

# HOW LEADERSHIP CAN RE-IGNITE QI

Traversing the terrain from data to decisions

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# Land Acknowledgement

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# Disclosure of Financial Support

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- The planning committee developed the conference objectives which do not include sponsorship products or services.
- There are no sponsorship funds that have been received for this event.
- The committee has reviewed the content of the presentations and ensured that content presented is evidence-based and free of undue influence.



# Tina Nicholson Personal COI slide

| Tina Nicholson                     |   |
|------------------------------------|---|
| Honoraria, other rewards           | University of Calgary, Cumming School of Medicine :-<br>Medical Director Family Medicine, Offices of CME&CPD and Physician Learning Program<br>DFM – Clinical Lecturer<br>CFPCN – Physician Champion, Cochrane Child and Youth Collaborative<br>CanReach and REACH Institute Faculty teacher<br>CADDRA – board member<br>Medicine SCN : Core committee and Kidney Section member<br>HQCA- Member of Steering Committee and Subject Area Working group |
| Speakers' Bureaux, advisory boards | Elvium; Purdue  |
| Grants, clinical trials            | None  |
| Patents, royalties                 | None  |
| Other influential affiliations     | None  |



# Oliver David Personal COI slide

| Tina Nicholson                     |   |
|------------------------------------|---|
| Honoraria, other rewards           | University of Calgary, Cumming School of Medicine :-<br>Medical Director Community Practice, Physician Learning Program<br>Primary care lead ASI – orthopedics – Calgary Zone<br>Physician Advisor – HQCA – Panel reports/steering committee<br>Mosaic PCN – member, former Medical Director<br>former Primary Care lead specialty integration – Calgary Zone<br>Mint Memory Clinic physician |
| Speakers' Bureaux, advisory boards | Roche   |
| Grants, clinical trials            | CIHR  |
| Patents, royalties                 | None  |
| Other influential affiliations     | None  |



# Erin Hay Personal COI slide

| Tina Nicholson                     |      |
|------------------------------------|------|
| Honoraria, other rewards           | None |
| Speakers' Bureaux, advisory boards | None |
| Grants, clinical trials            | None |
| Patents, royalties                 | None |
| Other influential affiliations     | None |



What comes to mind  
when you hear Quality  
Improvement?

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# Learning Objectives

At the end of this session, you will be able to:

- Recognizing the **change in accreditation** requirement (PPIP)
- Identify organizations that have or can **mobilize data to support** QI activities in the Patient Medical Home
- Identify resources and supports that can **facilitate QI initiatives** in the medical home
- Identify **tools** that will align with PPIP/PD requirements
- **Select** amongst these different strategies/ resources those most relevant in addressing identified challenges and/or goals **specific for your context**





