

# Quality Improvement Plan Scorecard 2022-2023 Q3

## CENTRAL HASTINGS FAMILY HEALTH TEAM

<b>Progress Legend</b>	<b>Continue to Monitor</b>	<b>Review Required</b>	<b>Action Required</b>

### Quality Dimension: PATIENT CENTRED

Objective	Indicator	Reporting Frequency	2021-22 Performance	Target	Q1	Q2	Q3	Q4	Action / Commentary
Receiving and utilizing feedback regarding patient/client experience with the primary health care organization	Percentage 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	Quarterly	83.9	90.0	93.7	89.2	89.1		CHFHT's Q3 performance of 89.1% has decreased slightly since Q2, but it is still 5.2% higher than the Q4 value for 2021-2022. This reflects the efforts of Primary Care Practitioners in asking patients whether they have any questions about their treatment options.

### Quality Dimension: EFFECTIVE

Objective	Indicator	Reporting Frequency	2021-22 Performance	Target	Q1	Q2	Q3	Q4	Action / Commentary
Diabetes: Provide education and assist patients for better self-management, control and understanding	Percentage of patients with diabetes, aged 40 or over, with two or more glycated hemoglobin (HbA1C) tests within the past 12 months	Quarterly	89.2	91.0	89.5	90.3	90.5		CHFHT's performance increased by 0.2% in Q3 to 90.5%. It vastly exceeds both the Ontario rate of 46.6% and the LHIN rate of 53.9% (March 2022 data from the Primary Care Practice Report). Performance on this indicator is now higher than it was in 2020-2022 when there had been a sharp decline in in-person visits.

Objective	Indicator	Reporting Frequency	2021-22 Performance	Target	Q1	Q2	Q3	Q4	Action / Commentary
Reduce the incidence of cancer through regular screening	Percentage of screen-eligible patients aged 50 to 74 years who had an gFOBT/FIT within the past two years or colonoscopy or flexible sigmoidoscopy within the past 10 years	Quarterly	66.5 [Sept 2021 Primary Care Practice Report]	67.5	63.1	64.6	65.1		CHFHT's Q3 performance on this indicator was 65.1%, a 0.5% increase since Q2. This is lower than usual for CHFHT, but it higher than the 61.2% rate for Ontario and the 63.7% rate for the LHIN region (March 2022 data from the Primary Care Practice Report). Patients overdue for colon cancer screening will be referred for FIT kits.
Objective	Indicator	Reporting Frequency	2021-22 Performance	Target	Q1	Q2	Q3	Q4	Action / Commentary
Reduce the incidence of cancer through regular screening	Percentage of screen-eligible patients aged 21 to 69 years who had a Pap test within the previous three years	Quarterly	63.5 [Sept 2021 Primary Care Practice Report]	65.5	60.5	59.9	66.9		CHFHT's Q3 performance on this indicator was 66.9%. This is lower than our past Pap screening rates, but it is much higher than the Ontario rate of 50.3% and the LHIN region rate of 58.3% (March 2022 data from the Primary Care Practice Report). During the pandemic, there had been a drop in the number of patients up to date for cervical cancer screening due to pandemic limitations on in-person clinic visits. As well, nursing staff had the additional workload of CoViD-19 vaccine booster clinics. The rate is improving now that the RNs and the RPN have been trained to complete Paps. As well, evening Pap clinics provided better access for patients who work out of town. There have been up to 5-month processing delays at LifeLabs, so the search was changed to look for the requisition as well as the results, resulting in a 7% increase.

Objective	Indicator	Reporting Frequency	2021-22 Performance	Target	Q1	Q2	Q3	Q4	Action / Commentary
Reduce the incidence of cancer through regular screening	Percentage of screen-eligible patients aged 50 to 74 years who had a mammogram within the past two years	Quarterly	48.8 [Sept 2021 Primary Care Practice Report]	50.0	53.8	54.8	56.2		CHFHT's Q3 performance on this indicator was 56.2%, a 1.4% increase since Q2, and much higher than the target that had been set based on Practice Report data. It is also far higher than the 51.2% rate for Ontario and the 52.9% rate for the LHIN region (March 2022 data from the Primary Care Practice Report). Since 2020, there had been a drop in the number of patients up-to-date for breast cancer screening due to pandemic shutdowns of OBSP sites. Many patients are likely overdue for screening because of travel issues, given that the closest mammogram sites are in Belleville and Peterborough. To increase the accessibility of mammography for CHFHT's patients, potential remedial strategies will be considered (e.g., requesting a local visit from the Screen for Life Coach, creating a handout listing social supports related to transportation etc.)
Objective	Indicator	Reporting Frequency	2021-22 Performance	Target	Q1	Q2	Q3	Q4	Action / Commentary
Reduce the incidence of pneumonia	Percentage of patients aged 65 and over who have been immunized with Pneumovax (P-23)	Quarterly	73.2	78.0	76.1	76.3	76.8		This indicator was adopted because Pneumovax is free for all adults aged 65 and older and, according to Public Health Canada, 40% of pneumonia cases are in adults aged 60 and over. In Q3, 76.8% of patients aged 65 and over at CHFHT were immunized with Pneumovax, a 0.5% increase from Q2. Patients attending the clinic sites for other reasons will be encouraged to get a Pneumovax vaccination.

Objective	Indicator	Reporting Frequency	2021-22 Performance	Target	Q1	Q2	Q3	Q4	Action / Commentary
Improve the health of patients with COPD	Percentage of patients with a COPD diagnosis who have been vaccinated for pneumonia	Quarterly	78.1	80.0	78.8	79.5	78.5		It is important that patients who have COPD be vaccinated against pneumonia to reduce the incidence of acute exacerbations of their disease. The vaccination rate decreased from 79.5% in Q2 to 78.5% in Q3 due to an increase in the number of COPD patients diagnosed.