

Let's Make Healthy  
Change Happen.



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



Community  
Health Centre  
Centre de santé  
communautaire

3/15/2018

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.

[ontario.ca/excellentcare](http://ontario.ca/excellentcare)

## Overview

This year the goal for our quality improvement plan is to ensure that the indicators within the workplan reflect the needs of our clientele. We provide care for clients who are vulnerable and frequently experience barriers to access care. Social determinants of health such as poverty, lack of education, unemployment, chronic diseases, drug and alcohol addiction, culture and gender are contributing factors. Our centre has recently signed off on the Model of Health and Well-being as well as the Health Equity Charter, as a member of the Association of Ontario Health Centres (AOHC) and we will endeavor to incorporate this model and spirit of the Charter into all that we do at Carlington.

This QIP will give us the vehicle to address some of these health inequities. We are currently revamping our strategic plan in collaboration with the five (5) other CHCs within the City of Ottawa to work on common goals. Our guiding "North Star" for this process is: Equity for All. We will continue to focus in the area of health equity and access by addressing food security, reducing barriers for clients who identify as transgender and providing timely access to services within the centre across programs.

## Describe your organization's greatest QI achievements from the past year

One of the greatest achievements for our organization is the success of creating a culture of quality improvement. The "Thinking Thursdays" sessions that include participation from all staff is an example of this. In response to staff requests for this training and in the interest of stewardship and accountability, the management team at Carlington felt strongly that we needed to focus on and invest in training and education to all staff in order to inform staff and derive improved outcomes for the clients we serve. The management team has worked hard to provide training to ensure that we consistently deliver services that are culturally sensitive, free from oppression and equitable to all community members, while reducing barriers to access.

The following training sessions were provided to staff:

- Cultural Sensitivity Training (focus on Indigenous issues)
- Health Equity Training
- Anti-Oppression Training

In these facilitated sessions, we encouraged staff to share their experiences with their co-workers. It is a time for self-reflection with a hope that staff and management will take an introspective look at how we align ourselves with our mission, vision and values. Do we practice what we preach and how do we make changes within the organization to get us to where we want to be? We endeavor to deliver the best possible quality of and continue to strive for excellence.

## Resident, Patient, Client Engagement

In this past fiscal year we developed a Client Advisory Committee in order to provide insight and feedback into the services delivered at Carlington. Our first priority was to develop a revised client satisfaction survey. This has led to a name change for the survey to the "client experience survey." A new set of questions have been developed that identify health equity and inform us on areas of improvement necessary to meet the needs of our community. We continue to be accountable to our funders by asking questions related to the outcomes of programs and services for which we receive operational funding. We look forward to continuing this client engagement as we move to other initiatives that will be identified at future meetings.

We also do program evaluations, asking clients to rate the effectiveness and quality of the programming they received. This detailed information is program-specific and is collected in addition to the client experience survey. The feedback provides decision support in how facilitators of programs can improve the quality and outcomes of their programs and/or services. This important data from clients allows us to review the status quo and challenges us to make necessary changes in order to meet the needs of our clients. This could mean extending the length of program, changing the date it is offered, offering services at another location, changing the focus of the program, or discontinuing the program/service.

## Collaboration and Integration

The Ottawa area CHCs have a longstanding history of collaborating with each other and with other community partners for service delivery. Currently, four Ottawa CHCs, including Carlington, continue to work together on objectives from our shared strategic plan (since 2012). This year we are embarking on a new strategic plan that will include all six (6) CHCs within the City of Ottawa to work towards common goals.

At the board level, there has been a shift in the focus of quality improvement and how this accountability to quality improvement is reflective in what decisions are made at this level.

All the Executive Directors of the CHCs in the Champlain LHIN meet monthly to collaborate and address issues within the region. They look to share resources, standardize policies, procedures and processes, and build regional program models. The Health Services Directors of the Primary Health Teams also meet monthly with the same goals in mind at a more operational level. These two groups come together 2-3 times a year to share in overall goals and objectives.

