

Aligning policy and building capacity for quality improvement: The Chinook PCN - Edmonton PLP AQI ongoing partnership

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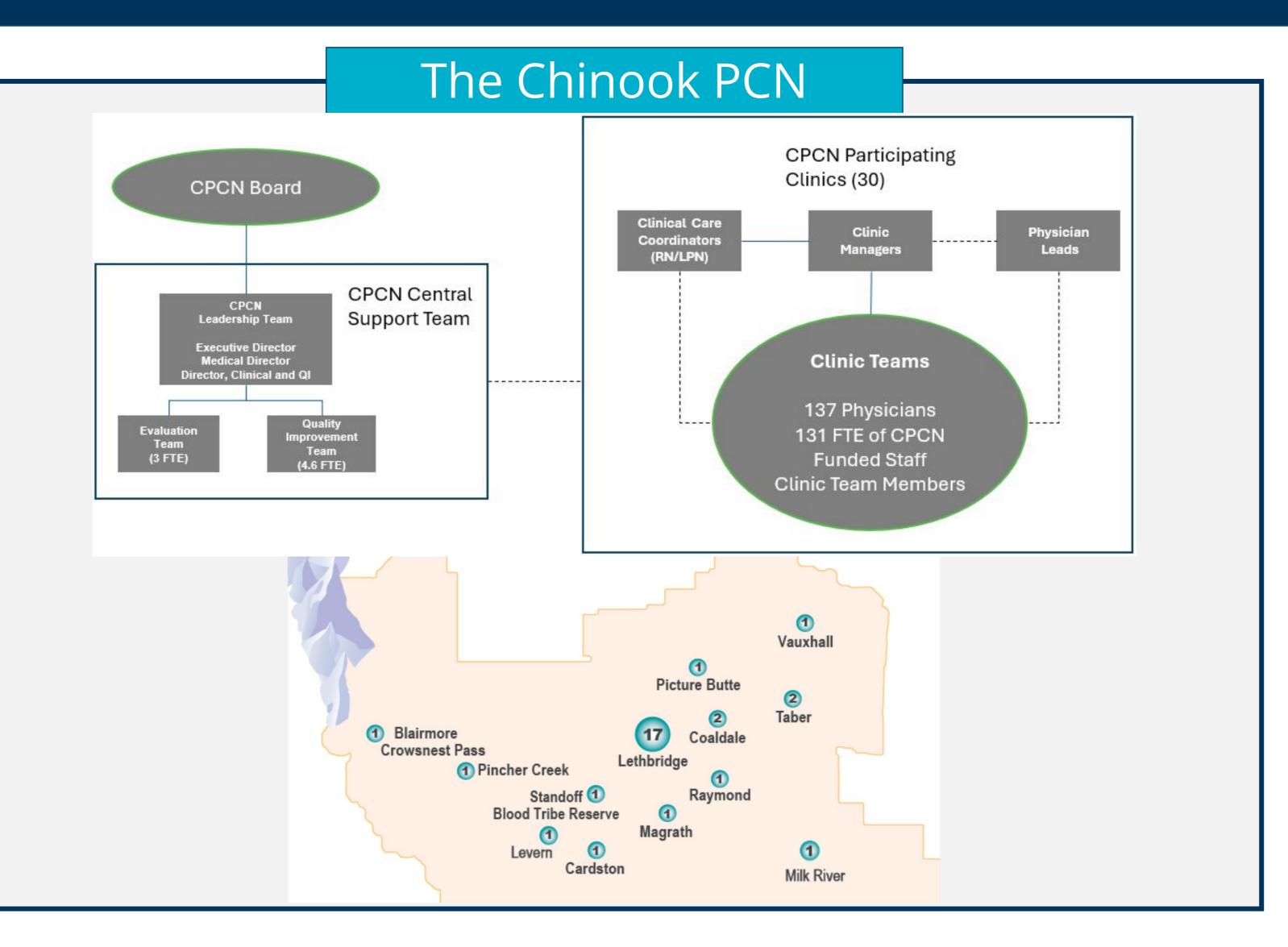
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Background

<u>Background</u>: The Chinook PCN (CPCN) is collaborating with PLP Edmonton and the Office of Lifelong Learning (L3) to support building sustainable quality improvement infrastructure and carry out partnered improvement projects that will help physicians and their teams advance practice. L3 delivered 2 AQI workshops with the train-the-trainer model, which strengthened CPCN's infrastructure and capacity to deliver QI workshops throughout their network.

