## **Primary Care Quality Improvement Plans**

## **Frequently Asked Questions**

## Q. What is a Quality Improvement Plan?

A. A Quality Improvement Plan (QIP) is a formal, documented set of commitments that a health care organization makes to its patients/clients/residents, staff and community to improve quality through focused targets and actions. QIPs are used in many sectors to assist organizations in delivering quality programs and services. They are organizational level quality improvement plans and are not practice or provider specific.

## Q. When does my organization need to submit their QIP?

A. All QIPs must be submitted by April 1 each year.

## Q. I have questions about completing my QIP. Where can I find answers?

- A. There are five places where you can find support and guidance for developing your organization's QIP.
  - I. Health Quality Ontario's <u>website</u> includes general as well as sector-specific QIP information; the <u>QIP Navigator</u> is accessed via HQO's website
  - II. The Ministry of Health & Long-Term Care's <u>website</u> includes the QIP documents as well as robust information about the Excellent Care for All Act.
  - III. The <u>QIP Navigator</u> has built-in help functions (see Question mark icons) to guide you through the process and provide you with helpful examples
  - IV. An extensive suite of resources is available on the Resources page of the QIP Navigator
  - V. You can contact an HQO QIP specialist at <u>QIP@hqontario.ca</u>

## Q. Who is required to submit a QIP to HQO?

- A. The following organizations are required to develop QIPs and submit them to HQO by April 1 of every year:
  - All public hospitals in Ontario
  - Inter-professional team-based primary care models: Family Health Teams (FHT); Nurse Practitioner-led clinics (NPLC); Community Health Centres (CHC); and Aboriginal Health Access Centres (AHAC)
  - Community Care Access Centres
  - Licensed Long Term Care homes

## Q. Where can I find the QIP guidance materials and indicator specifications documents?

A. Guidance materials, indicator specifications and other information is available on Health Quality Ontario's website as well as on the Ministry of Health & Long-Term Care's website.

## Q. Are there indicators that I am expected to include in my QIP?

A. The Indicator Specifications document describes a set of priority indicators for each sector's QIP. Each organization should review the priority indicators for their sector and determine which are relevant to them.

To support this process, your organization should also review its current performance against provincial benchmarks/theoretical best for all priority indicators. Additional indicators, relevant to your organization's quality improvement goals, can also be included in your QIP.

# Q. How often can I edit my QIP? Can changes be made to a QIP after it has been submitted to HQO?

A. You can edit and save your plan as many times as you wish until it is formally submitted to HQO, at which time it becomes read-only. Should an organization discover an error in their QIP after it is submitted, they are urged to contact HQO as quickly as possible at <u>QIP@hqontario.ca</u>. The organization and HQO will collaboratively determine the best approach to addressing the error.

Should amendments made to the QIP after April 1, HQO recommends that the most current version of the QIP be posted on the organization's website and that any changes be made apparent to the public.

Please note that any changes that are made to a QIP after the April 1 deadline will not be considered in the QIP analysis report that HQO develops each year.

## Q. How can I compare my organization's QIPs to those of my peers?

A. On the "Sector QIPs" page you can access all QIPs and sort them alphabetically or by fiscal year, sector, LHIN, and model/ type.

## Q. What questions should I use to survey my patients?

A. Survey questions have been provided (see Indicator Specifications Document) to support data gathering. In order to support practices and primary care organizations in their quality improvement efforts, Health Quality Ontario is developing a primary care patient experience survey. Following pilottesting, this survey and an accompanying implementation guide will be available to all primary care practices in Ontario. Implementation of the survey will be the responsibility of practices and/or organizations either on their own or in collaboration with other practices or organizations. For more information about HQO's primary care patient experience survey, please contact patientexperience@hqontario.ca. It is important to use the exact wording for survey questions that is provided in the indicator specification document in order to be included in the provincial analysis.

## Q. How is current performance calculated for "same day/ next day" access using survey results?

A. To calculate current performance, add the number of respondents who responded "same day" and "next day", and divide this sum by the number of respondents (do not include non-respondents or respondents who answered "not applicable/ don't know/ refused"). For example:

Formula for calculation = Numerator/Denominator X 100

## Numerator: "same day" + "next day"

Denominator: Total number of respondents, minus number of "not applicable" (Don't know/ refused) responses

- Q. One QI project can take consume team resources for the better part of a year. How is it possible to follow through on QI projects for all of the priority indicators (plus additional indicators) in one year?
- A. HQO recognizes that it takes focus and resources to work on QI projects and that setting priorities can often be a challenge. Organizations are not necessarily required to actively work on improvements in all areas. Organizations are encouraged to carefully consider the target they wish to reach for each priority indicator; the gap between current and target performance; the complexity of the problem; and the human, financial and temporal resources required to achieve the targets they have set. When those issues have been considered, organizations will be able to prioritize QI projects and develop improvement plans for the year. In many cases, organizations will choose to focus their energy and resources on one or two indicators.
- Q. There is a new Patient/Client/Resident Engagement field within the Narrative. What information should primary care organizations include?

A. Patient engagement refers to how the hospital is using patient and family feedback to improve the patient experience and quality of care, manage risk, and identify gaps between patient expectations and experiences of care.