Regulatory Authorities

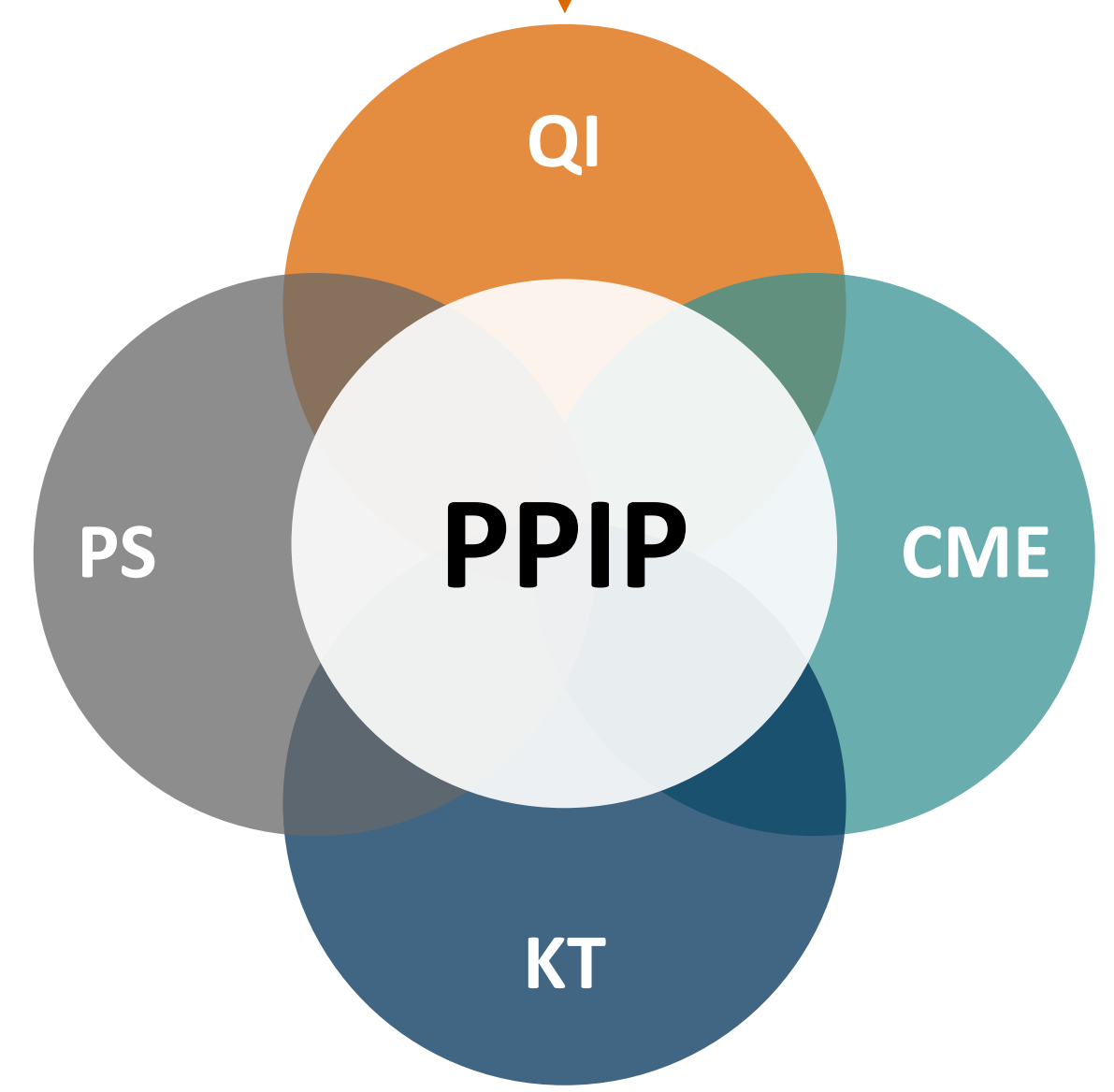
QI

Knowledge Translation

Patient Safety

Continuing Medical Education

Healthcare Delivery



COMMENTARY

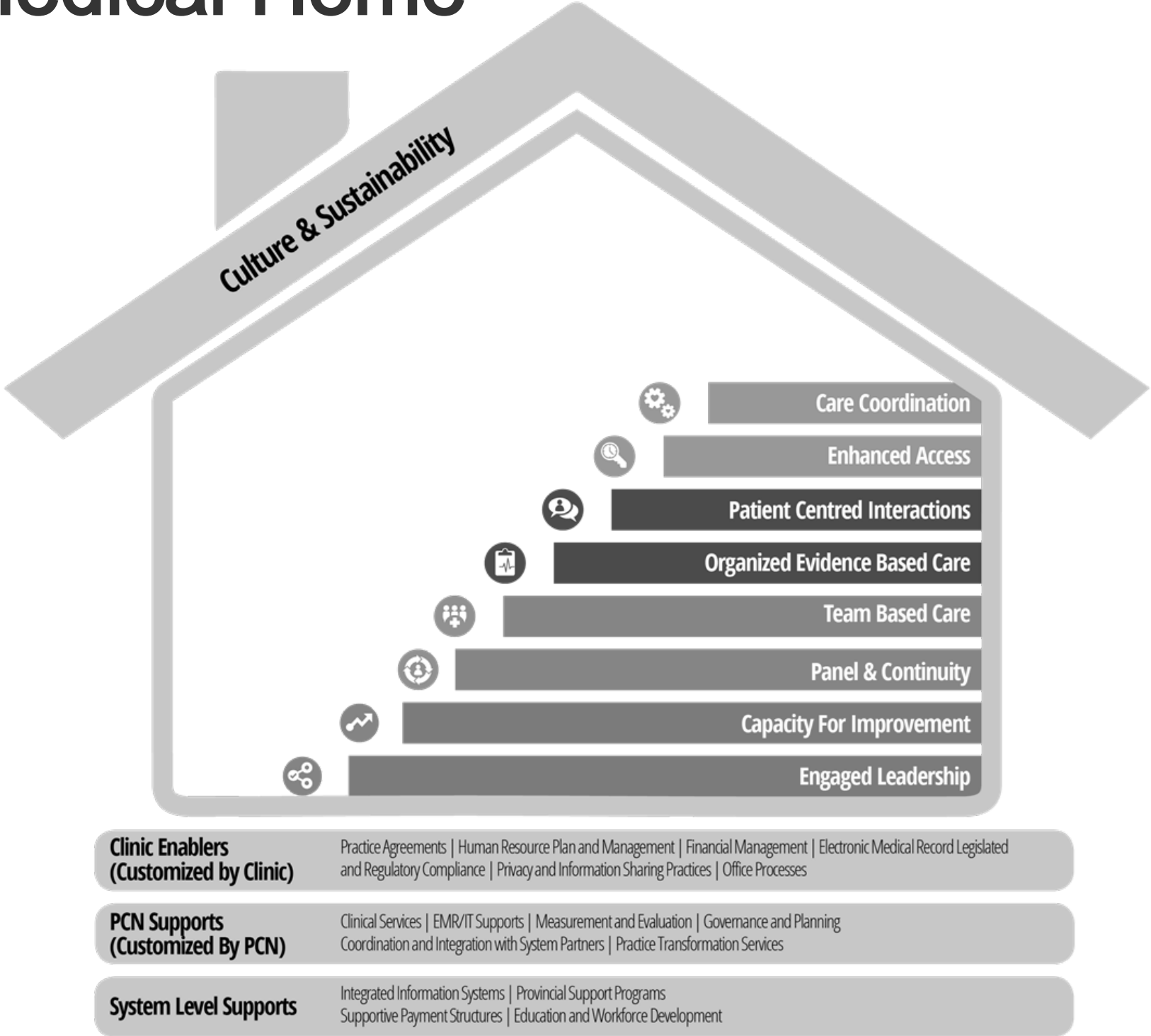
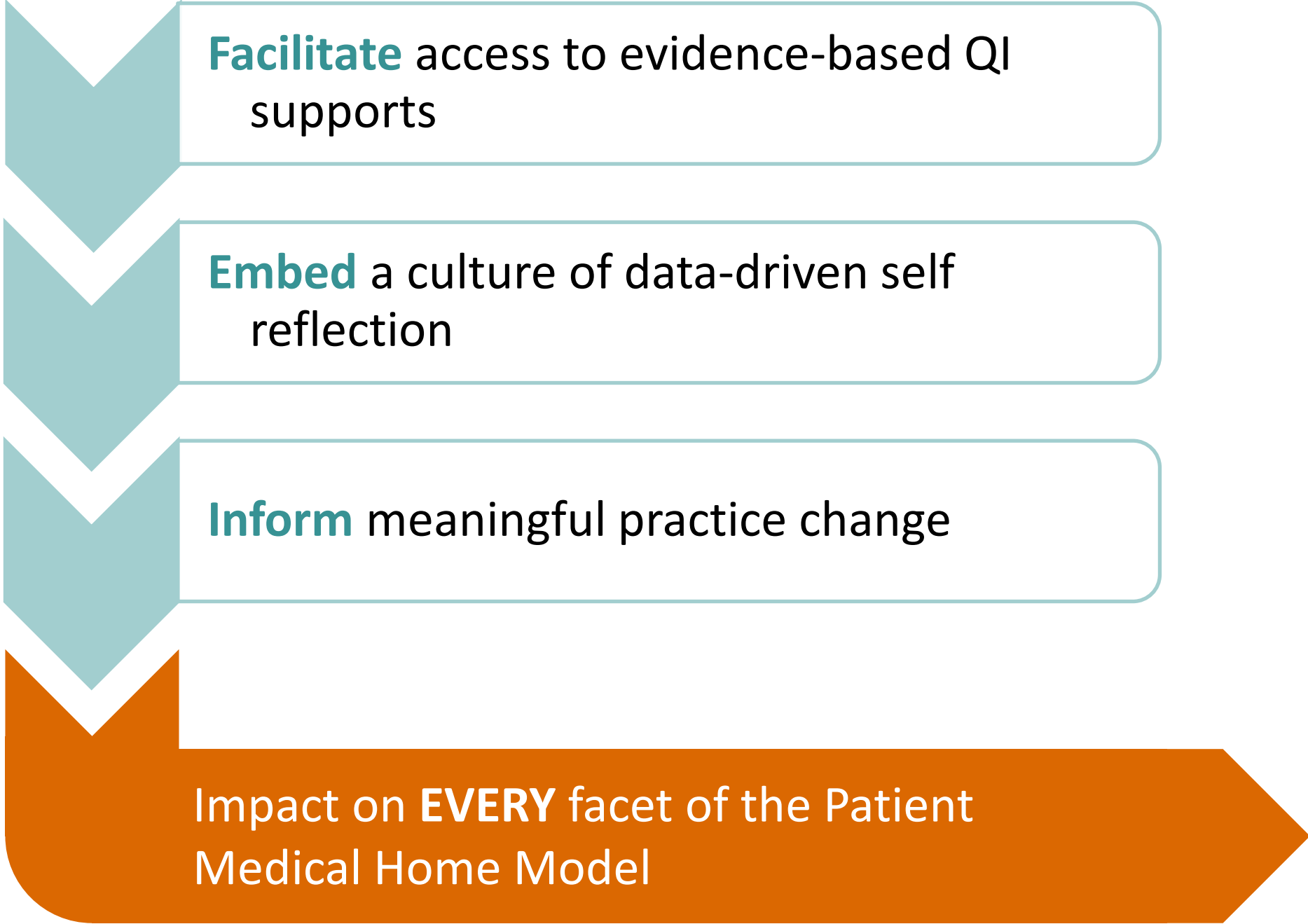