<u>CPCN Rationale for Partnership</u>: CPCN identified this partnership as an opportunity to update and align their improvement team policy informed by the work of the AQI workshops and to have a common language around QI throughout the PCN and clinics.

PLP Rationale for Partnership: Quality improvement activities are important in health care, however, resources and supports vary across the healthcare continuum. Primary Care Networks (PCN) are hiring practice facilitators to direct and facilitate QI work throughout the network. Regulators now require all physicians to complete a quality improvement cycle for maintenance of ongoing certification. These new requirements increase the urgency for conducting quality improvement work. As the urgency to conduct QI work increases, so too does the need to for QI training capacity building. The PLP, in collaboration with the Office of Lifelong Learning's Advanced Quality Improvement (AQI) program, partnered with CPCN to support quality improvement training and capacity building for CPCN members and physicians. In addition, the partnership provides ongoing development and implementation support for quality improvement projects.



Physician Learning

Program



allowing for CPCN staff to be trained to lead workshops.

(CCC).

Improvement Program (PPIP) into existing tools to better support physicians engaging in quality.

work with clinics and groups to continue the work. In December CPCN hosted 4 more sessions, 3 in clinic and one general clinic workshop.

Capacity Building:

• Approximately 120 CPCN team members have attended an AQI workshop

Trainer Status:

• Six members of the CPCN team members available to deliver AQI workshops.

Workshops and training completed:

- CCC Development Day- June 2023.
- Three CPCN open workshops
- Four CPCN clinic-specific workshops

Scheduled workshops:

- 3 Open Workshops: June, July, August 2024
- 2 Clinic-specific workshops

QI Projects That Have Resulted From Workshops:

- Diabetes Management Use of A1C Point of Care Machine.
- Forms Sharing the administrative load of forms between physicians, nurses and MOAs.
- Increased Efficiency Decreasing no shows, engaging newcomers.
- Demographic Validation Importance of this and project to improve.
- Medication Reconciliation Nurse- and physician-led.
- Urgent Referrals Get current with CPSA standard.
- Phone Call Management Decreasing number of calls going to nurses.
- Prescription Refills Increasing efficiency and decreasing urgent Rx refill requests.
- Handwashing Campaign Decrease sick calls.

Testimonials:

"One of the major benefits of having the CPCN staff facilitate the EPIQ training in our clinic is the opportunity to identify and work through actual clinic issues and concerns. EPIQ sessions offer a great opportunity for team members to contribute in ways they may not be able to during a regular clinic day. These discussions also help some staff gain a better understanding and respect for the roles and responsibilities of team members with whom they may not have consistent contact. Having CPCN staff as facilitators is helpful, especially as they continue to offer our team support as we integrate the EPIQ tools into our ongoing QI initiatives. These endeavours become much less intimidating when you know you have the CPCN staff as a part of your team" Robin Thoen, CCC Crowsnest Medical Clinic

Impact and Lessons Learned

Impact

- Delivering workshops in-house has developed a common, shared QI language throughout the network to focus on what can be done.
- For the CPCN, "it's become our language" for QI work.
- Encouraged clinics to speak to and work with each other sharing, spreading, and scaling up the QI work and improved practice.
- Direct support from leadership and governance this has allowed clinics and staff to buy in.
- Working with the PLP to adapt a workshop tool to better support CPCN processes and reporting and physician professional development activities and requirements

"Frustration is gold" and Lessons Learned

- We found the EPIQ case study did not resonate with Primary Care staff. We created a primary care example and found that this better demonstrates how EPIQ tools can be used in a clinic environment.
- Every group is different and will interact differently with the content. Because of EPIQ's emphasis on group work vs theory no two workshops are the same.
- The QI process requires a certain level of vulnerability within the team. Facilitators must be prepared to manage team dynamics and emotions.
- The tools are simple, but the application of the tools is complex. Through teaching these workshops the facilitators have gained a degree of mastery over the tools. Through application in group work the participants learn to do by doing.

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