

Theme I: Timely and Efficient Transitions

Dimension: Efficient

Measure

Indicator #2	Type	Unit	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of patients who have had a 7-day post hospital discharge follow up, by a community care provider for selected conditions- CHCs.	P	%	hospital collected data / Other	100.00	100.00	Although we have completed follow up on all summaries received, we do not have a process at this point to validate the number received vs. the actual number of discharges from hospital	Dryden Regional Health Centre

Change Ideas

Change Idea #1 Create a working group between primary care and acute care sectors from a variety of communities across Northwestern Ontario to evaluate the current discharge process

Methods	Process measures	Target for process measure	Comments
Collaborative evaluation of discharge process and PDSA cycle of admission and discharge process to improve transition of care	Potential to utilize data through HRM and eNotifications	Collect baseline	

Change Idea #2 Information from working group to be validated and utilized at Local Health Hub level to support transitions by acute care and primary care sectors

Methods	Process measures	Target for process measure	Comments
Collaborative evaluation of new discharge process roll out and PDSA cycle of admission and discharge process to improve transition of care with Acute Care Hospital	Potential to utilize data through HRM and eNotifications	Collect initial baseline	

Change Idea #3 Foster transformative change to improve the transition of patient from hospital to home and community.

Methods	Process measures	Target for process measure	Comments
Continue to develop collaborative relationships already established and initiate new relationships with local hospitals and other community services.	Number of collaborative relationships developed and initiated with local hospitals and other community services and caregivers	Collaborate with local health hub hospitals, NWLHIN Home & Community Care, community paramedic services, and caregivers supporting our patient population.	

Measure

Indicator #3	Type	Unit	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of patients and clients able to see a doctor or nurse practitioner on the same day or next day, when needed.	P	%	hospital collected data / Fiscal Year	87.14	88.00	We have achieved high rates of satisfaction in this area and would like to be able to maintain availability of provider coverage	Northwest ED Primary Care Network

Change Ideas

Change Idea #1 Address the lack of providers through the Make it Work Framework by utilizing phase 1 of the approach by; assessing population needs, align service models and develop profile of target recruits.

Methods	Process measures	Target for process measure	Comments
Look to collaborate with Local Health Hub Health Service Providers to develop common database of provider need across the Region.	1. Assess population needs 2. Assess current vacancy rates by FTE 3. Develop profile of target recruits 4. Participate in regional recruitment initiatives 5. Look at internal practices for recruitment. 6. Leverage use of technology for provider coverage.	Collect baseline	Total Surveys Initiated: 70

Measure

Indicator #4	Type	Unit	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of clients who report that the last time they were sick or had a health problem, they got an appointment on the date they wanted.	C	%	hospital collected data / Fiscal Year	CB	85.00	This is new wording for the question and will be a common quality indicator for Ontario Community Health Centre comparison	Alliance for Healthier Communities CHC Sector

Change Ideas

Change Idea #1 Add the question, " The last time you were sick or were concerned you had a health problem did you get an appointment on the date you wanted? " to the experience survey.

Methods	Process measures	Target for process measure	Comments
1. Ensure same day appointment blocks are in all provider schedules. 2. Revise experience survey to include question 3. Provide random monthly surveys to clients. 4. Correlate data	Total number of clients who responded Yes to the survey question	85% of clients will state they were able to see a provider on a date they wanted	Results of the survey will be monitored and compared with the Ontario CHC sector

Change Idea #2 Assess patient perception of access based on the same day/next day survey question responses.

Methods	Process measures	Target for process measure	Comments
Include the following question in the patient survey to gain a better understanding of the patient's recall on how quickly they were able to get an appointment with their physician from the date they requested: "The last time you were sick or were concerned you had a health problem, did you get to see the provider on the date you wanted?"	Number of respondents who responded "same day/next day."	Pull survey data and analyze bi annually.	

Theme II: Service Excellence**Dimension:** Patient-centred**Measure**

Indicator #5	Type	Unit	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percent of patients who stated that when they see the doctor or nurse practitioner, they or someone else in the office (always/often) involve them as much as they want to be in decisions about their care and treatment	P	%	hospital collected data / Fiscal Year	91.18	92.00	This is a consistent high result. Our aim is to maintain these high levels	Northwest ED Primary Care Network

Change Ideas

Change Idea #1 Utilize standardized survey questions throughout the North West region to measure with other primary care organizations to discuss results and learn from network partners.

Methods	Process measures	Target for process measure	Comments
1. Complete review of current surveys used across the region. 2. Revise survey to include common agreed upon standardized questions across the Primary Care ED Network. 3. Include standardized questions in addition to organization specific measures on the survey.	7 questions (including patients involved with care) will be measured regionally and disseminated to support the organization	92% of patients will state that when they see their provider they are involved as much as they want in decisions about their care and treatment	Total Surveys Initiated: 70 Collated survey questions across the North West 7 questions were utilized 46% of time or more. Validated through Ontario Health - North PFAC Reviewed by North West Primary Care ED Network"

Change Idea #2 2)Share survey results with clients on a regular basis.