## Aligning continuing professional development with quality improvement

Wendy Levinson MD, Brian M. Wong MD

<https://www.cmaj.ca/content/cmaj/193/18/E647.full.pdf>

# Leadership Role in QI & the Patient Medical Home



# QA vs. QI

Focused on reporting mandatory KPI's OR Committed to driving practice change



# Where are you today?

What challenges are you currently encountering, making it hard to engage family physicians in QI?

PCN level | Clinic level | Your role

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# Why Quality Improvement?

## – A Physicians Perspective

“Just another thing that someone is dumping on you when you are already depleted?”

- Another demand
- Is the pandemic over?
- Is this the new normal?
- I need a break
- My IF reports on TNA – I can't do more
- I haven't got the time
- Stop bugging me...



## Reflecting on burn out ...

- + Effective group practice with team approach to QI
- + Engaged practice facilitator and receiving quarterly screening reports

### Clinic dissolved mid pandemic

- Different EMR
- Joining team without QI structure

Screening rates were **up in 90%**  
Now **down to about 40%**

"Why am I bothering, I have to start all over again. How am I ever going to catch up again?"

If you've done this before. Being a champion now will support your team/your patients and... you may be able to sleep



# A useful Motivational technique.....

# LEAP

**L**isten / **L**earn– What's important now/ causing worry/ creating extra work?

**E**mpathize/ **E**ducate and **E**ngage – remind why this can help...

**A**cknowledge and **A**gree on priorities

**P**artner and **P**lan





# Why Quality Improvement? - A Physicians Perspective

## Respond using motivational techniques..

- Another demand
- Is the pandemic over?
- Is this the new normal?
- I need a break
- I haven't got the time
- Stop bugging me...



- Data helps inform pandemic care gaps
- Knowledge reduces stress triggered by loss of control
- Self-reflection identifies opportunity for improvement
- QI enables you to regain control and ownership

**You are already doing QI every day with every patient**



QI is not something you do alone, but is a team sport



# QI myth -busting – Engaging Physicians

- Needs good quality data including comparisons
- Peer to peer delivery with coaching
- Use of physician champions with improvement facilitators
- Involvement of patients
- Ability to spread and scale accomplishments



“I need all these things - but I don’t have access too!”



# QI myth -busting – Engaging Physicians

- Needs good data including comparisons → • EMR data, compare to yourself, CPGs, HQCA
- Peer to peer delivery with coaching → • Involve your team, and engage support
- Use of physician champions with improvement → • You are a champion in your own practice, use that to optimize the supports available
- Involvement of patients → • Patients and their stories help identify your care gaps
- Ability to spread and scale accomplishments → • Share your successes and challenges with peers



“We do have access to all this stuff!”



