# North Bay Nurse Practitioner-Led Clinic Quality Improvement Committee Annual Report June 21, 2016

To promote optimal health for those living with chronic disease and for families with young children, through the provision of primary health care services

Collaboration Integrity Respect Innovation Holistic Participation

Membership: Jennie Humbert, Chair, Marc Demers, Patricia Anglehart, Jim Liddell (beginning February 2016)

Staff Support: Leeann Whitney

The NBNPLC will complete five years of service on August 22, 2016, and currently serves approximately 2300 patients. 25% are aged 0-19, 43% are aged 20-44, 16% are aged 45 to 65, 15% are aged 65 to 84 and 1% are over 85 years of age.

The NPLC continues to engage with patients, staff, community partners and the wider community in order to seek input for improved patient access, integration and care and to problem-solve system integration issues.

The NBNPLC was awarded the Registered Nurses Association of Ontario (RNAO) Best Practice Spotlight Organization (BPSO®) designation after over three years of commitment of staff.



The seven clinical and one organizational Best Practice Guidelines (BPGs) are being implemented and evaluated. Quality patient outcomes are measured monthly to demonstrate achievement of the BPG in enhancing patient care.

Clinical

- 1. Integrating Smoking Cessation in Daily Practice
- 2. Strategies to Support Self-Management in Chronic Conditions: Collaboration with Clients
- 3. Assessment and Management of Pain
- 4. Interventions for Postpartum Depression
- 5. Women Abuse: Screening, Identification and Initial Response

- 6. Breastfeeding
- 7. Management of Hypertension

## Organization

8. Collaborative practice Among Teams

Two staff members participated in Improving & Driving Excellence Across Sectors (IDEAS).



Improving & Driving Excellence Across Sectors This is a province-wide learning initiative to advance Ontario's health system priorities by building capacity in quality improvement, leadership and change management across all health care sectors. NBNPLC staff learned, applied and shared quality improvement knowledge and tools. The RNAO Assessment and Management of Pain BPG was implemented and evaluated. The findings will be shared inter-professionally at different venues over the coming year.

## **Quality Improvement Plan**

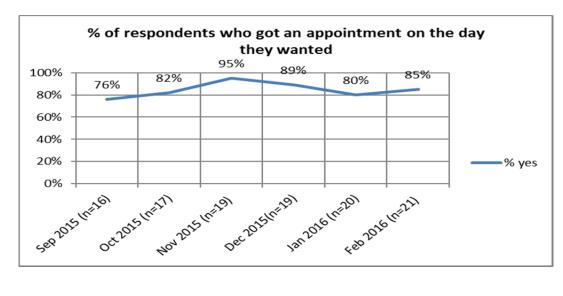
The North Bay NPLC continues to be aligned with the Ontario Ministry of Health's four pillars of quality care in primary health care settings: Access, Integrated, Patient Centred, and Population Health.

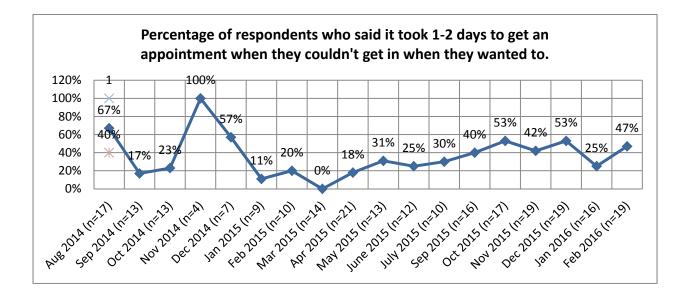
#### Access

Advanced Access scheduling continues to be used to assist in providing timely appointments for clients with urgent need, same day or 24 hours, with their primary health care provider. A target of 80% was set and an average of 64.56% was reached.

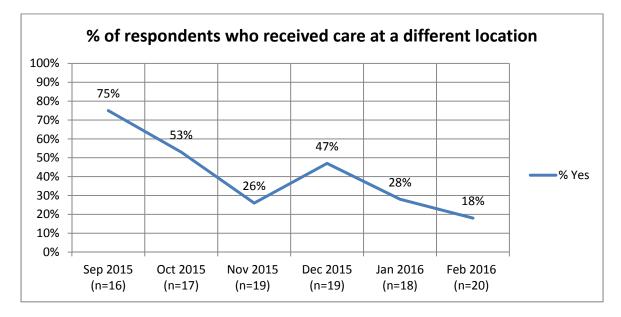
The vast majority of patients received an appointment time on the day they requested. However, approximately half of respondents had to wait more than 1 or 2 days for their appointment.

NP recruitment and retention continued to be challenges therefore straining the capacity to meet the access targets. The clinic is at full staff presently, therefore targets will be more achievable.





Patients are informed of the availability of a same day appointment when they have an urgent need. Appointments are available two evening a weeks. Fewer patients are seeking care elsewhere and receiving service at the NBNPLC.