Methods	Process measures	Target for process measure	Comments
Pull survey results on a regular basis and collate data to communicate client feedback in a poster for waiting rooms, exam rooms, etc.	Number of times survey data is pulled.	Pull survey data, analyze, and update poster twice throughout the fiscal year	Total Surveys Initiated: 70

Change Idea #3 Create greater awareness that clients can and should be involved in their healthcare and should be actively involved in the decisions about their care and treatment.

Methods	Process measures	Target for process measure	Comments
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Ongoing education of clients via posters and website/social media content, to encourage clients to better self-manage their health, be prepared for their appointments, comprehend their condition, and understand their options.

Number of different messages/posters shared with clients throughout fiscal year

Minimum of twice annually, new messaging/poster to be created

Total Surveys Initiated: 70

Theme III: Safe and Effective Care

Dimension: Effective

Measure

Indicator #6	Type	Unit	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Documented Assessment of Palliative Care Needs among Patients identified to Benefit from Palliative Care	C	Number	hospital collected data / Fiscal Year	CB	CB	New focus for the organization and a new collaboration amongst the Primary Care ED Network to better capture and compare data across the region	

Change Ideas

Change Idea #1 Explore a way to document palliative patients in a standard way.

Methods	Process measures	Target for process measure	Comments
Look at EMR tools that allows for standard documentation of palliative patients.	Number of providers using EMR palliative tool for standard documentation of patient's palliative status.	All providers have access and use the EMR palliative tool for standard documentation of palliative patients.	

Change Idea #2 Obtain lists of palliative patients from providers and ensure each has standard documentation.

Methods	Process measures	Target for process measure	Comments
Contact each provider about providing lists of current palliative patients.	Number of patients on lists with standard documentation of palliative status.	All patients on lists with standard documentation of palliative status.	

Measure

Indicator #7	Type	Unit	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of non-palliative patients newly dispensed an opioid prescribed by any provider in the health care system within a 6-month reporting period.	P	%	hospital collected data / Other	CB	CB	The ability to collect this data at this point is limited with multiple EMR systems. Process needs to be put in place to better understand how to collect accurate data	Northwest ED Primary Care Network

Change Ideas

Change Idea #1 Utilize the OPMR webinar series to provide education relevant to North West.

Methods	Process measures	Target for process measure	Comments
OPMR are utilize educational series that will have importance within the North West region of Ontario to support opioid education	Number of providers who have accessed webinar series	All providers will have been able to access relevant education related to opioid prescribing	

Change Idea #2 Utilize data through EMR and / or MyPractice reports to collate regional average to identify where we are internally vs. other health service providers.

Methods	Process measures	Target for process measure	Comments
Utilize MyPractice Reports and EMR to collate data to establish baseline of px rates within primary care sector. Collaborate with North West Acute Care sector and various stakeholder committees to regional priority.	Review results of patient patterns through MyPractice and / or EMR and collate data through Primary Care ED Network	New collaborative which is looking to establish baseline data within the primary care sector	

Change Idea #3 Develop an EMR search that can accurately identify patients with newly prescribed opioids in the past 6 months.

Methods	Process measures	Target for process measure	Comments
Find the correct search criteria by working with physicians and Telus PS Suites members.	Number of patients properly identified in the EMR.	All patients that appear on the search results are properly identified as being prescribed an opioid in the past 6 months.	

Equity

Dimension: Equitable

Measure

Indicator #1	Type	Unit	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of active individual clients who had an encounter with the CHC within a one year period and who responded to at least one of the following sociodemographic data questions: racial/ethnic group, disability, gender identity or sexual orientation	C	%	hospital collected data / Other	CB	65.00	new common indicator by the CHC sector for data comparison	Alliance for Healthier Communities

Change Ideas

Change Idea #1 Complete implementation of new EMR system to PS Suites

Methods	Process measures	Target for process measure	Comments
1. Complete data validation from NOD to PS Suites 2. Set up system preferences 3. Train team on new EMR system. 4. Go live with new system	Percentage of clients 13+ who have completed 1 or more of the socio demographic questions	45% of clients will have responded to 1 or more socio demographic questions	Currently 23.6% clients have 1 or more sociodemographic data questions entered into the EMR

Change Idea #2 Extend functionality of PS Suites through integrating the Ocean platform to expand patient engagement

Methods	Process measures	Target for process measure	Comments
1. Arrange product demonstration. 2. Explore pricing options 3. Purchase of tablets and content platform 4. Complete staff training on use of platform 5. Client engagement of OCEAN tablets and functionality 6. Select 6 clients to test the system followed by broader implementation	Number of clients who have trialed the OCEAN platform	A minimum of 6 clients will have utilized the OCEAN platform once the system is installed within	This will be a new integrated clinical platform which will coincide with our new EMR implementation. Our initial goal is to get the system implemented and trial with a small group of clients