accomplished with partner, patient, and provider involvement.

Suggested evidence-based change concepts connected to each area of focus will be offered through the cQIP Community of Practice. The OHTs can use these change concepts to categorize and outline the major quality improvement initiatives they plan to implement over the coming year. Custom change concepts can also be chosen. Teams may be asked to review their progress; however, this will be based on capacity of health system partners.

### Supporting measures

Ontario Health will aim to provide additional data related to the mandatory areas of focus that may be useful for context and planning purposes. For example, wait time to home care would be a helpful supporting measure for the ALC mandatory indicator. These data will be made available to OHTs on an ongoing basis. Parameters for these supporting measures are not included in the technical specifications and do not require targets; they are merely for reference.



## Requirements for submitting a cQIP

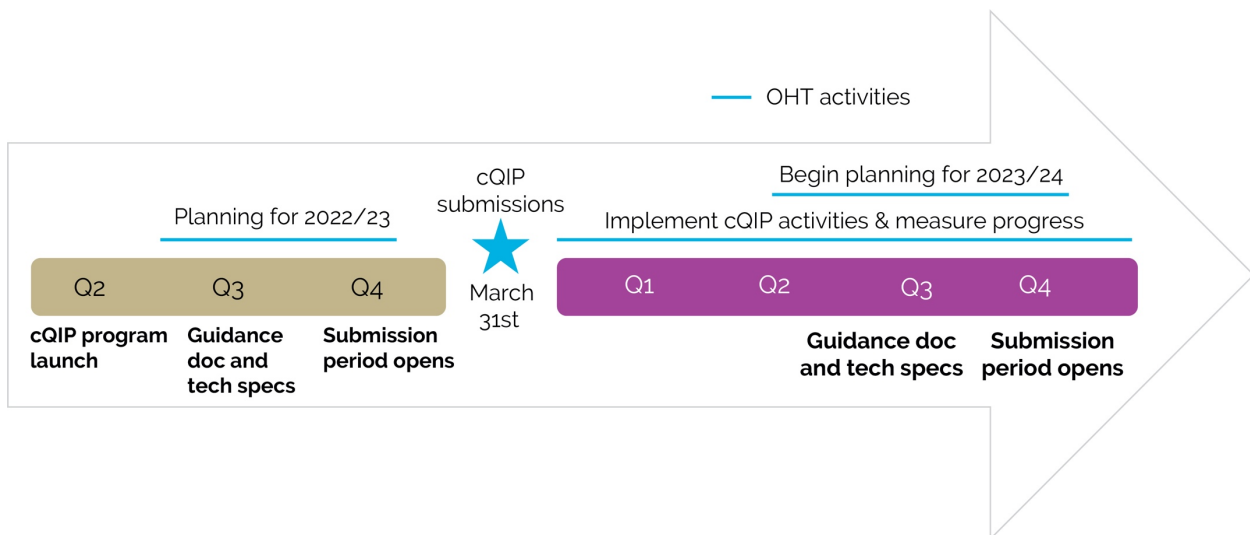
Completed cQIPs will include a Narrative, an improvement target for each of the five quality indicators, and a list of major quality improvement initiatives for each of the three areas of focus (Figure 1). As well, cQIPs must be:

- Reviewed and approved according to the process outlined in the OHT’s collaborative decision-making arrangement (CDMA)
- Submitted to Ontario Health via the online platform, cQIP Navigator, by the end of the fiscal year (March 31)



## Developing and submitting a cQIP

### Timelines



### Getting started

Ontario Health has developed a number of documents to support the cQIP development process. Visit the OHT shared space ([cQIP Community of Practice](#)) to access the most up-to-date versions of each of the documents listed below. Any important communications regarding timelines or changes to the cQIP program will be posted in this shared space.



The following documents are released or updated annually and should be reviewed by all OHTs each year to guide cQIP development:

- **cQIP Indicator Technical Specifications**—This document presents detailed definitions of each indicator and how it will be measured. In year 1, OHTs may need support to best understand how to use this information and collect their data. Throughout the year, the cQIP team at Ontario Health will be available to respond to questions and concerns
- **cQIP Guidance Document**—This document (i.e., the one you are reading) is designed to inform and provide instruction on how to prepare for the cQIP, who should be consulted, how to develop and submit the cQIP, and available resources

Users who are new to working on QIPs/cQIPs should review the resources below. These can also be used as reference by any user to answer questions that might arise:

- [Ontario Health Teams Virtual Engagement Series: OHT Performance Measurement Framework – Collaborative Quality Improvement Plan \(cQIP\) Information Session](#)
- [Quality improvement science educational videos](#)

### The cQIP working group

It may be helpful to review your collaborative decision-making arrangement (CDMA) to see how your team agreed to address quality monitoring and improvement. It also may be helpful to create a cQIP working group or an OHT quality committee and scheduling regular meetings to develop and monitor the progress of the cQIP over the year. The working group should 1) represent all partners within your OHT and 2) include representatives from your community, including patients. This working group may be an opportunity to engage with new system partners that are not currently part of your OHT on the change initiatives identified within your team’s cQIP.