# Optimizing Mammography Rates

## What factors contributed to success?

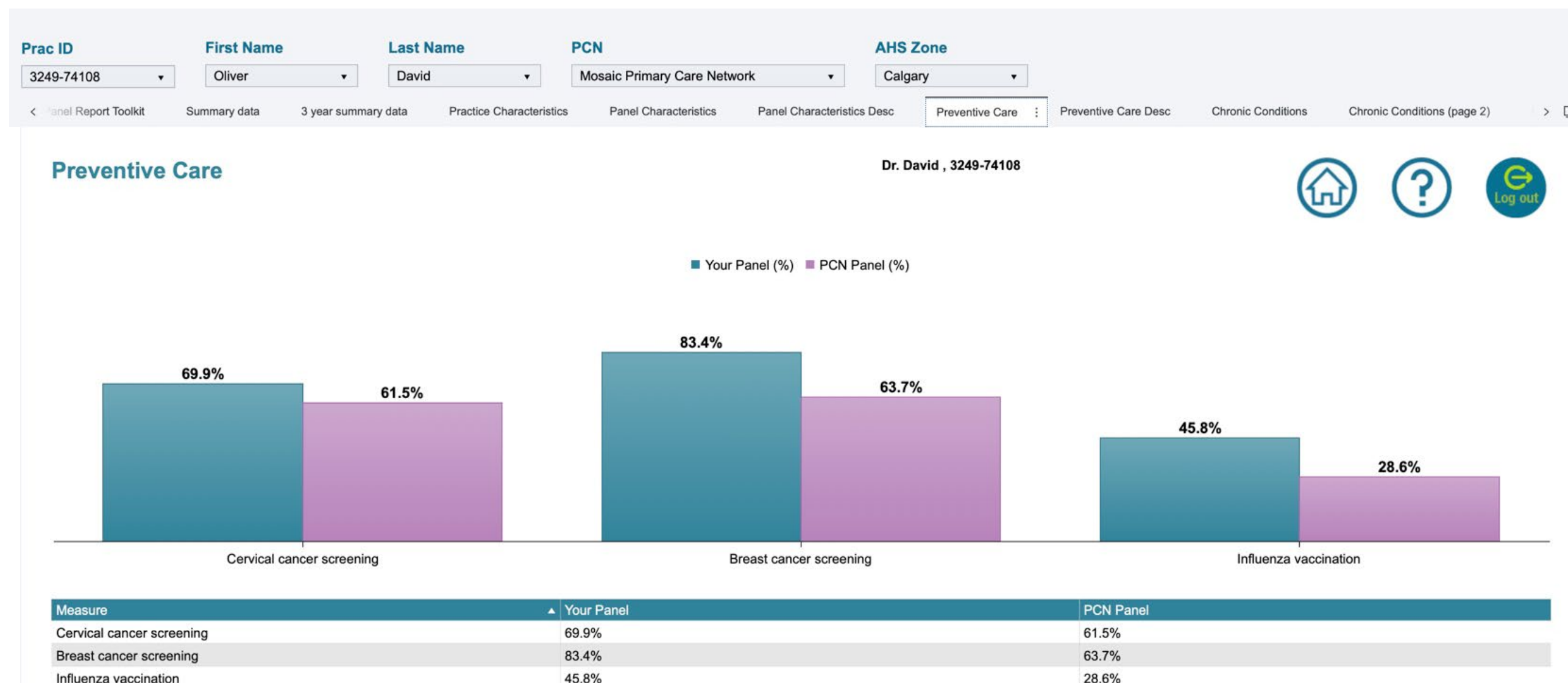
- It was **meaningful** to me and my patients
- I **involved my team** for support
- My PF helped me get my **HQCA report** which provided comparative data
- I involved my team in **creating a process** for identifying patients and setting reminders
- **My front desk staff** responded to reminder and contacted patients
- **Staff faxed** requisition to radiology clinic of choice for the patient
- **Radiology clinic booked** appointments

After initial role as champion, I removed myself from the equation and dealt with the results



# Mammography QI project results – to March 2021

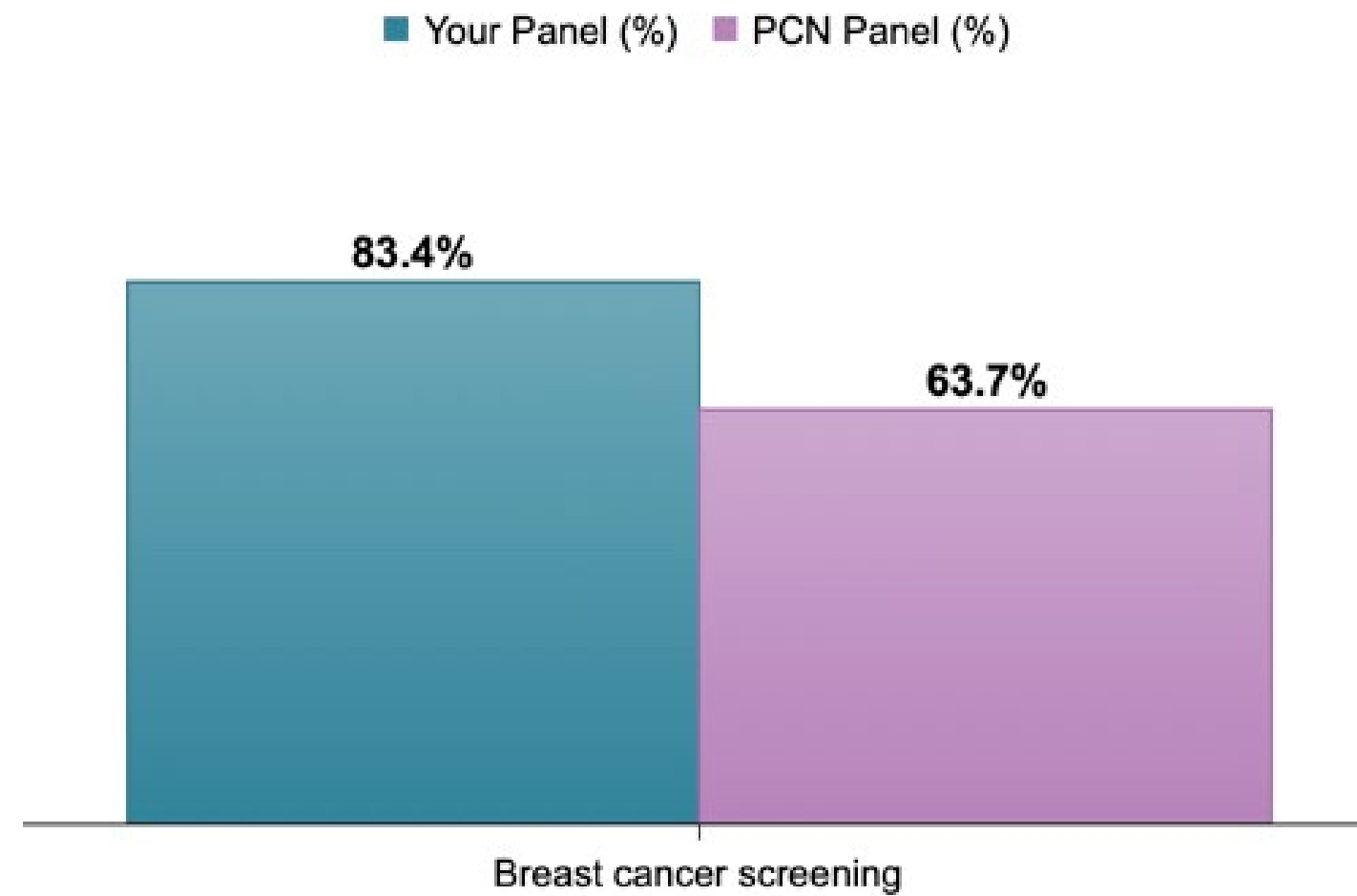
- CPL 1419
- Average age 49.7
- 2 doctor practice
- 2.5 MOA
- Access to PCN team



