

Let's Make Healthy
Change Happen.



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



3/28/2019

This document is intended to provide health care organizations in Ontario with guidance as to how they can develop a Quality Improvement Plan. While much effort and care has gone into preparing this document, this document should not be relied on as legal advice and organizations should consult with their legal, governance and other relevant advisors as appropriate in preparing their quality improvement plans. Furthermore, organizations are free to design their own public quality improvement plans using alternative formats and contents, provided that they submit a version of their quality improvement plan to Health Quality Ontario (if required) in the format described herein.

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Overview

The Vaughan Community Health Centre (VCHC) is a not-for-profit, community-governed organization providing primary health care, social services, and illness prevention programs primarily to the residents of the Western and Northern York Region. In particular, we serve those people experiencing barriers to accessing health care services due to culture, language, age, chronic illness, or the like. As part of the health promotion framework of our services, we work in partnership with other community-based health and social service organizations to address individual, family, and community needs.

The VCHC continues to dedicate significant staff and management time to focus on the quality improvement program. In addition, our Quality Improvement (QI) Committee includes two client representatives who actively provide feedback into the planning, implementation and monitoring of the Quality Improvement Plan (QIP). The QI Committee ensures that client feedback from the client experience survey is reviewed and improvements are made, where appropriate and feasible.

For the 2019-2020 QIP, the VCHC has adopted the 5 common QIP indicators approved by the Performance Management Committee and the Executive Leaders Network of the Community Health Centre (CHC) sector. Specifically, the VCHC will focus on the following: 1) clients' ability to get an appointment on the date they wanted; 2) clients' feeling of being involved in care decisions; 3) clients feeling comfortable and welcome at the CHC; 4) completion of sociodemographic data collection for active clients (data collected for at least one of racial/ethnic group, disability, gender identity or sexual orientation); and 5) cervical cancer screening stratified by income and stratified by racial/ethnic group. Indicators #4 and #5 focuses on health equity. The data collected will help the VCHC to identify vulnerable clients who may not be accessing cervical cancer screening services and for the VCHC to explore opportunities for improvement.

Describe your organization's greatest QI achievement from the past year

For the 2018-2019 QIP, the VCHC Diabetes Nurse Educators and Chiroprapist collaborated in developing a team work flow for the Diabetic Foot Ulcer (DFU) risk assessment for clients with Type 2 diabetes. The team has created a template in the Electronic Medical Record for consistent documentation of the DFU. Now that the team is equipped with a clear work flow and documentation, the completion of the DFU risk assessment is now an integral part of client care and the team is completing the DFU risk assessment for clients on a more consistent basis.

Patient/client/resident partnering and relations

The Vaughan CHC engages clients in quality improvement initiatives at the Centre. We have two client representatives on the Quality Improvement Committee who are actively engaged in the development and monitoring of the Quality Improvement Plan. They attend onsite quarterly Quality Improvement Committee meetings and their feedback is incorporated into the quality improvement activities or improvements to our current practice. Clients are also asked to share their feedback on primary health care services received and satisfaction with social programs via the client experience survey. In addition, clients are asked to evaluate the social programs. Their feedback is reviewed and discussed at team planning meetings and efforts are made to integrate clients' feedback into future or existing programs.

Workplace violence prevention

The Vaughan CHC has taken the following steps to monitor, reduce and prevent workplace violence:

- 1) Policies on providing a harassment-free workplace, workplace accommodation and anti-discrimination have been developed and reviewed with staff.

- 2) Staff has received anti-harassment training focusing on the definition of workplace harassment, the roles and responsibilities of employees, supervisors and management and reporting and investigation of workplace harassment.
- 3) Supervisors have received specific training on how to conduct a proper investigation into a workplace harassment complaint.

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

Board Chair *gw* (signature)

Quality Committee Chair or delegate *LoAn Ta-Young* (signature)

Executive Director/Administrative Lead *Leibel Oraygo* (signature)

Other leadership as appropriate _____ (signature)