



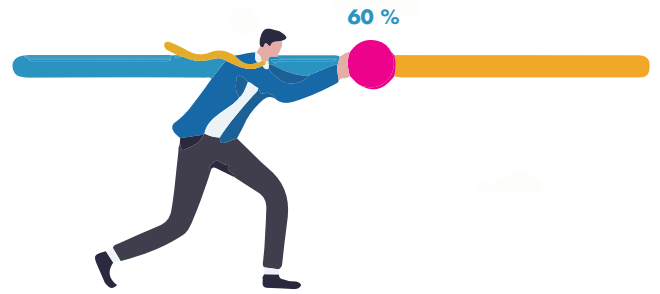
FAMILY PRACTICE HEALTH CENTRE 2023/24 QUALITY IMPROVEMENT PLAN

WHAT IS A QUALITY IMPROVEMENT PLAN?

A DOCUMENTED SET OF QUALITY COMMITMENTS WE MAKE TO PATIENTS, STAFF AND THE COMMUNITY



AN OPPORTUNITY FOR ACCOUNTABILITY TO OURSELVES AND ONTARIO HEALTH



A PROGRESS REPORT WE CAN USE TO REFLECT ON OUR GROWTH



A BENCHMARK FOR CONTINUAL IMPROVEMENT



HOW WE MEASURE

Performance assessments provide us with the opportunity to pinpoint and analyze areas of improvement, to serve you better. The WCH Family Practice Health Centre's QIP performance remains in range of targets set out by Ontario Health.

QIP Category: Timely and Efficient Transitions

Can our patients access urgent care on the same or next day?

Current Performance= 60%
* **Benchmark= 55%**
• **Target= 65%**

What is being done to help improve rates?
• Allocating appointment slots for daytime same day urgent care
• Adding additional clinic hours to the Afterhours Urgent Care Clinic



QIP Category: Service Excellence

Do our patients feel involved in decisions about their care?

Current Performance= 87%
* **Benchmark= 83%**
• **Target= 90%**

What is being done to help improve rates?
• Routinely reviewing Patient Experience Survey data to understand how to best improve this indicator

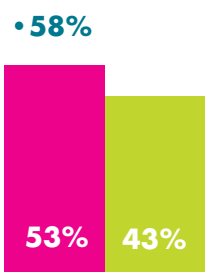


QIP Category: Safe and Effective Care

Are we monitoring diabetic patients who are over 40 years old effectively?

Current Performance= 53%
* **Benchmark= 43%**
• **Target= 58%**

What is being done to help improve rates?
• Create a diabetes working group that will commit to improving diabetes care
• Implementing a diabetes management flow sheet which will easily track HbA1C completion

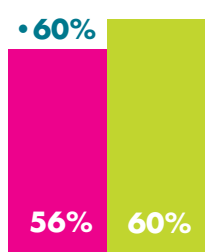


QIP CATEGORY: Timely And Efficient Transitions

How would you rate your overall experience when booking an appointment over the phone?

Current Performance: 56%
* **Benchmark= 60%**
• **Target = 60%**

What is being done to help improve rates?
• Piloting online appointment booking
• Implementing self-check-in kiosks to help build secretary capacity



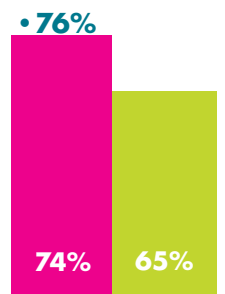
QIP Category: Safe and Effective Care

Are we effectively screening our patients for:

Colorectal cancer?

Current Performance= 74%
* **Benchmark= 65%**
• **Target = 76%**

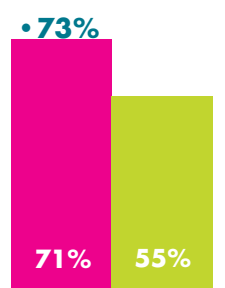
What is being done to help improve rates?
• We are above benchmark and will continue with current process to maintain performance



Breast Cancer?

Current Performance= 71%
* **Benchmark= 55%**
• **Target = 73%**

What is being done to help improve rates?
• We are above benchmark and will continue with the current process to maintain performance



Cervical Cancer?

Current Performance= 60%
* **Benchmark= 54%**
• **Target = 65%**

What is being done to help improve rates?
• Running dedicated pap clinics with targeted outreach to those that are eligible with online booking options
• Quality Improvement Project being implemented to attach marginalized population to a pap appointment in pursuit of health equity



*Benchmarks are calculated using the University of Toronto's Department of Family & Community Medicine (DFCM) averages (based on 14 academic teaching sites), or the Toronto Central Local Health Integration Network average.

VISIT OUR WEBSITE:
womenscollegehospital.ca/fphc



Interested in hearing more about or joining our Patient and Family Advisory Committee?
Email patientexperience@wchospital.ca