But.. things happen. This has to be an ongoing process of self-reflection



# Mammography QI project results – to March 2021



**But.. things happen. This has to be an ongoing process of self-reflection**



# Patient stories can Create a relevant PPIP Project.....

- 64 yo female
- Presented June 2022 with a breast mass
- Urgent imaging and biopsy arranged
- Confirmed high grade Invasive ductal carcinoma
- Subsequently on lumpectomy and node assessment found to have 3/13 positive nodes
- Last mammogram June 2019 – normal

**Despite having process in place – routine mammography was delayed**

**What happened? How could I use this as an opportunity to improve processes?**



## Debrief – This is what happened

Mammography process was paused → Pandemic

- Don't go to clinics unless you really need to
- Pt concerns with going to clinics
- Not diligently reviewing the data
- Resting on my laurels ( assumption)



**QI is deliberate** and an **active process** that needs to be reviewed periodically – which may trigger **new questions/opportunities**





# Physician Practice Improvement (PPIP)

Physicians will need to incorporate these 3 activities into their practice, at least once over a 5-year period:

- Practice-driven quality improvement activity using objective data
- A CPSA Standard of Practice quality improvement activity
- A personal development or wellness activity



# PPIP is designed to

- Encourage physicians to continually strive for small changes in their practice.
- Make quality improvement and personal development an everyday part of medical practice.
- Empower physicians to use objective data, peer and patient feedback, and self-reflection to identify areas for improvement.

Individual PPI can be drawn from broader QI initiatives

Should be relevant for the individual

Has to be appropriately documented to meet accreditation standards.....



# What can be used to support PPIP?



Federation of  
Medical Regulatory  
Authorities of Canada



Medical Home  
Supports

Practice  
Facilitators



2022 PCN Strategic Forum

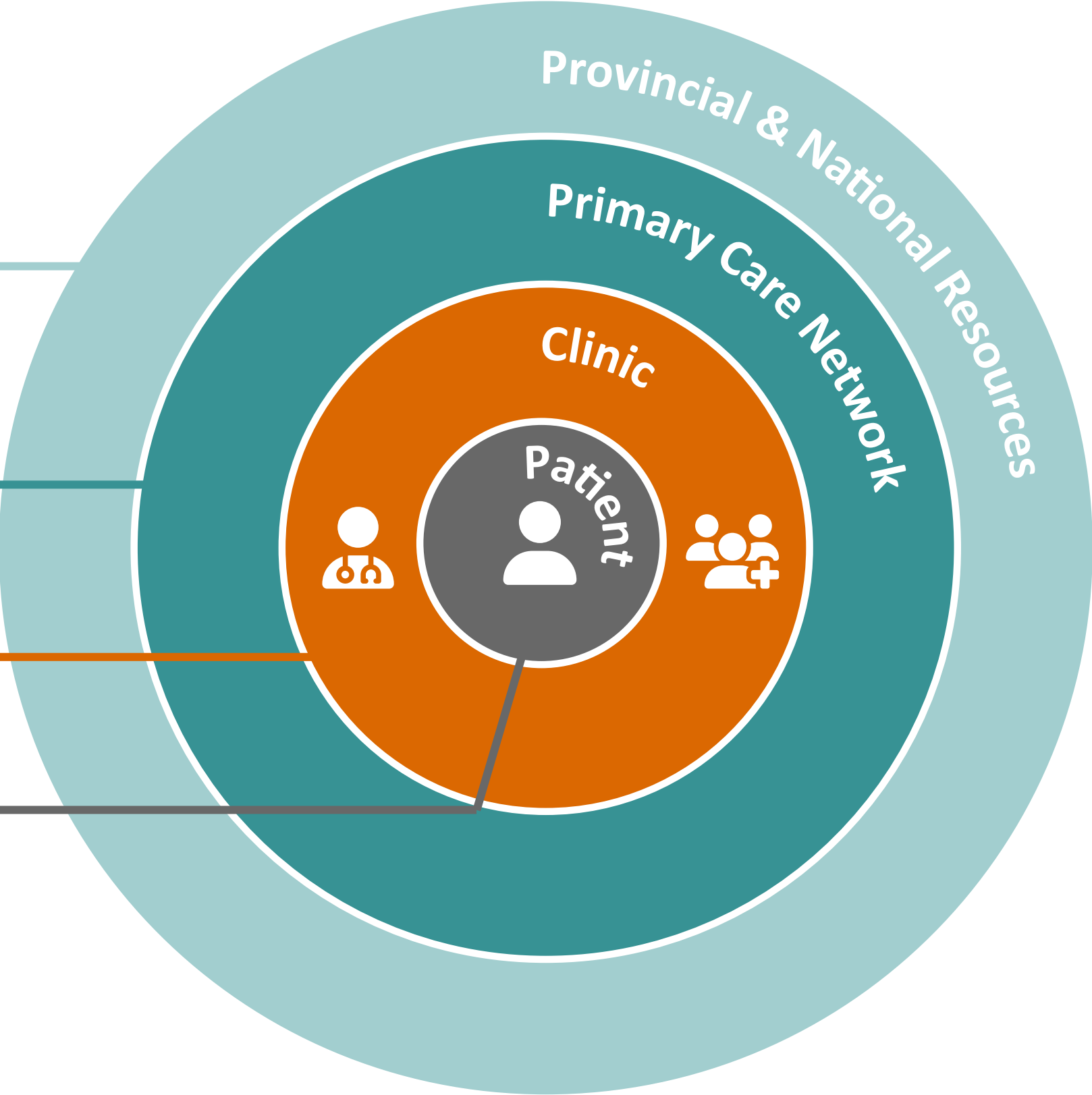
# QI is a team sport

- CPSA
- CFPC
- AMA - ACTT
- HQCA
- CPD Network
- Physician Learning Program
- CME/PD offices

