

Orientation to the 2024-25 QIP Program

Alliance Lunch 'n' Learn Webinar
January 17, 2024



Alliance for Healthier Communities
Alliance pour des communautés en santé

Acknowledgement of Traditional Indigenous Territories

We recognize that the work of the Alliance for Healthier Communities and our members takes place across what is now called Ontario, on traditional territories of Indigenous people. They have lived here since time immemorial and have deep connections to these lands. We further acknowledge that Ontario is covered by 46 treaties, agreements and land purchases, as well as unceded territories. We are grateful for the opportunity to live, meet and work on this territory.

Ontario continues to be home to vibrant, diverse Indigenous communities who have distinct and specific histories, needs, and assets as well as constitutionally protected and treaty rights. We honour this diversity and respect the knowledge, leadership and governance frameworks within Indigenous communities. In recognition of this, we commit to building allyship relationships with First Nation, Inuit and Métis peoples in order to enhance our knowledge and appreciation of the many histories and voices within Ontario. We also commit to sharing and upholding our responsibilities to all who now live on these lands, the land itself, and the resources that make our lives possible.

Presenters

Lindsay Sleeth

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Primary Care Quality Improvement Plans

Alliance for Healthier Communities

Lindsay Sleeth | January 17th 2024



**Ontario
Health**

Agenda

- What is a Quality Improvement Plan?
- Looking back at 2023/24
 - High-level overview of the 2023/24 analysis results
- Looking forward to 2024/25
 - 2024/25 indicators and narrative sections
 - Resources and supports available to enable QIP completion
- Q&A

Quality Improvement Plans

- A public, documented commitment that a health care organization makes to its patients/clients/residents, staff, and community to improve specific quality issues through focused targets and actions.
- ~1100 hospitals, long-term care homes and interprofessional primary care teams submit a QIP to Ontario Health annually
 - Interprofessional primary care = FHTs, CHCs, NPLCs & Indigenous IPC



January – March

- Review progress
- Develop the plan: What are we trying to accomplish?
- Identify opportunities for improvement
- Review data and engage key stakeholders
- Complete Workplan and Narrative
- Executive or Board sign-off
- Submit Quality Improvement Plan to Ontario Health

April – June

- Test and assess impact of change ideas

July – September

- Implement change ideas and measure/monitor outcomes and improvement

October – December

- Implement and review progress on change ideas
- Plan for continued or new priorities



Looking back at 2023/24
submissions

High level narrative results

- Patient engagement/co-design work was paused during the pandemic, but is now resuming, prompting updates to methods of engagement
- Resounding concerns with burnout and turnover due to increased care demands, HHR shortages, and increasing administrative burden.
 - Organizations recognize this and are implementing strategies to combat it: flexible work schedules/environments, increased staff appreciation and team building events, and streamlining workflows and documentations through technology use
- Lots of attention being paid to preventing workplace violence through staff training and physical supports (panic buttons, cameras) but most report limited need to use these supports
- An emerging priority is the collection of sociodemographic information from patients in their EMR and through surveys, with the hope to use the information to guide programming, services and patient materials.
- Many focused on providing training for staff and board members on EDI and indigenous cultural safety topics

High level workplan results

- 86% of organizations included indicator related to patients feeling involved in decisions about their care, 60% included the indicator related to opioid dispensing
- 39% of all custom indicators reference cancer screening
- Many indicators related to collecting sociodemographic data collection
- Attention being paid to keeping patients out of hospitals and EDs
 - Timely access to care/Advanced Access measurement
 - 7-day post hospital discharge follow-up/ED visits for conditions best managed elsewhere
- Technology use is becoming more relied upon in change ideas (this may help w admin burden)
 - Correct EMR use and searching
 - 6 FHTs in Muskoka OHT included indicator measuring use of Ocean platform and digital tools (OAB, patient messaging, eReferral)



