



Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

August 16, 2022

SUMMERVILLE

Family Health Team

OVERVIEW

Summerville Family Health Team (SFHT) serves more than 50,000 people in East Mississauga and South West Etobicoke. SFHT has 5 locations, 37 physicians and approximately 40 FHT staff, including RNs, NPs, dietitians, social workers, pharmacists, health promotion specialists and a physiotherapist. We also have a Family Medicine Teaching Unit, affiliated with the Department of Family and Community Medicine at the University of Toronto and Trillium Health Partners.

We are currently in the third year of our 2019/22 strategic plan and are in the process of developing a new Strategic Plan for 2023 to 2025. One of our strategic priorities is to “Demonstrate excellence in learning and innovation”, including increasing involvement of team members in quality improvement initiatives.

Our Quality Improvement Plan for the 2022-23 fiscal year will continue to focus on the following priority themes:

- 1) Timely and efficient transfers: preventative care, 7-day post hospital discharge and access to SFHT services
- 2) Service excellence: patient involvement in care decisions
- 3) Safe and effective care: opioid management and medication reconciliation

Preventative Care is a new area of focus, which aligns well with our patient needs. Data from the most recent MyPractice Report indicates that although Summerville was better than the provincial average on the three indicators, our rates have dropped since pre-pandemic (as reported in March 2020).

REFLECTIONS SINCE YOUR LAST QIP SUBMISSION

Over the past two years, we have seen less involvement in some QI initiatives across Summerville, due to effects of the pandemic. Being located in one of the hardest hit communities in the country (Peel Region), Summerville was actively involved with several COVID-19 initiatives, which meant that many staff (RNs, NPs, admin) were assigned to various community initiatives, including vaccine clinics, the COVID, Cold and Flu Care Clinic, and the COVID@home program. Like many other health care organizations, we have also been facing challenges in recruitment and absences due to COVID. We are starting to see some recovery in this area, and have recently struck a new working group related to preventative care, which has active physician and IHP engagement.

We continued to have impact in some of the core areas we were focussing on: notification within 48 hours of hospital discharge remained high, while 7 –day follow-up did trend downwards, likely due to decrease in access to our physicians and staff. We combined the hospital discharge group with the medication reconciliation working group in order to put a priority on this population, and as a result, we surpassed our target for medication reconciliations. We also increased our response rate to our online patient survey, which was particularly difficult this year, as we recognized that many people were experiencing survey and email fatigue. Due to the pandemic, we have been using email communication quite regularly with our patients. We were involved in the DCFM’s provincial COVID-19 survey as well.

PATIENT/CLIENT/RESIDENT PARTNERING AND

RELATIONS

As a core partner in the Mississauga Health Team, Summerville Family Health Team has been involved in several community initiatives, the most significant one being the Mississauga, COVID, Cold and Flu Care Clinic. Summerville manages the clinic and provides staffing on a daily basis. In the past year, we have participated in two patient surveys, as well as a provider survey. Results were excellent, with 93% of patients indicating that they would recommend the clinic to others. Through the M-OHT, we work closely with the other primary care providers in our community (Credit Valley FHT, CarePoint Health, and Primary Care Network) as well as Trillium Health Partners and various community services. The primary care team meets regularly and have spearheaded many of the COVID response initiatives. We also worked closely with the Region of Peel on the vaccine rollout strategy, administering COVID-19 vaccines to more than 5000 people (Summerville patients as well as others from the community). We have partnered with several other organizations in the planning and delivery of our patient programs. For example, the CHANGE program, a partnership with Metabolic Syndrome Canada, has demonstrated positive results in reducing cardiovascular risk, increasing physical activity and reducing sedentary time. Our monthly webinar series, which started at the beginning of the pandemic, continues to attract 50-100 participants at each session. Over the past year, we have focused on our older patient population and partnered with Peel Senior Link to promote the series to the broader community. Every session is evaluated using an online participant questionnaire and it is also used to gather

patient input on future topics.

As noted above, we increased participation in our online survey to almost 3000 responses, and also used it as an opportunity to invite patients to be directly involved in our patient focus group which provided input to our new Strategic Plan.

The Chair of our QIC is the lead physician for the residents' QI program, and facilitates linkages between their activities and the rest of Summerville. In the past year, one group worked on a program related to increasing access by focusing on promotion of our afterhours clinics.

PROVIDER EXPERIENCE

Over the past year, we have continued to increase our capacity for in-person vs virtual visits. Our IHPs are now providing 60% in-person appointments and this will continue to increase. Both providers and patients have become more used to virtual care, as well as the use of secure messaging. However, our recent surveys indicate that people are having issues with access and some preventative care has been delayed. These two areas will be part of our focus for 2022/23.

During the pandemic, healthcare workers have experienced added pressure particularly because many were contributing to community initiatives, focusing on our own patient population, new work processes, and work-home conflicts/imbalance. The results of the staff survey in the fall of 2020, showed that people felt the organization was handling the pandemic well, we provided support for staff to move to virtual platforms, accommodated personal and family needs, developed new safety policies, and ensured all protocols were followed.

SIGN-OFF

It is recommended that the following individuals review and sign-off on your organization's Quality Improvement Plan (where applicable):

I have reviewed and approved our organization's Quality Improvement Plan on **June 29, 2022**

Dr. Christopher Gilchrist, Board Chair

Fran Cousins, Quality Committee Chair or delegate

Andrea Stevens, Executive Director/Administrative Lead

Other leadership as appropriate