Feedback can be either written or verbal in the form of compliments, concerns/complaints, suggestions, inquiries, and consultations. Feedback can be received in a variety of ways, such as formal committees, surveys, office visits with patients and/or their families, incident reports, or follow-up phone calls to name just a few.

## Q. What is the new survey calculation button in the Navigator?

A. The Primary Care QIP includes five priority indicators. Four of the five indicators are survey based. To assist organizations with calculating their survey questions in a consistent manner, HQO has built an auto-calculation feature in the QIP Navigator.

Organizations are encouraged to use the exact wording identified in the indicator specifications document in order to allow their data and information to be compared at a provincial level.

When entering current performance for the indicator, primary care organizations can add data by clicking on the **Survey** button. This will trigger a pop up window to enter the survey **responses for auto-calculation**. Users must fill in all the **response** fields in order for the calculation to work properly. Zero is a value and should only be entered if the response is truly zero. All 'not applicable' or unknown responses should be captured in the 'n/a' field. Once all data has been entered click **Save**, and the calculation will automatically appear in the current performance field. If your survey data should change before you submit your QIP, you can enter your data again by clicking on the Survey button to begin the process again, or by clicking on **Clear All Fields** which will clear all the fields that you previously entered (including target and target justification).

## **QIP Navigator – Frequently Asked Questions**

## Q. What is the QIP Navigator?

A. The QIP Navigator platform provides an online tool for organizations to develop and submit the QIP to HQO. The Navigator was developed by HQO, with input from and guidance from several partners including the Ministry of Health & Long-Term Care, the Ontario Hospital Association, the Association of Family Health Teams of Ontario, and the Association of Ontario Health Centres. The Navigator allows organizations to enter and save data, and provide the means for teams to contribute to the QIP as required. It also includes assistance in the form of: guides, videos, tools, and other resources, which will help organizations create and maintain robust and effective QIPs.

## Q. What are the QIP Navigator's technical requirements?

- I. High speed internet connection
- II. One of the following supported Internet browsers
  - a. Internet Explorer 7, 8, 9, 10
    - b. Chrome 27, 28, 29
    - c. Firefox 21, 22, 23
    - d. Safari 3, 4, 5
- III. The following Office and Adobe software:
  - a. MS Office 2007 (Word and Excel) or more recent versions
  - b. Adobe Reader 9 or a more recent version

# Q. I cannot access the QIP Navigator due to my organization's firewall. How do I turn off the firewall?

A. Please contact your IT administrator to disable your firewall or allow access to the QIP Navigator <u>website</u>.

## Q. Where do I get login details for the QIP Navigator?

A. Each primary care organization received an email with their unique login and password on December 10, 2013. Emails were sent to each organization's Executive Director (administrative lead), as well as organizational Quality Leads. For privacy reasons, users are asked to change their QIP Navigator password following the first log-in. Please contact the quality lead of your organization to retrieve the required login details.

## Q. I forgot my Navigator password. How can I retrieve it?

A. There is reset password function built into the QIP Navigator. Completing this process will email a temporary password to the individual to which the account is registered.

## Q. In what formats will QIP Navigator accept our organization's logo?

A. The image formats supported are: .jpg, .jpeg, .gif and .png. The file size limit is 512k.

## Q. Can more than one user access the QIP Navigator at the same time?

A. Yes. The QIP Navigator is a collaborative space, and as such, more than one user can be logged in and working on different aspects of the QIP at once. Please note that if two users are working in the same area of the QIP Navigator, only the most recently saved data or input will be saved.

## Q. I see a "corporation number" when I log in to my organization's QIP. What is that?

A. The identification number that you see when you log-in to your QIP is an administrative number that HQO uses to track QIP submissions. It is also used to prepopulate information within the QIP.

#### Q. How do I export documents from the QIP Navigator?

A. HQO has developed a QIP user guide that provides details about the use of QIP Navigator, including how to export documents for sharing and collaboration. In order for the QIP Navigator to recognize that an indicator is "active," and thus available for export, there must be data entered into that indicator's fields. This will save organizations the time of deleting blank indicators prior to exporting the Workplan as an Excel spreadsheet.

Once exported, you can save both the Workplan and Narrative as PDFs and post them on your website or share them at meetings. To view a brief tutorial on how to export your QIP Workplan and print it, please <u>click here</u>.

## Q. I would like to include materials that are already in other documents within the Narrative, (tables, graphics, etc.). What is the best way to input these into the Navigator?

A. Unfortunately, there is not the ability to paste tables or graphics into the QIP Narrative at this time. If you want to add more complex or detailed graphics to your Narrative (for public posting), you may want to consider exporting the Narrative to Word, adding graphics, and then posting the document. For the purposes of HQO's analysis, detailed graphics are not required.

## Q. Who do I contact if I have more questions?

A. Please contact <u>QIP@hqontario.ca</u> with any questions you may have about the QIP composition and submission process. Questions about legislative and/or policy requirements related to the MOHLTC Guidance Materials or broader *Excellent Care for All Act* (ECFAA) questions should be directed to the Ministry of Health & Long-Term care (<u>ECFAA@ontario.ca</u>)

