# Quality Improvement Plan (QIP) Narrative for Health Care Organizations in Ontario

March 31, 2023



#### **OVERVIEW**

The Algoma NPLC 2023-2024 QIP is a concrete opportunity to create a well defined path towards better performance in the way we deliver healthcare. This coming year, our selected areas of focus include the recommendations from the Ontario Health. As such, the Algoma NPLC will strive to become more effective in our efforts to encourage patients to complete their screening for cervical cancer, colorectal cancer, and breast cancer.

Moreover, strengthening the safety of transitions between healthcare organizations will continue. Collaboration with our regional acute care center enabled us to promptly follow-up patients within 7 days of discharge more than 85% of the time. However, we do believe that a score over 95% is achievable.

The Algoma NPLC is also going to strive to enhance the safety of opioid prescribing. The systematic and comprehensive use of the opioid manager tool for every patient to whom an opioid is prescribed will be our main intervention.

Finally, The NPLC is going to continue to monitor the patientcenteredness of the care we provide. Our most recent patient experience survey shows that 94% of our respondents confirm that they are involved as much as they would like in the therapeutic plan co-design. This year, the clinical team will receive ongoing support to help maintain this high level of collaboration with patients.

## PATIENT/CLIENT/RESIDENT ENGAGEMENT AND PARTNERING

One of the focus of the quadruple aims is patient experience. The Algoma NPLC strives to gradually increase the opportunities to obtain insight from our patient population. Firstly, our current efforts to implement Online Appointment Booking (OAB) is guided by several patient centered metrics. Patients provide instrumental feedback regarding easy of use, effectiveness, and demand for types of online appointment offering. Secondly, twice per year, patient are invited to provide their an evaluation their overall experience while receiving care at the Algoma NPLC. Survey results are reviewed and inform operational decision making. For example, our surveys revealed that high number of our patients attend the emergency department for minor ailments. Consequently, same day next day appointment slots were increased to allow for more urgent access to care at the Algoma NPLC.

Survey's have been a valuable method of engaging and obtaining relevant information from our patient population. However, surveys are limited as they are designed to gather or seek out information and not promote open dialogue. In light of this limitation, one of the Algoma NPLC's strategic goals is the creation and implementation of a patient advisory committee. Implementation should be completed by April 2024.

## **PROVIDER EXPERIENCE**

The Algoma NPLC has not been spared from the human resources challenges seen across the health sector. The COVID 19 pandemic and the seasonal flu put significant pressure on our organizations. The clinic's staff is mostly comprised of individuals with young children. This demographic characteristics put us more at risk for very frequent request for time-off to care for children. These absences invariably added to the burden of the other staff.

During these challenging times, the Algoma NPLC had to juggle between ensuring the well being of staff while honoring our commitment to our patient. The path chosen includes multiple interventions. Firstly, when reasonable and not limiting access to care, flex schedules are approved. Secondly, when appropriate, request to work remotely are granted. Thirdly, forecasted surplus funding was used to add temporary employees to help increase access to care and lighten the load of the clinical team. Finally, weekly huddles and monthly team meetings are forums through which staff can express their concern and need for support. Overall, though the strategies did not completely eliminate the increased workload experienced by our staff, it did provide a much appreciated support.

### WORKPLACE VIOLENCE PREVENTION

The Algoma NPLC has a comprehensive occupational health and safety program which includes policies and training on workplace violence and harassment. Our staff and students are required to complete workplace violence & harassment, workplace diversity and inclusion, occupational health and safety awareness, understanding human rights and AODA training annually. We also review an employee code of conduct annually. We have 4

implemented many health and safety policies that are reviewed by our staff and students as part of our orientation process. We also review policies at each monthly team meeting. Our board of director members are also required to complete the AODA training as part of the orientation to the board process.

Our clinic has a health and safety committee comprised of staff and management that complete monthly walk-through inspections. These inspections are reviewed and discussed with the staff at our monthly team meetings, including any follow up actions pending and progress on any outstanding items. All staff and visitors are encouraged and reminded to express any concerns or risks that need to be addressed.

Although our commitment to staff and students safety is a top priority and is reflected in our training and policies and procedures, patient safety is equally as important to our organization. We have a zero tolerance approach to inappropriate, aggressive or abusive behavior. A notice is displayed in our waiting room to ensure all patients are aware of this and warning letters are mailed as needed. This sets the expectations of behavior for our patients and ensures patient safety is maintained.

Additionally, The COVID 19 pandemic prompted us to implement strategies to prevent infection transmission while in the clinic. Air purifiers, plexiglass separators and masks utilization were deployed for both patients and staff.

Moreover, both staff and patients are given the opportunity to provide feedback at least yearly through our staff engagement and patient experience surveys. On an as needed basis, staff and patients are also welcomed to share concerns with the leadership team if or when incident occurs.

Lastly, Board directors receive a monthly update on incident reports. If an incident occurs, a report of the incident and corrective measures are reviewed.

### **PATIENT SAFETY**

Patient safety is a top priority of the Algoma NPLC. Our goal for the upcoming fiscal year is to form and utilize a patient advisory committee to better inform and guide our services, protocols and patient tools. One of the things this committee will provide feedback on is the clinics various patient safety measures to ensure efficacy. With this feedback we will be able to make meaningful changes to better our patients experience at the clinic.

During the last few years the COVID-19 pandemic inspired some new patient safety measures such as masking, plexiglass dividers, extensive cleaning of surfaces in between patients and air purifiers throughout the clinic. When patients or a provider is ill virtual appointments are utilized to reduce the risk exposure and spreading.

We have many policies and protocols in place as part of our health and safety program at the Algoma NPLC. As part of these policies and protocols, we have an accessible customer service plan and training for staff, Code of Conduct which is reviewed annually by staff and posted for patients, other Health and Safety related policies and forms including Incident Report forms which is used for staff and patients.

In the event of a patient related incident, the Executive Director is notified immediately and acts accordingly. The incident is documented and outcomes are reviewed by the Board of Directors during the monthly meetings. During our monthly team meetings, we would also discuss relevant outcomes to implement change if necessary.

## **HEALTH EQUITY**

Our clinic is a member of the Alliance for Healthier Communities, as part of this membership we must endorse the health equity charter which is a commitment to action by the Alliance and it's members to recognize and confront barriers to equitable health. It is with this approach that clinic has strived to have this focus when developing our programs and services.

Our Board of Directors have enrolled and are working through completing health equity and governance training to better guide our strategic directions to have an anti-racism/anti-oppression lens. One of the ways we have begun this approach is ensuring our staff have adequate training to meet the linguistic, cultural and other needs of the diverse patients we serve. We have committed our staff to complete some indigenous training through the 4 Seasons Truth and Reconciliation training modules.

Another one of our equity initiatives involves asking patients their language preference and recording it in our demographics section in our EMR. By recording this information, patients will receive correspondence from Ocean, our patient messaging/reminder system, in the language they have indicated they would prefer. Additionally, for our Francophone patients , during the intake phase we review our registration forms and inquire upon booking if a patient would prefer to be scheduled and assigned to our French speaking clinician.

During this fiscal year we will be working with our website team to be able to have a French version of the website. We will also be converting our registration form and other clinical forms to have a French version as well.

#### **CONTACT INFORMATION**

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## SIGN-OFF

It is recommended that the following individuals review and sign-off on your organization's Quality Improvement Plan (where applicable):

I have reviewed and approved our organization's Quality Improvement Plan on March 31, 2023

Doug Abbott, Board Chair

Dominic Noel, Quality Committee Chair or delegate

Dominic Noel, Executive Director/Administrative Lead

Other leadership as appropriate