2024/25 QIP Submissions

2024/25 Quality Improvement Plan Indicator Matrix

Priority issues	Optional indicators (by sector)		
	Hospital	Interprofessional primary care	Long-term care
Access and flow <i>A high-quality health system provides people with the care they need, when and where they need it.</i>	<ul style="list-style-type: none"> 90th percentile ambulance offload time 90th percentile ED length of stay 90th percentile ED wait time to inpatient bed Alternate level of care throughput ratio % of patients who visited the ED and left without being seen by a physician 	<ul style="list-style-type: none"> Patient/client perception of timely access to care Number of new patients/clients/enrolment 	<ul style="list-style-type: none"> Rate of potentially avoidable ED visits for long-term care residents
Equity <i>Advancing equity, inclusion and diversity and addressing racism to reduce disparities in outcomes for patients, families, and providers is the foundation of a high-quality health system.</i>	<ul style="list-style-type: none"> % of staff (executive-level, management, or all) who have completed relevant equity, diversity, inclusion, and antiracism education Average ED wait time to PIA for individuals with sickle cell disease (CTAS 1 or 2) Rate of ED 30-day repeat visits for individuals with sickle cell disease % of ED visits for individuals with sickle cell disease triaged with high severity (CTAS 1 or 2) 	<ul style="list-style-type: none"> % of staff (executive-level, management, or all) who have completed relevant equity, diversity, inclusion, and antiracism education Completion of sociodemographic data collection 	<ul style="list-style-type: none"> % of staff (executive-level, management, or all) who have completed relevant equity, diversity, inclusion, and antiracism education
Experience <i>Better experiences result in better outcomes. Tracking and understanding experience is an important element of quality.</i>	<ul style="list-style-type: none"> Did patients feel they received adequate information about their health and their care at discharge? 	<ul style="list-style-type: none"> Do patients/clients feel comfortable and welcome at their primary care office? Do patients/clients feel involved in decisions about their care? 	<ul style="list-style-type: none"> Do residents feel they can speak up without fear of consequences? Do residents feel they have a voice and are listened to by staff?
Safety <i>A high-quality health system ensures people receive care in a way that is safe and effective.</i>	<ul style="list-style-type: none"> Rate of delirium onset during hospitalization Rate of medication reconciliation at discharge Rate of workplace violence incidents resulting in lost time injury 		<ul style="list-style-type: none"> % of long-term care residents not living with psychosis who were given antipsychotic medication % of long-term care residents who fell in the last 30 days

Note: Organizations may also consider adding custom indicators to address their own improvement opportunities and collaborative work with other health service providers.

Optional Indicators 2024/25

NEW

Number of new patients/clients/enrolment

% of staff (executive-level, management, or all) who have completed relevant equity, diversity, inclusion, and antiracism education

Completion of sociodemographic data collection*

Do patients/clients feel comfortable and welcome at their primary care office?*

Returning

Do patients/clients feel involved in decisions about their care?*

Patient/client perception of timely access to care*

Retired

% of non-palliative care patients newly dispensed an opioid (excluding opioid agonist therapy) within a 6-month reporting period

**Adapted from AHC Common CHC Indicators*

NO mandatory indicators

Optional Indicators located in chevron in QIP Navigator

Organization:

 EXPORT WORKPLAN

 EXPORT EXTERNAL COLLABORATION REPORT

PREVIOUS FORMAT : [CURRENT WORKPLAN](#) [BLANK WORKPLAN TEMPLATE](#)

ID	AIM	MEASURE								CHANGE				
QUALITY DIMENSION	MEASURE / INDICATOR	TYPE	UNIT / POPULATION	SOURCE / PERIOD	ORG ID	CURRENT PERFORMANCE	TARGET PERFORMANCE	TARGET JUSTIFICATION	EXTERNAL COLLABORATORS	PLANNED IMPROVEMENT INITIATIVES (CHANGE IDEAS)	METHODS	PROCESS MEASURES	TARGET FOR PROCESS MEASURE	COMMENTS

i M = Mandatory (all cells must be completed) P = Priority (complete ONLY the comments cell if you are not working on this indicator) O= Optional (do not select if you are not working on this indicator) C = custom (add any other indicators you are working on)

ACCESS AND FLOW

▼ Indicators 2



EQUITY

▼ Indicators 2



EXPERIENCE

2024/25 Narrative



- Overview

- Access and Flow

- Administrative Burden



- Equity and Indigenous Health

- Patient/client Experience

- Provider Experience

- Safety

- Population Health Approach

* New for 2024/25

QIP Suite of Resources

- [QIP Guidance Document](#)
- [QIP Indicator Technical Specifications](#)
- [QIP Priority Indicator Matrix](#)
- [QI science videos](#)
- [Weekly drop-in sessions](#)

