

**2022/23 Quality Improvement Plan for Ontario Primary Care
"Improvement Targets and Initiatives"**

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AIM	Measure		Unit / Population	Source / Period	Organization Id	Current performance	Target	Target justification	External Collaborators	Change		Target for process measure	Comments		
Issue	Quality dimension	Measure/Indicator	Type	Unit / Population	Source / Period	Organization Id	Current performance	Target	Target justification	External Collaborators	Planned improvement initiatives (Change Ideas)	Methods	Process measures	Target for process measure	Comments
M = Mandatory (all cells must be completed) P = Priority (complete ONLY the comments cell if you are not working on this indicator) A= Additional (do not select if you are not working on this indicator) C = Custom (add any other indicators you are working on)															
Theme I: Timely and Efficient Transitions	Timely	Percentage of female patients aged 23 to 69 years who had a Pap test within the previous three years.	A	% / PC organization population eligible for screening	OHIP,RPDB,CCO-OCR,CIHI, SDS / April 2020 – March 2021	91400*	64.3	66.00	We feel that the Target increase proposed is an achievable goal based on our current performance levels. We will continue to work on improving our performance.	OHT partners as this is part of the Collaborative-QIP CCO - regular reminders	In January during Cervical Cancer Awareness Month, pull up a list from our EMR of patients who are overdue for screening and send reminders.	EMR data extraction for patients due for cervical screening. Email or phone call follow up to remind the overdue patients.	% of patients overdue who are contacted for screening	We intend to reach 80% of the over due patients	
		Percentage of screen eligible female patients aged 52 to 69 years who had a mammogram within the past two years.	A	% / PC organization population eligible for screening	OHIP,RPDB,CCO-OCR,CIHI, SDS / April 2020 – March 2021	91400*	65.2	67.00	We feel that the Target increase proposed is an achievable goal based on our current performance levels. We will continue to work on improving our performance.	OHT partners as this is part of the Collaborative-QIP CCO - regular reminders	In October during Breast Cancer Awareness Month, pull up a list from our EMR of patients who are overdue for screening and send reminders.	EMR data extraction for patients due for breast cancer screening. Email or phone call follow up to remind the overdue patients.	% of patients overdue who are contacted for screening	We intend to reach 80% of the over due patients	
		Percentage of screen eligible patients aged 52 to 74 years who had a FOBT/FIT within the past two years, other investigations (i.e., flexible sigmoidoscopy) or colonoscopy within the past 10 years.	A	% / PC organization population eligible for screening	OHIP,RPDB,CCO-OCR,CIHI, SDS / April 2020 – March 2021	91400*	73.9	75.00	We feel that the Target increase proposed is an achievable goal based on our current performance levels. We will continue to work on improving our performance.	OHT partners as this is part of the Collaborative-QIP CCO - regular reminders	In March during Colon Cancer Awareness Month, pull up a list from our EMR of patients who are overdue for screening and send reminders.	EMR data extraction for patients due for colorectal screening. Email or phone call follow up to remind the overdue patients.	% of patients overdue who are contacted for screening	We intend to reach 80% of the over due patients	
Theme II: Service Excellence	Patient-centred	Percent of patients who stated that when they see the doctor or nurse practitioner, they or someone else in the office (always/often) involve them as much as they want to be in decisions about their care and treatment	P	% / PC organization population (surveyed sample)	In-house survey / April 2021 – March 2022	91400*	80.43	82.00	We feel that that Target increase proposed is achievable and we will continue to work on improving our performance. We will aim to reach beyond the proposed target level of patient satisfaction.	Patient advisors	Posters to remind patients to asking questions about their care.	Will put up posters in various parts of the clinics to encourage patients to get involved in their own care and ask questions. Then survey patients to assess.	Percentage of patients who stated that their doctor or nurse practitioner would (always/often) involve them as much as they want to be in decisions about their care and treatment.	We will aim to receive completed surveys back from 8% (minimum) of the rostered patient population.	
Theme III: Safe and Effective Care	Safe	Percentage of non-palliative patients newly dispensed an opioid prescribed by any provider in the health care system.	P	% / Patients	CAPE, CIHI, OHIP, RPDB, NMS / March 31, 2021	91400*	1.5	1.45	We are performing very well with this measure and we will aim to reach the proposed target level.	ECHO Carefirst Seniors and Community Services Association	Patient education sessions regarding chronic pain management. Provider education sessions (through ECHO) regarding chronic pain management/opioid use.	Will run group education sessions on pain management for chronic pain patients. Will encourage providers (physicians and social workers) to complete some online educational sessions relating to chronic pain management.	Number of patients who attended the education sessions offered. Percentage of providers who attended the education sessions.	75% of providers attend the education sessions. Will aim to have 20 patients participate in the workshops (#s are based on workshops being run and number of participants allowed)	