


[HOME](#)
[OUR QIPS](#)
[RESOURCES](#)
[SECTOR QIPS](#)
[QUERY QIPS](#)
[Our QIPS](#)
[Narrative](#)
[PROGRESS REPORT](#)
[NARRATIVE](#)
[WORKPLAN](#)

NARRATIVE

South Georgian Bay Community Health Centres

2016/17 Quality Improvement Plan for Ontario Primary Care

Status:

SUBMITTED

Goto section

Overview

Overview ?

The South Georgian Bay Community Health Centre (SGBCHC) is a non-profit community health organization providing primary health care, diabetes management/education, health promotion/community development and related services to the residents of the South Georgian Bay region. Established in 2010, the SGBCHC offers a wide range of primary care and health promotion services focusing on the health needs of the residents of the community.

The SGBCHC is governed by a Board of Directors representing a cross section of the community. The Board consists of 12 members who have demonstrated the value of effective local governance and local representation. A regular reporting protocol is in place for the Board of Directors related to financial, service performance and levels of service data. A community engagement process in 2012 concluded with the board approving the three year strategic plan for the 2012 to 2016 period and a strategic planning process for the next three years is currently underway. The SGBCHC currently has five key strategic directions which staff, management and the board continue to focus on achieving. The strategic directions are:

- Continue to Build a Supportive Organization
- Improve Access to Care
- Become Strongly Engaged in Our Community
- Expand Our Access
- Make Quality Outcomes a Priority

Funding for programs and services is provided by the North Simcoe Muskoka Local Health Integration Network (LHIN). For the past five

years, the Ministry of Health and Long Term Care (MOHLTC) has also provided funding to lead the regions Diabetes Self Management Program. The SGBCHC is currently involved in a capital project through the support of the MOHLTC with the hopes of opening the doors to new space in 2019.

This following report is a narrative summary of the Centre's Quality Improvement Plan (QIP) for the 2015/16 fiscal year. The SGBCHC has focused on a number of performance indicators as outlined by Health Quality Ontario. The plan to implement and measure these associated indicators is outlined in the attached work plan. This year's QIP is designed to be a continuation of the work that was started in 2015 surrounding; timely access to primary care when needed, ensuring all clients receive follow up within 7 days of hospital discharge, and providing the highest quality of care as measured by the client satisfaction survey.

QI Achievements From the Past Year

As mentioned in the 2015/16 QIP, in 2014 the SGBCHC began using a new Electronic Medical Record system agreement which aligned in partnership with the local Georgian Bay Family Health Team and The Family Health Organization. This new agreement allowed the SGBCHC to improve continuity of care and improve access to health information within the local primary health care system of South Georgian Bay. The EMR (Practice Solutions) is used by all of the health organizations in the area, which means when clients are seen in the hospital, the after hours clinic or the walk in clinic, the health care providers have access to the primary care chart created at the CHC, promoting consistency and quality of care. The result of this change has proven to be very positive for staff, clients and partnering primary care providers. During the 2015-2016 fiscal, priority was placed on fostering relationships with the local hospital and family health team. Through these relationships, focus was then placed on developing systems to gain timely access to both emergency department reports as well as admission and discharge reports. Implementing these systems and collecting baseline data in order to report as per the outlined health quality indicators, remains a priority for the upcoming year.

The quality improvement plan for 2015/16 set forth a priority to provide the highest quality of primary care as measured by the client satisfaction survey. In early 2015/16, the CHC began implementing client satisfaction surveys by way of Ipads centrally located and easy to access within the CHC. However, due to both technical difficulties with the Ipads, and a period of great internal transition as noted in the 2015/16 narrative report, the surveys were not offered as often as planned. In 2015/16, focus was placed on correcting the technical difficulties with the equipment. Once those issues were resolved, the actual survey itself was looked at. Staff altered the survey so that the questions asked were reflective of the questions indicated by Health Quality Ontario and/or the Association of Ontario Health Centres. Education was also done with staff regarding the importance of promoting the client satisfaction survey. Once again in February of 2016, the CHC began offering and promoting the client satisfaction survey. Signs have also been placed around the CHC, including inside every clinical exam room, advertising the availability of the survey. During 2016/17, the shift now focuses to collecting

baseline data for the specific questions in order to gauge how the CHC is doing and set targets going forward, in terms of the related health quality indicators.

One of the greatest quality improvement achievements of the past year, was to improve uptake of preventative health screening including; breast cancer, cervical cancer and colorectal cancer screening rates for registered clients of the CHC. After the transition to practice solutions from NOD, it was determined that the ability to track cancer screening rates was unknown. In order to improve in this area, staff resources were allocated to identify, contact and follow up with all clients that were due to have cancer screening testing. This staff member was first able to do chart reviews of each registered client to determine the current status of health screening. Then, appropriate searches were developed within the software in order to identify and track this data going forward. The RN assigned to this task also obtained specialized training and was able to perform PAP smears and preventative health care screening clinics in consultation with the client's primary health care provider. This proved to be a very successful strategy as cancer screening rates are significantly above the provincial norm. Focus for 2016/17, will shift to maintaining these screening rates.

