

# The Quality Management Partnership: Collaborating for Continuous Quality Improvement

**Assessor Meeting, Allstream Centre**

**Sunday April 10, 2016      2:50pm-3:55pm**

**Robin Reece**

**Manager, Quality Management Partnership**



# FACULTY/PRESENTER DISCLOSURE

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- Faculty/Presenter: Robin Reece, Manager Quality Management Partnership



# DISCLOSURE OF COMMERCIAL SUPPORT

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- This program has received financial support from Cancer Care Ontario in the form of yearly funding for the Quality Management Partnership
- Potential for conflict(s) of interest: N/A



# MITIGATING POTENTIAL BIAS

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- No potential bias has been identified



# CPD OBJECTIVES

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After active engagement in this session, participants will be able to:

- Describe how Quality Management Programs will be implemented, using the colonoscopy model as an example. The overview will include:
  - priority standards that will be implemented through the Partnership for 2016-2017;
  - the clinical leadership model, including leadership roles at the provincial, regional and facility level
  - the use of quality reports and the role of constructive peer feedback
  - Compare currently available QIRs in the field and identify the need for additional QIRs
- List colonoscopy QIRs that have been developed by the Partnership to date and provide feedback on how to best make them available for provider and facility use



# AGENDA

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1. Overview and background
2. Clinical leadership structure
3. Quality Management Program reporting
4. Facility standards
5. Quality improvement resources
6. Training and support
7. Discussion

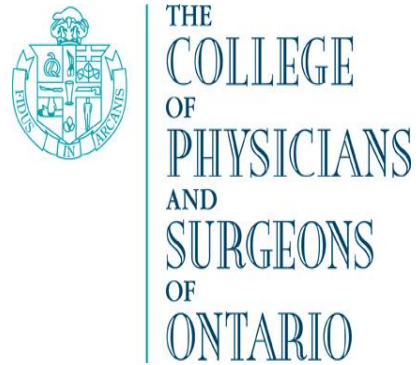


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# 1. Quality Management Partnership Overview

# THE QUALITY MANAGEMENT PARTNERSHIP

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# WHAT DO WE WANT TO ACHIEVE?

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## *For patients:*

- Consistent high quality care no matter where it's accessed
- Confidence that processes are in place to measure and ensure quality
- Transparency in the quality of care provided across Ontario



# WHAT DO WE WANT TO ACHIEVE?

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## *For physicians:*

- An opportunity to look into their own performance, the ability to compare measures to expected targets and peers
- Access to clinical leads who will provide guidance, support for quality improvement opportunities
- Continuing professional development (CPD) credits for participating in quality improvement opportunities



# WHAT DO WE WANT TO ACHIEVE?

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## *For facilities:*

- Identification of opportunities to improve quality at a local level
- Access to tools and supports, including guidelines and the sharing of best practices across facilities
- Identification of issues that require system-level solutions



# WHAT IS A QUALITY MANAGEMENT PROGRAM?

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## 2. Clinical Leadership Structure



# PARTNERSHIP CLINICAL LEADERSHIP



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# 3. Quality Management Reporting

# OVERVIEW OF UPCOMING QUALITY REPORTING

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- In 2016, the Partnership will issue reports at the facility, regional, and provincial level
- In 2017, the Partnership will begin issuing provider reports for colonoscopy and mammography
  - **Note: QMP provider reports are currently not in scope for pathology**





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# 4. Facility Standards

# PROVINCIAL FACILITY STANDARDS FOR COLONOSCOPY

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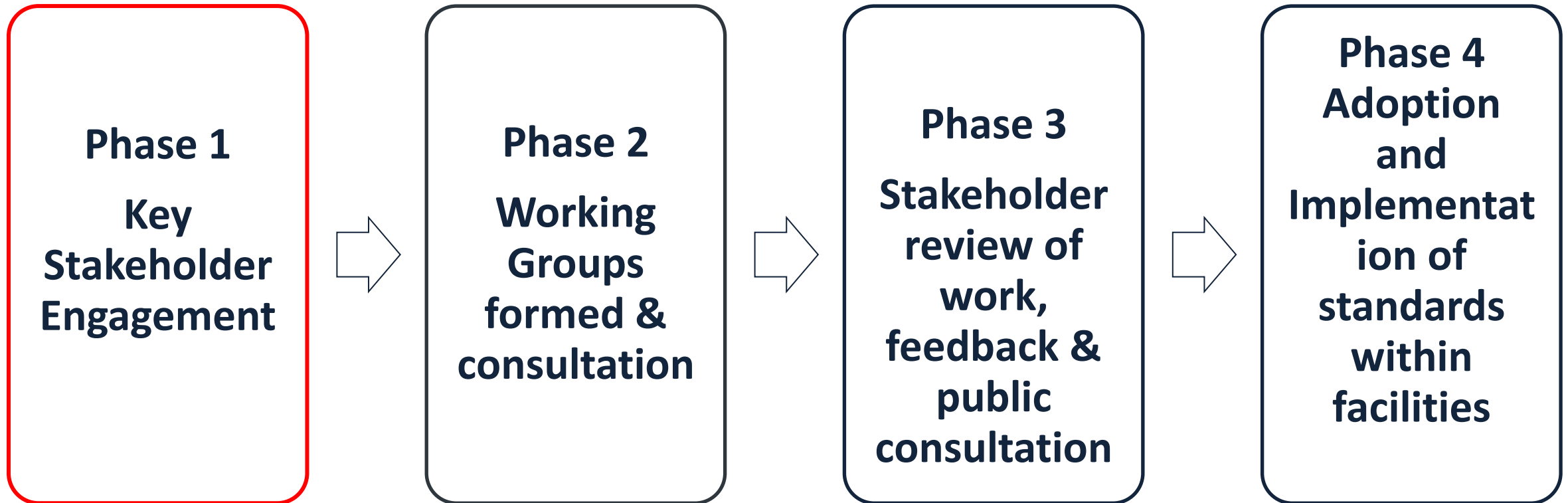
## Sample of prioritized standards:

- Facilities must inform referring physicians of the results of all procedures and any associated pathology, including any findings and follow-up recommendations
- All facilities must use the global rating scale (GRS) as a quality assurance/quality improvement tool
- All facilities must adopt electronic and standardized reporting



# ENGAGEMENT STRATEGY FOR ADOPTION OF PROVINCIAL STANDARDS

## Prioritized provincial standards



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# 5. Quality Improvement Resources

# QUALITY IMPROVEMENT RESOURCES (1)

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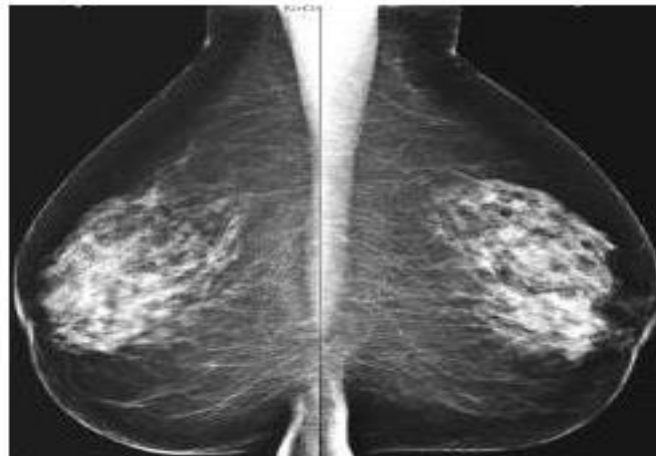
- Four quality improvement resources (QIRs) were developed through the Partnership's early quality initiatives (EQIs) for colonoscopy, namely:
  - Bowel preparation selection best practice guidelines
  - Standardized endoscopy reporting guidelines
  - Standardized patient discharge guidelines for endoscopy clinics
  - Pre and post procedure guidelines and checklists for endoscopy clinics
- Developed through an evidence based process guided by a clinical working group (CWG)



# QUALITY IMPROVEMENT RESOURCES (2)

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- **Build (or obtain) an image library to improve interpretive skills**
  - Cases chosen for learning potential, anonymized
  - Participation could qualify for CPD credits – RCPSC
  - Image library particularly important for IHF radiologists



# QUALITY MANAGEMENT PROGRAMS IN SUMMARY

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# 6. Looking Forward – Training and Support



# CONSTRUCTIVE PEER FEEDBACK TRAINING

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## Purpose:

- To provide training to clinical leads to enhance their coaching skills while establishing trust and credibility when discussing provider performance

## Progress:

- Environmental scan to identify training approach
- Design and development of training
- Training delivery and evaluation
- May be contacted to participate in training



# TRAINING NEEDS ASSESSMENT

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## Aim is to determine:

- What are the competencies required to perform the clinical lead role well?
- What type of training do clinical leads require in order to feel prepared for their role?

## Progress:

- Application for REB approval pending
- May be contacted to participate



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# 7. Discussion



# QUALITY REPORTS DISCUSSION

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- During an assessment, how might you use the information included in these sample reports?
- Would you feel confident in speaking about the kind of information in these reports with your peers?



# QIRs DISCUSSION: YASSER ISMAIL, EVALUATION SPECIALIST

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## As Assessors:

- How would you use these quality resources?

## As a Clinician:

- What would be on your wish list of tools/resources to support quality improvement?



# FACILITY STANDARDS DISCUSSION: RADHA POORAN, STAKEHOLDER RELATIONS LEAD

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- What orientation to QMP facility standards would you need in preparation for an assessment or inspection?



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# THANK YOU & QUESTIONS?

Visit [www.qmpontario.ca](http://www.qmpontario.ca) for more  
information.

