

**Excellent Care
For All.**

Quality Improvement Plans 2012/13: An overview

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2ND SESSION, 39TH LEGISLATURE, ONTARIO
59 ELIZABETH II, 2010

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Bill 46

*(Chapter 14
Statutes of Ontario, 2010)*

**An Act respecting
the care provided by
health care organizations**

Projet de loi 46

*(Chapitre 14
Lois de l'Ontario de 2010)*

**Loi relative aux soins
fournis par les organismes
de soins de santé**

The people of Ontario and their Government:

...

Believe that the patient experience and the support of patients and their caregivers to realize their best health is a critical element of ensuring the future of our health care system

...

Share a vision for a Province where excellent health care services are available to all Ontarians, where professions work together, and where patients are confident that their health care system is providing them with excellent health care

...

Recognize that a high quality health care system is one that is accessible, appropriate, effective, efficient, equitable, integrated, patient centred, population health focussed, and safe

...

Believe that quality is the goal of everyone involved in delivering health care in Ontario

Year 1: Reporting on performance

- Hospitals should have a process developed to report on performance against year 1 of their QIPs
- This analysis should be submitted to HQO along with the QIP II
- Hospitals will be provided with more information and guidance on what this should look like in the coming months

Principles to guide implementation

FOCUS ON...	When	Goal
IMPLEMENTATION	Goal for Year 1	Implementing in Hospitals
STANDARDIZATION	Goal for Year 2	Consistency across the field
IMPROVED PERFORMANCE	Goal for Year 2	Focus on performance
SPREAD	Goal for out years	Health System Integration

QIP II: Goal and Guiding Principles





GOAL:

Support hospital quality improvement while ensuring provincial movement of the quality agenda

GUIDING PRINCIPLES:

- Ensure the fundamental goal/purpose of QIP
- Support and advance progress achieved from year 1
- Allow for a reasonable amount of change (i.e. improved performance where appropriate)
- Continue on a quality “journey”
- Information gathered should be information used
- Support the goals of ECFAA

Changes from Year 1: Recommended Core Indicators

Quality Dimension	QIP II	Rationale/Comments
Safety	<i>C. difficile</i> infection Ventilator-associated pneumonia Hand hygiene Central line infection Pressure ulcers Falls Surgical safety checklist (SSC)  Physical restraints 	<ul style="list-style-type: none"> • SSC is publicly reported • Currently provincial compliance with the checklist is very high • Board attention to this indicator will hopefully improve questionable data • Physical restraints indicator added after consultation with Mental Health hospitals
Effectiveness	Hospital standardized mortality ratio Readmission Alternate levels of care Total Margin	<ul style="list-style-type: none"> • Readmission and alternate levels of care indicators more appropriately linked to the Integrated dimension
Access	ER wait times – admitted	<ul style="list-style-type: none"> • Admitted indicator focuses attention on improvement
Patient-centred	“Would you recommend hospital to family...” Overall Quality of Care received 	<ul style="list-style-type: none"> • Added additional patient satisfaction metric after consultation with Mental Health hospitals
Integrated 	Readmission Alternate levels of care	<ul style="list-style-type: none"> • Fifth quality dimension added to encourage system-wide attention to indicators related to continuity of care and care transitions

Highlights from the 2012/13 Guidance

Focus on **standardization** and **improved performance**

Focus should be on improving performance beyond what was Achieved in year 1, e.g. more aggressive target setting

Recommendations for **other indicators** to consider

Appendix C includes recommendations for other indicators to consider
Examples include: Medication Reconciliation, Discharge transitions, Financial (operational) efficiency

Providing **evidence & leading practices**

Appendix D includes recommendations of leading practices hospitals should consider including as change ideas.

Link with **provincial and organizational priorities**

Look to other provincial and organizational initiatives that should be included in plan (e.g. Most Responsible Physician QIP)

Quality Improvement '201' (Appendix A)

Focused on appropriate target setting ("stretch" targets)

QIP II Guidance materials

- QIP II guidance materials have been released as of November 22nd
 - Guidance Document
 - Short Form
 - Excel spreadsheet
- Materials posted on www.ontario.ca/excellentcare
- Email ecfaa@ontario.ca or qip@hqontario with questions

April 1, 2012: Deadline for QIP II submission to HQO