Priority issues	Optional Indicators (by sector)		
	Hospital	Interprofessional primary care	Long-term care
Access and flow A high-quality health system provides people with the care they need, when and where they need it.	<ul style="list-style-type: none">• 50th percentile ambulance off-peak time• 50th percentile ED length of stay• 50th percentile ED wait time to inpatient bed• Admittance level of care throughput ratio• % of patients who visited the ED and left without being seen by a physician	<ul style="list-style-type: none">• Patient/client perception of timely access to care• Number of new patients/clients/enrolment	<ul style="list-style-type: none">• Rate of potentially care residents
Equity Advancing equity, inclusion and diversity and addressing racism to reduce disparities in outcomes for patients, families, and providers is the foundation of a high-quality health system.	<ul style="list-style-type: none">• % of staff (executive level, management, or all) who have completed relevant equity, diversity, inclusion, and anti-racism education• Average ED wait time to IMA for individuals with sickle cell disease (CAS 1 or 2)• Rate of ED 30-day repeat visits for individuals with sickle cell disease• % of ED visits for individuals with sickle cell disease triaged with high severity (CAS 1 or 2)	<ul style="list-style-type: none">• % of staff (executive level, management, or all) who have completed relevant equity, diversity, inclusion, and anti-racism education• Completion of sociodemographic data collection	<ul style="list-style-type: none">• % of staff (executive level, management, or all) who have completed relevant equity, diversity, inclusion, and anti-racism education
Experience Better experiences result in better outcomes. Tracking and understanding experience is an important element of quality.	<ul style="list-style-type: none">• Did patients report about their health experience?		
Safety A high-quality health system ensures people receive care in a way that is safe and effective.	<ul style="list-style-type: none">• Rate of deaths• Rate of medical errors• Rate of work injury		

Note: Organizations may also consider adding custom indicators to address their own needs.



QUALITY IMPROVEMENT PLAN PROGRAM

Indicator Technical Specifications

2024/25

NOVEMBER 2023

The screenshot shows the Health Quality Ontario QIP Navigator website. The header includes the logo and navigation links: Home, Query QIPs, Success stories, Submit QIP, and a Download QIPs button. The main content area is titled "Welcome to QIP Navigator" and features a list of drop-in sessions: Hospital Sector, Long-Term Care Sector, Interprofessional Primary Care Sector, and Ontario Health Teams. A sidebar on the right provides information about the agency and its mission. At the bottom, there is a section for "Annual Guidance Documents" with a list of links to various QIP-related resources.

Additional Resources

Quorum

Ontario Health's [online community](#) where users learn, share, and collaborate to improve health care quality in Ontario.

Includes:

- [QI tools and resources](#)
- [Indicators and change ideas](#)