Integration & Continuity of Care

As mentioned earlier, the SGBCHC has put great focus this fiscal on working towards improving partnerships with local community partners including the Family Health Team and the local hospital. Through improved relationships, communication and the automated flow of information between the primary health care providers of the SGBCHC and the local hospital (Collingwood General and Marine Hospital) has also improved. The partnering EMR integration model noted above reflects and supports local integration and acts as a means to improve the continuity of care.

These partnerships are fostered within the work and collaboration of the South Georgian Bay Health Link. This fiscal, the SGBCHC has worked to become an engaged partner with the local Health Link as prior to this year, we were lacking in this area. The South Georgian Bay region was identified as an early adopter of the health link model and has been a leader across the province due to the forward thinking and innovation. SGBCHC is proud to partner with such a unique and integrated model such as the Health Link.

The SGBCHC has an internal partnership with the North Simcoe Muskoka Community Care Access Centre to provide back door services of IT, HR and finance. This integration model has allowed the SGBCHC to have expertise supporting the backbone to the operations of the CHC at a reasonable cost. Many local partners utilize this integrated service which has proven to be a positive quality indicator for the SGBCHC.

Engagement of Leadership, Clinicians and Staff

Senior leadership of SGBCHC is working hard to ensure all team members from management, clinicians and administrative staff, feel supported, engaged and involved. It is a priority to involve staff as much as they want to be, in both the day to day functioning of the CHC as well as the guiding principles and indicators which define the way the CHC operates.

Every morning, all staff meet for daily morning huddles to share workload for the day and provide updates on services and programs. Clinical meetings are also held monthly to review third next available appointments and discuss plans and strategies to help improve access to care.

There are various committees within the CHC. Each quarter, the quality committee reviews the status of the quality indicators as well as client safety and health and safety. Although the Quality Improvement Plan is the key area focused on, strategies and evaluation of the measures are also reviewed and reported. This information is flowed monthly to the entire board of directors through the Executive Director in the monthly Executive Director's report and through committee levels if appropriate.

Because of staff turnover last fiscal, the SGBCHC has recently sent three staff members and one management rep for training to become certified in workplace health and safety. Training is now complete and The Joint Health and Safety Committee also meets monthly.

In 2015/16, the staff of SGBCHC, collectively worked together to improve staff morale and foster feelings of safety, support and inclusion among each other. In April of 2015, CHC staff arranged for a native healer to perform a smudging of the centre. This brought forth a reinvigorated staff who were ready to start fresh. A staff Wellness Committee was formed and has been very successful in organizing many initiatives which have been well received among the staff.

Patient/Resident/Client Engagement ?

Information about the programs and services is available to all current and prospective SGBCHC clients electronically and in printed form. Primary health care clients are given an extensive "information package" in advance of deciding whether to become a client of the centre or not. This initiative was new in 2014 and refinements took place in 2015/16. The information includes: health promotion program details, provider details, rights and responsibilities, SGBCHC program details and schedules, and complementary services provided by allied health professionals, etc.

Similar information protocols are available for clients in all programs. Every effort is made by the organization's health providers to fully engage clients in an informed and consenting manner. The model of care of the CHC focuses not only on the presenting medical condition, but also on the broader social determinants of health.

All clients now have the opportunity to complete a client feedback survey. The questions focus on such dimensions as: how easy it was to obtain information, ease of registration, interaction with providers, opportunity to offer input into decisions, provision of information about other services, etc. The results from the client questionnaires are compiled and reviewed as a continuous quality improvement initiative. Continuing improvements and refinements to this survey process are anticipated in 2016/17. Similarly, any client concern can

be raised at any point and dealt with in accordance with the existing protocol.

Allied health staff of the CHC are also working diligently to offer a variety of groups, programs and services to the community of Wasaga Beach and surrounding area. In 2015/16, the CHC realigned with the Community Health Centre model of care to include a focus in community engagement. Just a few of the community wide initiatives include Fitness for Health, Building Balance, Nordic Pole Walking, the Community Garden, and Mindfulness Meditation. The SGBCHC also has a very successful youth outreach program in the local elementary and secondary schools. This program offers both one on one health services and health promotion groups such as a "Girl Talk" group and a boys running group. Staff are also partnering with many local groups including the Good Food Box, the local food bank, the Community Action Program for Children and many more.

Other

HQO

ABOUT US
CONTACT US
SITE DIRECTORY
ANNUAL REPORTS
CAREERS
ACCESSIBILITY
POLICY

Public

LONG-TERM CARE PUBLIC
REPORTING
HOME CARE PUBLIC
REPORTING
PATIENT SAFETY PUBLIC
REPORTING
LEGISLATED MANDATE
FAQS

Professionals

QUALITY MONITOR REPORT
ADVANCED ACCESS, EFFICIENCY
AND CHRONIC DISEASE MANAGEMENT
IN PRIMARY CARE
RESIDENTS FIRST
EVIDENCE-BASED ANALYSES
AND RECOMMENDATIONS

Other Links

MINISTRY OF HEALTH AND LONG-
TERM CARE
ONTARIO HOSPITAL ASSOCIATION
INSTITUTE FOR CLINICAL
EVALUATIVE SCIENCES
CANADIAN INSTITUTE FOR HEALTH
INFORMATION

