

Theme II: Service Excellence

Measure Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percent of patients who stated that when they see the doctor or nurse practitioner, they or someone else in the office (always/often) involve them as much as they want to be in decisions about their care and treatment	P	% / PC organization population (surveyed sample)	In-house survey / April 2022 - March 2023	88.09	90.00	Our performance on this indicator has averaged at 90% for the last few fiscal years. We hope to continue performing highly on patient centered care and will continue to survey our patients to attain a sample size with a 95% confidence level and 5% margin of error.	

Change Ideas

Change Idea #1 Complete 367 surveys in the fiscal year (ensuring a 95% confidence interval, 5% margin of error based of our roster size in January 2023).

Methods	Process measures	Target for process measure	Comments
<p>Survey completion targets: Administer 13 surveys per physician per quarter. Continue to use the EMR to send patient experience surveys to patients who are over 18 years of age that have had an appointment in the last 4 weeks. Modes of communication: Our survey will be posted on our website, social media, and sent out through blast emails in PSS. We will also have paper surveys and the survey available on a tablet on site for those that cannot access the survey via email. Survey results will be communicated at team meetings, QI committee meetings, and to patients on our website. We will also optimize the use of Oceans MD for our allied health staff to communicate with patients send e-forms.</p>	<p>Number of surveys completed for each quarter of FY 2023-24 Number of total surveys completed for the OakMed Family Health Team (OFHT)</p>	<p>367 patient experience surveys completed across the OFHT in the 20223-24 fiscal year.</p>	<p>Total Surveys Initiated: 287</p>

Change Idea #2 Enforce policy and process for collecting virtual consent across all sites. Focus on collecting patient email addresses to disseminate survey electronically

Methods	Process measures	Target for process measure	Comments
<p>- Review process for documenting email consent in the EMR at 2 staff meetings in the new fiscal year, one at the beginning of the fiscal year and one at the end of Q3. - Run a search at the start of the year to identify patients that do not have an email consent on file, work with physician assistant's to get documented consent in place.</p>	<p>Number of patient charts with documented email consent in the EMR Number of emails on file</p>	<p>80% of all patient charts with an email on file will have consent documented within the chart by the end of the 2023-24 fiscal year.</p>	<p>In our organization 80% of patient charts have an email on file. We will continue working on increasing this number, however, not all patients have access to email nor do all our patients want to be contacted via email.</p>

Theme III: Safe and Effective Care

Measure Dimension: Safe

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of non-palliative patients newly dispensed an opioid prescribed by any provider in the health care system.	P	% / Patients	CAPE, CIHI, OHIP, RPDB, NMS / 6 month period ending Mar 31, 2022	3.00	2.90	The last Primary Care Practice Report we received for March 2022 indicated that our performance on this indicator was at 3.0%. 10% of those opioids were prescribed by the patients physician within the FHT and 89.2% were prescribed by other providers. Our goal is to reduce this by a relative target of 3.33% in the next fiscal year.	

Change Ideas

Change Idea #1 Assist our providers with signing up and using primary care tools such as the "My Practice" primary care practice report, OntarioMD's DHDR, and utilizing the i4C dashboard to identify high risk opioid usage patients.

Methods	Process measures	Target for process measure	Comments
We will present our providers with information on how to sign up for their primary care practice reports. We will work with our providers to utilize. We will also actively work with individual staff members to utilize the i4C dashboard to view information related to opioid usage. Specifically to conduct medication reconciliations, ensure opioid contracts are in place and monitor the total MMEq/day for patients. Once DHDR has been installed in our EMR we will provide orientation and training sessions on how to access and use that information to view a patients external medications.	1) Percentage of providers who are interested in signing up for the "Primary Care - My Practice Report" that have completed the sign-up process and obtained the access to this report 2) Percentage of OFHT staff that are accessing the dashboard and utilizing it to view population level information 3) Percentage of providers who have received an orientation for using DHDR.	1) 100% of providers to sign up for their Primary Care Practice Report 2) 100% of all FHT staff will know how to access and utilize the information in the i4C dashboard. 3) 100% of providers will receive training on utilizing DHDR.	

Change Idea #2 We will continue to support our providers in using the Opioids toolbar in PS. We will work on providing our staff with a training session on the features available in the toolbar

Methods	Process measures	Target for process measure	Comments
Assist our primary care providers with any support they will need to start using the opioid toolbar	Percentage of support/training requests by primary care providers that are fulfilled	100% of providers looking to utilize EMR resources to document opioid usage will receive training and resource support from the QIDSS	

Change Idea #3 Work with our pharmacist to conduct medication reviews for patients on Opioids

Methods	Process measures	Target for process measure	Comments
We will work with our pharmacist to create a list of patients that require medication reviews. We will utilize the i4C dashboard to identify high risk patients and prioritize medication reconciliation reviews for those patients	Number of patients on an Opioid that have received a medication reconciliation in the fiscal year	50% of patients on an opioid will have a medication reconciliation conducted with our pharmacist.	