

# Ontario General Medicine Quality Improvement Network

UPDATE  
No. 2  
Apr 2021

29

Number of hospital sites participating in GEMINI/GeMQIN and the COVID-19 Laboratory

88

Number of members in the GeMQIN Community of Practice

156

Number of physicians that have received *MyPractice* General Medicine reports to date (disseminated since 2018)

393,000

Number of hospital admissions captured

GEMINI—General Medicine Inpatient Initiative

GeMQIN—Ontario General Medicine Quality Improvement Network

## Data in Action

### Results from Canada's Largest Hospital Analytics Laboratory

The study, "[Characteristics and outcomes of hospital admissions for COVID-19 and influenza in the Toronto area](#)" was presented on February 10, 2021 at the Ontario Medical Association media briefing ([recording](#)) and published in the Canadian Medical Association Journal on March 8, 2021. Research highlights are below:

#### Aims

1. Describe hospitalizations for COVID-19 in Canada
2. Debunk the myth that COVID-19 is not more severe than influenza
3. Explore whether we can predict who will die from COVID-19 in hospital

#### Method

- Using the GEMINI database, collected electronic data from seven large hospital sites across the Greater Toronto Area
- Included in analysis: all adults with COVID-19 or influenza discharged from inpatient medical services and medical-surgical intensive care units (ICUs) between November 1, 2019 and June 30, 2020 (Wave 1)
- Validated accuracy of seven externally developed risk scores to predict mortality among patients with COVID-19

#### Results

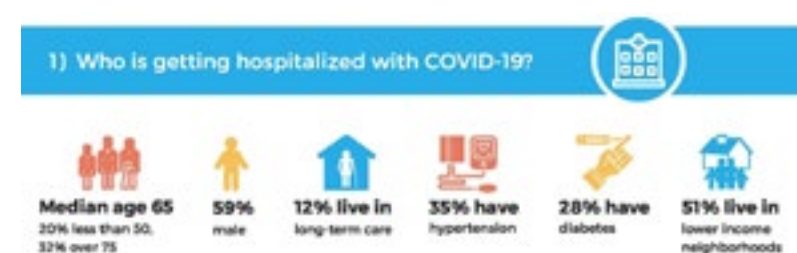


Figure 1: Characteristics of the COVID-19 cohort



Figure 2: COVID-19 vs. influenza

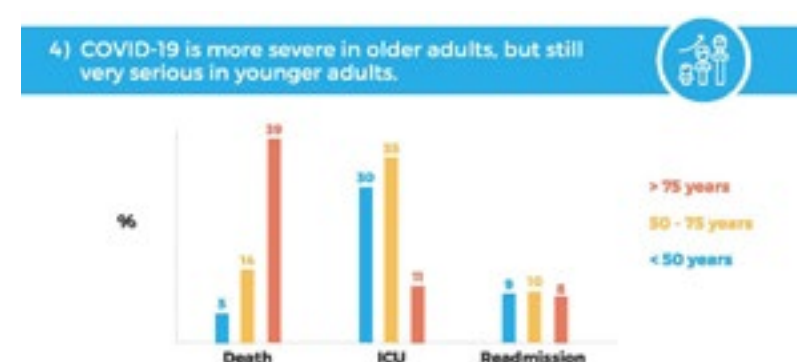


Figure 3: In-hospital mortality, intensive care unit care, and readmission indicators—by age

- Best performing tools for predicting in-hospital mortality in COVID-19:
1. [mAPACHE](#) (using electronic medical records)
  2. [ISARIC-4C](#) (at the bedside)

## Community of Practice

### GeMQIN Community of Practice (CoP)

The GeMQIN community on [Quorum](#) uses a private online space for all members to connect and share. Sharing resources harnesses the power of a community and accelerates improvement as members can begin from a common framework. Below are recent examples of member-shared resources available on Quorum to inform the work of your teams:

- [COVID-19 general medicine admission order-set](#) shared by Physician Champion, Amna Ahmed, Hamilton Health Sciences Centre
- COVID-19 resources shared by Physician Champion Nasrin Safavri, Humber River Hospital:
  - [Awake prone positioning order-set](#)
  - [COVID-19 General Medicine \(GM\) admission order-set](#)
  - [COVID-19 staff training YouTube videos](#)
- [The Rounds Table podcasts](#) shared by Physician Champion, Mike Fralick, Mount Sinai Hospital

If you are a member of a general medicine team and would like to join [Quorum](#), or if you would like to request recordings of monthly CoP calls, please email [OH-HQO\\_GeMQIN@ontariohealth.ca](mailto:OH-HQO_GeMQIN@ontariohealth.ca).

