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## 2013/14 Quality Improvement Plan for Primary Care organizations in Ontario

*Lakehead  
Nurse Practitioner-Led Clinic*

April 1, 2013

# Overview of Our Organization's Quality Improvement Plan

- **Overview:**

Lakehead NPLC is focusing on the three metrics of quality highlighted by the MOHLTC for primary care: Access, Integration, and Patient-Centeredness. We are addressing these areas through a multi-pronged approach aimed at increasing patients' ability to see their provider when they need to, and giving them more opportunities for feedback, while coordinating care as much as possible between other health organizations where the patients may be receiving health care service. Access to same-day and next-day appointments will be available through a twice-weekly walk-in clinic for LNPLC patients and increasing the availability of same-day appointment bookings every day. We will continue to work with the Thunder Bay Regional Health Sciences Centre (TBRHSC) to receive notice of when patients present at the ED or are admitted to hospital; and follow-up with these patients as soon as possible, as appropriate. Revisions to our patient survey for 2013-2014 will focus on patient engagement and involvement in decision-making.

- **Focus:**

Objectives for providing:

- **Access** to primary care when needed: use same-day appointment bookings; reduce time to third-next-available appointment for all providers. Giving patients the opportunity to see a provider when needed will reduce long wait-times, minimize inappropriate use of acute health settings, and allow providers to focus on current needs with their patients.
- **Integration** with other care organizations: Timely access to primary care appointments post discharge from hospital; minimization of emergency department visits for conditions best managed elsewhere. By receiving information from TBRHSC we will be able to identify patients who can be educated on the appropriateness of ER use, and ensure continuity of care by quickly following up with patients admitted to hospital.
- **Patient-centred** focus: Receive and utilize feedback regarding patient engagement, opportunity to ask questions, having enough time; receive feedback from program participants. By continuing and expanding our patient satisfaction survey, we are better able to respond to the needs of patients of the clinic and ensure that we are providing care that they can understand, and that is congruent with their values and life needs.

- **Use of the Electronic Medical Record (EMR)**

Our Accuro EMR is a cornerstone of the clinic's operations for patient scheduling, providing care, communication, and for organizing information. The EMR allows the clinic to pre-populate the providers' schedules with designated same-day appointment slots to allow for improved access. The charting and recording procedures that the providers follow ensures that statistics can be generated and data can be queried to generate demographic reports. Because we receive and input all documents electronically, lists of patients presenting at the ED can be generated to allow for analysis and targeted education. We also use the EMR to determine third-next-available appointment times and consider how to make the most efficient use of clinic hours.

Through the Physician Office Integration system with TBRHSC, our NPs are able to receive electronic reports automatically for hospital procedures, and Accuro provides us access to the Ontario Lab Information System should reports need to be looked up for other procedures. NPs have access to Meditech at the TBRHSC to access additional information about our patients who are seen at the hospital.

- **Integration and continuity of care:**

Continuity of care across sectors can be largely driven by a positive primary care experience. Our clinic continues to focus on reduction of unnecessary Emergency Department visits, and minimizing the use of outside walk-in clinics for conditions best managed elsewhere. Our clinic offers two walk-in clinics per week, and will be expanding same-day appointment access in April 2013. By seeing their regular provider when needed, patients are able to experience greater continuity of care and avoid repeating their health concerns to multiple organizations. The potential for miscommunication of pertinent health information between organizations is also reduced.

This QIP aims to further increase integration and information sharing with other health organizations, particularly the TBRHSC to receive admissions and discharge reports consistently for all patients of the LNPLC. The clinic is also part of the newly formed Health Link in Thunder Bay, which will coordinate care across the primary care sector with further information sharing and identification of high-needs patients in the health system.

- **Practice/community profile:**

Our EMR allows for review and analysis of trends in demographics and, to some extent, acuity of patients at the clinic. Additionally, the clinic participates in several external networks, including: monthly teleconferences with the other NPLCs in Ontario, facilitated by the Nurse Practitioner's Association of Ontario. We also receive regional reports from the North West LHIN which identifies health concerns in this catchment area. The clinic has representation on the Thunder Bay Physician Recruitment and Retention Council which meets monthly to identify and discuss opportunities for providing access to as many patients as possible in the city. Further, the newly-formed Health Link should give increased insight on some more specific health issues in primary care, and ways to further coordinate care for our community.

- **Chronic disease management and prevention:**

Chronic Disease Management (CDM) is one of the principal objectives of the Lakehead NPLC and we continue to offer regular CDM programs throughout the year. A six-week session based on the CCAC-structured program is offered twice per year. The clinic hosts Diabetes education sessions monthly, in partnership with Diabetes Health Thunder Bay, and a more intensive Diabetes session quarterly. The clinic also hosts regular cancer-screening clinics with partners such as TBRHSC, Ontario Breast Screening, Cancer Care Ontario etc. These CDM programs focus on patient education and prevention which remains a focus for the clinic. A version of our updated patient survey for April 2013 will also be offered to program participants to evaluate the effectiveness of programs being offered, and ensure that we are offering programs consistent with the evolving needs of our patients

- **Accountability management:**

This QIP is subject to approval by the Lakehead NPLC Board of Directors, and to quarterly review and evaluation by a Quality Improvement Committee, to be established in March 2013. The Quality Improvement Committee is represented by a member from the Board, of the executive committee, and of the clinic staff (+ alternate for each). Quarterly updates will be made to the Board of Directors, and any necessary steps will be taken to ensure that quality care, patient safety, and privacy are considered as overarching decision criteria.

- **Challenges and risks:**

One perceived challenge with regards to this QIP in the first year is in receiving appropriate data from TBRHSC regarding admissions and discharge of our patients. This has been identified as a barrier with the TBRHSC and they have indicated that an updated procedure for this is being considered. Further, while same-day appointment slots have been reserved, there is a noted challenge in maintaining a third-next-available appointment within two weeks when there are staffing shortages. During a provider's leave, those covering the extra patient load will need more time for this coverage which may create a barrier to maintaining this criteria. While this is a minimal risk, it is still acknowledged.

## Our Improvement Targets and Initiatives

See Attached Excel Spreadsheet

### Sign-off

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

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Dr. Lynne Thibeault  
*Board Chair*

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Pam Delgaty, NP  
*Clinician Lead*

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Kyle Jessiman, MHA  
*Executive Director/Admin. Lead*