

Let's Make Healthy  
Change Happen.



## Quality Improvement Plan (QIP) Narrative for Health Care Organizations in Ontario



West Elgin  
Community  
Health Centre

**3/19/2018**

This document is intended to provide health care organizations in Ontario with guidance as to how they can develop a Quality Improvement Plan. While much effort and care has gone into preparing this document, this document should not be relied on as legal advice and organizations should consult with their legal, governance and other relevant advisors as appropriate in preparing their quality improvement plans. Furthermore, organizations are free to design their own public quality improvement plans using alternative formats and contents, provided that they submit a version of their quality improvement plan to Health Quality Ontario (if required) in the format described herein.

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## Overview

This year's Quality Improvement Plan (QIP) represents the fifth time that the West Elgin Community Health Centre (the "Centre") has participated in the provincially-led quality improvement process.

While many efforts were made over the past year to improve access to our primary care team, the results of the Client Satisfaction survey in the fall of 2017 showed that there was still improvement needed in this area. Some of the challenges were due to departures of providers and the impacts of maternity leaves and vacancies that prevented some of the planned changes from taking place. However, it also appears that some of the challenges may be related to being a rural commuter community that adds complexity to our efforts to balance both same day episodic and ongoing chronic care needs. In 2018-19, there will be a renewed effort by the Centre to find a model that better matches the clients and communities' needs with the Centre's capacity to provide care and services.

## Describe your organization's greatest QI achievements from the past year

The Quality Committee (QC) is pleased to discuss some of the QI achievements from the 2017-18 year. As indicated on the 'work plan' we focused on improving access for primary care clients. Significant developments in access include the implementation of processes to reduce (and eventually eliminate) the number of clients who call for appointments and are asked to call-back the next day. The work that contributed to this achievement included collaboration between our Administration and Primary Care team to develop a system to track when and why clients were asked to call back the next day. It progressed to the development of primary care 'triads' (MDs, RNECs, RN and RPNs linked with admin staff) to ensure that we are resourced to meet requests for care with an appropriate level of service.

Our QC is also proud to announce that for the third year running we have achieved a robust and representative sample on our client satisfaction survey. This enables us to more accurately compare year to year results and report our findings with greater confidence. This is important because a number of QIP indicators rely on data collected from the Client Satisfaction survey. On a similar note, we also submitted our first independent Client Satisfaction report to the South West Local Health Integration Network. We believe that another achievement is that this report lays the framework to track year to year performance on important client satisfaction indicators. The work that goes into achieving a robust sample size may be easily overlooked; however, it includes strong collaboration and problem solving between QC, the Admin Team, and volunteer services.

## Resident, Patient, Client Engagement

As noted a significant part of our client engagement strategy is to ensure that we achieve a robust and representative sample on our client satisfaction survey.

Another important element of our resident and client engagement strategy is the use of advisory councils. The Centre is pleased to report that 2017-18 was an active year for our Youth Advisory Council. During the spring our Youth Advisory Council accessed grant funds to hold a fun event for all local middle school youth to learn about community health resources and initiate community wide conversations about mental health. It is also expanding its role by offering its advisory services to other community agencies in the area. On another front, progress was made in establishing a Client and Family Advisory Council. An inaugural meeting for the Council was held on January 24th, 2018, with subsequent meetings in February and March.

## **Collaboration and Integration**

Collaboration and integration are integral to our goal of providing access to quality care across the spectrum. Highlights from this year's integration with other service providers include partnerships with Talbot Trail Physiotherapy (Community Physiotherapy Program), Addiction Services Thames Valley (Addictions Counselor), Canadian Mental Health Association (CMHA Counselling and Case-Management), and the local Situation Table. The Centre also acts as a Hub for local service providers to collaborate on issues facing the community. Evidence of this is the continued work that our Canadian Index of Wellbeing Task Forces are putting towards: Improving Access to Mental Health Services, Improving local conditions for Youth, and Improving Food Security. Our aim is to continue this work in the coming year and to expand integration through partnering with the Elgin Health Link as it gets up and running.

## **Engagement of Clinicians, Leadership & Staff**

In the past year our Quality Committee (QC) presented the QIP work plan at an all-staff meeting and recruited clinicians and staff who were willing to participate / collaborate on improvement initiatives. This meeting also provided a platform for Centre-wide discussions about how we can improve the quality of care at our Centre.

Leadership continued to support the QIP through ongoing collaboration with clinicians, staff, and volunteers in order to realize change ideas like tracking 'Advanced Access' performance, and the creation of 'triads' (to ensure continuity of care and maximize use of resources in responses to requests for care).

For the coming year our QC hopes to bring engagement to a higher level through a Centre-wide focus on improving access.

## **Population Health and Equity Considerations**

Our organization's commitment to live up to the motto "Every One Matters" keeps our focus on population health and equity considerations. One significant achievement from 2017-18 that reflects this is the work that went into securing funding for an accessible van. This van is now available to assist Seniors and People with disabilities to attend programming and appointments. Other notable efforts at addressing population health and equity include: ensuring that our community-based programs are available to all residents not just primary care clients; continuing and broadening access to our community physiotherapy program that provides access to physiotherapy free of charge for clients who do not have health benefits; and expanding access to Chiropody services via the Chiropody Offloading Program (which allows residents to access services locally instead of driving to regional treatment centres).

## **Access to the Right Level of Care - Addressing ALC**

In October we reconfirmed our commitment by extending our agreement with the local hospital (Four Counties Health Services) to coordinate post discharge follow up care for our clients when required.

## Opioid Prescribing for the Treatment of Pain and Opioid Use Disorder

The Centre is committed to helping address the systemic challenges associated with opioid use. Our approach is multi-faceted and includes:

1. A procedure to review opioid treatment history / use with all new primary care clients. It facilitates the development of treatment plans to reduce or eliminate opioid use where appropriate.
2. A Nurse Practitioner led program for treatment of chronic pain. This program teaches chronic disease management and includes the use of alternative therapies (e.g. acupuncture and cupping) for pain management.
3. On-site Addictions Counseling (Through partnership with Addictions Services Thames Valley).
4. A Harm Reduction program including Naloxone kits and a needle exchange program.
5. Centre staff have been certified as Naloxone trainers and Naloxone kits are available on-site.

## Workplace Violence Prevention

The Centre's efforts at workplace violence prevention include:

1. Providing annual training to all staff on workplace violence prevention.
2. Regular review of policies and procedures pertaining to workplace violence prevention.
3. Maintaining conversations within teams about safety protocols and identification of areas where additional protocols can be developed to reduce the risk of exposure to workplace violence.

## Contact Information

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## Sign-off

It is recommended that the following individuals review and sign-off on your organization's Quality Improvement Plan (where applicable):

I have reviewed and approved our organization's Quality Improvement Plan

Board Chair \_\_\_\_\_ (signature)

Quality Committee Chair or delegate \_\_\_\_\_ (signature)

Executive Director / Administrative Lead \_\_\_\_\_ (signature)

Other leadership as appropriate \_\_\_\_\_ (signature)