Ontario Health Teams are encouraged to identify opportunities to engage with their partners when completing/planning for their cQIPs. Some areas may require multiyear strategies to be successful. Setting graduated targets may be appropriate.

### The cQIP Point of Contact

Each OHT has identified a cQIP Point of Contact who will submit the cQIP online. This process of submission is considered *confirmation of the OHT’s approval of the cQIP*, in alignment with their CMDAs, and acknowledges the OHT’s ultimate accountability for the following:

- Developing, implementing, and monitoring the cQIP
- Target setting
- Executing the quality improvement activities outlined in the cQIP

### Using cQIP Navigator

OHTs are required to submit their cQIP through Ontario Health’s online platform, cQIP Navigator. The cQIP Navigator is a user-friendly tool to guide you as you complete each section. cQIP Navigator is still in development; you will be notified when it’s ready for use. Further guidance will be made available at that time.

## Completing the Narrative

The Narrative is your opportunity to provide a brief overview of your OHT and its patient population, offer context for your cQIP, and express how you plan to improve the quality of care you provide. It sets the stage for the key quality initiatives you will outline in your Workplan. If appropriate for your team, you may leverage existing descriptions of your OHT and its patient population (e.g., descriptions submitted to the ministry in your team’s full applications or within progress reports submitted to the ministry associated with implementation-funding TPA requirements). Ontario Health Teams should focus on reducing inequities within their populations; your Narrative is the place where you will consider the needs of both the attributed population and target populations (wherever possible) and include them in your planning.

The ministry and Ontario Health recognize that OHTs may be focused on their priority populations as part of near-term planning and that partnerships may not yet capture the full attributed population. Therefore, in these early stages of implementation, OHTs may choose to focus on their target populations in one of two ways:

1. Within a mandated area of focus (Figure 1), you may concentrate your improvement initiatives on the year 1 target population associated with the implementation indicators outlined in your implementation-funding TPAs. For example, if your target population is “seniors,” when addressing the area of focus *improve overall access to care in the most appropriate setting*, your change ideas may be focused improvement initiatives that support seniors receiving care beyond the hospital setting. (Note: you may choose to add a custom measure that you feel better reflects your target population, but you will also be required to set a target for the mandatory indicator.)
2. Alternatively, you may choose to add one or more additional custom areas of focus and indicators to the cQIP to capture improvement initiatives aimed at your year 1 target population.

To complete your Narrative, you will be asked to answer a set of prompts in cQIP Navigator. As the executive summary of your cQIP, the Narrative should be brief and easy to understand. Use the Narrative to relay details about patient and provider experiences and the unique challenges of the region in which you work.

## Completing the Workplan

The Workplan is the portion of your cQIP where you list the quality indicators and any other custom indicators you have chosen to focus on, your targets, and evidence-based change concepts your OHT commits to for the coming year.

In the Workplan, for each area of focus, OHTs will need to identify:

- **Who** is working on this indicator (which members are actively working on this indicator)
- **What** defines the target population (the priority populations for this indicator and/or sub-populations that may be at risk)
- **Which** change concepts you will focus on, **why** you will focus on them (provide rationale), and **how** you will implement them

### Indicators

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. Measurement can help OHTs understand how systemic issues affect individuals according to their local context and whether changes are leading to improvement.

**Quality indicators**—There are five mandatory indicators in three key areas of focus (Figure 1) that must be included in your cQIPs. Baseline data will be provided from which all active OHT partners can set targets.

**Custom indicators**—You may wish to also include custom indicators. If so, you will need to enter the following fields: area of focus, indicator name, unit of measure, time period, data source, and target population. If an OHT wants to choose an OHT-specific implementation indicator or a Health System Performance Network (HSPN) target population indicator, a link to the [Indicator Library](#) will be available and the indicator definition will be prepopulated.

**Supporting measures**—Where possible, additional, more recent data will be provided on the [cQIP Community of Practice](#) that can be used for context and that may support planning. For example, individual organizations that have data related to one of the quality indicators may see their current performance (for reference only—these organizations do not need to set individual targets). We also aim to include demographic/equity data for some of the indicators: age range, rurality, marginalization. These additional sets of data may help OHTs see variation for each of the quality indicators and know where to target improvement activities.

