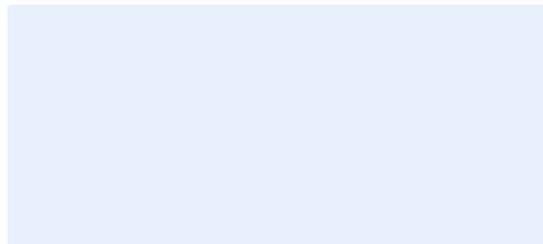


Let's Make Healthy  
Change Happen.



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



**3/31/2018**

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.

[ontario.ca/excellentcare](http://ontario.ca/excellentcare)

## Overview

The Port Hope Northumberland CHC (PHNCHC) has been in operation for delivering primary care, diabetes education, mental health counselling, geriatric outreach services, dental care, and many health promotion and community development activities to the communities within Northumberland County. The primary target populations of the PHNCHC include; the frail elderly, those with mental health and addictions problems, youth at risk, and those living in poverty. We believe that effective primary health care addresses the social determinants of health, including social inclusion, access to shelter, education, income and employment security, food and stable eco-systems. It encompasses primary care, illness prevention and health promotion, using community development toward building healthy public policy in supportive environments.

We have actively embraced the principles of Patient's First. We have dedicated our intake of new patients to those most vulnerable in our community. We have provided Northumberland Hills Hospital with our applications and a commitment to give priority enrolment to those high emergency department users without a health care provider. We have responded to requests from Sick Children's Hospital to provide primary care to local survivors of pediatric cancer, this has prompted a similar request from Princess Margaret. We are active participants in Health Links and at the Sub Region planning table.

We are on target in meeting our organization's goals for thoroughly evaluating our performance to date and for consolidating our partnerships, collaboration, and presence in the community of Northumberland. The organization will be working to promote awareness of the programs and services that are offered by the CHC and working to enhance the services we offer in other parts of the County. To that end, we have worked long and hard to open a Cobourg site to provide improved access to our eastern County clients and to launch the beginning of a hub in partnership with Fourcast mental health and addictions agency. Unfortunately an anticipated arrangement with the Town of Cobourg did not materialize and we are pursuing other avenues. The Quality Improvement Plan has been used to educate the community about the value of the work being done at the CHC and to demonstrate how this model of care is a valuable contributor to its health and well-being. The CHC's client-centred philosophy and emphasis on illness prevention, population health, and the social determinants of health are evidenced in the QIP as well as in our strategic goals for the coming year(s). This Centre is dedicated to improving timely access, and supporting those in greatest need to obtain the recommended cancer screening, influenza vaccines, and follow-ups needed to deliver equitable health care for everyone. Delivering high-quality health care and providing a positive client experience for those that receive services at the Centre as well as for those who access services at various outreach sites in the Northumberland Community, is of utmost importance to the organization.

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

The PHNCHC's would like to highlight two areas of achievement that speak to the work being done at the Centre.

- 1) We are very proud of our success in increasing the number of clients able to access a primary health care provider. The Primary Care Panel (# of clients rostered to a nurse practitioner or physician at the CHC) was increased last year from 3583 to 3836 clients which was over the expected target of 3800. This was accompanied with an increase in the SAMI (Standardized ACG Morbidity Index) score. The SAMI represents the degree of complexity of the clients served. The average Ontarian receiving health care services is considered to have a SAMI score of 1.0. The average client being served at the Port Hope Northumberland Community Health Centre has a SAMI score of 1.8. This is a recognition that not all clients require the same amount of care. Those with more chronic conditions, more frailty, and more issues related to the social determinants of health require more time and attention in order to receive equitable quality care. With the increase in the complexity of

the clients being served at the CHC and the increased numbers of clients added to the roster, the CHC has moved from being at 77% to 91% of optimal Panel Size.

2) Another source of achievement and pride is that while the Centre took on these additional clients and the complexity of the clients being served also increased, individuals continued to rate their experience at a high level of satisfaction and inclusion in health care decisions. Last year, clients surveyed stated 95 percent of the time that they were included, to the degree to wish they wanted, in decisions about their health care and treatment. This was an increase from 93.8 the year before. The CHC is very proud that they were able to maintain high quality client centred care while also providing more timely access to individuals who previously were without a primary health care provider.

## **Resident, Patient, Client Engagement**

The PHNCHC has a Client and Family Advisory Roundtable (CFAR) which meets quarterly throughout the year with the Executive Director and Board Representative. This group identifies, reviews, and provides feedback on key areas from the client and family perspective. The QIP is one of several activities reviewed by CFAR. The PHNCHC Quality Committee also includes information received from clients who give input into the QIP process and associated action activities.

The Centre provides information about its QIP activities via the client bulletin boards, its website, and social media and invites clients to contribute feedback and suggestions.

## **Collaboration and Integration**

The PHNCHC participates directly at the sub-region planning table for Northumberland County. We are proud to be a part of the larger planning for services in our community. It is through this table that we have formed a partnership with FOURcast mental health and addictions agency to look for co-location opportunities and joint planning.