Carlington has always worked with various partners to strive for excellence in the care and services we deliver. Our partnerships with other agencies allows us to deliver chiropody, lung health, diabetes care, a breastfeeding drop-in clinic, parenting groups, and cooking classes at the centre. Other partnerships provide funding to allow us to deliver programming such as the Daisy's Drop-in, which is a weekly program where sex trade workers come together to share in a morning meal and seek support and medical care in a safe space. We also have the SWAG (Secondary Students Will All Graduate) program that provides at-risk youth with the tools necessary to obtain their high school diploma and move on to post-secondary education or employment. We work with Family and Youth Services to deliver programming to families with young children and maintain a Headstart Nursery School (Annvale), a school- readiness program for families in need. Our Assertive Community Treatment Team works within the community and with the Primary Care Team with the goal of ensuring the well-being of clients living with severe mental health illness in the community and reducing hospitalizations.

The young woman featured in this video is a graduate of our SWAG program: <https://www.unitedwayottawa.ca/catherine>

At the team level, Carlington has five all-staff meetings per year focused on professional development in order to come together, to network and share a variety of information that may benefit the clients across the organization. We have regular team meetings and have adopted the concept of daily huddles to keep staff informed of day to day operations.

### **Engagement of Clinicians, Leadership & Staff**

The engagement of all levels of leadership within the organization has been adopted in our quality improvement journey. Although, the QIP indicators proposed by HQO continue to focus primarily on primary health care outcomes, we have made a decision at the management level to look at indicators that cut across the organization to improve outcomes for clients in different programs.

Staff participate in quality improvement initiatives by documenting in the EMR so that the data can be collected and analyzed and by maintaining logs to collect information pertaining to various indicators. They also participate in PDSAs at the team level to change workflows and leverage efficiencies.

### **Population Health and Equity Considerations**

The organization has worked to ensure we incorporate health equity in all that we do. This year's QIP will include two new indicators that involve equity within the populations we serve. We will be looking at food security and decreasing or eliminating barriers to persons who identify as LGBT.

Some organizational initiatives will not be highlighted in this year's QIP; but are ongoing goals that we continue to monitor to ensure a high level of client satisfaction and program effectiveness. We have worked toward a path of reconciliation and continue to acknowledge and understand the history and struggles of Canada's Indigenous people. We have voluntarily become early adopters of the new standards set out by Canadian Centre for Accreditation to address the needs Indigenous clients. We do this by providing a safe and welcome space for them. The area behind our main reception area as you enter the building is a display of artifacts and drawings that was arranged by our staff. We encourage staff to increase their awareness and cultural competencies in this area by undertaking Indigenous Cultural Sensitivity Training. We have established an Indigenous Committee with the goal of promoting an understanding of Indigenous issues and promoting initiatives throughout the year.

We also look at cultural and racial inequities by providing anti-oppression training and having an open forum for discussions about these issues at the team, management and organizational level. As an organization, we will strive to address all health and social inequalities.

### **Access to the Right Level of Care - Addressing ALC**

Carlington CHC provides a variety of services that reduce hospitalizations. The primary care and ACT teams provide evening hours, on-call services and home visits. The primary care team provides palliative care; RN Triage and same day/next day appointments as well as chronic disease management. When performing weekend on-call duties, our office is open half a day on that weekend to allow the physicians to see clients in person, which diverts clients from busy emergency rooms. In tracking the 7-day discharge indicator in the QIP, our goal is to ensure that clients' needs are addressed by the clinic or in the community to avoid re-admission to hospital. Our goal of keeping clients safe and

reducing emergency room visits and hospitalizations is accomplished by offering programming such as the Primary Care Outreach to Seniors; priority intake to women and their children living in shelters, as well as non-insured persons presenting to the clinic. We also provide outreach clinics to various domiciliary housing units in our catchment area. Our crisis intake counselor provides assistance to clients in acute need and refers clients to the appropriate services within the organization or with community partners.

This year our providers will be focusing on the "Choosing Wisely" initiative to ensure that clients are not subjected to unnecessary tests, treatments, and procedures. These unnecessary tests do not add value for patients, potentially expose patients to harm, lead to more testing to investigate false positives, contribute to unwarranted stress for patients and their families, and consume precious time and resources.