### Change concepts

Making changes that result in measurable improvement is the goal of the cQIP. Given the scale and scope of OHTs, focusing on *change concepts* is critical. A change concept is a “general notion or approach to change” that prompts specific ideas for changes that lead to improvement.<sup>2</sup> For each area of focus, we will provide [change concepts](#) related to the issue, drawn from the evidence. Please align your key initiatives with these concepts.

When you are selecting your change concepts, briefly identify the changes you expect to make in year 1. Review information on [change concepts and ideas](#) and on how to use the [Plan-Do-Study-Act](#) cycle for testing change ideas. For areas of focus around population health, it may be useful to review theoretical models such as the [Expanded Chronic Care Model](#).

Some OHTs may also want to provide their own custom change concepts. Some ideas of change concepts may be available on the [cQIP Community of Practice](#) on the OHT Shared Space.

### Approval and sign-off

Once your cQIP is complete, the cQIP Point of Contact will be responsible for submitting the cQIP on behalf of your OHT.

### Tips to make your cQIP submission process as easy as possible

Follow these tips to avoid pitfalls:

- Start as soon as possible. Begin developing your cQIP in the fall by reviewing the cQIP resources listed above when they are released. Engage all your partners
- When you access cQIP Navigator, disseminate and share with your OHT partners to encourage their input
- Review current performance data for your OHT. Data will be provided via an Excel spreadsheet. Ontario Health will provide current performance data for the quality indicators through the Ministry of Health data provider; work is underway to make these data available to OHTs shortly

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<sup>2</sup> Institute for Healthcare Improvement. Using Change Concepts for Improvement. <http://www.ihl.org/resources/Pages/Changes/UsingChangeConceptsforImprovement.aspx>

after the release of the supporting documents. Note the current performance for your OHT in your cQIP and use these data to set a target for improvement for each quality indicator. The target is set by the OHT as a whole

- Plan ahead to present the completed draft of your cQIP to the OHT partners who will be endorsing your cQIP for approval and sign-off
- Ensure that your cQIP is complete before March 31



## Implementing the cQIP Workplan

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

### Monitor performance frequently

A central tenet of quality improvement is monitoring your performance to track your progress and understand whether the changes you are making are resulting in improvement. It is critical to establish a schedule for regular reporting, communicate trends within your OHT, and identify emerging performance issues early so that you can correct them in a timely manner.

You may need to reserve time to review progress on your cQIP as a regular agenda item in meetings with active members. Celebrate your successes and leave time to discuss next steps if you are not seeing improvement.

### Use quality improvement science

Use quality improvement science to guide your improvement projects. Here is a [link](#) to videos explaining the science of quality improvement that may be helpful. The RISE population-health management (PHM) coaches are an invaluable source of help as you understand how to connect your cQIP work to your priority population work.

### Review progress

For 2022/23, OHTs may be asked to review their progress and provide feedback and updates on their progress, including successes and challenges; however, this will be based on the capacity of health system partners. The purpose of this review is to allow OHTs to identify what is working and where they can tweak their implementation strategies. Where meaningful and available, Ontario Health will update current performance for the quality indicators and supporting measures.



## Support for cQIP development and implementation

### The cQIP Community of Practice

The OHT cQIP Points of Contact are encouraged to join the cQIP Community of Practice, available through the [OHT Shared Space](#), which offers support for the successful development and implementation of your team's cQIP. Quality improvement specialists at Ontario Health will use the Community of Practice platform to:

- Address questions in a space dedicated to quality improvement in OHTs
- Link you to specific resources and supports to assist you in submitting your cQIP and reporting progress
- Notify you of any upcoming relevant cQIP events, webinars, or educational opportunities
- Share local best or leading practices, and help you to adapt resources to advance your quality plan
- Identify emerging opportunities and address common barriers to cross-OHT collaboration
- Provide additional information about some of the indicators featured in this year's cQIPs

To join the cQIP Community of Practice:

1. Visit the [OHT Shared Space](#) and click SIGN UP to create your account
2. Visit the [cQIP Community of Practice](#) and click the JOIN GROUP button. You will be notified via email once you have been accepted into the group.
3. Click on the "SUBSCRIBE TO UPDATES" button once you've been accepted into the group to receive an email notification when there is new activity, such as upcoming webinars and posted resources.



## Reach the cQIP team at Ontario Health

We encourage you to submit all questions to the cQIP Community of Practice so that the larger group can benefit from the questions, answers, and surrounding discussion. For sensitive matters, you can reach out to a quality improvement specialist by email at [QIP@ontariohealth.ca](mailto:QIP@ontariohealth.ca)