The PHNCHC is an active participant in the local Health Link Working Group and is working to develop coordinated care plans for clients with complex care needs. The CHC continues to work on collaboration opportunities for working together to identify and provide services for the residents of Northumberland who are in need of primary health care in order to prevent visits to the Emergency Department that could be better managed elsewhere.

The PHNCHC actively participates at the Northumberland Situation Table along with many community agencies. This table provides a forum for identifying individuals at high risk for crisis and intervenes to wrap services around them. The nurse practitioner sitting at the situation table assesses health status and intervenes early to address current health care needs in order to prevent further health crisis.

The PHNCHC partners with several agencies where it provides primary care outreach services. This includes Alderville First Nation's Wellness Centre, Cornerstone Centre for Family Violence, the New Canadian Centre, and with the Green Wood Poverty Coalition. Collaborating with organizations in the community and providing services where people live and work is often the key to linking them with the health care services they need.

The CHC joined Connecting Ontario in March of this year (2018) and will be now able to access additional information which will facilitate better collaborative care.

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

The PHNCHC is a small organization and so communication about the QIP flows easily across all areas of the CHC. Board Members, staff, clinicians, and leadership are all very aware of the QIP and its areas of focus. The Staff Quality Committee (made up of representatives from all departments) meets monthly. A large part of the work being done by the committee involves the QIP action plan. The Committee makes a presentation annually at an 'All staff' meeting and is part of the new staff orientation schedule. The Quality Committee reports on its activities and progress regularly to the Board of Director's Quality and Risk Committee. A member of the senior leadership team facilitates the Staff Quality Committee and communicates between leaders and staff on the actions and status of the QIP. This senior leader is also a member of the Board Committee which facilitates communication between the two groups.

### **Population Health and Equity Considerations**

Population Health and Health Equity are foundational principles of the Community Health Centre Model of Care. This is demonstrated in our adoption of target populations for the provision of health care services. The PHNCHC has identified 'at risk' youth, those living with mental health and addictions concerns, frail seniors with multiple complex conditions, and those living in poverty as those individuals in the Northumberland Community in need of finding equitable access to primary health care and allied health services. This has underpinned our programs and services strategic planning and we consider these populations when creating our QIP.

The PHNCHC will be putting a focus on two areas within the population health and equity domain for the 2018-19 QIP. These include a quality improvement plan to a) increase the number of indigenous clients receiving diabetes education and treatment and b) to increase the number of clients living in poverty and who meet eligibility criteria to receive colorectal cancer screening.

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

The PHNCHC belongs to the Northumberland Health Link Working Group and participates actively to develop strategic Aims and Goals for implementing processes to include improved collaborative care planning. This includes partnering with the hospital sector to support clients and help coordinate care for those occupying ALC beds. The PHNCHC GAIN team, Diabetes Team, and Primary Care Providers are available to meet with hospital personnel and actively participate in discharge planning for all of their clients who are in acute care beds at the hospital.

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

The PHNCHC offers counselling and psychotherapy via MSW staff for clients experiencing mental health and addiction issues.

All Nurse Practitioners at the PHNCHC have taken training and become certified in the prescription of controlled substances. This increases their knowledge and expertise for safe treatment and prescribing practices.

In 2017-18 the PHNCHC Primary Care Team developed a Pain Protocol for working with clients experiencing non-cancer pain. This protocol includes:

- various standardized assessment tools to help guide treatment
- guidelines for starting or changing opioid prescriptions
- inclusion of allied health professionals (Social Work) to help with goal setting, coping strategies, alternative treatment options, and one-on-one counselling
- strategies for dealing with aberrant behaviours (e.g. drug testing, contracts, fentanyl patch return program, etc.)

- offering groups for self-management of chronic pain and Mindfulness Based Pain Management
- offering lists of available resources for alternative treatment options in the community

The PHNCHC also joined Connecting Ontario which assists providers to obtain information about clients' opioid prescription history through pharmacy records that are now easily accessible and accurate.

The Association of Ontario Health Centres (AOHC) provides annual Practice Profile Information which outlines the Opioid dispensing information related to clients of the CHC. This provides valuable information that can be used to flag concerns or set targets for reduction and management of prescribing habits. i.e: Prevalence of Opioid Dispensing (%), New Opioid Starts (%), Concurrent Opioid and Benzodiazepine Dispensing (%), High Dose Opioid Dispensing (%)

## Workplace Violence Prevention

The PHNCHC has a policy for Workplace Violence Prevention that is reviewed regularly by the management team and Board of Directors. Staff, clients and volunteers were all provided with opportunities for input into this policy and have received education on their roles, rights and responsibilities for reporting events related to workplace violence and its prevention. The CHC regularly conducts workplace assessments to determine the risk for workplace violence (staff surveys, a review of related incidents, a review of complaints, and an environmental scan of the physical plant). There are processes in place for confidentially reporting incidents of violence as well as for investigating and responding to reports. The organization's leaders review quarterly reports of incidents of workplace violence and use this information to improve safety, reduce incidents of violence, and improve the workplace violence prevention policy. Staff receive annual mandatory training on the prevention of workplace violence including information on Bill 168 and Bill 132. Volunteers are also provided with training on the prevention of workplace violence and how to report incidents. New staff, students, and volunteers receive information and education on this topic at their orientation.

## 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)