### DECEMBER CoP Call: Experiences and Lessons Learned From COVID-19 in the GTA

- **Dr. Moira Kapral (University Health Network)** shared insights on the GTA Hospital Incident Management System (IMS). GTA IMS provides a regional approach to optimizing hospital capacity during COVID-19 surges to lessen the burden on over-capacity hospitals and enable equitable access to health care. Since initiated on November 17, 2020, 167 transfers occurred across the GTA (at the time of the call). Most transfers to date have been to and from GM units, highlighting the importance of GM services in the height of the pandemic

### JANUARY CoP Call: The Bigger COVID-19 Picture—Hospital and Community Partners ([slides](#))

- **Drs. Amna Ahmed, Mohamed Panju, Steven Wong, and Haroon Yousef (Hamilton Health Sciences and St. Joseph's Healthcare System)** shared three exciting collaborative initiatives that address gaps in care during the pandemic:
  - **Outpatient Clinics**—established to reduce the burden on emergency departments (EDs) and fill the gap of specialty clinics that were closed. Collaboration with anesthesiology prep clinics made time-sensitive scheduled surgeries (mostly oncology) possible that would have otherwise been delayed or cancelled
  - **LTC-CARES**—enhances support for long-term care partners. This program optimizes collaboration across specialties and sectors to deliver high-quality patient-centred care through virtual/telephone consultation and other expedited services
  - **Connected Health Hamilton**—a COVID-19 Remote Monitoring Project to provide outpatient care to COVID-19 patients that are discharged from the ED and COVID-19 wards, reducing strain on hospital resources and readmissions

### FEBRUARY CoP CALL: Critical Care Triage During COVID-19 ([slides](#))

- **Dr. James Downar (The Ottawa Hospital)**, Division Head of Palliative Care at the University of Ottawa, led an engaging discussion on the development of an Adult Critical Care Emergency Standard of Care for a Major Surge

## MyPractice Report Updates

The second release of the *MyPractice* General Medicine Report is now available and is currently being distributed to hospital teams that have shared their data. To date, 5 hospital sites, and 117 physicians have received their second individual practice reports. This version of the report also includes a COVID-19 page that describes COVID-19 care at your hospital during the first wave of the pandemic.

Click [here](#) to view a sample report (you may need to create a [Quorum](#) account if you don't already have one). Once your hospital has completed all onboarding steps and successfully shared your data, you can expect your individual physician reports within approximately 3 months of data transfer.

## Coming Up

Hospital-level reports are on the horizon. We are assembling a **Report Development Committee** and are looking for engaged members from our community who would be interested in participating. We are looking for all roles including GIM physicians, hospital administrators, data analysts, and measurement specialists. Expectations of members include:

- Providing key input on indicator selection, and report development
- Ability to commit approximately 2 hours per month

If you are interested or know someone in your organization who would be interested, please email us at [OH-HQO\\_GeMQIN@ontariohealth.ca](mailto:OH-HQO_GeMQIN@ontariohealth.ca). For more details about membership and responsibilities view the draft [Terms of Reference](#) on Quorum.

### Upcoming Community of Practice Calls:

- April 21/21 @ 12 p.m.: Palliative care supports and an automated system for identifying inpatients having an elevated risk of 1-year mortality
- May 18/21 @ 12 p.m.: Lessons learned from other provincial quality programs
- Jun 16/21 @ 12 p.m.: Re-engaging with quality improvement—thinking forward

To learn more about GeMQIN and how you can get involved please visit our website. We welcome all hospitals across Ontario to join the community of practice by contacting us at [OH-HQO\\_GeMQIN@ontariohealth.ca](mailto:OH-HQO_GeMQIN@ontariohealth.ca).

If you would like to share your hospital's work in the next update or your ideas about program activities, please forward them to the same email address!