Health Links has gained momentum in this region and we are engaging with the LHIN in a process to have coordinated care plans for clients who are the high users of the health care system in attempt to keep them in their homes and out of the hospitals. The benefit realized is that clients who are not in hospital are using up less health care resources and health care dollars.

## **Opioid Prescribing for the Treatment of Pain and Opioid Use Disorder**

The organization is actively engaged in harm reduction strategies to decrease the use of opioid abuse. We have entered into a partnership with the City of Ottawa, Public Health to have a harm reduction vending machine at the front entrance of the building so that persons looking for harm reduction supplies can access them outside of centre hours. When the centre is open, persons can meet with the crisis worker or coordinator on site to receive harm reduction supplies (injection and inhalation). We have also entered into a partnership with another CHC to deliver peer-to-peer harm reduction support to clients.

Interested staff members have been provided with Naloxone Administration Training. This provides trained personnel to render first aid to any persons presenting at Carlington in the state of a overdose by administering naloxone. This training is offered on a yearly basis and started in 2017.

Carlington's primary health care team providers have participated in ongoing professional development in Opioid Use Disorder. The clinicians got together to review opioid prescribing policies and procedures. The goal was to ensure that clients with chronic pain are well managed and follow the same procedures to avoid "doctor shopping." All clients have opioid contracts when appropriate; and an agreement was reached for any clinician seeing another clinician's clients will follow and honour the opioid contract. One of our locum physicians is well-versed in the use of methadone and Suboxone and is an invaluable resource to clinicians, aiding them in their treatment protocols for clients.

ACT team members work with clients on one-on-one basis who are in need of addiction counselling while managing their chronic mental health conditions. Mental health workers on this team are highly trained in this area.

## **Workplace Violence Prevention**

The following is an excerpt from the Carlington workplace safety and violence policy:

Carlington is committed to the prevention of workplace violence and is ultimately responsible for worker health and safety. All reasonable steps will be taken to protect our workers from workplace violence from all sources. Violent behaviour in the workplace is unacceptable from anyone at any time at Carlington. This policy applies to everyone who enters a Carlington work space. Everyone is expected to uphold this policy and to work together to prevent workplace violence.

There is a workplace violence program known as Non-Violent Crisis Intervention (NVCI) that implements this policy. It includes measures and procedures to protect workers from workplace violence, a means of summoning immediate assistance and a process for workers to report incidents, or raise concerns. This program is designed to address violence from all possible sources (clients, employers, supervisors, employees, strangers, and domestic/intimate partners).

Carlington, as the employer, will ensure this policy and the supporting program are implemented and maintained and that all workers and supervisors have the appropriate information and instruction to protect them from violence in the workplace.

Supervisors will adhere to this policy and the supporting program. Supervisors are responsible for ensuring that measures and procedures are followed by workers and that workers have the information they need to protect themselves.

Two new NVCI staff trainers have finished their course and are set to deliver this training to new staff and a review to previously trained employees in the upcoming 2018-19 fiscal year.

Every worker must work in compliance with this policy and the supporting program. All workers are encouraged to raise any concerns about workplace violence and to report any violent incidents or threats.

Management pledges to investigate and deal with all incidents and complaints of workplace violence in a fair and timely manner, respecting the privacy of all concerned as much as possible.

### Contact Information

Carlington Community Health Centre  
900 Merivale Road  
Ottawa, ON K1Z 5Z8  
Tel: 613-722-4000 | Fax: 613-761-1805  
Email: [info@carlington.ochc.org](mailto:info@carlington.ochc.org)

### Sign-off

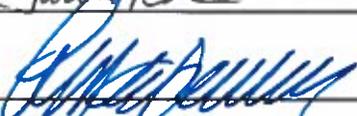
It is recommended that the following individuals review and sign-off on your organization's Quality Improvement Plan (where applicable):

I have reviewed and approved our organization's Quality Improvement Plan

Laurie Rektor, Board Chair

 \_\_\_\_\_ (signature)

Linda Savoie, Quality Committee Chair

 \_\_\_\_\_ (signature)

Cameron MacLeod, Executive Director

 \_\_\_\_\_ (signature)