- Practice Facilitators
- Panel managers
- Physician Champions
- Medical Home Supports

- Manager
- MOA
- Nurses
- Physicians

**Patient**



# Understanding ACTT / PFs

## ACTT – High Level Information with a spread and scale lens

- On demand training available on Privacy, Alberta Primary Care Explained, Panel in Action, PCN Governance, RIFS
- Resources for PMH, CII/CPAR, Practice supports (billing, HR, EMR selection), Health system integration
- EMR User guides specific to Alberta initiatives
- Change packages to follow for Panel Processes, Continuity, Screening and Prevention, Opioids, and more
- Coordinate PMH specific communities of practice

## Practice Facilitators – Boots on the ground, tactical force of change agents

- Consult with clinic teams to meet them where they are at
- Clarify, simplify, modify, and facilitate PMH related initiatives, projects, questions, and ideas
- Subject matter experts on PMH, change management, process improvement, facilitation
- Wayfinders



## How PLP supports evidence

### Facilitate interactive reflective session

Appropriate Prescribing - Geriatric anticoagulation

Improving use of healthcare resources- Lab Utilization

Syphilis: Responding to the Crisis in Primary Care

Choosing Wisely Appropriate lung testing (active development)

### Create actionable clinical information

Gut This – Dyspepsia pathways and resources

Urinary Incontinence Pathway

Diabetic Kidney Disease Pathway (SGLT2) (active development)

Cholesterol Shared Decision tool (active development)

## -based PPI in the medical home

### Data driven practice improvement

Mosaic PCN – Data to Decisions series

### Embedded and partnerships with

SCN, Choosing Wisely, HQCA

### Support Documentation and Accreditation of PPIP



MyPI



My Lifelong Learning Plan™



2022 PCN Strategic Forum



Physician  
Learning  
Program



# MyPI my Practice, my Improvement

Virtual Tool to support Physician Practice Improvement

Three-credit-per-hour Assessment program for up to 45 Mainpro+ credits

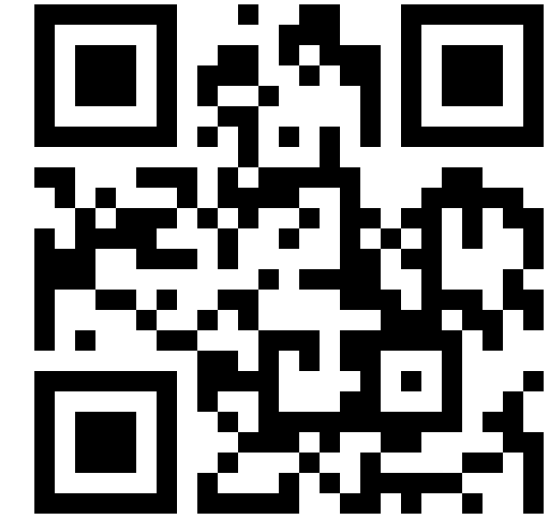
DCE (direct credit entry) available as you complete your activity

Aligns with CPSA PPIP requirements

Ability to add a practice facilitator to keep you accountable

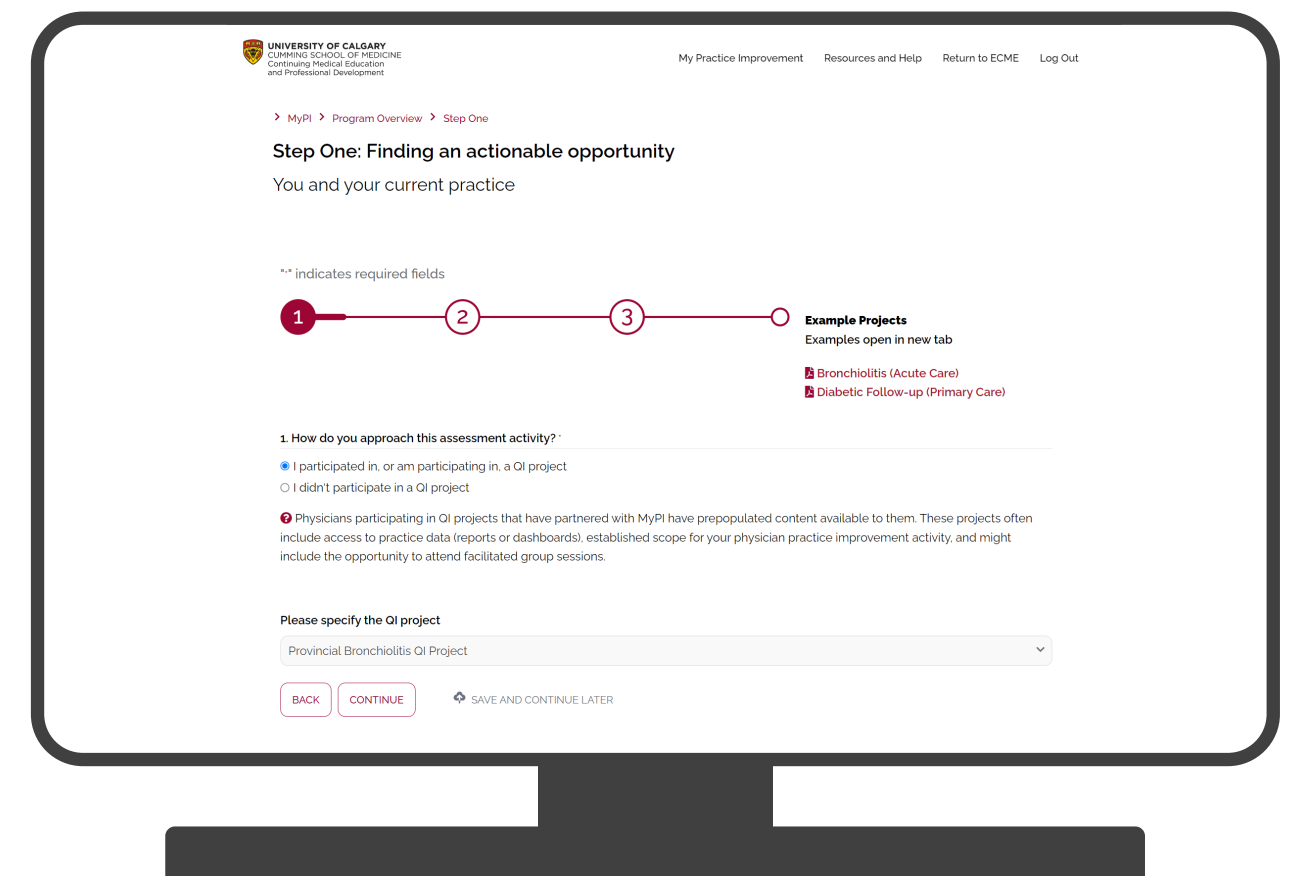
Available for physician across the province

