# **GeMQIN: Improving General Medicine Care in Ontario**

#### Why Focus on General Medicine?

General medicine patients account for:

- 40% of all emergency department admissions<sup>1</sup>
- 25% of all hospital bed-days<sup>1</sup>

There was a 56% increase in admissions to general medicine between 2010 and 2017.<sup>2</sup>

# **Improving Care for General Medicine Patients in Ontario**

A <u>GEMINI</u> study<sup>3</sup> was the first to identify large variations in clinical care and patient outcomes, leading to the development of the **General Medicine Quality Improvement Network** (<u>GeMQIN</u>). GeMQIN supports improved patient care by:

#### 1. Providing reliable data



- MyPractice Reports sent to 700 physicians
- OurPractice Reports sent to 18 hospital organizations
- Informing 65 <u>publications</u> and 22 funded research projects

# 2. Supporting a community of practice



- Peer learning
- Evidence-based best practices
- Quality improvement expertise

#### 3. Spreading and sustaining the program



- Expanded from 5 to 22 organizations
- 60% of general medicine patients in Ontario benefit from GeMQIN

# **Rapid Knowledge Translation**



During the pandemic, **80%** of hospitalized **COVID-19** patients were cared for by general medicine physicians.<sup>4</sup> GeMQIN pivoted to facilitate knowledge exchange and apply learnings across Ontario, becoming a major focal point for rapid knowledge translation to the hospital sector.

# **Alignment With Health System Priorities**

GeMQIN quality indicators align with provincial priorities to maximize improvements in patient care:

Access and Flow	Patient Safety	Efficiency and Sustainability
7- and 30-day readmission*,†	Blood transfusions	Blood transfusions
Length of stay <sup>†</sup>	In-hospital mortality <sup>†</sup>	Imaging
Alternate level of care (ALC) days*,†	Sedative-hypnotic prescribing	Routine bloodwork

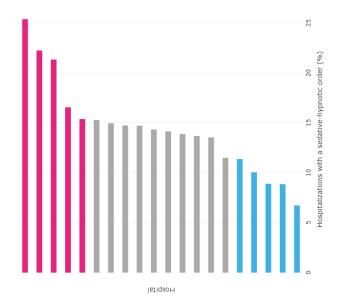
<sup>\*</sup>Ministry of Health Priority Area for 2023-2024.



<sup>&</sup>lt;sup>†</sup>GeMQIN hospitals outperformed non-GeMQIN hospitals.

#### **Provincial Delirium Campaign**

**75% of GeMQIN organizations** are participating in the Delirium Aware Safer Healthcare (<u>DASH</u>) campaign to reduce the use of sedative-hypnotics. If all GeMQIN hospitals achieve reductions similar to the top performers, the use of these harmful prescriptions will be **reduced in 12,000 patients per year**.



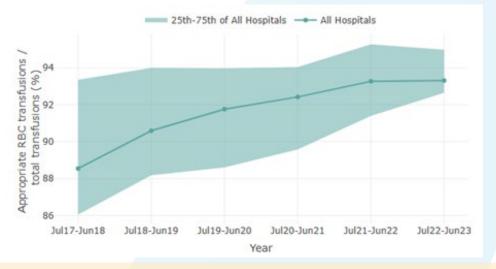
## Room for Improvement:

There is large variation between hospitals for prescribing sedative medications for sleep (range: 6.7%–25.4%).

Since the launch of the DASH campaign, membership on GeMQIN <u>Quorum</u> has increased by **150%**. Quorum is GeMQIN's online forum for members to access resources and connect with colleagues.

#### **Early Data Trends**

The use of appropriate blood transfusions increased from **88.5% to 93.3%**, ensuring that patients are receiving the right product and amount, which leads to improved care and efficient use of resources.





GeMQIN's 4.8% improvement in appropriate transfusions saves **11,554 kg CO<sub>2</sub>eq per year**,<sup>5</sup> equivalent to the emissions from driving 47,351 km in a gas-powered car (more than the distance around the world).<sup>6</sup>

# **Spotlight: Halton Healthcare**



Halton Healthcare learned about the "COVID at Home" program from other GeMQIN hospitals and implemented this early-discharge program (supported by nursing and home oxygen), allowing them to discharge patients home **3 days earlier** on average, saving ~1,000 hospital bed-days. This translated into a positive impact on the environment, preventing greenhouse gas emissions equivalent to driving 94,260 km (~2.3 times around the world) in a gas-powered vehicle.

#### References:

- (1) Verma AA, et al. Patient characteristics, resource use and outcomes associated with general internal medicine hospital care: the General Medicine Inpatient Initiative (GEMINI) retrospective cohort study. CMAJ Open. 2017;5(4):E842-9.
- 2) Ontario Ministry of Health. Hallway health care: a system under strain. 2019 Jan
- Verma AA, et al. Physician-level variation in clinical outcomes and resource use in inpatient general internal medicine: an observational study. BMJ Qual Saf. 2021;30(2):123-32.
- (4) Razak F, Verma AA. COVID-19 has reinforced Canada's need to strengthen generalist models of hospital care. Toronto Star. 2021 Mar 29.
- (5) Hibbs SP, et al. What is the environmental impact of a blood transfusion? A life cycle assessment of transfusion services across England. Transfusion. 2024;64(4):638-45.
  - United States Environmental Protection Agency. Greenhouse Gas Equivalencies Calculator. Accessed 18 Dec 2024.

