

2018/19 Quality Improvement Plan for Ontario Primary Care

"Improvement Targets and Initiatives"

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AIM		Measure							Change					
Quality dimension	Issue	Measure/Indicator	Type	Unit / Population	Source / Period	Organization Id	Current performance	Target	Target justification	Planned improvement initiatives (Change Ideas)	Methods	Process measures	Target for process measure	Comments
Effective	Coordinating care	Percentage of patients identified as meeting Health Link criteria who are offered access to Health Links approach	A	% / Patients meeting Health Link criteria	In house data collection / most recent 3 month period	91522*	CB	80.00		1)review provider lists to identify clients who would benefit from health links and offer	review provider lists offer health links approach to clients	percentage of clients who qualify for health links will be offered the approach	80%	
	Increase knowledge by clients of after hours on-call services at PQ/SN CHC	Increase the percentage of clients who are aware of our after hours on-call services	C	% / All patients	In-house survey / 2018/19	91522*	63.06	70.00	Stretch target	1)Posters in clinic rooms and at reception advertising our after hours on-call Magnets to each client that includes after hours on-call details Follow up phone calls by RN for clients who visited the ER for issues that could have been addressed in clinic	Posters in all clinic rooms and at medical reception Count magnets provided to clients during fiscal year	percentage of clients who complete the client experience survey will identify being aware of our after hours on-call services.	70% of clients who complete the client experience survey will identify being aware of our after hours on-call services.	
Equitable	Population health - cervical cancer screening	Percentage of Ontario screen-eligible women, 21-69 years old, who completed at least one Pap test in 42-month period.	A	% / PC organization population eligible for screening	CCO-SAR, EMR / Annually	91522*	67.69	73.00	CHC provincial average	1)Review all BIRT lists of clients due to PAP and call to book in for PAP	Review BIRT lists quarterly RN to verify accuracy of data in NOD and make any necessary corrections MR/RN to call client for appointment RN cancer screening (pap/fobt etc)clinics scheduled as necessary	improvement in BIRT % of clients having had their pap tests	Increase in pap rate to 73% by March 31, 2019	
	Population health - breast feeding	Percentage of staff trained in Baby Friendly Initiative	C	% / Health providers in the entire facility	In house data collection / 2018/19	91522*	46	75.00	stretch target	1)staff will receive BFI training appropriate to their position (Level 1-3)	New contract offers will include link for BFI Level 1 training needing to be completed upon new staff orientation Directors track number of staff and training level completed Schedule Level 2 or 3 in person training when there is a critical mass of staff needing training	percentage of staff trained appropriate to their position	75% of all staff will have completed the training appropriate to their position	

M = Mandatory (all cells must be completed) P = Priority (complete ONLY the comments cell if you are not working on this indicator) A= Additional (do not select from drop down menu if you are not working on this indicator) C = custom (add any other indicators you are working on)