Most services are offered in French and English. Technology (text messaging) is used for booking appointments in order to improve access for specific patients. Home visiting services to home bound patients is provided, including laboratory services, nursing, social work, dietitian and Nurse Practitioner visits.

# **Integrated**

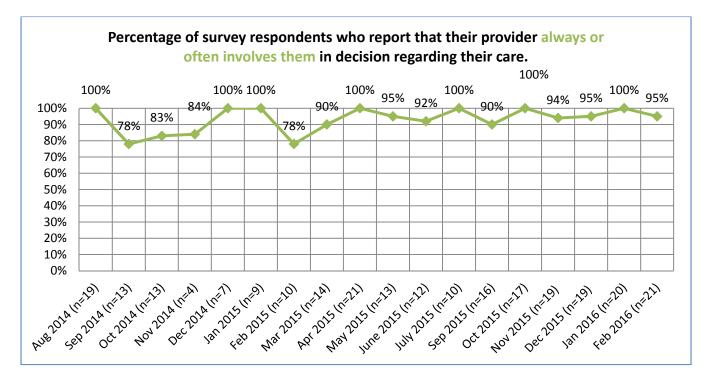
While a target of 80% was set for patients to see their primary care provider within 7 days after discharge from hospital, 87% was reached. Given the challenges receiving reports from North Bay Regional Health Centre (NBRHC), a workaround was implemented for following up patients discharged from hospital within 7 days. This health system issue is also being addressed with Nipissing East Parry Sound Health Links and NBRHC.

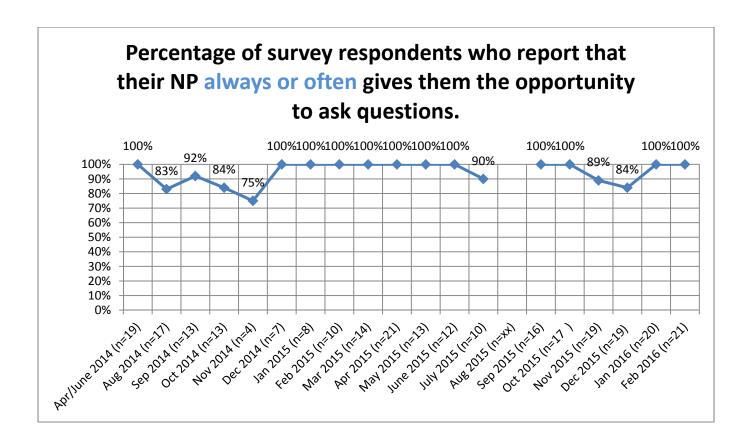
A NECCAC Care Coordinator has started to attend Clinical meetings, in order to communicate within the team any relevant information for continuity of patient care.

## **Patient-Centred**

Patient surveys consistently indicate a high degree of satisfaction with the care received at the NBNPLC. Patients appreciate how much time is spent engaging with them, educating and developing with patients their plan of care.

Overall results of the patient survey indicate a high satisfaction with the care received at the NBNPLC. Two indicators (see graph below) which measure; patient opportunity to ask questions and patient participation in decisions regarding their care, patients responded with a 96.6% satisfaction rate.





# **Population Health**

Population health initiatives for primary prevention, such as influenza vaccinations for elders over 65, breast, cervical and colorectal cancer screening are integrated into patient care. Processes for consistent documentation in the EHR have been added so data can be extracted to provide accurate achievement of targets.

All targets have been exceeded.

Breast cancer screening; Target 70%. Achieved 75.7 % Cervical Cancer Screening; Target 50%. Achieved 67% Colorectal Cancer Screening; Target 50% Achieved 61.2%

The percent of patient/client population over age 65 that received influenza immunizations is at 12%. Since patients can access this vaccine at a pharmacy or public health clinic, there is difficulty tracking who has received the vaccine.

Group sessions have also been a success at the clinic, where a 6 week session on Healthy Weights was held with 27 attendees, Self Management of Chronic Conditions 6 week session had 45 attendees, and Mothercare had over 50 attendees at the Early Years Centre.

## **Quality Monitoring**

Quality of care continues to be monitored using a Balanced Score Card (BSC), BPSO Reports, Activity Reporting to the MOHLTC and the Risk Response Map. The NBNPLC strategic plan identifies key measures which will be included in the BSC. These are some excellent tools to provide the board with outcomes of quality indicators.

#### Quality Reporting

Quality indicator outcomes; Balanced Score Card (BSC), and MOHLTC Activity Reporting are reported to the board on a quarterly basis as part of the consent agenda. The BPSO Report is presented annually.

The QIP Committee of the board meets bi-annually and provides an annual report at the AGM. The committee meets on an ad hoc basis should an issue arise which the committee needs to address.

Respectful Submitted,

Jennie Humbert, Chair NBNPLC Quality Committee

June 21, 2016