For more information or to start documenting your practice improvement activity



Scan the QR code

Or visit: <https://ecme.ucalgary.ca/my-pi/>





# MyPI my Practice, my Improvement

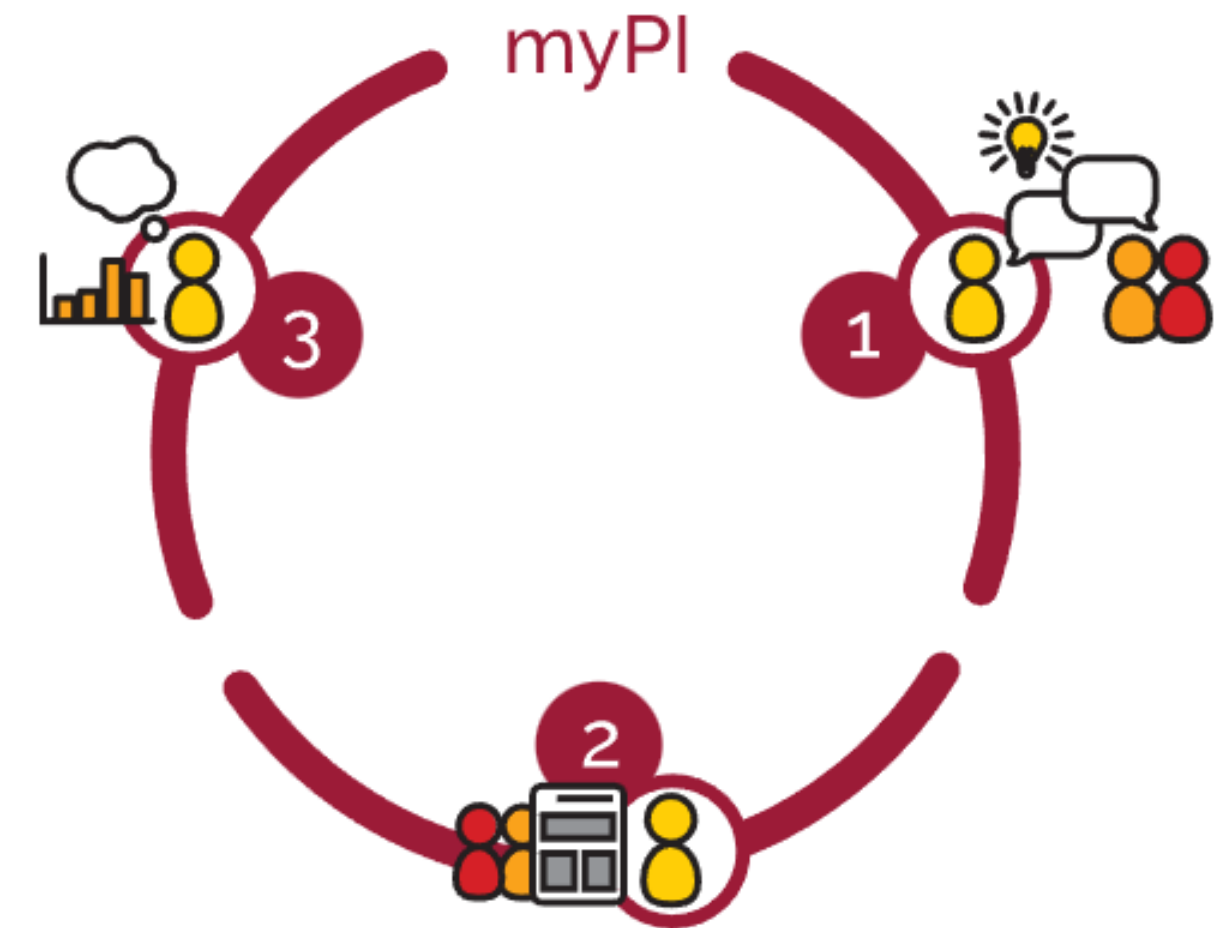
PCNs can partner with the PLP and **MyPI** to set-up projects and provide physicians with **prepopulated answers and guidance for Step 1 & 2.**

## Benefits physician:

- Facilitates meaningful self-reflection and efficient documentation of practice improvement activities
- Streamlines submissions for PPIP accreditation

## Benefits PCN:

- No need to separately accredit your QI activities,
- Provides ability to access anonymized data on progress, and allowing tailored supports to physician needs



1. Find an actionable opportunity
2. Create an action plan
3. Review your progress



# Roles of PCN Leadership

- Implement the Patient-Centered Medical Home
- Model strong motivation for change
- Champion evidence-based practice
- Optimize use of team
- Facilitate networking across clinics and teams
- Facilitate PPIP
- Support Federal and Provincial recommendations for adoption at the ground level where appropriate



How could you as  
PCN support PPIP?

How can PPIP  
influence PCN QI?

Take time with those around you to  
discuss (5 min)

Write your key ideas on Menti

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# Evolving PPIP to PCN wide QI?