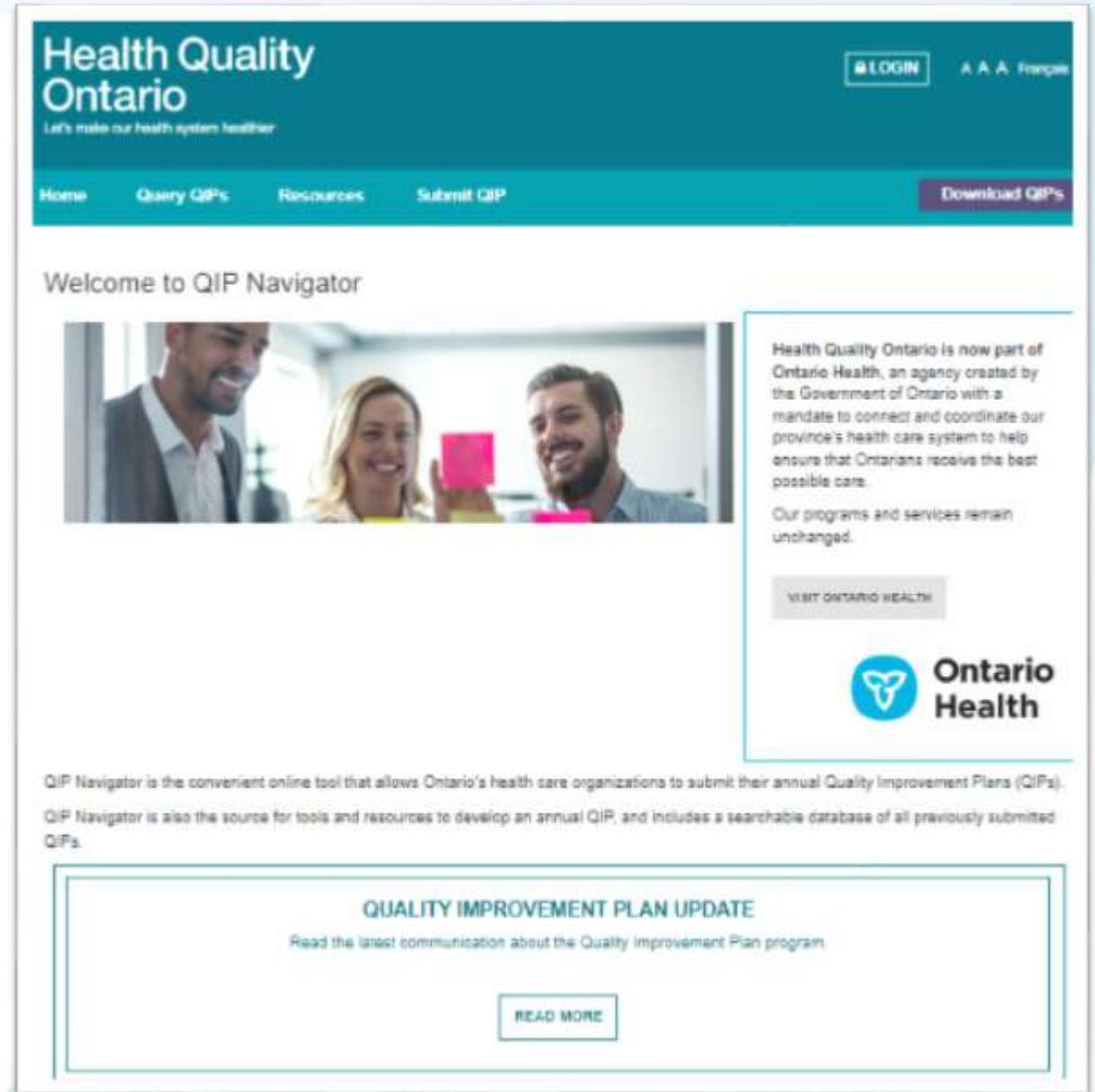
Community of Practice

- [Primary Care Quality Improvement Hub](#)



QIP Navigator

- Ontario Health's online tool for the development and submission of QIPs
- Launched in December
- Each organization has one username that is shared internally



The screenshot shows the homepage of the QIP Navigator website. The header features the 'Health Quality Ontario' logo with the tagline 'Let's make our health system healthier'. Navigation links include 'Home', 'Query QIPs', 'Resources', 'Submit QIP', and 'Download QIPs'. A 'LOGIN' button is also present. The main content area includes a 'Welcome to QIP Navigator' message, a photograph of three healthcare professionals, and a text box explaining that Health Quality Ontario is now part of Ontario Health. A 'VISIT ONTARIO HEALTH' button is located below this text. At the bottom, there is a 'QUALITY IMPROVEMENT PLAN UPDATE' section with a 'READ MORE' button.

Health Quality Ontario

Let's make our health system healthier

Home Query QIPs Resources Submit QIP Download QIPs

LOGIN A A A Français

Welcome to QIP Navigator

Health Quality Ontario is now part of Ontario Health, an agency created by the Government of Ontario with a mandate to connect and coordinate our province's health care system to help ensure that Ontarians receive the best possible care. Our programs and services remain unchanged.

VISIT ONTARIO HEALTH

Ontario Health

QIP Navigator is the convenient online tool that allows Ontario's health care organizations to submit their annual Quality Improvement Plans (QIPs). QIP Navigator is also the source for tools and resources to develop an annual QIP, and includes a searchable database of all previously submitted QIPs.

QUALITY IMPROVEMENT PLAN UPDATE

Read the latest communication about the Quality Improvement Plan program

READ MORE

Quality Improvement Plans
are due April 1st, 2024

Alliance QIP Resources

<https://shorturl.at/yzJW1>

- QIP Priority Issues and indicators for 2024-25
- Common QIP Indicators for Alliance Member Organizations
- QIP Navigator & Organizational QIP Resources from Ontario Health
- COMING SOON: This webinar!
- COMING SOON: Resources to support Collaborative QIPs for your OHT



Updated Health Equity Questionnaire

<https://shorturl.at/iG035>

- Overview of changes to the Health Equity (SDOH) Questionnaire
- Recording and slide deck from last week's launch webinar.
- Registration link for Feb 1 tech webinar.
- Links to implementation tools (e.g custom forms for Alliance members).
- Information about RALI QI training program for SDOH data collection (for Alliance members).



Questions?



Thank You!

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