Model and embed a **culture** of data informed self-reflection to support QI initiatives and lead to quality patient care whilst supporting physicians and their teams



# Parallel Play



# Cooperative Play



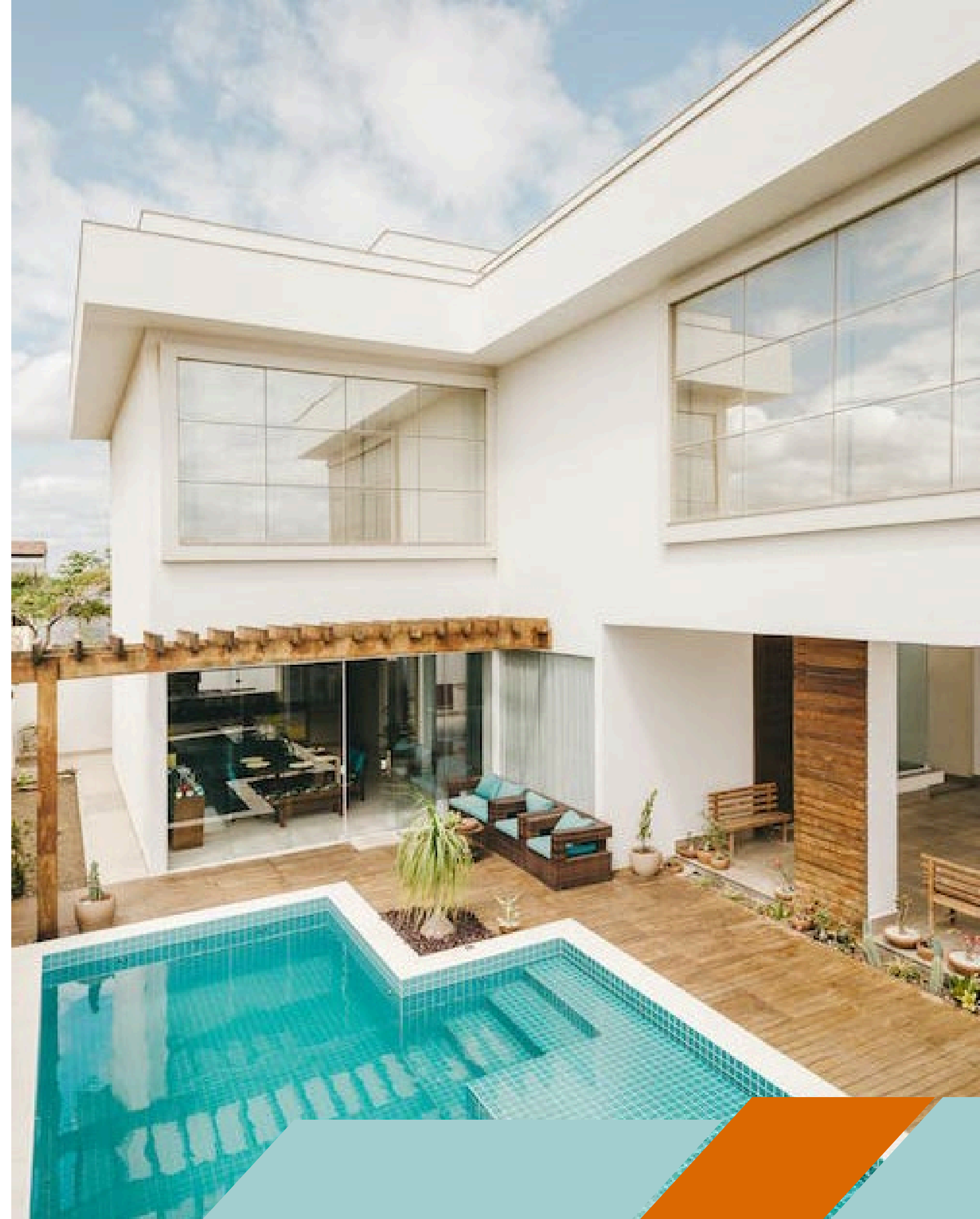
# Patient's Medical Home

Support access to evidence-based QI supports

EMBED a culture of data-driven self reflection

Inform meaningful practice change

Impact on **EVERY** facet of the Patient Medical Home Model





**Questions?**



Thank you for  
attending!



# Resources



## CPSA

PIIP Information & esources available online  
<https://cpsa.ca/physicians-competence/ppip/>



## CFPC

Professional Learning Plan  
<https://www.cfpc.ca/en/education-professional-development/cpd-at-cfpc/professional-learning-plan-plp>



## HQCA

Request a Primary Healthcare Panel Report  
<https://request.hqca.ca>



## Physician Learning Program (PLP)

<https://www.albertapl.ca> or e-mail: [PLP@ucalgary.ca](mailto:PLP@ucalgary.ca) / [PLP@ualberta.ca](mailto:PLP@ualberta.ca)



## My Practice Improvement (MyPI)

<https://ecme.ucalgary.ca/my-pi/>



## My Lifelong Learning Plan (My L3 Plan)

<https://www.ualberta.ca/medicine/programs/lifelong-learning/my-l3-plan.html>



## EPIQ

The EPIQ Workshop: Training front-line teams in quality improvement methods  
<https://www.ualberta.ca/medicine/programs/lifelong-learning/quality-improvement-training/index.html>

## Medical Home Supports

### Patient's Medical Home Website

<https://patientsmedicalhome.ca/>

### Provincial Networks of Practice

<https://actt.albertadoctors.org/NoP/Pages/default.aspx>

- Provincial Practice Facilitator Network
- Provincial EMR User Group Networks (Accuro, MedAccess, HealthQuest, CHR\*)
- Provincial Physician Champion Network

### Accelerating Change Transformation Team - ACTT

<https://actt.albertadoctors.org/pages/default.aspx>

### Institute for Healthcare Improvement

<https://www.ihl.org/>

### Alberta PROMS and EQ-5D Research and Support Unit

<https://apersu.ca/>

### ARECCI – A pRoject Ethics Community Consensus Initiative

<https://albertainnovates.ca/programs/arecci/>

